

Four Year Plan of Blair Senior Services, Inc.

The Area Agency on Aging for Blair County



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EXECUTIVE SUMMARY

Blair Senior Services, Inc. is Blair County's Area Agency on Aging that provides supportive services, programs and advocacy to older residents of Blair County. It is one of 655 Area Agencies on Aging nationwide, and is one of 52 located in the Commonwealth of Pennsylvania.

Blair Senior Services' previous FY 2004-2008 Four Year Plan established three (3) main goals with a number of formidable objectives to help achieve the goals. These goals targeted the maintenance and expansion of in-home services, the shared-ride transportation program, and socialization, recreation, education and healthcare advocacy.

Many of the planned objectives have been achieved or exceeded expectations; however, a number of these worthwhile goals were difficult or impossible to achieve due to the lack of needed funding. Over the last five fiscal years, the Agency has received an average increase of just over one half of one percent per year in its main funding source. This occurred at a time when our nation's cost of gasoline, utilities and insurance reached record highs. Should this near flat funding pattern continue, the Agency must, once again, try to work smarter and harder than ever before to meet the projected overwhelming demand for services, as it also projects a 4% to 6% decrease in in-home services levels over the next four (4) years due to the anticipated level of future funding.

This Four Year Area Plan continues to focus on those areas cited above; however, with the limited funding increases projected, the proposed objectives target non-traditional service provision and preventative health efforts in an attempt to promote cost savings or cost neutrality.

This Plan establishes five (5) goals and twenty-four (24) objectives. The Plan outlines new and revisited priority efforts while it continues to provide its numerous traditional services. The following are the Goals and Objectives established over the 2008-2012 Four Year Plan Period:

GOAL 1

The Agency will maintain or lessen the reduction of in-home services, including non-traditional methods of service to also include nutrition and home safety and security efforts.

Objective 1.1 - The Agency will offer a consumer-directed model to 5% of consumers on the PA Department of Aging Waiver program as part of a pilot program conducted by the Department.

Objective 1.2 - The Agency will initiate the self-directed method of service provision for 5% of active consumers per year utilizing Agency Options in-home services.

Objective 1.3 - The Agency will continue to contract with a sufficient number of In-Home Contractors to vend 100% of its Home Support and 45% of its Personal Assistance services through In-Home Contractors on an annual basis.

Objective 1.4 - To increase the number of Home Delivered Meal volunteers by 5%, over the course of the four year period the Agency will campaign 50 community-minded businesses who would allow their employees time off from work to deliver meals to homebound consumers on an annual basis.

Objective 1.5 - The Agency will locally produce and tape eight short-term sessions focusing on nutrition for older adults, and home safety and security issues, and broadcast the programming on the local Public Access Channel.

Objective 1.6 - The Agency will continue efforts to increase the level of participation by 10% by the end of the four year period at Neighborhood Watch meetings so that Blair County's older population can realize a greater sense of safety and security in their homes. In the process of doing that, the Agency will remain an active partner in the promotion of safe and drug free neighborhoods by working with Operation Our Town in an effort to advocate for the safety of older Blair County residents.

GOAL 2

The Agency will maintain an efficient and responsive transportation service system.

Objective 2.1 – The Agency will provide oversight to assure the availability and performance of the Shared-Ride transportation system supports the independence and community-based living needs of 1,500 unduplicated older persons and persons with disabilities each month.

Objective 2.2 - The Agency will establish outreach mechanisms to assure that 10% of older persons and persons with disabilities are afforded the opportunity to provide input and participation in phases of customer service, system review and/or planning.

Objective 2.3 - Transportation staff will be trained to proficiency in areas including, but not limited to, defensive driving, emergency procedures, passenger and employee safety, customer service, program directives and pre-trip inspections. The outcome of these trainings will result in a 5% annual reduction in vehicle accidents, on-board injuries to staff and passengers, complaints, mechanical failure of vehicles in service and applicable line-item costs.

Objective 2.4 - To meet service demands and maintain a stable, effective transportation system, the Agency plans to employ, on average, 44 drivers over the course of each year of the Four Year Plan to provide for sufficient driver days to meet demand for service and allow for turnover.

GOAL 3

The Agency will maintain and expand upon efforts that address health care issues among the elderly including access to and understanding of available healthcare and preventative measures.

Objective 3.1 - The Agency will help up to 25 consumers per month on a one-on-one basis, and up to 50 at a time in group settings, with particular emphasis on the 60-64 population, gain an understanding of their health care options when they become eligible for Medicare. Monthly group meetings for those eligible for Medicare and their family members to explain all health care options, including PACE and PACENET will be held. In addition, at the same time, the Agency will help beneficiaries and providers become aware of preventive benefits and their role in improving health.

Objective 3.2 – Over the four-year period, the Agency will provide up to 1,000 consumers the information needed to make an appropriate decision about prescription drug plan coverage during the annual open enrollment period for Medicare Part D.

Objective 3.3 - The Agency will educate the community of the prevalence of depression in the elderly and ways to recognize it, and educate the Agency's Options consumers and their caregivers about treatments for depression.

Objective 3.4 - The Agency will partner with community agencies, health provider and local hospitals to provide four programs featuring up-to-date health information for use by older persons of the County at Senior Community Centers, to increase attendance at the Annual Senior Health Fair by 2% each year and to increase participation in blood screenings by 3% annually.

Objective 3.5 – The Agency will continue to provide health awareness programming through the Agency's Senior Scope newsletter, on the Public Access channel and in Senior Community Centers, providing 324 health programs in these outlets annually during each year of this plan.

GOAL 4

The Agency will enhance consumer awareness of Agency services with particular focus on Agency advocacy roles.

Objective 4.1 - The Agency will continue to provide comprehensive efforts to educate older adults, their families and caregivers, and the general public concerning all Agency services, participating in

twelve community events, conducting twelve speaking engagements, and publishing/releasing to local media twenty-four service profiles each year. This effort is projected to result in a 2% annual increase in service and newsletter readership.

Objective 4.2 - The Agency will increase the awareness of Older Adult Protective Services in the public and among consumers by 50%.

Objective 4.3 - The Agency will increase awareness of the Ombudsman Program from 10% to 50% among elderly, caregivers and consumers of long term care facilities, so that they know where to get help, and nursing facility/personal care home residents are empowered to improve their care.

GOAL 5

The Agency will maintain recreational and social activities to enhance an active lifestyle, stimulate companionship and eliminate loneliness.

Objective 5.1 - The Agency will continue to expand the programming base of activities and events at the local Senior Community Centers on annual basis, so that the core activities will stimulate a 10% increase in overall attendance and a 5% increase in the attendance of the “younger” senior, age 60-64.

Objective 5.2 – Throughout the four-year period the Agency will maintain a formal exercise program such as PEPPI/Healthy Steps in Motion in eight different sites so that approximately 145 Blair County older adults can remain active, healthy and independent for as long as possible.

Objective 5.3 - The Agency-sponsored Golden Games will realize an annual increase in participation of at least 5% and have a repeat participation level of at least 75%.

Objective 5.4 – Over the four-year period, the Agency will expand by 20% the monitoring program that checks on the welfare of identified at-risk individuals on a routine basis through its Telephone Reassurance Program by broadening the referral source network that feeds into the program.

Objective 5.5 - The Agency-sponsored Senior Companion Program will maintain full enrollment of 60 volunteers and, by the conclusion of the four-year period, will have established an ongoing waiting list of up to ten individuals. By doing so, the Program will be effectively positioned to combat the isolation that faces homebound consumers.

Objective 5.6 - The Agency will identify five Home Delivered Meal recipients per month who would enjoy companionship for lunch, and five volunteers per month who would be willing to share a meal with a senior so that the feeling of isolation is reduced or eliminated.

This multi-year plan will be reviewed and a report developed on an annual basis to determine targeted accomplishments of each objective contained in this Plan.

AGENCY OVERVIEW

Established in 1974, Blair Senior Services, Inc., the County’s Area Agency on Aging, is a private, nonprofit corporation. It is dedicated to improving the health and welfare of older citizens through coordinating and implementing programs designed to meet the needs of older persons in Blair County. Its mission is to coordinate existing and new programs for older persons, to ensure efficient and effective utilization of resources and support high quality of services and innovative and creative programs. To support this mission, the Agency currently provides, either directly or through subcontract, 31 different services. Attachment A is a complete listing and description of these services.

The majority of services listed in this Attachment are provided directly by Blair Senior Services. Contracted services include: Home Delivered and Congregate Meals food service preparation, Adult Day Care, Legal Services, Personal Care, and the majority of Personal Assistance Services. Multiple vendors are available to the Agency’s Personal Care and Personal Assistance Option consumers. For a number of years, the Agency has utilized Independent Contractors to vend Personal Assistance and Home Support services as well, which has helped to maintain service levels due to their lower cost.

The Agency is governed by a 15 member volunteer Board of Directors who convene a minimum of eleven times yearly. The Board of Directors and staff are also assisted by six internal Advisory Councils. See Attachment B for a listing and description of each Council. With direction and guidance from the Board and Councils, the Agency President oversees a staff of 73 full-time and 55 part-time employees who serve in one of four divisions within the Agency. These divisions include: Administrative Operations; Long Term Living Services; Transportation and Housing Services; and Nutrition, Centers, Volunteer, PrimeTime Health and APPRISE Services. Attachment C is the Agency's current organizational chart.

Blair Senior Services is not an arm of County government; however, representatives from the Blair County Board of Commissioners serve on one or more of the Agency's Councils, including the Board. The County continues to designate the Agency as the administrator of Section 904 of the State Lottery Law for shared-ride services for older persons. Further, since 1992 the County has allowed the Agency to purchase its gasoline, saving approximately 35¢ per gallon to the Agency. The Agency also operates the Medical Assistance Transportation Program on behalf of the County.

Since January 1990, the County's Housing Assistance/Case Management Program is also operated by Blair Senior Services, as well as being a Local Recipient for County FEMA funds. The County also authorizes funding to Blair Senior Services for homeless assistance services to eligible drug and alcohol clients. The operation of these housing programs requires extensive coordination with a large number of community-based organizations.

Since 1997 the County MH/MR Program also provides funding to Blair Senior Services for Guardianship, Power of Attorney, Representative Payee services for consumers of their programs, in addition to financially supporting MH/MR consumers who reside in Agency Domiciliary Care homes.

The County also financially supports Agency Senior Companions serving at the County's nursing home.

Since 1991, the City of Altoona provides Emergency Shelter funds for the Agency's Housing Programs, and also financially supports the Arts and Recreation programs conducted at the Agency's Altoona Senior Community Center through Community Development Block Grant funding.

Other local municipalities within Blair County also will periodically help to support various programs through their respective Community Development Block Grant funds.

The local bus authority, AMTRAN, contracts annually with Blair Senior Services to provide para-transit services for its disabled consumers.

The local Altoona Housing Authority annually subcontracts with Blair Senior Services to provide service coordination services to 374 elderly residents and non-elderly disabled at two of its elderly housing complexes.

The Agency also works closely with numerous local health care agencies to offer health fairs, immunizations, blood screenings, exercise programs, and other health-related ventures.

Memorandums of Understanding regarding the operation of the Agency's protective services program are in place with numerous community-based agencies in the County. This formal structure helps to specify roles and responsibilities of each party.

On behalf of seniors and all residents of the County, since 2002 Blair Senior Services has operated the Neighborhood Watch Program which works with all local law enforcement agencies county wide, including the State Attorney General's office. A total of sixteen (16) Watch groups meet monthly to network with police officials and to receive education and information to help reduce crime and make neighborhoods safer.

At present, Agency staff members participate in 38 different groups/organizations, which helps to enhance service coordination on a local, regional and national level. See Attachment D for a list of

groups. Involvement in these groups has helped the Agency serve a significant number of older Blair County residents.

The Commonwealth of Pennsylvania ranks fifth in the nation with 2.4 million Pennsylvanians 60+ years of age, and ranked 2nd based on percent of the 75+ and 85+ age groups. Although the state's 60+ population in comparison to its total population is 19.8%, Blair County's 60+ population in comparison to its total population is 21.8%.

In the course of a year, the Agency will serve over 10,000 older persons, or 35% of the current 60+ Blair County population. Attachments E1 and E2 list the number of consumers served and units rendered for all aging services provided during fiscal year 2006-2007 to the 60+ consumer population. Of those served, approximately 54% will reside in Altoona and its surrounding urban areas, and the balance will reside in the remaining 23 municipalities of the County, most of which are rural areas. Rural residents tend to be proportionately served, as 2000 census indicates that 21.1% of Blair County's 65+ population resides in its rural areas. While the county's 60+ profile is 60% female and 40% male, approximately 69% of those served will be female and 31% will be male. Approximately 32% will live alone, which is reflective of Blair County census data that indicates that slightly over 30% of the 65+ population live alone. It is also consistent with national rates, as 30.3% of all non-institutionalized older persons in 2006 lived alone. While the census indicates that 1,783 of Blair County's 65+ population will live at or below the poverty level, Agency data shows that slightly over 2,200 of those age 60+ served were poor or near poor (income between the poverty level and 125% of this level). Approximately 90 of the county's 302 minority consumers, or 30% of the total minority 60+ population in Blair County will be served.

