November 18, 2021

Charles Robinson, Esq., Board President
Area Agency on Aging of Pasco-Pinellas, Inc.
9549 Koger Boulevard, Gadsden Building, Suite 100
St. Petersburg, FL 33702

Dear Mr. Robinson:

Enclosed is the Department of Elder Affairs' (DOEA) October 18 - 22, 2021, Monitoring Report of the Area Agency on Aging of Pasco-Pinellas, Inc. (AAAPP), for the calendar year ending December 31, 2020. The report, which reflects observations noted and discussed during the exit conference, formalizes areas for improvement and recommendations that must be addressed by (AAAPP)'s management and board.

Monitoring includes tests of compliance with federal and state programs, contracts, and sub-awards. It should be noted that testing was not comprehensive in scope to identify all deficiencies and excluded specific program tests of the following areas: budgeting, targeting, surplus-deficit, co-payments, subcontractor monitoring, client satisfaction, property, and procurement. These areas will be addressed through technical assistance by your contract manager.

Please review the observations and recommendations for improvement contained in the report. Your DOEA contract manager, Meghan Gregg, will provide technical assistance and guidance to address performance and compliance issues, if applicable, including corrective action or other activities as appropriate, to ensure that expectations are achieved.

There are many best practices that DOEA has cited as exemplary over the years. AAAPP has put many policies into place that help its management and staff create a framework for successful compliance. AAAPP's Management and staff work together as a unified team providing excellent services to the seniors of Pasco and Pinellas counties.
On behalf of DOEA and the elder Floridians we serve, I want to thank you and your staff for the courtesy extended to DOEA staff during the review. We look forward to strengthening our shared commitment as we continue to explore ways to make a difference in the lives of Florida’s elders, their families, and caregivers.

Sincerely,

[Signature]

Richard Prudom
Secretary

cc: Anne Marie Winter, AAAPP Executive Director
    Monitoring and Quality Assurance Team Members
    Meghan Gregg, Contract Manager

Enclosure
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BACKGROUND

Due to the extraordinary and unprecedented circumstances of the COVID-19 pandemic that began in 2020 and continues today, the World Health Organization declared a Public Health Emergency of International Concern. Subsequently, the Governor of the State of Florida, Ron DeSantis, directed the Florida Department of Health to issue a Public Health Emergency and signed Executive Order 20-52 on March 9, 2020, declaring a state of emergency. The Executive Order remains in effect and expires June 26, 2021, unless extended.

To supplement Older Americans Act (OAA) funding for nutrition, supportive services, and other services, the Families First Act, the Coronavirus Aid, Relief, Economic Security (CARES) Act, and the American Rescue Plan Act (ARPA) grants to states were passed and signed into law and provided flexibilities to ensure uninterrupted services to older Floridians.

DOEA’s multi-tiered network of private, mostly nonprofit, human service organizations, consisting of AAAs, lead agencies, and service providers, delivers a broad array of programs and services. DOEA assessed the impact on aging services from the COVID-19 pandemic, in collaboration with other aging network partners. It was determined that activities required to evaluate the rising and changing needs of all elders during the emergency required adjustment to service and delivery models to safely provide essential goods and services that supported elders within their homes and communities and placed a substantial additional burden on the aging network.

Consequently, the combined weight of concern for vulnerable older adults during this emergency, the need for effective disaster response (including the implementation of safety protections), and the adaptation of service delivery to an increased number of older adults resulted in DOEA waiving the requirement to formally monitor the AAAs in 2020. Informal methods were used to ensure accountability and performance through traditional avenues such as contract management and accounting staff’s review and approval of area plans and payment requests, and review of the independent audit in accordance with the state and federal Single Audit Acts. Additionally, non-traditional methods were used such as the virtual meetings between the AAAs, DOEA senior management, and contract managers (held at first daily, then weekly, and gradually less often) to discuss challenges, needs, use of funds, flexibilities needed or extended, protective equipment availability, and temporary modifications to some services to facilitate delivery.

As the pandemic began to stabilize, DOEA determined that a modified programmatic and fiscal monitoring desk review of the AAAs in 2021 was viable and warranted, to assess the effectiveness of the technical assistance, and provide oversight of AAA partners and subcontractors.

