

## D.C. Office on Aging FY2017

### FY2017 Performance Accountability Report

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, 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 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 information, assistance, and outreach to District seniors, people living with disabilities, and their caregivers in order to increase awareness and access to services and supports that will enable them to maintain their independence and quality of life in the community. The agency also offers adult day care, advocacy and legal services, caregiver respite and support, case management, education and employment training, fitness, health and wellness promotion, in-home support, long-term care counseling and support, nutrition counseling, recreation, and essential medical transportation that allow older District residents to age in place. Additionally, 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

### FY17 Top Accomplishments

Accomplishment	Impact on Agency	Impact on Residents
In FY17, the Safe at Home Program completed a total of 595 home preventative adaptation projects for DC seniors and people with disabilities.	DCOA was the recipient of the 2017 National Association of Area Agencies on Aging (n4a) Innovations Award in the Home & Community-Based Services category for the Safe at Home Program. The National Association of Area Agencies on Aging (n4a) is a membership association representing America's national network of 622 Area Agencies on Aging (AAAs).	The home adaptations reduce the risk of falls for residents. This program helps residents age in place in the communities they know and love.
In F17, the Ivy Brown v. District of Columbia case was successfully dismissed.	The case dismissal allows DCOA to continue its on focus on transition assistance necessary for individuals to move to community-based settings, when appropriate and desired. To help nursing home residents access these and other services necessary to transition to community-based settings, DCOA, through the Aging and Disability Resource Center (ADRC), fields a Community Transition Team who visit nursing homes, hospitals, and people's homes to help them apply for, collect documentation, and submit applications for the benefits and services needed for their transition, including the EPD Waiver.	Ivy Brown was brought by AARP Foundation, University Legal Services, and Arent Fox against the District in 2010, claiming that the District segregates people with disabilities in nursing homes. The plaintiffs claimed that the District lacked an effective transition program. After years of litigation and several reforms led by DHCF and DCOA to improve transition services, including accessing Medicaid services that allow residents to live in the community, the judge dismissed the case because the plaintiffs failed to demonstrate a concrete, systemic deficiency. Plaintiffs filed an appeal on October 18, 2017.
DC Office on Aging Medicaid Enrollment Team in collaboration with the	In June 2017, DC Office on Aging and the Department of Health Care Finance (DHCF) were awarded the 2017 16th Annual Cafritz Award for	As a result of this collaboration, more than 1900 District residents were assisted with enrolling in the EPD waiver program. Additionally, application

Department of Healthcare Finance was able to streamline the enrollment process for the Elderly and Persons with Physical Disabilities (EPD) Waiver program, increasing access to the EPD waiver program and providing the District's most vulnerable residents with an opportunity to live and age in place.	Team Innovation. As a result of this accomplishment, DC Office on Aging has further established its reputation as a key contributor to the District Government's mission to provide quality service to District of Columbia residents.	processing times decreased from 200+ days to 60 days or less; and 94% of EPD waiver enrollees expressed having a positive experience with the EPD waiver enrollment process.
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## 2017 Strategic Objectives

Objective Number	Strategic Objective
1	Customer Information, Assistance and Outreach: Provide information, assistance and outreach to District residents age 60 or older, people with disabilities between the ages of 18 and 59, and caregivers that promotes awareness and access to long-term care services and supports offered in the District.
2	Home and Community-Based Supports: Provide direct services and supports in the community, including nutrition services, for District residents age 60 or older, people with disabilities between the ages of 18 and 59, and caregivers that promote aging-in-place with dignity and respect.
3	Create and maintain a highly efficient, transparent and responsive District government. **

