

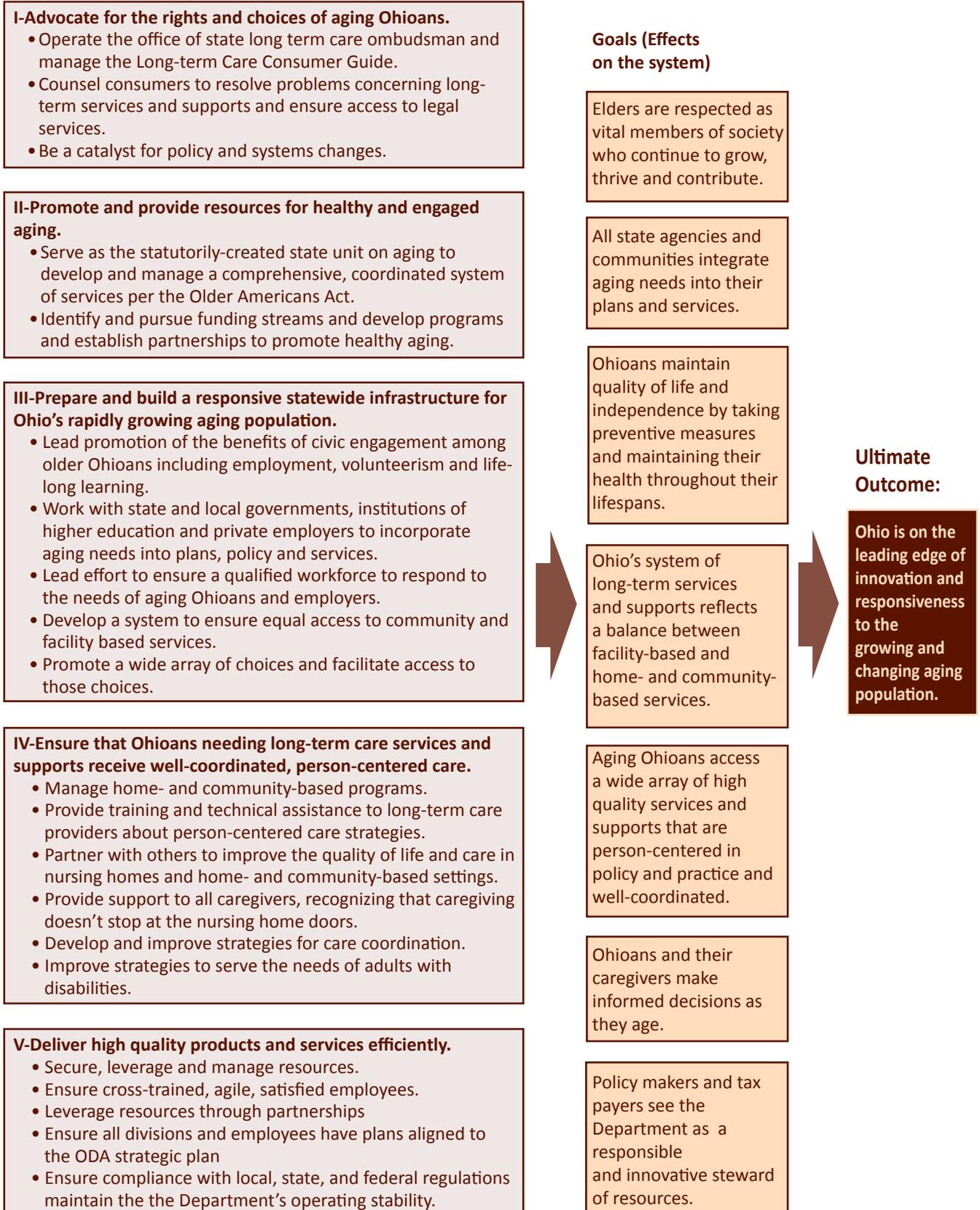
**Ensuring that Ohio is on the leading edge of
innovation and responsiveness to the
growing and changing aging
population.**

**Annual Report
SFY 2012**

Strategies

Strategic Plan

Figure 1



Introduction

By 2020, the population over age 60 in Ohio is projected to increase by 25 percent and almost double by 2040.

(Scripps Gerontology Center's Coming of Aging report, June 2011)

Last year's passage of the Jobs budget helped to position the Ohio Department of Aging to serve Ohio's elders in the most cost effective and responsive manner. Our efforts have focused on maximizing the use of public funds for our citizens, creating jobs, improving health for all Ohioans and reforming Medicaid.

