

Blue Rivers Area Agency on Aging

Four-Year Area Plan FY 2020-2023

July 1, 2022 through June 30, 2023

Annual Budget

July 1, 2022 through June 30, 2023

Grantor:

State Unit on Aging

Division of Medicaid & Long-Term Care

Department of Health & Human Services

P.O. Box 95026

Lincoln, NE 68509

AREA AGENCY ON AGING: Blue Rivers Area Agency on Aging

Application to operate a service project for older Nebraskans under the Older Americans Act, as reauthorized and amended for the period beginning July 1, 2022 and ending June 30, 2023 in planning and service area.

AND

Annual application for support for the period beginning **July 1, 2022** and ending **June 30, 2023**

The applicant agrees to comply with all federal state and local rules, regulations and policies as outlined in the Older Americans Act, as amended; the Nebraska Community Aging Services Act, the Nebraska Care Management Act, the Local Long-Term Care Ombudsman Program; policies and/or regulations established by the HHS-State Unit of Aging and all other applicable rules, regulations, assurances and ordinances. This includes assurances included in this document.

GRANTEE:	Area Agency on Aging Governing Board Chairperson (or comparable official authorized to sign this document):
Name: <u>Blue Rivers Area Agency on Aging</u>	Name: <u>Mark Schoenrock</u>
Address: <u>103 Eastside Blvd.</u>	Address: <u>70515 579 Ave.</u>
City: <u>Beatrice</u> , NE Zip <u>68310</u>	City: <u>Diller</u> , NE Zip <u>68342</u>
Phone: <u>(402) 223-1376</u>	Phone: <u>303-909-4291</u>
Executive Officer: <u>Carla Frase</u>	

APPLICATION FOR FUNDS 7/1/2022 through 6/30/2023

(Lines 17a, 17b, 17c, 18a, 18b, 18c, & 19)

III-B - Supportive Services	<u>\$536,568.00</u>
III-C(1) - Congregate Meals	<u>\$552,106.00</u>
III-C(2) - Home-Delivered Meals	<u>\$923,601.00</u>
III-D - Disease Prevention & Health Promotion	<u>\$67,827.00</u>
III-E - Family Caregivers Support Program	<u>\$186,417.00</u>
VII-Ombudsman & Elder Abuse	<u>\$0.00</u>
State Funds (such as Care Management, ADRC, Senior Volunteer) (Lines 17a, 17b, 17c, & 19)	<u>\$257,821.00</u>
SUBTOTAL	<u>\$2,524,340.00</u>
Area Agency on Aging Composite Match (Lines 14a-15b)	<u>\$69,000.00</u>
Area Agency on Aging Composite Non-Match (Lines 10 - 12b)	<u>\$1,244,927.00</u>
Area Agency on Aging Composite Gross Cost (Line 9)	<u>\$3,867,867.00</u>

I hereby certify that I am authorized to submit this application and plan

Signed:



Carla Frase
Executive Officer
Blue Rivers Area Agency on Aging



Mark Schoenrock
Chairperson
Blue Rivers Area Agency on Aging

SIGNED COPY INCLUDED WITH STATE PLAN

1. This review was made at the Advisory Committee meeting on March 20, 2019
2. The Advisory Committee for the Blue Rivers Area Agency on Aging, has reviewed the Area Budget and Area Plan Update for this Area Agency on Aging and has the following attached comments.

Attach other comments on separate page(s) as needed.

Continue the support for:

1. ADRC (Aging & Disability Resource Center)
2. Aged and Disabled Medicaid Waiver
3. Caregiver Support Program including Respite and Emergency Response System for respite
4. Care Management
5. Chore – Handyman Program
6. Durable Medical Equipment Loan Program
7. Health Promotion/Disease Prevention Program
8. Homemaker Program
9. Information and Assistance
10. Legal Assistance
11. Nutrition Services – Congregate and Home Delivered Meal Programs
12. Public Transportation
13. Senior Care Options
14. Senior Centers
15. Senior Volunteer Program

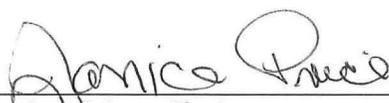
3. Specify groups and/or agencies which have been involved in the update of this plan.
Attach additional page(s) as needed.

Blue Rivers Area Agency on Aging Advisory Council

Blue Rivers Area Agency on Aging Advisory Committee recommends that the DHHS State Unit on Aging approve the FY 2019 Area Budget and Plan update.

YES NO

Signed:



Janice Price, Chair

Blue Rivers Area Agency on Aging Advisory Council

Date: March 20, 2019

*Blue Rivers Area Agency on Aging
Area Plan July 1, 2022 through June 30, 2023
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Blue Rivers Area Agency on Aging
Four-Year Area Plan FY 2020-2023
July 1, 2020 through June 30, 2023

Blue Rivers Area Agency on Aging (Blue Rivers AAA) has been designated by the Nebraska Department of Health and Human Services State Unit on Aging as the planning and service area and is charged with providing programming to residents age 60 and older in the following eight counties in Southeast Nebraska: Gage, Jefferson, Johnson, Nemaha, Otoe, Pawnee, Richardson and Thayer. The original purpose of Blue Rivers AAA was to identify the needs and issues specific to this population and to develop a plan to meet those needs. Blue Rivers AAA serves as an advocate to improve the quality of life for residents age 60 and older.

Blue Rivers AAA is part of state and national aging networks. As one of eight Area Agencies in Nebraska, Blue Rivers AAA is a member of the Nebraska Association of Area Agencies on Aging (Ne4A). Ne4A goals include: (1) continue support of the Aging Networks community-based senior services system through funding from the Older Americans Act, Nebraska Community Aging Services Act, and Nebraska Care Management Act; (2) expand resources and system enhancements; and (3) establish the Area Agency on Aging Network as the appropriate gatekeeper and care manager for long-term care in Nebraska. Blue Rivers AAA is a member of the National Association of Area Agencies on Aging (N4A) and the American Society on Aging (ASA).

Blue Rivers AAA's mission statement is "To develop or support a system of coordinated and comprehensive services for older individuals that promotes a safe, healthy, and independent lifestyle." Blue Rivers AAA's goal is to develop and support services or programs that are designed to maintain or enhance the independent living styles of adults age 60 and older in our service area. Priority has been given to serving adults age 75 and older with specific attention to frail adults age 60 and older. Funding has been the determining factor limiting how many services can be provided; therefore, core services and programs have been developed.

Blue Rivers AAA services receive funding through a combination of federal, state, county, and local funds, as well as participant contributions for services and other charitable donations. The Older Americans Act provides the foundation of funding for adults age 60 and older intentionally designed to mandate that Area Agencies on Aging use the flexibility granted by the Act to ensure that local needs and preferences are taken into consideration and that the resulting local delivery system is tailored to the community. Although a full range of services are not currently available to all adults age 60 and older in all counties of our service area, this remains an overall Agency goal. Adequate funding must be acquired to achieve this outcome.

The Older Americans Act provides the foundation for the creation and continuing evolution of the Blue Rivers AAA.

Older Americans Act and Nebraska History

YEAR	FEDERAL	STATE
1960-61	1 st Whitehouse Conference on Aging held in Washington, DC; led to key legislation, including the Older Americans Act	The Nebraska Governor's Commission on Aging was established. It was charged with providing information about the state's elderly population and preparing for the first White House Conference on Aging in 1961.
1965	Created Administration on Aging (AoA)	The Legislature created the Nebraska Advisory Committee on Aging.
1971		The Nebraska Advisory Committee on Aging became an independent agency, the Nebraska Commission on Aging.
1972-73	Established Congregate Nutrition Program; Area Agencies on Aging, Multi-purpose Senior Center, and Community Service Employment Program	
1974	Added transportation	
1974	Title XX of the <u>Social Security Amendments</u> authorized grants to states for social services. These programs included protective services, homemaker services, transportation services, adult day care services, training for employment, information and referral, nutrition assistance, and health support.	
1975	Authorized grants to Indian Tribal Organizations. Transportation, home care, legal services, and home renovation/repair were mandated as priority services.	
1977	Changes made in Title VII nutrition program, primarily related to the availability of surplus commodities through the Department of Agriculture.	
1978	Mandated Long-Term Care Ombudsman Program to serve as a visible advocate for the elderly; consolidated the Title III Area Agency on Aging administration and social services, the Title VII nutrition services, and the Title V multi-purpose senior centers, into a new Title III and added a new Title VI for grants to Indian Tribal Organizations. The old Title V became the Community Service Employment grant program for low-income persons, age 55 and older (created under the 1978 amendments as Title IX)	
1981	Emphasized supportive services to help older persons remain independent in the community	
1982		The Legislature passed the Nebraska Community Aging Services Act, changing the Nebraska Commission on Aging to the Department on Aging.
1987	Enacted Disease Prevention, Health Promotion, and Elder Abuse Prevention Activities	The Nebraska Care Management Program was created. It called for a statewide system of care management units.

YEAR	FEDERAL	STATE
1988		NE Legislature enacted legislation creating Adult Protective Services.
1992	Separate authority for elder rights activities brought together LTC Ombudsman; prevention of abuse, neglect, and exploitation; and state legal assistance development programs.	
1993		The Nebraska Legislature created the nursing facility pre-admission screening program.
1996		The Nebraska Legislature passed the Nebraska Partnership for Health and Human Services Act, LB 1044, which combined the Departments of Health, Social Services, Aging, and Public Institutions and the Office of Juvenile Services and reorganized them into three agencies. These three agencies are the Department of Health and Human Services Finance and Support, the Department of Health and Human Services Regulation and Licensure, and the Department of Health and Human Services. These three agencies form the Nebraska Health and Human Services System.
2000	Created the National Family Caregiver Support Program	
2007		The Nebraska Legislature reorganized the Nebraska Health and Human Services System (LB 296). It eliminated the three separate agencies and created a single state agency known as the Department of Health and Human Services with six divisions effective July 1, 2007. The Governor appoints a CEO, a director for each division, and a chief medical officer.
2014		The Nebraska Legislature created the Aging Nebraskans Task Force with the passage of LB 690.
2015		The Nebraska Legislature adopted the Aging and Disability Resource Center (ADRC) Demonstration Project Act and required the development of a state plan regarding persons with Alzheimer's or related disorders with the passage of LB 320.
2016		The Nebraska Legislature adopted the Home Care Consumer Bill of Rights Act and the Assisting Caregiver Transitions Act; changed provisions of the Medical Assistance Act, Health Care Facility Licensure Act, Alzheimer's Special Care Disclosure Act, and the Nebraska Community Aging Services Act with the passage of LB 698. Among other actions, this law removed the maintenance efforts required of some area agencies on aging with regard to care management provisions that had been established in 1981 and 1987.

YEAR	FEDERAL	STATE
2018		The Nebraska Legislature enacted the Aging and Disability Resource Center Act (LB 793). The legislation established the aging and disability resource centers (ADRCs) as an ongoing component of Nebraska's long-term care continuum with established partnerships between organizations serving aging persons and persons with disabilities. The Act further provided funding from the Nebraska Health Care Cash Fund for FY19 and FY20.

Brief History of Blue Rivers Area Agency on Aging

Subsequent to passage of the Older Americans Act Comprehensive Services Amendments of 1973, which established the Area Agencies on Aging and added a new Title authorizing grants to local community agencies for multi-purpose senior centers, the Blue Rivers Area Agency on Aging was established in July 1974. Through the Nebraska Inter-Local Agreement Act, the counties of Gage, Jefferson, and Thayer agreed to cooperatively support and establish community based services for older persons in their respective counties.

1976 Blue Rivers AAA developed a network of Senior Centers concentrated in communities having the largest elderly population across the three-county area, offering congregate and home-delivered meals.

1978 The Nebraska Commission on Aging requested realignment of Area Agencies to assure total state coverage of aging programs. Blue Rivers AAA began making contacts with senior groups, local governments, and other interested agencies and groups. The results of these contacts were the development, endorsement, and support of service programs for older persons in all eight counties.

1980 Blue Rivers AAA entered into an agreement with the City of Falls City, the owner of the Falls City Senior Center, where Blue Rivers AAA would establish programs provided by the Older Americans Act of 1965.

1981 Otoe, Nemaha, Pawnee, and Johnson Counties were added to the agency membership. At that point, Blue Rivers had received endorsement in all eight counties of its service area.

1986 The Personal Care program was developed to address the need of older adults who needed assistance with activities of daily living. Home Health Services were a part of this development.

1989 Care Management became a statewide program.

1994 Transportation services were expanded. Two Inter-City connection routes were developed. The Western Route travels from Hebron to Lincoln three days per week, on Monday, Wednesday, and Thursday, with stops made in Fairbury and Beatrice. The Eastern Route travels from Auburn to Lincoln two days per week, Tuesdays and Fridays and travels from Auburn to Omaha one day per week on Wednesdays with stops made in Nebraska City and Syracuse.

1996 The Senior Care Options Program developed into a statewide effort. All of the eight Area Agencies have developed a structured program to assess Medicaid eligible individuals to determine if community based care can be used as an alternative to placement in a nursing facility. Medicaid Waiver is utilized to support community care where appropriate.

1998 The Aging Network assumed the responsibilities of the Aged and Disabled Medicaid Waiver Program.

2001 The Caregiver Support Program was developed to provide assistance to caregivers who are caring for loved ones. The Senior Companion Program was also created.

2005 The Nursing Facility Transition Grant grew to a statewide program and alleight Area Agencies on Aging (AAA) developed activities to promote and inform the public about the transition service that was available. The grant ended but each AAA is expected to provide transition services when appropriate.

2008 Local Long-Term Care Ombudsman and Senior Medicare Patrol (SMP) were initiated. The Ombudsman Program protects nursing and assisted living facility residents' rights. The SMP Program strives to eliminate fraud and abuse in Medicare and Medicaid and protect seniors from scams.

2014 Local Long-Term Care Ombudsman program dissolved and responsibilities reverted back to the Nebraska Long-Term Care Ombudsman. Personal care services were also discontinued due to expenses. Respite care was moved into the self-directed care (cash and counseling) category for Title III-E.

2015 Self-Directed Care expanded to include an array of services self-directed by the caregiver. Examples include:

- a. Minor Home modifications (necessary repair, modifications and/or adaptive alterations to improve the older person's mobility, safety and accessibility);
- b. Emergency response systems (systems ensuring elderly individuals, or people who have medical problems or potential allergic reactions to specific drugs, and other isolated or vulnerable individuals who are at risk of health-related crises receive the medical attention they need during an emergency; includes programs that offer a means of identifying or locating individuals who may wander away from those responsible for their care and become lost);
- c. Incontinence supplies (adult disposable underwear, bedding protection, control devices and alarm systems, to help people who have bowel or urination control problems deal with their situation);
- d. Nutritional supplement (food supplements to ensure that the nutritional needs of low-income and indigent individuals and families are met. This includes liquid dietary supplements needed by cancer patients and others who have difficulty swallowing, digesting or keeping solid food down);
- e. Other supplemental services (other than those mentioned above).

2016 Blue Rivers AAA joined six other Nebraska AAAs to initiate the Aging and Disability Resource Center (ADRC) Nebraska pilot project. Staff received training in several evidence-based programs and are initiating Stepping On, and Tai Chi Moving for Better, placing emphasis on falls prevention – the leading cause of injury, hospitalization and death for seniors. Blue Rivers AAA began a Senior Center and Nutrition program, operating on Wednesdays in

Cortland, Nebraska in partnership with the Cortland Improvement Association.

2017 In February, Blue Rivers moved the administrative offices to a new larger building in Beatrice with room to teach evidence-based programs and offer educational programs to the community. Due to a lack of participation, in November, Blue Rivers AAA closed the Chester Senior Center while continuing home-delivered meal service to the community. In December, the Alexandria Senior Center relocated to the Community Building.

2018 The Nebraska Legislature enacted the Aging and Disability Resource Center Act (LB 793). The legislation established the aging and disability resource centers (ADRCs) as an ongoing component of Nebraska's long-term care continuum with established partnerships between organizations serving aging persons and persons with disabilities. The Act further provided funding from the Nebraska Health Care Cash Fund for FY19 and FY20. Blue Rivers AAA is one of seven AAAs in Nebraska, participating in the ADRC initiative. A weekly route serving Peru State College and the Village of Peru was added to the Public Transportation services.

2019 Due to a lack of participation, at the end of February, Blue Rivers AAA closed the Diller Senior Center while continuing home-delivered meal service to the community. July 1, 2019, Beatrice Senior Center became a direct service center of Blue Rivers AAA.

2020 Due to a lack of participation, Blue Rivers AAA closed the Alexandria Senior Center at the end of February. April 1 Wymore Senior Center moved from the American Legion Center to the Wymore Fire Station.

2020 March 18 All Centers begin home delivered meals only due to COVID-19. Transportation services are suspended indefinitely, and only complex medical trips such as dialysis and cancer treatments are given. Homemaker services are suspended with the exception of Title XX clients. Service Coordinators and Care Managers telework from home and main point of contact are well calls to clients. Core Staff work in the building each day, following the CDC guidelines of sanitary cleanliness.

June 1 Transportation Services begin re-opening for Dr. Appointments, Grocery and medicine purchases, slowly phased in Agency wide. Sanitary Procedures, Masks, Social Distancing still maintained. Homemaker services are allowed, with guidelines and signed waivers in place.

