Central Massachusetts Agency on Aging

FFY 2022 - 2025 Area Plan

Table of Contents

Agency Over	view and Plan Summary	
	Planning and Service Area Map	3
Area Profile		
	Demographic Profile of Central Massachusetts COVID-19 Elder Needs Summary FY 2022-2025 Funding Priorities EOEA Focus Area Summary	6 7 8 12 14
CMAA Actio	ons and Programming	
	Central Mass Family Caregiver Support Program Community Outreach and Education Quality Management	20 20 22
CMAA Goals	s and Objectives FY 2022-2025 Area Plan Goals and Objectives	23
Appendices	A - J	

Central Massachusetts Agency on Aging Area Agency on Aging

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AGENCY OVERVIEW AND PLAN SUMMARY

THE MISSION OF CENTRAL MASSACHUSETTS AGENCY ON AGING

TO ENHANCE THE QUALITY OF LIFE FOR AREA OLDER PERSONS AND CAREGIVERS, THE CENTRAL MASSACHUSETTS AGENCY ON AGING WILL PROVIDE LEADERSHIP, RESOURCES, COORDINATION OF SERVICES AND ADVOCACY

This means that Central Massachusetts Agency on Aging is the leader in the planning, development and funding of a comprehensive and coordinated community-based service system throughout our planning and service area. CMAA holds a preeminent place in the provision of information on the World Wide Web helping all consumers in leading independent, meaningful and dignified lives, in their own homes and communities, for as long as possible.

CENTRAL MASSACHUSETTS PLANNING AND SERVICE AREA COMMUNITIES:

Ashburnham Hardwick Rutland Ashby Holden Shirley Auburn Hopedale Shrewsbury Hubbardston Southbridge Aver Lancaster Barre Spencer Bellingham Leicester Sterling Berlin Leominster Sturbridge Blackstone Lunenburg Sutton **Bolton** Medway Templeton **Boylston** Mendon Townsend Brookfield Milford Upton Charlton Uxbridge Millbury Clinton Warren Millville Douglas New Braintree Webster North Brookfield West Boylston Dudley East Brookfield Northbridge West Brookfield Oakham Westminster Fitchburg Winchendon Franklin Oxford

Gardner Paxton
Grafton Pepperell
Groton Princeton

Worcester

The Central Massachusetts Agency on Aging is the largest, both geographically (over 1,500 square miles) and numerically (over 150,000 elders) of the twenty-three area agencies on aging (AAA) in the Commonwealth. Central Massachusetts Agency on Aging works with three independent aging services access points (ASAPs, formerly known as home care corporations) as well as sixty-one Councils on Aging and dozens of human service providers to build the capacity of the entire elder service system. As an Area Agency on Aging, CMAA is charged with administering programming under the federal **Older Americans Act** in the 61 communities that comprise the Central Massachusetts Planning and Service Area (PSA).

The primary source of funding for the agency and its operations is Title III of the Older Americans Act. These are federal funds from the Administration on Aging that are managed and distributed by the Massachusetts Executive Office of Elder Affairs. In addition, CMAA has received other financial support in the past. This support has included program-specific grants from Fallon Community Health Plan as well as contributions from individuals and private corporations, both financial and in-kind.

This Area Plan will summarize major needs of elders in Central Massachusetts and outline how CMAA intends to address them over the next four years. In addition to employing Older Americans Act funding to support local agencies efforts to address these issues, CMAA will also continue to develop means to reach the public and providers network via expanded use of the internet and social media. New initiatives focusing on promoting cost-efficient transportation and improving the measurement of program outcomes are also planned. We have noted that COVID-19 has amplified Social Isolation and issues related to Transportation, Housing, Mental and Behavioral Health, and Food Insecurity. CMAA is taking steps to address these issues.

AREA PROFILE

Table 1. Central Massachusetts and Massachusetts Population Aged 60+ 2000 – 2020

	2000	2010	2020 est*
CMAA	126,956	150,280	201,326
MASS	1,096,567	1,273,271	1,632,168
% of MA 60+ Pop	11.6%	11.8%	12.3%

^{*}Estimates from The Research Unit, Executive Office of Elder Affairs, based on MISER projections

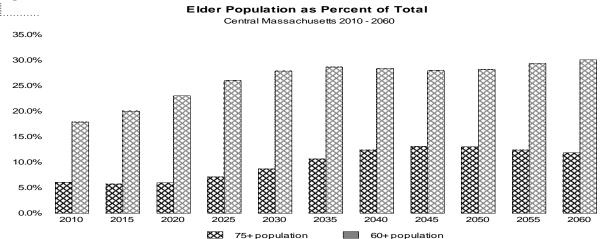
The 2010 census documented some trends that CMAA has observed over the past few years:

- The overall population of the Central Massachusetts region increased by 6.44%, more than twice the state increase of 3.13%.
- The 60+ population of Central Mass increased 18.4% to 150,280 in comparison to the statewide increase of 16.1%.
- This area now comprises 11.8% of the Massachusetts 60+ population, compared to 11.6% in 2000.
- Geographically, the communities bordering the I-495 belt in the northeastern part of the region and the Blackstone Valley have shown substantial gains in elder population.
- On the other hand, larger cities (such as Worcester and Fitchburg) and former factory communities (such as Clinton, Hopedale and Southbridge) have seen little or no change in 60+ population.

The increased geographic dispersal of the Central Massachusetts elder population may mean that community-based providers might experience increased transportation costs in reaching their elder clients in the future; a trend that CMAA continues to monitor.

Looking forward, MISER estimates that the 2020 elder population for Central Massachusetts will be 201,326. Barring substantial changes in migration patterns and birth rates, we expect that the 60+ portion of the population of Central Massachusetts will increase from 17.8% of total population in 2010 to about 28% in 2030 due to the aging of the baby boomer generation. At the same time, we expect the 75+ portion of the population to remain approximately level or even decline somewhat from 2010 until 2021 when the baby boomers once again will produce rapid growth in this age cohort (see Figure 1).





Since it is the population aged 75 and older that is most likely to need supportive services, we expect the demand for such services to level off to some degree for the next few years. However, if those over 75 years of age continue to live increasingly longer than in the past and if there is a greater emphasis on helping them to remain in the community, the "baby bust" legacy of the Great Depression will not lead to a decline in the demand for community-based support services.

COVID-19:

Though there is insufficient hard data to determine the long-term effects of the pandemic, CMAA's research has found several trends which will be discussed in greater detail in this report. These include:

- 1. With a few exceptions, COVID did not so much create new problems but rather made existing problems significantly worse. For example, affordable and accessible housing, mental health, and adequate nutrition were already needs that had to be addressed. These problems still exist the need is merely much greater.
- 2. A major new need is ensuring the seniors have access to and comfort with technology. This is particularly challenging as different age brackets in the 60+ community have different degrees of technological fluency. There are also barriers to access due to income, location, and language.
- 3. The long-term effects on mental health is a concern. It is too early to assess how much trauma the pandemic has caused but it is reasonable to believe that it has been significant.

The Needs of Senior Citizens in Central Massachusetts:

In the Fall of 2020 the Central Massachusetts Agency on Aging began our Needs Assessment to determine funding priorities for FY22-25. This process included Focus Groups and Interviews with Providers as well as Surveys to engage directly with seniors during the pandemic as it was not possible to have focus groups with them. Transportation, Housing, and Social Isolation continued to be major needs. Our research included:

Interviews and Focus Groups:

- The Worcester Housing Authority
- All Program Managers for the three Nutrition Programs in CMAA's PSA
- All Program Managers for the three Caregiver Programs in CMAA's PSA
- All Program Managers for the three Crisis Intervention Programs in CMAA's PSA
- Community Legal Aid
- Worcester State University's program to address Elder Social Isolation
- The Multicultural Coordinators at the Worcester Senior Center
- An interview regarding senior and technology

Surveys:

- The Rainbow Lunch Club (LGBT Lunch Group)
- Centro (Latino Elders)
- Vietnamese Elders
- Arabic Elders
- Chinese Elders
- Latino Elders
- MOC Home Delivered Meal Route

Important information was also provided by CMAA's Grantees during annual monitoring visits. This information included quantitative data from grantees' surveys as well as observations from professionals who work directly with seniors and their caregivers. Prior to COVID staff was also gathering data at meetings in Brookfield hosted by the Central Massachusetts Regional Planning Commission which focused on housing needs specifically but also focused on a variety of needs confronting seniors living in rural communities.

The Major Issues That Cut Across These Sessions Included:

- Reliable transportation.
- Affordable and accessible Housing.

