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# **Councils on Aging Annual Report Data Collection Tool Guidelines and Instructions Fiscal Year 2026 (FY26)**

**COAs in Large Communities (municipalities with 500 or more people aged 60+)**

## Councils on Aging Annual Report Survey Guidelines and Instructions

The following is a guide to submitting the Executive Office of Aging & Independence (AGE) Councils on Aging annual report data collection tool for Councils on Aging (COAs) in large communities—those with 500 or more people aged 60 and older.

In accordance with Mass. Gen. Laws ch. 40, § 8B, each Massachusetts COA shall submit an annual report to AGE. AGE uses this information to inform policy and estimate the benefits that COAs provide.

The information on the annual report is critical in informing AGE and other state agencies about best practices, emerging trends, and how COAs have responded to challenges over the years. Additionally, survey results help the aging services network determine what other COAs are doing and identify areas to potentially expand our outreach efforts to better support older adults, family members, and caregivers across the Commonwealth. To help COAs learn from and collaborate with other COAs, AGE also summarizes the submitted information in a public Councils on Aging Annual Report.

***For COAs that consistently use MySeniorCenter.*** MSC can provide AGE with some of the information requested. Question 17 asks whether your COA uses MSC to track participation by older adults. If your agency uses MSC and you give MSC permission, MSC will submit the requested information directly to AGE and you do not need to complete the remaining questions. MSC will not share case note or any other personal data with AGE. AGE has mapped COA user entries for activity categories to AGE annual report activity categories.

If you have questions that are not addressed in this guide, please contact Adam Frank at the Executive Office of Aging and Independence at [adam.frank@mass.gov](mailto:adam.frank@mass.gov).

## Councils on Aging Annual Report Survey Guidelines and Instructions

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#### *Instructions*

### Page 2

**Question 1. COA** Find and select the municipality for your COA from the drop-down menu. Only COAs in municipalities with more than 500 older adults are listed.

#### **Question 2. COA Details**

Street Address

Zip Code

Phone #

Name of Current Director / Coordinator

Email of Current Director / Coordinator

Name of Alternate Staff Contact

Email of Alternate Staff Contact

Please include your e-mail if you would like a confirmation sent to you when you complete the survey.

#### **Question 3. Senior Center**

*Does COA operate a senior center?*

COA, in this instance, refers to the municipal agency serving older adults in your community, not the Board. It may go by a different name in your community, such as Department of Elder Affairs or Health and Human Services.

For the purpose of this report, "senior center" is defined as a dedicated space for Council on Aging activity. It may be a stand-alone building or a room or set of rooms within a larger building, so long as use of the space is exclusive to the COA, with the exception of co-located resources such as veterans service officer or public health nurse services. If it is just an office for you to do your administrative work or meet one-on-one with residents, please select "no."

#### **Question 4. FY26 Senior Center Days & Hours of Operation**

*Senior Center Hours of Operation*

This question is for Councils on Aging that operate a Senior Center. Check the days your center is open. For each day indicate all times when the Senior Center is usually open. If you would like to document services provided after regular weekly hours, please include in "notes," which appear later in the survey.

*This question is skipped if your COA does not operate a senior center.*

### **Question 5. FY26 COA Days & Hours of Operation**

#### *COA Hours of Operation*

This question is for Councils on Aging that do not operate a Senior Center. Please include all times when the Council on Aging is providing activity or when Council on Aging staff are available by phone, appointment or walk-in. If you would like to document services provided after regular weekly hours, please include in "notes," which appear later in the survey.

*This question is only asked if your COA does not operate a senior center.*

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### **Question 6. Personnel**

#### *Paid staff.*

This category should include all employees on the city/town payroll, including those funded through formula grants and other state, federal and private funding coming to the city/town for the purposes of supporting COA activity. Contracted and stipended employees will be counted in a different section (interns, contractors, etc.). Report the number of paid positions, not the total number of people who fill those positions during the year. For example, if one paid Coordinator retired in October and a new paid Coordinator started in November, you should report one staff member for that position. Report the total number of hours per week across all paid staff (for example if there were two staff positions working 40 hours a week, the number of weekly hours of paid staff service would be 80).

