

## Chapter 1 - Tennessee Commission on Aging and Disability

### **Mission**

The Tennessee Commission on Aging and Disability brings together and leverages programs, resources, and organizations to protect and ensure the quality of life and independence of older Tennesseans and adults with disabilities.

### **History & Current Status**

The Tennessee Commission on Aging and Disability (formerly the Commission on Aging) was created by the Tennessee General Assembly in 1963. The commission is the designated state unit on aging and is mandated to provide leadership relative to all aging issues on behalf of adults age 60 and over in the state.

The Tennessee Commission on Aging and Disability (TCAD) has been administering Older Americans Act services and providing oversight as mandated by the United States Administration on Aging (AoA) since 1965. In 2001, the Tennessee Legislature expanded the authority of the TCAD to provide home and community-based services to older persons to include adults with disabilities under age 60 in the state funded Options for Community Living Program. The Options Program was designed for individuals who do not qualify for long-term care services under the state medical assistance program. TCAD has administered federal funds to operate the statewide State Health Insurance Assistance Program (SHIP) since 2003. In 2004, the state Medicaid agency, the Bureau of TennCare, designated TCAD as the operating agency for the Statewide Home and Community Based Services Waiver for Elderly and Disabled. In 2008, the CHOICES Act enabled TennCare to contract with Managed Care Organizations (MCO's) to manage Medicaid-funded long-term support services. In 2013, the Governor formed the Task Force on Aging to create a plan to improve the lives and care of older Tennesseans and their families through a collaboration of public, private, and non-profit leaders. TCAD continues this collaboration with state and local leaders through the livable communities and local transportation initiatives. In 2014, the Tennessee General Assembly created the Elder Abuse Task Force spearheaded by TCAD to study Tennessee's current system for protecting, preventing, and prosecuting crimes of abuse against Tennessee's elders and its more vulnerable adults. In 2016, Senate Joint Resolution 678 was signed into law requiring TCAD to work with the TN Bankers Association, the TN Credit Union League, and other appropriate organizations to assist financial institutions in protecting consumers from fraudulent and other questionable transactions. Over the past several years the Tennessee General Assembly strengthened state laws to protect the state's elderly population from financial exploitation including Chapter 135 of the Public Acts of 2019 which created the Elder Abuse Task Force. TCAD also administers state funds for multi-purpose senior centers, public guardianship, homemaker and personal care services, and home-delivered meals.

TCAD has provided leadership in advocating for and implementing a statewide system to provide in-home services for people who choose to stay at home rather than being cared for in a long-term care facility. The average annual cost of nursing home care per patient is significantly higher than in-home care. By providing a system for in-home services, TCAD has not only championed the cause for Tennesseans age 60 and over and adults with disabilities to be cared for in the setting of their choice but has also saved taxpayers millions of dollars.

### **Long Term Services and Supports (LTSS)**

TennCare CHOICES in Long Term Services and Supports is the primary Medicaid program that provides services to older adults and adults with physical disabilities in Tennessee. Implemented in 2010, the program is a result of sweeping reform legislation: The Long-Term Care Community Choices Act of 2008. The key objectives include expanding access to home and community-based services, streamlining enrollment, improved coordination of services, support for family caregivers, continuous quality improvement focused on the member experience, and a more equitable balance in institutional versus HCBS expenditures.

CHOICES is an integrated Medicaid Managed Long Term Services and Supports program. TennCare-contracted Managed Care Organizations are responsible for coordinating physical and behavioral health and long-term services and supports, including nursing facility services and home and community-based services for Medicaid eligible members enrolled in the program.

The nine Area Agencies on Aging and Disability (AAADs) serve as the single point of entry for services provided through the Older Americans Act, the Options for Community Living Program, the State Health Insurance Assistance Program, the Public Guardianship for the Elderly Program, and the CHOICES home and community based services for new Medicaid applications. (MCOs assist their current members.) See Attachment I for additional description.

As of January 2021, 26,471 Tennesseans are enrolled in CHOICES, with 14,418 (53.45%) receiving nursing facility services, and 12,323 (46.55%) receiving home and community-based services.

In July 2016, Tennessee implemented a second program component of CHOICES focused on serving people with intellectual and developmental disabilities: Employment and Community First CHOICES. In addition to a comprehensive array of employment and supportive services, benefits in the new program include a number of services that are specifically targeted to support family caregivers, including respite, supportive home care, family caregiver stipend, family caregiver education and training, conservatorship alternatives counseling and assistance, and health insurance counseling and forms assistance. As of January 2021, the Employment and Community First CHOICES program serves 3,463 individuals with IDD.

## Chapter 2 - Focus Areas and Programs

### Older Americans Act Programs (OAA)

Older Americans Act (OAA) funds provide a comprehensive array of services and the administrative infrastructure to deliver all OAA programs. As the designated State Unit on Aging (SUA), TCAD receives an annual allotment under Title III of the Older Americans Act as amended, from the Administration on Community Living (ACL) in the U.S. Department of Health and Human Services. TCAD allocates OAA funds to nine (9) Area Agencies on Aging and Disability (AAADs) based on an approved intrastate funding formula. The AAADs plan, develop, and implement a system of services for persons age 60 and over in their respective Planning and Service Areas (PSA). They also oversee multi-purpose senior center activities. This comprehensive and coordinated system of services is described in the AAAD's Area Plans. OAA programs administered by TCAD include:

#### OAA Title III–B Supportive Services/In- Home Services

Supportive services funds provide a wide range of social services aimed at helping adults age 60 and over remain independent in their own homes and communities. Some of the services offered under Titles IIIB of the Act include services such as information and assistance, transportation, case management, legal assistance, adult day care, and activities in senior centers.

- **Information and Assistance**  
The nine Area Agencies on Aging and Disability (AAADs) provide information, assistance, referrals, initial screening for program eligibility, and long-term care options counseling. The AAADs act as a single point of entry for federal and state programs. Information and Assistance is provided directly by the AAADs. This service may be accessed through the toll free, statewide number 1-866-836-6678. All AAAD Information & Assistance counselors are certified by AIRS (Alliance of Information & Referral Systems).
- **Transportation**  
AAADs contract with senior centers or human resource agencies to provide limited transportation services that assist adults age 60 and over with accessible rides to medical appointments, senior center activities, meal sites, grocery stores, and pharmacies.
- **Case Management**  
AAADs provide case management for clients who receive home and community-based services funding through the Title IIIB and State Options. The in-home services primarily include case management, personal care, homemaking, and home delivered meals.
- **Legal Assistance**  
The Legal Assistance Program provides legal advice and representation by an attorney to older individuals and includes counseling or other appropriate assistance by a paralegal or law student under the supervision of an attorney. Referrals may also be made to another community service provider. Public education on legal issues is also provided.

- **Adult Day Care**  
Adult Day Care provides personal care for dependent adults in a supervised, protective congregate setting during the daytime. Service sites may offer social and recreational activities, training and counseling, meals, rehabilitation, or medication assistance.
- **Senior Centers**  
An important part of Tennessee's Aging Network is multipurpose Senior Centers that serve as local community focal points for information on aging and aging activities in at least one location in each of Tennessee's 95 counties. They offer a wide variety of group and individual services that promote healthy lifestyles, provide learning opportunities, and provide social interaction and volunteer opportunities. Senior Centers in Tennessee are supported through a combination of federal, state, and local funds.

### **OAA Title III–C Nutrition Services**

The Aging Nutrition Program provides meals, socialization, and nutrition education and counseling to adults age 60 and over. These services are provided in 190 congregate settings such as senior centers or senior housing as well as in all 95 counties to homebound older adults. In furtherance of the programs purposes of addressing food insecurity, isolation, and wellness, partnerships are an increasing focus including SNAP outreach to eligible older Tennesseans.

### **OAA Title III–D Disease Prevention and Health Promotion**

The nine (9) AAADs or their contractors provide evidence-based disease prevention and health promotion programs activities across the state. Individual or group sessions, most often conducted at senior centers, assist participants to understand how their lifestyles impact their physical and mental health and to develop personal practices that enhance their total well-being, including physical, emotional, and psychosocial factors. Examples are programs such as Chronic Disease Self-Management Program, Matter of Balance, Stay Active and Independent for Live, and Tai Chi.

### **OAA Title III–E National Family Caregiver Support Program**

This program provides assistance to family caregivers caring for adults age 60 and over, adults with dementia, and grandparents or relative caregivers caring for a minor child. The Caregiver program provides information and assistance, individual counseling/support groups/training, respite, and supplemental services on a limited or one-time basis.

### **OAA Title IV Activities for Health, Independence, and Longevity Aging and Disability Resource Center (ADRC)**

In Tennessee, the AAADs serve as Aging and Disability Resource Centers (ADRC).

### **OAA Title VI Services for Native Americans**

Tennessee does not have an officially recognized Indian Tribal Organization and does not receive funding from Older Americans Act for Grants for Services for Native Americans.

### **OAA Title VI Services for Holocaust Survivors**

Tennessee has approximately 50 Holocaust Survivors. While TCAD does not receive

designated funding from Older Americans Act for services for Holocaust Survivors, TCAD will work with partner agencies to provide person-centered, trauma-informed services to Holocaust survivors.

### **OAA Title VII Elder Rights Protection**

- **Elder Rights**  
TCAD advocates for the protection of older Tennesseans from abuse, neglect, exploitation, and discrimination. TCAD currently has an app designed for first responders to connect them to resources to assist those who need assistance. Additionally, through the State Legislature TCAD is administrating an Elder Abuse Task Force looking at Financial Abuse.
- **Long Term Care Ombudsman**  
The program consists of a State Long Term Care Ombudsman, along with 11 District Long Term Care Ombudsman located in the nine Area Agency on Aging and Disability districts and assisted by approximately 200 Volunteer Ombudsman Representatives.

The Long-Term Care Ombudsman program is responsible for advocating for the rights of those residing in licensed nursing facilities, assisted living facilities and homes for the aged. The primary responsibility of this program is to resolve complaints that impact the health, safety, and welfare of residents of long-term care facilities, as well as educating residents of their rights. The Ombudsman's advocacy role takes two forms: 1) to receive and resolve individual complaints and issues by, or on behalf of, these residents; and 2) to pursue resident advocacy in the long-term care system, its laws, policies, regulations, and administration through public education, consensus building, and policy or legislative action .

The services of the Ombudsman are free, confidential, and state-wide. The program accepts complaints/concerns from anyone including, but not limited to, the residents of any nursing home, assisted living or residential home for the aged, family members or friends of a nursing home resident, the nursing home administrator, employees of the facility, or any other concerned citizen. This program will also assist individuals and families interested in considering long term care placement.

### **STATE-FUNDED GRANTS, PROJECTS & STATEWIDE PROGRAMS**

#### **Options for Community Living Program (Options):** State-funded Home and Community-Based Long-Term Care Services

Since 2000, the SUA has received state funds for home and community-based long-term care services for adults age 60 and over and adults with physical disabilities who do not qualify for Medicaid long term care services. The Options Program provides homemaker, personal care, and home-delivered meals.