- Inadequate infrastructure, such as a lack of sidewalks, is a problem for many communities.
- A lack of affordable, quality healthcare as well as uncertainty of about the costs of these services in the future.
- There is an increase in younger senior citizens seeking services.
- More issues related to mental illness are occurring. This can be attributed to a variety of
 factors such as financial stress caused by the economic crisis, better diagnosis of mental
 illness than in the past, and the fact that mental illness holds less of a stigma for Baby
 Boomers than for prior generations.
- The Opioid Crisis is having an impact on elders. This trend manifests itself in terms of seniors being addicts themselves, exploitation by family members who have an addiction, and being forced into the role of caregiver for grandchildren because their children are not capable of being effective parents. Substance abuse in nursing homes is also a growing problem. Staff at many facilities lack adequate training to confront this issue effectively.
- There appears to be a knowledge gap with regards to available services and consumers' awareness of these services. This issue transcended socio-economic status and ethnic categorizations.
- Since COVID, Social Isolation has become a much bigger issue. Programming that promotes intergenerational engagement might be a means of addressing this issue.

Issue that Relate to Specific Populations:

- The HIV/AIDS Crisis of the 1980s decimated a generation of the LGBT community which has led to a generational gap within this population. Many LGBT people also do not have children of their own. This means that for many members of this community the only potential caregivers are of the same generation and thus are more likely to face their own financial and health problems.
- The lack of affordable transport means that some groups have limited culturally specific recreational opportunities. For example, some LGBT elders cannot afford to travel regularly to Boston where there are more events/activities that cater to their community than in Central Massachusetts.
- At the Central Massachusetts Regional Planning Commission (Transit) Focus Group respondents expressed concerns about having to walk 3/4s of a mile to access transport with inadequate infrastructure (e.g. a lack of sidewalks) and by the lack of safety rails and lower steps on vans.
- A lack of access to or an aversion of using technology contributes to social isolation and widens the information gap between services that are available and knowledge of these services. Recently, we haves seen some evidence of an uptrend in the use of technology amongst seniors that may be countering this issue. We will continue to monitor whether or not this shift is addressing this problem.

- Many senior centers in rural and small communities are unable to offer the range of
 programing and services that larger, urban and suburban COA's can provide. Mergers
 have begun to occur to address this issue. From an economic and service provision
 standpoint pooling resources makes sense, however, transportation is problematic as is
 the resistance of communities who resent having their senior center taken away.
- Seniors in rural areas who rely on public transportation to get to doctor's appointments often find themselves waiting for hours at the doctor's office due to the van's schedule.
- Many of the newly arrived Muslim seniors in Central Massachusetts are refugees. The
 trauma that they and their caregivers have experienced combined with language barriers
 has led to a lack of knowledge of available services, social isolation, and mental health
 issues. Many Muslim caregivers express concern about letting their older loved ones go
 out alone which contributes to social isolation.
- Though ESL courses are available for non-English Speaking elders the hours available per week are limited. Many seniors who take advantage of these programs also only speak English during class which hinders the development of their English skills.
- CMAA attempted to contact representatives of the indigenous community in our territory on multiple occasions. We received no response. Per the secondary research that we conducted on the needs of this population we know that affordable housing, reliable transport, and quality healthcare are primary needs for this population.
- Older former inmates need additional help in accessing services. CMAA will look to partner with the Worcester County Sheriff's Office and the District Attorney to strategize ways to better serve this population.
- More needs to be done to promote fitness in the African American, Latinx, and other minority communities. Title III-D programing could be translated to help with these efforts. Hybrid programming might be helpful.
- More needs to be done to provide vaccine outreach to BIPOC elders. CMAA will look
 into partnering with Medical Universities to develop educational training that can be
 marketed to this population.

Other Comments:

• Many consumers appear to be unaware of available services. We are investigating the reasons for this. CMAA has also started tracking participants' access and comfort using technology such as smart phones, apps, and laptops.

- There are concerns regarding social inclusion and a lack of "Safe Spaces" within the LGBT and Latino Communities.
- Job opportunities that pay a living wage for working class elders are limited. A lack of reliable transport is also a formidable barrier that prevents seniors from working.
- Social isolation is often a problem for elders. The reasons for this issue include a lack of transportation, family members who work during day or live far away, living in unsafe neighborhoods, financial instability, and other causes.
- There is a need for more ombudsmen especially multilingual ombudsmen. CMAA will
 work with partners such as RSVP to recruit a more diverse pool of staff and volunteers.
 More broadly we will also work with community partners to help the ASAPs in our
 service area recruit a more diverse staff that better represents the population of Central
 Massachusetts.
- Since COVID, scams targeting seniors have increased. CMAA will seek to provide additional support to the Retired Senior Volunteer Program's Senior Fraud Helpline.
- Additional outreach to senior centers will be required in the post-COVID environment.
- More research needs to be done on the economic and social benefits of living in a multigenerational household.
- Task Forces to address Mental Health issues should be established.
- More needs to be done to promote elder employment. We will work with local employment organizations to address this need.

