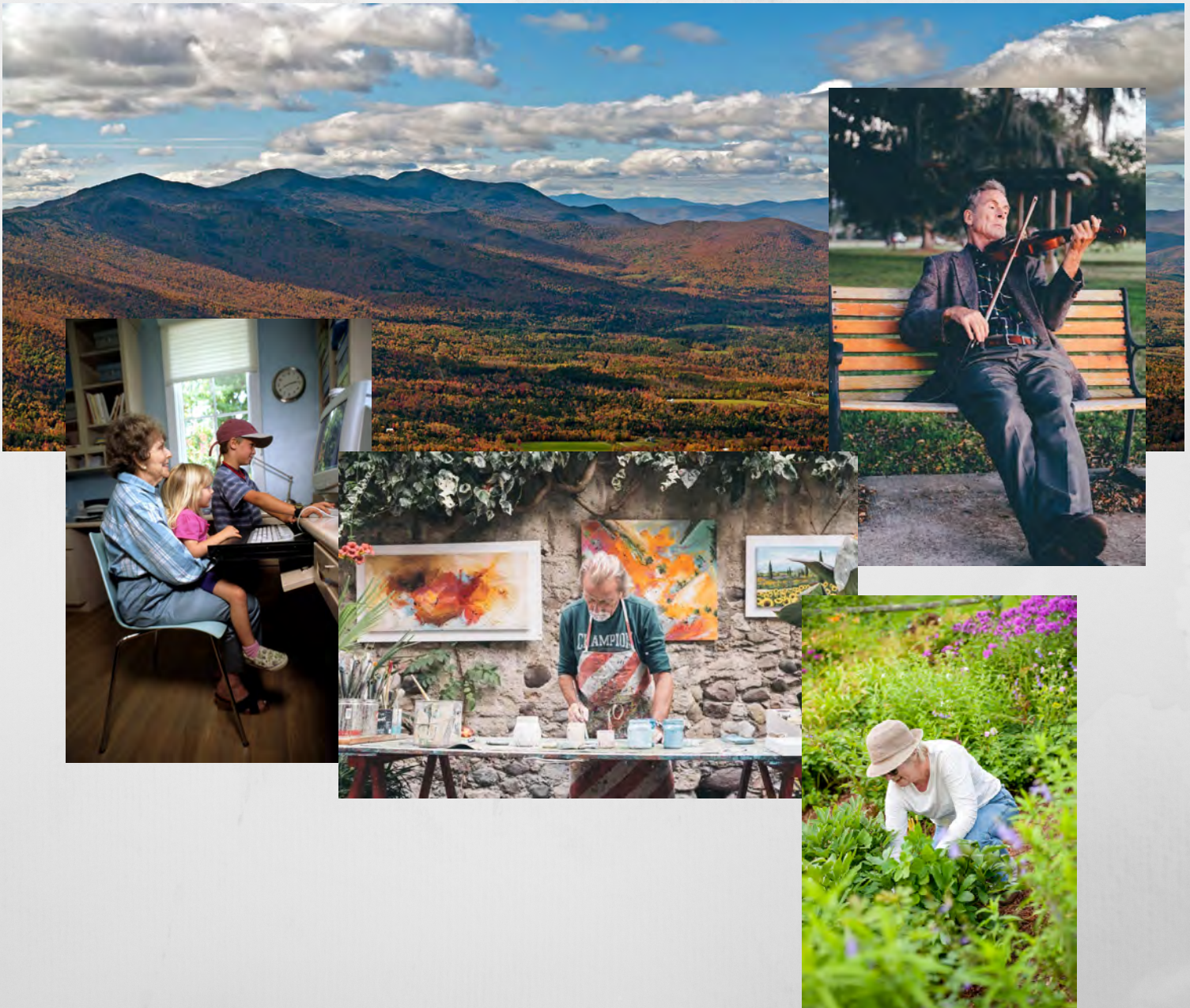


VERMONT STATE PLAN ON AGING Year 1 Progress

FFY 2019



December 2019

**Vermont State Plan on Aging
Federal Fiscal Years 2019 - 2022
Year 1 Progress Summary
December 2019**

Introduction:

In order to plan for the ongoing and future needs of older adults in Vermont and to meet the requirements of the Older Americans Act (OAA), the Department of Disabilities, Aging and Independent Living (DAIL), the designated State Unit on Aging (SUA) for Vermont, prepared a four-year [State Plan on Aging](#) approved in September 2018 by the Administration for Community Living (ACL).

