# District of Columbia Office on Aging
# DCOA *(BY)*

**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.
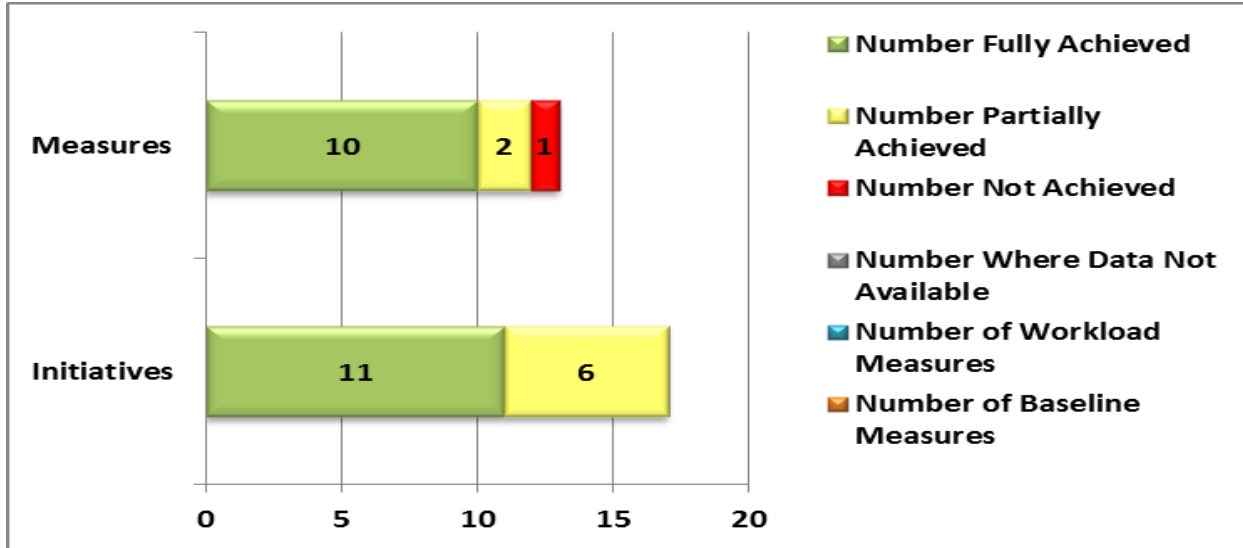
**SUMMARY OF SERVICES**

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; there are 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, benefits and assistance for residents age 60 and older and persons with disabilities age 18 and older; the information and referral system and the Older Worker Employment and Training program which provides training and job placement opportunities for older persons.

✓ After nearly three decades, the Office on Aging administered the **Senior Needs Assessment** to gain an understanding of the needs of seniors in the District. This assessment helped the agency to better understand the needs of older adults, the current service delivery model and the gaps that may exist between the existing and needed services. The results of the assessment shaped the development of **Mayor Gray's New Community Living 5-Year Strategic Plan**, which provides a comprehensive framework for the agency to address various issues impacting the city seniors, persons living with disabilities, and caregivers. The plan defines and an overarching purpose and four goals that will guide future work.

✓ DCOA has **modified service delivery** in a number of areas. For example, DCOA **streamlined its operations** by combining two locations into its current location at 500 K Street, NE. Also, as part of Mayor Gray's One City Action Plan, DCOA **decentralized the Aging and Disability Resource Center** and, as a result, the agency went from one ADRC to eight ADRCs located at our lead agencies. Lastly, DCOA collaborated with the Office of Contracting and Procurement, which awarded three **permanent contracts to food vendors**.

