

Title: Home and Community Care Block Grant

Vote on a request to approve the Home and Community Care Block Grant for fiscal year 2020/2021 as recommended by the Advisory Committee appointed by the County Commissioners.

Abstract:

Action Requested: Motion to accept the \$609,958 from the State's Home and Community Care Block Grant (HCCBG) to be used according to the Committee's budget recommendation and to proceed with an agreement with the Triangle J Council of Governments Area Agency on Aging for the provision of aging services by the Chatham County Council on Aging in connection with activities financed by the Block Grant.

Action Requested: Commission's approval of the County Funding Plan (DOA-731) recommended by the HCCBG Advisory Committee and to proceed with an agreement with the Triangle J Council of Governments Area Agency on Aging for the provision of aging services by the Chatham County Council on Aging in connection with activities financed by the Block Grant.

Introduction & Background: The Home and Community Care Block Grant is the vehicle used in North Carolina to distribute state and federal funding consistent with the federal Older Americans Act and a formula developed by the North Carolina Division of Aging and Adult Services. Services are provided according to the standards established by the State Division of Aging and Adult Services consistent with the Act. Annual monitoring of these services is conducted by the Triangle J Area Agency on Aging. Each County appoints a Block Grant Advisory Committee to consider the allocation of funds among services. The recommended budget requires that the Chatham County Council on Aging provide all services directly or through contract. At least a third of the Advisory Committee members, who represent a broad range of aging interests, are older adults. Other members who were present for the committee meeting on May 14, 2020, included personnel from the Health Department, Social Services, Daymark Recovery Services and the Council on Aging. A representatives from Cardinal Innovations Healthcare was invited but unable to attend. One of the members includes Chatham's delegate to the NC Senior Tar Heel Legislature and another, the immediate past STHL delegate. In addition, the Director from the Triangle J Area Agency on Aging was present to provide technical assistance. An older adult, who is interested in becoming a future member of the committee, observed the process but did not vote. Attached is a list of attendees, information presented at the meeting, and the recommended County Funding Plan (DOA-731).

Discussion & Analysis: The Chatham County Council on Aging is the agency with lead responsibility for planning and coordinating the HCCBG County Funding Plan and the delivery of services to older adults and their families. This is outlined in an Agreement between Chatham County and the Chatham County Council on Aging. The recommended funding plan considered information about needs and other resources available to the Council on Aging and within the community. It also took into consideration the effect of COVID-19 on services and funding.

Budgetary Impact: None

Recommendation: Motion to accept the Home and Community Care Block Grant of \$609,958 to be used per the Funding Plan for Fiscal Year 2020/2021 as approved unanimously by the Home and Community Care Block Grant Planning Committee, and to proceed with an agreement with the Triangle J Council of Governments Area Agency on Aging for the provision of aging services by the Chatham County Council on Aging in connection with activities financed by the Home and Community Care Block Grant.



DAAS-731 (Rev. 1)														
Home and Community Care Block Grant for Older Adults														
County: Chatham														
July 1, 2020 through June 30, 2021														
County Funding Plan														
County Services Summary														
	A				B	C	D	E	F	G	H	I		
	Block Grant Funding			Total										
Services	Access	In-Home	Other		Required Local Match	Net Service Cost	NSIP Subsidy	Total Funding	Projected HCCBG Units	Projected Reimbursement Rate	Projected HCCBG Clients	Projected Total Units		
Sr Ct Operations			119562	13285	132847		132847	N/A	N/A	N/A	N/A			
Congregate Nutrition			95000	10556	105556	11100	116656	10522	11.0862	180	16516			
Home Delivered Meals		116218		12913	129131	11625	140756	13598	10.3372	80	16868			
info & Opt Counseling	69891			7766	77657		77657	N/A	N/A	900	N/A			
In Home Aide LV II		112087		12454	124541		124541	4963	25	22	13892			
In Home Aide LV III		35500		3944	39444		39444	1578	25	9	6538			
Health Promo/Disease			////////	0	0		0							
Prevention			20300	2256	22556		22556	N/A	N/A	325	N/A			
Volunteer Development			41400	4600	46000		46000	N/A	N/A	250+	N/A			
			////////	0	0		0							
			////////	0	0		0							
			////////	0	0		0							
			////////	0	0		0							
			////////	0	0		0							
Total	69891	263805	276262	67773	677732	22725	700457	30661	////////	1516	53814			
Signature, Chairman, Board of Commissioners											Date			





