

DENVER REGIONAL COUNCIL OF GOVERNMENTS

AREA PLAN ON AGING

**OLDER AMERICANS ACT AND STATE FUNDING FOR SENIOR SERVICES
SUA POLICY DIRECTIVE - 18-05**

**STATE FISCAL YEARS 2020-2023
(JULY 1, 2019 TO JUNE 30, 2023)**

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SECTION I: EXECUTIVE SUMMARY

This is an exciting time in Colorado for aging, as AARP recently identified our state as just the nation's third "Age-Friendly State". The Governor appointed a committee to work on aging issues called the Strategic Action Planning Group on Aging, and Colorado has its first ever Senior Policy Advisor on Aging in the Governor's cabinet. The academic communities in our state have joined together in a collaboration called CoCare to advance research and education in aging. It is becoming big business in the state, and individuals, academic institutions and private businesses understand that there are needs and a market in the aging population. There are many innovative ideas and technological solutions being developed to help people as they age. New companies are emerging, and more products and services are being offered in the state. All this attention on aging has been helpful to the network of Area Agencies on Aging (AAA) in Colorado and in the nation. More people understand and value the service AAAs provide.

Established in 1974, the Denver Regional Council of Governments (DRCOG) Area Agency on Aging has been helping people age better and live as independently as possible by funding community services, providing direct services, advocating for older adults and their caregivers, and planning and preparing for an aging population.

The DRCOG Area Agency on Aging is the largest in the state of Colorado. It serves older adults and people with disabilities in the counties of Adams, Arapahoe, Broomfield, Clear Creek, Denver, Douglas, Gilpin and Jefferson. This region includes 47 percent of the state's older population, encompasses over 4,000 square miles, and is a unique blend of urban, suburban and rural communities that many nationalities and ethnic groups call home.

The DRCOG AAA makes it possible for older adults and people living with disabilities to "age in place" with dignity by providing a range of services that allow them to live independently in their homes and communities. The AAA also serves people living in the more than 490 nursing homes and assisted living residences in the region. A key role of the AAA is also advocacy, as the AAA helps ensure that lawmakers and others are aware of the needs of older adults and their caregivers, the benefits of community-based services and the taxpayer cost of failing to address the needs in the region. As the regional planning entity on aging, the AAA is responsible for identifying the needs of older adults, identifying gaps in services, and working with community partners to address the service gaps in the region.

The *Area Plan on Aging* guides the work of the DRCOG Area Agency on Aging for the next four years. It reflects the needs of our region, highlights our service goals and demonstrates outcomes, strategies and measures that will be used to evaluate progress and the success of our work.

The goals of the DRCOG Area Agency on Aging are to:

- Administer the programs of the Older Americans Act
- Provide and fund community-based services that promote independence
- Advocate for legislative and regulatory changes that improve the lives of older adults, people living with disabilities, and their caregivers
- Gather data, analyze trends, and share information to help local governments and community partners plan and serve an aging population

The *Area Plan on Aging* also highlights key trends in the region, including:

- Demographic changes in our region
- Need for more transportation, housing options, food security and in-home services
- Workforce challenges and the effects
- Underserved areas in the region and service gaps

During the next four years, DRCOG will focus on the following:

- Increase availability and access to supports and services for older adults
- Expand and diversify the AAA revenue base
- Improve transportation services and access to older adults in the region
- Increase support to caregivers
- Work with and support population health efforts in the region
- Increase access to food and nutrition services
- Support people with advanced illness
- Continue to educate and advocate for the needs of older adults and their caregivers at the legislative and regulatory level.

SECTION II: PUBLIC INPUT

Public input is essential in understanding how the AAA services are being used, how effective they are, and what services are needed in the region to help people age better. To obtain public input on these topics, in 2018 DRCOG conducted a Community Assessment Survey of Older Adults (CASOA), held 10 Community Conversations and 10 Key Informant Sessions. Below are summaries of responses from the Community Conversations and Key Informant Sessions. Results from the CASOA survey can be found in Section IV of this document.

Community Conversations Responses

The following questions were asked at the 10 Community Conversations held throughout the region that were attended by seniors living in the community. Responses to the questions are summarized below and are listed in general order of frequency.

What three things help you age successfully?

- Friends and family
- Good nutrition
- Access to good health care including doctors and health insurance
- Positive attitude
- Purpose
- Aging in place
- Pets
- Transportation
- Home maintenance
- Exercise
- Having enough money
- Social activities
- Affordable and accessible housing
- Chore services
- Doing what you want when you want
- Getting snow plowed
- Dependable low-cost services in community
- Low-cost car repair

“I depend so much on my kids, I don’t know what I would do without them”

- *Community Conversation participant, Littleton*

What are your biggest challenges now?

- Transportation
- Good health care
- Good nutrition
- Places to live independently and assisted living
- Food service
- In-home assistance
- Home and yard work (shoveling snow)
- Larger home maintenance (painting, plumbing, repairs)
- No Medicaid assisted living available
- Housing
- No family around
- Understanding resources
- Cost of daily needs
- Phone fraud
- Water bills

“I eat at McDonald’s off the dollar menu but my doctor says I need to eat more healthy, it is expensive to eat healthy and you have to cook.”

- *Community Conversation participant, Southwest Improvement Center*

What are three services that you think you will need in the future to age successfully?

- Transportation
- Health care
- Financial security/assistance
- Quality housing
- Affordable housing
- Hearing aids and batteries
- Vision care and glasses
- Dentures and dental care
- In-home services
- Advocates and navigators
- Education opportunities
- Social activities
- Technology and training
- Help finding available services
- House cleaning/yard service
- Access to good doctors
- Good insurance
- Increase in Social Security benefits
- Nutrition/meals/help preparing meals
- Support when family is gone
- Trustworthy people to work for me

How do older adults get where they need to go in your area?

- Drive
- Family and friends
- Bus
- Van
- Walk
- Paid driver
- Bike
- Hitchhike

What happens to people that you know when they stop driving?

- Don't see family
- Really have to scramble to find transportation when needed
- Less activity
- Become lonely
- Become isolated
- Sometimes depressed
- Rely on family
- Need more in-home resources
- Loss of independence
- No social life
- Experience anxiety
- No one reaches out

“You lose your independence and your dignity when you can't drive anymore – your whole life changes.”

-Community Conversation participant, Idaho Springs

What other services are needed in this area for older adults?

- Good health care
- More doctors (Adams, eastern plains, Douglas, Gilpin, Jefferson)
- Affordable trustworthy home maintenance (particularly prominent in Clear Creek, the eastern plains, Englewood, Gilpin, and Denver)
- Affordable chore service (yard work, snow shoveling, heavy house work)
- Mobile veterinary service
- Dementia care (in-home and adult day)
- Caregiver support, training and education
- Financial services
- Place to exercise
- Podiatry service

What is the best thing about aging?

- Do what you want to when you want to
- Don't have to work
- More time
- I'm happier
- I know how to deal with stress better, I'm less stressed
- I have a lot of experience in life
- I am proud that I have survived so much and I'm not afraid to die

“I have been a caregiver most of my life My mom was sick when I was young, I took care of her and my siblings, then my dad, my kids, my husband, my aunt, two of my closest friends. I miss them but I'm glad that part of my life is over.”

- *Community Conversation participant, Clear Creek County*

Key Informant Sessions

The following questions were asked at the 10 Key Informant Sessions. Key informants were comprised of professionals in aging, members of county councils on aging, and older adults that are leaders in their communities. Responses to the questions are summarized below and are listed in general order of frequency.

General Questions

WHAT DOES SUCCESSFUL AGING LOOK LIKE?

- Healthy
- Activities
- Independent
- Available services
- Financially solvent
- Appropriate level of health care coverage
- Transportation
- Access to medical care
- Being engaged
- Navigating information
- Mental health
- Social engagement
- To be valued
- Safety in community
- Planning (financial, medical, advanced directive)
- Fraud prevention and help
- Hearing and visual aids
- Support for caregivers
- Dementia-inclusive communities
- Ability to utilize resources
- Self determination

WHAT SERVICES ARE CRITICAL TO HELPING PEOPLE AGE SUCCESSFULLY IN YOUR COMMUNITY?

- Better access to health care services
- More mental health services
- More community services that come into home
- Transportation
- More services outside of the metro area
- A way to identify, reach and serve those who are shut in
- More senior centers
- Walkable communities
- Outreach and regular check ins with those who are isolated or shut in
- Technology that promotes independence and affordable
- Employment opportunities
- Scam and fraud prevention
- Affordable, appropriate housing
- Affordable home modification

- Therapy service in general especially in home is needed
- Assistance in getting medications
- Chore services (snow removal, yard work)
- Better cell phone service – so can use telemedicine
- More affordable services like handyman, plumbers, home modifications

WHAT DOES YOUR COMMUNITY DO TO HELP PEOPLE AGE SUCCESSFULLY?

- The Douglas H. Buck Center – classes, health clinics, place to exercise and socialization
- Light rail
- Transportation – community circular bus
- Services for older adults at libraries
- Free legal clinic on Fridays at Bemis Library in Littleton
- Subsidize senior transportation in county (Adams, Broomfield, Clear Creek, Douglas, Jefferson)
- Aurora Center for Active Adults
- Elder abuse task force
- Home delivery services
- Volunteers (A Little Help, Seniors' Resource Center, Volunteers of America were mentioned)
- Free medical alerts
- Gilpin County Human Services and recreation center offer classes, exercise, outings, transportation, in-home meal delivery.
- Neighbor Network provides services, support, transportation
- Counties fund services of older adults

Age-specific Questions

The DRCOG Area Agency on Aging provides services to older adults starting at age 60 and our older clients are 100-plus. Participants of the Key Informant Sessions were asked about the needs of older adults in different age ranges. Responses to the questions are summarized below and are listed in general order of frequency.

WHAT DO PEOPLE BETWEEN 60 AND 70 NEED MOST TO AGE SUCCESSFULLY?

- Access good health care
- Prevention service
- Community health fairs (like Channel 9 Health Fair)
- Information
- Caregiver support (parents, grandkids)
- Employment opportunities
- Volunteer opportunities
- Benefit information and support
- Financial planning
- Life planning
- Home maintenance
- Retirement transition services
- Pay equity
- Housing transitions

WHAT DO PEOPLE BETWEEN 70 TO 80 NEED MOST TO AGE SUCCESSFULLY?

- Affordable housing options
- Resource management and counseling
- Benefits counseling
- Caregiver support (spouse, parents, kids, grandchildren)
- Transportation (especially at night)
- Activities
- Increase in Social Security
- In-home services
- Chore services (yard work, snow shoveling, house work)
- Telehealth
- In-home tech support

WHAT DO PEOPLE BETWEEN 80 AND 90 NEED MOST TO AGE SUCCESSFULLY?

- Nutrition services
- In-home health care
- In-home services
- Chore services
- Transportation

- Quality long-term care facilities (especially assisted living that accepts Medicaid)
- Advance directives
- Support for caregivers
- Social connection
- Sense of value
- Isolation prevention
- Mental health
- Companionship
- In-home monitoring

“People don’t notice you when you are old, they look right through you. It makes me feel like I don’t matter.”

- *Community Conversation participant, Englewood*

WHAT DO PEOPLE OVER 90 NEED TO AGE SUCCESSFULLY?

- Quality professional caregivers
- In-home care and services
- Good nutrition and meal assistance
- Quality long-term care options
- Coordinated medical and mental health
- Transportation
- Advanced directives and end-of-life planning
- Not to be forgotten
- Pain management
- Palliative care
- Support for family
- Benefits counseling

SECTION III: DEMOGRAPHICS

The DRCOG AAA planning area covers more than 4,000 square miles. The following demographic information describes the important features of our region that influence the work of the AAA. Note that the “Denver region” refers to Adams, Arapahoe, Broomfield, Clear Creek, Denver, Douglas, Gilpin and Jefferson counties. All data is from the 2017 ACS Five-Year Estimates and Department of Local Affairs estimates and forecasts (December 2018).

Key Demographic Characteristics

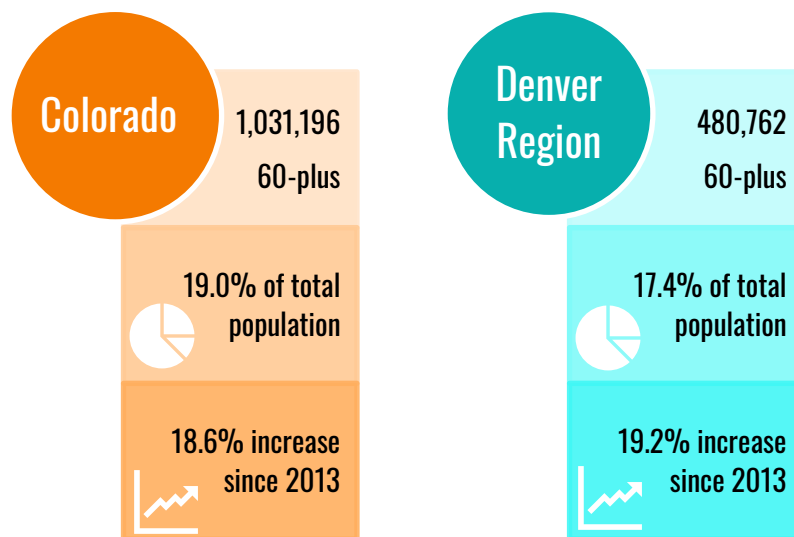
Total Population

The regional population of 2.75 million accounts for just over half of the state’s population. The region is growing at a faster rate than the rest of the state. Since 2013, the region’s population has increased at a rate of 7.6 percent compared to a 6.2 percent population increase for the entire state.

Population 60 and Over

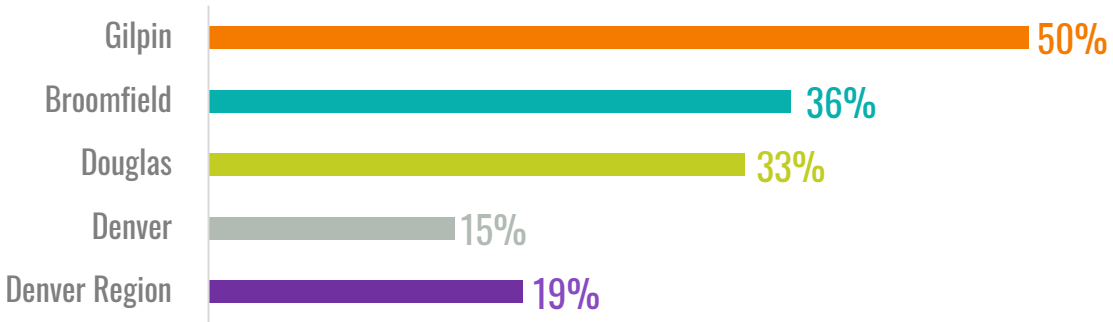
Forty-seven percent of the state’s population age 60 and older live in the Denver region. The proportion of older adults varies by county; for example, while 17.4 percent of the Denver region are older adults, larger proportions of county populations, such as 26.5 percent in Clear Creek County and 27.3 percent in Gilpin County, are older. The number of people also varies by gender. While 17.4 percent of the population in the Denver region are older, among men 15.9 percent are older and among women 19.0 percent are older. (See Map 1 in the appendix.)

60-plus Population



The percentage of older adults is increasing more rapidly in some counties than others. For example, see the comparison chart on the next page.

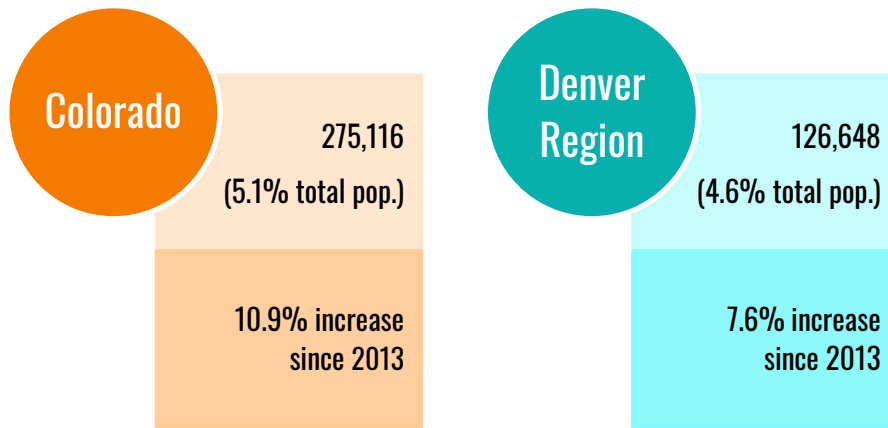
Percent Change in 60-plus Population Since 2013



Population 75 and Over

The 75 or older population is increasing in both the Denver region and the state. In the Denver region, 4.6 percent of the population is 75 or older. Among men in the Denver region, 3.7 percent are 75-plus while among women 5.4 percent are 75 or older. (See Map 2 in the appendix.)

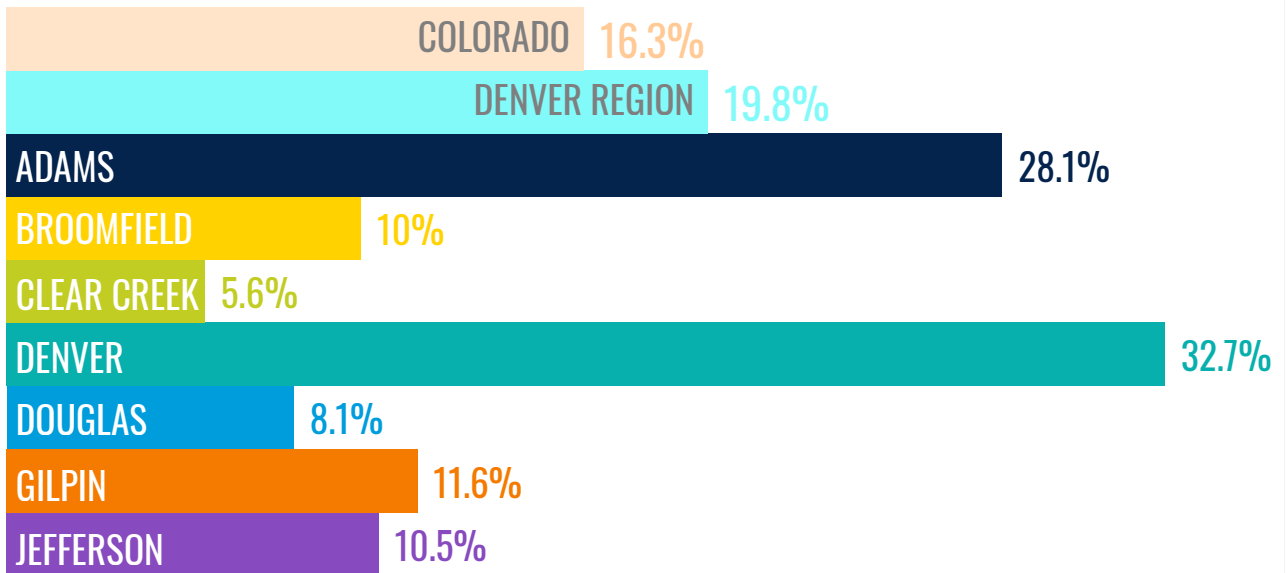
75-plus Population



Population 65 and Over, by Race:

Over the Denver region, 19.8 percent of the older population (65 and over) are minority (not White Alone, Non-Hispanic/Latino), compared to 16.3 percent of the older population in Colorado. (See Maps 3, 3A, and 4 in the appendix.)

