



**Georgia Department of Human Services**  
Division of Aging Services

# **Just the Facts**

State Fiscal Year 2016

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**Nathan Deal**  
Governor



**Robyn A. Crittenden**  
Commissioner

**Georgia Department of Human Services**  
Aging Services | Child Support Services | Family & Children Services

January 3, 2017

RE: State Fiscal Year 2016 Just the Facts

To Whom It May Concern:

In accordance with O.C.G.A. 49-6-1, The Department of Human Services (DHS) respectfully submits on behalf of the Division of Aging Services (DAS) an annual report of progress and accomplishments for the state Fiscal Year 2016, titled "Just the Facts".

As the state's federally designated unit on aging, DAS is committed to assisting older individuals, at-risk adults, persons with disabilities, their families and caregivers so that they may achieve safe, healthy, independent and self-reliant lives. In doing so, DAS supports the DHS vision of *Stronger Families for a Stronger Georgia*.

The report covers service delivery outcomes for each of the Division's major program areas, including Adult Protective Services and Home and Community-Based Services.

For your convenience, the report can be accessed in its entirety on the DHS website.

Sincerely,

Robyn A. Crittenden  
DHS Commissioner

Abby G. Cox  
DAS Director

## **Executive Summary**

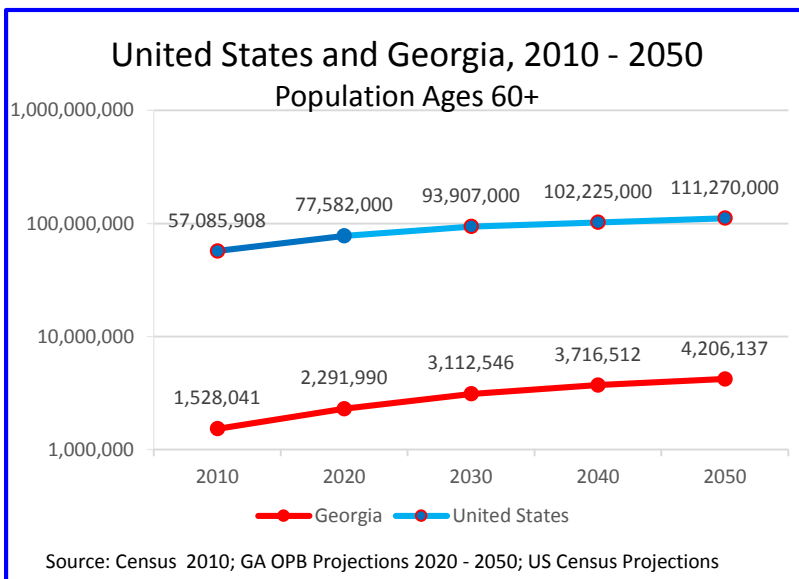
The Georgia Department of Human Services Division of Aging Services' (DAS) mission is to support the larger goals of DHS by assisting older individuals, at-risk adults, persons with disabilities, their families and caregivers to achieve safe, healthy, independent and self-reliant lives. In order to accomplish this mission, DAS works collaboratively with others within Georgia's Aging Service Network (Area Agencies on Aging (AAAs), providers, older adults and advocates) and with key organizations serving individuals with disabilities. This network provides seamless access to long-term supports and services needed by consumers to remain at home and in the community safely for as long as they desire.

Just the Facts reflects outcomes of services outlined by the United States Department of Health and Human Services Administration for Community Living (ACL) including Older Americans Act core programs, ACL Discretionary Grants, Participant Directed/Person Centered Planning and Elder Justice related activity. The results set forth in this document demonstrate how DAS continues to advance the service delivery system and allow for higher quality of service and potentially increase the number of available services for Georgia's consistently growing older adult population, disability population, their families and caregivers. DAS will continue to deploy innovative methodologies to efficiently and effectively expand capacity, foster collaborations and drive cost efficiencies to deliver comprehensive system of programs and services to assist Georgians in living longer, living safely and living well.

# Aging Trends in Georgia

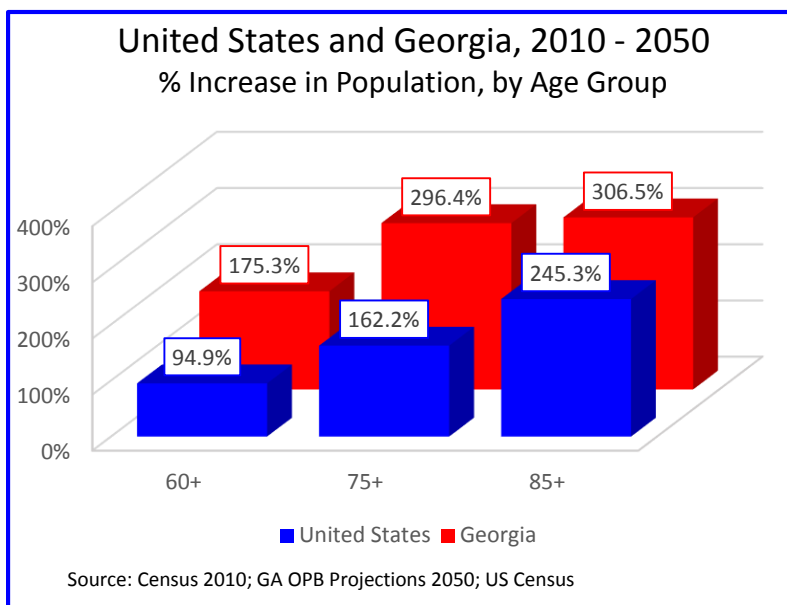
## Georgia's Department of Human Services Division of Aging Services and the Aging Network

The Georgia Department of Human Services Division of Aging Services' (DAS) mission is to assist older individuals, at-risk adults, persons with disabilities, their families and caregivers in achieving safe, healthy, independent and self-reliant lives. DAS partners with the Aging Network, a statewide network comprised of twelve Area Agencies on Aging (AAA) and community services providers all working toward the delivery of supportive services for older adults in Georgia. Through continuous service improvements and innovation, DAS and the Aging Network provide programs and services that assist Georgians in living longer, living safely and living well.



- Georgia has the 11th fastest-growing 60+ population and is projected to have the 10th fastest-growing 85+ population in the United States between 2010 and 2030. **Source: Census 2010; GA OPB Projections 2050**

- Georgia's 60+ population is expected to increase 65.8 percent between 2010 and 2030, from one in six persons in 2010 to 1 in 5 persons in 2030. **Source: Census 2010; GA OPB Projections 2050**



- Georgia's 85+ population is expected to increase 306.5 percent from 2010 to 2050. Those age 85 and above are by far the fastest-growing group, projected to total 462,723 in 2050. **Source: Census 2010; GA OPB Projections 2050**

- During the 20<sup>th</sup> century, the number of Georgians age 60+ increased nine-fold, compared to a four-fold growth in the population overall. **Source: Census 2010; GA OPB Projections 2050**

Between 2009 and 2013:

- Among Georgians age 60 and above, there were 79.6 males for every 100 females. For Georgians age 85 and above, there were 44.4 males for every 100 females.<sup>1</sup>
- Of Georgia's population ages 60 and above, an estimated 374,540 lived alone.<sup>2</sup>
- An estimated 338,330, or 21.11 percent, of Georgia's total civilian population age 60 and above, were veterans.<sup>3</sup>
- A greater number of Georgia's 60+ population completed high school and held post-secondary degrees:<sup>4</sup>
  - High school graduates 514,810
  - Associate degree 78,155
  - Bachelor's degree 213,695
  - Master's degree 103,430
  - Professional degree 32,790
  - Doctorate degree 22,960

From 2008 to 2012:

- An estimated 26.91 percent of Georgians 60+ were in the workforce.<sup>5</sup>
- Approximately 11.56 percent of the state's population age 60 and above were at or below poverty level.<sup>6</sup>
- Georgia has the second-highest percent increase in 60+ population compared to its bordering states.<sup>7</sup>

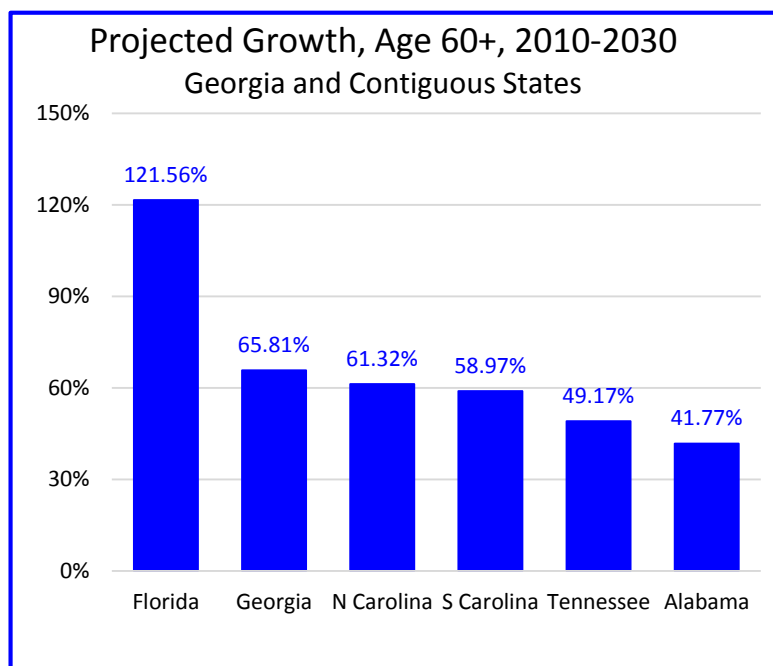


Figure 1 Source Census 2010 compared to 2030 projections

<sup>1</sup> AGID Table S210DIS01, GA 2008 - 2012.

<sup>2</sup> AGID Table S21004, GA 2008 - 2012.

<sup>3</sup> AGID Table S21025, GA 2008 - 2012.

<sup>4</sup> AGID Table S21021B, GA 2008 - 2012.

<sup>5</sup> AGID Table S21023, GA 2008 - 2012.

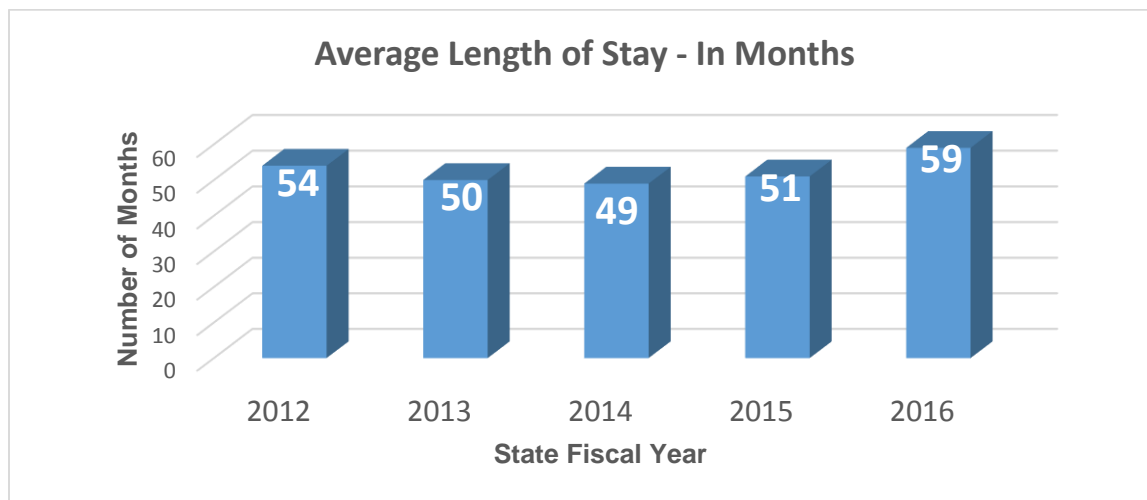
<sup>6</sup> AGID Table S21043B, GA 2008 - 2012.

<sup>7</sup> 2010 Census compared to 2030 Projections from File 2. Interim State Projections of Population for Five-Year Age Groups and Selected Age Groups by Sex: July, 1 2004 to 2030. Source: U.S. Census Bureau, Population Division, Interim State Population Projections, 2005.

## Non-Medicaid Home and Community-Based Services

Non-Medicaid Home and Community-Based Services (HCBS) provides individual and group services to support and assist older Georgians in staying in their homes and communities. These services promote health, self-sufficiency and independence. During State Fiscal Year (SFY) 2016, 29,727 clients received HCBS services, and 14,326 clients received more than one service.

DAS uses Length of Stay (LOS) as a metric to determine return on investment for HCBS, for the time it keeps people in their homes and in the community. Studies have shown that the longer a person is able to stay at home with support, the more taxpayer dollars are saved as a result of the program<sup>8</sup>. During SFY 2016, DAS achieved a four year high of 59 months.



### *Partners in Service Delivery System*

DAS partners with the Aging Network and other public and private-sector agencies to provide nutrition and wellness program services. These partners include: The University of Georgia, Georgia State University, AAAs, senior centers, community service providers, Diabetes Association of Atlanta, University of Georgia Extension Service, Department of Public Health, AARP, American Cancer Society, Medicare Diabetes Screening Project, Administration on Community Living, National Council on Aging, Mercer University and Georgia Health Policy Center.

