



North Central Texas AAA Area Plan FFY 2024 – FFY 2026

**As Required by
Older Americans Act, As Amended in
2020: Section 306, Area Plans**

**Pending Approval by HHSC Office of
Area Agencies on Aging
2023**

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Section 1. Executive Summary

The North Central Texas region is undergoing rapid growth among persons of all ages, and older adults in particular. During the 10-year period from 2025 to 2035, the number of persons aged 60 and over who live in the North Central Texas area is expected to increase 37%, from 732,760 to 1,059,594. Of greater significance relative to potential demand for long-term services and supports, the number of North Central Texans aged 85 and over is projected to more than double, from 47,410 to 101,072, during the same 10-year period.

Older North Central Texans compare favorably to older Texans on several indices of well-being. However, there are significant variances at the county level, and residents of its four rural counties are at a disadvantage relative to wealth, health, and access to services.

The North Central Texas Area Agency on Aging (NCTAAA) has an ambitious mission: to develop and maintain a coordinated network of health and social services for older adults and family caregivers. As it prepares to enter the three-year planning period—from October 1, 2023 through September 30, 2026—it faces tremendous uncertainty regarding funding. Pandemic relief funding will be exhausted no later than September 30, 2024, and “base” funding through Title III of the Older Americans Act (OAA) is unknown as of April 2023. With Congress in a state of gridlock regarding the debt ceiling, it’s unlikely it will agree to substantial increases in funding for non-defense discretionary programs, including the OAA.

Absent a substantial increase in OAA funding, the NCTAAA will be compelled to make budget reductions, with detrimental impact on number of services, service intensity, and/or service duration. This will be a particularly difficult process as the number of people potentially eligible for services surges.

Should its resources shrink, the NCTAAA will give funding priority to services that keep older adults at risk of institutionalization in their homes. These services include, but are not limited to, home-delivered meals and case management. Even so, the NCTAAA has no assurances that it can maintain service levels once pandemic relief funds are exhausted. Any belt-tightening will result in less funding for discretionary programs and lesser ability to serve older adults who don’t fall into high-risk categories.

Regardless of funding availability, the NCTAAA will implement strategies to improve effectiveness and efficiency. They include:

- Increasing its investment in volunteer recruitment and retention to expand services in a cost-effective manner.
- Generating non-OAA revenues to expand services to older adults, persons with disabilities, and family caregivers. For example, the NCTAAA has a contract with the Texas Health and Human Services Commission (HHSC) to administer an Aging and Disability Resource Center and contracts with three health plans to help their members who reside in nursing facilities to return to community living.
- Utilizing a direct grant from the Administration for Community Living to make its OAA services more “dementia-capable” and expand supports for persons with dementia and their family caregivers.
- Making its services more widely available through remote delivery methods (in many cases, developed during the pandemic), but providing opportunities for face-to-face services as consumer needs require and resources allow.
- Utilizing COVID vaccination funds to increase community awareness of all NCTAAA services, in addition to specialized vaccination services.

The NCTAAA has developed programs and practices so that it gives priority to target populations delineated by the OAA: older persons with greatest economic need, greatest social need, minority status, and residence in rural counties. Each population has at least proportionate representation among North Central Texas registered clients (i.e., those who have provided detailed demographic data, including income, race, address, and household composition). For example, 27.82% of NCTAAA clients served during Fiscal Year 2022 reported having incomes below the poverty line. Within the region, 6.8% of older adults lived in poverty. Of all North Central Texas registered clients, 7.89% lived in rural counties. Within the region, 5.74% of older North Central Texans lived in rural counties. Of all North Central Texas registered clients, 46.31% lived alone. Throughout North Central Texas, 18.53% of persons aged 60 and over lived alone.

Section 2. Mission and Vision Statements

Legal Reference: 45 CFR 1321.53

Mission

The mission of the North Central Texas Area Agency on Aging (NCTAAA) is to maximize the independence, well-being, and health of older North Central Texans, persons with disabilities, and their family caregivers.

Vision

The vision of the NCTAAA is to allow older adults to live with dignity, exercise meaningful choice, and participate fully in their communities. In support of that vision, we will:

- Make available services that support community tenure.
- Advocate for those who require institutional care.
- Provide leadership and support to community-based organizations—both within and beyond the Title III network—that serve older adults, leveraging efforts to realize greater impact.
- Invest in programs that have demonstrated outcomes, thereby making efficient use of resources entrusted to our care.

Section 3. Board of Directors/Governing Body/Executive Committee

Membership Composition

The North Central Texas Council of Governments (NCTCOG) Executive Board is composed of 17 locally elected officials and one ex-officio non-voting member of the legislature. With the exception of the ex-officio member of the legislature, members are elected at the annual membership meeting (i.e., General Assembly), held after municipal elections. Members serve one-year terms.

The Executive Board serves as the policy-making body for all activities undertaken by NCTCOG, including program activity and decisions, regional plans, and fiscal and budgetary policies.

Frequency of Meetings

The NCTCOG Executive Board meets on a monthly basis, typically on the fourth Thursday of all months other than November and December, when meetings are moved to the third Thursday. Occasionally it cancels the November or December meeting to avoid conflicts with members' holiday leave and ensure quorum.

Anticipated meeting dates during Fiscal Years 2024 – 2026 are as follows:

- Thursday, October 26, 2023
- Thursday, November 16, 2023
- Thursday, December 21, 2023
- Thursday, January 25, 2024
- Thursday, February 22, 2024
- Thursday, March 28, 2024

- Thursday, April 25, 2024
- Thursday, May 23, 2024
- Thursday, June 27, 2024
- Thursday, July 25, 2024
- Thursday, August 22, 2024
- Thursday, September 26, 2024
- Thursday, October 24, 2024
- Thursday, November 21, 2024
- Thursday, December 19, 2024
- Thursday, January 23, 2025
- Thursday, February 27, 2025
- Thursday, March 27, 2025
- Thursday, April 24, 2025
- Thursday, May 22, 2025
- Thursday, June 26, 2025
- Thursday, July 24, 2025
- Thursday, August 28, 2025
- Thursday, September 25, 2025
- Thursday, October 23, 2025
- Thursday, November 20, 2025
- Thursday, December 18, 2025
- Thursday, January 22, 2026
- Thursday, February 26, 2026

- Thursday, March 26, 2026
- Thursday, April 23, 2026
- Thursday, May 28, 2026
- Thursday, June 25, 2026
- Thursday, July 23, 2026
- Thursday, August 27, 2026
- Thursday, September 24, 2026

Officer Selection Schedule

The dates of the 2024, 2025, and 2026 General Assemblies have not been determined as of the date of the Plan submission. They generally occur on the third or fourth Friday of June.

Current Officers

- President: Andrew Piel, Councilmember, City of Arlington (2022-2023)
- Vice-President: Bill Heidemann, Mayor, City of Corinth (2022-2023)
- Secretary-Treasurer: Chris Hill, County Judge, Collin County (2022-2023)
- Secretary (or equivalent position): Chris Hill, County Judge, Collin County (2022-2023)
- Immediate Past Chair (or President): David Sweet, County Judge, Rockwall County (2021 – 2022)

Section 4. Advisory Council

Legal References: 45 CFR 1321.57; OAA 2020 306(a)(6)(D)

Council Composition

The Regional Aging Advisory Committee (RAAC) is structured so that each of the 14 counties in its Planning Service Area (PSA) is entitled to two seats. With all seats filled, RAAC has 28 members. Preference is given to older adults, who must comprise at least half of all members. In addition to older adults, members include representatives of older persons, representatives of health care provider organizations, representatives of supportive services provider organizations, persons with leadership experience in the private and voluntary sectors, local elected officials, and the general public.

RAAC members' primary responsibilities include assisting the NCTAAA in developing and implementing this plan, representing the interests of older persons and family caregivers, and commenting on policies that affect older persons and family caregivers.

Members by Category

Table 1 below reflects the number of council members in the PSA who represent each category listed. A council member may be counted in more than one category.

Table 1. Advisory Council Members by Category

Category	Number of Members
Older Individuals Residing in Rural Areas	4
Clients of Title III Services	1
Older Individuals	7
Minority Older Individuals who Participate or are Eligible to Participate in OAA Programs	1
Local Elected Officials	1
General Public	

Category	Number of Members
Veterans' Health Care Providers, if applicable	1
Service Providers	2
Family Caregivers of Older Individuals who are Minority or who Reside in Rural Areas	
Business Community Representatives	8
Representatives of Older Individuals	12
Representatives of Health Care Provider Organizations	2
People with Leadership Experience in the Private and Voluntary Sector	2
Representatives of Supportive Services Provider Organizations	1

Frequency of Meetings

The Regional Aging Advisory Committee meets at least quarterly, and more frequently if necessary to respond to urgent business. Its regular meetings are held on the second Tuesday of February, May, August, and November. As such, its meeting schedule for Fiscal Years 2024 – 2026 is as follows:

- November 14, 2023
- February 13, 2024
- May 14, 2024
- August 13, 2024
- November 12, 2024
- February 11, 2025
- May 13, 2025
- August 12, 2025
- November 11, 2025
- February 10, 2026
- May 12, 2026
- August 11, 2026

Member Selection Schedule

Members serve staggered three-year terms and are allowed to serve up to two consecutive full terms before reaching term limits. When all positions are filled, either nine or ten vacancies become available at the end of the calendar year.

The process for filling vacancies begins with the Director of Aging Programs soliciting nominees from the respective county judges in early November. Judges are asked to submit nominees by the end of the calendar year. In some cases, nominations require action by county commissioners.

If judges do not have any nominees, the Director requests assistance from staff and subrecipients in identifying candidates. If nominations come from sources other than the county judges, the Director seeks endorsement from the county judge.

All appointments are made by the NCTCOG Executive Board. The Director usually presents nominees and proposed officers at the Board's January meeting, and appointments take effect immediately.

The Director may request nominees from county judges and take appointments before the Board at other times in order to replace committee members who have not completed their terms.

Advisory Council Members

Table 2. AAA Advisory Council Members

Name	Occupation or Organization or Affiliation	County of Residence	Member Since	Current Office Term
Dan Bollner	retired business owner	Collin	2021	2021-2023
vacant		Collin		
Fred Rogers	retired retail sales director	Denton	2022	2022-2024
Ronnie Smith	Vice-president, HNTB Corporation	Denton	2017	2021-2023
Dani Muckleroy	retired business owner	Ellis	2022	2022-2024
Maurice Osborn	representative of elected official	Ellis	2017	2021-2023
Leann Hook	home health social worker	Erath	2018	2022-2024
Dana Worrell	representative of health care provider organization	Erath	2023	2023-2026
John Campbell	business owner	Hood	2021	2022-2024
Trish Reiner	business owner, city councilmember	Hood	2018	2021-2023
vacant		Hunt		
vacant		Hunt		
Whitney Clotfelter	attorney	Johnson	2023	2023-2025
DeeAnn Strother	attorney	Johnson	2018	2021-2023

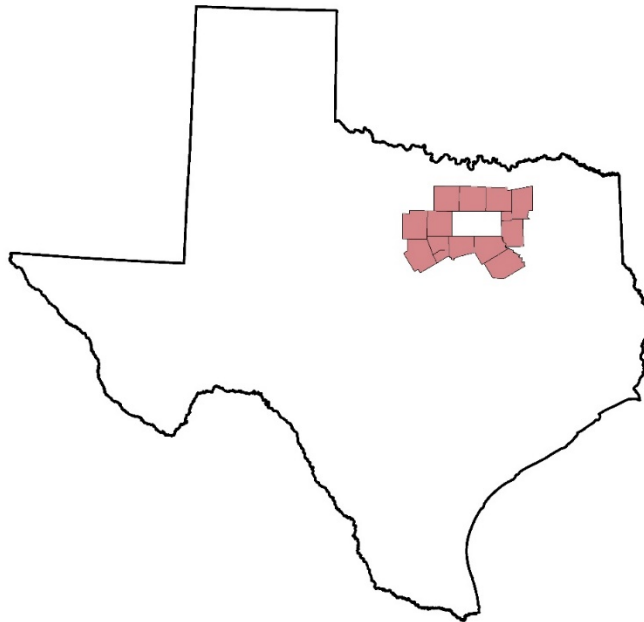
Name	Occupation or Organization or Affiliation	County of Residence	Member Since	Current Office Term
Dr. Bruce Wood	retired superintendent, county judge	Kaufman	2020	2023-2025
vacant		Kaufman		
Lynda Sloan	retired	Navarro	2022	2022-2024
Chelsea Couch	HHSC employee supporting Age Well	Navarro	2023	2023
Dan Roberts	retired health care executive	Palo Pinto	2020	2021-2023
Allan Sparkman	retired business owner	Palo Pinto	2023	2023-2025
Brian Chapman	community volunteer	Parker	2018	2018-2020
vacant		Parker		
vacant		Rockwall		
vacant		Rockwall		
Dr. Bob Miller	physician	Somervell	2021	2021-2023
		Somervell		
Debbie Bounds	co-owner, 2B Marketing Services	Wise	2020	2020-2022
vacant		Wise		

Section 5. Agency Description and PSA Profile

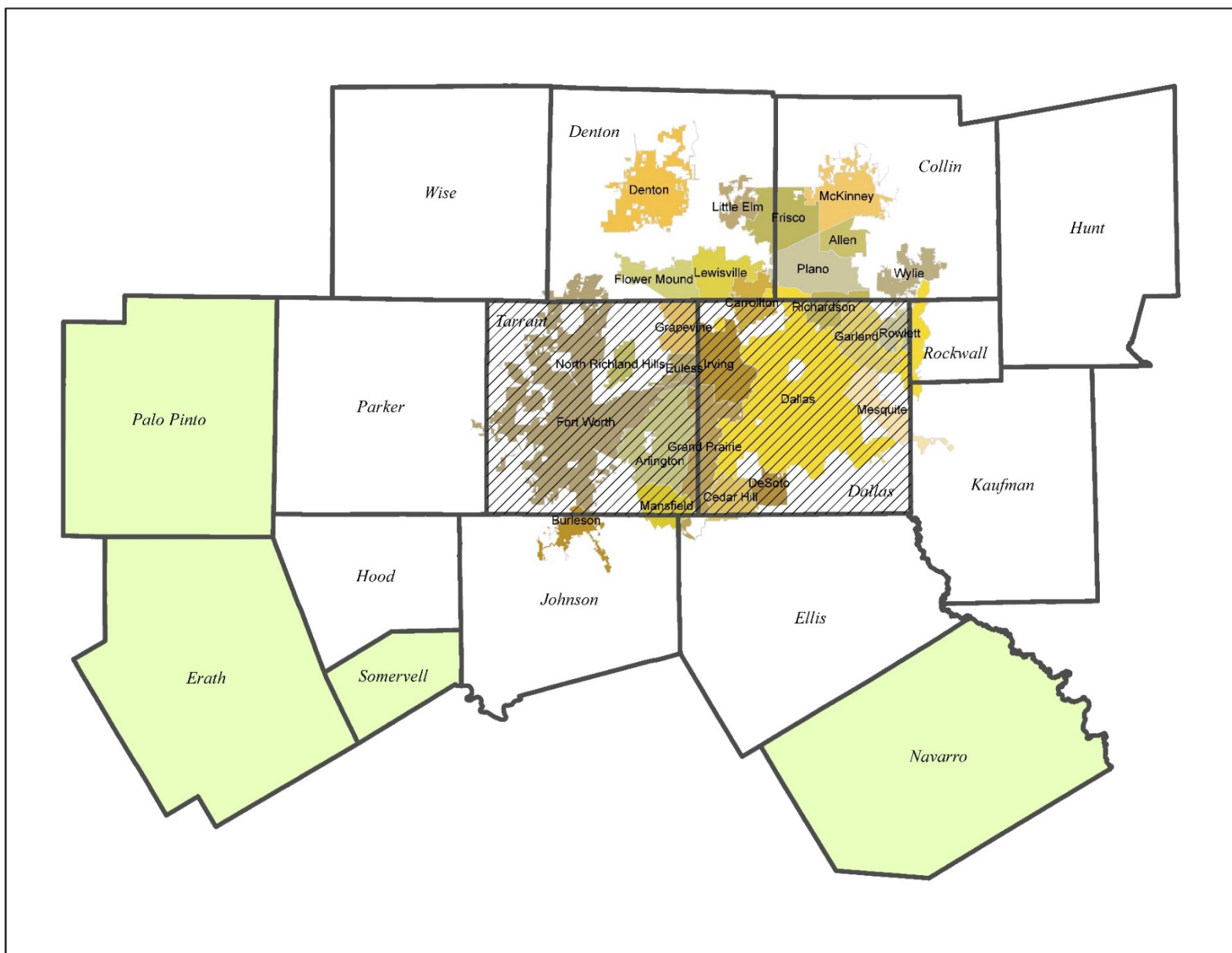
Legal References: 45 CFR 1321.53; OAA 2020 306(a)(3), 306(a)(4), 306(a)(5) and 306(a)(12); 26 TAC 213.1

Identification of Counties and Major Communities

The North Central Texas Planning and Service Area (PSA) 4A consists of 14 counties, namely: Collin, Denton, Ellis, Erath, Hood, Hunt, Johnson, Kaufman, Navarro, Palo Pinto, Parker, Rockwall, Somervell, and Wise. A map of the PSA relative to the state appears below:



Within the 14-county PSA, four counties are classified as rural: Erath, Navarro, Palo Pinto, and Somervell. A map of the PSA, with rural counties highlighted in light green, appears on the following page. The urban core of Dallas and Tarrant Counties is beyond the North Central Texas PSA but included for context.



As of April 2023, there were 13 cities within the PSA with populations of more than 50,000: Allen (Collin), Burleson (Johnson), Carrollton (Denton and Dallas), Denton (Denton), Flower Mound (Denton) Frisco (Collin and Denton), Lewisville (Denton), Little Elm (Denton), McKinney (Collin), Plano (Collin), Richardson (Collin and Dallas), Rowlett (Rockwall and Dallas), and Wylie (Collin).

Socio-Demographic and Economic Factors

The North Central Texas region is vibrant, undergoing rapid growth among persons of all ages and older adults in particular. It has two counties (i.e., Kaufman and Rockwall) that were ranked among the top 10 nationwide in percentage growth from 2020 to 2021.

Older adults in North Central Texas compare favorably to older Texans on several indices of well-being. In the aggregate, they have higher citizenship rates, lower poverty rates, higher median incomes, higher levels of educational attainment, greater likelihood of living in family households, greater likelihood of being married, lesser risk of being uninsured, and higher rates of English fluency, relative to all Texans aged 60 plus. Following are selected measures, based on Census data for the period 2015 -2019:

Selected Socioeconomic Measures for Persons Aged 60+: 2015-2019

Measure	North Central Texas	State of Texas
Is U.S. citizen	96.10%	93.10%
Has income above poverty level	93.40%	89.20%
Median family income	\$80,938	\$68,494
Has bachelor's degree	20.60%	16.60%
Lives in family household	78.10%	74.90%
Is married	64.90%	60.30%
Has health insurance	95.50%	94.60%
Speaks English well	96.11%	90.86%

However, regional data obscure significant variation at the county level. On average, older residents of rural counties have fewer economic advantages and lesser access to services.

The following chart demonstrates variability in elder poverty rates and median income—two significant correlates of economic well-being—at the county level. The region's four rural counties—Erath, Navarro, Palo Pinto, and Somervell—appear in red type for emphasis.

**Poverty Rates and Median Incomes for Persons Aged 60+ by County:
2015-2019**

County	Poverty Rate	Median Income
Collin	6.50%	\$92,413
Denton	5.30%	\$91,119
Ellis	5.90%	\$76,780
Erath	9.70%	\$65,710
Hood	5.80%	\$70,041
Hunt	9.50%	\$62,088
Johnson	6.20%	\$65,326
Kaufman	10.10%	\$69,184
Navarro	11.20%	\$55,435
Palo Pinto	11.70%	\$55,110
Parker	7.50%	\$71,883
Rockwall	3.20%	\$85,399
Somervell	16.80%	\$61,667
Wise	7.70%	\$62,912
North Central Texas	6.60%	\$80,938
State of Texas	10.80%	\$68,494

Although North Central Texas has a regional elder poverty rate that is lower than the state average, three of its four rural counties have rates that are significantly higher. Somervell County has an elder poverty rate 55.5% higher than the state average of 10.8%, with more than one in six older residents (16.8%) living in poverty.

Median incomes for older persons who live in all four rural North Central Texas counties are significantly below the state average of \$68,494.

Furthermore, residents of rural counties are more likely to experience disability than their peers in urban counties. As the following chart demonstrates, the incidence of disability among older residents of all four rural counties is higher than the statewide average of 32.5%. In addition, four urban counties (Ellis, Hunt, Kaufman, and Wise) have disability rates that are above the statewide average.

Disability Rates for Persons Aged 60+ by County: 2015-2019

Collin	23.10%
Denton	25.00%
Ellis	32.60%
Erath	34.00%
Hood	24.70%
Hunt	36.50%
Johnson	28.80%
Kaufman	32.90%
Navarro	41.10%
Palo Pinto	36.60%
Parker	29.40%
Rockwall	23.50%
Somervell	30.60%
Wise	37.60%
<i>North Central Texas</i>	27.20%
<i>State of Texas</i>	32.50%

As regional data gloss over variances between counties, county level data obscure significant differences at the consumer level. Living in a county with a low poverty rate is no consolation to an older resident who is unable to pay for basic needs. Residing in an affluent community can aggravate economic hardship since the cost of essential services, including housing, may be higher. For example, the average rent for a one-bedroom unit in early 2023 was \$624 for Navarro County, \$837 for Erath County, \$1,656 for Rockwall County, and \$1,715 for Collin County.

Economic and Social Resources

The NCTAAA recognizes that Older Americans Act revenues will never be sufficient to respond in full to the needs of older adults and their family caregivers. To that end, it seeks additional funding for services that are consistent with its mission and may be implemented in an effective and efficient manner. In addition, it enters into partnerships with organizations that share its vision and can assist in improving older adults' quality of life.

During the prior planning period (ending September 30, 2023), the NCTAAA benefited from non-traditional funding sources that included the following:

- Pandemic-relief funding appropriated through federal legislation including Families First, the Coronavirus Aid, Relief and Economic Security (CARES) Act, and American Rescue Plan (ARP) Act. These supplemental revenues were critical in more fully funding the Agency's signature programs (e.g., home-delivered meals and demand response transportation), expanding the scope of its care coordination and caregiver support coordination programs, and standing up new programs to respond to emerging needs (e.g., PEARLS counseling for older adults who are depressed and/or isolated, Tai Chi for Arthritis and Fall Prevention, and Financial Fitness for Older Adults).

In addition, the NCTAAA used these emergency funds to support senior center operations. Historically, the Agency had not been able to fund programs at subrecipients' senior centers, given the high number of centers in the region (more than 40), the relatively high cost of centers' start-up and operational costs, and the nominal amount of available OAA funding. As senior centers were shuttered by COVID and gradually reopened, they were challenged to attract former and new participants. The NCTAAA underwent a Call for Projects that led to agreements with subrecipients to offer innovative senior center programs. Such programs are essential in ensuring that congregate meal participants get more than a meal and have opportunity to engage in meaningful activity.