By the year 2010, Blair's 60+ population is projected to increase by 10.5%, from 28,215 in 2000 to 31,190. The growth of the oldest elderly (85+) is projected to jump by 53% during this same time period. By the year 2015, Blair's 60+ population is projected to grow to 33,634 and, by the year 2020 to 36,514, clearly projecting a major strain on the Agency's service system.

Over the past two years, the Agency has already begun to feel the effects of a growing aging population. Prior to 2005, at any point in time, approximately 30 to 35 non-priority consumers would be on the Agency's waiting list for Options services. In early FY 2006-2007, this number grew to 51, and by year's end rose to 111, with approximately 80% being high-priority consumers. Although the Agency has been able to hold the line on Options provider rates over the last number of years, due to the absence of increased funding, waiting list numbers continue to remain in the high 90's. Almost one half of these waiting consumers will be receiving some form of Agency services, but will be under-served or not served at all by home and community based services.

This increase in the waiting list can also be attributed to the changes in Medical Assistance financial eligibility rules for the PDA Waiver Program. High priority Nursing Facility Clinically Eligible consumers must now turn to Options services, as new financial eligibility requirements have disqualified many once potential consumers from the Waiver Program. These consumers tend to have costly care plans which use large blocks of time. They will utilize services at levels at least two times greater than their fellow high priority Nursing Facility Ineligible Options consumers.

Finding more cost-effective ways to vend services will be critical to meet future demands for in-home services.

Since the Agency's participation in the Pennsylvania Department of Aging's Waiver Program, it has diverted several hundred consumers from Nursing Home care. In its first full year of operation, 68 persons were diverted from Nursing Home care with the assistance of \$365,000 of in-home services. This past fiscal year 2006-2007 with an average of 170 consumers per month, the Waiver Program served 264 consumers and vended \$2.7 million of in-home services to prevent institutionalization. The cost would have been at least \$10 million, should that average monthly number of 170 consumers have been in a Nursing Home for this one-year period. In calendar year 2006, Blair County alone had 280,021 patient days of Nursing Home care, paid with Medicaid funding. Clearly, the Waiver Program is a beneficial service for the consumer choosing in-home care versus Nursing Home care, and is a tremendous financial relief for Nursing Home funding sources.

Educating potential consumers of the benefits of the Waiver Program will be a continuing effort of the Agency. The addition of the “Services My Way” component to the Waiver Program will help to enhance its benefits.

The Agency continues to note a large number of care managed consumers who suffer from some form of emotional impairment. Typically, depression, anxiety and/or loneliness are common diagnoses, with medications being the usual course of treatment for such disorders. The Agency also sees a large number of consumers with physical illnesses/disabilities that may have been preventable with early detection, or more manageable with behavioral modifications and/or better health education. Taking pro-active steps to help prevent such disorders from occurring or worsening will be an essential element in slowing the ever growing demand for Agency in-home services, particularly as the older population continues to rise.

GOALS AND OBJECTIVES

STRATEGIES/OUTCOMES/PERFORMANCE MEASURES

Based on input from Agency staff, consumers and the general community, a clear pattern of needs and issues were identified. There was a wide range of areas expressed; however, a clear set of needs/issues were identified. The areas most often addressed were: in-home services, nutrition, transportation, health care, companionship, social activities and safety and security. See Attachment F for survey results of consumers.

Agency staff also convened two focus groups comprised of individuals with little or any knowledge of Blair Senior Services. One group comprised of 60-65 year olds helped shed light on the level of awareness of Blair Senior Services among this age group. The second group (75+) was a little more aware of services and offered valuable input regarding service provision. Participants were informed of the outcome of the needs assessment process and concurred with its results.

As a result, based upon input from all groups, the Agency will focus on the following five major goals during the next four (4) year period.

1. Maintain or lessen the reduction of in-home services, including non-traditional methods of service to also include nutrition and home safety and security efforts.
2. Maintain an efficient and responsive transportation service system.
3. Maintain and expand upon efforts that address health care issues among the elderly including access to and understanding of available health care and preventative measures.
4. Enhance consumer awareness of Agency services with particular focus on Agency advocacy roles.
5. Maintain recreational and social activities to enhance an active lifestyle, stimulate companionship and eliminate loneliness.

GOAL 1

The Agency will maintain or lessen the reduction of in-home services, including non-traditional methods of service to also include nutrition and home safety and security efforts.

The preference is very clear. Older persons want to live independently and safely in their own homes for as long as possible. And, when this independence becomes compromised and services are needed, they want ready access to services, and they want to choose their providers and the method of service provision. In a recent survey, Agency consumers were asked the importance of the ability to utilize self-directed care as a service option. Of those who responded to this question, 62% felt it was an important or very important option to them.

Objective 1.1

The Agency will offer a consumer-directed model to 5% of consumers on the PA Department of Aging Waiver program as part of a pilot program conducted by the Department.

Consumers have repeatedly expressed interest in having loved ones provide care, as they are familiar with their friends and family and trust them to come into their homes on a regular basis. This service model will also enable consumers to make decisions on the way care is received.

Blair Senior Services will work with the Pennsylvania Department of Aging during the pilot project of introducing Services My Way. The collaborative effort of the Agency with the Department will result in an effective method of service delivery. It is anticipated that a total of eight active consumers per month will access this method of service provision.

During and after participating in the pilot for Services My Way under the PDA Waiver program, Blair Senior Services will evaluate consumer satisfaction, ensure consumers' needs were met, and that hospitalizations and nursing facility admissions were decreased by 90% or avoided due to the care received. This will be done through routine care management responsibilities and consumer satisfaction surveys. The goal is for the surveys to show a 95 % satisfaction rate with consumers directing their own care. Any cost savings using this method of service delivery should also be assessed and taken into consideration when evaluating ways to meet the needs of a larger number of consumers.

Objective 1.2

The Agency will initiate the self-directed method of service provision for 5% of active consumers per year utilizing Agency Options in-home services.

Based upon the success of the Services My Way method of provision under the PA Department of Aging Waiver Program, self-directed services under Options will be pursued. The goal will be to have 5% of those consumers receiving Home and Community Based services receiving those services through the self-directed model.

An expansion into this method of service provision will allow consumers to be more directly involved in their care. It will help to increase the number of service providers available to consumers, and also allow consumers to formalize a caregiving arrangement to enhance service stability.

During the initial year, the Agency will define the parameters of the eligible caregivers and consumers for this program, utilizing care management staff and the fiscal department. During the initial year, an accounting system: payment method, tracking hours, time sheets, taxes paid, etc., will be developed by the Agency's fiscal department.

As a result of the first two steps, material will be developed which will describe the requirements for the consumer, the agency and the care provider. Implementation of a trial set of consumers will also be done.

By the end of the first year, and after the above is finalized, Care Managers will identify consumers who currently have a neighbor/relative providing care that may be interested in this program. After one year, based on the trial group, the Agency will identify problems and correct those areas, and this method will be made available to other care-managed consumers.

The self-directed method will increase availability of care providers and will improve care provision by having a consistent provider. It will allow consumers more choice with their care provision and will assist care giving situations to become a more permanent relationship.

Currently the Agency maintains a 90% overall satisfaction level for the Agency model in-home services. Utilizing self-directed services, the Agency would anticipate the consumer-driven model to exceed this satisfaction level. The goal of in-home services is to maintain consumers in their home. Tracking the number of participants, the length of time this service model was used, and the reasons the participants left the program will provide a comparison to services provided through the Agency model.

It is anticipated that the hourly rate for the consumer-driven model will be 30%, or \$5.00 less per hour. This reduction in cost will allow for additional funding to serve more consumers.

Objective 1.3

The Agency will continue to contract with a sufficient number of In-Home Contractors to vend 100% of its Home Support and 45% of its Personal Assistance services through In-Home Contractors on an annual basis.

This method of service provision has proven cost effective, while providing consumer choice. It helps to stabilize service, in that only one individual provides service to the consumer and establishes a solid, supportive relationship between the consumer and caretaker.

On an as-needed basis and with continued approval by the Department of Aging, the Agency will recruit and contract with a sufficient number of Independent In-Home Contractors in order to meet consumer demand for Personal Assistance and Home Support services. This would be done in consultation with the Director, OPTIONS Services and the Vice President, Aging Services in order to factor in demand for service and the waiting list.

The anticipated end result to maintaining the Independent Contractor effort is continuity of care with a consistent caregiver. Many consumers prefer to have only one caregiver versus having an agency provide services, since that agency can send different workers to provide care. Many consumers have a positive rapport with their Independent Contractor and build trusting relationships that also provide socialization.

This objective will be monitored on an almost continuing basis due to the frequency of consumer visits by Care Managers and RNs.

The Agency will also continue to have RNs complete Independent Contractor Supervisory Visits for those consumers receiving Personal Assistance Service, to monitor consumer satisfaction and recognize problems. The Care Manager and Care Management Supervisor will field calls of concern from consumers, family members and Independent Contractors.

To determine success of this effort, ongoing contacts with consumers who utilize In-Home Contractors will be done throughout the year. Formal bi-annual surveys to consumers who use In-Home Contractors will result in a 90 to 95% positive satisfaction rate among the consumers. These surveys will help to monitor problem areas or areas of needed improvement.

This objective's performance will also be measured by realizing a 25% reduction in its hourly rate, in comparison to the provider's hourly rates.

Objective 1.4

To increase the number of Home Delivered Meal volunteers by 5%, over the course of the four-year period the Agency will campaign 50 community-minded businesses who would allow their employees time off from work to deliver meals to homebound consumers on an annual basis.

As the demand for Home Delivered Meals continues to surpass previous years' levels, it is critical to maintain the viability of the Home Delivered Meal program in our county. Volunteers enable the HDM program to operate so that the limited financial resources go toward the provision of meals. It is critical to maintain and expand the volunteer force, which could be aided greatly by partnering with community-minded businesses that would actively support the effort.

Working with the Agency's Community Relations Department, staff will identify businesses that participate in the Chamber of Commerce Leadership classes, those that partner with senior events such as Health Fairs and senior athletic competitions, those that have a stakeholder share in senior product/service consumption and others that are generally community oriented by their participation in philanthropic events. In conjunction with the Community Relations Department, a formal presentation would be developed for presentation to the business leader so that they can be made aware of the HDM effort. If successful in recruiting, training the volunteer(s) would be done. In

addition, the business would be offered publicity regarding their participation in the effort. This could be provided through the Agency's normal PR venues such as the Senior Scope, Silver Spotlight and other outlets.

This effort would increase the business community's awareness of the HDM program, and the Agency in general. Hopefully, there will be an increase in the number of businesses and, ultimately, more volunteers partnering in the HDM effort. With more volunteers, the current delivery areas would be maintained and service expansion would be possible. With more volunteers, the limited financial resources could continue to be directed toward meal provision, while decreasing the likelihood of waiting lists for meals and possibly expanding the base of meal recipients. The ultimate result would be to enable the HDM program to serve the greatest number of consumers, not only in delivering them a hot nutritious meal, but being able to maintain that vital daily contact with the consumers.

This objective will be measured by tracking the number of new business partners recruited and the number of new volunteers participating in the delivery effort, and realizing at least a 5% participation rate of businesses in the program. Service delivery areas maintained or expanded upon, as well as the lack of a waiting list or increased numbers of meal recipients would be determined.

Objective 1.5

The Agency will locally produce and tape eight short-term sessions focusing on nutrition for older adults, and home safety and security issues, and broadcast the programming on the local Public Access Channel.

Many older adults in Blair County share a concern for good nutrition and for their personal safety and security. A program that focuses on nutrition for older adults and addresses the growing safety/security concerns specifically for Blair County would be a valuable tool in addressing these concerns.

Staff will contact the Public Access Channel to determine if they would be willing to tape and broadcast a series of programs based on a list of selected topics. Program hosts would be identified, and the Public Access Channel will be invited to attend and tape Neighborhood Watch Programs where keynote speakers are providing presentations. Staff will contact local hospitals/nursing facilities for dieticians to help produce programs focusing on nutrition for older adults. Also, older adults will be recruited to participate in the programs as volunteers/aides to the host.

A schedule of programming will be developed and advertised in each issue of the Agency's Senior Scope. Two sessions per year are projected. A flyer will be distributed with the Home Delivered Meals a few days prior to the program appearing on the Public Access Channel to advertise the program. Through a series of such programs, consumers and their family members will gain insight into recognizing and meeting the nutritional needs for older adults. Further, consumers who are unable to attend Neighborhood Watch meetings will benefit from a broadcast to listen to speakers address issues concerning safety and security. By viewing a Neighborhood Watch meeting, people may be more willing to participate in these programs.

To determine success of this objective, performance will be measured by surveys which will be done for new participants at Neighborhood Watch meetings to inquire how they heard of the program. Through the surveys, it will be determined that approximately 10% of new participants will state they gained interest in attending a Neighborhood Watch meeting by just watching a broadcast on the Public Access Channel. A question will be added to the bi-annual Home Delivered Meals surveys mailed by the Agency asking if consumers viewed the broadcast and, if so, inquire if the programming was educational and if it addressed their nutritional and safety concerns. It is anticipated that approximately 30% of those surveyed will have watched the programming and found it educational.

Objective 1.6

The Agency will continue efforts to increase the level of participation by 10% by the end of the four year period at Neighborhood Watch meetings so that Blair County's older population can realize a greater sense of safety and security in their homes. In the process of doing that, the Agency will remain an active partner in the promotion of safe and drug free neighborhoods by

working with Operation Our Town in an effort to advocate for the safety of older Blair County citizens.

