

**ElderSource
Planning and Programs Committee Agenda
August 17, 2023
11:00 AM**

I. Old Business

A. Minutes

- June 15, 2023

B. ElderSource Programs

• Programs Report

- Program/Planning updates - (Fred)
- Report Highlights and Contract Updates (Terika)
- Surplus/Deficit Report (Terika)
- Numbers Served/Monthly Expenditures (CCE; ADI; HCE; OA3B/E; OC32/1)-(Terika)

• Community Service Report (Renee K.)

- Helpline
- Intake and Screening Team
- Medicaid Eligibility Team
- SHINE/SMP/MIPPA

• Direct Services Service Report (Fred)

Brief programmatic updates:

- Senior to Senior
- Caregiver Program(s)/Supports (*TCare program, etc.*)
- Telephone Reassurance Programs (*The Caring Connections Telephone Reassurance Program, etc.*)
- Tablet Program

• Updates

- Area Plan update-(Janet)

Programs Committee Minutes
10688 Old St Augustine Rd
Thursday June 15, 2023
11:00 AM
Via Zoom

Present

Barbara Greene
Cynthia Griffin
Walette Stanford

Staff

Linda Levin, CEO
Tameka G. Holly, COO
Trina Nullet, CFO
Fred Richards, VP of Plan/Prgs/Compl/Inclu
Janet Dickinson, Planner
Sherry Holmes, Administrative Assistant

Absent

Grady Williams - Excused

Meeting Called to Order

Walette Stanford called the meeting to order at 11:05 AM.

Approval of Minutes

A motion to accept the April 20, 2023, minutes was made by Cynthia Griffin and seconded by Barbara Greene. Motion was unanimously approved.

Programs Report

Fred Richards reviewed the following highlights:

Veterans Directed Care Program

This Program has gone from 83 Veterans enrolled in March 2023 to a total of 88 Veterans enrolled, a 5% increase over the past few months. Staff anticipates the Program will continue to grow. A full-time employee Jonathan Rosado has been hired and there is one full-time employee position still open.

Florida Disaster Fund Award (Volunteer Florida)

An MOU has been signed with the Volusia Interfaiths Agencies Networking in Disaster (VIND) on May 3 and on June 8 we signed a MOU with the St. Johns Housing Partnership with, Executive Director, Bill Lazar. Referrals are very slow to come in for this program. Fred continues to follow up with the partners.

USAging-Aging and Disability Vaccination Collaboration

Staff are still in the process of trying to launch this collaboration. Flagler Pharmacy and Flagler Fire Department are extremely interested in participating. ElderSource has engaged Area Health Education Center (AHEC). Tonia Harris, CEO of AHEC looks to partner with the Health Department, Walgreens, and the Hospitals. Also, there is development of a partnership with Disability Solutions for Independent Living (DSIL) located in Daytona Beach. We are awaiting budgets from both entities before submitting an application. The focus of this collaboration is on vaccinations, support services, transportation, personal support referrals and outreach and education.

Terika Scatliffe report highlights related to the DOEA contracts:

- APS cases had no issues with the review.
- Our review of the PSA4 Surplus/Deficits revealed a surplus of funds in CCE and \$300,000 was transferred to another PSA to assist them with spending down.
- The DOEA annual monitoring was completed in May and there were no findings but there were a couple of areas where the Department provided suggestions for improvement.

Contract Update:

- All HCE contracts have been signed. A short-term case management employee was hired for the Enhanced HCE program as she is working with people on the waiting list while our providers work with active clients. This contract has been extended to December 31, 2023.
- We will be transferring funds from St. Johns County to Baker County in CCE and from the City of Jacksonville to Aging True in RELIEF.
- EHEAP was supposed to expire on September 30. Department of Economic Opportunities shortened the contract and is moving contracting for this program to a state fiscal year from July through June. There is a surplus that will be transferred to another PSA. Currently working on the provider amendments.
- Providers have received their allocations for the Older Americans Act carryforward dollars and submitted their budgets. This information has been submitted to DOEA for our contract to be amended and then we'll do provider contract amendments.
- All are state funded programs ending June 30 and new contracts will be starting on July 1.

Surplus Deficit

Older American Act (OAA) Programs

- Title IIIB (*Support Services*)
- Title IIIC1 (*Congregate Meals*)
- Title IIID (*Health and Wellness*)
- Title IIIC2 (*Home Delivered Meals Programs*)
- Title IIIE (*Care Giver Support Program*)

Terika noted that we are spending appropriately, and there are no issues as many of the Programs are within 1-5 %.

General Revenue

Alzheimer Disease Initiative (ADI) and Community Care for the Elderly (CCE)

Providers have been doing their best to spend down appropriately, but unable to hit that mark under these two Programs. Some of this is still related to workforce issues. This surplus has been communicated to DOEA.

Home Care for the Elderly (HCE)

There is some surplus but expected to be spent out by contract end.

Local Service Programs (LSP)

Expected to be spent out by contract end.

Respite for Elders Living in Everyday Families (RELIEF)

Expected to be spent out by contract end.

2023 Funding

Linda Levin, CEO informed the committee that there will be increases in funding for some of the GR Programs. We will receive our allocation once the Governor signs the budget. Until then, we and our providers will be doing continuation level budgeting and contracts. The increases from the State will be brought back to the Board for approval and amendments will be made with the providers. We received Local Service Program (LSP) funding for nutrition services again with the support of Senator Yarborough and Representative Duggan, although it has been reduced by half to \$250,000. When the Governor signs the Budget, ElderSource will receive the contract from DOEA, and then contract with the providers. Jewish Family and Community Services also received LSP funding again and we will be managing that contract for the Department again.

ADRC Summary Report

Fred Richards reviewed the ADRC Summary with the committee in Renee Knight's absence. The report detailed the following information:

- Helpline
- Intake & Screening Team
- Medicaid Eligibility Team
- SHINE/SMP/MIPPA/BEC

ElderSource Programs and Services

Senior to Senior Program

Fred Richards noted that the main goal of this Program is providing financial assistance to seniors 60 years of age and above who are in a crisis. 230 seniors are to be served throughout the grant year. Currently there are 105 individuals served, which is 46% of the goal.

Caregiver Program(s) Supports

Fred updated the Committee on each of the programs below:

Caregiver Assessment & Referral (TCARE) Program

This is a Caregiver Support Program, funded by Florida Blue Foundation, that provides meaningful information and referrals that may help specific Caregiving experiences. There are 113 Family Caregivers being serviced through the Program (end of 2022).

YouMeCare Program

This is a resource/referral used in TCARE. Through a grant from Humana Foundation that can offer 50 Caregivers with 27 hours of respite care until October 31, 2023. So far, 22 Caregivers have been provided with a combined 381 hours of respite care as of May 31, 2023.

Powerful Tools for Caregivers

This is a six-week course where participants meet weekly over Zoom. Participants learn how to take care of themselves while caring for someone else.

Telephone Reassurance Program

The TRP is designed to reduce loneliness, isolation, depression, anxiety and to address cognitive decline. Regular phone calls from volunteers help seniors stay connected to their community and engage in meaningful relationships.

The Tablet Program

IN2L (It's Never Too Late) The Tablet Program is to make sure people stay connected. The number of active users changes each month. The number of users for April 2023 is 17. Staff are reaching out to non-participants to find out why they are not using them.

Community Health Navigator Program

A grant request was submitted to the Community Foundation on May 15th for \$25,000. The point of this Program is to help those individuals effectively navigate complex health care and social services delivery systems. Resources are out there but people do not know how to access them. Some of our goals would be to reduce hospital re-admissions, ensure access to quality care, assist with navigation, ensure a person is being served in the least restrictive environment, and assist with navigation. The projection is to engage 50-100 participants between the age 60 or older within the first year of the Program.

Area Plan Update

Janet Dickinson, Planner presented a Power Point presentation to the Committee on the status of the Area Plan. Janet noted that she is preparing the Area Plan for January 2024-2027.

Janet will hold the Volusia County Public Hearing on Thursday June 22 from 1:30 PM – 2:30 PM in the President’s Banquet Hall at Bethune-Cookman University located in Daytona Beach, FL. The Duval County Public Hearing is in the planning stage for July or August. Janet covered the following sections on the Area Plan.

Plan Sections - Completed or Nearing Completion:

- Introduction to the Area Plan
- Program and Contract Module Certification
- AAA Board of Directors; Advisory Council
- Funds Administered and Bid Cycles, Resources.
- Executive Summary; Mission and Vision Statements
- Profiles (identifies counties, communities, data on socio-demographics, resources, partnerships, etc.)
- Emergency Preparedness

Plan Sections - Still Delving Into:

- Performance and Targeted Outreach
- Unmet Service Needs and Opportunities
- Strategies part of Goals and Objectives
- Direct Service Waiver Request Forms
- Strengths, Weaknesses, Opportunities, and Threats (SWOT) Analysis

Janet has requested that the committee share their thoughts with her regarding the SWOT Analysis. This information is necessary within the next 3-4 weeks so members’ comments can be included within the Plan.

Area Plan: Next Steps

- Public Hearings
- Continue to complete sections of the Plan.
- Present draft of the Full Plan prior to the next committee meeting.
- Obtain Advisory and Board of Directors approvals.

(See slides 33-36 for detailed information)

Emergency – Disaster Preparations

Janet briefly discussed ElderSource's Emergency-Disaster Preparations with the group.

- Key Players
- Emergency Preparation Activities

(See slides 37-39 for detailed information.)

There was no further business for discussion and the meeting was adjourned.

Meeting adjourned at 11:50 AM

Minutes prepared by Sherry Holmes, Administrative Assistant

Veterans Directed Care Program

Service Trends (number enrolled) 86 July; 85 June; 85 May; 87 April; and 83 in March

Veterans are referred to this program through the Veterans Administration Medical Centers (VAMC) located in Gainesville and Orlando.