As part of DAIL's ongoing administration of the plan, the department has reviewed progress on goals for Year 1 (October 2018 – September 2019) of the plan. The summary below represents some of the work accomplished to date and work planned for the future.

GOAL 1: SUPPORT HEALTHY AGING FOR ALL

Objective 1.1: Increase older Vermonter participation in evidence-based falls prevention interventions and programs.

Strategies:

- Collaborate with *Falls Free Vermont (FFV)*, using a variety of methods, to increase awareness among individuals, families, providers and healthcare systems of proven falls prevention interventions and programs offered throughout the state.
Year 1 Progress:
 - FFV promoted Healthy Aging and Falls Prevention Day at the Statehouse in May 2019 to raise awareness and engage legislators. Three media outlets covered the event.
 - FFV promoted Falls Prevention Awareness Month in September 2019 with a statewide press release, 20+ screening events statewide, regional events, a WCAX/Across the Fence episode, updated class lists on www.fallsfreevermont.org and social media promotion.
 - FFV has plans to partner with the Brain Injury Association for an Awareness Day at the statehouse in March 2020.
- Increase access to falls prevention interventions and programs through sustainable expansion of a variety of interventions and programs throughout the state.

Year 1 Progress:

- Area Agencies on Aging (AAAs) used OAA Title III-D funds to expand evidence-based Tai Chi classes geographically.
- In January 2019, FFV, DAIL and AAAs supported the Department of Health (VDH) in its application for an ACL Falls Prevention grant to expand Tai Chi, launch A Matter of Balance, and explore offering Otago, all evidence-based programs serving slightly different populations of older Vermonters. VDH did not receive the grant; FFV is now

exploring options and strategies for a 2020 grant application. We anticipate a community partner will be lead applicant.

- Department for Children and Families (DCF) and VDH have partnered on a pilot “weatherization plus falls” program offering home modifications to weatherization clients at high risk of falls. Data/results of the pilot should be available by the end of 2019.
- FFV has joined a New England Evidence-Based Programs Network Collaborative with all six neighbor states and led by the MA-based Healthy Living Center of Excellence. The goal of the collaborative is to work together across borders to support expansion of quality-driven programs and build coordinated systems for future sustainable funding sources. V4A is FFV’s lead but multiple steering committee members participate in working groups.
- DAIL has been engaging in conversations with RISE VT to encourage more collaborative focus on older Vermonters, as the growing demographic in our communities, with an understanding that prevention and healthy lifestyles can be adopted at any age.
- Establish data elements and statewide data collection and tracking of falls prevention interventions and programs, including participant outcomes.
 - Year 1 Progress:
 - For FFY19, AAAs implemented standardized pre- and post-surveys for Tai Chi participants to gauge falls risk and social isolation risk before and after taking Tai Chi. FFY19 results should be available by early 2020.
- Additional strategies DAIL would like to move forward:
 - Engage with OneCare, the Accountable Care Organization, about potential Medicare cost savings and better population health outcomes through investment in falls prevention.
 - Engage with the Blueprint for Health to encourage more falls risk screening in primary care and development of the evidence-based program, A Matter of Balance, within their cohort of program offerings.
 - Support falls prevention education and training within the Choices for Care program that would include basic falls risk screening, home environmental assessments, home modifications options, and Assistive Technology.
 - Explore new partnerships, i.e. with electric companies who could offer energy efficient light bulbs and installations, in addition to falls/safety information to older Vermonters.

Objective 1.2: Increase behavioral health prevention, treatment and recovery for older Vermonters.

Strategies:

- Raise awareness through community forums/trainings and inter-agency coalitions about the prevalence of substance misuse among older Vermonters and the need for more age specific prevention, treatment and recovery programs for substance abuse, including alcohol and opioids.

