

# National Association of Area Agencies on Aging (n4a)

## 2008 Area Agencies on Aging Survey

### AREA AGENCIES ON AGING AND THE FUTURE OF LONG-TERM CARE

#### Scripps Gerontology Center

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## I. Background

With a grant from the Administration on Aging (AoA), the National Association of Area Agencies on Aging (n4a) partnered with Scripps Gerontology Center to conduct the 2008 survey of all Area Agencies on Aging (AAAs) and Title VI Native American programs in the nation. The survey was designed to assess the evolving role of the aging network in a balanced long-term care system. The network's efforts center on Project 2020, the home and community-based strategy promoted by n4a and the National Association of State Units on Aging (NASUA). This strategy includes an expansion of the aging network's activities in three areas:

- Person-Centered Access to Information,
- Evidence-Based Disease Prevention and Health Promotion, and
- Enhanced Nursing Home Diversion Services.

The survey was launched in August 2008 to all AAAs (and in April 2009 to Title VI programs). AAA data collection concluded in January of 2009 with over 80% of AAAs responding. This brief report provides key findings from the survey as they relate to the following topics: AAAs at the Center of Aging Ready Communities, The Expanding Role of AAAs in Long-term Services and Supports, Business Planning and Outreach and Organizational Infrastructure.

## II. Area Agencies on Aging at the Center of Aging-Ready Communities

### IIA. Variability and Flexibility in Roles

Area Agencies on Aging play a variety of vital roles in meeting the needs of elders in their local communities. In response to an open-ended question about the roles of their agencies, AAA directors cited the following most frequently:

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

The unique mix of these roles for any one Area Agency 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.

### IIB. Leveraging Multiple Funding Sources

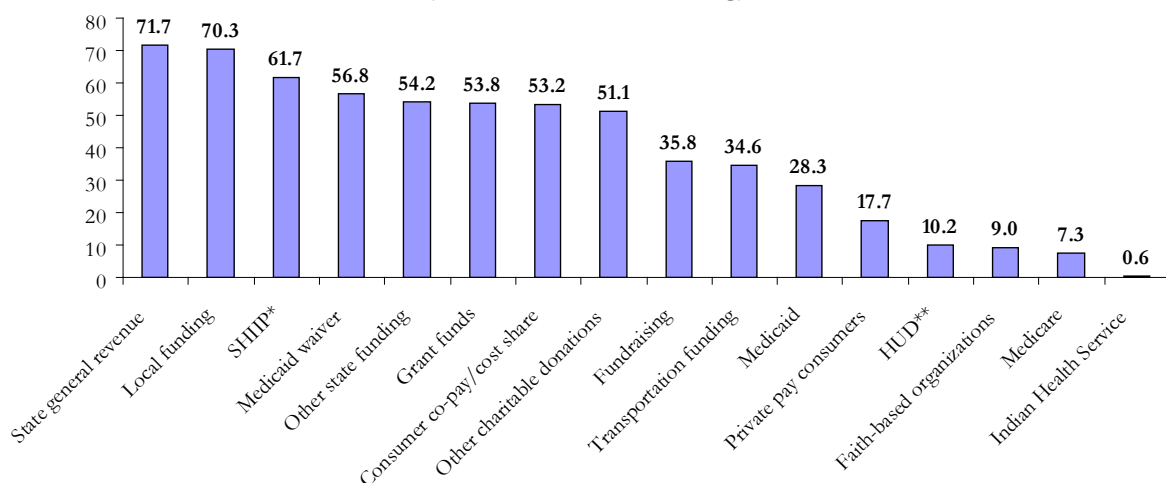
AAAs leverage multiple funding sources to meet the long-term service and support needs of the elders in their communities.

- The average AAA must use funding from six additional sources in order to provide services to their local community.

- Nearly all Area Agencies on Aging (99.0%) secure funds from sources in addition to the Older Americans Act.

- The most common sources of funding come from state general revenue and local funding, as shown in Figure 1.

