

Chatham County Council on Aging, Inc. Date: May 24, 2016

Home & Community Care Block Grant Meeting

Attendance Log

Pennis W. Streets, Chatham COA

Mike Zelek, Health dept.

Ellison Jones, Triangle J AART

Amie Kissel

Rebecca Blalock

David Marty

BRETT MOLAES COA

Margaret Kirkman, DSS

Action on Funding Plan

Motion to approve: David Marty

Second: Rebecca Blalock

Unanimous approval

Length of Meeting: 2:30-3:30 pm



North Carolina Department of Health and Human Services

Pat McCrory
Governor

Richard O. Brajer
Secretary

Suzanne P. Merrill, Director
Division of Aging and Adult Services

February 24, 2016

DAAS Administrative Letter No. 16-02

To: AAA Directors

Subject: SFY 14-15 County Aging Services Data and SFY 16-17 County Budget Instructions

Each year the Aging County Data Package is released for use by local committees in recommending a funding plan for the Home and Community Care Block Grant (HCCBG). The explanation of the State and County Expenditure Report for State Fiscal Year (SFY) 2014-2015, as well as the expenditure reports by county, agency, and service can be accessed at <http://www.ncdhhs.gov/divisions/daas/data-reports>. The Area Agency on Aging (AAA) will provide these reports to the lead planning agency for the Home and Community Care Block Grant in the county by March 1, 2016. The AAA's will also share the information with Chairs of the County Boards of Commissioners, County Managers and Local Aging Services Providers. The AAA can forward this Administrative Letter and/or develop its own correspondence.

The SFY 2016-17 Home and Community Care Block Grant (HCCBG) Budget Instructions, along with HCCBG formats are available through the Division's website at <http://www.ncdhhs.gov/document/home-and-community-care-block-grant-hccbg-county-budget-instructions-documents>. HCCBG instructions are unchanged from last year. Effective cost development for services should continue to be emphasized. Potential service providers must give lead agencies service cost-computation worksheets and labor distribution schedules along with their service summaries, as specified on page 16 of the HCCBG Budget Instructions.

The Division of Aging and Adult Services (DAAS) reviews current demographics related to the HCCBG Intrastate Funding Formula with Area Agencies on Aging and will allocate the funding to counties upon receipt of the full FY 2015 Title III funding through the U.S. Administration for Community Living. Until the new HCCBG allocations are received, SFY 2015-16 funding should be a satisfactory planning estimate for next SFY.

Sincerely,

Suzanne P. Merrill
Director

SPM/JB:sr

www.ncdhhs.gov

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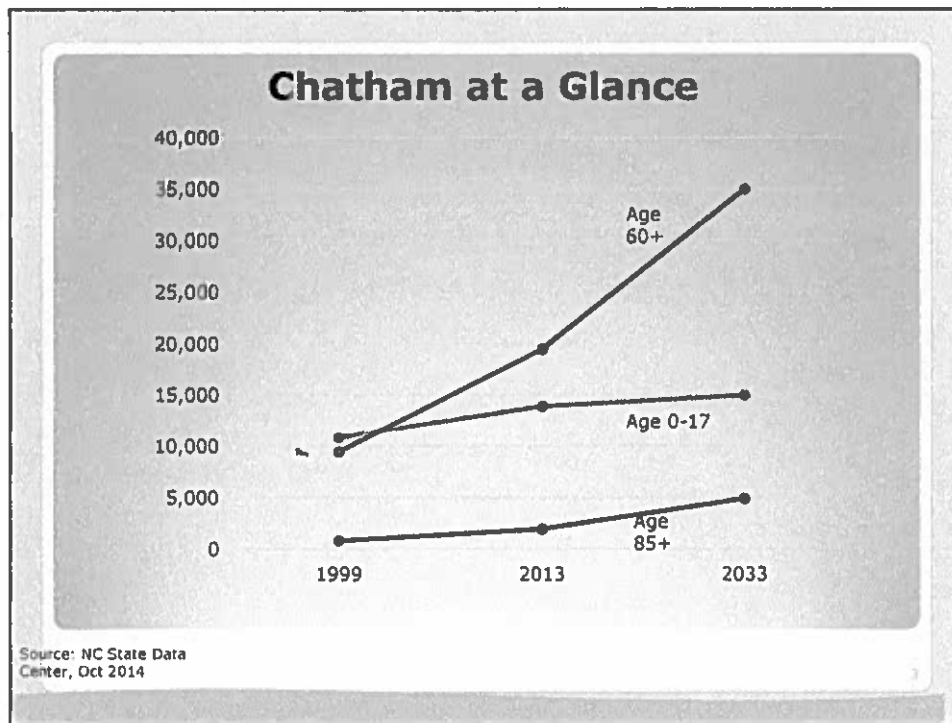
Region J HCCBG Allocation