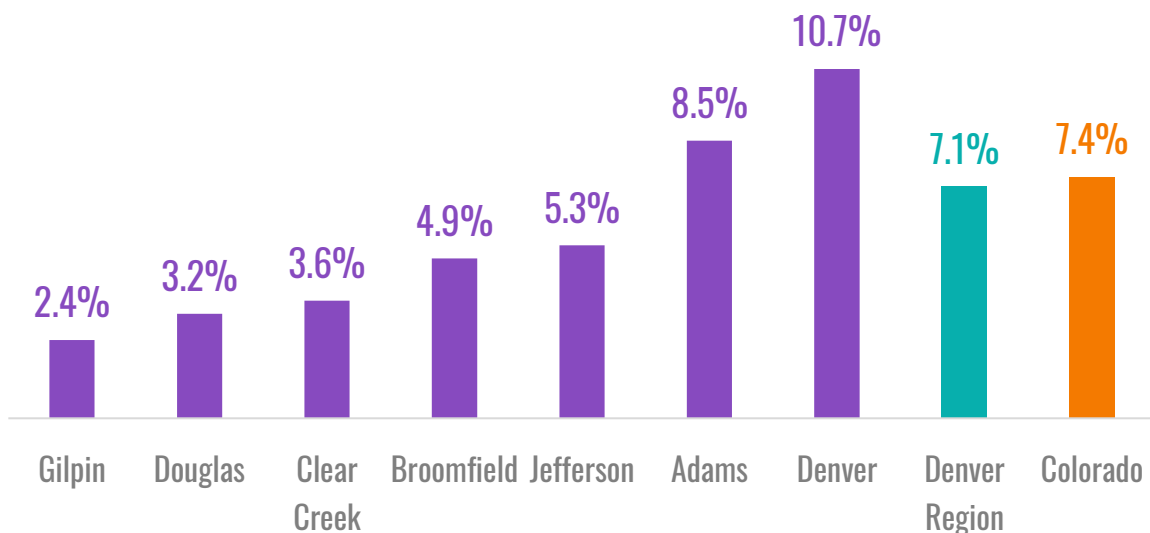
Adults 65-plus Not White Alone, Non Hispanic/Latino



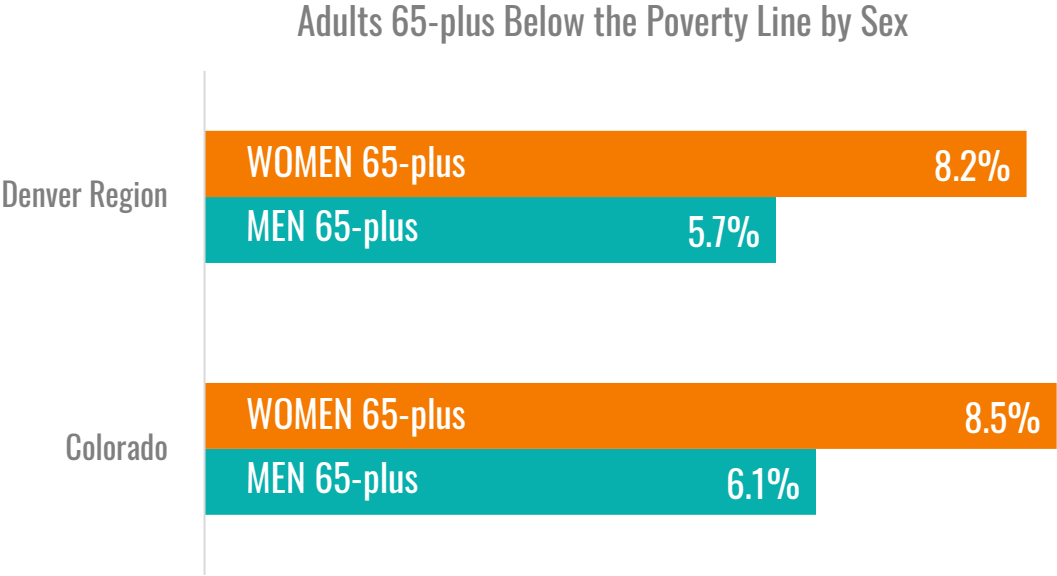
Population 65 and Over, by Poverty Status

Over the Denver region, 7.1 percent of the older population (65 and over) have income below the poverty line. This differs by county, with Denver and Adams having the highest percentages, 10.7 percent and 8.5 percent respectively, of adults 65 or older below the poverty line. Of the older population, in Broomfield County, 4.9 percent are below the poverty line; in Clear Creek County, 3.6 percent; in Douglas County, 3.2 percent; in Gilpin County, 2.4 percent; and in Jefferson County, 5.3 percent. (See Maps 5 and 5A in the appendix.)

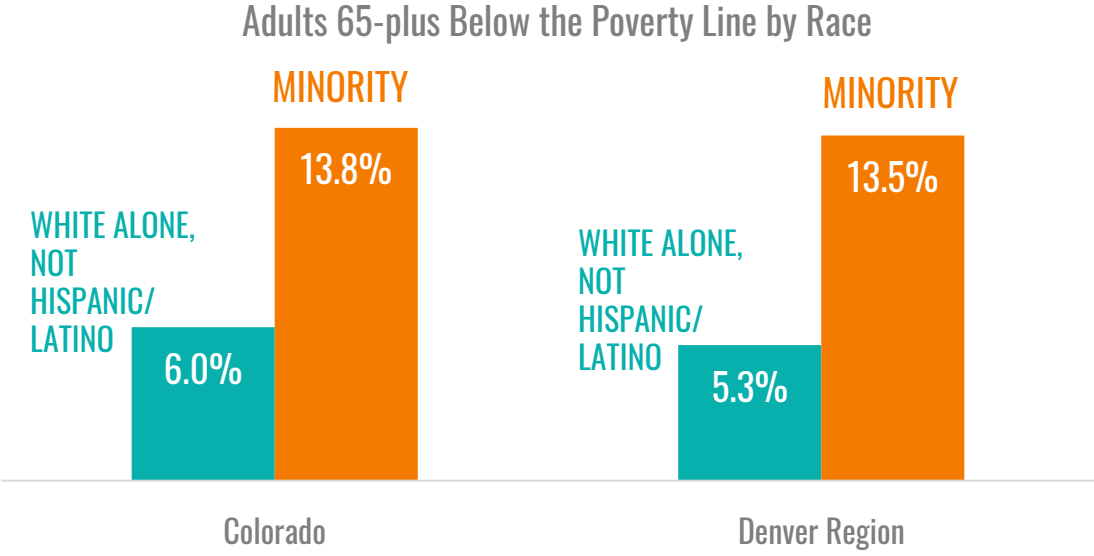
Adults 65-plus Below the Poverty Line



Population 65 and Over, by Poverty Status and Sex



Population 65 and Over, by Poverty Status and Race

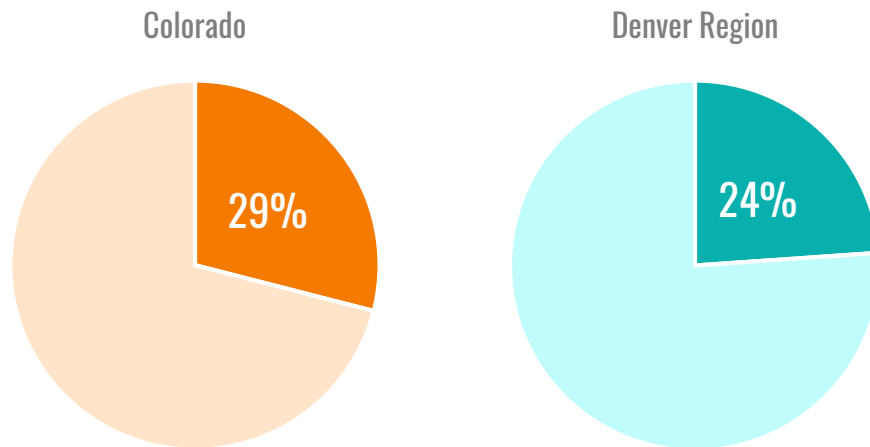


Detailed Demographic Data

Population 60 and Over, by Responsible for Grandchild Under 18

A smaller proportion of adults 60 or older in the Denver region are responsible for a grandchild under the age of 18 compared to the state overall.

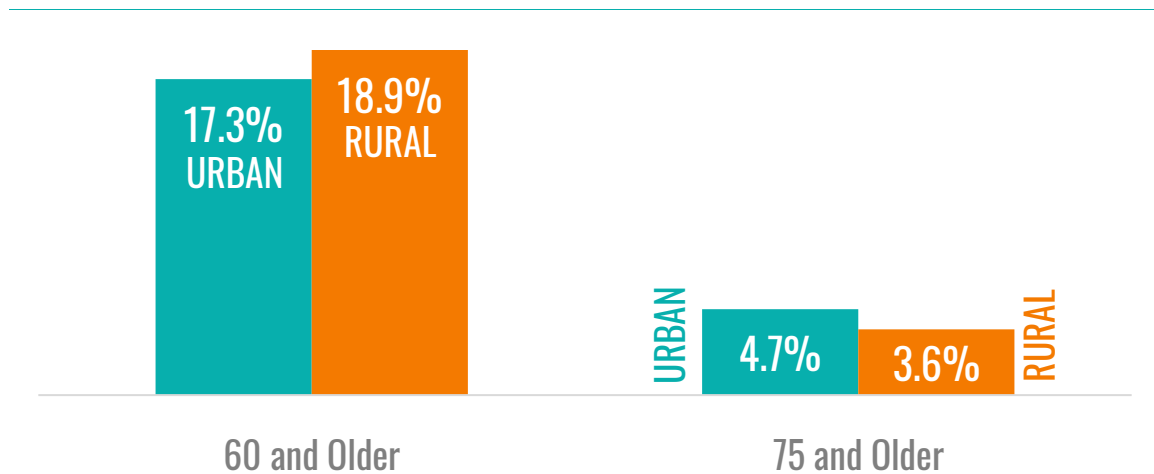
Adults 60-plus Responsible for Grandchild Under 18



Urban/Rural Population

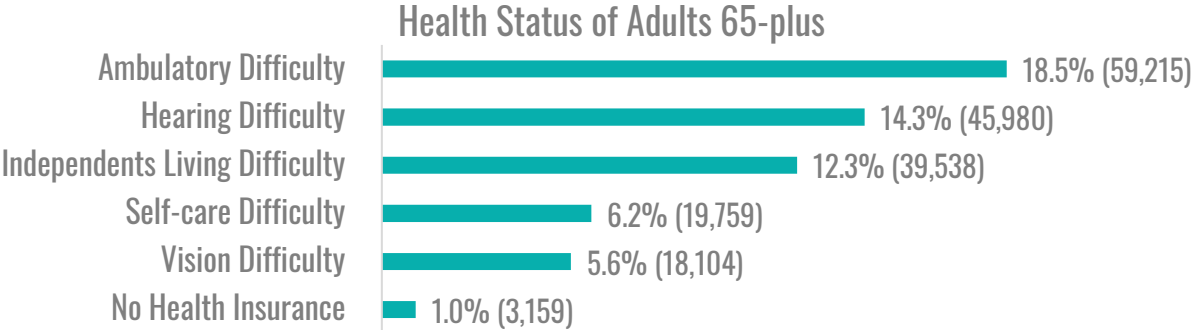
In the Denver region, a larger percent of the population is 60 or over in rural areas while a larger percent of the population is 75 or over in urban areas.

Urban and Rural Population



Population 65 and Over, Health Status

Estimates of those 65 and over reporting the above health difficulties are generally higher for Adams and Denver counties.

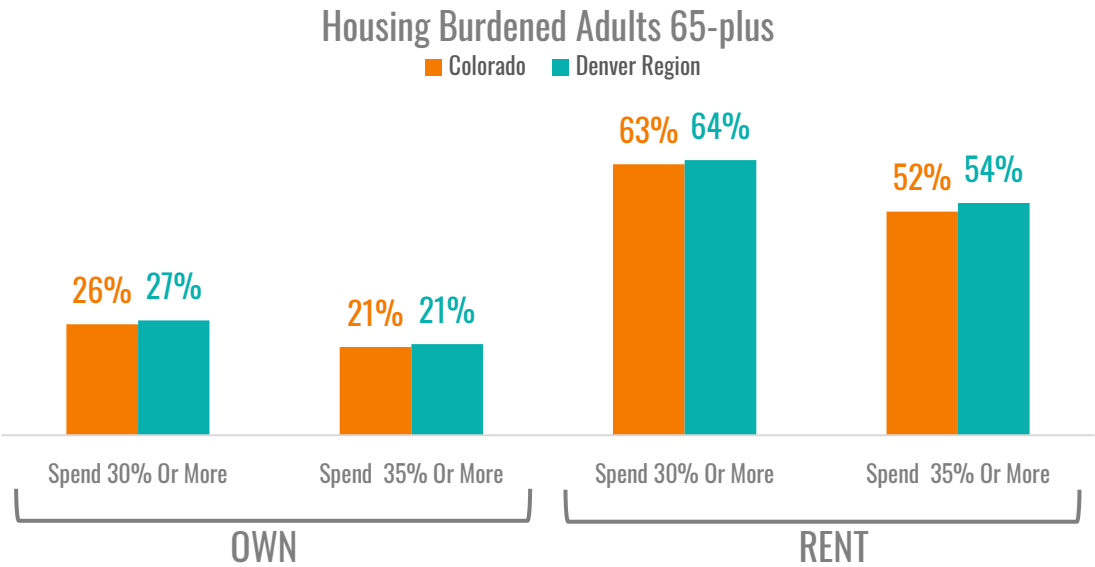


Total Population Veterans/Non-Veterans

In the Denver region, 3.3 percent of the population are veterans 65 or over, compared to 3.9 percent of the state population. However, of veteran population in the Denver region, 44.1 percent are 65 or over.

Population 65 and Over, Housing Burden

Housing burdens vary based on whether older adults rent or own their homes, but generally older adults are more likely to be housing burdened than the total population. Older adults who rent are more likely to spend 30 percent or more of their income on housing compared to older adults who own and compared to the total population. In addition, older adults who own are more likely to spend 30 percent or more of their income on housing compared to the total population.

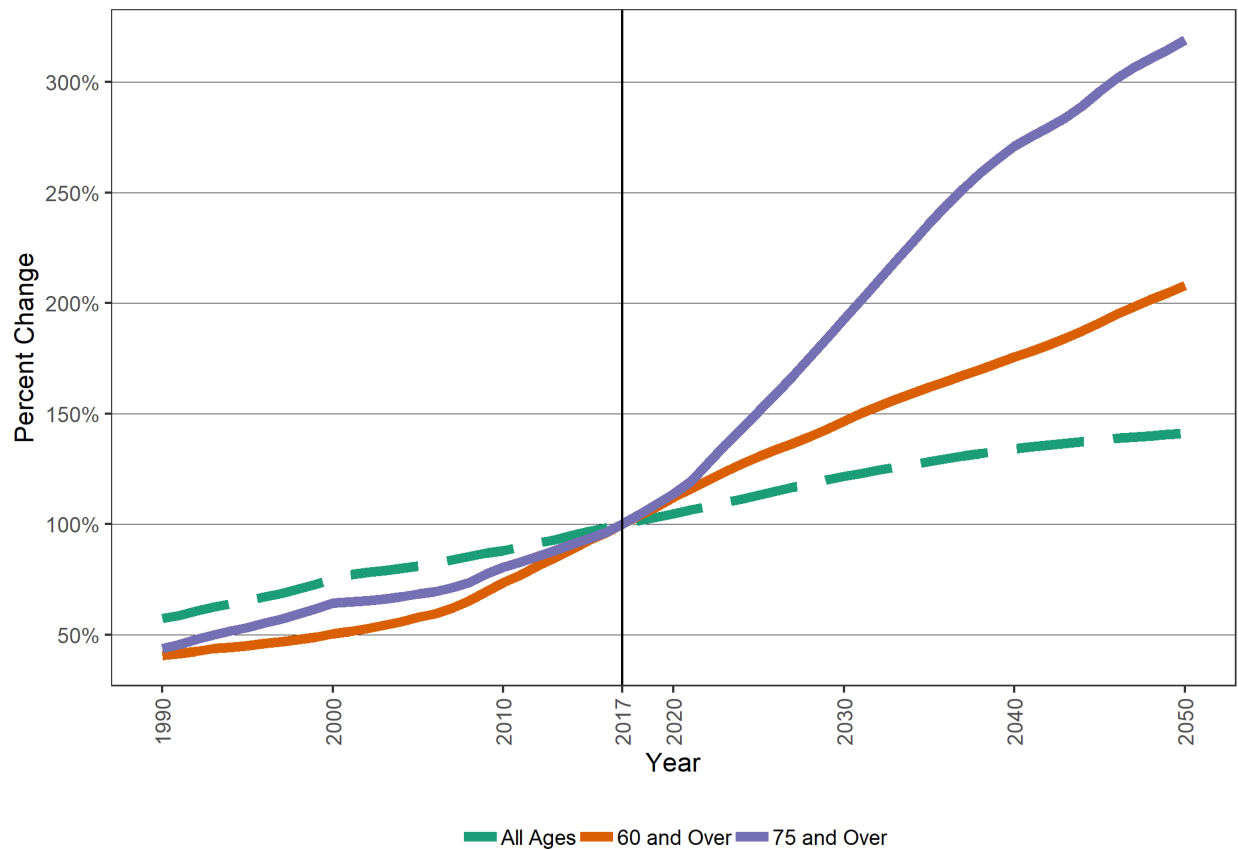


Population Change

Regional Aging Population Change

In 1990, it took 16 years to add 100,000 60-plus adults to the Denver region population. By 2010, it took five years to add 100,000 60-plus adults to the Denver region population. In 1990, it took 31 years to add 100,000 75-plus adults to the Denver region population. By 2010, it took 15 years to add 100,000 75-plus adults to the Denver region population. By 2020, it will take nine years to add 100,000 75-plus adults to the Denver region population.

