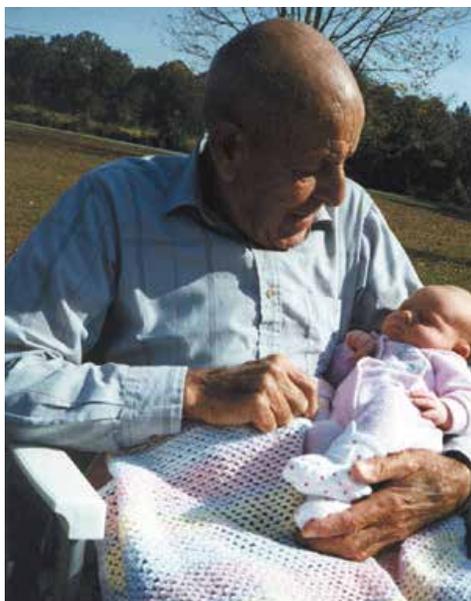


Creating An
Aging Friendly Montgomery County



Improving Lives, Mobilizing Supports

2016
2020

A Four Year Plan



Central Office

Human Services Center • 1430 DeKalb St., PO Box 311, Norristown, PA 19404-0311 • 610-278-3601

Elder Abuse Hotline

1-800-734-2020 • www.montcopa.org/mcaas

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Section 1

Executive Summary

As we prepared our four-year plan for Aging and Adult Services in Montgomery County, we are struck by the variety and scope of change that will shape us in the coming years.

- Implementation of Community Health Choices
- Demographic shifts toward a more diverse aging population, including increases in the Hispanic, Asian and LGBT populations
- Renewed emphasis on in-home care requiring a larger and better trained workforce
- Increased need for home modifications and low-income housing
- New awareness of health and wellness to include not simply physical health, but also social, emotional, financial and environmental health issues
- Increased need for Behavioral Health resources
- Changes in technology to increase the mobility and effectiveness of the workforce
- A new Health and Human Services structure in Montgomery County

These changes are opportunities to create a better environment for us to keep our seniors safe and well in their community. These changes, however, will also bring challenges. We must implement these changes and monitor them to ensure their success and to ensure our seniors are receiving the necessary supports to help maintain their independence in the manner of their choice.

The Pennsylvania Department of Aging goals are to promote existing services, improve access to services, enhance quality of services, and empower the workforce. These goals will guide us through the next four years and the objectives and strategies we have created to meet those goals will provide us the direction necessary to be successful.

In creating our plan, we sought input from our employees, consumers, providers, public and our advisory council. We engaged a local college, Chestnut Hill, to assist in the process. We know that partnership is essential to delivering Health and Human Services in the current environment. In times of increased need and shrinking resources, we must all work together toward our common goal.

An ideal example would be our new partnership with our county Your Way Home program; a public/private partnership designed to make homelessness brief, rare, and non-recurring. We worked with their program to create the position of a Senior Housing Counselor that works with those seniors who are experiencing difficulties with utilities costs or are in danger of losing their homes. This program has access to private funding which can be utilized to ensure these seniors remain in their homes.



“Unity is strength...when there is teamwork and collaboration, wonderful things can be achieved.”

- Mattie Stepanek

As you review this plan, you will see a theme of awareness, training and partnership. We seek to:

- Improve communication about our services to various constituencies and better utilize social media
- Increase training for staff on a wide variety of services and in dealing with diverse populations
- Obtain more consumer, provider, and caregiver feedback to ensure we are listening to our constituents to understand their needs and obtain ideas on improving our system and services
- Continue to build partnerships to provide access to service and meet service gaps

Montgomery County is in the process of developing a Health and Human Services structure that will facilitate this work. Through a unified Health and Human Services department, our staff will have increased access to training and supports that will enhance communication, planning, and integration. Our goal in Montgomery County is to engage more consumers in a manner that is customer-service oriented and provides access to the entire array of county services. Health and Human Services works as a team to meet the holistic needs of consumers which enable our residents of all ages to be and remain safe, healthy and well, and be strong contributors to their communities.



Barbara O'Malley

Barbara O'Malley, Director
Montgomery County Health
and Human Services

Section 2

The Montgomery County Aging and Adult 4 Year Plan

Introduction

What is a four year plan, why is it done?

The Montgomery County Aging and Adult Services (MCAAS) is the local designated agency on aging. It is responsible for developing and providing a comprehensive, coordinated system of services for older and disabled individuals. The department functions under MONTCO's budgetary directives and maintains focus on the most effective and efficient use of dwindling resources available for the population.

MCAAS is part of a network of 52 area agencies within the Commonwealth of Pennsylvania. It operates under mandate of the Older Americans Act, Pennsylvania Act 70 and the Pennsylvania Department of Aging (PDA).

The Older Americans Act of 1965 was the first federal level initiative aimed at providing comprehensive services for older adults. It formed the National Aging Network which is comprised of the Administration on Aging on the federal level, State Units on Aging (PDA), and local level Area Agencies on Aging (MCAAS). The network provides funding for: nutrition and supportive home and community-based services; disease prevention/health promotion services; elder rights programs; the National Family Caregiver Support Program; and the Native American Caregiver Support Program. The formula for funding is based primarily on the percentage of an area's population age 60 and older.

Pennsylvania Act 70 provides protection for abused, neglected, exploited or abandoned adults; establishes a uniform statewide reporting and investigating system for suspected abuse, neglect, exploitation or abandonment of adults; and furnishes protective services. The PDA, created in 1978, is formally charged by the Older Americans Act and the Pennsylvania General Assembly with the role of advocate for the interests of older Pennsylvanians at all levels of government. The Older Americans Act, Pennsylvania Act 70 and the Pennsylvania Department of Aging requires MCAAS to develop a 4 year plan. Information gathering is necessary for developing the plan. MCAAS examines MONTCO's current demographics. Existing conditions, recent trends and future forecasts for this service area are identified. Community assessment is done through surveys and group meetings, which pinpoint needs specific to MONTCO residents. This process aids in developing goals set forth by the Department of Aging. MCAAS creates strategies to achieve specific goals. Services are geared towards the most effective and efficient actions to fill those needs identified in the research.

Methods

Two methods were utilized to complete the needs assessment. The first method used to identify the needs of our community was a survey of consumers, providers and employees. 628 surveys were completed. Respondents were comprised of 482 consumers, 62 employees and 84 providers. The second method was meetings. Two workshop-type meetings were held. The first included the MCAAS management team and the MCAAS Advisory Council. The second included the MCAAS management team and the Montgomery County Community Advisory Council. The meetings yielded valuable input from attendants. As a result of utilizing both methods, common objectives were identified.

Multiple factors were considered as the plan was developed. Information related to local, political and economic conditions was included in decision making. The impact of various aspects on MCAAS's ability to maintain and deliver the highest standard of services was taken into account. The goals of the plan do not exist in isolation of the realities of life in Montgomery County. Neither do they ignore the complexities of delivering services to a growing population in the current fiscal climate.

The 2016-2020 plan is intended as a working document. Its purpose is to serve as a guide for the agency through the next few years. The plan will enable MCAAS to review specific goals and strategies as well as their effectiveness. Outcomes will be measured and progress evaluated. These efforts will aid MCAAS in assessing the success of the work outlined and the ability to meet the changing needs of MONTCO's aging and adult population.

Agency Overview: Montgomery County Aging and Adult

Services

Montgomery County Aging and Adult Services touches the lives of approximately 45,000 Montgomery County residents annually, providing an array of services and programs to assist the elderly and those with disabilities, their families and caregivers. Services and programs assist individuals and families in preventing premature institutionalization. They also support the elderly and disabled individuals to live as independently as possible within the community. As the Montgomery County population ages, MCAAS is continually challenged with meeting the increased needs of our rapidly growing aging population. There are now an estimated 176,411 persons over age 60 in Montgomery County.

MCAAS delivers services through trained staff, or one of over 80 contracted agency providers. MCAAS offers in-home services, senior community center services, long term care assessment, care management, information and assistance, caregiver support programs, protective services, adult daily living center services, ombudsman services, transportation, nursing home transition and multiple programs to assist aging residents across all areas of the county.