COUNTY/REGION	SFY 2017 HCCBG	Local Match	Total Allocation Plus Local Match	Min Budget Requirement Access 30%	Min Budget Requirement In-Home 25%	Min Budget Requirement Congregate	Min Budget Requirement Home Del
CHATHAM	526,393	58,488	584,881	36,786	30,655	93,161	78,828
DURHAM	1,202,504	133,612	1,336,116	78,367	65,306	198,467	167,931
JOHNSTON	868,962	96,551	965,514	59,009	49,174	149,442	126,449
LEE	371,899	41,322	413,221	27,075	22,563	68,569	58,019
MOORE	703,604	78,178	781,782	47,737	39,781	120,895	102,294
ORANGE	592,820	65,869	658,689	41,268	34,390	104,511	88,431
WAKE	2,934,203	326,023	3,260,226	189,402	157,835	479,662	405,863
REGION J	7,200,386	800,043	8,000,429	479,644	399,704	1,214,707	1,027,816

**HCCBG Planning
Committee Meeting
Chatham County Council
on Aging**

May, 2016
Older Americans Month

**The Robust Graying of
Chatham County**




Older Americans Act, Public Law 89-73, July 14, 1965



- Broad national policy objectives on aging
- 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)

Area Agencies on Aging


Located in the regional Councils of Government. AAAs have functions in five basic areas:
(1) advocacy; (2) planning; (3) program and resource development; (4) information brokerage; and (5) funds administration and quality assurance.



Area Agency on Aging

The map shows the outline of North Carolina divided into counties. Letters A through R are placed in various locations across the state to indicate the presence of Area Agencies on Aging. For example, 'A' is in the western part, 'B' in the northwestern part, 'C' in the north-central part, 'D' in the northern part, 'E' in the central part, 'F' in the south-central part, 'G' in the western part, 'H' in the northwestern part, 'I' in the north-central part, 'J' in the central part, 'K' in the north-central part, 'L' in the north-central part, 'M' in the central part, 'N' in the south-central part, 'O' in the eastern part, 'P' in the eastern part, and 'R' in the eastern part.

Comprehensive systems of services include:



- Access services - such as transportation, outreach, and information and options counseling;
- Community services - such as congregate meals, education, senior center programs, and volunteer program development;
- In-home services - such as home health, in-home aide, and home-delivered meals.

**Chatham's Reported Public Expenditures by State Agency/
Funding Source for Services to 60+, SFY 2014-15**

Agency/ Funding Source	Total Expenditures	Percent of Total
Medical Assistance	\$17,945,354	80.0%
Mental Health	\$1,978,416	8.8%
Social Services	\$1,741,339	7.7%
Aging and Adult Services	\$689,802	3.0%
Other Agencies	\$129,027]	0.5%
TOTAL	\$22,483,938	100%

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.

COA Budget and Funding

- Our COA budget totals about \$2.1 million
- Program expenses represent about 90% of our total expenses—well above the industry standard
- County support is our largest single revenue source—totaling about \$963k or 44%—still this is less than 1% of County expenditures
- Next biggest source is State & Federal \$ thru TJCOG, at about 30%
- Another major source is nearly \$328k in other State grants, mostly Department of Transportation—about 16% of our revenue
- The remaining part is an assortment of private and competitive grants (including United Way), donations, consumer contributions, rental and catering income, and other fundraising.

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 18 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

HCCBG Services

**Chatham's HCCBG services in SFY 2015-16*

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

AAA Monitoring—FY 2015-16

No Compliance Findings

- ✓ Information & Options Counseling
- Housing & Home Improvement
- ❖ Senior Center Operations
- § Fiscal Review

Compliance Finding

- Congregate & Home-Delivered Nutrition

The approved menu had not been followed exactly for the month of January.

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

Characteristics	HCCBG Participants	General Chatham Population 65+
Women	74%	56%
Minority	41%	13%
Living Alone	53%	26%
Reported Low Income	39%	6% <poverty 24% <200% poverty

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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 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

**Proposed for SFY 2016-17*

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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HCCBG Service Selection— Rationale

- **Vital Long-Term Services and Supports**= In-home aide and Home-delivered meals
- **Person-centered Information Brokerage**= Information and Options Counseling
- **Wellness and Primary and Secondary Prevention**= Congregate Nutrition and Senior Center Operations
- **Volunteer Program Development**= core to provision of many other services
- Other funding sources support other vital services, such as DOT funding of general and medical transportation; private grants and County support for housing/minor home repair (State requirements overly onerous for resources used)

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.

Sample Requests for Service— Needs/Problems

- Client lives alone. Unable to prepare meal. No services in home.
- Client has memory issues, diabetic, and COPD. Her son is on disability and unable to prepare meal. Requests frozen meals.
- Client is in Chatham Hospital, Rehab. She recently fell and has brace on right leg. Had stroke several years ago. Needs personal care, assistance with dressing, prepare breakfast and lunch. Heat frozen meal in microwave, light housekeeping, laundry, clean bathroom, clean kitchen, make bed, change linen.
- Client is blind and returning back to her home at the end of July. Her granddaughter-in-law is trying to set up Meals on Wheels for her and possibly in-home aide services.
- Client has diabetes, Pacemaker put in August 2013, hypertension. Needs personal care, assist with bath, laundry, fold client's clothes, take trash out, on Wednesday pull trash to drive way to be picked up and light housekeeping.
- Client is looking to get her bathroom modified. She lives alone and uses a walker all the time. She has a bathtub in her bathroom that she cannot use because she is unsteady and falls when she does. Also may need a lift chair.
- Client came home from the hospital; inquirer is concerned that family members aren't doing enough for him (hinted at some family discontent). Primary concern though is the heat- his A/C recently went out (some sort of pump issue), but thinks that he would benefit from Meals on Wheels as well.