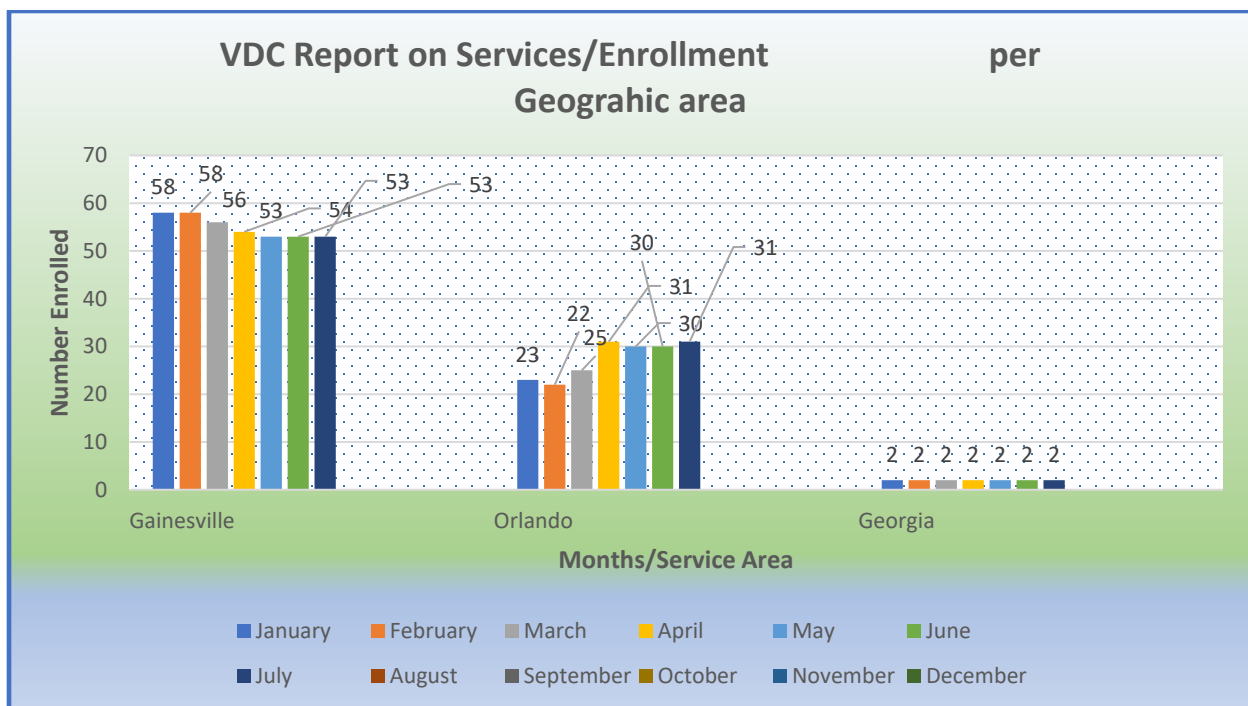
Orlando: 31 Active/enrolled with 0 pending veteran referral.

Gainesville: 53 enrolled Veterans and 31 pending veterans to be referred by VA.

South Georgia: 2 clients enrolled (One veteran has a monthly Admin fee of \$640, and the other is \$591 -total of \$1,231).

These numbers served may change when we start to receive the new referrals from Gainesville.

Referrals are projected to be sent two (2) per week. It was confirmed during the June monthly check-in with the VA and ElderSource that we are capable of handling two referrals per week beginning in August 2023.



Grants submitted for the month of August (new grants)

Humana Foundation: On 8/1/23 we submitted a renewal grant to the Humana Foundation to support our Caregiver Support Program in the amount of **\$199,999** (covers expenses of new staff as it will require 3.25 staff to successfully meet the proposed outputs/outcomes.

The following are the annual deliverables associated with this proposed, expansion project:

- By the end of the program, **150 (50% increase from last cycle of funding) family caregivers will be enrolled and actively engaged** in the self-paced caregiver education program. Forty percent of the enrolled family caregivers will be BIPOC or reside in rural communities.
- A minimum of **60 (20% increase from last cycle of funding) family caregivers** who score at the highest risk of burnout according to the burnout prevention program's assessment will be offered emergency respite services.

Florida Disaster Fund Award (Volunteer Florida)

The MOU for Ian Response grant signed on February 14, 2023 (\$600k). There is no timeline for expending these funds. There are no restrictions on the use of the funds, if it is used for **Hurricane Ian**. The grantor will not require any financial documents. The reporting requirements include the following:

- Summary of activities
- Counties activities took place in
- Successes/accomplishments
- Number of volunteers
- Number of volunteer hours
- Share two - three unique outcomes achieved with funding
- Number of survivors assisted

Geographic areas of focus/delivery of service: St. Johns; Volusia and Flagler

The following partnerships have been established or secured and/or are being developed:

St. Johns Housing Partnership, Inc.:

July Update (June activities): 6.8.23, received signed MOU from Bill Lazar, Executive Director of the St. Johns Housing Partnership, Inc. Organization is interested in being a partner with the project and will serve the St. Johns County area. Agency Mission: The St. Johns Housing Partnership is committed to promoting safe, decent and affordable housing in north Florida. We do this by creating links between the public and private sectors on projects that create low- and moderate-income housing, rebuild neglected homes and neighborhoods, thus benefiting disadvantaged areas and enhancing community economic and social development.

- **Process notes:** All the work will be done under Bill Lazar's contractor's license. Any subs who are hired will be licensed and insured.

- **Contact:** Bill Lazar, Executive Director, St. Johns Housing Partnership, Inc. 904-824-0902

VIND - Volusia Interfaiths/Agencies Networking In Disaster An in-person meeting was conducted on 5.3 at the VIND office, located at 326 S. Palmetto Ave Daytona Beach FL to finalize the partnership. This agency brings together existing inter-faith organizations, religious leaders, non-profits, emergency management and government agencies, and volunteers to share in the responsibilities of assisting those who have lost shelter, food, clothing, and accessibility because of various types of disasters.

MOU signed:

- **July Update (May/June activities):** The MOU was officially signed by the organization VIND on 5.3.23. Currently, they are assessing the needs and anticipate sending referrals/clients to us the week of May 29th.

Client Cases:

- **July Update (June activities)/80-year-old single male resides in Volusia County:** We received our first referral for a roof replacement on 6.27.23, in the amount of **\$9,200**. As was conveyed by the Program Coordinator at VIND: This is a referral for a roof replacement for one of our clients who was negatively impacted by Hurricane Ian. We have included his FEMA letter, ID, Roof Estimate along with W9 and liability insurance for said roofing company, pictures, and a short story about the client. The client has been fully vetted through VIND and there is no duplication of services.
- **August Update (July activities)/ 67-year-old single female living in Volusia County:** On 7.17.23 we received our second referral from VIND. The client experienced roof, ceiling and foundation damage from Hurricane Ian. The estimate for the work is **\$10,250**.
- **August Update (July activities)/68-year-old male and 62- year-old female living in Volusia County:** We received our third referral for a roof replacement on 7.25.23, in the amount of **\$10,500**. The couple resides in Deltona, Florida.
- **August Update: 76 year old widowed female living in Daytona Beach:** We receive our fourth referral on 8.1.23 (voucher pending), for a roof replacement in the **amount of \$10,500**.
- **August Update: 83-year-old retired Army veteran, resides alone in Orlando.** Roof damage from storm requires replacement in the **amount of \$14,350**

Total amount of pending expenditures/draw down of grant to date: \$54,800.

USAgings- Aging and Disability Vaccination Collaboration

Description of Funding Opportunity: Led by USAging, the Aging and Disability Vaccination Collaborative will distribute funding to enable organizations across the aging and disability networks to perform an array of vaccination promotion activities. Organizations selected for funding will host community vaccine clinics, provide in-home vaccinations, provide transportation to vaccination sites, and will conduct outreach and education to older adults and people with disabilities among other activities.

Collaborative Funding Opportunity- Summary

- **Focus:** Reach older adults and people with disabilities most at-risk to negative health consequences of not being adequately vaccinated.
- **Grant/Partnering Agency Amounts:** \$50,000/Agency and \$33/shot
- **Required Activities:** Meet all required grant activities either through internal agency operations OR in partnership with entities in your geographic area.

Eligible Service Deliveries: The required grant activities will be grouped into three overall categories of service delivery to include: Vaccinations, Supportive Services, and Outreach.

1. **Anticipated Number of Vaccinations--*Clinic/Event-based or In-Home* ***
Refers to the **number of vaccinations** rather than the number of people vaccinated. For instance, one individual *might receive both the COVID-19 and Influenza vaccinations*. In this example, you would *count two vaccinations*.
- **Flu & Covid and /Shingles and Pneumonia (Shingrix and pneumococcal) vaccinations:** On 1.26, in addition to Influenza and Covid the grant also allows for Shingles and Pneumonia shots (*can count multiple shots for individual served*)
- **\$33 per vaccination** in arms (estimated amount to cover administration and giving vaccination in the clinic)
2. **Receive Supportive Services ***
Supportive Services **include transportation to/from vaccination sites, assistance with scheduling vaccinations, personal support, and accompaniment** for those who need assistance acquiring the vaccination, and referral services to obtain vaccinations. *For example, assisting in signing up or coordinating activities for an individual to access a vaccine. Transportation and personal support, for example you can accompany an individual to the appointment or cover costs of transportation.*
3. **Receive Outreach and Education***
Refers to ensure that individuals in your service area have **complete and accurate information regarding vaccines** in general and grant-specific activities. The ADVC partnership will provide the opportunity for grantees to co-brand vetted information available through the ADVC Resource Hub.

Examples of Services Delivered:

- **Vaccinations** Community and/or In-Home
- **Supportive Services** Assistance to acquire appointments
- **Transportation**—arrange and/or provide
- **Personal support** to receive the vaccination

- **Referrals** to other needed services
- **Outreach and Education**

Agencies participating in the project with an initial submittal of the grant application in mid-July (waiting on a few items from agencies):

1. Flagler Cares and supported through external activities with the Flagler County Fire Rescue.

Status: Finalizing budget and numbers served.

Service Area: Flagler County

Health Partner: Flagler Pharmacy

2. AHEC

Status: Finalizing budget and numbers served.

Service Area: Northeast Florida AHEC is interested in doing vaccine education for our older adults throughout our seven-county catchment area (Baker, Nassau, Duval, Clay, Flagler, and Volusia).

Health Partner: NEFAHEC will leverage their current partnerships with providers (such as Conviva, Dedicated Senior Centers, County Health Departments, Walgreens, etc.) hospitals, Senior Centers, Faith-based organizations, etc. We will also use our community outreach events to educate older adults on vaccines.

3. CIL- Disability Solutions for Independent Living, Inc.

Status: Finalizing budget and partnerships with health providers

Service Area: Flagler & Volusia County

Health Partner: local health department, etc.

Other agencies that were approached:

- **St. Johns COA-** multiple emails and an in-person meeting, no interest expressed.
- **Wildflower Healthcare (Michelle P. Colee, Executive Director)** 268 Herbert Street St. Augustine, FL 32084- Connected on 5.19 and exploring interest and partnership week of May 29th.
- **Baptist Health and Insurance Company-Nelson and Associates Insurance** (Kimberly Branham-Nelson) expressed interest in a partnership.
- **ARC-The Villages-met with Jean C. Wetstein**, Vice President, Independent Living Support Services and Abigale (Abbey) Such, OTR/L-*They have dining for Adults with Disabilities and may be interested in congregate dining contracts.* They are also interested in the Vaccination Grant and may be able to partner with a local pharmacy. They would hold and outreach and education event with vaccinations provided on site (possibility in June)

Report Highlights:

- * Adult Protective Services - All high risk referrals were accepted. During the month of June ElderSource will begin reviewing client files monthly to ensure compliance is being met.
- * No Aging Out clients were received during the months of March and April.
- * After our most recent review of PSA4 surplus/deficits it was communicated to the Department that funds were available to transfer and monies were moved to another PSA.
- * During the month of May we completed our 2023 annual DOEA monitoring. At this time no findings were found and a few areas for improvement were noted. Once our completed monitoring report is received we'll be sure to share this information with you all.
- * Department currently fully staffed with 2 full time contracts managers.

