



**Central Maine Area Agency on Aging
d/b/a Spectrum Generations**

AREA PLAN on AGING
for Fiscal Year 2021 through Fiscal Year 2024
October 1, 2020 – September 30, 2024

OADS Revised: November 2020

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VERIFICATION OF INTENT

The Area Plan on Aging is hereby submitted for the County Planning and Service Area which includes Kennebec, Somerset, Lincoln, Sagadahoc, Knox, and Waldo counties and for the town of Brunswick and region of Harpswell in Cumberland County for the period FY 2021 through FY 2024. It includes all assurances and plans to be followed by Spectrum Generations under provisions of the Older Americans Act, as amended during the period identified. The Area Agency on Aging identified will assume the full authority to develop and administer the Area Plan on Aging in accordance with all requirements of the Act and related State policy. In accepting this authority, the Area Agency on Aging assumes major responsibility to develop and administer the Area Plan for a comprehensive and coordinated system of services and to serve as the advocate and focal point for older people in the planning and service area.

The Area Plan on Aging has been developed in accordance with all rules and regulations specified under the Older Americans Act and is hereby submitted to the State Unit on Aging for approval.

2/19/2021
Date

Gerard L. Queally
Gerard L. Queally
President & CEO
Spectrum Generations

The Area Agency on Aging Advisory Council has had the opportunity to review and comment on the Area Plan on Aging. Comments are attached.

2/19/21
Date

John Morris
John Morris
Chair, Advisory Council
Spectrum Generations

The governing body of the Area Agency has reviewed and approved the Area Plan on Aging.

12/23/2020
Date

Daniel Booth
Daniel Booth
Chair, Board of Directors
Spectrum Generations

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Executive Summary

Spectrum Generations' (SG) home office is located in Augusta, Maine. Its corporate name is Central Maine Area Agency on Aging and was incorporated in 1972 and began operations in 1973 as a designated Area Agency on Aging authorized by the Federal Older Americans Act (OAA). It is a private, non-profit 501(c)(3) organization. Spectrum Generations works collaboratively on statewide issues and projects with the other four Area Agencies on Aging in the state, with Maine's Office of Aging and Disability Services (OADS) and the Maine Council on Aging (MCOA).

For over 45 years, Spectrum Generations (SG) has operated as the non-profit Central Maine Area Agency on Aging and as an Aging and Disability Resource Center. It provides over 12 services and programs for older and disabled adults, including those funded under Title III of the Older Americans Act (OAA) through the State Unit on Aging. SG has an annual operating budget of \$9.4 million and has eight locations throughout its seven-county service territory with programs operating out of seven community and resource centers. Its *mission* is to promote and advance the well-being and independence of older and disabled adults, with the support of their care partners, to live in their community of choice. Spectrum Generations carries out its mission with a singular *principle* of “delivering excellence through accountability” and by living the *core values* of Cohesion, Respect, Collaboration, Professionalism, Dependability, Integrity, Solutionary, Innovation, Boldness, and Competence.

Every four years, or as directed by the Office of Aging and Disability Services (OADS), Spectrum Generations engages in comprehensive and ongoing planning to meet the needs of persons age 60 and over in its Planning and Service Area (PSA), which includes Kennebec, Knox, Lincoln, Sagadahoc, Somerset, and Waldo Counties and the communities of Brunswick and Harpswell in Cumberland County.

Spectrum Generations began the development of this area plan with these premises in mind:

- 1) To promote the well-being and independence of older and disabled adults, with the support of their care partners, to live in their community of choice.
- 2) To be an important and influential community partner, serving older and disabled adults and their care partners, by providing full access to a network of services and supports that address their social needs, enabling the their fullest participation in all aspects of life.

With this as our foundation, the overarching aim of the 2020-2024 Spectrum Generations' Area Plan was to develop a plan of action to position our Older American Act Title III services to meet the future support needs of our aging population, their care partners, and the central and midcoast community as a whole.

In 2000, the percentage of Maine's population that was 65 and older was 14%, which has grown to 22% in 2020, and is predicted to reach 29% by 2040 with a median age

increase of 8 years over that same period. In SGs PSA, up to 53% of households have a member that is 60+.

With this expected growth in central Maine's aging population, Spectrum Generations is committed to enhancing the well-being of older and disabled adults and their care partners, and enhancing access to services through our network of seven community and resource centers, SG's toll-free telephone "helpline," and through our other services provided to aging and disabled adults and their care partners through other funding sources. We believe older and disabled adults have a right to be in charge of their lives with as many options as possible, regardless of their age or disability, and therefore incorporate person-centeredness as frequently as possible. We understand that care partners have a special need for information and support as they strive to keep their older loved ones at home. Advocacy for the rights and safety of older individuals and care partners is part of everything we do. By implementation of our Area Plan we will meet the broad range of needs of central Maine's older and disabled adults by strengthening our network and connecting people to resources.

Context of Area Plan

Under DHHS Rule 10-149 Chapter 5 Section 30.07, the Maine Department of Health and Human Services (DHHS), Office of Aging and Disability Services (OADS) directed each Area Agency on Aging (there are 5 Area Agencies on Aging (AAA) in Maine) to submit an Area Plan on Aging for the time period of October 1, 2020 through September 30, 2024. The five Area Plans will be utilized in the development of a State Plan.

Guidance received from OADS directed that the area plan is to convey a clear understanding of the current and future service and support needs of each region's older residents, and the issues, challenges and opportunities facing Maine's aging network.

Under the context of the area plan, the following services are supported by Title III funded area plan activities:

Nutrition services: Home-delivered meals and congregate meals are provided directly by Spectrum Generations and sub-contracted where it contributes to increased capacity at a lesser cost. Home-delivered meals are sub-contracted for Knox county and in the more remote rural towns of Jackman and Bingham in Somerset county. Congregate dining is provided by Spectrum Generations at 3 locations and by sub-contract at a co-location. Nutrition education is provided on a monthly basis.