In addition to the reduced scope of items reviewed under the objectives being evaluated this cycle, the Monitoring and Quality Assurance (MQA) Unit will refer significant deficiencies to DOEA’s contract managers for intensive technical assistance and enforcement.
EXECUTIVE SUMMARY

The Department of Elder Affairs (DOEA) conducted a programmatic and fiscal monitoring review of the Area Agency on Aging of Pasco-Pinellas, Inc. (AAAPP), on October 18 – October 22, 2021. DOEA’s monitoring was conducted in accordance with common procedures used to monitor federal and state programs, contracts, and subawards. Governing authorities used for the review included Office of Management and Budget (OMB) Circulars, the Code of Federal Regulations (CFR), and other applicable federal and state guidelines. Pursuant to Section 430.0401, Florida Statutes (F.S.), DOEA must submit to the Governor and Legislature an annual report that describes the result of its monitoring activities of the Area Agencies on Aging (AAAs).

AAAPP’s Board of Directors (Board) governs the agency and oversees its operations and administration of programs. The agency’s programs are both publicly and privately funded and provide an array of supportive services to elder residents in its PSA. AAAPP serves the 2-county region of Pasco and Pinellas counties, designated as PSA 5 (see Appendix, page A-4 for a statewide map of PSAs).

This year, DOEA staff performed an independent review of agency information and supporting documentation to discern areas for improvement. Areas of improvement are referred to DOEA’s Contract Manager for technical assistance to be provided. The enclosed Progress Report details the results of the review.

Overall, DOEA’s monitoring activities revealed that AAAPP is compliant with requirements related to the agency’s role as a major subrecipient of federal and state funds. Accordingly, DOEA recommends that AAAPP ensure continued high-quality services to Florida’s elders.
INTRODUCTION

Monitoring Scope, Objectives, and Methodology

DOEA’s monitoring and review of programmatic, fiscal, and operational activities of Information and Referral covered the period from January 1, 2020, through December 31, 2020. Staff reviewed client files randomly selected from the Emergency Home Energy Assistance for the Elderly Program (EHEAP), General Revenue (GR) programs, Imminent Risk referrals, Adult Protective Services (APS) referrals, Information and Referral (I&R) and Aging and Disability Resource Center (ADRC) operations, and Client Data Accuracy information for the period of January 1, 2020, through the beginning date of the fieldwork.

DOEA’s monitoring objectives for the desk review were to determine whether AAAPP did the following: 1) complied with its contracts and state and federal rules [refer to Appendix, pages A-2 and A-3], 2) adhered to standards of good practice within the industry, and 3) produced outcomes consistent with DOEA’s statutory mission and focus.

DOEA’s monitoring and review of AAAPP’s programs for this reporting period included inquiries of staff, and the examination of selected records, service providers’ documentation, and client case files. The review also focused on several interrelated areas that form the basis for effective internal control systems. The interrelated areas included governance systems, service delivery, resource use, due process/grievance procedures, and data integrity. Additionally, staff examined AAAPP’s independent auditor’s report and accompanying management letter for compliance with 215.97 F.S., the Florida Single Audit Act, and 2 CFR Part 200, Audits of States, Local Governments, and Non-Profit Organizations.

AAAPP’s performance of selected, legislatively mandated outcome measures is reflected for this period. DOEA is accountable for outcome measures at the state level (refer to Appendix, page A-1).

Planning and Service Area Profile

AAAPP’s service system includes private and public sector agencies that provide various options to help elders remain independent and in their homes.

Annualized Contract Allocations by Major Programs*:

<table>
<thead>
<tr>
<th>Program</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Older Americans Act (OAA)</td>
<td>$15,014,437.01</td>
</tr>
<tr>
<td>Other Federal Programs</td>
<td>907,790.18</td>
</tr>
<tr>
<td>Statewide Community-Based Programs</td>
<td>11,841,554.00</td>
</tr>
<tr>
<td>Medicaid Waiver Programs</td>
<td>895,228.36</td>
</tr>
<tr>
<td>Total Funding</td>
<td>$28,659,009.55</td>
</tr>
</tbody>
</table>

*For comparative purposes, programs reflect twelve (12) months of activities; however, contract periods may differ.
OAA-funded programs
Title III-B (Supportive Services)
Title III-C1 and III-C2 (Congregate and Home-Delivered Meals)
Title III-D (Health Promotion)
Title III-E (National Family Caregiver Support)
Title VII (Elder Abuse Prevention)
Title III (Coronavirus Aid, Relief, and Economic Security) CARES Act, and Families First Act

State-funded programs
Alzheimer’s Disease Initiative (ADI)
Community Care for the Elderly (CCE)
Home Care for the Elderly (HCE)
Local Services Program (LSP)

Other federally funded programs
Nutrition Services Incentive Program (NSIP)
Emergency Home Energy Assistance for the Elderly Program (EHEAP)
Serving Health Insurance Needs of Elders (SHINE)
Medicare Improvements for Patients and Providers Act (MIPPA)
Senior Medicare Patrol (SMP)

