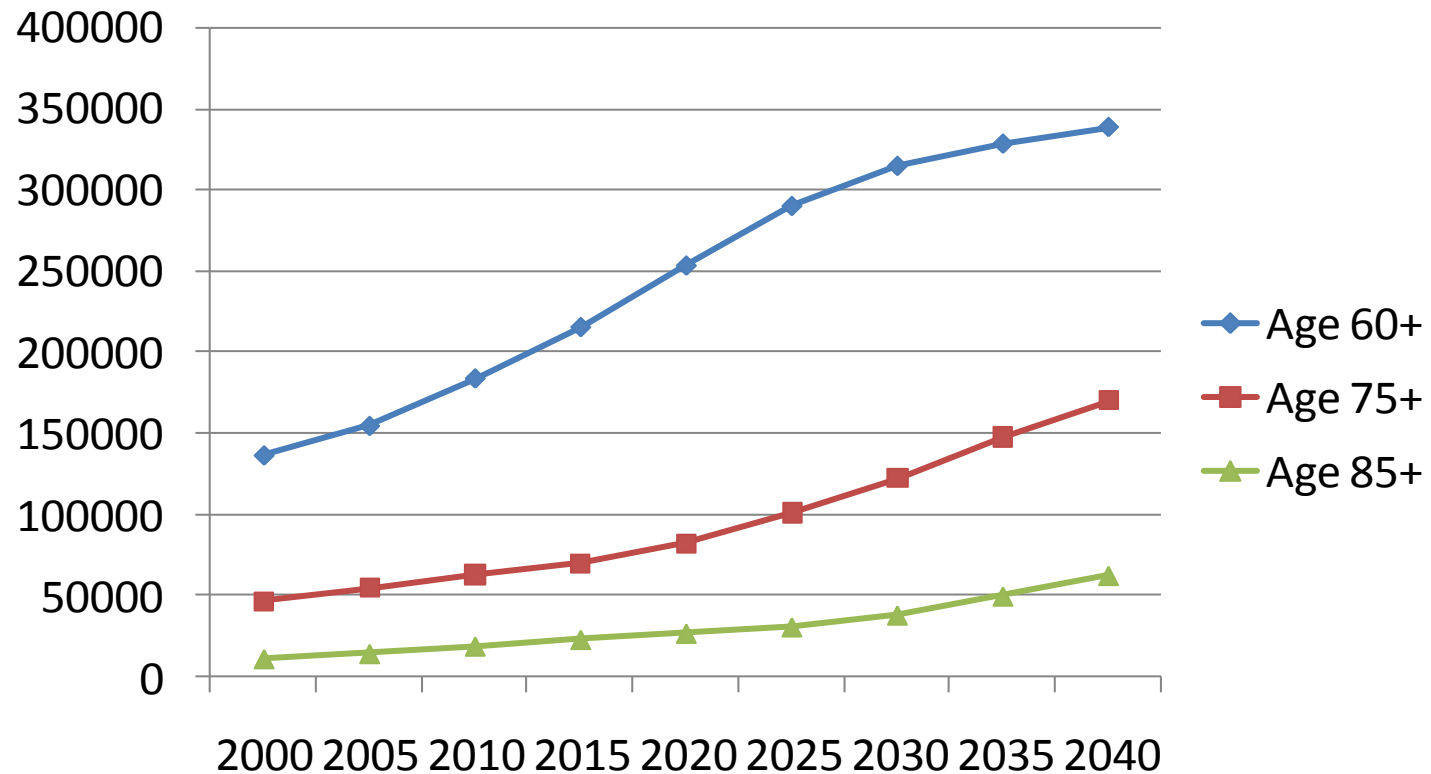


Division of Services for Aging and Adults with Physical Disabilities
Delaware Aging and Disability Resource Center
ADRC

ADRC
Role in Transforming Long Term Care
& Navigating the System



Population Growth



The size of the age 60+ population began to spike dramatically around 2005 and will continue to expand steadily for the next 20 years. The age 75+ population will climb noticeably by the year 2015. The “oldest old” population, age 85+, most in need of critical care services, will nearly double between 2005 and 2020, then double again by 2040. By 2030, Delaware is projected to have the 9th highest proportion of persons aged 65+ among all states.

Long Term Care Expenditure Patterns

- in Delaware...

Costs for
institutional
care →



← Community
care costs

About 87.5 % of long-term care dollars for aging and physical disabilities are spent in facilities.

- in the US...

Costs for
institutional
care →



← Community
care costs

About 66 % of long-term care dollars are spent in facilities.

Delaware ranks 38th among all states in the percentage of long-term care dollars spent on home and community based services.

What do People Want?

- Long term care services that allow them to remain in their own homes – aging in place (survey after survey confirms this)
- Their independence – fear of losing their independence stronger than their fear of death
- More options, choices, and control
 - a) What services are provided
 - b) Where services are provided
 - c) Who provides them
 - d) How they are provided



Americans with Disabilities Act

- Passed by Congress in 1990 – prohibits discrimination on the basis on one’s disability
- Federal Government has a central role in enforcing the law’s standards
- 54 million Americans, nearly one in every five, have a disability that meets the standard for coverage under the ADA

The Olmstead Decision

- Two women with disabilities institutionalized in a facility in Georgia for many years despite their requests for transition
- Treatment professionals had indicated the needs of each could be supported in the community
- Filed lawsuit against Georgia under provisions of the ADA
- Supreme Court ruled in 1999: public agencies must provide services in the most integrated setting appropriate to individual needs and consistent with one's choice for setting
- State must make modifications in policies and practices if necessary to avoid discrimination on the basis of disability



Building Access to Community-Based Services

- **Increased emphasis on Care Transitions activities**
 - Money Follows the Person & Nursing Home Transition programs
 - Aging & Disability Resource Center (ADRC)
 - Pre-admission Screening - facilitating access to community-based services
- **Addressing housing barriers**
 - \$1.5 Million for additional housing vouchers in FY2012 Budget
 - Housing casework services
- **Partnerships with hospitals (discharge planning)**
- **Diamond State Health Plan Plus**
 - Increase access to community-based long-term care services

LTC System Challenges

Fragmented

Institutional bias

Lacks focus on consumer

Confusing

Increase in population = \$\$\$\$\$

ADRC Reform Strategy



Meeting the Challenge



... develop and implement person-centered information systems, options counseling, and coordinated access – to help people navigate health and long-term care systems

← Aging and Disability Resource Centers

LTC Reform History

1963 – Developmental Disabilities Assistance & Bill of Rights Act

1973 – Rehabilitation Act

1990 – Americans with Disabilities Act (ADA)

1999 – *Olmstead* Decision

2001 – New Freedom Initiative (NFI)

