



# Aging and Long-Term Support Administration

## March 2016

### ALTSA MISSION

We transform lives by promoting choice, independence and safety through innovative services

### ALTSA VISION

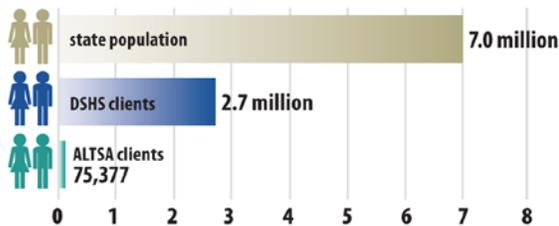
Seniors and people with disabilities living with good health, independence, dignity, and control over decisions that affect their lives

### ALTSA VALUES

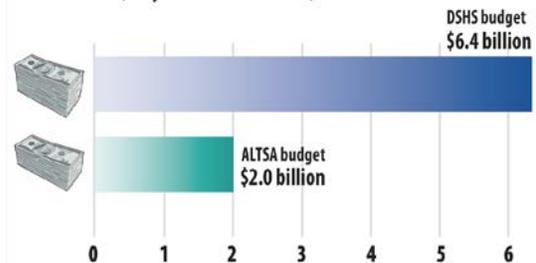
Honesty and Integrity  
Pursuit of Excellence  
Open Communication  
Diversity and Inclusion  
Commitment to Service

Collaboration  
Respect  
Accountability  
Compassion

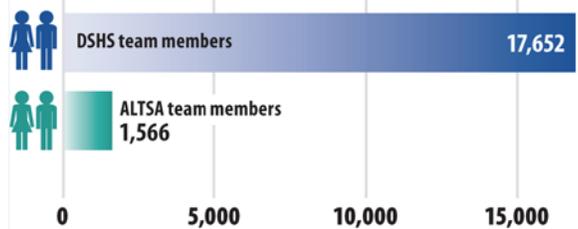
CLIENTS SERVED (between July 2013 - June 2014)



BUDGET (July 2014 - June 2015)



NUMBER OF TEAM MEMBERS (as of June 30, 2015)



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**STATE OF WASHINGTON  
DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
1115 Washington Street SE, Olympia, Washington 98504-5010**



March 2016

Dear Teammates:

The Aging and Long-term Support Administration's commitment to promoting choice, independence and safety clearly serves the DSHS mission of transforming lives.

Washington ranked second best in the nation by the American Association of Retired Persons for providing long-term care services and supports, while ranking near the bottom nationwide in terms of funding. The Administration repeatedly demonstrates the utmost integrity and professionalism when it comes to protecting those it serves and ensuring their quality of care.

Moving forward, those who do this work will face many challenges, including a huge influx of aging baby-boomers who will need long-term services and supports, whether in an in-home or community-based setting. This will put even more pressure on inspections, complaint investigations and other activities designed to keep Washingtonians safe.

I have every confidence we will reach the goals set out in this strategic plan, further enhancing our already excellent services.

Sincerely,

Patricia K. Lashway  
Acting Secretary

*DSHS: Transforming Lives*



**STATE OF WASHINGTON**  
**DEPARTMENT OF SOCIAL AND HEALTH SERVICES**  
**Aging and Long-Term Support Administration**  
**PO Box 45600, Olympia, WA 98504-5600**

December 2015



Dear Teammate,

The Aging and Long-Term Support Administration (AL TSA) Strategic Plan is the blueprint for how we continue to transform lives by ensuring that Washingtonians can choose where they want to live and receive long-term services and supports (LTSS). Our strategic plan demonstrates our:

- Commitment to promoting choice, independence and safety through innovative services;
- Willingness to be transparent and honest in our assessment of areas where we are underperforming and action plans we are undertaking to continually improve;
- Strategies for serving the rapidly-growing aging population in Washington State.

In the early 1980's, faced with a demographic projection that the number of Washingtonians over age 65 was poised to double, Washington became an "early adopter" of new federal opportunities to support people in need of LTSS in their homes and other community settings. As a result, seniors and younger individuals who needed services were able to choose to remain independent in the community with some assistance.

Our focus on providing choice and providing services in home and community-based settings continues today. Without that emphasis, Washington would be spending \$200 million more each year to support people in need of LTSS.

Washington's success in this arena has made us a national leader with eighty-six percent (86%) of individuals receiving Medicaid-funded LTSS in their own home or community setting. Washington's system has sustained the ranking of 2nd in the nation by AARP for its high performance while at the same time ranking 34th in cost. I am very proud of this accomplishment and I hope you are as well.

Today we face a challenge similar to that of the 1980's. Sustaining our success in the face of the Age Wave amidst continued budget challenges requires a "next generation" system redesign which focuses on outcomes and encourages more individual stability, less dependence, more resilience, and better linkage to a reformed healthcare system. Programs such as Community First Choice provide our clients more service options at a higher federal matching rate, which allows us to serve more individuals. Further investment in, and expansion of, the family caregiver support program and other programs to support individuals and their families are also necessary to slow the growth of more costly Medicaid service expenditures. Finally, continually improving our efficiency in delivering services is critical to meeting our goals and creating a sustainable system well into the future.

