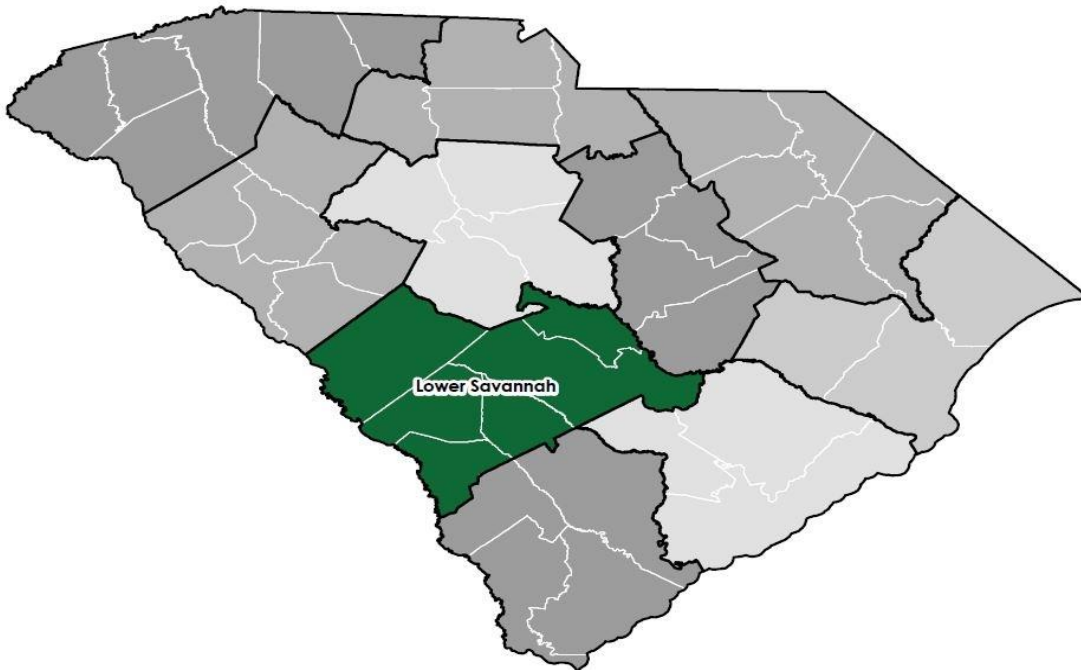




Area Agency on Aging
Area Plan
2023-2027
Updated November 7, 2025

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A. Narrative Summary

The Lower Savannah Council of Governments (LSCOG) is a quasi-governmental agency designated as the Area Agency on Aging in 1976 by the State Unit on Aging under directives issued by the Administration on Aging to serve Region V-Lower Savannah counties of Aiken, Allendale, Bamberg, Barnwell, Calhoun, and Orangeburg.

The LSCOG designated the Human Services Division, that houses the Aging, Disability and Transportation Resource Center to implement senior programs and services in Region V-Lower Savannah. The Human Services Division is responsible for coordinating and delivering a wide range of services and programs that support older adults and their caregivers. These programs include home delivered meals, transportation, caregiver support, legal assistance, and wellness programs. The organization works closely with local service providers and community organizations to ensure that older adults have access to the resources and support they need to age in place with dignity and independence. The division is named the Lower Savannah Area Agency on Aging/Aging, Disability and Transportation Resource Center and called LSCOG AAA/ADTRC.

The mission of LSCOG AAA/ADTRC is to connect people in Aiken, Allendale, Bamberg, Barnwell, Calhoun, and Orangeburg Counties to resources that improve quality of life.

Our vision remains to provide a comprehensive service and information network for improving and enhancing the quality of life for our citizens. Flexibility to plan and facilitate locally developed solutions.

Lower Savannah Council of Governments operates South Carolina's only Aging, Disability and Transportation Resource Center (ADTRC). The Resource Centers' purpose is to assist and to inform people in our region on topics related to aging, disabilities, family caregiving, benefits, resources, transportation, and various options that support independent, healthy, and engaged community living throughout the Planning Service Area (PSA) of Aiken, Allendale, Bamberg, Barnwell, Calhoun, and Orangeburg Counties.

Older adults in rural communities often face unique challenges, the LSCOG AAA/ADTRC delivers a wide array of services and programs to meet the needs of older adults in Region V. The LSCOG AAA/ADTRC aims to provide person-centered programs to improve the health and wellbeing of the older adults we serve. As a result, this helps older adults remain in their homes and communities as they age. Overall, the LSCOG AAA/ADTRC's role as an Area Agency on Aging is an important part of our efforts to promote the health and well-being of all residents in the six-county region

LSCOG AAA/ADTRC staff, aging network partners and our senior community promotes the development of comprehensive and coordinated community-based systems through work

relating to advocacy, planning, coordination, public and private agency organization linkages, information sharing, monitoring, and quality assurance. LSCOG administers state funding for contracted multipurpose senior center programs, legal services, home- and community-based services, Long Term Care Ombudsman program and the State Health Insurance Assistance Program (SHIP) to support older adults and adults with disabilities.

The Lower Savannah AAA continues to provide face-to-face assessments with clients utilizing IIIB, C1, C2, HCBS, and Bingo services being paid with funds through the Older Americans Act. These interviews are all encompassing, assessing each client for their specific needs. The assessment will be entered into the state database system as required and can be viewed by any contractor providing services to eligible seniors. Programs such as Family Caregiver, SHIP, I&R/A, etc. do not always receive a face-to face assessment, instead assessments can be conducted over the phone.

Evaluating our 2022 Needs Assessment identified growing areas of concern with the senior population. As a result, several new initiatives were implemented utilizing the American Rescue Plan (ARP) funding, including Personal Care Services, Lawn Maintenance, Pest Control, Dental Care Services, Hearing Aids, Air Conditioning units, as well as weekend home-delivered meals. In addition, the Caregiver support program purchased a software program, Trualta, which afforded caregivers 24/7 access to caregiver resources such as support groups and caregiver training.

With the depletion of American Rescue Plan (ARP) funding, those new initiatives are no longer being provided. While all six of the counties in the Lower Savannah region have a homecare program, there is one level of service offered. Homemaker services provide light housekeeping assistance only and is currently offered as a Consumer Choice program.

