



**EASTERN AREA
AGENCY ON AGING**

(DRAFT)

**Eastern Area Agency on Aging
Area Plan for Older Americans Act
Funded Services**

2020 -2024

(October 1, 2020 – September 30, 2024)

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AREA PLAN ON AGING 2020-2024

VERIFICATION OF INTENT

The Area Plan on Aging is hereby submitted for the Hancock, Penobscot, Piscataquis, and Washington County Planning and Service Area for the period FY 2020 through FY 2024. It includes all assurances and plans to be followed by the Eastern Area Agency on Aging under provisions of the Older Americans Act, as amended during the period identified. The Area Agency on Aging identified will assume the full authority to develop and administer the Area Plan on Aging in accordance with all requirements of the Act and related State policy. In accepting this authority, the Area Agency on Aging assumes major responsibility to develop and administer the Area Plan for a comprehensive and coordinated system of services and to serve as the advocate and focal point for older people in the planning and service area.

The Area Plan on Aging has been developed in accordance with all rules and regulations specified under the Older Americans Act and is hereby submitted to the State Unit on Aging for approval.

Date

Dyan Walsh
Executive Director
Eastern Area Agency on Aging

The governing body of the Area Agency has reviewed and approved the Area Plan on Aging.

Date

Ellen Angel
President, Board of Directors
Eastern Area Agency on Aging

Mission Statement

It is the mission of Eastern Area Agency on Aging to provide older adults, caregivers and adults with disabilities in Hancock, Penobscot, Piscataquis and Washington counties in Maine with the information and access to resources they need to be healthy, engaged and supported in their communities.

Introduction

There are approximately 622 Area Agencies on Aging (AAA) across the nation. In Maine, there are five AAA's serving all 16 counties. The charge of AAA's in Maine and across the United States is to address the needs and challenges of older adults at the local, regional and state levels.

AAA's coordinate and offer supportive services that help to assist older adults to remain living independently and engaged in their communities. These supportive services are offered in collaboration with numerous community partner organizations that can respond to the needs of adults as they age, quickly and efficiently. Eastern Area Agency on Aging (EAAA) was established in 1973, and serves Penobscot, Piscataquis, Hancock, and Washington counties, a rural area of Maine, consisting of approximately 13,000 square miles.

AAA's are guided by statutes under the Older Americans Act administered by the Administration for Community Living (ACL) under the U.S. Department of Health and Human Services (DHHS) and by the State Unit on Aging under the Department of Human Services, Office of Aging and Disability Services (OADS) in Maine.

Executive Summary

Every four years, the federal Older Americans Act provides funding and guidance for service provision offered by Area Agencies on Aging. The Older Americans Act requires that Eastern Area Agency on Aging (EAAA) prepare and publish an “Area Plan on Aging”. This Area Plan for EAAA provides a comprehensive outline of the goals and objectives EAAA intends to implement for the four-year time period of October 1, 2020 through September 30, 2024. In preparing the plan, EAAA gathered feedback from two state-sponsored listening sessions coordinated by the Office of Aging and Disability Services (OADS) and facilitated by the Muskie School of Public Service in October 2019 in Brewer and Machias, an on-line survey targeting caregivers, a telephone survey of community members and four public listening sessions hosted in April of 2020 by EAAA in Brewer, Ellsworth, Meddybemps and Milo.

Since the last Area Plan (2016 -2020) was prepared, much has changed in the state of Maine but much has also remained the same. The population of aging adults in the state continues to increase, Maine’s median age continues to rise (currently 44.9 years), and the demand for services continues to grow. What has changed is that the aging network in Maine has worked diligently to develop new and productive partnerships with higher education, health care and private insurers. Also, the importance placed on data collection to accurately reflect individual and community need has significantly increased. As a state, we also find ourselves feeling a sense of urgency because of the shrinking population of working age adults who can provide services to assist aging adults to live independently in their communities.

This plan includes a description of the current programs funded by the Older Americans Act and offered by EAAA. EAAA’s staff and volunteers continue to provide the core services under the Older Americans Act, including information and assistance, benefits counseling, congregate and home-delivered meals, nutrition counseling, evidence-based health programming, and caregiver support. These core services will continue to be a top priority for the next four years.

In addition, during the next four years, EAAA will assess and research other types of services and alternative funding models to support the ongoing growth of older adults in our region and the complex needs of elder caregivers.

The results of the public listening sessions and the community surveys provided valuable insight to help guide EAAA’s ongoing discussions and planning. Over the next four years, EAAA plans to address many of the needs/concerns raised by community members. Our main priorities over the next four years include:

- Enhancing outreach to rural communities, specifically Washington County and northern Penobscot County
- Focusing outreach to specific populations, populations to include but not limited to, older Native Americans, LGBTQ older adults, and older adults experiencing homelessness
- Raising public awareness through various media sources of available resources and supports and how community members can access those services
- Educating community members and providers regarding the range of options and quality of the meals provided through Meals-on-Wheels and congregate dining

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- Increasing the number of meaningful and productive activities available to care partners and those receiving their care
- Providing wellness and educational activities to address memory related cognitive impairment concerns
- Offering creative activities to address those at risk of and experiencing social isolation and loneliness
- Collaborating with partner agencies and health care providers to reduce hospital readmissions and proactively provide services that address health inequities caused by social determinants of health

The demographic shift brought on by the aging of the baby-boomer generation that is reflected in the national population is well advanced in Maine. Currently in Maine, 23 percent of the population is age 60 and older, with projections of more than 30 percent expected by 2030. In the EAAA service area, approximately 27 percent (68,296) of the overall population is age 60 or older. This demographic will surely necessitate creative and collaborative thinking in order to respond to the increased numbers of older adults with limited financial means and the decreasing numbers of working age adults available to serve them.

The state of Maine also has many opportunities to capitalize on responding to the needs of a rapidly aging citizenry. They include:

- An ever expanding Age Friendly network comprised of almost 70 towns and communities in Maine as of February 2020
- A collaborative provider network to deliver community-based support services
- A robust volunteer network to provide services in some of the most rural areas of the state
- A strong statewide leadership and support arm provided through the Office of Aging and Disability Services

To fulfill its mission and provide Older Americans Act-funded services, EAAA will continue to partner with Age Friendly communities across our region. These Age Friendly initiatives are comprised of community members who utilize EAAA services and community provider organizations who refer to EAAA and also receive referrals from our organization. In addition, EAAA will work the other four area agencies on aging in Maine that comprise the Maine Association of Area Agencies on Aging. Additional active partners in our efforts include primary care, higher education, community-based organizations, municipalities and community-led volunteer groups.

The EAAA 2020 -2024 Area Plan reflects recognition of the needs of our region while also taking into consideration the available workforce and the collaborative partnerships needed to provide those services and supports that respond to the range of identified needs.

