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## **Executive Summary**

The Pennsylvania Department of Aging leads the way in safeguarding and enhancing the lives of older Pennsylvanians, their families, and caregivers throughout the commonwealth. In fulfilling this critical role over the next four years, the Department will be guided by the 2012-2016 State Plan on Aging (“State Plan”), the roadmap for meeting the challenges of serving a large and diverse community of older Pennsylvanians. The State Plan’s goals, objectives, and strategies advance a vision characterized by three strategic directions:

- To help ensure that Pennsylvanians will age and live well and that communities will be places to help them age and live well.
- To ensure access to care at the right time, in the right setting, and at the right intensity.
- To bring the best of Pennsylvania to Pennsylvanians.

Within this document is a description of Pennsylvania’s aging services network; demographic, environmental, economic, and other considerations affecting the current and future population of older adults; and challenges and opportunities related to meeting the needs of Pennsylvania’s elder population. The State Plan also describes how the Department’s services and supports will address the needs of those it serves directly, and how its policies and programs help to enhance the lives of all older Pennsylvanians.

### **The State Plan and State and Federal Objectives**

The Department of Aging’s mission is dedicated to enhancing the quality of life for older Pennsylvanians by empowering diverse communities, the family, and the individual. At its foundation are prevention and protection:

- Prevention from instability in health and well-being that may result in institutional care and dependence on government aid.
- Protection from abuse, neglect, abandonment, and exploitation.

The State Plan supports the complementary objectives of the Older Americans Act, the Pennsylvania Department of Aging enabling legislation, and the Commonwealth of Pennsylvania to help older individuals maintain independence and dignity in their homes and communities.

The development of the State Plan was guided by the principles embedded in the Older Americans Act. These principles focus on individual preference, informed decision making, and full participation in the community. The State Plan also emphasizes the importance of protecting vulnerable older adults, instituting evidence-based practices, and providing comprehensive and coordinated services that support active participation in the community.

The four goals of the State Plan directly address the AoA focus areas of Older Americans Act Core Programs and Consumer Control and Choice. Further, the goals align the federal vision with the Department’s strategic directions in fulfilling its mission and setting its agenda for the next four years.

## **A Snapshot of Pennsylvania's Older Adults**

Currently, Pennsylvania is the fourth “oldest” state in the nation, with nearly 2.7 million individuals aged 60 and older and more than 300,000 individuals aged 85 and older. By the year 2030, it is estimated to exceed 3.6 million Pennsylvanians will be aged 60 and older.

Approximately 675,000 of Pennsylvania's older adults have some form of disability. Many others suffer from chronic physical and behavioral conditions. Approximately 280,000 older Pennsylvanians have been diagnosed with Alzheimer's disease.

Geographically, Pennsylvania's older adults live in a variety of settings. Many reside in the 48 of Pennsylvania's 67 counties that are rural. Many older Pennsylvanians live alone. Some live at or below poverty level, and face the very real fears associated with financial instability due to unemployment and other factors. Many suffer from one or more chronic health conditions. Additionally, there are many that are at risk of abuse, neglect, abandonment, or exploitation.

Beyond demographic, geographic, health and socioeconomic factors affecting the delivery of services, there is a dedicated effort to bring reform, restraint, and responsibility to Pennsylvania's government, and to change the culture of government to a “build and save environment,” developing sound government in a fiscally responsible manner. These factors affect how aging services will be provided in the coming years.

## **Strengths, Challenges, and Opportunities**

Pennsylvania has large, diverse population of older residents that continues to grow in size as well as clinical complexity. With this challenge, the Commonwealth of Pennsylvania is uniquely positioned to enhance the lives of its older residents through a dedicated source of funding, an extensive aging services network, and a commitment to outcomes-focused action.

Pennsylvania is the only state in the nation that dedicates revenue from its lottery to services that support older Pennsylvanians (more than 960 million dollars in the last fiscal year). The Pennsylvania Lottery provides funding for vital in-home services and programs, including but not limited to nutritious meals, prescription drug assistance, in-home personal care services, counseling services, rental assistance, transportation assistance and long-term care services. Through the Department of Aging and the aging services network, over 930,000 older Pennsylvanians in total receive lottery-funded and other services through commonwealth-supported programs.

Yet, the Department recognizes that it has to do more. Through self-examination, research, and outreach to its partners in the aging services network and, most importantly, to the consumers of its services and supports, the Department identified innumerable opportunities to address the needs of older Pennsylvanians. In refining and refocusing its efforts, the Department established themes essential to improving Pennsylvania's robust system of services and supports for older adults. The major themes include timely access to services, choice of services, and improving health outcomes. Examples of successful programs addressing these themes highlighted in the State Plan are the Healthy Steps for Older Adults falls prevention program and Pennsylvania's approach to nursing home transition. The identification of such programs to replicate and the

concentration on priority themes led to the development of the four goals for Pennsylvania's 2012-2016 State Plan.

### **The Four Goals of the 2012-2016 State Plan**

Goal 1: Improve access to care for older individuals at the right time, in the right setting, and at the right intensity.

Goal 2: Empower older individuals to remain in the setting of their choice by serving as a catalyst in developing communities as places in which to age and live well.

Goal 3: Direct older individuals to the supports necessary to maximize their health and well-being.

Goal 4: Revitalize and redesign the aging services network to enhance the lives of older individuals.

The goals build on the successful programs currently in place as well as address gaps identified through the input process. The goals will help the Commonwealth of Pennsylvania enhance the current system and continue to serve older residents through a high-quality, cost-effective, responsive system that clearly makes Pennsylvania the best state in which to age. In order to accomplish these goals, the Department has charted a course with specific objectives, strategies, and performance measures to guide plan implementation. With the State Plan as its roadmap, the Department has established a rigorous and actionable approach for all four goals, ensuring a comprehensive safety net of services for the many Pennsylvanians it serves. The Department will use a series of performance measures to continually evaluate the effectiveness of the changes.

### **Conclusion**

The State Plan is a living document that will guide action and be updated continually as opportunities arise to enhance programs, improve the delivery of services, and allocate resources more effectively. In addition to the specific objectives and strategies presented in the plan, the Department's services are linked by a number of crosscutting themes that advance all of the goals. Among these themes is inclusiveness. The plan focuses on the needs of the individual and his or her service preferences, irrespective of that individual's identification within the many diverse communities of the commonwealth. Another integral element of the plan is its use of technology to enhance to coordination of services, delivery, and assessment. The Department will capitalize on the available and emerging assistive and informational technologies that help older Pennsylvanians and those with disabilities live active, healthy lives. Additionally, the State Plan focuses on the use of data and benchmarking to help inform decisions and drive outcomes. And given Pennsylvania's rich heritage of leading academic institutions and private industry leaders, the State Plan will serve as a catalyst for continuing to bring the best of Pennsylvania to Pennsylvanians.

## Context

Pennsylvania is home to a large and diverse population of older individuals. Appropriately meeting the needs of these individuals now and over the next four years is the overarching objective of the 2012-2016 State Plan on Aging. The State Plan provides a strategic roadmap for the delivery of programs and services to address the inherent challenges posed by the population growth, diverse composition, and varying needs of Pennsylvania's older adults and their families (within the context of complex environmental factors). The State Plan is distinguished by the Department's emphasis on inclusiveness, the broad use of technology to better serve older individuals and the measurement of the outcomes of programs and services.

Pennsylvania's State Plan supports the complementary objectives of the Older Americans Act, the Pennsylvania Department of Aging, and the Commonwealth of Pennsylvania to help older individuals maintain independence and dignity in their homes and communities. The development of the State Plan was guided by key principles embedded in the Older Americans Act. These principles focus on individual preference, informed decision making, and full participation in the community. They also emphasize the importance of protecting vulnerable older adults, instituting evidence-based practices, and providing comprehensive and coordinated services that support active participation in the community.