Aging and Disability Resource Center services (Supportive Services):
Provided at 8 locations across central and mid-coast Maine (4 community

centers, 3 resource centers, and 1 administrative office), a centralized staff person provides all information assistance and referrals. Staff located at the 7 community senior centers provide supportive services including insurance counseling, outreach, and public education.

Caregiver and Respite services: Provided by staff at the 8 locations, services include counseling, support groups, information and referral, and state funded respite coordination.

Health Promotion: Provided under Spectrum Generations' statewide evidence-based programs network, Healthy Living for ME connects community providers, volunteers, and paid staff leaders to provide evidence-based programming.

Community Center Activities: Operating 8 sites including 4 community centers/ senior centers, 2 regional centers where services are co-located with other senior service providers, 1 resource center and 1 administrative office. Community centers provide supportive services, congregate dining (at 4 locations), adult day and community support programs, act as a hub for home delivered meals coordination, and evidence-based and non-evidence based programs and activities to engage older adults and combat isolation.

Legal Services: provided via sub-contract to Legal Services for the Elderly

Advocacy and public education: Title III supports work and advocacy with the legislature, local leadership officials, municipalities, and organizations including Maine Council on Aging (MCOA), National Association for Area Agencies on Aging (N4A) and public relations firms. It also supports public awareness including presentations, public education, media, and community engagement activities.

Additionally and separate from Area Plan programs, Spectrum Generations provides the following fee-for-service programs which enhance the availability of options, resources, independence, and choice without any loss or diminution of quality or quantity of Older American Act programs:

Bridges Home Services: Personal Support Services (non-skilled home care), assistive technology and personal emergency response systems, 4 Adult Day programs which operate simultaneously with 4 community support programs, and an in-home supports program for older adults and adults with intellectual and/or developmental disabilities.

Targeted Case Management: Long-term case management services to individuals with intellectual and/ or developmental disabilities.

Care Management Supportive Services: Staff provide support to health systems and insurers by providing assessments and short-term case management services which impacts the health of the population by identifying social needs and addresses the social risks of individuals to influence the outcomes of social determinants of health on health outcomes.

Healthy Living for ME: The statewide evidence-based program network provides a coordinated, singular, centralized network of community providers, volunteers, and area agency on aging staff to provide falls prevention, diabetes, chronic disease, caregiver support, and fitness programs.

Maine-ly Delivered Meals and Catering programs: Other nutrition services include non-OAA funded home-delivered meals, community dining once weekly at 2 locations, private event and meeting catering both on-site and off-site to address additional nutritional needs of the community.

Needs Assessment

The Office of Aging and Disability Services (OADS) contracted the Muskie School of Public Service at the University of Southern Maine to provide a statewide needs assessment which included research, focus groups (two within Spectrum Generations catchment area), and telephone surveys. Spectrum Generations held five additional focus groups using trained facilitators to gain a deeper perspective of the needs as they related to the agency.

Key findings regarding the needs of older and disabled adults and providers in the community included:

- Housing
- Transportation
- Food
- Care Partner Needs (support and regarding in-home services)
- Isolation
- Safety

The key barriers to getting the help people need included:

- Lack of availability or awareness of access to information and “no wrong door” service entry
- Information becoming increasingly more available digitally while print and in-person communications are decreasing (70% of respondents locally said the internet was their preferred method)
- A fragmented, complex, and siloed system of long-term services and supports
- Fear of losing independence resulting in lack of trust to ask for help
- Discrimination of aging and discrimination as experienced by older LGBTQ adults

System-wide service access barriers included:

- Financial eligibility

- Inadequate accommodations in the community as a whole (Note: this does not refer to accommodations at the AAA)
- Reliance on volunteer networks which can be unreliable rather than coordinated program networks
- Provider capacity/ limited funding for services
- Availability of persons willing to provide in-home care partner support services such as personal support and adult day programs due to the low wages, a result of low reimbursement rates to providers

Opportunities required to live in the community of choice included:

- On demand and public transportation systems
- Housing quality, affordability, and flexible options to meet aging adult needs
- Lack of a Home-delivered meals waitlist, free food events, and better access to food pantries
- Navigation and coordination of service needs and delivery
- Senior companionship and intergenerational activities
- Education to avoid financial scams including better financial literacy education

Respondents locally and statewide listed opportunities to socialize, being more physically active (indoors and outdoors), and engaging in their communities and attending community center activities as the assets of the communities. 18% of respondents to the needs assessment survey reported requiring help with “Medicare or other health related questions” however one unexpected result of the listening sessions was that Medicare counseling and education by the AAA’s was not listed as either a need or benefit to the community.

The Administration on Community Living’s Five Pillars

OADS has directed each Area Agency on Aging to also acknowledge the Administration for Community Living’s five pillars. These five pillars have been incorporated into the Goals and Objectives directed by OADS and will be incorporated locally in the Strategies and Performance Measures in Appendix C:

1. Connecting People to Resources;
2. Strengthening our Networks;
3. Protecting Rights and Preventing Abuse;
4. Supporting Families and Caregivers; and
5. Expanding Employment Opportunities

Focus Areas

The Administration on Community Living directed the following five focus areas, as applicable to each planning and service area, be considered in optimizing home and community-based services and programs for older adults and their caregivers. These focus areas have been incorporated into the Goals and Objectives directed by OADS and,

where applicable, incorporated locally in the Strategies and Performance Measures in Appendix C.

A. Older Americans Act (OAA) Core Programs

OAA programs are encompassed in Titles III (Supportive Services, Nutrition, Disease Prevention/Health Promotion, and Caregiver Programs), VI (Native American Programs), and VII (Elder Rights Programs), and serve as the foundation of the national aging services network.

Over the coming four years, increasing access to services is a major focus of Spectrum Generations' Area Plan. This will be accomplished by promoting the Aging and Disability Center within the community as a valuable resource for information and assistance with an emphasis on assistive technology, transportation, housing, home maintenance, in-home supports, heating assistance, opportunities to socialize, and volunteer opportunities. We will increase awareness of local services and programs available to older Mainers, adults with disabilities, and their care partners with an emphasis on underserved populations. The Area Plan for Spectrum Generations will focus on ensuring continued access to the local congregate dining sites and on continuing to provide enhanced quality and variety of meals to older adults and to allow for personal choice, dietary restrictions, and cultural differences.