- Direct grant from the Administration for Community Living (ACL) in the amount of \$1,000,000 to support Dementia Friendly North Central/East Texas. These funds allowed the NCTAAA to create new services for people with dementia and their family caregivers in a 28-county area, including the entirety of the North Central Texas Planning Service Area (PSA). The NCTAAA utilized ACL funds to hire a part-time grant manager and a bilingual

case manager/dementia educator. In addition, it funded direct services for family caregivers that were administered by the Alzheimer's Association—North Central Texas Chapter, Alzheimer's Alliance of Smith County, the Community for Permanent Supported Housing, Dementia Friendly Fort Worth, James L. West Dementia Care Center, and Parkland Health and Hospital System.

- A contract with HHSC for Aging and Disability Resource Center (ADRC) services. Under this contract, three NCTCOG Aging program benefits specialists assist people with disabilities of all ages and their family caregivers in accessing long-term services and supports. In addition, they administer the ADRC Lifespan Respite program, funded by HHSC. This program provides unpaid family caregivers a break from their caregiving responsibilities and serves as a complement to the NCTAAA respite program for caregivers of older adults. In addition, the ADRC contract allows the NCTAAA to retain a contract housing navigator (i.e., Mascari Corporation) who maintains an inventory of affordable housing and advocates for the expansion of affordable housing. Finally, the ADRC contract supports a Medicare Improvement for Patients and Providers Act (MIPPA) community educator who raises awareness of Medicare low-income and preventive health benefits.
- Money Follows the Person (MFP) contracts with Amerigroup, Molina Healthcare, and United Healthcare to provide relocation services to members who reside in skilled nursing facilities and wish to return to the community. Under the MFP contracts, NCTAAA staff and contract relocation specialists help nursing home residents who are funded by Medicaid secure housing, access transition grants, and arrange non-Medicaid supports that are essential to relocation. Total revenues are approximately \$800,000 per annum.
- Contributions from counties within the NCTAAA service area for the purpose of satisfying the Title III administrative match requirement. Counties contribute \$150,000/annum in the aggregate. The NCTAAA determines each county's share of the regional match amount by calculating a percentage of its pass-through funds for the core services of nutrition and transportation relative to all pass-through funding for nutrition and transportation services.
- A contract with United Way of Tarrant County for provision of Empower services. United Way of Tarrant County was the primary awardee of a grant

with Texas Health Resources Community Impact grant and subcontracted with the NCTAAA to provide nutrition, transportation, and case management services for adults who live in Springtown (Parker and Wise Counties).

- Subcontract with Community Council of Greater Dallas for chronic disease self-management services. Under this grant, the NCTAAA was reimbursed on a unit rate basis for each person who attended at least four of six Chronic Disease Self-Management, Diabetes Self-Management, and/or Chronic Pain Self-Management sessions.

In addition to securing supplemental funding to expand its mission, the NCTAAA utilizes in-kind resources—primarily donated professional services—to expand reach and realize administrative efficiencies.

The NCTAAA supports volunteers as critical staff extenders for its long-term care ombudsman, benefits counseling, Senior Medicare Patrol, and preventive health classes (e.g., Chronic Disease Self-Management, Diabetes Self-Management, Chronic Pain Self-Management, and Tai Chi for Arthritis and Fall Prevention). As of Spring 2023 the agency had approximately 60 unduplicated volunteers in these roles, which represented a significant reduction from its pre-COVID volunteer base. The NCTAAA hired a dedicated volunteer recruiter in March 2023 in order to reduce attrition and attract new volunteers.

The NCTAAA also utilizes unpaid student interns. In doing so, it provides undergraduate and graduate students key “real-world” experience while benefiting from donated professional services. During the prior planning period it sponsored two students: Lauren Bordignon, who provided case management services, and Tiffany Hughes, who helped low-income clients complete applications for community Medicaid, Medicaid for the Elderly and People with Disabilities, and Supplemental Nutrition Assistance Program (SNAP).

The NCTAAA has a large pool of prospective student interns from which to draw. The North Central Texas area is home to a number of colleges and universities, including the University of North Texas (Denton County), Texas Woman’s University (Denton County), and Tarleton State University (Erath County). In addition, the NCTAAA has sponsored interns who attend schools in Dallas and Tarrant Counties, as well as interns who are pursuing degrees online.

Description of Service System

On the basis of regional needs, the NCTAAA creates and maintains a comprehensive network of health and social services for older adults, their family caregivers, older caregivers of young adults with severe disabilities, and older caregivers of minor grandchildren (or relatives other than biological children). While some of its services are mandated by HHSC as the State Unit of Aging, it has the flexibility to choose others, as well as determine the budget priority for services (within the limitations of certain maintenance of efforts specified by the federal and/or state governments). Further, it is able to provide services that are not restricted to individuals with low incomes and/or resources, while satisfying its obligation under the OAA to target older adults and family caregivers with greatest economic need.

As it prepares for the new planning period effective October 1, 2023, the NCTAAA intends to support the following OAA services. It will do so through a combination of direct and pass-through services (i.e., services that are provided in their entirety by subrecipients and for which the NCTAAA has responsibilities for ensuring compliance).

AAA-Funded Services for Older Adults

NCTAAA direct services for older adults include information, referral and assistance; care coordination; benefits counseling (including HICAP outreach, HICAP assistance, MIPPA outreach, legal awareness, and legal assistance); long-term care ombudsman; and evidence-based intervention (including A Matter of Balance, Chronic Disease Self-Management, Diabetes Self-Management, Chronic Pain Self-Management, and Tai Chi for Arthritis and Fall Prevention).

As it provides care coordination services to older adults, the NCTAAA utilizes competitively procured contractors to provide health maintenance (e.g., medical equipment and supplies), residential repair, emergency response services, and in-home services (including homemaker and personal assistance). In addition, it allows consumers who have been approved for homemaker services to select their own providers, under the service category of homemaker voucher.

The NCTAAA utilizes a contractor to provide PEARLS counseling and a contractor and two temporary employees to provide public information services.

Older adult services provided exclusively by NCTAAA subrecipients are congregate meals, home-delivered meals, transportation—demand response, nutrition education, and senior center operations.

The NCTAAA provides Title III-B information, referral and assistance and instruction and training services as both direct and pass-through services.

AAA-Funded Services for Family Caregivers

NCTAAA supports caregiver support coordination as a direct service, utilizing six staff and two contract case managers who assess the needs of family caregivers and arrange services that include health maintenance, residential repair, emergency response services, respite, and respite vouchers. All of these arranged services are provided by 15 competitively procured contractors, with the exception of respite vouchers (which allow caregivers to select their own providers).

Caregiver services provided exclusively by NCTAAA subrecipients consist of caregiver counseling and caregiver training.

The NCTAAA funds Title III-E information, referral and assistance and caregiver information services as both direct and pass-through services.

In sum, services funded by the NCTAAA address the needs of older adults and family caregivers who require: 1) objective information to make informed choices (e.g., information, referral and assistance); 2) advocacy to resolve concerns (e.g., long-term care ombudsman and benefits counseling); and 3) direct services, provided either one-time only or on an on-going basis, to maximize health and independence (i.e., all other services).

Although NCTAAA services are not means-tested, they effectively target individuals who are experiencing financial need. This is evidenced by the fact that more than one-fourth (27.82%) of all registered consumers served during Fiscal Year 2022 were living in poverty. Among all older North Central Texans, 6.8% were living in poverty.

The NCTAAA continues to make its service more accessible to older adults with limited English proficiency, who also constitute a target population under the OAA. In mid-2023 its staff members include a benefits counselor, case manager, dementia educator, and outreach specialist who are fluent in both Spanish and English, and a senior administrative assistant who speaks English, Vietnamese, and French.

The NCTAAA maintains a contract with Universe Translation to serve consumers who communicate in languages other than English. In addition, it has a contract with Deaf Action Center to provide live interpretation for those who communicate via American Sign Language.

Focal Points

Table 3. Focal Points in the Planning and Service Area

Community Served	Name and Address of Focal Point	Services Provided	Services Coordinated with Other Agencies
Collin County	Meals on Wheels of Collin County 600 North Tennessee Street McKinney, TX 75069	home-delivered meals, congregate meals, demand response transportation	Services other than nutrition and transportation
Denton County	S.P.A.N. 1800 Malone Street Denton, TX 76201	home-delivered meals, congregate meals, demand response transportation	Services other than nutrition and transportation
Ellis County	Meals on Wheels North Central Texas 106 E. Kilpatrick Street Cleburne, TX 76031	home-delivered meals, congregate meals	Services other than nutrition
Erath County	Erath County Senior Citizens Services, Inc. 310 W. Lingleville Road, Suite 101 Stephenville, TX 76401	home-delivered meals, congregate meals, demand response transportation, senior center operations	Services other than meals, demand response transportation, senior center operations
Hood County	Hood County Committee on Aging 501 E. Moore Granbury, TX 76033	home-delivered meals, congregate meals, demand response transportation, senior center operations	Services other than meals, demand response transportation, senior center operations
Hunt County	Senior Center Resources and Public Transit 4912 Lee Street Greenville, TX 75401	home-delivered meals, congregate meals, demand response transportation	Services other than nutrition and transportation

Community Served	Name and Address of Focal Point	Services Provided	Services Coordinated with Other Agencies
Johnson County	Meals on Wheels North Central Texas 106 E. Kilpatrick Street Cleburne, TX 76031	home-delivered meals, congregate meals	Services other than nutrition
Kaufman County	Senior Connect 607 E. Fair Street Kaufman, TX 75142	home-delivered meals, congregate meals, senior center operations, information, referral and assistance	Services other than meals, senior center operations, and information, referral and assistance
Navarro County	Meals on Wheels North Central Texas 106 E. Kilpatrick Street Cleburne, TX 76031	home-delivered meals, congregate meals	Services other than nutrition
Palo Pinto County	Meals on Wheels of Palo Pinto County 1410 S.E. Martin Luther King, Jr. Street Mineral Wells, TX 76067	home-delivered meals	Services other than nutrition
Parker County	Parker County Committee on Aging 1225 Holland Lake Road Weatherford, TX 76086	home-delivered meals, congregate meals	Services other than nutrition
Rockwall County	Meals on Wheels Senior Services P.O. Box 1910 Rockwall, TX 75032	home-delivered meals, congregate meals, caregiver information services, information, referral and assistance	Services other than home-delivered meals, congregate meals, caregiver information services, and information, referral and assistance

Community Served	Name and Address of Focal Point	Services Provided	Services Coordinated with Other Agencies
Somervell County	Somervell County Committee on Aging 209 SW Barnard Street Glen Rose, TX 75087	home-delivered meals, congregate meals, demand response transportation, senior center operations	Services other than nutrition, transportation, and senior center operations
Wise County	Wise County Committee on Aging 300 N. Trinity Decatur, TX 76234	home-delivered meals, congregate meals, demand response transportation	Services other than nutrition and transportation
Collin, Denton, Ellis, Erath, Hood, Hunt, Johnson, Kaufman, Navarro, Palo Pinto, Parker, Rockwall, Somervell, and Wise Counties	North Central Texas Council of Governments 616 Six Flags Drive Arlington, TX 76011	OAA services and others (e.g., nursing home relocation) funded by other federal, state, and local grants	Any and all health and social services

Role in Interagency Collaborative Efforts

The North Central Texas Council of Governments (NCTCOG) as an organization, the NCTAAA as an NCTCOG program, and NCTAAA staff persons as individuals welcome opportunities to participate in interagency collaboratives, realizing synergies of effort in addressing critical needs of older adults and family caregivers.

NCTCOG has applied for and received funds from HHSC to support an Aging and Disability Resource Center (ADRC). The ADRC provides information about long-term services and supports for persons of all ages with all types of disabilities, as well their family caregivers. Doni Green has responsibilities for administering both Area Agency on Aging (AAA) and ADRC services, and the two programs' staff members are co-located. They meet at least monthly to ensure that services are well coordinated and discuss policy issues and consumer-specific needs. Green is a former co-chair of the Texas Aging and Disability Resource Center Coalition and has served for several years as a member of HHSC's Aging and Disability Resource Center Advisory Committee.

NCTCOG has a long history of informal and formal collaboration with REACH as the region's Center for Independent Living. It contracts with REACH for provision of Money Follows the Person nursing home relocation services. In addition, it engages in cross-referrals and partners on special projects.

NCTCOG is a member of the Texas Association of Regional Councils (TARC), and the Aging program is a member of the Texas Association of Area Agencies on Aging (T4A). Green participates in T4A meetings through which members identify advocacy issues and develop strategies for addressing these issues. Green is a former T4A secretary and president.

NCTCOG is also a member of USAging (formerly National Association of Area Agencies on Aging, or n4a). The organization represents and supports the national network of Area Agencies on Aging and advocates for programs that help older adults and people with disabilities live with optimal health, well-being, independence and dignity in their homes and communities. Green is a former n4a board member and has participated in several technical assistance collaboratives that have led to the development of innovative programs such as Financial Fitness for Older Adults.

The NCTAAA recognizes the Texas Silver-Haired Legislature (TSHL) as uniquely qualified to engage in systems change and supports its members by identifying policy issues and providing input for resolutions as requested. It invites TSHL representatives to serve on its Regional Aging Advisory Committee (subject to approval by the county judges, who make nominations). Green has participated in TSHL executive committee meetings and presented at TSHL Legislative Forums.

The NCTAAA has partnered with disability organizations such as ADAPT, the Coalition of Texans with Disabilities (CTD), and Disability Rights Texas to conduct community education on critical topics (e.g., the crisis in recruitment and retention of direct service workers).

In addition the NCTAAA has partnered with the region's Local Intellectual/Developmental Disability Authorities (LIDDAs) on a broad range of projects. Among the more notable are a PASARR initiative and Dementia Friendly North Central/East Texas.

During the prior planning period, Green formed a Preadmission Screening and Resident Review (PASARR) task force, with representation by several LIDDAs. The task force's purpose was to increase professionals' knowledge of the PASARR process, in addition to improve nursing home residents' access to vital behavioral health and habilitation services. Its work culminated in a statewide webinar for professionals, including nursing facility staff, LIDDA case managers, long-term care ombudsmen, and relocation specialists.

In late 2022, Green convened an intellectual and developmental disability (IDD) and dementia task force to inform NCTCOG's Dementia Friendly work under contract with the Administration for Community Living. Dementia Friendly targets historically underserved populations, including persons with IDD who have dementia or who are at risk of developing dementia. The task force included representatives of several LIDDAs, in addition to family members of persons with IDD and a self-advocate. It advised NCTCOG as it developed an IDD and dementia training program for family members and professionals and created an outreach strategy to increase awareness of AAA and grant-funded services.

NCTAAA staff members participate in several long-standing and ad-hoc coalitions. These include:

- Green serves as a gubernatorial appointee, representing HHSC's legacy Promoting Independence Advisory Committee, on the Texas Housing and Health Services Coordination Council. That committee is charged with

promoting service-enriched housing for older adults and persons with disabilities. Green serves as vice-chair.

- Green serves as an ex-officio member of Texas Healthy at Home, an interagency organization she helped launch through participation in an ACL targeted technical assistance collaborative. Texas Healthy at Home enables community-based organizations to address unmet needs by providing more services for older adults, accessing new revenue sources and saving money through collaboration with health entities such as hospital systems and health plans. Texas Healthy at Home has successfully negotiated contracts with payors such as Baylor Scott and White to expand caregiver information and support services.
- Green serves on the James L. West Center for Dementia Care Advisory Committee. Committee members define, review, and refine James L. West's clinical training programs for family caregivers. Among its recurrent training programs are Dementia Live, Compassionate Touch, Dealing with Dementia, and Stress-Busters for Family Caregivers.
- Green has served on Texas Association of Area Agency on Aging workgroups to revise ombudsman rules and review Area Agency on Aging service definitions.
- Benefits counseling program manager Melinda Gardner is a board member of Dementia Friendly Denton County, an all-volunteer organization that provides training and consultation to better serve the needs of those who live with dementia and their care partners.
- Gardner serves on the Alzheimer's Association African American Advisory Council, which assists the North Central Texas chapter in planning activities and advises on outreach efforts.
- Evidence-based and volunteer programs manager Tina Dawson serves on the Texas Takes on Falls Coalition. The coalition's purpose is to create systemic, lasting change that reduces the incidence of falls throughout Texas. Its strategies include developing educational, advocacy, and media materials to raise fall awareness and creating policy change through statute and/or regulations that provide funding for and mandate uniform implementation of falls prevention programs throughout Texas.

- Dawson serves on the STAR Council, an interagency collaborative that provides education and counseling to promote substance-free lifestyles.
- Evidence-based program specialist Kim Mathis serves on the Denton County Health Department Healthy Communities Coalition. Its mission is to improve the health of Denton County residents through disease prevention and health promotion. Current activities include advocating for expanded physical activity programs, full disclosure of nutritional information, stronger smoking ordinances, and improving options and availability for transportation, housing, and services for older adults.

Section 6. Preparedness Assessment

Legal Reference: OAA 2020 306(b)

Projected Population Changes

The NCTAAA's ability to respond adequately to rapid population growth is contingent on resources. At the time of this plan submission (Spring 2023), the outlook is grim. A confluence of events—including loss of federal stimulus funding, an unknown amount of “base” OAA funding, and historic inflation rates—constrain revenues, as well as their purchasing power. At the same time that resources are expected to shrink, demographic data indicate that demand is likely to accelerate.

Extremely rapid population growth among older adults, particularly among persons age 85 and over, is likely to fuel significant increases in demand for services.

The chart on the following page reveals that the number of people aged 60 and over who call North Central Texas home is projected to increase 37% during a ten-year period, from 732,760 in 2025 to 1,059,594 in 2035.

Population Change Among People Aged 60+ by County: 2025-2035

60+ population	2025	2035	Percentage increase
Collin	244,970	385,932	58%
Denton	202,861	335,131	65%
Ellis	43,190	53,480	24%
Erath	9,326	10,026	7%
Hood	21,969	23,180	6%
Hunt	25,762	28,300	10%
Johnson	42,872	49,630	16%
Kaufman	30,151	38,304	27%
Navarro	13,377	14,221	6%
Palo Pinto	8,264	7,934	-4%
Parker	40,629	47,927	18%
Rockwall	27,748	41,258	49%
Somervell	3,090	3,341	8%
Wise	18,551	20,930	13%
NCT	732,760	1,059,594	37%

Throughout the State of Texas, older adults represent one of the most rapidly growing demographic groups, increasing in both number and population share. This holds true in North Central Texas.

Robust growth among North Central Texans of all ages contributes to dramatic growth among older adults. In 2021 the Greater Dallas/Fort Worth area led the nation in metropolitan growth for the fourth year in a row. However, it is important to note that the North Central Texas population at large is expected to increase by 22% (growing from 3,527,444 to 4,303,694) from 2025 to 2035, significantly less than the projected increase of 37% among residents aged 60 and over.

Given rapid growth rates, older North Central Texans are expected to constitute an increasing percentage of all older Texans, from 11.32% in 2025 to 13.08% in 2035. By 2035, it is projected that more than one in eight older Texans will live in North Central Texas.

Of even greater significance is projected growth in the number of North Central Texans aged 85 and over. Among this population cohort, 55% require long-term care. In contrast, 13% of those aged 65-69 require long-term services and supports. The data below point to a more than doubling (i.e., 113% increase) of this population in North Central Texas between 2025 and 2035: from 47,410 to 101,072.

Population Change Among People Aged 85+ by County: 2025-2035

County	2025	2035	Percentage Change
Collin	13,458	32,740	143%
Denton	10,590	27,382	159%
Ellis	2,924	5,498	88%
Erath	877	1,342	53%
Hood	2,412	3,726	54%
Hunt	2,169	3,227	49%
Johnson	3,482	5,914	70%
Kaufman	2,395	4,695	96%
Navarro	1,149	1,700	48%
Palo Pinto	700	920	31%
Parker	3,511	6,676	90%
Rockwall	1,901	4,059	114%
Somervell	301	532	77%
Wise	1,541	2,661	73%
<i>North Central Total</i>	<i>47,410</i>	<i>101,072</i>	<i>113%</i>

Persons aged 85 and over face greater risk of entering and remaining in nursing facilities than do their younger counterparts. However, 92% of people aged 85 and over are community-dwelling. In many cases they have lost their informal support networks, including spouses and friends, and look to formal providers, including the NCTAAA, to provide time-limited and ongoing services that allow them to age with dignity and independence.

The NCTAAA has the ability to serve older adults along the continuum, from those who are well and want to maintain their good health, to those who are frail and at risk of institutionalization or already residing in an institution. However, its resources are skewed in favor of services for frail older adults, such as long-term care ombudsman, home-delivered meals, and care coordination.

The NCTAAA seeks balance in its programming and recognition as a resource for those who are well, as well as those who are frail. To that end, it launched Tai Chi for Arthritis and Fall Prevention in late 2022, which has attracted a younger, healthier audience than the agency's other evidence-based programs.

The Agency was able to launch Tai Chi (as well as Financial Fitness for Older Adults and PEARLS) during the pandemic with supplemental pandemic relief funding. It anticipates that all of these supplemental funds will be exhausted no

later than September 30, 2024 and is developing a plan for belt-tightening in the event that pandemic relief funds are not replaced by OAA funds.

Should its resources shrink in the years to come, the NCTAAA will seek greater efficiencies, work to expand resources, place greater emphasis on targeting, and control spending.

Strategies for these goals include:

- Investing in a volunteer recruiter and expanding its corps of volunteer ombudsmen, health coaches, benefits counselors, and Senior Medicare Patrol educators.
- Continuing to invest in remote services, which allow the NCTAAA to serve more clients without incurring travel costs and older adults to participate from the convenience of their homes.
- Generating non-OAA revenues that allow the NCTAAA to serve a greater number of older persons, persons with disabilities, and family caregivers.

The NCTAAA will work to expand resources by determining the feasibility of participating in the Veterans Directed Care program, seeking discretionary grants that are a good fit, and contracting with health plans for innovative services. In doing so it will exercise caution so that non-OAA programs enhance, rather than detract from, OAA programs.

The NCTAAA and its providers have systems in place to effectively target high-risk populations and to become more restrictive if necessary. For example, its caregiver support coordination services are available to those who meet at least three of its six screening criteria. If funding is reduced, it can require participants to meet at least four criteria. Similarly, home-delivered meal providers can limit services to older adults with greatest functional impairment and/or least informal support.

In addition, the NCTAAA can reduce the maximum dollar value of services that are purchased for its care coordination clients and/or authorize fewer hours of service for those who receive homemaker and personal assistance. Such actions may allow it to serve additional consumers—keeping in mind that they may also result in suboptimal services.

Should funding be reduced, the NCTAAA will have lesser ability to innovate. Further, it will face difficult decisions in terms of targeting programs for reduction or elimination.