The four goals of the State Plan directly address the AoA focus areas of Older Americans Act Core Programs and Consumer Control and Choice. Specifically:

- Title III core programs (supportive services, nutrition, disease prevention/health promotion, and caregiver programs) are carried forward in the objectives, strategies, and performance measures in State Plan Goals 1, 2, and 3.
- Title VII elder rights programs are carried forward within the objectives, strategies, and performance measures in State Plan Goal 4.
- AoA Discretionary Grants: Pennsylvania received a 2010 AoA ADRC Evidence-Based Care Transition Programs Discretionary Grant. The grant was aligned with both the AoA Evidence-Based Disease and Disability Prevention Programs and the "programs that support community living" focus areas.
- The objectives, strategies, and performance measures across all four State Plan goals address how the Department will work with its partners, other state agencies, and the Pennsylvania General Assembly to create an environment for maximizing consumer control and choice across the spectrum of long-term care services, including home, community, and institutional settings.

## The Mission of the Department of Aging

The Pennsylvania Department of Aging's mission is dedicated to enhancing the quality of life of older Pennsylvanians by empowering diverse communities, the family, and the individual.

The foundation of the Pennsylvania Department of Aging is prevention and protection:

- Prevention from instability in health and well-being that may result in institutional care and dependence on government aid.
- Protection from abuse, neglect, abandonment, and exploitation.

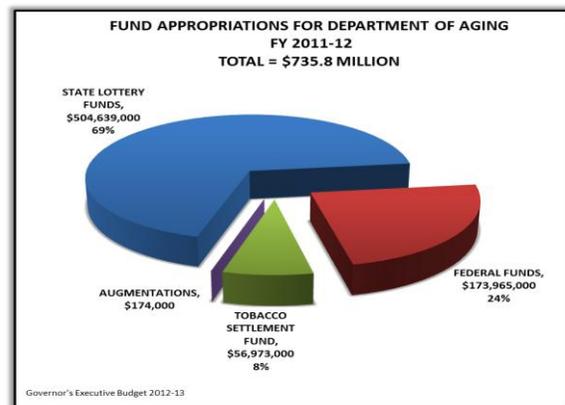
The goals detailed in the State Plan align with the Department of Aging's strategic directions in fulfilling its mission and setting its course for the next four years:

- To help ensure that Pennsylvanians will age and live well and that communities will be designed as places to help them age and live well.
- To ensure access to care at the right time, in the right setting, and at the right intensity.
- To bring the best of Pennsylvania to Pennsylvanians.

## Organization of the Pennsylvania Aging Services Network

Pennsylvania's aging services network serves over 930,000 individuals annually and is comprised of state and community based agencies and organizations and advocacy groups, with thousands of individuals dedicated to serving older Pennsylvanians and their families. Major components of the aging services network are the Pennsylvania Department of Aging and the Area Agencies on Aging. An organizational chart for the Department of Aging is included as Appendix A.

**The Pennsylvania Department of Aging** was created in 1978 by the General Assembly to advocate for the interests of older Pennsylvanians at all levels of government and be the focal point for state coordination and planning initiatives for older Pennsylvanians.



*The majority the Department of Aging's budget comes from the Pennsylvania Lottery Fund.*

As outlined in *Sec, e.g., 71 P.S. §§581- 3(a) (1)-(29)*, the Pennsylvania Department of Aging is the lead agency for the coordination of the commonwealth's administration of federal and state programs for older Pennsylvanians. It promotes the efficient delivery of social and other services to these individuals. The Department also has an integral role in extending and promoting the creation and growth of activities that hold promise for assisting older persons to maintain lives of independence and dignity; to encouraging their involvement in the social, economic, and political affairs of their communities; and to providing dignified and efficient assistance for individuals with disabilities.

In addition to administering the Social Service Block Grant funding, the Department of Aging coordinates a comprehensive array of programs for older adults, their families, and their caregivers. These services include (but are not limited to) information and education on health and wellness issues; a wide range of state funded home and community based services that allow older individuals to remain in their communities and homes ; nutrition services; caregiver support programs; prescription drug assistance; programs for protection from abuse, neglect, abandonment, and exploitation; and advocacy programs to support and empower consumers in resolving concerns and complaints involving long-term care services. The Department also works with other Commonwealth agencies on initiatives related to transition and diversion activities, transportation, housing and veterans-directed services.

Although the Department serves a diverse population of older adults, the majority of current service recipients are widows over the age of 77, with limited economic means but not actively receiving public assistance. For these and all consumers, services provided by the Department and the aging services network help individuals remain in their homes and community and delay or prevent the need for more-costly public services.

The Department of Aging also partners with other state agencies, such as the Department of Health (on issues related to health and wellness initiatives and facilities licensing), the Department of Transportation (to coordinate transportation for older adults), the Department of Community and Economic Development and Pennsylvania Housing Finance Agency (on housing and community development initiatives) and the Department of Agriculture (on nutrition programs).

The Department of Aging and the Area Agencies on Aging work closely with the Pennsylvania Department of Public Welfare, which is the commonwealth's designated Medicaid (also known in Pennsylvania as Medical Assistance) agency. The Departments of Aging and Public Welfare jointly contract with the Area Agencies on Aging for the provision Medicaid long-term living services for older Pennsylvanians. This relationship enables coordination in funding, administration, and service delivery for programs such as the Aging Waiver, Links (Pennsylvania's aging and disability resource center network), and certain home and community based services.

A description of programs and services offered by the Department is included as Appendix B.

**Area Agencies on Aging** are the local representatives of the Pennsylvania Department of Aging and serve as the front doors for aging services at the local level. Area Agencies on Aging operate in 52 planning service areas encompassing all 67 counties of the commonwealth. They serve as local resources providing person-centered information and assistance on issues and concerns affecting older individuals, their caregivers, and their service providers. They provide resources and assistance across the entire spectrum of services including home and community based services, care facilities, transportation, and a wide range of other public and non-governmental services. In addition, Area Agencies on Aging channel funding and assist in programming for the more than 600 senior centers and satellites in the state. A list of contact information for all Area Agencies on Aging is included as Appendix C.

## Advisory Councils

The following advisory councils provide input and assist the Department of Aging and its aging services network partners. In addition, other committees are convened on occasion to facilitate focused discussion on specific issues. The Department also actively participates on many commonwealth committees and councils.

**The Pennsylvania Council on Aging** serves as an advocate for older individuals and advises the Governor and the Department of Aging on the planning, coordination, and delivery of services to older individuals. The 21 members (the majority of whom are required to be aged 60 or older) are nominated by the Governor and subject to Senate confirmation. The Council also has five regional councils of organizations and groups involved in aging programs.

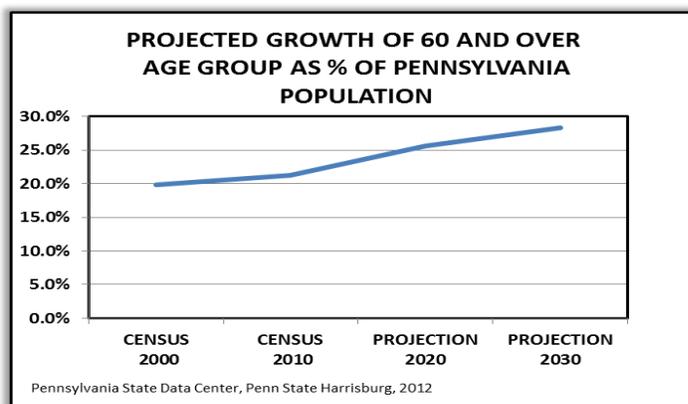
**The Intra-Governmental Council on Long-Term Care** studies the long-term living system in Pennsylvania from funding, operational, and consumer perspectives. It makes recommendations to the Governor and the Department of Aging on ways to develop a full, yet streamlined, spectrum of options for consumers and their families. The Council comprises members of the Governor's cabinet, the General Assembly, representatives of service sectors and consumers, appointed by the Governor.

