



August 11, 2015

The Honorable Eddie Baza Calvo
Governor of Guam
PO Box 2950
Hagåtña, Guam 96932

Dear Governor Calvo:

I am pleased to inform you that the Guam State Plan on Aging under the Older Americans Act for October 1, 2015 through September 30, 2019, has been approved.

This four year plan serves as a blueprint and direction in planning to further the continuation of long-term services and supports (LTSS) on the island of Guam. I want to thank the Guam State Office on Aging for their leadership and support in their commitment to building a LTSS system for the island's senior citizens, caregivers and persons with disabilities.

I am encouraged by the investments made in the development of Guam's Aging and Disability Resource Center (Guam GetCare) which has the potential to expand and enhance access to information of available services to the citizens of Guam statewide. Equally as important is the recent collaboration between the State Office on Aging, the State Medicaid Agency and the Department of Integrated Services for Individuals with Disabilities in the development of a "No Wrong Door" plan which will streamline the delivery of these services.

The San Francisco Regional Office staff of the U.S. Administration for Community Living looks forward to working with you and the Guam State Office of Aging Division of Senior Citizens in the implementation of the State Plan. If you have questions or concerns, please do not hesitate to contact David A. Ishida, Regional Administrator at 415-437-8780. I appreciate your dedication and commitment toward improving the lives of older persons in Guam.

Sincerely,

Kathy Greenlee
Administrator/Assistant Secretary for Aging

cc: James W. Gillian, Director, Department of Public Health and Social Services
Arthur U. San Agustin, Senior Citizens Administrator, Office on Aging Division of Senior Citizens
David A. Ishida, Regional Administrator, ACL Regions IX & X



EDDIE BAZA CALVO
GOVERNOR

RAY TENORIO
LIEUTENANT GOVERNOR

GOVERNMENT OF GUAM

DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
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JAMES W. GILLAN
DIRECTOR

LEO G. CASIL
DEPUTY DIRECTOR

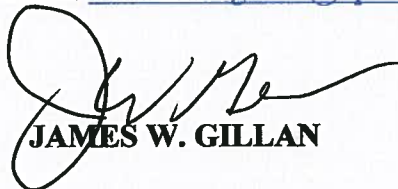
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Mr. David Ishida
Regional Administrator
DHHS ACL Region IX
90 7th St., Suite 8-100
San Francisco, CA 94103

Dear Mr. Ishida:

Enclosed is Guam's Four Year State Plan on Aging for Fiscal Years 2016 through 2019 for your review. Guam's Four Year State Plan, the "Plan", serves as the blueprint to provide direction in planning and implementing long-term care initiatives for our islands elders. The Plan outlines the goals, objectives and measurements set forth for aging programs identified in the Older Americans Act of 1965, as amended, and administered by the Guam State Office on Aging for the next four years. The Plan reflects and responds to the needs of an increasing number of older individuals with the aim to help Guam's aging community maintain independence and dignity in their homes and communities, and address the reality of fiscal and resource limitations. The Plan represents the network of providers and various partners we work with in the provision of long-term services and supports made available to the islands elders on Guam.

We look forward to the favorable review of Guam's Four Year State Plan on Aging for Fiscal Years 2016 through 2019. Should you have questions, you may contact Senior Citizens Administrator Arthur U. San Agustin, MHR via email at arthur.sanagustin@dphss.guam.gov or via phone at (671) 735-7415/7421.

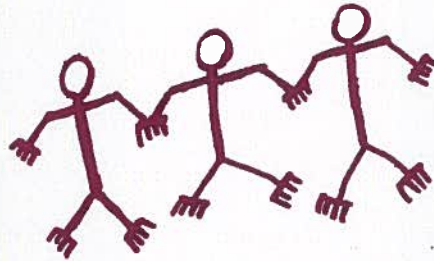

JAMES W. GILLAN

Enclosure



GUAM STATE OFFICE ON AGING DIVISION OF SENIOR CITIZENS

DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
GOVERNMENT OF GUAM



GUAM 2016-2019 FOUR YEAR STATE PLAN ON AGING



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**GUAM FOUR YEAR STATE PLAN ON AGING
2016 – 2019**

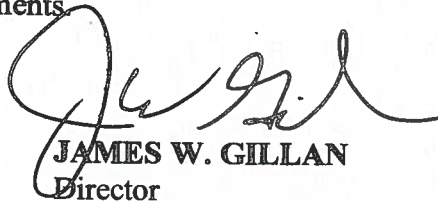
I. SIGNED VERIFICATION OF INTENT PAGE FROM GOVERNOR

VERIFICATION OF INTENT

The Department of Public Health and Social Services, Division of Senior Citizens, hereby submits Guam's State Plan on Aging for the period October 1, 2015 through September 30, 2019. The Division of Senior Citizens serves as the State Agency and has the authority through the leadership of the State Office on Aging Director to develop and administer the State Plan on Aging in compliance with the requirements of the Older Americans Act of 1965, as amended by the Older Americans Act Amendments of 2000 and 2006. The State Agency is primarily responsible for the coordination of all State activities related to the purpose of the Act, including but not limited to the development of a comprehensive and coordinated system of care in the delivery of aging services. These services include supportive services, protective services, senior citizen centers, nutrition services, and caregiver services. The State Agency will serve as the effective representative and visible advocate for the older population of Guam. For purposes of this State Plan, Guam is a single planning and service area (SPA) and a 100% rural and 100% minority community.

The State Plan on Aging hereby submitted has been developed in accordance with applicable Federal statutory and regulatory requirements.

DATE 6.19.2015

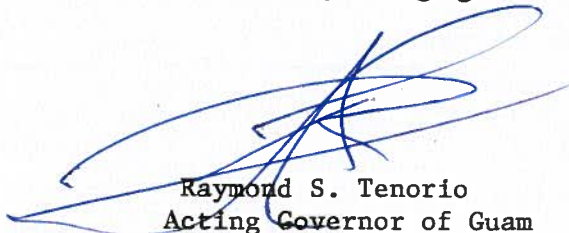


JAMES W. GILLAN
Director

Department of Public Health and Social Services

I hereby approve Guam's State Plan on Aging that constitutes authorization to proceed with activities under the Plan and is submitted to the Assistant Secretary for Aging for review and approval.

DATE JUL 01 2015



Raymond S. Tenorio
Acting Governor of Guam

II. EXECUTIVE SUMMARY

Organizationally, Guam's State Office on Aging (SOA) is under the Division of Senior Citizens (DSC) of the Department of Public Health and Social Services. The DSC is responsible for coordinating activities related to older persons on Guam in accordance with the Older Americans Act, and Guam's Public Law 14-139 which created the DSC. A key responsibility of the SOA is the development of Guam's Four Year State Plan on Aging for the period of October 1, 2015 through September 30, 2019.

Guam's Four Year State Plan, the "Plan", serves as the blueprint to provide direction in planning and implementing long-term care initiatives for our islands elders. The Plan reflects and responds to the needs of an increasing number of older individuals with the aim to help Guam's aging community maintain independence and dignity in their homes and communities, and address the reality of fiscal and resource limitations. The Plan represents the network of providers and various partners we work with in the provision of long-term services and supports made available to the islands elders on Guam.

Guam, like the rest of the nation, is undergoing a demographic revolution. For the year 2015, it is estimated that Guam's population is 161,785 with an estimated 21,301 seniors (who are age 60 and older), or 13.17 % of Guam's total population. By the year 2020, it is projected that Guam's population will be 168,322 with a projected 25,646 or 15% being seniors. In 2006, the onset of "baby boomers" turned 60 and will continue through 2024. We are working with baby boomers seeking assistance to meet their long-term care needs as many of them are caring for or have cared for their own aged parents bringing forth the realization that institutional care is not their preferred means of care should they require supervised care. Baby boomers are seeking alternatives that will enhance their physical, social and emotional well-being through personal care and assistance so they are able to continue living in their own homes as they age.

"Aging in place" is an approach to long-term care that promotes independent living, strengthening family supports, addressing home modifications and other long-term services and supports, so that older persons can continue living in their own homes or in a home-like setting in their communities, even in the event of declining mental and physical abilities.

We strive to empower Guam's senior community to make person-centered decisions, provide support to high-risk clients, their families and caregivers to delay the onset of institutionalization and to explore building evidence-based prevention programs to reduce the risk of disease, disability and injury among older individuals. The national perspective for older individuals, as we fondly refer to as "our Manamko", to age in place and to provide options and choices for home and community-based services resonates with the local landscape of our cultural practices; ensuring program services are culturally and linguistically sensitive while maintaining the dignity, integrity and independence of older individuals.

The Plan is a living document that lays out the existing services for seniors that will provide data that will identify unmet needs and services gaps which can be used to leverage additional resources to meet the needs of Guam's older population. We will continue to work towards

increasing the number of clients we serve through greater diversification and refinement of aging programs, thereby addressing unmet needs and/or service gaps.

The Plan also provides a snapshot of the Division of Senior Citizens which consists of the State Agency and the Bureaus of Administrative Support, Community Support, Adult Protective Services and Program Administration and Program Development that assist the State Office in carrying out its responsibilities. Through its administration of 18 aging programs, the Division of Senior Citizens strives towards delivering a coordinated and comprehensive system of delivery that promotes older people to age in place, delaying if not altogether preventing premature institutionalization, with dignity, independence, and integrity.

Guam's State Plan on Aging provides a multitude of long-term services and supports for the elders on island, however, there are challenges we face of which funding is a major issue to be able to expand services in order to meet the increasing demand. While most, including the government, are compassionate towards its "manamko" (its senior citizens); aging programs are not exempted from budgetary constraints and setbacks. Therefore, the goals and objectives of the Plan reflect this reality.

In order to address the needs of Guam's aging population, the Guam SOA has set forth the following goals:

Goal 1: The Guam SOA will maintain, strengthen or enhance Title III/VII aging programs.

Goal 2: The Guam SOA will integrate ACL Discretionary Grants: State Health Insurance Assistance Program, Senior Medicare Patrol Project, and the No Wrong Door Planning Grant with OAA Core Programs such as the Case Management Services (CMS) Program and the National Family Caregiver Support Program.

Goal 3: The Guam SOA will collaborate with organizations, such as the Department of Integrated Services for Individuals with Disabilities (DISID) and the Guam Behavioral Health and Wellness Center (GBHWC), who provides services to seniors and adults with disability to ensure program support consumer control and choice.

Goal 4: The Guam SOA will protect the rights of the elderly and adults with disabilities from abuse, neglect, and exploitation.

On June 11, 2015 the Guam State Office on Aging held a public hearing to receive comments on Guam's Four Year State Plan on Aging for FY 2016-2019. Two sessions were held, the first from 9:00 am to 12:00 pm and the second from 4:00 pm to 6:00 pm at the office of the Division of Senior Citizens. In attendance during the first session were four (4) members of the Guam Council on Senior Citizens (GCSC). Of the four (4), two (2) represented the Community-At-Large, one (1) represented the GovGuam Association of Retired Persons; and one (1) represented the Central Region of the island. Also present during the morning session was a representative of the Emergency Receiving Home, a temporary shelter for seniors and adults with disabilities who are in imminent danger of being abused; a student intern from the University of Guam; a senior from the general community, and several aging program staff representing the Bureau of

Adult Protective Services, the Bureau of Program Administration and Development, the Bureau of Community Support, and the Guam State Office on Aging.

During the 4:00 pm to 6:00 pm session, a member of the Guam Council on Senior Citizens (GCSC) representing the Guam Chapter of the American Association of Retired Persons attended and gave comments on the Plan. Aging program staff also attended the afternoon session.

During the hearing, a member of the GCSC provided comments with the following key points being reflected in the Plan, as follows: 1) re-state the benefit of supporting contract providers in marketing their services; to state in the section Prioritization of Services (POS) what happens when a client who is receiving services is discontinued due to the activation of the POS scale; 3) state that Social Security Income (SSI) is not available on Guam; and 4) to include the Organizational Chart of the Division of Senior Citizens into the Plan.

Another member of the GCSC who is also the President of the Guam Chapter of the American Association of Retired Persons shared his concerns about the level of engagement in bingo at the Senior Centers and would like to see other activities offered at the Senior Citizens Centers. Further, he would like to see an increase in the level of awareness in making financial transactions on-line and how difficult it is to be refunded after the transaction has been obligated, to give seniors warning on the cost of roaming charges, and offered to train seniors on financial exploitation. And he also noted, the need for more low cost housing for seniors, likes the age in place concept, and noted that there is an effort to make assisted living work on Guam.

III. CONTEXT

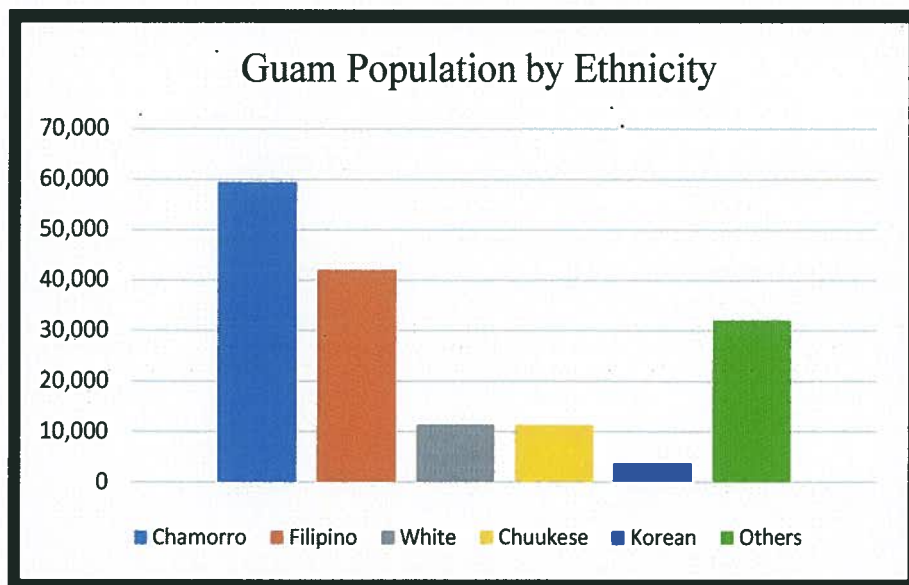
A. GUAM'S GEOGRAPHIC LOCATION AND CLIMATE

Guam, an unincorporated territory of the United States, is the largest and southernmost island in the Marianas Archipelago. This western-most territory of the United States lies 6,000 miles from the U.S. west coast and 3,700 miles west-southwest from its closest U.S. neighbor, Hawaii. Guam consists of a single landmass of 225 square miles (length of 30 miles, width between four and eight miles). The tropical climate is warm throughout the year. Temperatures range between 75 and 86 degrees Fahrenheit, with a mean annual temperature of 81 degrees. Guam is located within "Typhoon Alley" and is therefore vulnerable to frequent storms and typhoons that can potentially cause extensive damage and endanger the health and safety of residents.

B. GUAM'S AGING DEMOGRAPHICS AND ANTICIPATED GROWTH IN THE ISLAND'S AGING POPULATION

The 2010 Census estimates Guam's population to be 159,358. Of this number, there are approximately 17,108 or 10.7% of Guam's population age 60 years or older. Further, Guam's projections for 2010-2020 show an average growth rate for individuals 60 years of age and older to be approximately 4.14% per year. Therefore, by the year 2020, it is projected there would be approximately 25,646 individuals 60 years of age and older.

While the ethnicity of its aging population is not provided in the Census, the Census shows that the top 5 ethnic origins on Guam are: Chamorro at 37.26% or 59,381 of Guam's population of 159,358; 26.32% or 41,944 are Filipino; 7.10% or 11,321 are white; 7.05% or 11,230 are Chuukese, and 2.16% or 3,437 are Korean. The remaining 20.11% or 32,045 are a mix of other Asian, Pacific Islander, and other ethnic groups.



C. GUAM'S STATE OFFICE ON AGING

I. HISTORY OF THE GUAM STATE OFFICE ON AGING

In 1969, the Office of Aging, referred to as the "Office", forerunner of the State Office on Aging, existed as a section under the Department of Public Health and Social Services, Division of Social Services. The Office worked closely with the Guam Association of Retired Persons through its Servicio Para I ManAmko (SPIMA) project for the provision of services. Monies to support the activities of the Office of Aging gradually became available with Title III grants under the Older Americans Act of 1965, as amended. As a recipient of Federal funds under the Older Americans Act, the Office of Aging was also recognized as Guam's State Agency on Aging.

On August 28, 1978, Public Law 14-139 created the Division of Senior Citizens, State Office on Aging (SOA) within the Department of Public Health and Social Services. Although under the general supervision and control of the Director of Public Health and Social Services, the Guam SOA is mandated by P.L. 14-139 to work closely with the Guam Council on Senior Citizens on long-range planning and policy formulation with respect to senior citizens' programs, issues and concerns.

On January 30, 1989, the Adult Protective Services Unit (APS) was created through the enactment of Public Law 19-54, as amended by Public Law 21-33. On December 29, 2012, Public Law 31-278 was enacted updating the prior mandates regarding the provision of protective services for adults with a disability, ages 18-59 and seniors age 60 and older with or without a disability, upgrading the Unit to a Bureau, Bureau of Adult Protective Services (BAPS), while keeping with the original intent that BAPS is the sole Unit responsible for receiving and investigating all suspected cases of elderly and adults with disabilities abuse, neglect and exploitation.

A) Guam Council on Senior Citizens

The Guam Council on Senior Citizens (GCSC) was created through P.L. 14-139 on August 28, 1978. On April 1, 1994, P.L. 22-105 amended the composition of the GCSC from 15 to 17 members, adding the National Association of Retired Persons (NARFE) and the American Association of Retired Persons (AARP). The original 15 members prescribed by law include a representative from the Guam Mayor's Council of Guam, the Guam Association of Retired Persons, as well as two (2) representatives each from the northern, central, and southern regions, and seven (7) representatives from the community at large to include governmental, retiree organizations, ministerial, civic professional, and non-profit organizations. The mandate prescribes that the majority of the GCSC members shall be at least 55 years or older and appointed by the Governor.

Their functions and responsibilities are to:

1. Furnish leadership needed for long-range planning;
2. Work along with the Director for the coordination and implementation of programs, activities and services for the elderly;

3. Serve as an advocate for the elderly; and
4. Adopt rules and regulations necessary for the implementation of provisions of Public Law 14-139.

The GCSC has been inactive since January 2003. After over 12 years of inactivity, on May 8, 2015, Governor Eddie Baza Calvo swore-in 10 new members of the Guam Council on Senior Citizens before nearly 400 seniors in attendance during the 4th Annual Guam Conference on Aging held in celebration of Senior Citizens Month. On June 9, five (5) additional members were sworn-in by the Governor in his Chambers. The two (2) remaining members are being scheduled to be officially sworn-in. Nonetheless, with 15 new members sworn-in, the Council can convene, as a quorum of 9 is required for official business to be conducted.

B) Guam's Aging Network

Guam SOA serves as an advocate for older persons on Guam, and assists other agencies and other organizations in the development of a comprehensive and coordinated system of long-term services and supports. The Guam SOA seeks to facilitate the promotion, planning, and establishment of a comprehensive long-term care system that assists senior citizens with functional disabilities, older persons and their families, and the network of partners who serve adults with disabilities, that emphasizes consumer choice, independence and quality of life.

Under the Guam State Office on Aging, the aging network is comprised of contracted service providers and vendors administering 10 Title III aging programs and one (1) locally funded program for a total of 11 programs on contract. Currently, there are five (5) programs administered by four (4) for-profit businesses; four (4) programs being administered by one (1) non-profit organization, two (2) programs being administered by a government entities. The SOA administers seven (7) programs, including the Adult Protective Services.

The Transportation Services Program is contracted to a for-profit company, Kloppenburg Enterprises, Inc. that has been operating their business on Guam for 46 years and has been our transportation vendor since July 9, 2009. Their current agreement is expiring on September 30, 2015 and the DSC is working with General Services Agency (GSA), our local procurement office, to publish, evaluate, and award the next bid for the provision of transportation services for a period of four (4) years from the date of award. Therefore, the current vendor may or may not be the vendor for the period of this State Plan.

