How COVID-19 Has Impacted Older Adults APS and Home and Community-Based Services

June 12, 2020
The Center for Community Solutions

We are a non-partisan, nonprofit that aims to improve health, social and economic conditions through nonpartisan research, policy analysis, communications and advocacy.

www.communitysolutions.com

Twitter: @CommunitySols
Advocates for Ohio’s Future

Advocates for Ohio’s Future (AOF) is a nonpartisan coalition of over 500 Ohio organizations that promotes health and human service budget and policy solutions so that all Ohioans live better lives.

Our coalition believes in investing in our state’s most valuable resource—our people—to ensure that they are safe, healthy, and can access pathways to prosperity for themselves and their families.

Kelsey Bergfeld, Coalition Manager
kbergfeld@communitysolutions.com | www.advocatesforohio.org
175 S. Third Street, Suite 350 | Columbus, OH 43215
614-745-0740 ext. 305
Ohio’s Area Agencies on Aging: Home and Community-Based Services: Response to COVID-19

Beth Kowalczyk
Chief Policy Officer
Ohio Association of Area Agencies on Aging
Ohio’s Area Agencies on Aging

- Council on Aging of Southwestern Ohio
- Area Agency on Aging PSA 2
- Area Agency on Aging PSA 3
- Area Office on Aging of Northwestern Ohio
- Ohio District 5 Area Agency on Aging
- Central Ohio Area Agency on Aging

- Area Agency on Aging, District 7
- Buckeye Hills Regional Council
- Area Agency on Aging Region 9
- Western Reserve Area Agency on Aging
- Direction Home Akron Canton Area Agency on Aging
- Direction Home of Eastern Ohio
Ohio’s AAA Programs and Initiatives

- Advocacy
- ADRN/OBLTSS
- Assisted Living Waiver
- Benefits counseling
- Care coordination
- Care Transitions
- Caregiver support
- Educational events and outreach
- Elder justice/APS
- Evidence-based health and wellness programs
- Home Energy Assistance
- Housing support services
- Levy Programs

- Medicare Advantage
- Medicare counseling
- MyCare Ohio
- Nursing home diversion and transition from hospitals to home
- Nursing home pre-admission review
- Older Americans Act services (nutrition, wellness, transportation, legal help, ombudsman, and more)
- PASSPORT HCBS waiver
- Ohio Home Care case management
- Transportation Coordination and Mobility Management
- Veterans Directed HCBS
• Older Americans Act programs
• PASSPORT Medicaid home and community-based waiver for people over 60
• Assisted Living Waiver Age 21 or older
• Ohio Home Care Waiver Age 59 and under
• MyCare Ohio – 18 or older, dually eligible for Medicaid and Medicare, in demonstration counties
• Local levy programs
• Care Transitions – Moving individuals from hospital to home
Federal Response to COVID-19

• COVID-19 Families First Coronavirus Response Act (FFCRA) funds:
  • $8.8 million to Ohio for Title III C-1 Congregate Meals and Title III C-2
    Home Delivered Meals (no state match)

• Coronavirus Aid, Relief, and Economic Security Act (CARES Act):
  • Funds received by state and should be distributed soon. No state match.
  • Funding for Title III ($31,848,221) includes III-B Supportive Services, III-C
    Nutrition Services and III-E Family Caregiver Support. The legislation
    includes other OAA funding such as Elder Justice, state long term care
    ombudsman and Aging and Disability Resource Centers (in Ohio – the
    Area Agencies on Aging). These funds are to be used for disaster
    assistance services.

• National Disaster Declaration:
  • triggers Section 310 of Older Americans Act which permits states to use
    any portion of the funds made available under any and all sections of the
    Act for disaster relief for older individuals. Both existing grant awards and
    the emergency funding.
State Response to COVID-19

• **Flexibilities with waiver programs:**
  • Departments of Medicaid and Aging have issued guidance directing Area Agencies on Aging to engage telephonically with individuals receiving home and community-based services. Additional flexibilities have been implemented for provision of services.

