



FY 2013 PERFORMANCE PLAN DC Office on Aging

MISSION

The mission of the District of Columbia Office on Aging (DCOA) is to advocate, plan, implement, and monitor programs in health, education, employment, and social services which promote longevity, independence, dignity, and choice for our senior citizens.

SUMMARY OF SERVICES

The District of Columbia Office on Aging is the State and Area Agency on Aging for individuals 60 years of age and older. DCOA oversees an Aging Services Network of more than 20 community-based education, government, and private organizations, which operates more than 30 programs citywide including seven Lead Agencies that offer a broad range of legal, nutrition, social, and health services. Additionally, DCOA operates the Aging and Disability Resources Center (ADRC), a one-stop resource for long-term care information and referrals, benefits and assistance for residents age 60 and older and persons with disabilities age 18 and older and the Older Worker Employment and Training program which provides training and job placement opportunities for older persons.

AGENCY WORKLOAD MEASURES

Measures	FY 2010 Actual	FY 2011 Actual	FY 2012 YTD
# of seniors and disabled adults provided transition support	60	96	63
# of caregivers receiving flex-spending funds to assist with the cost of respite care	N/A	N/A	N/A
# of meals served	780,587	719,941	672,188
# of consumers attending Seniors Wellness Centers	2,003	2,407	2,129
#of seniors seeking employment assistance	411	410	380
#of seniors seeking training assistance	55	90	195
# of consumers receiving information, referral, and assistance services	6,725	4,927	4,821
# of consumers receiving Options Counseling services	56	174	217

OBJECTIVE 1: To advocate and support legislation that would improve housing, safety, and financial security for seniors living in the District of Columbia.

INITIATIVE 1.1: To introduce legislation proposing a city-wide "Silver Alert System" to notify the public of missing seniors.

This city-wide alert system will create a safety net for vulnerable seniors and persons with mental impairments who are reported missing to facilitate early identification and prompt resolution of such cases. Similar to the District of Columbia's existing "Amber Alert" Program, the purpose of the "Silver Alert System" is to facilitate collaboration



between the Metropolitan Police Department and other key stakeholders such as DCOA and its senior services network, as well as area media organizations, to rapidly identify, publicize and locate seniors and persons age 18 years and older who are reported as missing. Completion Date: September 2013.

INITIATIVE 1.2: To introduce consumer protection legislation to address current abuses in real property tax foreclosure sale process.

There is a growing problem of vulnerable seniors losing their homes through foreclosure due to unpaid real property taxes. Working with D.C. Adult Protective Services and Legal Counsel for the Elderly, DCOA recently submitted a grant application for federal funding to support a comprehensive approach to this issue that will protect vulnerable seniors, while also facilitating the prompt payment of real property taxes that the District of Columbia is statutorily required to collect. As a part of this process, DCOA will work with the Executive Office of the Mayor and Office of Policy and Legislative Affairs to submit legislation to curb current abuses such as lack of adequate notice provided to homeowners and unreasonable fees. Completion Date: September 2013.

INITIATIVE 1.3: To introduce legislation requiring stand by emergency electric generation capacity in residential facilities that house seniors and persons age 18 years of age and older with cognitive impairments.

Recent sustained power outages during inclement weather demonstrated the need for additional protection to vulnerable populations whose health and safety are jeopardized by the absence of electrical service for prolonged periods of time. Completion Date: September 2013.

INITIATIVE 1.4: To increase DCOA's revenue stream beyond local and federal dollars.

DCOA is working toward gaining O-Type revenue authority for FY13. This revenue will help the agency increase its budget over and beyond local appropriation and federal grant dollars. The funds currently received are legally restricted to expenditures for specified purposes and this new source of income will allow for creativity and flexibility within the DCOA budget as the agency is being faced with new challenges and barriers in providing comprehensive long-term supports and services for seniors, people living with disabilities and caregivers. Completion Date: September 2013.

OBJECTIVE 2: To enhance and expand programs and services offered by the DCOA's Aging Disability Resource Center and Aging Services Network Providers (One City Action Plan Action 3.3.2).

INITIATIVE 2.1: Operate an Aging and Disability Resource Center (ADRC) in each Ward (One City Action Plan Action 3.3.2).

The ADRC is in the process of redesigning its service delivery model, making ADRC services readily accessible to consumers by providing services in close proximity to the consumer's residence. This new service delivery model will be composed of eight satellite ADRC offices, which will be located at the current Lead Agencies. By incorporating this type of model, it will allow the ADRC to expand to a more enhanced



and integrated service delivery system that will make ADRC readily accessible for underserved citizens, and consumers residing in disadvantaged areas of the city. Completion Date: September 2013.