#### *Total Weekly Hours of Paid Staff Service*

Please note that this is the **weekly** total of hours.

#### *Total Number of Interns (Paid & Unpaid)*

This number should include both year-round and seasonal interns. For example, an intern working only for the summer would still count as one intern.

*Total Annual Hours of Intern Service (Paid & Unpaid)*

Please note that this is the **annual** total of hours.

*Total Senior Property Tax Workoff Individuals*

Please only include those who are performing work directly for the Senior Center or Council on Aging.

*Total Annual Hours of Senior Property Tax Workoff Individuals*

Please only include hours of work performed directly for the Senior Center or Council on Aging.

*Total Number of Volunteers (including AmeriCorp RSVP)*

This number should include both year-round and seasonal volunteers. For example, a volunteer working only for the summer would still count as one volunteer.

*Total Annual Hours of Volunteer Service*

Please note that this is the **annual** total of hours.

*Total Number of Paid Contractors*

A paid contractor is anyone receiving financial compensation for their work from the COA budget who is not on the city/town payroll.

*Total Annual Hours of Paid Contractor Service*

Please note that this is the **annual** total of hours.

**Question 7. Volunteer Coordinator**

*Did the COA employ a full-time or part-time volunteer coordinator?*

- *Yes (full-time)*
- *Yes (part-time)*
- *No (role is performed by other position)*
- *No (no volunteer coordination)*

**Question 8. Volunteer Roles**

If a person has volunteered under more than one category, you may count them in both places. Otherwise, please count each person only once in each category. Note that no volunteer credit should be given for senior property tax work-off hours unless the volunteer exceeded the hours served for the specified tax relief purposes or for the RSVP Service for which the COA is a contractor. Do not include volunteering at non-profit *Friends of COA* or preparation time for on-site volunteer work (fundraising, rehearsing, and so on).

*Board Members and Officers*  
*Newsletter Staff/Photographer/Videographer*  
*Food Delivery and Service*  
*Instructors*  
*SHINE Counselor*  
*Support Group Counselor*  
*Administrative*  
*Professional Services*  
*Friendly Visitor/Companion/Escort*  
*Driver*  
*All Other*

**Question 9. Revenue**

Provide COA revenue during the reporting period for each source listed below;

*Municipal Appropriation*

Funding from the city or town

*AGE Appropriation*

Your FY26 formula grant from the Executive Office of Aging and Independence (AGE).

*Federal Government (including Title III)*

*Regional Transportation Authority*

*Program Fees*

Fees paid directly by program participants.

### *COA Friends*

This should include cash donations provided by the Friends group. For example, if the Friends group provides \$500 to the COA specifically for the purchase of a refrigerator, but the COA makes the purchase, the \$500 should be included here. If the Friends group donates the refrigerator directly, it should be included under "in-kind."

### *Other Donations or Grants*

### *Other*

Please include any revenue not covered above, including state earmark funding.

*The form will automatically calculate Total Revenue.*

### **Question 10. In-Kind: Donated Goods & Services**

*Report the estimated value of all of goods and services donated to the COA during the reporting period (in-kind donations).*

If a person is providing a service free of charge to the COA, but is getting paid by their employer for the service, please count as in-kind, not volunteer.

In determining the value of in-kind services, estimates are fine, but some Directors have found the U.S. Bureau of Labor Statistics data on salaries helpful. You can find the data for Massachusetts here: <https://data.bls.gov/oes/#/home>. AGE understands that even within Massachusetts, salary ranges can vary widely by region. Alternately, the Independent Sector, a coalition of non-profits and foundations, estimates the value of volunteer time as \$42 per hour. Use whichever source you think best applies to you.

