Active Aging Center

RFP for Coronavirus State and Local Fiscal Recovery Funds

Buncombe County Government

200 College St Suite 300 Asheville, NC 28801

Jen Teague

Printed On: 12 April 2022

jennifer.teague@buncombecounty.org

Application Form

Question Group

Buncombe County requests proposals for projects to help the community recover from and respond to COVID-19 and its negative economic impacts.

Buncombe County has been awarded \$50,733,290 in Coronavirus State and Local Fiscal Recovery Funds (Recovery Funding), as part of the American Rescue Plan Act. To date, Buncombe County has awarded projects totaling \$23,093,499, leaving a balance of \$27,639,791 available to award.

Visit <a href="http://www.buncombecounty.org/recoveryfundinghttp://www.buncombecounty.org/recoveryfundingwww.buncombecounty.org/recoveryfundinghttp://www.bu

This infusion of federal resources is intended to help turn the tide on the pandemic, address its economic fallout, and lay the foundation for a strong and equitable recovery.

Buncombe County is committed to investing these funds in projects that:

- Align to county strategic plan and community priorities
- Support equitable outcomes for most impacted populations
- Leverage and align with other governmental funding sources
- Make best use of this one-time infusion of resources
- Have a lasting impact

Proposals shall be submitted in accordance with the terms and conditions of this RFP and any addenda issued hereto.

Click here for the full terms and conditions of the RFP

Organization Type*

Public

Nonprofit documentation

If nonprofit, attach IRS Determination Letter or other proof of nonprofit status.

Name of Project.*

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Active Aging Center

New/Updated Proposal*

Is this a new project proposal or an updated version of a proposal submitted during the earlier (July 2021) Recovery Funding RFP?

Updated version of previously submitted proposal

Amount of Funds Requested*

\$8,010,257.00

Category*

Please select one:

- Affordable Housing
- Aging/Older Adults
- Business Support/Economic Development
- Environmental/Climate
- Homelessness
- K-12 Education
- Infrastructure and/or Broadband
- Mental Health/Substance Use
- NC Pre-K Expansion
- Workforce

Aging/Older Adults

Brief Project Description*

Provide a short summary of your proposed project.

Requesting funding to build an Active Aging Center in Buncombe County. The Active Aging Center is a collaborative, integrated service delivery model with a goal to provide a "hub and spoke" model for service delivery older adults, caregivers, and community members to access services and supports to assist all people to "age in community". The proposed Active Aging Center (AAC) would address many of the social determinants of health impacting older adults including food insecurity, transportation issues, social isolation, and access to activities for health and wellness, while also providing intergenerational activities such as adult day care services, childcare services, senior center and congregate nutrition. This center will be centrally located and will bridge some of the gaps we saw during the pandemic by serving as a location for testing, vaccinations, food delivery, essential service item pick-ups and more. Project is estimated to be 67,000 square feet of shared mixed-use space.

Project Plan*

Explain how the project will be structured and implemented, including timeframe.

The concept and operations structure: Buncombe County owns the building and hires an AAC Coordinator. All other service providers utilizing the space will remain independent non-profits who hire, supervise their own staff, and manage their own programming. The AAC Coordinator will be responsible for

specific tasks to ensure the ongoing success of the AAC as a whole, not focused on a specific service or agencies.

Services and programs that will be co-located in the space are:

- Adult Day Care/Day Health
- Aging Service Provider (caregiver support, information assistance, and housing services,

Medicare/Insurance Services)

- Clinical Services/Pharmacy and Medication Assistance
- Nutritional support through congregate nutrition, café and food pantry
- Technology and Educational Training space (computer lab, classes)
- Health and Wellness Activities (physical exercise, evidence based health promotion)
- Childcare to provide for intergenerational activities
- Socialization and Volunteer opportunities

Examples of service providers that have expressed interest in providing the above services in the AAC are: MountainCare, Council on Aging of Buncombe County, Land of Sky Area Agency on Aging, MANNA, Verner Center for Early Learning, and ongoing collaborations with the City of Asheville Parks and Recreation, Buncombe County Library Services and MAHEC.

