

***FFY 2005 - 2007
Area Plan on Aging
Program Module***

INSTRUCTIONS

***For the Period
01/01/2005 through 12/31/2005***



Amended August 2004

**FFY 2005 - 2007
AREA PLAN ON AGING
PROGRAM MODULE
INSTRUCTIONS**

(PLEASE use only the forms provided with this package. Any revisions to the original Program Module submission must include the revision date on each page.)

Table of Contents (Section 306(a), OAA – the plan shall be based on a uniform format established by the state agency)

Each page must be sequentially numbered and the location of each section must be listed in the Table of Contents.

Program Module Certification Page (Section 306(a)(6)(D), OAA – AAA must involve the advisory council in all matters relating to plan development, etc.)

The Certification Page is to be completed as indicated and signed by the Board President or other authorized official, Advisory Council chair, and AAA Executive Director. An updated Certification Page must be submitted with each revision to the Area Plan Program Module.

Section P.I. Profile and Needs of the Planning and Service Area

Profile: In this section of the area plan, provide an overview of the social, economic and demographic characteristics of the planning and service area. Focus should be given to geographic areas and population groups within the PSA that have special needs, specifically as they relate to low-income, minority and rural factors.

The PSA overview must include the following:

- Identification of counties and/or major communities within the planning and service area. (Section 306(a), OAA – the plan shall be based on a uniform format established by the state agency)
- A clear statement of the area agency's definition of community. (CFR 1321.53(c) - AAA responsibility to define "community")
- Discussion of economic and social resources, including geographic area(s) designated by the Governor as a Front Porch Community.
(<http://www.myflorida.com/myflorida/government/governorinitiatives/frontporch/index.html>)

- Description of the service system in place to meet the needs of elders, including area agency funded services and other public and private sector services. (*Ch. 430.205, F.S. – Community Care Service System*)
- Discussion of the conditions of older persons, focusing on conditions that are significantly better or worse in comparison to statewide or national averages or estimates (e.g., greater number of old-old, greater isolation, higher costs for essential services, fewer family supports, poorer housing). (*Section 306(a)(1), OAA – the AAA should provide for supportive services, evaluate the effectiveness of the use of resource in meeting the need, and enter into agreements for the provision of services to meet the need.*)
- Discussion of the area agency’s role in coordinating and/or participating in interagency collaborative efforts. (*Section 306(a)(1), OAA – the AAA should provide supportive services through a comprehensive and coordinated system*) Include in the discussion, coordination with community mental health services if the area agency expends funds for mental health services. (*Section 306(a)(6)(F), OAA*)
- Statistical tables, graphs and maps to amplify the narrative. (*Section 306(a), OAA – the plan shall be based on a uniform format established by the state agency*)
- At least one map to visually display the planning and service area in relation to the entire state and one map to identify rural areas of the planning and service area. (*Section 306(a), OAA – the plan shall be based on a uniform format established by the state agency*)
- This section must also incorporate, but is not limited to, a discussion of the socio-demographic and economic factors listed below. Attention to rural factors must be reflected throughout the discussion, where applicable. (*Section 306, OAA*)
 - Population characteristics of the planning and service area, including the number of low-income minority elders and elders residing in rural areas in the planning and service area. (*Section 306(a)(4), OAA – the AAA is to set objectives to serve specific populations that may have special needs and include proposed methods of carrying out the preference in the area plan*)
 - Increases in the 85+ age group. (*Section 306(a)(4), OAA - same citation as above*)
 - Concentration of elders with low incomes. (*Section 306(a)(4), OAA - same citation as above*)
 - Concentration of minority and culturally diverse elders. (*Section 306(a)(4), OAA - same citation as above*)
 - Locations of socially isolated older elders. (*Section 306(a)(4), OAA - same citation as above*)

- Urban/rural areas. (*Section 306(a)(4), OAA - same citation as above*)
- Counties or communities with limited access to transportation, significant supportive services or social service agencies. (*Section 306(a)(4), OAA - same citation as above*)
- Housing conditions and availability of affordable housing. (*Section 306(a)(1), OAA – assessment of needs*)
- Availability of medical/health care, including mental health counseling. (*Section 306(a)(1), OAA – assessment of needs*)
- Trends for in or out migration affecting elders. (*Section 306(a)(1), OAA – assessment of needs*)
- Number of elder caregivers, including the number of grandparents raising grandchildren. (*Sections 306(a)(1) and 373(a), OAA*)
- Condition of elder caregivers. (*Section 306(a)(1), OAA*)
- Assessment of private sector responses to the needs of elders (e.g., recreation, health, employment, transportation, other services). (*Section 306(a)(1), OAA – determining extent of need for services*)
- Significant differences between counties in the planning and service area. (*Section 306(a)(1), OAA*)
- Identification of new or declining retirement communities. (*Section 306(a)(1), OAA*)