CLASS/ACTIVITY HCCBG Advisory Committee  
DATE 05/14/2020 TIME 11:00 am - 12:00 pm  
LOCATION Virtual on Google Meeting  
INSTRUCTOR/Facilitator: Dennis W. Streets

Name	Phone	Email
Lacey Monte, Council on Aging		
Dennis Streets, Council on Aging		
Neriah Edwards-Boone - Senior		
Anne Kissel - Senior, immediate past STLH Delegate		
Linda Ellington - Senior		
Mary Warren, Triangle J Council of Governments		
Renee Minor, - Social Services		
Mike Zelek, Public Health		
David Marty - Senior		
Carissa Brown - Daymark		
Joyce Johnson - Senior		
Ed Regan, STLH Delegate, Senior		

Motion approved unanimously to recommend HCCBG County Funding Plan (DAS-731) and to also recommend how to use any additional HCCBG funds if they were to become available. Motion by David Marty; 2nd by Anne Kissel.

[www.chathamcoa.org](http://www.chathamcoa.org)  
Eastern Chatham Senior Center  
365 Hwy 87 N  
Pittsboro, NC 27312

Coordinator for Chatham Senior Games & SilverArts



# HCCBG Planning Committee Meeting, Chatham County Council on Aging

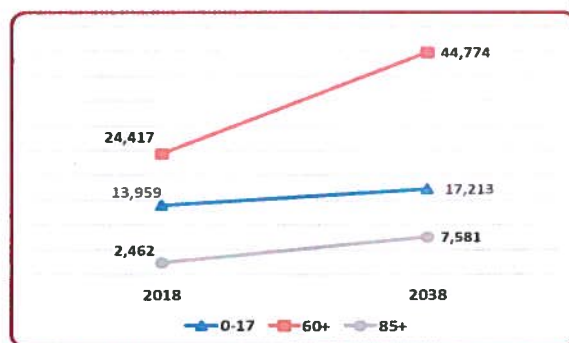
MAY 2020

OLDER AMERICANS MONTH & ELDER ABUSE AWARENESS

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## Chatham Demographics



Source: NC Office of State Budget and Management, certified population estimates and projections for Chatham County, December 2019.

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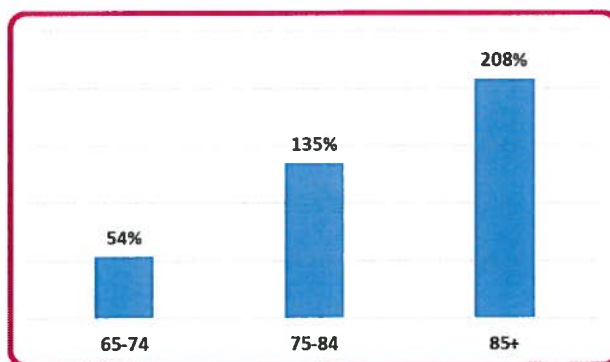
## Chatham Seniors by the Numbers

	Total	60+	85+
2018	74,264	24,417	2,462
2038	108,685	44,774	7,581
Growth (2018-2038)	46%	83%	208%

Source: NC Office of State Budget and Management, certified population estimates and projections for Chatham County, December 2019.

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## Projected growth of population 65+, by age group between 2018-2038



Source: NC Office of State Budget and Management, certified population estimates and projections for Chatham County, December 2019.

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## Grants to states for community planning & services— nationwide aging infrastructure

States required to develop a “comprehensive and coordinated service system” in partnership with AAAs (1973)

Located in the regional Councils of Government, AAAs have functions in five basic areas:

[illegible]

Area Agency on Aging

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## Comprehensive systems of services include:

**Access services** - such as transportation, outreach, and assessment;

**Community services** - such as congregate meals, education, legal services and counseling, elder abuse services, and senior center programs;

**In-home services** - such as home health, in-home aide, and home-delivered meals.

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## The Chatham County Council on Aging

The Council promotes and supports independent living, and the physical and mental wellness of persons aged 60 and older through a wide range of services. The Council also supports family caregivers of older adults striving to remain at home. Special emphasis is given to reaching the *socially and economically* needy, and in particular, those who are not eligible for Medicaid but cannot afford to pay for services themselves.