November 3, expanded meals to Plymouth, from Beatrice Senior Center one day a week

2021 February 4 expanded meals to Plymouth two days a week

According to the 2010 Census, the population of the planning and service area of Blue Rivers Area Agency on Aging is provided in the table below:

Pop by age Area/2010	2010	55-64	65-74	75-84	85+	55-85+
Gage	22,311	2,945	2,003	1,544	779	7,271
Jefferson	7,547	1,159	752	586	323	2,820
Johnson	5,217	640	425	325	169	1,559

Nemaha	7,248	975	601	457	245	2,278
Otoe	15,740	2,003	1,350	982	639	4,974
Pawnee	2,773	415	319	263	138	1,135
Richardson	8,363	1,185	911	648	357	3,101
Thayer	5,228	789	582	474	291	2,136
Service Area	74,427	10,111	6,943	5,279	2,941	25,274
Nebraska	1,826,341	213,176	123,126	84,243	39,308	459,853

Thirty-four percent of the service area population is age 55 and older and this number is expected to grow as the population continues to age. Planning to meet the needs of this population must take into consideration the continuum of wants and needs for persons growing up the 1930s, 40s, 50s, 60s and 70s. The experiences and values of people growing up during each of these decades will influence the expectations for services and supports as they age.

In addition, the continuum of functioning within each category of ages is diverse. Some persons age 60 and younger may experience early-onset Alzheimer's disease or other dementia related illnesses requiring more intensive services while some persons age 85 and older may continue to function at high physical and cognitive levels requiring less intensive services and vice versa.

Blue Rivers AAA supports the concept that despite the many decades that separate them, all generations of adults age 60 and over need and deserve opportunities to socialize, volunteer, improve and/or maintain their health and wellness, find resources and connect with the larger community.

The number of adults 85 and older is growing in the Blue Rivers AAA planning and service area. In 2000, the population of persons age 85 and older was 2,737 and in 2010, the number grew to 2,941, a 7% increase.

The National Institute on Senior Centers has taken the lead in studying the evolution of the senior centers. Blue Rivers AAA plans to review how senior centers can evolve to meet the needs of the changing demographics. The AARP published Kathryn Lawler's work entitled "Transforming Senior Centers into 21st Century Wellness Centers" (December 2011) that reviewed the work completed in Louisiana rebuilding after the floods. In this work, several models are presented, however, all seem to share the understanding that an effective center is one that empowers the members to grow, learn, travel and decide what programs to offer.

The following are potential models to review and gather participant and community input:

1. Multi-generational community centers
2. Wellness
3. Lifelong learning
4. Continuum of care/transitions
5. Entrepreneurial center
6. Café program

The Community Center and Wellness Center models are focused around state of the art fitness facilities. The Community Center is open to people of all ages, while the Wellness Center's activities and anticipated health outcomes are targeted to older adults. Lifelong Learning models focus on intellectual and creative activities for older adults. The Continuum of Care model focuses on providing health and wellness activities throughout the aging life span, tailoring activities and opportunities to older adults at all levels of fitness, ability and frailty. The

Entrepreneurial Center model has civic engagement, volunteerism, opportunities to bring forward and generate income from the skills and talents of older adults. Lastly, the Café model provides a restaurant open to people of all ages, but hosts activities and programs to enhance the physical and mental wellbeing of older adults.

Combating social isolation and addressing comprehensive needs of older people were the primary objectives of the earliest senior centers and it is clear that as these new models emerge and evolve, they remain the core focus of all these new iterations. All of the models enhance social interaction and connectedness among a wide range of older adults. All serve as a resource center on a wide variety of issues older adults and their families encounter as they age and all provide basic health prevention services to the participants.

For decades, older adults have relied on Nebraska's aging network to access long-term services and support. Consumers benefit from the aging network's single point-of-entry model; person-centered services; comprehensive management of state and federal long-term resources and local fundraising; in-depth knowledge and experience; long-standing community relationships; mission-driven focus on home and community-based services; and in-home assessment, options counseling and case management.

Current Services Summary

Blue Rivers AAA provides, either by direct operations or by sub-grantees, the following services:

SENIOR CENTERS

1. Nutrition Program
 - a. Congregate Meals
 - b. Home Delivered Meals
 - c. Nutrition Screening and Counseling
 - d. Nutrition Education

Blue Rivers AAA arranges for programming in three types of centers. The first type is a Comprehensive Aging Services Center which operates a minimum of eight hours per day five days a week that provides Congregate and/or Home-delivered meals, information and assistance, volunteer opportunities, health promotion, and transportation to and from the center.

The second type is a Senior Center (Community Center, Aging Services Center) open four to eight hours a day and offers health promotion activities, information and assistance, congregat/home-delivered meals, and volunteer opportunities.

The third type consists of meal programs that could take on several forms, and typically are open two - three hours to provide congregat and/or home-delivered meals as well as social activities. A sub-grant funded with NSIP assists the Eastview congregat housing services program (CHSP) to provide two meals each day to the residents of that housing complex.

Sub-grant locations are as follows:

1. The Auburn Senior Center led by a Board of Directors, offers congregat and home delivered meals. They receive an amount to help cover the costs of raw food and NSIP

reimbursement.

2. The Southeast Nebraska Community Action Program (SENCA) offers meals in Tecumseh. They receive NSIP funding and reimbursement for expenses from Title III-C1 and Title III -C2.

Blue Rivers AAA operated locations are in Alexandria (closed 2/29/2020), Cortland, Davenport, Deshler, Douglas, Fairbury, Falls City, Hebron, Nebraska City, Palmyra, Sterling, Syracuse, Table Rock, and Wymore.

Services available at Senior Centers operated by or receiving financial support from Blue Rivers AAA include:

1. In-Home Services
 - a. Housekeeper
2. Supportive Services
Senior Centers provide a variety of services, including the provision of health, social, and educational services and provide facilities for recreational, general information, and publication activities of older adults. Services include information and assistance, health clinics, and health education.
3. Evidence-Based Health Promotion
4. Information and Assistance
5. Transportation

HOME & COMMUNITY OPTIONS (CHOICES) UNIT

1. Senior Care Options/Medicaid Waiver
2. Emergency Response Systems - Lifelines
3. Care Management
4. Access Assistance
5. Caregiver Support Program - Self-Directed Care
 - a. Respite
 - b. Nutrition supplements
 - c. Incontinence supplies
 - d. Connection to providers for minor home modifications

Other supplemental services such as connection to Personal Nursing Care, Personal Emergency Response Systems, Assessment, Case Coordination and Resource Development are Blue Rivers AAA responsibilities. Eligibility and provider approval is completed by the Department of Health and Human Services. Information and assistance is provided to those individuals that are searching for help. Respite services are available for those that are eligible. Respite provides a break for the caregiver and allows them time off in order to care for themselves. Without relief, a caregiver's health can deteriorate; adding to the burden and reducing the quality of care they may provide their loved one.

OTHER

1. Legal – provided through a contract with Legal Aid for the Elder Access Line
2. Senior Volunteer Program
3. ADRC Nebraska

The Blue Rivers Area Agency on Aging Governing Board is comprised of 14 individuals

representing the eight-county area. Members are appointed by the county commissioners or county supervisors.

An advisory council, comprised of representatives from the service area, meets at least four times a year.

An Executive Director, hired by the Governing Board, administers and oversees the day-to-day operations of the agency including personnel management, financial management, and quality improvement activities.

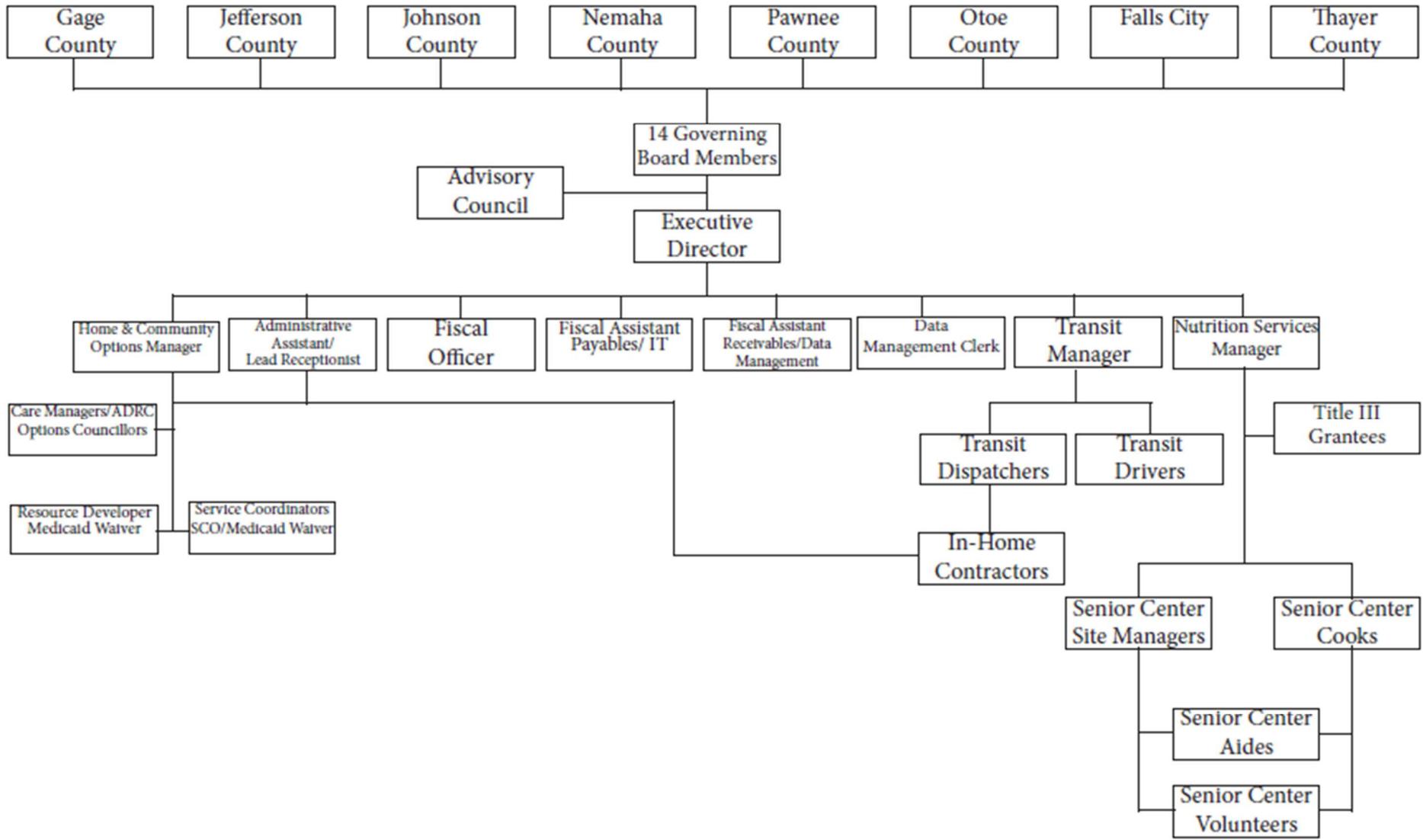
The leadership team consists of the Executive Director, the Fiscal Officer, the Home & Community Options Manager, the Transit Manager and the Nutrition Manager.

The Home & Community Options Manager (CHOICES Unit) oversees the care management program, caregiver support program, Medicaid Waiver service coordination program, in-home services programs, Senior Volunteer Program and ADRC Nebraska. Each of these programs are offered throughout eight-county service area.

The Transit Manager ensures the system complies with all federal, state and local regulations, hires and trains all transit staff, oversees the operation of the five transit sites and is responsible for working with the Fiscal Officer and the Executive Director to develop the annual Public Transit Plan. Public Transportation services receive funding through the Nebraska Department of Transportation and local governmental entities. Public Transportation services are provided on fare-basis and open to the public regardless of age.

The Nutrition Manager is responsible for hiring the senior center site managers, cooks and aides and oversees the local programming. Additionally, the Nutrition Manger provides oversight to the contracted sites.

Blue Rivers Area Agency on Aging Organizational Chart



Blue Rivers Area Agency on Aging 2020 Employee FTE

NAME	JOB TITLE	HOME DEPARTMENT	FTE
Behrens, Doris	SITEMNGR - Site Manager	STMEAL - Sterling Meals	0.63
Bernadt, Michelle K	DATAMANA - Data Management Clerk	ADMINI - Administration	0.75
Bose, Leon F	NTRNDRIV - Nutrition Driver	OCMEAL - Otoe Co Meals Route	0.08
Brehm, Christie L.	SITEMNGR - Site Manager	SYMEAL - Syracuse Meals	0.75
Brown, Jerry L	SUBDRIV - Sub Driver	FATRAN - Fairbury Transit	0.31
Bruce, Melody D.	CKSM - Cook/Site Manager	BENUTR - Beatrice Nutrition	1.00
Buhr, Beverly R	SUBDRIV - Sub Driver	BETRAN - Beatrice Transit	0.25
Busing, Sandra	SUBAIDE - Sub Aide	FAMEAL - Fairbury Meals	0.30
Coffey, Connie R.	SITEMNGR - Site Manager	PAMEAL - Palmyra Meals	0.75
Davis, Sterling B	DRIVER - Driver	AUTRAN - Auburn Transit	0.45
Dettmer, Rhonda L.	COOK - Cook	SYMEAL - Syracuse Meals	0.88
Duis, Dale L.	NTRNDRIV - Nutrition Driver	GACMER - Gage Co Meals Route	0.31
Duis, Harlana D.	SITEMNGR - Site Manager	FAMEAL - Fairbury Meals	0.75
Erickson, Kathy A.	HOMECOMM - Home & Community Options Manager	ADMINI - Administration	1.00
Fangmeier, Katholene L.	SUBAIDE - Sub Aide	HEMEAL - Hebron Meals	0.20
Ford, Debra A	SUBCOOK - Sub Cook	NCMEAL - Nebr City Meals	0.25
Foreman, Wayne A.	DRIVER - Driver	NCTRAN - Nebr City Transit	0.50
Fossler, Tracie D.	ADMNASNT - Admin Secretarial Fiscal Assistant	ADMINI - Administration	1.00
Franken, Wanda M.	DISPATCH - Dispatcher	BETRAN - Beatrice Transit	1.00
Frase, Carla J.	DIRECTOR - Executive Director	ADMINI - Administration	1.00
George, Kathy I	SUBDRIV - Sub Driver	TCMEAL - Thayer Co Meals Route	0.20
Goedeken, Loren R	DRIVER - Driver	IWTRAN - Intercity West Transit	0.50
Graham, Carol A.	DRIVER - Driver	SYTRAN - Syracuse Transit	1.00
Grummert, Debra K.	AIDE - Aide	FAMEAL - Fairbury Meals	0.50
Grummert, Janice M.	SERVCOOR - Service Coordinator	ADMINI - Administration	1.00
Hardenberger, Linda M	SITEMNGR - Site Manager	FCMEAL - Falls City Meals	0.75
Hayes, Thelma B.	COOK - Cook	FCMEAL - Falls City Meals	0.75
Haynes, Dallas C.	NTRNDRIV - Nutrition Driver	OCMEAL - Otoe Co Meals Route	0.10
Henne, Marvin R	DRIVER - Driver	AUTRAN - Auburn Transit	0.75
Hintz, Mary M.	AIDE - Aide	DAMEAL - Davenport Meals	1.00

Hoops, Dorothy H	SUBAIDE - Sub Aide	FAMEAL - Fairbury Meals	0.30
Jones, Lynn A.	NTRNDRIV - Nutrition Driver	GACMER - Gage Co Meals Route	0.63
Keys, Sean M.	COOK - Cook	DAMEAL - Davenport Meals	0.04
Klover, Karen L.	CARMSV - Care Manager/Sr Volunteer	ADMINI - Administration	0.88
Knerl, Jami L.	SITEMNGR - Site Manager	HEMEAL - Hebron Meals	1.00
Laschanzky, Roxann I.	SITEMNGR - Site Manager	DOMREAL - Douglas Meals	0.81
Lechner, Rhobie D.	DISPATCH - Dispatcher	NCTTRAN - Nebr City Transit	0.31
Lindell, Clifton E.	TRANMNGR - Transit Manager	ADMINI - Administration	1.00
Littrel, Sharon I.	SITEMNGR - Site Manager	DAMEAL - Davenport Meals	1.00
MacKey, Rhiannon S.	SUBAIDE - Sub Aide	FCMEAL - Falls City Meals	0.50
Maxon, Carol	SITEMNGR - Site Manager	WYMEAL - Wymore Meals	0.75
McGee, Nancy C.	DISPATCH - Dispatcher	FATRAN - Fairbury Transit	0.50
Meyer, Angelique P.	DRIVER - Driver	WYTRAN - Wymore Transit	0.60
Minzel, Rhonda L	AIDE - Aide	BENUTR - Beatrice Nutrition	0.75
Morris, Maurice L.	DRIVER - Driver	BETRAN - Beatrice Transit	0.63
Noojin, Verjean F.	SERVCOOR - Service Coordinator	ADMINI - Administration	1.00
Parriott, Dawn M.	DISPATCH - Dispatcher	AUTRAN - Auburn Transit	1.00
Perry, Alice J.	AIDE - Aide	SYMEAL - Syracuse Meals	1.00
Pope-Bauer, Donna M	COOK - Cook	FAMEAL - Fairbury Meals	0.30
Rakes, Cathy L.	DRIVER - Driver	BETRAN - Beatrice Transit	1.00
Rentschler, Deanna L.	FISCASNT - Fiscal Assistant	ADMINI - Administration	1.00
Richardson, Bonnie M.	AIDE - Aide	SYMEAL - Syracuse Meals	0.30
Sahs, Edwin C	SUBDRIV - Sub Driver	NCTTRAN - Nebr City Transit	0.20
Schmidt, Sharon R.	DRIVER - Driver	FATRAN - Fairbury Transit	0.80
Smith, Shirley F.	CAREMNGR - Care Manager	ADMINI - Administration	1.00
Sutton, Kathryn F.	NTRNDRIV - Nutrition Driver	TCMEAL - Thayer Co Meals Route	0.38
Theye, Rachel M.	LEADMNGR - Lead Care Manager	ADMINI - Administration	0.25
Thomas, Christine K	AIDE - Aide	BENUTR - Beatrice Nutrition	1.00
Turnbull, Roberta D.	SITEMNGR - Site Manager	TRMEAL - Table Rock Meals	1.00
Vaneperen, Glenda M.	NUTRMAN - Nutrition Services Manager	ADMINI - Administration	1.00
Vitosh, Jeanette K.	SERVCOOR - Service Coordinator	ADMINI - Administration	1.00
Webber, Haley L	SITEMNGR - Site Manager	DEMEAL - Deshler Meals	0.56
Weidel, Gary	DRIVER - Driver	HETRAN - Hebron Transit	0.80