### *Nutrition and Wellness Programs*

“Living Longer, Living Well” DAS’s Nutrition and Wellness Programs are aimed at increasing the ability of older adults to perform everyday activities and remain living in their own homes. Activities are focused on evidence-based health promotion and disease prevention. Services are designed to improve nutrition and health status, increase functional abilities, promote safety at home, avoid or delay problems caused by chronic diseases and enhance quality of life.

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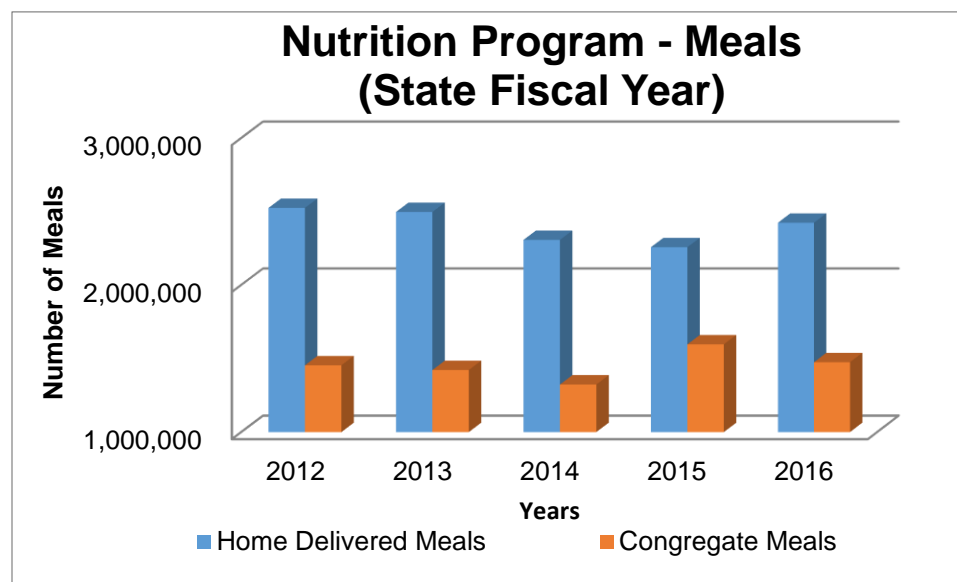
<sup>8</sup> 2010 Census Compared to 2030 Projections from File 2. Interim State Projection of Population for Five-Year Age Groups and Selected Age Groups by Sex: July 1, 2004 – 2030. Source U.S. Census Bureau, Population Division Interim State Population Projections, 2005.

**Nutrition Counseling** provides individualized guidance to people or caregivers who are at nutritional risk because of their health or nutrition history, dietary intake, chronic illnesses or medications use. Counseling is provided one-on-one by a registered dietitian, and addresses the options and methods for improving nutrition status.

**Nutrition Education** is a program to promote better health by providing accurate and culturally sensitive nutrition, physical fitness, or health (as it relates to nutrition) information and instruction to participants, caregivers or both in a group or individual setting overseen by a dietitian or individual of comparable expertise.

**Congregate Meals** are meals provided to a qualified individual in a congregate or group setting. The meal served meets all of the requirements of the Older Americans Act, state and local laws.

**Home-Delivered Meals** are meals provided to a qualified individual in his or her place of residence. The Home-Delivered Meals program is administered by State Units on Aging and/or Area Agencies on Aging and meets all of the requirements of the Older Americans Act, state and local laws. Funds may also be used to provide assistive technology for dining.



In SFY 2016, Georgians were served 3,897,772 total meals, including 1,474,664 Congregate Meals and 2,423,108 Home-Delivered Meals.

- More than 3,000 persons benefited from the following services:
  - Exercise and physical fitness
  - Medications management
  - Nutrition counseling
  - Health-related and health screening
  - Georgia HealthMatters (evidence-based) programs, which include the Chronic Disease Self-Management Program, Diabetes Self-Management Program, Tomando Control de su Salud, Matter of Balance, Tai Chi for Health and the Otago Exercise Program.
    - 855 self-management program participants
    - 640 falls prevention program participants
  - Physical activities, including chair exercise, dancing, aerobics, walking, weight exercises, water aerobics, yoga, etc.
  - Lifestyle Management, including recreation, safety, therapeutic activities and tobacco cessation



- Program Awareness/Prevention activities, including community events, distribution of materials, medications management, immunizations and group screening activities
- Nutrition Education, including nutrition and health sessions, menu planning and food preparation, explanation of dietary guidelines, eating and feeding information, and food safety

### *Success Stories*

During SFY 2016, DAS and all 12 AAAs began the process of implementing new policies regarding senior centers to increase participation and quality programming. The result has been a 15 percent increase in participation statewide, repositioning senior centers to become community focal points.

The 2016 Healthy Communities Summit, held at the Atlanta Airport Marriott June 22-24, 2016 brought together 375 professionals in the field of aging and disabilities to improve integration and seamlessness of services to older adults and adults with disabilities. The conference committee is a partnership between DAS, the Department of Behavioral Health and Developmental Disabilities (DBHDD), the Centers for Independent Living, Tools for Life, and the Brain Injury Association of Georgia. The 2016 summit featured founder and Chief Executive Officer of the National Foundation to End Senior Hunger, Enid Borden, as the event's keynote speaker. The conference featured hands-on experience with various types of assistive technology and an older driver safety session that examined where crashes happen and how to facilitate tough conversations, including when an older adult should stop driving. The entire conference program can be found [here](#).

### *Highlights and Accomplishments*

DAS worked to design a new client data software program, Harmony, with input from local AAAs. As of July 2016, Harmony is now the primary software used by AAAs and DAS to collect information on clients served through the Aging Network. DAS will continue to work with AAAs to provide enhancements and efficiencies with input from the Aging Network.

### *Evidence-Based Programs Sustainability Meetings*

- In partnership with the Georgia Health Policy Center (GHPC), aging services partners worked to develop statewide marketing messages and tools for expanding the implementation of evidence-based programs (EBP). This included creating an umbrella name and tagline for all sponsored EBPs – **Georgia HealthMatters: Life-Enriching Programs**. The following programs are included under this suite of EBPs: the Chronic Disease Self-Management Program, the Diabetes Self-Management Program, Tomando Control de su Salud, A Matter of Balance, Tai Chi for Health, Otago Exercise Program, Powerful Tools for Caregivers, and Care Consultations.
- After the name was selected, GHPC staff designed a Georgia HealthMatters logo for implementation partners to use on marketing material across the state.

### *Future Directions and Opportunities*

- Targeting underserved populations, as part of DAS' State Plan
- Developing Georgia's first state plan on Senior Hunger
- Complete implementation and enhancement to the Harmony system

### *Targeting Resources*

To maximize resources available to serve Georgia's rapidly-growing population of older adults, persons with disabilities and their caregivers, DAS has enhanced policies and procedures, as well as training and technical assistance, to help target resources to persons who are in greatest need.

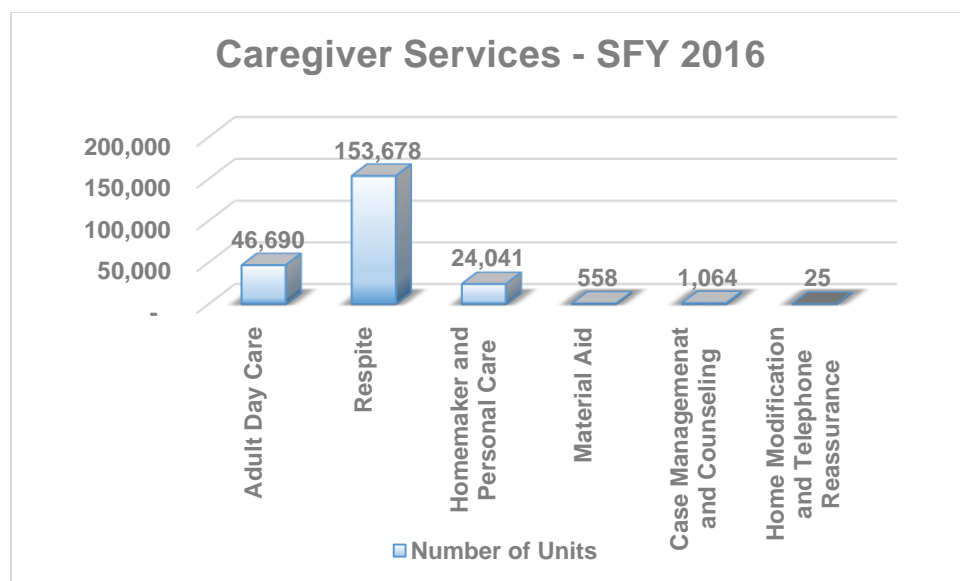
These include:

- New Access to Care Model focused on:
  - Those in the greatest economic need
  - Those in the greatest social need
  - Those with the greatest risk of institutionalization
  - Those who are frail
- Client Prioritization Policy
  - Particular attention given to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas
  - Focused on matching actual need with service level and expanding to four target AAA areas over time.
- Statewide training provided for consistent assessment processes

## Caregiver Programs and Services

The Georgia Department of Human Services Division of Aging Services (DAS) provides program oversight, policy development, network funding, and training at regional and local levels of the statewide aging network to support and assist older Georgians in staying in their homes and communities. Georgia's aging network provides an array of services designed to support family caregivers. During SFY 2016, services to caregivers included adult day care; respite care; case management and counseling; information and assistance; support groups; material aid; homemaker and personal care; and education and training for caregivers.

DHS/DAS contracts with 12 AAAs throughout the state to provide support to caregivers. Various organizations partner with DHS/DAS and the AAAs in this endeavor, including: the Rosalynn Carter Institute for Caregiving, the Alzheimer's Association – Georgia Chapter, the Benjamin Rose Institute on Aging (BRI), Tools for Life, the Brookdale Foundation Group, and Emory University's Alzheimer's Disease Research Center. In addition, many local service providers throughout Georgia are contracted through the AAAs to provide services to family caregivers and care receivers.



### Definition of Units

*Adult Day Care = 1 hour of service*

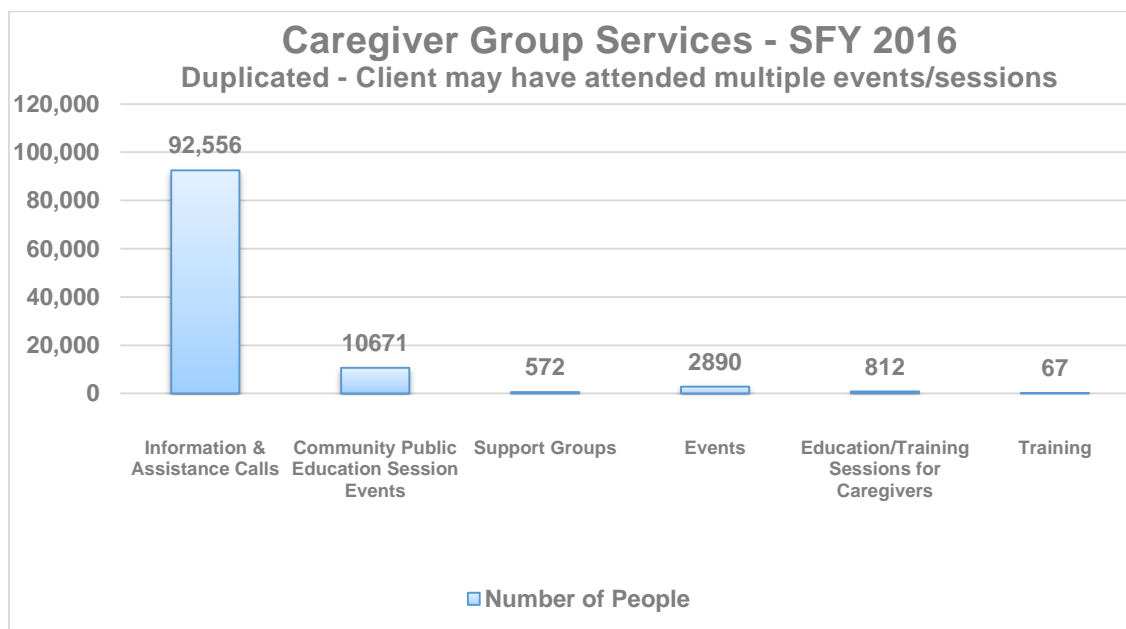
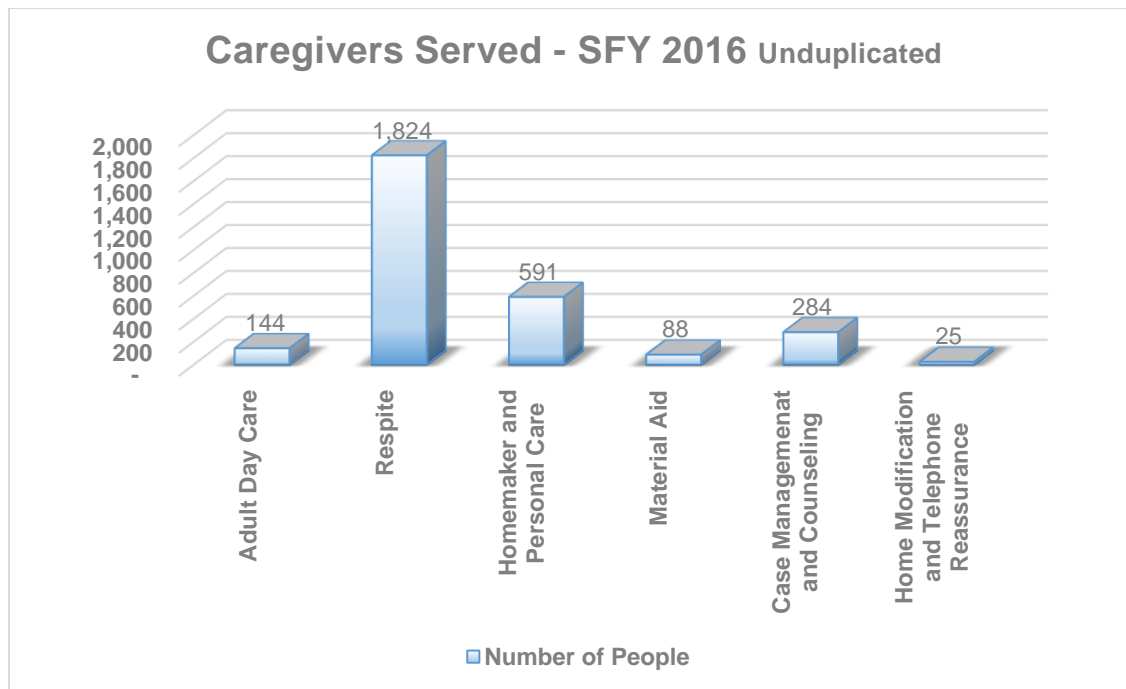
*Respite = 1 hour of service*