Year 1 Progress:

- Via the Opioid Overdose Prevention Grant in 2018-2019 from VDH to DAIL, all Area Agencies on Aging (AAAs) launched or expanded the evidence based “HomeMeds” medication safety program, with a component of client education about substance misuse. SASH (Support and Assistance at Home) also participated in this grant by creating an educational webinar on understanding the risks of Opioid use for SASH participants and other older adults and a webinar for staff on how to reduce this risk through recognizing when older adults are at risk and educating them about this risk. This service is be a regular part of their Wellness program for all SASH participants, and the webinars were offered for use by the Area Agencies on Aging and other elder service agencies.
- DAIL used the same grant funding to develop the new ‘Aging and Medication’ educational brochure and distributed widely across aging network and beyond (8000+ copies distributed to date).
- DAIL continued work with existing inter-agency coalitions, which includes work to re-engage those that have been less active, and work to build coalitions in new regions, e.g. Addison County and in the Upper Valley area.
- DAIL gave many presentations in communities, i.e. waiver team meetings, and at conferences (Aging in Vermont Conference, Vermont Geriatric Conference, and Mental Health Conference).
- Increase identification of older Vermonters in need of substance misuse prevention and/or addiction treatment by expanding the implementation of the Screening, Brief Intervention, and Referral to Treatment (SBIRT) process to more older adults.

Year 1 Progress:

- All SASH housing participants were screened with SBIRT. Working to engage other providers to do screening. SBIRT training has been provided to case management staff at all the Area Agencies on Aging.
- DAIL worked with VDH Surveillance to have a question added to the 2018, 2020, and planned for every two years thereafter Behavioral Risk Factor Surveillance Survey (BRFSS) about risky medication usage with alcohol.
- VDH and DAIL are working to develop systemic data collection and trend analysis that identifies the prevalence of substance misuse and makes the case for the need for more treatment options in Vermont.
- Collaborate with the Department of Mental Health and the designated mental health agencies to increase Eldercare Clinician (ECC) coverage sustainably across the state, target resources to those at highest risk, collect client outcome data, and increase collaboration with medical providers and the aging network.

Year 1 Progress:

- DAIL continued the work to maintain/increase ECC coverage. As of 10/31/19, only one county is without a clinician and the agency is in the hiring process.
- DAIL proposed that Vermont seek a waiver as part of its All Payer Waiver to allow licensed mental health and substance use clinicians to bill Medicare, which would

increase the number of people served by ECCs and other providers. DAIL will continue to advocate for this proposal whenever waiver discussions allow.

- Support increased suicide prevention awareness and training among Aging Services Network providers.

Year 1 Progress:

- In 2017 all AAAs had a staff member who attended a UMMatter Train the Trainer who brought the training back to all staff. Turnover since then has decreased the percentages of those trained at some of the agencies. In 2019, three of five AAAs had a staff member who attended a Zero Suicide Prevention Institute and brought additional strategies back to their communities.
 - In 2019, one Adult Day had a staff member who attended a UMMatter Train the Trainer.
 - As of 2019, all SASH coordinators are trained in basic suicide prevention.
 - Of note, RISE VT is exploring piloting the “Men’s Shed” model in VT(
<https://mensshed.org/what-is-a-mens-shed/>) as a strategy to prevent social isolation and suicide.
- Additional Strategies DAIL would like to move forward:
 - Seek to have a voice for older Vermonters on the newly formed Substance Misuse Prevention Council (formerly the Opioid Coordinating Council).
 - Continue a collaborative training with the Center for Health and Learning and Vermont Association of Area Agencies on Aging focused on suicide risk and prevention among older Vermonters.

Objective 1.3: Increase engagement to reduce impacts of isolation and loneliness on health and well-being of older Vermonters.

Strategies:

- Improve transportation access by encouraging creative options (local, volunteer based, community driven, climate friendly, etc.) while advocating for increased public transportation and universally accessible community design.

Year 1 Progress:

- DAIL is participating in Public Transit Advisory Committee and Public Transit Policy Plan Advisory Committee. This helps us bring needs of older Vermonters to these conversations and hear about what is happening via the Agency of Transportation and transit providers around the state, i.e. a microtransit pilot in Montpelier, Rides to Wellness via Mt. Ascutney Hospital, volunteer recruitment efforts and work to improve local committee management and use of funds to support more rides for older Vermonters.
- DAIL is working to promote the concept of advance planning regarding mobility in the same way we promote advance planning for healthcare. We have been using the CDC “MyMobility” Planning Tool to introduce this work to partners.