In response to the Needs Assessment and in anticipation of OADS policy and regulatory modifications to Section 67: Outreach, Intake, and Information and Assistance/Referral, Spectrum Generations intends to make a significant shift in Title III-B services in order to provide a greater array of OAA Title III-B services than is currently offered. In order to make this service shift and to provide more options for consumers, recruiting and increasing the volunteer count for State Health Insurance Assistance Program (SHIP) while decreasing paid staff time on this activity is a key component of the Plan.

The Family Caregiver program will continue to increase access to care partners for services such as counseling, support groups, and increase awareness of available in-home and respite services such as personal supports, adult day services, homemaker, and chore services. SG will explore how to provide in-home services such as Home Delivered Meals, Adult Day Care, and Personal Support Services to consumers and care partners who otherwise do not qualify for assistance. Spectrum Generations will also enhance knowledge and utilization of current services directly provided to care partners such as home-delivered meals, evidence-based programs, information and assistance, support groups, and counseling.

B. ACL Discretionary Grants & Other Funding Sources

ACL Discretionary grants include 1) Alzheimer's Disease Program Initiative (ADPI); 2) Evidence-Based Disease and Disability Prevention Programs; 3) Nutrition Innovations; and 4) Other programs that support community living.

Spectrum Generations as the recipient and in key partnership of two other contractual joint-venture partners, has been awarded the ACL Chronic Disease Self-Management

Education Programs award and the ACL Falls Prevention Programs award to build the statewide community provider network for evidence-based classes that impact the health and wellness of chronically ill, older, and/ or disabled adults.

Under the ACL Discretionary grants for evidence-based programs, Spectrum Generations will continue to grow Healthy Living for ME, the statewide evidence-based program network with joint-venture partners. Through this work and with support of the ACL, we will maintain participation in evidence-based programs, such as SAVVY Caregiver, falls prevention, and chronic disease self-management.

C. Participant-Directed/Person-Centered Planning

Making fundamental changes in agency policies and programs that support consumer control and choice is recognized as a critical focus. OAA Title VII programs and services are designed to support this effort, and opportunities also exist for maximizing consumer control and choice in Title III and VI programs and the focuses include 1) Supporting participant-directed/ person-centered planning for older adults and their caregivers across the spectrum of long-term care services, including home and community settings; and 2) Connecting people to resources.

In an effort to improve person-centered planning and coordination and to provide better wrap-around services to our consumers, Spectrum Generations will increase and refine data collection methodologies using standard service definitions and utilization of data management resources. Spectrum Generations commits to working in collaboration with the Office of Aging and Disability Services to ensure statewide consistency and allow for the evaluation of effectiveness of services and programs in meeting the preferences and unmet needs of older Mainers, adults with disabilities, and their care partners using outcome measurements. Spectrum Generations will provide staffing support to develop and implement statewide intake, assessment, and referral standards to ensure consistency and increase efficiency.

D. Elder Justice

Spectrum Generations will continue to support awareness of elder justice needs via community education, screening, and awareness of elder abuse. Spectrum Generations intends to continue its sub-contractor relationship with Legal Services for the Elderly, or a similar organization, to ensure that affordable legal counsel is available for older adults. The elder justice area focuses on coordinated programs and services for the protection of vulnerable adults under Title VII of the OAA by supporting and enhancing multi-disciplinary responses to elder abuse, neglect, and exploitation involving adult protective services, LTC ombudsman programs, legal assistance programs, law enforcement, health care professionals, financial institutions, and other essential partners across the planning and service area.

E. Other Focus Areas to Be Addressed

Other ACL focus areas considered in the area plan are: 1) Transportation; 2) Housing; 3) Diversity and Inclusion; and 4) Assistive Technologies. Spectrum Generations will continue to provide advocacy efforts and public awareness around these topics and these

focus areas are incorporated into the information, access, and resource services that Spectrum Generations provides.

Over the next four years, Spectrum Generations will build upon current successes in advocacy and will further support local and statewide age-friendly initiatives and capacity building initiatives to strengthen Maine's aging and disability service networks at the state and local levels through advocacy and participation in leadership activities.

Goals, Objectives, Strategies, and Performance Measures

OADS directed that each Area Agency on Aging use the following two goals in developing their measurable strategies and performance measures to be implemented during the four years:

Goal 1 – *Support older Mainers and their care partners to remain active and healthy in their communities of choice for as long as possible.*

Goal 2 – *Enhance the quality of programs through data standardization, program evaluation, and outcome measurement.*

Additionally, OADS directed other Older Americans Act, Title VII (Elder Rights Programs) funded recipients to address the following goal:

Goal 3 – *Prevent and improve response to abuse, neglect, and exploitation while preserving the rights and autonomy of older Mainers and adults with disabilities.*

Goal 1: Support older Mainers and their care partners to remain active and healthy in their communities of choice for as long as possible.					
Objective		Strategy		Performance Measure	
1.1	<u>Title III B Access to Services:</u> Increase awareness of local services and programs available to older Mainers and their care partners with an emphasis on transportation, housing, home maintenance, in-home supports, heating assistance, opportunities to socialize, and volunteer opportunities.	1.1.1	Utilize the statewide data system to track the variety and types of needs of the consumers served.	1.1.1.A	Provide training 4 times per year on the identified topics and needs of consumers and on the availability of local resources
		1.1.2	Increase awareness of volunteer opportunities for older adults via other community programs and provide meaningful volunteer opportunities at Spectrum Generations.	1.1.2.A	Utilize at least 150 older adult (60+) volunteers throughout the organization.

