FOUR YEAR AREA PLAN Region 12

The Area Plan on Aging guides the work of the Vintage Area Agency on Aging for State Fiscal Years 2023-2027.

About Vintage

We Are The Alpine Region's Aging Expert

Vintage is the Alpine region's aging expert – ensuring that all of us have access to the supports, services, and resources we need when we're older. We serve Eagle, Grand, Jackson, Pitkin, Routt, and Summit counties in Northwest Colorado.

Vintage provides deep content expertise to ensure our communities are well adapted for aging where all individuals can thrive — a Colorado for all.

Our Mission

The mission of Vintage is to provide and connect our community with supports and services that promote aging with independence and dignity for individuals sixty and older and their caregivers in their community of choice.



www.yourvintage.org

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INTRODUCTION

Area Agencies on Aging (AAAs) are a national network of roughly 620 public or private nonprofit organizations designated by states to address the needs and concerns of older adults at state, regional or local levels. AAAs coordinate and offer services that help older adults remain in their homes, aided by services that make independent living in their communities a viable option. Many AAAs also provide Long Term Care Ombudsmen who advocate for the rights of older adults living or staying in long term care communities. By providing an array of services that can respond to the needs of adults at different stages of the aging process, AAAs make it possible for individuals to choose the services and living arrangements that suit them best as they age. AAAs are also tasked by the Older Americans Act (OAA) to serve as advocates for older adults, enabling the agency's leaders to engage on local and state issues beyond the programs and services they fund or deliver. AAAs help ensure that lawmakers and change makers are aware of the needs of older adults and their caregivers, the benefits of community-based services, and the taxpayer cost of failing to address the aging needs in the region. AAAs are led by the Administration for Community Living (ACL) under the US Department of Health and Human Services at the federal level, and by the State Unit on Aging (SUA) under the Department of Human Services in Colorado (CDHS).

Area Agencies on Aging are required to develop an Area Plan every four years outlining needs and proposed recommendations for programs and services targeted to the needs of older adults with input from clients, service providers, and other interested stakeholders. This document is the Four-Year Area Plan for Vintage, the AAA serving Region 12 in Colorado, and it is in effect during State Fiscal Years 2024-2027 (July 1, 2023 through June 30, 2027.)

SECTION I: EXECUTIVE SUMMARY

During the years of the last Area Plan, 2020-2023, Vintage, along with the rest of the world, encountered a crippling pandemic that turned our personal lives upside down, abruptly stopped many services, created staff exhaustion, perpetuated fear from our clients, and saw a reimaging of the way we do business. In the midst of the pandemic, we changed our name from the Alpine Area Agency on Aging to Vintage, to create brand awareness that would in turn increase our professionalism, business acumen, and establish us as the go-to aging resource in our community. In 2022, Routt County was added to Vintage's Planning and Service Area (PSA), bringing a total of six counties under Vintage. In sum, the past four years were a time of rebirth, recovery, release, and a commitment to Vintage's unofficial motto: *We Can Do Hard Things*.

We've now returned to in-person events, introduced a hybrid delivery model to many of our services, increased the number of providers, expanded and adapted programs to better meet the needs of older adults and caregivers, and added a bilingual staff member to better serve our Spanish speaking clients. As we look forward within this document and as an organization to the next four years, we will embark in a deep dive into the most pressing issues facing older adults in our region. Whether it's about addressing the complexity of health and social engagement needs of older adults, supporting the increasing numbers of older adults living in their community of choice, discovering new ways we can assist individuals to age in place, or addressing equity and inclusion, Vintage is dedicated to supporting older adults and their caregivers, as well as the entities that provide services at the local level. Our passion is supporting older adults and we aim to show it in every project we tackle, service we provide, and every public appearance we make.

Established in 1978, the Northwest Colorado Council of Governments (NWCCOG) Area Agency on Aging, has been helping people age better and live as independently as possible by funding community services, providing direct services, advocating for older adults and their caregivers, and planning and preparing for an aging population. Vintage's Planning and Service Area serves the six-county region of Eagle, Grand, Jackson, Pitkin, Routt, and Summit Counties and covers over nine thousand square miles. Three counties within Vintage hold the current record of longest life expectancy in the nation (Eagle, Pitkin & Summit). Several of the counties that Vintage serves also are designated Age Friendly Communities, meaning local leadership has made a commitment to actively work with residents and local advocates to make their community an age-friendly place to live.

The Area Plan on Aging guides Vintage's work and direction for the next four years. It reflects the needs of our region, highlights our service goals and demonstrates outcomes, and provides strategies and measures that will be used to evaluate progress and the success of our work.



- Administer the programs of the Older Americans Act
- Coordinate, fund and provide services that help older adults remain in their community of choice
- Advocate for legislative and regulatory changes that improve the lives of older adults and their caregivers
- Gather data, analyze trends, and share information to assist local governments and partners plan and serve an aging population



- Support programs and partners that help older adults age in place
- Grow our community presence through information and referral, marketing, partnerships, and collaboration with local providers, nonprofits, and faith based organizations
- Assist existing programs and partners to increase access to food and nutrition services
- Promote equity, combat racism and other systemic inequalities, and foster inclusion in our services and in our staff
- Continue to promote the value of older adults, fight ageism, empower older adults, and provide a platform for social good

SECTION II: PUBLIC INPUT

One of the biggest changes between this Area Plan and the one for State Fiscal Year 2020-2023 was COVID. One of the many changes brought on by the pandemic was the increased use, acceptance, and confidence in Zoom and other online meeting platforms. While we held no virtual Community Conversations for the last Area Plan, we held seven via Zoom for this plan. It was important to acknowledge that some individuals feel very confident in virtual meetings. However, we also need to meet those who prefer in-person discussions where they are, literally and figuratively. Virtual meetings also gave us the opportunity to have population specific conversations aimed at recognizing the older adult LGBTQ+population, Spanish speakers, Vintage providers and partners, and Hispanic caregivers.

	Vintage Community Conversations Schedule							
Date	Date Time County Town Population							
				Regional Transportation				
8/3	10am	Region Wide	Virtual	Coordinating Council (RTCC)				
8/25	10am	Region Wide	Virtual	NWCCOG Council				
9/12	7pm	Region Wide	Virtual	Hispanic Care Partners				
9/13	1pm	Eagle	Eagle	Eagle County Older Adults				
9/13	4pm	Summit	Frisco	Summit County Older Adults				
9/14	12:45pm	Eagle	Minturn	Minturn Older Adults - English				
9/14	12:45pm	Eagle	Minturn	Minturn Older Adults - Spanish				
9/15	9am	Region Wide	Virtual	Vintage Providers				
9/15	6pm	Region Wide	Virtual	LGBTQ+ Older Adults				
9/15	7pm	Region Wide	Virtual	Conversación para Personas que Cuidan a Familiares				
9/20	9am	Routt	Steamboat	Routt County Older Adults				
9/20	1pm	Routt	Hayden	Routt County Older Adults				
9/21	10am	Region Wide	Steamboat	Regional Advisory Committee (RAC)				
9/22	1pm	Jackson	Walden	Jackson County Older Adults				
9/22	5:30pm	Grand	Granby	Grand County Older Adults				
9/29	1pm	Pitkin	Aspen	Pitkin County Older Adults				
9/29	6pm	Region Wide	Virtual	Caregivers & Care Partners				

Community Conversations consisted of one-hour discussions with a written survey component and general discussion with guided questions. Meetings were recorded for documentation and written summaries. A \$25 gift card was drawn as both an incentive and reward for attendance.

The following questions were asked at the Community Conversations held throughout the region that were attended by older adults living in the community. Responses to the questions are summarized below:

How should Vintage better communicate and advertise the services that we provide?

- The most common response was in-person events. Responses were "keep giving us more info at lunch" and "more visible contact – more face-to-face." Some of the inperson activities were focused on providing presentations at senior centers specifically (not surprising given that many of the Community Conversations were held at local senior centers,) but several people suggested attending other functions, like the "women's club and wherever seniors go to events."
- Also common was the suggestion to advertise through the local Senior Centers, including their newsletters and making sure that Vintage flyers were available at all the different senior center locations.
- Additionally, many people suggested social media and local newspaper ads and articles.
- For the Community Conversations held in Spanish, all respondents answered that presentations in Spanish would be the best way to communicate.

What is one thing that Vintage can do as an organization to have a positive impact on diversity, equity, and inclusion in our region?

• The most common responses were about having equal services at multiple senior sites in one county (e.g. if one county had two sites, ensuring that the services and supports were identical at both settings) and to make sure that communication is available in both English and Spanish.

"Keep doing what you are doing. Seek out communication methods which may work better in marginal communities."

Where do you feel that you don't have a voice?

• Most older adults who responded to this question said that they felt heard in their community and felt that they do have a voice. Those with dissenting feelings felt left out of local government, especially as it pertained to senior-specific housing.

"I think seniors need to speak up - be their own advocates sometimes they're too quiet!" What is the most important thing you want us to understand about older adults living in your area?

- Responses were varied for this question, but visually, the most common words used in this response were "housing," "affordable" and "transportation."
- For Spanish speaking older adults, all responses included financial assistance for medicine, health insurance, and housing.

"There is a huge lack of affordable housing options for older people who want to downsize but not to an apartment or nursing home."

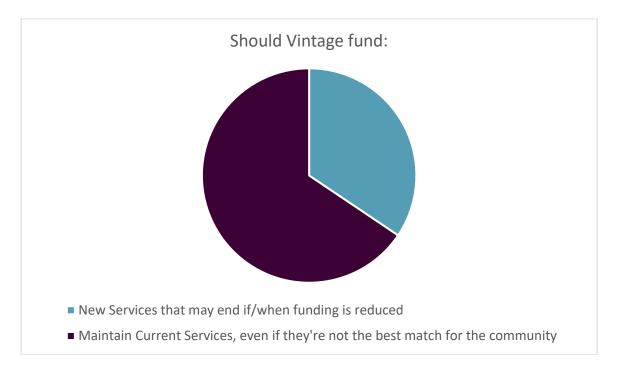
"We are valuable! Important! Not dead and still contribute to community and families."

"We thrive on our independence and need/want to be able to keep our independence as long as possible."



Funding often fluctuates and we must decide between starting new programs that might not receive funding in the future or focus on core programs. Would you rather see new services that may go away after a year due to lack of funding or know that the same programs will be available, but they might not be the most reflective of what your community needs?