Historical Timeline:

- ~2018 Mission Hospital consulting staff attend the Aging Coordinating Consortium and recommend a streamlined approach for offering aging services, recommendation for a centralized center
 - ~May 2019: cross section team of aging service professionals met to discuss the concept of an AAC.
- ~June 2019: steering team formed led by: Buncombe County Health and Human Services, Council on Aging of Buncombe County and MountainCare.
- ~November 2019: funding secured WNC Bridge Foundation (\$95,000) for consultant (IBIS Enterprises) to complete a feasibility study and business plan
- ~Jan-Dec 2020: listening sessions, research/interviews with similar counities and projects were conducted, stakeholder interviews were completed, and planning and development ensued
- ~May 2021: finalized business plan (163 page document including costs, ownership/operation recommendations, research completed, etc) was provided
- ~June 2021: AAC Steering Committee recommended Buncombe County be the owner/operator of the building
 - ~August 2021: HHS Board votes unanimously to support BC HHS as the owner/operator
 - ~November 2021: HHS submits application to City of Asheville for ARPA funds
- ~December 2021: County Management Team meets with UNC Asheville (UNCA) Chancellor and Leadership to discuss viability for the AAC to be on the UNCA Millennial Campus
- \sim January 2022-Present: HHS Director meeting with UNCA staff to discuss logistics of the AAC being on UNCA Campus

Next Steps:

- ~Finalize location
- ~Formalize partnership agreements
- ~Obtain/secure funding
- ~Projected opening date of July 2024.

Statement of Need*

Describe the need that this project will address. Include data to demonstrate the need, and cite the source of the data.

The 2020 NC Aging Profile states that 28% (75,235) of Buncombe County's population is currently age 60+ and this number is expected to continue to increase over the coming years. NC ranks as the 9th oldest state by population age in the nation and WNC has the fastest growing older adult population in the state. American Association of Retired Persons (AARP) data shows that 90% of all surveyed individuals want to "age in place". The AAC would help individuals in meeting this goal and also supports Buncombe County's Strategic Plan of protecting residents ability to age in place.

With limited resources and a growing population the aging services network understands the need to streamline efforts. At present many individual organizations pay for a nutrition coordinator, volunteer coordinator, separate wi-fi system, etc. By co-locating organizations many of these costs can be drastically reduced allowing for more funds to go to direct services.

Buncombe County is one of only a handful of counties that does not have a model similar to the AAC. Ashe, Forsyth, Durham, Chatham and Orange counties were all interviewed during the consulting phase of this project. The AAC is meant to serve as a "hub" to support the community centers throughout the County, however, it is important to note that none of the community centers throughout the County support this level of service delivery and many were built before 1950. Policy regulations and program requirements make it impossible for many of these services to be provided in rural areas of the county. However through the "hub and spoke model" organizations will be able to pair together and offer periodic services to rural community centers. Many of smaller community centers currently have no staffing and no coordinated services.

Link to COVID-19*

Identify a health or economic harm resulting from or exacerbated by the public health emergency, describe the nature and extent of that harm, and explain how the use of this funding would address such harm.

National Institute of Health (NIH) states "older adults have been disproportionately impacted by COVID-19, with higher susceptibility to severe illness, hospitalization, and death. In the US, those who are age 65+ comprised about 80% of all COVID-19 deaths...worldwide, estimates suggest that 95% of pandemic related deaths have been among those age 60 and older." Based on these statistics it is clear to see that Covid-19 had the greatest health risk to those in the age bracket that the AAC would serve. Senior Centers, congregate meal sites, and Adult Day sites had to close, yet the service providers had to figure out a way to continue to provide these important safety net programs for those most vulnerable in our community. While the pandemic brought the effect of social isolation to the forefront for many, the impact of social isolation is something that aging services providers have long understood. NIH reports that there is a growing body of literature that confirms "social isolation has a significant negative influence on the mental and physical health outcomes, with social isolation and loneliness associated with higher risk of depression, dementia, stroke, and mortality." Experts state that "being socially connected is critical to health and survival" yet recent research notes the severe impacts of Covid-19 on the "connectedness among seniors" and reports "the pandemic has worsened social isolation among older adults." In addition, research shows that social isolation has the same impact on a person's health as smoking a half a pack of cigarettes a day. In some ways, the pandemic has weakened the aging services systems and impacts are still being felt. In April 2022, one of the Adult Day providers has had to close leaving families without options. The pandemic has created increased costs for service delivery and has left organizations struggling to cover staff costs, hire new employees and cover the day to day expenses of running programs.

