

Wyoming Department of Health
Aging Division, Community Living Section

Older Americans Act

**Title III-D Disease Prevention and Health
Promotion Services**

Policies and Procedures



I. Disease Prevention and Health Promotion Services

A. Background: The Wyoming Department of Health Aging Division receives Federal funding through the Older American’s Act (OAA) Reauthorization 2016 Title III D to provide disease prevention and health promotion services. Title III D funding has been provided since 1987 to states and territories based on their share of the population aged 60 and over for programs that support healthy lifestyles and promote healthy behaviors.

Since 2016, Evidence-based programs are now required for Title III-D-funded activities. This change followed a decade of progress by the aging services network to move efforts toward implementing disease prevention and health promotion programs that are based on scientific evidence and demonstrated to improve the health of older adults. The federal FY-2012 Congressional appropriations law included, for the first time, an evidence-based requirement. In response to the new requirement ACL developed an evidence-based definition to support the transition.

B. Evidence Based Requirements ACL provides two ways to assess whether Title III-D funds can be spent on a particular program:

1. The program meets the requirements for ACL’s Evidence-Based Definition
2. The Program is considered an “evidence-based program” by any operating division of the U.S. Department of Health and Human Services (HHS) and is shown to be effective and appropriate for older adults:
 - a. HHS has [Eleven Divisions](#).
 - b. An HHS division has included the program on a registry of evidence-based programs, or has reviewed it and deemed it evidence-based.

C. Purpose of the Program:

Title III-D of the OAA was established in 1987. It provides grants to states and territories based on their share of the population aged 60 and older for programs that support healthy lifestyles and promote healthy behaviors. Evidence-based disease prevention and health promotion programs reduce the need for more costly medical interventions. Priority is given to serving older adults living in medically underserved areas of the state and those who are of greatest economic need.

II. Title III-D Program Policies

A. Use of Title III D Funds for evidence-based programs.

Funds for the Title III D program are administered by the Wyoming Department of Health, Aging Division, and Community Living Section through a grant from ACL. In FY-2012, the Title III D appropriation legislation required OAA Title IIID funds to be used only for programs

which have been demonstrated through rigorous evaluation to be evidence-based and effective. The legislation for this mandate is in Section 361 Older Americans Act of 1965 Reauthorization Act of 2016 (P.L. 114-144) and is referenced at the ACL website: (<https://www.acl.gov/index.php/programs/health-wellness/disease-prevention>).

In order to meet these funding mandates, the Wyoming Department of Health, Aging Division requires that Title III D funded health promotion and disease prevention programs meet the ACL Definition of evidence-based programs or the program has been deemed an “evidence-based program” by any agency of HHS:

- i) ACL Definition of Evidence Based Programs:** As of October 1, 2016, all programs using Title III-D funds will have to meet these criteria (equivalent to the "highest-level" criteria of the former definition):
- a) Demonstrated through evaluation to be effective for improving the health and well-being or reducing disease, disability and/or injury among older adults; *and*
 - b) Proven effective with older adult population, using Experimental or Quasi-Experimental Design;¹ *and*
 - c) Research results² published in a peer-review journal; *and*
 - d) Fully translated² in one or more community site(s); *and*
 - e) Includes developed dissemination products that are available to the public.

B. Application Requirements and Eligibility for Funding

- i). Eligibility for Funding:** Public agencies and private nonprofit entities in Wyoming, which have the capacity to provide services included in the Older Americans Act Title III-D, Disease Prevention and Health Promotion Program guidelines, are eligible to apply for this funding. Partnerships between two or more entities may be eligible for funding, if there is a formal agreement between the partners. The amount of funding available is included in this grant package.
- ii). Application Requirements:** For all III-D EBP services, the applicant assumes responsibility for administration of the program(s) in compliance with ACL guidelines and the entity that developed and/or licenses the program. The applicant will collaborate and coordinate services with community senior services agencies, for the implementation of the ACL Title III-D EBP. The applicant of the Title III-D EBP work plan include the following criteria:
- a) Provide a comprehensive work plan, establish program policy and procedure addressing the service standards, and providing a detailed picture of service delivery.

¹ Experimental designs use random assignment and a control group. Quasi-experimental designs do not use random assignment.

² For purposes of the Title III-D definitions, being “fully translated in one or more community sites” means that the evidence-based program in question has been carried out at the community level (with fidelity to the published research) at least once before. Sites should only consider programs that have been shown to be effective within a real-world community setting.

