PENNSYLVANIA DEPARTMENT OF AGING

STATE PLAN ON AGING

AGING IN PLACE | ELDER JUSTICE

Mission
Enhance the quality of life of older Pennsylvanians by empowering diverse communities, the family, and the individual

Foundation
Prevent instability of health and wellness by enabling citizens to age in place with dignity

Protect the most vulnerable from abuse, neglect, abandonment, and exploitation

Values
Innovation and collaboration, focusing on stakeholder engagement, to further improve the provision of person-centered services

The State Plan on Aging
The Pennsylvania Department of Aging (PDA) is designated as the State Unit on Aging and is responsible for implementing the Older Americans Act and other home and community based service and support programs. Additionally, as the State Unit on Aging, PDA is required to develop and submit a State Plan on Aging (plan) to the federal Administration for Community Living. PDA submits this plan every four years in order to provide a vision and direction for Pennsylvania's network of aging services. This plan will be effective from October 1, 2016 through September 30, 2020.

The Pennsylvania Department of Aging
The department is formally charged by the Older Americans Act and the Pennsylvania General Assembly with being an advocate for the interests of older Pennsylvanians at all levels of government. Created in 1978, the department serves as the State Unit on Aging, representing Pennsylvania's rapidly growing older population, which presently includes nearly 2.9 million people age 60 and older. The department also represents the state's interests in the design, implementation, and continuous improvement of all long-term services and supports

In conjunction with administering the Older Americans Act and the Administration for Community Living (ACL) Discretionary Grants, the department coordinates a comprehensive array of programs that benefit older Pennsylvanians, their families, their caregivers, and the aging network and include, but are not limited to health promotion and prevention, elder rights, long-term care, support services, and caregiver support. These programs are made available primarily through a network of 52 local Area Agencies on Aging (AAAs), which are responsible to plan, develop and implement a system of services for persons age 60 and over in their respective planning and service areas. .

Developing the State Plan

The department's leadership team took the first step in charting the department's direction over the next four years with its statement of the mission, foundation, values, and goals of the plan. This process then invited the entire department to identify critical issues and trends, as well as common barriers and needs that served as the basis for developing goals and objectives common to both the state plan and local area plans. The second step included gathering input from the network of Area Agencies on Aging (AAAs) and the Pennsylvania Council on Aging during a joint conference held in March. The department then hosted seven Community Listening Forums in geographically diverse communities throughout the commonwealth. These forums were held during March and April 2016 and involved inviting all stakeholders (older adults, consumers of services, service providers, and advocates) to share their input on aging programs and priorities, and to measure their awareness of services and supports through a facilitated conversation. Throughout this entire development process, Pennsylvanians were also invited to share their concerns and suggestions with the department through several mediums – writing, emailing, calling a live person at the department, and an online survey.

PDA attempted to take every effort to ensure that the state plan development process incorporated broad outreach, informed by local plans developed by the AAAs, PDA staff, aging network partners, consumers of aging services, and the general public.

In setting objectives, strategies, and outcomes, the department is committed to evaluating results on a regular basis throughout the year. If outcomes and performance measures have not been met or have been changed, the department is committed to retooling its strategies so that our defined goals and objectives are met, and that our mission, foundation, and values remain in focus.

What's Next

The information that follows contains the drafted proposed goals, objectives, strategies, and performance measures developed for the plan. The goals encompass the efforts that PDA puts forth in order to fulfill our purpose – promoting existing services, improving access to services, enhancing the quality of services, and empowering the workforce. The objectives are the specific efforts that fit within those goals. These are things we aim to fulfill, create, or improve over the course of the next four years. The strategies are the methods we intend to use to accomplish these objectives. Finally, performance measures are standards which will allow PDA to assess its progress towards the plan's goals.

Now we need your feedback on this draft. What do you agree with? What do you disagree with? What's missing? Your input is important in refining this draft of the 2016-2020 State Plan on Aging that will be submitted to the federal Administration for Community Living for approval.

