



CABINET FOR HEALTH
AND FAMILY SERVICES
Department for Aging and
Independent Living

Regional Plans on Aging State Fiscal Years 2027-2029

Lincoln Trail Area Development District

Area Agency on Aging and Independent Living

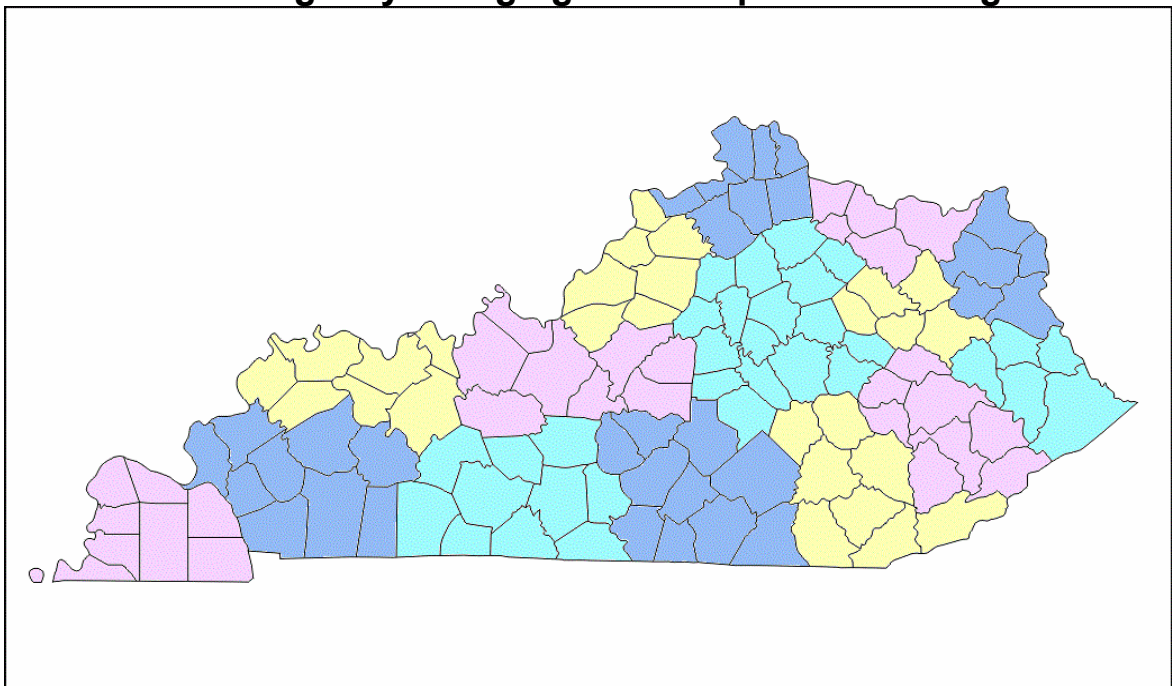


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Overview

The Area Plan is a public document that shall use clear and concise language to organize the information logically and should be easily understood by the public and aging network partners. The document shall be written to ensure accessibility by keeping the tone informative and providing visual aids such as defined charts, graphs, and diagram legends. The Area Plan shall be reflective of services provided in the planning and service area, the operations of the Area Agency on Aging, and of the goals of the aging network in the region.

In accordance with the Older Americans Act of 1965, as amended, Section 307(1)(A) require each area agency on aging designated under section 305(a)(2)(A) to develop and submit to the State agency for approval, in accordance with a uniform format developed by the State agency, an area plan meeting the requirements of section 306 of the Act. This format is to be used by area agencies on aging and independent living in developing an area plan for the administration and provision of specified adult and aging services in each planning area. The Area Plan required for State Fiscal Year 2027-2029 will be a three-year plan cycle.

Area plans are prepared and developed by the Area Agencies on Aging and Independent Living. Each agency is responsible for the plan for the multi-county planning and service area in which the agency is located. The area plan should reflect the efforts of the AAAIL:

Purpose

This Area Plan serves multiple purposes including, but not limited to:

- a. Provide tangible outcomes through planning and report achievement(s) based on long term efforts as set by the AAAIL.
- b. Provide data and outcomes of activities into proven best practices which may be used to ensure additional funding.
- c. Provide a clear framework regarding coordination and advocacy activities to meet the needs of the population served that have the greatest social and economic need.
- d. Provide goals and objectives that shall be implemented within the service plan timeframe.

The disaster plan and Senior Community Service Employment Program (SCSEP) are separate plans and not included in this plan. Separate instructions will be sent for those plans by the program coordinator.

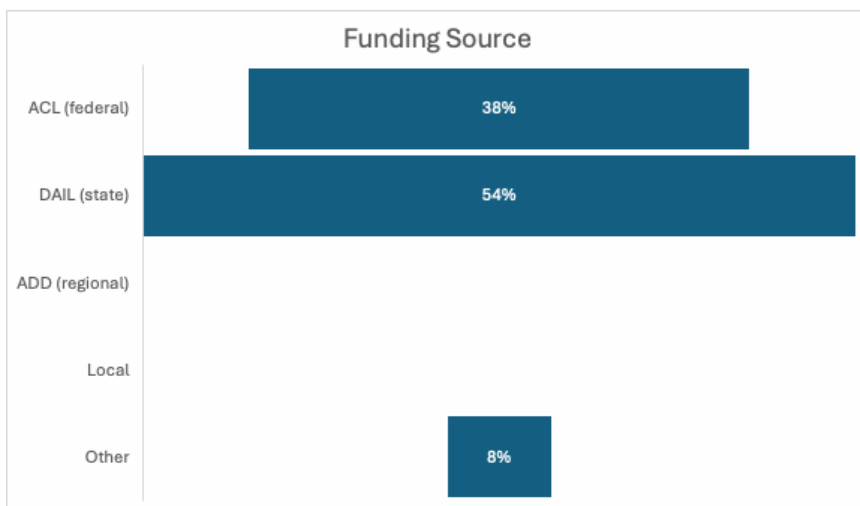
I. Glossary of Acronyms

AAAIL	Area Agency on Aging and Independent Living
ADD	Area Development District
ADL	Activity of Daily Living
DAIL	Department for Aging and Independent Living
FY	Fiscal Year
IADL	Instrumental Activity of Daily Living
K4A	Kentucky Association of Area Agencies on Aging
OAA	Older Americans Act
PSA	Planning Service Area
SCSEP	Senior Community Service Employment Program
SHIP	State Health Insurance Assistance Program
Title III B	Grants to states for Supportive Services and Senior Centers
Title III C	Grants to states for Nutrition Services
Title III D	Grants to states for Preventative Health Services
Title III E	Grants to states for Family Caregiver Support Program
Title V	Grants to states for SCSEP
Title VII	Grants for Ombudsman Services, Elder Rights and Abuse
VA	Veterans Administration

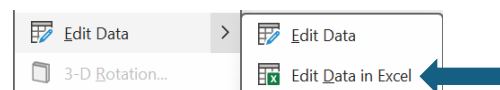
Additional acronyms may be added as needed.

II. Executive Summary

Description of Federal, State, and Local Aging Network Funding: Explain the aging network(s) funding received from the Administration for Community Living-Administration on Aging, Department for Aging and Independent Living, Area Agency on Aging, any local provider network.



Instructions: To update numbers-right click and choose Edit Data in Excel



The category of Other includes foundation grants/contracts, corporate grants/contracts, direct mail fundraising, fundraising events, fees for services, etc.

Overview: Please provide a short narrative or introduction which includes basic information about the agency and the area it serves.

The Lincoln Trail Area on Aging and Independent Living is located in Elizabethtown which is a central location for the eight-county area that is served. Lincoln Trail is located in North Central Ky. The concept of the Area Development Districts (ADDs) originated in Kentucky in the early 1960's with the establishment of the Area Development Councils. These Councils were organized in all counties and ultimately became the model for Area Development authorization in landmark federal acts such as the Appalachian Regional Development Act and Public Works and Economic Development Act of 1965. The fifteen Area Development Districts were formed during the period that followed from 1966-

Also include:

1. The relationship between the AAAIL and external contracts and the service enhancement provided.

LTAAAIL contracts with several companies to provide the services that assist our residents in

remaining in the community. Contractors include Central Ky. Community Action Council (CKCAC), Lifeline Homecare Inc, Purfoods LLC/Mom's Meals, Catholic Charities and Legal Aid who provide direct services. Services under CKCAC include both transportation and C1 / ESMP meals for congregate dining and grab and go meals during FY 25 but have been phased out in FY 26. Lifeline contracts provide in home services (Homemaking, Personal Care, Respite, Chore and Escort) under the Homecare and in home services (Homemaking, Personal Care and Respite) under the Title III B program. LTAAAIL also contracts with Lifeline to provide Respite under the Title III E program. The Mom's Meals contract provides home delivered meals to clients under the Title III and ESMP funding streams. Catholic Charities provides the services of an Ombudsman within the Lincoln Trail Region to support residents of long term care and assistive living facilities. Catholic Charities is utilized to provide on demand translating for ADRC and case management as they also have the ability to schedule in person translating for home visits or walk ins. We also utilized the DeepL translating app to translate docs for a variety of languages. The LTAAAIL contracts with Legal Aid to provide legal aid services for a variety of needs to residents over 60 in the region.

