

OBJECTIVES AND PERFORMANCE MEASURES

Objectives	Performance Measures	Standards*
1: To help elders to remain in the least restrictive, most appropriate and safe setting.	<i>Outcome Measure:</i> Percent of elders the CARES program determined eligible for nursing home placement who are diverted <i>Output Measure:</i> Number of CARES assessments	30% 87,987
2: To prevent/delay premature nursing home placement.	<i>Outcome Measure:</i> Percent of frail elders who remain at home or in the community instead of going into a nursing home	97%
3: To provide prompt and appropriate services to elders referred from Adult Protective Services who meet the frailty level criteria.	<i>Outcome Measure:</i> Percent of Adult Protective Services (APS) referrals who are in need of immediate services to prevent further harm served within 72 hours	97%
4: To use long-term care resources in the most efficient and effective way.	<i>Outcome Measure:</i> Average monthly savings per consumer for home and community-based care versus nursing home care for comparable client groups	\$2,563
5: To help elders to have home environments that are as safe as possible.	<i>Outcome Measure:</i> Percent of elders assessed with high or moderate risk environments who improved their environment score	79.3%
6: To improve the nutritional status of elders.	<i>Outcome Measure:</i> Percent of new service recipients with high-risk nutrition scores whose nutritional status improved <i>Output Measure:</i> Number of congregate meals provided	66% 5,105,950
7: To assist elders to maintain their independence and choices in their homes as long as possible.	<i>Outcome Measure:</i> Percent of new service recipients whose ADL assessment score has been maintained or improved	63%
8: To assist elders to maintain their independence and choices in their communities as long as possible.	<i>Outcome Measure:</i> Percent of new service recipients whose IADL assessment score has been maintained or improved	62.3%

Objectives	Performance Measures	Standards*
9: To provide caregivers with assistance/respite to help them to be able to continue providing care.	Outcome Measure: Percent of family and family-assisted caregivers who self-report they are very likely to provide care	89%
	Outcome Measure: Percent of caregivers whose ability to provide care is maintained or improved after one year of service intervention (as determined by the caregiver and the assessor)	90%
10: To leverage a variety of non-state resources whenever possible.	Outcome Measure: Average time in the Community Care for the Elderly program for Medicaid Waiver probable customers	2.8 months
11: To provide prompt and appropriate services to elders who are at risk of nursing home placement.	Outcome Measure: Percent of customers who are at imminent risk of nursing home placement who are served with community-based services	90%
12: To ensure the security of vulnerable elders residing in long-term care facilities through annual facility reviews and complaint investigation.	Outcome Measure: Percent of complaint investigations initiated by the ombudsman within five working days	91%
	Output Measure: Number of complaint investigations completed (long-term care ombudsman council)	8,712
13: To ensure that consumers needing guardianship services are provided that protection.	Outcome Measure: Percent of service activity on behalf of frail or incapacitated elders initiated by public guardianship within 5 days of receipt of request	95%
	Output Measure: Number of judicially approved guardianship plans including new orders	1,600

* If any adjustments are made to the standards for these measures, they will be shared with the AAAs as soon as available.

DOEA Internal Objectives	DOEA Internal Measures	Standards
14: To maximize the number of people receiving registered long-term care services.	Output Measure: Number of people served with registered long-term care services.	168,865
15: To achieve annual co-pay goal established for the PSA.	Outcome Measure: Percent of co-pay goal achieved	100%
16: To maintain accurate data in Consumer Information Registration and Tracking System (CIRTS).	Outcome Measure: Percent of CIRTS data entry error rate	1%
17: To effectively manage state and federal funds awarded in area agency contracts for consumer services.	Outcome Measure: Percent of state and federal funds expended for consumer services	100%

DOEA Internal Objectives	DOEA Internal Measures	Standards
18: To maximize state resources by evaluating and using, as appropriate, the Adult Care Food Program as a reimbursement mechanism for meals provided to the elderly.	Outcome Measure: Percent of increase in providers participating in the Adult Care Food Program	10%
19a: To ensure collection and maintenance of a database on information and referral services for each county in the planning and service area.	The Area Agency will operate under the AIRS Standards for Professional Information and Referral, which are included as an attachment to the OAA contract, and will provide the following information to the department upon request: 1) The number of calls received by Elder Helplines. 2) The type/level of services requested. 3) The timely entry of accurate data in the online database.	
19b: To ensure a system is in place for collecting and organizing inquirer data to identify gaps in service and overlaps.	The Area Agency will ensure: 1) Accuracy of data entered in the resource database for use by the information specialists under the inclusion/exclusion criteria. 2) Quarterly reports from the Elder Helplines are submitted with regard to information and referral activity.	
20: To target services to elders most in need.	Outcome Measures: Percent of high-risk consumers (priority levels 4 and 5) served. Average time for applicants assessed as priority levels 4 and 5 to start services (other than case management) is less than the average time for applicants assessed as priority levels 1, 2 or 3 to start services.	
21: To ensure services provided to consumers are meeting consumer needs.	The Area Agency must: 1) Assess consumer satisfaction with services provided. (Tools, developed under contract with the Administration on Aging, and technical assistance are available from the Department.)	
22: To ensure that Medicaid Waiver funds are appropriately managed to ensure as many consumers are served as possible.	The Area Agency must: Detail procedures to manage Medicaid Waiver expenditures.	

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	Incorporate care plan review protocol and surplus/deficit management.	
23: To maximize resources.	The Area Agency must: <ol style="list-style-type: none"> 1) Detail procedures to identify funding alternatives to be used prior to relying on Community Care for the Elderly funds. 2) Identify volunteer and other community resources to be accessed prior to relying on Department-funded services. 3) Detail service coordination efforts to prevent duplication of effort. 	

Note: Area agencies and providers are not required to develop implementation strategies for the initiatives in the shaded rows.