Feedback on our performance from our clients and families, our staff, our providers and our stakeholders is critical to our success. This feedback helps us to improve our efficiency and develop new programs designed to be more effective at meeting the needs of the individuals we serve. Please take the time to review our plan and provide your feedback. Our system is a national leader today because we all worked to make it one; it will take that same level of effort to meet the challenges we face moving forward. I value and look forward to your feedback on our plan, and I thank you for the work you do every day to transform lives.

Sincerely,



Bill Moss, Assistant Secretary  
*Aging and Long-Term Support Administration*

### AGING AND LONG-TERM SUPPORT ADMINISTRATION

#### Introduction

The Department of Social and Health Services (DSHS) Aging and Long-Term Support Administration (AL TSA) offers services that empower seniors and adults with disabilities to remain independent and be supported in the setting of their choice. These settings include: the client's home, assisted living facilities, adult family homes, or nursing homes, as well as supports for family caregivers and information and referral.

**Our vision and mission:** our vision is seniors and people with disabilities living with good health, independence, dignity, and control over the decisions that affect their lives.

Our mission is to transform lives by promoting choice, independence, and safety through innovative services.

**Successes:** AL TSA has long been a leader in promoting home and community-based long-term services and supports (LTSS), including supports for people with high needs. Today, **AARP ranks Washington State second best in the nation** in providing LTSS in home and community-based settings. These are the settings most people choose, and are also the most cost effective. AL TSA has achieved this national leadership performance and is ranked 34<sup>th</sup> in the country in long-term care spending per capita<sup>1</sup>. As a result, even with a limited budget, we have been able to provide LTSS to all people who have requested and qualified for Medicaid.

**What's next:** We are always seeking improvements in service quality, and our state's aging population is growing rapidly. An increasing number of adults have disabilities and specialized needs. Reports of abuse and neglect have grown significantly due to increased public awareness and population growth. State and federal funds are tight even as the need for LTSS is growing.

**Our challenge is to address these realities and to build on our success to-date.**

#### People We Serve

##### Individuals served in 2014 = 75,377\*

- In-home caseload: 39,000 (mo. avg.)
- Adult family homes and assisted living facility caseloads: 12,000 (mo. avg.)
- Nursing home caseload: 9,900 (mo. avg.)
- Family caregivers: 2,900 received assessment and care plan in 2014
- Free LTSS information and referral to over 260,000 contacts per year
- Foster children: Over 100 each month assisted with healthcare coordination
- Office of the Deaf & Hard of Hearing: case management for over 400 per year

#### What AL TSA Staff Do

##### Team Members in 2014 = 1,566

- Pursue over 2,000 new investigations of abuse and neglect of adults each month
- Determine Medicaid eligibility for about 1,700 new people per month
- Assessment and person-centered care planning for over 1,300 new people each month
- Assist 3,600 people per year to relocate from nursing homes and receive care in their home or community
- License, inspect, and investigate complaints for over 3,000 facilities
- Oversee contracts with over 68,000 providers

*\*Count reflects distinct individuals served at least once in the year. Monthly average caseload shown will not add to same figure.*

<sup>1</sup> AARP's 2012 report: [http://www.aarp.org/content/dam/aarp/research/public\\_policy\\_institute/ltc/2012/across-the-states-2012-full-report-AARP-ppi-ltc.pdf](http://www.aarp.org/content/dam/aarp/research/public_policy_institute/ltc/2012/across-the-states-2012-full-report-AARP-ppi-ltc.pdf)



**Our commitment** is to these broad goals:

- Increase the **safety** of adults who are vulnerable.
- Promote **access** to a variety of home and community-based service options.
- Improve **quality** in nursing facilities and other LTSS settings.

To meet this commitment, **ALTSA's Strategic Plan has specific strategic objectives** and performance metrics. The plan, objectives, and metrics were built with staff input and are continuing to evolve.

**ALTSA's staff and partners are critical to successfully meeting our commitment and strategic objectives.** On a daily basis, our staff, partners, and providers demonstrate dedication, expertise, and creativity.

**Partner and Provider Role:** For direct services, ALTSA contracts with thousands of trained providers, including individual home care workers, home care agencies, adult family homes, assisted living facilities, nursing homes, and others. These are the individual workers and organizations that care for our clients on a daily basis.

Washington's twenty-nine Tribes and thirteen Area Agencies on Aging (AAA) are mission-critical partners. AAAs do ongoing case management of ALTSA in-home clients and provide family caregiver support, free information and referral, and non-Medicaid services.

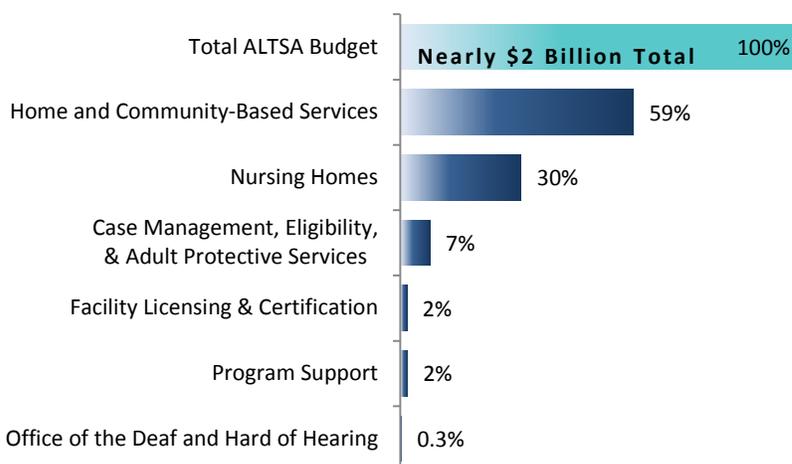
Our major administrative and policy partner is the federal Centers for Medicare and Medicaid Services (CMS). Federal Medicaid funds make up nearly half of our funding and CMS approval is required for changes to Medicaid services. CMS also partners with ALTSA on nursing home quality and oversight.

