Aging Services

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Aging Services

Vision

In 2015, persons aged 60 years and older in Multnomah County will number 148,372.

- This figure will represent 22 percent of the total population.
- Most of these seniors will be living independently and leading active lives.
- Twelve percent of the older population will be paying for Long Term Care or will receive it from friends or family to assist with activities of daily living. They may need some minimal help in identifying needs and/or resources.
- Twenty percent, who are very old and very frail, will have difficulties with activities of daily living, and will not have the family or resources needed to maintain independent living; they will receive Long Term Care services from the aging services system.

Multnomah County Aging Services Department (ASD) will continue to be the primary point of contact in the County for any senior in need of assistance. Through ASD, seniors will have easy access to a wide range of social and health services, housing alternatives and support systems needed to continue to live safely and with dignity in the least restrictive living situation.

ASD will continue to promote and develop new services and housing options for the elderly. ASD will manage local, State and Federal public funds and programs to enhance and subsidize individual and community efforts to keep elderly persons at home and as independent as possible.

Partnerships between ASD and other public and private entities serving the elderly will have built a network that will allow or assist older persons to choose services, providers or payment methods that best fit their individual needs. The service system will be diverse enough to accommodate the needs of elderly persons of color. ASD, elderly consumers, senior advocates and providers will work together to design programs, assess quality and consumer satisfaction and implement improvements.

ASD will continue its leadership role of planning with the community, providing up-to-date information and referrals, forming partnerships, regulating to ensure quality, and providing services such as case management, protective services and guardianship that emphasize public accountability.

Aging Services

Strategies

To reach this status over time, Aging Services is taking these steps:

- Continuing the "Beyond Bricks and Mortar" effort funded with a grant from the Administration on Aging. This effort will bring services to seniors living in public housing facilities.
- Continuing to improve the quality and accessibility of services in mid-county and east county to reach the increased number of elderly clients there. Completing plans for a mid-county site and a possible satellite office in or near Gresham.
- Expanding collaborative efforts with providers and jurisdictions, not only within Multnomah County but also with the surrounding counties, to make better use of the service capacity in the region and to improve the quality and quantity of services being provided.

Partnerships

Aging Services plans and provides services with a wide variety of other agencies:

- Multnomah County Department of Community and Family Services
- Housing Authority of Portland
- Portland State University
- Portland / Multnomah Commission on Aging
- Clackamas County Senior Services
- Housing Authority of Clackamas County
- Senior and Disabled Services Division of the State of Oregon
- Non-profit agencies serving the elderly in Multnomah County

Aging Services

Budget Overview

	1993-94 Actual	1994-95 Current Estimate	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Staffing FTE	163.33	172.55	172.55	180.70	8.15
Departmental Costs	$14,201,551	$15,143,804	$15,344,074	$16,297,033	$952,959
Program Revenues	$11,942,097	$13,085,228	$12,996,898	$13,681,244	$684,346
General Fund Support	$2,259,454	$2,058,576	$2,347,176	$2,615,789	$268,613

Department Services

Aging Services offers the following services:

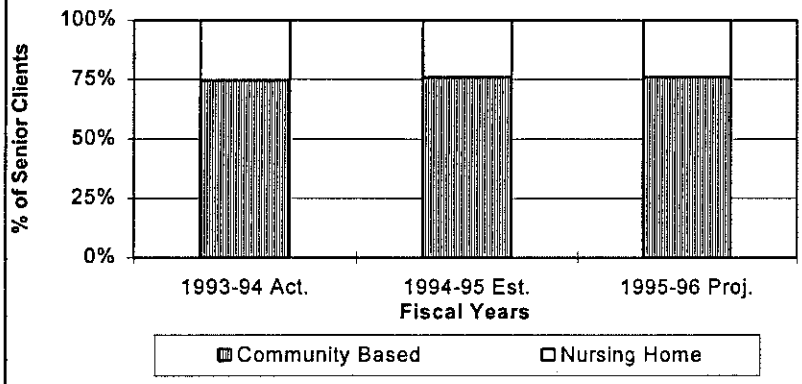
- Program development and advocacy
- Single entry/easy access to services through information and referral, gatekeepers and twenty-four hour access
- Case management/need assessment, eligibility, case plan development and service monitoring
- Adult care home regulation and licensing
- Public Guardianship/Conservatorship
- Protective services
- Minority services coordination
- Contract and service management
- District Centers
- Nutrition
- Transportation and special services
- In-home services
- Multi-disciplinary teams

Local policy discretion regarding services is limited by Federal and State Medicaid Policy and regulation, the Federal Older Americans Act, Oregon Project Independence statutes and agreements between Multnomah County and the City of Portland.

The Portland/Multnomah Commission on Aging provides advice and input on community needs, program and policy development and priorities for the provision of services. Citizen Advisory Committees monitor the funding as well as the provision of services.

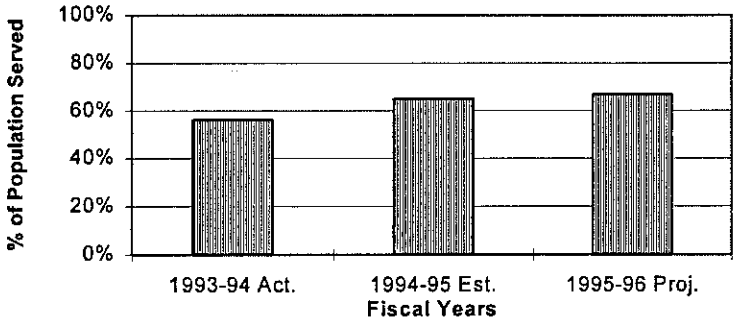
Performance Trends

Assisting Seniors to Live Independently



Three out of four Aging Services case management clients are living in supportive environments other than nursing homes. This community based care - help in one's own home, or residence in adult foster care or other assisted care home - is less expensive than nursing home care and is responsive to client choice.

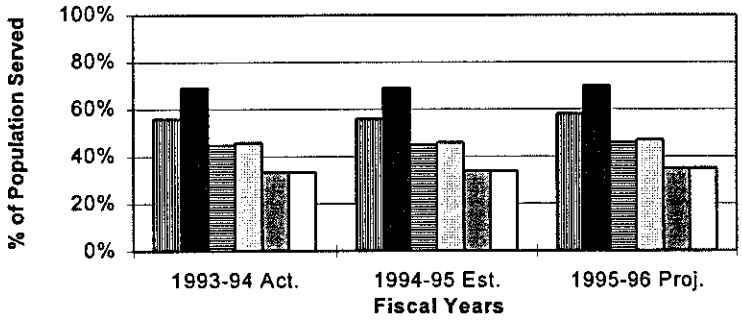
Over Age 75, Frail Elderly Served



Two-thirds of frail elderly people over 75 years of age are served by the Aging Services Division. This rate of service has been increasing in recent years.

Frail elderly people are most at risk for needing nursing home placement. The Gatekeeper program has been successful in identifying older frail individuals.