While overall crime rates in Blair County's largest city, Altoona, decreased slightly from 2006 to 2007, drug-related crime continued to increase. The increase in drug use and gang presence in Blair County is a direct result of there being a market for such type of activity. As a result, high levels of criminal activity such as robbery, burglary, theft, assaults, shootings, etc., much of which is directly attributable to drug, gang or gang want-to-be activity, continue to be a concern. Increased crime has caused county residents, including older adults, to live in fear and to be concerned for their safety, even in their own homes. Law enforcement, across the board, has stated that they can not effectively combat these issues without the active participation and help of individuals, groups and organizations. The County's concern of this criminal activity has spilled over into the business community to the point that Operation Our Town, a non-profit partnership led by business to fight drugs and violent crime in central Pennsylvania, was formed to take back the neighborhoods and to make Blair County a great place to live. As a result, the Agency recognizes the need to remain active, not only in the Neighborhood Watch effort, but to also work cooperatively with others that are working toward the same goal of restoring safety and security to this community.

The need to educate consumers to become actively involved in combating the problems is essential. Public relations activities and information dissemination through the Senior Scope, Silver Spotlight and other local print and electronic media venues will continue to be of great importance, as well as eliciting support from local neighborhoods. Active Watch participants explaining the importance of being involved is key. Getting local community political leaders to actively join and participate in the effort is also essential. Making/keeping contact with the "key players" in each community needs done or re-visited. Arranging for informative meeting topics is also a necessity. Emphasizing a proactive approach versus reacting to problems will be reinforced. Joining forces with individuals and groups with similar goals to coordinate efforts will take place. Also, coordinating the efforts of smaller watch groups within close proximity of each other may spur more joint cooperation and be more effective. Giving consideration to alternate starting times, meeting locations and frequency of meetings to best attract additional participants will also be reviewed.

The Community Relations office will establish an e-mail or fax system to provide press releases about Neighborhood Watch to the Operation Our Town Task Force and encourage those leaders to share this information with their constituency and business employees. The Director, National Senior Service Corps Programs will invite Operation Our Town to speak at a Neighborhood Watch meeting on an annual basis to share their progress and insights. The Agency's Information Technology staff will provide links to Operation Our Town on Blair Senior Services' website and encourage the reciprocal.

If successful, these efforts should provide more publicity to the general public of the problems and what is being done to combat them, further resulting in more joint efforts with others with like-minded goals. There will be more cross attendance at meetings and more opportunities to speak and cross promote ongoing efforts. The number of watch participants should increase and as a result, there will be greater numbers of more "vigilant" citizens, a key to discouraging the criminal element from taking up residence in the community.

Tracking the success of the Neighborhood Watch/Operation Our Town efforts beyond the 10% increase in participants is critical to determining if participants are better able to be proactively involved in the effort. A survey system will be implemented to gauge the progress. It is expected that 80% of the participants will have an increased awareness of the extent of the drug/criminal activity in the area. Likewise, 80% will confirm that they are better educated in what to look for in identifying "suspicious" activity and how to report it. Similarly, 80% will state that they believe that concrete steps/strategies are in place that will allow them to feel that every effort is being made to enable them to feel a greater sense of safety and security in their own homes.

GOAL 2

The Agency will maintain an efficient and responsive transportation service system.

The American Community Survey of 2006 indicates that, although 61.1% of Blair County's 65+ population had no disability, 16.8% had one type of disability, and 22.1% had two or more types of disability.

It is not a surprise that the second most frequently identified need by Agency consumers during the Agency's Needs Survey was for transportation services, since mobility of older individuals is widely recognized as essential to maintaining their independence and quality of life. It is critical to accessing medical care, shopping, and helps to prevent isolation. As the shared-ride provider in Blair County, Blair Senior Services provided over 155,800 one-way trips to county residents during fiscal year 2006-2007. Although the majority these trips were for persons 60+ years of age, the Agency also transports disabled persons under 60 and those individuals attending medical appointments under Medical Assistance.

Blair Senior Services is tasked to provide quality transportation services, as such a vital support service may be a consumer's only connection to the outside.

Objective 2.1

The Agency will provide oversight to assure the availability and performance of the Shared-Ride transportation system supports the independence and community-based living needs of 1,500 unduplicated older persons and persons with disabilities each month.

The Agency must assure the mobility needs of consumers are being met through a service delivery system that reacts to demand trends and stresses professionalism, safety, fiscal responsibility and technological advances. Agency staff will monitor the objectives utilizing a variety of evaluation tools from direct consumer dialogue to computer generated analysis.

The Agency will provide 155,000 annual one-way passenger trips within Blair County through the Shared-Ride system. Availability will be County-wide with targeted utilization by 40% of older consumers residing outside the more urbanized areas of the City of Altoona and surrounding Logan Township. The profile of annual trip purposes in support of the objectives will be 40% medical, 13% full day programs such as adult day care, 11% volunteering, 11% senior community center and the balance of shopping, recreation, socialization, work and misc. purposes.

To maintain affordability for older passengers over the four year period, the Agency will sponsor partial passenger fares at an annual average of \$1.70 for trips defined under the Non-Care Managed Care Enrollment.

Survey and outreach efforts will quantify service effectiveness through positive responses of targeted passengers and community groups. Survey and phone poll questions provide feedback encompassing all facets of services including but not limited to; service times, the reservation process, driver assistance, safety and quality of service. For a positive reinforcement of Agency performance and structure, 100% of annual responses will fall in one of the favorable response ranges.

Service efficiency will be measured through calculating passenger trips per vehicle hour. The minimum performance goal for the overall system will be 2.75 trips per hour; however, Agency staff will strive to increase efficiencies to achieve 3.00 trips per hour by last year of the plan period.

Objective 2.2

The Agency will establish outreach mechanisms to assure that 10% of older persons and persons with disabilities are afforded the opportunity to provide input and participation in phases of customer service, system review and/or planning.

The Agency will partner with consumers and interested parties to coordinate efforts encompassing the required activities of local shared-ride service delivery. Two-way communication will be stressed in areas of education, design, finance and feedback of current and proposed initiatives.

Outreach by Agency and transportation staff will be done to stimulate communication. In addition to annually targeting 10% of consumers, staff will also annually contact 25% of established senior community centers and/or human service agencies and advocacy groups for one-on-one individualized discussions of shared-ride service.

Objective 2.3

Transportation staff will be trained to proficiency in areas including, but not limited to, defensive driving, emergency procedures, passenger and employee safety, customer service, program directive and pre-trip inspections. The outcome of these trainings will result in a 5% annual reduction in vehicle accidents, on-board injuries to staff and passengers, complaints, mechanical failures of vehicles in service and applicable line-item costs.

Well-trained transportation staff increases the consistency, quality and safety within the Shared-Ride operating system. As a result, Agency staff will provide an ongoing determination of skills most pertinent to address current or future needs within the transportation system. Through annual onboard driver monitoring, training effectiveness and/or targeted areas of future training will be evaluated.

Performance outcomes will be measured through direct employee/supervisor interaction, survey responses, reported incidents and accidents. Based on the outcomes of the first year of the plan year, a 5 % annual reduction in safety related incidents will be targeted for the remaining plan period.

Objective 2.4

To meet service demands and maintain a stable, effective transportation system, the Agency plans to employ, on average, 44 drivers over the course of each year of the Four Year Plan to provide for sufficient driver days to meet demand for service and allow for turnover.

This objective is essential to ensure the Agency's ability to meet demand for transportation services, while maintaining a workforce that reflects the Agency's recruitment area and to ensure consideration is given to older (55+) workers as is consistent with the Agency's mission/philosophy.

The Agency's Personnel staff will work in conjunction with transportation management and supervisory staff to maintain a staffing level that allows operations to meet consumer demand, while not over staffing. This would include filling office staff vacancies as they occur and hiring a sufficient number of drivers to ensure the availability of 145 driver days per week. This assumption would be adjusted based on consumer demand for service, as well as the impact of service parameters identified by transportation management and supervisory staff and in RouteMatch, the Agency's current software.

Retention of drivers will also be monitored for the impact of recent changes in minimum wage and local employment conditions. This will be done both through the monitoring of driver turnover and statistics available through the PA Department of Labor and Industry. Should it be deemed necessary, other issues such as wages and part-time health expense reimbursement could be discussed with transportation management staff, the Agency President and the Board of Directors.

The projected outcome of this objective will be to create a stable service delivery system and meet consumer demand for service, while working within budgetary constraints.

Performance will be measured by the recruitment and retention of staff at a level that allows for timely and effective hiring of transportation office staff and a sufficient number of van drivers to provide for 145 driver days per week. Because the Agency has had a turnover of an average of five van drivers per year over the past three years, the Agency anticipates hiring five new drivers per year to provide sufficient staffing to meet demand for service.

GOAL 3

The Agency will maintain and expand upon efforts that address health care issues among the elderly including access to and understanding of available healthcare and preventative measures.

Health care in America is complex, confusing, costly for some and not for others, and ever evolving. With the passage of the Federal Government's senior Prescription Drug Program (Medicare Part D), the playing field has been somewhat leveled. However, many older persons remain perplexed and confused by what the open enrollment period means and what options are available, and countless are unaware of the many preventive benefits under Medicare.

The Agency will, along with continued operation and growth of health awareness activities, focus on education to older consumers and their families/caregivers to increase their understanding of available health resources and benefits.

Objective 3.1

The Agency will help up to 25 consumers per month on a one-on-one basis, and up to 50 at a time in group settings, with particular emphasis on the 60-64 population, gain an understanding of their health care options when they become eligible for Medicare. Monthly group meetings for those eligible for Medicare and their family members to explain all health care options, including PACE and PACENET will be held. In addition, at the same time, the Agency will help beneficiaries and providers become aware of preventive benefits and their role in improving health.

Each month consumers are becoming eligible for Medicare and need assistance deciding which health care options they should choose for their individual situations. From 2000 to 2006, the growth of the 55 to 64 grew by 21.2%. This need will no doubt increase, since the 60-64 population alone is projected to grow from 6,654 in 2005 to 8,978 in 2015. Most consumers need assistance selecting health care options when they become eligible for Medicare. While individual one-on-one counseling is available through the Blair County APPRISE Program, along with assistance with billing problems, unpaid healthcare claim resolutions and advocacy issues, some consumers feel more comfortable in a group setting and would benefit from attending a meeting. Currently, several health insurance companies conduct meetings for consumers entering the Medicare system. However, these meetings are designed to sell a particular health insurance plan to the consumer, rather than to provide information on all the options available.

In addition, many beneficiaries and providers are not aware of the preventive benefits covered by Medicare and other insurances. Medicare covers many different preventive services and screenings for illness such as diabetes and cancer to cardiovascular and obesity related diseases. Beneficiaries can delay or lessen the effects of diseases by getting preventative services like screening tests to find disease early, and inoculations to avoid getting dangerous infections.

Many beneficiaries are utilizing Medicare Health plans other than traditional Medicare to receive their benefits. Many of these plans cover additional preventive services to improve and maintain a healthy lifestyle even more so than the traditional Medicare.

Meetings will take place each month throughout the four-year period and will be scheduled at different locations throughout the county to provide all beneficiaries with a chance to attend. The purpose will be to provide unbiased information on all health care options available in a comfortable, no-pressure environment.

As a direct result of these monthly meetings, consumers will have a better understanding of all available health care options. Beneficiaries should leave the meeting with a general idea of what insurance options will fit their individual needs and have a plan of action for how to enroll in the plan of their choice. The meetings will empower consumers to make sound decisions on the best health care options available, rather than have a particular insurance product sold to them.

An evaluation will be circulated to all in attendance at the conclusion of each meeting. It is expected that 75% of the consumers will have a basic understanding of Medicare's system, structure, and how their unique situation fits within that structure. As a result of that understanding, 75% will respond

that they will be better able to make a more informed decision about what choice of coverage would be best for them. In addition, 100% of the consumers will be given a checklist of preventative benefits available to them.

Over the course of the Four Year Plan, it is expected that 100% of the primary care physicians and visiting nursing associations will receive the same checklist of preventative sources as is made available to the Medicare consumers.

Objective 3.2

Over the four-year period, the Agency will provide up to 1,000 consumers with the information needed to make an appropriate decision about prescription drug plan coverage during the annual open enrollment period for Medicare Part D.

Each year, in the weeks prior to and during the annual open enrollment period of November 15 through December 31, insurance companies inundate consumers with mailings, television and radio ads trying to sell their products. This can be an extremely confusing time for Medicare beneficiaries, when they may not have to do anything at all. Consumers need to be informed of what steps, if any, they need to take. With a clear and concise message to a large group of people through the use of local media events, consumers will be given the information they need to help put their minds at ease during this confusing time.

The Blair County APPRISE Coordinator will work with local television media outlets to stage events where consumers/family members can speak with an APPRISE Volunteer regarding their individual situation. Also, the APPRISE Coordinator will contact local media outlets to arrange events to explain Medicare Part D plan options during this time.

After speaking with an APPRISE Volunteer during the event or listening to the media presentation, consumers will understand what, if anything, they need to do during the annual open enrollment period. Consumers will also learn that APPRISE is a resource available year-round for their health care questions/concerns.