**The Cultural Diversity Advisory Council** advises the Department of Aging on the continuing development of the aging services network in a manner that is sensitive and responsive to and inclusive of the diverse needs of all of Pennsylvania's older adults. The Council is composed of 25 members from diverse backgrounds and perspectives.

### *Current and Future Population of Older Adults*

#### **Growth in the Number of Older Adults**

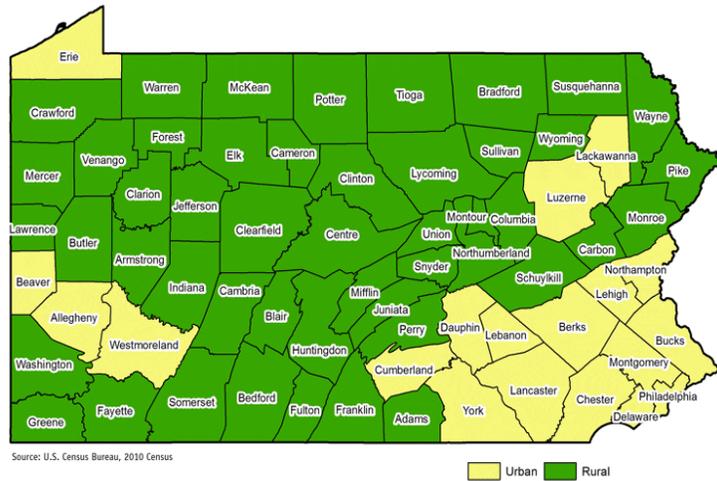
According to the 2010 U.S. Census, the nation's older population is larger than ever before. Trends in Pennsylvania are reflective of national trends.



Amidst this population growth of older individuals at the national level, Pennsylvania has the fourth "oldest" population in the nation; 21.4 percent of the population, or approximately 2.7 million individuals, are aged 60 and older and 2.4 percent, or approximately 306,000 individuals, are aged 85 and older.

*The commonwealth's population of those aged 60 and older is estimated to grow by more than three-quarters of a million individuals in the next 20 years.*

Pennsylvanians between the ages of 45 and 59 currently make up 22.2 percent of the state’s population, or approximately 2.8 million people. In the coming years, the state will experience a rapid growth in its aging population as “baby boomers” enter the ranks of older adults. By 2020, there will be approximately 3.3 million Pennsylvanians aged 60 and older. By 2030, this population is expected to exceed 3.6 million.



*Pennsylvania’s geographic distribution presents unique challenges in the delivery of services and supports to its older adults and their families.*

Pennsylvania has one of the largest rural populations in the United States. Based on a population density of less than 284 people per square mile, 48 of the commonwealth’s 67 counties are considered rural, and are home to 27 percent of the state’s residents. Of these rural residents, 16 percent are aged 65 and older.

### Demographics of Older Adults

The population of older Pennsylvanians is also notable in terms of demographics. The overall percentage of Pennsylvania’s citizens from diverse racial and ethnic backgrounds continues to grow. Currently, 9.9 percent of adults over the age of 65 are minorities, compared to 8 percent less than four years ago. In rural areas, 6 percent of the older adults are minorities.

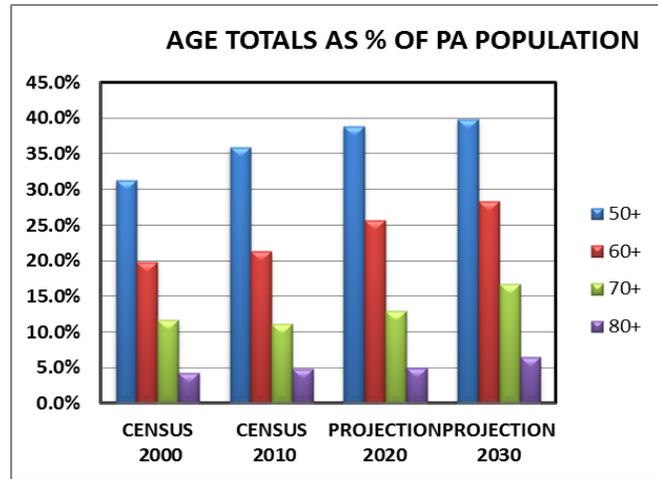
In Pennsylvania, 28.9 percent of individuals aged 65 and older live alone. In the commonwealth’s rural communities, 44 percent of all single households comprise individuals aged 65 and older. Overall, 39.1 percent of older adults live in a home they own.

In Pennsylvania, 27.4 percent of grandparents over the age of 60 are primarily responsible for their grandchildren under the age of 18. Almost one-quarter of these families live in poverty. In fact, 7.6 percent of individuals in Pennsylvania over the age of 65 have been determined to be living in poverty within the last twelve months. Importantly, females are much more likely to live below the poverty line than their male peers.

Although the rate of unemployment for older workers is lower than that of their younger counterparts, more than 6,000 Pennsylvanians between the ages of 65 and 74 are currently unemployed. An additional 1,200 individuals over the age of 75 are unemployed.

In Pennsylvania, approximately 675,000 adults aged 65 and older have some form of disability. Nationally and in the commonwealth, the most prevalent disabilities are related to ambulation, independent living, hearing, and vision. As the population of older individuals increases, there will be a proportionate increase in the number of those affected by some form of disability.

Almost two million Pennsylvanians aged 65 and older receive Medicare benefits and more than 235,000 are enrolled in Medical Assistance. While many individuals rate their health as good, very good, or excellent, many suffer from chronic physical and behavioral conditions.



*Currently, Pennsylvanians aged 60 and older comprise 21.4 percent of the state's population; by 2030, this percentage rises to nearly 30 percent.*

Managing chronic disease continues to be important in helping control health care cost and improve health outcomes. A 2010 Department of Health report showed that in 2007, Medicare was the primary payer for 48 percent of the hospitalizations for diabetes as a principal diagnosis. In 2004, 68 percent of diabetes-related deaths of those aged 65 and older were associated in some way with heart disease. In addition, approximately 280,000 Pennsylvanians aged 65 and older have Alzheimer's disease.

Additional information regarding the commonwealth's older adults is included in Appendix D.

### *Meeting the Challenges and Opportunities*

Given the composition of Pennsylvania's population, the Department faces a number of challenges and opportunities related to the current and future population of older adults. These challenges and opportunities cut across political, geographic, and socioeconomic boundaries. Indeed, the changing landscape of Pennsylvania's older residents informs all of the goals and related objectives of the State Plan and will be considered by the Department in all of its decisions, programs, and activities.

Many older Pennsylvanians have chronic conditions or other impairments that impact their daily activities, which ultimately raise health care costs. Preventive services provide many direct benefits to the individual such as improved health outcomes, and also delay or potentially avoid large financial costs or impoverishment. Waiting for older Pennsylvanians to become ill or impaired will place a much greater burden on the long-term care system overall, and the quality suffers and costs rise.

## Meeting the Needs of the Current and Growing Population

Through its network of Area Agencies on Aging and partners, including Links, the Department provides services and supports to approximately 930,000 individuals aged 60 and older. As Pennsylvania’s population of older adults increases, the number of individuals in need of services will significantly increase. Goal 1 of the State Plan will help provide individuals with streamlined access to care at the right time, in the right setting, and at the right intensity without compromising choice, control, or full participation in decision making.

One key strategy supporting this goal is to work collectively with other Commonwealth agencies to expand Pennsylvania’s Nursing Home Transition Program, the largest of its type in the United States. To date, the program has transitioned more than 8,000 older Pennsylvanians from institutional care into home and community based care. The program has enabled 63 percent of its participants to avoid spending down into Medicaid and saves the commonwealth an average of \$119 a day per successful transition.

Another strategy within Goal 1 of the State Plan addresses the exploration of successful, existing models for integrating home and community based services between healthcare systems and Area Agencies on Aging. One such model is ElderPAC, a partnership between the University of Pennsylvania Health System and the Philadelphia Corporation for Aging. For 15 years, the program has served military veterans and Medicaid Wavier and Options clients, generating savings by avoiding unnecessary Medicare expenditures and allowing individuals to remain in the setting of their choice within the community.