Frail Minority Elderly Persons Served

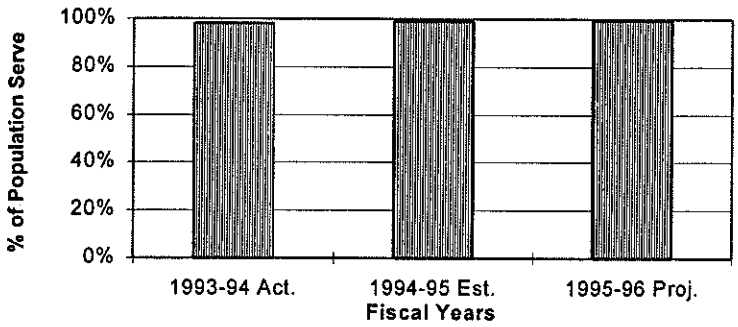


Overall, more than half of the frail minority elderly residing in Multnomah County are served by Aging Services Division programs.

ASD Ethnic Policy has focused outreach activities toward the unserved ethnic elderly.

Aging Services

Low Income Frail Elderly Served

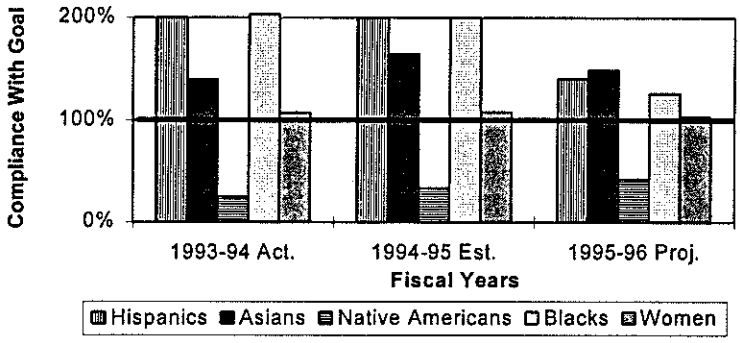


National studies report 32% of persons over 60 require assistance with one activity of daily living.

The Aging Services Division served 99.5% of the low income elderly in Multnomah County who are estimated to have this level of need.

Workforce Diversity

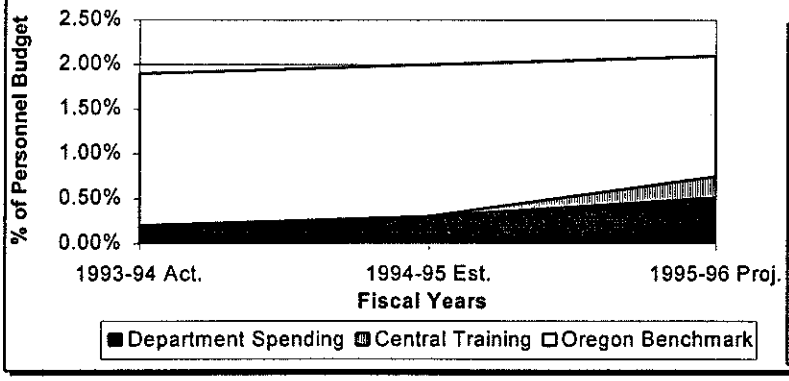
Success Towards Goals (Across all job classifications)



Commitment to Workforce Diversity has led to good results in meeting established goals. Actual hires meet or exceed Affirmative Action goals for Hispanics, Asians, Blacks and Women. Strategic plans are in place to improve statistics for Native Americans.

Levels of Education/Training Provided

Compliance with 1994 Oregon Benchmark



Underinvestment in workforce training is a continuing problem for Multnomah County.

Productivity decreases when needed education and training are unavailable. The 1994 Oregon Benchmarks established an investment goal for the percent of personnel costs spent on training; the goal is 2.5% by the year 2000. The Oregon Benchmark changed in 1995 to the number of hours employees are trained.

Aging Services

Recent Accomplishments

- The grand opening of the Southeast Multicultural Center was held November 1, 1994. ASD's Southeast Branch, Portland Impact's senior program, Loaves & Fishes and AARP are among the collocated agencies.

- A well-attended Intergenerational Forum generated numerous ideas for projects. Four projects which strengthen intergenerational relationships were chosen to receive County-funded grants.

- Planning continues for a Mid-County Senior Center and possible collocation with the Midland Library site and/or a Mid-County Community Center.

- The audit of the Adult Care Home Program was completed. Many of the audit recommendations were implemented early in the fiscal year.

- ASD received a grant from the State of Oregon for alcohol and drug services to elderly clients. The grant, entitled "Never Too Late", provided intensive services to those identified as at risk for hospitalization or use of nursing home services.

- The implementation of Phase Two of the Oregon Health Plan involved ASD's hiring of temporary Choice Counselors to assist 7,000-8,000 eligible Multnomah County seniors in enrolling in the Oregon Health Plan.

- An evaluation of the multi-ethnic programs was completed in the fall of 1994. The evaluation enabled ASD to clarify its policies regarding the development of multi-ethnic programs.

Aging Services

Budget Highlights

- The Adult Care Home program includes $215,915 in new funding to improve quality of care in adult foster care homes in response to the Auditor's report. The funding supports 2.5 FTE's to conduct follow-up visits to homes where problems are identified, and .85 FTE to develop training programs for adult care home operators, managers and caregivers.

- The Public Guardian/Conservator Program added 1.5 FTE's to increase the Program's capacity from 147 to 190 clients. Additionally, 0.5 FTE was added to Management & Administrative Services to perform financial services for the additional clients. This represents a $96,765 increase, of which $51,768 is supported by County General Fund.

- Adult Protective Services in the Long Term Care Program increased by $99,018. This funded an addition of 1.5 FTE's to bring the County into compliance with State standards for completing investigations and reports on allegations of elder abuse.

- Contract service levels for FY 1995-96 are expected to decrease slightly. Contractors will receive a cost-of-living adjustment of 2.0% on current fees but will not receive any additional funding, resulting in a slight reduction in service levels.

- The delivery of services to Mid- and Eastern Multnomah County continue to be a focus of Aging Services. ASD has outstationed staff from the East Branch office and will continue development of an office in or near Gresham to better serve East county clients.

- The Oregon Legislature held Oregon Project Independence (OPI) funds constant statewide, despite an increase in the elderly population. Multnomah County's OPI funding declined, due to a smaller percentage increase in the 60+ population than other parts of the state. Medicaid funds were increased because of caseload growth; however, some caseload standards were also increased.

- Projects for the development and coordination of activities for residents in the adult care homes in Multnomah County and intergenerational projects will continue.

- During the second year of an Administration on Aging "Beyond Bricks & Mortar" grant, Aging Services will continue collaborative efforts to plan and deliver services with Multnomah County Department of Community and Family Services, the Housing Authority of Portland, Clackamas County, Portland State University and other agencies.

RESULTS Efforts

Aging Services Department formed a Department-wide RESULTS Steering Committee during 1994-95. The Committee identified the need to train Aging Services staff in the tools and concepts of Continuous Quality Improvement (CQI) and Total Quality Management (TQM). The Committee has held one all-day training for committee members and guests. They are also circulating a recommended reading list and other literature throughout Aging Services.

