I. **Collocation:** Section 430.2053, F.S. and ADRC Contract

Section 430.2053(1)(g), F.S.: Enhance the existing area agency on aging in each planning and service area by integrating, either physically or virtually, the staff and services of the area agency on aging with the staff of the department’s local CARES Medicaid preadmission screening unit and a sufficient number of staff from the Department of Children and Family Services’ Economic Self-Sufficiency Unit necessary to determine the financial eligibility for all persons age 60 and older residing within the area served by the aging resource center that are seeking Medicaid services, Supplemental Security Income, and food assistance.

Briefly describe the current physical or virtual ADRC/CARES/DCF collocation model for all counties in the PSA, including any satellite offices if applicable. Also, describe any planned adjustments to the current model to more efficiently fulfill the responsibilities of the ADRC in the new Statewide Medicaid Managed Care Long-Term Care (SMMC LTC) Program.

**PSA 5 Response:** In Pasco County we have physical co-location with the CARES Unit and virtual co-location in Pinellas County. The AAAPP is in constant communication with both of the CARES Units via email and telephone to address eligibility issues and questions. Additional meetings are held with CARES Units 5A and 5B as needed to facilitate our continued partnership. Common email boxes for both CARES and the AAAPP are utilized which streamlines and enhances communication.

Currently PSA 5 is virtually co-located with DCF in both counties. Communication between AAAPP Directors and DCF management has decreased in the past year, although ADRC staff do communicate with DCF workers regarding individual clients. A number of factors have influenced this, including a change of staff in DCF ESS management and increased workload for the DCF ESS supervisors. Communication is especially critical due to the roles that the ADRC and DCF have in the Statewide Medicaid Managed Care Long-term Care Program (SMMCLTCP). (See IIIA below) The AAAPP’s Intake email box is also utilized by DCF Under 60 and APS staff to communicate Under 60 clients who are on the CCDA/HCDA waitlist and also need to be added to the SMMC LTCP waitlist, as well as to send APS Intermediate and Low Risk referrals. The centralized email box allows all AAAPP ADRC staff access to the referrals and better distribution of workload.

Both DCF and the CARES Unit are invited to our semi-annual ADRC Workgroup.

Semi-annually PSA 5 hosts a meeting with DCF, PSA 6, PSA 8, and the CARES Unit Regional Director to enhance our regional relationships, share best practices and develop efficiencies.
II. Local Coalition Workgroup: Section 430.2053, F.S. and ADRC Contract

The Contractor shall convene a local coalition work group to advise in the planning, implementation and evaluation of the ADRC. The local coalition work group shall consist of representatives from agencies and organizations serving elders, persons with disabilities and caregivers. The work group shall also include Alzheimer’s Association chapters, housing authorities, Serving Health Insurance Needs of Elders (SHINE) volunteers, local government, and selected community-based organizations, including social services organizations, advocacy groups and any other such individuals or groups as determined by DOEA.

Briefly describe the current composition of the Local Coalition Workgroup, including any planned adjustments to the current composition. Attach the following documents:

1. Current Local Coalition Workgroup (LCW) roster and identify each person’s role as it relates to the above requirements;
2. If there is not full representation on the current roster, include a plan to recruit persons to ensure compliance with the requirements as set forth in Section 430.2053(1) (f), F.S.;
3. LCW 2014-2015 meeting schedule, including planned agenda items, i.e., the ADRC’s role and responsibilities in the planning, operation and evaluation of SMMC LTC; and
4. Minutes of LCW meeting indicating participation in development and approval of 2014-2015 AIP.

PSA 5 response:
1) The current ADRC Workgroup roster is attached as a separate document with each person’s role identified.
2) There is full representation on the current roster, as set forth in Section 430.2053.
3) For the last five years, the AAAPP has been holding ADRC Workgroup meetings twice a year, once in the spring and once in the fall during a calendar year. There has never been a fixed date for the meetings, rather we would notify workgroup members
approximately six weeks prior to “hold the date”. For 2014-2015, the meetings will be held in the month of November or December, and then in April or May of 2015. Planned agenda items for the two meetings in FY 14-15 will be: SMMCLTC; legislative issues; program education reports; Annual Program Improvement Plan/Progress Reports; Customer Satisfaction Surveys conducted by AAAPP; Helpline Updates; ADRC Partner Reports; funding changes; and DOEA priorities.

