

FY 2015 Performance Accountability Report DC Office on Aging

INTRODUCTION

The Performance Accountability Report (PAR) measures each agency's performance for the fiscal year against the agency's performance plan and includes major accomplishments, updates on initiatives' progress and key performance indicators (KPIs).

MISSION

The mission of the District of Columbia Office on Aging (DCOA) is to advocate, plan, implement, and monitor programs in health, education, employment, and social services which promote longevity, independence, dignity, and choice for older District residents (age 60 plus), persons living with disabilities (age 18 to 59), and their caregivers.

SUMMARY OF SERVICES

DCOA provides customer information, assistance, outreach, and employment/training services for District seniors, people living with disabilities, and caregivers so that they can be better informed about aging and disability issues, live a quality life, and maintain their independence.

The agency also offers home health, adult day care, nutrition, case management, residential facilities, elder rights assistance, health promotion, wellness, counseling, legal, recreation, transportation, and caregiver services for District residents to allow older residents an opportunity to remain at home and in the community for as long as possible.

The agency management gives administrative support and the required tools to achieve operations and programmatic results, which is standard for all agencies using performance-based budgeting.

OVERVIEW – AGENCY PERFORMANCE

The following section provides a summary of DCOA performance in FY 2015 by listing DCOA's top three accomplishments, and a summary of its progress achieving its initiatives and progress on key performance indicators.

TOP THREE ACCOMPLISHMENTS

The top three accomplishments of DCOA in FY 2015 are as follows:

DCOA reduced food waste in the Senior Wellness Centers by nearly 20% through the "What a
Waste" program. DCOA obtained the data needed to meaningfully engage customers to
better understand their taste and desires and identified procedural inefficiencies contributing
to food waste. DCOA established the Nutrition Task Force, which consists of 37 members, and
leveraged the data obtained to develop and implement policy reforms and system changes to



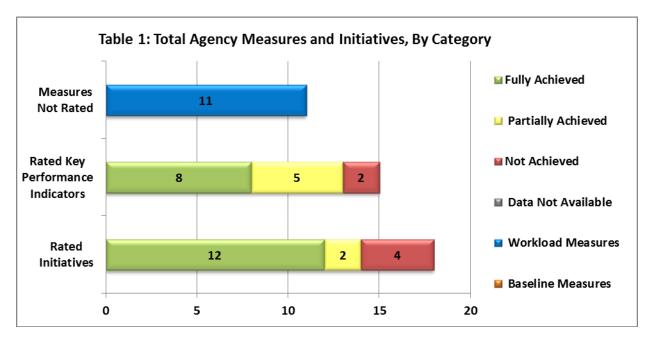
decrease food waste, improve systems of tracking, and meet customers' needs, which allowed DCOA to serve more people through its food programs.

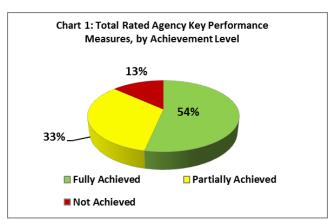
- DCOA, in collaboration with DHCF and community stakeholders, has planned, developed, and implemented a new enrollment process for the Elderly and Persons with Physical Disabilities (EPD) Waiver, meeting the following objectives: decrease EPD enrollment wait times; improve customer service; reduce stakeholder confusion about the enrollment process; and increase inter-agency collaboration. The EPD Waiver provides home and community based services for people who would otherwise qualify for nursing home stays. The new enrollment process was fully implemented in July 2015.
- DCOA contracted with Capital Impact Partners to 1) provide four DC-based villages individual Technical Assistance; 2) provide tools, resources and peer-to-peer knowledge exchange opportunities to the entire DC-based village network; and 3) to develop a local "how to" guide to support organizations interested in replicating the village model. As part of this initiative, DCOA sought to better understand what the agency's role should be in supporting the villages in the District. Through this initiative, DCOA identified how it could better support villages in the District through increasing awareness, leveraging partnerships, and building capacity. Villages are a critical partner in assisting District residents age in place by combating social isolation and providing support throughout the continuum of care.

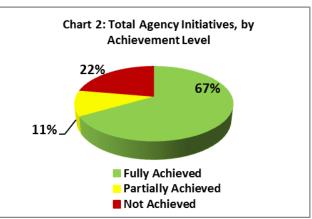
SUMMARY OF PROGRESS TOWARDS COMPLETING FY2015 INITIATIVES AND PROGRESS ON KEY PERFORMANCE INDICATORS

Table 1(see below) shows the overall progress that DCOA made on completing its initiatives, and how overall progress is being made on achieving the agency's objectives, as measurers by their key performance indicators.