ASD's East Branch engaged the services of a facilitator specializing in Total Quality Improvement, who is involved in training to develop task-specific work teams responsible for improving services and processes. Another group, the access workgroup, compiled private-pay referral policies and protocols as a CQI project. The Adult Care Home Program has empowered licensing staff to issue licenses to providers without management sign-off, which has reduced processing time from 120 days to 60 days. The Long Term Care Program redesigned the intake and follow-up for new Medicaid applicants, reducing the timeframe for establishing eligibility from 60 days to 45 days.

For 1995-96, the ASD RESULTS Steering Committee will continue with education initiatives for all of Aging Services Department. The Committee is also a problem-solving and resource group for work groups in the rest of the Department.

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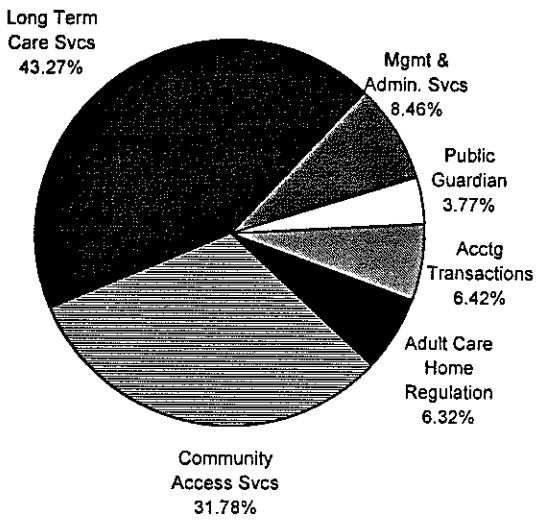
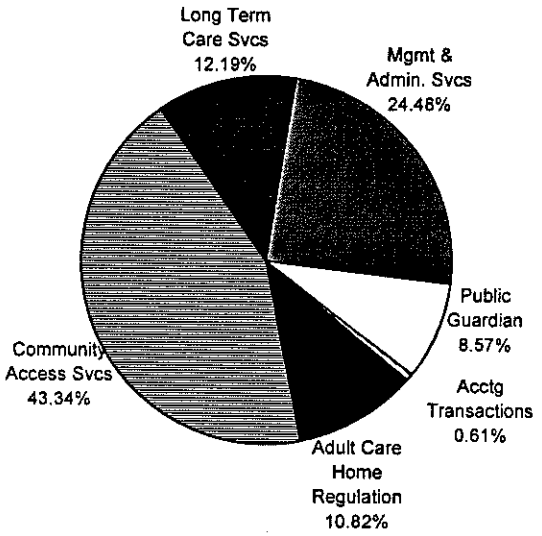
TOTAL EXPENDITURES BY DIVISION
1995-96 ADOPTED BUDGET

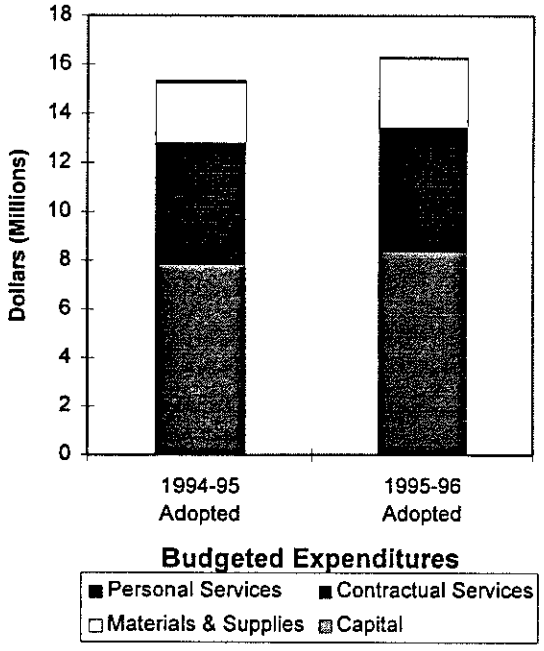
All Funds
$16,297,033

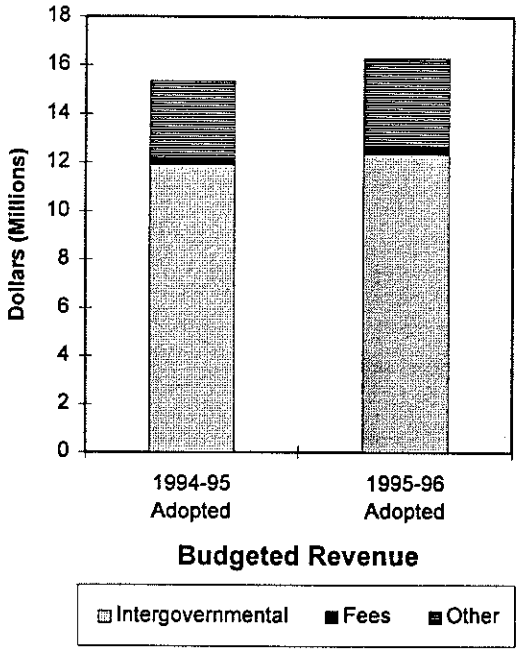


General Fund Only, Including Cash Transfers
$2,615,789



EXPENDITURE AND REVENUE COMPARISON
1994-95 Adopted Budget and 1995-96 Adopted Budget
All Funds, Including Capital Projects





Aging Services

Budget Trends

	1993-94 Actual	1994-95 Current Estimate	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Staffing FTE	163.33	172.55	172.55	180.70	8.15
Personal Services	$7,417,468	$7,948,322	$7,829,204	$8,355,285	$526,081
Contractual Services	4,463,550	4,349,796	4,976,750	5,085,729	108,979
Materials & Supplies	2,291,959	2,451,589	2,445,120	2,789,919	344,799
Capital Outlay	28,574	394,097	93,000	66,100	(26,900)
Total Costs	**$14,201,551**	**$15,143,804**	**$15,344,074**	**$16,297,033**	**$952,959**
Program Revenues	$11,942,097	$13,085,228	$12,996,898	$13,681,244	$684,346
General Fund Support	$2,259,454	$2,058,576	$2,347,176	$2,615,789	$268,613

Costs by Division

	1993-94 Actual	1994-95 Current Estimate	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Mgmt & Admin Services	$1,207,275	$773,878	$1,218,088	$1,377,919	$159,831
Community Access Svcs	4,236,550	4,063,929	5,153,143	5,179,432	26,289
Long Term Care Service	6,972,246	6,604,208	6,888,716	7,051,049	162,333
Public Guardian/Conserv	453,082	325,076	509,918	613,762	103,844
Adult Care Home Reg.	662,759	586,661	795,644	1,029,373	233,729
Accounting Transactions	669,639	731,476	778,565	1,045,498	266,933
Total Costs	**$14,201,551**	**$13,085,228**	**$15,344,074**	**$16,297,033**	**$952,959**

Staffing by Division

	1993-94 Actual	1994-95 Current Estimate	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Mgmt & Admin Services	13.59	15.50	15.50	16.30	0.80
Community Access Svcs	9.49	15.00	14.50	15.00	0.50
Long Term Care Service	120.50	123.95	124.25	125.75	1.50
Public Guardian/Conserv	6.75	6.80	6.80	8.30	1.50
Adult Care Home Reg.	13.00	11.30	11.50	15.35	3.85
Accounting Transactions	0.00	0.00	0.00	0.00	0.00
Total Staffing FTE's	**163.33**	**172.55**	**172.55**	**180.70**	**8.15**

Aging Services

Issues and Opportunities

1. Adult Care Home Regulation

Multnomah County is responsible for assuring the quality of adult care homes through its monitoring and licensing functions. A program review by the Multnomah County Auditor identified several aspects of the program needing improvement, particularly the frequency of inspections and the ability to respond quickly when problems are identified. In response, the Program has increased the number of inspections it conducts, resulting in the identification of more problems requiring follow-up visits. The Program is also increasing the training requirement and has upgraded the examination that operators must pass for licensing.

