

## A. Outreach

### (IDAPA 15.01.21.022)(OAA.Section.207. (c) (1-5))

Outreach is for the purpose of identifying potential older consumers and/or their caregivers, and encouraging their use of existing services and benefits. (Title III and VII Report Requirements).

Like Information and Assistance, Outreach is a one on one contact between a service provider and an elderly client (or family caregiver. Outreach efforts are focused on identifying those older persons who have the greatest economic or social need, with particular attention to low-income minority elderly, elderly living in rural communities, and severely disabled elderly. (IDAPA 15.01.21.022.01).

Outreach methods are re-evaluated on a quarterly basis and changes in AAA Outreach strategy are made as need indicates. AAA success in reaching those older individuals having greatest economic or social need, especially low-income minority elderly, elderly living in rural communities, and severely disabled elderly, is primary. (IDAPA 15.01.21.022.02).

Most often, successful Outreach occurs through community partners who are serving an elder and/or family caregiver through non-traditional OAA/SSSA services like Energy Assistance, Weatherization, Housing and homeless senior assistance.

It is important to note that Outreach is not the same as AAA marketing or community presentations. Outreach, by intention, is a one-on-one contact between an AAA staff member and an elderly client or caregiver. An activity that involves contact with multiple current or potential clients or caregivers (e.g., publications, publicity campaigns, and other mass media activities) should not be counted as a unit of service. Such services might be termed public information and reported on the public information category.” (Title III and VII Report Requirements).

#### 1. Provide a quantitative and qualitative analysis identifying how needs for the above service were assessed.

##### Qualitative Analysis:

Despite an ever increasing effort to provide information to those elders with the greatest economic or social need through one-on-one outreach contacts, the statewide qualitative analysis indicates that a large percentage of elders are still not receiving available support.

- There were 405,237 units of outreach provided nationwide in FY 2011 (Administration on Aging FY 2011 Report to Congress).
- According to the 2012 Boise State University Statewide Needs Assessment Survey, 85% of older Idahoans report that they do not receive support from their community or through community services. As this population continues to age in uncertain economic times, the importance of access to community supportive services will increase.

Quantitative Analysis:

	Clearwater Co.	Idaho Co.	Latah Co.	Lewis Co.	Nez Perce Co.
# of Contacts FY 2012	617	617	452	550	8,035
# of Contacts FY 2013	947	856	717	679	9,102

The number of outreach contacts increased from FY 2012 to FY 2013 in all five counties in PSAll. The greatest increase was seen in Latah County (59%), while the smallest increase (13%) was seen in Nez Perce County (SAMS).

According to 2010 Census data and the SAMS database, the percentage of the total elder population being served by the Area Agency on Aging in PSAll increased slightly in two counties and remained the same in the other three counties.

	Clearwater Co.	Idaho Co.	Latah Co.	Lewis Co.	Nez Perce Co.
Residents 60+ 2010 Census	2254	4048	5125	1025	9024
# Served FY 2012(SAMS)	539	827	550	504	1357
Percentage of Population 2012	24%	20%	11%	49%	15%
# Served FY 2013 (SAMS)	546	872	584	500	1434
Percentage of Population 2013	24%	22%	11%	49%	16%

The statistical trend at the local level is reflective of the trend found in the qualitative analysis. Increased efforts in outreach are resulting in an increase in the number of clients availing themselves of needed services, however a great number of the elder population in PSA II do not receive support from community services.

**2. How does the AAA support the above program in the PSA?**

A. Based on identified OAA services, one on one 60+ Outreach contacts are reported to the AAA by social service programs like CAP CSBG, Weatherization Intake and Service and Housing staff, AAA providers, regional hospital staff, and, Region II Center for Independent Living, Disability Action Center staff.

B. AAA staff will conduct one on one Outreach to referred consumers.

- C. AAA will create an Outreach Service Delivery in SAMS based on the one on one Outreach contact.
- D. Identified Outreach service delivery by consumer in SAMS will be compared to actual information and service realized by consumers. Out of the eligible consumers who received AAA Outreach, the AAA will track the number of consumers who obtained OAA services.
- E. AAA staff will also have the ability to complete Outreach Service Delivery in the I&R Call Log *after completing a one on one contact*.

3. Specifically address activities and funds that are being used to support these activities.

Effective FY2017, July 1, 2016 – June 30, 2017, the AAA will fund OAA Outreach from its Title IIIB funds. The AAA anticipates expending \$8,000.00 in AAA staff support. Activities include but are not limited to:

- 1) Establishing one on one contact with elders and/or family caregivers who fall within the AAA target population who access Community Action Partnership programs like Energy Assistance, Weatherization, Housing Assistance and Community Services, i.e. regional foodbanks;
- 2) Establishing one on one contact with elders and/or family caregivers who fall within the AAA target population known to Disability Action Center, the regional Center for Independent Living;
- 3) Establishing one on one contact with elders and/or family caregivers who fall within the AAA target population who access acute care hospitals;
- 4) Establishing one on one contact with elders and/or family caregivers who fall within the AAA target population who become known to the AAA by other traditional and non-traditional sources.