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 of the service 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.

Service Definitions

Congregate Nutrition

Provides a meal, typically lunch, which offers one-third of the recommended daily dietary allowance and is provided in a group setting.

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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Portrait of COA's Programs & Services for FY 2016-17

HCCBG-funded Services

- Congregate [Senior Center] Meals
- Home-Delivered Meals [Meals-on-Wheels]
- In-Home Aide [levels II & III]
- Senior Center Operations
- Information & Options Counseling
- Volunteer Program Development

Other

- Transportation [general and medical]
- Minor Home Repair
- Frozen Meals
- Health Promotion/Disease Prevention & Management, including *Matter of Balance* and *Arthritis Foundation Exercise Program*
- Exercise & Fitness, including Senior Games & Silver Arts, Hiking and Travelers Clubs
- Equipment Loan Program
- Friendly Callers & Visitors
- Sitter List
- Music & Memory
- Family Caregiver Supports
- Food Pantry
- SHIIP, VITA, AARP Chapter, etc.

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Making a Difference in the Lives of Chatham Seniors and Families

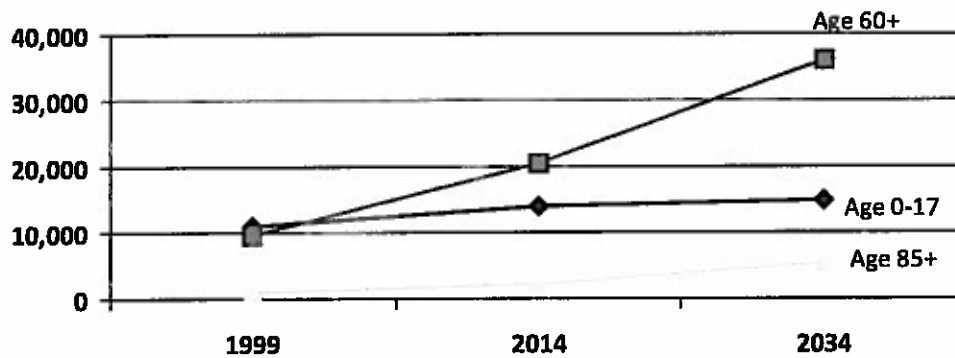
- *"No words can express my deepest gratitude for all the years of support for my mother and me. I could not have gone to work and done my job if not for the aides and meals on wheels."*—a family member of client
- *"Thank you for the use of the mattress for my Dad and for all the help you have given both my Mom and Dad."*—daughter of clients who received various services from the Council
- *"Without senior centers, a lot of the older people are neglected...just stay home with no place to go. If you stayed at home, you might not eat. And the transportation is so important. I'd be lost without these wonderful services."*—a Senior Center participant
- *"I am a diabetic and both of my legs and feet were in very bad shape. I knew I would soon lose them—they were so swollen and infected. Within 2 weeks of receiving the wheelchair from you, a "miracle."—recipient*
- *"It really is important for us seniors to know that someone cares enough to bring us a meal—otherwise I would not eat a nutritious meal on some days. I also really enjoy the volunteer visits and conversation and desperately need the transportation I get to doctors' appointments."*—an 80-year-old wheelchair-bound recipient
- *"If it hadn't been for your program this past year and a half...I don't know what I would have done. It's been a rewarding time."*—Caregiver Support Recipient

Chatham

Aging profile

Ages	2014		2034		% Change (2014-2034)
	#	%	#	%	
Total	68,725		91,289		32.8%
0-17	13,886	20%	14,783	16%	6.5%
18-44	19,610	29%	24,630	27%	25.6%
45-59	14,815	22%	15,871	17%	7.1%
60+	20,414	30%	36,005	39%	76.4%
65+	15,189	22%	29,475	32%	94.1%
85+	2,055	3%	5,288	6%	157.3%

Population Change



Projected change of population 65+, by age group (2014-2034)

Ages	65-74	75-84	85+
County	55%	142%	157%
State	48%	103%	92%

* Of the population 65+, the age group 75-84 will grow more rapidly in the next 2 decades. Beyond 2030, the growth will shift into the ages 85+, as the baby boomers move into this age group. However, 44 counties in the state are already projected to have more growth in the 85+ population (2014-2034).