- Latest independent audit and TJCOG monitoring = no deficiencies
- Recipient of the 2018 GSK IMPACT Award and 2019 Ernest B. Messer Award

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### Reaching the Socially and Economically Needy under the Home and Community Care Block Grant in Chatham County

Characteristics	HCCBG Participants FY 2019-20	General Chatham Population 60+, 2018
<b>Women</b>	72%	56%
<b>Minority/People of Color</b>	48%	14%
<b>Age 75+ (from previous period)</b>	58%	34%
<b>Living Alone</b>	53%	25%
<b>Reported Low Income</b>	48%	7% <100%poverty 24% <200% poverty

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## COA and County Have a Formal Agreement

COA agrees to meet the needs of elderly in Chatham by promoting independent living, supporting family caregiving, enhancing physical and mental wellness, and coordinating community, financial and volunteer resources.

COA agrees to serve as the local Designated Lead Agency for the State's HCCBG and administer HCCBG services under the funding plan recommended by the citizen advisory committee and approved by the Commissioners.

COA is expected to collaborate with other health and human services agencies.

COA must maintain satisfactory HCCBG reviews conducted by the Triangle J Area Agency on Aging.

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Getting old can be lonely  
and challenging....

So we offer services,  
programs and volunteer  
opportunities....

So that seniors feel more  
secure and live more  
fulfilling lives.

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## There are Many Stories to Tell of How We Are Making a Difference

Helping People Stay Active & Well

Keeping Seniors Engaged

Helping Seniors Remain Safe at Home

Supporting Families

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## Help People Stay Active & Well— The New World under COVID-19

**Online Offerings  
& Other Helpful Resources  
to Stay Connected  
from Home!**

Linkages Updated Regularly with New & Exciting Additions



- Extensive online and virtual classes and activities—see [www.chathamcoa.org](http://www.chathamcoa.org)

*One participant early on said that she is "tired of watching TV". After she has her coffee in the morning, she does her exercise because she can "hear your (Jackie's) big mouth telling me to raise this arm, raise the other"...Jackie added that it was hysterical to hear her but also rewarding to know that Jackie can still impact her when we aren't together and that it is helping her take care of herself in the crazy time. This congregant participant has been properly following the advice of physical distancing and hasn't been away from her house since March 12<sup>th</sup> and she can't wait until she can return to the center. This person is now a regular participant in various virtual activities.*

*Another: "[My husband and I] are very impressed with the efforts being made to help seniors in Chatham County during this COVID-19 pandemic. The online exercise classes with Jackie are fantastic. I am attending more classes than I used to attend in person. Thank you so much."*

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## Keep Seniors Engaged during COVID-19

- Extensive online and virtual classes and activities—see [www.chathamcoa.org](http://www.chathamcoa.org)
- Creating an online *couch to couch* conference and concert series—building off the Senior Education Conference and our previous music events—already committed are:
  - Tony Williamson--an internationally renowned mandolin player from Chatham whose compositions integrate everything from traditional Piedmont string band tunes to classical music and jazz.
  - Chatham Rabbits—Americana duo from Bynum in Chatham singing original songs—described by New York Times as "not purists...not hip. They're more than that: they're North Carolina musicians, meaning they belong nowhere and everywhere at the same time."
  - Dr. Jack Kuritzky, maintaining cardiovascular health during COVID-19

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## Help Seniors Remain Safe at Home during COVID-19

- ☐ Providing shelf-stable and frozen meals
- ☐ Providing friendly, check-in calls
- ☐ Offering facilitated peer-support calls
- ☐ Providing incontinence supplies
- ☐ Offering pet supplies and other supplies upon request
- ☐ Offering assistive equipment
- ☐ Providing in-home personal care
- ☐ Providing family caregiver respite
- ☐ Arranging rides to essential medical appointments
- ☐ Researching, connecting and producing materials to help



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## Support Families during COVID-19

- ☐ Providing respite to family caregivers [State is now allowing annual support to increase from \$2,500 to \$5,000 for family caregiver until June 30, 2020]
- ☐ Providing friendly, check-in calls to caregivers
- ☐ Other services and supports available [as referenced in the slide on helping seniors remain living safely at home]