*Homemaker and Personal Care = 1 hour of service*

*Material Aid = 1 contact for service payment*

*Case Management and Counseling = 1 hour or 1 session of service*

*Home Modification and Telephone Reassurance = 1 job completed or 1 client contact*



#### *Highlights and Accomplishments*

#### **Caregiver Services**

During SFY 2016, DHS/DAS continued to oversee and support area caregiver programs throughout Georgia.

Highlights of these programs included:

- Further expansion of the Benjamin Rose Institute (BRI) Care Consultation evidence-based, telephonic information and coaching service to assist caregivers to understand options, manage care, and make decisions more effectively;
- Continued support of caregiver support groups in all areas of the state; and
- Continued focus on caregiver group services, including:
  - community and public education via distribution of hard-copy materials, presentations, television/radio, and web-based methods;
  - material aid to assist with transportation and food purchases;
  - caregiver awareness events; and
  - caregiver training events to support health promotion and disease prevention, professional development, and leadership abilities.

### **Kinship Care**

AAAs are allowed to spend up to 10 percent of their National Family Caregiver Support Program Title III-E federal dollars towards dedicated kinship care programs. In Georgia, DHS/DAS contracts with six AAAs to provide kinship care services: Atlanta Regional Commission, Central Savannah River Area, Legacy Link, Northeast Georgia, Northwest Georgia and Three Rivers. Kinship care activities are provided in other areas of the state via community partners. During SFY 2016, Georgia AAAs and community partners held 190 kinship support group meetings, reaching 2,000 people. During SFY 2016, AAA staff conducted 121 community and public education activities, reaching 10,093 people through mail, community presentations, publications, and television/radio.

### *Future Directions and Opportunities*

### **ADSSP Extension Grant**

Georgia was awarded the Alzheimer's Disease Supportive Services Program (ADSSP): Creating and Sustaining Dementia-Capable Service Systems for People with Dementia and their Family Caregivers extension grant in SFY 2017. Through this funding, DHS/DAS will expand and transform the statewide delivery of dementia-capable services during the course of this 18-month project. The project goal is to ensure seamless, customer-focused and dementia-capable statewide access to a comprehensive array of home and community-based services and supports to help persons with dementia and their caregivers. The objectives are to:

- Ensure that "Access to Services" staff are trained in dementia-capable support services;
- Expand dementia-related training for community partners across the state;
- Expand access to "Powerful Tools for Caregivers and Care Consultation" evidence-based programs;
- Provide appropriate assistive technology and training support to persons with dementia and their caregivers;

- Redesign the state's caregiver services policy to improve dementia capability, including improved screening and assessment methods to identify unmet needs for persons with dementia and caregivers; and
- Expand service delivery to underserved populations, including rural, Hispanic, and veteran caregivers. The 18-month work plan for the grant outlines activities and organizational partnerships to accomplish these objectives.

### **Brookdale Foundation Group RAPP Grant**

DHS/DAS was awarded the Brookdale Foundation Group Relatives as Parents Program (RAPP) Grant for SFY 2017. DHS/DAS has maintained a relationship with the Brookdale Foundation Group since first obtaining a grant to support Georgia kinship care programs in 2003. The focus of this grant will be on improving mental health services for kinship families. The key objectives of the RAPP Grant are to:

- (1) Continue and sustain kinship support group meetings;
- (2) Provide training to enhance competencies of DFCS Kinship Navigators who have a specialized skill in mental health services;
- (3) Convene a two-day Kinship Care Summit of kinship coordinators and DFCS kinship navigators to provide training on Mental Health First Aid, mental health screening tools, BRI Care Consultation, and other currently available mental health services available to kinship families;
- (4) Hold four regional stakeholder meetings across the state to identify service gaps and identify potential strategies to attract providers of individual and family counseling into the kinship care network;
- (5) Work with a local university to develop a telephonic mental health support program; and
- (6) Develop an education session about mental health resources (including printed fact sheets) for use in monthly support group meetings. If these objectives for SFY 2017 are met, there is an option to extend the funding to SFY 2018.

# Georgia Alzheimer's and Related Dementias State Plan

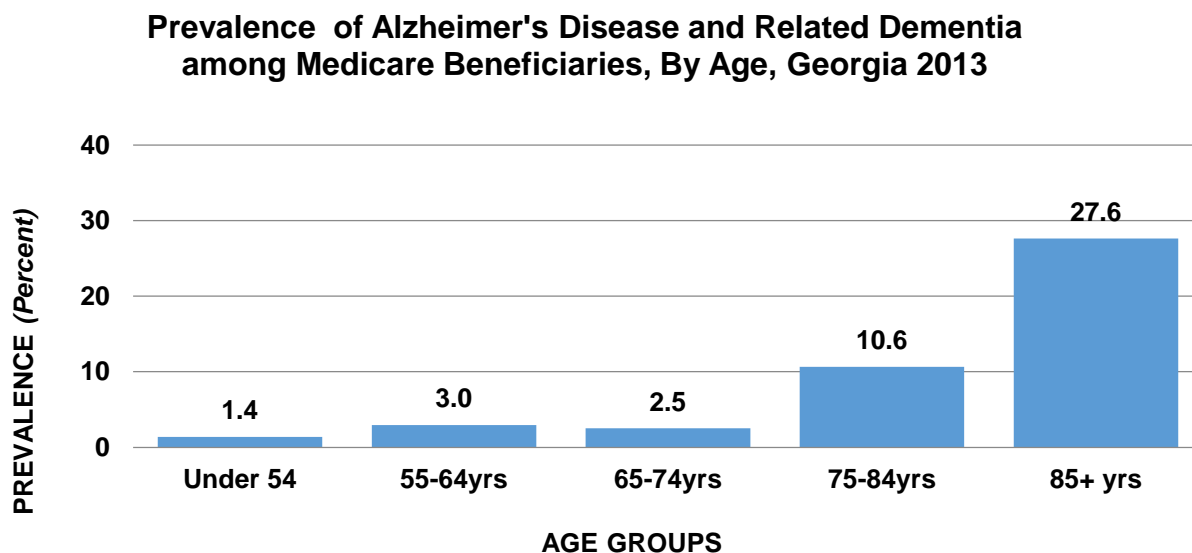
In SFY 2016, the Georgia Alzheimer's and Related Dementias (GARD) State Plan entered its third year of implementation. The Advisory Council and collaborating organizations made advancements in the plan's priority areas. Recommendations fall into the following areas:

- Healthcare, Research and Data Collection
- Workforce Development
- Service Delivery
- Public Safety
- Outreach and Partnerships
- Policy

Selected highlights are below.

## *Georgia Alzheimer's and Related Dementias State Registry*

- The Georgia Department of Public Health produced the Alzheimer's Disease and Related Dementias Among Medicare Beneficiaries report for 2015 due to the creation of the registry. Below is an excerpt from that report.



## *Workforce Development Work Group: Survey, Core Competencies, and Curricula Initiatives*

- The GARD's Workforce Work Group, in collaboration with the Culture Change Network of Georgia, convened a group of providers for a work day of developing competencies for professionals who support people living with dementia. The Work Group is now entering the next step of this process in order to establish recommendations for dementia education in our state
- This group also inventoried existing training, administered surveys to assess statewide training needs and conducted national research to recommend core competencies and curricula for statewide dementia education.

- GARD partnered with the Alzheimer's Association and Alliant Quality to coordinate viewings of "Being Mortal" about end of Life Decisions.

#### *Faith Initiatives*

- Several organizations involved in GARD efforts held events and meetings with the faith community around the state to bring awareness to dementia and bring education to these communities.

#### *Financial Exploitation Training for Law Enforcement and Banks*

- DAS, in partnership with the Alzheimer's Association and the Georgia Bureau of Investigation, developed the Georgia Abuse, Neglect and Exploitation (GANE) App for use by primary and secondary responders, including financial institutions.
- DAS, in collaboration with the Alzheimer's Association, facilitates a state-wide financial exploitation work group that meets quarterly to address issues specific to protecting at-risk adults' assets.

#### *Education for Physicians*

- The Georgia Chapter of the Alzheimer's Association, in collaboration with Emory Health System, created a dementia-education training that was recorded by the Georgia Department of Public Health (DPH) and presented via DPH's telemedicine network. The Alzheimer's Association provided Continuing Medical Education (CME) units and an evaluation through PROVA education for these trainings.
- In early 2016, a one-year report was produced which showed that 77 health care professionals had been through the training. The report indicated that the education proves to be impactful with participants showing a strong understanding of the basics of Alzheimer's disease and the Annual Medicare Wellness Visit after completing the activity.

#### *Dementia Capacity Webinars*

- DAS and the Rosalynn Carter Institute for Caregiving developed a series of 23 dementia-capacity webinars with tests. Funding was provided through a Systems Integration Grant awarded by the Administration on Community Living (ACL).

#### *Eden Alternative Training on Person-centered Dementia care*

- Georgia is one of five states to participate in a Federal Civil Monetary Penalty Funds Grant to support and further expand the National Partnership to Improve Dementia Care in Nursing Homes.



### *Alzheimer's Association - GA Chapter Partnering with DPH and DAS on Training Programs*

DPH, DAS and the Alzheimer's Association are working to incorporate cognitive information into existing training programs and train-the-trainer programs for topics such as diabetes, heart, stroke, falls prevention, etc. The three agencies will work collaboratively to ensure this occurs. An Alzheimer's/related dementias module will be incorporated into each of the departments' existing modules. The goal is to begin using the updated training by late Spring 2017 and provide it to staff, families and the general public.

### *Outreach & Partnerships Work Group*

This work group focused on three areas:

- Describing what individuals can do to help implement the State Plan via a Power Point Presentation to several groups, including the Georgia Gerontology Society and Retired State Employees
- Presenting the major findings of Alzheimer's Association International Conference at the Georgia Gerontology Society and inviting GARD members to share the message
- Presenting "Words Matter" at the GARD meeting and inviting GARD members to share the message.

### *State Plan Coordinator*

In June 2016, DAS hired a full-time coordinator to support State Plan work group efforts and to spearhead new initiatives.