• **Stay Connected Department of Aging**

• **Wellness Kits**
AAA Response to COVID-19

- Meals – expanding home delivered, shelf-stable meals, grab and go and groceries
- Addressing needs – toiletries, cleaning supplies, etc
- Checking in frequently with consumers
- Coordinating volunteers and providers to address immediate needs
- Social isolation – volunteers; wellness and prevention services via online programming
Living with COVID -19

• Social Isolation, Safety and Well-Being
• Provider Capacity and Access
• Ageism – health care rationing, limiting access/engagement
• Budget Impact:
  • GRF – Senior Community Services
  • Medicaid – waiver services
More Information

Ohio Association of Area Agencies on Aging

www.ohioaging.org
https://www.facebook.com/o4aadvocacy
@o4aadvocacy on Twitter
Presentation by:

Joe Russell, Executive Director
The Center for Community Based Care (CCBC) is a non-profit 501(c)(3) affiliate of the Ohio Council for Home Care & Hospice. CCBC supports the delivery of community-based care through public awareness and consumer education. By connecting families and individuals across Ohio with the resources they need, they are able to receive the exceptional care they deserve. CCBC connects individuals of all ages to tools and resources to help them remain in their homes and with their families.
Consumer Education

CCBC educates consumers regarding hospice, home care, and palliative care. CCBC connects individuals of all ages to tools and resources to help them remain in their home alone and with their families.
Public Awareness

CCBC assists consumers by making information available about what is going on in the world around them, including legislative issues and changes to health care laws impacting them. CCBC’s awareness efforts can empower the public to make a decision and act accordingly.
Resources from CCBC

- Medicaid Eligibility and Other Government Resource Links
- Emergency Preparedness Checklist for Families
- Information about Fall Proofing Your Home
- Advanced Care Planning Information
- Home Care and Hospice Recourses/ Provider Page
- Other Services
- Glossary of important Terms
We are updating our resources!

We are in the process of updating and upgrading our programs and services. As such, we’re revamping the website and making it easier to connect people with community-based service.

Stay tuned for more info. If there are any outdated links or information- please let us know!
Impact of COVID-19 in Home and Community Based Services (HCBS)
HCBS Strengths During COVID-19

- Telehealth has reduced foot traffic in the home by being able to provide services and “check-ups” telephonically when clinically appropriate
- Same services can be provided in the home as a long-term care facility without restricting visiting, etc.
- Assistance with family caregiver support and education
- Helping Ohioans receive the care where it matters most—at home! HCBS keeps people out of congregate settings.
HCBS Struggles During COVID-19

- PPE—lack of government resources led us to gather donations from community members, and place group orders to help home care and hospice members gain access to items they need to serve individuals in the home
- Reduced access to facilities
- Lack of testing
- Long-term sustainability: Moving forward we must work to protect skilled Medicaid home health rates and PASSPORT for HBCS providers so you can still receive your services in the comfort of your home. Tell your legislature to urge the Medicaid Director and Aging Director to NOT cut these services during the state biennium budget.
New ODA Program

• Ohio Department of Aging (ODA) created a program to help combat social isolation and connect people with services when they are needed

• *StayingConnected* program
  • a free, daily check-in by phone service for Ohio’s older residents to ensure their well-being amid the ongoing coronavirus (COVID-19) public health emergency and beyond.

Confidence in HCBS rising

• Based off of a survey of 992 respondents who are actively involved in healthcare decisions for an older adult age 75 or older conducted by Transcend:
  • 65% of respondents believed that the COVID-19 crisis has completely changed opinions about the best way to care for aging Seniors.
  • 60% of respondents are more confident that quality care can be provided in the home.
  • 52% of respondents are more likely to use in-home private duty/skilled nursing care.

https://transcend-strategy.com/
Want More Info about HCBS?

Visit our website!
https://centerforcommunitybasedcare.org/index.php/contact/

Please do not hesitate to contact us for more information.
614-885-0434
Thank you!
DSAS Community Response to Covid 19

DIVISION OF SENIOR AND ADULT SERVICES
1. Program Modifications
2. Productivity/Performance Measures
3. Working with Partners
ADULT PROTECTIVE SERVICES (APS)

- Staff continues to meet the state mandate of conducting a face-to-face home visit in 72 hours for non-emergency clients and 24 hours for emergencies.

- When reports are accepted where clients are hospitalized or in skilled nursing facilities, APS social workers will contact professionals at these sites to arrange for an initial visit if possible and coordinate care plans via conference calls. We have seen some restrictions lifted with in-person meetings.

- For existing stable clients and case closures, staff are expected to contact the client by phone.

- Non-validated reports are also closed via phone call, closing letter sent to the client.

- We are utilizing zoom meetings for court hearings that involve Protective Service Orders and guardianships. PSOs no delay, guardianship taking a little longer.