- Support a network of high quality, sustainable senior/community centers that offer diverse opportunities for engagement, including services such as nutritious meals, wellness programs, educational activities, volunteerism, intergenerational connections and more.
 - Year 1 Progress:
 - DAIL conducted a senior center survey in 2018 and 2019 to gauge impact and trends. Notably, reported participation decreased statewide by about 2,000 people, though responses varied year to year, and some active centers reported increased participation.
 - DAIL sponsored a senior center annual meeting in June 2019 in which centers shared successes, challenges, best practices and opportunities for collaboration and advocacy.
 - DAIL encouraged conversations between V4A/AAAs and VASCAMP/Senior Centers to collaborate more directly on initiatives related to nutrition programs and healthy aging.
- Sustain existing and explore new innovative and supportive housing models such as Homesharing, SASH, the Village Model, cohousing, etc., while supporting a strong continuum of long-term care housing options.
 - Year 1 Progress:
 - DAIL continues to support SASH and HomeShare VT.
 - DAIL has expanded the Adult Family Care (AFC) model for Choices for Care participants and is working to strengthen quality of care and oversight of AFC homes.
 - DAIL has spoken to the need for a strong continuum of long-term care housing options in meetings and on the radio.
- In conjunction with the Vermont Deaf, Hard of Hearing, and DeafBlind Advisory Council, coordinate training for the Aging Services Network and local communities regarding awareness around hearing loss and strategies to increase hearing accessibility.
 - Year 1 Progress:
 - DAIL presented to the Council in spring 2019; council is interested in providing education/awareness tools and materials for aging network. After the Director for Deaf, Hard of Hearing, and DeafBlind is hired at DAIL, we will be able to further this initiative.
- Additional Strategies DAIL would like to move forward:
 - St. Johnsbury pilot includes revising the Moderate Needs Group (MNG) Independent Living Assessment (ILA) to include specific questions about social isolation and loneliness that will contribute to the scoring and prioritization of individuals for services. If successful, this may be considered statewide.
 - There are many additional ways to impact social isolation not mentioned here that DAIL seeks to promote, even if capacity is limited to implement:
 - Use of assistive technology to decrease isolation and loneliness.
 - Increase in multigenerational opportunities, including co-location of programs and services.
 - Potential pilot reconfiguration of the federal Senior Corps programs – Senior Companion, RSVP and Foster Grandparent - into a more flexible program for Vermont.

Objective 1.4: Increase meaningful employment opportunities for older Vermonters to support health and financial security of individuals and a prosperous economy.

Strategies:

- Educate businesses about the importance of recruiting, retaining, and engaging mature workers, and highlight opportunities for employers to connect directly with mature job seekers through online and in-person hiring events and recruitment campaigns targeted to this population.

Year 1 Progress:

- DAIL's Mature Worker Coordinator has engaged the Vocational Rehabilitation Business Account Managers in having these educational conversations with employers.
- Disseminate materials to encourage businesses to develop concrete policies and employee supports that target mature workers, including those who are also family caregivers.

Year 1 Progress:

- DAIL has exhibited at multiple conferences (Workplace Wellness, Aging in VT, etc.).
- Associates for Training and Development (A4TD), recipient of the OAA Senior Community Service Employment Program funding, presented at multiple conferences and spoke on VPR.
- Highlight the positive contributions that mature workers make to employers through the continuation of the Governor's Award for Business Excellence in Supporting Mature Workers.

Year 1 Progress:

- Due to staffing transitions, DAIL postponed the next awards to Spring 2020.
- Leverage the Senior Community Service Employment Program (SCSEP) to provide workers with skills growth opportunities such as workshops, computer classes, and participation in community college and technical education center programming that qualifies them for in-demand jobs, connects them with hiring employers, and better utilizes the mature worker population to expand the state's workforce.

Year 1 Progress:

- DAIL continues to assist A4TD with strategies to serve the maximum number of participants allowed via SCSEP, which support older workers' desire to attain meaningful, competitive employment and their contributions to the workforce.

