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FY20 QUARTER #2 PERFORMANCE REPORT

Aging and Long Term Services Department



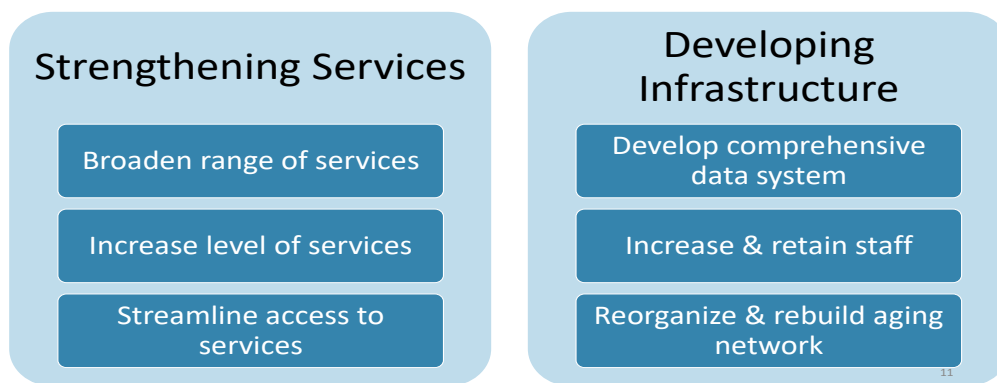
Aging and Long Term Services Department

Agency Mission:

The Mission of the Aging and Long Term Services Department is to provide accessible, integrated services to older adults, adults with disabilities, and caregivers to assist them in maintaining their independence, dignity, autonomy, health, safety, and economic well-being, thereby empowering them to live on their own terms in their own communities as productively as possible.

Agency Goals/Objectives:

The goal of Aging and Long-Term Services Department (ALTSD) is to build and maintain a sustainable service delivery system to meet the needs of the state’s rapidly growing population of older New Mexicans and adults living with disabilities. To accomplish the goal, ALTSD is focused on two primary issues—services and infrastructure.



Key Strategic Plan Initiatives:

Build and maintain a sustainable service delivery system to meet the needs of the state’s rapidly growing population of older New Mexicans and adults living with disabilities.

- The Long-Term Care Ombudsman program will vastly grow its volunteer workforce to ensure long-term care residents receive consistent, high-quality advocacy services.
- The Aging and Disability Resource Center (ADRC) will enhance its services so that each customer concern is adequately addressed.
- Adult Protective Services (APS) will connect every client with opportunities to develop a long-term care plan that prevents re-entry into the APS system.

Work to increase the level of services by ensuring its current Aging Network programs provide a comprehensive array of services statewide, particularly in rural communities.

- Eliminating waitlists
- Maximizing or leveraging all available funding sources.

Broaden the range of services available to older New Mexicans

- Providing meaningful support and assistance to caregivers
- Researching and implementing innovative healthy aging programs
- Expanding legal services
- Improving the behavioral health network
- Attracting cutting-edge Alzheimer’s and dementia-related disease research to New Mexico

Streamlining access to services

- Coordination across ALTSD programs
- Collaboration with the health departments and other state agencies
- Statewide community outreach

Strengthen the Agency’s infrastructure

- Develop a comprehensive data system
- Grow and retaining staff development
- Reorganizing the Aging Network.

Streamlining constituents’ access to services

- Connect data system to the greater health data HHS 2020 project, in collaboration with the other health departments

AGENCY PROGRAMS

CONSUMER AND ELDER RIGHTS DIVISION AND THE LONG TERM CARE OMBUDSMAN PROGRAM	P592
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Consumer and Elder Rights Division and the Long Term Care Ombudsman Program

Program Description, Purpose and Objectives: The Consumer & Elder Rights Division assists older adults, adults with disabilities, and their caregivers through a telephonic, web-based, and community based point of entry system. CERD helps people understand their options, access information, maximize personal choice, navigate systems to improve their quality of life.

CERD consists of the following areas:

- Aging & Disability Resource Center (ADRC) with Live Web Chat availability
- State Health Insurance Program (SHIP)
- Senior Medicare Patrol (SMP)
- Care Transitions Bureau (CTB)
- Prescription Drug Assistance Program
- NM Veteran Directed Care Program

The Long-Term Care Ombudsman Program is federally and state mandated to provide independent oversight and advocacy services to residents in New Mexico’s long-term care facilities. The program advocates for the recognition, respect, and enforcement of the civil and human rights of residents of long-term care facilities in New Mexico. Highly skilled staff and many volunteers throughout the state regularly visit nursing homes and other long-term care facilities to ensure that residents are properly treated.

