

Ohio

Department of
Aging

**Engaging Aging Network Partners
in Emergency Preparedness**

Julie Trackler, Chief, Elder Connections Division

Erin Pettigrew, Acting Chief, State Long-Term Care Ombudsman

October 18, 2018

Overview

- Current observations: older Ohioans
- Ohio's Aging Network
- Ohio Dept. of Aging programs
 - Older Americans Act
 - Medicaid Home and Community-Based Services
 - State Long-Term Care Ombudsman
- Ohio's State Plan on Aging 2019-2022
 - Emergency Management Objective

Ohio's 60+ population



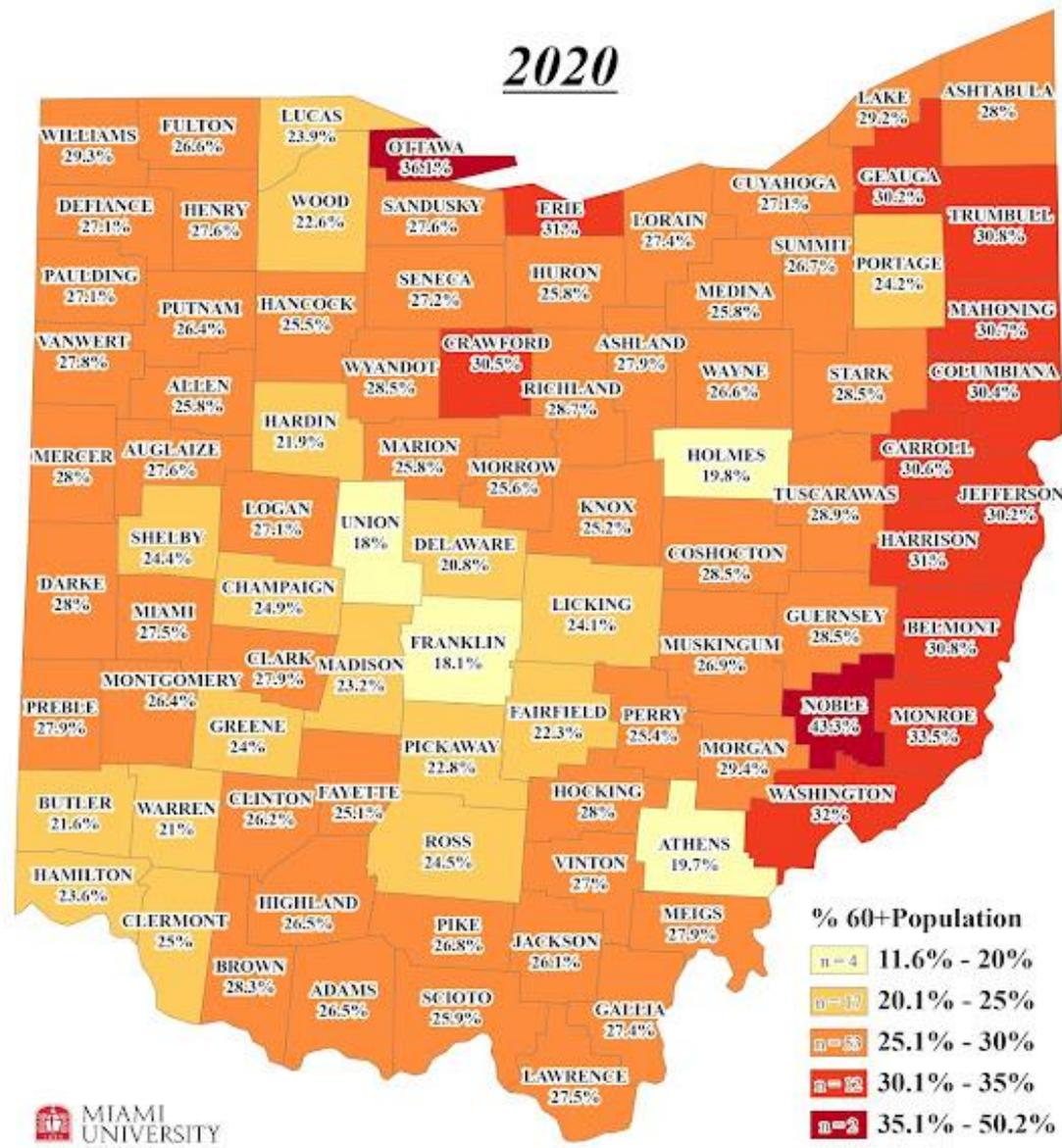
Demographics

- 22% of Ohioans are 60+ years (2.6 million)
 - Male 43.4%
 - Female 56.6%
- 60+ with mobility limitations: 18.8%
- 65+ population living with a disability: 34.6%
- 65+ population who lives alone: 479,849
- 65+ population living in poverty: avg. 7.6%
- 90% solely reliant on social security: 34%
- Homes in which children (under age 18) live where grandparents are heads of household: 7.0%
 - Grandparents who feel *responsible* for grandchildren: 42.1%

Ohio's Aging Population (2015-2030)

Age Group	Population 2015	Population 2030	Percent of change 2015 - 2030
All ages	11.64 million	11.76 million	1.6%
60 and over	2.6 million	3.37 million	30.0%
65 and over	1.84 million	2.58 million	40.2%
80 and over	482,518	704,362	46.0%

