SENIORS COUNCIL BOARD OF DIRECTORS

Thursday, March 18, 2021

10 a.m. – 12 Noon

ZOOM VIRTUAL MEETING

https://us02web.zoom.us/j/88378889092
Meeting ID: 883 7888 9092

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AGENDA

10 a.m.

1. Welcome, Call to Order and Introductions

2. Additions & Deletions to the Agenda

3. Receive Announcements from Board Members

4. Comments from Members of the Public on Items Not on the Agenda

5. CONSENT AGENDA
   Approve minutes of February 2021 Board Meeting

10:10

6. Presentation of 2019-20 Independent Financial Audit (tentative)
   Krystal Weaver, Walters & Kondrasheff
10:40  7. Committee Reports
       1. Finance Committee
       2. Nominating & Board Development
       3. Executive Committee  CONFIDENTIAL (Discussion w/ Jovenes de Antaño)
       4. Advocacy Committee

11:05  8. Executive Director’s Report
       1. COVID-19 Update
       2. Budget Outlook
       3. Developing & Delivering the Master Plan for Aging in PSA-13
       4. CARES ACT & Jovenes de Antaño Equipment Request ACTION ITEM

11:40  9. Program Reports (as needed)
       1. Falls Prevention
       2. Foster Grandparent Senior Companion Program
       3. Area Agency on Aging
       4. ADRC/No Wrong Door
       5. Project SCOUT

11:50  10. Miscellaneous Correspondence & Other Items

12 Noon  11. Adjourn

Next Meeting:

Board of Directors: Thursday, April 15, 10 a.m. – 12 noon
Questions, Clarifications or Additional Information:

If you have a question or wish clarification or additional information about any agenda item or attached materials, please telephone Seniors Council Executive Director Clay Kempf at 688-0400 ext. 115 before the meeting. If you get voicemail, please leave a detailed message so that a response can be made.

Distribution of Materials:

If you have information to share with members of the Board, a table or other suitable space will be provided on which you may make it available. It is the wish of the Executive Committee that meetings not be disrupted by distribution of paperwork or other items.

Accessibility:

This organization attempts to make meeting content understandable in languages other than English. All Meeting rooms are accessible for people with disabilities. If you wish to discuss reasonable modifications or accommodations for language or disability, please contact the Seniors Council office at 688-0400 at least 48 hours before the meeting.

Seniors Council Mission Statement

It is the mission of the Seniors Council to enable older persons to function with independence and dignity in their homes and in the community to their fullest capacity.

Area Agency on Aging Mission

To provide leadership in addressing issues that relate to older Californians; to develop community-based systems of care that provide services which support independence within California’s interdependent society, and which protect the quality of life of older persons and persons with functional impairment; and to promote citizen involvement in the planning and delivery of services.
BOARD OF DIRECTORS
February 18, 2021
*Held by Zoom Conference Call in accordance with COVID-19 distancing requirements*

MINUTES

BOARD MEMBERS PRESENT: Pam Arnsberger, Barbara Canfield, Cathy Cress, Darrell Johnson, Wendy King, Mickie Luna, Steven Matzie, Wayne Norton, Antonio Rivas, Jane Schwickerath, Gwen Yeo

ABSENT: Barbara Kaiser, Creighton Mendivil

OTHERS PRESENT: Clay Kempf, Executive Director; Patty Talbott, AAA; Britt Bassoni, Special Projects; Hilary Minugh, Fiscal Specialist; Kirk Ance, Community Bridges/Lift Line; Tanya Ridino, Senior Citizens Legal Services

1. Welcome, Call to Order and Introductions
   Board President Pam Arnsberger called the meeting to order at 10:03 AM.

2. Additions and Deletions to the Agenda
   Clay referred to two emails sent out ahead of the meeting with information about staff recommendations for CARES Act, OTO and Funding Augmentation Awards.

3. Receive Announcements from Board Members
   Jane requested that Ombudsman Program Coordinator Deanna Trinidad be invited to the next Board meeting for an update on skilled nursing facilities.
   Antonio said there was concern at Seniors Commission meeting this week about getting vaccines for those with disabilities that limit their ability to get out of the car, Antonio is contacting sites to advocate for accessibility.

4. Comments from Members of the Public on Items Not on the Agenda
   Kirk Ance introduced himself and thanked the Board for ongoing support for Lift Line. During COVID they have retooled their services, instead of taking participants to meal sites; they are delivering meals to them. They have been impacted by COVID and have had to lay off some drivers. Also challenged by limitations on the number of riders they can take on a van during COVID. Community Bridges has set up information line for COVID vaccine appointments. Also doing vaccine appointment transport. Steven asked if Lift Line drivers have been able to get vaccinated. Kirk said not yet, they are trying to get that happening. Clay said he is also advocating for Lift Line drivers to be added to the essential workers list.
5. **Consent Agenda**

Approval of Minutes. Board members were referred to pages 5-1 to 5-5, minutes of the January 28, 2021 Board meeting. **MOTION**, Rivas/Luna, to approve the minutes of the January 28, 2021 as submitted. **PASSED unanimously**

6. **Committee Reports**

6.1 **Finance Committee** – Jane reported that the committee met on February 11. CFL is still in the black, but less than expected. Project SCOUT is close to prediction, but lost $30K of grant funding, needs to find new funders. Falls Prevention and ADRC need to spend funds, hiring a new staff person for ADRC. Two audits happening, independent CPA audit under way now, CDA Audit is coming in March. Senior Companion is still in black, stipends down due to COVID. Foster Grandparent a little in the red. AAA is in the black, CARES Act funds need to be expended, can only be spent on services. Admin is in the black, agency-wide looking good. Agency received a PPP loan, $130K, which was forgiven. There was a conversation about reserves and importance of building them. Clay said the program reserves issue would be revisited at a future Finance Committee meeting. At one point agency was $90K was in the red, and currently $190K in the black so things are in good shape.

6.2 **Nominating and Board Development** – no report

6.3 **Executive Committee** – Clay said the committee continued discussion about Jovenes. Board Presidents, Vice-Presidents and EDs from both agencies met. Jovenes full Board has not yet met. Clay said there is a need to work on how to integrate the ADRC with existing Jovenes services, also continuing discussion about transition planning and options. Wayne said the Seniors Council role is to oversee the programs and make sure the programs are functioning; it is up to Jovenes and their Board to make the decisions. Mickie suggested that she and Wayne meet with Pauline. Steven asked if Pauline could attend a Board meeting. Next meeting with Jovenes is March 9.

6.4 **Advocacy Committee** – Wayne said that main effort locally is Live Oak Senior Center in Santa Cruz, owned by Live Oak School District, which intends to build senior housing on the site. Things have been on hold, trying to renew the conversation. No one but Seniors Council, Community Bridges and Senior Network seems to understand how critical this center is to senior services; the County needs to commit to this center or provide an option. Also discussing Master Plan for Aging. Clay said the district hasn't cancelled plans to build teacher housing, just on hold. There are $600K in funds from the dissolution of the Live Oak Senior Center organization, obligated to spend by end of year. Foundation staff will attend the Senior Council's Aging and Disability Service Provider meeting next week to have this discussion. Clay is meeting with Manu Koening on Friday. Teachers are being placed in parts of the senior center now, where congregate site was, to do activities. C4A Capitol Day (virtual) is February 25, let Clay know if interested.
7. Executive Directors Report

Master Plan for Aging
Clay referred to page 7.1-3 and 7.1-4, ideas for implementing the plan at the local level. How do we provide information to the community? How do we develop local goals? Clay reviewed short list of ideas for each goal. MPfA highlights senior issues and elevate the five goals. County of Santa Cruz is very interested in partnering on this.

Clay said he would like to have a kick-off meeting about the Master Plan for Aging next month. AAA Advisory Council discussed at their meeting yesterday and agreed to hold it during their next regular meeting time, Wednesday, March 17, 10am-noon. Would like to include an overview by CDA, a Steering Committee update by Clay and discussion about the goals, with key players for each goal area. After this initial session, would like to convene a webinar on each goal area to go deeper into ideas. AAA is not staffing this entire effort, but serving as a convener for the webinar. Invited participants would include Seniors Council Board, AAA Advisory Council, commission members, electeds, city and county staff, interested community members. Steven requested a focus on mental health as a critical issue for seniors. Clay staff will send out a save the date flyer. Clay was requested to invite Supervisor Manu Koening to future meeting.

CARES Act Funding
Clay reviewed the email sent out ahead of the meeting. Requests were received from every provider, except for Advocacy Inc./Ombudsman, who receives funding specific only to their program, and is not required to submit a request. Staff reviewed all proposals and made recommendations, almost all requests were able to be funded. The following proposals are recommended for funding:

Senior Citizens Legal Services (Santa Cruz & San Benito Counties)
$27,950 to hire a part-time attorney to aid 50 older adults in housing issues
$13,696 to provide support for virtual legal services in remote locations.

Community Bridges Programs (Santa Cruz County)
Lift Line $7,000 for increased service related to the pandemic
Meals on Wheels of Santa Cruz County $178,797 for increased service related to the pandemic, including breakfasts

Family Services Agency of the Central Coast (Santa Cruz County)
I-You Venture $4,500 to support isolated seniors living in facilities via cards, letters, & activities
Senior Outreach $5,275 to augment & support virtual peer counseling

Jovenes de Antaño (San Benito County)
Meals on Wheels $58,359 for increased service related to the pandemic
Family Caregiver Support Program $4,000 for caregiver respite

Volunteer Center Helping Hands/RSVP (Santa Cruz County)
$3,150 PPE—for volunteer protection while performing home repairs
$6,440 Home Modification Equipment such as grab bars, drill bits, etc.
$5,000 Volunteer Recruitment to replace volunteer loss due to the pandemic
VISTA Center for the Blind and Visually Impaired (SC & SB Counties)
Virtual Services for the Blind & Visually Impaired
$4,900 recommended – ($1,475 denied due to CDA regulations regarding computers, etc)

Senior Network Services (Santa Cruz County)
Case Management: $10,000 for increased service related to the pandemic
Information & Assistance/Outreach $10,000 for outreach/publicity
Family Caregiver Support Program $10,000 – before July 1, 2021 and
$10,000 – between July 1 & September 30, 2021 to be used for respite and outreach/publicity

Advocacy Inc (Santa Cruz & San Benito Counties)
Ombudsman Program $10,884 for increased federal baseline funding

Seniors Council Direct Services (Santa Cruz & San Benito Counties)
$27,557 Purchase & distribute approximately 500 Emergency Kits to seniors (plus storage space). Exact Number of Kits and Amount To Be Determined.

Proposal needing more information:
Jovenes de Antaño
$32,000 for a new HDM delivery truck and $5,000 for a warming oven to maintain safe food temperatures.

Clay said that AAA staff recommended to Jovenes that a different funding source be used due to CDA capitol equipment purchase requirements and uncertainty if CARES Act funds can be used to purchase capitol equipment.