2003 – Aging and Disability Resource Centers

2006 – Older Americans Act Reauthorization

2007 – Community Living Program

2008 – Veterans-Directed HCBS

2009 – Year of Community Living

2010 – Health Care Reform



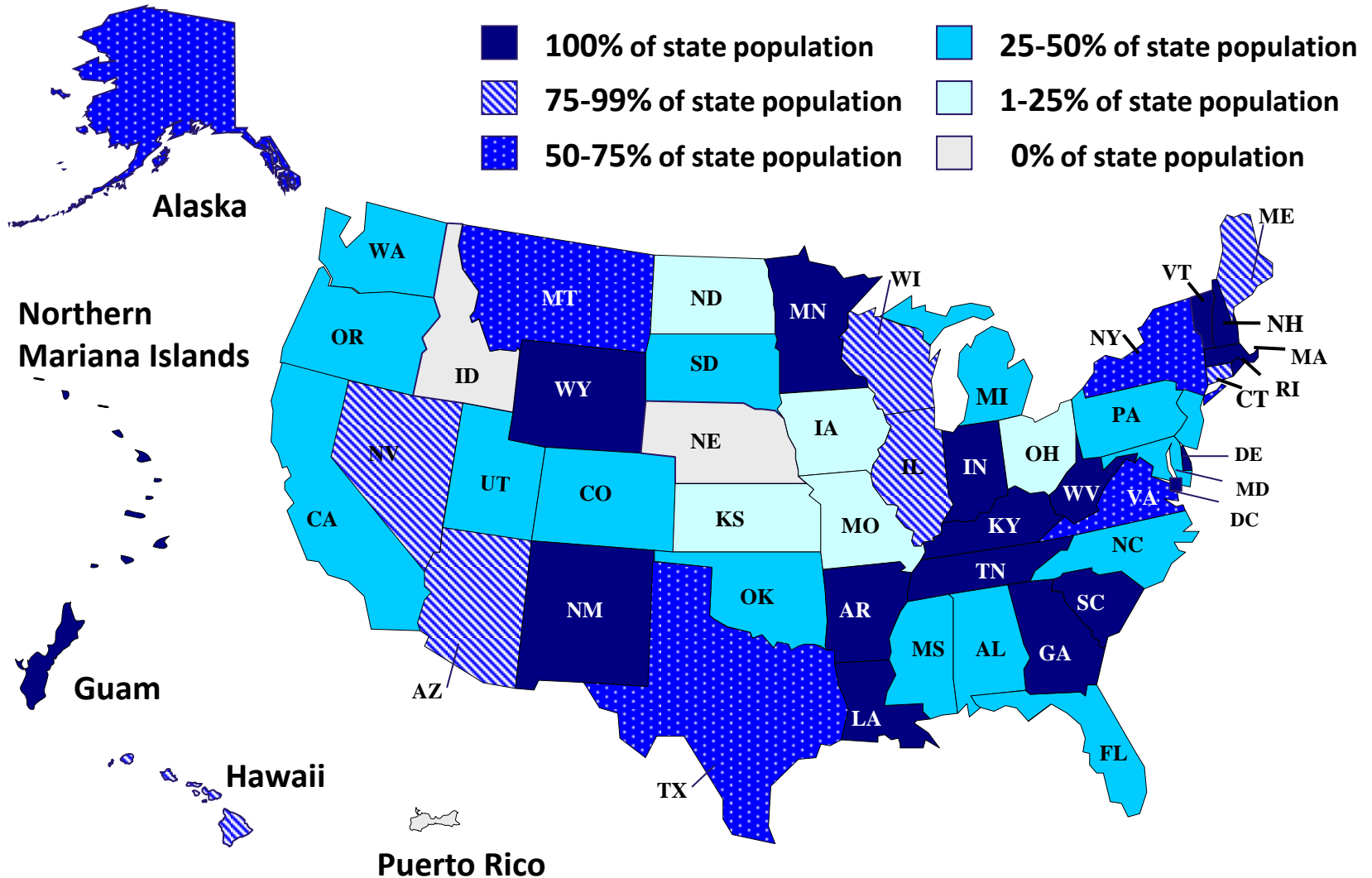


National ADRC Initiative: Background

- The development of Aging and Disability Resource Centers (ADRCs) is a joint initiative of the Administration on Aging (AoA) and Centers for Medicare and Medicaid Services (CMS)
- The national initiative began in 2003
- ADRCs serve as single points of entry for LTC information & support services
- ADRCs coordinate and provide linkages to the vast network of aging & disability service providers
- ADRCs are the cornerstone for LTC reform and rebalancing efforts
- All states now have at least one ADRC – nationwide network



ADRC Coverage as of September 2011





ADRC

National Vision

Aging and Disability Resource Centers...

every community in the nation

highly visible and trusted

people of **all incomes and ages**

information on the **full range** of long term support options

single point of entry for **streamlined access** to services





Aging & Disability Resource Center: Core Components

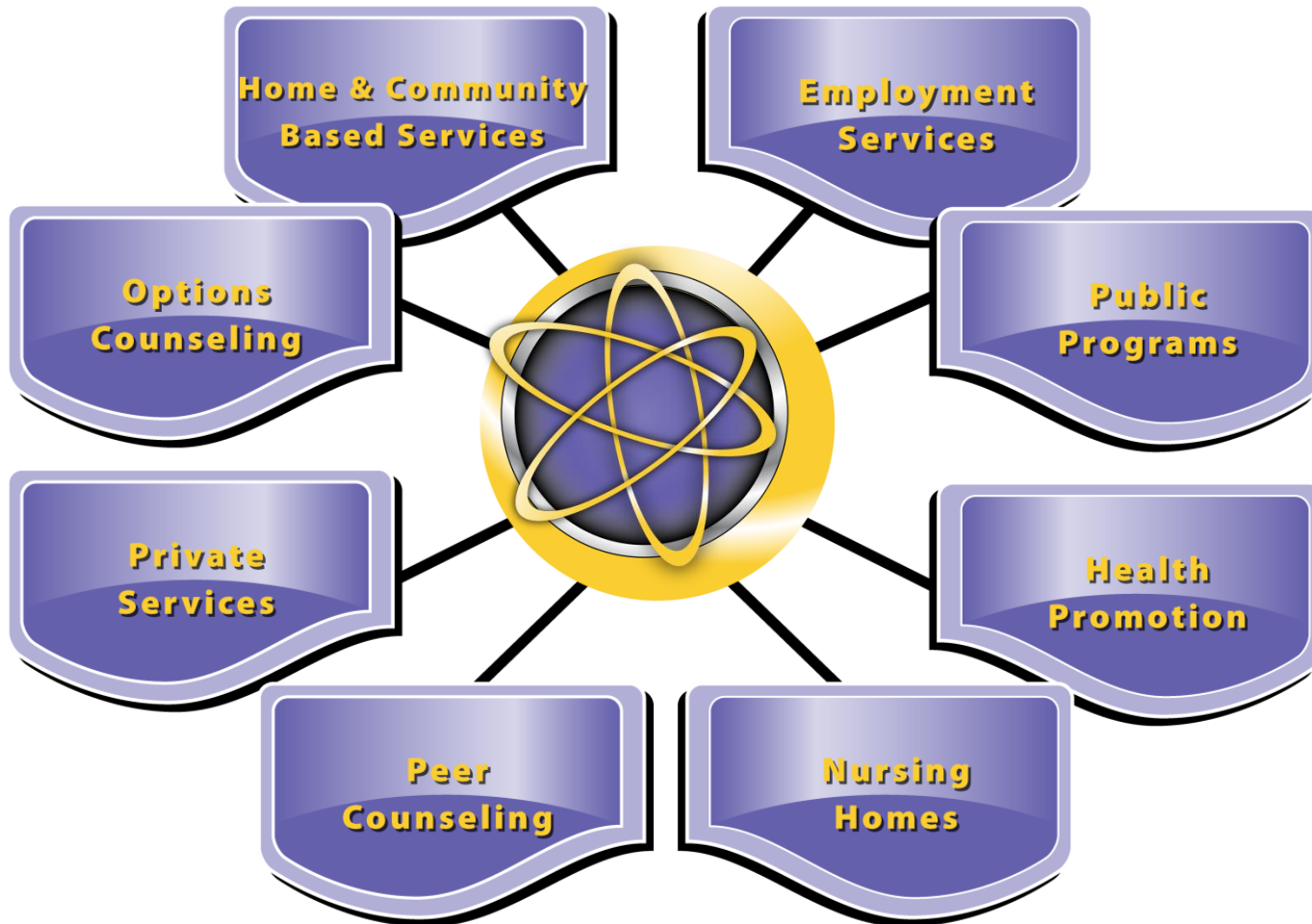
5 Core Components:

1. Information and Awareness/Referral
2. Options Counseling
3. Streamlined Access to Public Programs
4. Person-Centered Hospital Discharge/Care Transition Planning
5. Quality Assurance and Evaluation

Goals: Awareness Access Assistance



Partnerships – Critical for ADRC Activities





What's Different About ADRCs?

- All populations and income levels served
- Seamless system from consumer perspective
- Integration of/coordination across aging, disability, Medicaid service systems
- Formal partnerships
- High level of visibility and trust
- Options Counseling
- Proactive intervention into LTSS pathways



ADRC is More a Process than an Entity

- Moving from experts working in isolation to partnerships, co-location, coordination, routine communication, cross-training
- Moving from focus on eligibility & offering set menu of services to a proactive consumer oriented approach, intensive outreach to individuals of all ages & income levels, comprehensive options counseling
- ADRCs are not about replacing existing organizations & networks. They're about building a better, more coordinated network. *It's all about the Network*





Delaware ADRC: Overview

- DE's Division of Services for Aging and Adults with Physical Disabilities (DSAAPD) received a 3-year grant in October 2009 from the Administration on Aging (AoA) to develop and implement a statewide ADRC.
- DSAAPD, together with an array of partners, launched the Delaware ADRC in October 2010.
- The Delaware ADRC now operates as State's *one-stop access point* for information and services for older persons and adults with physical disabilities.
- Delaware is one of only 15 states with a statewide ADRC.



Delaware ADRC Highlights

- *Guide to Services for Older Delawareans and Persons with Disabilities* – Statewide resource directory in English & Spanish, available in print and on the web
- *ADRC Call Center* (operated by DSAAPD staff), available Monday through Friday from 8:00 AM to 4:30 PM to answer questions and provide information (*Coming Soon - 24/7 Access*)
- *ADRC website & searchable database:* www.delawareadrc.com
- *ADRC Support Services* (Options Counseling, Service Enrollment & Person-Centered Transition Support) provided by contractors on behalf of DSAAPD)
- *ADRC Online Referral Process* for streamlined access to ADRC
- *Partnerships* – coordination & linkages to Delaware's aging & disability partners & services network

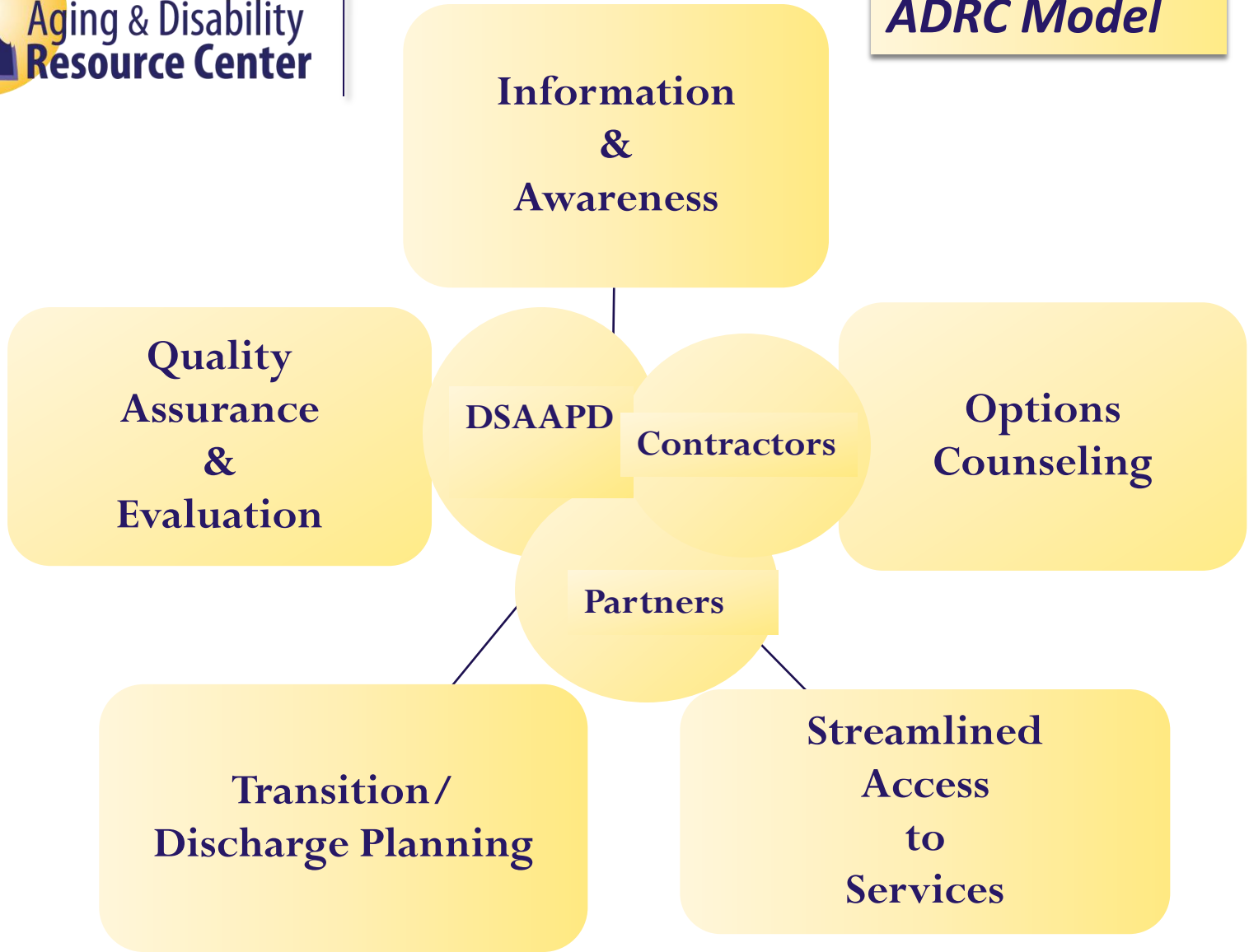


Delaware ADRC: *Lead Partners*

1. Division of Medicaid & Medical Assistance (DMMA)
2. ELDERinfo, DE State Health Insurance Assistance Program (SHIP)
3. Freedom Center for Independent Living, Inc. (CIL)
4. Independent Resources, Inc. (CIL)
5. Delaware Aging Network (DAN)
6. Christiana Care Health Services (CCHS)
7. State Council for Persons with Disabilities (SCPD)
8. Governor's Advisory Council for Aging & Adults with Physical Disabilities



