

District of Columbia Office on Aging DCOA (BY)

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

DCOA 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 Care Finance (previously the Medical Assistance Administration within the Department of Health), for operating a one-stop aging and disability resource center (DC ADRC) for long term care, public and private services, information, benefits and assistance.

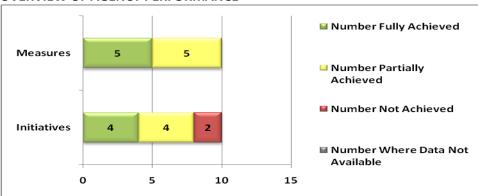
AGENCY OBJECTIVES

- 1. 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 impediments to independent living.
- 2. 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.
- 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.
- 4. Develop, implement and evaluate new opportunities and initiatives to improve access to services, expand resources for seniors and develop alternatives to institutional care.

ACCOMPLISHMENTS

- ✓ Served 1,120,858 meals to District older residents; an increase of 120,858 from FY 2008.
- ✓ Implemented a web-based customer services, tracking, assessment and reporting system (CSTARS) for the senior service network and trained all users.
- Restructured the senior transportation program for medical and adult day care transportation (WEHTS) and home-delivered meals transportation.

OVERVIEW OF AGENCY PERFORMANCE





Performance Initiatives – Assessment Details

Performance Assessment Key:								
Fully achieved	Partially achieved	Not achieved	Data not reported					

OBJECTIVE 1: 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.

Construction of the Ward 1 and Ward 6 Senior Wellness Centers is on schedule, with the Ward 1 Senior Wellness Center expected to be complete by August 2010 and the Ward 6 Senior Wellness Center (and new DCOA home) to be complete by December 2010. In FY 2009 DCOA purchased and trained staff on an evidence-based program (Enhanced Fitness) to measure health outcomes. This program has been implemented at all senior wellness centers Data collection and analysis for this program will begin during FY 2010.

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 2009, DCOA assumed greater responsibility for providing direct services to older residents seeking employment services through its Older Workers Employment and Training Program. DCOA now provides services to all older District residents, regardless of income, who are seeking job search assistance, training, job placement and related services.

Overall in FY 2009, DCOA's senior employment program served 437 clients, more than twice the number served in FY 2008 and close to DCOA's target of serving 500 clients in FY 2009. However, only 100 of these clients were placed in employment. In addition, through DCOA 27 older workers completed specialized job training at the University of the District of Columbia, but only four were placed in subsidized jobs. A very challenging economic climate and more seniors seeking job placements significantly affected DCOA's placement rate. Overall in FY 2009, 24% of seniors seeking jobs received employment, compared with 54% in FY 2008.

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 Care Finance (formerly the Medical Assistance Administration under the Department of Health), 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 FY 2009, the ADRC had contact with over 6.000 customers and received 812 cases. Six hundred of those served were individuals with disabilities age 18 to 59. Information on the number of seniors served was not accurately tracked (?) and will be more accurately tracked in FY 2010. The ADRC also completed the following in FY 2009: 1,216 Medicaid waiver applications for the Medicaid waiver for the elderly and persons with physical disabilities (EPD Waiver); 1,649 EPD waiver recertifications; 68 referrals for EPD waiver participants for personal care aide services; and 22 referrals for standard Medicaid coverage. Areas in which the ADRC expanded operations in FY 2009 include: greater work with the Department of Health Care Finance, the Department on Disability Services, and the Department of Human Services; hospital discharge planning; and an increase in the number of clients aged 18 to 59 served. An evaluation of the ADRC, to be completed by March 2010, will help guide the future operations of the ADRC.

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.

This initiative was not achieved in FY 2009, in part due to delaying this plan to coincide with the required Federal State Aging Plan in FY 2010. DCOA anticipates this plan will be complete by August 2010.

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.

In FY 2009, DCOA programs involved 313 youth, including Summer Youth Employment Program participants. Participation was below DCOA's goal of involving more than 3,000 in intergenerational programming. Resources originally planned to support wellness center staff development and planning of intergenerational activities was redirected to other wellness center needs. However, youth participation in other intergenerational activities conducted independently by all DCOA senior service network providers is not included in this total. Examples of activities youth were involved with at DCOA sites include providing direct services, serving as volunteers for special events, and participating in pen pal programs.

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

This initiative was partially achieved in FY 2009, and additional modifications to the system and related business processes will take place in FY 2010. In FY 2009, all of DCOA's Senior Service Network users received training on C-STARS (the client information database and tracking system on the Harmony platform). Providers are using it to track customers, generate required federal reports and for reimbursement purposes. A system help desk and technical support staff to assist users are available, with support from the Office of the Chief Technology Officer (OCTO). In FY 2010, an upgraded version



of the system will be implemented. Outstanding changes that need to made focus on ADRC data collection, reporting functions and a common intake/screening form for all users. Thus far, \$1.5 million has been spent on the new system and an additional \$100,000 expenditure is planned for the FY 2010 upgrades.

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

This initiative was not achieved in FY 2009, in part due to delaying the Mayor's Strategic Plan of Action and the required Federal State Aging Plan until FY 2010. As part of developing the required State Aging Plan for 2010-2012, DCOA will evaluate whether there is need for a comprehensive agency needs assessment.

