U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

U.S. ADMINISTRATION ON AGING

STRATEGIC ACTION PLAN 2007-2012

APRIL 2007

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EXECUTIVE SUMMARY

The Administration on Aging (AoA) provides national leadership, funding, technical support and oversight to the Aging Services Network which is charged under the Older Americans Act with the responsibility for promoting the development of a comprehensive and coordinated system of home and community-based services for older people and their family caregivers. The Aging Services Network consists of a variety of national organizations, 56 State Units on Aging, 655 Area Agencies on Aging, over 240 tribal organizations, 29,000 community services provider organizations, and 500,000 senior volunteers. This network reaches into every community in the nation and plays an important role in delivering services and supporting consumer-centered systems of care that enable older individuals to remain living in their own homes and communities for as long as possible.

AoA's previous Strategic Action Plan provided a framework for modernizing the role of the Aging Services Network in long-term care. This modernization strategy was designed to strengthen the Network's role in advancing systemic changes in long-term care at the state and community-level that make it easier for consumers to learn about and access services, enhance consumer choice and control, and empower seniors to live healthier and more active lives. For five years now, AoA has been advancing this strategy by partnering with other Federal agencies and national organizations, including various private foundations, on a variety of grant programs and technical assistance efforts. This included support for the Network's role in successfully helping millions of seniors to learn about and enroll in the new prescription drug benefit available under Medicare. In 2006, the Congress incorporated the key elements of AoA's modernization strategy into the core components of the Older Americans Act, and authorized AoA and the Network to advance the strategy nationwide.

This Strategic Action Plan for 2007-2012 continues the focus on modernizing the Aging Services Network's role in long-term care, and gives particular attention to implementing the new provisions contained in the *Older Americans Act Amendments of 2006*. The changes complement and support the reforms being implemented in Medicare and Medicaid, and will help position the Aging Services Network for the 21st Century. This Strategic Plan also supports the HHS Strategic Plan and the Government Performance and Results Act of 1993 (GPRA).

The Plan establishes five goals and thirteen objectives. Like the HHS Strategic Plan, the AoA plan does not encompass all of the activities carried out by the agency. It is designed, instead, to describe the agency's priorities and provide an overall strategic framework to guide its fiscal and human capital investments. Annual Implementation Plans will be developed each calendar year to identify the specific activities staff will pursue to advance the goals and objectives contained in this document. In accordance with GPRA requirements, a complementary set of long-range goals has been established as part of this plan to help the agency measure its progress in achieving its goals and objectives.

AoA Strategic Goals & Objectives 2007-2012

Goal 1

Empower older people, their families, and other consumers to make informed decisions about, and to be able to easily access, existing health and long-term care options

- Provide streamlined access to health and long-term care through Aging and Disability Resource Center programs
- Empower individuals, including middle-aged individuals, to plan for future long-term care needs

Goal 2

Enable seniors to remain in their own homes with high quality of life for as long as possible through the provision of home and community-based services, including supports for family caregivers

- Enable seniors to remain in their homes and communities through flexible service models and consumer-directed approaches
- Continue to use Older Americans Act programs and services to advance long-term care systems change
- Continue to improve the planning and assessment efforts of the National Aging Service Network

Goal 3

Empower older people to stay active and healthy through Older Americans Act services and the new prevention benefits under Medicare

- Increase the use of Evidence-Based Disease and Disability Prevention Programs for older people at the community level
- Promote the use of the prevention benefits available under Medicare

Goal 4

Ensure the rights of older people and prevent their abuse, neglect and exploitation

- Facilitate the integration of Older Americans Act elder rights programs into Aging Services Network systems change efforts
- Improve the identification and utilization of measurable consumer outcomes for elder rights programs
- Foster quality implementation of new Older Americans Act provisions supporting elder rights

Goal 5

Maintain effective and responsive management

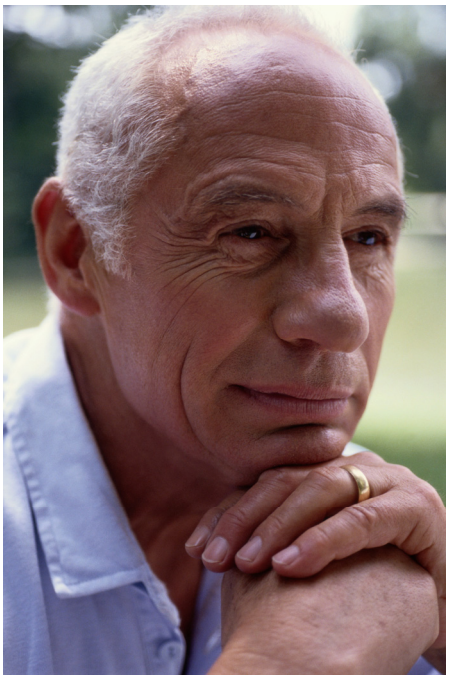
- Promote state-of-the-art management practices, including the use of performance-based standards and outcomes, within AoA and the National Aging Services Network
- Implement the President's Management Agenda
- Support the Department of Health and Human Services and the National Aging Services Network in administering emergency preparedness and response for older people

INTRODUCTION

Our Mission

The mission of the Administration on Aging (AoA) is to help elderly individuals maintain their dignity and independence in their homes and communities through comprehensive, coordinated, and cost effective systems of long-term care, and livable communities across the U.S. AoA does this by serving as the Federal agency responsible for advancing the concerns and interests of older people and their caregivers, and by working with and through the Aging Services Network to promote the development of a comprehensive and coordinated system of home and community-based long-term care that is responsive to the needs and preferences of older people and their family caregivers.