In FY 2015, DCOA fully achieved more than two-thirds of its initiatives and nearly 55 percent of its rated key performance measures. **Table 1** provides a breakdown of the total number of performance metrics DCOA uses, including key performance indicators and workload measures, initiatives, and whether or not some of those items were achieved, partially achieved or not achieved. **Chart 1** displays the overall progress is being made on achieving DCOA's objectives, as measured by their rated key performance indicators. Please note that chart 2 contains only rated performance



measures. Rated performance measures do not include measures where data is not available, workload measures or baseline measures. **Chart 2** displays the overall progress DCOA made on completing its initiatives, by level of achievement.

The next sections provide greater detail on the specific metrics and initiatives for DCOA in FY 2015.

PERFORMANCE INITIATIVES – ASSESSMENT DETAILS

Customer Information, Assistance, and Outreach Division

OBJECTIVE 1: Provide robust outreach efforts and disseminate more information intended to bring about a greater awareness of senior services and better serve and attract the underserved population through the expansion and development of new services and campaigns (Age-Friendly DC Goal: Domain # 7).

INITIATIVE 1.1: Continue to increase DCOA's public awareness by conducting an external survey of the District's older adult and disabled population (Age-Friendly DC Goal: Domain # 7).

According to Census data, there are nearly 104,000 seniors in the District of Columbia, but DCOA currently serves approximately 32,000 District residents. In 2014, DCOA began to expand its public awareness efforts by facilitating informational sessions, hosting outreach events, and developing tangible earned and social media strategies to help reach additional residents. These tactics included, expanding outreach to earned media stakeholders to highlight key programs, new initiatives and events geared towards our target audiences. For FY15, DCOA will continue to expand our public awareness campaign and will conduct an external survey to District residents to explore what interests them and how the agency can better connect them to vital services.

Completion Date: September 2015 and ongoing.

Performance Assessment Key: Fully Achieved. DCOA successfully held and participated in 322 community outreach events throughout the city. These events helped DCOA reach over 20,000 seniors and people living with disabilities. Additionally, DCOA continued its Ambassadors' Training Program: an initiative to train community residents about the programs and services offered by the DCOA and its Senior Service Network. DCOA trained 108 ambassadors to serve as points of contacts for distributing information about the programs and services available to seniors, people living with disabilities, and caregivers in their wards and communities. Furthermore, DCOA was able to continue to promote the agency through



traditional and social media. Highlights include two public service announcements on the agency's Money Smart Program and preventing elder abuse and neglect.

INITIATIVE 1.2: Promote intergenerational programming in order to combat social isolation, increase emotional support, and offer learning opportunities (Age-Friendly DC Goal: Domains # 4 & 5).

DCOA will establish a partnership with a community-based organization to help recruit and train (30) thirty senior volunteers that will be assigned to selected early childhood programs in District of Columbia Public Schools (DCPS). The non-profit will provide a community core manager dedicated to supervising and implementing the curriculum to be utilized by senior volunteers. In addition, DCOA will work with the non-profit to facilitate training sessions, assign program locations, and provide technical assistance and ongoing support to the volunteers at the selected DCPS sites. Volunteers will serve approximately eight (8) hours per week during the academic school year. Additionally, the agency will also partner with a community-based organization to assist with the recruitment of approximately ten (I0) seniors that will serve as surrogate grandparents to selected youth in need of mentorship, guidance, and educational reinforcement. These programs will further reinforce community involvement, decrease social isolation, and increase emotional support for seniors.

Completion Date: September 2015 and ongoing.

Performance Assessment Key: Not Achieved. DCOA partnered with Jump Start to successfully train and place 16 senior volunteers in an early childhood tutoring program at DCPS schools. Spending between 6-8 hours a week in the classrooms of Langdon and Noyce Education Campuses, these seniors worked with the same small cohort of children for an entire school year, cultivating their language, literacy, and social skills through a curriculum focused on individualized attention. The seniors volunteered over 1,200 hours and impacted the lives of over 50 pre-k children during the 2014-2015 school year. Due to budget cuts DCOA could not start the surrogate grandparent program.

INITIATIVE 1.3: Publish DCOA's first-ever annual data report.

DCOA provides a myriad of services that makes a profound difference in the quality of life for older adults and persons living with disabilities. In order to capture the quality of our services in tandem with the build out of DCOA's new database system, the agency will produce an annual data report for distribution outlining accomplishments, benefits, value and the impact of programs and services. DCOA plans to print 2,000 hard copies to be distributed among our various stakeholders by mail or through our external relations channels. In addition, we will post a PDF version on our website. The publication will include data around the agencies programs, services and demographic information based on the needs assessment, policy papers, and other statistical resources.