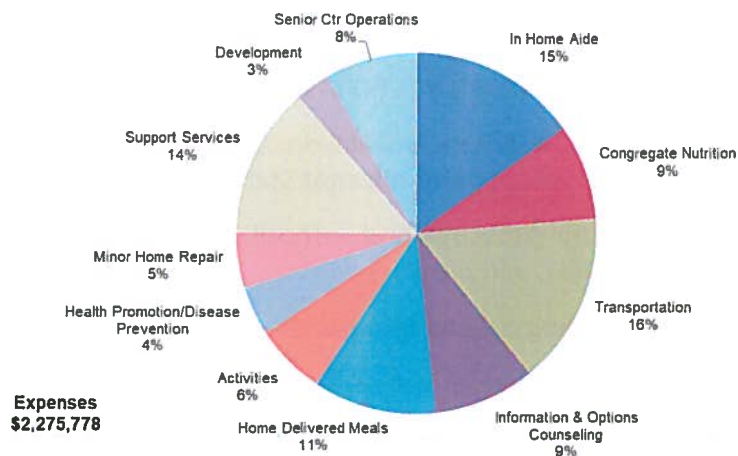
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**Chatham Reported Public Expenditures by Agency/  
Funding Source for Services to 60+, SFY 2018-19 [17-18]**

<b>Agency/ Funding Source</b>	<b>Total Expenditures</b>	<b>Percent of Total</b>
Medical Assistance	\$20,002,584 [1%+]	77.3% [79%]
Mental Health	\$3,632,433 [17%+]	14.1% [12.3% ]
Social Services	\$1,255,934 [2%+]	4.9% [4.9%]
Aging and Adult Services	\$838,072 [13%+]	3.2% [3.0%]
Other Agencies	\$137,532 [49%-]	0.5% [0.8%]
<b>TOTAL</b>	<b>\$25,866,555 [3%+]</b>	<b>100%</b>

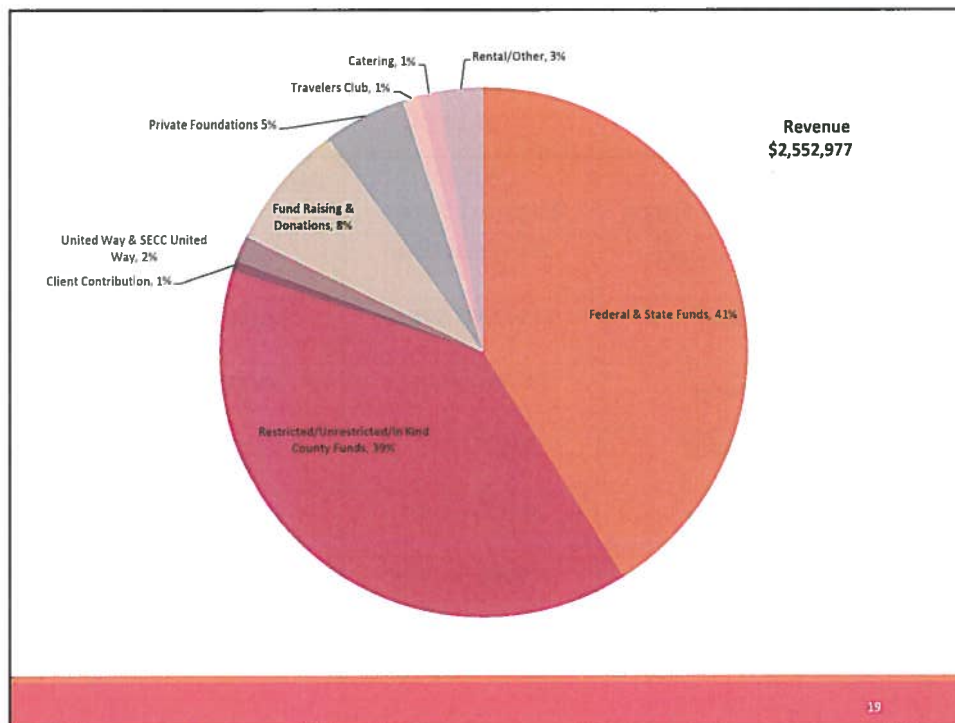
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Fiscal Year: July 1, 2018- June 30, 2019



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## Overview of Home and Community Care Block Grant (HCCBG)



General Assembly established HCCBG in July 1992

Combined federal Older Americans Act, Social Services Block Grant (SSBG) in support of respite, and relevant State Appropriations

Gave counties greater discretion and authority in determining services, service levels, and providers

Counties choose among 17 eligible services

Focus on supporting frail elderly at home, improving physical & mental health, assisting with access to services & information, providing family caregiver relief, and helping seniors remain active



