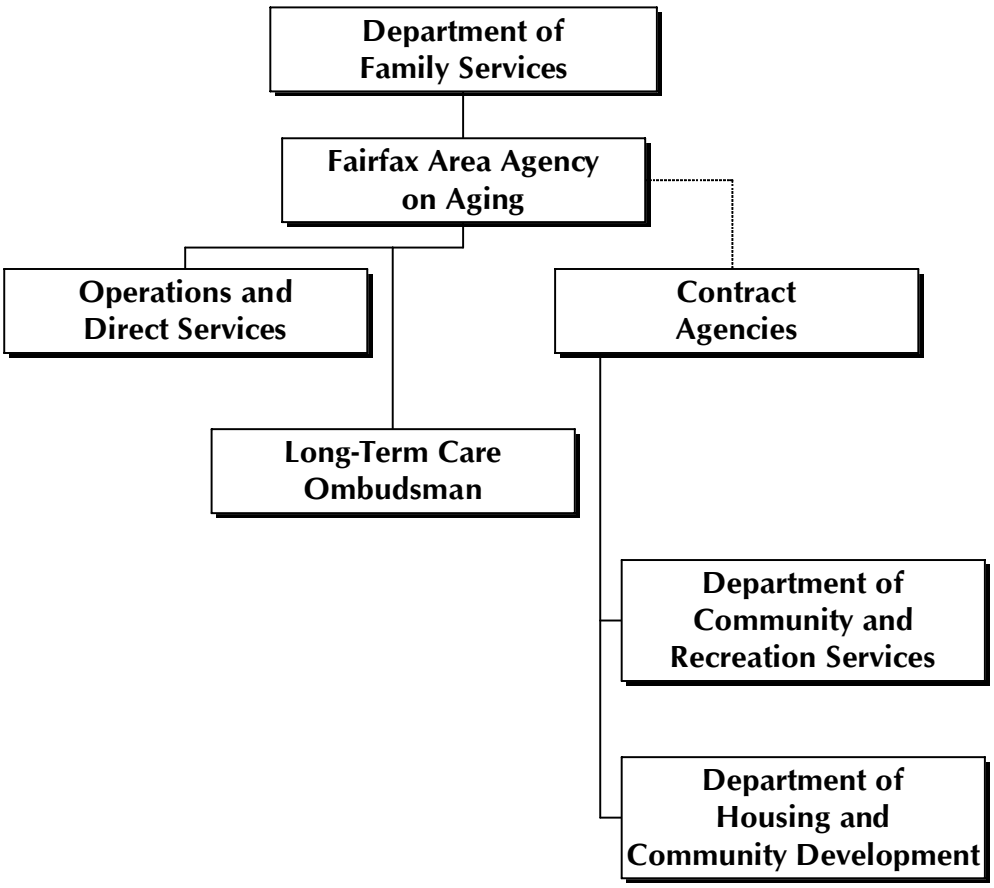
Fund 103
Aging Grants and Programs



To promote and sustain a high quality of life for older persons residing in Fairfax County by offering a mixture of services, provided through the public and private sectors, that maximize personal choice, dignity and independence.

Focus

Fund 103, Aging Grants and Programs, serves as the fiscal entity for federal and state grants awarded to the County primarily through the Virginia Department for the Aging. Grant funds are received and administered by the Fairfax Area Agency on Aging, part of the Adult and Aging Division within the Department of Family Services (DFS). With additional support from the County, these funds provide the following types of community based services: case management/consultation services, legal assistance, insurance counseling, transportation, information and referral, volunteer services, home-delivered meals, nutritional supplements, congregate meals, fan care and cooling assistance, and services for and support to caregivers of older adults. In addition, the regional Northern Virginia Long-Term Care Ombudsman Program provides services to the residents of Alexandria, Arlington, Fairfax County, Fairfax City, Falls Church City, Loudoun County, Manassas, Manassas Park, and Prince William County. For those older adults who cannot live independently in the community, staff and volunteers with the Northern Virginia Long-Term Care Ombudsman Program work with residents, families, and area nursing and assisted living facilities to provide information, assistance and mediation to ensure that residents' rights are being upheld.