Program Budget (in thousands):

FY19	General Fund	Other State Funds	Federal Funds	Other Transfers	TOTAL	FTE
200	1,277.2	-	1,111.8	1,010.0	3,399.0	47.5
300	91.1	-	392.0	-	483.1	
400	194.6	-	523.2	-	717.8	
TOTAL	1,562.9	-	2,027.0	1,010.0	4,599.9	

FY20	General Fund	Other State Funds	Federal Funds	Other Transfers	TOTAL	FTE
200	1,621.6	-	995.0	1,200.0	3,816.6	48.5
300	24.8	-	591.1	-	615.9	
400	195.1	-	522.7	-	717.8	
TOTAL	1,841.5	-	2,108.8	1,200.0	5,150.3	

Program Performance Measures:

1. Percent of calls to the Aging and Disability Resource Center that are answered by a live operator.
2. Percent of residents who remained in the community six months following a nursing home care transition.
3. Percent of ombudsman complaints resolved within sixty days.

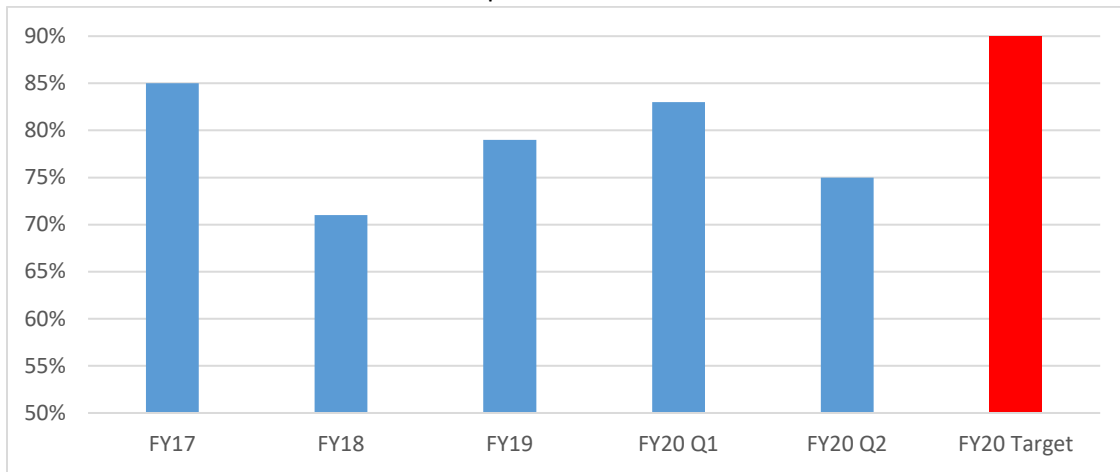
PERFORMANCE MEASURE #1

Percent of calls to the Aging and Disability Resource Center that are answered by a live operator.

Results

FY17	FY18	FY19	FY20 Q1	FY20 Q2	FY20 Q3	FY20 Q4	FY20 Total	FY20 Target
85%	71%	79%	83%	75%				90%

Graph of Data Above



MEASURE DESCRIPTION: The measure indicates the complexity of calls received by the Aging and Disability Resource Center. It also reflects the extent to which social service program changes are affecting the quality of life of beneficiaries.

DATA SOURCE/METHODOLOGY: The ADRC utilizes the Cisco call system database and Social Assistance Management System (SAMS) database. The ADRC model required by the Federal government's Administration for Community Living (ACL) is an entry where consumers obtain information, assistance, and referrals. The percent of calls answered by a live operator provides an indication of the demand for services and its relationship to customer service and ADRC staff resources.

STORY BEHIND THE DATA: The ADRC received 6,853 calls (average of 115 per day), of which 5,125 were answered by a live person. Of the 6,853 calls received, 1,728 callers left a voice message, and their calls were returned within 6 hours. The average length in time per call is averaging 14 minutes, with the maximum talk time average being 63 minutes. Being partially staffed during this 2nd quarter along with there being 5 Holidays, ½ day for Christmas Eve, 6 hours for inclement weather, and a daily average of 5 Options Counselors; all of this allowed for fewer calls to be answered consistently. October 15th through December 7th was Medicare Part D Open Enrollment, which means that calls took longer than usual. We had Metro Care Transition Staff assisting OC with callbacks.

The *Alliance for Information and Referral Taxonomy* is used to track the topics discussed and reviewed during each counseling session. Topic entries are entered into the SAMS database which includes entries by non-ADRC staff. The top five topics of concern in this quarter were:

- Medicaid – 9,641 consumers, in which 7,070 were for waiver services and Medicaid benefit information and counseling
- Medicare – 4,945 consumers (benefit explanation, enrollment, and counseling).

- Senior Center Services – 116 consumers
- Prescription Drug Assistance –334 consumers
- Social Security - 107 consumers

IMPROVEMENT ACTION PLAN:

- Ensure ADRC has adequate staff to meet daily calls;
- Management will monitor call queue activity and assist with peak call times;
- Evaluate ADRC calls to determine if the correct information was given to consumer and correct call topic was selected based on call review;
- Meet with counselors to review quality reviews;
- Review quality reviews findings and assess if additional training is needed;
- Continued training of counselors in options counseling and assessment tool to include documentation in internal database;
- Submit recruitment of vacant positions as positions become vacant.

