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TO: NCAAA Advisory Council and Board of Directors

FROM: Maureen McIntyre, Chief Executive Officer

RE: 2025 PROPOSAL REVIEW PRIORITIES

The Advisory Council and Board of Directors are charged with establishing funding priorities for Title III funds based on mandates of the Older Americans Act and local needs assessments done for NCAAA Area Plan. These priorities must be approved by the Board of Directors prior to the start of the Proposal Review Process in March 2024. With the guidance of these priorities, difficult decisions can be made as to which proposals should be recommended for 2025 funding.

RESOURCES:

The Older Americans Act (OAA), effective through FY 2024 was reauthorized on March 25, 2020, and the NCAAA Area Plan 2022-2024 shall serve as primary planning and funding resources. NCAAA will prepare a budget as final numbers are received from the Department of Aging and Disability Services.

GOALS:

OAA 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. Local match will be required on program dollars and despite the limited timeframe, project sustainability will be strongly considered during program review.

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 elder service needs in the community and develop new programs and services.

MANDATES:

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

- In Home (25% of total funding, minimum)
- Access (16% of total funding, minimum)
- Legal (6% of total funding, minimum)
- Discretionary based on local priorities (53%)

The OAA Title III-C, D, and E monies are allocated separately with funding targeted for Nutrition, Evidence-Based Health Promotion services, and services for Family Caregivers.



ASSESSMENT OF LOCAL NEEDS:

Based on NCAAA's assessment of local needs, the following areas are priorities for funding under OAA Title IIIB, D, and E, in 2025: Transportation; nutrition/food security; health education, wellness, and disease prevention; navigation/information and referral services. These priorities are further organized within the following Area Plan Goal Areas:

1. EMPOWER OLDER ADULTS TO RESIDE IN THE COMMUNITY SETTING OF THEIR CHOICE.

- Programs that provide older adults improved access to available services by reducing and addressing barriers. Services include transportation such as programs offering transportation across town lines and during extended hours, assisted transportation, and enhanced transportation to medical appointments are priorities.
- Programs that provide in-home care services not covered by another funding source that allow older persons to remain at home safely and independently. Such as but not limited to, adult day care, homemaker, home health aide, chore, and companion.
- Legal assistance, education and information assistance, and social support programs are
 encouraged as well as programs that provide guidance, support, counseling and
 instruction to caregivers of older adults and grandparents/relatives raising children.
 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.

2. PROVIDE OLDER ADULTS WITH PREVENTION AND WELLNESS OPPORTUNITIES.

- Programs that promote healthy aging by addressing physical health, mental health and social determinants of health. Services include programs that provide health services not covered by other sources of payment (i.e. Medicare) including dental, nutrition, behavioral or mental health, physical activity, management of chronic diseases, fall prevention, overall wellness promotion, and programs designed to provide enhanced and/or integrated access to community-based health services.
- Develop innovative and multi-faceted approaches to food-insecurity such as but not limited to facilitated shopping, shopping list development, nutrition counseling, and nutrition education. Successful projects will support consumer choice and independence, and will integrate social interaction into the delivery system,

3. PROTECT ELDER RIGHTS AND WELL-BEING AND PREVENT ELDER ABUSE, FRAUD, NEGLECT, AND EXPLOITATION.

- Programs that promote elder rights efforts and the dissemination of information to address the rights of older persons are encouraged. Services include but are not limited to housing, age discrimination, patients/tenants/grandparents rights and older elder rights issues.
- Programs that address and work to counter systemic ageism that contributes to the age discrimination and devaluation of CTs older residents that can foster abuse, neglect and exploitation.