Fund 103
Aging Grants and Programs

Deriving its purpose and structure from the Federal Older Americans Act, which established local area agencies on aging, the Fairfax Area Agency on Aging exists to provide community leadership on aging issues and to promote community-based programs and activities that enhance the quality of life for elderly persons and their caregivers. In addition to playing a key role linking practice and policy, Fairfax Area Agency on Aging serves as the focal point for the network of County and private sector agencies serving older adults. Fairfax Area Agency on Aging helps older adults remain in the community through the administration and coordination of social service programs for older persons whose needs are varied and may require intervention by one or more agency programs.

The Fairfax Area Commission on Aging (COA), appointed by the Board of Supervisors and the cities of Fairfax and Falls Church, serves as the official advisory body to the Fairfax Area Agency on Aging, the Board of Supervisors and the City Councils of Fairfax and Falls Church regarding local long-term care issues, legislative concerns, fiscal requirements, and program and policy issues. The COA has responsibility for tracking the success of the Board of Supervisors 50+ Action Plan, presenting an annual scorecard, and advising the Board of Supervisors about any aging-related issues. COA members are also represented on the Fairfax Long-Term Care Coordinating Council charged with implementing the strategic plan of the Citizen's Task Force for Long-Term Care.

THINKING STRATEGICALLY

Strategic issues for the department include:

- Increasing public awareness;
- Connecting people to services;
- Promoting independent and supportive living;
- Improving an expanding long-term care workforce; and
- Creating a long-term care delivery system.

Key driving forces of the Fairfax Area Agency on Aging's future direction is based on the *increasing numbers* of older adults, the *diversity* of older adults, the *increasing incidence of disabilities* among adults as they live longer, *supporting family caregivers*, and the *increasing number of persons eligible to retire* in this thriving business community.

- Thirty years ago, people 65 and older were just over one-in-every 33 residents of Fairfax County, but by 2020 older adults will be more than one out of every nine residents. Persons age 65 and over are growing at a faster rate than the overall population of Fairfax County. By 2020, it is projected that there will be 138,600 persons age 65 and older living in Fairfax County, representing 11.6 percent of the total population.

- In 1980, more than 13 percent of older adults spoke a language other than English at home and by 2000 the number had more than doubled and continues to grow. From 1980 to 2000, the percentage of minorities in the older adult population increased from 6.4 to 18.3 percent. Although the older adult population is not as diverse as the general Fairfax County population, it is becoming more diverse.

- The incidence of disabilities among elderly persons – everything from arthritis to Alzheimer's – doubles every five years after the age of 65. Because the oldest baby boomers will turn 75 in 2021, the need for assistive services and programs will accelerate rapidly sometime after 2020.

- With increasing life expectancies, more of the working-age population is part of the "sandwich" generation, those caring for both children and elders. These caregivers may care for their elders for a longer period of time. Longevity also means there are older adults with their own health and financial needs caring for other older adults such as siblings and spouses. It is increasingly prevalent in the County that more grandparents are caring for a minor child and support to those grandparents as caregivers is different from the support needed to care for an aging spouse.

- Fairfax continues to be a great place for businesses to locate and thrive but the growth in Fairfax County's labor force is not expected to keep pace with the growth in jobs during the next two decades. Within Fairfax County government alone, almost one in every four employees will be eligible to retire within the next five years.

The Long-Term Care Citizen's Task Force found that the greatest barrier to services is lack of information on existing services and how to access them and strongly recommended strategies to maximize service resources through information and communication. Improving communication, information, and awareness with a dramatically changing and diverse population as identified above are among the Fairfax Area Agency on Aging's primary initiatives. Strategies to accomplish these initiatives include: information and referral lines staffed by bilingual volunteers who receive ongoing training, educational seminars, resource fairs, and caregiver support groups conducted in languages other than English; recruiting volunteers from a variety of cultures to provide service to older adults and advocacy to older adults and their families; increasing large-print, taped, and translated resource materials; providing culturally sensitive and palatable meals and service delivery to persons receiving home-delivered meals and congregate meals; offering respite and support groups to family caregivers of older adults and to grandparents caring for grandchildren; and providing resource fairs for Baby Boomers considering volunteering while continuing in the workforce part-time or upon retirement.