*As % of age group

*Source: NC Office of State Budget and Management, Oct 2015

*NC population change (2014-2034) is on page 4

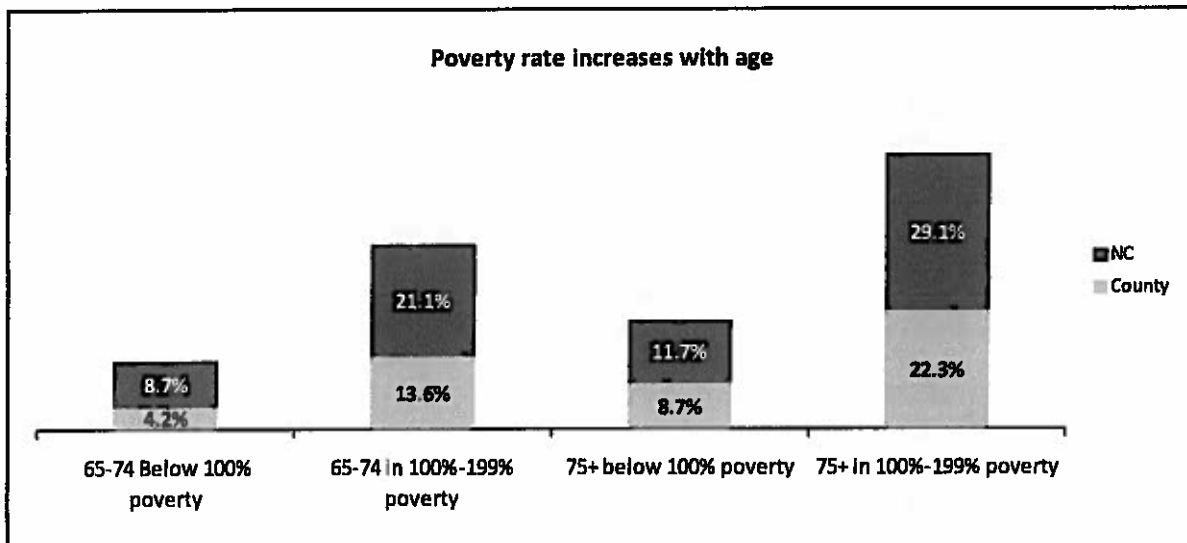
Chatham

	<u>County</u>		<u>North Carolina</u>	
	<u>#</u>	<u>%*</u>	<u>#</u>	<u>%*</u>
<u>Demography, other, 2014</u>				
Veterans (age 65+)	3,265	23.4%	288,499	21.4%
Grandparents (age 30+) responsible for grandchildren age less than 18	486		100,472	
Grandparents (age 60+) responsible for grandchildren age less than 18	155		34,797	
Persons age 65+ who speak English less than "very well"	42	0.3%	25,242	1.9%
<u>Ethnicity/Race, age 65+, 2014</u>				
White alone	12,152	86.9%	1,095,770	81.4%
Black or African American alone	1,670	11.9%	212,964	15.8%
American Indian and Alaska Native alone	42	0.3%	11,118	0.8%
Asian alone	69	0.5%	14,316	1.1%
Hispanic or Latino (of any race)	111	0.8%	20,756	1.5%
Some other race	0	0.0%	4,069	0.3%
Two or more races	47	0.3%	7,615	0.6%
<u>Housing, age 65+, 2014</u>				
Homeowners	7,086	84.4%	689,387	81.7%
Living alone	3,558	26.3%	364,683	28.0%
In group quarters	476	3.4%	45,452	3.4%
<u>Income/Workforce, age 65+, 2014</u>				
Median household income (\$)	49,129		35,024	
In labor force	2,320	16.6%	211,200	15.7%
<u>Level of education, age 65+, 2014</u>				
Less than high school graduate	2,064	14.8%	300,422	22.3%
High school graduate, GED, or alternative	3,780	27.0%	434,826	32.3%
Some college or associate's degree	2,848	20.4%	320,376	23.8%
Bachelor's degree or higher	5,288	37.8%	290,468	21.6%

*County/state %'s are given as a percentage of 65 and over, unless specified
 Source: American Community Survey 2010-2014

Chatham

	<u>County</u>		<u>North Carolina</u>	
	#	%*	#	%*
<u>Marital status, age 65+, 2014</u>				
Now married, except separated	8,752	62.6%	748,299	55.6%
Widowed	3,214	23.0%	375,141	27.9%
Separated	126	0.9%	20,545	1.5%
Never married	367	2.6%	50,922	3.8%
Divorced	1,521	10.9%	151,185	11.2%
<u>Number of disabilities, age 65+, 2014</u>				
With no disabilities	9,254	68.5%	811,626	62.2%
With one type of disability	1,884	13.9%	216,059	16.6%
With two or more types of disabilities	2,372	17.6%	277,153	21.2%
<u>Poverty, age 65+, 2014</u>				
Below 100% poverty level	832	6.2%	129,529	9.9%
In 100%-199% poverty level	2,344	17.4%	317,991	24.4%



*as a % of age group

References:

