

Harney County Senior & Community Services Center 2021-2024 AREA PLAN

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SECTION A – AREA AGENCY PLANNING AND PRIORITIES

A – 1 Introduction:

Harney County Senior and Community Services Center (previously Harney County Senior Center)/AAA (Area Agency on Aging) is a non-profit organization established and incorporated in 1973. At the time of its inception The Center was to be a “one stop shop” for seniors in the community. With this goal in mind, all AAA services are directly provided by this organization. We also house and provide public transportation, CAP programs including housing, energy assistance and weatherization services; and the County Veterans Service Office. This Area Plan is developed to address the needs of our growing population of seniors and those with disabilities, finding ways to provide service to meet needs and funding requirements.

The Center gets a great deal of support and match donations from Harney County. Harney County pays the salary of the Executive Director and donates the building and parking area rent free to provide services to its senior and disabled populations. The support of the county allows The Center to act as a focal point for the planning and coordination of a comprehensive service delivery system, designated to meet the needs of the sixty (60) years of age and over population, with emphasis on low-income minority individuals of any age in Harney County. We provide leadership for seniors, low income individuals and persons with disabilities through programs that enhance independence, dignity, choice, and individual well-being.

We have partnered with our regional Coordinated Care Organization, Greater Oregon Behavioral Health, Inc. (GOBHI) and local mental health provider, Symmetry Care, to provide services to Harney County. We are planning to offer WISE, Wellness Initiative for Senior Education, each spring in coordination with GOBHI when the limitations of COVID are relieved. We participate with community partners monthly, including GOBHI, Symmetry Care, Harney Health Department and DHS to discuss the most difficult and complex cases of seniors in our community.

Harney County’s Veteran Service Officer is trained to lead Living Well with Chronic Conditions. He partners with Symmetry Care’s Wellness Coordinator to provide this course for the community twice each biennium (prior to COVID). We recognize that this evidence based program encourages individuals to care for themselves and those around them in a way that can prevent disease and help manage the physical and emotional strain of chronic disease and those living with it. He has committed his limited time to this program to improve the wellbeing of the community including the veterans he case manages.

The SHIBA (Senior Health Insurance Benefits Assistance) program is sponsored on site. Between two and four volunteers are on site every Tuesday between 1-3p.m to answer questions and assist seniors with their insurance needs. During open enrollment from October 15 through December 7 the volunteers are at the center Tuesdays and Thursdays between 1 and 3 to assist. The SHIBA program in Harney County is recognized statewide as the most successful program in the State of Oregon. The program Coordinator, Richard Day is a dedicated volunteer who encourages others to devote time to this important work.

As the provider of public transportation for the county we are able to coordinate transportation needs of our clients with the other services we provide. We currently have grant funds from the Veteran's Administration to provide medical rides to our veterans for no cost to them. This program has been very successful and has allowed our veterans to obtain much needed medical service out of the area. Our transportation department provides rides for our head start program allowing at risk children the opportunity to get a head start on their education in a way that would otherwise not be available to them.

With the additional investment of funds from the state to transportation we have begun a deviated fixed route at no cost to the rider. This service has allowed many extremely low income individuals, including seniors, the opportunity to utilized transportation services in ways they previously were unable to afford.

We are the largest food pantry site in Harney County. We provide food for nearly 700 individuals in close to 230 households each month. We are also part of the statewide effort between Safeway and the Oregon Food Bank known as Fresh Alliance. Our volunteers pick up the pulled, perishable stock from Safeway and distribute it from our food pantry. The effort allows food that can't be sold to stay in the food network and go to those who may not otherwise afford the fresh produce, meat and dairy products. The goal is to address food insecurity and provide nutritious product rather than the processed simple carbohydrates often seen in the system due to long shelf life.

Volunteers are the backbone of our organization; they manage the food pantry, set tables, host and serve our meals. They are leaders for our Tai Chi group and both Living Well and Powerful Tools classes. Our SHIBA program is a model in the state because of the dedication of these volunteers. Our caring community donates thousands of hours to our programs and without them we would be unable to begin to meet the needs of our consumers.

We note that the above information is for the most part life pre COVID and provided here with the hope that in time we will again return to the model described above. During COVID, SHIBA services are provided via phone interview. Most of our volunteers are

safely home, we currently have a few regular home delivered meals volunteers who do not rotate to ensure limited exposure. We are not providing on site meals thus servers are not needed. The food pantry is currently more utilized than during normal operation and we are seeing households more than one time a month. There is no interest in virtual Powerful Tools or Living Well courses and we have not provided any for the full extent of 2020 and to this point in 2021.

Harney County Senior & Community Services Center is located at 17 S. Alder, PO Box 728, Burns, OR 97720, can be reached at (541) 573-6024, and has been designated as a focal point for program delivery.

A – 2 Mission, Vision, Values:

MISSION:

The mission of the center, it's board, employees and volunteers is: As a community partner, we provide services to seniors, disabled, low- income individuals and veterans, which improve the quality of their lives; enhancing their independence, and self-sufficiency.

We envision an integrated community which supports and encourages the choice, dignity and self-actualization of all of its citizens.

We operate our organization with values we believe will create and support our vision for our community. We treat our team members, service users, and partners with mutual respect and sensitivity, recognizing the importance of diversity. We request positive input and ideas to continually improve the services we provide. We do all we can to provide services within the scope of our mission and the guidelines of the grantors we work with. We respect all individuals and value their contributions. We show pride, enthusiasm and dedication in everything that we do. Staff and volunteers work together to improve our organization and prepare it to meet the needs of our community for the coming decades. We are committed to delivering high quality services. We challenge ourselves, welcoming the responsibility and making the tough decision. We evaluate the ever evolving needs of our community and do all we can to meet these needs. At times we must make changes to traditional service knowing change is difficult. We empower our talented people to seize the initiative and support our mission. We promote from within and work together to help our staff meet their full potential. Our team is supportive of each other's efforts, we are loyal to one another and we care for each other both personally and professionally.

We are committed to the elimination of discrimination, as well as in encouraging diversity among the members of the workforce. It is our goal as a workforce to become

a real representative of all aspects of society, where each and every employee feels highly respected and capable of giving their best. It is a high priority for us to foster and maintain an environment where diversity and inclusion are valued and realized to the benefit of our employees and the clients we serve.

These terms are often used interchangeably. Equality is about fairness. It underpins and is at the heart of all that we are and all we do. Equality goes well beyond just equal opportunities. To tackle traditional disadvantage and exclusion we aim to embed equality across all aspects of our work. This includes a commitment to having services that are of equal value to everyone, and recognize that this might mean different services to suit diverse needs. The word “diversity” means a range of difference. We want to acknowledge and value this range of difference, whether in individuals, groups or in our community.

As a frontier provider we depend on our community partners to ensure we are always working for our vision. We partner with our mental health provider, Symmetry Care to educate ourselves, recognized issues in the seniors we serve, and even utilize their nutrition specialist to review our meal plans. We have partnered with our local banks to provide education regarding financial abuse and fraud to protect and educate our seniors. We partner with Oregon State APD to support some of the most difficult senior self-neglect cases in our community. Local law enforcement partners to provide information regarding scams targeting seniors and ways to protect themselves from them. Harney District Hospital partners with us to get seniors in their homes as soon as safely possible, using our services as supports. Our tribal partners reach out to us as we do to them when we are working with their members to meet any needs they may have that are endangering their ability to safely stay in their home. Overall we are a small community which comes together to meet the needs of its members as none of us can do it alone.

A – 3 Planning and Review Process:

The Center collaborated with representatives of the Harney County Health Department/High Country Health and Wellness, Symmetry Care and Harney County Health District to develop and distribute a community needs assessment survey. The survey was open for a full 30 days and available online and in paper format. Community outreach was done through social media, support groups, meetings and community gatherings. A total of 520 responses were collected.

As well as the survey developed, data was obtained from the Census Tract Data provided by Oregon State, Profile of Older Americans information provided by the Administration of Community Living and State of Senior Hunger in America 2018; a study provided by the National Foundation to end Senior Hunger, Eastern Oregon Coordinated Care Organization and the Oregon Office of Rural Health.

Upon completion of this plan the draft was submitted to the Board of Directors which acts as the Advisory Council and was posted on the County WEB page in the Senior Center page for a 15-day review. The Center then advertised and held a public meeting to allow comment and input. At the end of this process the final draft was developed and submitted to the State of Oregon for approval.

In an attempt to align our emergency preparedness plans we consulted our Harney County Emergency Management and Preparedness coordinator, Suzan Settle, for input and assistance with development.