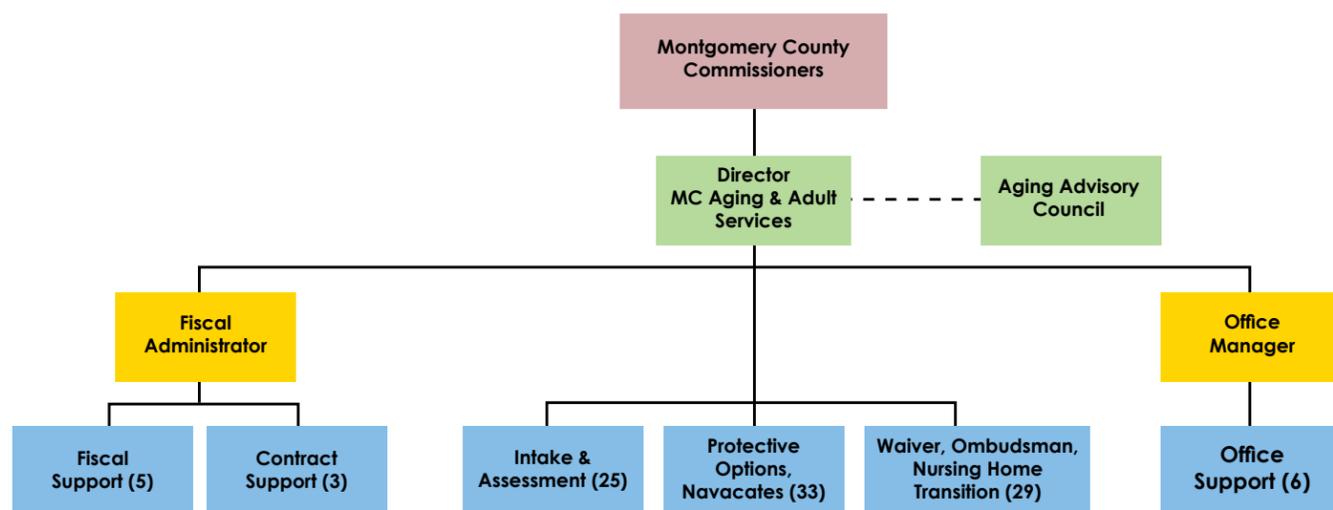
In order to serve consumers effectively and efficiently the agency recently consolidated regional offices into one central location in Norristown. Centralization of the agency eliminated the need to duplicate some resources in multiple locations. MONTCO continues to offer Community Connections, a service which provides information and referral services. These offices are located regionally throughout MONTCO to facilitate access for residents where they reside. The MCAAS staff, when working in the field, can share satellite offices with other County agencies as needed. MCAAS in the past year has transitioned to using a remote workforce for some services. This workforce option is still in the development phase.

Agency Structure

The Montgomery County Office of Aging and Adult Services (MCAAS) is a public agency, operating as part of the Montgomery County government system for Health and Human Services. MCAAS has a staff of 105 employees. Staff are hired following the guidelines of the Merit and County systems and employed as Montgomery County personnel. Over 30% of the current staff have been employees of MCAAS for 11-20 years. Over 10% have been employed by MCAAS for more than 20 years. The longevity of our agency employees provides years of experience in service delivery and opportunity for mentorship for newer employees. This collaborative spirit among employees fosters effective services for the future by building on past experience and knowledge.

MCAAS has an 18 member Advisory Council tasked with assisting in oversight of MCAAS and its delivery of services and programs as outlined by Pennsylvania law. The Advisory Board members are appointed by the Montgomery County Commissioners. The Advisory Board meets monthly with the MCAAS director to review agency operations and discuss issues related to services and operations. The Advisory Council actively participates in the development of the 4 year plan.

The Montgomery County Aging and Adult Services office is located in Norristown at the Montgomery County Human Services Center, 1430 DeKalb Street. There are other MONTCO Human Services Agencies located at the same location. Centralization of the County Health and Human Services promotes a cooperative spirit among the agencies. Many consumers and their families in the system are eligible for and receive multiple services through the County Health and Human Services Agencies.



Services Provided for Aging Adults

Adult Day Services

Adult Day Services are community based group programs designed to meet the needs of functionally and/or cognitively impaired adults through an individual plan of care. These structured, comprehensive programs provide a variety of health, social and other related support services in a protective setting during part of a day. Adult Day Centers generally operate programs during normal business hours, five days a week. Some programs offer services in the evening and on weekends. In the Commonwealth, centers must be licensed by the Pennsylvania Department of Aging and meet State regulations.

Adult Day Services can assist not only program participants but working and non-working caregivers, by providing peace of mind that loved ones are being cared for in a safe, enjoyable environment. Planned activities, health monitoring, meals and appropriate exercise help to improve and maintain a participant's level of functioning. Services also enable people to remain at home in the community and prevent costly, premature nursing home placement.

Elder Abuse and Protective Services Program

Under the protective services law, adults age 60 and older who because of mental or physical dysfunction are at risk from abuse, neglect, exploitation or dangerous situations, may be reported in need of protective services. MCAAS has a specially trained team of workers to respond to reports of suspected elder abuse. Suspected elder abuse is reported to the Elder Abuse Hotline at 1-800-734-2020. When a report is made, the caller is asked detailed information. A determination is made as to how the agency can best respond to the concerns. Often a timely investigation is initiated to look into the situation. The protective services team is trained to intercede as needed, keeping the older person's right to choose in mind.

If an older adult is in need of immediate protection, MCAAS may provide temporary shelter, access to medical care, in-home services or other interventions to alleviate the crisis. Once the situation is stabilized, long term considerations are addressed with the older adult and significant others. The team also provides other referral information such as Elder Attorney Lists, Domestic Violence and Victim Services hot lines.

Family Caregiver Support Program

The Caregiver Support Program assists caregivers with particular needs to continue caring for loved ones at home. The program is designed to reduce caregiver stress and reinforce the care provided to dependent, older adults within the home. A care manager works with family caregivers to plan supportive services which meet the needs of the older person receiving care. The care manager counsels

families as to the benefits, services, supplies, home modifications and equipment available to assist in reinforcing personal care within the home.

Depending upon annual income, families may be eligible to receive reimbursement for needed services and supplies. This may allow caregivers to purchase respite care, adult day care, personal care or other services essential to caring for a family member. Caregiving supplies such as disposable briefs, bed pads or other medical equipment and supplies may be purchased by the caregiver and reimbursed through the program as well. An important feature of this program is its focus on the unique needs of individual caregivers. It allows for flexibility as well as choice. Caregivers can work with care managers to choose what is most needed to continue providing care within the home.

Financial Advocacy Program

Montgomery County Aging and Adult Services provides financial advocacy services to seniors age 60 and older, residing in Montgomery County and applying for home and community based services. During the process of applying for home and community based services, the County Assistance Office must determine the older adult's financial eligibility for services. There are two types of documentation that must be provided, a completed 600L form (Department of Human Services Medicaid application) and five years of financial documentation.

Montgomery County Aging and Adult Services Financial Advocates assist in completing the 600L form and/or gathering required financial documentation. The service is offered at no cost. All older adults wanting to receive in home services can contact the Intake and Referral unit at Aging and Adult Services at 610-278-3601. The intake department can complete a referral for in-home care and inform of the need to receive financial advocacy services.

Information and Referral

MCAAS Information and Referral service provides adult consumers as well as their families with appropriate information, resources and referrals to meet individual needs. Currently, there are five trained staff members. Help is available by phone, mail, email or in person. The Information and Referral Service has assisted 11,500 consumers in the past year.

Level of Care Assessments

This service provides a care assessment for consumers. Those referred to the agency are evaluated to determine what level of care is required in order to meet his/her needs. The assessment unit consists of 13 assessors, 4 supervisors and 1 registered nurse. Assessors for this unit work remotely in order to maximize efficiency and use resources effectively. Assessments are conducted in various settings, in home, hospitals, and nursing facilities. The assessment unit conducted 4166 assessments last year.

Ombudsman Program

MCAAS ombudsman program has trained staff members and volunteers to help individuals who have a complaint or problem with any long term care service. The staff is knowledgeable in providing information about consumer rights and assisting consumers in exercising those rights. Ombudsmen advocate for high standards of quality care and promote strict enforcement of those standards. The Ombudsman team promotes a high quality of life for care dependent Pennsylvanians, 60 years and older. They act as a consumer representative who works within the legislative and rule making process to improve long term care services throughout the state. The Ombudsman assists long term care consumers in pursuing remedies to their problems. This service is used by residents of nursing and personal care homes, individuals using long term care in their homes and community, staff of long-term care facilities, government agencies and families and friends of individuals living in nursing and personal care homes. Some issues handled by the ombudsman are billing issues, concerns about quality of care and appeals regarding transfers, discharges, discontinuance or changes in services.