Joint federal- and state-funded programs
Aging and Disability Resource Center (ADRC)
PROGRESS REPORT

The following table summarizes the areas reviewed for this monitoring cycle and corresponding achievement, based on compliance with authoritative guidance and the expectations outlined in the contracts, DOEA Programs and Services Handbook (the Handbook), and interpretive guidelines. The format of this report has been modified for the 2020-2021 monitoring cycle only, and monitoring objectives have been paraphrased for this purpose. The following areas of review have been deferred to contract management or placed on hiatus for this cycle: Client Satisfaction, Targeting, Procurement, Subcontractor Monitoring, and Property. Areas not fully achieved will be addressed with technical assistance by DOEA Contract Managers in 2021, who will provide guidance for corrective action and follow-up (if applicable) to achieve improvement.

<table>
<thead>
<tr>
<th>Organization Governance, Leadership, and Administration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective: To ascertain that the AAA has in place a formal governance and oversight structure in the form of a duly elected Board of Directors (Board) and that board members are actively engaged and fulfilling their fiduciary responsibility as an effective and objective oversight body; to determine that the AAA has an active Advisory Council (AC) that advises the agency in developing and administering the area plan, programs, and actions that affect older persons in the planning and services area.</td>
</tr>
<tr>
<td>Observations: The review of Board and AC rosters and meeting minutes indicated that AAAPP was compliant with requirements, by-laws, and Articles of Incorporation. No concerns. Minutes indicate a very involved and functional Board and Advisory Council. Keep up the good work!</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Legislately-Mandated Outcome Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective: Confirm that the AAA implemented strategies identified in the Area Plan to increase achievement of DOEA’s standard performance outcomes.</td>
</tr>
<tr>
<td>Achievement of these measures for 2019-2020, and projections based on current data for 2020-2021, were provided for informational purposes only as DOEA is evaluating performance at a statewide level.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>APS Referrals</th>
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<tbody>
<tr>
<td>Objective: To verify that the first priority for service delivery is to high-risk clients referred by Department of Children and Families (DCF)/APS who are at risk of abuse, neglect, or exploitation to ensure their safety and prevent institutional placement. Verification is through file reviews to confirm that referred APS high-risk clients are assessed and a crisis-resolving service is provided within 72 hours of referral in accord with the statute and that APS was contacted within 24 hours for delays in service and jointly determined next best course of action.</td>
</tr>
<tr>
<td>Observations: Review of APS referrals revealed that an assessment was performed, and an APS recommended service was provided within 72 hours to four clients reported at high risk of abuse, neglect, or exploitation.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Prioritization of Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective: To verify prioritization of clients for service delivery is determined according to prioritization criteria and the assessed priority ranking of individuals (inclusive of elders placed on an Assessed Priority Consumer List, or APCL), ensuring that elders who are at risk for abuse, neglect, or exploitation, or who are at imminent risk of expensive nursing home placement, or are disabled adults aging out of DCF programs, or whose frailty level resulted in a higher priority score through a 701B assessment, receive services to remain in the community before lower risk, lower ranked individuals are served (in accordance with DOEA contracts and state and federal requirements, dependent on availability of funds).</td>
</tr>
<tr>
<td>Observations: AAAPP enrolled more high priority clients than low priority clients during this period of review: 33.8 percent High Priority “4s” and “5s” (52 percent including high-risk clients) versus 28.5 percent Low Priority “1s” and “2s.” (Note: Clients with a rank of “3” have been excluded in the prioritization analysis.)</td>
</tr>
</tbody>
</table>

PSA 5
had an average 100 percent completion of a 7015 screening and 100 percent completion of the 701B assessment at time of enrollment into case managed services: this is the only AAA to have achieved this for the year.

### Grievance and Complaints

Objective: To verify the AAA and its subcontractors follow their written guidelines to address discrimination, consumer complaints and/or grievances for service terminations, reductions, or suspensions from programs consistent with DOEA contract requirements, including formal grievance procedures in accord with CMS requirements for Medicaid Waiver clients to ensure their right to a fair hearing with DCF’s Office of Appeals.

**Observations:**

Review of documentation indicated that AAAPP and its subcontractors' grievance and complaint procedures are compliant with requirements.

### Client Satisfaction

Objective: Verify the AAA has and follows policies and procedures to evaluate consumer satisfaction with community-based services in accordance with Older American Act guidelines (OAA), DOEA Programs & Services Handbook, and the AAA’s area plan and analyzes trends to identify and correct causes of dissatisfaction toward the goal of improved services to consumers.