A current and emerging focus for the Fairfax Area Agency on Aging is the Board of Supervisors' Committee on Aging's 50+ Action Plan and recommendations on how to plan now for a more aging friendly community tomorrow. The Fairfax Area Agency on Aging provides lead support to the on-going committee and has been designated by the Board of Supervisors to respond to community inquiries about its Action Plan.

Fund 103
Aging Grants and Programs

Budget and Staff Resources

Agency Summary		
Category	**FY 2007 Actual**	**FY 2008 Adopted Budget Plan**
Authorized Positions/Staff Years		
Grant	50/ 49	50/ 49
Expenditures:		
Personnel Services	$3,174,740	$3,501,107
Operating Expenses	2,968,127	3,412,973
Capital Equipment	0	0
Total Expenditures	**$6,142,867**	**$6,914,080**
Revenue:		
Federal	$1,503,878	$1,569,013
State	939,887	988,872
Project Income	518,626	381,233
Other Jurisdictions' Share of the Ombudsman Program	125,712	120,203
City of Fairfax	33,013	33,013
City of Falls Church	36,306	36,306
Private Corporations	3,270	2,000
Total Revenue	**$3,160,692**	**$3,130,640**
Net Cost to the County	**$2,982,175**	**$3,783,440**

SUMMARY OF ALL AGENCY LOBS (FY 2008 Adopted Budget Data)

Number	*LOB Title*	*Net LOB Cost*	*Number of Positions*	*LOB SYE*
103-01	Community-Based Services	$3,783,440	50	49.0
TOTAL		**$3,783,440**	**50**	**49.0**

LOBS SUMMARY

103-01: Community-Based Services

Fund/Agency: 103	Aging Grants and Programs
LOB #: 103-01	**Community-Based Services**
Personnel Services	$3,501,107
Operating Expenses	$3,412,973
Recovered Costs	$0
Capital Equipment	$0
Total LOB Cost:	$6,914,080
Federal Revenue	$1,569,013
State Revenue	$988,872
User Fee Revenue	$0
Other Revenue	$572,755
Total Revenue:	$3,130,640
Net LOB Cost:	$3,783,440
Grant Positions/SYE involved in the delivery of this LOB	50 / 49.0

► LOB Summary

Community-Based Services
The goal of Community-Based Services is to enable older adults to remain in their own homes or community as long as possible. The services include but are not limited to legal, volunteer, outreach, information and assistance, insurance counseling, assisted transportation, community education, and the Ombudsman programs. The purposes of these services are to encourage independence and ongoing contributions by older adults as well as to prevent inappropriate and premature institutionalization.

Legal services are offered under contract with Legal Services of Northern Virginia for low-income persons over age 60. Services include advice and representation by an attorney and counseling and other assistance by a paralegal under the supervision of an attorney. Community education concerning legal issues is also provided. It is required that a percentage of the Older Americans Act funding that supports the Area Agency on Aging (AAA) be expended on legal services for the elderly.

Volunteer Solutions recruits, screens, places and provides ongoing support to over 2,000 volunteers who are older adults looking for opportunities in the community, younger adults willing to serve the needs of older adults, and groups willing to undertake special projects. Volunteer activities include grocery shopping, transportation, some handyman and yard work, telephone reassurance, friendly visiting, and more. The VS team is located in each Human Services region.

Fund 103
Aging Grants and Programs

Aging, Disability, and Care Resources (information and assistance) responds to calls from more than 5,800 older persons, family and caregivers annually about available resources and assists them in obtaining necessary services. The Virginia Insurance Counseling and Advocacy Program (VICAP), headed by a County staff person and staffed by trained volunteers, offers free, confidential help and advice about health insurance and long-term care insurance, assists in resolving Medicare, Medicaid or medical claims, helps callers compare and understand Medicare+Choice, Medicare supplemental policies, and Medicare HMOs, provides basic Medicaid information, and works with callers to explore their long-term care insurance needs. The Fan Care Program provides fans and cooling assistance to prevent heat-related illnesses. The Fairfax Area Agency on Aging has also worked with the Northern Virginia Resource Center for Deaf and Hard of Hearing to provide speakers and services for their regular meetings of deaf older adults, an often overlooked population.