GOAL 2: STRENGTHEN CORE OLDER AMERICANS ACT SERVICES THAT SUPPORT OLDER VERMONTERS IN GREATEST ECONOMIC AND SOCIAL NEED

Objective 2.1: *Information and Referral/Assistance (I&R/A):* Improve I&R/A statewide so that more older Vermonters are aware of the statewide helpline and the resources offered by the Area Agencies on Aging and have a consistently high-quality experience when they call.

Strategies:

- Implement a standardized I&R/A customer experience measurement tool and develop an implementation and continuous quality improvement plan for the tool.

Year 1 Progress:

- All 5 AAAs implemented the customer survey tool in FFY18 but only 2-3 continued its use

in FFY19 after grant funding ended. Some AAAs have shared that they find the survey helpful in quality improvement work with their Helpline staff.

- Disseminate outreach materials to promote the Helpline and I&R/A services statewide.

Year 1 Progress:

- Using ADRC funding, a new “No Wrong Door” rack card was created by the AAAs and disseminated. It continues to be used for ongoing outreach.
 - Develop a standard I&R/A report and use the report to track trends in I&R/A to help in identifying future needs and service utilization.
- Year 1 Progress:
- New ADvancing States report on I&R/A trends shows complexity of the work; AAAs will use the report to talk with DAIL and look at ways to standardize work, track trends, and work together to improve I&R/A reach and service.
 - Increase calls to the Helpline for SHIP (State Health Insurance Assistance Program) to support older Vermonters with information and assistance with Medicare.

Year 1 Progress:

- The V4A SHIP Director may be working on this.

Objective 2.2: Nutrition: Increase food security of older Vermonters through the Home Delivered Meal program.

Strategies:

- Embed food security prioritization tool into Home Delivered Meal intake and standardize assessment and reassessment procedures for active caseload management.

Year 1 Progress:

- All AAAs are using the prioritization tool. Some have screened all participants; others screen new participants after they are referred. In the event a waiting list was needed, participants screened as high risk via the tool would be added before those screened at lower risk.
 - Collaborate with the Accountable Care Organization, OneCare, and hospitals in Vermont to support nutrition and food security for high risk patients.
- Year 1 Progress:
- Senior Solutions is partnering with Dartmouth Medical Center and the Thompson Senior Center in Woodstock to pilot medically tailored meals for patients with congestive heart failure; the pilot seeks to learn if providing three meals a day specific to their medical condition improves chronic disease management and reduces healthcare costs.

- Explore a pilot to increase meal frequency for those at highest risk of food insecurity and measure outcomes.

Year 1 Progress:

- At least one AAA has expressed interest in this model; more discussion needed.
- Provide 3SquaresVT application assistance to program participants at initial assessment and reassessment.

Year 1 Progress:

- AAAs have been working to incorporate 3SquaresVT application assistance into their visits with people wherever possible.
- Additional Strategies DAIL would like to move forward:
 - DAIL and AAAs are interested in addressing food insecurity via congregate (community) meals. AAAs have conducted a survey this fall of congregate meal participants to learn more about their experience and are discussing ways to increase participation through a focus on a welcoming environment, high quality meals, and financial sustainability of programs.
 - DAIL and AAAs are working to reframe congregate meals and meal sites within the context of reframing aging.

Objective 2.3: Case Management: Support older Vermonters to live in settings they prefer through high quality case management (both OAA and Choices for Care), including person-centered planning.

Strategies:

- Ensure all case management staff are trained in person-centered planning and develop a person-centered plan with their clients.

Year 1 Progress:

 - All AAAs do person-centered plans with Choices for Care clients. 3 of 5 do this with OAA case management clients; others are working towards this over time.
- Explore a statewide acuity scale to allow for consistent prioritization of those in greatest need.

Year 1 Progress:

 - One AAA has an acuity scale they use and find meaningful and has shared it with the other case management directors; they plan to discuss this more at an upcoming meeting.
- Explore different models and approaches around teaming and specialization.

Year 1 Progress:

 - AAAs are doing this but it is not well documented across all agencies. For example, one AAA has three teams that each have their own Admin staff and have specific case managers who handle more complex cases. They are working to document efficiencies and client satisfaction.
- Integrate case management work with health systems and healthcare payers to support business acumen (for example, the 2018 Care Navigator “shared care planning” tool that aging network providers are piloting in conjunction with health care providers).