**Staff Role:** The **Home and Community Services Division (HCS)** is the largest group of ALTSA staff in both the field and at headquarters. HCS supports the Strategic Plan commitment to **access, quality and safety**. HCS includes financial eligibility determination workers, case managers who do assessment and care planning, Adult Protective Services, and Fostering Well-Being team members.



The **Residential Care Services Division (RCS)** supports the Strategic Plan commitment to **quality and safety**. RCS nurses and surveyors perform licensing and inspection of all long-term care facilities and

### BUDGET (Fiscal Year 2015)



settings, respond to complaints, and take enforcement actions.

The **Office of the Deaf and Hard of Hearing (ODHH)** supports the Strategic Plan commitment to **access**. ODHH provides reasonable accommodations, telecommunications, and other services to people who are deaf, hard of hearing, deaf-blind and speech-disabled.

The **Office of the Assistant Secretary (OAS)** directs policy, provider collective bargaining, strategic planning, performance management, quality assurance, communication, Lean, and special projects.

The **Management Services Division (MSD)** provides administrative support including information technology, facilities management, accounting, budget, contracts, time and attendance, public disclosure, rates management, decision support, and forecasting. Together, OAS and MSD support the Strategic Plan through mission-critical functions that ensure **public trust**.

### AL TSA Core Principles

AL TSA's strategies are driven by several bedrock principles. Staff are essential in carrying out these core principles and are one of the primary reasons the state's long-term care system is arguably the best in the nation.

We believe the people we support:

- Should have the central role in making decisions about their daily lives.
- Should have access to supports that promote health, independence, community integration, and self-determination.
- Succeed best when support is person-centered and recognizes that their needs are interrelated.

We believe families and friends of the people we support:

- Are an essential reason many people can live successfully in their own homes and communities.
- Can realize a positive difference in their lives, and the lives of their loved one, with even a small investment in support.
- Act as advocates for quality support and services in the best interest of their family member or friend.



We believe the **system of services** administered by ALTSA must be:

- Accountable for outcomes and costs.
- Informed by evidence of effectiveness.
- Responsive to changing needs.
- Sustainable over time and within realistic resource estimates.
- Collaborative with service recipients, families, communities, providers, partners, and other stakeholders.
- Accessible to individuals who are Limited English Proficient or have a communication barrier due to a disability.
- Able to keep people free from abuse and neglect, and support shared responsibility with individuals, families, providers, advocates and communities to prevent or respond to abuse and abusers.

## Goals

Stated as a mission, the goal of the Aging and Long-Term Support Administration (ALTSA) is **to transform lives by promoting choice, independence and safety through innovative services**. Fully realized, this creates our visions: seniors and people with disabilities living with good health, independence, dignity, and control over decisions that affect their lives. To track our progress toward this mission and this vision, we set performance goals in specific areas.

### Washington's Commitment

We start with a customer focus in measuring progress toward fulfilling our mission and reaching our vision. We ask what our customers need from us to fulfill the vision. For ALTSA to best advance our mission, Washington State needs to be the national leader in: providing a safe home, community and nursing facility array of long-term services and supports. We track our progress annually like this:



## WASHINGTON'S COMMITMENT SCORECARD

Be the national leader in: **Providing a safe environment for adults who are vulnerable, access to home and community-based services, and quality in nursing facilities and other settings.**

### Aging and Long-Term Support Administration

#### YARDSTICK

Be the national leader in: Providing a safe environment for adults who are vulnerable, access to home and community-based services, and quality in nursing facilities and other settings.



#### Measuring up Washington

	2012	2013	2014	2015	
Provide a safe environment for adults who are vulnerable	RED	RED ↑	YELLOW	YELLOW ↑	Status has improved due to adding staff to meet rapidly growing workload and applying Lean practices.
Provide access to home and community-based services	★ GREEN	★ GREEN	★ GREEN	★ GREEN	AARP ranked Washington the second-best long-term support program in the country despite funding in the bottom quartile nationally.
Provide quality in nursing facilities and other settings	GREEN	GREEN	GREEN	GREEN	Difficulty meeting timeliness standards puts green status at risk.

Achieving the goal of national leadership in these areas is a product of the contributions of many players, including the Governor, the Legislature, state agencies, counties, cities, non-profit organizations, and others, including the citizens themselves. The “Washington’s Commitment” scorecard looks at the world through the client’s eyes and asks how successful we are as a state at transforming the lives of these clients – without immediate regard to the reason. The reasons are critically important, of course, but for the client the first concern is always whether the needed service is available and effective. It is too frequently the case that the AL TSA team is doing exceptional work, but excessive caseloads, benefit deficits, or other program gaps create severe unmet needs and drive poor grades for Washington’s Commitment. It is also possible that AL TSA has opportunities to improve performance and that is reflected in the scorecard as well. AL TSA’s team performance is highlighted in the section titled “AL TSA Performance”, the primary focus of this strategic plan.