INITIATIVE 2.2: Implement an Awareness Campaign to inform consumers of the programs and services of the ADRC.

While on-going outreach activities are being implemented to inform seniors and disabled adults about the ADRC's program and services, DCOA will be launching an Awareness Campaign to reach even more consumers of the target population. The Awareness campaign will include bus posters, media advertisement, and mass mailing. DCOA implemented an Awareness Campaign in FY12, inclusive of a Metro bus advertisement, presentations at local social, civic, and faith organizations, stakeholder meetings, mass mailings, and participation in health fairs. DCOA did incur increased number of inquiries for information, referral, and assistance following all Awareness Campaign initiatives. In FY13, DCOA will continue to implement awareness initiatives, especially in an effort to make seniors and disabled adults aware of that the ADRC has de-centralized, and now has an DCRC program site in each Ward (within the Lead Agency). DCOA has developed a communications Plan, consisting of press releases, media announcements, hosting open houses and community presentations at social, civic, and faith organizations. Completion Date: September 2013.

INITIATIVE 2.3: Expand collaborations with other agencies and service organizations to bring health and human services into the community, promoting healthy lifestyles among seniors and disabled adults.

ADRC will continue to collaborate with DC Fire and EMS personnel to establish a free health screening program to check blood pressure and glucose levels of residents in all senior apartment buildings, congregate meal centers, and wellness centers. DCOA/ADRC will also partner with the Senior Service Network Agency, Department of Human Services, DC Housing Authority, Minimally Invasive Vascular Center, Walgreen's Pharmacy, Howard University Dental School, District of Columbia Sustainable and DC Department of Health to host health fairs at identified sites and locations in DC. Completion Date: September 2013.

INITIATIVE 2.4: Launch a virtual portal system.

ADRC will launch a virtual portal system to enhance its No Wrong Door service delivery model. This intricate information and referral system will create a virtual gateway to a more coordinated, decentralized approach to providing service. The virtual portal will allow consumers to have seamless access to relevant and necessary information about services, without the full array of services being offered in one location. Completion Date: September 2013.

INITIATIVE 2.5: Expand the DCOA Ambassador Program.

DCOA has facilitated two Ambassador Trainings, providing training to more than 115 District residents. The Ambassador Program was designed to educate advocates and other stakeholders about the services and programs offered by DCOA. Trained ambassadors are encouraged to refer seniors, persons with disabilities, and family caregivers to DCOA.



for assistance. In addition, trained ambassadors will serve as a point of contact for information and assistance in their communities. The goal of the program is to reach a larger number of constituents who have not accessed DCOA's services and programs and who could greatly benefit from them. Completion Date: September 2013.

INITIATIVE 2.6: Enhance the DCOA Effort to Eliminate Food Insecurity

DCOA will launch a campaign to decrease food insecurity through two major food service programs: The management of community based nutrition centers operating five days a week, serving meals that meet one third the RDA requirement; and, the management of the USDA Commodity Supplemental Food Program that will supplement low income seniors monthly food intake. Completion Date: September 2013.

INITIATIVE 2.7: Establish a DCOA First Responder Volunteer Program.

In partnership with the Department of Health train community stakeholders to serve as first respondent volunteers for the Office on Aging. Trained volunteers will provide assistance in mass care, sheltering and evacuation of seniors in emergency situations. Completion Date: September 2013.

OBJECTIVE 3: To increase active customer participation in the decision making process of home and community based services.

INITIATIVE 3.1: Integrate options counseling into current ADRC programs.

The ADRC will integrate Options Counseling into its current Hospital Discharge Planning, Money Follows the Person, and Care Transitions programs. The Options Counselors will work closely with customers transitioning into the community to determine the need, perform an assessment to assess the needs, values, and preference, evaluate the resources, provide decision support, and develop an Individual Plan to provide transition support. Completion Date: September 2013.

INITIATIVE 3.2: Expand the offering of disease self-management workshops.

ADRC will expand its Diabetes Self-Management Program, as well as implement other self-management education programs, to include the Arthritis Self Education Management Program and the Tornado Centrl de su Salud. These self-education program initiatives will target low-income older adults and/or disabled adults, with special emphasis on those transitioning from hospitals or nursing homes. Completion Date: September 2013.

INITIATIVE 3.3: Implement an Awareness Campaign with the Department of Health to inform consumers of the HIV programs and services.

While on-going outreach activities are being implemented to inform seniors and disabled adults about the HIV program and services, DCOA as part of the Department of Health Working Group will help direct education and prevention initiatives targeting seniors infected and affected by HIV/AIDS. The campaign will include outreach and training for senior service network agencies to lower the numbers of new infections.. Completion Date: September 2013.