4) The AAAPP present the APIP along with pertinent progress reports at every ADRC Workgroup meeting, allowing the opportunity for workgroup input/feedback throughout the state fiscal year. (see attached minutes for the two Workgroup meetings during FY 13-14. Workgroup participation in the 14-15 APIP was not gathered via a meeting. Rather, we sent the draft Plan to the Workgroup on June 19th for their feedback and comments, providing them a week. Comments received from Workgroup members were received and reviewed by multiple ADRC staff for possible inclusion and/or editing of our Plan. Following that period, the Plan was finalized and then submitted to DOEA on June 30, 2014. Documentation of comments received is maintained at the ADRC offices.

III. Obstacles or Challenges and Performance Improvement Goals:

ADRC Performance
Briefly describe the LCW’s role in planning, implementation and evaluation. Identify specific obstacles/challenges, performance improvement goals and action steps to implement and evaluate the performance goals established by the LCW. Include a timeline for completion of each action step.

A. Medicaid Eligibility –
Obstacle/Challenge: The AAAPP continues to track EMS releases through the eligibility process and evaluate the efficiency of the process. With the implementation of SMMCLTCP, tracking has changed and new processes have been implemented at the ADRC.

Performance Improvement:
1) The AAAPP will work with the ADRC Workgroup to share how the process is working and identify ways to improve performance.
   Timeline – December 2014

PSA 5 Interim Progress Report – January 2015:
The AAAPP has held one ADRC Workgroup Meeting thus far during the FY 14-15. It occurred on December 4, 2014. Highlights of topics on the agenda included LGBT Elders, Update on SMMCLTC, Helpline & Intake Process, Annual Improvement Plan, Customer Satisfaction Surveys, and targeted outreach. Minutes of the December meeting will be included with the final Progress Report.

PSA 5 Interim Progress Report – January 2015:
During the ADRC Workgroup meeting on December 4, 2015, the ADRC tracking system was reviewed including the tracking of cases from release to either active or termination status, as well as analysis of the time it takes DCF to process cases and total days the entire eligibility process takes. Comments and feedback were welcomed to improve the eligibility process.
2) The ADRC will reach out to the upper level managers at DCF ESS and will ask to meet with them on a regular basis to facilitate our partnership and our joint work on SMMCLTCP.  

**PSA 5 Interim Progress Report – January 2015:**
The AAAPP/ADRC continues to communicate with DCF/ESS upper level managers and supervisors regarding eligibility issues and the overall process. DCF/ESS upper level managers did attend the September 25, 2014 DCF/ESS, CARES, PSA 6, PSA 8 and PSA 5 meeting. In addition, upper level managers attended the December 4, 2014 ADRC Workgroup meeting. Now that AAAPP Directors have met the new DCF ESS management team, increased communication has been established with Daniel Benoit, Operations Management Consultant (OMC). Communication with supervisors about individual cases continues to be an important link in resolving issues and their support is appreciated. The ADRC/AAAPP will continue to communicate with DCF/ESS to facilitate our partnership and work on SMMCLTCP.

B. Access –
Obstacle/Challenge: With the implementation of SMMCLTCP, the AAAPP/ADRC is now the entry way to the waitlist for those aged 18 and up with a disability in addition to the programs the AAAPP has historically served. The AAAPP is challenged to ensure appropriate outreach is completed to communicate the information regarding the Helpline and the programs/consumers we serve.

**PSA 5 Interim Progress Report – January 2015:**
During the time period, July 2014 to December 2014 outreach has been conducted to ensure the community is aware the AAAPP/ADRC is the entry way to the waitlist for those aged 18 and up with a disability in addition to the programs the AAAPP has historically served. Outreach has been conducted at a variety of places including, hospitals, social service agencies, health fairs, and during the December ADRC Workgroup meeting.

