# CA2030 PROMISING PRACTICES RESEARCH INSIGHTS

Thursday, August 24, 2023
12:00 p.m. to 1:15 p.m.

# Logistics

California Department of AGING

- **Closed captioning and ASL interpreting services are available**
  - Access by clicking the icons at the bottom of your Zoom toolbar

- **Participants are muted during presentations**
  - Use the 'Raise Hand' icon during the Q&A portion to request your line to be unmuted

- **Join us in the Q&A**
  - Submit your questions and comments using the Q&A icons on the Zoom toolbar

- **This webinar is being recorded**

- **Presentation and recording will be archived**
  - Visit CDA's YouTube channel to view
  - CA2030 webpage: aging.ca.gov/CA2030 for meeting materials
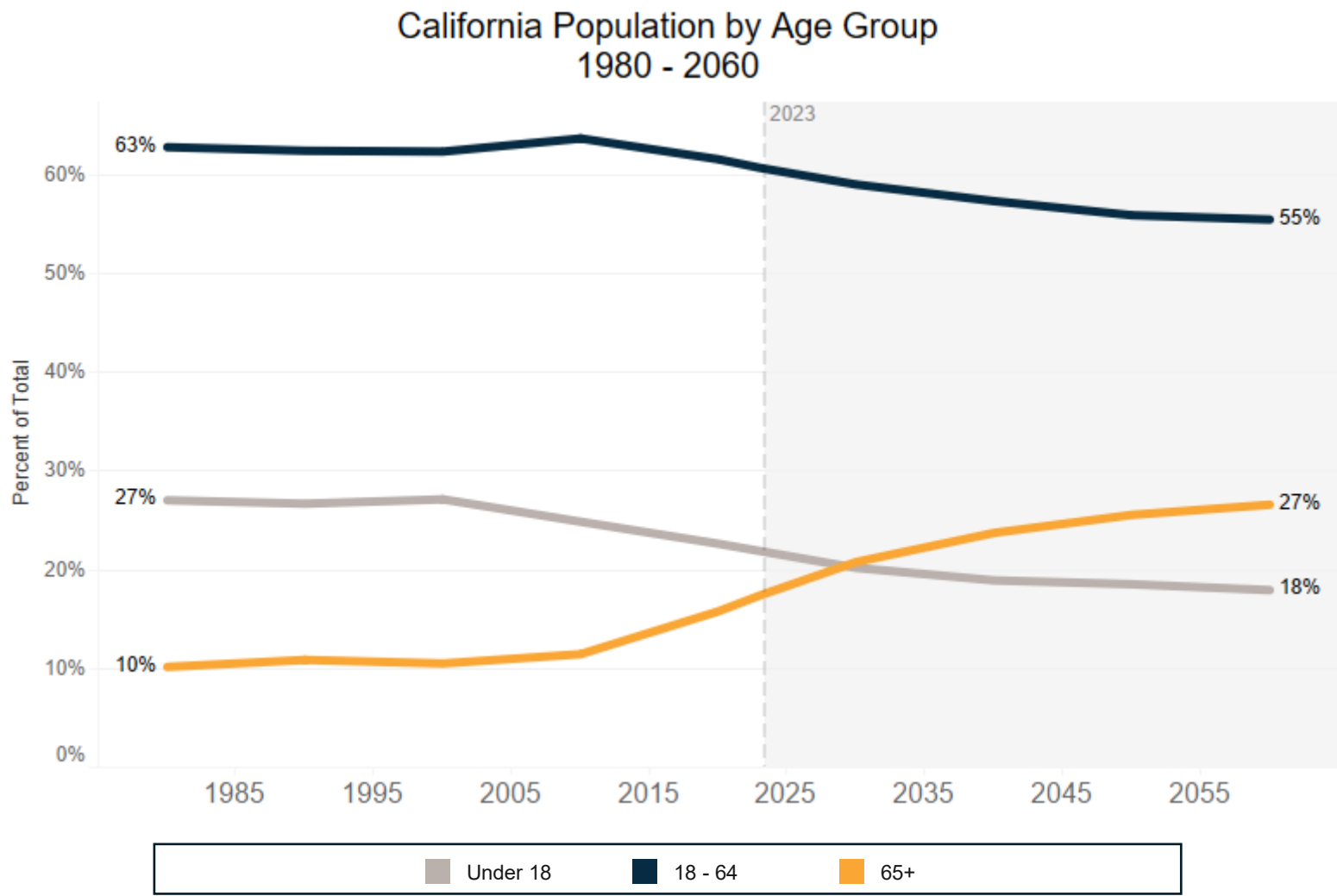
**Mark Beckley, Chief Deputy Director**