The Legal Assistance Services program is contracted to the law firm of Fisher and Associates and their current agreement expires on September 30, 2015. On May 18, 2015, the Request for Proposal was published to solicit proposals from prospective offerors to provide this program service for three years. The proposals are due on June 15 and, unless a protest is filed, the Guam SOA anticipates an award would be made this fiscal year, Fiscal Year 2015.

The Mayors' Council of Guam (MCOG) has been in existence since 1832 and was previously called the Commissioner's Council. The MCOG is a government entity who through a Memorandum of Understanding (MOU) with the Guam SOA (DPHSS) provides for the daily operations of 12 Senior Citizens Center on island. An MOU is being drafted for FY 2016 for the

MCOG to continue their operation of this program. As to Fiscal Years 2017, 2018 and 2019, services will be provided either through an MOU with the MCOG or the program will be put forth through another procurement model.

The Adult Day Care, Case Management Services, In-Home Services programs and one locally funded program, the Emergency Receiving Home, a protective services program, is contracted with Catholic Social Service (CSS), a faith based organization that has been in existence for over 35 years. The three programs, Adult Day Care, Case Management Services and In-Home Services were awarded this fiscal year, Fiscal Year 2015, for a period of three years; therefore, inclusive of the current fiscal year, Catholic Social Service will be the provider for the three programs for Fiscal Years 2016 and 2017. For Fiscal Years 2018 and 2019, the Guam SOA will put forth the Request for Proposals for the three programs. The Emergency Receiving Home program will be put forth as an Invitation for Bid during Fiscal Year 2015 for services to commence on December 2, 2015, Fiscal Year 2016, for a minimum period of three years, unless the procurement office supports this program being put for bid for more than three years which the Guam SOA is incline to do; increase the number of years this program is contracted out for.

The Elderly Nutrition Program is comprised of two parts, C1 or Congregate and C2 or Home-Delivered. This program is contracted to Basil Food Industrial Services Corporation has been in business for 13 years and has been the Vendor for the senior meals program since September 4, 2014. The agreement with this Vendor is for three years, therefore, it is anticipated this Vendor will provide services for Fiscal Years 2016 and 2017. For Fiscal Years 2018 and 2019, the Guam SOA will put for an Invitation for Bid for both parts of the Elderly Nutrition Program.

The Preventive Health funds is used to provide an evidence-based program at various, pre-selected, Senior Citizens and Adult Day Care Centers. The engagement of this program is made through a Memorandum of Understanding (MOU) with the University of Guam, Cooperative Extension Program. The UOG was founded in 1952 as a two-year teacher training college known as the Territorial College of Guam. In 1965 it was accredited as a four-year degree granting institution. It was designated as a land grant institution by the US Congress in 1972.

The National Family Caregiver Support Program (NFCSP) first began its services on Guam in October 2001 to offer five direct services that best meets the range of caregiver needs. It operated under the University of Guam – Institute of Micronesia Health and Aging Studies and the DPHSS/DSC. Today, this program is currently contracted to Health Services of the Pacific (HSP) which was incorporated on April 22, 2004 as a C Corporation, providing health care services primarily in the home setting. HSP has been a service provider for the NFCSP since October 1, 2011.

Beyond the network of contracted providers of the DSC, the island's network of providers who support the senior community of Guam consists of other private and public agencies who have an interest or provide services to senior citizens, such as but not limited to housing, employment, health services, long term care, transportation, educational opportunities, and advocates for individuals with disabilities. These entities are key partners in providing long-term services and supports to Guam's aging community. A few key partners include the Medicaid and Medically Indigent Program, Supplemental Nutrition Assistance Program (formerly the Food Stamp

Program), Social Security Administration, Guam Housing and Urban Renewal Authority, Guam Chapter American Association of Retired Persons, GovGuam Association of Retired Persons, St. Dominic's Senior Care Home, Department of Integrated Services for Individuals with Disabilities, Office of the Public Guardian, Guam Legal Services Corporation, Veterans Administration, Guam Memorial Hospital, Office of the Attorney General, Guam Behavioral Health and Wellness Center, Victim Advocates Reaching Out, and Salvation Army.

In addition, through the collaborative work we do for the annual celebration of Senior Citizens Month referred to in the nation as Older Americans Month, the DSC has forged partnerships with the Lions Club International-District 204, Guam Fire Department, Guam Legislature, Guam Visitors Bureau, and the Bureau of Family Health and Nursing Services under the Department of Public Health and Social Services.

II. MISSION, VISION AND PURPOSE OF THE GUAM STATE OFFICE ON AGING

The mission of the Guam SOA is to plan, coordinate, implement, and evaluate programs and services, and to identify and leverage all possible resources towards promoting, maintaining and protecting the total well-being of older persons (seniors citizens age 60 years and older), while safeguarding their dignity, integrity, independence, values and cultures.

Guam SOA's vision is to provide formal community support systems that promote the independence, integrity, and dignity of all older persons on Guam while striving to ensure their individual cultural practices and beliefs are respected in a continuous effort to support their desire to age in place.

The purpose of the Guam SOA is to administer Title III programs mandated by the Older Americans Act (OAA) of 1965 as amended by the OAA Amendments of 2006 and the development and administration of Guam's Four Year State Plan on Aging. The State Agency and Bureaus of Administrative Support, Community Support, Adult Protective Services, Program Administration and Program Development assist the State Office in carrying out its responsibilities. The administration of aging programs strives towards delivering a coordinated and comprehensive system of delivery that promotes older people to age in place, delaying if not altogether preventing premature institutionalization, with dignity, independence, and integrity.

The Guam SOA is responsible for coordinating all activities on Guam relating to the purposes of the Older Americans Act to help elderly individuals maintain independence and dignity in their homes and communities. Through the efforts of the Guam SOA, program services and initiatives will focus on meeting the rapidly growing new generation of long-term care consumers and their desire to age at home among their families and friends. Guam SOA will continue to request for state (local) funding to meet the basic matching requirements of the Administration for Community Living (ACL) and further expand local efforts through additional state, private or Federal grant funding. Guam SOA will continue to advocate for older individuals on Guam and assist agencies and other entities in the development of a comprehensive and coordinated service delivery system throughout Guam in line with the mission and vision of the ACL.

III. AGING PROGRAMS

Although Guam's Public Law 14-139 defines a senior citizen as age 55 years or older, aging services administered by the Guam SOA are provided to older individuals 60 years of age and older based on OAA eligibility criteria, unless otherwise provided for as in the target population of the National Family Caregiver Support Program and the Bureau of Adult Protective Services. Clients of the National Family Caregiver Support Program include caregivers serving elderly individuals; elderly caregivers serving children; and elderly caregivers serving adults and children with disabilities. The Adult Protective Services serves individuals 60 years of age and older and adults with a disability between the age of 18-59.

Through funding from the ACL, Administration on Aging, as authorized through the Older Americans Act of 1965, as amended, the Guam SOA provides the following services, either directly or through contract:

1. Title III-B: Supportive Services which includes Adult Day Care, Case Management, In-Home Services, Legal Assistance Services, Senior Center Operations, and Transportation Services
2. Title III-C: Elderly Nutrition Program
 - a. C1 - Congregate
 - b. C2 – Home-Delivered Meals
3. Title III-D: Preventive Health
4. Title III-E: National Family Caregiver Support Program
5. Title VII: Elder Abuse and Ombudsman
6. Adult Protective Services and the Emergency Receiving Home
7. Senior Citizens Month
8. State Health Insurance Assistance Program (SHIP)
9. Senior Medicare Patrol (SMP) Project
10. Aging and Disabilities Resource Center (Software Development)

A more detailed description of these programs and projects is provided as Attachment C.

IV. FUNDING

For planning purposes, it is projected that in FY 2016 Guam SOA will receive \$2,964,043.00 or approximately 24% in Federal dollars and \$9,442,266.00 or approximately 76% in local dollars for a total of \$12,406,309.00 for its operations.

Although the Title III B Supportive Services Funding Formula is at 85% Federal and 15% local match, the actual percentage allocation based on the total FY 2015 contract values shows the Guam SOA overmatching by 87%. The total contract value for FY 2015 is \$6,332,890 of which \$842,480 is the Federal-local maintenance of effort, with a remaining value of \$5,490,410.00 being the local overmatch or the 87% identified.

Two programs, Title III C1 Elderly Nutrition Program (Congregate) and Title III E National Family Caregiver Support Program, remain at their actual maintenance of effort levels, at 85% Federal -15% local and 75% Federal - 25% local, respectively.

Additional funding comes from a grant through the Administration for Community Living for the operation of a State Health Insurance Assistance Program (SHIP) locally recognized as the Guam Medicare Assistance Program to assist beneficiaries navigate through the Medicare system and to administer the Guam Senior Medicare Patrol Project. Given the local commitment described above, Guam SOA projects to maintain expenditure levels for the next four (4) years, in line with the ACL requirements. Aging programs are encouraged to accept donations, cash or in-kind, from consumers and families. Additional program income funds are generated through program activities, such as bingo and fundraisers. All funds received through donations or raised through program activities are for the sole use of the program through which the funds were obtained or generated.

Guam SOA intends to expend no less than the amount expended in Fiscal Year 2000 as prescribed by the Older Americans Act of 2000 as amended in 2006 and projects to expend approximately \$12.4 million in Fiscal Year 2016. In Fiscal Year 2017, we anticipate level funding as in Fiscal Year 2016; however, we look forward to an increase in funding in Fiscal Years 2018 and 2019.

The Guam SOA will notify the Administration for Community Living when there is a change in the method of providing Title III Aging Programs in a manner that affects the availability and/or funding of ongoing services to ensure proper guidance is received on the matter and to ensure that the Federal granting agency is aware of any impact on the delivery of services to the elderly, their families and caregivers, and our partners in the disability community.

V. PERSONNEL ORGANIZATION

Guam's State Office on Aging (SOA) is one (1) of five (5) divisions within the Department of Public Health and Social Services. In Fiscal Years 2015 and 2016, the SOA is authorized 20 full time employees (FTE). Ten (10) positions are filled with ten (10) funded, vacant positions to be filled, as follows:

1. Chief Human Service Administrator (Position Number 6918) SOA
2. Administrative Officer (Position Number 6914) BAS
3. Administrative Assistant (Position Number 6604) BAS
4. Customer Service Representative (6474) BAS
5. Social Worker III (Position Number 6915) BAPS
6. Social Worker III (Position Number 6612) BAPS
7. Program Coordinator III (6480) BAPS
8. Program Coordinator IV (Position Number 6282) BPAD
9. Program Coordinator III (6609) BPAD
10. Program Coordinator III (6505) BCS

Key:

SOA – State Office on Aging
BAS – Bureau of Administrative Support
BPAD – Bureau of Program Administration and Development
BAPS – Bureau of Adult Protective Services
BCS – Bureau of Community Support

Recruitment of personnel is essential for the Guam SOA to maintain its leadership role in developing a comprehensive approach in the planning, coordination, integration, implementation, and evaluation of long-term services and supports that enables senior citizens and persons with disabilities to develop or maintain their full potential, skills, abilities and community participation.

The recruitment of suitable applicants to fill vacant positions can span over a period of two fiscal years resulting in existing personnel managing a multitude of programs and projects with little to no room for innovative practices and professional growth, both critical aspects for personnel to develop and maintain their technical soundness and competencies. Without adequate personnel, the Guam SOA is challenged to: explore best practices in the delivery of services; become more engaged in program delivery services through increased and planned monitoring; conduct data analysis in order to identify trends and program projections that would guide program decisions; develop professional capacities in program management; and implement a succession plan for the future of Guam's SOA.

Current filled positions include a:

1. Senior Citizens Administrator
2. Management Analyst III
3. Two (2) Program Coordinator IVs
4. Four (4) Program Coordinator IIIs
5. Social Service Supervisor I
6. Social Worker III

In addition to the 20 positions identified earlier, the Guam SOA requires 14 additional personnel, based on the 2015 Organizational Chart in order to provide the optimal level of professional guidance and technical assistance to the aging and disabilities network; to be at the cutting-edge in addressing aging issues; to improve, expand, and refine aging programs and services, and which would lend itself to personnel within the Guam SOA becoming subject matter experts in the field of aging. The following 14 vacant and unfunded positions are subject to change depending on the need, direction and resources of the Guam SOA:

1. Bureau of Administrative Support
 - a. Management Analyst IV
 - b. Administrative Aide
 - c. Two (2) Customer Service Representatives
2. Bureau of Program Administration and Development
 - a. Human Services Administrator
 - b. Two (2) Program Coordinator IIIs
3. Bureau of Community Support
 - a. Human Services Administrator
 - b. Program Coordinator IV
 - c. Program Coordinator III
4. Bureau of Adult Protective Services
 - a. Human Services Administrator
 - b. Social Service Supervisor I

c. Two (2) Social Worker IIIs

Attachment D provides the Organizational Chart for the Division of Senior Citizens, Guam State Office on Aging.

VI. GUAM STATE OFFICE ON AGING AND STATE AGENCY ON AGING, BUREAU DESCRIPTIONS

In accordance with Public Law 14-139, the Division of Senior Citizens, Guam's State Office on Aging plans, coordinates and implements programs geared toward assisting older individuals in addressing their needs and problems, and in their attainment or maintenance of a satisfying lifestyle. The Guam SOA is charged with the responsibility of administering Title III Supportive Services, Elderly Nutrition Program, Preventive Health, and the National Family Caregiver Support Program; Nutrition Services Incentive Programs; and the Title VII Elder Abuse and Ombudsman Programs, as mandated by the Older Americans Act (OAA) of 1965 as amended by the OAA Amendments of 2000 and 2006, and the development and administration of Guam's Four Year State Plan on Aging, 2016-2019. In addition, the Guam SOA administers the Guam State Health Insurance Assistance Program (SHIP) locally recognized as Guam Medicare Assistance Program (Guam MAP), the Senior Medicare Patrol Project (SMP), the No Wrong Door (NWD) Planning Grant and the Aging and Disabilities Resource Center (ADRC).

Through the various programs administered by the Guam SOA, services have included working with and advocating for persons with disabilities under the age of 60 through the efforts of the Bureau of Adult Protective Services, National Family Caregiver Support Program, Guam Senior Medicare Patrol Project, and the Guam State Health Insurance Assistance Program. Through these key programs, care coordination is provided to the person with a disability.

The State Agency and Bureaus of Administrative Support, Community Support, Adult Protective Services, and Program Administration and Development assist the State Office in carrying out its responsibilities. The Administration of Aging programs promotes older people to age in place, delaying if not altogether preventing premature institutionalization, with dignity, independence, and integrity. In support of the State Office; the State Agency and the Bureau of Administrative Support assist the State Agency in carrying out its administrative responsibilities.

A. BUREAU OF PROGRAM ADMINISTRATION AND DEVELOPMENT

Bureau Mandates and Responsibilities: In accordance with the Older Americans Act of 1965 as amended, the Guam SOA implements and coordinates the provision of services to older individuals age 60 years of age and older.

In fulfilling its assigned mandate, the BPAD:

1. Identifies and uses all possible resources towards promoting, maintaining, and protecting the total well-being of older individuals including their dignity, values, and cultures;
2. Advocates to ensure our elderly enjoy their well-deserved rights and benefits;

3. Ensures each and every older individual who is capable of self-care with the appropriate supportive services will be afforded the maximum independence and dignity in a home environment;
4. Strives to remove individual and social barriers to economic and personal independence;
5. Ensures a continuum of care for the vulnerable elderly is provided; and
6. Requires quality services to be provided for senior citizens' programs and activities.

Within the Bureau of Program Administration and Program Development are two (2) units:

Program Administration Unit (PAU) is charged to ensure compliance of 10 Title III aging programs contracted through Invitation for Bids, Requests for Proposals or through Memorandum of Understanding with for-profit, non-profit or another government entity. The staff of this Unit are responsible for ensuring the specifications of each program is reflective of the current rules, regulations and applicable laws. Unit staff monitor activities such as, reviewing submitted monthly program reports that contain statistical, financial and narrative components to ensure the program information and data is accurate and complete by cross checking statistical to narrative and reconciling financial information to ensure no discrepancies are identified. Identified discrepancies are communicated to the impacted provider to address to resolve. Discrepancies may result in disallowed costs, unauthorized expenditures and penalties.

In addition, periodic site visits are conducted, and program invoices are reviewed and processed for payment. Each staff will conduct monthly site visits of their respective assigned programs. In the event, the program requires more frequent site visits due to need or the number of locations the service is provided at, the increase in site visits will be performed by the assigned Unit staff. The purpose of the site visits is to document the operations and delivery of services provided by the contracted provider to ensure contractual compliance.

Further, programs are monitored through a combination of reporting requirements reviewed and cleared each month, responding to complaints, and through technical assistance meetings conducted throughout the program year, as needed or requested. The PAU is also responsible for annually reporting program data in the National Aging Program Information Systems (NAPIS) State Reporting Tool as well as preparing semi-annual, annual, and final Federal Financial Reports for Title III aging program services. PAU also participates in negotiating program budgets with Service Providers and Vendors.

Program Development Unit (PDU) is charged with developing new programs or providing recommendations on how to enhance or refine existing programs and/or projects, as well as applying and/or managing grants in their formative stages with the possibility that once the program is determined to be long term, will be transferred to either another bureau or unit within the Guam SOA. PDU is also charged with the responsibility of drafting program specifications and Requests for Proposals, Invitation for Bids, Memoranda of Understanding, and Emergency Procurement. In the execution of the Unit's responsibilities collaborative partnerships with, but not limited to, the General Services Agency, Office of the Attorney General is required to complete the project.

B. BUREAU OF ADULT PROTECTIVE SERVICES

Bureau Mandates and Responsibilities: The Bureau of Adult Protective Services (BAPS) was created in January 1989 through the enactment of Public Law 19-54 and later amended by Public Law 21-33. On December 28, 2012, Public Law 31-278 repealed and amended the APS mandate providing clearer definitions on the types of abuse, expanding on the list of professionals under mandated reporters, providing the personnel required for protective services to be fully operational in investigations and prevention fronts, and lifting the work of this body from Unit to Bureau. The Bureau is mandated to receive and investigate all reports of abuses against the elderly or adults with a disability; these specifically include but are not limited to reports of abuse in facilities operated by the DPHSS and other public or private agencies and in private residences. The types of abuse reportable to the BAPS include: abandonment, physical abuse, emotional or psychological, financial or property exploitation, neglect, self-neglect or sexual abuse. Through a contract service agreement with Catholic Social Service, an Emergency Receiving Home (ERH) is available to provide a safe and temporary shelter to elderly and adults with disabilities who are victims of abuse. The ERH program also provides a 24-hour Crisis Intervention Hotline to receive and respond to reports of abuse and neglect and to ensure victims of abuse have access to APS at all times. The ERH program from FY 2016 on will be called Guam Serenidad or Home of Serenity. Further, the Bureau provides outreach, education, monitoring, and advocacy for vulnerable elders and adults with disabilities.

The Bureau also manages Older Americans Act (OAA) Title VII allotments for Vulnerable Elder Rights Protection Activities, namely, the Long Term Care Ombudsman and Elder Abuse Prevention Programs. The funds are used for a portion of the LTC Ombudsman salaries and benefits, off-island training and other program needs articulated by the Guam SOA.

A review of statistical data on the types of referrals/intakes received by the APS in the prior three (3) fiscal years shows a consistency as to the highest types of referrals/intakes received and investigated, as illustrated in the table below.

Fiscal Year	1st Highest Type	2nd Highest Type	3rd Highest Type
FY 2014	87 Emotional/Psychological	71 Financial/Property	59 Neglect
FY 2013	74 Emotional/Psychological	71 Financial/Property	56 Neglect
FY 2012	67 Neglect	65 Financial/Property	46 Emotional/Psychological

1. In FY 2014, Emotional/Psychological ranked the highest in all types of abuse received by the BAPS and the ERH with 87 referrals, an increase of 13 or 17% from Emotional/Psychological referrals received in FY 2013, which ranked highest for referrals received for that Fiscal Year.
2. Financial/Property Exploitation ranked second with 71 referrals received in FY 2014 and FY 2013.
3. Neglect which ranked the highest in Fiscal Year 2012 with 67 referrals received ranked as third highest in FY 2014 with 59 referrals, a 5% increase from FY 2013.
4. For all the three (3) years in review, Neglect, Financial/Property and

Emotional/Psychological remain as ranking within the top three types of abuse reported and investigated by BAPS.