- Age groups:** NC Office of State Budget and Management. Population estimates and projections. Retrieved on 10/2015 from http://www.osbm.state.nc.us/ncosbm/facts_and_figures/socioeconomic_data/population_estimates.shtml
- Disabilities:** US Census Bureau, American Community Survey 2010-2014. Table C18108. Age by number of disabilities (civilian non-institutionalized population)
- Education:** US Census Bureau, American Community Survey 2010-2014. Table B15001. Sex by age by educational attainment for the population 18 years and over
- Grandparents:** US Census Bureau, American Community Survey 2010-2014. Table B10050. Grandparents living with own grandchildren under 18 years by responsibility for own grandchildren by length of time responsible for own grandchildren
- Housing:** US Census Bureau, American Community Survey 2010-2014. Table B25007. Tenure by age of the householder; Table B09020. Household type by relationship for population 65 years and over
- Labor force:** US Census Bureau, American Community Survey 2010-2014. Table B23001. Sex by age by employment status for the population 16 years and over
- Limited English Speaking Ability:** US Census Bureau, American Community Survey 2010-2014. Table B16004. Age by language spoken at home by ability to speak English for the population 5 years and over
- Marital Status:** US Census Bureau, American Community Survey 2010-2014. Table B12002. Sex by marital status by age for the population 16 years and over
- Median household income:** US Census Bureau, American Community Survey 2010-2014. Table B19049. Median household income in the past 12 months
- Poverty:** US Census Bureau, American Community Survey 2010-2014. Table B17024. Age by ratio of income to poverty level in the past 12 months
- Race/Ethnicity:** US Census Bureau, American Community Survey 2010-2014. Tables B01001, B01001A-I. Sex by age
- Veterans:** US Census Bureau, American Community Survey 2010-2014. Table B21001. Sex by age by Veteran status for the civilian population 18 years and over

Glossary

- Disability:** A long-lasting physical, mental, or emotional condition that makes it difficult for a person to do activities such as walking, climbing stairs, dressing, bathing, learning, or remembering
- Group Quarters:** Includes population not living in households. Two general categories of people are recognized. 1). Institutionalized population which includes people under formally authorized, supervised care or custody in institutions (such as correctional facilities, nursing homes and juvenile institutions) and 2) the noninstitutionalized population which includes all people who live in group quarters other than institutions (such as college dorms, military quarters and group homes)
- Hispanic or Latino:** Refers to a person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin regardless of race
- Household:** A household includes all the people who occupy a housing unit as their usual place of residence
- Labor force:** The labor force includes all people classified in the civilian labor force, plus members of the U.S. Armed Forces. The Civilian Labor Force consists of people classified as employed or unemployed
- Median household income:** This includes the income of the householder and all other individuals 15 years old and over in the household, whether they are related to the householder or not. The median divides the income distribution into two equal parts: one-half of the cases falling below the median income and one-half above the median
- Poverty:** The Census Bureau uses a set of money income thresholds that vary by family size and composition to determine who is in poverty. If the total income for a family or unrelated individual falls below the relevant poverty threshold, then the family (and every individual in it) or unrelated individual is considered in poverty. The poverty threshold (2014) for a person 65+ is \$12,316 and for a couple 65+ is \$15,853. These are not the same as Federal Poverty guidelines

Definitions of other terminology used in the report are available at:
<http://www.census.gov/glossary/>

NC State Aging Profile

Ages	2014		2034		% Change 2014-2034
	#	%	#	%	
Total	9,953,687		12,020,298		20.8%
60+	2,033,282	20.4%	3,163,037	26.3%	55.6%
65+	1,455,043	14.6%	2,459,532	20.5%	69.0%
85+	169,479	1.7%	325,964	2.7%	92.3%

Table IV. Schedule of Expenditures by County, Funding Source, Service and Service Category for Clients 60+ Years of Age: SFY 2014-2015

Chatham			
	<i>Category</i>	<i>Clients</i>	<i>Expenditure</i>
Department of Transportation			
Elderly and Disabled Transportation Assistance Program	6		\$62,524
	Total:		\$62,524
Division of Aging and Adult Services			
Congregate Nutrition	6	201	\$112,568
Family Caregiver Support Program	6		\$34,603
Health Promotion/Disease Prevention	3		\$6,283
Home Delivered Meals	4	127	\$131,865
Information and Options Counseling	6		\$89,124
In-Home Level II	4	32	\$108,408
In-Home Level III	4	11	\$62,485
Legal Services	6		\$2,393
Senior Center	6		\$142,073
	Total:		\$689,802
Division of Medical Assistance			
ACH-PCS Basic/Enhanced	1	115	\$591,612
ACH-Transportation	1	115	\$11,376
CAP/CHOICE	4	6	\$100,991
CAP/DA	4	63	\$1,234,625
Clinics	3	182	\$83,647
Dental	3	310	\$105,792
HMO	2	1,082	\$1,623,841
Home Health	4	331	\$394,978
Hospice	4	40	\$585,999
Inpatient Hospital	5	133	\$697,439
Lab & Xray/Physicians	3	1,061	\$622,475
Medicare Part A&B Premiums	2	1,430	\$1,714,234

Division of Medical Assistance

Medicare Part D Clawback	2	857	\$824,757
Nursing Homes	5	279	\$7,526,576
Other Care	3	298	\$89,386
Other Practitioners	3	296	\$16,273
Outpatient Hospital	3	609	\$661,979
Prescribed Drugs	3	320	\$360,023
Regular Personal Care (PCS)	4	107	\$699,349
Total:			\$17,945,354

Division of Mental Health/Developmental Disabilities/Substance Abuse Services

Developmental Disabilities	3	15	\$21,723
Mental Health	3	47	\$10,045
Mental Retardation Centers	5	3	\$661,981
Psychiatric Hospitals	5	8	\$1,276,254
Substance Abuse	3	4	\$8,414
Total:			\$1,978,416

Division of Services for the Blind

Adjustment Services for the Blind and Visually Impaired	6	11	\$37
Independent Living Rehabilitation Program	3	7	\$3,792
In-Home Level I	4		\$1,270
Rehabilitation	3	3	\$114
Total:			\$5,213

