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TO: Service Providers in the North Central Connecticut Area

FROM: Maureen McIntyre, Executive Director

RE: 2018 PROPOSAL REVIEW PRIORITIES

The program funding priorities for Title III funds for Federal Fiscal Year 2018 have been approved by the NCAAA Advisory Council and Board of Directors. These priorities are based on mandates of the Older Americans Act and local needs assessments done for the four-year Area Plan covering FFY 2014 through FFY 2017. With the guidance of these priorities, difficult decisions can be made as to which proposals should be recommended for 2018 funding.

RESOURCES:

The Older Americans Act (OAA) was reauthorized on October 17, 2006. FFY 2018 Title III funds are expected to reflect minor changes compared to the FFY 2017 level. NCAAA will prepare a budget when final numbers are received from the Connecticut State Department on Aging (SDA).

GOALS:

Older Americans Act funding should be used as “seed money.” This federal funding should start programs that will later be supported by local communities. That is why we have a formula that requires a local match. Over a three-year period, OAA funding declines as local resources increase. OAA funding supports programs that coordinate and collaborate and this is encouraged to maximize efforts, resources, and efficiencies.

The OAA mandates that services be targeted to those older individuals with the greatest social and economic need, with particular attention to: low income older individuals, low income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas. OAA dollars are not to be used to duplicate current services or to supplant resources that are no longer available.

The basic goal of OAA funding is to identify new elderly service needs in the community and develop new programs and services.

MANDATES:

OAA and the SDA also mandate that we fund the following social services areas under Title III-B:

- In Home (25% of total funding, minimum)

“Enhancing the quality of life for older adults, individuals with disabilities and their caregivers in North Central Connecticut by ensuring that they have access to quality, cost-effective services.”



- Access (16% of total funding, minimum)
- Legal (6% of total funding, minimum)
- Discretionary based on local priorities (53%)

Title III-C, D, and E are allocated separately with funding targeted for Nutrition, Disease Prevention/ Health Promotion services, and services for Family Caregivers.

ASSESSMENT OF LOCAL NEEDS:

Based on NCAAA's assessment of local needs, the following areas will be priorities for funding under Title IIIB, D, and E, in 2018:

1. **ACCESS SERVICES.** Programs that provide older adults access to available services. Services include transportation; information and referral; outreach; and programs designed to provide enhanced and/or integrated access to community-based health services. Priority will be given to programs that offer transportation across town lines and during extended hours, assisted transportation, and enhanced transportation to medical appointments. Priority will also be given to programs that offer expanded outreach services to isolated older adults.
2. **IN HOME SERVICES.** Programs that provide in-home care services not covered by another funding source, including but not limited to homemaker, home health aide, chore, and companion. Priority will be given to programs providing new or expanded services and those that specifically target services to older persons with the greatest social and economic need.
3. **ADULT DAY CARE SERVICES.** Programs that provide a structured setting with social, health, and rehabilitative services for frail older adults in an effort to prevent premature institutionalization and provide respite for caregivers of older adults. Priority will be given to programs that provide extended care and respite services during evenings and weekends.
4. **LEGAL SERVICES.** Programs that provide free or low-cost legal services to older adults. Priority will be given to programs that address elder rights issues including, but not limited to: discrimination; eligibility determination and appeals; grandparent rights; housing and residents' rights; patients' rights; protective service issues; and other civil cases. Priority will also be given to programs that target services to culturally and/or geographically isolated older persons in the North Central region.
5. **EVIDENCE-BASED HEALTH PROMOTION SERVICES.** Programs that provide services related to the prevention and mitigation of the effects of chronic disease, alcohol and substance abuse reduction, smoking cessation, weight loss and control, stress management, falls prevention, physical activity, and improved nutrition. Priority will be given to programs that include an evidence-based intervention that meets the highest-level criteria, established by the US DHHS Administration for Community Living.

6. CAREGIVER SUPPORT FOR GRANDPARENTS/RELATIVES RAISING CHILDREN. Programs that provide services for grandparents or other older relatives raising children, including but not limited to, information about the availability of support services, assistance in gaining access, individual and group counseling to help make decisions and solve problems, and opportunities for respite. Priority will be given to programs providing new or expanded services and those that specifically target services to individuals with the greatest social and economic need, including caregivers providing care for children with severe disabilities.
7. EDUCATION, COUNSELING, & SOCIAL SUPPORT SERVICES. Programs that provide education about issues and services designed to assist older adults, their families and caregivers. Priority will be given to programs providing mental health services to older adults, including outreach for, education concerning, screening for, and referral to such services. Priority will also be given to programs that provide services designed to improve the knowledge of and connect individuals to available community supports.
8. OTHER COMMUNITY SERVICES. Programs may be considered a priority for funding if designed to target older adults that are the most vulnerable, including but not limited to frail or homebound individuals and persons with disabilities. Priority will be given to programs coordinated and delivered through multipurpose senior centers.