

**Department of Economic Security
Division of Aging and Adult Services**

Arizona State Plan on Aging

**Federal Fiscal Years 2008–2010
(October 1, 2007–September 30, 2010)**

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Arizona State Plan on Aging Fiscal Years 2008-2010

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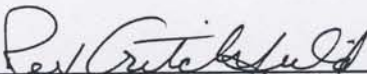
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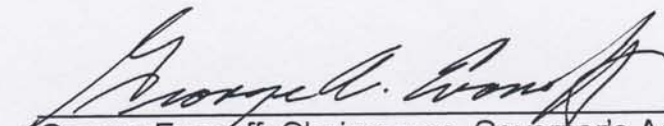
VERIFICATION OF INTENT

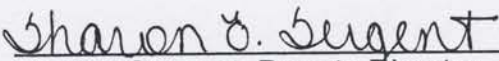
The State Plan on Aging is hereby submitted for the State of Arizona for the period October 1, 2007 through September 30, 2010. It includes all assurances and plans to be conducted by the Department of Economic Security, Division of Aging and Adult Services under provisions of the Older Americans Act, as amended, during the period identified. The State Agency named above has been given the authority to develop and administer the State Plan on Aging, in accordance with all requirements of the Act. It is primarily responsible for the coordination of all State activities related to the purposes of the Act; the development of comprehensive and coordinated systems for the delivery of supportive services, and to act as the effective and visible advocate for the older individuals in Arizona.

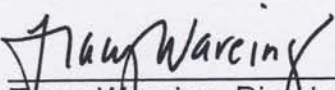
The State Plan on Aging is hereby approved by the Governor and constitutes authorization to proceed with activities under the Plan if approved by the U.S. Department of Health and Human Services, Assistant Secretary on Aging.

The State Plan on Aging, hereby submitted, has been developed in accordance with all Federal statutory and regulatory requirements.

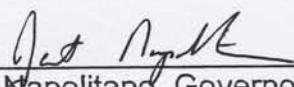
7-13-07
(Date) 
Rex Critchfield, Acting Assistant Director, Division of
Aging and Adult Services

7/13/07
(Date) 
George Evanoff, Chairperson, Governor's Advisory
Council on Aging

7/25/07
(Date) 
Sharon Sargent, Deputy Director, Arizona Department
of Economic Security

7/25/07
(Date) 
Tracy Wareing, Director, Arizona Department of
Economic Security

I hereby approve this State Plan on Aging and submit it to the Assistant Secretary for Aging for approval.

7-27-07
(Date) 
Janet Napolitano, Governor

Executive Summary

Each state is required to develop a State Plan on Aging. The development of the Arizona State Plan is the responsibility of the Arizona Department of Economic Security, Division of Aging and Adult Services. Arizona's plan is for a three year period beginning October 1, 2007 and concluding on September 30, 2010.

The State Plan on Aging outlines the Division of Aging and Adult Services' goals and objectives that serve the aging population. The plan is also an opportunity to reassess the goals to which the Division has committed and re-evaluate the extent to which the goals and objectives currently serve the aging population.

Development of the State Plan on Aging was a cooperative effort involving the input from Arizona's eight Area Agencies on Aging, the Governor's Advisory Council on Aging, the general public, and other concerned agencies and organizations throughout the state. Information from the U.S. Census Bureau and the Department of Economic Security, Research Administration, Population Statistics Unit, was also used to identify population trends. A thorough effort was made to obtain input for the development of the State Plan on Aging.

As a result of the input received, several new strategies have been added to the State Plan on Aging. The strategies were added for increased access to information, health, safety and well-being, and management.

Introduction

Arizona's State Plan

Under the Older American's Act of 1965, each state is required to submit a periodic state plan to the U.S. Department of Health and Human Services, Administration on Aging. The development of a state plan is the responsibility of the Arizona Department of Economic Security, Division of Aging and Adult Services (DAAS).

Arizona's plan is for a period spanning three consecutive federal fiscal years, beginning October 1, 2007 and concluding on September 30, 2010. Substantive amendments and updated information may be incorporated into the plan at the end of the first and second fiscal years.

Mission Statement

The mission of the DAAS is to support and enhance the ability of at-risk and older adults to meet their needs to the maximum of their ability, choice, and benefit.

Major Functions

A variety of programs and services are made possible through the DAAS and its contractors that enable older persons and vulnerable adults to remain independent in their communities. The following is a listing of DAAS programs and services:

- **Independent Living Support Services** provides for non-medical home and community-based services that serve as alternatives to nursing home care. Examples of services delivered as In-Home Services include: Personal Care, Respite Care, Housekeeping Services, Adult Day Care/Adult Day Health Care, Home Health Aides, Home Nursing, Telephone Assurances, Chore Maintenance, Support Services, and Home Delivered Meals. Access services include transportation, outreach, information and assistance, and case management. **Nutrition Services Incentive Program** provides home delivered meals, congregate meals, and nutrition education.
- **Disease Prevention and Health Promotion Services** are intended to address wellness and include services such as health risk assessments, routine health screening, nutritional counseling and education, home injury control services, medication management screening, and counseling regarding social services and follow-up health services.
- **Family Caregiver Support Program** provides services to family caregivers of older adults, as well as grandparents and other relative caregivers of children not more than 18 years of age. Services provided to family caregivers include: 1) Information to caregivers about available services; 2) Assistance to caregivers in gaining access to supportive services; 3) Individual counseling, organization of support groups, and caregiver training to caregivers to assist the caregivers in making decisions and solving problems relating to their caregiving roles; 4) Respite care to enable caregivers to be temporarily relieved from their caregiving responsibilities; and 5) Supplemental services, on a limited basis, to complement the care provided by caregivers.
- **Long-Term Care Ombudsman Program** provides investigation and assistance in the resolution of complaints made by, or on behalf of older persons who are

residents of long-term care facilities; advocacy for quality long-term care services; analysis and monitoring of issues and policies that relate to residents in long-term care facilities; and training to volunteers and designated representatives of the office.

- **Mature Workers Programs** are designed to assist all individuals 50+ years old with securing job training and job search assistance as well as civic engagement opportunities. The **Senior Community Service Employment Program (SCSEP)** provides paid part-time training opportunities in community service activities for unemployed low-income persons who are 55 years of age or older who have poor employment prospects. The goal of the SCSEP training is individual economic self-sufficiency through placement in unsubsidized employment in both the public and private sector.
- **State Health Insurance Assistance Program (SHIP)** receives its funding through the Centers for Medicare and Medicaid Services. The SHIP assists Arizona's Medicare beneficiaries in understanding and accessing the healthcare benefits to which they are entitled and assists Medicare beneficiaries, caregivers, families, and social services professionals seeking health insurance and benefits information and assistance. The **Senior Medicare Patrol** provides education on the detection of potential health care system fraud and abuse. Information and assistance is provided through a national toll free number, educational events, and face-to-face counseling. Volunteers provide outreach and deliver information and assistance in both programs.
- **Legal Services Assistance Program** provides legal assistance to older Arizonans who may be unable to appropriately manage their own affairs.
- **Adult Protective Services (APS)** is administered directly by DAAS throughout its 31 offices within six districts. Adult Protective Services accepts and evaluates reports of abuse, neglect, and exploitation of vulnerable and incapacitated adults and offers appropriate services.
- **Foster Grandparent Program (FGP)** is also administered directly through DAAS. The FGP receives its funding from the Corporation for National Service and provides volunteer opportunities that offer stipends to persons 60 years of age and older who have incomes at or below 125% of Federal Poverty Level. Foster Grandparents provide companionship and guidance to children with special needs. Typical assignments include helping children in local schools with their school work, reading with toddlers in a Head Start Center, or sharing life experiences with youth that need extra support and guidance.
- **Refugee Resettlement Program (RRP)** supports and advances successful resettlement of refugees, individuals forced to flee their home countries due to persecution, war, and human rights violations, through the coordination of public and private resources that best enable them to be firmly established on the path to success and well-being.

Overview of the Service System

The majority of the services funded through the Older Americans Act and other federal and state funds are provided under contract with eight Area Agencies on Aging. The DAAS contracts with four Area Agencies on Aging and the Mohave County One-Stop to provide the Senior Community Service Employment Program.

The Adult Protective Services program is administered by the DAAS throughout its 31 offices within six districts. Centralized Intake provides the public with the ability to report incidents of abuse, neglect or exploitation of incapacitated or vulnerable adults 24 hours a day, seven days a week.

The Foster Grandparent Program has responsibility for the following service areas: East Maricopa, Pinal, Pima, Yuma, Greenlee, Cochise, La Paz, Gila, Graham, and Santa Cruz counties. Memorandums of Understanding are established with public agencies or private non-profit organizations serving children with special needs to become volunteer sites.

Method for Carrying Out Preference for Older Individuals with Greatest Economic or Social Need

Over eight percent of Arizona's population aged 65+ and over falls into the poverty category. The Arizona Aging and Adult Administration will take the following steps to ensure that the needs of older persons in these categories are given priority attention:

- Ensure that individuals in this group are given opportunity for input at public hearings.
- Encourage the establishment of community focal points and/or service points that are easily accessible to individuals with greatest economic and social need.
- Promote the inclusion of representatives of this group in advisory councils at the local, area, and state levels.
- Weight Native American reservation areas higher than non-reservation areas in the Intrastate Funding Formula.
- Ensure sensitivity of state agency staff to the special service needs of this group.
- Provide technical assistance to Area Agencies on Aging and service providers in meeting the needs of this group.
- Provide orientation on the special needs of this group in training of service staff and volunteers.
- Encourage staffing of service projects that include bilingual, bicultural staff, commensurate with the composition of the local target populations.
- Include monitoring and assessment of responses to the needs of this group in monitoring and assessing Area Agencies on Aging and service providers.
- Ensure that dissemination of information on services resources reaches this group.

Method for Carrying Out Preference for Rural Older Individuals

Twelve of the fifteen counties of Arizona are largely rural areas and three counties have large rural areas surrounding their urban areas. The Arizona State Unit on Aging has and will continue to take the following steps to ensure that the needs of older persons in rural areas are given priority attention:

- Ensure that individuals in this group are given the opportunity for input at public hearings.
- Work with the Department of Transportation and other state agencies and the Area Agencies on Aging to develop alternative transportation systems.
- Promote the inclusion of representatives of rural elderly in advisory councils at the local, area, and state levels.

- Include weighting factor of a 10% set-aside for rural areas in the Intrastate Funding Formula.
- Ensure sensitivity of state agency staff to the special service needs of rural elderly through attendance at conference and training sessions that focus on this group.
- Provide technical assistance to Area Agencies on Aging and service providers in meeting needs of rural elderly.
- Enhance the use of volunteers and provide volunteer opportunities to serve the elderly in isolated communities.
- Ensure responsiveness to the needs of this group by monitoring and assessing Area Agencies on Aging and service providers.
- Promote ongoing outreach to this group through cooperative efforts with Area Agencies on Aging, nutrition projects, long-term care facilities, the Long-Term Care Gerontology Center at the University of Arizona, and other cooperating agencies and organizations.

Development of the State Plan on Aging

Development of the State Plan on Aging was a cooperative effort involving the input from Arizona's eight Area Agencies on Aging, the Governor's Advisory Council on Aging, the general public, and other concerned agencies and organizations throughout the state. Information from the U.S. Census Bureau and the Department of Economic Security, Research Administration, Population Statistics Unit were also used to identify population trends.

A thorough effort was made to obtain input for the development of the State Plan on Aging. This effort is described below:

- In March 2004, Governor Janet Napolitano issued an Executive Order for state agencies to develop plans to address a growing aging population. An Aging Summit to obtain preliminary public input was held in May 2004. State agencies used that input to draft their Aging 2020 plans by the end of September 2004. Between November 2004 and February 2005, the Governor's Office conducted 40 community input forums across Arizona to collect comments from community leaders about the quality and accuracy of the state agency plans. Excellent discussion occurred throughout the forums and many outstanding ideas were obtained from participants. In early April 2005, the community input from all 40 forums was shared with state agencies, which were then asked to amend and adapt their plans to incorporate, to the degree possible and appropriate, this input. Aging 2020 Arizona's Plan for an Aging Population is the result of that review and incorporation of community ideas in state agency strategies. The State Plan has adopted the eight goals identified in Aging 2020.
- The Planning Project grant provided for the development of a Planning Committee which consisted of the State Unit on Aging and the Area Agencies on Aging. The meetings were facilitated by the University of Arizona. Four Planning Committee meetings were held on February 28, March 28, April 25 and July 11, 2006. As a result of the meetings held during the past year, and using a matrix developed by the University of Arizona which mapped the commonalities that existed among the goals and objectives among the Administration on Aging Strategic Plan, Arizona Aging 2020 Plan, State Plan on Aging 2004-2006, and the eight Area Plans on Aging

2004-2006, the Planning Committee agreed to incorporate the following three Arizona Aging 2020 Plan goals into its 2008-2010 Area Plans on Aging:

- Increase awareness and understanding of aging issues and help prepare Arizona for an aging population;
 - Increase the ability of older adults to remain active, healthy and living independently in their communities; and
 - Increase the safety and well-being of older Arizonans.
-
- Dennis Dudley from the Administration on Aging facilitated a one-day strategic planning meeting on October 11, 2006, for DAAS management and key staff in Phoenix to identify future direction and strengthen the Division's position to achieve current and future initiatives.
 - John McLaughlin from Managing for Results facilitated a one-day logic modeling workshop on November 28, 2006, for DAAS staff, Area Agencies on Aging, and other stakeholders in Phoenix to craft the first draft of the Arizona State Plan on Aging 2008-2010.
 - Area Agencies on Aging prepared their Area Plans on Aging during state fiscal year 2007. An Area Plan is a planning document submitted by an Area Agency on Aging to the DAAS in order to receive funds provided under the Older Americans Act, as amended. The plan is the blueprint by which the Area Agency develops and administers a comprehensive and coordinated system of services and serves as the advocate for older people in the Planning and Service Area. Area Plans are locally based and supported by the State Plan. One-day, on-site planning consultation and discussion sessions were offered to staff at the Area Agencies on Aging as they developed their Area Plans during the period of November 2006-March 2007. These sessions covered the items outlined in the revised guidance, such as collecting public input (including designing and using surveys and using focus groups); obtaining demographic data; interpreting demographic data; identifying needs; developing goals, strategic and operational objectives, outputs, and outcomes under the revised planning process; and performance measurement. Planning consultations were tailored to meet the local needs of each Area Agency on Aging.
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- November 16, 2006 – Navajo Nation AAA, Region VII, Window Rock (six staff).
 - November 29, 2006 – Inter-Tribal Council of Arizona, Region VIII, Phoenix (ten staff).
 - December 11, 2006 – Northern AZ Council of Governments, Region III, Flagstaff (15 staff).
 - December 13, 2006 – Pinal-Gila Council for Senior Citizens, Region V, Casa Grande (21 staff).
 - January 19, 2007 – SouthEastern Arizona Governments Organization, Region VI, Bisbee (four staff).
 - February 6, 2007 – Pima Council on Aging, Region II, Tucson (11 staff).
 - February 21, 2007 – Region I (Maricopa County), Phoenix (planner only). detailed discussion of the region's planning process by the AAA planner with DAAS and ACOA staff.
 - March 2, 2007 – Western Arizona Council of Governments, Region IV, Yuma (five staff).

Several local planning processes were documented during these discussions. The consultation components and collected processes have been incorporated into an Area Planning Resource binder. The binder has been disseminated to each Area Agency on Aging for future reference and is available on the DAAS website.

- Although one public hearing was required, the majority of the Area Agencies provided multiple opportunities for the public in their local areas to comment on their plans. Area Plans on Aging were due in May 2007.
- In collaboration with the Governor's Advisory Council on Aging and the Area Agencies on Aging, seven State Plan Public Forums were conducted in March-April 2007 in conjunction with Local Senior Action Days. Local Senior Action Days were facilitated by the Maricopa Community Colleges, Center for Civic Participation and provided opportunities for older Arizonans to speak directly to their state legislators and to share their ideas, needs, and concerns about aging in Arizona. The Senior Action Day forums were open to the public. All events were held on Fridays when the Legislature is typically not in session and legislators frequently return to their home districts. Draft goals and objectives of the State Plan on Aging were also available on the Division of Aging and Adult Services website. Summaries of the Public Forums are provided in Section V – Appendices.
- Two presentations were made to the Governor's Advisory Council on Aging regarding the development of the State Plan on Aging. The first presentation made on November 30, 2006, focused on the Older Americans Act, DAAS' role, and the development of the State Plan. The second presentation made on June 8, 2007, focused on the comments received at the public forums and modifications made to the proposed strategies of the plan following these public forums.

Monitoring of the State Plan

The goals of the State Plan on Aging are monitored by the Governor's Advisory Council on Aging and the Division of Aging and Adult Services. The Council requests semi-annual updates from the Division. Quarterly reviews will be conducted within the Division to evaluate achievements of strategies within each goal and objective. Semi-annual updates are used to report on Aging 2020 activities.

State Profile – Highlights

Geographical and Demographic Trends and Characteristics¹

- Arizona was home to an estimated 6,166,318 persons in the year 2006.
- Arizona's total population increased by 13.6% from 2000 to 2005.
- In 2000 Arizona ranked 22nd nationally in percent of population age 65 and older and is projected to rank 18th in 2010, and 14th in 2030.
- Sixty-one percent of the total population resides in Maricopa County which includes the Greater Phoenix area. Pima County which includes the Greater Tucson area is home to 15% of the population and the remaining 24% of the population resides in the balance of the state.
- In 2005 there were 1,001,733 persons age 60 and older, or 17% of the population of Arizona.
- The projected growth of the population 60 years and older is expected to reach 1,305,495, or 19.6% of the total population by 2010, 2,092,622 or 24.7% of the total population by 2020, and 3,006,035, or 28% of the total population by 2030.
- Although 60% of its residents are Caucasian, Arizona's cultural diversity is evidenced by the fact that 29% of its population is Hispanic or Latino of any race, 4% is Native American, 3% is African American, 2% is Asian American, and 2% other racial groups. Of the number of persons 60 years and older, 83% are Caucasian, 11% are Hispanic, 3% are Native American, 2% are African American, and 1% are Asian American.
- Arizona's Hispanic or Latino population grew by 372,907 from 1,295,617 in 2000 to 1,668,524 in 2005, or a 29% increase. Hispanic or Latino persons accounted for 29% of the population in 2005, up from 25% in 2000.

Socioeconomic Status²

- In 2005 there were 824,008 persons below the poverty level in Arizona, or 14.2% of the total population.
- According to the U.S. Census Bureau 2005 American Community Survey, 10.9% of Arizona families are below the poverty level.
- In 2005, of the older adults age 65 years and older in Arizona, 8.2% were below 100% of the Federal Poverty Level.
- According to the 2000 U.S. Census, over 221,600 Arizonans are persons 45 years of age, at or below 125% of the Health and Human Services poverty levels. Of that number, 149,110 (or 76%) are 55 years of age or older, and 121,425 (or 55%) are 60 years of age or older.
- Of the persons age 65 and older in Arizona, 62% are married while 25% are widowed and 10% are divorced.
- There are 17,990 persons 60 years of age and older in Arizona who are living with at least one grandchild under the age of 18. Of those persons over 60 living with grandchildren, over 56% are responsible for the child with no parent present.

¹ Demographics provided by the U.S. Census and the Arizona Department of Economic Security, Research Administration, Population Statistics Unit.