LTAAAIL also has a number of varied contracts that serve different purposes:

- 1) Valued Relationship Inc (VRI) to provide medical monitoring through a LIFE alert system. This is a small contract as we have minimal clients receiving this service.
- 2) Assisted Dining Solutions LLC to assist with nutrition monitoring, menu review and approval and nutrition education for meal clients. Nutritional educational materials are also provided to Title III E clients.
- 3) Additional contracts include Western KY Refugee Mutual Assistance Society to provide translation services in our region when interpreters are needed. Historically, LTAAAIL has had a contract with Language in Motion Interpreting Service to provide sign language services when needed. This has not been used for some time but LTADD plans to pursue a new contract should this service be needed.
- 4) Second Wind Dreams which has trained one of our team members to provide the Dementia Tour.
- 5) Mainsl' o complete payroll functions for the HCB 2 and MP waiver programs.

Please note that these are the present contracts; however, FY 27 will be a new RFP year and cycle thus some contract relationships may change after the area plan is submitted. If this is the case, LTAAAIL will submit a modification to the Area Plan.

LTAAAIL has a good working relationship with all of our contractors and this allows for us to provide consistent and quality services within our region. This is a service enhancement as we are able to provide more services by being able to contract out some of these core services.

2. The working relationship(s) between other agencies and organizations to better the lives of those served.

LTAAAIL works closely with area partners to better the lives of the Seniors in the Lincoln Trail region. A recent example is the post COVID revamping of the Lincoln Trail Mental Health / Aging and Elder Abuse Coalition. Lincoln Trail staff worked closely with community partners in all counties to identify service providers to attend the meeting, speakers and topics for discussion to assist in

increasing awareness on the above issues and to assure that the appropriate stakeholders are included. Additional working relationships include Western Ky. and Elizabethtown Community College to accept intern students to be able to expand services and to assist with recruitment of qualified staff who have a social work degree. LTAAAIL works closely with Nelson County and Hardin County clinics to assure “at risk” residents receive health care and are educated on additional supportive services within the community. These clinics provide SHIP counseling and education on LTADD services and the KPAP program. LTAAAIL works closely with all the hospital discharge planners and home health care staff in the region to assist with the transition from inpatient to in home services. Nazareth Villages I and II are a subsidized / senior or disabled housing complex where LTAAAIL provides Title III D services and serves as a Board member to assist the residents in maintaining a high quality of community living.

LTAAAIL also works closely with Feeding America, St. Vincent Depaul, and Meals from the Heart to assure that clients are referred appropriately as well as assuring that these providers understand the services provided by LTAAAIL to meet other client needs that are identified by the groups. LTADD also has a relationship with both Child and Adult protective services to assure that we identify clients in abusive or neglectful situations and that we take the appropriate actions to maximize their well being. Dept of Social Insurance is an additional agency as well as the Social Security Administration to assist clients and community members to receive the resources and benefits they deserve. LTADD AAAIL has met several times with our local PACE provider to enable us to assure that clients receive the best quality of care. Having PACE in the region opens slots for other clients to use OAA programs. The goal of LTADD AAAIL is for the client to have individualized care plan that best meets their needs. It is our goal to help the client make informed decisions regarding their living options.

3. Other activities provided by the AAAIL outside of DAIL funding.

- Lincoln Trail is a Spoke Agency for the Pennyryle ADD hub to provide in home services to Veterans in our region. We presently have reached over 40 Veterans in our region.
- Lincoln Trail is a provider of case management services under the HCB 2 program as well as the MP program.
- LTADD coordinates and sponsors Senior Celebration each year during Older Americans Month and reached about 500 Senior and vendors in the LTADD region. The event promotes fellowship and educational topic regarding elder abuse and scams.
- LTADD coordinates the “Stuff a Stocking” program for needy Seniors in our region each year. This program provides food, clothing hygiene items and goodies for needy Seniors in our region. The program continues to grow each year and we saw a great increase in community support this year. Fifty-two gifts were given this year with the goal to expand to 75 next year. Although this program was originally called stuff the stocking, this year recipients received two shopping bags of needed items.
- The LTAAAIL team members support the Alzheimer’s Association. Historically, they are active in the group and join the annual walk to raise funding and awareness of this difficult disease.
- LTADD coordinated the action of CKCAC and our ADRC departments to become trained in the Veteran friendly Senior Center program so we had more staff available who were trained in working with Veterans.

- LTADD now has all staff QPR trained and 10 staff (including some from Senior Centers) are trained in the ASIST program to assist with suicide prevention.
- LTADD attends the Hardin County Chamber of Commerce annual Health and Human Services Expo as well as additional similar events throughout the region. It is our goal to attend these in every county.
- LTADD supports BRADD Mental Health and Aging Conference by having a large number of attendees each year.
- LTADD was awarded a \$4,420 grant from the Ky. Local Coordinating Councils on Elder Abuse to help to revamp the LTADD Mental Health and Elder Abuse Coalition. The funding was utilized to train a staff member as a Virtual Dementia Tour Community Specialist so she can offer this training to team members and members in the community. The remainder of the grant was utilized to purchase outreach materials.
- LTADD is working closely with United Way and 211 to assist with resource information in the community. Successful close out of a request from 211 or a community partner generates a small stipend

Mission: A mission defines the organization, its objectives, and how it will reach these objectives.

The Lincoln Trail Area Agency on Aging has the mission to empower individuals to age with independence and dignity by providing leadership, advocacy, education, and support for a comprehensive coordinated continuum of community care. The mission is to allow our community members to age in the community and to be able to live independently in their home. LTAAAIL provides programs under the OAA, waiver and Veterans Directed Care to provide support and assist team members in fulfilling our mission. LTAAAIL reviews services and looks for new community opportunities to assist us in fulfilling our mission.

Vision: A vision details where the organization aspires to go.

Lincoln Trail has the vision to ensure that caregivers receive assistance and education to assure they can safely keep individuals in the home setting. Values of self-determination, person centered planning and care for the individual govern our decisions. It is also the goal that people can safely age in the community and in the least restrictive environment. LTADD AAAIL exists to provide assistance to the aged and disabled population in our region. LTAAAIL has become more visionary in the attempt to expand services to allow our residents to safely remain in their home. New programs and services are being considered.

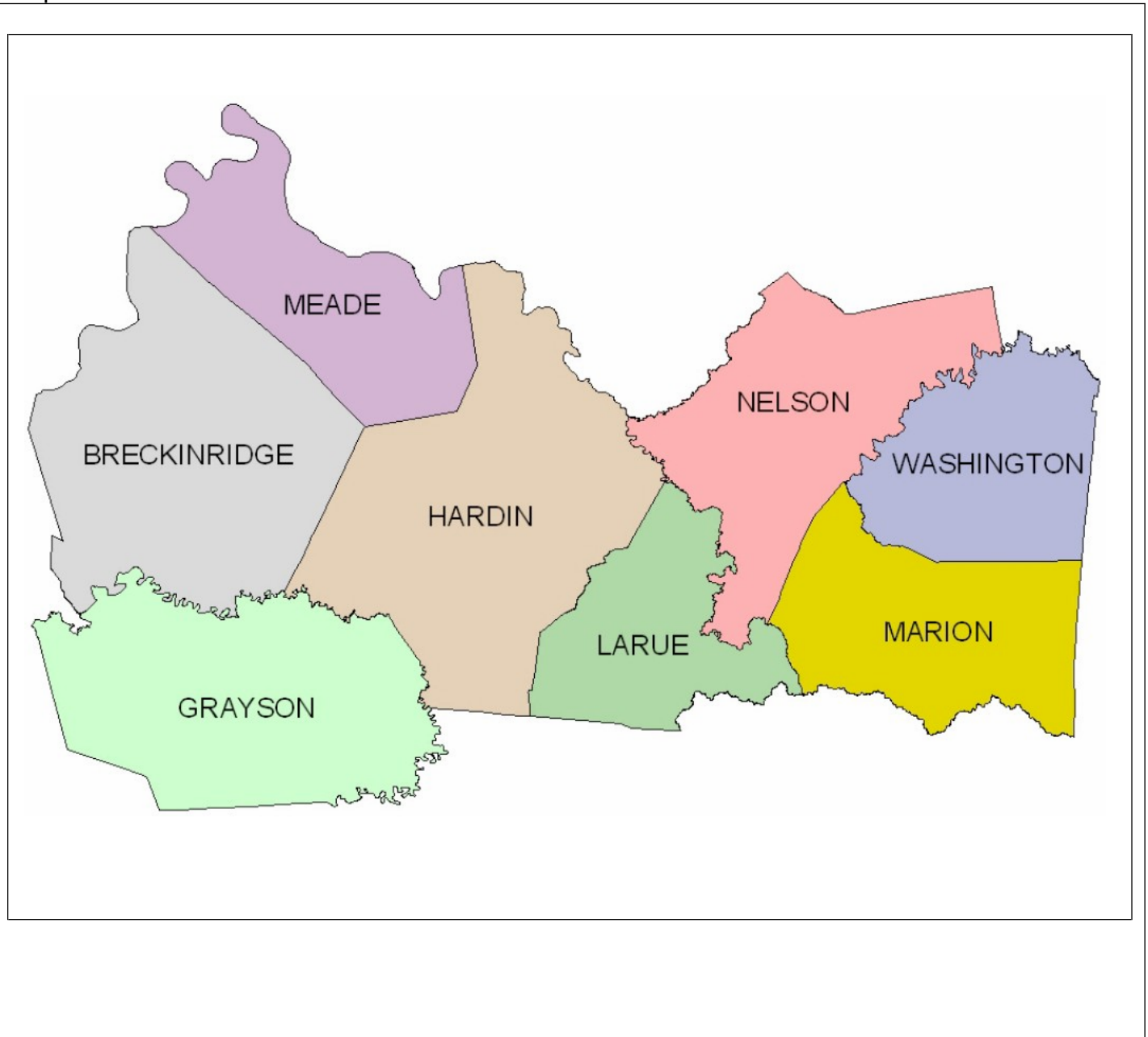
Service Area

Define the geographic boundaries of the service region, ensuring to include the counties you serve and a map of the service region.