Patty explained the difference between the service models for Meals on Wheels in Santa Cruz County, which is primarily bulk delivery of frozen meals once a week, and Jovenes, which provides freshly prepared meals delivered daily 5 days a week, and uses program-owned vehicles equipped to maintain proper food temperatures and paid staff to deliver the meals.

Options for expending these funds were discussed, including:

- Allocate $37,500 if it is an allowable use of CARES funds.
- Jovenes could also use funds to purchase breakfast packs, which would increase meal counts and provide more food to seniors.
- Give staff flexibility to negotiate to provide additional meals with Community Bridges if Jovenes can't expend the funds.
- Increase number of emergency kits.
- Authorize staff to make minor adjustments in allocations if necessary.

Jane asked about distribution of emergency kits, and how to ensure they are distributed equitably to those in greatest need. Clay said that Foster Grandparents are a priority group and all providers are already targeting to low-income and seniors in greatest need. Health Projects Center has been able to provide kits to MSSP clients in Monterey but did not receive funding to do in SC County.
Mickie asked about the oven for the truck — Patty said it is a special oven to keep meals at a stable temperature during transit. She said that breakfast packs are an option that CB/Meals on Wheels is currently doing, and can be an effective way to get extra food to hungry seniors without having to add extra stops or routes. Wayne asked about the effect of Great Plates in San Benito County; the program was stopped and is starting again. Clay said that since participants can’t be on both, Jovenes did lose some clients to Great Plates.

In a previous round of funding, there was a question as to whether there was additional funding set aside for Volunteer Center’s Grocery Shopper program and if so, is the funding needed? No additional funding was requested in the current round.

MOTION, Luna/Norton, to approve the CARES Act and OTO allocations as submitted by staff. PASSED unanimously

Clay will confirm about the possibility of truck purchase; the Department of Aging must approve all equipment requests over $5000. He will also follow up with the Volunteer Center to see if additional funding is needed for the Grocery Shopper program. Purchase of emergency kits would be adjusted to funds available. Pam suggested that staff do this and come back to the Board in March.

MOTION, Rivas/Matzie to delay action on remaining funds that do not have specific staff recommendations until the March meeting. PASSED unanimously

Tanya Ridino arrived and introduced herself. She is the new Executive Director of Senior Citizens Legal Services. She expressed appreciation to the Seniors Council for their support.

8. Program Reports

7.1 Companion for Life/Falls Prevention— report in packet
7.2 Foster Grandparent/Senior Companion Program – no report
7.3 Area Agency on Aging – no additional report
7.4 ADRC – Report in packet. Clay and Britt hiring someone to work on ADRC
7.45 Project SCOUT- Report in packet

9. Miscellaneous Correspondence

None

10. Adjournment

The meeting was adjourned at 12:05 PM
Next meeting – March 18
Minutes prepared by: Patty Talbott
Date: 3-12-21

To: Area Agency on Aging Advisory Council
    Seniors Council Board of Directors

From: Clay Kempf, Executive Director

RE: Advocacy Committee March 2021 Report

Included in your packet are a number of items reflecting the work of staff and the Seniors Council’s Advocacy Committee. Items that are included or that will need to be discussed include the following:

a. State Budget Augmentation Efforts
   i. Nutrition Budget Augmentation Position Paper
   ii. Talking Points for Our Budget Augmentations

b. State Legislation – Positions and Priorities

c. Local Jurisdiction Funding

d. Santa Cruz County 2021 Senior Fact Sheet

e. San Benito County 2021 Senior Fact Sheet

f. Live Oak Senior Center

The materials in your packet – especially the Talking Points and Senior Fact Sheets - are encouraged to be used in any conversations or reports anyone may have regarding the growing needs of older adults in our communities. Population references are drawn from customized reports developed by the California Department of Finance for use by the California Department of Aging and related organizations.
2021 SAN BENITO COUNTY SENIOR FACT SHEET

Population Changes

- **Seniors are the fastest growing age group** in California and the United States.
  - The 60+ population has grown by over 40% since 2010 in California
  - The population of Californians aged 0-59 has increased less than 1% since 2010
- The 60+ population has increased by 48% since 2010 in San Benito County
- 3 people per week turned 75 in San Benito County in 2020
- 15 people per week turned 60
- The over-60 Medi-Cal Eligible in San Benito County population grew 66% since 2010
- 1,000 Californians are turning 65 every day for the next twelve years
- **Seniors are the fastest growing age group** in California and the United States. The 65-74 age group is projected to grown by 20.7% over the next 5 years (compared to 4.7% for all ages)

Senior Services Funding and the Cost of Long Term Care

- The 2018 average cost of a nursing home in California was over $100,000 per year
- Pre-COVID funding for local Older Americans Act programs has increased 10% in 35 yrs.
- U.S. Inflation since 1984-85 is over 151%
- Baseline Funding for the AAA has 32% of the buying power that it had 40 years ago.
- State funding for Older Californians Act Programs has been **eliminated**
- Successful programs such as Linkages have been closed

Senior Loneliness & Isolation has been a national crisis BEFORE COVID-19

- Being isolated has the health impact of smoking 15 cigarettes per day
- Senior isolation increases Medicare costs by about $7 billion per year
- Lonely seniors have a 45% increase in their risk of death
- COVID is estimated to have tripled the senior isolation crisis
- Seniors in rural communities are twice as likely to be isolated as their urban counterparts

Seniors and COVID-19

- 65% of ICU beds have been occupied by individuals 61+
- 85% of deaths were individuals aged 61+

Homeless Seniors

- Homeless seniors over age 50 are growing at a faster rate than any other age group
- In the 55+ population, homelessness is identified as a trigger for Mental Health Issues

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234 Santa Cruz Avenue • Aptos, California 95003 www seniorscouncil.org
PHONE: AAA – (831) 688-0400 • FG/SCP – (831) 475-0816 • SCOUT – 1-877-373-8297 • FAX: (831) 688-1225

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2021 SANTA CRUZ COUNTY SENIOR FACT SHEET

Population Changes
- Seniors are the fastest growing age group in California and the United States.
  - The 60+ population has grown by over 40% since 2010 in California
  - The population of Californians aged 0-59 has increased less than 1% since 2010
- The Santa Cruz County 60+ population has increased by more than 58% since 2010.
- 9,252 of the County’s 70,143 seniors are eligible for Medi-Cal
- The over-60 Medi-Cal Eligible population grew 92% since 2010
- 39 people per week turned 75 in Santa Cruz County in 2020
- 107 people per week turned 60
- 1,000 Californians are turning 65 every day for the next twelve years

Senior Services Funding and the Cost of Long Term Care
- The 2018 average cost of a nursing home in California was over $100,000 per year
- Pre-COVID funding for local Older Americans Act programs has increased 10% in 35 yrs.
- U.S. Inflation since 1984-85 is over 151%
- Baseline Funding for the AAA has 32% of the buying power that it had 40 years ago.
- State funding for Older Californians Act Programs has been eliminated.
- Successful programs such as Linkages have been closed

Senior Loneliness & Isolation has been a national crisis BEFORE COVID-19
- Being isolated has the health impact of smoking 15 cigarettes per day
- Senior isolation increases Medicare costs by about $7 billion per year
- Lonely seniors have a 45% increase in their risk of death
- COVID is estimated to have tripled the senior isolation crisis

Seniors and COVID-19
- 65% of ICU beds have been occupied by individuals 61+
- 85% of deaths were individuals aged 61+

Homeless Seniors
- There are twice as many homeless people over age 50 as there are under the age of 25
- In the 55+ population, homelessness is identified as a trigger for Mental Health Issues

\(^1\) Santa Cruz County Homeless Census

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MONTEREY, SAN BENITO, & SANTA CRUZ COUNTIES & YOUR PRIVATE DONATIONS
GENERAL FACTS (use for any issue)

Population Growth
- The California Department of Finance reports that the population of Californians aged 0-59 has increased less than ¾’s of 1% since 2010.
- The 60+ population has grown by over 40% since 2010.

COVID-19 Impacts
- 65% of ICU beds occupied by individuals 61+
- 85% of deaths were individuals aged 61+

SENIOR NUTRITION PROGRAMS

Proposal: Provide an additional $35 to $70 million to increase funding for senior nutrition programs. Governor Newsom’s budget extends last year’s additional $17.5 million for 12 more months.

No one in California should go hungry. Forty percent of older Californians do not have sufficient incomes to make ends meet. About 50% of older persons suffer from malnutrition. Almost one-and-a half million are threatened by hunger each day. It is essential to provide a safety net of preventive nutrition that enables older adults to age well.

The requested dollars would provide for an additional 5 million meals to more than 19,000 older Californians. These figures include an assumption that all federal and local funding remain constant.

Funding for the Senior Brown Bag Program was eliminated in 2009, adding additional pressure and demand on Older Americans Act Nutrition Programs

Key Talking Points
- Nearly 1.44 million Californians over the age of 60 are considered food insecure.
- $3 million will be needed to offset a 10 cent increase in meal cost.
- If funding is flat, a ten cent increase in meal cost will reduce the meals served by 1,826 per day and 12,800 per week
- $35 million will provide an additional 5.1 million meals per year, and serve some 19,000 new recipients.
- Directly addresses MPA Initiative 130 – Older Californians need for nutrition
BASELINE FUNDING INCREASE FOR AAAs

Proposal: Provide $3.3 million to allocate $100,000 per year of General Fund baseline funding for each of the State's 33 AAAs. Currently, $50,000 per year of baseline funds are provided. Additional funds are allocated on a population-based formula. The $50,000 per year baseline distribution of federal dollars has not been adjusted since its inception over 50 years ago.

Key Talking Points
• Over $158,000 is needed today to provide the purchase power of $50,000 in 1980.
• Reporting requirements have increased since the 1980 inception of the $50,000 baseline. Titles IIID and Titles IIIE have been added to Titles IIIB, IIIC-1, IIIC-2 and VII to AAA'S responsibilities
• There are currently no State funds for the basic operations of AAA oversight duties and responsibilities.
• Directly addresses MPA Initiative #101 – AAA local leadership structures, to meet growing & changing needs & continuing to advance equity for older Californians.

AGING & DISABILITY RESOURCE CONNECTIONS
(ADRC -aka No Wrong Door Service Access)

Proposal: Provide $10 million in addition to the Governor's proposal of $7.5 million to allow successful emerging Aging and Adult Resources Connections (ADRCs) to become fully operational and add additional Emerging ADRC's as a continued effort to follow the federal model and MPA recommendation to create no wrong door programs throughout California. Currently, there are only six operational and twelve emerging ADRCs in California.