The Older Americans Act (OAA) provides AoA with the authority to deploy six broad operational strategies to advance its mission. These strategies include: 1) advocacy, which encompasses AoA's responsibility to represent the needs and concerns of older people in the policy, program and budget development processes at the Federal level; 2) the dissemination of consumer information and the conduct of public education activities; 3) the allocation of formula grants to the states, territories and tribal organizations; 4) the provision of technical assistance to national, state and community–based entities and other stakeholder organizations that affect aging services policies and programs; 5) research, analysis and program development, which includes the development of new knowledge and models that improve the quality of life and the delivery of health and human services, the replication of best-practices, and the translation of scientific research into practice at the community-level; and, 6) oversight of its programmatic and fiscal responsibilities.



Our Vision for Older People

Our vision for older people is embodied in the OAA and is based on the American value that dignity is inherent to all individuals in our democratic society, and the belief that older people should have the opportunity to fully participate in all aspects of society and community life, be able to maintain their health and independence, and remain in their own homes and communities for as long as possible.

Our Core Values

In the ongoing management of our programs and our strategic planning process, AoA is guided by a set of core values in developing and carrying its mission. These values include:

- Listening to older people, their family caregivers, and our partners who serve them;
- Responding to the changing needs and preferences of our increasingly diverse and rapidly growing elderly population;
- Producing measurable outcomes that significantly impact the well-being of older people and their family caregivers; and
- Valuing and developing our staff.

PLAN OVERVIEW

Development and Update of the Plan

Over the past five years, AoA has focused on efforts that strengthen the role of the Aging Services Network in long-term care in a way that builds on the Network's unique mission, promotes the national replication of its best practices, and complements changes occurring in the larger health and long-term care policy environment. This has involved partnering with other Federal agencies and national organizations on a variety of initiatives that make it easier for consumers to learn about and access services, provide consumers with more choice and control over the services they receive, and empower seniors to adopt healthy lifestyles that can reduce their risk of disease and disability. These initiatives have included the Aging and Disability Resource Center Grants Program, the Own Your Future Campaign, the Evidence-Based Disease and Disability Prevention Grants Program, the Cash & Counseling: Next Steps Program, the United We Ride Transportation Initiative, Medicare Prescription Drug Coverage Outreach, and the "My Health My Medicare" Campaign.

The Older Americans Act Ammendments of 2006 encompass significant changes designed to modernize the delivery of aging services through the use of Aging and Disability Resource Centers, Evidence-Based Disease and Disability Prevention Programs, and consumer-directed nursing home diversion programs targeted at people before they spend down to Medicaid.

The Older Americans Act Amendments of 2006 integrated the principal elements of AoA's modernization agenda into the core of the Act. The Act now authorizes all levels of the Network to actively promote the development of consumer-centered systems of long-term care and emphasizes the use of a three-pronged strategy for advancing systemic changes at the state and community level. This strategy includes: empowering individuals to make informed decisions about their care options through Aging and Disability Resource Centers; enabling older people to live healthier lives through the use of evidence-based disease and disability prevention programs, and providing more choices to individuals, especially those at high-risk of nursing home placement and spend down to Medicaid, through the use of flexible service models, including consumer-directed care options. The Amendments also include a variety of other changes that will help to modernize the delivery of aging services in the 21st Century, including new authority to enable community-based aging services providers to serve the rapidly growing number of seniors who need assistance and are able to pay for the full cost of their care.

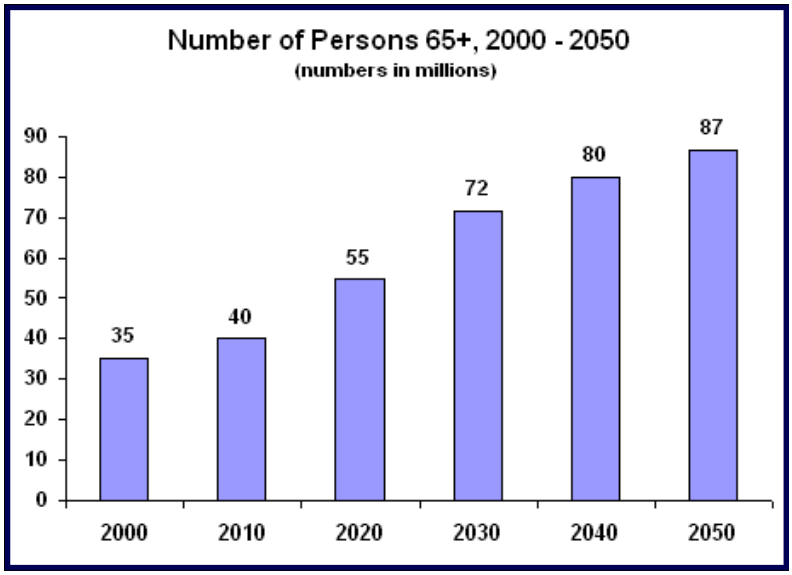
This updated Plan outlines the strategy AoA will use to implement the new provisions in the Older Americans Act. The Plan includes four program goals and one management goal. Each program goal encompasses strategic objectives that focus on AoA's key policy and program activities on behalf of older adults, their family caregivers, and the general public. These activities will be carried out both with and through the Aging Services Network and in conjunction with Federal agencies and other public/private partnerships. The management goal includes objectives designed to support the business activities necessary to effectively and efficiently carry out the agency's statutory activities, including the oversight of OAA grants.