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### **Question 11 (Optional)**

*Describe any FY26 activity or activities that your COA conducted that occurred outside of regular weekly hours.*

Enter a description of any COA activities or events scheduled outside of usual COA or Senior Center hours in the text box. If not applicable, skip this question.

**Question 12 (Optional)**

*Outside Regular Hours Tags.*

Please select all tags that describe the activity listed in your response to question 11. This is to help AGE organize and aggregate the information.

**Question 13 (Optional)**

*Describe any challenges faced by your COA in FY26.*

Enter a description of any COA challenges in the text box. If not applicable, skip this question.

**Question 14 (Optional)**

*Challenges Tags*

Please select all tags that describe the activity listed in your response to question 13. This is to help AGE organize and aggregate the information.

**Question 15 (Optional)**

*Describe any innovations by your COA in FY26.*

Enter a description of any COA innovations in the text box. If not applicable, skip this question.

**Question 16. (Optional)**

*Innovations Tags*

Please select all tags that describe the activity listed in your response to question 15. This is to help AGE organize and aggregate the information.

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**Question 17. MySeniorCenter**

*Does your COA consistently use MySeniorCenter to document how many older adults attend COA activities? (If your MySeniorCenter data has occasional errors, less than 5%, you can still submit that data.)*

*Yes, and AGE has our permission to obtain FY26 data from MySeniorCenter*

*Yes, but AGE does NOT have our permission to obtain FY26 data from MySeniorCenter*  
*No, our COA does not consistently use MySeniorCenter*  
*No, our COA does not use MySeniorCenter*

If you select the first option, AGE will obtain activities data directly from MySeniorCenter and you will automatically be directed to the last page. AGE will not collect any data that is not specifically requested on the data collection tool, any case data, or any other private or identifying information on program participants.

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### **Question 18. Unique People Served**

Individuals participating in COA activities should only be counted once in this section, regardless of how many activities they participate in, or how many times they participate in each activity.

### **Question 19. Demographic Characteristics**

*Did the COA collect and maintain demographic information (such as age, gender, and race/ethnicity) for the people served in FY26? (select all that apply)*

Age  
Gender  
Race/Ethnicity

AGE strives to support the aging service network in strengthening its capacity to offer programs and services that are accessible, equitable, inclusive, and representative of the community. While AGE recognizes that collecting and reporting this information from participants is challenging, this data is indispensable to these efforts and greatly appreciated.

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### **Question 20. Age**

*This question only appears if Question 13 indicates the COA collects and maintains data on participant age. The form will automatically calculate Total Number of Unduplicated People Served.*

### **Question 21. Gender**

If your participants have not identified themselves or you don't know how they identify to this level of specificity, please use the "unknown" categories as you see fit.

*This question only appears if Question 19 indicates the COA collects and maintains data on participant gender. The form will automatically calculate Total Number of Unduplicated People Served.*

### **Question 22. Race/Ethnicity**

Because the methodology of this work involves comparing data on Council on Aging program participants with that of the community at large, AGE is using categories consistent with those of the U.S. Census in collecting data on race and ethnicity. If your participants have not identified themselves or you don't know how they identify to this level of specificity, please use the "unknown" categories as you see fit.

*This question only appears if Question 19 indicates the COA collects and maintains data on participant age. The form will automatically calculate Total Number of Unduplicated People Served.*

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### **Question 23**

#### **Activity Categories**

If an activity has multiple simultaneous components, such as a meal combined with an educational program, please count it as two categories, and count each participant under both.

For COAs submitting via MySeniorCenter, COA user entries have already been mapped to the appropriate Annual Report category.

The "Unduplicated" column should count each individual only once, regardless of how many times she or he participates. "Duplicated" should count the person each time she or he participates so, if a person attends an exercise class 20 times throughout the year, she should be counted as "20" under "Duplicated" and "1" under "Unduplicated."