A – 4 Prioritization of Discretionary Funding:

Harney County Senior and Community Services Center is the focal point for many of the important services in Harney County for those who are seniors, low-income, disabled, veterans and their families. We administer the Older Americans Act programs as part of a broad array of services including homeless programs, shelter, energy assistance, weatherization, prescription assistance, SHIBA, food pantry, the Veterans Service Office and public transportation including medical rides and rural veterans' medical transportation programs. As a focal point of a large variety of services the community provides local funds in the form of donation for those programs it sees and values.

Priorities for service are all dependent upon the program we are currently working with. Our discretionary funds are used under the same eligibility criteria as the programs they supplement. An example of this is the Energy Assistance Program. LIHEAP services the low income population providing funds for heating their homes. The program requires that Seniors and people with disabilities be served first, next opening to those families with children six years of age and under and finally opening to the general public, funding allowed. Our agency receives local funds from both utility companies serving our county and we release their funds in the same manner and priority level as required in the LIHEAP Program.

Within the most recent four years our county has found that we have an ever increasing transient population. This population is entering our community and staying for only a short time, often under six months, they have obtained a great deal of funds, such as housing deposits and electric deposits and upon utilizing the services they leave the community taking the deposits with them. Many programs we administer have had to adjust the service priority to include consumers who have been in the community for six months or longer. This adjustment has allowed us to serve our consumers who wish to remain in the community without draining our limited funds on those passing through. We have seen this change in the housing and emergency assistance for medication for the most part.

The local private citizens and various organizations support our services in several ways, including monetarily and through volunteering. Many support our meal program through the local Entrée Donation funding and volunteering to serve our meals to the consumers and providing clean up after the meals. Some donate to the medication program allowing us to pay a onetime prescription fill for those who have an unexpected need. This allows consumers to begin a necessary treatment while they work with our Needy Meds volunteers to get their prescriptions at little to no cost on an ongoing basis. They provide local funds to purchase both bus tickets and fuel vouchers to keep those stranded in town moving on to their original destination. These programs are all first come first served with a onetime use per person unless an exception is approved by the Executive Director; which has occurred when extreme need is determined.

We continue to utilize a contract with our local attorney to provide OAA legal assistance services to seniors in need. He provides his services to our seniors at a 50% discount which allows us to serve more seniors in our community. This program is provided to those who are 60+ and allows them to seek help with many troubling outstanding legal issues. He has assisted with issues such as Life Alert type companies who sell a product to seniors who don't understand how to make the product work; to seniors who have family members living with them that they cannot get out of their home. Our legal program continues to grow and is a well utilized part of our OAA services.

Many of our local groups donate funds they specifically earmark. We ensure all donations are provided to the program the donor identifies. Some donate funds for bus passes to be provided for those in financial need or those who are veterans. Some donate produce specifically to the meal program or to the food pantry. As funds or product come in we accept and distribute to each area we administer.

Much of our community falls under the "greatest economic need" being within the population whose income is less than 185% of the federal poverty level. Many also dually

qualify as having “the greatest social need,” this being the case these consumers are always our first priority when looking at services and meeting the needs of the community. Should we obtain more funding we will evaluate services currently provided and what could be added to complement what we are offering. An example of this might be the fact that we currently have a cap on our caregiver respite program of 350 hours a year. If funds were increased, we could raise the number of hours a caregiver was allowed for respite in a year. As a frontier community we are very cautious about starting completely new programs or services with funding that is unstable. Our community does not have a lot of options to replace funding or contract with other agencies to provide a similar service. We have found it is not in our populations’ best interest to start a new program only to yank it away because unstable funding is pulled. We will move with caution until we can ensure stability at which time we will add service as needed within the population we serve.

Should funding be reduced further this agency will have significant issues with regard to delivering services to the community. The county and the local population provide a significant piece of the funding we use to keep our doors open. The blending of services and funding streams help us meet the needs of our consumers to the best of our ability. OAA funding for us is very low and without the support of the County and local businesses and individuals we would not be able to provide services. Our funding is limited and our office specialist is also our case manager. She is also our data input person for tracking meals and billing for OPI. She is also the OAA program manager and one of the Options Counselors. Funding is so low that this agency is not able to split job duties. The Executive Director backs up the OAA program manager when duties become too prolific to complete. The Executive Director and Program Manager are working together to complete this Area Plan and the Self-Monitoring assigned while providing LIHEAP Energy Assistance to the community, information, assistance and referral. The Program Manager is also reviewing and renewing OPI services and providing case management services and the Executive Director is engaging in ongoing administrative duties, oversight, program reporting and HR. The Fiscal Manager is also one of the Options Counseling persons and provides direct service and data input for services. She does the OPI HCW billing and SPR Data input as well as monthly units reporting. A decrease in funding would have a significant negative impact on a program that is currently struggling to meet the needs of the community due to lack of staffing.

SECTION B – PLANNING AND SERVICE AREA PROFILE

(Suggested length not to exceed 5 pages)

B – 1 Population Profile:

According to world population review Harney County has a land area of 10,133.17 square miles with .74 persons per square mile for a total population of 7494 which is 1.27% growth since 2010. However, according the Oregon Office of Rural Health, data collected for Harney County's 2019 Community Health Needs Assessment, 23.7% of the population is over 65 and 44.1% of those over 65 also have a disability. The state of Oregon has an overall population over 65 at 18.1%. This confirms the finding in the Journal of Rural Health which found that the rural population of Oregon contains a greater proportion of older adults than the urban population.

We know that the population including those 65+ will continue to grow throughout the next four decades. Nationwide the population will double from 40.2 million in 2010 to 88.5 million by 2050. This increase means that by 2030 1 in 5 US residents will be aged 65+ according to the US Census Bureau report titled, The Next Four Decades the Older Population in the United States: 2010 to 2050. By 2030 all of the baby boomers will have moved into the ranks of the older population which means 19% of the overall population will fall within this group. In 2010 14% of the older population is 85 and older, however by 2050 that percentage will increase to more than 21%. This is noteworthy because those in the oldest ages often require additional care giving and support. As numbers of those we serve grow and eventually double we must find ever changing ways to address their needs. Funding is often cut or remains flat for the programs we have available to serve this population. Our agency has received the same funding for our congregate and home delivered meal program since 1973. We are floored at \$16,000 a year. It is obvious that costs have gone up drastically and we are working to find ever creative ways to meet the need. As the population continues to grow there is a very real possibility that we will not be able to meet the need in traditional ways.

Harney County is well known for its lack of diversity with regard to race. We do not have an agricultural industry that brings in Hispanic workers. Most of our agriculture is alfalfa hay and cattle managed and harvested by local multigenerational families or local contractors.

2019 Census estimates appear to be pretty accurate to our small community. We do have the Burns Paiute Tribe Reservation located within our county and the data appears to reflect the population. It is important to note that we have a small group of Basque individuals who live in the county and though they have a significant cultural influence in

the county they are not reflected in the race and origin data. The 2019 Census population estimates reports that Harney County is 90.6% white with 4.4% of the population reporting Native American and 3.3% reporting two or more races. There is 1% reporting as African American alone, .6% Asian alone and 5.1% Hispanic or Latino.

English is the predominate language spoken in Harney County. The majority of the individuals who may not speak fluent English are from the rural parts of the county. Some of the most remote ranches do utilize a small number of seasonal labor to provide skilled labor such as sheep herding. These young men (normally) come to the county under short term contracts and return annually to their home countries, often Peru, and will return seasonally.

The Harney County Community Health Needs Assessment of May 2019 finds that the disabled adult population (18-64 yrs.) is 15.3% of the population. Harney County has a larger portion of disability within its overall population than the rest of Oregon which is at 12.3%. With regard to poverty; the assessment found that 44.4% of Harney County's population is below 200% Poverty Level compared to 35.2% of the statewide population. As is common in rural frontier communities, our population is older, sicker and poorer than the average. We find ourselves caring for a significantly larger portion of our population with significantly less resources available to us.

Harney County is the smallest AAA in Oregon. We have one of the highest percentages of seniors and people with disabilities in the state. Both demographics continue to grow. We have seen an influx of individuals with disabilities moving to our community under the belief that social services are more readily available here. This change has put a significant strain on the services and funds we have to offer and those of our partners throughout the county. We are part of community conversations that occur both formally and informally regarding how service providers throughout the county will address this growing crisis. Discussions revolve around what limits and guidelines need to be implemented to stretch our funds and to assist the individuals who are traditional Harney County residents rather than those passing through the community for short stays.

Our agency continues to provide veteran services, home delivered meals, transportation, energy assistance and weatherization services to tribal members in our community. This allows us to provide outreach and resource information to the tribe in hopes those who may not otherwise come to our agency for services may decide to do so. We are also engaged in ongoing conversations with tribal social service staff in efforts to reach out and assist in partnership with the services the tribe has to offer.