Nursing Home Transition Program

MCAAS Nursing Home Transition (NHT) provides people with the assistance they need to move back to the community, including set up of services to insure they can live comfortably and safely. NHT staff visit nursing homes to identify individuals who want to move back to the community. NHT can assist with finding housing, making a home accessible, planning the move, arranging for personal assistance services and other community services. Individuals eligible for this program must be 60 years or older, live in a nursing home in Pennsylvania and interested in returning to the community.

The Waiver Program

This program provides extensive home and community based long term care services to individuals as an alternative to nursing home placement. Only older residents of Montgomery County who can be cared for safely within the community setting are eligible to participate in the program. A variety of in-home services can be provided through the Aging Waiver program to meet the individual's needs. Staff meets with each consumer and their families to assess the consumer's needs, develop a plan of care, and allow the consumer to choose who will provide the care within the home. The consumer must be 60 years of age or older, meet Medicaid financial eligibility requirements and require the level of care provided in a nursing home. Your financial eligibility must be determined by the County Assistance Office prior to your involvement in the program. The Waiver Program currently serves over 800 individuals.

The OPTIONS Program

This program provides care management and in-home services to aging County residents who are experiencing some degree of decline in their physical or mental health status. Individuals are assessed

to determine their needs. Our agency can provide care management and services for individuals 60 years of age and older including personal care, home support, adult day services, transportation, home health, emergency response systems and medical supplies. The care manager works with the consumer and, if necessary his/her family to determine the individual's needs and how those needs should be met. A care plan is developed and implemented with the input of the consumer. The care manager orders the services and works with the service provider to ensure that the services are being provided as ordered and that those services are effective in meeting the individual's needs. OPTIONS consumers are required to share in the cost of their services. The cost share fee is based on the consumer's (and spouse's if applicable) income and amount of services received. The OPTIONS Program currently serves over 1,000 individuals.

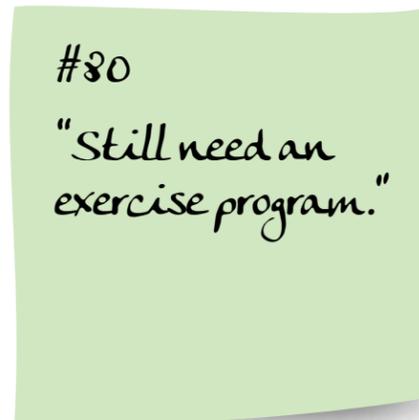
Senior Center Services

This service is a healthy living program supported in part by the Montgomery County Office of Aging and Adult Services. Senior Centers are the first step towards maintaining a quality independent life in the community. Types of services available: Information and Assistance, Recreation, Education and Wellness Programs, Fitness Activities, Health Screening, Outreach (including home visits), Socialization, Transportation, Wellness Activities and Congregate Meals (hot noontime meal).

A broad range of volunteer opportunities are available across the spectrum of senior center activities and are not limited to the following: Meals on Wheels (packers, drivers & escorts), Assistance, Greet, Peer Led Activities, Clerical, Kitchen Assistant, Newsletter and Arts & Crafts. Active volunteering promotes good mental and physical health.

Transportation

Older consumers and low-income individuals who meet the basic eligibility guidelines may be eligible for assistance and transportation. Transportation is available through a shared-ride program to go to senior centers, adult daily living centers, medical appointments, shopping and for other important needs.



Home Delivered Meals

Home Delivered Meals is an essential service that helps consumers stay in their own homes. Montgomery County AAS contracts with eight providers across the county to provide 2 meals per day Monday through Friday, one hot noon time meal and a sandwich meal for later in the evening. Some consumers also receive frozen meals on Friday to heat up and eat during the weekend. Just as important as the nutrition is the daily check on the consumers by the meals on wheels volunteers. There are over 1,000 meals on wheels volunteers that assist with the preparing, packing, and deliveries of over 300,000 meals annually. Last year, these volunteers donated more than 51,000 hours of service.

The Community We Serve

County Background

Montgomery County was founded in 1784. Located North West of Philadelphia it creates the city's northern border. With 483 square miles, Montgomery County includes diverse areas of dense population along with farmland and unique areas of open space. MONTCO is the third most populous county in the Commonwealth of Pennsylvania, composed of 24 boroughs and 38 townships and designated urban. The county seat is located in Norristown. The governing body consists of three elected commissioners.

General Population

While Pennsylvania has an overall population average of 283 people per square mile, Montgomery County has a much denser population with 1,655 people per square mile. The 2014 US Census Bureau estimates are up 2.4% with the population at 809,372. Population growth continues in MONTCO and the projection for 2020 is 823,564.

As of 2014 estimates, the median age of county residents is 41 years of age, rising from the 2010 Census of 40. Median household income is \$79,926. Data comparisons with other Pennsylvania counties show MONTCO has a higher median age, greater household income, higher levels of education and lower percentages of poverty and unemployment. All indications are that growth, which has occurred steadily since before the 2000 census, will continue.

Montgomery County in Comparison With Pennsylvania

	Montgomery County	Montgomery County Over 60+	Pennsylvania
Population	809,372	176,411	12,702,379
Median Age	41	70.3	40.3
Household Income	79,926	76,383	53,115
Individual Poverty Level	6.4%	5.9%	13.5%

Gender in the Community

The American Community Survey of 2014 shows Montgomery County's population at 809,372. Males are numbered at 392,968 and females at 416,403. Males equal 48.6% and females equal 51.4% of the general population. Trends show that as the general population ages, females consistently exhibit higher percentage rates. Males at age 65-69 make up 4.5% of the general population while females make

1 in 3 Americans
is now 50 or older, in 2030
one out of every 5 people in the
United States will be 65-plus.

up 4.6%. Males at age 75-79 years of age constitute 2.3 % of the population and females 3.1 %. The male population continues to decline with age, at 85 years of age and older, males comprise only 1.8% of the general population while females make up 3.5%. Similar trends are evident in institutional settings as well. Nursing homes in Montgomery County report that females account for almost twice as many males. Life expectancy for males in Pennsylvania is 75.83 years while for females it is 81.05 years.

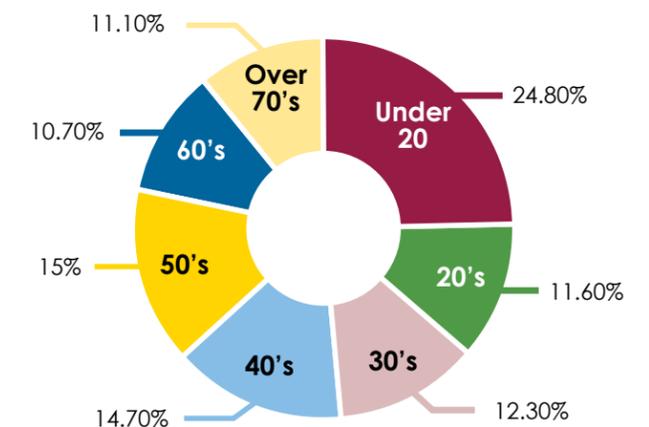
Population Shift

Montgomery County has seen a steady general population growth. The biggest shift within our County population is in the number of people age 50 and over. This segment of the population now accounts for over a third of the population. In the past century life expectancy has changed dramatically. In 1900, life expectancy for males in the United States was 47, for females it was 49. The life expectancy for males in 2000 was 75 and 80 for females. Montgomery County also claims 400 individuals over the age of 100+. The US population is expected to grow older over the next several decades. Growth is due to the baby boomer population moving into the ranks of 65 and over. As the U.S. is confronted with changes due to an aging population, it is also experiencing changes in racial and ethnic composition. The U.S. expects to see an increase in the proportion of older cohorts that are Hispanic and various races other than white. The U.S. Census bureau projects that by 2050 the oldest age categories will grow in significant numbers and proportions. This change in population structure will affect both families and society. Population in Montgomery County in the past four years for age 65 and older has increased from 15.1 % of the population to 16.4%. This is a 1.3% increase in only four years.