Needs: In addition, this section of the area plan must clearly identify the needs of elders and caregivers in the PSA with particular emphasis on assessing the needs of those with greatest economic or social need, low-income minorities and those residing in rural areas. A summary analysis of the priority needs of elders and caregivers in high and very high need index areas, as defined by the Department of Elder Affairs, must be included. (*Section 306(a)(1), OAA*)

The summary must also include a description of the method employed to assess needs, prioritize funded services, and involve elders and caregivers in the needs assessment process. (*Section 306(a)(6)(D), OAA*) Charts, tables, graphs, or other exhibits should be incorporated to illustrate data relative to service needs, service availability, and funding priorities in each county. (*Section 306(a), OAA*)

The Department of Elder Affairs has provided each AAA a copy of “Assessing the Needs of Elder Floridians, 2004,” which should be used as a resource to identify local

needs as reflected in the PSA-specific data. The notebook also identifies the high and very high need index areas within the planning and service area.

In addition, Area Agencies must conduct local activities to further identify unmet needs. These can include reviewing Elder Helpline data, examining CIRTS data, conducting focus groups/public hearings, studying other needs assessment data available in the community as well as analyzing results of efforts to bid services. (*Section 306(a)(1), OAA*)

The following elements must be addressed in the summary (*Section 306(a)(1), OAA – assessing need and evaluating effectiveness of the use of resources in meeting needs*):

- Services Currently Being Provided
 - Number of people being served
 - Frequencies of types of services offered
- Unmet Need - Gaps between identified needs and services being provided
- Types of Information to Demonstrate Unmet Need:
 - Number of people 60+ with ADL limitations not receiving services
 - Number of people 60+ with IADL limitations not receiving services
 - Number of people 60+ with mobility limitations not receiving services
 - Caregiver unmet needs
 - Access service needs
 - Information about services
 - Transportation
 - Health care needs
 - Preventive health
 - Medical care needs
 - Ancillary health care needs (such as hearing aids and eyeglasses)
 - Number of people 60+ who qualify for Food Stamps, but are not receiving them
 - Elders with limited access to Senior Centers
 - People living in communities they feel are not elder friendly
 - Elders with housing and safety needs
 - Elders who would like employment training or related assistance
 - People on wait list not yet receiving any services
 - Existing clients waiting for more services
- Comparison of areas with high and very high needs to the rest of the PSA and the state
- Analysis of service implications of identified unmet needs
- Discuss how the supportive services funded by the Older Americans Act address the needs and conditions of elders in the PSA.

The area plan must also address each of the following topics (using separate headings) as indicated below:

- **Targeting** (*Section 306(a)(4), OAA*)

Summarize the area agency's strategies for directing services to elders with greatest economic or social need, low-income minorities, and elders residing in rural areas. Also identify outreach efforts to address the needs of older individuals with severe disabilities, with limited English speaking ability and/or with Alzheimer's disease or related disorders.

- Targeting data – Locate areas and populations to be targeted. Provide a justification for targeting, using needs assessment and other data to support the need for targeting. Provide population statistics for targeted areas.
- Description of service needs and targeted area(s) – Describe the communities or targeted areas and identify service needs that will be the focus of targeting efforts.
- Targeting activities – List all service providers to be directly involved in targeting and describe the services and activities to be conducted. Outreach and information should be included. For a multiple county PSA, information should be provided for each county.
- Targeting goal(s) – Based on the identified service needs of targeted areas and population groups as determined through needs assessment and other data, project the number and percentage to be served in each county during each year of the three-year plan.
- Targeting report – Report on the extent to which the targeting objectives established for 2004 have been met.

- **Cultural and Ethnic Diversity** (*Section 306(a)(4)(A), OAA*)

Summarize the area agency's strategies and action steps for addressing cultural and ethnic issues related to providing services to elders from diverse backgrounds.