Division of Social Services

Adult Placement	6		\$2,636
Adult Protective Services	6	36	\$17,175
Energy Assistance - CIP	2	159	\$74,988
Energy Assistance - LIEAP	2	329	\$70,000
Food and Nutrition Services	2	809	\$869,245
Guardianship Services	6	28	\$23,929
In-Home Aide Services	4	36	\$45,732
Other Services	6	51	\$170,242

Division of Social Services

Special Assistance: Adult Care Home	1	107	\$371,355
Special Assistance: In-Home	4	26	\$93,213
Transportation	6	5	\$2,824
Total:			\$1,741,339

Division of Vocational Rehabilitation

Independent Living	3	16	\$33,713
Vocational Rehabilitation	6	13	\$27,577
Total:			\$61,290

County Total: \$22,483,938



Client Characteristics:

In-Home Aide Personal Care (level I and II) and Respite (level II)
 Current State Fiscal Year: 2016 (July 2015 through February 2016)
 Division of Aging and Adult Services, Leigh Hayden, 4/21/2016

*Note: Client data queried from NC DHHS Client Service Data Warehouse on 4/20/2016, minimal variations expected when comparing ARMS client data

Services

Service	State (#, %)		Region J (#, %)		Chatham County (#, %)	
Personal Care (lv II)	2110	77.8%	384	92.3%	27	75.0%
Personal Care (lv III)	507	18.7%	30	7.2%	8	22.2%
Respite (lv II)	96	3.5%	2	.5%	1	2.8%
Total Clients	2713		416		36	

Age

	State	Region J	Chatham County
Average Age (years)	81.2	80.7	83.4

Gender

Gender	State (#, %)		Region J (#, %)		Chatham County (#, %)	
Female	2133	78.6%	327	78.6%	26	72.2%
Male	580	21.4%	89	21.4%	10	27.8%
Total	2713		416		36	

Poverty

Poverty	State (#, %)		Region J (#, %)		Chatham County (#, %)	
At/below Poverty	1003	37.0%	195	46.9%	16	44.4%
Total	2713		416		36	

Household Size

	State (#, %)		Region J (#, %)		Chatham County (#, %)	
Lives Alone	1285	47.4%	206	49.5%	14	38.9%
Total	2713		416		36	

Functional Limitations

ADLs and IADLs

	State (#, %)		Region J (#, %)		Chatham County (#, %)	
Average Combined ADLs and IADLs (#)	8.3		8.2		10.2	
2+ ADLs	2089	77.0%	307	73.8%	34	94.4%
3+ ADLs	1166	43.0%	177	42.5%	19	52.8%
4+ ADLs	756	27.9%	123	29.6%	16	44.4%
2+ IADLs	2644	97.5%	402	96.6%	36	100%
3+ IADLs	2561	94.4%	389	93.5%	36	100%
4+ IALDs	2392	88.2%	362	87.0%	36	100%

Highlights of COA Consumer Surveys 2015

Congregate Meals

Item	ECSC		WCSC	
	2015 (N=17)	2014 (N=42)	2015 (N=44)	2014 (N=31)
Have participated 10+ years	48%	31%	22%	10% ¹
Have participated less than a year	18%	31%	16%	39%
Always get enough food	100%	91%	95%	78%
% saying that participation has helped them	76%	90%	100%	90%

Sample Comments (ECSC)

- If I hadn't started here, I would be homebound myself.
- I just love the people.

Sample Comments (WCSC)

- It's a break from my daily activities.
- I really like learning new faces and congregating with other senior citizens. Singing and playing the piano are also very entertaining.
- I really enjoy coming here. It gets me out of the house and helps me socialize.
- Good to have the company.
- I really enjoy the fellowship—you all are great!
- It has helped me lose weight, especially the food and exercise.
- We need to take care of our seniors, even though I am one. It's the right thing to do!

¹ A lot of our older clients were out last year due to illness/sickness/temporary rehab, etc. They have started back since then.

Home-Delivered Meals

Item	2015 (N=49)	2014 (N=36)
% receiving meals 5 x per week	88%	81%
Always satisfied with how food tastes	76%	72%
Always satisfied with variety of foods	96%	86%
Always satisfied with how food is packaged	100%	88%
Always get enough food for lunch	98%	81%
Volunteers are always polite	100%	89%
Know that contributions/donations are voluntary	92%	81%
Feel that overall health has improved due to participation	93%	80%
Would recommend lunch program to friends	100%	100%
Has helped participant remain living at home	94%	86%
% saying that participation has helped them	100%	98%
% rating program as 'excellent' or 'very good' overall	75%	70%

Sample Comments

- Thank you all, the people who bring the meals are good. I love you all.
- Many thanks to all of your volunteers. They are outstanding!
- Great variety of meals each week.
- If it ain't broke, don't fix it. Everything from fellowship, friendship and food is wonderful! Please don't change anything you all are doing!
- Food is always hot.
- Keep doing what you are doing. Thank you so much and God bless you all!
- More vegetables, like cooked cabbage, spinach, etc.—also more yogurts.
- I would recommend more traditional type of meals and hearty vegetables. Seniors are more familiar with this than vegetarian meals (salads, broccoli salads).
- Need more diabetic friendly foods.
- I am disabled, and meals keep my outlook positive and shows me people care.
- Meals being delivered keep me on lunch schedule—reminds me to eat.
- To get milk, juice and bread with meals makes a difference here at my home.
- [By providing] food for my mother, [I don't have] to worry about what or if she eats daily.
- The conversations with the people help me.
- I enjoy the fellowship with the volunteers. They make my day and me happy.
- I'm eating balanced meals now.
- Weight went from 101 lbs to 115 lbs.
- Less stress on preparing or how to get a meal.
- Makes it easier since I cannot get around to cook.