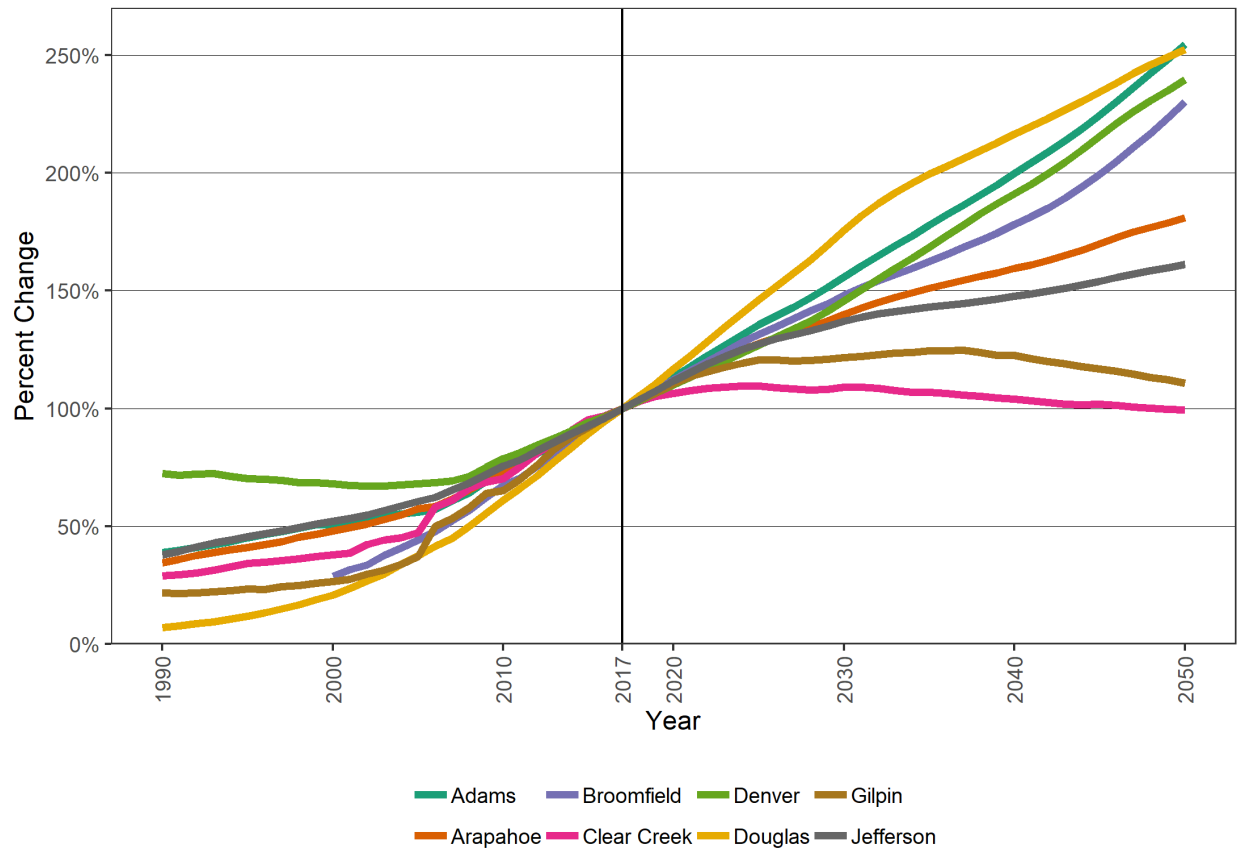
Percent Change in Population from 2017: Denver Region



Change in Population: Denver Region			
	All Ages	60 and Over	75 and Over
1990	1,638,991	212,252	60,669
2017	2,856,700	521,742	138,102
2050	4,035,163	1,085,440	440,701

60-plus Population Change by County

Percent Change in 60 and Over Population from 2017

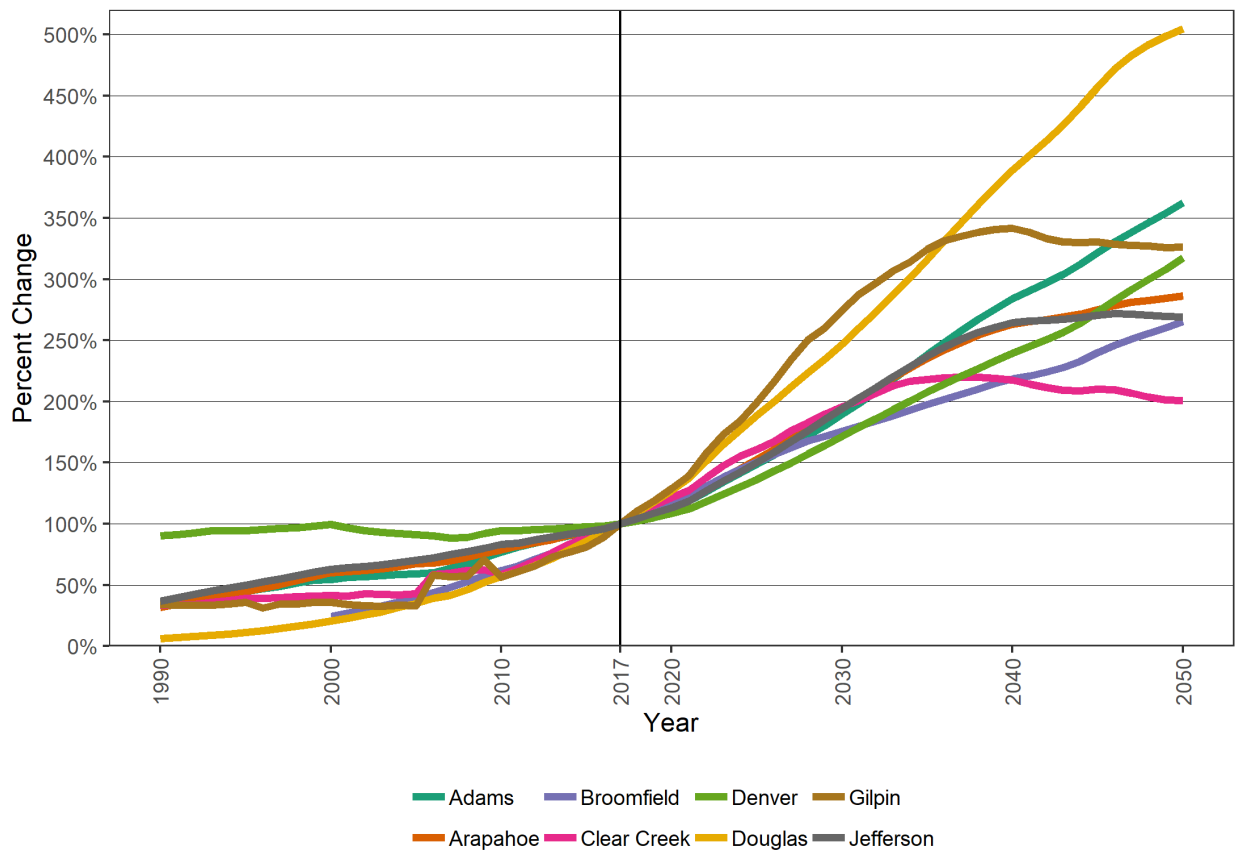


Population 60 and Over by County								
Year	Adams	Arapahoe	Broomfield	Clear Creek	Denver	Douglas	Gilpin	Jefferson
1990	29,778	41,816	0*	808	84,404	4,037	337	51,072
2017	73,124	116,289	11,801	2,698	112,699	53,816	1,484	129,393
2050	194,366	218,864	28,301	2,767	279,088	143,180	1,706	271,168

*Consolidation of the City and County of Broomfield did not occur until 2001.

75-plus Population Change by County

Percent Change in 75 and Over Population from 2017



Population 75 and Over by County								
Year	Adams	Arapahoe	Broomfield	Clear Creek	Denver	Douglas	Gilpin	Jefferson
1990	7,122	10,268	0*	196	28,937	803	80	13,263
2017	19,487	31,303	3,708	544	31,379	11,594	208	34,581
2050	73,617	93,222	10,383	1,170	101,441	63,317	764	96,787

*Consolidation of the City and County of Broomfield did not occur until 2001.

SECTION IV: COMMUNITY ASSESSMENT SURVEY OF OLDER ADULTS (CASOA)

The DRCOG Area Agency on Agency contracts with the National Research Center, Inc. to administer the **Community Assessment Survey for Older Adults (CASOA)**. The CASOA provides a statistically valid survey of the strengths and needs of older adults as reported by older adults themselves in communities across America and in the DRCOG region.

The survey was mailed out to a random selection of 10,400 older adult households in the DRCOG service area. A total of 1,246 completed were returned for an overall response rate of 12 percent providing an overall margin of error rate of plus or minus 3 percent around any given percent and two points around any given average rating for the entire sample.

Information from CASOA is a tool used to identify strengths, needs and trends in DRCOG's planning and service area. It is used to prioritize funding and service priorities in the next four years. It also helps our local governments, service providers and other partners understand more about the older adults living in their region, including what is going well and the areas that still need work.

DRCOG conducted county reports for Adams, Arapahoe, Broomfield, Clear Creek, Denver, Douglas, Gilpin and Jefferson counties and for the City of Aurora. The regional report and each county report are located on the DRCOG website and the DRCOG Network of Care Site. In addition, DRCOG Area Agency on Aging staff provide presentations on the results of CASOA 2018 all over the region. To date we have provided 15 presentations in various communities and will continue to provide many more. The results have also been shared with county councils on aging and DRCOG contractors, the DRCOG staff and DRCOG Board of Directors.

Results of CASOA 2018

The report is based around the following six community dimensions:

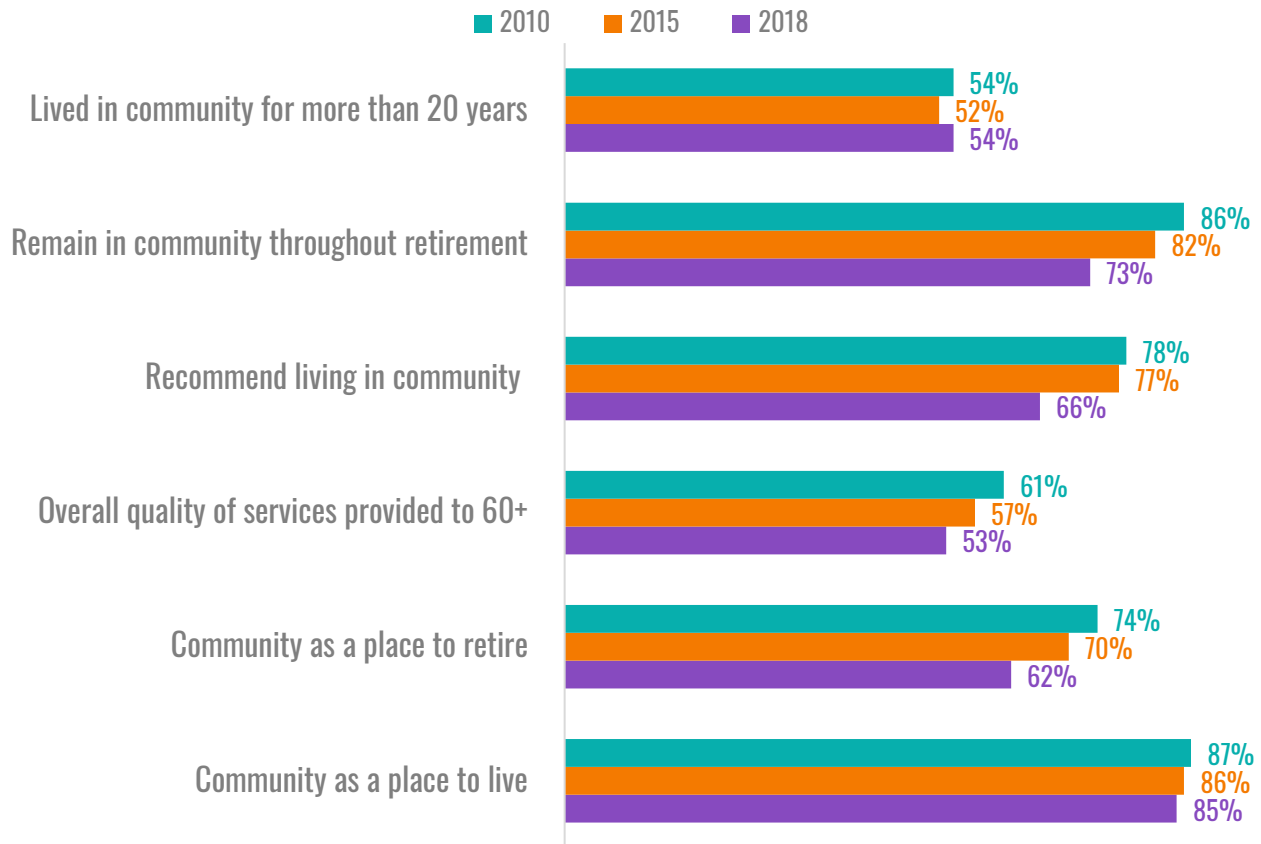
- Overall community quality
- Community and belonging
- Community information
- Productive activities
- Health and wellness
- Community design and land use

Overall Community Quality

SUMMARY

Most of the region's older residents gave high ratings to the community as a place to live, and about two-thirds of older adults would recommend the Denver metro area to others. Just over half of respondents lived in the community for more than 20 years and almost three-quarters planned to stay in the community throughout their retirement.

Community Quality



Community and Belonging

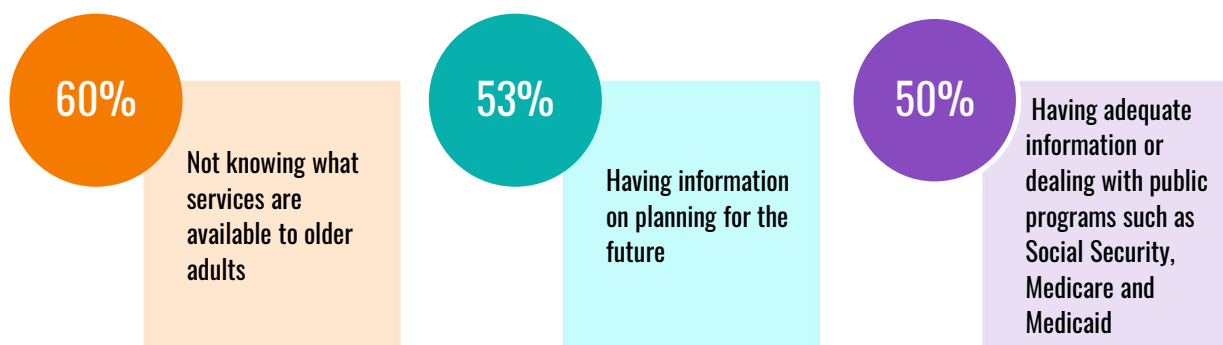
A sense of community is having a sense of membership and belonging, but it also includes feeling safe, having a shared history and trusting the others in your community. About half of older adults felt accepted and valued in their community. A moderate proportion of older residents reported problems with crime or abuse. Results include:

- 52 percent have a positive sense of community
- 71 percent feel safe in their community
- 52 percent feel valued in their community
- 30 percent feel they were discriminated against because of age
- 16 percent report being a victim of crime
- 19 percent a victim of a scam or fraud

Community Information

Approximately half of the older adult population report that they will not have the information they need when they need it. The education of a large community of older adults is not simple, but when residents are made aware of available programs and activities, more people can benefit. DRCOG's information and referral specialists, Medicare counselors, and Network of Care website assisted more than 20,000 people in fiscal year 2018. However, survey results indicate that there is still a significant need for information.

The following percentages of people reported at least a minor problem:



Older adults need to know where to find information about all available services, but specific areas of higher demand include information about public benefits, financial planning, and legal services. The information needs to be readily accessible, reliable, and from trusted sources.

While the need for information is well recognized, it is compounded by the cost to provide it. Service providers often must make difficult decisions how to prioritize funds to provide services and market their services to potential consumers.

DRCOG is rising to the challenge by:

- Improving our Network of Care website by adding more resources, increasing access to services and ensuring that the data is accurate and relevant
- Increasing the number of Community Information specialists to include Spanish speakers
- Working with community providers to ensure better referrals and reduce waitlists
- Partnering with 9News Senior Source and No Copay Radio on 1430 AM to inform people about the Area Agency on Aging. The shows provide education, talks about available resources and highlights the work of community service providers and innovative solutions to challenges facing older adults and their families.
- Continuing to operate and expand service in the State Health Insurance Assistance Program (SHIP) by providing more educational sessions, offering more services in Spanish, and increasing outreach by partnering with community service providers to offer direct services in the region.

Productive Activities

In communities where residents feel engaged and effective, there is greater social and economic prosperity. Being involved in community activities or decisions provides benefit for the community and it also benefits the individuals themselves. Older adults that participate are less likely to become injured or to die prematurely.

VOLUNTEERING

While 75 percent of the CASOA respondents rated volunteer opportunities favorably, only 37 percent participated in some kind of volunteer work. DRCOG's work with communities has shown that volunteer opportunities exceed the number of people who are actively volunteering.

CIVIC ENGAGEMENT

Individuals living in the DRCOG region rated higher than the national average for attending public meeting. Other results related to civic engagement include:



SOCIAL ENGAGEMENT

About two-thirds of older residents rated their opportunities to attend social activities as “excellent” or “good.” Five in ten reported going to religious or spiritual activities while three in 10 participated in clubs and two in 10 used a senior center.