To provide your feedback, you're encouraged to participate in one of three [Public Hearings or submit your feedback to us in writing](#).

Goals, Objective, Strategies, and Performance Measures

The State Plan includes four goals, each supported by objectives, strategies, and performance measures.

Goal 1: Promote existing services

Objective 1.1: Increase the knowledge and awareness of programs and services supporting older Pennsylvanians among potential consumers, service providers, partners, and the public.

Strategies

- Coordinate marketing, promotion, and outreach initiatives among all bureaus and offices to reinforce the value and breadth of aging network offerings. This entails identifying target markets for each program area. Incorporate coordination with AAAs, highlighting how services and supports enable a higher quality of life.

- In collaboration with PDA program offices, develop high-level messaging and promotional direction that each bureau and program area can use in its outreach initiatives.

- Collaborate with PDA program offices to partner with legislators on events to highlight aging network offerings.

- Partner with other social service agencies to promote PDA's programs through their communications portals and to cross-market their programs.

- Partner or collaborate with organizations representing diverse communities to disseminate information on PDA's programs and services. This could include partnering with employers' human resource professionals to provide information and increase awareness of support available for older workers and employees supporting older family members.

- Develop an informational campaign, rebranding existing brochures and publications. This includes redesigning existing brochures and publications and publishing them in multiple languages to effectively reach target populations.

- Develop a social media component of the promotion and outreach strategy to further disseminate information on resources and services available to the public.

- Utilize the PA Link network as a vehicle to partner with other social service agencies in support of the overall promotion strategy.

- Continuously update and improve the marketing and promotion capabilities of the department. This includes increasing accessibility of information on PDA's website and other communications portals to non-English speaking individuals, as well as siting events in more diverse communities, locations, and untapped venues to better reach target populations.

Performance Measures

- Marketing and awareness survey measure
- Program and service enrollments
- Number of partner agreements

- Number of legislator events

Objective 1.2: Increase awareness of APPRISE insurance assistance and services available to all Medicare beneficiaries throughout diverse populations.

Strategies

- In coordination with the overall promotion strategy, develop and implement a promotion strategy to connect target populations to APPRISE services.

- In coordination with the overall promotion strategy, ensure APPRISE is aligned to the baby boomer lifestyle and technology.

- In coordination with the volunteer development strategy, increase the number of trained APPRISE volunteers through targeted recruitment and training to serve additional participants and targeted populations, including those with limited English proficiency.

- Conduct a needs assessment and market research to assess the most effective means of connecting with Pennsylvania's diverse populations.

- In coordination with the volunteer development strategy, increase the number of trained APPRISE volunteers through targeted recruitment and training to serve additional participants and targeted populations.

Performance Measures

- Awareness surveys
- Use of services by target populations
- Number of APPRISE volunteers

Objective 1.3: Improve the awareness of protective services and referral procedures among state and local agencies by enhancing collaborations with federal, state, and local agencies.

Strategies

- Continue to work with federal staff to implement enhancements to the Social Assistance Management System (SAMS) and protective services tools.

- Pursue Pennsylvania Commission on Crime and Delinquency grant to train protective services workers on the availability of local victims services and to train local law enforcement on protective services and how and when to make a referral.

- Pursue a grant from the Pennsylvania Department of Banking and Securities to train bank employees on the protective services programs and to train bank attorneys on the provisions of the Older Adults Protective Services Act.

- Continue current collaborative efforts relating to standardized forms, training, and enrichment opportunities.

- Enhance collaboration with Pennsylvania's Department of Health to better align training relating to falls, neglect, and electronic notification, and use data to better define and advocate for public policy priorities.

Performance Measures

- Number of protective service referrals from other agencies
- Number of training sessions developed and delivered, pre-post session assessments

Objective 1.4: Expand outreach channels to targeted hard-to-reach populations to increase PACE and other program enrollments.