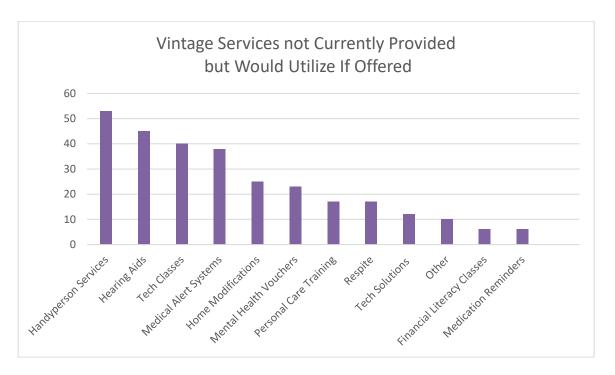
- When we asked this question four years ago, the responses were evenly divided. This time, most individuals preferred to know that programs would be available than see a new program go away due to funding issues.
- Surprisingly, for the Spanish speaking individuals who attended our Community Conversations, the answer was the exact opposite; they preferred to see new services that may go away after a year due to lack of funding.



Here's a list of services Vintage does not currently offer but is considering introducing in the next 4 years. What services would you use:

- Handyperson services was the clear favorite for services that Vintage does not currently provide but people would utilize if available. Currently, eligible individuals could use the chore voucher program, but we assume the problem is more finding a qualified handyperson in our region who is willing to take on smaller, handyperson jobs.
- Hearing aids were the second most popular choice, which is unsurprising. "Hearing loss is severely undertreated," says Jessica Galatioto, director of audiology at Columbia University Medical Center in New York City. Cost is a common reason for avoiding a hearing evaluation as it costs thousands of dollars for hearing aids, which aren't typically covered by Medicare.

• For Spanish speaking individuals attending the Community Conversations, the two highest ranked services were medical alert systems and personal care training. Handyperson services were ranked at the bottom.



What services are your highest priority?

- Dental and vision vouchers were ranked as the highest priority for current Vintage services (89% ranked it as an essential or high priority). This is unsurprising given that the dental and vision program is the most popular service and is the first to go on a waiting list.
- Transportation ranked as the second highest priority (87% ranked it as an essential or high priority).
- Case management ranked as the lowest priority.
- For individuals attending the Community Conversations in Spanish, every service was ranked as essential except for the Long-Term Care Ombudsman and Nutrition Counseling.

Below are the Lifelong Colorado Goals. What are the top three goals you think Vintage should pursue in this region?

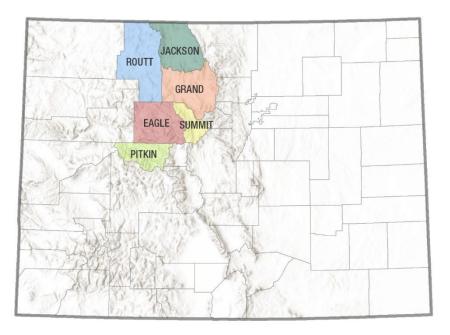
It is important that the local Area Plans reflect the goals at the state level, which are outlined in the <u>Lifelong Colorado Plan</u>. The top three goals found within the state plan that individuals rank the highest are:

• All levels of government will meet their commitments to support older Coloradans and their families.

- Older Coloradans will be able to live and fully participate in their community.
- Older Coloradans will stay healthier longer through access to quality and affordable person-centered care.

The rest of the Community Conversations were an open dialogue using the questions below as a guide:

- Think about your future. How would you like to age well?
- What barriers does the community face in accessing services to age well?
- Who do you trust in your community for information about aging?
- What do people need to age safely in their homes?
- Where do you see ageism in your community?
- COVID had an isolating effect on many people, especially older adults. What was, and continues to be, most important to you for your own wellbeing?



SECTION III: DEMOGRAPHICS

Vintage's planning area covers more than 9,000 square miles and six counties. The following demographic information describes the important features of our region that influence the work of the AAA. The counties represented in Region 12, the Planning and Service Area (PSA) that Vintage serves are Grand, Eagle Jackson, Pitkin, Routt, Summit counties. Data is from the <u>Colorado State Demography Office</u>.

Key Demographic Characteristics - Total Population

The total population of Region 12 is 146,294 (2021 July Population Estimates), which is about 2.5% of the total state population and places Vintage in the middle of the other sixteen Area Agencies on Aging in the state as far as funding and size of the population served.

COUNTY	POPULATION 60+	POPULATION 75+	POVERTY* 60+	MINORITY 60+	RURAL 60+	TOTAL POPULATION
Eagle	10,836	2,520	708	1,326	5,224	55,702
Grand	4,501	1,019	195	163	4,501	15,835
Jackson	453	146	39	19	453	1,359
Pitkin	5,219	1,368	519	167	2,705	17,329
Routt	6,191	1,590	638	180	3,878	25,099
Summit	6,690	1,684	711	283	2,243	30,970
Region 12	33,890	8,327	2,808	2,139	19,005	146,294

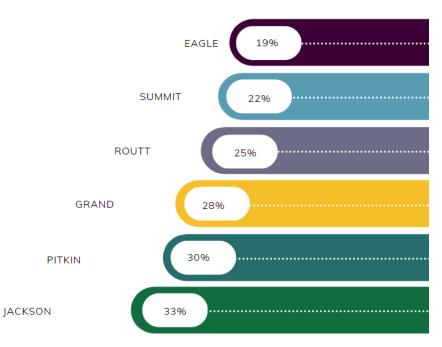
2021 JULY POPULATION ESTIMATES

* Based on Estimates from 2012-2016 American Community Survey of the U.S. Bureau of the Census.

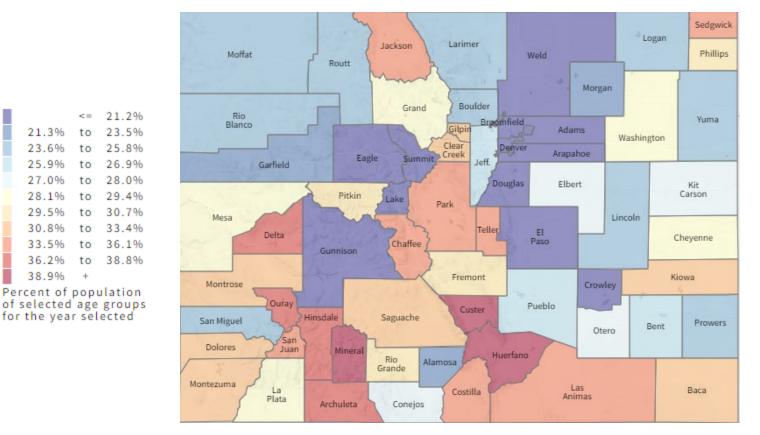
Key Demographic Characteristics - Population 60 and Over

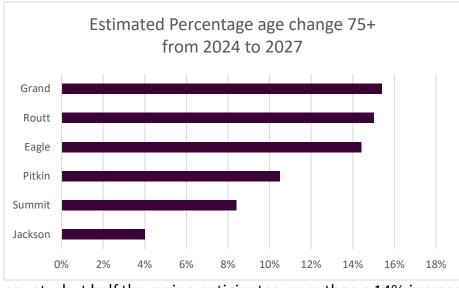
Almost a quarter of the total population of Vintage's population is at least 60 years old. The proportion of older adults varies by county; for example, the proportion of older adults in Jackson county compared to the total population in Jackson is 33%, but Eagle county has the lowest proportion (and largest population) with 19% of the population over the age of 60.

RESIDENTS 60+ POPULATION OF TOTAL IN 2020



Percent of Population that is 60+ in 2022





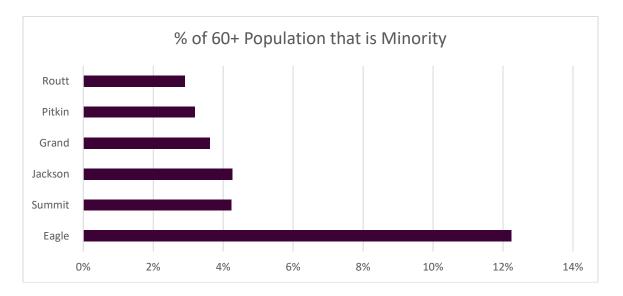
Key Demographic Characteristics – Population 75 and Over

The 75 or older population is increasing in both the Vintage region and the state. In the Denver region, currently 5% of the population is 75 or older. However, the estimated percentage age change for those 75+ between 2024 and 2027 will vary depending on the individual

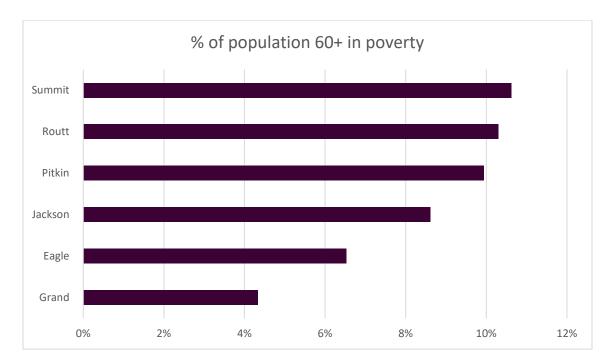
county, but half the region anticipates more than a 14% increase in the number of individuals over the age of 75.

Typically, we include projections to the year 2050 for race and ethnicity by age group, but those have not yet been prepared due to a delay in data from the Census Bureau.

Key Demographic Characteristics – Minority



The vast majority of the current older adult population in Region 12 is white non-Hispanic. Nationally, 80 percent of older adults are white non-Hispanic. It is expected that Colorado, and certainly Region 12, will become more diverse in the future, but the 2020 Census data and corresponding estimates have not been released yet.