### *Future Direction of GARD State Plan*

- Revitalization of work groups including the expansion of group membership and GARD "advisors"
- Achievement of short-term goals and incremental achievements of long-term goals
- Continuation of annual meeting of Advisory Council to review and direct GARD efforts

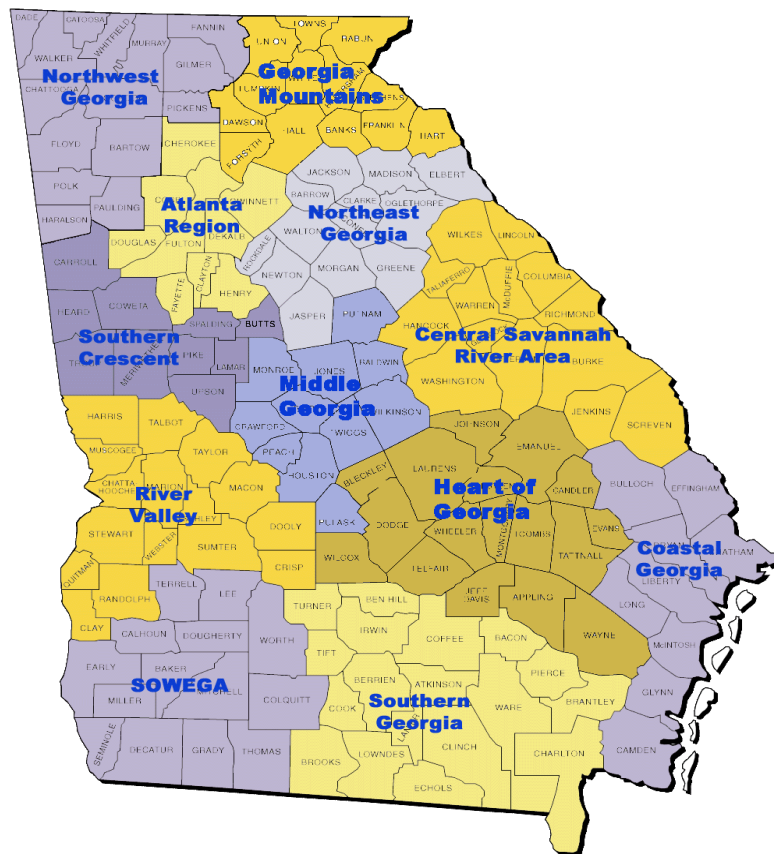
# Aging and Disability Resource Connection

The Georgia Aging and Disability Resource Connection (ADRC) is a partnership between DAS and multiple organizations, including state agencies and other public and private organizations. The ADRC has expanded to a No-Wrong-Door system for resources and services for all populations and all payers. Counselors screen most callers to identify preferences and needs, using the database of over 26,000 resources. Resources may be free, reduced-cost or private-pay, depending on need and finances.

## *ADRC Partners*

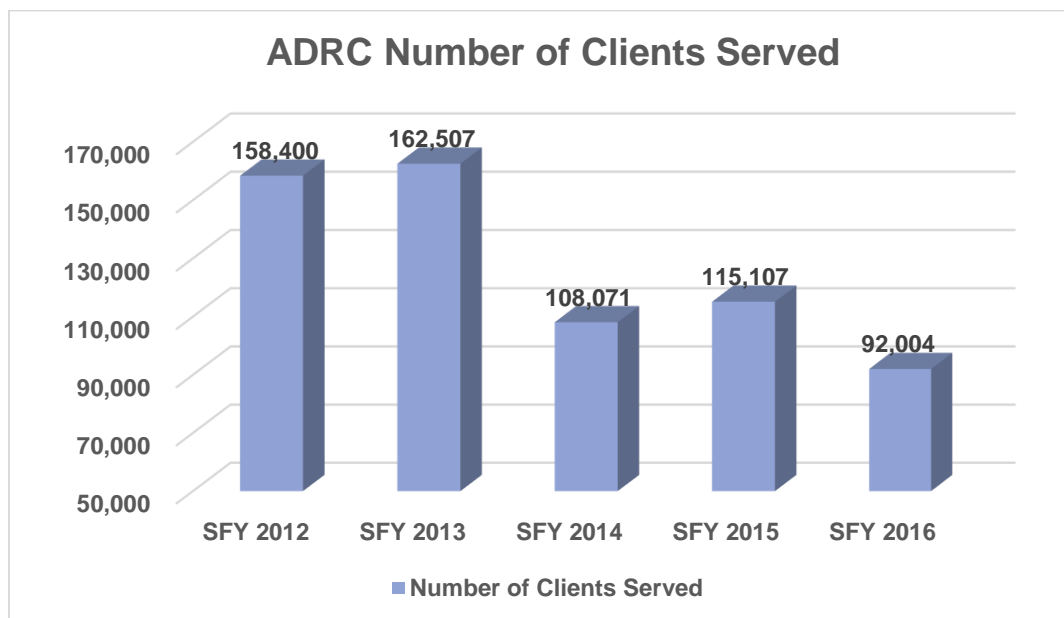
ADRCs have partnerships on the state and local level with other entities such as the Division of Family and Children Services, Department of Community Health, Long-Term Care Ombudsman, GeorgiaCares, Georgia Tech Tools for Life, the Alzheimer's Association, the Centers for Independent Living, Department of Public Health, the Brain and Spinal Injury Trust Fund Commission, the Georgia Hospital Association, the Georgia Council on Aging and Adult Protective Services.

## *ADRC Regions*



### *Information, Referral and Assistance\**

- In SFY 2016 the 12 ADRC sites served 58,807 older individuals looking for a variety of home and community-based services.
- During the same time period, 33,197 individuals with developmental, physical, or behavioral disabilities contacted the ADRC seeking information about long-term care options.
- Together, the ADRC sites served more than 92,004 clients seeking long-term care options for seniors and individuals with disabilities.



\*In October 2013, DAS implemented a new method of counting individual clients served in alignment with the federal reporting definition. This resulted in a decrease in the number of “individual clients.”

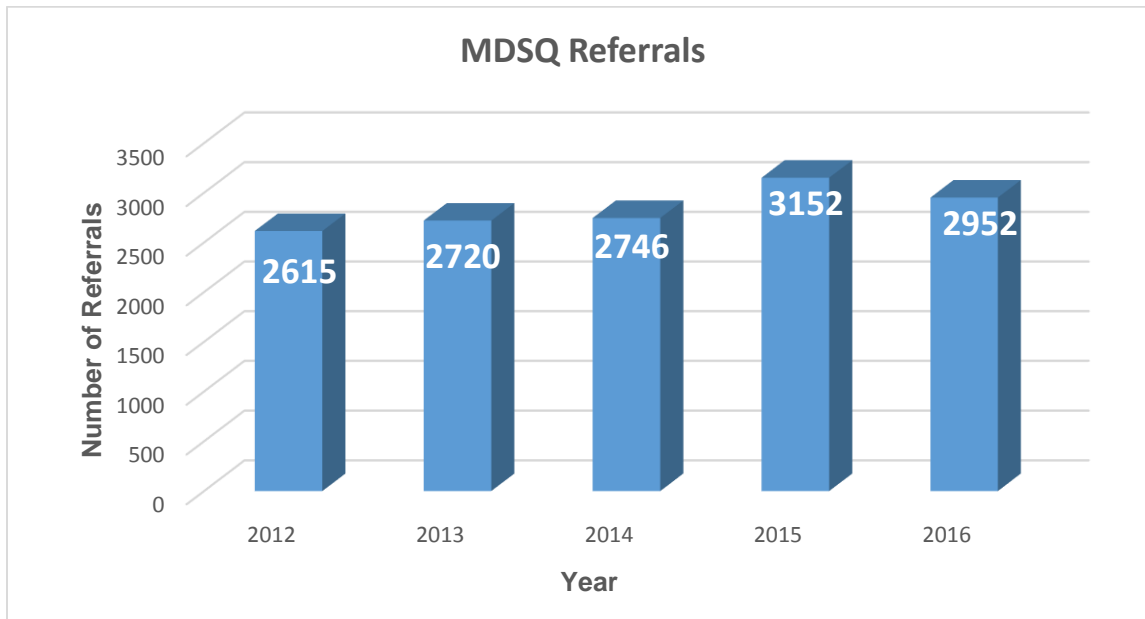
### *ADRC Options Counseling*

Options counseling is a person-centered, interactive decision-support process whereby individuals are supported in their deliberations to make informed long-term support choices in the context of their own preferences, strengths and values. The process includes developing action steps toward a goal or long-term services and support plan, and, when requested, assistance with accessing supports options. It includes the development of an action plan and follow-up with the individual. Options counseling is available to all persons regardless of income or financial assets.

- **DAS Options Counseling Certification:** In partnership with Boston University’s Center for Aging and Disability Education Research, DAS has created a required certification process for options counselors. As part of the options counseling certification process, six online courses worth three to five continuing education units each are completed along with a written and oral exam.

### *Two Categories of Options Counseling*

- **Minimum Data Set Section Q (MDSQ) Options Counseling:** Each of the ADRCs has full-time staff designated as MDSQ Options Counselors to provide options counseling to individuals residing in nursing homes who have indicated an interest in potentially returning to the community to live. Georgia has approximately 360 nursing homes that participate in the Section Q referral process, and the chart below shows SFY 2016 MDSQ referral data statewide.
- **Community Options Counseling:** Each of the ADRCs has staff dedicated as Community Options Counselors. Community Options Counselors work with individuals still residing in the community who demonstrate a higher risk of institutional placement based on key risk factors identified through the Centers for Disease Control and Prevention. Community Options Counselors work with these individuals in a holistic manner to research options to prolong community living.



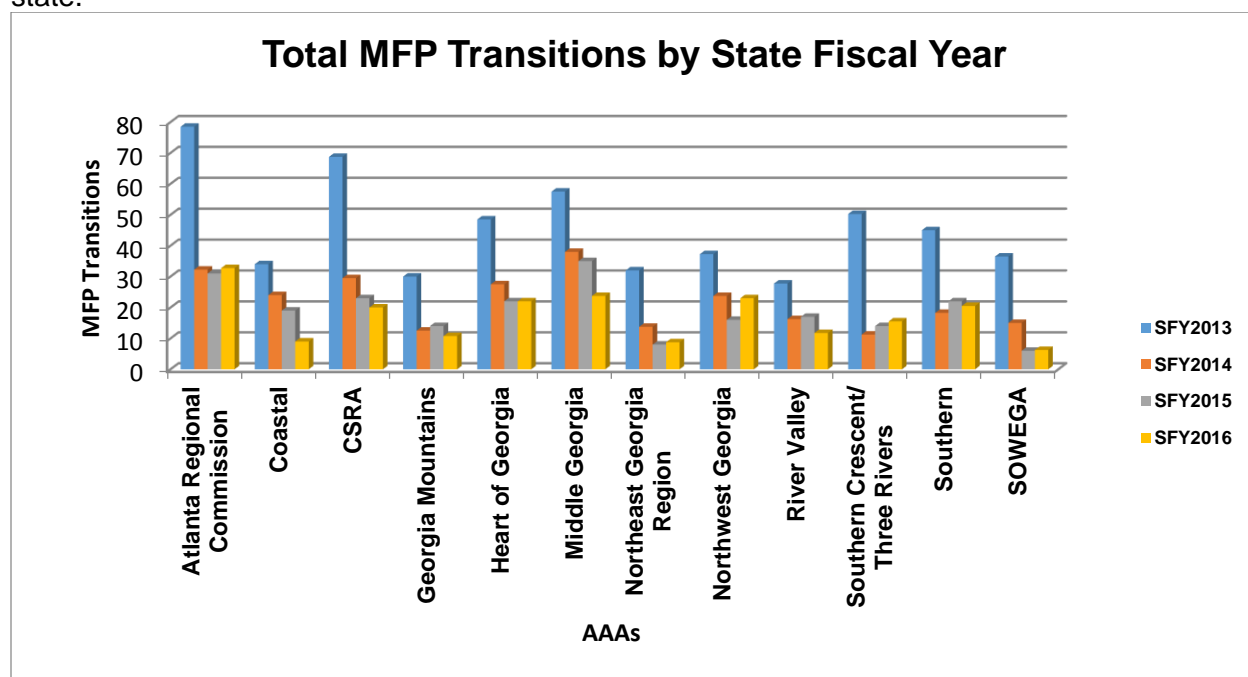
## Money Follows the Person

The Money Follows the Person (MFP) Program was authorized by the 2005 Deficit Reduction Act. Its primary purpose is to transition eligible individuals from long-term inpatient facilities back into community settings. The program is a demonstration grant through the Centers for Medicare and Medicaid Services (CMS). The Department of Community Health (DCH) is the administrator for Georgia. The first MFP transitions in Georgia occurred in 2008.

DCH currently partners with the Department of Behavioral Health and Developmental Disabilities (DBHDD) and DAS to execute the program statewide. DAS has been a part of MFP since July 2011.

### *MFP Transitions*

DAS uses the AAAs to coordinate local transitions with 19 transitional coordinators across the state.



### *Highlights and Accomplishments*

MFP allowed 204 people to transition from a long-term care facility to a more independent setting in the community in SFY 2016, allowing them the opportunity to lead a more fulfilling life in a setting of their choosing.

Evaluation of the MFP program is done through a quality-of-life survey. This survey was developed for CMS by Mathematica Policy Research, which publishes yearly reports on the quality of the MFP program. Data is analyzed locally by the Georgia State University Health Policy Research Center. Currently, MFP participants in Georgia report that they are happier and more satisfied with their lives after leaving the nursing home. The survey is separated into seven major categories, and MFP participants indicate that they are more satisfied in nearly every category. Also, respondents who are contacted after their second year in the community report that they are happier and are able to see family and friends more than they did prior to their transition. These results support the value nursing home transitions provide to the state.

DAS and the AAAs have partnered with two Centers for Independent Living (CIL) as the MFP transition coordination agents in their areas. CILs have performed nursing home transition for many years and their expertise has enhanced statewide capacity to provide MFP Transition Coordination.

