

Health Department

LOB #151:

LONG-TERM CARE DEVELOPMENT AND SUPPORT SERVICES

Purpose

Long Term Care (LTC) Development and Support Services works in partnership with the community to promote the health and independence of older adults and individuals with disabilities. In order to facilitate access to quality community-based services, the program conducts mandated nursing home pre-admission screenings and quality assurance for County assisted living and adult day health care programs. Program staff also provides coordination and support for the LTC Coordinating Council, community groups and County agencies. These services aim to provide opportunities, resources and support to build community capacity and ensure that older adults and individuals with disabilities remain active, engaged and in the community of their choice, and to coordinate County LTC services to assure best practices and eliminate duplication.

Description

Long Term Care Development and Support Services are comprised of two areas which each support the provision of LTC services in the community.

LTC Development

The Long Term Care (LTC) Development unit was established in 2002 by the Board of Supervisors in response to recommendations of its Long Term Care Task Force. The unit provides opportunities, resources and a variety of planning and guidance that builds community-based service capacity to ensure that older adults and individuals with disabilities remain active, engaged, and in the community of their choice. The team supports the Fairfax Area Long Term Care Coordinating Council (LTCCC) and its seven committees, consisting of over 50 members, to provide community and County planning efforts around the development and enhancement of long term care services and supports within the community. Staff helps communities establish neighbor to neighbor services, assists community-based organizations to help address the needs of community members, and works with LTC partners to coordinate initiatives. Staff also coordinates and facilitates the County's multi-departmental LTC Work Group (Department of Family Services, Area Agency on Aging; Fairfax-Falls Church Community Services Board; Department of Housing and Community Development, Department of Neighborhood and Community Services and the Health Department) to seek efficiencies, modify processes, recommend program realignments and assure a seamless delivery of services to consumers. The unit also works closely with the 50+ Committee to implement the 50+ Community Action Plan serving older adults and caregivers. The LTC Development unit is comprised of three staff, a LTC Program Manager and two LTC analysts. While some services are offered Monday-Friday, 8:00am to 4:30pm, the LTC Development staff routinely meets with individuals, community groups, the LTC Coordinating Council and its seven committees during evening and weekend hours.

LTC Support Services

Nursing Home Pre-Admission Screenings (NHPAS) and quality assurance services have been provided for over 10 years to help to support access to long term care services in the community. A Medicaid-funded NHPAS is provided to individuals of any age who need the type of services provided in a nursing home. A joint home visit is made by a public health nurse and a Department of Family Services (DFS) social worker to complete the assessment. If an individual meets the criteria, they may choose to stay in the community with supportive services rather than the more costly option of entering into a nursing home. Services are provided in the home Monday-Friday, 8:00am to 4:30pm or as needed. The number of Medicaid pre-admission screenings completed in FY 2015 was 1,224.

Health Department

The Health Department also promotes access to local assisted living facilities (ALFs) by providing quality oversight of County-owned ALFs. Quality assurance (QA) activities include resident chart review, medication administration monitoring, development and oversight of measurable annual performance goals, regular review of facility issues, consultative services and establishment and oversight of corrective action plans when needed. This service is provided by one public health nurse, Monday-Friday, 8:00am to 4:30pm. The number of QA related activities completed in FY 2015 was 52.

Benefits

Long Term Care (LTC) Development and Support Services promote the health and independence of older adults and individuals with disabilities in the community. Staff work in collaboration with community and County groups to coordinate LTC services and supports to assure coverage, prevent duplication, and develop new services to enhance services for older adults and individuals with disabilities. Community groups have benefitted by gaining services that were not previously available, such as day supports for young adults with disabilities who age out of the school system and do not qualify for other job or day support programs; and community or neighborhood groups that organize to provide volunteer and other services to enable individuals to age in place in the home of their choice. The LTC provides communities with innovative models of service delivery such as neighbors helping neighbors “Age In Place” to support these efforts. These service models benefit individuals and communities by enabling them to self-identify and self-determine their needs and align appropriate service providers. These services are community-based and provided at little or no cost to the County, but enable individuals to remain in their home. The LTC staff work group has streamlined the delivery of County services and created a “no wrong door” entry and information system to provide consumers with the best possible experience from multiple agencies.

Nursing Home Pre-Admission Screenings are an important service to help community members who are medically frail or unstable access care options. When an individual is found eligible for services, the client may select placement in a long term care facility or home-based services. The primary purpose of the home-based community services is to help people access care in their communities instead of a nursing home.

The County owns two assisted living facilities (ALF) to meet the needs of moderate to low income seniors or disabled persons 55 years of age and older who otherwise cannot afford market rate ALFs. The Health Department provides quality assurance support to ensure that licensing standards are met and maintained.

Mandates

Some services in this LOB are mandated while others are not.

LTC Development

- LTC Development services are not mandated, but were established by the Board of Supervisors in 2002 in response to the recommendations of its Long Term Care Task Force.