The NCTAAA is a firm believer that an ounce of prevention is worth a pound of cure. Should funding be maintained or increased, the NCTAAA wishes to place greater emphasis on preventive health and wellness programs. Its preference is to fund a fall prevention program that keeps an older person ambulatory and in her home, as opposed to arranging services for someone with a hip fracture who now requires intensive in-home supports or institutional care.

As the NCTAAA seeks balance between preventive and reactive services, it recognizes that those who are frail generally have greater exigency of need, greater demand for supports, and targeting priority under the Older Americans Act. As such, services for frail older adults will be priority.

Analysis of Population Changes

Effect of Population Change on Priority Populations

Rapid population growth, such as that experienced by North Central Texas, can be a double-edged sword. It expands the tax base and contributes to economies of scale. But if resources—including funding for Older Americans Act programs—don't increase at a proportionate rate, it fuels increased competition.

Robust growth in the number and percentage of older North Central Texans without a concomitant increase in funding will be a detriment to all older adults in the region. However, it will have lesser impact on those whom the Older Americans Act identify as target populations—particularly those with low incomes and greatest economic need (who receive preference for NCTAAA programs that provide financial assistance)—as it will on those who fall beyond the target populations. Should the NCTAAA be compelled to serve fewer persons—or even a lesser percentage of all eligible older persons—it will give service priority to older adults who are part of target populations, as well as services that benefit frail older adults.

For example, the NCTAAA has a mandate to provide long-term care ombudsman services to any resident of a nursing or assisted living facility, regardless of available resources. In addition, the ombudsman program has a maintenance of effort requirement that prohibits it from making budget reductions, even if overall funding is decreased, and performance measures that are extremely ambitious and increase with each new facility that opens in North Central Texas.

Regardless of its funding availability, the NCTAAA anticipates serving a greater percentage of minority older individuals since they account for an increasing share of all older North Central Texans. It has established a goal of proportionate representation, so that the percentage of registered minority participants is equal to or greater than the percentage of all older North Central Texans of color. It met that goal during Fiscal Year 2022, but with a very slim margin. Of all registered clients, 20.42% were non-White only. Among all older North Central Texans, 19.94% were non-White only.

Conversely, the NCTAAA anticipates that residents of its four rural counties will account for a declining percentage of all registered consumers during the

decade ahead. This reflects their decreasing share of the region's population. In 2025, older residents of the rural counties (Erath, Navarro, Palo Pinto, and Somervell) are projected to account for only 4.65% of all older North Central Texans. That percentage is expected to decrease to 3.36% by 2035. Although the NCTAAA engages in affirmative outreach to older persons in rural counties, it expects increases in demand to track increases in population, with heightened demand among its more rapidly growing urban counties.

Effect of Growth among "Old-Old" North Central Texans on Demand for Services

Given the projected doubling in the number of North Central Texans aged 85 and over during the decade from 2025 to 2035, the NCTAAA anticipates that "old-old" individuals will comprise an increasingly greater percentage of all registered consumers, particularly for home-delivered meals and care coordination services. Both services target frail older adults, and there is a direct relationship between advancing age and incidence of disability.

As noted on page 35, more than half of persons aged 85 and over require long-term services and supports. Medicaid is the primary program that pays for on-going long-term services and supports, but only 4.6% of older North Central Texans have been deemed eligible. Therefore, the NCTAAA will play a critical role as a safety net, providing in-home services to those who do not qualify for public assistance.

In addition, the long-term care ombudsman program is likely to demand an increasing share of NCTAAA funding, given the explosive growth of assisted living facilities in North Central Texas. Although persons who receive ombudsman services are not "registered" per se, the "typical" resident of an assisted living facility is an 87 year-old woman who requires assistance with two activities of daily living. Thus, the program serves a disproportionate share of persons who are at least 85 years of age.

Continuous Improvement of AAA Programs, Policies, and Services

The NCTAAA is committed to continuous quality improvement, defined as an ongoing effort to realize improvements in its efficiency, effectiveness, performance,

accountability, and outcomes. Following are specific actions it will take during the planning period in support of those goals:

- Utilize well-trained and supported volunteers as critical staff extenders for its long-term care ombudsman, benefits counseling, Senior Medicare Patrol, Chronic Disease Self-Management Program, Diabetes Self-Management, Chronic Pain Self-Management, A Matter of Balance, and Tai Chi for Arthritis and Fall Prevention programs. The NCTAAA has a dedicated volunteer recruiter, supported by administrative funding, who contributes to each program's effectiveness. Volunteers allow the NCTAAA to reach more clients in a more cost-effective manner.
- Generate non-Title III funds by entering into fee-for-service contracts for complementary services. More specifically, help nursing home residents with Medicaid benefits to return to community living, under contracts with managed care organizations that are funded by Texas Health and Human Services to administer STAR+PLUS services. Additionally, contract with the Better Business Bureau Education Foundation to administer the Senior Medicare Patrol program. Determine the feasibility of contracting with the Veterans Administration to administer the Veterans Directed Care program.
- Incorporate outcome measures into program evaluations to the extent possible. For example, the NCTAAA's Dementia Friendly North Central/East Texas initiative conducts pre- and post-tests for all participants to determine the extent to which project services increase understanding of dementia, knowledge of resources, and quality of life. It surveys all care coordination and caregiver support coordination clients to determine the extent to which temporary in-home services allow them to remain in their homes, as opposed to moving into an assisted living or nursing facility.
- Conduct a critical self-examination of weaknesses and develop plans for reducing. For example, the NCTAAA care coordination program utilizes telephonic assessments in order to realize greater efficiencies. But in doing so, it limits staff persons' ability to observe clients, sometimes leading to incomplete or misleading depictions of their daily function. For example, clients may report that they're doing well even if they're debilitated, living in substandard housing, or experiencing abuse, neglect or exploitation. The NCTAAA realizes that it may need a qualified professional to lay eyes on care coordination clients, thus gathering data to supplement self-reported

information. To that end, it is working to fund nutrition subrecipients and/or contracted in-home agencies to conduct participant assessment if clients meet certain risk criteria (e.g., have dementia, live alone, and lack informal support).

- Target historically underserved populations, both within and beyond the Older Americans Act target populations.

As of Spring 2023, the NCTAAA is conducting targeted outreach to Spanish-speakers, whose risk of developing dementia is one and a half times the risk of a non-Hispanic white person. It has convened a Spanish outreach team to translate its major flyers into Spanish, distribute press releases to Spanish media, and disseminate information to Spanish-speaking congregations.

In addition, the NCTAAA is conducting targeted outreach to older family members who care for young adults with severe disabilities. It has had authority to provide caregiver services to such individuals for many years but has done little to promote.

As of Spring 2023 it is partnering with organizations including the Community for Permanent Supported Housing and Downs Syndrome Guild of Dallas to promote Title III caregiver support coordination, caregiver information services, caregiver training, and caregiver counseling services for parents of adult children with intellectual and developmental disabilities. The majority of such parents are without formal support, given wait lists for Medicaid waiver services of up to 15 years.

Through its Dementia Friendly North Central/East Texas initiative, the NCTAAA will conduct education for parents of adult children with intellectual disabilities to help them understand the aging process, dementia risk, process of obtaining an accurate differential diagnosis, and elements of an effective plan of care for a family member with dementia.

- Utilize COVID vaccination funding to increase public awareness of NCTAAA services. NCTCOG has hired vaccination outreach specialists who are working to increase the visibility of Agency services, in addition to specialized supports that include assistance with scheduling appointments and arranging transportation. This represents an historic opportunity to expand traditional outreach efforts and invest in new outreach methods. For example, the outreach specialists have scope of work that includes:

- Conducting visits to a broad range of venues that serve older adults who may not have internet access, including housing communities, libraries, senior centers, Medicaid offices, rehabilitation facilities, and hospitals. They also have responsibilities for gathering email addresses for health care professionals who have responsibilities for arranging community-based long-term services and supports and providing them occasional updates on new and existing services that can benefit their patients.
- Developing a more consistent presence on social media, including Facebook and LinkedIn.
- Engaging in targeted outreach to primary care providers to make them aware of services that benefit their practices and patients (e.g., help applying for Medicare Savings Program, Low Income Subsidy, and SNAP benefits), medical transportation, chronic disease self-management programs, and nutrition services.
- Conduct webinars for health care professionals, who are uniquely positioned to identify older adults whose ability to live independently is jeopardized by an illness or injury.
- To the extent that funding allows, increase services that are preventive in nature and target older persons who are healthy and wish to maintain their good health.

Capacity Building

During the planning period the NCTAAA intends to enter into a number of collaborations that build capacity to meet the needs of older individuals and their family caregivers. Following are strategies it intends to pursue, relative to the domains identified as part of the Area Plan Instructions and Checklist.

Health and Human Services

The NCTAAA will meet the terms and conditions of its agreement with HHSC. It will participate in HHSC provider meetings and ensure its contractors and subrecipients are aware of guidance that affects them. It will provide technical assistance as needed and monitor for compliance.

NCTAAA Director Doni Green will collaborate with HHSC by inviting staff to serve on its Regional Aging Advisory Committee (RAAC) and Aging and Disability Resource Center. As of May 2023, HHSC employee Chelsea Couch represents Navarro County on RAAC, and HHSC employee Mike Self serves on the North Central Texas Aging and Disability Resource Center Advisory Committee.

The NCTAAA will volunteer to serve on advisory committees and workgroups that may be convened by the Texas Association of Area Agencies on Aging or HHSC.

The NCTAAA will collaborate with other Area Agencies on Aging and Aging and Disability Resource Centers within and beyond the Greater Metroplex by serving on task forces, organizing joint training programs for common audiences (e.g., Adult Protective Services caseworkers), and supporting colleagues' applications for discretionary grants.

The NCTAAA will review and comment on policies affecting older adults. It will more effectively support its Texas Silver-Haired Legislators as they draft proposed legislation and educate elected officials about older adults' needs for health and human services and available resources through the NCTAAA.

The NCTAAA will engage in targeted outreach to healthcare providers in acute and primary care settings to educate them about long-term services and

supports funded by the Older Americans Act and better coordinate services between care settings.

Land Use

The NCTAAA will support the North Central Texas Council of Governments' Environment and Development department, which actively promotes sustainable development and celebrates best practices through its CLIDE Award (Celebrating Leadership in Development Excellence).

The NCTAAA will advocate for affordable, integrated and accessible housing that allows older North Central Texans and persons with disabilities the opportunity to age in place, while respecting local control over land use restrictions. It will support a housing navigator under its contract with HHSC for Aging and Disability Resource Center services. That housing navigator shall have a scope of work that includes maintaining an inventory of affordable housing and working with housing developers to expand the supply of affordable housing.

Housing

Prior to COVID, the North Central Texas housing market was hot. The average cost of a home in the Greater Dallas/Fort Worth area was \$400,000 in early 2022, representing an increase of 15.6% during the prior year. In early 2023, the average rent for an apartment in Plano was \$1,851—notably higher than the average Social Security check of \$1,693.

According to the National Low Income Housing Coalition, Texas is one of the worst states for affordable housing. Its 2021 study found that the State only has 29 available and affordable rental homes per 100 extremely low-income renters.

Throughout North Central Texas, all housing authorities have frozen their wait lists and reopen only once or twice per year. When they do so, they add a small percentage of applicants to their wait lists. The average wait for a housing voucher is more than two years.

During the pandemic, other housing costs, including utilities, have spiked. According to an analysis by the Dallas Morning News, the statewide average price-per-kilowatt hour of electricity increased 70% from June 2021 to June 2022.

The solution to these thorny affordability issues is beyond any one agency's reach. It will require zoning policies that are more permissive for multi-family developments and smaller single-family units. It will require developers' shift from properties with higher costs and profit margins—but a select market—to more modest properties and margins—but a much greater market. It will require greater investment in programs for those who cannot afford market rates. It will require greater incentives for landlords to accept housing vouchers. It will require greater investment in home repair programs that can assist with major repairs such as foundations and roofs.

The NCTAAA lacks authority or resources to meaningfully impact housing sufficiency on its own. Nevertheless, it will address the issue as its funding allows. It will provide information about housing subsidy programs and limited utility assistance to those who qualify for its care coordination and caregiver support coordination program, help secure affordable housing for clients of its nursing home relocation program, and make referrals to agencies that can assist with housing and/or utility expenses. In addition, it will engage in dialogue with housing providers, advocates, and other stakeholders and seek creative solutions. Its director will continue to serve as a gubernatorial appointee to the Texas Department of Housing and Community Affairs' Housing and Health Services Coordination Council (<https://www.tdhca.state.tx.us/hhsccl/>)

Transportation

Transportation is one of the most requested services by callers to the NCTAAA and its sister Aging and Disability Resource Center. Although there are public transportation programs in all 14 counties, they don't cover the entirety of the service area. For example, portions of Collin and Denton Counties are unserved.

The NCTAAA funds demand response transportation for older adults in all 14 counties, but providers have limited resources, including drivers and vehicles. Furthermore, they are not required to travel out of county under their Title III agreements. In many cases, older persons must cross over county boundaries in order to get the health care services they need.

The NCTAAA will collaborate with NCTCOG Transportation planners to identify creative solutions to long-standing transportation barriers. In addition, it will

continue to support its Senior Rides program, serving older persons in Hood, Somervell, and Erath Counties who must travel out of county for medical services, and pilot a transportation program with UberHealth. Finally, it will determine the feasibility of launching a transportation voucher program, using OAA funds as the budget allows.

Public Safety

The NCTAAA has received a direct grant from ACL to support the development of a dementia-friendly workforce. Under this grant it funds Dementia Friendly Fort Worth to provide a seven-hour dementia training program to all recruits with the North Central Texas Regional Police Academy. As part of the project's sustainability, Dementia Friendly Fort Worth and the NCTAAA will invite other cities' and counties' police academies to participate. In addition, it will advocate for the Texas Commission on Law Enforcement to add dementia training to its certification requirements.

Workforce and Economic Development

Nationwide, less than one half of Americans aged 65 and over are retired. Not surprisingly, the most common reason for deferring retirement is financial in nature (i.e., needing or wanting additional income). Older men have higher rates of workforce participation than do older women, and those with college degrees are more likely to defer retirement than those who are without.

The NCTAAA will provide information and referral to older persons who are seeking gainful employment, connecting them with resources such as the North Central Texas Workforce Development "one-stop" centers and the Senior Source's older workers' program. In addition, it will collaborate with NCTCOG's Workforce Development on joint initiatives. Currently, Deborah Dobis of that department serves on the NCTADRC Advisory Committee. In addition, it will collaborate with Texas Workforce Commission staff on initiatives involving jobseekers with disabilities. Currently, Gena Swett represents that agency on the NCTADRC Advisory Committee.

Recreation

The NCTAAA will promote older adults' involvement in recreational activities by partnering with community and senior centers to make its evidence-based programs available to participants. Conversely, NCTAAA outreach staff will participate in senior centers' health and information fairs.

The NCTAAA will partner with its senior center operations subrecipients to fund innovative recreational and social activities at congregate meal sites.

The NCTAAA will administer the PEARLS program, which helps participants develop and implement action plans for meeting their recreational, social, physical, and emotional needs.

Education

As a strong proponent of lifelong learning, the NCTAAA will plan, conduct, and promote learning programs for older adults.

The NCTAAA will continue to partner with institutions of higher learning in several ways, including sponsoring student interns, collaborating on grant proposals, and entering into agreements for third-party evaluation projects as funding may allow. As of Spring 2023, the NCTAAA is sponsoring an intern with Aurora College (Lauren Bordignon), who is providing case management services, and an intern with Dallas County Community College (Tiffany Hughes), who is completing Medicaid applications for Agency clients.

Civic Engagement

The NCTAAA recognizes older adults as the age group with highest rates of civic engagement, measured by voting patterns and participation in civic organizations. It will join with advocacy organizations such as Disability Rights Texas and Coalition of Texans with Disabilities to ensure that older adults—including those who live in nursing facilities—are able to exercise their right to vote.

The NCTAAA will solicit input from older adults and their stakeholders on necessary programs, policies, and legislation. It will serve as an advocate by providing education and advocacy to the general public—and elected officials more

specifically—while ensuring that it complies with anti-lobbying restrictions. It will partner with Texas Silver-Haired Legislators, a group of non-partisan representatives who work to advance age-friendly legislation, by providing training and technical assistance as indicated.

Emergency Preparedness

NCTCOG administers an Emergency Preparedness program, and NCTAAA staff collaborate with that program on several joint initiatives, including the following:

- Developing an emergency plan for older adults
- Implementing and/or amending that plan in response to regional emergencies involving older adults
- Developing a disaster plan for NCTCOG staff and visitors

NCTCOG and NCTAAA staff collaborate with county and staff disaster preparedness staff, first responders, Volunteers Organizations Active in Disaster (VOAD) in planning for and responding to disasters.

During the prior planning period, the AAA director Doni Green chaired the North Central Texas Trauma Advisory Council's MAP for Long-Term Care Advisory Committee. The Committee was charged with helping long-term care facilities improve their disaster response plans. Committee members included representatives of the DFW Hospital Council, TMF Health Quality Institute, the University of North Texas Health Science Center, and long-term care facilities.

Protection from Elder Abuse, Neglect, and Exploitation

National research suggests that as few as one in 24 cases of elder abuse, neglect, or exploitation (ANE) is reported to the proper authorities. The NCTAAA is mindful of its responsibility to serve as a mandatory reporter of ANE. To that end, it ensures that all staff members are trained to recognize and report ANE and requires subrecipients take similar measures.

The NCTAAA will collaborate with Adult Protective Services (APS) staff by inviting them to serve on its Regional Aging Advisory Committee, conducting training on AAA services, and co-hosting community training events as the opportunity arises. It joined with the AAAs in contiguous counties to conduct a

training for Adult Protective Services (APS) workers on April 26, 2023 and is scheduling a follow-up training on recognizing and responding to dementia.

Assistive Technology Devices and Services

The NCTAAA will collaborate with experts in assistive technology devices and supports by referring its clients to entities such as REACH (the region's Center for Independent Living) and its loaner adaptive technology equipment program. In addition, it will refer clients to the Texas Technology Access Program (TTAP). That program provides assistive technology device loans, demonstration centers, recycle/reuse programs, and financing. As of Spring 2023, its instruction and training subrecipient Mascari Corporation is planning a community education webinar on adaptive technology.

SWOT Analysis

The SWOT analysis consists of identifying Strengths, Weaknesses, Opportunities, and Threats. In Table 4, list the ways the AAA will address population changes in the PSA (during the 10-year period of 2025 – 2035), including: exploring new solutions to problems, identifying barriers that will limit the ability to achieve goals and/or objectives, deciding on the direction that will be most effective, revealing possibilities and limitations to change, and revising plans to best navigate systems, communities, and organizations.

Table 4. Strengths, Weaknesses, Opportunities, Threats (SWOT) Analysis

Strengths	Weaknesses	Opportunities	Threats
North Central has a robust economy, with higher median incomes, lower rates of elder poverty, higher education rates, and higher employment rates than the rest of the state.	The NCTAAA is located in a county it does not serve, making it difficult to provide face-to-face services. Clients have to travel many miles, across county lines, to receive walk-in-service.	The NCTAAA may be able to contract with Veterans Administration for Veterans Directed Care.	Uncertain funding for Older Americans Act services
NCTCOG is a large organization, with highly qualified and capable administrative staff (including attorneys, CPAs, and procurement experts).	The vastness of the service area makes it difficult for staff to travel and to be highly visible at the local level.	The NCTAAA can utilize community partners to get their help in checking on clients.	Loss of Stimulus funding
The NCTAAA has caring staff, willing to tackle hard issues and work collaboratively.	It is difficult to purchase medications for clients since many pharmacies will not accept payments by credit card unless cardholder presents it on-site.	The NCTAAA can develop a partnership with Hearts for Homes to purchase supplies for home repairs to be done by volunteers.	Re-procurement of STAR+PLUS Waiver services and new MCOs that may want to provide own relocation services
The NCTAAA has experienced staff, with average tenure of	Case managers' inability to conduct face-to-face assessments limits	The NCTAAA can contract with Texas Ramps to build wheelchair ramps at	Loss of pandemic-related flexibilities for Older

more than seven years.	information. This is most problematic with III-B care coordination cases when all information is self-reported and there is no proxy to validate.	reduced cost if it responds to a procurement.	Americans Act programs
The NCTAAA has proven history of cooperating with community partners to pursue common goals.	The NCTAAA had a number of retirements during COVID, and the program lost a lot of institutional knowledge.	Consider programs that benefit mental wellness/brain health/spiritual health, in addition to physical fitness.	Rapid population growth is unlikely to be matched by growth in revenues.
NCTCOG leadership is stable, with only two executive directors in more than 50 years.	Home health agencies under contract with the NCTAAA have had difficulty recruiting and retaining direct service workers.	Translate materials into languages other than English, Spanish, and Vietnamese.	Historic increases in cost of rent, utilities, food
NCTAAA leadership is stable, with director who's served more than 25 years.	The NCTAAA has granted rate increases for in-home providers, which has stabilized staffing. However, it has also increased the cost per client and limited the number of hours that case managers can authorize.	Utilize outreach specialists to raise awareness of all services.	Dementia grant will terminate in 2024.
The NCTAAA invests in regular community education that's established a national and international audience.	There has been a dramatic increase in the number of rental requests. When the requester qualifies for income support, it is a labor-intensive and slow process. Sometimes the NCTAAA cannot make payment timely enough to	More effectively engage clients to market services to their friends and family.	Fall-out from COVID/long COVID

	avoid penalties, including eviction.		
The NCTAAA has successfully made transition to telephonic assessments for the Care coordination program, which maximizes efficiency.	Demand response transportation agreements require transportation within county, and many older adults require transportation beyond county boundaries.	More broadly promote kincare services.	Current housing crisis
The NCTAAA has a successful Money Follows the Person nursing home relocation program, which is funded in full by contracts with health plans.	The NCTAAA's online presence is lacking.	Baby Boomers are likely to be more tech-savvy and able to participate in virtual programs.	Medicaid unwinding that will require HHSC to recertify over 3 million Medicaid applications in a few months
The NCTAAA has staff members who are culturally diverse and fluent in three languages.	Residential repair services are limited to accessibility-related repairs, given budget limitations.	Strengthen partnerships with groups and organizations that serve people with intellectual and developmental disabilities.	Low pay rates for direct service workers
The NCTAAA has made a concerted effort to translate its primary outreach materials into languages other than English and engage in targeted outreach.	Services are skewed in favor of frail older persons, to the detriment of services that are preventive in nature.	Increase outreach to working caregivers' employee assistance programs.	Difficulty filling staff vacancies
The NCTAAA has subrecipients for nutrition and transportation services who are based at the county level and highly visible.	The NCTAAA does not have resources sufficient to respond to a significant surge in demand—and may not have resources sufficient to maintain services as current levels.		\$5,000 cap on residential repair services

The NCTAAA has engaged in multiple procurements for in-home services and paid rates high enough to support a comprehensive network.	The NCTAAA does not have services that can address hoarding and bedbug infestation.		Digital divide that rules out virtual services for those without internet access
COVID vaccination funds have provided opportunity to engage in expanded outreach.	The NCTAAA does not have a sufficient number of volunteers to achieve maximum efficiencies with its benefits counseling, long-term care ombudsman, and preventive health programs.		
Counties provide funding to help meet match requirement for administrative services.	The NCTAAA is not widely recognized at the local level.		
The NCTAAA operates at a high level of compliance and has had no findings during its recent monitoring reviews by HHSC.	The NCTAAA is likely serving minority older adults and caregivers at lower percentages than their representation among the general population. It must continue to invest in targeted outreach to people of color including, but not limited to, White—Hispanics.		
The NCTAAA has 60 active volunteers.	The NCTAAA lost a number of committed volunteers during the pandemic and must work to rebuild and expand its volunteer corps.		