The Department of Community Affairs, Department of Community Health (DCH), the Department of Behavioral Health and Developmental Disabilities (DBHDD), and DHS are partnering on three separate housing initiatives for individuals transitioning from long-term care facilities. Three voucher programs, that provide housing subsidies in every Georgia county, are targeted to the transitioning population, enabling them to have safe, affordable and accessible housing on the day they return home.

DAS and DCH are partnering to facilitate a transportation pilot program using Georgia Department of Transportation funds to identify transportation costs and needs of the MFP population. These funds assist individuals in obtaining vital records, housing searches, and transportation on the day-of-transition. Data gathered during the pilot will assist in planning for the long-term sustainability of nursing home transitions.

#### *Future Directions and Opportunities*

The MFP program is currently funded through 2020. DCH, DBHDD, and DHS are currently collaborating on a sustainability plan for the program. A formal sustainability plan was submitted to the Centers for Medicaid/Medicare Services (CMS) by DCH in April of 2015. CMS approved the plan and DCH will facilitate stakeholder meetings in SFY 2017.

## Long-Term Care Ombudsman

The Georgia Office of the State Long-Term Care Ombudsman (OSLTCO), administratively attached to the Department of Human Services, seeks to improve the quality of life for residents of long-term care facilities (nursing homes, intermediate care facilities for individuals with intellectual disabilities, personal care homes, assisted living communities and community living arrangements). The State Long-Term Care Ombudsman certifies and trains Ombudsman Representatives who work to resolve concerns of long-term care facility residents in facilities across the state. During SFY 2016, 77 individuals volunteered with the OSLTCO program.

Ombudsman Representatives advocate for what the resident wants when assisting to resolve complaints. Anyone may bring a complaint to the Ombudsman Representative. Any complaint specific to a resident requires that resident's permission to take action and must be resolved to the resident's satisfaction. Additional information can be obtained online at [www.georgiaombudsman.org](http://www.georgiaombudsman.org).

Volunteers play an important role in the effectiveness of the Long-Term Care Ombudsman Program (LTCOP). Certified Volunteer Ombudsman Representatives promote resident rights, empower residents and help solve complaints. Volunteers help to ensure residents are treated with dignity and respect and have a good quality of life and care. In the State of Georgia, the residents of 369 nursing facilities benefit from the routine visits of volunteer Ombudsman Representatives. Even with the recent growth in volunteer numbers, the program is always recruiting volunteers to increase resident access to Ombudsman Representatives.

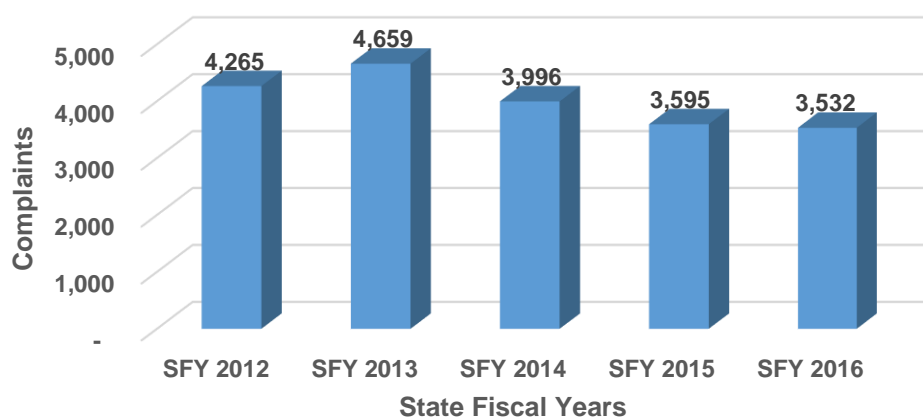
### *Persons Served*

Ombudsman representatives made 9,273 routine visits in SFY 2016, serving 102,409 residents. A documented 10,239 individuals and facility staff received information and consultation regarding long-term care options, public benefits, residents' rights, etc.

### *Complaints Handled by Ombudsman Representatives*

In SFY 2016, the Ombudsman Program received 3,532 complaints.

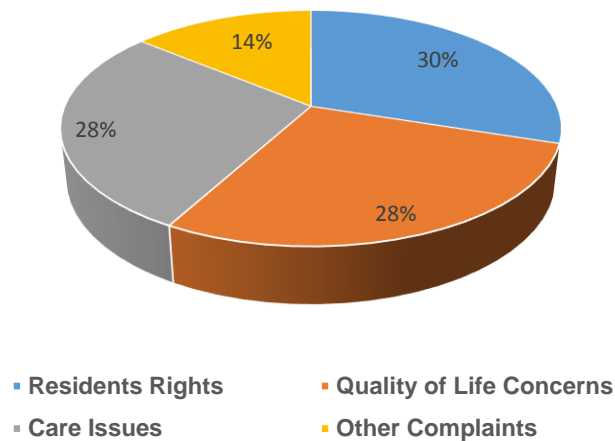
## Complaints Handled by Ombudsmen



### *Types of Complaints*

Residents' rights (30 percent), quality of life concerns (28 percent), and care issues (28 percent) accounted for 83 percent of the complaints received by representatives of the OSLTCO in SFY 2016.

### Types of Complaints SFY 2016



### *OSLTCO Accomplishments*

- From January through June of 2016, Ombudsman Representatives assisted in the relocation of approximately 400 residents of five (5) nursing homes that were decertified from the Medicare and Medicaid program. Ombudsman Representatives were present at the facilities for the weeks leading up to the decertification date to assist each resident with making his or her relocation preferences known.
- Representatives of the OSLTCO provide services to residents who move out of nursing homes to the community with the Money Follows the Person (MFP) program. Home Care Ombudsmen (HCO) provide advocacy services to MFP participants. According to the July 2015 Semiannual Analytic Results of the MFP Program Evaluation compiled by the Georgia Health Policy Center, HCO was the most frequently accessed service.
- OSLTCO staff and Ombudsman Representatives collaborate with the Healthcare Facility Regulation Division of DCH, law enforcement and DAS Adult Protective Services to help residents of unlicensed Personal Care Homes (PCHs) relocate when such PCHs are closed.
- OSLTCO staff made presentations at the American Society on Aging and the Georgia Gerontology Society conferences.
- During the 2016 Georgia General Assembly session, the State Long-Term Care Ombudsman advocated for more protections for residents of skilled nursing facilities.
- New federal regulations for Long-Term Care Ombudsman programs were approved in February 2015 and took effect July 1, 2016. The OSLTCO is updating the OSLTCO policies and procedures to reflect the requirements of the regulations.

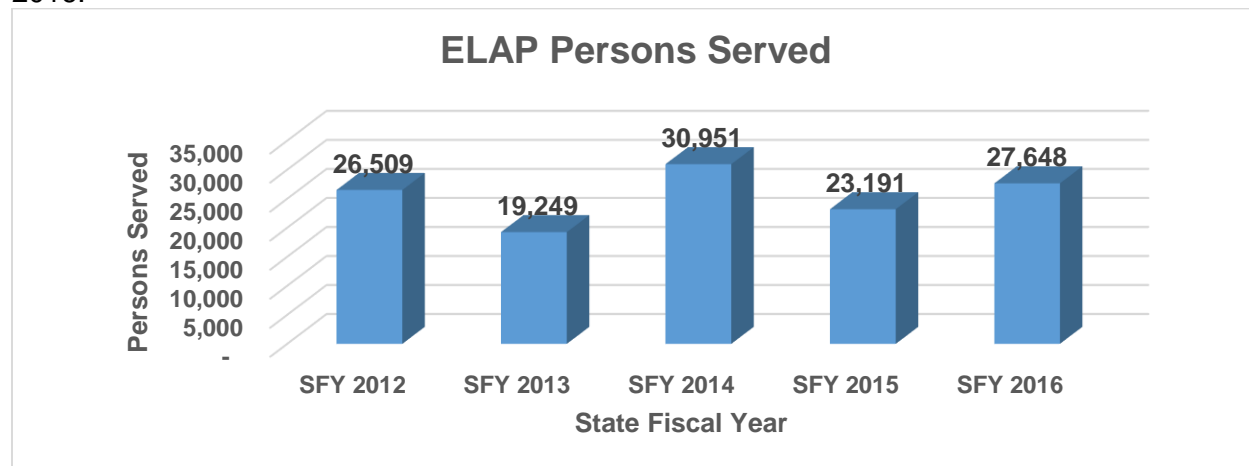


## Elderly Legal Assistance Program

The Georgia Elderly Legal Assistance Program (ELAP) serves persons 60 years of age and older by providing legal representation, information and education in civil legal matters throughout the State of Georgia. Services are performed by legal providers throughout the state, who contract with the state's 12 Area Agencies on Aging.

### *Persons Served*

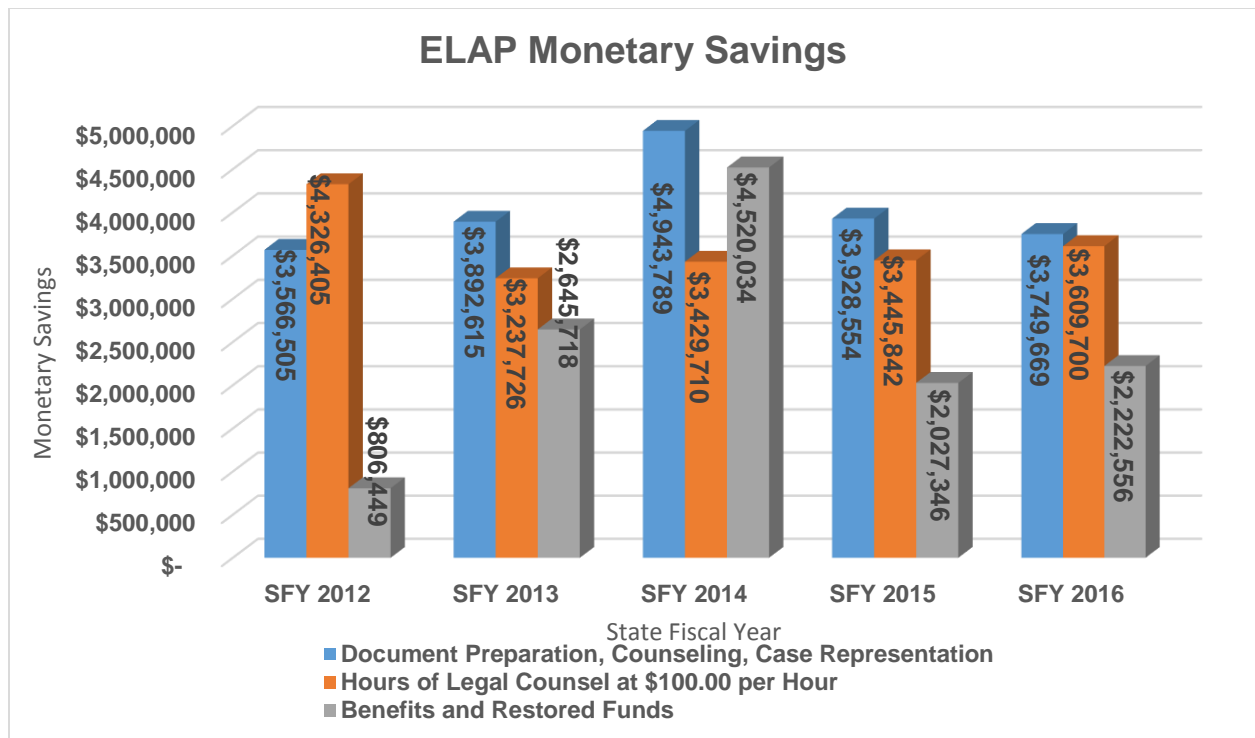
Legal representation, information and/or education was provided to 27,648 seniors during SFY 2016.



### *Monetary Benefits Realized*

In SFY 2016, ELAP saved older Georgians \$9,581,925 by providing document preparation, legal counseling and case representation.

Included in total savings was \$3,609,700 obtained by providing approximately 36,097 hours of legal counseling, calculated at a conservative \$100.00 per hour.