The Caregiver Support program continues to explore ways to increase counseling and support resources to caregivers. In doing so, efforts to educate, identify resources and establish partnerships remain a priority to ensure caregivers have access to tools and information that enable and empower them as they fulfill their caregiver role.

Constant funding changes and challenging times heighten the need to think creatively and strengthen partnerships. The AAA will focus increased efforts to facilitate planning, collaboration, partnering and advocacy across the spectrum of human service providers and their constituencies. The AAA strives to increase its visibility in the community and bring awareness to the services and programs provided, in hopes to continue to fulfill its ongoing mission of improving and enhancing the quality of life for our citizens.

Key Findings from AAA Monitoring Efforts

Fiscal Monitoring

March 7, 2025

Lower Savannah was found compliant in each area of review. The monitoring determined that Lower Savannah correctly treats expenditures, utilizes a clear process to prepare monthly PRF's, captures adequate backup documentation, and is in compliance with applicable federal, state and SCDOA rules and regulations.

Family Caregiver Support Program

March 12, 2025

Desktop monitoring was completed on 3/11/2025. The area of concern is related to the number of outreach events documented in the state approved database, CaseWorthy. The AAA is to increase outreach events annually by 5% targeting rural communities, utilizing the agency's website and other social media platforms to increase awareness, and by collaborating with healthcare organizations, senior centers, faith-based organizations to educate about the program and services in the community.

Transportation Monitoring

June 12, 2025

The monitoring report reflected that requirements meet the criteria and LSCOG is compliant, with no further recommendations.

The monitoring report

Congregate Meal, III-C1 Nutrition Monitoring

Home Delivered Meal, III-C2 Nutrition Monitoring

January 27, 2025

The monitoring report reflected that the requirements meet the criteria and LSCOG is compliant, with no further recommendation. Where there was a concern regarding safeguards for voluntary contributions as well as signage advising of participant's ability to make a voluntary contribution have been corrected and provided to SCDOA. The AAA reviewed all provider voluntary contribution policies and practices to ensure they are in compliance.

Evidence Based Programs, III-D Monitoring

January 27, 2025

Overall, the monitoring report reflected that requirements meet the criteria and LSCOG is compliant, with no further recommendation. Where there was a concern regarding the frequency of evidence-based programming, the item was addressed and an update provided to SCDOA. LSCOG continues to increase evidence-based programming throughout the region.

LTCOP Annual Monitoring

May 29, 2025

LSCOG Long Term Care Ombudsman Program was found in compliance. The program is fully staffed. Staff are knowledgeable and responsive to the needs of residents. LSCOG LTCOP will continue efforts to increase the number of volunteers throughout the region.

Assessment Program Monitoring

November 25, 2024

Monitoring of the Assessment program reflected that the program is in compliance with policies and procedures established by SCDOA as well as the Older American's Act. Areas of concern related to job descriptions, the cost per assessment, and the monthly assessment totals have been addressed, and LSCOG continues to work to increase monthly assessments and reduce the per assessment cost.

Content Charts

III. B. Context

Use this chart in the Context portion of your Regional Area Plan. This will represent a summary of services currently provided by county. As you complete the chart for each county and service, details regarding an absence of service by county or specific location/site may be described in the narrative.

Current Service Coverage Charts

An “X” indicates the service is offered in the county listed.

Supportive Services	Aiken	Allendale	Barnwell	Bamberg	Calhoun	Orangeburg
Assessment	☒	☒	☒	☒	☒	☒
Transportation	☒	☒	☒	☒	☒	☒
Congregate						
Medical	☒	☒	☒	☐	☒	☐
Essential	☒	☒	☒	☐	☒	☐
Assisted	☐	☐	☐	☐	☒	☐
Homecare	☐	☐	☐	☐	☐	☐
Personal Care						
Homemaker	☒	☒	☒	☒	☒	☒
Chore	☐	☐	☐	☐	☐	☐
Minor Home Repair	☐	☐	☐	☐	☐	☐
Information & Referral	☒	☒	☒	☒	☒	☒
Legal Services	☒	☒	☒	☒	☒	☒

Nutrition Services	Aiken	Allendale	Barnwell	Bamberg	Calhoun	Orangeburg
Congregate Meals	☒	☒	☒	☒	☒	☒
Home Delivered Meals	☒	☒	☒	☒	☒	☒
Home Delivered Meals (Family Caregiver)	☐	☐	☐	☐	☐	☐
Nutrition Education	☒	☒	☒	☒	☒	☒
Nutrition Counseling	☐	☐	☐	☐	☐	☐

Health Promotion Services	Aiken	Allendale	Barnwell	Bamberg	Calhoun	Orangeburg
Evidenced-Based Wellness Programs	☒	☒	☒	☒	☒	☒
Health Promotion & Disease Prevention	☐	☐	☐	☐	☒	☒

Family Caregiver	Aiken	Allendale	Barnwell	Bamberg	Calhoun	Orangeburg
Information & Assistance	☒	☒	☒	☒	☒	☒
Assessment	☒	☒	☒	☒	☒	☒
Respite	☒	☒	☒	☒	☒	☒
Supplemental Services	☒	☒	☒	☒	☒	☒
Counseling	☐	☐	☐	☐	☐	☐
Support Groups	☐	☐	☐	☐	☐	☐
Caregiver Training	☐	☐	☐	☐	☐	☐

The current service coverage chart indicates OAA services that are currently being provided by Lower Savannah AAA/ADTRC. Programs such as Personal Care, Chore, Home Delivered Weekend meals, Support Groups and Caregiver Training, were offered utilizing American Rescue Plan (ARP) funding. The timeframe in which ARP funding could be utilized ended September 30, 2025.

III. D. Goals, Objectives, and Performance Measures

Use this chart to help delineate your goals, objectives, strategies, and challenges. The State Plan goals and objectives have already been filled in for your convenience. As part of your Regional Area Plan, include your strategies and any foreseen or suspected barriers that may impact accomplishing those items during the two-year period. It is also expected that the region will include its own goals and objectives, along with the strategies and challenges in addition to those listed from the State Plan. (All of the provided empty charts may not be needed, or you can copy if more items are needed.)