SCRIPPS Ohio's 60+ Projected Population by County

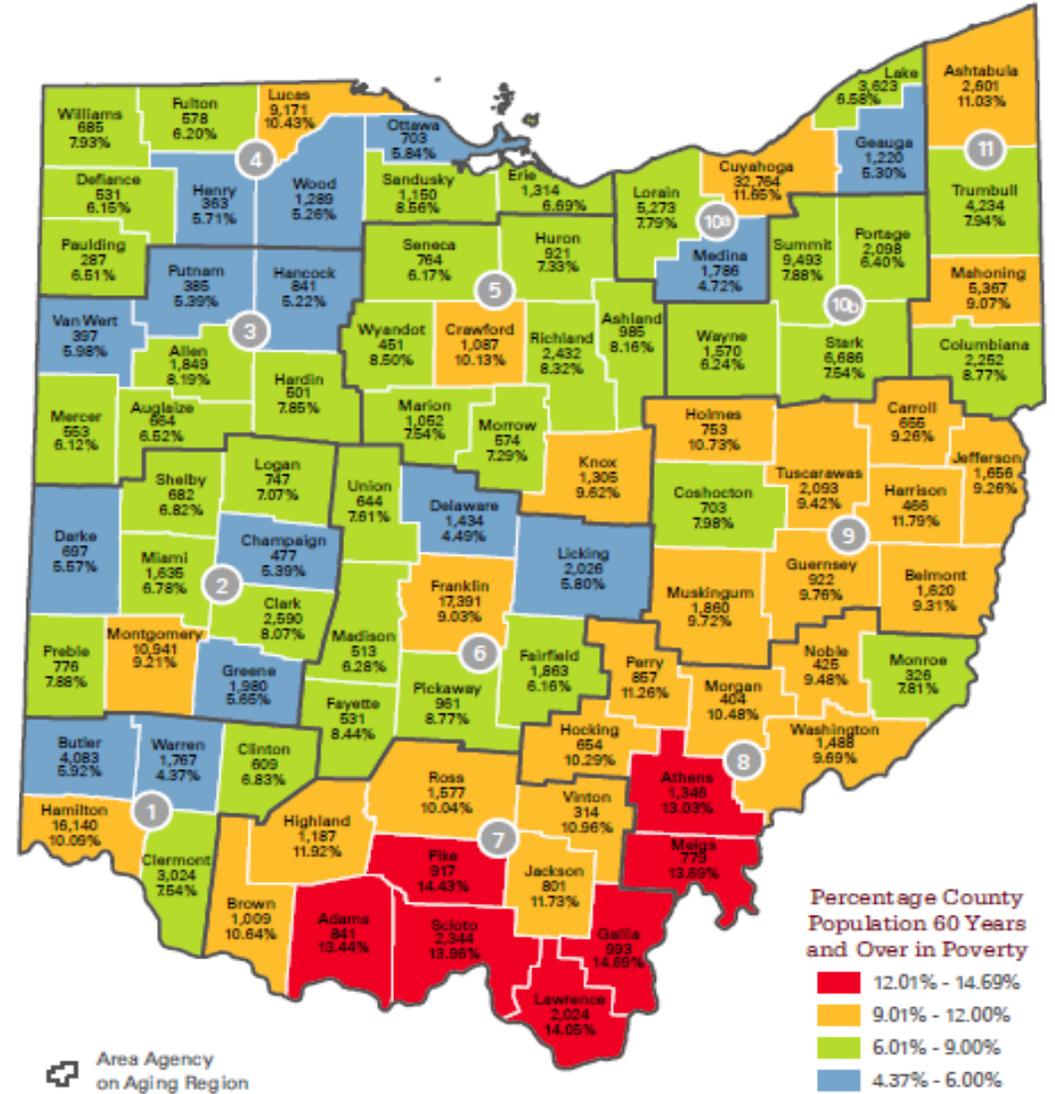


Target/Priority Populations

- Rural
- Limited English Proficiency
- Low-Income
- Low-Income Minorities
- Holocaust Survivors

Poverty in Ohio (age 60+)

- Consistently lower poverty rates are noted among people ages 65 and over.
- Poverty rates are higher among women ages 65+ than men in this same age group.



Nutrition

- **Malnutrition**
 - Up to 50% of older adults living in community settings may be malnourished
(Hunger in Older Adults, Meals on Wheels America 2017)
- **Food Insecurity**
 - Only 40% of eligible seniors (60+) participate in SNAP. Approximately 264,000 Ohio seniors are eligible, but not receiving SNAP *(Center for Community Solutions, May 2017)*
 - The number of older adults visiting food pantries in Ohio has increased by **20%** in the past four years