Description:

The Lincoln Trail Area Development is made of an eight-county region. These counties include: Breckinridge, Grayson, Hardin, Larue, Marion, Meade, Nelson and Washington County. The region covers 3,345 square miles and is located in the north central part of Kentucky. The Lincoln Trail region is primarily rural.

Map :



Staff Positions and Responsibilities: Include only management staff and include a separate organizational chart.

Position Title	Position Description	Position Responsibilities
Sue Greenwell, Division Director of Community Aging and Social Engagement	Serves as the Aging Director and oversee operations of the LTAAAIL.	Oversight for internal and external programs, staff recruitment and retention, area plan, strategic planning, subcontractor monitoring, compliance with regulations and new program initiatives.
Brad Newton, Ops Director for Division of Community Aging and Social Engagement	Serves as Assistant Aging Director and assists with overseeing operations of the LTAAAIL	Assistance with oversight and operations. Responsible for contracts, budgets, invoices, departmental finances, OAAPS, and departmental operations within regulations.
Tabitha French, Director of Older American Act Programs.	Leadership for programs under the Older Americans Act.	Supervision of in home services including ADRC, HC, Title III B, SHIP, KY CG and Family CG. Also responsible for recruitment, retention and Adm for Mon Ami,
Kendra Saltsman, Director of Quality Assurance	Assures that quality, accurate services are provided by LTAAAIL staff and contractors.	Monitoring internal and external services. Satisfaction surveys for all programs. Identifying educational needs of staff. SV of outreach events. Senior Celebration. Oversight of Mental Health Elder Abuse and Aging Coalition. Title III D, Senior Centers and Ombudsman oversight.
Phoebe Tharp Triston Dutschke Kayla Douthitt (.6) Case Managers	Case Management responsibilities for clients in the HC, Title III B for in home services and Title III C and ESMP home delivered meals.	Completion of Assessments, Reassessments, case management, home visits and monthly contacts as required. This includes education on additional resources and services in the community.
Jennifer Johnson, ADRC Coordinator	Coordinates operations for ADRC.	Intake phone calls, level one screenings, manages the wait list, completes waiver applications. Education on resources in the region. Phone contacts with clients. Misc, operational activities as needed.
Kayla Douthitt (.4)	Works with ADRC Coordinator	Intake and client phone calls,

Caitlin Lane (.2) ADRC Specialists	to staff the ADRC phone line.	level one screenings and waiver applications. Education on resources to callers. Works on the waitlist as assigned.
Marlessa Stark, Quality Assurance Specialist	Works with Dir. of Quality assurance to complete internal and external compliance.	Monitoring and Chart Audits, Title III D sessions, back up for CM and Coordination of MH, Aging and Elder Abuse Coalition.
Krystal Wilkerson, VA and SHIP Coordinator	Coordinates SHIP activities for LTADD. Coordinates the VDC program.	Runs plan finders, community events, education on MC and part D options, seeks volunteer counselors. Outreach. Assessment, case management and employee and TS approval process for VDC.
Melissa Jones, Family Caregiver Coordinator	Coordination responsibility for Ky CG and National CG program.	Assessments, reassessments, case management, monthly contacts, GP applications, shopping trips, outreach, attends support group and educates on CG options.

III. Profile of Service Area

Complete a demographic profile of your region with information provided from data collected and utilizing the [University of Louisville's State Data Center](#). To determine poverty rates please use this link: [poverty rates](#).

Description	Year of Data	Population	Percentage
60+ in the service area	2023	65,677	23.3%
60+ with low income (see link above)	2023	8,479	12.9%
60+ living in rural area(s)	2023	40,790	61.9%
60+ minority	2023	6,638	10.1%
60+ low-income minority	2023	1,348	2.0%
60+ with limited English proficiency	2023	98	0.1%
Grandparents/older relative raising child under 18	2023	3,285	1.9%
60+ isolated or living alone	2023	17,121	26.0%
60+ requiring 3 or more ADL/IADL*	2023	24,739	37.6%

*ADL: feeding, getting in/out of bed, dressing, bathing, toileting.

*IADL: Meal preparation, light housework, heavy housework, laundry, shopping, taking medicine

Describe all credible sources used to determine the populations/percentages above.

ACS2019-2023 PUMS Data

Information was obtained by emailing the above website.

IV. Funding Sources

List out all funding sources used to support older Kentuckians in the area. Please add additional lines and funding source types as necessary (Federal, State, Local Cash, In-kind, etc.). Previous state fiscal year should be used.

	Funding Source	Amount of funding	Funding Period	Type of funding
A	Title III B	\$384,746.56 \$145,304.00 \$124,231.22 \$77,246.24	FY 25	Federal State ARPA Local Cash
B	Title III B-Ombudsman	\$51,345.70	FY 25	Federal
C	Title III C1	\$624,881.66 \$34,959.00 \$171,545.99 \$146,663.61	FY 25	Federal State ARPA Local Cash
D	Title III C2	\$733,676.85 \$19,848.00 \$108,860.04	FY 25	Federal State Local Cash
E	Title III D	\$28,993.19 \$26,122.87	FY 25	Federal ARPA
F	Title III E	\$285,776.94 \$65,516.00 \$18,351.94 \$76,783.98	FY 25	Federal State ARPA Local Cash
G	Homecare	\$1,023,457.00 \$65,161.96	FY 25	State Local Cash
H	KY Caregiver	\$122,627.28	FY 25	State
I	Waiver Funding to support Aging	\$1,561,070.78	FY 25	State
J	Title VII Ombudsman support	\$26,704.00 \$4,713.00	FY 25	Federal State
K	ESMP	\$671,290.85 \$78,861.63	FY 25	State Local Cash
L	KY LTC Ombudsman	\$83,479.47	FY 25	State
M	MIPPA AAA	\$10,910.26	FY 25	Federal
N	MIPPA ADRC	\$9,826.27	FY 25	Federal
O	MIPPA SHIP	\$19,042.05	FY 25	Federal
P	ADRC	\$17,875.00 \$17,875.00	FY 25	Federal State
Q	CMS SHIP	\$32,364	FY 25	Federal
R	NSIP	\$89,297.65	FY 25	Federal
S	Title VII Elder Abuse	\$4,946.36 \$900.00	FY 25	Federal State
T	INNU	\$5,657.49	FY 25	Federal
U	Veterans Directed Care	\$8,663.76	FY 25	Local Funds
V	Disaster Preparedness	\$4451.00	FY25	Federal

V. Current Service Coverage Charts

List out all services provided and the respective funding sources to support older Kentuckians in the area. Previous state fiscal year should be used.

Supportive Services – Access Services					
Service	Offered	AAAIL service provider	Contracted service provider	Number of individuals served (previous SFY)	Funding source (use letter from funding source table above)
Assessment	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	512	A,G,K
Transportation: Congregate	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	376	A
Transportation: Community	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	376	A
Transportation: Escort	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	22	G
Homecare: Personal Care	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	88	A,G
Homecare: Homemaker	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	254	A,G
Homecare: Chore	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	30	G
Homecare: Minor Home Repair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	18	A
Information and Assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Legal Assistance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	173	A

Nutrition Services					
Service	Offered	AAAIL service provider	Contracted service provider	Number of individuals served (previous SFY)	Funding source (use letter from funding source table above)
Congregate Nutrition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1116	C
Grab and Go	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1211	D,K
Home Delivered Nutrition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1020	D
Nutrition Education	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1723	C,D,K
Nutrition Counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Health Promotion Services					
Service	Offered	AAAIL service provider	Contracted service provider	Number of individuals served (previous SFY)	Funding source (use letter from funding source table above)
Evidence Based Programs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	535	E
Non-Evidence Based Programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Caregiver for Older Adults					
Service	Offered	AAAIL service provider	Contracted service provider	Number of individuals served (previous SFY)	Funding source (use letter from funding source table above)
Assessment	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	9	F
Information and Assistance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	21	F
Counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Respite (in home)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	20	F
Respite (out of home day)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Respite (out of home night)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Respite (other)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Case Management	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	21	F
Support Groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Supplemental Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Older Relative Caregivers					
Service	Offered	AAAIL service provider	Contracted service provider	Number of individuals served (previous SFY)	Funding source (use letter from funding source table above)
Assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Information and Assistance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	18	F
Counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Respite (in home)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Respite (out of home day)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Respite (out of home night)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Respite (other)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Case Management	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3	F
Support Groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Supplemental Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	20	F

Other Services					
Service	Offered	AAAIL service provider	Contracted service provider	Number of individuals served (previous SFY)	Funding source (use letter from funding source table above)
Advocacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Senior Center Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Mental Health Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Dementia Care Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Housing or Shelter Assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
SHIP	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	1077	M,N,O,Q
Elder Abuse Prevention	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	500+	S
Telephone Reassurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Ombudsman Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2124	B,J,L
Friendly Visitors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
SCSEP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Recreation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

For additional programs please fill in under the "Service" heading

VI. Quality Assurance Process

The quality assurance process of service programs allows the AAAIL to highlight areas for continuous improvement by assessing program implementation and data collection. This will be obtained by the following measures:

- Needs Assessment
- Goals, Objectives, and Performance Measures

Needs Assessment: Describe all formats and sources used to evaluate the needs of the current AAAIL clients and those within the service area that are not currently receiving services for which they may be eligible. (include visual aid(s), survey results, etc.)