Of the consumers that hear the presentations and/or speak to APPRISE volunteers, 80% will state that they understand the November 15th through December 31st time frame and its purpose, 80% will understand their choices during that timeframe, and 80% will state that they will be better able to make an educated/informed choice as to what, if any, action they need to take during that timeframe.

Objective 3.3

The Agency will educate the community of the prevalence of depression in the elderly and ways to recognize it, and educate the Agency's Options consumers and their caregivers about treatments for depression.

Late life depression affects about 6 million Americans age 65 and older, but only 10% receive treatment. Depression increases the risk of death from illness, reduces the ability to rehabilitate, and doubles the risk of developing cardiac problems. Further, depression is a key factor in elderly suicide, and the rate of suicide is highest among the elderly.

During the first year, the Agency will educate Care Managers and Center Managers to recognize the symptoms and risk factors of depression in the elderly. This will be handled by in-house staff or by a mental health professional. Once in-house staff are trained in this subject, staff will distribute the depression questionnaire to participants at health fairs and flu inoculations. Depression screenings will be made available during Mental Health Awareness Month at all Senior Centers. During the four-year period, the Agency will publish the depression questionnaire and articles on depression in the Senior Scope. Consumers will be encouraged to share the results of their depression screenings with their physicians. Printed materials and/or Care Managers will also educate caregivers of the Family Caregiver Support Program about depression. The Agency will circulate information about depression in the elderly at local physicians' offices and will circulate depression questionnaires and information in the Agency's vans.

This effort will help consumers, caregivers, Care Managers, and medical personnel recognize symptoms of depression, the treatments for depression, that depression is not a natural part of aging, and that depression is a risk factor of suicide. It should encourage older persons and their caregivers to follow up on symptoms of depression.

To measure performance, the Agency will track the number of elderly and caregivers that receive information about depression and track the number of events held regarding depression. On an annual basis, at least 600 persons will be contacted at the Agency's Health Fair, screenings during Mental Health Awareness Month, and flu inoculation concerning recognizing depression. On an ongoing basis, Agency care managers and center managers will discuss symptoms and risks of depression with Agency consumers. Staff will survey 10% of these consumers and at least half of those surveyed will indicate increased understanding of depression.

Care managers and center managers will be surveyed as to the number of consumers they referred to physicians or psychiatric personnel to follow up on depressive symptoms. Once a baseline survey is completed, these surveys of staff would indicate a 10% increase in these referrals annually through the four years.

Objective 3.4

The Agency will partner with community agencies, health providers and local hospitals to provide four programs featuring up-to-date health information for use by older persons of the County at Senior Community Centers, to increase attendance at the Annual Senior Health Fair by two percent each year and to increase participation in blood screenings by three percent annually.

An awareness of health information and local resources and providers offers older adults the knowledge they need to be proactive with their health.

The Agency's Community Relations office will continue to work with Tyrone Hospital to provide health programs at the Tyrone Senior Community Center. The Agency will promote/advertise programs in the Senior Scope, on Silver Spotlight, in Senior Centers and on Agency Vans, as appropriate. Three programs will be conducted during each year of this plan. Participants will be surveyed, with a target of twenty percent of all attendees indicating that the information had a positive impact on their ability to maintain their health.

In the first year of the plan period, the Agency's Community Services Manager and PrimeTime Health Coordinator will solicit Nason Hospital in an effort to provide similar services for Centers in the southern end of the community. If successful, staff will continue to nurture and develop that relationship and schedule Programs and promote/advertise programs accordingly. One program will be presented in year two of the plan, and two programs will be presented in years three and four. Participants will be surveyed, with a target of twenty percent of all attendees indicating that the information had a positive impact on their ability to maintain their health.

The Agency will continue to work with Center staff to help identify individuals who are willing and appropriate to provide health programs at Centers and link Center Managers and supervisors to that information so that they can schedule four health programs each month.

These efforts will allow older adults to have the information they need to be proactive about their health. Older adults will be familiar with local resources to help them address health issues. Hopefully, this familiarity will make them more comfortable in reaching out for help when the need arises.

The number of programs, topics, and organizations presenting programming will be tracked. Three hundred health programs will be presented at Blair County's nine Senior Community Centers during each year of this plan. An annual survey will be conducted to determine the effectiveness of the program and satisfaction with the presentations. Forty percent of respondents will indicate satisfaction with the amount of health programming provided at the Centers and twenty percent will indicate that this knowledge helps them maintain their health.

Hands-on screenings and tests help to identify health risks for the individual, so that they can follow-up with their health care professionals. Early detection of health problems can have a positive effect on the outcome of illnesses.

The Agency will confirm continued support from the Altoona Regional Health System and determine the location and set the date for the yearly health fair. This will be done by the Agency's PrimeTime Health Coordinator, in conjunction with the Altoona Regional Health System and Community Relations office.

The Agency's PrimeTime Health Coordinator will invite vendors that will provide hands-on screenings. The Agency's Community Relations office will arrange for blood work, and work with the Altoona Regional Health System to design and produce brochures for both blood work and the event. This office will also publicize the event through the Agency's Silver Spotlight, Senior Scope, media releases, and posters in Centers, on vans and in the community.

Older adults will have the knowledge that they need to embrace a healthy life style. They will be familiar with resources in the community that can help them deal with health issues. Screenings will detect potential health risks or conditions in a timely manner so that they can be addressed by the individuals and their health care professional.

Annually, there will be a two percent increase of attendance at the Health Fair. The number of people that participate in blood screenings will increase by three percent annually.

Objective 3.5

The Agency will continue to provide health awareness programming through the Agency's Senior Scope newsletter, on the Public Access Channel and in Senior Community Centers, providing 324 health programs in these outlets annually during each year of this plan.

Older adults tend to experience multiple chronic health conditions more frequently than other segments of the population. An awareness of health information and local resources provide older adults with the knowledge they need to take pro-active steps to remain healthy.

The Community Relations office will continue to feature three health stories monthly on the Silver Spotlight and six times each year in the Senior Scope. Also, with the help of the Senior Center Managers and Center supervisory staff, the Agency will identify topics of interest to Senior Center participants.

The Community Relations office will develop programming surrounding requested or appropriate topics two months at a time, so that programs can be scheduled by Center Managers and included in Senior Center Schedules in the Senior Scope.

On an annual basis, the Community Relations office will identify and purchase or create two new appropriate videos to show on the Public Access Channel and at Senior Centers. These videos will also be available through the Agency's PrimeTime Health Lending Library. These videos will be shown eight times during the year.

This effort will allow older adults to have the knowledge that they need to embrace a healthy life style. They will be familiar with resources in the community that can help them deal with health issues. Older adults will attend Senior Community Centers to learn about ways to maintain their health.

To measure success, on a monthly basis Center Managers and the PrimeTime Health Coordinator will track attendance at PrimeTime Health Programs at Centers. A minimum of 1450 older adults will participate in these programs each year. Further, an annual survey of Center participants and Senior Scope readers will be done by Center Managers and the Community Relations office to determine health interests and satisfaction with health issues covered, with twenty percent of the respondents indicating a positive impact on their health.

GOAL 4

The Agency will enhance consumer awareness of Agency services with particular focus on Agency advocacy roles.

The need to improve consumers' awareness of Agency services was verified through results of the consumer Needs Assessment Survey recently conducted by Blair Senior Services. Many consumers were only aware of the services that they were receiving and/or the Home Delivered Meals and Transportation programs of the Agency.

There was, in particular, a lack of knowledge of the Agency's Ombudsman and Protective Services programs. Efforts will be made to enhance the community's knowledge of all Agency services, with specific focus on Ombudsman and Protective Services over the next four-year period. This effort will not only be targeted to the older resident but to their family members as well.

Objective 4.1

The Agency will continue to provide comprehensive efforts to educate older adults, their families and caregivers, and the general public concerning all Agency services, participating in twelve community events, conducting twelve speaking engagements and publishing/releasing to local media twenty-four service profiles each year. This effort is projected to result in a two percent annual increase in service and newsletter readership.

Blair County has a large 60+ population. By promoting an awareness of Agency services, older adults and their caregivers will have an understanding of options available to them. This will provide opportunities to keep active and healthy, as well as to plan for needs on a more pro-active basis rather than struggling once a crisis occurs.

The Community Relations office will provide an ongoing public relations campaign with the cooperation and input of all Agency staff.

The Community Relations office will provide agency services to local print newspapers, radio stations, the Chamber of Commerce and other appropriate outlets on a regular basis. Annually, twelve service profiles will be released and an additional three releases will focus on advocacy services.

The Director of Community Relations will further work with other Agency staff to gather information for inclusion on the Silver Spotlight, a public access television program. The program will be produced on a monthly basis throughout the four-year period covered by this plan. Again, advocacy services will be included on the Silver Spotlight. Twelve services will be featured during each year of this plan.

The Community Relations office will also work with various departments within the Agency, including those involved with advocacy services, to gather information of interest and importance to the health and wellbeing of older adults to be published in the Senior Scope. The Senior Scope is published six times each year. Two services will be featured in each issue.

Further, the Agency will maintain a presence at community events and health fair activities, as appropriate. The Community Relations office will coordinate the effort and work with appropriate staff and volunteers to represent the Agency at each venue. In year one, the Community Relations office will develop a list of speakers and topics, design a brochure and mail it to local businesses and organizations to advise them that speakers are available. The Agency will be represented at twelve events during each of the four years covered by this plan.

Finally, the Community Relations office will coordinate requests for speaking engagements and work with other supervisors to ensure an appropriate speaker to represent the Agency. The Community Relations office will work with various other departments to arrange speaking engagements to promote Agency Services, volunteer opportunities and needs and other efforts that would benefit from this type of contact. Agency staff will schedule twelve speaking engagements each year.

This comprehensive effort will allow the public to be more aware of services available to older adults in Blair County. It should also help to increase older adults' use of Agency services. The number of adults served by the Agency is projected to increase by two percent in each year of this plan.

The Community Relations office will track the number of media releases, attendance at community events and speaking engagements and quantify the number of people exposed to these efforts, as indicated above. The number of new newsletter subscribers and Agency program recipients will measure the success, with performance measures set at targeting a two percent increase in readers during each year of this plan. The Silver Spotlight will continue to seek comments by fax or by telephone call about the program, and responses will be tracked. A survey will be included in the Senior Scope annually to determine satisfaction with content and awareness of issues, with forty percent satisfaction indicated in returned surveys.

Objective 4.2

The Agency will increase the awareness of Older Adult Protective Services in the public and among consumers by 50%.

Older Adult Protective Services is an invaluable service offered to Blair County residents. Increased public education will prompt informed individuals to be more aware of potential abuse, neglect, exploitation and/or abandonment among the elderly and how to report it.

During the first year of the Plan's period, the Agency's Director of Community Relations and Protective Services supervisor will finalize plans on the development of a Protective Services logo to be used in every issue of the Senior Scope to alert consumers and readers to protective services and how to contact the Agency's Protective Services unit. This logo will appear in every issue of the Senior Scope and will be placed in a similar location in every issue.

Annually, the Protective Services supervisor will continue to speak to healthcare professionals who are in contact with the elderly and educate them on older adult protective services. Efforts to educate the public will be expanded by participating in public service announcements or being interviewed by local television and radio stations. Staff will also expand the number of support groups, church organizations, and social service organizations that may need a speaker on older adult protective services. Ongoing presentations regarding Older Adult Protective Services (OAPS) will continue at all Senior Centers county-wide.

The Protective Services supervisor will also continue to attend health fairs and other health-related events in the area to educate the public on offered services, and will offer a focus on protective services issues.

This increased consumer and public education on OAPS will enhance community awareness of OAPS by 50% and educate the community in how to report suspected abuse, neglect, exploitation and/or abandonment.

Effectiveness of the increased public education can be measured by comparing the results of previous survey responses to responses after the increased public education has begun. This objective's performance measure is to decrease to 5% or less the percentage of Agency consumers receiving Agency services who are not aware of Older Adult Protective Services.

Objective 4.3

The Agency will increase awareness of the Ombudsman Program from 10% to 50% among elderly, caregivers and consumers of long term care facilities, so that they know where to get help, and nursing facility/personal care home residents are empowered to improve their care.

As addressed, Agency surveys reveal a lack of awareness of the Ombudsman program in the community. Currently, one out of ten Agency consumers has some awareness of the Ombudsman Program. With 1,514 licensed Nursing Home and 1,035 licensed Personal Care Home beds in Blair County, this lack of knowledge is a major concern. Currently, the Ombudsman receives inquiries from long term care residents and their family members to assist them, as consumers of long term care facilities want to be active in their input about their care and environment. However, as populations change in facilities and the overall 60+ population continues to increase, this resource must continue to have a presence in this community.

A PEER (Pennsylvania's Empowered Expert Residents) project is being established in the County's largest Nursing Home; however, additional PEERs must be developed over the next four-year period. During the first year of the plan and yearly thereafter, the Agency's Ombudsman will contact Nursing Facilities and Personal Care Homes to implement a PEER project in at least one new facility each year.

Once a PEER program is developed, a current PEER project volunteer can be utilized to speak to other NF/PCH residents about the program. Staff will continue to recruit additional Ombudsman volunteers thru Agency presentations, the Senior Scope or the Silver Spotlight.

During the initial year, Ombudsman information will be included with any mailings to Nursing Home Transition family members and those assessed for placement through Pre Admission Assessment.

During the second year, Ombudsman information will be distributed to Long Term Care providers such as Physicians, Hospice, Pharmaceutical suppliers, etc.