An Annual Implementation Plan will be developed each year through an agency-wide process to identify the specific outcomes that will be achieved in that year to advance the goals and objectives identified in this plan. These annual planning cycles will take into account changes in the policy and budget environment, as well as emerging

trends and issues, and will be used to update the Strategic Action Plan, as necessary. To help measure the progress of the five-year goals and strategic objectives, a set of long range Government Performance and Results Act Goals have been established as part of this Strategic Action Plan and are included in Appendix A.

Our Priorities

The OAA has played an important role in shaping our nation's health and long-term care system to help older adults to learn about and access opportunities for maintaining their health and well-being in the community. The aging of America, however, is creating new challenges and opportunities for our nation's system of care for older adults. The number of older people is increasing rapidly, and those reaching age 65 are living longer than ever before. In just four years, the leading edge of the largest generation in American history, the baby boomers, born between 1946 and 1964, will start to turn 65. By 2030, the population age 65 and over will almost double, as will the 85 plus population – the group most in need of long-term support. By 2050, there will be over 20 million people age 85 and over living in the United States, compared to four million today. These demographic shifts have profound implications for the nation's system of long-term care. Our nation is facing a growing need for long-term care at a time when our system of care is: biased towards costly institutional care; fragmented, inefficient, and confusing to consumers; and, financially burdensome for individuals, families, and society.



To help our nation respond to these challenges, AoA will continue to work with its partners at the federal, state and community level to help strengthen the nation's capacity to promote the dignity and independence of older people. AoA will do this by collaborating on efforts that aim to transform our nation's system of health and long-term care to be more responsive to the needs and preferences of older people and their family caregivers; providing more support for community living; promoting consumer choice, control, and independence; encouraging people to take positive steps to maintain their health; and assisting people while they are still healthy and able to plan ahead for their care. In support of these priorities, AoA's five-year goals and objectives are structured around efforts that ensure the Aging Services Network will continue to play a leadership role in shaping the nation's systems of care on behalf of older people, their families, and other consumers. These goals are:

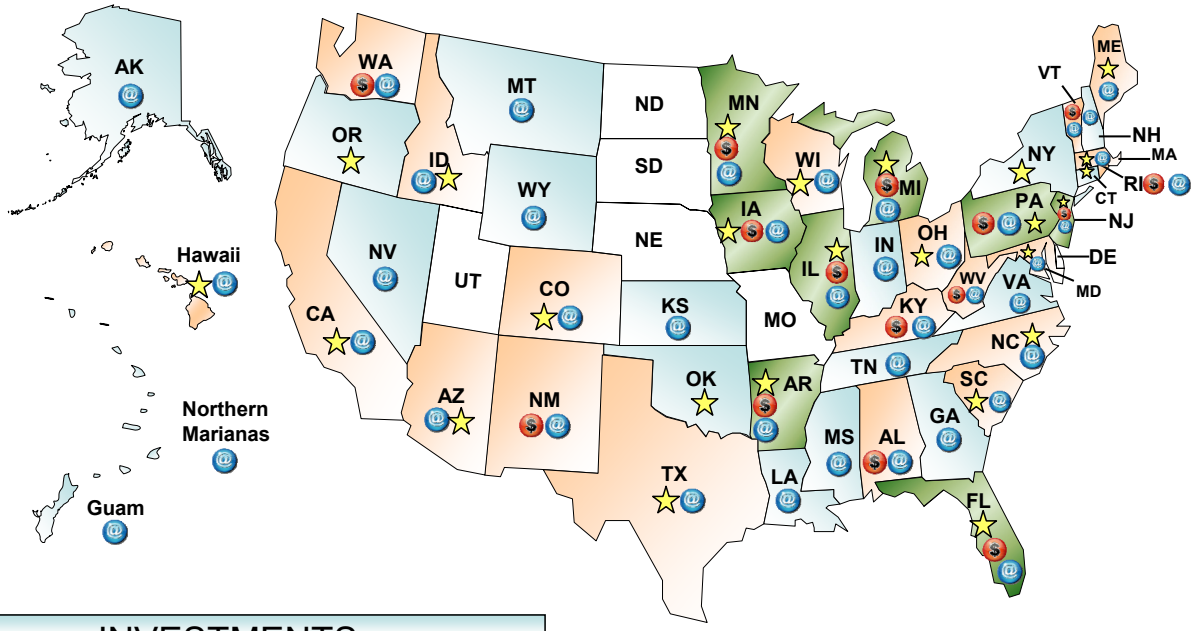
1. Empower older people, their families, and other consumers to make informed decisions about, and to be able to easily access, existing health and long-term care options.
2. Enable seniors to remain in their own homes with high quality of life for as long as possible through the provision of home and community-based services, including supports for family caregivers.
3. Empower older people to stay active and healthy through Older Americans Act services and the new prevention benefits under Medicare.
4. Ensure the rights of older people and prevent their abuse, neglect and exploitation.
5. Maintain effective and responsive management.

Our Overall Approach

AoA's overall approach for achieving its goals and objectives is to support initiatives – in partnership with other Federal agencies and national organizations - that strengthen the capacity of the Aging Services Network at the state and local level to advance systemic changes in the nation's system of care in a manner that will make our system of long-term care more consumer-directed and supportive of community-living. As we did under the 2003-2008 Plan, we will continue to focus on initiatives that build on the latest research and best practices from the field and capitalize on the unique assets and core programs inherent in the OAA. These assets include a statutory mission focused explicitly on keeping older people out of institutional care settings; a successful history of providing low-cost, non-medical supports; and, a nationwide infrastructure that has the capacity to reach people before they become frail, enter a nursing home, or spend down to Medicaid. We believe these assets can add significant value to our nation's evolving health and long-term care system, and complement the changes occurring in Medicare and Medicaid.