The umbrella categories in all capital letters ("Outreach and Advocacy," "Professional Services," etc.) are to help AGE organize the data. You do not need to assign activity categories to them or otherwise track them unless it is helpful to you.

## OUTREACH & ADVOCACY

### **Referrals**

Includes all information and referral provided in person, over the phone, via distribution of literature or via e-mail/internet. COAs should count referrals to all COA activities, health and aging services, housing and assisted living, transportation, and private services.

### **Case Management**

This category encompasses what many COAs define as “Outreach.” It should include any counseling, application assistance, decision support or advocacy for benefits, services, supports or forbearance.

### **Health Benefits Counseling / SHINE**

Activities included under this heading may include:

Health insurance  
MassHealth  
Medicaid  
Medicare

## Other Benefits Counseling

Activities included under this heading may include:

- Application assistance
- Fuel assistance
- Disability placard
- Prescription savings
- Rental assistance
- SNAP/food assistance
- Transitional assistance
- Unemployment benefits
- Utility assistance

## Outreach

This category should include any first contact with a community member, intake or effort to engage older adults not currently involved in COA activity or enrolled in aging services. It could include one-on-one outreach via phone or in person, as well as broader outreach via health fairs and other group events.

## PROFESSIONAL SERVICES

### Legal Assistance

This category may include legal clinics, one-on-one legal counseling, and presentations that are provided **on-site**. Activities may include estate planning, identity theft, immigration and scam assistance. Referrals to off-site legal services should be counted under Referrals.

### Financial Management

This category may include assistance with bills, financial paperwork, financial management, financial planning and financial services that are provided onsite. Referrals to off-site financial services should be counted under Referrals.

Activities could include:

- Bills
- Fax paperwork
- Financial management
- Financial planning
- Financial services

Tax related activity should be counted under Tax Assistance.

### **Tax Assistance**

This category should include tax preparation assistance provided on site. Assistance in enrolling in the Senior Tax Workoff Program or the Circuit Breaker should be included under "other benefits counseling."

### **Mental Health**

This category should include services provided onsite, including BHOAP (formerly "EMHOT") services, one-on-one mental health counseling, one-on-one bereavement support, assessment and hoarding counseling. Referrals to offsite services should be counted under "Referrals."

## **SUPPORT SERVICES**

### **Food Shopping Assistance**

Also include farm share and food bank services, brown bag grocery pick up, as well as shopping for other essentials such as pharmacy and health supplies.

### **Group Support**

Activities included under this heading may include:

- Alzheimer's support group
- Bereavement support group
- Caregiver support group
- Decluttering group
- Family support
- Hearing loss support group
- Illness-specific support group
- Info sharing/ support groups
- Low vision support group
- Support group: peer facilitated
- Support group: professional lead

### **Social / Supportive Day Care**

Include only non-medical day programs for people with cognitive impairment and their caregivers. Memory Café attendance may also be counted here if there is sufficient staff support to offer respite to caregivers. Transportation to Adult Day and similar services should be counted under “Transportation.”

### **Friendly Visiting**

Includes hospital visits and companion services. Visits by volunteers and paid staff should be counted.

### **Wellness Check**

These should include phone calls and brief visits, including birthday and holiday calls, bereavement calls, book delivery, reassurance, safety checks. Longer visits should be counted under Friendly Visiting, or Case Management if the visit involves counseling, application assistance, etc.

### **Durable Medical Equipment Loan**

### **Digital Literacy**

This category includes all computer, tablet and smartphone training and technical assistance.

### **Employment Services**

Include on-site job coaching, professional training, volunteer placement and job search assistance. Referrals to off-site employment agencies should be counted under “Referrals.”

### **Intergenerational Programming**

Include any programs that specifically recruit younger people to engage with older adults, such as pen pal programs or snow removal and yardwork volunteer services. A dinner or educational event could be considered intergenerational programming if younger people are specifically recruited or invited.