C. BUREAU OF COMMUNITY SUPPORT

Bureau Responsibilities: The Bureau of Community Support (BCS) is responsible for managing all aspects of information, assistance, referral, orientation and outreach with respect to providing information to assist older individuals, their caregivers, and family members navigate through the social services continuum our island has available. In addition, BCS manages the Guam State Health Insurance Assistance Program and the Guam Senior Medicare Patrol Project funded by the Administration for Community Living. Jointly, both federally funded programs directly and through partnerships with public and private entities provide information, assistance and counseling assistance on all Medicare related matters, and provide education on how to protect, detect and report Medicare/Medicaid fraud, waste, abuse and error when suspected. In Fiscal Year 2014, the BCS recorded a total of 2,548 Medicare contacts.

No Wrong Door (NWD)

The Division of Senior Citizens (DSC), Department of Public Health and Social Services (DPHSS) was awarded, on September 26, 2014, a 12-month No Wrong Door (NWD) planning grant in the amount of \$100,000 from the Department of Health and Human Services (HHS), Administration for Community Living (ACL).

The main “deliverable” at the end of the 12-month planning period is a 3-Year Plan that includes a detailed strategy, work plan, and budget Guam will use, pending the availability of additional federal support, to begin transforming the multiple access functions that are administered by Guam’s various Long-Term Services and Supports (LTSS) programs into a single statewide NWD System to access LTSS for all populations and all payers in Guam.

As of the writing of this State Plan, partners co-leading in the planning process include the State Office on Aging, the State Medicaid Agency, Department of Integrated Services for Individuals with Disabilities (DISID), the state agency that serve or represent the interests of individuals with physical disabilities and individuals with intellectual and developmental disabilities and the Guam Behavioral Health and Wellness Center the state authority administering mental health services. The initial meeting with the key partners was held on October 16, 2014 to discuss collaborative efforts. A stakeholders’ orientation meeting was also held on November 25, 2014 to explore the concepts of a No Wrong Door System and the planned steps for bringing stakeholders’ input into a culminating implementation plan that uses LTSS in all aspects of the planning process. An exploratory site visit was conducted from January 14-16, 2015 on the islands of Oahu and Maui, Hawaii to learn more about their No Wrong Door Initiative to include their Aging and Disabilities Resource Center. On May 8, 2015 at the 4th Annual Guam Conference on Aging, a voluntary NWD survey was conducted to gauge client’s perception of the services provided by the Guam SOA and the Department of Integrated Services for Individuals with Disabilities. As of the writing of this document, the results have yet to be tabulated.

The 12-month planning grant expires September 29, 2015. Should the Guam State Office on Aging not receive Federal funds to implement Guam's NWD System, the Guam SOA will pursue other funding opportunities and collaborate with the key stakeholders to continue the work for the implementation of Guam's NWD system. The NWD key stakeholders can then rank which component or objective of the 3 Year NWD plan to implement first and build upon this effort.

D. METHOD FOR CARRYING OUT PREFERENCE FOR RURAL OLDER INDIVIDUALS AND OLDER INDIVIDUALS IN GREATEST SOCIAL AND ECONOMIC NEED

Guam, a rural single planning and service area, in line with the Older Americans Act, as amended in 2000 and 2006, will give preference in the provision of services to older individuals with greatest economic need and older individuals with greatest social need, (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency). The approach to provide services to those in greatest need will be activated upon notification by Guam SOA to providers of aging services that we are to scale back services due to a forced reduction in work force, inadequate funding or increased demand versus limited supply and due to man-made or natural disaster or incidences of national significance.

Guam SOA recognizes the unique situation in which the demand for services may outweigh the available resources; therefore, the following scale serves as a guideline to prioritize the provision of services to those in greatest socio-economic need, as necessary and directed by the Guam SOA. When the Service Provider receives notification from the Guam SOA to activate the application of the Prioritization of Services point system, the entire list of eligible clients shall be ranked. The entire list is defined as all who are receiving services, those on partial or wait-list, as well as new referrals.

The scale will be based on a point system in three (3) focal areas, the older individual's (for NFCSP, the Care Recipient): (1) mobility, (2) degree of existing support system, and (3) housing condition with the greatest priority will be given to older individuals in descending order, with nine (9) being the highest possible points garnered translating to the older individual in greatest socio-economic need.

Point System	Mobility	Support System	Housing Condition
1	Cane or Walker	Support available; but not living in same household	Full concrete structure
2	Wheel chair users	Minimal support; but not regularly available	Semi-concrete structure
3	Homebound and bedridden	No support system in place	Tin and wood structure

Based on the need to activate this provision, the number of persons to be served will be determined by the existing conditions at the time of implementation. In the event that the number of available slots is not sufficient to provide services to the number of persons determined to be at-risk and in need of services, the number of Activities of Daily Living (ADL)

impairments will be applied to this distinct group as an additional determining factor for services.

Impairment in ADL – The inability to perform one or more of the following six activities of daily living without personal assistance, stand-by assistance, supervision or cues: <i>eating, dressing, bathing, toileting, transferring in and out of bed/chair, and walking.</i>	
Point System	1 point will be added to clients with 1-2 ADL impairments.
	2 points will be added to clients with 3-4 ADL impairments.
	3 points will be added to clients with 5-6 ADL impairments.

Another determining factor in this point system may include whether the older individual is responsible for the care of a dependent. Clients will be given an additional one (1) point if they are also caregivers. Any application of a scale of similar or like form is permissible provided prior authorization is granted by the Guam SOA. Any application of a scale of similar or like form is permissible provided prior authorization is granted by the Guam SOA.

After applying the Prioritization of Services and the demand for services still outweigh the available resources, the Service Provider shall advise the Guam SOA who will provide additional guidance and direction to the Service Provider as to other variables and/or conditions to assess to reduce the demand to meet the available resources. At the time of the initial assessment, clients, to include their caregivers, will be informed that if the prioritization of services is implemented and the client is not determined to be in greatest social and economic need, they would be temporarily removed from the program until such time a slot is open and they are identified, after all clients have been re-prioritized, that they are determined to be next qualified to be re-instated into the program.

E. ISSUES, TRENDS, CHALLENGES, AND OPPORTUNITIES: RESOURCES FACING THE AGING NETWORK

Currently, most of the elderly on Guam rely exclusively on family for assistance and care giving. Based on the 2010 Guam Census, there are over 8,000 households with individuals 65 years of age and over. Because of the limited options available and the cultural values that place emphasis on being cared for by family, very few rely on paid help; while those determined in most social and economic need may access limited publicly funded services and supports. It is believed that most of the aged caregivers on Guam are women and that many of them are caring for their aged parents, their aged spouse, or for aging adult children with disabilities or chronic conditions. It is also believed that some of these informal caregivers have full-time jobs or must work due to economic necessity.

Sources of income for senior citizens on Guam include public and private pensions, social security benefits (excluding Supplemental Security Income or SSI), personal assets, employment earnings, and public assistance programs. However, the high costs of living on Guam, the loss of earning ability, erosion of financial resources because of increasing longevity, the increasing and sometimes catastrophic costs of health care, and the severely limited availability of publicly funded community-based long-term care services and supports, all contribute to the increasing economic vulnerability of Guam's senior citizens.

For many years, Guam residents accessed needed specialty care off-island because of the limited health care services available on island. This often resulted in exorbitant expenses for our residents which not only included hospital and other medical expenses, but travel costs as well as accommodations while off-island. But in 2015 two new facilities are expected to open their doors to provide better health care services for Guam: the Guam Regional Medical City (GRMC) and the American Medical Center.

Based on information obtained from the GRMC website, the GRMC, the only private hospital in Guam is expected to open its doors in early 2015 in the municipality of Dededo. The GRMC, operated by The Medical City (TMC), a Joint Commission International-accredited Philippine healthcare organization, will offer world-class health services tailored to the needs of Guam and the Micronesia region. The hospital's services will be aligned with TMC's centers of excellence and the region's specific health profile, featuring wellness, cardiology, medical oncology, endocrinology, pulmonology, neurology and other medical and surgical subspecialties.

Further, the hospital's Qualifying Certificate (QC) is anticipated to help the community as well as the hospital as it requires GRMC to make \$25 million dollars in public contributions staggered over the 20 year term of the QC, with a large portion recommended to be used to support Medicaid and the Medically Indigent Program (MIP) payments. Additionally, the QC also requires GRMC to treat MIP patients and support the work of local artists by having their art work displayed in the patient rooms.

GRMC will eventually employ up to 700 people, including new doctors and other specialists. Under the terms of the QC, 75% of all employees must be US citizens or Permanent Resident Aliens. In addition, many more support positions are being created by employers who are providing the hospital with supplies and fulfilling other service contracts. The new hospital will also help keep more health care dollars on Guam that otherwise would be spent off island.

Based on an August 9, 2014 article in the Guam Marianas Variety, the American Medical Center (AMC) will expand its services with a new facility currently in construction in Mangilao to serve the central and southern part of the island. The new location that will supplement the primacy care offered at the current facility in Upper Tumon is scheduled to open its doors in May 2015.

The approximately 15,000 square foot new facility provides multi-specialty care including family practice, pediatric, internal medicine with endocrinology, sport medicine, occupational medicine, and a full physical therapy and rehabilitation center. They will also have a full digital x-ray in-house for any radiology requirement and will be the only facility on island with both lab tech and DLS laboratories. It will also have a full pharmacy with drive-in windows for the convenience of its patients and will provide urgent care from 8 a.m. to 9 p.m. daily except on Sundays.

Further, more medical and other health professionals are seeing prevention as the key to effective health care for senior citizens. Health promotion and disease prevention program planning efforts and collaborative activities are currently being facilitated by Guam SOA. As more health and prevention-minded baby boomers on Guam age, there will be an increasing demand for health promotion and disease prevention activities and technologies to be an integral part of routine health care for seniors.

Moreover, Guam is experiencing a cultural shift from a family support system as the provider for long-term care to a more formal support system that provides long-term care services and supports for its aging community.

F. FUTURE NEEDS OF GUAM'S OLDER POPULATION

There is a growing demand for aging program services such as adult day care, in-home services, respite and caregiver services as Guam's elderly population continue to age. There is also a growing need for options for alternate housing options such as, assisted living facilities that can provide varying stages of care, such as for those who require minimal assistance and for those who require supervised care, or hospice care. The cost of health care and the non-existence of assisted living options on Guam are additional concerns for seniors in our community.

In recent years interest has been expressed by family members and potential investors to develop assisted living facilities on Guam with consideration on the inclusion of hospice care. Absent mandates to regulate this type of establishment, a key challenge for this to be realized is the manner in which services would be paid for as the local Medicaid program does not currently cover this type of service nor is there long term care insurance available on Guam.

On March 11, 2015, a legislative informational hearing was held to present and discuss the need to develop the assisted living industry on Guam. Representatives from the healthcare, elderly and persons with disabilities communities were on hand further expressing the need for assisted living to take hold on Guam, sharing of personal anecdotes and the acknowledgement of the work ahead of us for assisted living facilities to be an option for families to avail of. Subsequently, a task force was convened to continue the discussions on the development of this industry.

In accordance with Public Law 32-181, the Fiscal Year 2015 Budget Act, funds were appropriated from the General Fund to the Retirement Fund to pay the cost of Medicare premium for Parts A, B and D, for Government of Guam retirees and their survivors domiciled on Guam, and who are eligible to receive Social Security income benefits, and who are eligible to enroll in the Government of Guam Group Health Insurance Program, with reimbursements contingent on the availability of appropriated funds.

Through our partnership with Senator Aline Yamashita, former senator of the 32nd Guam Legislature and with the support of the members of the 32nd Guam Legislature and the Governor of Guam, \$1,000,000.00 was appropriated to the Guam SOA in FY 2015 Budget to expand Adult Day Care Services to the southern region of Guam, for protective services initiatives, and for other aging program needs.

The Guam SOA and in partnership with the Case Management Services (CMS) will work to formalize a working relationship with the three hospitals, one civilian, one military, and one private to coordinate for the transition of patients from the hospital back to the community. The formal process will put forth what is practiced in part by the staff of the CMS program when they are managing clients under their assignment who require assistance in this aspect of discharge planning.

The needs mentioned is based on wait-list for program services, such as Adult Day Care, In-Home Services and Legal Assistance Services which is reflected in the monthly program reports submitted by contracted providers. The Case Management Program services who works directly with the seniors, their families, friends and caregivers, their network of support, has documented the need for services to address alternate living arrangements and the need to coordinate and support hospice care. The Guam SOA will continue to advocate for the refinement and expansion of existing services and supports and will also work to establish new program services with existing and new partners to ensure services are coordinated in a meaningful manner.

IV. GOALS AND OBJECTIVES

Goal 1: The Guam SOA will maintain, strengthen or enhance Title III/VII aging programs.

Objective 1.1:

Provide formal support system for Long-Term Services and Support that would promote seniors to age in place.

Measurement(s):

During this plan period, the Guam SOA will submit its annual budget to the Guam Legislature to request funding to meet the required maintenance of effort and overmatched funds for Title III aging programs and provide funds to carry out Title VII, Elder Abuse and Ombudsman activities.

During this plan period, the Guam SOA will publish Request for Proposals or Invitation for Bids to engage the services of vendors and service providers to provide Title III aging services.

During this plan period, if Federal funds are not available for the implementation of Guam's NWD System, the NWD key stakeholders will convene to rank and determine which component or objective of the 3-Year NWD plan to implement.

Objective 1.2:

Renovate and rehabilitate the Inarajan Senior Citizens Center which serves as an Adult Day Care in the southern part of Guam.

Measurement(s):

During FY 2016, the Guam SOA will conduct quarterly follow-ups with Guam Housing and Urban Renewal (GHURA) on the status of the Community Development Block Grant (CDBG) application submitted on March 13, 2015 for the expansion and rehabilitation of the Inarajan Senior Citizens Center for the Adult Day Care Program.

If the March 13, 2015 application is not approved, the Guam SOA will pursue applying for CDBG funds during the next funding cycle.

If the CDBG grant is not approved by the second quarter of FY 2017, the Guam SOA will seek legislative support and assistance and explore other grant opportunities to fund the project.

Objective 1.3:

Educate and increase the capacity of aging network partners by arming them with information on other available aging programs to provide their clients.

Measurement(s):

Annually, during the plan period, the Guam SOA will convene a meeting of aging network partners to share information about their respective programs to develop a better understanding of other aging programs that would equip them to assist and refer their clients to access supportive services. The meetings will be an opportunity for all attendees to share the progress of their programs to include the success and challenges they are experiencing, changes in rules and regulations, to clarify roles and responsibilities to ensure services are delivered in a coordinated and integrated manner, and to look at future opportunities. Further, the meeting will also provide the Guam SOA feedback as to the current operations and how operations may be improved upon or documenting affirmation that services are meeting the need the program was designed to meet.

Objective 1.4:

Under the National Family Caregiver Support Program, caregiver training will be provided at two levels, one for the para-professional (paid) caregiver and the other for the family (unpaid) caregiver to strengthen their capacities as caregivers.

Measurement(s):

Between FY 2016 and FY 2017, 25 para-professional (paid) and 25 family (unpaid) caregivers will receive caregiver training with the support of the NFCSP service provider and the Allied Health Department, Guam Community College.

Between FY 2018 and FY 2019, an additional 25 para-professional (paid) and 25 family (unpaid) caregivers will receive caregiver training with the support of the NFCSP service provider and the Allied Health Department, Guam Community College.

By the end of the plan period, FY 2019, a total of 50 paid and 50 unpaid caregivers will receive caregiver training.

Throughout the plan period, the trainees, both paid and unpaid, will be asked to complete a satisfaction survey as part of their training program to provide feedback on areas of the training that: are to be maintained, need to be improved upon and new topical areas to be added to the training program. This will ensure training is meeting the needs of the caregivers while ensuring we maintain training standards for all caregivers.

Objective 1.5:**Quality Management**

The Guam SOA will review the Home and Community-Based (HCBS) Quality Framework put forth by the National Association of State Units on Aging and Disability (NASUAD) to identify the domain(s) to be used to gauge participant-centered planning, service delivery, provide performance and participant satisfaction.

Measurement(s):

In FY 2016, the Guam SOA will review the literature put forth by NASUAD to become familiar with the HCBS Quality Framework.

In the first quarter of FY 2017, the Guam SOA will identify the domains to be used to implement the HCBS Quality Framework.

In the second quarter of FY 2017, the Guam SOA will use the HCBS Quality Framework to assess on-going program implementation, for the remediation of problem areas, and continuous program improvement.

In the third quarter of FY 2017, the Guam SOA will conduct an internal review of the use of the HCBS Quality Framework findings and results to determine whether the same approach or a modification of the approach will be used for the next program assessment.

Objective 1.6:

Incorporate person-centered planning into the delivery of OAA programs.

During FY 2016, the Guam SOA will review literature and become familiar with Person-Centered Planning.

By the third quarter of FY 2016, Guam SOA staff will be trained in Person-Centered Planning.

By the fourth quarter of FY 2016, the Guam SOA will convene a meeting with Case Management Services (CMS) and other Title III and VII programs to discuss the inclusion of Person-Centered Planning into the delivery of other services.

By the first quarter of FY 2017, CMS program staff will be trained to use Person-Centered Planning to ensure clients retain control and are empowered to decide their service plan. CMS program staff will complete a training survey on the information provided to them regarding Person-Centered Planning.

By the end of the third quarter of FY 2017, a follow-up session will be conducted with the CMS program staff to start with how things are going with them using Person-Centered Planning followed by a re-fresher course on Person-Centered Planning to reinforce the concept and application of this theory.

Throughout FY's 2017 and 2018, Person-Centered Planning will be introduced to other contracted providers and vendors of all Title III programs with emphasis on the intent of the training to ensure clients retain control and are empowered to determine their service plan. At the end of each training session, a survey will be conducted to determine the perceptions of the trainees with using Person-Centered Planning, the ease of understanding the material and what can be done to improve future trainings in this area of practice.

Throughout FY 2019, the Guam SOA will invite two key agencies, the Department of Integrated Services for Individuals with Disability and Guam Behavioral Health and Wellness Center to

discuss our use of Client-Centered Planning and to inquire if their agency would be receptive to using this approach, and if so, the Guam SOA will provide the training to the staff of each agency.

Objective 1.7:

Incorporate Options Counseling into the delivery of OAA programs.

Measurement(s):

During FY 2016, Guam SOA staff will review literature and become familiar with Options Counseling.

By the third quarter of FY 2016, Guam SOA staff will be trained on Options Counseling.

By the four quarter of FY 2016, the Guam SOA will convene a meeting with Case Management Services (CMS) and other Title III and VII programs to discuss the inclusion of Options Counseling into the delivery of their services.

By the first quarter of FY 2017, CMS program staff will be trained to use Options Counseling. CMS program staff will complete a training survey on the information provided to them regarding Options Counseling.

By the end of the third quarter of FY 2017, a follow-up session will be conducted with the CMS program staff to start with how things are going with them using Options Counseling followed by a re-fresher course on Options Counseling the use of this approach

Throughout FY's 2017 and 2018, Options Counseling will be introduced to other contracted providers and vendors of all Title III programs. At the end of each training session, a survey will be conducted to determine the perceptions of the trainees with using Options Counseling, the ease of understanding the material and what can be done to improve future trainings in this area of practice.

Throughout FY 2019, the Guam SOA will invite two key agencies, the Department of Integrated Services for Individuals with Disability and Guam Behavioral Health and Wellness Center to discuss our use of Options Counseling and to inquire if their agency would be receptive to using this approach, and if so, the Guam SOA will provide the training to the staff of each agency.

Objective 1.8:

The Guam SOA will continue to provide the evidence-based Preventive Health activity at the Senior Citizens Centers or Adult Day Care Centers.