2018 Needs Survey

In the spring of 2018 CMAA conducted a needs survey to assess how demographic shifts have affected the needs of senior citizens and their caregivers since our last survey in 2009. Since the last survey, several significant trends have emerged:

- Though the economic crisis has technically ended, it's after effects continue to be felt.
- Concerns about access to affordable, quality health care have become significantly more pronounced.
- The devastation left by Hurricane Irma has led to an influx of Puerto Ricans to the mainland. CMAA anticipates that areas with large Puerto Rican populations such as Worcester, Fitchburg, Leominster, and Southbridge will face challenges providing this population with affordable housing, access to services, and healthcare. Some of the new arrivals will be staying with relatives who rent. In certain cases, these living arrangements will violate the terms of the lease which could lead to an increase in evictions.

- We have seen an increase in grandparents raising grandchildren. This trend is likely connected to the opioid epidemic.
- The baby boomers are beginning to retire. This will have a major impact on the cost of healthcare and the ability of pensions and entitlement programs to deliver on their promises.
- Roughly 9% of respondents to the 2018 Needs Survey reported going without dental care due to lack of resources. It is reasonable to believe that this figure is in fact higher. We will look to partner with community based organizations and colleges and universities with dental programs to address this need.

FFY 2022-2025 Title III Funding Priorities

Title III of the Older American's Act is the source of much of the funding for the Central Massachusetts Agency on Aging. The goal of CMAA is to address the most critical needs of elders throughout the region. These funds allow us to achieve this end by working through service providers. Generally, preference will be given to applicants who are locally-based providers, with collaborative proposals and to those that intend to serve the entire planning and service area.

Title III-B – Supportive Services

Access for Elders

Outreach and Interpretation programs targeting one or more of the following groups: minority and/or non-English speaking populations, rural, low-income, disabled, Native Americans, the LGBT+ community, and Alzheimer's patients and their caregivers. Proposals should address areas and/or populations that are demonstrably without services, or are underserved.

Transportation in areas where significant unmet need is clearly demonstrated. Proposals should include service to residents in more than one community whose residents would otherwise not have access to medical transportation and/or escorted transportation where necessary to access health care. Programs that provide transportation to recreational facilities that can reduce social isolation will be considered as well. The vehicles that will be utilized by the program must have appropriate Safety Features such as handrails.

Crisis Intervention

Short term intensive counseling or problem solving assistance to help seniors deal with crisis situations

Emergency Home Repair

Repair and maintenance services for elders within the entire CMAA service area who are at risk from health and safety hazards or at risk of being homeless. Grant funds will be limited to providing the skilled labor required to make needed repairs and modifications with the expectation that homeowners or other resources will provide any required materials. There is an

extra need for this service in the Northern Portion of our PSA as there have been no applications to fill this need for several years.

Money Management for eligible seniors throughout the CMAA service area to provide financial counseling, checkbook balancing, bill paying and related services to elders in multiple communities.

Legal Services (mandated)/Guardianship

Includes help in obtaining or restoring public benefits, guardianship services, resolving housing problems or other appropriate concerns.

Long Term Ombudsman (mandated)

Volunteers and stipend staff serving nursing home residents by investigating and resolving complaints made by the residents, or on their behalf.

Technology – Programs that can provide technology and technological training to seniors that can reduce social isolation and increase access to information, programming, and services.

III-C – Nutrition Services

Regional congregate and home delivered meal services. Projects must meet federal regulations governing Nutrition Programs. CMAA recognizes the importance of cultural competent meals and will continue to be an advocate for them.

III-D - Disease Prevention and Health Promotion Services

Programs may focus on the prevention and mitigation of the effects of chronic disease (including osteoporosis, hypertension, obesity, diabetes, and cardiovascular disease), alcohol and substance abuse reduction, smoking cessation, weight loss and control, stress management, falls prevention, physical activity, improved nutrition and related health screenings. Further, program designs should be demonstrated through evaluation to be effective for improving the health and well-being or reducing disease, disability and/or injury among older adults and service should be provided by community-based organizations employing appropriately credentialed practitioners. Eligible programs must adhere to the Administration for Community Living's definition of "Evidence Based".

The Programs that currently receive Title III funding from CMAA address populations identified by EOEA:

• *Elders Living Alone* and *Socially Isolated Elders* are served by the in-home service providers that we have funded who meet needs such as nutrition, crisis intervention, money management, home repair, and other programs. COVID-19 has made social isolation a much bigger issue.