- **Front Porch Communities** (*Governor Bush's initiative announced August 9, 1999*)

Summarize the area agency's plan for directing services to elders in areas designated by the Governor as Front Porch Communities. The summary must include the following:

- A description of DOEA funded services that are being provided to elders in Front Porch Communities, including funding sources and service providers.
- A discussion of the area agency's involvement in local and regional Front Porch Community meetings and activities.

- **Title III-C Services** (*Section 339, OAA*)

Summarize the area agency's plan for meeting nutrition services requirements. All Area Agencies on Aging with direct responsibility for administering and managing OAA Title III C1 and C2 funds and related services must have either an employee, a contractor, or a volunteer with the experience, expertise, and technical knowledge to assist the AAA in ensuring all applicable federal and state regulations and other requirements pertaining to food service, food safety, food procurement practices, nutrition education and counseling, and nutrient analysis and menu development are strictly adhered to. Sufficient time and relevant resources must be budgeted for the position to allow the AAA to implement a comprehensive nutrition service plan.

The area plan must incorporate the following: AAA utilization of the services of a Registered Dietitian or an individual with comparable expertise to:

1. Provide training, technical assistance, and monitoring of local nutrition providers to ensure the provision of meals that comply with the 2000 Dietary Guidelines for Americans and the Recommended Dietary Allowances (RDA's) and Adequate Intakes (AIs) for Older Adults as established by the Food and Nutrition Board of the Institute of Medicine of the National Academy of Sciences.
2. Provide training, technical assistance, and monitoring of local nutrition providers to ensure the provision of quality nutrition education and related information, and nutrition counseling to individuals assessed as nutritionally at risk.
3. Provide training, technical assistance, and monitoring of local nutrition providers to ensure that the program complies with state and local laws regarding the safe and sanitary handling of food, equipment and supplies used in the storage, preparation, service and delivery of meals to an older individual.
4. Provide training, technical assistance, and monitoring of local nutrition programs to ensure nutrition programs link nutrition activities with health and wellness programs.
5. Provide training, technical assistance, and monitoring of local nutrition programs to ensure programs address the specific nutritional needs of culturally diverse elders.
6. Assist the AAA in identifying and partnering with local agencies to link nutrition and health and wellness efforts.

- **Linkage between Title III-C and Title III-D Services** (*AoA 5-Year Strategic Plan, AoA "You Can! Steps to Healthier Aging," AoA eNews Letter, 5/28/04*)

In support of the Administration on Aging's emphasis on the benefits of linking nutrition activities with health and wellness programs, identify local efforts at collaboration between these two initiatives.

- **Title III-D Services** (*Sections 102(12), 361 and 362, OAA*)

Summarize the area agency's programs and activities provided to promote wellness and preventative health under Title III-D of the Older Americans Act, especially those targeting medically underserved populations. Include a discussion of innovative, non-traditional approaches to Title III-D service delivery in the planning and service area.

- **Title III-E Services** (*Section 373, OAA*)
 Summarize the area agency's programs and activities provided to support caregivers under Title III-E of the Older Americans Act. Identify how activities will be integrated and incorporated into the overall home and community-based services system to support caregiver needs and services. Include a discussion of innovative, non-traditional approaches to Title III-E service delivery in the planning and service area. ~~Identify how activities will be incorporated into the National Family Caregiver Support Program.~~ Make specific reference to programs serving grandparents who are raising grandchildren. Identify use of allowances for grandparents and supplemental services based on needs assessment and existing support service network.
- **Title VII Services** (*Section 705, OAA*)
 Summarize the area agency's programs and activities provided to prevent elder abuse under Title VII of the Older Americans Act. Include a discussion of innovative, non-traditional approaches to Title VII service delivery in the planning and service area. Include an assessment of unmet needs in the PSA for serving victims of elder abuse. Describe collaborative efforts with other agencies addressing elder abuse issues.
- **Faith-Based Initiatives** (*President Bush's Executive Order 13199*)
 Summarize area agency and service provider initiatives involving faith-based organizations and institutions. Include a description of DOEA funded services, including funding sources and service providers.
- **Communities for a Lifetime** (*Department advocacy initiative based on Section 305(a)(1)(D), OAA, and Ch. 430.03, F.S.*)
 Summarize the area agency's plan for involvement in the Communities for a Lifetime (CFAL) initiative. The plan must incorporate strategies for the following:

 - Increasing awareness of the initiative in communities that have not submitted proclamations of commitment.
 - Making initial contact with city and county elected officials and notifying DOEA for appropriate follow-up.
 - Supporting communities that have submitted proclamations of commitment by participating on local task forces whenever possible.
 - Serving as a source of information and referral
 - Keeping contact with communities and making recommendations as needed
 - Promoting community mentoring opportunities

- o Keeping DOEA staff apprised of CFAL activities or issues in their PSA
- o Assist DOEA with coordination and promotion of state agency facilitated CFAL activities in communities (i.e. workshops).
- **Disaster Plans** (*Chapter 252.365, F.S.*)
Summarize the status of the agency's Comprehensive Emergency Management Plan (CEMP) along with the new Continuity of Operations Plan (COOP). If the plans have been completed, a summary of the plans should be included. In the summary, identify the emergency contact and alternate emergency contact(s).
- **Aging Resource Center Transition Issues** (*Ch.2004-386, Laws of Florida*)
This section should include narrative that explains how the AAA plans to transition to an Aging Resource Center and how it would effect specific operations of the AAA (i.e., how transitioning to an ARC will effect Information and Assistance operations.) Other sections of the area plan should include narrative on the ARC transition as appropriate.

Section P.II. Mission and Strategic Vision Statements (*Section 307(a)(1), OAA*)

Each area plan must state the mission and strategic vision of the Area Agency on Aging. An agency's mission establishes the reason for its existence. It succinctly identifies what the organization does, why and for whom. The strategic vision identifies the future direction of the agency, stating the priority steps the organization will take to fulfill its mission within its statutory mandates and other legal authorizations.

Section P.III. Community Focal Points (*Section 306(a)(3), OAA*)

Please provide the information requested in the WebDB for the designated community focal points in the planning and service area, as stated in the Older Americans Act. Use the report format in the WebDB to provide the information contained on the sample form in the Area Plan Program Module Forms. According to the Older Americans Act, a community focal point is a facility established to encourage the maximum collocation and coordination of services for older individuals. (*Section 102(25), OAA*) These sites may or may not be senior centers.

Section P.IV. Senior Centers (*Section 306(a)(1), OAA*)

Please provide the information requested in the WebDB for all senior centers, including multipurpose senior centers, in the planning and service area. Use the report format in the WebDB to provide the information contained on the sample form in the Area Plan Program Module Forms. Multipurpose senior center is defined in the Older Americans Act as a community facility for the organization and provision of a broad spectrum of services, which shall include provision of health (including mental health), social, nutritional, and educational services and the provision of facilities for recreational activities for older individuals. (*OAA 102(33)*) Please include Community Focal Points that are also Senior Centers. (Duplication is appropriate when an organization is both a Community Focal Point and a Senior Center.)

Section P.V. Lead Agencies (Ch. 430.203(9), F.S.)

Please provide the information requested in the WebDB database for Lead Agencies in the planning and service area. Use the report format in the WebDB to provide the information requested on the sample form in the Area Plan Program Module Forms.

Note: Sections P.III, P.IV., and P.V. must be reported in the WebDB. A printout from the WebDB is to be submitted with the area plan. Other forms may not be used.

Section P.VI. Provision of Direct Services (Section 307(a)(8), OAA)

The process to request a Direct Service waiver has been outlined in the Notice of Instruction #061104-2-I-PE, which was dated June 11, 2004 (as amended 6/16/04). The deadline for requesting waivers is **Monday, August 16, 2004**. The approved waiver(s) as negotiated with the Department of Elder Affairs should be included in this section of the area plan.