		1.1.3	To shift resources to provide a greater array of Title III services, devote less paid staff time to Medicare counseling while increasing volunteers providing Medicare related counseling and services allowing paid staff time to spend on increasing access and awareness of local programs and services.	1.1.3.A	Increase of number of Volunteers providing Medicare support and counseling by 4 each year
1.2	<u>Title III B Access to Services:</u> Promote the Aging and Disability Resource Centers at each area agency on aging in Maine as valuable resources of information and service navigation.	1.2.1	With greater than 65% of older adults utilizing the internet to gain information, Spectrum Generations will utilize social media to provide information on local services.	1.2.1.A	Promote the ADRC on social media and via other internet resources at least 36 times per year
		1.2.2	Raise awareness about Spectrum Generations and the services it provides to older and disabled Mainers by developing and implementing an earned media strategy	1.2.2.A	SG will be featured in at least 12 earned media opportunities each year
		1.2.3	Attend events which are of interest to older and disabled adults to promote Spectrum Generations and increase awareness of resources and services	1.2.3.A	Attend 4 Community Education events during the year
1.3	<u>Title III B Access to Services:</u> Improve access to services and programs for underserved populations and their caregivers, such as older Native Americans, older New Mainers, LGBTQ older adults, older adults experiencing homelessness, remote island communities, rural and frontier communities, older adults with limited English proficiency, and	1.3.1	Evaluate the needs of underserved communities within our catchment area, focusing especially on remote island communities, remote rural communities, and other underserved populations.	1.3.1.A	Invite underserved populations and members of the underserved communities to at least 1 Regional Council meeting each year.
		1.3.2	Identify at least (2) different organizations who reach underserved populations or communities each quarter in	1.3.2.A	Share resources with at least 4 organizations that reach remote rural and coastal/ island communities each year

	older adults with sensory impairments.		order to share resources available.	1.3.2.B	Share resources with at least 4 organizations that reach underserved populations or communities.
		1.3.3	Provide training annually to ensure staff is competent to provide service to the underserved communities and populations	1.3.2	Provide training at least once per year
1.4	<u>Title III B In-Home Services:</u> Provide in-home services and supports, such as Homemaker, Personal Care, Chore, and Adult Day, to older Mainers.	1.4.1	Contract with local service providers to provide in-home services not offered by the area agency on aging.	1.4.1.A	Increase the number of persons and units served in-home services by 1% each fiscal year, as reported in the statewide database, after establishing baseline in FFY2021.
1.5	<u>Title III B Legal Assistance:</u> Provide legal assistance to older Mainers with economic and social needs.	1.5.1	Contract with a single legal assistance agency to provide legal assistance.	1.5.1.A	Increase the number of persons and units served legal assistance by 1% each fiscal year as reported in the statewide database.
1.6	<u>Title III C Nutrition Services:</u> Ensure access to local congregate dining options.	1.6.1	Provide opportunity for socialization and a nutritious meal which meets 1/3 of the dietary requirements via congregate dining options	1.6.1.A	Maintain the number of individuals using congregate dining services.
				1.6.1.B	Maintain a minimum of 4 congregate meals per week at agency owned locations that include a commercial kitchen (unless a holiday or agency closure interrupts the schedule).
		1.6.2	Assess counties, within catchment area that do not currently have congregate dining services available.	1.6.2	Expand meal service into at least one additional county by 2024, as funding permits.
1.7	<u>Title III C Nutrition Services:</u> Enhance the quality and variety of meals offered to older Mainers to allow for personal choice, dietary restrictions, and cultural differences.	1.7.1	Continue to offer in-agency prepared meals to older Mainers which allows for variety, quality, individualized preferences, and restrictions to be provided.	1.8.1.A	Continue to develop menu cycles that include a minimum of 2 seasonal changes per year and 4 weeks of rotation per season to provide fresh menu options.

		1.7.2	Incorporate locally grown food and gleaned produce to keep costs down, reduce food waste, and provide fresher and more nutritious ingredients.	1.7.2	Establish and maintain at least 4 relationships with area farms, food banks, and grocery stores to gain access to locally grown and fresh food and produce.
1.8	<u>Title III D Evidence-Based Programs:</u> Maintain participation in evidence-based programs, including, but not limited to, SAVVY Caregiver, falls prevention, and chronic disease self-management.	1.8.1	Hold 4 Savvy Caregiver classes each year.	1.8.1.A	Hold 4 Savvy Caregiver classes
		1.8.2	Continue to provide evidence based CDSME and falls prevention classes	1.8.2.A	Maintain participation levels in CDSME classes
				1.8.2.B	Maintain participation levels in Falls Prevention classes
		1.8.3	Develop Healthy Living for ME as the statewide evidence-based community provider network	1.8.3.A	Maintain evidence based class participation in every county
				1.8.3.B	Pursue at least 2 sources of funding for sustainability annually
1.9	<u>Title III E Care Partner Services:</u> Provide information to care partners of older Mainers about available services.	1.9.1	Provide outreach events targeting care partners of older Mainers about available resources.	1.9.1.A	Host at least one outreach event each fiscal year.
1.10	<u>Title III E Care Partner Services:</u> Assist care partners of older Mainers with accessing available services.	1.10.1	Assess care partners on their unique needs using a standard care partner assessment.	1.10.1.A	Increase the number of care partners assessed by 1% each fiscal year.
		1.10.2	Provide service navigation as care partners seek available services.	1.10.2.A	Increase the number of care partners provided service navigation by 1% each fiscal year.
				1.10.2.B	Increase the number of service navigation hours provided to care partners by 1% each fiscal year.

1.11	<u>Title III E Care Partner Services:</u> Provide education and training to care partners of older Mainers.	1.11.1	Provide individual counseling to care partners older Mainers to educate them on their care partner roles.	1.11.1.A	Increase the number of care partners provided individual counseling by 1% each fiscal year.
		1.11.2	Provide support groups to care partners of older Mainers to learn from their peers about being care partners.	1.11.2.A	Host at least 3 support groups for care partners each fiscal year.
				1.11.2.B	Increase the number of care partners who attended support groups by 1% each fiscal year.
1.12	<u>Title III E Care Partner Services:</u> Provide respite services to care partners of older Mainers.	1.12.1	Provide in-home respite services to care partners of older Mainers.	1.12.1.A	Increase the number of care partners served in-home respite services by 1% each fiscal year.
				1.12.1.B	Increase the number of in-home respite hours provided to care partners by 1% each fiscal year.
		1.12.2	Provide adult day services as a respite service to care partners of older Mainers.	1.12.2.A	Increase the number of care partners served adult day services by 1% per year.
				1.12.2.B	Increase the number of adult day service hours provided to care partners by 1% each fiscal year.
1.13	<u>Title III E Care Partner Services:</u> Provide supplemental services, such as In-Home Services, on a limited basis to care partners of older Mainers.	1.13.1	Promote and monitor the utilization of in-home services and support by care partners.	1.13.1.A	Increase the number of in-home services and support provided to care partners by 1% each fiscal year.

