



Michelle Lujan - Grisham
GOVERNOR

Katrina Hotrum - Lopez
CABINET SECRETARY

FY21 QUARTER #4 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 (ALTSD) 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 Aging and Long-Term Services Department's three primary goals and objectives for FY21 are:

Goal 1: Protect the population we serve.

Strategic Objective 1.1: Expand safe, high-quality options, and encourage innovation.

Strategic Objective 1.2: Improve access for constituents by expanding choices of care and service options.

Goal 2: Build and maintain a sustainable service delivery system.

Strategic Objective 2.1: Develop a high-quality array of service delivery alternatives.

Strategic Objective 2.2: Propose or revise guidance, consistent with law and supported by sound policy, to increase the usability and sustainability of the service delivery system.

Goal 3: Strengthen Program Infrastructure.

Strategic Objective 3.1: Strengthen and expand the Department's program infrastructure to meet the diverse constituent needs.

Strategic Objective 3.2: Promote equal and nondiscriminatory participation through outreach, education, access, and capacity building.

Key Strategic Plan Initiatives:

Protecting the population, we serve.

- The Long-Term Care Ombudsman Program (LTCOP) will continue to advocate for residents in facilities and address isolation and ensure safe visitation alternatives are in place.
- The Adult Protective Services Division (APS) will develop and implement its communication plan, conduct quarterly webinars for community partners, doing outreach on social media and will be partnering with the aging network and senior centers to ensure ongoing information sharing and encourage reporting by the public.
- The Aging Network Division (AND) will continue to work with AAA's to work with providers on implementing innovative solutions during the pandemic to provide services and meals to seniors.

Build and maintain a sustainable service delivery system.

- The Long-Term Care Ombudsman program will continue to expand its recruitment and partnership efforts and will continue to utilize the new volunteer portal to train prospective volunteers.
- The Consumer and Elder Rights Division (CERD) will continue to expand upon partnerships and will continue to increase the utilization of virtual and telephonic enhancements for its services so that each customer's concern is adequately addressed.

- APS will continue to work with AND to identify and build the capacity of adult services in rural areas.
- AND will initiate the identification of diverse populations who may have not previously sought services through ALTSD and begin partnerships with these organizations.

Strengthen Program Infrastructure.

- ALTSD will improve data collection and reporting in existing, disparate applications, while preparing to migrate to a modern, robust platform with the capability of sharing pertinent data across the different divisions with ALTSD.
- ALTSD will implement smartphone-based application – ALTSD ON-Demand, which will provide access to services via a smart phone device.
- AND will implement WellSky Service Scan, an application designed to capture service units easily utilizing a smart device to scan a barcode. Also, eFile Cabinet – a centralized database repository to collect and maintain contracts between ALTSD, the AAA’s and the volunteer services contract providers, sanctioned under the CNCN Ameri Corps/Senior Corps program, streamlining the auditing process by ensuring accuracy and efficiency.
- Consumer and Elder Rights Division will improve data collection and reporting in the short-term by enabling data sharing across application platforms within ALTSD.
- APS will mobilize staff to ensure better remote connectivity to Harmony and access to resources to conduct more efficient and effective investigations. Also, application improvements to ensure better handling of investigations regarding adult abuse, neglect, and exploitation.
- ALTSD ITD is migrating toward a cloud-based IT infrastructure, to provide improved access to remote employees, while also ensuring IT security protocols and practices are in line with industry standards and best practices.

AGENCY PROGRAMS

| | |
|--|-------------|
| CONSUMER AND ELDER RIGHTS DIVISION AND THE LONG-TERM CARE OMBUDSMAN PROGRAM | P592 |
| ADULT PROTECTIVE SERVICES | P593 |
| AGING NETWORK | P594 |

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):

| FY20 | General Fund | Other State Funds | Federal Funds | Other Transfers | TOTAL | FTE |
|-------|--------------|-------------------|---------------|-----------------|---------|-----|
| 200 | 1,621.0 | - | 995.0 | 1,200.0 | 3,816.0 | 50 |
| 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 | |

| FY21 | General Fund | Other State Funds | Federal Funds | Other Transfers | TOTAL | FTE |
|-------|--------------|-------------------|---------------|-----------------|---------|-----|
| 200 | 1,467.9 | - | 987.6 | 1,300.0 | 3,755.5 | 48 |
| 300 | 99.8 | - | 441.1 | - | 540.9 | |
| 400 | 114.2 | - | 530.1 | - | 644.3 | |
| TOTAL | 1,681.9 | - | 1,958.8 | 1,300.0 | 4,940.7 | |

Program Performance Measures Annual:

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 individuals provided short-term assistance that accessed services within 30 days of a referral from options counseling.
4. Percentage of facilities visited monthly.
5. Percent of ombudsman complaints resolved within sixty days.

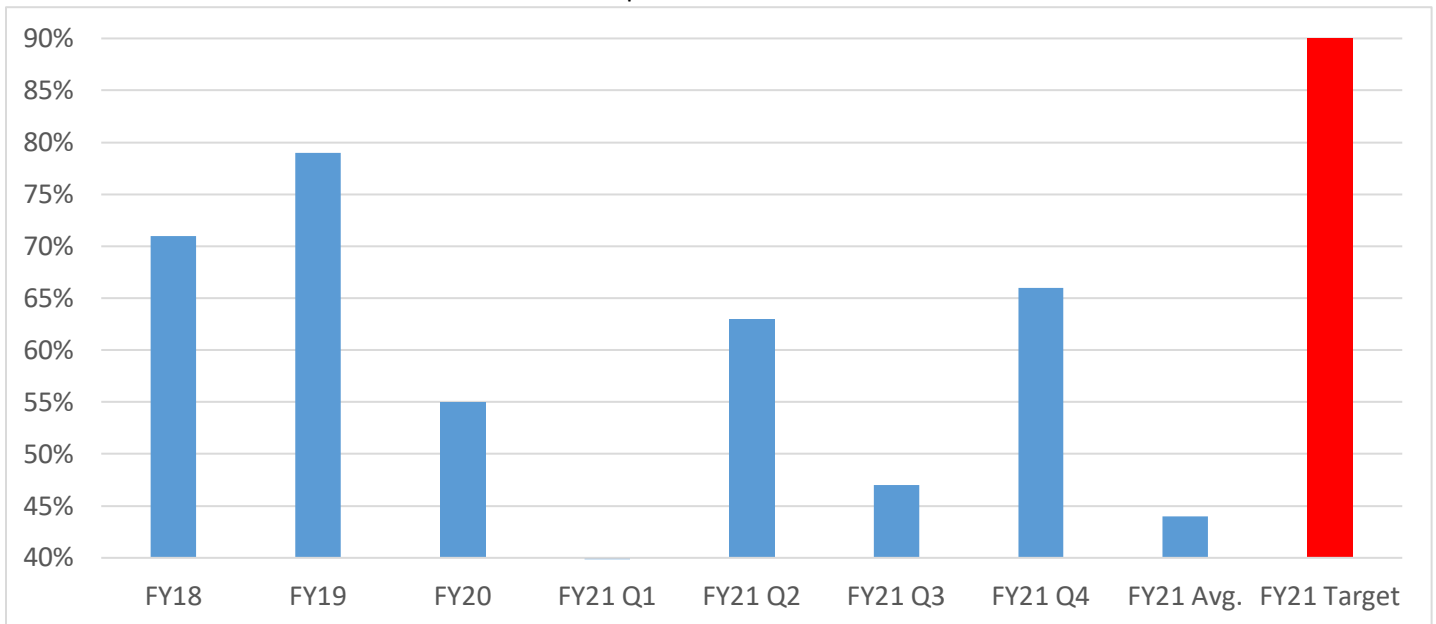
PERFORMANCE MEASURE #1

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

Results

| FY18 | FY19 | FY20 | FY21 Q1 | FY21 Q2 | FY21 Q3 | FY21 Q4 | FY21 Avg. | FY21 Target |
|------|------|------|---------|---------|---------|---------|-----------|-------------|
| 71% | 79% | 55% | 0% | 63% | 47% | 66% | 44% | 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: During the fourth quarter, 66% of the calls to the ADRC were answered by a live operator. The ADRC staff continued to work remotely and received 9,356 calls throughout the quarter, (*an average of 146 calls per day*). During this quarter we have been consistently assisting the New Mexico Department of Health with both registering and scheduling appointments for the COVID-19 vaccinations.

IMPROVEMENT ACTION PLAN: We will continue to work remotely, and report live data. There are two Option Counselor positions that are currently vacant; one of which we are hoping to hire for so that we might be closer to being fully staffed. Additionally, we are looking into upgrading our system to ICE, which would alleviate the issue of abandoned calls. With this system, instead of voicemails it would allow immediate callbacks and the option of CHAT and robochat, providing additional assistance to live calls.