Needs Assessment

Eastern Area Agency on Aging strives to meet the unique and complex needs of older persons living in Eastern Maine by providing a mix of direct services as well as connecting individuals to programs offered by partnering organizations. The needs of the four county region vary depending on income, health status, current housing situation and whether some lives alone versus with a spouse/partner, or family member. Washington (18.2%) and Piscataquis (18.7%) counties have higher levels of community members living in poverty than the state average of 12.9%. Additionally, Hancock (48.1), Piscataquis (50.7) and Washington (47.6) counties also have a higher median age than the state of 44.9 years of age.

To accurately assess the needs of the EAAA service area for the development of the 2020-2024 Area Plan, community listening sessions and phone and on-line surveys were conducted in the fall of 2019 and the spring of 2020. The goal of the needs assessment was to identify trends and common themes provided by respondents to inform the goals identified in the Area Plan. The needs assessment provided valuable insights which served to inform the development of the Area Plan and guide the creation of our goals and strategies over the next four years.

Community Listening Sessions

There were two community listening sessions conducted in EAAA's service area in the fall of 2019. One was convened in Brewer in Penobscot County and one was convened in Machias in Washington County. Fourteen community members and providers attended each session. The Muskie School for Public Service facilitated the listening sessions and summarized the findings in a report shared with EAAA. The listening sessions focused on the topics of housing, transportation, nutrition, caregiver needs, isolation and safety. Here are samples of comments from attendees in Brewer and Machias:

➤ Food

- Machias attendees noted the need for food delivery, "there is nothing like that for rural areas; nothing for people who can afford food but cannot get to the grocery"
- Several participants in Brewer stated "they - and other older people they know - do not always have the energy to cook and would like more options for nutritious, high-quality prepared meals. Sometimes they rely on cereal or popcorn because they are too tired to cook and clean up, though they realize this is not the best option"

➤ Caregiver Needs

- Machias participants noted that "some community members were not aware of their own forgetfulness and early cognitive decline, and the accompanying need for periodic care. These individuals were identified as needing considerable help and support to stay safely at home"

➤ Isolation

- Machias participants shared that "isolation is a problem -- everything is 25 miles away"

➤ **Safety**

- Machias attendees mentioned “the worry of homes being broken into to steal medications”

Additional comments focused on the barriers that keep attendees from accessing needed services:

➤ **Information and Referral**

- One attendee in Brewer stated, “[s]ervices may exist and be available but people may not know”
- One community member in Machias noted coordination of services is needed at the county level stating “[w]hile sports rivalries and the independence [of our towns] is wonderful, we need to start working together again”

➤ **Navigation Support and Advocacy**

- One theme heard across both sessions in Brewer and Machias was how complicated and fragmented the current system is and how it creates barriers to accessing needed services. Attendees noted “the biggest barrier was negotiating the maze of services and nothing ties them together”
- Those in Machias and Brewer noted it was “a full time job to get services”. Participants in Brewer stated that “people are falling through the cracks” and “getting lost in the system”
- An attendee in Brewer noted that “when someone cannot get the information or help they need, they go to their police department and they may not have the answers: this results in the person getting increasingly frustrated and isolated”

Phone and On-Line Surveys

Additionally, there were two statewide surveys conducted by the Muskie School for Public Service. One on-line survey was primarily focused on gathering feedback from caregivers. There were 375 caregivers who took part in the survey statewide and 70 in the EAAA service area. The second survey, administered by phone, was directed at community members in the EAAA service area who are age 55 and older and live in a community setting in one of the four counties the agency serves. There were 489 respondents to the phone survey in the EAAA service area. The demographics from this survey are as follows:

- Penobscot County (62%)
- Hancock County (21%)
- Washington County (11%)
- Piscataquis County (6%)

The percentage of respondents mirrors the total population for each of the four counties in the EAAA service region.

Penobscot County 151,096
Hancock County 54,844
Washington County 31,490

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Piscataquis County 16,800

The age and sex profile of phone respondents to the EAAA phone survey are as follows:

- Age 55 to 64 (35%)
- Age 65 to 74 (38%)
- Age 75 to 84 (22%)
- Age 85 to 94 (4%)
- Age 95 and older (0%)

- Male (47%)
- Female (53%)

Many of the questions in the phone survey mirrored those asked at the community listening sessions. The focal areas were: transportation, housing, health status, caregiving, information and services and community.

➤ **Transportation**

- Most of the respondents to the community survey stated that transportation was not a barrier in getting to the places they needed to go. Ninety-seven percent stated they had no issues finding or arranging transportation. A large majority of respondents (73%) were below the age of 75 and had higher income than many consumers who utilize EAAA services. Also, due to the rurality of EAAA's service area and lack of public transportation there is a greater reliance on single occupancy vehicle transportation.

➤ **Housing**

- The majority of respondents (91%) own their own home, with a much smaller percentage (7%) who rent.
- Ninety-four percent stated their home met their current needs. For those who said their home did not meet their current needs (n=29), the majority (76%) stated it was due to the fact they had repairs they could not afford.

➤ **Food and Nutrition**

- The majority of survey respondents (93%) stated they usually had enough money to buy food. A larger majority (96%) said they had no issues preparing or cooking a main meal.
- Only a very small number of those surveyed (n=5) currently participate in the Meals-on-Wheels program. This is definitely a weakness in the study that a very limited number of current Meals-on-Wheels consumers were surveyed.

➤ **Health Status**

- Almost one quarter (24%) stated they had concerns about their memory and a similar number of respondents (21%) had concerns about the memory of someone they care for.
- In the last six months, twenty-four percent of respondents have felt lonely or disconnected, sometimes or often.

- Twenty-one percent of respondents have fallen within the last six months. Of those that have fallen (n=99), twenty-two percent needed someone's help to get up and eleven percent needed to go the emergency room. An additional eleven percent needed to see their doctor or medical provider after the fall.
 - Over one quarter (28%) stated that they would be very or somewhat interested in attending a workshop about how to stay healthy.
- **Caregiving**
- A large number of respondents to the on-line caregiver survey noted they (n=94) provide help regularly to someone else. Fifteen percent care for an adult age 60 or older, sixteen percent care for a person with a disability age 18-59 and four percent have assumed parental responsibility for a grandchild or a relative under the age of 18.
 - Caregivers shared they provide a variety of supports including transportation (77%), food and meal preparation (59%), financial management (55%), daily household tasks (51%) and help with medications (45%).
 - Caregivers identified their top ranking priority to be the need for respite (39%).
- **Information and Services**
- Seventy-seven percent of respondents access the internet through a home computer and twenty percent utilize a cell phone. Six percent noted they do not have access to the internet. Again, it is important to note that 73% of respondents were below the age of 75.
 - Thirty-two percent have called or used the internet to learn about EAAA.
 - In the last six months, fifteen percent have needed help with Medicare or had other health insurance-related questions.
- **Community**
- Overwhelmingly, people feel good about living in their current communities as they age. A combined sixty-six percent rated their community as a good, very good or excellent place to live as they grow older.