Major Alternatives:

- Add staff to conduct follow-up visits in homes where problems are identified. This would free other staff to conduct more frequent inspections, and would provide early intervention in problem homes.

- Enhance training for adult care home operators and managers to improve their skills in critical areas by adding a staff member to develop a training curriculum and advise and monitor adult care home workers in their completion of courses. This approach emphasizes the prevention of problems, rather than sanctioning.

- Continue to operate with current staffing levels, possibly dedicating a staff member to follow-up visits. This would involve some tradeoff between the frequency of visits and the response time for problem homes.

Board Action:

Improved prevention and monitoring efforts are needed in order to implement the Auditor's recommendations. Fund 2.5 FTE for follow-up visits and .85 FTE for training development. This represents a General Fund cost of $94,483, which will generate additional Title XIX reimbursement for the balance of the cost.

2. Public Guardian Program

Caseloads at the Public Guardian's Office have grown 42% in the past four years, exceeding the program's capacity. The program maintains a waiting list of 15 clients and has had to turn many others away. The pending closure of Dammasch Hospital will increase the need for Public Guardian services. There are no alternative sources of care

for Public Guardian clients. The program has strict eligibility criteria and serves only individuals with no alternate caregivers or financial resources.

Major Alternatives:

- Add staff to expand the program's capacity from 147 to 190 clients. This would enable the program to serve the individuals on the waiting list and the others who are turned away.

- Maintain the program at its current capacity. Staff will continue to triage potential clients, taking those most at risk when an opening in the program occurs. Others will be placed on the waiting list.

Board Action:

Fund the addition of 2.0 FTE's to expand the program capacity to 190 clients. Provide $51,768 in General Fund, which will be leveraged with Title XIX reimbursements to cover the full cost of the addition.

3. Adult Protective Services

Adult Protective Services staff investigate all complaints of abuse or neglect of older people. State standards mandate that reports must be completed for all investigations of abuse within 60 days of the completion of the investigation. The number of investigations has increased by 31% over the last two years, and staff are no longer able to perform investigations within the mandated period. This raises the likelihood of repeated abuse.

Major Alternatives:

- Increase the number of program staff to expand the program's ability to perform investigations and reports in a timely manner.

- Continue the current practice of investigating the complaints where clients are at immediate risk, with a backlog of lower risk clients and investigations.

Board Action:

Prevention of abuse against the elderly is one of Multnomah County's Urgent Benchmarks. Fund the addition of 1.5 FTE to improve investigation capacity. This represents a General Fund cost of $30,878, which will be augmented with Title XIX reimbursements.

Description

The mission of Management and Administrative Services is to maintain and provide fiscal and management information and contract administration to enable Aging Services to plan and deliver social and health services. To accomplish this mission, Management and Administrative Services assures financial accountability in a multiple fund account environment, administers and monitors service contracts, facilitates personnel and payroll activities and maintains several local area computer networks.

Action Plan

- Determine feasibility of transferring the State Disability Services Offices to Multnomah County Aging Services Department by January 1996 to increase service integration and efficiency. The study will also include the County's Developmental Disability program.
- Implement a Department-wide computer network with computer access for every direct service staff by December 1995 to increase employee effectiveness and ease the effect of increased caseloads.

Significant Changes - Revenues		Amount
Reduced Medicaid funding		($39,876)
Increased IIIB revenue		$6,000

Significant Changes - Expenditures	FTE's	Amount
Upgraded .50 FTE OA2 position to Administrative Secretary; added .30 FTE	0.30	$18,725
Increased Medicaid match dollars to offset anticipated state Medicaid lack of COLA increases, match funds for Public Guardian expansion		$68,336
Increased Facilities Management charges for the Mead Building		$9,853
Added .50 Fiscal Asst to provide fiscal assistance to Public Guardian Prog.	0.50	$16,946
Mail/Distribution and Postage - increased usage, and increased rates		$4,371
Increased Equipment for upgrading computer equipment		$3,000
Increased Educ. and Training for additional conferences, RESULTS training		$3,643

Budget Trends

	1993-94 Actual	1994-95 Current Estimate	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Staffing FTE	13.59	15.50	15.50	16.30	0.80
Personal Services	$779,901	$753,195	$763,535	$823,677	$60,142
Contractual Services	197,445	197,185	220,124	289,193	69,069
Materials & Supplies	227,029	218,167	221,229	248,849	27,620
Capital Outlay	2,900	13,058	13,200	16,200	3,000
Total Costs	**$1,207,275**	**$1,181,605**	**$1,218,088**	**$1,377,919**	**$159,831**
Program Revenues	$787,532	$773,878	$773,878	$737,536	($36,342)
General Fund Support	$419,743	$407,727	$444,210	$640,383	$196,173

Costs by Program

	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Mgmt & Admin Services	$1,207,275	$1,218,088	$1,377,919	$159,831

Staffing by Program

	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Mgmt & Admin Services	13.59	15.50	16.30	0.80

Description

The mission of Community Access Services is to provide, through partnership with community agencies, an array of community-based supportive services which enable older persons to maintain the most independent lifestyle possible. To achieve this mission, Community Access Services manages a system of contracted services including case management, nutrition services, transportation and in-home services, and directly provides community access services of information and referral, Gatekeeper and 24-hour access.

Local discretion for this program is limited by the Older Americans Act (Federal), Oregon Project Independence (State) and the City/County Intergovernmental Agreement.

Action Plan

- Complete ASD's plans to collocate ASD staff and a Senior Meal Site in the Brentwood-Darlington Community Center, to improve service delivery to residents of the Brentwood-Darlington neighborhood. The move will be completed by April, 1996.
- Complete development of and move into a new East County Branch Office by June, 1996 to improve service delivery to East County Residents.
- Complete development of the Mid-County Facility Plan for the new Mid-County Senior Center by January, 1996 to improve service delivery to Mid-County residents.