OPPORTUNITIES TO ATTEND SOCIAL ACTIVITIES ARE “EXCELLENT” OR “GOOD”



PARTICIPATED IN CLUBS



ATTENDED RELIGIOUS OR SPIRITUAL ACTIVITIES



USED A SENIOR CENTER



THE SURVEY IDENTIFIED SOME POTENTIAL PROBLEMS:

- Fewer people than in previous surveys used community centers, participated in social activities like book club, dances, game groups and other social groups
- Fewer people reported visiting/communicating with family or friends
- Fewer people participated in religious or spiritual activities with others

Social activities	Visiting with family or friends	Religious or spiritual activities
• 2018 - 31%	• 2018 - 93%	• 2018 - 46%
• 2015 - 36%	• 2015 - 96%	• 2015 - 54%
• 2010 - 33%	• 2010 - 96%	• 2010 - 58%

There was also a decline in recreation facility use. The survey showed that most older adults visited a park in the past year, but only 42 percent used a recreation center. Fifty-two percent reported going to the library at least once in the year which was lower than in 2015 and lower than the national average.

Less than half of those interviewed said that they had a least a “minor” problem finding interesting recreational or cultural activities.

Health and Wellness

INDEPENDENT LIVING

Having care options available in the community could be the difference between remaining in your own home and community or leaving for a place that offers more assistance.

RATED AVAILABILITY OF CARE OPTIONS FAVORABLY



SPENT ONE DAY IN THE HOSPITAL



PROBLEMS WITH ASPECTS OF INDEPENDENT LIVING



SPENT TIME IN A NURSING HOME



PROBLEMS PERFORMING DAILY ACTIVITIES



CAN NO LONGER DRIVE



FALLEN IN THE LAST YEAR



PHYSICAL HEALTH

Home maintenance and chore services are critical to helping people remain in their homes as they age.



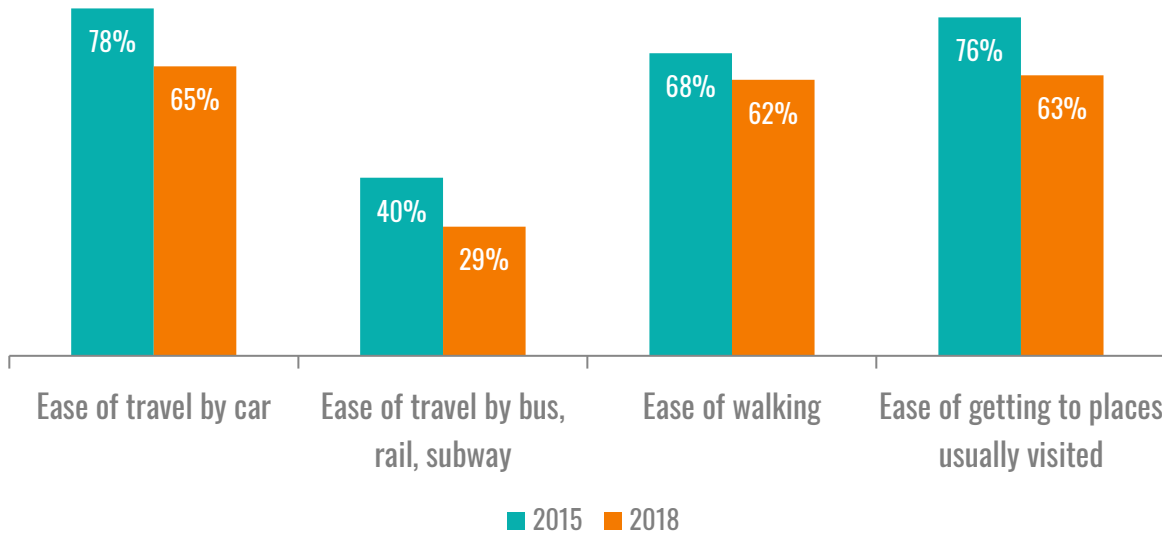
Community Design and Land Use

TRANSPORTATION

It is becoming increasingly more difficult for older adults to get to the destinations they need or desire.

The ease of transportation is trending downward for the Denver metro area. Older residents are finding it harder to get to the places usually visited in their community. Ease of travel by car, ease of public transportation, and ease of walking have declined significantly since 2015. Considering that nearly three in four older residents wish to remain in their community throughout retirement, this downward trend signals an important need for successful aging in place.

Percent Viewing Transportation as Good or Excellent



Generally, a community designed to be a more “livable” emphasizes accessibility to services, facilitates movement to those services, and provides convenient and safe transportation alternatives. Addressing problems with the ease of transportation requires changes to the transportation system within the context of the community design, involving multiple transportation industry partners and city leadership.

In the coming years, DRCOG will continue its focus on improving transportation for older adults in the region by:

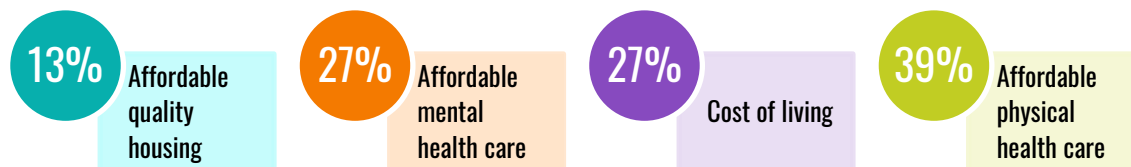
- Establishing a voucher program that will allow older adults to choose from several transportation providers that have been vetted in our consumer choice program or pay a family or friend in our consumer-directed program.
- The AAA will continue to diversify funding for transportation services in the region, by working with DRCOG’s transportation division and the Colorado Department of Transportation to combine AAA funding with Transportation Improvement Program funds to expand the service areas number, and types of trips in the region.
- DRCOG’s Veterans Transportation Community Living Initiative (VTCLI) will make it easier for veterans, military members, their families and others to learn about and arrange transportation services through a coordinated trip exchange. Through a secure, web-based platform, transportation providers will work together to provide trips to veterans and other vulnerable populations. DRCOG hopes to create a “no wrong door” approach to transportation and provide more efficiencies to the transportation system.

AFFORDABILITY

Although the Denver region has consistently been rated highly as a place to live, it is becoming a less favorable place to retire due in part to affordability issues. In recent years, older adults have rated it less positively as a place to retire and to remain throughout retirement.

While there may be several contributing factors, one that stands above the rest is the rising cost of living in the Denver metro area. Many older adults are facing challenges for having enough money for daily expenses. The financial pressure spans all aspects of living from housing and health care to food and medications.

The survey showed low ratings for affordability, with the following percent of older residents reporting “excellent” or “good”:



National Research Center, Inc. has developed a database that collates responses to CASOA and related surveys administered in 175-plus communities across the nation. In this benchmarking comparison, the Denver Metro Region was rated **much lower** than benchmark for **affordable quality housing** and the **variety of housing options**. Similarly, the Denver region was **lower** than benchmark for **cost of living** and **affordable quality health care** (both physical and mental).

INNOVATIVE PROGRAMS WORKING TO ADDRESS THESE ISSUES

Innovative programs to help people stay and thrive in their communities are emerging throughout Colorado.

Thanks to multiple community-led initiatives, AARP designated Colorado an age-friendly state – only the third state in the country to receive this designation. Lifelong Colorado, a partnership launched between the State of Colorado, local governments and service organizations has a goal of helping 100 more communities become age-friendly by 2023.

Some counties and municipalities have joined the AARP Network of Age-Friendly States and Communities, and other communities have used DRCOG’s comprehensive assessment tool called Boomer Bond to assist with developing age-friendly plans. Both initiatives provide a framework for assessing and planning for changes that make communities more “livable”. With these and other community-led initiatives, Lifelong Colorado can help make Colorado an exceptional place to age successfully.

SECTION V: VOLUNTEERS AND CURRENT AND FUTURE PROGRAMS

Volunteers

DRCOG currently utilizes the services of four volunteers in the State Health Insurance Assistance Program (SHIP). The volunteers are trained and certified to provide counseling services on the phone and help with outreach and education. DRCOG's Area Agency on Aging intends to bring at least five to 10 more volunteers on board to work mainly in the SHIP. We are also hoping to recruit a volunteer to help us manage the resources on the Network of Care website. DRCOG AAA has had volunteer programs for more than 25 years. The key to operating an effective volunteer team is to have good training, excellent supervision and provide them with the tools and information it takes for them to be successful. This requires investment at DRCOG. We provide in-house training and certification, individual supervision and support, personal office space, computers, headsets, in-building parking and formal recognition.

The DRCOG Advisory Committee on Aging (this is the Older Americans Act Regional Advisory Committee) is made up of volunteers from each county served by the DRCOG AAA and elected by their county council on aging. We also have community leaders and DRCOG Board members on the committee. All are very knowledgeable and passionate advocates for older adults. The funding advisory committee comprises eight members of the Advisory Committee on Aging. These dedicated volunteers spend countless hours reviewing, scoring and evaluating requests for funds and make funding recommendations to the DRCOG Board of Directors.

Current and Future Programs

One of the primary responsibilities of the DRCOG AAA is to administer the programs of the Older Americans Act. Contracts with various community-based organizations allow us to provide a range of services in the community, including transportation, nutrition, information and assistance, adult day, counseling and health promotion services. Providers are listed below.

Adult Day Services

DOUGLAS COUNTY DEPARTMENT OF COMMUNITY DEVELOPMENT

Community and Resource Services

100 Third St.

Castle Rock, CO 80104

douglas.co.us/community/senior-adult-services

303-660-7519

Counties served: Douglas

SENIORS' RESOURCE CENTER

3227 Chase St.

Denver, CO 80212

srcaging.org

303-238-8151

Counties served: Adams, Broomfield, Clear Creek, Denver and Jefferson

THE SENIOR HUB

2360 West 90th Ave.

Federal Heights, CO 80260

seniorhub.org

303-426-4408

Counties served: Adams, Arapahoe, Broomfield, Denver and Jefferson

Case Management

DRCOG AREA AGENCY ON AGING

1001 17th St, Suite 700

Denver, CO 80202

drcog.org

303-480-6704

Counties served: Adams, Arapahoe, Broomfield, Clear Creek, Denver, Douglas, Gilpin and Jefferson

Counseling Services

ASIAN PACIFIC DEVELOPMENT CENTER

1537 Alton St.

Aurora, CO 80010

apdc.org

303-923-2920

Counties served: Adams and Denver

JEFFERSON CENTER FOR MENTAL HEALTH (SENIOR REACH PROGRAM)

70 Executive Center

4851 Independence St.

Wheat Ridge, CO 80033-6715

jcmh.org/services/senior-services/

1-866-217-5808

Counties served: Broomfield, Clear Creek, Gilpin and Jefferson

MOUNT EVANS HOME HEALTH CARE AND HOSPICE

3081 Bergen Peak Drive

Evergreen, CO 80439

mtevens.org

303-674-6400

Counties served: Clear Creek, Gilpin and Jefferson

SENIOR SUPPORT SERVICES

846 East 18th Ave.

Denver, CO 80218

seniorsupportservices.org

303-832-1622

Counties served: Denver

Hearing Aids and Eyeglasses

COLORADO GERONTOLOGICAL SOCIETY

1330 Leyden St. #148

Denver, CO 80220

senioranswers.org

303-333-3482

Counties served: Adams, Arapahoe, Broomfield, Clear Creek, Denver, Douglas, Gilpin and Jefferson

Handyman/Chore Services

ARAPAHOE COUNTY COMMUNITY RESOURCES

1690 West Littleton Blvd., Suite 300

Littleton, CO 80120

co.arapahoe.co.us/326/Community-Resources

303-738-8080

Counties served: Arapahoe

DOUGLAS COUNTY DEPARTMENT OF COMMUNITY DEVELOPMENT: COMMUNITY AND RESOURCE SERVICES

100 Third St.

Castle Rock, CO 80104

douglas.co.us/community/senior-adult-services

303-660-7519

Counties served: Douglas

SENIORS' RESOURCE CENTER

3227 Chase St.

Denver, CO 80212

srcaging.org

303-238-8151

Counties served: Adams, Broomfield, Clear Creek, Denver, and Jefferson

VOLUNTEERS OF AMERICA

2660 Larimer St.

Denver, CO 80205

voacolorado.org

303-297-0408

Counties served: Adams, Arapahoe, Clear Creek, Denver, Douglas, Gilpin and Jefferson

Health Promotion: Disease Prevention/Education/Wellness Programs

ASIAN PACIFIC DEVELOPMENT CENTER

1537 Alton St.

Aurora, CO 80010

apdc.org

303-923-2920

Counties served: Adams and Denver

HEALTHSET

2420 W. 26th Ave., Suite D-460

Denver, CO 80211

healthset.org

720-321-9320

Counties served: Adams, Denver and Jefferson

MOUNT EVANS HOME HEALTH CARE AND HOSPICE

3081 Bergen Peak Drive
Evergreen, CO 80439
mtevens.org
303-674-6400
Counties served: Clear Creek, Gilpin and Jefferson

TRI-COUNTY HEALTH DEPARTMENT

6162 South Willow Drive, Suite 100
Greenwood Village, CO 80111
tchd.org/550/Healthy-Aging-Programs
720-200-1572
Counties served: Adams, Arapahoe, Denver, Douglas and Jefferson

VOLUNTEERS OF AMERICA

2660 Larimer St.
Denver, Colorado 80205
voacolorado.org
303-297-0408
Counties served: Adams, Arapahoe, Denver, Douglas and Jefferson

In-Home Services**DOUGLAS COUNTY DEPARTMENT OF COMMUNITY DEVELOPMENT: COMMUNITY AND RESOURCE SERVICES**

100 Third St.
Castle Rock, CO 80104
douglas.co.us/community/senior-adult-services
303-660-7519
Counties served: Douglas

JEWISH FAMILY SERVICE OF COLORADO

3201 South Tamarac Drive
Denver, CO 80231
jewishfamilyservice.org
303-597-5000
Counties served: Arapahoe, Denver and Jefferson

SENIORS' RESOURCE CENTER

3227 Chase St.
Denver, CO 80212
srcaging.org
303-238-8151
Counties served: Adams, Arapahoe, Clear Creek, Denver, Gilpin and Jefferson

COLORADO VISITING NURSE ASSOCIATION

6750 W. 52nd Ave.
Arvada, CO 80002
vnacolorado.org
303-698-2121
Counties served: Adams, Arapahoe, Broomfield, Denver, Douglas and Jefferson (including rural areas)

Information, Referral and Assistance Services

DRCOG AREA AGENCY ON AGING

1001 17th St, Suite 700

Denver, CO 80202

drcog.org drcog.networkofcare.org

303-480-6700

1-866-959-3017 outside the metro area

Counties served: Adams, Arapahoe, Broomfield, Clear Creek, Denver, Douglas, Gilpin and Jefferson

BROTHERS REDEVELOPMENT

2250 Eaton St.

Denver, CO 80214

coloradohousingconnects.org

844-926-6632

Counties served: Adams, Arapahoe, Broomfield, Clear Creek, Denver, Douglas, Gilpin and Jefferson

HEALTHSET

2420 W. 26th Ave., Suite D-460

Denver, CO 80211

healthset.org

720-321-9320

Counties served: Adams, Denver, and Jefferson

Legal Services

COLORADO LEGAL SERVICES

1905 Sherman St., Suite 400

Denver, CO 80203-1181

coloradolegalservices.org

303-837-1321

Counties served: Adams, Arapahoe, Broomfield, Clear Creek, Denver, Douglas, Gilpin and Jefferson

Long-Term Care Ombudsman Services

DRCOG AREA AGENCY ON AGING

1001 17th Street, Suite 700

Denver, CO 80202

drcog.org

drcog.networkofcare.org 303-480-6734

Counties served: Adams, Arapahoe, Broomfield, Clear Creek, Denver, Douglas, Gilpin and Jefferson

Nutrition Services

VOLUNTEERS OF AMERICA

Nutrition Program

2660 Larimer St.

Denver, CO 80205

voacolorado.org

303-297-0408

Counties served: Adams, Arapahoe, Clear Creek, Denver, Douglas, Gilpin and Jefferson

Respite and Caregiver Support Services

ALZHEIMER'S ASSOCIATION

455 Sherman St., Suite 500

Denver, CO 80203

alz.org/co

303-813-1669

Counties served: Adams, Arapahoe, Broomfield, Clear Creek, Denver, Douglas, Gilpin and Jefferson

CATHOLIC CHARITIES AND COMMUNITY SERVICES

4045 Pecos St.

Denver, CO 80211

ccdenvr.org

303-742-0823

Counties served: Adams, Arapahoe, Denver, Douglas and Jefferson

CITY AND COUNTY OF BROOMFIELD: SENIOR SERVICES

280 Spader Way

Broomfield, CO 80020

broomfield.org/367/Senior-Services 303-464-5526

Counties served: Broomfield

LUTHERAN FAMILY SERVICES ROCKY MOUNTAINS

363 South Harlan St., Suite 200

Denver, CO 80226

lfsrm.org/

303-217-5864

Counties served: Adams, Arapahoe, Denver and Jefferson

THE SENIOR HUB

2360 West 90th Ave.

Federal Heights, CO 80260-6700

seniorhub.org

303-426-4408

Counties served: Adams, Arapahoe, Broomfield, Denver and Jefferson

Screening/Evaluation Services

ASIAN PACIFIC DEVELOPMENT CENTER

1537 Alton St.

Aurora, CO 80010

apdc.org

303-923-2920

Counties served: Adams and Denver

MOUNT EVANS HOME HEALTH CARE AND HOSPICE

3081 Bergen Peak Dr.

Evergreen, CO 80439

mtevans.org

303-674-6400

Counties served: Clear Creek, Gilpin and Jefferson

SENIOR SUPPORT SERVICES

846 East 18th Ave.
Denver, CO 80218
seniorsupportservices.org
303-832-1622
Counties served: Denver

SOUTHWEST IMPROVEMENT COUNCIL (SWIC)

1000 South Lowell Blvd.
Denver, CO 80219-3339
swic-denver.org
303-934-2181
Counties served: Adams, Arapahoe, Broomfield, Denver and Jefferson

Transportation Services

ADAMS COUNTY DEPARTMENT OF REGIONAL AFFAIRS

4430 South Adams County Pkwy., Suite 5309
Brighton, CO 80601
co.adams.co.us
720-523-6991
Counties served: Adams, Arapahoe and Broomfield

ARAPAHOE COUNTY COMMUNITY RESOURCES

1690 West Littleton Blvd.
Littleton, CO 80120
co.arapahoe.co.us/community resources
303-235-6972
Counties served: Adams, Arapahoe, Douglas and Jefferson

CITY AND COUNTY OF BROOMFIELD

280 Spader Way
Broomfield, CO 80020
broomfieldseniors.com
303-464-5534
Counties served: Adams, Broomfield, and Jefferson

DOUGLAS COUNTY DEPARTMENT OF COMMUNITY DEVELOPMENT: COMMUNITY AND RESOURCE SERVICES

100 Third St.
Castle Rock, CO 80104
douglas.co.us/community/senior-adult-services
303-660-7519
Counties served: Douglas

SENIORS' RESOURCE CENTER

3227 Chase St.
Denver, CO 80212
srcaging.org
303-235-6972
Counties served: Adams, Arapahoe, Broomfield, Clear Creek, Denver and Jefferson

VOLUNTEERS OF AMERICA

2660 Larimer St.

Denver, CO 80205 voacolorado.org

Clear Creek Services: 303-567-2382 Gilpin Services: 303-582-5444

Visually Impaired Services

A3

910 16th St., Suite 1240

Denver, CO 80202

a3colorado.org

303-831-0117

Counties served: Adams, Arapahoe, Broomfield, Clear Creek, Denver, Douglas, Gilpin and Jefferson

AUDIO INFORMATION NETWORK OF COLORADO

1700 55th St., Suite A

Boulder, CO 80301-2702

aincolorado.org

303-786-7777

1-877-443-2001 outside the metro area

Counties served: Adams, Arapahoe, Broomfield, Denver, Douglas, Gilpin and Jefferson

COLORADO CENTER FOR THE BLIND

2233 West Shepperd Ave.

Littleton, CO 80120

cocenter.org

303-778-1130

Counties served: Adams, Arapahoe, Broomfield, Clear Creek, Denver, Douglas, Gilpin and Jefferson

SENIORS' RESOURCE CENTER

3227 Chase St.

Denver, CO 80212

srcaging.org

303-238-8151

Counties served: Adams, Arapahoe, Clear Creek, Gilpin and Jefferson

SECTION VI: QUESTIONS

Core Services

1. Which of the following services is funded by the AAA?

- a. Congregate meals;
- b. Home-delivered meals;
- c. Transportation services; and/or
- d. In-home services.