Goals, Objectives, Performance Measures, Strategies, and Challenges

State Plan Goal 1	Maintain effective and responsible management of Older Americans Act (OAA) services offered through the Department on Aging (SCDOA) and within the 10 service regions in South Carolina.
State Plan Objective 1.1	Evaluate, monitor, and modify aging service programs to maximize the number of people served with state and federal funding, and to ensure programs and services are cost effective and meet best practices, as well as to achieve greater accountability and transparency.
Annual Performance Measures	
State Plan – SCDOA and AAAs conduct needs assessments to evaluate state and regional concerns and service demands.	
State Plan – AAAs submit Quality Assurance Reports to SCDOA annually.	
Strategies and Actions	
Challenges and Barriers	

State Plan Objective 1.2	The client assessment program is the gateway to most services provided by the Aging Network. An assessment is necessary to determine a client's eligibility for services, and it determines the level of need by establishing a priority score. The AAAs are responsible for conducting client assessments in their respective regions, thereby ensuring greater accountability and providing a holistic approach to how each client is matched to services.
Annual Performance Measures	
State Plan – Expand the number of seniors assessed annually by 5% or as needed.	
State Plan – Decrease the number of seniors on waiting lists for services. (It should be noted that regional waiting lists can be a result of many factors, including funding and/or lack of capacity in rural areas.	
Strategies and Actions	
Challenges and Barriers	

Regional Objective 1.1	The AAA will routinely evaluate and monitor, fiscal and programmatic, all contractor agencies to ensure programs using state and federal funding are being conducted in compliance with all contract terms, program guidelines and incorporating best practices.
Annual Performance Measures	
1. Each Contracted service provider will be monitored annually by the AAA fiscal and programmatic staff to ensure contract compliance and program integrity. 2. Summaries of the annual monitoring of each contracted service/ provider will be submitted to the SC DOA by September 30 of each year.	
Strategies and Actions	
1. The AAA will utilize both desktop monitoring and onsite monitoring techniques to verify the contractor is providing the services for which reimbursement is requested. 2. The AAA will use the standardized monitoring tools provided by the SC DOA for each program. 3. The AAA Policy and Procedures for monitoring contractors will be revised as needed.	
Challenges and Barriers	
1. As the number of contracted programs in the region requiring annual monitoring increase, monitoring may become less detailed which can result in deficiencies not being identified. 2. The AAA Policy and Procedures do not include a standardized procedure for monitoring the programs.	

2025 Update Regional Objective 1.1 There are no updates to this objective.

Regional Objective 1.2	The client assessment program is an integral part of service delivery. An assessment is necessary in determining an individual's eligibility for services, aids in identifying needs, and offers a complete perspective of each client.
Annual Performance Measures	
1. Increase the number of seniors assessed annually by 5% or as needed. 2. Reduce the number of seniors on waiting lists for services. (Many factors contribute to regional waiting lists to include funding and availability of resources)	
Strategies and Actions	
1. Increase visibility of the agency and promote the OAA services provided. 2. Maintain trained staff to conduct assessments 3. Increase utilization of technology to conduct assessments within congregate meal sites where applicable. 4. Consistently monitor and maintain waiting lists for accuracy to ensure that clients are appropriately placed. 5. Work cohesively with other departments such as Information and Referral to identify other resources that may be available to address the needs of individuals. This action may prevent the client's placement on the waiting list or reduce the amount of time spent on the waiting list.	
Challenges and Barriers	
1. Improve agency visibility and awareness of OAA services provided 2. Increased concerns of seniors regarding safety and fraud 3. Limited internet access and/or connectivity issues within the congregate meal sites within rural areas 4. Limited funding to provide services 5. Increase accessibility of resources such as transportation services in rural areas. 6. Limited availability of resources to address needs of individuals.	
2025 Update Regional Objective 1.2 The LSCOG AAA/ADTRC assessment staff continue to conduct assessments within all six counties for OAA services. When conducting assessments, staff educate individuals about the agency and promote OAA programs and services. LSCOG AAA/ADTRC ensures that staff acquire and develop the knowledge and training needed to conduct assessments by completing required trainings and attending relevant meetings. By completing a thorough assessment, Assessors are able to determine an individual's eligibility for services, aid in identifying needs, offer a complete perspective of each client, which directly impacts the number of seniors placed on waiting lists.	
State Plan Goal 2	Empower older adults and persons with disabilities, their families, caregivers, and other consumers by providing information, services, education, and counseling on their options to live as independently as possible in the community.

State Plan Objective 2.1	Information and Referral/Assistance (I&R/A); SC ACT
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Annual Performance Measures
State Plan – Increase the number of contacts accessing I&R/A services by 5% annually.
State Plan – Increase the I&R/A outreach by 5% annually.
Strategies and Actions
Challenges and Barriers

State Plan Objective 2.2	Insurance and Medicare Counseling
Annual Performance Measures	
State Plan – Increase by 5% annually, the number of older adults and adults with disabilities enrolled in prescription drug coverage that meets their financial and health needs.	
State Plan – Increase by 5% annually, the number of beneficiaries who contact the SHIP program for assistance.	
State Plan – Three regional outreach events are required per quarter (36 annually).	
State Plan – Increase by 5% annually, the number of consumers and caregivers receiving SMP counseling.	
State Plan – Increase by 5% annually, the number of consumers reached in rural, isolated areas.	
State Plan – Increase by 5% community partnerships to assist in raising awareness of fraud.	
Strategies and Actions	
Challenges and Barriers	

State Plan Objective 2.3	Nutrition Program and Services
Annual Performance Measures	
State Plan – Track and identify service gaps for Congregate and Home delivered meal services.	
Strategies and Actions	

Challenges and Barriers

State Plan Objective 2.5	Evidence-Based Health Promotion and Disease Prevention Programs
Annual Performance Measures	
State Plan – Track and identify service gaps for Evidenced-Based Health Promotion and Disease Prevention Programs including their causes and geographic distribution.	
Strategies and Actions	
Challenges and Barriers	

State Plan Objective 2.6	Transportation Services
Annual Performance Measures	
State Plan – Increase the number of clients utilizing transportation services by 5% annually, depending on available funding sources.	
Strategies and Actions	
Challenges and Barriers	

State Plan Objective 2.7	Family Caregiver Support Program
Annual Performance Measures	

Strategies and Actions

State Plan Objective 2.10	Home Care
Annual Performance Measures	
State Plan – Increase the number of seniors receiving home care services by 5% annually.	
Strategies and Actions	
Challenges and Barriers	