Key Talking Points
• Creates formal partnerships between services to older adults and people with disabilities
• Establishes person-centered approaches to navigating our complex systems that enable health and independence for at-risk populations
• Connects those in need with Federal, State & Local services to avoid more costly and traumatic medical interventions
• Directly addresses MPA Initiative 98 – Build out the No Wrong Door model
FALLS PREVENTION

Proposal: Provide $5 million in additional funding to expand the Falls Prevention pilot program, in addition to the Governor's Proposal to extend the program time period. Program expenditures were initially delayed due to the onset of the COVID-19 pandemic. The program is administered by the Department of Aging.

Falls prevention programs have been proven to work. They lower medical costs, improve quality of life, and relieve pressure from emergency rooms, first responders/fire departments/police, and enhance health & independence. Falls prevention programs save lives, and operate at a fraction of the cost of treating traumatic falls.

Key Talking Points
- Every 11 seconds, an older adult is treated in the emergency room for a fall; every 19 minutes, an older adult dies from a fall.
- Falls result in more than 2.8 million injuries treated in emergency departments annually, including over 800,000 hospitalizations and more than 27,000 deaths.
- In 2013, the total cost of fall injuries was $34 billion.
- The financial toll for older adult falls is expected to reach $67.7 billion by 2020. 75% of these costs are paid for by Medicare and Medicaid.
- One-fourth of Americans aged 65+ fall each year.
- Addresses MPA Goal 2: Health Re-imagined
Providing Nutrition Services for Older Adults in a Post Covid-19 World

Executive Summary

Senior Nutrition programs are the cornerstones of successful social services. Tremendous success, overwhelming support, and unmatched community impact characterize food programs. Senior Nutrition Programs serve the most in need. Many clients are minority, over the age of 75, living in poverty, are women, and at high nutritional risk. During the Covid-19 pandemic, the area agencies on aging network increased nutrition services to meet the immediate need and demand, increasing the number of older adults enrolled in the program as well as the number of meals provided each week.

In FY 2018-2019, the network provided more than 17 million meals to more than 212,725 older adults. The average combined cost per meal served was $10.67. Total funding for the program was $192 million. This is estimated to increase to $213 million in FY 2019-2020. The pandemic identified a severely underfunded system of services and people that were on the edge for years, individuals who have been marginalized. Without an investment of State general funds and additional federal funding it will be impossible to meet the ongoing needs of this population. With older adults being at increased risk, many are quarantining in their homes. These older adults need food to be delivered, and lack the means or the resources to obtain the food that they need to survive.

It is unconscionable for Area Agencies on Aging to remove at risk older adults from a meal program without another safety net in place. California AAA’s will be forced to stop serving older adults in need, which could lead to other health related conditions, neglect, or death.

Recommendations:

- Maintain flexibilities in program operations for home delivered and congregate meals that allow for older adults to self-isolate until local health orders are lifted
- Amend the Older Americans Act and Older Californians Act Requirements to allow the AAA’s the flexibility for alternative meal model delivery when a local emergency is declared that involves older adults
- Based on best practices learned during the Covid-19 pandemic, amend the Older Americans Act and Older Californians Act requirements in the design of senior nutrition programs
- Obtain additional federal and state funding for the supportive services that these older adults need in order to live the new normal, post COVID-19
- Elevate the role of AAA’s in the Master Plan for Aging, specifically calling out the critical role that senior nutrition plays in providing access not only to nutritious food but also in connecting older adult to other needed services.
Meals provided are contingent on federal, state and local funding. In FY 2019-2020 meal counts and older adults served were increased due to a state investment of $17.5 million which is posed to be reduced to $8.75 million for 2020-2021.

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Weekly Meal Counts</th>
<th>Annual Meal Counts</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY 2018-2019</td>
<td>346,545</td>
<td>18,020,357</td>
</tr>
<tr>
<td>FY 2019-2020</td>
<td>369,622</td>
<td>19,220,357</td>
</tr>
<tr>
<td>(pre Covid estimate)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY 2019-2020</td>
<td>568,942</td>
<td>21,612,194</td>
</tr>
<tr>
<td>with Covid</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY 2020-2021</td>
<td>612,000</td>
<td>31,824,000</td>
</tr>
<tr>
<td>Post Covid</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**GREAT PLATES DELIVERED MEALS**

The introduction of the Great Plates Delivered meals program to the landscape and menu of available programs was forward thinking by the Governor with the best of intentions to meet an immediate need of food insecurity to the most at risk.

AAA’s once again stepped up to meet the challenge and need of operating this program contingent upon their county's approval. Among the unintended consequences of the program is the identification of a significant number of ineligible food insecure older adults, and the stress it has placed on the existing senior nutrition programs. In some areas the number of ineligible individuals for Great Plates has resulted in senior nutrition program waiting lists that are two to three times larger than ever before. The initial estimate for the number of consumers who are not on the current home delivered meal program and make 200% above the federal poverty level is 72,000 people. The Area Agencies on Aging are requesting that the State identify a strategy moving forward for when Great Plates and FEMA dollars are terminated. This number of older adults will still have nutrition needs post Covid-19 and these older adults cannot be absorbed into the current senior nutrition program. This will leave many vulnerable older adults without a safety net.

**MEETING THE NEEDS OF THIS POPULATION POST COVID-19**

Without an investment of State general funds and additional federal funding meeting the needs of this population is impossible. With older adults being at the highest risk, many if not most are quarantining in their homes. These older adults need food to be delivered and lack the means or the resources to obtain the food that they need to survive. Grocery and restaurant deliveries are not available in all counties or accessible to all older adults. Food Banks have ramped up to provide additional food, but home delivery is not widely available and is not provided in enough quantities to meet even 1/3 of the daily nutritional needs of older adults. Many older adults can no longer cook.

<table>
<thead>
<tr>
<th>Individuals</th>
<th>Need for food (individuals, age 65+)</th>
<th>Need for delivery (individuals, age 65+)</th>
<th>Demand for delivery (assume 70% take up)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-virus</td>
<td>1,692,508</td>
<td>306,223</td>
<td>Unknown</td>
</tr>
<tr>
<td>April</td>
<td>1,763,193</td>
<td>1,049,680</td>
<td>734,776</td>
</tr>
</tbody>
</table>
food for older adults pre and post Covid-19 focusing on the number of older adults (65+) who will be in need of delivery of food assistance.

The assumptions use the Elder Index\(^{iii}\), which is the State’s required planning measure of the minimum family income necessary for older adults to subsist with the assumption that someone living below the index would need assistance with free food\(^{iv}\). Based on this report, pre-Covid-19 the number of older adults needing food is 1,692,508.

The model assumes an older adult needs delivery if they live in a household that has no able-bodied members between the ages of 18 and 64 and assumes that older adults will be quarantining themselves. During the pre-virus period, older adults are included among the household members who could pick up food. The model also assumes that 70% of those defined as in need of delivery of free food will seek out services. Using the June delivery demand of 411,989 people needing food and accepting delivery of the food demonstrates the considerable shortfall of current investments in feeding older adults.

<table>
<thead>
<tr>
<th>Numbe r of older adults</th>
<th>Numbe r of Days per week</th>
<th>Total # of meals</th>
<th>Total Cost</th>
<th>Proposed FY 2020-2021 Current State and Federal Funding</th>
<th>Additional Funding Needed</th>
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<tbody>
<tr>
<td>411,989</td>
<td>7</td>
<td>150,375,985</td>
<td>$1,673,390,74</td>
<td>$305,135,00</td>
<td>$1,368,255,74</td>
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<tr>
<td>411,989</td>
<td>5</td>
<td>107,117,140</td>
<td>$1,192,004,36</td>
<td>$305,135,00</td>
<td>$886,869,367</td>
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<tr>
<td>205,994</td>
<td>5</td>
<td>53,558,570</td>
<td>$596,002,183</td>
<td>$305,135,00</td>
<td>$290,867,183</td>
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**CALIFORNIA’S CALL TO ACTION**

The State of California must lead the nation with how older adults are provided services in a post Covid-19 environment. Disasters such as earthquakes, fires, floods and now highly infectious diseases that disproportionally affect older adults are becoming the new normal and an intentionally built system for this new normal is needed.

The pandemic identified a severely underfunded system of services and people that were on the edge for years, individuals who have been marginalized. Studies estimate that the threat of hunger amongst older adults has grown by 27% between 2001 and 2016\(^{iv}\). With the increased media attention during the pandemic, older adults became aware of what AAA’s offer. It is unconscionable for Area Agencies on Aging to remove at risk older adults from a meal program.
without another safety net in place. California AAA’s will be forced to stop serving older adults which could lead to other health related conditions, neglect, or death.

We are asking that the California Department of Aging work with C4A on designing a system for a new normal where we are intentionally sheltering older adults for the next year by providing needed services at home which include a multifaceted meal program in order to address the needs within all counties. The meal program would include home delivery, a new congregate meal design, and grab-n-go/drive thru meal programs. We need to minimize the exposure of older adults in a congregate setting until a vaccine exists. Until there is a clear path to protect life, there must be alternative options to closely packed congregate dining centers. We cannot assume that people will pick up meals from a congregate setting as older adults will continue to shelter in place for the next year. Many older adults don’t have a means of transportation and rely on public transportation to get to their destination, which they may be unwilling to do in the future due to the perceived risk and the cumulative issue of exposure.

RECOMMENDATIONS
1. Maintain flexibilities in program operations for home delivered and congregate meals that allow for older adults to self-isolate until local health orders are lifted.
2. CDA and C4A to work together on a reopening plan for nutrition programs for older adults that consider a potential 3-12-month gradual reopening. This would include milestones at the local level.
3. Amend the Older Americans Act and Older Californians Act Requirements to allow the AAA’s the flexibility for alternative meal model delivery when a local emergency is declared that involves older adults.
4. Based on best practices learned during the Covid-19 pandemic amend the Older Americans Act and Older Californians Act requirements in the design of senior nutrition programs.
5. Obtain additional federal and state funding for the supportive services that these older adults need in order to live the new normal post COVID 19, to include: transportation, in home services, grocery store pick-up/delivery services, telephone reassurance, case management, and online programming to ensure that the digital divide is addressed.
6. California Department of Aging to work with statewide partners such as California Department of Social Services, California Department of Public Health and California Department of Health Care Services on a strategy in which state plans can meet the increasing nutritional needs of older adults post Covid-19, as well as to identify potential funding streams. This may include partnerships with Medi-Cal managed care plans and Medicare plans for funding and providing meals to their members in collaboration with local Area Agencies on Aging.