This area of review has been placed on hiatus for the 2020-2021 monitoring cycle, although contract management will continue to provide technical assistance as needed.

### Information and Referral (I&R)

Objective: To verify program administration ensures access to and delivery of quality information, and provides assistance and appropriate referrals for locally focused services to elders, their caregivers, and families in accordance with the OAA contract and DOEA policies using multiple resources through a multi-access “one-stop” system (e.g., internet, phone, mail, walk-in, or through other partner agencies) that integrates information, referral, and eligibility determination functions for elders and caregivers.

**Observations:**

Review of records selected from voicemail (VM) logs indicated the HelpLine is compliant with practices that assure access to and delivery of quality information, assistance, and appropriate referrals for locally focused services to elders, their caregivers, and families. Of 24 records selected from the months of February and August 2021, five calls were returned approximately five days late in August. AAAPP attributed this to a staffing shortage (their newest staff member was still in training and other staff took annual leave in August), and to increased call volumes they’ve experienced recently that they stated is due to an outreach campaign and a new initiative to produce post-screening letters with ranking information: their call volume has increased by 22 percent over the prior year’s statistics. Because of the high call volume compared to other AAAs, the proximity of the problematic month to the dates of our review, and stellar achievement of all other areas of review, this is considered an anomaly.

### Targeting of OAA Services

Objective: To verify AAAs use strategies and specific activities for providing services to older individuals with the greatest economic and social needs, low-income minority individuals, older individuals in rural areas, elders with severe disabilities, limited English speaking ability, and/or with Alzheimer’s disease or related disorders in accordance with the Older Americans Act (OAA).

This area of review has been deferred to contract management to provide technical assistance on an ongoing basis as needed.
## ADRC Operations
Objective: To verify AAAs ensure ADRC functions are performed by trained, qualified staff in accordance with contract requirements to counsel or assist elders identified through assessments as potentially Medicaid eligible in a customer-friendly manner, informing them of the Long-Term Care (LTC) program, and assisting them to apply for the program; provide appropriate information or referrals to elders for locally focused services using multiple resources through a multi-access “one-stop” system (e.g., internet, phone, mail, walk-in, or through other partner agencies); and utilize equipment/software that integrates information, referral, and eligibility determination functions for elders and caregivers to target service needs and to improve the quality of services.

**Observations:**
- Functions and structure were conducive to ensuring access to LTC services for elders and their caregivers through coordination of resources or referrals and using trained staff to provide accurate information about the program and assistance to potentially eligible individuals in applying. Review of nine calls in the months of February and August 2021 indicated compliance with requirements.

## EHEAP
Objective: To verify that assistance is provided to low-income households with at least one member who is age 60 or older that are experiencing a heating or cooling emergency through the program and verify that payments made on behalf of program participants are in accordance with EHEAP program guidelines.

**Observations:**
- Of 12 EHEAP files reviewed, 10 files did not use the application in effect at the time they applied for benefits. AAAPP is reminded to ensure that the latest application form is distributed to EHEAP providers to ensure current information is used to determine eligibility.

## Nutrition
Objective: To verify that the AAA, through its contracted providers, plans and coordinates nutritional services using a Licensed/Registered Dietitian to approve menus that meet the nutrient requirements for older adults in America; ensure food is prepared, handled, delivered, and served in a safe and sanitary environment; and provide monthly nutrition education by which older individuals will gain the understanding, skills, and motivation necessary to make informed food, activity, and behavior choices that can improve health and prevent chronic disease.

**Observations:**
- Review of documentation for two meal providers revealed substantial compliance with requirements that ensure elders receive tools to make healthy meal choices and receive safe, nutritious meals to improve health and prevent chronic disease.

## Background Screening
Objective: To ensure criminal history background screening is conducted at least every five years (through the correct portal that will assure any subsequent arrest notifications are received by the AAA or its providers) for staff, contract employees, and volunteers who meet the definition of a direct service provider, in compliance with statutes to assure they do not have prior criminal convictions that could compromise the safety of clients and that they agree to comply with privacy and confidentiality requirements.

**Observations:**
- Review of documentation confirmed that AAAPP complied with Level II background screening requirements for direct service providers to ensure the safety of clients, to satisfy privacy and confidentiality requirements, and to assure subsequent arrest notifications are received by the AAA or its providers.

## Health & Wellness
Objective: To verify that III D program activity focuses on disease prevention and health promotion activities through collaboration and partnerships with community agencies and volunteer organizations that target...
underserved and low-income minority elders, older individuals with limited English proficiency, older individuals residing in rural areas, and individuals with special needs, etc.

**Observations:**
Review of documentation revealed that program activities and functions complied with requirements that focus on providing disease prevention education and health promotion activities to targeted elders.