1.14	<u>Title III E Care Partner Services:</u> Enhance respite services to care partners of older Mainers to maximize the utilization of other care partner services, such as evidence-based programs, support groups, and counseling.	1.14.1	Actively refer care partners to programs available that provide respite.	1.14.1.A	In year 1, begin tracking the referrals made to each program individually to include: respite services, adult day programs, support groups, evidence-based programs, and counseling. In years two through four, at least 50% of those who call us will have been referred to at least 1 of these programs.
		1.14.2	Promote programs available to care partners at events caregivers attend (such as community education events, support groups, trainings, etc)	1.14.2.A	Promote the resources and programs available to care partners at 75% of all family caregiver program events and service delivery opportunities
1.15	<u>Title III E Care Partner Services:</u> Increase awareness of and access to the Family Caregiver Support Program to Older Relative Caregivers.	1.15.1	Target care partners of older adults utilizing social media to promote the Family Caregiver Support Programs.	1.15.1.A	Post information targeting care partners at least 12 times per year to expand awareness and access.
		1.15.2	Develop and implement an earned media strategy which highlights program availability and awareness to older relative care partners.	1.15.2.A	Spectrum Generations Family Caregiver Program will be highlighted via earned media (i.e., not paid) at least once per year.
1.16	<u>Assistive Technology:</u> Increase awareness of and access to public and privately funded Assistive Technology programs and resources.	1.16.1	Provide information on assistive technology programs and resources as part of regular service deliveries for ADRC and family caregiver support calls.	1.16.1.A	Hold training for the ADRC and FCSP staff at least once per year on assistive technology and resources
				1.16.1.B	Call topic reports will show that assistive technology was discussed 52 times
		1.10.2	Expand awareness of public and privately funded assistive technologies.	1.10.2	Promote the public and privately funded Assistive Technology programs and resources at 4 community education events each year.
1.17	<u>Advocacy:</u> Support capacity building initiatives to strengthen Maine's aging and disability service networks at the state and local levels through	1.17.1	Utilize external organizations to assist with advocacy such as MCOA, N4A, and public relations firms	1.17.1.A	Attend at least 3 public hearing, testimonies, capitol days, etc.

	advocacy and participation in leadership activities.	1.17.2	Participate in legislative updates held by Chambers of Commerce and bipartisan "Meet the Reps" events	1.17.2	Participate in 4 legislative events
		1.17.3	Advocate, when appropriate, for increased availability of transportation, housing, home maintenance, in-home supports, heating assistance, opportunities to socialize.	1.17.3.A	Attend at least 3 advocacy events
1.18	<u>Advocacy</u> : Support local and statewide age-friendly initiatives through advocacy and participation in leadership activities.	1.18.1	Utilize the Regional Councils and Advisory Council to interact with age-friendly initiatives, maintain connection to the community need, and provide information to Spectrum Generations in order to be incorporated into advocacy efforts	1.18.1.A	Discuss age-friendly initiatives at least twice per year at quarterly Regional Council meetings to bring to the Advisory Council to share resources and ideas.
		1.18.2	Participate and attend age-friendly meetings and initiatives as requested	1.18.2.A	Attend at least 4 meetings or workgroups focused on age-friendly initiatives

Goal 2: Enhance the quality of programs through data standardization, program evaluation, and outcome measurement.

Objective		Strategy		Performance Measure	
2.1	Develop and implement statewide intake, assessment, and referral standards to ensure consistency and increase efficiency.	2.1.1	Attend meetings with OADS to provide support and feedback during the development of the process and tools.	2.1.1.A	Number of meetings attended by staff annually.
		2.1.2	Implement new intake, assessment, and referral standards as developed, assuming no negative impact to financial position.	2.1.2.A	Completion of implementation
2.2	Improve data collection methodologies using standard service definitions and utilizing data management resources effectively to ensure statewide consistency.	2.2.1	Work to better utilize the statewide data system and collection product in coordination with the State and other agencies	2.2.1.A	Percentage of meetings attended by IT or program staff annually regarding data or WellSky technology systems.
		2.2.2	Self-audit data collection on an annual basis for completeness of information.	2.2.2.A	Annually review by IT Manager and Program Management staff

2.3	Evaluate the effectiveness of services and programs in meeting the preferences and unmet needs of older Mainers, adults with disabilities, and their care partners using outcome measurements.	2.3.1	Utilize the Regional Councils and Advisory Council to determine unmet needs and match against the statewide data collection system data to verify.	2.3.1.A	Have at least 4 meetings per year of the Advisory Council to discuss needs and preferences of older adults and report to SG staff
				2.3.1.B	Schedule at least 2 Program Review Committee meetings per year to review program performance and metrics and how SG programs are meeting the community needs
		2.3.2	Evaluate data to analyze the service utilizations and needs of our consumers and adjust service offerings to meet the needs of the consumers we serve.	2.3.2	Evaluate service utilization bi-annually and move staff resources as needed to meet the needs of our consumers.

ASSURANCES AND REQUIRED ACTIVITIES

Spectrum Generations (the “agency”) has described in this plan all of the agency’s activities. The agency assures that these activities conform to the responsibilities of the area agency, laws, regulations, and State policy. The agency also agrees to administer its programs in accordance with the Act, the area plan, and all applicable regulations, policies, and procedures. The agency assures that it has written policies and procedures for carrying out all of its functions and that such procedures are available for review by the Office of Aging and Disability Services (OADS).