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:

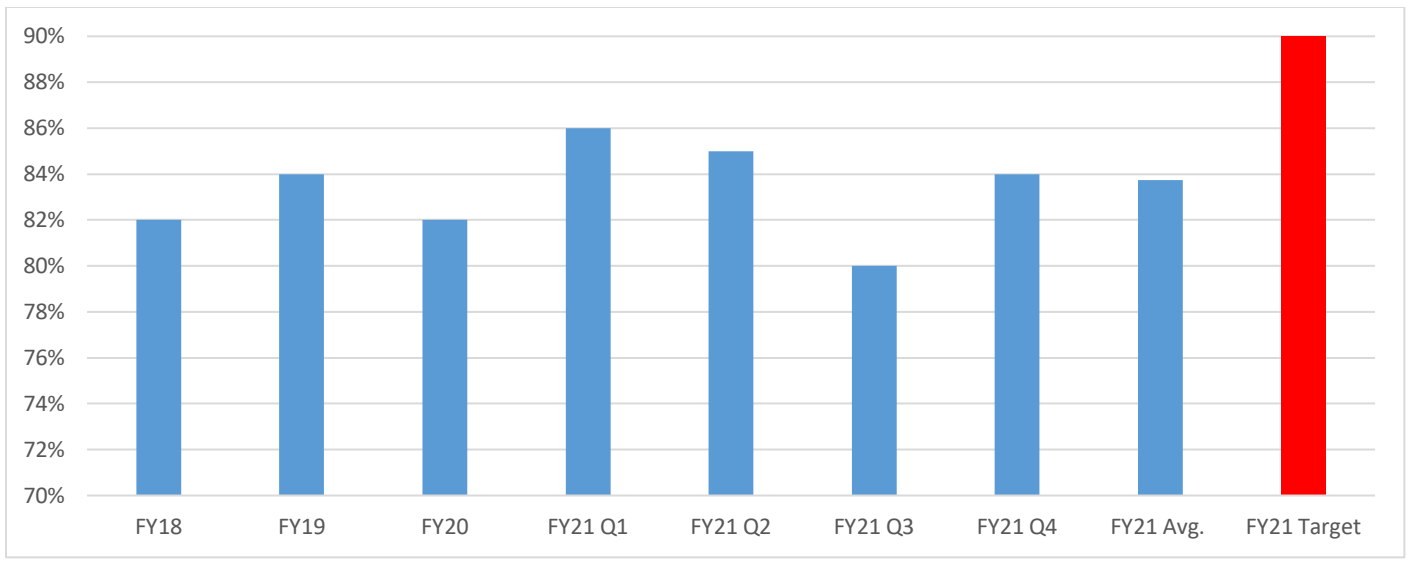
- Medicaid – 8,032 consumers
- Medicare – 5,250 consumers (benefit explanation, enrollment, and counseling).
- COVID – 833 consumers
- Prescription Drug Assistance –339 consumers
- VA - 118 consumers

PERFORMANCE MEASURE #2

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

| FY18 | FY19 | FY20 | FY21 Q1 | FY21 Q2 | FY21 Q3 | FY21 Q4 | FY21 Avg. | FY21 Target |
|------|------|------|---------|---------|---------|---------|-----------|-------------|
| 82% | 84% | 82% | 86% | 85% | 82% | 84% | 83.75% | 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: Data will be gathered through Wellsky, SAMS, and individual CTS case managers. This data is developed from the aggregate amount of people served and the wellbeing check provided after their reentry or transfer.

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 increased from our last reporting period from 82% to 84%. We attribute this increase to the COVID-19 vaccination rates across the state of New Mexico.

CTB continues to operate from a remote setting, creating new initiative ways to engage clients, families, facilities, and other agencies in an individualized transitional process. CTB continues to advocate for the rights and wishes of those wanting to leave to a less restrictive environment.

Due to these high engagement efforts, CTB has seen an increase of those who successfully transition into the community with proper services, supports and benefit education. CTB continues to build steady rapport with state agencies outside of Aging and Long-Term Services helping to increase knowledge of information and services entitled during and after the transitional process for individuals wanting to live in a less restrictive setting.

IMPROVEMENT ACTION PLAN: CTB will continue to work closely with the Aging and Disability Resource Center on education about program efforts, referral process and additional access to potential supports, in order to reach more residents across the state of New Mexico who may benefit from CTB advocacy and benefit education. CTB is also scheduled to provide one on one outreach and training to Social Workers across the state of New Mexico that are working within a long-term care setting in order to enhance their knowledge on program advocacy, community reintegration process, and overall goals for individuals wanting to reintegrate back into a less restrictive environment.

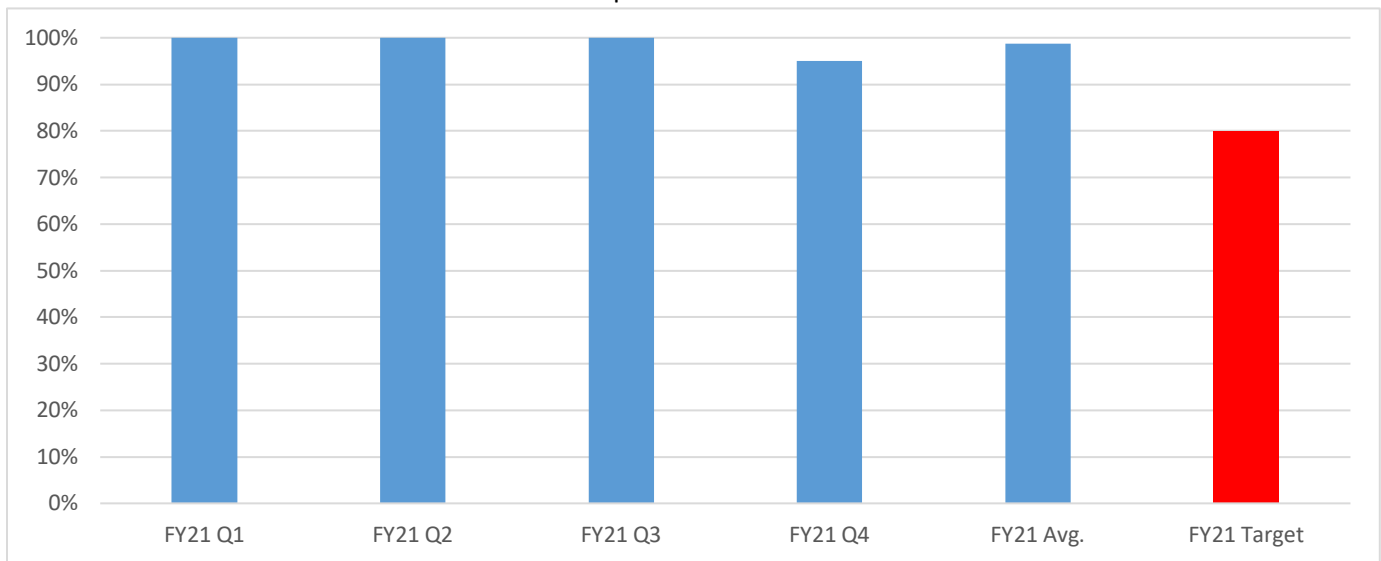
PERFORMANCE MEASURE #3

Percent of Individuals provided short-term assistance that accessed service within 30 days of a referral from options counseling.

Results

| FY18 | FY19 | FY20 | FY21 Q1 | FY21 Q2 | FY21 Q3 | FY21 Q4 | FY21 Avg. | FY21 Target |
|------|------|------|---------|---------|---------|---------|-----------|-------------|
| N/A | N/A | N/A | 100% | 100% | 100% | 95% | 98.75% | 80% |

Graph of Data Above



MEASURE DESCRIPTION: This measure identifies how many individuals were reached through the referral process.

DATA SOURCE/METHODOLOGY: Data will be gathered through Wellsky, SharePoint, and Short-Term Assistance Program. CTS will match this information to monthly staffing sheets.

STORY BEHIND THE DATA: The percentage of Individuals provided short-term assistance that accessed service within 30 days of a referral from options counseling decreased to 95%. One individual did not access services within 30 days due to required forms not returned within that timeframe.

IMPROVEMENT ACTION PLAN: The program is reaching out to community partners to provide education about the services and encouraging direct referrals from these partners. The program is continuing to reach out to partner organizations to inform about short-term assistance and increase the number of referrals for constituent needs.

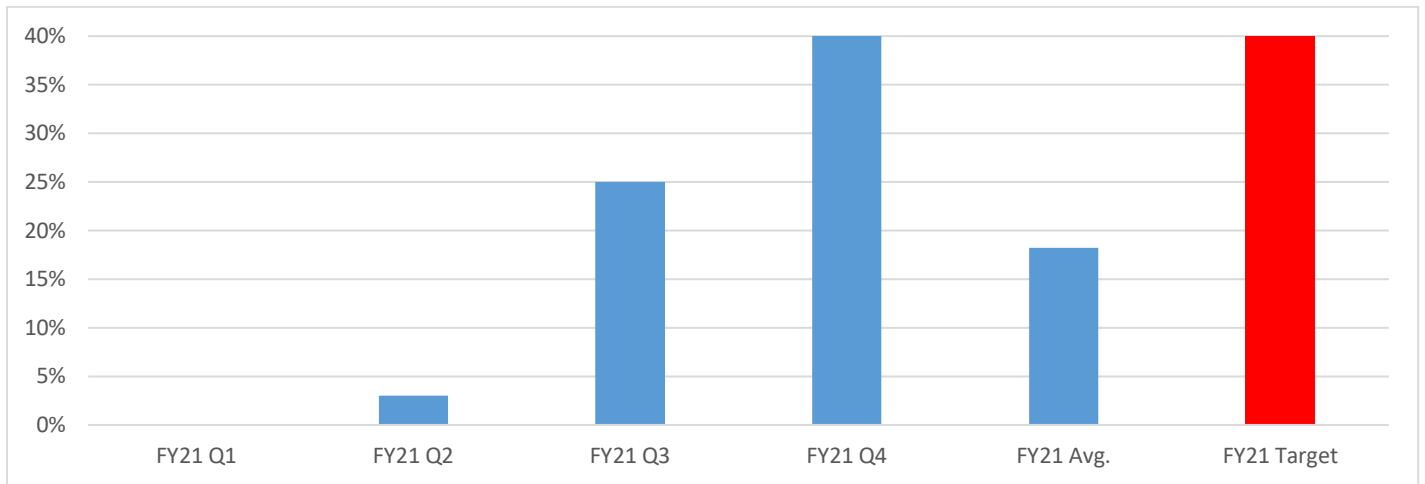
PERFORMANCE MEASURE #4

Percent of Facilities Visited Monthly

Results

| FY18 | FY19 | FY20 | FY21 Q1 | FY21 Q2 | FY21 Q3 | FY21 Q4 | FY21 Avg. | FY21 Target |
|------|------|------|---------|---------|---------|---------|-----------|-------------|
| N/A | N/A | N/A | 0 | 3% | 25% | 45% | 18.25% | 40% |

Graph of Data Above



MEASURE DESCRIPTION: This measure identifies how often the Ombudsman completes in-person visits to nursing and assisted living facilities, on a monthly basis.