Strategies

- In coordination with the overall promotion strategy, expand outreach channels to targeted hard-to-reach populations by partnering with trusted organizations, deploy linguistically appropriate signage, partner with counties, and partner with health systems.
- Maintain and expand efforts of the PACE call center to participate in community events and varied locations.
- Partner with the Pennsylvania Medical Society to train physicians to connect individuals to PACE/PACENET.
- Expand outreach through established relationships.

Performance Measures

- Total number of senior households that received outreach for PACE/PACENET
- Enrollment in PACE and other programs

Objective 1.5: Coordinate PACE outreach and enrollment efforts with AAA program enrollment to increase PACE enrollments.

Strategies

- Develop enrollment file-matching system to target PACE outreach.
- In coordination with the overall promotion strategy, develop and implement outreach strategy, potentially coordinating with the Pennsylvania Lottery.

Performance Measure

- Number of PACE enrollees from outreach generated from AAA program enrollments

Objective 1.6: Target outreach to increase enrollment in Medicare Part D and the Low Income Subsidy benefit among unenrolled eligibles for Medicare Part D.

Strategies

- Work with the Centers for Medicare and Medicaid Services (CMS) and propose to CMS a strategy to use their data to focus outreach on the 500,000 Medicare Part D and Low Income Subsidy benefit-eligible but unenrolled individuals.
- Work with APPRISE and department information to focus outreach on the 500,000 Medicare Part D and Low Income Subsidy benefit-eligible but unenrolled individuals.

Performance Measure

- Enrollment in Medicare Part D and the Low Income Subsidy benefit

Goal 2: Improve access to services

Objective 2.1: Increase the capacity to deliver aging network programs and services by expanding the number of aging network volunteers and enhancing their capabilities through education and training.

Strategies

- Assess current volunteer capacity within PDA's volunteer-supported programs and establish a baseline for each program, then complete a gap analysis comparing current capacity to projected need.

- As part of the volunteer development plan; develop and deploy innovative volunteer engagement approaches such as self-directed volunteer teams.

- Work with local volunteer coordinators and PDA program areas to develop and implement a volunteer marketing recruitment and development plan to engage volunteers from diverse communities to serve as liaisons in their respective communities for targeted aging network programs and services.

- As part of the volunteer development plan, leverage existing volunteer programs and entities and other retiree organizations to expand the pool of potential volunteers to support aging network programs and services and strengthen the ties with the tens of thousands of current volunteers.

- As part of the volunteer development plan, engage trusted community groups as a potential pool for volunteers

- Enhance the capacity to support volunteers. Improve the management capacity of volunteer coordinators through education and training, dissemination of best practices, lessons learned, and on-site technical assistance and support. Develop and deliver professional development programs for volunteer coordinators. Develop and implement a process for auditing the quality and identifying best practices of local volunteer management programs. Create a cultural competency training plan for volunteers who will serve diverse communities and ensure a multilingual volunteer corps in the aging network.

Performance Measures

- Number of volunteers and self-directed volunteer teams

- Number of cooperative volunteer development efforts with other entities

- Number of training and development sessions delivered

- Pre- and post-session knowledge and skills assessment

Objective 2.2: Position the PA Link among public agencies, service providers, and the public as the preferred coordinating entity (the main door in a no-wrong-door system) for all services at the local level.

Strategies

- Reevaluate the existing system structure to potentially transition from a loose association of organizations to a committed network of partners with the PA Link Office

as its core. Explore further the operations model of existing regional PA Link brick-and-mortar centers and other models that provide a personal advocate call-center approach.

- Strengthen the PA Link infrastructure and maintain the enhanced infrastructure to effectively provide person-centered counseling and coordinated service delivery.

- Systematize operations to minimize customer handoffs, empowering the first customer contact to assess and connect the individual with person-centered services.

- Engage and align with faith-based and community groups to coordinate programs and services and to promote PA Link as the main entry point to person-centered services and support.

- Further define and provide clarity to the role of the PA Link Office by publishing the program guide.

- In coordination with the overall promotion strategy, finalize the design, development, and maintenance strategy for the website.