Williams, Bethanie J.	FISCOFCR - Fiscal Officer	ADMINI - Administration	1.00
Wilson, Mary K	SITEMNGR - Site Manager	NCMEAL - Nebr City Meals	0.75
Woods, Donald L.	DRIVER - Driver	NCTRAN - Nebr City Transit	0.50

**BLUE RIVERS AREA AGENCY GOVERNING BOARD MEMBERS
103 EASTSIDE BOULEVARD
BEATRICE, NE 68310 1-888-989-9417**

	<u>Position</u>	<u>County</u>
John Hill	Member	Gage
Richard Douglass	Member	Gage
Marlene Gakle	Member	Gage
Emily Haxby	(Commissioner)	Gage
Mark Schoenrock	President (Commissioner)	Jefferson
Vicki Haskell	Member	Jefferson
Lois Pohlman	Member	Jefferson
Vacant		Johnson
Larry Holtzman	Member (Commissioner)	Nemaha
Dan Crownover	Member (Commissioner)	Otoe
Ron Seitz	Member (Commissioner)	Pawnee
Robert Ferguson	Member	Richardson
Dean Krueger	Vice President (Commissioner)	Thayer
Richard Swenson	Member	Thayer

**Blue Rivers Area Agency on Aging
Advisory Council**

<u>Member</u>	<u>County</u>
Janice Price	Gage
Lana Likens	Jefferson
Jennifer Schell	Johnson
Jessica Gerdes	Nemaha
Tracy Wieckhorst	Otoe
Karen Richardson	Pawnee
Rhonda Dettmer	Richardson
Cheryl Walsh	Thayer

**BYLAWS OF THE GOVERNING BOARD
OF THE
BLUE RIVERS AREA AGENCY ON AGING**

ARTICLE I: AGENCY

- Section 1. Name of Agency. The name of the Agency shall be the Blue Rivers Area Agency on Aging.
- Section 2. Governing Body. The Governing Body of the Agency shall be called the Governing Board of the Blue Rivers Area Agency on Aging and shall be composed of representatives from the member units of local government, who shall be deemed eligible for the appointment to the Agency as prescribed in ARTICLE III: Governing Board in these Bylaws.
- Section 3. Seal of the Agency. The Seal of the Agency shall bear the name of the Agency and the year of its organization.

ARTICLE II: PURPOSE

- Section 1. Purposes. The purposes of the Agency shall be as follows:
- A. The Agency is organized exclusively for charitable, educational, religious, or scientific purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code.
 - B. To act as the firm official advocate for the Area's older citizens with regard to their needs, problems, concerns, and issues;
 - C. To identify and define the most pressing needs of the Area's older citizens;
 - D. To develop, in cooperation with the appropriate Federal, State, and Local Agencies or Entities, effective plans to meet the Area's identified needs on a continuing basis;
 - E. To develop or have developed, in compliance with all current laws, rules, and regulations, governing operations of programs for older citizens, and needed services to meet the identified priority needs of the Area's older citizens as outlined in the Agency's plan;

- F. To monitor and evaluate continually the Area's services and programs for older people to ensure that service and program objectives are being met and that those objectives are meeting the needs of older people;
- G. To cooperate with and coordinate the Area's public and private programs, services, and efforts on behalf of the older people in the Area for the purpose of ensuring that an effective, comprehensive umbrella of services are at the disposal of any of the Area's older citizens in need of the services;
- H. To do any and all things within the ability of the Agency and all Entities served by the Agency to improve the quality of life for the Area's older citizens.

ARTICLE III: GOVERNING BOARD OF THE AGENCY

Section 1. Representation. The number of members on the Governing Board of the Agency shall be fourteen (14). The number of representatives on the Governing Board of the Agency for each participating county shall be: Gage County, four (4) members; Jefferson County, three (3) members; Thayer County, two (2) members; Johnson County, one (1) member; Nemaha County, one (1) member; Pawnee County, one (1) member; Richardson County, one (1) member; and Otoe County, one (1) member.

Section 2. Eligibility. A portion of the representatives of the Governing Board shall be individuals aged sixty (60) and above. Each member county shall appoint one (1) member of its board, or a designee, with full authority to make commitments on its behalf and to represent its interests and the interests of its constituent older persons. The remaining appointees shall be made up of representatives of agencies and institutions serving the elderly, public officials, and interested citizens, except that no individual representing an agency receiving funds under any of the contract(s) by the agency may participate in any way in the deliberations affecting the funding of that contract.

Section 3. Appointment Procedures. The Board Chairperson of the Governing Body of each member county shall appoint the number of Agency Governing Board members allotted to his/her respective county. The Governing Body of each member county shall by resolution approve its chairperson's appointee(s) to the Governing Board of the Agency.

Section 4. Term. Members shall be appointed as aforesaid in Section 3 for a term of three (3) years except that all vacancies shall be filled for the unexpired terms. A member shall hold office until his successor has been appointed. A certificate of the appointment or reappointment of any member shall be filed with the respective county clerk, with a

copy to the Administrative office of the Agency, evidence of the due and proper appointment of such member.

Section 5. Compensation. A member shall receive no compensation for his services, but he or she shall be entitled to the necessary expenses, including travel expenses, incurred in the discharge of his or her duties.

Section 6. Executive Committee. At the discretion of the Governing Board, an Executive Committee composed of President, Vice-President, and Secretary of the Governing Board, or such other members of the Governing Board as may be designated, may be appointed and empowered to act on behalf of the Governing Board between regular meetings. Such appointments shall be for the length of time specified in the motion for the appointment, and in all cases shall expire on the date of the next annual meeting as specified in ARTICLE V, Section 1.

Section 7. Special Committees. The President of the Governing Board may as deemed necessary appoint Special Committees to carry out specific projects as identified by the Board or Agency. Such tasks shall be stated in the appointment of the committee, and its role and function shall be limited to its stated purpose. The membership of any Special Committee may not exceed five (5) members of the Governing Board.

ARTICLE IV: OFFICERS

Section 1. Officers. The officers of the Governing Board shall be the President, Vice President, and the Secretary. Officers shall be elected at the Annual Meeting each year, and shall serve until the next election.

Section 2. President. The President of the Governing Board shall preside at all meetings of the Board. The President may submit, at each meeting, such recommendations as he/she may consider proper concerning the business affairs of the Governing Board and/or Agency. He/she shall be empowered to sign, on behalf of the Governing Board, all documents requiring the signature of a member of the Governing Board.

Section 3. Vice President. The Vice President shall perform the duties of the President in the absence or incapacity of the President. The Vice President shall be empowered to carry out all the duties and functions of the President in the event of the resignation or death of the President, and shall serve in this capacity until such time as the Governing Board shall elect a new President.

Section 4. Secretary. The Secretary, or a designated Recording Secretary, shall keep a written record of all meetings of the Governing Board, including a record of all votes and general proceedings. Such records, to be known as the official minutes, shall be

submitted for approval at the next Regular or Special Meeting of the Governing Board. The Recording Secretary shall be an employee of the Agency, as identified by the Executive Director prior to each meeting.

Section 5. Additional Duties. The Officers of the Governing Board shall perform other such duties and functions as may from time to time be required by the Governing Board and its Bylaws to carry out the purposes as outlined in Article II above.

Section 6. Vacancies. Should the office of President, Vice President, or Secretary become vacant, the Governing Board shall, at its next Regular Meeting after the vacancy occurs, elect from its membership a successor. Such election shall be for the unexpired term of said office.

Section 7. Personnel. The Governing Board shall employ an Executive Director. He/she shall be authorized to carry out those duties and functions as are necessary to fulfilling the role and mission of the Agency. The Executive Director, subject to review and/or approval of the Governing Board, shall employ other such personnel as are necessary to carry on the operations of the Agency. In the event of the resignation, long term incapacity, or death of the Executive Director, the Governing Board shall appoint an Acting Director. This Acting Director shall serve until such time as the Governing Board selects a new Executive Director, and he/she begins employment with the Agency. The Governing Board may, at its discretion, replace the Acting Director at any time it is deemed necessary for the good of the Agency.

ARTICLE V: MEETINGS

Section 1. Annual Meetings. The Annual Meeting of the Governing Board of the Agency shall be held on the fourth Monday of July at a duly designated time and place.

Section 2. Regular Meetings. Regular Meetings shall be held at such time or place as may from time to time be designated by resolution. In the event such date shall fall on a legal holiday, the meeting shall be held on the next regular working day.

Section 3. Special Meetings. Special Meetings of the Governing Board may be called by the President or five (5) members of the Governing Board for the purpose of transacting any business designated in the call. The call for a Special Meeting shall be delivered at least 24 hours before the scheduled meeting time to each Board member. Delivery may be accomplished in the most cost efficient manner for each call sent.

Section 4. Meeting Agenda. The written Agenda for the Annual, Regular, or Special Meetings of the Governing Board shall be prepared in the office of the Agency by the Executive Director or his/her designee. Agendas for the Annual and Regular

Meetings of the Governing Board shall be mailed or delivered to the members of the Board prior to the meeting date. When feasible, Agendas for Special Meetings will be mailed or delivered to the members of the Board prior to the meeting. However failure of Board members to be provided with copies of the Agenda prior to the Annual or Regular meetings shall not be deemed cause to declare a meeting invalid if all other conditions for the conduct of such meetings are met.

Section 5. Voting. A Quorum shall consist of at least eight (8) members present at a Regular, Special, or Annual Meeting. Action on behalf of the Governing Board and/or Agency may be taken upon a vote of a simple majority of those present and voting at a meeting.

ARTICLE VI: AGENCY SUPPORT

Section 1. Method of Assessment. In sharing the expense of the approved annual Agency Budget, entities being served shall be assessed a proportionate share of the support of the Agency based on a per capita basis of each entity's population aged sixty (60) years and older, and on the level and number of services being received.

Section 2. Assessment of Notification. The Agency shall on or before the last working day of June notify the entities served by the Agency of their assessment for the ensuing fiscal year. This notification shall be in such manner and at such time as is agreeable between the Agency and the Entity being notified.

Section 3. Method of Payment. Payments to the Agency shall be made at such time, and in such manner, as shall be agreed upon by the Agency and the Entity being served. In addition to the assessment, each Entity may provide funds, equipment, and accommodations necessary for the work of the Agency.

ARTICLE VII: FINANCIAL AFFAIRS

Section 1. Fiscal Officer. The Agency shall employ a Fiscal Officer who shall have the primary responsibility for the financial affairs of the Agency. These responsibilities shall include, but not be limited to, General Accounting, Billing, Budgeting, Payroll, Payment of Claims, required record keeping, plan preparation and reports, and such other duties consistent with this position as may be assigned by the Executive Director and/or the Governing Board. This shall include a financial report to be delivered monthly to each Board member. The Fiscal Officer may at his/her discretion assign such duties to other appropriate employee(s) of the Agency.

Section 2. Payment of Claims. The Fiscal Officer or his/her designee shall review and approve all claims for payment. Such payment shall be by bank check, drawn upon the appropriate Agency Account designated for the purpose of support for the program for which the claim is filed. All checks prepared for the payment of claims shall bear the signature of the Executive Director or his/her designee.

Section 3. Receipt of Monies. All monies received by the Agency shall be deposited, by the Fiscal Officer or his/her designee, in the financial account for which they are designated. Such deposits and accounts shall be handled in a manner consistent with generally recognized good financial practices.

Section 4. Audit(s). The Agency shall make arrangements for at least an annual audit of its financial records. It shall also conduct or cause to be conducted such other audits as may be deemed necessary or are required by the laws, rules, or regulations under which the Agency operates. The results of all audits shall be made known to the members of the Governing Board and all other Agencies who, by law, rule, or regulation, are entitled to such results.

ARTICLE VIII: RULES OF ORDER

Section 1. Rules of Governing Board. The rules contained in *Robert's Rules of Order, Revised*, shall govern the Board in all cases to which they are applicable and in which they are not inconsistent with Bylaws and/or laws, rules, and regulations governing the operations of the Board and/or Agency.

ARTICLE IX: AMENDMENTS

Section 1. Amendments of Bylaws. The Bylaws of the Governing Board shall be amended only with the approval of at least a quorum, as defined in ARTICLE V, Section 4, of the Board membership at a Regular or Special Meeting, but no such amendment shall be adopted unless at least thirty (30) days written notice thereof has been given to all members of the Governing Board.

ARTICLE X: DISSOLUTION CLAUSE

Upon the dissolution of the Agency, the Agency shall, after paying or making provision for the payment of all the liabilities of the Agency, dispose of all the assets of the Agency exclusively for the purpose of the Agency in such manner, or to such organization or organizations organized

and operated exclusively for charitable, educational, religious, or scientific purposes as shall at the time qualify as an exempt organization or organizations under Section 501(c)(3) of the Internal Revenue Code of 1986 (or the corresponding provision of any future United States Internal Revenue Law) as the Governing Board shall determine. Any such asset not so disposed of shall be disposed of by the Court of the Common Pleas of the County in which the principal office of the Agency is then located, exclusively for such purposes or to such organization or organizations as said Court shall determine which are organized and operated exclusively for such purposes.

**BYLAWS OF THE ADVISORY COUNCIL
OF THE
BLUE RIVERS AREA AGENCY ON AGING**

ARTICLE I: COUNCIL

Section 1. Name of Council. The name of the Council shall be the Blue Rivers Area Agency on Aging Advisory Council.

Section 2. Advisory Body. The Advisory Council shall be composed of representatives who shall be deemed eligible for appointment to the Council as prescribed in Article III, in the Membership section of these Bylaws, and from each of Gage, Jefferson, Johnson, Nemaha, Otoe, Pawnee, Richardson, and Thayer counties.

ARTICLE II: PURPOSE

Section 1. Purposes. The purposes of the Advisory Council shall be as follows:

- A. To provide local input to the development and operation of the Blue Rivers Area Agency on Aging.
- B. To act as an advocate for older adults with regard to needs, problems, concerns, and issues.
- C. To assist the Blue Rivers Area Agency on Aging in the development and administration of needed services to meet the identified priority needs of the area's older adults as outlined in the Agency's Annual Area Plan.
- D. To monitor and evaluate services and programs for persons age 60 and older in Gage, Jefferson, Johnson, Nemaha, Otoe, Pawnee, Richardson, and Thayer counties.
- E. To engage in activities as may be necessary for developing recommendations and proposals to the Blue Rivers Area Agency on Aging.

ARTICLE III: MEMBERSHIP

- Section 1. Representation. Each County shall have one representative.
- Section 2. Eligibility. The majority of the representatives shall be age 60 or older. The Advisory Council shall consist of actual consumers of services, the general public, and representatives of public and private agencies.
- Section 3. Terms. The Chair shall make the initial designation of term appointments to the Advisory Council whereby one-half the total number of members are appointed to terms of one year and one-half the total number of members are appointed to terms of two years. Thereafter, members may be re-elected to additional terms by a majority vote of those members present at a regular meeting. All vacancies shall be filled by a majority vote of those present at a regular meeting on nominations presented.
- Section 4. Compensation. Members of the Advisory Council shall receive no compensation for services.
- Section 5. Executive Committee. The Executive Committee shall be composed of the three officers of the Advisory Council as stated in Article IV.

ARTICLE IV: OFFICERS

- Section 1. Officers. The officers of the Advisory Council shall be the Chair, the Vice-Chair, and the Secretary.
- Section 2. Chair. The Chair shall preside at all meetings. At each meeting, the Chair shall submit such recommendations or information as he/she may consider proper concerning the business affairs and policies of the Council.
- Section 3. Vice-Chair. The Vice-Chair shall perform the duties of the Chair in the absence or incapacity of the Chair and in the case of the resignation or death of the Chair. The Vice-Chair shall perform the duties of the Chair until such time as the Council shall elect a new Chair.
- Section 4. Secretary. The Secretary shall have the responsibility to act as recording secretary of the meetings and keep a record of proceedings.
- Section 5. Additional Duties. The officers of the Council shall perform such other duties and functions as may be required by the Council and the Bylaws to carry out the purpose as stated in Article II.

Section 6. Election and Appointments. The Chair, Vice-Chair, and Secretary shall be elected at the annual meeting from the membership of the Council.

Section 7. Vacancies. Should the offices of the Chair, Vice-Chair, or Secretary become vacant, the Council shall elect a successor from the membership of the Council at the next regular meeting. Such election shall be for the remaining term of the officer who is leaving office.

ARTICLE V: MEETINGS

Section 1. Annual Meetings. The annual meeting of the Advisory Council shall be its July meeting of each year at a location to be designated by the Council.

Section 2. Regular Meetings. Regular Meetings shall be held quarterly (January, April, July, October) at an agreed upon time and location.

Section 3. Special Meetings. Special Meetings may be called by the Chair or five members of the Advisory Council for the purpose of transacting business designated in the call. The call for a special meeting must be delivered to the members of the Council at least two days prior to the date of the special meeting.

Section 4. Voting. A majority of the members of the Advisory Council shall constitute a quorum for the purpose of conducting business and all other purposes. Action may be taken by the Council upon a vote of the majority of the members present.