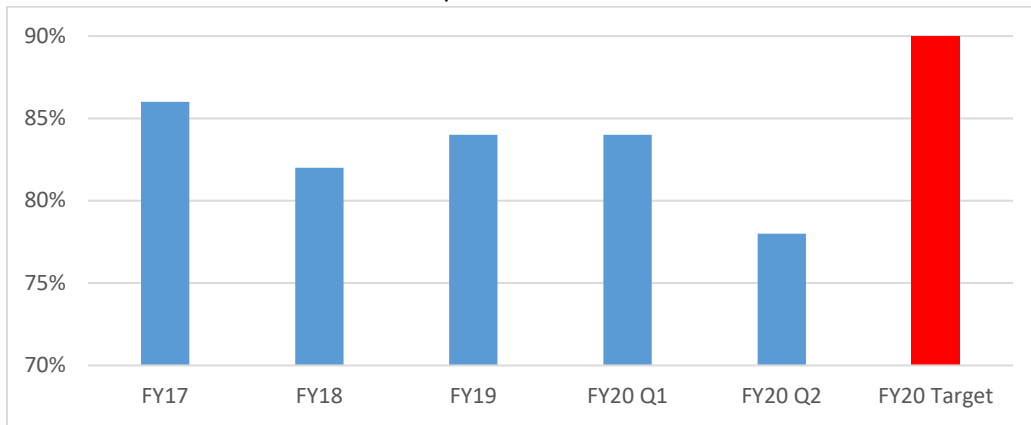
PERFORMANCE MEASURE #2

Percent of residents who remained in the community six-months following a nursing home care transition.

Results

FY17	FY18	FY19	FY20 Q1	FY20 Q2	FY20 Q3	FY20 Q4	FY20 Total	FY20 Target
86%	82%	84%	84%	78%				90%

Graph of Data Above



MEASURE DESCRIPTION: The percent of residents who left a nursing facility and have remained in the community six months after the transition.

DATA SOURCE/METHODOLOGY: Source of Data: Social Assistance Management System (SAMS) database captures data entered into the system.

STORY BEHIND THE DATA: The Care Transition Bureau (CTB) residents requesting short-term transition assistance from a nursing facility who remained in the community during the six month follow-up has decreased from our last reporting period from 84% to 78%, causing CTB to not meet the 90% target.

Although, we had a decrease on our performance measure this quarter, the Bureau has begun to see an increase in referrals from nursing home residents who want to receive transition advocacy support services. Although, the numbers reflect a decrease, we continue to serve New Mexico nursing facility residents by advocating for their discharge to the community. The CTB continues to provide education on those services provided by our program, to nursing facilities across New Mexico.

The CTB continues to provide training/program education, to Nursing Facility Social Service Directors and Administrators. In providing on-going education, we will increase the number of residents served by our services. The CTB Supervisors continue to work with the three Centennial Care 2.0 contractors in the submission of referrals to our program. It is the goal of the CTB to continue providing outreach and education to increase the number of residents served by our Bureau.

In addition, the CTB Supervisors participated in the Health Para Todos, Radio Que Suave radio show with our Department Secretary-Designate, Katrina Hotrum-Lopez. The radio show focused on the services provided by the CTB. We provided a detailed description of the service deliveries, as well as our collaboration with the three Medicaid MCOs, to best serve eligible New Mexicans, in order to increase and enhance the amount of New Mexico residents that access our services.

During the second quarter, some of the factors that contributed to the 78% were:

- Residents experience significant wait times on housing options,
- During Part D open enrollment Care Transitions staff assisted with outreach events and call backs
- Residents passing away,
- Residents refusing services, and
- Residents who returned to a nursing facility.

IMPROVEMENT ACTION PLAN:

- Ensure the Bureau assesses resident when a referral is made within 24-72 hours, so that individuals are adequately identified and needs are addressed.
- Implement a service and support action plan directed by the resident.
- Evaluate consumer file to determine if the correct service and support action plan was given to consumer based on assessment.
- Ensure all staff cases are followed-up within case timeframe to ensure services are in place.
- Continued training of coordinators in options counseling and assessment tool to include documentation in internal database.
- Follow-up for six months post-discharge to assist in resolving any issues and to ensure a successful transition.