MONTCO Nursing Home
 Population by Age and Gender

Age	Male	Female
18	0	0
19-44	67	49
45-59	287	246
60-64	199	170
65-69	199	223
70-74	217	271
75-79	255	423
80-84	300	667
85-89	308	894
90-94	215	820
95+	71	81

Montgomery County
 Age % by Generation



Diversity in Montgomery County

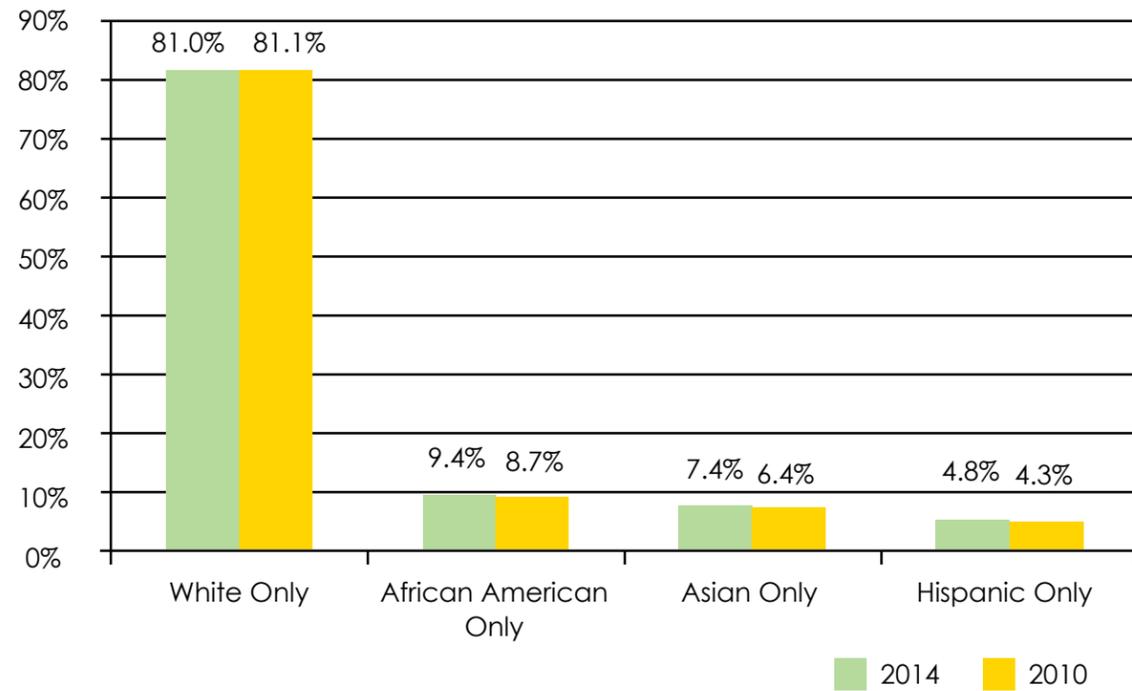
Census information validates the continued increases in racial and ethnic populations. All races over age 65 increased in population. The highest increases exist in the Asian and Hispanic groups for the over age 65 population. The total general population of Montgomery County had an increase from 2010 to 2014 for all races except for white, which exhibited a slight decrease.

Similar to Pennsylvania state data, the older population is becoming increasingly diverse in Montgomery County. Research has shown that such diversity demands an examination of how information is provided and services/programs are delivered to ensure that the needs of diverse cultures are met. The data also indicates increasing numbers of older adults and their families without ability to communicate effectively in English, creating a barrier to accessing services.

Total Population in Montgomery County Over 65 by Race

Year	1990	2000	2014
Total Population	147,300	156,532	176,411
White	140,906	145,587	156,476
Black	5,191	7,316	11,467
Asian	1,049	2,734	7,056
Hispanic	756	976	2,293
Other	65	199	353
American Indian	89	99	176

General Population Race and Ethnic by Percent



Disability Issues:

Information gathered from surveys and needs assessment meetings proved that seniors would like to age in place. As preparations for the four year plan begin it is essential that disabilities among MONTCO seniors are identified. In order for seniors to remain safe and independent in their homes, access to transportation, health care and basic services is required. Assistance with home support tasks, basic home repair, home maintenance and home modification are significant concerns to resolve if aging in place is to be successful. These supports were acknowledged in the needs assessment as key components to maintaining health and wellness as well as quality of life while aging in place.

70% of all adults over 65 will need long-term supports and services at some point in their lifetime.

#34
"Losing eyesight."

Transportation:

In 2015 the Commonwealth of Pennsylvania reported 1,901,546 drivers that were age 65 and older. Driving is a convenience and usually a sign of independence. There are numerous factors that affect driving skill and hamper our ability to safely drive as we age. Pennsylvania Department of Transportation (Penn DOT) has a mature driver examination program. Each month, Penn DOT will randomly choose 1650 drivers who are over the age of 45 before renewing their license.

These drivers will be asked to undergo visual and medical testing before being issued a renewed license. Based on this report of eye examination, the drivers may be required to pass a road test. Sometimes, a physical or mental condition can impair a driver's ability to safely operate a motor vehicle. The most common of these conditions is poor vision; and others, which may be age-related, include cognitive skills like memory, coordination and flexibility. In some circumstances, older drivers may have a restriction placed on their driver license. The types of restrictions vary, and are based on the results of a vision test, driving test, and the driving examiner's assessment. A restricted driver's license is intended to ensure that driving is within required abilities. Restriction can include daylight driving restrictions, supportive devices, corrective lenses and limited geographical travel.

#79
"I am concerned about getting to doctor's office."

Crashes Involving 75+ Year Old in Montgomery County 2011-2014

2011	2012	2013	2014
640	594	601	578

A major concern for seniors is that when they stop driving they will be stranded and unable to go places. In 2009, those over 65 who were no longer able to drive took 2.35 times fewer trips per day as compared to those who drove. As Montgomery County's senior population increases there is a greater need for a transportation system that can address different mobility needs and increased ridership. If seniors want to age in place, transportation will play a key factor in the success of that concept.

Some common concerns of seniors and individuals with disabilities using public transportation is waiting in unsafe areas for public transportation. Limited routes of public transportation can make it difficult for individuals with limited mobility to get from the public transportation stop to their desired destination. Some seniors feel unsafe while riding on transportation. Some individuals have difficulty with jerky movements and stops on public buses; this can be a risk for falls.

The Shared ride program acts as an alternative option for seniors requiring transportation. This program is used by many seniors and provides a means for seniors to maintain some independence. This program does have some limitations which include need for appointments, geographic limitations and sometimes long waits. Transnet in 2014 to 2015 in Montgomery County provide 49,045 rides to destinations ranging from medical appointments, shopping, work and senior centers.

Housing

The average household size for a home owner in Montgomery County is 2.73. The average household size for a renter in Montgomery County is 2.1. The average household size for home owners over 65 is 2. The average household size for a renter over 65 is 1.4.

As the County's baby boomers start to turn 65, the number of households with a resident over the age of 65 has increased. A majority of households over 65 are owners of their homes. The average value for houses in Montgomery County is \$290,800. Over 65, the average house value is \$282,900. As baby boomers choose to age in place, many older homes may need modifications to adapt for functional limitations. Another ongoing challenge for aging home owners is the daily/annual maintenance required in homes. The median year that houses were built in Montgomery County is 1966. Maintenance costs can vary from year to year depending on the age of a home. It is a rule of thumb to budget 1 percent of the value of your home each year for maintenance. The senior population often becomes physically unable to perform routine maintenance. Chores such as shoveling snow or cutting grass can present daily challenges for the aging home owner and/or a financial burden. If Pennsylvanians plan to age in place, considerations for maintaining and modifying homes will need to increase. The financial savings of aging in place in comparison to institutionalization is an incentive to find funding to help aging home owners stay in place.

Only 3.8%
Of housing units in the U.S. are suitable for Individuals with moderate mobility difficulties

#269
"Don't want to go to a nursing home."

	Montgomery County Total	Over 65 years and over
Total	307,953	105,016
Housing Type		
Owner occupied housing units	72.6 %	78.4 %
Renter occupied housing units	27.4%	21.6 %

Montgomery County has a significant number of home owners over 65. Many home owners over the age of 65 have retired and live on fixed incomes. The median real estate tax for 2015 was \$4,307. Yearly taxes can be a barrier to aging in place. Currently, there is a political movement to aid seniors with real estate relief. House Bill 791 is being introduced to establish a program to allow older residents over the age of 60 to volunteer in their school district and receive a real estate tax credit in exchange for their services.

Affordable housing is always a challenge for seniors. As we move forward, MCAAS needs to support the exploration of alternative housing arrangements for seniors. One alternative to help seniors age in place is the cohousing concept. This concept encourages a group type of living situation that allows seniors to socialize and even cook together as a family.