Figure 1: Proportion of Agencies with Funds from Various Sources  
(in addition to OAA funding)

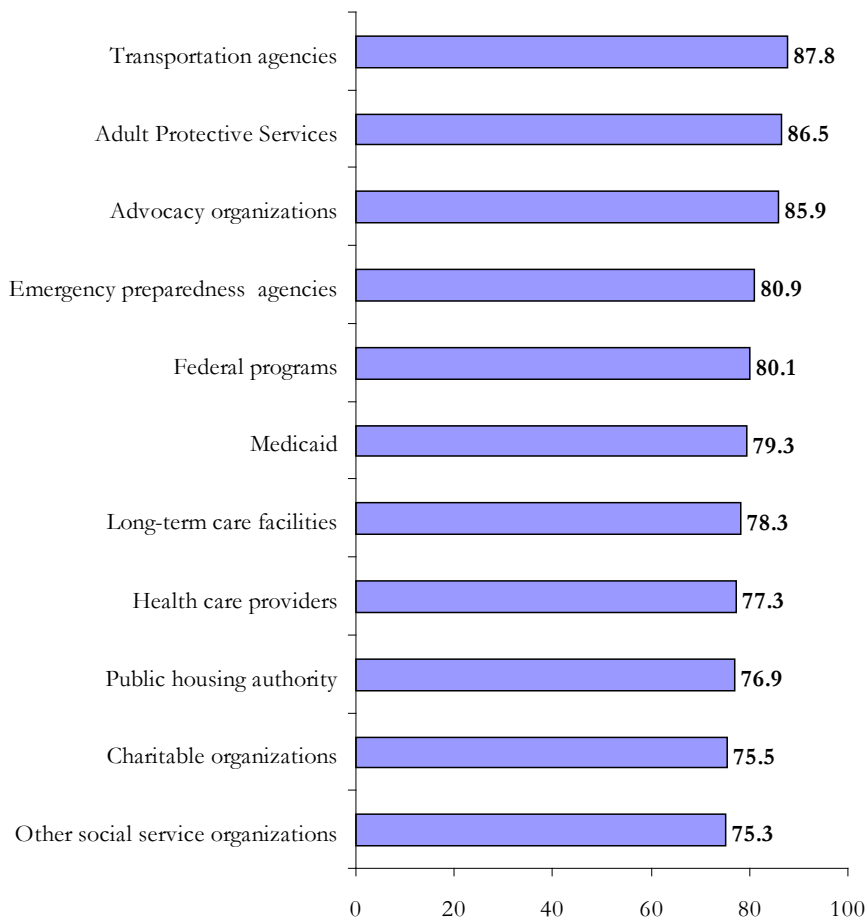


\*SHIP-Senior Health Insurance Information Program \*\*HUD-Housing and Urban Development

## II. Area Agencies on Aging at the Center of Aging Ready Communities

### IIC. Connections to the Community

Figure 2: Proportion of Agencies with Various Partnerships



Area Agencies on Aging participate in partnerships and collaborations that strengthen the long-term care system for older people.

- On average, AAAs have 10 informal partnerships and five formal partnerships with other agencies or organizations that serve the older population.
- 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 2.
- Over 80.0% of AAAs have a partnership with emergency preparedness agencies in their communities.

### IID. Providing Essential Long-Term Services and Supports to Help People Stay at Home

Area Agencies on Aging coordinate services and often work with local providers to help elders remain in the community.

- AAAs provide information and referral assistance, legal assistance, transportation, meal services and family caregiver support to help older people stay in their own homes for as long as possible.
- The majority also provide a number of other services that enhance older adults' ability to remain in their own homes, including case management, homemaker services, and personal care.

- About two-thirds of all AAAs offer support for long-term care planning, including information about long-term care options, and helping older adults take responsibility for their own long-term care futures.

In addition, AAAs are involved in an array of innovative programs to help people remain healthy and independent. These are described in the following section.

### III. The Expanding Role of Area Agencies on Aging in Long-Term Services and Supports

#### IIIA. Consumer Direction

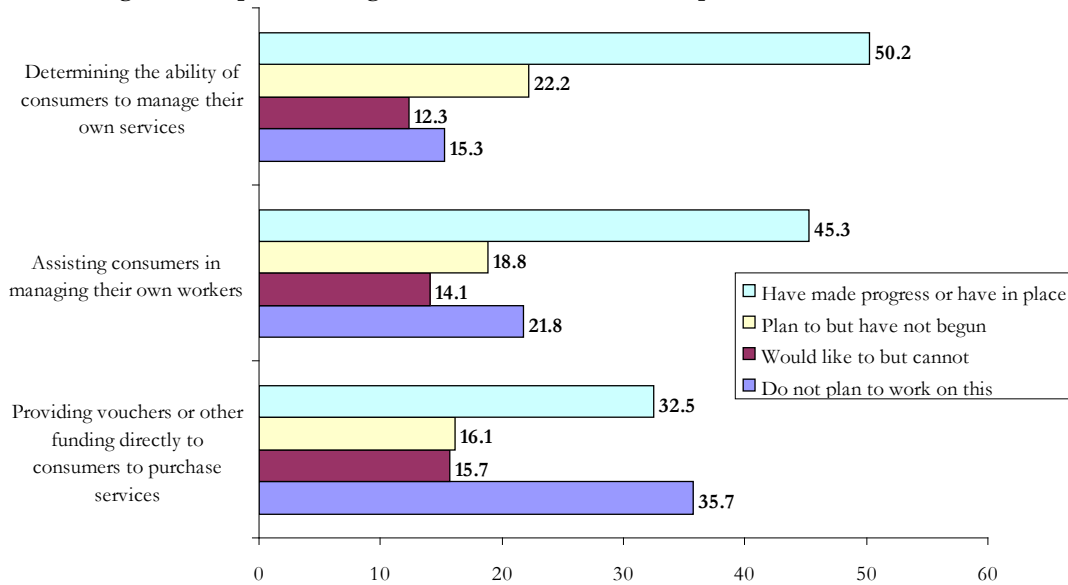
AAAs are highly involved in a number of activities that give consumers choice and control over the services they receive, as shown in Table 1.