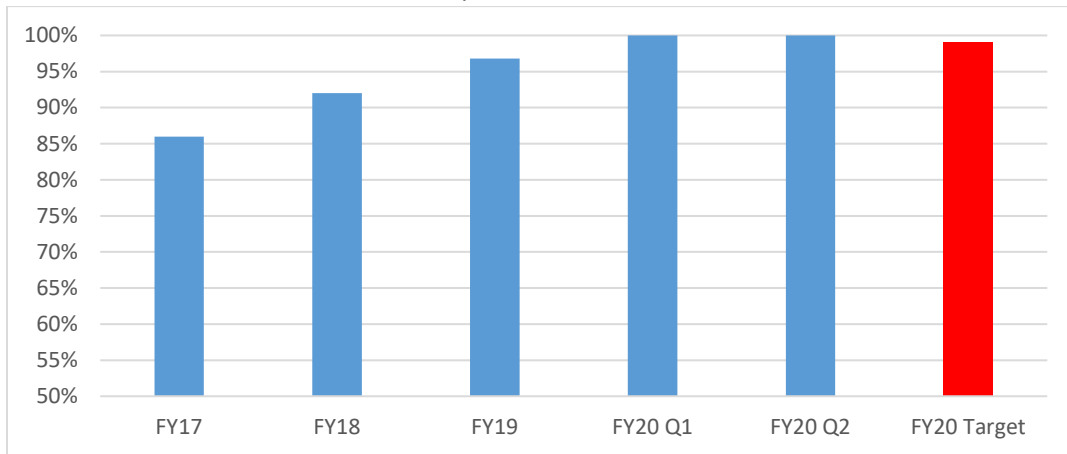
PERFORMANCE MEASURE #3

Percent of Ombudsman complaints resolved within sixty days.

Results

FY17	FY18	FY19	FY20 Q1	FY20 Q2	FY20 Q3	FY20 Q4	FY20 Total	FY20 Target
86%	92%	96.80%	100%	100%				99%

Graph of Data Above



MEASURE DESCRIPTION: The percent of complaints that the Ombudsmen resolved in 60 days or less.

DATA SOURCE/METHODOLOGY: A complaint is a concern relating to the health, safety, welfare or rights of one or more residents in nursing or assisted living facilities, which requires investigation and action. The number of complaints, the investigation findings and disposition of each complaint, and the dates when the complaints are opened and closed are tracked in Ombudsmanager, a database platform provided by WellSky. This information is exported to an excel spreadsheet to calculate the number of days it took to resolve each complaint, and the percentage of complaints that were resolved in 60 days or less.

STORY BEHIND THE DATA: In the second quarter of FY20, the Ombudsman Program continued to respond to and resolve complaints in a swift and timely manner. The Ombudsman Program resolved 186 complaints on behalf of residents in nursing and assisted living facilities, and provided 4,409 consultations to residents, facility staff, and community members. The 186 complaints were resolved in less than 60 days, with 73% of the complaints resolved in 5 days or less. The average number of days to resolve a complaint was 4.89 days. The number of complaints resolved in the second quarter is less than the first quarter. However, this is not unusual, as the Program often sees a drop-in complaint numbers during the second quarter. Although the number of complaints we resolved were lower than the first quarter, we made 7,516 repeat visits to residents in the second quarter, which was 1,305 more visits than the first quarter.

Discharges and evictions continue to be a common problem the Ombudsman Program encounters in nursing and assisted living facilities, which is why we track our advocacy around inappropriate facility-initiated discharges. In the second quarter of FY20, in 85% of the complaints where residents requested assistance with a facility-initiated discharge, Ombudsmen successfully advocated for the resident to remain in the facility.

The types of complaints in nursing and assisted living facilities are varied. Some of the types of complaints received are related to admission and discharge, autonomy and choice, care, food, living environment, activities, and social services. In the second quarter of FY20, the five most common complaint categories were: (1) Care, especially related to medication administration; (2) Discharges and evictions; (3) being treated with dignity and respect (4) Environment of the facility (includes temperature, supplies, furnishings, accessibility, housekeeping, etc.), and (5) Abuse, Gross Neglect, Exploitation. Ombudsmen also received a high number of complaints related to access to information and personal property.

IMPROVEMENT ACTION PLAN: At the end of the second quarter we hired a Metro Regional Coordinator Ombudsman. She has begun to take on her own cases, as well as supervision of the Volunteer Ombudsmen in her area. Unfortunately, we were unable to hire a Northwest Regional Coordinator in the second quarter as we had planned. The focus of the third quarter will be to hire our Northwest Regional Coordinator Ombudsman. In addition to serving the Northwest region, this position will assist in implementing a tribal outreach strategy so the Ombudsman Program can assess the long-term care needs of Native American elders and the role of the program in meeting those needs.

With the Metro and Northwest positions filled we can continue to build up our Volunteer Program and increase our presence in long term care facilities.

Adult Protective Services

Program Description, Purpose and Objectives:

To investigate reports of abuse, neglect, or exploitation of adults who do not have the capacity to protect themselves and to provide short-term services to prevent continued abuse, neglect, or exploitation.

APS is mandated by state law to provide a system of protective services and to ensure availability of those services to abused, neglected or exploited adults 18 years of age or older, who do not have the ability to self-care or self-protect. APS responds to situations in which functionally incapacitated adults are being harmed, are in danger of mistreatment, are unable to protect themselves, and have no one else to assist them. There are five APS regions serving all 33 counties of New Mexico.