Washington’s Commitment scorecard and the AL TSA Performance scorecard are denoted by color as follows:

- Green equates to strong performance and service or dramatic improvement in the area
- Yellow to areas of concern or unmet need, or both.
- Red to serious concern or serious unmet need, or both.
- Where there is a positive movement it is denoted by an upward arrow, and where we have achieved national leadership it is indicated by a coveted gold star.
- Some measures are new in the 2015-2017 strategic plan. For these measures, preliminary color codes have been established in muted colors, however, they are necessarily subject to change as more data becomes available.



## **AL TSA Performance**

In the AL TSA Performance scorecard we measure ourselves against our yardstick of being the national leader in our spheres of service by setting goals and grading our performance for specific elements of the work we do that advances our mission in that specific area. For example, the Washington Commitment measure of “providing a safe environment for adults who are vulnerable” is measured against three performance measures: 1) timely response to all abuse and neglect allegations; 2) abuse and neglect cases closed timely; and 3) reduce complaint investigation backlog.



AL TSA’s current scorecard looks like this:

## Aging and Long-Term Support Administration

### Provide a safe environment for adults who are vulnerable

*		2012	2013	2014	2015
1.1	Timely response to all abuse and neglect allegations	RED	↑ RED	YELLOW	↑ YELLOW
1.2	Abuse and neglect cases closed timely 	RED	↑ RED	YELLOW	↑ YELLOW
1.3	Reduce complaint investigation backlog				New in 15-17 plan RED

### Provide access to home and community-based services

*		2012	2013	2014	2015
2.1	Providing home and community-based services 	★ GREEN	★ GREEN	★ GREEN	★ GREEN
2.2	Voluntary relocation of clients from nursing homes to home and community-based services	GREEN	GREEN	★ GREEN	★ GREEN
2.3	Providing timely eligibility approval	YELLOW	YELLOW	YELLOW	↑ YELLOW
2.4	Providing family caregiver support	YELLOW	↑ YELLOW	↑ YELLOW	↑ YELLOW
2.5	Installation of Assistive Listening Systems				YELLOW
2.6	Case management services for deaf, hard of hearing and deaf-blind clients				New in 15-17 plan YELLOW
2.7	Enhanced Service Facility community placement option				New in 15-17 plan YELLOW

### Improve quality in nursing facilities and other settings

*		2012	2013	2014	2015
3.1	Timely surveys of Adult Family Homes, Assisted Living and Nursing Facilities	GREEN	GREEN	GREEN	GREEN
3.2	Quality assurance of Intermediate Care Facilities and Supported Living				GREEN
3.3	Compliance with other federal, state and program requirements				New in 15-17 plan YELLOW

### Other mission critical goals

*		2012	2013	2014	2015
4.1	Implementation of an electronic payment system				YELLOW
4.2	Improve data security and oversight activities				RED
4.3	Promote diversity and inclusion practices				New in 15-17 plan YELLOW

Each target item on this AL TSA Performance scorecard forms part of our strategic plan. We have also added new strategic objectives and success measures to this year’s strategic plan.

Five additional measures are new to this plan and are denoted as “New in the 15-17 plan”. Some measures existed in the previous strategic plan, but were not previously graded. The detailed discussion of all measures including a statement of their importance; a quantified success measure; a timeline; and an action plan form our strategic plan.

While the summary scorecard provides an overly simplified color-coded evaluation for most of these measures, you will find very detailed performance data included below. Performance data is updated quarterly and can be found at: <https://www.dshs.wa.gov/data/metrics/AL TSA.p df>

Our strategic plan is organized around this reporting structure outlined in the AL TSA Performance scorecard.

It is not really possible to fully separate our performance from the challenges of funding. The Governor and the state Legislature work with limited resources, and so do we. As a result, we have red status in areas where the performance of the AL TSA team is exemplary, but the unmet need is so great that only a red status evaluation is appropriate. Importantly, in virtually every area summarized on the AL TSA Performance scorecard we have quantified progress measures to make better use of the resources we have and provide a better measure of our progress as an administration.

Washington’s Commitment and AL TSA Performance scorecards are updated annually in the annual *Report on the State of Human Services in Washington*. The most recent report can be found at: <https://www.dshs.wa.gov/sites/default/files/SESA/spmrw/documents/current/Strategic%20Plans/2016 StateofHumanSvsReport.pdf>

## Governor Jay Inslee’s Results Washington Goals

AL TSA is a partner in Governor Jay Inslee’s **Results Washington**, a focused effort to create effective, efficient, and accountable government.

**Results Washington’s** goal area number 4 is Healthy and Safe Communities. AL TSA has responsibility for two of the leading indicators under the goal topic of *Supported People: Quality of Life success indicator*:

- **Increase the percentage of aging and long-term service and support clients served in home and community-based settings from 83.9 percent in March 2015 to 85 percent by July 2017.**
- **Increase the percentage of adult abuse and neglect investigations completed within 90 days from 74 percent in March 2015 without good cause to 95 percent with good cause by July 2017.**

## Department of Social and Health Services (DSHS) Goals

DSHS has five broad goals: Health, Safety, Protection, Quality of Life, and Public Trust.