Stakeholder and Public Input (Statewide)

In 2021, as part of the [Aging Texas Well Initiative](#), HHSC conducted a statewide survey to identify the current and future needs and priorities of older adults, informal caregivers of older adults, and social service providers supporting older adults. Data analysis identified the following top priorities for each group:

- Older Adults
 - ▶ Physical health
 - ▶ Access to services and support in the community
 - ▶ Access to social engagement opportunities
- Informal Caregivers of Older Adults
 - ▶ Mental health
 - ▶ Physical health
 - ▶ Work strains and issues
- Service Providers Supporting Older Adults
 - ▶ Collaboration and coordination
 - ▶ Funding
 - ▶ Staffing
 - ▶ Addressing social isolation
 - ▶ Addressing food insecurity
 - ▶ Supporting informal caregivers

Addressing Needs and Priorities within the PSA

The issues identified by HHSC as part of its Aging Texas Well Initiative are similar to those identified by the NCTAAA as it has engaged in the planning process—as well as in its stead as a direct service provider. Following are ways in which they have impacted or may impact older North Central Texans.

Older Adults' Health

COVID wreaked havoc on public health in general but had a disproportionate effect on older adults, who have had the highest morbidity and mortality rates.

Although the public health emergency will end May 11, 2023, COVID will have lasting effects. From 2020 to 2021, life expectancy declined by a year. Among individuals who contracted COVID (estimated at 60% of the general population), nearly one in five experiences symptoms of long COVID.

It is likely that COVID will persist, despite advances in vaccination, and have disparate impact on those with pre-existing conditions such as obesity, heart disease, lung disease, and diabetes. Although chronic conditions are not unique to older adults, they are more common among them, affecting 85% of those aged 65 and over.

Fortunately, many chronic diseases can be ameliorated with lifestyle changes such as more activity and a healthy diet. But lifestyle changes are notoriously hard to make at any age—particularly in an age of labor-saving conveniences and readily available junk food. Over 40% of older adults are obese, and 85% have sedentary lifestyles (with less than 150 minutes of sustained physical activity per week).

The North Central Texas area is well-served by parks, gyms, and senior centers with activity programs. Yet they tend to be underutilized by those who need them most, namely those who are sedentary, have chronic disease and/or seek an “easy fix” to longstanding issues.

During the planning period, the NCTAAA will promote optimal health by investing in the following services:

- Home-delivered and congregate meals.
- Nutrition education.
- Fall prevention workshops, including Tai Chi for Arthritis and Fall Prevention. This service has allowed the NCTAAA to reach a younger, healthier population, compared to participants in its Matter of Balance and Chronic Disease Self-Management workshops.
- Chronic disease self-management workshops.
- Care coordination, through which case managers may authorize purchase of health-related goods and supplies.

- Benefits counseling services that help Medicare beneficiaries qualify for Medicare Savings Programs (thus reducing barriers to health care services) and Low-Income Subsidies (thus reducing copays for Part D prescription medications and increasing medication compliance).
- Demand response transportation, thus improving access to health care providers, pharmacies, and grocery stores.

Older Adults' Access to Services

The Greater Dallas/Fort Worth metropolitan area is the fourth largest in the country and replete with resources. The region has several large healthcare systems, luxury retirement communities, and businesses that cater to older customers. However, older adults' access is often shaped by ability to pay, as well as ability to travel to the more resource-rich urban core.

Following are population groups often left behind:

- Persons who are uninsured and in need of health care services. Among older adults in North Central Texas, 4.5% are uninsured. This is lower than the rate of uninsured older Texans, at 5.4%, but represents more than 20,000 older persons who struggle to get primary, secondary, and tertiary care.
- Those who live in rural areas and lack reliable transportation.
- Those who require on-going services and supports and cannot afford to pay privately but are too wealthy to qualify for public benefit programs.
- Those who are not tech-savvy and cannot access virtual services.
- Those with limited English proficiency. Among older North Central Texans, 3.89% (18,965) do not speak English at all or very well.
- Those who are isolated and unconnected with agencies, including persons with dementia who live alone.

During the planning period, the NCTAAA will invest in the following services in order to expand older adults' access to federal, state, and local services.

- Information, referral and assistance, through which older adults and family caregivers can get information on federal, state, and local health and social services.
- Public Outreach, to increase community awareness of AAA and ADRC services.
- Instruction and training, through which the NCTAAA and its subrecipients conduct webinars on issues of interest to older adults and promote services within and beyond the NCTAAA.
- Caregiver information services, through which the NCTAAA and its subrecipients conduct programs of interest to family caregivers.
- Care coordination and caregiver support coordination, through which older adults and family caregivers who are experiencing financial need receive temporary support services at no cost to them and get help in accessing ongoing services for which they may qualify.

Older Adults' Access to Social Engagement

Social engagement refers to the extent to which an older person is connected to his/her community. Such connections may take place through involvement in faith or civic communities and may include virtual as well as face-to-face activities. It is difficult to measure social engagement, given its broad nature. Voluntarism, as a major type of social engagement, is somewhat easier to measure.

Nationwide, more than 6 of 10 older adults engage in some form of voluntarism, which promotes positive physical and mental health. North Central Texas has clearinghouses for prospective volunteers, such as the Volunteer Center of North Texas and North Texas Communities Foundation, that match prospective volunteers to agencies. In addition, it has a wealth of opportunities for those who are drawn to certain issues or populations, including older adults.

COVID had a pernicious effect on social engagement, limiting face-to-face contact with family, friends, neighbors, and members of faith communities and other social networks. The NCTAAA experienced an erosion of its volunteer base during the public health emergency—particularly among its long-term care ombudsman program. Facilities did not allow visitors for many months. When they

reopened, some volunteer ombudsmen did not feel comfortable making visits. During the planning period, the NCTAAA will strive to rebuild and expand its volunteer network.

More specifically, the NCTAAA will employ a dedicated volunteer recruiter, who will be tasked with recruiting and retaining volunteers to support its health workshops, benefits counseling, and Senior Medicare Patrol programs. In addition, it will hire a new regional staff ombudsman who will have responsibilities for recruiting and supporting certified volunteer staff ombudsmen.

The NCTAAA will also continue to invest in senior center operations and fund innovative programs that bring older adults together in community for “more than a meal.”

Informal Caregivers’ Mental Health

Although caregiving may be rewarding, it can exact a heavy toll on caregivers’ mental health. According to the Family Caregiver Alliance, caregivers have higher levels of stress, anxiety, depression, and other mental health effects than their peers without caregiving responsibilities. Studies indicate that 40-70% of caregivers have clinically significant symptoms of depression. The risk of depression and perceived burden increases as the care receiver’s functional status declines.

Women caregivers are at greater risk than their male counterparts for experiencing depression and anxiety and have lower levels of subjective well-being and life satisfaction. Further, caring for a person with cognitive impairment and living with the care receiver heighten risk of depression.

Recognizing the extent to which caregiving can be detrimental to caregiver mental health, the NCTAAA intends to support the following services intended to relieve burden.

- Individual and group caregiver counseling through subrecipient Maurice Barnett Geriatric Wellness Center.
- Individual counseling with older caregivers through the evidence-based PEARLS program.

- On-going education and decision support for caregivers of persons with dementia through the evidence-based REACH program.
- Caregiver support groups conducted by trained volunteers with the Alzheimer's Association.
- Respite care through the NCTAAA caregiver support coordination program and the North Central Texas Aging and Disability Resource Center Lifespan Respite program.
- Caregiver training programs through the Maurice Barnett Geriatric Wellness Center.

Informal Caregivers' Physical Health

As caregiving can exact a toll on caregivers' mental health, it can also have a pernicious effect on their physical health. More than one in ten caregivers report that caregiving has caused their physical health to worsen. In addition, caregivers have double the incidence of chronic disease (i.e., heart disease, cancer, diabetes and arthritis), compared to non-caregivers.

During the planning period, the NCTAAA intends to offer the following services that promote the physical health of age-eligible caregivers (i.e., those who are at least 60 years of age).

- Home-delivered and congregate meals.
- Nutrition education.
- Fall prevention workshops.
- Chronic disease self-management workshops.
- Care coordination, through which case managers may authorize purchase of health-related goods and supplies.

In addition, the NCTAAA will continue to offer caregiver support coordination services, through which case managers may authorize purchase of health-related goods and supplies for benefit of the caregiver, as well as care receiver.

Caregivers' Work Strains

Among all caregivers of older adults, more than six in ten (i.e., 61%) are gainfully employed. The same percentage of working caregivers (61%) report that their care responsibilities interfere with their work responsibilities.

The NCTAAA intends to increase working caregivers' awareness of its services by reaching out to major employers' employee assistance programs and participating in employee health fairs, as it becomes more aware of these. In doing so it will promote its full range of caregiver services, including information and referral, caregiver information services, caregiver training, caregiver support coordination, and caregiver respite.

In support of this strategy, the NCTAAA will revise and re-release its booklet entitled "The Working Caregivers: North Central Texas Employers' Guide to Eldercare Services." This publication may be found at:

<https://www.nctcog.org/getmedia/69f14b6a-8b0f-4d2a-ba78-e19509cf6cfe/carebook.pdf>

Providers

During the decade spanning 2025-2035, the NCTAAA intends to support its own staff and partner organizations in coordinating services, funding services, ensuring adequate staffing, addressing social isolation, addressing food insecurity, and supporting informal caregivers. Following are specific services and strategies relative to each objective.

- Collaboration and coordination: The NCTAAA will perform administrative functions that include bringing together subrecipients for training and sharing of best practices. Further, its staff will participate in interdepartmental and interagency work groups. Through instruction and training, it will make presentations to professionals, including Adult Protective Services and Local Intellectual/Developmental Disability Authority caseworkers, and encourage their qualified referrals.
- Funding services: The NCTAAA will serve as a good steward of Title III funds entrusted to its care. It will seek out other funding sources that further its mission as staffing allows. It will share funding opportunities with

subrecipients and other organizations and submit letters of support as requested.

- **Staffing:** The NCTAAA will reimburse contractors and subrecipients fairly, to cover staffing expenses that are reasonable and necessary to administer the services under their agreements. It will tap into funding sources other than Title III (e.g., relocation services contracts with health plans) to offer innovative services that benefit older adults but are not funded by the Older Americans Act.
- **Addressing social isolation:** The NCTAAA will invest in several services that have the potential to reduce participants' social isolation, including home-delivered meals, congregate meals, senior center operations, PEARLS counseling, demand response transportation, and Chronic Disease Self-Management workshops.
- **Addressing food insecurity:** The NCTAAA will invest in home-delivered meals and congregate meals. It will continue to give budget priority to home-delivered meals. In addition, it will advocate for increasing common providers' unit rates. Meal providers who contract directly with HHSC for home-delivered meals are reimbursed at \$5.31 per meal, inclusive of all expenses. That rate has increased less than 10% during the past 20 years—less than the rate of inflation for food products during the prior year.

Through its Benefits Counseling program and Aging and Disability Resource Center, it will help low-income North Central Texans apply for SNAP benefits and make referrals to sources of emergency food assistance such as food pantries.

- **Supporting informal caregivers:** The NCTAAA will fund a comprehensive array of caregiver support services including information and referral, caregiver information services, caregiver training, caregiver support coordination, and caregiver respite.

Section 7. Outreach

Legal References: OAA 2020 306(a)(4) and 306(a)(5)

Strategy Effectiveness and Best Practices

The NCTAAA evaluates its effectiveness in targeting priority populations identified in the Older Americans Act by comparing its client data with the region's demographic data. It establishes goals such that the percentages of clients who are non-White, live in poverty, and live in rural counties are the same or greater than the percentage of all North Central Texans who are non-White, live in poverty, and live in rural counties.

Relative to a standard of having these client characteristics mirror the region's characteristics, the NCTAAA is exceeding its goals. Following are Fiscal Year 2022 performance levels relative to each goal. Please note that demographic data for the region are derived from 2015-2019 American Community Survey (Census Bureau) data, and the data sets are not congruous.

- Among all older North Central Texans, 6.8% lived in poverty. Among all North Central Texas registered clients, 27.82% lived in poverty. This speaks to the Agency's effectiveness in enrolling low-income older adults in its programs—a process which starts with their awareness of those programs.
- Older adults of color represented 19.94% of all older North Central Texans. Of all NCTAAA registered clients who received services in State Fiscal Year 2022, 20.42% were non-White. The NCTAAA met its racial diversity goal, but with the slimmest of margins.
- According to the most recent American Community Survey data, only 5.93% of older North Central Texans lived in the service area's four rural counties: Erath, Navarro, Palo Pinto, and Somervell. Among all NCTAAA registered clients, 7.89% lived in these four counties. This verifies that the NCTAAA is effectively targeting older adults who reside in rural areas.

The NCTAAA also performed well relative to targeting older adults with greatest social need, using living alone as a rough proxy of isolation. Among all

registered clients served during State Fiscal Year 2022, 46.31% lived alone. Among all older North Central Texans, 18.52% live alone.

Drawing on bilingual staff and contractors, and utilizing interpreters as needed, the NCTAAA was able to accommodate all clients with limited English proficiency. However, the HHSC client tracking database does not require “English proficiency” or “preferred language” as a required reporting element, so the NCTAAA cannot generate statistics relative to its clients’ linguistic preferences.

The Agency’s strategies by which it targets at-risk populations are detailed in the following section, entitled “Targeted Outreach Plan.” Its best practices include procuring highly visible local service providers, establishing strategic partnerships with organizations that serve a critical mass of potential clients, and leveraging non-OAA funding to increase client services.

Significant obstacles include:

- Serving a broad geographic area, limiting staff persons’ ability to perform local outreach and provide services face-to-face.
- Reaching those who are most isolated. The NCTAAA works through local agencies that serve critical masses of older adults in its target populations. participates in local resource fairs, does public service announcements, utilizes social media, and widely distributes outreach materials through venues that include pharmacies, food pantries, and public transit programs.
- Increasing linguistic diversity. NCTAAA staff members speak the three most common languages of their service area (English, Spanish, and Vietnamese), which is adequate to communicate with the vast majority of clients. Only 3.89% of older North Central Texans have limited English proficiency. However, the number and percentage of area residents who have primary languages other than English is growing.

Accommodations During Pandemic

During the pandemic, the NCTAAA had to pivot to provide outreach. Its traditional method of participating in live events was ruled out for more than two years. It had to develop new strategies to reach older adults, caregivers, and professional referral sources.

Although the NCTAAA’s transition to remote outreach was painful at times, it was necessary. Its “old school” methods of developing flyers and handing them out

at senior fairs was not sufficient to reach those in need, even prior to the pandemic. The NCTAAA acknowledged the need to more fully embrace the digital era.

Recognizing that nearly one third of people aged 65 and over have Facebook accounts, the NCTAAA convened a workgroup to increase its presence on social media. It also established a LinkedIn account. It launched a new monthly electronic newsletter and engaged in a systemic effort to gather email addresses for older adults, family caregivers, and professionals.

The NCTAAA has taken preliminary steps toward establishing a stronger digital presence. It will not abandon more traditional methods of outreach but continue to expand its digital competency.

Targeted Outreach Plan

During the planning period the NCTAAA will continue to refine and implement a targeted outreach plan to identify individuals eligible for assistance. The general outreach plan will rely on strategies that include the following:

- Serving a clearinghouse of resources information for older adults and family caregivers and systematically screening callers to see if they qualify for services through the NCTAAA or its partner agencies.
- Funding and collaborating with the Texas Information and Referral Network to encourage qualified referrals from 2-1-1 call-takers.
- Participating in health fairs and other community events.
- Compiling electronic contact information for professional referral sources (e.g., nursing facility discharge planners, hospital discharge planners, and home health social workers) and sending periodic electronic updates regarding established and new services.
- Contracting with qualified entities to prepare and disseminate electronic newsletters at least bi-monthly. Include content on programmatic updates and special events.
- Passing through funding to local organizations that are visible and effective in identifying prospective clients.
- Maintaining close communication with contractors and subrecipients and encouraging their qualified referrals.
- Maintaining a website with clear and current program information.
- Utilizing social media, including Facebook and LinkedIn, and making more frequent posts.
- Issuing media releases to regional and local outlets.
- Regularly conducting in-services for professionals and community education for laypersons.
- Conducting outreach to local elected officials.

- To reach individuals without internet access, broadly disseminating print materials at venues that serve a critical mass of older adults (e.g., libraries, food banks, senior housing communities, and churches).
- Encouraging clients to refer neighbors and friends who may benefit.
- Collaborating with HHSC partner agencies including Regional Local Services, Local Intellectual and Developmental Disability Authorities (LIDDAs), and managed care organizations under contract with HHSC for STAR+PLUS Waiver services to assist those who qualify for both agencies' services.

The NCTAAA builds on these general outreach strategies to reach special populations identified by the Older Americans Act. Following are some more specific actions it takes to identify and serve these priority populations.

Older Individuals Residing in Rural Areas

The NCTAAA passes through funding for nutrition and transportation services to subrecipients who are based in rural counties (i.e., Erath County Senior Citizens Services, Inc., Meals on Wheels of Palo Pinto County, Inc., Public Transit Services, and Somervell County Committee on Aging). All are highly visible in their communities.

Older Individuals with Greatest Economic Need

The NCTAAA has conducted community mapping and identified local organizations that serve older adults and family caregivers who are experiencing financial crisis. It has hired outreach specialists to make presentations to community groups, participate in events such as food pantry distribution, and deliver brochures to organizations that serve a critical mass of older individuals with greatest economic need (e.g., Mission Granbury, Center for Hope, and Center of Life).

To help clients meet their basic needs, the NCTAAA regularly screens callers to determine if they qualify for public benefits such as Medicaid, SNAP, Medicare Savings Programs, and Low-Income Subsidies. If so, staff members assist with applications as needed. In addition, the NCTAAA created Financial Fitness for Older Adults, a unique one-on-one counseling program that covers developing a spending and saving plan, using healthcare wisely, avoiding unfair loans, preventing fraud, and advance directives. Philip Randall of Aetna collaborated with Doni Green in creating the curriculum, and Aetna donated Walmart gift cards to be provided to graduates as incentives.

Older Individuals with Greatest Social Need

To identify older adults with social need, the AAA collaborates with Adult Protective Services (APS). It conducts in-services and invites APS staff to serve on its Regional Aging Advisory Committee. APS workers are uniquely positioned to identify older adults who are without caregiver support, as well as those who have inadequate caregiver support (e.g., overwhelmed, abusive, or neglectful caregivers).

The NCTAAA also partners with organizations such as food pantries, HHSC Community Care screeners, and churches' homebound ministries to reach those who are isolated. Its general outreach plan, which include issuing press releases and distributing flyers at local venues, includes strategies to go straight to consumers who may not be connected with service providers.

In addition, the NCTAAA has worked with HHSC to create a special report that flags registered consumers who have a household size of one. Although not all persons who live alone are isolated, the report allows the Agency to conduct case finding for its Alzheimer's Disease Program Initiative grant (which targets people with dementia who live alone), as well as other programs (e.g., PEARLS) that address social isolation. The NCTAAA has relied on an unpaid intern to conduct outreach to persons on this report.

Older Individuals with Severe Disabilities

The NCTAAA identifies older people with severe disabilities through targeted outreach to healthcare partners (e.g., hospital and rehabilitation facility discharge planners and home health social workers). Further, it contracts with 2-1-1 and the region's Center for Independent Living, which often serve as an entry point for people with severe disabilities who are in need of health and/or social services.

Older Individuals with Limited English Proficiency

The NCTAAA has bilingual staff who support its information and referral, benefits counseling, care coordination, caregiver support coordination, and caregiver information services. If they are unavailable, it utilizes a professional translation service to assist clients with limited English proficiency.

The NCTAAA has made a concerted effort to enhance its outreach to Spanish-speakers. During 2022-2023 it convened a workgroup of Spanish-speaking professionals within and beyond the agency (e.g., a bilingual palliative care physician who served on the Regional Aging Advisory Committee and a bilingual

dementia educator with the Alzheimer's Association) to develop a Spanish outreach plan. It consequently translated its major brochures into Spanish, conducted targeted outreach to Spanish-speaking churches, issued a press release to Spanish media, and reached out to advocacy organizations such as LULAC.

In addition, the NCTAAA has translated its primary brochure into Vietnamese and has a staff member who is fluent in Vietnamese.

Older Individuals with Alzheimer's Disease and Related Disorders

The NCTAAA has a long history of contracting with the region's two chapters (Dallas/Northeast Texas and North Central Texas) of the Alzheimer's Association for several Title III services, including information, referral and assistance; caregiver information services; and caregiver training. In addition, it contracts with the James L. West Center for Dementia Care for provision of two dementia-specific programs: Dealing with Dementia and Stress-Busting for Family Caregivers. Through these contracts the Agency is able to more effectively identify and support caregivers of people with dementia.

In 2021 the NCTAAA applied for and received an Alzheimer's Disease Program Initiative (ADPI) grant from the Administration for Community Living. It has invested grant funds in expansion of care coordination services for people with dementia and education for family caregivers. ADPI funds support the evidence-based Resources for Enhancing Alzheimer's Caregiver Health (REACH) program, provided in a 28-county service area in both English and Spanish. Further, they support two evidence-informed workshops: Dementia Live and Compassionate Touch.

The NCTAAA has hired a bilingual case manager/dementia educator and invested in regular dementia education for key staff.

To reach those who may be eligible for ADPI services, the NCTAAA has conducted training for staff at Adult Protective Services and neighboring AAAs/ADRCs and sponsored a series of caregiver webinars. It has also engaged in targeted outreach to the Alzheimer's Association, primary care providers, geriatricians, and hospital discharge planners.

Older Individuals at Risk for Institutional Placement

The NCTAAA assumes that persons at greatest risk of institutional placement are those who have undergone a diminution in their functional ability and/or lost their informal support. To target those who have experienced a loss in function, it

conducts outreach to hospital and rehabilitation facility discharge planners. Its care coordination program gives priority to people who have been in emergency departments, hospitals, rehabilitation facilities, and nursing facilities within the past month, as well as those who require assistance with two or more activities of daily living and those who are without informal support.

The NCTAAA has two programs that help people in institutional settings return to independent living: Home by Choice, which provides intense case management to nursing home residents with Medicaid who wish to relocate, and options counseling, which provides information and referral to those who are preparing to discharge from rehabilitation facilities or nursing homes.