Completion Date: September 2015.



Performance Assessment Key: Not Achieved. The agency experienced barriers to accumulating data due to the capabilities of our information technological system.

INITIATIVE 1.4: Continue outreach campaign for older adults and persons living with disabilities who reside in the District's public housing apartment units (Age-Friendly DC Goal: Domain # 7).

In 2014, DCOA began to collaborate with the District of Columbia Housing Authority (DCHA) to address a target population of older adults and persons living with disabilities who reside within apartment buildings managed by DCHA. Many older adults living in DCHA units are often head of households with children under the age of 18 and may be in dire need of special aging services because of their unique circumstances in raising grandchildren. In FY15, DCOA will continue this partnership and plans to expand direct contact with our target population by reaching out to individuals within the apartment buildings to provide information referrals for older adults and persons living with disabilities. **Completion Date: September 2015 and ongoing.**

Performance Assessment Key: Not Achieved. Due to staffing changes and budget restraints at sister agencies, DCOA was unable to achieve this goal. However, DCOA was able to reach out to some of our targets through our community outreach events.

INITATIVE 1.5: Expand DCOA's partnerships with other District agencies to help expand DCOA services and bring about a greater awareness of senior services offered in the District (Age-Friendly DC Goal: Domains # 5, 7, 9).

DCOA will partner with the District of Columbia Public Library (DCPL) to coordinate services to residents on DCOA's home delivered meals program. Residents who are on the home delivered programs and have visual impairments will receive braille reading materials, and individuals with hearing impairments will be provided specialized books. DCPL will help to disseminate DCOA's newsletters at their locations, and will provide outreach on their websites and social media sites to increase awareness of existing programs and services provided by DCOA.

DCOA will also partner with Metropolitan Police Department (MPD) and D.C. Fire and Emergency Medical Services Department (FEMS) to improve referrals and coordination of services for senior residents and their caregivers. In coordination with MPD's victim service programs, we will provide referrals to victims who may utilize DCOA's short- and long-term services to support them with the ongoing physical and emotional recovery process following a tragic event. Working with FEMS's "Street Calls" program, we will improve DCOA's ability to connect customers to needed non-emergency resources in the community.

Additionally, DCOA will continue our important work with the Office of Unified



Communications in order to educate more seniors in each ward on the importance of setting up a Smart911 safety profile. The profiles allow residents to input vital personal and medical information for each member of the household. This helps first responders and call takers to have important data in case of emergency. The goal is to establish Smart911 profiles for an additional 500 seniors in FY15. **Completion Date: September 2015 and ongoing.**

Performance Assessment Key: Partially Achieved. DCOA continued to work with OUC to educate and sign-up seniors for Smart911. DCOA registered more than 500 seniors for the program. DCOA began its partnerships with DCPL and plans to continue this initiative in FY16. DCOA successfully partnered with MPD and FEMS to increase coordination between the Street Calls program and ADRC's Information and Referral/Assistance (I&R/A) team, and will continue to work with them in FY16.

OBJECTIVE 2: Continue to develop active and vibrant neighborhood to create new economic opportunity and support a high quality of life, for the District's older adults and persons living with disabilities through the Mayors Sustainable DC Plan (Age-Friendly DC Goal: Domain # 4).

INITATIVE 2.1. Increase support to older adults and persons living with disabilities searching for employment and assistance with career counseling, and resume assistance (Age-Friendly DC Goal: Domain # 6).

DCOA will seek to partner with the Department of Employment Services in order to support older adults and persons living with disability search and connect to sustainable employment. The agency will also collaborate with new and existing businesses in order to place skilled and qualified residents in desired positions. DCOA will also work to place the agency's target population in training programs in order to improve their employability.

Completion Date: September 2015 and ongoing.

Performance Assessment Key: Fully Achieved. DCOA's Aging and Disability Resource Center's Older Workers and Employment Training Program (OWETP) successfully collaborated with the Department of Employment Services and Court Services and Offender Services Agency (CSOSA) of the District of Columbia to assist with DC returning citizens and DC government workers whom were injured on the job to return to the employment arena, as well as maintain OWEPT's current training programs for 18-59 year olds with a disability and 60 years or older D.C. citizens seeking employment. Because the OWETP staffers and management had forged strong relationships with DOES and CSOSA, this increased OWETP's work load. The OWETP team began to reach out to new employers such as: Walmart, Lowes, Home Depot, Target, American University, The Kennedy Center, and the National Stadium to negotiate positions (retail, carpentry, staff assistant, and telemarketing positions to name a few) for the business' talent recruitment scouts to tailor positions for the OWETPs candidates. This effort will continue into FY 16 to expand our employer network.