Year 1 Progress:

 - DAIL has encouraged OneCare, hospitals and AAAs to strengthen communication and collaboration around care coordination. The use of the care coordination tool “Care Navigator” has supported this effort. In some regions, specific collaboratives are actively building business acumen, i.e. in the Northeast Kingdom with the NEK Prosper initiative.

Objective 2.4: Family Caregiver Support: Ensure family caregivers of older adults are well supported through access to assessment, education, training and respite.

Strategies:

- Develop and promote a family caregiver assessment tool for use by AAAs and other providers to measure family caregiver needs and refer them to appropriate supports. Explore its use in Choices for Care.
Year 1 Progress:
 - In 2019, one AAA is piloting the use of the evidence based “TCARE” caregiver assessment tool and algorithm. All other AAAs are using the TCARE questions without the software algorithm in a paper-based form. DAIL will look at results in Spring 2020.
- Increase access to evidence-based family caregiver education and training.
Year 1 Progress:
 - DAIL is working with AAAs to try different models to increase access to evidence-based programs such as Powerful Tools for Caregivers, i.e. having classes at SASH sites and Adult Days for easier access and inclusion of respite for care recipients, supporting caregivers with transportation, breaking longer series of classes into shorter options, etc.
- Increase usage of Adult Day for respite.
Year 1 Progress:
 - AAA and Adult Day relationships vary across the state. Many family caregivers state that they prefer home-based respite. DAIL is exploring with AAAs how to identify barriers to using Adult Day as respite more frequently.
- Build the foundation of a dementia capable workforce culture by training staff and volunteers to have a minimum level of understanding of Alzheimer’s and dementia and minimum level of confidence in supporting family caregivers of older Vermonters with Alzheimer’s or dementia.
Year 1 Progress:
 - AAAs have built dementia awareness training into their all-staff training and new staff orientations. Some offer refresher trainings periodically or do more in-depth training with some types of staff.
- Additional strategies DAIL would like to move forward:
 - The Governor’s Commission Alzheimer’s Disease and Related Disorders, which DAIL staffs, has made “Dementia-Friendly Communities” a key initiative for 2019-2020, and has been working on data collection, needs assessment, and action planning. Two communities have expressed interest in piloting the model: Newport and St. Albans. A presentation was given at the V4A conference to raise awareness of this work and engage others.
 - DAIL is working with VDH, OneCare, the UVM Memory Center, and the Alzheimer’s Association to explore the design of a “Hub and Spoke” model for dementia diagnosis and care across Vermont with the goal of increasing early detection and diagnosis and strengthening referrals to dementia care and family caregiver support. This group has been meeting regularly throughout 2019 to build a model for provider education at the regional/local level.

GOAL 3: BOLSTER THE SYSTEM OF PROTECTION AND JUSTICE FOR OLDER VERMONTERS

Objective 3.1: Improve prevention efforts to protect vulnerable older adults against abuse, neglect and exploitation while maximizing their autonomy, with a focus on financial exploitation.

Strategies:

- Promote AARP's '[BankSafe](#)' financial exploitation prevention training with Vermont's financial institutions to encourage the training of all front-line staff.
Year 1 Progress:
 - While DAIL's involvement with BankSafe ended in 2019 as the AARP grant ended, relationships with financial institutions remain strong, as financial exploitation reports are made to APS and institutions respond quickly to investigations.
- Expand public messaging around financial exploitation prevention by collaborating with Attorney General's office, the Community of Vermont Elders' Senior Medicare Patrol, and ORCA media to develop and distribute "[Stay Savvy Vermont](#)" PSA videos.
Year 1 Progress:
 - Six "Stay Savvy Vermont" videos created to date, displayed on YouTube, with 1,048 views to date.
- Continue work towards developing and expanding alternatives to guardianship, i.e. supported decision making, and promote successful models of prevention, such as increased usage of advance directives/early identification of health care agents/power of attorney and representative payee programs for financial management/security.
Year 1 Progress:
 - DAIL's Office of Public Guardian (OPG) has helped provide trainings on advance directives and powers of attorney. Vermont Legal Aid has also done a number of these types of trainings.
 - Note that supported decision making requires both support people for the team and decision-making capacity; many of the older Vermonters served by OPG do not have this option. In these cases, guardianship is a form of protection in and of itself.
- Learn from the outcomes of Senior Solutions' Department of Justice Elder Abuse grant, designed to address elder abuse through a holistic, multidisciplinary approach in Windsor County, identify best practices to be replicated statewide, and support statewide elder abuse training.
Year 1 Progress:
 - DAIL Adult Protective Services has been participating in Senior Solutions' pilot in Windsor County and training with law enforcement. It is going well. Working to identify what aspects of the model can be replicated.
- Additional strategies DAIL is working on:
 - DAIL has been working with the UVM College of Medicine Clinical SIM Lab on training to help healthcare professionals (doctors, nurses, emergency responders) identify abuse, neglect and exploitation.
 - Engaging with the Attorney General's Office around their Elder Justice Initiatives.