CONCLUSION

Affirmative leadership is required to ensure that at risk older adults receive nutritious meals and supportive services that they need and rely on. The Covid-19 pandemic has exacerbated and brought to light the challenge of growing old in California for many. Without State leadership, State and Federal flexibility and funding, AAA’s will be unable to serve older adults leading to increased risk for negative outcomes such as a decline in health, increased neglect and/or death. In a post COVID world the ability to act nimbly to meet the urgent needs of the people we serve requires new partnerships and collaborations as well as an intentional and thoughtful redesign of how services are delivered and adequately funded.
ii Does not include Families First or Cares Act funding

ii The Elder Index is computed by the UCLA Center for Health Policy Research, using a rich set of family composition definitions and is required that Area Agencies on Aging used it in planning at the local level.

iv Assumption made based on the observation that food is one of the first things the people cut back on when their income goes below a subsistence level and studies that show that as many as 1 in 3 older adults experience food insecurity.

iv The State of Senior hunger in America (2016). National Foundation to End Senior Hunger.
### AB 4
**Arambula D**  
**Medi-Cal: eligibility.**  
**Introduced:** 12/7/2020  
**Summary:** Would, effective January 1, 2022, extend eligibility for full scope Medi-Cal benefits to anyone regardless of age, and who is otherwise eligible for those benefits but for their immigration status, pursuant to an eligibility and enrollment plan. The bill would delete the specified provisions regarding individuals who are under 25 years of age or 65 years of age or older and delaying implementation until the director makes the determination described above. The bill would require the eligibility and enrollment plan to ensure that an individual maintains continuity of care with respect to their primary care provider, as prescribed, would provide that an individual is not limited in their ability to select a different health care provider or Medi-Cal managed care health plan, and would require the department to provide monthly updates to the appropriate policy and fiscal committees of the Legislature on the status of the implementation of these provisions.

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### AB 14
**Aquiar-Curry D**  
**Communications: broadband services: California Advanced Services Fund.**  
**Introduced:** 12/7/2020  
**Summary:** Current law establishes the State Department of Education in state government, and vests the department with specified powers and duties relating to the state’s public school system. This bill would authorize local educational agencies to report to the department their pupils’ estimated needs for computing devices and internet connectivity adequate for at-home learning. The bill would require the department, in consultation with the Public Utilities Commission, to compile that information and to annually post that compiled information on the department’s internet website.

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### AB 32
**Aquiar-Curry D**  
**Telehealth.**  
**Introduced:** 12/7/2020  
**Summary:** Current law requires a health care service plan contract or health insurance policy issued, amended, or renewed on or after January 1, 2021, to specify that coverage is provided for health care services appropriately delivered through telehealth on the same basis and to the same extent as in-person diagnosis, consultation, or treatment. Current law exempts Medi-Cal managed care plans that contract with the State Department of Health Care Services under the Medi-Cal program from these provisions, and generally exempts county organized health systems that provide services under the Medi-Cal program from Knox-Keene. This bill would delete the above-described references to contracts issued, amended, or renewed on or after January 1, 2021, would require these provisions to apply to the plan or insurer’s contracted entity, as specified, and would delete the exemption for Medi-Cal managed care plans. The bill would subject county organized health systems, and their subcontractors, that provide services under the Medi-Cal program to the above-described Knox-Keene requirements relative to telehealth.

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### AB 34
**Muratsuchi D**  
**Communications: Broadband for All Act of 2022.**  
**Introduced:** 12/7/2020  
**Summary:** Would declare the intent of the Legislature to enact legislation that would enact the Broadband for All Act of 2022, to become operative only if approved by the voters at the November 8, 2022, statewide general election, to authorize the issuance of state general obligation bonds to fund increased access to broadband services to rural, urban, suburban, and tribal unserved and underserved communities.

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### AB 71
**Rivas, Luz D**  
**Homelessness funding: Bring California Home Act.**  
**Introduced:** 12/7/2020  
**Summary:** Would, for taxable years beginning on or after January 1, 2022, include a taxpayer’s global low-taxable income in their gross income for purposes of the Personal Income Tax Law, in modified conformity with the above-described federal provisions. The bill would exempt any standard, criterion, procedure, determination, rule, notice, or guideline established or issued by the Franchise Tax Board to...
implement its provisions from the rulemaking provisions of the Administrative Procedure Act.

AB 98  
(Frazier D) Health care: medical goods: reuse and redistribution.  
Introduced: 12/9/2020  
Summary: Would require the California Department of Aging, upon appropriation by the Legislature, to establish a comprehensive 3-year pilot program in the Counties of Contra Costa, Napa, and Solano to facilitate the reuse and redistribution of durable medical equipment and other home health supplies. The bill would require the department to contract in each county with a local nonprofit agency to oversee the program and would require the contracting nonprofit agency to, at a minimum, develop a computerized system to track the inventory of equipment and supplies available for reuse and redistribution and organize pickup and delivery of equipment and supplies.

AB 123  
(Gonzalez, Lorena D) Paid family leave: weekly benefit amount.  
Introduced: 12/18/2020  
Summary: Current law establishes, within the Unemployment Compensation Disability Fund program, a family temporary disability insurance program, also known as the paid family leave program, for the provision of wage replacement benefits for up to 8 weeks to workers who take time off work to care for a seriously ill family member or to bond with a minor child within one year of birth or placement, as specified. Current law defines "weekly benefit amount" for purposes of both employee contributions and benefits under this program to mean the amount of weekly benefits available to qualifying disabled individuals pursuant to unemployment compensation disability law, calculated pursuant to specified formulas partly based on the applicable percentage of the wages paid to an individual for employment by employers during the quarter of the individual's disability base period in which these wages were highest, but not to exceed the maximum workers' compensation temporary disability indemnity weekly benefit amount established by the Department of Industrial Relations. This bill would revise the formula for determining benefits available pursuant to the family temporary disability insurance program, for periods of disability commencing after January 1, 2022, by redefining the weekly benefit amount to be equal to 90% of the wages paid to an individual for employment by employers during the quarter of the individual's disability base period in which these wages were highest, divided by 13, but not exceeding the maximum workers' compensation temporary disability indemnity weekly benefit amount established by the Department of Industrial Relations.

AB 279  
(Muratsuchi D) Intermediate care facilities and skilled nursing facilities.  
Introduced: 1/21/2021  
Summary: Would prohibit the owner of an ICF or SNF from ceasing to deliver or making significant changes to the nature of residential care services, or from transferring a resident to another facility, during any declared state of emergency relating to the coronavirus disease 2019 (COVID-19), except if the owner files for bankruptcy. The bill would require, upon termination of the same type of state of emergency, the owner of an ICF or SNF to issue a 6-month advance notice of any proposed sale or termination of the licensed operation of the facility to each resident before the sale or termination goes into effect. The bill would also prohibit during the same type of state of emergency, any changes in all conditions for the sale of assets imposed by the Attorney General, except if the owner of an ICF or SNF files for bankruptcy.

AB 383  
(Salas D) Mental health: older adults.  
Introduced: 2/2/2021  
Summary: Would establish within the State Department of Health Care Services an Older Adult Mental Health Services Administrator to oversee mental health services for older adults. The bill would require that position to be funded with administrative funds from the Mental Health Services Fund. The bill would prescribe the functions of the administrator and its responsibilities, including, but not limited to, developing outcome and related indicators for older adults for the purpose of assessing the status of mental health services for older adults, monitoring the quality of programs for those adults, and guiding decisionmaking on how to improve those services.

AB 470  
(Carrillo D) Medi-Cal: eligibility.  
Introduced: 2/8/2021
Summary: Would declare the intent of the Legislature to enact legislation to eliminate the consideration of assets for the purpose of determining Medi-Cal eligibility.

Position  Priority

**AB 523**
(Nazarian D)  Program of All-Inclusive Care for the Elderly.
Introduced: 2/10/2021
Summary: Current state law establishes the California Program of All-Inclusive Care for the Elderly (PACE program), to provide community-based, risk-based, and capitated long-term care services as optional services under the state’s Medi-Cal State Plan, as specified. Current law authorizes the State Department of Health Care Services to enter into contracts with various entities for the purpose of implementing the PACE program and fully implementing the single state agency responsibilities assumed by the department pursuant to those contracts, as specified. This bill would require the department to make permanent the specified PACE program flexibilities instituted, on or before January 1, 2021, in response to the state of emergency caused by the 2019 novel coronavirus (COVID-19) through all-facility letters, or other similar instructions taken without regulatory action. The bill would require the department to work with the federal Centers for Medicare and Medicaid Services to determine how to extend PACE flexibilities approved during the COVID-19 emergency.

Position  Priority

**AB 540**
(Petrie-Norris D)  Program of All-Inclusive Care for the Elderly.
Introduced: 2/10/2021
Summary: Current state law establishes the California Program of All-Inclusive Care for the Elderly (PACE program) to provide community-based, risk-based, and capitated long-term care services as optional services under the state’s Medi-Cal State Plan, as specified. Current law authorizes the State Department of Health Care Services to enter into contracts with various entities for the purpose of implementing the PACE program and fully implementing the single-state agency responsibilities assumed by the department in those contracts, as specified. This bill would exempt a beneficiary who is enrolled in a PACE organization with a contract with the department from mandatory or passive enrollment in a Medi-Cal managed care plan.

Position  Priority

**AB 636**
(Maienschein D)  Financial abuse of elder or dependent adults.
Introduced: 2/12/2021
Summary: Current law makes specified reports, including reports of known or suspected financial abuse of an elder or dependent adult, confidential. Current law requires information relevant to the incident of elder or dependent adult abuse to be given to specified investigators, including investigators from an adult protective services agency, a local law enforcement agency, and the probate court. This bill would also authorize information relevant to the incident of elder or dependent adult abuse to be given to a federal law enforcement agency charged with the investigation of elder or dependent adult abuse or to a local code enforcement agency for the sole purpose of investigating a property where the health and safety of an elder or dependent adult resident is at risk.

Position  Priority

**AB 665**
(Garcia, Eduardo D)  Residential care facilities for the elderly: basic services: internet access.
Introduced: 2/12/2021
Summary: Current law provides for the licensure and regulation of residential care facilities for the elderly by the State Department of Social Services. A violation of these provisions is a misdemeanor. Current law requires a licensed residential care facility for the elderly to provide specified basic services, including, but not limited to, care and supervision, and helping residents gain access to appropriate supportive services. This bill would add to basic services required for a licensed residential care facility for the elderly, by requiring a facility that has internet service for business administration or entertainment purposes to provide at least one common internet access tool with microphone and camera functions, to enable residents to participate in virtual visits or meetings in a manner that allows for discussion of personal or confidential information.

Position  Priority

**AB 695**
(Arambula D)  Elder and dependent adults.
Introduced: 2/16/2021
Summary: Current law requires each county welfare department to establish and support a system of protective services for elderly and dependent adults who may be subjected to neglect, abuse, or exploitation or who are unable to protect their own interests. Current law authorizes, in certain
circumstances, an elder or dependent adult to be taken into temporary emergency protective custody. For the purposes of the above-described provisions, existing law defines an elder as a person who is 65 years of age or older and a dependent adult as an adult between 18 and 64 years of age who has specific limitations.

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**AB 774**

(Voepel R) Senior legal services.