DATA SOURCE/METHODOLOGY: The OmbudsManager database is a comprehensive nursing home complaint and case management system that allows users to manage facility data, complaints, complainants, activities, residents, investigations, and resolutions. OmbudsManager fully automates National Ombudsman Reporting Systems (NORS) reporting. All complaint automated reports and statistics are aggregated automatically into the format required by the Federal Administration on Aging. OmbudsManager is the industry standard for nursing home complaint management and is used by 34 State Long-Term Care Ombudsman offices throughout the country. During the COVID-19 pandemic, the program conducted closed-window visits, and communicated with residents over the phone and via video tablets. However, these communications with residents were not counted toward in-person visits for the purposes of this reporting measure.

STORY BEHIND THE DATA: Public health orders prevented entry into facilities during the first quarter of the fiscal year. Ombudsman may now enter facilities, as long as those facilities have not had a new COVID-19 positive resident or staff member within the past 14 days. Infections within facilities continued to prevent in-person visits during the second and third quarters.

IMPROVEMENT ACTION PLAN: The Ombudsman program will continue to conduct in-person visits to facilities that are free from COVID-19 infections.

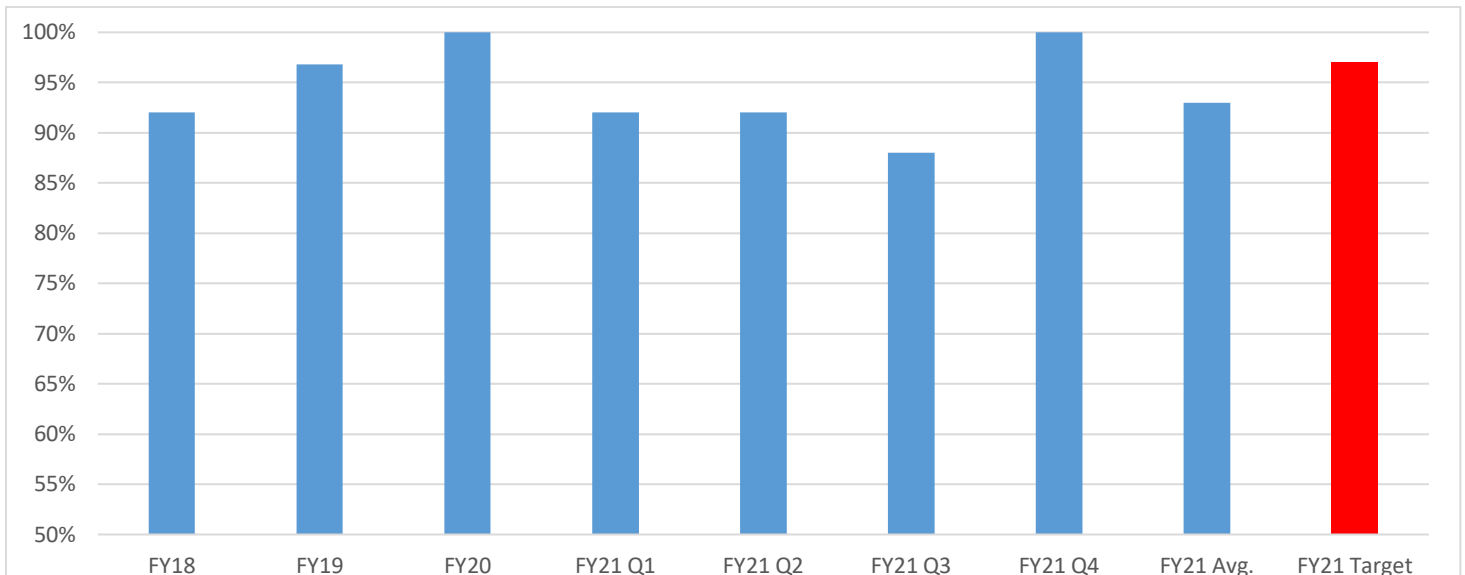
PERFORMANCE MEASURE #5

Percent of Ombudsman complaints resolved within sixty days.

Results

| FY18 | FY19 | FY20 | FY21 Q1 | FY21 Q2 | FY21 Q3 | FY21 Q4 | FY21 Avg. | FY21 Target |
|------|-------|------|---------|---------|---------|---------|-----------|-------------|
| 92% | 96.8% | 100% | 92% | 92% | 88% | 100% | 93% | 97% |

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: Although the first through third quarters failed to meet the percentage goal, the average time to close a complaint was three days. Therefore, it appears that a small number of complaints-that took far longer to close due to complexity or complaint specifics- account for the lower overall quarterly percentages.

IMPROVEMENT ACTION PLAN: Regional coordinators will take a refresher training on ensuring that closed complaints are entered into Ombudsmanager, in the event that data entry is a source of the problem.

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):

| FY20 | General Fund | Other State Funds | Federal Funds | Other Transfers | TOTAL | FTE |
|--------------|-----------------|-------------------|---------------|-----------------|-----------------|-----|
| 200 | 8,907.6 | - | - | - | 8,907.6 | 130 |
| 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 | |

| FY21 | General Fund | Other State Funds | Federal Funds | Other Transfers | TOTAL | FTE |
|--------------|-----------------|-------------------|---------------|-----------------|-----------------|-----|
| 200 | 9,793.8 | - | - | 0 | 9,793.8 | 127 |
| 300 | 1,399.1 | - | - | 2,164.4 | 3,563.5 | |
| 400 | 184.4 | - | - | 11.9 | 196.3 | |
| TOTAL | 11,377.3 | - | - | 2,176.3 | 13,553.6 | |

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. Percentage of repeat abuse, neglect, or exploitation cases within six months of a substantiation of an investigation.
4. Number of outreach presentations conducted in the community within adult protective services' jurisdiction.
5. Percentage of contractor referrals in which services were implemented within two weeks of the initial referral.
6. Number of referrals made to and enrollments in home care and adult day care services as a result of an investigation of abuse, neglect, or exploitation.
7. Percentage of priority two investigations in which a caseworker makes initial face to face contact with the alleged victim within prescribed time frames.

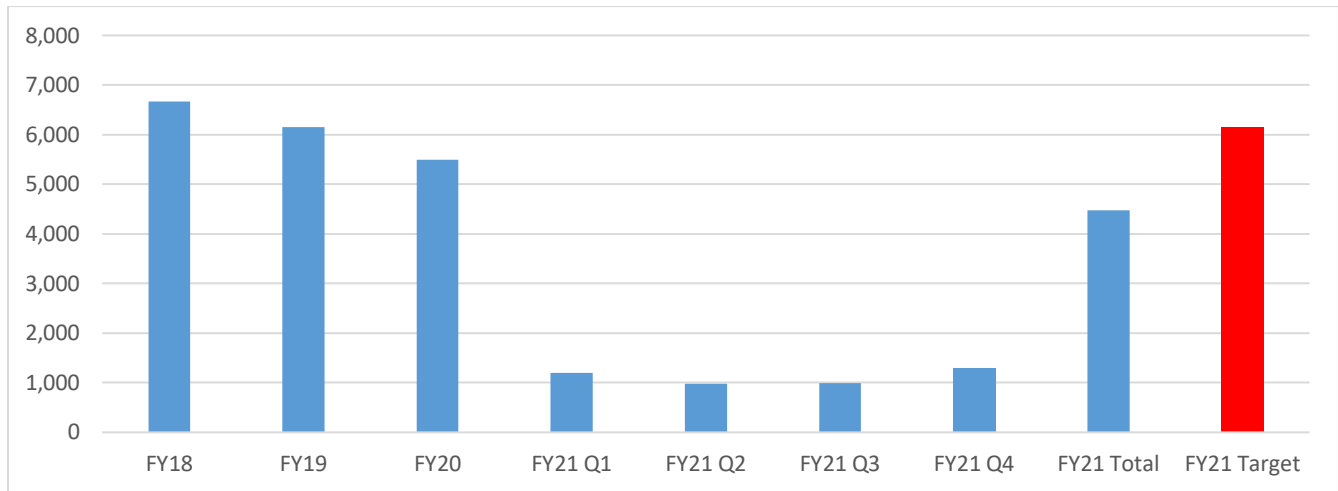
PERFORMANCE MEASURE #1

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

Results

| FY18 | FY19 | FY20 | FY21 Q1 | FY21 Q2 | FY21 Q3 | FY21 Q4 | FY21 Total | FY21 Target |
|-------|-------|-------|---------|---------|---------|---------|------------|-------------|
| 6,233 | 6,671 | 5,494 | 1204 | 980 | 992 | 1294 | 4,355 | 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: APS Division relies heavily on community-based referrals of abuse, neglect, and exploitation. The COVID-19 pandemic has limited opportunities for referrals, thus adversely impacting the number of intakes received by APS Intake.

IMPROVEMENT ACTION PLAN: APS has deployed a statewide screening process that enables all Investigative Caseworker Supervisors and Regional Managers to screen all intakes rather than limiting screening to the location where APS staff is located. This type of screening provides a more robust screening process and is the main contributor to the increased number of investigations in the 4th quarter. Additionally, APS will continue providing education and outreach to educate on making a referral to APS. Create more enhanced cross-reporting mechanisms to ensure those that meet the APS investigation criteria are receiving an investigation. APS developed policies and procedures for safely conducting in-person investigations, when necessary.