AL TSA has the following strategic objectives in support of the DSHS goals as listed below:

### Safety:

- Affirm Adult Family Homes, Assisted Living Facilities and Nursing
- Homes are providing quality care and residents are safe through timely licensing re-inspections.
- Affirm Residential Habilitation Centers and Supported Living programs are providing quality care and residents are safe through timely quality assurance activities.

### Protection:

- Protect adults who are vulnerable who live in their homes and in facilities through timely responses to allegations of abuse and neglect.
- Ensure investigations are thorough, documented properly, and completed timely to maintain an effective workflow that eliminates re-work caused by investigations which remain open longer than necessary.
- Affirm residents’ and clients’ safety through initiation of timely complaint investigations of long-term care facilities.

### DSHS Goals

- **Health** – Each individual and each community will be healthy.
- **Safety** – Each individual and each community will be safe.
- **Protection** – Each individual who is vulnerable will be protected.
- **Quality of Life** – Each individual in need will be supported to attain the highest possible quality of life.
- **Public Trust** – Strong management practices will ensure quality and efficiency.



### **Quality of Life:**

- Ensure seniors and individuals with a disability who are in need of long-term services and supports are supported in their community.
- Increase the number of individuals AL TSA is able to assist in transitioning to their homes or the community from nursing homes.
- Ensure individuals who apply for services receive them timely so they are supported in the setting of their choice.
- Support families and informal caregivers who provide unpaid support to those in need.
- Provide assistive technology and captioning services on behalf of people who are deaf and hard of hearing so they can communicate effectively.
- Provide client services to people who are deaf, hard of hearing and deaf-blind so they have equal access opportunities.
- Ensure that individuals with complicated personal care and behavioral challenges who reside in state hospitals have an appropriate community placement option through Enhanced Service Facilities.

### **Public Trust:**

- Timely quality assurance and oversight activities to ensure evidence of compliance with federal, state and program requirements.
- Implement an electronic payments system (known as IPOne) that will significantly increase overall integrity of payments made to Individual Providers who contract with DSHS to provide personal care services to DSHS clients.
- Increase IT security support to improve and enhance data security and perform oversight activities to ensure evidence of compliance for both internal and external business partners.
- To establish a comprehensive initiative to embed diversity awareness and culturally-appropriate services into AL TSA business practices through staff training in Cultural Humility and Diversity Issues in Service Delivery, and other diversity activities.

### **Acting Secretary's Special Focus Areas**

DSHS Acting Secretary Pat Lashway has highlighted the following focus areas for AL TSA during this strategic plan period:

- Increase the percentage of long-term services and supports clients served in home and community-based settings from 83.9 in March of 2015 to 85 percent by July 2017.
- Increase the percentage of adult abuse and neglect investigations completed within 90 days from 74% in March 2015 without good cause to 95% with good cause by July 2017;
- Reduce the backlog in provider practice investigations by 50% by July 2017;
- Create the capacity to serve 60 additional individuals in the community with specialized supports, such as Enhanced Service Facilities, by July 2017;
- Reach 100% for timeliness of all facility inspections and re-inspections in both 2016 and 2017;
- Increase the number of clients receiving Office of the Deaf and Hard of Hearing case management services from 248 in December 2014 to 425 by July 2017.



## Strategic Plan

Below are the details of our strategic plan to meet our strategic objectives. Each Strategic Objective includes a statement of its importance, a quantified success measure, a timeline, and most importantly, an action plan.

AL TSA strategic objectives are monitored, updated and reported quarterly online at:

<http://www.dshs.wa.gov/ppa/strategic.shtml>.

### Strategic Objectives, Importance, Success Measures and Action Plans

#### 1. Provide a safe environment for adults who are vulnerable

**Strategic Objective 1.1:** Protect adults who are vulnerable who live in their own homes and in facilities through timely responses to allegations of abuse and neglect.

	2012	2013	2014	2015
1.1 Timely response to all abuse and neglect allegations	RED	RED ↑	YELLOW	YELLOW ↑

**Importance:** Adult Protective Services has two primary duties: **1)** ensure adults who are vulnerable are protected and **2)** investigate allegations to determine if abuse occurred. Timely response is essential in order to provide protective services to seniors and adults with disabilities.

**Success Measure:** Maintain timely initial response for investigations based on case priority at: 99 percent for high-priority, 98.5 percent for medium-priority, and 98 percent for low-priority from December 2014 to July 2017.