² Demographics provided by the U.S. Census: 2005 American Community Survey; the Arizona Department of Economic Security, Research Administration, Population Statistics Unit; and the Arizona Department of Economic Security, Division of Aging and Adult Services.

- 44% of Americans between the ages of 44 and 55 have both living parents and children under 21 years old.

Health Status³

- The median age at death for Arizonans in 2005 was 80 years for females and 74 years for males.
- Among 30,532 Arizonans aged 65 and older who died in 2004, there were 154 who died by suicide, or 0.5%.
- Among people age 65 and older in Arizona, heart disease and cancer are the leading causes of death. Other leading causes of death are stroke, chronic obstructive pulmonary disease, and pneumonia/influenza.
- It is estimated that 4.5 million Americans suffer from Alzheimer's disease. Five percent of men and women age 65 to 74 have the disease and nearly half of those 85 and older have it. Alzheimer's disease is not considered a normal part of aging.
- 1,801 Arizonans died from Alzheimer's disease in 2005, the sixth leading cause of death among those 65 years and older. Of those, 1,220 were female and 581 were male.
- The number of deaths among Arizonans age 65 or older in 2005 that were related to unintentional falls was 583. The most prevalent fall injury is a fracture and the most serious and disabling fracture is a hip fracture. Up to 20% of patients die within a year following their injury.
- Of the Arizonans surveyed in 2005 who are 65 and older –
 - 54% have been told they have arthritis;
 - 38% are limited in some way in their usual activities because of arthritis or joint problems;
 - 10% are current smokers;
 - 15% have been told they have diabetes;
 - 67% consume less than five servings of fruit and vegetables per day;
 - 52% have been told they have high blood pressure;
 - 20% are classified as obese;
 - 58% are at-risk because of insufficient or no physical activity;
 - 69% participated in physical activity or exercise such as running, calisthenics, or walking in the past month;
 - 3% could not see a doctor during a time in the past 12 months because of cost;
 - 13% were told by a health professional that they had a heart attack;
 - 33% are limited because of physical, mental, or emotional problems; and
 - 18% have a health problem that requires at least occasional use of special equipment such as a cane, wheelchair, special bed, or special telephone.
- 39,403 older adults participated in Arizona's Home Delivered and Congregate Meal programs during fiscal year 2005.

³Sources used in this category were provided by the Arizona Department of Economic Security, Research Administration, Population Statistics Unit; the United States Census Bureau; Arizona Center on Aging, [Profiling Arizona's Nursing Home Residents: 2002 Update](#); National Association of Area Agencies on Aging, [Home and Community-Based Services for Older Adults: Informal Caregiving](#); Mental Health America, [Depression in Older Adults](#); National Institute on Aging; Arizona Department of Health Services, [2005 Behavioral Risk Factors of Arizona Adults](#); Arizona Department of Health Services, [Arizona Health Status and Vital Statistics 2005 Report](#); Partnership for Community Development, Arizona State University West, College of Human Services, [The Arizona Factbook on Aging, 2nd Edition](#) (2002); The National Aging Programs Information Systems State Program Report for fiscal year 2005.

- 10,002 older adults in Arizona received personal care and/or homemaker services in their own homes during fiscal year 2005, helping them to live independently and remain in their own homes.
- More than two million of the 34 million Americans age 65 and older suffer from some form of depression.
- More than 55% of older persons treated for mental health services received care from primary care physicians. Less than 3% aged 65 and older received treatment from mental health professionals.
- On July 1, 2002, there were 12,503 residents living in Arizona nursing homes. Approximately three-quarters of the individuals admitted came in after a hospital stay or were admitted for post-acute care.
- In 2002, there were 27,008 individuals admitted to an Arizona nursing home. Of those admitted, they were predominantly women over the age of 75 years of age who were Caucasian and English-speaking.
- 22 million Americans are caring for parents or older relatives and nearly two-thirds of primary caregivers are women.
- Approximately 95% of non-institutionalized older adults with disabilities receive at least some assistance from relatives, friends, and neighbors. Almost 67% rely solely on unpaid help, primarily from wives or daughters.

Employment Related Status⁴

- As of April 2007, the seasonally adjusted unemployment rate for Arizona was 4.0% as compared to the national rate of 4.5%.
- Of the persons 60 years of age and older in Arizona, nearly 21% are employed.
- During the period May 2006 – May 2007, 92,072 individuals registered with the Arizona's workforce development system. Of this population:
 - 17,400 (18.9%) were age 45 – 54;
 - 9,063 (12.0%) were age 55 – 64; and
 - 1,987 (2.2%) were age 65 and older.
- During the period May 2006 – May 2007 - of the 92,072 registered individuals in the Arizona workforce development system, 7,494 were selected by the Worker Profiling Re-Employment System (WPRS) – Unemployment Insurance claimants who are identified through profiling methods as likely to exhaust benefits and who are in need of reemployment services to transition to new employment and participate in reemployment services, such as job search assistance. Of the WPRS population:
 - 1,639 (21.9%) were age 45 – 54;
 - 909 (12.1%) were age 55 – 64; and
 - 134 (1.7%) were age 65 and older.

⁴ Sources used in this category were provided by the Arizona Department of Economic Security, Research Administration, Population Statistics Unit and the United States Census Bureau; United States Department of Labor/Employment and Training Administration

Top 10 High Percentage Growth Occupations 2005-2015 Arizona Statewide						
Occupation Title	Employment		10-year change		2005	Training Requirement
	2005 Estimated	2015 Projected	Numerical Change	Percent Change	Average Annual \$	
Network Systems & Data Communications Analysts	3,876	5,967	2,091	53.9%	\$57,797	Bachelor's degree
Special Education Teachers, Preschool, Kindergarten, & Elementary School	2,277	3,484	1,207	53.0%	\$36,802	Bachelor's degree
Diagnostic Medical Sonographers	671	1,023	352	52.5%	\$61,728	Associate degree
Physician Assistants	1,494	2,277	783	52.4%	\$64,534	Bachelor's degree
Medical Assistants	8,292	12,618	4,326	52.2%	\$26,660	Moderate-term on-the-job training
Medical Scientists, Except Epidemiologists	464	692	228	49.1%	\$60,174	Doctoral degree
Pharmacy Technicians	5,884	8,771	2,887	49.1%	\$26,561	Moderate-term on-the-job training
Special Education Teachers, Middle School	792	1,179	387	48.9%	\$37,074	Bachelor's degree
Physical Therapist Assistants	991	1,473	482	48.6%	\$33,826	Associate degree
Respiratory Therapists	2,413	3,585	1,172	48.6%	\$41,281	Associate degree

Programs Specific Information

- **Adult Protective Services:** A profile of Arizona's Adult Protective Services activities and clients for the period of July 1, 2005-June 30, 2006 is included below. Effective January 2007, APS is maintaining a 100% investigation rate.

Reports	#	%
Resulted in Field Investigation	7,697	87.20%
Assessed w/o Field Invest.	1,130	12.80%
Total Reports	8,827	100.00%
Field Investigations	#	%
Private Residence or Public Area	6,369	82.75%
Licensed/Unlicensed Care Facility	1,328	17.25%
Total Field Investigations	7,697	100.00%

	Allegation					
	Abuse		Neglect		Exploitation	
	#	%	#	%	#	%
Not Substantiated	1,327	85.17	3,858	64.72	1,101	76.50
Substantiated	231	14.83	2,103	35.28	338	23.50
Total	1,558	100.00	5,961	100.00	1,439	100.00

Client Age Group	%
Less than 18	0.9%
18 through 29	5.4%
30 through 39	4.1%
40 through 49	7.1%
50 through 59	10.3%
60 through 64	6.3%
65 through 69	7.5%
70 through 74	9.2%
75 through 79	13.4%
80 through 84	15.6%
85+	20.3%
	100.0%

Ethnicity	%
Alaskan/American Indian	2.1%
Asian	0.6%
Black	3.8%
Caucasian	76.9%
Hispanic	12.6%
Other/Unknown	4.0%
	100.0%
Sex	
Female	61.7%
Male	38.3%
Unknown	0.0%
	100.0%

Living Arrangement	%
License/Unlicensed Care Facility	22.5%
With Family	29.4%
With Non-Family	8.3%
Alone - Some Assistance	4.8%
Alone - Little or No Assistance	30.2%
Other	4.8%
	100.0%
Monthly Income Range	
Unknown	84.2%
\$300 or Less	0.4%
\$301 to \$500	0.7%
\$501 to \$750	4.8%
\$751 to \$1,000	3.4%
Greater than \$1,000	6.5%
	100.0%

Perpetrator	%
Family Member(s)	29.0%
Self	36.3%
Friend/Neighbor	9.1%
Caregiver(s)/Residential Management	16.7%
Other	8.9%
	100.0%
Reporting Source	
Family Member(s)	10.3%
Self	2.8%
Friend/Neighbor	10.2%
Medical Services	12.7%
Social Services	33.4%
Other Public Services	19.5%
Other	11.1%
	100.0%

Senior Community Service Employment Program (SCSEP): A profile of Arizona's State SCSEP participants (161 training slots):

Gender	Female	73%
	Male	27%
Age	55-69	77%
	60+	71%
	75+	9%
Race	Caucasian	77%
Education	High School diploma or equivalent	56%
	1-3 years of college	30%
	Post Secondary certificate/degree	14%
Other	Disabilities	14%
	Veterans	13%

- **Foster Grandparent Program:** During April 1, 2006 thru March 31, 2007, 59 Foster Grandparents provided 49,158 hours of mentoring and tutoring to 1,620 young children and teenagers in Pinal, Maricopa, Pima, Yuma, Greenlee, Cochise, La Paz, Gila, Graham, and Santa Cruz counties.
- **State Health Insurance Assistance Program (SHIP):** SHIP counselors provided counseling to 16,507 beneficiaries, caregivers, and professionals from April 1, 2006 thru March 31, 2007.
- **Long-Term Care Ombudsman Program:** In 2006, the Long-Term Care Ombudsman Program responded to 4,930 complaints from long-term care residents and/or their families.
- **Family Caregiver Support Program (FCSP):** In 2006, 11,446 caregivers received FCSP services. The circumstances leading to 654 grandparents who are caring for their grandchildren and are enrolled in the Kinship Care Program in Arizona are substance abuse by a parent(s) (45%), incarceration of a parent(s) (19%), death of a parent(s) (6%), economic hardship of a parent(s) (6%), mentally ill parent (5%), domestic violence (3%), parental divorce (2%), and other causes (13%).
- **Independent Living Support:** The Parity report shows the distribution of client service populations for Congregate Meals, Home Delivered Meals, and Social Services. Specifically, the reports provide an unduplicated client count for each service for the following categories: Non-Minority/Non-Poverty, Minority/Non-Poverty, Non-Minority With an Economic Need (Below Poverty), Minority With an Economic Need (Below Poverty), and Age 75 and Over. Additional categories address Native American, Asian/Pacific Islander, Black, and Hispanic populations regardless of economic need.

Each category provides the Total Client Count for the service and population category. These reports demonstrate only unduplicated client counts. They do not address the total amount of services provided or the amounts per category. The purpose of the reports is to allow a standard of comparison of services to target

populations compared to the percentage each target population represents to the whole.

Population data was derived from 2000 Census data. Client counts for 2006 were derived for Congregate Meals and Social Services from the Department of Economic Security, Division of Aging and Adult Services, Aging Information Management Systems (AIMS) for all regions except Region VIII. The AGO-030A and AGO-031 reports were used to collect data for Region VIII.

**DIVISION OF AGING AND ADULT SERVICES
PARITY REPORT FOR FY-06**

STATE TOTAL	2000 60+ POPULATION *		2006 PERSONS SERVED **		PERCENT OF PARITY
	NUMBER	PERCENT	NUMBER	PERCENT	
CONGREGATE MEALS					
Native American	21,899	2.52%	2,538	18.78%	745.24%
Asian/Pacific Is., NH	9,093	1.05%	142	1.05%	100.00%
Black, NH	13,675	1.58%	176	1.30%	82.28%
Hispanic	79,935	9.21%	1,115	8.25%	89.58%
Other Minorities	0	0.00%	632	4.68%	
Caucasian, NH	743,602	85.65%	8,913	65.94%	76.99%
Total	868,204	100.00%	13,516	100.00%	
Total Minority	124,602	14.35%	4,603	34.06%	237.35%
Economic Need (Total)	72,281	8.33%	6,123	45.30%	543.82%
Minority Economic Need	17,544	2.02%	3,064	22.67%	
75+	309,720	35.67%	6,031	44.62%	125.09%
HOME DELIVERED MEALS					
Native American	21,899	2.52%	583	6.17%	244.84%
Asian/Pacific Is., NH	9,093	1.05%	35	0.37%	35.24%
Black, NH	13,675	1.58%	426	4.51%	285.44%
Hispanic	79,935	9.21%	1,445	15.29%	166.02%
Other Minorities	0	0.00%	405	4.28%	
Caucasian, NH	743,602	85.65%	6,558	69.38%	81.00%
Total	788,269	100.00%	9,452	100.00%	
Total Minority	124,602	14.35%	2,894	30.62%	213.38%
Economic Need (Total)	72,281	8.33%	3,193	33.78%	405.52%
Minority Economic Need	17,544	24.27%	0	0.00%	
75+	309,720	35.67%	6,774	71.67%	200.93%
SOCIAL SERVICE					
Native American	21,899	2.52%	1,220	9.65%	382.94%
Asian/Pacific Is., NH	9,093	1.05%	354	2.80%	266.67%
Black, NH	13,675	1.58%	691	5.47%	346.20%
Hispanic	79,935	9.21%	2,437	19.28%	209.34%
Other Minorities	0	0.00%	15	0.12%	
Caucasian, NH	743,602	85.65%	7,925	62.69%	73.19%
Total	788,269	100.00%	12,642	100.00%	
Total Minority	124,602	14.35%	4,717	37.31%	260.00%
Economic Need (Total)	72,281	8.33%	7,009	55.44%	665.55%
Minority Economic Need	17,544	2.02%	2,359	18.66%	
75+	309,720	35.67%	0	0.00%	0.00%

* Source : U.S. Bureau of Census, *Population Age 60 and Over by Race/Hispanic Origin, Census 2000 Summary File 1 and*

Persons who are American Indian and Alaska Native Alone, Not Hispanic/Latino By Age, Census 2000 Summary File 1, Table PCT12K

Numbers were not available for the categories of "minority economic need in home delivered meals" and "75 + in social services" - a zero was placed in the categories as a placeholders.

** Source: *AIMS and Monthly Social Services Reports*

Section I. State Plan Goals and Objectives

Goal 1: Make it easier for older Arizonans to access an integrated array of state and aging services.

Objective 1.1: Provide information and promote understanding of options, benefits, and available services through a variety of multi-media formats.

Objective 1.2: Facilitate an interagency approach towards a comprehensive system that allows older adults to remain as independent as possible.

Objective 1.3: Increase access to health care and other social services for seniors of all socio-economic levels.

Goal 2: Increase awareness and understanding of aging issues and help prepare Arizona for an aging population.

Objective 2.1: Provide culturally appropriate information to older adults and their families to promote a broad understanding of issues that arises as we age and how to address them.

Objective 2.2: Promote gerontological studies in all disciplines to address aging issues through a multidisciplinary approach.

Objective 2.3: Educate and prepare the public and private sectors about the value and needs of older Arizonans.

Goal 3: Increase the ability of older adults to remain active, healthy and living independently in their communities.

Objective 3.1: Promote healthy lifestyles, resulting in less long-term illness and reduced mortality from preventable and chronic diseases.

Objective 3.2: Support aging services and programs that promote independence and self-determination of choices for older adults.

Goal 4: Increase the safety and well-being of older Arizonans.

Objective 4.1: Promote new and existing strategies to improve community safety for older adults.

Objective 4.2: Reduce incidents of elder mistreatment.

Objective 4.3: Develop an emergency preparation plan to address needs of “at-risk” vulnerable adults requiring emergency evacuation.

Goal 5: Strengthen Arizona's economy by capitalizing on an integrated and well-trained informal, paraprofessional, and professional workforce.

Objective 5.1: Provide support for families in their efforts to care for their loved ones at home and in the community.

Objective 5.2: Promote a stable and competent workforce sufficient to meet the growing care needs in Arizona.

Objective 5.3: Promote a coordinated workforce development approach between public and private entities to benefit from the capabilities and experiences of a mature workforce.

Objective 5.4: Influence human resource policies that balance the needs of employers with the changing needs of an aging workforce.

Objective 5.5: Support Arizonans' efforts to remain engaged in the workforce and civic engagement activities.

Goal 6: Enhance the state's capacity to develop and maintain the necessary infrastructure to deliver services in a culturally appropriate, timely and cost effective manner.

Objective 6.1: Develop programs and approaches to close the gaps in the state's current aging services infrastructure and delivery system especially to underserved areas.

Objective 6.2: Create working partnerships across state agencies and with private entities to improve the state's ability to develop the business and service infrastructure necessary to meet the needs of seniors.

Goal 7: Promote quality of care in all aging services.

Objective 7.1: Ensure regulations and policies promote high quality of care.

Objective 7.2: Ensure the highest quality of care and service through active monitoring, assessment, and training.

Objective 7.3: Streamline policies, procedures, regulations, and statutes that reflect the changing nature of an aging population.

Goal 8: Promote effective and responsive management for all aging services.

Objective 8.1: Maximize resources to address the needs of a growing aging population.

Objective 8.2: Streamline administrative processes and increase coordination.

Objective 8.3: Promote training and professional development of staff and managers.

Objective 8.4: Use advanced technology to enhance communication and improve management.

Section II. Projects and Initiatives

The Division of Aging and Adult Services is involved in the following initiatives:

Aging and Disability Resource Center

In September 2005, the Arizona Department of Economic Security, in partnership with the Arizona Health Care Cost Containment System (Arizona's Medicaid Agency), was awarded a federal grant to implement the Arizona Aging and Disability Resource Center (ADRC). The grant is jointly funded by the Administration on Aging and the Centers for Medicare and Medicaid Services. The project will serve older adults, persons with physical disabilities, and persons with developmental disabilities. Arizona's ADRC, known as **AZ Links**, will create a single, coordinated system of information, assistance, and access for all persons seeking long-term care services. The AZ Links will also create a programmatic process that is reflected in an integrated data infrastructure that will allow aging, physical disability, developmental disability, health, and Medicaid systems to communicate. Implementation of AZ Links will produce the following expected outcomes: consumers will have improved access to long-term care service options online, existing benefits counseling programs will have increased knowledge of long-term care options online and the provision of technical assistance, successful integration with existing programs and services as evidenced by programs utilizing AZ Links, web portal reflects needs expressed by consumers, stakeholders, and project staff and providing comprehensive information regarding long-term care and aging services and is user friendly; effective management information system; improved data sharing and data collection capabilities through the implementation of an integrated data infrastructure, improved coordination among agencies through the implementation of the Uniform Assessment Instrument; and effective sustainability plan to support the project when grant funds are terminated.

To date, AZ Links has accomplished the following:

- Three committees were established to foster collaboration among stakeholders and provide guidance to serve each of the stakeholder's interests. The committees include the Steering Committee, the Customer Service Committee, and the Uniform Assessment Committee. A work group is being formed to address information technology development.
- Regional Networks were formed to develop the infrastructure to deliver services in each of the Pilot regions. Maricopa and Mohave counties have been designated as the two pilot sites tasked with the development of local AZ Links partnerships and building the infrastructure to increase access to long-term care options and information.
- A review and analysis was conducted on existing information and referral components.
- The AZ Links sites have been identified where individuals can access counseling and assistance on long-term care information, options, and services. Negotiations are being established.
- The Customer Assistance Committee is in the process of creating training and technical assistance materials to train local community site staff. Both Regional Networks have begun planning monthly meetings and trainings. Training topics include: understanding and working with each population; Alzheimer's Disease and

related dementias; Options Counseling; and serving returning veterans. Mohave Regional Network has developed Community Networks in three cities to support collaboration on service integration. Maricopa Regional Network is planning a large training for contacted providers and other key partnering agency staff. Technical assistance to community partners will begin once AZ Links has been launched in both Maricopa and Mohave counties. This launch is expected to take place in November 2007.