#### **Public Guardianship for the Elderly Program**

The Public Guardianship for the Elderly Program is designed to assist adults age 60 and over, or under age 60 with the Executive Director's approval, who are unable to manage their own affairs and have no family member, friend, bank, or corporation willing or able to act on their

behalf. Public Guardians assist clients in obtaining the basic necessities of life including making decisions regarding their finances or needed medical care. The program has the ability to act in a Power of Attorney capacity to allow for less restrictive alternatives as appropriate.

## **DISCRETIONARY GRANTS**

Current TCAD discretionary grants include:

### **State Health Insurance Assistance Program (SHIP)**

SHIP provides free and objective information, counseling and assistance to consumers, their adult children, caregivers, health care providers and other advocates about Medicare and all other related health insurance. An important aspect of the program is to provide information and assistance with enrollment in Medicare Part D and target outreach to low-income Medicare beneficiaries eligible for the Medicare Part D Low-Income Subsidy and Medicare Savings Programs and Duals with mental disorders or illness. The Administration for Community Living (ACL) funds the nationwide program. The statewide Tennessee SHIP operates through a small, but highly trained, paid and volunteer staff and through partnerships to provide this service. In addition to counseling, program staff and volunteers perform community education and outreach on Medicare and current related issues.

### **Senior Medicare Patrol: Empowering Seniors to Prevent Healthcare Fraud**

Senior Medicare Patrol (SMP) is a nationwide program designed to help combat fraud, waste, and abuse in the Medicare and Medicaid programs and is funded by the Administration on Community Living. In Tennessee, the program is administered by the Upper Cumberland AAAD and provides statewide coverage through the participation of all nine (9) AAADs. Retired professionals across the state are recruited and trained to serve as volunteer community experts, educating Medicare and Medicaid beneficiaries on how to better monitor what is paid on their behalf and report discrepancies. SMP programs work cooperatively with SHIP programs described above, including but not limited to, joint training and utilization of statewide volunteers.

### **Medicare Enrollment Assistance Program (MIPPA)**

The MIPPA grant has been administered by TN SHIP since its creation in 2008. This grant provides funding to TN SHIP to perform expanded outreach activities, and expanded screening and application assistance activities to help low-income seniors and persons with disabilities to apply for two programs that help pay for their Medicare costs:

1. The Medicare Part D Extra Help/Low-Income Subsidy (LIS/Extra Help), which helps pay for the Part D premium and reduces the cost of prescriptions at the pharmacy, and
2. The Medicare Savings Programs (MSPs), which help pay for Medicare Part B. Through the MIPPA grant, TCAD is able to provide Part D counseling to rural Medicare to promote Medicare's prevention and wellness benefits.

### **Lifespan Respite**

The Lifespan Respite program will continue through August 2023. Through a partnership with the Tennessee Respite Coalition, training was provided for eight respite trainers to

provide training to people willing to provide respite to caregivers. In the last year of the project a strategic respite plan will be developed.

### **Supplemental Nutrition Assistance Program (SNAP) Outreach**

Through partnership with Tennessee Department of Human Services, TCAD conducts SNAP outreach to low-income older adults in East Tennessee. The goal is to reduce the participation gap between the number of eligible older Tennesseans and those who participate in SNAP. A grant provides additional staff for SNAP outreach activities as well as better incorporating SNAP outreach into existing agency functions. It is anticipated that this initiative will be scaled to all Area Agencies on Aging and Disability across the state over the next two to four years

### **Alzheimer's Disease Program Initiative**

Funded through the Administration for Community Living, the Alzheimer's Disease Program Initiative Grant (ADPI) grant runs from 06/01/2019 – 05/31/2022. The goal of the ADPI grant, or Dementia Capable TN grant, is to promote the development and expansion of a dementia-capable home and community-based service (HCBS) system in Tennessee. Action steps to reach this goal include training Information and Assistance Staff, Home and Community Based Service Program counselors, and home health staff. Additionally, this grant is supporting outreach to individuals living with their caregivers and hosting public webinars, education sessions, and screenings of Alive Inside. Lastly, this grant supports an intervention known as TN M.I.N.D.S. (Music Intervention Navigating Dementia Symptoms) in 5 target districts across the state. TN M.I.N.D.S. combines Powerful Tools for Caregivers with music for individuals with dementia to improve dementia symptom management and overall quality of life. Vanderbilt University Medical Center – Center for Quality Aging is serving as the third-party evaluator for all ADPI grant activities.

### **Falls Prevention Grant**

Funded through the Administration for Community Living, the Falls Prevention Grant will continue through June 30, 2021. In partnership with East Tennessee Area Agency on Aging and Disability, the goal of this grant is to expand the capacity of the Stay Active and Independent for Life (SAIL) program across Tennessee. SAIL is an evidence-based strength, balance, and fitness program for adults 65 and older.

### **TN Person Centered Music Program**

The Tennessee Person-Centered Music Program offers residents at participating Tennessee nursing homes personalized music as part of their care. The program is funded by a three-year Civil Monetary Penalty Grant from the Centers for Medicare and Medicaid Services through the Tennessee Department of Health from February 1, 2019 to June 30, 2022. This program will improve the quality of life and care for up to 2,205 residents including those living with Alzheimer's and related dementia in 147 nursing homes across Tennessee. Key outcomes for nursing home residents will be: 1) Reduced reliance on antipsychotic, anti-anxiety, and anti-depressive medications; 2) Reduced physical, verbal, and other adverse behavioral symptoms of participating residents and; 3) Increased access to activities that engage residents and enhance person-centered care by staff.

### **Collaborative Response to Elder and Vulnerable Adult Abuse**

Through a contract with the Office of Criminal Justice Programs in Tennessee TCAD provides emergency services and supports to older and vulnerable adults who are victims of crime. CREVAA works with local law enforcement, district attorneys, Adult Protective Services to provide assistance to those that need it. The assistance provide has to be related to the crime and can include, personal care services, transportation, food, or many other types of emergency assistance.

### **Office of Criminal Justice Programs Elder Abuse Public Service Announcement**

Through a contract with the Office of Criminal Justice Programs in Tennessee, and with a partnership with Nashville Public Television, West Tennessee Legal Services, Legal Aid Society of East Tennessee, and the Broadcaster's Association of Tennessee TCAD is creating and sharing a PSA for older and vulnerable Tennesseans to make them aware of the crimes, and help them find help. There is a statewide effort to help identify potential victims and make sure they know there is help for them, and they are not alone in what they are going through.

## Chapter 3 - Statewide Needs Assessment

### Overview

In order to gain understanding of challenges faced by older adults, a statewide comprehensive needs assessment was conducted and used to inform the **Tennessee State Plan on Aging for October 1, 2021 through September 30, 2025**. The Tennessee State Plan on Aging provides policy makers, service providers, and the general population with appropriate data about trends and implications for the current population.

The Tennessee statewide comprehensive needs assessment consisted of three main components: 1) a statewide survey of older adults, 2) a statewide survey of services providers, and 3) analysis of calls to the statewide Information & Assistance line. The major findings from each component are included in this section. Additionally, copies of each survey instrument and key findings are included in the Appendices.

### Statewide Surveys

From November 2020 through January 2021, the Tennessee Commission on Aging and Disability (TCAD) conducted a statewide survey of both older adults and their providers. This survey utilized the same questions posed during prior statewide needs assessment conducted during 2016. This was designed to maintain questions and

- document needs and strengths both during the COVID-19 pandemic and beyond
- document what is currently working well to support our aging population
- allow participants to express concerns in an open-ended format
- gain a broad understanding of challenges faced by older adults
- better understand direct service providers' perspective of barriers to providing services
- inform policies to make services more accessible, efficient, and effective.

These surveys were conducted online, on the phone, on paper through local service providers. After surveys were completed, two TCAD staff members independently reviewed and categorized the open-ended responses. Any discrepancies were either reviewed by a third party or discussed until agreement was reached. Revisions to the categories were made as needed to accurately reflect all participant responses.

### *Older Adult Survey*

A total of 833 older Tennesseans ages 60 and over and their caregivers were recruited from senior centers, nutrition programs, TCAD email listserv, partner agencies, and social media.

The older adult survey (Attachment F.3) asked the following 4 open-ended questions. The top 4 answers are listed for each.

#### *1) What are the 3 biggest ways COVID-19 has impacted older Tennesseans?*

- Social Isolation (85%)
- Worry / Fear / Anxiety (35%)
- Health (22%)
- Healthcare access / Delay of Care (20%)

**2) *Thinking beyond COVID-19, what is currently working well in your community to support older adults?***

- COVID-19 Adaptations (24%)
- Senior Centers (19%)
- Nutrition Programs (18%)
- Social Support: family, friends, neighbors, etc. (17%)

**3) *Thinking beyond COVID-19, what challenges keep you from being more active in your community?***

- COVID-19 (63%)
- Health / Healthcare (11%)
- Financial Issues (8%)
- Other (8%)

**4) *Thinking beyond COVID-19, what improvements would make your day to day life better?***

- COVID-19 (46%)
- Social Support: family, friends, neighbors, etc. (12%)
- Financial Improvements (8%)
- Recreation / Activities (7%)

***Service Provider Survey***

A total of 231 direct service providers who focus on older adults were recruited through Tennessee's Aging Network, academic partnerships, medical facilities, and professional organizations. Among those who completed the survey, there were 42 in-home care providers, 38 social workers, 32 staff members of senior centers, 23 physicians and medical providers, 22 state or local government employees, 19 healthcare employees, and others (Table 9). These service providers were located throughout 61 counties and had an average of 16.3 years of experience providing services to older adults.

The service provider survey (Attachment F.4) asked the following four open-ended questions. The top four answers are listed for each.

**1. *What are the 3 biggest ways COVID-19 has impacted older Tennesseans?***

- Social Isolation (79%)
- Access to Services (39%)
- Stress / Fear / Anxiety (35%)
- Health (28%)

**2. *Thinking beyond COVID-19, what are the three most common unmet needs you see in your older adult population?***

- Social Needs (44%)
- Transportation (33%)
- Nutrition (29%)
- Access to Healthcare (23%)

3. **Thinking beyond COVID-19, what changes would improve daily life for older adults?**
- Social Support (21%)
  - Home and Community Based Services (20%)
  - Transportation (20%)
  - Nutrition (15%)
4. **Thinking beyond COVID-19, what is currently working well in your community to support older adults?**
- Nutrition (27%)
  - Senior Centers (16%)
  - Home and Community Based Services (13%)
  - Social Support- Family, Friends, Neighbors (13%)
5. **Thinking beyond COVID-19, as a service provider, what is the greatest barrier you encounter in your efforts to improve the lives of older adults?**
- Not Enough Services / Organizations (26%)
  - Funding / Financial Barriers (24%)
  - Staffing issues (14%)
  - Other (12%)

**Analysis of calls to the statewide Information & Assistance line**

2019			2020		
25,788	36.5%	Health/In-Home Services	22,569	29.2%	Health/In-Home Services
13,107	18.6%	Health Benefits	11,953	15.4%	Health Benefits
12,119	17.2%	Nutrition	11,762	15.2%	Housing
5,622	8.0%	Public Benefits	9,918	12.8%	HCBS/OPTIONS
2,369	3.4%	Financial Assistance	7,013	9.1%	Nutrition
2,343	3.3%	Housing	3,911	5.1%	Public Benefits
2,009	2.8%	Transportation	1,750	2.3%	Financial Assistance
1,321	1.9%	Medicaid Services	1,632	2.1%	SHIP
1,005	1.4%	Options Information	1,409	1.8%	Transportation
991	1.4%	Benefit Counseling	1,228	1.6%	Medicaid Services

## Chapter 4 – Challenges

The State of Tennessee will be facing many challenges in addressing the aging and disability populations according to the multiple data sources used to develop the **Tennessee State Plan on Aging for October 1, 2021 through September 30, 2025**. These sources include input from TCAD and AAAD staff, a provider survey conducted during the Statewide Needs Assessment, and other publicly available data sources. The long-term challenge Tennessee faces will be the ability to keep up with the increasing and changing demand for programs and services. The number of Tennesseans ages 60 and older is projected to grow from an estimated 1.66 million in 2021 to over 1.91 in 2030.