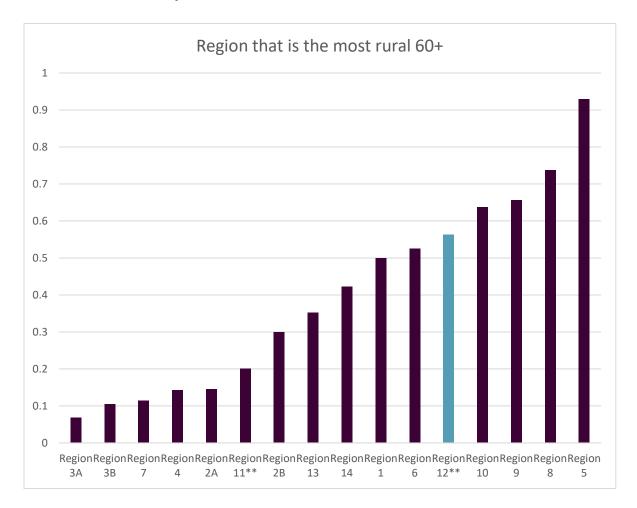


Key Demographic Characteristics – Below the Poverty Level

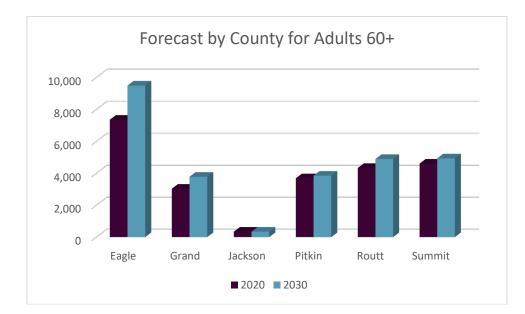
In Vintage's region, only 2 percent of those who are sixty and older live in poverty. However, if you drill down into the data and look at the proportion of those 60+ in poverty compared to the rest of older adults in the county, the percentage increases. In Summit County, 11% of the older adults are impoverished. Grand County's older adults are less likely to live in poverty, with 4% of those 60+ considered to be in poverty.

Key Demographic Characteristics – Rural

Region 12 is one of the most rural regions in the state, with over 50% of those 60+ considered rural. However, all older adults 60+ in Grand and Jackson counties are considered rural. Only 15% of older adults in Pitkin county are considered rural.



Percent of Forecasted Population Change



2020-2030	Eagle	Grand	Jackson	Pitkin	Routt	Summit
Pop Change	2,137	746	1	160	558	328
% Change	23%	20%	0.3%	4%	11%	7%

Impact of Demographic Shifts

The older adult population in Region 12 continues to grow—in many counties by double digits. That, coupled with the fact that even in the county least populated by those 60+ in the entire region, at least a fifth of all residents are 60 and older. In addition, half of the region has the longest life expectancy in the United States. So, what does that mean?

- 1. There's already a significant proportion of older adults living in Region 12
- 2. The number of older adults is anticipated to grow (on average by 11% by 2030)
- 3. People in Region 12 will live proportionally longer than other adults in the nation (86 years)

As an anti-ageist organization, Vintage strongly and unequivocally stands against the common misconception that sometimes arises after data like this is revealed. The offensive misnomer "Silver Tsunami" incorrectly identifies the demographic wave of Baby Boomers as a drain on local, state, and federal budgets. Communities that fail to plan for and embrace their aging population fail to see a golden opportunity to capture significant economic and societal returns and create a higher quality of life <u>for all of us</u> as we age.

The Lifelong Colorado Plan, which details the statewide livable communities plan for all

Coloradans summarizes the demographic shifts best:

"Colorado is the second fastest aging state in the nation and our state demography office projects that Coloradans aged 60+ will outnumber those aged 18 and younger as soon as 2023. This demographic reality is a first and will become our new normal as generations of Coloradans continue to live long and productive lives. **Now is not the time to balk at this emerging reality, but it is a time to plan, prepare, and invest in our communities, so that quality of life is retained across the entire lifespan.**

The pandemic has highlighted the importance of individual and community resilience, and as we build Colorado back stronger, we must do so in a way that supports Coloradans of all ages. We have wonderful community-specific examples to build upon as we strive for livable, equitable, and healthy communities across our state.

Current and future generations of older Coloradans will provide economic, social, and civic value to our communities for decades to come. **We have an opportunity to harness this value through the Lifelong Colorado initiative and embrace the idea that a Colorado well adapted for aging is one where all individuals can thrive – a Colorado for all.**"

If creating a Colorado for all isn't incentive enough to invest in our communities, the economic contribution of older adults is. By failing to provide supports and services for older adults and their caregivers so they can continue to age in place, elected officials are at risk of losing hundreds of millions of dollars in economic contributions by older adults. The graph below illustrates the significant contributions (paid and unpaid) to the communities in which they live. In addition to their paid work, older adults contribute to the economy through volunteering, providing informal help to family and friends, and caregiving.



SECTION IV: COMMUNITY ASSESSMENT SURVEY OF OLDER ADULTS (CASOA)

The Colorado Association of Area Agencies on Aging (c4a) contracted with Polco to administer the Community Assessment Survey for Older Adults (CASOA) in Summer 2022 for the entire state, the sixteen AAA regions and individual counties. The CASOA provides a statistically valid survey of the strengths and needs of older adults.

The survey was mailed out to a random selection of 16,709 older adult households in the Region 12 service area. A total of 1,873 completed surveys was obtained, providing an overall response rate of 12.15% and a margin of error plus or minus 2.26% around any given percent and one point around any given average rating for the entire sample. Results were statistically weighted to reflect the proper demographic composition of older adults in the entire community. Respondents identified equally as male (49%) and female (49%) with 2% not responding to the gender question. Ninety-four percent of respondents reported that they identified as White.

Information from CASOA is a tool used to identify strengths, needs and trends in the region and is used to prioritize funding and service priorities in the next four years. These reports are intended to enable local governments, community-based organizations, the private sector, and other community members to understand more thoroughly and predict more accurately the services and resources required to serve an aging population. With this data, community stakeholders can shape public policy, educate the public and assist communities and organizations in their efforts to sustain a high-quality of life for older adults. The individual CASOA county reports, as well as the regional Vintage report and a statewide report, are found at <u>www.c4a-colorado.org</u> and <u>www.yourvintage.org</u> as well as a video recording of the statewide CASOA results by Polco may be found at the c4a website. Presentations about the CASOA results were held for the NWCCOG Council the Regional Advisory Council, and any interested parties.

Results of CASOA

The report summarizes how older residents view their community and its success in creating a thriving environment for older adults. Aspects of livability are explored within six community dimensions:

- Community Design
- Employment and Finances
- Equity and Inclusivity
- Health and Wellness
- Information and Assistance
- Productive Activities

Domain of Community Livability

Community Livability Topics

Community Livability	Description	Livability Topics
合合合 Overall Community Quality	Measuring community livability starts with assessing the quality of life of those who live there, and ensuring that the community is attractive, accessible, and welcoming to residents of all ages.	 Place to Live and Retire Recommend and Remain in Community
Community Design	A well-designed community enhances the quality of life for its residents by encouraging smart land use and zoning, ensuring that affordable housing is accessible to all, and providing mobility options to support residents aging in place.	HousingMobilityLand Use
Employment and Finances	Communities that work to foster sustainable growth, create jobs and workforce training for persons of all ages, and promote equitable economies ensure older adults are able to sustain their financial well-being through retirement and not outlive their life investments.	EmploymentFinances
Equity and Inclusivity	A community is often greater than the sum of its parts. Having a sense of community entails not only a sense of membership and belonging, but also feelings of safety and trust in the other members of the community.	EquityCommunity Inclusivity
Health and Wellness	The amenities available in the communities have a direct impact on the health and wellness of residents, and thus, on their quality of life overall.	 Safety Physical Health Mental Health Health Care Independent Living
Information and Assistance	Government programs, policies and information assistance can support successful aging initiatives allowing older residents to remain independent contributors to community quality.	 Quality of Older Adult Services Information on Available Older Adult Services
Productive Activities	Productivity is the touchstone of a thriving old age. Older adults' engagement and contribution to the community can be determined by their time spent in civic meetings and social activities or providing help to others.	Civic EngagementSocial EngagementCaregiving

Description

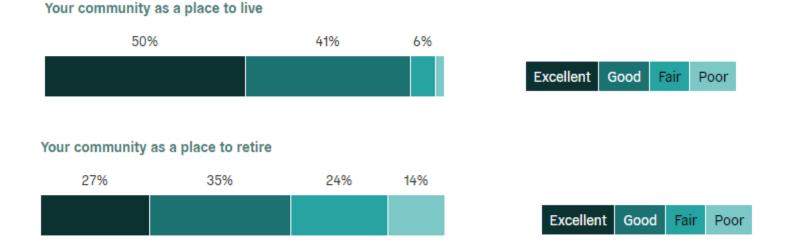


Overall Community Quality

Exploring how older residents view their community overall and how likely they are to recommend and remain in their communities can provide a high-level overview of the quality and livability of the

community.

- About 88% of older residents living in the region rated their overall quality of life as excellent or good. Most of the older respondents scored their communities positively as a place to live and would recommend their communities to others. About 71% residents planned to stay in their community throughout their retirement.
- Positive scores were given to their communities as places to retire by 62% of older residents.



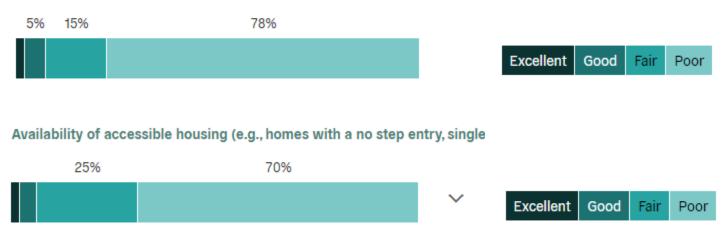


Community Design

Livable communities will become a necessity for communities to age successfully. Communities that have planned and been designed for older adults tend to emphasize access, helping to facilitate

movement and participation.

- About 72% of respondents rated the overall quality of the transportation system in their community as excellent or good. Ease of travel by car was considered excellent or good by 78% of respondents.
- Only 7% of respondents gave a positive score to the availability of affordable quality housing in their communities, and only about 22% older adults gave excellent or good ratings to the availability of mixed-use neighborhoods.
- About 36% of older residents in the region reported experiencing housing needs and 19% reported mobility needs.



Availability of affordable quality housing



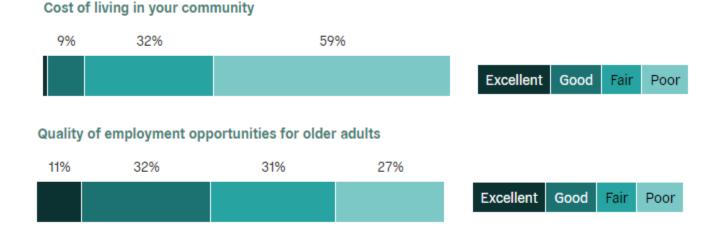


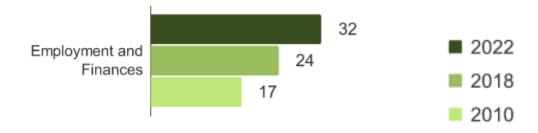
Employment & Finances

The increased life expectancy for those born between 1940 and 1960 has highlighted the importance of communities providing employment opportunities for older adults and the need to plan well

for retirement.