*Introduced: 2/16/2021*

*Summary:* Current law requires the California Department of Aging to establish a task force of certain members to study and make recommendations to the Legislature on the improvement of legal services delivery to senior citizens in California by exploring specified matters, including ways to ensure uniformity in the provision of legal services throughout the state and the possible establishment of a statewide legal hotline for seniors. Current law requires the task force to report and make its recommendations to the Legislature on or before September 1, 2002. This bill would require the department to establish a similar task force to assess the implementation of the recommendations made pursuant to the above-mentioned provisions, make additional recommendations by exploring the same matters explored by the initial task force, and to report the assessment and make its recommendations to the Legislature on or before September 1, 2023.

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**AB 848**

(Calderon D) Medi-Cal: monthly maintenance amount: personal and incidental needs.

*Introduced: 2/17/2021*

*Summary:* Current law requires the State Department of Health Care Services to establish income levels for maintenance need at the lowest levels that reasonably permit a medically needy person to meet their basic needs for food, clothing, and shelter, and for which federal financial participation will still be provided under applicable federal law. In calculating the income of a medically needy person in a medical institution or nursing facility, or a person receiving institutional or noninstitutional services from a Program of All-Inclusive Care for the Elderly organization, the required monthly maintenance amount includes an amount providing for personal and incidental needs in the amount of not less than $35 per month while a patient. Current law authorizes the department to increase, by regulation, this amount as necessitated by increasing costs of personal and incidental needs. This bill would increase the monthly maintenance amount for personal and incidental needs from $35 to $80, and would require the department to annually adjust that amount by the same percentage as the Consumer Price Index.

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**AB 849**

(Reyes D) Skilled nursing facilities: intermediate care facilities: liability.

*Introduced: 2/17/2021*

*Summary:* Current law authorizes a current or former resident or patient of a skilled nursing facility or intermediate care facility, as defined, to bring a civil action against the licensee of a facility who violates any of specified rights of the resident or patient or any other right provided for by federal or state law or regulation. Current law makes the licensee liable for up to $500. This bill would make the licensee liable for up to $500 per violation.

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**AB 874**

(Quirk-Silva D) PACE program.

*Introduced: 2/17/2021*

*Summary:* Would express the intent of the Legislature to enact legislation that would relate to expanding access to the PACE Reserve program, in response to the recession and housing crisis driven by the COVID-19 pandemic, to allow homeowners to avoid foreclosure.

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**AB 895**

(Holden D) Residential care facilities: living conditions.

*Introduced: 2/17/2021*

*Summary:* Would state the intent of the Legislature to enact legislation that would ensure residential care facilities for the elderly and adult residential facilities are clean and safe and promote wellness for the seniors and persons with disabilities who are served by those facilities.

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**AB 911**

(Nazarian D) Long-term services and supports.
Introduced: 2/17/2021
Summary: Would establish the California Long-Term Services and Supports Benefits Board (LTSS Board), to be composed of 10 specified members, including, among others, the Treasurer as chair, the Secretary of California Health and Human Services as vice chair, and 3 members to be appointed by the Governor. The bill would require the LTSS Board to manage and invest revenue deposited in the California Long-Term Services and Supports Benefits Trust Fund (LTSS Trust), which the bill would create in the State Treasury, to, upon appropriation, finance long-term services and supports for eligible individuals. The bill would require the Long Term Supports and Services Subcommittee of the Master Plan on Aging to provide ongoing advice and recommendations to the board.

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**AB 935**

(Maienschein D) **Telehealth: mental health.**

Introduced: 2/17/2021
Summary: Would require health care service plans and health insurers, by July 1, 2022, to provide access to a telehealth consultation program that meets specified criteria and provides providers who treat children and pregnant and certain postpartum persons with access to a mental health consultation program, as specified. The bill would require the consultation by a mental health clinician with expertise appropriate for pregnant, postpartum, and pediatric patients to be conducted by telephone or telehealth video, and to include guidance on the range of evidence-based treatment options, screening tools, and referrals. The bill would require health care service plans and insurers to communicate information relating to the telehealth program at least twice a year in writing. The bill would require health care service plans and health insurers to monitor data pertaining to the utilization of the program to facilitate ongoing quality improvements, as necessary, and to provide a description of the program to the appropriate department.

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**AB 1054**

(Arambula D) **Skilled nursing facilities: intermediate care facilities: feeding assistants.**

Introduced: 2/18/2021
Summary: Would authorize a skilled nursing facility or intermediate care facility to adopt a feeding assistant training program and would require the department to approve a feeding assistant training program for facilities to adopt that meets specified requirements. The bill would require skilled nursing facilities and intermediate care facilities that utilize feeding assistants to comply with certain requirements, including that a feeding assistant only provide dining assistance for residents who have no complicated feeding problems. The bill would also specify that hours of care provided by a feeding assistant may be used in determining whether a facility satisfies direct care service hour, or nursing hour, per patient day requirements.

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**AB 1083**

(Nazarian D) **Senior affordable housing: nursing pilot program.**

Introduced: 2/18/2021
Summary: Would require the California Department of Aging to establish and administer the Housing Plus Services Nursing Pilot Program in the Counties of Los Angeles, Orange, Riverside, Sacramento, and Sonoma. The program would provide grant funds to qualified nonprofit organizations that specialize in resident services for the purposes of hiring one full-time registered nurse to work at 3 senior citizen housing developments in each county to provide health education, navigation, coaching, and care to residents. The bill would require the department to submit a report to specified legislative committees and state agencies on or before January 1, 2026, and would repeal the program as of January 1, 2027.

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**AB 1243**

(Rubio, Blanca D) **Protective orders: elder and dependent adults.**

Introduced: 2/19/2021
Summary: Current law authorizes an elder or dependent adult who has suffered abuse, or another person who is legally authorized to seek that relief on behalf of that elder or dependent adult, to seek a protective order and governs the procedures for issuing that order. Current law defines protective order for purposes of these provisions to include an order enjoining a party from specified forms of abuse, including attacking, stalking, threatening, or harassing an elder or dependent adult, an order excluding a party from the elder or dependent adult's residence, or an order enjoining a party from specified behavior that the court determines is necessary. This bill would require an action seeking a protective order, as described above, to be heard in the probate or family division of the superior court.

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AB 1271  (Ting  D)  Civil rights: senior citizen housing developments.  
Introduced: 2/19/2021  
Summary: Current law generally prohibits discrimination in housing based on age, but permits certain restrictions based on age in connection with senior citizen housing developments. Current law makes a statement of legislative findings regarding the need for housing for senior citizens. This bill would make nonsubstantive changes in these provisions.

Position  Priority

AB 1300  (Voepel  R)  Residential care facilities for the elderly: electronic monitoring.  
Introduced: 2/19/2021  
Summary: Would enact the Electronic Monitoring in Residential Care Facilities for the Elderly Act to authorize the use of electronic monitoring devices either inside a resident’s room by a resident or in certain areas of a facility by the facility under specified conditions. For the use of a personal electronic monitoring device inside a resident’s room by a resident, the bill would require, among other things, the resident or the resident’s representative, as defined, to provide the facility with a completed notification and consent form, as specified, that includes the consent of the resident’s roommate, if any. The bill would also require the resident or the resident’s representative to post a sign at the entrance to the resident’s room stating that the room is monitored electronically.

Position  Priority

AB 1324  (Rivas, Robert  D)  Residential care facilities for the elderly.  
Introduced: 2/19/2021  
Summary: Current law provides for the licensure and regulation of residential care facilities for the elderly by the State Department of Social Services. A violation of these provisions is a misdemeanor. Current law requires a licensed residential care facility for the elderly to provide specified basic services. This bill would make technical, nonsubstantive changes to these provisions.

Position  Priority

AB 1502  (Muratsuchi  D)  Skilled nursing facilities.  
Introduced: 2/19/2021  
Summary: Current law authorizes the department to issue a temporary provisional license for a skilled nursing facility. Current law requires a licensee for a skilled nursing facility to provide written notice of a proposed change in licensee or management company to all residents of the facility and their representatives at least 90 days prior to a finalization of the sale, transfer of operation, or other change or transfer of ownership interests, except as specified. Current law imposes criminal penalties on a person who violates the licensing and regulatory requirements imposed on skilled nursing facilities. This bill would specifically prohibit a person, firm, partnership, association, corporation, or political subdivision of the state, or other governmental agency within the state from operating, establishing, managing, conducting, or maintaining a skilled nursing facility in this state, without obtaining a license on its own behalf and would further prohibit in any way using a license issued to another person or entity.

Position  Priority

SB 4  (Gonzalez  D)  Communications: California Advanced Services Fund.  
Introduced: 12/7/2020  
Summary: Current law establishes the Governor’s Office of Business and Economic Development, known as “GO-Biz,” within the Governor’s office to serve the Governor as the lead entity for economic strategy and the marketing of California on issues relating to business development, private sector investment, and economic growth. This bill would require the office to coordinate with other relevant state and local agencies and national organizations to explore ways to facilitate streamlining of local land use approvals and construction permit processes for projects related to broadband infrastructure deployment and connectivity.

Position  Priority

SB 28  (Caballero  D)  Rural Broadband and Digital Infrastructure Video Competition Reform Act of 2021.  
Introduced: 12/7/2020  
Summary: Current law establishes in state government the Department of Technology and makes it responsible for approval and oversight of information technology projects. Current law requires the Director of General Services to compile and maintain an inventory of state-owned real property that may be available for lease to providers of wireless telecommunications services for location of wireless
telecommunications facilities. This bill, the Rural Broadband and Digital Infrastructure Video Competition Reform Act of 2021 (Reform Act), would similarly require the Department of Technology, in collaboration with other state agencies, to compile an inventory of state-owned resources, as defined, that may be available for use in the deployment of broadband networks in rural, unserved, and underserved communities, except as specified. The bill would require the department to collaborate on the development of a standardized agreement to enable those state-owned resources to be leased or licensed for that purpose.

