



Mitigation Strategy Change Reporting Form

Agency Name: _____ Date of Notification: _____

Agency Contact Name: _____ Phone Number: _____

Email Address: _____

Programs Impacted:

- OPTIONS Domiciliary Care Protective Services Senior Centers
 Caregiver Support Program

Implementation Protocols and Strategies:

Senior Center/Centers & Number of Participants Impacted:

Additional information:

Date of Implementation: _____ Reevaluation Date: _____

AAAs seeking to change mitigation strategies in Aging Services programs shall send this completed form to the Bureau of Aging Services via email at RA-PaAgingServices@pa.gov. If the change in mitigation strategies involves Protective Services, please send the completed form to PDA.ProtectiveServices@pa.gov.