### **Capacity of Programs and Services**

#### Lack of Organizations, Services, and Providers in Some Communities:

While there is a shortage of organizations, services, medical specialists, and other providers across all parts of the state, this is particularly true in rural and other underserved areas. These areas may have hard to reach populations, lack of funding, pockets of poverty and high unemployment rates resulting in very little local funding. Approximately 26% (60) of surveyed service providers statewide stated that there was a lack of services or organizations in their community. This is compounded by a lack of affordable transportation to other areas, making local resources even more critical. Services providers specifically mentioned the following challenges:

- Transportation: As mentioned in past State Plans on Aging, transportation continues to be a challenge, especially in rural areas. While all 95 counties in Tennessee have public transportation, the need often exceeds capacity. More affordable, accessible, and flexible transportation services, including personalized door-through-door transportation, are needed. Limited access to transportation can create an additional barrier for accessing other services.
- Technology Access: With the rise of COVID-19, more services are being provided through technology. However, for individuals who do not have technology/internet access in the home, this can create an additional barrier to services.

The lack of available services and programs makes locating, applying, and enrolling in support services difficult. While local AAADs serve as single points of entry, providers, seniors, and caregivers may find it difficult to navigate the different agencies and providers.

#### Staffing

One challenge Tennessee is facing is adequate staffing to provide necessary services. Among the 231 service providers surveyed for the statewide needs assessment, 14% stated that staffing challenges such as staffing levels, wages, and turnover were a significant barrier to providing services to older Tennesseans. This represents a significant increase compared to the 4% of providers who cited staffing as a barrier during the same needs assessment four years ago.

Waitlists: The current capacity of the aging network is unable meet the immediate needs of the aging population and several programs have active waiting lists for enrollment. Statewide, the Options Program currently has a wait list of over 2,800 individuals who need these services to

remain in their home. Similarly, the home delivered meals program has a waitlist of approximately 1,700 individuals. Through concerted efforts during the past four years, these waitlists have been reduced by more than 50%. In the prior statewide needs assessment, waitlists were mentioned as a barrier by 8% of providers; however, during this needs assessment, it was only mentioned as a barrier by 3% of providers. While we recognize this to be important progress, efforts across the next 4 years will be made to further address this challenge.

### **Changes Resulting from COVID-19**

During 2020 and 2021, the ongoing COVID-19 pandemic posed challenges for all Tennesseans, especially older adults, and persons with disabilities. As the predominant at-risk population, older adults were the earliest recommended to “shelter in place” at home in March 2020. During the pandemic, programs and services were adapted to continue to meet the needs of older Tennesseans, the pandemic caused many older Tennesseans to delay or stop some services and activities. As vaccinations continue and the pandemic continues to improve, it will be vital to the health and safety of older Tennesseans that communities continue to safely engage this population.

### **Demographic Changes**

One challenge noted by Area Agencies on Aging and Disability were changing funding levels and population needs based on shifting demographics. While population growth among older Tennesseans continues to outpace that of the overall population, the distribution and overall demographics of these individuals continues to change.

### **Fiscal Challenges**

Although Older Americans Act and other aging programs have seen increased support over the past four years, funding remains a challenge. Among the 231 service providers surveyed for the statewide needs assessment, 24% stated that funding levels and requirements were a significant barrier faced when providing services to older Tennesseans. Some providers specified concern that OAA funding will not grow in proportion to the growth of the 60+ population.

**Additional Challenges** identified by the data include restrictive rules and regulations, awareness of resources (among both Providers and Older Adults), lack of communication between provider agencies, lack of participation by older adults, and lack of family involvement. In addition to challenges noted above, numerous other state agencies have some responsibility and funding for providing aging and disability services in addition to TCAD. These agencies provide crucial services and each face unique challenges (Attachment G)

## Chapter 5 – Outcomes and Performance Measures

As the number of adults ages 60 and older continues to grow, Tennessee must have a State Plan that utilizes all available resources, including both people and money, in the most efficient, effective, and equitable way possible. Such a plan will require that solutions are:

- Collaborative – build on new and existing partnerships
- Diverse - provide a greater variety of services and programs to meet the needs of all populations
- Streamlined – create easier access to services and programs
- Data-driven - use data to inform decisions and track successes, and.
- Anticipatory - address both immediate needs of older adults and the needs of future older adults

However, this is only the starting point for TCAD. TCAD will continue to engage policy makers in decision-making processes that elevate the needs of adults age 60 and over and adults with disabilities to the forefront while recognizing the strengths and contributions of this population. TCAD will also continue to seek state and federal funding aimed at addressing the need for services. TCAD will continue to strive to maintain and expand quality services, programs, and staff.

The goals, objectives, strategies, and performance measures have been developed for the **Tennessee State Plan on Aging for October 1, 2021 through September 30, 2025** utilizing the following statewide surveys conducted from November 2020 through January 2022; TCAD's Strategic Plan (approved by the Commission Members), and the Public Hearing to be held May 28<sup>th</sup>, 2021.

The following are the goals, objectives, strategies, and performance measures for the Tennessee State Plan on Aging. These are based on funding sources (Older Americans Act and State appropriations) and a multifaceted approach of reducing the many unmet needs of older adults through advocacy and increased awareness.

Goal 1: Ensure that programs and services funded with federal appropriations including the Older Americans Act are cost effective and meet best practices

**Objective 1-1:** Ensure access and efficiency to home and community-based services

**Strategy 1-1.1:** Review and revise the RFP process for service providers based on the revised contract language and policies and procedures.

**Strategy 1-1.2:** Review the III-B in-home services programs to ensure that they are administered in the most cost-effective manner and best meets the needs of individuals receiving services.

Measures / outcomes

- a) By 2022, TCAD will convene work group to standardize and update language for the 4-year Area Plan RFPs
- b) Each fiscal year, TCAD staff will review plans submitted by Area Agencies to ensure that the funds are maximized to ensure the in-home needs of older adults are met and they are receiving services.

**Objective 1-2:** Provide Information and Assistance services that are easily accessible through telephone, email, and text messages.

**Strategy 1-2.1:** Create and maintain Statewide Resource Directory

**Strategy 1-2.2:** Expand and improve technology to create a more streamlined I&A system

**Strategy 1-2.3:** Continue to ensure that all I&A staff are AIRS certified

Measures / outcomes

a) By 2023, TCAD will research technology and best practices regarding efficient and effective I&A systems

b) All eligible I&A staff will have current AIRS certification at each annual review

**Objective 1-3:** Leverage Older Americans Act transportation funding to expand community transportation resources

**Strategy 1-3.1:** Compile database of transportation programs and mobility options.

**Strategy 1-3.2:** Collaborate with partner agencies to bolster existing transportation infrastructure using Older Americans Act funds.

Measures / outcomes

a) By December of each year, ensure annual update of Statewide Transportation Map to ensure better coordination of transportation programs, mobility options, and services for the aging and disability population

**Objective 1-4.** Identify and implement strategies to ensure that the Ombudsman program is more effective and efficient in advocating for all patients in all long-term care facilities.

**Strategy 1-4.1:** Ensure that the data from the Ombudsmanager database is accurately recorded and in a timely manner and the data used to evaluate and improve the program.

**Strategy 1-4.2:** Ensure that all Ombudsman federal and state reports are submitted annually as required.

**Strategy 1-4.3:** Evaluate how to distribute funding for the Ombudsman program more efficiently and effectively taking into consideration the location of the long-term care beds.

**Strategy 1-4.4:** Provide monitoring and technical assistance for District Ombudsman programs to ensure that programs are meeting the goals and guidelines.

**Strategy 1-4.5:** Update the Volunteer Ombudsman Representative (VOR) manual and training materials to maintain the most current data available.

**Strategy 1-4.6:** Conduct volunteer on-line and face-to-face training in each district annually led by the State Long-term Care Ombudsman.

**Strategy 1-4.7:** Continue to stay updated on the emerging Ombudsman issues such as the role of the Ombudsman program in the Managed Long-Term Care Support Services.

**Strategy 1-4.8.** Revise, if needed, the contract scope of service based on the revised policies and procedures for the Ombudsman program.

**Strategy 1-4.9:** Participate in Regional Survey Team meetings to build the relationship with the Department of Health.

Measures / outcomes

a) 100% of Ombudsmanager reports will be evaluated each quarter to ensure that all appropriate data has been collected.

- b) By December 15 each year each district Ombudsman will be required to submit his/her annual report to the State LTC Ombudsman to ensure that the Federal Annual report is submitted on time
- c) State LTC Ombudsman will meet with the Financial Director on an annual basis to review the budget and determine funding for the program based on the amount and location of long-term beds.
- d) Each year the State LTC Ombudsman will make a visit to each district every year to meet with the volunteers, conduct trainings, and to ensure that all volunteers and District Ombudsman staff have the most current information.
- e) The State LTC Ombudsman will attend the annual State LTC Ombudsman conference annually, and participate in calls and webinars from ACL, and other agencies to maintain the most current information
- f) All District LTC Ombudsman will attend quarterly Regional Survey Team meetings for the grand region where their district is located.
- g) The State LTC Ombudsman will attend all Regional Survey Team meetings to guide the program and facilitate the partnership.
- h) All trainings, conferences, calls, webinar, and meetings will be documented in Ombudsmanager.

**Objective 1-5.** Support and enhance multi-disciplinary responses to elder abuse, neglect, and exploitation involving Adult Protective Services (APS), Ombudsman, legal assistance, law enforcement, healthcare professionals, and financial institutions.

**Strategy 1-5.1:** Enhance the partnership with APS to build awareness of APS services and how citizens should contact APS for needed services.

**Strategy 1-5.2:** Identify and replicate successful public outreach campaigns/education and promote, and conduct public outreach, education, and awareness campaigns to reduce and prevent elder abuse, neglect, and exploitation.