State Plan Objective 2.11	Minor Home Repairs
Annual Performance Measures	
State Plan – Increase the number of seniors receiving home repair services by 5% annually.	
Strategies and Actions	
Challenges and Barriers	

Regional Objective 2.1	Information and Referral/Assistance (I&R/A); SC ACT
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Annual Performance Measures
Increase the number of contacts accessing I&R/A services by 5% annually.
Increase the I&R/A outreach by 5% annually.
Strategies and Actions
In efforts to increase the number of contacts accessing I&R/A services by 5% annually, IR& A continues to serve as the gateway of information. Calls are triaged within IR&A as the best practice to best identify and understand the callers' needs and to assist them in making an informed decision for service solutions. Outreach efforts continue to be expanded in all six counties in order to educate the public regarding resources, programs and services that are available. Outreach efforts will include being involved in community and networking events as well as initiating requests to speak to groups of seniors in public places such as libraries, churches, and meal sites. In efforts to increase the I&R/A outreach by 5%, outreach will be conducted at least three times monthly via various platforms to include in person education as well as networking through ZOOM meetings and educational pamphlets distributed in places such as faith-based organizations, doctor's offices and health clinics, and health fairs as permitted.
Challenges and Barriers
As the population of seniors is expected to increase as Baby Boomers continue to retire, resources will become more challenging to obtain as well as funding will be spread even thinner. Individuals tend to be unaware of what resources are available in their area or how to go about obtaining them. This demonstrates the importance of outreach to educate seniors regarding I&R/A service solutions.

2025 Update Regional Objective 2.1 LSCOG AAA/ADTRC continues to increase the number of individuals accessing IR&A as well as the number of outreach events conducted annually. IR&A serves as the first point of contact for most individuals seeking information regarding needed services and resources, efforts to promote awareness and increase program visibility are ongoing. IR&A continues to seek, initiate and engage in outreach events, maintains the most current and accurate resource directory, and distributes educational pamphlets to various outlets throughout the region.

Regional Objective 2.2 Insurance and Medicare Counseling
Annual Performance Measures
1. Will increase beneficiary contacts by 5% annually. 2. Will conduct 3 Outreach contacts per quarter. 3. Will increase contacts with Medicare beneficiaries under 65. 4. Increase number of contacts to rural beneficiaries. 5. Increase number of contacts with new to Medicare beneficiaries and beneficiaries during Open Enrollment Period.
Strategies and Actions
● OUTREACH - Focus outreach efforts to equitably reach and serve diverse populations and rural areas. Utilize libraries, Meal Sites, Churches, Retirement Groups, Chambers. Promote the visibility of SHIP during the Annual Medicare Open Enrollment period. ● MARKETING - Develop marketing and outreach to improve the visibility of the program. Promote the visibility of SHIP during the Annual Medicare Open Enrollment period. Market heavily during the 3rd quarter and mail out OEP postcards.

● STRATEGIC PLANNING - Promote counseling and assistance services to low income, disability and “New to Medicare” populations. Utilize data and analyze closing to ensure marketing and outreach efforts are fruitful. Track individual counseling and group outreach. Report monthly progress and meet quarterly to discuss and recommend strategies for process improvement in the monthly meetings. Ensure that data is entered into STARS accordance with the monthly deadlines that are established.	
Challenges and Barriers	
Services are not easily accessible: In geographically isolated communities, it may be challenging to travel. Additionally, a lack of public transportation or other transportation barriers may prevent people from seeking services. Lack of capacity and infrastructure: A lack of infrastructure or technology, such as broadband, may impact the ability of rural communities to support human services programs. Lack of awareness: Rural communities may not be aware of the full spectrum of services available across local, state, and federal levels. Additionally, individuals may not know that they are eligible for certain human service programs. For decades, rural communities have found themselves at an unfair competitive disadvantage, as population-based, formula- driven funding allocations and urban-oriented program delivery designs became the norm in federal and state programs. Rural advocates have long argued for a more thoughtful, rural-specific human service delivery framework that takes into consideration other critical factors in addition to the number people to be served, such as the higher cost of service delivery in rural areas, scarcity of service providers, and the need for innovative approaches to gaining efficiencies that are quite different than what works in cities with high concentration of population.	
2025 Update Regional Objective 2.2 There are no updates for this objective.	
Regional Objective 2.3	Nutrition Program and Services
Annual Performance Measures	
1. AAA will work closely with contractors of Nutrition Service Programs to increase daily attendance to 25 participants per day and operate five days per week as funds are available. 2. AAA will encourage contractors of Nutrition Services Programs to implement new and innovative programming and activities within congregate meal sites.	
Strategies and Actions	
1. Ensure contractors are using their funds most efficiently to expand services to more people, more days of service. 2. Coordinate outreach efforts with contractors to assist with volunteer recruitment, increasing visibility in area and promoting programming and services. 3. Ensure contractors are informed of new and relevant information, related to programming and funding opportunities by encouraging partnerships and networking.	

Challenges and Barriers
1. 2020 census data indicate a decline in the elderly population in all areas except Aiken. Loss of population will affect the funding for services, the number of potential volunteers, and the number of seniors in a given area. 2. Funding challenges will impact contractors' ability to develop and implement new programs and services.

2025 Update Regional Objective 2.3 The LSCOG AAA/ADTRC works closely with contractors of Nutrition Service Programs to ensure compliance with SCDOA congregate meal site participation and daily operations. The LSCOG AAA/ADTRC staff provide education, assistance and guidance regarding budgets and funding, waiting lists, and outreach initiatives. With a decline in the elderly population, and funding uncertainties, increased participation and new program development continue to be a

Regional Objective 2.4	Evidence-Based Disease Promotion and Disease Prevention Program
Annual Performance Measures	
1. Each county in Lower Savannah PSA will have at least one operational Evidence-Based Health Promotion and/or Disease Prevention Program.	
Strategies and Actions	
1. The AAA Director or Contracts Manager will work with each contractor of EBHP services to ensure successful operations of the programs in each county. 2. If a single contractor is not awarded a contract to provide Evidence- Based Disease Promotion and Disease Prevention Program services, the AAA staff will coordinate and contract with qualified organizations to ensure all counties in the PSA have a EBHP program to attend as desired. 3. The AAA Director or Contracts Manager will work with each contractor to identify funding to provide for training and certification of staff to administer EBHP services.	
Challenges and Barriers	
1. Lack of qualified instructors or potential contractors in rural counties.	