Population Served*

Define the population to be served by this project, including volume and demographic characteristics of those served.

Of the 75,235 individuals aged 60+, over 28% (14,000+) live alone and over 31% (15,000+) were living with one or more disabilities. The objective of the center is serve the current older adult population while also planning to expand services as the older population and their needs grow. It is expected by 2040 that 32% (106,938) of the county will be 60+. While the AAC's primary focus will be on providing services to individuals 60+, caregivers and community members, there will be many services for individuals between ages 18-59. Adult Day Care/Day Health is offered to any individual age 18+. Insurance, Medicare, and economic services assistance/education will be offered onsite and would be available to individuals who are eligible regardless of age. Caregivers of all ages will be offered support, education, and respite services. The onsite food pantry will be available to anyone in the community and will remain open during normal business hours which is unlike many if/not all food pantries currently in the County. The demographic make-up of the

participants would mirror the demographic make-up of those 60+ in the County including serving Veterans, LGBTQI+ (Lesbian, Gay, Bi-sexual, Transgender, Questioning, Intersex), BIPOC (Black, Indigenous, People of Color), socio-economic status and zip codes. The space would be able to accommodate approximately 400 people a day. Buncombe County Parks and Rec (BCPR) reports their most frequent request from older adults is for a pickleball court and this is listed in the 5-year strategic plan. The AAC could be the physical location of the new pickleball court. The AAC could serve as a new location for BCPR indoor programming for seniors. With the creation of the AAC future public health services targeted at older adults can be offered through this one location including vaccinations for flu, Covid, pneumonia and other yearly shots as well as regular blood pressure check clinics, fall prevention efforts and blood sugar checks.

Results*

Describe the proposed impact of the project. List at least 3 performance measures that will be tracked and reported. If possible, include baselines and goals for each performance measure.

BC's 2025 Strategic Plan identifies a focus area of "Educated and Capable Community" having a goal of protecting "older residents' ability to age in place". Protecting one's ability to "age in place" is broad and includes ensuring services and supports are easily and efficiently accessible for older adults and their caregivers. The AAC's goal is to ensure that residents have the ability to age in place which ensures easy access to services and supports. The center will allow for reduced transportation trips as an individual and caregiver will be able to arrive at the AAC and participate in physical activity programs, access congregate nutrition, food boxes, medical care and socialization. The goal of the AAC is to provide assistance and support to meet all of an individual's social determinants of health needs.

Many of the programs offered in the AAC will be provided through the Home and Community Care Block Grant (HCCBG) funding (federal, state and local dollars) that support aging services such as congregate nutrition, senior center activities, adult day care and transportation. The services and programs are currently measured and will continue to be measured using a results-based accountability (RBA) framework (how much did we do, how well did we do it, is anyone better off). Specific performance measures would include number and impact for each of the following:

- # of aging services offered on site
- # of clients participating in each service, comparison to previous data prior to the AAC opening and the value impact to the individual
- # of trips provided by the HCCBG transportation provider (currently Mountain Mobility) and Asheville Regional Transportation (ART)
- Cost savings from providers that are co-located in the space (reduced overhead/administrative costs such as copier leases, telephone systems, wifi systems, etc)
 - # of clinical services offered on site
 - # of calls to the center requesting information and assistance

Evaluation*

Describe the data collection, analysis, and quality assurance measures you will use to assure ongoing, effective tracking of contract requirements and outcomes.

As mentioned above all services will be measured and monitored using an RBA framework. Data collection will include:

- Participant surveys
- Focus groups
- Advisory committee for participants of services to help develop future programming
- Review ARMS (Aging Resource Management System) data (or equivalent system if new system is purchased by the NC Division of Aging and Adult Services for use by providers): ARMS is the system used by aging service providers to track services delivered per client
 - Database tracking for all calls to the center requesting information and assistance

One of the frequent concerns heard by community members regarding aging services is they don't know where to call. Do they call Health and Human Services, Land of Sky Area Agency on Aging, Council on Aging, 2-1-1, or other aging services providers, etc.? While none of these are necessarily wrong, each of these service providers offer a small piece of the whole system. By developing the AAC and co-locating services under one roof, an individual would only need to call the AAC to get connected to services. This would decrease the current burden on older adults and their caregivers regarding accessing services. We would compare the current number of calls to each of the agencies listed above over the next 3 years and compare those to the number of calls received to the AAC once open. We believe this will help to streamline services for older adults and also decrease demand on other agencies.