The feedback from the listening sessions and the results of the survey will guide the development of the EAAA area plan goals and strategic priorities for the next four years.

Context and Focus Areas

Older Americans Act (OAA) Core Programs

EAAA has been serving Penobscot, Piscataquis, Hancock, and Washington counties since 1973. With specially trained and dedicated staff and volunteers, EAAA provides older adults, adults with disabilities and caregivers with a variety of opportunities, resources and referral options. EAAA strives to meet the unique and complex needs of older persons living in its four county service area by providing a mix of direct services as well as connecting people to partnering agencies.

EAAA has been steadfast in offering OAA core programs during its 47 years of operation. These core Title III-funded programs include: congregate dining, home-delivered meals, caregiver services,

evidence-based wellness programs, information and assistance and Medicare counseling. Staff and volunteers will continue to offer these core programs across all four counties.

Congregate dining

EAAA currently has 20 congregate dining sites spread out over the four counties:

- Eight in Penobscot county
- Two in Piscataquis county
- Five in Hancock county
- Five in Washington county

These dining sites provide older adults not only a nutritious meal but an opportunity to connect and talk with other community members in an effort to combat social isolation and loneliness. During the next four years, EAAA will strategically plan for additional dining sites in geographic areas that are currently underserved. Additionally, the agency will seek feedback from dining site patrons to gather input for meal improvement and enhancement of on-site offered activities. EAAA dining site coordinators will ask diners for feedback on meals and actively involve them in menu planning. In addition, there will be an annual survey administered. An increased effort will also be made to market the availability of the dining sites to increase the number of attendees.

Home-Delivered Meals

In FY19, EAAA staff and volunteer delivered almost 89,000 meals to homebound community residents across 13,000 square miles. Through the Meals-on-Wheels program, volunteers and staff provide food and human connection to some of the most isolated older adults who are homebound and sometimes have little contact with those in their community. EAAA plans to continue to work with the current food vendor to improve the quality and the meal options available. EAAA will continue to request that Meals-on-Wheels consumers complete an annual survey to provide anonymous feedback. Feedback from the listening sessions noted that older adults, especially those in rural areas, have limited access to fresh fruits and vegetables. EAAA currently has an active partnership with a farm in Aroostook County to provide fresh produce during the summer growing season. EAAA nutrition staff will continue to develop new partnerships and create opportunities for collaboration with additional farmers.

Additionally, EAAA is working with St. Joseph's Hospital, the University of Maine Center on Aging and Sencio Systems under a nutrition innovation grant awarded through the Administration on Community Living. The partnership of these four organizations, will establish and test an innovative, technology-driven nutrition enhancement and self-management program for older adults with multiple chronic diseases. The goal of this three-year project is to improve the nutritional and health status of rural adults 60 and older with multiple chronic conditions immediately following hospital discharge. The anticipated outcomes are: 1) improved nutritional status; 2) improved health and health-related quality of life; 3) improved ability to age-in-place; and 4) high levels of satisfaction with services.

Caregiver services

The Maine Alzheimer's Association reports that in 2019 there were approximately 28,000 Mainers age 65 and older living with an Alzheimer's disease diagnosis. The majority of those individuals receive help in the form of unpaid care, usually provided by a family member or friend. The Alzheimer's Association estimates that in 2018 there were about 69,000 caregivers in Maine

providing 79,000,000 hours of unpaid care. The need to provide respite to the caregiver while also providing meaningful, engaging activities to the person they care for, is a priority for the agency over the next four years. Through a collaborative grant with SeniorsPlus, the area agency on aging in Western Maine, EAAA will strengthen partnerships with the healthcare delivery system and increase the capacity of staff and volunteers to detect memory loss and to serve caregivers and the person they care for. Staff and volunteers will be trained in the administration of a screening and referral tool to assess consumers for memory loss, connect consumers with memory loss services in the community, and provide supportive services utilizing the Music and Memory evidenced-based intervention.

Person Centered Planning

ADRC and Caregiver staff regularly provide options counseling to both consumers and caregivers. The purpose of options counseling is to help individuals identify and choose long-term services and support options that meet their preferences, strengths, needs, values, and circumstances. Options counseling by definition is an interactive decision-support process to assist individuals in making informed long-term choices.

EAAA staff will continue to provide options counseling in order to:

- a. Support participant-directed/person-centered planning for older adults and their caregivers across the spectrum of long-term care services, including home and community settings; and
- b. Connect people to resources.

Evidence-based wellness programs

The interest in wellness and enrichment activities has seen significant growth in the past four years. Falls prevention continues to be a key area of concern for older adults as noted in the survey with over 21% of respondents noting they had experienced a fall in the last six months. EAAA currently has trained staff and volunteers who offer various evidenced-based wellness classes focused on falls prevention. These classes include Tai Chi, Matter of Balance and Walk with Ease. EAAA will continue to research other evidence-based programs and identify alternate locations to offer classes outside of the greater Bangor area. Even though exercise is the primary benefit of attending these classes, EAAA hopes by expanding classes into more rural areas, it will also have the secondary advantage of reducing isolation and loneliness among older participants.

Information and assistance

EAAA also holds the designation of an Aging and Disability Resource Center (ADRC). The information and assistance staff, also known as ADRC Specialists, work to address the frustrations experienced by many older adults, adults with disabilities, and caregivers when trying to learn about and access long-term services and supports. The role of these staff is to provide the full range of available options including objective information, advice, counseling and assistance in an effort to empower individuals to make informed decisions about their long-term services and supports and more easily access public and private programs. The ADRC staff provide unbiased, reliable information and counseling to people with all levels of income. In FY19, ADRC staff helped over 7,000 community members connect to needed supports and services. A strong emphasis will be given to community outreach efforts over the next four years. These efforts, employed by EAAA staff, include ongoing education with existing and new volunteers, use of social media, community education and word of mouth by individuals who use EAAA services should have a direct

correlation to the number of calls for assistance received by ADRC staff. A focus of the outreach efforts will be to address the needs of specific underserved populations. These groups include, but are not limited to, older Native Americans, LGBTQ older adults, and older adults experiencing homelessness.

The variety of community services offered across eastern Maine is vast. The primary responsibility of any ADRC Specialist is to stay up-to-date on the latest community programs. One of the primary objectives over the next four years is to ensure that ADRC staff receive regular training sessions from various community providers so they can, in turn, share that information with individuals who contact the agency. Additionally, EAAA will create a new onboarding process for all new volunteers. Currently, EAAA receives support from over 300 volunteers annually. Many of these volunteers are in contact with individuals who are homebound and may have no other outside contact for days at a time. EAAA will improve the volunteer onboarding process to ensure, regardless of which volunteer coordinator they are working with, the volunteer will be provided with the information and tools needed to meet the individual's needs. EAAA will create a welcome packet, introductory webinar, and training curriculum to be shared with each new volunteer. A focus of the training will be on how to identify unmet needs and refer back to the ADRC for a full benefits screening.