Also during the second or following year, staff will contact retirement organizations such as Retired Postal Employees, etc. regarding Ombudsman volunteer opportunities. Staff from the Agency's Retired and Senior Volunteer Program, the Ombudsman and actual Ombudsman volunteers will assist in this effort.

It is hoped that this increased awareness of the Ombudsman program will prove to be a resource for improvement of long term care services and help to reduce problems in long term care facilities. It will encourage residents of Long Term Care Facilities to become involved in the PEER project. It will, hopefully help to recruit more volunteers for the Ombudsman program in order to have more frequent visits by Ombudsmen to Long Term Care Facilities.

Success of this objective will be determined by an increased awareness of the Ombudsman Program each year, and at the end of the four years, to a total increase of from 10% to 50% of those surveyed. Ombudsman volunteer recruitment will continue and two new volunteers will be trained each year. The PEER Program will be started in at least one facility per year. Each year the Ombudsman Program will be featured in at least two event publications.

GOAL 5

The Agency will maintain recreational and social activities to enhance an active lifestyle, stimulate companionship and eliminate loneliness.

Slightly over 30% of Blair County's 65+ population live alone, and a little over 51% are widowed. The death of one's spouse generally results in the surviving partner often living alone. The death of the spouse, coupled with the loss of a close friend or dependable neighbor can often result in loneliness and isolation. Grown children leaving home and moving away can cause an unfilled sense of loss to their aging parents. For many older persons, the inability to financially and physically maintain their homes creates a move to a more feasible living arrangement where new and strange surroundings can cause isolation. One of the greatest challenges faced by an Agency Care Manager is to convince an isolated and alone consumer to become more involved in daily activities and available social opportunities. Stubbornness, being timid, and staunch independence are personality traits that are hard to overcome in trying to encourage a consumer to become more socially involved.

Individuals who interact with others tend to be physically and mentally healthier than those who are not socially active. As a result, the Agency will focus on and propose services, whenever possible, that will help stimulate activities and combat loneliness. However, the lack of increases in funding is likely to result in a reduction of meals for people who depend upon senior centers and home delivered meals.

Objective 5.1

The Agency will continue to expand the programming base of activities and events at the local Senior Community Centers on an annual basis, so that the core activities will stimulate a 10% increase in overall attendance and a 5% increase in the attendance of the "younger" senior, age 60-64.

Expanding the programming base and events at local Senior Community Centers may decrease participant loneliness, increase their overall sense of well being, and improve companionship among fellow participants.

Expanding programming and core activities will promote a healthy and active lifestyle for older adults as well as attract new younger older adults in Blair County to local Senior Community Centers.

The Agency's staff will continue to introduce and suggest new program ideas to be incorporated into regular activities at local Senior Community Centers. The Senior Center Managers will collect suggestion/comment cards regarding current and future programming and activities. Agency-sponsored activities geared toward the "younger" older adult population will be scheduled at the local Senior Community Centers. Agency staff will frequently search the Aging website for new ideas on current trends and issues facing the older adult population. Program participants will be given a survey asking what types of programs they would be interested in attending in the future.

New and more interesting programming and activities that focus on popular issues for older adults will be scheduled. Staff will encourage consumers to be directly involved in the scheduling of programs in an effort to expand upon recreational and social activities.

Success of each program will be measured by the total number of consumers, and the age of those participating in the events. Comments/suggestion cards will be collected and reviewed by the Senior Center Managers and discussed at the monthly Center Manager meetings to determine the program's effectiveness, and if suggestions are worthwhile and feasible. New participants will be tracked through the completion of Senior Center Intakes and Nutritional Risk forms. Also, of the "younger" seniors attending the Center for the first time through programming and activities, 25% will return to visit the Center in the future.

Objective 5.2

Throughout the four-year period, the Agency will maintain a formal exercise program such as PEPPI/Healthy Steps in Motion in eight different sites so that approximately 145 Blair County older adults can remain active, healthy and independent for as long as possible.

The Agency's structured exercise program will provide participants with socialization and recreational activity. PEPPI/Healthy Steps in Motion will promote a healthy, active lifestyle as well as independence for the County's older adults.

PEPPI/Healthy Steps in Motion will be promoted through public relations efforts, including the Agency's Senior Scope and Silver Spotlight. The Agency will recruit current participants to lead new classes and provide annual training and ongoing support for current and new leaders.

These efforts will help to maintain and increase class participation in the PEPPI/Healthy Steps in Motion Program, resulting in improved social and emotional well being, as well as the overall health and independence for a large number of older adults.

To determine success, an annual survey will be distributed to all program participants by the PrimeTime Health Coordinator to evaluate the impact PEPPI/Healthy Steps in Motion has on their social, emotional and physical well being. The results will show that approximately 90% of those surveyed feel that PEPPI/Health Steps in Motion has improved their social and emotional well being as well as helped them remain independent in everyday life. Also, over 90% of those surveyed will state that since beginning the PEPPI/Healthy Steps in Motion exercise classes, their balance has improved. The PrimeTime Health Coordinator will also monitor the number of current and new participants in each class through the monthly sign in sheets.

Objective 5.3

The Agency-sponsored Golden Games will realize an annual increase in participation of at least 5% and have a repeat participation level of at least 75%.

The Blair County Golden Games help to maintain and enhance the overall physical and emotional well being of the area's older adults. This event, with an attendance of over 300 athletes per year, provides a socialization and recreational component to the lives of the participants.

Annually, the PrimeTime Health Coordinator will provide registration forms to athletes who have participated in past Golden Games. The Community Relations staff will market the Golden Games, including in the Senior Scope and the Silver Spotlight. Staff and Golden Games' Chairpersons will distribute flyers and registration forms to businesses, groups and organizations throughout Blair County. Staff will also continue to solicit sponsorships in order to keep the cost of participation in the Golden Games affordable to the athletes. Staff will also enlist the help of current and previous Golden Games' athletes to recruit for participation. The consideration of adding new events each year will also be reviewed. The Agency will continue to recognize the medal winners in each event during the Closing Ceremony and also by publishing the list of medal winners in the Senior Scope and Altoona Mirror.

It is believed that these efforts will result in increased athlete participation in the Golden Games and maintenance of a solid base of repeat participants, while it increases socialization and promotes an active lifestyle for the area's older adults.

To determine success of this effort, an increase in participation will be evaluated by comparing the number of registered athletes from the previous year to the number of athletes registered in the current year. Also, a master list of athletes who have participated in previous year's Golden Games will be maintained for mailing purposes and to compare the number of returning athletes year after year. A survey will also be distributed during the Closing Ceremony of the Golden Games to measure that at least 75% of consumers believe that the Games have enhanced their physical, social or emotional well being.

Objective 5.4

Over the four-year period, the Agency will expand by 20% the monitoring program that checks on the welfare of identified at-risk individuals on a routine basis through its Telephone Reassurance Program by broadening the referral source network that feeds into the program.

There are a significant percentage of older individuals in Blair County that, due to life circumstances, feel isolated in their homes. This results from factors such as little or no family support, few if any friends, and the overall lack of opportunity for social bonding. As a result, they feel isolated, which could lead to depression and other negative influences. In addition, these individuals may face "threatening situations" which may go undetected without regular contact. Telephone Reassurance volunteers can regularly contact consumers to develop a bond which may enable them to be alert to changing consumer conditions. The important role that Telephone Reassurance volunteers can play in an individual's life makes it imperative that those who need this service be identified. Expansion of the "referral network" should enable a greater number of individuals to benefit.

Broadening the awareness of this program is essential to identifying more consumers needing this service. A variety of ways to accomplish this exists including articles in the Senior Scope, broadcasts on the Silver Spotlight TV program, as well as disseminating information through outlets such as the local newspaper, church bulletins, "fairs", speaking engagements, and word of mouth. Partner organizations will have the awareness and knowledge needed to identify and refer people in need. Thus, emphasis will be placed upon fully informing partner agencies that would interact with potential consumers. As more referrals are received, ready-to-serve volunteers can be activated and matched with the consumer who has a legitimate need for this service.

With a wider knowledge of the Program, there should be a broader referral base with more individuals identified as needing the service. By matching those individuals with the volunteer caller more consumers will be checked on regularly, bonds will be formed between the caller and the consumer and feelings of isolation should reduce. With a "friendship bond" formed, these individuals should experience less fear and anxiety, thus enhancing their overall quality of life and also that of the caller, who experiences the satisfaction of knowing that they have contributed in a very positive way to the well being of the consumer.

The success of this effort will be measured by the increase in the number of referral sources and ultimately, by the increased number of consumers receiving the service. Surveys will be done to

measure the satisfaction of the effort from among the referral source, volunteer caller and recipient's viewpoint. It is expected that 50% of the new respondents will initially feel comfortable in talking to the volunteer caller. After a six-month period, 70% of the respondents will indicate that the volunteer caller has enhanced their quality of life, and after one year, 80% will state they feel less lonely because of the relationship established with the telephone volunteer.

Objective 5.5

The Agency-sponsored Senior Companion Program will maintain full enrollment of 60 volunteers and, by the conclusion of the four-year period, will have established an ongoing waiting list of up to ten individuals. By doing so, the Program will be effectively positioned to combat the isolation that faces homebound consumers.

Similar to the reasons cited in Objective 5.4, Senior Companions can help fill the "isolation void" and eliminate, or at least delay, the negative impact of loneliness. As a result, having full enrollment and a waiting list of Senior Companions in this program are of paramount importance.

Ongoing recruiting is a key to meeting this objective. Recruitment efforts will be done through Senior Scope articles, providing information through the Agency's Silver Spotlight TV program, as well as disseminating information through outlets such as the local newspaper, church bulletins, fairs, speaking engagements and placing flyers and brochures where appropriate. Additionally, word of mouth and referrals from current program participants and partners will be encouraged. Any other venues where information can be distributed will also be explored.

With the success of this effort, more individuals will be aware of this service, thereby increasing the likelihood of recruiting more volunteers. With more potential volunteers to choose from it is likely that more quality volunteers can be identified. With a larger volunteer pool there may be more volunteers whose modes of transportation are more flexible. Also, with a larger volunteer pool it is more likely that the most appropriate match of volunteer to consumer can be arranged. With larger waiting lists, the amount of time consumers have to wait for a Senior Companion should decrease. With full enrollment, all budgeted stipends will be spent, which is key to funding stability. The ultimate outcome will be more consumers remaining active and socially connected, so that they can remain independent for as long as possible.

The success of this effort will be measured by the number of new volunteers serving. Also, surveys to determine the satisfaction of the volunteers, as well as the consumer, can verify the success of the program beyond raw numbers. As more volunteers serve, the numbers and survey results combined should reflect that a greater number of individuals, both volunteer and consumer alike, are experiencing an enhancement to their quality of life.

Seventy-five percent of the respondents still residing in their homes will state that the volunteer assists them in maintaining a more independent lifestyle and thus avoiding institutionalization. Seventy-five percent will also indicate that with the volunteer's help, they are able to participate in more activities, either inside or outside of their home. Likewise, 75% will confirm that the volunteer has helped them achieve a more enhanced quality of life. From the volunteer's prospective, 80% will indicate that they are participating in a self-rewarding experience as they volunteer.

Objective 5.6

The Agency will identify five Home Delivered Meal recipients per month who would enjoy companionship for lunch, and five volunteers per month who would be willing to share a meal with a senior, so that the feeling of isolation is reduced or eliminated.

Home Delivered Meal recipients face an inability to meet their own nutritional needs. As a result, the Home Delivered Meal program is a vital component for consumer nutritional health and well being. Home Delivered Meals volunteers play an enormous part in checking in on the consumers on a daily basis. Although this visit is brief, the knowledge that the consumer is stable is important. However, volunteers who take the time to share a meal with these individuals would help to combat the feeling of loneliness and isolation, and enhance the quality of life for these individuals.

During the initial year of the plan period, the Community Relations staff will develop a name and brochure to promote this program. Once program parameters are developed, Agency Care Managers will identify meal recipients who are alone and would benefit from monthly visits. At the same time, Home Delivered Meal staff and care management staff will discuss with HDM volunteers the opportunity to share a lunch with meal consumers on a monthly basis. After a core number of volunteers have been identified, HDM staff will train the volunteers on interaction with the recipients and concerns to monitor. If this effort proves successful within the Agency's current volunteers, but additional volunteers are needed, HDM staff will contact community partners about the program and enlist their support and participation throughout the plan's four-year period.

This small act of kindness on the volunteers' part should help to reduce isolation of the HDM consumer and help to improve their outlook on the community. It will also lend another set of eyes when consumer changes or problems arise. Public awareness of this objective will help to expand the awareness of the value of the HDM program to other community organizations and agencies who could become active participants.

