| Focus Area 1: Aging & Human Services | |
|--------------------------------------|--|
| Goal 1 | There will be a sufficient and well-trained workforce that can support the needs of an aging population, especially those who are frail and vulnerable. |
| | |
| Strategies | S1.1.1: Offer pre-monitoring visits to provide technical assistance to a new service partner staff members to ensure knowledge of requirements and best practices. S1.1.2: Offer orientation services to new service partners and their staff and refreshers to more experience staff, where needed. S1.1.3 Offer and facilitate group roundtables for sharing best practices with key staff in service partner agencies, i.e., directors, family caregiver specialists, senior center/health promotion staff. S1.1.4: Monitoring oversight of funded services and of staff credentialing as required to assure a high level of quality and compliance. S1.1.5: Collaborate with the Community and Economic Development focus area and other like-minded community groups to share information and opportunities to address workforce issues and enhance workforce development and training. S1.1.6: Long-term care Ombudsmen will offer residents' rights training to staff in long-term care homes. S1.1.7: Offer and expand consumer-directed programs (where the consumer is the employer) as an alternative to traditional in-home care services. |
| Key Performance Indicators | KPI 1: Number of pre-monitoring sessions (track via internal FY Accomplishments/Activities List) KPI 2: Number of orientation sessions (track via internal FY Accomplishments/Activities List) KPI 3: Numbers of group sessions provided for key staff (track via internal FY Accomplishments/Activities List) KPI 4: Annual service monitoring compliance percentage (annual compliance percentage based on service monitoring reports/traditional funding not covid funding) KPI 5: Number of Resident's Rights Training Sessions (NC NORS data) KPI 6: Number of funded consumer-directed programs and counties served (program records |
| Goal 2 | Expand access to aging services and support in an equitable and inclusive manner. |
| Strategies | S1.2.1: Ongoing monitoring of waiting lists for changes or movement. S1.2.2: Where appropriate, encourage the use of quality improvement processes or tools to strengthen services, availability, and effective screening. S1.2.3: Encourage a reevaluation of currently funded services, community needs, and utilization patterns in the Home and Community Care Block Grant committee process to assess for alignment or for needed changes in services and funding amounts. S1.2.4: Promote education and information on the importance of equity and inclusion for mature adults and those living with disabilities or disease processes. S1.2.5: Review community demographics for targeted and priority groups (ex. minority, rural, living at or below poverty) and funded service demographics, as a part of the monitoring process and administration of Older Americans Act funding. |
| Key Performance Indicators | KPI 1: Number of Individuals on the ARMS waiting list. (ARMS waiting list report) KPI 2: Number of service providers that voluntarily adopted decision-informing tools. (Track via internal aAccomplishments/Activities list and monitoring reports) |
| Goal 3 | Aging adults and persons with disabilities will have the opportunity to live in a dignified manner in the least restrictive environment and will receive the respect, support, and services necessary to enhance personal safety, health, and well-being. |
| Strategies | S1.3.1: Promote formal adoption of AARP's network of Age-Friendly States and Communities by local governments S1.3.2: Promote safety, protection and respect for the rights of older adults through adult or elder abuse prevention and awareness activities, funded legal assistance services, and collaboration with like-minded groups. S1.3.3: Expand and sustain evidence-based programs that seek to prevent falls, improve the self-management of chronic conditions, and that educate family caregivers for vulnerable individuals. S1.3.4 Provide information assistance and options counseling to those seeking service and resource information. |

| | S1.3.5 Share information and education about the needs of an aging population to local governments and the community. S1.3.6 Collaborate with the Community and Economic Development and Housing focus areas to share information and opportunities to address housing and economic security needs of the aging population. |
|----------------------------------|--|
| Key Performance Indicators | KPI 1: Number of communities that commit to the AARP Age Friendly States and Communities network, including the development and implementation of a livable community plan. (Number/name of community on Age-Friendly Communities website) KPI 2: Number of educational or awareness activities regarding adult and elder abuse provided to the community; numbers of Legal Services Assistance clients, number of counties with AAA participation in the Multidisciplinary Teams addressing adult abuse, number of Long-Term Care Ombudsman closed complaints, continued membership and participation in the NC Partnership against Adult Abuse. (Elder Abuse funding utilization activity, LANC annual report/self-assessment report for number of legal assistance clients served; number of MDTs/counties AAA attends; NC NORS Ombudsman closed complaints; NCPAAS membership participation yes/no) KPI 3: Number of evidence-based health promotion programs offered with Older Americans Act funding. (Reporting for Title III-D and FCSP funding) KPI 4: Number of reported Information, Assistance, and Options Counseling requests (ARMS I&OC contacts report, Peer Place report) KPI 5: Number of information and educational activities provided to local governments and other non-aging network stakeholders. (track via internal Accomplishments/Activities list, NORS report of LTC Ombudsman activities) |