We are very much a one stop shop having everything from Public Transportation, the Veterans Service Officer, food pantry, CAP programs and senior services under our roof. Partners and community send everyone here first. It is a system we have implemented for decades and allows us to touch the lives of most of our target population at one time or another.

B – 2 Target Populations:

The Harney County Senior and Community Services Center is a Type A AAA in a very small community. The Center has been an important part of the community since 1973.

Most of the programs administered by the center have income guidelines. These guidelines are adhered to as part of the programs. The Center prioritizes all clients by income as well as whether individuals are seniors and people with disabilities, families with children under six and finally the general public who meet the income criteria.

Outreach in our community includes word of mouth, community events and public service announcements in the local paper. Pamphlets with services listed are available as well. Staff volunteers at big public events such as the fair and during those events we all do outreach with those we meet. We attend the livestock auction and as a group with some of our seniors we thank those who donate animals to our meal program. This is a big outreach opportunity.

During the summer and fall months' staff also conducts outreach events every Friday in alternating communities throughout the county. The furthest communities are over 120 miles away one way and an outreach event to them is a full day event. These occur as long as the weather allows.

Because the community is so small and services within the center are so diverse, the staff is able to identify community members who may be eligible and benefit from AAA services. Harney County is a frontier county and is very adept at meeting the needs of its citizens. Partners work together to identify and notify each other if there is someone who needs services they are not receiving. Family members call the center to discuss loved ones and their needs and concerns.

As mentioned above, the majority of our community report as white with English as their primary language. We have a small population of Basque individuals who participate in our services. The Basque, though English is their second or third language, communicate

with us and their needs are met. Communication is facilitated with help from friends and family.

We work in partnership with tribal social services to address needs that tribal elders may have that the tribe is unable to assist with. This partnership seems to meet the needs of tribal members relatively well. We provide medical equipment, energy assistance, home delivered meals, weatherization services and veterans services to tribal families as well as food pantry service. Each contact strengthens the relationship between the communities.

The population of older Lesbian, Gay, Bisexual and Transgender individuals in the county are immersed in the overall society. There is not organizations or community outside of the overall community serving this specific community. This organization is committed to inclusion and equity and treating all individuals with respect, meeting individual needs. These individuals utilize services and are referred by friends, family and professionals within the community. There is no data available to the percentage or number of community members who identify as LBGTQ however this author would venture to guess that the percentage of the overall population is comparable to the state of Oregon as a whole.

We see most of our targeted population during Energy Assistance time from December through the end of March. At that time as we have low income clients at our desk we have a dialog which allows us to assess them for other services they may qualify for and other needs they may have. We find this tool very helpful in ongoing identification of clientele.

B – 3 AAA Services and Administration:

The Harney County Senior and Community Services Center is a member of O4AD and N4A. We advocate on behalf of seniors, disabled and low income individuals and their needs. As a member, the Executive Director and key staff attends education and advocacy events. The development of relationships with peers allows us to share ideas and best practices with regards to program development.

The agency works with peers, staff and local partners to do our part to address the needs of the population we serve. We work hand in hand with the hospital, mental health, tribal staff and local Aging and People with Disabilities offices to coordinate programs and share responsibilities to best meet the needs of our population with limited resources.

Administrator salary is paid by the county. Harney County recognizes the needs of its aging population and supports the AAA. Their financial support of the administrator allows the hiring of a staff to tend to the needs of the community.

Harney County is a big supporter of the center. They assist with travel costs of the director, allowing her to go to the advocacy meetings. They provide the building we operate out of and assist with some overhead costs. The support of the senior center in Harney County is strong.

The Center houses the public transportation for the county. Dial-A-Ride serves the whole community with on demand service curbside to curbside and deviated fixed route service. It is funded by Public Transportation grants, and Harney County support. Riders are just about evenly split seniors and people with disabilities and the general population. We have a fleet large enough to meet the need of all riders. Our buses are ADA for those with special needs. Through our partnerships locally and with various state and federal agencies, we are able to meet the transportation needs in Harney County. We have recently engaged in a contract with the Department of Veterans Affairs to provide medical transportation at no cost to veterans who qualify. This partnership is possible with the Rural Veteran Transportation Grant. We have also begun providing several more out of town rides through our contract with Greater Oregon Behavioral Health Inc. (GOBHI). We have added two 4x4 vehicles to our fleet to ensure our ability to provide medical transportation to our neighboring communities in the harshest of Eastern Oregon winters.

We have limited OPI funding and offer OPI services to those who qualify. We use the CAPS assessment and prioritizations to determine who we are able to serve. Focuses on those with the most economic and social need who are 60+ years of age. Funding in this program allows us to carry a case load of approximately 10 seniors with a maximum monthly hour assignment of 20. Our OAA Program Manager/Case Manager/Office Specialist maintains the case load and recertifies the consumers. Home delivered meals are paid through this program for those who qualify. We have also paid some chore service and at times small home modifications as needed. We have also provided transportation in the form of bus passes for those in need. We do not currently have a wait list.

Home delivered meals and congregate meals are served and dispatched at the center. AAA dollars are utilized to provide this service. We also request donations and charge a fee for meals provided to those under 60 years of age. Local support in the form of entrée sponsorships are used to supplement the program. Funding from AAA dollars for the meal programs remains very low; as our organization was founded in 1973 at \$16,000 a year and has never seen an increase in funding. Costs of salaries and food continue to

rise and due to our frontier location we are also charged a fuel surcharge. Those with the most need for a meal are those least able to pay, thus meal donations are low. The entrée program helps but as Harney County continues to face an extended economic crisis, businesses are not able to support us at the level they have in the past. We had utilized OPI and Caregiver program dollars to pay for some of the meals of individuals on our caseload. This did help the program however funding continues to be an issue. We have added a contract with the county to provide the jail meals. This contract has added some additional funding to the senior meal program, however we continue to search for further ways to increase revenue. Staff turnover and work with nutrition guidelines have all impacted our meal program. During the summer of 2020 we received foundation support to develop a senior garden. The fresh produce from that garden was a help to the raw food budget within the meal program. We will continue to plant annually and hope to develop more interest to keep it going for years to come.

Our partnership with the local Symmetry Care nutritionist allows us to provide nutrition education free of cost to us. We are able to host information events at our facility and advertise at meals in an attempt to recruit participation. The nutritionist also reviews and approves our meals at no cost to the program. These in-kind services allow us to provide nutritious meals that meet the standards of the program.

We provide a newsletter every other month. The newsletter gives a calendar of events for the two-month time period and lists the menu for meals. It has helpful articles, jokes, puzzles and is entertaining. Seniors enjoy the document. The funding used for production of the letter is AAA dollars.

Caregiver Support is funded with 3E dollars. We provide opportunities for respite and light home modifications to assist caregivers. We have trained trainers for the Powerful Tools for Caregivers class and our goal is to provide two classes a year. We are working with the local child welfare office and the tribal social worker to identify elderly relatives raising children, hoping to provide services to them. We have developed a pamphlet and have it distributed within the community in an attempt to educate the community on the availability of services.

Twice weekly Tai Chi for Better Balance is supported by 3D funding. We have also trained a staff member and a volunteer in Tai Chi beginners. The training and service is paid for with Evidence Based Health promotion funding. These funds allow us to make classes available different days of the week. Our staff person is able to track and contact clients. It allows us to provide increased service and outreach to folks who might otherwise not have the opportunity.

With evidence based funding we have also trained our Veterans Service Officer in Living Well with Chronic Conditions. We have added a class a year in partnership with the nutrition specialist at Symmetry Care. We have had a very positive response to the addition of our Veterans Service Officer. Feedback has been that many like learning from a male as his perspective and input on the information is communicated to the males in the class in a way they understand and identify with.

We are the host agency for the local SHIBA volunteers. The staff person who is assigned to the coordination of this program is paid with funding provided by the state for SHIBA, SMP and MIPPA. Her duties include not only SHIBA coordination. We also have a staff person paid with 3B funds who is a volunteer coordinator for home delivered meals drivers, and servers for the congregate meals. She is also the building event coordinator, ensuring there is space for the events that we host. We have a blood pressure clinic once a month, vaccination clinic every fall; we have cards, quilts, bingo and pool several times a week. We rent the building out for special events and this requires scheduling. This staff person is also the front line person to answer the phones, she provides information and referral services.