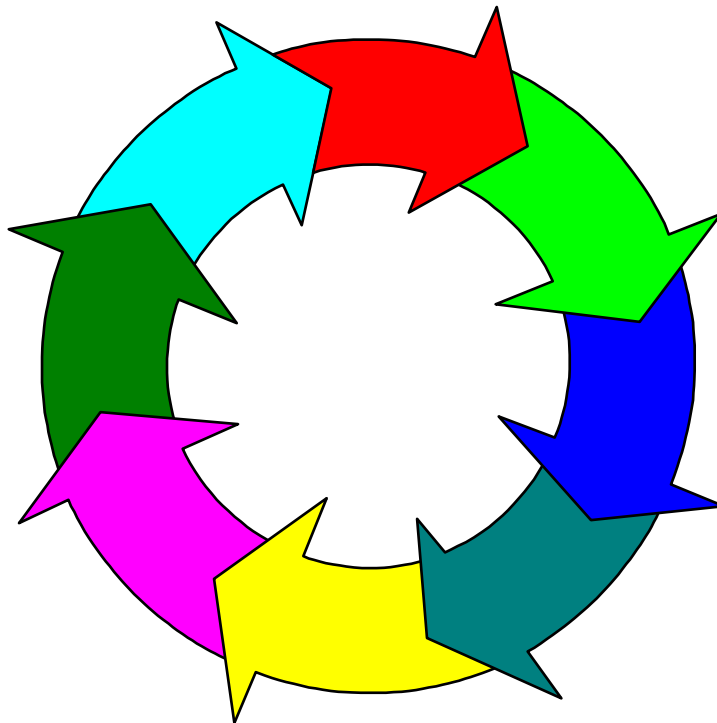
Care Managers will be surveyed as to the impact the program had on the care managed consumers. Staff will track the number of recipients and length of time of participation in the program, the number of volunteers participating in the program, and the number of community partners who join in the effort.

To determine success of this effort, staff will survey both HDM recipients and volunteers to ensure that 75% of those surveyed are satisfied with this program.

BLAIR SENIOR SERVICES, INC.

PROFILE OF SERVICES

as of July 2007



INTRODUCTION

The 1973 amendments to the Older Americans Act mandated states to establish Area Agencies on Aging based on units known as Planning and Service Areas.

As a result of the efforts of the Allegheny Council on Aging, the Blair County Task Force and the Blair County Commissioners, Blair Senior Services, Inc. (formerly known as the Blair County Office of Services for the Aging) was established in 1974. The first staff members were hired in July 1974, and the Agency had its official opening the following October.

The Blair County Board of Commissioners established the Agency as a private nonprofit corporation. However, the County Commissioners continue their active support of, and interest in, the Agency and its programs.

The years since 1974 have seen a continuous growth in the quantity and quality of services provided by the Agency. The 1974 budget of \$53,000 for the establishment of aging services has now become an annual budget of approximately \$10.6 million for the 2007-2008 fiscal year.

PHILOSOPHY OF BLAIR SENIOR SERVICES, INC.

Blair Senior Services, Inc., a private nonprofit organization, is dedicated to improving the health and welfare of older citizens through coordinating and implementing programs designed to meet the needs of older persons in Blair County.

We believe that older persons should be accorded every opportunity to remain active, independent citizens, regardless of race, creed, sex, national origin, or physical limitation. Basic to this is the maintenance of defined roles necessary to function at one's greatest potential. Programs designed to promote and encourage meaningful activity, that allow older citizens to give of their talents and knowledge, and that provide supportive services to allow freedom of choice in spite of handicaps and disabilities, are all of highest priority and shall be supported by the Agency.

We recognize the necessity of understanding older persons and their needs and; therefore, we shall encourage public information and in-service education programs that provide such understanding.

We believe we have the responsibility to coordinate existing and new

programs for older persons to ensure the efficient and effective utilization of resources, high quality of services and innovative and creative programs.

Additionally, we shall, when necessary, engage in the direct provision of services to ensure that quality services are provided in the most cost-effective manner possible.

We accept these beliefs and the accompanying responsibilities and will, to the best of our ability, promote necessary programs and services that ensure that our older citizens are indeed able to participate fully in community life.

SUMMARY OF SERVICES

- 1. Information and Referral: The receipt and answering of a request for information from an older person, family member or interested party. After the information or direction is given, a follow-up contact is made to ensure that the person who made contact is satisfied with the outcome. Also, at this level a screening is done to determine whether a need may exist for Care Management.**
- 2. Outreach: An activity that seeks out and identifies hard to reach, isolated and withdrawn older persons who may be unaware of available services.**
- 3. Nutrition Services: Group dining, socialization, educational and recreational activities which are offered to older persons Monday through Friday at the nine (9) Senior Centers throughout Blair County. Menus are published weekly in area newspapers. Special therapeutic diets are offered as part of the meals program, and pureed meals are available to individuals with serious swallowing and/or digestive problems. Frozen meals are also available to Center participants for weekend use.**

Home Delivered Meals are available to eligible older persons who are unable to prepare meals, have inadequate informal resources and are homebound. A daily hot meal and, when appropriate, a cold evening meal and/or breakfast meal are available to these individuals Monday through Friday. Frozen meals are also available to consumers when delivery routes are at capacity, or the consumer's residence is difficult to access. Holiday frozen meals are also offered.

There is no fee for these services, but a donation to help defray the costs of these services is encouraged.

Volunteer opportunities are available to persons interested in delivering

meals to the homebound elderly. Assignments generally involve two hours a week from 10:30 a.m. to 12:30 p.m., with delivery Monday through Friday. Delivery routes include the general Altoona area and all rural areas of Blair County.

LOCATION OF SENIOR CENTERS

SENIOR CENTER

LOCATED AT

**Altoona
8:00 - 4:00**

**Blair Senior Service Center
1320 12th Avenue
Altoona, PA 16601**

**Bellwood
9:00 - 1:00**

**Bell Mansion
1 Main Street
Bellwood, PA 16617**

**Claysburg
9:00 - 1:00**

**Claysburg Senior Community Center
R.D.1, Box 509A
Claysburg, PA 16625**

**Duncansville
9:00 - 1:00**

**Hicks United Methodist Church
1211 Third Avenue - P.O. Box 384
Duncansville, PA 16635**

**Juniata
9:30 - 1:30**

**Trinity Lutheran Church
(Wed. & Fri.)
408 North Sixth Street
Altoona, PA 16601**

**Martinsburg
9:00 - 1:00**

**Martinsburg Commons
403 Christiana Street, Ste. 9
Martinsburg, PA 16662**

**Roaring Spring
9:00 - 1:00**

**St. Thomas More Parish Hall
701 E. Main Street
Roaring Spring, PA 16673**

**Tyrone
9:00 - 1:00**

**Tyrone Senior Community Center
505 W. Third Street
Tyrone, PA 16686**

**Williamsburg
9:00 - 1:00**

**Williamsburg Senior Community Center
423 West Second Street
Williamsburg, PA 16693**

4. **PrimeTime Health**: Provides wellness programming designed to assist older persons in achieving a healthier lifestyle as they age.
5. **Transportation**: Shared-ride transportation is available throughout Blair County Monday through Friday, 7:30 a.m. to 5:00 p.m. Service is door to door, with drivers rendering reasonable assistance to all passengers. Individual trip requests for the service must be received, at a minimum, one working day in advance by 3:00 p.m. This service is available to the general public at full fare. Certain holiday and time restrictions may apply. For reservations or additional information, contact the transportation department at 695-3500, or 1-800-458-5552.

The Agency also provides service under the Rural Transportation for Persons with Disabilities Program. This program is sponsored through PENNDOT and provides shared-ride service to eligible persons throughout Blair County. To qualify for this program, a person must have a documented disability, be under 65 years of age, need transportation to and/or from an area not currently served by fixed-route (AMTRAN). No other funding is or has been responsible for trip sponsorship. An eligibility application must be submitted and approved prior to utilizing this service.

The Medical Assistance Transportation Program offers appropriate transportation service to Blair County residents utilizing medical assistance funding for the purpose of receiving medical treatment, evaluation or equipment. Transportation services available through this program include, but are not limited to, fixed-route (AMTRAN) and shared-ride transportation, and mileage reimbursement. Service is also available outside of Blair County with a local physician referral. An eligibility application must be submitted and approved prior to utilizing this service.

6. **Care Management**: Activities carried out on behalf of all consumers determined to have multiple, complex problems requiring the coordination of services. A Care Manager will help consumers and their families, or caregivers, develop a plan tailored to meet his/her individual needs.
7. **Personal Care**: Provides direct hands-on care to older persons needing assistance with bathing, dressing, toileting, ambulation, etc., as well as respite to caregivers from such tasks. Other activities include housekeeping and home support tasks when required along with personal care.
8. **Personal Assistance**: Provides in-home support for the chronically-

disabled older individual who needs daily hands-on care and help with other activities of daily living. The assistance differs from that of personal care in that it is a more intensive, consumer-directed care which may include multiple daily visits at odd hours.

9. **Home Support**: Provides assistance with household tasks, including cleaning, laundry and shopping, as well as in-home caregiver relief.
10. **Environmental Modifications**: Focuses on adaptation of the home for persons with disabilities, and the removal of health and safety hazards from the home.
11. **Attendant Care**: Provides in-home support for chronically-disabled persons over age 60 who were previously served under the Department of Public Welfare's Under 60 Attendant Care Program.
12. **Adult Day Care**: Provides a sheltered environment in a protective non-residential setting for impaired older adults who require supervision and assistance during the day. Socialization, therapeutic activities, and a nutrition program are available.
13. **Medical Equipment/Supplies/Assistive Devices**: Provides both durable and non-durable medical supplies and equipment, as well as assistive devices to eligible care-managed consumers where the cost of these items cannot be covered by another service.
14. **Legal Services**: Includes preparation of Powers of Attorney and Wills by an attorney, for agency-authorized consumers.
15. **Representative Payee, Power of Attorney and Guardianship Services**.: Provided on an as-needed basis for persons 60 years of age or older, who have no other responsible party to help with managing their personal and/or financial needs.
16. **Financial Review and Counseling**: Provides assistance with financial affairs that may include budget counseling and the handling of income, expenses and insurance matters.
17. **Protective Services**: Provides crisis intervention to an older person who is the victim, or potential victim, of abuse, neglect or exploitation, or who is a danger to himself or others. This service is available 7 days a week, 24 hours a day.
18. **Ombudsman Program**: The Ombudsman investigates and resolves complaints related to the health, safety or rights of older individuals who are consumers of long term care services. The program further provides

ongoing outreach and educational efforts for long term care facility residents, as well as to potential residents and their families.

19. **Placement Services**: Assists eligible older persons and their families in the voluntary placement in more appropriate living situations when they can no longer live independently. A staff member will assess the elderly individual's functional abilities and provide information to assist in the selection of the least restrictive living arrangement.

Placement services also include the provision of the Domiciliary Care Program. This service is a protected living arrangement in the community, which includes room and board plus personal care services for adults who cannot live independently because of their social and economic situations, yet who do not require 24-hour institutional or nursing care.

Domiciliary Care Placement services are provided to marginally socially adjusted adults - 18 years of age or older - who have difficulty in everyday living because of frailties of age or due to physical, visual or mental impairment.

20. **Nursing Home Transition Program**: Identifies individuals residing in nursing homes who could live in the community with home and community-based services and supports. Consumers who wish to transition from the nursing home are provided assistance in planning, making arrangements for housing and services in the community, moving into the community, and community integration.
21. **Supplemental Security Income Supplements (SSI)**: The Agency's SSI Assessment/Reassessment is done to determine the level of care needed for a consumer who will be residing or currently resides in a personal care or domiciliary care home. This medical/psychosocial assessment is done in conjunction with the Department of Public Welfare's financial assessment to determine the overall eligibility for the supplemental income payment.
22. **Pre-Admission Assessment Program**: Provides for a comprehensive assessment of persons applying for admission to a nursing home under the Medical Assistance Program (Medicaid). If determined eligible, admission is authorized. If deferred from admission, a service plan may be implemented for community care. Under Omnibus Budget Reconciliation Act (OBRA) requirements, it also provides pre-admission assessment of persons in special target groups seeking admission to a nursing facility, whether or not that person is applying for or receiving Medical Assistance. A review of records and further evaluation are used to determine if admission is appropriate.

23. Pennsylvania Department of Aging Waiver Program: Provides homebound community-based long term care services to eligible older persons as an alternative to nursing home care. Consumers must meet medical and financial eligibility requirements to participate in this program. Consumers may receive a variety of services such as Personal Care, Home Support, Respite, Day Care, Meals, Transportation, Medical Supplies & Equipment, Home Health Aide, Physician and Registered Nurse Visits, Counseling, and Physical, Occupational and Speech Therapies.

24. Family Caregiver Support Program: Provides financial reimbursement and care management support, through both state and federal funding, to families providing care to older persons. This program looks at the caregiver as the principal recipient of this service. Depending on eligibility, financial reimbursement may be a maximum of \$300/month, but will be calculated based on total household income.

25. Foster Grandparent Program: Provides meaningful stipended volunteer opportunities for low income persons age 60 and older to children with special needs in designated volunteer stations, or to children whose family has been referred by an agency for the assignment of a Foster Grandparent Home Visitor.

Foster Grandparents volunteer four hours a day, five days a week, and receive a \$2.65/hour tax-free stipend to defray the cost of volunteering. They receive supervision from volunteer station and agency staff. Typical activities of Foster Grandparents are: playing, cuddling, feeding, reading, walking, talking, exploring, assisting in physical and speech therapy, crafts, outdoor play, teaching simple tasks, and self-care skills. The Agency also sponsors the Foster Grandparent Program in Huntingdon County.

26. Senior Companion Program: This program trains low income persons 60 years of age and older to help other older persons remain independent in their own homes. Senior Companions volunteer four hours a day, five days a week, assisting two or three elderly consumers a week. They receive a \$2.65/hour tax-free stipend to help defray the cost of volunteering. There is no fee for consumers receiving the service, but certain qualifications must be met to receive a Companion.