***Delaware
ADRC Model***



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ADRC Support Services: Description

ADRC Support Services: Core Functions of ADRC

- 1. Options Counseling** – Person-centered, “*face-to-face*” assistance with evaluating, discussing, identifying, &/or clarifying long term support options, needs &/or preferences. Defined as “*one-on-one*” *decision-support*.
- 2. Service Enrollment Support** - Assistance with locating &/or accessing long term services and supports in the community. Includes public &/or private support services
- 3. Person-centered Hospital Discharge/Care Transition Support**



ADRC Support Services: *Purpose & Value*

Why ADRC Support Services?

- Institutional placements may occur without full consideration of available community-based options.
- Lots of information is available in print and on-line, but it can be complex, contradictory, and confusing.
- Families often want individualized support making decisions about long-term care and support options.
- Few people plan ahead for long term support needs.

“Value-Added” services that expand the overall reach and scope of the ADRC



ADRC Support Services: About Contractor/Providers

- DSAAPD contracts with Jewish Family Services (JFS) for the provision of ADRC Support Services.
- JFS subcontracts with *Easter Seals*, *Modern Maturity Center* & *CHEER* to assist in the delivery of ADRC Support Services.
- Services are provided by the contractor/subcontractors as follows:

Persons aged 60+ New Castle Co.	Persons aged 60+ Kent Co.	Persons aged 60+ Sussex Co.	Persons w/disabilities statewide
JFS	Modern Maturity	CHEER	Easter Seals

- JFS coordinates all communication, referrals, billing, & reporting for ADRC Support Services on behalf of the subcontractors.



Delaware ADRC: Access & Referral Process

Referrals to the Delaware ADRC can be made by phone or online

By Phone via Call Center: Information & Assistance or referral for ADRC Support Service

Online referral process allows service providers & discharge planners to send an automated request for ADRC Support Services to the ADRC for further processing and authorization of service hours.

Referral form is located on the DSAAPD website

Referral process:

- Complete referral form & include referral source (name & email)
- Submit to ADRC for authorization and processing
- Submit to ADRC Support Service provider (JFS) for service delivery

HOME

- About DSAAPD
- Calendar of Events
- Contact Information
- Employment
- FAQs
- News & Media
- Office Locations
- Related Links
- Sections & Programs

SERVICES

INFORMATION

Welcome to the Delaware Aging and Disability Resource Center (ADRC)



The Delaware Aging and Disability Resource Center (ADRC) is a one-stop access point for information and services for older persons and adults with physical disabilities throughout the State.

Do you live in your own home and need assistance to continue living independently? Do you live in a nursing home but want to learn about other options? Are you being discharged from a hospital and need to find supportive care? Regardless of your living situation, the ADRC can help.

The Delaware ADRC can help you...

- Learn more about available resources
- Decide what services would be best for you
- Find the services that you need

The Delaware ADRC features...

- A comprehensive resource, the [Guide to Services for Older Delawareans and Persons with Disabilities](#)
- A call center with staff available to answer your questions and provide information
- A dedicated website to search for and locate services in your county (coming soon)
- ADRC Support Service staff to provide personalized assistance

Need help now? ADRC call center staff are on hand from Monday through Friday from 8:00 AM to 4:30 PM and are ready to assist you. [Contact the ADRC](#) by phone or e-mail to get started.

Attention Nursing Home Administrators and Staff: [Follow this link to submit an MDS 3.0 Section Q Referral to the ADRC](#)

Attention Hospital Discharge Planning Staff: [Follow this link to submit a Hospital Discharge Support Referral to the ADRC](#)

Click
appropriate
link.





Delaware ADRC: Local Contact Agency for MDS 3.0, Section Q

General Information about MDS 3.0, Section Q Referrals

- Delaware ADRC is designated as the **Delaware's LCA**
- Under the code of federal regulations **42 CFR 483.20** nursing facilities that participate in the Medicare or Medicaid programs must complete the Minimum Data Set (MDS) assessment of all residents admitted to a facility, including Section Q, which relates to possible transition to the community.
- Nursing facilities are required to complete Section Q in accordance with instructions from CMS.
- Responses to questions in Section Q determine whether a referral to the ADRC/LCA is required.

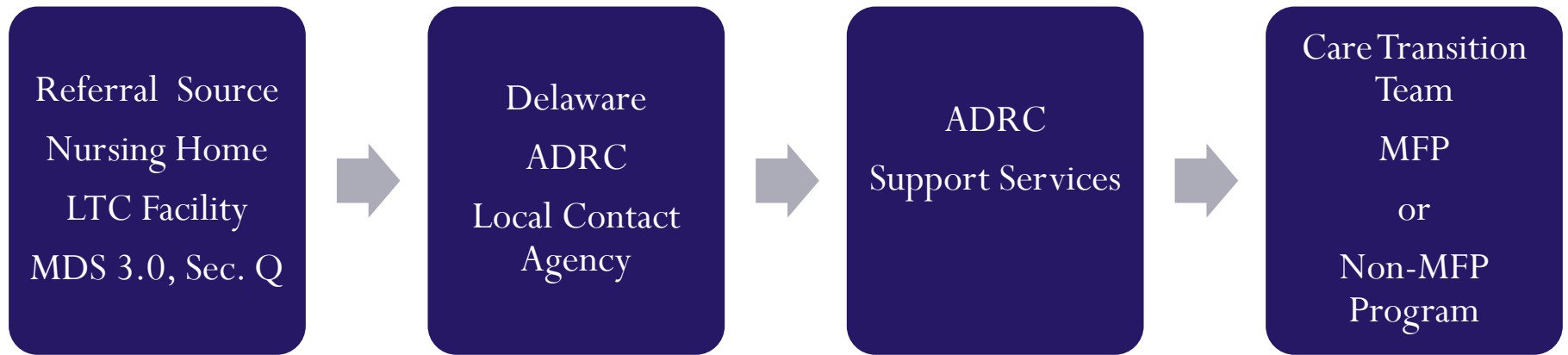


Delaware ADRC: Local Contact Agency for MDS 3.0, Section Q

- Nursing Homes are required by CMS to make a referral to the designated LCA for any resident who, in response to questions in MDS 3.0, Section Q, indicates that he/she wishes *to talk to someone about returning to community*.
- Providing information to individuals about home and community-based options and supports that are available to meet their preferences and needs, helps to ensure that those residents have choice and the opportunity to access the least restrictive setting appropriate for them.