Measurement(s):

Throughout the plan period, as long as the University of Guam remains the sole entity managing an evidence-based program in line with the requirements of the Preventive Health grant, the Guam SOA will continue to partner with the University of Guam, Cooperative Extension Service to provide our seniors on an annual basis, the National Council on Aging: *Healthy Eating for Successful Living In Older Adults*", an evidence-based program.

Throughout the plan period, as long as the University of Guam remains the sole entity managing an evidence-based program in line with the requirements of the Preventive Health grant, the Guam SOA will continue to partner with the University of Guam, Cooperative Extension Service to provide our seniors on an annual basis, the National Council on Aging: *Healthy Eating for Successful Living In Older Adults*”, an evidence-based program.

By the third quarter of FY 2018, the Guam SOA will repeat the public inquiry if any other entity is managing an evidence-based program in line with our Preventive Health grant that we could consider to engage services with for this grant activity.

Objective 1.9:

The Guam SOA will work with Title III providers to market their services to other agencies and users or payees beyond their current contracted service agreements with the government.

By February 2016, the Guam SOA will convene a meeting with the directors of each contracted agency, for profit or non-profit, to discuss how their existing services could be offered to at a pre-determined cost to provide services to seniors and other populations who will benefit from the service they provide.

By July 2016, the Guam SOA will work with one contracted provider or vendor to present their ability to expand their services in phases: Phase 1 is to the clients they serve, Phase 2 will be to clients they do not currently serve, and Phase 3 to private insurance companies to consider the service as part of the benefits package to their subscribers.

By August 2016, the Guam SOA will, along with the selected contracted provider or vendor will present their ability to provide additional service to the clients they serve through a flyer and a scheduled meeting as published in a flyer.

By the first quarter of FY 2017, the Guam SOA along with the selected provider or vendor will present the service they can provide to clients and advocates of clients who may recommend the service to the client or caregiver who will then make arrangements for the payment of the service.

By the third quarter of FY 2017, the Guam SOA along with the selected provider or vendor will present the service they can provide to a private insurance provider to consider being included as part of their benefits package.

Throughout the rest of the plan period, the Guam SOA will continue to work on this front to have services marketed so others have the option to purchase the services to help themselves or their loved ones with the demands of daily living.

Goal 2: The Guam SOA will integrate ACL Discretionary Grants: State Health Insurance Assistance Program, Senior Medicare Patrol Project, and the No Wrong Door Planning Grant with OAA Core Programs such as the Case Management Services (CMS) Program and the National Family Caregiver Support Program.

Objective 2.1:

The Guam SOA will continue its integration of the SHIP and the SMP with the CMS Program and expand its information dissemination effort within other Title III core programs in an effort to promote and heighten Medicare program awareness throughout the community.

Measurement(s):

Throughout this plan period, the CMS contracts will contain a provision that requires the contracted provider to provide Medicare information to clients, caregivers and families and to report their Medicare activities in the SHIP national database.

Objective 2.2:

The Guam MAP and SMP will conduct Joint Medicare Training which will include the CMS program staff, volunteers and key partners. The content of the training provides 20 to 25 participants with basic information on the benefits of Medicare, how to review their Medicare Summary Notices (MSN), Explanation of Benefits (EOB) and to resolve billing issues and to identify improper medical or prescription drug claims. It is estimated that over 1,000 Medicare beneficiaries will be reached each fiscal year.

Measurement(s):

Throughout this plan period, a total of four (4) annual joint Guam MAP and SMP Medicare Training would be provided to increase the knowledge base of CMS program staff, volunteers and key partners.

Throughout this plan period through the annual joint Guam MAP and SMP Medicare Training, the volunteer work pool will increase by 10% for each fiscal year.

Objective 2.3:

The Guam MAP and SMP will conduct monthly in-service sessions to the CMS Program staff to provide Medicare updates, keep them abreast with the latest Medicare fraud trends occurring throughout the nation, and to discuss complex Medicare cases through case scenarios.

Measurement(s):

During this plan period, for each fiscal year a total of 12 in-service sessions will be conducted for a total of 48 in-service sessions for the four (4) year period.

During this plan period, a survey will be conducted in February and July of each fiscal year with CMS program staff who are the audience of the in-service sessions to gauge whether the information being provided is being retained by them, whether they are retaining information regarding complex cases and basic Medicare benefits information.

Objective 2.4:

The Guam MAP will provide Part D awareness presentations to senior citizens attending the 12 Senior Citizens Centers and the three (3) Adult Day Care Centers during Part D's Annual Election Period for beneficiaries to make informed decision whether to enroll, maintain their current plan, switch plans or terminate their Part D prescription drug plan.

Measurement(s):

During this plan period, for each fiscal year a total of 15 awareness presentations will be conducted for a total of 60 presentations for the four (4) year period.

Objective 2.5:

The Guam SOA, through the Bureau of Community Support will provide Title III Awareness Orientations to the staff of the its contracted providers and vendors, and the members of the Guam Council on Senior Citizens to acquaint or reacquaint them with Title III and Title VII aging programs, information on adult protective services, Guam MAP and SMP.

Measurement(s):

During this plan period, for each fiscal year a total of 12 orientations will be conducted for a total of 48 orientations for the four (4) year period.

Objective 2.6:

The Guam SOA will collaborate with the Department of Administration (DOA) to conduct informational presentations on Guam SOA programs for Government of Guam employees to increase their awareness of aging services available on island.

Measurement(s):

Within FY 2016, Guam SOA will be placed on the DOA training calendar to provide informational presentations on a quarterly basis to Government of Guam employees with FY 2016 being the baseline as to the number of employees who attend the informational presentation.

During this plan period, for Fiscal Year 2016, two (2) informational presentations would be offered. For Fiscal Years 2017 through 2019, a total of four (4) informational presentations orientations will be conducted each fiscal year for a total of 14 information presentations for the four (4) year period.

After each information presentation, a survey will be conducted on the quality and content of the presentations, the articulation of the ideas being communicated to the audience and what areas can be expanded or improved upon.

Objective 2.7:

The Guam SOA, will continue its efforts to implement the NWD system by applying for the grant to fund Guam's 3-Year Plan to implement a NWD system for Guam.

Measurement(s):

During the first quarter of FY 2016, the Guam SOA will, with Federal funding, implement the NWD system.

During this plan period, if the Federal grant application is not funded, the Guam SOA will seek other funding opportunities to support the implementation of the NWD system or to identify which component can be implemented with existing local resources.

Goal 3: The Guam State Office on Aging (SOA) will collaborate with organizations, such as the Department of Integrated Services for Individuals with Disabilities (DISID) and the Guam Behavioral Health and Wellness Center (GBHWC), who provide services to seniors and adults with disability to ensure programs support consumer control and choice.

Objective 3.1:

The Guam SOA will invite external agencies that serve seniors and adults with disabilities to survey which program services are providing their clients with options for services and ensuring the client makes the decision and agrees to the services to be provided.

Measurement(s):

During FY 2016, Guam SOA staff will review literature and become familiar with Options Counseling and Person-Centered Planning.

Throughout FY 2019, initiate meetings with external agencies such as, the Department of Integrated Services for Individuals with a Disability (DISID) and the Guam Behavioral Health and Wellness Center (GBHWC) to discuss the inclusion of Options Counseling and Person-Centered Planning into their respective programs.

By the end of FY 2019, Options Counseling and Person-Centered Planning will be proposed for adoption by key external agencies who serve seniors and adults with disabilities to ensure that while options are presented to the client, the client retains control which empowers them to determine their service plan.

Objective 3.2:

The Guam SOA will administer a survey of the Case Management Services (CMS) program for seniors to gauge whether seniors were provided with information, education, and counseling on their options to live as independently as possible in the community.

Measurement(s):

By the third quarter of FY 2016, the HCBS Quality Framework will be used as a guide to develop a tool to survey CMS clients to capture whether they retained control and choice in the development of their service plan.

By the fourth quarter of FY 2016, CMS clients will be surveyed.

By the first quarter of FY 2017, the Guam SOA will complete its survey report to determine whether the CMS program is providing seniors with service options and affording the clients their right to self-determination.

Within the first quarter of FY 2017, a meeting of the contracted CMS program and the Guam SOA will be convened to discuss the findings of the survey which will include strengths, weaknesses, and next steps to ensure the approach of options counseling and person-centered planning is incorporated into the practice of the CMS program staff.

The Guam SOA will repeat the survey activity in FY 2018.

Objective 3: During the plan period, the Guam SOA will advocate for the enhancement of an Aging and Disability Resource Center (ADRC) to serve as the framework for information, referral and access to long-term services and supports, coupled with options counseling.

Measurement(s):

In FY 2016, the Guam SOA will convene a meeting with two key stakeholders, the Department of Integrated Services for Individuals with a Disability (DISID) and the Guam Behavioral Health and Wellness Center (GBHWC), to engage their support to adopt the ADRC concept in the coordination of services to the clients we serve.

In FY 2016 and throughout the plan period, the Guam SOA, along with our partners, DISID and GBHWC, will advocate and annually request for funding from the Guam Legislature to support the activities that promote the ADRC concept for all three partners.

Goal 4: The Guam State Office on Aging (SOA) will protect the rights of elderly and adults with disabilities from abuse, neglect, and exploitation.

Objective 4.1:

Strengthen and enhance collaboration of programs with key agencies that serve, protect and safeguard the rights and interest of seniors and adults with disabilities from abuse, neglect, and exploitation.

Measurement(s):

During FY 2016, the Bureau of Adult Protective Services (BAPS) along with the Ombudsman will meet with key partners to plan for the first annual workshop for the aging and disability network on the state of affairs of elder and adults with disability abuse on Guam.

For FY 2017 through 2019, continue to provide the annual workshops with key partners on the state of affairs of elder and adults with a disability abuse on Guam.

Throughout the plan period, BAPS will continue to be part of a network of key stakeholders such as the Healing Hearts Sexual Assault Response Team (SART) Steering Committee, the Guam Homeless Coalition, the Guam Developmental Disabilities Council, the Guam Coalition Against Sexual Assault and Family Violence, and the Guam Public Guardian Review Board who all have a vested interest in the protection and advocacy of the vulnerable populations each group represents.

Objective 4.2:

The Bureau of Adult Protective Services (BAPS), along with the Senior Medicare Patrol Project (SMP), will partner with financial institutions to conduct APS presentations to increase the awareness level of employees on how to detect and report suspect cases of financial exploitation of elderly and adults with disabilities.

Measurement(s):

In the first quarter of FY 2016, the BAPS will compile a list of financial institutions to conduct

APS presentations.

In the second quarter of FY 2016, BAPS will send letters to these financial institutions to request an audience with their staff to provide an APS presentation with emphasis on financial exploitation.

In the third and fourth quarters of FY 2016, an APS presentation will be conducted at 25% of the financial institutions listed for each quarter.

In the first and second quarters of FY 2017, an APS presentation will be conducted at 25% of the financial institutions listed for each quarter.

In Fiscal Years 2018 and 2019, the APS presentation with emphasis on financial exploitation will be conducted at the financial institutions listed in FY 2016.

Objective 4.3:

The BAPS and the LTCO will participate in outreach activities each fiscal year.

Measurement(s):

Throughout the plan period, the BAPS and the LTCO will to participate in four (4) outreach activities to include the Sexual Assault and Family Violence Awareness Month, Guam Developmental Disabilities Awareness Month, Guam Conference on Aging held in conjunction with Senior Citizens Month, and Crime Victim's Rights Week in an effort to bring visibility and awareness on elder rights in the prevention of abuse, neglect and exploitation.

Objective 4.4:

The BAPS will conduct information dissemination at the Senior Citizens Centers and coordinate presentations with high risk groups.

Measurement(s):

Throughout the plan period, the BAPS will conduct information dissemination to the 12 Senior Citizens Centers each fiscal year.

Through the plan period, the BAPS will coordinate five (5) APS presentations to, but not limited to, the Guam Homeless Coalition, Guam Developmental Disabilities Council, Guam Behavioral Health and Wellness Center, Karidad Homes, and Victims Advocate Reaching Out (VARO) Volunteer Program.

Throughout this plan period, the LTCO will conduct visits at the Guam Memorial Hospital Skilled Nursing Unit and St. Dominic's Senior Care Home to facilitate the resident council meetings held monthly at these facilities. In addition, should there be new clients or staff at the monthly resident council meetings, the LTCO will also then provide a presentation on the role and responsibility of the LTCO, and information about Adult Protective Services and Medicare.

Objective 4.5:

The LTCO under the BAPS will conduct annual presentations at Adult Day Care Centers and Guma Asusena Home.

Measurement(s):

Throughout the plan period, the LTCO will conduct one (1) presentation per year at the three (3) Adult Day Care Centers, Guma Asusena Home which is a residential recovery program for adults with psychiatric problems, and at Guam's newest hospital, Guam Regional Medical City (GRMC) expected to open its doors in June 2015.

Throughout the plan period, the LTCO will schedule four (4) visits at each of these facilities per year thereby providing residents greater access to the Ombudsman and increasing awareness and understanding of the LTCO program. Additional visits will be conducted to address complaints or concerns made to the LTCO concerning these facilities.

Objective 4.6:

Advocate for an attorney to serve as a Legal Assistance Developer who will develop activities to include coordinating the provision of legal assistance for seniors, providing technical assistance, training, and support to the SOA, LTCO, legal assistance provider and other persons to assist in improving and enhancing the quality and quantity of legal services provided to seniors.

Measurement(s):

Throughout the plan period, the Guam SOA will advocate for local (State) funds to hire an attorney from the Office of the Attorney General to serve as the Legal Assistance Developer.

V. EMERGENCY PREPAREDNESS

Planning for the involvement of Guam SOA agencies in disaster preparedness and response is essential to ensure assistance for older individuals is identified and provided. Such planning includes natural and man-made disasters as well as health emergencies such as pandemic or epidemic outbreaks. It is the intent of the Guam SOA to collaborate and update the emergency plans existing to be redesigned to take an all-hazards approach with a clear and unified approach that partners know of, are acquainted with and command, prior to the incident of national or local significance.

As one of five (5) divisions of the Department of Public Health and Social Services, Guam SOA is part of the overall response effort to local emergencies. Guam SOA participates in the review of the department's emergency plan and upon the mobilization of resources, the Guam SOA is prepared to provide assistance within their resource capacity. Direction comes from the agency head and is supported through a declaration by the head of state that Guam is under a state of emergency. In most instances, Guam SOA is tasked to take the necessary steps to restore aging services to the level prior to the disaster. However, depending on the situation, requests will be forwarded through the Response Activity Coordinator (RAC) serving at the Emergency Operations Command for resources to be provided to the aging community to assist them recover from a disaster if they are already not factored into the overall response effort for the general population. During recovery efforts wherein emergency support such as the State Nutritional

Assistance Program (SNAP) is being applied for, all sites prioritize older individuals and adults with a disability for processing by having them come to the front of the line for expeditious service.

In light with the need to prepare to respond to a potential health crisis, such as a pandemic, Guam SOA will implement its Continuity of Operations Plan (COOP) that provides clear direction as to the level of scaling back that is to occur during a crisis. This plan will be incorporated into the department's overall COOP. The Guam SOA will ensure all employees of the division complete Incident Command System (ICS) 100 and 700 with supervisors required to complete ICS 200, 300, 400, and 800.

The COOP lays out the division's mission essential functions, staffing requirements to continue operations at different levels of absenteeism, alternate facility location, and the essential equipment and supplies for continued operations. Further, the Disaster Checklist provided by the Administration for Community Living will be incorporated in the COOP to ensure timely reporting of disaster impact. As some of the items in the checklist require external input, the Guam SOA will coordinate and communicate with the department's assigned Public Health Emergency Preparedness Team and the Joint Information Center (JIC) to prepare and provide ACL required information impacting our elderly population. The Guam SOA uses a "call tree" to ensure staffs are accounted for during a crisis which is a process of the Senior Citizens Administrator (SCA) being notified to activate the "call tree". The SCA Administrator will contact the designated SOA staff who in turn will call each supervisor who in turn calls each staff under their supervision and upon making contact with each staff, calls back the designated SOA staff to confirm all are accounted for. This information is then transmitted to the Senior Citizens Administrator who in turn submits the information to the director of the department or his designee who activated the call tree. In the event Guam SOA staff are not able to physically report to the office, the "call tree" will be used to identify all who are able to assist and will coordinate services through conference calls or whatsapp (application that allows a group of individuals to communicate in larger mass than the traditional one to one contact), and to advise staff of other operational matters that are not service (client) based.

The mission essential functions for the Guam SOA are to 1) provide information and assistance to seniors and their caregivers of available services during and after an emergency; 2) investigate reports of alleged abuse and coordinate services with aging and disabilities service providers; 3) confer with aging program service providers and vendors to determine estimated time for service restoration and status of at-risk clients; and 4) provide fiscal and personnel services which include payroll, records management, procurement of needed supplies and equipment, and messenger assistance.

VI. MENTAL HEALTH

Guam's SOA will continue to collaborate with our local Guam Behavioral Health and Wellness Center (GBHWC), the lead government agency tasked with mental well-being to share program information and services to integrate with our home and community-based services and programs. GBHWC is the sole public agency authorized to provide inpatient, outpatient, and residential treatment services on Guam.

Under Guam Public Law 99-660 and Public Law 101-639, GBHWC is responsible for establishing comprehensive community-based services targeting major populations including, although not limited to, adults with serious and persistent mental illnesses, individuals who are mentally ill and homeless; and individuals with substance abuse problems. GBHWC provides the following adult services: inpatient medical and psychiatric care for individuals suffering from mental disorders requiring hospitalization; services for crisis intervention; therapeutic and supportive counseling services; services for alcohol and drug abuse; case management services; prevention and training services for targeted audiences and the community-at-large; and residential and day treatment programs for persons with mental illness including the Guma Ifil Program, a transitional home that prepares individuals with mental illness to transition to independent living in the community.

Through contractual provisions, Guam SOA will require providers of aging services to collaborate and develop a system that would promote greater awareness and education in the practice and benefits of integrating mental health and aging, to include self-care, as part of our continuum of care, thus, removing barriers to diagnosis and treatment and to help families become better mental health providers. Additionally, "*Project Kombida*", an integration program for older individuals with disabilities, to include developmental and physical disabilities, will continue to be provided through the Senior Center Operations Program.

VII. VOLUNTEERISM

Volunteerism is a civic function that continues to be a challenge for Guam's SOA to capitalize on. Efforts will continue to promote and offer training for volunteers with the State Office on Aging and encourage the providers of aging services to do the same. However, it is incumbent for all entities to manage and hold their volunteers responsible in the delivery of services and to ensure that their functions and responsibilities are within reasonable expectations. Volunteers should not be tasked with functions requiring actual certification unless licensed or authorized to do so. Flexibility is a feature in designing a volunteer program as well as to provide incentives for volunteers to be properly recognized.

Guam residents are provided an opportunity to volunteer and assist government agencies in fulfilling their mission. To protect the integrity of the Government of Guam system, volunteers are required to obtain police and court clearances and undergo skin and drug tests prior to accepting their services. As volunteers work without compensation for the benefit of the Government of Guam and its community, Guam Public Law 25-151 exempts volunteers from the fees for the clearances and skin test leaving the costs associated to meet this requirement the responsibility of the Government of Guam.

Volunteers are a valuable resource in the achievement of Guam SOA's Guam MAP and Guam SMP's goals. Thus annually, these programs recruit and train individuals to work alongside with paid program staff after all volunteer requirements have been met to provide one-on-one counseling and awareness presentations to the island's Medicare population, as well as to participate in a host of outreach activities throughout the community. Depending on their interest, a volunteer may assist the programs by distributing information, assisting with administration, staffing exhibits, making group presentations, and providing one-on-one

counseling. Annually, volunteers are recognized for their contributions to the programs during a recognition event, which for the past two (2) years have been included as one of the activities in the Guam Conference on Aging, giving volunteers the center stage amongst 400 conference attendees.

VIII. INTRASTATE FUNDING FORMULA

The Intrastate Funding Formula is not applicable to the Guam SOA State Plan.