Figure 3 shows that there is room for growth in AAAs involvement in determining the ability of consumers to manage their own services, assisting consumers in managing their own workers, and providing vouchers to consumers to purchase services.

Table 1: Consumer-Centered Processes

	Have made progress or have in place
Assessing consumer satisfaction with their services	92.3%
Asking consumers about their service preferences	81.3%
Assisting consumers in directing their own services	63.7%

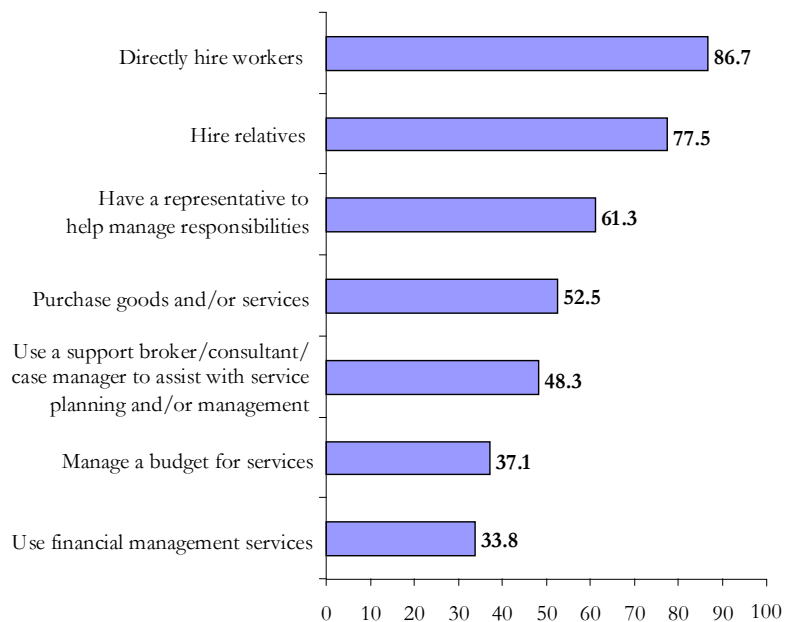
Figure 3: Proportion of Agencies Involved in Various Aspects of Consumer Direction



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 any consumer-directed option, the average is five services. The most common consumer-directed services are personal care, respite care, Family Caregiver Support Program and chore services.
- Most 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, as shown in Figure 4.
- 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.

Figure 4: Proportion, Among Agencies that Offer Consumer-Direction, that Offer Components where Consumers Can:



### III. The Expanding Role of Area Agencies on Aging in Long-Term Services and Supports

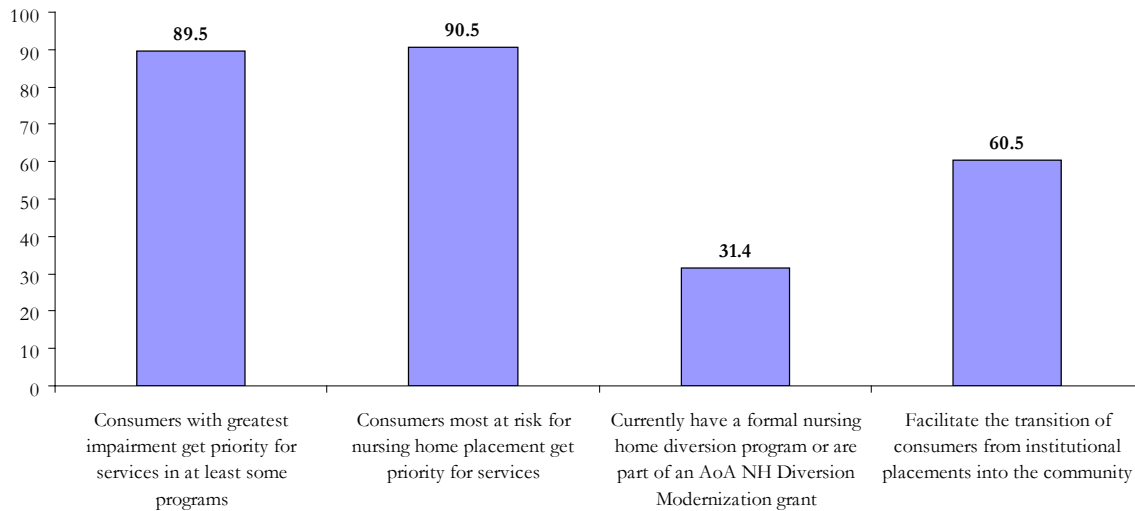
#### IIIB. Enhanced Nursing Home Diversion

