

## FY09 PERFORMANCE PLAN District of Columbia Office on Aging

#### **MISSION**

The mission of the District of Columbia Office on Aging (DCOA) is to promote longevity, independence, dignity, and choice for District of Columbia residents who are age 60 and older.

#### SUMMARY OF SERVICES

DC OoA provides a variety of community-based services including: transportation; senior wellness centers; congregate and in-home meals and nutrition programs; employment and job training; in-home care; caregivers' support; literacy; legal assistance; recreation and socialization; adult daycare; nursing home care and other services in collaboration with various city agencies. In 2008, DCOA was given lead responsibility, in collaboration with the Department of Health's Medical Assistance Administration, for operating the a one-stop aging and disability resource center (DC ADRC) for long term care public and private services, information, benefits and assistance.

OBJECTIVE 1: To Establish "Wellness", Healthy Aging and Self-Care Practices As Community-Wide Goals for Elderly Individuals, To Help Seniors Stay Well and Help Those Who Have Become Ill Or Disabled To Keep Physical And Mental Limitations From Becoming Insurmountable Impediments To Independent Living.

INITIATIVE 1.1: Open Wellness Centers across the city to promote health and disease prevention, including health screening, nutrition and exercise, and to help seniors maintain independence and avoid institutionalization and medical care costs.

The new Ward 1 Senior Wellness Center (\$7.5 million in capital costs) plans have been revised from FY 08 and its completion is projected for September FY 09. The Ward 6 Wellness Center and the new office site for the DCOA (\$9.2 million capital cost) is scheduled for start-up construction in November 2008. It is anticipated that more than 1,300 seniors will be served annually by each Center. In FY09, the DC OoA plans to spend over \$400,000 on the development and implementation of Nutrition Education Programs at the Wellness Centers and Nutrition Centers, and will implement an evaluation design to measure health outcomes of program participants.

OBJECTIVE 2: Ensure That Older Adults, Who Want To Work or For Economic Reasons Need To Return To The Workforce, Are Trained, Placed And Employed.

INITIATIVE 2.1: Improve, enhance, and increase the employment and training services for seniors age 55 and over by providing more jobs and volunteer opportunities for seniors who do not qualify for the "Way to Work" program or other federal and local subsidized senior employment programs.

In FY 08 DCOA, under a MOU with the DC Department of Employment Services, provided 65 District older residents age 55 and over with subsidized job training and placement from an eligible applicant pool of 104. An additional 107 seniors not qualified for the Way to Work program or over income applied for and sought employment opportunities and 45 or 42% were placed in jobs. Job search assistance was provided to another 80 older workers, 45 participants received job skill training with a 91% completion rate, and 200 seniors applied for paid volunteer positions but only 54 or 27% were placed. During FY09, DCOA and DOES will increase and track the number of job placements, training, counseling, job search and related services for seniors who are not income-eligible for the "Way to Work" Program. The agencies project additional job and volunteer placements (500) in FY09 for seniors and volunteers (paid and



unpaid) who want and need to work, regardless of income. This initiative will be implemented using existing resources.

OBJECTIVE 3: Provide Consumer Information, Assistance And Outreach For Older Persons and Persons with Disabilities To Improve Access To, And Make More Informed Decisions About Their Health, Housing, Transportation and Long-Term Care Services and Needs.

INITIATIVE 3.1: In collaboration with the Department of Health's Medical Assistance Administration, DCOA will manage, market and operate a fully functional aging and disability resources center (one-stop) to provide long-term care services, information, and assistance to older District residents and persons with disabilities.

In July 2008, the new long-term care one-stop (single entry point system) aging and disability resource center (DC ADRC) was opened and staffed to provided District residents services. The Center is designed to include co-located health and human services organizations and community-based non-profit organizations within the Senior Service Network who serve persons with disabilities and residents 60 and older. More than 12 different key health and human services agencies are located within the DC ADRC with full-time staff to serve residents (including families, relatives and caregivers) directly and to be a resource for service providers. Since its start-up, there has been a "spike" in intake and screening of customers most notable among persons with various disabilities aged 18-59 in which more than 59 intake were documented within a three month period. In FY 09, the DC ADRC operations should be optimized and result in an increase in services and more efficient services for new and existing customers as indicated from the established baseline and customer services information database system. The increase in number of customers seeking assistance (public and private pay) should result from the implementation of the marketing and outreach plan started in FY 08 and to be continued in FY 09. The focus will be on identifying new versus existing customers served with a FY 09 goal of 500 new and 1,000 existing contacts or intakes. Federal and local funds will support the initiative.

OBJECTIVE 4: Develop, Implement and Evaluate New Opportunities and Initiatives To Improve Access To Services, Expand Resources That Are Available For Seniors and Develop Alternatives To Institutional Care.

