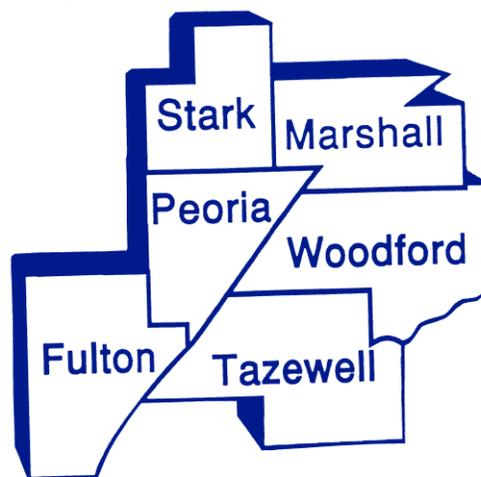


**CENTRAL ILLINOIS AGENCY ON AGING, INC.  
700 HAMILTON BOULEVARD  
PEORIA, IL 61603**

**PUBLIC INFORMATION DOCUMENT  
FY 2020 AMENDMENT TO THE  
FY 2019, FY 2020, FY 2021  
AREA PLAN ON AGING**

**PUBLISHED APRIL 22, 2019**



**“PROMOTING INDEPENDENCE, CHOICE AND ACCESS TO SERVICES FOR  
ALL AGES, INCOMES, ABILITIES”**

# Notice of the Public Information Document and Public Hearings

The presentation of this Public Information Document represents a summary of the Central Illinois Agency on Aging, Inc.'s (CIAA) proposed FY 2020 Amendment to the FY 2019, FY 2020, and FY 2021 Area Plan on Aging. The public Information Document will be presented at three Public Hearings, as listed on the next page.

- CIAA will present a summary of comments received to the Planning Committee by June 6, 2019, Area Advisory Council June 10, 2019 and to the Board of Directors June 24, 2019 after which a copy of comments and official response will be available upon request.
- Any comments on the proposed to the Area Plan on Aging must be received by May 29, 2019 and may be submitted in writing or by e-mail as follows:

**ATTN: Keith Rider, President/CEO**  
**Central Illinois Agency on Aging, Inc.**  
**700 Hamilton Boulevard**  
**Peoria, IL 61603**  
**Phone: (309) 674-2071**  
**Toll Free (877) 777-2422**  
**FAX: (309) 674-3639**  
**E-mail: [ciaa@ciao.net](mailto:ciaa@ciao.net)**

# Purpose of Public Information Document and Public Hearings

CIAA will hold three Public Hearings to inform older persons, caregivers, and other interested persons about the proposed FY 2020 Amendment to the FY 2019, FY 2020, and FY 2021 Area Plan on Aging which covers CIAA planning and service area (PSA 04) covering the counties of Fulton, Peoria, Marshall,, Stark, Tazewell, and Woodford. The hearings will focus on CIAA's plan for providing access to needed services and giving attention to the State of Illinois Statewide Initiative and CIAA's Area Plan Local Initiative. The public hearings will also provide information on funding, budget, priorities, and future plans. The Public Information Document (PID) will be presented at three Public Hearings, as listed below:

Tuesday, May 14, 2019  
At 10:00am

**MAPLE MANOR**  
250 S. Main  
Canton, Illinois 61520

Thursday, May 16, 2019  
At 10:00am

**WASHBURN AMERICAN  
LEGION POST**  
104 E. Parkside Dr.  
Washburn, IL 61570

Friday, May 17, 2019  
At 10:00am

**PRINCEVILLE  
HERITAGE CENTER**  
325 N. Ostrom Ave.  
Princeville, IL 61559

# Central Illinois Agency on Aging, Inc.

## CIAA Mission Statement

Central Illinois Agency on Aging, Inc.'s Board, Council and Staff believe in the independence and dignity of older persons, and that each older person should, to the extent possible, be empowered to exert control over her or his own life. The Agency believes that all older persons should have access to needed services of quality, but targets funding for services for older persons with greatest economic need. The efforts of the Agency are based on needs and priorities of older persons, as identified by older persons themselves; the requirements of the State of Illinois and the Federal Government; and the expert opinions of Board, Council, Staff and other Provider Organizations.

## Who We Are

CIAA is an independent not-for-profit organization with a 45 - year history of providing service to older persons and caregivers. CIAA's guiding principles are:

- **BELIEVE** in the independence and dignity of older person;
- **EMPOWER** older persons to exert control over his or her own life;
- **INCREASE ACCESS** to needed services of quality;
- **TARGET** services to older persons with greatest economic and social need;
- **DEVELOP SERVICES** based on the needs and priorities of older persons.

With 99,131 persons age 60 years and older living in CIAA's six-county service area of **Fulton, Marshall, Peoria, Stark, Tazewell, and Woodford Counties**, CIAA strives to serve older persons and their caregivers in a holistic way through planning, coordination, program development, direct service provision, and advocacy.

Area Agencies on Aging are authorized by the Older Americans Act to provide services to older persons and their caregivers. CIAA is one of thirteen in Illinois and of 622 throughout the country. Area Agencies on Aging in Illinois are authorized by the Older Americans Act of 1965 as amended, and Illinois Act on Aging and the Illinois Department on Aging and have service areas that cover that entire state.

CIAA's Board of Directors is comprised of three representative members from each county and ex-officio members as determined. The Board of Directors makes decisions on policy, programs, and funding. The Area Advisory Council membership is based on the total population by county as outlined in the By-Laws. The Council advises the agency on the issues and needs of older persons and caregivers in our service area and on national issues that may affect older persons and caregivers.

# What we do as an Agency

CIAA does planning, development, coordination, and advocating for services and resources to provide services to older persons and caregivers in our service area. To best serve our constituents, CIAA funds several services and directly provides others.

## **Funded services provide the following:**

- **ACCESS:** information and assistance, assisted transportation, transportation, and care coordination
- **CAREGIVER/GRG:** counseling, information & assistance, respite, support groups, gap-filling, and education/training.
- **COMMUNITY:** congregate meals, disease prevention- health promotion, evidence based programs, and legal assistance
- **ELDER RIGHTS:** adult protective services and long term care ombudsman.
- **IN-HOME:** person – centered counseling, care coordination, gap-filling, home delivered meals, and outreach.

## **COORDINATION**

Coordination services performed by CIAA include working with other funding agencies and service providers to develop a network of services and benefits to meet the needs of older persons, family caregivers, and grandparents raising grandchildren, as fully as possible and to encourage providers to work together to meet the needs of older persons. Examples of coordination services include:

- Entering into agreements to work with other agencies and providers;
- Assisting groups interested in offering help to older persons, family caregivers and grandparents raising grandchildren;
- Acting as liaison between health care providers and facilities and agencies offering social services;
- Educating providers on available programs that are new or unfamiliar;
- Coordinating a forum(s) for the exchange of information and for developing working alliances among providers;
- Working with others to provide application assistance with Extra help, Benefit Access, Medicare Part D, weatherization assistance, utility assistance, housing opportunities, employment services, and disaster and other emergency relief; and

- Working with multiple providers of home-delivered meals, transportation services, mental health services, and senior centers to prevent duplication and encourage efficiency.

These services will be provided as a cost of supportive services commensurate with the requirements for administratively related direct services.

## **PROGRAM DEVELOPMENT**

Program development services include the creation of new services, or the expansion or improvement of existing services. Examples of CIAA's program development services are:

- Assessing needs of older persons, family caregivers, and grandparents raising grandchildren and making plans to meet their needs;
- Identifies planning issues, sets priorities, and develops new or expanded services and forms partnerships and collaborations with other organizations.
- Working with legislators, governing bodies, community groups, and others to start new services for older persons, family caregivers, and grandparents raising grandchildren;
- Helping service providers to expand their services to un-served communities or to underserved population groups, such as working to open congregate nutrition sites or figuring out how to make minority seniors and other culturally diverse groups aware that services are available;
- Meeting with community foundations and businesses to solicit their support of services for older persons, family caregivers, and grandparents raising grandchildren, so that new or expanded services can be offered;
- Providing assistance to grassroots organizations and other groups of volunteers and seniors to provide services; and, finding new sources of funds for services for older persons, family caregivers, and grandparents raising grandchildren.

These services will be provided as a cost of supportive services commensurate with the requirements for administratively related direct services.

## **ADVOCACY**

Through its Advocacy services, CIAA represents and supports older persons in their efforts to get services and benefits. Advocacy services include:

- Informing elected officials and private or public agencies of the needs of older persons;
- Helping older persons express their concerns to housing authorities, city administrations, township officials, other governmental bodies, and private organizations;
- Urging changes in methods used by providers that make it difficult for older persons to get the assistance they need;
- Holding public hearings or forums on the needs of older persons and distributing information about their needs;
- Informing older persons of legislative or other developments that affect them;
- Participating in community activities to meet the needs of older persons; and
- Working with emergency/disaster agencies, participating in development of emergency plans that address special needs populations, and helping older person in disaster situations.

These services will be provided as a cost of supportive services commensurate with the requirements for administratively related direct services.

## **OTHER ADMINISTRATIVE AND RELATED DIRECT SERVICES**

CIAA also performs services that plan, develop, manage, monitor, and evaluate services available to older persons. Among these are:

- Providing assistance to service providers in offering types of food that older persons prefer in nutrition programs;
- Helping transportation providers understand the special needs of some older persons;
- Setting priorities for legal assistance to meet the needs of older persons;
- Assisting providers of emergency services and services for older persons to develop quicker and better responses to emergency situations;

- Checking that services meet the needs of older persons;
- Developing the Area Plan and other documents through which Federal and State funds are made available for services in Central Illinois;
- Awarding funds through grants and contracts with local organizations for services that are needed by older persons;
- Managing information about the services provided and funds spent, and reporting this information to the State;
- Monitoring and evaluating services to assure that standards are met and older persons are helped in the most complete and best ways possible; working with the Area Advisory Council and Board of Directors, through which local citizens make key decisions and set policies about local services; and, working in partnership with other area agencies on aging and the Illinois Department on Aging to integrate local services into the best possible statewide network of services for older persons.

These services will be provided as a cost of supportive services commensurate with the requirements for administratively related direct services.

# Summary of the Results of the Needs Assessment and Planning Process

## **PLANNING PROCESS USED TO DETERMINE SERVICE PRIORITIES AND INITIATIVES**

The Planning Committee of the Area Advisory Council and staff work together to develop CIAA's Area Plan for services for older persons. Throughout this collaboration, information and insight are drawn from a variety of national, state and local sources and updated as frequently as additional information is available. Planning therefore is a continuous activity given inevitable changes occurring in society based upon identifiable needs, measurable resources, and sustainable outcomes. Central Illinois Agency on Aging, Inc. use a five-step planning process to determine the service priorities and initiative to be addresses during the Area Plan cycle. In addition to statistical reports and analysis, information gathered from seniors and caregivers themselves is invaluable and a vital part of the process used in the development of the Area Plan.