- About 76% of older residents rated the overall economic health of their communities positively, although the cost of living was rated as excellent or good by only 9%.
- Employment opportunities for older adults received low ratings and the opportunity to build work skills also was found to be lacking.
- About 20% older adults reported financial challenges and 17% reported employment needs.



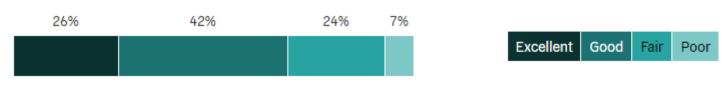




Equity & Inclusion

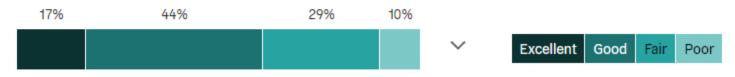
Having a sense of community entails not only a sense of membership and belonging, but also feelings of equity and trust in the other members of the community.

- Overall, about 69% of older residents rated the sense of community in their towns as excellent or good, and neighborliness was rated positively by 64% of residents. However, only a quarter of Hispanic residents felt a sense of community and only 16% felt their neighbors were welcoming. Similarly, the wealthier a respondent, the more sense of community and welcome they felt.
- About 61% of the respondents positively rated their community's openness and acceptance toward older residents of diverse backgrounds, and 51% indicated that their community valued older residents. However, only 15% of Hispanics felt the community was open towards older residents of diverse backgrounds and 10% felt that older residents were valued in the community. Inversely, only 3% of Hispanic older adults felt that they had been treated unfairly or discriminated against because of their age, but 22% of non-Hispanic individuals felt they had encountered age discrimination. The wealthier the respondent was, the more valued and accepted they felt and less likely they felt they had encountered ageism or age-related discrimination.
- Inclusion challenges were reported by about 16% of older residents and equity challenges by 6%. Again, those who self-reported as lower income or Hispanic encountered more challenges in these areas then their white or wealthier counterparts.



Sense of community in your community

Openness and acceptance of the community towards older residents of diverse backgrounds



Percentage of demographic that rated the characteristic as excellent or good.

Characteristic	Overall	No, not of Hispanic, Latino/a/x, or Spanish origin (A)	Yes, I consider myself to be of Hispanic, Latino/a/x, or Spanish origin (B)
Sense of community in your community	69%	71% B	24% A

Percentage of demographic that rated the characteristic as excellent or good.

Characteristic	Overall	No, not of Hispanic, Latino/a/x, or Spanish origin (A)	Yes, I consider myself to be of Hispanic, Latino/a/x, or Spanish origin (B)
Making all residents feel welcome	59%	61% B	16% A
Neighborliness of your community	64%	66% B	18% A

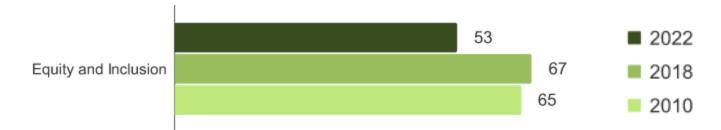
Percentage of demographic that rated the characteristic as excellent or good.

Characteristic	Overall	No, not of Hispanic, Latino/a/x, or Spanish origin (A)	Yes, I consider myself to be of Hispanic, Latino/a/x, or Spanish origin (B)
Openness and acceptance of the community towards older residents of diverse backgrounds	61%	63% B	15% A
Valuing older residents in your community	51%	53% B	10% A

Percentage of demographic that rated the characteristic as excellent or good.

Characteristic	Overall	Less than \$25,000, \$25,000 to \$49,999, \$50,000 to \$74,999 (A)	\$75,000 to \$99,999, \$100,000 to \$149,999 (B)	\$150,000 to \$199,999, \$200,000 or more. (C)
Sense of community in your community	69%	61% C B	71% C A	79% B A

Characteristic Overall		Less than \$25,000, \$25,000 to \$49,999, \$50,000 to \$74,999 (A)	\$75,000 to \$99,999, \$100,000 to \$149,999 (B)	\$150,000 to \$199,999, \$200,000 or more. (C)
Making all residents feel welcome	59%	50% C B	61% C A	72% B A
Neighborliness of your community	64%	55% C B	67% C A	76% B A

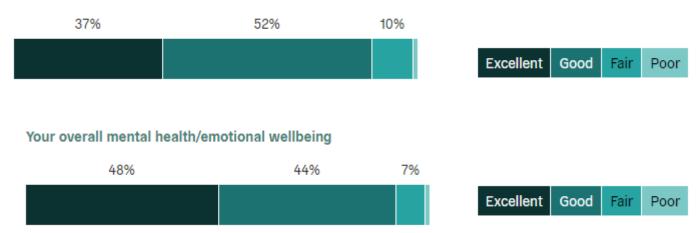




Health & Wellness

Of all the attributes of aging, health poses the greatest risk and the biggest opportunity for communities to ensure the independence and contributions of their aging populations.

- About 89% older residents in the region rated their overall physical health as excellent or good and 92% rated their mental health as excellent or good.
- Community opportunities for health and wellness were scored positively by 80% residents, while the percent giving ratings of excellent or good to the availability of physical health care was 44%, to mental health care 29%, and to long term care options 13%.
- Health-related problems were some of the most common challenges listed by older adults in the survey, with 22% reporting physical health challenges and 23% reporting mental health challenges. Health care was also a challenge for about 40% of older residents.



Your overall physical health





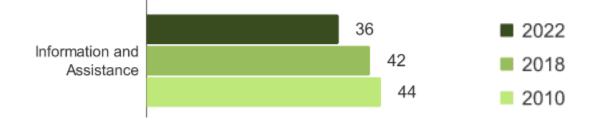
Information & Assistance

Providing useful and well-designed programs, as well as informing residents about other assistance resources, is an important way that government agencies can help residents age in place.

- The overall services provided to older adults in the region were rated as excellent or good by 59% of survey respondents.
- About 70% of survey respondents reported being somewhat informed or very informed about services and activities available to older adults. The availability of information about resources for older adults was rated positively by 41% of older residents and the availability of financial or legal planning services was rated positively by 33% of older residents.
- About 33% of older adults were found to have information access challenges in the region.



Availability of information about resources for older adults



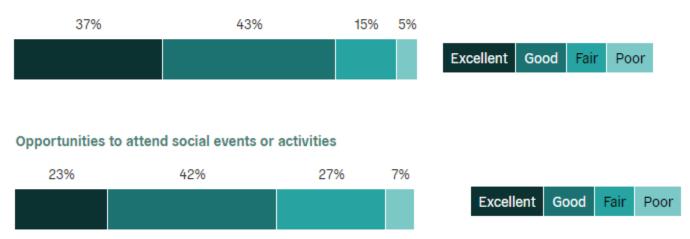


Productive Activities

Productive activities outside of work promote quality of life and contribute to active aging. This domain examines the extent of older adults' participation in social and leisure programs and their time

spent attending or viewing civic meetings, volunteering or providing help to others.

- About 81% of older adults surveyed felt they had excellent or good opportunities to volunteer, and 60% had volunteered.
- The caregiving contribution of older adults was substantial in the region. About 32% of older residents reported providing care to individuals 55 and older, 16% to individuals 18-54 and 16% to individuals under 18.
- Older adults in the region reported challenges with being civically engaged 23%, being socially engaged 15% and caregiving 8%.



Opportunities to volunteer



Comparison of Ratings Over Time

Community Characteristics Trends

The COVID-19 pandemic was disruptive to many areas of community livability and resulted in profound impacts on many older adults lives around the world, nation and in communities throughout Colorado. It is important to keep these disruptions in mind while comparing results from 2018 with the present results.

The six areas of community livability that showed a **decline in quality ratings from 2018** (most relating to activities and opportunities that were impacted by the pandemic) were:

- Availability of affordable quality food
- Recreation opportunities (including games, arts, library services, etc.)
- Fitness opportunities (including exercise classes and paths or trails, etc.)
- Opportunities to volunteer
- Opportunities to attend social events or activities
- Valuing older residents in your community

Resident Challenges Trends

The 16 potential challenge(s) where the proportion of older **adults reporting a problem increased in 2022** were:

- Having enough money to pay your property taxes
- Having housing to suit your needs
- Doing heavy or intense housework
- Maintaining your home
- Maintaining your yard
- Having safe and affordable transportation available
- No longer being able to drive
- Finding work in retirement
- Building skills for paid or unpaid work
- Having adequate information or dealing with public programs such as Social Security, Medicare, and Medicaid
- Not knowing what services are available to older adults in your community
- Getting the oral health care you need
- Getting the vision care you need
- Having enough food to eat
- Dealing with the loss of a close family member or friend
- Being a victim of fraud or a scam

SECTION V: VOLUNTEERS – CURRENT & FUTURE PROGRAMS

Vintage currently enlists twelve volunteers in the State Health Insurance Assistance Program (SHIP). The volunteers are trained and certified to provide counseling services on the phone and in person and help with outreach and education. Currently, there are SHIP volunteers in five of the six counties that Vintage serves.

There is currently one Long Term Care Ombudsman volunteer who assists Vintage's Regional Ombudsman with compliance visits, site council meetings, Adult Protective Services meetings, and emergencies when the Regional is not available.

The Vintage Regional Advisory Committee (RAC) is comprised of twenty volunteer who together represent each county in the region.

SECTION VI: COVID-19/PANDEMIC RESPONSE

How has the pandemic impacted social isolation and loneliness in the Region? What is your AAA and Region doing to address this?

This is a difficult question to answer through data alone. The CASOA data doesn't seem to reflect a negative change in social isolation and loneliness in the region due to COVID. Ninety-two percent of respondents said that feeling lonely or isolated was either not a problem (71%) or was a minor problem (21%) in the past twelve months. This is a positive trend from the 2018 CASOA results, in which 89% of respondents said feeling lonely or isolated was not a problem or a minor problem.

In our 2021 Performance Measure Survey results, many older adults talked about wanting to go back to their congregate meal sites because they missed seeing their friends, but the 2022 results didn't replicate this trend, as the meal sites had reopened.

The Community Conversation responses mentioned isolation, but in terms of physical isolation, not social isolation. Quotes about what we needed to know regarding the older adults in the area included:

"Isolation - if you don't drive it is very hard to get anywhere - appointments, social, errands."

"Isolation due to where we live and our capability of getting out!"