INITATIVE 2.2. Work with community partners to reduce food waste and expand nutrition supplemental program (Age-Friendly DC Goal: Domain # 8). In FY15, DCOA will fully implement "What-A-Waste," a pilot program with the National Foundation to End Senior Hunger, to measure, reduce, and reuse the food waste from congregate meals sites and turn it into compost. The program will also record waste produced at (3) three senior wellness centers and analyze this data. The agency will use the cost savings from the program in order to feed additional seniors and begin to strategize and evaluate new policies. Additionally, the agency will expand its nutrition supplemental selections to residents by offering two new types specific to issues with diabetes and kidney disease and three flavors for each supplemental type. Completion Date: September 2015.

Performance Assessment Key: Fully Achieved. DCOA experienced great success during the "What a Waste" program. Data collected shed light on customers' behavior and agency operations. DCOA established the Nutrition Task Force and leveraged the data obtained to develop and implement policy reforms and system changes decrease food waste, improve systems of tracking, and meet customers' needs. DCOA also offered all 3 nutrition supplements to seniors and will continue to do so in FY16. DCOA plans to adjust eligibility criteria to ensure the program is expanded to reach seniors of greatest need.

KEY PERFORMANCE INDICATORS-Customer Information, Assistance, and Outreach Division

КРІ	Measure	FY 2014 YE Actual	FY 2015 YE Target	FY 2015 YE Revised Target	FY 2015 YE Actual	FY 2015 YE Rating	Budget Program
2.1	Number of newly registered Smart911 residents	603	700	Not Applicable	510	72.86%	Customer Information, Assistance, and Outreach Division
2.2	Number of older adults, 55 years and over, receiving jobs with a pay rate above minimum wage	68 ¹	90	Not Applicable	92	102.22%	Customer Information, Assistance, and Outreach Division

¹ Reflects FY14 PAR number, which is different from FY15 Performance Plan



2.3	Percent of customers at Senior Wellness Centers self-reporting an increase in awareness and practice of healthy habits (annual survey)	86.5% ²	90%	Not Applicable	90%	100%	Customer Information, Assistance, and Outreach Division
2.4	Percent decrease in food waste produced by meal programs at congregate meal sites.	Not Applicable	20%	Not Applicable	18.7%	93.5%	Customer Information, Assistance, and Outreach Division

In-Home and Continuing Care/Community-Based Support

OBJECTIVE 1: Continue to assist with diverting vulnerable residents from nursing home placement by providing aging and disability resources in every ward of the city (Age-Friendly DC Goal: Domain # 8).

INITIATIVE 1.1: Improve residents' access to long-term care services and supports, home and community-based resources, and options counseling by improving the quality and capacity of the intake and referral system within the ADRC and increasing coordination with District government sister agencies (Age-Friendly DC Goal: Domains # 7, 8).

All Information and Referral/Assistance (I&R/A) staff will be trained in accordance with the professional customer service standards of the Alliance of Information and Referral Systems (AIRS). DCOA's ADRC will improve tracking of I&R/A contacts, referrals, and information provision through the implementation of a new call center phone system, and DCOA's new customer database. I&R/A staff will also begin using and contributing to the District-wide I&R resource database currently used by DC's 311 and 211 services. The training of staff and improved tracking of request will allow for increased customer service satisfaction. Additionally, DCOA's ADRC will participate as part of a workgroup of several District health and human service agencies to begin structuring a 'No Wrong Door' system in which agency staff are cross-trained to ensure District residents experience the fewest number of transferred calls before arriving at the information they need, and receive the same

District of Columbia Office of Aging Government of the District of Columbia

² Ibid.



information about home and community-based resource options regardless of the agency they contact for services. **Completion Date: September 2015 and ongoing.**