Community Education Services informs older persons and the general public about the programs and services available for the elderly, their caregivers and family members. This includes information on the talent and skills of older persons as well as their problems, needs and resources. The Community Education program includes the *Golden Gazette*, a monthly newspaper that goes out to more than 28,000 households in our community, as well as libraries, nursing homes, senior centers, and other community focal points. Community Education is also provided through seminars, a speaker's bureau, and award-winning cable programming. Many of these projects are accomplished through public/private partnerships. In addition, the Fairfax Area Agency on Aging is expanding its materials and information for non-English speaking members of our community through the printing of materials in nine languages and the creation of a call-in line for persons speaking Korean or Chinese as well as through liaisons with organizations serving minority communities.

The Northern Virginia Long-Term Care Ombudsman Program is funded by five participating jurisdictions: Fairfax County, Arlington County, Loudoun County, Prince William County, and Alexandria City. The goal of the Ombudsman program is to improve the quality of life for residents in licensed nursing homes and adult care residences, as well as recipients of adult day care and home care services. Fifty-five volunteers are trained to serve as advocates for the needs and rights of the residents. The program staff mediate complaints related to home-care, adult care residences, and nursing homes.

The 2000 Census confirms what we have known since before the 1990 Census—the elderly population in Fairfax County is growing fast. The segment of the County's population age 60 and over grew by 39.1 percent from 1990 to 2000. The impact on Community-Based Services is a greater need for assistance with activities of daily living as older adults live longer. The problems of senior adults in the community are more complex. The jobs of volunteer ombudsmen are becoming more complicated with fewer resources, leading to frustration for these highly skilled and trained volunteers so critical to residents of long-term care facilities and to the community. Finally, being able to more adequately meet the need of the nearly 30 percent of older adults in the community who are culturally diverse has become a significant challenge.

Fairfax County authorized the Fairfax Area Agency on Aging to be a federally-funded Area Agency on Aging. When the County draws Older Americans Act funding as an Area Agency on Aging, certain services are required to have certain spending limits and percentages: 1 percent of federal funds received must be utilized for legal services, 15 percent must be utilized for public access information, and 5 percent for in-home services [Older Americans Act, Section 306 (a)(2)(A,C) and

(a)(b), and Section 712 (a)(5)(B)]. The Older Americans Act requires that there will be a Long-Term Care Ombudsman, either directly or through contract from the state level. The Commonwealth of Virginia, in turn, has delegated responsibilities to this regional program at the sub-state level. The County has a contract with the Virginia Department for the Aging to administer this program for the region.

Nutrition Services

The goal of nutrition services provided by the Fairfax Area Agency on Aging through congregate, home-delivered and liquid nutrient meals is to keep older adults, particularly those who are low-income, healthy and in their own homes.

Nutrition services for elderly persons are available to those 60 and older, and their spouses. Congregate meals are funded under Title III (C-1) of the Older Americans Act and are available to persons who participate in some senior centers, senior residences, adult day health care programs and a respite day care program. A major goal of the congregate meals program is to encourage better nutrition and socialization. At senior centers, health screenings, education, and talks from a dietician are included in a program provided with the meal. A contribution for the meal is requested but cannot be required because of Older Americans Act funding restrictions. Congregate meals are provided at 22 locations: 14 County-operated senior centers, community centers, or recreation centers, two non-profit senior centers, one non-profit adult day care center, one Falls Church City senior center, and four County adult day health care centers. Evening meals are provided at two senior residences and weekend meals are provided at one senior residence. A donation is required for these resident programs.

Home-delivered meals are funded under Title III (C-2) of the Older Americans Act and are provided for homebound persons age 60 and over who are unable to prepare their own meals and have no one available to prepare food for them. Contributions are sought on a sliding scale basis.