Medicare counseling

Historically, the highest ranking reason why community members contact EAAA is to ask questions regarding Medicare counseling and other types of health insurance benefits and options. In FY19, specialized staff and volunteers provided counseling to over 3,500 individuals. The counseling included assisting consumers with applying for state and federal benefits that help to meet the obligation of copays, deductibles and premiums. These services resulted in an estimated cost savings to Medicare beneficiaries of over \$2.6 million dollars. With the demand for these services increasing due to the aging of the baby boomer population, EAAA continues to need volunteers who wish to be trained to provide Medicare counseling and community education sessions. An objective in the next four years is to place increased emphasis on volunteer recruitment for the Medicare counseling program and develop creative strategies to retain the current cohort of volunteers who have received specialized training.

EAAA Advisory Council

EAAA commits to reactivating the Advisory Council. The Advisory Council is a link between the community and EAAA, offering expertise and insight to EAAA staff and Board of Directors. The Advisory Council reviews the EAAA area plan, administration of the plan and the operations conducted under the plan.

The Advisory Council includes participants in programs and people who have specialized knowledge including service providers, participants or who are eligible to participate in programs assisted under the Older Americans Act, caregivers, service providers, representatives of the business community and local elected officials.

As stated in the Executive Summary, EAAA's priorities over the next four years are:

- Enhancing outreach to rural communities, specifically Washington County and northern Penobscot County

- Focusing outreach to specific populations, populations to include but not limited to, older Native Americans, LGBTQ older adults, and older adults experiencing homelessness
- Raising public awareness through various media sources of available resources and supports and how community members can access those services.
- Educating community members and providers regarding the range of options and quality of the meals provided through Meals-on-Wheels and congregate dining
- Increasing the number of meaningful and productive activities available to care partners and those receiving their care
- Providing wellness and educational activities to address memory related cognitive impairment concerns
- Offering creative activities to address those at risk of and experiencing social isolation and loneliness
- Collaborating with partner agencies and health care providers to reduce hospital readmissions and proactively provide services that address health inequities caused by social determinants of health

Objectives, Strategies and Performance Measures

EAAA has created a coordinated plan that outlines the objectives, strategies and performance measures the agency will put in place to achieve our stated goals over the next four years. These goals include: focusing outreach efforts on rural communities, increasing the frequency and range of activities for caregivers and those in their care, offering wellness and educational sessions that address memory concerns and additional activities that help to combat social isolation and loneliness. EAAA will continue to use various media platforms and resources such as social media, television, newspaper, newsletters and community presentations to spread the message about available services and supports.

EAAA will continue to work with local, state and federal leaders to advocate for older adults, adults with disabilities and caregivers who reside in our four county service area. EAAA will maintain our strong collaborative ties with current local, state and federal partners and identify new opportunities for collaboration to enable the provision of effective and efficient programming to those who receive services in Penobscot, Piscataquis, Washington and Hancock Counties. One mechanism for collaboration is active participation by members of the EAAA leadership team and staff in the Livable/Age Friendly Communities movement. EAAA is currently an active participant in the ongoing efforts of five Age Friendly communities in our region. As of May 2020 there were 21 towns, cities, and communities with this designation in the EAAA service area. That number is likely to increase into the future and EAAA staff will work to collaborate with newly formed Age Friendly communities as they arise.

EAAA will measure the impact, effectiveness and quality of the OAA core programs throughout the next four years and report those findings to the EAAA Board of Directors, OADS and the community. Collaboration and cooperation with the other four Area Agencies on Aging in Maine and the OADS to ensure consistency and accuracy of data collection and reporting is a primary focus over the next four years. To accomplish this goal EAAA will:

- Develop and implement statewide intake, assessment and referral standards

- Improve data collection methodologies using standard service definitions and utilize data management resources effectively to ensure statewide consistency

EAAA will seek input from community members throughout the life of the four year plan to provide additional opportunities for feedback and ensure that our leadership team, board of directors, staff and volunteers remain fully informed as to the needs of the communities we serve.

Objective		Strategy		Performance Measure	
1.1	<u>Title III B Access to Services:</u> Increase awareness of local services and programs available to older Mainers, adults with disabilities, and their care partners with an emphasis on transportation, housing, home maintenance, in-home supports, heating assistance, opportunities to socialize, and volunteer opportunities.	1.1.1	Identify emerging topics/trends and request feedback from direct line staff to determine what unmet needs consumers are reporting.	1.1.1.A	Identify at least 4 topics/trends that training is needed on.
		1.1.2	Educate staff on available community partner resources to address emerging topics/trends in unmet needs identified by consumers.	1.1.2.A	Provide at least 4 trainings per year.
		1.1.3	Promote available community partner resources using all outreach methods.	1.1.3.A	Increase promotion of community partner resources by 5% each year.
1.2	<u>Title III B Access to Services:</u> Promote the Aging and Disability Resource Centers at each area agency on aging in Maine as valuable resources of information and service navigation.	1.2.1	Educate new volunteers on the Aging and Disability Resource Center during the onboarding process.	1.2.1.A	Number of volunteers on boarded and trained per year.
				1.2.1.B	Increase number of calls by 1% per year.
		1.2.2	Utilize various outreach methods to highlight the services of the Aging and Disability Resource Center.	1.2.2.A	Increase number of people reached by these outreach methods by 5% per year.
				1.2.2.B	Increase number of calls by 1% per year.
1.3	<u>Title III B Access to Services:</u> Improve access to services and programs for underserved populations and their caregivers, such as older Native Americans, older New Mainers, LGBTQ older adults, older adults experiencing homelessness, remote island communities, rural and frontier communities, older adults with limited English proficiency, and older adults with sensory impairments.	1.3.1	Create a strategic plan to target specific populations each month with outreach activities.	1.3.1.A	Increase number of people reached by these outreach methods by 5% per year.
		1.3.2	Collaborate with community partners to promote activities that emphasize inclusion and diversity.	1.3.2.A	Participate in at least two meetings or events per year.
1.4	<u>Title III C Nutrition Services:</u> Ensure access to local congregate dining options.	1.4.1	Promote participation in congregate dining.	1.4.1.A	Increase number of meals served by 1% per year.
		1.4.2	Educate the community about dining options in rural areas.	1.4.2.A	Increase the number of consumers in rural areas by 1% per year.
1.5	<u>Title III C Nutrition Services:</u> Enhance the quality and variety of meals offered to older Mainers to allow for personal choice, dietary restrictions, and cultural differences.	1.5.1	Improve meal offerings through the development of a scale through an artificial intelligence platform to rate overall meal satisfaction in the three-year ACL Nutrition Innovation Grant.	1.5.1.A	Receive feedback from 60 study participants in year one, 80 in year two and 60 in year three.
		1.5.2	Educate community members and providers about the quality and types of meals offered.	1.5.2.A	Increase number of community education on nutrition and meal options by 1% per year.