✓ DCOA has **acquired and established new programs and service offerings** to improve the lives of seniors and persons with disabilities. They include the **Commodity Supplemental Food Program** and the **Senior Farmers Market Nutrition Program**, the **DCOA Ambassador Program**, and the **Senior Home Repair Program**. DCOA also hosted **Mayor Vincent Gray's First Annual Senior Symposium**, which was an educational offering for seniors, caregivers, and providers to learn about issues impacting seniors such as barriers faced by the LGBT seniors when accessing services, elder abuse and exploitation, options counseling, and health and wellness.
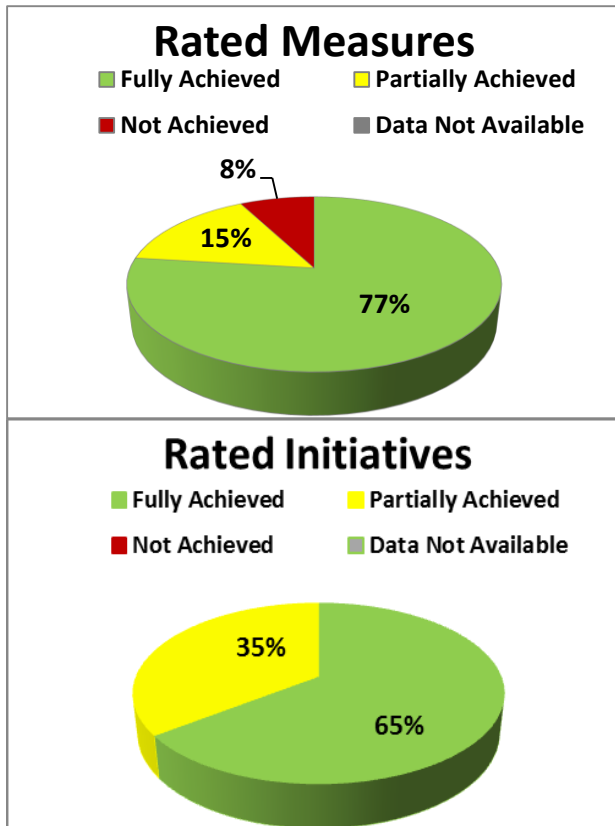
# OVERALL OF AGENCY PERFORMANCE

**TOTAL MEASURES AND INITIATIVES**



Legend:
- Number Fully Achieved
- Number Partially Achieved
- Number Not Achieved
- Number Where Data Not Available
- Number of Workload Measures
- Number of Baseline Measures

Measures: 10, 2, 1
Initiatives: 11, 6

**RATED MEASURES AND INITIATIVES**

## Rated Measures

- Fully Achieved
- Partially Achieved
- Not Achieved
- Data Not Available

8%
15%
77%

## Rated Initiatives

- Fully Achieved
- Partially Achieved
- Not Achieved
- Data Not Available

35%
65%

**Note:** Workload and Baseline Measurements are not included

**Default KPI Rating:**

| | |
|---|---|
| >= 100% | Fully Achieved |
| 75 - 99.99% | Partially Achieved |
| < 75% | Not Achieved |

**Performance Assessment Key:**

🟢 Fully achieved       🟡 Partially achieved       🔴 Not achieved       ⚪ Data not reported

## Agency Management

**OBJECTIVE 1: To improve financial sustainability of services to seniors and persons with disabilities.**

**INITIATIVE 1.1: INITIATIVE 1.1: To implement a cost sharing policy to enable grantees to provide diverse service models.**

**Fully Achieved.** While attempting to create fiscal stability through creative diverse service models to improve financial sustainability is an innovative concept; cost sharing and/or sliding fee scales targeting Older American Act (OAA) programs and services is not permissible. DCOA was asked to determine whether it is permissible under federal and/or D.C. laws to implement "means testing" for programs and services offered by the agency, such that DCOA can focus programs and services on those residents who lack the financial resources to pay for transportation and other programs and services offered by DCOA. Our research established that federal law precludes such means testing/cost sharing for any services supported with funds under the Older Americans Act, 42 USC Section 3001 <u>et seq</u>.

🟢 Specifically, the Code of Federal Regulations, 45 CFR Part 1321.67(c) provides:
Each service provider under the Older Americans Act may develop a suggested contribution schedule for services provided under this part. In developing a contribution schedule, the provider shall consider the income ranges of older persons in the community and the provider's other sources of income. However, means tests may not be used for any service supported with funds under this part. State agencies, in developing State eligibility criteria for in-home services under section 343 of the Act, may not include a means test as an eligibility criterion (emphasis added).

Subsection (d) of this section provides further that "[a] service provider that receives funds under this part may not deny any older person a service because the older person will not or cannot contribute to the cost of the service (emphasis added). Therefore, DCOA cannot deny such services to an older person who does not contribute to the cost of the service. However, DCOA does collect voluntary contributions for its core services.

**INITIATIVE 1.2: Search and respond to funding opportunities from the Federal Government, foundations, and other funding sources.**

🟢 **Fully achieved.** DCOA actively seek applicable grants and funding opportunities; continues to receive funding opportunity notifications from potential funders. DCOA was awarded an ADRC Supplemental grant in September 2012.

