Area Agencies on Aging: Advancing Access for Home and Community-Based Services

2008 Area Agencies on Aging Survey

June 2009
ACKNOWLEDGMENTS

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Copies of the report along with other project materials can be found at:
http://www.n4a.org/programs/annual-survey/

Suggested Citation

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OVERVIEW

Since the passing of the Older Americans Act in 1965, the number of older adults 65+ has doubled, and is expected to double again by 2030 at which time one in every five Americans is expected to be 65 or older. The rapid rise in the aging population is presenting opportunities and challenges to the nation’s Aging Services Network; requiring it to enhance its operations in order to meet the growing needs of an unprecedented number of older adults and their caregivers for health and community-based long-term services and supports. To respond to these opportunities and challenges, the Aging Services Network is expanding its services and supports to address the needs of today’s and tomorrow’s older adults, leveraging additional dollars from multiple funding streams, cultivating new partnerships and connections in the community, and embracing and implementing new management plans and systems to address the needs of a larger and more diverse aging population and their caregivers.

With a grant from the U.S. Administration on Aging (AoA), the National Association of Area Agencies on Aging (n4a) partnered with Scripps Gerontology Center to conduct the 2008 survey of the nation’s 629 Area Agencies on Aging (AAAs) — the agencies that plan and coordinate the frontline services in the Aging Services Network— to assess their capacity and readiness to address the needs of America’s rapidly increasing aging population. The survey was launched in August 2008 and disseminated to all AAAs. AAA data collection concluded in January of 2009 with over 80% of AAAs responding to the survey.

This brief report provides key findings from the survey as they relate to the following topics: The Pivotal Position of AAAs to Serve Older Americans, The Expanding Role of AAAs in Long-Term Services and Supports, AAAs Efforts to Advance Business Planning and Outreach, and AAA Organizational Infrastructure.

BACKGROUND

Area Agencies on Aging (AAAs) were established under the Older Americans Act (OAA) in 1973 to respond to the needs of Americans 60 and over in every local community. By providing a range of options that allow older adults to choose the home and community-based services and living arrangements that suit them best, AAAs make it possible for older adults to live with independence and dignity in their homes and communities as long as possible.

Over time, the Older Americans Act has been expanded to broaden the scope of core services that AAAs are responsible for implementing. The 2006 amendments to the OAA expanded the reach of the Act to promote a broader role in enhancing consumer-centered systems of long-term care that focus on empowering individuals to make informed decisions about their care through the development of Aging and Disability Resource Centers, enabling older adults to live healthier lives through the implementation of evidence-based disease and disability prevention programs, and assisting high-risk older adults to delay premature nursing home placement through consumer-directed services.

Given the rapid rise in the nation’s aging population, it is critical that the Aging Services Network has the capacity to play a pivotal role in providing health and long-term services and supports to ensure that older Americans can age successfully at home and in the community for as long as possible. The 2008 AAA survey was designed to do just that.
THE PIVOTAL POSITION OF AAAs TO SERVE OLDER AMERICANS

Variability and Flexibility in Roles and Responsibilities

Area Agencies on Aging serve older adults in every community in the nation. To that end, they play a variety of vital roles in meeting the needs of older Americans in their local communities. In response to an open-ended question about the roles of their agencies in addressing the needs of older adults, AAA directors noted that their agencies had the following roles and responsibilities:

- Advocacy
- Planning and coordinating services
- Information and assistance
- Leadership
- Partnership and collaboration
- Focal point for services
- Assessing and meeting the needs of older adults

The unique mix of these roles for any one AAA reflects a complex set of historical, current, state, and local circumstances. This variability means that the Aging Services Network generally, and AAAs specifically, are flexible and responsive to shifting contexts and the evolving needs of older people in their communities. But, underlying all the roles is their fundamental mission to help older individuals maintain maximum independence in their homes and communities and to promote a continuum of care for the vulnerable elderly.

Providing Essential Long-Term Services and Supports

Area Agencies on Aging plan and coordinate a broad range of aging supports and services. In most instances, AAAs contract with local providers for the direct delivery of critical services and supports that help older adults remain in the community.

- Core AAA services include information and referral assistance, legal assistance, transportation, meal services (both congregate and home-delivered), as well as family caregiver support services.
- The majority of AAAs also provide a number of other services that enhance older adults’ ability to age in place including case management (83.7%), homemaker services (84.7%), and personal care (77.1%).
- About two-thirds of all AAAs offer support for long-term care planning, including providing information about long-term care options (65.9%), and helping older adults take responsibility for their own long-term care futures (69.3%).