Medical/Health Statistics

The 2015 Montgomery County Health Profile confirms that our county has 15 hospitals: 9 are general hospitals, 4 are psychiatric hospitals and 2 are classified as “other”. Nine of the existing hospitals are classified as non- profit while 5 are for profit and 1 is a State operated hospital. On average there are 2.6 hospital beds per every 1,000 people. The hospitals between 7/2012 and 6/2013 on average ran at a 60% occupancy rate. Admissions during that period were 103,369. There were 127.2 admissions per every 1,000 people. The average semi private daily room was \$1,966. There are 545 physicians for every 100,000 people in Montgomery County. The National average is 261 per 100,000.

#227
“Understanding illness, knowing where to go for help, access to medical services and transportation.”

Montgomery County has 60 Skilled Nursing homes, 49 are Medicaid certified. This is the second largest concentration of nursing homes in the Commonwealth. There are a total of 7,116 beds: 6,898 are certified Medicare beds and 6,482 are certified Medicaid beds. The average occupancy rate reported for the 2015 County Health profile was 92.2 %. The average nursing home stay was 124 days. An average semi-private room rate was \$354 per day. There are 54.4 licensed/approved nursing beds per 1,000 people age 65 and older.

As MONTCO’s population ages there has been a steady growth in the home care based industry. The Pennsylvania Department of Health currently has 159 Home Care Agencies, 57 Home Health Care Agencies and 26 Hospice providers registered in Montgomery County.

Access to health care is vital for seniors aging in place. Seniors with disabilities and transportation challenges can experience difficulties getting to medical appointments. This contributes to delays in seeking care. There is an increasing need for health care to come to the consumer. Home care visits from professionals like doctors, nurses, occupational and physical therapist are becoming a requirement for those who are endeavoring to remain in the community.

Selected Leading Cause of Death in Montgomery County 65+ years	Year 2013
Diseases of Heart	1,503
Cancer	1,184
Stroke	482
Chronic lower respiratory disease	295
Alzheimer’s Disease	174
Total	5,885

Seniors in the Workforce

Recent trends in the American workforce indicate that the retirement age is changing. The mature worker is remaining on the job longer than in the past. This trend is proven in MONTCO’s demographics. Reasons contributing to this trend are personal finances, health, and change in government policy and regulations. Many Americans simply cannot afford to retire due to the high cost of living or a decline in retirement saving due to a stagnant economy. Americans are also generally healthier at the traditional retirement age than in past generations and may choose to stay active in the workforce longer. Another factor contributing to an older workforce are the changes in policy and government regulations that prevent age discrimination in the workplace. Some mature workers may be in demand due to the lack of skilled workforce to replace them. Montgomery County has a total population of 133,682 over the age of 65. 36,621 people over age 65 have worked in the past 12 months. 97, 061 over age 65 did not work in the past 12 months.

Cost of Living for Senior's

Due to low inflation, the government announced there would be no raise or cost-of-living (COLA) adjustment for Social Security recipients. According to the Senior Citizens League, that leaves senior citizens struggling.

The fact that there was no raise or COLA does not mean costs are flat. Montgomery County seniors struggle to make ends meet every day. The following are some of the fastest-rising costs for older consumers (January 2015-January 2016):

Product	Increase
Medicare Part B (if paid by check)	16%
Prescription Drugs	10.40%
Tomatoes	8.10%
Eggs	6.80%
Car Insurance	5.40%
Hospital Services	4.60%
Home Insurance	4.60%
Veterinarian Services	4.10%
Housing	3.70%
Doctor Services	2.30%

Source: The Senior Citizen League, Medicare, Truveris, U.S. Bureau of Labor Statistics

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"I worry if I will have enough money to meet my needs on my fixed income."

Local, Political and Economic Conditions Impacting MCAAS:

Local Condition Impacting MCAAS:

Recently, the Montgomery County Commissioners made the decision to assess the current structure of county human services. This resulted in a plan for restructuring the Human Services Department offices. The plan aligns all offices and forms one Health and Human Services Department. The decision to restructure followed a detailed organizational assessment of the current County arrangement by an independent consultant. The assessment identified weaknesses in the current structure noting the following:

- Lack of accountability for inter-departmental efforts
- Informal inter-departmental planning, collaboration, and communication
- Department specific funding
- Pressure to support constituents with multiple needs

Restructuring allows for the following:

- Single point leadership and accountability
- Platform for department-wide planning and service coordination
- Focus on cross-systems knowledge office-wide
- Expanded funding access
- Inter-office teaming
- Leveraging of cross-department resources.

The new Health and Human Services Department will have one Director and an Assistant Director of Strategic Support. The Department will include:

- Aging and Adult Services
- Behavioral and Mental Health
- Intellectual Disabilities
- Early Intervention
- Drug and Alcohol
- Child Care Information Services
- Children and Youth

- Health
- Housing and Community Development
- Veteran’s Affairs

The MONTCO plan to coordinate program offices will allow program offices to continue to administer, provide, and monitor unique, high quality services. Restructuring will facilitate a shift of focus from back-office administration to service delivery. Communication among all program offices will become more accessible and coordinated. The current structure of behavioral Health and Developmental Disabilities will expand department-wide.

Currently, the restructuring plan includes four strategic offices to support program offices. Offices will include:

- Community Information Office - develop and coordinate department-wide messaging and branding materials.
- Performance and Planning Office - oversee quality assurance, strategic planning, and performance management efforts for the Department.
- Finance & Administration Office -consolidate, streamline, and centralize fiscal functions and coordinate IT and HR services for the Department.
- Integrative Services Office – identify, assess and respond to multi-service needs of consumers and ensure the development of new integrated strategies

County Community Connections will be its own office and will serve as the “front door” to services for MONTCO residents. The head of Community Connections will report directly to the Department Director. Community Connections will play a key role in integration planning for intake, outreach, data collection, and other relevant service areas.

Steps towards plan implementation began with informational meetings for staff to explain new structure, rationale and timelines. The Director position for the newly formed Health and Human Services Department was posted and filled. Under the direction of the new Director restructuring has begun and the Health and Human Services Cabinet and steering committee are establishing final timelines for completion. Implementation workgroups have been created to address areas in need of review and development. Groups are staffed by employees from various program offices. Implementation groups include: Communication, Finance, Human Resources, Information Technology, Legal/Compliance, Space Planning, and Workflow. Groups are tasked with gathering information and brainstorming to address items related to each particular work environment. Open house meetings as well as “meet and greet” sessions are held to gather employee input and concerns. Opportunities to contribute and develop the mission, vision and value statements for the new department have been provided.

How will the County restructuring impact MCAAS ability to provide services? Restructuring will impact how consumers outreach and information services are provided using a “front door” approach. This method should facilitate with identifying consumers who are in need of/eligible for multiple programs when intake is performed. The comprehensive approach reduces the possibility for overlooking eligibility when utilizing individual intakes for each program as under the old structure. The restructuring allows MCAAS to use valuable resources efficiently to positively impact access and outcomes. Resources such as human resources, information technology and contract management could be shared by all programs, minimizing any duplicating of services. The efficient use of resources could possibly free up funding to be used to provide enhanced/increased services. Working as one Department, with one Director helps foster a more collaborative spirit between programs. It also will create opportunities for employees to expand personal/career growth by working in one of the new Strategic Offices in the Health and Human Services Department of the County.

Political Condition Impacting MCAAS:

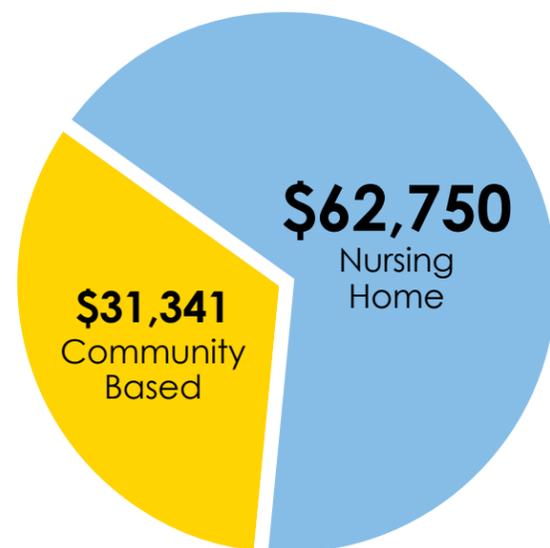
In February 2015, Governor Wolf joined DHS and PDA to announce an initiative to improve home- and community-based care services for seniors in Pennsylvania. The plan included budgetary, legislative, and executive actions. Expanding services for older Pennsylvanians and reducing long term care costs, phasing in Medicaid managed long term care, and ensuring seniors have choices about where to age were incorporated into the proposal. The MLTSS plan, named Community HealthChoices (CHC), is an integrated system of physical health and long-term services which focuses on improving health outcomes and allowing individuals to live safe and healthy lives with as much independence as possible. CHC supports individuals dually eligible for Medicare and Medicaid, older adults and adults with physical disabilities in the most integrated settings possible. CHC will serve an estimated 450,000 individuals, including 130,000 older persons and adults with physical disabilities who are currently receiving LTSS, in the community and in nursing facilities.