Our strategic plan (Figure 1), developed and implemented this biennium, identified goals and key strategies to help us meet the needs of our older population and reach our ultimate outcome: that ***Ohio is on the leading edge of innovation and responsiveness to the growing and changing aging population.*** With the strategic plan as our guide, we continue to refine our mission, looking carefully at what purpose is served by everything we do as we work closely with our local, state and national partners to help all Ohioans grow, thrive and contribute throughout their lives.

With our ultimate outcome clear, the Department has shifted resources, time and talent to meet the needs of an expanding 60+ population. In July 2012, Scripps Gerontology Center at Miami University released updated demographic projections for the next 40 years that will have staggering implications (Figure 2). According to the researchers at Scripps, the number of older Ohioans with severe disabilities could nearly double by 2040. Today, about 49 percent of the 146,000 of those Ohioans rely on Medicaid. Thus, tinkering will not do; it will take bold new approaches, coupled with innovative thinking to meet their needs.

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This report presents our major accomplishments in SFY 2012 in the context of our five key strategies:

- I. Advocate for the rights and choices for aging Ohioans
- II. Promote and provide resources for healthy, engaged aging
- III. Prepare and build a responsive statewide infrastructure for Ohio's rapidly growing aging population
- IV. Ensure that Ohioans needing long-term services and supports receive well-coordinated, person-centered care
- V. Deliver high quality products and services efficiently

Figure 2



Realigning for Efficiency

Recognizing that we must not only change our external priorities, but also refocus and realign our internal organizational structure to respond to Ohio's changing needs, the Department underwent a comprehensive restructuring in SFY 2012 to improve our efficiency and effectiveness. This first major reorganization in more than a decade is described in more detail later in this report, but some of the efficiencies achieved include:

- **Streamlining program management** to improve consumer health and wellness, data analysis, program operations and system-wide service delivery;
- **Devoting resources** to continuous process improvement and public and private partnerships;
- **Aligning workforce development and human resources initiatives** within the same division;
- **Interweaving public relations and legislative outreach;** and
- **Maximizing administrative resources** across divisions and programs.

The Department's internal organizational changes were a first step in responding to Ohio's changing demographics. With our new structure, a performance center and a group dedicated to building external partnerships, we are committed to constantly re-assessing and responding to our citizens' changing priorities, regardless of the funding stream, for our delivered services. We know we must continue to adapt internally as our citizens' needs change.

SFY 2012 Accomplishments

I. Advocate for the rights and choices of aging Ohioans

Long-term Care Ombudsman Quality Measures

The Office of the State Long-term Care Ombudsman, housed within the Department of Aging, advocates for people receiving long-term care in a variety of settings. In SFY 2012, the office worked with regional program staff to develop Ombudsman Quality Measures that can be customized to each program’s capacity and can be used to **assess and improve program performance**. Measures focus on volunteer utilization, complaint resolution and facility visits by ombudsman staff, among other factors.

