



# Senior and Disability Services

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Area Agency on Aging

## MEMORANDUM

**DATE:** September 25, 2017

**TO:** OCWCOG Senior Services Advisory Council (SSAC) and Disability Services Advisory Council (DSAC)

**FROM:** Senior and Disability Services (SDS) Program Manager Randi Moore and Community Services Program (CSP) Manager Jennifer Moore

**RE:** **SDS and Community Services Program (CSP) Report**

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Within the SDS department, Program Managers Randi Moore and Jennifer Moore will begin distinguishing between SDS – Medicaid and CSP updates.

**SDS – Medicaid**

**Program Manager Randi Moore**

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### Final Statewide Budget Allocation Numbers

Although final contracts have yet to be distributed, budgetary news from Aging and People with Disabilities in Salem has been positive. OCWCOG expects to see an increase over our previous biennial allocation of \$1.8 million. The majority of increases support Medicaid program growth, with *Oregon Project Independence (OPI)* and Older Americans Act (OAA) programs having small gains. With these funds, we will do strategic hiring of necessary staff to assist with growing caseloads and more complex work.

### Panel Presentation with Inter-Community Health Network Coordinated Care Organization (IHN-CCO) and County Health Administrators

On August 30th, SDS Program Manager Randi Moore participated on a panel at a national conference of Medicaid providers hosted by IHN-CCO. In addition to SDS Program Manager Moore, the panel consisted of Linn, Benton, and Lincoln County Health Administrators, and Samaritan Health Plan's Chief Operations Officer.

Panelists discussed the Collective Impact Model used successfully by IHN-CCO and its partners, in working to achieve the best health outcomes for IHN-CCO members and the greater three-County community. One focus of the conversation was how collectively assessing our systems has led to increased success in providing service through our non-emergent medical transportation program, *Ride Line*. This collaborative approach has led to the funding and implementation of several pilot projects, such as the creation of an Intake and Screening position, increased trainings, and call recording, allowing us to better serve our consumers and manage valuable resources.

## ***Aging and Disability Resource Connection (ADRC) Statewide Mental Health Funding***

The State is currently in the process of reviewing funds provided during the 2015-2017 biennium to support ADRC mental health programs. Of concern are some inefficiencies for certain programs, based on the low number of consumers assisted, compared with the cost of the programs. Additionally, fidelity to evidence-based models was brought into question, as was the collection of data from individual offices.

OCWCOG used these specific ADRC funds to support the *Program to Encourage Active and Rewarding Lives (PEARLS)*, a depression-reduction program designed around goal-setting and social activation. In a recent meeting with other Area Agency on Aging (AAA) leadership, it was reported that OCWCOG's PEARLS program was the gold standard for the State, serving more consumers for less money, and achieving greater decreases in depression indicators for those who participated. However, the lack of success statewide is leading to discussions about the future of this funding, placing it on hold until stakeholders and State leadership develop a plan.

Below is a graph of State data regarding ADRC mental health funding:

Number Served						
ADRC	Program	# Screened	# Enrolled	Completing Program	% Complete	Cost per client
CCNO	PEARLS	30	22	6	27.27%	\$4425
COCOA	HP	77	63	26	41.27%	\$4051
Douglas	HI	181	19	11	57.89%	\$4165
LANE	PEARLS	76	67	42	62.69%	\$3678
Multnomah	PEARLS	753	302	137	45.36%	\$3077
NWSDS	NWPPH	259	158	61	38.61%	\$2762
OCWCOG	PEARLS	347	198	110	55.56%	\$863
RVCOG	PEARLS	99	75	33	44.00%	\$4094
SCBEC	SFBT	78	51	18	35.29%	\$1188
	Total	1956	997	470	47.14%	\$28,303

### **Community Services Program (CSP)**

**CSP Manager Jennifer Moore**

#### ***Meals on Wheels (MOW)***

The Rotary Club of Corvallis's *Tapas and Treasures* event was a success, with just over 100 attendees. Final revenue and expenses are being calculated.

Current MOW trending indicates that of our total number of MOW clients, 67% received home-delivered meals, and 33% frequent our meal site dining rooms. Comparatively, of the total number of meals consumed, 84% are home-delivered, versus 16% in dining rooms. Differences between the two figures can be attributed to dining room clients visiting less frequently, compared with home-delivered clients, who generally average five meals per week, with some also receiving frozen meals for the weekends.

CSP Manager Jennifer Moore attended the *Meals on Wheels Association Conference* in August. Dominant themes included the changing health care landscape, and understanding the social determinants of health, in order to forge stronger partnerships with local health care providers. Several case studies included AAAs identifying fee-for-service opportunities in relation to malnutrition/nutrition, as a means to become imbedded in hospital nutrition and discharge planning.

### ***Retired & Senior Volunteer Program (RSVP)***

As of July 1<sup>st</sup>, *RSVP* has implemented a new system to track the number of clients served by the *Meals on Wheels* program, *AARP® Driver Safety Program*, *Start Making a Reader Today* program, and *VISIT* programs. Client counts and qualitative surveys are currently being collected for a quarterly federal report.

### ***Foster Grandparent Program (FGP)***

In 2015, *Senior Corps* began a longitudinal study of both its *FGP* and *Senior Companion Program (SCP)* volunteers, and the caregivers of its *SCP* clients, examining the health and psycho-social effects of serving as a *Foster Grandparent* or *Senior Companion*. The sample measured 987 senior national service volunteers at initial entry into *FGP/SCP*, and at one and two year follow-up points. Recent findings from the first follow-up demonstrate positive effects on volunteers' self-rated health, loneliness, social connectedness, and symptoms of depression and anxiety within one year after starting service. Final survey data and analysis is expected in October 2018.

More information can be found in the *Corporation for National and Community Service 2017 State of the Evidence Annual Report*, available online at:

<https://www.nationalservice.gov/impact-our-nation/evidence-exchange/2017SOE>