Area Agencies on Aging are involved in a number of activities that help keep older adults living in their local communities and out of nursing homes (see Figure 5).

- Roughly nine in 10 AAAs give priority to consumers with greatest impairment and to those at risk of nursing home placement in at least some of their programs. Almost 40% give priority to consumers with greatest impairment and those at risk of nursing home placement in all of their programs.

- 31.4% of AAAs have a formal nursing home diversion program or are part of an AoA nursing home diversion modernization grant (13.7%).
- Nearly all AAAs assess potential long-term care consumers in a number of areas including functional, health, nutrition, and caregiver/ informal support system status.
- Over 46% of AAAs assess consumers on their risk for Medicaid spend down.

**Figure 5: Enhanced Nursing Home Diversion**  
(Proportion of AAAs who are involved in efforts consistent with nursing home diversion)

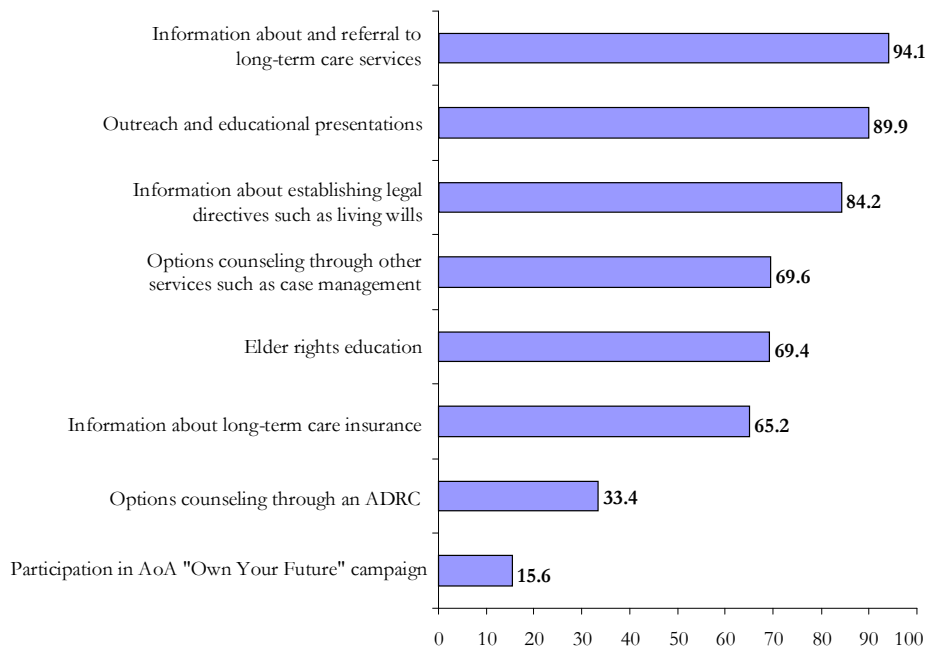


#### IIIC. Planning in Advance for Long-Term Services and Supports

AAAs provide a number of services that assist clients in planning for their own long-term care needs.

- On average, AAAs provide five long-term care planning services. As shown in Figure 6, the most common are: providing information about long-term care services, conducting educational presentations, and providing information about establishing legal directives.
- Roughly two-thirds of AAAs have made progress or have in place assisting consumers in planning in advance for long-term care, and encouraging individuals to take responsibility for their long-term care needs.

