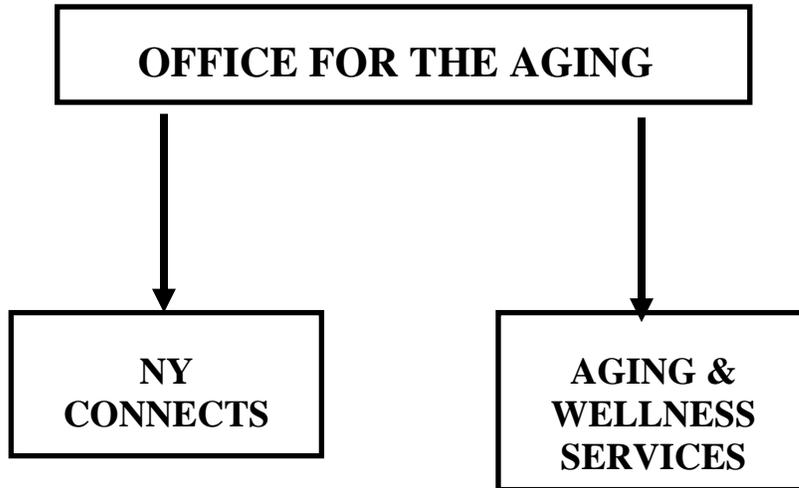


DEPARTMENT

ORGANIZATIONAL CHART



DEPARTMENT DESCRIPTION

Office for the Aging provides a wide array of nutrition, advocacy, educational, social, health related, and assistance programs and services to Orleans County's residents, primarily serving those age 60 and over. Program areas include case management; in-home personal care and housekeeping assistance; personal emergency response systems; medical transportation services; health insurance counseling; legal service including advance care planning; caregiver information, assistance, counseling and support; home delivered and congregate meals; volunteer opportunities; recreational, health, wellness, and social activities; home energy assistance; outreach and benefits counseling; and information and referral coordinated with NY Connects.

Through Orleans New York Connects, individuals of all ages who are in need of long term care are provided information, assistance, screening and connection to a wide range of in-home, residential and community based long term care services; while engaging planning partners to address service gaps.

Helping Seniors Help Themselves!

The Office seeks to participate in the development of community based services to insure that persons over age 60 have maximum opportunities to live with independence and dignity in their community. The Office's role in development of these services will include action to advocate for the rights of older people, provide community based services, and to plan and work with other services agencies to meet the needs of older people.

Key 2012 Accomplishments

(1) **New York Connects:** Unbiased information, assistance, option counseling (see definition below) and access to long term care services for people of all ages is being successfully provided through Orleans New York Connects. The top services requested: Health Insurance Counseling, Transportation, Home Delivered Meals, assistance with high cost of heating bills, Benefit screening/counseling, Legal Service, and Caregiver Support/Long Term Care Information.

(2) **Elders at Risk:** We continue to build on our ability to respond to needs of frail and at risk elderly by implementing the following: A) Continue to meet the demand of Information and Assistance and the increased amount of calls and walk-ins. Professional staff helps solve special problems of the elderly and their families on a **person to person** basis. Programs are designed to reduce reliance on institutional care, provide information about resources in the community and provide cost effective, non-medical services. In 2011, we served 5141 information and assistance contacts, with a projection of 6238 contacts in 2012. B.) Maintain quality service for **Expanded In-Home Services for the Elderly Program (EISEP)** through case management, in-home care for chronically ill and/or frail elders. C) Senior transportation medical rides through Community Action of Orleans and Genesee, OFA Out-of-County Medical Transportation, and providing free bus tickets through the Orleans County Transit Service. D) Processed 806 **Home Energy Assistance Program** applications which resulted in \$308,575 in home heating benefits to low income seniors. E) Continued **Home Delivered Meal** delivery to 212 older adults in 2011, averaging approximately 70 clients served daily (M-F). Currently, there is not a waiting list for meals. Four congregate meal sites continue to serve seniors throughout the county.

(3) **Health Insurance Counseling:** Through our Health Insurance Counseling Program, seniors in our county saved an estimated \$480,695 in the first 7 months of 2012. Changes in EPIC and in the Health Care Reform Act have increased volume of this greatly needed service. Medicare Advantage educational seminars and health insurance fairs are held to help serve all who need information to assist them in making health insurance decisions and/or applying for programs that can help cover some/most of their healthcare costs.