Consider: Options Counseling & Service Enrollment Support

ADRC Referral Process & Transition Partners



**Individual
Guardian, Caregiver, Family**





Delaware ADRC/LCA: Process from Referral to Transition

Snapshot of Referral Process from NH/LTC facility to Transition:

- Referrals to the ADRC/LCA from nursing homes trigger an initial contact by the ADRC Support Service counselor.
- ADRC Support Service counselor contacts NH social worker (referral source), resident &/or caregiver & conducts a face-to-face interview to discuss support options & preferences. Administers Transition Assessment.
- Notifies Delaware ADRC and referral source with recommendations for transitions (or not).
- Based on resident's decision and assessment recommendations, a referral to the DSAAPD Care Transition Team will be made for transition assistance via Money Follows the Person or other state-funded transition programs.
- Transition readiness and planning activities continue with full engagement of resident/guardian, family and all members of the integrated care transition team.
- Transition & follow-up



ADRC Support Services

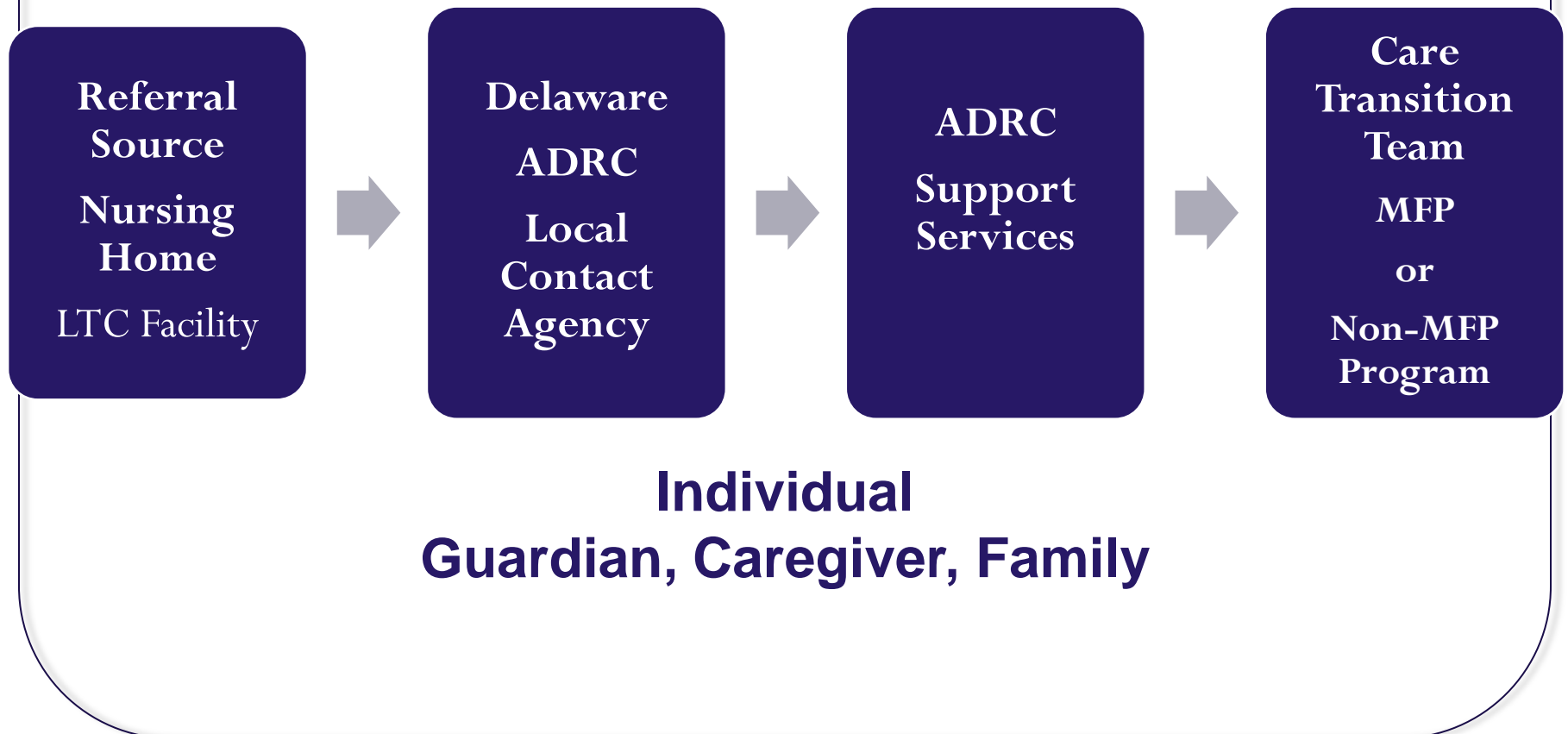
Sharon Dickol

Jewish Family Services



ADRC Support Service

Partners in the Transition Process



**Individual
Guardian, Caregiver, Family**



ADRC Support Services: About Jewish Family Services (JFS)

- A human services agency since 1896, serving individuals of all ages, religions and ethnicities throughout Delaware
- Dedicated Care Management services for older adults and persons with disabilities since 2005
- JFS employs 5 full-time care managers with degrees in social work, human services, mental health and gerontology (undergraduate and post-graduate degrees)
- JFS sub-contracts care management services with 3 other agencies in Delaware to effectively reach consumers throughout the state
- JFS works with the Delaware Aging Network, a consortium of 32+ member agencies serving older adults across the state
- Since January, ADRC Support Services has received 340 referrals from nursing homes/long-term care facilities, hospitals, and the community



ADRC Support Services: Overview

ADRC Support Services include:

- **Options Counseling:** Assisting individuals and families with evaluating, discussing, identifying, &/or clarifying long-term support options, needs &/or preferences
- **Service Enrollment Support:** Assisting individuals and families with locating &/or accessing long term support services
- **Hospital Discharge Support:** Assisting discharge/social work staff at Delaware's acute care hospitals

ADRC Support Services take place in the following locations:

- Acute care hospitals
- Long-term care facilities
- Community-based residences

ADRC Support Services are provided following requests to the ADRC from:

- Nursing home administrators
- Hospital social workers
- Social service agencies
- General public



Options Counseling:

What is Options Counseling?