ARTICLE VI: RULES OF ORDER

Section 1. Rules of Advisory Council. The rules contained in Robert's Rules of Order shall govern the Council in all cases to which they are applicable and in which they are not inconsistent with the agreement creating this Council and its Bylaws.

ARTICLE VII: AMENDMENTS

Section 1. Amendment of Bylaws. The Bylaws of the Advisory Council can be amended by a majority of the Council, but no such amendment shall be adopted unless thirty (30) days' written notice thereof has been given to all members of the Council.

Blue Rivers Area Agency on Aging
Four-Year Area Plan July 1, 2019 through June 30, 2023
Goals, Objectives, Strategies

Administration on Community Living Strategic Goals

Goal 1: Advocacy

Advocate to ensure the interests of people with disabilities, older adults, and their families are reflected in the design and implementation of public policies and programs.

Objective 1:

Increase public awareness and understanding of the interests of people with disabilities, older adults and their family members.

Strategy 1:

Increase public awareness through radio and TV ads, public speaking, social media, paid and unpaid media.

Performance Measures:

1. Blue Rivers AAA will maintain public speaking engagements. Baseline is 3 per year.
2. Will contract with radio stations in our service areas to increase awareness of our services offered. Baseline is 2

Blue Rivers has spoken at Civic Group in Burchard, Palmyra City Council, Wymore City Council, Food Coalition, Community Connections, Leadership Beatrice, Dunbar City Council, Davenport Achievement Council, Sertoma Club. Goal met at 10 public speaking. Contracted with radio 2 times goal met.

Strategy 2:

Seek opportunities for the AAAs to collaborate on messaging and awareness opportunities.

Performance Measures:

1. Collaboratively work with State Senators by meeting with statewide State Senators one time per year and with State Senators serving the Blue Rivers AAA service area three times per year.
2. Maintain the number of meetings with the Director of Medicaid six times per year.
3. Maintain the number of meetings with collaborating partners.
4. Baseline is 4 per year.

Director receives emails from Senators and Legislators. AAA Directors meet with Tony Green, Director of DDD every month at Director meetings. Director/Choices Unit Supervisor attends ADRC Leadership meetings as scheduled. Met Goal with 14 meetings

Objective 2:

Engage Federal, State, and Local policy makers and other partners to ensure existing policies and programs optimally reflect the interest of people with disabilities, older adults, and their family members.

Strategy:

Communicate and educate Federal, State, and Local policy members to influence public policy related to people with disabilities, older adults, and their family members.

Performance Measures:

1. Increase contact with Federal, State and Local policy members by 10% per year by meeting with one time per year with a member of the U.S. Congressional delegation representing Nebraska in addition to meetings with State Senators. Baseline is 1 per year.

AAA's engage with a lobbyist to work with Senators developing legislation benefiting our senior clients. Have reached out to Representatives Fortenberry and Fischer regarding increased Federal Funding. Met w/Senators Brandt/Dorn in-house. Goal Met with 5 meetings

Objective 3:

Lead the development and implementation of new public policies and programs that advance the interest of people with disabilities, older adults, and their family members.

Strategy:

Work collaboratively with advocacy groups, AARP, caregivers, Disability Community, and others with similar interests.

Performance Measures:

Maintain contact opportunities with collaborative partners. Contact opportunities are defined as invitations by those partners to address new public policies and programs. Baseline is 4

Nutrition Manger met with Unadilla officials regarding home delivered meals from Syracuse through May, began program June 2021. Continued meals to Pawnee City/Humboldt from Table Rock increasing in numbers. Choices Unit Supervisor presents Disrupt Aging Classroom to colleges nationwide, examining their aging perceptions, and growing aging population in relation to future careers. Director meets with Disability Partners monthly, via ADRC Leadership. Met goals with 12 meetings.

Goal 2: Protect Rights and Prevent Abuse

Protect and enhance the rights; and prevent the abuse, neglect, and exploitation of older adults and people with disabilities.

Objective 1:

Identify, strengthen, and enhance collaboration of programs at all levels that impact the rights and prevent the abuse, neglect and exploitation of older adults and people with disabilities.

Strategy 1:

Develop strategic partnerships that encourage, educate, and empower stakeholders on the rights, and prevention of abuse, neglect, and exploitation of older adults and people with disabilities.

Performance Measure:

1. Increase units of service by 10%
Baseline is 200 units
2. Offer one legal clinic per year

Current units are 466 units, which is way over our estimated. Chuck Bentjen, our Legal Contract Attorney has been responsible for most of these units, and does monthly presentation at Agency Centers. April 12 Agency hosted the UNL Legal Clinic, with 22 participants, very successful.

Strategy 2:

Continue partnerships with disability partners, APS, and others to support elder rights and prevent abuse, neglect, and exploitation.

Performance Measure:

Maintain newsletter articles, financial publications, and social media awareness on Elder abuse and financial exploitation at 25 articles and/or social media awareness posts per year.
Baseline is 20 per year

Blue Rivers Area Agency contributes to the Elder Access Line, promoting it in the Agency newsletter each month. Director participates in Elder Rights Coalition Meetings, Elder Justice Training attended by 8 staff. Legal Services information printed each month in Agency newsletter. Director continues to attend Disability Education Series. Goal met at 30.

Objective 2:

Educate and empower stakeholders on the rights and prevention of abuse, neglect, and exploitation of older adults and people with disabilities.

Strategy:

Implement tools for the education and empower stakeholders that include public speaking engagements, websites, outreach, virtual meetings and printed materials.

Performance Measure:

Maintain publications, social media awareness posts, and/or presentations. Baseline is 30 per year.

Blue Rivers posts Scam information on our Facebook and has meals inserts on public service announcements pertaining to scams. Met goal with 30 posts/scam inserts.

Objective 3:

Facilitate individual access to advocacy and representation to protect individual rights and prevent abuse.

Strategy:

Through legal service representation, elder access line, Ombudsman, and presentations to the staff and the public, promote awareness of rights and prevent abuse, neglect, and exploitation of older adults and people with disabilities.

Performance Measure:

1. Increase the number of clients represented by 10%
Baseline of clients is 47 per year.

Continue with Elder Access Line support, current number served is 42, should reach current baseline of 47.

Goal 3: Individual Self Determination

Work with older adults and people with disabilities as they fully engage and participate in their communities, make informed decisions, and exercise self-determination and control about their independence, well-being, and health.

Objective:

Promote programs and strategies that support community integration for older adults and people with disabilities.

Strategy:

Provide older adults and people with disabilities, information, education, and counseling on their options to live as independently as possible in the community.

Performance Measures:

1. Maintain current number of clients served through Care Management.
Baseline of 160
2. Maintain the number of persons served through ADRC.

Baseline is 285.

3. Maintain the number of units of evidenced-based programs at two per year. Current baseline is 2.

Care Managers continue to maintain with all care management clients, with in-home visits, and have signed up new clients. Current number is 174 unduplicated

Care Managers assist all ADRC calls, current ADRC number of clients served is 313, surpassing our goal.

Home & Community presented Tai Chi in Beatrice, assisting 21 clients, and presented Stress Busters to Agency Staff, with 13 eligible for IID Evidence Based, maintaining baseline.

Goal 4: Long-Term Services and Supports

Enable people with disabilities and older adults to live in the community through the availability of and access to high-quality long-term services and supports, including supports for families and caregivers.

Objective 1:

Provide comprehensive information to empower eligible individuals to make informed choices regarding long-term care services and supports.

Strategy:

Increase public awareness through radio and TV ads, public speaking, social media, virtual meetings, paid and unpaid media.

Performance Measure:

Maintain publications, social media and radio ads on long-term care services and supports. Baseline is 12

Director presented to Leadership Beatrice, Food coalition, Community Connections, Beatrice Mayor/staff, Fairbury mayor/staff, Fiscal to Dunbar citizens, Nutrition to Sertoma group, Care Manager to Burchard community all on Agency services. Continue to maintain our facebook page, radio ads, newsletter, newspaper ads of services of all services from our Agency, baseline surpassed. Goals met at 35 public awareness via meetings/radio/social media

Objective 2:

Ensure that the ADRC is an ongoing component of Nebraska's long-term care continuum, and that ADRC sites coordinate and establish partnerships with organizations specializing in serving aging persons and persons with congenital and acquired disabilities.

Strategy:

Communicate and educate Federal, State, and Local policy members to influence public policy related to older adults and people with disabilities.

Performance Measure:

Maintain meetings with Medicaid Administration leadership with regard to long-term services and supports by attending the monthly scheduled LTSS meetings for representation of the ADRC. Baseline is 12/year.

Supervisors meet monthly with State ADRC Coordinators. Director meets monthly with Tony Green and with ADRC Leadership and Disability Partners, Goal met with 16 meetings.

Objective 3:

Promote a convenient point of entry to eligible individuals seeking information and access to long-term care services and supports.

Strategy:

Continue to explore and work with the State Medicaid Agency in the development and implementation of a No Wrong Door system.

Performance Measure:

Continue to have representation from the Ne4A on committees and subcommittees for No Wrong Door system. Both Blue Rivers AAA and Ne4A maintain a presence at meetings for this initiative. Baseline is 90% attendance.

Director has attended all AAA meetings and all ADRC Leadership meetings for the past 10 months.

Objective 4:

Explore opportunities for sustainability of the Nebraska ADRC.

Strategy:

Advocate with the Nebraska Legislature to increase funding for the ADRC.

Performance Measure:

Maintain level of work and involvement with individual Board Members, Nebraska Senators, and the Ne4A Lobbyist. Baseline is 90% of meetings.

Through involvement with all AAA Directors Statewide, follow all Legislature bills introduced, showing support as an entity for Nebraska ADRC legislation. AAA's work with lobbyist, who also attends Director meetings as necessary. Director has attended all meetings this year, goal met at 100%.

Goal 5: Effective and Responsive Management

Implement management and workforce practices that support the integrity and efficient operations of programs serving people with disabilities and older adults, and ensure stewardship of taxpayers' dollars.

Objective 1:

Implement management improvement activities, including program integrity and internal control initiatives, to strengthen business processes, improve efficiency, and promote accountability.

Strategy:

Research and share best practices among the Area Agencies on Aging.

Performance Measure:

Share program integrity and internal controls by adding to the Agenda of the monthly Ne4A meeting. Baseline is 11 per year.

Blue Rivers Director attends all AAA meetings, where best practices of all Agencies is shared every meeting. Pandemic issues/funding have been shared during these meetings and all Nutrition Coordinators meetings, 100% attendance by Agency Personnel. On-going Cross training for Segregation of Duties continues with all staff.

Objective 2:

Utilize emerging technologies and leverage shared services to promote innovation, improve accessibility, and better support our mission.

Strategy: Utilize new State software to record and report activities.

Performance Measure:

Staff will continue to participate in training of the data collection software. Baseline is 100%.

All training offered for the data collection software is attended by at least 3 staff every training opportunity.

Blue Rivers Area Agency on Aging
Four-Year Area Plan July 1, 2019 through June 30, 2023
Planning Process

The staff of Blue Rivers Area Agency on Aging uses a multi-faceted process for planning that begins with listening to the participants and clients, referral sources, the community, and the staff, to collect information about current needs and to have discussions about future needs.

- A. **Public Input:** Surveys have been used to elicit input from the participants and clients. An informal compilation of client/participant needs is submitted to the administrative office to assist in planning. Senior Center staff also elicit input from the participants regarding activities, meals, and exercises for the brain and the body.
- B. **Referral Sources:** Home health agencies, local hospitals, and other community service providers are part of the community of older adults served by Blue Rivers AAAA. Staff collaborate and create individualized service plans and gather input regarding community needs.
- C. **Community:** When Blue Rivers AAA proposed to submit an Area Plan on Aging or seek a waiver, a survey was disseminated to all congregate meal site participants, home delivered meal recipients, homemaker and chore service recipients, emergency response system clients, public transportation riders, care management clients, and visitors to senior centers, public transportation offices and the administrative offices.
- D. **Staff:**
 - 1. The Care Management and Aged and Disabled Waiver staff have a combined experience of over 150 years. Each staff member has experience working in the nursing home setting and each cites working with people in their own homes as the more preferable method. According to staff report, clients seem to be happier when in their own homes and supported in their independence. Although an older person's isolation can put them at risk for neglect or exploitation, the staff members who provide care management or service coordination continually assess their needs in order to make adjustments to the plan as needed. The face-to-face contact provides the client with assurance and some responsibility for achieving their goals because someone else is checking on them.
 - 2. Support staff create and update resource lists of services to support older adults in each county to assist direct service staff to coordinate and use as much as possible the services and resources of other appropriate public and private agencies and organizations.
- E. **Advisory Council:** The Blue Rivers Area Agency on Aging Advisory Council provides input into the planning process. Members the counties volunteer their time to attend meetings and make local contacts to learn about and understand their community needs. The Advisory Council makes recommendations to the Blue Rivers Area Agency on Aging Governing Board to be used in the development of the annual and four-year plan.

- F. Public Information: Blue Rivers uses the various internet resource centers such as the National Council on Aging or the Aging and Disability Resource Center Technical Assistance Exchange to identify upcoming trends and evidence based interventions. Census data and the estimated census reports help Blue Rivers AAA identify the upcoming demand for services.

When available, Blue Rivers AAA uses resources such as local city/county planning documents or studies as the foundation for strategic planning. The advisory council and the site managers help identify needs and make recommendations for the future. Utilization data is also used to assess the service needs and trends occurring in the service delivery area.

Surveys have been used in the past to collect information; however, the agency has expanded the use of surveys to provide valuable information and connect the agency to the people we serve.

Blue Rivers AAA continues to explore the role of senior centers in the communities we serve. Serving mostly rural communities, we understand the value of these centers to provide both nutrition services and to prevent social isolation in more remote areas.

Public transportation services are provided by Blue Rivers AAA in five counties within our eight-county service area and is funded by the Nebraska Department of Transportation grants. The service is utilized by persons of all ages in need of transportation services to access food, medical care, and recreational activities. The current NE Medicaid non-medical emergency system does not seem to meet the needs of the persons who reside in the Blue Rivers AAA planning and service area. The Intelliride system lacks customer service for both agencies and customers and is non-responsive to requests to work with the system. Blue Rivers AAA has increased service to communities and our inter-city routes are experiencing increased utilization.

Some of the Title III funds may need to be reallocated to provide transportation for persons in our service demographic residing in rural areas. The Federal Transit Administration also recognizes the positive outcomes to the health and well-being of older adults when transporting people to their medical appointments. With the health services industry's current focus on preventive services and other methods to increase the efficiency and effectiveness of medical care there is an emerging awareness of the need to increase partnerships between health/wellness providers and transportation providers.

Every activity of Blue Rivers AAA attempts to plan for the needs and create services that focus on the needs of low-income minority older individuals and older individuals residing in rural areas. Blue Rivers AAA serves the rural area and there are very few minority older individuals in the planning and service area.

Year	Geography	County	Population Age 60 and Older Minority	Percent of Population Age 60 and Older Minority
2013	Nebraska	Gage County	96	1.60%
2013	Nebraska	Jefferson County	31	1.40%
2013	Nebraska	Johnson County	57	4.70%
2013	Nebraska	Nemaha County	29	1.60%
2013	Nebraska	Otoe County	112	2.80%
2013	Nebraska	Pawnee County	10	1.10%
2013	Nebraska	Richardson County	78	3.10%
2013	Nebraska	Thayer County	23	1.30%
			436	
		From: Aging Integrated Database		

Blue Rivers Planning and Service Area	2012 Population Age 60 and Older Minority	Percent of Population Age 60 and Older Minority
From: Aging Integrated Database	417	2.10%

The University of Nebraska Omaha and the Department of Gerontology and Center for Public Affairs Research completed a needs assessment by conducting telephone interviews of persons aged 50 and older in the Blue Rivers AAA service area. The sample consisted of 200 interviews.

Doing heavy housework was identified by 20% or more of the overall sample of adults age 50 or older as activities in which help is needed. Of the respondents age 85 and older in this sample more than one-fifth responded that they need help in each of the following six areas: doing heavy housework, going places outside of walking distance, getting around outside, buying/getting food or clothes, doing laundry and cooking/preparing meals.

The report indicated that many respondents have a high interest in services and information about health issues and medications. This finding supports the idea of educating younger old persons about options available to them. Transportation was identified as a service of interest to persons between the ages of 55-64, despite their report of having not used the service.

Telephone reassurance was a service respondents indicated they may need in the future along with home delivered meals, handyman/housekeeper, and care management. The report suggested that the high interest of persons 50 and older expressed in the survey in services such as handyman and homemaker services could be an opportunity for Blue Rivers AAA to offer programming that could generate revenue if offered to a new population at a fee.

The oldest old surveyed, 85 and older, identified home health, transportation, handyman services, homemaker, and information on health issues and new medications as areas of interest and need. Fall prevention programs would also be beneficial because 31% of persons 85 and older indicated they had fallen in the last year.

One recommendation of the report is to market the care management program more. Only 9% of respondents mentioned using this service in the past. Marketing care management programming can assist persons to facilitate needed interventions such as home health, support aging in the community, and increase understanding of the array of services offered by Blue Rivers AAA.

The report identified long-range planning such as legal and financial management as areas to explore for the future of the agency. Collaborating with community partners may be the method to make these services available.

Blue Rivers AAA recognizes the need to target specific populations identified in the OAA such as those with the greatest economic and social needs. The State Unit on Aging monitors the ability of the Blue Rivers AAA to serve those who may be vulnerable, such as minorities, people with disabilities, and those who live at or below poverty level or live in rural areas as indicated in the Nebraska State Plan.