### Development of the County Funding Plan—County Board of Commissioners' responsibilities for the planning, coordination, and implementation of the county funding plan:

- Designation of an agency or office within the county with lead responsibility for planning and coordination of the county funding plan. **The designation can be for more than one (1) year. The length of designation is at the discretion of the board of commissioners.**
- Appointment of a committee to serve as a Block Grant Advisory Committee to the lead agency for planning and coordination in the development of the county funding plan. **The length committee members' appointment is determined by the board of commissioners.** The Division strongly recommends that older adults comprise no less than 1/3 of Advisory Committee membership.
- Ensuring that the county funding plan is in compliance with budgetary instructions provided by the Division of Aging and Adult Services.
- Submission of the recommended county funding plan to the area agency on aging and entering into a grant agreement with the Area Agency on Aging.

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### HCCBG Services

*Chatham's HCCBG services in SFY 2019-20 and Proposed for SFY 2020-21*

Adult Day Care	Health Screening	Mental Health Counseling
Adult Day Health Care	Home-Delivered Meals	Senior Center Operations
Care Management	Housing & Home Improvement	Senior Companion
Congregate Nutrition	Information and Options Counseling	Skilled Home (Health) Care
Group Respite	In-Home Aide (levels I, II, III, IV)	Transportation
Health Promotion & Disease Prevention	Institutional Respite Care	Volunteer Program Development

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## Chatham's HCCBG Service Selection— Rationale

Core Long-Term Services and Supports = In-home aide and Home-delivered meals (Meals on Wheels)

Person-centered Information Brokerage = Information and Options Counseling and Senior Center Operations

Wellness and Primary and Secondary Prevention = Congregate Nutrition, Senior Center Operations, and Health Promotion

Volunteer Program Development = core to provision of many other services

Other funding sources (e.g., County, DOT, federal Family Caregiver Support, United Way, private grants, donations) support other vital services (e.g., general and medical transportation, caregiver respite, minor home modification and repair, emergency assistance).

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## Service Definitions

### In-Home Aide

The provision of paraprofessional services which assist functionally impaired older adults and/or their families with essential home management, personal care and/or supervision necessary to enable the older adult to remain at home as long as possible.

### Home-Delivered Meals [Meals-on-Wheels]

The provision of a home delivered meal that provides 1/3 of the Recommended Daily Dietary Allowance to a home-bound older adult.

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## Service Definitions

### Information and Options Counseling

A service designed to link persons with resources available to meet their needs and/or interests. The primary goal is to provide a continuum of access services (information, assistance and options counseling) to facilitate informed decision-making about the range of long-term services and supports and serve a key role in the streamlined access to supports.

### Senior Center Operations

Operation of a multipurpose senior center includes the provision of a broad spectrum of services and activities for older adults. The primary objectives of a multipurpose senior center are: the centralized provision of services which address the special needs of older adults; opportunities for older adults to become more involved in the community; and the prevention of loneliness and premature institutionalization by promoting personal independence and wellness.

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## Service Definitions

### Congregate Nutrition

A service which assists older adults, their families and others acting on behalf of older adults, in their efforts to acquire information about programs and services and to assist older persons with obtaining appropriate services to meet their needs. Options Counseling provides guidance to individuals as they make informed choices about long-term services and supports.

### Health Promotion (Title IIIB)

Funds can be used to support health promotion and/or disease prevention activities that are not allowable with Title IIID (evidence-based funds). These activities relate to the prevention and mitigation of the effects of chronic disease and can address such other areas as stress management, falls prevention, physical activity, nutrition, smoking cessation, and substance abuse.

### Volunteer Program Development

The development of a systematic process of utilizing volunteers of all ages to support community services for older adults.

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## Service Priorities

Once community service providers have determined that individuals meet the eligibility criteria for a given service as specified in the service standard, individuals must be served in the following priority order:

1. Older adults for whom the need for Adult Protective Services has been substantiated by the local department of social services and the service is needed as part of the adult protective service plan.
2. Older adults who are at risk of abuse, neglect, and/or exploitation.
3. Older adults with extensive impairments in activities of daily living (ADL's), or instrumental activities of daily living (IADL's), who are at risk of placement or substitute care.

"ADL's" include: eating, dressing, bathing, toileting, bowel and bladder control, transfers, ambulation and communication (ability to express needs to others e.g. speech, written word, signing, gestures, communication devices).