Program Budget (in thousands):

FY19	General Fund	Other State Funds	Federal Funds	Other Transfers	TOTAL	FTE
200	8,197.0	-	-	-	8,197.0	132
300	1,285.2	-	-	2,498.6	3,783.8	
400	1,381.8	-	-	-	1,381.8	
TOTAL	10,864.0	-	-	2,498.6	13,362.6	

FY20	General Fund	Other State Funds	Federal Funds	Other Transfers	TOTAL	FTE
200	8,907.6	-	-	-	8,907.6	132
300	1,285.3	-	-	2,164.4	3,449.7	
400	1,460.4	-	-	11.9	1,472.3	
TOTAL	11,653.3	-	-	2,176.3	13,829.6	

Program Performance Measures:

1. Number of Adult Protective Services investigations of abuse, neglect or exploitation.
2. Percent of emergency or priority one investigations in which a caseworker makes initial face-to-face contact with the alleged victim within prescribed timeframes.
3. Number of active clients who receive home care or adult day care services as a result of an investigation of abuse, neglect or exploitation.

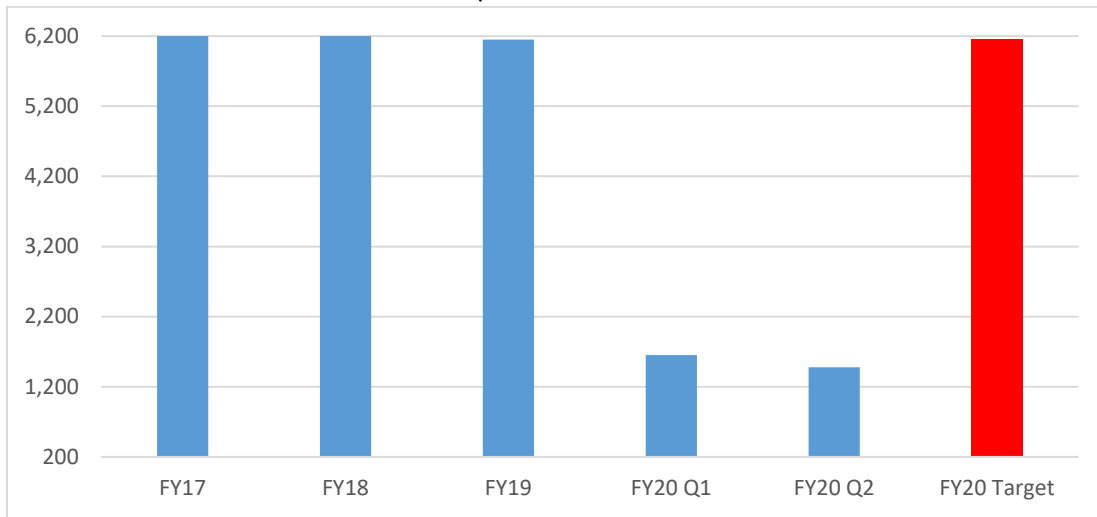
PERFORMANCE MEASURE #1

Number of Adult Protective Services investigations of abuse, neglect or exploitation

Results

FY17	FY18	FY19	FY20 Q1	FY20 Q2	FY20 Q3	FY20 Q4	FY20 Total	FY20 Target
6,233	6,671	6,150	1,651	1,480				6,150

Graph of Data Above



MEASURE DESCRIPTION: This measure is the number of investigations of abuse, neglect or exploitation initiated by Adult Protective Services in a given time period.

DATA SOURCE/METHODOLOGY: Adult Protective Services uses the WellSky Human Services system to maintain a data base of investigation information. To provide data for this performance measure APS uses a report within the WellSky Human Services system to extract the data.

STORY BEHIND THE DATA:

During the second quarter Adult Protective Services completed 1,480 investigations. We continue to be on target to the number of investigations completed for FY20.

IMPROVEMENT ACTION PLAN:

Adult Protective Services will continue to complete community outreach events to insure understanding of the services we provide.

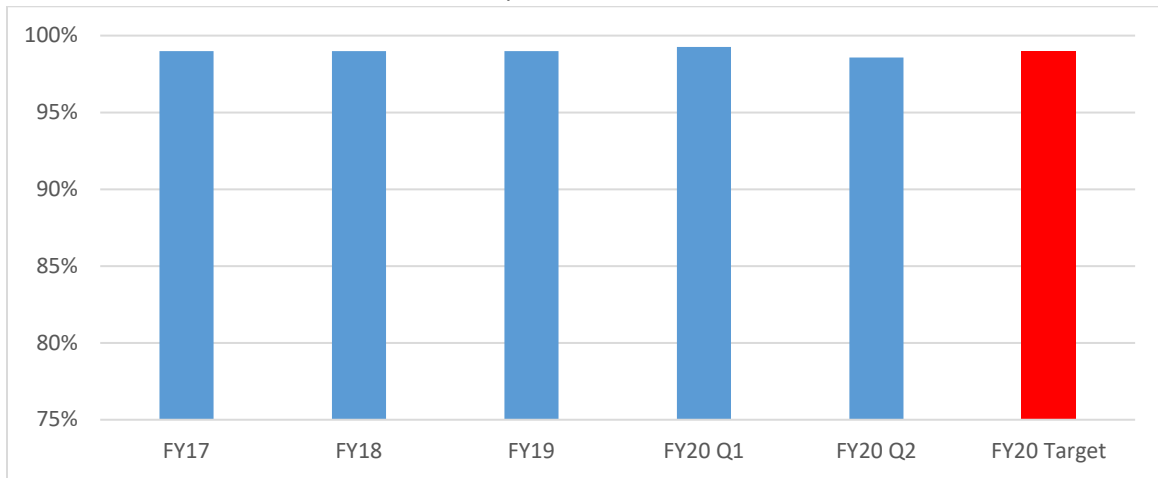
PERFORMANCE MEASURE #2

Percent of emergency or priority one investigations in which a caseworker makes initial face-to-face contact with the alleged victim within prescribed timeframes.