CA Department of Aging

# HOW WE ARRIVED AT CA2030

*A Timeline*

# California Population by Age Group

California Population by Age Group
1980 - 2060

Source: California Department of Finance

California Department *of* AGING

## Age 65+ Population Growth by Region



| Region | 1980 Population Age 65+ | 2060 Population Age 65+ | Percent Change |
|---|---|---|---|
| Inland Empire | 188,724 | 1,476,126 | +682% |
| Sacramento Area | 106,426 | 728,994 | +585% |
| Orange County | 161,348 | 914,839 | +467% |
| San Joaquin Valley | 211,468 | 1,101,413 | +421% |
| San Diego Area | 200,662 | 967,858 | +382% |
| Greater Bay Area | 533,805 | 2,516,355 | +371% |
| Central Coast | 153,082 | 642,540 | +320% |
| Los Angeles County | 742,478 | 3,064,289 | +313% |
| Northern and Sierra | 121,071 | 350,083 | +189% |

6

# May 2020

January 2021

April 2022

November 2022

January 2023

June 2023

July 2023

The Master Plan for Aging LTSS Subcommittee submits a Report with five bold objectives:

1. A system that all Californians can easily navigate
2. Access to LTSS in every community
3. Affordable LTSS choices
4. Highly valued, high-quality workforce
5. Streamlined state and local administrative structures

California Department of AGING

# January 2021

April 2022

November 2022

January 2023

June 2023

July 2023

Governor Newsom releases the Administration's Master Plan for Aging with five bold goals, 23 strategies and 132 initiatives

- MPA 2021-22 Initiative #101 called on CalHHS Agency to revisit California's AAA local leadership structures - including local area map, funding formulas, and designations - via California's Federal Older Americans Act State Plan 2021-2024, to meet growing and changing needs and continue to advance equity.

8

# April 2022

November 2022

January 2023

June 2023

CDA, in consultation with CSU Sacramento, reports out to stakeholders on feedback solicited from a series of "Hubs & Spokes" webinars and townhalls.

July 2023

California Department of AGING

January 2023

June 2023

July 2023

CDA engages Collaborative Consulting in a one-year contract to lead statewide CA2030 project & steering committee, a focused effort to examine the AAA/aging network in six core areas:

1. Programs and services
2. Funding sources and capacities
3. Key performance measures
4. Governance
5. Geography and demographics
6. Branding, communications, and outreach

# CA2030 Steering Committee Members

**C4A -** Michael Costa, Aneliza Del Pinal, Victoria Jump, Pam Miller

**CCOA -** Karol Swartzlander, Rita Saenz

**CFILC -** Eli Gelardin, (Executive Director vacant)

**CSAC -** Justin Garrett, Supervisor Rosemarie Smallcombe

**CWDA -** Diana Boyer, Deborah Martinez

California Department *of* AGING

# January 2023

June 2023

July 2023

Governor Newsom releases 2023-24 Master Plan for Aging Initiatives

**Goal 3, Strategy F, Initiative 74:**

"Ease consumer navigation and streamline state and local structures for service delivery by thoughtfully examining the statewide Area Agencies on Aging (AAA) network and making recommendations on AAA governance, geographic boundaries, funding opportunities, core services, performance measures, and shared marketing/branding."

California Department *of* AGING

# June 2023

July 2023

The federal Administration on Community Living (ACL) releases Notice of Proposed Rulemaking calling for public input for the first time since 1988 on the Older Americans Act (OAA).

# July 2023

CDA launches California's first-ever Community Assessment Survey for Older Adults (CASOA) in multiple languages in all 58 counties in partnership with AAAs and CBOs.