Performance Assessment Key: Fully Achieved. The ADRC has made great strides towards improved customer service by developing and implementing staff training and amending intake and monitoring systems. ADRC Associate Director conducted AIRS customer service training and AIRS certification prep training with the I&R/A team. Five ADRC staff obtained their AIRS Certification for Information & Referral Specialists in Aging/Disability (CIRS-A/D). Seven staff now hold their CIRS-A/D. Additionally, ACRC implemented a system of accurate and real-time data tracking in which all ADRC staff input demographic and other service details, which get compiled into accessible, easily understood data reports. This data tracking work has helped develop a baseline of accurate data on which we can measure objectives and provide insight into what is needed for DCOAs database reports. Furthermore, ADRC has provided leadership and support to the developing 211 system, contributing 1000+ aging/disability resources for uploading into the new system, as well as attended monthly planning meetings with 211 partners. Finally, ADRC managers have worked with the above DC sister agencies toward a collaborative, District-wide approach to improving customer service. DC received one of 5 Federal No Wrong Door Grants in October, 2015. This grant will help fund and provide technical assistance to DC's movement toward a true No Wrong Door system, including streamlining the following key elements District-wide: IT/database, resource database. person-centered perspective training, customer service training, information/referral/intake workflow.

INITIATIVE 1.2: Improve outreach to external stakeholders about ADRC's Nursing Home and Hospital Discharge transitional programs in order increase the number of residents who are able to age-in-place (Age-Friendly DC Goal: Domain # 7).

DCOA's ADRC will develop new and improved outreach materials to reflect the mission and scope of the program, and create a systematic outreach plan to reach all stakeholders: customers, caregivers, nursing facilities, hospitals, community-based organizations, advocates and other District government sister agencies, about the range of home and community-based services available to District residents. These new materials will educate residents about all of the transitional services within DCOA.

Completion Date: September 2015.

Performance Assessment Key: Fully Achieved. DCOA's ADRC contracted with Campbell & Company to assist with creating outreach materials that have a uniform look, content that is easy to read and understand for multiple populations, and accurate programmatic information that helps people understand DCOA, ADRC, and the specific programs highlighted on the materials. Final products include an outreach tool kit, a one-page flyer and tri-fold on



service provided by both ADRC and the Senior Service Network, and a one-page descriptor on each ADRC service. DCOA also produced a comprehensive presentation on DCOA's home and community based service, historical facts, and budget and trends.

INITIATIVE 1.3: Expand the existing dementia-capable system to enhance access to supportive services for individuals with Alzheimer's disease and related dementia (ADRD) and their caregivers, and individuals with ADRD living alone (Age-Friendly DC Goal: Domain # 8).

DCOA will continue to implement the District's first Alzheimer's disease State Plan. The agency will work with community partners to increase access to home and community-based services and supports for individuals with ADRD living alone through the "Alzheimer's Disease Initiative" federal grant awarded to DCOA in October 2014. The agency plans on implementing five new programs in collaboration with community partners: 1) DCOA will pilot a "Cluster Care" model of service that coordinates home care aide services to multiple customers within a high-density residential community living alone with ADRD; 2) DCOA and community partners will pilot a representative payee program; 3) DCOA will expand Sibley Memorial Hospital's "Club Memory" program across the city through senior wellness centers; 4) DCOA will develop a Saturday caregiver respite program in underserved Wards 7 and 8 through the senior wellness centers; and 5) DCOA will create a behavioral symptom management training program in order to promote understanding of ADRD, how to navigate long-term care options, and managing behavioral issues. **Completion Date: September 2015 and ongoing.**

Performance Assessment Key: Fully Achieved. DCOA's Alzheimer's Disease Initiative was successful in reaching its goal to increase access to home and community based service and supports for individuals with Alzheimer's Disease and Related Dementias (ADRD) throughout FY15. Implementation of the following five pilot programs was successful: 1) DCOA worked with its partners to try to establish a "Cluster Care" model of service for individuals living in high-density residential communities and living alone with ADRD, but found there was no population to suit this program; Money Management/Rep Payee Program has enrolled 4 individuals; 2) Sibley's Club Memory program has successfully expanded to Wards 7 and 8, and has enrolled 30 new members; 3) Saturday Respite programs were developed and established in both Wards 7 and 8; and 4) The Behavioral Symptom Management training program was successfully launched, and approved to provide professional Continuing Education Credits (CEUs) by the DC Board of Nursing Assistive Personnel to Personal Care Aides and the National Association of Social Work (NASW) for Licensed Social Workers, and presented 2 trainings to 64 professional and family caregivers. Additionally, DCOA's Alzheimer's Disease Initiative Grant also included coordinating a district wide multimedia outreach campaign to educate district residents on dementia and community supportive services. DCOA hosted the DC Brain Health Tour in collaboration with the Alzheimer's Association, Alzheimer's Foundation of America, Sibley Hospital, and Howard University at each of DCOA's Senior Wellness Centers



and our annual Senior Symposium. Each event consisted of workshops, free memory screenings, informational tables, prizes, and giveaways. In total, this tour hosted almost 250 seniors and supplied memory screenings to 146 seniors throughout the district.