**Strategy 1-5.3:** Provide input and assistance (when requested) with Vulnerable Adult Protective Investigative Teams (VAPIT) to continue building relationships with District Attorneys, APS, and local law enforcement across the state.

**Strategy 1-5.4:** Develop and provide training and training resources for those involved in elder abuse, neglect, and exploitation prevention, investigation, and prosecution in partnership with stakeholders.

Measures / outcomes

- a) By 2022, form at least one (1) new ongoing partnership among agencies involved in elder abuse, neglect, and exploitation prevention.

**Objective 1-6:** Ensure access to a comprehensive, sustainable set of quality services/interventions that are dementia-capable and provide innovative services to the population with dementia and their caregivers.

**Strategy 1-6.1:** Ensure Tennessee has a sustainable dementia-capable service system beyond the Alzheimer's Disease Program Imitative (ADPI) grant period (Grant end date May 31, 2022).

**Strategy 1-6.2:** Ensure all target districts are prepped on maintenance and continuation of TN M.I.N.D.S. (Music Intervention Navigating Dementia Symptoms).

Strategy 1-6.3: Continue to promote best practices and evidence informed dementia capable services

Measures / outcomes

- a) By May 2022, identify 1 TCAD staff member responsible for updating the ADPI / Dementia-Capable website
- b) By May 2022, formalize plan to maintain dementia trainings via a dedicated website or training portal
- c) By May 2022, Create and distribute TN M.I.N.D.S. toolkit to all 9 districts
- d) By May 2022, Train 5 target districts to provide TN M.I.N.D.S. volunteer training
- e) By May 2022, educate all 9 districts on how to use OAA funding to continue Powerful Tools for Caregivers to continue TN M.I.N.D.S.
- f) By August 2022, review and incorporate data from Vanderbilt University Medical Center - Center for Quality Aging (VUMC-CQA) into dementia-capable program guidelines
- g) By December 2022, incorporate dementia-capability measures into SUA quality improvement and monitoring forms"

**Objective 1-7:** Identify and implement strategies to improve cost efficiency for congregate and home delivered meals programs

**Strategy 1-7.1:** Continue to encourage use of alternative meal providers to improve access to meals, client choice and expanded capacity to serve in both urban and rural areas.

**Strategy 1-7.2:** Identify emergency planning resources, and capabilities within the current nutrition program structure.

**Strategy 1-7.3:** Identify alternative food suppliers for drop ship frozen meals, and hot meals that could be used in an emergency basis

**Strategy 1-7.4:** Increase and expand resources for nutrition program volunteers

**Strategy 1-7.5:** Research and Identify whether the current Nutrition program screening tool is sufficient to the changing needs of older adults in TN.

Measures / outcomes

- a) By July 2023 compile ""Small Business Initiative"" Start-Up and Best Practices Guide
- b) Identify emergency planning resources, and capabilities within the current nutrition program structure
- c) By December 2022, Create a database of backup nutrition suppliers in case of emergency
- d) December 2022, develop written a plan nutrition contracting during emergency declarations
- e) By December 2022, Offer additional training opportunities to nutrition volunteers
- f) By December 2024, Develop and distribute a Nutrition Volunteer Handbook template that can be used by subcontractors.
- g) By June 2022, recruit dietician intern to assist with analysis of nutrition screening tools
- h) By December 2023, Complete analysis of currently available nutrition screening tools that include elements of measure for social isolation and support systems for congregate nutrition clients

- i) By June 2024, fully adopt use of new congregate screening tool and implement any necessary changes to Independent Living Assessment for home delivered clients."

**Objective 1-8.** Increase access to services and supports to caregivers in effort to assist family caregivers to continue providing care for their care receivers.

**Strategy 1-8.1:** Implement quarterly phone calls with AAAD staff who oversee the National Family Caregiver Support Program to discuss specific caregiving issues and how to best support the needs of caregivers facing these issues.

**Strategy 1-8.3:** Continued partnerships with the Tennessee Respite Coalition (TRC) to ensure that the National Family Caregiver Support Program focuses on the needs of the caregivers and include the strategies developed in the Respite Strategic Plan to expand the availability of respite and support to caregivers.

**Strategy 1-8.4:** Partner with the Tennessee Respite Coalition (TRC) in the creation and development of an app that will make accessing TRC respite services easier to caregivers in Tennessee.

**Strategy 1-8.5:** Research and Identify whether the current Nutrition program screening tool is sufficient to the changing needs of older adults in TN.

**Strategy 1-8.6:** Explore opportunities for virtual access to evidence-based programs for caregivers

**Strategy 1-8.7:** Increase cross referrals by Caregiver Support staff to Evidence Based Programs.

**Strategy 1-8.2:** Explore innovative ideas and models to support family caregivers specifically around targeted outreach and respite services in an effort to serve more caregivers and reduce the waiting list.

Measures / outcomes

- a) By 2023, work with partner organizations to implement the strategic plan developed through the Lifespan Respite federal grant
- b) Conduct annual monitoring of the National Family Caregiver Support Program using standardized monitoring tools, review monthly IFR, and monthly reporting by AAAD.
- c) By 2024, increase Caregiver Support referrals to evidence-based programs by 5%."

**Objective 1-9.** Increase the availability and sustainability of evidence-based programs that improve quality of life, health, level of independence, and overall well-being

**Strategy 1-9.1:** Foster partnerships that promote access, funding, and development of evidence-based health promotion programs

**Strategy 1-9.2:** Research additional evidence-based programming for statewide implementation with emphasis on falls prevention

**Strategy 1-9.3:** Disseminate information about variety of choices in in evidence-based programming

**Strategy 1-9.4:** Explore the use of technology to implement evidence-based programming through virtual platforms.

**Strategy 1-9.5:** Provide annual training to aging network staff on evidence-based programs and data/reporting

Measures / outcomes

- a) By 2025, add three (3) new partners assisting in obtaining funding for evidence-based programs for adults 60 and over and adults with disabilities.
- b) Annually, increase by one (1) percent statewide the number of consumers who participate in evidence-based programs as evidenced by the SAMS database
- c) By 2023, increase the use of technology for the implementation of providing evidence-based programs through virtual platforms."

Goal 2. Ensure that programs and services funded by **state and other appropriations** are cost effective and meet best practices

**Objective 3-1.** Ensure access and efficiency in the OPTIONS program (home and community-based services)

**Strategy 2-1.1:** Review and revise the RFP process for service providers based on the contract language and policies and procedures.

**Strategy 2-1.2:** Review options for continued support and funding of the OPTIONS program to address the needs the individuals on the waiting list for services

**Strategy 2-1.3:** Conduct a feasibility study to look at using OPTIONS funds to support individuals with Alzheimer's disease.

Measures / outcomes

- a) By December 2022, TCAD will convene work group to standardize and update language for the 4-year Area Plan RFPs
- b) By June of each state fiscal year, do an analysis of the OPTIONS spending and establish goals for AAADs to ensure that fund will be expended each fiscal year and individuals are receiving services.
- c) By December 2022, establish a work group to look at the feasibility of expanding the OPTIONS program to include individuals with Alzheimer's disease.

**Objective 2-2.** Continue the Public Guardianship for the Elderly Program to assist those referred by the Court who are unable to manage healthcare and/or financial decisions

**Strategy 2-2.1:** Increase public awareness of the Public Guardianship Program.

**Strategy 2-2.2:** Increase public awareness of the requirements of conservatorships and availability of powers of attorney

**Strategy 2-2.3:** Redesign Public Guardianship Policies.

Measures / outcomes

- a) By September 2025, meet with Chancellors and members of the Bar to discuss the purpose and goals of the Public Guardianship program and thus increase the number of vulnerable clients helped by the program.
- b) By December 2022, promulgate rules to take the place of Public Guardianship policies.
- c) By January 2023, ensure rules are available on TCAD website to further assist in the goal of public awareness of the program.
- d) By December 2025, work with interested parties and older adults to increase awareness and understanding of POAs
- e) By December 2022, develop and train on when conservatorships and powers of attorneys are needed and how to get them
- f) By December 2021, develop literature about the difference between a power of attorney and conservatorship

**Objective 2-3.** Use standardized tools for information gathering, data analysis, and reporting to evaluate activities provided with state allocations.

**Strategy 2-3.1:** Assure provider agencies' compliance with federal and state regulations, contractual agreements, and TCAD program policies.

**Strategy 2-3.2:** Ensure that services are provided at an acceptable level of quality and provider agencies continually strive to maintain or improve their services.

**Strategy 2-3.3:** Ensure that necessary safeguards are established to protect and ensure the health, safety, welfare, and satisfaction of participants.

**Strategy 2-3.4:** Ensure establishment of an ongoing evaluation process in which all entities, including TCAD, AAADs, provider agencies and participants play a vital role ensuring individual access, person-centered service planning and delivery, provider agency capacity and capabilities, client safeguards, client rights and responsibilities, participant outcomes are satisfactory, and system performance.

**Strategy 2-3.5:** Ensure that an individual receives appropriate, effective, and efficient service which allows the individual to retain or achieve his/her optimal level of independence.

**Strategy 2-3.6:** Ensure financial accountability for funds expended through state resources including collection of client liability and documentation of cost of services rendered. Including protecting public funds from waste, fraud, and abuse.

Measures / outcomes

- a) Ensure that TCAD State allocations are serving the appropriate number of consumers as evidenced by AAAD contract scope of service outlining performance measures-based unit cost

**Goal 3. Pursue funding, strategies, and partnerships with aging network, community-based organizations, local governments, state legislature, healthcare providers, and state departments in order to advocate to reduce the gaps in services identified in the statewide needs assessment.**

**Objective 3-1.** Collaborate with other State agencies and the Aging Network to develop Elder Abuse Prevention practices.

**Strategy 3-1.1:** Follow-through with Commitments to the Legislative Elder Abuse Task Force recommendations

**Strategy 3-1.2:** Continue to lead and provide technical assistance to the Statewide Elder Abuse Coordinating Coalition.

Measures / outcomes

- a) By January 2022, submit to state legislature the report that identifies the impact of financial exploitation of older adults, review best practices, and include recommendations to address gaps in service"

**Objective 3-2:** Work with partners to increase access to mental health information and services

**Strategy 3-2.1:** Review and revise current program assessments to include the use of standardized behavioral health assessment protocols and tools where appropriate

**Strategy 3-2.2:** Working with partner agencies, offer older adult specific Question, Persuade, Refer (QPR) Trainings to all program staff and program volunteers annually.

**Strategy 3-2.3:** Offer workplace suicide prevention training to all aging network staff annually.

**Strategy 3-2.4:** Increase awareness of mental health services for older adults.

**Strategy 3-2.5:** Implement a standardized mental health service guide in all volunteer program guides

**Strategy 3-2.6:** Increase the number of aging network staff who have received Mental Health Training

Measures / outcomes

- a) Each year participate in meetings, events, and/or webinars to related to mental health services for older adults.
- b) By July 2022, compile list of current programs and services available for mental health, substance abuse, and/or suicide prevention.
- c) By July 2023, publish list of current programs and services on website.
- d) By December 2024, market/promote list of current programs and services to increase access and communication.
- e) Increase the number of aging network staff who have received Mental Health Training by 10% over the baseline annually.