LTADD utilizes several methods to obtain information on our needs assessment to enable us to identify needs in our region. Links and hard copies of the needs assessment tool is sent to clients and attendees at the Senior Centers. Links to the survey are sent to team members, contractors, and stake holders that work with the elderly and disabled members in the region. Needs assessment tools are also provided to attendees of the Senior Celebration that successfully draws attendees from all of our eight counties. This allows for us to obtain a larger survey pool.

Responses to the survey are considered as well as the comments on the survey. Consideration is given to people on the wait list for services as it is instrumental to know what services are needed and how many participants are waiting. This enables us to have a more comprehensive understanding of community needs. The survey cannot stand alone as there is no guarantee that the survey reached those most in need or if those answering the survey understood the needs in the community. LTADD had responses from all eight of our counties and the numbers of responses was indicative of the population of that county.

Based on the needs assessment results above rank the service area's top three needs and how they are being addressed in this area plan.

Rank	Need	Expectation
1.	Nutrition / Hunger Insecurity	LTADD is providing both congregate and home delivered meals to clients in the region. Presently there is no wait list for congregate meals and at time of writing the area plan there was not a wait list for HDM's. LTADD makes every effort to limit the number of clients on the WL for HDM's. Clients are taken off the WL based on priority score and clients are added monthly if funding allows.
2.	In Home Services: HM, PC, Respite, Escort, Chore	LTADD expects to be able to provide as much of these services as funding allows. These services are critical to allow Seniors to remain in the community for longer periods of time in hopes of reducing the need to be moved to a higher level of care. In home services allow for Seniors to age in their homes and communities. There is presently a wait list for all of these services.
3.	Support for Caregivers	LTADD needs assessment identified a large number of clients who were caregivers in our region. Both caregivers to someone requiring care due to age and or disability as well as caring for a

		grandchild. Caregiver support is also a nationally identifies need.
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Gaps, Barriers, Needs to improve service delivery:

Describe gaps, barriers, and needs for the current aging programs and clients
<p>There are gaps and needs in the LTADD region due to limits in funding levels. The biggest gap includes limits on the ability to provide transportation to our region. Public transportation is very limited and LTADD does not have sufficient funding to support the need for transportation for assistance with shopping and other errands or to cover all of the need for MD appointments. Nineteen percent of those being released from the hospital report needing assistance with getting to MD appointment. Thirty one percent of respondents report needing assistance with transportation now or in the future.</p> <p>Another gap is funding for social isolation remedies including wellness activities under the Title IIID funding stream. These programs help with disease prevention and health promotion and also help to reduce social isolation. Thirty percent of our Seniors in the LTADD region reported experiencing loneliness.</p>

Describe how the needs assessment and population data determine the future direction of the Area Plan and the aging program(s)
<p>The needs assessment and population data determine the future direction of the region in that it is evident that the population in our area is aging. The key needs continue to be nutrition, in home services and support for caregivers. The needs assessment determined that these services continue to be our priority. It was determined that 12% of respondents have difficulty preparing meals and or do not have enough money to pay for food. Twenty-six percent of respondents utilize a food pantry to supplement for food while four percent do not eat because they do not have enough money for food and six percent ate smaller meals because there wasn't enough money for food. Thirty-six percent of respondents were afraid of not having enough money for food, shelter or clothing now or in the future. For respondents being released from the hospital 35% of respondents reported that they needed or might need help with obtaining food. When considering Senior Centers, 26% reporting either attending or will need to attend in the future. Twenty-three percent of respondents use or plan to use in home services while 29% of respondents report needing assistance with shopping and meal prep. And 17% of respondents reported that they were caregivers with 20% of those needing help had the diagnosis of dementia or Alzheimer's Disease.</p> <p>The above data helps to show that our priority needs in the LTADD region are for nutrition, in home services and caregiver services.</p> <p>The needs assessment also identified continued needs for growth in transportation as being needed but underfunded and that many Seniors are identifying either presently or in the future that Social Isolation is a concern. These are areas that LTADD needs to pursue and locate additional funding streams as possible.</p>

VII. Goals, Objectives, Performance Measures, and Strategies

Every goal should be written utilizing the SMARTIE (Specific, Measurable, Attainable, Relevant, Time-based, Inclusive, and Equitable) objective with key performance indicators.

State Goal 1	Increase access to public transportation services for seniors aged 60+ and individuals with disabilities in rural communities.
Objective 1.1	By January 1, 2027, DAIL will establish and conduct quarterly partnership meetings with the Kentucky Transportation Cabinet Office of Transportation Delivery (KYTC OTD) to expand collaboration with the Human Services Transportation Delivery Program, ensuring the perspectives of rural seniors and individuals with disabilities are represented.
Outcome/Performance Measures	
<ol style="list-style-type: none"> 1. Strengthen collaboration between DAIL and KYTC OTD leading to expanded Human Services Transportation Delivery Program (HTTP) partnerships with four meetings per year beginning January 1, 2027. 2. Increased alignment of state-level efforts to improve transportation access for seniors and individuals with disabilities in rural communities with two new collaborative activities per year. 3. Inclusion of senior and disability advocates results in more equitable transportation planning by adding four advocates who are a senior or an individual with disabilities. 	
Strategies and Actions	
<ol style="list-style-type: none"> 1. Strengthen interagency coordination through structured quarterly meetings. 2. Engage state-level stakeholders to improve transportation accessibility. 3. Ensure representation from seniors and individuals with disabilities in transportation planning discussions. 4. Develop a standard meeting agenda including updates, collaboration opportunities, and transportation barriers identified by rural populations. 5. Invite representatives from DAIL, KYTC OTD, AAAIL, ADRCs, disability advocacy groups, and rural transportation providers 	
Objective 1.2	By August 1, 2027, each Area Agency on Aging and Independent Living (AAAIL) will develop and distribute a county-specific transportation resource guide based on the Kentucky Transportation Cabinet's 2022–2045 Long-Range Statewide Transportation Plan, ensuring seniors and individuals with disabilities in every rural county have access to clear, accessible information about available public service transportation providers.
Outcome/Performance Measures	
<ol style="list-style-type: none"> 1. Seniors and individuals with disabilities in all rural counties have access to comprehensive, easy-to-read information about transportation options by August 1, 2027. 2. Increased awareness and utilization of available transportation services by providing county specific guides to each senior center in the region. 3. Reduced information gaps and barriers faced by rural residents who lack internet or transportation knowledge by providing each program participant access to the guide by August 1, 2027. 4. Upload digital versions to AAAIL and DAIL websites by October 1, 2027. 5. Conduct short feedback surveys to assess readability and usefulness by June 30, 2028. 	

Strategies and Actions	
<ol style="list-style-type: none"> 1. Create a standardized guide template (plain language, large print, and ADA-accessible digital format). 2. AAAILs collect county-specific details: provider names, service areas, eligibility rules, scheduling procedures, costs, and accessibility features which should include the caregiver can ride for free. 3. Use state transportation data to populate accurate, up-to-date provider listings. 4. Review the Kentucky 2022–2045 Long-Range Statewide Transportation Plan to identify active service providers in each county. 5. Collaborate with community partners to develop locally relevant, county-level guidance. 6. Finalize guides by May 1, 2027. 7. Distribute guides to senior centers, ADRCs, libraries, senior housing complexes, and disability service organizations. 	
Objective 1.3	By January 1, 2028, DAIL, ADRC, and local Aging staff will collaborate with existing rural transportation providers identified in the Kentucky 2022–2045 Long-Range Statewide Transportation Plan to create a strategic plan that increases bus/shuttle frequency and/or introduces alternative modes of transportation (rideshare, volunteer driver programs).
Outcome/Performance Measures	
<ol style="list-style-type: none"> 1. Increased ridership options among seniors and individuals with disabilities due to improved accessibility and service offerings will increase 10% from the baseline established in the 2022–2045 Long-Range Statewide Transportation Plan stakeholder surveys. 2. Establish at least 1 new transportation service option service in each planning service area by June 30, 2028. 	
Strategies and Actions	
<ol style="list-style-type: none"> 1. Identify rural transportation providers operating in the counties flagged in the 2022–2045 Statewide Plan. 2. Hold joint planning sessions to map service gaps, bus/shuttle frequency issues, and potential alternative transportation models. 3. Develop a written strategic plan that includes pilot opportunities, cost estimates, resource needs, and target populations. 4. Coordinate with volunteer driver programs, nonprofits, and rideshare companies (where feasible) to explore alternative mobility options. 	