Section P.VII. Objectives and Strategies in Support of the Administration on Aging Strategic Goals and the Department of Elder Affairs Priorities

(AoA-PI-04-02; DOEA priorities established by senior managers)

The FFY 2005 Area Plans will be required to address the four program goals identified in the Aging Strategic Plan released by the Administration on Aging in November 2002 (<http://www.aoa.gov/about/strategic/strategic.asp>):

1. Increase the number of older people who have access to an integrated array of health and social supports
2. Increase the number of older people who stay active and healthy
3. Increase the number of families who are supported in their efforts to care for their loved ones at home and in the community
4. Increase the number of older people who benefit from programs that protect their rights and prevent elder abuse, neglect and exploitation

The FFY 2005 Area Plans will also be required to incorporate the new DOEA planning priorities, which will be included in the DOEA Long-Range Program Plan, due for release in August 2004:

1. Create a long-term care system that is streamlined, cost-effective and consumer-friendly
2. Create a greater support network for elders, families and caregivers
3. Create an elder-friendly environment that values the contributions and needs of elders

To respond to this requirement, Area Agencies on Aging must identify objectives and strategies to address these planning priorities and strategic goals using the following format:

AoA Goal 1: Increase the number of older people who have access to an integrated array of health and social supports

DOEA Priority Area 1: Create a long-term care system that is streamlined, cost-effective and consumer-friendly

Objectives:

Strategies:

AoA Goal 2: Increase the number of older people who stay active and healthy

DOEA Priority Area 3: Create an elder-friendly environment that values the contributions and needs of elders

Objectives:

Strategies:

AoA Goal 3: Increase the number of families who are supported in their efforts to care for their loved ones at home and in the community

Priority Area 2: Create a greater support network for elders, families and caregivers

Objectives:

Strategies:

AoA Goal 4: Increase the number of older people who benefit from programs that protect their rights and prevent elder abuse, neglect and exploitation

DOEA Priority Area 3: Create an elder-friendly environment that values the contributions and needs of elders

Objectives:

Strategies:

Section P.VIII. Objectives and Performance Measures (*Section 306(a)(4)(A), OAA*)

Area Agencies must develop implementation strategies (action steps) to achieve the objectives and performance measures reflected on pages 11 through 14. If any adjustments are made to the standards for these measures, they will be shared with the AAAs as soon as available. **Exception:** Area agencies are not required to develop strategies for Objectives 1, 12, and 13 and their corresponding performance measures. These initiatives will be tracked at the state level.

Section P.IX. Certification of Compliance with Section 306, Older Americans Act (*Section 306, OAA*)

This document must be completed and signed by the AAA Board President or other authorized official.

Section P.X. Certification of Compliance with Community Care for the Elderly Program Prioritization *(Ch. 2003-67, Laws of Florida)*

This document must be completed and signed by the AAA Board President or other authorized official.

Section P.XI. Program Module Review Checklist *(Section 306(a), OAA)*

Please complete the form provided by indicating whether each item is included in the area plan (Yes/No/Not Applicable) and identifying the area plan page number(s) where the items can be found.

OBJECTIVES AND PERFORMANCE MEASURES

Objectives	Performance Measures	Standards*
1: To help elders to remain in the least restrictive, most appropriate and safe setting.	<p>Outcome Measure: Percent of elders CARES determined to be eligible for nursing home placement who are diverted</p> <p>Output Measure: Total number of CARES assessments</p>	<p>30%</p> <p>96,000</p>
2: To prevent/delay premature nursing home placement.	<p>Outcome Measure: Percent of most frail elders who remain at home or in the community instead of going into a nursing home</p>	97%
3: To provide prompt and appropriate services to elders referred from Adult Protective Services who meet the frailty level criteria.	<p>Outcome Measure: Percent of Adult Protective Services (APS) referrals who are in need of immediate services to prevent further harm who are served within 72 hours</p>	97%
4: To use long-term care resources in the most efficient and effective way.	<p>Outcome Measure: Average monthly savings per consumer for home and community-based care versus nursing home care for comparable consumer groups</p>	\$2,384
5: To help elders to have home environments that are as safe as possible.	<p>Outcome Measure: Percent of elders assessed with high or moderate risk environments who improved their environment score</p>	79.3%
6: To improve the nutritional status of elders.	<p>Outcome Measure: Percent of new service recipients with high-risk nutrition scores whose nutritional status improved</p> <p>Output Measure: Number of congregate meals provided</p>	<p>66%</p> <p>5,105,950</p>
7: To assist elders to maintain their independence and choices in their homes as long as possible.	<p>Outcome Measure: Percent of new service recipients whose ADL assessment score has been maintained or improved</p>	63%
8: To assist elders to maintain their independence and choices in their communities as long as possible.	<p>Outcome Measure: Percent of new service recipients whose IADL assessment score has been maintained or improved</p>	62.3%