Response:

DRCOG funds all the services listed above. More details listed below:

- *Congregate meals* – DRCOG funds 30 meal sites and provided funding for 191,185 meals in the planning and service area. Meal sites include:
 - two in Adams County
 - two in Arapahoe County
 - two in Clear Creek County
 - 18 in Denver County
 - one in Douglas County
 - one in Gilpin County
 - four in Jefferson County
- *Home-delivered meals* – DRCOG funded 592,586 meals and delivered to all eight counties in the planning and service area including the eastern plains of Adams and Arapahoe counties and mountain homes in Gilpin and Clear Creek.
- *Transportation services* – DRCOG provided 112,595 trips in the DRCOG region
- *In-home services* – DRCOG provided funding for 54,161 hours of in-home services

2. In your region, are there any situations, not including funding, that are barriers to innovation within the core Older Americans Act programs? If yes, please elaborate and be as specific as possible.

Response:

Affordable, accessible housing is a huge need in the Denver region. If people don't have housing, it is hard to provide them with other services.

There are food deserts in our region and food insecurity continues to be a top problem in the region. The AAA has tried to expand partnerships in the region, but community providers state that the regulations of the Older Americans Act are too cumbersome. Therefore, we have been unable to expand nutrition services in the region.

The region's low unemployment rate is proving challenging for community service providers and long-term care communities. This combined with low wages and high cost of living in our area are making it very difficult to find and keep qualified staff. The Older Americans Act programs most affected are in-home services and transportation.

Complaints related to low staffing in nursing homes and assisted-living facilities continue to be common among those received by the Long-Term Care Ombudsman Program.

Transportation is a huge challenge in our region. Older adults tell us that there are not enough options, that private pay options are too expensive for many, and while some like ride-hailing services

like Uber and Lyft, most have not tried them. Congestion on the roads was mentioned many times in community conversations as a reason that people don't go out and do things they would like to.

3. What is your current process for monitoring providers and what plans do you have to update it and improve over the next 4 years?

Response:

Providers are routinely monitored. Monitoring is performed no less than monthly to ensure contract requirements are being met with regards to service delivery (units, clients) and contract performance (funding draw down, match provision). Additionally, on-site provider assessments are conducted no less than annually by DRCOG's contracted auditor. For the assessments, DRCOG uses a standard evaluation tool that is periodically updated based on changes in state or DRCOG policies and procedures. The introduction of new provider agencies or new key program staff also triggers early and frequent monitoring to ensure compliance and to identify any training issues. DRCOG also requires providers to submit a cost analysis report no less than annually to verify the underlying program costs for which they received reimbursement. Plans for improving overall monitoring include conducting more random compliance checks, particularly in areas commonly subject to compliance citations. The areas that will be more frequently reviewed include, but are not limited to, consumer assessments, program income procedures and documentation, staff background checks, food safety procedures and documentation, and vehicle and driver records. There will also be more provider on-site visits to observe service quality and evaluate other areas for program compliance. The contractor evaluation tool will also be expanded with additional compliance checklists for nutrition, transportation and in-home services.

4. What services currently have a waitlist? What is the process for monitoring the waitlist and how are individuals prioritized to receive services?

Response:

The services currently with waitlists include the following:

- Assisted transportation
- Caregiver respite
- Case management/ screening
- Chore
- Mental health counseling
- Home delivered meals
- In-home services (homemaker and personal care)
- Legal assistance
- Material aid (hearing aids and eyeglasses)

Providers are trained at least annually on DRCOG's waitlist requirements, which include having documented waitlist procedures, a tracking log, and a service prioritization tool. They are given a log template to track for each month the services having a waitlist, the number of individuals and reasons for the waitlist, consumers new to and removed from the waitlist, the average days consumers were waitlisted, and the number of consumers that were not waitlisted but could not be served. Providers are required to report this data with each monthly submission of their cost reimbursement requests. Providers also receive a sample service prioritization tool as approved by the State Unit on Aging. Providers use the tool to factor the degree to which a consumer falls under the categories of greatest social and economic need as well as level of frailty and helps providers rank these consumers in

order of service priority. Providers are also trained to consider other factors such as emergency risk, length of time on the waitlist and, in the case of nutrition programs, the level of nutritional risk.

Ombudsman and Legal Assistance

5. What long-term care issues will your AAA's local Ombudsman Program give priority to as a systems advocate during the next four years?

Response:

- One of the goals of the DRCOG Long-Term Care Ombudsman Program is to identify those residents who are the most frail and vulnerable with no other supports or the ability to advocate for themselves. These individuals often get lost in facilities as they don't have a voice and there is no one to check in on them.
- Tackle long standing issues with the larger corporations by continuing regular dialogue with the upper management of these organizations to bring awareness to care and quality of life concerns as well as involvement with Colorado Department of Public Health and Environment to address systemic issues.
- Monitor and make recommendations for the Chapter II regulations. A rewrite will occur over the next two years.
- Continue monitoring of the assisted-living residence regulation implementation.
- Work with legislators to increase Long-Term Care Ombudsman Program funding to help better address the rapid growth and complex cases in long-term care.

6. In addition to resident council meetings, family council meetings, and trainings to facility staff, what other activities will the local Ombudsman participate in during the next four years to educate the community regarding ombudsman services

Response:

Ombudsmen will conduct community trainings, including but not limited to – adult protective services case review teams, single entry points, hospital organizations, private case management agencies, Program of All-Inclusive Care for the Elderly organizations, family support groups, county councils on aging, 40-hour assisted-living residence administrator training, Colorado Health Care Association certification trainings, church groups, various universities/colleges.

7. Specifically, what legal issues will be given priority for receiving representation from the Legal Assistance Program during the next four years?

Response:

The legal issues that will be given priority include services related to:

- Access to public benefits including Medicaid, Medicare, Colorado's Old Age Pension, Social Security, Supplemental Security Income, Aid to the Needy Disabled and food stamps.
- Help with domestic violence including restraining orders, financial protection and representation in court.
- Help obtaining identification, military records and citizenship information for benefits which includes: birth certificates, military records, driver's license and identification cards.
- Services related to threats to homeownership including: predatory lending, foreclosures, reverse mortgages, debt relief, collections, bankruptcy, homeowner associations, mobile home concerns and other real estate matters.
- Services also include representation in court and at administrative hearings, in formal negotiations with adverse parties and attorneys, advice and counseling, assistance in completing forms and applications and preparation of legal documents.

How will the AAA ensure that the local Legal Assistance provider is able and willing to provide representation for these issues?

Response:

DRCOG has a contract with our legal assistance provider, we meet with our providers quarterly and we contract with an outside auditing firm to evaluate the financial compliance of the service they are contracted provide. The growing need for legal services and the limited funding available to provide services are the biggest challenges to the program.

Other Services

8. What evidence-based health promotion or disease prevention programs does the AAA currently provide and plan to provide during the period of the Area Plan?

Response:

DRCOG provides “Matter of Balance” a fall prevention program we contract to provide with Tri-County Health Department to Adams, Arapahoe, Denver, Douglas, Jefferson counties. DRCOG staff are certified trainers and provide services to older adults living in Broomfield, the eastern plains of Adams and Arapahoe, and Clear Creek and Gilpin counties. DRCOG also funds Volunteers of America to provide the evidence-based service “Healthy Moves to Aging Well.”

In addition to funding received through the Older Americans Act (OAA) and State Funding for Senior Services (SFSS), what other funds are received by the AAA to provide services for older adults (e.g. Senior Health Insurance Assistance, Colorado Choice Transitions, etc.)?

Response:

In 2018 DRCOG has the following contracts:

- State Health Insurance Assistance Program (SHIP)
- Colorado Choice Transitions
- Program of All-Inclusive Care for the Elderly Ombudsman funds
- Centers for Medicare and Medicaid Services for the Accountable Health Communities demonstration project
- Denver County mill levy - information and assistance for people living with disabilities
- TCA infrastructure development
- NextFifty Initiative – services associated with Accountable Health Communities
- City and County of Aurora for expanded senior transportation

Targeting and Outreach

9. What are some successes the AAA has used that improved access and utilization of services by individuals who are at greatest social and or economic need?

Response:

- In the past four years DRCOG has established a Latino case management program and expanded our service to Spanish speakers in our Information and assistance, Veteran-Directed Care and State Health Insurance Assistance programs.
- We have expanded the DRCOG Network of Care website and promote it as a resource via 9News Senior Source.
- DRCOG AAA started a State Health Insurance Assistance Program and the Veteran-Directed Care program. Both programs are supported and encouraged by the Administration for Community Living.

10. What strategies will the AAA use to raise awareness of the services provided and increase the number of services provided and the number of unduplicated clients over the four years of the Area Plan?

Response:

Latino services: We will expand outreach to Spanish speaking elders and work to increase services to this community including but not limited to: expanding the case management program, State Health Insurance Assistance Program services, and information and assistance.

Outreach: We will continue to partner with 9News Senior Source, No Copay Radio, in 2019 we will have seven pages dedicated to the services of the DRCOG AAA in the Seniors BlueBook. We will continue to operate and expand the DRCOG Network of Care website to include new modules and a new more readable platform. The Aging and Disability Resource Center team has identified ways to expand their outreach that includes visiting meal sites, low income housing properties, and partnering with our contractors to offer presentations and services at their sites.

Transportation: Options in the region will be expanded by contracting with more providers, offering voucher services, implementing the Veterans Transportation and Community Living Initiative (VTCLI) program, and providing more funding for rides in the region.

Nutrition: We will work with our current provider to offer more service including expanding meal sites, offering more choice at current meal sites including light breakfast options at some sites and expanding the market meals program. We will attempt to develop new partnerships to serve underserved parts of the region including the Eastern Plains, Gilpin, Clear Creek counties, Commerce City and eastern Denver with local restaurants and school districts.

Service to Veterans: We will work to resolve current payment issues with Veterans Affairs and then expand the Veteran-Directed Care program in the region.

Refugee elders: We will continue to work with the Colorado Refugee Services Program to expand services to elder refugees in the region. We will seek additional funds and partnerships to duplicate the successful program we have with the Aurora Center for Active Adults in another part of the region.

Innovation and Expansion of Services

11. What type of innovations is the AAA planning to try during the next four years to improve the quality and availability of services provided or funded by the AAA?

Response:

DRCOG has been awarded funding from the Centers for Medicare and Medicaid Services to track the effect of community-based services on health care cost and quality outcomes for its beneficiaries. The funding is for the Accountable Health Communities model and requires data to be developed and tracked from both clinical providers that screen people for five health-related social needs and refer those with a need to a community service to address it. As an Area Agency on Aging DRCOG has relied heavily on its network of contractors to fulfill the requirements of this funding.

12. What plans, if anything, do you have to measure the effectiveness, efficiency, outcomes of your programs and services?

Response:

Through a partnership with Health First Colorado (the state's Medicaid program) the Denver Regional Accountable Health Community will collect Medical claims data on the people served. Through collaboration with seven clinical and seven community-based partners, the Area Agency on Aging will collect data on social needs as well as on community-based service use. These data sets will be matched and analyzed to determine the impact of addressing social needs on health care cost and use patterns.

SECTION VII: TITLE III / VI COORDINATION

N/A

SECTION VIII: FORMS

Worksheet A: Direct Service Waiver Request

N/A

Worksheet B: Meal Sites

Attached

Worksheet C: Community Focal Points and Senior Centers

Attached

Worksheet D: Regional Advisory Council Membership

Attached

Worksheet E: Statement of Intent/Signature Page

Attached

DIRECT SERVICE WAIVER REQUEST

We hereby request approval of a Waiver to provide the direct services listed below.

1. Case Management
2. Information and Assistance
- 3.
- 4.
- 5.
- 6.

Please attach documents describing the direct service to be provided including organizational structure and planned methods of program services delivery.

PLEASE NOTE: If the Waiver Request is incomplete, this may result in a delay of the approval of the Area Plan.

Area Plan Form for SFY 2019-2023 - DRCOG Region 3A

Direct services requested for waiver

Per attachment A of the Area Plan Form for SFY 2019-2023, DRCOG requests a waiver for the following direct services:

1. Case management
2. Information and assistance

Case management

DRCOG has provided case management as a direct service since SFY2014. The program provides intensive support and assistance to seniors in need by helping with care coordination and accessing services. Often clients have critical needs by the time they reach DRCOG: food insecurity; lack of safe, or sustainable housing; no transportation, complex medical issues that are not being addressed; isolation; non-treated substance/mental health issues and concerns with cognitive functioning. Program staff created a comprehensive assessment tool that it uses to identify client needs. Case managers develop customized care plans for their clients that factors the needed supports/services and then assists them in accessing these as available. Case managers help problem solve client issues and mitigate risks to prevent critical situations when possible.

As services are put in place and the client begins to stabilize, case managers continue to monitor services, as well as the overall health, welfare and safety of the client. They work on helping the client build the skills necessary for him or her to be able to maintain living on their own or with the help of an identified provider or family member.

Examples of what case managers do:

- Application & redetermination assistance for a multitude of benefits such as SNAP, Medicaid, Medicare, LEAP, Rent rebates, Property tax rebates, life line phones
- Participation in functional assessments for LTC Medicaid to advocate for client's needs.
- Participation and assistance with complex health needs including attendance at medical appointments, helping find doctors/specialists, providing translation/interpretation services, advocating for clients regarding health care choices, hospice and palliative care options.
- Educating and assisting clients to establish Advanced Directives, DNR and Power of attorneys
- Applying for grants and funding for vision, hearing aids, dental for clients
- Facilitating with immigration/citizenship along with translation services for Spanish speaking clients who need more hands-on assistance in obtaining services due to language or residency barriers.
- Helping clients navigate complex systems of care for health, mental health & substance abuse treatment needs.
- Coordinating care planning with community providers (i.e. UCHealth, Kaiser, Adult Protective Services, mental health services, housing, Colorado Access, Department of Human Services) to ensure client is receiving the level of care that is available to them.

The case management team is composed of a case management supervisor, four full-time case managers and a case intake staff person. The Aging and Disability Resource Center (ADRC) manager also allocates 40% of her time to the program. On average, the team serves approximately 280 clients annually. In SFY2019 approximately 6700 units of service are budgeted.

Among the goals of the program is to expand its visibility among and providing services to the senior Latino population. Within the past three years, two Spanish-speaking case managers were hired to directly target Latino elders. Many of these seniors are hard to reach, so the team is focused on directing outreach to local community providers that primarily serve this population (i.e. clinics, libraries, food banks) as well as coordinating with the Latino Community Foundation of Colorado to provide referrals.

In the past, case management referrals far exceeded program capacity which resulted in a waitlist. The team's efforts to reduce the waitlist (currently <10 consumers) has meant that it can now focus on stepping up outreach efforts to service referral sources. These sources have included doctors' offices and clinics, hospitals/emergency rooms, home health agencies, homeless shelters, etc. Attention is being placed on more prevention outreach, helping consumers avoid having their circumstances escalate to a crisis situation.

Information and Assistance

Providing relevant and useful information and assistance is a fundamental service of DRCOG's ADRC program. The key components of this service include the Information and Assistance phone line and the Network of Care website. The ADRC team is made up of Community Resource Specialists (CRS), Options Counselors (OC) and support staff. They collect and update information on community resources, assist consumers in navigating public benefits and systems, participate in senior resource events and make referrals to Older Americans Act and other community-based programs. Staff work behind the scenes to network with community providers, maintain an online database of over 2,000 resources that receives an average of 37,000 monthly site visits, and develop guides and processes to simplify access to necessary supports. Separately from I&A, the ADRC also provides options counseling, offers an Elder Refugee program, and operates as a regional State Health Insurance Assistance Program (SHIP) site.

In SFY2019, I&A referrals are on track to reach approximately 16,000, and unduplicated referral clients are roughly 560. The ADRC I&A team is made up of two Community Resource Specialists (CRS), one administrative assistant, and the ADRC supervisor. Three Options Counselors, the ADRC manager and a financial staff person also allocate a portion of their time to the program.

As noted in the recent CASOA survey of the DRCOG region, many seniors do not know where to look for information about available resources. To help address this issue, the ADRC is/has:

- formed an outreach committee that will regularly strategize and find opportunities to perform outreach to OAA targeted and generally harder-to-reach populations;
- is expanding the Network of Care website, which is currently comprised of four database modules (Aging & Disabilities, Veterans, Developmental Disabilities, and Public Health) and will be further expanded with additional database modules
- will conduct outreach at congregate meal sites, visiting all the AAA sites at least twice per year;
- will connect with all DRCOG providers no less than annually to inform them of ADRC services;
- if resources permit, will add a community resource specialist position to improve more live calls and reduce multiple call backs

The ADRC has provided I&A services since its inception over 10 years ago, and it was only beginning in January 2019 that DRCOG has used any OAA/SFSS service dollars to fund the program. Prior to that time, these services were primarily funded by the AAA's administration dollars.