Ohio Person-Centered Care Coalition

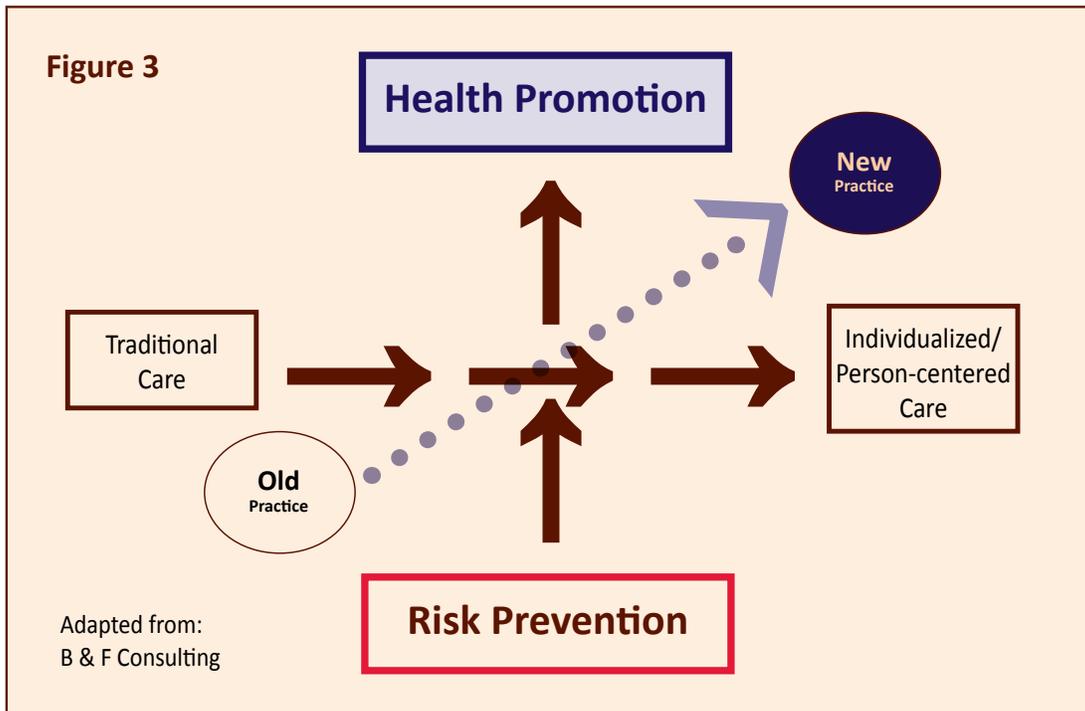
The Office of the State Long-term Care Ombudsman also has revitalized the Ohio Person-Centered Care Coalition, which works to influence and support transformational culture change in long-term care environments so that all individuals can experience meaning and purpose. Under the ombudsman’s leadership, the coalition removed administrative barriers to participation, successfully merged with the Ohio Local Area Network of Excellence and initiated an ad hoc task force to **develop resources for Ohio’s Medicaid payment policy**. The coalition developed outreach materials to raise awareness of the concepts of person-centered care and continued to develop its website (www.centeredcare.org) to better communicate with coalition members. The coalition held 14 “Creating Home” meetings across the state in conjunction with the Pioneer Network and the Picker Institute, and hosted more than 600 attendees at the “Creating Home through Choice and Purpose” statewide conference in March.

The Ohio Person-Centered Care Coalition ... works to influence and support transformational culture change in long-term care.

II. Promote and provide resources for healthy, engaged aging

Evidence-based Health Promotion and Disease Prevention

In SFY 2012, statewide training activities expanded the availability of evidence-based health promotion and disease prevention programs, including Healthy U, Healthy U: Diabetes, Healthy IDEAS, and Reducing Disability in Alzheimer’s Disease (Figure 3). The Department, working with state and local partners, **exceeded its two-year goal of training more than 3,000 participants** in the Healthy U chronic disease and diabetes self-management curricula. Healthy U is a six-week workshop that teaches strategies for managing symptoms, dealing with physical limitations and maximizing health resources. Since its inception, Healthy U has served more than 8,000 participants. In June 2012, Ohio began training staff for two new interventions: Tai Chi: Moving for Better Balance and Chronic Pain Self-management.



Reducing Disabilities in Alzheimer’s Disease

In 2011, Ohio became the ***first state to take the Reducing Disabilities in Alzheimer’s Disease program statewide***. To date, this evidence-based program developed by researchers at the University of Washington has provided exercise training to more 600 Ohioans with dementia. The program, funded by the Administration on Aging, simultaneously offers strategies to caregivers to help them manage behavioral symptoms that come with the disease. The Department of Aging, the state’s seven Alzheimer’s Association chapters and the Benjamin Rose Institute on Aging ***developed a replication manual to support expansion of the program in other states***.

Medicare Improvements for Patients and Providers Act

Medicare programs that help beneficiaries pay for prescription drugs and other medical services often go unused by those who need them the most. Using \$1,317,179 in grant funds provided by the Administration on Aging and the Centers for Medicare & Medicaid Services, the Department partnered with area agencies on aging, the Ohio Department of Insurance’s Senior Health Insurance Information Program, the Ohio Association of Second Harvest Foodbanks and other organizations to enroll low income individuals into these programs. Since the inception of the grant, ***more than 2,692 low income Ohio Medicare beneficiaries have received benefits estimated at \$5.6 million***. The money saved by these individuals makes its way into local economies throughout Ohio.