Sec. 306, AREA PLANS

(a) Each area agency on aging designated under section 305(a)(2)(A) shall, in order to be approved by the State agency, prepare and develop an area plan for a planning and service area for a two-, three-, or four-year period determined by the State agency, with such annual adjustments as may be necessary. Each such plan shall be based upon a uniform format for area plans within the State prepared in accordance with section 307(a)(1). Each such plan shall—

- (1) provide, through a comprehensive and coordinated system, for supportive services, nutrition services, and, where appropriate, for the establishment, maintenance, modernization, or construction of multipurpose senior centers (including a plan to use the skills and services of older individuals in paid and unpaid work, including multigenerational and older individual to older individual work), within the planning and service area covered by the plan, including determining the extent of need for supportive services, nutrition services, and multipurpose senior centers in such area (taking into consideration, among other things, the number of older individuals with low incomes residing in such area, the number of older individuals who have greatest economic need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) residing in such area, the number of older individuals who have greatest social need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) residing in such area, the number of older individuals at risk for institutional placement residing in such area, and the number of older individuals who are Indians residing in such area, and the efforts of voluntary organizations in the community), evaluating the effectiveness of the use of resources in meeting such need, and entering into agreements with providers of supportive services, nutrition services, or multipurpose senior centers in such area, for the provision of such services or centers to meet such need;
- (2) provide assurances that an adequate proportion, as required under section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services—
 - (A) services associated with access to services (transportation, health services (including mental and behavioral health services), outreach, information and assistance (which may include information and

assistance to consumers on availability of services under part B and how to receive benefits under and participate in publicly supported programs for which the consumer may be eligible) and case management services);

(B) in-home services, including supportive services for families of older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and

(C) legal assistance;

and assurances that the area agency on aging will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded;

- (3) (A) designate, where feasible, a focal point for comprehensive service delivery in each community, giving special consideration to designating multipurpose senior centers (including multipurpose senior centers operated by organizations referred to in paragraph (6)(C)) as such focal point; and
- (B) specify, in grants, contracts, and agreements implementing the plan, the identity of each focal point so designated;
- (4) (A)(i)(I) provide assurances that the area agency on aging will—
- (aa) set specific objectives, consistent with State policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement;
 - (bb) include specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas; and
- (II) include proposed methods to achieve the objectives described in items (aa) and (bb) of sub-clause (I);
- (ii) provide assurances that the area agency on aging will include in each agreement made with a provider of any service under this title, a requirement that such provider will—
- (I) specify how the provider intends to satisfy the service needs of low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in the area served by the provider;
 - (II) to the maximum extent feasible, provide services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in accordance with their need for such services; and
 - (III) meet specific objectives established by the area agency on aging, for providing services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas within the planning and service area; and
- (iii) with respect to the fiscal year preceding the fiscal year for which such plan is prepared —
- (I) identify the number of low-income minority older individuals in the planning and service area;

- (II) describe the methods used to satisfy the service needs of such minority older individuals; and
 - (III) provide information on the extent to which the area agency on aging met the objectives described in clause (i).
- (B) provide assurances that the area agency on aging will use outreach efforts that will—
- (i) identify individuals eligible for assistance under this Act, with special emphasis on—
 - (I) older individuals residing in rural areas;
 - (II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
 - (III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
 - (IV) older individuals with severe disabilities;
 - (V) older individuals with limited English proficiency;
 - (VI) older individuals with Alzheimer’s disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and
 - (VII) older individuals at risk for institutional placement, specifically including survivors of the Holocaust; and
 - (ii) inform the older individuals referred to in sub-clauses (I) through (VII) of clause (i), and the caretakers of such individuals, of the availability of such assistance; and
- (C) contain an assurance that the area agency on aging will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas.
- (5) 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 severe disabilities, and individuals at risk for institutional placement, with agencies that develop or provide services for individuals with disabilities;
- (6) provide that the area agency on aging will—
- (A) take into account in connection with matters of general policy arising in the development and administration of the area plan, the views of recipients of services under such plan;
 - (B) serve as the advocate and focal point for older individuals within the community by (in cooperation with agencies, organizations, and individuals participating in activities under the plan) monitoring, evaluating, and commenting upon all policies, programs, hearings, levies, and community actions which will affect older individuals;
 - (C) (i) where possible, enter into arrangements with organizations providing day care services for children, assistance to older

individuals caring for relatives who are children, and respite for families, so as to provide opportunities for older individuals to aid or assist on a voluntary basis in the delivery of such services to children, adults, and families;

(ii) if possible regarding the provision of services under this title, enter into arrangements and coordinate with organizations that have a proven record of providing services to older individuals, that—

(I) were officially designated as community action agencies or community action programs under section 210 of the Economic Opportunity Act of 1964 (42U.S.C. 2790) for fiscal year 1981, and did not lose the designation as a result of failure to comply with such Act; or

(II) came into existence during fiscal year 1982 as direct successors in interest to such community action agencies or community action programs;

and that meet the requirements under section 676B of the Community Services Block Grant Act; and

(iii) make use of trained volunteers in providing direct services delivered to older individuals and individuals with disabilities needing such services and, if possible, work in coordination with organizations that have experience in providing training, placement, and stipends for volunteers or participants (such as organizations carrying out Federal service programs administered by the Corporation for National and Community Service), in community service settings;

(D) establish an advisory council consisting of older individuals (including minority individuals and older individuals residing in rural areas) who are participants or who are eligible to participate in programs assisted under this Act, family caregivers of such individuals, representatives of older individuals, service providers, representatives of the business community, local elected officials, providers of veterans' health care (if appropriate), and the general public, to advise continuously the area agency on aging on all matters relating to the development of the area plan, the administration of the plan and operations conducted under the plan;

(E) establish effective and efficient procedures for coordination of—

(i) entities conducting programs that receive assistance under this Act within the planning and service area served by the agency; and

(ii) entities conducting other Federal programs for older individuals at the local level, with particular emphasis on entities conducting programs described in section 203(b), within the area;