Older Individuals Who are Native Americans

The number of older Native American North Central Texans is limited. Population estimates by age are not available, but HHSC demographic data indicate that persons who are not White, African American, or Asian constitute only 1.4% of the North Central Texas older adult population. The "other" racial category includes Native Americans, in addition to Alaska Natives, Native Hawaiians, and Other Pacific Islanders. During Fiscal Year 2022, the NCTAAA had 37 registered consumers who reported their race as Native American, constituting .42% of all registered consumers.

The NCTAAA had a long-time manager who was a member of the Chickasaw Nation and established a relationship with the Dallas Inter-Tribal Center to encourage cross-referrals.

Caregivers of all the Older Individuals Listed Above

The NCTAAA promotes its caregiver programs through the general outreach strategies noted above. In addition, it conducts targeted outreach to major employers (e.g., Raytheon) and their employee assistance programs, recognizing that approximately six of ten caregivers are employed.

In general, caregivers are more likely to utilize social media and internet searches than are older adults in the Older Americans Act priority populations (e.g., those with greatest economic need). For this reason, the NCTAAA is working to step up its social media presence and put greater emphasis on Facebook and LinkedIn posts.

Targeting Report

The purpose of the targeting report is to show how effective the AAA's targeting efforts were in serving specific population groups within the planning and service area (PSA).

Table 5: PSA Targeting Report

Characteristic	Population Age 60 and Over in PSA	Percent Population Age 60 and Over in PSA	Number of Registered Service Recipients in PSA	Percent Number of Registered Service Recipients in PSA	Targeting Goals for FFY 2024
Total 60 and over	564,735	19.92%	8,968	1.59%	1.3%
Poverty Level (at or below 100% FPL)	80,938	6.6%	2,495	27.82%	29.0%
Minority	112,606	19.9%	1,831	20.42%	20.45%
Rural Areas	no matching ACS data	no matching ACS data	708	Unable to calculate	7.0%
Household Status (lives alone)	90,190	18.8%	4,153	46.31%	46.75%

Data for the columns, "Population Age 60 and Over in PSA" and "Percent Population Age 60 and Over in PSA" are derived from the U.S. Census Bureau Special Analysis 2015-2019 American Community Survey (ACS) Data Analysis for Population Age 60 and Over, with data located on U.S. Administration for Community Living's [AGID \(Aging, Independence, and Disability Program\) Data Portal/Website](#). Data for the column, "Number of Registered Service Recipients in PSA" is from data pulled from the NAPIS (National Aging Program Information Services) report, where registered services include personal assistance, homemaker, chore, home delivered meals, day activity and health services, case management, assisted transportation, congregate meals, and nutrition counseling.

Section 8. Goals, Objectives, Strategies

Legal References: OAA 2020 306(a) and 307(a)

This area plan details the interrelated activities which support a responsive, consumer-directed long-term services system that supports older people for each of the Administration for Community Living (ACL) state plan key topic areas. The following Key Topic Areas, State Goals, State Objectives and Outcomes were derived from the ACL approved [2023-2025 Texas State Plan on Aging](#).

Each of the five State Goals is comprised of multiple State Objectives and Outcomes. For each objective and outcome, please provide the corresponding AAA Strategies. Strategies can be thought of as action steps that detail how the needs within the planning and service area (PSA) will be addressed. Identifying the AAA strategies can provide insight to HHSC on how the State Objectives and/or Outcomes are achieved at the local level. ***If there are no AAA strategies associated with a specific objective and/or outcome, please explain (in the AAA Strategies answer) the reason for why it is not applicable within the PSA.***

Key Topic Area 1: OAA Core Programs

OAA core programs are found 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.

State Goal 1

Promote excellence and innovation in the delivery of core Older Americans Act Programs to meet the unique and diverse needs of Older Texans and family caregivers.

State Objective 1.1

Provide administration and oversight of programs funded through the HHSC Office of Area Agencies on Aging, state general revenue funds, and other federal and/or state funds to ensure a consistent, coordinated, and accountable service delivery model.

Outcome 1.1

OAA funds are appropriately used to ensure older individuals and their caregivers have access to services that meet their needs and interests.

AAA Strategies 1.1

The NCTAAA is a program of the North Central Texas Council of Governments, which has more than 400 employees and effectively oversees more than \$144 million per annum in federal and state grants. It has several certified public accountants and attorneys on staff and robust policies to ensure grant funds are administered in compliance with federal, state, and grant-specific requirements.

Administrative staff who support Older Americans Act programs include the following:

- Director Doni Green, who is responsible for the NCTAAA's program and fiscal performance. As part of those responsibilities, she assesses and prepares the Area Plan, which proposes services that are most responsive to the needs

of older adults and family caregivers in the North Central Texas area. She has led the NCTAAA since 1996.

- Manager Dena Boyd, who is responsible for data integrity, provision of technical assistance to subrecipients, and subrecipient monitoring to ensure compliance.
- Fiscal manager Shanda Palacio, who is responsible for fiscal reporting. She is assisted by accountant Thanh Dai-Thi Vo.
- Volunteer coordinator Sharon Rowbottom, who recruits volunteers to serve as health coaches and benefits counselors, thus expanding both programs' capacity in a cost-effective manner.
- Contracts and vendors coordinator Roger Williamson, who reviews and approves invoices for in-home services.
- Aging program data specialist Diane McCoy, who conducts data entry, runs reports, and performs quality assurance for direct services (e.g., care coordination, caregiver support coordination, and evidence-based interventions), and pass-through services (e.g., caregiver information services, caregiver counseling, and caregiver training).
- Senior administrative assistant Christine Tran, who performs a broad range of administrative tasks.
- Graphic artist Kristy Keener, who designs Agency outreach materials.

The NCTCOG's and NCTAAA's ability to serve as effective stewards of HHSC funds is reflected in its monitoring results. Its most recent HHSC monitoring visits resulted in reports that were without findings or observations. In addition, NCTCOG's most recent audit at the time of plan submission found no deficiencies or weaknesses.

State Objective 1.2

Ensure collaboration between Title III (Supportive Services, Nutrition, Disease Prevention and Health Promotion and Caregivers Programs) and Title VI (Native American Programs).

Outcome 1.2

Increase awareness of federally recognized tribes within the state to increase collaboration and appropriate referrals and ensure all eligible older individuals have access to OAAA services provided by Title III or Title VI grantees.

AAA Strategies 1.2

None of the State's federally recognized tribes (i.e., Alabama-Couchatta, Kickapoo Traditional, or Ysleta del Sur Pueblo) have a critical mass in the North Central Texas area.

The NCTAAA has met with the Dallas Intertribal Center staff to ensure they are aware of its services and encourage referrals for services that may be of benefit to older Native Americans, including benefits counseling, care coordination, in-home services, and residential repair.

State Objective 1.3

Raise awareness and understanding of the impacts of malnutrition through comprehensive policy review, tool development, and marketing campaigns.

Outcome 1.3

Increase awareness of the signs and symptoms of malnutrition and how to mitigate malnutrition in older individuals.

AAA Strategies 1.3

The NCTAAA's subrecipients administer the Determine Your Nutritional Health screening whenever assessing or reassessing a consumer for home-delivered or congregate meals. The screening tool includes the following questions, which include indicators of malnutrition:

I have an illness or condition that made me change the kind and/or amount of food I eat.
I eat fewer than two meals a day.
I eat few (less than five) fruits or vegetables, or few (less than two) milk products a day.
I have three or more drinks of beer, liquor or wine almost every day.

I have tooth or mouth problems that make it hard for me to eat.
I don't always have enough money to buy the food I need.
I eat alone most of the time.
I take three or more different prescribed or over-the-counter drugs a day.
Without wanting to, I have lost or gained ten pounds in the last six month.
I am not always physically able to shop, cook and/or feed myself.

If a nutrition consumer has positive responses, the meal assessor provides personalized nutritional counseling, using fact sheets that were developed by licensed dietitians with Texas AgriLife. In addition, meal assessors may make referrals for other support services.

All Area Agency on Aging and Aging and Disability Resource Center direct service staff have been trained to screen callers for any nutritional needs and make appropriate referrals such as home-delivered meals, congregate meals, SNAP, and food pantry assistance. In addition, they screen for other financial assistance programs such as Medicaid, Medicare Savings Programs, and Low-Income Subsidies. As needed, the NCTAAA provides assistance in completing applications for public benefits.

State Objective 1.4

Protect older Texans from abuse, neglect and exploitation through services designed to detect, assess, intervene, and investigate elder abuse, neglect and financial exploitation.

Outcome 1.4

Increase awareness of the risk for abuse, neglect, and exploitation of older individuals.

AAA Strategies 1.4

The NCTAAA remains cognizant of its responsibility under Human Resources Code Section 48.001 to be mandatory reporters of suspected abuse, neglect or exploitation of an older adult or young adult with disabilities. It ensures that all staff are trained to recognize and report possible abuse. In addition, it provides registered consumers a consumer rights form, with content below:

Consumer Rights

How can I report abuse, neglect or exploitation by one of my providers?

If you're an older person or adult with a disability and believe that one of your *paid providers* is abusing, neglecting or exploiting you, you can call Texas Health and Human Services (HHSC) at 1-800-458-9858 (Texas Abuse Hotline). Reports can also be made by filing a report online through a secure website at www.txabusehotline.org.

This number and website can be used to report abuse, neglect or exploitation by staff members of Area Agencies on Aging, Aging and Disability Resource Centers, home health and hospice agencies, adult day care centers, senior centers, and other agencies that provide services such as nursing home relocation, home delivered meals, and transportation.

Calls are answered Monday through Friday from 7:00 a.m. to 7:00 p.m. If you call outside of those hours, leave a message. An agent will call you back by the next working day. Should your report concern an emergency situation, call 9-1-1.

Will anyone know who made the report?

No. HHSC keeps your name and that of the other person confidential, unless required to release it by law. However, if you choose to remain anonymous, HHSC cannot report back to you with the results of the investigation.

What if someone other than a paid provider is abusing, neglecting, or exploiting me?

You can report abuse, neglect or exploitation of an older or disabled person to Adult Protective Services at 1-800-252-5400.

The NCTAAA has conducted targeted outreach to Adult Protective Services caseworkers in the form of a 4/25/23 in-service, highlighting care coordination and caregiver support coordination and the purchased services (e.g., homemaker, personal assistance, and residential repair) that may be authorized through these programs.

State Objective 1.5

Enhance cross agency responses to elder abuse by the HHSC Office of the Ombudsman, legal assistance programs, law enforcement, health care professionals, financial institutions, and other essential partners across the state.

Outcome 1.5

Increase awareness of programs and services available for older individuals experiencing abuse, neglect or exploitation.

AAA Strategies 1.5

The NCTAAA has conducted in-services for Adult Protective Services (APS) investigators to ensure they're aware of supports available through its Area Agency on Aging and Aging and Disability Resource Center. It intends to work with the APS Community Liaison to conduct a series of outreach programs for professionals and laypersons, to raise their awareness of abuse, neglect and exploitation, make reports to APS, and take advantage of Older Americans Act services.

State Objective 1.6

Strengthen efforts related to dementia and Alzheimer's Disease.

Outcome 1.6

Increase awareness of dementia and Alzheimer's disease.

AAA Strategies 1.6

The NCTAAA applied for and received one of 10 Alzheimer's Disease Program Initiative (ADPI) grants awarded from the Administration for Community Living (ACL) in Summer 2021. It subsequently entered into an exhaustive planning period and obtained authorization from ACL to launch direct services in September 2022. It anticipates receiving a no-cost extension and providing ADPI-funded services during the early part of Fiscal Year 2024.

Although ADPI funding will have been depleted for the majority of the planning period, the NCTAAA will engage in culture change throughout the project's term. More specifically, it will:

- Conduct more targeted outreach to persons with dementia and their family caregivers.
- Create and implement policies and procedures that take into consideration the unique wants, preferences, and needs of people with dementia and their family caregivers.
- Support a dementia-capable care coordinator who's a certified dementia educator.
- Provide its direct service and support staff regular training in dementia.

- Make dementia training available to organizations beyond the NCTAAA, with focus on other Area Agencies on Aging/Aging and Disability Resource Centers, Local Intellectual/Developmental Disability Authorities, Adult Protective Services, and first responders.
- Continue collaborative relationships with providers who have expertise in dementia (e.g., Alzheimer's Association).

The NCTAAA has created a dementia-specific section of its website, located at <https://www.nctcog.org/aging-services/dementia-friendly>, and will continue to use it to increase awareness of dementia and supports for persons with dementia, both within and beyond the agency.

State Objective 1.7

Increase awareness of risks for fall related traumatic brain injuries for older individuals.

Outcome 1.7

AAAs, ADRCs, and providers are aware of risks for older individuals associated to falls and how to prevent them.

AAA Strategies 1.7

The NCTAAA has a rich history of administering evidence-based interventions (EBIs) that increase awareness of fall risks and help older adults learn practical strategies for reducing their fall risk. It ensures that all AAA, ADRC, and provider staff are familiar with its EBIs (including but not limited to those that focus on fall prevention).

Its most established fall prevention program is A Matter of Balance, which helps small groups of participants develop action plans for avoiding falls and overcome their fears of falling. In Fiscal Year 2022 it began developing capacity to administer Tai Chi for Arthritis and Fall Prevention and rolled out classes in Fiscal Year 2023. The North Central Texas community has embraced this program and classes have consistently filled shortly after registration has opened.

State Objective 1.8

Strengthen Title III and Title VII services.

Outcome 1.8

Increase in public awareness of aging services across the state.

AAA Strategies 1.8

The NCTAAA works to increase public awareness of aging services across the state through strategies that include the following:

- Creating guides to aging services, such as “Understanding Your Options for Services in the Community,” “Understanding Your Options for Services in a Nursing Home or Assisted Living Facility,” and “Understanding Residential Care Options for People with Dementia”—all of which are posted on its website at: [North Central Texas Council of Governments - Resources and Additional Information \(nctcog.org\)](http://nctcog.org). It wrote each of these guides with a statewide audience in mind and has shared the publications with other Area Agencies on Aging and Aging and Disability Resource Centers.
- Funding frequent webinars for older adults, persons with disabilities, and family caregivers and marketing them to a statewide audience. For example, it provides funding to Marty Mascari of Mascari Corporation for Caregiver Information Services and Instruction and Training, and he conducts an average of more than eight events per month, with average attendance of more than 100. The webinars are recorded and placed on YouTube to extend their reach. Recent topics include “Services through the Area Agencies on Aging and Aging and Disability Resource Centers” and “Area Agency on Aging Services for Older Caregivers of People with Severe Disabilities.”
- Speaking at local, regional, state, and national conferences, webinars, and podcasts on services through the Area Agencies on Aging and Aging and Disability Resource Centers.
- Conducting in-services for staff at Adult Protective Services, Local Intellectual/Developmental Disability Authorities (LIDDAs), and other health and social service organizations.
- Implementing broad outreach strategies detailed in Section 7 to educate laypeople and professionals about aging services.
- Sharing best practices with fellow Area Agencies on Aging and Aging and Disability Resource Centers through participation in the Texas Association of

State Objective 1.9

Integrate discretionary grant activities with OAA core programs and services.

The NCTAAA has been extremely successful in applying for and receiving discretionary grants. At the time of plan submission, it does not know what opportunities for discretionary funding may present themselves during the entirety of the planning period, but it does anticipate that the following non-OAA core programs will continue:

- **Nursing home relocation:** The NCTAAA has several years' experience contracting with Amerigroup, Molina, and United to provide Money Follows the Person nursing home relocation services. Under those contracts NCTAAA staff and contract relocation specialists provide intensive case management services to long-term residents of nursing facilities who wish to return to the community. Relocation specialists assist the health plans in arranging Medicaid-funded community-based long-term services and supports, as well as vital non-Medicaid funded supports (e.g., housing, banking, and non-medical transportation). The NCTAAA has been recognized by ACL and USAging for its ability to successfully negotiate and implement contracts with health plans.
- **Dementia Friendly North Central/East Texas:** This program is funded directly through the Administration for Community Living under a discretionary grant. It expands the OAA core programs of care coordination, caregiver support coordination, caregiver information services, and caregiver training.

As of Spring 2023, the NCTAAA is determining the feasibility of contracting with the Veterans Administration Medical Center to administer the Veterans Directed Care Program. In early 2023 it launched the readiness review necessary to participate in the program and will seek Executive Board approval, depending on the outcome of its feasibility study and readiness review.

Outcome 1.9

Increase knowledge and awareness of SHIP, MIPPA and SMP programs and services.

AAA Strategies 1.9

The NCTAAA increases knowledge and awareness of SHIP, MIPPA and SMP programs through strategies that include the following:

- Distributing outreach items (e.g., tote bags and medication organizers), imprinted with SHIP/MIPPA information, to participants of health fairs, food pantries, and other community events.
- Supporting local benefits counseling clinics and utilizing partners (e.g., hosting senior centers) to promote the availability of one-on-one assistance with benefits issues.
- Entering into contract with the Better Business Bureau Education Foundation to participate in Senior Medicare Patrol and utilizing benefits counseling staff and volunteers to conduct community education on avoiding Medicare fraud.
- Hosting Medicare Mondays, providing bi-monthly virtual presentations on various Medicare topics.
- Utilizing vaccination assistance funds to print and widely disseminate general agency and SHIP/MIPPA-specific information.
- As authorized by HHSC, utilizing MIPPA funds to create and widely disseminate outreach items.
- Contracting with a MIPPA outreach specialist to represent the agency at professional networking meetings and outreach events.

Key Topic Area 2: COVID-19

COVID-19 highlighted the overall importance of the services that make it possible for older individuals to live independently, created a national awareness of the impact of social isolation on older individuals and caregivers, and increased awareness of the need to plan for future disasters. It also transformed the aging network by driving rapid innovation to create new approaches that will endure beyond recovery. Finally, Congress approved the release of supplemental funding, some of which remains available until expended, for services to support evolving needs related to the pandemic nationwide.

State Goal 2

Prepare for and increase community engagement during emergencies and disasters that improve resiliency and reduce the impacts of social isolation and loneliness on the health and well-being of older Texans, people with disabilities and their caregivers.

State Objective 2.1

Support older individuals' behavioral health through awareness of the impacts of social isolation and loneliness and establishing resources and tools to encourage engagement.

Outcome 2.1

Increase awareness of the risks and impacts of social isolation for older individuals.

AAA Strategies 2.1

The NCTAAA supports older adults' behavioral health by offering the evidence-based Program for Enhancing Active and Rewarding Lives (PEARLS) program. PEARLS is designed for older adults who are isolated and dealing with depression or persistent sadness. The NCTAAA's contract PEARLS counselor, Dr. DeWanda Harris Trimiar, contacts participants at least monthly and helps them develop action plans for doing things they enjoy.

State Objective 2.2

Enhance awareness of the available assistive technology supports and strengthen HHSC partnership with the state assistive entity.

Outcome 2.2

Increase awareness of the state assistive technology entity and the need for assistive technology devices for older individuals.

AAA Strategies 2.2

The NCTAAA enhances lay awareness of assistive technology supports by including relevant content in its publication entitled “Understanding Your Options for Services in the Community.” It includes a section that’s specific to medical equipment and adaptive aids (a.k.a. assistive technology supports).

As the NCTAAA conducts functional assessments of consumers for care coordination services, its staff determine if durable medical equipment and/or assistive technology may be helpful. In addition to referring consumers to the Texas Technology Access Program, it may refer to REACH, which maintains an assistive technology lending program.

The NCTAAA director has shared Texas Technology Access Program (TTAP) information with all staff. In addition, its subrecipient provider of caregiver information services, Mascari Corporation, will conduct a webinar to raise awareness of the available technologies and TTAP services.

State Objective 2.3

Increase the aging services network’s use of trauma-informed care practices for serving older individuals and their caregivers.

Outcome 2.3

Increase awareness of trauma-informed care and best practices.

AAA Strategies 2.3

The NCTAAA director will complete training in trauma-informed care and encourage staff to complete as their schedules allow.

State Objective 2.4

Increase the aging services network's knowledge of suicide risks, prevention and resources.

Outcome 2.4

Increase awareness on how to assess a person's mental and behavioral health status.

AAA Strategies 2.4

Through its subrecipient for Instruction and Training services Marty Mascari, the NCTAAA has funded several Mental Health First Aid courses. These skills-based trainings teach participants about mental health and substance-use issues.

State Objective 2.5

Support the aging services network's preventative health efforts through the provision of resources and tools that highlight the importance of regular screenings and immunizations.

Outcome 2.5

Increase awareness of available resources and best practices related to preventative health measures.

AAA Strategies 2.5

The NCTAAA promotes awareness of preventive health resources and best practices through at least three services: 1) benefits counseling; 2) evidence-based interventions; and 3) COVID vaccination assistance.

Through the benefits counseling program, staff and volunteer benefits counselors educate the public about Medicare preventive health benefits. NCTAAA benefits counselors help develop the Financial Fitness for Older Adults program. It includes a module on using health care wisely, and one of the key tenets is that preventive health measures (e.g., having an annual physical, getting vaccinated, and adopting a healthy lifestyle) save money while improving function and quality of life.

Through the NCTAAA's evidence-based interventions—and Chronic Disease Self-Management, more specifically—health coaches help participants develop action plans for better managing their ongoing health conditions. Preventive measures, such as engaging in regular activity, eating well, sleeping well, and using medications properly, are discussed in detail.

State Objective 2.6

Strengthen the aging services network's connections to public health and emergency response networks.

Outcome 2.6

Awareness of the availability of telecommunications and virtual sessions.

AAA Strategies 2.6

During COVID the NCTAAA moved rapidly to make virtual programs available to participants. At the time of plan submission, all services are available virtually—whether by phone only, Teams, or Zoom—with the exception of Tai Chi for Arthritis and Fall Prevention. Virtual sessions are the standard for its PEARLS, caregiver information services, and instruction and training services. Those who wish to participate in A Matter of Balance, Chronic Disease Self-Management, Diabetes Self-Management, and Chronic Pain Self-Management classes can choose live or virtual formats.

The NCTAAA partnered with the North Central Texas Aging and Disability Resource Center, which increased the availability of telecommunications by purchasing tablets and data plans for persons without internet access. The time-limited program, funded by the CARES Act, was in effect from December 2020 through August 2022.

State Objective 2.7

Increase access to services for older individuals with mobility and transportation issues.

Outcome 2.7

Increase awareness of existing public transportation services, the availability of volunteer and private transportation programs, and knowledge of accessible and assisted transportation services for older individuals.

AAA Strategies 2.7

Through its information, referral and assistance program, and its “sister” Aging and Disability Resource Center, the NCTAAA provides current, complete information about transportation options to callers in need. In addition, it supports the following transportation programs:

- Title III demand response transportation, through a network of 10 subrecipients who provide trips within county boundaries.
- The pilot Senior Rides program, which utilizes contractor agency The Transit System to provide out-of-county medical transportation to older persons in Hood and Somervell County.
- Springtown Rides, which recruits volunteers to provide medical and non-medical transportation to City of Springtown (Parker and Wise Counties) residents.
- Vaccination assistance, which utilizes UberHealth to arrange trips to and from vaccination sites.