Legal assistance is provided to the community within an agreement we have with the local attorney. He provides services to community members 60+ at a discounted hourly rate if their issues fall under the issues identified as priority in the Older Americans Act. He charges us under our 3B funding at this discounted rate. His services are an in kind support for our 3B funded program. This program has been met with enthusiasm and considered a great success. We utilize more than the required amount of 3B funds annually to provide this service to our community. We have received feedback from family members of seniors who needed simple legal services to do things such as ensure their home, a simple singlewide trailer, for example, went to their child after their death. This simple assurance allowed the individual to pass away at peace; that the business they needed to do was done and their loved one cared for. This has happened more than once over the ten years we have had this service available. The impact on the community is a strong positive one and we believe a model of what could be done with a strong partnership between AAA and local private legal service providers. We have shared this arrangement in the legal defense world with other attorneys throughout the state and the model has been met with interest and enthusiasm.

Harney County Senior and Community Services Center is an active community partner. We are developing relationships within the community which allows us to better serve seniors, disabled individuals and their families.

Please refer to Attachment C for a list of the services we provide.

B – 4 Non-AAA Services, Service Gaps and Partnerships to Ensure Availability of Services Not Provided by the AAA

A focus of the Harney County Senior and Community Services Center is to be a one stop shop for as many people in our community including seniors and persons with disabilities as possible. In recent years the center has focused on being an active community partner in a frontier community. We come to many tables to meet and discuss issues, needs and service gaps that partnership can fill.

Many hats are worn at the Harney County Senior and Community Services Center by each and every staff person. Though not AAA funded, we, in partnership with Harney County, provide transportation services. We are the public transportation provider via our Dial-A-Ride program. This program has continued to grow at a very fast pace. We have increased our vehicle count to nine. We have added real time dispatching through tablets in every vehicle. We have gone to a computer based phone system so there are unlimited options for phone waiting and messaging. We continue to have a contract with Veterans Administration to provide medical rides to rural veterans. We have expanded our services to provide rides for veterans to Portland, Boise and outlying areas. This service is making a very positive impact on the health care for our rural veterans. We are also able to accept brokerage rides and often find ourselves providing rides to Bend several times a week. Our service has made it possible for wheelchair bound individuals to obtain dialysis several times a week in Bend while remaining in home and community. This service is literally saving lives.

We provide rental and emergency housing and shelter assistance. These services are available through a partnership with our CAP agency, Community in Action and a small amount of local funding through local community donations. Community funds also allow us to purchase \$25 fuel cards to provide to transient individuals who may be stranded in our community without fuel assistance to get to the next community. We also have limited Salvation Army funding to provide bus tickets to the next nearest community.

The Center is part of the network of local food pantries. We are the largest capacity pantry in the community. The Center is the distribution sight for several thousand pounds of food a month. We normally work with a staff of volunteers who are overseen by our Administrative Assistant; however, throughout 2020 and at this writing we are utilizing staff as COVID has limited availability of volunteers. Normally, the volunteers pick up Fresh Alliance from Safeway daily. Currently staff will pick up bread and bakery product

but Fresh Alliance has been put on hold. The pantry is open only one day a week. We look forward to starting up Fresh Alliance again when COVID is less of a risk to our senior volunteers.

We are the agency that provides energy assistance and weatherization services. These services are in partnership with Community in Action as well as local cooperative power companies. We have a workforce of three full time individuals who provide weatherization to qualifying homes assigned to us. Homes are made more energy efficient through the addition of insulation, sealant, and at times windows and doors. Energy assistance helps with heating costs of low income seniors, disabled first then opens to low income families with children six (6) and under and finally to low income general public homes. This program is open from December through March annually.

We sponsor SHIBA and work with those volunteers to ensure medication needs are met through the Needy Meds program. We have some local funds which allow us to assist consumers who have medications they cannot afford to pay for. These funds cover that cost for the thirty days or so that it takes for their Needy Meds application to be approved and their first prescription to arrive through the program. This program also covers emergency medication that is needed to treat an unexpected illness and the co pay for prescriptions the client did not expect to have.

Our Veterans Service office is located on site. This is a 1.75 fte position made possible because of the commitment and support of the Harney County Court. Our Veteran Service program only covers the expense for one employee and related expenses. The remainder of the funding needed to pay our service officers comes from Harney County. Their office is housed here at the center and the program is part of the suite of services we offer our community. Our Veteran Service Officers do outreach within the county on Fridays and can be found in Fields, Crane or Juntura depending on the week.

The Center has a partnership with Symmetry Care with an open dialog with regard to services provided. We are often the “go to” partner when looking for space to provide health and wellness education to the public. We partner with staff for Living Well groups. We utilize the nutrition manager who is a certified nutrition specialist to approve our meal plans or give us direction as needed for change.

We also partner with the Harney District Hospital. We have contact with discharge planning staff to arrange meals, medical equipment and medication services. This partnership grows with time as each is able to help consumers.

Medicaid services are delivered through the State of Oregon offices, as is Adult Protective Services. Our partnership with the local office is a solid one. We are able to refer consumers to each other if there is a gap we cannot fill. We each have an interest in seeing that the needs of our consumers are met to the best of our ability.

As a community partner we have ongoing dialog with others to learn where we can help fill any gaps. We are a site that accepts seniors working with the Title V program to develop skills in the work force. We utilize the Employment Department to advertise our job openings. Doing business in this partner focused manner is the norm in Harney County. As a culture we take care of our own, we are so remote it is simply a way of life to work together to meet the needs of our community.

When we cannot meet community needs with local organizations we work with regional organizations that often come to our area to assist with special needs. The Alzheimer's Association based in Bend Oregon comes over to Harney County to provide informational meetings and support on a regular basis. We have found their website very helpful with a variety of products designed to help caregivers provide safety for their loved ones.

SECTION C – FOCUS AREAS, GOALS AND OBJECTIVES

(Suggested narrative length not to exceed 2 pages per focus area)

C – 1 Local Focus Areas, Older Americans Act and Statewide Issue Areas:

1. Information and Assistance Services and Aging & Disability Resource Connection (ADRC)

(Suggested narrative length not to exceed 2 pages)

Harney County Senior and Community Services Center has several strengths in this area though these strengths are not traditional. Though our Fiscal Officer/Administrative Assistant is currently maintaining her AIRS Certification, the Executive Director has let her certification laps. Our current Office Specialist/Program Manager/Case Manager has not obtained her certification. We will not pay further for training, testing or recertification unless additional funding is provided to specifically support this sort of extra expense. Our Program Manager et.al. is more than qualified to provide the service and information needed, she however, does not have the time to study for and take an extra test to prove it. Though we are, in theory, receiving funding to cover all of this additional expense, we are not receiving funding to cover. We are doing the job and our community is served very well. Staff is able to provide options counseling and the director has the training

needed to oversee the options counseling planning. We will continue to explore options with families and consumers as the need arises.

Harney County Senior & Community Services Center was a member of the Eastern Oregon ADRC which has dissolved. We continue to meet the variety of individual needs within our community. Funding is no longer available for ADRC. Type A AAA's do not have the funds available that type B's have with Medicare funding available to them. OWN is working to put funding into the system for those of us struggling and the process is slow but showing promise. We provide Options Counseling and I & A services and we continue to do so.

As a frontier/rural community the staff has a great deal of knowledge about and relationships with community partners. We are able to direct community members to the appropriate services to meet their needs. Our relationship with community partners allows us to make the calls and follow up for clients on the services they may need. We see our consumers in the grocery store, at the bank, while getting fuel, and all public places we go, this makes a real difference in person centered supports. We have those connections and those interactions daily. The relationships are there. As we have our meals on site and provide a wide variety of services to our community we see our consumers' multiple times in a week, month or year. We know them; we know their neighbors, their children and their support systems. Because we know them as the individuals they are, we find it natural to use person centered strategies when working with them. When providing consumers and families with options counseling services we help them focus on the solutions that work for them and their individual needs.

We have working relationships with partners to meet the needs of our community. Education and communication are both keys to success for us. Our local resources are very limited and it has always taken us working together to meet the needs of our most vulnerable populations. This is a real Harney County Strength.

We have contributed our information and services and that of the community to those developing the information system. We have updated it and reviewed it as well. Our staff has knowledge of what is available locally. During the intake we continue to work on utilizing the statewide information system to document calls and referrals. Staff has access to the RTZ system and is tracking calls and options counseling with the system.