## **CIAA FY 2019: Illinois Association of Area Agencies on Aging (I4A) and Illinois Department on Aging (IDOA) Bimonthly Meetings**

President/CEO attends I4A Directors meetings, IDOA bimonthly and other meetings, participates in I4A and IDOA conference calls. The planned meetings and called conference provide an important foundation for implementing policies, planning, program development and coordination requirements for the Long Term Care (LTC), Aging and Disability Resource Network (ADRN), Adult Day Services (ADS), Care Coordination Units (CCU), and No Wrong Door among other programs, services, and initiatives. Major focus for the current three-year planning cycle have been to assist with the ADRN Statewide Initiative, continued development, and implementation of the ADRN and for the 2019-2021 implementation of the new statewide initiative to reduce social isolation for older adults in the six-county Planning and Service Area (PSA). Attendance at meetings, teleconferencing, and webinars are too numerous to summarize. The handouts, minutes of meetings and insights gained have been used to synthesize the information needed to prepare the Area Plan on Aging and its supporting documents.

## **CIAA FY 2019: Systems Development Program and Community Care Program Advisory Committee**

CIAA maintained staff monitoring and participation in the Community Care Program Advisory Committee (CCPAC), which meets some requirements of the Long Term Care Systems Development Grant (LTCSDG). The CCPAC meets bimonthly and provides information and insight to proposed legislation, pilot programs, changes in home and community services program operations and policies; planning, research, training, and development among other updates from the Illinois Department on Aging. These communications are important to CIAA's planning, program development, coordination, and advocacy activities. In addition, participation in the CCPAC meeting prepare CIAA staff to be available to the CCU's in our PSA 04, providing them with technical assistance, and working together to implement new programs, including the 2019-2021 implementation of the new statewide initiative to reduce social isolation of older adults through quarterly meetings with CCUs and No Wrong Door (NWD) and the reduction of social isolation through the Aging and Disability Resource Network (ADRN).

## **CIAA FY 2019: Aging and Disability Resource Network (ADRN) Core Partner and Advisory Committee Meetings**

ADRN Core Partners continued to hold meetings/conference calls to discuss local and statewide initiatives. The discussion involved area needs/unmet needs. The ADRN has assisted with development of a social isolation survey, which will be placed on survey monkey, CIAA website, and Facebook social media web page. The ADRN also participated in a needs and priorities survey. These exchanges did help to develop PSA 04's unmet needs priorities. Going forward ADRN and Core Partners focus is on CIAA Local Initiative and implementation of the 2019-20121 statewide initiative to reduce social isolation. ADRN also held a long-term care forum to discuss needs and gaps in services throughout PSA 04. Outcomes of forum were that services/awareness of services for those over 60 are not well known, especially in the outer counties of PSA 04 (Marshall, Stark, and Woodford). Transportation is always a great need and that more outreach needs to be done with the churches/faith community. The ADRN is also beginning a sub-committee to address social isolation for the FY 2020. Other feature presentations held/planned:

- ADRN Forum on Medicare/Medicaid and Social Isolation
- Hospital Discharge Planners
- Hospice/Palliative Care
- Center for Prevention of Abuse-Presentation on Self-Neglect

## **CIAA FY 2019: The Home Delivered Meal Survey**

Communities in CIAA's service still are unserved or underserved due to funding limitations. The population being served by this program is frail, with 77% of new home-delivered meal participants statewide being at high nutritional risk. In most counties (5 of 6) in CIAA planning and service area, the 75+ years and 85+ populations have seen increases. Invariably the number of frail individuals needing home-delivered nutrition services also will increase. In addition, realistically, many current participants could benefit from weekend meals and more than one meal per day. CIAA will be completing another HDM survey beginning in June.

## **Census Data/Studies/Regulations**

A significant means of obtaining relevant data is the U.S. Census. Although dated and in many instances, being replaced by the American Community Survey.

With the most recent census data the over 60 population estimates provided by IDOA in PSA 04 are 99,131 with 9,544 being rural and approximately 23,565 living alone and in poverty. Prior to FY 2005, Fulton, Marshall and Stark counties were considered rural. At present, only Fulton County is considered rural.

## **CIAA: Service Providers Ongoing Dialogue and Reports of Unmet Needs**

Additional information on services, especially unmet needs and gaps in services, are collected from CIAA service providers at monthly meetings and through quarterly/monthly reports. Service providers were also given a CIAA planning needs and priorities survey to assist in understanding the needs, barriers, and gaps in services within PSA 04.

The information collected states that funding levels for services are not keeping up with costs for these services. This gap results in:

- Only meeting the demands that are the highest priority, such as indispensable medical trips for transportation services.
- Less legal assistance
- Very limited assistance for GRGs that are 55 years and older, but under 60 years old.
- Difficulty in identifying GRGs in outlying counties.
- No payments to support family caregivers who have to give up their income or even their job in order to provide care for their loved one.
- Limiting support groups for family caregivers.
- Restricted access to home services, an Ombudsman, and respite in rural areas.

Unmet needs, or the inability to meet all of the requested needs as identified by Information and Assistance at CIAA, include but are not limited to:

- Utility assistance
- Home repair
- Rental assistance
- Durable medical equipment assistance, such as hearing aids, dentures, eyeglasses, and lift chairs
- Medical and dental bill assistance
- Prescription medication assistance
- Respite care
- Home care

Results from all counties using the CIAA planning needs and priorities tool documented similarity of issues and service priorities, with differences not significant to overall priorities for use of state and federal funds available. All substantiated the inadequacy of funds, the importance of current services to their respective communities and the void that would be created should such services not be maintained. Quality of life issues for older adults, persons with disabilities, caregivers and the overall community were stated concerns together with the top three need being for nutrition, legal assistance, and transportation.

CIAA will plan to complete a SWOT Analysis (Strengths, Weaknesses, Opportunities and Threats) for the FY 2020

### **Ongoing: CIAA Area Advisory Council and Board of Directors Provide Ongoing Input**

CIAA's Area Advisory Council and Board of Directors have continued input into the needs of older persons and caregivers during Committee, Council, and Board meetings. Both Advisory and Board members completed a needs and priorities survey tool. The information from the Council and Board is vital to the planning process because of the commitment of these individuals to residents of the counties they represent and to the planning and service area as a whole.

- Results from all counties using the CIAA planning needs and priorities tool documented similarity of issues and service priorities, with differences not significant to overall priorities for use of state and federal funds available. All substantiated the inadequacy of funds, the importance of current services to their respective communities and the void that would be created should such services not be maintained. Quality of life issues for older adults, persons with disabilities, caregivers and the overall community were stated concerns together. Stated needs through the needs and priorities survey.

- Top Priorities
  - Nutrition
  - Transportation
  - Follow up medical after hospital discharge
  - More awareness of agency services
  - Mental health services
- Gaps in Services
  - Coordination of services
  - Recognizing and reporting of both mental and physical abuse
  - Transportation
  - Assistance in navigating the complexity of medical care and long term care options
  - Geriatric specific medical services
- Both the Board and Council have representative membership from all six-counties, and most members are themselves seniors and/or caregivers.

### **CIAA Marketing Committee**

Currently planning additional intergenerational events. Some ideas have been Hooked on Fishing, working with schools/seniors who have service hours to complete for graduation to visit nutrition sites to spend time with seniors. They are also forming an Education sub-committee to further educate caregivers. In addition, members of the marketing committee have begun visiting nutrition sites/senior apartment complexes, are talking to residents about needs/services, are also talking those at the congregate meal sites, and have developed a short survey regarding meal services, which will be used in the next planning year.

### **Other Relevant Studies**

CIAA particularly monitors studies that reflect issues and developments related to the service priorities identified for the use of federal and state funds. Often these are consistent with direct services and include such studies as the Illinois Department on Aging – Home-Delivered Meal Survey, Caregiving in the United States prepared by the National Alliance for Caregiving in collaboration with AARP; June 2015; MetLife Study of Working Caregivers and Employer Health Costs prepared by the National Alliance for Caregiving. Many studies have been published, surveys taken, and articles written on various aspects of aging. The anticipated increase in the older population has prompted much of this research that will continue to impact local planning and program development.

Other resources used to monitor developments for the statewide initiative on social isolation are Connect2Affect which was created to improve collective awareness of social isolation and loneliness as serious health issues and engAGED: The National Resource Center for Engaging Older Adults-n4a. CIAA has also receives local network reports (Brookdale Foundation Relatives as Parents (RAPP), surveys regarding services (Bradley University), 2018 Grandparents Raising Grandchildren Intergenerational Holiday Party Survey/Results (Bradley University Training and Research Clinic), and Community Forum Report & Development Plan (Alzheimer's Association)

- **Illinois Department on Aging – Home-Delivered Meal Survey**

Communities in CIAA's service still are unserved or underserved due to funding limitations. The population being served by this program is frail, with 77% of new home-delivered meal participants statewide being at high nutritional risk. In the majority of counties (5 of 6) in CIAA planning and service area, the 75+ years and 85+ populations have seen increases. Invariably the number of frail individuals needing home-delivered nutrition services also will increase. In addition, realistically, many current participants could benefit from weekend meals and more than one meal per day. CIAA is working with MSW Nutrition Provider to expand HDM services in Woodford County and has recently began HDM service in Avon (Fulton County) which is another area that has been unserved/underserved.

- **I4a The Aging Network: An Essential Partner for Managed Care**

The conclusion that the Illinois Department on Aging and Area Agencies on Aging should play a critical role in facilitating the statewide implementation of Long Term Services and Supports for individuals enrolled in managed care through the Integrated Care Program and the Medicare-Medicaid Alignment Initiative retains its relevancy.

Moreover, the Aging and Disability Resource Network (ADRN) is a national model that has been included in the Affordable Care Act as a single or coordinated point of entry for Long Term Services and Supports for older adults and persons with disabilities

- **Alzheimer's Association – Illinois Alzheimer's Statistics**

In the United States, an estimated 5.7 million people are living with Alzheimer's disease, including at least 800,000 who live alone. An estimated 16 million Americans will have Alzheimer's by 2050. The cost of caring for people with Alzheimer's and other dementias is projected to increase to \$1.1 trillion per year (in today's dollars) by mid-century.