K4A Goal 2	Launch statewide outreach awareness campaign for older adults and caregivers to expand awareness of the Aging program services and increase Aging program calls and referrals by 5% each fiscal year within the area plan (FY 27, 28, & 29) totaling 15% by the end of June 30, 2029.
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Goal 2 Objective 2.1	Create a unified statewide media packet for each district to use by December 31, 2026.
Outcome/Performance Measures	
Each ADD district will use the statewide database, Mon Ami, to track the number of calls and referrals on a monthly basis	
Strategies and Actions	
<ol style="list-style-type: none"> 1. Each ADD district distributes information flyers on Aging Program services from the 	

media packet to all district senior centers, libraries, community centers, at community meetings, health departments, churches, doctor offices, and schools per quarter each fiscal year starting in January 2027.	
2. Post information flyers on social media and in newspapers and radio on Aging Program services per quarter each fiscal starting in January 2027.	
Goal 2 Objective 2.2	Utilize the ADRC program to help in tracking the process on the outreach awareness campaign.
Outcome/Performance Measures	
Each District's ADRC will be able to utilize Mon Ami data to show the impact of the outreach awareness campaign during the referral process and by tracking the number of calls and referrals monthly.	
Strategies and Actions	
1. Develop and add a question to the ADRC intake referral process to capture how the public is hearing about the ADD District's Aging Program by December 31, 2026.	
2. Customize a data report in Mon Ami database to track this information by December 31, 2026.	
Goal 2 Objective 2.3	Each ADD District will increase their presence in the district's community by calibrating often with current and new potential community providers.
Outcome/Performance Measures	
These activities will be tracked in Mon Ami database system by a Mon Ami customized report beginning on January 4, 2027.	
Strategies and Actions	
ADRC and Aging staff will focus on increasing 5 % in attendance at activities for community events with current and new potential community partners each fiscal year.	

K4A Goal 3	Increase volunteer involvement and new enrollment in each ADD district focusing on the Ombudsman, SHIP, and senior centers programs by 5% each fiscal year within the area plan (FY 27, 28, & 29) totaling 15% by the end of June 30, 2029.
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Goal 3 Objective 3.1	Launch a unified strategy statewide to attract new volunteers for the Ombudsman, SHIP, and senior center programs through outreach and marketing efforts by December 31, 2026.
Outcome/Performance Measures	
These activities will be tracked by Mon Ami database system and STARS program each quarter to focus on the impact of volunteer involvement and increase in hours volunteered starting on January 4, 2027	
Strategies and Actions	
Host a recruiting event in-person and by zoom 1x a quarter in the Ombudsman, SHIP, and/or senior center programs for each fiscal year in each ADD district starting on January 4, 2027	
Goal 3 Objective 3.2	Utilize district senior centers, libraries, community centers, community meetings, health clinics, health departments, churches, doctor offices, and schools per quarter each fiscal year starting in January 2027 to promote to increase volunteer hours worked and track new volunteer enrollment
Outcome/Performance Measures	
These activities will be tracked by Mon Ami database system and STARS program each quarter to track the attendance / or volunteer enrollment / activities.	
Strategies and Actions	

Ombudsman, volunteer, center staff, or other Aging staff will schedule and conduct an education session 1x per quarter on the benefits of volunteering in communities at district senior centers, libraries, community centers, community meetings, health departments, churches, doctor offices, and schools per quarter beginning in January 2027.	
Goal 3 Objective 3.3	Increase volunteer participation with current and new volunteers with appreciation and training strategies.
Outcome/Performance Measures	
These activities will be tracked by Mon Ami database system and STARS program each quarter to track the number of hours of training and volunteer activities starting January 4, 2027.	
Strategies and Actions	
<ol style="list-style-type: none"> 1. Feature a volunteer of each quarter in your newsletter, social media, newspaper, and/or radio to spotlight the programs, volunteer's story, what they do, and why they are valued starting January 4, 2027. 2. Invest in more training opportunities for volunteers to enhance effectiveness, efficiency, and appreciation by hosting training each quarter and yearly in service training and appreciation events for the SHIP, Ombudsman, and/or senior center program beginning in January 2027. 	

AAAIL Goal 4	Over the next three years, LTAAAIL will train at least 50 or more adults in our region to use video calling, messaging apps, shopping apps and on-line community platforms, achieving at least 80% of participants demonstrating basic use.
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Goal 4 Objective 4.1	Train seniors to be able to use on line platforms such as Walmart, Kroger or SAMs to increase their independence and ability to function in a technological world with the result to decrease hunger insecurity.
Outcome/Performance Measures	
Quality Department will keep a data base of Seniors achieving this goal. It will be reported to the Director quarterly. Annual Goal of 5 – 10 Seniors trained in hunger related issues each year.	
Strategies and Actions	
<ol style="list-style-type: none"> 1) Identify staff willing and have the skill set to teach Seniors to how to order food from Walmart, Kroger, Sams or door dash. 2) Identify Seniors who need to order food or are experiencing hunger insecurity and do not have funds to purchase transportation to grocery shopping. 3) Utilize Quality Department to track Seniors receiving this education and if they are now independent with the activity. 4) Develop pre and post test and survey to assess if training objectives have been reached. 	
Goal 4 Objective 4.2	Train seniors to be able to use on line platforms such Uber or Lift to increase their independence and ability to function in a technological world with the result to increase their access to transportation
Outcome/Performance Measures	
Quality Department will keep a data base of Seniors achieving this goal. It will be reported to the Director quarterly. Annual Goal of 5 – 10 Seniors trained to be able to utilize on line platforms independently to assist with transportation shortages within the region.	
Strategies and Actions	
<ol style="list-style-type: none"> 1) Identify staff willing and have the skill set to teach Seniors to access transportation on line either through grocery or door dash. 	

2) Identify Seniors who need transportation assistance. 3) Utilize Quality Department to track Seniors receiving this education and if they are now independent with the activity. 4) Develop pre and post test and survey to assess if training objectives have been reached.	
Goal 4 Objective 4.3	Train Seniors who are socially isolated to use social media and join on line support groups and or interactive platforms or to just be more involved in groups to increase education and sense of well being while reducing Social Isolation.
Outcome/Performance Measures	
Quality Department will keep a data base of Seniors achieving this goal. It will be reported to the Director quarterly. Annual Goal of 5 – 10 Seniors trained and actively utilizing support groups and other sites to reduce social isolation.	
Strategies and Actions	
1) Identify staff willing and have the skill set to teach Seniors to access support groups or educational groups or support sites as needed. 2) Identify Seniors including care givers who are experiencing social isolation and need for care interventions. 3) Utilize Quality Department to track Seniors receiving this education and if they are now independent with the activity and if it is assisting with social isolation. 4) Develop pre and post test and survey to assess if training objectives have been reached.	

AAAIL Goal 5	Increase LTADD AAAIL activities to prevent abuse, neglect and exploitation of Seniors and persons with disabilities by increasing activities that promote education of staff and the community as well as increased awareness of Seniors.
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Goal 5 Objective 5.1	Increase team member education and awareness of abuse, neglect and exploitation to include ability to identify abuse and supportive services available. This will allow LTADD to have a more impactful roll in prevention of abuse.
Outcome/Performance Measures	
LTADD will have an increased focus on abuse issues which will be measured by increased training hours of one per year, increased participation of MH and Aging Coalition of 20% per year and having at least one certified Ombudsman in the department. All of this will be tracked by the quality department.	
Strategies and Actions	
1. Increase education hours of team members regarding abuse, neglect and exploitation and related fields such as mental health issues as clients with MH issues are at increased risk of abuse / neglect including self neglect. Training will increase each year of the area plan by one hour per year to a total of four hours by FY 29. This will include training provided at Senior Celebration. 2. Team members will increase participation with MH, Aging and Elder Abuse Coalition by attending 80% of sessions by end of the FY 29. Participation will increase to 40% in year 27, 60% by year 28 and 80% year 29. 3. Train at least one team member to officially be an Ombudsman by the end of FY 28 to increase knowledge of Ombudsman services and thus increase Ombudsman activities in the LTADD area. 4. LTADD AAAIL will continue to have representation on the state Elder Abuse Coalition.	

Goal 5 Objective 5.2	Increase Community awareness of abuse, neglect and exploitation of seniors and persons with disabilities.
Outcome/Performance Measures	
Increased community awareness of abuse related topics which will be tracked by increased posts to social media, increased attendance to Coalition meetings and increased education of first responders. LTADD staff will contact 33% of the available First Responder Agencies by year 1, 66% for year 2 and 100% at year 3. This can be tracked by quality department for compliance.	
Strategies and Actions	
<ol style="list-style-type: none"> 1. Provide at least two social media posts regarding abuse, neglect and exploitation or related fields each FY. 2. Post on social media information regarding the MH, Aging and Elder Abuse coalition to assure community members are aware of meetings and topics of discussion. 3. Increase community partner involvement with the MH and Aging Coalition to maintain an active and robust coalition. This would include meeting with every county EMS, Police / Sheriff and Fire Department regarding services in the region and concerns about abuse issues. At least eight of these visits will be provided each FY. 	
Goal 5 Objective 5.3	Increase Senior understanding of abuse, neglect and exploitation and resources available to provide support by providing additional information.
Outcome/Performance Measures	
100% of Seniors receiving in home, congregate and HDM services and Seniors attending Senior Celebration will receive education on abuse related topics.	
Strategies and Actions	
<ol style="list-style-type: none"> 1 Assure that at least one speaker and one hand out provided at Senior Celebration that addresses elder abuse topics. 2. Continue to have Ombudsman speaker at Senior Celebration address abuse topics. 3. Annually provide informational materials to clients regarding various topics related to abuse, neglect and exploitation. This would include in home services clients as well as home delivered and congregate meal clients. 	

VIII. Verification of Intent

The Verification of Intent acknowledges and dates that the authoritative parties have all reviewed and approve the AAAIL Area Plan for State Fiscal Years 2027-2029.