Volunteer Snapshot (July 2015 through March 2016)

- We had a total documented # of 8,609 volunteer hours through March, with a high of 1,396 in February. This is equivalent to more than 4 FTEs.
- Using United Way's figure of \$23.07 (estimated \$ value of volunteer time), these hours were worth \$198,610.
- Meals-on-Wheels volunteers provided an average of 218 hours of service per month.
- Other services relying regularly on volunteers include our congregate nutrition sites; groups, classes and activities; minor home repair; health support; staff support; SHIP, and the Board of Directors.
- VITA volunteers provided 1,319 hours of assistance during tax season.
- Other examples of volunteer service include: friendly callers, special events, assistive equipment loan program; and Senior Games.

Monday 2	Tuesday 3	Wednesday 4	Thursday 5	Friday 6
Fitness Room Open 8-5 3 am Exercise Class 9 am Tai Chi/9 am Walking 10 am Bible Study 10:30 am Arthritis Exercise 11:45 am Lunch 1 pm Mixed Media 5:15 pm Yoga/7 and 8 pm Shag	Fitness Room Open 8-5 8 am Exercise Class 9 am Walking Group 10:15 am Front Porch Ministry 11:15 am Senior Fitness 11:45 am Lunch 1 pm Rummikub	Fitness Room Open 8-5 8 am Exercise Class 9 am Tai Chi Class 9 am Walking Group 10:30 am Arthritis Express 11:15 Singing with Marie 11:45 am Lunch/ 1 pm Quilting 7 pm Dances for Peace	Fitness Room Open 8-5 8 am Exercise/ 9 am Bocce 9 am Walking/10am Needlework 10-11 Blood Pressure Checks 10:30 am Mother's Day Tea 11:45 am Lunch 12:30 pm Bowling 1:30 pm Line Dance/3 pm Yoga	Fitness Room Open 8-5 8 am Exercise Class 9 am Walking Group 10:30 am Arthritis Exercise 11:45 am Lunch 1 pm Mah Jongg
Fitness Room Open 8-5 8 am Exercise Class 9 am Tai Chi/9 am Walking 10:30 am Arthritis Exercise 11:45 am Lunch 1 pm Mixed Media 5:15-6:45 pm Yoga 7 and 8 pm Shag Lessons	Fitness Room Open 8-5 8 am Exercise Class 9 am Walking Group 10:30 am Yoga in Chairs 11 am Program with Phyllis 11:45 am Lunch 1 pm Rummikub/2 pm Pickleball 2 pm Hike at Hemlock Bluffs	Fitness Room Open 8-5 8 am Exercise Class 9 am Tai Chi/9 am Walking 9 am Walking Group 10 am Courthouse 11:45 am Lunch 1 pm Quilting 1 pm Parkinson's Support Group	Fitness Room Open 8-5 8 am Exercise/ 9 am Bocce 9am Walking/10am Needlework 10-11 Blood Pressure Checks 10:30 am Program with Ashley 11 Program-Susan/1 1:45 Lunch 1:30 pm Line Dance/3 pm Yoga 5 pm Book Club	Fitness Room Open 8-5 8 am Exercise Class 9 am Walking Group 10:30 am Arthritis Exercise 11:45 am Lunch 1 pm Mah Jongg
Fitness Room Open 8-5 8 am Exercise Class 9 am Tai Chi/9 am Walking 10:30 am Arthritis Exercise 11:45 am Lunch 1 pm Mixed Media 5:15-6:45 pm Yoga 6 pm Caregiver's Support	Fitness Room 8-5 Go to Northwest Park for Celebrate Senior Day at 10:30 am 11:45 am Lunch at park 1 pm Rummikub	Fitness Room Open 8-5 8 am Exercise Class 9 am Tai Chi Class 9 am Walking Group 10:30 am Dance in Chairs 11:45 am Lunch 1 pm Quilting/1 pm Bridge 7 and 8 pm Shag Lessons	Fitness Room Open 8-5 8 am Exercise/ 9 am Bocce 9am Walking/10am Needlework 10 am Diabetic Support Group 11 am Music w/ Edd Pryor 11:45 am Lunch 1:30 pm Line Dance/3 pm Yoga 7:30 pm Carolina Jazz	Fitness Room Open 8-5 8 am Exercise/9 am Walking 10:30 am Arthritis Exercise 11:45 am Lunch 1 pm Mah Jongg 2 pm Hike at Harris Lake Park 2 pm Wellness and Health Discussion Group
Fitness Room Open 8-5 8 am Exercise Class 9 am Tai Chi/9 am Walking 10:30 am Arthritis Exercise 11:45 am Lunch 1 pm Mixed Media 5:15-6:45 pm Yoga 7 and 8 pm Shag Lessons	Fitness Room 8-5 8 am Exercise Class 9 am Walking Group 10:30 am Medicare 101 11:45 am Lunch 1 pm Rummikub 2 pm Pickleball	Fitness Room Open 8-5 8 am Exercise Class 9 am Tai Chi Class 9 am Walking Group 10:30 am Jeopardy 11:45 am Lunch 1 pm Quilting	Fitness Room Open 8-5 8 am Exercise/ 9 am Bocce 9am Walking/10am Needlework 11 am Program to be Announced 11:45 am Lunch 12:30 pm Bowling 1:30 pm Line Dance/3 pm Yoga 5:30 pm Board Meeting	Fitness Room Open 8-5 8 am Exercise Class 9 am Walking Group 10:30 am Arthritis Exercise 11:45 am Lunch 1 pm Mah Jongg
COUNCIL ON AGING CLOSED FOR MEMORIAL DAY	Fitness Room Open 8-5 8 am Exercise Class 9 am Cornhole 10:30 am Yoga in Chairs 11:45 am Lunch 1 pm Rummikub	Bowling 1st & 4th Thursdays at 12:30 pm call Lindsay at 919-542-4512 Day Trips Strawberry Patch-May 4 Randolph Boomer Expo-May 18 Raleigh Farmer's Market- May 19 Shopping in Burlington-May 27	Pickleball 2nd & 4th Tuesday at 2 pm Pittsboro Courts For more information, call Allison at 919-542-4512 Lunch Bunch May 6 Virlie's Grill call Allison at 919-542-4512	Celebrate Senior Day Join us on Tuesday, May 17 at Northwest Park in Silk Hope for a cookout, fishing and fun! For more information, call Lindsay at 919-542-4512. Older American's Month "Blaze the Trail"