Contract Update:

1. All Enhanced HCE contracts have been signed. Internally we have hired a short-term case manager who is currently assessing clients on our waitlist and arranging services as needed. Expenditures have begun and we are closely monitoring. At this time it has still not been determined whether an extension under this contract will be granted.
 2. Internally transferring funds from St. Johns to Baker County in CCE.
 3. Internally transferring funds from The City of Jacksonville to Aging True in RELIEF.
 4. EHEAP Contract end date has been changed to June 30, 2023 (originally September 30, 2023). New contract anticipated to start July 1, 2023.
 5. 2022 carryforward dollars have been sent down from the Department. Currently working on allocations to update/amend provider contracts.
 6. 2023 provider General Revenue allocations have been distributed to providers. Currently working on contract negotiations in preparations for the upcoming contract year.
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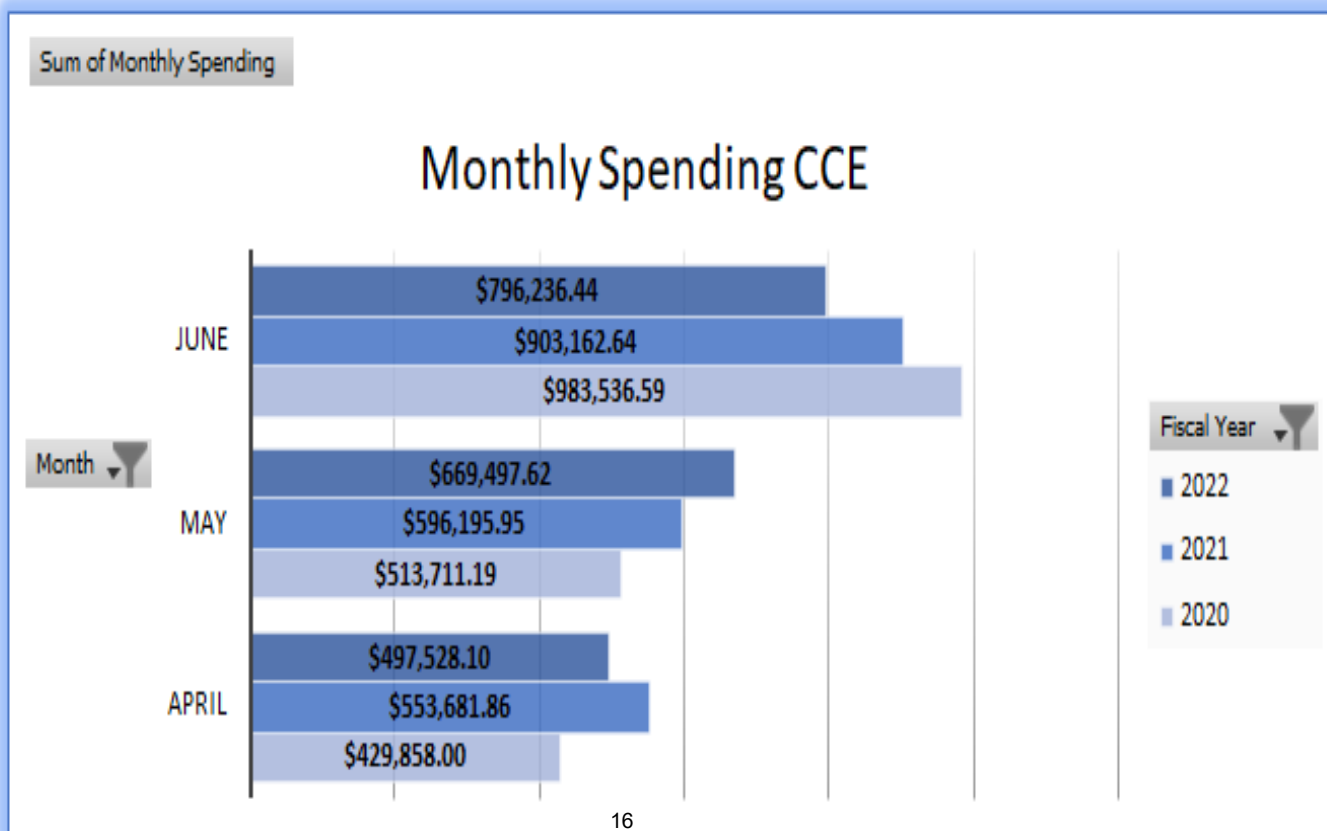
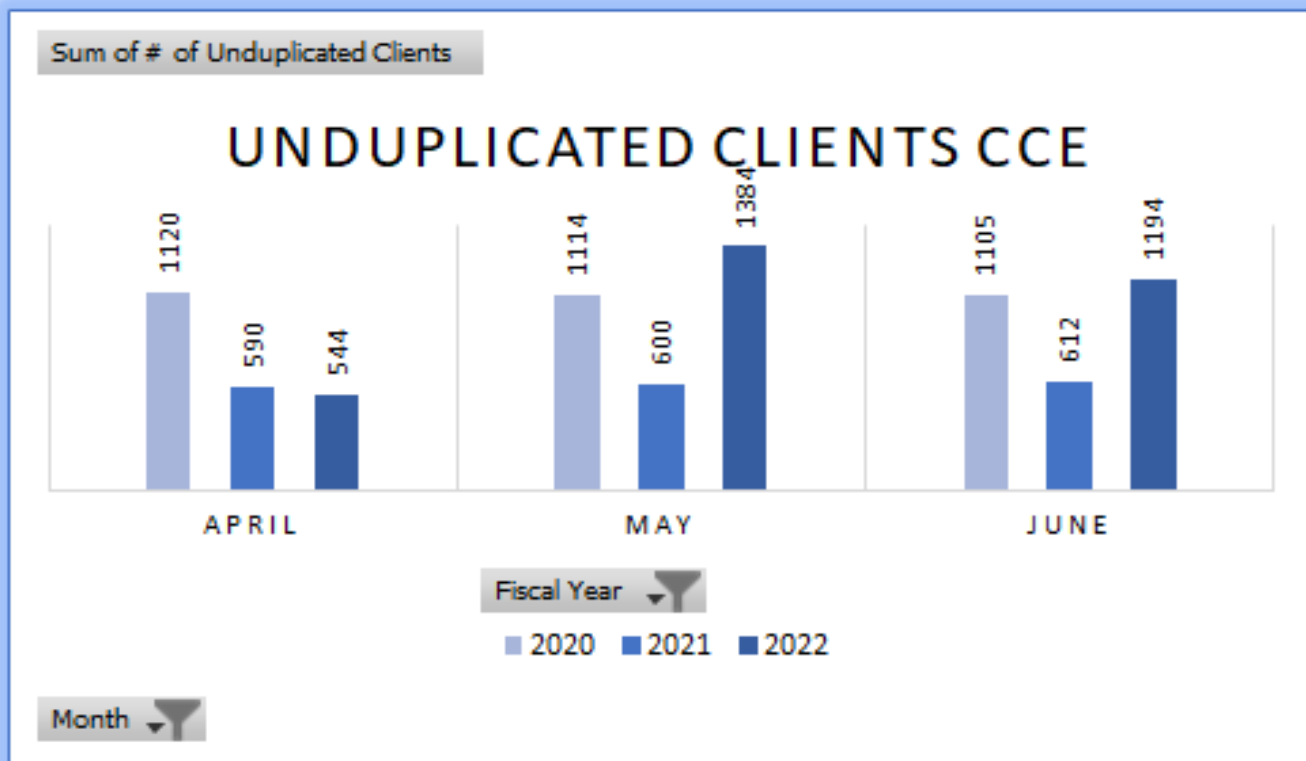
Surplus Deficit

Program	Contract Amount	Projected S/D (Based on current monthly spending)	Projected S/D (Based on Average Monthly Spending)	Comments
ADI	\$3,715,407.29	\$1,157,523.43	\$1,157,523.43	Contract is now complete. Providers are submitting final invoices. Surplus has already been communicated over.
CCE	\$7,450,928.00	\$417,710.42	\$417,710.42	Contract is now complete. Providers are submitting final invoices. Surplus has already been communicated over.
HCE	\$731,377.50	\$85,625.13	\$85,625.13	Contract is now complete. Providers are submitting final invoices. Surplus has already been communicated over.
LSP	\$450,000.00	(\$3,809.33)	(\$3,809.33)	Contract is complete and spent out to 100%.
RELIEF	\$334,313.00	\$6,016.17	\$6,016.17	Contract is complete. Providers are submitting all final invoicing. No concerns with spending out to 100%.
OA3B	3,527,641.00	(\$415,425.77)	(\$2,246,834.13)	Expenditures ahead at this time. No concerns with spending out at this time.
O3C1	\$1,983,582.00	\$18,986.09	\$69,645.34	Expenditures slightly ahead at this time. No concerns with spending out at this time.

Program	Contract Amount	Projected S/D (Based on current monthly spending)	Projected S/D (Based on Average Monthly Spending)	Comments
O3C2	\$2,013,855.00	(\$100,502.44)	(\$7,209.32)	Expenditures ahead at this time. No concerns with spending out at this time.
OA3D	\$146,606.00	\$23,318.40	\$7,848.35	Providing technical assistance as needed. No concerns at this time.
OA3E	\$1,001,166.37	\$947,223.57	\$1,183,889.13	In month 6 of this grant. Monitoring and providing technical assistance to providers as needed. No issues with spending at this time.
NSIP	\$537,608.00	\$196,871.50	\$109,167.58	No concerns with spending out at this time.

Community Care for the Elderly

The primary purpose of the CCE program is to prevent, reduce or delay premature or inappropriate placement of older persons in nursing homes and other institutions. Additional purposes of the CCE program are to provide the following: 1) a continuum of services alternatives to meet the diverse needs of older people; access to services for elder most in need; and a local resource that will coordinate delivery of services for the frail elder/caregiver.