IX. ATTACHMENTS

ATTACHMENT A - ASSURANCES

State Plan Assurances and Required Activities, Older Americans Act, As Amended in 2006

Sec. 305 (a) - (c), ORGANIZATION

(a)(2)(A) The State agency shall, except as provided in subsection (b)(5), designate for each such area (planning and service area) after consideration of the views offered by the unit or units of general purpose local government in such area, a public or private nonprofit agency or organization as the area agency on aging for such area.

Guam is a single Planning and Service Area.

(a)(2)(B) The State agency shall provide assurances, satisfactory to the Assistant Secretary, that the State agency will take into account, in connection with matters of general policy arising in the development and administration of the State plan for any fiscal year, the views of recipients of supportive services or nutrition services, or individuals using multipurpose senior centers provided under such plan.

(a)(2)(E) The State agency shall provide assurance that preference will be given to providing services to older individuals with greatest economic need and older individuals with greatest social need, (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) and include proposed methods of carrying out the preference in the State plan;

(a)(2)(F) The State agency shall provide assurances that the State agency will require use of outreach efforts described in section 307(a) (16).

(a)(2)(G)(ii) The State agency shall provide an assurance that the State agency will undertake specific program development, advocacy, and outreach efforts focused on the needs of low-income minority older individuals and older individuals residing in rural areas.

(c)(5) In the case of a State specified in subsection (b) (5), the State agency and area agencies shall provide assurance, determined adequate by the State agency, that the area agency on aging will have the ability to develop an area plan and to carry out, directly or through contractual or other arrangements, a program in accordance with the plan within the planning and service area.

States must assure that the following assurances (Section 306) will be met by its designated area agencies on agencies, or by the State in the case of single planning and service area states.

Sec. 306(a), AREA PLANS

(2) Each area agency on aging shall provide assurances that an adequate proportion, as required under section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services-

(A) services associated with access to services (transportation, health services (including mental health services), outreach, information and assistance (which may include information and assistance to consumers on availability of services under part B and how to receive benefits under and participate in publicly supported programs for which the consumer may be eligible), and case management services);

(B) in-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and

(C) legal assistance;

and assurances that the area agency on aging will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded.

(4)(A)(i)(I) provide assurances that the area agency on aging will—

(aa) set specific objectives, consistent with State policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement;

(bb) include specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas; and

(II) include proposed methods to achieve the objectives described in items (aa) and (bb) of sub clause (I);

(ii) provide assurances that the area agency on aging will include in each agreement made with a provider of any service under this title, a requirement that such provider will—

(I) specify how the provider intends to satisfy the service needs of low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in the area served by the provider;

(II) to the maximum extent feasible, provide services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in accordance with their need for such services; and

(III) meet specific objectives established by the area agency on aging, for providing services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas within the planning and service area; and

(4)(A)(iii) With respect to the fiscal year preceding the fiscal year for which such plan is prepared, each area agency on aging shall--

(I) identify the number of low-income minority older individuals and older individuals residing in rural areas in the planning and service area;

(II) describe the methods used to satisfy the service needs of such minority older individuals; and

(III) provide information on the extent to which the area agency on aging met the objectives described in clause (a)(4)(A)(i).

(4)(B)(i) Each area agency on aging shall provide assurances that the area agency on aging will use outreach efforts that will identify individuals eligible for assistance under this Act, with special emphasis on--

(I) older individuals residing in rural areas;

(II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(IV) older individuals with severe disabilities;
(V) older individuals with limited English proficiency;
(VI) older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and
(VII) older individuals at risk for institutional placement; and
(4)(C) Each area agency on aging shall provide assurance that the area agency on aging will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas.

(5) Each area agency on aging shall provide assurances that the area agency on aging will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and individuals at risk for institutional placement, with agencies that develop or provide services for individuals with disabilities.

(6)(F) Each area agency will:
in coordination with the State agency and with the State agency responsible for mental health services, increase public awareness of mental health disorders, remove barriers to diagnosis and treatment, and coordinate mental health services (including mental health screenings) provided with funds expended by the area agency on aging with mental health services provided by community health centers and by other public agencies and nonprofit private organizations;

(9) Each area agency on aging shall provide assurances that the area agency on aging, in carrying out the State Long-Term Care Ombudsman program under section 307(a)(9), will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2000 in carrying out such a program under this title.

(11) Each area agency on aging shall provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including

(A) information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, an assurance that the area agency on aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;

(B) an assurance that the area agency on aging will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and

(C) an assurance that the area agency on aging will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.

(13)(A) Each area agency on aging shall provide assurances that the area agency on aging will maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships.

(13)(B) Each area agency on aging shall provide assurances that the area agency on aging will disclose to the Assistant Secretary and the State agency--

(i) the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and

(ii) the nature of such contract or such relationship.

(13)(C) Each area agency on aging shall provide assurances that the area agency will demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such non-governmental contracts or such commercial relationships.

(13)(D) Each area agency on aging shall provide assurances that the area agency will demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such non-governmental contracts or commercial relationships.

(13)(E) Each area agency on aging shall provide assurances that the area agency will, on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals.

(14) Each area agency on aging shall provide assurances that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the area agency on aging to carry out a contract or commercial relationship that is not carried out to implement this title.

(15) provide assurances that funds received under this title will be used

(A) to provide benefits and services to older individuals, giving priority to older individuals identified in paragraph (4)(A)(i); and

(B) in compliance with the assurances specified in paragraph (13) and the limitations specified in section 212;

(17) Each Area Plan will include information detailing how the Area Agency will coordinate activities and develop long-range emergency preparedness plans with local and State emergency response agencies, relief organizations, local and State governments and other institutions that have responsibility for disaster relief service delivery.

Sec. 307, STATE PLANS

(7)(A) The plan shall provide satisfactory assurance that such fiscal control and fund accounting procedures will be adopted as may be necessary to assure proper disbursement of, and accounting for, Federal funds paid under this title to the State, including any such funds paid to the recipients of a grant or contract.

(7)(B) The plan shall provide assurances that--

(i) no individual (appointed or otherwise) involved in the designation of the State agency or an area agency on aging, or in the designation of the head of any subdivision of the State agency or of an area agency on aging, is subject to a conflict of interest prohibited under this Act;

(ii) no officer, employee, or other representative of the State agency or an area agency on aging is subject to a conflict of interest prohibited under this Act; and

(iii) mechanisms are in place to identify and remove conflicts of interest prohibited under this Act.

(9) The plan shall provide assurances that the State agency will carry out, through the Office of the State Long-Term Care Ombudsman, a State Long-Term Care Ombudsman program in accordance with section 712 and this title, and will expend for such purpose an amount that is not less than an

amount expended by the State agency with funds received under this title for fiscal year 2000, and an amount that is not less than the amount expended by the State agency with funds received under title VII for fiscal year 2000.

(10) The plan shall provide assurance that the special needs of older individuals residing in rural areas will be taken into consideration and shall describe how those needs have been met and describe how funds have been allocated to meet those needs.

(11)(A) The plan shall provide assurances that area agencies on aging will--

(i) enter into contracts with providers of legal assistance which can demonstrate the experience or capacity to deliver legal assistance;

(ii) include in any such contract provisions to assure that any recipient of funds under division (A) will be subject to specific restrictions and regulations promulgated under the Legal Services Corporation Act (other than restrictions and regulations governing eligibility for legal assistance under such Act and governing membership of local governing boards) as determined appropriate by the Assistant Secretary; and

(iii) attempt to involve the private bar in legal assistance activities authorized under this title, including groups within the private bar furnishing services to older individuals on a pro bono and reduced fee basis.

(11)(B) The plan contains assurances that no legal assistance will be furnished unless the grantee administers a program designed to provide legal assistance to older individuals with social or economic need and has agreed, if the grantee is not a Legal Services Corporation project grantee, to coordinate its services with existing Legal Services Corporation projects in the planning and service area in order to concentrate the use of funds provided under this title on individuals with the greatest such need; and the area agency on aging makes a finding, after assessment, pursuant to standards for service promulgated by the Assistant Secretary, that any grantee selected is the entity best able to provide the particular services.

(11)(D) The plan contains assurances, to the extent practicable, that legal assistance furnished under the plan will be in addition to any legal assistance for older individuals being furnished with funds from sources other than this Act and that reasonable efforts will be made to maintain existing levels of legal assistance for older individuals;

(11)(E) The plan contains assurances that area agencies on aging will give priority to legal assistance related to income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect, and age discrimination.

(12) The plan shall provide, whenever the State desires to provide for a fiscal year for services for the prevention of abuse of older individuals, the plan contains assurances that any area agency on aging carrying out such services will conduct a program consistent with relevant State law and coordinated with existing State adult protective service activities for--

(A) public education to identify and prevent abuse of older individuals;

(B) receipt of reports of abuse of older individuals;

(C) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance where appropriate and consented to by the parties to be referred; and

(D) referral of complaints to law enforcement or public protective service agencies where appropriate.

(13) The plan shall provide assurances that each State will assign personnel (one of whom shall be known as a legal assistance developer) to provide State leadership in developing legal assistance programs for older individuals throughout the State.

(15) The plan shall provide assurances that, if a substantial number of the older individuals residing in any planning and service area in the State are of limited English-speaking ability, then the State will require the area agency on aging for each such planning and service area—

(A) to utilize in the delivery of outreach services under section 306(a)(2)(A), the services of workers who are fluent in the language spoken by a predominant number of such older individuals who are of limited English-speaking ability; and

(B) to designate an individual employed by the area agency on aging, or available to such area agency on aging on a full-time basis, whose responsibilities will include--

(i) taking such action as may be appropriate to assure that counseling assistance is made available to such older individuals who are of limited English-speaking ability in order to assist such older individuals in participating in programs and receiving assistance under this Act; and

(ii) providing guidance to individuals engaged in the delivery of supportive services under the area plan involved to enable such individuals to be aware of cultural sensitivities and to take into account effectively linguistic and cultural differences.

(16) The plan shall provide assurances that the State agency will require outreach efforts that will—

(A) identify individuals eligible for assistance under this Act, with special emphasis on—

(i) older individuals residing in rural areas;

(ii) older individuals with greatest economic need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas;

(iii) older individuals with greatest social need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas;

(iv) older individuals with severe disabilities;

(v) older individuals with limited English-speaking ability; and

(vi) older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and

(B) inform the older individuals referred to in clauses (i) through (vi) of subparagraph (A), and the caretakers of such individuals, of the availability of such assistance.

(17) The plan shall provide, with respect to the needs of older individuals with severe disabilities, assurances that the State will coordinate planning, identification, assessment of needs, and service for older individuals with disabilities with particular attention to individuals with severe disabilities with the State agencies with primary responsibility for individuals with disabilities, including severe disabilities, to enhance services and develop collaborative programs, where appropriate, to meet the needs of older individuals with disabilities.

(18) The plan shall provide assurances that area agencies on aging will conduct efforts to facilitate the coordination of community-based, long-term care services, pursuant to section 306(a)(7), for older individuals who--

(A) reside at home and are at risk of institutionalization because of limitations on their ability to function independently;

(B) are patients in hospitals and are at risk of prolonged institutionalization; or

(C) are patients in long-term care facilities, but who can return to their homes if community-based services are provided to them.

(19) The plan shall include the assurances and description required by section 705(a).

(20) The plan shall provide assurances that special efforts will be made to provide technical assistance to minority providers of services.

(21) The plan shall

(A) provide an assurance that the State agency will coordinate programs under this title and programs under title VI, if applicable; and

(B) provide an assurance that the State agency will pursue activities to increase access by older individuals who are Native Americans to all aging programs and benefits provided by the agency, including programs and benefits provided under this title, if applicable, and specify the ways in which the State agency intends to implement the activities.

(22) If case management services are offered to provide access to supportive services, the plan shall provide that the State agency shall ensure compliance with the requirements specified in section 306(a)(8).

(23) The plan shall provide assurances that demonstrable efforts will be made--

(A) to coordinate services provided under this Act with other State services that benefit older individuals; and

(B) to provide multigenerational activities, such as opportunities for older individuals to serve as mentors or advisers in child care, youth day care, educational assistance, at-risk youth intervention, juvenile delinquency treatment, and family support programs.

(24) The plan shall provide assurances that the State will coordinate public services within the State to assist older individuals to obtain transportation services associated with access to services provided under this title, to services under title VI, to comprehensive counseling services, and to legal assistance.

(25) The plan shall include assurances that the State has in effect a mechanism to provide for quality in the provision of in-home services under this title.

(26) The plan shall provide assurances that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the State agency or an area agency on aging to carry out a contract or commercial relationship that is not carried out to implement this title.

(27) The plan shall provide assurances that area agencies on aging will provide, to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care.

Sec. 308, PLANNING, COORDINATION, EVALUATION, AND ADMINISTRATION OF STATE PLANS

(b)(3)(E) No application by a State under subparagraph (b)(3)(A) shall be approved unless it contains assurances that no amounts received by the State under this paragraph will be used to hire any individual to fill a job opening created by the action of the State in laying off or terminating the employment of any regular employee not supported under this Act in anticipation of filling the

vacancy so created by hiring an employee to be supported through use of amounts received under this paragraph.

Sec. 705, ADDITIONAL STATE PLAN REQUIREMENTS (as numbered in statute)

(1) The State plan shall provide an assurance that the State, in carrying out any chapter of this subtitle for which the State receives funding under this subtitle, will establish programs in accordance with the requirements of the chapter and this chapter.

(2) The State plan shall provide an assurance that the State will hold public hearings, and use other means, to obtain the views of older individuals, area agencies on aging, recipients of grants under title VI, and other interested persons and entities regarding programs carried out under this subtitle.

(3) The State plan shall provide an assurance that the State, in consultation with area agencies on aging, will identify and prioritize statewide activities aimed at ensuring that older individuals have access to, and assistance in securing and maintaining, benefits and rights.

(4) The State plan shall provide an assurance that the State will use funds made available under this subtitle for a chapter in addition to, and will not supplant, any funds that are expended under any Federal or State law in existence on the day before the date of the enactment of this subtitle, to carry out each of the vulnerable elder rights protection activities described in the chapter.

(5) The State plan shall provide an assurance that the State will place no restrictions, other than the requirements referred to in clauses (i) through (iv) of section 712(a)(5)(C), on the eligibility of entities for designation as local Ombudsman entities under section 712(a)(5).

(6) The State plan shall provide an assurance that, with respect to programs for the prevention of elder abuse, neglect, and exploitation under chapter 3—

(A) in carrying out such programs the State agency will conduct a program of services consistent with relevant State law and coordinated with existing State adult protective service activities for--

(i) public education to identify and prevent elder abuse;

(ii) receipt of reports of elder abuse;

(iii) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance if appropriate and if the individuals to be referred consent; and

(iv) referral of complaints to law enforcement or public protective service agencies if appropriate;

(B) the State will not permit involuntary or coerced participation in the program of services described in subparagraph (A) by alleged victims, abusers, or their households; and

(C) all information gathered in the course of receiving reports and making referrals shall remain confidential except--

(i) if all parties to such complaint consent in writing to the release of such information;

(ii) if the release of such information is to a law enforcement agency, public protective service agency, licensing or certification agency, ombudsman program, or protection or advocacy system; or

(iii) upon court order

REQUIRED ACTIVITIES
Sec. 307(a) STATE PLANS

- (1)(A) The State Agency requires each area agency on aging designated under section 305(a)(2)(A) to develop and submit to the State agency for approval, in accordance with a uniform format developed by the State agency, an area plan meeting the requirements of section 306; and
(B) The State plan is based on such area plans.

Note: THIS SUBSECTION OF STATUTE DOES NOT REQUIRE THAT AREA PLANS BE DEVELOPED PRIOR TO STATE PLANS AND/OR THAT STATE PLANS DEVELOP AS A COMPILATION OF AREA PLANS.

- (2) The State agency:

(A) evaluates, using uniform procedures described in section 202(a)(26), the need for supportive services (including legal assistance pursuant to 307(a)(11), information and assistance, and transportation services), nutrition services, and multipurpose senior centers within the State;

(B) has developed a standardized process to determine the extent to which public or private programs and resources (including Department of Labor Senior Community Service Employment Program participants, and programs and services of voluntary organizations) have the capacity and actually meet such need;

(4) The plan shall provide that the State agency will conduct periodic evaluations of, and public hearings on, activities and projects carried out in the State under this title and title VII, including evaluations of the effectiveness of services provided to individuals with greatest economic need, greatest social need, or disabilities (with particular attention to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas). Note: "Periodic" (defined in 45CFR Part 1321.3) means, at a minimum, once each fiscal year.

- (5) The State agency:

(A) affords an opportunity for a public hearing upon request, in accordance with published procedures, to any area agency on aging submitting a plan under this title, to any provider of (or applicant to provide) services;

(B) issues guidelines applicable to grievance procedures required by section 306(a)(10); and

(C) affords an opportunity for a public hearing, upon request, by an area agency on aging, by a provider of (or applicant to provide) services, or by any recipient of services under this title regarding any waiver request, including those under Section 316.

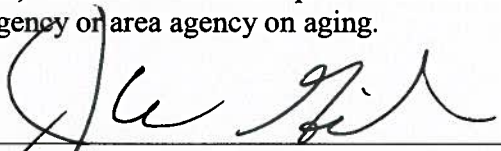
(6) The State agency will make such reports, in such form, and containing such information, as the Assistant Secretary may require, and comply with such requirements as the Assistant Secretary may impose to insure the correctness of such reports.

(8)(A) No supportive services, nutrition services, or in-home services are directly provided by the State agency or an area agency on aging in the State, unless, in the judgment of the State agency--

(i) provision of such services by the State agency or the area agency on aging is necessary to assure an adequate supply of such services;

(ii) such services are directly related to such State agency's or area agency on aging's administrative functions; or

(iii) such services can be provided more economically, and with comparable quality, by such State agency or area agency on aging.



James W. Gillan, Director
Department of Public Health and Social Services
(Signature and Title of Authorized)

6.19.2015

Official Date

ATTACHMENT B - INFORMATION REQUIREMENTS

States must provide all applicable information following each OAA citation listed below. The completed attachment must be included with your State Plan submission.

Section 305(a)(2)(E)

Describe the mechanism(s) for assuring that preference will be given to providing services to older individuals with greatest economic need and older individuals with greatest social need, (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) and include proposed methods of carrying out the preference in the State plan;

Guam is identified as a rural area. Many of its population, to include older individuals come from Asian or other foreign countries and English is their second language, even for those older individuals whose origin is Guam. When giving priority, Guam, will give service preference to older individuals with greatest social and economic need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency) using a scale based on a point system in three (3) focal areas, the older individual's: (1) mobility, (2) degree of existing support system, and (3) housing condition. Greatest priority will be given to older individuals in descending order, with nine (9) being the highest possible points garnered translating to the older individual in greatest socio-economic need.

Based on the need to activate this provision, the number of persons to be served will be determined by the existing conditions at the time of implementation. In the event that the number of available slots is not sufficient to provide services to the number of persons determined to be at-risk and in need of services, the number of Activities of Daily Living (ADL) impairments will be applied to this distinct group as an additional determining factor for services.

Another determining factor in this point system may include whether the older individual is responsible for the care of a dependent. Clients will be given an additional one (1) point if they are also caregivers.

More detailed information is provided on Section VI.D. of this Plan.

Section 306(a)(17)

Describe the mechanism(s) for assuring that each Area Plan will include information detailing how the Area Agency will coordinate activities and develop long-range emergency preparedness plans with local and State emergency response agencies, relief organizations, local and State governments and other institutions that have responsibility for disaster relief service delivery.

Guam is a single planning and service area.

Section 307(a)(2)

The plan shall provide that the State agency will:

(C) Specify a minimum proportion of the funds received by each area agency on aging in the State to carry out part B that will be expended (in the absence of a waiver under sections 306

(c) or 316) by such area agency on aging to provide each of the categories of services specified in section 306(a)(2) (*Note: those categories are access, in-home, and legal assistance*). Provide specific minimum proportion determined for each category of service.

Guam is a single planning and service area.