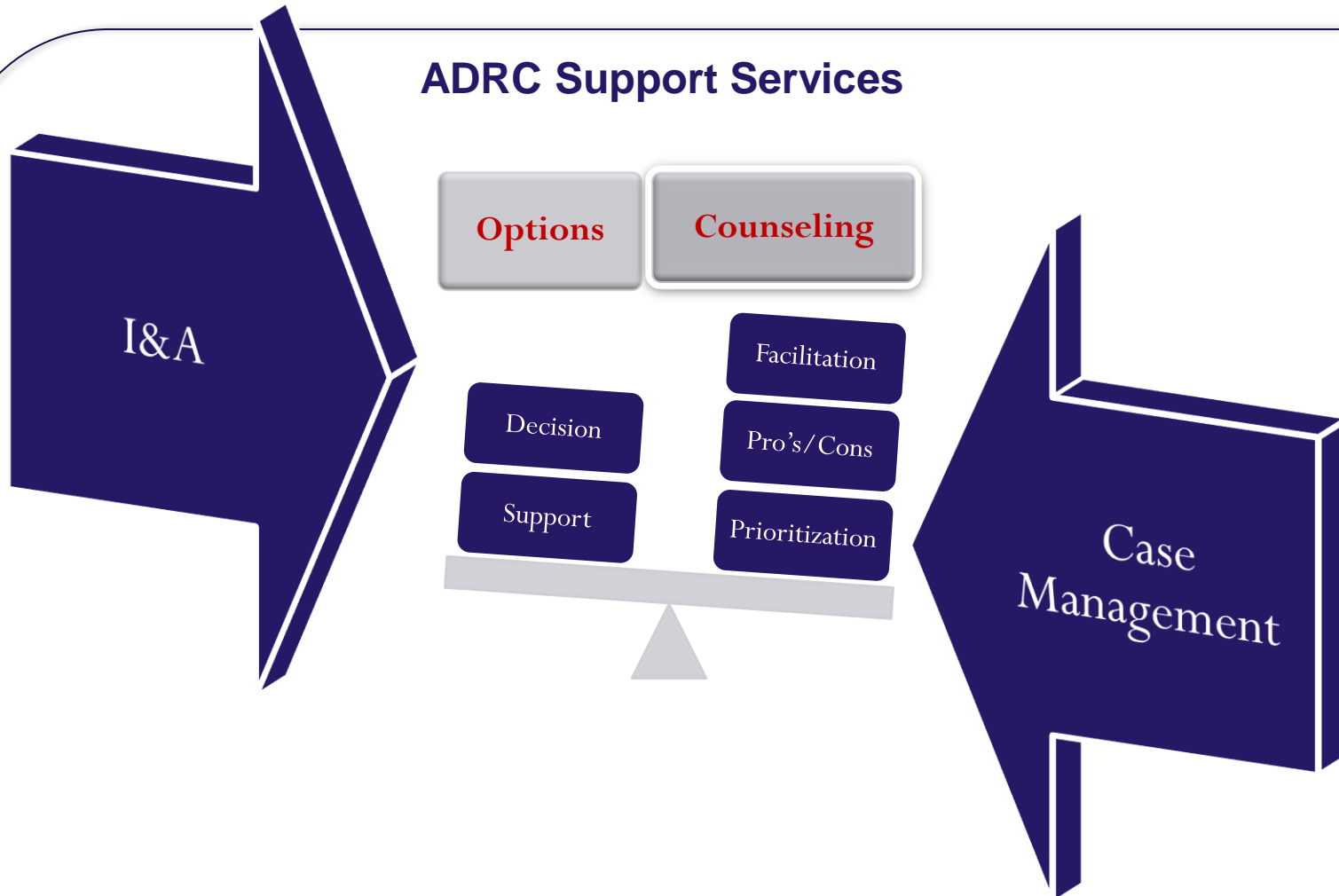
It is an interactive decision-support process whereby consumers, family members and/or significant others are supported in their deliberations to determine appropriate long-term care choices in the context of the consumer's needs, preferences, values and individual circumstances.



ADRC Support Services

Options Counseling: In the Middle

ADRC Support Services





ADRC Support Services: Snapshot of Process

Following a NH referral, ADRC Support Service counselors:

- Initiate contact with referral source and individual/resident
- Meet with the individual/resident, family caregiver, nursing facility &/or discharge staff
- Work with resident/guardian and decision-makers
- Identify individual's needs and preferences
- Assist and advocate – work with home and community-based service providers to help individual achieve service goals
- Continue to work with individual and service providers until goals are achieved or individual chooses to terminate services
- Report outcomes/recommendations to the ADRC and referral source following delivery of ADRC Support Services



Options Counseling: Service Delivery Process

Within 5 business days of a referral for Options Counseling, ADRC Support Service counselors will:

- Initiate contact with the facility social worker, individual resident, family &/or guardian
- Schedule face-to-face visit at facility
- Discuss options for community transitions
- Complete *Nursing Home Transition Assessment*
- Submit recommendations to DSAAPD/ADRC Care Transition Team for processing via Money Follows the Person or other transition program
- Assist individual with other issues as needed



Service Enrollment Support: Service Delivery Process

Within 5 business days of a referral for Service Enrollment Support, ADRC Support Service counselors will:

- Assist individuals with completing and submitting applications for Medicaid, SSDI, housing, etc.
- Assist with gathering support documentation required for applications
- Accompany individuals to application interviews when appropriate
- Serve as an advocate during the application process
- Provide services in any setting



Hospital Discharge Support: Service Delivery Process

Within 24 business hours of referral for hospital discharge support, ADRC Support Service counselors will:

- Contact hospital social worker, patient, family and arrange face-to-face meeting if appropriate.
- Identify issues which might present unique barriers to post-discharge service delivery, such as homelessness, substance abuse problems, mental illnesses, or other concerns.
- Meet with hospital social work staff, and, as appropriate, family members or other interested parties, to discuss post-discharge questions, issues, needs, options and preferences.
- As needed, coordinate with service providers to advocate for the delivery of needed post-acute care services.
- Contact patients following discharge to ascertain whether or not follow-up options counseling and/or service enrollment supports are needed.



To Make a Referral

Call the Delaware ADRC at

1-800-223-9074

or

Refer online at

<http://dhss.delaware.gov/dsaapd/adrc.html>



ADRC Support Services Staff: Available Statewide

Sharon Dickol, BS, CIRS-A, GCM Certification (JFS)

Cheryl Gallagher, BA (Modern Maturity Center)

Bob Golaszewski, BS (Modern Maturity Center)

Enza Loera, MSW, MBE (JFS)

Joyce Medkeff, MSW (Easter Seals)

Stephanie Parisi, MSW (JFS)

Blane Thompson, M.Ed. (JFS)

Kathleen Woolman, AB (CHEER, inc.)