Should these transportation resources not be sufficient to meet callers’ needs, the NCTAAA consults with North Central Texas Council of Governments transportation planners and refers to My Rides Dallas and My Rides Tarrant. These programs have inventoried public and private transportation services in the Greater Metroplex.

Key Topic Area 3: Equity

Serving people with the greatest economic and social need means ensuring equity in all aspects of plan administration.

State Goal 3

Promote activities that ensure equity and access to services for those with the greatest economic and social need.

State Objective 3.1

Ensure meals can be adjusted for cultural considerations and preferences.

Outcome 3.1

Increase awareness for AAAs and service providers of nutritional needs based on cultural and ethnic preferences.

AAA Strategies 3.1

NCTAAA subrecipients assume full responsibility for managing the home-delivered and congregate meal programs, including developing menus for meals that meet older adults' dietary needs, as well as their preferences. Subrecipients vary in size, staffing resources, and fiscal resources, reimbursement rates, and service delivery method. Some subrecipients operate their own kitchens (e.g., Somervell County Committee on Aging, Parker County Committee on Aging, and Hood County Committee on Aging). Others purchase their meals from a local provider (e.g., Meals on Wheels Palo Pinto County and Meals on Wheels Senior Services). Finally, some purchase their meals from a consortium (Meals on Wheels North Central Texas, SPAN, and Erath County Senior Citizens Services).

Subrecipients' ability to customize meals on the basis of cultural and ethnic preferences are influenced by all the variables above. In addition, their ability to accommodate specific dietary preferences is influenced by whether the cultural and ethnic preferences are predominant in the service area or more isolated.

The NCTAAA encourages its nutrition subrecipients to survey consumers regarding their dietary preferences and incorporate these into their menus.

However, not all have capacity to customize their menus—particularly if they participate in a consortium that doesn't allow for substitutions.

Meals on Wheels North Central Texas has created a best practice of meeting local needs, while operating a meal program that's constrained by a capitated unit rate of \$5.33. It serves a critical mass of Seventh Day Adventists and offers consumers plant-based options that satisfy Title III dietary requirements.

State Objective 3.2

Prepare, publish, and disseminate educational materials dealing with the health and economic welfare of older individuals.

Outcome 3.2

Aging network staff are aware of trends impacting the health and economic welfare of older Texans.

AAA Strategies 3.2

The NCTAAA has assumed a leadership position relative to recognizing trends that affect older adults' economic welfare and developing innovative programming that support financial security. During COVID it experienced a dramatic increase in the number of callers seeking emergency financial assistance (e.g., help with utility bills to avoid termination and help with rent to avoid eviction). For some callers, these financial crises were time-limited in nature and caused by recent events (e.g., a job layoff). However, a significant percentage indicated they had ongoing difficulty meeting basic needs.

In response, the NCTAAA worked with Aetna Health to develop Financial Fitness for Older Adults. The program consists of six modules that cover developing a spending and saving plan, using healthcare wisely, avoiding scams, avoiding unfair loans, applying for Medicaid, and advance directives. Three benefits counselors were trained to administer the program, which provides one-on-one counseling on a self-paced basis.

In addition to offering Financial Fitness for Older Adults, the NCTAAA prepared and widely distributed flyers to increase awareness of public benefit programs (e.g., Medicare Savings Programs, Low-Income Subsidies, Medicaid, and SNAP). It also provided application assistance as needed.

State Objective 3.3

Increase awareness of available resources and services for older individuals living with Human Immunodeficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS).

Outcome 3.3

HHSC OAAA, AAA, and ADRC staff are aware of information and data sources available for older individuals living with HIV/AIDS.

AAA Strategies 3.3

NCTAAA staff and volunteers have completed training in cultural diversity, conducted by Gilead. The training program engages attendees in conversations about how to address the needs of communities living with or at risk for HIV.

NCTAAA contract outreach specialist Sheryl Ross serves on the regional HIV/AIDS advisory council.

State Objective 3.4

Support participant-directed and person-centered planning for older individuals and their caregivers across the spectrum of LTSS, including home, community, and institutional settings.

Outcome 3.4

Increase awareness of participant-directed and person-centered planning for older individuals and their caregivers.

AAA Strategies 3.4

The NCTAAA was an early adopter of person-centered planning. Dr. Jan Henning, who served as manager of its Benefits Counseling program for more than two decades, was certified by the Institute for Person-Centered Practice as a trainer. She subsequently conducted training on person-centered planning for NCTAAA and NCTADRC staff who provided direct services. In addition, she conducted training for ADRCs statewide.

As the NCTAAA solicits contract case managers, it asks applicants to explain how person-centered planning affects their work and scores applicants on the basis of the quality of their responses.

The NCTAAA is a strong advocate of participant-directed services. It provides care coordination and caregiver support coordination consumers the opportunity to select their own providers for homemaker and/or respite services. In addition, it counsels those who qualify for Community Attendant, Primary Home Care, or Medicaid Waiver services about the Consumer-Directed Service (CDS) option, which empowers consumers to select their own direct service workers.

As of Spring 2023, the NCTAAA is undergoing a readiness review as a precursor to contracting with the Veterans Administration for Veteran Directed Care (VDC). The VDC program allows qualifying veterans to hire attendants of their choosing, including family and friends.

State Objective 3.5

Ensure access to services for all older individuals with greatest social need, including populations that experience cultural, social or geographic isolation due to minority religious affiliation, sexual orientation or gender identity.

Outcome 3.5

Increase in outreach efforts to underserved populations to ensure all older Texans have access to OAA services.

AAA Strategies 3.5

Please refer to the section entitled “Targeted Outreach Plan (pp. 65-69) for a detailed description of the strategies employed by the NCTAAA in order to reach underserved populations. During the prior planning period, the NCTAAA convened an interagency workgroup to accelerate its outreach and utilized COVID vaccination funding to retain two temporary employees and a contractor to assist with outreach. Collectively, NCTAAA staff, temporary employees and contractors took actions that included:

- Translating its main brochure, benefits counseling, care coordination, Dementia Friendly, and COVID vaccination brochures into Spanish.
- Sending NCTAAA and NCTADRC information to pastors of Spanish-speaking congregations.
- Issuing a press release to Spanish media outlets.
- Conducting outreach presentations in English, Spanish, and Vietnamese.

- Conducting a number of workshops that highlight services for persons with dementia and their family caregivers.
- Conducting dementia training for professionals to help them meet the care needs of persons with dementia and their family caregivers.
- Printing large quantities of flyers and distributing to senior centers, libraries, food pantries, low-income properties, and retirement communities.
- Stepping up its participation in health and information fairs.
- Conducting outreach to primary care physicians, specialists with a critical mass of older adults (e.g., geriatricians and rheumatologists), hospital discharge planners, and nursing facility discharge planners.
- Retaining two contractors to create monthly electronic newsletters.
- Conducting regular community education for older adults, family caregivers and professionals.
- Utilizing MIPPA funds to print Agency information on more than 240,000 pharmacy bags, distributed by pharmacies in rural counties.

Key Topic Area 4: Expanding Access to Home and Community Based Services

Home and Community Based Services are fundamental to making it possible for older individuals to age in place.

State Goal 4

Provide a coordinated system of in-home and community-based long-term care services that enables older Texans and people with disabilities to be active, engaged and supported in their homes and communities.

State Objective 4.1

Develop a comprehensive, coordinated system of long-term care that enables older individuals to receive long-term care in settings of their choice and in a manner responsive to the needs and preferences.

Outcome 4.1

Increase awareness of long-term care services and supports that enable older individuals to receive long-term care in settings of their choice.

AAA Strategies 4.1

Both the NCTAAA and the North Central Texas Aging and Disability Resource Center (NCTADRC) serve as a point of entry for individuals who are seeking long-term services and supports, including community-based and institutional options. NCTAAA and NCTADRC staff provide objective information about in-home services and supports, as well as care in assisted living facilities, nursing facilities, adult foster care facilities, and group homes.

Staff members place primary emphasis on the care setting preferred by the consumer. In the vast majority of cases, home is the preferred option. However, should in-home services be insufficient to meet the need, staff are able to discuss facility-based options. They work as a team, with the NCTADRC taking the lead on how to qualify for Medicaid and VA services, and the NCTAAA long-term care ombudsman program taking the lead on how to choose facilities on the basis of care capabilities and quality history.

State Objective 4.2

Ensure care transitions for older individuals at risk of institutionalization.

Outcome 4.2

Coordinate information sharing across the aging services network to increase awareness of transition assistance services and facilitate connections with long term services and supports agencies and community programs at the local level.

AAA Strategies 4.2

The NCTAAA is the only Area Agency on Aging in the State of Texas that is under contract with health plans to provide relocation services to nursing facility residents with Medicaid benefits. Its Home by Choice program is funded by Amerigroup, Molina, and United to assist their members in returning to community living. Relocation specialists help secure affordable housing, secure transition grants, and arrange non-Medicaid services such as banking and transportation. The NCTAAA engages in ongoing outreach to raise awareness of relocation services, such as webinars for nursing facility staff and email blasts to facilities' discharge planners.

Through its NCTADRC, staff benefits specialists counsel nursing home residents without Medicaid benefits who wish to return to independent living. Options counselors screen residents for services through agencies such as NCTAAA, Veterans Administration, and HHSC, and help make application as needed.

NCTCOG staff have served on statewide workgroups, done best practices presentations, and helped plan and conduct statewide webinars on transition assistance.

State Objective 4.3

Enhance integration of health care and social services systems.

Outcome 4.3

Increase knowledge and awareness of all health care and social services available for older individuals.

AAA Strategies 4.3

The NCTAAA has increased knowledge of health care and social services available to older adults in the following ways:

- Creating a comprehensive and coordinated network of health and social services that include, but are not limited to the following:
 - information and referral, through which call-takers systematically identify older adults' wants, needs, and preferences and connect them with appropriate resources.
 - preventive health workshops that improve disease control and reduce fall risk.
 - case management services that identify health and social service needs and meet those needs through purchased services and/or referrals to other agencies.
- Investing in public information services in order to build community awareness of AAA services. More specifically, it has engaged two COVID vaccination outreach specialists and a contract outreach specialist. This team engages in broad outreach, including use of social media and wide distribution of print materials in order to reach those who have been left behind by the digital divide.
- Supporting the service of instruction and training, through which the NCTAAA and its subrecipients conduct webinars on the Agency's behalf.
- Working to bridge the divide between primary, acute, and long-term services and supports by engaging in targeted outreach to healthcare providers. Its outreach specialists have gathered contact information for primary care and specialty physicians (e.g., geriatricians and rheumatologists), hospital discharge planners, nursing facility social workers, and home health social workers; and the NCTAAA sends information about services that can benefit each provider's patients. For example, when providing information to primary care providers, it highlights services such as evidence-based programs (to improve patients' disease management), benefits counseling (to help patients access Medicare Savings Program benefits, thus reducing the practice's bad debt), and transportation (decreasing no-shows related to lack of transportation). When providing information to hospital discharge planners, it highlights services such as care coordination, caregiver support

coordination, transportation and in-home services. When providing information to nursing facility discharge planners, it highlights its Home by Choice relocation program (which helps arrange community-based housing and supports for residents with Medicaid) and ADRC options counseling program (which helps residents who are preparing for discharge put into place community-based services).

- Issuing press releases to raise awareness of NCTAAA and NCTADRC services.
- Participating in local health and information fairs to increase awareness of NCTAAA and NCTADRC services.
- Creating promotional materials to support specific services, as well as consolidated flyers that promote all services at a high level, and widely distributing through traditional venues (e.g., senior centers and home-delivered meal routes), as well as non-traditional venues (e.g., low-income housing communities). An example of a consolidated flyer appears below.

FREE Services for Older Adults and Family Caregivers



Services for older adults:

- home-delivered meals and congregate meals
- counseling
- transportation within the county
- help understanding Medicare benefits, plans, and applying for Medicare Savings Programs and Low-Income Subsidies
- short-term in-home services, equipment, and supplies
- workshops to avoid falls and manage chronic conditions
- help resolving complaints or concerns for people who live in nursing homes or assisted living facilities
- help arranging community-based services for people who want to leave rehabilitation facilities or nursing homes
- help arranging COVID-related services like rides to vaccination sites and in-home vaccinations



Services for caregivers of older adults

- respite care
- workshops on elder care and caregiving
- dementia care education and problem-solving
- short term in-home services, equipment and supplies
- information on how to find and pay for long-term care
- counseling, support groups and small-group workshops



Call 1-800-272-3921

or go to nctcog.org/aging-services for more information.

Funded in part by Texas Health and Human Services Commission.

FREE Services for People of All Ages with Disabilities and Family Caregivers



Services for people of all ages with disabilities

- help accessing in-home and other long-term care services
- help arranging COVID-related services like rides to vaccination sites and in-home vaccinations



Services for caregivers of people of all ages

- short-term respite



Call 1-800-272-3921

or go to nctcog.org/aging-services for more information.

Funded in part by Texas Health and Human Services Commission.

Key Topic Area 5: Caregiving

Enhance services and supports for caregivers.

State Goal 5

Promote and enhance activities that provide a coordinated system of services and supports for caregivers.

State Objective 5.1

Enhance awareness of caregiving services and supports.

Outcome 5.1

Increase awareness of caregiving services and supports.

AAA Strategies 5.1

The NCTAAA increases awareness of caregiver services and supports through a coordinated outreach strategy, detailed in the section entitled “Targeted Outreach Plan.” The strategy includes, but is not limited to, the following activities:

- Contracting with highly visible and accessible subrecipients for provision of Title III-E (i.e., caregiver) information, referral and assistance and caregiver information services. For example, it contracts with the Alzheimer’s Association—Dallas and Northeast Texas to support its Helpline. The Helpline is available around the clock, 365 days a year. Through this free service, specialists and master’s-level clinicians offer confidential support and information to caregivers. The NCTAAA also contracts with the Community Council of Greater Dallas, which serves as the Regional Information Center for the Texas Information and Referral Network. Its call-takers provide personalized resource information to family caregivers who call 2-1-1, with availability 24 hours a day and 365 days per year.

In addition to these agreements with subrecipients for Information, Referral and Assistance, the NCTAAA enters into agreements with several subrecipients for provision of caregiver information services. More specifically, it has agreements with two chapters of the Alzheimer’s Association (i.e., Dallas and Northeast Texas, and North Central Texas), the

Community for Permanent Supported Housing, Mascari Corporation, Maurice Barnett Geriatric Wellness Center, Meals on Wheels Senior Services, Senior Connect, and Z-Quest. These agencies extend the reach of the NCTAAA as it identifies caregivers and provides relevant, timely information. Their activities include conducting webinars and live training sessions and preparing and disseminating electronic newsletters.

Caregiver information services subrecipients are diverse in their missions and primary areas of expertise. For example, the Community for Permanent Supported Housing advocates for persons of all ages with all types of disabilities. Through its partnership with the NCTAAA, it assists the agency in reaching older caregivers of young adults with severe disabilities. The Alzheimer's Association helps the Agency better serve caregivers of persons with dementia. Meals on Wheels Senior Services' core mission is meeting older adults' nutritional needs, but it's widely recognized in Rockwall as the go-to agency for older adult and caregiver services. Mascari Corporation focuses on training and does an average of two webinars a week, with average attendance of more than 100.

- Participating in health fairs and other community events. Recognizing that 61% of caregivers are employed, the NCTAAA is conducting outreach to major employers' employee assistance programs. It is also stepping up its presence on social media, which is more likely to be utilized as a source of information by family caregivers than by older adults.
- Maintaining close communication with contractors and subrecipients and encouraging their qualified referrals. For example, it encourages the Alzheimer's Associations to make referrals for complementary services such as respite, care coordination, benefits counseling, and long-term care ombudsman services.

State Objective 5.2

Coordinate Title III caregiving efforts with the Lifespan Respite Care program.

Outcome 5.2

Increase awareness of caregiving resources within the state to ensure appropriate referrals and assistance is provided by the Lifespan Respite Care program.

AAA Strategies 5.2

The NCTAAA's primary work in support of this activity has focused on building awareness of caregiving resources within the North Central Texas region. However, it has also worked to build state awareness of caregiver (and older adult) resources, including Lifespan Respite Care. During the prior planning period, the NCTAAA engaged in activity that included the following:

- Conducting a webinar on Aging and Disability Resource Center (ADRC) services, including Lifespan Respite, for Adult Protective Services (APS) investigators throughout four Area Agency on Aging (AAA) service areas.
- Conducting a webinar on ADRC and Lifespan Respite for approximately 200 employees of a major accountable health organization with presence in several AAA service areas.
- Creating a publication entitled "Understanding Your Options for Services in the Community," with content on respite programs, including Lifespan Respite. The NCTAAA printed hard copies, posted on its website ([https://www.nctcog.org/getmedia/1fdbaa71-2cf1-401e-8db2-8ee2d05dbd3e/ServicesOptionsBooklet2022-\(003\).pdf](https://www.nctcog.org/getmedia/1fdbaa71-2cf1-401e-8db2-8ee2d05dbd3e/ServicesOptionsBooklet2022-(003).pdf)) and shared the publication with other AAAs and ADRCs, should they choose to customize and/or use as is.
- Assessing the needs of family caregivers and connecting them with services that may be helpful, including respite, through the NCTAAA's and NCTADRC's information, referral and assistance services.

State Objective 5.3

Coordinate with the National Technical Assistance Center on Grandfamilies and Kinship families.

Outcome 5.3

Increase coordination with AAAs, ADRCs, and providers with the National Technical Assistance Center on Grandfamilies and Kindship families.

AAA Strategies 5.3

The NCTAAA has not engaged with the National Technical Assistance Center on Grandfamilies and Kinship families. Rather, it has coordinated with state entities such as Texas Legal Services Center (which has prepared a Texas Kincare Primer)

and Texas Grandparents Raising Grandchildren. It has conducted a webinar on AAA services for older caregivers of minor grandchildren and young adults with severe disabilities.

State Objective 5.4

Monitor and implement recommendations from the Recognize, Assist, Include, Support, & Engage (RAISE) Family Caregiving Advisory Council and Advisory Council to Support Grandparents Raising Grandchildren.

Outcome 5.4

Increase coordination with AAAs, ADRCs, and providers with the National Technical Assistance Center on Grandfamilies and Kinship families.

AAA Strategies 5.4

Please refer to response to Outcome 5.3.

Section 9. Performance Measures

Complete Table 6. Performance Measures using *State Fiscal Year* (SFY) numbers.

Table 6. Performance Measures

Performance Measure	Actual SFY 2022	Projected SFY 2024	AAA Strategies
Number of unduplicated active certified Ombudsman	40	45	1.5
Number of unduplicated persons receiving Care coordination	454	420	1.6, 4.3
Number of unduplicated persons receiving legal assistance (age 60 and over)	12	25	3.2
Total care coordination expenditures	254,477	\$275,000	1.6
Average cost per care coordination client	\$560.52	\$655	1.6
Total legal assistance (age 60 and over) expenditures	\$1,374	\$8,000	3.2
Average cost per person receiving legal assistance	\$114.50	\$320	3.2
Cumulative number of visits to assisted living facilities by a certified Ombudsman	1,283	1,251	1.5
Total expenditures Ombudsman program (federal, state, other federal, program income, and local cash)	\$558,543	\$607,945	1.5
Unduplicated number of assisted living facilities visited by an active certified Ombudsman	265	270	1.5
Percentage of complaints resolved and partially resolved in nursing homes and assisted living facilities	68.0%	75.0%	1.5
Number of unduplicated persons receiving congregate meals	1,914	2,200	1.3, 3.1
Number of congregate meals served	115,655	130,000	1.3, 3.1
Number of unduplicated persons receiving home-delivered meals	5,998	6,000	1.3, 3.1

Performance Measure	Actual SFY 2022	Projected SFY 2024	AAA Strategies
Number of home-delivered meals served	907,782	650,000	1.3, 3.1
Number of unduplicated persons receiving homemaker services	88	85	1.2, 1.4
Number of unduplicated persons receiving personal assistance	51	50	1.2, 1.4
Number of homes repaired/modified (residential repair service)	147	120	1.2, 1.4
Number of one-way trips (demand response transportation service)	32,541	45,000	2.7
Total congregate meal expenditures	\$938,713	\$1,075,000	1.3, 3.1
Average cost per congregate meal	\$8.12	\$8.30	1.3, 3.1
Total home delivered meal expenditures	\$5,062,379	\$4,000,000	1.3, 3.1
Average cost per home-delivered meal	\$5.58	\$6.75	1.3, 3.1
Total homemaker services expenditures	\$88,498	\$85,000	1.2, 1.4
Average cost per person receiving homemaker services	\$1,005.66	\$1,000	1.2, 1.4
Total personal assistance services expenditures	\$64,228	\$65,000	1.2, 1.4
Average cost per person receiving personal assistance services	\$1,259.37	\$1,300	1.2, 1.4
Average cost per modified home (residential repair service)	\$1,419	\$2,000	1.2, 1.4

Section 10. Summary of Services

Legal References: 2020 OAA 306(a)(1), 306(a)(2), 306(a)(7); 26 TAC 213(C)(3)

Provided Services

Please refer to the [HHSC Services Definitions for Area Agencies on Aging Federal Fiscal Year 2023](#).

Table 7. Services To Be Provided During This Area Plan (FFY 2024 – FFY 2026)

Service Name (As of FFY 2023)	Provided During this Area Plan? Yes or No	Direct Service of AAA? Yes or No
Area Agency Administration	Yes	Yes
Assisted Transportation	No	n.a.
Care coordination (Case Management)	Yes	No
Caregiver Counseling	Yes	No
Caregiver Information Services	Yes	Both direct and contract
Caregiver support coordination (caregiver Case Management)	Yes	Yes
Caregiver Support Groups	Yes	No
Caregiver Training	Yes	No
Chore Maintenance	No	n.a.
Congregate meals	Yes	No
Data Management	Yes	No
Day Activity and Health Services	No	n.a.

Service Name (As of FFY 2023)	Provided During this Area Plan? Yes or No	Direct Service of AAA? Yes or No
Emergency Response	Yes	No
Evidence-Based Intervention (Health Promotion)	Yes	Yes
Health Screening and Monitoring (Health Promotion)	No	n.a.
HICAP Assistance	Yes	No
Home Delivered Meals	Yes	No
Homemaker	Yes	No
Homemaker - Voucher	Yes	No
Income Support	Yes	Yes through direct purchase of service
Information, Referral and Assistance	Yes	Both direct and contract
Instruction and Training	Yes	Both direct and contract
Legal Assistance – 60 years and older	Yes	Both direct and direct purchase of service
Legal Awareness (Legal Outreach)	Yes	Yes
Mental Health Services (Health Promotion)	Yes	Contract for Caregiver Counseling
MIPPA Outreach and Assistance	Yes	Both direct and contract
Nutrition Consultation	No	n.a.
Nutrition Counseling	No	n.a.
Nutrition Education	Yes	No
Ombudsman	Yes	Yes
Outreach	Yes	Both direct and contract
Participant Assessment – Access and Assistance	No	No
Participant Assessment – Nutrition Services	Yes	No

Service Name (As of FFY 2023)	Provided During this Area Plan? Yes or No	Direct Service of AAA? Yes or No
Personal Assistance	Yes	No
Physical Fitness (Health Promotion)	No	n.a.
Public Information Services	Yes	Both direct and contract
Recreation (Health Promotion)	No	n.a.
Residential Repair	Yes	Yes, through direct purchase of service
Respite In Home	Yes	Yes, through direct purchase of service
Respite Out of Home	No	n.a.
Respite Out of Home, Overnight	No	n.a.
Respite - Voucher	Yes	Yes, through direct purchase of service
Senior Center Operations	Yes	No
Social Reassurance	No	n.a.
Special Initiative	No	n.a.
Transportation	Yes	No
Transportation - Voucher	Yes	Yes, through direct purchase of service
Visiting	No	n.a.