### **Transportation (Ambulatory)**

Ambulatory transportation serves those who can walk independently and where no special assistance or equipment is needed. No additional information regarding type of ride or driver (volunteer versus paid) is needed. Please count each one-way trip as one ride. Beginning in FY27, ambulatory and non-ambulatory transportation will be counted together.

### **Transportation (Non-Ambulatory)**

Non-ambulatory transportation serves those who cannot walk or stand on their own and require assistance or special equipment such as a wheelchair or other mobility aides to access or utilize transit. No additional information regarding type of ride or driver (volunteer versus paid) is needed. Please count each one-way trip as one ride. Beginning in FY27, ambulatory and non-ambulatory transportation will be counted together.

### **Day Trips**

If a day trip fits neatly into a different category, please count it there. For example, a trip to a hiking trail should be counted under Fitness/Exercise.

### **Home Repair**

Please include home maintenance, home modifications, handyman services, smoke and CO<sub>2</sub> detector installation, yard maintenance and snow removal (not covered under intergenerational programming).

## **WELLNESS**

### **Health Education**

This category should include delivery of information in both group and one-on-one settings, provided that it does not fall under any other category, such as Referral, Benefits Counseling or Health Screening. Fitness classes should be counted under Fitness/Exercise.

### **Health Screening**

Please include clinics, blood pressure checks, health assessments, hearing and vision screening and vaccinations.

## **Other Health Services**

### **Fitness / Exercise**

Please limit this category to programming that involves physical activity. Card and board games should be counted under Recreation and Socialization.

### **Congregate Meals**

Please include both Title III and locally funded meals, as well as holiday meals. If the meal is held in concert with another activity, such as Lifelong Learning or Cultural Events, please count participants under both categories.

### **Grab & Go Meals**

Please include both Title III and locally funded meals. If other services are provided during Grab and Go, such as Outreach or Referrals, please count under both categories.

### **Home Delivered Meals**

Please include both Title III and locally funded meals, as well as holiday meals. If other services are provided, such as Outreach or Referrals, please count under both categories.

## **COMMUNITY**

### **Lifelong Learning**

This category should include classes and workshops, including formal instruction in arts and music. Informal instruction provided on an as needed basis as part of fitness classes should be counted under Fitness/Exercise. Activity categories included under Lifelong Learning may include:

- Community Education
- Instructional Classes
- Instructional Courses
- Presentations/Community Education

### **Recreation & Socialization**

AGE understands that any activity that involves more than one person can be defined as socialization. However, for this category, please include only those that do not fit neatly under any other category. Music and arts activities (excepting instruction), performances,

exhibitions, etc. should be counted under Cultural Events. Activities that could be counted under this category include:

- Clubs/groups
- Coffee hour
- Community meeting
- Community projects
- Community service
- Community workshop
- Crafts
- Discussion group
- Drop in
- Games & recreation
- Restaurant
- Shopping (not including food and other essentials)
- Special groups

### **Cultural Events**

Activities may include exhibits, international cuisine, multicultural holiday events, museums, and performances, as well as theater and arts (writing, music, painting, etc.) sessions that do not involve formal instruction.

### ***Question 21***

### **Activities: People Served (People Less Than Age 60)**

#### **General Information**

Include referrals, response to phone inquiries, inquiries at health fairs or other events, distribution of literature or attendance at informational events designed for people approaching age 60.

**Transportation** (Units: # Rides). Please count each one-way trip as one ride.

#### **Family Assistance**

Please include any caregiver support and educational activity provided to people under age 60. If an older adult is provided with a service, such as a fuel assistance application or shopping assistance, and you happen to know that there are household members under age 60 who are benefiting, you may also include them here.

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### Submission

Please click "Submit" when you have answered all relevant questions. AGE will not receive your annual report unless you click "Submit" After you click submit. After you click "Submit", you can download a copy of your submission for your records. If you provided an e-mail address under contact information, you will receive a confirmation that you completed the survey.