**Elder Abuse Prevention**
Objective: To determine program effectiveness in leveraging community resources through collaborative and coordinated efforts with volunteer organizations, community agencies, and other partners, and educating elders, caregivers, law enforcement, and other professionals in recognizing and combating elder abuse, neglect, and exploitation.

**Observations:**
Review of documentation confirmed that AAAPP met expectations in effectively collaborating with agencies and leveraged community resources to educate elders, caregivers, and professionals in recognizing and preventing elder abuse, neglect, and exploitation (ANE) in accordance with requirements.

**Respite for Elders Living in Everyday Families (RELIEF)**
Objective: To verify that AAAs are recruiting volunteers for RELIEF, providing support for the RELIEF volunteers to effectively manage services and provide in-home respite to caregivers of clients to facilitate their continuing care for family members in the home, in accordance with regulatory and contractual guidelines.

**Observations:**
AAAPP does not have a RELIEF contract.

**Serving Health Insurance Needs of Elders (SHINE)**
Objective: To verify the AAA is recruiting volunteers and providing support for them to effectively serve clients and perform outreach, giving free and unbiased health insurance information, counseling, and assistance to clients in accordance with regulatory and contractual guidelines.

**Observations:**
Review of selected documentation confirmed AAAPP is effectively managing the program that provides health insurance counseling to elders, in accordance with requirements.

**General Revenue Programs**
Objective: To verify that eligibility, assessment, and service delivery to clients for general revenue programs (CCE, ADI, HCE, and LSP) reflect the mission of DOEA in providing services to elders most in need, according to prioritization and frailty scores, to keep them in their homes and communities and avoid costly nursing home placement in compliance with program requirements.

**Observations:**
Review of 11 files selected from general revenue (GR) funded programs (CCE, HCE, and ADI) indicated mostly compliance with eligibility requirements for programs that support clients and their caregivers, allowing frail elders to remain in their homes and communities and avoid costly nursing home placement. Three files reviewed did not contain documentation that a timely 14-day follow-up was recorded for clients whose services were increased to determine satisfaction and confirm that needs were met. As there were no other errors noted in the files, this issue was considered an anomaly.

**Subcontractor Monitoring & Oversight**
Objective: To verify the AAA has exercised appropriate oversight of contractors providing services by conducting formal monitoring of each subrecipient at least annually, producing reports verifying fiscal, administrative, and program performance and compliance (describing results and proposed corrective action for deficiencies), and following up to ensure satisfactory resolution. Verifying the monitoring process includes examining fixed rates.
charged for subcontracted services to ensure they are reasonable and necessary for the services, and that contracted rates charged by subrecipients are congruent with actual service costs. Verify that audits for subrecipients expending above the single audit threshold were received, reviewed in writing, and followed up to ensure resolution of audit issues and findings (if applicable). Verify that the AAA has a process for confirming delivery of services and goods to clients, for which they are paying.

**Observations:**
Although DOEA deferred this area of review for the 2020-2021 monitoring cycle, AAAPP conducted a minimal review of their subcontractors based on the recommendations of F4A. DOE’s Contract Manager will continue to provide technical assistance as needed.

### Finance and Administration

Objective: To verify that basic systems of accounting, management, and internal controls are in place, and are effective in 1) safeguarding organizational assets, 2) classifying and categorizing revenues and expenditures by program, 3) recording all transactions and expenditures, 4) complying with state and federal laws and program requirements to maximize services, and 5) producing reliable financial statements.

**Observations:**
Review of the Chart of Accounts and financial statements indicates that the AAA classifies and categorizes revenues and expenditures by program. Review of accounting policies and procedures and the agency’s single audit, in addition to interviews with fiscal staff, indicated that the AAA complied with generally accepted accounting practices. Review of 54 randomly sampled expenditure transactions and selected items from August 2020 administrative expenses (OAA, Families First Act, and CARES Act funds) revealed that expenses were reasonable and allowable under the programs.

### Procurement

Objective: To verify that the AAA’s procurement procedures and practices are followed and are compliant with OMB Circular A-110 and 287, F. S., that ensure fair and open competition to the extent feasible and are based on receiving quality service for the lowest price.

This area of review has been placed on hiatus for the 2020-2021 monitoring cycle, although contract management will continue to provide technical assistance as needed.

### Property

Objective: To verify the AAA’s internal controls are adequate to ensure identification of property purchased for use in state and federal programs, including the source of funding, condition and location of the property, and the safeguarding of property acquired with grant funds.

This area of review has been placed on hiatus for the 2020-2021 monitoring cycle, although contract management will continue to provide technical assistance as needed.