<b>Community Services for Older Pennsylvanians</b>	
Individuals served in the community who are clinically nursing home eligible	39,345
<i>Pre-Admissions Assessment</i>	
Assessments/recertifications	105,725
Referrals to nursing homes	39,140
Referrals to community services	45,660
<i>Individuals Receiving Assistance</i>	
Personal assistance services	1,470
Attendant care services	2,090
Personal care services	13,125
Home support services	6,595
Congregate meals	132,630
Home delivered meals	36,425
Protective services	17,790
Families receiving caregiver support	7,120
PACE/PACENET pharmaceutical assistance (monthly average)	304,130

With its commitment to outcomes-focused services, the Department continues to explore evidence-based practices and programs across the spectrum of long-term care services. As expressed in Goal 4, the Department is committed to revitalizing and redefining how the entire aging services network administers and delivers services to those in need.

Beyond demographic, geographic, and socioeconomic factors, a number of environmental and other factors affect how the aging services network will continue to meet the needs of those

it serves. These include dedicated efforts to bring reform, restraint, and responsibility to Pennsylvania's government, and to change the culture of government to a "build and save environment," developing sound government in a fiscally responsible manner.

### **Commitment to Inclusiveness**

Those served by the aging services network are representative of Pennsylvania's rich diversity. Programming and the delivery of services and supports will be fully inclusive, respecting the unique needs of all individuals, as well as their preferences and choices. Included within the State Plan are strategies to ensure that programs and services adhere to the principles of inclusion.

Goal 4 includes strategies that specifically address expanding information channels and ensuring that messages are inclusive of and accessible to Pennsylvania's diverse population. To help guide the implementation of these strategies, the Department will expand and strengthen the Cultural Diversity Council and enhance its current initiatives. For example, the Council and the Department recently completed a survey of those in the aging services network to determine best practices for reaching out to individuals of diverse backgrounds. The State Plan will translate the findings of this survey into its education and outreach activities.

### **Housing and Transportation as Keys to Aging in Place**

In the last year, Pennsylvania provided more than 35 million free transit rides and 4 million shared rides. However, difficulty in accessing transportation services remains a pressing concern for many older adults. In rural Pennsylvania, which comprises 33,394 square miles, or 75 percent of the state, lack of access to convenient transportation is exacerbated by the sheer distance between one's home and needed services and supports. In other areas of the state, older individuals rely on free or reduced-cost public transit services, yet increasing costs threaten many of these systems. Therefore, there is a great need not only to ensure that transportation services are accessible but that they are provided in the most cost efficient and effective ways.

Pennsylvania's older adults have consistently expressed a preference to age in place, in a setting of their choice. This suggests an intrinsic link between transportation and housing options that are safe, accessible, and affordable, and in the development of communities in which to age and live well. The Department will continue to spearhead efforts to ensure that there are comprehensive and coordinated home and community based services (including caregiver support) to facilitate full participation in the community. Goal 2 of the State Plan specifically addresses how the Department will reduce or remove barriers to transportation and housing in developing communities in which to age and live well.

### **Building on Health and Wellness**

The health and well-being of older adults is among the primary concerns of the Department of Aging. Currently, the Department supports a number of initiatives related to health issues specifically affecting older adults. These include the PrimeTime Health program that promotes healthy living and disease prevention, and the Healthy Steps for Older Adults Falls Prevention Initiative, which is designed to raise awareness of falls, introduce steps to reduce falls, improve overall health, and provide referrals and resources for program participants.

Older Pennsylvanians receive nutritional counseling and congregate or home-delivered meals through the aging service network. The Department of Aging and Area Agencies on Aging annually provide over 12 million nutritious meals. The Department also offers chronic disease management programs to help older adults self-manage chronic diseases such as diabetes and heart disease. It also offers programs for caregiver support to reinforce the care being given to adults with dementia over the age of 60.

Through Goal 3 of the State Plan, Pennsylvania's aging services network will continue to focus on helping individuals to age and live well through evidence-based health programs, and the appropriate nutritional, disease management, and disability supports. Strategies within this goal also address how the Department will partner with thought leaders from Pennsylvania's universities and medical schools to chart a cooperative course for initiatives on Alzheimer's disease and other dementias. The Department will also work closely with the behavioral health community to better support individuals at risk.

### **Supporting and Protecting the Vulnerable**

Unfortunately, with economic downturns, there has been an increased prevalence of reports of abuse, neglect, abandonment, and exploitation of older adults. The number of individuals in need of older adult protective services has grown by 23 percent over the last three years. In FY 2011-2012 alone, nearly 18,000 individuals were in need of older adult protective services, a 17 percent increase from the prior year.

Goals 3 and 4 of the State Plan outline strategies and performance measures to safeguard the rights of all of those served by the aging services network, particularly its most vulnerable consumers. Strategies within the goal direct how the Department will enhance current initiatives related to protection, such as training on preventing and detecting financial exploitation, strengthening elder abuse task forces, expanding partnerships with law enforcement and the judiciary, and enhancing guardianship practices among Area Agencies on Aging and the Ombudsman Program. The Ombudsman Program is designed to support and empower consumers by resolving individual complaints regarding long term care services to help forge new partnerships to guarantee an environment that protects the rights of older adults.

### **Promoting Education and Self-Sufficiency**

As the State Plan was developed, one of the most prevalent themes to emerge both from subject matter experts and consumers was the need to raise awareness of the services and supports offered by the aging services network. Continuing to enhance a number of existing educational initiatives will help to address this need. One example is the APPRISE program, which uses trained volunteers to help older Pennsylvanians and other Medicare enrollees understand their benefits. APPRISE helps over 86,000 older Pennsylvanians annually with their Medicare benefits. Another example is the outreach component of the Pharmaceutical Assistance Contract for the Elderly (PACE) and PACE Needs Enhancement Tier (PACENET) low cost prescription drug programs. These program components are extended and expanded in Goal 2 of the State Plan. Additionally, all four goals of the State Plan contain objectives, strategies, and performance measures related to raising the awareness of older individuals and their families on the services and supports available.

While providing education and assistance to current eligible individuals remains a focus of the Department, the State Plan also recognizes that older individuals and their families must become more proactive in planning for their futures. Goal 1, in particular, provides specific strategies for encouraging individuals to chart a course for greater self-sufficiency as they age. The Department will expand efforts on educating individuals before they are in need of services. In all of its educational efforts, the Department will remain sensitive to cultural implications that may affect the delivery and reception of the message.

### **Linking Older Pennsylvanians with Supports Through the Aging and Disability Resource Centers**

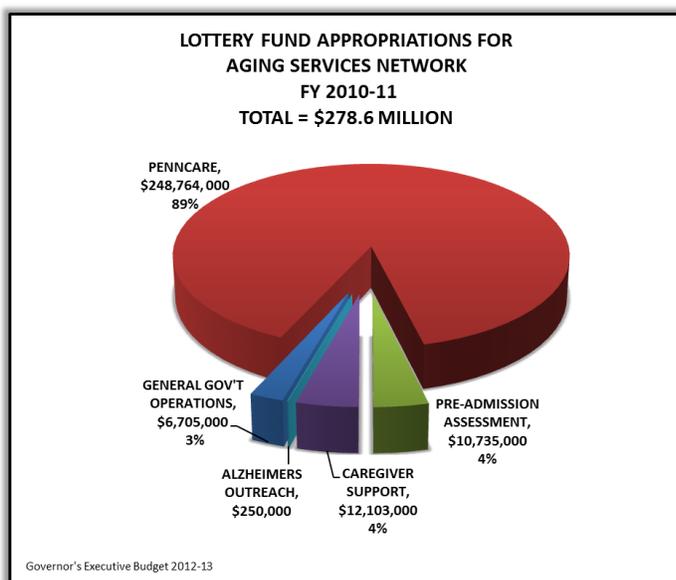
The establishment of Aging and Disability Resource Centers (ADRCs) is a nationwide effort to provide an array of support services to older adults and adults with disabilities who need help with activities of daily living. The ADRCs in Pennsylvania are known as Links.