Tiffany Wright, BS Human Services (JFS)



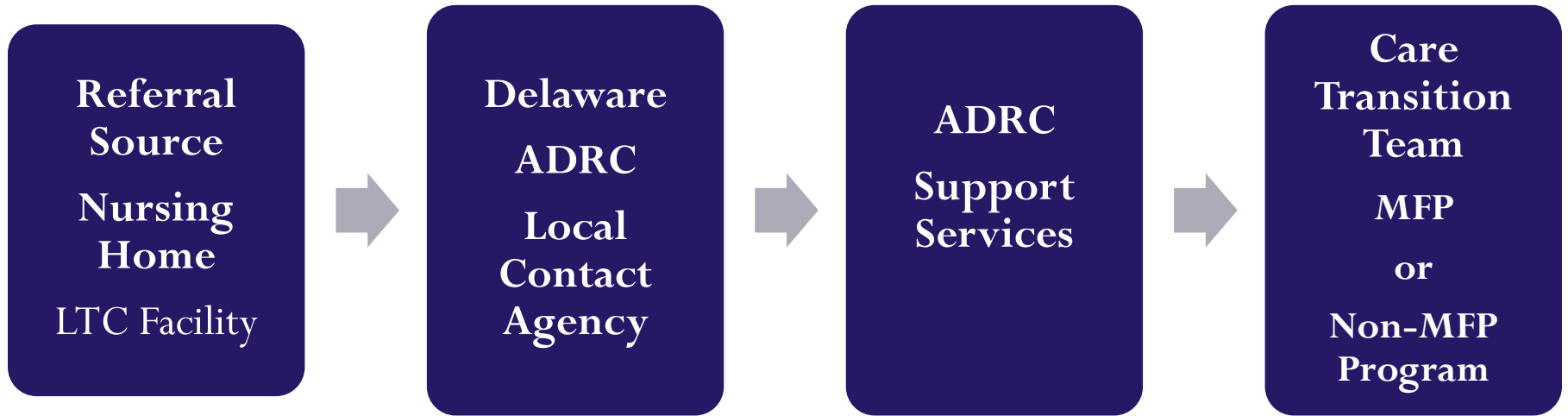
ADRC Care Transition Team

Andrea (Andi) Wozny, DSAAPD

Eddi Ashby, DMMA



Partners in the Transition Process



**Individual
Guardian, Caregiver, Family**



ADRC Care Transition Process

ADRC Care Transition (CT) Process:

- CT team leaders receive completed ADRC transition assessment & recommendations from ADRC Support Services counselors for MFP or other transition program.
- CT team leaders assign case to MFP or DSAAPD case managers & nursing staff for follow-up visit.
- CT team continues follow-up planning & pre-discharge activities with individual, community supports & facility staff
- CT team executes transition plan if viable.



Transition Pathways: MFP & non-MFP Programs

Money Follows the Person

- Division of Medicaid & Medical Assistance (DMMA)
- Federal & State Funded
- Eligibility:
 - **90-day in LTC facility**
 - Medicaid Eligible
- DMMA/MFP provides intense Case Management for 365 days & DSAAPD provides ongoing Waiver Case Management

Care Transition

- Division of Services for Aging & Adults with Physical Disabilities
- State-funded
- Eligibility:
 - < 90-day residency in NH/LTC facility
 - Non or Medicaid Eligible
- DSAAPD provides services for non-MFP eligible individuals, including:
 - Medicaid Waiver
 - Adult Foster Care
 - State NH residents who do not fit MFP criteria



Transition Pathways: Possible Outcomes

1. Individual successfully transitions to community under community service program (CSP) with comprehensive Medicaid waiver services

- Individuals may transition to home, adult foster care or other community-setting
- Individuals transitioned via non-MFP program are followed indefinitely through DSAAPD's Community Services Program or Waiver Services
- Individuals transitioned with MFP are followed with intensive case management for 1 year, along with Waiver Services

2. Individual remains in NH/LTC facility

- Needs could not be met in community to ensure safe transition. Examples: housing, scope of services, community supports
- NH Residents Care Area Assessment plan must include readiness activities for transition

All individuals in LTC facility have the right to transition anytime upon their request or by quarterly MDS 3.0, Sec. Q survey.

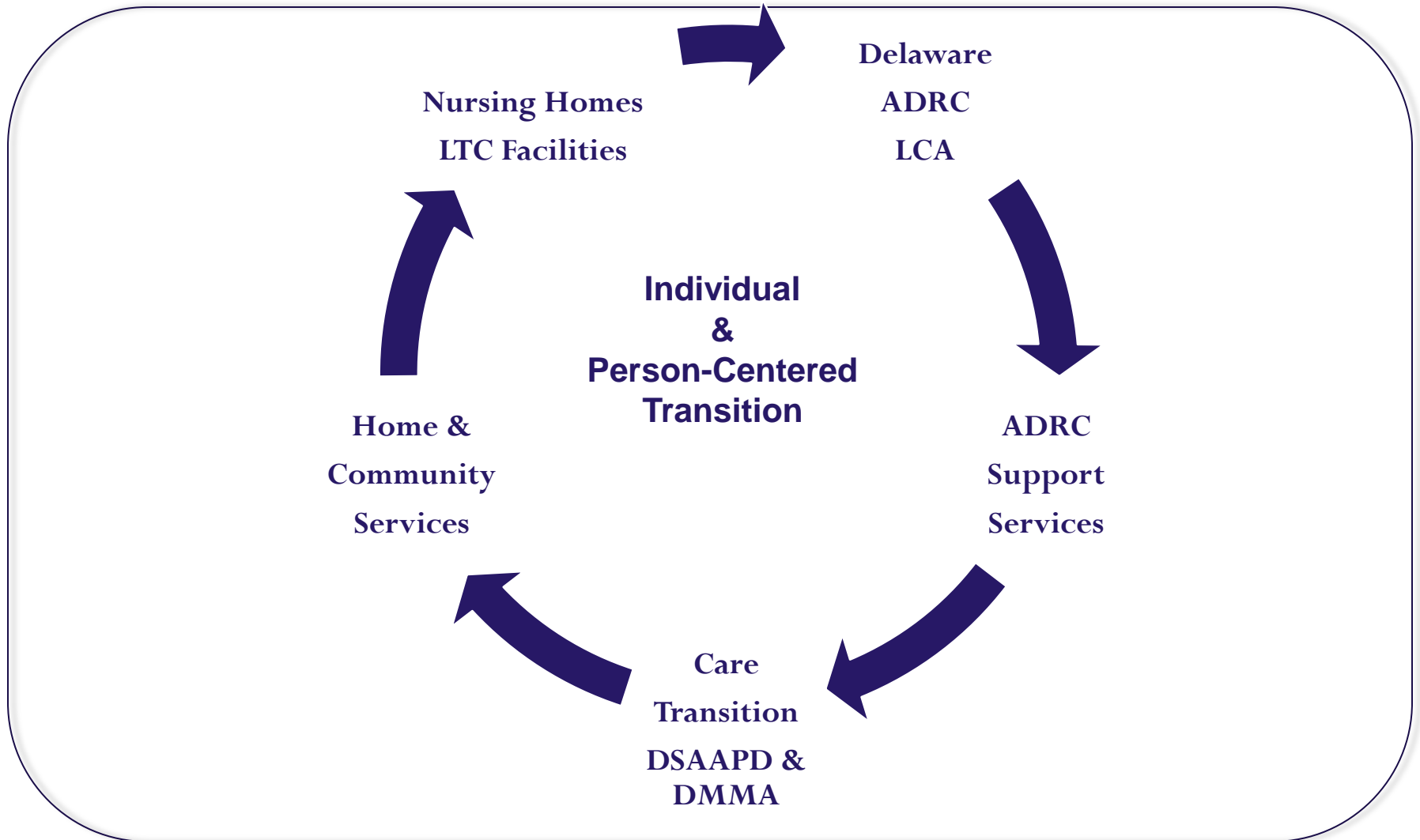


Integrated Transition Team: Roles & Responsibilities

- NH Staff - Referrals to ADRC/LCA; MDS 3.0, Section Q, Care Assessment, Readiness Activities
- ADRC/Local Contact Agency – Single Point of Access; Receive/Process Referrals & Assessments; Coordinate/Link to appropriate partner or services
- ADRC Support Services Providers – Initial Contacts, Transition Assessments, Service Delivery, Recommendations to ADRC CT Team
- Care Transition Team: Transition Programs, including MFP (DMMA) & non-MFP transition programs (DSAAPD); links to housing & community support services
- Other State & Community Partners:
 - State LTC Ombudsman (in LTC facilities & HCBSO; Ensure Residents Rights; Safe Discharge/Transition Plan
 - Adult Protective Services: Ensure safety in community
 - Community Services Partners - Delaware Aging Network, CILS, etc...
 - Acute Care Hospital Discharge Planners