(4) **Caregiver Support:** Staff successfully responded to more complicated situations in Caregiver Counseling, as older adults and their families strive to find ways to continue providing care needed by chronically ill/disabled older adults, but need information, support or community based long term care services in order to do so. This gives a caregiver the ability to discuss options and develop a plan that best meets the needs of their loved ones and themselves. Most contacts are very in-depth situations which take several on-going and hours to continue to support caregivers who care for their loved ones at home.

(5) **Volunteer Services:** **Office for the Aging utilize 51 volunteers** who serve in many capacities including meals on wheels drivers, transportation drivers, meal site helpers, newsletter assembly, advisory council members, Long Term Care Council members, clerical, telephone reception and assistance with special projects.

(6) **Health Promotion Program:** Successful programs include monthly presentations on Health Promotion topics at each of the four Nutrifair sites, and weekly exercise class at two locations in the county.

(7) **Care Transitions Program:** A new grant to help patients and caregivers to better understand their diagnosis and treatment options, facilitating enhanced assessments of patients and/or caregivers' ability to self-manage care after discharge; and increasing referrals to community based services and resources that may assist patients as they transition from the hospital or short term rehabilitative setting to their homes.

Key 2013 Goals -

1. **Maintain Our Ability to respond to the Needs of Older Adults** aged 60 and older living at home in the community where 10 percent of the population have self-care limitations and 20 percent of the population have mobility limitations. Home and community-based services will become increasingly more important to support those with chronic conditions and functional limitations. Data has shown that frail individuals can indeed live independent and productive lives with community supports such as personal care, case management, and other support services. Office for the Aging does this by A) Maintaining **EISEP Support Services** at a high level by continuing to provide in-home care and case management for homebound elders. We currently do not have a waiting list for the EISEP program. B) Continue to grow the number of **Home Delivered Meal** clients served (approximately 70 per day) and number of meals served at 2012 levels. C) Continue providing **Transportation Services** for seniors to access medical appointments within and out of Orleans County, and providing free OTS passes for shopping or other basic needs.
2. Continue to strengthen our **Orleans New York Connects** Point of Entry system as we refer individuals to long term care service providers that serve disabled individuals of all ages. OFA continues to lead the Long Term Care Task Force, and coordinate with community agencies to plan and implement NY Connects. A) Strengthen OFA/NY Connects Information, Assistance & Referral processes. B) Continue identifying needs and opportunities in regards to long term care services. Build on our **Care Transitions Program** that started June 2012. Continue to educate staff and partner community agencies to give clients the best education in the goal to reduce hospital readmissions. OFA will coach on Medication Self-Management, Patient-Centered Record, Primary Care and Specialist Follow-up and Knowledge of Red flags and how to respond.
3. Assist frail elderly to remain in their homes by providing support services to their informal **Caregivers**. This will be accomplished by Counseling, Support, Outreach, Information and assistance to Caregivers and frail elders.
4. Options Counseling – A high performing ADRC Options Counseling Program is designed specifically to help individuals and their family caregivers access the right services at the right time in the right setting.
5. Continue **Information and Assistance** services for seniors such as benefits counseling, home energy assistance, legal services, housing assistance, tax assistance, telephone discount, free cell phone for those income eligible, referral for medical equipment loan, payment options for long term care, and other information/assistance which help seniors/disabled persons.
6. Continue to provide **Health Insurance Information Counseling and Assistance**, especially regarding prescription drug programs – Medicare Part D & EPIC, Medicare Savings Program, Medicare Advantage Plans, Chronic Care Medicaid, Medicare benefits and info for those new to Medicare. Educate on Health Care Reform Act to help residents make good choices regarding their health care insurance.
7. Maintain the **Congregate Nutrifair Programs** at (4) current locations and strengthen OFA outreach and programming to participants by connection to Aging Services. Look at ways to increase participation at the sites with low attendance.
8. Maintain a high quality **volunteer program** by: A) Continue offering volunteer opportunities including the need for new Ombudsman volunteers; B) Maintain a volunteering database to utilize our volunteers to the best of their abilities. C) Maintain a countywide database with

other community agencies volunteering opportunities if OFA does not meet the need the volunteers are looking to do.