Significant Changes - Revenues	Amount
Reduced Oregon Project Independence funding	($11,410)
OPI funding for Client-Employed Providers no longer passed through the County; handled directly by State	($90,000)
Administration on Aging Grant	$55,441
Elimination of County one-time-only funds	($36,458)
USDA funding reduced due to reduced number of meals reimbursed	($23,070)
Increased IIIB revenues	$25,500

Significant Changes - Expenditures	FTE's	Amount
Move .50 FTE PDS position from Adult Care Home Program	0.50	$23,312
Additional Pass through from Admin. on Aging Grant		$55,441
Reduced Pass through		($151,028)
Increased contracted services for OTO program planning for Brentwood-Darlington Community Family Resource Center, funded with salary savings		$29,000
Increased Case Management Services		$25,000

Budget Trends

	1993-94 Actual	1994-95 Current Estimate	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Staffing FTE	9.49	15.00	14.50	15.00	0.50
Personal Services	$444,186	$719,033	$688,791	$744,578	$55,787
Contractual Services	3,561,232	3,511,817	4,051,407	4,002,406	(49,001)
Materials & Supplies	231,132	395,328	412,945	432,448	19,503
Capital Outlay	0	1,588	0	0	0
Total Costs	**$4,236,550**	**$4,627,766**	**$5,153,143**	**$5,179,432**	**$26,289**
Program Revenues	$3,391,731	$4,063,929	$4,020,859	$4,045,852	$24,993
General Fund Support	$844,819	$563,837	$1,132,284	$1,133,580	$1,296

Costs by Program

	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Prog. Mgmt & Advocacy	*	$912,942	$1,011,061	$98,119
District Centers	*	1,405,856	1,433,321	27,465
Nutrition Services	*	1,192,635	1,133,107	(59,528)
In-Home Services	*	759,115	642,440	(116,675)
Ethnic Services	*	263,573	318,799	55,226
Trans. & Special. Support	*	276,090	276,090	0
Access Services	*	225,110	246,438	21,328
Multi-Disciplinary Team	*	117,822	118,176	354
Total Costs	**$4,236,550**	**$5,153,143**	**$5,179,432**	**$26,289**

Staffing by Program

	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Prog. Mgmt & Advocacy	*	7.50	8.00	0.50
District Centers	*	0.00	0.00	0.00
Nutrition Services	*	0.00	0.00	0.00
In-Home Services	*	0.00	0.00	0.00
Ethnic Services	*	1.00	1.00	0.00
Trans. & Special. Support	*	0.00	0.00	0.00
Access Services	*	4.00	4.00	0.00
Multi-Disciplinary Team	*	2.00	2.00	0.00
Total Staffing FTE's	**9.49**	**14.50**	**15.00**	**0.50**

* 1993-94 Actuals are not available at the program level.

Program Mgmt & Advocacy

Description

The purpose of Program Management and Advocacy is to provide direction to and coordination of the Community Access services to insure quality services, program development and advocacy on issues affecting community elders. Program Management and Advocacy provides technical assistance, unmet needs identification and issue advocacy.

Community Access services are delivered through twenty-five community organizations to a service population with changing service needs.

Budget Overview	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Staffing FTE	NA	7.50	8.00	0.50
Program Costs	NA	$912,942	$1,011,061	$98,119
Program Revenues	NA	$449,484	$499,423	$49,939
General Fund Support	NA	$463,458	$511,638	$48,180

Key Results	1993-94 Actual	1994-95 Estimated	1994-95 Adopted	1995-96 Projected
Percentage of contracts successfully completed	96%	97%	97%	97%

Significant Changes - Revenues	Amount
Reduced Oregon Project Independence funding	($11,410)
Administration on Aging Grant	$55,441
Transferred Medicaid revenue from Adult Care Home Program	$18,184
County GF for Facilities Management charges moved to Ethnic Services	($42,834)

Significant Changes - Expenditures	FTE's	Amount
Additional Pass through from Admin. on Aging Grant		$55,441
Additional training, especially RESULTS		$2,825
Facilities Management charges moved to Ethnic Services		($42,834)
Increased supplement used to purchase Medicaid revenue		$18,394
Transferred 0.5 PDS from Adult Care Home Program	0.50	$23,312
Reduced pass-through		($11,410)
Increased contracted services for OTO program planning for Brentwood-Darlington Community Family Resource Center, funded with salary savings		$29,000

District Centers-Case Mgmt

Description

The purpose of District Centers - Case Management is to provide needs assessment and access to services for older persons (age 60 and over). This is accomplished through contractual partnership with neighborhood-based community agencies which provide services, additional funds and service development unique to their neighborhood. The services provided by district centers are case management (comprehensive needs assessment, service referral and service monitoring), information and referral (brief assessment and linkage to needed services), and focal point management (resource development, existing service coordination).

102,248 older persons and many more family members reside in Multnomah County. Many are not familiar with available service options. There is the potential for inappropriate or restrictive placement, economic or emotional abuse, or unnecessary physical, emotional and mental deterioration. This problem is increasing because of the growing older population and because the most vulnerable segment (those 85 or older) is growing dramatically.

The Older Americans Act mandates the delivery of services through neighborhood-based community organizations. Oregon Project Independence defines service eligibility. The City of Portland/Multnomah County intergovernmental agreement earmarks City funds for district centers.

Budget Overview	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Staffing FTE	NA	0.00	0.00	0.00
Program Costs	NA	$1,405,856	$1,433,321	$27,465
Program Revenues	NA	$987,105	$1,030,610	$43,505
General Fund Support	NA	$418,751	$402,711	($16,040)

Key Results	1993-94 Actual	1994-95 Estimated	1994-95 Adopted	1995-96 Projected
Percent of frail elderly who are served	6.2%	6.5%	7.0%	7.0%
Percent of frail elderly age 75 and older who are served	12.9%	13.0%	13.4%	13.5%
Percent of clients served who are new	6.6%	6.2%	6.6%	6.1%
Percent of low income frail elderly who are served	7.3%	8.0%	8.0%	8.5%
Percent of minority frail elderly who are served	8.2%	9.0%	9.0%	9.5%

Significant Changes - Revenues	Amount
Increased IIIB revenues	$25,000
Transferred City of Portland revenues from Ethnic Services	$15,865
Transferred County funds to Ethnic Services	($15,865)

Significant Changes - Expenditures	FTE's	Amount
Increased Case Management Services	0.00	$25,000

Nutrition Services

Description

The purpose of Nutrition Services is to assist older persons to continue to live as independently as possible through the provision of home-delivered and congregate meals. The Nutrition service is responsible for delivering meals both to older persons living at home and to congregate sites. Each meal served contains at least one-third of the current Recommended Dietary Allowances (RDA).

For elderly persons poor nutritional habits can contribute to physical and mental decline and further debilitation. The program delivers 240,768 meals to 3,650 older persons at home and 118,123 meals to 3,800 persons at 20 congregate sites. For 55% of those served, this nutrition service is the only meal or one of two meals consumed each day. This problem is increasing due to the increasing number of older persons and the increasing number of persons over the age of 85 years of age.

Older Americans Act defines meal requirements and service delivery methods.