CIAA is currently in the process of a collaboration with the Alzheimer’s Association and Heartland Health Services in an effort to increase awareness and provide education of services in Marshall, Stark, Woodford and Fulton Counties.

- **Caring Connection Caregiver Group and Participation in various local groups**

Participation, collaborations, and memberships in local groups that provide service older persons, caregivers, GRG, and persons with disabilities is another resource for information regarding needs and priorities throughout PSA 04.

- Caring Connections Caregiver group is currently in the process of forming a sub-committee to research and gather information to create an assessment tool/survey for a needs assessment.
- Participation in TRIAD, Human Services Collaborative, Senior Care Network, TRI-County Interagency Council, Illinois Coalition on Mental Health and, Illinois Partners.

CIAA plans to implement another caregiver tool using an adapted version of the Caregiver Daily Tool ODR (Observe, Document, Report) provided by Fall Prevention Services, LLC (Mike Bearce).

The purpose of the ODR is to

- To empower the caregiver to get down to basics.
- Reducing the emotional part of reporting observations to providers
  - i.e.: may report that individual has had incontinence for week due to frustration when the assessment shows that they have had it for two days.

Information obtained will be used to work in conjunction with Bradley University Caregiver Support Groups to assist caregivers in reducing their stress, begin to have a more disciplined approach to care, make better decisions, and assist with better interactions for the ones they care for.

- **Chronic Disease and Diabetes Self-Management**

The number of Americans who will suffer functional disability due to arthritis, stroke, diabetes, coronary artery disease, cancer, or cognitive impairment is expected to increase. The Chronic Disease Self-Management Program (CDSMP), known as “Take Charge of Your Health: Live Well, Be Well”, a workshop, for those with chronic illnesses and their caregivers, is evidence based through research at Stanford University Patient Education Research Center. It addresses the symptom cycle associated with chronic disease and gives specific tools for breaking that cycle.

The benefits of CDSMP include fewer emergency room visits, inpatient stays, and outpatient visits; health care cost savings of approximately \$590 per participant; improvement in exercise and ability to participate in one's own care over two-year period; improved health status in 7 of 9 variables: fatigue, shortness of breath, pain, social activity limitation, illness intrusiveness, depression, and health distress; improved health behaviors and self-efficacy in variables related to exercise, cognitive; symptom management, communication with physicians and self-efficacy.

- **A Matter of Balance:**

A Matter of Balance is a program designed to reduce fear of falling and increase activity levels among older adults. After completion of the program participants have shown improvements in their level of fall management, fall control, levels of exercise, and social limitations regarding concern about falling.

# Priority Services

CIAA has attempted to identify services that are most needed by older persons. Of greatest importance is continued support of existing services, upon which older persons have come to depend. Through the assessment of older persons' needs, provider service reports of unmet needs focus groups and forums, we learn older persons and family caregivers most need continuation of the following services.

- *ADULT PROTECTIVE SERVICES*
- *ADVOCACY*
- *CARE MANAGEMENT*
- *CAREGIVER ACCESS ASSISTANCE*
- *CAREGIVER COUNSELING,  
SUPPORT GROUPS AND TRAINING*
- *CAREGIVER INFORMATION*
- *CONGREGATE MEALS*
- *COORDINATION*
- *DISEASE PREVENTION –  
HEALTH PROMOTION*
- *GAP-FILLING*
  - ❖ *Caregivers/GRG*
  - ❖ *General Services*
  - ❖ *Caregiver Alzheimer's-Dementia  
Related Supportive Gap Services*
- *HOME-DELIVERED MEALS*
- *INFORMATION & ASSISTANCE*
- *LEGAL ASSISTANCE*
- *LONG – TERM CARE OMBUDSMAN*
- *OUTREACH*
- *PERSON - CENTERED COUNSELING*
- *PHARMACEUTICAL ASSISTANCE*
  - ❖ *Benefits Access*
  - ❖ *Medicare Part D*
  - ❖ *Senior Health Insurance Program*
- *PROGRAM DEVELOPMENT*
- *RESPIRE FOR CAREGIVERS*
- *SENIOR EMPLOYMENT SERVICES*
- *SOCIAL ISOLATION*
- *TRANSPORTATION*
- *ASSISTED TRANSPORTATION*

Funds for priority services are subject to availability under the Federal Older Americans Act and the Illinois Act on Aging through the Illinois Department on Aging. Priority services are available contingent on the availability of funds to Central Illinois Agency on Aging, Inc. (CIAA). In addition to funds available from CIAA, other resources are used to support the total costs of the services. Other resources include program income, other income and local contributions or match. The requirement for match is intended to promote and demonstrate local support for the services.

***Direct services provide the following: (Listed in Alphabetical Order)***

### **CAREGIVER INFORMATION, CAREGIVER ACCESS ASSISTANCE, & CAREGIVER TRAINING**

- Provides current information on resources and services with a focus on the unique situation of family caregivers and grandparents raising grandchildren.
- Provides assistance to identify needs of caregivers, linking the caregiver to resources and services available within their communities, and offering follow-up to ensure the needed services were received or resources were accessed.
- Develop and deliver caregiver education and training services as identified by accessing the needs of caregivers and input from Caring Connection, the Caregiver Coordinating Council.
- Provide respite services for eligible caregivers, provide assessment of need, process requests, and coordinate with respite providers, follow-up with caregivers.

### **GAP-FILLING**

- Provides financial assistance to individuals and family caregivers aged 60 and above, and grandparents aged 55 and above who are raising grandchildren, for services to meet their individual needs that they are unable to pay for by themselves nor by other community programs.
- Examples of gap-filling include, but are not limited to, payments for: utilities, rent, medical bills, dental bills, medications, medical devices (such as hearing aids and eyeglasses), and assistive devices (including lift chairs).
- Gap-filling helps an individual to maintain independence, delay institutionalization, and live in a safe environment.
- Financial assistance is available only if there are available agency funds.

## **GAP-FILLING**

### **Alzheimer's Disease & Related Dementia Services**

- Background and Program Description: As the number of older Americans grows rapidly, the numbers of new cases of Alzheimer's disease and related dementia will also increase. In 2016, it is estimated that Illinois had 220,000 individuals age 65 and older with Alzheimer's disease. It is projected that this number will increase to 260,000 (by 18 percent) by 2025 (Alzheimer's Association, 2016). With this increase in the number of persons with some form of dementia, Illinois will need to develop specialized services that will meet their needs, as well services that meet needs of family caregivers who provide ongoing care to the individuals with dementia.

CIAA plans to collaborate/partner with the local Alzheimer's Association as a source for referral which will be used for to provide person-centered supportive gap services.

Supportive Gap Filling Services: Since individuals with ADRD and their family caregivers have additional needs for support compared to older adults without cognitive impairment, some of the additional GRF will be used for a person-centered Supportive Gap Filling service which will address the unique needs of individuals with ADRD and their caregivers. This person-centered Supportive Gap Filling service was pilot-tested with temporary federal discretionary grant funds and has proven to be an effective program for family caregivers and individuals with ADRD.

Individuals with ADRD and their family caregivers will use the Supportive Gap Filling service to purchase goods, supplies, or items to meet their needs. The Supportive Gap Filling service will be used to pay for adult day services, behavioral health assessments and interventions, home health care, respite care, companion care, wanderer alarm systems, residential repair to make homes more accessible and other gap-filling needs of persons with ADRD and family caregivers.

## **INFORMATION & ASSISTANCE**

- Assesses the needs and problems of persons seeking assistance.
- Provides current information on services and opportunities that are available in the community to help meet those needs and solve those problems.
- Links the persons seeking assistance to the available resources.
- Follows up to ensure that the person received the needed services, accessed the opportunities, or solved the problems.
- Provides person-centered counseling with persons when necessary, which is a more in-depth session exploring various alternatives towards helping solve problems.

## **SENIOR EMPLOYMENT SERVICES**

- Provides direct employment services for individuals aged 55 and older through the Senior Community Service Employment Program (SCSEP) as described under the Title V of the Older Americans Act. SCSEP increases public awareness about employing the older worker, and promotes useful part-time training opportunities through cooperative working relations with community service agencies, businesses, and workforce agencies. Enrollees are oriented, assessed, and referred to skill enhancement training. The main goal of the program is for the participant to secure unsubsidized employment.
- The Senior Employment Specialist Program, funded by Illinois General Revenue, matches interested older workers with jobs at local businesses by coordinating with local agencies, private and public employers, universities, and colleges.

## **SENIOR MEDICARE PATROL (SMP)**

- The goal of the SMP program is to empower Medicare and Medicaid beneficiaries to prevent, detect, and report health care fraud through outreach and education.

## **STATE HEALTH ASSISTANCE PROGRAM (SHAP) AND STATE HEALTH INSURANCE PROGRAM (SHIP)**

### **MEDICARE IMPROVEMENTS FOR PATIENTS and PROVIDERS (MIPPA)**

- Assistance with Prescription Medications: Prescription assistance staff counsels and provides information to persons 65 and over and persons with a disability regarding their decision to enroll in Benefit Access, Medicare Part D prescription drug plan, Extra Help/Low-Income Subsidy (LIS), Medicare Savings Program (MSP) and provides direct assistance with the enrollment process (SHAP). Benefit Access program assists with free bus passes and a discounted license plate sticker. Benefit Access information is available on CIAA's website, [www.ciaoa.net](http://www.ciaoa.net) which gives a connecting link to the Illinois Department on Aging's website. SHIP is a counseling service that assists individuals needing information and enrollment assistance for Medicare, Medicare Part D prescription plans, Medicare Advantage and Supplemental plans, and other information. Volunteers are available at area libraries to offer help in completing Benefit Access and the Medicare Part D applications. MIPPA assists to increase outreach, training, and technical assistance activities regarding MSP, LIS, and prescription coverage benefits under Medicare Part D.

## **TRANSPORTATION**

- CIAA provides transportation for seniors and caregivers in the Peoria County and Northern Tazewell County. These services are available to persons 60 years of age or older that have no other means of transportation. We require a minimum of 24 hours in advanced notice to schedule an appointment. We provide transportation service for the following: Dialysis, cancer treatment, doctor's appointment, grocery stores, etc.

***Additional services CIAA provides: (Listed in Alphabetical Order)***

### **A MATTER OF BALANCE FALL PREVENTION PROGRAM**

- A Matter of Balance is an evidenced based program based upon research conducted at by the Royal Center for Enhancement of Late – Life Function at Boston University. It is designed to reduce the fear of falling and increase the activity levels of older adults who have concerns about falls.