- The Uniform Assessment Committee developed a Screening Tool to be posted on the AZ Links website as a self-help tool to determine what services may be needed by the consumer. The Screening Tool is currently being tested on both the WACOG (Western Arizona Council of Governments) and AAA Region One websites in both English and Spanish. Additionally, a crosswalk of all agency assessment instruments was completed. The Committee is working towards developing a common intake form as the preliminary step in development of a Uniform Assessment Instrument.

A key change to service delivery that will result from the AZ Links will be the transition of case management from service providers to Area Agencies on Aging. Area Agencies on Aging have historically contracted the service of case management to service providers within their planning and service areas in accordance with Older Americans Act requirements. Several of the case management service providers also provide in-home services such as home delivered meals, visiting nurse, respite care and housekeeping. These case management providers are also authorizers of the in-home services which can create a conflict of interest and potentially limit the client's choice. In 2007, Area Agencies on Aging were provided over \$2 million in capacity building funds. Most of the eight Arizona Area Agencies on Aging have utilized a portion of their capacity building funds to support the development or expansion of their Central Intake Systems. Over the next three years the Division of Aging and Adult Services will assess the existing direct services requirement with the intention that, effective July 1, 2010, case management may be provided directly by Area Agencies on Aging without a waiver request. In doing so, Area Agencies on Aging will have better control of the in-home services that are authorized for clients and provide for greater client directed choice of service providers, which is in line with AZ Links.

Evidence-Based Health Promotion and Disease Prevention

The Arizona Department of Health Services (ADHS), in partnership with the Arizona Department of Economic Security, Division of Aging and Adult Services, through the **Arizona on the Move for Healthy Aging** project will implement the Chronic Disease Self Management Program (CDSMP) and EnhanceFitness (EF) programs in Pima, Santa Cruz, and Yavapai counties over three years. The goals are: 1) implementation of evidence-based prevention programs targeting adults 60+; and 2) build and strengthen state and local healthy aging partnerships focused on prevention services targeting older adults through the following objectives: develop a resource of CDSMP and EF trainers at the state and local levels, establish CDSMP and EF programs in three counties and integrate evidence-based prevention programs into planning and policy in state public health and aging networks. The outcomes of this project will be increased training and prevention program resources in two rural and one urban county along with strong partnerships at local and state levels to increase capacity and infrastructure for prevention services targeting adults 60 years and older living in Arizona. An additional

outcome will be the availability of data demonstrating the benefit to adults 60 years and over of participation in chronic disease self management. Project information and resources will be made available on the Healthy Aging Communication Network (HACN) website and through the AZ Links.

Arizona receives a little over \$400,000 in Older Americans Act Title IIID funds which is earmarked for disease prevention and health promotion. Currently, most of the funds support health education and medication management activities in senior centers. Due to the recent changes in the Older Americans Act, specifically the increased focus on evidence-based health promotion and disease prevention programs, in April 2007, DES provided funding opportunities to Area Agencies to purchase materials for the CDSMP (\$50,000) and implement falls prevention programs such as Enhance Fitness or Matter of Balance (\$80,000). Proposals to the Division of Aging and Adult Services were due on May 21, 2007. The funds were made available to serve as start-up funds for such programs that will eventually be supported by Title IIID funds. The following four Area Agencies on Aging were awarded funds: Area Agency on Aging Region One, Pima Council on Aging, Pinal/Gila Council for Senior Citizens, and SouthEastern Arizona Governments Organization.

The Division recently filled the position of Nutrition and Wellness Specialist. The position will work closely with Area Agencies on Aging and be responsible for the provision of technical assistance in the implementation of evidence-based programs. The Division will work with the Department of Health Services to jointly host Evidence-Based Health Promotion and Disease Prevention workshops throughout the term of the State Plan.

Adult Protective Services Central Registry

Aside from Criminal and Civil penalties, beginning July 1, 2007, anyone with a substantiated case of mistreatment could potentially have their name placed on the APS Central Registry. The new law requires that APS notify the accused that we plan to substantiate the allegations against them and provides due process for the accused. This means that the case may go before an Administrative Law Judge for determination. If the substantiation is affirmed, the accused person's name will be placed on a Central Registry for 10 years. The Central Registry will be opened to the general public upon request for the information. This means that potential employers could request information about an individual they are considering for hire. Therefore it could impact a person's employment or employment opportunities.

Ensuring Quality Long-Term Care

The number of Arizonans over the age of 85 is going to double in the next 15 years. Thousands of Arizona's citizens receive long-term care because of age or disability. In January 2007, Governor Napolitano issued Executive Order 2007-01, titled Ensuring Quality in Long-Term Care, to address long-term care abuse and neglect, and reward facilities that provide the best care. The Executive Order directs the Department of Health Services, Department of Economic Security, and the Arizona Health Care Cost Containment System, working with program contractors and the long-term care profession, to develop a comprehensive three-year strategy to improve quality in long-term care, including focusing on nursing homes in the first year, assisted living in the second year, and community care in the third year. The following are some key areas of focus:

- Set goals and take measures to reduce Arizona's rates of pressure ulcers and restraint use in nursing home;
- Address and correct quality of care deficiencies in long-term care facilities;
- Develop incentives for nursing homes that have achieved top quality care;
- Work with community advocates, long-term care providers, community colleges, and other entities to address the shortage of long term care direct care support professionals;
- Hold conferences to educate direct care staff about how to prevent pressure ulcers and properly use restraints;
- Post quality rating of individual nursing homes;
- Post regulatory surveys for nursing homes and assisted living facilities to provide consumers with quality information about assisted living facilities;
- Develop a consumer's long-term care toolkit to provide Arizona families with the information, resources, and guidance needed to make informed decisions about long-term care;
- Foster better understanding and compliance with federal law regarding the provision and appropriate explanation of the Resident's Bill of Rights to all residents; and
- Recommend a Bill of Rights for consumers of home and community-based long-term care.

Emergency Preparedness

The Reauthorization of the Older Americans Act Amendments of 2006, Title III, requires state and local Area Agencies on Aging to coordinate activities and develop long-range emergency preparedness plans along with local emergency response agencies, local governments, state agencies responsible for emergency preparedness, and other entities involved in disaster relief. Area Agency on Aging contracts has been amended to include this requirement, becoming effective July 1, 2007. The Division will be working with the Governor's Advisory Council on Aging providing information and training to Area Agencies on Aging during the first year of the State Plan to assist Area Agencies on Aging to meet the requirement. In addition, a new data field has been added to the Aging Information Management System (AIMS) to determine clients who may need assistance to evacuate. Initially, the data field will be populated for all existing clients in AIMS using an ad hoc report that is scheduled to run on March 1, 2007. The ad hoc report will utilize existing data gleaned from the Arizona Standardized Client Assessment Plan (ASCAP) to populate the new field with a "yes" or a "no" answer. New clients and existing clients scheduled for reassessments will be required to be assessed for evacuation assistance.

Adult Protective Services (APS) is participating in the **Client Identification Program** that allows at-risk and older adults to obtain a client identification pendant that helps ensure their safety and protection in case of an emergency or disaster. At-risk and older adults can voluntarily receive a client identification pendant from APS that contains non-personally identifiable information that helps first responders in emergencies or situations that require evacuations. The client identification pendant contains the individual's APS case number so that first responders can call the APS Hotline to quickly obtain information about the individual and instructions about any special needs or medical conditions. Individuals can wear the identification pendant as a neck chain. Individuals will also be provided an identification card for their wallet and a magnetic card to place on their refrigerator. Participation in the client identification program is

voluntary. The client identification program was implemented on July 2, 2007 at APS offices in Glendale and Sierra Vista.

Mature Workforce

The Governor's Arizona Mature Workforce Initiative is focused on mature worker issues. In November 2005, the Mature Workforce Committee hosted three *Arizona Summits on the Mature Workforce* – events that brought business leaders and mature workers together to interact to help formulate strategies to counter myths and overcome employment barriers faced by many businesses and mature workers.

Results from the summits were presented to the Governor's Advisory Council on Aging for review. A summary report was composed and published in May 2006. The report was forwarded to the Governor for consideration. This report contained six recommendations for the Governor to consider in order to promote the purpose of the initiative. These recommendations were:

- Launch a mature worker public awareness campaign – assist in the effort to raise the public's awareness about the opportunities and challenges of an aging workforce.
- Create the Arizona Workforce Transition Center – the center will assist mature workers who wish to transition from their current situation (whether employed or not) to a new career and direction in life. Assessments will be conducted and reviewed and when appropriate, the center will then link the worker with the appropriate Arizona training program (i.e., community colleges, One-Stop centers).
- Explore establishing a Mature Worker technical assistance position in the Arizona Department of Commerce – to work with businesses to identify best practices and assist businesses seeking to retool their jobs in light of an aging workforce.
- Establish a mature worker job bank – explore various models/possibilities of job bank featuring opportunities for mature workers and job seekers.
- Create a mature worker-friendly business designation - a designation awarded to any business that meets a standard set of criteria. Standards might include concepts and business practices like workplace flexibility and diversity training.
- Call for changes to national policies that limit mature worker's ability to work.

The Governor's Advisory Council on Aging hosted the Governor's Conference on Aging on May 23-24, 2006. Mature worker issues were a focus of the conference, including a post-conference intensive around the development of an implementation plan for the approved strategies identified in the report from the summit findings.

The Mature Workforce Committee is also working with employers and communities statewide to focus on the recruitment, hiring and retention of mature workers. The committee has subdivided into three groups to address three of the recommendations from the summits previously mentioned: public awareness of the growing boomer population and its impact on the workforce, a mature worker job bank, and an "age-friendly employer designation" whereas an employer who meets a standard set of criteria would receive this designation.

Preventative Services and Mental Health

Medicare began covering preventive services in 1981 with the pneumococcal vaccination. Despite its long history of coverage, pneumococcal vaccination rates are less than optimal, with 59.2% of non-Hispanic Caucasians, 38.5% of Blacks, and 30.2% of Hispanics reporting ever receiving it (NHIS, 2001-2002). Unfortunately, older adults are not receiving all recommended preventive services, even with frequent visits to physician offices. Reasons for this vary, but highlight the opportunity to improve preventive care for older adults. The State Health Insurance Assistance Program, in partnership with the Centers for Medicare and Medicaid Services, continue to focus outreach and education efforts toward Medicare's preventive services. The CMS Prevention section contains sections on each of the following Medicare preventive benefits including the following:

- "Welcome to Medicare" visit (includes a referral for an ultrasound screening for Abdominal Aortic Aneurysm for eligible beneficiaries);
- Adult Immunization--Influenza Immunization;
- Pneumococcal Vaccination;
- Hepatitis B Vaccination;
- Colorectal Cancer Screening;
- Screening Mammography;
- Screening Pap Test and Pelvic Examination;
- Prostate Cancer Screening;
- Cardiovascular Disease Screening;
- Diabetes Screening;
- Glaucoma Screening;
- Bone Mass Measurement;
- Diabetes Self-Management, Supplies, and Services;
- Medical Nutrition Therapy; and
- Smoking Cessation.

The State Health Insurance Assistance Program grant terms and conditions require that 5% of the funding be utilized to provide one-on-one pharmaceutical benefits counseling to dual eligible beneficiaries with mental illness. Funds will be used to hold Medicare Part D trainings to case management staff within Arizona Health Care Cost Containment System's (AHCCCS) Mental Health Division and/or local Regional Behavioral Health Authorities (RBHAs) and develop referral network with AHCCCS and/or RBHAs to identify how case managers can refer the calls back to the SHIP Coordinator or complete the Client Contact Forms.

Transportation Services

An example of how Arizona is attempting to address some of the transportation barriers is through Arizona Rides partnership. This project was developed in early 2005 as part of the federal *United We Ride* initiative. The Arizona Department of Transportation (ADOT), in collaboration with the Governor's Office, the Department of Economic Security (DES), the Arizona Health Care Cost Containment System (AHCCCS), and other members of the Arizona United We Ride (Arizona Rides) team were the sponsors of this project. It is part of a two-part initiative which has the following goals:

- To ensure maximum feasible coordination between and among human services agencies receiving federal transportation dollars;
- To increase the efficiency and effectiveness of funds utilized for transportation; and
- To reduce redundancy/overlap of service.

The *Arizona Rides - Pinal Coordination Demonstration Project* focuses on developing a pilot coordination project among transportation providers in the Pinal County area in central Arizona. The Pinal County area was selected for several reasons. First, it is a rural area with only limited general public transportation and with a variety of specialized transportation providers. Second, the county is a rapidly growing area located between Arizona's two largest urban communities, with potentially unique service dynamics.

Multiple Area Agencies on Aging are involved in local transportation efforts utilizing transit funding mechanisms. Area Agencies on Aging have partnered with transportation contract providers to apply for SAFETEA-LU Section 5310 vehicles. Providers are encouraged to transport multiple population groups, because it is inefficient to only transport the elderly.

Direct Care Workforce

Direct care professionals are known by many names: caregivers, direct support professionals, personal care attendants, homemakers, respite workers, home care aides, and companions. They provide assistance with activities such as bathing and grooming, housekeeping, and running errands, in order to help older Americans and individuals with physical or developmental disabilities live in their own homes and in their communities. The Arizona Department of Economic Security, Division of Aging and Adult Services (ADES-DAAS), in partnership with the Arizona Department of Health Services (ADHS) and the Arizona Health Care Cost Containment System (AHCCCS), created the position of Direct Care Workforce Specialist to provide coordination for direct care workforce initiatives, including recruitment and retention, training, and raising the qualifications of direct care professionals in Arizona.

Management Information System

In 2005, the Division of Aging and Adult Services began assessing information technology systems to capture pertinent program information and allow for improved reporting capabilities, both at a state and local level. In February 2006, the Division narrowed its search to include Synergy, Q Continuum (CH Mack), and JB Solutions, Inc., who presented their systems to the State and Area Agencies on Aging. In May 2007, the Division determined it will be developing its information technology systems internally. Migration of existing data and implementation of the selected management information system is anticipated to occur by June 30, 2009. Implementation of a management information system will provide for informed decision-making and allow for the measurement and evaluation of performance through an electronic tracking mechanism.

Section III. Administrative Structure

Statutory Authority

Arizona Revised Statute § 41-1954 provides the statutory authority for the Division of Aging and Adult Services to administer programs and services funded under the Older Americans Act. In addition, the Division is responsible for administering state and federal funds for the provision of Independent Living Support Services to older individuals and individuals with physical disabilities, Adult Protective Services, and the Foster Grandparent Program.

Division of Aging and Adult Services staff are responsible for carrying out the goals and objectives of the State Plan on Aging. Periodic reviews to evaluate accomplishments are completed throughout the year.

A.R.S. § 41-1954	<u>Powers and duties</u>
A.R.S. § 46-191	<u>Definitions</u>
A.R.S. § 46-192	<u>Identification of services</u>
A.R.S. § 46-452.01	<u>Office of State Long-Term Care Ombudsman</u>
A.R.S. § 46-452.02	<u>Long-Term Care Ombudsman; duties; immunity from liability</u>
A.R.S. § 46-453	<u>Immunity of participants; non-privileged communication</u>
A.R.S. § 46-454	<u>Duty to report abuse, neglect and exploitation of incapacitated or vulnerable adults; duty to make medical records available; violation; classification</u>
A.R.S. § 46-455	<u>Permitting life or health of an incapacitated or vulnerable adult to be endangered by neglect; violation; classification; civil remedy; definition</u>
A.R.S. § 46-456	<u>Duty to an incapacitated or vulnerable adult; financial exploitation; civil and criminal penalties; exceptions; definitions</u>

The Older Americans Act requires that the State and Area Agencies on Aging establish an advisory council to further the mission of developing and coordinating community-based systems of services for all older individuals in the planning and service area. The Arizona Governor's Advisory Council on Aging was established in 1980 to provide a forum for discussion of aging issues and to advise the Governor, the Legislature and state agencies on issues relating to the senior population in Arizona. The Council is composed of 15 members appointed by the Governor who serve three-year terms and represent the geographic and ethnic diversity of Arizona.

A.R.S. § 46-183	<u>Advisory Council on Aging; members; appointment; terms; compensation; officers; subcommittee</u>
A.R.S. § 46-184	<u>Advisory Council duties</u>

Full text of the aforementioned Arizona Revised Statutes may be accessed at Arizona State Legislature Online at <http://www.azleg.state.az.us/>.