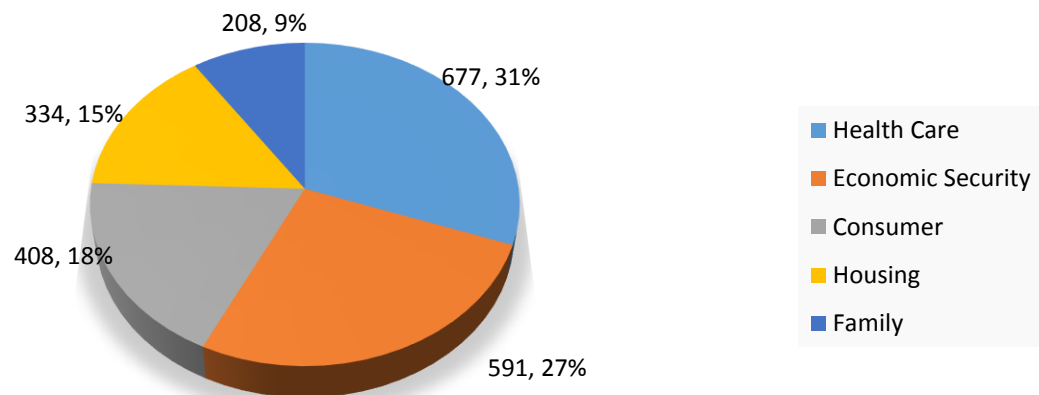


#### Top Five Primary Case Types Closed – SFY 2016

The Number and type of cases are as follows:

1. Health care: 677, which includes Medicaid eligibility, nursing home Medicaid eligibility and qualified Medicare beneficiaries
2. Economic security: 591, which includes Supplemental Nutrition Assistance Program (SNAP)/Food Stamps (FS), Social Security Retirement and Low Income Home Energy Assistance Program (LIHEAP)/Public Utility
3. Consumer: 408, which includes collections, contracts and bankruptcy/debt relief
4. Housing : 334, which includes homeowner/real property, mortgage foreclosure and other housing
5. Family: 208, which includes family violence, temporary protective orders, guardianship of children and birth certificate issues

### Top Five Categories of Closed ELAP Cases - SFY 2016



### *Community Education Offered*

Community Education is a method of prevention that helps seniors avoid more costly, time-consuming legal problems. In SFY 2016, 520 legal education sessions were conducted by ELAP.

The top seven topics covered in community education sessions in SFY 2016 were:

1. Legal needs/ELAP- Georgia Legal Services Project – Senior Citizens Law Project
2. Consumer scams/fraud
3. SNAP/FS/Medical Deduction
4. Medicare/Medigap/Part D
5. Wills/probate and estates
6. Emergency disaster preparation
7. Advance directives

### *Success Stories*

1. An 80-year-old woman's husband died, leaving creditors and the home in his name. A cancer insurance policy sent her checks for the proceeds of the policy benefits, but the checks were made payable to the husband's estate. ELAP assisted this client by probating her husband's will and opening an estate account so that the client could deposit and gain access to the insurance funds. A year's support was also filed so that the husband's estate could be set aside for the client's sole benefit.
2. A 69-year-old man received a dispossessory for nonpayment of his rent. ELAP accepted representation and filed an answer and a counterclaim on the client's behalf because the property manager had given him a mattress infested with bed bugs and then failed to treat for bed bugs after treatment was requested prior to trial. The landlord rescinded the dispossessory, and, at trial, the judge awarded client \$210.00 on the counterclaim that was to be paid by a waiver of the client's monthly rent amount. The landlord was also ordered to treat the client's apartment for bed bugs.
3. ELAP represented a 63-year-old client to obtain rescission of a foreclosure sale which occurred as a result of his mortgage servicer's failure to honor a permanent loan modification he signed shortly before the servicing of his loan was transferred. Once the foreclosure was rescinded, ELAP assisted the client in obtaining a significantly more favorable loan modification which reduced the principle balance from \$110,045 to \$26,640, reduced the interest rate from 5.125 percent to 4.125 percent and reduced the monthly principle and interest payment from \$640.70 to \$129.11. The equity saved on the home was \$13,360.

### *Accomplishments*

- In SFY 2016, the Georgia Elderly Legal Assistance Program served 27,513 people through case representation, community education and information and referral. This represented a nearly 20 percent increase from the previous fiscal year.

#### *Future Directions and Opportunities*

- For SFY 2017, ELAP will continue to focus on educating seniors of the availability of benefits and resources that are oftentimes overlooked or passed by for lack of information. These benefits and resources, such as Senior SNAP, and Medicare Savings Programs, can add considerably to a senior's household.

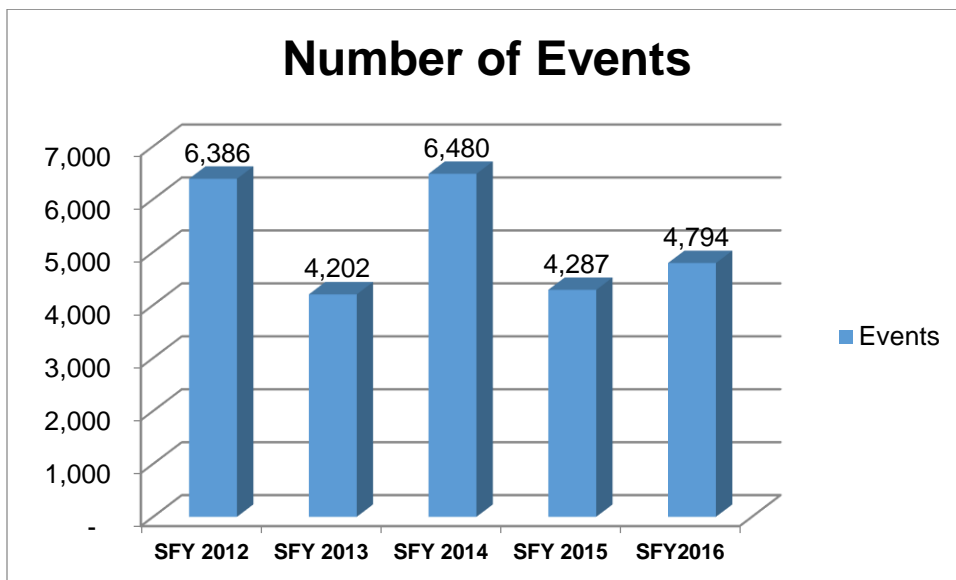
# GeorgiaCares

GeorgiaCares is Georgia's State Health Insurance Assistance Program (SHIP) and Senior Medicare Patrol (SMP), available to Georgia's 1.5 million Medicare beneficiaries. The GeorgiaCares program is administered through the Department of Human Services Division of Aging Services. The Division contracts with 10 Area Agencies on Aging and the Georgia Legal Services Program to provide services locally.

GeorgiaCares SHIP is a volunteer-based program that provides free, unbiased and accurate information and assistance to Medicare beneficiaries and their caregivers with health and drug plans.

GeorgiaCares SMP is a volunteer-based program to empower and assist Medicare beneficiaries, their families, and caregivers to prevent, detect, and report health care fraud, errors and abuse through outreach, counseling and education

## *Outreach and Media Events*

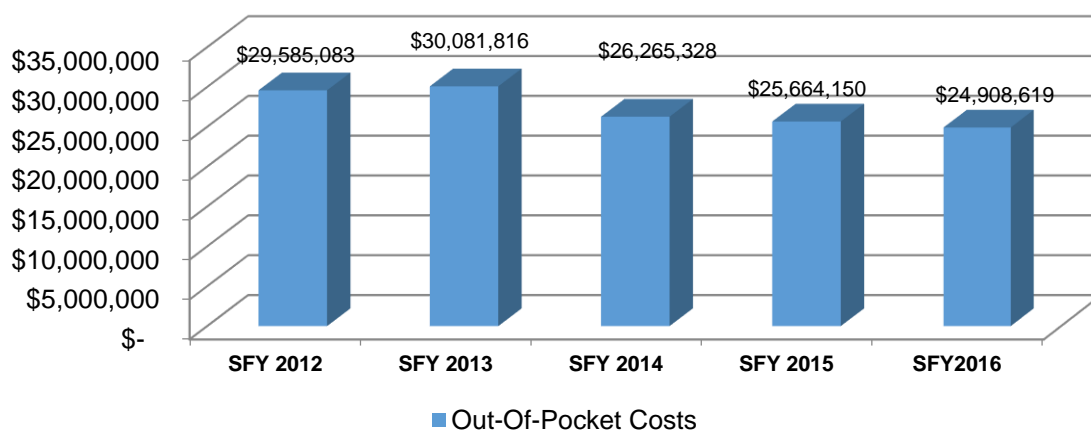


In SFY 2016, GeorgiaCares conducted a total of 4,794 outreach events and 774 media events (duplicative TV/cable, radio, newspaper viewership) reaching 6,153,415 individuals regarding health insurance information on Medicare, Medicaid, prescription assistance, Medigap, long-term care services, other health insurance needs and Medicare Fraud prevention.

In SFY 2016, 155 trained volunteers served Medicare beneficiaries and donated over 26,144 hours to counsel the public.

A total of 35,945 clients received one-on-one counseling on Medicare health and drug benefits, healthcare rights and protection and help to apply for financial assistance programs.

## Out-Of-Pocket Costs of Medicare Beneficiaries



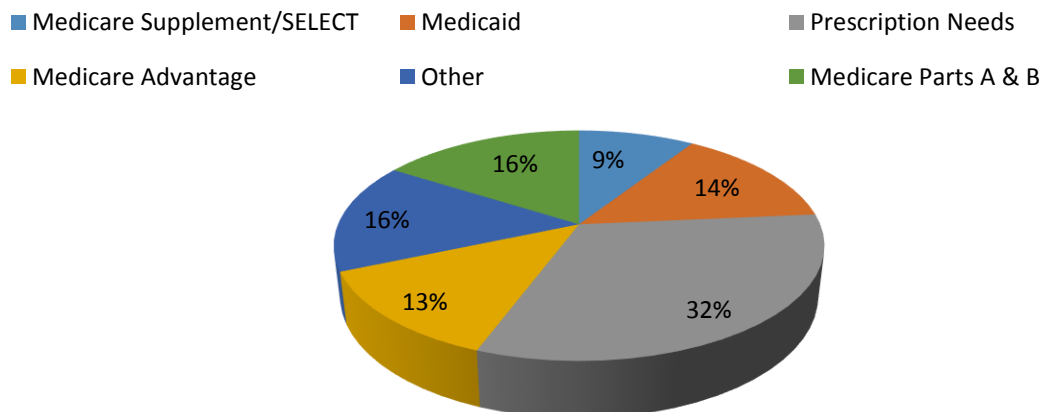
Over the last three years, GeorgiaCares enabled clients to save more than \$24 million in health insurance and related expenses.

In SFY 2016, GeorgiaCares saved beneficiaries \$24,908,619 in out-of-pocket expenses.

### *Topics Discussed with GeorgiaCares Clients*

In SFY 2016, 30 percent of GeorgiaCares calls dealt with Medicare beneficiaries needing prescription assistance through Medicare Part C, Part D, and patient assistance programs.

## Percent of Calls by Topic - SFY 2016



### *Highlights and Accomplishments*

- As of July 1, 2016, the Heart of Georgia Altamaha has expanded the GeorgiaCares program from 16 to 31 counties.
- GeorgiaCares has established 156 Off-Site Counseling Stations to assist Medicare beneficiaries, increased face-to-face contacts and established community partnerships.
- GeorgiaCares is in its fifth year of partnership with Fort Valley State University (FVSU) and completed 16 outreach and education events for Medicare beneficiaries in hard-to-reach rural areas last year. FVSU's mobile technology unit is equipped with 20 computer

stations with internet access, enabling GeorgiaCares counselors to complete enrollment into Medicare health and drug plans and/or apply for financial saving programs on the spot.

- GeorgiaCares publishes the monthly GeorgiaCares Referring Educating and Training News (G.R.E.A.T.) newsletter and Medicare Messenger. These monthly publications provide information on Medicare, statewide outreach and enrollment events, and help Medicare beneficiaries identify healthcare scams.
- Established 92 off-site counseling stations to assist beneficiaries.
- Provided outreach and education to 88,242 clients between 10/1/15 and 9/30/16.
- Provided Medicare counseling services to 29,669 clients between 10/1/15 and 9/30/16.
- Maintained successful partnership with Fort Valley State University Mobile Technology Unit to reach hard to serve populations

#### *Future Directions and Opportunities*

- Centralize calls to increase the programs' capacity and services.
- Implement volunteer risk and program management policies and procedures.
- Establish partnerships with Federally Qualified Health Centers (FGHCs) to reach underserved populations.

# Adult Protective Services Program of DAS

The Adult Protective Services (APS) Program is mandated under the Disabled Adults and Elder Persons Protection Act to address situations of domestic abuse, neglect or exploitation of persons with disabilities age of 18 and above, and elders over the age of 65 who are not residents of long-term care facilities. The purpose of the APS program is to investigate reports alleging abuse, neglect or exploitation and to prevent recurrence through the provision of protective services interventions.