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 fully complete in FY 2009, due to resource availability and the need for greater interagency collaboration. DCOA is on track to complete a site plan, appraisal and request for offers by April 2010. DCOA's work on the required site survey was completed in FY 2009, with assistance from DRES.

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.

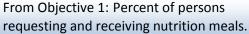
In FY 2009, DCOA assumed a greater role in managing and coordinating transportation services within the Washington Elderly Handicapped Transportation Services (WEHTS) and Home-Delivered Meals programs. DCOA transferred all agency-funded to vehicles to fleet management under the Department of Public Works, however the poor condition of the fleet has presented challenges, including higher than expected costs. To date, the changes has resulted in measurable cost savings and improved quality of services within a fixed budget.

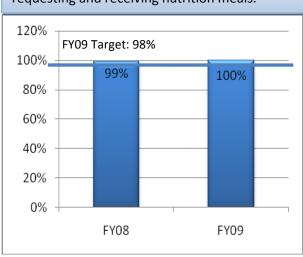
INITIATIVE 4.7: Growing, Supporting and Sustaining Community-Based and Neighborhood Aging in Place Programs and Models.

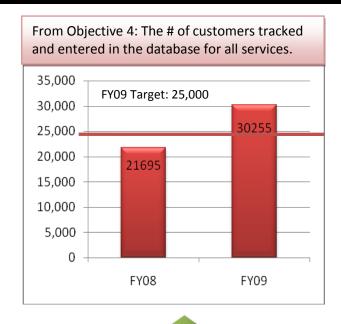
In FY 2009, DCOA awarded four competitive mini-challenge grants to support "senior villages" as aging in place programs. Each senior village was awarded \$15,000. Each Senior Village assists older residents by partnership with and connecting them to social and cultural activities, exercise opportunities, transportation assistance, household and home maintenance, and medical and assisted living services at home.



Key Performance Indicators – Highlights









More About These Indicators:

How did the agency's actions affect this indicator?

 DCOA re-structured and re-organized its senior meals program for congregate and home-bound clients during FY 2009 which resulted in serving 120,858 meals from the previous fiscal year in which 1,000,000 meals were served.

How did the agency's actions affect this indicator?

 DCOA provided training to all service providers in the senior service network on the new web-based customer information database and reporting system (CSTARS).

FULLY ACHIEVED

 The system has been fully implemented and is now used by all service providers and used to produce reports. A help desk staffed by an IT Specialist provides continuous assistance to users.

What external factors influenced this indicator?

 The decision by the prior service provider to not operate these programs in FY 2009 due provided DCOA an opportunity to analyze the programs and make significant changes in FY 2009.

What external factors influenced this indicator?

 Budget challenges adversely affected the planned enhancements to the system that would provide greater functionality.
 However, DCOA will address these enhancements in the future.



Key Performance Indicators – Details

Performance Assessment Key:

Fully achieved Partially achieved Not achieved Data not reported

		Measure Name	FY2008 YE Actual	FY2009 YE Target	FY2009 YE Actual	FY2009 YE Rating	Budget Program
•	1.1	Number of seniors receiving health promotion, nutrition education and counseling programs at centers and network sites ¹	11,512	12,000	6,336	52.80%	CONSUMER INFO.,ASSISTANCE & OUTREACH
•	1.2	Percentage of persons requesting and receiving nutritious meals	99	98	100%	102.04%	CONSUMER INFO.,ASSISTANCE & OUTREACH
•	1.3	Percentage of wellness center participants who increase their awareness and adopt healthy behaviors as identified by improvements in their overall health	0	60	84.99%	141.65%	COMMUNITY BASED SUPPORT PROGRAM
•	2.1	Percentage of seniors seeking employment and received job placements	54	55	24.33%	44.24%	COMMUNITY BASED SUPPORT PROGRAM
•	3.1	Number of elderly and disabled customers served for all services, at the Aging and Disability Resource Center	100	450	261	58%	COMMUNITY BASED SUPPORT PROGRAM
•	4.1	Number of customers tracked and entered in database for all services	21,695	25,000	30,255	121.02%	AGENCY MANAGEMENT SERVICES
•	4.2	Number of youths involved in intergenerational programs	3,187	3,300	368	11.15%	CONSUMER INFO.,ASSISTANCE & OUTREACH

¹ The implementation of a new client information database and tracking system in FY 2008 and enhancements in FY 2009 have resulted in more accurate tracking of seniors served by DCOA and less risk of duplicated counts of seniors served, beginning in FY 2009.



•	4.3	Percentage of the elderly 60 & older who remain in their home and age in place as a result of supportive services & community-based care	96	95	100%	105.26%	COMMUNITY BASED SUPPORT PROGRAM
•	4.4	Percentage of site plan completed for elderly housing at WCAS	0	100%	0%	0%	COMMUNITY BASED SUPPORT PROGRAM
•	4.5	Number of organized aging in place programs and senior villages funded and operational	0	5	.0	100%	COMMUNITY BASED SUPPORT PROGRAM