The Department of Aging, in partnership with the Department of Public Welfare, has established 52 Links that cover all 67 Pennsylvania counties. Links comprise Area Agencies on Aging, Centers for Independent Living, County Assistance Offices and other local partners. They are dedicated to improving access to long-term care supports, expanding the use of community based solutions, promoting consumer directed decision making, and improving the quality of services regardless of an individual’s age, physical/developmental disability, or ability to pay. Link functions are coordinated with other core Older Americans Act services and discretionary grants.

Through Links collaborations, partner agencies are more efficiently and effectively helping individuals navigate a complex system of federal, state, and local programs. Approached in this manner, services are provided with more local community living support while reducing fragmentation and duplication. The coordinated efforts of the Links address the spectrum of needs of Pennsylvania’s older adults and adults with disabilities, while promoting better health through cross-training and information sharing among partners. Goal 1, Objective 1.3, of the State Plan includes a strategy to expand the utilization of Pennsylvania’s Links.

### *Funding and the Quest for Innovative Solutions*

#### **The Pennsylvania Lottery as a Unique Revenue Source**



Pennsylvania is the only state in the nation to use lottery funding for services that support its older residents; the commonwealth will continue to protect Pennsylvania Lottery funding as a dedicated source of funding for older Pennsylvanians.

The lottery provides funding for a number of programs, including property tax and rent rebates, Area Agencies on Aging and senior centers, in-home personal care services, nutrition programs, free transit and reduced-fare Shared Rides, PACE and PACENET low cost prescription drug programs, and nursing facility services.

### **Making the Most of AoA Grants**

In addition to lottery funding and other sources of revenue, two recently awarded AoA grants helped to advance the health and wellness of older Pennsylvanians and their caregivers. The two-year ADRC Evidence-Based Care Transition Grant was awarded in 2010. Grant funding was allocated to the Delaware County Office of Services for the Aging for implementation of care transition services to reduce hospital re-admissions within the Crozer-Keystone Healthcare System and improve access to community based services. The program has reduced hospital re-admissions by more than 50 percent. The success of the program has led to a provider agreement with Medicare to deliver services at three additional hospitals in Delaware County.

The Lifespan Respite Care Grant was also awarded to the Department in 2010. This funding allowed the establishment of a statewide lifespan respite care system to improve coordination and access to respite care services across the commonwealth. The grant also facilitated the establishment of a Lifespan Respite Care Advisory Council to lead, support, and monitor the development of the lifespan respite care system.

Additional federal assistance was recently received for the Western Pennsylvania Community Based Care Transitions Program (WPA CCTP). WPA CCTP is one of the first programs awarded a Centers for Medicare and Medicaid Care Transitions Grant. WPA CCTP is a partnership of the Southwestern Pennsylvania Area Agency on Aging, Inc., Westmoreland County Area Agency on Aging, Canonsburg General Hospital (part of the West Penn Allegheny Health System), Excelsa Health's Frick, Latrobe, and Westmoreland Hospitals, Monongahela Valley Hospital, and Washington Hospital. The collaborative supports high-risk Medicare patients, following their transition from hospital discharge to their homes or to other care settings. The program meets the Western Pennsylvania Community Based Care Transitions Program goals of improving quality of care, reducing readmissions, testing sustainable funding streams for care transitions services, and demonstrating measurable savings to Medicare (through reduced acute care hospital readmissions among Medicare fee-for-service beneficiaries at high risk of readmission).

### **Allocating Funding to Area Agencies on Aging**

In allocating funding to Area Agencies on Aging, the Department's Intrastate Funding Formula applies an allocation formula and a distribution methodology. The Formula incorporates federal and state rules requiring the Department take into account the "geographical distribution of older persons across the state, including the proportion of older persons with the greatest economic and social needs." The formula also pays particular attention to low-income, minority, rural, and age distribution. The Formula is included as Appendix E.

## **The Path Ahead**

The Commonwealth has demonstrated success in a variety of programs, including increasing the number of individuals transitioning from institutional facilities to community settings, balancing the system between home and community based care and institutional care, expanding adult daily living services, and reaching out to a greater number of individuals who may be eligible for services and supports. The Department has also received national recognition for innovative programming, including its PrimeTime Health program, Healthy Steps for Older Adults falls prevention initiative, and APPRISE program. In addition, recent legislation aligned federal and state caregiver support programs to allow greater flexibility in the administration of these programs throughout the state, enabling the Department to serve a greater number of family caregivers within existing funding mechanisms.

Building on these successes, the State Plan lays out an ambitious agenda for the Department of Aging and its partners, one they will accomplish while remaining good stewards of federal and state dollars. The Department will work efficiently and challenge the entire aging services network to continue to use existing resources judiciously. Within all four goals of the State Plan are innovative strategies, such as public-private partnerships, volunteer networks, and other opportunities, for creatively funding and enhancing current and promising programs, and for eliminating redundancies, increasing transparency through better information sharing, and streamlining service delivery.

### *Developing the State Plan*

In developing the State Plan, a comprehensive initiative was undertaken to capture information from a broad and diverse cross-section of interested parties throughout the commonwealth, including consumers, public and private service providers, and the public. Major activities leading to the development of the goals, objectives, strategies, and performance measures in this final document include:

- Conducting internal planning within the Pennsylvania Department of Aging.
- Reviewing and incorporating the results of satisfaction surveys from consumers of services.
- Hosting small group information-gathering sessions with advisory groups, including the Pennsylvania Association of Area Agencies on Aging, Pennsylvania Council on Aging, and Pennsylvania Centers for Independent Living.
- Conducting a series of focus groups across Pennsylvania with subject matter experts in a variety of fields on issues related to disability, aging, and long-term living.
- Facilitating a series of community focus groups throughout the commonwealth with consumers served by the network, including older adults, individuals with disabilities, and informal caregivers.
- Reviewing and including information from the Local Area Plans submitted by the state's 52 Area Agencies on Aging.
- Soliciting public input and conducting public hearings to receive comments on the draft State Plan.

## **Internal Planning**

Early in the fall of 2011, the Department began what would ultimately be an almost year-long process to prepare the State Plan. Activities included two staff retreats, ongoing bi-monthly meetings of staff, a conference call with the National Association of States United for Aging and Disabilities (NASUAD), and webinars with Area Agencies on Aging directors and their resource partners. The planning team worked collaboratively with executive staff at the Department of Aging, sister agencies (including the Pennsylvania Departments of Transportation, Insurance, and Public Welfare), and various state committees and sub-committees dedicated to aging issues and long-term care.

The team also worked collaboratively with external partners, including the Penn State Data Center, other state agencies and organizations, universities, and healthcare organizations and associations throughout the state.

## **Satisfaction Surveys**

For a number of years, the Department has conducted satisfaction surveys of both providers and consumers of services. The reported outcomes and feedback from thousands of respondents helped to determine the strategic direction for the state and the means of refining current initiatives. Summary documents regarding the results of three of these surveys (APPRISE Annual Enrollment Quick Survey, Aging Participants Satisfaction Survey, and Farm Show Survey) are included as Appendix F.

## **Breakout Sessions**

In early November 2011, the Department and its partners, the Pennsylvania Association of Area Agencies on Aging and the Pennsylvania Council on Aging, met for their Annual Statewide Meeting. One of the primary objectives of the meeting was to gather feedback from attendees (via facilitated breakout sessions) to assist in developing the State Plan. Each of the sessions included a panel of Department subject matter experts to frame the discussion. The focus of the sessions was on input from the planning partners most familiar with the needs of the commonwealth's aging and residents with disabilities.

Key findings from these sessions related to the need for improving communications on available programs and services, enhancing access to programs and services, smoothing the transition of care, providing appropriate and affordable housing, developing more-accessible transportation, enhancing the role of senior centers, and promoting individual responsibility. A summary of the major issues identified in the sessions is included as Appendix G.