### **CHRONIC DISEASE SELF MANAGEMENT PROGRAM (CDSMP) AND DIABETES SELF MANAGEMENT PROGRAM (DSMP)**

- These evidenced based programs addressing a variety of chronic conditions and diabetes are being offered across the country. They help participants take steps towards positive change and healthier living as they build their confidence and their ability to manage their day-to-day life. Each program's researched based curriculum is proven to work and is offered to the community on a suggested donation basis to cover the cost of materials. Participants are asked to make a personal commitment to attend all the sessions if at possible. CIAA has two Master Trainers and several Workshop Leaders who have been trained to assist participants with taking charge of their chronic disease.

### **MATURE SOLUTIONS CASE COORDINATION UNIT**

- Community Care Program: Provides person centered counseling for Peoria County, 60 or older, physically in need/moderately impaired, must meet asset requirements, and must apply for Medicaid. Services available are Homemaker, Adult Day Services, Emergency Home Response (EHR) and assessment for the Home – Delivered Meal Program.

## **MATURE SOLUTIONS II**

- Geriatric Care Manager (GCM) is a health and human services professional that specialize in knowledge and experience related to aging and senior care issues. GCMs are individuals who evaluate your situation, identify solutions, and work with you to design a plan for maximizing your elder's independence and well-being.

## **VETERANS CHOICE PROGRAM**

- The Veterans Choice Program (VCP) also known as Veterans Independence Program (VIP) Home and Community Based Services allows VA medical facilities to partner directly with community care providers to deliver health care services not readily available for veterans. The program provides veterans with a budget and allows them to choose their own providers. In some cases, family members are able to be paid for the care they provide. Referrals are only accepted from the VA.

# Justification for Direct Services provided by CIAA

## **Information and Assistance:**

CIAA provides an information and assistance service to persons (referred to as consumers) of all ages, abilities, and incomes, including family caregivers, who request this service. Our information and assistance specialists provide information and referrals to connect consumers with resources that can help them.

Information and assistance is provided primarily through phone calls, in-person walk-ins, and e-mails. CIAA has continued an 877 toll-free phone number to benefit consumers with the greatest economic need, especially in rural areas. The local 211 agency, which serves five of CIAA's six counties, oftentimes refers callers to us for assistance. Information and assistance is also provided through our website, [ciao.net](http://ciao.net), and through community health fairs.

These health fairs are held at various locations in our six-county service area. At a health fair, a CIAA representative is present at a table to speak with any interested consumer about our services. Brochures, flyers, and booklets describing our services and programs are also available for consumers, at no charge.

Data collected indicates that the primary methods on how consumers learn about CIAA include personal and professional referrals, community meetings, health fairs, public presentations, and media advertisement. The CIAA publication flyer "Yellow Pages for Seniors & Persons with Disabilities" has been a major advertising source, as it provides our contact information, a list of the direct services that we provide, and a sample listing of referrals to other services in the community that are important to our consumers. Our information and assistance service has made CIAA a highly visible and trusted source of information and assistance to consumers. This has enhanced the activities of the Heart of Illinois Aging & Disability Resource Network (ADRN).

CIAA's information and assistance services are person-centered, that is each consumer is treated as a unique individual, with dignity, having their own set of needs and capacities. When the nature of the problem requires further, more in-depth evaluation, information and assistance specialists are trained to provide person-centered counseling. This type of counseling involves a longer, more detailed, discussion with consumers, assisting them to set goals and objectives and identify various options to reach those goals. The consumers are empowered to make their own choices and decisions.

Information and assistance specialists are certified in the Alliance of Information and Referral Systems (AIRS) as Certified Information & Referral Specialists for Aging and

Disability (CIRS-A/D). This indicates that their competencies and related performance criteria meet established national standards for the field of information and referral in organizations that serve the aging and disability population. Trained staff assist consumers at all of our locations including the Hamilton Boulevard, Morgan Street, and the Bartonville offices. The Hamilton Boulevard office, in downtown Peoria, is in proximity to a wide variety of health and social service agencies, and is on a major public transportation route.

For FY 2020, 24,487 persons and 29,087 units are projected to be served. These projections are included in the totals listed on page 44. Funding for Information and Assistance of \$79,719 in Federal Funds and \$104,797 in State Funds will be utilized.

### **Caregiver Access Assistance Services:**

Experience with the National Family Caregiver Support Program continues to document that CIAA is the central point of contact for older caregivers and increasingly is a resource for younger adult caregivers who contact the Agency on behalf of aging parents, which includes long distance caregivers who call on their behalf. Because CIAA is centrally located as a point of contact, caregivers and older persons can telephone or walk-in from any of our six counties served. Caregiver Access Assistance services provide vital resource information about services and benefits, and through CIAA enable a one-stop connection to medical and prescription drug assistance, housing, counseling, education and training, referrals to other supportive services, and a variety of gap-filling services.

- CIAA's Caregiver Access Assistance Services are the only such specialized services within the planning and service area. The Caregiver Information and Assistance Specialist, who is certified by the Alliance for Information and Referral Services, can work within the "serviceable moment" to establish rapport for long term service rather than simply make a referral.
- The Caregiver Specialist is a trained options counselor, for cases that require more time to identify needs, set goals and objectives and uses motivational interviewing techniques. The Caregiver Specialist is a person-centered counselor able to assist the caregiver with this process and with any in-house coordination of other IDOA/CIAA funded services.
- In addition to options counseling, the Caregiver Specialist has used an assessment tool called, T-Care or Tailored Care on a small sample of complex cases. T-Care is a researched based software developed to assess various types and intensity of burden experienced by caregivers. The Caregiver Specialist is still determining the value and practical application of the T-Care tool as it fits into agency goals and projections.

- The Family Caregiver Specialist received TCare training and certification to use software especially developed to assess the various types and intensity of burden experienced by caregivers. This research based software enables a specific person centered assessment and appropriate referrals for each caregiver.

For FY 2020 service levels for Caregiver Access Assistance services are projected as follows: 1,882 persons and 3,266 units. These projections are included in the total listed on page 44. Federal Funds of \$68,817 will be utilized.

### **Caregiver Information Services:**

CIAA's long history of serving seniors, their caregivers, and grandparents raising grandchildren, coordination of the "Caring Connection" and central location within its six-counties has positioned the agency to provide public education through events such as health fairs, speaking engagements, mailings, and forums.

CIAA's newsletter, the "Senior Gazette," with a circulation of over 570 e-mailed directly to individuals, in addition of that the monthly Senior Gazette posted on the agency website at [www.ciaoa.net](http://www.ciaoa.net) is another means through which caregivers and potential caregivers receive general and specific caregiver information. The circulation is decreased due to organizations had merged and/or changed their business names.

For FY 2020 service levels for Caregiver Information services projected as follows: 3950 persons and 446 units reflecting a slight increase due a few more health fair opportunities and mailings. Current projections are included in the total listed on page 44. Federal Funds of \$31,714 will be utilized.

We are still in the process of publicizing a resource directory that would target people with Alzheimer's/dementia and their caregivers. This funding is through the Alzheimer's Foundation of America. The amount of directories we have funds to produce is 2000. This may be a one-time publication due to grant funding but the hope is to gain sponsorship for future production.

## **Caregiver Training Services:**

CIAA grants out 90% of the Caregiver Training funds to providers through a procurement process; however, additional training needs for caregivers are identified through CIAA's Caregiver Information Services, Access Assistance Services, The Caring Connection, and annual conferences. These needs are addressed through direct services as they are not specific to services provided by funded Title III-E Training providers.

For FY 2020 service levels for Caregiver Training services provided directly by the CIAA Family Caregiver Information and Assistance Specialist staff are projected as follows: : 167 persons and 272 units. We are not changing our projections for Caregiver Training at this time due to being slightly under the 83 persons needed at this point in the fiscal year to obtain 167 total projected. We do have two other caregiver training opportunities scheduled in this half of the fiscal year that should pick up the difference. These projections are included in the total listed on page 44 of which also include totals provided by contracted providers including Bradley University Counseling Research and Training Clinic.

Federal funding of \$11,722 will be utilized.

## **Transportation Services in Peoria County and Northern Tazewell:**

CIAA consistently experiences no responses to the Request for Proposals (RFP) for the transportation service areas that include the City of Peoria, Rural Peoria County outside the City of Peoria, and Northern Tazewell County. The RFP to provide Transportation and Assisted Transportation services for FY 2019, 2020, and 2021 did not result in competition to provide these services. Therefore, a non-competitive grant award process was implemented which also received no responses to the RFPs. To maintain services, CIAA again entered into agreement with the current provider of emergency assisted transportation services for City of Peoria and Northern Tazewell County using a voucher program with City Link. Rural Peoria County will continue to be served through a voucher program with County Link. The Northern Tazewell County area not served by CityLift will be served directly by CIAA Transportation Services.

CIAA requested a continued direct service waiver to provide transportation services to seniors in the City of Peoria and Northern Tazewell County. CIAA's providing this direct service aspect has enabled coordination with other services and resources, which would not be performed by a transportation service. It also benefits the older person in that they are connected directly to the Aging Network and to a source that provides information and assistance. The telephone assessment of other available transportation provides an

opportunity to connect the senior with other resources. CIAA is preparing RFPs for fiscal years 2022, 2023, and 2024.

CIAA anticipates during FY 2020 to make 58 client contacts to arrange 2,660 trips for transportation service in the City of Peoria, Rural Peoria County outside the City of Peoria, and Northern Tazewell County. These projections are included in the total listed on page 44. Federal funds of \$56,275 and State funds of \$4,180 will be utilized.

### **Congregate Meals in the City of Peoria:**

CIAA consistently experiences no responses to the Request for Proposals (RFP) for the Congregate meal service in the city of Peoria. The RFP to provide this service for FY 2017, 2018, and 2019 did not result in any response. To maintain services, CIAA is operating this service as “CIAA Food and Fellowship Café” serving at four (4) locations, provides approximately 40 meals daily.

### **Congregate and Home Delivered Meals in Fulton County:**

Effective October 1, 2014 CIAA began serving the Fulton County Congregate meal sites and Home Delivered meal participates on an emergency basis due to the previous provider decided they could no longer provide these services. The RFP to provide this service for FY 2017, 2018, and 2019 did not result in any response. The Fulton County program serves at 6 congregare locations serving approximately 60 meals a day and delivering approximately another 125 meals a day.

### **Congregate Meals in Rural Peoria County**

Effective October 1, 2018 CIAA began serving the Rural Peoria County Congregate meal sites on an emergency basis due to the previous provider decided they could no longer provide these services. The Rural Peoria County program serves at two congregare locations serving approximately 60 meals a day.