REGION: 3A

PROGRAM: DRCOG Area Agency on Aging

Nutrition Program Meal Sites (Congregate & Home Delivered Meal Programs) As of March 2019

	SITE NAME/ADDRESS MEAL SITE COORDINATOR PHONE/FAX/EMAIL ADDRESS	WHICH PROGRAM(S) OPERATE OUT OF THIS SITE?		ARE MEALS PREPARED ON SITE? YES/NO	WHICH MEAL IS SERVED/DELIVERED EACH DAY? (CHECK ALL THAT APPLY)			DAYS OF THE WEEK C-1 MEALS ARE SERVED	WHAT TIME ARE C-1 MEALS SERVED? (I.E. 11:00AM, ETC)	DAYS OF THE WEEK C-2 MEALS ARE DELIVERED
		C-1	C-2		BREAKFAST	LUNCH	DINNER			
1.	Eagle View Adult Center 1150 Prairie Center Pkwy. Brighton, CO 80601 303-655-2075 Fax: 303-655-2081 Eleanore Maestas - Coordinator Sue Corbett - Director scorbett@brightonco.gov	X		No		X		Monday - Thursday	11:30 AM	
2.	Westminster Commons Apartments 3180 West 76 th Ave. Westminster, CO 80030 303-428-2786 Hope Mullen - Coordinator Reynolds Lopez - Agency Contact wcommonsca@qwestoffice.net	X		No		X		Tues, Thurs and Fri	11:30 AM	
3.	Aurora Center for Active Adults 30 Del Mar Cir. Aurora, CO 80011 303-739-7549 Fax: 303-739-7953 John Bengston - Coordinator Nacy Baum - Agency Contact	X	X	No		X		Monday - Thursday	11:45 AM	Monday - Friday
4.	Malley Senior Center 3380 South Lincoln St. Englewood, CO 80113 303-762-2660 Fax: 303-762-2669 Nancy Dickeson - Coordinator Shelly Fritzpelle - Agency Contact	X		No		X		Monday - Friday	12:00 PM	

	SITE NAME/ADDRESS MEAL SITE COORDINATOR PHONE/FAX/EMAIL ADDRESS	WHICH PROGRAM(S) OPERATE OUT OF THIS SITE?		ARE MEALS PREPARED ON SITE? YES/NO	WHICH MEAL IS SERVED/DELIVERED EACH DAY? (CHECK ALL THAT APPLY)			DAYS OF THE WEEK C-1 MEALS ARE SERVED	WHAT TIME ARE C-1 MEALS SERVED? (I.E. 11:00AM, ETC)	DAYS OF THE WEEK C-2 MEALS ARE DELIVERED
		C-1	C-2		BREAKFAST	LUNCH	DINNER			
5.	Life Center 5804 S. Datura St. Littleton, CO 80120 303-953-7180 Mary Feeny - Coordinator Mauricio Carbone - Host Agency Contact crunyan@lifecenterlittleton.org	X		No		X		Thursday	11:15 AM	
6.	Georgetown Dining Center Georgetown Community Center 6th and Argentine St. Georgetown, CO 80444 303-567-2382 Fax: 303-567-1311 Cindy Sterner - Coordinator Bill Macy - Host Agency Contact	X		No		X		Wednesday	12:00 PM	
7.	Idaho Springs Dining Center Project Support Senior Center 1402 Miner St. Idaho Springs, CO 80452 303-567-2382 Fax: 303-567-1311 Cindy Sterner - Coordinator Bill Macy - Agency Contact	X	X	No		X		Monday - Friday	11:30 AM	Monday - Friday
8.	Barnum Recreation Center 360 Hooker St. Denver, CO 80219 303-937-4655 Betty Sanchez - Coordinator Luis Casales - Agency Contact barnum.recreation@denvergov.org	X		No		X		Thursday	11:30 AM	
9.	Cathedral Plaza 1575 Pennsylvania St. Denver, CO 80203 303-837-1424 Fax: 303-837-1427 Archie Holtz - Coordinator Cindy Musso - Agency Contact	X		No		X		Monday - Friday	11:30 AM	

	SITE NAME/ADDRESS MEAL SITE COORDINATOR PHONE/FAX/EMAIL ADDRESS	WHICH PROGRAM(S) OPERATE OUT OF THIS SITE?		ARE MEALS PREPARED ON SITE? YES/NO	WHICH MEAL IS SERVED/DELIVERED EACH DAY? (CHECK ALL THAT APPLY)			DAYS OF THE WEEK C-1 MEALS ARE SERVED	WHAT TIME ARE C-1 MEALS SERVED? (I.E. 11:00AM, ETC)	DAYS OF THE WEEK C-2 MEALS ARE DELIVERED
		C-1	C-2		BREAKFAST	LUNCH	DINNER			
10.	College View Center 2525 S. Decatur St. Denver, CO 80219 303.350.5565 Cathy Troute - Coordinator Sandra Sanchez-Guzman - Agency Contact communications@dicp.org	X		No				Thursday	12:00 PM	
11.	Denver Inner City Parish 1212 Mariposa St. Denver, CO 80204 303-629-0636 ext. 230 Fax: 303-629-7703 Evelyn Martinez - Coordinator communications@dicp.org	X		No		X		Wed, Thurs and Fri	12:00 PM	
12.	Jewish Community Center 350 South Dahlia St. Denver, CO 80246 303-316-6359 Fax: 303-320-0042 Lillian Shaw - Coordinator Suzi Malman - Agency Contact info@jccdenver.org	X		No		X		Tuesday, Thursday, Friday Kosher Lunch	11:45 AM	
13.	La Alma Dining Center La Alma Recreation Center 1325 West 11th Ave. Denver, CO 80204 720-869-2200 Fax: 303-572-4660 Zierra Lyons - Coordinator laalma.recreation@denvergov.org	X		No		X		Monday - Tuesday	11:45 AM	
14.	Maltese Cross Dining Center Maltese Cross Manor Apartments 1590 Yates St. Denver, CO 80204 303-629-5138 Marie Dalton - Coordinator Rob Haugen - Host Agency Contact	X		No		X		Monday - Friday	11:30 AM	

SITE NAME/ADDRESS MEAL SITE COORDINATOR PHONE/FAX/EMAIL ADDRESS	WHICH PROGRAM(S) OPERATE OUT OF THIS SITE?		ARE MEALS PREPARED ON SITE? YES/NO	WHICH MEAL IS SERVED/DELIVERED EACH DAY? (CHECK ALL THAT APPLY)			DAYS OF THE WEEK C-1 MEALS ARE SERVED	WHAT TIME ARE C-1 MEALS SERVED? (I.E. 11:00AM, ETC)	DAYS OF THE WEEK C-2 MEALS ARE DELIVERED
	C-1	C-2		BREAKFAST	LUNCH	DINNER			
15. Metro Village Dining Center Metro Village Apartments 1523 Quitman St. Denver, CO 80204 303-572-7716 Fax: 303-623-6208 Kathleen Berg - Coordinator leasing@denvermetroville.org	X		No		X		Monday - Friday	11:00 AM	
16. Montbello Dining Center Montbello Recreation Center 15555 E. 53rd Ave. Denver, CO 80239 720- 865-0580 Fax: 720-865-0581 Fred Gordon - Coordinator Oliver Van - Host Agency Contact montbello.recreation@denvergov.org	X		No		X		Tuesday & Thursday	12:00 PM	
17. Montbello Manor Dining Center Montbello Manor VOA 4355 Carson St. Denver, CO 80239 720-374-4955 Fax: 720-374-4952 Torey Dixon - Coordinator Raechelle Brooks-George - Agency Contact montbellomanor@voacolorado.org	X		No		X		Wednesday and Thursday	12:00 PM	
18. Mulroy Dining Center Mulroy Senior Center 3550 West 13th Ave. Denver, CO 80204 303-892-1540 Fax: 303-892-1420 Margarita Ceballos - Coordinator Virginia Hentschel - Host Agency Contact mceballos-gomez@ccdenver.org	X		No		X		Monday - Thursday	11:30 AM	
19. Senior Support II Dining Center Senior Support Services Center 846 East 18th Ave. Denver, CO 80218 303-832-1622 Julie Romero - Coordinator Ted Pascoe - Director tedpascoe@gmail.com	X		No		X		Monday - Friday	11:30 AM	

	SITE NAME/ADDRESS MEAL SITE COORDINATOR PHONE/FAX/EMAIL ADDRESS	WHICH PROGRAM(S) OPERATE OUT OF THIS SITE?		ARE MEALS PREPARED ON SITE? YES/NO	WHICH MEAL IS SERVED/DELIVERED EACH DAY? (CHECK ALL THAT APPLY)			DAYS OF THE WEEK C-1 MEALS ARE SERVED	WHAT TIME ARE C-1 MEALS SERVED? (I.E. 11:00AM, ETC)	DAYS OF THE WEEK C-2 MEALS ARE DELIVERED
		C-1	C-2		BREAKFAST	LUNCH	DINNER			
20.	Sunset Park Dining Center Sunset Park Senior Center 1865 Larimer St. Denver, CO 80202 303-297-0230 Fax: 303-295-3901 Connie Leake - Coordinator Melissa Cirello - Agency Contact MCirello@voacolorado.org	X		No		X		Monday - Friday	11:30 AM	
21.	Sunset Towers Dining Center Sunset Towers Apartments 1925 Larimer St. Denver, CO 80202 303-295-1874 303-296-1557 Fax: 303-295-3768 Suzanne Jacque - Coordinator Melissa Cirello - Agency Contact MCirello@voacolorado.org	X		No		X		Monday - Friday	11:30 AM	
22.	Thomas Bean Towers 2350 Cleveland Place Denver, CO 80205 720-956-3846 Melvin Anderson - Coordinator Nakeya Poole - Host Agency Contact	X		No		X		Monday - Friday	12:00 PM	
23.	Westwood Dining Center Westwood Community Center 1000 South Lowell Blvd. Denver, CO 80219 303-934-2181 Fax: 303-934-0035 Larry Ambrose - Agency Contact larryswic@gmail.com	X		No		X		Monday - Friday	11:30 AM	
24.	Zion Dining Center Zion Senior Center 5151 East 33rd Ave. Denver, CO 80207 303-333-5746 Fax: 303-861-1292 Rev. Leslie Spates - Coordinator Symone Thomas - Agency Contact	X		No		X		Monday - Thursday	11:30 AM	

SITE NAME/ADDRESS MEAL SITE COORDINATOR PHONE/FAX/EMAIL ADDRESS	WHICH PROGRAM(S) OPERATE OUT OF THIS SITE?		ARE MEALS PREPARED ON SITE? YES/NO	WHICH MEAL IS SERVED/DELIVERED EACH DAY? (CHECK ALL THAT APPLY)			DAYS OF THE WEEK C-1 MEALS ARE SERVED	WHAT TIME ARE C-1 MEALS SERVED? (I.E. 11:00AM, ETC)	DAYS OF THE WEEK C-2 MEALS ARE DELIVERED
	C-1	C-2		BREAKFAST	LUNCH	DINNER			
25. Castle Rock Dining Center Castle Rock Senior Center 2323 N Woodlands Blvd. Castle Rock, CO 80104 303-688-9498 Fax: 303-814-1035 Juli Asbridge - Coordinator Debbi Haynie - Director Susan Santamaria-Fenton - Coordinator crsc@CRgov.com	X	X	No		X		Tuesday, Thursday and Friday	11:30 AM	Monday - Friday
26. Gilpin County Senior Services 2960 Dory Hill Road Suite #100 Black Hawk, CO 80422 303-582-5444 Fax: 303-582-5789 Mary Ellen Makosky - Coordinator Gilpinseniors@co.gilpin.co.us	X	X	Yes		X		Mon, Wed and Fri	12:15 PM	Monday - Friday
27. Golden Dining Center First Presbyterian Church 17707 West 16th Ave. Golden, CO 80401 303-279-5591 Fax: 303-384-3986 Irene Obermeyer - Coordinator staff@goldenpresbyterian.org	X		No		X		Wednesday	12:00 PM	
28. Lakewood Dining Center Clements Community Center 1580 Yarrow St. Lakewood, CO 80214 303-987-4820 Fax: 303-987-4841 Jean Engstrom - Coordinator Dawn Sluder - Host Agency Contact clements@lakewood.org	X		No		X		Monday - Thursday 1st Friday of month	12:00 PM	
29. Wheat Ridge Dining Center Highland South Apartments 6360 West 38th Ave Bldg. B Wheat Ridge, CO 80033 303-940-2068 Jackie Barnard - Coordinator Nacy McClain - Agency Contact	X		No		X		Tuesday - Thursday	12:00 PM	

SITE NAME/ADDRESS MEAL SITE COORDINATOR PHONE/FAX/EMAIL ADDRESS	WHICH PROGRAM(S) OPERATE OUT OF THIS SITE?		ARE MEALS PREPARED ON SITE?	WHICH MEAL IS SERVED/DELIVERED EACH DAY? (CHECK ALL THAT APPLY)			DAYS OF THE WEEK C-1 MEALS ARE SERVED	WHAT TIME ARE C-1 MEALS SERVED? (I.E. 11:00AM, ETC)	DAYS OF THE WEEK C-2 MEALS ARE DELIVERED
	C-1	C-2	YES/NO	BREAKFAST	LUNCH	DINNER			
30. Volunteers of America Meals on Wheels Dining Centers 2660 Larimer Street Denver, CO 80205 303-297-0408 Fax:720-264-3306 Dale Elliott - Director delliott@voacolorado.org www.voacolorado.org		X	Yes		X				Monday-Friday

COMMUNITY FOCAL POINTS AND SENIOR CENTERS

LIST ALL FOCAL POINTS AND SENIOR CENTERS INCLUDING NUTRITION SITES IF IT IS A FOCAL POINT

	CENTER NAME ADDRESS, CITY, ZIP CODE PHONE NUMBER CONTACT EMAIL	CHECK IF FACILITY IS:		
		A FOCAL POINT	A SENIOR CENTER	FUNDED THROUGH TITLE III-B or SFSS
1.	Aurora Dining Center Aurora Center for Active Adults 30 Del Mar Cir. Aurora, CO 80011 303-739-7549 Fax: 303-739-7953 John Bengston - Coordinator Patty Hicks - Director	X		
2.	Castle Rock Dining Center Castle Rock Senior Center 2323 N Woodlands Blvd. Castle Rock, CO 80104 303-688-9498 Fax: 303-814-1035 Debbi Haynie - Manager Tina Whitby - Coordinator	X	X	X
3.	Georgetown Dining Center Georgetown Community Center 6th and Argentine St. Georgetown, CO 80444 303-567-2382 Fax: 303-567-1311 Cindy Sterner - Coordinator Bill Macy - Host Agency Contact		X	
4.	Gilpin County Senior Services 2960 Dory Hill Road Suite #100 Black Hawk, CO 80422 303-582-5444 Fax: 303-582-5789 Mary Ellen Makosky - Coordinator Gilpinseniors@co.gilpin.co.us	X		X
5.	Golden Dining Center First Presbyterian Church 17707 West 16th Ave. Golden, CO 80401 303-279-5591 Irene Obermeyer - Coordinator	X		

COMMUNITY FOCAL POINTS AND SENIOR CENTERS

LIST ALL FOCAL POINTS AND SENIOR CENTERS INCLUDING NUTRITION SITES IF IT IS A FOCAL POINT

	CENTER NAME ADDRESS, CITY, ZIP CODE PHONE NUMBER CONTACT EMAIL	CHECK IF FACILITY IS:		
		A FOCAL POINT	A SENIOR CENTER	FUNDED THROUGH TITLE III-B or SFSS
1.	Aurora Dining Center	X		
6.	Idaho Springs Dining Center		X	
	Project Support Senior Center			
	1402 Miner St.			
	Idaho Springs, CO 80452			
	303-567-2382			
	Fax: 303-567-1311			
	Cindy Sterner - Coordinator			
	Bill Macy - Agency Contact			
7.	La Alma Dining Center	X		
	La Alma Recreation Center			
	1325 West 11th Ave.			
	Denver, CO 80204			
	720-869-2200			
	Fax: 303-572-4660			
	Dennis Weber - Coordinator			
8	Lakewood Dining Center	X		
	Clements Community Center			
	1580 Yarrow St.			
	Lakewood, CO 80214			
	303-987-4820			
	Fax: 303-987-4841			
	Jean Engstrom - Coordinator			
	Dawn Sluder - Host Agency Contact			
9.	Malley Senior Center		X	
	3380 South Lincoln St.			
	Englewood, CO 80113			
	303-762-2660			
	Fax: 303-762-2669			
	Nancy Dickeson - Coordinator			
	Shelly Fritzpelle - Agency Contact			
10.	Maltese Cross Dining Center	X		
	Maltese Cross Manor Apartments			
	1590 Yates St.			
	Denver, CO 80204			
	303-629-5138			
	Emma Haines - Coordinator			
	Rob Haugen - Host Agency Contact			

COMMUNITY FOCAL POINTS AND SENIOR CENTERS

LIST ALL FOCAL POINTS AND SENIOR CENTERS INCLUDING NUTRITION SITES IF IT IS A FOCAL POINT

	CENTER NAME ADDRESS, CITY, ZIP CODE PHONE NUMBER CONTACT EMAIL	CHECK IF FACILITY IS:		
		A FOCAL POINT	A SENIOR CENTER	FUNDED THROUGH TITLE III-B or SFSS
1.	Aurora Dining Center	X		
11.	Metro Village Dining Center	X		
	Metro Village Apartments			
	1523 Quitman St.			
	Denver, CO 80204			
	303-572-7716			
	Fax: 303-623-6208			
	John Lennox - Coordinator			
	Desiree Little - Host Agency Contact			
12.	Montbello Dining Center	X		
	Montbello Recreation Center			
	15555 E. 53rd Ave.			
	Denver, CO 80239			
	720- 865-0580			
	Fax: 720-865-0581			
	Fred Gordon - Coordinator			
	Oliver Van - Host Agency Contact			
13.	Montbello Manor Dining Center	X		
	Montbello Manor VOA			
	4355 Carson St.			
	Denver, CO 80239			
	720-374-4955			
	Fax: 720-374-4952			
	Erin Pickford - Coordinator			
	Sheila Cody - Agency Contact			
14.	Mulroy Dining Center	X		
	Mulroy Neighborhood Center			
	3550 West 13th Ave.			
	Denver, CO 80204			
	303-892-1540			
	Fax: 303-892-1420			
	Margarita Ceballos - Coordinator			
	Kerry Blacker - Host Agency Contact			
15.	Senior Support II Dining Center		X	
	Senior Support Services Center			
	846 East 18th Ave.			
	Denver, CO 80218			
	303-832-1622			

COMMUNITY FOCAL POINTS AND SENIOR CENTERS

LIST ALL FOCAL POINTS AND SENIOR CENTERS INCLUDING NUTRITION SITES IF IT IS A FOCAL POINT

	CENTER NAME ADDRESS, CITY, ZIP CODE PHONE NUMBER CONTACT EMAIL	CHECK IF FACILITY IS:		
		A FOCAL POINT	A SENIOR CENTER	FUNDED THROUGH TITLE III-B or SFSS
1.	Aurora Dining Center	X		
16.	Sunset Park Dining Center		X	
	Sunset Park Senior Center			
	1865 Larimer St.			
	Denver, CO 80202			
	303-297-0230			
	Fax: 303-295-3901			
	Connie Leake - Coordinator			
	Torey Dixon - Agency Contact			
17.	Sunset Towers Dining Center	X		
	Sunset Towers Apartments			
	1925 Larimer St.			
	Denver, CO 80202			
	303-295-1874			
	303-296-1557			
	Fax: 303-295-3768			
	Tony Graziano - Coordinator Alyce Pierre - Agency Contact			
18.	Volunteers of America	X		X
	Meals on Wheels Dining Centers			
	2660 Larimer Street			
	Denver, CO 80205			
	303-297-0408			
	Fax: 720-264-3306			
	www.voacolorado.org			
19.	Westwood Dining Center	X		
	Westwood Community Center			
	1000 South Lowell Blvd.			
	Denver, CO 80219			
	303-934-2181			
	Fax: 303-934-0035			
	Jan Marie Belle - Host Agency Contact			
20.	Wheat Ridge Dining Center	X		
	Highland South Apartments			
	6360 West 38th Ave Bldg. B			
	Wheat Ridge, CO 80033			
	303-940-2068			
21.	Zion Dining Center		X	
	Zion Senior Center			
	5151 East 33rd Ave.			
	Denver, CO 80207			
	303-333-5746			

REGIONAL ADVISORY COUNCIL MEMBERSHIP

List all persons presently serving as members of your Regional Advisory Council.