California Department of AGING

# CA 2030 PROMISING PRACTICES RESEARCH

Collaborative Consulting & The California Department of Aging

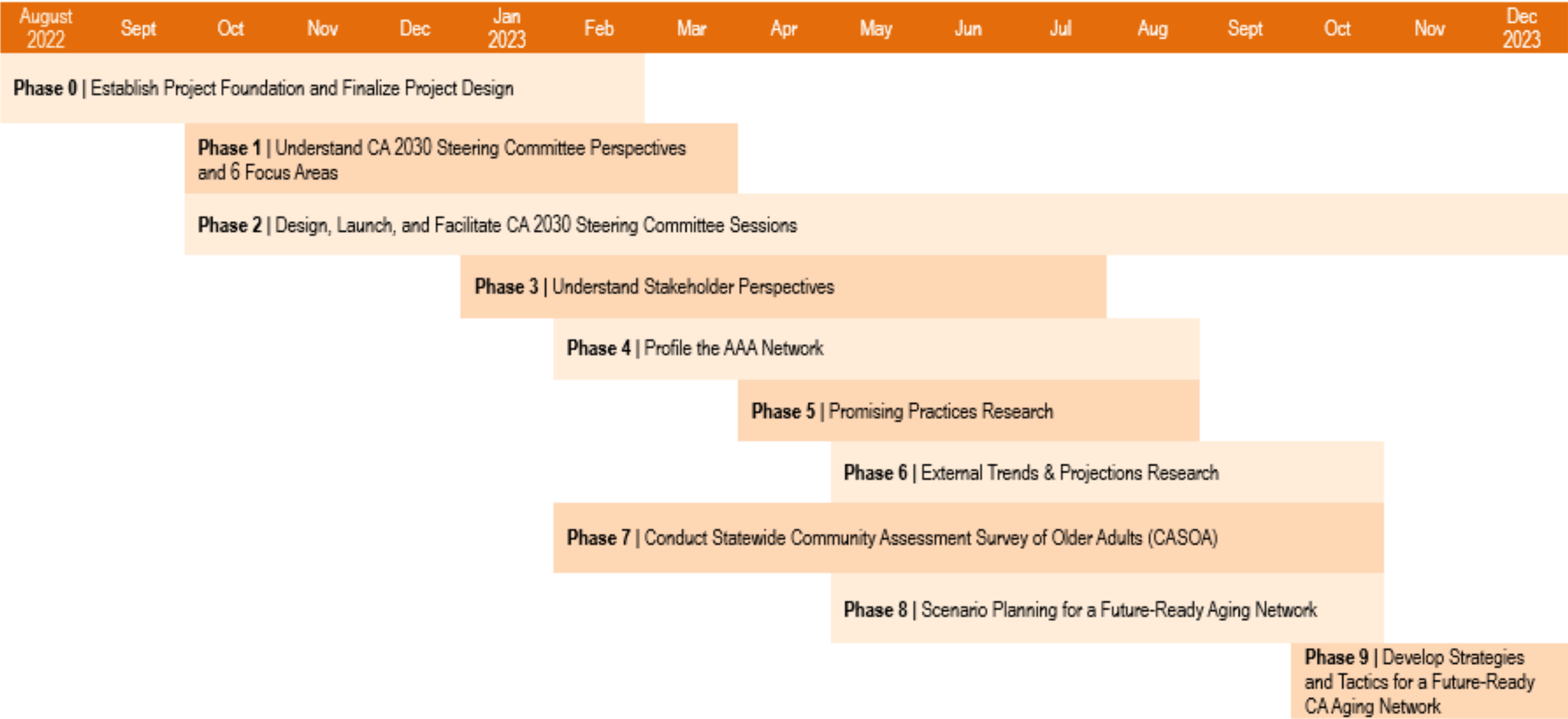August 24, 2023

**COLLABORATIVE** CONSULTING
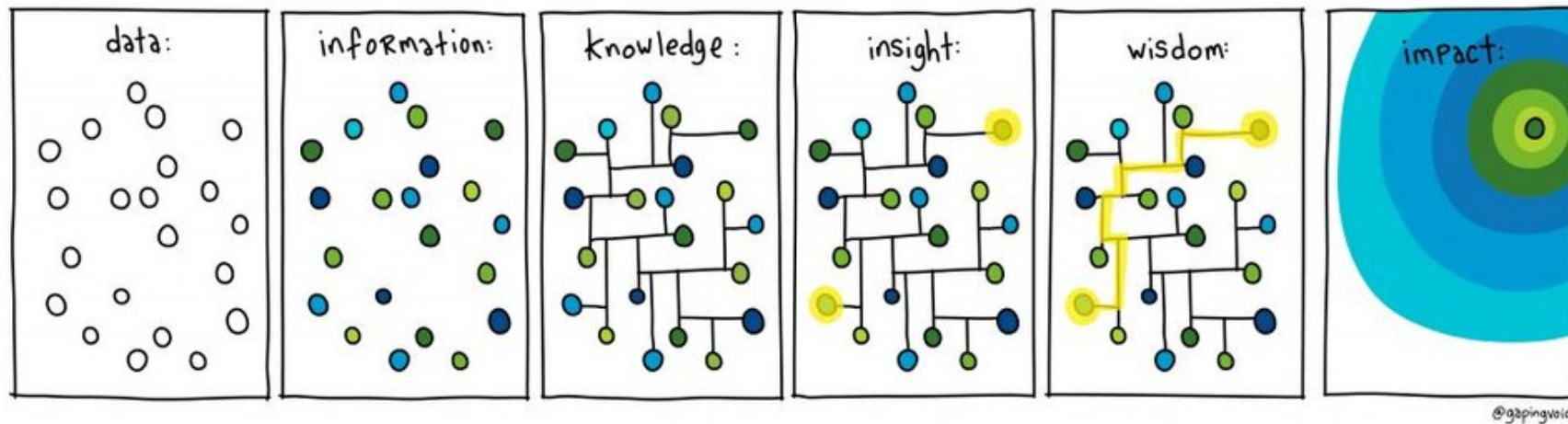Where ideas evolve into action

# CA 2030 PROJECT DESIGN & TIMELINE

**RESEARCH:**

**Stakeholder Perspectives (June 23, 2023)**

**AAA Stakeholder Perspectives (July 24, 2023)**

**Promising Practices (TODAY'S FOCUS)**

**Trends & Projections Data**

**Older Adult Needs Assessment (CASOA)**

# METHODOLOGY

- Common and