Division of Aging & Adult Services (DAAS)
Central Office Organizational Chart

ASSISTANT DIRECTOR
REX CRITCHFIELD, ACTING
 (ADE00A320AHO-E4)
 [ADE000023AHO-AUN0556-E4 NEW AD #]

VACANT
 DE E S BUREAU CHF III
 ADE007178AHO-AUN5173-24

EXECUTIVE STAFF ASSISTANT
Anna M. Mendoza
 ADE006549AHN-AUN05213-20

VACANT
 Administrative Secretary III
 ADE007184AAN-ACV31213-14

ADMINISTRATIVE ASSIST III
Patricia Talcott
 ADE008378AAN-ACV73123-17

VACANT 12.2.05
 Prog & Proj Spec II
 ADE004768AAN-ACV73115-19
 Admin Support

Human Resources Admin.
 Ben Levine

FINANCE & BUSINESS OPERATIONS
Bryon Winston
 DE Social Service Admr III
 ADE001590AHO-Gr 22

REFUGEE RESETTLEMENT
Charles Shipman
 DE Social Service Admr III
 ADE001564AHO-AUN06924-22

ELDER RIGHTS SERVICES
Robin Jordan
 DE Social Service Admr III
 ADE008383AHO-AUN06924-22

INDEPENDENT LIVING SUPPORT
Lynn Larson
 DE Social Service Admr III
 ADE006657AHO-AUN06924-22

ADULT PROTECTIVE SERVICES
Tina Dannenfels
 E.S. District Program Mgr II
 ADE001575AAE-ACV73185-22

PERSONNEL
Fred Verdugo
 Pers. Analyst III
 ADE00K976AAN-ACV74643-20

ADMIN SUPPORT PAYROLL/SUPPLIES
Shirleen Harvey
 Info. Processing Spec. II
 ADE006703AAN-ACV31102-12

Ken Graham
 Prog & Proj Spec II
 ADE00D875AAE-ACV73115-19 (PT)

AZ LINKS PROGRAM
Allie Masters
 Executive Consultant
 ADE001581AJO-ACV73301-20

LTC Direct Care Wkforce Spec
Jutta Ulrich
 Human Svc Prg Dev Spt
 ADE001587AAN-ACV73301-20

ADMIN. SUPPORT - PERSONNEL
Marcela Uribe
 Administrative Sec (Personnel)
 ADE003234AAN-ACV31212-13

PERSONNEL TECH.
Linda Martinez
 ADE00L375AAN - ACV32305-16

Fiscal Services Unit Supervisor
VACANT (TB reclassified ASO I)
 ADE008036AAE-ACV76211-19

Bonnie Wood
 Prog & Proj Spec II
 ADE00D875AAE-ACV73115-19

SHIP/SENIOR PATROL
Ada Leach
 Prog & Proj Spec II (SHIP/Sr. Patrol)
 ADE001585AAN-ACV73115-19

QUALITY ASSURANCE
John Kinkel
 Prog & Proj Spec II
 ADE001562AAN-ACV73115-19

District 1 - VACANT 6.10.06
 E.S. District Program Mgr I
 ADE008652AAE-ACV73184-21

Jerry Lay
 Contracts Mgmt Spec III
 ADE005347AAE-ACV80123-20

Maria Perez
 Admin Assistant II
 ADE009253AAN-ACV73122-15

FOSTER GRANDPARENTS PROGRAM
Mary Weston
 Foster Grandparent Prog Coor
 ADE003886AAN-ACV80229-18

CAREGIVER PROGRAM
David Besst
 Prog & Proj Spec II
 ADE00H105AAN-ACV73115-19

District 2 - Sharon Baylor
 E.S. District Program Mgr I
 ADE008653AAE-ACV73184-21

VACANT
 Contracts Mgmt Spec III
 ADE005662AAE-ACV80123-20

RMAP VACANT
 Prog Svcs Evaluator III
 ADE004103AAN-ACV38822-16

VACANT 8/26/05
 Being reclassified - 17
 Admin Assist. II (ADRC/SHIP)
 ADE00D847AAN-ACV73122-15

MATURE WORKER PROGRAM
Joel Millman
 Hum Svc Prog Dev Spec
 ADE00C324AAN-ACV80001-20

District 3 - Richard Grady
 E.S. District Program Mgr I
 ADE007713AAE-ACV73184-21

VACANT
 Contracts Mgmt Spec III
 ADE007205AAE-ACV8023-20

RMAP Christine A. Davis
 Claims Spec II
 ADE004105BAN-ACV32115-15

BENEFITS CHECK-UP (Phx)
Mike Connolly
 DE P&P Spec II
 ADE001599AHN-19

VACANT
 Prog & Proj Spec II
 ADE00H295AAN-ACV73115-19

District 4 - Karen Starkey
 E.S. District Program Mgr I
 ADE007710AAE-ACV73184-21

Jim Myers
 Contracts Mgmt Spec III
 ADE007502AAE-ACV80123

RMAP Rosemary Middleton
 Prog Svcs Evaluator III
 ADE004103AAN-ACV38822-16

BENEFITS CHECK-UP (Tuc)
VACANT
 DE P&P Spec II
 ADE001598AHN-19

NUTRITION & WELLNESS PROGRAM
Diana Toussaint
 Prog & Proj Spec II
 ADE00D970AAE-ACV73115-19

District 5 - Dennis Stevenson
 E.S. District Program Mgr I
 ADE007712AAE-ACV73184-21

VACANT
 Contracts Mgmt Spec II
 ADE0008381AAN-ACV80122-19

VACANT
 Admin Secretary I
 ADE004132AAN-ACV31211-12

ADMIN. SUPPORT
Theresa Wonnacott
 ADE009122AAN-ACV73122-15

VACANT
 Prog & Proj Spec. I
 ADE00B808AAN-ACV73114-18

District 6 - Ronald Williams
 E.S. District Program Mgr I
 ADE007706AAE-ACV73184-21

VACANT
 Secretary
 ADE009119AAN-ACV31206-11

VACANT
 Admin Secretary I
 ADE004132AAN-ACV31211-12

VACANT
 Social Service Admin. II
 ADE00B716AAE-ACV78780-20

VACANT
 Prog & Proj Spec. I
 ADE00B808AAN-ACV73114-18

APS OPERATIONS MANAGER
Mario Gonzales
 E.S. District Program Mgr I
 ADE001579AAE-ACV73184-21

Bridget Casey
 DE Admin Svcs Ofcr II
 ADE001580AAE-ACV73152-21

VACANT
 Admin Secretary I
 ADE004132AAN-ACV31211-12

ELDER RIGHTS SPECIALIST
Greta Mang
 DE Social Service Admr II
 ADE00L377AHO-AUN04013AUN-21

APS CENTRAL INTAKE
Vacant
 HSUS
 ADE00D444AAE-ACV78715-19

REDACTOR
Jeremy Douglas
 Prog & Proj Spec I
 ADE00L374AAN-ACV73114-18

VACANT (Scott Mitchell - temp)
 Fiscal Svcs Spec I (TB reclassified)
 ADE006099AAN-ACV76201-15

John Desenberg
 Acctg Tech I
 ADE002662AAN-ACV32002-12

OMBUDSMAN PROGRAM
Robert Nixon
 Prog & Proj Spec II
 ADE007470AAN-ACV73115-19

TBE - EXPERT WITNESS
(On Hold)
 Hum Svc Prog Dev Spec
 ADE00L378AAN-ACV80001-20

TRAINER OFFICER II
VACANT
 Prog & Proj Spec
 ADE00L379AAN-ACV73622-20

VACANT
 Acctg Tech II
 ADE008074AAN-ACV32002-13

Listing of Area Agencies on Aging and Adult Protective Services Offices

ARIZONA AREA AGENCIES ON AGING

<p>REGION I (Maricopa County) Area Agency on Aging, Region One, Inc. 1366 East Thomas Road, Suite 108 Phoenix, Arizona 85014 602.264.2255 602.230.9132 Fax www.aaaphx.org</p>	<p>REGION V (Pinal-Gila County) Area Agency on Aging, Region V Pinal-Gila Council for Senior Citizens 8969 W. McCartney Rd Casa Grande, Arizona 85222-1704 520.836.2758 520.421.2033 Fax www.pgcsc.org</p>
<p>REGION II (Pima County) Area Agency on Aging, Region II Pima Council on Aging 8467 East Broadway Blvd Tucson, Arizona 85710-4009 520.790.0504 520.790.7577 Fax www.pcoa.org</p>	<p>REGION VI (Cochise, Graham, Greenlee & Santa Cruz Counties) Area Agency on Aging, Region VI SouthEastern AZ Governments Organization 118 Arizona Street Bisbee, Arizona 85603 520.432.5301 520.432.5858 Fax www.seago.org</p>
<p>REGION III (Apache, Coconino, Navajo & Yavapai Counties) Area Agency on Aging, Region III Northern AZ Council of Governments 119 E. Aspen Avenue Flagstaff, Arizona 86001-5296 928.774.1895 928.214.7235 Fax www.nacog.org/aging/</p>	<p>REGION VII (Navajo Nation) Navajo Area Agency on Aging, Region VII P.O. Box Drawer 1390 Window Rock, Arizona 86515 928.871.6868 928.871.6783 928.871.6793 Fax</p>
<p>REGION IV (La Paz, Mohave & Yuma Counties) Area Agency on Aging, Region IV Western AZ Council of Governments 224 S. 3rd Avenue Yuma, Arizona 85364 928.782.1886 928.329.4248 Fax www.wacog.com/AAAbrochure.asp</p>	<p>REGION VIII (Inter-Tribal Council on Arizona) Area Agency on Aging, Region VIII Inter-Tribal Council of Arizona, Inc. 2214 N. Central #100 Phoenix, Arizona 85004 602.258.4822 602.258.ITCA 602.258.4825 Fax www.itcaonline.com/program_aging.html</p>

ADULT PROTECTIVE SERVICES OFFICES

2066 W. Apache Trail
Suite 108
Apache Junction, AZ.
85219
Site code 515 C-5
Ph. # 480-983-0426

207 Bisbee Road
Bisbee, AZ. 85603
Site Code 611 C-5
Ph. # 520-432-2284

401 N. Marshall St.
Casa Grande, AZ. 85222
Site Code 512 C-5
Ph. #520-426-3529

401 N. Marshall St.
Casa Grande, AZ. 85222
Site Code 512 C-5
Ph. #520-426-3529

1155 N. Arizona Blvd.
Coolidge, AZ. 85228
Site Code 513 C –5
Ph. # 520-723-5351

1140 F. Ave.
Douglas, AZ. 85607
Site Code 613 C-5
Ph. # 520-364-4446

1122 N. 7th St. Ste 205
Phoenix, AZ 85006
Site Code 110 C-5
Ph. # 602-255-0996

1122 N. 7th St. Ste 205
Phoenix, AZ 85006
Site Code 110 C-5
Ph. # 602-255-0996

5800 W. Glenn Dr. Ste.
200
Glendale, AZ 85301
Site Code 146 C-5
Ph. # 623-931-5006

153 Vista Dr.
Holbrook, AZ 86025
Site Code 331 C-5
Ph. # 928-524-3451

232 London Bridge Rd.
Lake Havasu, AZ 86043
Site Code 421 C-5
Ph. # 928-680-6002

549 West 4th St.
Benson, AZ 85602
Site Code 616 C-5
Ph. # 520-586-7830

2601 S. Highway 95
Bullhead City, AZ
86442
Site Code 415 C-5
Ph. #928-763-8388

300 N. Coronado Blvd.
Clifton, AZ 85533
Site Code 636 C-5
Ph. # 928-865-4131

1645 E. Cottonwood St.
Cottonwood, AZ 86326
Site Code 344 C-5
Ph. # 928-634-7561

397 Malpais Lane
Flagstaff, AZ 86001
Site Code 310 A
Ph. # 928-779-6141

605 So. 7th St.
Globe, AZ 85501
Site Code 521 C-5
Ph. # 928-425-3101

519 E. Beale St.
Kingman, AZ 86402
Site Code 402 C-5
Ph. # 928-753-5040

228 Main St.
Mammoth, AZ 85618
Site Code 526 C-5
Ph. # 520-487-2311

2222 S. Dobson Bldg 10
Mesa, AZ 85202
Site Code 108 C-5
Ph. # 480-345-1708

1032 Hopi Ave.
Parker, AZ 85334
Site Code 422 C-5
Ph. # 928-669-8399

1939 Thatcher Blvd.
Safford, AZ 85546
Site Code 631 C-5
Ph. #928-428-7702

2981 E. Tacoma St.
Sierra Vista, AZ 85635
Site Code 641 C-5
Ph. # 520-459-1859

3131 N. Country Club,
Ste 206
Tucson, AZ 85712
Site Code 201 C-5
Ph. # 520-881-4066

319 E. 3rd St.
Winslow, AZ 86047
Site Code 335 C-5
Ph. # 928-289-2090

480 N. Grand Ave.
Nogales, AZ 85621
Site Code 643 C-5
Ph. # 520-287-6551

122 E. Hwy 260 Ste 110
Payson, AZ 85541
Site Code 525 C-5
Ph. # 928-474-4521

843 Miller Valley Rd.
Prescott, Az 86301
Site Code 342 C-5
Ph. #928-776-8537

40 So. 11th St.
Show Low, AZ 85901
Site Code 336 C-5
Ph. # 928-537-1743

395 S. Washington St.
St. Johns, AZ 85939
Site Code 326 C-5
Ph. # 928-337-2005

256 S. Curtis Ave.
Willcox, AZ 85643
Site Code 631 C-5
Ph. # 520-384-3505

1220 So. 4th Ave.
Yuma, AZ 85364
Site Code 434 C-5
Ph. # 928-782-9255

Central Intake Unit
4201 N. 16th St.
Ste 280
Phoenix, AZ 85016
Site Code: 164 C-5
Ph. # 602-542-8602

Section IV. Financial Structure

STATE AGENCY OPERATING BUDGET FOR SFY 2008 Funds Used for the Division of Aging and Adult Services			
	Title III	Other	Total Agency
Title III: State Administration	\$1,058,182.00	\$ -	\$1,058,182.00
Other Older Americans Act Funds (Title V - DOL)	\$ -	\$ 62,822.00	\$ 62,822.00
Other Funds (SSBG, FGP, SHIP, SENIOR PATROL)	\$ -	\$ 1,412,161.00	\$1,412,161.00
State	\$ 352,727.00	\$ 3,294,373.00	\$3,647,100.00
TOTAL	\$1,410,909.00	\$ 4,769,356.00	\$6,180,265.00

Legend

Title V = Senior Community Services Employment Program
 SSBG = Social Services Block Grants
 FGP = Foster Grandparent Program
 SHIP = State Health Insurance Assistance Program

Older Americans Act budgets for federal fiscal years 2009 and 2010 will be developed on an annual basis.

Arizona Planning and Service Areas

Region I: Maricopa County
 Region II: Pima County
 Region III: Apache, Coconino, Navajo, Yavapai Counties
 Region IV: La Paz, Mohave, Yuma Counties
 Region V: Gila, Pinal Counties
 Region VI: Cochise, Graham, Greenlee, Santa Cruz Counties
 Region VII: Navajo Interstate Planning and Service Area
 Region VIII: Intertribal Council of Arizona: Ak Chin, Cocopah, Colorado River, Fort McDowell, Fort Mohave, Gila River, Havasupai, Hopi, Hualapai, Kaibab-Paiute, Quechan, Pascua Yaqui, Salt River, San Carlos, San Juan Southern Paiute, Tohono O’odham, Tonto Apache, White Mountain Apache, Yavapai-Apache, and Yavapai-Prescott Reservations.

Program Allocation by Planning and Service Areas

CONTRACT OPERATING BUDGET
By Planning and Service Area (Regions) for Fiscal Year 2008

Planning and Service Area	* Title III & VII	** Title III - E	*** Other Federal & State	**** Title V	Total Agency
PSA I	\$ 7,486,893.00	\$ 1,235,892.00	\$ 10,325,477.00	\$ 544,165.00	\$ 19,592,427.00
PSA II	\$ 2,674,546.00	\$ 428,931.00	\$ 4,883,495.00	\$ 126,087.00	\$ 8,113,059.00
PSA III	\$ 1,456,720.00	\$ 223,031.00	\$ 2,301,249.00	\$ 212,357.00	\$ 4,193,357.00
PSA IV	\$ 1,596,209.00	\$ 247,341.00	\$ 2,092,993.00	\$ 92,906.00	\$ 4,029,449.00
PSA V	\$ 1,096,743.00	\$ 163,807.00	\$ 1,696,655.00	\$ 92,906.00	\$ 3,050,111.00
PSA VI	\$ 875,310.00	\$ 126,810.00	\$ 1,697,623.00	\$ -	\$ 2,699,743.00
PSA VII	\$ 1,071,878.00	\$ 159,108.00	\$ 674,010.00	\$ -	\$ 1,904,996.00
PSA VIII	\$ 1,337,014.00	\$ 204,844.00	\$ 443,738.00	\$ -	\$ 1,985,596.00
STATE TOTAL	\$ 17,595,313.00	\$ 2,789,764.00	\$ 24,115,240.00	\$1,068,421.00	\$ 45,568,738.00

* Does not include III-E (Family Caregiver Support Program), includes Funds for Administration.

** Includes Title III-E (Family Caregiver Support Program) Administration Funds.

*** Assumes level state funds.

**** Title V budget for PSA IV goes to Mohave County - all other funding goes to WACOG.

Older Americans Act budgets for federal fiscal years 2009 and 2010 will be developed on an annual basis.

Intrastate Funding Formula and Budget

Data elements are used in the Arizona Intrastate Funding Formula

- 2000 U.S. Census figures for the Arizona population 60 years of age or older.
- Population 60+ by county is then broken down into Non-Minority and Minority categories.
- Within the Non-Minority and Minority categories, population 60+ is then broken down into Above Poverty and Below Poverty categories (poverty is calculated at 100% of Federal Poverty Level).
- Deduct reservation from population 60+ by Non-Minority and Minority and by Above Poverty and Below Poverty (to determine the tribal regional breakout).
- Data then put into planning and service area (regional) breakout with (tribal regional breakouts include all applicable counties for Navajo Nation and ITCA which is the difference between the total 60+ population and less reservation).
- Non-reservation, rural population counts for 60+ are separated by county. The counties are then categorized into non-tribal planning and service areas. A percentage is then calculated for each planning and service area that identifies the rural proportion of each planning and service area to the statewide rural 60+ population counts.
- The percentage is applied to the total population (unweighted factors). The result is a rural proportion for each planning and service area, including tribal planning and service areas.
- The rural proportion is then applied to the 8.5% set-aside as the rural factor.

Factors included in the Arizona Intrastate Funding Formula

- Population of 60+ who are non-minority, non-poverty.
- Population of 60+ who are non-minority, poverty.
- Population of 60+ who are minority, non-poverty.
- Population of 60+ who are minority, poverty.
- Population of 60+ who reside in “rural” Arizona.

Weights applied to the Arizona Intrastate Funding Formula

- Weights are applied to the first four factors for the non-tribal Area Agencies on Aging (Regions 1-6):
 - Population of 60+ who are non-minority, non-poverty = 1.00
 - Population of 60+ who are non-minority, poverty = 1.75
 - Population of 60+ who are minority, non-poverty = 1.10
 - Population of 60+ who are minority, poverty = 3.00
- Higher weights are applied to tribal Area Agency on Aging (Navajo = 5.00 and ITCA = 6.00) for the four factors. The ITCA has a higher weight due to the vastness of their geographic coverage.
- A weight is not established for the rural factor. Instead, the rural proportion of each Area Agency on Aging is applied to the 8.5% rural set-aside.

Base funds applied to the Arizona Intrastate Funding Formula

- A minimum administration base of \$60,000 for each Area Agency on Aging.
- A minimum program base of \$50,000 for each Area Agency on Aging.

How is the IFF applied?

The current funding formula only applies to Older Americans Act funds. The funding formula takes into account the distribution of persons age 60 and over, as well as those in greatest social and economic need in each Planning and Service Area (PSA) per the weights described above. The base year is 2005-2006. A minimum program base was maintained at \$50,000 for each PSA. A minimum administration base was maintained at \$60,000 for each PSA. The formula sets aside a rural factor of 8.5% for the rural portions of all PSAs.

When a "Title III and VII Alert" is distributed, it comes with a variety of supporting documents. This includes the National Grant Award (NGA), Title III Formula Allocations, Planning Levels (this is provided in multiple formats), Comparison of Differences between the previous and current Alerts (this is provided in multiple formats), and the Comparison of the Federal Fiscal Year Grant Awards. The following explanation walks through the "Title III Formula Allocations" as identified in the Title III and VII Alert. The "Title III Formula Allocations" document generally appears after the NGA. The explanation is for the shaded section of the document.

- **Available Federal:** Begins with the available Federal funds – $\frac{1}{4}$ is taken from the prior federal fiscal year and $\frac{3}{4}$ from the current federal fiscal year separated by Older Americans Act Titles. The current year is an estimated amount.
- **Navajo Transfer:** Add the Navajo Transfer to the available federal funds. This is also known as the Interstate Transfer and is applicable to the Navajo Nation. This transfer is taken from New Mexico and Utah and reflects the allotment transferred to Arizona for administering an interstate plan and service area.
- **Total Available:** Identifies the total Federal funds available.
- **Less 1% Ombuds:** Deduct 1% for Ombudsman from the total Federal funds available. This is taken from Title IIIB. The deduction is not included when calculating the AAA Administration.
- **Less State (A & AA) Admin:** Deduct 5% of the total Titles IIIB, C1, C2, D (noted in and paid for out of C1 column) and IIIE (noted under Family Caregiver column) for State (DES) administration.
- **Less 10% AAA Admin:** Deduct 10% for Area Agency on Aging administration from the total Federal funds available less the State administration.
- **Less Navajo Transfer:** Deduct Navajo Transfer.
- **Total Fed Program:** Identifies the total program funds available, excluding funds for State and AAA administration and the Navajo Transfer.
- **State Program Funds:** As of FY 07, we no longer apply the State match to these funds (included Title III-B, C-1, C-2, and III-D in prior years).
- **Total Program:** Identifies the total Federal and State Program funds.