III. Prepare and build a responsive statewide infrastructure for Ohio’s rapidly growing aging population

Aging and Higher Education Advisory Committee

Under a directive signed by the Chancellor of the Ohio Board of Regents, the Department partnered with the Ohio Board of Regents and Ohio Association of Gerontology and Education to propose recommendations that will help the University System of Ohio ***cultivate the workforce and technology needed for growth in an aging population***. Recommendations spanned three areas: developing a workforce for an aging society; helping older workers avoid and overcome long-term unemployment; and creating new business and expanding existing business by executing research commercialization for an aging population.

Vocational Rehabilitation Public Private Partnership

The Department of Aging, the Ohio Department of Veterans Services and the Ohio Rehabilitation Services Commission launched a partnership in February 2012 to link Vocational Rehabilitation consumers with chronic disease self-management workshops and employment supports to help them remain at or return to work. The Vocational Rehabilitation Public Private Partnership enhances awareness among vocational rehabilitation consumers and providers of the Department’s Healthy U chronic disease and diabetes self-management programs, which have been proven to reduce disability and increase independence. The program is being piloted in five Ohio cities, and the Department of Aging is ***investing \$41,000 in non-federal funds, for a potential drawdown of \$151,290 in federal match funds***.

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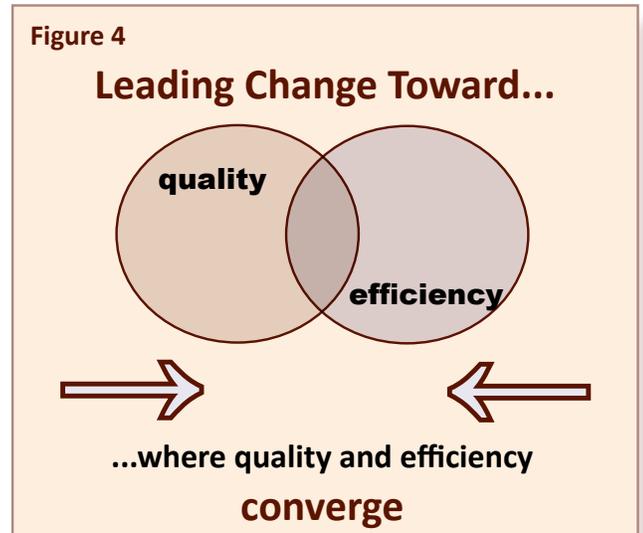
Civic Engagement: Mobilizing Ohio’s 50+

The Ohio Department of Aging teamed with state and local partners in March to launch the state’s new Civic Engagement Initiative. At the kick-off event, “Preparing Ohio’s New 50+ for 21st Century Jobs” attendees learned about the current jobs situation, resources and the initiatives the Department is spearheading at the state level to meet the needs of older workers, learners and volunteers. The event was a collaboration with state-level partners including the Ohio Board of Regents, Ohio Department of Job and Family Services and the Corporation for National and Community Service. Formation of the Ohio Civic Engagement Council followed the launch. As part of its work, the council is creating ***a clearinghouse of promising practices to mobilize individuals age 50+ in Ohio’s communities***, as well as a new Center for Collaborative Partnerships to deploy interns and volunteer business executives to provide the support communities need.

Systems Integration

In September 2011, **Ohio was one of four states awarded Systems Integration grant funds from the Administration on Aging**. The goal of the three-year, \$3.2 million initiative is to ensure that older adults, individuals with disabilities and family caregivers have access to a system of person-centered services that can help them remain independent and healthy in the community (Figure 4). Initiatives supported by this funding include, but are not limited to:

- **Streamlined access** to quality home- and community-based preventive and caregiver support services through the Aging and Disability Resource Network and the Ohio Benefit Bank;
- Expanded access to existing and new **evidence-based** disease-management, prevention and caregiver support programs;
- A **trained workforce** that is able to provide quality person-centered dementia and disability supports; and
- **Transitional care** across settings to reduce the risk of emergency room visits and hospital readmissions.



In addition, the Department is working with the Benjamin Rose Institute on Aging to establish formal partnerships between Veteran’s Administration Medical Centers and community organizations (e.g., area agencies on aging, Alzheimer’s Association chapters), using the Partners in Dementia Care evidence-based care coordination model for veterans with dementia and their caregivers.

Opiates

As a member of the Governor’s Cabinet Opiate Action Team, the Department of Aging is co-lead with the Department of Health for the professional education workgroup. This workgroup, made up of stakeholder organizations, announced a victory this fiscal year with the adoption of **statewide guidelines for prescribing opiates** in emergency departments and other acute care facilities.