promising practices are policies, standards, models, and/or activities designed, planned, and/or implemented to solve a system's external and/or internal challenges.
- These may not all apply to California.
- We explored practices located outside of California.
- The findings do not imply that certain practices are not already happening in California.
- This webinar features only some of the practices shared in the report.
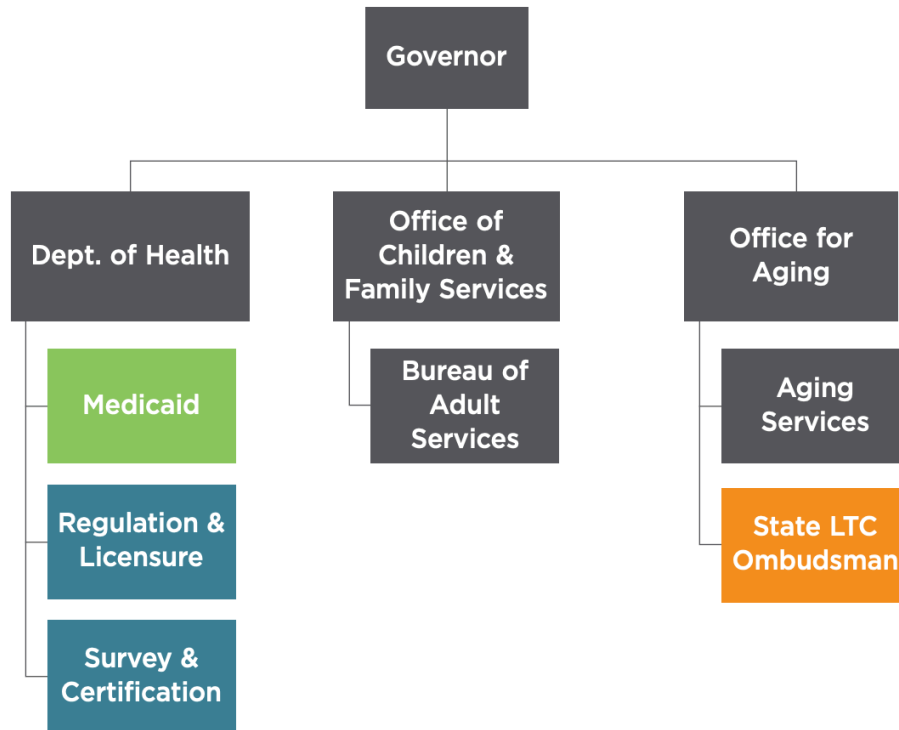
**States Researched**

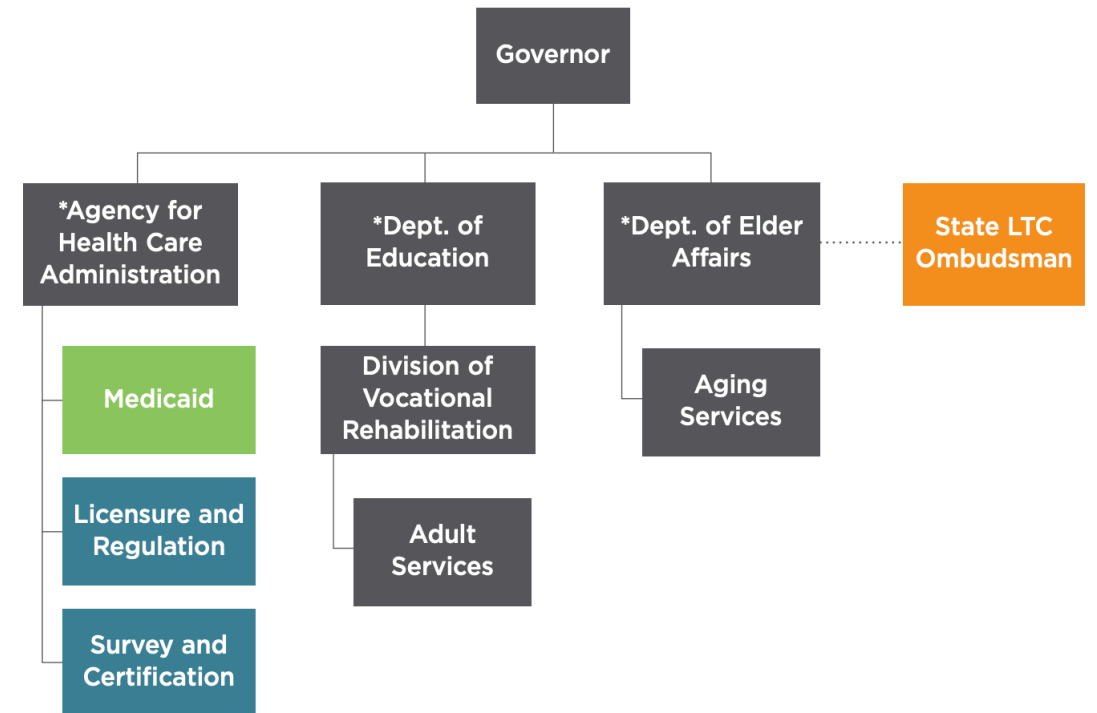AL, CO, PA, FL, IL, NY, OH, TX, RI, WA, WI, etc.