- *Low Income Elders* are targeted by the types of services provided by Title III grantees. For example, Title III supported legal services focus on public benefit and eviction cases, but not estate planning.
- *Minority Populations* are reached via the programs that CMAA supports that target the large Hispanic populations in Worcester, Fitchburg, and Leominster.
- According to the 2010 census there are 208 *Native American elders* in Central Massachusetts comprising 0.14% of the overall elder population. A member of our Advisory Council and Board, who is of the Pocasset Wampanoag Tribe, has in the past offered to help us find contacts with the Nipmuc Tribe that resides in our services area.
- All grantees that include *rural elders* in their service area must provide proportional levels of service to these elders. This stipulation is cited in contract with organizations receiving Title III funding.
- Fall Prevention is an issue that CMAA monitors closely. During FFY20, the 61 communities in our PSA reported that 14.53% of seniors surveyed reported at least one fall of which 11.46% sought medical attention. 77.2% Felt unsteady on their feet and 69.46% worried about falling.

FOCUS AREAS:

1. Older Americans Act Core Programs:

Supportive Services, Nutrition Services, Disease Prevention/Health Promotion and Caregiver Programs are included in the Funding Priorities for CMAAs grant making process outlined above.

CMAA recognizes and responds to the changing demographics of our territory. We also understand that cultural difference can hinder the provision of needed services that fall under the Core Programs addressed by the Older Americans Act. To address this we are increasing our outreach to various communities such as Arabs, the Vietnamese, Chinese, etc... Through a combination of surveys, an increase in our presence in the community, Focus Groups, and recruiting representatives of these groups for our advisory council we aim to better identify and overcome obstacles that have prevented seniors and their caregivers from accessing services that would improve their quality of life.

The Central Massachusetts Agency on Aging continues our support in addressing the needs of the LGBT+ senior community by continuing our participation in and supporting the Worcester LGBT+ Elders Network (WLEN).

Health Promotion/Disease Prevention — In addition to funding Title III-D Programs, CMAA understands that we are a piece of a much larger system that meets the needs of the population of Central Massachusetts. To stay informed of changes to our Healthcare system and related issues our staff regularly attend CHNA 6 meetings. In addition to this we maintain a presence at events that address the opioid crisis, homelessness and the increase in grandparents raising grandchildren as well as attending the quarterly Summit Eldercare Caregiver meetings. We also continue to conduct secondary research on the emerging trends that we have identified (e.g. the opioid crisis) and will continue to conduct research as part of our outreach and data management strategies. We are currently evaluating how technology can reduce social isolation amongst our seniors and promote healthier living. We were studying this topic pre-COVID but the pandemic has added urgency to this issue.

2. Participant-Directed/Person-Centered Planning.

CMAA has been engaged with the ADRC in Central Massachusetts since its beginning. We continue to follow the "No Wrong Door" policy to ensure that consumers are directed to the most appropriate sources of information, are empowered to take control of their day to day affairs, and are informed of the available services that can help them live the life that they want to live to the fullest.

In non-COVID times, CMAA hosts the SHINE program in Central Massachusetts by providing space for peer counseling in our office. In addition, SHINE information is included on the CMAA website, www.seniorconnection.org.

CMAA staff participates in The Transportation Planning Advisory Group (TPAG). This is a consumer advisory committee that offers seniors (age 60+) and people with disabilities the opportunity to address issues related to transportation service.

Another source of information on elder needs is elder contacts with the three ASAPs in CMAA's PSA. The most frequent requests during FFY 2021 were:

- Information on home care services
- Public benefits
- Health & in-home services
- Requests for CMAA informational publications
- Housing issues
- Health benefits
- Legal issues
- Institutional care
- Transportation
- Financial assistance

3. Elder Justice:

CMAA manages finances and hosts the Elder Abuse Roundtable. This group is a symposium for professionals, cooperating with the Worcester District Attorney's Office and other providers, who are committed to fighting elder abuse in Central Massachusetts. The Roundtable employs tactics such as developing trainings (e.g. a video that teaches people how to intervene when they witness the bullying of a senior citizen) to address such incidences of elder abuse. We also fund the Senior Fraud Helpline run by RSVP which is one of the largest elder volunteer groups in the country. This helpline working to address the fraudulent schemes targeting senior citizens. Fraud has always been a problem and we have seen an uptick in cases since COVID began.

FY 2022-2025 Title III Funding Priorities

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- Low Income Elders are targeted by the types of services provided by Title III grantees. For example, Title III supported legal services focus on public benefit and eviction cases, but not estate planning.