OAA, as amended in 2006, maintained all of the previous targeting groups but revised the group *“limited English speaking”* to *“limited English proficiency,”* and added a new group, *“older individuals at risk for institutional placement.”* A reference to *older individuals with limited English proficiency* is added to all sections of the OAA where previously the phrase *“with particular attention to low-income minority older individuals and older individuals residing in rural areas”* was used. The revision and addition of these two groups provides guidance to the aging network to provide services to those individuals in greatest need of long-term care services, and address their specific needs in all aspects of planning, advocacy and resource development.

The OAA directs the local area agency on aging to assess their particular environment to determine those populations best targeted based on *“greatest social need.”* Blue Rivers AAA currently serves older adults in rural areas, a priority population of the OAA. The counties served by Blue Rivers AAA do not have large minority or Limited English Proficiency (LEP) populations.

The following table shows the population estimates of older adults and their potential economic need for services because their income is below the poverty level in the past 12 months. This information assists Blue Rivers AAA to assess the County’s share of the cost to provide services.

Name of County	Total Male and Female aged 65 and over with income in the past 12 months below poverty level	% of the county
Gage	423	30%
Jefferson	148	11%
Johnson	97	7%
Nemaha	71	5%
Otoe	291	21%
Pawnee	92	7%
Richardson	149	11%
Thayer	124	9%
Total	1395	100%

POVERTY STATUS IN THE PAST 12 MONTHS BY SEX BY AGE - Universe: Population for whom poverty status is determined 2009-2013 American Community Survey 5-Year Estimates

Blue Rivers AAA specifically identifies individuals at risk for institutional placement, persons with self-care limitations, and older individuals with Alzheimer’s disease or related disorders in a variety of ways. Staff make supportive services available to housing programs where older adults reside. Staff work with the local hospitals and nursing homes around issues of discharge planning and service plans. Senior Center staff are alert to the changing needs of participants and make referrals the care management program when needed.

To determine the number and proportion of LEP persons residing within the agency’s service area, 2009-2013 American Community Survey Data representing languages spoken at home for persons over five years of age was combined and analyzed at the aggregate county level. This analysis resulted in the following service area profile. In this profile, “LEP” was defined as persons who speak English “less than very well” according to the American Community Survey. LEP can also be defined as a person who has a limited ability to speak, read, or write the English language.

The total number of persons over five years of age in the Blue Rivers AAA service area is 69,693. Of the total population over five years of age, 66,869 persons, or, approximately 96% of the population, speak English only.

County	Total population age 5 years and over	# English Only	% English	Other languages
Thayer	4,911	4,813	98.0%	Spanish, other Indo-European
Jefferson	7,162	6,926	96.7%	Spanish, other Indo-European
Gage	20,696	19,930	96.3%	Spanish, other Indo-European
Nemaha	6,780	6,590	97.2%	Spanish, other Indo-European
Otoe	14,706	13,985	95.1%	Spanish, other Indo-European
Pawnee	2,622	2,380	90.8%	Other Indo-European, Spanish
Johnson	4,920	4,467	90.8%	Spanish, Asian/Pacific Island
Richardson	7,896	7,778	98.5%	Spanish, other Indo-European
Total	69,693	66,869	96%	

On an as-needed basis, Blue Rivers AAA personnel will use LanguageLine Solutions as a competent interpreter to enable communication between agency staff and persons of limited English proficiency. LanguageLine is an over-the-phone professional interpreting service that can provide assistance in over 200 spoken languages. This service will enable Blue Rivers AAA personnel to communicate effectively with LEP persons who contact the agency either in-person or over the phone. The personnel member must simply dial a toll-free number and (if not already identified) prompt the LEP speaker to identify their spoken language. The corresponding LanguageLine interpreter can then relay verbal messages between the staff person and LEP individual. Additional information on LanguageLine can be found by visiting the company website at <http://www.languageline.com/>.

Over the next decade, persons who are becoming 60 will have greater knowledge of technology and so, Blue Rivers AAA has incorporated computers and internet service into the senior centers and public transportation offices in order to provide access to clients and participants in our rural service area. This age group of clients and family members may be more adept at searching for and locating needed service and providers. Blue Rivers AAA has increased its presence on the internet and other social media. Staff have all been provided with agency email addresses and access to computers and internet in the centers and offices. Additionally, an employee only Facebook group has been established to share information. Nutrition staff share menus, recipes, and best practices. Closings and weather issues are made available in a more immediate capacity than was previously available.

Programs to prevent elder abuse begin with education. Blue Rivers AAA works with the Elder Rights Coalition and Legal Aid of Nebraska to address this area of need. Mental health screenings and referrals to local providers is incorporated into the care management program and the senior centers. Blue Rivers AAA provides clients with lists of community agencies when appropriate.

Blue Rivers AAA has begun work to utilize the United States Department of Justice curriculum to educate staff, consumers and the public on recognizing and responding to elder abuse, neglect, and exploitation. Staff works with the local Adult Protective Services staff to establish a local elder abuse coordinating council. Staff will provide training and technical assistance to the community regarding recognizing abuse of vulnerable adults and mandatory reporting of abuse,

neglect, and exploitation.

Blue Rivers AAA will examine and assess for use a variety of innovative and promising practices that may enhance the quality and effectiveness of the nutrition program. Examples include service products that appeal to caregivers (such as web-based ordering systems and carryout meals), increased involvement of volunteers (such as retired chefs), consideration of eating habits and choice (such as variable meal times, salad bars, or more fresh fruits and vegetables), new service models (testing variations and hybrid strategies) and other innovations to better serve the younger set of older adults whose needs and preferences may be different from those of the older set.

Service utilization data is reviewed monthly by the management. This information informs Blue Rivers about the service locations that are being used and those that may need a change in programming. The Senior Management Team meets every two weeks to review programs and systems. A monthly team meeting of administrative, care management, service coordinators, ADRC and transportation staff is held at the Beatrice office. An annual all-staff meeting is held each summer.

The eight counties served by Blue Rivers Area Agency on Aging does not include a large population of Native Americans. There are no Indian Health Services in this area. Services to any Native American aged 60 and older are available.

Blue Rivers Area Agency on Aging will continue to make every effort possible to provide the older individuals of PSA-H with quality programs and services that meet their expressed needs/concerns. Blue Rivers AAA will encourage and support programs and services to assist older adults to remain independent and reside in their home. The ability to provide such services or programs is linked, of course, to the amount of funding received. Expansion plans are linked to additional funding or rearranging priorities.

Blue Rivers AAA requests that applicants provide a description of how they intend to provide outreach and meet the service needs of low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in the area served by the provider.

During the Nebraska 2018 legislative session, a bill was proposed to make permanent the Aging and Disability Resource Center (ADRC) demonstration project. While funding was held to the demonstration project level and did not allow for expansion into more services, Blue Rivers AAA continues to operate one of seven ADRC locations statewide and is working with other partner AAAs and disability organization partners to grow the ADRC. Additionally, the ADRC leadership team is working with the State Unit on Aging to increase funding by developing the system to make the program financially sustainable through federal matching funds and other funding streams.

Blue Rivers AAA currently offers three evidence-based programs to participants of our service area: Powerful Tools for Caregivers; Stepping On: Building Confidence, Reducing Falls; and Tai Chi, Moving for Better Balance. Two Blue Rivers AAA staff have been trained in two evidence-based, falls-prevention programs: Tai Chi: Moving for Better Balance and Stepping On: Building Confidence, Reducing Falls. These programs will be offered throughout our eight-county service area. Training was provided through the Nebraska Department of Health and Human Services and funding for the training for Blue Rivers AAA staff was provided by Public Health Solutions. Funding limitations prevent an expansion of services as the agency has a total of two trained instructors for each program and all three programs are served by a total of three individuals, two staff and one community volunteer. Each program requires two instructors at each training which limits the amount of time these three individuals can provide in addition to the ever-increasing bureaucratic demands placed upon staff in their positions at the agency.

Because falls can result in significant loss of independence and often trigger the onset of a series of growing needs, Blue Rivers chose the Stepping On and Tai Chi class to provide an intervention for participants to improve balance. Even without a major injury, falls can cause an older adult to become fearful or depressed, making it difficult for them to stay active, which in turn increases the need for assistance. Blue Rivers plans to continue to offer these classes and encourage continued practice by the participants.

The U.S. Department of Health and Human Services says that 70 percent of people over the age of 65 will need some type of care before the end of their life. And the Family Caregiver Alliance says about 45 million Americans are already providing that care for an aging family member. But, there are a number of factors including financial constraints, work and family demands, and the many challenges of providing care place great pressure on family caregivers. Caregiving responsibilities demand time and money from families who too often are already strapped for both. Better support for informal caregivers is critical because often it is their availability - whether they are informal family caregivers, paraprofessionals, or unrelated friends and neighbors who volunteer their time - that determines whether an older person can remain in his or her home.

Powerful Tools for Caregiving, another evidence-based program, began in 2016. Two people trained to provide the six week class for caregivers to develop an array of self-care tools to reduce personal stress, change negative self-talk, communicate their needs to family members and healthcare or service providers, and make tough caregiving decisions.

The objective is to continue to offer these courses and increase the number of participants in the evidence-based programs over the next four years as funding and time commitments allow. Blue Rivers AAA recognizes that over the next span of years, the aging population will increase.

As the population is aging and the lifespan extends, there is a higher incidence of chronic diseases such as obesity, arthritis, diabetes, osteoporosis, and depression, as well as the greater probability of injury from a fall, which quickly limits physical activity. Many of the services used today such as transportation, social support/connections, and nutrition/home-delivered meals to support a person who chooses to remain in their home will continue to be needed. Although still needed, these services may need to be provided in different ways.

The Governing Board and Executive Director recognize that while the participants and consumers are aging, so is the staff of Blue Rivers AAA. Blue Rivers AAA encourages current staff in their professional development and strives to retain staff; however, there is also a need to create a plan for the future of the workforce. The current workforce has a range of years of service as the table indicates.

Under 5 years	6 to 10 years	11 to 15 years	16 to 20 years	21 plus years
42	27	21	8	11

Blue Rivers AAA values the staff's expertise and knowledge of the aging network. Over the next few years, Blue Rivers AAA will work to capture the many accomplishments of the programs and will discuss the process of succession plans for the future. It is important for each program and service location to retain staff.

Recognizing the important role that community infrastructure plays in supporting the quality of life of people as they age, more than 70 percent of AAAs have taken steps to develop Livable Communities for all ages; they meet with other public entities to address housing, transportation, land use, workforce development and other key development issues, as well as leading or participating in planning efforts at the community level. (National Association of Area Agencies on Aging, 2014). Blue Rivers AAA will explore methods to work within communities to make them more attractive to older persons. Obtaining information from older adults themselves will help lawmakers understand and set policy.

The caregiver support program and other services for family caregivers may also evolve into other services. According to the 2014 National Survey of Older Americans Act Participants, seventy-seven percent of the caregivers served by OAA programs report that these services allow them to provide care longer than they otherwise could (<http://www.agid.acl.gov/>). The demands of caregiving can lead to a breakdown of the caregiver's health, and the illness, hospitalization, or death of a caregiver increases the risk for institutionalization of the care recipient. As caregivers age, Blue Rivers AAA will explore ways to best serve their needs.

Blue Rivers AAA supports the philosophy of consumer control and choice. Reviewing the literature provides ideas for opportunities to shift the services as the consumer needs evolve. The United States of Aging Survey is an annual survey conducted by the National Association of Area Agencies on Aging, National Council on Aging, UnitedHealthcare and USA TODAY. For the 2014 survey, Penn Schoen Berland completed 3,279 telephone interviews from April 3, 2014, to May 6, 2014, including nationally representative samples of Americans 60 and older and adults 18-59. The survey provides insight into people's values and beliefs and will help guide planning efforts.

Survey results that highlight what motivates older adults will be helpful to consider as planning continues. For example, survey respondents said that the reasons for having a job are that they would like to stay productive and active, enjoy it, and need the income. The enjoyment was further defined to be having a purpose, being challenged, and interacting with people. Knowing this, Blue Rivers AAA will work to maintain an array of services to meet multiple needs.

One of the more important needs is maintaining services so older adults can stay in their homes. The survey indicated that most people age 60 and older want to live in their home

and find it meets their needs and they want to live independently. Half of the respondents indicated that they would like to live alone and the majority expect to do so for the rest of their life.

As Covid-19 emerged as a world-wide Pandemic, Blue Rivers AAA re-grouped on service provision to our eight counties. Collaboration with the seven other Nebraska AAA's was a priority in determining the best practices. Local Health Departments were the lifeblood of guidance as the Agency sought to keep staff and clients safe. Services changed from the face to face, to phone calls, home delivered meals, to-go meals, grocery delivery, mail delivery, and weekend meals. Meal delivery remained a top priority. Consumables to combat social isolation were delivered with the meals. Lessons were learned on how to continue to provide services in a time of chaos and documented in the form of new policies and procedures. Zoom meetings with staff, colleagues and SUA became the norm. Care Managers and Service Coordinators worked from home with their client workload. Zoom presentations of Evidence Based programs will become the normal.

A survey conducted by a partner, UNO Gerontology, determined that statewide 41% of the respondents do not have access to internet or smartphone. These respondents will become a focus as broadband services expand into our most rural areas. Utilization of AARP Volunteer Advisory Board member will assist in this matter as legislation is written and passed. Surveys of this type are definitely important to determine our main areas of focus for services, isolation issues, food availability and transit needs.

2. Homemaker

Definition: Performance of light housekeeping tasks provided in a person’s home and possibly other community settings. Task may include preparing meals, shopping for personal items, managing money, or using the telephone, in addition to light housework.		
Service Unit: Hour	Setting: One-on-One	Registered Service
Eligibility: Individual must be 60 years of age or older		
Client Details:		
<input checked="" type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/>	Client may be Anonymous
<input checked="" type="checkbox"/> Collect IADLs	<input checked="" type="checkbox"/>	Client may Self-Direct this Service
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/>	Client may use Voucher
Other Reporting Requirements: N/A		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What’s different about the service?

Blue Rivers AAA service area staff coordinate homemaker services at the following locations: Auburn Public Transportation Office, Beatrice Administrative Office, and Falls City Senior Center. The Homemaker/Chore Coordinator identifies persons who are interested in being an independent contractor to provide homemaker services and collects basic information from them. The agency completes a background check before hire. When a participant is interested in homemaker services, the Homemaker/Chore Coordinator completes a demographic form containing the required information that is entered into PeerPlace. The participant receives information about contributing to the cost of the services by making a suggested contribution, based on a 60% fee scale of cost. Each independent contractor receives a work order and then delivers the service. The participant signs the work order to verify the work was completed. At the end of each month, the Homemaker/Chore Coordinators complete the payment request forms that list the work order numbers, hours worked and rate of reimbursement for each independent contractor and submits the forms to Blue Rivers Administrative offices for processing. Each participant receives a monthly summary of the work completed in a letter containing information on a suggested contribution and a stamped, addressed return envelope.

Requests for this service continue high. MAC Funding provides additional services in this program.

3. Chore

Definition: Performance of heavy household tasks provided in a person’s home and possibly other community settings. Tasks may include yard work or snow removal, in addition to heavy housework.			
Service Unit: Hour		Setting: One-on-One	
Registered Service			
Eligibility: Individual must be 60 years of age or older			
Client Details:			
<input checked="" type="checkbox"/>	Collect ADLs	<input checked="" type="checkbox"/>	Client may be Anonymous
<input checked="" type="checkbox"/>	Collect IADLs	<input checked="" type="checkbox"/>	Client may Self-Direct this Service
<input type="checkbox"/>	Collect NRA Score	<input type="checkbox"/>	Client may use Voucher
Other Reporting Requirements: N/A			
Possible Funding Sources:			
<input type="checkbox"/>	III-A (NSIP Raw Food)	<input type="checkbox"/>	III-D (Health Pro)
<input checked="" type="checkbox"/>	III-B (Supportive Service)	<input type="checkbox"/>	III-E (Caregiver)
<input type="checkbox"/>	III-C1 (Congregate Meal)	<input checked="" type="checkbox"/>	CASA (State Aging)
<input type="checkbox"/>	III-C2 (Home Delivered Meal)	<input type="checkbox"/>	Care Management (State)
		<input checked="" type="checkbox"/>	ADRC (State)
		<input checked="" type="checkbox"/>	Local
		<input checked="" type="checkbox"/>	Other
		<input checked="" type="checkbox"/>	May be MAC Eligible
Provider Requirements:		A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What’s different about the service?

Blue Rivers AAA service area staff coordinate Chore services at the following locations: Auburn Public Transportation Office, Beatrice Administrative Office, and Falls City Senior Center.

The Homemaker/Chore Coordinator identifies persons who are interested in being an independent contractor to provide Chore services, collecting basic information from them. The agency completes a background check before hire. When a participant is interested in Chore services, the Homemaker/Chore Coordinator completes a demographic form containing the required information which is entered into PeerPlace. The participant receives information about contributing to the cost of the services based upon a sliding suggested contribution scale of 60% of cost. Each independent contract receives a work order and then delivers the service. The participant signs the work order to verify the work was completed. At the end of each month, the Homemaker/Chore Coordinators complete the payment request forms that list the work order numbers, hours worked and rate of reimbursement for each independent contractor and submits the forms to Blue Rivers Administrative offices for processing. Each participant receives a monthly summary of the work completed in a letter containing information on a suggested contribution based and a stamped, addressed return envelope.

Blue Rivers has increased funding to allow for lawn mowing, snow removal, small safety repairs such as grab bars, hand rails, window sealant, ramp repair etc.