Modernizing Older Americans Act Programs

April 2007



INVESTMENTS

- Aging & Disability Resource Center Programs
- Cash & Counseling Demonstration Programs
- Evidence-Based Disease Prevention Programs

State Involvement in all 3 Programs; 2 Programs; 1 Program

STRATEGIC GOALS & OBJECTIVES

Goal 1

Empower older people, their families, and other consumers to make informed decisions about, and be able to easily access, existing health and long-term care options

The nation's health and long-term care system is fragmented and confusing. When older people or their family members seek information or long-term care services, they often face a complex maze of public and private options administered by a wide variety of agencies and providers operating under different and sometimes conflicting, rules, regulations and administrative procedures. Compounding this situation, people are often confronted with the need for long-term care amidst a crisis, such as an unexpected hospital admission (65 percent of nursing home admissions are directly from hospitals) or the collapse of a fragile unpaid caregiver support network. The current system also fails to inform people about the importance of planning ahead for their long-term living. Americans generally are not aware of their potential risk of needing long-term support, nor fully aware of their potential financial exposure for such support. Many Americans believe that Medicare pays for long-term support, even though this is not the case, except for short periods of time in post-acute care situations. Additionally, under the Medicare Modernization Act, beneficiaries are being given many more choices and options. AoA will continue to implement and support programs that empower individuals, both those who are in immediate need and those who have the ability to plan ahead, to easily access information, make informed decisions, and take more ownership of their health and long-term care options.

Strategic Objective 1.1

Provide streamlined access to health and long-term care through Aging and Disability Resource Center programs

AoA, in collaboration with the Centers for Medicare and Medicare Services (CMS), has worked with public and private partners to promote the creation of "one-stop-shop" *Aging and Disability Resource Centers* in every community. These Resource Centers serve as highly visible and trusted places where people with disabilities of all ages and incomes can turn for information on the full range of long-term support options and streamlined access to public long-term care programs and benefits. In addition, Resource Centers collaborate with public and private partners to empower individuals to plan for their future long-term care needs. From 2003-2006, 104 Aging and Disability Resource Centers were created in 43 states. The *Older Americans Act Amendments of 2006* directs the Assistant Secretary on Aging to work with the CMS Administrator to implement Aging and Disability Resource Centers in all states. The Amendments also stipulate that ADRCs should help Medicare beneficiaries to understand and access the new benefits available under the

Aging and Disability Resource Center Consumer Feedback

"In this day in age, it is a wonderful resource to have all information in one central place. It certainly made my quest easier."

"I got information I would not have otherwise known about."

— Program Interim Report (Nov. 2006)

Medicare Modernization Act. In addition, AoA is strategically examining its role in information and assistance provision, including the AoA *Eldercare Locator*, the *National Aging Information and Referral Support Center* and its grant to the *Alzheimer's Call Center*, to better align these resources with the Aging and Disability Resource Centers.

Strategic Objective 1.2
Empower individuals, including middle-aged individuals, to plan for future long-term care needs

AoA has been a sponsor, in partnership with the HHS Assistant Secretary for Planning and Evaluation (ASPE), CMS, and the National Governors Association, of the *Own Your Future Long-Term Care Awareness Campaign* that seeks to increase consumer awareness about planning for long-term care through Federal-state partnerships that include letters mailed directly to consumers and mass media campaigns. Between 2005 and 2006, nine states participated with letters describing the Campaign going out to more than 3.5 million people – providing them with information and the opportunity to order a Long-Term Care Planning Kit. In 2007 the campaign will target more than seven million people in at least five additional states. As part of this initiative, AoA worked with its partners to develop the new *National Clearinghouse for Long-Term Care Information* that was mandated by the Deficit Reduction Act of 2005 as part of the Own Your Future Campaign. The Clearinghouse website was launched in December 2006 and is the first federal website designed specifically to provide consumers with objective information and resources to assist them in planning ahead for their long-term care. The *Older Americans Act Amendments of 2006* call on the Assistant Secretary on Aging to promote enhanced awareness by the public of the importance of planning in advance for long-term care and the availability of information and resources to assist in such planning. AoA will work to expand the Clearinghouse and state awareness campaigns over the next five years to continue to increase the number of consumers with access to accurate and unbiased information about planning for long-term care and to reduce our nation's dependence on publicly funded long-term care options.

The National Clearinghouse for Long-Term Care Information is the first federal website designed specifically to provide consumers with objective information and resources to assist them in planning ahead for their long-term care.

www.longtermcare.gov

Goal 2

Enable seniors to remain in their own homes with high quality of life for as long as possible through the provision of home and community-based services, including supports for family caregivers

Our nation is facing an increasing demand for long-term support at a time when our system is biased toward costly nursing home care, even though most people prefer to receive their support at home. Over 75 percent of all Medicaid expenditures on long-term support for the elderly are currently spent on nursing home care. Most older people entering nursing homes are private pay individuals, and those who end up on Medicaid, usually do so as a result of spending down their income and assets. While nursing home care is a critically important component of our support system, experts and consumers agree we need to provide more opportunities for less costly home and community-based services. AoA and the Aging Services Network have successfully supported older adults in the community through OAA home and community-based services that help prevent unnecessary placement in nursing homes. AoA will continue to build on and leverage the OAA's unique mission and role by further embedding the principles and strategies of the new provisions of the OAA into our nation's system of long-term care to help individuals who are at high risk of losing their independence to avoid unnecessary placement in nursing homes. In this manner, AoA will help older adults improve the quality of their lives, conserve and extend the use of their own resources, and potentially reduce the fiscal pressures on Medicaid.