- *Minority Populations* are reached via the programs that CMAA supports that target the large Hispanic populations in Worcester, Fitchburg, Southbridge, and Leominster. In addition to this the Worcester Senior Center's Osteoporosis Prevention Program has significant Vietnamese elder participation. We have also begun reaching out to the Islamic Community in a manner that we have not in the past.
- According to the 2010 census there are 208 *Native American Elders* in Central Massachusetts comprising 0.14% of the overall elder population. A member of our Advisory Council, who is of the Pocasset Wampanoag Tribe, has offered to help us find contacts with the Nipmuc Tribe that resides in our services area.
- All grantees that include *Rural Elders* in their service area must provide proportional levels of service to these elders. This stipulation is cited in contract with organizations receiving Title III funding.

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The Central Massachusetts Agency on Aging continues our support in addressing the needs of the LGBT senior community by continuing our participation in and supporting the Worcester LGBT Elders Network (WLEN).

Health Promotion/Disease Prevention – In addition to funding Title III-D Programs, CMAA understands that we are a piece of a much larger system that meets the needs of the population of Central Massachusetts. To stay informed of changes to our Healthcare system and related issues our staff regularly attend CHNA 6 and CHNA 9 meetings. We aso maintain a presence at events that address the opioid crisis, homelessness and the increase in grandparents raising

grandchildren as well as attending the quarterly Summit Eldercare Caregiver meetings. We also continue to conduct secondary research on the emerging trends that we have identified (e.g. the opioid crisis) and will continue to conduct research as part of our outreach and data management strategies. We are also evaluating how emerging technologies, such as virtual reality and artificial intelligence, can reduce social isolation amongst our seniors and promote healthier living. CMAA staff has also attended workshops on how to best address the issue of hoarding.

Participant-Directed/Person-Centered Planning.

CMAA has been actively engaged with the ADRC in Central Massachusetts since its beginning. We have recently complied with our ADRC's "No Wrong Door" policy to ensure that consumers are directed to the most appropriate sources of information, are empowered to take control of their day to day affairs, and are informed of the available services that can help them live the life that they want to live to the fullest.

CMAA hosts the SHINE program in Central Massachusetts by providing space for peer counseling in our office. In addition, SHINE information is included on the CMAA website, www.seniorconnection.org.

CMAA has recently updated our website to be more user friendly.

CMAA staff participates in both The Transportation Planning Advisory Group (TPAG) and the Worcester Regional Coordinating Councils (RCC). The WRTA is consumer advisory committee that offers seniors (age 60+) and people with disabilities the opportunity to address issues related to transportation service. The Worcester RCC is an advisory group that affords its members a space discuss local and regional transportation priorities.

Elder Justice:

CMAA manages the finances for and hosts the Elder Abuse Roundtable. This group is a symposium for professionals, cooperating with the Worcester District Attorney's Office and other providers, who are committed to fighting elder abuse in Central Massachusetts. The Roundtable employs tactics such as developing trainings (e.g. a video that teaches people how to intervene when they witness the bullying of a senior citizen) to address such incidences of elder abuse.

CMAA ACTIONS AND PROGRAMMING

Central Massachusetts Family Caregiver Support Program

The Central Massachusetts Family Caregiver Support Program is funded under Title IIIE of the Older Americans Act. It empowers elders, caregivers and professionals by providing information, education, support, and services that enhance quality of life. This program was initiated in an effort to help individuals manage the enormous personal, social, and economic challenges of caring for an elderly parent, relative, or friend. It is a cooperative effort of Central Massachusetts Agency on Aging, Montachusett Home Care Corporation, Elder Services of Worcester Area, Inc. and Tri-Valley Elder Services, Inc. designed to bring care for seniors and caregivers to a new level in the 61 cities and towns of Central Massachusetts.

CMAA and its partners share responsibility for:

- The Caregiver's Guide which offers concise information and comprehensive community resources to people who are caring for an elderly parent or relative. A Spanish language version of this publication is available.
- **Information and Referral** about local and long distance caregiving, available services, community resources and local programs.

The three collaborating ASAPs also focus on providing:

- Elder Care Advisors who are professionally trained to provide free in-home assessments; information and recommendations; connections to ongoing support & services and provide educational resources tailored to the specific needs of the elder or caregiver.
- **One-on-one assistance** to assess needs, identify options and gain access to community-based services.
- **Training, support and counseling** such as caregiver support groups and training to assist caregivers in making decisions, solving problems and managing stress.
- Caregiver Service Scholarships for temporary relief services through in-home respite care, adult day care or emergency respite, or other one time needs that arise.