Focus Area - Information and Assistance Services and Aging & Disability Resource Connection (ADRC):

Goal: Accurately record consumer contact

Measureable Objectives	Key Tasks		Lead Position & Entity	Timeframe for 2021-2024 (by Month & Year)		Accomplishment or Update
				Start Date	End Date	
Ensure contacts are recorded in RTZ/CARES	a	Input contacts	Office staff	1/21		
	b					
	c					
	d					
	e					
	f					

Goal: Maintain existing staff Education/Training

Measureable Objectives	Key Tasks		Lead Position & Entity	Timeframe for 2021-2024 (by Month & Year)		Accomplishment or Update
				Start Date	End Date	
Staff will engage in continuing education opportunities	a	Staff will take a CE As offered	Exec. Director	1/21		
	b	Staff will participate in statewide offered opportunities for peer education	Office Staff	1/21		
	c					
	d					
	e					
	f					

Goal: Explore funding sources currently unavailable

Measureable Objectives	Key Tasks		Lead Position & Entity	Timeframe for 2021-2024 (by Month & Year)		Accomplishment or Update
				Start Date	End Date	
Utilize OWN opportunities for paid services	a	Attend informational meetings re this source	Exec. Director	1/21		

	b	Explore opportunities with OWN lead	Exec. Director/O4AD team	1/21	1/24	
	c					
	d					
	e					
	f					

2. Nutrition Services (OAA Title IIIC) (Suggested narrative length not to exceed 2 pages)

We operate a full service commercial kitchen on site and provide a family style meal to seniors and others who attend the meals twice a week at noon. We deliver home delivered meals three times a week normally. During COVID we are delivering twice a week with an additional soup and rolls meal that is approximately three additional servings for meals. We also freeze meals using the approved vacuum sealed systems and deliver frozen meals upon request.

Our meals meet the requirements for calorie intake and nutrition standards set forth for the program. All menus are approved by the dietitian from Symmetry Care. She provides her services at no cost to the center.

We present information from the approved brochures at meal time and provide the brochures for our consumers to take home for our Nutrition Education. We also facilitate Living Well with Chronic Conditions and provide the program within the community at least two times a year. Our Office Specialist assesses everyone on the home delivered meals program and provides their annual nutrition education at that time.

Harney County Senior and Community Services Center has an entrée sponsorship program in which local businesses and individuals sponsor meals. This income helps to keep the quality and quantity of our meals at a high standard. Businesses are closing in Harney County and those who are able to remain open do not have the extra funds to sponsor like they used to but they are each doing all they can to support this program. Over the most recent years we have seen an increase in donation of 4H meat to the program. These donations allow us to serve local meat to our seniors and it is affordable with the only expense to us being the cut and wrap. Our meal program is a key element in the services we provide and the services needed in this county.

Our seniors visit other meal sites and come home to report “we are the best in the state!” They like our family style setting. Our food is cooked on site and served fresh and hot. We are able to serve everyone who needs a meal. After meals we offer Bingo, pool tables and cards to those who wish to stay and play.

We utilize both Caregiver and OPI funds to pay for meals for folks on our caseload. This allows them to have nutritious meals and the service was paid for as part of their case plan. At this writing the above information is all pre-COVID. We are currently providing Grab and Go back door meals and home delivered meals two days a week. We are not having card players in the building at the moment. We are allowing social distanced and

masked Bingo one day a week and Masked pool for a pair of friends who isolate and play each other.

As an agency it is our priority to explore ways to increase our revenue allowing us to maintain the quality and quantity of our meals. We are contracting with the county to provide meals to the inmates at the jail. This contract has been instrumental in helping pay for the meal program. We have had a complete change of meal program staff during 2020. Training continues and the staff has a way to go. We received a grant to develop a senior garden to supplement our meal program with fresh produce. It was a success its first year and we hope it will help the bottom line. COVID funding helped save the program, however we will need to revisit our floor. We are unable to maintain even two days a week with the normal funding available to us. It simply is not enough. We have explored the option of catering or contracting and we do not have that option in this community. If we do not provide meals directly there will be no option for meals. It is unfortunate that our C1 and C2 meal dollars in our OAA budget have not increased in several decades but the costs for raw food and the preparation of it continue to go up. If we have to change the system there will be a negative impact on all of the programs because, in this community, the meal program is the draw to many of the other services we offer.

Through the nutrition program we are able to identify other needs of our consumers. We advertise upcoming services like Tai Chi for Beginners or Living Well and Powerful Tools classes. We are able to pick up participants during meals as it is often the only service many participate in. We are also able to recruit consumers to enjoy meals with us when they are in for a different AAA service.

Focus Area - Nutrition Services

Goal: Increase funding to the program

Measureable Objectives	Key Tasks		Lead Position & Entity	Timeframe for 2021-2024 (by Month & Year)		Accomplishment or Update
				Start Date	End Date	
Provide for profit services for the community from our commercial kitchen.	a	Specialty product to sell at profit	Nutrition staff	4/21		
	b	Cooking/baking class sold for profit(Volunteer)	Nutrition Staff	6/21		
	c	Advertise Meals	Nutr. Staff and mng	8/21		
	d	Explore for profit options	Mng and all staff	3/21		
	e					
	f					

Goal: Provide Nutrition education quarterly

Measureable Objectives	Key Tasks		Lead Position & Entity	Timeframe for 2021-2024 (by Month & Year)		Accomplishment or Update
				Start Date	End Date	
Develop and track nutrition education events	a	Explore the approved information from SUA and develop plan	Office Specialist	1/21		
	b	Track and report participation	Office Specialist	1/21		
	c					
	d					
	e					
	f					

Goal:

Measureable Objectives opportunities	Key Tasks	Lead Position & Entity	Timeframe for 2021-2024 (by Month & Year)		Accomplishment or Update
			Start Date	End Date	
a					
b					
c					
d					
e					
f					

3. Health Promotion (OAA Title IIID) (Suggested narrative length not to exceed 2 pages)

The Harney County Senior and Community Services Center currently has several programs for health promotion established. We sponsor Tai Chi for Better Balance twice a week. The class is led by volunteers and has a regular following. Staff reports the attendance and progress made in this class. Evidence Based health promotion funds and IIID funds are used to pay the costs of these classes and the salary of staff to ensure quality and reporting. The two classes are available for all who wish to attend and there are those who attend them both. In addition to Tai Chi we have added Living Well in house and trained our Veterans Service Officer to be a leader. In partnership with Symmetry Care we have sponsored Living Well with Chronic Conditions on average of once a year. Our goal is to offer this program to the community two times a year. We have three volunteers trained in Powerful Tools for Caregivers and our goal is to offer it twice a year as well. This would be done with our 3E funds. We have used Evidence Based health promotion funds to train and provide additional classes and information for both Powerful Tools and Living Well.

We have always been a sponsor site for one of the flu clinics held in the county. We will continue to work with the Health Department to be a site for this clinic. In the future we fully expect to add COVID vaccination opportunities as well. They also offer an hour long blood pressure clinic to check the blood pressure of our seniors who are attending the meal. Many participate and like the added opportunity to check on their health.

Quarterly Nutrition Education is a requirement of the nutrition services. We are currently utilizing the evidence based information approved by the SUA for nutrition education. It is our goal to engage our older adults and anyone else from the community and to educate them about healthy eating and positive life style choices. The community survey showed us that there is a high percentage of adults with high blood pressure, high cholesterol and obesity as well as diabetes. We know healthy eating habits are an important part of improvement and prevention of these illnesses.

All programs are held at the center which is the focal point to most services offered for seniors and people with disabilities. We rotate times of day in an attempt to provide the services to as many as possible.

All health promotion activities are advertised in the bi-monthly newsletter. When we have special events like the quarterly Tai Chi or Living Well we advertise in the local paper and put up fliers in the doctor's offices and clinics around town. Word of mouth is used and very affective for all activities at the Center.

Focus Area - Health Promotion

Goal: Have two trained trainers in Harney County for Living Well

Measureable Objectives	Key Tasks		Lead Position & Entity	Timeframe for 2021-2024 (by Month & Year)		Accomplishment or Update
				Start Date	End Date	
Train another staff member as Living Well leader	a	Identify willing employee or volunteer	Guy McKay VSO or management	06/21		
	b	Train as a trainer	Offered training and IDed volunteer and employee	9/21		
	c	Provide a training for EO community	Guy and new lead	9/21		
	d					
	e					
	f					

Goal: Provide Nutrition education quarterly COVID

Measureable Objectives	Key Tasks		Lead Position & Entity	Timeframe for 2021-2024 (by Month & Year)		Accomplishment or Update
				Start Date	End Date	
Quarterly nutrition ed meal days within COVID world	a	Develop schedule	Office Specialist	3/21		
	b	Identify information to educate	Office Specialist	3/21		
	c	Provide education quarterly	Office Specialist	6/21		
	d					
	e					
	f					

Goal: Train one more volunteer to provide Tai Chi

Measureable Objectives	Key Tasks		Lead Position & Entity	Timeframe for 2021-2024 (by Month & Year)		Accomplishment or Update
				Start Date	End Date	

Train another volunteer to provide tai chi classes	a	Identify willing volunteer	Staff or current volunteers	6/21		
	b	Identify nearest training	Staff	6/21		
	c	Schedule training and send volunteer	Staff and volunteer	9/21		
	d	Provide backup or additional tai chi class	volunteer	11/21		
	e					
	f					

4. Family Caregivers (OAA Title III E) (Suggested narrative length not to exceed 2 pages)

As mentioned several times throughout this document, Harney County residents have a long history of making due and taking care of their own. This tradition is seen nowhere more than in the area of family caregivers.