Modernizing Golden Buckeye

Recognizing the unparalleled brand power of Golden Buckeye in the public sector, in SFY 2012 we began enhancing the program from one primarily focused on providing discounts to a broader program that helps local communities **keep their elders and soon-to-be elders healthy, able and active**. We started a partnership with the City of Cleveland to promote the city’s Year of Vitality that dovetails with the launch of the new Golden Buckeye Community Initiative.

Life Safety Code

The Department of Aging, *in partnership with the Departments of Commerce and Health, is working on changes to the Ohio Building and Mechanical Code* to allow for more person-centeredness in nursing facilities. In alignment with recommendations made by the National Fire Protection Association on the Life Safety Code, Ohio's proposed building code updates will allow nursing facilities to apply for a waiver from the Centers for Medicare & Medicaid Services intended to make more homelike and inviting environments for residents.

Severe Weather Response

We collaborated with our regional partners at the area agencies on aging and in senior centers across the state to help coordinate the urgent needs of our citizens.

As SFY 2012 came to a close, Ohioans were challenged with volatile storms resulting in power outages and 100-degree temperatures throughout the state. The Department played a significant role in helping the Governor's office and the State Emergency Management Agency coordinate the state's response. We supported the National Guard's successful "knock and talk" and meal delivery campaigns, and worked with professors and administrators from Ohio's university system to mobilize students in a wellness assessment program. We coordinated with the Ohio Department of Health on a statewide "check on your neighbor" awareness campaign. We collaborated with our regional partners at the area agencies on aging and in senior centers across the state to *help coordinate the urgent needs of our citizens*. We also worked with our partners at the Ohio Department of Mental Health to tend to the needs of our shared constituencies.

Senior Community Service Employment Program

The Senior Community Service Employment program is a paid job training and work experience program for adults age 55 and older that provides valuable community services while it transitions participants into unsubsidized employment. In SFY 2012, the Department led state and local partners to develop a state plan for the program that includes *innovative approaches to the design and delivery of services that generate positive results for older job seekers, employers and communities*. The Ohio Department of Aging's program has an active relationship with 200 employers and 230 non-profit host agencies, and is currently providing community service employment and training to 342 participants. The goals of the program also serve as a foundation for the state's Civic Engagement Council.

IV. Ensure that Ohioans needing long-term services and supports receive well-coordinated, person-centered care

Nursing Home Quality Incentives

In SFY 2012, Ohio raised the bar for quality long-term care through a Medicaid payment policy that rewards nursing facilities for performance on a range of quality incentive measures. To qualify for full reimbursement under Medicaid, facilities must now meet or exceed a minimum of five out of 20 measures that stimulate practices to support residents in five general areas: nursing home performance, choice, staffing, clinical practice and environment. The Department of Aging, through the Office of the State Long-term Care Ombudsman, also worked with state and national experts in nursing home culture change to develop an online resource (ltcquality.ohio.gov) to **help facilities learn more about and successfully implement the incentives**. State partners included the Ohio Person-Centered Care Coalition, the Governor’s Office of Health Transformation, the Ohio Department of Job and Family Services and the Ohio Department of Health.

Ohio raised the bar for quality long-term care through a Medicaid payment policy that rewards nursing facilities for performing on a range of quality incentive measures.

Critical Access Nursing Home Project

The Office of the State Long-term Care Ombudsman led state partners in the Critical Access Nursing Home Project, a part of the Advancing Excellence in America’s Nursing Homes campaign. The project identified four nursing homes in the Cleveland area with high Medicaid populations, low occupancy and poor performance on state surveys. Project partners worked with these facilities to improve organizational function, operational efficiency and overall service delivery.

PASSPORT Administrative Agency Performance Incentives

Facing a growing demand for long-term care services, the Department and its partners worked to **improve the efficiency and effectiveness of the day-to-day operation of the PASSPORT, Choices and Assisted Living Medicaid waivers**. The Department implemented a series of performance-based incentives as part of the budgeting process for the PASSPORT Administrative Agencies in SFY 2012. Department staff worked with the agencies to identify five activities for which they could earn an incentive by meeting specified goals. These activities included balancing outcomes (reflect a 50/50 distribution between institutional/home- and community-based services for adults age 60 and older with physical or cognitive disabilities) and administrative performance outcomes (maintain an average care plan cost determined by the Department; achieve Medicaid waiver assurances; and earn an overall satisfaction rate in surveys of waiver participants).