## **Subject Matter Expert Focus Groups**

In February and March 2012, the Department convened a series of focus groups in each of the five Pennsylvania Council of Aging regions. The purpose of these sessions was to engage external subject matter experts, including long-term care providers, physicians, community planners, business leaders, consumer advocates, and researchers, in validating the findings of the November sessions and outlining potential solutions to the challenges facing older Pennsylvanians.

Participants proposed approaches to the highest priority issues identified in the previous breakout sessions. They also promoted the use of technology to facilitate aging in place, consistency in program requirements, sensitivity to and respect for diversity, and the adoption of evidence-based programs. In all of the sessions, emphasis was placed on educating healthcare providers in aging issues, enhancing advocacy, strengthening protective services, strengthening support for caregivers, and promoting end-of-life supports that reflect the desires of the individual. A summary of the major findings of these sessions is included as Appendix H.

### **Consumer Focus Groups**

In April and May 2012, the Department hosted focus groups with consumers and their informal caregivers. Participants included diverse groups of older individuals and adults with disabilities living in three distinct geographic settings (suburban, urban, and rural) in the western, central, and eastern regions of Pennsylvania. Focus group members shared their perspectives on how the network has met their needs and how the scope and delivery of services could be improved.

Major themes included providing clear communication regarding programs and services, ensuring a person-centered approach, streamlining care transitions, facilitating aging in place through affordable and appropriate housing and accessible transportation, strengthening senior centers, and promoting individual responsibility. A summary of these sessions is included as Appendix I.

### **Area Agencies on Aging Area Plans**

Like the State Plan, the format of the Area Agencies on Aging Plans fulfills the requirements of the Older Americans Act and pertinent goals and objectives. A thorough review of the individual plans, as well as a comparison of the individual plans to one another and to the State Plan, allowed the Department to identify critical issues and trends, as well as common barriers and needs. This, in turn, assisted in the development of goals and objectives common to both the State Plan and local Area Plans. A summary of these plans is included as Appendix J.

### **Public Comments and Hearings**

Pennsylvanians were provided the opportunity to comment on the State Plan throughout the development process through the Department of Aging's website. In June 2012, a draft version of the Plan was presented for review and comment via the website and in three public hearings. The notice of public hearing is included as Appendix K.

## Goals, Objectives, Strategies & Performance Measures

### *From Activities to Outcomes*

In developing the State Plan on Aging, the Department has made a major commitment to establishing outcomes-based performance measures for as many objectives as practical. This type of performance measure is designed to indicate a direct linkage between planned activities and the specific results of those activities in the lives of older Pennsylvanians and caregivers. In making this deliberate transition to outcomes, the Department recognizes that evaluating current levels of performance may not be fully supported by existing data. Therefore, the immediate need is to establish baseline data to use in gauging improvement. Unless otherwise noted, the Department will establish the needed baseline data for improvement-related objectives in the initial year of plan execution, from July 2012 through June 2013. This baseline data, once established, will serve as a basis for establishing targets for performance in subsequent periods of plan implementation.

Many of the planned objectives include metrics to be used for the initial baselines and, later, in setting targets. For example, in Objective 4.2, which addresses protection from abuse, the baseline will reflect the annual incidence of elder abuse, neglect, abandonment, and financial exploitation. With this baseline in place, the Department will be better able to establish a specific target for improvement, such as a reduction in the incidence of abuse by a defined percentage. Naturally, there will also be sensitivity to such factors as increased reporting of abuse, which may also result from an enhanced focus on protective services.

Finally, some of the objectives of the plan relate to new performance capabilities. For these objectives, measurement will be carried out by tracking the development of systems, procedures, or technological capabilities. Here, the conventional criteria for project management apply: schedule, cost, and quality compliance.

### *The Four Goals of the 2012-2016 State Plan*

#### *Goal 1: The Three Rights*

**Goal 1: Improve access to care for older individuals at the right time, in the right setting, and at the right intensity.**

*Objective 1.1: Improve planning for and coordination of care transitions to ensure that the appropriate services and supports are in place when needed.* Transition of care is an intrinsic part of the entire continuum of care, and for many individuals, their entry point into the aging care network. By improving the process, the Department working collectively with other Commonwealth agencies can help to ensure that individuals more efficiently access the appropriate level of care at the appropriate place and time.

## Strategies

- Enhance AAA and/or other provider network capacity to successfully support an individual's transition of care from the hospital to home, nursing facility to home, and between sectors of the long-term care continuum. Pursue opportunities to provide mediation services to facilitate disputes arising during transition. Explore partnerships with hospitals and insurers to finance community "navigators" to help advise patients and their families on care options.
- Expand partnerships with hospitals and health systems to increase access to long-term living supports for hospitalized individuals upon discharge. Convene a hospital discharge planning group including the Departments of Aging, Public Welfare, and Health, the Hospital and Healthsystem Association of Pennsylvania, and other healthcare associations and medical centers to expand on existing efforts.
- Explore the replication of approaches, such as the ElderPAC program, to reduce Medicaid nursing home costs by more efficiently providing home and community based services to older individuals.
- Through collaboration and partnership with universities, insurers, healthcare providers, local governments, and the aging services network, develop a leadership council to implement innovative approaches to improve service delivery, consumer education, and community activism. Host a leadership retreat to strategize these approaches and to engender ongoing collaboration to improve the Department's response to those served by the aging services network.

**Objective 1.2:** *Convene and engage providers and other interested parties to help ensure the most favorable outcomes in a person-centered system.* Providers, particularly physicians and other healthcare providers, are on the front line of the aging services network. Therefore, providers must be better aware of services and supports within the continuum of care and engage their patients or clients in making decisions about long-term services and supports.

## Strategies

- Engage partners across the care continuum (e.g., insurance company representatives, community leaders, housing providers) to define the future of long-term services and supports in Pennsylvania, focusing on improving health outcomes.
- Educate healthcare providers, such as primary care physicians, nurse practitioners, and physician assistants, on the need to perform simple tests during routine examinations to assess activities of daily living and decision-making ability, and to screen for depression. Devise a training design and implementation schedule in collaboration with the Primary Care Association, the Long-Term Living Training Institute, and the Department of Aging's Medical Detailing program.
- Work with state agencies and associations to develop and distribute guides and resources to raise awareness among healthcare professionals to assist clients in long-term care decision making.

**Objective 1.3:** *Enhance individuals' ability to choose how and where they receive services within a fiscally responsible system.* Improvements to systems within the care continuum will allow for greater stewardship of public funds without compromising an individual's right to choose, control, and fully participate in decision-making.

## **Strategies**

- Provide individuals with information on provider performance (via public access to Internet-based provider performance reports) so they can make informed choices.
- Provide information about alternative care settings and services. Strengthen long-term living counseling of individuals to reduce fragmentation, provide information on options, and streamline access to service. Enhance the visibility of Links and other community partnerships.
- Expand the partnership with the Department of Military and Veterans Affairs to enhance access to home and community based services for military veterans.
- Develop and update policies and directives to ensure standard practices and build seamless connections within home and community based services. Conduct training on policies and directives, and post current policies and directives on the Department's website.

*Objective 1.4: Build on existing programs (both public and private) that educate the public on the necessity for planning for their long-term needs.* Pennsylvania has already realized an impressive public response to existing educational efforts related to long-term care risks and options for services, as well as financial planning options. Building on these initiatives is essential in continuing to raise awareness of the need for planning for one's future.

## **Strategies**

- Implement education programs that encourage individuals and families to plan for long-term care services, including active participation in their own healthcare and in accessing publicly financed benefits and services. Partner with private industry to develop the framework for a public education campaign on planning for one's own future.
- Work with community partners to educate consumers on long-term care insurance. Produce and distribute inclusive, multicultural educational materials.
- Create an awareness-raising strategy for young adults so they can pass information on to parents, grandparents, and older relatives, particularly in families where older individuals may have limited English proficiency.
- Research state and national outreach campaigns and review data regarding life planning, and then develop strategies to encourage action by individuals.
- Collaborate with industry leaders and university partners to enhance the Department's website to provide information to support informal caregivers.