LTC Support Services

- Nursing Home Pre-Admission Screenings (NHPAS) are a mandated service as outlined in the Code of Virginia (12 VAC30-60-300) by the Virginia Department of Medical Assistance Services (DMAS).
- Quality assurance is mandated by the Standards and Regulations for Licensed Assisted Living Facilities (22 VAC40-71-50).

Health Department

Trends and Challenges

The demographic composition of Fairfax County has changed with the aging of the overall population. Between 2008 and 2013, the number of Fairfax County residents, age 65 and older, grew by 8.6 percent, to comprise 11.1 percent of the County's total population. Between 2008 and 2013, the number of individuals with disabilities out-paced County growth by 11 percent, while the number of individuals with disabilities age 65 and older, grew at a rate almost 70 percent higher than that of the County. The likelihood of vulnerability and additional demand for resources in these areas increases with the estimated growth around older adults and individuals with disabilities residing in Fairfax County. Without an integrated planning effort in these areas, the County will likely see an increase in costs to the County and overall strain on the human services system.

The demand for Long Term Care (LTC) services has been growing as evidenced by an increase in requests for Nursing Home Preadmission Screening (NHPAS) services on an average of 9 percent each year since 2010. In 2014 the Virginia General Assembly mandated the completion of the NHPAS process to any individual who requests it within 30 calendar days. This has required additional County manpower and oversight to ensure this mandate is consistently met.

Of those approved for nursing home preadmission the percentage of those who elect community-based services has increased from 87 percent to 91 percent since 2012. Over 90 percent of individuals report a desire to remain in their own homes for as long as possible. In light of these trends, the LTC Development and Support Services unit seeks to expand community-based options and to assure quality services in LTC settings.

Resources

Category	FY 2014 Actual	FY 2015 Actual	FY 2016 Adopted
LOB #151: Long-Term Care Development and Support Services			
FUNDING			
<u>Expenditures:</u>			
Compensation	\$632,401	\$719,017	\$745,886
Operating Expenses	316,457	319,481	325,714
Total Expenditures	\$948,858	\$1,038,498	\$1,071,600
General Fund Revenue	\$225,767	\$285,189	\$303,294
Net Cost/(Savings) to General Fund	\$723,091	\$753,309	\$768,306
POSITIONS			
Authorized Positions/Full-Time Equivalents (FTEs)			
<u>Positions:</u>			
Regular	8 / 8	8 / 8	8 / 8
Total Positions	8 / 8	8 / 8	8 / 8

Health Department

Metrics

Metric Indicator	FY 2013 Actual	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate	FY 2017 Estimate
Number of community organizations receiving facilitation, support, or technical assistance from Long Term Care Planning and Development	NA	22	30	34	38
Number of County committees, agencies, workgroups, or councils receiving facilitation, support, or technical assistance from Long Term Care Planning and Development	NA	19	29	33	37
Average # of calendar days between request for NHPAS and submission to DMAS for processing*	NA	36	18	18	18
Medicaid pre-admission screenings that met criteria (adults only)	649	871	835	927	1,029
Low-income, frail elderly, and adults with disabilities who meet criteria for Medicaid waiver services and have access to Medicaid community-based services	86%	91%	92%	92%	92%

*New metric to monitor the State legislation requiring that screenings are processed within 30 calendar days of client request.

The number of Medicaid Nursing Home Pre-Admission Screenings (NHPAS) completed in FY 2015 increased to 1,224 which represented a 25 percent increase in service demand since FY 2013. This trend is reflective of the aging population both nationally and in Fairfax County. The increase in requests for home-based community services is indicative of the desire to age in place and provides a means for older adults and individuals with disabilities to access services in the community if they so choose. In order to support the increase in NHPAS service requests, the Health Department Long Term Care unit collaborated with the Department of Family Services Adult and Aging to evaluate the process for requesting and providing the screening service in a timely manner. This interdepartmental partnering allowed for the implementation of process improvements that resulted in a decrease in the time from initial client request for a screening to submission of the screening results from 36 to 18 calendar days. This is the first time this metric has been used as the data is new and represents screening done from September 1, 2014 through June 30, 2015.

Of the 1,224 NHPAS completed in FY 2015, 835 or 68 percent low-income, frail elderly and adults with disabilities were found eligible for services. Of those found eligible, 92 percent selected community-based services rather than the more costly institutional care.

The LTC Program Development unit provided information, guidance, planning and facilitation for community-based organizations and internal County cross-departmental groups at a growing pace from FY 2014 to FY 2015. This support enabled community groups to build capacity to meet the needs of the disproportionately increasing aging and adults with disabilities demographic in Fairfax County. It also reduced duplication of effort by increasing collaboration and building partnerships among County agencies and stakeholders who work with these populations. Projections for FY 2016 and FY 2017 take into consideration that as organizations become self-sufficient and/or group projects are completed, the support this unit provides is either reduced or no longer necessary leaving capacity for new groups and organizations in need of support from this unit.