THE EXPANDING ROLE OF AAAs IN LONG-TERM SERVICES AND SUPPORTS

In addition to the core services that AAAs have provided for a number of years, since the passage of the 2006 amendments to the OAA, AAAs have also enhanced and expanded their operations to provide a broad array of services and supports that promote seamless access to information, evidence-based health promotion and disease prevention, nursing-home diversion and consumer-directed care. The following sections highlight survey findings related to these areas.
Serving as Points of Entry for Long-Term Services and Supports

Area Agencies on Aging have developed streamlined systems that allow consumers to have easy access to and make informed decisions about health and long-term care options.

- More than two-thirds of AAAs (68.7%) are involved in providing a seamless intake, assessment, and eligibility determination process for their consumers.
- More than three-quarters (76.8%) are involved in positioning their organization as a point of entry for long-term care in their area.

Point of entry models include:

- Being part of a network of partners that all serve as consumer access points (e.g. No wrong door)
- Operating as a single point of entry, but coordinating with off-site partners for some eligibility determination and access-related functions
- Designation as an Aging and Disability Resource Center (ADRC)
- Operating as a single point of entry and providing all eligibility determination and access-related functions onsite
- An Aging Resource Center (ARC)

Since 2007, AAAs have increased their involvement in serving as the single point of entry for different target populations. As shown in Figure 1, the vast majority of AAAs (82.4%) are currently operating as the single point of entry for older adults age 60+. As the figure also indicates, from 2007 to 2008 there was a marked increase in the proportion of AAAs that are providing single point of entry access for children, adults 18-59, and private pay clients.

While AAAs are involved in a number of activities to improve consumer access to information and services, there are opportunities available for them to further expand their involvement including the development of new technologies to improve consumer access and cross-agency data systems to share consumer and provider information.

Promoting Healthy Aging through Evidence-Based Programs

Area Agencies on Aging provide critical services that enable older adults to lead active and healthy lives by giving them simple and effective tools they can use to maintain and improve their health and reduce their risk of disease and disability. On average, AAAs provide six health promotion and disease prevention services or programs either directly or through contracts with local providers.

The most common health promotion services include: nutritional counseling and education, medication management and routine health screenings.

- Over half (55.6%) of Area Agencies on Aging are involved in providing evidence-based programs to prevent/manage chronic disease or disability.
- The most common, formally recognized evidence-based health promotion programs used by AAAs are the Chronic Disease Self-Management Program, A Matter of Balance, EnhanceFitness and EnhanceWellness.
• As shown in Figure 2, over half of all AAAs (57.5%) partner with other organizations to expand their evidence-based health and wellness programs.

![Figure 2: Proportion of Agencies Involvement in Various Aspects of Evidence-Based Programming](image)

- Partnering with other organizations to expand evidence-based health and wellness programs: 57.5%
- Evaluating our evidence-based health and wellness programs: 42.7%
- Seeking external funds to support evidence-based health and wellness programming: 35.9%
- Partnering with research organizations to evaluate our evidence-based health programs: 27.8%
- Purchasing a standard evidence-based wellness program package: 35.3%

![Legend:]
- Red: Have made progress or have in place
- Blue: Plan to but have not begun
- Purple: Would like to but cannot
- Green: Do not plan to work on this

**Enhanced Nursing Home Diversion**

Area Agencies on Aging provide a number of key services and supports targeted to assist vulnerable older adults to remain in their homes and communities for as long as possible thus avoiding premature institutionalization as shown in Figure 3. Additionally, AAAs also focus their efforts on assisting those institutionalized older adults, who are able, to return to their homes through the provision of case management and community-based services and supports.

![Figure 3: Enhanced Nursing Home Diversion (Proportion of AAAs who are involved in efforts consistent with nursing home diversion)](image)

- Consumers with greatest impairment get priority for services in at least some programs: 89.5%
- Consumers most at risk for nursing home placement get priority for services: 90.5%
- Currently participate in an AoA NH Diversion Modernization grant: 13.7%
- Organization has a formal nursing home diversion program other than NH Diversion grant: 21.0%
- Facilitate the transition of consumers from institutional placements into the community: 60.5%

**Assembling Individuals Plan for Long-Term Services and Supports**

AAAs provide a number of services that assist clients to understand and plan to address their current and future long-term care needs. On average, AAAs provide five long term care planning services.
• As shown in Figure 4, the most common services are: providing information about long-term care services, conducting educational presentations on long-term care options, and providing information about establishing legal directives.
• Roughly two-thirds of AAAs have made progress or have in place programs and services that assist consumers to plan in advance for long-term care, and that encourage individuals to take responsibility for their long-term care needs.