**Figure 6: Proportion of Agencies Involved in Various Aspects of Long-Term Care Planning**



### III. The Expanding Role of Area Agencies on Aging in Long-Term Services and Supports

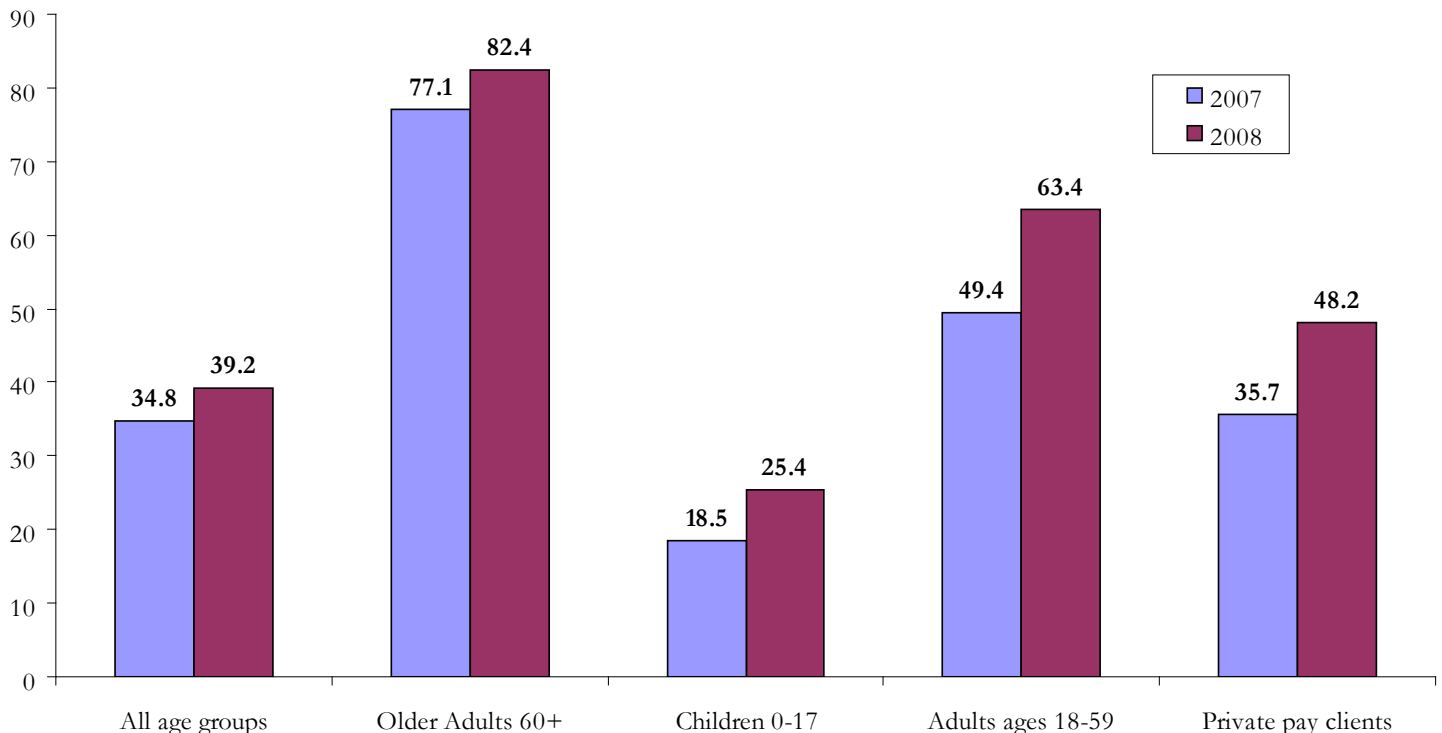
#### IIID. Points of Entry for Long-Term Services and Supports

Area Agencies on Aging have developed streamlined systems that allow consumers to easily access assistance and long-term services and supports. 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)

- While AAAs are involved in a number of activities to improve consumer access, there are several activities in which AAAs can expand their involvement such as developing innovative technologies to improve consumer access and developing cross-agency data systems to share consumer and provider information.
- Since 2007, AAAs have increased their involvement in serving as the single point of entry for different target populations. As shown in Figure 7, there is a marked increase in the proportion of AAAs who provide single point of entry access for children and younger adults with disability, and for private pay clients.

**Figure 7. Proportion of AAAs who are the Single Point of Entry for at least some services, by target population and year**



### III. The Expanding Role of Area Agencies on Aging in Long-Term Services and Supports

#### IIIE. Health Promotion and Evidence-Based Health Promotion

Area Agencies on Aging provide services that allow older adults to stay active and healthy. On average, agencies provide six disease prevention and health promotion services or programs either directly or through contract with local providers.

- The most common health promotion services include: caregiver support programs, nutritional counseling and education, medication management and routine health screenings.
- AAAs use OAA funds to provide these services but also have funding from local sources, state general revenue, other state funding and grant funds including foundation grants and other federal programs (see Figure 8).