NAME	ORGANIZATION AFFILIATION
Ada Anderson	Douglas County
Anne Gross	Arapahoe County
Barbara Boyer	Arapahoe County
Carolyn Scharf	DRCOG Board
Cary Johnson	Jefferson County
Cathy Noon	Arapahoe County
Connie Ward	Jefferson County
Dawn Perez	Adams County
Donna Mullins	Jefferson County
Houston Elam	Arapahoe County - Community Member
Jessica Sandgren	DRCOG Board, Adams-Thornton
Joyce Gallagher	Adams County
Karie Erickson	Douglas County
Larry Strock	Town of Lochbuie
Mary Ellen Makosky	Gilpin County
Perla Gheiler	Denver Office on Aging
Phil Cernanec	Arapahoe former Mayor Littleton
Robert Brocker	Denver Community Member
Rober Davis	City and County of Broomfield
Ruth Starr	Denver Office on Aging
Sean Wood	Clear Creek County
Sharon Perea	Gilpin County

STATEMENT OF INTENT

The Area Plan

Is hereby submitted for

AREA AGENCY ON AGING (AAA) NAME

REGION

For the period July 1, 2019 through June 30, 2023

This Area Plan includes all assurances plans under provisions of the Older Americans Act during the period identified. The Area Agency on Aging identified above shall assume full responsibility to develop and administer the Area Plan in accordance with the requirements of the Older Americans Act and related State regulations and policy. In accepting this authority, the Area Agency on Aging assumes responsibility to promote the development of a comprehensive and coordinated system of community services and to serve as the advocate and focal point for older persons in the planning and service area.

The Area Plan has been developed in accordance with the rules and regulations specified under the Older American's Act and Staff Manual Volume 10, and is hereby submitted to the Colorado Department of Human Services, Division of Aging and Adult Services for review and approval.

SIGNATURES:



Director,
Area Agency on Aging

3/20/19
DATE



Chairperson,
Area Agency on Aging
Advisory Council

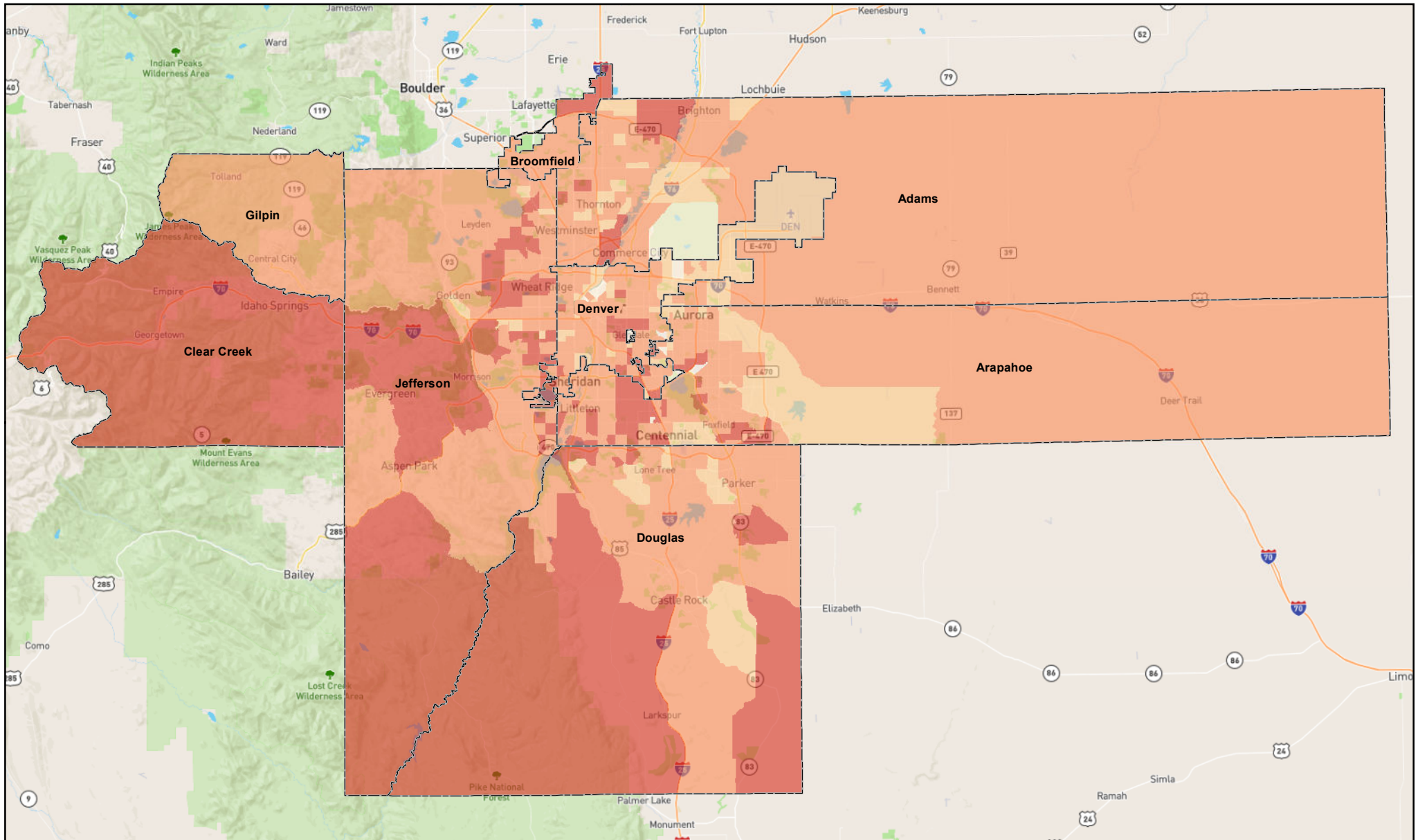
3/15/2019
DATE

Chairperson,
Governing Board of the
Area Agency on Aging

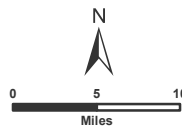
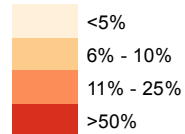
DATE

APPENDIX: MAPS

MAP 1 AAA 4 Year Data Plan: 60+ Years Old



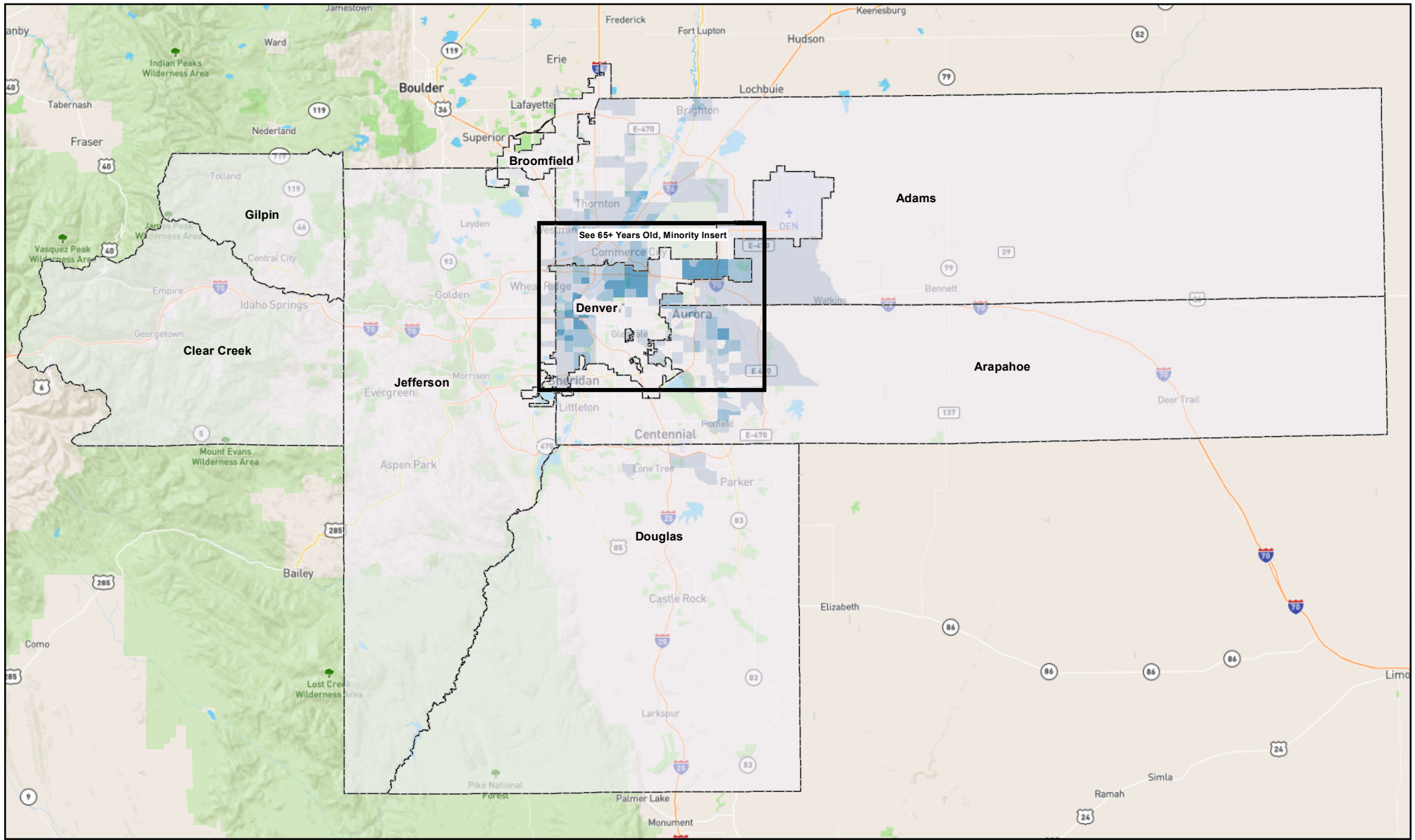
Percent of the Population 60+ Years Old



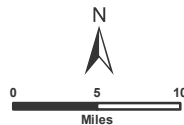
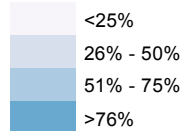
SOURCE DATA: DRCOG, 2017 5 Year ACS, ESRI, MapBox Basemap
 Projection: State Plane Colorado Central, NAD 83 (feet)

This data is intended for informational purposes only. DRCOG provides this information on an "as is" basis and makes no guarantee, representation or warranty, either express or implied, that the data will be error free. DRCOG further makes no guarantees, representations or warranties, either express or implied, as to the completeness, accuracy or correctness of the data, or as to merchantability or fitness of the data for a particular use or purpose. DRCOG is not responsible to any user for any costs, expenses, liabilities or damages arising from inconsistencies in its data or from any use of the information.

AAA 4 Year Data Plan: 65+ Years Old, Minority



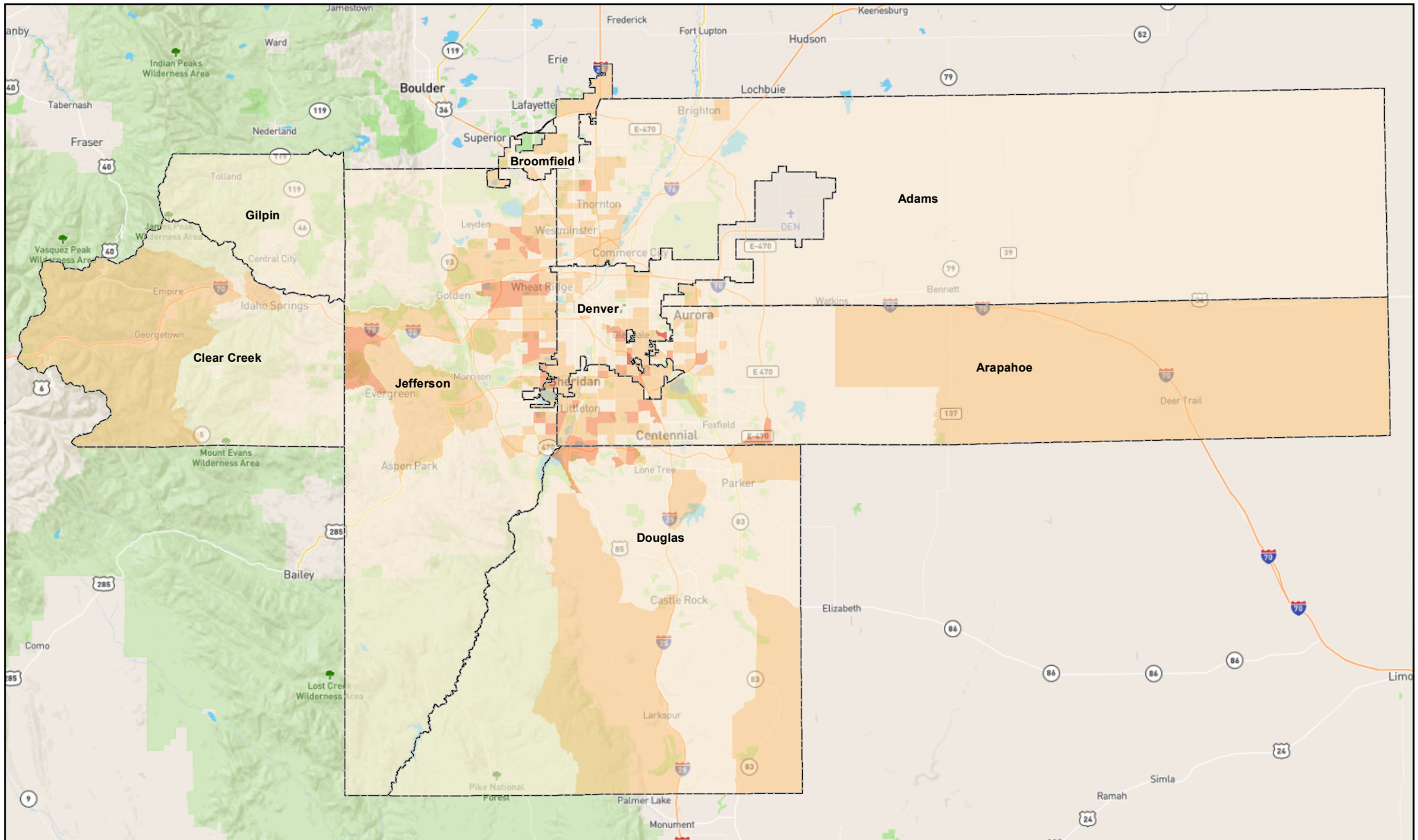
Percent of the Population 65+ Years Old, Minority



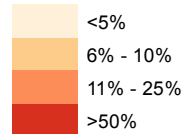
SOURCE DATA: DRCOG, 2017 5 Year ACS, ESRI, MapBox Basemap
 Projection: State Plane Colorado Central, NAD 83 (feet)

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MAP 2 AAA 4 Year Data Plan: 75+ Years Old