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*Government of the District of Columbia*                    *Re-Published February 20, 2013*

*4*

**INITIATIVE 1.3: Update the DCOA Audit Guidelines and DCOA Grants Manual. (FISCAL STABILITY)**
**Partially achieved**. DCOA began the review process for the *Grants Manual* relative to current regulations, guidelines and policies established for use in compliance monitoring of grants and grantee's performance. In FY12, based on the review of the document, the Notification of Grant Award Terms and Conditions were updated and expanded. The Grants Manual will continue to be reviewed and updated to ensure efficiency in operations and to include updates as regulations and policies evolve. The anticipated reauthorization of the Older Americans Act and any changes in the Office of Business Management financial guidelines may require future updates to both the DCOA Grants Manual and A-133 Audit Guide, as well. As changes occur, the information will be distributed and reviewed extensively with grantees to ensure compliance and program efficiencies.

**INITIATIVE 1.4: Review monthly budgets planned vs. actual cost indicators. (FISCAL STABILITY)**
**Fully achieved**. The Program and Grants unit along with the Finance unit meets with Sub-grantees on a monthly basis to discuss financial and programmatic concerns in an effort to avoid potential crisis that would hinder the continuity of services being provided to seniors and those with disabilities.

**OBJECTIVE 2: To expand DCOA's efforts in partnering with sister agencies for the purpose of employing older workers.**

**INITIATIVE 2.1: Job Creation - Increase partnerships and employment and training opportunities for seniors.**
**Fully achieved**. DCOA hosted meetings with new potential business owners who entered Washington D.C. (i.e., Walmart, Costco). To date seniors have been hired at Costco.

**INITIATIVE 2.2: Develop an employment resource guide**
**Partially achieved.** DCOA has established a senior employee support group including returning citizens to provide employment resources and placement assistance. DCOA's OWETP is in the process of developing an employment resource guide.

**INITIATIVE 2.3: Increase outreach efforts to expand pool of employers**
**Fully achieved**. DCOA efforts consisted of community outreach programs, job fairs, and distribution of employment resources.

**OBJECTIVE 3: To improve access to services by District seniors and persons with disabilities.**
**INITIATIVE 3.1: Initiative 3.1: Establish a satellite Aging and Disability Resource Center (ADRC) office in each Ward.**
**Partially achieved**. DCOA has begun to de-centralize the ADRC by piloting the programs and services of the ADRC at Ward 5's Lead Agency, Seabury Aging Services. This de-centralized approach will make ADRC services readily accessible to consumers by providing services in close proximity to the consumer's residence. 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. During the first month of FY13, DCOA will conclude its decentralization.

*District of Columbia Office on Aging*                    *FY 2012 Performance Accountability Report*
*Government of the District of Columbia*                    *Re-Published February 20, 2013*

*5*

**INITIATIVE 3.2: Develop a service delivery model for implementation of ADRC services to be provided in senior housing communities.**

- **Fully achieved**. DCOA has facilitated information sessions, hosted outreach events (health fairs, meet and greet events with DCOA's Executive Director), as well as conducted initial intakes in senior housing communities.

**INITIATIVE 3.3: Initiative 3.3: Implement an Awareness Campaign to inform consumers of the programs and services of the ADRC.**

- **Fully achieved**. The ADRC launched a Metro Bus Campaign entitled "Know Your Options- Decide Your Future". In addition DCOA mailed approximately 17, 283 pieces of informational materials regarding DCOA's programs and services.

**INITIATIVE 3.4: Collaborate with other agencies and service organizations to expand needed services and to reach more seniors and disabled residents.**

- **Fully achieved.** DCOA/ADRC continued its collaboration with DC Fire and EMS to host free health screening programs in senior apartment buildings, congregate meal centers, and wellness centers. Fully achieved

**INITIATIVE 3.5: Assist our community based partners and other stakeholders in creating three new senior villages in the District of Columbia.**

- **Partially achieved**. DCOA held a series of community engagement meetings in Wards 4, 6, 7 and 8. DCOA was able to identify nonprofit organizations that are willing to establish a senior village East of the River. DCOA provided technically assistance for senior villages to be operational in FY13.

**INITIATIVE 3.6: Create the DCOA Ambassador Program and train 40 participants.**

- **Fully achieved**. DCOA held numerous trainings resulting in 114 community trained ambassadors in FY12.