Budget Overview	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Staffing FTE	NA	0.00	0.00	0.00
Program Costs	NA	$1,192,635	$1,133,107	($59,528)
Program Revenues	NA	$1,156,177	$1,133,107	($23,070)
General Fund Support	NA	$36,458	$0	($36,458)

Key Results	1993-94 Actual	1994-95 Estimated	1994-95 Adopted	1995-96 Projected
Percentage of Multnomah County elderly served	7.2%	7.4%	7.0%	7.5%
Percent of nutrition participants responding favorably to a participant survey	NA	80%	NA	85%

Significant Changes - Revenues	Amount
Elimination of County one-time only funds	($36,458)
USDA reduced funding due to reduced number of meals reimbursed	($23,070)

Significant Changes - Expenditures	FTE's	Amount
Reduced pass through	0.00	($59,528)

In-home Services

Description

The purpose of In-home Services is to assist persons age 60 and older who require assistance with two or more activities of daily living to remain independent and live in their own homes. In-home services provide assistance with activities of daily living which clients are unable to perform, or request assistance in performing.

Based on national surveys, 32% of persons over age 65 require assistance with an activity of daily living (eating, bathing, grooming/dressing, toileting) or lack the stamina or physical ability to maintain their home. Personal health and safety as well as community health and safety is maintained through this service. Approximately 450 older persons are provided 2 hours of housekeeping services weekly; approximately 250 older persons receive 1-1/2 hours of personal care (bathing/grooming) each week. This problem is increasing due to the increased number of older persons living in the community and the increase of the most frail (over 85) population.

Oregon Project Independence and the Oregon Nurse Practices Act define service eligibility and service delivery requirements.

Budget Overview

	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Staffing FTE	NA	0.00	0.00	0.00
Program Costs	NA	$759,115	$642,440	($116,675)
Program Revenues	NA	$759,115	$642,440	($116,675)
General Fund Support	NA	$0	$0	$0

Key Results	1993-94 Actual	1994-95 Estimated	1994-95 Adopted	1995-96 Projected
Percentage of elderly served in their own home	41.5%	43.0%	35.5%	44.0%

Significant Changes - Revenues	Amount
Reduction in Oregon Project Independence allocation, Senior and Disabled Services actually handling payment of services	($90,000)
Reduction in Oregon Project Independence - Alzheimer's funds	($1,500)

Significant Changes - Expenditures	FTE's	Amount
Reduction in Pass-through	0.00	($91,500)

Ethnic Services

Description

The purpose of Ethnic Services is to increase ethnic minority participation as clients, volunteers and employees of the Aging Services Department. Aging Services intends to increase access to service, decrease barriers and develop programs meeting the needs of specific ethnic populations. This is accomplished through contracts for ethnic programs, development of specialized programs and multi-language materials, community outreach, translation, cultural and advocacy training and technical assistance to ethnic minority groups, organizations and the community in forming and organizing self-supported organizations.

National studies show that minority elders are at greater social and health risks. Over eight percent of the county's elderly population are minority. Risks for minority elderly are increasing with the growth of minority populations in Multnomah County.

Budget Overview	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Staffing FTE	NA	1.00	1.00	0.00
Program Costs	NA	$263,573	$318,799	$55,226
Program Revenues	NA	$220,739	$274,697	$53,958
General Fund Support	NA	$42,834	$44,102	$1,268

Key Results	1993-94 Actual	1994-95 Estimated	1994-95 Adopted	1995-96 Projected
Ethnic clients as a percentage of total clients served	16.6%	20.0%	17.0%	21.0%
Percentage of ethnic minority elders served	36.5%	37.0%	37.0%	38.0%

Significant Changes - Revenues	Amount
County General fund for Southeast Multicultural Center rent moved from Program Management	$42,834
Transferred City of Portland revenue to District Centers	($15,865)
Transferred County funds from District Centers	$15,865

Significant Changes - Expenditures	FTE's	Amount
Facilities Management Charges previously charged to Program Management	0.00	$42,834

Transport & Special Support

Description

The purpose of Transportation and Specialized Support Services is to maintain the independence of frail, low-income older persons in their own home by providing prescheduled door-to-door rides using lift-equipped vehicles or commercial taxis for medical appointments and shopping. Transportation services are provided to those who cannot use regular bus service due to physical, emotional or language barriers and have no other means of transportation.

One third of the Multnomah County older population (approximately 33,660) are considered mobility disadvantaged and therefore lack access to medical appointments or shopping. This problem is increasing due to the increasing older population, in particular the segment that is most frail or over 75 years of age.

Budget Overview

	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Staffing FTE	NA	0.00	0.00	0.00
Program Costs	NA	$276,090	$276,090	$0
Program Revenues	NA	$186,041	$186,041	$0
General Fund Support	NA	$90,049	$90,049	$0

Significant Changes - Revenues
No significant changes

Significant Changes - Expenditures
No significant changes

Access Services

Description

The purpose of Access Services is to provide convenient and reliable access to services and information about services available for older persons in Multnomah County. This service is responsible for responding to telephone and written inquiries for information, problem-solving and referral to services with documented follow-up. This is accomplished through information and referral, after-hour crisis intervention and through training of "gatekeepers," employees of community businesses who may encounter frail older persons through their work.

Over 100,000 elderly persons and their families reside in Multnomah County. The system of available services for older people can be difficult to understand, and even more difficult to access. The Gatekeeper and 24 Hour access programs link older persons who are at risk with the Aging Services system. This problem is increasing because of the growing population over the age of 75.

The Older Americans Act mandates information and referral and outreach programs.

Budget Overview	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Staffing FTE	NA	4.00	4.00	0.00
Program Costs	NA	$225,110	$246,438	$21,328
Program Revenues	NA	$144,376	$161,358	$16,982
General Fund Support	NA	$80,734	$85,080	$4,346

Key Results	1993-94 Actual	1994-95 Estimated	1994-95 Adopted	1995-96 Projected
Percent of access service contacts linked to services	69.2%	70.0%	68.0%	70.0%

Significant Changes - Revenues	Amount
Received SHIBA grant	$14,146

Significant Changes - Expenditures	FTE's	Amount
Increased temporary		$10,600

Multi-disciplinary Team

Description

The purpose of the Multi-disciplinary Team (MDT) is to provide appropriate intervention for at-risk seniors who have a combination of social, mental health, health and alcohol/drug problems. Teams consisting of a geriatric mental health specialist, a social worker and a community health nurse combine with Aging Services case managers through an agreement among Aging Services Department, Department of Community and Family Services, and the Health Department. Team members provide holistic assessments, case consultation, direct nursing and mental health treatment as appropriate. These clients are resistant to service, home maintenance or health care due to a combination of behavioral and health problems. These clients can represent a danger to themselves and the community.

Over 100,000 seniors reside in Multnomah County. Approximately 8% are considered frail and require assistance with daily living tasks. About 15% of older adults have a mental health or alcohol problem serious enough to require treatment. The team receives 750 referrals annually. This problem is increasing because of the growing number of persons over age 75 who are more frail.