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		1.5.3	Develop a new welcome packet for all meal programs to explain the quality and types of meal offered.	1.5.3.A	Number of new consumers who receive welcome packets.
1.6	<u>Title III D Evidence-Based Programs:</u> Maintain participation in evidence-based programs, including, but not limited to, SAVVY Caregiver, falls prevention, and chronic disease self-management.	1.6.1	Collaborate statewide with other area agencies on aging and community partners including higher education to promote falls prevention programs.	1.6.1.A	Increase number of partnerships by 1 new partner each year.
		1.6.2	Provide opportunities for ongoing training to ensure staff maintain required certifications and/or obtain higher level certifications.	1.6.2.A	Number of trainings attended.
		1.6.3	Promote Evidence Based Programs through outreach efforts to health care providers.	1.6.3.A	Present to 4 health care providers per year.
1.7	<u>Title III E Care Partner Services:</u> Explore ways to provide in-home services and supports such as Homemaker, Chore, and Home Delivered Meals to care partners of older Mainers.	1.7.1	Promote Doorstep Dining to care partners as a private pay option.	1.7.1.A	Increase number of participants enrolled in Door Step Dining by 1% per year.
		1.7.2	Train Meals on Wheels assessors through the Dementia Capable Maine grant to identify people living alone with dementia and memory and link them to additional services.	1.7.2.A	Train a minimum of 3 assessors on expanded assessment tool developed to include two new dementia-screening questions.
1.8	<u>Title III E Care Partner Services:</u> Enhance respite services to care partners of older Mainers to maximize the utilization of other care partner services, such as evidence-based programs, support groups, and counseling.	1.8.1	Provide meaningful and productive activities for care receivers while the care partner attends an activity as well.	1.8.1.A	Increase number of care receivers and care partners served by 1% per year.
1.9	<u>Title III E Care Partner Services:</u> Increase awareness of and access to the Family Caregiver Support Program to Older Relative Caregivers.	1.9.1	Track the number of community education initiatives that promote Family Caregiver Support programs to community-based organizations that offer support services to older adults caring for adult children with disabilities.	1.9.1.A	Increase the number of presentations by 5% each year.
				1.9.1.B	Increase the number of older relative caregivers by 1% each year.
1.10	<u>Assistive Technology:</u> Increase awareness of and access to public and privately funded Assistive Technology programs and resources.	1.10.1	Educate staff through informational sessions on assistive technology resources.	1.10.1.A	Offer at least one informational session on assistive technology resources per year.
		1.10.2	Promote available assistive technology resources through information and assistance services.	1.10.2.A	Increase number of Assistive Technology/Assistive Devices Call Topic by 1% per year.

EASTERN AREA AGENCY ON AGING
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1.11	<u>Advocacy</u> : Support capacity building initiatives to strengthen Maine's aging and disability service networks at the state and local levels through advocacy and participation in leadership activities.	1.11.1	Promote the use of AAA services through EAAA Leadership staff membership on various local, statewide and regional advisory committees and boards.	1.11.1.A	Number of boards and advisory committees' leadership is actively involved in.
1.12	<u>Advocacy</u> : Support local and statewide Age-Friendly initiatives through advocacy and participation in leadership activities.	1.12.1	Participate in various local, statewide Age Friendly advisory committees and boards through representation of EAAA Leadership.	1.12.1.A	Number of Age Friendly communities EAAA staff are actively involved in.
2.1	Develop and implement statewide intake, assessment, and referral standards to ensure consistency and increase efficiency.	2.1.1	Participate and provide input during OADS hosted planning sessions and trainings on any newly developed tools and standards.	2.1.1.A	Number of planning sessions and trainings attended by EAAA staff.
				2.1.1.B	Number of staff members who attended each planning sessions and trainings.
		2.1.2	Incorporate updates provided by OADS in EAAA policies, procedures and training.	2.1.2.A	Review and update employee references/resources to incorporate newly developed tools and standards at least once a year.
				2.1.2.B	Review and update new employee and volunteer training procedures to incorporate newly developed tools and standards at least once a year.
				2.1.2.C	Provide at least one training per year on statewide standards for staff.
		2.2	Improve data collection methodologies using standard service definitions and utilizing data management resources effectively to ensure statewide consistency.	2.2.1	Participate and provide input during OADS hosted planning sessions and trainings on any newly developed tools and standards.
2.2.1.B	Number of planning sessions and trainings attended by EAAA staff.				
2.2.2	Incorporate updates provided by OADS in EAAA policies, procedures and training.			2.2.2.A	Review and update employee references/resources to incorporate newly developed tools and standards at least once a year.
				2.2.2.B	Review and update new employee and volunteer training procedures to incorporate newly developed tools and standards at least once a year.

EASTERN AREA AGENCY ON AGING
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				2.2.2.C	Provide at least one training per year on statewide standards for staff.
2.3	Evaluate the effectiveness of services and programs in meeting the preference and unmet needs of older Mainers, adults with disability and their care partners using outcome measurements.	2.3.1	Complete annual nutrition program surveys to evaluate the effectiveness of services and programs in meeting the preferences and unmet needs.	2.3.1.A	Increase the number of participants who complete the survey by 1% per year.
		2.3.2	Administer 3-month and 6-month assessment from the ACL Nutrition Innovation Grant.	2.3.2.A	Receive feedback from 60 study participants in year one, 80 in year two and 60 in year three.
		2.3.3	Complete care partner satisfaction surveys from options counseling sessions.	2.3.3.A	Increase the number of participants who complete the survey by 1% per year.

ASSURANCES AND REQUIRED ACTIVITIES

The [INSERT AGENCY NAME] (the “agency”) has described in this plan all of the agency’s activities. The agency assures that these activities conform to the responsibilities of the area agency, laws, regulations, and State policy. The agency also agrees to administer its programs in accordance with the Act, the area plan, and all applicable regulations, policies, and procedures. The agency assures that it has written policies and procedures for carrying out all of its functions and that such procedures are available for review by the Office of Aging and Disability Services.

Older Americans Act Assurances, Sec. 306, Area Plans

(a) Each area agency on aging...Each such plan shall--

(2) 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 and behavioral 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;

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 sub-clause (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—

EASTERN AREA AGENCY ON AGING
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(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

(iii) with respect to the fiscal year preceding the fiscal year for which such plan is prepared –

(I) identify the number of low-income minority older individuals 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 (i).