27. Retired and Senior Volunteer Program: Offers persons 55 years of age and older the opportunity to share a lifetime of experience by donating their time to nonprofit organizations throughout the County. Volunteers are given the opportunity to serve four or more hours a week in an area that they select. Volunteers are reimbursed for out-of-pocket expenses.

The Agency also sponsors the Retired and Senior Volunteer Program in Huntingdon County.

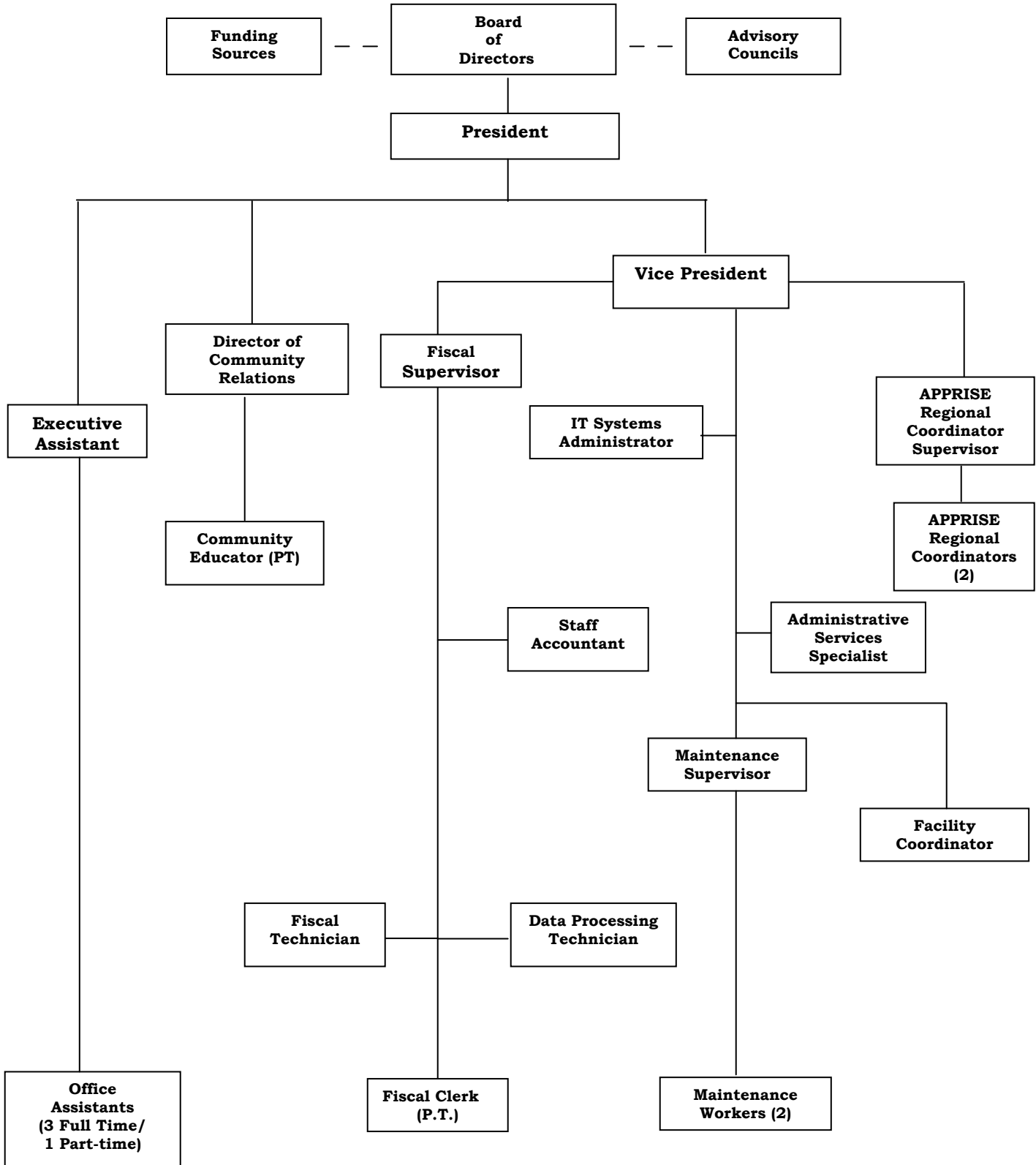
- 28. APPRISE TeleCenter: Trained volunteers offer callers across the Commonwealth help in answering health insurance questions, provide basic information and refer callers who need extensive help to local APPRISE health insurance counseling sites in their communities. The program is funded by a separate contract with the Department of Aging.**
- 29. Housing Program and Case Management: Provides services such as rent, utilities, security deposits, and counseling services for income eligible consumers meeting specific eligibility requirements. The Case Management Program involves the establishment of an ongoing consumer/case manager relationship which emphasizes dialogue and interaction. Case Management Services are a series of coordinative activities to determine with the consumer what services are needed and to coordinate their timely provision.**
- 30. Emergency Food & Shelter: The Agency is designated as the administering agency for Emergency Food & Shelter funds. This program offers help with rent/mortgage, utilities, emergency shelter, and emergency food to persons meeting specific eligibility requirements.**
- 31. Altoona Housing Authority Resident Services Coordination: Ensures that residents of the Green Avenue and Eleventh Street Towers receive the supportive services necessary to continue living in their own apartments as comfortably and as long as possible. A Resident Services Coordinator serves as a liaison between residents and the community. The Coordinator serves both older and disabled residents of the two facilities. The program is funded by a grant from the Altoona Housing Authority.**

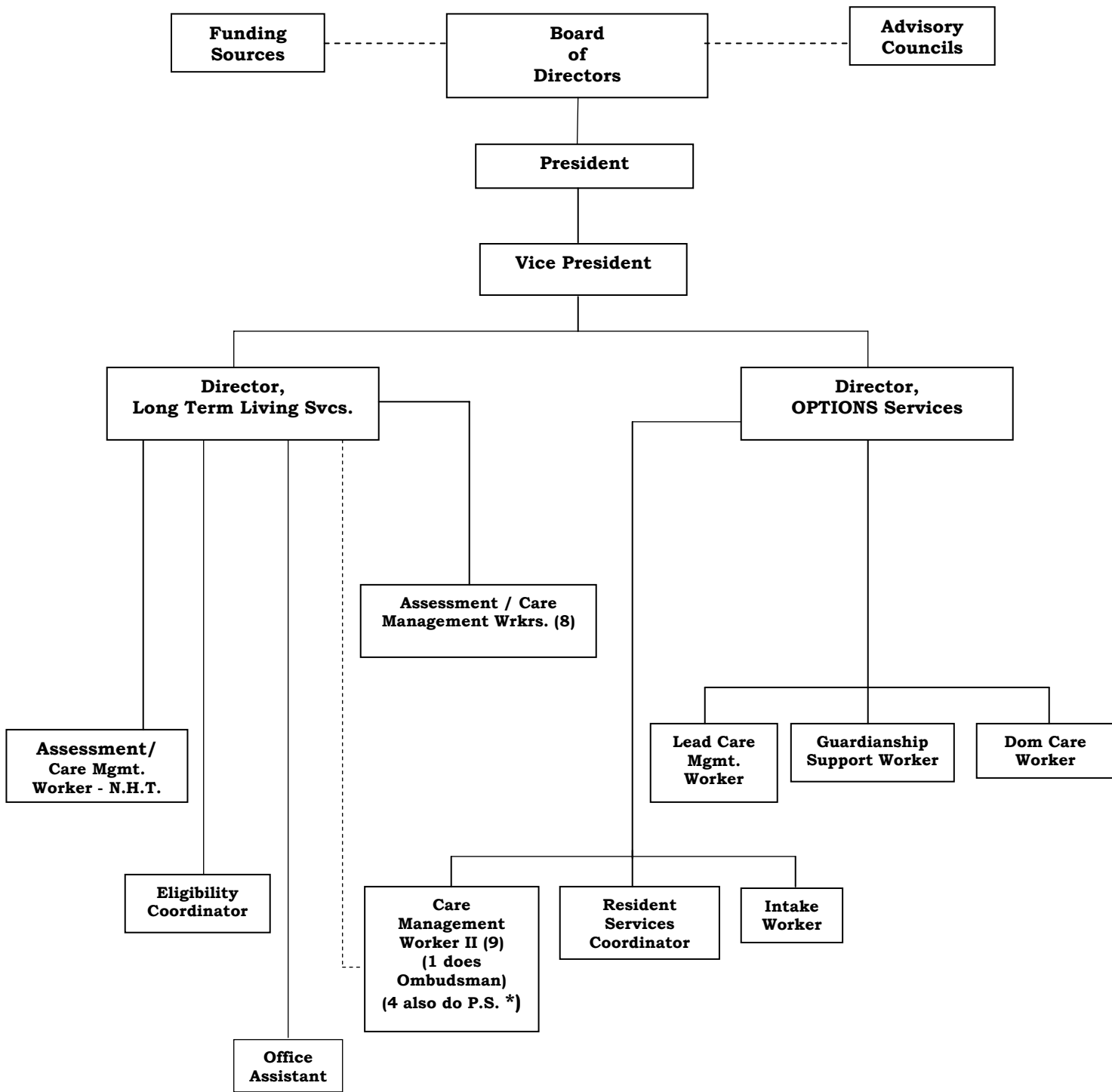
Agency Advisory Councils

There are six (6) Advisory Councils established to assist the Agency's Board of Directors and program staff in the operation of specific services. These Councils are:

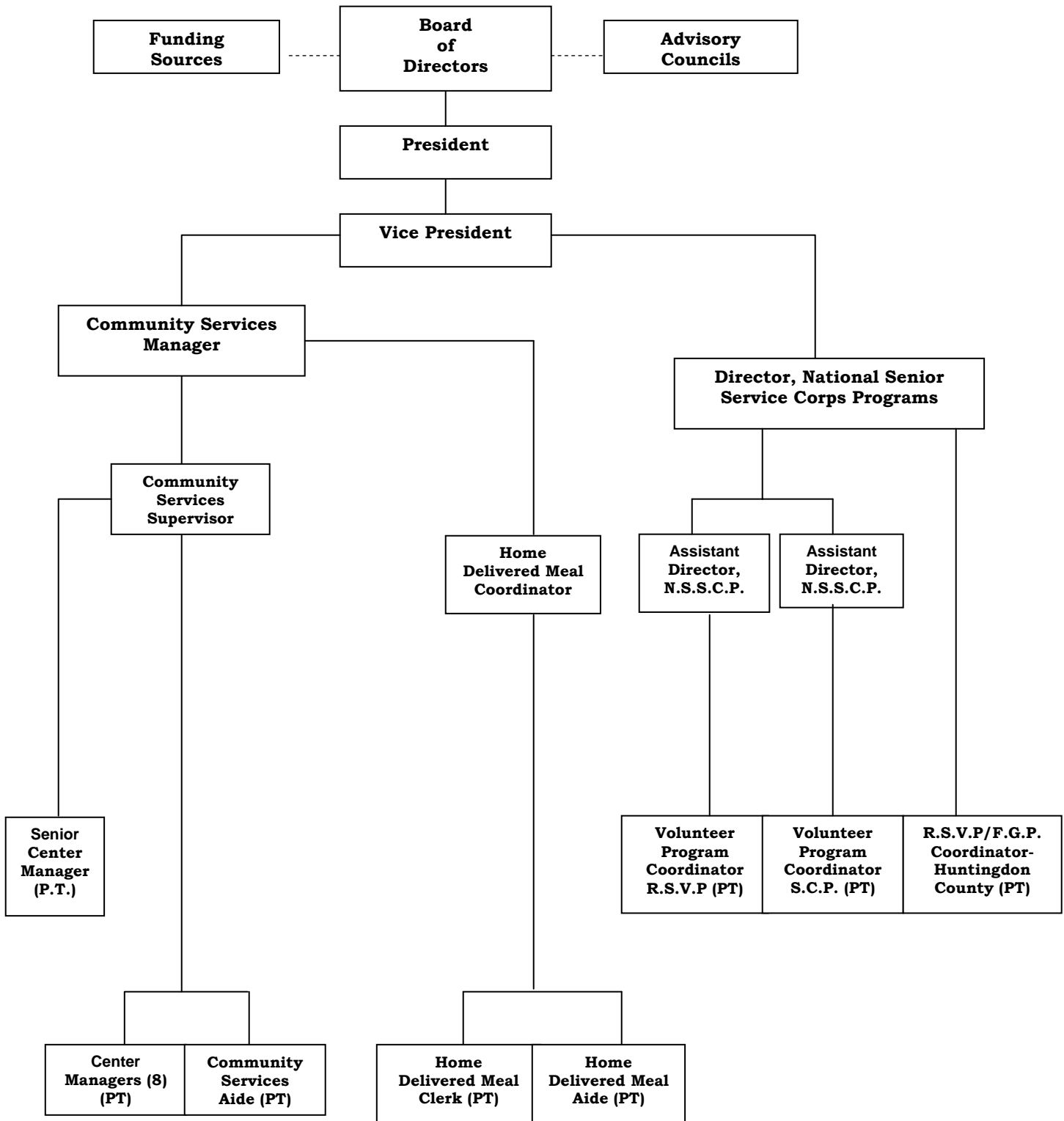
- **Agency Advisory Council** - reviews and approves Agency plans and examines specific issues as assigned by the Board of Directors.
- **Long Term Care Advisory Council** - advises the Agency's Board of Directors and staff on matters and developments pertaining to the local Long Term Care system.
- **Blair County Senior Centers' Advisory Council** - advises the Board of Directors and staff and assists in forming policies, procedures, rules and regulations, identifying needs, and performing evaluations of senior centers.
- **Transportation Advisory Council** - advises and offers guidance to the Agency's Board of Directors in the operation of the Transportation Program. This group reviews the Agency's annual transportation application to PennDOT.
- **National Senior Service Corps Program's Advisory Council(s)** - this Council advises the Board of Directors and respective staff on program recruitment, public relations, program development, fund raising, and program evaluation for the Agency's Retired and Senior Volunteer Program, Senior Companion Program and Foster Grandparent Program.