**OBJECTIVE 4: To increase active consumer participation in the decision making process.**

**INITIATIVE 4.1: Collaborate with area hospitals to develop a universal person-centered discharge planning process.**

- **Partially achieved.** DCOA has been actively participating in the Committee on Health's Discharge Planning Meetings. DCOA continues to collaborate with 13 local hospitals to assist with discharges. DCOA has adopted *The Bridge Model*, a social work based transitional care model, to provide transition support to those being discharged from the hospital to home. DCOA will continue during FY13 to collaborate with hospitals to finalize a universal discharge planning process. DCOA and Providence Hospital are in the midst of finalizing a pilot initiative to *The Bridge Model*. DCOA will have staff co-located at Providence Hospital.

**INITIATIVE 4.2: Expand the options counseling program by identifying 50 participants of other established service organizations to complete the options counseling training module.**

- **Fully achieved.** The Options Counseling grant has established an advisory board, made of representatives from relative established service organizations, consumers, and other stakeholders. To date, over 53 participants have completed the approved Administration on Aging's Options Counseling training module, "The Art of Options Counseling".

*District of Columbia Office on Aging*     *FY 2012 Performance Accountability Report*
*Government of the District of Columbia*     *Re-Published February 20, 2013*

*6*

**INITIATIVE 4.3: Conduct diabetes self-management workshops in senior housing buildings and wellness centers.**

**Partially achieved**. DCOA/ ADRC continued to promote healthy aging among the residents of the District of Columbia. DCOA facilitated reunion classes for those participants that completed the Diabetes Self-Management Program at least 6 months prior to the reunion class being held. DCOA participated in the Diabetes Leadership Forum National Diabetes Alert Day. DCOA is scheduled to offer the Stanford Patient Education Leader Training in FY13. This upcoming training will allow DCOA to obtain additional certified Leaders to facilitate upcoming workshops.

**INITIATIVE 4.4: Develop a user-friendly respite care database.**

**Fully achieved.** DCOA/ADRC's respite care database is readily available on the DCOA's website and in print format for those clients and family caregivers who may contact the ADRC.

## Key Performance Indicators – Details

**Performance Assessment Key:**

🟢 Fully achieved      🟡 Partially achieved      🔴 Not achieved      ⚪ Data not reported

| | KPI | Measure Name | FY 2011 YE Actual | FY 2012 YE Target | FY 2012 YE Revised Target | FY 2012 YE Actual | FY 2012 YE Rating | Budget Program |
|---|---|---|---|---|---|---|---|---|
| 🟢 | 1.1 | Number of seniors receiving health promotion, nutrition education, and counseling programs at centers and network sites | 9,650 | 9,900 | | 16,500 | 166.67% | Agency Management |
| 🟢 | 1.2 | Percentage of persons requesting and receiving nutritious meals | 100% | 98% | | 100% | 102.04% | Agency Management |
| 🟢 | 1.3 | 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% | | 100% | 117.65% | Agency Management |
| 🟡 | 1.4 | Value of competitive grants awarded | $6,829,000 | $7,147,000 | | $6,581,757 | 92.09% | Agency Management |
| 🟢 | 1.5 | Percentage of sub grantee's budget spent on programmatic cost | 92% | 92% | | 100% | 108.70% | Agency Management |
| 🟢 | 1.6 | Percentage of scheduled monitoring reports defined by agency monitoring plan completed for each grant award | 0% | 100% | | 100% | 100% | Agency Management |
| 🟢 | 2.1 | Percentage of seniors seeking employment that receive job placements | 32.77% | 50% | | 100% | 200% | Agency Management |

| | KPI | Measure Name | FY 2011 YE Actual | FY 2012 YE Target | FY 2012 YE Revised Target | FY 2012 YE Actual | FY 2012 YE Rating | Budget Program |
|---|-----|--------------|-------------------|-------------------|---------------------------|-------------------|-------------------|----------------|
| 🔴 | 3.1 | Number of elderly and disabled customers served for all services by DCOA/ADRC | 10,400 | 108,000 | | 1,094 | 1.01% | Agency Management |
| 🟢 | 3.2 | Number of new customers served by ADRC age 18-59 | 1,458 | 700 | | 756 | 108.9% | Agency Management |
| 🟢 | 3.3 | Average time (days) to close ADRC cases | 14 | 14 | | 2.36 | 593.84% | Agency Management |
| 🟡 | 3.4 | Number of persons attending DCOA/ADRC outreach events and activities | 24,122 | 34,000 | | 26,414 | 77.69% | Agency Management |
| 🟢 | 3.5 | Number of organized aging in place programs and senior villages operational | 5 | 3 | | 3 | 100% | Agency Management |
| 🟢 | 4.1 | Number of satellite offices established in Senior Housing communities (assertive case management delivery model) | 2 | 4 | | 5 | 125% | Agency Management |