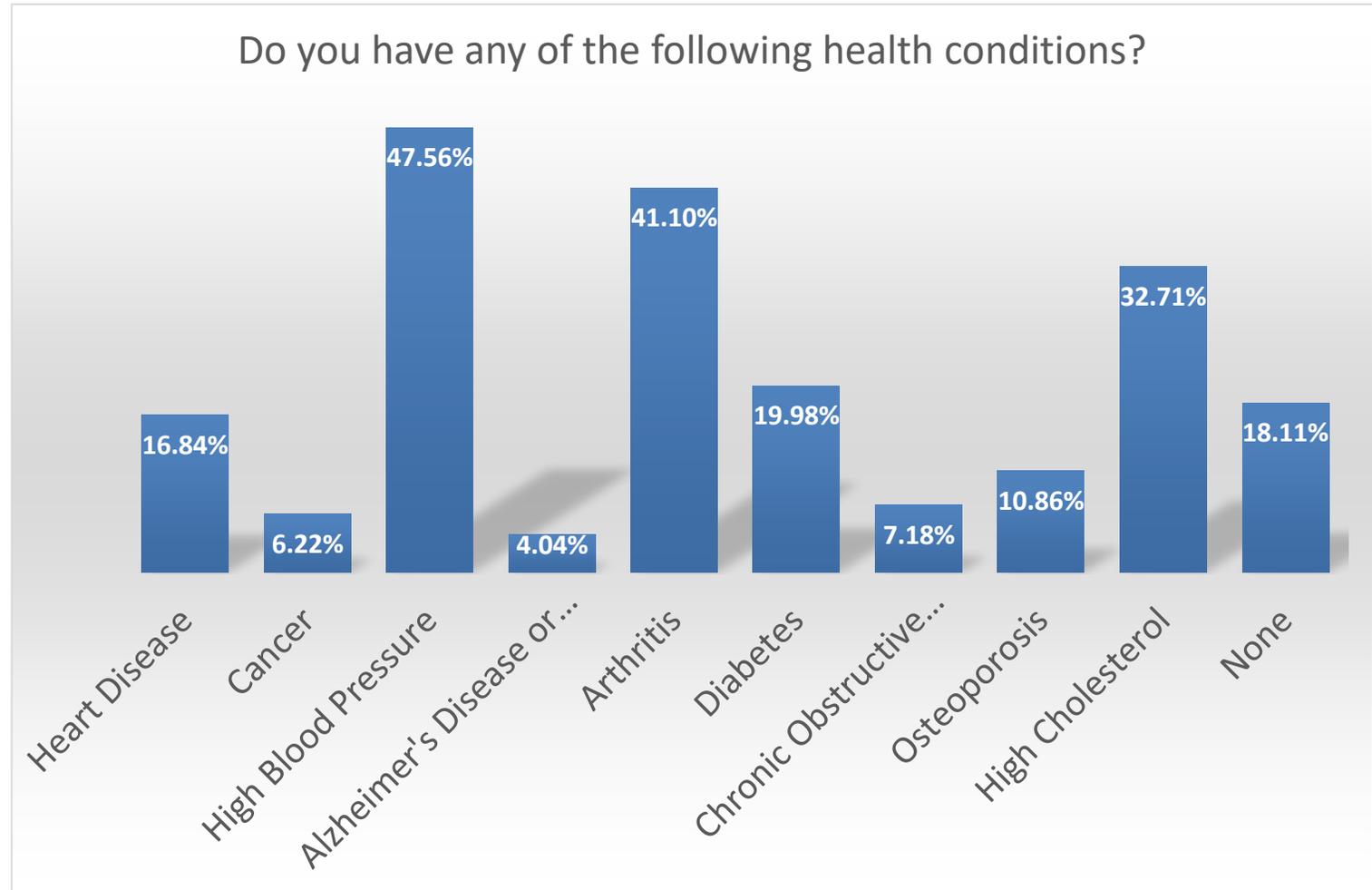
(Fighting Food Insecurity Among Older Adults: Ohio's Home-delivered and Congregate Meals, Center for Community Solutions, May 2017)



(Meals on Wheels America 2017)