## 2017 Key Performance Indicators

Measure	Freq	Target	Q1	Q2	Q3	Q4	FY 2017	KPI Status	Explanation
<b>1 - Customer Information, Assistance and Outreach: Provide information, assistance and outreach to District residents age 60 or older, people with disabilities between the ages of 18 and 59, and caregivers that promotes awareness and access to long-term care services and supports offered in the District. (3 Measures)</b>									
Percent of residents working with D.C. Long-Term Care Ombudsman Program that self-report a satisfactory resolution to a complaint, concern, or problem.	Annually	80%	Annual Measure	Annual Measure	Annual Measure	Annual Measure	94%	Met	
Percent of residents working with DCOA's Medicaid Enrollment Staff that self-report a positive experience through the Medicaid enrollment process.	Annually	80%	Annual Measure	Annual Measure	Annual Measure	Annual Measure	94%	Met	
Percent of callers looking for information and assistance that heard about DCOA services through the agency's outreach efforts	Quarterly	20%	No applicable incidents	1%	32.9%	36.9%	34.7%	Met	
<b>2 - Home and Community-Based Supports: Provide direct services and supports in the community, including nutrition services, for District residents age 60 or older, people with disabilities between the ages of 18 and 59, and caregivers that promote aging-in-place with dignity and respect. (3 Measures)</b>									

Percent of family caregivers participating in D.C. Caregivers Institute that self-report an improved ability to provide care.	Annually	90%	Annual Measure	Annual Measure	Annual Measure	Annual Measure	100%	Met	
Percent of residents attending Senior Wellness Centers that self-report an increase in awareness and practices of health habits.	Annually	75%	Annual Measure	Annual Measure	Annual Measure	Annual Measure	92.2%	Met	
Average annual amount DCOA saves an older adult that regularly participates in services that promote aging in place.	Quarterly	\$6000	\$1557.8	\$1252.9	\$1407.5	\$1420.7	\$5638.9	Neutral Measure	

We've revisited a project to standardize District wide measures for the Objective "Create and maintain a highly efficient, transparent and responsive District government." New measures will be tracked in FY18 and FY19 and published starting in the FY19 Performance Plan.

## 2017 Workload Measures

Measure	Freq	Q1	Q2	Q3	Q4	FY 2017
<b>1 - Provide engaging socialization opportunities and community service and support awareness campaigns for District residents age 60 or older, people with disabilities between the ages of 18 and 59, and caregivers that combat social isolation, improve access to services, and project a positive image of aging and people with disabilities. (1 Measure)</b>						
Number of DCOA sponsored information and training sessions that increase knowledge and awareness of long-term services and supports in the community.	Quarterly	29	42	43	69	183
<b>1 - Provide information on, connection to, and assistance with accessing home and community-based services, long-term care options, and public benefits for District residents age 60 or older, people with disabilities between the ages of 18 and 59, and caregivers. (4 Measures)</b>						
Number of residents age 60 or older receiving information, referral and assistance through the Aging and Disability Resource Center.	Quarterly	3119	3830	4978	4608	16535
Number of people with disabilities between the ages of 18 and 59 receiving information, referral and assistance through the Aging and Disability Resource Center.	Quarterly	731	814	781	1234	3560
Number of caregivers receiving information, referral and assistance through the Aging and Disability Resource Center.	Quarterly	24	38	24	36	122
Number of residents served by DCOA's Medicaid Enrollment Staff.	Quarterly	657	665	713	616	2651
<b>1 - Provide legal and advocacy support and protective services for District residents age 60 or older in need of assistance with long-term care planning, quality of care disputes, estate and financial planning, and civil disputes. (2 Measures)</b>						
Number of hours of advocacy and legal support provided to residents.	Quarterly	2633	2440	1863	2296	9232
Number of hours of Ombudsman services provided to residents	Quarterly	366	473	407	257	1503
<b>2 - Provide core services and supports, such as case management and counseling services, for District residents age 60 or older, people with disabilities between the ages of 18 and 59, and caregivers. (3 Measures)</b>						
Number of residents receiving case management through Lead Agencies.	Quarterly	1066	1394	1003	978	2128
Number of residents receiving options counseling.	Quarterly	452	869	1255	2077	4653
Number of residents transitioned from an institutional setting to the	Quarterly	15	14	14	22	65