INITIATIVE 4.1: Develop, publish and disseminate the "Mayor's Strategic Plan of Action for Seniors: 2010-2012" in the District of Columbia and the State Plan on Aging by August 2009.

"Mayor Adrian Fenty's Strategic Plan of Action for Seniors: 2010-2012" will address all the salient and critical issues facing seniors in the District. This initiative was included in the FY 08 Agency Performance Plan but was rescheduled to be included as an outcome of the required federal government state aging plan submission and process which is due in FY 09. The Plan will result from a deliberative process involving all wards, Executive Office of the Mayor, Council, the Commission on Aging, community-based organizations, the senior service network, faithbased organizations and all relevant stakeholders. One of the primary components of the process will be a series of ward-based town hall meetings planned by the DC OoA. The strategic plan will include priorities, goals and objectives and other information using the model developed by the US Administration on Aging. The document will be the Mayor's framework for action with benchmarks and information for seniors to ensure that seniors are a priority for his administration. The development of the Mayor's plan will coincide with the federal government's requirement that all state units on aging develop and submit a three year State Plan on Aging to be submitted to the US Administration and Aging and signed by the Mayor. The total cost of the plan will range from \$50,000-\$75,000 and funds must be identified within the FY 09 approved budget or supplemental request.



## INITIATIVE 4.2: Expand intergenerational projects and include collaboration with the Mayor's Youth Advisory Council, school system (DCPS), Wellness Centers and various community-based organizations.

The Wellness Centers will be the one of the focal points for expanding and strengthening intergenerational programs using existing resources. The intergenerational projects for the Wellness Centers were undeveloped during FY 08 and constrained by staff resources and should be greatly enhanced in FY 09. The programs should help to bridge the gap across generations through planned and structured activities. In FY 09, DCOA will conduct a mini-retreat for senior wellness centers staff and volunteers to plan and identify intergenerational activities within each ward and to address other important health and disease prevention activities and community outreach efforts. In FY 08, DCOA programs and services across the city were supported by 3,187 youth volunteers of which only a small percentage were involved with the wellness centers. The projected FY 09 increase in youth participation and intergenerational programs will focus on senior wellness center with a goal of 100 youth participants at each wellness center.

### INITIATIVE 4.3: Enhance the new client information database and tracking system (Harmony) for all aging service providers.

A new client information database and tracking system was implemented in FY 08 to greatly enhance efficiency and accountability throughout the Office on Aging Senior Service Network. To date, more than 21,438 customers (non-duplicated count) have been entered in the database. In FY 08, all users in the senior service network received training and are using the system with an updated version to track customers and services in all wards, generate required federal reports and reimburse providers for services. DCOA has a system help desk and technical support staff to assist users and the system is supported by OCTO. In FY 09, the system will be enhanced to include: a financial module, intake and screening data for the DC ADRC services; and designed to be an integrated part of the city-wide health and human services integrated case management initiative (HHS Technology Investment Review Board). The new system will ensure greater accountability for services provided by avoiding duplicated customer count and unsubstantiated services provided. In FyY09, approximately \$300,000 additional dollars will be used for the system enhancements. To date more than \$1.5 million dollars have been expended or invested.

#### INITIATIVE 4.4: Conduct an Agency Needs Assessment by the end of FY 09.

A Needs Assessment is critical to more comprehensively and thoroughly determine the service delivery effectiveness of the network, service providers' needs, performance outcomes, agency resources, staff training and development needs, coordination with other agencies, client/customer service satisfaction and needs, problems, issues, special population needs ( such as English as a second language, and the needs of gay, bisexual, lesbian and transgender residents) and other service delivery related factors. The last agency needs assessment was conducted in1974. This initiative was also included in the FY 08 Agency Performance Plan, but not implemented. The latter was due to cost, lack of funding and decision to include this initiative as a component of the required federal state plan submission due in FY 09. The needs assessment will coincide with the plans and process to be used to develop the required federal State Plan on Aging and the Mayor's Strategic Plan of Action for Seniors for 2010-2012 (economies of scale) and all products completed by August 2009. Funds (\$50,000-\$100,000) must be identified for all three initiatives within the FY 09 budget or supplemental request.



# INITIATIVE 4.5: Develop site plan and development plan for an affordable elderly housing project on the campus of the Washington Center for Aging Services to address the continuum of care needs using innovative architectural design, technology, and public-private partnership.

This initiative was not performed in FY08 due to agency resource constraints and the need to seek interagency assistance to plan for and accomplish the initiative. Interagency planning has been achieved. Affordable and mixed elderly housing is a critical need for the city and is directly related to the impact of nursing home residents' transition to the community, affordable assisted living, independent living and the full continuum of care. In FY 08, the last group home (one of four) for 8 older residents on the campus was renovated based on universal design features and is now occupied. The group home renovation project was a collaborative effort among public, private and government partners with support services provided to residents on a continuous basis by DCOA.