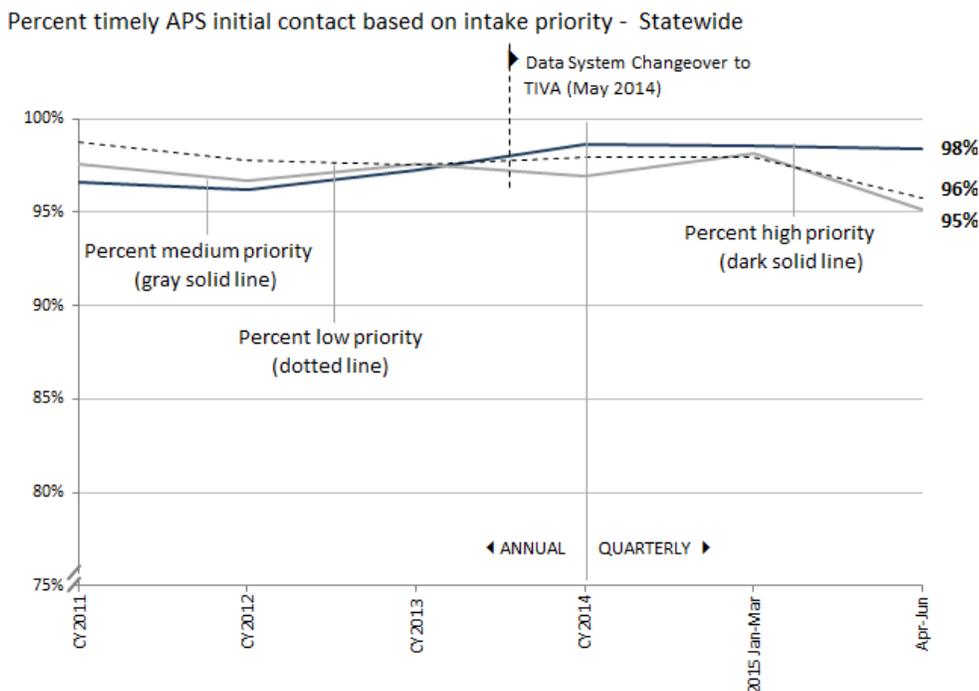
#### Action Plan:

- Modify logic used to calculate report for initial response time to ensure accuracy.
- Continue to monitor accurate incident tracking.
- Continue to evaluate areas for improvement to reduce time spent on intakes and referrals as well as time spent from assignment to investigation.
- Assess need to modify June 2017 targeted measure based on accurate reporting.

See analysis and plan at: [AL TSA Timely Protect Adults Allegation Abuse SO1.1](#)



**CHART 1.1 Timely Initial Response Based on Adult Protective Service Case Priority**



**Strategic Objective 1.2:** Ensure investigations are thorough, documented properly, and completed timely to maintain an efficient work flow that eliminates re-work caused by investigations which remain open longer than necessary.



**Importance:** Protection of adults who are vulnerable requires adequate staffing to conduct thorough screening and consistent investigations, and provide protective services and referrals. When this does not occur, these adults are put at greater risk of harm and experience untimely access to critical resources such as guardianship. The lack of adequate staffing has produced a backlog in the number of cases remaining open longer than 90 days. This creates re-work for staff and delays results or findings against the alleged perpetrator. These delays mean it takes longer to place a perpetrator on the Aging and Disability Services Registry. Reducing this backlog will ensure faster results regarding findings of abuse and improve workflow and efficiency. Although there are no state or federal standards or guidelines for APS, ALISA made a decision to mirror the Washington Children’s Administration Child Protective Service 90-day standard for investigations pursuant to RCW 26.44.030.



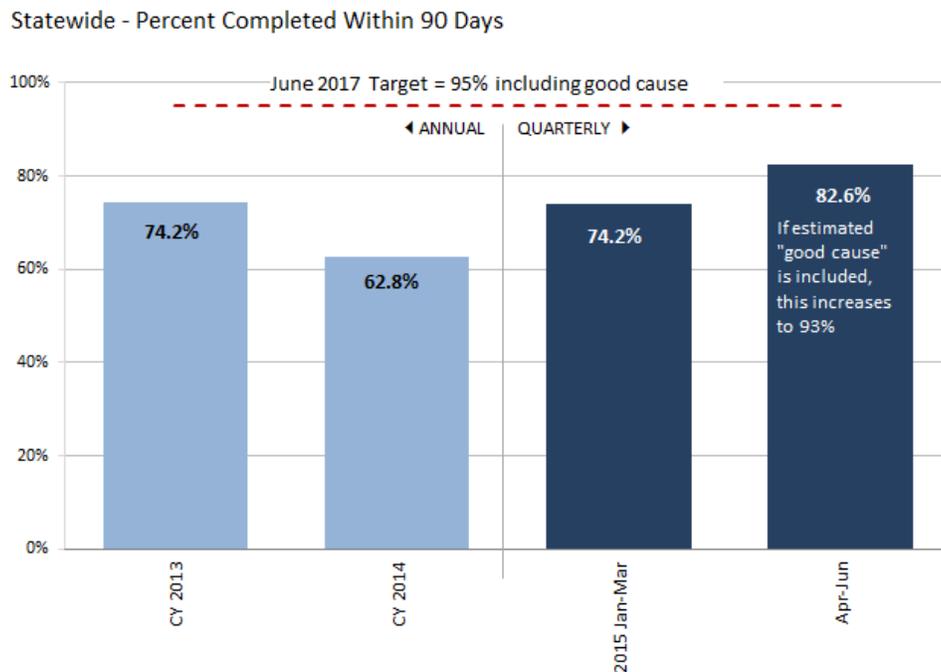
**Success Measure:** Increase the percentage of adult abuse and neglect investigations completed within 90 days from 74 percent in March 2015 without good cause to 95 percent with good cause by July 2017.

**Action Plan:**

- Continue aggressive hiring practices.
- Automate the APS intake form in the TIVA application.
- Continue work to centralize all related APS information within the TIVA system.
- Continue process to add 90-day good cause definitions to TIVA help screens.
- Continue ongoing training for APS investigators.
- Use TIVA governance structure to make ongoing change requests.