(B) provide assurances that the area agency on aging will use outreach efforts that will—

(i) 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

EASTERN AREA AGENCY ON AGING
AREA PLAN 2020 -2024

(ii) inform the older individuals referred to in sub-clauses (I) through (VII) of clause (i), and the caretakers of such individuals, of the availability of such assistance; and

(C) contain an 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) 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;

(9) 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) 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) provide assurances that the area agency on aging will—

(A) maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships;

(B) 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;

EASTERN AREA AGENCY ON AGING
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(C) 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 contract or such relationship;

(D) 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 contract or such relationship;

(E) 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) provide assurances that preference in receiving services under this title will not be given by the area agency on aging to particular older individuals as a result of 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;

Older Americans Act Required Activities, Sec. 306, Area Plans

(a) . . . Each such plan shall— (6) provide that the area agency on aging will—

(D) establish an advisory council consisting of older individuals (including minority individuals and older individuals residing in rural areas) who are participants or who are eligible to participate in programs assisted under this Act, family caregivers of such individuals, representatives of older individuals, service providers, representatives of the business community, local elected officials, providers of veterans' health care (if appropriate), and the general public, to advise continuously the area agency on aging on all matters relating to the development of the area plan, the administration of the plan and operations conducted under the plan;

(F) in coordination with the State agency and with the State agency responsible for mental and behavioral 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;

(H) in coordination with the State agency and with the State agency responsible for elder abuse prevention services, increase public awareness of elder abuse, neglect, and exploitation, and remove barriers to education, prevention, investigation, and treatment of elder abuse, neglect, and exploitation, as appropriate.

EASTERN AREA AGENCY ON AGING
AREA PLAN 2020 -2024

Date

Dyan Walsh
Executive Director
Eastern Area Agency on Aging

Date

Ellen Angel
President, Board of Directors
Eastern Area Agency on Aging

APPENDIX A

PUBLIC HEARING COMMENTS AND CORRECTIONS

***** To be added after Public Sessions in June 2020*****

A public notice was posted on the EAAA website on June 1st and emailed to approximately 2,900 community members through the agency e-Newsletter. The public notice was published the week of June 1st in the following local newspapers: the Bangor Daily News, Ellsworth American, Calais Observer and Eastern Gazette. The public notice was also posted the EAAA Facebook page on June 4th.

Eastern Area Agency on Aging will hold public hearings on June 22nd and 23rd for its draft 2020-2024 Area Plan on Aging. These public hearings will be held virtually and preregistration is required. During the public hearings, comments on the draft plan are welcome and will help to inform the final document submitted to the Office of Aging and Disability Services. A copy of the draft plan is available as of June 1st by calling the agency at 941-2865 or accessing the website. Written comments on the plan must be received by 8:00 a.m. on Friday, June 26, 2020, and can be mailed to the agency at 240 State Street, Brewer ME 04412 or emailed to dwalsh@eaaa.org.

Public Hearing Comments Received with Responses: To be added after completion of the public hearings.

Written Comments Received with Responses: To be added by June 26, 2020.

APPENDIX B

LIST OF BOARD OF DIRECTORS

Eastern Area Agency on Aging Board of Directors 2020-2021

Nelson Durgin (2021)

Penobscot County

62 Fairways
Bangor, ME 04401
207- 947-8419
caned62@roadrunner.com

Richard Swett (2021)

Piscataquis County

157 Dawes Road
Dover Foxcroft, ME 04426
207 564-8926
randcswett@me.com

Ellen Angel (2022) President

At Large

128 Broadway
Bangor, ME 04401
207-974-3028
eangel@amesmaine.com

Ron Gastia (2023)

Penobscot County

1868 Ohio Street
Bangor, ME 04401
207 947-1231
ron.gastia@voanne.org

Vacant (2020)

Piscataquis County

Tamara Bryant (2021) Treasurer

At Large

1180 Kenduskeag Avenue
Bangor, ME 04401
207-478-8597
moosesmaine2@gmail.com

Joyce Maker (2021)

Washington County

89 Lafayette Street
Calais, ME 04619
207 454-2327
gimaker@gmail

Jack Corrigan (2022) Vice-President

Hancock County

P. O Box 1897
Bucksport, ME 04416
207-469-2869
corriganj6@gmail.com

Jeanine Mallar-Heald (2021)

At Large

250 Davis Road
Alexander, ME 04964
207-255-9262
jmallar@machiassavings.com

David C. Burns (2023)

Washington County

159 Dodge Road
Whiting, Maine 04641
207-733-8856
senatorburns@myfairpoint.net

Vacant (2022)

Hancock County

Jim Peary (2023)

At Large

10 Ricker Hill Rd.
Jackson, ME 04921
207-722-3477
jimpeary50@gmail.com

Jaime Rogers (2023) Secretary

At Large

47 Pleasant Street
Passadumkeag, ME 04475
207-9736491
jbrogers@emhs.org

Vacant (2021)

At Large

Claudette O'Connell (2022)

At Large

320 Howard St.
Bangor, ME 04401
207-942-6137
cladet456@gmail.com

APPENDIX C

LIST OF CURRENT SERVICES

While core OAA services are currently offered in each county, there are service gaps within each county due to lack of infrastructure, increased costs, availability of volunteers and rurality.

List of Current Services Older Americans Act Services Provided by EAAA in FY19

Name of Program	Description	Number of Consumers Served	Number of Service Units	County
Congregate Dining	Delicious meals and socialization for older adults	908	23,398	Penobscot Piscataquis Washington Hancock
Evidence-Based Wellness Programs	Wellness program support for older adults living well and aging well in their communities	318	7,011	Penobscot Piscataquis Washington Hancock
Caregiver Services	Support and education to individuals caring for loved ones - including Alzheimer's disease/dementia	733	2,138	Penobscot Piscataquis Washington Hancock
Home-Delivered Meals	Meals-on-Wheels provided to older adults 60 years of age or older who are homebound and unable to leave their residence without assistance; unable to prepare a meal and have no one available to prepare a meal. Door Step Dining	725	88,958	Penobscot Piscataquis Washington Hancock
Information and Assistance	Office appointments, home visits and telephone calls linking individuals with available services.	7,074	15,136	Penobscot Piscataquis Washington Hancock
Medicare Counseling	Empowering, educating, and assisting Medicare-eligible individuals, their families, and caregivers	3,582	6,782	Penobscot Piscataquis Washington Hancock

EASTERN AREA AGENCY ON AGING
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	through objective outreach and counseling to help them make informed health insurance decisions that optimize access to care and benefits.			
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APPENDIX D

AREA AGENCY ON AGING DIRECT SERVICE WAIVER REQUEST FOR 2020-2024 (as required by OADS policy 10-149, Ch. 5, Section 30.09)