The nutritional supplement program, also funded by Title III (C-2), provides liquid supplements for persons 60 and older who are Title XX eligible, unable to meet nutritional needs through normal food intake, and cannot afford to purchase essential nutrition products. A doctor's prescription is required to enter this program.

The County has designated the Fairfax Area Agency on Aging as a federally-funded AAA and nutrition services are mandated to the extent that federal and state funds, earmarked for nutrition services, are accepted and the local match is met [Older Americans Act, section 306 (a)(1)].

All meals are required to meet one-third of the current Recommended Dietary Allowance for individuals age 60 and older. Low sodium and diabetic diets are available in some areas.

Home-Based Services

The Home-Based Services program assists elderly persons who would otherwise require services in assisted living or nursing facilities. Elderly persons generally would prefer to live in their own homes or with family members. Even for those who are interested in assisted living, there is a lack of available spaces for persons who require public assistance (auxiliary grants) to pay for the cost of services.

Fund 103
Aging Grants and Programs

The Home-Based Services program is provided under the area plan for the Fairfax Area Agency on Aging. The Home-Based Services program provides case management (the Care Network) and in-home assistance with the tasks of daily living for persons aged 60 and over. Home-Based Services provides support to individuals and families and delays and prevents inappropriate and premature institutionalization. Home-Based Services are provided on a sliding fee basis. The Home-Based Services program is provided in coordination with other services offered by Adult and Aging Services.

While this LOB addresses all of the department's strategic objectives, special emphasis is placed on the following:

- Providing excellent family services;
- Nurturing partnerships;
- Increasing community awareness;
- Anticipating and responding to changing community needs;
- Exercising corporate stewardship;
- Maximizing financial resources;
- Refining emergency planning process; and,
- Integrating service delivery.

Key Accomplishments and Initiatives

- Continue to provide staff support to the Board of Supervisors' Committee on Aging as initiatives and recommendations move forward.

Corporate Stewardship

- Due to recent success, continue the implementation of the cluster care model of service delivery that incorporates task-based home care, greater emphasis on home-delivered meals, and volunteer services. As a result, DFS has realized significant savings that have been reinvested in other programs serving older adults and adults with disabilities.

- Participated in a high-level multi-agency transportation planning committee to recommend the most effective and efficient strategies to serve the senior and disabled populations resulting from several local and regional transportation studies.

Kinship Care

- Continue to develop a Kinship Care Committee in partnership with other County offices and Fairfax County Public Schools that provides ongoing support groups for grandparents and other relatives raising minor children. Recent successes include developing the Resource Guide for Grandparents and Other Relatives Raising Children; offering three separate Respite Days for kinship care families; and producing a kinship care video for Cable Channel 16.

- Offered Respite Days to grandparents and other relatives caring for children in November 2006 and in April 2007 in separate locations in the County to offer safe and fun child care so

they are able to enjoy some free time. Community and Recreation Services coordinated a full day of activities for the children. Respite Days will expand to additional locations in FY 2009.

Community-Based Services

- Continue the Independent Living project in partnership with INOVA HealthSystems, faith communities, and other County agencies to provide community outreach to older adults in Franconia/Rose Hill and Annandale. The program offers in-home assessments, information referral, fall prevention, exercise, and classes in cooking and food safety.

Cultural Outreach

- Launched a Korean Senior Information Line in partnership with the AAA, the Korean Community Service Center, and the Korean Central Senior Center in the fall of 2006 offering Korean-speaking older adults access to information about services through trained bilingual volunteers. Additional volunteers were added to the program in May 2007.

- Convened a Chinese focus group in January 2007 with 29 participants to identify the needs of the Chinese-speaking older adult population and provide ideas for outreach with translated materials. As a result, two groups formed to plan for a Chinese Senior Information Line and a Chinese Taxi Line, planned to begin in the early 2008.

- Outreach initiatives to the Vietnamese community have included seminars conducted in Vietnamese on County resources for caregivers, fall prevention and medication management. The Fairfax Area Agency on Aging, in partnership with community organizations, has begun planning for a Vietnamese Senior Information Line.