We asked if individuals would use "technology solutions to connect people and reduce loneliness & isolation" as one of our written Community Conversation questions and only 12 out of the 79 responses answered affirmatively. It could be that the people who attended an in-person Community Conversation were already less likely to feel lonely and isolated.

We are hesitant to introduce one of the multitudes of new technology companies that offer a solution for social isolation, because they haven't yet been a good fit for our AAA. Many require a lot of funding and staff time, and we haven't heard those that we serve ask for it. Additionally, some research has shown that "older persons who had only virtual contact during lockdown experienced greater loneliness and negative mental health impacts than an older person who had no contact with other people at all" (COVID-19, Inter-household Contact and Mental Well-Being Among Older Adults in the US and the UK).

That said, during the pandemic, Vintage started providing reassurance calls internally and contracted with several of our providers to make those regular calls. Reassurance calls will likely continue into the foreseeable future. We also started offering almost all of our regularly scheduled in-person programming (training, caregiver conferences, etc) in a hybrid version, so people can choose to connect virtually or in person. This allows us to meet the needs of most individuals with transportation or internet access.

We also help impact social isolation and loneliness by funding the local providers who have in-person social activities, like our local senior centers and councils on aging.

What changes in service delivery have been implemented during the pandemic that have been identified as a best practice that will continue?

- We started restaurant vouchers & reimburse for "bountiful baskets" which are home delivered boxes of staples, dairy, fresh fruit and vegetables.
- We created an emergency material aid voucher program to assist clients who don't need one of our specific voucher programs, like transportation or in-home services, but have an emergent need that we can meet (ex: walk-in shower)
- Many of our providers started providing "grab-n-go" meals at their congregate site and have continued to provide meals this way in additional to traditional home delivered and congregate meals.
- We were forced to move our educational outreach online during lockdown, but we continue to offer our programming virtually and in-person to allow more

individuals to join in the way that they prefer.

• Vintage continues to develop and update an emergency preparedness continuity of operations plan (COOP,) which was a direct result of the pandemic.

What strategies has the AAA used to retain staff and volunteers to ensure well-being during the pandemic?

Vintage has fostered a high-trust environment where individual team member's voices are valued. Vintage staff members believe their ideas and value are welcome and integral in the mission. Trust is not only essential for keeping staff happy and reducing costly turnover; it can also be a key driver of innovation and high performance. Organizations that trust and engage employees in decision making, provide them autonomy to do their jobs, and develop their skills, benefit from higher productivity and less staff burnout and turnover.

- Weekly team zoom calls include time to talk about struggles, wins for the week, and processing difficult situations/clients. We also brought back team brainstorming days where we meet in person and have time to vision, talk, decompress and process.
- Weekly check-ins with individual team members
- Disseminating online webinars and training that deal with managing stress and self-care. Encouragement to pursue professional development.
- Encourage employees to prioritize time off and self-care
- Encourage therapy/counseling through employee benefits package
- Flexible hours, ability to work from home, and culture that supports people where they are
- Wellness challenge (people who complete the wellness challenge of their choice receive a paid day off)
- Listening skills and creating a safe place for hard discussions
- Trust and respect

Emily Nagoski, the author who wrote *Burnout: The Secret to Unlocking the Stress Cycle* with her sister, Amelia Nagoski, talk about how self-care can treat some of the symptoms of burnout, but it can't cure the disease itself. They suggest a few practical tips on how not to be burnt out, and the Vintage team strives to embody these:

- Wellness is not a state of being, but a state of action. It is the freedom to move through the cycles and oscillations of being human from stress to relaxation and back, from effort to rest and back, from connection to autonomy and back.
- When you are feeling exhausted and overwhelmed, chances are what you need is rest. You can't always get it, but it's important to notice that the problem is not that your body or mind is "failing" but that it's starving for rest. Explore your environment for strategies to add a little more rest to your life and ask for help.
- Listen to your body. Learn what signals it sends when it's in distress. When it sends those signals, trust it, and give it what it needs. That need will usually be some form of body movement, loving connection, rest, or creative self-expression.
- Women and people of color do not need more productivity tools, they do not need more "grit," they need more help. Give it to them.

How was the AAA able to use the current and previous stimulus funding to respond to community needs?

Vintage is using the stimulus funding to continue contracts with current providers, and help absorb some of service-delivery cost increases attributed to inflation

Are there any services and/or service locations that have been permanently stopped or closed as a result of the pandemic?

- The two congregate meal sites in Grand County closed due the pandemic. One of the meal sites never reopened and the other shuttered permanently in December 2022.
- There are other services that have suffered, but not closed, as a result of the pandemic. The number of volunteers hasn't come back to pre-pandemic levels. Our providers have found it's far harder to hire and retain staff, because the cost of housing has increased (in an already unaffordable region) since the pandemic. The cost of labor has increased as well. While many of the providers make it work with the resources at their disposal, it's created strain and anxiety in a post-pandemic world.

SECTION VII: EQUITY

Through SB-290 funding, Vintage procured \$25,000 to hire an Equity, Diversity, and Inclusion (EDI) consultant to both audit Vintage and train and support staff to build an innovative, future-ready culture that embraces diversity at every stage. While the consultant will best determine the objectives and measures to demonstrate our progress towards building equity and inclusion, we believe that components will include goal setting, creating an inclusive and affirming workplace and environment for clients, fostering equity, and building resilience.

Vintage is proud to be an anti-ageist organization and looks forward to further integrating and growing our equity work. Vintage believes in and strives for:

Equity for all older adults

• EDI work is a source of strength, resilience, and hope for transforming aging and longevity

Older adults who have been marginalized deserve to be treated with respect and have equitable access to programs and services that lead to optimal quality of life

- Support ongoing learning for staff and providers to promote EDI competency
- Utilize tools to collect and analyze data that expose the differential experiences of older adults

Advocacy for equitable policies and legislation

• Encourage the development and implementation of public policies that support a high quality of life for Coloradans and their families by promoting health and wellbeing, reducing health disparities, fostering self-sufficiency, creating livable communities, and supporting Coloradans across the life course and into later life

Equity across the lifespan improves outcomes in later life

• Social Determinants of Health are described by the World Health Organization as the conditions in which people are born, grow, work, live and age, and the set of forces and systems shaping the conditions of daily life. Social and environmental factors have been found to initiate the onset of health problems and serve as a direct cause for a number of chronic conditions.

Per the Lifelong Colorado Plan, the eight domains of livability are the building blocks for a livable community and are based on social determinants of health.



"The COVID-19 pandemic significantly impacted all Coloradans and all of our communities. At the same time, we know that the pandemic has been particularly difficult on black, indigenous, people of color, low wage earners, persons with disabilities, and older Coloradans. Social and economic inequities have been exacerbated and these inequities have a compounding effect on health outcomes over an individual's life.

This compounding effect is most clear in later life where we see the gap between health span and life span develop, and we see trends related to chronic disease prevalence become clear. Addressing health and social equity at the community-level was important pre-pandemic, and it should be central to policy planning as we

transition to the new normal and retool our communities."

"We see an opportunity to build on our efforts to address long-standing disparities in health, economic security, and quality of life — and to redouble our efforts to combat racism and ageism. All people should have access to the resources, services and support that empower them to live a life in dignity, good health and purpose — regardless of age, race or income."

- Jo Ann Jenkins, AARP CEO

SECTION VIII: QUESTIONS

Services

What service/services are the highest priority in the Region and why are these services prioritized?

Services that support older adults to live in place are the highest priority in the region. This is the first goal in the Lifelong Colorado Plan (*Coloradans will be able to live and fully participate in their communities of choice as they age*) and is supported by the local data from both the CASOA and Community Conversations. This includes, but isn't limited to:

- Chore and home modification programs
- Transportation
- Information and outreach around services at the community level
- Educating local elected officials of the importance of ensuring a population aginglens is applied across all programs and services to support older adults
- Assisting existing programs and partners to increase access to food and nutrition services

An additional focus that isn't a particular service, but rather a foundational part of all the Vintage services, is continued work to promote equity, diversity, and inclusion within the region. This includes promoting the value of older adults, fighting ageism, empowering older adults, and providing a platform for social good.

What is the workforce and volunteer capacity in the Region relative to the need?

The cost of living in Region 12 has decreased the number of individuals available to work, especially at an hourly rate. This has made it very difficult to find employees for our providers with lower-wage transportation and nutrition related jobs. Other companies and organizations that provide aging services have found a similar issue with employment and in-home care providers and long-term care facilities in the region constantly struggle to attract and retain employees.

The number of volunteers in the region dropped dramatically at the onset of the pandemic, and although many volunteers have returned to their previous work, there is still a dearth of volunteers willing to drive older adults, particularly to appointments outside of their county of residence.

What is your current process for monitoring providers and what plans do you have to update it and improve over the next 4 years?

We use an online Chocolate Software module that allows providers to answer evaluation questions and upload supporting documentation on a HIPAA-secure, cloud-based program. Questions are formed through a review of the Policy & Procedure Manual (P&P), Volume X, and the contract with the SUA and our providers. The questions are updated annually to reflect changes and additions to the P&P, new requirements, and any changes to the law. This has streamlined the process and works well for both Vintage and the providers. Once the online evaluation questions have been answered and documentation submitted and reviewed, Erin Fisher, Vintage's Director, meets each provider at their office and reviews the evaluation and follows up with correction plans as needed.

What services currently have a waitlist? What is the process for monitoring the waitlist and how are individuals prioritized to receive services?

Our voucher programs – transportation, in-home services, dental/vision, and caregiver services – usually run a waitlist. The process to monitor the waitlist is a detailed excel spreadsheet that is reviewed monthly to ensure accuracy and that any clients who have been on the waitlist for six months are contacted to determine if the service is still needed or desired. Individuals are prioritized through a SUA approved worksheet that scores individuals based on OAA targeting criteria, Activities of Daily Living (ADLs), Instrumental Activities of Daily Living (IADLs), and income.

Ombudsman and Legal Assistance

What long-term care issues would you like the State Ombudsman to give priority to as a systems advocate during the next four years?

Vintage's Regional Long Term Care Ombudsman would like the State Long Term Care Ombudsman Program (SLTCOP) to advocate for the increase of training and competency requirements for Certified Nurse Assistants (CNAs) who work with individuals living with dementia. This is important as The National Consumer Voice for Quality Long-Term Care issued a brief that stated "CNAs provide the most direct care to nursing home residents, helping with personal care services such as transfers, ambulation, and assistance with eating and toileting." Vintage's Regional Long Term Care Ombudsman observed on multiple occasions staff members working in memory care communities that appear to have limited training on working with individuals living with a form of dementia.