### CIRTS Data Integrity and Accuracy

Objective: To verify that data related to DOE clients entered in the department’s CIRTS database system by the AAA and subcontractors is accurate; that the AAA has in place procedures that conform to DOE, state, and federal requirements for monitoring and ensuring the accuracy of client data; and that the AAA is following its policies and procedures compliant with program requirements.

**Observations:**
Review of CIRTS policies and procedures and CIRTS report data, compared to prior year data, revealed AAAPP achieved the allowable error rate for all but one of 13 CIRTS data accuracy reports. Allowable error rates are based on prior year performance. This is considered an anomaly as it was the only standard not achieved, and AAAPP continues to maintain a consistently low number of exceptions.
PSA HIGHLIGHTS

1. CASOA: Community Assessment Survey of Older Adults

   This is a national evidence-based survey for older adults to identify their needs. AAAPP reviewed CASOA report findings in developing the 2020 Area Plan and began addressing strategic plan goals in January 2020. A working group was established in February 2020 and held a public meeting with more than 45 providers, community partners, and older adults in attendance to discuss the findings of the survey and discussed next steps.

2. Developing resources

   In January 2020, AAAPP completed corporate funding research on potential corporate funders in the Tampa Bay Area and received a grant award in the amount of $2,000 from Senior Citizen Services to enhance the Senior Victim Advocacy Program that educates law enforcement agencies regarding victims’ rights.

   The agency also received a three-year grant from Florida Blue Foundation for the Senior Community Health Program in February 2020 to expand medical-social partnerships for under-resourced seniors.

   AAAPP received a $150,000 grant in September 2020 from Pinellas County Social Action Funding to expand nutrition services and reduce food insecurity among marginalized populations through Mom’s Meals.

   The agency also received a three-year grant from Florida Blue Foundation for the Senior Community Health Program to expand medical-social partnerships for under-resourced seniors.

   A $5,000 donation was received in October 2020 for the unmet needs from the American House Foundation to assist seniors with emergency needs including security cameras for victims of crime.

3. COVID activities

   AAAPP offices were closed to the public on March 23, 2020, with all staff working remotely during the height of the pandemic and in compliance with shelter-in-place orders.

   A donation of $25,000 in COVID 19 Relief was received in April 2020 from the Florida Blue Foundation to assist 1,294 seniors to stay healthy and safe.

   In April 2020, AAAPP Initiated the Dining Out at Home (DOAH) program throughout PSA 5, expanding meal choices to food-insecure older adults by utilizing 16 local restaurants. This initiative also served to keep the restaurants in business due to economic hardships experienced during the pandemic.

   A Telephone Reassurance initiative was launched in May 2020 to provide socialization and ascertain any unmet needs for socially-distant older adults. In addition to the PSA 5 aging provider network, AAAPP coordinated efforts with the City of Clearwater and the University of South Florida to provide Telephone Reassurance to seniors in Pasco and Pinellas counties.

   The agency partnered with Well Med Medical Management in June of 2020 to coordinate the delivery of 8,000, 20-pound fresh food boxes to agencies or facilities serving food to insecure seniors due to their inability to shop safely.
AAAPP staff participated in a large-scale drive-through outreach event in November 2020 to three aged 55+ communities providing resources and information to over 500 seniors. AAAPP held a Virtual Elder Abuse Awareness Event in June 2020 titled “Protecting Seniors and Their Caregivers in Post COVID-19 Era.”

In June 2020, at the start of a hurricane season, AAAPP coordinated with the Disability Achievement Center (DAC) to help protect seniors and individuals with disabilities to prepare for potential hurricanes in the middle of a pandemic by providing emergency kits.

Essential fiscal and administrative staff returned to the office to ensure continuity of operations in July 2020 while most staff continued working from home.

Through CARES Act No Wrong Door funding, AAAPP created the “u.connected” program in August 2020 to promote senior social engagement through virtual curated content to combat social isolation resulting from COVID.

4. Other Initiatives and Developments

AAAPP’s Chief Financial Officer, Kathy Carleton, retired in March 2020 after 21 years of service.

AAAPP’s Executive Director (ED) chaired the ad hoc TeleHealth Workgroup in March 2020 as part of the ACL conference action steps that the Florida AAA EDs agreed to develop. Through this initiative, DOEA supported the use of telehealth as an allowable platform to provide mental health services to OA3B seniors.

In conjunction with PSA 6, AAAPP’s ED co-chaired the Tampa Bay Humana Bold Goal Impact group in March 2020 and worked on a bus-buddy pilot program to be supported by Humana and Pasco County Public Transportation.