Figure 8: Proportion of Agencies with Various Funding Sources for Disease Prevention and Health Promotion Services and Programs

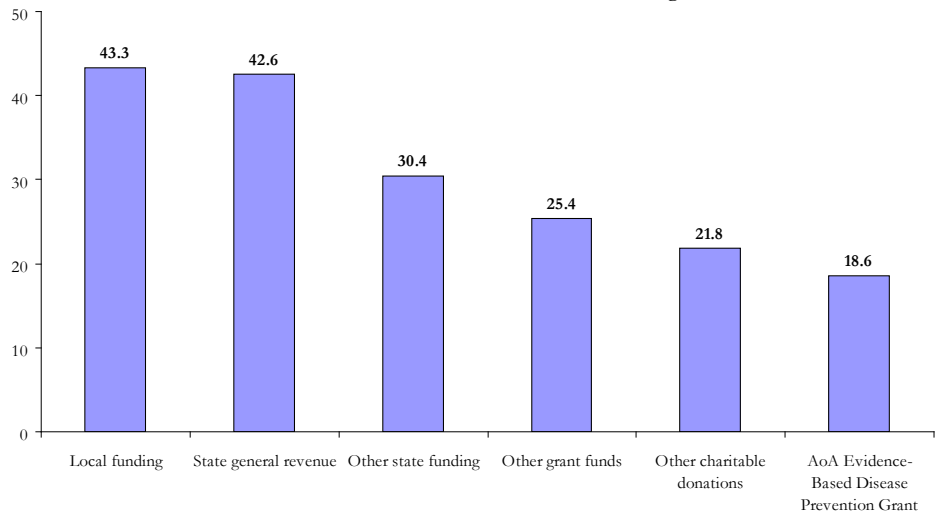
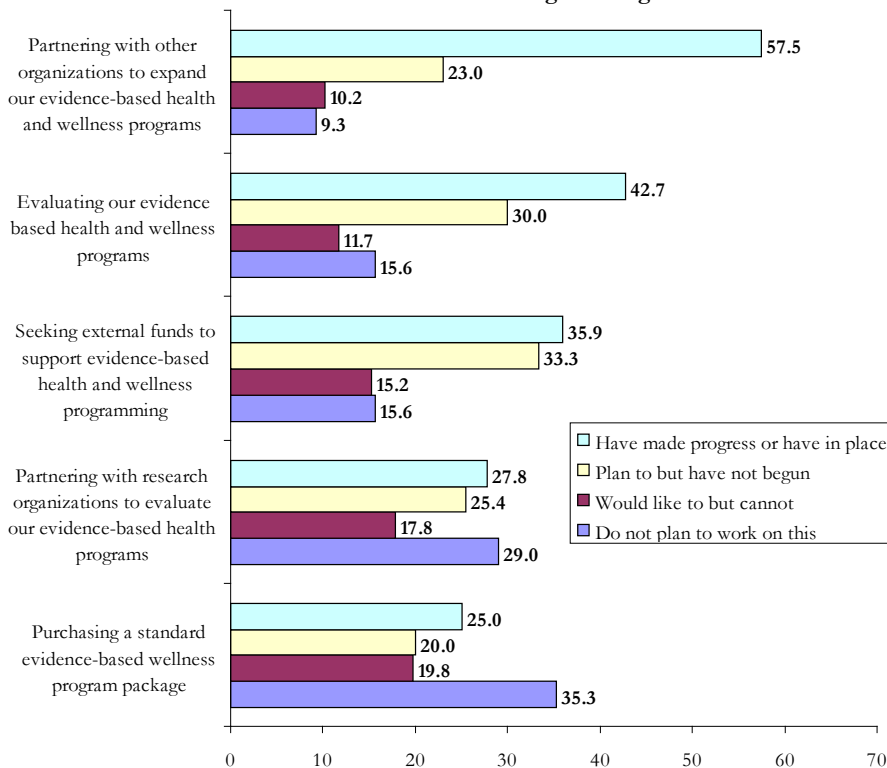


Figure 9: Proportion of Agencies Involvement in Various Aspects of Evidence-Based Programming



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 9, almost half of all AAAs partner with other organizations to expand their evidence-based health and wellness programs.
- Figure 9 also shows the opportunities for growth which include seeking external funds to support evidence-based health and wellness programs, partnering with research organizations to evaluate health programs, and purchasing a standard evidence-based wellness package.