The Area Agency on Aging is hereby submitted for the Lincoln Trail Area Agency on Aging. That includes the following counties, Breckinridge, Grayson, Hardin, Larue, Marion, Meade, Nelson, and Washington for the period FY 2027-2029. It includes all assurances and plans to be followed by the Lincoln Trail Area Agency on Aging under provisions of the Older Americans Act, as amended during the period identified. The Area Agency on Aging identified will assume the full authority to develop and administer the Area Plan on Aging in accordance with all requirements of the OAA and related State policy. In accepting this authority, the Area Agency on Aging and Independent Living assumes major responsibility to develop and administer the Area Plan for the comprehensive and coordinated system of services and to serve as the advocate and focal point for older adults in the service area.

The Area Plan of Aging has been developed in accordance with all rules and regulations specified under the OAA and is hereby submitted to the State Unit on Aging (DAIL) for approval.

ADD Executive Director Name
ADD Executive Director

Date

AAAIL Director Name
AAAIL Director

Date

Advisory Council Chairperson Name
Area Agency Advisory Council Chairperson

Date

ADD Board Chairperson Name
ADD Board Chairperson

Date

Attachment A

Contracts with Outside Organizations

List of all contracts with other organizations.

Important Note: All contractual relationships with an organization requires DAIL prior approval not less than thirty (30) days prior to signing of contract by the area agency and service provider.

Contract Organizations					
Name	Services provided (list all)	Units of services provided	Cost/Unit of Service	For profi t	Non- Profi t

Central Ky. Community Action (CKCAC) – C1	Congregate and Grab and Go Meals	67135	\$13.42	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Central Ky. Community Action (CKCAC) - ESMP	Congregate and Grab and Go Meals	16782	\$13.42	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Central Ky. Community Action (CKCAC)	Transportation	20384	\$8.56	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Legal Aid	Legal Services	306	\$60.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Lifeline – HC	HM, PC, Respite, Chore, Escort	11821	\$42.64	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lifeline – Title III B	HM, PC, Respite	6896	\$43.66	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lifeline – Title III E	Respite	5723	\$49.50	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Catholic Charities	Ombudsman Program	12	\$11,286.98 mo.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Mom's Meals – C2	Home Delivered Meals	69978	\$8.35	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mom's Meals - ESMP	Home Delivered Meals	32529	\$8.35	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Second Wind Dreams	Training on Virtual Dementia Tour	1	\$2157	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Valued Relations (VRI)	Life Alert units	176	\$30.00 Avg	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Western KY Refugee Mutual Assistance Society, INC.	Translation Services	0	\$60.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Assisted Dining Solutions	Dietetic Services	156	\$50.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

Attachment B

Waiver & Special Request Approvals

DIRECT SERVICE WAIVER REQUEST FOR THE PERIOD OF THE PLAN

Instructions: In accordance with Section 316 of the Older Americans Act (Chapter 35, 42 U.S.C. 3030c-3) Area Agencies on Aging will submit all the required items listed below to the Department for Aging and Independent Living when initially requesting to provide a service directly. Contact the appropriate Programs Field Representative for more information.

Statement of Request

Provide a separate request for each service (add additional tables as necessary)

Service	
Actions taken prior to determination of direct service provision	LTADD will be undergoing the RFP process for FY 27-29 this spring. It is unknown if a waiver request will be needed at this time. An Area Plan modification will be completed if needed, once providers for this time frame are established.
Name(s) of potential providers contacted and their responses	
Name(s) of newspapers and/or publications and documentation of the announcement of the availability of funds	
Scope of work	

Service	
Actions taken prior to determination of direct service provision	
Name(s) of potential providers contacted and their responses	
Name(s) of newspapers and/or publications and documentation of the announcement of the	

availability of funds	
Scope of work	

Attachment C

Area Advisory Council

This Council, mandated by the federal 1965 OAA and 910 KAR 1:220 (5), advises the AAAIL on all community policies, programs, and actions affecting older persons throughout the region. The Council also reviews and advises the AAAIL on its annual Area Plan, a report, and the needs assessment of services and assistance throughout the region required by DAIL.

At least half of the Council is composed of regional residents 60 years and older, including minority individuals, who participate in or are eligible for OAA Title III programs such as general support services, nutrition programs, and caregiver support. The remaining Council membership includes representatives of healthcare and support service providers, local officials, and other interested individuals.

Area Agency Advisory Council:

Council Member Name	Council role per 910 KAR 1:220 (5)(1)(b)	Term
Janet Hobbs (1) (6) (5)	Chair- Meade Co.	2017- June 2027
Judy Cederholm (6) (5)	Vice Chair- Nelson Co.	2014- June 2026
Mona Fulkerson (6)	Secretary- Grayson Co.	2021- June 2027
Ted Brown (6) (5)	Member- Breckinridge Co.	1994- June 2026
Maurice Lucas (6) (5)	Judge Executive- Breckinridge Co.	2011- On-going
Vivian Decker (6)	Member- Grayson Co.	2022- June 2028
Barbara Edwards (6) (5)	Member- Hardin Co.	2013- June 2026
Nancy Shores (6)	Member- Hardin Co.	2023- June 2026
Doris Jean Holleran (6)	Member- Larue Co.	2021- June 2027
Blake Durrett (5)	Judge Executive- Larue Co.	2020- On-going
John Mattingly (6)	Member-Marion Co.	2015- June 2026
Trina Sandusky (6) (5) (3)	Member- Marion Co.	2022- June 2028
Troy Kok (5)	Judge Executive- Meade Co.	2023- On-going
Daisy Coleman(6) (5)	Member- Meade Co.	1991- June 2026
Vicki Ward (5) (6)	Member- Nelson Co	2021- June 2027
Vickie Zaborowski (3)	Veterans Administration	
Dorothy Logsdon (6)	Member- Washington Co.	2009- June 2026
#1 Indicates chairperson		
#2 Indicates minority member eligible for or participating in AOA programs		
#3 Indicates representative of health care provider organizations (including veteran's healthcare if appropriate.)		
#4 Indicates representative of supportive services provider organizations		
#5 Indicates representative of private and voluntary sectors with leadership experience		
#6 Indicates a representative of older person		

Attachment D

Public Hearing: The AAAIL must seek public input with respect to the area plan by:

- Allowing the advisory council to aid the AAAIL in conducting public hearings to ensure that individuals of the greatest social and greatest economic need are included in the hearings.
- The advisory council shall review and provide comments related to the area plan to the area agency prior to the area agency's submission of the plan to the State agency for approval.

Date Area Plan available for review	Place available for review
1/12/26	On website, FB link to area plan, Senior Centers, LTADD office

Public Hearing		
Date/Time	Location/Method	Number of participants
2/18/25	LTADD Office Site of Public Hearing	
Week of 2/2 and 2/9	Advertised in local paper, listed on website and placed on Social Media.	

Attachment E

Submission Instructions

1. Area Plan Important Dates:

Area Plan form released by DAIL	September 25, 2025
Area Plan Training Session 1	September 25, 2025
Area Plan Training Session 2	October 14, 2025
DAIL Office Hours	November 3, 2025. 11 am EST
DAIL Office Hours	November 12, 2025. 2 pm EST
DAIL Office Hours	December 11, 2025 2 pm EST
Area Plan Submission Date	February 1, 2026
Area Plan Presentation	February 25 and 26, 2026
Approval of Area Plans	May 1, 2026
Area Plans effective	July 1, 2026

2. Formatting Requirements

The Area Plan document will be required to include all required fields in the template

Include a footer listing the name of the Name of AAAIL/Region, Document year of plan
For example: *Department for Aging and Independent Living-Area Plan_2027-2029*

You are encouraged to use pictures to help enhance the impact of your services when appropriate.

3. Electronic Submission

Area Plans must be submitted electronically to the Department for Aging and Independent Living email at DAILAging@ky.gov by **February 1**.

Signature forms must include a written signature and be submitted as an additional document along with the completed Area Plan.

The electronic submission should include the following documents:

- Completed Area Plan Document
- Signature Forms with written signature
- Other forms and charts as required

4. Presentation

A virtual presentation of your Area Plan will be required as part of the approval process.

Presentations should be 30 minutes and allow an additional 15 minutes for questions.

Presentations will take place at a time and location to be determined.

Plans will not be approved without a virtual presentation.

Attachment F

STANDARD ASSURANCES - OLDER AMERICANS ACT (OAA) Public Law 89-73, 42 U.S.C.A. § 3001, et seq., as amended

I) ORGANIZATIONAL ASSURANCES

1. SEPARATE ORGANIZATIONAL UNIT

If the Area Agency on Aging has responsibilities which go beyond programs for the elderly, a separate organizational unit within the agency has been created which functions only for the purposes of serving as the Area Agency on Aging.

2. FULL TIME DIRECTOR

The Area Agency or the separate organizational unit which functions only for the purposes of serving as the Area Agency on Aging is headed by an individual qualified by education or experience, working full-time solely on Area Agency on Aging functions and Area Plan management.

II) AREA AGENCY MANAGEMENT COMPLIANCE ASSURANCES

3. EQUAL EMPLOYMENT OPPORTUNITY (5CFR Part 900, Subpart F)

The Area Agency assures fair treatment of applicants and employees in all aspects of personnel administration without regard to political affiliation, race, color, national origin, sex, religious creed, age, or handicap and with proper regard for their privacy and constitutional rights as citizens. This "fair treatment" principle includes compliance with the Federal equal employment opportunity and nondiscrimination laws. These include Title VII of the Civil Rights Act of 1964, the Equal Pay Act of 1963, the Age Discrimination in Employment Act of 1967, the Rehabilitation Act of 1973, the Americans with Disabilities Act, and other relevant laws

4. EMERGENCY MANAGEMENT PLAN

The Area Agency has assigned primary responsibility for Emergency Management planning to a staff member; the Area Emergency Management Plan which was developed in accordance with the Kentucky Department for Aging and Independent Living (and hereafter DAIL) shall be reviewed at least annually and is revised as necessary. The Area Agency also assures cooperation subject to client need in the use of any facility, equipment, or resources owned or operated by the DAIL which may be required in the event of a declared emergency or disaster.