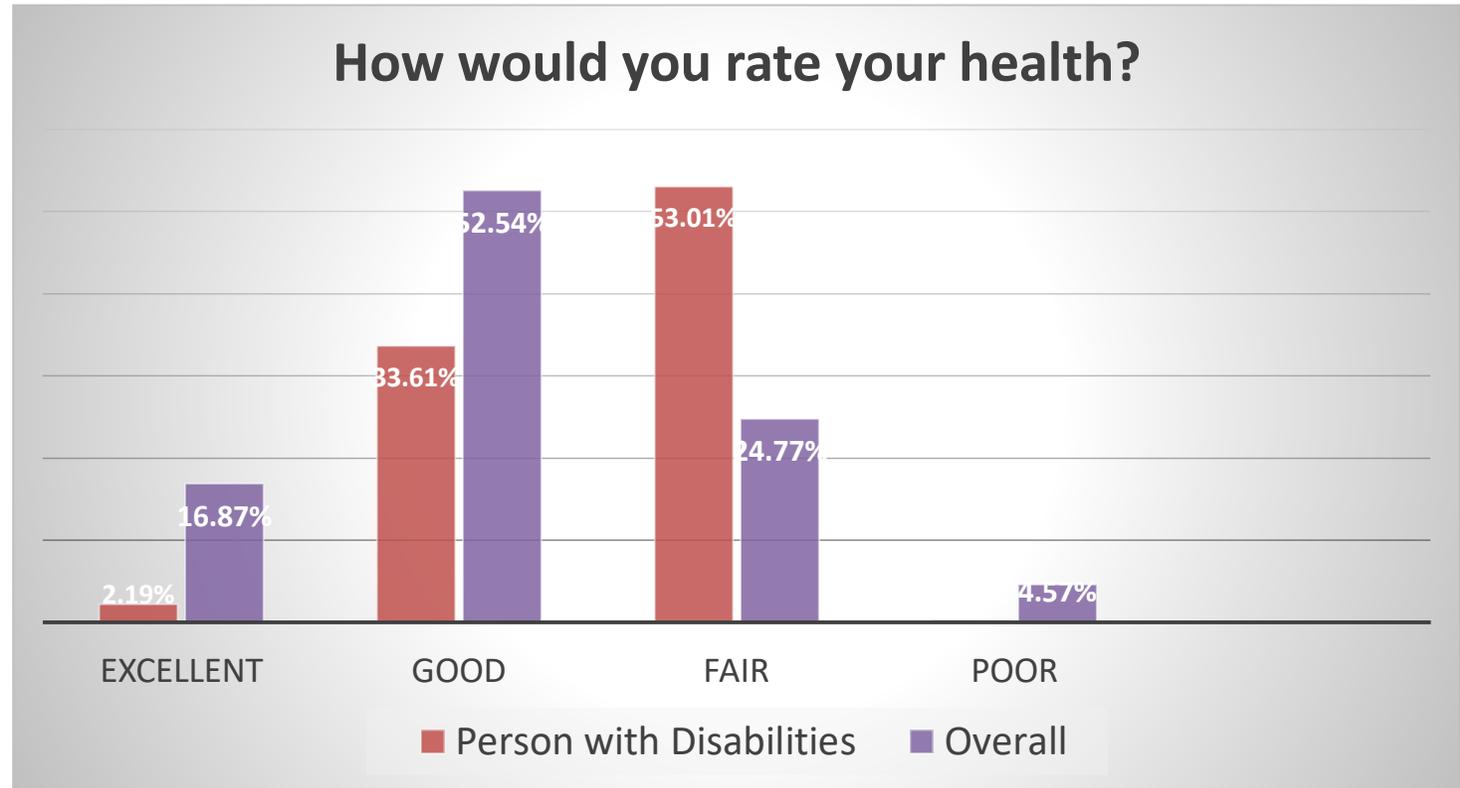
Chronic Disease

- Chronic conditions become more common with age.
 - 80.3% of Ohioans age 65+ have at least one chronic condition
 - 46.5% live with 1+ chronic condition such as arthritis or diabetes
- 95% of health care costs for older adults can be attributed to chronic diseases
- Less than 3% is spent on prevention to improve health



People with Disabilities

- Disease and disability are not an inevitable part of aging.
- Approximately 26% of respondents indicated they were a person living with disabilities.
- Adults with disabilities are more likely to be obese, smoke, have high blood pressure and be inactive.
- Similarly, respondents who answered that they are a person living with disabilities are more likely to rate their health lower, engage in less physical activity, and are more likely to have fallen in the past 12 months.



Pain Management

- Chronic pain:
 - Becomes more common as we age due to health-related chronic conditions such as arthritis, fibromyalgia.
 - Is associated with substantial disability from reduced mobility, avoidance of activity, falls, depression and anxiety, sleep impairment, and isolation.
 - 23% of respondents indicated that they have been prescribed pain medication
- Opioids:
 - The Medicare population has among the highest and fastest-growing rates of diagnosed opioid use disorder, currently at more than 6 of every 1,000 beneficiaries.



Falls

- Falls are the #1 cause of injuries leading to Emergency Department visits, hospitalizations and deaths for Ohioans age 65+:
 - 1 fall every minute
 - An injury every 3 minutes
 - 9 emergency room visits each hour
 - 2 hospitalizations each hour
 - 3 deaths each day
- Ohioans age 65+ make up approximately 16% of the population, but account for more than 85% of fatal falls.



Alzheimer's Disease and Related Dementia

- The most common type of dementia is *Alzheimer's Disease*
 - Currently 210,000 Ohioans diagnosed
- *Alzheimer's is the 6th leading cause of death in Ohio.*
- 1 in 3 older adults who die each year has Alzheimer's disease or another form of dementia
- By 2025, an estimated 250,000 Ohioans will live with Alzheimer's disease



Source The Alzheimer's Assn.

Elder Abuse



- An incredibly under-reported epidemic
- 1 in 10 seniors are victims of elder abuse
- 1 in 23 cases are actually reported to authorities
- 90% of abusers are family members and friends
- 50% of adults with Alzheimer's Disease are victims of elder abuse including financial exploitation
- Morality rate is 3X higher for abused seniors than non-abused seniors

Isolation

- Affects more than 8 million Americans
- 18% of older Americans live alone
- 43% of older Americans feel lonely on a regular basis
- 1 in 6 elders living alone face barriers that lead to isolation
- 12% of Ohioans age 65 and older report little or no social/emotional support
- Prolonged isolation increases risk of:
 - Cognitive decline
 - Abuse, neglect and exploitation
 - Malnutrition
 - Shorter lifespan



Ohio's Aging Network

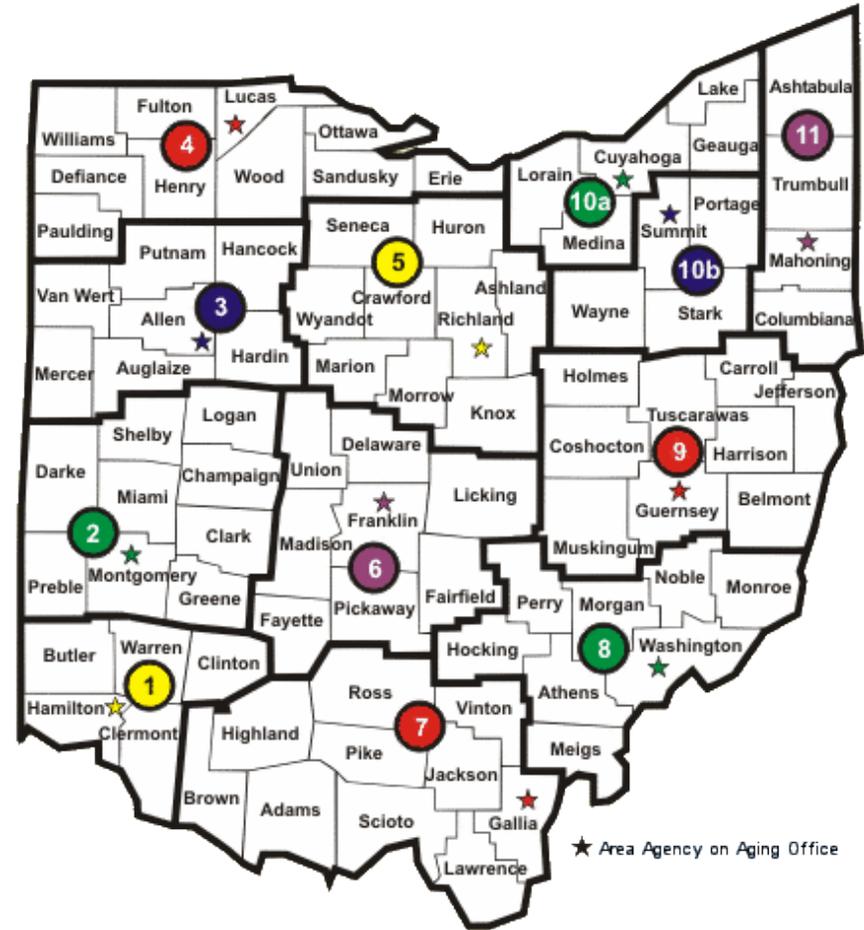


Older Americans Act

- Federal level:
 - Administration for Community Living
- State level:
 - Ohio Department of Aging
 - State Long-Term Care Ombudsman
- Regional/local level:
 - Area Agencies on Aging