(F) in coordination with the State agency and with the State agency responsible for mental and behavioral health services, increase public awareness of mental health disorders, remove barriers to diagnosis and treatment, and coordinate mental and behavioral health services (including mental health screenings) provided with funds expended by

- the area agency on aging with mental and behavioral health services provided by community health centers and by other public agencies and nonprofit private organizations;
- (G) if there is a significant population of older individuals who are Indians in the planning and service area of the area agency on aging, the area agency on aging shall conduct outreach activities to identify such individuals in such area and shall inform such individuals of the availability of assistance under this Act;
 - (H) in coordination with the State agency and with the State agency responsible for elder abuse prevention services, increase public awareness of elder abuse, neglect, and exploitation, and remove barriers to education, prevention, investigation, and treatment of elder abuse, neglect, and exploitation, as appropriate; and
 - (I) to the extent feasible, coordinate with the State agency to disseminate information about the State assistive technology entity and access to assistive technology options for serving older individuals;
- (7) provide that the area agency on aging shall, consistent with this section, facilitate the areawide development and implementation of a comprehensive, coordinated system for providing long-term care in home and community-based settings, in a manner responsive to the needs and preferences of older individuals and their family caregivers, by—
- (A) collaborating, coordinating activities, and consulting with other local public and private agencies and organizations responsible for administering programs, benefits, and services related to providing long-term care;
 - (B) conducting analyses and making recommendations with respect to strategies for modifying the local system of long-term care to better—
 - (i) respond to the needs and preferences of older individuals and family caregivers;
 - (ii) facilitate the provision, by service providers, of long-term care in home and community-based settings; and
 - (iii) target services to older individuals at risk for institutional placement, to permit such individuals to remain in home and community-based settings;
 - (C) implementing, through the agency or service providers, evidence-based programs to assist older individuals and their family caregivers in learning about and making behavioral changes intended to reduce the risk of injury, disease, and disability among older individuals; and
 - (D) providing for the availability and distribution (through public education campaigns, Aging and Disability Resource Centers, the area agency on aging itself, and other appropriate means) of information relating to—
 - (i) the need to plan in advance for long-term care; and
 - (ii) the full range of available public and private long-term care (including integrated long-term care) programs, options, service providers, and resources;

- (8) provide that case management services provided under this title through the area agency on aging will—
 - (A) not duplicate case management services provided through other Federal and State programs;
 - (B) be coordinated with services described in subparagraph (A); and
 - (C) be provided by a public agency or a nonprofit private agency that—
 - (i) gives each older individual seeking services under this title a list of agencies that provide similar services within the jurisdiction of the area agency on aging;
 - (ii) gives each individual described in clause (i) a statement specifying that the individual has a right to make an independent choice of service providers and documents receipt by such individual of such statement;
 - (iii) has case managers acting as agents for the individuals receiving the services and not as promoters for the agency providing such services; or
 - (iv) is located in a rural area and obtains a waiver of the requirements described in clauses (i) through (iii);
- (9) (A) provide assurances that the area agency on aging, in carrying out the State Long-Term Care Ombudsman program under section 307(a)(9), will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2019 in carrying out such a program under this title; (B) funds made available to the area agency on aging pursuant to section 712 shall be used to supplement and not supplant other Federal, State, and local funds expended to support activities described in section 712;
- (10) provide a grievance procedure for older individuals who are dissatisfied with or denied services under this title;
- (11) provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as "older 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 this title;
 - (B) an assurance that the area agency on aging will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; 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;
- (12) provide that the area agency on aging will establish procedures for coordination of services with entities conducting other Federal or federally assisted programs for older individuals at the local level, with particular

emphasis on entities conducting programs described in section 203(b) within the planning and service area.

- (13) provide assurances that the area agency on aging will—
 - (A) maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships;
 - (B) disclose to the Assistant Secretary and the State agency—
 - (i) the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and
 - (ii) the nature of such contract or such relationship;
 - (C) demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such contract or such relationship;
 - (D) demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such contract or such relationship; and
 - (E) on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals;
- (14) provide assurances that preference in receiving services under this title will not be given by the area agency on aging to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement this title;
- (15) provide assurances that funds received under this title will be used—
 - (A) to provide benefits and services to older individuals, giving priority to older individuals identified in paragraph (4)(A)(i); and
 - (B) in compliance with the assurances specified in paragraph (13) and the limitations specified in section 212;
- (16) provide, to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care;
- (17) include information detailing how the area agency on aging will coordinate activities, and develop long-range emergency preparedness plans, with local and State emergency response agencies, relief organizations, local and State governments, and any other institutions that have responsibility for disaster relief service delivery;
- (18) provide assurances that the area agency on aging will collect data to determine—
 - (A) the services that are needed by older individuals whose needs were the focus of all centers funded under title IV in fiscal year 2019; and
 - (B) the effectiveness of the programs, policies, and services provided by such area agency on aging in assisting such individuals; and
- (19) provide assurances that the area agency on aging will use outreach efforts that will identify individuals eligible for assistance under this Act, with special

emphasis on those individuals whose needs were the focus of all centers funded under title IV in fiscal year 2019.

(b)(1) An area agency on aging may include in the area plan an assessment of how prepared the area agency on aging and service providers in the planning and service area are for any anticipated change in the number of older individuals during the 10-year period following the fiscal year for which the plan is submitted.

(2) Such assessment may include—

- (A) the projected change in the number of older individuals in the planning and service area;
- (B) an analysis of how such change may affect such individuals, including individuals with low incomes, individuals with greatest economic need, minority older individuals, older individuals residing in rural areas, and older individuals with limited English proficiency;
- (C) an analysis of how the programs, policies, and services provided by such area agency can be improved, and how resource levels can be adjusted to meet the needs of the changing population of older individuals in the planning and service area; and
- (D) an analysis of how the change in the number of individuals age 85 and older in the planning and service area is expected to affect the need for supportive services.