AAAPP’s ED and select Advisory Council and Board members met with Florida legislators in the district in January and February 2020 to advocate for continued support of HCBS services to seniors in Pinellas and Pasco counties. AAAPP’s ED presented before the legislative delegation in both counties.

AAAPP participated in a presentation in December 2020 with Moms Meals at the National Advancing States conference on Health Equity, Food Insecurity, and the Impact of Covid-19.

5. Media Coverage:

https://mail.google.com/mail/u/0/?tab=rm&ogbl#label/Media%2FWWebsite%2FSocial+Media/FMfcgwJHiDGxwRtKDksmzNKkQpRgCQ?projector=1&messagePartId=0.1  December 1, 2020 / The Laker Lutz News

https://mail.google.com/mail/u/0/?tab=rm&ogbl#label/Media%2FWWebsite%2FSocial+Media/FMfcgwJjnbqmkmKwMkRPMTjCQzsfsw?projector=1  December 9, 2020 / Ask The Expert, You Tube Podcast
NOTEWORTHY OBSERVATIONS

AAAPP has the distinction of being the only AAA to have no findings for 12 consecutive monitoring reviews. Its strong compliance program and experienced staff ensure that minor issues are identified and swiftly addressed. There are many best practices that DOEA has cited as exemplary over the years. A few practices being recognized are as follows:

AAAPP has consistently maintained a very low number of data exceptions through routine reviews by staff who work directly with providers to provide immediate technical assistance for noncompliant practices, and by clearing exceptions timely.

Prioritization practices ensure that all potential clients (with the exception of APS high-risk clients) are assessed and prioritized prior to being enrolled for case managed services.

AAAPP’s program management staff monitors the nutrition program closely, providing ongoing technical assistance to providers and facilitating corrections with the caterer for quality and compliance issues.

Experienced staff and well-defined accounting practices, combined with consulting with accounting professionals, ensures that expenditures are allowable and allocable. The routine involvement of the ED and AAAPP’s Board in the review and approval of financial records ensures accuracy and transparency and has resulted in many years with no deficiencies noted.

All of the systems AAAPP has put into place and its management and staff’s diligence in revisiting, updating, and following those policies creates a framework for successful compliance. Additionally, management and staff working together as a cohesive team to determine the best way to implement effective changes, and providing feedback to DOEA regarding problems encountered and potential improvements they’ve found, is considered the heart of AAAPP’s many best practices recognized by DOEA.
APPENDIX
Legislatively Mandated Outcome Measures

The legislatively mandated performance measures are listed below with the established standard of achievement. The following performance results indicate AAA achievement below the standard for one performance measure and requires a performance improvement plan.

<table>
<thead>
<tr>
<th>#</th>
<th>Outcome Measure</th>
<th>Standard 2019-2020</th>
<th>Performance Results*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Percentage of customers who are at imminent risk of nursing home placement who are served with community-based services</td>
<td>90</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Percent of APS referrals who are in need of immediate services to prevent further harm who are served within 72 hours</td>
<td>97</td>
<td>100</td>
</tr>
<tr>
<td>3</td>
<td>Percentage of elders assessed with high or moderate risk environments who improved their environment score</td>
<td>79.3</td>
<td>75</td>
</tr>
<tr>
<td>4</td>
<td>Percentage of new service recipients with high-risk nutrition scores whose nutritional status improved</td>
<td>66</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Percentage of new service recipients whose Activities of Daily Living (ADL) assessment score has been maintained or improved</td>
<td>65</td>
<td>68.3</td>
</tr>
<tr>
<td>6</td>
<td>Percentage of new service recipients whose Instrumental Activities of Daily Living (IADL) assessment score has been maintained or improved</td>
<td>62.3</td>
<td>66.2</td>
</tr>
<tr>
<td>7</td>
<td>Percentage of family and family-assisted caregivers who self-report they are very likely to provide care</td>
<td>89</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Percent of caregivers whose ability to continue to provide care is maintained or improved after one year of service intervention (as determined by the caregiver and the assessor)</td>
<td>90</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Average time in the CCE Program for Medicaid Waiver probable customers decreases</td>
<td>2.8 mos.</td>
<td></td>
</tr>
</tbody>
</table>

*assessed results reported in DOEA's Long Range Program Plan (LRPP). Measures that do not reflect performance results are reported at the statewide level and not applied to individual AAAs.
Major Federal, State, and Contractual Compliance Guidelines

Federal Rules and Regulations

Approximately 60 percent of DOEA's total budget is funded through federal entitlement and discretionary grant programs. In addition to statutory guidelines associated with the receipt of federal funds, DOEA, the AAAs, and service providers are required to comply with certain program and fiscal guidelines prescribed by the funding source. The most prominent of these regulations are identified below:

- Older Americans Act of 1965, as amended
- Services to be directed to older Americans (age 60 or older)
- No requirement of means or income testing for eligibility
- AAAs must submit formal plan for service area
- Prioritization of services must be given to those with the greatest social/economic need

OMB Circulars and Treasury Regulations prescribe applicable federal grant cost principles:

- Single Audit Act Amendments of 1996, OMB Circular A-133 (Title 2 CFR, Part 200): establishes requirements of single audit act for grantees that spend or receive $750,000 or more
- Code of Federal Regulations: 45 CFR, Parts 74 and 92 (Federal Procurement Guidelines), and Title 2 CFR Part 200 and Appendices (formerly OMB Circulars A-87, Cost Principles for State, Local and Indian Tribal Governments; OMB Circular A-102, Grants and Cooperative Agreements with State and Local Governments; OMB Circular A-110, Uniform Administrative Requirements for Grants and Agreements with Institutions of Higher Education, Hospitals and Other Nonprofit Organizations; and, OMB Circular A-133, Audits of States, Local Governments, and Nonprofit Organizations)

Social Security Act, Section 1915c - Medicaid Waiver Programs allows states to "waive" requirements of the original Medicaid legislation and create waiver programs that provide care in the home and in the community and are an alternative to institutional care.

- Recipient must meet Medicaid guidelines
- Recipient would require institutionalization in the absence of the waiver
- Waiver cost plus other Medicaid services cannot exceed total cost to Medicaid for serving recipient in an appropriate institutional setting

Federal Grant and Cooperative Agreement Act of 1977 (31 U.S.C. 6301-08) provision establishes criteria for whether a transaction is procurement or financial assistance.

Other Federal Requirements

- OMB Standard Form 424-B Assurances (compliance certification with other federal laws)
- Certifications Regarding Debarment/Suspension, Drug-Free Workplace and Lobbying
- Health Insurance Portability and Accountability Act (HIPAA) of 1996
- Civil Rights Act of 1964, as amended
- Low Income Home Energy Assistance Act of 1981
FLORIDA DEPARTMENT OF ELDER AFFAIRS

State Rules/Regulations and Contract Requirements

Several state rules and regulations as provided in Florida Statutes apply to programs funded through federal and state appropriations. As federal funds are received by the state, the state's additional statutory requirements are attached to the use and receipt of the funds. State rules and regulations applicable to AAAs and service providers are listed below. DOEA's contract with AAAs embodies federal and state rules by reference and/or through recital of applicable statutes.

Chapter 287, F.S.
- Procurement of Goods and Services
- Supplier Diversity
- Payment of Vendors (7-Day Rule)
- Exclusion of Public Entity Crime Violators

Chapter 409.508, F.S.
- Low Income Energy Assistance Program (and Ch. 73C-26, F.A.C.)

Chapter 415, F.S.
- Reporting of Elder Abuse (72-Hour Rule)

Chapter 427, F.S.
- Transportation Disadvantaged

Section 430.07, F.S.
- Volunteers

Section 430.08, F.S.
- Rulemaking

Sections 430.201-207, F.S.
- Community Care for the Elderly Program (CCE)

Sections 430.501-504, F.S.
- Alzheimer's Disease Initiative (ADI)

Sections 430.601-608, F.S.
- Home Care for the Elderly (HCE)

Section 215.97(3), F.S.
- Florida Single Audit Act

Department of Financial Services
- State Projects Compliance Supplement
- Reference Guide for State Expenditures
Statewide Map of Planning and Service Areas

1 - Escambia, Okaloosa, Santa Rosa, Walton
2 - Bay, Calhoun, Franklin, Gadsden, Gulf, Holmes, Jackson, Jefferson, Leon, Liberty, Madison, Taylor, Wakulla, Washington
3 - Alachua, Bradford, Citrus, Columbia, Dixie, Gilchrist, Hamilton, Hernando, Lafayette, Lake, Levy, Marion, Putnam, Sumter, Suwannee, Union
4 - Baker, Clay, Duval, Flagler, Nassau, St. Johns, Volusia
5 - Pasco, Pinellas
6 - Hardee, Highlands, Hillsborough, Manatee, Polk
7 - Brevard, Orange, Osceola, Seminole
8 - Charlotte, Collier, De Soto, Glades, Hendry, Lee, Sarasota
9 - Indian River, Martin, Okeechobee, Palm Beach, St. Lucie
10 - Broward
11 - Miami-Dade, Monroe