Area Agencies on Aging

- Create local plans to respond to the needs of elders in the communities they serve
 - Are advocates, planners, funders and educators
 - Work with public and private partners to respond to the unique needs of elders & families
- Provide assessment and case management, plus information and referral
- House or coordinate with regional long-term care ombudsman programs (consumer advocates)



Role of the Ohio Department of Aging (ODA)

- For Ohio, ODA administers:
 - Older Americans Act programs
 - Medicaid programs and function
 - Long-Term Care Ombudsman
- Plan for the emerging needs of Ohio's older adults
- Organize and oversee statewide services and supports
- Partner with Ohio's Aging Network

Older Americans Act Programs

- **Title III - \$44.8 million**
 - Nutrition (home delivered and congregate meals)
 - Transportation
 - Evidence-based chronic disease self management
 - Injury/falls prevention
 - Health promotion
 - Legal assistance
 - Caregiver support
 - Home modification
 - Chore and homemaker services
 - Adult day services
- **Title V - \$3.8 million**
 - Senior employment programs
- **Title VII - \$790,000**
 - Abuse prevention
 - Long-term care ombudsman services

The Older Americans Act programs serve approximately 250,000 Ohioans

Older American Act - Consumers

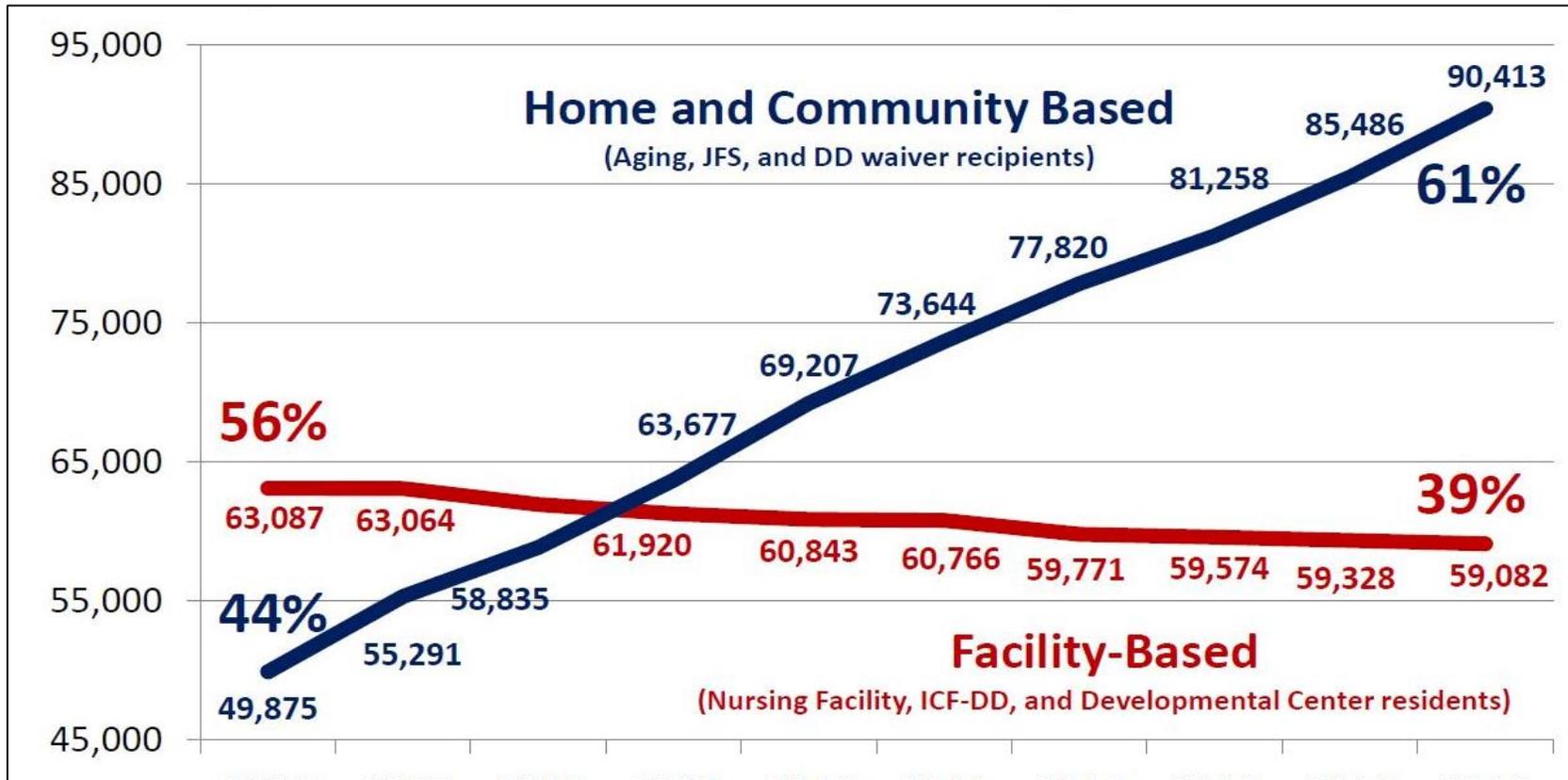
- Consumers Living Independently in the Community
 - Do not qualify or choose not to receive Medicaid services
 - Independent consumers in their own home
 - Homebound consumers
 - Supportive and Caregiver Services
 - Nutrition HDM or Congregate dining
 - Health, Wellness and Prevention programs