Through the combined efforts of the state and area agencies on aging, tribal organizations, over 29,000 community-based aging services provider organizations, and thousands of dedicated volunteers and advocates, OAA services reach into every community in this nation and provide a full array of services and supports to over 8 million seniors and 1 million family caregivers each year. These efforts strengthen individuals and their families and prevent the unnecessary placement of older adults in nursing homes.

Strategic Objective 2.1

Enable seniors to remain in their homes and communities through flexible service models and consumer-directed approaches

One way to ensure that our public programs can respond effectively to the unique needs and circumstances facing high-risk individuals and their family caregivers is through the use of consumer-directed approaches, such as *Cash and Counseling*. The Cash and Counseling model empowers individuals to determine the types of care they receive and the manner in which it is provided. This consumer-directed model was first tested in Medicaid programs in Arkansas, Florida and New Jersey in the mid-1990's under an initiative sponsored by the Robert Wood Johnson Foundation (RWJF) in partnership with ASPE. In 2003, based on the success of the initial state demonstrations, AoA partnered with RWJF, ASPE and CMS in a new grant program to begin the national replication of Cash and Counseling in 12 states. In 2005, the Administration and Congress embedded the Cash and Counseling model in Medicaid as part of the Deficit Reduction Act. More recently, Congress embedded the principles of consumer-direction in the *Older Americans Act Ammendments of 2006*, which encourage the Aging Services Network to employ consumer-directed models of care. AoA plans to advance and support the use of consumer-directed service models through a variety of activities, including the development of national standards, new grant programs, and the provision of technical assistance, that will assist the Network to implement nursing home diversion programs that target individuals at high-risk of institutionalization and spend down to Medicaid, and offer the Cash and Counseling model of care.

Strategic Objective 2.2

Continue to use Older Americans Act programs and services to advance long-term care systems change

This is a crucial time in long-term care systems change. In order to move toward a system of long-term care that is more consumer-driven and more responsive to the needs and preferences of older adults and their caregivers, AoA and the Aging Services Network must use OAA program resources strategically to advance and build on changes in the larger system of care at the Federal, state, and community level. To remain competitive in the changing health and long-term care environment, the Network at all levels needs to be deploying state-of-the-art practices in the provision of home and community-based services. This includes facilitating consumer choice, using evidence-based strategies, and adopting performance-based business approaches that will improve program outcomes. To support the Network's role in advancing systems changes at the state and community level, AoA will continue to work on and strengthen a variety of existing and new initiatives. Some examples include: an inventory of current state practices and characteristics related to long-term care systems change; a national model for State and Area Agencies on Aging to incorporate AoA strategic objectives in their plans; guidance on the new provisions in the OAA which strengthen the Network's role in advancing systems change in long-term care at the state and community level; business model guidance for state offices on aging related to private pay relationships; and increased coordinated access to, and information that promotes, the full range of OAA nutrition services. These and similar activities will better ensure, that as long-term care systems change occurs, the home and community-based services provided through OAA programs will continue to help consumers remain in their own homes and communities for as long as possible.

Strategic Objective 2.3

Continue to improve the planning and assessment efforts of the National Aging Service Network

AoA is at the forefront of planning for the rapid growth of the nation's aging population. AoA is employing strategic national approaches as well as ensuring the preparation and commitment of local communities to address the needs of our older population and the aging "baby boom" generation. The needs of these diverse groups will require the Aging Services Network to develop new business models and system approaches to meet these new challenges. AoA is working with the National Association of Area Agencies on Aging (n4a) and the National Association of State Units on Aging (NASUA) to effectively plan for the Aging Services Network to be the access point for the coordination of all long term care services; assess current readiness and anticipate opportunities for innovative approaches; strategically plan for the future; and monitor progress toward objectives. As part of these planning efforts, Area Agencies on Aging and Native American Tribal Organizations will assess their readiness to implement the new provisions in the OAA related to systems changes in long-term care and develop technical assistance tools to integrate these new provisions of the OAA into their program operations. State Units on Aging will create state specific and national planning models to empower older adults and family caregivers to access systems that provide real and timely options for home and community-based long term care.

OAA Nutrition Programs

- ***The cost of a one-year supply of congregate or home-delivered meals for an individual equals about the cost of one day in the hospital.***
- ***Over 90 percent of home-delivered meal and 75 percent of congregate meal participants report they can continue to live in their own home as a result of these programs.***

Goal 3

Empower older people to stay active and healthy through Older Americans Act services and the new prevention benefits under Medicare

Most long-term support needs emerge from chronic diseases and other conditions – such as arthritis, diabetes, heart or lung disease, stroke and dementia – as well as from injuries suffered as a result of a fall or other accident.

Today at least 80 percent of adults 65 and over have one or more chronic conditions. These chronic conditions lead to serious illnesses and disabilities which dramatically raise health care costs. Overall, care for people with chronic conditions consumes about 78 percent of U.S. healthcare spending, including 95 percent of Medicare spending and 77 percent of Medicaid spending. Additionally, falls are the leading cause of injury-related deaths and hospital admissions among the elderly and account for between $20 and $30 billion health care dollars in the U.S. each year. While we now know these conditions and their effects can be mitigated – even for people who are very old – through life-style changes and disease management programs, our formal system of long-term support still emphasizes acute medical care over prevention. Therefore, AoA will continue to advance initiatives that utilize evidence-based prevention programs at the community level and to work with CMS to promote the use of the new preventive benefits available under the Medicare.

