

**State Plan Advisory Committee Meeting**  
**March 19, 2015**  
**Review & Discussion of Goals**  
**Alaska State Plan for Senior Services FY 2016-2019**  
**Call-In Number: 1(888)601-5515, no code**

**Goal 1: Promote healthy aging and provide access to comprehensive and integrated health care.**

Strategic Objectives:

- A. Services integrate behavioral and **primary** health care
  - Measure: Initiate and implement Senior Mental Health First Aid training focused on primary care providers, senior services providers, community members and caregivers as a strategy for integrating BH and primary care services. Target 100 participants trained per year.
  - Lead: Trust Training Cooperative, UAA Center for Human Development
- B. Activities include health promotion and disease prevention
  - Measure: Continue existing effort that health promotion and disease prevention grants must be evidenced based.
  - Lead: SDS, DPH
- C. Seniors have access to healthy food
  - Measure: Seniors potentially eligible for SNAP and those that receive SNAP have access to healthy meals.
  - Lead: DHSS Division of Public Assistance
- D. End of life care services are available to seniors (*removed: all*)
  - Measure: Training of healthcare professionals in and public awareness of end of life preparedness.
  - Lead: UAA Office of Health Programs

**Goal 2: Assist seniors with financial planning, pursuing employment opportunities, and promoting awareness of and access to economic benefits and support services.**

Strategic Objectives:

- A. Seniors and caregivers understand financial and economic security/planning
  - Measure: # attendance at AARP financial security seminars
  - Lead: AARP Alaska and Medicare Information Office
- B. There are opportunities for senior employment, leadership and mentorship
  - Measure: TBD MASST
  - Lead: Mature Alaskans Seeking Skills Training Program

Goal statements – Department of Labor and Workforce Development – Mature Alaskans Seeking Skills Training (MASST)

- ensure that MASST is an integrated, effective, job-driven workforce program
- ensure local services are aligned with employment opportunities, job training, and education
- keep Alaskans employed in their local communities
- C. Support safety net programs that benefit seniors
  - Measure: Increase by 2% the number of seniors who receive core Nutrition Transportation Support services
  - Lead: Senior and Disabilities Services & Alaska Commission on Aging

**Goal 3:**

Protect vulnerable seniors from abuse, neglect, self-neglect, and exploitation.

Strategic Objectives (updated):

- A. Develop and implement annual strategies for public awareness and training about senior rights and abuse/neglect/exploitation of vulnerable seniors.
  - Increase the number of public awareness trainings to seniors
    - Annual trainings (each agency will do at least 5) at senior centers across the state on:
      - resident rights in long term care by LTCO
      - abuse and neglect by APS
      - legal rights and services by ALS
      - financial exploitation by OEF
      - How to file for guardianship/conservatorship (by court visitors?)
    - Analyze data to see if above trainings increased intakes at the various agencies
  - Train the trainer program developed and implemented.
    - Annual train the trainer presentations (each agency will do at least 5) to senior providers across the state on:
      - resident rights in LTC by LTCO
      - abuse and neglect by APS
      - legal rights and services by ALS
      - financial exploitation by OEF
      - How to file for guardianship/conservatorship (by court visitors?)
    - Analyze data to see if above trainings increased intakes at the various agencies
  - Partner with the Alaska Mental Health Trust Authority and/or other entities to increase public awareness of senior issues/rights
    - Partner with the AMHTA to increase public awareness of senior rights/issues (ACoA responsible to organize with LTCO, APS, ALS, OEF, etc)
    - Target one tribal agency per year to partner with to increase public awareness of senior rights/issues (ACoA responsible to organize with LTCO, APS, ALS, OEF, etc)
- B. Update regulations regarding long term care of vulnerable seniors.
  - Update assisted living regulations.
    - Lead agency? Residential Licensing with assistance from ACoA, AMHTA and LTCO
  - Update nursing home regulations.
    - Lead agency? Health Facilities licensing and certification with assistance from ACoA, AMHTA and LTCO
  - Update LTCO regulations.
    - Lead agency? Office of Long-Term Care Ombudsman, with assistance from DSDS, Alaska Mental Health Trust Authority and ACoA
- C. Participate in the Elder Justice Taskforce meetings to revise Alaska's Guardianship and Conservatorship systems.
  - Provide input to the changes to the court system's website and forms for the guardianship process.
    - Lead agency: Office of Long-Term Care Ombudsman, Adult Protective Services, Alaska Mental Health Trust Authority, Office of Elder Fraud