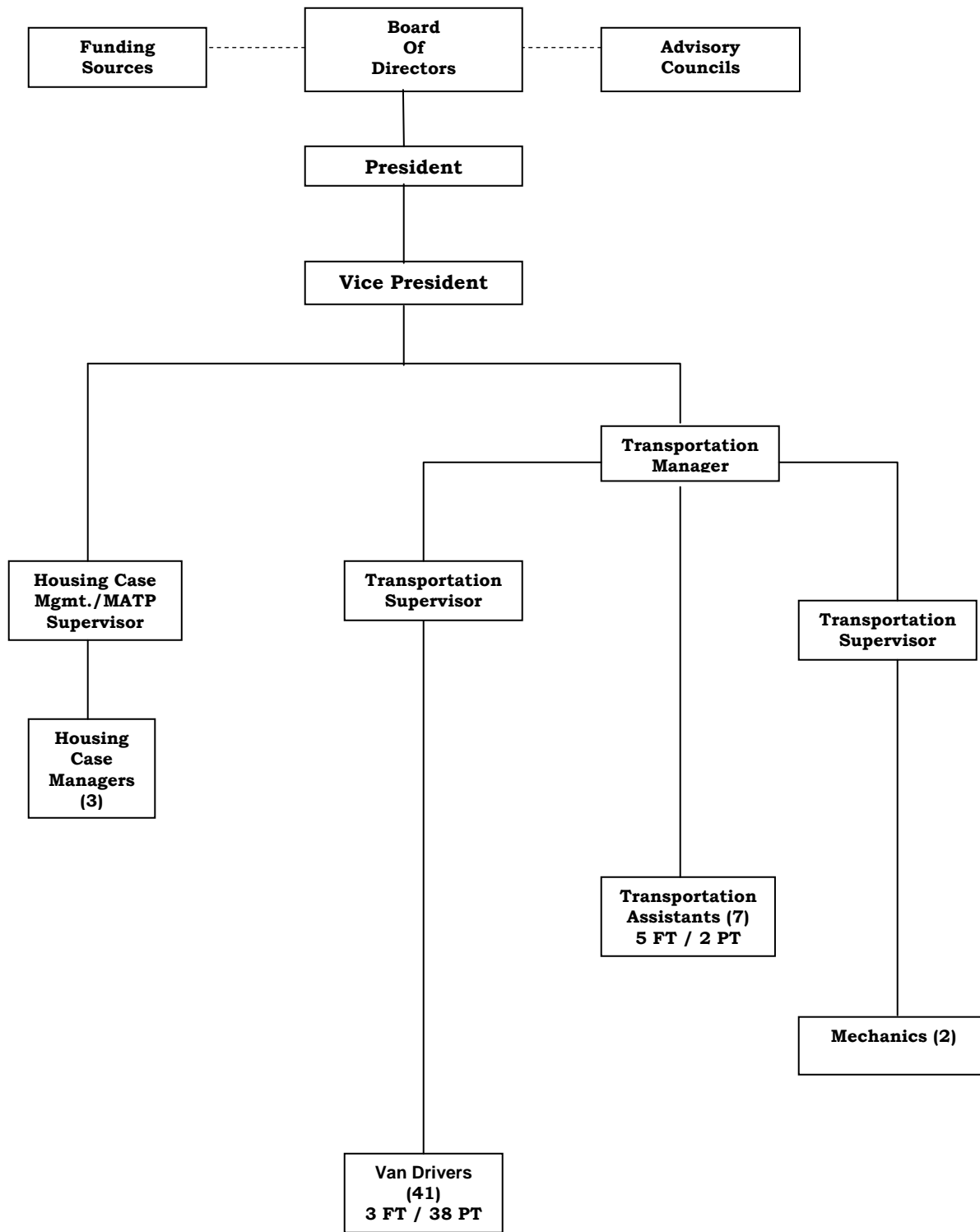
A separate **Retired and Senior Volunteer Program Advisory Council for Huntingdon County** is in place to advise the Agency and staff on operations in that County.





* ----- = Supervisor of P.S. Only





Blair Senior Services, Inc. - Designated Staff Affiliations

Altoona Area School District – School to Work Stakeholders’ Committee
Altoona City Authority Watershed Protection Steering Committee
Altoona Housing Authority
Association of Fundraising Professionals – Allegheny Mountains Chapter
Behavioral Health Advisory Committee of the Altoona Hospital and Home Nursing Agency
Blair County Affordable Housing Fund Advisory Board
Blair County Behavioral Health
Blair County Community Partnership
Blair County Emergency Food and Shelter Board and Special Needs Housing Task Force
Blair County Health & Welfare Council
Blair County Planning Commission, Coordinated Public Transit-Human Services Transportation Committee
Blair Senior Services, Inc. Advisory Council
Blair Senior Services, Inc. Local Advisory Committee-Rural Transportation Program for Person with Disabilities
Community Homelessness Assessment, Local Education, and Networking Groups
Geriatric Interest Network of the Blair County Region- Board and Task Force
Human Resources Management Association of Blair County
Institutional Review Committee – Altoona Hospital Campus
Inter-Agency Task Force Meeting
Local Housing Options Team
Long Term Care Advisory Council
MISA Policies & Procedures Work Group
National Association of Area Agencies on Aging
National Association of Foster Grandparent Program Directors
National Association of Nutrition and Aging Services Programs
National Association of Retired and Senior Volunteer Program Directors
National Association of Senior Companion Program Directors
PASC (Pennsylvania Association of Senior Centers)
PENNDOT Public Transportation Process Reengineering Subcommittee
Pennsylvania Association of Area Agencies on Aging
Pennsylvania Association of National Senior Service Corps Project Directors
Pennsylvania Institute of Certified Public Accountants
Pennsylvania Mobility Plan Development Team
Pennsylvania Public Transportation Association (PPTA) - Policy Committee, IT Committee, Community Transportation Committee, Maintenance Committee, Operations Committee, Supervisory Training Committee
PPTA Vehicle Specifications Committee-Department of General Services
Regional Workforce Investment Board of the Southern Alleghenies Planning and Development Commission
Sixth Ward Ministries
STOP Grant Task Force – Family Services of Blair County
Victim/Witness Advisory Board

**Medicaid Waiver Program
June 2007**

Persons

	Persons Served
New Persons Served	6
Persons Served this Month	171
Persons Served FYTD	264

Units/Cost

Services	Measure	Units Rendered for the Month	Cost for Services for the Month	Units Rendered Year to Date	Cost for Services Year to Date
1. Personal Care	Hours	8,708.50	\$161,907.34	98,401.00	\$1,823,740.68
2. Respite Care	Hours	4.25	\$2,109.53	8,772.25	\$180,792.95
3. Companion	Hours	76.00	\$319.20	10,035.50	\$162,404.99
4. Meals	Meals	2,222.00	\$10,043.15	26,365.00	\$119,115.74
5. Transportation	Trips	6.00	\$270.00	6,220.00	\$83,471.63
6. Personal Assistance	Hours	396.25	\$6,424.80	6,398.75	\$103,884.87
7. Home Support	Hours	32.50	\$596.52	3,146.75	\$58,836.48
8. Supplies & Equipment	Items	55.00	\$2,552.35	730.00	\$30,101.25
9. Skilled Nursing	Visits	13.00	\$888.42	183.00	\$12,506.22
10. Personal Emergency Resp.	Unit	75.00	\$1,947.50	904.00	\$23,185.50
11. Home Modifications	Unit	2.00	\$3,585.90	11.00	\$15,366.49
12. Adult Day Care	Days	257.00	\$8,974.00	2,887.00	\$105,523.00
	Totals		\$199,618.71		\$2,718,929.80

**Bridge Program
June 2007**

Summary of Bridge Program Activity	Persons Served	Units Rendered for the Month	Cost for Services for the Month	Units Rendered Year to Date	Cost for Services Year to Date
	1	18	\$72.00	151	\$2,476.00

**Nursing Home Transition Program
June 2007**

	Goal	Current	FYTD
Consumers Transitioned	33	1	37

L I N E #	SERVICE	June-07				L I N E #	June-07				L I N E #
		Projected UPS for FY 06 - 07	New Persons Served for the Month	Total Persons Served for the Month	Total Persons Served Year-to-Date		Projected UNITS for FY 06 - 07	Measure	Rendered for the Month	Rendered Year-to-Date	
1	Home Delivered Meals	1,300	48	775	1,402	1	200,500	Meals	17,974	218,412	1
2	Congregate Meals	2,700	146	899	2,658	2	64,500	Meals	5,355	61,502	2
3	Senior Community Center Services					3	3,850	Events	294	3,705	3
4	Volunteer Services	1,500	-8	941	1,439	4	305,000	Hours	22,979	290,580	4
5	Transportation Services	2,450	50	1,100	2,365	5	120,000	One-way Trips	8,950	112,858	5
6	Medical Assist. Trans. Prog. (Subset of Line 5)	250	16	183	365	6	8,300	One-way Trips	890	9,262	6
7	I & R					7	9,000	Contacts	3,392	8,398	7
8	Outreach	35	17	17	34	8	35	Contacts	17	34	8
9	Care Management	1,900	105	323	1,799	9					9
10	Assessments	2,100	-300	116	1,483	10	2,300	Assess/Reassess	119	3,015	10
11	Personal Care	400	3	169	330	11	30,500	Hours	1,963	28,035	11
12	Home Support	200	2	121	226	12	7,250	Hours	490	6,685	12
13	Personal Assistance	55	4	38	81	13	6,500	Hours	679	8,938	13
14	Adult Day Care	60	0	24	48	14	3,900	Client Days	267	3,314	14
15	Attendant Care	12	0	11	12	15	14,250	Hours	1,035	12,661	15
16	Environmental Modifications	5	2	2	5	16	5	Homes Modified	2	5	16
17	Family Caregiver Support Prog. (Families)	70	2	60	77	17					17
18	Medical Equipment & Supplies	170	2	61	151	18					18
19	Dom Care	50	0	45	47	19					19
20	Legal Services	225	18	19	220	20	350	Hours	31	309	20
21	Ombudsman Services	40	2	2	38	21	40	Resolved Complaints	2	38	21
22	Protective Services	25	1	1	14	22	20	Investigations Complete	0	5	22
23	Guardianships	20	0	10	17	23	200	Managed	10	137	23
24	Apprise	2,400	345	345	5,788	24	700	Hours	49	938	24
25	TOTAL OLDER PERSONS SERVED	7,000	378	2,813	10,112	25					25

**BLAIR SENIOR SERVICES
NEEDS ASSESSMENT - CONSUMERS**

NEED	1	2	3	4	5	TOTAL
<p><u>Health Care</u></p> <ul style="list-style-type: none"> - Medicines - Exercise Program - Supplies - Equipment - Prevention Screening - Good Hospitals - Flu Shots - Many Pharmacies - - Mental Stimulation 	18	18	16	8	6	66
<p><u>Transportation</u></p> <ul style="list-style-type: none"> - More 	12	14	11	6	3	46
<p><u>Nutrition</u></p> <ul style="list-style-type: none"> - Food - Home Delivered Meals - Good Nutrition - Prepared Meals 	12	12	11	8	1	44
<p><u>In-Home Services</u></p> <ul style="list-style-type: none"> - Supervision - Caregiver - Checking On - Care Management - Waiver - Complete Care 	12	8	7	5	6	38

NEED**1****2****3****4****5****TOTAL****Companionship**

- Friendship
- Feel Wanted
- Senior Companion Program
- Belonging
- Someone to Talk to
- Trusting

3**3****3****8****9****26****Housing**

- Independent Living
- Fair Managers
- Affordable
- Comfortable

6**5****4****3****3****21****Safe Neighborhood**

- Security
- Patrols
- Neighborhood Watch
from Violence
- Emergency Relocation
- Protection

4**3****2****3****3****15****Financial Assistance**

- More Social Security
- Planning
- Protect From Scams
- Help with Taxes

3**4****3****3****2****15****Social Activities**

- Travel

1**1****2****2****1****7**

NEED	1	2	3	4	5	TOTAL
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<u>Centers</u> - In Hollidaysburg	3		1	1	1	6
<u>Adult Day Care</u>		1	1	1	1	4
<u>Legal Assistance</u>			1	1	1	3
<u>Utilities</u> - Heat		1	1	1		3
<u>Information & Referral</u>				2	1	3
<u>Support of All Kinds</u> - Help	1		1			2
<u>Protective Services</u>			1			1
<u>Protection of Assets</u>	1					1
<u>Volunteer Services</u>				1		1