The current LTSS system is expanding community options, but not rapidly enough to keep up with growing demand. Pennsylvania has made progress on reforming its LTSS system. The percentage of LTSS funding spent on Home and Community Based Services (HCBS) increased from 37.3 percent in 2011 to 41.9 percent in 2013. However, Pennsylvania continues to lag significantly behind the national average of 51.3 percent spent on HCBS in 2013, ranking it 37th among states.

The LTSS system currently operates separately from Medicare and Medicaid physical health systems, which forces participants to navigate complex programs on their own. The State has decided to coordinate physical health and LTSS through CHC Managed Care Organization (MCO). Eligible participants will have a choice of two to five MCO’s in each region. The new system includes value-based incentives to increase the use of home and community-based services while continuing to meet program goals. The system allows eligible Pennsylvanians to receive services in the community, preserves consumer choice, and allows consumers to maintain autonomy in deciding the services they

receive. It also standardizes measures of both program and participant-level outcomes to assess overall program performance and improve CHC over time. CHC-MCOs will be accountable for most Medicaid-covered services, including preventive services, primary and acute care, LTSS (home and community-based services and nursing facilities), prescription drugs, and dental services. Participants who have Medicaid and Medicare coverage (dual eligible participants) will have the option to have their Medicaid and Medicare services coordinated by the same MCO. Behavioral health services continue to be provided through the behavioral health managed care organizations (BH-MCOs), but CHC-MCOs and BH-MCOs will be required to coordinate services for individuals who participate in both programs.

Comparison Cost per Year



Following State wide feedback from stakeholders the RFP went out to MCO's as the beginning of the selection process for the new system. DHS is expected to announce the awarded contracts by the end of June 2016. The new system will go live in the Southwest region in July 2017, the Southeast region in January 2018, and the Northwest, Lehigh-Capital and Northeast regions in January 2019.

Montgomery County is in the Southeast region with a start date of 2018. It is estimated that we have approximately 7833 dual eligible citizens over 60 in Montgomery County; 3055 are residents of nursing facilities and 4778 are residing in the community. The new system will have a profound impact on how we deliver services and what services will look like moving forward. The LTSS is shifting to a competitive, performance and outcome based environment. The new system will be data driven, requiring AAA's to invest in infrastructure to collect, analyze and use data regarding consumers' health care status. The future approach to care and service coordination needs are evidence-based. There are still many unknowns for the AAA system regarding subcontracting with the MCO's to provide the services that we have traditionally provided. AAA's will be expected to negotiate contracts to provide service coordination under the new system. It is currently unknown what role MCO's will want AAA's to

#31
 "Being able to stay in my home."

play as things progress in the new system. Some provisions exist which will allow a six month continuity of care while participants transition into receiving services through MCO providers.

The assessment unit will subcontract to perform level of care assessments under the new system. The new system addresses the conflict of interest in the previous system by separating services to avoid conflict of interest from one area of service to another. The new process will be initiated soon. The assessment unit will be required to maintain a 95% "on time" completion rate to maintain the contract. Preparation for this unit included investment in technology for the workforce to allow for remote, real time workflow, which has provided for increased efficiency and productivity in the unit. This work style is fast paced and has high performance expectations for staff.

CHC will change how the AAA's work and what the future look of AAAs will be. There are still many unknowns. However, these changes in the program incorporate delivering services in a competitive, evidenced based environment as well as maintaining the high standards of service already established.

Economic Conditions Impacting MCAAS

The Pennsylvania State budget provides funding for essential social services for our most vulnerable citizens, including aging Pennsylvanians. The proposed budget for 2016-2017 restores funding for human services programs. It includes funding for long term services and supports that enable older Pennsylvanians to age in place as well as outreach to rural area where seniors are hit the hardest. Seniors often experience hardships. Substantial property tax increases at local levels, high costs for prescription drugs and in some areas, a waiting list for home and community based services are some of the challenges aging adults face. Many seniors struggle to afford medication, groceries, and rising property taxes. Older adults often choose to age in place but high property taxes create a financial impediment.

The proposed budget plan currently includes investments in education which could fend off increased property taxes. Secretary of Aging, Teresa Osborne stated:

"This budget demonstrates the core values prioritized by Governor Wolf. The governor is proposing investments in caregiver services, the PACE program, and our 52 local Area Agencies on Aging and Senior Community Centers...This budget allows my department to continue its critical mission to serve our most vulnerable residents who look to us when they need to access services necessary to live a safe, healthy, quality of life with the dignity and respect they deserve."

This new budget also provides funding to uphold state responsibilities to the Older Americans Act, by providing programs designed to protect seniors from fraud and abuse, access to health and wellness

programs, and opportunities for positive civic engagement through community volunteer and senior employment programs.

Recently, Pennsylvanians experienced a historical budget impasse. Montgomery County was extremely fortunate during the budget impasse, the county budget was able to maintain human services provided to the county's most vulnerable residents.

Information from: Governor Wolf's Proposed Budget Protects Seniors

Budget will help the commonwealth's older citizen's age well in their homes and communities
Mar 03, 2016, from Pennsylvania Department of Aging

Local Needs Study for Montgomery County

The planning process for the 2016 - 2020 plan began April, 2016. MCAAS updates its strategic plan every four years utilizing staff and Advisory Council members along with community input. Goals from the prior plan were evaluated and assessed. Updated frameworks were then established which defined regional and county needs related to older or disabled adults and created the structure for developing a new plan. New trends, changes in programs and funding, along with the impact on planning and delivery of services were then the focus of discussion among all the collaborators.

Along with demographic studies and needs assessments, the opinions from approximately 650 participants were considered. Information was gathered in two ways:

1. **MCAAS Advisory Group Meeting/Public Hearing**—Total 2
2. **Montgomery County Community Council Meeting**—Total 1
3. **Surveys**—Total 645 from consumers, caregivers, service providers, staff members

The resulting information and input from individuals/groups enabled us to identify the primary needs within the community.

Advisory Council Input

A workshop meeting was held for input at the May 2016 meeting. At that time the Advisory Council and Management Team were able to identify certain priorities related to needs and areas of concern for the aging. Dialogue resulted with a list of primary concerns:

1. **Transportation**
2. **Access to Information Related to Available Services**
3. **Adequate Supports for Aging in Place**
4. **Affordable Housing**

The MCAAS Advisory Council considers increased advocacy and outreach as the most important focus in improving access to services and minimizing barriers. Increased access will assist this population in maintaining their independence within their own homes if they choose, or aid them in attaining appropriate alternatives based on their individual needs. The intent of MCAAS Advisory Council is to work cooperatively with local and regional sources to increase funding and support for home and community based service.

MCAAS Staff and Management Team Input

MCAAS staff responded to survey questions addressing improved/enhanced delivery of services as well as community outreach. Useful comments were provided for mitigating existing problems and potential solutions for future growth. Suggestions were focused on improving the delivery of services and supporting individuals in efforts to remain independent in communities. Training and communication were listed as priorities if staff is to maintain their high standard of service. The need for consistency in maintaining technology and tech support was also a focus. Staff must have available resources to ensure their training/support is kept up to date for the benefit and safety of consumers and agency/programs as well. As in most organizations, interest in remote work opportunities as an alternative exists.