**Focus Areas**

1. Governance
2. Programs and Services
3. Funding Sources and Capacities

4. Key Performance Measures
5. Branding, Communications and Outreach
6. Geography and Demographics

# State Units on Aging (SUAs) that report directly to a governor claim to be optimal.



**New York Office on Aging** organizational chart: Governor → Dept. of Health, Office of Children & Family Services, Office for Aging. Dept. of Health → Medicaid, Regulation & Licensure, Survey & Certification. Office of Children & Family Services → Bureau of Adult Services. Office for Aging → Aging Services, State LTC Ombudsman.

**Florida Department of Elder Affairs** organizational chart: Governor → *Agency for Health Care Administration, *Dept. of Education, *Dept. of Elder Affairs, State LTC Ombudsman. *Agency for Health Care Administration → Medicaid, Licensure and Regulation, Survey and Certification. *Dept. of Education → Division of Vocational Rehabilitation → Adult Services. *Dept. of Elder Affairs → Aging Services.

**State Units on Aging (SUAs) that report directly to a governor claim to be optimal.**

**Many states use manuals to easily communicate and update policies and procedures.**

State Units on Aging (SUAs) that report directly to a governor claim to be optimal.

Many states use manuals to easily communicate and update policies and procedures.

**Some states are modernizing state-level aging services policies and processes.**

State Units on Aging (SUAs) that report directly to a governor claim to be optimal.

Many states use manuals to easily communicate and update policies and procedures.

Some states are modernizing state-level aging services policies and processes.

**Some states have reduced the number of PSAs to improve cost efficiencies.**

State Units on Aging (SUAs) that report directly to a governor claim to be optimal.
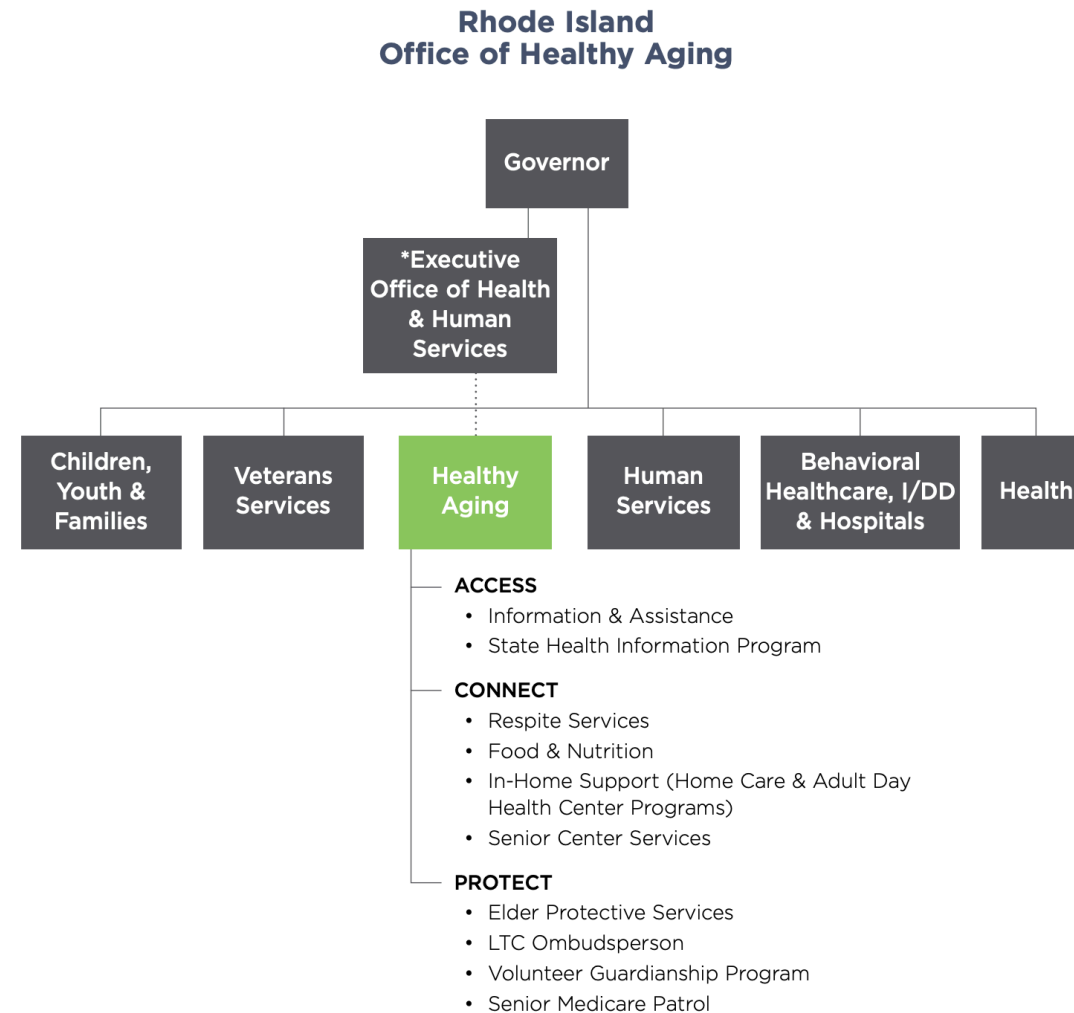
Many states use manuals to easily communicate and update policies and procedures.