Home- and Community-based, Medicaid-funded Programs

The improvements made to the operation of three Medicaid waiver programs (PASSPORT, Choices and Assisted Living) have led to **increased efficiencies and an expansion of home- and community-based options**. Ohio added a consumer-directed service delivery option to the PASSPORT waiver and obtained federal approval to expand the Assisted Living program to serve an additional 552 individuals in SFY 2012. The Department and its partners established consistent service planning and authorization practices to ensure waiver participants received the right amount of service at the right time, utilized one financial management services vendor instead of four and implemented a web-based time reporting system for consumers choosing to direct their own services.

The Aging and Disability Resource Network plays a role in many of the state's long-term care balancing initiatives.

Aging and Disability Resource Network

Ohio's twelve area agencies on aging are leading development at the local level of the statewide Aging and Disability Resource Network. The network supports individuals as they explore and choose among available options for long-term services and supports. Ohio's model builds on strong partnerships and existing relationships in communities to **create a "no wrong door" system that streamlines access to services for individuals**. The network plays a role in many of the state's long-term care balancing initiatives. By SFY 2012, all twelve area agencies have achieved designation status based on their formal relationships

with local partners and their progress in providing the core services of information and referral, streamlined access to services, care transitions and options counseling. Activities to develop the core functions of the network are supported by grants from the Administration on Aging and the Centers for Medicare & Medicaid Services.

Lifespan Respite Care Initiative

In July 2011, the Department of Aging received a three-year, \$200,000 grant from the Administration on Aging to **support the development of the lifespan respite system in Ohio**. The Department is partnering with the Ohio Respite Coalition, Ohio Family and Children First Cabinet Council, Ohio's Aging and Disability Resource Network and other research and evaluation organizations to develop and unite current respite programs, services and resources available to families and caregivers of children with disabilities, adults with disabilities and older adults into an integrated respite system. Year one of the grant has focused on gathering information about caregivers needing respite and the respite sources currently available. Partners held six regional respite summits attended by more than 400 caregivers, respite providers, and advocates representing the lifespan. The information gathered is being used to develop a strategic plan and to identify pilot projects to support the respite needs of Ohio caregivers.

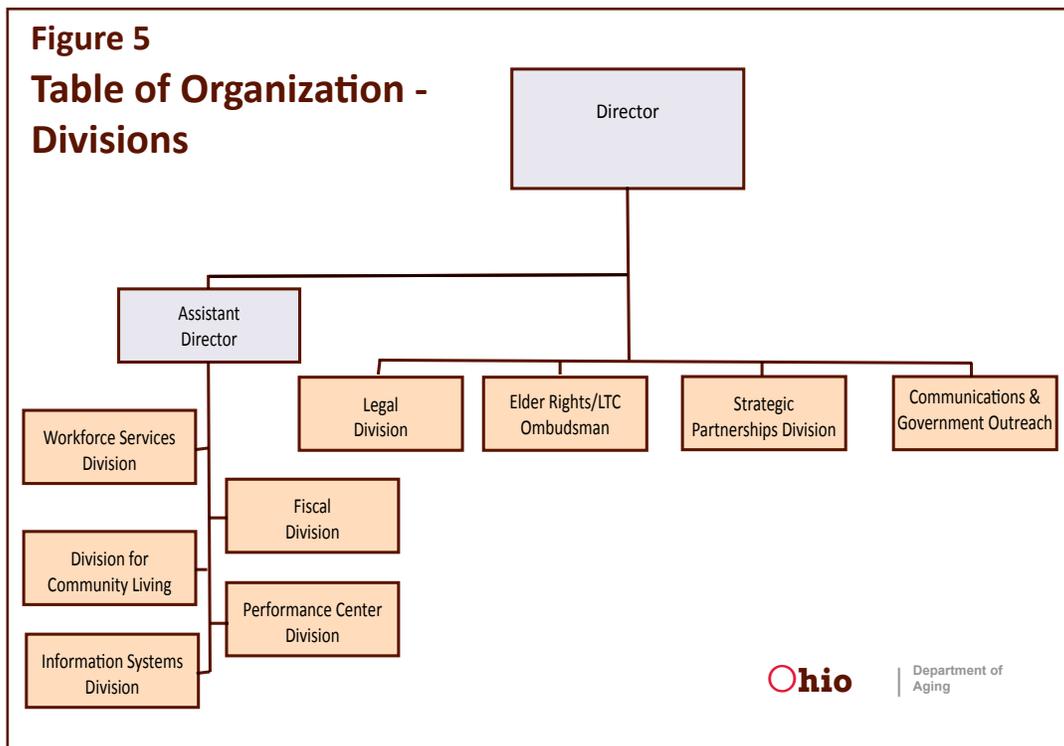
Senior Farmers' Market Nutrition Program