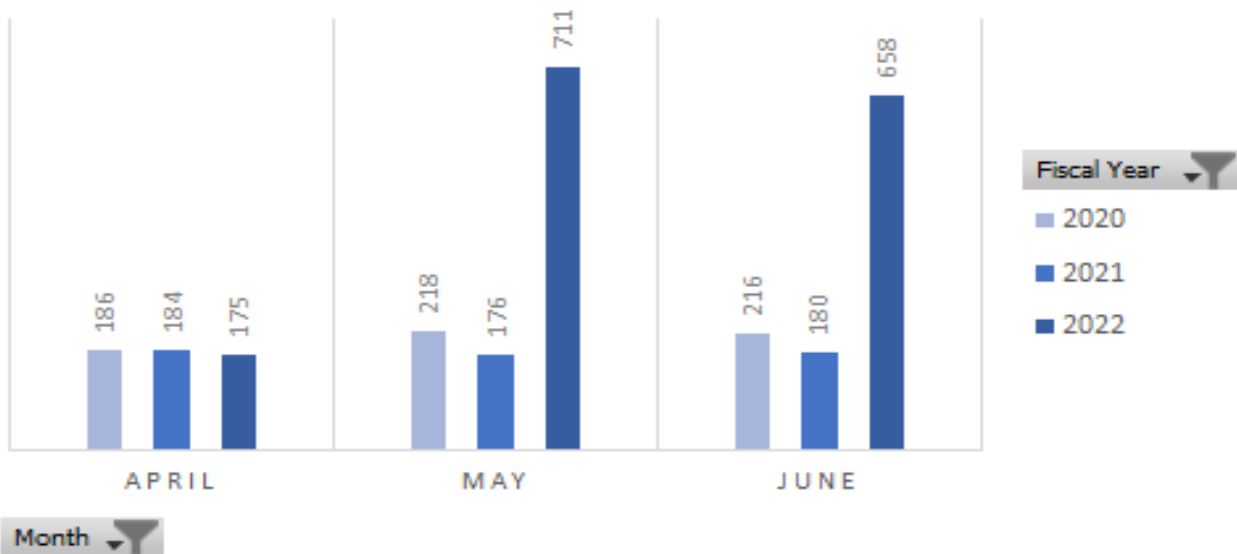


Alzheimer's Disease Initiative (ADI)

The purpose of the ADI is the following: to address the special needs of clients with Alzheimer's Disease (AD) or related memory disorders, as well as their caregivers; and to find through research the cause, treatment and ultimately a cure for AD or related memory disorders.

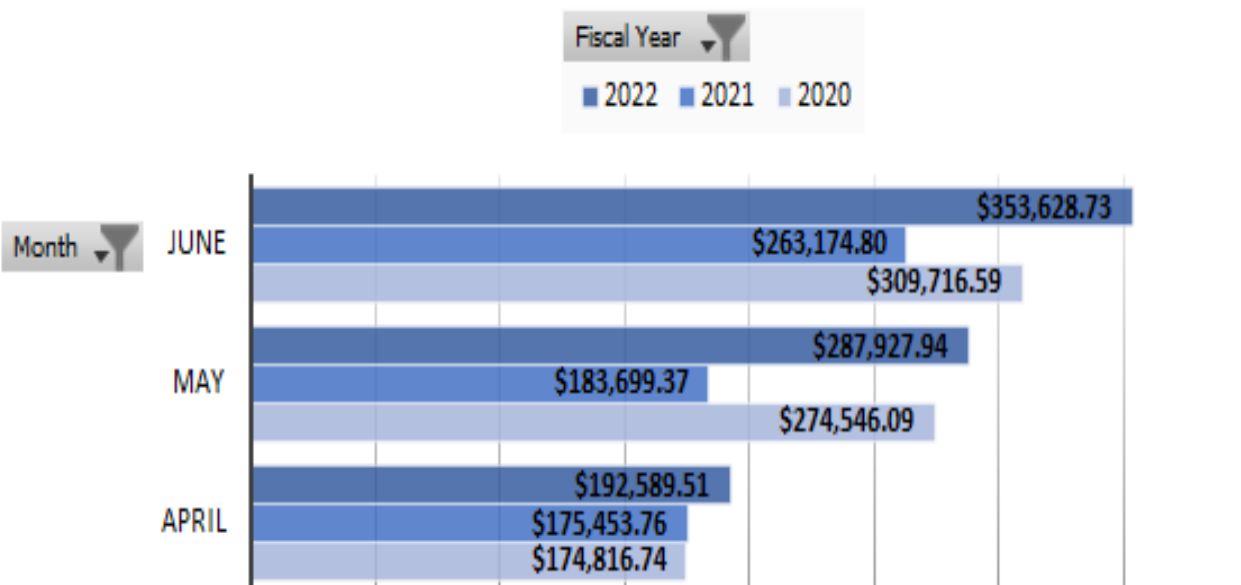
Sum of # of Unduplicated Clients

UNDUPLICATED CLIENTS ADI



Sum of Monthly Spending

Monthly Spending ADI

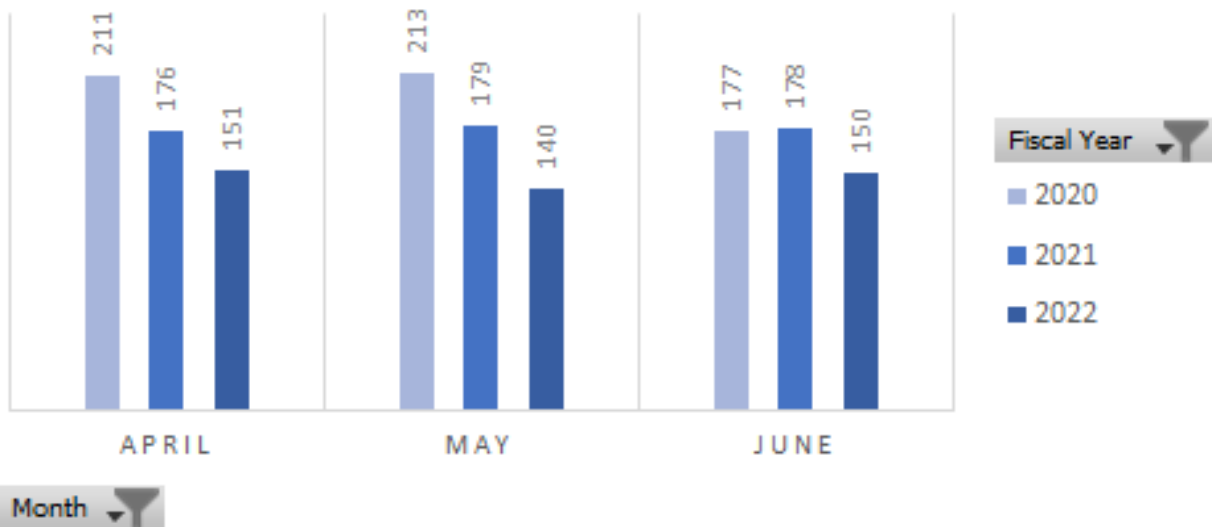


Home Care for the Elderly

The purpose of the HCE Program is to encourage the provision of care for elders in family-type living arrangements in private homes as an alternative to nursing homes or other institutional care settings.