INITATIVE 1.4: Reduce the number of preventable falls among seniors by coordinating and expanding community services that address physical and environmental factors contributing to falls (Age-Friendly DC Goal: Domains # 3 & 8).

DCOA will dispatch occupational therapists (OT) to seniors' homes to conduct environmental assessments that identify fall risk factors. Through this pilot initiative, the OT will provide a comprehensive report containing recommendations on how to eliminate fall hazards in seniors' homes. Additionally, the agency will begin to expand evidence based programs that focus on muscle strengthening and stability in the senior wellness centers. Environmental changes and strength training together will accomplish the goal of reducing and/or eliminating deaths by falls. According to the District of Columbia's Chief Medical Examiner, 87 accidental deaths among seniors in the District of Columbia were due to preventable falls in 2013.

Completion Date: September 2015.

Performance Assessment Key: Fully Achieved. DCOA experienced great success during the pilot. In-home, falls risk assessments were conducted for 85 district residents. Of those customers that received recommendations for durable medical equipment, home modifications, small ticket items, and/or referrals to additional professional assistance, more than 50% were successfully completed. Additionally, all six senior wellness centers implemented "EnhanceFitness," which is a group exercise program that helps older adults at all levels of fitness become more active, energized, and empowered to sustain independent lives. In FY15 more than 200 seniors enrolled in the program and took to take at least 3 hours of instruction per week.

OBJECTIVE 2: Enhance and maintain community living for seniors and people living with disabilities through the implementation of DCOA's 5-year strategic plan.

INITIATIVE 2.1: Increase hours and expand programs at the District's senior wellness centers (Age-Friendly DC Goal: Domains # 1, 4, 8).

In order to accommodate working older adults and make sure they have the opportunity to utilize and enjoy the benefits of DCOA's senior wellness centers, the agency will increase hours of operation. Senior wellness centers will be open in the evenings and weekends, and services will include meals. The centers will also hire a clinical staff member and provide salad bars to improve nutrition. Additionally, the agency will implement an intergenerational garden pilot program in two centers to educate seniors on healthy eating, provide intergenerational programming with youth interns from Common Good City Farm, and increase access to fresh produce. **Completion Date: September 2015.**



Performance Assessment Key: Fully Achieved. DCOA successfully expanded senior wellness centers' hours of operations to include Saturdays and earlier/later weekday hours. Salad bars were added to each center's meal program. Due to budget restraints and system efficiency measures, DCOA removed the requirement to hire clinical staff members at the centers in early FY15. Additionally, DCOA implemented the intergenerational garden pilot program with Common Good City Farm at two wellness centers. Seniors had the opportunity to tend to the garden and attend cooking demonstrations using the herbs and vegetables grown in the garden.

INITATIVE 2.2: Expand DCOA's Home Delivered Meal Program to fight against senior hunger (Age-Friendly DC Goal: Domain # 8).

DCOA will increase its outreach in order for residents to enroll in the agency's home delivered meal program. The agency will continue to expand the home delivered meal program to allow participants to receive home delivered meals on the weekends. This weekend expansion should dramatically cut down the number of older adults who are faced with the threat of hunger. **Completion Date: September 2015 and ongoing.**

Performance Assessment Key: Partially Achieved. Due to budget restraints, DCOA was not able to expand the enrollment in the home-delivered meal program. However, enrolled customers continued to have the opportunity to receive weekend meals. In FY15, DCOA instituted the Nutrition Task Force to help prioritize eligible customers and ensure customers that receive meals are in greatest need. A prioritization scale was implemented in FY15 to better assess the reach of the program and continues to be used in FY16.

KEY PERFORMANCE INDICATORS- In-Home & Continuing Care/Community-Based Supports

КРІ	Measure	FY 2014 YE Actual	FY 2015 YE Target	FY 2015 YE Revised Target	FY 2015 YE Actual	FY 2015 YE Rating	Budget Program
2.1	Number of people transitioned from nursing homes back to the community with the appropriate home and community-based supports and services	34	45	Not Applicable	43	95.56%	In-Home & Continuing Care/Community- Based Supports