SECTION I. Eastern Area Agency on Aging

2/14/2020

A. AGENCY NAME: Eastern Area Agency on Aging

B. DIRECT SERVICE DESCRIPTION: Direct Provider of Congregate meals

C. SPECIFIC SERVICE NEED:

- i.** Identify and fully describe the specific problem, requirement, or need that the service(s) is intended to address and makes the services necessary.
 - ii.** Explain how the Agency determined that the services are critical or essential to agency responsibilities or operations and/or whether the services are mandated.
- i.** EAAA's Nutrition Program provides congregate, social contact, and access to other services to eligible persons as described by the Older Americans Act and Office of Aging and Disability Services Policy Manual, section 65. EAAA conducts Nutrition Education, as well as a variety of outreach & community education programs at the congregate sites. The services are managed at EAAA by a full time Nutrition Director, as required. EAAA operates or supports 20 congregate dining sites in Eastern Maine. These are volunteer staffed dining rooms that operate on in-kind contributions of sites, staff, and donations. The Nutrition Program manages a volunteer force of approximately 260 dedicated people, who work together as network to provide a high level of service and information to seniors throughout EAAA's 13,000 square miles. The Nutrition Program is publicized through the agency brochure, website, e-newsletter, health fairs, community education presentations, local newspapers, and television spots.
- ii.** Older adults in rural Eastern Maine face extreme transportation challenges. It is critical that consistent dependable access to food is available to older adults through EAAA's territory. Congregate meals in their own communities allow older adults to receive nutrition meals, as well as, vital information and services distributed by EAAA's network of staff and volunteers.

D. AVAILABILITY OF OTHER RESOURCES TO DELIVER GOODS OR SERVICE:

Please explain why:

- i.** there is insufficient staffing, experience, expertise and/or resources available within the SERVICE AREA and/or;

ii. there are no other resources (local, state, or federal agencies) external to the Agency who can perform the service more efficiently, more cost effectively or with comparable quality.

ii. EAAA is requesting a waiver to be the direct meals provider to ensure an adequate supply of service over the 13,000 square mile service area. There are no other providers available to cover the entire region. In addition, EAAA has secured a credit line that allows the agency to ensure a continuity of service throughout the contracting and payment process.

Signature

Date

SECTION II. (Office of Aging and Disability Services Response)

Click here to enter a date.

A. COMMENT (s): Click here to enter text.

B. REQUEST STATUS:

Approved:

Rejected:

Pending:

Additional Comment(s): Click here to enter text.

Paul Saucier

Date

Director, Office of Aging and Disability Services
Maine Department of Health and Human Services

AREA AGENCY ON AGING
DIRECT SERVICE WAIVER REQUEST FOR 2020-2024
(as required by OADS policy 10-149, Ch. 5, Section 30.09)

SECTION I. Eastern Area Agency on Aging

2/14/2020

A. AGENCY NAME: Eastern Area Agency on Aging

B. DIRECT SERVICE DESCRIPTION: Direct Provider of Enrichment and Wellness Activities

C. SPECIFIC SERVICE NEED:

- i.** Identify and fully describe the specific problem, requirement, or need that the service(s) is intended to address and makes the services necessary.
 - ii.** Explain how the Agency determined that the services are critical or essential to agency responsibilities or operations and/or whether the services are mandated.
-
- i.** EAA receives funding through Title IID to provide a limited amount of evidence-based health programming. Additional wellness and enrichment classes are needed to meet the demands of older adults. There are limited amounts of community-based wellness classes that are focused specifically on adults age 50 or older.
 - ii.** EAAA is ideally suited to develop trainings and partnerships, leverage facilities and volunteers, and market the growing array of evidence-based healthy aging programs and enrichment and wellness activities that will enable seniors to stay healthy, manager their chronic disease better, and reduce the incidence of falls.

D. AVAILABILTY OF OTHER RESOURCES TO DELIVER GOODS OR SERVICE:

Please explain why:

- i.** there is insufficient staffing, experience, expertise and/or resources available within the SERVICE AREA and/or;
 - ii.** there are no other resources (local, state, or federal agencies) external to the Agency who can perform the service more efficiently, more cost effectively or with comparable quality.
-
- i.** EAAA is the only social service agency to have both volunteer and per diem staff available to offer evidence-based health programs in a community-based setting across our four-county service area.
 - ii.** Other enrichment activities such as line dancing, chair yoga, art classes, etc. are additional fee-based classes that provide community based group classes outside of the evidence-based programming.

EAAA requests a waiver to provide fee-for-service enrichment and wellness activities, outside of the evidence-based activities funded through Title IIID, for aging adults in Penobscot, Washington, Piscataquis, and Hancock counties. Income and expenses for these enrichment and wellness activities will be tracked and segregated.

Signature

Date

SECTION II. (Office of Aging and Disability Services Response)

Click here to enter a date.

A. COMMENT (s): Click here to enter text.

B. REQUEST STATUS:

Approved:

Rejected:

Pending:

Additional Comment(s): Click here to enter text.

Paul Saucier

Date

Director, Office of Aging and Disability Services
Maine Department of Health and Human Services

AREA AGENCY ON AGING
DIRECT SERVICE WAIVER REQUEST FOR 2020-2024
(as required by OADS policy 10-149, Ch. 5, Section 30.09)

SECTION I. Eastern Area Agency on Aging

2/14/2020

A. AGENCY NAME: Eastern Area Agency on Aging

B. DIRECT SERVICE DESCRIPTION: Direct Provider of Home Delivered meals

C. SPECIFIC SERVICE NEED:

- i.** Identify and fully describe the specific problem, requirement, or need that the service(s) is intended to address and makes the services necessary.
 - ii.** Explain how the Agency determined that the services are critical or essential to agency responsibilities or operations and/or whether the services are mandated.
-
- i.** EAAA's Nutrition Program provides home delivered meals, social contact, and access to other services to eligible persons as described by the Older Americans Act and Office of Aging and Disability Services Policy Manual, section 65. The services are managed at EAAA by a full time Nutrition Director, as required. Through EAAA Home Delivered meals are available in 155 communities in Eastern Maine. Most of the delivery routes and packing and distribution activities are completed by volunteers and operate out of donated spaces. The Nutrition Program manages a volunteer force of approximately 260 dedicated people, who work together as network to provide a high level of service and information to seniors throughout EAAA's 13,000 square miles. The Nutrition Program is publicized through the agency brochure, website, e-newsletter, health fairs, community education presentations, local newspapers, and television spots.
 - ii.** Older adults in rural Eastern Maine face extreme transportation challenges. It is critical that consistent dependable access to food is available to older adults through EAAA's territory. Home Delivered meals allow older adults to receive nutrition meals, as well as, vital information and services distributed by EAAA's network of staff and volunteers.

D. AVAILABILITY OF OTHER RESOURCES TO DELIVER GOODS OR SERVICE:

Please explain why:

- i.** there is insufficient staffing, experience, expertise and/or resources available within the SERVICE AREA and/or;
- ii.** there are no other resources (local, state, or federal agencies) external to the Agency who can perform the service more efficiently, more cost effectively or with comparable quality.