2.4 Update Regional Objective 2.4 The LSCOG AAA/ADTRC will ensure that each county in the Lower Savannah PSA maintains at least one operational Evidence-Based Health Promotion and/or Disease Prevention Program. The LSCOG AAA/ADTRC staff will ensure program success in each county by requiring that Evidence-Based Health Promotion and/or Disease Prevention programs are facilitated by qualified instructors or organizations.

Regional Objective 2.5	Transportation Services
Annual Performance Measures	

1. The Lower Savannah PSA will have at least one provider in each county to offer assisted and/or essential transportation to seniors.
Strategies and Actions
1. The AAA will promote the opportunity for local transportation providers to contract with the AAA to provide the service. 2. The AAA will research options for seniors to be able to access alternative consumer choice driven transportation options available to the general public like Lyft, Uber, or Rideshare type programs.
Challenges and Barriers
1. Rural counties do not have adequate numbers of Lyft, Uber type drivers. 2. Seniors who lack transportation often require physical assistance from door to door which is not provided by publicly accessed transportation programs. 3. Liability concerns and high fuel costs are deterrents for the development of volunteer transportation assistance programs.

2025 Update Regional Objective 2.5 There are no updates to this objective.

Regional Objective 2.6	Family Caregiver Program
Annual Performance Measures	
1. Increase the number of respite grants awarded in the Lower Savannah Region by 3% by working with the Office on aging to advocate for additional state and federal funding to meet the needs of the growing senior population in the Lower Savannah Region. 2. Expand the number of family caregiver support recipients by 5% annually 3. Increase the number of outreach events by 5% annually. 4. Increase utilization of Seniors raising children funding by 5% 5. Increase partnerships and collaborations with other human-service organizations by 3%	
Strategies and Actions	
1. Increase community awareness with more outreach programs in the Hispanic community and other aging communities. 2. Utilize the agency's website and other social media sites to increase awareness. 3. Visit with providers to network and inform of policy and procedures that are current. 4. Collaborate with all healthcare organizations, senior centers, and churches to educate about our programs that are available within the community. 5. Work with schools to educate about the SRC program and ensure seniors that are raising children are aware of the services available.	
Challenges and Barriers	
1. Managing time and prioritizing caseloads. 2. The grant period is not long enough for some caregivers to use the entire grant. 3. Funding for Seniors Raising Children should be increased due to inflation and should include tech devices needed for school. 4. A cap should be in place for the amount all home health providers charges. 5. Overload of applications coming from home health agencies not the actual caregiver. 6. Families wanting to be caregivers and not go through a licensed provider.	

2025 Update Regional Objective 2.6 The LSCOG AAA/ADTRC staff works to educate healthcare agencies and human service professionals regarding the eligibility process

for Family Caregiver Support services. Staff encourages that all referrals be made by the actual caregiver. This will greatly reduce the number of applications received as applications and/or assessments cannot be submitted or completed without the caregiver's knowledge or consent.

Regional Objective 2.7	Home Care – Homemaker Programs
Annual Performance Measures	
1. The AAA will allocate funds for home care programs like Homemaker services for each county in the PSA. 2. The AAA will monitor contractors of homemaker programs to ensure efficiency so that as many seniors as funds allow are served to reduce the number of seniors on waiting lists.	
Strategies and Actions	
1. The AAA will promote the homemaker program in the region through outreach coordination with AAA Staff. 2. The AAA will analyze the cost effectiveness and manageability for each county Homemaker Program to be consumer choice whereas the client chooses the provider.	
Challenges and Barriers	
1. In-Home Service providers face challenges with retaining staff as fewer people are willing to work in other people's homes or be employed for task society deems to be menial. This impacts the agency's ability to take on more clients to be serve, increases wait times, and results in poor customer satisfaction.	

2025 Update Regional Objective 2.7 The LSCOG AAA/ADTRC will allocate funds for Homemaker services in each county within the region and will monitor contractors of homemaker services to ensure program efficiency. The LSCOG AAA/ADTRC program staff will coordinate with contractors, Assessors, IR&A, community partners, and other human service organizations to promote Homemaker services as a consumer choice program within the PSA. The LSCOG AAA/ADTRC will work to prevent service interruptions, unsatisfactory service delivery, and increased wait times by monitoring and maintaining a current approved provider list for each county.

State Plan Goal 3	Ensure the rights of older adults and persons with disabilities and prevent their abuse, neglect, and exploitation through the State Long Term Care Ombudsman Program, and elder abuse awareness and prevention activities including legal services and the Vulnerable Adult Guardian ad Litem program.
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State Plan Objective 3.2	Legal Assistance Program
Annual Performance Measures	
State Plan – Increase the number of outreach activities directed at the most vulnerable senior victims of abuse, neglect, and exploitation.	
State Plan – Increase the number of formalized partnerships between aging/disability and elder rights groups.	

State Plan – Develop and implement a continuous quality improvement component within the program.
Strategies and Actions
Challenges and Barriers

State Plan Objective 3.3	Long Term Care Ombudsman Program
Annual Performance Measures	
State Plan – Increase and efficiently track the resident satisfaction outcomes and complaint resolution rate by 5% annually.	
State Plan – Increase the number of quarterly visits to facilities by Ombudsmen representatives by 5% annually.	
State Plan - Increase the number of trained Volunteer Ombudsmen by 5% annually.	
State Plan – Each local Ombudsman program will conduct eight educational trainings for residents/families on long-term care services and/or developing self-advocacy skills.	
State Plan – Improve targeted educational activities that raise awareness of the Ombudsman program in the communities by 5% annually.	
State Plan – Expand the number of Resident and Family Councils by 5% annually.	
Strategies and Actions	
Challenges and Barriers	

Regional Objective 3.2	Legal Assistance Program
Annual Performance Measures	
1. Promote World Elder Abuse Awareness Day through at least one organized, annual outreach or education event. 2. Maintain contractual or partnership relationship(s) with one or more legal services entity to provide direct legal assistance or consultation to seniors. 3. Conduct annual quality assurance monitoring of the legal services program under contract with the AAA to include client satisfaction surveys.	
Strategies and Actions	

1. AAA staff will develop relationships with community outreach officers in county sheriff's offices or larger municipalities law enforcement offices.
2. Connect interested local attorneys with SC Legal Services to become a partner in the Private Attorney Involvement program.
3. Research other legal services/ pro bono programs to refer callers who decline to use the contracted provider or who are not age eligible for OAA services.
4. AAA staff will develop a performance survey for clients once their case is closed, that asks about quality of the program from their first step, such as calling into SCLS or the AAA, until the closure of their case.