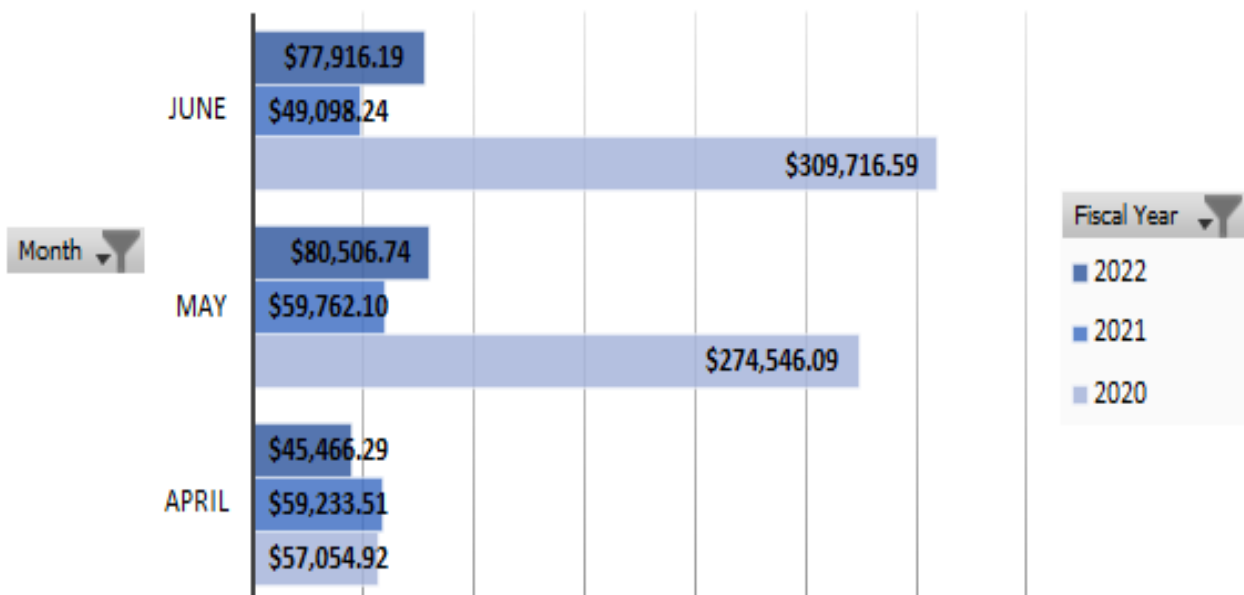
Sum of # of Unduplicated Clients

UNDUPLICATED CLIENTS HCE

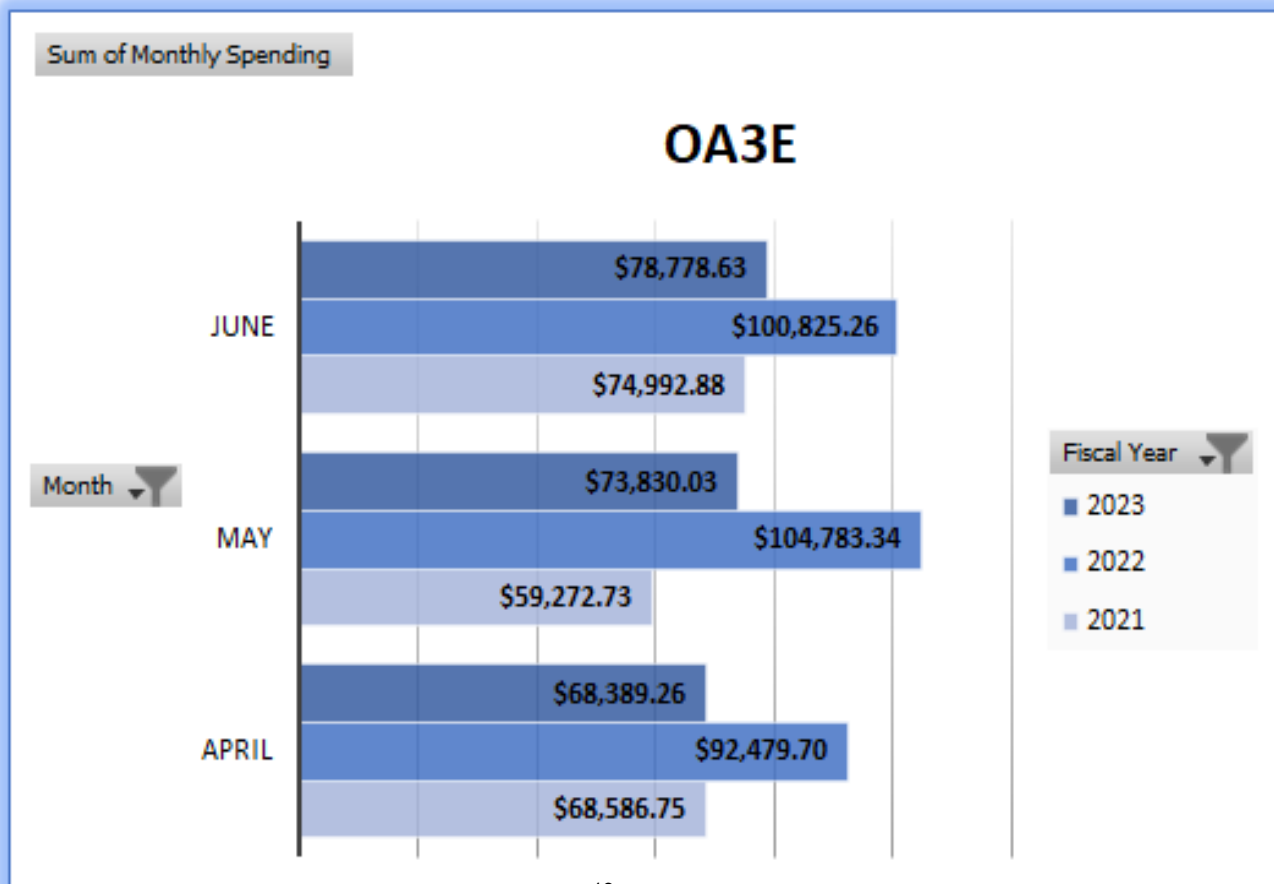
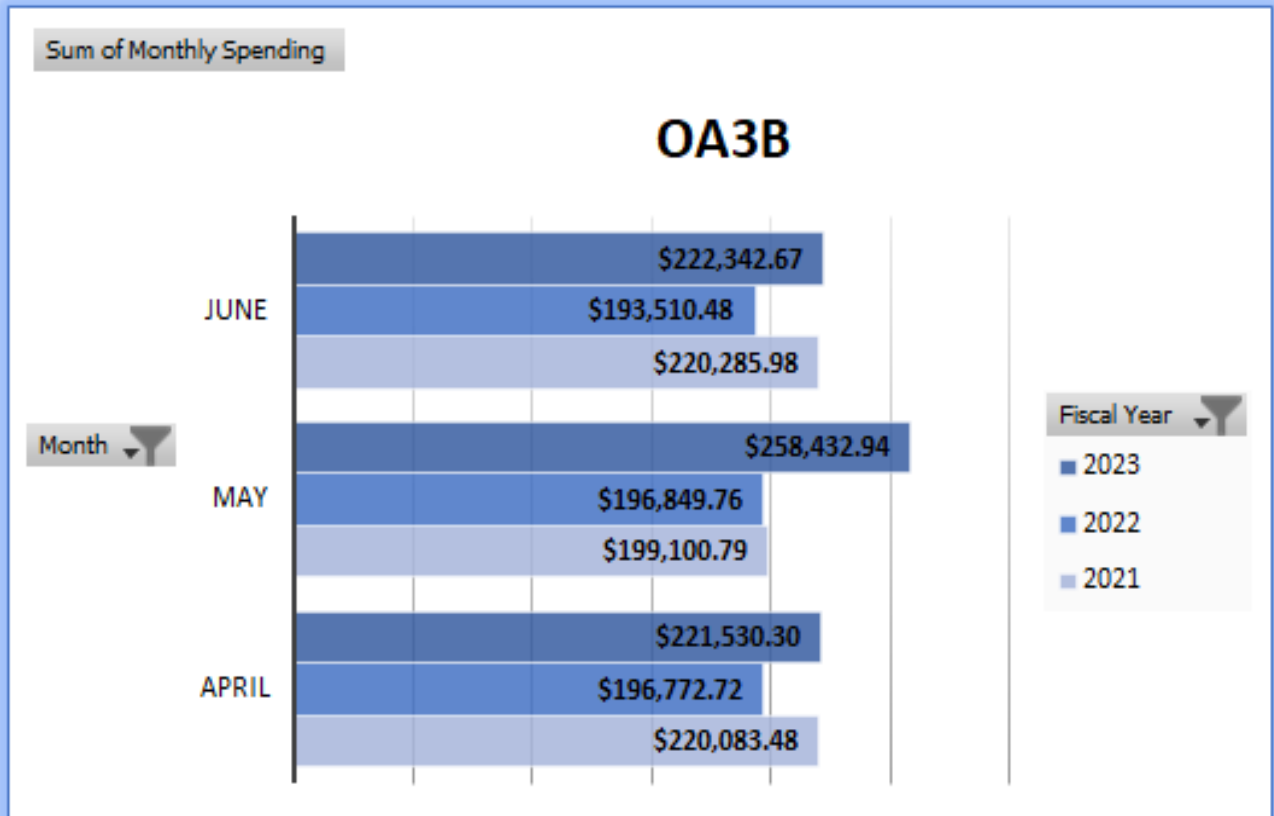


Sum of Monthly Spending

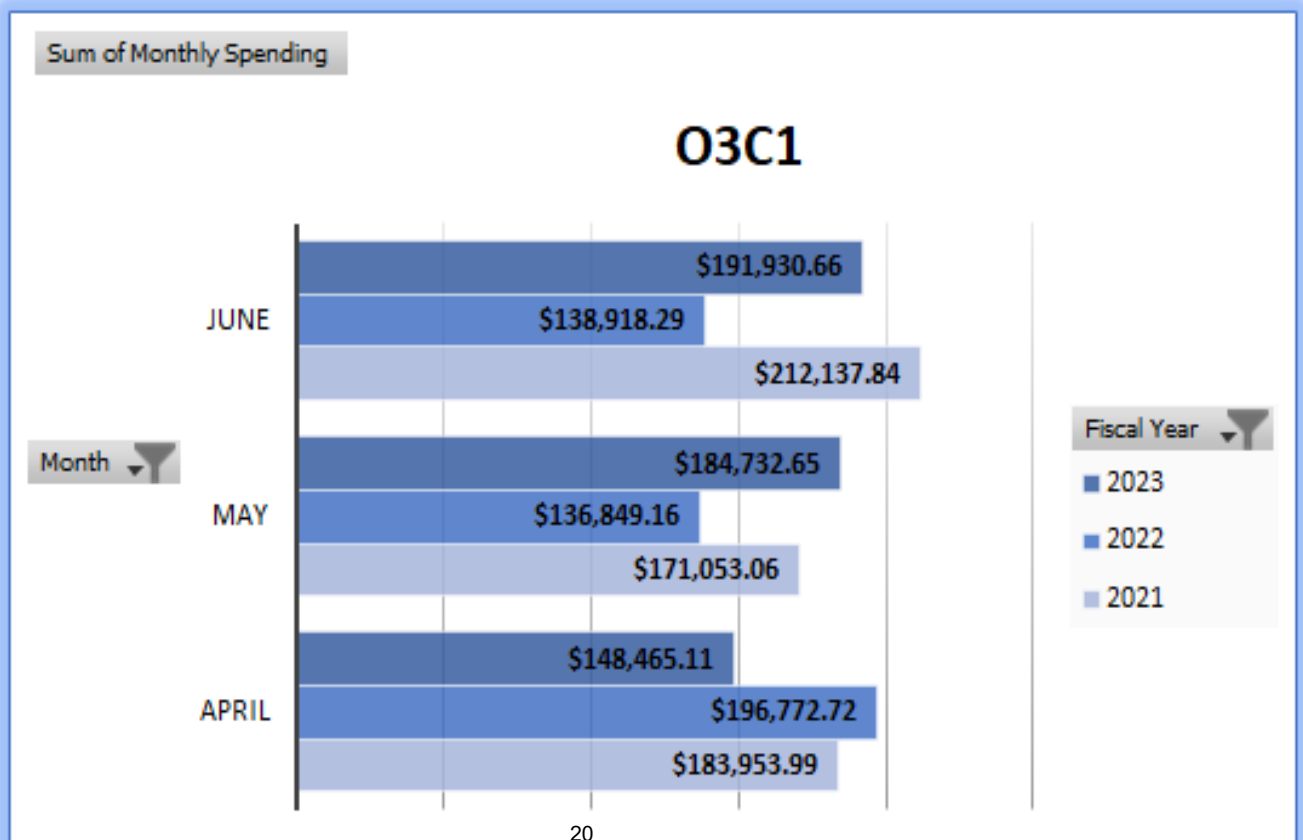
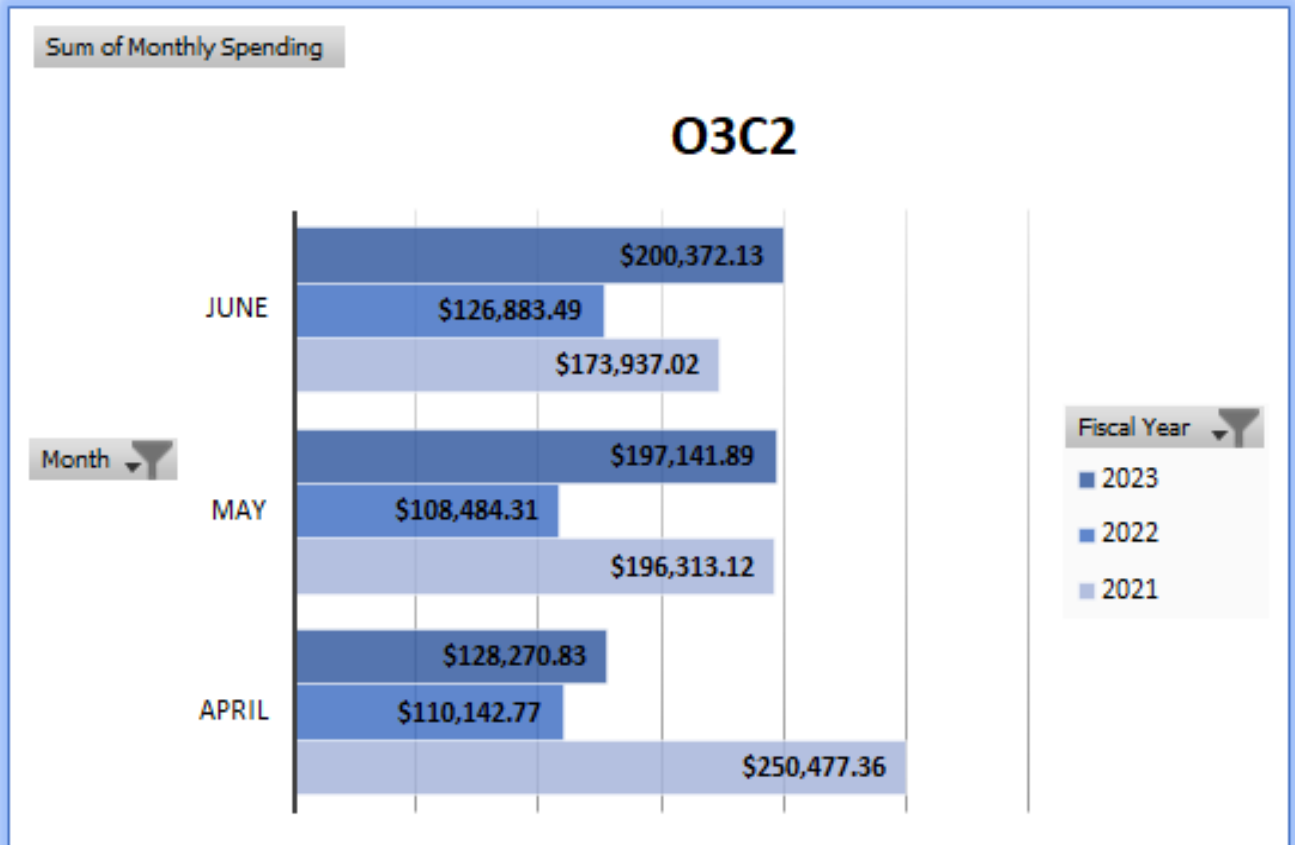
Monthly Spending HCE