Some states are modernizing state-level aging services policies and processes.

Some states have reduced the number of PSAs to improve cost efficiencies.

**Some states that restructured their PSAs / AAAs invited AAAs to inform plans.**

## Many states establish a set of core services.

**Rhode Island
Office of Healthy Aging**



**ACCESS**
- Information & Assistance
- State Health Information Program

**CONNECT**
- Respite Services
- Food & Nutrition
- In-Home Support (Home Care & Adult Day Health Center Programs)
- Senior Center Services

**PROTECT**
- Elder Protective Services
- LTC Ombudsperson
- Volunteer Guardianship Program
- Senior Medicare Patrol

# PROGRAMS & SERVICES

**Many states establish a set of core services.**

**States are collecting and utilizing consumer data via common intake forms.**

Many states establish a set of core services.

States are collecting and utilizing consumer data via common intake forms.

**Service innovations are happening within and outside of state and national aging networks.**

Many states establish a set of core services.

States are collecting and utilizing consumer data via common intake forms.

Service innovations are happening within and outside of state and national aging networks.

**States integrate equity and equality into program planning and design.**

COLLABORATIVE CONSULTING
Where ideas evolve into action

Many states establish a set of core services.

States are collecting and utilizing consumer data via common intake forms.

Service innovations are happening within and outside of state and national aging networks.

States integrate equity and equality into program planning and design.

**States use waitlists to strengthen funding advocacy efforts.**

# FUNDING SOURCES & CAPACITIES

COLLABORATIVE CONSULTING
Where ideas evolve into action

## States revise funding formulas (IFFs) to reflect demographic changes and equity priorities.

| Minnesota | Previous IFF | IFF Proposed by SUA (2023) | IFF Proposed by Rural AAAs |
|---|---|---|---|
| Pop 60+ | 55% | 30% | 20% |
| Low Income | 20% | 20% | 20% |
| Minority | 10% | 15% | 15% |
| Rural | 10% | 15% | 25% |
| Pop. Density | 5% | 5% | 5% |
| Disability Rate | 0% | 10% | 5% |
| 60+ Living Alone | 0% | 5% | 10% |

**States revise funding formulas (IFFs) to reflect demographic changes and equity priorities.**

**States are phasing in major changes in funding allocations.**

**States revise funding formulas (IFFs) to reflect demographic changes and equity priorities.**

**States are phasing in major changes in funding allocations.**

**Private pay is an allowable option for states and AAAs; some pursue it to expand services.**

COLLABORATIVE CONSULTING
Where ideas evolve into action

States revise funding formulas (IFFs) to reflect demographic changes and equity priorities.

States are phasing in major changes in funding allocations.

Private pay is an allowable option for states and AAAs; some pursue it to expand services.

**States achieve funding increases in a variety of ways.**

States revise funding formulas (IFFs) to reflect demographic changes and equity priorities.

States are phasing in major changes in funding allocations.

Private pay is an allowable option for states and AAAs; some pursue it to expand services.

States achieve funding increases in a variety of ways.

**State aging networks are becoming more involved in Medicaid policies and activities.**

**COLLABORATIVE** CONSULTING
Where ideas evolve into action

**States are strengthening data systems to measure, monitor, and improve performance.**

## FLORIDA 60+ POPULATION COMPARED TO SCREENED AND SERVED CLIENTS

| Characteristic 60+ | Florida 60+ Population | Percent 60+ | Number of Service Recipients* | Receiving or Screened for Services* |
|---|---|---|---|---|
| Below 100% of Poverty Level | 576,867 | 11% | 52,472 | 43% |
| Living Alone | 972,146 | 18% | 43,804 | 36% |
| Minority | 1,545,786 | 29% | 61,972 | 51% |
| Minority Below 100% of Poverty Level | 268,408 | 5% | 36,242 | 30% |
| Rural Areas | 505,588 | 9% | 6,804 | 6% |
| Limited English Proficiency | 347,573 | 6% | 28,930 | 24% |