As in Sec. 306(a)(16) or (17), the Area Agency shall include information detailing how the Area Agency on aging will coordinate activities and develop long-range emergency response plans with local and State emergency response agencies, relief organizations, local and State governments, and any other institutions that have responsibility for relief service delivery.

5. DIRECT PROVISION OF SOCIAL SERVICES

No Title III supportive services, nutrition services, or in-home services are being directly provided by the Area Agency except where provision of such services by the Area Agency has been determined by the DAIL to be necessary in assuring an adequate supply of such services; or where services are directly related to the AAAIL administrative functions; or where services of comparable quality can be provided more economically by the Area Agency.

6. REVIEW BY ADVISORY COUNCIL

The Area Agency has provided the Area Agency Advisory Council the opportunity to review and comment on the Area Plan and operations conducted under the plan.

7. ATTENDANCE AT STATE TRAINING

The Area Agency assures that it will send appropriate staff to those training sessions required by the DAIL.

8. PROPOSAL FOR PROGRAM DEVELOPMENT AND COORDINATION

The Area Agency has submitted the details of its proposals to pay for program development and coordination as a cost of supportive services to the general public (including government officials, and the aging services network) for review and comment. The Area Agency has budgeted its total allotment for Area Plan Administration before budgeting Title III-B funds for Program Development in accordance with 45 CFR 1321.17(14).

9. COMPETITIVE PROCESS FOR NUTRITION PROVIDERS, SUPPORTIVE SERVICES PROVIDERS, AND FOOD VENDORS

- a) Nutrition providers and supportive service providers will be selected through competitive negotiations or a Request for Proposal process. Documentation will be maintained in the Area Agency files.
- b) Nutrition service providers who have a central kitchen or who prepare food on-site must obtain all food and supplies through appropriate procurement procedures, as specified by the DAIL.
- c) Food vendors will be selected through a competitive sealed bid process.
- d) Nutrition service providers who have a central kitchen or who prepare meals on-site must develop a food service proposal.
- e) Copies of all Requests for Proposals and bid specifications will be maintained at the Area Agency for review.

10. REPORTING

The Area Agency assures that it will maintain required data on the services included in the Area Plan and report such data to the DAIL in the form and format requested.

11. NO CONFLICT OF INTEREST

No officer, employee, or other representative of the Area Agency on Aging is subject to a conflict of interest prohibited under this Act; and mechanisms are in place at the Area Agency on Aging to identify and remove conflicts of interest prohibited under this Act.

III) SERVICE PROVISION ASSURANCES

12. MEANS TEST

No Title III service provider uses a means test to deny or limit receipt of Title III services under the Area Plan.

13. EQUAL EMPLOYMENT OPPORTUNITY BY SERVICE PROVIDERS

The Area Agency assures that service providers provide fair treatment of applicants and employees in all aspects of personnel administration without regard to political affiliation, race, color, national origin, sex, religious creed, age, or handicap and with proper regard for their privacy and constitutional rights as citizens. This "fair treatment" principle includes compliance with the Federal equal employment opportunity and nondiscrimination laws. These include Title VII of the Civil Rights Act of 1964, the Equal Pay Act of 1963, the Age Discrimination in Employment Act of 1967, the Rehabilitation Act of 1973, the Americans with Disabilities Act, and other relevant laws.

14. STANDARDS/GUIDELINES/POLICIES AND PROCEDURES

The Area Agency and all service providers will comply with all applicable DAIL standards, guidelines, policies, and procedures.

NOTE: No additional waiver of the Multi-Purpose Senior Center (MPSC) Standards is necessary IF the Area Agency has previously obtained such a waiver AND there have been no changes since the submission of the waiver request.

15. SPECIAL MEALS

Each nutrition program funded under the Area Plan is providing special meals, where feasible and appropriate, to meet the particular dietary needs, arising from the health requirements, religious requirements, or ethnic backgrounds of eligible individuals.

16. CONTRIBUTIONS

Older persons are provided an opportunity to voluntarily contribute to part or all of the cost of Title III services received under the Area Plan, in accordance with procedures established by the DAIL. Title III services are not denied based on failure to contribute.

The area agency on aging shall ensure that each service provider will-

- A. Provide each recipient with an opportunity to voluntarily contribute to the cost of the service.
- B. Clearly inform each recipient that there is no obligation to contribute and that the contribution is purely voluntary;
- C. Protect the privacy and confidentiality of each recipient with respect to the recipient's contribution or lack of contribution;
- D. Establish appropriate procedures to safeguard and account for all contributions; and
- E. Use all collected contributions to expand the service for which the contributions were given and to supplement (not supplant) funds received under this act.

Voluntary contributions shall be allowed and may be solicited for all services for which funds are received under this Act if the method of solicitation is not coercive. Such contributions shall be encouraged for individuals whose self-declared income is at or above 185 percent of the poverty line, at contribution levels based on the actual cost of services.

17. PERSONNEL POLICIES

Written personnel policies affecting Area Agency and service provider staff have been developed to include, but are not limited to, written job descriptions for each position; evaluation of job performance; annual leave; sick leave; holiday schedules; normal working hours; and compensatory time.

18. COORDINATION WITH TITLE V NATIONAL SPONSORS

The Area Agency will meet at least annually with the representatives of Title V Older American Community Service Employment Program (formerly SCSEP) sponsors operating within their Planning and Service Areas (PSAs) to discuss equitable distribution of enrollee positions within the PSA and coordinate activities as appropriate.

19. PREFERENCE IN PROVIDING SERVICES

The Area Agency on Aging provides assurance that preference will be given to services to older individuals with the greatest economic need and older individuals with the greatest social need, (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) and include proposed methods of carrying out the preference in the Area Plan. [Section 305(a)(2)(E)]

IV) TITLE III, PART A ASSURANCES

The Area Agency on Aging assures that it shall --

20. Sec. 306(a)(2) - provide assurances that an adequate proportion, as required under section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services

- A. Services associated with access to services (transportation, health services (including mental health services), outreach, information, and assistance (which may include information and assistance to consumers on availability of services under part B and how to receive benefits under and participate in publicly supported programs for which the consumer may be eligible) and case management services;

- B. In home services, including supportive services for families of individuals who have a diagnosis of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and
- C. Legal Assistance; and assurances that the Area Agency on Aging will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded.

21. Sec. 306(a)(4)(A)(i) - provide assurances that the Area Agency on Aging will—

- (I) (aa) set specific objectives, consistent with State policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement;
- (bb) include specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas; and
- (II) include proposed methods to achieve the objectives described in items (aa) and (bb) of sub clause (I);

22. Sec. 306(a)(4)(A)(ii) provide assurances that the area agency on aging will include in each agreement made with a provider of any service under this title, a requirement that such provider will—

- (I) specify how the provider intends to satisfy the service needs of low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in the area served by the provider;
- (II) to the maximum extent feasible, provide services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in accordance with their need for such services; and
- (III) meet specific objectives established by the Area Agency on Aging, for providing services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas within the planning and service area; and

23. Sec. 306(a)(4)(A)(iii) - With respect to the fiscal year preceding the fiscal year for which such plan is prepared, the Area Agency on Aging shall—

- (I) identify the number of low income minority older individuals and older individuals residing in rural areas in the planning and service area;
- (II) describe the methods used to satisfy the service needs of such minority older individuals; and
- (III) provide information on the extent to which the Area Agency on Aging met the objectives described in clause (a)(4)(A)(i).

24. Sec. 306(a)(4)(B) - provide assurances that the Area Agency on Aging will use outreach efforts that will identify individuals eligible for assistance under this Act, with special emphasis on—

- (I) older individuals residing in rural areas;
- (II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
- (III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
- (IV) older individuals with severe disabilities;
- (V) older individuals with limited English proficiency;
- (VI) older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and
- (VII) older individuals at risk for institutional placement; and