- We continue to have reports from our on-line tool (web-portal: March 51 reports, April 30 reports, May 39 reports) main source is typically medical providers.
Initial trends we witnessed at start of COVID

• Increase in calls related to food resources – believe this was reaction to media coverage, not necessarily APS
• Refusing workers entry into homes
• Home care services limitations, creating potential APS cases due to lack of services
• Inability to see hospitalized and skilled clients
• Senior living arrangement in general (building dedicated to senior / disabled resident)
• Issues with court hearings being continued
• Lack of PPEs for staff
• Coping with staff concerns related to the pandemic
• Technology issues
• Deploying our Intake, duo tokens, VPNs, etc.
• Looming budget concerns
PROGRAM MODIFICATIONS

INFORMATION SERVICES (IS)

• Social service workers continue to work with non-protective clientele to address resource needs, food requests from the DSAS food pantry, process Bed Bug referrals and provide emergency assistance for utilities, rent, and other necessities. They will make a visit if an emergency situation arises.

• Staff have shifted from in-person visits to making calls to all senior centers, and other senior service agencies to reach clients in need of assistance with Benefit Check-Up screenings and for other benefits and applications.

• Requests for food assistance had increased initially, but have tapered off with time.

CENTRALIZED INTAKE

• Working remotely, continue to answer and triage calls from home office.

• Response time is averaging 18 seconds

• Call volume has remained consistent.
<table>
<thead>
<tr>
<th>CLIENTS SERVED BY MONTH- 2020</th>
<th>Jan-20</th>
<th>Feb-20</th>
<th>Mar-20</th>
<th>Apr-20</th>
<th>2020 Targets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Centralized Intake</td>
<td>1,748</td>
<td>1,478</td>
<td>1,535</td>
<td>1,391</td>
<td>19,000</td>
</tr>
<tr>
<td>Adult Protective Services</td>
<td>449</td>
<td>469</td>
<td>495</td>
<td>485</td>
<td>2,500</td>
</tr>
<tr>
<td>Options for Independent Living</td>
<td>1,104</td>
<td>1,276</td>
<td>1,290</td>
<td>1,333</td>
<td>1,700</td>
</tr>
<tr>
<td>Home Support</td>
<td>336</td>
<td>314</td>
<td>324</td>
<td>310</td>
<td>550</td>
</tr>
<tr>
<td>Information Services</td>
<td>187</td>
<td>196</td>
<td>446</td>
<td>113</td>
<td>2,400</td>
</tr>
<tr>
<td>Community Social Services</td>
<td>1,845</td>
<td>1,844</td>
<td>1,860</td>
<td>1,399</td>
<td>3,000</td>
</tr>
<tr>
<td>Program</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>5,669</strong></td>
<td><strong>5,577</strong></td>
<td><strong>5,950</strong></td>
<td><strong>5,031</strong></td>
<td><strong>29,150</strong></td>
</tr>
</tbody>
</table>
## Clients Served

<table>
<thead>
<tr>
<th>Service</th>
<th>2018 1Q</th>
<th>2019 1Q</th>
<th>2020 1Q</th>
<th>% Change 2019 vs. 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Centralized Intake</td>
<td>4,789</td>
<td>4,332</td>
<td>4,761</td>
<td>10%</td>
</tr>
<tr>
<td>APS web-portal referrals</td>
<td>110</td>
<td>135</td>
<td>145</td>
<td>7.4%</td>
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<tr>
<td>Adult Protective Services</td>
<td>824</td>
<td>999</td>
<td>900</td>
<td>-10%</td>
</tr>
<tr>
<td>Home Support</td>
<td>385</td>
<td>382</td>
<td>361</td>
<td>-5.5%</td>
</tr>
<tr>
<td>Options for Independent Living</td>
<td>1,314</td>
<td>1,067</td>
<td>1,399</td>
<td>31%</td>
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<tr>
<td>Information Services</td>
<td>512</td>
<td>527</td>
<td>446</td>
<td>-15%</td>
</tr>
<tr>
<td>Community Social Services Program</td>
<td>2,487</td>
<td>2,339</td>
<td>2,338</td>
<td>0%</td>
</tr>
<tr>
<td>Counseling Services</td>
<td>21</td>
<td>21</td>
<td>24</td>
<td>14.3%</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>10,442</strong></td>
<td><strong>9,802</strong></td>
<td><strong>10,374</strong></td>
<td><strong>5.8%</strong></td>
</tr>
</tbody>
</table>
The percentage of clients contacting the DSAS Centralized Intake Line for food assistance issues has increased from 10.9% to 14.2% from January to April 2020.
Questions?