Challenges and Barriers

1. Seniors do not realize the issue they have can be resolved with legal help.
2. Communication barriers between legal services and the client due to lack of understanding of the legal intake process.
3. Delay in getting legal services started due to lack of available attorneys in the region.

2025 Update Regional Objective 3.2 There are no updates to this objective.

Regional Objective 3.3 Long Term Care Ombudsman Program

Annual Performance Measures

1. Increase and efficiently track the resident satisfaction outcomes and complaint resolution rate by 5% annually.
2. Continue to complete 100% of all quarterly visits to nursing homes and community residential care facilities
3. Increase the number of trained Volunteer Ombudsmen by one new person annually.
4. Each local Ombudsman program will conduct eight educational trainings annually for residents/families on long-term care services and/or developing self-advocacy skills.
5. Improve targeted educational activities that raise awareness of the Ombudsman program in the communities by 15% annually.
6. Expand the number of Resident and Family Councils by 20% annually.

Strategies and Actions

Goal 1 Strategies and Actions

- Following up with residents and/or resident representatives when a case is completed to see if the complaints have been resolved or not resolved.
- All data related to complaint disposition is being accurately and timely recorded in the state approved database.
- Using the state approved database to make the tracking of the complaint dispositions more efficient.

Goal 2 Strategies and Actions

- Visits will be made quarterly to each licensed nursing home and community residential care facility in the region by LTCOP staff and/or Volunteer Ombudsmen.
- Continue recruitment for new Volunteer Ombudsmen.

Goal 3 Strategies and Actions

- Coordinate and/or participate in one volunteer recruitment event two times per year.
- Use new avenues of volunteer recruitment such as social media, volunteer recruitment websites, and flyers and posters in public spaces.

Goal 4 and 5 Strategies and Actions

- During routine visits to facilities, speak to facility staff about any upcoming family meetings and ask to participate in those meetings.
- Network with local organizations, clubs, churches, etc., about the Ombudsman program and provide them with materials about the program and offers to speak about the program at upcoming events or meetings.
- Work with colleagues in the AAA to see how we can work together in providing information about our program in their outreach events.
- Develop better materials for families and the community that better explains the purpose of the Ombudsman program.
- Increase the number of education activities for community seniors and residents during Older American's Month (May), Residents' Rights Month (October), and for World Elder Abuse Awareness Day in June.

Goal 6 Strategies and Actions

- Learn what facilities in the region have Resident and/or Family Councils.
- Develop relationships with Resident Council President's at each facility during quarterly visits.
- Provide each Resident Council President with materials on how the Ombudsman can be involved in Resident Council meetings and how to get in contact with the local Ombudsman to invite us to a meeting.
- Develop materials that can be provided to families during quarterly visits about Family Councils.
- Provide families and friends of residents with information about Family Councils through outreach via letters, social media, speaking engagements, and any other outreach activities.

Challenges and Barriers

- Limited Ombudsman staff
- The state requirements for Ombudsman staff such that we sound more like investigators instead of advocates, which is what the OAA intended for the Ombudsman program.
- Increases in caseload, decrease the amount of time that can be given to quarterly visits, outreach opportunities, and volunteer training.
- More advanced training requirements by the ACL for Volunteer Ombudsmen.

2025 Update Regional Objective 3.3 There are no updates to this objective.

Attachment A- Performance Measures Template

Performance Measure		Year Prior	FY23	FY24	FY25
PM 2.2.1: Increase beneficiary contacts by 5% annually	Achieved?		Yes	No	No
	Target/Goal		1075	1128	1184
	Actual	1024	1230	609	258
	Comment (?)				No Full-time SHIP staff in position
PM 2.2.2: Conduct 3 Medicare/ Insurance Counseling Outreach contacts per quarter	Achieved?		Yes	Yes	No
	Target/Goal		607	637	668
	Actual	578	1939	1266	8
	Comment (?)				No Full-time SHIP staff in position
PM 2.2.3: Increase contacts with Medicare beneficiaries under 65	Achieved?		No	No	No
	Target/Goal		43	45	47
	Actual	41	39	27	19
	Comment (?)				No Full-time SHIP staff in position
PM 2.2.4: Increase number of contacts to rural beneficiaries	Achieved?		No	No	No
	Target/Goal		245	257	270
	Actual	233	232	248	119
	Comment (?)				No Full-time SHIP staff in position
PM 2.2.5: Increase number of contacts with new to Medicare beneficiaries and beneficiaries during Open Enrollment Period.	Achieved?		Yes	No	No
	Target/Goal		787	826	867
	Actual	750	811	346	227
	Comment (?)				
PM 2.2.1 Increase the number of contacts accessing I&R/A services by 5%	Achieved?				
	Target/Goal		5328	5594	5874
	Actual	5074			2109
	Comment (?)				
PM 2.1.2 Increase the I&R/A outreach contacts by 5%	Achieved?				
	Target/Goal		45	47	49
	Actual	43			
	Comment (?)				

PM 1.1.1: Monitor contractors annually and submit written reports to SCDOA.	Achieved?		Yes	Yes	Yes
	Target/Goal	8	8	8	8
	Actual		8	8	8
	Comment (?)	Monitoring of completed;written reports pending submission.			

PM 2.3.1: Operational Group Dining and Home Delivered Meal Nutrition Programs in each county of the PSA.	Achieved?		Yes	Yes	Yes
	Target/Goal	All	ALL	ALL	ALL
	Actual	ALL	ALL	ALL	ALL
	Comment (?)				

PM 2.3.1: Operational Essential Transportation for shopping and medical appointments in each county of the PSA.	Achieved?	No	No	No	No
	Target/Goal		6	6	6
	Actual	4	4	4	4
	Comment (?)	Bamberg and Orangeburg have no contracted transportation.	Bamberg and Orangeburg have no contracted transportation.	Bamberg and Orangeburg have no contracted transportation.	Bamberg and Orangeburg have no contracted transportation.