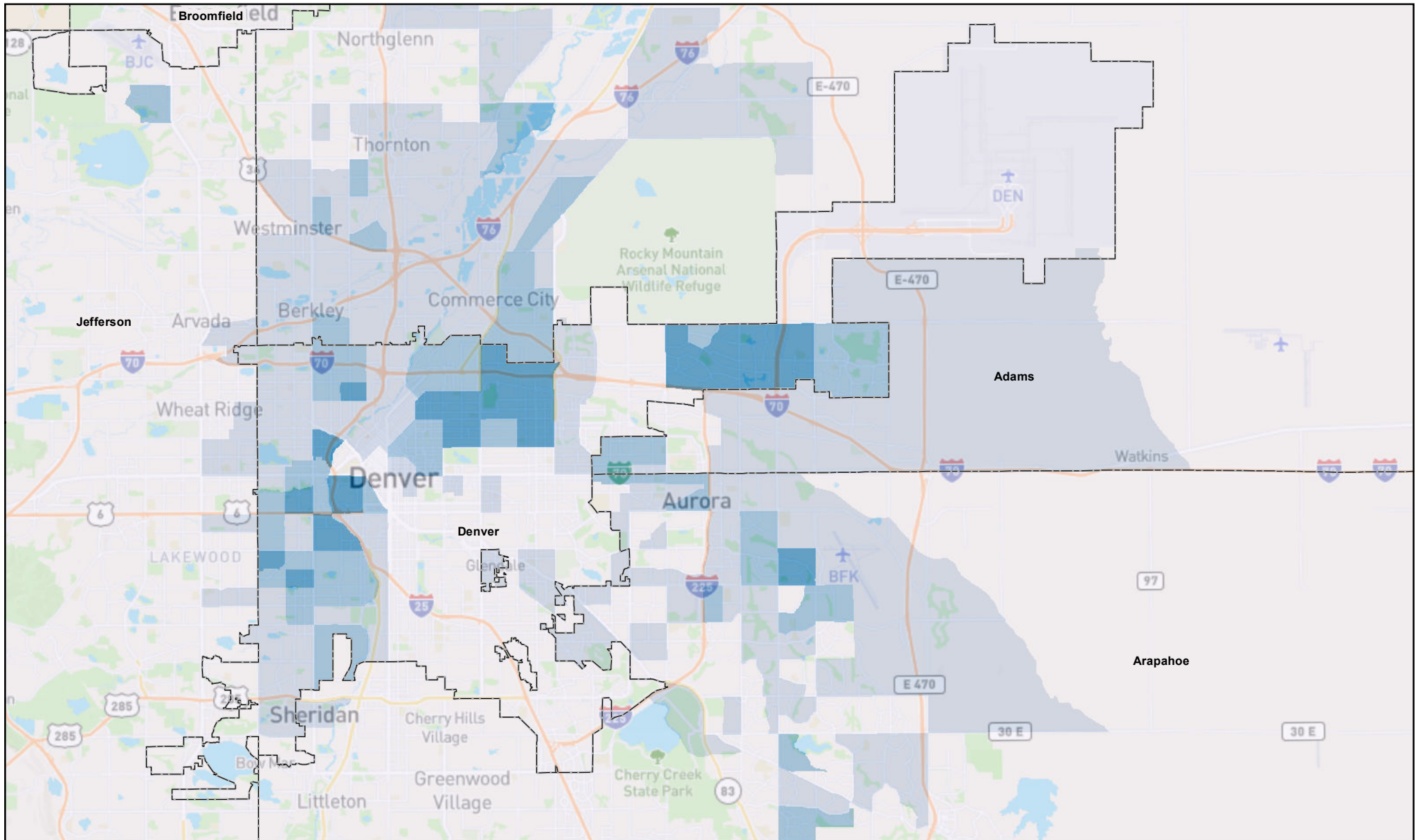
Percent of the Population 75+ Years Old



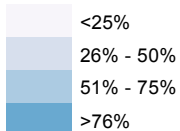
SOURCE DATA: DRCOG, 2017 5 Year ACS, ESRI, MapBox Basemap
Projection: State Plane Colorado Central, NAD 83 (feet)

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65+ Years Old, Minority: Insert



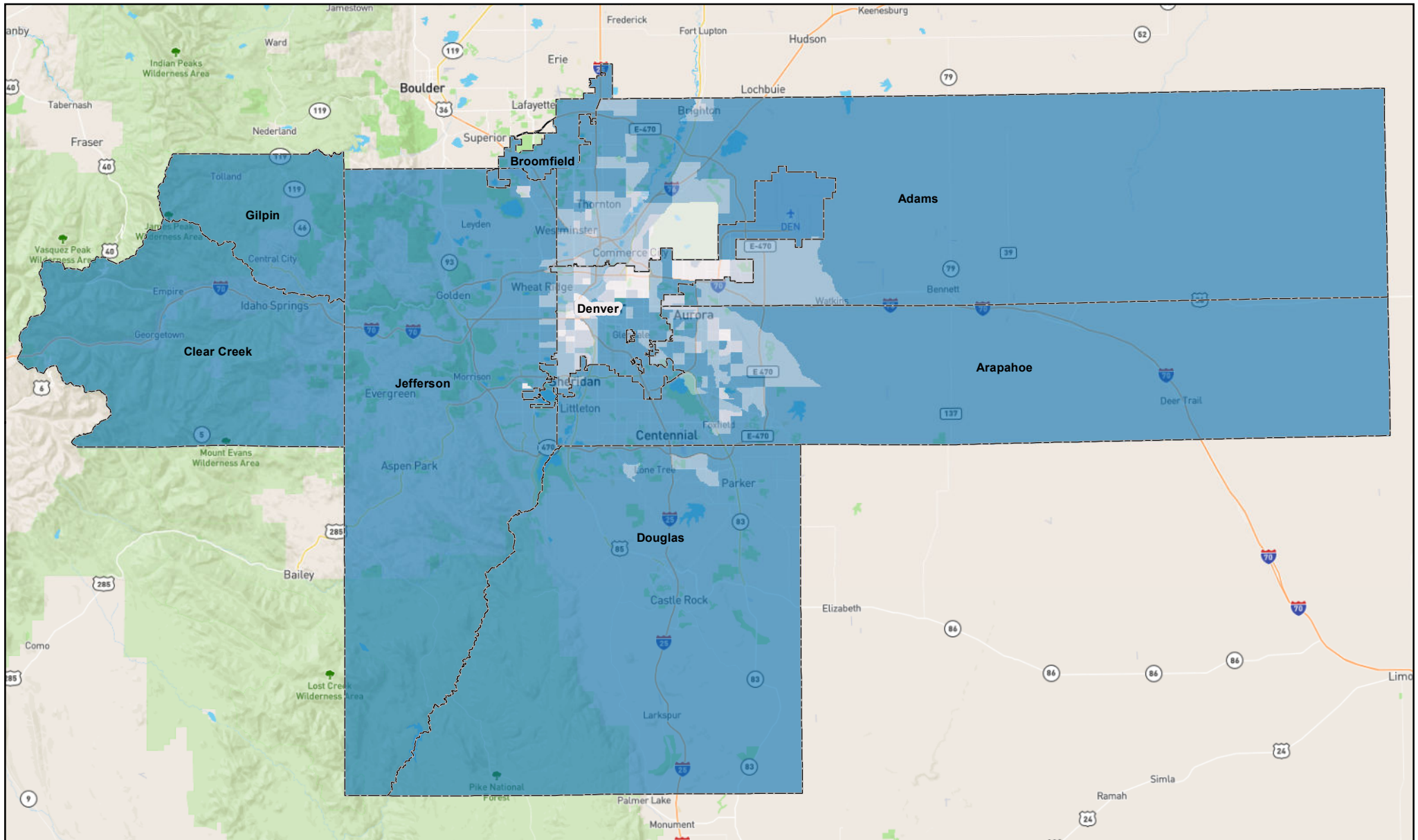
Percent of the Population 65+ Years Old, Minority



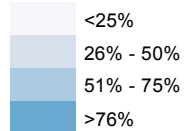
SOURCE DATA: DRCOG, 2017 5 Year ACS, ESRI, MapBox Basemap
 Projection: State Plane Colorado Central, NAD 83 (feet)

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MAP 4 AAA 4 Year Data Plan: 65+ Years Old, White

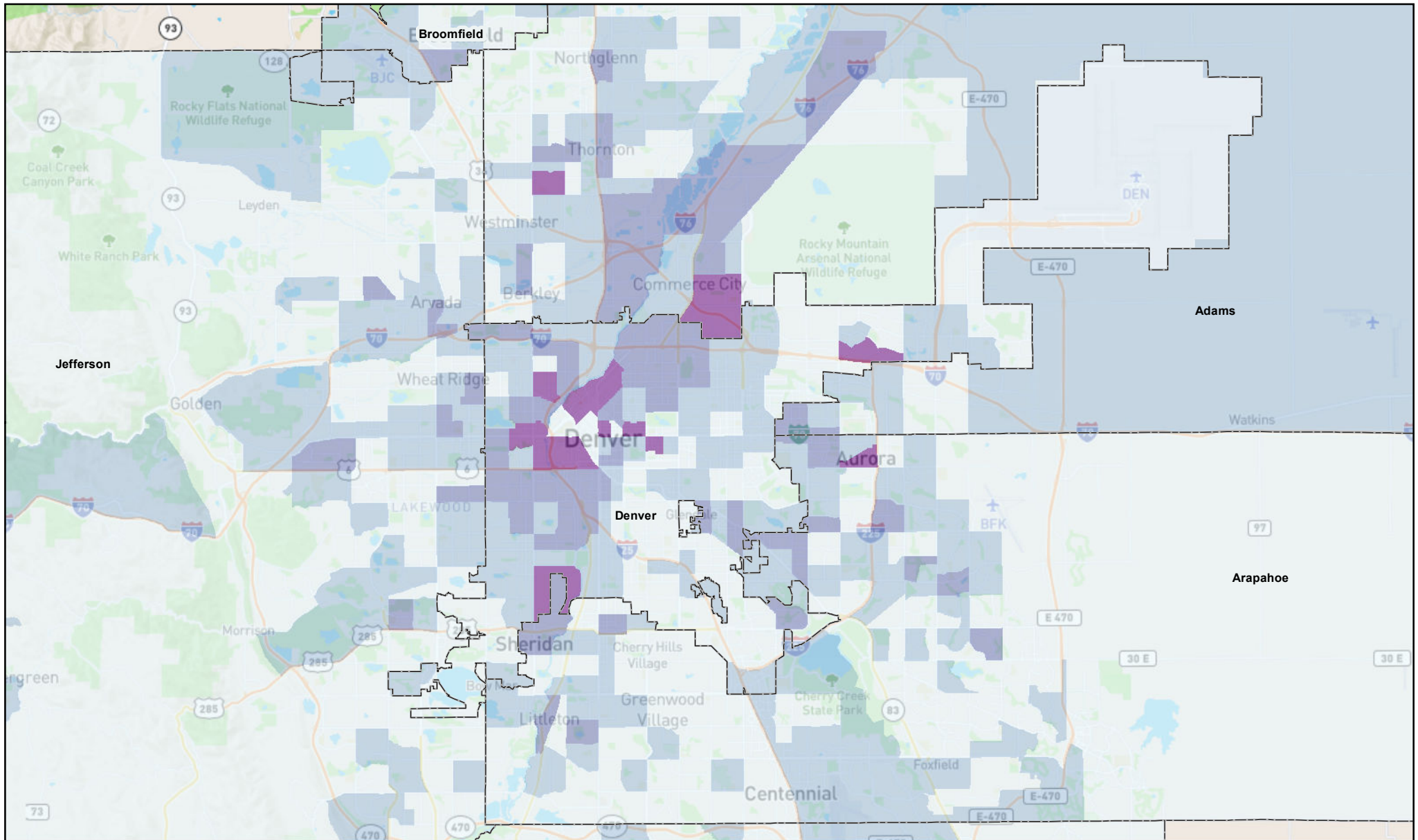


Percent of the Population 65+ Years Old, White

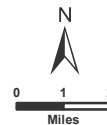
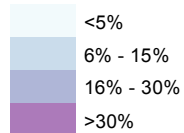


SOURCE DATA: DRCOG, 2017 5 Year ACS, ESRI, MapBox Basemap
 Projection: State Plane Colorado Central, NAD 83 (feet)

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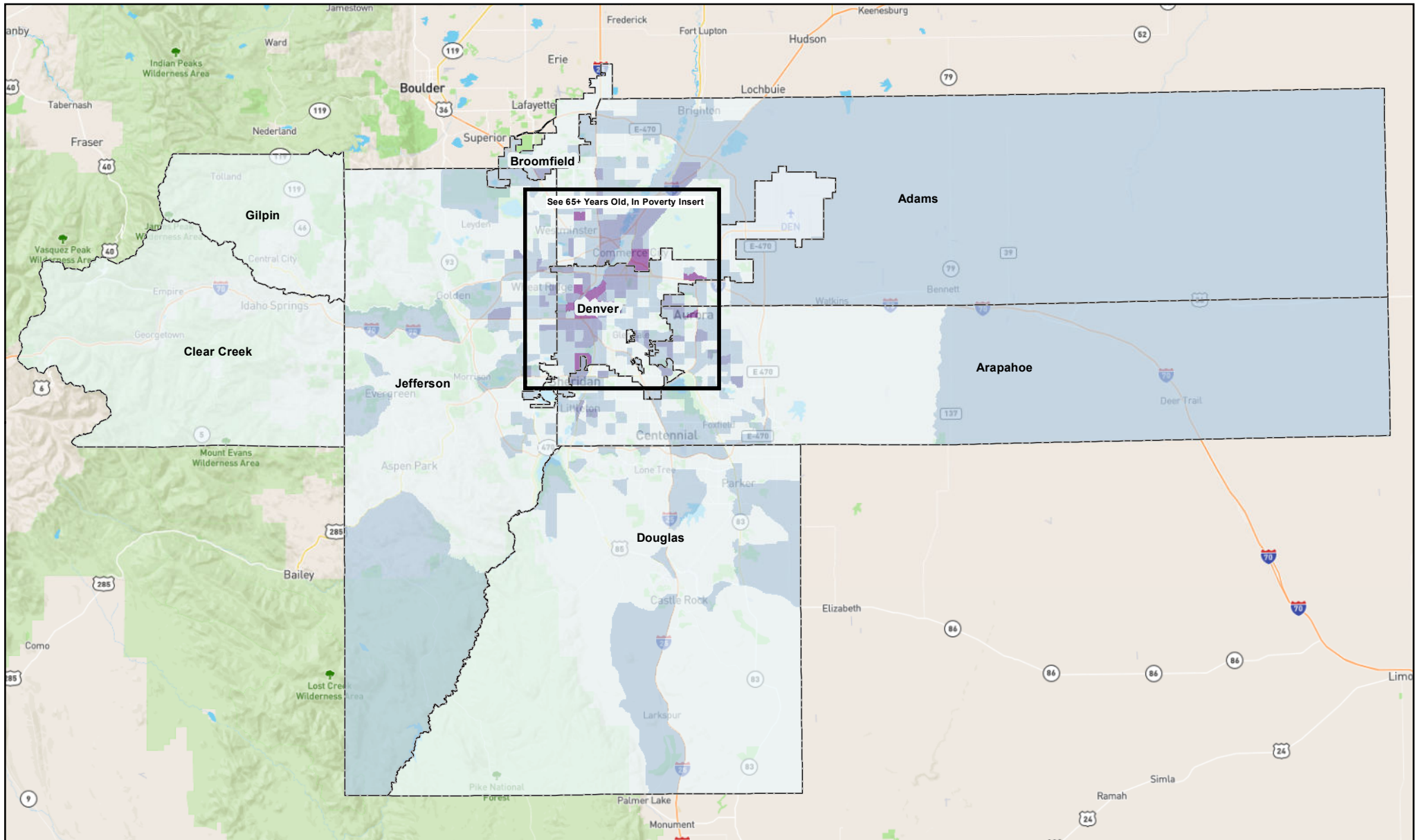
Percent of the Population 65+ Years Old, Income Below Federal Poverty Line



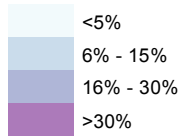
SOURCE DATA: DRCOG, 2017 5 Year ACS, ESRI, MapBox Basemap
 Projection: State Plane Colorado Central, NAD 83 (feet)

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MAP 5 AAA 4 Year Data Plan: 65+ Years Old, In Poverty



Percent of the Population 65+ Years Old, Income Below Federal Poverty Line



SOURCE DATA: DRCOG, 2017 5 Year ACS, ESRI, MapBox Basemap
 Projection: State Plane Colorado Central, NAD 83 (feet)
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 cogshare/GIS/Aging/AAA_4YearDataPlanGIS
 CC 12/10/2018

Speaker	Date	Comment	Response
Gretchen Vidergar Citizen	March 15, 2019	Worked as occupational therapist for an east coast county and there is a fund available for people to stay in their homes with really simple changes, very rewarding, might be something to explore, these are low tech modifications like lighting and grab bars that can help people stay in their homes as they age.	Jayla: We have funds for fall prevention, but I am interested in talking to you more about this program and will contact you if you sign in on sheet.
Phil Cernanec – Committee Chair, Arapahoe County	March 15, 2019	Importance of aging to the region	
Cathy Noon – Committee Member, Arapahoe County	March 15, 2019	What are next steps for plan? Does it go to the Board?	
Larry Strock – DRCOG Board	March 15, 2019	40 years ago, dealt with parents, it was hard to get any services at all, relied on relatives for help, but when that goes on for year it is very difficult. When I go through the report and see all the services available, it is incredible. But there is a gap of getting this information out to the people – 6 out of 10 don't know this is available and are seeking out help.	
Phil Cernanec – Committee Chair, Arapahoe County	March 15, 2019	Resource Center visitors are mostly adult children asking for help who are more tech savvy. The navigation of services is a big issue and many folks are not aware of the services.	Jayla Sanchez-Warren: This is the bane of my existence for my whole career, it is so hard to get the info out, but also worry about capacity of services if more people knew.
Phil Cernanec – Committee Chair, Arapahoe County	March 15, 2019	People only go to assisted living after crises – our Governor doesn't seem to focus on seniors, but the Lieutenant Governor might be more focused on it.	
Bob Brocker – Committee Member, Denver at Large	March 15, 2019	How many people are receiving services? Versus are on waitlists?	Jayla Sanchez-Warren: Key is data gathering, data collection, challenge of not being able to provide services.
Bob Brocker – Committee Member, Denver at Large	March 15, 2019	But point about not advertising more – if you built up waitlist would that help build up funding?	

Speaker	Date	Comment	Response
Tex (Houston) Elam – Committee Member, Arapahoe County at Large	March 15, 2019	What Jayla said is crucial and mind-boggling, but I don't think that's the message to send out. The message is that we're here to help. There is a niche marker for example, sixty percent of bling people don't know what talking books are – we always hoped and worked at getting people involved. I think what worked and when people got more aware, we added a question about did they know anybody else who could use this service? That increased services.	
Bob Brocker – Committee Member, Denver at Large	March 15, 2019	On page 6 of the report, the bullets, are these in any particular order of importance?	Jayla Sanchez-Warren: The top 5 are the top 5 that came out, most common
Cathy Noon – Committee Member, Arapahoe County	March 15, 2019	Maybe add language that this is listed in order of importance/frequency of comments. Worth having because you may see trends, helps to give the reader an idea of biggest issues.	
Bob Brocker – Committee Member, Denver at Large	March 15, 2019	Saying something like the "Top 5 are these..." would help me.	
Permalink submitted by Janet Herman via DRCOG email	March 11, 2019	PERMALINK SUBMITTED BY JANET HERMAN (NOT VERIFIED) ON MARCH 11, 2019 - 3:45PM There is a desperate need for single floor housing for the older members of our county, Something like patio homes and that need to be near shopping centers. Other amenities like pools and senior center are available now so are not needed in senior housing areas.	