The Senior Farmers' Market Nutrition Program is a collaborative effort administered by the Department that provides locally grown produce to assist income eligible elders with their nutritional needs while also supporting local farmers. The program has gained popularity among farmers and participants over the past decade, and **the Department is the third largest recipient of U.S. Department of Agriculture funding for this program, which serves elders in more than half of Ohio's counties.** In 2011, the coupon redemption rate was 97.1 percent. The program not only provides locally grown nutritious produce, but also promotes good health and food safety.

National Family Caregiver Support Program

Without an increase in the funding provided through the Older Americans Act Title III-E, the Department and its partners continue to **respond to the growing needs of informal caregivers.** The program models reflect the unique combination of resources and constraints found in each planning and service area. Respite, care coordination, and caregiver education remain the most frequently utilized interventions. There is increasing interest in the consumer-directed service delivery model.

V. Deliver high quality products and services efficiently



Operational Reorganization

In SFY 2012, the Department of Aging underwent its first major reorganization of staff and program administration in more than a decade (Figure 5). The Department’s workforce has been decreasing at a time when the need to serve aging Ohioans has grown. The Department presented itself as a solutions agency and approached reorganization strategically, carefully aligning its limited resources in a way that maximized the use of public funds for our citizens.

- The ***Division for Community Living*** was formed by merging the Department’s two program divisions: Older Americans Act Programs and Community Long-term Care. Staff were aligned within new strategic groups including data analysis, consumer health and wellness, program operations and system-wide service delivery, and are being cross-trained on key duties and responsibilities.
- A new ***Performance Center Division*** ensured that the priorities identified in the Department’s strategic plan closely align with priorities identified by the Governor and his Office of Health Transformation. The division serves as the Department’s process improvement, data measurement, and evaluation group.
- A new ***Strategic Partnerships Division*** enhanced the Department’s role in public and private partnerships to focus on identifying health and wellness strategies. The strengthened partnerships offer increased opportunities with other state agencies for Department of Aging initiatives. The division also researches and obtains unique funding opportunities for the Department’s programs, allowing us to develop new initiatives for aging Ohioans.
- Public relations and legislative outreach efforts were combined to form the ***Communications and Government Outreach Division***, which integrates the Department’s ability to communicate aging initiatives and priorities to the general public with our legislative advocacy efforts.
- A ***Support Services Unit*** was created within the Information Systems Division to consolidate the administrative support staff within the agency and create a shared services approach to related tasks.
- The new ***Workforce Services Division*** expanded the responsibilities of the Department’s human resources staff by incorporating workforce development initiatives and staff.

The Department presented itself as a solutions agency and approached reorganization strategically, carefully aligning its limited resources in a way that maximized the use of public funds for our citizens.

The reorganization also included the development of logic models that build on the agency’s strategic plan by establishing division-specific strategies to achieve the Department’s goals. These models were then used as the basis to form individual employee goals and measures that align with the overall strategic plan. The Department’s employee evaluation process was also revamped with a new focus on strategic process improvement.