**Note:** CIAA anticipates during FY 2020 to provide 66,660 meals in the City of Peoria, Fulton County and Rural Peoria County, 37,000 being home delivered and 29,660 congregare meals. Federal funds of \$305,708 and State funds of \$117,465 will be utilized.

# Funding for Home-Delivered Meals

Older persons continue to need home-delivered meals. Many have come to depend on these services, for some this is the only balanced meal they may receive. As the older population grows and becomes more impaired due to chronic health conditions, the demand for home-delivered meals has increased. These meals enable older persons to remain in their homes and in their communities. These older persons are homebound or isolated due to physical or cognitive impairments and/or lack of available transportation. The home-delivered meal may be the only opportunity to talk to someone, and enable the individual to stay in his or her homes, avoiding unnecessary institutionalization.

Currently, the following areas and/or townships are unserved for the home-delivered meals:

- in Fulton County: Banner, Bernadette, Cass, Deerfield, Ellisville, Farmers, Isabel, Harris, Kerton, Lee, Liverpool, Pleasant, and Waterford;
- in Marshall County: Pattonsburg, Wilbern, Hopewell, LaPrairie, Lawn Ridge, Broadmoor, and Whitefield;
- in Stark County: Lafayette, Castleton, Duncan, Elmira, Lombardville, and Modena;
- in Tazewell County: Delavan, Green Valley and Manito;
- in Woodford County: El Paso, Eureka, Minonk, Bayview Gardens, Benson, Congerville, Germantown Hills, Goodfield, Panola, Roanoke, Secor, and Spring Bay.

Additional funding available to CIAA was allocated consistent with the Board and IDOA approved policy for increased/decreased funds as outlined in the Area Plan and Public Information Document. Providers continue to look for other sources of funds including applying for grants and holding fundraising events.

Currently, there are no waiting lists in any of our six counties. When funds are insufficient to eliminate waiting lists, providers refer individuals to other nutrition programs, food pantries, and resources such as the SNAP program through DHS. CIAA staff continues to provide service providers with other resources to assist their programs and participants.

CIAA staff monitors service providers monthly through the Nutrition Services Providers meetings. Providers are asked if they have any participants on their current waiting lists, information obtained from service providers is documented and discussed among the group

of ideas on how to provide additional resources to those participants. This practice will continue during FY 2019 to ensure that if a waiting list does occur every effort will be made to secure other resources to assist programs and participants.

It is projected that 210,880 meals will be provided to 1,200 different older persons in FY 2019. These projections are included in the total listed on page 44. Federal Funds of \$320,070 and State Funds of \$725,900 will be utilized.

## **FY 2020 Priorities and Future Plans**

Although funding at present is insufficient, CIAA has developed strategies to expand home-delivered meals and supportive services in the un-served areas mentioned above should funds become available. These include:

- 1) Allocate funds to all home-delivered meal providers in accordance with the approved and published policy for increases or decreases in funding;
- 2) Continue monitoring expenditures by county to facilitate inter-PSA transfers;
- 3) Continue to research reducing costs in remote rural locations by delivering frozen meals once a week provided the older adult has a microwave;
- 4) Continue to meet with Service Providers regularly to assess the status of services and unmet needs;
- 5) Continue CDSMP, DSMP, A Matter of Balance, and APS programs and include others as available for older adults and persons with disabilities to keep them healthy, safe and living in their own homes;
- 6) Continue to provide nutrition education, and participate in ADRN Advisory Council meetings to increase nutrition participants and service provider knowledge of NWD;
- 7) Continue to improve the Home-Delivered Meal (HDM) program by utilizing more volunteers, collaborating with the community resources, and other initiatives that are cost effective;
- 8) Continue to make one-time grants available to purchase additional equipment and delivery vans for nutrition programs to maintain and improve services, delivery models and food service equipment;
- 9) Continue to work with DORS, Human Service, MCOs, and private pay consumers to maintain services, become more social entrepreneurial, develop community partnerships, and identify both public and private funding systems;
- 10) Continue to provide HDM survey information on un-served and un-deliverable areas to legislators as well as information on congregate sites to educate elected officials about needs in un-served areas.
- 11) Continue to inform participants in the HDM program about NWD, Social Isolation, available health and social services, and on-going community education events in their community;
- 12) Continue to network with IDOA, CCU's, ADRN to develop priorities for the Social Isolation Initiative for PSA 04; and
- 13) Increase awareness of services throughout PSA 04 service area.

# Service Providers Funded by CIAA

CIAA work with local agencies and organizations to ensure older persons and family caregivers receive needed services. This is accomplished by making funds available to the providers of vital services.

<b>SERVICE PROVIDERS</b>
<b>Funded Through the Older Americans Act</b>
Bradley University, Counseling, Research & Training Clinic
Center for Prevention of Abuse
Methodist College
MSW Projects of Henry IL
Neighborhood House Association
Prairie State Legal Services
The Center for Youth & Family Solutions
We Care, Inc.

<b>OTHER FUNDED PROVIDERS</b>
Advocates for Access
Alzheimer's Association
Community Care Systems
Heartland Community Care Clinic
Illinois Valley Center for Independent Living

## Who We Serve

Although base funding continues to be determined largely by the number of persons 60 years and older, Central Illinois Agency on Aging, Inc. (CIAA) now serves individuals of all ages. The 2017 and 2016 Census showed the 60 plus population increased by 3.2% from 2,652,297 to 2,736,286 persons, or a total increase of 83,989 persons 60 years or older. In contrast, CIAA's total population of persons 60 years and older increased by 1,054 older persons or 1.1% with the most significant numerical increases in Peoria of (1,086). It is also significant to note that total Illinois population increased by only 484 people in the same period, thus underscoring the increased need for senior programs.

The 2016 Population Estimates indicate that Fulton, Marshall, Peoria, Stark, Tazewell, and Woodford counties combined comprised 99,131 persons age 60 years or older with 9,544 being rural. The rural population reflects only Fulton County in that the remaining counties all are considered urban following a FY2005 change in designations.

Prior to FY 2005, Fulton, Marshall and Stark counties were considered rural. In FY 2005, Marshall and Stark Counties were no longer classified as rural due to their inclusion in a Metropolitan Statistical Area.

In terms of chronological aging, the 75 years population of Illinois was estimated at an increase of 29,900 (3.7%). By comparison CIAA's service area of 75 plus senior remain relatively flat with an increase of 82 people over our 6 counties. While the numbers relative to CIAA's service area and Illinois are relatively small, the percentage of the population is relatively significant. The aging of our service area is good news on the one hand in that we are living longer and hopefully with increased quality, if not, the aging can be challenging on the other hand when social and health services are sparse or distant.

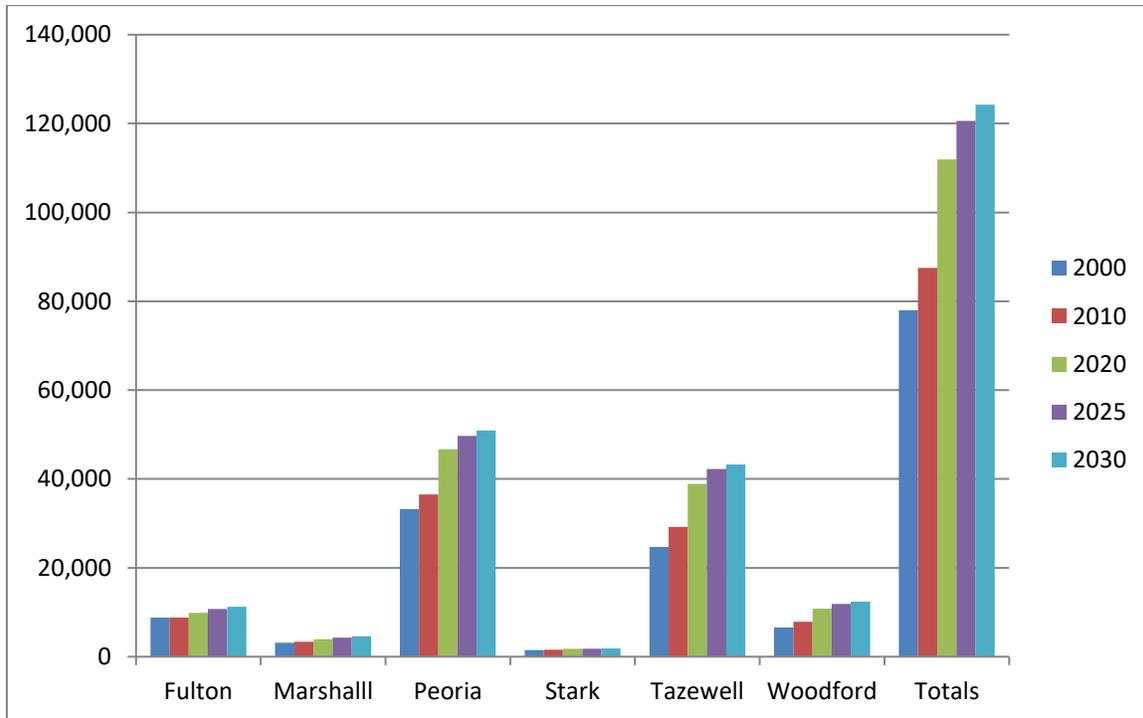
Given the documentation of multiple chronic diseases among the 75 plus and 85 plus populations, this increased aging could trigger the potential for increased needs and assistance through home-based services. The age wave is rolling in during turbulent economic times for our nation, our state, and our local communities.

The following chart has provided the population trends for CIAA's service area and a foundation for comparison between actual 2010 Census results and the annual American Community Survey (ACS).

# Central Illinois Agency on Aging, Inc.

## Six-County Service Area

**Actual 60+ population for 2000 and 2010 & projected population (2020-2030)**



Source 2000 & 2010 Illinois Census Data; Illinois Department of Commerce & Economic Opportunities

The older person population based on 2017 Population Estimates show modest increases in Peoria, Tazewell and Fulton counties while Woodford and Marshall remained approximately the same and Stark County dropped. Another table published by Illinois Department of Public Health, 2014 showed in Peoria County between 2015 and 2020 there would be an additional 3,675 persons 65+ (IL Dept. of Public Health, IL Health Facilities and Services Review Board, Certificate of Need Population Projections Project, 2014).

Another significant population segment served by Central Illinois Agency on Aging, Inc. is caregivers. Caregiving in the U.S. 2015, an AARP study estimated 43.5 million adults in the U.S. have provided unpaid care to an adult or a child in the prior 12 months. AARP did a Survey of Caregivers in Illinois in 2018 that stated, “exactly half of registered voters age 40 and older in Illinois (50%) are currently providing care to an adult loved one or have previously provided such care (AARP, 2018).” Out of the caregivers in Illinois who are currently providing care or have previously provided care, “two in three current and former caregivers (65%) have been employed either full or part-time while they provided care to a loved one (AARP, 2018).” These same working caregivers in Illinois have had to make sacrifices in their employment including the following; 73% had to go into work late or

early/take time off, 23% had to take a leave of absence, 15% go from working full time to part-time and 14% give up working entirely (AARP, 2018).