Performance Improvement:
1) Information will be shared with the Workgroup regarding the Helpline as the point of access for the ADRC. Members will be asked to assist with outreach within their professional arena and will receive written information that they can distribute in the community. Discussion regarding opportunities for targeted outreach will also be promoted with the Workgroup.  
Timeline – December 2014

**PSA 5 Interim Progress Report – January 2015:**
During the December 4, 2014 ADRC Workgroup, the Helpline/Intake process was reviewed including the Helpline being the point of access for the ADRC. Outreach materials were provided to the workgroup for further distribution in the community.
2) All programs at the AAAPP such as SHINE and SMP do outreach for the entire agency including the Helpline and ADRC. The ADRC has limited the amount of outreach done by ADRC staff in order to comply with the DOEA timeliness requirements for Helpline response, 3 day contact for screening requests, and up-to-date annual re-screening. If workload/timeliness permits, one ADRC staff person in Pinellas and one in Pasco will do one targeted outreach event per quarter, including the ideas discussed with the Workgroup.

Timeline – September 2014 – June 2015

**PSA 5 Interim Progress Report – January 2015:**
ADRC staff completed outreach in both Pasco and Pinellas counties during July 2014 to December 2014. Outreach was conducted at hospitals, social service agencies, Ombudsman meetings, and health fairs. Outreach efforts will continue to improve community access to services.

IV. Customer Satisfaction Surveys:

Briefly describe the ADRC’s process for assessing customer satisfaction, including random sampling survey tools, frequency and methods. Explain how the ADRC plans to use survey data to improve performance of ADRC functions. Also explain involvement of the LCW in this effort.

**PSA 5 response:**
The AAAPP continues to distribute client satisfaction surveys to a random sample of clients to determine program evaluation for the selected programs being surveyed. The AAAPP also surveys all staff for workplace evaluation. Timelines for administering the surveys vary:

- The Helpline survey is completed on an ongoing basis throughout the year.
- A sample of clients receiving case managed programs (CCE, ADI, HCE) will be surveyed every 2 years, and will be done in FY 14-15.
- A sample of clients in two selected OAA programs will be surveyed every 2 years (on alternate fiscal years from the case managed programs) and will next be done in FY 15-16.
- AAAPP staff complete a survey about workplace conditions every 2 years. It was completed in 2014 and will next be completed in 2016-2017.
- Beginning July 1, 2014 the AAAPP will use the SMMCLTCP Program Quality Assurance Customer Satisfaction Survey that is part of the F4A quality assurance procedure. This survey is to be completed for a sample of clients who receive LTC education and screening and re-screening functions.
Data from each survey is reviewed by appropriate AAAPP staff to see if there are changes that can be made to improve the area being surveyed.

All surveys will include written reports to be submitted to DOEA no later than July 30, 2015. Additionally, the finalized reports for OAA and the Case Managed Programs are sent to the Providers of those services so they may use the data appropriately.

Written reports summarizing the findings of each survey, except the staff survey, will be provided to the Workgroup. Identifying information will not be included in the reports to the Workgroup. Lessons learned and changes made due to survey results will be discussed.

**PSA 5 Interim Progress Report – January 2015:**
- The IIIIE Caregiver program survey of active clients is conducted annually and in October. As usual, the final report will be submitted to the LCW for review and commentary. For 2014, satisfaction with services remains high, although our return rate was lower than years past. The final survey report is included with this AIP report submission. In October of 2015, we will investigate various ways to increase the return rate.
- Surveys were conducted for active CCE, ADI and HCE clients in September 2014. The final survey report, detailing the overall results, is included with this AIP report submission.

V. **Progress Reporting:**

The Interim Progress Report for the 2014-2015 AIP is due January 30, 2015 and must include progress toward goal attainment for each identified performance improvement goal in Section III.

The Final Progress Report for the 2014-2015 AIP is due July 31, 2015 and must include the status of each goal as identified in Section III. The Final Progress Report will also include the Customer Satisfaction report. The Customer Satisfaction report will include a narrative description of the process, tools, results and how the results are used to improve ADRC services.

The AAAPP acknowledges the reporting responsibilities and due dates as stated above.

**PSA 5 Interim Progress Report – January 2015:**
The AAAPP’s Interim Progress Report will be submitted by January 30, 2015 per DOEA/AAAPP ADRC Contract.