# KEY PERFORMANCE MEASURES

**States are strengthening data systems to measure, monitor, and improve performance.**

**More states are assessing the needs of older adults at larger scales.**

# KEY PERFORMANCE MEASURES

**States are strengthening data systems to measure, monitor, and improve performance.**

**More states are assessing the needs of older adults at larger scales.**

**Many states require AAAs to collect and report consumer satisfaction and experience.**

# KEY PERFORMANCE MEASURES

**States are strengthening data systems to measure, monitor, and improve performance.**

**More states are assessing the needs of older adults at larger scales.**

**Many states require AAAs to collect and report consumer satisfaction and experience.**

**States are getting sophisticated at measuring and monitoring network performance.**

# KEY PERFORMANCE MEASURES

**States are strengthening data systems to measure, monitor, and improve performance.**

**More states are assessing the needs of older adults at larger scales.**

**Many states require AAAs to collect and report consumer satisfaction and experience.**

**States are getting sophisticated at measuring and monitoring network performance.**

**State aging networks are leveraging national datasets and tools.**

# BRANDING, COMMUNICATIONS & OUTREACH

**States are branding common statewide programs.**

**States are branding common statewide programs.**

**Many organizations are investing in reframing aging trainings and initiatives.**

COLLABORATIVE CONSULTING
Where ideas evolve into action

**States are branding common statewide programs.**

**Many organizations are investing in reframing aging trainings and initiatives.**

**Some AAAs are radically reinventing themselves.**

# BRANDING, COMMUNICATIONS & OUTREACH

**COLLABORATIVE** CONSULTING
*Where ideas evolve into action*

States are branding common statewide programs.

Many organizations are investing in reframing aging trainings and initiatives.

Some AAAs are radically reinventing themselves.

**Campaigns are designed to address specific issues and target specific audiences.**

States are branding common statewide programs.

Many organizations are investing in reframing aging trainings and initiatives.

Some AAAs are radically reinventing themselves.

Campaigns are designed to address specific issues and target specific audiences.

**States and local agencies evaluate communications campaigns to improve performance.**

# GEOGRAPHY & DEMOGRAPHICS

**States are addressing geographic and demographic challenges through funding formula changes, AAA consolidation/restructuring, and special initiatives.**
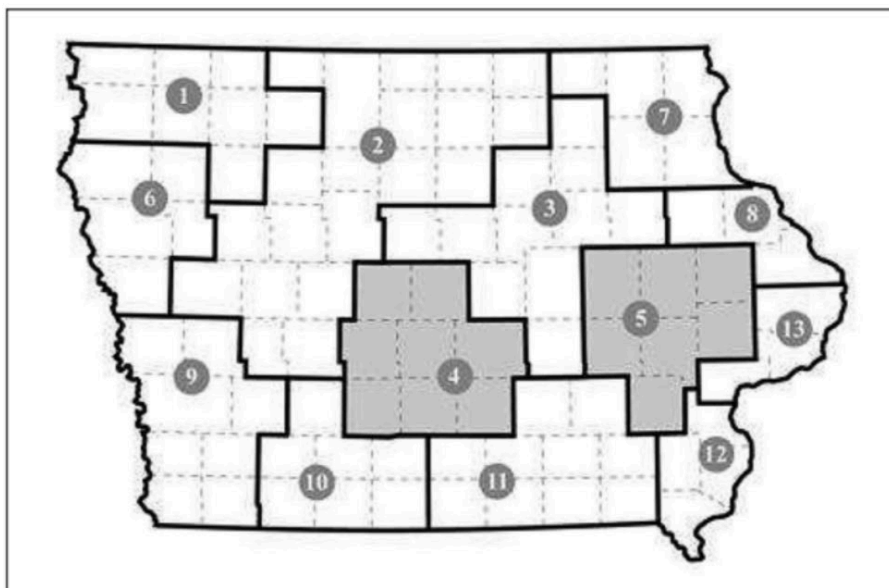