Medicaid Home and Community-Based Services (HCBS)

- **PASSPORT** Medicaid waiver
- **Assisted Living** Medicaid waivers.
- **PACE**



Rebalancing Long Term Care



2006 – Less than 50,000 people received care in their homes

2015 – More than 90,000 people received care in their homes

Medicaid - Consumers

- Ohio Medicaid Waiver and Passport consumers
 - Case Management
 - Long Term Care and Services
 - Independent and Homebound
 - Supportive and Caregiver Services
 - Respite services
 - Nutrition programs- HDM and Congregate dining

Long-Term Care Settings

- Nursing Homes
 - licensed and certified by ODH
- Residential Care Facilities (i.e. assisted living)
 - licensed by ODH
- Residential Class 2 facilities
 - licensed by ODMHAS
 - provides accommodations, supervision, and personal care services

OHIO OFFICE OF THE STATE LONG-TERM CARE OMBUDSMAN

Mission

To **advocate for excellence** in long-term services and supports wherever consumers live.

Structure of the Office

- State Office
 - Functional supervision, technical assistance, training, monitoring
- 12 regional programs designated by State LTCO
- 88 paid staff trained by State Office
- 200 volunteers trained by regional programs

Our role

- Provide information to consumers and their loved ones about what to expect from providers about their emergency planning and preparedness
- Provider consultations to LTC providers
- Awareness of impacts on LTC residents
- Information sharing with other EM partners, especially during an event

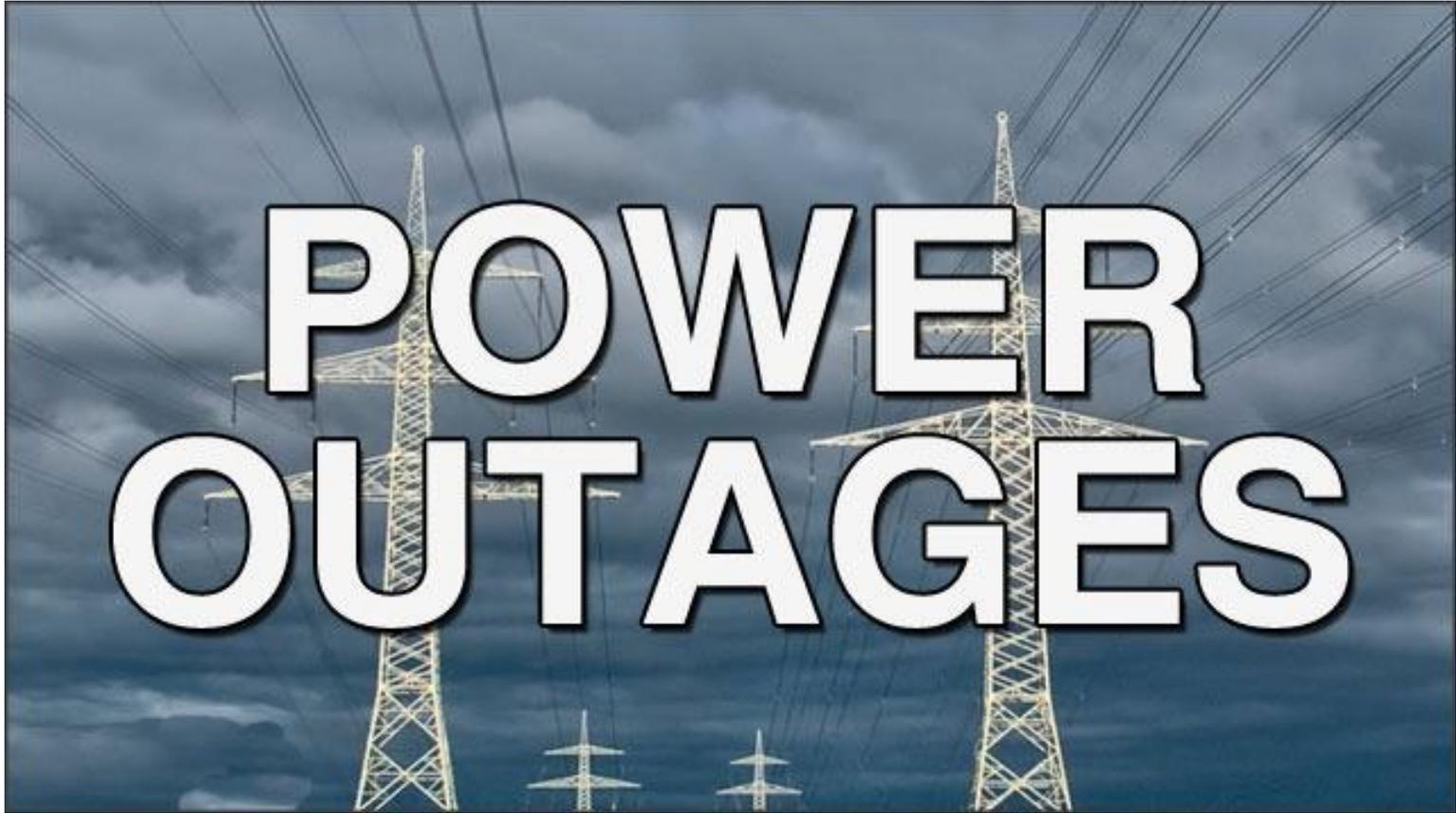
Ombudsmen can resolve **complaints**, protect rights, and promote access to services for residents before, during, and after emergencies and disasters