INITIATIVE 3.4: Establish a flex spending program.

DCOA was awarded an Administration on Aging grant to implement a Lifespan Respite Flex Account System to address affordability barriers. Through this flex spending program, caregivers can be reimbursed \$800 per six months for respite care expenses. Completion Date: September 2013.

INITIATIVE 3.5: Develop new senior villages and maintain existing villages in the District of Columbia.

DCOA will provide technical support for the two new villages being developed east of the Anacostia River and those being developed by faith based organizations. DCOA will continue to provide information and assistance to the existing senior villages in the District of Columbia. A senior village is an organization designed to address the many needs of our seniors. The purpose of the senior village is to ensure that seniors have access to services and supports that will prevent premature nursing home placement. Services and supports include transportation, socialization programs, handyman service, lawn care service, and grocery shopping assistance. Completion Date: September 2013.

OBJECTIVE 4: To explore and launch new senior programs and services and expand current programs and services, to continue to provide community resources.

INITIATIVE 4.1: Conduct a formal evaluation of all DCOA programs and services through the implementation of the service provider performance SCORECARD.

All DCOA programs and services will measure its efficiency based on an evaluation plan to determine where the program is now and how things are going, to determine if the program is having an impact and are program participants benefiting, and to document the program's activities. Evaluation measurement tools will be used continuously throughout the project, specifically at the beginning (during the program design phase), during the implementation phase, as well as an evaluation after the program has been operating for a while, during the sustainability phase. Customer satisfaction surveys, focus groups will detect changes that should be made in the project in order to improve it in subsequent implementation, specify program status and conditions for accountability purposes, as well as provide results that are to be used as a final needs assessment for subsequent planning of changes in the program. A formative evaluation, (process/implementation evaluation) that documents key dashboard performance indicators will provide the necessary data and foundation for service and program enhancements. Completion Date: September 2013.

INITIATIVE 4.2: Track the Impact of Life Support Transportation Services.

DCOA Washington Elderly Handicapped Transportation Service (WEHTS) continues to play a major role in sustaining the life of older DC residents through preventive health/life sustaining transportation services to and from medical appointments, dialysis and chemo therapy. DCOA will use the FOXPRO database to monitor and track the number of seniors transported annually. Completion Date: September 2013.



INITIATIVE 4.3: Document Performance Goals & Outcome Measures of In-Home Care and Services.

DCOA will study the impact of in-home care from two (2) aging-in-place perspectives: Life Satisfaction and Cost Savings Benefit. Completion Date: September 2013.

OBJECTIVE 5. To improve financial sustainability of services to seniors and persons with disabilities.

INITIATIVE 5.1: To implement a cost sharing policy to improve and expand program operations, including an enhanced participant contribution policy to enable grantees to increase the number of services available to seniors in need.

Currently, DCOA through its Senior Service Network provides a plethora of services to include health screenings, nutrition education, counseling, meals, transportation, recreation and socialization among many other supports at no required cost to our clients. However, DCOA utilizes costs sharing for home health services and cab rides via our Call-n-Ride program for eligible participants. These two programs include a sliding scale fee structure based on the individual's income and clients pay based on their financial ability. In addition, DCOA's Senior Service Network providers collect a voluntary participant contribution that is used to offset the overall cost of the services. According to the Older American's Act, States can implement cost sharing methods; however, no senior can be denied services based on their ability to pay. Nonetheless, DCOA is working to expand its cost sharing practices to other programs and services to ensure we are serving those in greatest social need. Older Americans Act, 42 USC Section 3001 et seq., Code of Federal Regulations, 45 CFR Part 1321.67(c) provides service providers the opportunity to develop a suggested contribution schedule for services provided under the Act for Senior Wellness Centers and Congregate Meals Sites operated by DCOA grantees providing health screenings, nutrition education, counseling, meals, transportation, recreation and socialization. 100% of contributions collected are used to cover increased services to older persons with low-incomes, or those at or below the poverty level. Completion Date: September 2013.

INITIATIVE 5.2: Aggressively search and respond to new funding opportunities from all types of funding sources.

DCOA has been awarded the Part B – ADRC Supplemental grant in the amount of \$204,000. DCOA will continuously research and identify applicable grants and funding opportunities. DCOA has subscribed to various listservs to receive grant opportunity alerts from funders, such as federal government, private organizations, non-profits, and foundations just to name a few. The agency will maintain an up-to-date listing of possible funding opportunities and aggressively apply, when feasible, to as many grants as possible to ensure the agency's budget continues to grow to meet the new demand of senior services. The agency will also keep track of all new grant awards. Completion Date: September 2013.