- DAIL APS received a Restorative Justice Grant from ACL to give victims/survivors of abuse more voice in the decisions made following a report and investigation and to work with perpetrators to make reparations, and to work on safety mitigation with families. DAIL is planning to hire staff and begin this work by early 2020.

Objective 3.2: Increase awareness of Vermont’s programs that protect vulnerable older adults, including Adult Protective Services, Office of Public Guardian, the Long-Term Care Ombudsman Program, and Legal Services.

Strategies:

- Following the legal service statewide capacity assessment to identify gaps and unmet needs conducted as part of DAIL’s Phase II Legal Services Grant, use survey results to address any key awareness gaps.
Year 1 Progress:
 - This grant is closing; DAIL is working with Vermont Legal Aid to analyze lessons learned and next steps.
- Leverage resources through existing initiatives and partnerships (such as “BankSafe” and “Stay Savvy Vermont”) to further expand public awareness efforts around financial exploitation and available resources such as Adult Protective Services, Office of Public Guardian, the Long-Term Care Ombudsman Program, and Legal Services.
Year 1 Progress:
 - DAIL is considering the addition of more Elder Justice information on the website to promote needed resources more comprehensively.
- Expand World Elder Abuse Awareness Day (WEAAD, 6/15) activities with at least one activity/initiative per AAA region.
Year 1 Progress:
 - AAAs did not conduct specific WEAAD activities in 2019; DAIL will work with AAAs on activities for 2020 given the renewed focus on OAA Title VII (elder justice activities) in the new OAA Policy Manual.
- Explore the development of regional trainings to provide education and training to a diverse network of stakeholders about elder abuse, neglect, self-neglect and exploitation and the available resources for prevention and support for crime victims, including: Ombudsman services, legal services, APS, AAAs, guardianship and alternatives to guardianship.
Year 1 Progress:
 - Training has taken place as part of Senior Solutions’ grant efforts.
 - OPG has done many trainings, including: Advance directive and health care agent training for Central Vermont Hospital care managers, Vermont Hospital Emergency Department Directors, and for new probate court judges; Public guardianship and guardianship alternatives discussion at Springfield Hospital; Financial exploitation collaborative training with Attorney General’s office and Vermont Legal Aid for the AAA and VNAs; End of life care planning training for the designated agencies, northern and southern regions.

- The Financial Abuse Specialists Team (FAST) is active in VT, inclusive of DAIL and many community partners and state agencies and held a Tri-State Summit in October 2019 focused on awareness of financial exploitation and partners' roles in addressing it.

Conclusion:

This is one year of progress in a four-year State Plan on Aging. While DAIL is proud of the work that we and our many partners across government and community have accomplished, we know we have much more to do as we strive to achieve the goals and objectives within the State Plan on Aging. With one in three Vermonters expected to be over the age of 60 by 2030, now is the time for us to be doing this work to help meet our mission to make Vermont the best place to grow old or live with a disability, with dignity, respect and independence.

This summary was developed by Angela Smith-Dieng, Director, State Unit on Aging, Adult Services Division of the Department of Disabilities, Aging and Independent Living, in collaboration with colleagues at the Department.

Last updated 12/10/2019.

Please direct any questions or comments to Angela at angela.smith-dieng@vermont.gov or 802-241-0309.