- ii. EAAA is requesting a waiver to be the direct meals provider to ensure an adequate supply of service over the 13,000 square mile service area. There are no other providers available to cover the entire region. In addition, EAAA has secured a credit line that allows the agency to ensure a continuity of service throughout the contracting and payment process.

Signature

Date

SECTION II. (Office of Aging and Disability Services Response)

Click here to enter a date.

A. COMMENT (s): Click here to enter text.

B. REQUEST STATUS:

Approved:

Rejected:

Pending:

Additional Comment(s): Click here to enter text.

Paul Saucier

Date

Director, Office of Aging and Disability Services
Maine Department of Health and Human Services

AREA AGENCY ON AGING
DIRECT SERVICE WAIVER REQUEST FOR 2020-2024
(as required by OADS policy 10-149, Ch. 5, Section 30.09)

SECTION I. Eastern Area Agency on Aging

2/14/2020

A. AGENCY NAME: Eastern Area Agency on Aging

B. DIRECT SERVICE DESCRIPTION: Private Pay Home Delivered meals

C. SPECIFIC SERVICE NEED:

- i.** Identify and fully describe the specific problem, requirement, or need that the service(s) is intended to address and makes the services necessary.
- ii.** Explain how the Agency determined that the services are critical or essential to agency responsibilities or operations and/or whether the services are mandated.

- i.** EAAA seeks a waiver to provide therapeutic and other specialized dietary types of meals on a private pay basis. This waiver would assure an adequate supply of private pay specialty affordable meals to the region from a trusted source. The waiver would allow EAAA to provide home delivered meals to those not qualified for Home Delivered Meals under Title III. Provision of private pay meals will not, in any way, detract from EAAA's ability or willingness to serve those in greatest economic or social needs. EAAA is currently providing private pay meals but does not market the serve aggressively. When a request comes in, and EAAA is unable to satisfy the consumer with Title III services, they are offered the specialty meal alternative. OADS funds are not used to offset the cost of private pay meal services, the income and expenses will be tracked and segregated. Any surplus revenue will be used to help sustain and expand the Title III nutrition program.
- ii.** EAAA frequently has requests for special diets from consumers in our region and was unable to offer such a meal due to cost and unreliability of donation income. Also, consumers who are not eligible for home delivered meals have limited options for obtaining nutrition meals in most of EAAA's coverage area.

D. AVAILABILITY OF OTHER RESOURCES TO DELIVER GOODS OR SERVICE:

Please explain why:

- i.** there is insufficient staffing, experience, expertise and/or resources available within the SERVICE AREA and/or;
- ii.** there are no other resources (local, state, or federal agencies) external to the Agency who can perform the service more efficiently, more cost effectively or with comparable quality.

- ii.** There is no other service provider offering these services in EAAA's coverage area.

Signature

Date

SECTION II. (Office of Aging and Disability Services Response)

Click here to enter a date.

A. COMMENT (s): Click here to enter text.

B. REQUEST STATUS:

Approved:

Rejected:

Pending:

Additional Comment(s): Click here to enter text.

Paul Saucier

Date

Director, Office of Aging and Disability Services
Maine Department of Health and Human Services

AREA AGENCY ON AGING
DIRECT SERVICE WAIVER REQUEST FOR 2020-2024
(as required by OADS policy 10-149, Ch. 5, Section 30.09)

SECTION I. Eastern Area Agency on Aging

2/14/2020

A. AGENCY NAME: Eastern Area Agency on Aging

B. DIRECT SERVICE DESCRIPTION: Requirement to serve Congregate meals 5 or more days per week

C. SPECIFIC SERVICE NEED:

- i.** Identify and fully describe the specific problem, requirement, or need that the service(s) is intended to address and makes the services necessary.
- ii.** Explain how the Agency determined that the services are critical or essential to agency responsibilities or operations and/or whether the services are mandated.

iii. EAAA is requesting a waiver of the requirement to serve meals 5 or more days per week in the majority of EAAA's rural community meal sites. EAAA feels it is appropriate to continue to manage and develop sites that serve meals one to three times per week due to the rural nature of the region.

iv. EAAA's coverage area is over 13,000 square miles. Given the extreme transportation challenges faced by rural seniors in Eastern Maine, EAAA has focused on which communities have the greatest need. As well as which communities have partnership opportunities, volunteers are available, offer in-kind space, and express interest. The current sites are as follows:

Penobscot County-

Greater Bangor area:

All Souls Church, Bangor – Mondays, Wednesdays, Fridays

Bangor House, Bangor – Wednesdays

Heritage Colonial Circle, Brewer – Wednesdays, Fridays

Kiwanis Civic Center, Hampden – Thursdays

Roe Village, Hampden (NSIP) - Tuesdays

Parker Dining Orono (NSIP) - Mondays, Tuesdays, Wednesdays, Fridays

Dexter: The Gathering – Tuesdays and Thursdays

Millinocket: Stearns Senior Center – Mondays, Tuesdays, Wednesdays, Thursdays, Fridays

Piscataquis County-

Dover-Foxcroft: The Commons – Wednesdays

Milo: 3 Rivers Kiwanis - Tuesdays

Hancock County-

- Brooksville:** Brooksville Townhouse – Thursdays
- Franklin:** Pinebrook Apartments – Tuesdays
- Penobscot:** First Methodist Church – Mondays
- Ellsworth:** Meadow View Apartments – Wednesdays
- Ellsworth:** Friends in Action – Tuesdays and Thursdays

Washington County-

- Calais:** Palmer Lane Estates – Thursdays
- Lubec:** Sunrise Apartments – Tuesdays, Thursdays
- Machias:** Bluebird Restaurant (Dine Around) – 3rd Monday of each month
- Meddybemps:** Tuesdays
- Weston/Danforth:** First Settlers Lodge - TBD

D. AVAILABILITY OF OTHER RESOURCES TO DELIVER GOODS OR SERVICE:

Please explain why:

- i.** there is insufficient staffing, experience, expertise and/or resources available within the SERVICE AREA and/or;
 - ii.** there are no other resources (local, state, or federal agencies) external to the Agency who can perform the service more efficiently, more cost effectively or with comparable quality.
- i. There are insufficient financial and staffing resources to offer 5 day a week service throughout EAAA’s rural territory. In many locations, when staff or volunteer resources are available, the rural population does not have the demand to meet the minimum number of community members required to sustain the program five days per week. In those instances, the need and/or demand determines how frequently the site is opened, usually one to three days per week.

Signature

Date

SECTION II. (Office of Aging and Disability Services Response)

Click here to enter a date.

A. COMMENT (s): Click here to enter text.

B. REQUEST STATUS:

Approved:

Rejected:

Pending:

Additional Comment(s): Click here to enter text.

Paul Saucier
Director, Office of Aging and Disability Services
Maine Department of Health and Human Services

Date