Long-Term Care Settings

- Nursing Homes
 - licensed and certified by ODH
- Residential Care Facilities (i.e. assisted living)
 - licensed by ODH
- Residential Class 2 facilities
 - licensed by the Ohio Department of Mental Health and Addiction Services
 - provides accommodations, supervision, and personal care services



Water Main Break



State Plan on Aging 2019-2022

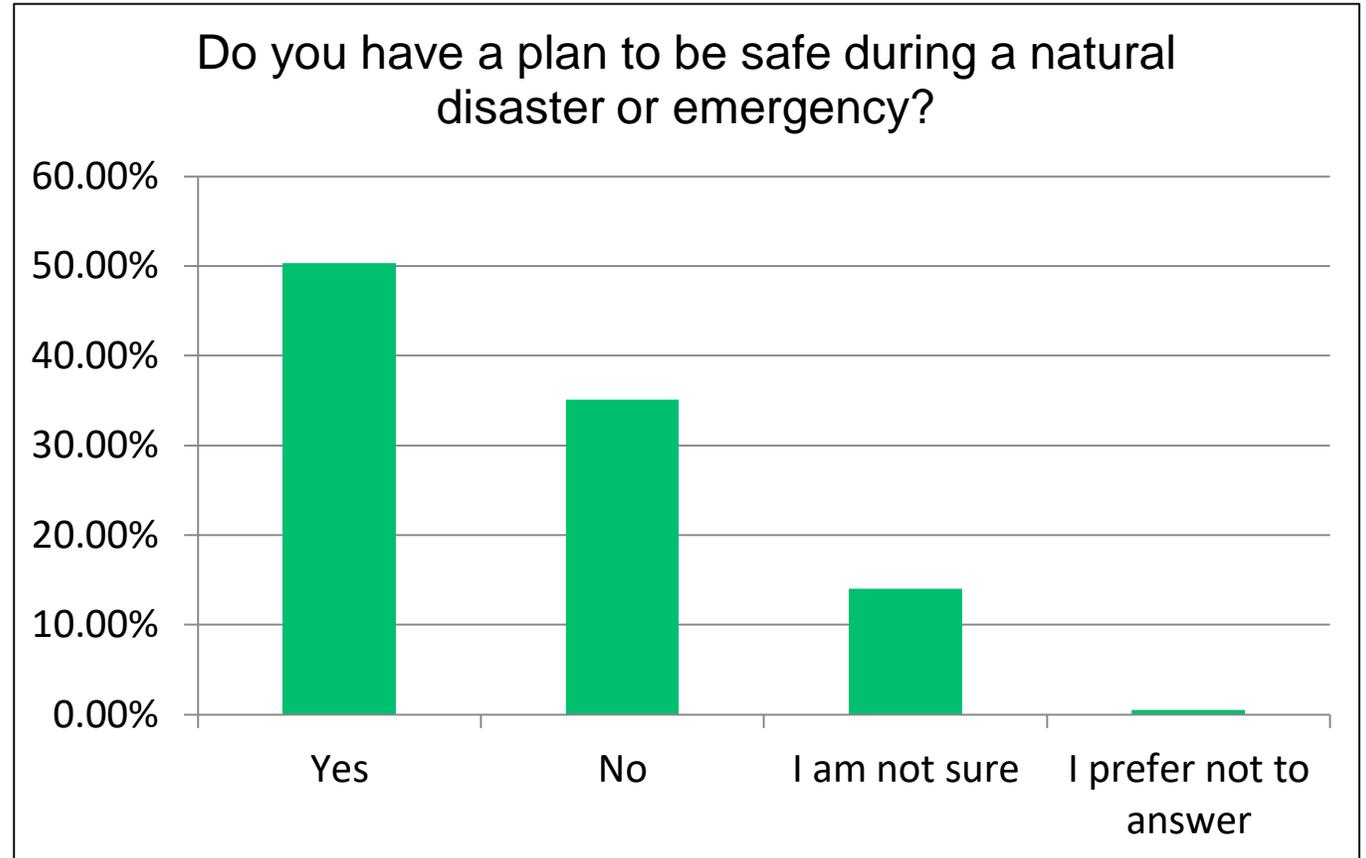


State Plan on Aging

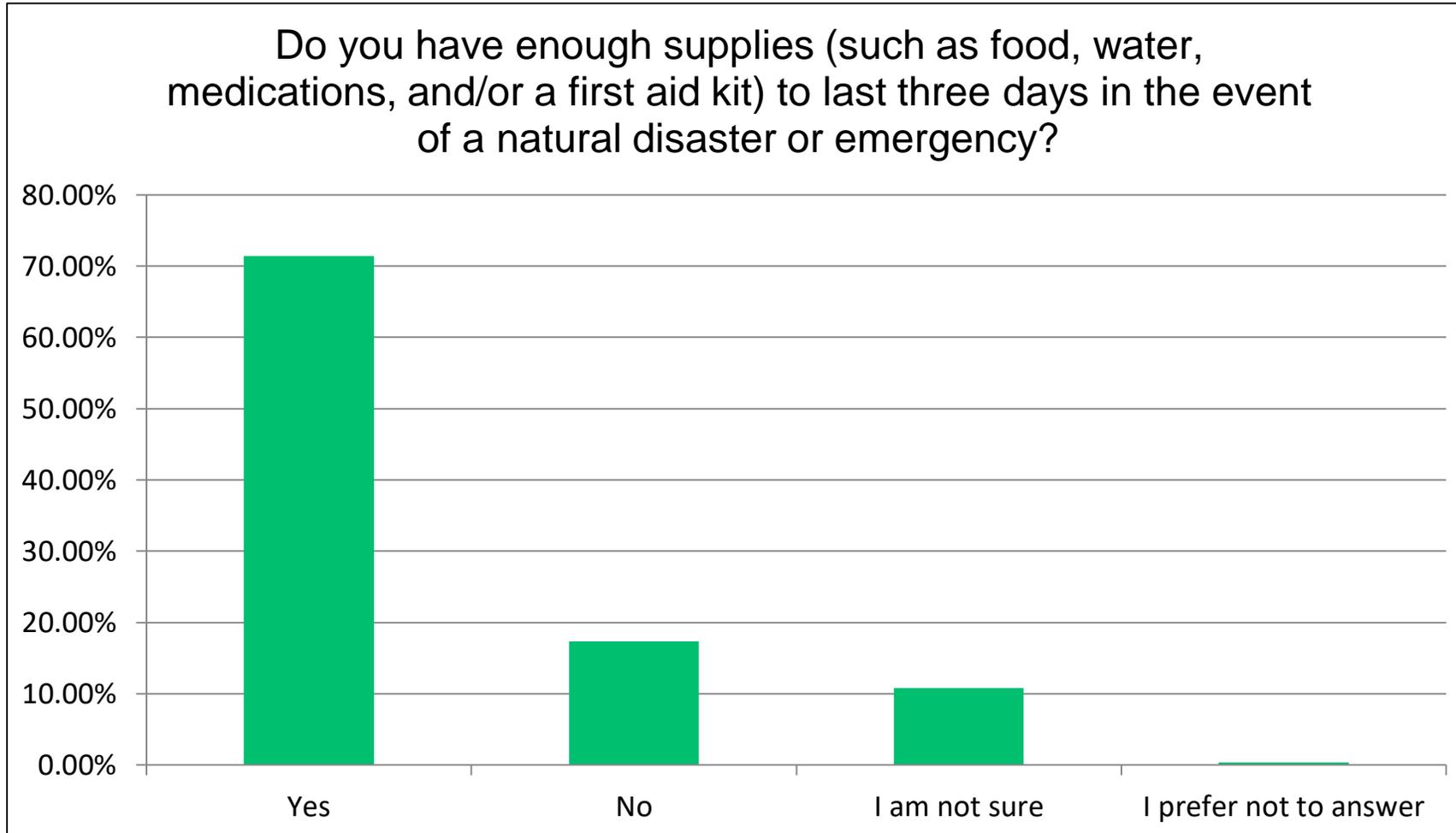
- Four-year plan (Oct. 2019-Sept. 2022)
 - Policy priorities for the next four years
- Design was based on:
 - Needs Assessment
 - Federally required areas of focus
 - Known and emerging concerns
 - Priority populations

Emergency Preparedness

- The impact of a disaster is most severe for people who failed to plan for emergencies or those with limitations.



Emergency Preparedness



Six Focus Areas of the State Plan on Aging

- Access to Information and Advocacy Services
- Population Health
- Dementia
- Caregivers
- Civic Engagement
- Aging-in-Place



Six Focus Areas of the State Plan on Aging

- Access to Information and Advocacy Services
- Population Health
- Dementia
- Caregivers
- Civic Engagement
- **Aging in Place**



State Plan: Aging in Place



- GOAL: Enable older Ohioans, persons with disabilities and their caregivers to be active and supported in their homes and communities.
- Objectives:
 - Transportation
 - Housing
 - Homelessness
 - Emergency Preparedness
 - Care management
 - Workforce capacity
 - Long-term care planning
 - Livable communities

State Plan: Emergency Preparedness



Objective 9: Strengthen planning efforts and response protocols that address the needs of vulnerable older adults during emergency events.

Strategies:

9.1 Establish statewide emergency communication protocols for area agencies on aging and aging network partners.

9.2 Develop and participate in a training and education program, including table top exercises and use of best practices within the aging network that support the development of department, area agency on aging and provider emergency preparedness plans. (Outputs: Training developed and implemented; number of providers trained)