- Provide input on the changes to the system to monitor the guardian and conservator report review process
  - Lead agency: Office of Long-Term Care Ombudsman, Adult Protective Services, Alaska Mental Health Trust Authority, Office of Elder Fraud
  - Provide input on the development of new training video on responsibilities of guardians.
    - Lead agency? Alaska Mental Health Trust Authority, LTCO, OEF, APS
  - Track pending legislation and provide testimony and advocacy through legislative process for pending legislation.
    - Lead agency? Alaska Commission on Aging & AARP Alaska
- D. Conduct advocacy to policymakers about the importance of programs and agencies that provide elderly protection.
- Develop and implement annual work plan to include annual events to educate policymakers.
    - Lead agency? Alaska Commission on Aging, LTCO, AARP Alaska

**Goal 4: Ensure seniors have access to quality, affordable, accessible, safe, and appropriate senior housing across the continuum of care.**

Strategic Objectives:

- A. Increase the number of assisted living units for seniors by 10% annually. More affordable senior housing and memory care facilities
  - Measure:
  - Lead:
- ~~B. Design homes for aging in place throughout the continuum of care.~~ Encourage development of at least one new continuum of care facility in Alaska during FY15-16.
  - Measure:
  - Lead:

Additional recommended Strategic Objectives:

- 1) Educate policy makers and state leaders about the aging demographic in Alaska and encourage policy initiatives that address resource allocations;
- 2) Provide concise, current, accurate, user-friendly data reflective of current housing availability, trends, projections and possible migration shifts to promote an appropriate response to the housing needs of seniors throughout Alaska;
- 3) Encourage continued research and promotion of the social and economic impact of aging in Alaska at every opportunity and share that information with Alaska's citizenry, business community and elected state and local officials;
- 4) Deliver comprehensive presentations at various statewide gatherings, conferences, annual events, business groups (Chambers of Commerce, etc.) and with others to educate them on the economic benefit of Alaska's seniors. Ask for their input, involvement and investment in addressing the growing housing needs of this population;
- 5) Promote the development of partnerships (state agencies, HCB service providers, government leaders, foundations and similar private partners) that encourage the evolution of healthy communities and aging in place;
- 6) Increase regular partnerships with all housing agencies in the state (HUD, AHFC, NeighborWorks, Housing Authorities, CIHA, Habitat for Humanity, etc.) in developing housing strategies to meet the needs of the senior population;

- 7) Invite local and state leaders to participate in meetings, events, forums, etc., hosted by the ACoA and partners;
- 8) Collect and study data for use in developing aging in place and naturally occurring retirement communities/village models. Identify and expand on successful aging in place models throughout Alaska;
- 9) Educate Alaskans on renovation loan options to make accessibility modifications to their homes now while they are employed or have equity to pay off these improvements before retirement;
- 10) Facilitate development of any self-sustaining aging in place models;
- 11) Conduct a follow-up housing forum during the next state plan period to determine what has been accomplished since the last event and to determine current needs. Invite national housing providers to participate in hopes they will invest capital here;
- 12) Increase partnerships with faith-based organizations to construct housing opportunities for senior citizens in the state; and,
- 13) Collaborate closely with local senior commissions to identify local needs and solutions.