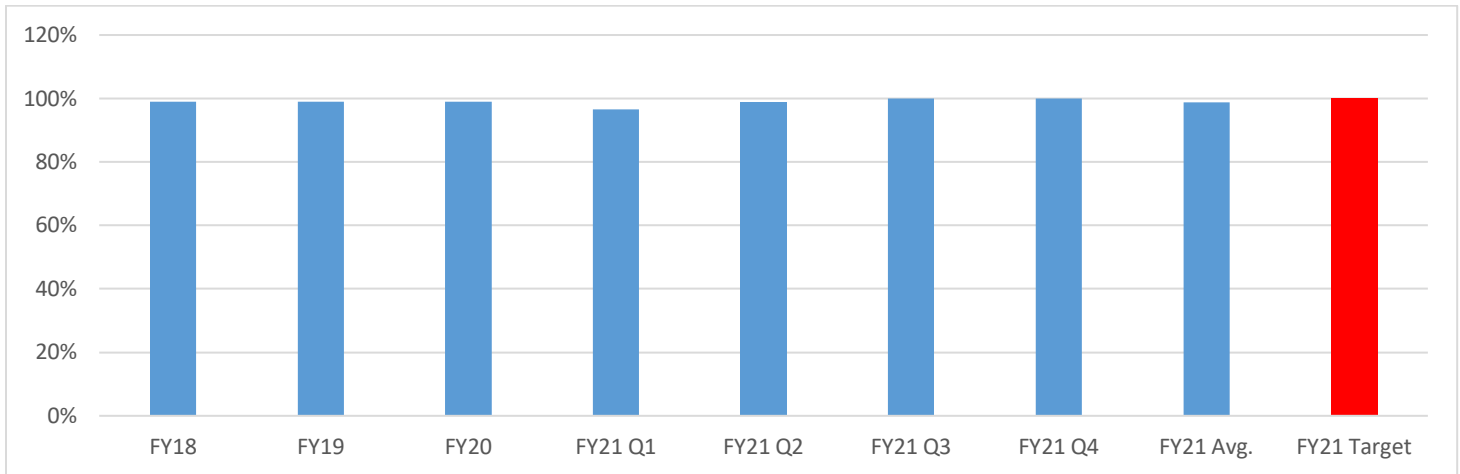
PERFORMANCE MEASURE #2

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

| FY18 | FY19 | FY20 | FY21 Q1 | FY21 Q2 | FY21 Q3 | FY21 Q4 | FY21 Avg. | FY21 Target |
|------|------|------|---------|---------|---------|---------|-----------|-------------|
| 99% | 99% | 99% | 96.56% | 98.86% | 100% | 100% | 98.86% | >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. The calculation used in this measure in each quarter is based off an average of the emergency investigations and priority one investigations.

STORY BEHIND THE DATA: APS continues to investigate allegations of abuse, neglect, and exploitation. The investigative caseworkers are still conducting in-person investigations on time while ensuring PPE use when entering homes to safeguard the clients and employees. Priority one referrals require a visit within 24-hours, and caseworkers are equipped with appropriate PPE, cleaning supplies, and screening methodology when making face-to-face contact. Additionally, the investigative caseworkers are required to submit monthly COVID-19 testing to ensure client safety.

IMPROVEMENT ACTION PLAN: ALTSD is working to secure vaccinations for APS staff and clients to maintain mission-critical supports to this vulnerable population.

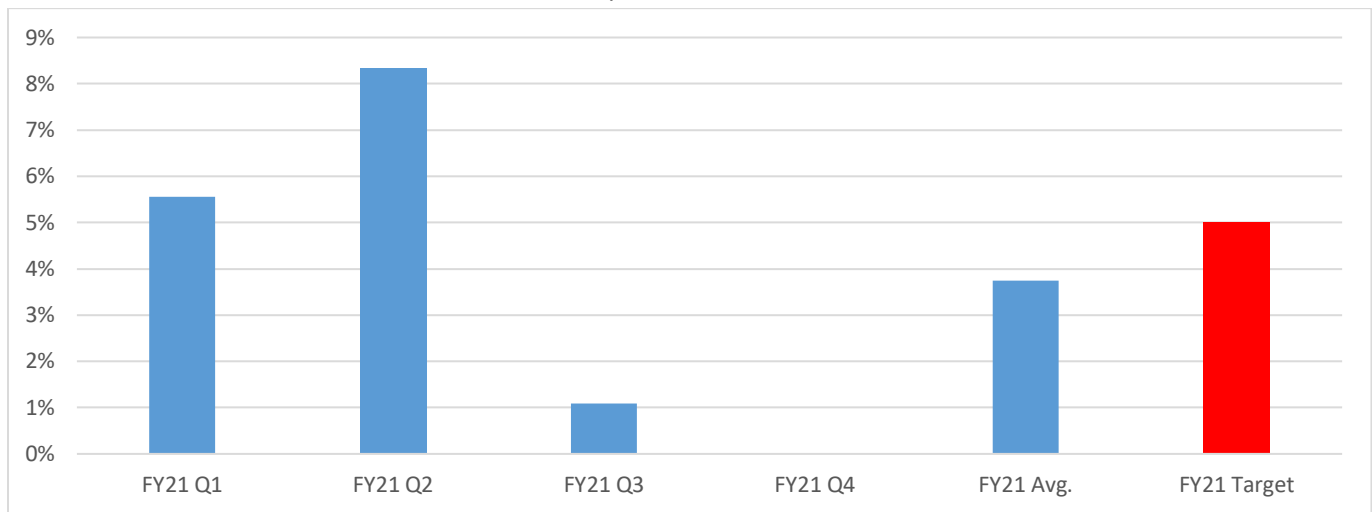
PERFORMANCE MEASURE #3

Percentage of repeat abuse, neglect, or exploitation cases within six months of a substantiation of an investigation.

Results

| FY18 | FY19 | FY20 | FY21 Q1 | FY21 Q2 | FY21 Q3 | FY21 Q4 | FY21 Avg. | FY21 Target |
|------|------|------|---------|---------|---------|---------|-----------|-------------|
| N/A | N/A | N/A | 5.56% | 8.33% | 1.09% | 0.00% | 3.74% | 5% |

Graph of Data Above



MEASURE DESCRIPTION: The percentage of those repeat cases of abuse, neglect, or exploitation that occur within six months of a substantiation of an investigation.

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: Fourth-quarter recidivism could be attributed to concern for older adults who are particularly vulnerable to the COVID-19 virus.

IMPROVEMENT ACTION PLAN: APS will continue to address the issues of abuse, neglect, or exploitation and do its due diligence in preventing repeat cases through public outreach and research behind the cases to validate whether the increase was in fact due to pandemic-related concerns.

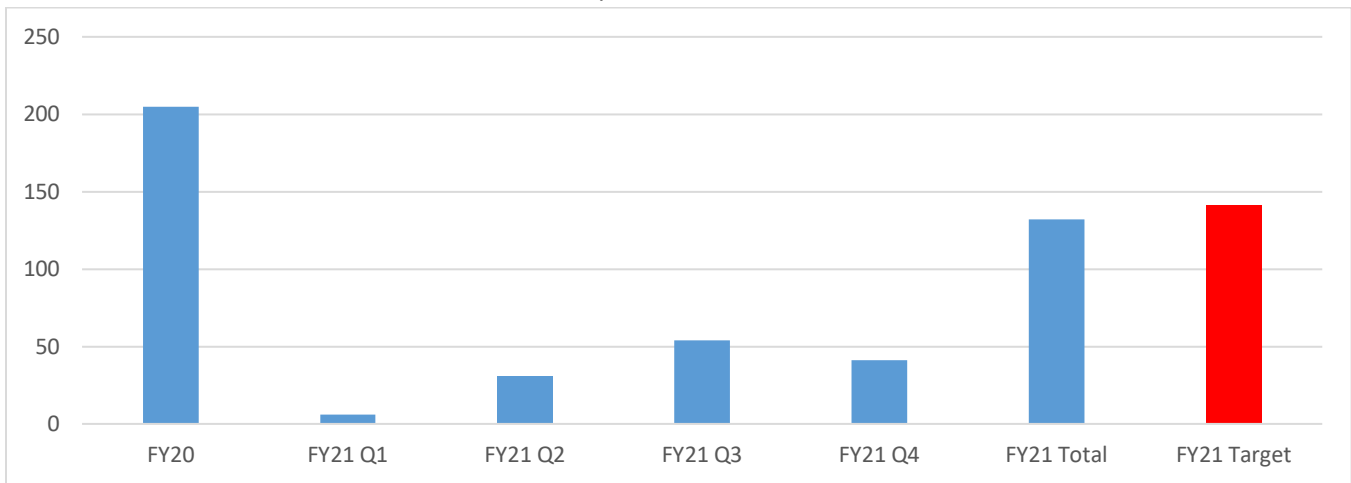
PERFORMANCE MEASURE #4

Number of Outreach Presentations conducted in the community within Adult Protective Services' jurisdiction.

Results

| FY18 | FY19 | FY20 | FY21 Q1 | FY21 Q2 | FY21 Q3 | FY21 Q4 | FY21 Total | FY21 Target |
|------|------|------|---------|---------|---------|---------|------------|-------------|
| N/A | N/A | 205 | 6 | 31 | 54 | 41 | 132 | 141 |

Graph of Data Above



MEASURE DESCRIPTION: The amount of outreach presentations conducted by APS staff within communities that align under within APS jurisdiction.

DATA SOURCE/METHODOLOGY: Adult Protective Services uses the WellSky Human Services system to maintain a data base of information. To provide data for this performance measure APS uses a report within the WellSky Human Services system to extract the data. Staff reports are also utilized to identify community outreach presentations.

STORY BEHIND THE DATA: During the last two quarters, APS pivoted and changed how it had historically conducted outreach and education. APS now requires adaptation of these presentations to virtual means and methods.

IMPROVEMENT ACTION PLAN: APS will continue its' social media campaign through Facebook and Twitter, providing information regularly to the public on the services APS delivers, recognizing abuse, neglect, and exploitation, and how to report. There was a change in structure in the outreach delivery processes within APS at the beginning of the quarter. However, APS will be reverting to a regionally based outreach approach. APS will also be presenting regularly on Area Agencies on Aging calls (held weekly throughout the pandemic), as well as other webinars to law enforcement agencies, district attorney's offices, hospitals, and the State Bar. APS will continue to explore other avenues to provide outreach to elders in need of services and to ensure knowledge of services available.