PM 2.7.1: Provision of Homemaker services in each county of the PSA by direct contract with a single entity or via consumer choice with agreements with multiple companies.	Achieved?				
	Target/Goal		6	6	6
	Actual	6	6	6	6
	Comment (?)	Aiken and Allendale operated as a consumer choice model			Homemaker services operates as a consumer choice model throughout region

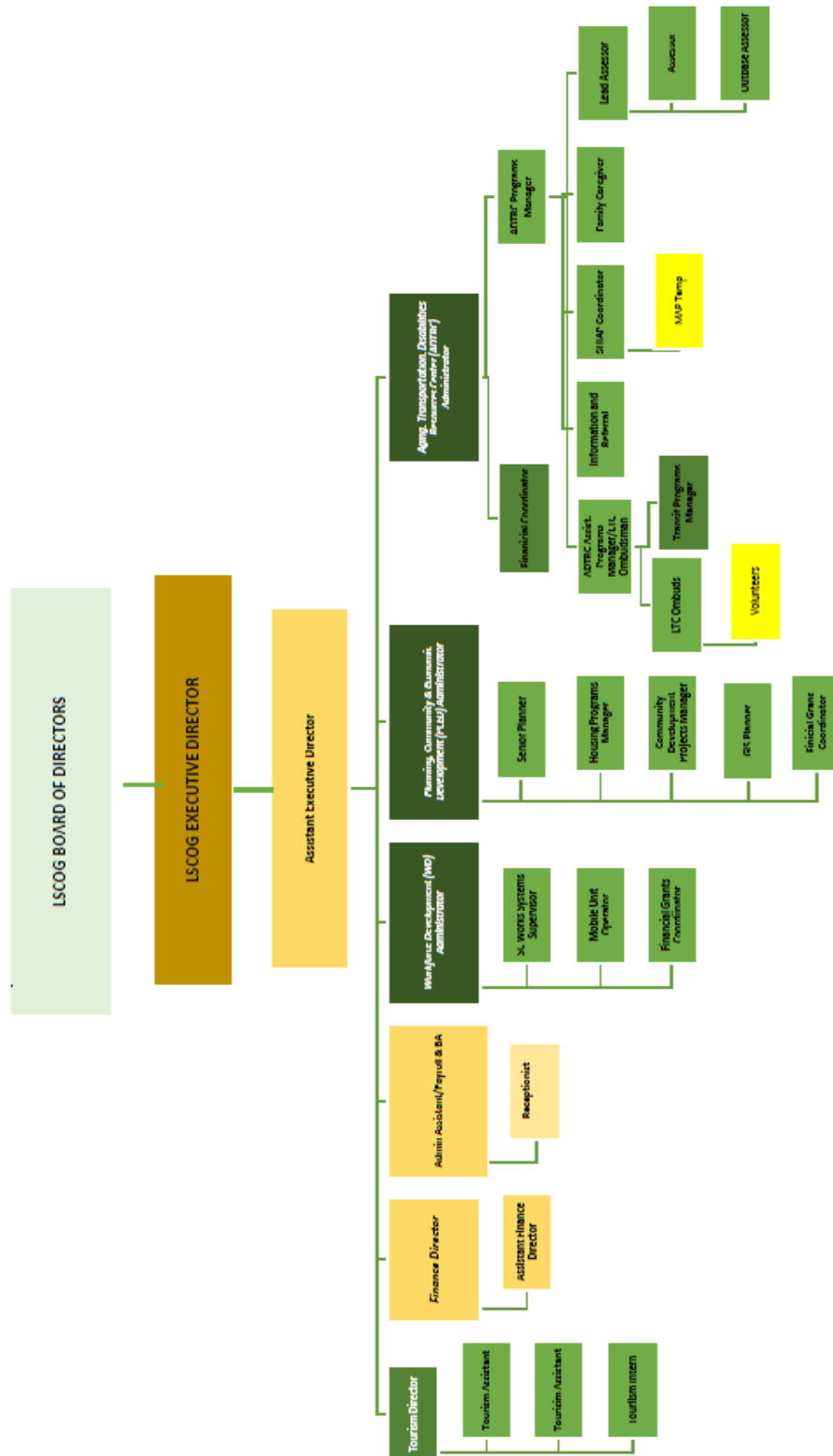
PM 2.7.3: The number of unduplicated homemaker clients served across the region will increase by at least 5%.	Achieved?				
	Target/Goal		184	194	203
	Actual	175			
	Comment (?)	Aiken and Allendale operated as a consumer choice model			

PM 2.4.1: At least one Evidenced Based Health Promotion program or Evidenced Based Wellness Program will be offered in each county of the PSA.	Achieved?		No	Yes	Yes
	Target/Goal		6	6	6
	Actual	5	5	6	6
	Comment (?)	Allendale does not have EBHP.			
PM 1.2.1: Increased the number of seniors assessed annually by 5%	Achieved?				
	Target/Goal		1857	1950	2048
	Actual	1769			1856
	Comment (?)				

PM 1.2.2: Reduce the number of seniors on waiting list for services annually by 3%	Achieved?				
	Target/Goal		604	586	568
	Actual	623			
	Comment (?)				
PM 2.6.1: Increase the number of respite grants by 3%	Achieved?				
	Target/Goal				
	Actual	1,054	1085	1116	1147
	Comment (?)				
PM 2.6.2: Expand the number of family caregiver support recipients by 5% annually	Achieved?				
	Target/Goal				
	Actual	1,109	1170	1231	1292
	Comment (?)				
PM 2.6.3: Increase the number of outreach events by 5% annually.	Achieved?				
	Target/Goal		15	20	25
	Actual	10			
	Comment (?)				
PM 2.6.4: Increase utilization of Seniors raising children funding by 5%	Achieved?				
	Target/Goal		40	62	84
	Actual	21			
	Comment (?)				
PM 2.6.5 Increase partnerships and collaborations with other human-service organizations by 3%	Achieved?				
	Target/Goal	10	13	16	19
	Actual				
	Comment (?)				
PM 3.3.2: Complete routine visits to 100% of all licensed long term care facilities each quarter.	Achieved?				
	Target/Goal		100%	100%	100%
	Actual	83%			
	Comment (?)				