Caregivers out there believe their needs are being met at best or believe they are and will be “fine” with the focus on the one they are caring for. Some are open to information, however most feel they don’t need education and don’t wish to attend a caregiver support group. They were for the most part not interested in a day program.

Our goal is to first, get the word out that there are supports out there. We are hoping to encourage the “tough stock” of Harney County to reach out and accept the help and to understand most of us are caregivers to someone. Normalizing and offering through fliers, brochures and word of mouth are ways we hope to continue the process. We see similar answers in the most recent survey that we found in the last. Caregivers continue to refuse most support or education.

We have two volunteers who are able to teach the Powerful Tools for Caregivers workshop. We have provided an average of one per year. Though through the most recent year we have been unable to provide any classes. There was no local interest in a virtual class. We have lost our trained staff person and do not foresee replacing her at this time.

Staff provides I & R and I & A including information to caregivers about support, training and materials we have to lend. We have a small lending library available to caregivers and will provide materials as needed. Caregivers come to us for specific information which we provide. We have respite funding available to caregivers. It is utilized on a limited basis as needed. As we speak to caregivers and assess their needs. At that time, we offer services specific to their needs. We have supplemental services in the budget as well as funding for grandparents caring for grandchildren. We have developed and distributed a brochure outlining our services and have had opportunity to provide all of the above services. We continue to conduct outreach and educate our community on the services we have to offer.

We utilized supplemental services budgeted to provide simple modifications to help caregivers meet the needs of their loved ones. We have added grab bars to showers and commodes as an example of how these funds are utilized. We do not have adult day care services available so we also utilize the funds to pay for the caregiver and or their loved one to come for a meal. This gives the caregiver a break from care and offers some much needed socialization time for both individuals. These are some of the kinds of creative ways we have developed to address the needs of caregivers in a community with limited service available.

Our agency uses the standardized caregiver intake form to assess, plan and screen caregivers and their needs. This form is used to plan for the combination of respite, support, education and supplemental services to best address the overall needs in the situation being assessed.

AAA staff work hand in hand with staff from the Burns Paiute Tribe in an effort to assist their tribal members with their caregiving needs. Many older tribal members are raising their grandchildren or relative children. Some are in households shared by three or more generations. Care is provided for both young children and older adults. We depend on the partnership of tribal staff to help us help them.

Our community utilizes the respite care funds we have available. We have family members who, at times, need a break and they utilize the funds we have to pay a friend or neighbor so they can get away for a short time and have someone there for their loved one. We also use funds for supplemental services. We are able to provide small changes, such as hand rails in the bathroom for caregivers to help them assist loved ones without injuring themselves. We provide home delivered meals and on site meals as supplemental services as well. Caregivers come to the center to eat and help their loved one have some social time, often staying for cards or Bingo. Finally, we provide specialized information when consumers come in with questions. Because we provide the services in the community for caregivers, we work with families in several other capacities and give options available when we have them in front of us. We are small enough that we are able to have a well-rounded picture of the needs in the families we serve. We provide the services we have available to all who ask.

Focus Area - Family Caregivers:

Goal: Provide Powerful tools two times a year

Measureable Objectives	Key Tasks		Lead Position & Entity	Timeframe for 2021-2024 (by Month & Year)		Accomplishment or Update
				Start Date	End Date	
Obtain two more trained volunteers	a	Identify willing volunteers	ED and Current Vol	4/21		
	b	Locate facilitator training	ED and Office Specialist	6/21		
	c	Obtain the training	Volunteers IDed	9/21		
	d	New trainees provide first group	Current volunteer and new ones	11/21		
	e	Provide Training 2X per year	Volunteers and staff	1/22		
	f					

Goal: Develop lending library with current information

Measureable Objectives	Key Tasks		Lead Position & Entity	Timeframe for 2021-2024 (by Month & Year)		Accomplishment or Update
				Start Date	End Date	
Purchase materials and books to help	a	Survey topics of interest	Staff and ED	6/21		
	b	Locate current materials	Staff	8/21		
	c	Purchase Materials	Staff	10/21		
	d	Advertise Materials Available	Staff	12/21		
	e					
	f					

Goal:

Measureable Objectives	Key Tasks	Lead Position & Entity	Timeframe for 2021-2024 (by Month & Year)	Accomplishment or Update
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			Start Date	End Date	
	a				
	b				
	c				
	d				
	e				
	f				

5. Elder Rights and Legal Assistance (OAA Titles VII & IIIB)

(Suggested narrative length not to exceed 2 pages)

Harney County Senior and Community Services Center have a contract with a local attorney who provides services to seniors under the IIIB legal services funding. He provides services at a discounted rate for this contract which allows him to serve more people with the limited funding available. He is also willing to participate in panels regarding issues of elder abuse. He does this at no charge to the program.

The Legal Aid office nearest us is in Ontario, 130 miles away. They service our area, coming to the community at least annually and distributing information. We keep information specific to senior issues in the common area for clients to utilize. We also have their business cards available.

Because we are very person centered in delivery of our services, we are always aware of what services or needs a client may have. We refer as appropriate. We also provide a newsletter every other month which reminds the community that we have legal services available and how to contact us.

We have a very good working relationship with DHS Seniors and People with Disabilities. They are the entity providing adult protective services in our community. When there are concerns regarding abuse of a senior we call them directly with the information and concerns we may have. They screen and determine if it is a go out or not.

There is an adult abuse multi-disciplinary team in Harney County which meets at the end of the MDT meeting for families and children. The Senior Center has been invited to attend and the director attends the meeting occasionally. To date there has been no business related to the senior part of the meeting.

Community partners including mental health, CCO, APS, public health and HCSC participate in a monthly meeting to discuss difficult senior cases and compare and share services that may help. These meetings have addressed issues that affect these seniors health and well being.

Financial exploitation of seniors is the largest type of elder abuse. Harney County Senior & Community Services Center has taken advantage of brochures provided through 04AD educating seniors and community partners regarding this topic. We have distributed them to the local banks and within the senior center. We schedule annual staff meetings with APD protective service coming in to educate our staff about mandatory reporting and types of abuse such as financial. We have worked with the local banks, APD and local

attorneys to provide an information event. Our SHIBA volunteers are MIPPA and SMP trained as is the staff person overseeing them. We have, with their help, held a senior abuse awareness event with law enforcement, hospital personnel and bank personnel available to provide information regarding what to look for and ways to protect themselves. When we can gather in the future we hope to resume some of these events. Our SHIBA volunteers man a booth at the local fair, which is the biggest county event of the year. They distribute information regarding abuse and fraud.

Distribution of information is the plan to prevent all forms of abuse including financial exploitation. It is what we have available to us to address all forms of abuse including Financial exploitation. We utilize our limited budgets to blend funding to do just that. Our SHIBA volunteers are our best front line defense with regard to Medicare billing and fraud. There is no way to specifically prevent financial exploitation other than education and legal services when applicable. We require staff and volunteers to undergo back ground checks as required by the program. Homecare workers are registered through the state as well and provided provider numbers to work with seniors. All of these are tools put in place and utilized to prevent abuse of our senior population. There is only education as listed above and addressing the situations as they come beyond these safety measures. APS is the investigative leg of abuse of seniors and as such we report any concerns to them for screening.

As a small community we work closely with our partners. We participate in meetings and community events. We listen and discuss concerns. We have a suggestion box available and invite the community to contact us through monthly newspaper articles. These are all utilized to try to determine if there are gaps in services or not. We are an active part of the community and address needs where we can and refer to those who can when we cannot. Our community is currently providing all of the services we can with what we have available.

Focus Area - Elder Rights and Legal Assistance

Goal: Recruit and Train two more SHIBA Volunteers.