Definition: A meal provided to an OAA qualified individual in his/her place of residence. The meal is served in a program administered by SUAs and/or AAAs and meets all the requirements of the Older Americans Act and all applicable laws. Meals provided to an individual through means-tested programs may be included. Caregivers (Older Relative or Family) can receive III-E funded Home Delivered Meals. If III-E is used to fund the meal, the meal should be counted under Caregiver Supplemental Services.																	
Service Unit: Meal	Setting: One-on-One	Registered Service															
Eligibility: <ul style="list-style-type: none"> • Individual must be 60 years old or older & unable to attend a Congregate Meal, OR • Spouse of an Eligible Individual (60 years of or older that is unable to attend a Congregate Meal), OR • Dependent Individual with Disability that lives with an Individual an Eligible Individual (60 years of age or older that is unable to attend a Congregate Meal) Note: Each AAA determines how “unable to attend a Congregate Meal” is defined. This can include, but is not limited to: being homebound or having 2+ ADLs. Each AAA should have a policy to determine eligibility.																	
Client Details: <table border="0"> <tr> <td><input checked="" type="checkbox"/> Collect ADLs</td> <td><input type="checkbox"/> Client may be Anonymous</td> </tr> <tr> <td><input checked="" type="checkbox"/> Collect IADLs</td> <td><input type="checkbox"/> Client may Self-Direct this Service</td> </tr> <tr> <td><input checked="" type="checkbox"/> Collect NRA Score</td> <td><input checked="" type="checkbox"/> Client may use Voucher</td> </tr> </table>			<input checked="" type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	<input checked="" type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	<input checked="" type="checkbox"/> Collect NRA Score	<input checked="" type="checkbox"/> Client may use Voucher									
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<input checked="" type="checkbox"/> Collect NRA Score	<input checked="" type="checkbox"/> Client may use Voucher																
Other Reporting Requirements: Meals that are funded with other funding sources (Med-waiver or Title XX) must be marked.																	
Possible Funding Sources: <table border="0"> <tr> <td><input checked="" type="checkbox"/> III-A (NSIP Raw Food)</td> <td><input type="checkbox"/> III-D (Health Pro)</td> <td><input type="checkbox"/> ADRC (State)</td> </tr> <tr> <td><input type="checkbox"/> III-B (Supportive Service)</td> <td><input type="checkbox"/> III-E (Caregiver)</td> <td><input checked="" type="checkbox"/> Local</td> </tr> <tr> <td><input type="checkbox"/> III-C1 (Congregate Meal)</td> <td><input checked="" type="checkbox"/> CASA (State Aging)</td> <td><input checked="" type="checkbox"/> Other</td> </tr> <tr> <td><input checked="" type="checkbox"/> III-C2 (Home Delivered Meal)</td> <td><input type="checkbox"/> Care Management (State)</td> <td></td> </tr> <tr> <td></td> <td colspan="2"><input type="checkbox"/> May be MAC Eligible</td> </tr> </table>			<input checked="" type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)	<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local	<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other	<input checked="" type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)			<input type="checkbox"/> May be MAC Eligible	
<input checked="" type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)															
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<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other															
<input checked="" type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)																
	<input type="checkbox"/> May be MAC Eligible																
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.																

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What’s different about the service?

Persons who are interested in receiving home delivered meals may request them by calling the local Senior Center or the Blue Rivers Administrative Office. Referrals are also received from care management staff, family members and health care facilities. Eligibility to receive home delivered meals is determined by the site manager using Blue Rivers AAA’s “Home Delivered Meal Eligibility Form.” Caregivers may also be eligible to receive home delivered meals by following Blue Rivers AAA’s policy “Qualifying Caregivers for Home Delivered Meals”. Meals for caregivers are provided with Title III-C(2) funds for spouses or Title III-E funds for caregivers who are not spouses.

Eligible individuals receiving home delivered meals must complete a demographic intake form. Participants are given the opportunity to make a contribution toward the cost of the meal. A monthly letter summarizing the number meals delivered, the actual cost of the meals and a suggested contribution for those meals is sent to each participant. The letter clearly states the participant is not being billed for

the service, that there is no request for payment, and that meals will be provided to eligible participants regardless of ability or willingness to contribute. A stamped, self-addressed envelope is provided with the letter.

The site managers recruit and train volunteers to deliver meals to the homes of eligible individuals. The menu is the same for both home delivered and congregate meals. Home delivered meals are prepared according to a pre-set menu pattern developed by a registered dietician following the DRI guidelines. The meals are packaged in disposable foam containers with hot and cold foods separated to maintain safe food temperatures. Blue Rivers AAA staff and trained volunteers pick up pre-plated containers in thermal carriers and deliver to eligible individuals in the communities.

DIRECT SITES:

Gage County – Beatrice prepares meals for Beatrice, Plymouth and Cortland. Senior center staff and volunteers deliver the meals to eligible individuals. Fairbury Senior Center delivers food in bulk to the Wymore Senior Center and meals to eligible individuals in Odell.

Jefferson County – Fairbury Senior Center staff prepares meals for Fairbury, Diller, Odell and Wymore; staff and volunteers deliver meals to individuals in Fairbury and Diller.

Johnson County – Sterling Senior Center staff and volunteers deliver meals to eligible individuals in Sterling (the meals are prepared by Syracuse Senior Center staff and transported in bulk to Sterling by Blue Rivers AAA staff).

Otoe County – Syracuse Senior Center staff prepares meals for Cook, Douglas, Palmyra, Sterling, Unadilla and Syracuse. Blue Rivers AAA staff and volunteers deliver meals to eligible individuals in Syracuse and Cook. Syracuse Senior Center prepares and transports food in bulk to Douglas, Palmyra, and Sterling Senior Centers where the meals are packaged and delivered to eligible individuals by Blue Rivers AAA staff and volunteers. Unadilla volunteers travel to Syracuse to pick up meals to take back for delivery. The Sterling Senior Center is located in Johnson County.

Nebraska City Senior Center staff prepares meals. Blue Rivers AAA staff and volunteers deliver meals to eligible individuals.

Pawnee County – Table Rock Senior Center staff prepares meals and Blue Rivers AAA staff and volunteers deliver meals to eligible individuals in Table Rock, Humboldt and Pawnee City.

Richardson County – Falls City Senior Center staff prepares meals and Blue Rivers AAA staff and volunteers deliver meals to eligible individuals in Falls City.

Thayer County – The Davenport Senior Center staff prepares meals for Chester, Davenport, Deshler and Hebron. Blue Rivers AAA staff and volunteers deliver meals to eligible individuals in Davenport. The Blue Rivers AAA staff transports the food in bulk to Deshler and Hebron and Senior Centers where the meals are then packaged and delivered to eligible individuals by Blue Rivers staff and volunteers. Blue Rivers AAA staff delivers meals to eligible individuals in Chester.

CONTRACT SITES:

Johnson County – Southeast Nebraska Community Action (SENCA) delivers meals to eligible individuals in Tecumseh. Blue Rivers AAA provides Older Americans Act and NSIP funds.

Nemaha County – Auburn Senior Center delivers home delivered meals to eligible individuals in Auburn. Blue Rivers AAA provides Older Americans Act and NSIP funds.

Services for contract center sites are provided in the same manner as they are in the direct sites, as explained above.

While the current trend is a decrease in requests for Home Delivered Meals, we are currently experiencing a 65% increase in Home Delivered Meals due to COVID-19. As our centers slowly re-open throughout May and April 2021, we anticipate this service to decline to a 30-35% increase, due to fear of return to centers by some clients.

Definition: A meal provided by a qualified nutrition project provider to a qualified individual in a congregate or group setting. The meal is served in a program that is administered by SUAs and/or AAAs and meets all the requirements of the Older Americans Act and State/Local laws. Meals provided to individual through means-tested programs may be included.		
Service Unit: Meal	Setting: Group Setting	Registered Service
Eligibility:		
<ul style="list-style-type: none"> • Individual must be 60 years old or older, OR • Spouse accompanying Individual 60 years of age or older, OR • Volunteer serving the meal, OR • Individual with a Disability, living with a parent 60 years of age or older & accompanying the parent, OR • If the meal is served at senior housing, Individual with a Disability, living in senior housing 		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input checked="" type="checkbox"/> Collect NRA Score	<input checked="" type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: Meals that are funded with other funding sources (Med-waiver or Title XX) must be marked.		
Possible Funding Sources:		
<input checked="" type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input checked="" type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Meals are prepared at the Senior Centers in the following communities: Auburn, Beatrice, Davenport, Fairbury, Falls City, Nebraska City, Pawnee City, Syracuse, Tecumseh, and Table Rock. Congregate meals are served at the direct and contract sites listed below.

Meals are prepared and served Monday through Friday, except for holidays. New participants are asked to complete a demographic intake form and the information is entered into PeerPlace. The nutrition risk assessment is part of the demographic intake form. Participants are asked to reserve their meal one day in advance by communicating with the site. Walk-in participants may be served a meal if an extra meal is available, i.e., if a cancellation has occurred. Meals are prepared on the number of reservations per site. A suggested contribution for the meal for eligible participants age 60 and older is posted at each site. A fee for persons under age 60 or for carryout meals is collected. Upon entering the site, eligible participants are able to provide an anonymous suggested contribution. The suggested contribution box is a locked box kept in a location that maintains privacy

for those making such contributions. Individuals younger than age 60 pay the full cost of the meal to the site manager. Non-eligible Health & Human Services means tested program such as Title XX and Aged and Disabled Waiver and are not eligible to receive Nutritional Services Incentive Program reimbursement.

The site manager monitors the daily meals using a grid to account for all meals served. Participants sign in for meals. Typically, site managers welcome participants to the centers and open meal service with announcements and/or games. Site manager coordinate meal service in a variety of ways by directing participants to the serving line in an orderly manner; by indicating which table is being served first, second and so on; or by volunteers serving tables to maximize efficiency and provide assistance to participants. Plates and serving trays are returned to the kitchen after meals are consumed. Following the meal, participants may enjoy activities such as games, crafts, cards or puzzles. Some sites also have activities and programs before meal service.

The same menu is served for both congregate and home delivered meals. Some centers (Beatrice, Fairbury, Falls City, Hebron, Sterling, Syracuse, Tecumseh, Wymore) offer transportation to the congregate meals. A reduced fee is charged to ride the bus to and from the center. Transportation is funded through the Nebraska Department of Roads.

Upon re-opening in May, June and July, guidelines will be followed of limited participants in the facilities, physical distancing observed, masks and sanitizing. A protocol guidance has been developed and will be in place at all centers.

DIRECT SITES:

Gage County – Beatrice Senior Center, Cortland Senior Center (meals are prepared at the Beatrice Senior Center) Plymouth (meals are prepared at the Beatrice Senior Center) and Wymore Senior Center (meals are prepared at the Fairbury Senior Center).

Jefferson County – Fairbury Senior Center

Johnson County – Sterling Senior Center (meals are prepared at the Syracuse Senior Center)

Otoe County – Douglas Senior Center, Palmyra Senior Center, Syracuse Senior Center, Nebraska City Senior Center

Staff at the Syracuse Senior Center prepare meals for Douglas, Palmyra, Sterling, Unadilla and Syracuse.

Pawnee County – Table Rock Senior Center

Richardson County – Falls City Senior Center

Thayer County – Davenport Senior Center, Deshler Senior Center, Hebron Senior Center

Staff at the Davenport Senior Center prepare meals for Davenport, Deshler and Hebron.

CONTRACT SITES:

Johnson County – Southeast Nebraska Community Action Center (SENCA) in Tecumseh
Blue Rivers AAA contracts with Southeast Nebraska Community Action Center (SENCA) to provide congregate meals in Tecumseh. Blue Rivers AAA provides Older Americans Act funds and NSIP funds.

Nemaha County – Auburn Senior Center in Auburn

The Auburn Senior Center serving Nemaha County is located in a city-owned building and provides congregate meals. Blue Rivers AAA provides Older Americans Act funds and NSIP funds. Blue Rivers AAA offers transportation at a reduced cost to participants who want to go to and from the Auburn

Senior Center for congregate meals. The Public Transportation Service is funded through the Nebraska Department of Roads.

Richardson County – Eastview Congregate Housing in Falls City

Blue Rivers AAA contracts with Eastview Congregate Housing. Eastview Apartments prepares and serves congregate meals primarily to people living within the Eastview Apartments building. Eastview serves two meals a day, seven days a week. Eastview submits menus to the Blue Rivers AAA contracted registered dietician. Blue Rivers AAA provides NSIP funds.

During FY2021, all Direct sites were closed due to Covid-19. Anticipated re-opening May-June with a 50% return of clients at the beginning, with a slight return as more vaccinations occur. A slight decrease in meals served is a current trend. The decrease is approximately 2% per year.

Definition: A targeted program to promote better health by providing accurate and culturally sensitive nutrition, physical fitness, or health (as it relates to nutrition) information that is consistent with the current Dietary Guidelines for Americans and instruction to participants, caregivers, or participants and caregivers, overseen by a dietitian or individual of comparable expertise.		
Service Unit: Session	Setting: One-on-One or Group Setting	Non-Registered Service
Eligibility: Individual must be 60 years old or older		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements:		
<ul style="list-style-type: none"> • Program Topic (i.e. Heart Healthy or Drink Enough Water) • Estimated Audience Size 		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input checked="" type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input checked="" type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input type="checkbox"/> May be MAC Eligible		
Provider Requirements:	A background check is suggested. The provider must be a Registered Dietitian or have comparable experience. "Comparable experience" is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Programs developed by a Registered Dietician are provided to participants at congregate sites and via printed materials to home delivered meal participants on nutrition related topics in the Blue Rivers AAA service area. The topics will include, but are not limited to, fats, cholesterol, food labels, food allergies, salt, vitamins and supplements. Each session includes a question and answer segment. Sessions are held at senior centers in all eight counties of the Blue Rivers AAA service area.

Anticipate quarterly programs at all direct sites as centers re-open.

12. Information and Assistance

Definition:		
Also known as Basic Information . A service that:		
<ul style="list-style-type: none"> • provides the individuals with current information on opportunities and services available to the individuals within their communities, including information relating to assistive technology; • assesses the problems and capacities of the individuals; • links the individuals to the opportunities and services that are available; and • to the maximum extent practicable, ensures that the individuals receive the services needed by the individuals, and are aware of the opportunities available to the individuals, by establishing adequate follow-up procedures. 		
Service Unit: Contact	Setting: One-on-One	Non-Registered Service
Eligibility: N/A		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: N/A		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> May be MAC Eligible		
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Information and assistance is available in all counties of the Blue Rivers AAA service area. This component provides individuals age 60 and older with information on services and other opportunities within their community and other locations. When contact is made, the individual's problem/concern is assessed and then the individual is directed to the available resource, service or entity that can provide assistance. This service includes follow-up to see if the individual received the information and assistance they needed.

Increase in projection by 10 contacts, as services are regenerated. Mac Funds will be utilized to sustain program.

Definition: Activities related to the prevention and mitigation of the effects of chronic disease (including osteoporosis, hypertension, obesity, diabetes, and cardiovascular disease), alcohol and substance abuse reduction, smoking cessation, weight loss and control, stress management, falls prevention, physical activity, and improved nutrition). Activities must meet ACL/AoA definition for an evidence-based program, as presented on ACL's website.		
Service Unit: N/A	Setting: One-on-One or Group Setting	Sign-In Service
Eligibility: Individual must be 60 years old or older		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements:		
<ul style="list-style-type: none"> • Name • Birth Year • ZIP Code 		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input checked="" type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input type="checkbox"/> May be MAC Eligible		
Provider Requirements: Trained and/or certified to meet program requirements.		

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Blue Rivers AAA has offered the evidence-based program Powerful Tools for Caregivers during the past and may offer it again as needs are identified. Leaders are one community volunteer and one staff person.

Blue Rivers AAA continues to focus on falls prevention as an immediate need in our service area that has the potential to have a lasting impact on the people we serve. Two staff have been trained through collaboration with Public Health Solutions Public Health Department and the Department of Health and Human Services to provide Stepping On: Building Confidence and Reducing Falls as well as Tai Chi: Moving for Better Balance, and Stress Busters. The current goal is to provide 2 programs per year.

These programs are recorded in Peer Place as Health Promotion/Disease Prevention (Evidence Based).

There is no change in this service.

Definition: Health promotion and disease prevention activities that do not meet ACL/AoA definition for an evidence-based program as defined at ACL's website. Activities may include those defined in the OAA (Section 102(14)). For example:		
<ul style="list-style-type: none"> - health risk assessments - health education - age-related diseases and chronic disabling conditions information - counseling regarding social services and follow-up health services - educational services for individuals and their primary caregivers - physical fitness, group exercise, and music therapy, art therapy, and dance-movement therapy - routine health screening - medication management - home injury control services - gerontological counseling 		
Service Unit: N/A	Setting: One-on-One or Group Setting	Sign-In Service
Eligibility: Individual must be 60 years old or older		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Collect NRA Score
<input type="checkbox"/> Client may be Anonymous		<input type="checkbox"/> Client may Self-Direct this Service
<input type="checkbox"/> Client may use Voucher		
Other Reporting Requirements:		
<ul style="list-style-type: none"> • Name • Birth Year • ZIP Code 		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-C1 (Congregate Meal)
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> III-E (Caregiver)
<input type="checkbox"/> ADRC (State)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> May be MAC Eligible	<input type="checkbox"/> Care Management (State)	<input checked="" type="checkbox"/> Other
Provider Requirements:	Providers must administer services within the scope of their own professional practice that they are deemed competent to perform. These practices must be permitted in terms of what their own professional licensure approves and allows.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Blue Rivers AAA will host educators and experts at the senior centers to provide various educational opportunities, as available. Samples of educational programs that have been presented, and continue to be timely, are nutritional standards and ideas for maintaining sound nutrition when cooking for 1 or 2, understanding how to prepare for a visit to the doctor such as making lists of questions and meds, signs and symptoms to watch for regarding seasonal illness issues, etc. Various Home Health agencies have also used the sites to offer wellness checks, i.e. blood pressure checks, foot care clinics, etc. All programs will, of course, be vetted and cleared with administration to assure safety for clients.