"IADL's" include: meal preparation, medication intake, cleaning, money management, phone use, laundering, reading, writing, shopping and going to necessary activities.

4. Older adults with extensive ADL or IADL impairments.
5. Older adults with less extensive (1-2) ADL or IADL impairments.
6. Well Older Adults.

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## Other Factors Considered in Proposed Funds Allocation and Projected Clients & Service Units

- COVID has changed how CoA is conducting business—at least temporarily:
  - purchase of shelf-stable meals; continuous production of frozen meals
  - production of virtual exercise, social and educational activities—see <https://chathamcouncilonaging.org/coa-virtual-activities/>
  - extensive phone calling for check-in visits, facilitating virtual peer support groups and counseling/information/reassurance
  - considering regionally connected consumer-directed in-home aide model given client and aide concerns about COVID
  - with State's permission, doubling allowed # of hours of respite per family caregiver
- Have renewed in-home Aide contracts at same unit cost
- County has indicated willingness to support family caregiver respite (\$35K) to help keep seniors out of facilities and expand CoA's general allocation to support its basic capacity (\$25K) in recognizing CoA's response to increased demand for service. Budget recommendation awaits Board of Commissioners' approval.
- COVID has stopped or at least severely diminished some sources of income with no group activities and the centers closed to the public: fundraising, rental income, donations from Friday Night Dances in Siler City, some catering (e.g., Rotary).
- There will be some additional federal emergency relief from the Families First Coronavirus Response Act for nutrition and transportation programs but still waiting for specific instructions on these funds.

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## Review of Proposed County Funding Plan for FY 2020-21

Service	Initial FY 18-19/Revised FY 18-19	FY 19-20	Proposed FY 20-21
Sr Ctr Operations	\$119,562/\$183,562	\$119,562	\$119,562
Cong Nutrition	\$95,000	\$95,000	\$95,000
HD Meals	\$116,218	\$116,218	\$116,218
Info & Options Counseling	\$52,000	\$62,000	\$69,891
In-Home Aide (II/III)	\$193,216/\$129,216	\$147,587	\$147,587
HPDP	\$20,300	\$20,300	\$20,300
Vol Development	\$36,400	\$41,400	\$41,400
Total	\$632,696	\$602,067	\$609,958

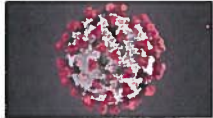
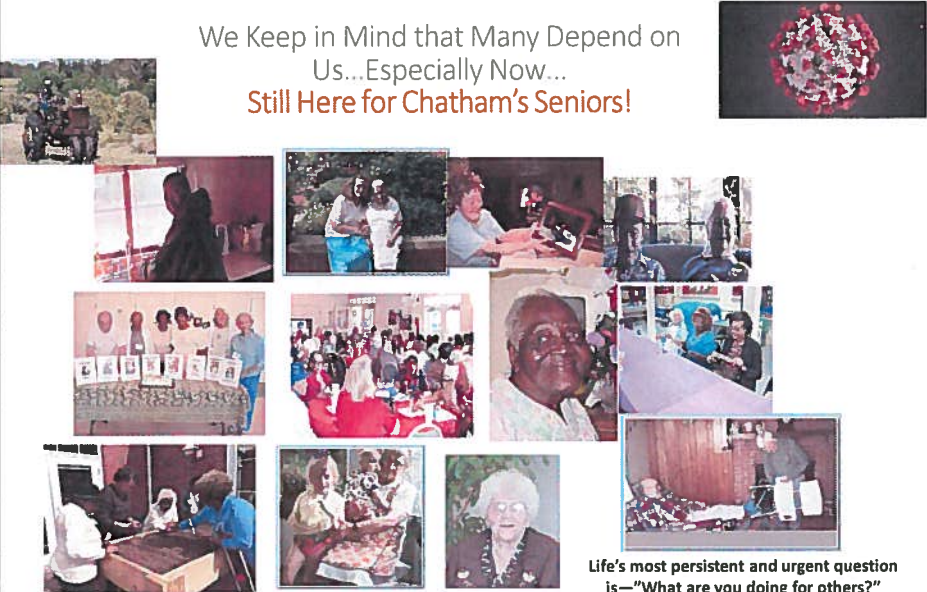
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## Your Actions Requested

- ☐ Review and recommend proposed County Funding Plan for the Home and Community Care Block Grant for Fiscal Year July 1, 2020 through June 30, 2021
- ☐ Recommend use of any additional HCCBG funds (federal and/or state) received this year
- COA suggests applying any increased HCCBG funding to Senior Center Operations first as needed, followed by Information & Options Counseling (second), and then Home-Delivered Meals, Congregate Nutrition, and In-Home Aide respectively.