Older American Act Monthly Spending



Older American Act Monthly Spending



Direct Services Department Report (June/July)

Senior to Senior Program

Program Description: Program provides financial assistance for seniors, age 60 and above, who are in crisis in Baker, Clay, Duval, Nassau, and St Johns Counties. Senior to senior is funded through grants from The Community Foundation for Northeast Florida with funding from the J. Wayne and Delores Barr Weaver Senior to Senior Fund Endowment, and the Jim Moran Foundation. An in-house EASE (Emergency Assistance Serving Seniors) program also provides limited funds for Flagler and Volusia counties. The financial crisis is defined as something unexpected that has occurred over the past couple of months, such as a medical problem, a plumbing issue, a pest infestation, etc., which has caused a financial hardship. The most common areas of assistance are rent/mortgage, utilities, home repairs, and assistive devices. Senior to Senior serves approximately **230 to 250+** seniors per year. The intended outcome of the assistance is to resolve the financial crisis so the senior will remain financially stable and independent in the future. Assistance is limited to once a year and to one specific crisis per lifetime.

Funding Composition: Our organization receives \$130,000 from Weaver Fund to serve 100 clients; we also received \$100,000 from Moran to serve 130 clients served and \$25,521 from EASE – the largest amount we’ve ever received from this Night with the Stars Fundraising account and funds are unrestricted with no established outcomes.

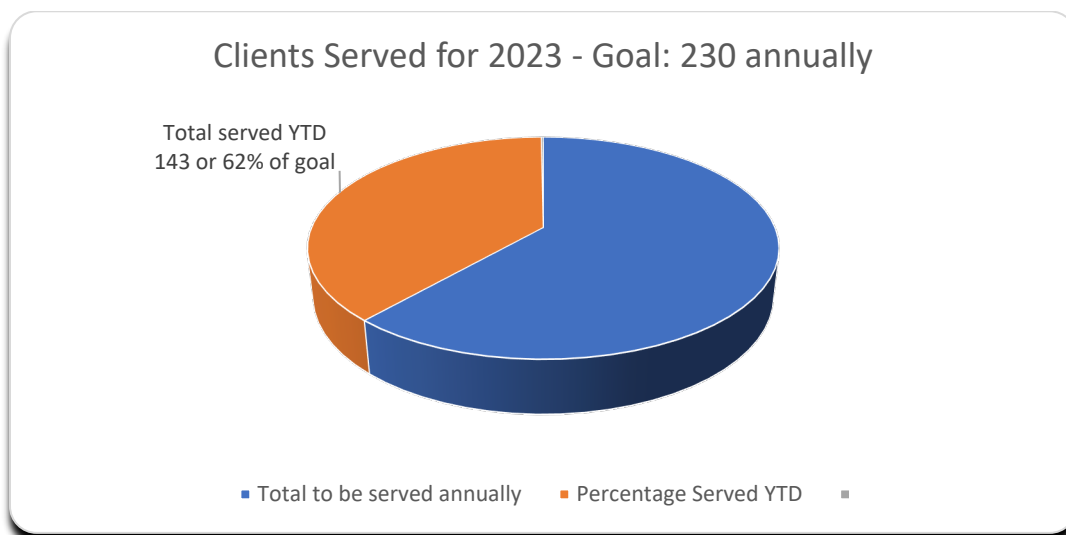
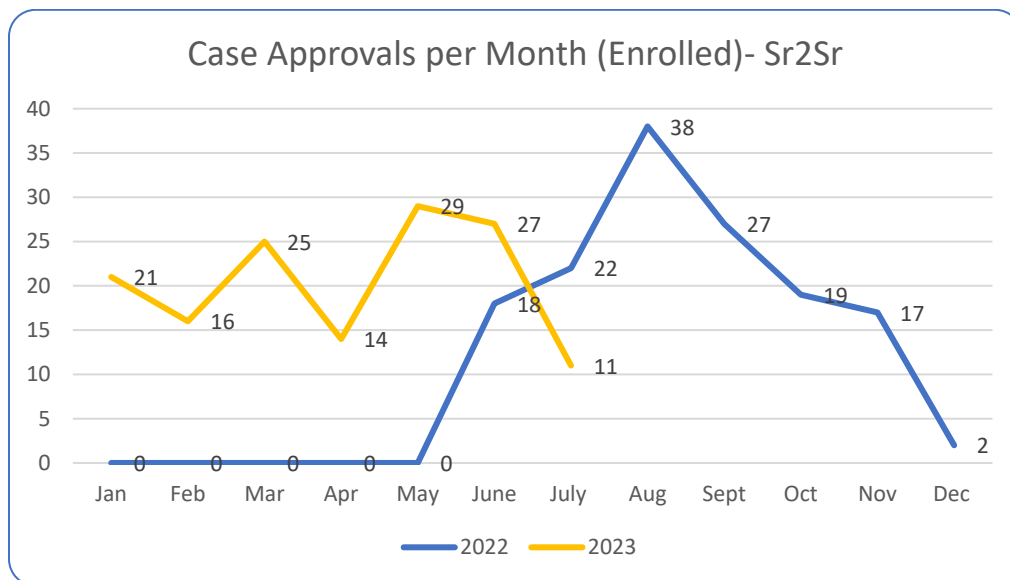
Service Output/Outcomes: The Senior-to-Senior program is currently fully staffed. Staff identified seniors to adopt during this holiday season. The goal for the Senior-to-Senior program is to serve approximately 230 seniors throughout a grant year, through the three funding sources mentioned above totaling \$250,000. An update was made to the grant tracking workbook that enables the team to see how much funds are available per client to remain on track to serve 230 by the end of the grant year.

Note/Numbers to Serve per Grant/Funding Source (goal 230 individuals served): 100 through Weaver, 130 through Moran for a total of 230, in addition, then however many served through EASE.

Grant Source	Jan	Feb	Mar	Apr	May	June	July	TOTALS
Moran	16	11	17	7	9	7	5	72
Weaver	4	2	3	5	12	10	3	39
Moran & Weaver Combined			1	1	3	8	2	15
EASE	1	3	4	1	5	2	1	17
TOTALS	21	16	25	14	29	27	11	143

- **Current output (individuals served): One Hundred Forty-Three (143) clients** served to date or **62% of the grant goals** (goal to serve 230 clients annually).
- **Cases for approval for the month in 2023:** January 21; February 16; March 25; April 14; and May 29; **June 27; July 11.**

Direct Services Department Report (June/July)



Direct Services Department Report (June/July)

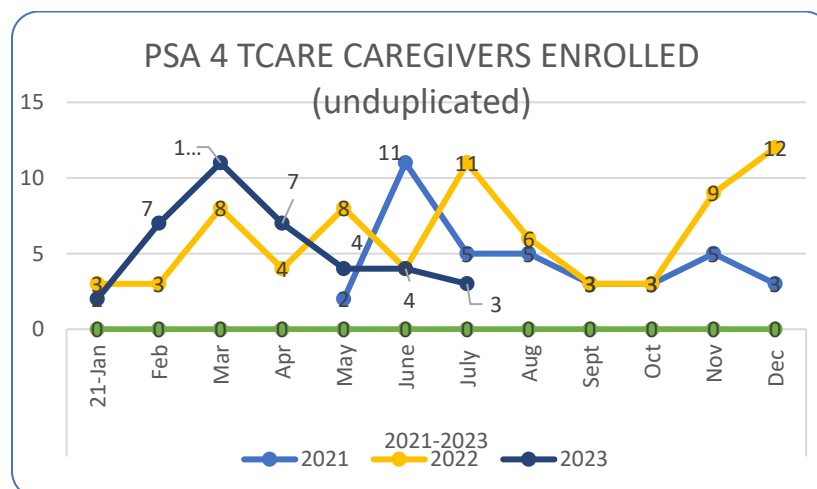
Caregiver Program(s)/Supports

Tailored Caregiver Assessment & Referral (TCARE) Program

Program Description: TCARE is a caregiver support program designed to help prevent caregiver burnout by providing meaningful information and referrals that may help specific caregiving experiences. It is available for northeast Florida caregivers of any age who are caring for a loved one age 60 or older who is still living at home, whether that be in the caregiver's home or their own home.

Service Output/Outcomes: As of the end of 2022, ElderSource served 113 family caregivers through the TCARE program. TCARE funding has paid for a total of 146 counseling sessions. The TCARE Specialist also made 324 referrals to community partners and provided other services in 2022. The TCARE assessment asks if a caregiver intends to place their loved one in an out of home care setting, such as a nursing home or other long-term facility. As of the end of 2022, 92% of reassessed caregivers reported lowered or maintained "intention to place now" at time of reassessment. Also, at the end of the 2022 fiscal year, 94% of reassessed caregivers reflect feeling more up lifted, or the same level of uplifted, in their caregiving duties at time of reassessment; 92% reported lowered or maintained relationship burden levels at time of reassessment; 91% reported lowered or maintained stress burden; as well as reported lowered or maintained identity discrepancy, which is how a caregiver feels about the caregiving duties that conflict with their identity as relative.

As of 7.31.23, or within the first 7 months of 2023 (3 Jan; 4 Feb; 4 March; 7 April; 4 May; 4 June; 3 July); In 2023, to date, our organization has enrolled 29 new family caregivers. In total, with active/current and enrolled there are 70 active family caregivers engaged in the TCARE program. TCARE funding has paid for a total of **50 counseling sessions**. The TCARE Specialist also made 168 **referrals to community partners** and provided other services in 2023. The TCARE assessment asks if a caregiver intends to place their loved one in an out of home care setting, such as a nursing home or other long-term facility. As of the end of July 2023, **89% of reassessed caregivers reported lowered or maintained "intention to place now" at time of reassessment**. Also, at the end of the July 2023, **90% of reassessed caregivers reflect feeling more up lifted, or the same level of uplifted**, in their caregiving duties at time of reassessment; **92% reported lowered or maintained relationship burden levels** at time of reassessment; **88% reported lowered or maintained stress burden; as well as reported lowered or maintained identity discrepancy**, which is how a caregiver feels about the caregiving duties that conflict with their identity as relative.