The charts below represent information taken from the American Community Survey about the number of Grandparent caregivers living in Central Illinois Agency on Aging's counties.

<b>2012-2016 AMERICAN COMMUNITY SURVEY 5YR ESTIMATES – NUMBER OF GRANDCHILDREN RESIDING WITH GRANDPARENTS WHO ARE HOUSEHOLDERS</b>	
<b>COUNTY</b>	<b># GRANDCHILDREN</b>
<b>Fulton</b>	390
<b>Marshall</b>	239
<b>Peoria</b>	2,754
<b>Stark</b>	74
<b>Tazewell</b>	1,874
<b>Woodford</b>	338
<b>TOTAL:</b>	5,669

<b>2012-2016 AMERICAN COMMUNITY SURVEY 5YR ESTIMATES – NUMBER OF GRANDPARENTS RESPONSIBLE FOR THE CARE OF THEIR GRANDCHILDREN</b>	
<b>COUNTY</b>	<b># GRANDPARENTS</b>
<b>Fulton</b>	474
<b>Marshall</b>	228
<b>Peoria</b>	2,949
<b>Stark</b>	105
<b>Tazewell</b>	2,205
<b>Woodford</b>	553
<b>TOTAL:</b>	6,514

# What CIAA and Service Providers Have Done

## ACCOMPLISHMENTS FOR FISCAL YEAR 2018

### Program/Service

	Total Persons Served	Amount and Type of Service	Comments:
A Matter of Balance	54	324 sessions	
Benefits Access and Medicare Part D Pharmaceutical Program	12,381		
Caregiver/GRG Counseling	30	292 sessions	
Caregiver/GRG I & A Assistance	1,584	2,878 contacts	
Caregiver/GRG I & A Information	11,282	721 activities	
Caregiver/GRG Support Groups	56	338 sessions	
Caregiver/GRG Training	236	307 sessions	
Grandparents Raising Grandchildren (GRG)	180	180 units	
Congregate Meals	842	48,898 meals	
Employment	287		
Gap-Filling: General Services	57	57 units	
Health Promotion-Depressing Screening	60	361 sessions	
Home-Delivered Meals	1,163	202,743 meals	
Information & Assistance	26,233	32,708 contacts	
Legal Assistance	406	1,327 hours	
Long-Term Care Ombudsman	368	6,568 units	
Medication Management Screening & Education	29	29 sessions	
Person-Centered Counseling	92	332 sessions	
Outreach	201	351 units	
Respite for Caregivers	43	540 hours	
Transportation	356	13,305 trips	
Assisted Transportation	87	4,039 trips	

**ACCOMPLISHMENTS FOR FISCAL YEAR 2018 (continued)**  
**Program/Service**

**CONNECTING WITH CONGREGATIONS**

	<b>Total Persons Served</b>	
Ecumenical Luncheon	76	This annual event is held to recognize volunteers
New Year's Day Holiday Meals	764	This annual program provides a meal to a homebound senior.

**SPECIAL EVENTS**

	<b>Total Persons Served</b>	
Celebrating Generations	700	This intergenerational annual event for all ages, abilities, and incomes to provide education of services in our 6 county area.
Christmas for Seniors and Persons with a Disability	73	A senior living facility is selected and then donated gifts are provided and delivered to each resident.
Chronic Disease Self-Management Program (CDSMP) & Diabetes Self-Management Program (DSMP)	12	These programs are evidence - based programs which are proved to help individuals with chronic diseases and diabetes

## SPECIAL EVENTS (continued)

	<b>Total Persons Served</b>	
Matter of Balance (MOB)	24	This an evidenced based program designed to reduce the fear of falling and increase activity levels of older adults that have concerns about falls.
Grandparents Raising Grandchildren (GRG) Holiday Party- Intergenerational Event	40 Grandparents And 125 Grandchildren 96 gifts 29 teen gift cards 37 family gift cards	Annual event organized by Bradley Counseling Research and Training Clinic to help provide for holiday needs of GRG's including gifts for children and grandparents.
Grandparents Raising Grandchildren Back to School Picnic – Intergenerational event	64 grandparents 126 grandchildren All 126 grandchildren provided back packs and supplies	Annual event organized by Bradley Counseling Research and Training Clinic to help provide school supplies for Grandchildren.

# Local and Statewide Initiatives

## **STATEMENT OF THE STATEWIDE INITIATIVE: ENHANCE ILLINOIS' EXISTING COMMUNITYBASED SERVICE DELIVERY SYSTEM TO ADDRESS SOCIAL ISOLATION AMONG OLDER ADULTS**

### **THE STATEWIDE INITIATIVE – SOCIAL ISOLATION**

During FY 2019, the Illinois Department on Aging and the Area Agencies on Aging in Illinois will work with other state agencies and service providers to develop programs and activities to combat social isolation. The overall goal is to reduce social isolation within our service areas.

Loneliness and social isolation is a growing epidemic, having dire physical, mental and emotional consequences. Since 1980, the number of older persons reporting loneliness has doubled. Those whom are socially isolated tend to have disrupted sleep patterns, altered immune systems, more inflammation, higher levels of stress, higher blood pressure, advanced cognitive decline and other symptoms. About one-third of Americans now live alone and that rises to one-half by age 85. Loneliness and social isolation are also more likely to need long-term care, thus increasing the need for long-term care support and raising the cost to society.

Current activities in FY 2019 to support the Statewide Initiative on Social Isolation.

- CIAA held their 2018 Board of Directors and Area Advisory Council Annual Meeting & Awards Reception with a feature educational presentation featuring co-speakers from Unity Point Health, Geriatric Psychiatry and the psychology department of University of Illinois College of Medicine at Peoria. “Addressing Social Isolation and the Psychological Health of Older Adults”.
- Began working with the ADRN on strategies to combat social isolation FY 2019 was a planning year, Illinois Department on Aging and the Central Illinois Agency on Aging (CIAA) will be working on strategies and a survey with suggestions for a survey to be provided to churches, social workers, outreach workers, care coordinators to assist in identifying older persons who are socially isolated in an effort to combat social isolation.
- Expand Health Prevention and Promotion – Friendship Phone Line. Information on the Friendship Line has also been published in the monthly agency newsletter The Gazette and is on CIAA’s website. Information on the Friendship Line is also available in CIAA’s lobby. CIAA has also distributed this information at the

Alzheimer's Association Caregiver Conference (CIAA was a Gold Sponsor of this event) and at CIAA's annual Celebrating Generation Event. CIAA's Information & Assistance will also continue to distribute this information at area health fairs. This resource has also been distributed to local social service providers, caring connections, ADRN, congregate nutrition sites, and given to HDM drivers to be distributed as they are delivering meals to older persons.

- Developed a Consumer Services Request Form for walk-ins to fill as they come to request services which provides information on demographics, requested needs/services and with a small optional 3 question survey called "How Connected Are You" Taking a closer look at social isolation.
- Participated with IDOA and other AAA's on "Social Isolation Convening" Working closely with IDOA, AAA's, and local partners/providers.
- Presentation from Center for Prevention of Abuse on how social isolation could have an effect or contribute to self-neglect.
- Provided an educational event in CIAA conference room inviting staff and ADRN members to participate in an n4/engAGED event: The National Resource Center for Engaging Older Adults "Older Adults and Social Engagement: A National Strategy Discussion.
- Worked with a graduate student from the University of Illinois at Chicago to find potential solutions to the issue of elderly social isolation in the state of Illinois. Completed a questioner for the Elderly Social Isolation Project.
- CIAA Annual intergenerational event "Celebrating Generations" will gather information with all persons upon registration using a short survey on social isolation.
- Ongoing participation in Caring Connections, Human Services Collaborative, Illinois Partners, TRIAD, and Senior Care Network.
- Current collaborative efforts with community partners to provide educational/interactive activities and to create a PSA 04 Social Isolation Campaign using the Older Americans Month campaign theme: Connect, Create, Contribute.

## **Activities planned for FY 2020 Social Isolation Initiative: PSA 04 FY 2020 Social Isolation Campaign**

CIAA will assist all counties within their PSA, with the outer lying counties Marshall, Stark, and Woodford being their main priorities.

- Develop Social Isolation Survey to be distributed amongst ADRN suggested organizations, survey monkey, social media, and CIAA website to identify those that are socially isolated.
- Gather data/demographics received/reported from all walk-ins requesting information and assistance from CIAA. A Consumer Services Request form was developed with a short survey on social isolation that is completed by consumers requesting information and assistance to begin identifying isolated seniors.
- Visit fire departments, police departments and sheriff's office to educate on social isolation in older persons and provide available research and resources (i.e. Friendship phone line cards).
- Form ADRN Sub-Committee on Social Isolation on strategies/ideas on how to combat social isolation.
- Plan two intergenerational events for FY 2020 and provide transportation for those that have no other form of transportation.
- Gathered data used to identify socially isolated older persons will be used to set up a senior checkup telephone program, provide educational/interactive activities, expand outreach/friendly visitor program, and expand/provide emergency transportation.
- Sponsor 15 educational/interactive activities.
- Sponsor FY 2020 Care Giver Event with the theme of Social Isolation.
- Form collaborations/partnerships with other organizations that provide services to older adults, caregiver, GRG and those with disabilities.

## **Community Collaborations/Partners:**

- Alzheimer's Association
- Community Care Systems Inc.
- Heartland Health Services
- Neighborhood House
- MSW: Nutrition and Transportation
- We Care
- Center for Youth and Family Solutions
  - Senior Outreach
  - Friendly Visitor Program
  - RSVP (Volunteer Program)

State funds of \$30,500 will be utilized in support of these efforts.

- Sub-Grants to partners: \$12,000
- Education/interactive events: \$12,000
- Intergenerational events: \$ 2,400
- Caregiver Seminar: \$ 2,000
- Other/Miscellaneous: \$ 2,100

## **LOCAL INITIATIVE - ACCESS TO LONG TERM SUPPORT OPTIONS**

**1. Convene information exchange forums consisting of providers of public benefits (OAA, Medicaid, Medicare benefits, Benefit Access, energy assistance, food stamps, etc.), Medicaid waiver services provided by the Department on Aging and the Department of Human Services (CCU/CCP, services for individuals with disabilities under the age of 60), non-waiver services provided by Centers for Independent Living, Veteran Administration, and Department of Mental Health.**

CIAA will continue to convene forums for the purpose of exchanging information with providers of Medicaid waiver services provided by the Department on Aging and the Department of Human Services. Using the Heart of Illinois Aging and Disability Resource Network (ADRN) as the primary vehicle for information exchange, CIAA, as the lead agency, will continue to review and respond to the priority issues identified.