Service Delivery Narratives

In this section, provide narrative descriptions for **all** services that are anticipated to be provided during this area plan period (FFY 2024 through FFY 2026). Please refer to Table 7 and include all services that were indicated as **Yes** in the column for: *Provided During this Area Plan?*

Describe each service using the “5 Ws and H” approach:

- What service is being provided in the PSA?
- Who is the targeted audience of the service within the PSA?
- Where will the service be provided in the PSA? (for example, the specific geographical area, facility or physical building, provided in-person and/or virtual, etc.).
- When will the service be provided in the PSA? Describe duration and frequency of the service.
- Why is it important to provide the service in the PSA? Describe unmet needs and barriers older individuals experience.
- How is the service being provided in the PSA? Include whether the service is contract, sub-recipient agreement or provided as a direct service. Identify service providers in the PSA and the counties served by each provider.

This section includes sub-headings to categorize similar services together. Although a service may fit into multiple categories, it is only required to provide a single narrative for that particular service. The sub-headings/categories begin on the next page and are as follows: AAA Administrative Functions; Case Management Services; Information and Assistance Services; Transportation Services; Nutrition Services; Legal Services; Caregiver Services; In-Home Services; Health Services (physical, mental and behavioral); Evidenced-Based Interventions (EBIs); and All Other Services To Assist Independence.

AAA Administrative Functions

The NCTAAA carries out its administrative functions under the Older Americans Act through a team of program and fiscal staff who work collaboratively to ensure that all services are delivered in compliance with relevant Agency, state and federal requirements. Administrative and fiscal team members and their areas of responsibility include the following:

- NCTAAA Director Doni Green, who is ultimately responsible for ensuring that all programmatic and fiscal requirements are met under NCTCOG's contract with HHSC. She has led the NCTAAA since 1996 and is funded in part by Title III Administration. Her salary is also supported by a contract with HHSC for Aging and Disability Resource Center services (ADRC), contracts with managed care organizations for nursing home relocation services, and a direct discretionary grant from the Administration for Community Living (ACL) for dementia services.
- Fiscal Manager Shanda Palacio, Certified Fraud Examiner, who is responsible for the financial management of Title III, ADRC and ACL funds. This includes the development and management of all budgets, analyzing and projecting spending patterns, overseeing the funding to subcontractors as well as all financial reporting. She has been with NCTCOG since 2017 and is funded mostly by Title III Administration.
- Senior Accountant Thanh Dai-Ti Vo, who reviews and approves Title III, ADRC and ACL expenditures. She also prepares funding agency financial reports and billing statements. She joined NCTCOG in 2021 and is funded in part by Title III.
- Controller Maggie Lira, CPA, who is responsible for reviewing and certifying Title III reports. She oversees the accounting system and related internal controls and policies and procedures. She is also responsible for the NCTCOG's annual audit, as well as required federal, state and Agency financial reporting. She has been with NCTCOG since 2007 and is funded in whole by sources other Title III.
- Senior Counsel Ken Kirkpatrick, who provides consultation regarding any legal issues and reviews and approves draft agreements between NCTCOG and other parties prior to issuance and/or execution. He has more than 25 years' tenure with NCTCOG is not funded by Title III.

- Procurement team members Craigan Johnson, Brent Moll, and Kristen Torres, who manage all competitive procurements for services purchased by the NCTAAA, as required by State or Federal law. Procurement team members are not funded by Title III.
- NCTAAA manager of data integrity Dena Boyd. She is responsible for providing technical assistance to subrecipients, ensuring accuracy of staff members' and subrecipients' program data, and performing subrecipient monitoring. She is fairly new to the NCTAAA, having joined its staff in early 2022, but has 30 years' related experience with another Area Agency on Aging. She is funded in full by Title III, under the service categories of Administration and Data Management.
- NCTAAA data management specialist Diane McCoy. She is responsible for entering data and performing quality assurance activities for direct service data, with primary emphasis on care coordination, caregiver support coordination, and services that may be authorized through care coordination or caregiver support coordination. She has been with the NCTAAA since 2008 and is funded in part through Title III under the service categories of care coordination, caregiver support coordination, and administration.
- NCTAAA contracts and vendors coordinator Roger Williamson. He has primary responsibilities of reviewing and approving in-home providers' invoices and entering program data into WellSky. He has been with the NCTAAA since 2019 and is funded in full by Title III, under the category of Administration.
- NCTAAA program assistant Christine Tran. She performs a broad range of program and fiscal duties for the NCTAAA, including supporting Regional Aging Advisory Committee meetings, reviewing and processing invoices for services purchased through the care coordination and/or caregiver support coordination services, and submitting reimbursement requests into the Agency's fiscal data base. She has been with the NCTAAA for 20 years and charges her time to Title III Administration, in addition to Title III direct service programs.

The NCTCOG's tenured team has effectively ensured compliance. Following its three most recent monitoring reviews by HHSC, it was issued reports that were without findings or observations.

Case Management Services

The NCTAAA administers three case management programs that are funded by Title III: care coordination (serving older adults), caregiver support coordination (serving caregivers of older adults), and older relative support coordination (serving people aged 55 and over who are providing uncompensated care to family members under the age of 60 who have severe disabilities, and people aged 55 and over who have primary custody of minors who are not their biological children).

All three case management programs provide a flexible bundle of purchased services that support independent living. Case managers conduct psychosocial assessments that identify consumers' wants, needs, and preferences. They use that assessment data to develop personalized care plans through which the NCTAAA arranges services at its expense that may include the following:

- **Health maintenance:** Common health maintenance services authorized by the NCTAAA include medical equipment and supplies not covered by insurance such as elevated toilet seats, shower chairs and transfer benches, incontinence supplies, and nutritional supplements such as Ensure and Boost.
- **Residential repair:** Most common types of repairs funded by the NCTAAA are construction of wheelchair ramps, widening of bathroom doorways, and installation of grab bars and handheld shower nozzles.
- **Income support:** NCTAAA case managers authorize Title III funds to pay consumers' utility bills and satisfy co-pays for medical services. They also authorize rental and mortgage payments on a limited basis.
- **Emergency response services:** The NCTAAA assumes the fees for installation and monitoring of devices that summon responders in the case of a fall or other medical emergency.
- **Agency-managed in-home services, including homemaker, personal assistance and respite:** The NCTAAA utilizes a competitively procured network of 12 service providers to help consumers maintain their households and meet personal care needs.
- **Consumer-directed in-home services, including homemaker voucher and respite voucher:** The NCTAAA provides consumers the option of selecting their own care providers, within broad parameters. For example, caregivers

may not use the vouchers to pay themselves or workers without Social Security numbers.

- Nutrition services: NCTAAA case managers make referrals to home-delivered meal and congregate meal subrecipients for ongoing provision of nutritionally balanced meals.
- Demand response transportation: NCTAAA case managers make referrals to transportation subrecipients for time-limited and on-going demand response transportation services.

All case management services are short-term by design. Their typical duration is three to five months. Since many consumers have on-going needs, case managers identify and help arrange long-term services such as Community Attendant Services (which provides in-home services to adults who have low incomes, limited resources, and need for assistance with personal care).

As of Spring 2023, the NCTAAA case management team consists of six full-time case managers: Cathy Stump (who serves as a working supervisor), Marsha Hayford, Angela Hill, Kim Marckmann, Isabel Maria, and Angela Powell. In addition, the NCTAAA utilizes two competitively procured contract case managers (Jayne Doyle and Kim Morgan) to expand capacity as needed by heavy volumes or staff vacancies.

Services are provided throughout the entirety of the 14-county area.

Since demand for case management services significantly exceeds available resources, the NCTAAA has developed screening criteria to ensure effective targeting of Older Americans Act priority populations and consistency in determining whether to accept or decline a referral. Depending on the availability of Title III funds, it may make the following criteria more or less restrictive.

The NCTAAA has five screening criteria for care coordination services. In Spring 2023, individuals must be at least 60 years of age and meet at least three of the five criteria below to qualify for care coordination.

- Has income of no more than 150% of the poverty level
- Has difficulty with two or more daily activities: walking, dressing, bathing, eating, grooming, toileting

- Has been in a hospital, ER, rehabilitation facility, or skilled nursing facility within the last several weeks (generally 2-4 weeks)/exhibits behaviors that pose danger to self or others
- Has a diagnosis of Alzheimer's disease, dementia, memory problems, or confusion, or chronic physical or mental illness
- Has no help from family or friends but may have paid provider through a state program

The NCTTAAA has six screening criteria for caregiver support coordination services. As of Spring 2023, caregivers must provide uncompensated care to a person who is at least 60 years old and meet at least three of the six criteria below to qualify for caregiver support coordination services.

- Cares for someone who has Alzheimer's disease/dementia, memory problems, or confusion
- Cares for someone who has difficulty with two or more activities of daily living; chronic physical or mental illness; and/or IDD
- Cares for someone who has been in a hospital, rehabilitation facility, ER, or skilled nursing facility within the last month/or has experienced significant decline in function
- Has had to cut back on work hours or activities because of care responsibilities, and/or has experienced physical/emotional problems because of care responsibilities
- Cares for someone who has no other help — either paid or unpaid
- Lives in the same house as the person receiving care

The NCTAAA has five screening criteria for older relative support coordination services. As of Spring 2023, caregivers must be at least 55 years of age and provide uncompensated care to a family member under the age of 60 who has severe disabilities or have primary custody of minor grandchildren and meet at least three of the five criteria below to qualify for older relative support coordination services.

- Cares for grandchild or child who is medically fragile or who has special needs
- Provides care to more than one person (i.e. grandchild, elderly family member, disabled adult)

- Has been in a hospital, rehabilitation facility, or nursing facility within the last several weeks (generally 2-4 weeks), and/or has experienced physical problems because of care responsibilities
- Cares for grandchild or adult relative who has no other help — either paid or unpaid
- Has income no more than 150% of the poverty level, not including the grandchild's or adult relative's income

Information and Assistance Services

Information and assistance services serve as the gateway to other Title III services. Often prospective clients aren't able to identify the specific services that would be helpful; they only know that they need help. Through information and assistance, NCTAAA staff and subrecipients ask a series of questions to determine callers' presenting and underlying needs and identify one or more services, both internal and external, that are responsive.

NCTAAA has one full-time staff person who's budgeted to information and assistance but assigns all office-based staff to serve as "phone buddy" and respond to incoming calls, thus increasing the likelihood that callers get live responders.

In addition, the NCTAAA relies on a network of local and regional subrecipients, selected through a Call for Projects, for information and assistance services. Subrecipients include the Community Council of Greater Dallas (as the Area Information Center), the Alzheimer's Association—Dallas and Northeast Texas Chapter, the Maurice Barnett Geriatric Wellness Center, and Senior Connect.

The NCTAAA is co-located with the North Central Texas Aging and Disability Resource Center (NCTADRC), and the two programs make frequent referrals to each other.

In addition to offering individualized information and referral, the NCTAAA supports caregiver information services. Its staff and subrecipients (including Alzheimer's Association—Dallas and Northeast Texas Chapter, Alzheimer's Association—North Central Texas, the Community for Permanent Supported Housing, Mascari Corporation, and Maurice Barnett Geriatric Wellness Center) provide education to family caregivers, through live and remote trainings. In addition, they perform support activities such as compiling resource information and participating in health and information fairs.

NCTAAA staff members are available to people who come to its office in need of information and referral. However, since it is located in a county it doesn't serve (i.e., Tarrant), the NCTAAA has little or no foot traffic (e.g., one or two walk-ins per year, for all services).

Transportation Services

The NCTAAA funds demand response transportation through a network of 11 subrecipients, one contractor, and UberHealth.

The Agency utilizes a Call for Projects (CfP) to create a regional network of transportation providers who are bound by subrecipient agreements to serve designated counties.

As of Spring 2023, the NCTAAA's transportation subrecipients and coverage areas are as follows:

- Meals on Wheels of Collin County: Collin County
- S.P.A.N.: Denton County
- Erath County Senior Citizens Services, Inc.: Erath County
- Hood County Committee on Aging: Hood County
- Senior Center Resources and Public Transit: Hunt County
- City of Cleburne: Johnson County
- Senior Connect: Kaufman, Ellis, and Rockwall Counties
- STAR Transit: Navarro County
- Public Transit Services: Palo Pinto and Parker Counties
- Somervell County Committee on Aging: Somervell County
- Wise County Committee on Aging

Subrecipients are required to provide transportation within the county and allowed to provide transportation outside of the county. They are required to give priority to medical transportation and allowed to provide other types of trips (e.g., to senior centers, grocery stores, and recreational/social activities) as their resources allow.

The NCTAAA recognizes that transportation within county boundaries is not always sufficient. Many older people, particularly those in remote portions of their counties or in medically underserved communities, must travel across county

boundaries to access vital services, including healthcare. For this reason, the NCTAAA supports a pilot program with The Transit System known as Senior Rides. Senior Rides serves age-eligible individuals who live in Hood or Somervell County and must travel beyond those counties for medical services, as well as those who live in contiguous counties (e.g., Erath) and must travel into Hood or Somervell for medical services. Since the Transit System serves as a contractor, rather than a subrecipient, an NCTAAA case managers authorizes riders and trips, using Title III revenues to cover riders' fares.

Despite significant increases in its funding of demand response transportation, there are ever-widening gaps between demand and supply. The NCTAAA remains committed to creative solutions. In early 2023 it established an account with UberHealth to support its COVID vaccination assistance programs and arrange trips to and from vaccination clinics for qualifying riders.

Nutrition Services

The NCTAAA undergoes competitive procurement, using a Call for Projects approach, to select providers of congregate meal and home-delivered meal services. Providers are classified as subrecipients, with responsibilities for the full range of program activities, including conducting outreach, determining eligibility, performing assessments, preparing meals or purchasing prepared meals from a supplier, and reporting program activity. The NCTAAA monitors subrecipients in accordance with its established procedures and provides technical assistance as needed.

The NCTAAA's provider network makes home-delivered meals available in the entirety of the 14-county service area. Congregate meals funded by Title III are available in 13 of its 14 counties. Palo Pinto County has a senior center that pulled out of the Title III congregate meal program due to unwillingness to comply with Older Americans Act regulations.

All NCTAAA meal providers are required to serve at least 250 meals per years. Some exceed that requirement, serving weekend meals as resources allow.

Congregate meals

NCTAAA Congregate Meal providers and coverage areas are as follows:

- Meals on Wheels of Collin County: Collin County
- S.P.A.N.: Denton County
- Meals on Wheels North Central Texas: Ellis, Johnson, and Navarro Counties
- Erath County Senior Citizens Services, Inc.: Erath County
- Hood County Committee on Aging: Hood County
- Senior Center Resources and Public Transit: Hunt County
- Senior Connect: Kaufman County
- Parker County Committee on Aging: Parker County
- Meals on Wheels Senior Services: Rockwall County

- Somervell County Committee on Aging: Somervell County
- Wise County Committee on Aging: Wise County
- Meals on Wheels of Tarrant County: serves residents from any North Central Texas county who travels to Tarrant County to attend a congregate meal program

Congregate meal services target older adults who are at nutritional risk but not homebound. To provide prospective consumers greater ability to participate, it funds demand response transportation that may include trips to and from senior centers. To provide prospective consumers greater incentive to participate, it funds senior center operations, with focus on innovative programming.

Home Delivered Meals

NCTAAA home-delivered meal subrecipients and coverage areas are as follows:

Subrecipients and their service areas are as follows:

- Meals on Wheels of Collin County: Collin County
- S.P.A.N.: Denton County
- Meals on Wheels North Central Texas: Ellis, Johnson, and Navarro Counties
- Erath County Senior Citizens Services, Inc.: Erath County
- Hood County Committee on Aging: Hood County
- Senior Center Resources and Public Transit: Hunt County
- Senior Connect: Kaufman County
- Meals on Wheels of Palo Pinto County: Palo Pinto County
- Parker County Committee on Aging: Parker County
- Meals on Wheels Senior Services: Rockwall County
- Somervell County Committee on Aging: Somervell County
- Wise County Committee on Aging: Wise County

Under its agreements for home-delivered meals, the NCTAAA binds subrecipients to providing services to eligible persons, regardless of location within their assigned counties. As a whole its provider network makes home-delivered meals available throughout the entirety of the North Central Texas service area.

Home-delivered meals target older adults with disabilities that result in difficulties shopping for food and/or preparing food. During times other than the Public Health Emergency (PHE), consumers must meet age requirements (i.e., be at least 60 years of age) and functional impairment requirements (i.e., score at least 20 on the Consumer Needs Evaluation). The functional impairment criterion was waived during the PHE, allowing those persons who sheltered in place to be considered homebound in order to qualify.

Legal Services

The NCTAAA provides unbiased consumer-specific information, classified as either Health Insurance Counseling and Advocacy Program (HICAP) assistance or legal assistance, and general information, classified as either HICAP outreach or legal awareness. In addition, it conducts Medicare Improvement for Patients and Providers Act (MIPPA) outreach and participates in the Senior Medicare Patrol Program. Following are general descriptions of each service.

- **HICAP assistance:** Certified staff benefits counselors Melinda Gardner, Simon Mannrique, Monique Snipe, and Felecia Warner provide personalized help to Medicare beneficiaries who have questions about Medicare-covered services or need assistance choosing Medicare supplements, Medicare Advantage Plans, or Part D prescription drug programs. In addition, they screen beneficiaries to see if they are presumptively eligible for Medicare Savings Programs (e.g., QMB, SLMB, and QI) and Low-Income Subsidies. As needed, they prepare and submit applications on callers' behalf.

Staff benefits counselors are complemented by certified benefits counselor volunteers, who have completed rigorous training by Texas Legal Services Center. Volunteers respond to callers when volumes exceed staff members' capabilities and help staff benefits counseling clinics held at senior centers.

- **Legal assistance:** Certified staff benefits counselors provide advice and counseling (e.g., administer Financial Fitness for Older Adults) to older adults, help complete documents, and/or advocate for those with consumer protection concerns. The benefits counseling program manager, Melinda Gardner, may authorize consultation with an attorney at the NCTAAA's expense for the purpose of preparing simple permanency planning documents (e.g., wills, Powers of Attorney and Directives to Physicians).
- **HICAP outreach:** Certified staff benefits counselors provide education on public entitlements, health and long-term care insurance, individual beneficiary rights, and health insurance planning and protection options. Their efforts are supported by certified benefits counselor volunteers, who may represent the NCTAAA at community events such as health and information fairs.
- **Legal awareness:** Certified staff benefits counselors conduct education on public entitlements, health and long-term care services, individual rights, planning and protection options, and housing and consumer needs.
- **MIPPA outreach and assistance:** Certified staff benefits counselors conduct community education on Medicare Savings Programs, Low Income Subsidies,

Part D, and preventive health benefits. In addition, they provide enrollment assistance.

- Senior Medicare Patrol: Funded by a special grant from the Better Business Bureau Education Foundation, the NCTAA's Senior Medicare Patrol informs Medicare beneficiaries how to detect and report Medicare fraud. Program manager Melinda Gardner coordinates the program, which offers both virtual and live education. She also coordinates Medicare Mondays, which consist of monthly webinars on various Medicare fraud-related topics.

Given the size of the service area, at more than 14,000 square miles, staff and volunteers usually assist consumers by phone. For consumers who are tech-savvy, the program offers virtual consultation via Teams.

To increase visibility of benefits counseling services, the NCTAAA participates in local health and information fairs, issues press releases, distributes program information at venues such as senior centers and libraries, mails out information to senior and low-income housing communities, and conducts presentations on Medicare and other public benefit programs. Most requests for presentations are received during Medicare Open Enrollment, when program call volumes are highest.

To increase accessibility of benefits counseling services, the program supports clinics that are held at Denton Senior Center (Denton County), Flower Mound Senior Center (Denton County), the Grove at Frisco Commons (Collin County), Hood County Senior Center (Hood County), and McKinney Senior Center (Collin County). Clinics are strategically located in the service area's two most populous urban counties (i.e., Collin and Denton) and an exurban county (Hood) contiguous to rural counties.

Certified benefits counselor volunteers are essential providers of telephonic, clinic, and outreach services. As of Spring 2023, the NCTAAA had 14 certified benefits counselor volunteers.

The Benefits Counseling program maintains close collaboration with the North Central Texas Aging and Disability Resource Center (NCTADRC). In most cases, the benefits counseling program assists callers with Medicare issues, and the ADRC assists callers with Medicaid issues. However, both programs' staff members have been cross-trained and have the ability to provide high-level information about other public benefits. Although NCTADRC staff are not required to become certified

benefits counselors, they are encouraged to undergo certification and participate in benefits counseling training opportunities that are relevant to their scope of work.

Caregiver Services

The NCTAAA administers the following services for family caregivers:

- Caregiver counseling: Subrecipient the Maurice Barnett Geriatric Wellness Center employs a master's level counselor who provides individual and group counseling to caregivers.
- Caregiver information services: The NCTAAA and subrecipients (including the Alzheimer's Association—Dallas and Northeast Texas Chapter, Alzheimer's Association—North Central Texas Chapter, Community for Permanent Supported Housing, James L. West, Mascari Corporation, CaregiverTransitions, Meals on Wheels Senior Services, the Senior Source, and Z-Quest) sponsor webinars and workshops, prepare electronic newsletters, and participate in health fairs.
- Caregiver support coordination: NCTAAA staff case managers assess the needs of family caregivers who meet the program's screening criteria and arrange temporary services that promote independent living. They authorize expenditure of Title III-E funds for purchase of health-related goods and supplies (under the service category of health maintenance), minor home repairs (under the service category of residential repair), leasing of emergency response devices, and temporary financial assistance (under the service category of income support).
- Caregiver training services: The NCTAAA funds three subrecipients to provide caregiver training services. The Community for Permanent Supported Housing provides transition counseling to older parents of young adults with severe disabilities. The Alzheimer's Association—North Central Texas Chapter administers the evidence-based Resources for Enhancing Alzheimer's Caregiver Health (REACH) program, which provides ongoing education and support. In addition, the Maurice Barnett Geriatric Wellness Center utilizes NCTAAA funding to sponsor Caregiver Circles and Memory Café.
- Respite: In-Home: The NCTAAA gives its caregiver support coordination clients in need of respite the option of receiving services from one of its competitively procured contract agencies. These agencies can provide housekeeping, personal assistance, or sitter/companion services.
- Respite Voucher: NCTAAA case managers give caregiver support coordination clients in need of respite the option of hiring their own

providers, as long as they are adults, have Social Security numbers, and don't currently live in the household. Clients who choose this option receive respite vouchers, through which the NCTAAA makes payment directly to the care provider.