community						
<b>2 - Provide homemaker services and caregiver support for District residents age 60 or older to help manage activities of daily living and prevent caregiver burnout. (3 Measures)</b>						
Number of residents receiving homemaker services.	Quarterly	341	345	307	312	402
Number of residents received home adaptations.	Quarterly	86	70	176	263	595
Average project cost for Safe at Home adaptations	Quarterly	8689.22	9667.39	10148.15	5837.29	8585.51
<b>2 - Provide prepared meals, fresh foods, and nutrition assistance to District residents age 60 or older that maintains or improves health and the ability to remain independent in the community. (2 Measures)</b>						
Number of residents receiving home-delivered meals.	Quarterly	2290	2661	2358	2424	3218
Number of residents attending community dining sites.	Quarterly	3567	3584	3498	3662	5215
<b>2 - Provide socialization, physical fitness, and wellness programs for District residents age 60 or older that promote healthy behavior and awareness. (1 Measure)</b>						
Number of residents attending Senior Wellness Centers.	Quarterly	1890	2261	1812	1885	2881
<b>2 - Provide transportation to life-sustaining medical appointments and group social and recreational activities for District residents age 60 or older. (2 Measures)</b>						
Number of residents provided transportation to medical appointments.	Quarterly	1236	1236	1199	1349	1195
Number of residents provided transportation to social and recreational activities.	Quarterly	1247	1630	1291	1279	1462

## 2017 Strategic Initiatives

Title	Description	Complete to Date	Status Update	Explanation
<b>ASSISTANCE AND REFERRAL SERVICES (1 Strategic Initiative)</b>				
Expand opportunities for customer evaluation of DCOA's ADRC services.	DCOA will improve the customer service experience by actively seeking feedback through the use of a customer survey tool. DCOA will add two new groups of survey respondents to its existing customer survey, including the Elderly and Persons with Disabilities Waiver and Adult Day Health Program applicants. These new groups are reflective of an expanded partnership with the Department of Health Care Finance, and two new Medicaid program areas for ADRC. DCOA expects to conduct qualitative surveys each year, comparing responses to previous years, measuring improvements, identifying service gaps, and basing our plans for future changes on critical stakeholder feedback.	Complete	DCOA completed the development and implementation of two customer satisfaction surveys, one for the I&R/A Unit, and one for our MES team.	
<b>COMMUNITY OUTREACH AND SPECIAL EVENTS (1 Strategic Initiative)</b>				
Increase outreach to District residents by	Improve and enhance DCOA's information hub by creating a strategic communications plan that effectively engages our stakeholders. This plan will help the agency increase awareness and improve access to programs, services and	Complete	DCOA has developed the messaging strategy, key recommendations for improving internal communications, and priorities for FY 2018, which	

completing a strategic communications plan.	supports. This plan will include a redesign of the agency's website, develop social media strategies to increase visibility, improve information exchange.		include website redesign and utilizing new communications tools.	
<b>LEAD AGENCIES AND CASE MANAGEMENT (1 Strategic Initiative)</b>				
Enhance case management and transportation options through cost-sharing opportunities and leveraging of additional revenue sources.	DCOA will develop an action plan on community-based cost sharing and opportunities to leverage additional revenue sources to expand access to case management and transportation services. DCOA will work with the Department of Healthcare Finance and community partners to eliminate duplication of services, which will support the agency in its effort to fill service gaps and expand services. Additionally, the agency will research and create cost sharing opportunities to further support the expansion of supports for District Seniors.	Complete	DCOA has worked with the grantees and DHCF to identify case management clients that are being serviced by both entities, and developed an instructional guide for grantees on how to transition a client to EPD Waiver Provider in an effort to eliminate duplication. Additionally, Seabury Connector has increased its capacity to provide Medicaid Transportation for medical appointments through an approved contract with DHCF.	
<b>Nutrition Program (1 Strategic Initiative)</b>				
Implement logistical and administrative procedures that increase sustainability of the community dining pilot program.	DCOA implemented a 10 week pilot program in FY16, providing vouchers to more than 200 seniors in ward 7 and 8. These vouchers allowed seniors to dine at a participating local restaurant on their own time and order from a DCOA approved, nutritious menu. In FY17, DCOA will implement logistical and administrative procedures to increase the sustainability of the community dining pilot program to ensure more seniors can benefit from healthy dining opportunities.	Complete	DCOA provided orientations to the grantee administering the program and the participating restaurant, the Denny's in ward 7, to train all staff on the database program and review the rules of the pilot. Seniors were then able to dine at Denny's from August-September 2017. We enrolled 385 seniors from wards 7 and 8 and provided 1212 meals to 320 seniors. DCOA is now working to complete post-pilot surveys from the participants and restaurant to gather feedback and suggestions for future programming.	