Section 307(a)(3)

The plan shall:

(B) with respect to services for older individuals residing in rural areas:

(i) provide assurances the State agency will spend for each fiscal year of the plan, not less than the amount expended for such services for fiscal year 2000.

(ii) identify, for each fiscal year to which the plan applies, the projected costs of providing such services (including the cost of providing access to such services).

(iii) describe the methods used to meet the needs for such services in the fiscal year preceding the first year to which such plan applies.

Guam is identified as a rural area and as such assures that the State Agency will spend for each fiscal year of the Plan, no less than the amount expended for such services for FY 2000.

Projected cost for providing aging program services over the next 4 years using Federal and local funds is as follows:

2016 \$12,406,309.

2017 \$12,406,309.

2018 \$12,406,309.

2019 \$12,406,309.

In FY 2015, Title III program services were contracted to service providers and vendors to administer. As Guam is a rural area, this Plan assures that all older individuals served fall under this category.

Section 307(a)(10)

The plan shall provide assurance that the special needs of older individuals residing in rural areas are taken into consideration and shall describe how those needs have been met and describe how funds have been allocated to meet those needs.

Guam as a rural area takes the special needs of older individuals residing on Guam into consideration and is reflected in the specifications of the various program services contracted out to various providers and vendors. For example, clients who access Adult Day Care and In-Home Services have two or more impairments and services are provided by staff who work with the various special needs of these clients. Funds for both programs in the example are provided through local and Federal dollars and are allocated based on each program's historical financial data with the Guam SOA.

Section 307(a)(14)

(14) The plan shall, with respect to the fiscal year preceding the fiscal year for which such plan is prepared—

(A) identify the number of low-income minority older individuals in the State, including the number of low income minority older individuals with limited English proficiency; and

(B) describe the methods used to satisfy the service needs of the low-income minority older individuals described in subparagraph (A), including the plan to meet the needs of low-income minority older individuals with limited English proficiency.

Based on the 2010 Census of information from the population of 65 years and over with income in 2009 below poverty level, there are 10,745 seniors age 65 and older. Of this number, there are 1,445 or approximately 13% who are below the poverty level.

Based on the Aging Disability Resource Center, Guam GetCare database for service year FY 2014, under the Case Management Services Program, there were 2,133 clients registered for this program. Of the 2,133 clients, 1,138 or 53% were at or below the Federal Poverty Level (FPL), with 826 or 39% who are above the FPL, with 56 or 3% who declined to state their income, and 113 or 5% who are categorized as "unknown". As for limited English proficiency, of the 2,133 registered CMS clients, 429 or 20% have limited English proficiency, with 1,590 or 75% fluent, and 114 or 5% leaving this item blank.

Through the Case Management Services Program, clients identified as low-income minority older individuals including those with limited English proficiency are assisted in accessing Title III and other social services programs, such as SNAP and public housing. As Guam is a melting pot of cultures, we are able to engage individuals who speak other languages to help in translating the needs of this population and in providing program information of services available in the community.

Section 307(a)(21)

The plan shall:

(B) provide an assurance that the State agency will pursue activities to increase access by older individuals who are Native Americans to all aging programs and benefits provided by the agency, including programs and benefits provided under this title (title III), if applicable, and specify the ways in which the State agency intends to implement the activities.

Guam SOA will ensure access to and provide services to Native Americans as they are identified through the contracted programs.

Section 307(a)(29)

The plan shall include information detailing how the State will coordinate activities, and develop long-range emergency preparedness plans, with area agencies on aging, local emergency response agencies, relief organizations, local governments, State agencies responsible for emergency preparedness, and any other institutions that have responsibility for disaster relief service delivery.

As one of five (5) divisions of the Department of Public Health and Social Services, Guam SOA is part of the overall response effort to local emergencies. Guam SOA participates in the review of the department's emergency plan and upon the mobilization of resources, the Guam SOA is prepared to provide assistance within their resource capacity. Direction comes from the agency head and is supported through a declaration by the head of state that Guam is under a state of emergency. In most instances, Guam SOA is tasked to take the necessary steps to restore aging services to the level prior to the disaster. However, depending on the situation, requests will be forwarded through the Response Activity Coordinator (RAC) serving at the Emergency Operations Command (EOC) for resources to be provided to the aging community to assist them

recover from a disaster if they are already not factored into the overall response effort for the general population. During recovery efforts wherein emergency support such as the State Nutritional Assistance Program (SNAP) is being applied for, all sites prioritize older individuals and adults with a disability for processing by having them come to the front of the line for expeditious service.

Guam SOA will also keep ACL apprise of the emergencies, both natural and manmade that affect the lives of those we serve.

Section 307(a)(30)

The plan shall include information describing the involvement of the head of the State agency in the development, revision, and implementation of emergency preparedness plans, including the State Public Health Emergency Preparedness and Response Plan.

The Senior Citizens Administrator (SCA) also known as the head of the State Agency is directly involved in the development, revision, and implementation of emergency preparedness plans. The SCA participates in updating and executing the Plan. Further, the SCA provides input into the State Public Health Emergency Preparedness and Response Plan and is part of the Public Health Incident Command Center team.

Section 705(a)(7)

In order to be eligible to receive an allotment under this subtitle, a State shall include in the State plan submitted under section 307:

(7) a description of the manner in which the State agency will carry out this title in accordance with the assurances described in paragraphs (1) through (6).

(Note: Paragraphs (1) of through (6) of this section are listed below)

In order to be eligible to receive an allotment under this subtitle, a State shall include in the State plan submitted under section 307:

(1) an assurance that the State, in carrying out any chapter of this subtitle for which the State receives funding under this subtitle, will establish programs in accordance with the requirements of the chapter and this chapter;

(2) an assurance that the State will hold public hearings, and use other means, to obtain the views of older individuals, area agencies on aging, recipients of grants under title VI, and other interested persons and entities regarding programs carried out under this subtitle;

(3) an assurance that the State, in consultation with area agencies on aging, will identify and prioritize statewide activities aimed at ensuring that older individuals have access to, and assistance in securing and maintaining, benefits and rights;

(4) an assurance that the State will use funds made available under this subtitle for a chapter in addition to, and will not supplant, any funds that are expended under any Federal or State law in existence on the day before the date of the enactment of this subtitle, to carry out each of the vulnerable elder rights protection activities described in the chapter;

(5) an assurance that the State will place no restrictions, other than the requirements referred to in clauses (i) through (iv) of section 712(a)(5)(C), on the eligibility of entities for designation as local Ombudsman entities under section 712(a)(5);

(6) an assurance that, with respect to programs for the prevention of elder abuse, neglect, and exploitation under chapter 3--

(A) in carrying out such programs the State agency will conduct a program of services consistent with relevant State law and coordinated with existing State adult protective service activities for:

- (i) public education to identify and prevent elder abuse;*
- (ii) receipt of reports of elder abuse;*
- (iii) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance if appropriate and if the individuals to be referred consent; and*
- (iv) referral of complaints to law enforcement or public protective service agencies if appropriate;*
- (B) the State will not permit involuntary or coerced participation in the program of services described in subparagraph (A) by alleged victims, abusers, or their households; and*
- (C) all information gathered in the course of receiving reports and making referrals shall remain confidential except--*
 - (i) if all parties to such complaint consent in writing to the release of such information;*
 - (ii) if the release of such information is to a law enforcement agency, public protective service agency, licensing or certification agency, ombudsman program, or protection or advocacy system; or*
 - (iii) upon court order*

In accordance with Guam Public Law 31-278, the Guam SOA through the Bureau of Adult Protective Services receives and investigates all referrals of alleged abuse and neglect against an elderly or adult with a disability, provides protective care and services when necessary, and provides education and outreach to professionals and to the community to identify, report and prevent abuse, neglect and exploitation of the elderly and adults with a disability. Protective care and services to an elderly or adult with a disability is carried out with respect to their dignity and individual rights. Referrals to services agencies, public or private, is done with the individuals consent. All records maintained by the BAPS regarding reports of abuse, including but not limited to, information contained in the central registry, is confidential and will not be released without the written consent of the elderly or adult with a disability.

ATTACHMENT C - AGING PROGRAM SERVICES

Through funding from the ACL, Administration on Aging, as authorized through the Older Americans Act of 1965, as amended, the Guam SOA provides the following services, either directly or through contract:

A) Title III-B Supportive Services

Services include three Adult Day Care Centers, Case Management Services, In-Home Services, Legal Assistance Services, 12 Senior Citizens Centers, and Fixed and Non-Fixed Transportation Services. These services comprise a component of the formal support system for older individuals to assist them in maintaining their independence, dignity and quality of life. Additionally, these services protect their fundamental rights and distinct privileges as older individuals residing on Guam.

1) Adult Day Care (ADC)

The three ADC Centers provides a respite type program for older adults who are unable to function at home without supportive services and who do not need 24 hour care. Activities are individualized and consider the education, social, therapeutic, spiritual, and recreational needs of the older individual. Of the three (3) facilities authorized as ADC Centers, one (1) located in Dededo specifically serves clients with confirmed cases of dementia (ADC: Dementia Center), the other located in Barrigada serves all other eligible clients (ADC), and the third center located in Inarajan serves both clients with and without dementia, providing care to a combined approximate total of 94 clients at any given time of the day.

2) Case Management Services (CMS)

The CMS program provides services to elderly individuals in a systematic process of assessment and reassessment, planning, service and care coordination, referral, and monitoring whereby multiple service needs of clients are met with available resources, and unmet needs identified. The CMS program serves as the point of entry for the Adult Day Care, In-Home Services and Elderly Nutrition (Home-Delivered Meals) programs. Other services provided include, but is not limited to providing information and referral, assistance in applying for public assistance (housing, welfare, Medicaid, MIP, legal services, etc.), assisted transportation, money management, and picking up medications. The provision of CMS services is performed through traditional casework practices with the client and caseworker developing a person-centered Individualized Care Plan (ICP) that reflects the needs and desires of the client. The client is provided options for long-term services and supports (LTSS) and it is the client who decides which if any of the LTSS is going to be accessed or a referral is made for services. Further, the staff of this program collaborate with local health facilities (i.e. hospital) to transition clients back to their homes or in some cases from their participation at one of the 12 Senior Citizens Centers to one of the three Adult Day Care Centers. The Guam SOA is working on contracting the development of the web-based information and management system that establishes communication among participating agencies in order to increase access of seniors age 50 and older and adults 18 and older with disabilities to information and linkages to long-term services and supports.

3) In-Home Services (IHS)

The IHS program provides assistance to frail individuals who are without a caretaker and are at risk of institutionalization due to limitations on their ability to function independently, as well as to frail individuals who have a caretaker, but who may need additional assistance with personal care and chore services at home. This program is an essential part of the overall support that caregivers may need to keep their senior family member at home and to prevent premature institutionalization, abuse and off-island placements.

4) Legal Assistance Services (LAS)

Legal Assistance Services provides legal advice and representation by an attorney to older individuals with economic or social needs and includes to the extent feasible, counseling or other appropriate assistance by a paralegal or law student under the direct supervision of an attorney; and counseling or representation by a non-lawyer where permitted by law to approximately 300 eligible older individuals.

5) Senior Center Operations (SCO)

The SCO program provides services designed to enable older individuals attain and maintain physical and mental well-being by addressing their physical, social, psychological, economic, educational, and recreational and health needs. SCO services are available to individuals age 60 years or older and their spouse below age 60, provided the spouse is accompanying the participating senior. The Centers offers participants a broad spectrum of services and activities, which at a minimum, include information and assistance, disease prevention and health promotion activities, health and wellness programs, recreational opportunities, arts programs, volunteer opportunities, educational opportunities, multi-generational activities, social and community interaction opportunities, activities to support annual Senior Citizens' Month Celebrations, and other special activities and services. The 12 Senior Centers are located in the villages of Agana Heights, Agat, Astumbo, Dededo, Inarajan, Mangilao, Merizo, Santa Rita, Sinajana, Tamuning, Yigo, and Yona/Talofofo.

6) Transportation Services Program (TSP)

The TSP provides transportation services to older persons who are unable to operate a vehicle or have no mode of transportation to enable them to gain mobility and independence in accessing essential services. Persons who are frail, homebound by reason of illness or incapacitating disability, or otherwise isolated, are given priority in the delivery of transportation services. Services may also be available to a non-senior spouse or escort accompanying the older participating individual. Vehicles used to transport older individuals who have a disability are in compliance with the requirements of the Americans with Disabilities Act. The TSP consists of two (2) service components:

Transportation (General). This is a door-to-door service that provides transportation for the senior from their home to one of the 12 Senior Citizens' Centers and three (3) Adult Day Care Centers, with a return trip home upon conclusion of the day's activities. This service applies to all adults, age 60 years and older and their accompanying spouse. Many of these persons would be homebound with no means of transportation without this service.

Assisted Transportation. The Assisted Transportation service provides assistance, including escort, to a senior who has difficulties (physical or cognitive) using regular vehicle transportation. This service provides transportation from their homes to specifically requested medical services such as: doctor's appointments, lab tests, therapy, pick up of prescriptions, dental appointments, and access to medical-related services (i.e., Medicare, Medicaid).

B) Title III-C Nutrition Services

This program ensures the provision of a hot, nutritious meal that meets a minimum of 33 and 1/3 percent of the current daily Recommended Dietary Allowance (RDA), as established by the Food and Nutrition Board of the National Academy of Sciences, National Research Council. The meal service provided is lunch and the Guam SOA has designed the nutrition services contract to provide additional meal service, such as breakfast or dinner, should additional local funds be appropriated.

1) Elderly Nutrition Program (ENP) – Congregate Meals (C1). ENP C1 services are provided to individuals age 60 years or older and their spouse, regardless of age, if accompanying the senior, in a congregate setting Monday through Friday, except on Federal and local holidays. The Government reserves the option of providing meals to volunteers working at the Centers and to individuals who have a disability whom otherwise meet Federal and local criteria. There are 15 congregate sites which include the 12 Senior Citizens Centers and the three Adult Day Care Centers.

2) Elderly Nutrition Program (ENP) – Home-Delivered Meals (C2). The ENP C2 provides nutrition services to individuals age sixty (60) years or older who are home-bound and have difficulty performing at least two Activities of Daily Living and their spouse who serves as a primary caregiver regardless of age, in a home setting Monday through Sunday, except on the 10 recognized holidays as determined by the contracted vendor. If a senior accesses this service to its maximum service level, the senior could avail themselves of 355 meals in a fiscal year.

C) Title III-D Preventive Health

The Guam SOA provides Preventive Health services and information at the Senior Citizens Centers and Adult Day Care Centers. The objectives are to provide older individuals with opportunities for increased life expectancy and improved health and quality of life, and to enhance access to public and private programs that promote physical and mental well-being (Senior Outreach); to establish collaborative partnerships with public and private programs, agencies and organizations in the area of preventive health (Collaboration and Partnership); and to provide technical assistance in the establishment of government policies and programs that promote healthy aging and disease prevention, and that ensure access to quality health and long-term care (Systems and Policy). The Guam SOA shall, to the fullest extent possible, assure collaboration with and utilization of preventive health services provided by other departmental programs, public agencies, and community organizations.

Further, in FY 2015 the Guam SOA will be submitting to the DPHSS Director for his submission to the Association of State and Territorial Health Officials (ASTHO) the evidence-based work that has been and continues to be contractually performed by the University of Guam -

Cooperative Extension Program at the Senior Citizens and Adult Day Care Centers. The evidence-based project is from the National Council on Aging's *"Healthy Eating for Successful Living in Older Adults"*.

D) Title III-E National Family Caregiver Support Program (NFCSP)

Provides support services to families and older individuals that are relative caregivers caring for their frail elderly family members and to grandparents or older individuals who are relative caregivers of children who are 18 and under or adults with disability. The NFCSP provides the five basic services required by the Older Americans Act, as amended in 2006, as follows: information to caregivers about available services; assistance to caregivers in gaining access to supportive services; individual counseling, organization of support groups, and caregiver training to caregivers to assist the caregivers in making decisions and solving problems relating to their care giving roles; respite care to enable caregivers to be temporarily relieved from their care giving responsibilities; and supplemental services, on a limited basis, to complement the care provided by caregivers. The Guam SOA will be submitting to the DPHSS Director for his submission to ASTHO the body of work on caregiver training for para-professionals (paid caregivers) and the unpaid family caregivers. The caregiver training is being led by the tri-agency partners, which includes the Guam Community College's Allied Health, the Health Services of the Pacific, and the Guam SOA.

E) Title VII - Elder Rights

1) Elder Abuse Prevention

100% Federal funding provides resources for off-island training of staff, outreach and educational activities, and cost-sharing for administrative supplies, materials, and equipment in support of the locally funded Bureau of Adult Protective Services.

2) Long Term Care Ombudsman (LTCO) Program

Services provided by the LTCO protect the health, safety, welfare and rights of elderly residents of long-term care and assisted living facilities by identifying, investigating and resolving complaints made by and on behalf of them. Currently, Guam does not have an assisted living facility; however, a task force has been convened to develop and establish an assisted living facility on Guam. A Social Worker III within the Bureau of Adult Protective Services is designated as Guam's State Long-Term Care Ombudsman, and conducts regular visits to facilities such as St. Dominic's Senior Care Home, Guam Memorial Hospital Skilled Nursing Unit (SNU) and the three Adult Day Care (ADC) Centers. This position is funded 40% Federal and 60% local. The Ombudsman also serves as a facilitator during monthly Resident Council meetings at the SNU and St. Dominic's Senior Care Home, as well as conducts scheduled presentations to disseminate information about program services to residents, family members, caregivers and employees.

The Guam SOA administers the following locally funded aging programs:

F) Adult Protective Services (APS)

The program is mandated by P.L. 19-54 as amended by P.L. 21-33 and P.L. 31-278, to provide protective services to elderly persons, age 60 years and above and adults who have a disability, age 18 and above who have been abused, neglected and/or exploited.

Services to the elderly and adults who have a disability are provided in a manner least restrictive to the dignity of the alleged victim and in consideration of the values and practices of their culture. Reports of alleged abuse are received and investigations and initial assessments are provided while a 24-hour Emergency Receiving Home and 24-hour Crisis Intervention Hotline Service are closely coordinated and maintained. Initiation, development and technical support for community and family services are also offered to include training for public awareness and education.

1) Emergency Receiving Home (ERH) Program

A component of the local Adult Protective Services (APS) Program, the Emergency Receiving Home (ERH) Program/Crisis Intervention Hotline is a contracted service which provides protective services seven days a week, 24-hours a day, ensuring that elderly and adults with disabilities who are victims of abuse have access to APS at all times. The availability of the ERH has proven essential to the community, ensuring the safety and protection of victims of serious abuse and neglect, in an emergency. The shelter affords victims the opportunity to escape their abusive situation, a '*safe haven*', until other living arrangements can be made. Further, the ERH will be called the "Guma Serenidad" (Home of Serenity) effective December 1, 2015 when the new contract is in place.

G) Senior Citizens Month (SCM)

Senior Citizens Month is a time honored tradition to recognize the accomplishments, achievements and contributions our island's senior citizens have made and continue to make that shape our island's economy, lifestyle, and value system. Since the enactment of Public Law 17-35 in 1983, our island community has proclaimed May as Senior Citizens Month.

The aging network, in collaboration with several governmental agencies and non-profit and for profit organizations, provides a number of activities in celebration of the month. Traditionally, annual festivities include the Proclamation Signing, Guam Conference on Aging, Legislative Reception, Guam SMP/SHIP Volunteer Appreciation Activity, Frail Elderly Mass, May Crowning, and a Centenarian Celebration. In 2013, seniors were sponsored to attend the annual Micronesia Island Fair to enjoy local music, cuisine, and arts and crafts. In 2014, two new events were introduced, a Memory Wave to promote awareness of the impact of Alzheimer's disease on the island's senior population and the "Biba Manamko" Drive to invite the community to donate items, such as sundry and cleaning supplies, to be used by the clients of the Adult Day Care Centers or the National Family Caregiver Support Program. In 2015, through the sponsorship of the GovGuam Association of Retired Persons, a Senior Talent Show and Competition was held to showcase and feature talent of Senior Center participants in singing, dancing, and story-telling. The growing community involvement with non-profits, for profits, governmental agencies, and giving individuals have contributed to the successful month-long celebration of Senior Citizens Month.