Long-Term Care

- Received the 2006 Human Rights Award from the Fairfax County Virginia Human Rights Commission for the Long-Term Care Volunteer Ombudsman Program. Volunteers enable long-term care residents to advocate for quality of care in their facility through weekly visits.

Volunteer Solutions

- Community connection, vital to successful recruitment, placement, and support of volunteers, has been enhanced through a process redesign and improvement project of the Fairfax Area Agency on Aging's Volunteer Unit, facilitated by the Department of Systems Management for Human Services since January 2007. Over 2,000 volunteers countywide are supported and the demand for volunteer services is increasing. Volunteer coordinators were relocated to each region in order to build better community ties and better anticipate needs for volunteer services.

- Continue to provide volunteer opportunities, recruitment, screening, training and support for over 2,000 volunteers providing 90,000 hours of service in FY 2007 valued at $1.5 million.

- The Fairfax Area Agency on Aging's volunteer program responded to an increased need for volunteers to provide services to the growing number of Cluster Care clients. As of May 2007, 85 volunteers were providing services such as transportation, grocery shopping, and simple home repairs so that clients could remain at home and connected to their community through socialization with community volunteers.

- The Family Caregiver Program will provide outreach to employers to help them set up programs and policies that will benefit employed family caregivers as well as the employer.

Meal/Nutrition Programs

- In FY 2007, 48 percent of clients receiving home-delivered meals and 87 percent of clients receiving congregate meals scored at or below a moderate nutritional risk category, thereby surpassing the goals of 40 percent and 80 percent, respectively.

- Expanded the Vietnamese Meals on Wheels program from one initial route to three routes, improving the nutrition to more homebound elderly. A Middle Eastern Meals On Wheels pilot started in Fall 2007 at the Tysons Towers, a low-income congregate housing facility with a large population of elderly residents from the Middle East.

- Added two new home-delivered meals routes in the Centreville and Burke areas to address increased demand for nutritional services among homebound older adults in the County.

- Customer satisfaction surveys were translated and administered to non-English-speaking participants in the Congregate Meals Program in FY 2007. Of the 707 surveys received, 422 or approximately 60 percent of the surveys were completed in Spanish, Farsi, Chinese, Korean, or Vietnamese.

► Method of Service Provision

The Area Agency on Aging contracts with Legal Services of Northern Virginia for services at their offices, senior centers and senior residences.

Volunteer Solutions, will be shifting to a regional approach to increase partnerships with local organizations and better develop community and neighborhood volunteer response to emerging older adult needs.

Aging, Disability, and Caregiver Resources which includes information and assistance as well as intake into Department of Family Services programs, is delivered by phone and also responds to email requests and occasional drop-in visits from the public. The VICAP program services are delivered by phone and in the community.

The Fairfax Area Agency on Aging publishes the *Golden Gazette* with contractual services for printing and mailing. Public speaking is done throughout Fairfax County. The Fairfax Area Agency on

Aging is also the contact and coordinator for speaking requests made to the Long-Term Care Coordinating Council and these presentations are made throughout the community.

The Ombudsman Program is onsite in nursing homes and assisted living facilities throughout the County.

The Fairfax Area Agency on Aging continues to make extensive use of volunteers in the planning, management, and delivery of services to older adults in our community.

Home-delivered meals are prepared under contract with Inova Hospitals, FCPS, Cameron Glen Nursing Home, and the Reston Hospital, and delivered by 25 volunteer organizations throughout the County to people's homes. On-going coordination of in-home services for home-delivered meals clients is provided by Fairfax Area Agency on Aging social workers. Clients of the Nutritional Supplement Program are assessed by the social workers for their specific need of this program. The Nutritional Supplement Program has several distribution sites where family, service providers, and volunteers can pick up the liquid supplement.