Results

FY17	FY18	FY19	FY20 Q1	FY20 Q2	FY20 Q3	FY20 Q4	FY20 Total	FY20 Target
99%	99%	99%	99.27%	98.58%				99%

Graph of Data Above



MEASURE DESCRIPTION: Reports to APS are assessed to determine priority. Cases assigned to emergency priority are when an alleged victim in a situation of serious harm or danger of death from abuse or neglect. Cases assigned to Emergency priority require that an APS caseworker make face-to-face contact with the alleged victim within three hours of assignment of the case. Cases assigned a Priority One status require an APS caseworker to make face-to-face contact within 24 hours of the assignment of the case. This measure reports how successful APS is in meeting these requirements.

DATA SOURCE/METHODOLOGY: Adult Protective Services uses the WellSky Human Services system to maintain a data base of investigation information. To provide data for this performance measure APS uses a report within the WellSky Human Services system to extract the data.

STORY BEHIND THE DATA:

Adult Protective Services strives to make face-to-face contact with clients in emergency situations as quickly as possible to provide much needed support services. During this quarter, Adult Protective Services experienced an influx of newly hired employees, and with that the need to develop their skills by providing ongoing training. APS management has been focusing on ensuring all new hires and existing staff gain a clear understanding of APS' computer system, to ensure case workers are properly documenting face-to-face contact with clients.

IMPROVEMENT ACTION PLAN:

Supervisors will continue to review new employees face-to-face contact data on a monthly basis to ensure compliance with timeframes.

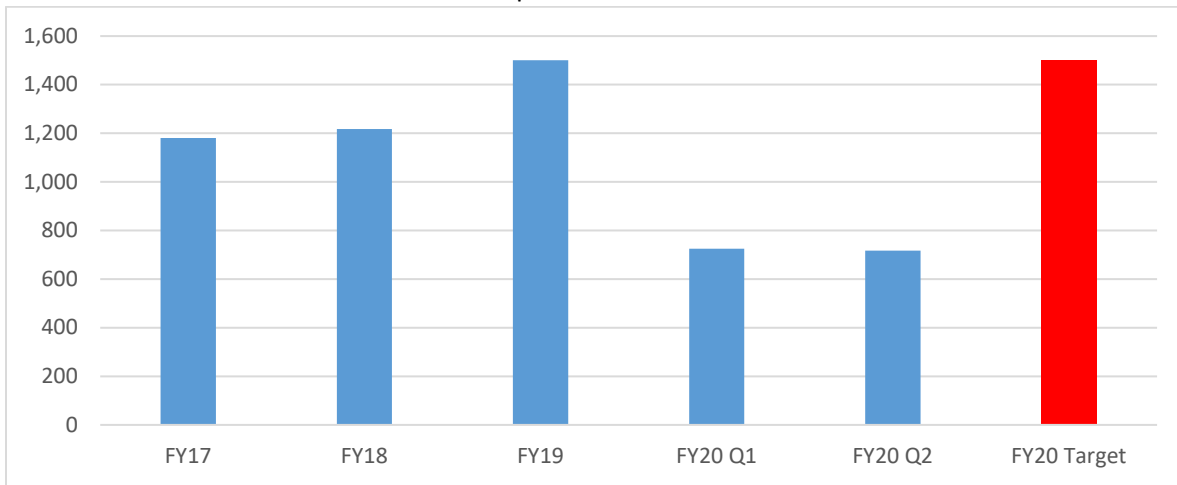
PERFORMANCE MEASURE #3

Number of active clients who receive home care or adult daycare services as a result of an investigation of abuse, neglect or exploitation.

Results

FY17	FY18	FY19	FY20 Q1	FY20 Q2	FY20 Q3	FY20 Q4	FY20 Total	FY20 Target
1,181	1,217	1,500	725	717				1,500

Graph of Data Above



MEASURE DESCRIPTION: Adult Protective Services provides home care services or day care services to clients to stay in their communities and mitigate ongoing abuse, neglect or exploitation.

DATA SOURCE/METHODOLOGY: Home care and day care contractors provide quarterly reports that includes the number of clients.

STORY BEHIND THE DATA:

Adult Protective Services provides home care or day care services to provide supportive services for victims of abuse, neglect and/or exploitation. Previous year’s data was counted on a cumulative basis. . The current data is the number of clients (on average) served monthly and provides a more accurate measurement of clients served during the quarter.

IMPROVEMENT ACTION PLAN:

Adult Protective Services will continue to provide home care and day care services to clients.