The Guam SOA administers the following federally funded Medicare based programs:

H) Guam State Health Insurance Assistance Program (Guam SHIP)

Funded in part by the Administration for Community Living, Guam's SOA, has been administering the Guam State Health Insurance Assistance Program, locally recognized as the Guam Medicare Assistance Program (Guam MAP), since 2004. The Bureau of Community Support (BCS) program staff, partners and a cadre of volunteers assists Medicare beneficiaries who need information, counseling, and enrollment assistance beyond what they are able to receive on their own through 1-800-MEDICARE and www.medicare.gov. Staff, partners and volunteers are trained to provide accurate and objective information to help beneficiaries understand and utilize their Medicare benefits through personalized counseling, education, and outreach to assist Medicare beneficiaries make informed health care decisions.

Guam SOA uses grant funding to pursue four (4) SHIP program objectives: One-on-One Counseling, Outreach, Quality Assurance, and Collaboration with ACL.

I) Guam Senior Medicare Patrol Project (Guam SMP)

In 2005, Guam SOA received a one year demonstration grant award from the Administration on Aging (AoA) to administer the Guam Senior Medicare Patrol (SMP) Project. Thereafter, Guam SOA has received funding through a continuous application process. The goal of Guam SMP is to continue expanding Project outreach and education activities to empower Medicare/Medicaid beneficiaries, family members, caregivers and other consumers, to protect themselves against Medicare/Medicaid error, fraud and abuse and know where to report it. In collaboration with Guam MAP, Guam SMP develops, plans and implements various activities to meet its Project objectives.

The Guam SOA is developing the following program or initiative:

J) Aging and Disabilities Resource Center (ADRC)

The Guam ADRC Project, established in 2005, was a project funded by a Federal grant awarded by the Administration on Aging and the Centers for Medicare and Medicaid Services to the Guam Department of Mental Health and Substance Abuse and administered by the Department of Integrated Services for Individuals with Disabilities (DISID).

The project goals were to:

1. Decrease the amount of time between referral and intake;
2. Increase diversions from institutional settings;
3. Increase awareness about Medicare/Medicaid benefits (including Part D coverage); and
4. Decrease rates of hospital readmissions within 30 days of discharge.

A primary component of the Guam ADRC Project is the development of a virtual or web-based consumer information and management system that establishes electronic communication among participating agencies in order to increase access of seniors (defined as individuals age 60 or older) and adults (defined as individuals aged 18 or older) with disabilities to information and linkages to long-term supports and services. As of this writing, through emergency procurement, Guam GetCare can be accessed through www.guamgetcare.com. The Guam GetCare System:

1. Provides an avenue to obtain information on existing programs for senior citizens and persons with disabilities;
2. Allows registered consumers access to their personal profile;
3. Provides service providers and vendors with tools for collecting and inputting consumer data; and
4. Eventually will allow service providers and vendors a means to make electronic referrals.

To fortify the aging network's commitment to integrate and utilize the Guam GetCare system, the Guam State Office on Aging entered into a Memorandum of Understanding (MOU) with DISID in 2007.

The goals of Guam GetCare are to:

1. Implement a No-Wrong-Door process, ensuring that everyone has the same access to information and resources, regardless of where he or she enters the system.
2. Develop a one-stop resource linking seniors and adults with disabilities to services.
3. Help consumers have more control over decisions regarding the service they receive.
4. Allow professionals to spend more time focusing on consumers and less time searching for information or filling out paperwork.
5. Use technology to improve the access to, and delivery of, services for seniors and adults with disabilities.
6. Combine the resources, experience and energy of the public and private sectors to make a system that's right for everyone who needs long-term supports and services.

As of this writing, the service providers and vendors of aging programs utilize the web-based tool, a feature of the Aging and Disability Resource Center System for Information and Referral, Intake, Consumer Assessment, Enrollment and/or Case Management to better assist clients navigate through the myriad of services. The system is also used by aging program providers to submit their Units of Services; to report data on clients receiving aging services. Further, the system is used to generate the National Aging Program Information System (NAPIS) report, provides a resource directory for consumers on Guam to access services and supports and provides a community calendar.

As Federal funds were not available on October 1, 2014, the ADRC is funded using local funds and the Guam SOA has assumed responsibility for the continued implementation of the ADRC.

K) Macheche Senior Citizen Center

On June 13, 2015, Public Law 33-53 lapsed into law to expand the Department of Public Health and Social Services (DPHSS) Division of Senior Citizens provision of Senior Citizen Center services through the operation of a new Macheche Senior Citizen Center by authorizing the transfer of fifty thousand nine hundred dollars (\$50,900) from the Executive Branch appropriations contained in the FY 2015 Budget Act, and to authorize DPHSS to enter into a Memorandum of Understanding with the Ilocano Association of Guam for the operation of the Senior Center.

A meeting was held by the Guam SOA and members of the Ilocano Association of Guam on Tuesday, June 16, 2015 to start the dialogue on the logistics to put forth this project. Additional discussions between the two aforementioned parties will be taking place to work out the details of the partnership.

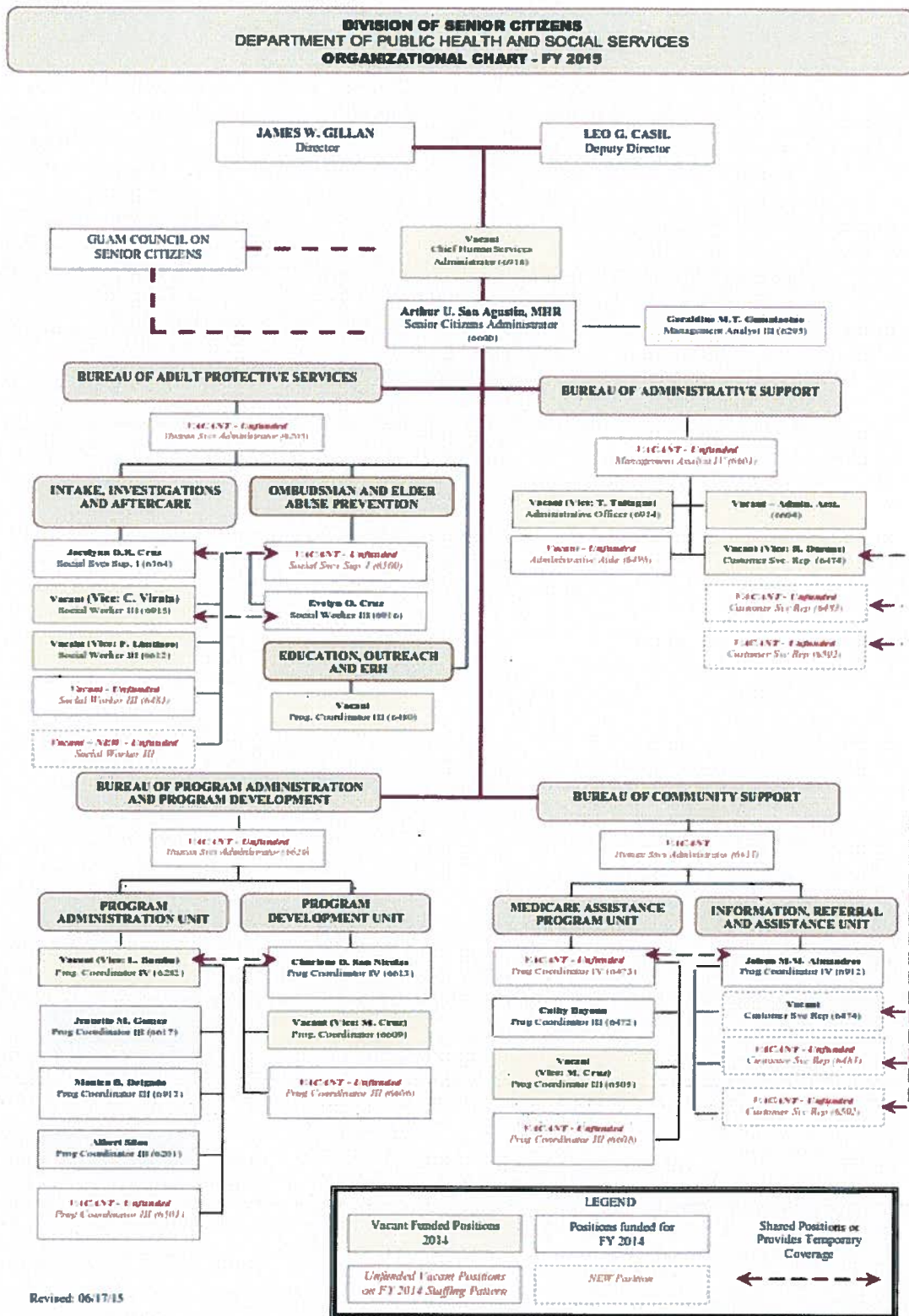
Aging Program Service Contracts and Grants

DIVISION OF SENIOR CITIZENS, GUAM STATE OFFICE ON AGING: CONTRACT AND GRANT INFORMATION TABLE

	PROGRAM	ORGANIZATIONAL TYPE	SERVICE PROVIDER/ VENDOR	YEARS OF AWARD	EXPIRATION DATE	TYPE OF CONTRACT	FUNDING	STATUS
1	Adult Day Care (3 Centers)	Non-profit	Catholic Social Service	3	9/30/2017	RFP - Cost Reimbursement	1. Maintenance of Effort for Title III-B Supportive Services; and 2. Local Overmatch	RFP to be published in FY17
2	Case Management Services	Non-profit	Catholic Social Service	3	9/30/2017	RFP - Cost Reimbursement	1. Maintenance of Effort for Title III-B Supportive Services; and 2. Local Overmatch	RFP to be published in FY17
3	In-Home Services	Non-profit	Catholic Social Service	3	9/30/2017	RFP - Cost Reimbursement	1. Maintenance of Effort for Title III-B Supportive Services; and 2. Local Overmatch	RFP to be published in FY17
4	Legal Assistance Services	For profit	Fisher and Associates	2	9/30/2015	RFP - Indefinite Quantity	1. Maintenance of Effort for Title III-B Supportive Services; and 2. Local Overmatch	Proposals due 6/15/15
5	Senior Center Operations (12 Senior Citizens Centers)	Government	Mayors' Council of Guam	1	9/30/2015	MOU	1. Maintenance of Effort for Title III-B Supportive Services; and 2. Local Overmatch	MOU being drafted for FY16
6	Transportation Services	For profit	Kloppenborg Enterprises, Inc.	3 years for current with 4 years proposed for new IFB	9/30/2015	IFB	1. Maintenance of Effort for Title III-B Supportive Services; and 2. Local Overmatch	Pending - IFB to be published in FY15
7	Elderly Nutrition- Congregate (C1) 14 designated sites (12 Ctrs and 3 ADC - ADC-South is co-existing with the Inarajan Senior Center). Pending addition of the Macheche Senior Citizens Center.	For profit	Basil Food Industrial Services Corporation	3	9/4/2017	IFB	1. Maintenance of Effort for Title III-C1 Congregate Meals; and 2. Local Overmatch	IFB to be published in FY17
8	Elderly Nutrition-Home-Delivered (C2) Island wide	For profit	Basil Food Industrial Services Corporation	3	9/4/2017	IFB	1. Maintenance of Effort for Title III-C2 Home-Delivered Meals; 2. Local Overmatch; and 3. Nutrition Services Incentive Program	IFB to be published in FY17
9	Preventive Health	Government	University of Guam - Cooperative Extension Program	1	09/30/2016 (Encumbered in FY 2014 with 2 year de-obligation)	MOU	Title III-D Preventive Health- 100 % Federal	FY 15 MOU being drafted for signatory routing.
10	National Family Caregiver Support Program (NFCSP)	For profit	Health Services of the Pacific (HSP)	3 years for current with 4 years proposed for new RFP	9/30/2015	RFP - Cost Reimbursement	Maintenance of Effort for Title III-E NFCSP	Proposals due 6/15/15 for FY16 through FY19
11	Elder Abuse Prevention	Government	SOA, BAPS	Not applicable	9/30/2017	Core Grant	Title VII-Elder Rights	On-going
12	Long Term Care Ombudsman (LTCO) Program	Government	Guam SOA, BAPS	Not applicable	9/30/2017	Core Grant	Title VII-Ombudsman	On-going
13	Adult Protective Services	Government	Guam SOA, BAPS	Annual Appropriation	9/30/2015	Annual Appropriation	100% Local	On-going
14	Emergency Receiving Home (December 2015 program will be named Guma Serenidad)	Non-profit	Catholic Social Service	3 years for current with 5 years proposed for new IFB, subject to local procurement	11/30/2015	IFB	100% Local	IFB currently under review with General Services Agency and will be published in FY16
15	Senior Citizens Month	Government	Guam SOA	Annual Appropriation	End of each FY	Annual Appropriation	100% Local	Annual Appropriation
16	Guam State Health Insurance Assistance Program (Guam SHIP)	Government	Guam SOA	Annual Application	March 31 of each year	Discretionary Grant	Federally-funded Medicare based program	On-going
17	Guam Senior Medicare Patrol Project (Guam SMP)	Government	Guam SOA	Annual Application	May 31 of each year	Discretionary Grant	Federally-funded Medicare based program	On-going
18	Aging and Disabilities Resource Center Software and Web-Based Development	Government subject to being outsourced	Guam SOA subject to being outsourced	Proposed 5 years: RFP under development	Pending	Currently under Emergency Procurement	100 % Local	Under development
19	Macheche Senior Citizens Center (Ref. P.L. 33-53)	Non-Profit	Ilocano Association of Guam	FY15 Appropriation	Carry-Over per Public Law 33-53	MOU/MOA	100% Local	In discussion with Ilocano Association of Guam

As of 06/18/15

ATTACHMENT D - DIVISION OF SENIOR CITIZENS, GUAM SOA ORGANIZATIONAL CHART



ATTACHMENT E - STATE PLAN DEVELOPMENT

Since January 6, 2015, the supervisors of the Division of Senior Citizens began their discussions and working meetings to develop Guam's Four Year State Plan on Aging for FY 2016-2019. On January 7, the supervisors began to develop the Plan goals. On February 16/17, the staff of the Bureau of Adult Protective Services met to discuss their goals and objectives addressing elder rights. On April 22; May 12-13, and 29; June 4-5, more working sessions were held to review and refine the goals, objectives, and measurements. On June 15, 2015 the supervisors reconvened to discuss the suggestions made during the Public Hearing and to determine which is feasible to achieve in the next four years.

On February 11, we began discussions on the Plan with ACL Representative Dennis Dudley. The initial draft of the Plan was forwarded to D. Dudley on February 19. His comments were discussed during the February 25 tele-meeting. Subsequent meetings were held on March 13, April 8 and 22, and on May 22 to further discuss business acumen and goal development. The Plan that would be posted for the public hearing was also provided to him via email on May 29. His comments on this update provided the direction and guidance needed to refine the Plan goals, objectives, and measurements. The Guam State Office on Aging is appreciative of his guidance. His insightfulness and knowledge greatly contributed to the development of this Plan.

On May 29, the Public Hearing Announcement and Notice for Guam's Four Year State Plan on Aging for FY 2016-2019, the hearing, was posted in the Department of Public Health and Social Services (DPHSS) Facebook as well as website (dphss.guam.gov) to inform the community of the hearing and where they can obtain copies of the draft Plan which were made available either at the Division of Senior Citizens or through the Department of Public Health and Social Services website. Communications were also made either via email or through phone calls on May 29 to members of the Guam Council on Senior Citizens (GCSC) and the 2015 Senior Citizens Month Central Planning Committee to inform them of the hearing and to transmit the Plan for their review and comment. On June 2, the service providers and vendors of the Guam State Office on Aging (also recognized as the Division of Senior Citizens (DSC)) as well as the Division Heads of the DPHSS were also sent email messages about the hearing and invited them to comment on Plan. On May 30, 2015, the announcement was published in the Marianas Variety News. Ten (10) individuals picked up copies of the State Plan at the Division of Senior Citizens office prior to the hearing date.

On June 4, 2015, Mrs. Concepcion Sayama, a member of the Guam Council on Senior Citizens and President of the National Association of Retired Federal Employees contacted the Division of Senior Citizens to inform the Guam SOA of her support of the Plan, however, she later explained she would be travelling and would not be able to attend the hearing.

In a letter dated June 8, 2010 and addressed to the Director of the Department of Public Health and Social Services, Mrs. Julie M. Perez, a member of the Guam Council on Senior Citizens and the Program Manager for the Adult Day Care – Dementia Center, expressed her support of the Plan.

On June 11, 2015, the day of the Public Hearing, 15 individuals signed in to attend the morning session of the public hearing. For the afternoon session, 6 signed in. The hearing was recorded and minutes were taken by Program Coordinator Joleen Almandres.

In attendance during the 9:00 am to 12:00 pm session were four (4) members of the Guam Council on Senior Citizens (GCSC). Of the four (4), two (2) are representing the Community At Large, but one is also the Program Manager of the Adult Day Care – Dementia Center and the other is a SHIP/SMP volunteer counselor; one (1) is a member of the GovGuam Association of Retired Persons; and one (1) is representing the central region of the island. Also present during the morning session was a representative of the Emergency Receiving Home, a temporary shelter for seniors and adults with disabilities who are in imminent danger of being abused; a student intern from the University of Guam; a senior from the general community, and several aging program staff representing the Bureau of Adult Protective Services, the Bureau of Program Administration and Development, the Bureau of Community Support, and the Guam State Office on Aging.

During the 4:00 pm to 6:00 pm session, a member of the Guam Council on Senior Citizens who is also the president of the Guam Chapter of the American Association of Retired Persons attended and gave comments on the Plan. Aging program staff also attended the afternoon session.

Three (3) provided testimony or oral comments on the Plan as summarized below:

During the hearing, a member of the GCSC provided comments with the following key points being reflected in the Plan, as follows: 1) re-state the benefit of supporting contract providers in marketing their services; to state in the section Prioritization of Services (POS) what happens when a client who is receiving services is discontinued due to the activation of the POS scale; 3) state that Social Security Income (SSI) is not available on Guam; and 4) to include the Organizational Chart of the Division of Senior Citizens into the Plan.

The second comment came from the Social Worker of the Emergency Receiving Home who requested for clarification on the proposed name change of the program. The Guam SOA provided the basis of the name change which satisfied his inquiry resulting in not having to make any changes in the Plan.

Another member of the GCSC who is also the President of the Guam Chapter of the American Association of Retired Persons shared his concerns about the level of engagement in bingo at the Senior Centers and would like to see other activities offered at the Senior Citizens Centers. Further, he would like to see an increase in the level of awareness in making financial transactions on-line and how difficult it is to be refunded after the transaction has been obligated, to give seniors warning on the cost of roaming charges, and offered to train seniors on financial exploitation. And he also noted, the need for more low cost housing for seniors, likes the age in place concept, and noted that there is an effort to make assisted living work on Guam.



EDDIE BAZA CALVO
GOVERNOR

RAY TENORIO
LIEUTENANT GOVERNOR

GOVERNMENT OF GUAM

DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
DIPATTAMENTON SALUT PUPBLEKO YAN SETBISION SUSIAT



JAMES W. GILLAN
DIRECTOR

MAY 26 2015 LEO G. CASIL
DEPUTY DIRECTOR

**PUBLIC HEARING ANNOUNCEMENT AND NOTICE FOR
GUAM'S FOUR-YEAR STATE PLAN ON AGING
(Fiscal Years 2016-2019)**

The Department of Public Health and Social Services (DPHSS), Division of Senior Citizens (DSC), will hold a public hearing on Guam's Four Year State Plan on Aging, for Fiscal Years 2016 through 2019, as required by the Older American's Act of 1965 as amended.

Public Hearing Date: June 11, 2015 (Thursday)

Time: 9:00 a.m. through 12:00 p.m.; 4:00 p.m. to 6:00 p.m.