Budget Overview	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Staffing FTE	NA	2.00	2.00	0.00
Program Costs	NA	$117,822	$118,176	$354
Program Revenues	NA	$117,822	$118,176	$354
General Fund Support	NA	$0	$0	$0

Key Results	1993-94 Actual	1994-95 Estimated	1994-95 Adopted	1995-96 Projected
Percentage of requests for assistance to which the Multi-Disciplinary Team (MDT) responds	NA	97%	99.1%	98%
Improvement in living situation two months after MDT intervention	NA	85%	86.3%	87%

Significant Changes - Revenues
No significant changes

Significant Changes - Expenditures
No significant changes

Description

The mission of Long Term Care Services is to provide services which are the least restrictive, least costly and in a safe environment of the client's choice to frail elders who are financially and service eligible. To achieve this mission, Long Term Care provides case management to community-based and nursing home clients. The major responsibilities of this program group are: determine service and financial eligibility, authorize a range of services from community-based to nursing home care, monitor ongoing needs and service delivery and screen nursing home placements to ensure appropriate service use.

A major focus of this work group is to investigate complaints involving the physical or emotional abuse, or financial exploitation of older adults.

Local discretion for this program group is limited by federal and state Medicaid regulation.

Action Plan

- Develop a system for tracking abuse of the elderly in conjunction with the Portland Police Bureau (January 1996), the Multnomah County Sheriff's office (January 1997) and the Gresham Police Department (January 1997).

Significant Changes - Revenues		Amount
Transferred Medicaid funds and position to Adult Care Home Program		($49,411)
Net Increase in Medicaid funding		$26,640

Significant Changes - Expenditures	FTE's	Amount
Added Adult Protective Services staff to manage increasing caseload	1.50	$68,355
Reduced Professional Svcs, budgeted in FY 1995 for possible branch move		($19,500)
Reduced Telephones, budgeted in FY 1995 for possible branch move		($22,000)
Case Mgr Sr. for Protective Services moved to Adult Care Home Program	(1.00)	($49,411)
Increased supplement used to purchase Medicaid revenue		$30,663

Budget Trends

	1993-94 Actual	1994-95 Current Estimate	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Staffing FTE	120.50	123.95	124.25	125.75	1.50
Personal Services	$5,439,660	$5,605,585	$5,536,041	$5,735,607	$199,566
Contractual Services	378,704	312,408	344,790	347,301	2,511
Materials & Supplies	1,128,208	982,595	933,885	936,141	2,256
Capital Outlay	25,674	365,375	74,000	32,000	(42,000)
Total Costs	**$6,972,246**	**$7,265,963**	**$6,888,716**	**$7,051,049**	**$162,333**
Program Revenues	$6,372,952	$6,604,208	$6,530,279	$6,732,189	$201,910
General Fund Support	$599,294	$661,755	$358,437	$318,860	($39,577)

Costs by Program

	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Program Mgmt & Advocacy	$1,046,436	$651,869	$618,151	($33,718)
Community-based Case Mgmt	4,890,379	5,099,903	5,283,627	183,724
Nursing Facility Case Mgmt	1,035,431	1,136,944	1,149,271	12,327
Total Costs	**$6,972,246**	**$6,888,716**	**$7,051,049**	**$162,333**

Staffing by Program

	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Program Mgmt & Advocacy	3.50	0.00	0.00	0.00
Community-based Case Mgmt	97.00	102.75	103.75	1.00
Nursing Facility Case Mgmt	20.00	21.50	22.00	0.50
Total Staffing FTE's	**120.50**	**124.25**	**125.75**	**1.50**

Program Mgmt & Advocacy

Description

The purpose of Program Management and Advocacy is to provide direction and coordination of the delivery of Long Term Care services by insuring quality services, program development, issue advocacy and compliance with regulation. This service optimizes the operation of the five branch offices through policy information dissemination, supervision, training, technical assistance and new program development.

Budget Overview	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Staffing FTE	3.50	0.00	0.00	0.00
Program Costs	$1,046,436	$651,869	$618,151	($33,718)
Program Revenues	NA	$293,432	$299,291	$5,859
General Fund Support	NA	$358,437	$318,860	($39,577)

Key Results	1993-94 Actual	1994-95 Estimated	1994-95 Adopted	1995-96 Projected
Percentage of intakes processed within 45 days.	NA	95%	NA	98%

Significant Changes - Revenues	Amount
Reduced Medicaid funding	($41,500)

Significant Changes - Expenditures	FTE's	Amount
Reduced Professional Services, budgeted in FY1995 for possible branch move	0.00	($19,500)
Reduced Telephones, budgeted in FY 1995 for possible branch move		($22,000)
Increased supplement used to purchase additional Medicaid revenues		$30,663

Community-based Case Management

Long Term Care Services

Aging Services

Description

The purpose of Community-Based Case Management is to maintain frail elders in the least restrictive community-based living environment of their choice. This service maintains a caseload of 2,500 financially eligible elders with services in their homes or in community-based care settings. Case managers located in four branches assess elderly individuals' particular needs and develop service plans for an array of community-based services.

This program addresses the needs of financially and service-eligible elders who, without services, would require more expensive, more restrictive nursing home care. This problem is increasing due to a growing older population. The population segment in greatest need of assistance, those 85 and older, increased 17% between 1980 and 1990 compared to the 3.8% growth of the general population. This population is expected to grow by 13% during the next decade.

Local discretion is limited by Federal and State Medicaid regulation which defines eligibility and range of services available. Budget allocations are based on state caseload standards.

Budget Overview	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Staffing FTE	97.00	102.75	103.75	1.00
Program Costs	$4,890,379	$5,099,903	$5,283,627	$183,724
Program Revenues	NA	$5,099,903	$5,283,627	$183,724
General Fund Support	NA	$0	$0	$0

Key Results	1993-94 Actual	1994-95 Estimated	1994-95 Adopted	1995-96 Projected
Percentage of ASD Medicaid clients in community-based care	62.8%	63.0%	63.0%	63.5%

Significant Changes - Revenues	Amount
Medicaid funding transferred to Adult Care Home Program.	($49,411)
Increased Medicaid revenue	$49,535

Significant Changes - Expenditures	FTE's	Amount
Case Manager Sr. position for Protective Services moved to the Adult Care Home Program.	(1.00)	($49,411)
Added 1 Case Manager Sr. for Adult Protective Services to manage caseloads	1.00	$49,535

Nursing Facility Case Mgmt

Description

The purpose of the Nursing Home Case Management service is to maintain frail elderly persons no longer capable of independent living in nursing homes with safe quality service. This service maintains a caseload of 1,500 nursing home residents and, as appropriate, seeks needed rehabilitation services or relocation of residents to less restrictive community-based care. The program assesses client need, determines service and financial eligibility and implements care plans based on service need and client choice. All services are funded directly by the State Medicaid Program.

This program addresses the need of financially eligible frail elders for safe quality nursing and custodial care. These elders are dependent in three to five activities of daily living. This problem is increasing since the most frail (over 85) population are increasing at a rate four times faster than the general population (17% vs. 3.8%). Population projections indicate the over 85 segment will grow 13% over the next decade.

Local discretion is limited by Federal and State Medicaid regulation which defines eligibility and range of services available. State allocations are based on State caseload standards.