Council on Aging May 2016 Menu

Monday	Tuesday	Wednesday	Thursday	Friday
<p>2</p> <p>BBQ Chicken Greens Squash Casserole Jell-O Corn Bread 2% Milk</p>	<p>3</p> <p>Lasagna Tossed Salad Mix Vegetable Graham Crackers Garlic Bread FF Ranch Dressing Juice 2% Milk</p>	<p>4</p> <p>Stir Fry w/Cabbage Rice Yogurt Egg Roll Juice 2%Milk</p>	<p>5</p> <p>Sloppy Joe Baby Baker Potato Coleslaw Banana 2%Milk</p>	<p>6</p> <p>Oven Fried Chicken Green Beans Dirty Rice Roll Ambrosia Salad 2%Milk</p>
<p>8</p> <p>Swedish Meatballs Garlic Mashed Potato Lima Beans w/Pimientos Fruit Biscuit/Jelly 2% Milk</p>	<p>10</p> <p>Krab Cake Baby Baker Potato Coleslaw Hushpuppies Banana 2% Milk</p>	<p>11</p> <p>Salisbury Steak/gravy Carrots Mac& Cheese Marshmallow treat Roll Juice 2%Milk</p>	<p>12</p> <p>Baked Chicken Green Beans Sweet Potato Casserole Roll Pudding Vanilla Wafers 2% Milk</p>	<p>13</p> <p>BBQ Sandwich Sweet&Sour Slaw Roasted Corn Spiced Apples 2%Milk</p>
<p>15</p> <p>Turkey Hotdog Chili Coleslaw Brownie 2% Milk</p>	<p>17</p> <p>Chuckwagon Steak with gravy California Blend Vegetables Parsiled Noodles Banana Roll/Jelly 2% Milk</p>	<p>18</p> <p>Red Beans Rice &Chicken Corn Roll /jelly 2%Milk</p>	<p>19</p> <p>BBQ Pork Ribs Sweet Potato Chunks Angel Food Cake with Fruit Roll 2%Milk</p>	<p>20</p> <p>Turkey with gravy Stuffing Peas &Carrots Ambrosia Salad Roll Cranberry Sauce 2% Milk</p>
<p>22</p> <p>Chili Beans Fried squash Fruit Roll /jelly 2%Milk</p>	<p>24</p> <p>Turkey Pot Pie Harvard Beets Banana Biscuit 2%Milk</p>	<p>25</p> <p>Ravioli TuscanVegetable blend Tossed salad Garlic Bread Dressing Orange 2%Milk</p>	<p>26</p> <p>Baked Chicken Dirty Rice Sunshine Carrots Field Peas & Snaps Roll 2%Milk</p>	<p>27</p> <p>Krab Cake Sandwich Baby Baker Potato Coleslaw Fruit Cobbler 2%Milk</p>
<p>30</p> <p>COA Closed For Memorial Day</p>	<p>31</p> <p>Spaghetti w/Meat Sauce Tossed salad Managers Choice Vegetable Angel food Cake Garlic Bread Ranch Dressing 2%Milk</p>			<p>Call the day before to order Senior Meal of the Day Guest \$5.50 Eat In Take Out 919-542-4512 Alan 919-742-3975 Teresa or Fred</p>