Community Outreach and Education

One of the functions of an Area Agency on Aging is to assure the availability of Information and Assistance services for the planning and service area. CMAA's Community Outreach and Education Department provides comprehensive state of the art Information and Assistance. Specially trained Information and Referral Specialists are knowledgeable about all of the

resources available to elders and caregivers throughout the 61 cities and towns in the Central Massachusetts region. We assist consumers in identifying their needs and then research potential referrals from which they may choose to address their problem. CMAA also makes referrals to our ADRC partners. We also make referrals to Area Agencies on Aging around the country. We participate in problem-solving with individual agencies and serve as brokers between successful elder and caregiver service providers and those seeking assistance.

Health Fair and Community Education events offer CMAA the opportunity to carry clarifying information about the complicated aging and caregivers networks out into the community. Whether a small presentation to 7 people or a large event for over 500 people, each opportunity is important to potentially change our consumers' lives by offering them skills or information.

CMAA Website (www.SeniorConnection.org)

All CMAA elder and caregiver support services information is available though our online presence at www.SeniorConnection.org. The website is regularly revised to better provide support services to seniors, caregivers and professionals.

As an adjunct to the website, CMAA has a presence on Facebook, Instagram and Twitter as well as maintaining a blog. The links to these are accessible at www.seniorconnection.org.

Advocacy

Advocacy efforts at CMAA link to the community in a variety of ways.

- CMAA staff provides information concerning the elder population of Central Massachusetts
 and their caregivers to legislators, local government officials, local media and the general
 public. Through these publicity efforts CMAA helps to increase awareness of elder issues
 and encourage actions to address identified needs.
- CMAA staff works with area Community Health Network Areas (CHNAs) that target elder health issues. This encourages the local health network to maintain a focus on elder health issues.
- SeniorConnection staff advocate on behalf of individuals who are not able to do so for themselves. The necessity of performing such advocacy is determined on a case by case basis.
- CMAA staff are participants with a variety of community organizations including:

- o Leading the Initiative to get Worcester designated as "Age Friendly"
- o Worcester Regional Transit Authority Transportation Advisory Group
- o Dementia Friendly Worcester Initiative
- o The Coalition for a Healthy Greater Worcester
- o Central Mass Regional Planning Commission Elders and Transit Group
- Worcester LGBT Elder Network
- Local Community Health Network Areas (CHNAs)
- Worcester County Elder Abuse Roundtable
- Worcester Together Elder Subcommittee

Through this participation and other activities, elder needs and issues are highlighted to a broader public.

Quality Management

CMAA focuses on assuring the quality of services provided under the Older Americans Act. Depending on the characteristics of the service being delivered, a variety of methods must be employed to measure program effectiveness.

For those programs having readily measureable outcomes, such as legal assistance, crisis intervention and money management, outcome data on successful case resolution and improved financial status are routinely collected.

Quality assessment for other programs where the measureable outcomes are more difficult to define requires tailoring any evaluation methodology to be customized to the specific characteristics of the individual program. To this end CMAA staff work with agency staff to develop appropriate means of assessing program impact. For all programs, effectiveness is reviewed as part of the annual monitoring process.

The need to justify the expenditure of public funds in terms of achieved results is growing. In order to maintain support for Older Americans Act programming it is important to more clearly represent the difference these programs make in the lives of everyday people. To this end, CMAA will place increased emphasis on reviewing and refining outcome measures and evaluation methods for all programs in consultation with the service providers.

PROPOSED CMAA FFY 2022-2025 GOALS AND OBJECTIVES

CMAA has categorized our FFY22-25 Goals within the guidelines proposed by EOEA. They are as follows:

Goal 1. Support Aging in the Community, Including Supporting Age-Friendly and Dementia- Capable Communities

- CMAA will continue to support access-related services such as medical transportation, outreach, and translation/interpretation as well as others in Central Massachusetts. We will make a concentrated effort to target marginalized and underserved communities as well as increasing our Cross-Cultural Outreach.
- CMAA will continue to support in-home services such as home repair, crisis intervention, and money management as well as others in Central Massachusetts. We will be taking extra care to monitor and respond to emerging problems such as the Opioid Crisis, the spike in mental health issues, and the trend of younger seniors seeking services.
- CMAA will continue to support nutrition services for elders in Central Massachusetts.
 We will advocate for more culturally competent meals.
- To better reach targeted populations, CMAA will continue to distribute Spanish-language versions of the CMAA agency brochures and other materials at health fairs, caregiver and community education events. CMAA will make information accessible in other languages via the www.seniorconnection.org website. We also have multilingual staff members and have advocated for the translation of resource material to better inform underserved populations who do not speak English. CMAA continues to maintain the capability to address the needs of consumers whose primary language is not English by contracting with LanguageLine interpreter services.
- CMAA will continue to work with the SHINE program to provide information on health insurance and prescription drug coverage to Central Massachusetts elders and their caregivers. This will include continued participation as a SHINE member site, ensuring counselors are available for phone or in-person consultations every week, hosting SHINE information on the CMAA website and providing facilities for counselor training as needed.
- CMAA will continue to work with the Worcester LGBT+ Elder Network (WLEN) to better highlight the specific issues and barriers faced by LGBT+ elders. In addition to supporting the activities of WLEN, CMAA will continue to promote awareness of these barriers to service areas throughout the local provider network. We will also ensure that all employees take the state mandated LGBT+ Training.
- CMAA will provide information on model transportation programs and work with interested local COAs and other organizations to implement services based on these