Case management services are provided by the Care Network, a team of social workers, nurses, and mental health counselor. Services include a comprehensive assessment of needs and may include an assessment of Medicaid-funded, community-based services. The case manager develops a plan of care that may include coordination of medical care, counseling services, in-home care, transportation, or day care. The Care Network serves minority and non-English speaking elderly persons, low-income older adults, elderly persons using crisis services at hospitals, and elderly persons who might not otherwise receive services but are able to pay on a sliding scale. Through a private-public partnership with INOVA Health Systems, ElderLink, housed with and supervised by the Fairfax Area Agency on Aging, provides care management and other services on a sliding fee for elderly persons not eligible for other programs.

In-home services at 10 senior residences, under the area plan, are authorized by social workers and provided by approved independent providers and contracted agency vendors. The homemaker services are available in a task-based model, which pays vendors based on the tasks performed rather than the number of hours the vendor works. These services include housekeeping, meals, and laundry and allow older adults to continue to live in independent apartments in the community.

► Mandate Information

Portions of this LOB are federally and state mandated. The percentage of this LOB's resources utilized to satisfy the mandate is nearly 40 percent. This estimate incorporates federal and state revenue as a percentage of total spending. See the January 2007 Mandate Study, reference page 46 for the specific federal and state codes and a brief description.

AGENCY PERFORMANCE MEASURES

Objectives

- To maintain at 80 percent the percentage of elderly persons and adults with disabilities receiving case management services who continue to reside in their homes one year after receiving services.

Fund 103
Aging Grants and Programs

- To maintain at 95 percent the percentage of older adults receiving community-based services who remain living in their homes rather than entering a long-term care facility after one year of service or information.

- To maximize personal health by serving nutritious meals so that 40 percent of clients receiving home-delivered meals and 80 percent of clients receiving congregate meals score at or below a moderate risk category on the Nutritional Screening Initiative, a risk tool.

- To meet the state standard by maintaining the percent of Adult Protective Services (APS) completed within 45 days at 90 percent or more.

Indicator	Prior Year Actuals		Current Estimate	Future Estimate	LOB Reference Number
	FY 2006 Actual	FY 2007 Estimate/Actual	FY 2008	FY 2009	
Output:					
Adult and Aging/Long-Term Care clients served	2,187	2,187 / 2,283	2,283	2,283	103-01
Clients served with community-based services (CBS)	7,712	6,608 / 6,578	6,578	6,578	103-01
Meals provided	505,520	525,142 / 570,614	570,614	570,614	103-01
APS Investigations conducted	632	600 / 818	818	818	103-01
Efficiency:					
Cost per Adult and Aging/Long-Term Care client	$3,400	$4,994 / $2,823	$4,736	$4,785	103-01
Cost per CBS client	$152	$159 / $132	$125	$125	103-01
Cost per meal	$12	$14 / $9	$13	$13	103-01
Cost per investigation	$2,180	$2,451 / $1,547	$1,872	$1,921	103-01
Service Quality:					
Percent of Adult and Aging/Long-Term Care clients satisfied with services	85%	90% / 89%	90%	90%	103-01
Percent of CBS clients satisfied with the information and services	93%	95% / 91%	95%	95%	103-01
Percent of clients satisfied with home-delivered meal quality and quantity (1)	NA	NA / 81%	90%	NA	103-01
Percent of clients satisfied with congregate meal quality and quantity	92%	90% / 87%	90%	90%	103-01
Investigations completed within the state standard of 45 days	620	540 / 802	736	736	103-01

Fund 103
Aging Grants and Programs

Indicator	Prior Year Actuals FY 2006 Actual	Prior Year Actuals FY 2007 Estimate/Actual	Current Estimate FY 2008	Future Estimate FY 2009	LOB Reference Number
Outcome:					
Percent of clients who remain in their homes after one year of services	85%	80% / 87%	80%	80%	103-01
Percent of CBS clients who remain in their homes after one year of service or information	97%	95% / 98%	95%	95%	103-01
Percent of clients served home-delivered meals who score at or below a moderate nutritional risk category	47%	40% / 48%	40%	40%	103-01
Percent of clients served congregate meals who score at or below a moderate nutritional risk category	87%	80% / 87%	80%	80%	103-01
Percent of investigations completed within 45 days	98%	90% / 98%	90%	90%	103-01

(2) The home-delivered meal client satisfaction survey is administered periodically.