Location: Division of Senior Citizens, University Castle Mall Building, Suite 8, Mangilao

The DSC State Office on Aging is responsible for administering Title III and VII programs mandated by the Older Americans (OAA) of 1965, as amended. The Act requires the development and administration of Guam's Four Year State Plan on Aging. The Plan provides the strategic direction of aging program services authorized by the OAA to address the long term care needs of vulnerable older individuals on Guam through the administration of Title III, Title VII and locally funded programs.

Draft copies of the Guam Four Year State Plan on Aging (FY 2016-2019) can be obtained at the Division of Senior Citizens, 130 University Drive, Suite 8, University Castle Mall, Mangilao, Monday through Friday from 8:30 a.m. to 11:30 a.m. and from 1:30 p.m. to 4:30 p.m. or may be accessed at the DPHSS Website (www.dphss.guam.gov).

Written comments are accepted through June 11, 2015 and are to be sent to the Director, DPHSS, c/o DSC State Plan on Aging (FY 2016-2019), 123 Chalan Kareta, Mangilao, Guam 96913.

Should you require additional information, please contact Mr. Arthur U. San Agustin, MHR, Senior Citizens Administrator or Mrs. Geraldine T. Gumataotao, Management Analyst at 735-7415/7421.

If you are an individual with a disability and require reasonable accommodations, please call Mrs. Geraldine T. Gumataotao no later than June 5, 2015 at 735-7415/7421.


JAMES W. GILLAN, Director

Ad paid for by the State Agency on Aging, Division of Senior Citizens

DPHSS Website Announcement

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PUBLIC HEARING ANNOUNCEMENT AND NOTICE FOR GUAM'S FOUR-YEAR STATE PLAN ON AGING (Fiscal Years 2016-2019)

Submitted by bertina tayeron on Fri, 2015-05-29 16:42



PUBLIC HEARING ANNOUNCEMENT AND NOTICE FOR GUAM'S FOUR-YEAR STATE PLAN ON AGING (Fiscal Years 2016-2019)

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Location: Division of Senior Citizens, University Castle Mail Building, Suite 6, Mangilao

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Guam Homeland Security

Public Health is actively working with the Guam Homeland Security Joint Information Center to provide fact sheets on "How to Prepare for an Emergency". Read more at <http://www.ghs.guam.gov> or for more information please call 475-9600.

Facebook Announcement

Guam Department of Public Health and Social Services | Facebook

Page 3 of 6



Marclano McIlahon
May 26 at 12:02am

Hi there interested to know if there is any vacancy for registered nurse out there. Wish to apply if there is any vacancy

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James Servino
April 14 at 8:44pm

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Andrew Sheng
April 8 at 11:48pm

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Participants at the 2014 Celebrate Life! Cancer Survivors' Conference held at Pacific Star Resort & Spa on June 7, 2014. (Photo courtesy of Lawrence Alam)



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Guam Department of Public Health and Social Services

June 4 at 5:41pm

Press Release No. 2015-047
Celebrate Life! Cancer Survivors Conference
Immediate Release
May 29, 2015; 4:00pm
DPHSS Release No. 2015-047... [See More](#)

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ThatsWhatSheSaid likes this.



Guam Department of Public Health and Social Services

May 28 at 11:48pm

PUBLIC HEARING ANNOUNCEMENT AND NOTICE FOR GUAM'S FOUR-YEAR STATE PLAN ON AGING (Fiscal Years 2016-2019)

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If you are an individual with a disability and require reasonable accommodations, please call Mrs. Geraldine T. Gumataotao no later than June 5, 2015 at 735-7415/7421.

[Like](#) [Comment](#)



Electronic Mail Communication

RE: SP Public Hearing Announcement - Geraldine Gumataotao

Page 1 of 1

RE: SP Public Hearing Announcement

Bertha A. Taijeron <Bertha.Taijeron@dphss.guam.gov>

Fri 5/29/2015 5:00 PM

To: Geraldine Gumataotao <Geraldine.Gumataotao@dphss.guam.gov>;

Here is the link to the announcement on the depts. FB page.

https://www.facebook.com/guamdpshs?ref=aymt_homepage_panel

From: Geraldine Gumataotao

Sent: Friday, May 29, 2015 3:48 PM

To: Bertha A. Taijeron

Subject: SP Public Hearing Announcement

Importance: High

Forwarded for your use in posting the announcement for the hearing on our State Plan. Plan is being forwarded.

Thanks for your help.

Gerrie

FW: Guam Four Year State Plan on Aging for FY 2016-2... - Geraldine Gumataotao

Page 1 of 1

FW: Guam Four Year State Plan on Aging for FY 2016-2019 Public Hearing Announcement

Geraldine Gumataotao <Geraldine.Gumataotao@dphss.guam.gov>

Fri 5/29/2015 6:49 PM

To: Robert Hofmann <guammayor@gmail.com>; carol.cabiles@guamisc.org <carol.cabiles@guamisc.org>; Robert Cruz <bobcruzguam@yahoo.com>; Marcelene Santos <msantos@opg.guamcourts.org>; Julie Perez <julie_m_perez@yahoo.com>; Katherine Taitano <katherine@ghura.org>; rudy.cabana@grta.guam.gov <rudy.cabana@grta.guam.gov>;

Cc: Arthur U. San Agustin <arthur.sanagustin@dphss.guam.gov>;

Importance: High

2 attachments

Guam 4 Year SP on Aging 2016 - 2019 - as of 052915 transmitted for posting.pdf; Public Hearing Announcement and Notice for Guam's Four-Year State Plan on Aging (Fiscal Year 2016-2019).pdf;

Good evening members of the Guam Council on Senior Citizens:

There will be a public hearing on Guam's Four Year State Plan on Aging for FY 2016-2019 on Thursday, June 11, 2015 from 9am – 12pm and from 4pm – 6pm at the Division of Senior Citizens Conference Room in Mangilao, as shown on the attached announcement. A copy of the draft Plan is also attached for your convenience. The document can also be found on the Dept. of Public Health and Social Services (DPHSS) Website at dphss.guam.gov.

As members of the Guam Council on Senior Citizens, we invite you to review the Plan and provide written or verbal comments. Letters of support are also welcome.

We look forward to seeing you at this hearing. If you have questions, you may contact me at 735-7415/7421 or via my cell at 487-1960.

Thank you and please enjoy your weekend.

Gerrie Gumataotao
Division of Senior Citizens, DPHSS

FW: Guam Four Year State Plan on Aging for FY 2016-2... - Geraldine Gumataotao

Page 1 of 1

FW: Guam Four Year State Plan on Aging for FY 2016-2019 Public Hearing Announcement

Geraldine Gumataotao <Geraldine.Gumataotao@dphss.guam.gov>

Sun 5/31/2015 9:57 AM

To: adadan@gmail.com <adadan@gmail.com>;

Cc: Arthur U. San Agustin <Arthur.SanAgustin@dphss.guam.gov>;

Importance: High

2 attachments

Guam 4 Year SP on Aging 2016 - 2019 - as of 052915 transmitted for posting.pdf; Public Hearing Announcement and Notice for Guam's Four-Year State Plan on Aging (Fiscal Year 2016-2019).pdf;

Hi Tony,

As promised, attached is the Draft Guam Four Year State Plan on Aging for FY 2016-2019 and the public hearing announcement. Please review and we invite you to provide written comments or even a letter of support on or before June 11, or provide your comments orally during the public hearing.

We hope to be able to collaborate in future projects to inform the community about our aging program services and assist in their needs.

Gerrie

FW: Guam Four Year State Plan on Aging for FY 2016-2019 Public Hearing Announcement

Geraldine Gumataotao <Geraldine.Gumataotao@dphss.guam.gov>

Tue 6/2/2015 8:08 AM

To: diana.calvo@catholicsocialserviceguam.org <diana.calvo@catholicsocialserviceguam.org>; peterjohn.camacho@catholicsocialserviceguam.org <peterjohn.camacho@catholicsocialserviceguam.org>; lasguam@gmail.com <lasguam@gmail.com>; r.gurusamy@hspguam.com <r.gurusamy@hspguam.com>; tek@kelguam.com <tek@kelguam.com>; mdcs@teleguam.net <mdcs@teleguam.net>; mcogadmin@teleguam.net <mcogadmin@teleguam.net>;

Cc: Arthur U. San Agustin <arthur.sanagustin@dphss.guam.gov>; Monica Untalan <Monica.Untalan@dphss.guam.gov>; Jeanette Gomez <Jeanette.Gomez@dphss.guam.gov>; Albert Silos <Albert.Silos@dphss.guam.gov>; Charlene D. San Nicolas <Charlene.SanNicolas@dphss.guam.gov>;

Importance: High

2 attachments

Guam 4 Year SP on Aging 2016 - 2019 - as of 052915 transmitted for posting.pdf; Public Hearing Announcement and Notice for Guam's Four-Year State Plan on Aging (Fiscal Year 2016-2019).pdf;

Good morning DSC Service Providers and Vendors;

We will be having a public hearing on Guam's Four Year State Plan on Aging for FY 2016-2019 on June 11, 2015 at the Division of Senior Citizens. The Plan provides our division's goals and objectives for the next 4 years for aging program services.

i have attached a copy of the public hearing announcement and the draft Plan for your review. Please take this opportunity to provide comments on the Plan either orally or in writing on or before June 11, 2015. We also welcome Letters of Support to show our collaboration in ensuring the successful delivery of aging program services.

If you have questions, you may contact me at 735-7415/7421.

Thank you,

Gerrie Gumataotao
Division of Senior Citizens, DPHSS

FW: Guam Four Year State Plan on Aging for FY 2016-2019 Public Hearing Announcement

Geraldine Gumataotao <Geraldine.Gumataotao@dphss.guam.gov>

Tue 6/2/2015 7:36 AM

To: Tommy C. Taitague <Tommy.Taitague@dphss.guam.gov>; Masatomo Nadeau <Masatomo.Nadeau@dphss.guam.gov>; Theresa L. Arcangel <Theresa.Arcangel@dphss.guam.gov>; Suzanne S. Kaneshiro <Suzanne.Kaneshiro@dphss.guam.gov>;

Cc: Arthur U. San Agustin <arthur.sanagustin@dphss.guam.gov>;

Importance: High

2 attachments

Guam 4 Year SP on Aging 2016 - 2019 - as of 052915 transmitted for posting.pdf; Public Hearing Announcement and Notice for Guam's Four-Year State Plan on Aging (Fiscal Year 2016-2019).pdf;

Good morning Division Heads,

We will be having a public hearing on Guam's Four Year State Plan on Aging for FY 2016-2019 on June 11, 2015 at the Division of Senior Citizens. The Plan provides our division's goals and objectives for the next 4 years for aging program services.

I have attached a copy of the public hearing announcement and the draft Plan for your review. We welcome your comments on the Plan either orally or in writing on or before June 11.

Thank you,

Gerrie Gumataotao
DSC

Local

SATURDAY, MAY 30, 2015 • MARIANAS VARIETY GUAM EDITION

7

Aguon seeks assurance on primary care providers at veterans clinic

By Louella Loeblo
louella@mvguam.com
Variety News Staff

SEN. Frank Aguon Jr. has written a letter to the Department of Veterans Affairs Guam Community Based Outpatient Clinic to clarify the status of primary care providers at the clinic.

During the April veterans commission meeting, Aguon said the veteran leaders were informed that the CBOC would have only one primary care provider as of June 1, with the departure of the last doctor who has been issued a "permanent change of station" assignment effective at the end of May.

Additionally, Aguon said a temporary provider had completed his six-month duty in mid-May.

At the time of the veterans commission meeting, CBOC informed Aguon that incoming candidates were still in the credentialing process and they anticipated having Dr. Helene Head as their only permanent primary care provider as of June 1.

According to CBOC, plans were made for temporary coverage by providers at the Hawaii VA to alternate at the CBOC to assist Head in the interim.

Moreover, the Veterans Affairs Pacific Islands Health

Care System (VAHICS) provided the CBOC with six additional nurses with an additional three on the way for a total of 15 nurses, which is more than double the number of nurses at CBOC during November 2014.

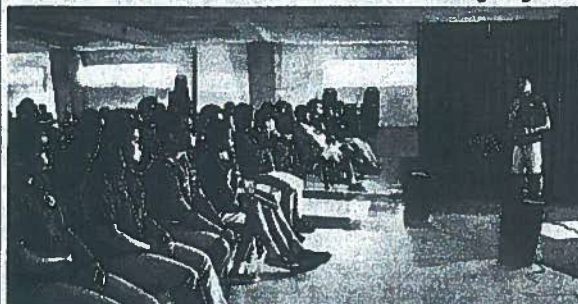
In his letter, Aguon asked for clarification and assurance from the CBOC that these personnel additions are proceeding as planned and that the clinic is still expecting two doctors beginning June 1 — one primary care physician and another from the Rural Health Extension Team.

"However, there still remains the need of two additional primary care providers for CBOC," Aguon wrote. "I am committed to ensuring the information provided by our office to the public is clear and accurate."

Aguon said that the Guam CBOC is also due to have a new Operation Enduring Freedom/Operation Iraqi Freedom social worker beginning June 1.

"I want to recognize and support the efforts of Dr. Helene Head and her staff at CBOC. They continue to do their best to serve our veterans with the resources provided to them by VAHICS," Aguon said.

GWHS students showcase VisCom projects



George Washington High School senior Eddie Muna, 17, explains to fellow students about the work he and other students in the Guam Community College CTE Visual Communications class produced throughout spring semester during a Visual Communications showcase at the OCC multi-purpose auditorium on Thursday. Continued page

(GCC) — Budding photographers, graphic artists and filmmakers in the Guam Community College CTE Visual Communications program at George Washington High School showcased the projects they have created throughout the semester in the GCC multi-purpose auditorium. The two-day exhibit opened Thursday and ended yesterday.

Eddie Muna, a 17-year-old senior high school from Mangilao, said he originally did not sign up for the VisCom program. His counselor just placed him in the class. Through it, he discov-

ered his talent, and quite possibly, his career.

"I loved being able to work with these applications," Muna said.

The VisCom program is one of 10 CTE programs GCC offers in Guam's public high schools (although Visual Communications is only available at GW because students can walk to the adjacent OCC campus to use the computer labs). The program teaches students how to work with graphic applications such as Adobe InDesign, Illustrator and Photoshop, and iMovie and GarageBand.

"As we went through our course, our knowledge expanded and we were able to grow through our projects," Muna said.

He will graduate in a few weeks and has applied to the San Francisco Art Institute for graphic and web design because of what he has learned in his VisCom class.

"These kids have so much creativity; they just don't know it until you provide them with an outlet," said Jean Cepeda, who teaches the high school VisCom program. "They discover their talents in this class," she said.

Off to middle school



Jia Heih, left and Kevin Kidon of Ordoi Chalan Pago Elementary School pose after receiving their promotional papers from fifth grade. Both said they will be attending the sixth grade at the Agueda I. Johnston Middle School. Robert G. Tupper / Variety



GOVERNMENT OF GUAM
DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
DIPARTAMENTON SALUD PUPLEHO YAN SETBISHON SUSIAI



PUBLIC HEARING ANNOUNCEMENT AND NOTICE FOR GUAM'S FOUR-YEAR STATE PLAN ON AGING (Fiscal Years 2016-2019)

The Department of Public Health and Social Services (DPHSS), Division of Senior Citizens (DSC), will hold a public hearing on Guam's Four Year State Plan on Aging for Fiscal Years 2016 through 2019, as required by the Older Americans Act of 1965 as amended.

Public Hearing Date: June 11, 2015 (Thursday)
Time: 9:00 am through 12:00pm; 4:00 pm to 6:00pm
Location: Division of Senior Citizens
University Castle Mall Building, Suite 8, Mangilao

The DSC State Office on Aging is responsible for administering Title III and VII programs mandated by the Older Americans (OAA) of 1965, as amended. The Act requires the development and administration of Guam's Four-Year State Plan on Aging. The Plan provides the strategic direction of aging program services authorized by the OAA to address the long term care needs of vulnerable older individuals on Guam through the administration of Title III, Title VII and locally funded programs.

Draft copies of the Guam Four-Year State Plan on Aging (FY 2016-2019) can be obtained at the Division of Senior Citizens, 130 University Drive, Suite 8, University Castle Mall, Mangilao, Monday through Friday from 8:30 a.m. to 11:30 a.m. and from 1:30 p.m. to 4:30 p.m. or may be accessed at the DPHSS Website (www.dphss.guam.gov).

Written comments are accepted through June 11, 2015 and are to be sent to the Director, DPHSS, c/o DSC State Plan on Aging (FY 2016-2019), 123 Chalan Kareta, Mangilao, Guam 96913.

Should you require additional information, please contact Mr. Arthur U. San Agustín, MHR, Senior Citizens Administrator or Mrs. Geraldine T. Gumataog, Management Analyst at 735-7415/7421.

If you are an individual with a disability and require reasonable accommodations, please call Mrs. Geraldine T. Gumataog no later than June 5, 2015 at 735-7415/7421.

/s/ JAMES W. GILLAN

Director, Department of Public Health and Social Services

Ad paid for by the State Agency on Aging, Division of Senior Citizens

Letter of Support

JULIE M. PEREZ
POST OFFICE BOX 26151
BARRIGADA, GUAM 96921
TELEPHONE NUMBER: (671) 649-1032

June 8, 2015

Mr. James W. Gillan
Director
Department of Public Health
And Social Services (DPH&SS),
Division of Senior Citizens
123 Chalan Kareta
Mangilao, Guam

Cc: DSC State Plan on Aging (FY 2016-2019)

LETTER OF SUPPORT

Dear Mr. Gillan:

This letter serves to support the *Guam Four Year State Plan* prepared by the State Office on Aging (SOA) under the Division of Senior Citizens (DSC) of the Department of Public Health & Social Services which promotes the independence and well-being of older individuals, individuals with disabilities, and their families. These individuals may have a variety of needs related to their physical, mental and emotional well-being. At the same time, these individuals are resilient and have much to contribute to Guam's community.

By the year 2020, persons age 60 years and older will comprise 15 percent of Guam's population. Increasingly diverse groups of older individuals and individuals with disabilities will require us to examine how we deliver services. The *Guam Four Year State Plan* responds to the needs of these individuals with the aim to help Guam's aging community maintain independence and dignity in their homes and communities and address the reality of fiscal and resource limitations.

The need to continue and secure funding for Guam's elderly programs will challenge our community. At the same time, demand for these services is expected to continue to grow, and resources, including staff, are stretched thin. Requests for these services will increase during an inflationary economy such as Guam's because people have less income and assets and therefore qualify for these programs. We must commit to continue and support these programs and maximize access and system capacity. The *Guam Four Year State Plan* provides direction in planning and implementing long-term care initiatives for our island elders. The State Office on Aging under the Division of Senior Citizens, Department of Public Health & Social Services, focuses on developing partnerships to promote health and wellness and protect elder's rights. Empowering Guam with knowledge about available home and community based services

**Letter of Support
Guam Four Year State Plan
June 9, 2015
Page 2**

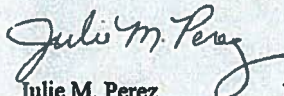
remains the foundation for making informed decisions about their future.

The State Office on Aging under the Division of Senior Citizens identified key areas for accomplishment under this State Plan. These include: accessibility to programs such as the Adult Day Care, Case Management Services, In-Home Services; the Elderly Nutrition Program; Transportation; Legal Services; 12 Senior Citizens Center's on island; and, the National Family Caregiver Support Program. Notwithstanding, the SOA administers seven programs, including the Adult Protective Services. Furthermore, the *Guam Four Year State Plan* has developed goals and objectives, strategies and performance measures to encourage increased volunteerism and community involvement, and advance health promotion and wellness with the network of providers who support the senior community of Guam.

The *Guam Four Year State Plan* reflects on the desire to make a difference in the lives of current and future generations of older individuals, individuals with disabilities, and their families. It serves as a guide to ensure that all the elderly in our community has the opportunity to enjoy wellness, longevity, and quality of live.

I thank you for the opportunity to submit this *Letter of Support* and look forward to the favorable approval of the *Guam Four Year State Plan for FY2016-FY2019*.

Sincerely,



Julie M. Perez
Community at Large Member
Guam Council on Senior Citizens