Definition: Legal advice and representation provided by an attorney to older individuals with economic or social need, and in the implementing regulation at 45 CFR Section 1321.71, and includes to the extent feasible, counseling or other appropriate assistance by a paralegal or law student under the direct supervision of an attorney.		
Service Unit: Hour	Setting: One-on-One	Restricted Service
Eligibility: Individual must be 60 years old or older		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: Legal Assistance Providers will also need to record:		
<ul style="list-style-type: none"> • III- B Restricted Demographics (new) • Number of Open Cases • Number of Closed Cases by: <ul style="list-style-type: none"> ○ Advice ○ Limited Representation ○ Representation 	Number of Cases about: <ul style="list-style-type: none"> • Abuse/Neglect • Age Discrimination • Health Care • Housing • Income • Defense of Guardianship/ Protective Services • Long-Term Care • Nutrition • Utilities • Other 	
This grey section will be implemented 10/1/2020		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input checked="" type="checkbox"/> Local
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Title IV
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> ADRC (State)	<input checked="" type="checkbox"/> Title VII
<input type="checkbox"/> May be MAC Eligible		
Provider Requirements:	<ul style="list-style-type: none"> • Attorney, OR • Law student under direct supervision of an attorney, OR • Paralegal under direct supervision of an attorney 	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Blue Rivers AAA contracts with the Legal Aid of Nebraska as well as Bentjen Law to provide representation to individuals in the Blue Rivers AAA service area. Individuals will call the Elder Access Line or Bentjen Law for legal assistance. Requests for assistance include income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, and neglect and age discrimination as well as other legal issues. A monthly report will be provided by Legal Aid of Nebraska and Bentjen Law for monitoring purposes. Information from these reports is entered into PeerPlace.

Current levels of assistance will be maintained, and hopefully increased, due to lessening Pandemic.

Definition: Assisting a client to identify and utilize services needed to assure that the client is receiving, when reasonably possible, the level of care that best matches his or her level of need. The Care Management Unit, through its Care Management Unit Supervisor and staff of care managers, assists clients with services as specified in the [Care Management] Act, including ongoing consultation, assessment, Long-Term Care Plan development, and referral for clients in need of long-term care; coordination of the Long-Term Care Plan; monitoring of the delivery of services for clients, and review of the client's Long-Term Care Plan.		
Service Unit: Hour	Setting: One-on-One	Registered Service
Eligibility: Individuals 60 years or older are eligible. Those under 60 may also be served, subject to service prioritization.		
Client Details:		
<input checked="" type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input checked="" type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input checked="" type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: See Care Management reporting requirements.		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input checked="" type="checkbox"/> Care Management (State)	
	<input checked="" type="checkbox"/> May be MAC Eligible	
Provider Requirements:	<p>The Care Management Unit Supervisor and care managers shall have the following minimum qualifications:</p> <ul style="list-style-type: none"> • A current Nebraska license as a registered nurse, or baccalaureate or graduate degree in the human services field, or certification under the Nebraska Social Work Law; and • At least two years of experience in long-term care, gerontology or community health. • In addition, a Care Management Unit Supervisor shall have at least two years of supervisory or management experience. 	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Care Managers assist persons age 60 and older and their families understand the functional limitations the person is facing and connect them to a variety of community support services. This process includes an assessment of the individual and the development of a plan of care. After a discussion of the assessment and the plan of care, the individual selects their priorities. Care Managers help arrange the support services requested. Care Managers contact the individuals at least quarterly to review their needs, adjusting the support services as needs change. Assessment is completed annually or as major changes occur. This is a demand-driven service and clients decide whether or not to continue Care Management, as they desire.

Estimate to maintain service at current level. During pandemic of FY2021, all contacts were made by phone, and new clients were signed up via mail. Expect to begin meeting clients face to face as vaccinations escalate.

Definition: The hours of multipurpose senior centers are open to older individuals.		
Sites that only offer meals (also known as Nutrition Sites) should not be included.		
Service Unit: Hour	Setting: Indirect Setting	Non-Registered Service
Eligibility: N/A		
Client Details: N/A		
<input type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: N/A		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input checked="" type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input checked="" type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
Provider Requirements: Must be multipurpose senior center.		

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

This is determined by the number of multipurpose senior centers multiplied by the number of hours of service each month for a 12-month period.

Projected units for SFY2020-2023 = 11,149 hours, but due to closures of all centers in 2020/2021, these units will be less by about 3,000 hours.

Definition:		
The provision of goods to an older individual at no cost or at a reduced cost which will directly support the health and independence of the individual with an assessed need.		
This can include: commodities, pantry items, clothing distribution, smoke detectors, eyeglasses, hearing aids, oral health, etc.		
This also includes Emergency Response Systems (ERS, Personal Emergency Response System, PERS). An Emergency Response System is an electronic device and has portable buttons (including pendants and bracelets) worn by the customer. These units provide 24-hour on call support to the customer having a medical or emergency need that could become critical at any time. ERS can be landline or cell phone based services.		
Previously counted in Durable Medical Equipment and Emergency Response System. This is no longer limited to medical equipment, adaptive devices, or assistive technology.		
Service Unit: Unit	Setting: One-on-One	Registered Service
Eligibility: Individual must be 60 years old or older		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input checked="" type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: N/A		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
Provider Requirements:	This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

<p>Emergency response systems continue to be a priority for many individuals age 60 and older. This safety net resource is essential for peace of mind and to protect those that are vulnerable and at risk of falls and other emergency situations. The requests for this service continue. Blue Rivers AAA estimates 30+ individuals will be served during each fiscal year with 24-hour electronic alarm systems to enable individuals to summon emergency help. Lifelines range in cost from \$20 to \$26 per month. Blue Rivers AAA pays the emergency response system company directly. Care managers refer clients to this program. Anticipates a doubled increase of identified PERS and have allowed additional funds for this service.</p> <p>Blue Rivers accepts donations of durable medical equipment (DME), incontinent products, dietary nutritional supplements, etc. The DME is loaned out to clients in need; the other items are distributed as needed. There is no cost to clients, but is measured as in-kind.</p>

**REQUIRED FORMATTING
PER SUA AREA PLAN INSTRUCTIONS
DETERMINES THIS PAGE DOES NOT CONTAIN CONTENT**

Definition: Provision of activities which foster the social well-being of individuals through social interaction and the satisfying use of leisure time. Activities, such as performing arts, games, and crafts, either as an observer or as a participant, facilitated by a provider.		
This service covers activities at the provider’s location (i.e. senior center) or should be organized/planned by the provider (senior center).		
Service Unit: Person Hour	Setting: Group Setting	Non-Registered Service
Eligibility: Individual must be 60 years of age or older		
Client Details: N/A		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: N/A		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
		<input type="checkbox"/> May be MAC Eligible
Provider Requirements:	This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What’s different about the service?

<p>Senior Center site managers plan and schedule activities during hours of operation that encourage participants to interact with others. Participants are encouraged to suggest activities of interest.</p> <p>Projected activities is 4,927 for SFY 2020-2023, and person hours of participation as of 4/30/2020 was 34,846. Due to centers being closed due to Covid-19, the before mentioned numbers remain the same at this time. Anticipated openings in May-June, with limited social activities at first will affect the projection of 2020-2023. Activities will begin after all centers have opened, and have been instructed on protocols, continue to follow protocols and no outbreaks of Covid have occurred. A cautious process of activities will take place.</p>

Definition: An interactive activity that conveys information about available services, aging, or the aging network. It includes in-person interactive presentations, booth/exhibit at a fair, conference, or other public event. This service includes Public Education and Presentations.		
When the topic is Medicaid related, it may be MAC Eligible. See the Medicaid Administrative Claiming (MAC) section.		
Previously the ACL defined this as a one-on-one intervention by the service provider. The ACL has removed Outreach as a federal service. The state has created a new service called Outreach.		
Service Unit: Activity	Setting: Group Setting	Non-Registered Service
Eligibility: Information about available services, aging, or the aging network.		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements:		
<ul style="list-style-type: none"> Estimated Audience Size 		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> May be MAC Eligible		
Provider Requirements:	This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

<p>Blue Rivers will participate in presentations, exhibits at various fairs or other public events. All services of the agency, as well as ways to access those services and others, will be presented to attendees. Contacts may be made to the general public or specifically targeted audiences, such as primary care physician clinics or other health providers who might be in a position to make referrals to the agency.</p> <p>Projected activities are 15 for SFY 2020-2023, however COVID-19 will be the determining factor for public events, as only one public event was attended-Big Give Gage in Beatrice in 2020. Plan to attend public events moving forward into 2022.</p>

Definition: A media activity that conveys information about available services, aging, or the aging network. It is a one way mode of communication. Examples include: Facebook posts, TV Ads/PSAs, radio ads/PSAs, website hits, brochures, newspaper ads, press releases.		
When counting brochures and other print media as Information Services, it should be counted when the cost is incurred (when the brochures are printed, when the newspaper ad is billed).		
When the topic is Medicaid related, it may be MAC Eligible. See the Medicaid Administrative Claiming (MAC) section.		
Previously Information Services IIIB and/or Public Information.		
Service Unit: Activity	Setting: Indirect Setting	Non-Registered Service
Eligibility: N/A		
Client Details: N/A		
<input type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements:		
<ul style="list-style-type: none"> • Topic (if the system allows) • Estimated Audience Size 		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
<input checked="" type="checkbox"/> May be MAC Eligible		
Provider Requirements:	This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Blue Rivers AAA delivers information to the public through various means, including the Blue Rivers Facebook page, Blue Rivers website, brochures, newspaper ads, press releases, radio ads and the monthly agency newsletter, *Table Talk*.

There is no expected change in units of service.

Definition: Outreach and awareness training for available legal services, advice and representation provided by an attorney to older individuals with economic or social need, and in the implementing regulation at 45 CFR Section 1321.71, and includes to the extent feasible, counseling or other appropriate assistance by a paralegal or law student under the direct supervision of an attorney.		
Service Unit: Hour	Setting: One-on-One	Restricted Service
Eligibility: Individual must be 60 years old or older		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: Legal Assistance Providers will also need to record:		
<ul style="list-style-type: none"> • III- B Restricted Demographics (new) • Number of Open Cases • Number of Closed Cases by: <ul style="list-style-type: none"> ○ Advice ○ Limited Representation ○ Representation 	Number of Cases about: <ul style="list-style-type: none"> • Abuse/Neglect • Age Discrimination • Health Care • Housing • Income • Defense of Guardianship/ Protective Services • Long-Term Care • Nutrition • Utilities • Other 	
This grey section will be implemented 10/1/2020		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input checked="" type="checkbox"/> Local
<input checked="" type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Title IV
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> ADRC (State)	<input checked="" type="checkbox"/> Title VII
<input type="checkbox"/> May be MAC Eligible		
Provider Requirements:	<ul style="list-style-type: none"> • Attorney, OR • Law student under direct supervision of an attorney, OR • Paralegal under direct supervision of an attorney 	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Blue Rivers AAA contracts with Bentjen Law to provide targeting and outreach to identify older individuals eligible for assistance in the Blue Rivers AAA service area with emphasis on individuals who are: rural, in greatest economic or social need, severely disabled, limited in English proficiency, suffering from Alzheimer’s disease or related disorders, at risk of institutionalization, at risk of homelessness or at risk of or under guardianship. The outreach will not only identify but will inform these older individuals, and their caregivers of the availability of legal assistance provided by the contract with Bentjen Law. A monthly report is to be provided by Bentjen Law for monitoring purposes. Information from these reports is entered into PeerPlace.

Definition: Service which offer temporary, substitute supports or living arrangements for care recipients in order to provide a brief period of relief or rest for caregivers.		
Service Unit: Hour	Setting: One-on-One or Group Setting	Registered Service
Eligibility: • Family Caregiver OR • Older Relative Caregiver		
Care Recipient	Caregiver (Client) Details:	
<input checked="" type="checkbox"/> Must have 2 ADLs or a cognitive deficit	<input checked="" type="checkbox"/> Collect Demographics	<input type="checkbox"/> May be Anonymous
	<input checked="" type="checkbox"/> Collect Eligibility	<input checked="" type="checkbox"/> May Self-Direct this Service
	<input checked="" type="checkbox"/> May do Caregiver Assessment	<input checked="" type="checkbox"/> May use Voucher
Other Reporting Requirements: Where Respite was Provided:		
<ul style="list-style-type: none"> • In-Home • Out-of-Home (day) • Out-of-Home (overnight) • Other Respite 		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input checked="" type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Caregivers are encouraged to use respite to supplement their own caregiving tasks. This has been proven to elevate caregiver mental and physical health, thereby allowing them to provide more appropriate care. Caregivers can have friends/neighbors provide that respite or can opt to have Blue Rivers AAA find a provider to do so. A pre-approved amount is offered to caregivers monthly and they can use as much of that amount as they choose.

CARES Act funding was awarded, increasing hours available to caregivers for much needed respite. These extra funds will be used until 9/30/2021 per legislation. Projected number of units are 4,000 for FY2020-2023. Care Act funds are spent for FY2021. MAC funds have been budgeted for additional hours for 2021.

33. Caregiver Supplemental Services

Definition: Goods and services provided to complement the care provided by caregivers.		
If a Family Caregiver and Older Individual receive a Home Delivered Meal, the Family Caregiver Home Delivered Meal should be counted under Caregiver Supplemental Services.		
ERS services for the Care Recipient should be recorded under this service. The Client is the Caregiver.		
Service Unit: Unit	Setting: One-on-One	Registered Service
Eligibility: • Family Caregiver OR • Older Relative Caregiver		
Care Recipient	Caregiver (Client) Details:	
<input checked="" type="checkbox"/> Must have 2 ADLs or a cognitive deficit	<input checked="" type="checkbox"/> Collect Demographics	<input type="checkbox"/> May be Anonymous
	<input checked="" type="checkbox"/> Collect Eligibility	<input type="checkbox"/> May Self-Direct this Service
	<input checked="" type="checkbox"/> May do Caregiver Assessment	<input type="checkbox"/> May use Voucher
Other Reporting Requirements: N/A		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input checked="" type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input type="checkbox"/> May be MAC Eligible	
Provider Requirements:	N/A	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Blue Rivers AAA offers a strategy to the caregivers by providing the care recipient with an emergency response system for times when the primary caregiver is absent from the home and a respite provider is not present. Having an emergency response system in the home provides the caregiver with reassurance that assistance, if needed, is just a click/call away. The care recipient must be unable to perform at least two activities of daily living without substantial assistance or have a cognitive or other mental impairment to qualify for this service. In certain instances of Care Receiver impaired cognition, an economical version of a "nanny-cam" may be considered so Caregiver can monitor for falls. NSIP meals also include home delivered meals provided as Supplemental Services under the National Family Caregiver Support Program to persons age 60 and older who are either care recipients (as well as their spouse of any age) or caregivers of any age.

88 projected units = 0% change.

**36. Caregiver Assistance:
Information & Assistance**

Definition:		
<ul style="list-style-type: none"> provides the individuals with current information on opportunities and services available to the individuals within their communities, including information relating to assistive technology; assesses the problems and capacities of the individuals; links the individuals to the opportunities and services that are available; and to the maximum extent practicable, ensures that the individuals receive the services needed by the individuals, and are aware of the opportunities available to the individuals, by establishing adequate follow-up procedures. 		
Service Unit: Contact	Setting: One-on-One	Non-Registered Service
Eligibility: • Family Caregiver OR • Older Relative Caregiver		
Care Recipient	Caregiver (Client) Details:	
<input type="checkbox"/> May collect demographics if OAA eligible.	<input type="checkbox"/> Collect Demographics <input checked="" type="checkbox"/> Collect Eligibility <input checked="" type="checkbox"/> May do Caregiver Assessment	<input checked="" type="checkbox"/> May be Anonymous <input type="checkbox"/> May Self-Direct this Service <input type="checkbox"/> May use Voucher
Other Reporting Requirements: N/A		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food) <input type="checkbox"/> III-B (Supportive Service) <input type="checkbox"/> III-C1 (Congregate Meal) <input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> III-D (Health Pro) <input checked="" type="checkbox"/> III-E (Caregiver) <input checked="" type="checkbox"/> CASA (State Aging) <input type="checkbox"/> Care Management (State)	<input type="checkbox"/> ADRC (State) <input checked="" type="checkbox"/> Local <input checked="" type="checkbox"/> Other
<input type="checkbox"/> May be MAC Eligible		
Provider Requirements:	This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Blue Rivers AAA Care Managers will discuss with caregivers information about community services, such as support groups, assistive technology, etc. and help make links to those the caregiver wants to explore. Care Managers will remain in contact with caregiver and care receiver as the caregiver wishes to ensure the individual receives needed services and to be an advocate for that caregiver.

This is a new taxonomy item so there are no previous service units for comparison. There are 400 projected contacts for SFY2020-2023. First six months actual units were 138, with 140 projected for next six months.

Definition: A state ADRC Program whose primary purpose is to maintain information about human service resources in the community and to link people who need assistance with appropriate service providers and/or to supply descriptive information about the agencies or organizations which offer services. The information and referral process involves establishing contact with the individual, assessing the individual's long and short-term needs, identifying resources to meet those needs, providing a referral to identified resources, and, where appropriate, following up to ensure that the individual's needs have been met.		
Service Unit: Contact	Setting: One-on-One	Non-Registered Service
Eligibility: (Must be at least one of the below) • 60 years or older • Individual with a Disability • Caregiver • Representative		
Client Details:		
<input type="checkbox"/> Collect ADLs	<input checked="" type="checkbox"/> Client may be Anonymous	
<input type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input type="checkbox"/> May Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: N/A		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input checked="" type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input checked="" type="checkbox"/> May be MAC Eligible	
Provider Requirements:	This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Contact is made with individual by phone, face to face, virtual or other form of communication, per individual's choice. Individual's long and short-term needs are identified and discussed with individual. Appropriate resources are identified, provided to individual to follow-up on or appropriate referral is made for the individual. Individual will be contacted for follow-up if they so choose.