- **Less PSA Base Prog:** Deduct Program Base at \$50,000 per region. This is spread among Titles IIIB, C1, and C2.
- **F2=8.5% Prog Total:** 8.5% of the available total program funds is set aside for the “rural factor”. The rural factor amount is then allocated proportionally to each region based on its share of persons in rural areas within the PSA.
- **F1=Program Balance:** All weighted factors broken out by PSA and proportion applied by PSA. This is taken after the program base and rural factor are applied.
- **AAA Admin Fed:** Taken from “Less 10% AAA Admin” above. This is noted in C1 and Family Caregiver columns.
- **AAA Admin State:** As of FY 07, we no longer apply the State match to these funds (included Title III- C1 and Family Caregiver in prior years).
- **AAA Admin Base:** Deduct the administration base at \$60,000 per PSA.
- **AAA Admin Balance:** Identifies the total AAA Administration balance. This is noted in C1 and Family Caregiver columns. F1 percentage is applied.

What was the funding impact across the state?

Region	1990	2000	Gain/Loss
Region I (Maricopa)	\$9,012,837	\$8,781,460	-2.6%
Region II (Pima)	\$3,291,606	\$3,121,292	-5.2%
Region III (Apache, Coconino, Navajo, Yavapai)	\$1,633,278	\$1,681,174	2.9%
Region IV (Mohave, La Paz, Yuma)	\$1,567,306	\$1,849,448	18%
Region V (Pinal, Gila)	\$1,159,547	\$1,263,000	8.9%
Region VI (Cochise, Graham, Greenlee, Sierra Vista)	\$1,077,363	\$1,003,169	-6.9%
Region VII (Navajo Nation)	\$1,252,567	\$1,278,129	2%
Region VIII (Inter Tribal Council of Arizona)	\$1,532,188	\$1,549,020	1.1%

Elicited public comments

Two public comment sessions were held. The first session occurred April 7, 2006 in conjunction with the Governor's Advisory Council on Aging's full committee meeting. Approximately 20 people were present, most of whom were committee members representing various counties throughout Arizona. Comments included the suggestion to review and revise the funding formula more frequently and preparing for the 2010 Census so that older adults are well represented. Members requested additional information on the use of the 2000 Census as opposed to using more current projections and/or estimates. It was explained that the Area Agencies felt most comfortable using the 2000 Census; it was the best information available and that projections may result in larger cuts to some. A second session occurred April 25, 2006 in conjunction with the Planning Project Meeting at the Area Agency on Aging, Region One, Inc. In addition to representatives from seven Area Agencies on Aging, two attendees from Project PPEP (Portable Practical Educational Preparation) participated in the public comment meeting. Comments included the recognition of a decrease in the funds to Maricopa and Pima counties although there was an increase in the population 60+ for those two counties. Area Agency on Aging, Region One explained that the population has shifted and that Western Arizona realized the largest growth. It was explained that all areas experienced an increase in the population, but that the population shifted in such a way that the higher weights applied to the factors of minority/poverty and non-minority/poverty had a greater impact. Pima Council on Aging commented by supporting the adoption of the formula. Inter-Tribal Council of Arizona expressed the vastness of their planning and service area in serving tribes that are throughout Arizona.

Section V. Appendices

Appendix A: State Plan Assurances and Required Activities Older Americans Act As Amended in 2006

By signing this document, the authorized official commits the State Agency on Aging to performing all listed assurances and required activities.

ASSURANCES

Sec. 305(a) - (c), ORGANIZATION

(a)(2)(A) The State agency shall, except as provided in subsection (b)(5), designate for each such area (planning and service area) after consideration of the views offered by the unit or units of general purpose local government in such area, a public or private nonprofit agency or organization as the area agency on aging for such area.

(a)(2)(B) The State agency shall provide assurances, satisfactory to the Assistant Secretary, that the State agency will take into account, in connection with matters of general policy arising in the development and administration of the State plan for any fiscal year, the views of recipients of supportive services or nutrition services, or individuals using multipurpose senior centers provided under such plan.

(a)(2)(E) The State agency shall provide assurance that preference will be given to providing services to older individuals with greatest economic need and older individuals with greatest social need, (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) and include proposed methods of carrying out the preference in the State plan;

(a)(2)(F) The State agency shall provide assurances that the State agency will require use of outreach efforts described in section 307(a)(16).

(a)(2)(G)(ii) The State agency shall provide an assurance that the State agency will undertake specific program development, advocacy, and outreach efforts focused on the needs of low-income minority older individuals and older individuals residing in rural areas.

(c)(5) In the case of a State specified in subsection (b)(5), the State agency and area agencies shall provide assurance, determined adequate by the State agency, that the area agency on aging will have the ability to develop an area plan and to carry out, directly or through contractual or other arrangements, a program in accordance with the plan within the planning and service area.

States must assure that the following assurances (Section 306) will be met by its designated area agencies on agencies, or by the State in the case of single planning and service area states.

Sec. 306(a), AREA PLANS

(2) Each area agency on aging shall provide assurances that an adequate proportion, as required under section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services:

(A) services associated with access to services (transportation, health services (including mental health services), outreach, information and assistance (which may include information and assistance to consumers on availability of services under part B and how to receive benefits under and participate in publicly supported programs for which the consumer may be eligible), and case management services); (B) in-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and

(C) legal assistance; and assurances that the area agency on aging will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded.

(4)(A)(i)(I) provide assurances that the area agency on aging will:

(aa) set specific objectives, consistent with State policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement;

(bb) include specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas; and

(II) include proposed methods to achieve the objectives described in items (aa) and (bb) of subclause (I);

(ii) provide assurances that the area agency on aging will include in each agreement made with a provider of any service under this title, a requirement that such provider will:

(I) specify how the provider intends to satisfy 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;

(II) to the maximum extent feasible, provide services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in accordance with their need for such services; and

(III) meet specific objectives established by the area agency on aging, for providing services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas within the planning and service area; and

(4)(A)(iii) With respect to the fiscal year preceding the fiscal year for which such plan is prepared, each area agency on aging shall:

(I) identify the number of low-income minority older individuals and older individuals residing in rural areas in the planning and service area;

(II) describe the methods used to satisfy the service needs of such minority older individuals; and

(III) provide information on the extent to which the area agency on aging met the objectives described in clause (a)(4)(A)(i).

(4)(B)(i) Each area agency on aging shall provide assurances that the area agency on aging will use outreach efforts that will identify individuals eligible for assistance under this Act, with special emphasis on:

(I) older individuals residing in rural areas;

(II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(IV) older individuals with severe disabilities;

(V) older individuals with limited English proficiency;

(VI) older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and

(VII) older individuals at risk for institutional placement; and

(4)(C) Each area agency on agency shall provide assurance that the area agency on aging will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas.

(5) Each area agency on aging shall provide assurances that the area agency on aging will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and individuals at risk for institutional placement, with agencies that develop or provide services for individuals with disabilities.

(6)(F) Each area agency will:

in coordination with the State agency and with the State agency responsible for mental health services, increase public awareness of mental health disorders, remove barriers to diagnosis and treatment, and coordinate mental health services (including mental health screenings) provided with funds expended by the area agency on aging with mental health services provided by community health centers and by other public agencies and nonprofit private organizations;

(9) Each area agency on aging shall provide assurances that the area agency on aging, in carrying out the State Long-Term Care Ombudsman program under section 307(a)(9), will expend not less than the total amount of funds appropriated under this

Act and expended by the agency in fiscal year 2000 in carrying out such a program under this title.

(11) Each area agency on aging shall provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including:

(A) information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the area agency on aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;

(B) an assurance that the area agency on aging will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and

(C) an assurance that the area agency on aging will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.

(13)(A) Each area agency on aging shall provide assurances that the area agency on aging will maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships.

(13)(B) Each area agency on aging shall provide assurances that the area agency on aging will disclose to the Assistant Secretary and the State agency:

(i) the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and

(ii) the nature of such contract or such relationship.

(13)(C) Each area agency on aging shall provide assurances that the area agency will demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such non-governmental contracts or such commercial relationships.

(13)(D) Each area agency on aging shall provide assurances that the area agency will demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such non-governmental contracts or commercial relationships.

(13)(E) Each area agency on aging shall provide assurances that the area agency will, on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals.

(14) Each area agency on aging shall provide assurances that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred

by the area agency on aging to carry out a contract or commercial relationship that is not carried out to implement this title.

(15) provide assurances that funds received under this title will be used;

(A) to provide benefits and services to older individuals, giving priority to older individuals identified in paragraph (4)(A)(i); and

(B) in compliance with the assurances specified in paragraph (13) and the limitations specified in section 212;

Sec. 307, STATE PLANS

(7)(A) The plan shall provide satisfactory assurance that such fiscal control and fund accounting procedures will be adopted as may be necessary to assure proper disbursement of, and accounting for, Federal funds paid under this title to the State, including any such funds paid to the recipients of a grant or contract.

(7)(B) The plan shall provide assurances that:

(i) no individual (appointed or otherwise) involved in the designation of the State agency or an area agency on aging, or in the designation of the head of any subdivision of the State agency or of an area agency on aging, is subject to a conflict of interest prohibited under this Act;

(ii) no officer, employee, or other representative of the State agency or an area agency on aging is subject to a conflict of interest prohibited under this Act; and

(iii) mechanisms are in place to identify and remove conflicts of interest prohibited under this Act.

(9) The plan shall provide assurances that the State agency will carry out, through the Office of the State Long-Term Care Ombudsman, a State Long-Term Care Ombudsman program in accordance with section 712 and this title, and will expend for such purpose an amount that is not less than an amount expended by the State agency with funds received under this title for fiscal year 2000, and an amount that is not less than the amount expended by the State agency with funds received under title VII for fiscal year 2000.

(10) The plan shall provide assurance that the special needs of older individuals residing in rural areas will be taken into consideration and shall describe how those needs have been met and describe how funds have been allocated to meet those needs.

(11)(A) The plan shall provide assurances that area agencies on aging will:

(i) enter into contracts with providers of legal assistance which can demonstrate the experience or capacity to deliver legal assistance;

(ii) include in any such contract provisions to assure that any recipient of funds under division (A) will be subject to specific restrictions and regulations promulgated under the Legal Services Corporation Act (other than restrictions and regulations governing

eligibility for legal assistance under such Act and governing membership of local governing boards) as determined appropriate by the Assistant Secretary; and
(iii) attempt to involve the private bar in legal assistance activities authorized under this title, including groups within the private bar furnishing services to older individuals on a pro bono and reduced fee basis.

(11)(B) The plan contains assurances that no legal assistance will be furnished unless the grantee administers a program designed to provide legal assistance to older individuals with social or economic need and has agreed, if the grantee is not a Legal Services Corporation project grantee, to coordinate its services with existing Legal Services Corporation projects in the planning and service area in order to concentrate the use of funds provided under this title on individuals with the greatest such need; and the area agency on aging makes a finding, after assessment, pursuant to standards for service promulgated by the Assistant Secretary, that any grantee selected is the entity best able to provide the particular services.

(11)(D) The plan contains assurances, to the extent practicable, that legal assistance furnished under the plan will be in addition to any legal assistance for older individuals being furnished with funds from sources other than this Act and that reasonable efforts will be made to maintain existing levels of legal assistance for older individuals;

(11)(E) The plan contains assurances that area agencies on aging will give priority to legal assistance related to income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect, and age discrimination.

(12) The plan shall provide, whenever the State desires to provide for a fiscal year for services for the prevention of abuse of older individuals, the plan contains assurances that any area agency on aging carrying out such services will conduct a program consistent with relevant State law and coordinated with existing State adult protective service activities for--

(A) public education to identify and prevent abuse of older individuals;

(B) receipt of reports of abuse of older individuals;

(C) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance where appropriate and consented to by the parties to be referred; and

(D) referral of complaints to law enforcement or public protective service agencies where appropriate.

(13) The plan shall provide assurances that each State will assign personnel (one of whom shall be known as a legal assistance developer) to provide State leadership in developing legal assistance programs for older individuals throughout the State.

(14) The plan shall, with respect to the fiscal year preceding the fiscal year for which such plan is prepared:

(A) identify the number of low-income minority older individuals in the State, including the number of low income minority older individuals with limited English proficiency; and
(B) describe the methods used to satisfy the service needs of the low-income minority older individuals described in subparagraph (A), including the plan to meet the needs of low-income minority older individuals with limited English proficiency.

(15) The plan shall provide assurances that, if a substantial number of the older individuals residing in any planning and service area in the State are of limited English-speaking ability, then the State will require the area agency on aging for each such planning and service area:

(A) to utilize in the delivery of outreach services under section 306(a)(2)(A), the services of workers who are fluent in the language spoken by a predominant number of such older individuals who are of limited English-speaking ability; and

(B) to designate an individual employed by the area agency on aging, or available to such area agency on aging on a full-time basis, whose responsibilities will include--

(i) taking such action as may be appropriate to assure that counseling assistance is made available to such older individuals who are of limited English-speaking ability in order to assist such older individuals in participating in programs and receiving assistance under this Act; and

(ii) providing guidance to individuals engaged in the delivery of supportive services under the area plan involved to enable such individuals to be aware of cultural sensitivities and to take into account effectively linguistic and cultural differences.

(16) The plan shall provide assurances that the State agency will require outreach efforts that will:

(A) identify individuals eligible for assistance under this Act, with special emphasis on:

(i) older individuals residing in rural areas;

(ii) older individuals with greatest economic need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas;

(iii) older individuals with greatest social need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas;

(iv) older individuals with severe disabilities;

(v) older individuals with limited English-speaking ability; and

(vi) older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and

(B) inform the older individuals referred to in clauses (i) through (vi) of subparagraph (A), and the caretakers of such individuals, of the availability of such assistance.

(17) The plan shall provide, with respect to the needs of older individuals with severe disabilities, assurances that the State will coordinate planning, identification, assessment of needs, and service for older individuals with disabilities with particular attention to individuals with severe disabilities with the State agencies with primary responsibility for individuals with disabilities, including severe disabilities, to enhance

services and develop collaborative programs, where appropriate, to meet the needs of older individuals with disabilities.

(18) The plan shall provide assurances that area agencies on aging will conduct efforts to facilitate the coordination of community-based, long-term care services, pursuant to section 306(a)(7), for older individuals who:

- (A) reside at home and are at risk of institutionalization because of limitations on their ability to function independently;
- (B) are patients in hospitals and are at risk of prolonged institutionalization; or
- (C) are patients in long-term care facilities, but who can return to their homes if community-based services are provided to them.

(19) The plan shall include the assurances and description required by section 705(a).

(20) The plan shall provide assurances that special efforts will be made to provide technical assistance to minority providers of services.

(21) The plan shall:

- (A) provide an assurance that the State agency will coordinate programs under this title and programs under title VI, if applicable; and
- (B) provide an assurance that the State agency will pursue activities to increase access by older individuals who are Native Americans to all aging programs and benefits provided by the agency, including programs and benefits provided under this title, if applicable, and specify the ways in which the State agency intends to implement the activities.

(22) If case management services are offered to provide access to supportive services, the plan shall provide that the State agency shall ensure compliance with the requirements specified in section 306(a)(8).

(23) The plan shall provide assurances that demonstrable efforts will be made:

- (A) to coordinate services provided under this Act with other State services that benefit older individuals; and
- (B) to provide multigenerational activities, such as opportunities for older individuals to serve as mentors or advisers in child care, youth day care, educational assistance, at-risk youth intervention, juvenile delinquency treatment, and family support programs.

(24) The plan shall provide assurances that the State will coordinate public services within the State to assist older individuals to obtain transportation services associated with access to services provided under this title, to services under title VI, to comprehensive counseling services, and to legal assistance.

(25) The plan shall include assurances that the State has in effect a mechanism to provide for quality in the provision of in-home services under this title.

(26) The plan shall provide assurances that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the State agency or an area agency on aging to carry out a contract or commercial relationship that is not carried out to implement this title.

(27) The plan shall provide assurances that area agencies on aging will provide, to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care.

Sec. 308, PLANNING, COORDINATION, EVALUATION, AND ADMINISTRATION OF STATE PLANS

(b)(3)(E) No application by a State under subparagraph (b)(3)(A) shall be approved unless it contains assurances that no amounts received by the State under this paragraph will be used to hire any individual to fill a job opening created by the action of the State in laying off or terminating the employment of any regular employee not supported under this Act in anticipation of filling the vacancy so created by hiring an employee to be supported through use of amounts received under this paragraph.

Sec. 705, ADDITIONAL STATE PLAN REQUIREMENTS (as numbered in statute)

(1) The State plan shall provide an assurance that the State, in carrying out any chapter of this subtitle for which the State receives funding under this subtitle, will establish programs in accordance with the requirements of the chapter and this chapter.

(2) The State plan shall provide an assurance that the State will hold public hearings, and use other means, to obtain the views of older individuals, area agencies on aging, recipients of grants under title VI, and other interested persons and entities regarding programs carried out under this subtitle.

(3) The State plan shall provide an assurance that the State, in consultation with area agencies on aging, will identify and prioritize statewide activities aimed at ensuring that older individuals have access to, and assistance in securing and maintaining, benefits and rights.

(4) The State plan shall provide an assurance that the State will use funds made available under this subtitle for a chapter in addition to, and will not supplant, any funds that are expended under any Federal or State law in existence on the day before the date of the enactment of this subtitle, to carry out each of the vulnerable elder rights protection activities described in the chapter.

(5) The State plan shall provide an assurance that the State will place no restrictions, other than the requirements referred to in clauses (i) through (iv) of section 712(a)(5)(C), on the eligibility of entities for designation as local Ombudsman entities under section 712(a)(5).

(6) The State plan shall provide an assurance that, with respect to programs for the prevention of elder abuse, neglect, and exploitation under chapter 3:

(A) in carrying out such programs the State agency will conduct a program of services consistent with relevant State law and coordinated with existing State adult protective service activities for:

(i) public education to identify and prevent elder abuse;

(ii) receipt of reports of elder abuse;

(iii) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance if appropriate and if the individuals to be referred consent; and

(iv) referral of complaints to law enforcement or public protective service agencies if appropriate;

(B) the State will not permit involuntary or coerced participation in the program of services described in subparagraph (A) by alleged victims, abusers, or their households; and

(C) all information gathered in the course of receiving reports and making referrals shall remain confidential except:

(i) if all parties to such complaint consent in writing to the release of such information;

(ii) if the release of such information is to a law enforcement agency, public protective service agency, licensing or certification agency, ombudsman program, or protection or advocacy system; or

(iii) upon court order.

REQUIRED ACTIVITIES

Sec. 307(a) STATE PLANS

(1)(A)The State Agency requires each area agency on aging designated under section 305(a)(2)(A) to develop and submit to the State agency for approval, in accordance with a uniform format developed by the State agency, an area plan meeting the requirements of section 306; and

(B) The State plan is based on such area plans.

Note: THIS SUBSECTION OF STATUTE DOES NOT REQUIRE THAT AREA PLANS BE DEVELOPED PRIOR TO STATE PLANS AND/OR THAT STATE PLANS DEVELOP AS A COMPILATION OF AREA PLANS.