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We Keep in Mind that Many Depend on  
Us...Especially Now...  
**Still Here for Chatham's Seniors!**



Life's most persistent and urgent question  
is—"What are you doing for others?"  
—Rev. Martin Luther King, Jr.

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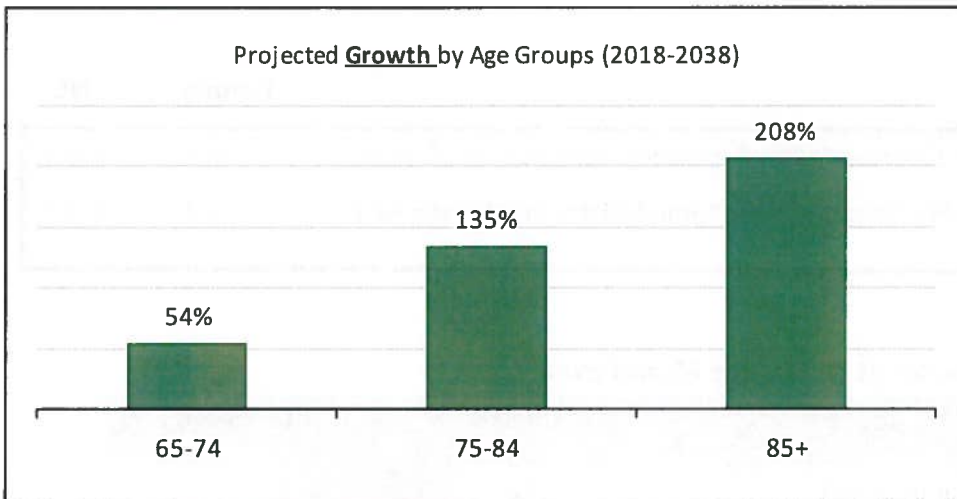


# Chatham

## Aging profile, 2018

Ages	2018		2038		% Change (2018-2038)
	#	%	#	%	
Total	74,264		108,685		46.3%
0-17	13,959	19%	17,213	16%	23.3%
18-44	20,302	27%	27,732	26%	36.6%
45-59	15,586	21%	18,966	18%	21.7%
60+	24,417	33%	44,774	41%	83.4%
65+	18,789	25%	37,396	34%	99.0%
85+	2,462	3%	7,581	7%	207.9%

As the baby boomer population continues to age, the proportion of the older adult population will increase in the coming decades.



### Population 65 and Over

Race/Ethnicity	County	County(%)	NC	NC(%)
White alone	14,094	86.4%	1,257,535	80.0%
Black or African American alone	1,900	11.7%	259,284	16.5%
American Indian and Alaska Native alone	35	0.2%	14,827	0.9%
Asian alone	198	1.2%	20,960	1.3%
Some other race	0	0.0%	7,340	0.5%
Two or more races	79	0.5%	10,694	0.7%
Hispanic or Latino (of any race)	328	2.0%	30,448	1.9%
White alone (Not Hispanic or Latino)	13,766	84.4%	1,236,725	78.7%

# Chatham

Characteristics of people 65 and over	County	County (%)	NC	NC (%)
Speak English less than "very well"	368	2.3%	35,493	2.3%
Veterans	2,687	16.5%	298,320	19.0%
In group quarters	449	2.8%	44,118	2.8%
Living alone	4,143	25.4%	416,121	26.5%
In labor force	2,898	17.8%	257,355	16.4%
High school graduate, GED, or alternative	4,335	26.6%	489,751	31.2%
Less than high school graduate	1,728	10.6%	274,841	17.5%
With one or more disabilities	5,071	32.0%	548,116	35.8%
Below 100% poverty level	1,110	7.0%	141,318	9.2%
In 100%-199% poverty level	2,703	17.0%	336,013	22.0%

## Grandparents....

	County	NC
Grandparents (age 30+) responsible for grandchildren under 18 years	469	94,631
Grandparents (age 60+) responsible for grandchildren under 18 years	147	38,541

## Top five leading causes of death, age 65 and over

Rank	Cause	# of deaths	% of total deaths
1	Diseases of the heart	132	22
2	Cancer	126	21
3	Cerebrovascular disease	40	7
4	Alzheimer's disease	39	6
5	Chronic lower respiratory diseases	25	4

\*%s are given as a percentage of age group

## References:

NC Office of State Budget and Management, county estimates and projections. <http://www.osbm.ncgov/facts-figures/demographics>

NC State Center for Health Statistics. Leading causes of death, 2018

US Census Bureau. American Community Survey, 2014-2018, five year estimates.