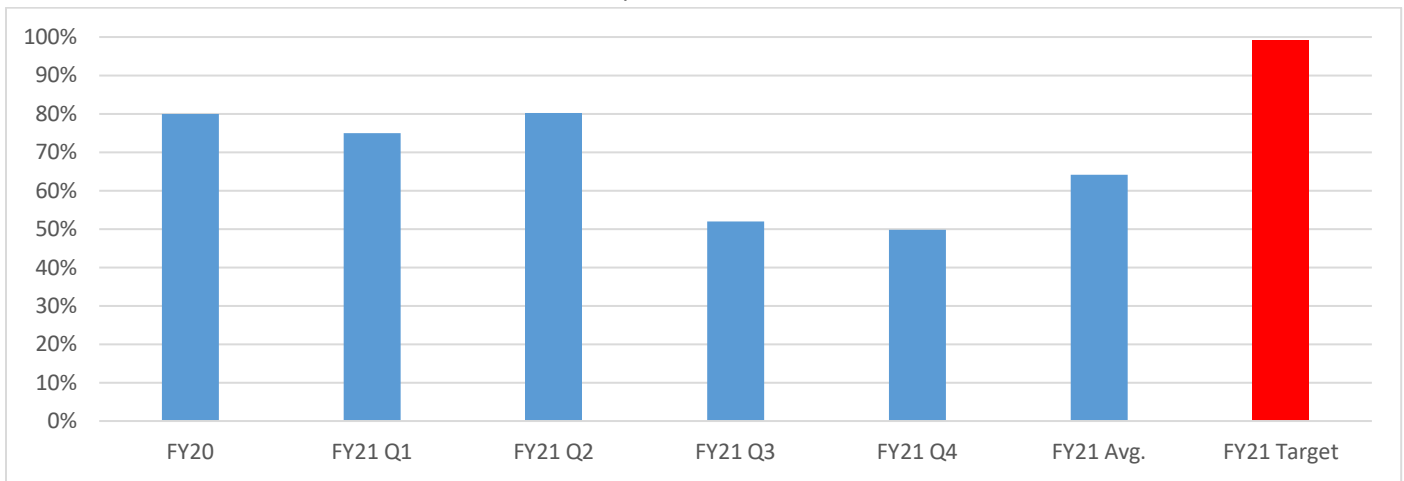
PERFORMANCE MEASURE #5

Percentage of contractor referrals in which services were implemented within two weeks of the initial referral.

Results

| FY18 | FY19 | FY20 | FY21 Q1 | FY21 Q2 | FY21 Q3 | FY21 Q4 | FY21 Avg. | FY21 Target |
|------|------|------|---------|---------|---------|---------|-----------|-------------|
| N/A | N/A | 80% | 75% | 80% | 52% | 49.72% | 64.19% | 99% |

Graph of Data Above



MEASURE DESCRIPTION: The number of contractor referrals in which services were implemented within two weeks/total number of referrals in which services were implemented.

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: The pandemic has created numerous challenges for APS, and appropriately assessing clients for services was one of these challenges. When a referral is made, the adult services contractors must contact the client and conduct their assessment. The pandemic caused fear in many people, particularly older adults we know are most vulnerable. Many APS clients were hesitant to allow the contractors in their homes to provide a proper assessment of needed services, (for example, some clients would only want to talk to the contractor from the door and at least 6 feet apart, which wouldn't allow them to enter the home and assess additional needs such as laundry and housekeeping needs). This was ultimately not a barrier to providing the services but a delay in determining appropriate needs. Lastly, there is a high need across the state for qualified caregivers. Many contracted home care contractors have significant staff shortages, which has caused implementing services more difficult.

IMPROVEMENT ACTION PLAN: APS will diligently work with contractors to implement services as fast as possible. There do not seem to be any barriers to implementing services with timeframes and proper safety protocols in place.

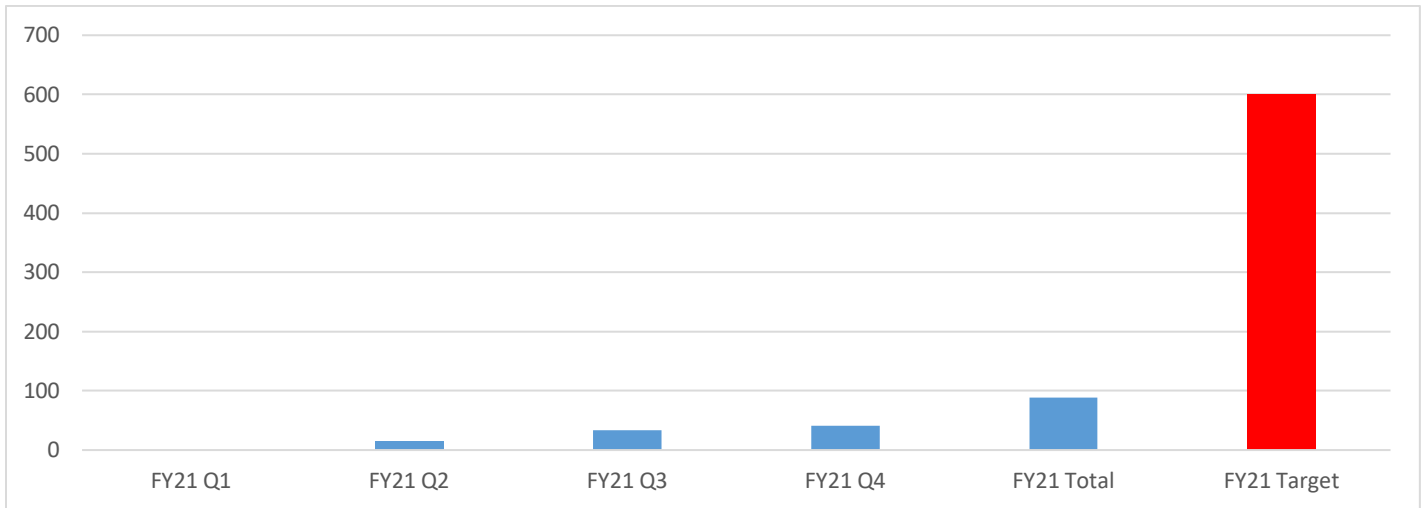
PERFORMANCE MEASURE #6

Number of referrals made to and enrollments in home care and adult day care services as a result of an investigation of abuse, neglect, or exploitation

Results

| FY18 | FY19 | FY20 | FY21 Q1 | FY21 Q2 | FY21 Q3 | FY21 Q4 | FY21 Total | FY21 Target |
|------|------|------|---------|---------|---------|---------|------------|-------------|
| N/A | N/A | N/A | *0 | 15 | 33 | 41 | 89 | 600 |

Graph of Data Above



MEASURE DESCRIPTION: This measure identifies the number of referrals and enrollments into home care and adult day services, as a result of an APS investigation into abuse, neglect, or exploitation.

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 4th quarter of FY21, there were 41 referrals and enrollments into home care and adult day services due to an APS investigation into abuse, neglect, or exploitation. Due to limitations and closures, referrals to providers have been limited. APS completes the community services waiver applications for all home and daycare referred clients. This added measure has contributed to an added factor to the decreased number of referrals. APS investigators can link Medicaid-funded services to APS clients before making a referral for APS-funded services.

** APS is resubmitting its 1st quarter key performance measure number for performance measure #6, as the amount of 153 was incorrectly submitted. The corrected number of zero, reflects the accurate total of referrals during the 1st quarter of FY21. The agency worked with GSD – State Purchasing Division to issue an Invitation to Bid (ITD), in order to obtain services in every county in the state. The process started in July and contracts were executed in October. This was a contributing factor in enrolling new clients for services since no providers were willing to bring clients into their offered services without a valid contract in place.*

IMPROVEMENT ACTION PLAN: APS will continue to identify when referrals are necessary and enroll clients on an as-needed basis. Additionally, referrals to providers will also continue as reopening across the state continues. APS anticipates with the reopening of adult day care providers across the state, the number of referrals will increase.

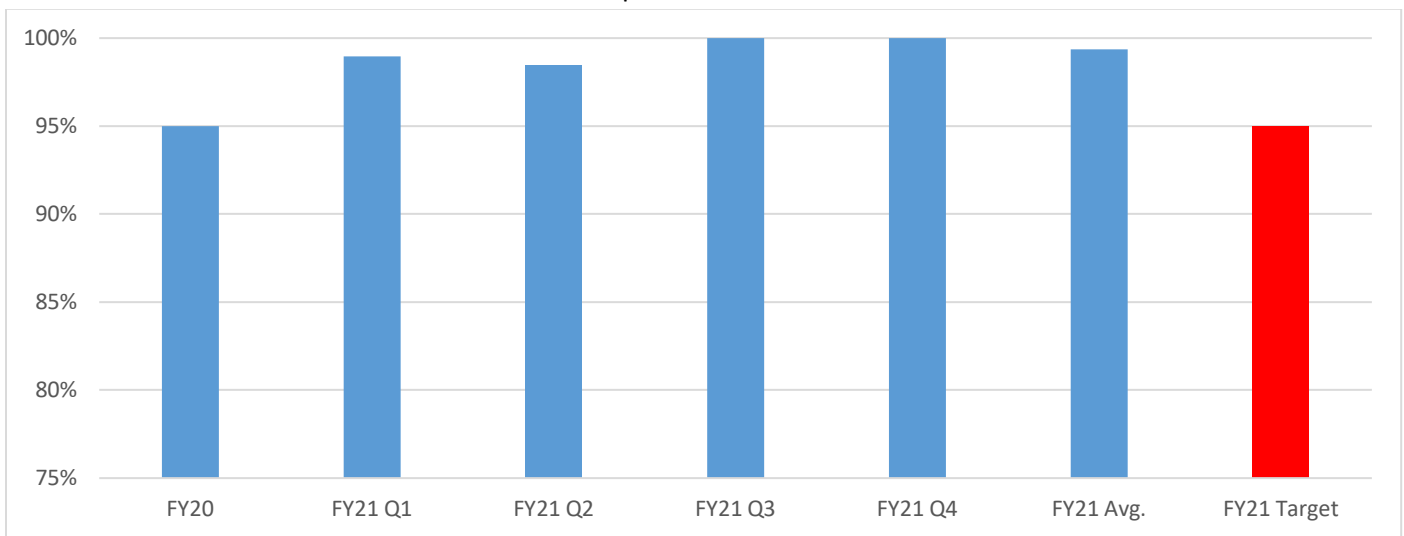
PERFORMANCE MEASURE #7

Percentage of Priority two investigations in which a case worker makes initial face to face contact with the alleged victim within prescribed time frames.