Aging Network

Program Description, Purpose and Objectives: The Aging Network Division (AND) is comprised of the Senior Services Bureau (SSB) and Senior Employment Program Bureau (SEP) and houses the budgets for the Office of Alzheimer’s and Dementia Care, and the Pueblos, Tribes and Navajo Nation.

The purpose of the Aging Network, is to provide supportive social and nutritional services for older individuals and persons with disabilities, so they can remain independent and involved in their communities. Also, to provide training, education and work experience to older individuals, so they can enter or re-enter the workforce and receive appropriate income and benefits. Some of the services supported include congregate and home delivered meals, transportation, social services and health promotion, senior employment, and volunteer programs.

AND serves older adults through cooperative arrangements with New Mexico Area Agencies on Aging (AAA's), for the provision of supportive services, such as congregate and home-delivered meals. The AAA's contract with local and tribal governments and private organizations, to deliver services throughout New Mexico.

Program Budget (in thousands):

FY19	General Fund	Other State Funds	Federal Funds	Other Transfers	TOTAL	FTE
200	1,122.6	34.9	266.9	-	1,424.4	16
300	621.2	10.0	-	-	631.2	
400	24,248.9	70.9	10,506.6	-	34,826.4	
TOTAL	25,992.7	115.8	10,773.5	-	36,882.0	

FY20	General Fund	Other State Funds	Federal Funds	Other Transfers	TOTAL	FTE
200	608.3	34.9	555.3	-	1,198.5	16
300	622.2	10.0	-	-	632.2	
400	27,787.0	70.9	10,506.6	-	38,364.5	
TOTAL	29,017.5	115.8	11,061.9	-	40,195.2	

Program Performance Measures:

1. Percent of older New Mexicans whose food insecurity is alleviated by meals received throughout the Aging Network.
2. Number of hours of caregiver support provided.

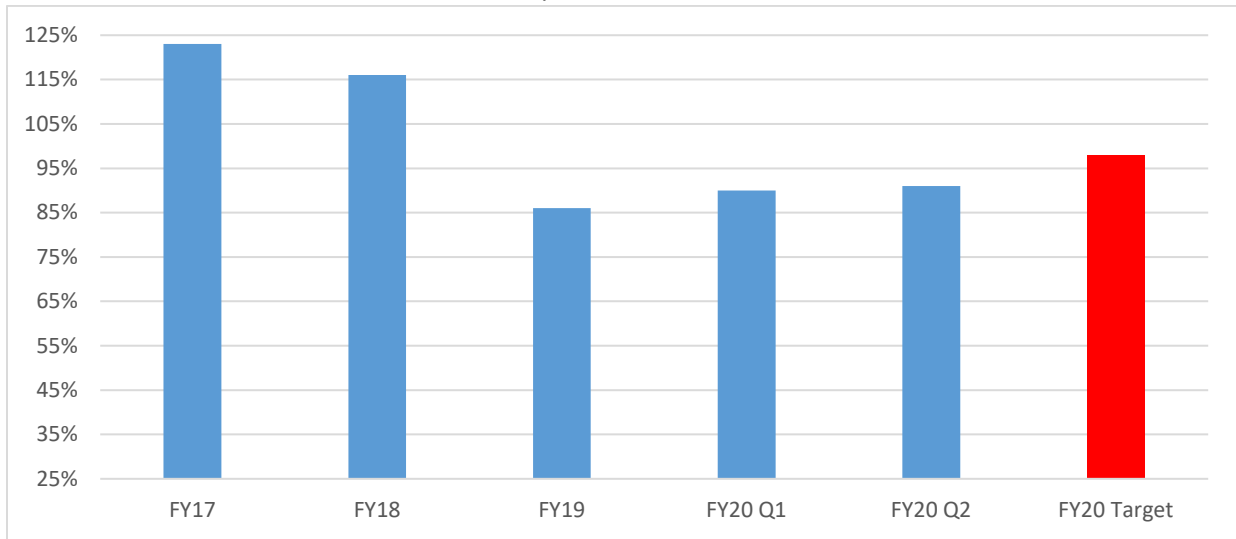
PERFORMANCE MEASURE #1

Percent of older New Mexicans whose food insecurity is alleviated by meals received throughout the Aging Network.

Results

FY17	FY18	FY19	FY20 Q1	FY20 Q2	FY20 Q3	FY20 Q4	FY20 Total	FY20 Target
123%	116%	86%	90%	91%				98%

Graph of Data Above



MEASURE DESCRIPTION: This performance measure indicates the extent to which congregate and home-delivered meals are alleviating food insecurity amongst New Mexicans age 60 and older (age 55 and older in tribal communities). Food insecurity is defined by the U.S. Department of Agriculture (USDA) as limited access to adequate food due to lack of money and other resources

DATA SOURCE/METHODOLOGY: Source of Data: Area Agencies on Aging and service providers. Aging Network meal providers serve congregate and home-delivered meals to consumers throughout the state, including in rural and tribal communities. The providers report numbers of meals and consumers served to the area agencies, which, in turn, report them to the ALTSD utilizing a WellSky database.