**Figure 1.** County coverage by 13 AAA before consolidation (FY2010-2013).
*Note.* Areas 4 and 5 (in gray) did not undergo geographic consolidation of AAAs. In the quasi-experimental design, the counties in these areas served as control counties whereas others served as treatment counties.
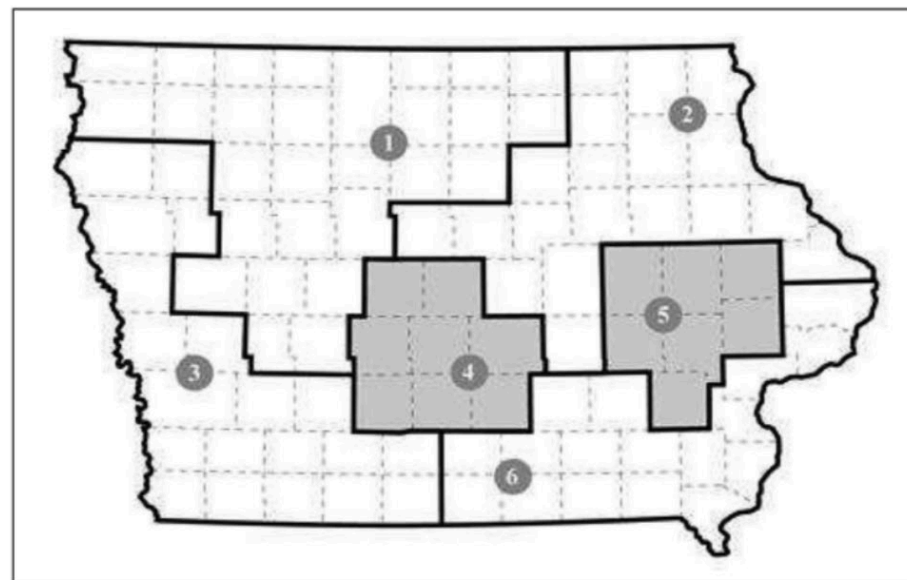AAA = Area Agencies on Aging.

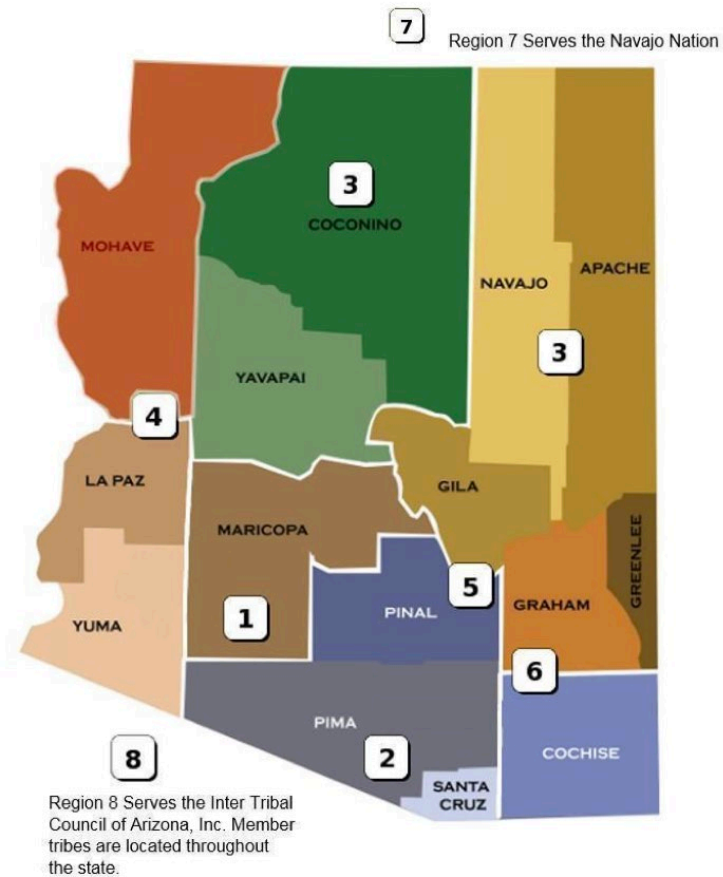**Figure 2.** County coverage by six AAA after consolidation (FY2014-present).
*Note.* Areas 4 and 5 (in gray) did not undergo geographic consolidation of AAAs. In the quasi-experimental design, the counties in these areas served as control counties whereas others served as treatment counties.
AAA = Area Agencies on Aging.

# GEOGRAPHY & DEMOGRAPHICS

**States are addressing geographic and demographic challenges through funding formula changes, AAA consolidation/restructuring, and special initiatives.**

**Many states support tribal and indigenous groups and organizations.**

**States are addressing geographic and demographic challenges through funding formula changes, AAA consolidation/restructuring, and special initiatives.**

**Many states support tribal and indigenous groups and organizations.**

**More AAAs are adopting community health worker programs to improve outreach engagement with hard-to-reach populations.**

# GEOGRAPHY & DEMOGRAPHICS

**States are addressing geographic and demographic challenges through funding formula changes, AAA consolidation/restructuring, and special initiatives.**

**Many states support tribal and indigenous groups and organizations.**

**More AAAs are adopting community health worker programs to improve outreach engagement with hard-to-reach populations.**

**Equity frameworks are being used to better (re)design systems and programs.**

**COLLABORATIVE** CONSULTING
*Where ideas evolve into action*

**Thank you for participating in today's webinar!**

**For additional resources and information on how the project is progressing: [CDA CA 2030 Website](CDA CA 2030 Website)**