**Objective 3-3.** Participate in and provide administrative support for Tennessee Palliative Care and Quality of Life Council

**Strategy 3-3.1:** Continually assess the current status of palliative care in the state and to review the barriers that exist that prevent such care from being obtained and utilized by the people who could benefit from such care

**Strategy 3-3.2:** Participate in palliative care advisory council meetings no less than twice yearly

Measures / outcomes

- a) Annually by January 15th, submit to state legislature report that addresses barriers to palliative care access, analyzes service utilization data, and provides recommendations and best practices to address gaps in service"

**Objective 3-4.** Strengthen partnerships to improve transportation services for Older Tennesseans

**Strategy 3-4.1:** Participate in special committee to study improvement of transportation services as established through Tennessee general assembly

**Strategy 3-4.2:** Support and provide technical assistance in creating community-based, volunteer transportation programs.

Measures / outcomes

- a) Each year, participate in statewide workgroup stakeholder meetings and disseminate
- b) pertinent information to partners.
- c) By Dec 2023, host (1) webinar to current volunteer transportation programs to hear updates and provide overview of best practices.
- d) By July 2024, publish volunteer transportation toolkit on website.

**Objective 3-5.** Increase public awareness and strategies to alleviate economic insecurity among older Tennesseans

**Strategy 3-5.1:** Increase capacity to assist in reducing economic insecurity through benefits outreach and counseling.

**Strategy 3-5.2:** Develop documentation and advocacy strategy concerning economic insecurity among older adults in Tennessee.

**Strategy 3-5.3:** Form partnerships throughout the state to address issues surrounding economic insecurity.

**Strategy 3-5.4:** Conduct outreach and training to adults with disabilities and adults ages 50 and older on financial planning for the future.

Measures / outcomes

- a) By 2022, formalize one partnership to address economic security among older Tennesseans
- b) By 2024, conduct outreach and training on financial planning for the future

**Objective 3-6.** Working with partners, improve quality of life and care for long-term residents including those with ADRD in Tennessee nursing homes

**Strategy 3-6.1:** Train care professionals and volunteers on setting up individualized music playlists.

**Strategy 3-6.2:** Incorporate individualized music into each resident's individual care plan notes after their playlist has been created.

**Strategy 3-6.3:** Increase access to activities that engage long-term care residents and enhance person-centered care by staff

**Strategy 3-6.4:** Offer free one-time arts and music program for all residents in participating nursing homes.

Measures / Outcomes

- a) By June 2022 improve the quality of life and care for 2,205 residents including those living with dementia
- b) By June 2022, implement Tennessee persons centered music program in 147 nursing homes across Tennessee

**Objective 3-7.** Collaborate with other State agencies and the Aging Network to develop and promote livable communities for older Tennesseans.

**Strategy 3-7.1:** Identify best practices/standards for livability, promote community self assessment, and engage local leaders in conducting the self-assessment.

**Strategy 3-7.2:** Work with partner agencies to advocate for livable communities

Measures / outcomes

- a) Each year participate in meetings, events, and/or webinars to related to livability for older adults.
- b) By July 2023, provide best practices for livability and link to self-assessment to local leaders.
- c) By July 2024, identify (1) new partner agency advocating for livable communities

**Objective 3-8.** Address the unmet needs, both emergent and ongoing, of elder and vulnerable adult victims of crime across Tennessee through the Collaborative Response to Elder and Vulnerable Adult Abuse (CREVAA) Program.

**Strategy 3-8.1:** Sub-contract with quasi-government entities, non-profit, and/or aging service providers who will provide advocates to assist victims, work with stakeholders, including Adult Protective Services (APS), District Attorneys (DA's), law enforcement, and aging service providers to provide services to clients, and to provide education and outreach in the community

**Strategy 3-8.2:** Receive referrals from several sources, including VAPIT teams, and will identify elders and vulnerable adult victims of crime referred to the CREVAA program. CREVAA Program Advocates will seamlessly locate, coordinate, and ensure the provisions of victim-centered services and resources to victims of crime across Tennessee.

**Strategy 3-8.3:** Provide training and technical assistance to new and existing advocates and their respective agencies

**Strategy 3-8.4:** Provide education and outreach about the CREVAA program as well as elder and vulnerable adult abuse, neglect, and exploitation to other state agencies, the general public, caregivers, stakeholders, and service providers.

Measures / Outcomes

a) Annually research and analyze demographic data for each region of the state to identify vulnerable populations and develop outreach plans in each region, during the Annual Spring Training conducted in July, to better serve those populations.

b) By June 1st of each year, host CREVAA training for advocates and stakeholders.

c) Continue to develop education and outreach for the CREVAA program, for elder and vulnerable adult abuse and prevention of abuse to the general public, caregivers, stakeholders, and service

**Objective 3-9.** Develop partnerships and provide awareness and training to ensure that services are provided to older individuals and adults with disabilities in underserved communities.

**Strategy 3-9.1** Analyze updated population data to ensure services are being targeted to meet the needs of older adults

**Strategy 3-9.2:** Translate outreach tools to multiple languages and ensure circulation in non-English speaking communities.

**Strategy 3-9.3:** Increase outreach and communication efforts aimed at non-English speaking populations

**Strategy 3-9.4:** Consider development of any culturally appropriate outreach efforts that could be most effective for non-English speaking populations.

**Strategy 3-9.5:** Promote policies and initiatives that improve minority health

**Strategy 3-9.6:** Encourage public awareness of health issues affecting special populations including low-income, underserved, rural, and minorities.

**Strategy 3-9.7:** Continue to monitor (through reported data) participation in TCAD directed programs to ensure that participants in services represent the general population of the area.

**Strategy 3-9.8:** Review Area Agency Plans to ensure that agencies are identifying and addressing disparities in service.

**Strategy 3-9.9:** Ensure Aging Network has accessible and available trainings on OAA and targeting services to the most at-risk and underserved older Tennesseans.

**Strategy 3-9.10:** Assertively seek opportunities to meet with diverse groups, listen and provide information about services that are available through TCAD.

Measures / outcomes

a) By December 2022, by analyze 2020 Census data to ensure services are being adequately targeted to address the needs of older Tennesseans in rural areas

b) Increase the number of contacts to non-English speaking communities by 1% annually

c) Annually by September 31, conduct at least one marketing campaign to OAA target populations

**Objective 3-10.** Working with partners, increase public awareness and strategies to alleviate social isolation among older Tennesseans and persons with disabilities

**Strategy 3-10.1:** Research and disseminate innovative and best practices for addressing social isolation

**Strategy 3-10.2:** Increase access to telephone reassurance programs

**Strategy 3-10.3:** Use informed collaborative resources to socially connect with caregivers and older adults through supporting mental health and prevent social isolation.

**Strategy 3-10.4:** Increase weekly check-in calls to older Tennesseans and caregivers.

**Strategy 3-10.5:** Expand outreach efforts to ensure caregivers and older adults are knowledgeable and able to access relevant programs to address social isolation

**Strategy 3-10.6:** Maintain training and develop materials to increase topics for volunteers to encourage social connection

**Strategy 3-10.7:** Coordinate marketing strategies by increasing outreach and promotional tools to increase volunteer participation.

**Strategy 3-10.8:** Increase access to technology for communication and social connectedness

Measures / Outcomes

a) By July 2022, publish toolkit for telephone reassurance best practices

b) By July 2021, staff will analyze quarterly data from program support requests in Care through Conversation Program

b) By August 2021, evaluate outreach and marketing finding ways of continuous quality improvement

b) By December 2021, obtain a quality improvement survey from volunteers to maintain dialog and information support.

**Objective 3-11.** Work with partners to increase access services through technology including telehealth

**Strategy 3-11.1:** Assess current status of technology-based programs within Tennessee's aging network

**Strategy 3-11.2:** Identify partners to increase access through technology and telehealth

**Strategy 3-11.3:** Research and disseminate best practices for address social determinants of health through technology and telehealth

**Strategy 3-11.4:** Research framework for streamlining enrollment referrals across programs

**Strategy 3-11.5:** Identify training opportunities to teach older adults about using technology

**Strategy 3-11.6:** Identify best practices to increase access to services through technology and telehealth in rural areas

Measures / Outcomes

a) By September 2022, research and publish best practices for implementation of technology lending library

b) By December 2022, partner with AAADs to assess use of technology-based programs within aging network program

- c) By December 2023, host a conference or meeting with aging network partners on use of teleservices within the aging network and collaborate on best practices and challenges
- d) By 2023, TCAD staff will compile a list of potential technology-based programs eligible for OAA funding, including evidence-based programs
- e) By 2023, identify at least 2 partner agencies to work with in implementing older adult technology-based programming
- f) By 2024, publish information on TCAD website with links to educational information sessions on technology assistance and funding opportunities"

Goal 4: Ensure that Tennesseans have access to information about aging issues, programs, and services in order to be able to make informed decisions about living healthy and independent for as long as possible and about planning for their financial futures, healthcare access, and long-term care.

**Objective 4-1.** Through Statewide Insurance Assistance Program (SHIP), provide objective one-on-one counseling, and assistance on Medicare, Medicaid, low-income assistance, and all other health insurances for consumers with Medicare, their adult children, their caregivers, and their advocates to include providing public and media outreach.

**Strategy 4-1.1:** Conduct Medicare training for state employees. "

**Strategy 4-1.2:** Maintain a cadre of trained SHIP counselors and volunteers in each district

**Strategy 4-1.3:** Disseminate information about Medicare and related insurance benefits that help to maintain healthy aging.

**Strategy 4-1.4:** Design and implement community outreach to individuals eligible for Medicare with emphasis on targeting hard to reach populations such as disabled, Native American, low income, rural, and native non-English speaking populations.

**Strategy 4-1.5:** Assist beneficiaries with finding affordable prescription drugs plans; screen and provide application assistance for low income subsidy or Medicare Savings Program.

**Strategy 4-1.6:** Ensure that all SHIP staff and volunteers receive annual training to update the information needed to provide accurate and effective counseling services

Measures / outcomes

- a) Annually research and analyze demographic data for each region of the state to identify vulnerable populations and develop outreach plans in each region, during the Annual Spring Training conducted in April, to better serve those populations.
- b) By June 1st of each year, host Medicare training for state employees.
- c) Continue to develop healthy aging social media campaign focused on Medicare and related insurance benefits, with emphasis on target our hard to reach populations, and submit at least 2 posts each month to be uploaded to TCAD's social media and/or website.
- d) 100% of staff and volunteers will complete update training and testing yearly.
- e) By the end of each grant cycle, reach a minimum of 6% of Tennessee's total Medicare-eligible population."

**Objective 4-2.** Direct the attention of local and state key decision makers, as well as the public, to the needs of seniors in Tennessee through increased communication and advocacy via publications and online resources.

**Strategy 4-2.1:** Direct attention to issues affecting older adults through outreach using “The State of Aging in Tennessee: A County by County Snapshot”.