- Systematize operations and build internal capacity to support the PA Link Office's central role in service coordination, including finalizing and publishing program guide, documenting key processes, and developing and deploying staff orientation and training.

Performance Measures

- Customer contacts
- Partner agreements

Objective 2.3: Increase awareness and access to ombudsman services for long-term care consumers through the expansion of Pennsylvania's Empowered Expert Residents (PEER) and other evidence-based approaches.

Strategies

- Collaborate with local program entities to encourage increased visitation (quarterly or more) to long-term care facilities within their jurisdiction.

- Provide enhanced training and tools to local program entities to ease documentation and data collection requirements and improve the consistency of data captured at client-directed facility visits.

- Initiate evidence-based analysis of PEER program.

Performance Measures

- Pre and post data collection from facility visits and evaluations with residents of long-term care settings as captured in OmbudsManager and annual National Ombudsman Reporting System (NORS) report

- Number of visits

- Training sessions delivered, pre-post session assessment

- Pre- and post- data collection (PEER programs)

Objective 2.4: Research and explore strategies to effectively expand access to adult daily living centers and expand the number of counties with adult daily living centers.

Strategies

- Research the financial and operational viability of managed care or other organizations supporting adult daily living centers, aligned to their regional footprint where they may keep more of the capitation fee.

- In coordination with the overall promotion strategy, promote and publicize the programs, services, and benefits these centers provide and the value to participants, families, and caregivers.

- Ensure that promotion strategy combats stigma for centers.

- Collaborate with direct care and family or volunteer caregivers in preparing individuals for participation at adult daily living centers.

Performance Measure

- Number of adult daily living centers established in non-served counties

Objective 2.5: Enhance person-centered counseling to enable individuals to age in place.

Strategies

- Fully develop a person-centered counseling program and easy-to-access process that ensures a person-centered approach to all interactions and engagements and that eligible individuals receive quality person-centered counseling.

- Establish specialists by population segment to develop and provide specialized person-centered counseling.

- Enhance collaboration of benefits enrollment and connection to aging network benefits, such as PACE.

- Integrate traditionally non-aging services into the person-centered counseling process through raising awareness among PA Link partners and providing training to PA Link staff and partners.

- In coordination with the Bureau of Aging Services, raise awareness of cognitive, mental, and behavioral health issues among the aging network partners to facilitate appropriate referrals to providers and services.

Performance Measures

- Number of individuals provided person-centered counseling

- Number of individuals connected to needed services

- Enrollment in programs

- Number of non-aging program referrals

Goal 3: Enhance quality of services

Objective 3:1: Expand and improve data collection and integrity to better measure activity, performance, and quality supporting continuous improvement and optimal decision-making.

Strategies

- In collaboration with PDA program areas and aging network partners, facilitate a creative development process to reach consensus on key data elements, definitions, collection and submission of essential data and information, and measures for key programs.
- Identify data and information required to measure the value of aging network programs and services.
- Identify data and information required to demonstrate and certify the evidence-based foundation of programs.
- Develop and implement a strategy based on the consensus approach to secure important data and information from aging network partners.
- Improve funding and reporting module to support data requirements.

Performance Measure

- Accurate and reliable data is available to inform decisions and promote continuous quality improvement

Objective 3.2: Standardize the collection and reporting methodologies for AAAs to ensure consistent and accurate data in SAMS.

Strategies

- Finalize and maintain the Aging Services Policy and Procedure Manual with established standards.
- Develop and deliver training, educational materials, and technical assistance to AAAs to improve data quality and collection.

Performance Measures

- Data collection and reporting methodologies developed and implemented by milestone date
- Pre- and post-training session knowledge assessments

Objective 3.3: Identify and promote the dissemination of best practices to enhance and improve programs and services for Pennsylvania's older adults.

Strategies

- Develop and implement a process to identify and disseminate aging services best practices.
- Identify a key program to pilot the identification and dissemination of best practices among aging network partners.