Direct Services Department Report (June/July)

YouMeCare Program – *This is not a separate program; this is just a resource/referral used in TCARE.*

Program Description: If a TCARE caregiver shows an increase of stress and/or depression through a reassessment and expresses that there is no home care in place, the TCARE specialist can send a referral to YouMeCare. Through a grant we can offer 50 caregivers with 27 hours of respite care until October 31, 2023. Our intended impact is that we will see an improvement of scores with the reassessments, and to provide support to the fact that respite is beneficial to caregivers' well-being.

Service Output/Outcomes: As of **July 31, 2023**, we **provided 25 caregivers with a combined 411 hours of respite care**. *NOTE: Last update was in the May report with 22 Caregivers and 381 hours of respite.*

Powerful Tools for Caregivers

Program Description: Powerful Tools for Caregivers is a six-week course that meets weekly over Zoom. This class gives caregivers the skills to take care of themselves while caring for someone else. Class participants are given The Caregiver Help book to accompany the class and provide additional caregiver resources. The intended clients are caregivers that live in the seven counties of Northeast Florida. The intended impact of this program is to teach family caregivers ways to reduce stress, have tough conversations, communication skills with their loved one, and to take care of themselves.

Service Output/Outcomes: In 2023, there were **3 classes held or 60% of the annual goal of conducting 5 classes**.

**** Two classes are scheduled to start during first week of Sept. ****

Trualta

Trualta is an online resource that helps families manage care at home with a library of lessons on assorted topics, solving day-to-day needs. Their lessons give simple, practical advice. Even better, lessons are short (about 5 minutes), making it easy for caregivers to fit them into their busy schedule. To be referred to set up a Trualta account, the caregiver must be a family caregiver that resides within the seven counties of Northeast Florida. The intended impact of this program is to provide caregivers with a hub for information and resources that align with their specific caregiving needs.

Service Output/Outcomes (updates): As of 7.31.23, thirty **(30) persons have been engaged** in the online resource. *NOTE: Last update was in the May report with 18 persons engaged*

Virtual Caregiver Support Groups

The virtual caregiver support group is open to all caregivers to be able to connect with other caregivers, seek advice, and to share information. This group takes place on Zoom twice a week. As of now the group takes place on Wednesdays at 1:00pm and Thursdays at 6:00pm, but the day and time for the Thursday session will be changing at the end of the month. If anyone is interested in the group, they can email caregiversupport@myeldersource.org to be added to the contact list.

Service Output/Outcomes: in 2023, approximately **forty-five (45) virtual caregiver support groups were conducted**.

Direct Services Department Report (June/July)

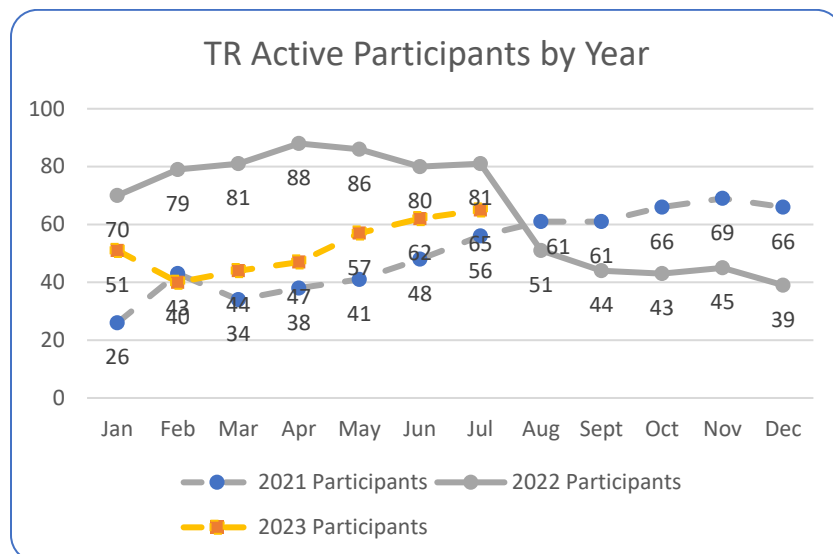
The Telephone Reassurance Program(s)

The Caring Connections Telephone Reassurance Program

Program Description: The *Caring Connections* Telephone Reassurance Program provides friendly telephone calls from trained volunteers to older adults who are living alone and/or are homebound. The goals of the program are to reduce isolation, loneliness, depression, anxiety, and cognitive decline often faced by homebound seniors. Regular phone calls from volunteers help seniors stay connected to their community and engaged in meaningful relationships. Keeping seniors socially engaged also improves their overall quality of life physically, emotionally, and mentally. Seniors who are interested in receiving a telephone call from volunteers can sign themselves up or be referred by a caregiver, family member, friend, Customer Service Specialist from the HelpLine, or service provider. Seniors are eligible if they: Are 60 years old or older, live alone or are homebound, and reside in Baker, Clay, Duval, Flagler, Nassau, St. Johns, or Volusia County.

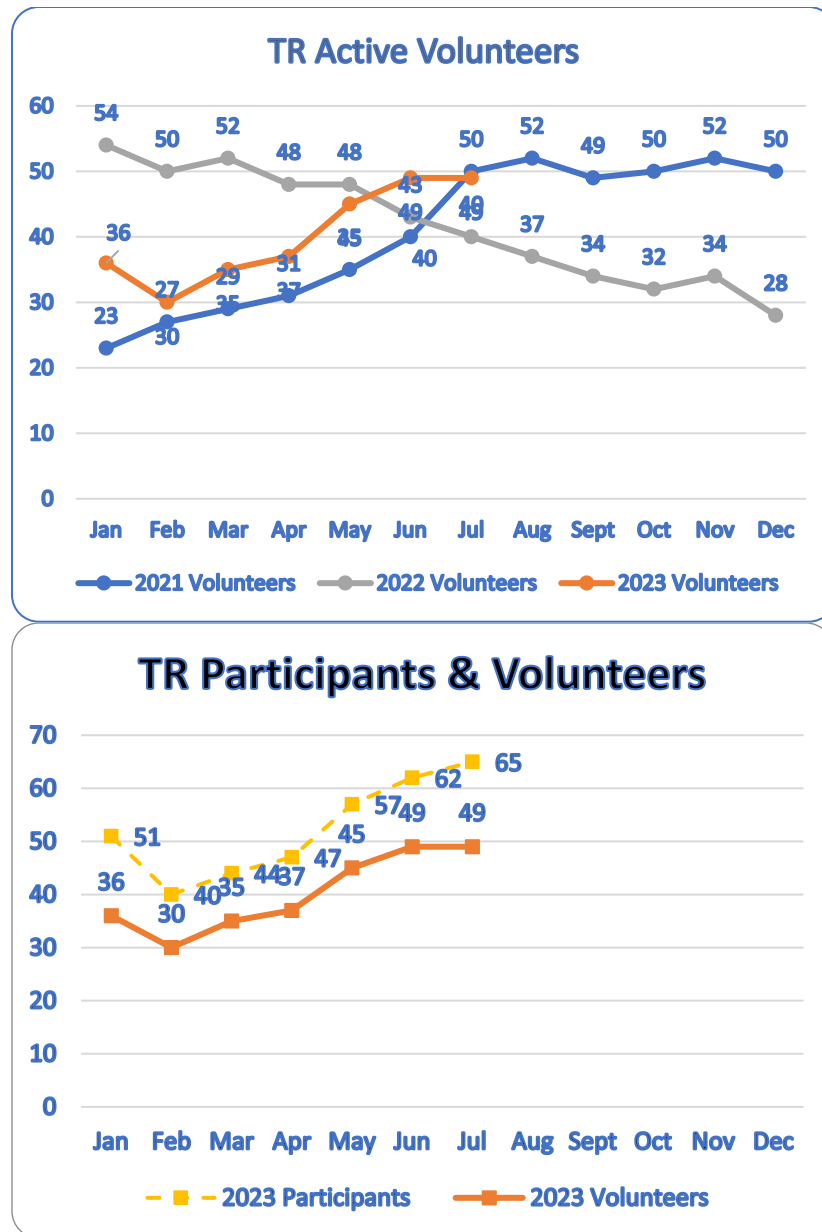
Numbers served and volunteered per month in 2023:

- **Jan. 36 Active Volunteers and 51 Active Participants.**
- **Feb. 30 Active Volunteers and 40 Active Participants.**
- **March 35 Active Volunteers and 45 Active Participants.**
- **April 37 Active Volunteers and 47 Active Participants.**
- **May 45 Active Volunteers and 57 Active Participants.**
- **June 49 Active Volunteers and 62 Active Participants**
- **July 49 Active Volunteers and 65 Active Participants**



Direct Services Department Report (June/July)

The Caring Connections Telephone Reassurance Program- continued



Volunteers

Very loving caring
They see a need
Then get up and succeed
They are people with a loving heart.

Only with a willing mind
They get up and fulfill a need
Wash the clothes ,and sweeps the floor
Look around see if there more.

Loving personality
They have a smile on their face
A prayer in their heart
At the right time let it depart.

Under the shadow of the almighty
They will abide
Not for a night
But there forever, and forever.

Never alone ,no never
There is the Father, Son, the Holy ghost
In God they can boast
Thank God ,thank you

Together we stand
Helping each other
All over the land
With out stretch hands.

Enter into the gates with thanksgiving
Enjoy yourselves
Singing songs of joy
Resting in the Lord.

Esther J. Kennedy April 30, 23

Hello Teams,

Please see the comment made in the email below.

Fred D. was a participant in the Telephone Reassurance Program and his volunteer Rosanne A. had been calling him for about 3 years. Unfortunately, Fred passed away on Monday July 5.

I just wanted to share with you what a difference our volunteers make in the lives of the participants in the Telephone Reassurance Program.

Rosanne stood by him even when his family wanted nothing to do with him.

She encouraged him to get back to church and take better care of himself. They had a very sweet bond. He was a tough guy to make conversation with, he could be quite grumpy, but Rosanne called him faithfully sometimes more than once a week. She told me that the last phone call they had was the best call she ever had with him and said that he wasn't even grumpy, LOL. She was a faithful volunteer to the end. I'm so proud that one of our own was there when he had nobody else.

Best regards,

Anita Thaxton
Care Connector

Direct Services Department Report (June/July)

The iN2L (It's Never Too Late) Tablet Program

Program Description: The iN2L Tablet Program offers content-driven engagement to support social interaction, cognitive and physical exercise and therapy, education, reminiscing, areas of interest, memory support, and more with touch screen systems ideal for both group engagement and individual experiences. Each tablet comes preloaded with designed and curated content, including games, puzzles, movies, audiobooks, and more. Seniors can customize their experience based on their content preferences, photos, and contacts. One-touch video calls, photo sharing, and texting is available. This program is for older adults 60 or older who reside in Baker, Clay, Duval, Flagler, Nassau, St. Johns, or Volusia County.