Based on recommendations from the Regional Ombudsman, Vintage would also like the SLTCOP to advocate that long term care facilities be responsible to inform and educate residents regarding new regulations that impact their rights. The recent legislative change that gives those living within the Assisted Living Communities (ALR) the right to appeal a discharge is a positive change in facility requirements, and it increases and strengthens residents' rights. However, there is concern that the information is not being disseminated to the residents and their representatives.

In addition to resident council meetings, family council meetings, and presentations to the community, what other activities will the local Ombudsman participate in during the next four years to educate the community regarding long-term care (LTC) ombudsman services?

- Provide five presentations about the LTC Ombudsman program to the region's county Human Service departments (Grand County Human Services runs Jackson County)
- Provide five presentations about the LTC Ombudsman program to the region's county Adult Protection Teams (Grand County APS runs Jackson County)
- Provide four education and outreach presentations about the LTC Ombudsman program to the region's community groups and organizations
- Write four articles about the LTC Ombudsman program to be disseminated in Vintage's enewsletter during National Residents' Rights Month
- Coordinate with Vintage for Four World Elder Abuse Awareness Day activities

How will the AAA prioritize legal assistance in the form of advice or representation from the Legal Assistance Program during the next four years for cases related to cases identified in the Older Americans Act, including income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect, and age discrimination? Vintage contracts with two legal services providers – Alpine Legal Services and Colorado Legal Services. Vintage will support their efforts and prioritize the following based on the providers' own goals:

Alpine Legal Services (ALS)

ALS believes housing is key to all other forms of stability for older adults and has thus hired a bilingual and bicultural attorney to focus on housing rights for older adults. They are seeing an increase in unlawful evictions against older adults who have a right to maintain their housing but have property managers who are using aggressive eviction tactics based on the advice of attorneys unfamiliar with federal housing laws. Over the next four years, ALS will develop community awareness of housing rights for older adults through their monthly Spanish legal column in the local *Sopris Sun* newspaper, in addition to "Know Your Rights" seminars. They will also develop legal training for housing authorities and property managers who utilize federal housing subsidies, to minimize the risk of unlawful evictions and the unnecessary loss of much-needed housing vouchers for older adults.

Colorado Legal Services (CLS)

Priorities for service will focus on seniors in greatest economic and/or social need, with particular emphasis on isolated and rural seniors, as well as seniors with disabilities, language barriers, or issues involving abuse or neglect. Legal Assistance will include advice, brief services such as negotiations or preparation of documents, representation, and evaluation for possible referrals to other appropriate sources of assistance such as governmental regulatory agencies. Legal Assistance will be provided after evaluation of the law and the facts of the case to prioritize severity of need where effective legal intervention can ameliorate the legal situation.

- Cases involving loss of income will focus on public benefits (representation in or advice on cases contesting denial, termination or reduction of benefits) and wage thefts (referrals to governmental agencies who respond to wage issues and advice on pursuit of small claims court cases)
- Long-term care priorities will include defense against threatened loss of housing or protection from abuse/neglect
- Nutritional issues will focus on cases involving denial, termination or reduction of benefits including SNAP (food stamps) or other benefits
- Housing issues will prioritize defense of evictions and foreclosures and assistance with warranty of habitability cases
- Utility cases will focus on nonpayment/termination of service issues with advice, brief service including negotiations, and referrals to government agencies responsible for regulation of public utilities
- Protective services cases will prioritize representation in family law protection order cases and other abuse/neglect situations
- Defense of guardianship will focus on cases involving possible financial exploitation, abuse or neglect
- Age discrimination cases will focus on referrals to agencies specializing in lawsuits concerning age discrimination issues and advice and analysis of cases.

What challenges does the AAA anticipate to ensuring that the local Legal Assistance provider is able and willing to provide representation for these issues and how will the AAA address these challenges?

Alpine Legal Services (ALS)

ALS anticipates issues with staff retention and burnout. The demand for services from older adults, especially those facing homelessness, is increasing at a higher rate than their ability to meet the demand. Older adults who do not feel cared for and do have a sense of belonging in their communities, are facing mental health challenges that legal assistance providers are not equipped to fully address, yet they have not identified sufficient resources for older adults to access for mental health support. Over the next four years, ALS plans to address these challenges by increasing salaries and benefits (such as counseling) for direct services staff, and by expanding their knowledge of mental health resources available for older adults (remote and in-person; low cost and no-cost).

Colorado Legal Services (CLS)

CLS has a Denver-based Specialty Unit that focuses on Health/Elder law issues. CLS currently serves the majority of the Title III Area Agencies on Aging of Colorado through its 13 local offices and is able to draw upon a staff of approximately 150, including over 75 attorneys, to assist with legal issues throughout the state. Legal Assistance is provided both by staff attorneys and by private attorneys who donate their time to assist with CLS cases. Individual CLS offices may face

situations where their attorney resources are limited, but CLS prioritizes cases in which the severity of need, and the probability that attorney assistance will favorably impact the outcome of the case, are high. Vintage anticipates that CLS will be able to prioritize the most serious needs of seniors while also assisting seniors through advice and brief representation in less severe legal matters. CLS does not represent plaintiffs in lawsuits, which limits its ability to address age discrimination cases. However, both private attorney firms and agencies as well as state government agencies address this issue.

Other Services

What are the AAA's plans related to providing evidence-based health promotion or disease prevention programs?

Currently, the entirety of Vintage's federal evidence-based health promotion funding goes to one provider serving Routt County. It has been incredibly challenging to locate qualified individuals to provide these services, but ideally, Vintage will contract with more providers throughout the region. The reporting, insurance, and certification requirements are generally more than individuals want to take on, so it leaves a smaller number of organizations who have not been very interested in providing the programs in the past.

In addition to funding received through the Older Americans Act (OAA) and State Funding for Senior Services (SFSS), what other funds are received by the AAA to provide services for older adults?

- The <u>State Health Insurance Assistance Program (SHIP)</u> through the Colorado Department of Regulatory Agencies
- <u>Colorado Dental Health Care Program for Low-Income Seniors</u> through the Colorado Department of Health Care Policy and Financing
- SB290 funding (limited, one-time funding)

Targeting and Outreach

What are some successes the AAA has used that improved access and utilization of services by individuals who are at greatest social and or economic need?

- Vintage hired a full-time, bilingual staff member who has not only ensured that all marketing material and outreach is available in English and Spanish, but has also created relationships and formed trust with Spanish speaking older adults and caregivers in the region. This includes starting and maintaining monthly, in-person meetings with Hispanic older adults at an Eagle County meal site.
- By contracting with the Colorado Department of Health Care Policy & Financing to provide the Dental Health Care Program for Low-Income Seniors who are economically disadvantaged.

• We make every effort to include an American Sign Language interpreter at our inperson events and ensure that our documents, from marketing to assessment forms, are accessible for individuals with low vision.

What strategies will the AAA use to raise awareness of the services provided over the four years of the Area Plan to target populations?

During the last Area Plan (SFY 2020-2023), Vintage made great strides in raising awareness both to the general public and to target populations. The transition to Vintage from the Alpine Area Agency on Aging was rooted in the desire for greater brand recognition so that individuals would "get to know us before they need us." Additionally, we created and continue to maintain a Facebook page, created a website, and started a monthly enewsletter in both English and Spanish.

- Vintage will continue to form relationships and trust with Spanish-speaking older adults and their caregivers, through culturally sensitive outreach materials and presentations
- Vintage will create new partnerships and collaborate with faith-based organizations

Innovation and Expansion of Services

What type of innovations is the AAA planning to try during the next four years to improve the quality and availability of services provided or funded by the AAA?

- Additional consumer-directed vouchers as funds become available, for example, a permanent hearing aid voucher.
- A deep dive into Equity, Diversity, and Inclusion work at both the AAA level and throughout our region.
- Additional targeted partnering in other agencies who we haven't typically partnered with in the past (ex: food banks).
- Additional investments with County public health and human service partners

What plans do you have to measure the effectiveness, efficiency, and outcomes of your programs and services?

Vintage will use the state database, SUDS, to pull reports and analyze data based on our goals and objectives. This will include:

- Tracking and analysis of client demographic data of program participants
- Securely storing participant needs, assessments, and history information
- Monitoring attendance of events and presentations
- Identification and tracking of key trends

SECTION IX: TITLE III / VI COORDINATION

Not Applicable

SECTION X: ADDITIONAL PRIORITIES IDENTIFIED

Although the Lifelong Colorado Plan has been mentioned multiple times throughout this Area Plan, we would like to reiterate our commitment to and support of this guiding document. Just as aging doesn't occur in a vacuum, it would be imprudent to not align our local goals and objectives with the state goals. Our additional priorities identified correspond with the eight goals outlined in the document:

- **Goal 1:** Older Coloradans will be able to live and fully participate in their communities of choice for as long as possible.
- **Goal 2:** Older Coloradans will be able to stay engaged in the labor force and volunteer sector for as long as they want or need.
- **Goal 3:** Older Coloradans and their families will be more financially secure and prepared to meet the challenges of aging.
- **Goal 4:** Coloradans will be prepared for the challenges of caring for an aging loved-one and will be able to do so without endangering their own health or well-being or the health and well-being of the recipient of care.
- **Goal 5:** There will be enough skilled, educated, and trained workers, paid commensurate with their abilities and training, to meet the needs of the employers and industries serving Colorado's growing older adult population.
- **Goal 6:** Older Coloradans will stay healthier longer through access to quality and affordable person-centered care that aligns with their preferences and values.
- **Goal 7:** All levels of government will meet their commitments to support older Coloradans and their families.
- **Goal 8:** Colorado will empower and protect older adults from abuse, neglect, and exploitation.

SECTION XI: FORMS

- Worksheet A: Direct Service Waiver Request Attached
- Worksheet B: Nutrition Services Attached
- Worksheet C: Community Focal Points and Senior Centers Attached
- Worksheet D: Regional Advisory Council Membership Attached
- List of Acronyms Attached

Worksheet A: Direct Service Waiver Request

Vintage requests direct service waivers for the direct services listed below:

- 1. Material Aid
- 2. In Home Services of Homemaker, Chore, & Personal Care
- 3. Counseling
- 4. Education & Outreach
- 5. Evidence Based Disease Prevention & Health Promotion
- 6. Information & Assistance & Public Information
- 7. National Family Caregiver Support Program

In preparation for this request, Vintage conducted a public hearing on November 16th, 2022, notified interested parties of the public hearing and furnished the interested parties with the opportunity to testify. Public Notices ran in the following newspapers:

- Sky-Hi News November 2, 2022
- Aspen Times– November 2, 2022
- Vail Daily November 2, 2022
- Summit County Journal & Summit County Daily News- November 4, 2022
- Steamboat Pilot & Today November 2, 2022

By requesting direct service waivers, Vintage does not necessarily intend to solely provide these services within the region. Many of these services are currently subcontracted to providers as they can effectively and expertly provide these services at the local level. Vintage also already provides these services internally for the region through Consumer Directed Vouchers with the trained and knowledgeable AAA staff.