Results

| FY18 | FY19 | FY20 | FY21 Q1 | FY21 Q2 | FY21 Q3 | FY21 Q4 | FY21 Avg. | FY21 Target |
|------|------|------|---------|---------|---------|---------|-----------|-------------|
| N/A | N/A | 95% | 98.97% | 98.46% | 100% | 100% | 99.36% | 95% |

Graph of Data Above



MEASURE DESCRIPTION: Percentage of priority two investigations, where a case worker has made initial face-to-face contact with the alleged victim within the priority two investigative time frames. A priority two investigation is assigned no later than twenty-four hours from the time the referral is received and face to face contact with the alleged victim must be made no later than 5 calendar days after being received by the screening supervisor.

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: APS was able to meet priority two investigation time frames more quickly due to the additional time allowed for these investigations. The additional time gave caseworkers and opportunity to interview the alleged victim and coordinate a safe way to conduct the face-to-face visit; versus a priority one referral, which requires a face to face within 24 hours, and is slightly more difficult to navigate during the pandemic.

IMPROVEMENT ACTION PLAN: APS will diligently pursue these investigations within the timeframe as these referrals are made.

Aging Network

Program Description, Purpose and Objectives: The Aging Network Division (AND) is comprised of the Senior Services Bureau (SSB); AmeriCorps Seniors (Volunteer Programs)—Foster Grandparent (FGP), Senior Companion Program (SCP), and RSVP; and Senior Employment Programs Bureau (SEP). Additionally, AND houses the budgets for the Office of Alzheimer’s and Dementia Care and the Office of Indian Elder Affairs.

The Aging Network advocates for older adults, people with disabilities, families, and caregivers; funds services and supports provided primarily by networks of community-based programs; and invests in training, education, research, and innovation. This is accomplished by providing assistance on health and wellness, protecting rights, and preventing abuse, supporting consumer control, strengthening the networks of community-based organizations, funding research and services (like home-delivered meals, homemaker assistance, and transportation) to support independent living. Strengthening the Aging and Network includes promoting evidence-based programs and practices, enhancing diversity and cultural competency, improving quality of services, and targeting employment initiatives as a critical part of community inclusion to accessing meaningful and integrated employment. (ACL. Program Areas. Overview)

AND serves older adults, people with disabilities, families, and caregivers through contractual agreements with New Mexico Area Agencies on Aging (AAA's) and the AmeriCorps Seniors, for the provision of supportive services. The AAA's contract with local and tribal governments, and private organizations; to deliver services throughout New Mexico.

Program Budget (in thousands):

| FY20 | General Fund | Other State Funds | Federal Funds | Other Transfers | TOTAL | FTE |
|-------|--------------|-------------------|---------------|-----------------|----------|-----|
| 200 | 608.3 | 34.9 | 555.3 | - | 1,198.5 | 14 |
| 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 | |

| FY21 | General Fund | Other State Funds | Federal Funds | Other Transfers | TOTAL | FTE |
|-------|--------------|-------------------|---------------|-----------------|----------|-----|
| 200 | 462.0 | 34.9 | 555.3 | - | 1,052.2 | 14 |
| 300 | 1,237.2 | 10.0 | 0 | - | 1,247.2 | |
| 400 | 28,751.4 | 70.9 | 11,142.5 | - | 39,964.8 | |
| TOTAL | 30,450.6 | 115.8 | 11,697.8 | - | 42,264.2 | |

Program Performance Measures:

1. Percentage of older New Mexicans receiving congregate, and home delivered meals through Aging Network programs that are assessed with “high” nutritional risk.
2. Number of hours of services provided by senior volunteers, statewide.
3. Number of outreach events and activities to identify, contact and provide information about aging network services to potential aging network consumers who may be eligible to access senior services but are not currently accessing those services.
4. Number of meals served in congregate, and home delivered meal settings.
5. Number of transportation units provided.
6. Number of hours of caregiver support provided.

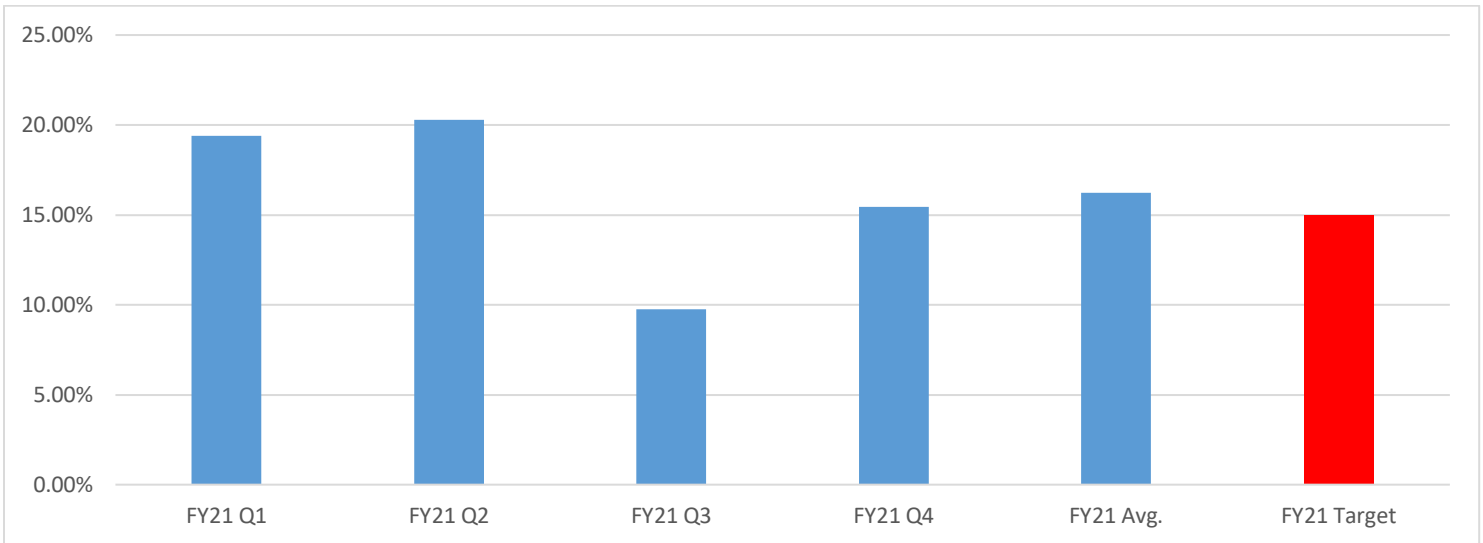
PERFORMANCE MEASURE #1

Percentage of older New Mexicans receiving congregate, and home delivered meals through aging network programs that are assessed with “high” nutritional risk.

Results

| FY18 | FY19 | FY20 | FY21 Q1 | FY21 Q2 | FY21 Q3 | FY21 Q4 | FY21 Avg. | FY21 Target |
|------|------|------|---------|---------|---------|---------|-----------|-------------|
| N/A | N/A | N/A | 19.41% | 20.28% | 9.74% | 15.43% | 16.22% | 15% |

Graph of Data Above



MEASURE DESCRIPTION: This measure reports the percentage of high nutritional risk older adults, people with disabilities, families, and caregiver New Mexicans, who received meals by congregate, home-delivered, and “grab and go” service during the timeframe identified.

DATA SOURCE/METHODOLOGY: The WellSky Aging and Disability Database is the repository used by providers contracted through the AAAs to document services. All AAAs, except for the Navajo Area Agency on Aging (NAAA), use this database to capture monthly service and expense data from the senior centers and providers, then report it to ALTSD. The Aging Network Division and the Office of Indian Elder Affairs compile the data for quarterly and annual performance measure reporting. The quarter one total for this measure only reflects PSAs 1–4, and PSA 6.

“High” nutritional risk is determined of those currently receiving nutritional services, congregate/grab-n-go or home delivered meals, scoring 6 or higher on the nutritional assessment section of the state required state needs assessment, based on ACL/OAA and NMAC regulations.

STORY BEHIND THE DATA: The Older Americans Act (OAA) Nutrition Program helps older Americans remain healthy and independent in their communities by providing meals and related services in a variety of community settings (including congregate facilities such as senior centers) and via home-delivery to older adults who are homebound due to illness, disability, or geographic isolation. (ACL. Program Areas. Innovations in Nutrition Programs and Services)