Providing Consumer-Directed Services and Supports

AAAs are highly involved in a number of activities that give consumers choice and control over the services they receive, as shown in Table 1.
• Nearly half (48.4%) of AAAs provide consumer/self-directed services whereby individuals have choice and control over their services and supports, including the ability to hire, manage and dismiss their workers, and the opportunity to plan and budget for services.
• Among AAAs that offer consumer-directed options, the average number offered is five services. The most common consumer-directed services are personal care, respite care, Family Caregiver Support Program and chore services.
• Most of the AAA consumer-directed programs allow consumers to directly hire workers and to hire relatives. Fewer consumer-directed programs allow the participants to manage their own budgets.
• The majority (51.0%) of agencies who provide consumer-directed services have between one and 50 people enrolled in the program; another 30.0% have between 51 and 250 enrolled.
• Over 40.0% of agencies expect to increase the number of consumer-directed services offered over the next year.

<table>
<thead>
<tr>
<th>Table 1: Consumer-Directed Processes</th>
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<tbody>
<tr>
<td>Have made progress or have in place</td>
</tr>
<tr>
<td>Assessing consumer satisfaction with their services</td>
</tr>
<tr>
<td>Asking consumers about their service preferences</td>
</tr>
<tr>
<td>Assisting consumers in directing their own services</td>
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</tbody>
</table>
As Figure 5 indicates there are further opportunities that AAAs can develop to expand their capacity to determine the ability of consumers to: manage their own services, assist consumers in managing their own workers, and provide vouchers to enable consumers to directly purchase services.

### Leveraging Multiple Funding Sources

In order to meet the health and long-term service and support needs of older adults, AAAs leverage multiple funding sources in addition to Older Americans Act funds.

- Nearly all Area Agencies on Aging (99.0%) secure funds from sources in addition to the Older Americans Act.
- The average AAA utilizes funding from six additional sources in order to provide services to their local community.
- The most common sources of funding come from state general revenue and local funding, as shown in Figure 6.

### Cultivating New Partnerships and Connections in the Community

Area Agencies on Aging participate in a number of community partnerships and collaborations that strengthen the long-term care system for older adults.

- On average, AAAs have 10 informal partnerships and five formal partnerships with other agencies or organizations that serve the older population.

### Figure 6: Proportion of Agencies with Funds from Various Sources (in addition to OAA funding)

<table>
<thead>
<tr>
<th>Source</th>
<th>Percentage</th>
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</thead>
<tbody>
<tr>
<td>State general revenue</td>
<td>71.7%</td>
</tr>
<tr>
<td>Local funding</td>
<td>70.3%</td>
</tr>
<tr>
<td>Medicaid waiver</td>
<td>61.7%</td>
</tr>
<tr>
<td>Other state funding</td>
<td>56.8%</td>
</tr>
<tr>
<td>Grant funds</td>
<td>54.2%</td>
</tr>
<tr>
<td>Consumer co-pay/cost share</td>
<td>53.8%</td>
</tr>
<tr>
<td>Other charitable donations</td>
<td>53.2%</td>
</tr>
<tr>
<td>Fundraising</td>
<td>51.1%</td>
</tr>
<tr>
<td>Transportation funding</td>
<td>35.8%</td>
</tr>
<tr>
<td>Private pay consumers</td>
<td>34.6%</td>
</tr>
<tr>
<td>Medicaid</td>
<td>28.3%</td>
</tr>
<tr>
<td>HUD**</td>
<td>17.7%</td>
</tr>
<tr>
<td>Faith-based Organizations</td>
<td>10.2%</td>
</tr>
<tr>
<td>Medicare</td>
<td>9.0%</td>
</tr>
<tr>
<td>Indian Health Service</td>
<td>7.3%</td>
</tr>
</tbody>
</table>

*SHIIP-Senior Health Insurance Information Program **HUD-Housing and Urban Development
• Some of the most common partnerships are with transportation agencies, adult protective services, advocacy organizations, health care providers, Medicaid and long-term care facilities, as shown in Figure 7.
• Over 80.0% of AAAs have a partnership with emergency preparedness agencies in their communities to assist older adults during emergencies and disasters.

![Figure 7: Proportion of Agencies with Various Partnerships](image)

**AAA Efforts to Advance Business Planning and Outreach**

**Quality Orientation**

Consumer feedback is important to Area Agencies on Aging, which strive to address the needs of all clients. To that end, AAAs collect and utilize a range of information to assess consumer needs and satisfaction as well as to monitor and evaluate the services they provide.

- Nearly all AAAs have formal processes for asking consumers about their experiences and satisfaction with services.
- The majority of AAAs (72.4%) routinely conduct needs assessments as part of their planning and monitoring function.
- About 60% of all Area Agencies on Aging track consumer outcomes (beyond consumer satisfaction), and use consumer outcome data for quality improvement.