Equity Impact*

How will this effort help build toward a just, equitable, and sustainable COVID-19 recovery? How are the root causes and/or disproportionate impacts of inequities addressed?

Older adults have been disproportionately impacted by Covid-19. Funding received from the American Rescue Plan should be allocated to support a long-term vision of meeting the needs of older adults.

In helping to create the vision and mission of the AAC, individuals from across Buncombe County have been surveyed, interviewed, and provided platforms to have their voices heard. It is important to the leaders of the AAC, that BIPOC have a say in the development of this project. The AAC's mission is to serve all individuals who seek to "age in place". As we continue to finalize the programming and services offered in the space, we have reached out to the BC Community Engagement Department to assist with continued surveys and focus groups. AAC leadership will survey individuals that come to the community markets and work with associations that are in historically African American communities to ensure that we are not assuming what types of services, classes, and supports should be offered without hearing the voices of our older BIPOC community members. In addition, we have met with individuals from Generation Plus, a program for members of the LGBTQI+ that are fifty years old and older to hear their thoughts and ideas on programming and services. The goal of the center would be to create a level playing field for all older adults. Many if not all of the exercise programs, classes, and technology supports would be offered at no cost. We know that older adults are the most heterogeneous group of people in society. With this diverse population comes unique opportunities for adults to share their skills, to bridge generations, and to bring together those with different backgrounds, beliefs, and lifestyles in a welcoming, knowledgeable and equitable capacity. The agencies involved know that this growing population requires diverse solutions and partnerships.

Project Partners*

Identify any subcontractors you intend to use for the proposed scope of work. For each subcontractor listed, indicate:

- 1.) What products and/or services are to be supplied by that subcontractor and;
- 2.) What percentage of the overall scope of work that subcontractor will perform.

Also, list non-funded key partners critical to project.

The AAC would not have any sub-contractors. Instead, this would be a collaborative center in which the County provides the space and hires the AAC coordinator to ensure that the building is open, lights are on, building is maintained, and activities are scheduled in certain spaces. Each entity within the center would operate independently and would determine their own programming and policies that fall within the scope and mission of the AAC. Each agency operating in the space would provide a critical and essential piece of the programming and services offered.

List of the key partners:

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- o Council on Aging of Buncombe County: Medicare counseling and education, congregate nutrition, information and assistance counseling, housing resources and home repair services, caregiver support, elder justice navigation, transportation, etc.
- o MountainCare: adult day care, adult day health, caregiver support, grief support programming, and wheelchair seating clinic.
 - Steering Committee
- o Land of Sky Area Agency on Aging: flex space in which staff from different programs could be onsite during the month to provide services
- o University of North Carolina Asheville: potential for partnership on their millennial campus and partnership with OLLI (Osher Lifelong Learning Institute)
 - o City of Asheville: discussions about offering senior center activities through Parks and Recreation
 - o MAHEC: opportunities to provide clinical services on-site
 - o YMCA: food and nutrition support and services
- o Buncombe County Library Services: technology classes, lending library and device check outs (laptops, wifi hotspots, etc), meeting rooms and quiet space
 - Additional conversations and partners that are not on the committee:
 - o Mountain Mobility to ensure transportation access
 - o Meals on Wheels to ensure partnership and no duplication
 - o Buncombe County Parks and Recreation for experiential activities, pickleball
 - o MANNA food bank for food pantry
 - o Verner Center for Early Learning: childcare

Capacity*

Describe the background, experience, and capabilities of your organization or department as it relates to capacity for delivering the proposed project and managing federal funds.