Measureable Objectives	Key Tasks		Lead Position & Entity	Timeframe for 2021-2024 (by Month & Year)		Accomplishment or Update
				Start Date	End Date	
Two more active SHIBA volunteers	a	Identify two interested volunteers	Current volunteers and Staff	01/21		
	b	Conduct prescreening of Volunteers	Current Volunteers and State employees	06/21		
	c	Develop and sign agreement	ED and APD			
	d	Training	New volunteers and State	7/21		
	e	Required Hours with on hands	New and current volunteers	9/21		
	f	Carry case load for open enrollment	New volunteers	10/21		

Goal:

Measureable Objectives	Key Tasks		Lead Position & Entity	Timeframe for 2021-2024 (by Month & Year)		Accomplishment or Update
				Start Date	End Date	
	a					
	b					
	c					
	d					
	e					
	f					

Goal:

Measureable Objectives	Key Tasks		Lead Position & Entity	Timeframe for 2021-2024 (by Month & Year)		Accomplishment or Update
				Start Date	End Date	

	a					
	b					
	c					
	d					
	e					
	f					

6. Older Native Americans (OAA Titles VI & IIIB) (Suggested narrative length not to exceed 2 pages)

As this agency plans all programs an effort is made to include voices representing the local Burns Paiute Tribe. While planning a new housing project, the tribal housing manager was on the planning committee. When the project was complete we reached out to the tribal social services office for assistance in housing members.

During energy assistance when a tribal ID is provided our case managers discuss interest in weatherization services specifically available for tribal members. We maintain the list of interested parties and provide it to our Community Action Program (CAP) Agency for follow up. When the agency, which is located in Ontario OR, is unable to reach a member, our staff will go contact them personally to ensure they receive the service.

Our Veterans' Service Officers have recently been successful in reaching out to veteran tribal members and survivors. Through their efforts they have placed applications for benefits, not only for veterans but also for their spouse. They have gotten the deceased veteran the recognition and death benefit he/she was entitled to as someone who has served their country with honor.

Tribal members utilize our food pantry as well as the one at the tribe. Ours has a different supply source and has a larger variety of product. We are happy to fill in the gaps that theirs can't.

As we develop our public transportation services including our deviated fixed route we consult with tribal transit managers to discuss the best ways to dove tail and enhance the services they have available. We share two bus stops on the reservation and our route does two loops out to the reservation five days a week after they close at 3:00 in the afternoon. This allows members to be in town up to 2 hours longer if needed and still get a ride back home. The deviated fixed route if at no cost to the rider.

We serve the tribal members through our energy assistance program as the tribe does not have one they manage on their own. We also serve tribal seniors through our home delivered meal program and congregate (Grab and Go) meals. Each of these interactions allow us to further our relationship and listen to ways we are better able to meet any needs or help in any way we can.

Focus Area - Older Native Americans

Goal: Weatherization of Native homes to spend out available funding

Measureable Objectives	Key Tasks		Lead Position & Entity	Timeframe for 2021-2024 (by Month & Year)		Accomplishment or Update
				Start Date	End Date	
Weatherize native homes and utilize full funds available	a	Identify qualifying native families	Case Managers	3/21		
	b	Audit qualifying homes	CAP Agency	3/21		
	c	Weatherize homes	WX Crew	3/21		
	d					
	e					
	f					

Goal: Ensure tribal members have information regarding Center services

Measureable Objectives	Key Tasks		Lead Position & Entity	Timeframe for 2021-2024 (by Month & Year)		Accomplishment or Update
				Start Date	End Date	
Provide newsletter to tribe	a	Contact tribal media	Office Specialist	3/21		
	b	email letter to tribal office	OS	3/21		
	c	Email each newsletter to tribe	OS	5/21		
	d	Follow up to ensure continuity	ED	7/21		
	e					
	f					

Goal:

Measureable Objectives	Key Tasks		Lead Position & Entity	Timeframe for 2021-2024 (by Month & Year)		Accomplishment or Update
				Start Date	End Date	
	a					
	b					

	c					
	d					
	e					
	f					

SECTION D – OAA/OPI SERVICES AND METHOD OF SERVICE DELIVERY

D - 1 Administration of Oregon Project Independence (OPI):

In accordance with OAR 411-032-0005(2) the area agency must submit an Area Plan containing, at a minimum, the agency's policy and procedures for each of the questions below.

Provide the following information or policies about how your agency (or your contractor) administers and implements the OPI program. Note: If the AAA is participating in the OPI Pilot for Adults with Disabilities, clarify if the policies and procedures vary for that population.

- a. What are the types and amounts of authorized services offered? (OAR 411-032-0005 2 b A)
- b. State the cost of authorized services per unit. (OAR 411-032-0005 2 b B)
- c. Delineate how the agency will ensure timely response to inquiries for service. Include specific time frames for determination of OPI benefits. (OAR 411-032-0005 2 b C)
- d. Describe how consumers will receive initial and ongoing periodic screening for other community services, including Medicaid. (OAR 411-032-0005 2 b D)
- e. Specifically explain how eligibility will be determined and by whom. (OAR 411-032-0005 2 b E)
- f. Plainly state and illustrate how the services will be provided. (OAR 411-032-0005 2 b F)
- g. Describe the agency policy for prioritizing OPI service delivery for both the waiting list and hours/types of services for the individual. (OAR 411-032-0005 2 b G)

h. Describe the agency policy for denial, reduction or termination of services. (OAR 411-032-0005 2 b H)

i. Specify the agency's policy for informing consumers of their right to grieve adverse eligibility, service determination decisions and consumer complaints. (OAR 411-032-0005 2 b I)

j. Explain how fees for services will be developed, billed, collected and utilized. (OAR 411-032-0005 2 b J)

k. Describe the agency policy for addressing consumer non-payment of fees, including when exceptions will be made for repayment and when fees will be waived. (OAR 411-032-0005 2 b K)

l. Delineate how service providers are monitored and evaluated. (OAR 411-032-0005 2 b L)

m. Delineate the conflict of interest policy for any direct provision of services for which a fee is set. (OAR 411-032-0005 2 b M)

***Written policy and procedure for OPI program is attached to this document in Appendix G. This document addresses the questions above.**

D – 2 Services provided to OAA and/or OPI consumers:

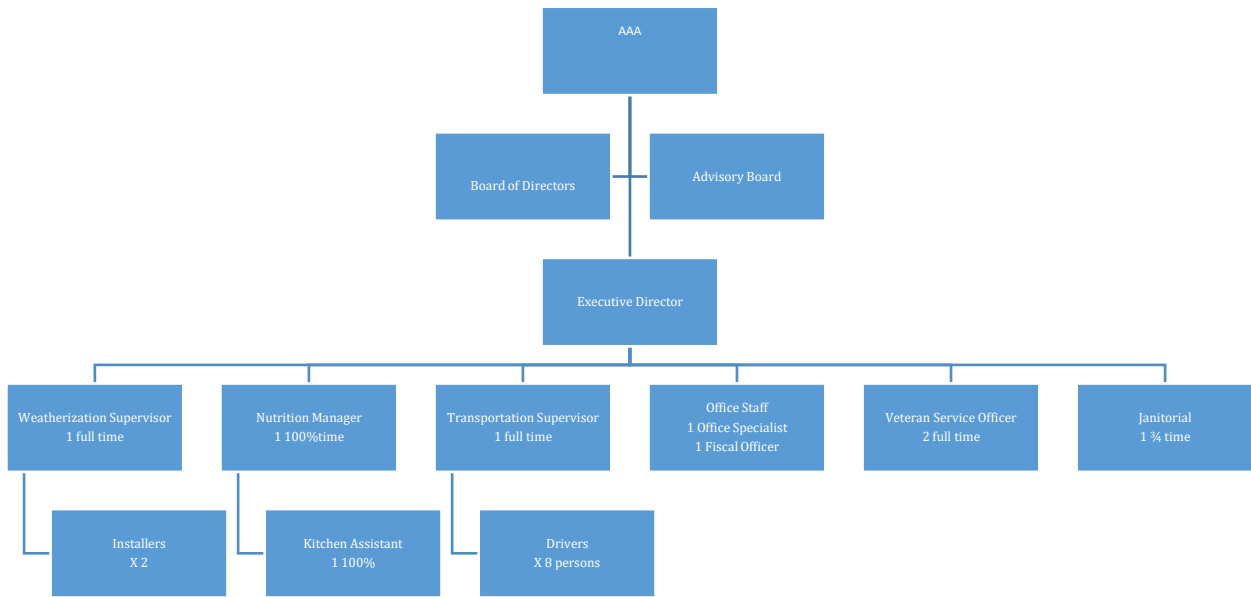
The Harney County Senior and Community Services Center provides many of the services indicated in house. We have a contract with a local attorney to provide legal services. Finally, we work in partnership with other local agencies to provide many other services. Please view **Attachment C** for details.