(2) The State agency:

(A) evaluates, using uniform procedures described in section 202(a)(26), the need for supportive services (including legal assistance pursuant to 307(a)(11), information and assistance, and transportation services), nutrition services, and multipurpose senior centers within the State;

(B) has developed a standardized process to determine the extent to which public or private programs and resources (including Department of Labor Senior Community

Service Employment Program participants, and programs and services of voluntary organizations) have the capacity and actually meet such need;

(4) The plan shall provide that the State agency will conduct periodic evaluations of, and public hearings on, activities and projects carried out in the State under this title and title VII, including evaluations of the effectiveness of services provided to individuals with greatest economic need, greatest social need, or disabilities (with particular attention to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas). *Note: "Periodic" (defined in 45CFR Part 1321.3) means, at a minimum, once each fiscal year.*

(5) The State agency:

(A) affords an opportunity for a public hearing upon request, in accordance with published procedures, to any area agency on aging submitting a plan under this title, to any provider of (or applicant to provide) services;

(B) issues guidelines applicable to grievance procedures required by section 306(a)(10); and

(C) affords an opportunity for a public hearing, upon request, by an area agency on aging, by a provider of (or applicant to provide) services, or by any recipient of services under this title regarding any waiver request, including those under Section 316.

(6) The State agency will make such reports, in such form, and containing such information, as the Assistant Secretary may require, and comply with such requirements as the Assistant Secretary may impose to insure the correctness of such reports.

(8)(A) No supportive services, nutrition services, or in-home services are directly provided by the State agency or an area agency on aging in the State, unless, in the judgment of the State agency:

(i) provision of such services by the State agency or the area agency on aging is necessary to assure an adequate supply of such services;

(ii) such services are directly related to such State agency's or area agency on aging's administrative functions; or

(iii) such services can be provided more economically, and with comparable quality, by such State agency or area agency on aging.

Tracy L. Wareing, Director, DES

Date

Appendix B - Public Forum Schedule

Seven State Plan on Aging public forums were held in conjunction with Local Senior Action Days scheduled at the following locations:

Counties	Date & Time	Location	Attendees
East Valley Maricopa and Pinal (Districts 8, 17, 18, 19, 20, 21, 22, and 23)	February 23, 2007 1-2:30 pm	Mesa Senior Services 247 N. Macdonald Mesa, AZ	65
Yuma, La Paz, Mohave (Districts 3 and 24)	March 16, 2007 10:30–11:30 am	Parker Senior Center 1217 Laguna Parker, AZ	180
North/Northeast Valley of Maricopa County (Districts 6, 7, 8, 10, and 11)	March 23, 2007 1-2:30 pm	Paradise Valley Community Center 17402 N. 40 th St. Phoenix, AZ	140
Central Maricopa County and Pinal (Districts 9, 12, 13, 14, 15, 16, and 23)	March 30, 2007 1-2:30 pm	Avondale City Hall 11465 W. Civic Center Drive Avondale, AZ	40
NW Maricopa, Yavapai County & Flagstaff (Districts 1, 2, and 4)	April 13, 2007 1-2:30 pm	Prescott Community Center 1280 E. Rosser Street Prescott, AZ	175
Apache, Coconino, Gila, Graham, Greenlee & Navajo (Districts 2 and 5)	April 20, 2007 1-2:30 pm	Globe City Hall 150 N. Pine Street Globe, AZ	175
Tucson/Pima, Cochise, Santa Cruz (Districts 25, 26, 27, 28, 29, and 30)	April 27, 2007 1-2:30 pm	El Pueblo Senior Center 101 W. Irvington Tucson, AZ	150
Total			925

**Appendix C: Summary of Public Comments
Collected at the Public Forums on the State Plan on Aging 2008-2010**

Please note: These comments are quoted verbatim.

Goal 1: Make it easier for older Arizonans to access an integrated array of state and aging services.

- Develop One-Stop Resource Centers across the state to facilitate access to information on a variety of aging-related topics, issues, and services. -- AZ Links.
- Implement the Governor's Executive Order 2007-01 - Ensuring Quality in Long-Term Care.
- Utilize State Health Insurance Assistance Program and Benefits CheckUp to expand life options and information on benefits program.
- Promote the development of consumer choices within services.

Comments:

Mesa Senior Services 02/23/07:

- Use media city TV Channels (specific times each day); PBS; Newspapers; Adult Community Newspapers/Flyers.
- One place to consider a One Stop Center would be the family YMCA's. The Mesa Y has several programs for seniors; Silver Sneakers, 55 Alive and other programs where senior's meet.
- Rather than set up new Resource Centers use existing Senior Centers. Obviously existing community TV Channels should be used.
- Educate!, Educate!, Educate!
- Advertise, Advertise!
- Ideas of One Stop Shops (Senior Centers, etc.) is excellent. However, not all age eligible seniors will visit senior centers. Perhaps info should be placed in churches, synagogues, recreation areas of apt/condo complexes. My biggest concern about the total goals package is making it known to all seniors.
- Media – Radio, T.V. Newspapers, Internet, Individual Community Newsletters
- Use "senior " Centers (put it on "Utube") as AZ Links site. Ensure that the "Active Adults" Community Clubhouses/Activities Centers have access to a liaison to point people in the right direction. (Leisure World Centers has senior bulletin board and contact.)
- Expand our thinking to be congruent and consistent with actual social phenomenon such as the change in who is parenting our children, e.g. Many grandparents are raising grandchildren therefore, information and services may be combined at locations traditionally not housed together – such as senior centers and schools where information can be disseminated in ways that take advantage of these changes.
- I thought the general public was to have an opportunity to talk to the legislators about issues they were interested in. This state plan review is another program. It is too structured for general discussion. How about having the first 15 minutes for legislators and then review the plan. Do not bill this forum as "a chance to talk to your legislator" when it is mostly a review to educate the public.

Parker Senior Services 03/16/07:

- Partnering with in-home service agencies/organizations to disseminate information.
- Ads on/in grocery bags

- A T.V. phone bank similar to what Channel 12 does on a variety of public services during a news broadcast.
- Make sure the state uses available funding for all counties for our senior programs that cover more health care for seniors that fall between the cracks. You have to be destitute to get any help at all. Some of us are not destitute, but have no insurance and need medical and dental help and do not have the finances which endangers our health.
- Focus on staffing to meet growing demands. Many DES clients have very limited transportation. Sitting all day at the DES office strains family relationship who provide the transportation.
- Does the office have wheelchair access? One Stop Offices? A book with all offices left at Post Office or library.
- Grandparents raising grandkids-put resource information on food packaging-i.e., bread bags, grocery bags

Paradise Valley Senior Services 03/23/07:

- Need list – available through Area Agency on Aging for callers, etc. of all help sources – transportation respite calls, repairs).
- Have more employees to take care of these services, so that they can get their problems solved in a timely manner.
- Enhance in-home programs by increasing funding for non-profits to address the needs of seniors who have great difficulty leaving their homes.
- Why does one need to die in Arizona in order for his widow to get widows exemption on home taxes? We need dental coverage (repeated several times). Older people need dental care. Does it not seem probable that older people's teeth are in such poor condition they can hardly eat their food.
- Expand Dial A Ride and Reserve A Ride this is an only way for decent transportation. This is the greatest service. Do not cut it.
- How many times do we have to vote for "English Only" before your politicians "get it"??? (And when will it be enforced?). If a person has to be a citizen to vote then why are our ballots printed in "Mexican"? I've worked with people from France, Germany, Switzerland, Africa, Russia, Japan, China, Thailand, the Philippines, Bosnia, etc., etc. and they all had to fill a "quota" to get here-and they all speak English-and they learn it in their schools. Mexico doesn't have compulsory education and most of them are lucky if they finish the 4th grade-so they can't even read and write their own language! I am offended when I see applications for city, state and county jobs which require "bi-lingual skills" – that is so that our government can "enable" them to get driver's licenses, food stamps and the like.-When they say bi-lingual they mean Mexican-no other language.
- Make Vital Records more accessible to the public, i.e., birth certificates. Improvement of paperwork for AHCCCS and food stamps, transportation needs.
- Make it so that older people can get better services from Dial A Ride.
- Why charities who are receiving grants to help people in need to not consider a man and wife as a family if the children are no longer living with them or if there are no children.
- Excellent idea – would this duplicate I & R center? Also, Area Agencies on Aging are information centers.
- When I call a number I would like to hear a live person not a recording.
- The Elder Resource Guide is a wonderful tool and should be made available to seniors at many outlets other than AAA's. How about Senior Centers and Pharmacies?
- Change Dial A Ride and Reserve A Ride
- Love the idea of a One Stop Resource Center

- Executive Order 2007-01 is so critical to protect ALTECs Seniors!
- INCREASE STAFF – for inspections-investigations! (APS)
- Send a clear message that abuse and neglect will NOT be tolerated in Arizona!
- AHCCCS Cost of Living increase. The standard to qualify. Over burdened by ILLEGALS receiving benefits they are NOT entitled to. St Joes Hospital only accepts those under it for DENTAL (What about adult/seniors?) Why kids only?
- Where is the list of agencies alphabetically for us NOT “agencies” for us to talk to counselors!
- Medicare’s IVIG reimbursement – the only thing that will fix this is a legislative fix-please contact your member now! Request the release of two studies that focus on Supply and Medicare Reimbursement for IVIG

Avondale City Hall 3/30/07:

- Yes, especially for the Hispanics that do not speak good English. More information needed in Spanish so that they will understand what they are signing.
- Provide in-person assistance for phone calls, fill out paperwork, decipher paperwork, etc.
- Communicate with and qualify area non-profits to participate on various levels-HOA’s, social service, churches, etc.
- More poverty programs and one-stop facilities.
- More accessible transportation for the elders. More outreach services for the elders if possible. Branch out the agencies for better accessibility.
- Bring the information/resources to the community (libraries, senior centers, Hospitals, etc.
- Outreach workers; persons who can assist with applying, reading, navigate services, paperwork, etc. We need more locations and media outreach.
- We need more funding for agencies such as “Jewish Family & Children Services” and Geriatric Dept’s (who has limited funding), but currently provides a one on one In home-services Assessment of needs while creating a to do list for the individual and switch roles to an action oriented role and assist the client with benefits, applications and/or as a mediator between the client and supportive agencies.
- Launch a media campaign- bringing together all mass media for a one day a year to highlight “Where to call” for information and Enhance 211.
- Media Campaign, Phone based 211 systems, Web based does not meet everyone’s needs as not everyone is computer literate nor do they have web access, simplify menu options on phone chains for agencies and utilize grocery stores, churches and other popular location people visit frequently.

Prescott Community Center 4/13/07:

- Need individual follow-ups to benefit checkups and more case managers. (Yavapai County)
- Set up a government body to inform on and distribute all elderly supporting services. Including admissions to care homes, nursing homes.
- Public transportation at local communities.
- Large print brochures.
- Hold all businesses to ADA standards, especially curbs.
- Make sure seniors know about their benefits.
- Transportation to elderly public.
- Well-developed Internet sites on aging services & information Governor Aging representative to meet w/Navajo people freedom to work after 65 with no social security or SSI cut.

- Create materials in simple language.
- More services to the Navajo Nation. Having more meetings there with interpreters so the elders will know what is being talked about.
- Local Newspapers and senior centers.
- Communication, commitment, cooperation, collaboration, and advocacy.
- Teaching elders on the Navajo Nation basic computer skills such as browsing the Internet.
- The State of Arizona absolutely must give more state dollars to enhance and support services, address service development and allocate resources to elevate the array of services to Navajo elders & tribal elders. How much is spent in State dollars to support home & county-based services on Navajo?
- Please do not cut any of the health care plans because the elderly are the keys to open our doors that have been closed along time, they are our tools and wisdom.
- Make better discussions for Navajo people.
- Lift age 65 limitation on "Freedom to work"
- Remove 1yr limitation on title V Senior Workers-many have multi-illnesses and are considered unemployable-what employment will hire us vs. younger employable folks?
- The State of Arizona should work more with the Arizonans of Arizona.
- One stop resource enters-needed.
- What kind of consumer choices? What Services?
- Provide Medicaid Long term care insurance for the poor.
- One-stop resource centers are a good strategy, but make sure that services are well coordinated between the various service providers, and that the service providers are given the resources they need to staff and/or contribute to a one-stop center.
- Speak out for their needs and supply and interpreter for Native people.
- Need handicapped (lift-gate) transportation.
- On Navajo reservation we are in dire need of handicapped transportation (vehicle with lift-gate).
- Unity in regards to agencies coming together and helping seniors instead of many separate, independent agencies.

Globe City Hall 4/20/07:

- Comments are made about living on Social Security to have some money and still not be able to get access coverage. Why are comments made without giving any answers? Things need to be changed so more seniors get help.
- A short article in local papers and local radio stations regularly.
- Good!
- How about one toll free hotline to direct our inquiries! Right now we have an 8 ½ x 11 sheet and 8 regions with telephones. EX: 1-800-AZ AGING.
- How to get there? Unless you're on AHCCCS or ALTCS, We have no transportation out of town. If you're not a member, you need to pay \$300 for a trip to the valley. Our hospital is becoming more and more limited in services so there are more referrals to specialist in the valley.
- Not all people know information about where to go or where to call.
- Low-income family, still not eligible for AHCCCS.
- Train about aging issues starting in grade school so all are prepared when they get there.
- Mailings. Our seniors are a matter of record- with the Social Security. Why not mail all the senior citizens what services that are available upon reaching criteria.
- Public needs to be made more aware or educated on these services.

- There is a need to change the income bracket for ACCESS because a lot of elderly people don't qualify.
- Discharge planning from hospitals and emergency rooms is lacking at best. This is an excellent position in which discharge planner could link older Arizonans w/community resources. This is not being done. Suggestion: Place a person in hospitals for coordination upon discharge.

Tucson El Pueblo Senior Center 04/27/07:

- To actually access the services themselves requires outreach in the form of people who come out of the rural areas and to homebound people to help them understand available services and actually make the applications.
- Excellent!
- Central location in each community- such as PCOA- as a one-stop shop.
- Would like the one stop resources to be priority #1.
- Developing one stop resource centers across the state to facilitate access to information on aging is very important the elderly who need quality services.
- Provide funding for staff to manage the information centers.
- Increase support for suicide prevention for older adults. Consider homebound seniors. Consider language/culture in making it easier for elders to access services.
- Develop a method to make seniors aware of the services available and a way to get this information to none English-speaking seniors who should be treated the same as the English speakers. E-mails do not work because many seniors do not have computers.
- Loop public buildings so people with hearing aids can take part.
- Provide services in diverse areas that are closer to areas where people live.
- Continue to fund Pima Council on Aging as well as many other non-profit agencies that work w/seniors to provide the assistance. They need the funding for staffing.
- Day activities, mature worker programs and more jobs for the elderly.
- Develop dental health plans and insurance offerings.
- How will homebound individuals who are not computer literate access their services?
- Put these into senior centers, Increase transportation and have advisors in place.
- Refer to resources and Pima Council on Aging, Neighbor to Neighbor and libraries & Churches-faith based and Transportation!
- Single source need for information and services for seniors. One place to go for all help.
- Need better support for rural areas.
- Developed increased transportation access.
- We already have AZ 211 website to disseminate this information.
Volunteer coordination takes funding!

Goal 2: Increase awareness and understanding of aging issues and help prepare Arizona for an aging population.

- Increase the cultural/linguistic competency of aging services statewide.
- Develop culturally and linguistically appropriate awareness campaigns to educate communities on elder abuse and Family Caregiver Support Program.
- Identify/adapt culturally appropriate curricula related to aging that can be applied to all disciplines.
- Promote aging friendly businesses to serve older adults.
-

Comments:

Mesa Senior Services 02/23/07

- Integrate Senior Centers between communities and Indian Reservation
- City T.V. programming
- Utilizing baby boomers volunteers
- Exposure to different community
- Honor diversity and welcome everybody at the "One Stop Shops". Involve many generations
- How about learning to embrace the rainbow of diversity.
- Have "ambassadors" cultural outreach, and a social forum/clubs and then have them interact

Parker Senior Services 03/16/07:

- Advertisement and hold public meeting just as this one!
- Offer incentives for businesses to become more "Elderly Friendly". State Government could offer tax incentives. In addition, welcome more people to open business that cater to the elderly needs (In-home non medical care to run their errands, Reliable transportation, etc.)

Paradise Valley Seniors Services 03/23/07:

- Tax reduction to keep seniors in their homes-utility bill
- Visitation Programs
- More education in the schools to prepare people for careers in this area
- Government waste is rampant in this city because they never "fix" the roads or anything else except by minimum specs-that's why they are forever torn up. Also, the flashers, pylons and heavy equipment which is literally lining miles and miles especially Camelback and Central and not being used is costing taxpayers tons of money. Not only is it a hazard to drivers and pedestrians but it's putting small businesses out of business. Why not complete it as you go along rather than tear the whole city up? Amy, the gal who is in charge of this from ADOT told me they didn't realize all the underground conduits etc that had to deal with. If APS, SRP City Water, etc do not have their schematics recorded, I'd say it's darn poor planning and they shouldn't have started the project!
- Keep informing Arizona State Legislators on aging issues.
- Be aware of "Boomers" diverse interests and needs. Flexible planning needed.
- A Note: Like most operating systems the human body is a group of integrated systems. If one system is not working properly it affects the others. Therefore, as one gets older all systems not just medical need to be addressed.
- Cultural competency is so critical for caregivers/families-especially Hispanics
- No benefits for ILLEGALS! We USA citizens come FIRST!! Dollars spent on them needs to be spent on Citizens only!! What are you, our representatives doing about this? Want answers, not excuses!!
- Cut Senior costs/taxwise: in half for education. Don't we ever finish paying for schools? 70+++. 100 of us will cost you 5 million a year in nursing home keep us home/Lower taxes.
- SAIL-Must live by yourself. If you have family you can't qualify. Get utility lowered-get help fixing broken appliances.

Avondale City Hall 3/30/07:

- More Spanish literature needed so that Latino Americans will understand the help you have to offer.
- Prepare and run commercials in order to reach as many people as possible.

- To have bilingual persons helping out when an individual only speaks one language other than English.
- Have all social agencies with their counselors and social workers more informed through classes of the problems of older people.
- Grandparent guardianship programs need to be expanded. A service for grandparents providing care giving services and/or childcare services.
- Be more aware of older people needing services, to be friendly. And more sensitive to grandparents.
- We are in need of more bilinguals.
- The Media.
- Bring back respect for older American. And get more funding different agencies, workshops and conferences as well as making everything for seniors more user friendly.

Prescott Community Center 4/13/07:

- Don't isolate older adults – Recreate whole communities of all ages.
- Can we start them young in school?
- Train our staff at local senior citizen centers in Geriatrics.
- Respect for elders with kindness, appreciation and deliver adequate services.
- Public transportation.
- Awareness on aging issues.
- Health insurance and benefits program.
- The Navajo Nation need to be recognized because so of our elders still “do not have electricity or running water”, etc.
- Public transportation
- Long-term home care services standards should be lowered.
- Public transportation at affordable cost/free for those without money.
- Have a lot of services for seniors.
- More training for service providers about aging issues.
- Public transportation for Aging. Taking fee's to cash their checks (elderly) on their monthly checks and Interact w/each other young & old peoples.
- Group meetings each week, speaking out and asking questions.
- Politicians and leaders need to come out and participate among our Native area and participate in our culture, education and so on and so forth.
- AZ DAAS must mandate and fund gerontologists. They must teach and support staff.
- Caregivers Support, Government Offices, Wal-Mart>customer service and model carts. Also Public transportation.
- We need more nursing facilities for Native Americans in our area.