**Strategy 4-2.2:** Organize and lead statewide social media campaigns to direct attention to and promote healthy living among older adults.

**Strategy 4-2.3:** Host statewide webinars to review relevant data on aging issues.

**Strategy 4-2.4:** Continue to update and make improvements to the TCAD webpage.

Measures / outcomes

a) Host (1) event to promote State of Aging County by County.

b) Annually by December 31, host at least 1 statewide webinar to review relevant data on aging issues."

**Objective 4-3.** Design and oversee a resource mapping of all federal and state funding sources and funding streams as well as resources for nonprofit and other nongovernmental entities that support the health, safety, and welfare of older adults in this state who are sixty (60) years of age or older.

**Strategy 4-3.1:** Compile inventory of all federal and state funding sources that support these older adults in Tennessee

**Strategy 4-3.2:** Compile inventory of all state, federal, or government subsidized services and programs offered to these older adults in this state, set out by program, target population, geographical region, agency, or any other grouping that would assist the general assembly in determining whether there are overlapping programs that lead to duplication within the state, gaps in service delivery, and any administrative inefficiencies

**Strategy 4-3.3:** Compile inventory of the funds for older adults for which Tennessee may be eligible, but is currently not receiving or using, and the reasons why the funds are not being used

Measures / outcomes

a) By August 1 annually, submit formal data request to partner agencies and organizations

b) By December 15 annually, submit a full resource mapping report to the State Legislature"

**Objective 4-4.** Expand the availability of relevant data for SUA staff, AAADs, Commission, and Legislature for the purposes of planning, program development, and advocacy.

**Strategy 4-4.1:** Ensure stakeholders have timely access to relevant demographic estimates by county

**Strategy 4-4.2:** Provide annual update or policy brief highlighting top issues identified in Statewide needs assessment

**Strategy 4-4.3:** Ensure partner organizations have access to relevant data as needed for application of grants or federal funding

**Strategy 4-4.4:** Increase visibility of data through social and electronic media

**Strategy 4-4.5:** Develop a robust report library

Measures / outcomes

- a) By December 2022, compile and distribute updated 2020 Census demographic estimates to all relevant stakeholders
- b) Annually by March 1, analyze and distribute updated American Community Survey demographic estimates to all relevant stakeholders
- c) Annually by December 31, release focus publication on at least 1 top issue identified in the Statewide Needs Assessment
- d) Increase engagement with data related posts through social media by 1% annually
- e) By 2024, develop dedicated webpage with all published reports."

## Chapter 5 – Outcomes and Performance Measures

As the number of adults ages 60 and older continues to grow, Tennessee must have a State Plan that utilizes all available resources, including both people and money, in the most efficient, effective, and equitable way possible. Such a plan will require that solutions are:

- Collaborative – build on new and existing partnerships
- Diverse - provide a greater variety of services and programs to meet the needs of all populations
- Streamlined – create easier access to services and programs
- Data-driven - use data to inform decisions and track successes, and;
- Anticipatory - address both immediate needs of older adults and the needs of future older adults

However, this is only the starting point for TCAD. TCAD will continue to engage policy makers in decision-making processes that elevate the needs of adults age 60 and over and adults with disabilities to the forefront while recognizing the strengths and contributions of this population. TCAD will also continue to seek state and federal funding aimed at addressing the need for services. TCAD will continue to strive to maintain and expand quality services, programs, and staff.

The goals, objectives, strategies, and performance measures have been developed for the **Tennessee State Plan on Aging for October 1, 2021 through September 30, 2025** utilizing the following statewide surveys conducted from November 2020 through January 2022; TCAD's Strategic Plan (approved by the Commission Members), and the Public Hearing to be held May 28<sup>th</sup>, 2021.

The following are the goals, objectives, strategies, and performance measures for the Tennessee State Plan on Aging. These are based on funding sources (Older Americans Act and State appropriations) and a multifaceted approach of reducing the many unmet needs of older adults through advocacy and increased awareness.

Goal 1: Ensure that programs and services funded with federal appropriations including the Older Americans Act are cost effective and meet best practices

**Objective 1-1:** Ensure access and efficiency to home and community-based services

**Strategy 1-1.1:** Review and revise the RFP process for service providers based on the revised contract language and policies and procedures.

**Strategy 1-1.2:** Review the III-B in-home services programs to ensure that they are administered in the most cost-effective manner and best meets the needs of individuals receiving services.

Measures / outcomes

- c) By 2022, TCAD will convene work group to standardize and update language for the 4-year Area Plan RFPs
- d) Each fiscal year, TCAD staff will review plans submitted by Area Agencies to ensure that the funds are maximized to ensure the in-home needs of older adults are met and they are receiving services.

**Objective 1-2:** Provide Information and Assistance services that are easily accessible through telephone, email, and text messages.

**Strategy 1-2.1:** Create and maintain Statewide Resource Directory

**Strategy 1-2.2:** Expand and improve technology to create a more streamlined I&A system

**Strategy 1-2.3:** Continue to ensure that all I&A staff are AIRS certified

Measures / outcomes

a) By 2023, TCAD will research technology and best practices regarding efficient and effective I&A systems

b) All eligible I&A staff will have current AIRS certification at each annual review

**Objective 1-3:** Leverage Older Americans Act transportation funding to expand community transportation resources

**Strategy 1-3.1:** Compile database of transportation programs and mobility options.

**Strategy 1-3.2:** Collaborate with partner agencies to bolster existing transportation infrastructure using Older Americans Act funds.

Measures / outcomes

a) By December of each year, ensure annual update of Statewide Transportation Map to ensure better coordination of transportation programs, mobility options, and services for the aging and disability population

**Objective 1-4.** Identify and implement strategies to ensure that the Ombudsman program is more effective and efficient in advocating for all patients in all long-term care facilities.

**Strategy 1-4.1:** Ensure that the data from the Ombudsmanager database is accurately recorded and in a timely manner and the data used to evaluate and improve the program.

**Strategy 1-4.2:** Ensure that all Ombudsman federal and state reports are submitted annually as required.

**Strategy 1-4.3:** Evaluate how to distribute funding for the Ombudsman program more efficiently and effectively taking into consideration the location of the long-term care beds.

**Strategy 1-4.4:** Provide monitoring and technical assistance for District Ombudsman programs to ensure that programs are meeting the goals and guidelines.

**Strategy 1-4.5:** Update the Volunteer Ombudsman Representative (VOR) manual and training materials to maintain the most current data available.

**Strategy 1-4.6:** Conduct volunteer on-line and face-to-face training in each district annually led by the State Long-term Care Ombudsman.

**Strategy 1-4.7:** Continue to stay updated on the emerging Ombudsman issues such as the role of the Ombudsman program in the Managed Long-Term Care Support Services.

**Strategy 1-4.8.** Revise, if needed, the contract scope of service based on the revised policies and procedures for the Ombudsman program.

**Strategy 1-4.9:** Participate in Regional Survey Team meetings to build the relationship with the Department of Health.

Measures / outcomes

i) 100% of Ombudsmanager reports will be evaluated each quarter to ensure that all appropriate data has been collected.

- j) By December 15 each year each district Ombudsman will be required to submit his/her annual report to the State LTC Ombudsman to ensure that the Federal Annual report is submitted on time
- k) State LTC Ombudsman will meet with the Financial Director on an annual basis to review the budget and determine funding for the program based on the amount and location of long-term beds.
- l) Each year the State LTC Ombudsman will make a visit to each district every year to meet with the volunteers, conduct trainings, and to ensure that all volunteers and District Ombudsman staff have the most current information.
- m) The State LTC Ombudsman will attend the annual State LTC Ombudsman conference annually, and participate in calls and webinars from ACL, and other agencies to maintain the most current information
- n) All District LTC Ombudsman will attend quarterly Regional Survey Team meetings for the grand region where their district is located.
- o) The State LTC Ombudsman will attend all Regional Survey Team meetings to guide the program and facilitate the partnership.
- p) All trainings, conferences, calls, webinar, and meetings will be documented in Ombudsmanager.

**Objective 1-5.** Support and enhance multi-disciplinary responses to elder abuse, neglect, and exploitation involving Adult Protective Services (APS), Ombudsman, legal assistance, law enforcement, healthcare professionals, and financial institutions.

**Strategy 1-5.1:** Enhance the partnership with APS to build awareness of APS services and how citizens should contact APS for needed services.

**Strategy 1-5.2:** Identify and replicate successful public outreach campaigns/education and promote, and conduct public outreach, education, and awareness campaigns to reduce and prevent elder abuse, neglect, and exploitation.

**Strategy 1-5.3:** Provide input and assistance (when requested) with Vulnerable Adult Protective Investigative Teams (VAPIT) to continue building relationships with District Attorneys, APS, and local law enforcement across the state.

**Strategy 1-5.4:** Develop and provide training and training resources for those involved in elder abuse, neglect, and exploitation prevention, investigation, and prosecution in partnership with stakeholders.

Measures / outcomes

- b) By 2022, form at least one (1) new ongoing partnership among agencies involved in elder abuse, neglect, and exploitation prevention.

**Objective 1-6:** Ensure access to a comprehensive, sustainable set of quality services/interventions that are dementia-capable and provide innovative services to the population with dementia and their caregivers.

**Strategy 1-6.1:** Ensure Tennessee has a sustainable dementia-capable service system beyond the Alzheimer's Disease Program Imitative (ADPI) grant period (Grant end date May 31, 2022).

**Strategy 1-6.2:** Ensure all target districts are prepped on maintenance and continuation of TN M.I.N.D.S. (Music Intervention Navigating Dementia Symptoms).

Strategy 1-6.3: Continue to promote best practices and evidence informed dementia capable services

Measures / outcomes

- h) By May 2022, identify 1 TCAD staff member responsible for updating the ADPI / Dementia-Capable website
- i) By May 2022, formalize plan to maintain dementia trainings via a dedicated website or training portal
- j) By May 2022, Create and distribute TN M.I.N.D.S. toolkit to all 9 districts
- k) By May 2022, Train 5 target districts to provide TN M.I.N.D.S. volunteer training
- l) By May 2022, educate all 9 districts on how to use OAA funding to continue Powerful Tools for Caregivers to continue TN M.I.N.D.S.
- m) By August 2022, review, and incorporate data from Vanderbilt University Medical Center - Center for Quality Aging (VUMC-CQA) into dementia-capable program guidelines
- n) By December 2022, incorporate dementia-capability measures into SUA quality improvement and monitoring forms"

**Objective 1-7:** Identify and implement strategies to improve cost efficiency for congregate and home delivered meals programs

**Strategy 1-7.1:** Continue to encourage use of alternative meal providers to improve access to meals, client choice and expanded capacity to serve in both urban and rural areas.

**Strategy 1-7.2:** Identify emergency planning resources, and capabilities within the current nutrition program structure.

**Strategy 1-7.3:** Identify alternative food suppliers for drop ship frozen meals, and hot meals that could be used in an emergency basis

**Strategy 1-7.4:** Increase and expand resources for nutrition program volunteers

**Strategy 1-7.5:** Research and Identify whether the current Nutrition program screening tool is sufficient to the changing needs of older adults in TN.