## *Central Intake*

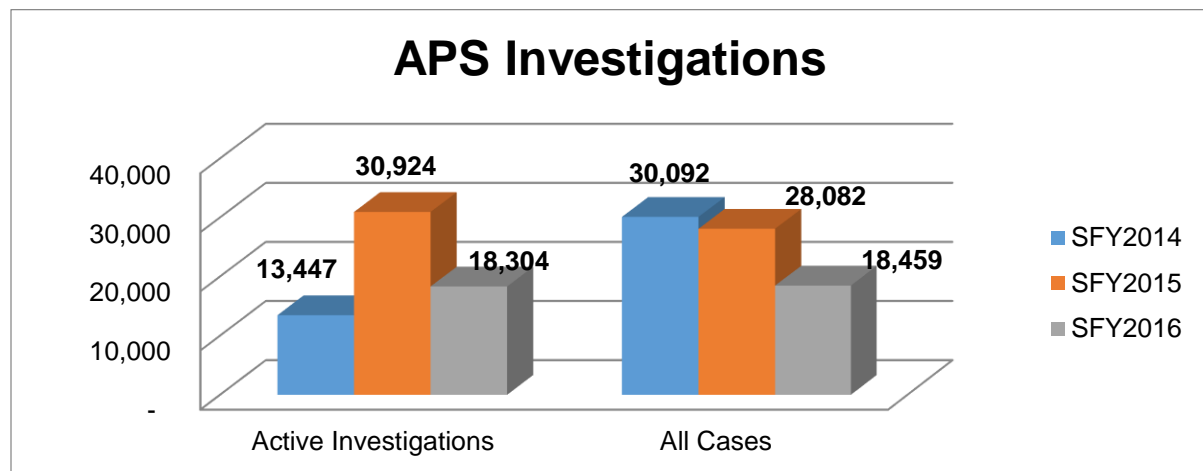
The APS Program receives reports of abuse, neglect and/or exploitation through its Central Intake Unit. Twelve APS Specialists handle calls through a statewide toll-free number (1-866-552-4464) and respond to fax and web-based reports from the community to determine if reports meet criteria for investigation. Central Intake staff also provide limited telephone case management and/or make referrals to community resources, including those in the aging network.

During SFY 2016 Central Intake staff received a total of 32,796 calls on the toll-free hotline; 4,832 faxed reports and 7,627 web reports.

- A total of 16,687 new reports were investigated
- Central Intake staff provided limited case management intervention services on reports that did not meet APS criteria for investigation.
- The majority of the call volume handled by Central Intake consisted of handling information from reporters and coordinating referrals to community resources and other service providers to ensure callers' issues were addressed.

## *APS Field Operations*

APS uses a regional-based multi-disciplinary approach to meet the needs of vulnerable disabled and senior adults in the State of Georgia. APS regions are aligned with the aging network planning and service areas, and reside in four districts with 135 APS case managers who handle both investigations and case management services.





APS averaged 1,851 active investigations per month during SFY 2016. The number of APS ongoing case management services declined from 261 in April 2015\*\* to 155 in July 2016\* due to the closure of many long-term ongoing cases and fewer investigations placed into ongoing case management. Caseload data represents unduplicated cases -- investigations and ongoing (July-April); active investigations are those investigations active during the month (July 2015 – June 2016)

\*Average active investigations data represents duplicated cases when an investigation carried over multiple months

\*\*Data for all cases is not available in Harmony for May and June 2015

#### *APS Emergency Relocation Funds*

DAS was appropriated \$400,000 to provide emergency relocation services to individuals who need relocation from an abusive situation. Emergency Relocation Funds (ERF) can be used either to relocate APS clients or DHS wards to safe places or to provide for their needs in an emergency situation to allow them to remain at home.

#### *Highlights and Accomplishments*

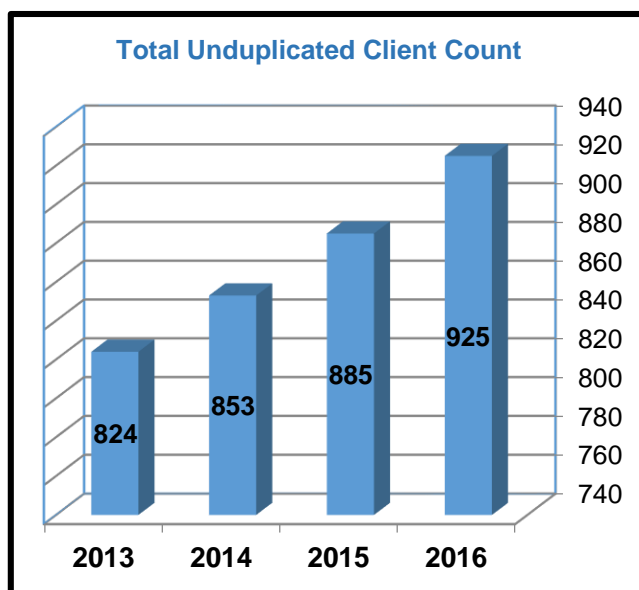
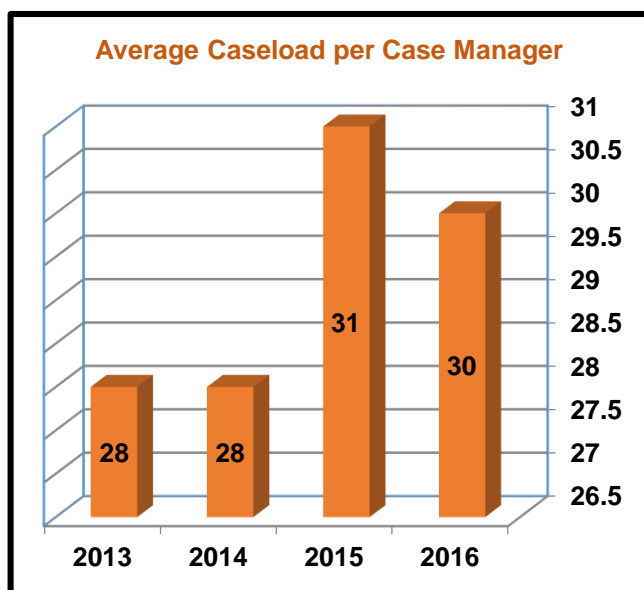
- Expanded the APS career ladder by hiring 12 Lead Worker positions
- Began formal collaborations with DBHDD and local leadership to address safety and services to clients needing mental health support

## Public Guardianship Office (PGO)

When there is no willing or suitable person to act as the guardian for an adult whom the probate court has determined lacks sufficient capacity to make or communicate significant responsible decisions concerning health or safety, DHS may be appointed as the guardian of last resort. The Public Guardianship Office (PGO) of the Division of Aging Services (DAS) is assigned oversight and delivery of guardianship case management services on behalf of DHS.

Guardianship case managers act as surrogate decision-makers and advocates for persons under guardianship, and also coordinate and monitor all services needed for the support, care, education, health, and welfare of guardianship clients. During SFY 2016, PGO managed 925 guardianship cases. PGO case managers average caseloads of 30 clients.

PGO is led by a program administrator and a field operations manager. The program is supported by a resource and training specialist and one a program assistant. PGO has three supervisors who manage teams, on average, of 11 case managers. There were 26 case manager positions in SFY 2016.



DHS is not authorized by law to serve as a conservator of adults or as temporary medical consent guardian. DHS is mandated to manage certain aspects of public guardianship operations, which include setting standards for criminal and credit history checks on public guardians, maintaining a registry of public guardians, and administering any funds appropriated for compensation of public guardians. Although there is no current funding for these operations, PGO is poised to fulfill these duties should funds be appropriated.

### *Highlights and Accomplishments*

During SFY 2016, PGO successes included:

- The Field Operations Manager was elevated to the Secretary-Treasurer position of the Board of Directors of the National Guardianship Association
- Established three lead worker positions, improving oversight and building upon the office career ladder.
- Added requirement for all staff to complete Mental Health First Aid training.
- Coordinated a holiday gift drive that, through generous community donations, was the most successful holiday gift drive to date.
- Continued to participate in multidisciplinary teams and partnerships with probate court judges to safeguard the rights of persons with mental illness.
- Maintained operation of the Statewide Working Interdisciplinary Network of Guardianship Stakeholders (WINGS).
- Trained staff on areas that affect the lives of persons under guardianship, including obtaining services from the Georgia Vocational Rehabilitation Agency and the Georgia Department of Behavioral Health and Developmental Disabilities' Assertive Community Treatment Program.

### *Future Direction and Opportunities*

- Develop and implement PGO New Worker Training and refresher course for veteran workers.
- Develop new PGO policies to ensure service deliveries are more effective.
- Develop case plans for all individuals under Guardianship utilizing person-centered planning

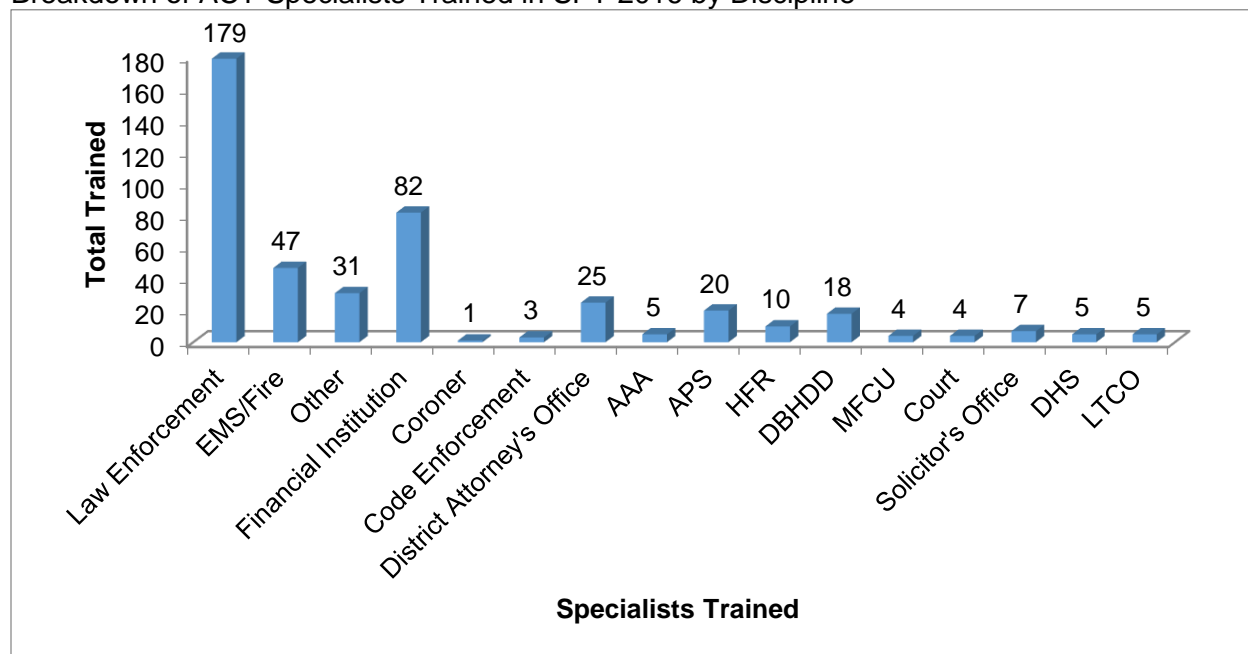
## **DAS Forensic Special Initiatives Unit**

The Forensic Special Investigations Unit (FSIU) provides support to DHS and other state, local and federal partners by identifying and addressing system gaps and developing process improvements to protect Georgia's at-risk adults from abuse, neglect and exploitation. Some of the services provided by FSIU include training, outreach, technical assistance, and case consultation and review.

#### *Highlights and Accomplishments*

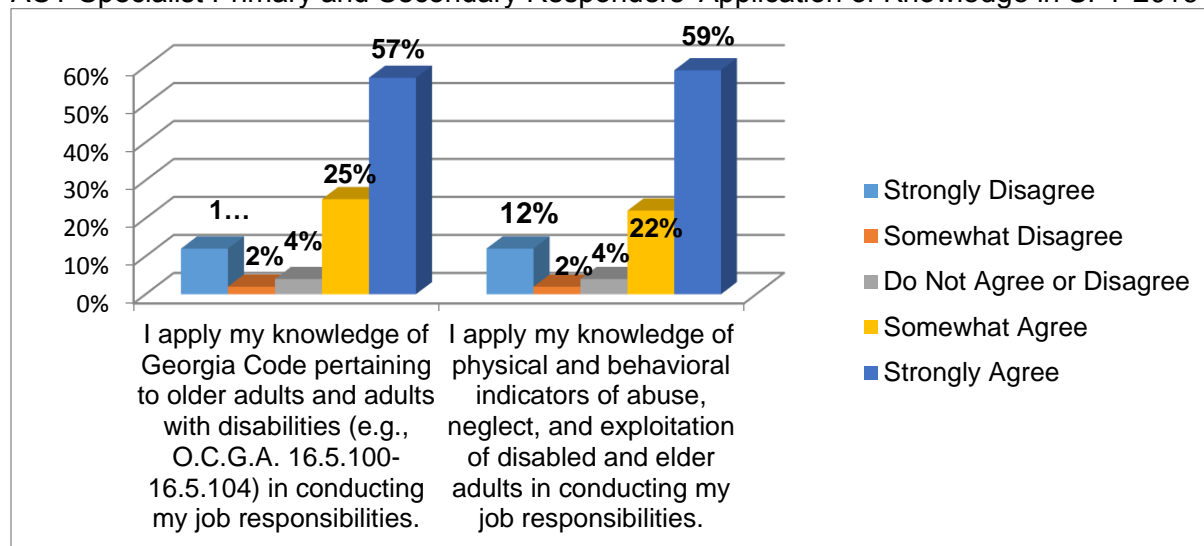
- In April 2011, FSIU deployed the At-Risk Adult Crime Tactics (ACT) Certification training program to primary and secondary responders who respond to crimes targeting at-risk adults. ACT provides participants basic knowledge and skills to recognize and respond to crimes involving the abuse, neglect and exploitation of older adults and adults with disabilities. During SFY 2016, 446 participants became certified ACT Specialists. A breakdown of ACT Specialists certified during SFY 2016 by professional discipline is presented in the chart below.