**Update: Goals, Objectives, Strategies, Measures and Baselines**

<b>ICOA Goal 1: Improve opportunities to access up-to-date community resources addressing health and long-term care options for Idahoans.</b>	
<b>ICOA Objective 1: Increase outreach efforts to target population.</b>	
<b>AAA Strategy 1:</b> Partner with entities like community hospital discharge planners, Nez Perce Tribe, Idaho Assistive Technology, Idaho Commission for the Blind, CHAS Clinic, rural medical clinics, Snake River Clinic, Disability Action Center (DAC) and Community Action Partnership (CAP) to identify and market ways for older individuals residing in rural areas to access OAA & SSSA services.	<p><b>Baseline:</b> 1. Human service organizations refer to the AIIAA. 2. Hospitals rarely refer consumers to the AIIAA.</p> <p><b>Measure:</b></p> <ul style="list-style-type: none"> <li>• Track Outreach referral sources of consumers to the AAA.</li> <li>• Increase hospital Outreach referrals to the AAA.</li> </ul>

	<ul style="list-style-type: none"> <li>• Provide at least annual informational presentations on OAA/SSSA services to key staff at partner organizations.</li> </ul>
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**ICOA Objective 3: Improve the collection and distribution of resource information on the ADRC website and local AAA offices.**

<p><b>AAA Strategy 2:</b> Rotate OAA program description and highlights on a monthly basis in community presentations, on the CAP/AIIAA Website and social media site.</p>	<p><b>Baseline:</b> CAP/AIIAA has not had access to directly manage the AIIAA website, however, by FY2017 the AIIAA will have direct access. The CAP Facebook page does not feature OAA and/or SSSA program.</p> <p><b>Measure:</b></p> <ul style="list-style-type: none"> <li>• Community presentations for all programs will include monthly feature program highlight, as will CAP/AIIAA website and Facebook page.</li> <li>• Consumer participation for target population will increase by 20%.</li> </ul>
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**ICOA Objective 2: Increase volunteerism to support long-term care and home and community based services.**

<p><b>AAA Strategy 1:</b> CAP/AIIAA volunteers are recruited, trained, certified and recognized for their contribution to enhancing the quality of life for elders and people living with disability.</p>	<p><b>Baseline:</b> AAA currently has a very strong and dedicated established volunteer Corps of over 40 volunteers who trained and certified serving in the Volunteer Ombudsman, chronic disease self-management, RCI-REACH and Senior Medicare Patrol/SMP programs.</p> <p><b>Measure:</b></p> <ul style="list-style-type: none"> <li>• CAP/AIIAA will employ a part-time Volunteer Program Coordinator to assure that volunteerism remains strong and grows by at least 5%.</li> </ul>
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**ICOA Objective 4: Increase health promotion and disease prevention outreach through materials and education.**

<p><b>AAA Strategy 1:</b> Rural communities will receive health promotion and disease prevention education and support.</p>	<p><b>Baseline:</b> CDSMP and RCI-REACH is offered in Nez Perce and Idaho Counties..</p> <p><b>Measure:</b></p> <ul style="list-style-type: none"> <li>• Evidenced based health education and caregiver support will be offered through community partnerships throughout the PSA.</li> </ul>
<p><b>AAA Strategy 2:</b> Resources and partnerships that provide regional nutrition education and counseling are identified on</p>	<p><b>Baseline:</b> The CAP website provides consumer access to food, nutrition and education through programs like, Home Delivered and Congregate Meals and foodbanks.</p>

<p>the CAP website and social media sites to enhance participation of low-income elders including minority, limited English proficiency individuals and individuals with Alzheimer’s and their caregivers.</p>	<p><b>Measure:</b></p> <ul style="list-style-type: none"> <li>Identify community meal programs, especially in rural communities, that stand to enhance nutrition and socialization for elders and family caregivers.</li> </ul>
<p><b>ICOA Objective 3: Increase public outreach to recognize and report signs of elder abuse, neglect and exploitation.</b></p>	
<p><b>AAA Strategy 1:</b> Partner with rural health care partners who provide care, education and outreach to the public concerning high risk older adults to include awareness of all OAA and SSSA programs, highlighting signs and symptoms of elder abuse, neglect and exploitation.</p>	<p><b>Baseline:</b> Organizations like Assisted Living Facilities, rural medical clinics and rural hospitals provide support and outreach to family caregivers. The AIIAA does not always identify the source of referrals to AP, specifically as linked to a rural health care partner.</p> <p><b>Measure:</b> The AIIAA will identify the source of referrals to AP from rural health clinics, hospitals, support groups, etc.</p>