	2.3	Number of people discharged from the hospital back to the community with the appropriate home	152 ³	150	Not Applicable	126	84.00%	In-Home & Continuing Care/Community- Based Supports
		and community-based supports and services						based supports
	2.2	Number of people who received long term care options counseling services through the ADRC	962 ⁴	1,000	Not Applicable	915	91.50%	In-Home & Continuing Care/Community- Based Supports
	2.4	Number of home delivered meals served on Saturdays	65,915	134,400	Not Applicable	150,654	112.09%	In-Home & Continuing Care/Community- Based Supports
	2.5	Number of congregate meals served at Senior Wellness Centers on Saturdays	Not Available	7,500	Not Applicable	7,820	104.27%	In-Home & Continuing Care/Community- Based Supports
	2.6	Percent of recommended in-home modifications to prevent falls that were implemented	Not Available	50%	Not Applicable	51.3%	102.6%	In-Home & Continuing Care/Community- Based Supports
<u> </u>	2.7	Percent of caregivers self-reporting an increased sense of emotional support through Memory Club	Not Available	100%	Not Applicable	80%	80%	In-Home & Continuing Care/Community- Based Supports

Agency Management

OBJECTIVE 1: Transform the District of Columbia to an Age-Friendly City, an inclusive and accessible urban environment that encourages active and healthy aging for all residents, particularly seniors (Age-Friendly DC Goal: All Domains).

INITIATIVE 1.1: Sustain existing senior villages and promote the development of new senior villages in underserved neighborhoods (Age-Friendly DC Goal: Domains # 3, 4, 8) In 2015, DCOA will partner with a community based organization to offer technical

³ Ibid

⁴ Ihid



assistance to new and emerging senior villages in order to strengthen business and organization processes and improve the collection of data. A senior village is an organization designed to provide seniors with access to the proper services and supports as they "age in place" preventing premature nursing home placement. In the past DCOA was able to provide seed funding to establish senior villages in communities that lacked the organization. After reevaluating this effort, the agency has concluded that more work needs to be done to lay the groundwork for these organizations to grow. Completion Date: September 2015 and ongoing.

Performance Assessment Key: Fully Achieved. DCOA partnered with Capital Impact Partners to successfully identify and deliver 20 hours of technical assistance each month to four villages, organize quarterly peer-to-peer knowledge exchanges building local leadership capacity, and produce the District's first "How to Start a Village" guide book. DCOA engaged all nine established villages, four villages in development, business partners, and community leaders to strengthen relationships and develop clear lines of communication.

INITIATIVE 1.2: Explore the feasibility of adult foster care homes in the District (Age-Friendly DC Goal: Domain # 3 & 8).

In order to continue to expand opportunities for older adults to age in the community, DCOA will explore the feasibility of rolling out an adult foster care program. Adult foster care has the potential to address the identified affordable housing barriers to successfully transition from institutionalized care back to the community. Adult foster care provide room, board, and general supervision of personal care services in a family home setting for older adults who require periodic or regular assistance with activities of daily living but who do not require a nursing home level of care. DCOA will study other states' programs, such as Massachusetts and Oregon, and evaluate market opportunities to determine if the District is a prime candidate for successfully implementing an adult foster care program. DCOA will issue a report on the findings and, if applicable, offer recommendations on next steps.

Performance Assessment Key: Fully Achieved. Under the coordination of the Deputy Mayor for Health and Human Services (DMHHS), DCOA worked with sister agencies to explore the feasibility of an adult foster care program in the District. Given the current availability of services to seniors in the community, it was determined that the District is already in the process of creating a system that other states call adult foster care or family foster care. DCOA, the Department of Health Care Finance (DHCF), the Mayor's Office of Policy and Legislative Analysis (OPLA), and DMHHS briefed the Council on these District-wide services, including key findings, and discussed the associated legislation, which Council determined will not be pursuing.

INITIATIVE 1.3: Educate District residents on identification and prevention of elder abuse and mandatory reporting (Age-Friendly DC Goal: Domain # 10).



In 2015, DCOA's Elder Abuse Prevention Committee (EAPC) will expand the "Money Smart for Older Adults" pilot program, a training program offered through a formal partnership with Federal Deposit Insurance Corporation and the Consumer Financial Protection Bureau. The informational sessions at DCOA's senior wellness centers and other senior residential facilities will provide tips on how to prevent common fraud, scams and other financial exploitation. Additionally, the agency will be releasing a guide and will commit to six (6) trainings in FY 2015 to staff and community partners on mandatory reporting of abuse of older adults and persons living with disabilities. **Completion Date: September 2015.**

Performance Assessment Key: Fully Achieved. DCOA's EAPC successfully trained over 1,000 people in the Money Smart for Older Adults program. Training sessions for seniors were conducted in the community at 27 locations across all eight Wards. In addition, the Money Smart for Older Adults training was included as an entire track of workshops at the Senior Symposium sponsored by the DC Office on Aging on May 13, 2015. EAPC members conducted the training and facilitated the sessions throughout the day and at least 195 seniors participated in the workshops. Furthermore, EAPC hosted two "train the trainer" classes for social workers, case managers, and other volunteers who expressed interest in taking the class and conducting Money Smart for Older Adults workshops in the District.