## IV. Business Planning and Outreach

### IVA. Quality Orientation

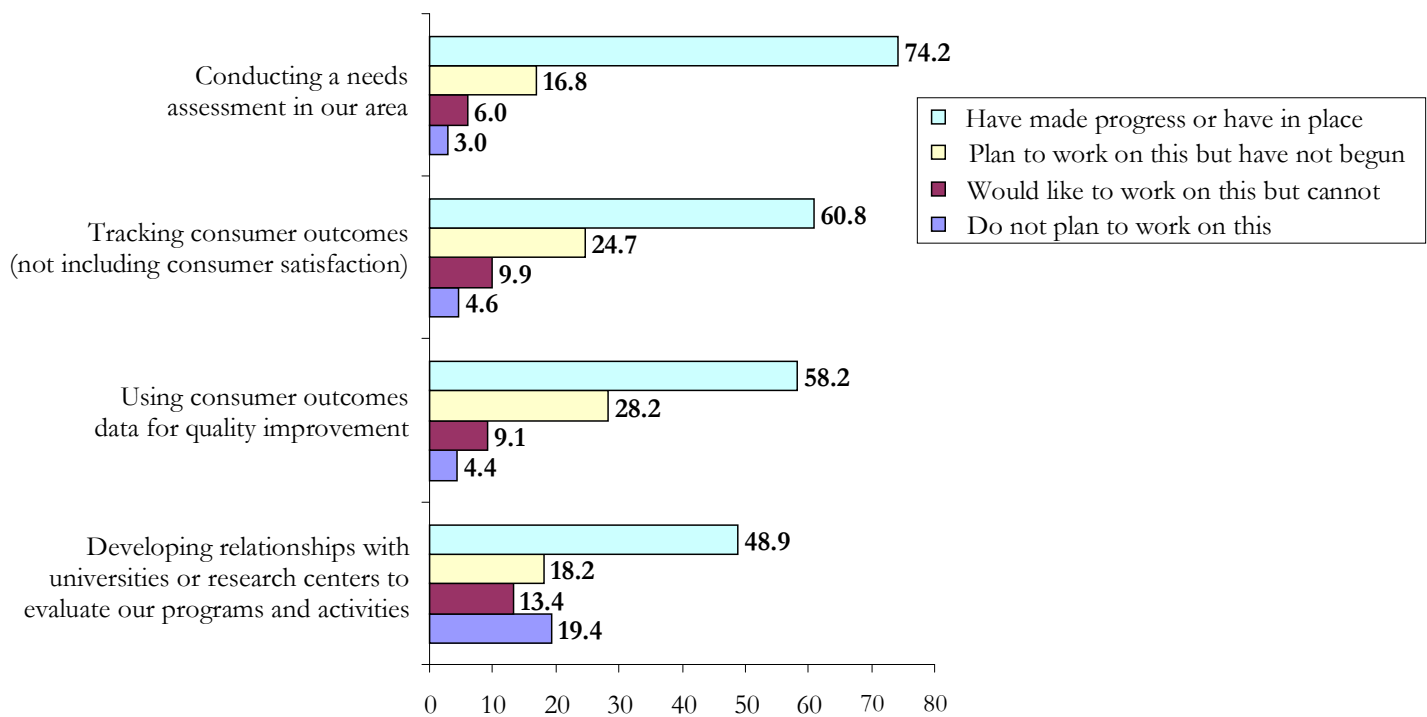
AAAs collect and use information to hear from consumers and to monitor and improve the services they provide.

- Nearly all Area Agencies 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.

- Areas for AAAs to grow include developing relationships with universities or research centers to evaluate their programs and activities, as shown in Figure 10.

Figure 10: Quality-Oriented Network



### IVB. Entrepreneurial Spirit

Area Agencies on Aging are clearly expanding their reach and strengthening their position within the long-term services and supports system.

- The majority of Area Agencies (87.5%) agreed that they are looking for new opportunities to do more in their communities.
- Nearly 92% agree that they proactively seek ways to expand the services they provide.
- 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.