- Establish public-private partnerships to deliver services to benefit the aging network and participants by improving quality and innovation.

Performance Measures

- Develop new and improve existing program measures by milestone dates

- Establish tolerance ranges for key measures to provide greater consistency among aging network partners in performance measures resulting in less variance

Objective 3.4: Expand and enhance preventive health promotion efforts to encourage older Pennsylvanians to develop healthier lifestyles.
Strategies

- Review, update, and make more stringent the bulletin for Title III-D and issue updated policy.

- Increase implementation sites.

- Increase frequency of workshop sessions with increased focus on diverse populations.

- Expand bilingual offerings of programs.

- Promote expansion of Chronic Disease Self-Management Programs and Diabetes Self-Management Programs.

- Provide outreach and technical assistance to AAAs and senior centers, related to Affordable Care Act disease self-management and how they might bill for services.

- Promote expansion of Healthy Steps for Older Adults (HSOA) in-state and out-of-state.

- Update the Healthy Steps in Motion (HSIM) workbook.

- Certify HSIM as evidenced based by 2017.

- Secure "10 Keys^{TM}" to Healthy Aging as evidence-based.

Performance Measures

- Surveys of knowledge and implementation of healthy practices

- Evidence-based certification of programs

- Number of sites offering evidence-based preventive health programs

- Number of sessions offered, including bilingual sessions

- Outreach sessions completed and billing processes implemented

- Number of states and out-of-network providers adopting HSOA

Objective 3.5: Enhance collaboration with other state agencies that are responsible for various components of the long-term care system (including Pennsylvania's Department of Human Services, Department of Education, and provider associations) to improve the quality for individuals in long-term care.

Strategies

- Develop and implement a strategy to engage stakeholders in cross-training and information exchanges to ensure consumer needs are met by ombudsmen, providers, regulators, and protective services.

- Engage with stakeholders and meet with them at least once per year to discuss scope and limitations and how customers are served.
- Ensure publications, such as the Ombudsman Annual Report, demonstrate collaborative activities and public information sheets describe the expectation consumers should have in selecting a long-term care facility for themselves or their loved one.

Performance Measures
- Quality and customer satisfaction measures
- Cross-training developed, marketed, and conducted
- Number of stakeholder engagements
- Publication complete and circulated

Objective 3.6: Improve the quality and consistency of guardianship services for older adults through the implementation of standards, policies, and procedures.

Strategies
- Develop standard guardianship policies and procedures (policy manual of model program and services).
- Develop and implement guardianship care program within SAMS.
- Develop and provide training for PDA and AAAs on guardianship law, policies, and procedures.
- Consider the more than 100 recommendations of the Pennsylvania Supreme Court Task Force on Elder Justice and implement those that are appropriate and within the scope of PDA.
- Implement quality assurance monitoring for guardianship cases.

Performance Measures
- Variation in quality assessment measures of guardianship services
- Number of training sessions conducted, pre-post session assessment

Objective 3.7: Develop and implement a continuous quality improvement program within the aging network.

Strategies
- Develop an incentive, recognition, or reward system for high performing AAAs.
- In collaboration with the Bureau of Aging Services objective related to establishing minimum performance standards for aging network partners, define key measures, quality targets, and minimum standards of compliance. Involve stakeholders in the process.
- Consolidate measures to establish a single measure of organizational performance.
- Research and evaluate options to transition the system to a performance-based pay structure.

- Create a new or improve funding and reporting module to support data-driven improvement decision-making.

- Provide training aligned to continuous improvement efforts.

- Maintain up-to-date program and operations manuals.

- Communicate information to all that need it and the public by posting key performance measures on PDA's website and in annual reports, thereby fostering continuous improvement.

- Engage AAA directors to continue to take ownership for continuous quality improvement and performance of their operations in alignment with the direction of the department.

- In collaboration with PDA program areas and AAAs, develop a departmental customer satisfaction survey for key programs and services.