INITIATIVE 1.4: Coordinate with community partners to expand and increase access to services for Veterans (Age-Friendly DC Goal: Domain # 8).

DCOA will work with community partners and the federal government to expand access to the Veterans Directed Home and Community Based Services (VD-HCBS) program and to ensure a more efficient delivery of services. The VD-HCBS program allows Veterans the opportunity to self-direct their long-term supports and services. Additionally, DCOA will establish a new partnership with the VA Community Resource & Referral Center to increase coordination of services to those in need. **Completion Date: September 2015 and ongoing.**

Performance Assessment Key: Not Achieved. Due to federal government budget restraints, DCOA was unable to establish a new partnership with the VA.

OBJECTIVE 2: Oversee the implementation of agency-wide priorities.

INITIATIVE 2.1: Conduct agency sustainability assessment using OCA approved criteria developed by DDOE and OP in accordance with Mayor's Order 2013-209 (Sustainable DC Governance Goal 1, Action 1.2; Built Environment Goal 3)

Within one hundred twenty (120) days after the City Administrator approves sustainability assessment criteria developed jointly by the District Department of the Environment and the Office of Planning, each agency head subject to the authority of the mayor shall use the criteria to evaluate the sustainability of their respective operations in accordance with the



requirements of Mayor's Order 2013-209, the Sustainable DC Transformation Order, and submit to his or her responsible Deputy Mayor and the Office of the City Administrator the results of the agency's internal assessment.

Completion Date: April 2015

Performance Assessment Key: Fully Achieved. The agency submitted their completed survey to DDOE now DOEE before April 2015 which was the requirement of the sustainability assessment.

KEY PERFORMANCE INDICATORS-Agency Management

КРІ	Measure	FY 2014 YE Actual	FY 2015 YE Target	FY 2015 YE Revised Target	FY 2015 YE Actual	FY 2015 YE Rating	Budget Program
2.1	Average annual amount DCOA saves an older adult that receives services in the community rather than institutional care	Not Available	\$10,364	Not Applicable	\$10,980	105.94%	Agency Management
2.2	Average annual amount DCOA saves an older adult that regularly participates in services that promote aging in place	Not Available	\$4,907	Not Applicable	\$5,165	105.25%	Agency Management
2.3	Number of seniors, caregivers, and family members attending "Money Smart for Older Adults" training	Not Available	1,000	Not Applicable	1,039	103.9%	Agency Management
2.4	Number of Veterans enrolled in VD-HCBS program	1	10	Not Applicable	0	0%	Agency Management

WORKLOAD MEASURES - APPENDIX

WORKLOAD MEASURES





Measure Name	FY 2013 YE	FY 2014 YE	FY 2015 YE	Budget Program
	Actual	Actual	Actual	
Number of homebound meals served	413,694	542,816	723,249	In-Home & Continuing Care/Community- Based Supports
Number of congregate meals served	262,041	313,651	356,568	In-Home & Continuing Care/Community- Based Supports
Number of unduplicated customers provided trips to and from medical related appointments	2,674	3,211	2,161	In-Home & Continuing Care/Community- Based Supports
Number of unduplicated customers provided trips to and from social/recreational activities	Not Available	9,366	2,189	In-Home & Continuing Care/Community- Based Supports
Number of individual legal advocacy hours provided to customers (legal advice, estate planning, property taxes, etc.)	8,162	9,983	10,127	In-Home & Continuing Care/Community- Based Supports
Number of customers actively attending Senior Wellness Centers	2,764	2,957	3,293	In-Home & Continuing Care/Community- Based Supports
Number of older adults, 60 years and over, receiving information, referral and assistance through the Aging and Disability Resource Center	4,240	15,140	4,184	Customer Information, Assistance, and Outreach Division
Number of individuals living with disabilities, ages 18-59, receiving information, referral and assistance through the Aging and Disability Resource Center	1,206	5,422	1,375	Customer Information, Assistance, and Outreach Division



Number of caregivers receiving information, referral and assistance through the Aging and Disability	149	447	217	Customer Information, Assistance, and Outreach Division
Resource Center				
Number of seniors receiving employment and training assistance	1,120	438	522	Customer Information, Assistance, and Outreach Division
Percent of family caregivers self- reporting improved ability to provide care	100%	100%	100%	Customer Information, Assistance, and Outreach Division