Breakdown of ACT Specialists Trained in SFY 2016 by Discipline



- Three questions were asked of participants before and after completion of ACT training. There was a 17 percent increase in test scores from the pre-test to the post-test.
- ACT Specialists, who are primary or secondary responders to at-risk adult abuse, neglect and exploitation, received training in SFY 2016 and completed a survey six months after certification to gauge if the material has been applied in their work. Results are displayed in the chart on the following page.

## ACT Specialist Primary and Secondary Responders' Application of Knowledge in SFY 2016\*



\*Due to the six-month span between the class and the survey, not all participants in SFY 2016 ACT class have been surveyed at the date of this publication. To date, 296 participants have responded.

### Outreach and Technical Assistance

- At-risk adult abuse, neglect and exploitation training and outreach was provided to more than 5,711 people, including attendees at the National Adult Protective Services Association Conference, the National Aging in Place Council, the ADRC Healthy Communities Conference, the Georgia Gerontology Society, the Georgia Health Care Association, the Emory School of Nursing, Georgia Public Safety Training, the Georgia Association of Private Investigators Conference, the Georgia Retailers Association Conference, the Victim Witness Assistance Program Conference, law enforcement, judges, prosecutors, medical examiners/coroners, financial institutions, social workers, long-term care providers, other professionals and the general public. Videos available on the DAS YouTube channel continue to be viewed across the state.
- Technical assistance and case reviews were provided to over 397 individuals. As a result of training, technical assistance and case consultation and review, FSIU has been able to track outcomes of several law enforcement cases during SFY 2016. Of these cases, individuals were charged and/or prosecuted with various crimes including, but not limited to:
  - exploitation and intimidation of a disabled adult, elder person or resident;
  - operating an unlicensed personal care home;
  - false imprisonment; financial transaction card fraud;
  - identity theft; unauthorized use of a financial card;
  - criminal receipt of goods and services fraudulently obtained, and
  - forgery.

In addition to these cases, FSIU has received numerous communications from law enforcement and other professionals crediting ACT training for assisting in cases. FSIU continues to request specific case outcomes to track the increase in these cases.

### Collaborations

FSIU also continues to identify opportunities for collaboration. A few examples of

collaboration in SFY 2016:

- FSIU co-facilitates an Abuse, Neglect & Exploitation working group with the Georgia Bureau of Investigation
  - Legislative Committee – FSIU and criminal justice professionals identified possible items for legislative consideration
  - Financial Exploitation Task Force (FinExWG) – works with local and state representatives of financial institutions, law enforcement, Adult Protective Services, advocacy agencies and more to address financial exploitation of at-risk adults. Currently the FinExWG is developing training for financial institutions on recognizing and responding to financial exploitation of vulnerable adults. FSIU completed a one-day seminar on Financial Crimes of At-Risk Adults co-hosted with DHS, GBI, Georgia Sheriffs' Association, Association of the Chiefs of Police and Prosecuting Attorneys' Council of Georgia.
- FSIU facilitates monthly Georgia Unlicensed Personal Care Home Investigation/Relocation Teams
- Participation in the Cobb County Elder Abuse Task Force – Multi-Jurisdictional Task Force
- Represented Georgia on the National APS Technical Assistance Team
- Presented a one-day seminar on Crimes in Facilities co-hosted with the U.S. Attorney's Office
- Participated on the Violence Prevention Task Force of Emory's Injury Prevention Research Center to address issues related to abuse, neglect and exploitation of older adults and adults with disabilities.
- Began quarterly WebEx training on mandated reporting, which is open to the general public and professional organizations.
- Presented classes on the Financial Exploitation of At-Risk Adults quarterly at the Georgia Public Safety Training Center for law enforcement officers.
- Attendance at Metro Pol/Metro Tech, monthly law enforcement meetings, to network with fraud and financial crime investigators in the public and private sectors to provide assistance on At-Risk Adult crimes.
- Presented classes on forensic nursing and abuse, neglect and exploitation of at risk adults at the Emory School of Nursing.

### *Suspicious Deaths, Unlicensed Care Homes and Human Trafficking*

In an effort to increase prosecutions of perpetrators of fatal neglect conversations, meetings and in-service training sessions were held for medical examiners, coroners and prosecutors to increase the understanding of causation from both a medical and legal point of view.

FSIU was invited to present at regional and national conferences on the issue of unlicensed personal care homes/human trafficking, as it is a growing issue in Georgia and around the country. These presentations have resulted in:

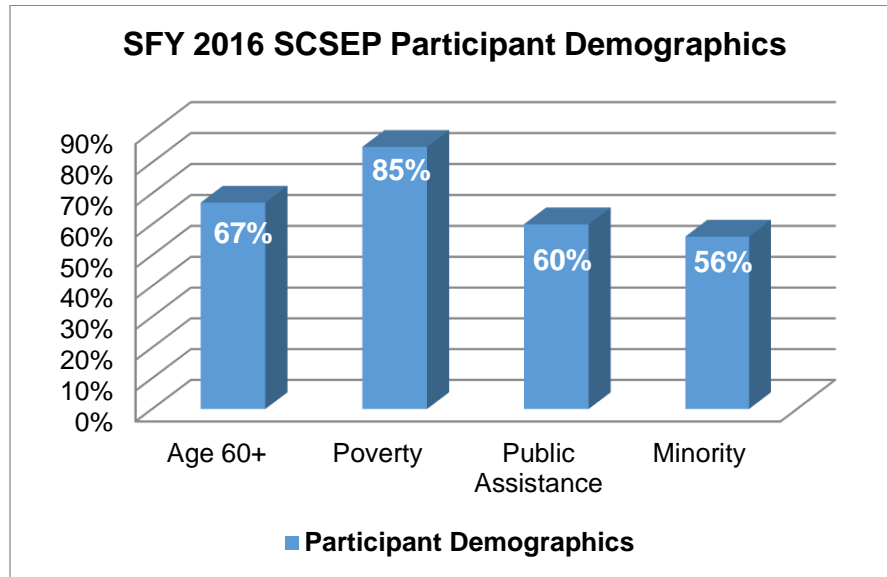
- United States Health and Human Services commissioning preliminary research on unlicensed care homes in three states including Georgia.
- An invitation for FSIU/GBI to meet with the United States Department of Justice to present and discuss this issue.
- Meeting with Assistant Attorney General specializing in Human Trafficking to discuss recent changes in law and impact on at-risk adult victims of human trafficking.
- Case assistance on the largest unlicensed personal care home case to date in Georgia.

- Training for prosecutors by prosecutors: To increase prosecutor awareness of nuances specific to crimes targeting older adults and adults with disabilities, CLE training is being developed by prosecutors with significant experience in these cases to be deployed regionally.

# Senior Community Service Employment Program

The Senior Community Service Employment Program (SCSEP) provides useful part-time community service assignments and training for unemployed, low-income older Georgians and helps them obtain paid employment. While participants develop job-related skills and earn minimum wage, the community directly benefits from the work they perform.

*Persons Served:*



- Although participants can be as young as 55 years of age, 67 percent were over the age of 60.
- Eighty-five percent (85 percent) of persons enrolled had incomes below the federal poverty level.
- Sixty percent (60 percent) of enrollees were receiving public assistance.
- Fifty-six percent (56 percent) of enrollees were minorities, compared to 44 percent nationally.

## *Highlights and Accomplishments*

The U.S. Department of Labor (DOL) establishes indicators for each state to measure the SCSEP program performance. The performance indicators measure six performance categories. In Program Year (PY) 2015\*, Georgia exceeded or came close to achieving the following DOL targets. (\*Program Year and SFY run on the same period but the official year number lags.)

- **Community Service Goal:** This measure reports the number of hours of community service provided by the SCSEP program. For PY 2015, the DOL target goal for Georgia was 75.4 percent (participants should provide a minimum of 75 percent of the total community services hours funded by the DOL for Georgia). Georgia surpassed this goal with a score of 76.3 percent.
- **Entered Employment Goal:** This measure reports the rate of participants who exit the program because they obtained employment, compared with those who exited for other



reasons. The DOL target rate for Georgia for PY 2015 was 44.7 percent. Georgia exceeded this goal with a 52.1 percent entered employment rate.

- **Employment Retention Rate Goal:** This measure reports the rate of participants who retain employment for at least six months after their work start date. The DOL target goal was 72.7 percent (72.7 percent of all participants who found employment in a given quarter retained their employment for at least six more months). Georgia did not reach this goal, achieving 68.9 percent employment retention rate.
- **Service Level Goal:** The service level goal shows the percent of enrollment in Georgia's 198 authorized SCSEP positions for PY 2015. The DOL goal for Georgia was 158.9 percent enrollment. Georgia achieved 151.5 percent enrollment.
- **Earnings Goal:** DOL sets this goal to determine the average earnings of participants who enter and retain employment for three quarters after their exit. The DOL average earnings goal for Georgia for PY 2015 was \$7,317.00. Georgia's average earnings totaled \$5,846.00.
- **Most-In-Need Goal:** The most-in-need measure reflects the average number of employment barriers a participant faces, such as disability, veteran status, age 65 or older, limited English proficiency, or low literacy skills. DOL requires that participants with these employment barriers be given priority as "most-in-need" participants. Georgia achieved an average number of 2.61 barriers; DOL's goal is 2.71 barriers.

### *Community Benefits*

Participants' training wages contribute to the local economy and reduce their dependence on public benefits programs. Participants provided 157,057 hours of service to community organizations, including 54,154 hours of service to organizations that serve older adults. Twenty-four percent (24 percent) of PY 2015 participants were individuals with disabilities. Twenty-two percent (22 percent) of participants were homeless or at risk of homelessness at time of enrollment.

### *Future Directions and Opportunities*

DAS, SCSEP grantees, and sub-projects will undertake the following strategies to improve SCSEP services:

- SCSEP grantees and sub-projects will identify agencies that can provide technical assistance to SCSEP projects about entrepreneurship and microenterprise.
- DAS will provide intensive training and technical assistance to SCSEP staff about specific core performance goals, tools to diagnose performance, and strategies to improve performance.
- SCSEP grantees and sub-projects will identify agencies and organizations to implement area-specific outreach and recruitment methods to increase services to underserved populations, such as: Hispanic/Latino, Asian and Veteran older adults.

### *SCSEP Success Stories*

- A 60+ female participant enrolled at Georgia Northwestern Technical College (GNTC) in their commercial trucking class and earned her CDL to drive an 18-wheel truck. The

tuition for class was arranged through the WIA program at GNTC. She got her DOT physical and passed it. She then got a job with a trucking company and was sent to do her supervised training for the company.

- Prior to his participation in SCSEP, Mr. D. practiced real estate for over 30 years. After retiring, he saw such a need for mentoring in the community that he decided to seek programs that allowed volunteering and serving the community. Mr. D. is now in the process of creating a male mentorship group for young males experiencing substance abuse, behavioral issues, and/or a lack of role models and a support system. Mr. D. also seeks to use the mentorship group as a means to show young males how to apply for college along with finding other healthy alternatives for young males who are not interested in college. He attends the monthly collaborative meetings around the region to learn, network, and educate partners and organizations on the needs of the community and expand his mentorship program in the region. Mr. D. is currently discussing a partnership with Tuskegee University's Agriculture Department. He has been taking horticulture and small farming classes from UGA (Griffin Campus) to learn how to produce organic soil, which offers more health and nutrient benefits than chemical soil, such as less toxic food, healthier air, and fewer chances for contamination of land, food, and water. Mr. D's desire is to produce his own organic soil farm, and Tuskegee University is eager for him to teach others what he's learned.
- Mr. A. started on the SCSEP program in December 2015 in need of current job skills training. His first training assignment was located at a school for special needs children, which initially required some training in specific behavior modification techniques and teaching methods. Although the SCSEP program offers training in many career paths, Mr. A. was determined to gain some more recent experience in teaching. He was placed at a school for special needs children as an assistant instructor. It was reported by his school supervisors shortly after he began his training that he was quickly adapting to the diverse learning environment of the school, which differed from his past experience in the public school system. His supervisors described his presence in the classroom as warm, enthusiastic and professional with the students. He frequently shared his gratitude with SCSEP staff for the opportunity to teach again at such an institution. In March, the school contacted SCSEP and requested to hire Mr. A. immediately for a newly opened position. His supervisors were sure to highlight his outstanding work ethic and "way with the children, especially the teenagers" as reasons he would be a great fit for them. He is still employed there today.

## **Georgia Fund for Children and Elderly**

DAS co-administers the fund with the Department of Public Health's Maternal and Child Health Program Division. DAS receives 50 percent of the fund's donations each year, and those monies are distributed to Area Agencies on Aging for home-delivered meals and senior

transportation. The remaining 50 percent is allotted to the Department of Public Health to provide grants for programs that serve children and youth with special needs.

Income tax check-off donations received between calendar years/Income tax years 2012 and 2016 are shown below.