Performance Measures

- Benchmark performance measures

- Customer satisfaction survey

- National Core Indicators

- Number of training sessions, pre-post session assessment

Objective 3.8: Develop and implement a process to consistently communicate to aging network partners and stakeholders the rationale for all department requirements, policies, and reporting to improve the efficiency of all transactions and customer engagements.

Strategies

- Revise the Inspection Guide to reinforce the rationale for all activities and requirements.

- Participate in conferences to reinforce the direction and message.

- Develop and implement training that will be effective and affordable for AAAs.

- Reinstate Enrichment Conference to qualify for continuing education units (CEUs), perhaps on a regional basis. Partner with other agencies to qualify for CEUs.

Performance Measure

- Number of conferences

Objective 3.9: Evaluate the value and impact of PACE and PDA programs on the health and well-being of program enrollees through several evidenced-based research avenues.

Strategies

- In collaboration with PDA program areas, identify programs to be evaluated.

- Develop and implement research design and protocol using Medicare Part A and Part B data and information.

- Survey PDA non-PACE enrolled individuals to measure the perceived value of program benefits and identify the need for other potential assistance.

- Coordinate and support cooperative evidence-based research efforts with AAAs and for matching their enrollment files on specific programs or issues identified for improvement.

Performance Measures

- Start and end dates for research program design and implementation
- Survey return rate

Objective 3.10: Convene an annual State Plan for Alzheimer's Disease and Related Disorders (ADRD Plan)Summit to evaluate progress on the ADRD plan, strengthen partnerships, build community support, reorganize for excellence, and identify next steps.

Strategies

- Plan and hold an Alzheimer's disease and Related Disorders (ADRD) summit.
- Identify and disseminate excellence and best practices in various domains.

Performance Measures

- Number of summit participants
- Number of partnerships forged
- Communication of progress and best practices

Goal 4: Empower the workforce

Objective 4.1: Foster career development for the direct care workforce that serves older adults.

Strategies

- Facilitate volunteer and internship connections for students as a gateway to a career in aging services.
- Provide awareness through education to support direct care workers and caregiving career opportunities.
- Leverage the Senior Community Service Employment Program (SCSEP) and the partnership with the Pennsylvania Department of Labor and Industry and local Workforce Investment Boards to create career opportunities for individuals as care providers. Encourage SCSEP providers to train participants in the direct care field to obtain positions serving older adults.
- In support of the implementation strategy for Executive Order 2015-05, advocate for paid and unpaid caregivers.
- Remove barriers to and identify and promote incentives for entry into the direct care workforce.
- Develop and deliver education and training targeted toward volunteer and family caregivers to enable individuals to provide quality and needed care.
- Partner with and support existing providers and organizations in developing, delivering, and promoting training for family and volunteer caregivers.

- Develop a promotion strategy to raise awareness of caregiver support and respite care programs available to address caregiver stress and burnout.

Performance Measures

- Number of direct care workers being trained by SCSEP and similar programs to provide services to older adults
- Number of trainings/education sessions provided and number of direct care workers receiving training/education
- Pool of direct care workers
- Wages of caregiver workers
- Number of internship connections
- Number of partner agreements
- Marketing and awareness survey

Objective 4.2: Improve the knowledge, skill, and quality-monitoring capabilities of protective services investigators and other professionals through the development and implementation of standardized training.

Strategies

- Develop and implement a standardized curriculum for protective services investigators and intake personnel based on national standards and minimums recommendations.
- Expand and increase the venues and channels for training.
- Coordinate with the data improvement strategy to enhance SAMs data to support continuous improvement.
- Coordinate with other program areas to develop a research agenda regarding the transfer of learning from the classroom to the field.
- Align training with improved and to be released quality assurance methods and tools, SAMS data and policies and procedures, standardized national tools, and updated guidance documents.
- Enhance and update outreach and case consultation guidance and direction regarding neglect and financial exploitation.

Performance Measures

- Measures of deficient practices identified in monitoring visits
- Investigators certified by 2018
- Wait time for desired training
- Number of training sessions