models to better meet transportation needs in Central Massachusetts. We will also continue to monitor pilot programs that address this issue as well as gathering our own data on this topic.

- CMAA will continue to address the needs of rural elders by specifying target service levels in relevant Title III contracts.
- CMAA will maintain regular communication with Councils on Aging and Senior Centers to strengthen ongoing relationships by working to maintain COA representation on the CMAA Advisory Council.
- CMAA will continue to collaborate with Aging Services of North Central Massachusetts, Elder Services of Worcester Area, Tri-Valley Inc. and the Center for Living and Working to effectively implement the goals of the ADRC in Central Massachusetts.
- CMAA will assess and respond to the needs of indigenous elders in Central Massachusetts
- CMAA will continue to work with area ASAPs to establish a *Partnership Working Agreement* outlining mutual assistance to maintain delivery of essential services in the event of a local disaster situation.
- CMAA will continue its role as a participation observer with programs such as the Worcester Senior Center's Memory Café and Purple Table as well as attending events related to issues such as the opioid crisis, grandparents raising grandchildren, cultural events, and related issues. Our belief is that we can improve access to services and the efficacy of programs by being active members of the community and ensuring that we are up to date with the latest developments with regards to trends impacting our seniors.

Goal 2. To Empower Healthy Aging

- CMAA will support health promotion programming in Central Massachusetts that can be demonstrated through evaluation to be effective for improving the health and well-being of older adults while minimizing the impact of disease, disability and/or injury in this population. We will address these needs by providing funding to community-based organizations employing appropriately credentialed practitioners. We will also ensure that the Title III-D Programs that we fund meet the ACL's definition of "Evidence Based".
- CMAA staff will participate in Health Fairs and community education events throughout
 the service area in order to disseminate information on available programs and services
 including availability of flu shots and SHINE counseling.

 CMAA will continue to advocate for making the communities in our PSA "Age Friendly."

Goal 3. To Develop and Support the Careforce (Paid and Unpaid Caregivers)

- CMAA will collaborate with Elder Services of Worcester, Aging Services of North Central Massachusetts and Tri-Valley, Inc. to operate the *Central Massachusetts Family Caregiver Support Program*. This will include working with the collaborating agencies to revise, update, and promote resource materials for seniors and caregivers.
- CMAA will continue to host the *Caregivers Guide* on *SeniorConnection*.
- CMAA will continue to work to procure private funding to provide additional support to grandparents raising grandchildren.
- CMAA will continue to disseminate information concerning the elder population of Central Massachusetts and their caregivers to legislators, local government officials, local media and the general public to increase awareness of these issues.
- CMAA staff will continue to supply material to journalists, create and be interviewed for articles in newsprint and on cable television and radio programs around the region.

Goal 4. To Prevent Injury, Violence, and Exploitation of Older Adults

- CMAA will continue to support legal services for elders in Central Massachusetts.
- CMAA houses and operates the Long Term Care Nursing Home Ombudsman Program for all of Central Massachusetts.
- CMAA will continue to participate in the Elder Abuse Roundtable and the Hoarding Task Force.
- CMAA funds RSVP's the Senior Fraud Helpline to assist in the prevention of scams or to help mitigate their damage when they are accessible.

Goal 5. To Strengthen "No Wrong Door" Access to Aging and Disability Services

• CMAA continues the use of a "Warm" Transfer Policy to ensure that inquiries are directed to the appropriate sources of information. We continue to work with staff at ASAPs throughout our ADRC to improve the effectiveness of this policy.

Goal 6. To Ensure Quality, Value, and Person-Centered, Community-Based Care, Through Data Driven, Evidence-Informed Methods

- CMAA will conduct research activities on an ongoing basis with regards to the needs of Central Massachusetts elders and their caregivers in all their diversity. These activities will ensure that we are aware of emerging trends in real time and have adequate time to prepare a response to these events.
- CMAA will continue to seek collaborative opportunities with various agencies and organizations to ensure that the interests of elders and their caregivers remain a priority.