## North Carolina Population Change

Age	2018		2038		% Change 2018-2038
	#	%	#	%	
Total	10,389,148		12,799,658		23%
60+	2,312,272	22%	3,396,057	27%	47%
65+	1,676,545	16%	2,696,529	21%	61%
85+	186,059	2%	397,328	3%	114%

NC growth by age groups 2018- 2038  
65-74(35%) 75-84(94%) 85+(114%)



**Table 1V. Schedule of Expenditures by County, Service and Service Category for Clients 60+ Years of Age: SFY 2018-2019**

<b>Chatham</b>			
	<b>Category</b>	<b>Clients</b>	<b>Expenditure</b>
<b>Department of Transportation</b>			
Elderly and Disabled Transportation Assistance Program	6		\$92,804
	<i>Total:</i>		\$92,804
<b>Division of Aging and Adult Services</b>			
Congregate Nutrition	6	218	\$125,080
Family Caregiver Support Program	6		\$58,977
Health Promotion/Disease Prevention	3		\$35,078
Home Delivered Meals	4	115	\$140,768
Information and Options Counseling	6		\$57,778
In-Home Level II	4	43	\$104,129
In-Home Level III	4	17	\$39,444
Legal Services	6		\$3,905
Senior Center	6		\$232,472
Volunteer Program Development	6		\$40,441
	<i>Total:</i>		\$838,072
<b>Division of Health Benefits (NC Medicaid)</b>			
ACH-PCS Basic/Enhanced	1	128	\$659,433
ACH-Transportation	1	128	\$12,680
CAP/CHOICE	4	7	\$112,568
CAP/DA	4	70	\$1,376,161
Clinics	3	202	\$93,237
Dental	3	345	\$117,920

HMO	2	1,205	\$1,809,996
Home Health	4	369	\$440,257
Hospice	4	44	\$653,177
Inpatient Hospital	5	149	\$777,392
Lab & XRay/Physicians	3	1,182	\$693,835
Medicare Part A&B Premiums	2	1,593	\$1,910,752
Medicare Part D Clawback	2	955	\$919,306
Nursing Homes	5	311	\$8,389,412
Other Care	3	332	\$99,634
Other Practitioners	3	330	\$18,139
Outpatient Hospital	3	678	\$737,867
Prescribed Drugs	3	356	\$401,296
Regular Personal Care (PCS)	4	120	\$779,522
	<i>Total:</i>		\$20,002,584

#### **Division of Mental Health/Developmental Disabilities/Substance Abuse Services**

Alcohol Rehabilitation Centers	5	3	\$58,984
Developmental Disabilities	3	16	\$98,369
Mental Health	3	76	\$62,813
Mental Retardation Centers	5	5	\$1,392,973
Psychiatric Hospitals	5	10	\$1,975,485
Substance Abuse	3	29	\$43,808
	<i>Total:</i>		\$3,632,433

#### **Division of Services for the Blind**

Adjustment Services for the Blind and Visually Impaired	6	11	\$1,754
Independent Living Rehabilitation Program	3	14	\$7,477
Rehabilitation	3		\$125
	<i>Total:</i>		\$9,356

**Division of Social Services**

Energy Assistance - CIP	2	285	\$52,133
Energy Assistance - LIEAP	2	427	\$50,364
Food and Nutrition Services	2	856	\$815,637
Special Assistance: Adult Care Home	1	51	\$256,887
Special Assistance: In-Home	4	16	\$80,913
		<i>Total:</i>	\$1,255,934

**Division of Vocational Rehabilitation**

Independent Living	3	8	\$30,156
Vocational Rehabilitation	6	10	\$5,216
		<i>Total:</i>	\$35,372
		<b>County Total</b>	<b>\$25,866,555</b>