9.3 Educate older adults through various multi-media outlets about the importance of planning for emergency events. (Output: Number of outreach and communication plans established; number of plans implemented)

9.4 Advocate for the heightened utilization of senior centers during emergency events. (Output: Number of advocacy efforts; percentage of increased utilization of senior centers as emergency sites)

Outcome: More older adults are prepared for emergency events as evidenced by an increase in persons stating readiness in the statewide needs assessment survey.

State Plan: Emergency Preparedness



Objective 10: Re-evaluate and strengthen partnerships by and between first responders and the aging network to heighten the focus on vulnerable older adult needs during emergency events.

Strategies:

10.1 Partner with state agencies, community first responders and community partners to develop cross-collaboration emergency management protocols. (Output: Percentage of increase in partnerships; benchmarking completed)

10.2 Establish and maintain department and area agency on aging consumer-focused emergency management plan and protocols. (Output: All area agencies on aging have emergency management plans; safety procedures established and implemented)

Outcome: The department and area agencies on aging have plans that are coordinated and responsive to the emergency needs of older Ohioans as evidenced by successfully tested plans.

Engaging the Community

- Identify and build on existing strengths
- Increase collaboration between ODA, EMA and community
- Expand integration of community resources into action plans
- Encourage preparedness through outreach, training, and exercises
- Promote volunteer opportunities for ongoing community safety and preparedness in disasters



Department of
Aging

Thank you for your time!

For more information:



www.aging.ohio.gov