Objectives	Performance Measures	Standards*
9: To provide caregivers with assistance/respice to help them to be able to continue providing care.	Outcome Measure: Percent of family and family-assisted caregivers who self-report they are very likely to provide care	89%
	Outcome Measure: Percent of caregivers whose ability to provide care is maintained or improved after one year of service intervention (as determined by the caregiver and the assessor)	90%
10: To leverage a variety of non-state resources whenever possible.	Outcome Measure: Average time in the Community Care for the Elderly program for Medicaid Waiver probable customers	2.8 months
11: To provide prompt and appropriate services to elders who are at risk of nursing home placement.	Outcome Measure: Percent of customers who are at imminent risk of nursing home placement who are served with community-based services	90%
12: To ensure the security of vulnerable elders residing in long-term care facilities through annual facility reviews and complaint investigation.	Outcome Measure: Percent of complaint investigations initiated within five working days [applies to LTCOC]	91%
	Output Measure: Number of complaint investigations completed	8,712
13: To ensure that consumers needing guardianship services are provided that protection.	Outcome Measure: Percent of service activities on behalf of frail or incapacitated elders initiated by public guardianship within 5 days of receipt of request	95%
	Output Measure: Number of judicially approved guardianship orders	1,350

* If any adjustments are made to the standards for these measures, they will be shared with the AAAs as soon as available.

DOEA Internal Objectives	DOEA Internal Measures	Standards
14: To maximize the number of people receiving registered long-term care services.	Output Measure: Number of people served with registered long-term care services.	167,250
15: To achieve annual co-pay goal established for the PSA.	Outcome Measure: Percent of co-pay goal achieved	100%

DOEA Internal Objectives	DOEA Internal Measures	Standards
16: To maintain accurate data in Consumer Information Registration and Tracking System (CIRTS).	Outcome Measure: Percent of CIRTS data entry error rate	1%
17: To effectively manage state and federal funds awarded in area agency contracts for consumer services.	Outcome Measure: Percent of state and federal funds expended for consumer services	100%
18: To maximize state resources by evaluating and using, as appropriate, the Adult Care Food Program as a reimbursement mechanism for meals provided to the elderly.	Outcome Measure: Percent of increase in providers participating in the Adult Care Food Program	10%
19a: To ensure collection and maintenance of a database on information and referral services for each county in the planning and service area.	The Area Agency will operate under the AIRS Standards for Professional Information and Referral, which are included as an attachment to the OAA contract, and will provide the following information to the department upon request: 1) The number of calls received by Elder Helplines. 2) The type/level of services requested. 3) The timely entry of accurate data in the online database.	
19b: To ensure a system is in place for collecting and organizing inquirer data to identify gaps in service and overlaps.	The Area Agency will ensure: 1) Accuracy of data entered in the resource database for use by the information specialists under the inclusion/exclusion criteria. 2) Quarterly reports from the Elder Helplines are submitted with regard to information and referral activity.	

DOEA Internal Objectives	DOEA Internal Measures	Standards
20: To target services to elders most in need.	<p>Outcome Measures:</p> <ol style="list-style-type: none"> 1) Percent of high-risk consumers (priority levels 4 and 5) served. 2) Average time for applicants assessed as priority levels 4 and 5 to start services (other than case management) is less than the average time for applicants assessed as priority levels 1, 2 or 3 to start services. 	
21: To ensure services provided to consumers are meeting consumer needs.	<p>The Area Agency must:</p> <ol style="list-style-type: none"> 1) Assess consumer satisfaction with services provided. <p>(Tools, developed under contract with the Administration on Aging, and technical assistance are available from the Department.)</p>	
22: To ensure that Medicaid Waiver funds are appropriately managed to ensure as many consumers are served as possible.	<p>The Area Agency must:</p> <ol style="list-style-type: none"> 1) Detail procedures to manage Medicaid Waiver expenditures. 2) Incorporate care plan review protocol and surplus/deficit management. 	
23: To maximize resources.	<p>The Area Agency must:</p> <ol style="list-style-type: none"> 1) Detail procedures to identify funding alternatives to be used prior to relying on Community Care for the Elderly funds. 2) Identify volunteer and other community resources to be accessed prior to relying on Department-funded services. 3) Detail service coordination efforts to prevent duplication of effort. 	

Note: Area agencies and providers are not required to develop implementation strategies for the initiatives in the shaded rows.