Globe City Hall 4/20/07:

- It would help to have a representative with an office in every town. Not just someone Phoenix or just in the county seat.
- A short article in local papers and local radio stations regularly.
- Use seniors to help out in juvenile detention facilities or have these “Juveniles” do community service for seniors (Yard work).
- There should be more geriatric topics, and training to those who have interest. Train and those who do work with the elderly people so they have a better understanding of the needs of elders.
- Educate on awareness for all.
- Educate elderly on Friendly business.

- More family support.
- The AAA could provide the senior centers with current legislative information. A column in the newspaper with basic and changing information. Have an AAA rep (Preferably bilingual) in hospitals and senior centers to answer questions and refer seniors to where they should go for different services.
- Use the skills and the knowledge from the seniors.
- The Navajo reservation is in need of senior centers in each community.
- Advocate for other seniors to work together.
- Be aware that aging issues are not for the aged they are for those who are in the path.
- Local TV, Radio and Newspaper.
- Need to reach out to these people with information on where to go for this.

Tucson El Pueblo Senior Center 04/27/07:

- Good!
- Education through TV and radio stations.
- Information should be given to the elderly before they get to old to understand!
- I like the idea of promoting opportunities for the elders.
- Elderly abuse is sometimes hidden to the public awareness and its time to make everyone aware that the elderly are just as human as the rest of the public in the U.S.A.
- Low cost housing and housing that is suitable for handicap.
- Does anyone know how many seniors have both vision and hearing loss?
- Provide more neighborhood meetings so seniors can get to ask their questions and have them answered as they cant get to the large area meetings- HOA's etc.
- Junior League of Tucson has just selected a new focus on dependent elderly and is searching for how we can help. We are a volunteer woman's organization looking to train and educate women members about elderly as well as find opportunities to allow us to work with and assist independent elderly in remaining independent.
- Make it easier for the senior people to be able to work and be self sufficient for themselves.
- Dental care needed.
- Universal health care.
- Address scams and identify theft.
- There is a negative aspect to aging; this needs to be addressed as a community.
- Pay family caregivers and promote shared housing.
- Community centers and churches.
- Need bilingual participation.
- Provide more ideas about community living.
- Look to successful agencies that have a successful history of servicing and diverse populations. Fund competent bi-lingual, bi-cultural programs and DEMAND IT!

Goal 3: Increase the ability of older adults to remain active, healthy and living independently in their communities.

- Work with Area Agencies on Aging and Arizona Department of Health Services to develop health promotion/disease prevention evidence-based programs.
- Develop and implement training programs with the Area Agencies on Aging focused on the principles of self determination, model of care for case managers to promote putting decisions in the hands of the consumers and families.
- Develop programs, applications and approaches to close the gap between needs of the chronically ill and the resources available to support community and self-management.

Comments:

- Promote intergenerational communities.
- Promote visitation programs to the homebound.

Mesa Senior Services 02/23/07

- Free videos and DVD's mailed to seniors at age 65 highlighting exercise, nutrition and social organizations to help them remain healthy and independent.
- Encourage seniors to be safe drivers by taking the "AARP Drivers Safety Program" to allow them to keep their mobility for a longer period of time. Public transportation for seniors continue to be a challenge.
- Very good. Transportation must be considered.
- TRIAD
- Mileage reimbursement
- Coupons for cabs
- Improve the quality of the air-too many respiratory ailments and Valley Fever because of dust particulates in atmosphere as a result of uncontrolled growth destroying protective layer covering the desert/near desert.

Parker Senior Services 03/16/07:

- Partner with local health care/insurance/service entities
- An increase in government money would really help us ALL!! We need more Boy & Girl Scouts to help us across the streets and to visit us. Big Brother and Big Sister's for aging adults. (To be their Grandpa or Grandma).
- Parker needs low housing for aged persons with care.
- Develop programs for more adult senior housing. Especially in LaPaz County. Funding for our present services-such as Catholic Services-WACOG, etc for health care and visiting shut in people on a daily program.
- Continue the Senior Corp's "Senior Companion Program" is necessary to continue to manage independent living. The monthly stipend greatly assist the volunteers. Many services in Kingman are raising grandchildren. DES may need to develop a financial assistance program for the senior to maintain quality of life while raising young children. Maybe Title 5 changes.
- Doors easier to open or accessible to use. Place needed to take care of older senior when they can't take care of themselves.
- Grandparent/school program. Senior who needs supplement income program pays the senior who volunteers at local schools to help i.e., reading, library involved with the children. This program has been on going in Michigan for years.
- Offer aging workshops through Chambers of Commerce that physically put business owner participants in some of the physically challenging situations that their customers are experiencing.
- Need healthy lifestyle education at childhood and keep it as focus throughout life—include lifelong physical education and nutrition in education curriculum (make it enjoyable not something tested.)

Paradise Valley Senior Services 03/23/07:

- Reduce property taxes for seniors
- Exercise module could be created as that could be shared with caregivers, seniors, and case managers to encourage healthy movement and activity

Comments:

- AHCCCS needs to address home assistance not just nursing homes. Let's keep our seniors in their homes. Costs less too! What are you doing about this?
- I wish our legislators would freeze the current tax valuation on homes of seniors over age of 70. Many middle income widows will be forced out of their homes because of increasing property taxes. Valuations should be frozen for all older widows regardless of income not just the very poor.
- I am 80 years old and have never married and I can't have my taxes frozen because I am not a widow or handicapped-how discriminating can you be! I've worked hard all my life but because I'm not in your eyes eligible I am denied.
- Need transport,
- Poverty level too low
- Reorganize Dial A Ride
- Housing: Can't afford
- Food Stamps – cut off
- Family with Disability – low
- Why is Arizona below the Federal level of poverty?
- Do you realize that there are seniors that make \$30.00 over welfare limits that can't afford to eat anything but cat food by the end of the month that has no transportation to go and get a food box? Get more money to people who apply for disability. Have been waiting for over 10 months. Been out of work for 3 years.
- Exercise module to help people stay active
- Reduce taxes for our homes, so we can remain in our homes. Reduce rates for senior utility costs.
- Improving public transportation in general would be a big help.
- Lower utility bills through corporation commission
- Reduce public housing minimum rent? HUD?
- Tax reduction in our homes
- Decent break on utilities are outrageous
- Phoenix brags about being the 5th largest city in the nation and yet they don't have the city bus service 24/7. They ought to be ashamed of themselves. I can think of many much smaller cities which have better bus service. Furthermore, when a bus breaks down they don't replace it-the next bus picks up the overload and people have to wait are late work, etc. I want answers to question. I have heard and I don't know how it is that the Board of Public Transportation is made up of all the large car dealers. If that is true it seems like a flagrant conflict of interest-so I would like to know how these people get on the board (by greasing palms?) How long is their "term"-is the public allowed to attend meetings, etc. How would one get on this board? If you feel that not enough people vote it's because you lie about what is going to be done-there is no follow through and then you decide to hire a consulting firm to see if the voters are right-example I remember voting for better bus service and immediately thereafter 2 or 3 lines were terminated.
- Make available more transportation for seniors so they can be independent. This includes weekends.
- Freeze on lower property taxes also do something about utilities.
- Transportation bus light rail, dial a ride, reserve a ride.
- Keep funding home and community based services.
- Support volunteer based agencies such as VICAP (Beatitudes Center DOAR)
- We need more Dial A Ride cars and better dispatching. It now takes several hours to go and come from appointments which is very tiring. We need transportation. Dial A Ride service is very much appreciative.

Comments:

- Teach younger kids to help put through the high school
- Add more buses to Dial & Reserve A Ride

Avondale City Hall 3/30/07:

- Positive Attitudes.
- Deal with transportation issues/mobility issues.
- Good health promotion.
- Ensure elders take their medication and be educated to eat properly and exercise as much as possible and participate in senior electives.
- Utilize seniors as advocates for their care. Help us contact legislature and fight for programs the aid and educate us.
- Work with sustainable planning communities.
- Receive more visits from care workers.
- Advocate for all medicine plans provide memberships at or reduced cost for low income. Provide a mentor to get them help.
- Since there is a Provider shortage lets train these care givers properly, pay them adequately and incorporate background checks as well as finding new and creative ways for delivery of services.

Prescott Community Center 4/13/07:

- Senior housing should be "In town" close to resources, transportation & volunteers! Education on health issues- diabetes & heart problems.
- Make more walkways and sidewalks.
- There is a point when the seniors can be independent. Who can we partner with who are assisted living providers to improve standard inspections? We need more levels of delegation on training.
- Adopt a grandparent program.
- Build recreation center for adults, kids & seniors. So we can all interact one section with activity area then one for gymnasium.
- Promote seniors working as aides in schools and day cares. Both seniors & youth benefit. Create incentives for developers and landowners to build senior living apartments & assistant living complexes.
- Recreation, Arts and Crafts, Adult education, Internet services and Therapy Centers for chronic elders.
- Promote exercise and eating healthier. Get bad drivers off the road.
- Senior housings- w/recreational centers. Adopted Grandparents and AZ Nutritional Programs-needs more \$\$\$\$ for exercise items at recreation centers.
- Make the food that is good for us affordable. We need a safety net for seniors who fall between health problems. Example: How does a senior get transportation for health services? 911 can get you to the hospital but how will you get home?
- The Navajo elders are not educated and do not have access to the modern technology.
- To live in their own homes, to be happy and be comfortable in their own surroundings, visitation, group meeting with social intellectual games to use their minds, hands, etc. And exercise programs.
- We need more education about there cultural roots. (About our traditional meals).
- Develop visitation teams from senior centers to ride senior vans to nursing homes to visit residents as all levels also including Alzheimer. Senior centers to promote 1 hr supervised

Comments:

fitness center free and more diabetes state monies to northern Arizonans & reservations.

- Develop culturally based and Navajo language materials. I have yet to see DAAS or AZ Nutrition Network do this. Is Navajo Unimportant?
- Streets for pedestrians and build recreation centers on the reservation.
- As a Native American we all need to get back into our traditional ways of life style.
- Provide more nursing home or adult home care facilities. More federal funds to Navajo Nation to provide education on health.
- Need more paved road between Gap & Page road on providing services.
- Provide free exercise programs with easy accessibility.
- To provide service to all Arizona residing senior citizens.
- Senior housing, Senior centers exercise and more information on diabetes.
- Need community vans that can go around to apartments and assistant living homes to help them shop and etc.
- Increase funding for the Foster Grandparents program for the Navajo Nation. There are limited activities for elders in the reservation.
- Volunteering under this program is beneficial and will keep the elders active. There are about 24,000 elders on Navajo Reservation & right now we only have approximately 160 volunteers under F.G.P.
- Exercise
- We need more facilities to promote eating healthier food and exercising or gathering at the senior center to walk or to play ball or some kind of activities.
- Teach volunteers to cook Native Food (Navajo).
- Adopt and/or provide pets to seniors who would like animals to help promote good health and exercise thru walking and additionally it gives love and companionship.

Globe City Hall 4/20/07:

- Have a senior bus to take people to stores, doctor's appt and etc.
- More activities @ local Senior Centers. I would love to be a Foster Grandparent! How do I do this in Globe, AZ?
- Encourage elderly to do simple chores in a Safeway.
- Develop training programs.
- We need more nursing care home for our Navajo Elder so we won't have to send them to Payson (or) Phoenix.
- Incentives for possible small bus owners to open foster care center/day care centers for adults. "Sorority" house models and "Fraternity" house models.
- High School & Parks and Recreations need to offer more services to community as well as seniors.
- Increase minor home repairs.
- Recruit for volunteerism. Friendly visitors to encourage and inspire homebound persons. Encourage participation in college courses and computer classes.
- ADHS has very few programs specifically targeted to the senior population.
- Older people need help 24hrs a day. But there are no services for them. They need 24 hr group service assistance.
- Look for and utilize resources who provide curriculum and resource guides for exercise and good nutrition to elders.
- Educate the churches so they can be more involved.
- Having more information on what kind of nutrition education is good for older adults.

Comments:

- Aging should not be an issue. Mandatory training on recognizing stroke and heart disease should be provided.
- Make more workers available to help seniors so they may remain at Home Wellness centers for seniors.
- In our community there's a lot of older adults having problems with their activities.

Tucson El Pueblo Senior Center 04/27/07:

- This requires development of neighborhood and family interdependent community.
- The cost of independent living is miniscule compared to the cost of nursing homes.
- Good!
- Healthy and active adults make for having away the nuclear family.
- Increase funding for HCBS services to support elders remain independent in their homes. Funding for training professional caregivers.
- Increase state funding for behavioral health services for age 60 and over adults. Provide financial support to programs such as the Senior Companion program and mature workers program.
- I think that if we get help for fixing our old homes and keep our love ones at home they would get better care and better food.
- We need a break on our property tax- so we can afford to stay in our own homes.
- Transportation alternatives for seniors.
- Many seniors will be forced to sell or lose their homes due to the way property taxes have jumped. Why should the people (seniors) who have no intention of selling their home be punished because somebody down the block sells their home, which was bought a year or two ago and now wants to make a profit?
- Deaf/blind have been excluded in AZ. Public transportation is key when people can no longer drive or ride a bike or walk. Include the deaf/blind who need money to pay support service providers (SSP's) to drive them places as well as other things.
- Expand existing Home/Community-based services (HCBS) as genuine options to (1) Nursing homes and (2) Assisted living institutions.
- More affordable housing for seniors so they can do this.
- Provide help to keep people in their homes.
- Provide more funding for senior transportation in Green Valley; volunteers need to provide the transportation. There is no public transportation.
- Increase funding for programs, promoting exercise and more classes to educate on healthier living.
- Relief for increasing property taxes for fixed income seniors.
- Promote health ministries in faith communities. Support and help expand agencies that are already providing these services (ie) – Interfaith community services and PCOA.
- Develop skills of interdependence by educating seniors on how to house themselves together and create living arrangements.
- Promote and support community activities and services.
- Provide programs through available sources to help older adults.
- Suggestions:
 1. Subsidize utilities for low-income elderly people.
 2. Quick and painless access to subsidized in-home community-based services such as meals on wheels, weatherization programs and home health.
- PCOA has a place and number of service programs designed to keep the older person in

Comments:

his/her home.

- Fund pharmacy based clinical services through AZ AHCCCS. Pharmacist help people identify and resolve medication related problems but AHCCCS does not recognize them as medical providers! Please help change this.
- Fund preventive dental care for seniors who are poverty stricken through state qualified programs. Fund CHC's – They work at helping the elderly out of emergency rooms. New strategies to manage chronic diseases would be helpful.

Goal 4: Increase the safety and well being of older Arizonans.

- Cooperate with law enforcement agencies and prosecutors' offices to effectively carry out prosecution of perpetrators of abuse, neglect, and exploitation.
- Initiate an education campaign to prevent elder abuse and heighten awareness to recognize the signs of elder abuse.
- Work with Alzheimer's Association and the Area Aging on Aging to establish an after hours pilot program for clients who wander.
- Work with Arizona Department of Health Services and the Governor's Advisory Council on Aging to develop falls prevention screening tool.

Comments:

Mesa Senior Services 02/23/07

- Excellent bullets – add funding of Adult Protective Services. Promote exercise programs.
- GPS type chip to find Alzheimer persons who have wandered.
- Elder Abuse Conference
- ADP Service Funding
- Postal Service

Parker Senior Services 03/16/07:

- Don't reinvent the wheel. Great "fall prevention tools are out there. Medicare is working with home care agencies. They would be a good resource.
- Work more closely with banks to bring down financial exploitation throughout the state.
- The postal service is destroying well being by forcing all clients to have "permanent" addresses. Example: Our house was destroyed by arson. When the house was destroyed the post office insisted all residents to provide an address during the search for low-income housing.
- Develop community elderly "Watch Programs" for elderly to make sure there is no exploitation. Use task forces as we do with crime watch.

Paradise Valley Senior Services 03/23/07:

- Fall prevention should be integrated at all levels of case management
- Awareness regarding elder abuse
- Get rid of gangs! Crime in Arizona highest in nation. Shame on you!
- Raise the poverty level for the state
- Get equipment to people on a more timely basis.
- More caregivers for housebound.

- When the city sends workers to help with repairs in the home they must get the lowest bids available because the quality of the workmanship was terrible-bad plumbers and electricians using the cheapest quality fixtures which broke immediately and had to be replaced.
- Help for caregivers of Alzheimer's patients.
- APS to provide resource information to assist those frail elderly who do not necessarily qualify for those services.
- Somehow Phoenix seems to think the bus service should be a money-making proposition and not a community service! When is something going to be done about the graffiti that's appearing all over? Cameras should be placed in areas where perpetrators can be identified and heavily fined with jail time, money and community service! A member of the police force talked to us and when I called to report suspicious activity the officer said it wasn't their jurisdiction. I called several numbers but none of the officers were interested! So much for letting us think that they're interested in our safety!
- Make available more transportation for seniors so they can be independent. This includes weekends.
- I am concerned about the trucks from Mexico coming into the US not being regulated and able to go anywhere in the country. Deal with Illegal Immigration overall.
- Fall prevention is essential. Fund programs to put grab rails and other safety devices in homes (VICAP does this)
- Deal with drug and gang activity. More police presence!

Avondale City Hall 3/30/07:

- Senior Craft classes held by seniors to teach younger generation how to crochet and knit.
- The "neighbor helping neighbor" type programs so people have someone watching over them.
- Buddy system would work for elder's safety or neighborhood watch.
- Funding
- To educate the senior more.
- Currently, we as caseworkers are advised to contact the local police dept non-emergency # and request a wellness check. This is a great service but it needs to be done in a timely manner. If I call early in the morning, by mid afternoon some one should have responded to that morning call...
- Train health care providers in Geriatrics safety issues; when to contact Adult protective services, etc.
- Fire Department outreach Service for non emergency calls.

Prescott Community Center 4/13/07:

- Mental health education & access to mental health care & treatment. Self-abuse and self-neglect are critical issues!!!!!!!
- Education and inform seniors about safety.
- I would like to see better and more on-site policing of existing care homes. Neglect of elderly patients is everywhere and I wish surprise spot-checks would be implemented.
- Seniors should be educated more about health care.
- More facilities to better help our elders.
- Provide more assistive devices for elders.
- Stricter Alcohol abuse & drug abuse laws.
- Have developers look at the needs of seniors and handicapped people.
- Drug issues on the reservation need to be addresses. Elders are afraid in their

Comments:

community.

- How do you deal with an elderly that is with dependants and not willing to spend her own money on herself?
- Be active mental, physically. Educate Self and be creative in all aspects of life.
- Eye glasses, Dental care, Wheelchair, Safety rails, Transportation, adequate medical and mental services for elder and veterans.
- DES-Adult Protective Services on the reservation need to really be enforced and the same with Child Protective Services.
- Out in the Native Land we do have a lot of peoples family members such as grandchildren abusing their grand-parents, spending their money, and taking there belongings.
- More federal funds for aging on Navajo Nation.
- Safe & sanitary help for seniors and homeowners in mobile homes where you do not own the land.
- Hire more APS workers. Have community volunteers trained to educate communities on elder abuse etc.
- To service all older Arizonans the same rather they are on a reservation or in a mobile home.
- Set up in home assessments with local agencies, fire departments and Chambers of Commerce.
- Have equipment loan programs where families can borrow personal safety alarms (sense alarms for the bed).
- Elders need to speak out; a lot of times elder don't report abuse because they're afraid.
- Need fast reaction to our calls to law-enforcement (Navajo Nation).