**Position** | **Priority**
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**SB 48**
| (Limón D) Dementia and Alzheimer’s disease. |
| **Introduced:** 12/7/2020 |
| **Summary:** Would require all general internists and family physicians to complete at least 4 hours of mandatory continuing education on the special care needs of patients with dementia. |

**Position** | **Priority**
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**SB 56**
| (Durazo D) Medi-Cal: eligibility. |
| **Introduced:** 12/7/2020 |
| **Summary:** Current law provides that Medi-Cal benefits for individuals who are 65 years of age or older, and who do not have satisfactory immigration statuses or are unable to establish satisfactory immigration statuses, will be prioritized in the Budget Act for the upcoming fiscal year if the Department of Finance projects a positive ending balance in the Special Fund for Economic Uncertainties for the upcoming fiscal year and each of the ensuing 3 fiscal years that exceeds the cost of providing those individuals full scope Medi-Cal benefits. This bill would, subject to an appropriation by the Legislature, and effective July 1, 2022, extend eligibility for full-scope Medi-Cal benefits to individuals who are 65 years of age or older, and who are otherwise eligible for those benefits but for their immigration status. |

**Position** | **Priority**
--- | ---

**SB 107**
| (Wiener D) CalFresh. |
| **Introduced:** 1/5/2021 |
| **Summary:** Would require the State Department of Social Services, in order to increase client access and retention within CalFresh, to participate in the Elderly Simplified Application Project, a demonstration project operated by the United States Department of Agriculture, Food and Nutrition Service. The bill would require the department, on or before January 1, 2023, to develop a CalFresh user-centered application for seniors 60 years of age or older and for people with disabilities who are eligible to be enrolled in the Elderly Simplified Application Project. |

**Position** | **Priority**
--- | ---

**SB 256**
| (Pan D) Medi-Cal: covered benefits. |
| **Introduced:** 1/26/2021 |
| **Summary:** Current federal law authorizes specified managed care entities that participate in a state’s Medicaid program to cover, for enrollees, services or settings that are in lieu of services and settings otherwise covered under a state plan. This bill would require those mandatorily developed health-plan- and county-specific rates for specified Medi-Cal managed care plan contracts to include in lieu of services and settings provided by the Medi-Cal managed care plan. The bill would require each Medi-Cal managed care plan to disclose the availability of in lieu of services on its internet website and its beneficiary handbook, and to disclose to the department specified information on in lieu of services that are plan specific, including the number of people receiving those services. The bill would require the department to publish that information on its internet website. |

**Position** | **Priority**
--- | ---

**SB 258**
| (Laird D) Aging. |
| **Introduced:** 1/26/2021 |
| **Summary:** Current law requires the California Department of Aging, in allocating specified state and federal funding to area agencies on aging, to ensure that priority consideration is given to criteria that reflect the state’s intent to target services to those in greatest economic or social need. Existing law defines “greatest social need” to mean the need caused by noneconomic factors, including physical and mental disabilities, that restrict an individual’s ability to perform normal daily tasks or that threaten the individual’s capacity to live independently. This bill would revise this definition to include human immunodeficiency virus (HIV) status as a specified noneconomic factor. |

**Position** | **Priority**
--- | ---
**SB 281**
(Dodd D) Medi-Cal: California Community Transitions program.
Introduced: 2/1/2021
Summary: Current law requires the State Department of Health Care Services to provide services consistent with the Money Follows the Person Rebalancing Demonstration for transitioning eligible individuals out of an inpatient facility who have not resided in the facility for at least 90 days, and to cease providing those services on January 1, 2024. Current law repeals these provisions on January 1, 2025. This bill would instead require the department to provide those services for individuals who have not resided in the facility for at least 60 days, and would make conforming changes. The bill would extend the provision of those services to January 1, 2029, and would extend the repeal date of those provisions to January 1, 2030.

<table>
<thead>
<tr>
<th>Position</th>
<th>Priority</th>
</tr>
</thead>
</table>

**SB 441**
(Hurtado D) Health care workforce training programs: geriatric medicine.
Introduced: 2/16/2021
Summary: The Song-Brown Health Care Workforce Training Act provides for specified training programs for certain health care workers, including family physicians, registered nurses, nurse practitioners, and physician assistants. Current law establishes a state medical contract program with accredited medical schools, hospitals, and other programs and institutions to increase the number of students and residents receiving quality education and training in specified primary care specialties and maximize the delivery of primary care and family physician services to underserved areas of the state. This bill would add geriatric medicine to the list of specified primary care specialties under the program. The bill would add training in geriatric medicine to the definition of a “family physician” as that term is used in the act.

<table>
<thead>
<tr>
<th>Position</th>
<th>Priority</th>
</tr>
</thead>
</table>

**SB 515**
(Pan D) Long-term services and supports.
Introduced: 2/17/2021
Summary: Would establish the California Long-Term Services and Supports Benefits Board (LTSS Board), to be composed of 10 specified members, including, among others, the Treasurer as chair, the Secretary of California Health and Human Services as vice chair, and 3 members to be appointed by the Governor. The bill would require the LTSS Board to manage and invest revenue deposited in the California Long-Term Services and Supports Benefits Trust Fund (LTSS Trust), which the board would create in the State Treasury, to, upon appropriation, finance long-term services and supports for eligible individuals. The bill would require the Long Term Supports and Services Subcommittee of the Master Plan on Aging to provide ongoing advice and recommendations to the board.

<table>
<thead>
<tr>
<th>Position</th>
<th>Priority</th>
</tr>
</thead>
</table>

**SB 591**
(Re Becker D) Senior citizens: intergenerational housing developments.
Introduced: 2/18/2021
Summary: Current law requires the covenants, conditions, and restrictions or other documents or written policy of a senior citizen housing development to set forth the limitations on occupancy, residency, or use on the basis of age. Current law requires that the limitations on age require, at a minimum, that the persons commencing any occupancy of a dwelling unit include a senior citizen who intends to reside in the unit as their primary residence on a permanent basis. Current law defines “senior citizen housing development” for these purposes as a residential development for senior citizens that has at least 35 dwelling units. Current law defines “qualifying resident” or “senior citizen” to mean a person 62 years of age or older, or 55 years of age or older in a senior citizen housing development. This bill would, among other things, permit the covenants, conditions, and restrictions to permit the establishment of an intergenerational housing development that includes senior citizens along with caregivers and transition age youths.

<table>
<thead>
<tr>
<th>Position</th>
<th>Priority</th>
</tr>
</thead>
</table>

**SB 648**
(Hurtado D) Care facilities.
Introduced: 2/19/2021
Summary: Would provide that a resident in an adult residential facility or a residential care facility for the elderly in which at least 75 percent of the residents receive benefits pursuant to the State Supplementary Program for the Aged, Blind, and Disabled is also eligible to receive IHSS following an assessment for IHSS. The bill would authorize an adult residential facility or residential care facility to receive up to 60 hours of IHSS a week and would require an adult residential facility or residential care facility that receives benefits pursuant to those provisions to use the savings derived from IHSS towards certain expenses, including, among others, facility upkeep or upgrades.

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7-19
<table>
<thead>
<tr>
<th>Position</th>
<th>Priority</th>
</tr>
</thead>
<tbody>
<tr>
<td>SB 675</td>
<td>(Ochoa Bogh R) Property taxation: Automated Clearing House payments.</td>
</tr>
<tr>
<td>Introduced: 2/19/2021</td>
<td></td>
</tr>
<tr>
<td>Summary: Current law requires real property taxes to be paid in 2 installments and requires the tax collector to collect those taxes. Current law authorizes the tax collector, with the approval of the county board of supervisors, to accept partial payment of real property taxes from the taxpayer in the case of a deficiency in the payment of those taxes. This bill would state that the Legislature encourages every board of supervisors to establish payment systems authorizing homeowners to pay their real property taxes in monthly installments with an Automated Clearing House Payment system.</td>
<td></td>
</tr>
</tbody>
</table>

Total Measures: 42
Total Tracking Forms: 42
American Rescue Plan Act Is Now Law: Older Americans Act Programs to Get $1.4 Billion in Emergency Funding

President Joe Biden signed the American Rescue Plan Act into law today, less than two months after he was inaugurated as our 46th President. The new law is “comprehensive, coordinated, and above all compassionate in response to our year-long pandemic,” said NANASP Executive Director Bob Blancato.

For older Americans, this bill provides various forms of genuine relief ranging from $1,400 stimulus checks to subsidized COBRA coverage and rental assistance. The bill is expected to lift 16 million people of all ages out of poverty, a remarkable achievement.

More specifically, this landmark law includes:
- $750 million for Older Americans Act (OAA) Title III-C nutrition
- $460 million for OAA Title III-B supportive services, including vaccine-related services and social isolation
- $145 million for OAA Title III-E caregiver support services
- $44 million for OAA Title III-D preventive health services
- $25 million for OAA Title VI A/C (nutrition, supportive services, caregiver services)
- $10 million for OAA Title VII long term care ombudsmen
- $37 million for the Commodity Supplemental Food Program
- 15 percent increase in Supplemental Nutrition Assistance Program (SNAP) benefits
- $500 million for nursing home strike teams
- $200 million for nursing home infection control
- $30 billion in emergency rental assistance and homeless relief programs
- $10 billion for mortgage assistance

“We are especially grateful for the continued support the Older Americans Act nutrition programs enjoy both in this bill and the three other prior covid-19 emergency bills. All told, these vital programs have been provided with more than $1.6 billion in emergency funding to ensure their continuation. We also note that the original version of the American Rescue Plan did not contain any additional emergency funding for any Older Americans Act programs. However, the day-to-day importance and value of these programs combined with dedicated advocacy by NANASP and other aging groups led to these funds being included,” said NANASP Board Chair Mary Beals-Luedtka.

NANASP and Meals on Wheels America have issued a joint statement of support in response, available here.

---

**Have You Renewed Your Membership Yet?**

Don’t miss out on access to the Washington Bulletin! Renew your membership (or join!) today online - choose to pay now by credit card or later by check. Renew your NANASP membership now for 2021 to make sure you don’t miss any benefits of membership.

[Renew or Join Now!]

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**NANASP**

**National Voice.**

**Local Action.**

Strengthening Policies and Programs that Nourish Seniors

**NANASP’s Vision** is to reshape the future of nutrition and healthy aging.

**NANASP’s Mission** is to strengthen, through advocacy and education, those who help older Americans.

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The National Association of Nutrition and Aging Services Programs (NANASP)

1612 K Street NW, Suite 200, Washington, DC, 20006

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The purpose of the Washington Bulletin is to provide members with the most current legislative information in the field of aging, community-based services, and nutrition and the elderly.
The 2021 California Senior Rally Day will be conducted this year using a virtual format. The Rally will again focus on the Master Plan for Aging. Kim McCoy Wadia, Director, California Department on Aging will be the keynote speaker, and Assembly Member Adrin Nazarian will provide closing remarks. Updates on the 2021-22 Budget as well as legislation impacting seniors will be provided. Attendees will have the opportunity to participate in the Advocacy portion of the program in the afternoon.