INITIATIVE 5.3: Revamp DCOA’s program and grants system.

The purpose of revamping DCOA’s program and grants system is to bring about better government efficiency by improving the coordination of services by offering technical assistance and training to the Senior Service Network, enhance oversight responsibilities for improvements to community based partners and establish the leader in research that drives policy to improve the lives of seniors and caregivers residing in the District of Columbia. This will require new rules and regulations and the enforcement of existing requirements affecting the implementation and management of Older Americans Act programs and funds. This type of overhaul will enhance the overall management and quality of programs being offered to District’s seniors and their caregivers. Completion Date: September 2013.

INITIATIVE 5.4: Create a new DCOA data dashboard.

Leadership will create a data dashboard with appropriate staff to review program expenditures, budget patterns, multi-year financial trends along with other major data points. The purpose of this initiative is to inform leadership and management of resource and budget activities to improve financial monitoring, budget oversight, assist with future spending projections as well as future demand for senior services, and most importantly, guide and influence aging and long term-care policy. Completion Date: September 2013.

OBJECTIVE 6: To foster relationships with local employers, in an effort to increase employment opportunities for seniors.

INITIATIVE 6.1: Establish an Older Employment Advisory Council.

DCOA will establish an Older Employment Advisory Council, made up of experts on older adults and employment related issues and local employers. The Older Employment Advisory Council will meet monthly to increase community awareness of the Older Workers Employment Program and to identify new employment and training opportunities for seniors. Completion Date: September 2013.

INITIATIVE 6.2: Collaborate with employers to facilitate employment assistance workshops and job fairs

DCOA will collaborate with local employers to facilitate employment assistance workshops and job fairs in senior housing buildings. These employment assistance workshops will be designed to empower seniors with the necessary skills to secure employment. Completion Date: September 2013.

OBJECTIVE 7: To develop and implement a comprehensive “One Stop Shop” Human Resources Division that provides an integrated human resource products and services perspective.

INITIATIVE 7.1: The HR Division will strengthen and encourage individual and organizational performance ensuring management and human resource plans are integrated as part of the same planning process. Ensures that both human resources and diverse human capital management efficiently and efficaciously support the business of DCOA. The Human Resources Division will support improved performance, through



specific programs, benefits, career development/training, organizational development and organizational marketing. Our goal is to be the employer of choice as we cast a wide net to attract and retain the best, brightest and diverse workforce to meet DCOA's programmatic and outreach business goals not only for today but for the future. Completion Date: September 2013.



KEY PERFORMANCE INDICATORS

Measure	FY 2011 Actual	FY 2012 Target	FY 2012 YTD	FY 2013 Projection	FY 2014 Projection	FY 2015 Projection
Number of Seniors receiving: health promotion, nutrition education, counseling at centers and network sites	9,650	9,900	9,900	10,395	10,395	10,400
Percentage of Wellness Center participants who increase their awareness and adopt healthy behaviors as identified by improvements in their overall health (evidence based health outcomes)	80%	85%	90%	90%	90%	90%
Percentage of seniors seeking employment that receive job training or placements	32.77%	50%	50%	55%	55%	55%
Number of elderly and disabled customers served for all services by DCOA/ADRC	10,400	10,800	10,800	10,900	10,900	10,900
Number of new customers served by ADRC age 18-59	1458	700	700	750	750	800
Average time (days) to close ADRC cases	14	14	14	14	14	14
Number of persons transitioning into the community (i.e. Hospital Discharge Planning and Nursing Home)	96	96	51	128	128	128
Number of persons attending DCOA/ADRC outreach events and activities	24,122	34,000	34,000	39,000	39,000	39,000
Number of consumers receiving Options Counseling	174	180	217	350	380	400
Number of family caregivers receiving flex-spending funds*	NA	NA	NA	30	40	45
Value of competitive grants awarded to DCOA	\$6,829 million	\$7,147 million	\$2,030 million	\$6,829 Million	\$6,829 million	\$6,829 million
Percentage of scheduled monitoring reports as defined by agency monitoring plan completed for each grant award	Not Available	100%	100%	100%	100%	100%
Number of Senior Villages	5	3	8	10	12	14
Number of life support transportation customers provided assistance	NA	NA	1,910	2,100	2,200	2,300
Number of people that remain in the community (prevented from going to nursing homes and/or hospitals prematurely)	70	60	43	60	70	70
Number of DCOA Ambassadors	NA	100	115	200	250	300

*Denotes new programming beginning in FY 2013.