OFFICE FOR THE AGING TOTAL BUDGET SUMMARY

Appropriation	Actual 2011	Original 2012	Adjusted 2012	Proposed 2013
Salary	\$439,177.66	\$376,365	\$376,365	\$352,278
Equipment/Capital	\$2,535.32	\$1906	\$1906	\$1973.49
Contractual	\$604,391.03	\$585,696	\$586,268	\$623,646.47
Employee Benefits	\$213,169.69	\$206,467	\$206,467	\$172,743
Total Appropriations	\$1,259,273.70	\$1,170,434	\$1,171,006	\$1,166,403
Revenue	\$1,177,948.50	\$1,093,176	\$1,093,176	\$1,029,934
County Support	\$81,325.20	\$77,258	\$77,830.48	\$136,469
FTE's	13.75	10.5	10.5	9.5

2013 BUDGET HIGHLIGHTS

1. Salary/Fringe Major Changes: Net decrease of **-\$57,811** resulting from:
 - a. **Decrease of \$24,087 in Personnel Costs** from the 2012 adopted budget which includes reduction of full time Personal Care Aide position to a part time Personal Care Aide.
 - b. **Decrease in Fringe Costs of \$33,724** due to reduction in staff listed above.
2. Contractual Program Operation Major Changes: Expenses in 2013 are projected to increase by **\$40,539**. Major changes include:
 - a. Nutrition program has increased by \$31,149 due to increase in number of participants for Home Delivered Meals and Congregate Meals.
 - b. \$3261 budgeted for Homemaker Services; this contract is only utilized when we cannot directly serve a client.
 - c. \$2000 decrease for medical transportation services contracted to Community Action (CATS); \$300 increase in OTS bus passes.
 - d. Travel (-\$911) and training (-\$1,100) has been significantly reduced for most OFA staff, except as required and paid by various OFA grants. Most other general operating expenses – office supplies, postage, copier, phone, printing, mileage, etc. have also been reduced based on less funding to operate these programs in 2012.
3. Revenue Major Changes: Overall decrease of **\$35,601**
 - a. State funds total \$492,919, a net increase of \$18,134 primarily due to reductions in several state grants and slight reduction in 2012 actual allocations, offset by placing the NY Connects grant directly into OFA budgets, (increase of \$43,289), instead of through DSS as has been done with previous NY Connects funds. Revenue losses include Community Services for the Elderly Program, -\$2,510 and Expanded In-Home Services for the Elderly Program, -\$21,825; and in Recreation CSI grant, -\$810.
 - b. Federal funds total \$258,841, a net decrease of \$20,447. Due to decrease in NSIP funding (-\$2,220), MIPPA/ADRC (\$13,500) and loss of WRAP (\$27,435) revenue.
 - c. Other revenue total \$298,690, a net decrease of \$28,345. Changes include additional new grant from P2 Collaborative (\$2,000); loss of rent from Independent Living of Genesee Region (\$2,400); loss of grant from Community Health Foundation (only 1

year grant -\$8,000). Decrease in Lifeline revenues (-\$5,043). Increase in funding from Long Term Home Health Care Program (for Meals on Wheels - \$12,769) and additional client contributions (\$10,675); decrease in in-kind or indirect revenue (-\$7,125).

- d. Net County Support is used for matching funds for OFA grants which require a county match in order to draw down the funds: \$136,401 in net county funds are projected, an increase of \$58,571. County funds would provide 11.5% of the overall OFA budget, with 79.6% coming from grants and 8.9% from participant contributions.

INDICATORS: ALL OFA SERVICES

I. Information & Assistance	Actual 2011	Estimated 2012	Estimated 2013
Information & Assistance Contacts	5,141	6,238	6,400
Friendly Carrier Newsletter Circulation	23,724	24,000	24,000

II. Client Demographics	Actual 2011	Estimated 2012	Estimated 2013
Clients Served			
All Programs	3,001	3,602	3,900
% Orleans Co. Seniors Served(60)+	35%	42%	46%

Client Demographics	Actual 2011	Estimated 2012	Estimated 2013
Clients Served			
Age 75 & Above	1,153	1,564	1,600
Frail/Disabled	1,069	1,486	1,650
Lives Alone	938	1,090	1,150
Low Income	914	1,084	1,120