**Goal 5: Promote opportunities for meaningful aging, intergenerational connectivity, and civic engagement.**

Strategic Objectives:

- A. The value of the \$3 billion senior industry is effectively marketed to illustrate the positive face of aging, support intergenerational connectivity and the social, cultural, historical, familial value of grandparents. (e.g. Celebrate our Seniors!)
  - o Measure:
  - o Lead:
- B. Seniors have opportunities for meaningful civic engagement
  - o Measure:
  - o Lead:
- C. Awareness is promoted through marketing/messaging to those that serve seniors as customers (e.g. health providers, retail workers, service providers, etc.).
  - o Measure:
  - o Lead:

**Goal 6: Provide quality and affordable home- and community-based long-term support services allow seniors the highest quality of life.**

Strategic Objectives:

- A. The Alaska workforce includes more seniors
  - o Measure:
  - o Lead:
- B. Rural senior services are accessible and culturally appropriate
  - o Measure:
  - o Lead:
- C. Caregivers have training and resources to provide quality care
  - o Measure
  - o Lead

→ADRD Roadmap Strategy 5.1.1. (page 59) with AARP Alaska as the convener that states “increase training to caregivers about ADRD, resources available and approaches and strategies for providing care and reducing stress and fatigue.

D. Senior services are easy to access, with no wrong door across all programs

- Measure
- Lead

E. ADRD

- Measure
- Lead

→ADRD Roadmap Strategy 2.1.1 Assess feasibility and design an implementation plan for a potential 1915(j) and 1915 (k) HCBS State Medicaid Plan amendments (Lead: Trust) PFM: TBD by Trust (Amanda Lofgren)

→ADRD Roadmap Strategy 1.1.1 Educate Alaskans about prevention, diagnosis, treatment, costs and appropriate care for people with ADRD through all possible media, in-person presentations, and policy advocacy (Lead: Alzheimer’s Resource of Alaska) PFM: TBD by ARA, Karl Garber (for State Plan purposes)

F. Community level services are person-centered, comprehensive, and conflict-free.

- Measure: Survey to SDS grantees (caregiver could answer survey if person with dementia)
- Lead: SDS

G. Senior and Long-Term Support Services will provide quality care to seniors through a trained, skilled and knowledgeable workforce.

- **Measure:** Increase the number of Senior and Long-Term Care Service agencies accessing Alaskan Core Competencies training for their staff by 10% annually.
- **Lead:** Trust Training Cooperative, UAA Center for Human Development

DHSS Performance Indicators:

Objective 1.2.2: Increase the number of older Alaskans who live safely in their communities

Performance Measure 1.2.2.1a: Number of months Long Term Services and Supports recipients are able to remain in their home before institutional placement (Lead: SDS)

Performance Measure 1.2.2.1b: Average cost of Long Term Services and Supports per recipient (Lead: SDS)

Objective 1.2.3: Increase the number of Alaskans with disabilities who are living safely in the least restrictive environment

Performance Measure 1.2.3.1a: Percent of Alaskans who are receiving community-based Long Term Services and Supports (Lead: SDS)

Performance Measure 1.2.3.1b: Average cost for waiver eligible Alaskans who are living in ICFMR or Nursing Home vs. those who are living independently (Lead: SDS)

Objective 1.2.4: Increase the number of Alaskans with behavioral health issues who report improvement in key life domains

Performance Measure 1.2.4.1a: Percent of behavioral health recipients who report improvements in quality of life (Lead: DBH)

Performance Measure 1.2.4.1b: Percent of behavioral health recipients who re-admit into API

within 30 days of discharge (Lead: DBH)

Objective 2.1.1: Increase the number of Alaskans with a primary care provider

Performance Measure 2.1.1.1a: Percent of individuals served by the department with access to a regular primary care provider (Lead: HCS)

Performance Measure 2.1.1.1b: Cost to provide health care services per client (Lead: HCS)

Objective 2.1.2: Increase access for Alaskans with chronic or complex medical conditions to integrated care

Performance Measure 2.1.2.1a: Number of Medicaid recipients enrolled in medical home (Lead: HCS)

Performance Measure 2.1.2.1b: Cost per recipient in medical home vs. cost per recipient not enrolled in medical home (Lead: HCS)

Performance Measure 2.1.2.2a: Percent of providers connected to the Health Information Exchange (HIE) for Direct Exchange (Lead: HIT)

Performance Measure 2.1.2.2b: Percent of providers connected to the Health Information Exchange (HIE) for Query-Based Exchange (Lead: HIT)

Performance Measure 2.1.2.2c: Cost per provider to operate the Health Information Exchange (Lead: HIT)