STORY BEHIND THE DATA: AND serves older adults through cooperative arrangements with New Mexico Area Agencies on Aging (AAA's), for the provision of supportive services, such as congregate and home-delivered meals. The AAA's contract with local and tribal governments and private organizations, to deliver services throughout New Mexico. Home Delivered Meals reduce food insecurity throughout New Mexico. During FY20 Quarter 2—512,626 home delivered meals were provided to 8,581 older New Mexicans and 414,193 Congregate Meals were provided. There was a total of 24,700 unduplicated consumers for congregate meals.

IMPROVEMENT ACTION PLAN:

Action	Responsibility	Timeline
1. Issue Area Plan Guidelines	ALTSD	2nd Quarter (Issued)
2. Area agencies develop plans	Area Agencies on Aging	3rd Quarter
3. Approve plans	ALTSD	3rd Quarter
4. Service delivery and reporting	Area Agency Contract Service Providers	Monthly
5. Training	ALTSD and Area Agencies on Aging	Quarterly

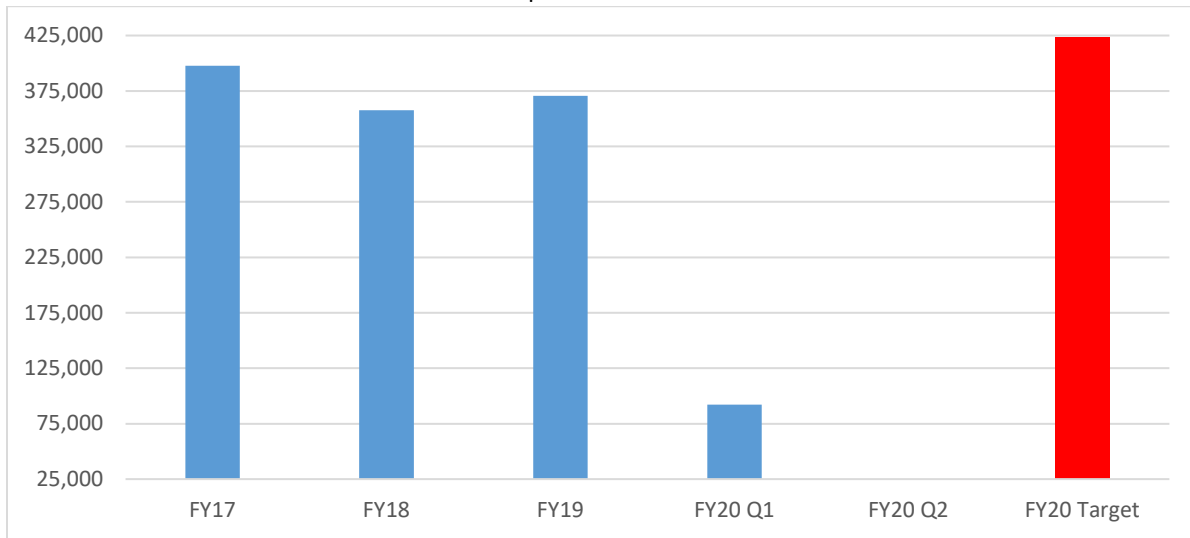
PERFORMANCE MEASURE #2

Number of hours of caregiver support

Results

FY17	FY18	FY19	FY20 Q1	FY20 Q2	FY20 Q3	FY20 Q4	FY20 Total	FY20 Target
397,598	357,721	370,538	92,167	86,122				423,000

Graph of Data Above



MEASURE DESCRIPTION: Caregiver support is a strategic priority for ALTSO. Services reported under this measure include home care, adult day care, respite care, and other support services. The measure expanded last year to include training, counseling and support groups, in order to more comprehensively reflect the wide array of support services being provided to New Mexico caregivers. The training data reported includes evidence-based caregiver training, such as that provided through the Savvy Caregiver training program. In addition to the services provided by area agency contract providers, this measure includes services provided by the Alzheimer’s Association, New Mexico Chapter.

DATA SOURCE/METHODOLOGY: The training data reported includes evidence-based caregiver training, such as that provided through the Savvy Caregiver training program. In addition to the services provided by area agency contract providers, this measure includes services provided by the Alzheimer’s Association, New Mexico Chapter.

STORY BEHIND THE DATA: The purpose of the Aging Network, is to provide supportive social and nutritional services for older individuals and persons with disabilities, so they can remain independent and involved in their communities. During FY20 Quarter 2 the number of hours of caregiver support were—Respite Care=25,656; Adult Day Care=37,142; Homemaker=17,807; Other Support Services=5,517.

IMPROVEMENT ACTION PLAN:

Action	Responsibility	Timeline
1. Issue Area Plan Guidelines	ALTSD	3rd Quarter
2. Area agencies develop plans	Area Agencies on Aging	4th Quarter
3. Approve plans	ALTSD	4th Quarter
4. Service delivery and reporting	Area Agency Contract Service Providers	Monthly
5. Training	ALTSD and Area Agencies on Aging	Quarterly