(3) An area agency on aging, in cooperation with government officials, State agencies, tribal organizations, or local entities, may make recommendations to government officials in the planning and service area and the State, on actions determined by the area agency to build the capacity in the planning and service area to meet the needs of older individuals for—

- (A) health and human services;
- (B) land use;
- (C) housing;
- (D) transportation;
- (E) public safety;
- (F) workforce and economic development;
- (G) recreation;
- (H) education;
- (I) civic engagement;
- (J) emergency preparedness;
- (K) protection from elder abuse, neglect, and exploitation;
- (L) assistive technology devices and services; and
- (M) any other service as determined by such agency.

(c) Each State, in approving area agency on aging plans under this section, shall waive the requirement described in paragraph (2) of subsection (a) for any category of services described in such paragraph if the area agency on aging demonstrates to the State agency that services being furnished for such category in the area are sufficient to meet the need for such services in such area and had conducted a timely public hearing upon request.

(d)(1) Subject to regulations prescribed by the Assistant Secretary, an area agency on aging designated under section 305(a)(2)(A) or, in areas of a State where no such agency has been designated, the State agency, may enter into agreement with agencies administering programs under the Rehabilitation Act of 1973, and titles XIX and XX of the Social Security Act for the purpose of developing and implementing plans for meeting the common need for transportation services of individuals receiving benefits under such Acts and older individuals participating in programs authorized by this title.

(2) In accordance with an agreement entered into under paragraph (1), funds appropriated under this title may be used to purchase transportation services for older individuals and may be pooled with funds made available for the provision of transportation services under the Rehabilitation Act of 1973, and titles XIX and XX of the Social Security Act.

(e) An area agency on aging may not require any provider of legal assistance under this title to reveal any information that is protected by the attorney-client privilege.

(f)(1) If the head of a State agency finds that an area agency on aging has failed to comply with Federal or State laws, including the area plan requirements of this section, regulations, or policies, the State may withhold a portion of the funds to the area agency on aging available under this title.

(2) (A) The head of a State agency shall not make a final determination withholding funds under paragraph (1) without first affording the area agency on aging due process in accordance with procedures established by the State agency.

(B) At a minimum, such procedures shall include procedures for—

- (i) providing notice of an action to withhold funds;
- (ii) providing documentation of the need for such action; and
- (iii) at the request of the area agency on aging, conducting a public hearing concerning the action.

(3) (A) If a State agency withholds the funds, the State agency may use the funds withheld to directly administer programs under this title in the planning and service area served by the area agency on aging for a period not to exceed 180 days, except as provided in subparagraph (B).

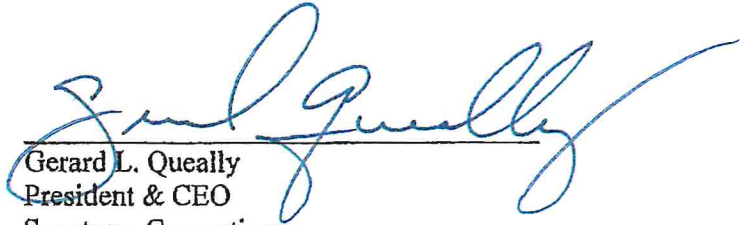
(B) If the State agency determines that the area agency on aging has not taken corrective action, or if the State agency does not approve the corrective action, during the 180-day period described in subparagraph (A), the State agency may extend the period for not more than 90 days.

(g) Nothing in this Act shall restrict an area agency on aging from providing services not provided or authorized by this Act, including through—

- (1) contracts with health care payers;
- (2) consumer private pay programs; or
- (3) other arrangements with entities or individuals that increase the availability of home and community-based services and supports.

2/19/2021


Date



Gerard L. Queally
President & CEO
Spectrum Generations

12/23/2020

Date



Daniel Booth
Chair, Board of Directors
Spectrum Generations

PUBLIC HEARING PROCESS

The proposed Area Plan was posted on the Agency website for a minimum of 14 calendar days and for the time period of *June 5, 2020 – June 24, 2020*

The public notice stated:

Public Notice

Spectrum Generations, the Central Maine Area Agency on Aging, will be holding public comment sessions as part of their review of their four-year Area Plan. The Plan details how the Augusta-based nonprofit, which provides home and community-based services and programs for nearly 40,000 older adults throughout central and midcoast Maine, will support programs including Meals on Wheels, caregiver resources, insurance options, information and assistance, health and wellness, in-home care and support from October 2020 through September 2024.

Two public comment sessions will be held online through Zoom sessions:

- 1) June 23 – 2:00 p.m.*
- 2) June 24 – 11:00 a.m.*

Older adults, family caregivers, aging services providers and anyone with an interest in services for older adults is invited to attend virtually and provide comment. Registration for the virtual sessions will be posted on spectrumgenerations.org by June 17.

The agency's area implementation plan is available for review at spectrumgenerations.org from June 5 until June 24. Written comments on the plan must be received no later than July 5 via email at feedback@spectrumgenerations.org or via mail at Spectrum Generations, 1 Weston Court Suite 109, Augusta, ME 04330.

Spectrum Generations publicized the availability of the proposed Area Plan and the request for comments in the following places:

Local public newspapers:

Local newsletters:

Social Media: facebook

Due to social distancing requirements, hard copies were made available via mail. Public hearings were made available via ZOOM on the following days and times:

- 1) June 23, 2020 at 2:00 pm; 5 participants registered and 2 attendees participated.
- 2) June 24, 2020 at 11:00 am; 10 registered; 7 attended; 1 participated.

PUBLIC COMMENTS AND RESPONSES

Comments provided at the June 23, 2020 Public Comment Hearing:

- I really like the goals you have set and look forward to helping you realize the goals.

Comments provided at the June 24, 2020 Public Comment Hearing:

- An attendee commented on the objective about publicizing our services and questioned whether we would use mail or social media.
- An attendee commented that we have a need for more volunteers and questioned how we can engage those who are 60 and over

Additional written comments provided: No written comments were received via email or mail.

DIRECT SERVICE WAIVER REQUESTS

Spectrum Generations is requesting Direct Service Waivers for Home-delivered Meals, Congregate Dining, and Supportive Services. Please see the attached Waiver Forms.

OTHER ATTACHMENTS

Other attachments include:

- Listing of the members of the Board of Directors
- Service listing by county