Service Output/Outcomes:

In August, ElderSource started a tablet program funded through the American Recovery Plan Act (ARPA). This program is ***monitored by the Care Connector who delivers the Caring Connections Telephone Reassurance program***. The tablets are supplied by a company called iN2L (It's Never Too Late) and were ordered, assigned, and delivered. iN2L provides monthly usage reports showing the total number of hours each client has used each feature. We expect to see lower usage around the holiday months. **Sixty-Eight tablets** were ordered, assigned, and delivered. iN2L provides monthly usage reports showing the total number of hours each client has used each feature. We expect to see lower usage around the holiday months.

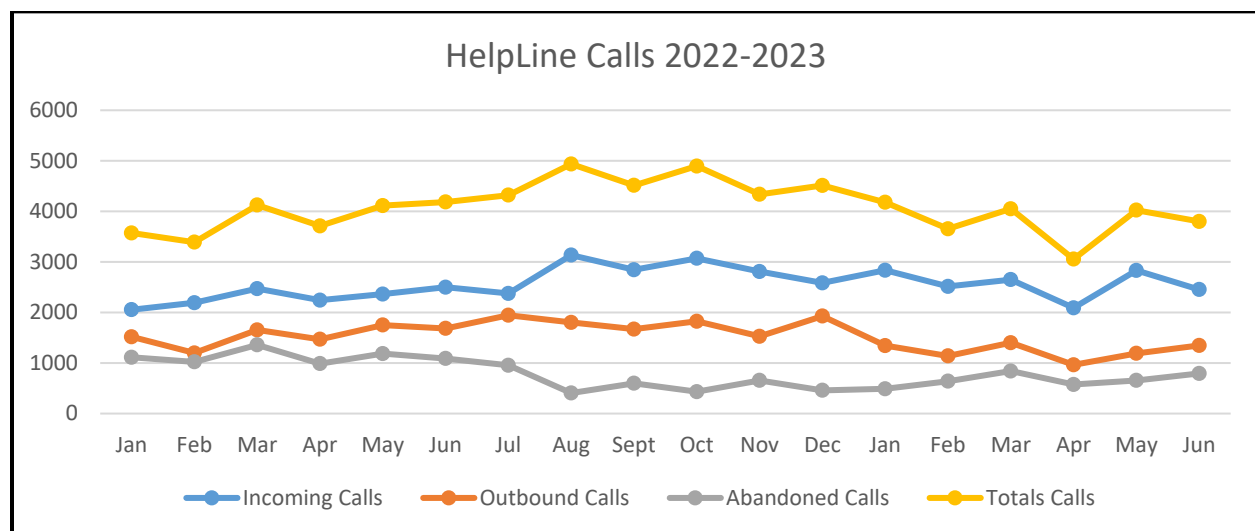
Numbers served to date: In 2023, to date we **have 68 tablets and 62 Participants** actively using tablets in their homes. As of July 2023, **62 of the tablets were shipped out to clients**, the number of active users changes each month. The number of "active" users for the month of **July is 25**. Anita Thaxton is in the process of contacting those that are not showing active usage to find out why they are not using them and answer any questions they may have to effectively engage them in the program.

Six of the tablets are being shipped this month to the brand-new Flagler Hospital Veterans Program apartment housing called **Patriots Place** where they will house **6** homeless Veterans in individual apartments. They will have the opportunity to enjoy the tablets and benefit from this program.

ADRC Dashboard Summary August 2023 (Reports thru June)

HelpLine

The HelpLine has one open position. The HelpLine added two part-time positions to help with voicemails and the Resources Database. The Supervisor continues to serve on the eCIRTS committee for the development and design of the HelpLine functionality (deployment planned for late 2023/24).



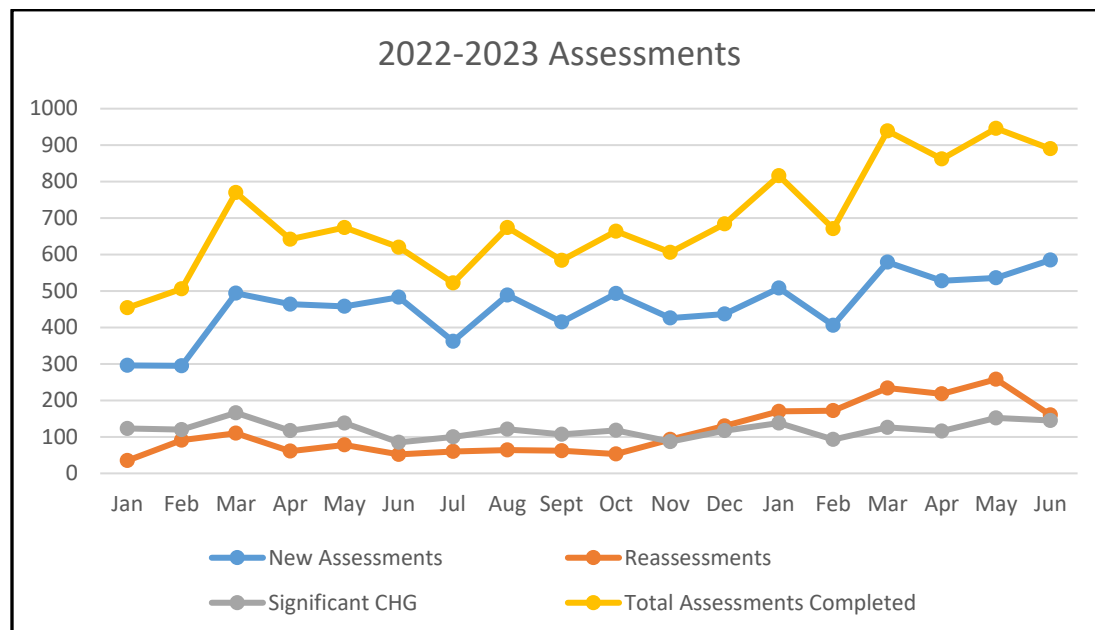
April

Walk-ins: 23
Voicemail: 1,323
Fax: 109

SHINE Referrals: 235
Screening Referrals: 871
APS Referrals: 7

Intake & Screening Team

The Intake and Screening Team is fully staffed, trained and screening. Screening appointments are scheduled out 20-25. Several staff members worked overtime in May and June focusing on the reassessment list. Overtime ended at the end of June due to new funding fiscal year.



Percent Screened for Significant Change:

May: 22%

June: 20%

Medicaid Eligibility Team

The team is fully staffed. The new staff is in training and is expected to receive a caseload in July. Staff are carrying a high caseload.

Number of Clients Released for LTC Processing:

May: 156

June: 171

SHINE/SMP/MIPAA

The SHINE, SMP and MIPPA grants were on target for May–June. Staff and volunteers are continuing to offer and provide Medicare presentations to the community. Most counseling sessions occur via telephone. The number of active volunteers is 37.

SHINE Contract (Must meet 60% of Benchmark)												
2023-24	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
Client Contacts	209	235	298									
% of Goal	107%	144%	124%									128%
Outreach Events	7	8	11									
% of Goal	88%	114%	138%									82%
SMP Benchmarks 3 (must be 50% to meet contract)												
2022-23	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Group Outreach	16											
% of Goal	145%											0%
Individual One-on-One	195											
% of Goal	119%											0%
People Reached	173											
% of Goal												
MIPPA Benchmarks 8 (must be 50% to meet contract)												
2022-23	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug
Completion of LIS Apps.	48	45	34	32	28	33	35	19	23	38		
% of Goal	130%	85%	62%	84%	127%	92%	167%	86%	77%	90%	0%	0%
# LIS Eligibility	118	213	209	124	105	117	106	77	119	142		
% of Goal	104%	102%	107%	109%	69%	59%	87%	74%	109%	103%	0%	0%
# LIS Benefit Explanation	101	141	139	83	74	99	80	67	89	107		
% of Goal	104%	87%	97%	101%	59%	57%	92%	82%	127%	118%	0%	0%
Completion of MSP Apps	92	70	87	69	109	118	100	69	76	83		
% of Goal	99%	57%	66%	57%	99%	105%	77%	110%	96%	112%	0%	0
# MSP Eligibility Activities	121	181	201	141	120	142	145	99	119	145		
% of Goal	100%	88%	102%	126%	82%	73%	142%	92%	132%	104%	0%	0
# MSP Explanation	109	113	128	102	98	122	120	83	91	113		
% of Goal	107%	72%	90%	128%	84%	73%	148%	108%	134%	108%	0%	0
Extra Help/LIS/	11	16	13	5	9	7	8	7	8	15		
% of Goal	85%	94%	100%	63%	90%	88%	89%	88%	114%	188%	0%	0
Preventative Services	9	15	12	5	9	7	8	7	8	16		
% of Goal	150%	167%	133%	125%	129%	100%	114%	88%	114%	229%	0%	0

2024-2027 Area Plan

- Introduction to the Area Plan – *ready for final review/approval*
- Program and Contract Module Certification – *signoff to be completed once final draft reviewed and approved*
- AAA Board of Directors; AAA Advisory Council – *overall completed*
- Funds Administered and Bid Cycles; Resources - *overall completed*
- Executive Summary; Mission and Vision Statements - *ready for final review/approval*

- Profiles (*identifies counties, communities, data on socio-demographics, resources, services, partnerships, etc.*) – *narratives are completed and ready for final review; adding some final touches to graphs and charts*
- Strengths, Weaknesses, Opportunities, and Threats (SWOT) Analysis – *narrative is close to completion; will add any salient info gained from final Public Hearing once completed*

- Performance and Targeted Outreach (*looks at populations that we have done well at reaching, and those needing improvement; lists outreaches planned for 2024*) - *narratives are nearing completion; still inputting some provider outreach activities*
- Unmet Service Needs and Opportunities (*access to services; caregivers; communities; health care, HCBS*) – *finalizing narratives*

- Emergency Preparedness (coordination, county contacts, critical services, assessment)- **ready for final review/ approval**
- Strategies part of Goals and Objectives – **partially completed**
Goal areas:
 - 1) *strengthen & streamline capacity*
 - 2) *Dementia awareness & age-friendly*
 - 3) *Healthy living & engagement*
 - 4) *Safety – abuse, neglect, exploitation*
 - 5) *Disaster Prep & resiliency*

- Direct Service Waiver Request Forms - *signoff to be completed once final draft reviewed and approved*

Waivers being requested:

- 1) Intake (standard intake and screening instruments)*
- 2) Telephone Reassurance program*
- 3) Community Health Navigator program*
- 4) Tablet/technology services*
- 5) TCARE (Tailored Caregiver Assessment and Referral Program) Caregiver*
- 6) Powerful Tools for Caregivers*
- 7) Virtual Caregiver Support Group*

- Assurances & Attestations- *signoff to be completed once final draft reviewed and approved*