Measures / outcomes

- j) By July 2023 compile ""Small Business Initiative"" Start-Up and Best Practices Guide
- k) Identify emergency planning resources, and capabilities within the current nutrition program structure
- l) By December 2022, Create a database of backup nutrition suppliers in case of emergency
- m) December 2022, develop written a plan nutrition contracting during emergency declarations
- n) By December 2022, Offer additional training opportunities to nutrition volunteers
- o) By December 2024, Develop and distribute a Nutrition Volunteer Handbook template that can be used by subcontractors.
- p) By June 2022, recruit dietician intern to assist with analysis of nutrition screening tools
- q) By December 2023, Complete analysis of currently available nutrition screening tools that include elements of measure for social isolation and support systems for congregate nutrition clients

- r) By June 2024, fully adopt use of new congregate screening tool and implement any necessary changes to Independent Living Assessment for home delivered clients."

**Objective 1-8.** Increase access to services and supports to caregivers in effort to assist family caregivers to continue providing care for their care receivers.

**Strategy 1-8.1:** Implement quarterly phone calls with AAAD staff who oversee the National Family Caregiver Support Program to discuss specific caregiving issues and how to best support the needs of caregivers facing these issues.

**Strategy 1-8.3:** Continued partnerships with the Tennessee Respite Coalition (TRC) to ensure that the National Family Caregiver Support Program focuses on the needs of the caregivers and include the strategies developed in the Respite Strategic Plan to expand the availability of respite and support to caregivers.

**Strategy 1-8.4:** Partner with the Tennessee Respite Coalition (TRC) in the creation and development of an app that will make accessing TRC respite services easier to caregivers in Tennessee.

**Strategy 1-8.5:** Research and Identify whether the current Nutrition program screening tool is sufficient to the changing needs of older adults in TN.

**Strategy 1-8.6:** Explore opportunities for virtual access to evidence-based programs for caregivers

**Strategy 1-8.7:** Increase cross referrals by Caregiver Support staff to Evidence Based Programs.

**Strategy 1-8.2:** Explore innovative ideas and models to support family caregivers specifically around targeted outreach and respite services to serve more caregivers and reduce the waiting list.

Measures / outcomes

- d) By 2023, work with partner organizations to implement the strategic plan developed through the Lifespan Respite federal grant
- e) Conduct annual monitoring of the National Family Caregiver Support Program using standardized monitoring tools, review monthly IFR, and monthly reporting by AAAD.
- f) By 2024, increase Caregiver Support referrals to evidence-based programs by 5%."

**Objective 1-9.** Increase the availability and sustainability of evidence-based programs that improve quality of life, health, level of independence, and overall well-being

**Strategy 1-9.1:** Foster partnerships that promote access, funding, and development of evidence-based health promotion programs

**Strategy 1-9.2:** Research additional evidence-based programming for statewide implementation with emphasis on falls prevention

**Strategy 1-9.3:** Disseminate information about variety of choices in in evidence-based programming

**Strategy 1-9.4:** Explore the use of technology to implement evidence-based programming through virtual platforms.

**Strategy 1-9.5:** Provide annual training to aging network staff on evidence-based programs and data/reporting

Measures / outcomes

- d) By 2025, add three (3) new partners assisting in obtaining funding for evidence-based programs for adults 60 and over and adults with disabilities.
- e) Annually, increase by one (1) percent statewide the number of consumers who participate in evidence-based programs as evidenced by the SAMS database
- f) By 2023, increase the use of technology for the implementation of providing evidence-based programs through virtual platforms."

Goal 2. Ensure that programs and services funded by **state and other appropriations** are cost effective and meet best practices

**Objective 3-1.** Ensure access and efficiency in the OPTIONS program (home and community-based services)

**Strategy 2-1.1:** Review and revise the RFP process for service providers based on the contract language and policies and procedures.

**Strategy 2-1.2:** Review options for continued support and funding of the OPTIONS program to address the needs the individuals on the waiting list for services

**Strategy 2-1.3:** Conduct a feasibility study to look at using OPTIONS funds to support individuals with Alzheimer's disease.

Measures / outcomes

- d) By December 2022, TCAD will convene work group to standardize and update language for the 4-year Area Plan RFPs
- e) By June of each state fiscal year, do an analysis of the OPTIONS spending and establish goals for AAADs to ensure that fund will be expended each fiscal year and individuals are receiving services.
- f) By December 2022, establish a work group to look at the feasibility of expanding the OPTIONS program to include individuals with Alzheimer's disease.

**Objective 2-2.** Continue the Public Guardianship for the Elderly Program to assist those referred by the Court who are unable to manage healthcare and/or financial decisions

**Strategy 2-2.1:** Increase public awareness of the Public Guardianship Program.

**Strategy 2-2.2:** Increase public awareness of the requirements of conservatorships and availability of powers of attorney

**Strategy 2-2.3:** Redesign Public Guardianship Policies.

Measures / outcomes

- g) By September 2025, meet with Chancellors and members of the Bar to discuss the purpose and goals of the Public Guardianship program and thus increase the number of vulnerable clients helped by the program.
- h) By December 2022, promulgate rules to take the place of Public Guardianship policies.
- i) By January 2023, ensure rules are available on TCAD website to further assist in the goal of public awareness of the program.
- j) By December 2025, work with interested parties and older adults to increase awareness and understanding of POAs
- k) By December 2022, develop and train on when conservatorships and powers of attorneys are needed and how to get them
- l) By December 2021, develop literature about the difference between a power of attorney and conservatorship

**Objective 2-3.** Use standardized tools for information gathering, data analysis, and reporting to evaluate activities provided with state allocations.

**Strategy 2-3.1:** Assure provider agencies' compliance with federal and state regulations, contractual agreements, and TCAD program policies.

**Strategy 2-3.2:** Ensure that services are provided at an acceptable level of quality and provider agencies continually strive to maintain or improve their services.

**Strategy 2-3.3:** Ensure that necessary safeguards are established to protect and ensure the health, safety, welfare, and satisfaction of participants.

**Strategy 2-3.4:** Ensure establishment of an ongoing evaluation process in which all entities, including TCAD, AAADs, provider agencies and participants play a vital role ensuring individual access, person-centered service planning and delivery, provider agency capacity and capabilities, client safeguards, client rights and responsibilities, participant outcomes are satisfactory, and system performance.

**Strategy 2-3.5:** Ensure that an individual receives appropriate, effective, and efficient service which allows the individual to retain or achieve his/her optimal level of independence.

**Strategy 2-3.6:** Ensure financial accountability for funds expended through state resources including collection of client liability and documentation of cost of services rendered. Including protecting public funds from waste, fraud, and abuse.

Measures / outcomes

- b) Ensure that TCAD State allocations are serving the appropriate number of consumers as evidenced by AAAD contract scope of service outlining performance measures-based unit cost

**Goal 3. Pursue funding, strategies, and partnerships with aging network, community-based organizations, local governments, state legislature, healthcare providers, and state departments in order to advocate to reduce the gaps in services identified in the statewide needs assessment.**

**Objective 3-1.** Collaborate with other State agencies and the Aging Network to develop Elder Abuse Prevention practices.

**Strategy 3-1.1:** Follow-through with Commitments to the Legislative Elder Abuse Task Force recommendations

**Strategy 3-1.2:** Continue to lead and provide technical assistance to the Statewide Elder Abuse Coordinating Coalition.

Measures / outcomes

- a) By January 2022, submit to state legislature the report that identifies the impact of financial exploitation of older adults, review best practices, and include recommendations to address gaps in service"

**Objective 3-2:** Work with partners to increase access to mental health information and services

**Strategy 3-2.1:** Review and revise current program assessments to include the use of standardized behavioral health assessment protocols and tools where appropriate

**Strategy 3-2.2:** Working with partner agencies, offer older adult specific Question, Persuade, Refer (QPR) Trainings to all program staff and program volunteers annually.

**Strategy 3-2.3:** Offer workplace suicide prevention training to all aging network staff annually.

**Strategy 3-2.4:** Increase awareness of mental health services for older adults.

**Strategy 3-2.5:** Implement a standardized mental health service guide in all volunteer program guides

**Strategy 3-2.6:** Increase the number of aging network staff who have received Mental Health Training

Measures / outcomes

- f) Each year, participate in meetings, events, and/or webinars to related to mental health services for older adults.
- g) By July 2022, compile list of current programs and services available for mental health, substance abuse, and/or suicide prevention.
- h) By July 2023, publish list of current programs and services on website.
- i) By December 2024, market/promote list of current programs and services to increase access and communication.
- j) Increase the number of aging network staff who have received Mental Health Training by 10% over the baseline annually.

**Objective 3-3.** Participate in and provide administrative support for Tennessee Palliative Care and Quality of Life Council

**Strategy 3-3.1:** Continually assess the current status of palliative care in the state and to review the barriers that exist that prevent such care from being obtained and utilized by the people who could benefit from such care

**Strategy 3-3.2:** Participate in palliative care advisory council meetings no less than twice yearly

Measures / outcomes

- b) Annually by January 15th, submit to state legislature report that addresses barriers to palliative care access, analyzes service utilization data, and provides recommendations and best practices to address gaps in service"

**Objective 3-4.** Strengthen partnerships to improve transportation services for Older Tennesseans

**Strategy 3-4.1:** Participate in special committee to study improvement of transportation services as established through Tennessee general assembly

**Strategy 3-4.2:** Support and provide technical assistance in creating community-based, volunteer transportation programs.

Measures / outcomes

- e) Each year, participate in statewide workgroup stakeholder meetings and disseminate
- f) pertinent information to partners.
- g) By Dec 2023, host (1) webinar to current volunteer transportation programs to hear updates and provide overview of best practices.
- h) By July 2024, publish volunteer transportation toolkit on website.

**Objective 3-5.** Increase public awareness and strategies to alleviate economic insecurity among older Tennesseans

**Strategy 3-5.1:** Increase capacity to assist in reducing economic insecurity through benefits outreach and counseling.

**Strategy 3-5.2:** Develop documentation and advocacy strategy concerning economic insecurity among older adults in Tennessee.

**Strategy 3-5.3:** Form partnerships throughout the state to address issues surrounding economic insecurity.

**Strategy 3-5.4:** Conduct outreach and training to adults with disabilities and adults ages 50 and older on financial planning for the future.

Measures / outcomes

- c) By 2022, formalize one partnership to address economic security among older Tennesseans
- d) By 2024, conduct outreach and training on financial planning for the future

**Objective 3-6.** Working with partners, improve quality of life and care for long-term residents including those with ADRD in Tennessee nursing homes

**Strategy 3-6.1:** Train care professionals and volunteers on setting up individualized music playlists.

**Strategy 3-6.2:** Incorporate individualized music into each resident's individual care plan notes after their playlist has been created.