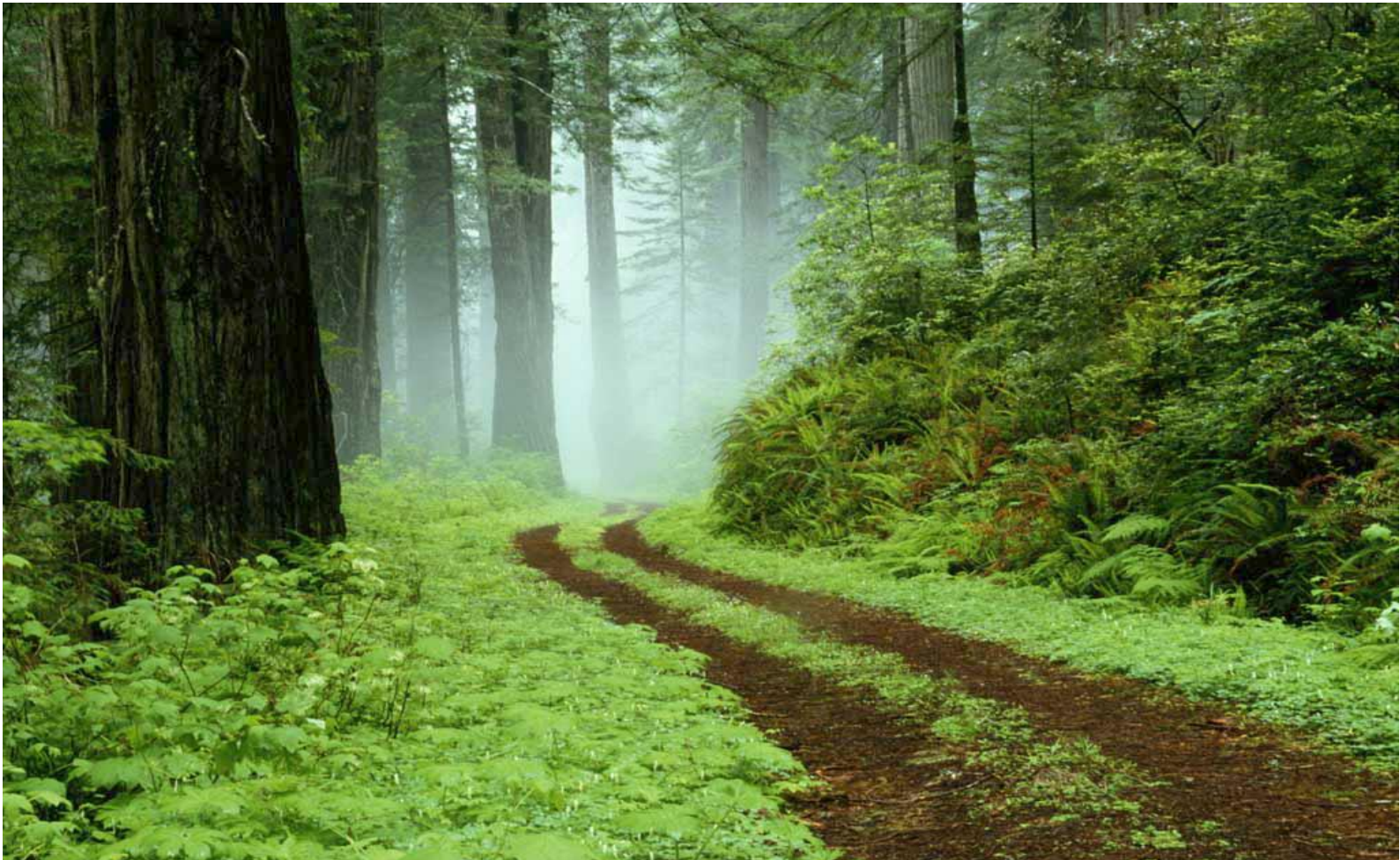


Person-Centered Care Transitions: Team Work





Providing people with the tools they need to choose the right path for themselves...





Delaware ADRC: Tools for Navigating the LTC Support System

[DSAAPD Contact Information/ Official Website](#)

[Delaware ADRC Website & Searchable Database](#)

[Delaware ADRC Contact Information](#)



DSAAPD/ADRC Contact Information

Delaware Health & Social Services

Division of Services for Aging & Adults with Physical Disabilities

1-800-223-9074

For information about DSAAPD Services, Delaware ADRC & links to the ADRC Referral Form, visit the official DSAAPD website:

dhss.delaware.gov/dsaapd



Delaware ADRC: Website Information

- **Delaware ADRC Website:**

<http://www.delawareadrc.com/>

- **Professional Site:**

<https://www.delawareadrc.com/ADRCProfessionalSearch/login.aspx>

- **The professional login information for ADRC Partners:**

ID= ADRC_partner

Password=Delaware04

DSAAPD/Delaware ADRC Website Addresses & Links

Websites	Description	Links
DSAAPD Website Home Page	Public access to ADRC, referral form & related information Recommended: General Public	http://dhss.delaware.gov/dsaapd
DSAAPD Website ADRC Page & Links	Direct access to Delaware ADRC & Referral Forms from LTC facilities & Acute Care Hospitals (ACH) Recommended: Professional use	http://dhss.delaware.gov/dhss/dsaapd/adrc.html
DSAAPD Intranet site	Direct access to ADRC Toolkit, referral forms, trainings (archived & new) & useful links Recommended: for DHSS staff	http://intranet.dhss.state.de.us/dsaapd/index.html
Delaware ADRC website (just launched)	Public access to ADRC Searchable Database, useful links, resources. Recommended: General Public & Professional use (need log-in)	www.delawareadrc.com
ADRC-TAE website	National ADRC-Technical Assistance Exchange	www.adrc-tae.org



Delaware ADRC Contact Information

Delaware Aging and Disability Resource Center

At your services...

Toll Free Phone: 1-800-223-9074

TTY/TDD: (302) 391-3505 or (302) 424-7141

Email: DelawareADRC@state.de.us

Website: www.DelawareADRC.com

Within DHSS (using an Avaya Phone): 89200



Delaware ADRC

- Have questions about Delaware ADRC?





Thank You