In FY09, a site plan and request for proposal for a development plan will be developed for a mixed elderly housing on the campus of the Washington Center for Aging Services (WCAS) in Ward 5 which city is owned property. DCOA will continue to work with DHCD to develop an innovative mixed housing concept and plan for the property that will attract interested public and private developers. DCOA will also continue to work with DHCH and others to address the special needs housing of the elderly and the disabled in FY 09 to produce more affordable housing units. An interagency task group will be formed to plan and design the project with input from all stakeholders. If approved and developers secured, design and development may begin in FY10. Funds for the site plan and RFI (Request for Interest) may not be needed for this initiative if all services and needs are provided by other city agencies such as DHCD and OPM.

## **INITIATIVE 4.6:** Plan and conduct transportation services cost analysis and alternatives for the senior service network for more efficiency and improved quality of service.

In FY 08, DCOA had to analyze and review a major component of its senior transportation program and services, the Washington Elderly Handicapped Transportation Services (WEHTS); provided by a community-based organization (UPO, Inc.) for the past twenty years. In FY 08, the UPO, Inc. projected a budget deficit of \$500,000 -\$700,000 for all program services and transportation costs. For FY 09, UPO projected a substantial reduction of services (50%) for home delivered meals, adult day care transportation and medical escort services and transportation based on the approved FY 09 budget (\$2,159,721), which is an increase over FY 08. After three or more months of examination and analysis, DCOA determined that the programs and services can be provided at a more cost-effective manner and within FY 09 budget resources. The latter resulted in the termination of UPO, Inc. as the grantee for WEHTS, the selection of another vendor (contract) for home delivered meals, and the use of another Lead Agency for adult day care and medical escort transportation services. DCOA is currently implementing the new approach and transition plan without an interruption in services by October 1, 2009.

In FY 09, DCOA will complete the review of the cost-effectiveness of senior transportation services to improve efficiencies and quality of services, as customers' demand for these services continues to increase. Costs, time, and resources did not allow for a comprehensive review and analysis of senior transportation services in FY 08. There is a need to coordinate human services transportation across city agencies for even greater efficiencies including Medicaid, DCOA, Department of Human Services and Mental Health, Metro Access and others (e.g., call n' ride, parks and recreation, community-based organizations). The Health and Human Services Cluster (EOM) will also be developing a plan to address the transportation challenges for life support needs of District residents for FY 09. The cost for this initiative has not been determined.



## INITIATIVE 4.7: Growing, Supporting and Sustaining Community-Based and Neighborhood Aging in Place Programs and Models.

In FY 09, DCOA will support innovative, community-based, non-profit, neighborhood focused programs and services that provide new and needed services for residents age 60 and over within a defined neighborhood service area. In FY 08, there was tremendous interest and attention given to various concepts and models by District residents to organize themselves to address the needs of older residents within their neighborhoods. One such concept or model is the senior village which was first developed in Boston, Massachusetts (Beacon Hill). The "village" concept is a type of neighborhood membership association that assists older residents in the neighborhood by partnering with and connecting them to social and cultural activities, exercise opportunities, transportation assistance, household and home maintenance and medical and assisted living services at home. More than thirteen (13) villages are either planned, formed or operating in the District. In FY 09, DCOA will issue a Request for Applications (RFP) for "Aging in Place Challenge Mini-Grants" for non-profits interested in planning, developing and implementing aging in place models such as senior villages.



#### PROPOSED KEY PERFORMANCE INDICATORS

Measure	FY07 Actual	FY08 Original Target	FY 08 YE Actual	FY09 Projection	FY10 Projection	FY11 Projection
Objective 1						
Number of seniors receiving health promotion, nutrition education and counseling programs at centers and network sites	4,137	4,500	11,512	12,000	13,000	14,000
Percentage of persons requesting and receiving nutritious meals	99%	90%	99%	98%	98%	98%
Percentage of wellness center participants who increase their awareness and adopt healthy behaviors as identified by improvements in their overall health (measure changed in FY08)	85%	40%	N/A	60%	62%	65%
Objective 2						
Percentage of seniors seeking employment and received job placements	53%	40%	54%	55%	56%	60%
Objective 3						
Number of elderly and disabled customers served for all services	NA	NA	100+	450	650	700
Objective 4						
Number of customers tracked and entered in database for all services	49,664 (dup)	TBA	21,695 (non- dup)	25,000	30,000	31,000
Number of youths involved in intergenerational programs	N/A	N/A	3,187	3,300	3,600	4,000
Percentage of the elderly 60 & older who remain in their home and age in place as a result of supportive services & community-based care	N/A	95%	96%	95%	95%	96%
Percentage of site plan completed for elderly housing at WCAS	N/A	N/A	N/A	100%		N/A
Number of organized aging in place programs and senior villages funded and operational	N/A	N/A	N/A	5	10	15