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 |

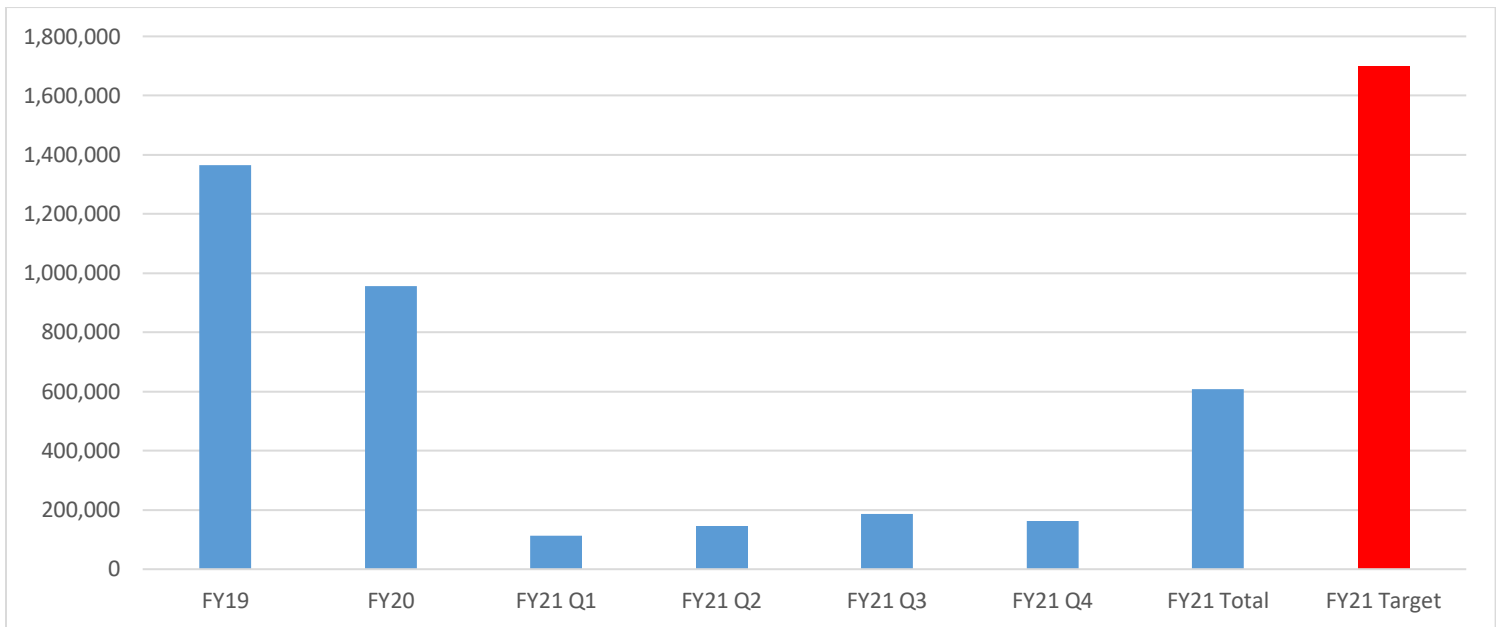
PERFORMANCE MEASURE #2

Number of hours of services provided by senior volunteers, statewide.

Results

| FY18 | FY19 | FY20 | FY21 Q1 | FY21 Q2 | FY21 Q3 | FY21 Q4 | FY21 Total | FY21 Target |
|------|-----------|------------|---------|---------|---------|---------|------------|-------------|
| N/A | 1,365,268 | 957,031.06 | 113,669 | 145,216 | 186,237 | 162,136 | 607,258 | 1,700,000 |

Graph of Data Above



MEASURE DESCRIPTION: Number of hours provided by New Mexico senior volunteers in the AmeriCorps Seniors: Foster Grandparent Program (FGP), Senior Companion Program (SCP), and the RSVP.

DATA SOURCE/METHODOLOGY: The statewide contractors for the AmeriCorps Seniors: FGP, SCP, and RSVP submit quarterly data to the Senior Services Bureau which is then compiled, verified, and reported for this performance measure.

STORY BEHIND THE DATA: The COVID-19 pandemic resulted in a significant data change after Governor, Michelle Lujan - Grisham declared a state of emergency on March 11, 2020. The state of New Mexico was granted a major disaster declaration by the Federal Government in March 2020. After this date, provisions of services were altered to comply with the public order and isolation guidance. FY 21 Quarter 4 has been affected by the pandemic. Volunteer services are affected by the stay at home and social distancing orders. *Due to COVID-19, AmeriCorps Senior Program volunteers were not able to perform projected volunteer hours because of the stay-at-home order, volunteers being classified as a vulnerable population, and the restrictions of teleworking. The numbers reported are state funded volunteer hours. AmeriCorps Seniors granted a temporary stipend allowance in March 2020 so that under COVID19 volunteer programs could continue to retain volunteers.”

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 |

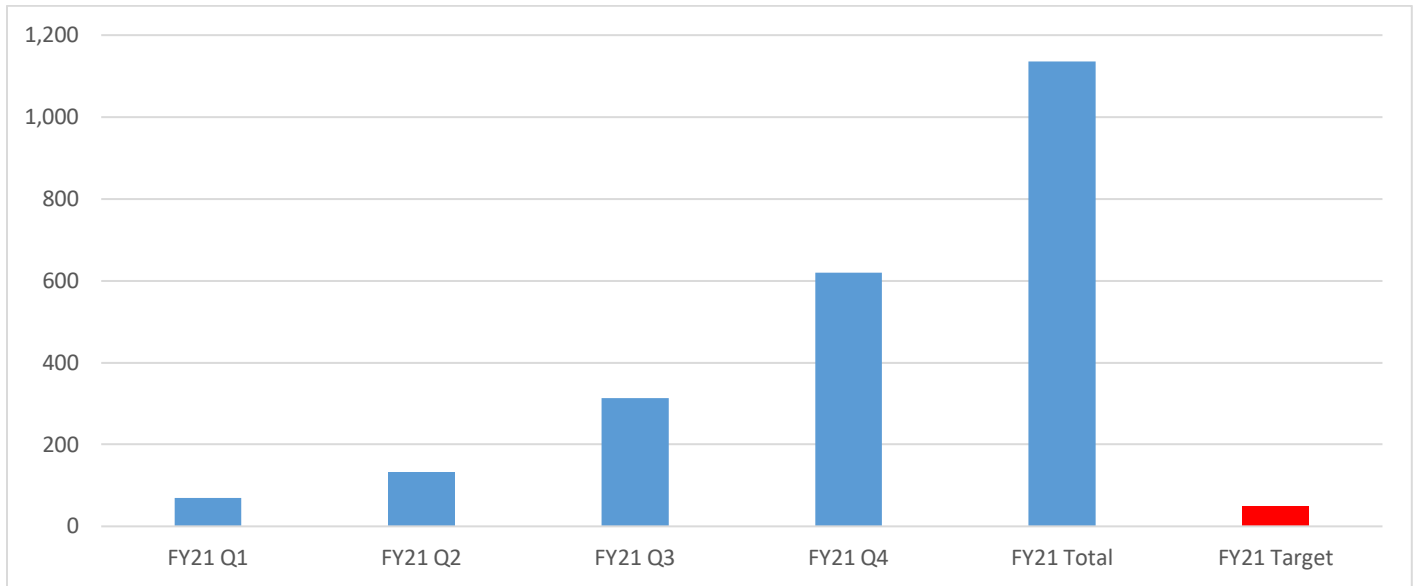
PERFORMANCE MEASURE #3

Number of outreach events and activities to identify, contact and provide information about aging network services to potential aging network consumers who may be eligible to access senior services but are not currently accessing those services.

Results

| FY18 | FY19 | FY20 | FY21 Q1 | FY21 Q2 | FY21 Q3 | FY21 Q4 | FY21 Total | FY21 Target |
|------|------|------|---------|---------|---------|---------|------------|-------------|
| N/A | N/A | N/A | 69 | 158 | 313 | 620 | 1,135 | 50 |

Graph of Data Above



MEASURE DESCRIPTION: Identifies the number of outreach events showcasing the availability of services within the Aging Network.

DATA SOURCE/METHODOLOGY: The Aging Network Division collects the number of outreach events held each quarter in the following categories: # of Aging and Long-Term Services Department Outreach Events; # of Program Provider Outreach Events; # of State Program Report Outreach Events. The number of total Outreach Events is then compiled.

STORY BEHIND THE DATA: During the 4th quarter of FY21 AND has conducted **586** outreach events (including provider volunteer outreach events) **CERD** conducted **28** outreach events and **OMB** conducted **6** outreach events. However, because of the COVID-19 pandemic, there was a significant data change after Governor, Michelle Lujan - Grisham declared a state of emergency on March 11, 2020. The state of New Mexico was granted a major disaster declaration by the Federal Government in March 2020. After this date, provisions of services were altered to comply with the public order and isolation guidance. FY 21 Quarter 4 has been affected by the pandemic, in that agency outreach events have been modified by using virtual collaboration. The remaining outreach events are affected by the stay at home and social distancing orders.

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 |

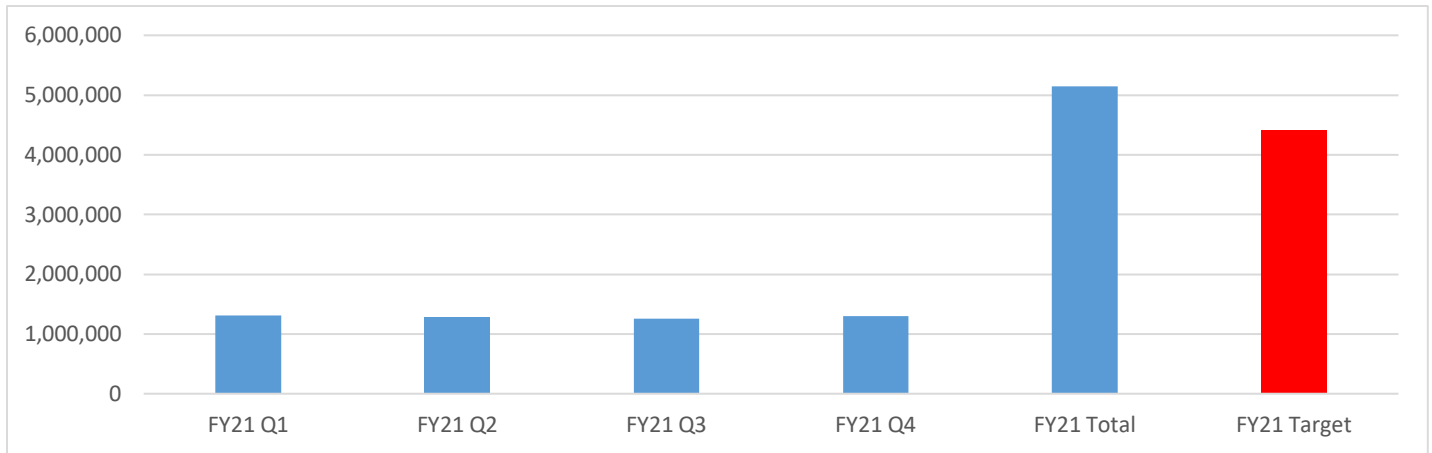
PERFORMANCE MEASURE #4

Number of Meals served in congregate, and home delivered meal settings.