Registration will be from April 1st – 31st. Registration details will be provided in the April newsletter.
# Legislative Report

## CSL Sponsored Bills

**March 11, 2021**

<table>
<thead>
<tr>
<th>Bill #</th>
<th>Author</th>
<th>Summary</th>
<th>CSL Author</th>
<th>Status</th>
</tr>
</thead>
</table>
| AB 98  | Frazier| Health Care: Medical Goods: Reuse Redistribution
This bill would require California Department of Aging (CDA) to establish a 3 year pilot program in the Counties of Contra Costa, Napa and Solano to facilitate the reuse and redistribution of durable medical equipment and home health supplies. | Baginski | Assembly Aging & Long Term Care Committee Hearing 4/6/21 |
| AB 383 | Salas | Mental Health: Older Adults: This bill would establish within the State Department of Health Care Services an Older Adult Mental Health Services Administrator to oversee mental health services for older adults. The bill would require that position to be funded with administrative funds from the Mental Health Services Fund. The bill would prescribe the functions of the administrator and its responsibilities. | Krohn (2019) | Assembly Aging & Long Term Care Committee Hearing 4/6/21 |
| AB 848 | L. Calderon | Medi Cal: Long Term Care: Personal Needs Allowance:
Increases the personal needs allowance from $35 to $80 per month and annually adjusts the allowance by the same percentage as the Consumer Price Index. | Wilder | Referred to Committee on Health. |
| SB 675 | O. Bogh | Property Taxation: Automated Clearing House Payments:
Encourages every board of supervisors to establish payment systems authorizing homeowners to pay their real property taxes in monthly installments with an Automated Clearing House Payment system. | Fortunati | Amended. Re-referred to Senate Rules Committee. |
| TBD    | E. Garcia | Senior Malnutrition Awareness Day | Pointer | Waiting for bill number to be assigned |
## CSL Support Bills

<table>
<thead>
<tr>
<th>Bill #</th>
<th>Author</th>
<th>Summary</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>AB 14</td>
<td>Aguilar-Curry</td>
<td><strong>Internet For All Act of 2021:</strong> Prioritizes the deployment of broadband infrastructure in the most vulnerable and unserved rural and urban communities by utilizing the CA Advanced Services Fund (CASF) to provide community grants to bridge the digital divide.</td>
<td>Assembly Communications and Conveyance Committee</td>
</tr>
<tr>
<td>AB 23</td>
<td>Chen</td>
<td><strong>EDD Cross Check System:</strong> By July 1, 2021 EDD would be required to cross-check all claimant information with state and county correctional facility inmate data to determine claimant eligibility.</td>
<td>Assembly Insurance Committee</td>
</tr>
<tr>
<td>AB 29</td>
<td>Cooper</td>
<td><strong>State Bodies: Increasing Public Access:</strong> Requires all materials and writings associated with an agenda item to be publicly available at least 72 hours prior to any meeting.</td>
<td>Assembly Governmental Organization Committee</td>
</tr>
<tr>
<td>AB 323</td>
<td>Kalra</td>
<td><strong>Long Term Care Facilities: Accountability:</strong> Updates long-term care facility citation penalties and standards for negligent care to safeguard nursing home and long-term care facility residents.</td>
<td>Assembly Health Committee</td>
</tr>
<tr>
<td>SB 48</td>
<td>Limón</td>
<td><strong>Dementia and Alzheimer's Disease:</strong> All general internists and family physicians would need to complete at least 4 hours of mandatory continuing education on the special care needs of patients with dementia. Upon license renewal at least 10 hours of continuing education would be required. This bill would ensure that individuals living with dementia and Alzheimer's disease receive a timely diagnosis.</td>
<td>Amended. Referred to Senate Appropriations Committee</td>
</tr>
<tr>
<td>SB 56</td>
<td>Durazo</td>
<td><strong>Health4All Seniors:</strong> Ensures that all low income seniors who qualify for publicly funded Medi-Cal have access to quality care regardless of Immigration status.</td>
<td>Amended. Re-referred to Senate Health Committee.</td>
</tr>
<tr>
<td>SB 107</td>
<td>Weiner</td>
<td><strong>Easing Access to CalFresh:</strong> Simplifies the CalFresh application process by requiring the Dept of Social Services to implement all elements of the Federal Elderly Simplified Application Project (ESAP) under its existing CalFresh program, including a simplified application. Additionally, this requires by 2024, all counties offer the ability to apply for and recertify CalFresh benefits over the phone.</td>
<td>Referred to Senate Appropriations Committee.</td>
</tr>
<tr>
<td>SB 221</td>
<td>Weiner</td>
<td><strong>Timely Mental Health Care:</strong> Establishes timely access standards for mental health care follow-up appointments needed by patients in ongoing, medically necessary treatment for mental health and substance use disorders. This addresses current widespread, lengthy delays in follow-up care.</td>
<td>Referred to Senate Health Committee. Hearing 3/17/21.</td>
</tr>
<tr>
<td>SB 258</td>
<td>Laird</td>
<td><strong>HIV &amp; Aging Act:</strong> Updates definition of &quot;greatest social need&quot; to include cultural and social isolation caused by HIV status. This ensures older people with HIV have access to programs and services administered through CDA.</td>
<td>Re-referred to Senate Appropriations Committee.</td>
</tr>
</tbody>
</table>
Date: 3-12-21

To: Area Agency on Aging Advisory Council
   Seniors Council Board of Directors

From: Clay Kempf, Executive Director

RE: Executive Director’s March Report

COVID-19
COVID-19 continues to be at the forefront of all programs serving seniors, including our
own agency. We operate remotely for most of our activities as much as possible, with the
office only being open for staff and deliveries.

Project SCOUT’s services have been especially hard hit by these circumstances. Program
Director Eduardo Santana has made incredible efforts to continue to provide services
remotely, but those efforts result in staff needing to contact almost every single client
directly. Traditionally, we would set up tax assistance sites throughout the community, and
those needing assistance would arrive at the sites and be helped by the assigned
volunteers. Under COVID-19, all sites are closed, so each and every individual needing help
must contact the SCOUT offices directly and drop off their tax materials, which are then
distributed to our volunteer tax preparers.

Our Foster Grandparent & Senior Companion Programs continued to receive extensions to
the rule allowing us to keep paying stipends to our volunteers if they are unable to “work”
due to COVID-19. FGP/SCP volunteers are, by definition, low-income older adults who rely
on their stipends to meet their basic living expenses.

Vaccines continue to be provided in our local communities for individuals 65+ years of age
and in several categories of essential workers. Unfortunately, non-profit employees serving
older adults are generally not receiving such classifications. Progress is being made,
however, and we’re hopeful that in a few months our operations will return to more
normal circumstances.
BUDGET OUTLOOK
Local funding discussions are about to get underway, for better or for worse. San Benito County and the City of Hollister continue to be the most progressive of our jurisdictions in their recommendation of the AAA's role of a quasi-government organization and fund us as part of their regular budget. Discussions with Santa Cruz County staff continue regarding this option, with very little progress made to date.

Details of our other local jurisdictions will be discussed by the Advocacy Committee.

State Funding increases have been among the priorities of the past month, as reported under the Advocacy Committee. Serving as jurisdictional co-chair for the California Association of Area Agencies on Aging has provided us the opportunity to present our activities as possible statewide AAA priorities, and resulted in being appointed to various panels on both the California Senate & Assembly Budget Sub-committees on Health & Human Services.

AGE-FRIENDLY COMMUNITIES No update. As reported last month, the effort remains on hold (due to COVID 19) with no action taking place since the County of Santa Cruz took over the project a year ago.

The AAA Advisory Council and the Seniors Council Board of Directors recommendation to move forward with the Advisory Council serving as the County-wide Age-Friendly Advisory Committee has been discussed with County staff but no action has taken place. The Board's offer to provide independent analysis of the implementation of the Age Friendly plans has also been mentioned in meetings with County staff.

MONTHLY WEBINARS
We continue to partner with Kaiser Permanente and the Santa Cruz Warriors to host local webinars featuring health-related topics. This week the event was “Food for Thought: Nourishing the Mind, Body & Spirit While at Home”, and was very well received. Our Registered Dietician Caren Dix did a fantastic job of cooking on camera while discussing healthy eating and socialization. See the attached flyer.

MASTER PLAN FOR AGING
We have now set the Wednesday, May 19th AAA Advisory Council meeting as our local launch of Master Plan for Aging (MPA) activities. May is Older Americans Month, and this year's theme "Communities of Strength" fits perfectly with kicking off the development of a MPA local playbook. Our federal partners put special emphasis on the power of connection and engagement in building strong communities as part of the celebration.
Our AAA Leadership Team of Patty Talbott, Britt Bassoni and myself are putting together what we hope will be a strong, dynamic and interactive program. We hope to engage the participation of not only older adults and their caregivers, but also people with disabilities, service providers, policy makers, funders, and local elected officials. As you all know, the MPA is broad, far-reaching, and includes goals far beyond our capacity to lead change. However, we are hoping that we can serve as a convener and a catalyst for many of the opportunities the MPA highlights.

We’ll reach out to and work with various Key Partners to move the event forward. To date, some of these include Santa Cruz County, the California Department of Aging, the San Benito County Aging & Long Term Care Commission, Kaiser Permanente, and others. Our experience with our Kaiser & Santa Cruz Warriors is providing valuable web hosting experience, and we’ll continue to use Zoom for our Master Plan for Aging rollout.
CALIFORNIA'S
MASTER PLAN FOR AGING

SANTA CRUZ & SAN BENITO COUNTIES
LAUNCH EVENT

IDEAS, PERSPECTIVES, AND STRATEGIES ON CREATING COMMUNITIES FOR ALL AGES & ABILITIES

JOIN VIA ZOOM • MAY 19, 2021 • 10AM
https://us02web.zoom.us/j/87857986253

Hosted by
Seniors Council of Santa Cruz & San Benito Counties
Date: March 12, 2021

To: Seniors Council Board of Directors

From: Clay Kempf, Executive Director

RE: Allocation of Remaining CARES ACT Funding

BACKGROUND

Last month, the Board took action to allocate the vast majority of our remaining CARES ACT funding and our newly announced one-time only funding and 2020-21 budget augmentations. The following chart shows the total allocations by agency from last month’s actions:

<table>
<thead>
<tr>
<th>Provider</th>
<th>OTO – spend by 6/30/21</th>
<th>CARES – spend by 9/30/21</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advocacy Inc.</td>
<td>$10,597</td>
<td>0</td>
<td>$10,597</td>
</tr>
<tr>
<td>Lift Line (Community Bridges)</td>
<td>0</td>
<td>$7,000</td>
<td>$7,000</td>
</tr>
<tr>
<td>Meals on Wheels (Community Bridges)</td>
<td>$20,146</td>
<td>$158,651</td>
<td>$178,797</td>
</tr>
<tr>
<td>Family Services Agency of the Central Coast</td>
<td>0</td>
<td>$9,775</td>
<td>$9,775</td>
</tr>
<tr>
<td>Jovenes de Antaño</td>
<td>0</td>
<td>$62,359</td>
<td>$62,359</td>
</tr>
<tr>
<td>Senior Citizens Legal Services</td>
<td>$28,216</td>
<td>$13,696</td>
<td>$41,912</td>
</tr>
<tr>
<td>Senior Network Services</td>
<td>$19,208</td>
<td>$20,526</td>
<td>$39,734</td>
</tr>
<tr>
<td>Vista Center</td>
<td>0</td>
<td>$4,900</td>
<td>$4,900</td>
</tr>
<tr>
<td>Volunteer Center</td>
<td>0</td>
<td>$14,590</td>
<td>$14,590</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$78,167</strong></td>
<td><strong>$291,497</strong></td>
<td><strong>$369,664</strong></td>
</tr>
</tbody>
</table>