Material Aid

Description of the direct service: aid in the form of goods or food such as direct distribution of commodities, surplus food, and distribution of clothing, smoke detectors, eyeglasses, hearing aids, oral health, or security devices, etc.

- Vintage requests the following service subtypes:
 - Audiology/Hearing Aids
 - o Dental/Dentures/Oral Treatment
 - Emergency Assistance
 - Glasses/Contacts/Optometry
 - Prescription Subsidy

Organizational structure: Vintage has been the direct provider of Material Aid for Region 12 since 1999 and provides the program regionally. Vintage has a record of effective and efficient delivery of Material Aid, the ability to promote this service to eligible older persons in all six counties in the region, and meet the programmatic and fiscal requirements.

Planned methods of program services delivery: Material Aid services are provided through a person-

centered approach using a client-directed voucher. Clients sign a Release of Liability and choose the provider they desire. Eligible older adults receive a financial voucher towards the cost of the service to address their identified need(s). This approach values choice and the older adult selects their provider in a manner responsive to the needs and preferences of older individuals. Vintage evaluates and prioritizes assessments to ensure funds are used to serve the target populations in greatest need to assist those eligible individuals whose health, safety and welfare may be at risk.

In-Home Services of Homemaker, Chore, & Personal Care

Description of the direct service:

- *Homemaker* services provides assistance to persons who meet the eligibility requirements for in-home services and who are unable to perform two or more of the following instrumental activities of daily living: preparing meals, laundry, shopping for personal items, managing money, using the telephone, or doing light housework.
- *Chore* services are designed to increase the safety of older adults living at home such as assistance with heavy housework, yard work or sidewalk maintenance. Chore service activities are one-time, seasonal, or occasional in nature, and shall be planned with input from the older adult based on an evaluation of the older adult's strengths and needs, and the degree of physical and/or cognitive impairment of the older adult.
- *Personal Care* services provide personal assistance, stand-by assistance, supervision, or cues for persons who meet the requirements for in-home services.

Organizational structure: Vintage has been the direct provider of the in-home services voucher for Region 12 since 2019. The need for in-home services was identified in the SFY 19-23 Area Plan as one of the top three needs in the region, thus launching the program. Vintage currently provides homemaker, chore, and personal care services regionally through consumer directed vouchers. Vintage has a record of effective and efficient delivery of the in-home services voucher program, the ability to promote this service to eligible older persons in all six counties in the region, and meet the programmatic and fiscal requirements.

Planned methods of program services delivery: In-home services are provided through a personcentered approach using a client-directed voucher. Clients sign a Release of Liability and choose the provider they desire. Eligible older adults receive a financial voucher towards the cost of the service to address their identified need(s). This approach values choice and the older adult selects their provider in a manner responsive to the needs and preferences of older individuals. Vintage evaluates and prioritizes assessments to ensure funds are used to serve the target populations that are in greatest need to assist those eligible individuals whose health, safety and welfare may be at risk.

Direct Service Waiver Request: Counseling

Description of the direct service: the provision of advice or support to assist older adults to address issues, concerns, or make decisions.

Organizational structure: Vintage has provided counseling services regionally since 2015 through Vintage (Region 12 AAA) | SFY2024-2027 Area Plan 44 the State Health Insurance Assistance Program (SHIP) which provides free, unbiased information and counseling to Medicare beneficiaries. Vintage has a record of effective and efficient delivery of SHIP Medicare counseling, the ability to promote this service to eligible older persons in all six counties in the region, and meet the programmatic and fiscal requirements. The program is funded by State Funding for Senior Services and a Colorado Department of Regulatory Agencies (DORA) grant.

Planned methods of program services delivery:

- The SHIP Medicare program has a cadre of highly trained volunteers throughout the region. They are supported by Vintage's full-time SHIP Medicare Coordinator.
- One-to-one consultation and assistance with Medicare benefits.
- Targeted outreach to older adults who receive Medicare to assist them with accessing benefits and Extra Help to which they are entitled.
- Medicare presentations held throughout the region.

Education & Outreach

Description of the direct service:

- *Education* is a supportive service designed to assist older adults to better cope with their economic, health, and personal needs through services such as consumer education, continuing education, health education, falls prevention education, medication management education, pre-retirement education, financial planning, and other education and training services which advances the objectives of the Older Americans Act.
- *Outreach* is intervention with individuals initiated by an agency or organization for the purpose of identifying potential clients (or their caregivers) and encouraging their use of existing services and benefits.

Organizational structure: Vintage currently provides Education and Outreach Services to older adults and caregivers through conferences and educational events across the region. While most events went virtual during COVID, Vintage has a long history of partnering with regional aging, financial, legal, and caregiving experts to help host events like Senior Law Day, caregiver trainings, end-of-life trainings and behavioral health presentations. These events provide client education, as well as an opportunity to gather local resources and connect socially to solidify Vintage as the collaborative regional experts on aging.

Planned methods of program services delivery:

Vintage reduces barriers to participation by partnering with local senior centers to advertise, secure transportation, and ensure venues are accessible. Educational topics are developed based on client request through prior event surveys, precise understanding of regional aging and caregiver issues, as well current and culturally sensitive "hot topics" in aging. When possible, events are accessible for those who speak Spanish and American Sign Language (ASL). Outreach efforts inform older individuals and the caregivers of the availability of the services and assistance available in Region 12 under the Older Americans Act and identify individuals eligible for services and assistance. Vintage places special emphasis on targeted populations. Vintage partners with agencies outside the traditional aging services network to further advance outreach efforts to older adults.

Evidence-Based Disease Prevention & Health Promotion (EB)

Description of the direct service: a program that meets the current definition of evidence-based disease prevention and health promotion as defined by the Administration on Aging and has:

- Demonstrated through evaluation to be effective for improving the health and wellbeing or reducing disease, disability and/or injury among older adults
- Proven effective with older adult population, using Experimental or Quasi-Experimental Design
- Research results published in a peer-review journal
- Been fully translated in one or more community sites
- Developed dissemination products that are available to the public

ACL's criteria for Evidence Based Programs can be found here:

https://www.ncoa.org/article/guidelines-for-operationalizing-acl-criteria-for-evidence-basedprograms

NCOA Approved Evidence Based Programs can be found here: <u>https://www.ncoa.org/evidence-based-programsOrganizational structure</u>

Planned methods of program services delivery:

Currently, Vintage subcontracts for Evidence Based programs with the entirety of the Title III Part D funding that is specific to these services.

Should a NCOA approved Evidence Based program become available for Vintage to provide internally, the waiver will allow this to complement the current in-person EB classes at the county level.

Information & Assistance & Public Information

Description of the direct service:

- Information and assistance is a service that:
 - Provides individuals with information on available services
 - Links individuals to available services and opportunities
- *Public Information* provides the public and individuals with information on resources and services available to consumers within their communities. Service units for information services are for activities directed to large audiences of current or potential caregivers such as disseminating publications, conducting media campaigns, and other similar activities.

Organizational Structure: Vintage serves as the advocate and focal point for older individuals within Region 12. Vintage has provided for the availability and distribution of information across the region relating to the full range of available public and private services and assistance, long-term care programs, options, service providers, and resources.

Planned methods of program services delivery:

Information and Assistance services provide individuals and their caregivers with accurate and timely information. Vintage staff provide information and assistance over the phone, in-person, and via email to the local community, including referrals to local service providers, and guidance to older adults and their families on community resources and tips on how to access them. One Vintage team member is bilingual and assists Spanish-speaking individuals.

Vintage also provides referrals for health services, behavioral health, employment and volunteer opportunities, housing, legal, transportation, and other services. Information and assistance services and Public Information are directly related to Area Agency on Aging's administrative services.

Public information services direct timely, relevant, and community-focused information to older adults across the region. Vintage will continue to use its <u>website</u> to target English as a Second Language populations through its translation option, as well as encourage the use of the website's ADA accessibility features. Vintage also maintains a <u>Facebook</u> account, <u>blog</u>, and a monthly <u>e-newsletter</u> called The Momentum that consistently disseminates information throughout the region.

National Family Caregiver Support Program (NFCSP)

Description of the direct service:

NFCSP provides services to caregivers who assist older adults, as well as grandparents over age 55 raising grandchildren. Services provided to caregivers through the NFCSP fall into five categories:

- Information about available services
- Assistance in gaining access to supportive services
- Individual counseling, organization of support groups, and training to assist in making decisions and solving problems
- Respite care to enable caregivers to be temporarily relieved from their caregiving responsibilities

Organizational structure: Vintage has been the direct provider of NFCSP for Region 12 since 2000 and the impetus of the program.

Vintage has a record of effective and efficient delivery of caregiver programs, the ability to promote this service to eligible older persons in all six counties, in the region and meet the programmatic and fiscal requirements.

Planned methods of program services delivery: Caregiver services are provided through a personcentered approach using a client-directed voucher. Caregivers sign a Release of Liability and choose the provider they desire or the service they need. Eligible caregivers receive a financial voucher towards the cost of the service or product(s) to address their identified need(s). This approach values choice in a manner responsive to the needs and preferences of caregivers and their care recipients. Vintage evaluates and prioritizes assessments to ensure funds are used to serve the target populations that are in greatest need to assist those eligible individuals whose health, safety and welfare may be at risk.

Vintage remains committed to providing the family caregiver support services as efficiently and

cost-effectively as possible. Vintage partners with Garfield Senior Services and Northwest Options for Long-Term Care to host an annual Caregiver Conference. Through this conference, Vintage delivers caregiver education and resource information to a large majority of caregivers across the region, without duplicating efforts of other aging providers in the network.