Strategic Objective 3.1

Increase the use of Evidence-Based Disease and Disability Prevention Programs for older people at the community level

AoA will continue to work with its national partners, including the Agency for Healthcare Research and Quality (AHRQ), the Centers for Disease Control and Prevention (CDC), CMS, the National Institute on Aging (NIA), and a number of private foundations, including the John A. Hartford Foundation and the Atlantic Philanthropies to deploy evidence-based prevention programs through our network of aging services providers at the community level. These interventions involve simple tools and techniques seniors can use to better manage their chronic conditions, reduce their risk of falling, and improve their nutrition and their physical and mental health. Between 2003 and 2005, AoA and its partners supported evidence-based disease and disability prevention programs in 12 communities. In 2006, this grants program was expanded to over 50 communities in 20 states. As part of this effort, AHRQ and AoA, in collaboration with CDC, CMS, and NIA, will continue to develop and test a special Knowledge Transfer program targeted at state and local agency staff to promote and facilitate the utilization of evidence-based disease prevention programs for older adults at the community level. The *Older Americans Act Amendments of 2006* charge the Assistant Secretary on Aging to promote the implementation of evidence-based programs on behalf of

> ***The Older Americans Act Amendments of 2006 charge the Assistant Secretary on Aging to promote the implementation of evidence-based programs on behalf of older individuals and their family caregivers.***

older individuals and their family caregivers and to establish national standards for such programs. AoA will continue to advance and support evidence-based programs over the next five years. Our long-range vision is to eventually see evidence-based programs readily available to older adults in every community across the country.

Strategic Objective 3.2
Promote the use of the prevention benefits available under Medicare

AoA and the Aging Services Network were natural and essential partners with CMS in the initial implementation of the prescription drug coverage available under the Medicare Modernization and Improvement Act (MMA) of 2003 and will continue to provide critical support toward that end. Next steps include helping beneficiaries understand and effectively utilize all of their Medicare benefits, including the new prevention benefits available under the MMA. This includes helping consumers take advantage of the new tools CMS has developed to help beneficiaries better manage their health and their health care costs through *MyMedicare.gov* (www.mymedicare.gov). The "*My Health. My Medicare.*" campaign will increase beneficiaries' awareness and utilization of preventive benefits including flu and pneumococcal shots, cardiovascular screenings, diabetes screenings, smoking cessation counseling and the *Welcome to Medicare* physical examination. AoA is positioned to continue to help leverage the resources within the Aging Services Network with CMS prevention resources to develop true collaborative partnerships to directly engage beneficiaries to maximize personalized assistance and healthy living.

The Aging Services Network took the lead in convening or supporting nearly 85 percent of the 49,000 events that were held at the community level as part of the CMS-led Medicare Prescription Drug Enrollment Campaign between January 1, 2006 and May 15, 2006. AoA and CMS also jointly funded 340 community-based outreach projects targeted specifically at limited English speaking, minority and disabled beneficiaries.

Goal 4
Ensure the rights of older people and prevent their abuse, neglect and exploitation

One of the challenges in reforming the nation's systems of health and long-term care is to ensure that all older Americans, whether they reside at home or in an institutional setting, are protected against the threat of elder mistreatment. According to researchers, between 500,000 and 3.5 million seniors are abused, neglected, or exploited each year in domestic settings. Studies also suggest that only one out of five cases of abuse are reported to the authorities. AoA's elder rights programs strive to protect seniors from known abuses to which they are vulnerable, while providing support to enhance older individuals' right to make choices about their future, to live independently, and to participate fully in community life. Program activities conserve and extend personal resources, help avoid threats to financial security, and empower older Americans to make informed decisions about planning for long-term care needs. AoA's elder rights programs aim to ensure the dignity and independence of older citizens, and to support their overwhelming desire to live in their own homes and communities for as long as possible. In addition, the *Older Americans Act Amendments of 2006* provide AoA further opportunities for federal leadership in strengthening elder justice strategic planning and direction for programs, activities, and research related to elder abuse awareness and prevention.

Strategic Objective 4.1
Facilitate the integration of Older Americans Act elder rights programs into Aging Services Network systems change efforts

While conditions for older Americans have improved markedly since the initial passage of the OAA, the independence of many elderly is still limited by abusive situations ranging from financial exploitation to severe neglect. For others, independence is threatened by limited financial resources, disability, and lack of information on rights and benefits. OAA Vulnerable Elder Rights Programs protect and enhance the basic rights and benefits of vulnerable older people, and empower them to make informed choices that enhance their ability to remain in the community. Partnerships have been a key strategy for advancing AoA priorities of protecting the rights of vulnerable elders, both at home and in institutional settings. Development of models for integration of elder rights programs into Aging and Disability Resource Center efforts will help ensure that those elders encountering legal issues, potential abuse or exploitation are identified and referred to appropriate sources of information and assistance. Integration will also help to ensure that seniors experiencing difficulties or barriers to exercising their rights, obtaining entitled benefits, or facing potential Medicare, Medicaid or other healthcare fraud and abuse will be identified and referred to elder rights and consumer protection programs. Integration of long-term care ombudsmen into long-term systems change efforts offers seniors and their families an experienced source of information on alternatives to or transition from long-term care facilities to community-based care.