Objective	Performance Measure
1.1	Percent change in patients aged 60 and older who receive transitional care services readmitted to the hospital within 30 days of previous hospitalization.
	Number of Area Agencies on Aging engaged in transitional care services with local healthcare institutions.
1.2	Establishment of a standardized assessment methodology based on established health outcomes. Baseline period: 2014. Initial performance period: 2015.
1.3	Percent change in consumers confirming that they were offered the choice of home and community based services or nursing facility services.
	Percent change in consumers responding favorably to satisfaction surveys on program awareness and access to services.
	Awareness levels among adults aged 50 or younger (including minority subsets), as measured by the Penn State University Statewide Survey.

*Goal 2: Communities in Which to Age and Live Well*

**Goal 2: Empower older individuals to remain in the setting of their choice by serving as a catalyst in developing communities as places in which to age and live well.**

*Objective 2.1: Facilitate the exchange of information on innovative solutions in housing and transportation that support independent living.* Throughout the nation, and particularly in Pennsylvania, numerous innovative models exist which help individuals remain in the setting of their choice. The Commonwealth, through its agencies, can play a vital role in seeking out, collecting, evaluating, and disseminating information about these models for the aging services network.

**Strategies**

- Work with the Pennsylvania Department of Transportation and local governments on a statewide survey of all current transportation resources and identify gaps in these services. Work to facilitate the exchange of information to bring resources together to fill those gaps. Explore conducting and distributing the results of a comprehensive survey through stakeholders, including Links.
- Convene a working group of appropriate housing organizations and interested parties to collect and disseminate best practices and innovative models, and to identify barriers and potential solutions. Reconvene the Housing Alternative Work Group. Review existing housing reports from the past five years and use their findings and recommendations as the basis for strategically moving ahead in developing affordable, accessible housing in which to age in place.
- Explore alternative residential settings for older adults with disabilities.

*Objective 2.2: Continue to educate and engage the public on the services and programs that foster independence and self-sufficiency.* The Department provides many programs and resources to older individuals and their informal caregivers. Public input regarding these efforts has

demonstrated that continuing work is needed to better educate and engage individuals on the services and programs that are available to them.

### **Strategies**

- Develop education and communication strategies for the public so that they will better understand services and options.
- Increase awareness of adaptive technologies, remote monitoring, and assistive devices. Work with Councils on Independent Living, Links, and Area Agencies on Aging to identify adaptive technologies, remote monitoring, and assistive devices and to develop an awareness campaign.
- Work with the State Employee Assistance Program to develop state employee long-term care education and to support systems to identify what works best for individuals and their informal caregivers. Eventually, introduce the program to private industry as a model.
- Continue to use the ombudsman program to expand the Pennsylvania Empowered Expert Residents (PEER) training to enable individuals in long-term care facilities to learn to advocate for themselves and others. Include ombudsmen volunteers and facility staff to support the importance of residents' rights.
- Establish a Department Speakers Exchange (not limited to Department staff) as a resource for public education and outreach on the programs, services, and supports available through the aging services network.

***Objective 2.3:** Promote the development of partnerships (among and between state agencies, home and community based services providers, local governments, and private partners) that encourage the evolution of communities in which to age and live well. As principal advocate, the Department is well positioned to take the lead in facilitating partnerships, as well as to break down regulatory or other barriers to partnership, that support aging in place at all levels of the continuum.*

### **Strategies**

- Increase partnerships with housing organizations (e.g., Housing and Urban Development, Pennsylvania Housing Finance Agency).
- Invite state and local government officials to participate in meetings, events, and committees hosted by the Department.
- Collect and analyze data for use in developing aging in place and naturally-occurring retirement communities/village models. Identify select models of aging in place.
- Facilitate the development of self-sustaining aging in place models. Hold the second Aging in Place Roundtable. Focus the agenda on metrics to determine success in terms of reduced hospitalizations and use of nursing facilities, and in developed self-sustaining models. Convene working sub-groups on an ongoing basis.

***Objective 2.4:** Enhance initiatives within community based services to prevent isolation and enable older individuals to stay involved in their communities and in the setting of their choice. Studies have shown that many older Pennsylvanians wish to stay in their communities as long as possible but may lack access to comprehensive and coordinated services to support living and participating in the community. The Department is committed to ensuring that this is an attainable objective, with special emphasis on innovative senior center and adult community*

center programming and in employment, education, and volunteer opportunities to encourage older Pennsylvanians to stay active and involved.

### **Strategies**

- Promote and improve volunteer opportunities for older Pennsylvanians.
- Work with the Center for Rural Pennsylvania on research to assist in expanding outreach in isolated areas of the commonwealth.
- Working with Area Agencies on Aging, evaluate the current role of senior centers and work toward enhancing their programming to attract more diverse participation.
- Collaborate with educational institutions to set up internship programs with college gerontology students, where they would work with isolated older adults and learn more about patient/person mindset, medical needs, and other issues.
- Explore expanding the roles of and the relationships with public and private schools to help engender multi-generational engagement and understanding.

**Objective 2.5:** *Expand employment opportunities for older Pennsylvanians and job opportunities that support older Pennsylvanians.* The Department will work with its partners to promote the direct employment of older Pennsylvanians and to expand employment opportunities for those involved in professions serving older persons in the commonwealth.

### **Strategies**

- Educate employers on the value of older workers through the state Workforce Investment Board and Senior Community Service Employment Program.
- Continue to encourage and support the employment of individuals of diverse backgrounds within the aging services network.
- Partner with community colleges and the Pennsylvania Department of Education to expand job skills training for older Pennsylvanians.
- Partner with the Pennsylvania Homecare Association (PHA), the Hospital Association of Pennsylvania (HAP), the Pennsylvania Health Care Association (PHCA), and LeadingAge to continue to improve the training and skills development opportunities of direct care workers.
- Work with trade associations and the Pennsylvania Department of Health to align the scope of practices in Pennsylvania with best practices in care delivery.
- Work with the Pennsylvania Higher Education Assistance Agency (PHEAA) to explore educational loan incentives for individuals in careers that support older Pennsylvanians.
- Work with the Department of Revenue to explore tax credits for businesses that hire older Pennsylvanians.

Objective	Performance Measure
2.1	Percent change in subsidized housing units available to consumers and in utilization rates.
	Percent change in naturally-occurring retirement communities developed annually.
	Reduction in transportation gaps (including service availability and disparities in consumer co-pays by county).
2.2	Percent change in consumers aware of aging network services identified through PACE statewide survey.
2.3	Revitalization of the Intergovernmental Council and Housing Alternative Work Group, including active, quantifiable engagement of new partners.
2.4	Percent change in the rates of participation in senior center programming and events.
	Percent change in volunteer hours provided by older adults in Department-supported programs.
2.5	Percent change in senior unemployment rate (based on standard definition of employment-seeking senior population).
	Percent change in Senior Community Service Employment participants who exit the program for employment.

### *Goal 3: Health and Well-Being*

#### **Goal 3: Direct older individuals to the supports necessary to maximize their health and well-being.**

*Objective 3.1: Encourage a holistic approach to health and well-being that considers individuals and their environmental, physical, emotional, behavioral, and financial circumstances. This person-centered approach will help to ensure that supports and services are tailored to the unique needs of every individual served by the aging services network, in promoting the highest possible quality of life.*

#### **Strategies**

- Collaborate with the Departments of Agriculture and Health to enhance access to healthy food in home-delivered and congregate meal programs.
- Through partnerships with universities and professional associations, educate physicians and other medical professionals on health and wellness programs offered through the Department.
- Promote Medicare prevention benefit.
- Expand the partnership with the behavioral health community to better assist those identified to be at risk.