Nutrition Services (Material Aid - Food/Congregate/Home Delivered Meal Programs) As of March 2023

		Which programs operate out of this location?					Which days of the week are meals served? LIST DAYS OF THE WEEK				
		Congregate	Home Delivered Meals	Grab-n-Go	Material Aid - Restaurant Voucher Program	Other Nutrition Service - Bountiful Baskets	Congregate	Home Delivered Meals	Grab-n-Go	Material Aid - Restaurant Voucher Program	Other Nutrition Service - Bountiful Baskets
Site Name Address City	Golden Eagle Senior Center 715 Broadway Eagle	x	x				T, Th	T, Th			
Zip Phone Email	81631 970-328-8896 carly.rietmann@eaglecounty.us	Â	~				1,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Site Name Address City Zip	El Jebel Community Annex Building 0020 Eagle County Drive, Suite E El Jebel 81623	x	х				T, Th	T, Th			
Phone Email Site Name	970-379-0020 mandi.dicamillo@eaglecounty.us Vail Ski and Snowboard										
Address City Zip	Academy/Maloit Park Senior Space 1 Academy Loop, Room 105 Minturn 81645 070 20, 8031	x	x				W, F	W, F			
Phone Email Site Name	970-328-8831 pat.nolan@eaglecounty.us Grand County Public Health										
Address City Zip Phone	150 Moffat Ave Hot Sulphur Springs 80451 970-725-3288				x					Weekly	
Email Site Name Address	abaker@co.grand.co.us Mountain Family Center 480 E Agate Avenue										
City Zip Phone	Granby 80446 970-557-3186					x					Weekly
Email Site Name Address City	katie@mountainfamilycenter.org Jackson County Council on Aging 312 5th Street Walden									Di Monthlu	
Zip Phone Email	80480 970-723-3203 admin@jccoa.net				X					Bi-Monthly	
Site Name Address City Zip	Pitkin County Senior Services 275 Castle Creek Road Aspen 81611	x	x	x			M, W, Th, F	M, W, Th, F	M, W, Th, F		
Phone Email Site Name	970-920-5432 chad.federwitz@pitkincounty.com Steamboat Springs Community										
Address City Zip Phone	1605 Lincoln Avenue Steamboat Springs 80487 970-879-0633	x	x				M, T, Th, F	M, T, Th, F			
Email Site Name Address	april@rccoaging.org South Routt Community Center 227 Dodge Street										
City Zip Phone Email	Oak Creek 80467 970-879-0633 april@rccoaging.org	x	x				M, W, F	M, W, F			
Site Name Address City	Haven Community Center 300 S Shelton Lane Hayden	x	x				T, Th	T, Th			
Zip Phone Email	81639 970-879-0633 april@rccoaging.org										

COMMUNITY FOCAL POINTS AND SENIOR CENTERS

210	T ALL FOCAL POINTS AND SENIOR CENTERS INCLUDING NUTRITION SITES IF			
			CK IF FACIL	·
		A FOCAL POINT	A SENIOR CENTER	FUNDED THROUGH
		POINT	CENTER	TITLE III-B
				or SFSS
Site Name	Californ Facels Courton	v	v	Both
Address	Golden Eagle Senior Center 715 Broadway	x	x	both
City	Eagle			
Zip	81631			
Phone	970-328-8896			
Email	carly.rietmann@eaglecounty.us			
				Both
Site Name	El Jebel Community Annex Building	x	x	Dotti
Address	0020 Eagle County Drive, Suite E			
City	El Jebel			
Zip	81623			
Phone	970-379-0020			
Email	mandi.dicamillo@eaglecounty.us			
Site Name	Vail Ski and Snowboard Academy/Maloit Park Senior Space		х	Both
Address	1 Academy Loop, Room 105			
	Minturn			
City	81645			
Zip				
Phone	970-328-8831			
Email	pat.nolan@eaglecounty.us			
Site Name	Mountain Family Center	х		Both
Address	480 E Agate Avenue			
City	Granby			
Zip	80446			
	970-557-3186			
Phone				
Email	grandseniors@mountainfamilycenter.org			Poth
Site Name	Jackson County Council on Aging	х	х	Both
Address	312 5th Street			
City	Walden			
Zip	80480			
Phone	970-723-3203			
Email	admin@jccoa.net			
Site Name	Pitkin County Senior Services	х	х	Both
Address	275 Castle Creek Road			
City	Aspen			
Zip	81611			
Phone	970-920-5432			
Email Cita Nama	chad.federwitz@pitkincountv.com			Deth
Site Name Address	Steamboat Springs Community Center	×	x	Both
City	1605 Lincoln Avenue Steamboat Springs			
Zip	80487			
Phone	970-879-0633			
Email	april@rccoaging.org			
Site Name	South Routt Community Center		х	Both
Address	227 Dodge Street		I	
City	Oak Creek			
Zip Dhone	80467			
Phone Email	970-879-0633		<u> </u>	
Site Name	april@rccoaging.org Haven Community Center		x	Both
Address	300 S Shelton Lane			
City	Havden			
Zip	81639			
Phone	970-879-0633			
Email	april@rccoaging.org			
Site Name	Summit County Community & Senior Center	x	x	Both
Address	83 Nancy's Place			
City	Frisco 80443			
Zip Phone	970-668-2940			
Email	lorie.williams@summitcountyco.gov			

REGIONAL ADVISORY COUNCIL MEMBERSHIP

NAME	ORGANIZATION AFFILIATION					
Eagle County						
Karen Eyrich	Community Representative					
Jacki Schempf	Community Representative					
Geni Garcia	Community Representative					
Nancy Wright	Community Representative					
Carly Rietmann	Eagle County Healthy Aging					
Grand County						
Lesley Janusz	Community Representative					
Katie Stuvel	Mountain Family Center					
Jackson County						
Terry Myers	Community Representative					
Ann Carlstrom	Community Representative					
Tootie Crowner	Community Representative					
Wendy Petefish	Jackson County Council on Aging					
Pitkin County						
Debbie Overeynder	Community Representative					
Commissioner Steve Child	NWCCOG Council Representative					
Chad Federwitz	Pitkin County Senior Services					
Routt County						
Catherine Lykken	Community Representative					
Jim McGee	Community Representative					
Leigh Hull	Community Representative					
April Sigman	Routt County Council on Aging					
Summit County						
Laurel Wilkerson	Community Representative					
Lorie Williams	Summit County Community & Senior Center					

Total number of members who are low income: 4 Total number of members who are minority: 1 Total number of members who are 60+: 12

Acronyms in the Area Plan

Planning and Service Area (PSA)

AAAs are primarily responsible for a geographic area, also known as a planning and service area (PSA), that is either a city, a single county, or a multi-county district. There are 16 PSAs in Colorado, and Vintage is in the Region 12 PSA in Colorado, covering Eagle, Grand, Jackson, Pitkin, Routt, and Summit Counties.

Area Agency on Aging (AAA)

A public or private nonprofit agency designated by a state to address the needs and concerns of all older persons at the regional and local levels. AAA is a general term — names of local AAAs may vary. The name of the Region 12 AAA is Vintage.

Community Assessment Survey for Older Adults (CASOA)

The data from the CASOA summarizes the key dimensions of community livability, drawn from the perspectives of older adults themselves. This national benchmarking survey also compares the responses of older adult residents in your jurisdiction to the opinions of others across the country.

State Unit on Aging (SUA)

Oversees programs funded by the federal Older Americans Act and State Funding for Senior Services. The unit provides assistance and funding to 16 local Area Agencies on Aging to provide community-based services to seniors age 60 years and older and caregivers.

Northwest Colorado Council of Governments (NWCCOG)

A voluntary association of county and municipal governments serving 30 member jurisdictions in a 6-county region of northwest Colorado. The parent organization of Vintage.

Regional Advisory Committee (RAC)

Consists of laypersons and service providers who represent the interests of older adults in Region 12 and advocate on their behalf. The RAC reviews agency outreach, long-term planning, programs, and service delivery that affect older adults. The RAC encourages and supports the involvement of older Coloradans in sharing their views on these policies and programs.

Older Americans Act (OAA)

Created by Congress in 1965 in response to concern by policymakers about a lack of community social services for older persons. The original legislation established authority for grants to states for community planning and social services, research and development projects, and personnel training in the field of aging. Today the OAA is a major vehicle for the organization and delivery of social and nutrition services to this group and their caregivers.

Administration for Community Living (ACL) is part of the United States Department of Health and Human Services. It is headed by the Administrator and Assistant Secretary for Aging, who reports directly to the Secretary of Health and Human Services (HHS).

State Funding for Senior Services (SFSS)

Monies contracted to AAAs to provide community-based and advocacy services to eligible persons to assist such persons to live in the least restrictive environment.

Policy and Procedure Manual (P&P)

AAAs "how to guide" resource from the SUA that clarifies and explains the expectations for agency staff when they have a question about a Rule or statute.

Volume X

The tenth volume in the Code of Colorado Regulations 500-Department of Human Services that details the rules for Older Americans Act programs.

Colorado Department of Human Services (CDHS)

Connects people with assistance, resources, and support for living independently in Colorado. Colorado has a state-supervised and county-administered human services system and under this system, county departments are the main provider of direct services to Colorado's families, children, and adults.

Colorado Department of Health Care Policy & Financing (HCPF)

Administers Health First Colorado (Colorado's Medicaid program), Child Health Plan Plus, and other health care programs in the state.

Lifelong Colorado Plan

An initiative and plan that is a collection of state, regional, and local strategies that support aging in the community. It is the vehicle for moving aging efforts forward in Colorado and livable community efforts are a critical piece of the puzzle.

Equity, Diversity, and Inclusion (EDI)

Ensures fair treatment and opportunity for all. It aims to eradicate prejudice and discrimination on the basis of an individual or group of individual's protected characteristics.

Social Determinants of Health (SDoH)

The conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.

The Health Insurance Portability and Accountability Act of 1996 (HIPAA)

A federal law that required the creation of national standards to protect sensitive patient health

information from being disclosed without the patient's consent or knowledge.

State Long Term Care Ombudsman Program (SLTCOP)

Advocates for residents of skilled nursing homes and licensed assisted living residences. The primary purpose of the LongTerm Care Ombudsman Program is to promote and protect the residents' rights guaranteed these residents under federal and state law.

Activities of Daily Living (ADLs)

Activities related to personal care. They include bathing or showering, dressing, getting in and out of bed or a chair, walking, using the toilet, and eating.

Instrumental Activities of Daily Living (IADLs)

Represent key life tasks that people need to manage in order to live at home and be fully independent.

Certified Nurse Assistants (CNAs)

An entry-level member of a patient's healthcare team, performing important patient-centered tasks under the supervision of licensed nursing staff.

INFORMATION | RESOURCES | ADVOCACY

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