## IV. Business Planning and Outreach

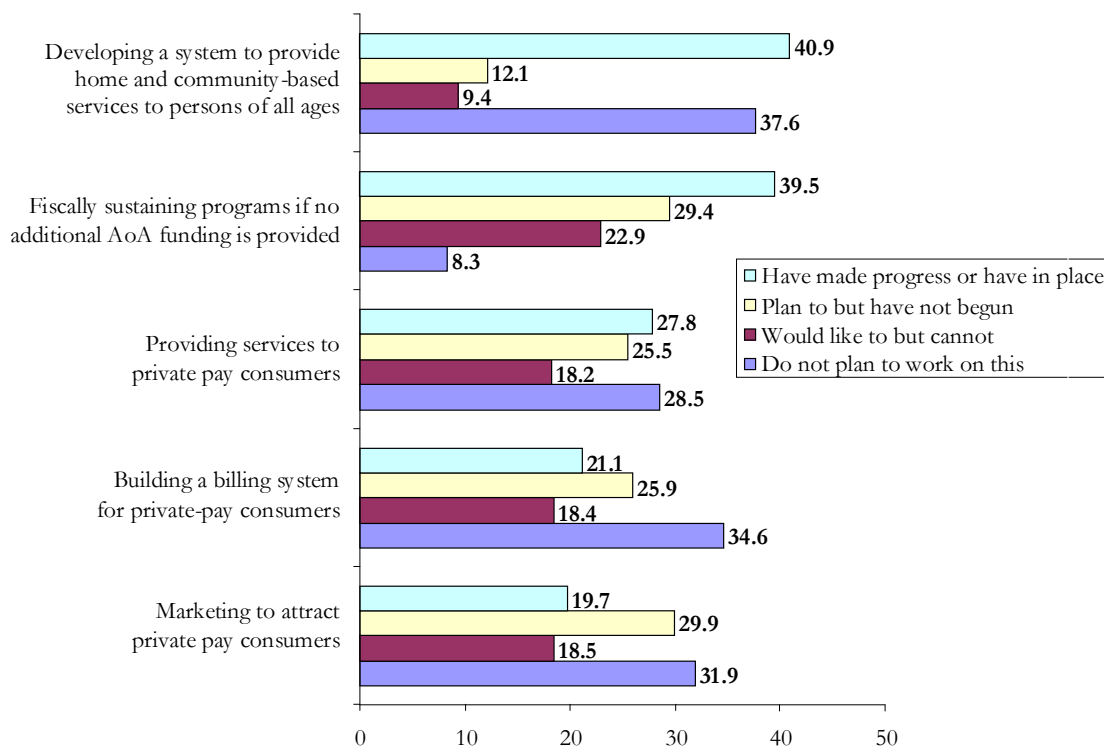
### IVC. Planning and Strategy

As Area Agencies on Aging expand their role in the long-term services and supports system, they are involved in a number of business planning activities and outreach strategies.

- Nearly all (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.

- The area for greatest potential growth in business planning and outreach is activities related to building systems for private pay consumers, as shown in Figure 11.

**Figure 11: Proportion of Agencies Involved In Various Aspects of Business Planning and Outreach**



### IVD. Challenges and Training and Technical Assistance Needs

As Area Agencies on Aging are expanding their role in their communities, building upon existing practices and exploring innovative programming, they are undoubtedly faced with challenges. Some of those challenges include:

Some of the training and technical assistance that area agency directors said they would benefit from as they move their organizations ahead include:

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li>Increasing expenses (92.0%)</li> <li>Competition for keeping revenue (74.7%)</li> <li>Difficulty in taking on new opportunities (66.1%)</li> <li>Long-term care role limited by structure or legislation (52.3%)</li> </ul> | <ul style="list-style-type: none"> <li>Resource development (62.1%)</li> <li>Developing outcome measures (55.5%)</li> <li>Project 2020 as a strategic framework (53.1%)</li> <li>Strategic planning (52.1%)</li> <li>Evidence-based disease and disability prevention (44.7%)</li> <li>Consumer/self-directed programs (40.5%)</li> </ul> |
|--|---|

## V. Organizational Infrastructure

Table 2: Characteristics of AAAs

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

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

**Area served** - proportion of AAAs that serve the following areas:

Rural- 45.3  
 Mix- 39.0  
 Urban- 7.3  
 Suburban- 5.1  
 Remote or Frontier- 3.3

**Structure** - proportion of AAAs that identify their structure as the following:

Independent, non-profit-39.5  
 Part of county government-27.4  
 Part of COG or RPDA\*\*-24.8  
 Part of city government-2.8  
 Other-5.6

\*\* Council of Governments or Regional Planning and Development Area

## VI. Summary

Area Agencies are at the center of aging-ready communities. These organizations are responsive to the evolving needs of elders, and, as a whole, are moving toward greater involvement in innovations and initiatives that are transforming the home- and community-based system of long-term services and supports.

The 2008 survey shows that the aging 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 area agencies which serve as the access points for long-term care for multiple age groups has grown noticeably in one year.

Even though area agencies report some challenges (related to funding, visibility, and positioning), they are also looking for new opportunities, working collaboratively with community partners, and playing a central role in the transformation of the long-term care system.

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