Awarded funds were to be used as follows:

**Senior Citizens Legal Services (Santa Cruz & San Benito Counties)**
$27,950 to hire a part-time attorney to aid 50 older adults in housing issues
$13,962 to provide support for virtual legal services in remote locations.
Community Bridges Programs
- **Lift Line** (*Santa Cruz County*)
  $7,000 for increased service related to the pandemic
- **Meals on Wheels of Santa Cruz County** (*Santa Cruz County*)
  $178,797 for increased service related to the pandemic, including breakfasts

Family Services Agency of the Central Coast
- **I-You Venture** (*Santa Cruz County*)
  $4,500 to support isolated seniors living in facilities via cards, letters, & activities
- **Senior Outreach** (*Santa Cruz County*)
  $5,275 to augment & support virtual volunteer counseling efforts

Jovenes de Antaño
- **Meals on Wheels of San Benito County** (*San Benito County*)
  $58,359 for increased service related to the pandemic
- **Family Caregiver Support Program** (*San Benito County*)
  $4,000 for caregiver respite

Volunteer Center
- **Helping Hands/RSVP** (*Santa Cruz County*)
  $3,150 PPE – for volunteer protection while performing home repairs
  $6,440 Home Modification Equipment such as grab bars, drill bits, etc.
  $5,000 Volunteer Recruitment to replace volunteer loss due to the pandemic

**VISTA Center** (*Santa Cruz & San Benito Counties*)
**Virtual Services for the Blind & Visually Impaired**
$4,900 recommended – ($1,475 denied due to CDA regulations regarding computers, etc)

Senior Network Services (**Santa Cruz County**)
- **COVID-related Case Management**
  $10,000 for increased service related to the pandemic
- **Information & Assistance Outreach**
  $10,000 for outreach regarding services available
- **Family Caregiver Support Program**
  $9,734 – before July 1, 2021
  $10,000 – between July 1 & September 30, 2021

**Advocacy Inc.** (**Santa Cruz & San Benito Counties**)
**Ombudsman Program**
$10,884 for increased federal baseline funding
REMAINING FUNDS DEFERRED TO MARCH ACTION

$37,500 was left unallocated pending approval from the California Department of Aging to use those funds for the purchase of a vehicle and warming oven for the delivery of home-delivered meals in San Benito County. Jovenes de Antaño would be the recipient. Staff recommended that any remaining funds be used to purchase Emergency Response Kits/Backpacks for distribution to vulnerable seniors in Santa Cruz & San Benito Counties. The number of kits to be purchased would depend on costs per kit (about $50 ea) and funds available. $13,705 would be allocated if the Jovenes vehicle was approved; $51,205 would be used for this purchase if the vehicle was not funded.

California Department of Aging has informed us purchase of the vehicle would be allowed if the vehicle is used to deliver additional meals as part of our COVID-19 response. As our CARES ACT allocations include funding to Jovenes for the provision of additional home-delivered meals, this criteria is met.

RECOMMENDED BOARD ACTION

1) Allocate $37,500 to Jovenes de Antaño for the purchased of a vehicle and warming oven for the delivery of home-delivered meals in San Benito County;
2) Allocate $13,705 for the Seniors Council for the purchase of Emergency Response kits, to be distributed to vulnerable seniors in Santa Cruz & San Benito Counties.
DATE: March 12, 2021

TO: Seniors Council Board of Directors

FROM: Gus Ceballos, Program Director

RE: Falls Prevention Program February 2021 report

Companion for Life
End of January totals:

Subscribers: 335
Monitoring Fees from Subscribers: $10,590 (estimated)
Medical Guardian Monitoring costs: $4,090 (estimated)
Net total to uses on CFL expenses: $6,500 (estimated) for February 2021

A Matter of Balance
The first virtual call is still scheduled to start on March 17th, 2021. Gus Ceballos will be leading the class with Lydia Ramirez, manager for FGP (Santa Clara), as co-coach.

In-Home Risk Assessment
Finalizing our in-house brochure and getting ready to roll out the program to the general public in late April 2021, at the latest.

Back-up/Support Needed
The need to provide additional assistance and coverage to the Program Director position still has not been addressed
Back
(Contact
Information)
(Tag Line)
(Quote)
(Additional Photo)

Falls are the leading cause of fatal and non-fatal injuries for older Americans. Falls threaten seniors' safety and independence and generate enormous economic and personal costs.

However, falling is not an inevitable result of aging. Through practical lifestyle adjustments, evidence-based falls prevention programs, and clinical-community partnerships, the number of falls among seniors can be substantially reduced.

It is our goal to reduce the number of debilitating falls suffered by older adults and persons with disabilities in Santa Cruz and San Benito counties.

Services may include:
- Fall prevention information and education
- Referrals and provision of fall and injury prevention resources
- In-home environmental assessments
- Home modifications
- Instruction on behavioral, physical and environmental aspects of fall prevention
- Purchase of injury prevention equipment, services, materials and labor costs

Take Steps to Prevent Falls

The Seniors Council Falls Prevention Program
Servicing Santa Cruz and San Benito Counties
<TEMPORARY BROCHURE>

831.688.9217

234 Santa Cruz Ave
Aptos, CA 95060

Sponsored by The Seniors Council of Santa Cruz and San Benito Counties and Circle at Home
Falls Prevention: 2-minute elevator speech/newspaper ad

Millions of older adults live with a fear of falling.

This is especially true of older individuals with chronic health issues, disabilities or those who experience a form of social isolation.

This fear is real.

Nearly 33% of adults over 65 years of age will experience a fall. Many of these falls can cause trauma which may lead to long-term physical and mental health issues. They may also incur medical costs beyond the life savings of most individuals.

The truth is, with the proper resources, the severity and the frequency of falls in older adults, and persons with disabilities, can be easily managed.

The Seniors Council Falls Prevention Program provides individuals and communities in Santa Cruz and San Benito Counties with the necessary resources to significantly reduce the number of falls that older and disabled adults experience, and can also provide timely assistance in the event an individual experiences a fall and is unable to call for help on their own.

The Seniors Council Falls Prevention Program was created to provide health care professionals and community-based partners, caregivers, older adults, individuals living with disability, and their immediate family a one-stop destination for falls prevention services in Santa Cruz and San Benito Counties.

These resources are offered at little to no-cost to at-risk and income-qualified older adults and individuals living with disability.

With a single phone call, an individual can be immediately directed to falls prevention resources in their community. Resources such as:

A Matter of Balance and A Matter of Balance - Virtual – free in-person or on-line workshops designed to help older adults aged 60+ to overcome their fear of falls.

Companion for Life – a low-cost locally based personal emergency response system (PERS) which can provide an at-risk adult immediate assistance after a fall.

And,

In-Home Falls Risk and Safety Assessments – no-cost in-home behavioral and environmental safety assessments and no-cost basic home repairs to identify and address falls risks and needed repairs in the homes of older adults or individuals living with disability.

Our goal to reduce the number of debilitating and catastrophic falls suffered by older adults and persons with disabilities in Santa Cruz and San Benito Counties and to provide community direction and leadership in the area of fall prevention.

For services, please call The Seniors Council Falls Prevention Program at (831) 688-0400, or email us at www.fallsprevention@seniorscouncil.org.
March 9, 2021

Clay Kempf
Seniors Council of Santa Cruz and San Benito Counties
234 Santa Cruz Avenue
Aptos, CA 95003

Dear Mr. Kempf:

The California Department of Aging has reviewed and approved your Fiscal Year (FY) 2020-24 Area Plan (AP). California Code of Regulations, Title 22, Section 7304, requires the Area Agency on Aging to submit a four-year AP. Please find attached your approved FY 2020-24 AP.

The Department’s approval includes your request for waiver(s) to provide the following direct service(s) for FY 2020-24 Area Plan:

- IIIB: Personal Affairs Assistance
- IIIC-1: Congregate Nutrition
- IIIC-1 and IIIC-2: Nutrition Education

We acknowledge you, your staff and governing board, advisory council, and community representatives for your efforts in developing the AP, and efforts in building and enhancing your local community-based system of services for older adults, adults with disabilities, and their caregivers.

Please provide a copy of this letter to the Governing Board and Advisory Council chairpersons. If you have any questions, feel free to contact me.

Sincerely,

Ellen Goodwin
State Plan Manager
Home and Community Living Division
California Department of Aging
ellen.goodwin@aging.ca.gov
PROJECT SCOUT
March 2021 Report

Project SCOUT’s Online and Drop off Service 2021

Project SCOUT currently has a county-wide online, as well as drop-off tax assistance program by request (see flyer):

Totals as of February 28th, 2021:

**SCC TCE program**
- Number of Federal returns prepared – 103
- Dollar Amount of Total refunds – $44,353.00
- Dollar Amount of Federal EITC Claimed – $35.00
- ITIN COUNT – 0
- PRIMARY OR SECONDARY 60+ - 67

**SCC VITA program**
- Number of Federal returns prepared – 56
- Dollar Amount of Total refunds – $62,359.00
- Dollar Amount of Federal EITC Claimed – $25,724.00
- ITIN COUNT – 3

**MAYOR HURDLES THIS TAX SEASON:**

1. This year tax season started late on February 12th, 2020
2. Limited volunteers available working remotely
3. Limited volunteers working at drop-off sites
4. Inadequacies at drop off sites / constantly changing logistics that have meant cancellations or rearranging of scheduling.
5. Appointment only drop-off due to COVID has limited the amount of people that can be serviced.
6. Phone system that cannot handle the amount of calls that we get per day it has been difficult to assist as many as we would have liked.
7. Online system is overwhelming volunteers who are not “techie” enough to be able to respond to clients as we would like.

Eduardo Santana
Program Manager
Project SCOUT
Phone: 831-724-2606
Mobile: 831-318-1014
Email: eduardos@seniorscouncil.org
Website: http://www.seniorscouncil.org/programs/projectscout/
Join us on Tuesday, March 9th at 10:00 am for a conversation about food and the role it plays in your mental health and well-being. You’ll hear from the Seniors Council Consulting Registered Dietitian Nutritionist, and well as Kaiser Permanente’s local mental health and wellness leadership, about nourishing your mind, body and spirit while at home during the pandemic. There will also be a cooking demonstration to accompany the discussion!

- Caren Dix, Registered Dietitian Nutritionist, Seniors Council of Santa Cruz & San Benito Counties
- Rick Galvan, Psychiatry Unit Manager, Kaiser Permanente Santa Cruz County

**BE A PART OF THE CONVERSATION!**

WHAT: Food for Thought  
WHEN: Tuesday, March 9th - 10:00 AM—11:00 AM  
WHERE: https://us02web.zoom.us/j/89316783240

Questions? Email brittb@seniorscouncil.org