CIAA/ADRN conducted a Long Term Care Forum using several talking points/discussion of services, any issues in addressing those we serve-most important needs of those we serve, strengths-gaps in services, barriers/alternatives to services, and understanding available resources.

**2. Strengthen coordination and collaboration efforts with agencies addressing key functional areas such as healthcare, employment, transportation, affordable housing, nutrition, mental/behavioral health and other critical components that support and sustain community living.**

**CIAA continues to make Maximum Use of Information and Assistance to assist persons with social and healthcare needs.** Our Specialists work with the health care facility staff and/ or the consumers directly in providing resource information and assistance to meet their needs through telephone (including conference calling), in-person appointments and walk-ins, e-mail, regular U.S mail, fax, and Facebook. CIAA has added the capability to communicate via Skype on the computer, which has enabled visual communication at low or no cost and provides worldwide capability. The ability to contact and communicate through chat, post video recordings on our webpage, Twitter and Instagram continue to be explored as resources permit.

**CIAA Coordinates with Partner ADRN Agencies** to promote outreach, education and training across the planning and service area. Healthcare is a critical pathway and access by persons with disabilities is critical.

Begin collaboration efforts with Alzheimer's Association and Heartland Health Services to make CIAA services more aware in outer laying counties (Marshall, Stark, and Woodford) and provide education of services in same outer counties.

**Methodist College of Nursing- Health Promotion-A Matter of Balance:** Matter of Balance helps participants learn managing concerns about falls with an emphasis on practical strategies to manage falls. The Methodist College nursing class is Community Health Nursing, an upper level course that has clinical rotations. CIAA will work with students to provide the context for the nutritional guidelines and the congregate meal program. CIAA also has three MOB Master Trainers that can teach other providers/lay leaders to present the MOB workshop. Currently CIAA coordinates with HULT Center for Healthy Living and a Center for Youth and Family Solutions to present the MOB workshop.

**CIAA Works with the Department of Rehabilitation Services (DORS): As an ongoing endeavor, CIAA is collaborating** with DORS Home Service Program Service Plan to provide its clients with a home delivered meal 5 days a week. CIAA receives the referral and authorization for services from DORS and bills DORS monthly for prior month's meals.

**Illinois Partners for Human Service-HFS/MCO's/Human Service Sector" Best Practices" Meetings:** Facilitated by Easter Seals, the vision and purpose of meetings is to "build excellent working relationships and problem solving leading to best practices" among human services. "Best Practices" Development toward Achieving Cost Savings and Quality Services - Improving Provider and Managed Care Organizations (MCO) Communications in billing and administration and services and case coordination.

**Participants in our Community Care Program** often have needs that require collaboration with other agencies. Examples of coordination and collaboration include:

- For durable medical equipment, Advocates for Access has a program where they 'lend' durable medical equipment to those in need for an indefinite amount of time. Mature Solutions, our CCU/CCP unit has been called by those under 60 years of age, made referrals over to Advocates for Access for follow up and needed services.
- Mature Solutions coordinates with Neighborhood House for home delivered meals, Center for Youth and Family Services for counseling, and County Link and City Lift for transportation.
- MCO Statewide Expansion, which will affect many older persons in the current MCO areas will need assistance in understanding what this MCO expansion means for them, this will include current clients served by the Community Care Program that are also on Medicaid. This was supposed to begin on January 1, 2018. Managed care will expand to all counties statewide, the program is designed to improve quality and outcomes and managing costs to healthcare for those living in Illinois. Most Medicaid clients will be required to enroll into a managed care health plan.

**Note:** *HFS has decided to delay the expansion that was to begin on April 1, 2018 for the counties that do not currently have or participate in any MCO's.*

**Peoria Housing Authority:** CIAA Information & Assistance Specialists participate in the quarterly meetings of the Peoria Housing Authority's Program Coordinating Committee. At this meeting, various organizations in the community provide information and updates on their services and activities. With this information and these updates, CIAA can better serve our consumers. By collaborating with the other agencies that participate in these meetings, CIAA along with these agencies can better support and sustain community living.

**CIAA's Continued Leadership to The Caring Connection**, a coalition of professional caregivers that gathers monthly to discuss topics and needs related to local family caregivers. A different caregiver topic pertinent to family caregivers is presented each month by both professional and informal caregivers. The coalition also supports and is instrumental in providing an annual caregiver conference for family caregivers to help educate them on community resources and ways to cope with stressors of caregiving.

- Attendance averages 25 professionals representing, hospitals, homecare agencies, home health and hospice agencies, Supportive Living Facilities, Assisted Living facilities, rehabilitation care facilities, mental health providers, non-profit social services, park district and higher education institutions.
- There is regular representation from CIAA's funded providers, including Bradley University Counseling and Research, The Center for Youth and Family Solutions, Prairie State Legal Services, and Center for Prevention of Abuse.
- CIAA collaborated with the members of the coalition in order to gather information for the Alzheimer's/Dementia Community Resource Directory.

**3. Implement a comprehensive outreach campaign to ensure that all potential users of public benefit programs, community-based services and long-term support and their families are aware of both public and private long-term support options.**

Central Illinois Agency on Aging routinely has maintained participation in community outreach through targeted meetings of planning and program councils, training events, workshops, and seminars. These include:

- Hosted "Celebrating Generations" an Intergenerational Event which in FY 2018 was attended by over 700 persons of all ages with over 100 vendors demonstrating their social and health services and programs and services sponsoring a table and as well as an employee who can discuss their services, hand out information and answer questions face to face. This is a CIAA annual event.
- CIAA also participates in many area health fairs and programs for seniors where information is readily available, and an employee is on hand to answer questions and assist if needed.

- CIAA funds Outreach Programs in our entire service area. Programs are provided by MSW Projects of Henry, IL in Marshall, Stark, and Woodford counties and by Center for Youth and Family Solutions in Peoria, Tazewell, and Fulton counties. Programs consist of one-on-one outreach to counseling in seniors homes.
- CIAA Marketing Committee also wants to promote awareness of CIAA services to make services more available throughout PSA 04.
- CIAA promotes/advertises LTC options thorough articles in CIAA monthly newsletter (The Gazette) and on CIAA social media (Facebook Page).

**4. Identify financial and in-kind resources to assist older persons, persons with disabilities, and caregivers with individualized in-home and personal services.**

CIAA has identified agencies and programs that are available for either financial or physical assistance to those who are in need. In addition to CIAA’s gap-filling and respite services, other agencies and programs include:

- Community action agencies, such as the Peoria Citizens Committee for Economic Opportunity (PCCEO) and Tazwood Community Services, who provide a variety of financial assistance including utility assistance and weatherization.
- Community care programs, such as Autonomous Case Management (ACM) and Mature Solutions, who provide referral sources and health wellness checks to assist their clients.
- Agencies that serve persons with disabilities, such as Advocates for Access and His Helping Hands, which assist with home modifications including building of ramps, installing grab bars, and performing minor repairs.
- Community non-profit organizations, such as Dreams for Seniors Charity and Neighborhood House, that provide a variety of financial and material assistance.
- Church groups and other social service organizations, such as Catholic Charities and the South Side Mission, that provide donated durable medical equipment, medical supplies, and household furniture.
- Volunteer organizations, such as the St. Vincent de Paul Society and the Center for Youth & Family Solutions, that provide assistance for household financial needs, chores, and transportation.

**5. Implement an AIRS study group for ADRN partners to enable them to prepare for taking the certification exam.**

CIAA will continue to offer and promote an AIRS study group to members of the ADRN for those who would like this certification in preparation for the exam.

The training sessions cover material from the *AIRS I & R Training Manual* and the *AIRS Standards and Quality Indicators for Professional Information and Referral*. Knowledge of this material along with professional experience in the field of information and referral is necessary for successfully passing the AIRS certification exam. Being a Certified Information & Referral Specialist for Aging/Disability (CIRS-A/D) means that one has met a certain level of professional competency in the field of information and referral in organizations that serve the aging and disability population.

The two-hour exam consists of 100 multiple-choice questions. The exam can be taken online using a computer, a webcam and the Skype program. The exam is proctored by a professional test-proctoring service. CIAA can accommodate those wanting to take the exam in this manner, and six examinees have thus far done so at CIAA. The alternative is to physically go to an AIRS-staffed testing site, but these are usually out-of-state and pose a financial hardship on the examinee.

In the future, if there is more interest among our ADRN partners, or other agencies in the community that perform information and assistance, in participating in a study group to prepare for the AIRS exam, CIAA will consider organizing and facilitating such a group.

## Service Projections for this Year

Each fiscal year, the Agency develops projections regarding the funded services to be provided to older persons. Projections include the numbers of person expected to be served, and the numbers of units of each of the services expected to be provided during the fiscal year. Service projections for FY 2020 are based on the best information available regarding actual levels of services provided in the past, the desired levels of services to be provided, and funds expected to be available. The following are the Agency's projections of the numbers of persons to be served, and the numbers of units to be provided, by each service, in FY 2020.

<b>SERVICES</b>	<b>NUMBER OF PERSONS</b>	<b>NUMBER OF UNITS</b>
A Matter of Balance	54	424
Caregiver/GRG Access Assistance	1,882	3,266
Caregiver/GRG Counseling	65	400
Caregiver/GRG Training	208	208
Caregiver Information	3,950	446
Caregiver/GRG Support Groups	52	300
Congregate Meals <i>(All Providers)</i>	725	45,536
Gap – Filling: Caregiver	42	42
Gap-Filling: General Services	40	40
Home Delivered Meals <i>(All Providers)</i>	1,200	210,880
Information and Assistance	24,487	29,087
Legal Assistance	340	1,340
Long Term Care Ombudsman	395	6,568
Medication Management Screening	30	30
Mental Health Screening	60	320
Outreach	98	180
Respite for Caregivers	60	900
Transportation	340	13,930
Assisted Transportation	93	4,446
Person Centered Counseling	100	280
SHAP/MIPPA	11,687	11,687

\*\*Definitions of units of service are listed on next page.

# Definitions of Units of Service

One hour of staff time, including paid and volunteer, expended on behalf of an older person constitutes one unit of service. This definition is used for advocacy, case management, adult protective services, disease prevention - health promotion, legal assistance, long term care ombudsman, and respite services. For all other services the following definitions apply.