Budget Overview	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Staffing FTE	20.00	21.50	22.00	0.50
Program Costs	$1,035,431	$1,136,944	$1,149,271	$12,327
Program Revenues	NA	$1,136,944	$1,149,271	$12,327
General Fund Support	NA	$0	$0	$0

Key Results	1993-94 Actual	1994-95 Estimated	1994-95 Adopted	1995-96 Projected
Percentage of Medicaid clients residing in nursing homes	37.2%	37.0%	37.0%	36.5%

Significant Changes - Revenues	Amount
Increased Medicaid revenues	$16,212

Significant Changes - Expenditures	FTE's	Amount
Added 0.5 OA2 to manage increased caseloads for Adult Protective Services	0.50	$16,212

Public Guardian

Description

The purpose of the Public Guardian/Conservator's Office is to act as court-appointed guardian and/or conservator for individuals who are mentally incapacitated, unable to care for themselves, at high risk of abuse, exploitation or deterioration of health and who have no one else available to serve as a guardian. The Public Guardian Service establishes care plans to stabilize the situation and maintains 145 wards at a significantly lower risk level and a higher quality of life than at service intake. Services include ongoing medical and placement decisions, twenty-four hour service, fiduciary responsibility for client assets, property management and sale, timely submission of court reports and information and consultation on guardianship, conservatorship and alternatives to these services for Multnomah County families and professionals.

This program addresses the need for the protection of Multnomah County persons who, due to mental and physical incapacity, can no longer care for themselves or make appropriate decisions regarding their own care, and are in situations of such high risk that no alternative to guardianship will serve to stabilize the situation. Need for this service is increasing due to significant increases in the "old old" senior population, decreases in services available to the seriously mentally ill, deinstitutionalization of the mentally retarded/developmentally disabled population, and increased recognition of and intervention with victims of abuse and neglect.

Oregon Revised Statutes for guardianship and conservatorship, and for Public Guardian Programs, prescribe the activities of the program.

Significant Changes - Revenues		Amount
Increased service reimbursement from Medicaid funding		$73,770

Significant Changes - Expenditures	FTE's	Amount
Increased personnel costs due to COLAs, change in insurance		$11,768
Increased Facilities Management charges		$5,564
Increased supplement used to purchase additional Medicaid revenues		$33,197
Increased Program capacity from 147 clients to 190 clients, adding 1 Deputy Public Guardian and .5 OA2	1.50	$71,625

Public Guardian

Budget Trends

	1993-94 Actual	1994-95 Current Estimate	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Staffing FTE	6.75	6.80	6.80	8.30	1.50
Personal Services	$315,140	$334,856	$332,121	$395,548	$63,427
Contractual Services	120,609	125,304	142,029	172,130	30,101
Materials & Supplies	17,333	31,999	35,768	46,084	10,316
Capital Outlay	0	0	0	0	0
Total Costs	**$453,082**	**$492,159**	**$509,918**	**$613,762**	**$103,844**
Program Revenues	$287,148	$325,076	$326,076	$389,699	$63,623
General Fund Support	$165,934	$167,083	$183,842	$224,063	$40,221

Key Results	1993-94 Actual	1994-95 Estimated	1994-95 Adopted	1995-96 Projected
Percent of requests for Public Guardian services that are accepted or diverted to other appropriate providers	NA	88%	NA	88%
Improvement in clients 180 days after admission	NA	90%	99%	90%

Costs by Program

	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Public Guardian/Conservator	$453,082	$509,918	$613,762	$103,844

Staffing by Program

	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Public Guardian/Conservator	6.75	6.80	8.30	1.50

Adult Care Home Regulation

Aging Services

Description

The purpose of the Adult Care Home Regulation program is to assure a safe living environment with quality care for residents of adult care homes. The program is responsible for screening and inspecting applicant facilities for licensure, inspecting and issuing annual licenses, responding to complaints, and providing training for adult care home operators. The program also produces a listing of licensed homes for the use of the public.

Three thousand elderly and disabled persons requiring assistance with daily activities reside in and receive service from adult foster homes and room and board homes. There has been a steady increase in new homes licensed and complaints requiring investigation.

Action Plan

- Develop computerized public access to Adult Care Home information by November, 1995 to provide improved customer service.
- Develop and implement a comprehensive training curriculum for Adult Care Home operators and caregivers that will cover: basic rules and regulations of operation, client care, record keeping, business procedures, ASD long term care system and other appropriate training topics by January, 1996.

Significant Changes - Revenues		Amount
Medicaid revenues transferred from Long Term Care Program		$49,411
Increased service reimbursement from Medicaid funding		$123,469
Transferred Medicaid revenues to Community Access Program		($18,184)

Significant Changes - Expenditures	FTE's	Amount
Case Manager Sr. transferred from East Branch	1.00	$49,411
Increased adult care home monitoring and follow-up, including 2.0 PDTs and .5 Community Health Nurse	2.50	$115,174
Increased adult care home training, including .85 PDS	0.85	$45,179
Increased supplement used to purchase additional Medicaid revenues		$47,379
Transferred .50 FTE PDS position to Community Access Program	(0.50)	($23,312)

Adult Care Home Regulation

Aging Services

Budget Trends

	1993-94 Actual	1994-95 Current Estimate	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Staffing FTE	13.00	11.30	11.50	15.35	3.85
Personal Services	$438,581	$535,653	$508,716	$655,875	$147,159
Contractual Services	190,142	191,776	206,066	258,890	52,824
Materials & Supplies	34,036	93,330	75,062	96,708	21,646
Capital Outlay	0	14,076	5,800	17,900	12,100
Total Costs	**$662,759**	**$834,835**	**$795,644**	**$1,029,373**	**$233,729**
Program Revenues	$473,407	$586,661	$579,661	$746,388	$166,727
General Fund Support	$189,352	$248,174	$215,983	$282,985	$67,002

Key Results	1993-94 Actual	1994-95 Estimated	1994-95 Adopted	1995-96 Projected
Resident satisfaction with adult care homes	NA	85%	NA	85%
Operator satisfaction with adult care home regulation	NA	85%	NA	85%
Percent of adult care homes licensed or in corrective action	NA	98.0%	98.0%	98.0%

Costs by Program

	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Adult Care Home Regulation	$662,759	$795,644	$1,029,373	$233,729

Staffing by Program

	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Adult Care Home Regulation	13.00	11.50	15.35	3.85

Accounting Transactions

Description

Title XIX General Fund Indirect Reimbursement

The General Fund makes payments to the State of Oregon which the State uses as part of the pool of local dollars required by the Federal government as match to Title XIX entitlement revenues. This accounting organization records transfer of Title XIX revenue to the General Fund by way of an internal reimbursement, supporting programs budgeted in the General Fund. The specific program expenditures funded by these reimbursements are shown elsewhere in the Aging Services budget. The change in amounts are dependent on the amount of contribution to the State in other Aging Services programs, the cost of living adjustments allowed by the State and Federal governments and allocation decisions made at the State level.

Budget Overview	1993-94 Actual	1994-95 Adopted Budget	1995-96 Adopted Budget	Difference
Staffing FTE	0.00	0.00	0.00	0.00
Program Costs	$669,639	$778,565	$1,045,498	$266,933
Program Revenues	$629,327	$766,145	$1,029,580	$263,435
General Fund Support	$40,312	$12,420	$15,918	$3,498

Significant Changes - Revenues	Amount
Increased Medicaid revenues purchased with County General Fund match	$264,503