Globe City Hall 4/20/07:

- Have Caregivers Licensed.
- A short article in local papers and local radio stations regularly.
- Make seniors more aware of home safety factors.
- Educate Income-Monthly. Help seniors balance out their income. Because a lot of seniors are taking their only income to the casino's.
- More "Guardian Angel" life alert programs. We also need new remodeled senior centers and Fitness centers. We need Registry License Bonding Insured Workers.
- Community & Family Support. Verify Caregivers background checks. Also checking Assistant Living Homes and different facilities for overworked and underpaid staff.
- Donate to the life-alert program and other home alone-safe-alone programs. Also, need a method of perfection from predator relatives of elders.
- Funding for housing modifications.
- Not enough programs for senior homes.
- Need more safety devises for home bound.
- Have someone come in at least twice a week to check on elders.
- Create an older American Police force with training and enforcement rights.
- Check out the assisted living institutions more than one time a year for a few hours. We need regular visits to these places by the state to enforce regulations.
- Wellness Centers and HMO's should give Safety & Wellness information sessions.
- Gear up for keeping AZ elder abuse low.
- Licensing requirements for caregivers.

Comments:

- We sure need more safety & Well-being classes.

Tucson El Pueblo Senior Center 04/27/07:

- Expansion of Ombudsman programs beyond what is budgeted. Help is needed in management and budget to allow vulnerable & isolated elders safe and in their own homes.
- Good!
- The elderly are very vulnerable to scare. We need to stop this abuse.
- Safety for all citizens is a must! We need to live and let live. To love thy neighbor as thyself is harmony at its best.
- Education is needed. For elders and hospital staff. Medications dispensed at hospital discharge are deadly when mixed with medications continue to take at home.
- Keep track of homes and nursing homes to see if the older persons are appropriately.
- Introduce them to the many health benefits (decrease falling by improving balance, decrease high blood pressure and improve immune systems.
- Re: SNFS: not enough to resolve complaints. Should develop a genuine ounce of prevention program so complaints need not arise.
- Safe environments are very important.
- Have some kind of program that goes into the homes of seniors.
- Please have classes for seniors so that they can learn about abuse awareness.
- Driving services.
- Identity theft.
- Fund the Arizona dept of health services, office of legislature for staff so they can adequately monitor and inspect nursing facilities.
- More assessments.
- There is a good program in place with the Attorney Generals office.
- Big need for more rural transportation. We need organizations to help pay for maintenance and gasoline.
- Better public transportation needed.
- You will be hearing about a Pilot program being developed now to:
 1. Identify people who need assistance during disasters such as floods, Palo Verde accident and utility shortages.
 2. Have ID and other critical information coded in bracelet, necklace, etc. Which would provide info on wanderers.
- Oversight of elder care homes/facilities.

Goal 5: Strengthen Arizona's economy by capitalizing on an integrated and well-trained informal, paraprofessional, and professional workforce.

- Facilitate and support caregiver education and access to useful caregiver resources.
- Coordinate with the Mature Workforce Committee to develop a public awareness campaign for employers/local employment agencies on utilization of mature workers.
- Implement a standardized curriculum for the direct care workforce.
- Work with local long-term care, in-home service providers, and other existing groups to provide training and assistance to family caregivers.
- Provide resources, services and program development to promote the use of senior volunteers to support seniors.

Comments:

Mesa Senior Services 02/23/07:

- Find ways to increase the awareness of the value that seniors have to offer to society in general. We have to move away from the social model of de-valuing older citizens. These are the most experienced and often best equipped citizens to help guide, train and educate the work force who will be serving our seniors.
- Affordable housing
- Promote job sharing (2 or 3 employees filling one full time position). Providing transportation to and from work when they can no longer drive.
- Also, can you provide a list of employers with sit down jobs or other jobs with limited mobility?
- Training CNA
- Education
- Cut State Income Tax for seniors as other states have done – as Oklahoma recently did.
- Need affordable housing.

Parker Senior Services 03/16/07:

- Well-trained informal-more cost for us taxpayers.
- Paraprofessional – what is this program or is it a person?
- LaPaz County presently has its funding for Adult Protective Services dropped. We need Adult Protective Services to be available locally. They were in Parker at the DES Department.
- Communication is KEY
- Affordable safe housing is an issue for all ages across the state.

Paradise Valley Services 03/23/07:

- Why are seniors who have to work to make ends meet penalized? By not raising the income level for assistance. Who today can live on \$12,000 a year.
- Caregiver services are too difficult to find; utilize existing non-profit serving seniors as a hub for this info and assistance. Give them dollars to do more of what they do in a coordinated way.
- Help organizations identify ways to utilize older adults in purposeful volunteer activities (internships).
- Consider working with Red Cross to help equip home caregivers.
- Prepare curriculum for support groups for caregivers.
- If you are over 50 you can't get a job
- Have a mentoring program for many professions that can use experienced retirees – for example – teachers.
- It would be good to increase the allowable income for participation in the Senior Companion Program. This is a federally funded program but could have state participation and support. Same with the Title 5 program.
- Work is the key to self-sufficiency and self-confidence as people age. Volunteer work does not provide the same satisfaction.
- Support Alzheimer's and other aging research, which will be rising so sharply as our population ages.
- Tired of government workers saying "That's not my job"
- Tired of telephones which say press 1 for English

Comments:

- Get them to hire more handicapped older Americans
- Let's crack down on illegal immigrants. They should not be entitled to any state programs.

Avondale City Hall 3/30/07:

- Older workers should be more employable for other older people. Re-education for them in how to handle their medical problem and maintain employment.
- Look at compensation for home healthcare workers. Many do not make minimum wage, That's unacceptable....
- Encourage or develop workforce development training using seniors, such as Geriatric development.
- Recognition on part of Government agencies that many older Americans are outliving their pension.

Prescott Community Center 4/13/07:

- Encourage businesses to hire seniors.
- Enforce the Older American Act. All departments, businesses, Agencies, All staff, Elected Officials and Administrators should be educated in training on Old Americans Act. Elder abuse needs to be stopped.
- Seniors teach after school & have Saturday classes to high school students. Every one benefits from this. Have seniors share jobs as part-time employment at business & government offices.
- Better pay for caregivers & elderly people who are working. More grand or foster grandparents in Head Start Programs and in school across the Reservation.
- People need to keep more of their money. We need to not loose our benefits.
- Support the Navajo Nation on providing funding with more dollars so our educated children can return to work with our people. Our children stay in the city due to salary range on the reservation. Have a "Dime" person interpret at these forms, and have a representative from the Navajo Nation.
- More Education, training, assistance, wages and transportation.
- Train staff in Geriatrics and Aging for our local centers.
- Better wages for older adult that go back to work on and off the reservation and going back to school>classes for elders.
- About the caregiver, I think we need to get paid more for the work we do with hours. We provide to our elderly and more training to be given, dress coat with scrubs and nurses gear.
- Navajo's to be involved in all planning & request for federal funds.
- More training & on-the-job training for upgrading technology re: computers-etc.
- Agencies need to be prepared to coordinate programs by giving seniors purpose in life.
- Encourage local newspapers to talk about the Mature Workers Program. Let seniors know the availability of training and jobs for the seniors.
- Develop more schools for nurses and nursing assistants.
- More funding from the state of AZ.
- Have our caregivers paid when they transport us to shopping. Shi Heart on the reservation does not pay our caregivers when transporting us.

Comments:

Globe City Hall 4/20/07:

- Are these just comments or are you actually going to put these comments into action? Senior issues need more money to hire qualified people to help. How disappointing that "Our Representatives" didn't even come to the meeting today.
- Volunteer work groups to aid seniors directly.
- Stop people from taking care of seniors with no training. Saying that they are caregivers, THAT NEEDS TO STOP! Make every one be bonded or state employed.
- More seniors in the schools and in health care settings.
- Geriatric training.
- In emergencies, reactive organizations need volunteer knowledge to answer technical phone calls or to man phone banks. Also could use the historical knowledge of what was done in the past for emergency planning.
- We need more long-term care services. Also, you need to increase income brackets so more seniors will qualify for what little programs you do have to offer. I tired of being told that I make too much money. How can you be over income living on Social Security?
- Supplement a standardized curriculum for the Direct Core Workforce.
- In-home service providers are needed on the Navajo reservation because lots of elders out here are not being cared for.
- Advocate more funding for older workers to continue to work and senior centers.
- Train young people to protect older people and when they become older they will protect. Also we are all the "Aging Population" not just the elders.
- Make life alert more readily available for seniors with follow up on equipment done on a regular basis.
- We need to strengthen Arizonian's to be well trained in area need to assist the elderly.

Tucson El Pueblo Senior Center 04/27/07:

- Increase free training to prepare people for care giving jobs. State funded caregivers need to have better income (not minimum wage), transportation costs and health care insurance.
- Excellent!
- I support the coordination of mature work force. Financial stability is very critical for seniors.
- A competent, caring, honest professional staff is essential to the growth of the Aging and Adult services in the state of Arizona.
- Nursing homes take care for how much money they can get.
- More seniors want to stay home and they want a relative to take care of them. These people should be trained and paid for giving care to an elderly relative.
- There is a real need for available part time work for mature workers. Employers need to be aware of the benefits of hiring experienced workers and in making flexible work schedules available to them.
- Educate and train people to be able to recognize when seniors need help when they are having problems remembering and to educate to be aware of certain signs.
- Pay family members that provide hands on care.

Comments:

- Increase funds for behavioral health.
- Support and help expand volunteer based organizations already in existence providing these services.
- Recruit and train immigrants especially from Mexico, with 1-year workers permits and renewals if satisfactory.
- Provide English classes for Spanish and other citizens.
- Look at various models that are effective with diverse populations.

Goal 6: Enhance the state's capacity to develop and maintain the necessary infrastructure to deliver services in a culturally appropriate, timely and cost effective manner.

- Identify partnerships and programs to enhance available services that support families dealing with dementia.
- Develop affiliation between Kin Care Organizations and Area Agencies on Aging.
- Develop Family Caregiver Support Program core services statewide.
- Build collaborations that will increase accessible, safe and affordable housing options for seniors.

Comments:

Parker Senior Services 03/16/07:

- Refrigerator magnets with phone numbers for Emergency, Fire and One Number for all services, i.e. Senior having Senior Meals on Wheels, Senior Health Issues- One Number. Then the senior would not throw it away.
- #1-We need caseworkers to seek out these people that have dementia because they can't help themselves if their family don't!
- #2-I don't know what Kincare org. is?
- #3-Inform families and pay them to care for their own old people.
- #4-Affordable housing for seniors should be the state's Number One Program-too many of us can't afford any housing at ALL!!

Paradise Valley Services 03/23/07:

- Sunnyslope Senior Center need property improvements and the workers need to let us know who to talk too.
- Crowded offices – they do a good job but their roof is leaking.
- Inspect often this situation to make sure proper care is given. Have power to remove elders to better care. This statement is in reference to statement #3 in Goal 6.
- See statement #3 in Goal 6-Amen!
- Stop Illegal Aliens! They are costing Arizona \$\$\$\$!
- Punish employers who hire them and that includes state, county and city agencies (Oh, yes they do!)

Avondale City Hall 3/30/07:

- Within the gov's department- sometimes silo may be developed where the population is often put aside to technical aka: ADOT & Division of Aging breakdown the silos. Their policy is affecting certain populations or all populations.
- Transportation and bilingual staff.

Comments:

Prescott Community Center 4/13/07:

- We need to help seniors stay in their own home. Services should always be affordable! The poor keep falling through the cracks of services.
- Partnership between Navajo Nation, County and State programs and services to provide pertinent information to seniors.
- Think statewide and nationwide. The families in every home need to provide services with their grandparents or parents to travel with them to attend meetings. Voice their concerns and need to collaborate their wants and needs etc.
- Navajo Nation needs money to provide proper care to elders on the Navajo reservation.
- Many senior live in mobile homes, knowing the space is rented they cannot participate in safe and sanitary home repair, Winterization program. So homes are deteriorating- cant afford to pay for personal home repair, plumbing, etc...
- The State of Arizona need to work with the seniors to provide some funding to assist all senior of Navajo Nation, AZ for housing and utility payment. NTNA Electric, NNFI Water housing by N.H.A. and/or some own their own homes.
- Safe and affordable housing options need to be increased. AZ is a magnet for retiree's. However, seniors need legal protection from unscrupulous developers who are taking advantage of vulnerable seniors with dues and fees that keep going up without any recourse except to sell their property and move. AZ legislators and local officials should not approve development plans, which do not have an adequate water supply or which have community fees that the community members do not have control over. Give local officials the authority to deny the application.
- Provide more nursing assistant and nurses training.
- Continue to support & fund respite services for "Family caregivers", Adult day cares, in-home respite etc. (Especially Alzheimer/memory loss).
- We need our children who are willing to help us be supported by the agencies.

Globe City Hall 4/20/07:

- Listen to the elders.
- What are Core services? Is it uniform across the state?
- Navajo Nation is a large reservation and most of our elders need a place to go to congregate with other elderly people.
- The Navajo Nation is in need of more housing or building group homes near our reservation. Giving them things to do and learn more about their culture.

Tucson El Pueblo Senior Center 04/27/07:

- Affordable housing is needed and homestead execution rights needed for all citizens of Arizona.
- Accessible housing should provide looping so that hard-of-hearing people with hearing aids can benefit.
- The more organized and collaboration between the different aging and adult services the more care will be given to those senior citizens who are of most need. Some local service units lack services and many elderly suffer nutritional services as a result.

Goal 7: Promote quality of care in all aging services.

- Implement the Governor's Executive Order 2007-01 - Ensuring Quality in Long-Term Care
- Review and revise policy and procedure manuals for internal use and the provider network as necessary.
- Ensure health and wellness policies balance the needs of the elderly with respect to wellness and independency.
- Develop and/or improve quality resource management tools that support process improvement.

Comments:

Parker Senior Services 03/16/07:

- Health Department in Mohave County is damaging the food distribution by requiring un-conventional refrigeration at food banks. Although home built refrigeration meets health standards for temperature maintenance the health department is requiring expensive commercial equipment.
- #1-Please do this order 2007-01 – we need Long-Term Care.
- #2-Please keep the languages (words) simple so we older people can understand the manual! No Lawyer Talk!
- #3-We don't need any more laws pass-we need more money!
- #4-Do we really need more people on the Government payroll? Can't the people that is all ready there do the jobs?
- Policies and procedures need to be simple and effective—too often they become barriers that impede the goal.

Paradise Valley Services 03/23/07:

- Cave Creek Road to I-17 curbing to Dunlap-Really needs some repairs. I have a little car and bumps are on the inside.
- Illegible Word 7th Ave and Dunlap going West 19th Ave There is a school seven hotels but Dunlap looks like it could use some improvements
- Art Institute design some bus stops
- Having lost a family member to neglect in a care home it is so critical. But you must increase staff to do so!!! Referring to Statement #1 under Goal 7.
- Monitor and check all nursing homes in the Arizona. Most are a disgrace! Bad care, Bad Food. Are there any regulations, if so, who enforces? Do something about this _Period!!

Avondale City Hall 3/30/07:

- Nursing homes whether veteran or resident need assistance with funding and/or evaluation of personal services aka: telephone service, socialization; tv's that work, stuffing, etc.

Prescott Community Center 4/13/07:

- We need funding from State of AZ to operate our centers on the reservation or two of our senior centers will be closed from Tuba City Agency, Help!!!!
- Teach agency employees more about the past of older people. Understanding would improve services to seniors.
- Adult- In home care under relatives/family caregivers. Not to discourage Nursing care away from Navajo community! Have Recreation/Gymnasium centers to promote good health.

Comments:

- More federal/State funds to provide proper care to our elders. Navajo Nations facing a big budget cut to Navajo elders services care. We don't need that. We need more money to get out to rural areas that really need this care and services.
- Increase survey and licensing inspections. Increase Ombudsmen's programs and increase requirements for families.
- Big gap from community services to ALYCCS long-term care in homes. Help would cut down state costs in nursing homes.

Globe City Hall 4/20/07:

- More funding.
- As in-home services are being provided in to greater #'s it is important to provide an assurance for participants to receive quality care. The Ombudsman program must be funded to be able to address both institutional care and in-home care.
- Hope that in the future the elders can be eligible for long term care and will not have to be transported off the reservation to be cared for.
- AHCCCS eligibility requirements are unrealistic, especially for elders who live on a fixed income.

Tucson El Pueblo Senior Center 04/27/07:

- Look at innovative programs like a pilot program to fund certified pharmacists as providers of service for AHCCCS and fund preventative dental care for poor seniors.
- Is it really policies that need change or actual service delivery?
- Continue ALTCS programs with funding also of the Triple A programs. Put Triple A into the rural areas like you do in Phoenix/Tucson.
- We need a concentration of resources for rural areas to develop aging service infrastructures such as: more assisted living, day activity, health care, home health and caregivers providers.
- Each day more care is needed in quality services to the elderly citizens of the Navajo Nation, where senior citizen services are most lacking. Many of these elders don't know how to fend for themselves due to lack of education and lack of transportation services to local adult centers.

Goal 8: Promote effective and responsive management for all aging services.

- Integrate departmental services in order to effectively serve the family unit.
- Develop diverse leadership.
- Enhance technological ability to allow better access to client data and program reports.

Comments:

Parker Senior Services 03/16/07:

- #1-Don't we all have computers and e-mail in place now?
- #2-Don't we all ready have this in effect?
- #3-Same as answer #1?
- Resources need to be adequate to serve the growing needs.

Comments:

Paradise Valley Services 03/23/07:

- Alzheimer research so available here in Maricopa County. State support should help reduce number of patients, also costs (\$) and cost to Arizona families.
- Extra Income Medicare help for co pays. Many people own their homes but if they are making low SS they get benefits. Please include one's rent when asking income.
- More useful technology, including the states E-health initiative.
- Medicare an article in AZ Republic paper cutting back on meds IVIG. I get the feeling after you are 60 and I worked 32 yrs in one place – hospital-but left with no retirement living off of SS. But yet city and state workers get great pensions for life. And don't my services stops when I am 65-a little over \$100.00
- Stop cutting back jobs and employees, so that services can be handled by timely and well. Do not retain employees who do not produce. Private industry do not retain, but weed out non productive employees. Government should follow suit.
- Create a seamless stream of care for the senior and their family. Referring to statement under Goal 8 number 3.
- Absolutely not easy to find out what type of problems care facilities have had.

Avondale City Hall 3/30/07:

- The silo affect to holistic services funding resources at same level is ridiculous with the populations growing.
- Transportation and length of time waiting.

Prescott Community Center 4/13/07:

- One stop shop and Internet services to receive information.
- Educate the Navajo Nation Council delegates on the importance of elderly care and services out on the reservation. No more budget cuts to elderly services.
- More budget for NACOG in North Arizona.
- We need added vehicles for transport to help us (elderly) effectively.

Globe City Hall 4/20/07:

- Navajo Nation is a large Reservation and our elders need a place to go for entertainment.
- Our local senior center Director has ended all volunteer group activities- treating us like retarded children- making us feel unworthy, unwanted and unhappy- so we avoid the center.

Tucson El Pueblo Senior Center 04/27/07:

- Support funding for CHC's for electronic medical records and support what works-what has proven track record.
- Transportation, Transportation.
- Easier Access to information. More funding for a system to simplify finding help.
- Better public relation news media. A special weekly program on TV and a special column in newspaper.
- More job connections for seniors.
- Substitute need for pay day loans places with community-based credit unions.
- Make it a one-stop shop such as PCOA. Fund PCOA with ways to integrate all services together and eliminate duplications.

Comments:

- The senior citizens of the Navajo Nation need more highly educated and competent professionals who will look after the senior citizens needs by developing modern infrastructures at the local units by utilizing professional management systems.

Appendix D: Draft Action Plan