- (ii) inform the older individuals referred to in sub-clauses (I) through (VII) of clause (i), and the caretakers of such individuals, of the availability of such assistance;
25. Sec. 306(a)(4)(C) - provide assurance that the Area Agency on Aging will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low income minority older individuals and older individuals residing in rural areas.
26. Sec. 306(a)(5) provide assurances that the Area Agency on Aging will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and individuals at risk for institutional placement, with agencies that develop or provide services for individuals with disabilities.
27. Sec. 306(a)(6)(A) - take into account in connection with matters of general policy arising in the development and administration of the area plan, the views of recipients of services under such plan;
28. Sec. 306(a)(6)(B) -serve as the advocate and focal point for older individuals within the community by (in cooperation with agencies, organizations, and individuals participating in activities under the plan) monitoring, evaluating, and commenting upon all policies, programs, hearings, levies, and community actions which will affect older individuals
29. Sec. 306(a)(6)(C)
- (i) enter, where possible, into arrangements with organizations providing day care services for children, assistance to older individuals caring for relatives who are children and respite for families, so as to provide opportunities for older individuals to aid or assist on a voluntary basis in the delivery of such services to children, adults, and families;
 - (ii) if possible, regarding the provision of services under this title, enter into arrangements and coordinate with organizations that have a proven record of providing services to older individuals, that-
 - (I) were officially designated as community action agencies or community action programs under section 210 of the Economic Opportunity Act of 1964 (42 U.S.C. 2790) for fiscal year 1981, and did not lose the designation as a result of failure to comply with such Act; or
 - (II) came into existence during fiscal year 1982 as direct successors in interest to such community action agencies or community action programs; and that meet the requirements under section 675(c)(3) of the Community Services Block Grant Act (42 U.S.C. 9904(c)(3)); and
30. Sec. 306(a)(6)(C)(iii) - make use of trained volunteers in providing direct services delivered to older individuals and individuals with disabilities needing such services and, if possible, work in coordination with organizations that have experience in providing training, placement, and stipends for volunteers or participants (such as organizations carrying out Federal service programs administered by the Corporation for National and Community Service), in community service settings;
31. Sec. 306(a)(6)(D) establish an advisory council consisting of older individuals (including minority individuals and older individuals residing in rural areas) who are participants or who are eligible to participate in programs assisted under this Act, family caregivers of such individuals, representatives of older individuals, service providers, representatives of the business community, local elected officials, providers of veterans' health care (if appropriate), and the general public, to advise continuously the area agency on aging on all matters relating to the development of the area plan, the administration of the plan and operations conducted under the plan;
32. Sec. 306(a)(6)(E) establish effective and efficient procedures for coordination of -
- (I) entities conducting programs that receive assistance under this Act within the planning and service area served by the agency; and

- (ii) entities conducting other Federal programs for older individuals at the local level, with particular emphasis on entities conducting programs described in section 203(b) [42 USC § 3013(b)], within the area;
33. Sec. 306(a)(6)(F) – The Area Agency on Aging will in coordination with the State Agency on Aging (DAIL) and the State agency responsible for mental health services, increase public awareness of mental health disorders, remove barriers to diagnosis and treatment, and coordinate mental health services (including mental health screenings) provided with funds expended by the Area Agency on Aging with the mental health services provided by community health centers and by other public agencies and nonprofit private organizations;
34. Sec. 306(a)(7) - provide that the area agency on aging shall, consistent with this section, facilitate the area-wide development and implementation of a comprehensive, coordinated system for providing long-term care in home and community-based settings, in a manner responsive to the needs and preferences of older individuals and their family caregivers, by –
- (A) collaborating, coordinating activities, and consulting with other local public and private agencies and organizations responsible for administering programs, benefits, and services related to providing long-term care;
 - (B) conducting analyses and making recommendations with respect to strategies for modifying the local system of long-term care to better –
 - (i) respond to the needs and preferences of older individuals and family caregivers;
 - (ii) facilitate the provision, by service providers, of long-term care in home and community-based settings; and
 - (iii) target services to older individuals at risk for institutional placement, to permit such individuals to remain in home and community-based settings;
 - (C) implementing, through the agency or service providers, evidenced-based programs to assist older individuals and their family caregivers in learning about and making behavioral changes intended to reduce the risk of injury, disease, and disability among older individuals; and
 - (D) providing for the availability and distribution (through public education campaigns, Aging and Disability Resource Centers, the Area Agency on Aging itself, and other appropriate means) of information related to
 - (i) the need to plan in advance for long-term care; and
 - (ii) the full range of available public and private long-term care (including integrated long-term care) programs, options, service providers, and resources.
35. Sec. 306(a)(8) that case management services provided under this title through the area agency on aging will -
- (A) not duplicate case management services provided through other Federal and State programs;
 - (B) be coordinated with services described in subparagraph (A); and
 - (C) be provided by a public agency or a nonprofit private agency that -
 - (i) gives each older individual seeking service under this subchapter a list of agencies that provide similar services within the jurisdiction of the Area Agency on Aging;
 - (ii) gives each individual described in clause (i) a statement specifying that the individual has a right to make an independent choice of service providers and documents receipt by such individual of such statement;
 - (iii) has case managers acting as agents for the individuals receiving services and not as promoters for the agency providing such services; or

- (iv) is located in a rural area and obtains a waiver of the requirement described in clauses (i) through (iii); and
 - (v) is not located, does not provide, and does not have a direct or indirect ownership or controlling interest in, or a direct or indirect affiliation or relationship with, an entity that provides, services other than case management services under this title.
- 36. Sec. 306(a)(10) establish a grievance procedure for older individuals who are dissatisfied with or denied services under this subchapter;
- 37. Sec. 306(a)(11) – provide information and assurances by the Area Agency on Aging concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including
 - (A) information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the Area Agency on Aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;
 - (B) an assurance that the Area Agency on Aging will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and
 - (C) an assurance that the Area Agency on Aging will make services under the area plan available; to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.
- 38. Sec. 306(a)(12) provide that the Area Agency on Aging will establish procedures for coordination of services with entities conducting other Federal or federally assisted programs for older individuals at the local level, with particular emphasis on entities conducting programs described in section 203(b)[42 U.S.C. § 3013(b)] within the planning and service area.
- 39. Sec. 306(a)(13)(A) - provide assurances that the Area Agency on Aging will maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships.
- 40. Sec. 306(a)(13)(B) - provide assurances that the Area Agency on Aging will disclose to the Assistant Secretary and the State Agency—
 - (i) the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and
 - (ii) the nature of such contract or such relationship.
- 41. Sec. 306(a)(13)(C) - provide assurances that the Area Agency will demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such nongovernmental contracts or such commercial relationships.
- 42. Sec. 306(a)(13)(D) - provide assurances that the Area Agency will demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such nongovernmental contracts or commercial relationships.
- 43. Sec. 306(a)(13)(E) - shall provide assurances that the Area Agency will, on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals.
- 44. Sec. 306(a)(14) – provide assurance that preference in receiving services under Sec. 301 will not be given by the area agency on aging to particular older individuals as a result of a contract or commercial relationship that is not a carried out to implement this title.

45. Sec. 306(a)(15)(A) - provide assurances that funds received under this title will be used - to provide benefits and services to older individuals, giving priority to older individuals identified in paragraph (4)(A)(i) (Section 306(a)(4)(A)(i); and
46. Sec. 306(a)(15)(B) – provide assurances that funds received under this title will be used in compliance with the assurances specified in paragraph (13)(Sec. 306(a)(13) in regard to commercial contractual relationships and the limitations specified in section 212 (42 U.S.C.A. § 3020c);
47. Sec. 306(a)(16) provide, to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care;
48. Sec. 306(a)(17) – shall include information detailing how the area agency on aging will coordinate activities, and develop long-range emergency preparedness plans, with local and State emergency response agencies, relief organizations, local and State governments, and any other institutions that have responsibility for disaster relief service delivery;
49. Sec. 306(a)(18) shall provide assurances that the Area Agency on Aging will collect data to determine –
- (A) the services that are needed by older individual whose needs were the focus of all centers funded under title IV [42 U.S.C. § 3031 et seq.] as of fiscal year 2019, and
 - (B) the effectiveness of the programs, policies, and services provided by such area agency on aging in assisting such individuals.
50. Sec. 306(a)(19) provide assurances that the Area Agency on Aging will use outreach efforts that will identify individuals eligible for assistance under this Act, with special emphasis on those individuals whose needs were the focus of all centers funded under Title IV [42 U.S.C. §3031 et seq.] in fiscal year 2019
51. Projects in the planning and service area will reasonably accommodate participants, as described in the Act, and any special needs in accordance with the Americans with Disabilities Act and other state and federal law.
52. Sec. 306(c) If an Area Agency on Aging has satisfactorily demonstrated to the State agency that services being furnished for such category in the area are sufficient to meet the need for such services and had conducted a timely public hearing on such needs, then the State agency in approving the submitted area plan has waived further proof of the requirement described in Sec. 306(a)(2) for the term of that area plan, unless an inquiry or concern leads the State Agency to investigate the veracity of the sufficiency of service needs being met in the PSA.

VI) TITLE VIII/LEGAL ASSISTANCE ASSURANCES

53. Sec. 307(11)(A) provide assurances that the Area Agency on Aging will –
- (i) enter into contracts with providers of legal assistance which can demonstrate the experience or capacity to deliver legal assistance;
 - (ii) include in any such contract provisions to assure that any recipient of funds under division (A) will be subject to specific restrictions and regulations promulgated under the Legal Services Corporation Act (other than restrictions and regulations governing eligibility for legal assistance under such Act and governing membership of local governing boards) as determined appropriate by the Assistant Secretary; and
 - (iii) attempt to involve the private bar in legal assistance activities authorized under this title, including groups within the private bar furnishing services to older individuals in pro bono and reduced fee basis
54. Sec. 307(11)(D) provide assurances that, to the extent practicable, that legal assistance furnished under the Area Plan will be in addition to any legal assistance for older individuals being furnished with funds from sources other than this Act and that reasonable efforts will be made to maintain existing levels of legal assistance for older individuals.

55. Sec. 307(11)(E) provide assurances that Area Agencies on Aging will give priority to legal assistance related to income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect, and age discrimination.

Verification of Older Americans Act Assurances

My signature below indicates that the Enter AAAIL Name Area Agency on Aging is in compliance and will maintain compliance with all aforementioned Standard Assurances.

Signature: _____
AAAIL Director Name
AAAIL Director

Date

Signature: _____
Advisory Council Chairperson Name
Area Agency Advisory Council Chairperson

Date