The following are collective data from staff for improving community awareness of MCAAS services:

- 1. Marketing/Outreach Staff**
- 2. Media-Newspaper/TV/Radio**
- 3. Montgomery County Website**
- 4. Social Media- Facebook, twitter**
- 5. Agency Brochures**

Additional locations where MCAAS information would best be disseminated:

- 1. Religious Institutions**
- 2. Libraries**
- 3. Senior Center**
- 4. Senior Citizen Groups**
- 5. Pharmacies**
- 6. Grocery Stores**

Provider Input:

MCAAS works collaboratively with local providers in delivering services to the aging and adult population. Relationships with agencies are valued and respected for strong working relationships provide optimum services. 84 of these providers were able to contribute input. Survey responses addressed consumer needs, efficiencies, effectiveness and problems. Training on the diverse programs MCAAS offers is needed. Agencies and consumers cannot access programs that are not

known. Promotional material is best in brochure format, given out by outreach staff, offered on the Montgomery County Website, and accessible on social media. Providers' preference is to access MCAAS services either through phone or through the web. The needs of caregivers in the community were prioritized as follows:

- 1. Respite Opportunities**
- 2. Support Groups for Caregivers**
- 3. Reliable Transportation**
- 4. Education/Training/Information Sessions**

Consumer Input

The Consumer is the most important priority in any agency work. Input from consumers allows organizations to know if they are achieving their mission and goals. MCAAS solicited input from their users to learn their opinions on the needs of the population and the best way for them to gain information on services. There were 482 Consumer respondents. The following were the major concerns:

- 1. Supports Needed to Age in Place**
- 2. Health Care Access/Issues**
- 3. Housing Issues**
- 4. Transportation Access**
- 5. Senior Center Access**

Accessing Information:

- 1. Mail**
- 2. Telephone**
- 3. Internet/E-mail**
- 4. Senior Centers**
- 5. Home Visits**

#79

"I am concerned about not being able to drive."

MCAAS Study Results and Challenges

There are common themes and priorities from each group of participants in the study. Whether through survey, dialogue during a meeting, staff discussion or Advisory Council workshops all groups shared some common ground. The Montgomery County Office of Aging and Adult Services exists to improve the quality of life for older and disabled adults in our community. It can address needs related to delivery of services and programs. Striving to deliver services more efficiently and effectively while being fiscally responsible with available resources is a priority. In service agencies the staff has consistently enabled organizations to do more with less. However, the challenges confronting communities such as affordable housing and the higher cost of living in Montgomery County is outside of agency control. Priorities and goals which may minimize the repercussions of those harsh challenges are what the updated four year plan attempts to do. The goals attempt to respond to needs which were identified in this collaborative undertaking. Unfortunately, the resources to implement action plans tailored to achieving those goals are limited.

The challenge is to provide services to an increasing number of seniors while increases in funding are negligible. Funding does not match the growth of the senior population being seen worldwide. State and federal support has significantly changed for our local aging services. However, Montgomery County is fortunate in that the Commissioners offer strong support at the County level for the department of health and human services for aging adults. Nonetheless, agencies are limited in what they are able to do when there are such serious funding constraints.

Resource Development

Montgomery County is fortunate to have many foundations located in the region. We have a good relationship with a few, but should work toward increasing our foundation support. There is a local foundation, HealthSpark, that has been convening meetings for Montgomery County regarding Community Health Choices (CHC). This foundation is supporting efforts to ensure the community is aware of CHC and the successful implementation of CHC. Deputy Secretary Jen Burnett has presented at a meeting of this group. There are several other foundations affiliated with hospitals that may be willing to partner on health education, outreach, and care transition projects. Other foundations may also be able support our efforts. As a department, we should plan to identify local foundations and their funding priorities, establish meetings with foundations having similar goals, and develop a presentation for projects that funders may be interested in participating in.

The county participates in a Hospital Partnership, a group of executive hospital leadership that meets to discuss ways to better serve the community, in particular to meet needs identified through the mandated Community Health Needs Assessments. The focus of this group can vary; Aging and Adult Services should inform this group on the needs of seniors and how hospitals can assist in serving seniors, particularly through care transition programs, fall prevention programs, awareness of Aging

& Adult services and knowledge regarding protective services cases and how we can improve reporting and outcomes.

Aging and Adult Services does not maximize its usage of volunteers. There are individuals in the community that have much to offer and we need to develop a plan to harness that energy and work to be useful for our seniors. The Pennsylvania Department of Aging encourages volunteerism and has technical assistance and tools to develop volunteer corps. We need to work closely with our RSVP program and others to develop additional volunteer opportunities so that the needs of seniors are met in their community. We utilize volunteers for our ombudsman program and they are a vital and dedicated group of individuals. There are many other uses for volunteers and we need to continue to develop this group within our agency.

There has always been a need for items that are non-reimbursable or items for seniors in need that do not qualify due to being slightly over income eligibility. These items may include hearing aids, canes, walkers, dentures, heating oil, and other needs. If the county could establish its own 501(c) 3 to allow for fundraising, we may be able to meet the needs of seniors while giving the community a way to support its seniors. A funding mechanism like this can also provide an avenue to promote our programs and services. We would be required to put in objective criteria for distribution of funding and we would establish a committee to oversee activities including fund raising, use of funds, monitoring the account, and ensuring appropriate utilization and outcomes.

Section 3

Goal: Promote Existing Services

Objective 1:

MCAAS will foster stronger collaborative relationships within the county human services organization and with community partners to ensure widespread, comprehensive knowledge of all programs and services offered by MCAAS.

Strategies:

1. MCAAS will enhance existing collaborations with municipalities, interagency councils, foundations and other community stakeholders to ensure services are promoted in the community.
2. MCAAS will support and participate as a member of the newly formed Montgomery County Health and Human Services Department with the new model of collaborative human services. MCAAS will cooperate with directives from the head of Health and Human Services and will participate with all new initiatives developed. This will ensure MCAAS is aware of all partnerships with other human services departments and will be representative and active in this model. This model seeks to ensure that aging services are widely known throughout the county and that there is a unified sharing of information within county service providers.
3. MCAAS will ensure that all new staff within the agency are fully trained on all agency programs (i.e.: PACE, APPRISE, Protective Services, ACLAMO, Your Way Home Senior Diversion Program, Senior Mental Health Outreach, etc.), not just those they work within, to ensure they are able to promote all MCAAS services while in the community.
4. MCAAS will continue to create new relationships and contracts with community agencies in an effort to serve more seniors and cross promote our services with them. All newly contracted agencies are offered training by MCAAS to ensure their knowledge of our programs.

Performance Measures:

Improved new employee orientation program to review wider variety of partner agencies programs and services (as measured by changes in new employee orientation procedure)

Number of presentations to municipalities, interagency councils and foundations

Increased awareness of Aging and Adult Services programs as measured through survey of providers and employees

Objective 2:

MCAAS will expand and enhance agency promotional materials, helping to connect older adults to all services offered by the agency.

Strategies:

1. MCAAS will expand its media promotions by establishing a social media presence (Facebook, Twitter, etc.), and by continuing to work with local press regarding our programs and services. The Health and Human Services department will establish a unit that is devoted to communications and community relations to enhance county promotion.
2. MCAAS will continuously update our website to include information on all agency programs. Website fosters cross promotion by establishing links to subcontracted agencies, senior center newsletters, MOW's, and other information relevant to older adults in Montgomery County.
3. MCAAS will work with publishers of the Senior Center Newsletter and make MCAAS a part of their Newsletter in order to inform all senior center members of MCAAS services and programs.
4. MCAAS will expand efforts to reach homebound consumers by exploring the possibilities of radio, television and print advertising. Exploring these avenues will ensure that more seniors are introduced to the Montgomery County Office of Aging and the services offered.
5. MCAAS will develop informational materials to reach out to underserved populations including LGBT and non-native English language speakers. Informational materials will include information on all programs including Protective Services.

Performance Measures:

Increased number of Facebook followers, posts and tweets

Increased traffic on Aging and Adult Program Office webpage

Number of articles in county senior center newsletters

Number of informational materials offered in various languages, literacy levels and targeted toward population

Goal: Improve Access To Services

Objective 1:

MCAAS will enhance the referral process necessary to specifically access Home and Community based service programs.

Strategies:

MCAAS will educate volunteers throughout the county and empower them to recognize those in need of service and facilitate contact with MCAAS.

1. The MCAAS website will provide direct links to aide in applying for Home and Community Based services through the Pennsylvania Independent Enrollment Broker.
2. Expanded social media presence will connect residents with MCAAS programs and services.
3. Our centralized intake and referral unit will expand its presence in locations throughout the County in order to provide personal contact with consumers.
4. MCAAS will continue to evaluate the effectiveness of our financial advocacy unit relative to financial approval for successful enrollment in home and community based services.
5. Consumer satisfaction surveys will be distributed ongoing in order to identify gaps in accessing services.