**Objective 3.2:** *Design or apply existing evidence-based models to support health and wellness initiatives.* The Department has incorporated evidence-based programming and will continue to pursue and enhance intervention strategies that have proven to be effective in promoting health and wellness and in reducing the risk of disease, disability, and injury.

### **Strategies**

- Expand evidence-based chronic disease management programs.
- Transition Title III-D programs to evidence-based programs for health and wellness.
- Implement wellness models in a defined number of senior centers.
- Expand the Healthy Steps in Motion and Healthy Steps for Older Adults programs.

**Objective 3.3:** *Strengthen the infrastructure to improve the quality of life for individuals and their informal caregivers who are living with, or at risk for, certain chronic conditions.* The Department will take the lead in educational outreach and in facilitating coordination across agencies and service providers to ensure that individuals and their informal caregivers are receiving the care they need.

### **Strategies**

- Increase awareness on types of self-neglect and how to reduce health risks.
- Develop caregiver support and education template programs that can be replicated across the aging services network.
- Identify people who are at risk for a chronic disease and focus on prevention by working with the other state agencies who come into contact with them first.
- Host community forums to educate informal caregivers. Explore the possibility of piloting a program for convening support groups of informal caregivers, where education and idea sharing can take place.

**Objective 3.4:** *Improve the level of support for individuals with terminal conditions and their informal caregivers, including supportive services for those with Alzheimer's disease and other forms of dementia.* The Department will lead efforts toward early diagnosis and appropriate referrals for individuals and their informal caregivers to home and community based services.

### **Strategies**

- Convene meetings with leaders from Pennsylvania's universities and medical schools to chart a cooperative course for Alzheimer's research and education.
- Convene a committee and develop a state plan on Alzheimer's disease and other dementias.
- Explore the opportunity for expanded pre-screening.
- Clarify policy guidance and direction on available end-of-life services, such as hospice and waiver services, for those with terminal illnesses.

Objective	Performance Measure
3.1	Percent change in the enrollment rate for the Supplemental Nutrition Assistance Program.
	Percent change in the enrollment rate for Medicare prevention training.
3.2	Percent change in health and wellness programs utilized by the aging services network that meet Title IIID funding eligibility.
3.3	Caregiver support programs in the aging services network by 2015.
3.4	Development of a draft state plan on Alzheimer’s disease by 2014.
	Drafting of policies for guidance and direction on end-of-life services by 2015.

*Goal4: Revitalize and Redesign*

**Goal 4: Revitalize and redesign the aging services network to further enhance the lives of older individuals.**

*Objective 4.1: Ensure that the aging services safety net is flexible in meeting the unique needs of the individual, yet consistent across programs (where appropriate and possible).* The Department recognizes that a “one size fits all” approach is impractical and will examine administrative, regulatory, and other barriers that inhibit a person-centered approach.

**Strategies**

- Strengthen the approach to applying consumer input.
- Continue to enhance the capacity of the aging services network to move toward data-driven, evidence-based practices in a competitive marketplace.
- Work with Area Agencies on Aging in capacity building within their programming.
- Develop and strengthen data collection and performance accountability within the long-term care Ombudsman program.
- Study and identify regulatory barriers that inhibit appropriate business practices for providers who serve the aging services network and develop a plan (within the law) to minimize these barriers.

*Objective 4.2: Strengthen protective services to prevent the abuse, neglect, abandonment, and exploitation of older adults.* The Department will strengthen the safety net through promotion of a comprehensive elder justice system, elder abuse prevention and response, and state legal assistance development.

**Strategies**

- Strengthen the education and training of financial institution staff and healthcare providers in recognizing financial exploitation and understanding the mechanisms for reporting suspected exploitation.
- Provide collaborative training, through coordination with state agencies, the Office of the Attorney General and local law enforcement, to establish a uniform protocol on how to respond to cases of abuse and exploitation.

- Increase public awareness and provider education on abuse, neglect, abandonment, exploitation, and advocacy.
- Develop closer working relationships between administrators of the Older Adults Protective Services Act requirements and Ombudsman to prevent elder abuse and neglect where possible.
- Examine current guardianship practices throughout the commonwealth to engender better understanding and consistency.

**Objective 4.3:** *Expand information channels and ensure that messages are inclusive and are accessible to a diverse population.* Pennsylvania’s population is rich in diversity and the Department will continue to ensure that information is disseminated in a way that accommodates this diversity. The Department will also seek new mechanisms to reach individuals, including expanding the use of successful technology-based models.

**Strategies**

- Explore expanding the use of technology in reaching the diverse population of consumers.
- Extend the best practices infrastructure currently used by PACE/PACENET to provide information and assistance regarding all programs and services.
- Continue to expand and strengthen the Cultural Diversity Advisory Council, including the distribution of multilingual publications.
- Continue diversity education initiatives.

**Objective 4.4:** *Provide the guidance necessary to leverage our academic, research, and private institutions to improve the lives of older individuals.* By bringing the “best of Pennsylvania to Pennsylvanians,” the Department can serve as a champion for not only implementing innovative programs but by bringing in outside resources to fund initiatives.

**Strategies**

- Apply PACE research modeling to analyze the impact of services delivered.
- Strengthen existing partnerships.

<b>Objective</b>	<b>Performance Measure</b>
4.1	Development of a plan to minimize identified regulatory barriers by 2015.
4.2	Percent change in incidences of elder abuse, neglect, abandonment, and exploitation.
4.3	Percent change in ineligible consumers contacting PACE/PACENET who are referred to alternative sources of support and assistance.
4.4	Formal collaborative agreements with Pennsylvania’s medical research institutions on identified priority issues by 2013.

## Emergency Preparedness Plan

Recognizing that older individuals are particularly vulnerable in times of human caused and natural disasters and emergencies, the Pennsylvania Department of Aging is an active partner in the Commonwealth of Pennsylvania's emergency management planning and operations.

In Pennsylvania, the standard Incident Command Structure flows from the Federal Emergency Management Agency to the Pennsylvania Emergency Management Agency, to the 67 County Emergency Management Agencies, and to the local Emergency Management Agencies (if applicable). The Department is responsible for supporting the Pennsylvania Emergency Management Agency's activities and is specifically identified as a support agency on seven of the 15 Emergency Support Functions.

In addition, the Department maintains a five-member Aging Emergency Preparedness Liaison Officers Team. At least one of the team members can be reached on a 24-hour, 7-day and 52-week basis by the State Emergency Operations Center, which is operated by the Pennsylvania Emergency Management Agency.

The Aging Emergency Preparedness Liaison Officers Team is responsible for:

- Staffing the State Emergency Operations Center when requested by the Pennsylvania Emergency Management Agency.
- Keeping the Secretary of Aging and other Department executive staff appropriately advised of emerging events.
- Facilitating communication between the state and local levels on aging-related emergency issues.
- Ensuring that the special needs of members of the older population, particularly vulnerable consumers of in-home services, are met during emergencies.

Pennsylvania Area Agencies on Aging are similarly responsible for supporting their respective County Emergency Management Agencies. The work of the Department of Aging Emergency Preparedness Liaison team in communicating information from the State Emergency Operations Center to Area Agencies on Aging and vice-versa is considered a constructive redundancy that complements the standard Incident Command Structure.

In addition to this largely supportive role with respect to most types of disasters and emergencies, the Department and Area Agencies on Aging take a lead role in response to heat, cold weather, and energy emergencies as they affect older Pennsylvanians. Each Area Agency on Aging has a local plan on file with the Department. In consultation with Pennsylvania Emergency Management Agency, the Department provides information to the Area Agencies on Aging when conditions are such that activation of these plans may be necessary.

Similarly, Area Agencies on Aging support the planning efforts of the County Emergency Management Agencies. Aside from having their own plans on heat and cold weather/energy emergencies, they are a part of each county's overall emergency plans.

## **State Plan Assurances**

The listing of State Plan Assurances, Provisions, and Information Requirements is included as Appendix L.