> ***"I'm really glad to know that you're available for this kind of help. Seems like people start trying to take advantage of you as you get older. Sometimes I just need legal advice or a little help. Thank you for being there for me."***
>
> **— OAA Legal Services Program Consumer**

Strategic Objective 4.2

Improve the identification and utilization of measurable consumer outcomes for elder rights programs

While the value of elder rights programs is inherent in their mission and purpose - to protect and enhance the basic rights and benefits of vulnerable older people - it is crucial that the results of elder rights program activities be documented and measured. It is particularly important that AoA identify, document and report the impact that elder rights programs have on the ability of older individuals to remain independent in their communities. Strategic planning efforts to clarify goals, objectives, strategies and measurable outcomes for elder rights programs, including legal assistance services, elder abuse programs, consumer fraud protection, long-term care ombudsmen programs and their resource centers, ensure that program priorities and activities align with strategic objectives and that appropriate outcome measures are in place to assess whether programs are achieving these objectives. Continued improvement in current data collection systems, such as the Long-Term Care Ombudsman's *National Ombudsmen Reporting System*, and development of new systems for collecting consistent program data, such as the SMP (formerly Senior Medicare Patrol) *SMART FACTS* system, enhances effective documentation of program performance outcomes.

Strategic Objective 4.3

Foster quality implementation of new Older Americans Act provisions supporting elder rights

The reauthorization of the OAA confirmed and enhanced our nation's commitment to protect vulnerable older people from abuse, neglect and exploitation, and to ensure needed information and assistance is available to protect their basic rights and benefits. Partnerships are a key strategy for advancing AoA's priorities of protecting the rights of vulnerable elders, both at home and in institutional settings. Quality implementation of both new and existing OAA provisions supporting elder rights can only be achieved through enhancing the awareness of partners, both internal and external to the Aging Services Network, of the mission, objectives and activities of AoA elder rights and consumer protection programs. Proactive and creative approaches for outreach to and partnering with other Federal agencies such as the Department of Veterans Affairs, CMS, and the Federal Trade Commission will enhance AoA's efforts to implement elder rights initiatives. Interface with national aging organizations and networks central to the protection or enhancement of elders' finances, health and security will also foster buy-in on a larger scale for new elder rights program priorities and activities.

Goal 5
Maintain effective and responsive management

The past few decades have marked revolutionary changes in the way organizations are managed. Advancements in technology, increased transparency, and the diversity that has come with globalization have changed the way business was done for decades prior. Whether the next few decades of the 21st Century will see even faster paced organizational development is unclear – but that new challenges, new learning needs, and new stresses will arise is certain. A critical factor in ensuring AoA's continual achievement of its mission and goals now and in the future is its ability to effectively formulate, implement, execute and manage the administrative support of its programmatic efforts. AoA continuously reviews and refines management practices to ensure that the agency has effective and efficient administrative support to carry-out its critical activities on behalf of the American people. The following objectives outline the management means and strategies that AoA will employ to continue to facilitate program success.

Strategic Objective 5.1
Promote state-of-the-art management practices, including the use of performance-based standards and outcomes, within AoA and the National Aging Services Network

Effective management is a necessary precondition of AoA's success in carrying out its principal mission of developing comprehensive, coordinated and cost-effective systems of long-term care that help elderly individuals maintain their independence and dignity in their homes and communities. While not as visible to our customers, the day to day activities involved in planning, administering, and managing our resources underlie all of our programmatic accomplishments. Internally, AoA is taking a number of steps to consolidate management functions, streamline administrative operations, reduce duplication, increase efficiency, and achieve cost savings. This includes participation in a variety of "one-HHS" initiatives to improve the efficiency of administrative operations across the Department through consolidation and centralization of common administrative and support functions. Externally, AoA strives to assist the Aging Services Network to both improve the quality of data that can be used to inform management decision making and to harness the power of technology to increase the efficiency of our shared business operations. A key element of these efforts is the use of electronic tools to communicate with our external partners and announce grant opportunities, and to allow grant applicants to find and apply for those opportunities online.

Strategic Objective 5.2
Implement the President's Management Agenda

The President's Management Agenda (PMA) provides a framework for the Administration's efforts to improve government management practices. The PMA includes six broad initiatives designed to produce better program results and add significant value for the taxpayers. AoA has made the achievement of the PMA an integral part of its strategic planning process and has undertaken a variety of activities in support of the six objectives. AoA's initiatives to *Strategically Manage Human Capital* focus on using recruitment, training, retention and development strategies to realign the agency' staffing resources in order to provide national leadership for efforts to give consumers more control over their health and long-term care. Complimenting these initiatives, AoA utilizes *Competitive Sourcing* tools to examine if commercial-type activities could be more efficiently obtained from the private sector so that Federal positions can focus on mission-critical activities. Efforts to *Improve Financial*

Performance provide assurance that AoA is serving as a good steward of taxpayers' money while providing agency managers with timely and accurate financial information to inform management decisions and control costs. These efforts work together with initiatives to *Improve Budget and Performance Integration* to ensure that performance is routinely considered in funding and management decisions, programs achieve expected results, and work toward continual improvement. Activities to *Expand Electronic Government* ensure that technology investments increase citizen access to relevant and timely information as well enhance the efficiency of AoA's internal business processes. AoA's *Real Property Asset Management* program ensures that the agency's real property is used efficiently to support agency's mission and that all assets and property are managed professionally.