Results

| FY18 | FY19 | FY20 | FY21 Q1 | FY21 Q2 | FY21 Q3 | FY21 Q4 | FY21 Total | FY21 Target |
|------|------|------|-----------|-----------|-----------|-----------|------------|-------------|
| N/A | N/A | N/A | 1,307,763 | 1,277,363 | 1,257,396 | 1,298,865 | 5,141,387 | 4,410,000 |

Graph of Data Above



MEASURE DESCRIPTION: This measure includes the number of meals served in congregate, home delivered, "grab and go" settings. Meals are reported for breakfast, lunch, dinner, and weekends.

DATA SOURCE/METHODOLOGY: The WellSky Aging and Disability Database is the repository used by providers contracted through the AAAs to document services. All AAAs, except for the Navajo Area Agency on Aging (NAAA), use this database to capture monthly service and expense data from the senior centers and report it to ALTSD. The Aging Network Division and the Office of Indian Elder Affairs compile the data for quarterly and annual performance measure reporting.

STORY BEHIND THE DATA: The COVID-19 pandemic resulted in a significant data change after Governor, Michelle Lujan - Grisham declared a state of emergency on March 11, 2020. The state of New Mexico was granted a major disaster declaration by the Federal Government in March 2020. After this date, provisions of services were altered to comply with the public order and isolation guidance. The 4th quarter has been affected by the pandemic. Adult Day Care Centers and Senior Centers have begun re-opening. Congregate meal delivery has been modified to "grab and go" or home delivered meals. The remaining services are affected by the stay at home and social distancing orders.

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 |

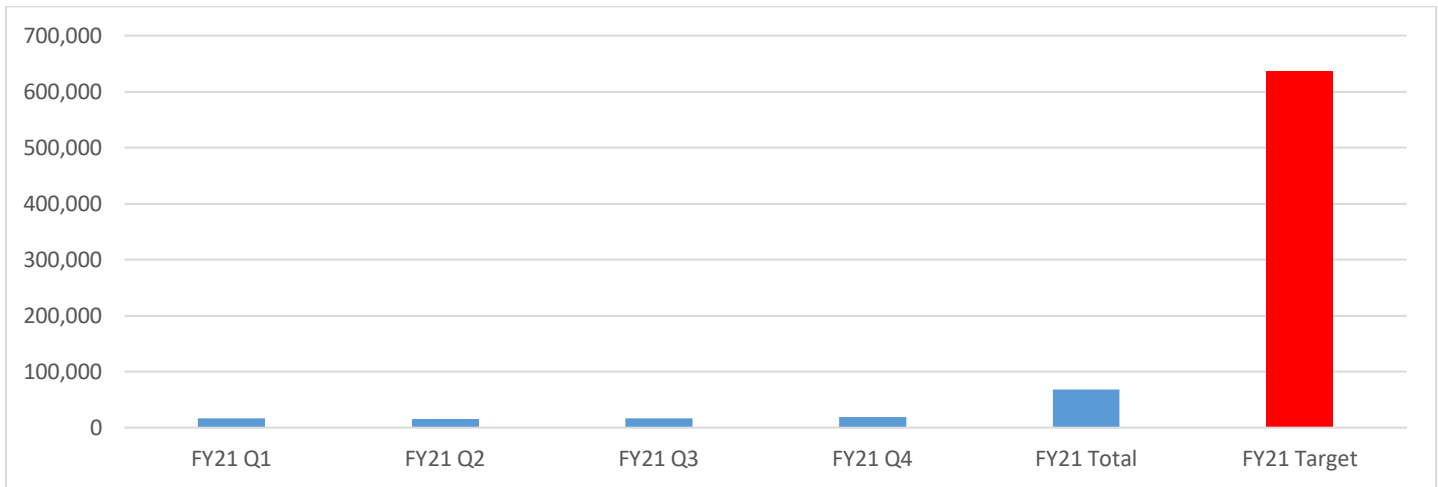
PERFORMANCE MEASURE #5

Number of Transportation Units Provided

Results

| FY18 | FY19 | FY20 | FY21 Q1 | FY21 Q2 | FY21 Q3 | FY21 Q4 | FY21 Total | FY21 Target |
|------|------|------|---------|---------|---------|---------|------------|-------------|
| N/A | N/A | N/A | 16,975 | 15,554 | 16,801 | 18,850 | 68,180 | 637,000 |

Graph of Data Above



MEASURE DESCRIPTION: One unit of service provided to older adults and people with disabilities.

DATA SOURCE/METHODOLOGY: The WellSky Aging and Disability Database is the repository used by providers contracted through the AAAs to document services. All AAAs, except for the Navajo Area Agency on Aging (NAAA), use this database to capture monthly service and expense data from the senior centers and report it to ALTSD. The Aging Network Division and the Office of Indian Elder Affairs compile the data for quarterly and annual performance measure reporting.

STORY BEHIND THE DATA: The COVID-19 pandemic resulted in a significant data change after Governor, Michelle Lujan - Grisham declared a state of emergency on March 11, 2020. The state of New Mexico was granted a major disaster declaration by the Federal Government in March 2020. After this date, provisions of services were altered to comply with the public order and isolation guidance. The 4th quarter has been affected by the pandemic. Transportation services have been modified to focus on medically necessary transportation. Transportation has been altered to comply with the stay at home and social distancing orders.

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 |

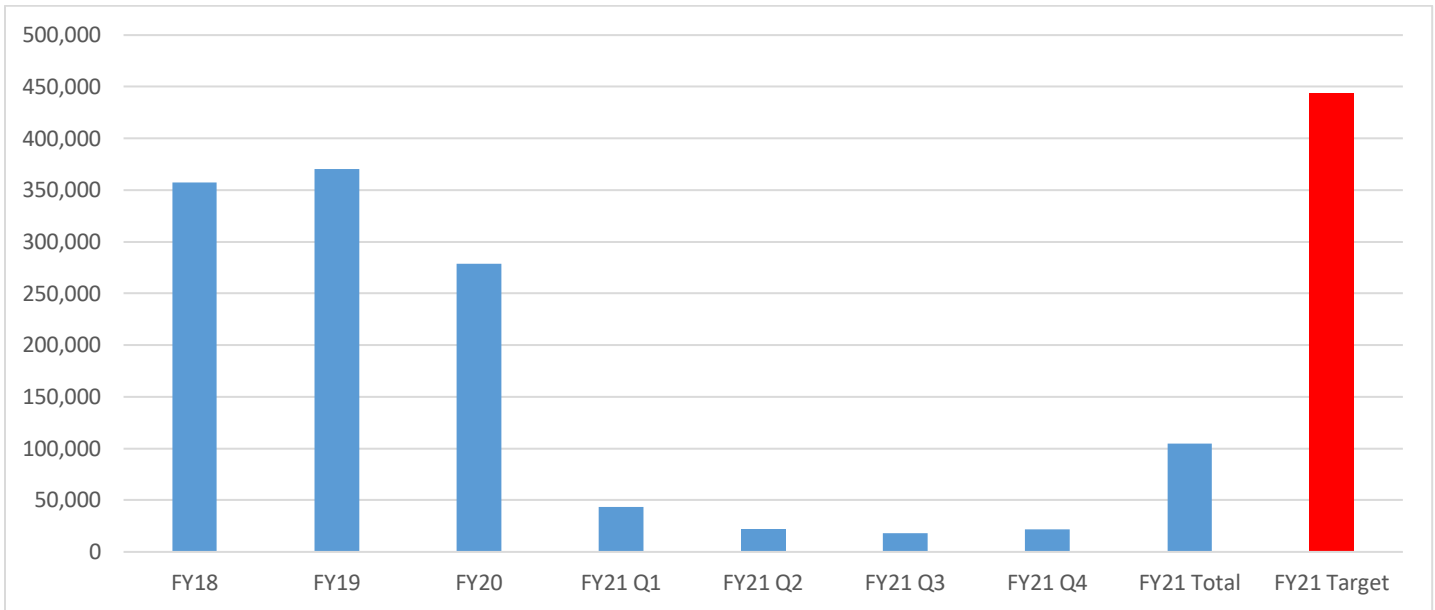
PERFORMANCE MEASURE #6

Number of hours of caregiver support

Results

| FY18 | FY19 | FY20 | FY21 Q1 | FY21 Q2 | FY21 Q3 | FY21 Q4 | FY21 Total | FY21 Target |
|---------|---------|---------|-----------|-----------|-----------|-----------|------------|-------------|
| 357,721 | 370,538 | 278,513 | 43,743.58 | 21,406.68 | 17,989.50 | 21,590.59 | 104,730.35 | 444,000 |

Graph of Data Above



MEASURE DESCRIPTION: Caregiver support is a strategic priority for ALTSD. 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, to reflect the wide array of support services more comprehensively 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 WellSky Aging and Disability Database is the repository used by providers contracted through the AAAs and caregiver entities to document services provided by caregivers. All AAAs, except for the Navajo Area Agency on Aging (NAAA), use this database to capture monthly service data and report it to ALTSD. The Aging Network Division, Consumer and Elder Rights Division (CERD), Office of Alzheimer’s and Dementia Care, and the Office of Indian Elder Affairs compile the data for quarterly and annual performance measure reporting.

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 FY21 Quarter 4, the number of hours of caregiver support were: **Respite Care = 9,478.86; Adult Day Care = 770.50; Homemaker = 7,554.25; and Other Support Services = 3,786.98.**

Due to the impacts of the COVID-19 pandemic, the number of hours of caregiver support was significantly lower during the 4th quarter of FY21, which was at **21,590.59** hours. The COVID-19 pandemic resulted in a significant data change after Governor Michelle Lujan - Grisham, declared a state of emergency on March 11, 2020. The state of New Mexico was granted a major disaster declaration by the Federal Government in March 2020. After this date, provisions of services were altered to comply with the public orders and isolation guidance. Most Adult Day Care Centers are closed, and the remaining services have also been affected by the stay at home and social distancing orders.

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 |