Buncombe County Health and Human Services (HHS) is the applicant for this project. Buncombe County HHS led by Director Stoney Blevins has the capacity and experience to bring this project to fruition. HHS has decades of experience working in the aging services arena. In FY 21, HHS became the "lead agency" for HCCBG funding (\$1.5 million in federal and state funds). These funds will be used to support many of the services provided within the AAC. As noted above, in August 2021, HHS board unanimously in support of HHS as the lead entity for this project. In November 2021, the HHS board voted unanimously to recommend that Buncombe County include the Active Aging Center as a project in the SY 23 Buncombe County Capital Plan.

Jen Teague, Program Manager for Aging and Adult Services is one of the members of the leadership team for the AAC. She currently manages and administers over \$4 million in contract funding through Buncombe County. She has experience administering federal funding and has worked as a coordinator for a similar AAC project in another county. Most recently, she was the original grant writer for the funding received from the WNC Bridge Foundation to hire the contractor and complete the business plan.

BCHHS will work with aging service providers who bring a depth of experience and knowledge to the field of aging services and who have the capacity and commitment to deliver this project. Buncombe County Government along with HHS has strong staff in finance that are able to manage and serve as the fiscal agent for the project.

Jen has also had conversations with the North Carolina Division of Aging and Adult Services staff who have vocalized support for this project and have offered to assist in identifying potential funding options to support the building costs for this project. In addition there is a letter of support from Land of Sky Council of Governments that states their support for this project.

Budget*

Provide a detailed project budget including all proposed project revenues and expenditures, including explanations and methodology. For all revenue sources, list the funder and denote whether funds are confirmed or pending. For project expenses, denote all capital vs. operating costs, and reflect which specific expenses are proposed to be funded with one-time Buncombe County Recovery Funds.

Download a copy of the budget form HERE. Complete the form, and upload it using the button below.

Recovery-Funds-budget-April 2022.xlsx

Special Considerations*

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Provide any other information that might assist the County in its selection.

Letter of Support BC Active Aging Center 7.13.21.pdf

The FY 22 NC State budget included \$5 million in funding for Forsyth Senior Services' new building and \$2 million for the Duplin County Services for the Aged new facility. It is likely that this project can obtain state funding however a commitment from the County would be needed to be able to move forward with a request to the state. In addition, the City of Asheville has posted their scores for their ARPA applications and the AAC project seems to be faring well, however, no final determinations have been made at this time.

In 2017, Buncombe County joined the World Health Organization and AARP's Network of Age-Friendly Communities. Since that time, Buncombe County has contracted with an Aging Plan Coordinator that oversees, manages, and facilitates the work of the Age-Friendly Action Plan (AFAP). The AFAP's primary focus is to ensure that older adults are safe, well, and engaged and the plan is aligned with the priorities and strategies of the County's Strategic Plan. The AAC would be step in the commitment that Buncombe County has made to be an age-friendly community.

The AAC is directly aligned with the County's Strategic Plan 2020-2025. The AAC aligns with the foundational focus area of Educated and Capable Community. While the AAC does have a primary goal of providing supports to ensure older adults have the ability to age in place, it has a secondary goal of ensuring that older adults are safe, healthy, and engaged in their community and aligns with the foundational priorities of Resident Well-Being.

The members of the AAC Steering Committee understand the importance of aligning the values of the AAC with the values of Buncombe County. Equity and collaboration are at the heart of the AAC as is shown in the diversity of the providers on the Steering Committee. This project will continue to build on community partnerships and will leverage those relationships to build an equitable, accessible, and inclusive center for all older adults in Buncombe County.

File Attachment Summary

Applicant File Uploads

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- Recovery-Funds-budget-April 2022.xlsx
 Letter of Support BC Active Aging Center 7.13.21.pdf

Coronavirus State and Local Fiscal Recovery Funds Proposed Project Budget

Organization Name:	Buncombe County Health and Human Services			
Project Name:	Active Aging Center			
Amount Requested:	\$8,010,257			