SECTION E – AREA PLAN BUDGET

SEE ATTACHED

APPENDICES

Appendix A Organizational Chart



Appendix B Advisory Council(s) and Governing Body

Patti Schultz	2nd Term Ends 2021	Over 60
Richard (Dick) Day	2ndTerm Ends 2021	Over 60/Chair
Lynn McClintock	1 st Term Ends 2021	Over 60/Vice Chair
Eddy Fields	1st Term Ends 2023	Over 60
James Campbell	2ndTerm Ends 2023	Community/2 nd Vice Chair
Sherrie Modey	2ndTerm Ends 2022	Community
Pete Runnels	Never ending	Elected official
Bobbi Heany	1 st Term Ends 2022	Community
Arthel Kline	1 st Term ends 2022	Community

* During the 2014-2016 biennium the board underwent a restructuring and rewriting of the bylaws that govern the agency. The board acts as the advisory council for OAA programs. The board size has changed from 18 to 9 members. These changes have allowed for quorums to be met and work to be accomplished.

Appendix C Public Process

2019 Harney County Community Health Needs Assessment was utilized to determine pressing needs in the community.

Draft area plan was on WEB page for community review with announcement of comment period on WEB, in local newspaper, on local radio station and on agency reader board from January 25, 2021 through March 1, 2021.

Board in its role as Advisory Council reviewed completed draft plan on January 21, 2021.

No changes were suggested the board approved of the plan, and it was recommended at that time to move forward to the public comment phase.

Board in its role as Advisory Council reviewed and approved the completed final draft of the Area Plan for 2021-2024 on March 18, 2021.

Appendix D Final Updates on Accomplishments from 2017-2020 Area Plan

Goal: Keep local resources updated in the data base

When the 17-20 plan was developed the ADRC was regional for Eastern Oregon. It was unfunded and the lead agency was unable to maintain it after the special grant was complete. They had the employee to update the data base. We were given a central contact to update after the Eastern Oregon one dissolved. Staff has changed and the information has been lost with changes. Our organization finds Google more useful and there is not a lot that changes in Harney County. We do not have the time or staffing to review and compare with any regularity what is up and what needs changed. We made progress early but after building the information we have not maintained the ongoing review.

Goal: Maintain existing staff AIRS Certification

When there was a grant to do this we certified the fiscal manager and the executive director and after several attempts the office specialist at the time. The fiscal manager has kept her certification maintained up to this time. The executive director did one renewal and then lost track of it and it has expired. The office specialist position has changed approximately three times since the original one was certified and none of the others has been certified. Harney County has a limited workforce pool to choose from. Prior to the current employee our employee in the position did not have the education or experience to certify and by the time we could check that box off the employee was preparing to leave the position. There is a cost associated with the certification and with the continuing education that is not covered. Our organization requires all employees to cover several programs and several areas, their knowledge is extensive. By the very

nature of our community we treat each consumer in a person centered manner. The certification is a box to check that is expensive, time consuming and unmanageable. If I require it, I will lose staff as on paper most staff will not qualify or by the time I invest the time and money to get them there they will leave and I will start over. My budget does not have that kind of room. My current Program/Case Manager is qualified to certify however, she simply does not have the room in her day and we value her too much to have her checking a box that changes her job not at all.

Goal: Explore funding sources currently unavailable

During this plan we developed a 20-unit affordable housing project which we now manage. These funds are available to us as unattached and can be used in program areas that have short falls. This is the start of stabilizing and strengthening our programs. As a member of O4AD we have access to the work OWN has been doing regarding Medicaid billing and should there be a benefit to us through that we will be able to utilize it. We continue to search for ways to earn unattached funding to strengthen our programs.

Goal: Increase funding to the program

We have obtained a contract with the County to provide the county jail with inmate meals. This contract has added approximately \$20,000 to our annual meal budget for senior meals. In a normal funding year, we project our budget to still have an approximate \$25,000 short fall if funding remains at the level it is currently at. We have added a garden to supplement the meal programs and help cut cost of raw food. We provide approximately 350 meals a week to the community with two full time staff as well as fill the jail contract. Our resources for further direct fundraising are simply unavailable. I would need to add more staff to expand programs or fund raising. The program as it stands won't support that. To strengthen this program directly we must increase the OAA funds floor for both home delivered meals and congregate meals to make them more reasonable with the 2021 program cost. This conversation will need to be a priority for this agency to both O4AD and the state.

Goal: Provide Nutrition education quarterly

We were successful at meeting this goal until COVID hit. As we reorganized and planned to meet the needs of our consumers in the new era of COVID we have not provided any nutrition education. Our focus of information has been regarding COVID safety and care. We have the resources and understand our requirements, we plan to get back on track which is why we have forwarded this goal to the new plan.

Goal: Have two trained trainers in Harney County for Living Well

We had two trained trainers in the county. One has changed jobs and does not have the time to provide the class with our employee. We would like to train a volunteer and possibly a second employee to be a trainer so that there are three available to present. We are hopeful that as COVID restriction lift there will be opportunity to have some programs available for the community.

Goal: Provide Powerful tools two times a year

We were successful with this goal until COVID. There was a definite negative reaction by the community with the suggestion that we provide virtual trainings. We currently have two volunteers. We would like to get at least one and preferably two more trained to provide the program. As COVID restrictions for gatherings lift we hope to get back on track to offering this program to caregivers within our community.

Goal: Develop lending library with current information

There had not been a big interest in a library and we had dropped the project from our goals. As the world is a very different place we would like to take another run at it and see if there is any interest in resources for caregivers.

Goal: Written Protocol between AAA and APD regarding referrals regarding abuse.

This goal was completed and the MOU is attached to the current plan as well

Goal: Weatherization of Native homes to spend out available funding

This goal was completely met each year of the plan. The funding is appropriated each funding year and we were able to weatherize houses and spend out all funds each time. We will continue to do so as long as we are awarded funding.

Goal: Ensure tribal members have information regarding Center services

Staff continues to build relationships with Tribal members and tribal social services staff to ensure members have service information. This is an ongoing goal that requires attention.

Appendix E Emergency Preparedness Plan

***See attached plan.**

Appendix F List of Designated Focal Points (OAA [Section 306](#) (a)(3)(B))

**Designated Focal Point for Harney County is:
The Harney County Senior and Community Services Center**

Appendix G OPI Policies and Procedures

***See attached policies and procedures.**

Appendix H Partner Memorandums of Understanding

***See attached Memorandum of Understanding**

Appendix I Statement of Assurances and Verification of Intent

For the period of January 1, 2021 through December 31, 2024, the [AAA]Harney County Senior and Community Services Center accepts the responsibility to administer this Area Plan in accordance with all requirements of the Older Americans Act (OAA) (P.L. 109-365) and related state law and policy. Through the Area Plan, [AAA]Harney County Senior and Community Services Center shall promote the development of a comprehensive and coordinated system of services to meet the needs of older individuals and individuals with disabilities and serve as the advocacy and focal point for these groups in the Planning and Service Area. The [AAA]Harney County Senior and Community Services Center assures that it will:

Comply with all applicable state and federal laws, regulations, policies and contract requirements relating to activities carried out under the Area Plan.

Conduct outreach, provide services in a comprehensive and coordinated system, and establish goals and objectives with emphasis on: a) older individuals who have the greatest social and economic need, with particular attention to low income minority individuals and older individuals residing in rural areas; b) older individuals with significant disabilities; c) older individuals at risk for institutional placement; d) older Native Americans; and e) older individuals with limited English proficiency.

All agreements with providers of OAA services shall require the provider to specify how it intends to satisfy the service needs of low-income minority individuals and older individuals residing in rural areas and meet specific objectives established by the [AAA] Harney County Senior and Community Services Center for providing services to low income minority individuals and older individuals residing in rural areas within the Planning and Service Area.

Provide assurances that the Area Agency on Aging will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with significant disabilities, with agencies that develop or provide services for individuals with disabilities.

Provide information and assurances concerning services to older individuals who are Native Americans, including:

- A. Information concerning whether there is a significant population of older Native Americans in the planning and service area, and if so, an assurance that the Area Agency on Aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under the Area Plan;
- B. An assurance that the Area Agency on Aging will, to the maximum extent practicable, coordinate the services the agency provides with services provided under Title VI of the Older Americans Act; and
- C. An assurance that the Area Agency on Aging will make services under the Area Plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.

Provide assurances that the Area Agency on Aging, in funding the State Long Term Care Ombudsman program under section 307(a)(9), will expend not less than the total amount of Title III funds expended by the agency in fiscal year 2000 on the State Long Term Care Ombudsman Program.

Obtain input from the public and approval from the AAA Advisory Council on the development, implementation and administration of the Area Plan through a public process, which should include, at a minimum, a public hearing prior to submission of the Area Plan to DHS. The [AAA] Harney County Senior and Community Services Center shall publicize the hearing(s) through legal notice, mailings, advertisements in newspapers, and other methods determined by the AAA to be most effective in informing the public, service providers, advocacy groups, etc.

Date

Director, [AAA]

Date

Advisory Council Chair