In addition, the NCTAAA and its subrecipients (e.g., Alzheimer's Association—Dallas and Northeast Texas Chapter and Community Council of Greater Dallas) utilize Title III-E funding to provide information, referral and assistance to family caregivers.

In-Home Services

The NCTAAA authorizes in-home services for consumers of its care coordination and caregiver support coordination programs who have met Agency screening criteria, undergone a psychosocial assessment, express need for help in the home, and have approved plans of care. The frequency and intensity of services vary on the basis of client needs and available funding. The standard term of service is five months.

The NCTAAA's array of in-home services includes the following:

- Homemaker, providing assistance with household management tasks such as doing laundry, preparing meals, and shopping. As of April 2023, it has 12 agencies under contract for homemaker services.
- Homemaker vouchers, allowing the care coordination client the option of receiving homemaker services from a provider of her/his choice.
- Personal assistance, providing help with activities such as bathing, grooming, feeding, and toileting. In Spring 2023 it has 12 agencies under contract for personal assistance services.
- Respite, giving the caregiver support coordination client temporary relief from his/her duties. The NCTAAA utilizes 12 provider agencies, with ability to provide homemaker and/or personal assistance services, in addition to sitter and companion services.
- Respite voucher, authorizing the caregiver support coordination client to choose his/her own provider (within broad parameters).

The type of in-home service authorized by the NCTAAA is determined by both the staff case manager and the consumer, in light of the consumer's stated wants, needs and preferences and results of the Consumer Needs Evaluation (CNE). Homemaker services are intended for older persons who have difficulty managing their Instrumental Activities of Daily Living (e.g., ability to clean house, prepare meals, and shop) but do not require assistance with their Activities of Daily Living (e.g., transferring, walking, bathing, dressing, grooming, toileting and feeding). personal assistance services are intended for those who require help with their Activities of Daily Living, and the scope of work may include help with Instrumental Activities of Daily Living (e.g., shopping and preparing meals).

Respite services may include a combination of homemaker and personal assistance services, with the caregiver determining the scope of work (within program guidelines).

As noted above, the NCTAAA offers two service delivery methods: 1) relying on its contract agencies to provide services; and 2) allowing the consumer to choose his/her own care provider (within program guidelines), through issuance of homemaker or respite vouchers.

The NCTAAA considers in-home services as essential and strives to develop a comprehensive network of provider agencies that cover the entirety of the service area and provide depth of coverage to support consumer choice. This has been a difficult and costly undertaking as home health agencies have faced unprecedented challenges in recruiting and retaining direct service workers. In nearly all cases, agencies with adequate staffing have been compelled to increase workers' wages. Although the NCTAAA has no contractual obligation to renegotiate providers' reimbursement rates in the midst of their contract terms, it has done so upon request. It sees increasing direct service workers' wages as necessary to ensure coverage, while benefiting both consumers and providers.

Despite its willingness to increase providers' wages, the NCTAAA has portions of its service area with spotty coverage—particularly in more rural communities. Agencies that serve rural counties have smaller pools of jobseekers and higher costs in travelling to remote locations.

Homemaker and respite vouchers are helpful workarounds when formal providers have short staffing. On average, consumers who utilize vouchers receive more hours of assistance and are more satisfied with their providers, compared to those who receive services from NCTAAA contractors. However, not all consumers are able to find, train, and manage their own providers. Moreover, few have identified backups in case their chosen providers are unavailable.

Health Services (physical, mental, and behavioral)

Health is one of the most important domains of quality of life. As it promotes optimal health for older adults and family caregivers, the NCTAAA invests in the following physical, mental, and behavioral services:

- Nutrition services, including home-delivered and congregate meals. These two services are the NCTAAA's largest in terms of consumer enrollments and budget priority. Proper nutrition supports weight management, strengthens the immune system, optimizes cognitive performance, and reduces risk of chronic diseases such as heart disease, obesity, and dementia.
- Nutrition Education. Subrecipients administer the Determine Your Nutritional Health screening tool at least annually. On the basis of participants' responses, assessors provide individual education, using fact sheets that were developed by certified and licensed dietitians with Texas AgriLife.
- Evidence-based physical health programs, including Chronic Disease Self-Management, Diabetes Self-Management, and Chronic Pain Self-Management. Classes are held as a series of six workshops for small groups of participants, using structured curricula that cover using medications wisely, managing stress, evaluating new treatments, communicating with healthcare providers, and eating well. Participants learn to develop and implement action plans, with support from certified professional and lay instructors.
- Evidence-based fall prevention programs, including A Matter of Balance and Tai Chi for Arthritis and Fall Prevention. Classes are held as a series of workshops (eight for A Matter of Balance and 20 for Tai Chi) for small groups of participants. Participants learn to reduce fall hazards and improve balance and flexibility.
- Evidence-based mental health services through the Program Encouraging Active Rewarding Lives (PEARLS). Professional counselors under contract with the NCTAAA provide one-on-one support to older adults who are depressed or experiencing persistent sadness. Through the program, they help participants develop and implement action plans for meeting their physical, social, recreational, and emotional goals.

- Caregiver counseling through subrecipient Maurice Barnett Geriatric Wellness Center. A licensed master's level counselor provides individual and group counseling to caregivers of older adults.
- Health maintenance services, as authorized through the NCTAAA's care coordination and caregiver support coordination programs. Case managers purchase a wide range of services that meet consumers' needs such as incontinence supplies, durable medical equipment (e.g., elevated toilet seats and transfer benches), and nutritional supplements (e.g., Boost and Ensure).
- Residential repair services that eliminate barriers to independent living. As authorized by NCTAAA case managers, the Agency utilizes contractors to build wheelchair ramps, install grab bars, and widen bathroom doorways. In doing so they provide consumers greater access to vital community supports and improve in-home safety.
- Income support services that help consumers meet basic needs. NCTAAA case managers help pay bills for utilities, prescription medications, and various health care services, as indicated by a personalized plan of care.
- Emergency response services that summon help in the event of a medical emergency and ensure timely response. NCTAAA case managers lease the devices during the terms of consumers' care coordination or caregiver support coordination care plans.
- Caregiver information and caregiver training services provided by the NCTAAA and its subrecipients in order to educate and support family caregivers. For example, the NCTAAA funds two chapters of the Alzheimer's Association to facilitate support groups and provide consultation on dealing with caregiver stress. These services are not classified as behavioral health interventions but promote caregiver mental health.

Evidence-Based Interventions (EBIs)

The NCTAAA is an authorized license-holder for each of the following Evidence-Based Interventions and intends to offer all during the entirety of the planning period. It has been administering these programs as direct services for several years and submitted a waiver request to HHSC on 11/21/22 to continue doing so. At the time of plan submission (April 2023), the waiver is still pending.

- Chronic Disease Self-Management (CDSMP)

CDSMP classes are held as a series of six 2-1/2 hour workshops, held once a week for six consecutive weeks. Workshops are conducted for small groups of older adults and equip participants to engage in action planning for better health.

The classes target older adults with and without disabilities who have chronic disease of any type and wish to improve control. This is a broad population since approximately 95% of older adults deal with chronic conditions. By improving disease management, older adults can improve their health, function, and quality of life. At the macro level, improving disease management leads to cost savings.

Staff members Tina Dawson and Kim Mathis are certified CDSMP master trainers in good standing with the Self-Management Resource Center (SMRC). They are supported in that capacity by volunteer master trainer Ruby Watson. They have trained and support more than 20 certified lay leaders. Utilizing both staff and volunteers, the NCTAAA offers CDSMP at any venue in the North Central Texas region that is convenient for a critical mass of participants and instructors. In addition, the NCTAAA offers virtual CDSMP classes through Zoom.

During prior fiscal years, live CDSMP classes have been held in a number of venues, with senior centers, Texas Health facilities, Texas AgriLife offices, senior housing communities, and public libraries as the most common type.

- Chronic Pain Self-Management Program (CPSMP)

CPSMP classes are held as a series of six 2-1/2 hour workshops, held once a week for six consecutive weeks. They build on CDSMP as the base curriculum and add content specific to dealing with chronic pain. Workshops

are conducted for small groups of older adults and equip participants to engage in action planning for better pain control.

Chronic pain is a pervasive issue among older adults, with up to half experiencing chronic back and/or neuropathic pain. It increases risk of social isolation, substance use disorder, disability, and cost burden for health care providers.

Staff members Tina Dawson and Kim Mathis are certified CPSMP master trainers in good standing with SMRC. They have trained and support three CPSMP certified lay leaders. Utilizing both staff and volunteers, the NCTAAA offers CPSMP at any venue in the North Central Texas region that is convenient for a critical mass of participants and instructors. In addition, the NCTAAA offers virtual CPSMP classes through Zoom.

During prior fiscal years, live CPSMP classes have been held in a number of public and private venues, including Texas Health facilities, Savannah Homeowners Association Clubhouse (Denton County), Oak Grove Baptist Church (Kaufman County), The Center Christian Help Center (Kaufman County), Mabank Senior Gardens Apartments (Kaufman County), and Christian Community Action Center (Denton County).

- Diabetes Self-Management Program (DSMP)

DSMP classes are held as a series of six 2-1/2 hour workshops, held once a week for six consecutive weeks. They build on CDSMP as the base curriculum and add content specific to dealing with diabetes. Workshops are conducted for small groups of older adults and equip participants to engage in action planning for better glucose control.

Nationwide, approximately 25% of older adults have been diagnosed with diabetes, and an additional 50% meet the clinical guidelines for pre-diabetes. Common complications include kidney failure, and heart disease.

Staff members Tina Dawson and Kim Mathis are certified DSMP master trainers in good standing with SMRC. They have trained and support seven certified lay leaders. Utilizing both staff and volunteers, the NCTAAA offers DSMP at any venue in the North Central Texas region that is convenient for a critical mass of participants and instructors. In addition, the NCTAAA offers virtual DSMP classes through Zoom.

During prior fiscal years, live DSMP classes have been held in a number of public and private venues such as McKinney First Baptist Church (Collin County), Texas Health Resources Stephenville (Erath County), Texas Health Resources Cleburne (Johnson County), Texas Health Resources Azle (Parker and Tarrant Counties), Texas Health Resources Denton (Denton County), and Denton Independent School District Annex (Denton County).

- A Matter of Balance (AMoB)

AMoB is the NCTAAA's most established program. AMoB classes consist of eight two-hour workshops, held either once a week for eight consecutive weeks or twice a week for four consecutive weeks. Workshops are conducted for small groups of older adults who wish to reduce fall risk and/or their fear of falling. The target population is broad since falls are the leading cause of fatal and non-fatal injuries among older adults.

Staff members Tina Dawson and Kim Mathis are master trainers, and they are supported by 12 volunteers, including one volunteer who is a master trainer. The NCTAAA offers both live and virtual classes. Live classes have been held in a variety of settings, including Burleson Senior Center (Johnson County), Denton Senior Center (Denton County), East Cleburne Community Center (Johnson County), Texas Health Resources Willow Park (Parker County), Texas Health Resources Plano (Collin County), Medical City Plano (Collin County), Medical Center Lewisville (Denton County), Texas AgriLife Decatur (Wise County), Palo Pinto Senior Center (Palo Pinto County), Gardens of Mabank (Kaufman County), Commerce Public Library (Hunt County), Cowboy Church (Erath County), Dublin Public Library (Erath County), Inspired Living Denton (Denton County), Heritage Ranch (Collin County), Newsome Homes (Collin County), and Grand Reserve McKinney (Collin County).

- Program to Encourage Active, Rewarding Lives (PEARLS)

The NCTAAA launched PEARLS in the early part of the public health emergency in response to social isolation associated with sheltering in place. The program is intended for older adults who are dealing with depression or persistent sadness. This is a sizable population, with approximately 30% of older adults experiencing depression—although nearly half going undiagnosed.

The NCTAAA undertook a competitive procurement to enter into contracts with two PEARLS counselors: Dr. DeWanda Harris Trimiar and Kelli Wyatt-Mitchell. As authorized by the NCTAAA, PEARLS counselors conduct six to eight sessions, generally once a month for six months. In addition, they undergo monthly clinical supervision by staff at the Women's Center (whose services were also competitively procured).

The PEARLS program was designed to provide in-home counseling. However, the NCTAAA obtained authorization from the program developers (i.e., University of Washington) to administer the program telephonically. This adaption has allowed the NCTAAA to offer services to older persons throughout the entirety of the 14-county service area.

- Tai Chi for Fall Prevention and Arthritis (Tai Chi)

The Tai Chi program is the latest addition to the NCTAAA's suite of EBIs—and its most popular. The Agency filled its first few classes within a few hours of making them available. Tai Chi appeals to a wide swath of older adults, including those who are not dealing with chronic disease and wish to maintain their good health. Classes consist of 20 one-hour classes, held twice a week for 10 consecutive weeks.

As of early 2023, Kim Mathis had become a certified instructor, and five volunteers were on the pathway to certification.

The NCTAAA piloted Tai Chi at the Flower Mound Senior Center (Denton County) and intends to expand by bringing classes to senior centers, senior living facilities, and hospitals throughout the 14-county service area.

In addition, the NCTAAA has two agreements with the Alzheimer's Association—North Central Texas Chapter to administer the Resources for Enhancing Alzheimer's Caregiver Health (REACH) program. REACH assigns dementia educators to family caregivers. Over the course of six months, program staff provide information about the disease process and assist clients in responding to challenging behaviors such as wandering, agitation, and paranoia.

The NCTAAA utilizes Title III-E funds to support the program for English-speakers who live in Erath, Hood, Johnson, Palo Pinto, Parker, and Wise Counties. In addition, the Chapter serves caregivers in other North Central Texas counties on a case-by-case basis, with permission from the Dallas Chapter.

The NCTAAA utilizes an Alzheimer's Disease Program Initiatives (ADPI) grant to fund a second agreement with the North Central Texas Chapter, under which it provides REACH to Spanish-speakers in a 28-county area, including all of North Central Texas (including Dallas and Tarrant Counties) and East Texas. Hispanics have one and a half times the risk of developing dementia compared to non-Hispanic whites, and the NCTAAA and Association are committed to better serving this historically underserved population.

All Other Services to Assist Independence

The NCTAAA supports the following other services to assist independence:

- **Instruction and training:** Through subrecipient Mascari Corporation, the NCTAAA funds more than 50 training events per year on topics that include Mental Health First Aid, fair housing laws, the probate process, and services for people leaving rehabilitation facilities. On average more than 100 persons attend each live training event, which is recorded and uploaded to You Tube to reach a broader audience.
- **Participant assessment:** The NCTAAA reimburses nutrition subrecipients for conducting functional assessments of individuals who request meal services. In addition, it reserves the option to purchase in-home assessment data from its contractors when case managers find it necessary to supplement data they gather telephonically.
- **Public information services:** Through this service, NCTAAA staff, temporary employees, and contractors engage in broad outreach. They distribute Agency information to venues serving critical masses of older adults, make presentations on Agency services, and prepare and disseminate press releases and electronic newsletters.
- **Senior center operations:** To encourage older adults to return to senior centers that had been shuttered by COVID, the NCTAAA invited local centers to apply for funding of innovative programs and executed agreements with Erath County Senior Citizens Services, Inc., Hood County Committee on Aging, Senior Connect, and Somervell County Committee on Aging.

Section 11. Direct Service Waiver

Legal References: OAA 2020 307(a)(8); 26 TAC 213.155

To ensure compliance with the OAA direct service provision requirements and the state's approved state plan on aging, AAAs must request HHSC approval to provide Title III services directly. Please refer to the Method of Service Provision column in the [HHSC Services Definitions for Area Agencies on Aging Federal Fiscal Year 2023](#).

As per AAA Bulletin 22-02 AAAs Providing Services Directly (from November 04, 2022), the following services **do not** require HHSC approval:

- Case Management (care coordination and caregiver support coordination)
- Information and Assistance (Information, Referral and Assistance and Caregiver Information Services)
- Services directly related to the AAA's administrative functions (Area Agency Administration, Data Management, and Instruction and Training)
- Outreach (Legal Awareness, Outreach and Public Information Services)
- Legal Assistance services which are provided directly by a certified benefits counselor; and
- Ombudsman Services which are provided directly by a certified ombudsman.

Indicate (**yes** or **no**) whether the AAA will provide any direct service that requires HHSC approval during the effective period of this area plan (FFY 2024 through FFY2026). If **yes**, also indicate the direct service(s).

The NCTAAA intends to seek authorization from HHSC to offer the following as direct services:

- Evidence-Based Interventions (EBIs), to include: Chronic Disease Self-Management, Diabetes Self-Management, Chronic Pain Self-Management, and Tai Chi for Arthritis and Fall Prevention.

Direct Service Waiver Form 1

All area agencies on aging (AAAs) must complete a Direct Service Waiver form to request approval to provide supportive, in-home, or nutrition service as a direct service. A direct service is defined as a service activity provided to an eligible person performed directly by a AAA employee or volunteer.

Table 8. Direct Service Waiver Form 1

Topic	Response
Name of AAA.	North Central Texas
Identify the direct service being requested.	Evidence-Based Interventions (EBIs) that include Chronic Disease Self-Management, Diabetes Self-Management, Chronic Pain Self-Management, and Tai Chi for Arthritis and Fall Prevention.
Identify the time period for which the AAA will provide the direct service, not to extend past the effective period of this area plan.	The proposed waiver will be in effect for the entirety of the planning period (i.e., from October 1, 2023 – September 30, 2026).
Condition A: Provision of the direct service by the AAA is necessary to assure an adequate supply of such service.	Provision of the direct service by the NCTAAA is necessary to ensure an adequate supply of such service since no contractor has capacity to provide these EBIs in the entirety of the service area.
Condition B: The service is directly related to the AAA's administrative functions.	n.a.
Condition C: The service can be provided more economically, and with comparable quality, by the AAA.	n.a.
Specify the area(s) within the PSA for which the AAA will provide the direct service.	The NCTAAA will make EBIs available in the entirety of its service area, consisting of Collin, Denton, Ellis, Erath, Hood, Hunt, Johnson, Kaufman, Navarro, Palo Pinto, Parker, Rockwall, Somervell, and Wise Counties.

Direct Service Waiver Form 2

All area agencies on aging (AAAs) must complete a Direct Service Waiver form to request approval to provide a supportive, in-home, or nutrition service as a direct service. A direct service is defined as a service activity provided to an eligible person performed directly by a AAA employee or volunteer.

Table 9. Direct Service Waiver Form 2

Topic	Response
Name of AAA.	Enter text here
Identify the direct service being requested.	Enter text here
Identify the time period for which the AAA will provide the direct service, not to extend past the effective period of this area plan.	Enter text here
Condition A: Provision of the direct service by the AAA is necessary to assure an adequate supply of such service.	Respond with yes or no If yes, enter an explanation
Condition B: The service is directly related to the AAA's administrative functions.	Respond with yes or no If yes, enter an explanation
Condition C: The service can be provided more economically, and with comparable quality, by the AAA.	Respond with yes or no If yes, enter an explanation
Specify the area(s) within the PSA for which the AAA will provide the direct service.	Enter text here

Direct Service Wavier Form 3

All area agencies on aging (AAAs) must complete a Direct Service Waiver form to request approval to provide a supportive, in-home, or nutrition service as a direct service. A direct service is defined as a service activity provided to an eligible person performed directly by a AAA employee or volunteer.

Table 10. Direct Service Waiver Form 3

Topic	Response
Name of AAA.	Enter text here
Identify the direct service being requested.	Enter text here
Identify the time period for which the AAA will provide the direct service, not to extend past the effective period of this area plan.	Enter text here
Condition A: Provision of the direct service by the AAA is necessary to assure an adequate supply of such service.	Respond with yes or no If yes, enter an explanation
Condition B: The service is directly related to the AAA's administrative functions.	Respond with yes or no If yes, enter an explanation
Condition C: The service can be provided more economically, and with comparable quality, by the AAA,	Respond with yes or no If yes, enter an explanation
Specify the area(s) within the PSA for which the AAA will provide the direct service.	Enter text here

Section 12. Data Use Agreement

The NCTAAA has developed extensive policies and procedures by which it satisfies the terms of its data use agreement with HHSC. These policies and procedures, available upon request, designate an Information Security Officer and Privacy Official who share responsibilities for successful implementation. The policies and procedures describe ways in which the NCTAAA obtains informed consent from clients, limits disclosure to those with need to know, secures physical records, secures electronic records, trains all users, maintains a breach protocol, allows clients to review and correct their confidential information, posts its privacy notice, and maintains sanctions and penalties on individuals who violate its policies. The NCTAAA was one of the state's first Area Agencies on Aging to undergo HHSC monitoring of its data use agreement, which resulted in an absence of findings or observations.

NCTCOG, as its host organization, invests heavily in internet security and employee training. It delivers cybersecurity awareness training through Proofpoint, and employees are required to complete four online training modules per year that cover topics such as malicious e-mail attachments, malicious URLs, and proper handling of PII and PHI. In addition, NCTCOG delivers monthly simulated phishing attacks through Proofpoint to gauge employees' ability to identify and avoid real attacks.

In addition, all NCTCOG new hires participate in an orientation that covers the Agency's cybersecurity policy, password security, data encryption, and other cybersecurity topics.

The NCTAAA requires all of its subrecipients who collect and/or store Personally Identifiable Information of Protected Health Information to execute a Data Use Agreement. Under the terms of that Data Use Agreement, subrecipients are required to develop and implement their own policies for safeguarding client data. In the event of a data incident or breach, they are required to timely notify the NCTAAA.

Section 13. Disaster Plan

Legal References: OAA 2020 306(a)(17) and 307(a)(17); 26 TAC 213.11 and 213.151

Aging Services Disaster Plan

The Director of Aging Programs has responsibilities for updating the agency's disaster plan at least annually and coordinating its implementation.

The NCTAAA disaster plan focuses on the specific needs of older adults and persons with disabilities who may be affected by disasters. Its sections include: Situation and Staffing (with subsections on agency description, critical functions, concept of operations, staff emergency contact information, subrecipients' emergency contact information, staff report-in procedures, and reimbursement of expenditures in emergency situations), Incident Command Structure (with subsections on aging services emergency responsibilities by position, and job descriptions for the positions of incident commander, logistics personnel, operations personnel, administration—finance, and public information officer), Activation of the Emergency Plan (with subsections on checklist, call-down list, building safety and evacuation, alternative site relocation, alternative communications plan, and data/record maintenance), Hazard Analysis (with subsections on tornado, hail, high wind, winter storm, summer heat, flooding, wildland fires, and nuclear power plant malfunction), Plan Development and Maintenance, and Authentication.

The NCTAAA contractually binds its subrecipients for nutrition and transportation services to develop disaster plans, describing restorative actions they will take in the event of a disaster.

A copy of the NCTAAA Emergency Operations Plan is available upon request.