Proposed Project Revenue Funder		Amount	Confirmed or Pending?	Notes
Proposed Buncombe COVID Recovery Funds	\$	8,010,257.00	Pending	Construction costs as outlined below
State of North Carolina Government Budget Funding	\$	3,000,000.00	Pending	Can be submitted once project is appoved by Buncombe County (ex. of funding in prior years: FY 22 budget supported \$5 million for Forsyth Senior Services building and \$2 million for Duplin Senior Services facility)
Dogwood Health Trust	\$	2,750,000.00	Pending	Presentation to DHT staff on project concept, leverage grant opportunities have been discussed
Foundation Support	\$	2,750,000.00	Pending	Steering committee is confident of foundation support based on foundation support for similar projects around the state
Private Funding	\$	2,459,824.00	•	Strong community support is evident to support the project (numerous conversations have occurred with potential private funders)
City of Asheville/ARPA funding	\$	2,828,880.00	Pending	Application submitted to cover cost of the senior center amenities
List other sources here				
List other sources here				
List other sources here				
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List other sources here				
List other sources here		·		
Total	1 \$ 2	21,798,961.00		

	Proposed				Capital or Operating	
Proposed Project Expenses	Recovery Funds	Other Fun	ds	Total	Expense?	Notes
Adult Day Care/Day Health Sq. Ft Cost		\$ 4,593,8	00 00			square footage space, funds raised through foundation/capital
Adult Day Gale/Day Fleatill Sq. Ft Gost		φ 4,595,0	0.00	\$ 4,593,800.00	capital	campaigns
Aging Services Organizational Offices		\$ 1,058,2	00 00			square footage space, funds raised through foundation/capital
		Ψ 1,000,2	0.00	\$ 1,058,200.00	capital	campaigns
Home Delivered Meals Space		\$ 165.0	00 00			square footage space, funds raised through foundation/capital
		Ψ 100,0	165,000.00	\$ 165,000.00	capital	campaigns
Childcare Space		\$ 825.0	00 00			square footage space, funds raised through foundation/capital
		Ψ 020,0	825,000.00	\$ 825,000.00	capital	campaigns
Senior Center Amenities		\$ 2,828,8	30 00			Activity Space, Educational Space (requested through City of
				, ,,	capital	Asheville ARPA Application)
Timeshare Space		\$ 440,0			capital	square footage space
Furniture, Fixtures, Equipment		\$ 906,5		· · · · · · · · · · · · · · · · · · ·	capital	furniture, fixtures, equipment
Common Areas		\$ 2,971,2	50.00	\$ 2,971,250.00	capital	square footage space
Administrative Space	\$ 658,000.00			\$ 658,000.00	capital	square footage space
Buncombe County Office Space	\$ 77,000.00			\$ 77,000.00	capital	square footage space
Parking, Driveways	\$ 1,728,000.00			\$ 1,728,000.00	capital	parking, driveways
General Contractor Fees	\$ 1,094,711.00			\$ 1,094,711.00	capital	contractor fees
Contingency	\$ 1,149,446.00			\$ 1,149,446.00	capital	Contingency
Planning, Design, and Other Fees	\$ 3,303,100.00			\$ 3,303,100.00	capital	Planning, Design, and Other Fees
List expenses here				\$ -		expenses here
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List expenses here			\$ -	expenses here
Total			\$ 21,798,961.00	

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June 13, 2021

Jennifer Teague, M.A.
Buncombe County Health and Human Services
Aging and Adult Services Program Manager
40 Coxe Avenue
Asheville, NC 28801

Dear Ms. Teague:

Land of Sky Regional Council is writing this letter of support for Buncombe County to consider utilizing American Rescue Plan Act (ARPA) funds to support the initiative for an Active Aging Center (AAC). Recognizing that traditional federal and state aging funding sources do not allow for the purchase or construction of such a center, we are hopeful that funds available through ARPA would support this project.

The Active Aging Center will take a collaborative and cohesive approach to wrap around services for older adults and caregivers. Each of the services "under one roof" will address some aspect of the social determinants of health, whether that be a nutritional need, a physical/social wellness need, a medical need, a housing/home repair need, etc. The concept of the "one-stop shop" means that individuals will not need to travel to multiple locations for services.

As a member of the Steering Committee, we recently voted to move forward with the Buncombe County owner and operations model where the county would maintain the facility, hire an AAC Coordinator, and would work in collaboration with non-profit partners to arrange for programming. Land of Sky is in support of this recommendation and believes this is an exciting step in this process. This type of center is much needed as the older adult population in Buncombe County continues to grow.

Thank you for your consideration.

Sincerely,

Nathan Ramsey Executive Director LeeAnne Tucker

Area Agency on Aging Director

Lee anne Fucker