Strategic Objective 5.3

Support the Department of Health and Human Services and the National Aging Services Network in administering emergency preparedness and response for older people

Each year natural disasters and major emergencies impact the United States and its territories and place tremendous strain on local capacity to respond. AoA has the responsibility to help the Aging Services Network and others prepare and plan for the management of major emergencies or disaster events, including pandemic flu preparedness and response. AoA also has the responsibility to respond to the special needs of older disaster victims. When the President declares a disaster area eligible for assistance, the Federal Emergency Management Agency (FEMA) coordinates the federal response. AoA works closely with the HHS Office of the Assistant Secretary for Preparedness and Response, in collaboration with other Departmental human services agencies, to obtain critical information about and target the immediate needs of affected older adults and their caregivers. AoA also has authority through the OAA to award a limited amount of funding to State Units on Aging and Native American Tribal Organizations of affected areas. These funds are to reimburse these entities for additional expenses incurred for gap-filling and supportive services and generally augment funding from other sources. Based on past experience, the most pressing needs are information, establishing a communication link, outreach, and services to assist older adults and their caregivers. AoA primarily targets these immediate needs through collaboration with and support of State and Area Agencies on Aging and aging services providers. For example, following Hurricane Katrina, AoA staff members spent time in the disaster arena to help state and local aging entities locate and assist older individuals and their caregivers and assure their safety and well-being. Given the complete devastation of Coastal areas following Katrina, AoA also collaborated with Grantmakers-in-Aging in generating nearly $5 million dollars in public and private sector funding for relief efforts to rebuild aging services in the affected areas. Lastly, continued collaboration with the Administration on Developmental Disabilities and other HHS partners is helping to ensure that the aging and disability networks cooperate in emergency preparedness and management to ensure coordinated assistance to the most vulnerable populations.

APPENDIX A: Relationship between Strategic Goals and GPRA Long-Range Goals

(Note: All goal targets are for 2012 unless otherwise indicated)

Goal 1

Empower older people, their families, and other consumers to make informed decisions about, and be able to easily access, existing health and long-term care options

GRPA Goals:

1.1 Improve efficiency of OAA programs by 35%.

1.2 Funding leveraged by OAA grantees will increase to $2.5 billion.

1.3 Reduce the percent of caregivers who report difficulty in getting services to 35%.

1.4 Increase the percent of caregivers who report services help them care longer for older individuals to 75%.

1.5 Increase the annual number of caregivers served to one million.

1.6 Increase the percentage of transportation clients living alone to 75%.

Goal 2

Enable seniors to remain in their own homes with high quality of life for as long as possible through the provision of home and community-based services, including supports for family caregivers

GPRA Goals:

2.1 Demonstrate continued high quality of service by maintaining the percent of home and community-based service recipients rating services good to excellent at 90%.

2.2 By 2017, reduce disparities in consumer-reported service quality between vulnerable and non-vulnerable populations by 50%.

2.3 Demonstrate the value of OAA services to the American taxpayer by estimating cost savings/cost avoidance attributed to OAA services.

2.4 Increase the number of elderly persons with severe disabilities (3+ ADL limitations) who receive selected home and community-based services to 500,000.

2.5 All states will achieve a targeting index > 1 for low-income, minority and rural clients.

2.6 Expand the number of tribal organizations that provide an array of services beyond nutrition, transportation and access by 25% over the 2007 baseline.

Goal 3

Empower older people to stay active and healthy through Older Americans Act Services and the new prevention benefits under Medicare

GPRA Goals:

3.1 Increase the number of AoA-supported community-based sites that use evidence-based disease and disability prevention programs to 136.

3.2 Demonstrate that home-delivered meal and congregate meal recipients have better dietary intake than the general 60+ population.

Goal 4

Ensure the rights of older people and prevent their abuse, neglect and exploitation

GPRA Goals:

4.1 Improve the Ombudsman complaint resolution rates in 35 states.

4.2 The ratio of consultation to complaints handled through the Ombudsman Program will increase by 25% over the 2003 baseline.

Goal 5

Maintain effective and responsive management

GPRA Goals:

5.1 Demonstrate processes are in place for strategic recruitment, training and retention by ensuring that the annual average hiring timeline is no grater than 45 days.

5.2 Receive 100% of grant applications via Grants.gov (www.grants.gov).

APPENDIX B: Relationship between Strategic Goals and HHS Strategic Plan Goals

		AoA Strategic Action Plan FY2007-2012 Program Goals			
		Goal 1: Empower older people and their families to make informed decisions about, and be able to easily access, existing home and community-based options.	Goal 2: Enable seniors to remain in their own homes with high quality of life for as long as possible through the provision of home and community-based services, including supports for family caregivers.	Goal 3: Empower older people to stay active and healthy through Older Americans Act services and the new prevention benefits under Medicare.	Goal 4: Ensure the rights of older people and prevent their abuse, neglect and exploitation.
HHS Strategic Plan FY2007-2012 Goals & Objectives	Objective 1.1: Broaden health insurance and long-term care coverage.	X	X		
	Objective 1.2: Increase health care service availability and accessibility.	X	X		
	Objective 1.3: Improve health care quality, safety, cost, and value.	X	X	X	X
	Objective 1.4: Recruit, develop, and retain a competent health care workforce.		X		X
	Objective 2.1: Prevent the spread of infectious diseases.			X	
	Objective 2.2: Protect the public against injuries and environmental threats.			X	
	Objective 2.3: Promote and encourage preventive health care, including mental health, lifelong health behaviors and recovery.	X		X	X
	Objective 2.4: Prepare for and respond to natural and man-made disasters.	X			
	Objective 3.1: Promote the economic independence and social well-being of individuals and families across the lifespan.	X	X	X	X
	Objective 3.3: Encourage the development of strong, healthy and supportive communities.	X	X	X	X
	Objective 3.4: Address the needs, strengths and abilities of vulnerable populations.	X	X	X	X
	Objective 4.4: Communicate and transfer research results into clinical, public health, and human service practice.	X	X	X	X

Key: HHS Strategic Plan FY2007-2012 Goals			
	Goal 1: Health Care		Goal 3: Human Services
	Goal 2: Public Health Promotion and Protection, Disease Prevention, and Emergency Preparedness		Goal 4: Scientific Research and Development

* HHS goals and objectives reflect those in the *HHS DRAFT Strategic Plan, Fiscal Years 2007-2012*, released for public comment on May 17, 2007.