- Each meal provided in a group setting constitutes one unit of service. This definition is used for congregate meals.
- Each time a participant is served constitutes one unit of service. This definition is used for gap-filling services.
- Each meal delivered constitutes one unit of service. This definition is used for home-delivered meals.
- Each initiated contact made by an individual older person or caregiver for information, referral, or assistance constitutes one unit of service. All referral, follow-up, or assistance made by the service provider for the older person or caregiver constitutes one unit of service. This definition is used for Information and Assistance.
- Each one on one contact with another person or caregiver which encourages use of existing services and benefits constitutes one unit of service. This definition is used for outreach.
- Each one-way trip to or from community location per participant constitutes one unit of service. This definition is used for transportation.
- One session will constitute one unit of service per participant. This definition is used for caregiver counseling, support groups, caregiver training and health promotion programs.
- One activity will constitute one unit of service. This definition is used for Caregiver Access Assistance.

## FY 2020 Distribution of Funds by Area and Services

All proposed funding for FY 2020 is based upon planning allocations received from IDOA. Federal funds are based upon FY19 funding levels and state funds are based upon the Governor's proposed budget for FY 2020. In the event of any changes to the funding, The Board approved policy to address any increase of decrease in funding is detailed under the section entitled "Funding Possibilities: Should Funds Change."

AREA and SERVICES	TENTATIVE			
	FY19 Funding Levels	FY20 Funding Levels	Federal	State
<b>1. Marshall and Stark Counties</b>				
Transportation	16,209	16,963	1,168	15,795
Assisted Transportation	5,402	5,825	1,734	4,091
<b>2. Fulton County</b>				
Congregate Meals <i>(See Section 10)</i>	0	0	0	0
Home Delivered Meals <i>(See Section 10)</i>	0	0	0	0
Transportation <i>(Note 1)</i>	1,028	1,076	74	1,002
Assisted Transportation <i>(Note 2)</i>	1,028	1,108	330	778
Outreach	19,558	19,808	3,820	15,988
<b>3. Woodford County</b>				
Transportation	11,341	11,868	817	11,051
Assisted Transportation	4,958	5,346	1,591	3,755
<b>4. Tazewell County</b>				
Congregate Meals	71,796	73,568	73,568	0
Home Delivered Meals	205,080	209,660	64,157	145,503
Transportation (Southern)	27,849	29,144	2,006	27,138
Assisted Transportation (Southern)	6,783	7,313	2,176	5,137
Outreach	19,558	19,808	3,820	15,988
<b>5. Peoria County Outside of City of Peoria</b>				
Congregate Meals <i>(See Section 10)</i>	0	0	0	0
Home Delivered Meals	129,179	132,061	40,411	91,650
Transportation	2,960	3,098	213	2,885
Assisted Transportation	592	638	190	448
Outreach	19,558	19,808	3,820	15,988

## FY 2020 Distribution of Funds by Area and Services (cont'd)

AREA and SERVICES	TENTATIVE			
	FY19 Funding Levels	FY20 Funding Levels	Federal	State
<b>6. City of Peoria</b>				
Congregate Meals <i>(See Section 10)</i>	0	0	0	0
Home Delivered Meals	375,959	384,354	117,613	266,741
<b>7. Peoria County &amp; No. Tazewell County</b>				
Transportation	5,139	5,378	370	5,008
Assisted Transportation	6,821	7,354	2,189	5,165
<b>8. Marshall, Stark &amp; Woodford Counties</b>				
Congregate Meals	67,746	69,418	69,418	0
Home Delivered Meals	147,346	150,636	46,095	104,541
Outreach	17,271	17,521	3,380	14,141
<b>9. Marshall, Stark, Woodford, Tazewell, Peoria County, and the City of Peoria Fulton County: Rural</b>				
Adult Protective Services <i>(Note 3)</i>	4,517	4,528	4,528	0
Gap-Filling: General Services	15,164	18,164	164	18,000
Gap-Filling: Caregivers	20,732	25,732	25,732	0
Gap-Filling: Respite for Caregivers	19,501	19,501	19,501	0
Caregiver Counseling/Training	41,649	44,520	44,520	0
Mental Health Screening	6,703	8,924	8,924	0
A Matter of Balance	8,656	9,980	9,980	0
Legal Assistance	66,230	67,230	29,491	37,739
Medication Management Screening & Education	12,022	13,170	13,170	0
Long Term Care Ombudsman	202,643	208,798	57,149	151,649
Person-Centered Counseling	6,730	6,730	0	6,730
<b>SUBTOTAL</b>	<b>1,567,705</b>	<b>1,619,030</b>	<b>652,119</b>	<b>966,911</b>

## FY 2020 Distribution of Funds by Area and Services (cont'd)

<b>TENTATIVE</b>				
<b>AREA and SERVICES</b>	<b>FY19 Funding Levels</b>	<b>FY20 Funding Levels</b>	<b>Federal</b>	<b>State</b>
<b>10. Central Illinois Agency on Aging, Inc.</b>				
Direct Services				
Information & Assistance	179,507	184,519	79,719	104,797
Caregiver/GRG Information Services	31,714	31,714	31,714	0
Caregiver/GRG Assistance Services	68,817	68,817	68,817	0
Caregiver/GRG Training	1,000	1,000	1,000	0
Transportation Direct Service	59,435	60,435	4,160	56,275
Person-Centered Counseling	8,694	8,694	0	8,694
Congregate Nutrition Service – City of Peoria	106,551	109,675	109,675	0
Congregate Nutrition Service-Fulton County	90,507	92,248	92,248	0
Congregate Nutrition Service-Rural Peoria County	50,738	51,991	51,991	0
Home Delivered Meals-Fulton County	165,562	169,259	51,794	117,465
Social Isolation		30,500		30,500
Alzheimer's Disease & Related Dementia Supportive Gap-Filling		30,500		30,500
<b>Administrative &amp; Administrative Related</b>				
Advocacy	23,860	23,860	23,860	0
Coordination	79,062	79,062	79,062	0
Program Development	104,172	104,172	104,172	0
Administration	197,667	194,631	146,766	47,865
<b>SUBTOTAL</b>	<b>1,167,286</b>	<b>1,241,074</b>	<b>844,978</b>	<b>396,096</b>
<b>GRAND TOTAL</b>	<b>2,734,991</b>	<b>2,860,104</b>	<b>1,497,097</b>	<b>1,363,007</b>

## Notes and Funding Details

Note 1 & 2: Fulton County is unique to the six-county area, in that it receives DFI (Donated Funds Initiative) funds for transportation. The amount CIAA fund for Transportation and Assisted Transportation is to cover the gap of older persons needing trips to medical appointments in Peoria.

Note 3: The amount reflected in Adult Protective Services is the Federal portion only which funds a Multidisciplinary Team (M-Team) and 24-hour availability. State funds, not reflected here, primarily fund the adult protective services.

Note 4: Federal funding is based on FY 2019 funding levels which may be subject to change depending on the Federal budget process. State funding is based upon the Governor's proposed budget for FY 2020 and may be subject to change. In the event of any changes to the funding, The Board approved policy to address any increase or decrease in funding is detailed under the section entitled "Funding Possibilities: Should Funds Change."

# Funding Possibilities: Should Funding Change

Following is an explanation of what CIAA will do if the amounts of funds available increase or decrease.

## **Title III-B, III-C1, III-C2, III-E, III-D, GRF-Match, GRF-HDM, and GRF-CBS**

### **Increases**

If Title III-B, III-C1, III-C2, III-E, III-D, GRF-Match, GRF-HDM, and/or GRF-CBS, funds increase, CIAA will consider the following actions:

1. Review needs to continue existing services, as listed above, and commit funds as determined necessary.
2. If above action is insufficient, the Area Advisory Council and Board of Directors will consider options and make decisions accordingly, considering priorities.

### **Decreases**

If Title III-B Community Based Services, III-C1, III-C2, III-D, III-E, GRF-Match, GRF-HDM, and/or GRF-CBS funds decrease, CIAA will consider the following actions:

1. Review needs to continue existing services, as listed above, and decrease funds as determined appropriate.
2. If the above action is insufficient, the Area Advisory Council and Board of Directors will consider options and make decisions accordingly, considering priorities.

## **Title III-B Ombudsman and VII Adult Protective Services and Long Term Care Ombudsman Services**

If Title VII Adult Protective Services is increased or decreased, funds allocated for Adult Protective Services will change accordingly. If Title III-B and VII Long Term Care Ombudsman are increased or decreased, funds allocated for Long Term Care Ombudsman services will change accordingly.

## **Area Agency Administration and Administratively Related Direct Services**

If funds for area agency administration are increased or decreased, CIAA will adjust its internal administrative budget accordingly. CIAA received funds for these administratively related direct services:

- Advocacy
- Coordination
- Program Development

If funds for these services are increased or decreased, funds will be adjusted proportionately across these three services.

## **Services by Funding Source**

Title III-B: Community Based Services – Legal Assistance, Transportation, Assisted Transportation, Information & Assistance, Gap-filling Services, Person – Centered Counseling, Long Term Care Ombudsman Services, Outreach, Advocacy, Coordination, Program Development, and Administration.

Title III-C1: Congregate Meals

Title III-C2: Home-delivered Meals

Title III-D: Disease Prevention - Health Promotion Programs

Title III-E: Caregiver/GRG specific services – Information, Assistance, Counseling, Support Groups, Training, Respite and Gap –Filling.

Title V: Senior Employment Services

Title VII: Adult Protective Services and Long Term Care Ombudsman Services

GRF-Match: State match for Older American Act Administration and Services

GRF-HDM: Home-delivered Meals

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Central Illinois Agency on Aging, Inc.  
700 Hamilton Boulevard  
Peoria, IL 61603  
Telephone: (309) 674-2071  
Fax: (309) 674-3639  
Toll-Free 1(877) 777-2422  
Web address: <http://www.ciaoa.net>  
Facebook: <http://www.facebook.com/ciaoa.illinois>



*Central Illinois Agency on Aging, Inc. does not discriminate in admission to programs or activities to treatment of employment in programs or activities in compliance with the Illinois Human Rights Act, the U.S. Civil Rights Act, Section 504 of the Rehabilitation Act, the Age Discrimination Act, the Age Discrimination in Employment Act, and the U.S. and Illinois Constitutions.*

*If you feel you have been discriminated against, you have a right to file a complaint by calling Keith A. Rider, President/CEO, Central Illinois Agency on Aging, Inc. at 309-674-2071 or with the Illinois Department on Aging at 1-800-252-8966 (Voice & TDD).*