Planning on increase of contacts due to increased advertising with MAC funds and needs evolving from pandemic crisis.

Definition: A state ADRC Program service that assists an eligible individual in need of long-term care and his or her representatives to make informed choices about the services and settings which best meet his or her long-term care needs and that uses uniform data and information collection and encourages the widest possible use of community-based options to allow an eligible individual to live as independently as possible in the setting of his or her choice.		
Service Unit: Hour	Setting: One-on-One	Registered Service
Eligibility: Need Long Term Care AND (Must be at least one of the below)		
• 60 years or older	• Individual with a Disability	• Representative
Client Details:		
<input checked="" type="checkbox"/> Collect ADLs	<input type="checkbox"/> Client may be Anonymous	
<input checked="" type="checkbox"/> Collect IADLs	<input type="checkbox"/> Client may Self-Direct this Service	
<input checked="" type="checkbox"/> May Collect NRA Score	<input type="checkbox"/> Client may use Voucher	
Other Reporting Requirements: See ADRC services demographic information.		
Possible Funding Sources:		
<input type="checkbox"/> III-A (NSIP Raw Food)	<input type="checkbox"/> III-D (Health Pro)	<input checked="" type="checkbox"/> ADRC (State)
<input type="checkbox"/> III-B (Supportive Service)	<input type="checkbox"/> III-E (Caregiver)	<input checked="" type="checkbox"/> Local
<input type="checkbox"/> III-C1 (Congregate Meal)	<input checked="" type="checkbox"/> CASA (State Aging)	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> III-C2 (Home Delivered Meal)	<input type="checkbox"/> Care Management (State)	
	<input checked="" type="checkbox"/> May be MAC Eligible	
Provider Requirements:	A background check is suggested. This is a private business matter and outside the scope of SUA/DHHS.	

Detailed description of how service is provided.

- Is it a subaward, contract, direct service?
- What counties are served this way?
- What is the same? What's different about the service?

Individuals in need of long-term care needs are provided with the greatest possible number of community-based options to allow the individual to live as independently as possible in the setting of choice. Support and advocacy during the process is provided to the individual by the ADRC staff and follow-up is provided if individual chooses. Two Care Managers are identified to pursue this service and have identified several individuals in 2022. This service determined to increase due to pandemic stresses.

Projecting increased need for this service and will fund with additional MAC funds.

REVISED LEGAL SERVICES CONTRACTOR CONTRACT

This contract by and between Blue Rivers Area Agency on Aging, located at 103 Eastside Blvd, Beatrice, NE 68310 (hereinafter referred to as "AAA", and Chuck Bentjen, DBA Bentjen Law located 1007 N 10th St, Beatrice, NE 68310 (hereinafter referred to as "Contractor"). This contract is for the fiscal year beginning on July 1, 2022, through June 30, 2023. This contract may be renewed from year to year by the written mutual agreement of the parties.

I. GENERAL TERMS

- a. Provision of Service:
 - i. Legal Assistance – provision of legal advice/counseling, brief service, and limited representation by an attorney within the specified priority areas noted below.
 - ii. Legal Education – provision of education on issues of concern to older individuals.
- b. Eligible individual/client: A person 60 years of age or older in greatest economic or social need and individuals with disabilities.
- c. Service area: Planning and Service Area counties.
- d. Contract amount: The maximum dollar amount payable under this contract is \$25,000, subject to actual expenses and availability.

The AAA and the Contractor therefore enter into the following:

II. SCOPE OF SERVICE

- a. This contract provides for a legal assistance program (and includes legal education services).
- b. Services will be delivered in the following designated counties: Thayer, Jefferson, Gage, Otoe, Johnson, Nemaha, Pawnee, and Richardson.
- c. The Contractor will give priority to legal assistance related to income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, and neglect and age discrimination. (As stated in the Older Americans Act).
- d. The Contractor will give priority for legal assistance services to those older individuals who are: rural, in greatest economic or social need, severely disabled, limited in English proficiency, suffering from Alzheimer's disease or related disorders, at risk of institutionalization, at risk of homelessness or at risk of or under guardianship. (Older Americans Act target groups).
- e. All legal services provided will be delivered in a manner which conforms to Legal Services Statewide Standards of the Nebraska Department of Health and Human Services, State Unit on Aging.

III. CONTRACTOR DUTIES

- a. Provide clients in greatest social and economic need legal assistance, legal advice, counseling, and representation, in the priority legal issue areas outlined in this contract.

- b. Provide targeting and outreach to identify older individuals eligible for assistance under this contract with special emphasis on individuals who are: rural, in greatest economic or social need, severely disabled, limited in English proficiency, suffering from Alzheimer's disease or related disorders, at risk of institutionalization, at risk of homelessness or at risk of or under guardianship. The outreach will not only identify but will inform these older individuals and their caregivers of the availability of legal assistance under this contract.
- c. Provide legal services in the following descending order of priority:
 - i. Protective Services, including but not limited to abuse, prevention, financial exploitation, defense of guardianship and conservatorship proceedings, durable powers of attorney, and nursing home rights.
 - ii. Public benefits, including but not limited to social security, veterans benefits, food stamps, Medicaid, including Spousal Impoverishment, supplemental security income, and Medicare.
 - iii. Housing and essential services, including but not limited to tenant rights, utilities, and public housing.
 - iv. Health care, including patient rights, health care powers of attorney, and living wills.
 - v. Debt collection when there is a meritorious defense, when a repayment agreement is possible, or when assets are subject to attachment or garnishment.
 - vi. Consumer fraud. vii. Spousal impoverishment.
 - viii. Dissolution of marriage, where income is affected.
 - ix. Simple Wills and Estate Planning
 - x. Provide in-home visits to homebound clients, including visits to long-term care facilities as needed.
 - xi. Provide each eligible individual with a voluntary opportunity to contribute to the cost of the service; protect the privacy of each eligible individual with respect to his/her contribution; establish appropriate procedures to safeguard and account for all contributions. Work with the AAA to use all contributions received to supplement, not supplant, the legal assistance services available during the period of this contract. Make each client aware that voluntary contributions are welcome and provide information that includes a suggested contribution and the actual cost of a unit of service.
- d. Provide at least one training per annum for AAA staff and Contractors related to identifying legal issues of the clientele served by the AAA.
- e. Means testing shall not be used for providing services under this contract. Services shall not be denied to older individuals who do not contribute to the cost of the service.

- f. Not subcontract any interest or obligation arising under this contract without written agreement of the AAA, although the Contractor may use his employees and contract employees to assist him in managing any cases and to assist with reporting.
- g. Demonstrate to the AAA the capacity to provide legal assistance in the principal language spoken by clients in areas where a significant number of clients do not speak English as their principal language.
- h. Coordinate services with AAA staff on programs including but not limited to Long Term Care Ombudsman, Senior Medicare Patrol, Caregiver, Nutrition and Medicaid Waiver in developing and utilizing a procedure for case acceptance and referrals. In all cases in which the Contractor works with other staff, he will maintain the client's confidentiality and only advise the AAA staff or other Contractor if a Release of Information is signed and on file.
- i. Submit programmatic and fiscal reports to the AAA as per an established schedule including the monthly, quarterly, and annual reports.
- j. Provide community education services to include, speaking engagements, preparation of bulletins and inclusion of articles in the Contractor and the AAA newsletters.
- k. Abide by the Code of Professional Responsibility adopted by the Supreme Court of Nebraska to regulate the practice of law.
- l. Develop and follow a protocol for referral of fee generating cases. Provide clients with a list of attorneys participating in the geographic area.
- m. Work with the AAA to develop a program policy on conflict of interest.
- n. Obtain and keep in force a commercial general liability insurance as well as a professional liability insurance policy with the following coverage/provisions as required by the Nebraska State Bar Association, and to provide a certificate of the insurance to the AAA.
- o. Attend at least one training annually relevant to the Title IIIB contract.
- p. Work with the AAA to develop and utilize a method of surveying client satisfaction without breaching client confidentiality.
- q. Work with the AAA to develop and utilize a plan for coordination of services with the Legal Services Corporation.

IV. AAA Duties

- a. Reimburse the Contractor for services provided under this contract.
- b. Provide the Contractor with forms for reporting units of service and expenditures of services provided under this contract.
- c. Ensure that the attorneys, paralegals and other non-lawyers involved in providing Title IIIB legal assistance under this contract can demonstrate their expertise in the priority issue areas necessary to provide effective administrative and judicial representation to older persons in social or economic need.

- d. Work with the Contractor to assure that all paralegals/legal assistants who provide client services are supervised directly by an attorney, and that all paralegals/legal assistants adhere to the Code of Ethics and Professional Responsibility of the National Association of Legal Assistants, Inc.
- e. Work with the Contractor to develop local program plans annually for reaching the target populations and addressing the priority issue areas.
- f. Provide to the Contractor copies of written monitoring reports, monitoring checklists and onsite assessment reports pursuant to services under this contract.
- g. The AAA shall not require the Contractor to reveal any information that is protected by attorney client privilege.
- h. AAA shall indemnify and hold harmless Contractor for claims arising by reason of any act or omission of the AAA under this contract.

V. PAYMENT

- a. The Contractor will submit monthly statements for services rendered, identifying the type of service provided, the units of service provided for that month, and the economic impact for the clients to services were provided measured by the community standard for the cost of legal services, which is currently \$250.00 per hour. The Contractor will discount the amount of the bill so that it does not exceed one-twelfth of the contract amount identified above.
- b. The AAA will promptly pay the Contractor one-twelfth of the contract amount if those service amounts are incurred by the attorney.

VI. TERMINATION OR SUSPENSION

- a. This contract is contingent upon the availability of funds. In the event funds for this service are not available to the AAA, the AAA may terminate the contract by written notice of 30 working days and no further services or payment for services shall be rendered.
- b. If either the Contractor or the AAA abandons, non-performs, or before completing, discontinues services; or if the commencement or timely completion of the service by either party is rendered improbably, infeasible, or illegal, the other party may, by written notice, immediately terminate or suspend any or all of this obligation under this contract until such time as the events or conditions resulting in such suspension has ceased or been corrected.
- c. Either party may terminate this contract by providing 30 days written notice of the termination to the other party.

IN WITNESS THEREOF, the AAA and Contractor, by and through their authorized officers, have duly executed this revised contract on May 2, 2022, 2022.

FOR THE AREA AGENCY ON AGING

Carla Frase

SIGNATURE

FOR THE CONTRACTOR

Charles Bentzen

SIGNATURE

Carla Frase, Executive Director

NAME AND TITLE

Charles J. Bentien, Attorney at Law

NAME AND TITLE

May 2, 2022

DATE

April 29, 2022

DATE

STANDARD LEGAL SERVICES PROVIDER CONTRACT FY 2023

This contract is made and entered into this 1st day of July 2022 by and between BLUE RIVERS AREA AGENCY ON AGING (hereinafter referred to as "BRAAA") and Legal Aid of Nebraska located at 209 S. 19th St. Omaha, NE 68102 (hereinafter referred to as "Contractor").

I. GENERAL TERMS

A. Provision of Service:

- a. Legal Assistance – provision of legal advice/ counseling, brief service, and representation by an attorney.
- b. Legal Education – provision of education on issues of concern to older individuals.

B. Eligible individual/client: A person 60 years of age or older and in greatest economic or social need within the BRAAA service area.

C. Service area: Thayer, Jefferson, Gage, Otoe, Johnson, Nemaha, Pawnee and Richardson Counties.

D. Contract Dates: July 1, 2022 – June 30, 2023

E. Contract amount: The maximum dollar amount payable under this contract is \$16,500 subject to actual expenses and availability. Payment will be made quarterly by the agency upon receipt of invoice from the Contractor (Legal Aid of Nebraska).

BRAAA and the Contractor therefore enter into the following:

II. SCOPE OF SERVICE

A. This contract provides for a legal assistance program (and includes legal education services).

B. Services will be delivered in the following designated counties:

Thayer, Jefferson, Gage, Otoe, Johnson, Nemaha, Pawnee and Richardson Counties.

C. The Contractor will give priority to legal assistance related to income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse and neglect, and age discrimination. (As stated in the Older Americans Act).

D. The Contractor will give priority for legal assistance services to those older individuals who are: rural, in greatest economic or social need, severely disabled, limited in English proficiency, suffering from Alzheimer's disease or related disorders, at risk of

institutionalization, at risk of homelessness or at risk of or under guardianship. (Older Americans Act target groups).

- E. All legal services provided will be delivered in a manner which conforms to Legal Services Statewide Standards of the Nebraska Department of Health and Human Services, State Unit on Aging.

III. CONTRACTOR DUTIES

- A. Provide clients in greatest social and economic need legal assistance, legal advice, counseling, and representation, in the priority legal issue areas outlined in this contract.
- B. Provide targeting and outreach to identify older individuals eligible for assistance under this contract with special emphasis on individuals who are: rural, in greatest economic or social need, severely disabled, limited in English proficiency, suffering from Alzheimer's disease or related disorders, at risk of institutionalization, at risk of homelessness or at risk of or under guardianship. The outreach will not only identify but will inform these older individuals and their caregivers of the availability of legal assistance under this contract.
- C. Provide legal services in the following descending order of priority:
- a. Protective Services, including but not limited to abuse, prevention, financial exploitation, defense of guardianship and conservatorship proceedings, durable powers of attorney, and nursing home rights.
 - b. Public benefits, including but not limited to social security, veterans' benefits, food stamps, Medicaid (except spousal impoverishment), supplemental security income, and Medicare.
 - c. Housing and essential services, including but not limited to tenant rights, utilities, and public housing.
 - d. Health care, including patient rights, health care powers of attorney, and living wills.
 - e. Debt collection when there is a meritorious defense, when a repayment agreement is possible, or when assets are subject to attachment or garnishment.
 - f. Consumer fraud.
 - g. Spousal impoverishment.
 - h. Dissolution of marriage, where income is affected.
 - i. Wills.
- D. Means testing shall not be used for providing services under this contract. Services shall not be denied to older individuals who do not contribute to the cost of the service.

- E. Not subcontract any interest or obligation arising under this contract without written agreement of BRAAA.
- F. Demonstrate to BRAAA the capacity to provide legal assistance in the principal language spoken by clients in areas where a significant number of clients do not speak English as their principal language.
- G. Coordinate services with BRAAA staff on programs including but not limited to Long Term Care Ombudsman, Senior Medicare Patrol, Caregiver, Nutrition and Medicaid Waiver in developing and utilizing a procedure for case acceptance and referrals.
- H. Submit programmatic and fiscal reports to BRAAA as per an established schedule including the quarterly and annual reports.
- I. Provide community education services to include, speaking engagements, preparation of bulletins and inclusion of articles in the Contractor and BRAAA newsletters.
- J. Abide by the Nebraska Rules of Professional Conduct adopted by the Supreme Court of Nebraska to regulate the practice of law.
- K. Develop and follow a protocol for referral of fee generating cases by referring the client to the Nebraska State Bar Association.
- L. Work with BRAAA to develop a program policy on conflict of interest.
- M. Obtain and keep in force a commercial general liability insurance as well as a professional liability insurance policy.
- N. Attend at least one training annually relevant to the Title IIIB contract.
- O. Work with BRAAA to develop and utilize a method of surveying client satisfaction without breaching confidentiality.
- P. Work with BRAAA to develop and utilize a plan for coordination of services with the legal services provider.

IV. BRAAA Duties

- A. Reimburse the Contractor for services provided under this contract.
- B. Provide the Contractor with forms for reporting units of service and expenditures of services provided under this contract.

- C. Ensure that the attorneys, paralegals, and other non-lawyers involved in providing Title IIIB legal assistance under this contract can demonstrate their expertise in the priority issue areas necessary to provide effective administrative and judicial representation to older persons in social or economic need.
- D. Work with the Contractor to assure that all paralegals/legal assistants who provide client services are supervised directly by an attorney, and that all paralegals/legal assistants adhere to the Code of Ethics and Professional Responsibility of the National Association of Legal Assistants, Inc.
- E. Work with the Contractor to develop local program plans annually for reaching the target populations and addressing the priority issue areas.
- F. Provide to the Contractor copies of written monitoring reports, monitoring checklists and onsite assessment reports pursuant to services under this contract.
- G. BRAAA shall not require the Contractor to reveal any information that is protected by attorney client privilege.
- H. BRAAA shall indemnify and hold harmless Contractor for claims arising by reason of any act or omission of BRAAA under this contract.

V. TERMINATION OR SUSPENSION

- A. This contract is contingent upon the availability of funds. In the event funds for this service are not available to BRAAA, BRAAA may terminate the contract by written notice of 60 working days and no further services or payment for services shall be rendered.
- B. If either the Contractor or BRAAA abandons, non-performs, or before completing, discontinues services; or if the commencement or timely completion of the service by either party is rendered improbably, infeasible or illegal, the other party may, by written notice of 30 days, terminate or suspend any or all of this obligation under this contract until such time as the events or conditions resulting in such suspension has ceased or been corrected.
- C. Either party may terminate this contract by providing 60 days written notice of the termination to the other party.

IN WITNESS THEREOF, BRAAA and Contractor, by and through their authorized officers, have duly executed this contract.

FOR Blue Rivers Area Agency on Aging

Carla Frase
Carla Frase

3/21/2022
DATE

FOR Legal Aid of Nebraska

Milo Mumgaard
Milo Mumgaard

March 23, 2022
DATE