PM 3.3.3: Increase the number of trained Volunteer Ombudsmen by one new person annually.	Achieved?				
	Target/Goal		3	4	5
	Actual	2			
	Comment (?)				
PM 3.3.4: Conduct eight educational training sessions annually for residents and/or family members to improve self advocacy skills.	Achieved?				
	Target/Goal		8	8	8
	Actual	7			
	Comment (?)				
PM 3.3.5: Increase the number of educational programs to raise awareness of the Ombudsman program in the communities by 15%.	Achieved?				
	Target/Goal		8	9	10
	Actual	7			
	Comment (?)				
PM 3.3.6: Increase the number of active Resident and Family Councils by 20% annually.	Achieved?				
	Target/Goal		3.5	4	5
	Actual	3			
	Comment (?)				

Attachment B- Organizational Information



Attachment C-Regional Aging Advisory Council (RAAC)

REGION LOWER SAVANNAH Mark with an "X" all that apply

		Age 60+	<50%	Program Beneficiary	Public Official	Minority	Rural Resident	Family Caregiver	Member of the Business Community	Veterans Organization	Member of the Disability Community	General Public	Provider Organization
RAAC Member Name	County of Residence												
William Price	Aiken	X				X			X		X	X	
John Veldman	Aiken	X						X	X			X	
Barbara Lewis	Allendale	X					X					X	
Willia Jennings	Allendale	X		X			X						
Tawni Major	Allendale	X					X						
Sharon Hammond	Bamberg	X			X	X	X	X					
Betty Ray	Barnwell	X					X						
Peggy Kinlaw	Barnwell	X					X						
Shayla Jenkins	Calhoun				X	X							
Earline Sistrunk	Calhoun	X					X						
Janie Cooper-Smith	Orangeburg	X			X			X				X	
Jeanette Goodwin	Orangeburg					X	X						X
Jimmy Boland	Orangeburg	X											X

Attachment D-Fiscal

Lower Savannah AAA/ADTRC received additional HCBS Funds which enabled contractors in our region to continue to provide much-needed OAA services to seniors. Contractors were able to offer both home delivered and congregate meals, they continued to operate congregate meal sites and provide transportation services. However, the additional HCBS funding did not enable providers to add new clients to services. The number of clients on waiting lists did not decrease, despite the infusion of additional funding.

Lower Savannah AAA/ADTRC also received Regional Ombudsman Funds for new regions funded in 2026. Lower Savannah anticipates hiring a qualified candidate for the Regional Ombudsman position in the immediate future. Currently, the employment opportunity is posted on the agency's website. There have been no interested applicants at this time.

The Lower Savannah Council of Government AAA/ ADTRC competitive procurement process has no significant changes in information for the Lower Savannah Region.

Action by LSAAA/ADTRC staff may include procurement and distribution of supplies, assistance with procurement of alternate food providers, and assisting with distribution and packing meals routinely and during the emergency to assist local meal program providers. During an emergency, the Regional Long Term Care Ombudsman Program Staff will carry out specific activities as detailed in Section V of the Area Plan as it relates to ensuring the safety and wellbeing of residents in long term care facilities.

The role of the LSAAA/ADTRC in a declared state of emergency or disaster is to help distribute accurate information to the public as provided to us by the entities in charge of emergency management at the local level, to assist and support local providers of service and local emergency management officials in looking out for the well-being and safety of our target populations.

For purchases less than \$2500 and the cost is reasonable for the item or service requested, only one quote is needed.

For purchases \$2501-\$10 000, obtain written quotes from three vendors. The purchase should be made from the vendor with the lowest quote and the capacity to deliver or implement services.

Recently, there was a Request for Proposal for Catering Services published for the Lower Savannah region.

Attachment E- ARP Funding Successes

Based on the 2022 needs assessment, the Lower Savannah AAA/ADTRC implemented several new initiatives to address unmet needs identified within the region. The availability of American Rescue Plan (ARP) funding supported the develop of the following services.

Home Chore

Programs offered under home chore included, Personal Care, Lawn Care, and Ramps.

- Personal Care offered services to seniors who required more extensive care with ADLs, such as bathing, dressing, toileting, without any medical assistance provided.
- Lawn Care offered routine lawn maintenance to include mowing, edging, trimming, weed eating, and light debris removal.
- Ramps offered safe accessibility, while promoting independence for seniors with mobility impairments.

Weekend Meals (Home Delivered Meals)

Provided an additional weekend meal to current home delivered and congregate meal participants, throughout all six counties, who were determined as high nutritional risk by meeting any of the following criteria;

- No access to nutritious meals each day.
- A recent hospitalization
- Lost or gained a significant amount of weight.
- Resides in a designated food desert.

Evidence-Based

Bingocize was implemented as a new Evidence-Based program within several congregate meal sites throughout the region. Nutrition site staff were able to complete the required training and certification to facilitate Bingocize as an EBP.

Special Projects

- Dental Care services provided tooth extractions, fillings for cavities, dentures, preventative care, other situations to be considered.
- Hearing aids services provided hearing exams, mold/fitting of hearing aid, hearing aids, and follow up visits.
- Pest control/management services provided routine pest control treatments to eliminate infestations and preventative maintenance.
- Air Conditioning/Heating Units provided a safe and reliable means for seniors to cool and heat their homes due periods of extreme weather.

Family Caregiver Support

The Family Caregiver Support program purchased Trualta, a software program which provided caregivers with 24/7 access to caregiver services, including support groups and caregiver training. Trualta served as an invaluable tool to help build skills to manage caregiving, improve confidence, reduce stress, and prevent burnout by learning care skills.

Each program implemented utilizing the ARP funding proved to be very successful, yielding positive feedback from those who benefitted. Program recipients expressed gratitude for having access to these much-needed services, citing that otherwise, they would have been unable to afford them. Several recipients also expressed an increase in their self-confidence, as they were able to address dental issues and hearing issues, that made engaging with others less intimidating. Others were appreciative to have a safe access to their homes and expressed a reduction in anxiety from fear of falling.

The greatest challenges faced in implementing several of these new programs, were directly related to the inability to identify service providers in each region, as well as growing waiting lists for individuals assessed for Home Chore and Special Project programs. As ARP funding allowed LSCOG AAA/ADTRC to make a huge impact on the lives of many seniors in our region, the demand for these services further demonstrated the need for increased sustainable funding to support programs and services.