**Strategy 3-6.3:** Increase access to activities that engage long-term care residents and enhance person-centered care by staff

**Strategy 3-6.4:** Offer free one-time arts and music program for all residents in participating nursing homes.

Measures / Outcomes

- f) By June 2022 improve the quality of life and care for 2,205 residents including those living with dementia
- g) By June 2022, implement Tennessee persons centered music program in 147 nursing homes across Tennessee

**Objective 3-7.** Collaborate with other State agencies and the Aging Network to develop and promote livable communities for older Tennesseans.

**Strategy 3-7.1:** Identify best practices/standards for livability, promote community self assessment, and engage local leaders in conducting the self-assessment.

**Strategy 3-7.2:** Work with partner agencies to advocate for livable communities

Measures / outcomes

- d) Each year, participate in meetings, events, and/or webinars to related to livability for older adults.
- e) By July 2023, provide best practices for livability and link to self-assessment to local leaders.
- f) By July 2024, identify (1) new partner agency advocating for livable communities

**Objective 3-8.** Address the unmet needs, both emergent and ongoing, of elder and vulnerable adult victims of crime across Tennessee through the Collaborative Response to Elder and Vulnerable Adult Abuse (CREVAA) Program.

**Strategy 3-8.1:** Sub-contract with quasi-government entities, non-profit, and/or aging service providers who will provide advocates to assist victims, work with stakeholders, including Adult Protective Services (APS), District Attorneys (DA's), law enforcement, and aging service providers to provide services to clients, and to provide education and outreach in the community

**Strategy 3-8.2:** Receive referrals from several sources, including VAPIT teams, and will identify elders and vulnerable adult victims of crime referred to the CREVAA program. CREVAA Program Advocates will seamlessly locate, coordinate, and ensure the provisions of victim-centered services and resources to victims of crime across Tennessee.

**Strategy 3-8.3:** Provide training and technical assistance to new and existing advocates and their respective agencies

**Strategy 3-8.4:** Provide education and outreach about the CREVAA program as well as elder and vulnerable adult abuse, neglect, and exploitation to other state agencies, the general public, caregivers, stakeholders, and service providers.

Measures / Outcomes

a) Annually research and analyze demographic data for each region of the state to identify vulnerable populations and develop outreach plans in each region, during the Annual Spring Training conducted in July, to better serve those populations.

b) By June 1st of each year, host CREVAA training for advocates and stakeholders.

c) Continue to develop education and outreach for the CREVAA program, for elder and vulnerable adult abuse and prevention of abuse to the general public, caregivers, stakeholders, and service

**Objective 3-9.** Develop partnerships and provide awareness and training to ensure that services are provided to older individuals and adults with disabilities in underserved communities.

**Strategy 3-9.1** Analyze updated population data to ensure services are being targeted to meet the needs of older adults

**Strategy 3-9.2:** Translate outreach tools to multiple languages and ensure circulation in non-English speaking communities.

**Strategy 3-9.3:** Increase outreach and communication efforts aimed at non-English speaking populations

**Strategy 3-9.4:** Consider development of any culturally appropriate outreach efforts that could be most effective for non-English speaking populations.

**Strategy 3-9.5:** Promote policies and initiatives that improve minority health

**Strategy 3-9.6:** Encourage public awareness of health issues affecting special populations including low-income, underserved, rural, and minorities.

**Strategy 3-9.7:** Continue to monitor (through reported data) participation in TCAD directed programs to ensure that participants in services represent the general population of the area.

**Strategy 3-9.8:** Review Area Agency Plans to ensure that agencies are identifying and addressing disparities in service.

**Strategy 3-9.9:** Ensure Aging Network has accessible and available trainings on OAA and targeting services to the most at-risk and underserved older Tennesseans.

**Strategy 3-9.10:** Assertively seek opportunities to meet with diverse groups, listen and provide information about services that are available through TCAD.

Measures / outcomes

a) By December 2022, by analyze 2020 Census data to ensure services are being adequately targeted to address the needs of older Tennesseans in rural areas

b) Increase the number of contacts to non-English speaking communities by 1% annually

c) Annually by September 31, conduct at least one marketing campaign to OAA target populations

**Objective 3-10.** Working with partners, increase public awareness and strategies to alleviate social isolation among older Tennesseans and persons with disabilities

**Strategy 3-10.1:** Research and disseminate innovative and best practices for addressing social isolation

**Strategy 3-10.2:** Increase access to telephone reassurance programs

**Strategy 3-10.3:** Use informed collaborative resources to socially connect with caregivers and older adults through supporting mental health and prevent social isolation.

**Strategy 3-10.4:** Increase weekly check-in calls to older Tennesseans and caregivers.

**Strategy 3-10.5:** Expand outreach efforts to ensure caregivers and older adults are knowledgeable and able to access relevant programs to address social isolation

**Strategy 3-10.6:** Maintain training and develop materials to increase topics for volunteers to encourage social connection

**Strategy 3-10.7:** Coordinate marketing strategies by increasing outreach and promotional tools to increase volunteer participation.

**Strategy 3-10.8:** Increase access to technology for communication and social connectedness

Measures / Outcomes

a) By July 2022, publish toolkit for telephone reassurance best practices

b) By July 2021, staff will analyze quarterly data from program support requests in Care through Conversation Program

b) By August 2021, evaluate outreach and marketing finding ways of continuous quality improvement

b) By December 2021, obtain a quality improvement survey from volunteers to maintain dialog and information support.

**Objective 3-11.** Work with partners to increase access services through technology including telehealth

**Strategy 3-11.1:** Assess current status of technology-based programs within Tennessee's aging network

**Strategy 3-11.2:** Identify partners to increase access through technology and telehealth

**Strategy 3-11.3:** Research and disseminate best practices for address social determinants of health through technology and telehealth

**Strategy 3-11.4:** Research framework for streamlining enrollment referrals across programs

**Strategy 3-11.5:** Identify training opportunities to teach older adults about using technology

**Strategy 3-11.6:** Identify best practices to increase access to services through technology and telehealth in rural areas

Measures / Outcomes

g) By September 2022, research and publish best practices for implementation of technology lending library

h) By December 2022, partner with AAADs to assess use of technology-based programs within aging network program

- i) By December 2023, host a conference or meeting with aging network partners on use of teleservices within the aging network and collaborate on best practices and challenges
- j) By 2023, TCAD staff will compile a list of potential technology-based programs eligible for OAA funding, including evidence-based programs
- k) By 2023, identify at least 2 partner agencies to work with in implementing older adult technology-based programming
- l) By 2024, publish information on TCAD website with links to educational information sessions on technology assistance and funding opportunities"

Goal 4: Ensure that Tennesseans have access to information about aging issues, programs, and services in order to be able to make informed decisions about living healthy and independent for as long as possible and about planning for their financial futures, healthcare access, and long-term care.

**Objective 4-1.** Through Statewide Insurance Assistance Program (SHIP), provide objective one-on-one counseling, and assistance on Medicare, Medicaid, low-income assistance, and all other health insurances for consumers with Medicare, their adult children, their caregivers, and their advocates to include providing public and media outreach.

**Strategy 4-1.1:** Conduct Medicare training for state employees. "

**Strategy 4-1.2:** Maintain a cadre of trained SHIP counselors and volunteers in each district

**Strategy 4-1.3:** Disseminate information about Medicare and related insurance benefits that help to maintain healthy aging.

**Strategy 4-1.4:** Design and implement community outreach to individuals eligible for Medicare with emphasis on targeting hard to reach populations such as disabled, Native American, low income, rural, and native non-English speaking populations.

**Strategy 4-1.5:** Assist beneficiaries with finding affordable prescription drugs plans; screen and provide application assistance for low income subsidy or Medicare Savings Program.

**Strategy 4-1.6:** Ensure that all SHIP staff and volunteers receive annual training to update the information needed to provide accurate and effective counseling services

Measures / outcomes

- c) Annually research and analyze demographic data for each region of the state to identify vulnerable populations and develop outreach plans in each region, during the Annual Spring Training conducted in April, to better serve those populations.
- d) By June 1st of each year, host Medicare training for state employees.
- h) Continue to develop healthy aging social media campaign focused on Medicare and related insurance benefits, with emphasis on target our hard to reach populations, and submit at least 2 posts each month to be uploaded to TCAD's social media and/or website.
- i) 100% of staff and volunteers will complete update training and testing yearly.
- j) By the end of each grant cycle, reach a minimum of 6% of Tennessee's total Medicare-eligible population."

**Objective 4-2.** Direct the attention of local and state key decision makers, as well as the public, to the needs of seniors in Tennessee through increased communication and advocacy via publications and online resources.

**Strategy 4-2.1:** Direct attention to issues affecting older adults through outreach using “The State of Aging in Tennessee: A County by County Snapshot”.

**Strategy 4-2.2:** Organize and lead statewide social media campaigns to direct attention to and promote healthy living among older adults.

**Strategy 4-2.3:** Host statewide webinars to review relevant data on aging issues.

**Strategy 4-2.4:** Continue to update and make improvements to the TCAD webpage.

Measures / outcomes

c) Host (1) event to promote State of Aging County by County.

d) Annually by December 31, host at least 1 statewide webinar to review relevant data on aging issues."

**Objective 4-3.** Design and oversee a resource mapping of all federal and state funding sources and funding streams as well as resources for nonprofit and other nongovernmental entities that support the health, safety, and welfare of older adults in this state who are sixty (60) years of age or older.

**Strategy 4-3.1:** Compile inventory of all federal and state funding sources that support these older adults in Tennessee

**Strategy 4-3.2:** Compile inventory of all state, federal, or government subsidized services and programs offered to these older adults in this state, set out by program, target population, geographical region, agency, or any other grouping that would assist the general assembly in determining whether there are overlapping programs that lead to duplication within the state, gaps in service delivery, and any administrative inefficiencies

**Strategy 4-3.3:** Compile inventory of the funds for older adults for which Tennessee may be eligible, but is currently not receiving or using, and the reasons why the funds are not being used

Measures / outcomes

a) By August 1 annually, submit formal data request to partner agencies and organizations

b) By December 15 annually, submit a full resource mapping report to the State Legislature"

**Objective 4-4.** Expand the availability of relevant data for SUA staff, AAADs, Commission, and Legislature for the purposes of planning, program development, and advocacy.

**Strategy 4-4.1:** Ensure stakeholders have timely access to relevant demographic estimates by county

**Strategy 4-4.2:** Provide annual update or policy brief highlighting top issues identified in Statewide needs assessment

**Strategy 4-4.3:** Ensure partner organizations have access to relevant data as needed for application of grants or federal funding

**Strategy 4-4.4:** Increase visibility of data through social and electronic media

**Strategy 4-4.5:** Develop a robust report library

Measures / outcomes

- f) By December 2022, compile and distribute updated 2020 Census demographic estimates to all relevant stakeholders
- g) Annually by March 1, analyze and distribute updated American Community Survey demographic estimates to all relevant stakeholders
- h) Annually by December 31, release focus publication on at least 1 top issue identified in the Statewide Needs Assessment
- i) Increase engagement with data related posts through social media by 1% annually
- j) By 2024, develop dedicated webpage with all published reports."