- b)** Develop and coordinate services with community senior service agencies statewide for Title III-D EBP implementation. Provide partnership and program collaboration as required for program implementation that can extend the reach of Title III-D EBP program statewide.
- c)** Develop EBP program recruitment and retention strategies for extensive statewide implementation.
- d)** Preserve fidelity to all EBP services, provide quality control during the implementation, and collect core data for program evaluation. The applicant must provide the selected EBP according to the specifications of the organization that develops the program.
- e)** Indicate if the applicant currently holds a license (if required) and if they have staff that meet the staffing and training requirements of the proposed EBP. Copies of the licenses for EBP should be included as an attachment.
- f)** Provide the description of the selected III-D EBP statewide services delivery and each EBP service location. The EBP applicant must include all information requested in the Community Partner and Service Provider's application. Applicants for Title III-D EBP must detail the following for each proposed EBP sites:
 - 1. Timelines for staffing, including the completion of any required training.
 - 2. Timeline of EBP policy and procedure development and disbursement, acquisition of license, materials and equipment.
 - 3. Timeline and start-up dates for identified EBP service delivery site(s).
 - 4. Provide record keeping and reporting format in compliance to ACL Title III-D, EBP requirements.
 - 5. Ensure all leaders/trainers, and facilitators of EBP have license/certification needed as specified in the program design/program license. The Aging Division, CLS does not maintain license for any EBP program. This is the responsibility of the Title III-D EBP applicant.
 - 6. Ensure implementation of EBP and verify all instructors, leaders, facilitator, and provider of EBP services comply with the qualifications as stated in the selected EBP and services guidelines.

- g) Ensure the selected EBP program deliverables and evaluation criteria are met in accordance with the ACL guidelines and the entity that developed and /or licenses the program.
- h) Provide a copy of selected EBP annual compliance report to CLS for program validation.
- i) Provide monthly reports for services provided and invoices for reimbursements.

C. Data Reporting and Fiscal Management:

- i). **Fiscal Management:** Title III D funding is subject to the requirements of the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards under 45 CFR Part 75. These Requirements and additional terms and conditions that are applicable to this award can be found on the ACL website: <https://www.acl.gov/grants/managing-grant>
- ii). **Title III D Program Costs:** Federal funding used by Title III D EDPs must be used within these guidelines for direct program costs listed as follows:
 - a) Programs and activities must meet the evidence-based criteria as outlined in Section II A of these policies.
 - b) Funds may be appropriately used for costs related to implementation of a program such as site set-up (equipment, books, compact discs (CDs), and program-related educational materials and supplies).
 - c) Funds may be used for a proportion of staff time when that staff is delivering the evidence-based program.
 - d) Funds may be used for the time utilized by a subcontracted professional/certified trainer to conduct a program. ACL guidelines require the certifications or licenses for any professional or credentialed services applied to Title III D funds shall be kept on file. This includes licenses for a Physician, Registered Nurse, Licensed Practical Nurse, Dietician, Diabetic Educator, Dentist, Physical Therapist, Audiologist, or the certificates of completion for Master Trainers and Lay Leaders.
 - e) Funds may be used for travel to training or for the implementation or program sites.

- f) Funds may be used for the costs associated with training of staff or volunteers for the program (e.g. travel, hotel, subsistence, and registration fee).
 - g) Funds may be used for the costs associated with purchasing the EBP license.
 - h) Funds may be used for advertising and marketing (e.g. brochures and flyers). Department of Health label requirements and disclaimers are required.
 - i) Funds may be used for space rental for the time that space is being used to deliver an EBP program.
- iii).** Title III D Funds may **not** be used for administrative costs associated with delivering programs such as:
- a) Salaries of staff outside of time delivering evidence-based programs
 - b) Materials and supplies not recommended or required for the evidence based program.
 - c) Advocacy, planning, coordination, information sharing, brokering, monitoring and evaluation functions for the development and maintenance of comprehensive and coordinated community-based systems
 - d) Area planning activities that are expected to be conducted for all Older Americans Act funded programs.
- iv).** **Data Reporting:** All EBP must maintain the fidelity of the program through the contracted period. EBP providers must ensure services, client record, and required Aging Needs Evaluation Summary (AGNES) are captured and entered into the Social Assistance Management System (SAMS) data. On a case by case basis, the Community Living Section may approve an alternate format for submitting all data required to be captured by ACL.

All EBPs must provide a copy of the selected EBP year-end report along with the year-end summary report for the current grant year to the Aging Division no later than December 1st.