Performance Measures:

Number of volunteers educated and providing resources to Aging and Adult Services programs

Number of consumer satisfaction surveys completed annually

Increase in consumer satisfactions (establish baseline in initial survey)

Increased access to services throughout county as measured by zip code analysis of intake and referral clients

Objective 2:

MCAAS will continue to partner with PA LINK in promoting a no wrong door approach to services

Strategies:

1. MCAAS will continue to provide person centered counseling to eligible callers seeking resources and services.
2. We will educate community groups, faith based organizations and the public sector to the PA LINK website in order to facilitate person centered counseling and follow up.
3. Through person centered counseling we will strive to provide consistent staff to consumer contacts throughout the application process in order to promote personal advocacy and support.

Performance Measures:

Number of clients receiving PA LINK services

Increase in awareness of PA LINK services through provider survey

Objective 3:

MCAAS will partner with area Senior Center sites to expand awareness and referrals

Strategies:

1. We will educate senior center staff to the services offered through MCAAS
2. We will empower senior center staff to recognize consumer needs and facilitate contact through person centered counseling
3. We will explore the idea of utilizing space for on- site field work with regards to Intake and referral.

Performance Measures:

Number of presentations by Aging and Adult Services staff at county senior centers on programs and services offered by Aging and Adult Services

Increased number of PA LINK counseling referrals from senior centers (as measured through SAMS system)

Goal: Enhancing The Quality Of Services

Objective 1:

Increase the knowledge base of all staff regarding services available through other county entities and also through newly developed contracts.

Strategies:

1. Participate in a series of in-services and invite representatives of different health and human services departments to present information about their agencies
2. Provide a series of in-services with the providers of newly developed AAS contracts present their programs/services to staff.

Performance Measures:

Increase in staff awareness of contracted services (measured through staff satisfaction survey)

Increase in staff awareness of Health and Human Services programs (measured through staff satisfaction survey)

Objective 2:

Provide opportunities for provider, consumers and informal caregivers to give feedback on the services we provide through this agency and the services we provide through our subcontracted agencies.

Strategies:

1. Survey our home delivered meals providers to ascertain unmet needs they see in the community
2. Survey Meals on Wheels recipients to ascertain unmet needs. A paper survey delivered/ picked up by the MOW's volunteer could be utilized in addition to the U.S. Postal Service.
3. Survey consumers and their informal caregivers to ascertain satisfaction with services and suggestions for improvements.
4. Convene focus groups of consumers to provide feedback on services being provided/ areas of improvement/gaps in services
5. Convene focus groups of providers to identify gaps in services/areas for improvement

Performance Measures:

Identification and listing of unmet needs by providers and recipients of Home Delivered Meals programs

Increase in consumer and caregiver satisfaction with Aging and Adult Services (initial survey to serve as baseline measure)

Number of focus groups conducted with consumers

Number of focus groups conducted with providers

Objective 3:

Increase agency staff awareness of the unique needs of the aging LGBT population in Montgomery County and work with LGBT population to identify unmet needs in this population.

Strategies:

1. Convene a focus group with identified LGBT leaders in Montgomery County to identify unmet needs and identify "best practices" that are currently successful.
2. Survey members of LGBT groups in Montgomery County to identify unmet needs.
3. Provide training to staff to sensitize them to the unique needs of the aging LGBT population using knowledge gleaned from the above as well as utilizing existing community resources

Performance Measures:

Improved awareness of LGBT issues facing seniors among Aging and Adult staff (as measured through staff satisfaction survey)

Implementation of best practices with regard to meeting needs of LGBT community

Number of staff trained on issues relating to LGBT seniors

Objective 4:

Expand and improve data collection to ascertain best practices that enable Montgomery County older adults to remain at home safely.

Strategies:

1. Utilize data from the existing data base (SAMS) to identify the type, scope, amount and duration of services that enable consumers to remain at home safely for the greatest amount of time
2. Conduct focus groups for AAS to identify best practices for keeping their consumers safely in the community
3. Survey families of participants to ascertain what is successful in keeping their family member at home
4. Building on the new Health and Human Services model, convene focus groups from representatives of other health and human services departments to ascertain what programs/services they view as being successful in maintaining older adults in the community

Performance Measures:

Number of focus groups held on topic of keeping consumers in the community

Compilation of recommendations from consumers, family members, Aging and Adult Staff and other Health and Human Services staff regarding successful practices in keeping consumers supported and in their communities.

Objective 5:

Identify best practices of our Volunteer Ombudsman program and identify best practices of other successful Volunteer Ombudsman program to enhance our existing program.

Strategies:

1. Convene a focus group of existing volunteer ombudsman to ascertain best practices
2. Survey other county Area Agency on Aging volunteer ombudsman programs to ascertain best practices
3. Use data collected to enable us to expand the existing volunteer ombudsman program

Performance Measures:

Increased number of volunteers serving Montgomery County ombudsman program

Identification of best practice models and ideas to engage and retain volunteers

Goal: Empower The Workforce

Objective 1:

Provide resources for employment opportunities for minority, Limited English Proficiency or rural individuals who are between the ages of 60 – 64.

Strategies:

Strategy 1: MCAAS will partner with local and regional Workforce Development agencies to identify individuals with barriers to gaining employment and sustainable wages.

Strategy 2: MCAAS will support to the extent possible workshops and human resource panels from local businesses to increase employment opportunities for older individuals.

Strategy 3: MCAAS will encourage the existing provider network to train individuals to be caregivers who have barriers to gaining sustainable employment as it pertains to the service standards issued by the state.

Performance Measures:

Number of minority, LEP and Rural consumers provided with resources for employment

Number of workshops and human resource panels supported by MCAAS

Increased employment rates for individuals 60+

Objective 2:

Develop new resources for caregivers.

Strategies:

Strategy 1: MCAAS will partner with local Workforce Development agencies to determine opportunities for coordinating training workshops that aims to provide unpaid caregivers the necessary skills and information to be better caregivers.

Strategy 2: MCAAS will encourage caregivers to take advantage of on-line resources that provide information specific to the care being given.

Strategy 3: MCAAS will create a series of workshops and on line training materials on the agency's web page as a resource for consumers and providers to be better informed.

Performance Measures:

Number of workshop and on-line training materials posted on agency website

Measure on-line traffic to on-line training resources

Objective 3:

Provide staff training and increase positive work environment.

Strategies:

Strategy 1: MCAAS will conduct monthly/quarterly/annual technology trainings to ensure staff is trained in the current technology and technology being introduced either through in house trainings or through the use of various e-learning websites.

Strategy 2: MCAAS management will strive to improve appreciation of staff and acknowledgement of good work through the use of little or no cost incentives or a “Way to Go” board.

Strategy 3: MCAAS will hold quarterly trainings/workshops/discussions on current trends and hot topics related to Aging issues (i.e. Improve ability as a caregiver, Alzheimer’s, Dementia, or Substance Abuse).

Strategy 4: MCAAS staff will be encouraged to provide input into the county’s restructuring of its Health and Human Services Department.

Performance Measures:

Survey staff for job satisfaction-set baseline and measure annually for maintenance/improvement in figure

Number of in-house trainings for staff on technology/procedures (minimum 4 per year)

Number of in-house trainings on current trends and topics (minimum 4 per year)

Objective 4:

Develop resources to allow for greater use of new technologies to empower the workforce.

Strategies:

Strategy 1: MCAAS will review positions and job responsibilities to increase mobility of workforce

Strategy 2: MCAAS will increase the use of new technologies that will allow mobile staff the ability to scan or digitize documents outside of the office setting.

Strategy 3: MCAAS will continue to review the cost/benefit of updating technology in order for staff to adapt to changes in mobile technologies occur.

Performance Measures:

Number of consumers served in their communities

Amount of time and funding for travel time and travel costs for staff

Resources:

The following resources were used to examine demographics and trends as well as sources of information for developing the MCAAS 2016-2020 Plan.

- US Bureau of Census 2010
- Suburban Stats
- Living Wage Calculator by Massachusetts Institute of Technology
- 2010-2014 American Community Survey 5 year estimates
- The Comprehensive Plan MONTCO 2040: A Shared Vision
- <http://www.beckershospitalreview.com/finance/average-cost-per-inpatient-day-across-50-states.html>
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Special thanks to Marta Stanley Pecharo – Intern from Chestnut Hill College for her assistance with 4 year plan preparation.



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