Performance Management

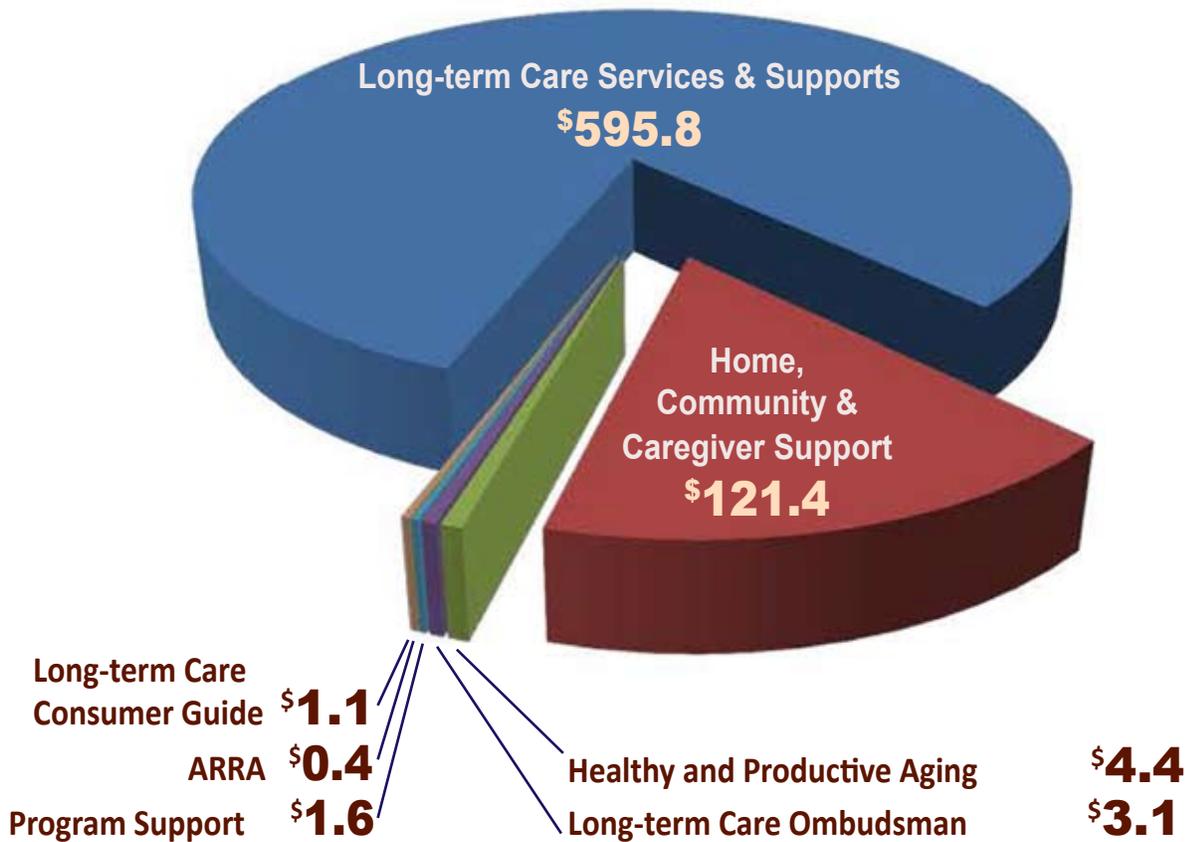
Based on the experience of creating the Performance Center Division within the Department, the Department of Aging partnered with the Ohio Rehabilitation Services Commission and the Ohio Department of Job and Family Services to **create a replicable model of performance management at the agency level**. The group crafted a paper to highlight the necessity, benefits and structural components of dedicated performance management resources. Additionally, staff from the Department have consulted with and advised other agencies that have begun to explore their own variations of performance management. At the most recent state Human Resources conference, the Department of Aging presented on the connection of performance management and employee engagement.

... Staff from the Department of Aging have consulted with and advised other agencies as they began to explore their own variations of performance management.

Hospital Exemption Notification System

The Hospital Exemption Notification System is an online tool for hospitals to complete and submit an electronic prescreening exemption form to their respective PASSPORT administrative agency for hospital patients who require nursing facility admissions. The Department of Aging made this electronic application available to hospitals statewide, ***thus instituting a completely paperless process and gaining efficiencies by eliminating duplicative data entry and enabling automatic sharing of information with partners***. Approximately 50,000 forms have been processed through the system, saving valuable human resources in hospitals and at the PASSPORT administrative agencies.

Expenditures SFY 2012
 (Detail may not add to total due to rounding)
\$727.7 (in millions)



Program Budgets	SFY 2012
Long-term Care Services & Supports*	\$595,840,000
Home, Community & Caregiver Support**	121,355,000
Healthy and Productive Aging	4,372,000
Long-term Care Ombudsman	3,094,000
Program Support / Other	1,591,000
Long-term Care Consumer Guide	1,053,000
American Recovery and Reinvestment Act (ARRA)	426,000
TOTAL	\$727,731,000

* Long-term Care Services and Supports is administered by the Department. Funds are part of Medicaid line item in the Ohio Department of job and Family Services budget.
 ** Home, Community and Caregiver Support includes \$56.9 million in local funds, which do not pass through the Department's budget.

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