**Embracing an Entrepreneurial Spirit**

Area Agencies on Aging are clearly looking for new ways to expand their reach and strengthen their position within the long-term services and supports system.

- The majority of AAAs (87.5%) agreed that they are looking for new opportunities to provide additional aging services in their communities.
- Nearly 92% agree that they are proactively seeking ways to expand their existing services.
- Roughly two-thirds indicate that they do not wait for directives before implementing new services or practices.
- Nearly all AAAs (97.0%) agreed that partnerships with other organizations have strengthened their organizations.
- More than half are expanding the services they offer and the target groups they serve, are seeking and obtaining grants, and are working with five-year strategic plans.
- Almost half are involved in marketing to attract long-term care consumers, fund-raising, and building financial sustainability.

**Business and Strategic Planning**

As Area Agencies on Aging expand their role in the long-term services and supports system, their operations have evolved to incorporate a number of business planning activities and outreach strategies.

- Nearly all AAAs (90%) are directly involved in the home and community-based long-term services and supports system in their areas, and the majority have board support for moving further in this direction.
Challenges and Training and Technical Assistance Needs

As Area Agencies on Aging are expanding programs to meet the needs of growing numbers of older adults, enhancing their role in the provision of long-term care, launching innovative programs, business and strategic operational practices and partnerships, they are undoubtedly faced with challenges. Some of those challenges include:

- Increasing expenses (92.0%)
- Competition for keeping revenue (74.7%)
- Difficulty in taking on new opportunities (66.1%)
- Long-term care role limited by structure or legislation (52.3%)

To respond to these challenges and move their organizations ahead, the Area Agencies on Aging identified the following training and technical assistance needs:

- Resource development (62.1%)
- Developing outcome measures (55.5%)
- Project 2020 as a strategic framework (53.1%)
- Strategic planning (52.1%)
- Evidence-based disease and disability prevention (44.7%)
- Consumer/self-directed programs (40.5%)

AAA ORGANIZATIONAL INFRASTRUCTURE

The governance structure, agency budget and staffing capacity of Area Agencies on Aging vary across the nation and are largely based upon state and local directives and funding. Despite these differences in organization structure (as shown in Table 2), all of the AAAs have the same core mission which is to ensure that older adults have the opportunity to maintain their dignity and independence in their homes and communities for as long as possible.

Table 2: Characteristics of AAAs

<table>
<thead>
<tr>
<th></th>
<th>Average (mean)</th>
<th>50th Percentile (median)</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Budget (in millions)</td>
<td>$9.7</td>
<td>$4.1</td>
<td>&lt;141,000-&gt;280 million</td>
</tr>
<tr>
<td>Proportion of budget from OAA</td>
<td>40.2</td>
<td>35.0</td>
<td>1-100</td>
</tr>
<tr>
<td>Proportion of budget from Medicaid*</td>
<td>21.2</td>
<td>12.0</td>
<td>1-95</td>
</tr>
<tr>
<td>Clients served</td>
<td>12,605</td>
<td>5256</td>
<td>45-263,509</td>
</tr>
<tr>
<td>Full-time staff</td>
<td>41</td>
<td>22</td>
<td>0-579</td>
</tr>
<tr>
<td>Part-time staff</td>
<td>23</td>
<td>6</td>
<td>0-598</td>
</tr>
<tr>
<td>Volunteers</td>
<td>187</td>
<td>60</td>
<td>0-3900</td>
</tr>
<tr>
<td>Providers</td>
<td>29</td>
<td>16</td>
<td>0-345</td>
</tr>
</tbody>
</table>

* These numbers reflect only those agencies which get at least some proportion of their budget from Medicaid.
SUMMARY

Area Agencies on Aging are in a pivotal position to assist older adults to age successfully. These organizations are responsive to the evolving needs of older Americans, and as a whole, are moving toward greater involvement in innovative strategies and approaches that are transforming the home and community-based system of long-term services and supports.

The 2008 survey shows that the Aging Services Network is looking for ways to expand its reach by the services it provides and the populations it serves, and to improve the delivery system via person-centered access to information and options, and through the expansion of consumer-directed options. The number of AAAs which serve as the access points for long-term care for multiple age groups grew remarkably from 2007 to 2008 as did other innovative practices.

Even though Area Agencies on Aging report some challenges related to funding, visibility, and positioning, they are looking for new opportunities to expand programs, leverage additional resources, incorporate business and strategic planning practices and work collaboratively with community partners in order to broaden and strengthen the nation’s system of home and community-based services so that every older American can age in place with independence and dignity.