Orleans County Office for the Aging
For Clients Served April 2011 – March 2012

<i>Program Name</i>	<i>Brief Description</i>	<i>Funding Sources</i>	<i>Clients Served</i>	<i>Units provided</i>	<i>Total Cost</i>	<i>Cost/unit/yr</i>
Info and Assistance	This can be from simple telephone call to lengthy discussion on benefit counseling or options to remain independent	IIIB, CSE, Lifeline, SNAP	2065 clients	5141	\$192,925	\$37.53
Caregiver	Assists caregivers (local and long distance) with caring for Orleans County loved ones to help them remain independent as long and as safely possible	IIIB, IIIE	201 clients	987	\$29,192	\$29.58
HEAP	Assists clients with receiving HEAP benefit – helps seniors stay in their own homes. They can then buy groceries or prescriptions	HEAP (DSS)	689 clients	806 apps	\$17,500	\$21.71
Lifeline	Personal Emergency Response systems in clients homes – in addition when OFA staff install units, looking for safety issues to prevent falls, which prevent hospitalizations and then potential nursing home placements	Medicaid (minimal), Emma Reed (local foundation), Long Term Home Health Care Program (part of Medina Hospital) and clients/families (major source)	363 clients	3408 units	\$56,964	\$16.71
Health Insurance Counseling	Answering moderate to complex phone calls but mostly one-on-one counseling that on average lasts 45 minutes to an hour. Again saving clients money to help them remain in their own homes and/or getting them coverage so they remain healthy and off of Medicaid	HIICAP, MIPPA, MIPPA/ADRC	354 clients	725 hours	\$54,584	\$75.29/hr

Orleans County Office for the Aging
For Clients Served April 2011 – March 2012

<i>Program Name</i>	<i>Brief Description</i>	<i>Funding Sources</i>	<i>Clients Served</i>	<i>Units provided</i>	<i>Total Cost</i>	<i>Cost/unit/yr</i>
Case management	Case Management is a comprehensive process that helps clients gain access to and coordinate appropriate services, benefits and entitlements through a process of assessment and reassessment, care planning, arranging for services, follow-up and monitoring, and discharge.	EISEP	89 clients	1714 hrs	\$93,234	\$54.40/hr
Non Case Management	Help seniors who need assistance managing activities of daily living access the services and resources they need. Ex. Home Delivered Meals Program, Non EISEP Case Managed Clients	SNAP, CSE, IIIB	212 clients	438	\$21,584	\$49.28hr
Programs at Nutrifair Sites/Exercise Classes	Services and activities designed to promote good health through a better understanding and awareness of current issues in health care, participation in activities to maintain physical and mental health	IIID, Health Dept, CSI	250 clients	1708 clients at 132 programs	\$15,285	\$8.94/participant
Ombudsman	Certified volunteers and staff visit assigned nursing or adult homes each week, responding to concerns and questions of residents.	LTCOP, V, IIIB	420 Nursing home and Adult Care Facility Beds	726 hours in facilities	\$14,200	\$19.56/hr
Home Delivered Meals	Provides nutritionally balanced meals, 5 weekly regular meals, delivered 5 days to approximately 70 clients	SNAP, C2	212 clients	30,370 meals	\$272,221	\$8.96/meal
Congregate Meals	Provides senior dining sites at 4 locations in the county serving a noon meal and socialization for clients	C1	398 clients	11,863/ meals	\$96,423	\$8.13/meal

Orleans County Office for the Aging
For Clients Served April 2011 – March 2012

<i>Program Name</i>	<i>Brief Description</i>	<i>Funding Sources</i>	<i>Clients Served</i>	<i>Units provided</i>	<i>Total Cost</i>	<i>Cost/unit/yr</i>
Dietician Services, Nutrition Education	Provides the services kitchen monitoring, nutrition education, nutrition counseling, program evaluation and nutritional analysis oversight	C1, SNAP	123 clients	395 hrs	\$13,175	\$33.35
Transportation CATS OTS	CATS - Provide medical rides to non-Medicaid seniors within and outside of Orleans County. OTS - provide free passes for seniors to grocery shop and other miscellaneous appointments.	IIIB, CSE	119 clients	2921 3363	\$32,616 \$1400	\$11.17/ride \$2.42/pass
Legal Services	OFA required to provide legal services to seniors for issues as long term care planning, housing and other advocacy issues	IIIB	42	208 hours	\$6000	\$28.85/hour
Volunteer	Volunteer services are utilized in many capacities including meals on wheels drivers, transportation drivers, meal site helpers, newsletter assembly, advisory council members, Long Term Care Council members, clerical, telephone reception and assistance with special projects.		51 volunteers	828 hours		
Farmer Market Coupons	\$20 coupons to income eligible seniors to be used at Farmer's Markets	SNAP	620	620	\$12,400	