See analysis and plan at: [ALISA APS Investigations Within 90 Days SO1.2](#)

**CHART 1.2 Vulnerable Adult Abuse and Neglect Investigations Completed within 90 Days (Combines Adult Protective Services and Resident and Client Protection Programs)**



**Strategic Objective 1.3:** Affirm residents’ and clients’ safety through timely initiation of investigations of complaints at long-term care facilities.

	2012	2013	2014	2015
<b>1.3</b> Reduce complaint investigation backlog				New in 15-17 plan <b>RED</b>

**Importance:** The three pillars of conducting investigations of complaints in long-term care facilities are to: 1) protect residents from abuse, neglect and exploitation; 2) make quality referrals to entities that help protect victims and 3) prevent the occurrence of abuse, neglect and exploitation. Due to the high volume and workload of complaints, coupled with limited investigative staff, it has been difficult to meet



response times, especially for medium and low priority complaints. As of September 2015, there were over 2,100 complaints in long-term care facilities where investigations had not been initiated on time. Reducing the backlog advances the Administration’s commitment to the safety of adults who are vulnerable.

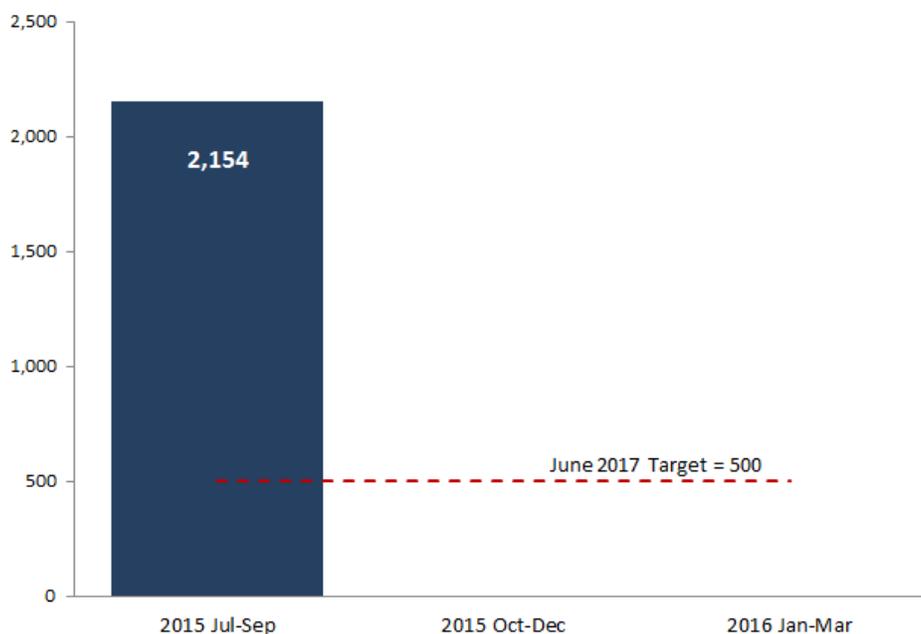
**Success Measure:** Reduce the facility complaint investigation backlog from 2,154 in September 2015 to 500 by July 2017 (a reduction of more than 75%).

**Action Plan:**

- Fill newly-funded positions and existing vacancies to enhance capacity to reduce the backlog.
- Make change requests in data applications to simplify challenges and redundancies.
- Make equipment changes, as funding allows, to establish data access for field staff.
- Train staff through new employee orientation and access civil monetary penalty funds to pay for ongoing in-service complaint investigation training.
- Meet with developers to create reports that utilize new database information to inform management of real-time backlog status; develop analysis methodologies and provide reports regularly to ALTSA management.

See analysis and plan: [ALTSA Complaint Investigation Backlog SO1.3](#)

**CHART 1.3 Number of Complaints Investigations Overdue for Initiation**



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## 2. Provide Access to Home and Community-Based Services

**Strategic Objective 2.1:** Ensure seniors and individuals with a disability who are in need of long-term services and supports are supported in their community.



**Importance:** The hallmark of Washington’s long-term services and supports system is that, whenever possible, individuals are given the opportunity to live and receive services in their own home or a community setting. Developing home and community-based services has meant Washingtonians have a choice regarding where they receive care, and has produced a more cost-effective method of delivering services. The development of home and community-based service resources continues to evolve as individuals’ support needs change. Washington is recognized as a national leader in this area.

**Success Measure:** Increase the percentage of long-term services and supports clients served in home and community-based settings from 83.9 percent in March 2015 to 85 percent by July 2017.

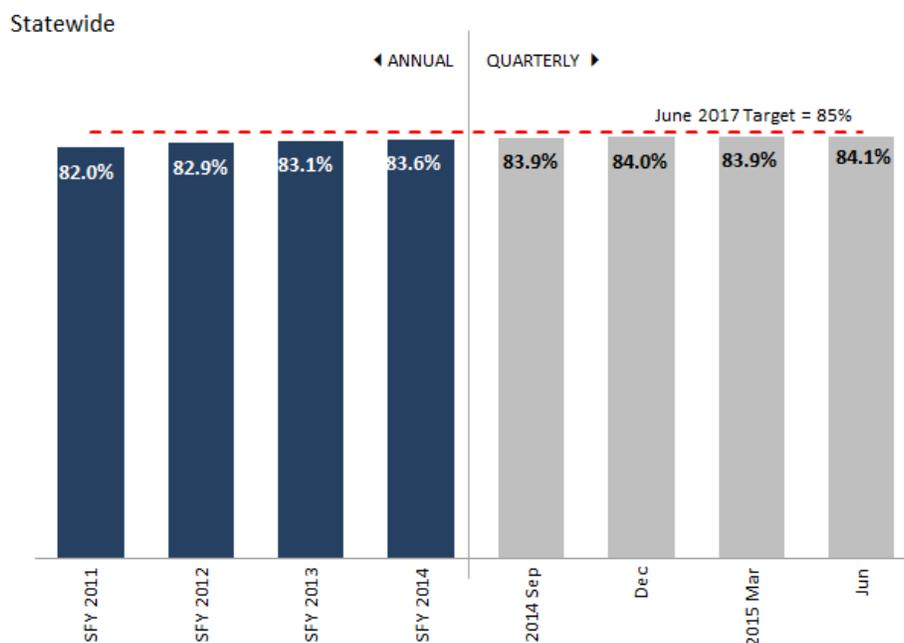
### Action Plan:

- Implement improved process for streamlining application, training and certification of Individual Providers in coordination with the roll-out of the Individual ProviderOne payment system.
- Use existing Roads to Community Living funding to research ways to educate clients and families about home and community-based services so they understand how needs can be met in less restrictive settings.
- Continue work with hospitals to discharge individuals to community placements. Contract with community hospitals for office space and funding for staff onsite to assist with successful transitions to community placements.



See analysis and plan at: [ALTA LTSSHCBS SO2.1](#)

**CHART 2.1 Percent of Long-Term Services and Supports Clients Served in Home and Community-based Settings**



**Strategic Objective 2.2:** Increase the number of individuals ALTA is able to assist in transitioning to their homes or the community from nursing homes.

	2012	2013	2014	2015
<b>2.2</b> Voluntary relocation of clients from nursing homes to home and community-based services	GREEN	GREEN	★ GREEN	★ GREEN

**Importance:** The majority of individuals who require support choose to receive help in their home or a community-based setting. Washington State has developed a system that is cost effective and offers individuals choices regarding how and where they will be supported. This strategy is integral to both the Administration, and Results Washington’s objective to serve more clients in home and community based settings. Relocating individuals from nursing homes into the community not only provides an opportunity to increase the number of those supported in the community, it also facilitates choice, increases quality of life, and contributes to the financial health of Washington. Washington is recognized as a national leader in this area.

**Success Measure:** Increase the average number of individuals relocated from nursing homes quarterly from 935 in March 2015 to 950 by July 2016.

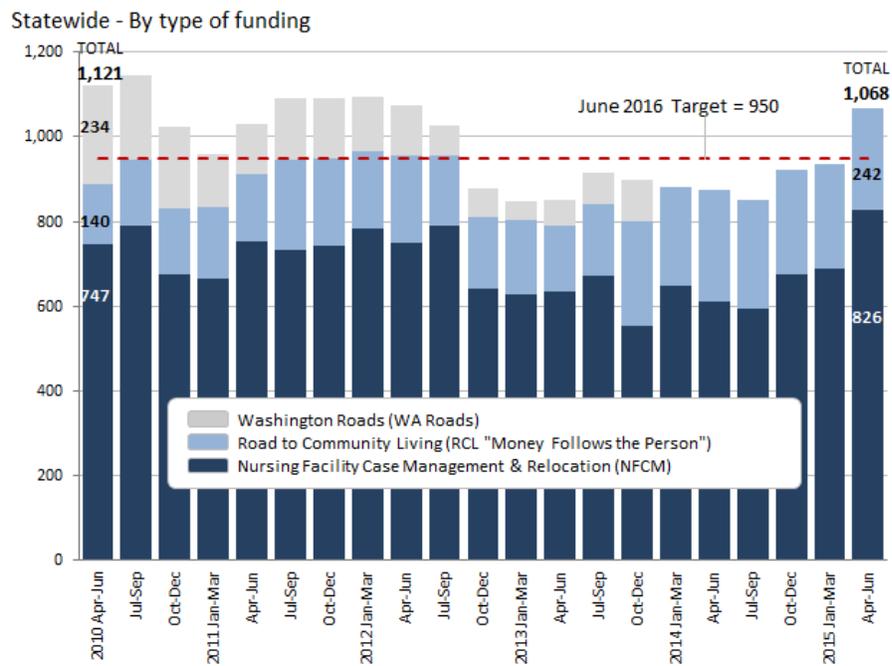


**Action Plan:**

- Increase support to staff by improving access to necessary tools for staff in the field.
- Organize and streamline the Roads to Community Living and the WA Roads programs to improve access and understanding of available tools for staff in the field and simplify process for reviewing necessary paperwork.
- Improve staff recruitment and nursing facility case management training by clearly identifying staff skill set needed to perform work and creation of a statewide nursing facility case management boot camp training.
- Conduct training with nursing facilities to improve their understanding of the resources and benefits of living in the community and increase efficiencies.

See analysis and plan at: [AL TSA Number Of Relocations from NHs To Cmty SO2.2](#)

**CHART 2.2 AL TSA Clients Who Actively Relocate from Nursing Homes to Home and Community-based Settings**



**Strategic Objective 2.3:** Ensure individuals who apply for services receive them timely so they are supported in the setting of their choice.

	2012	2013	2014	2015
2.3 Providing timely eligibility approval	YELLOW	YELLOW	YELLOW	YELLOW 

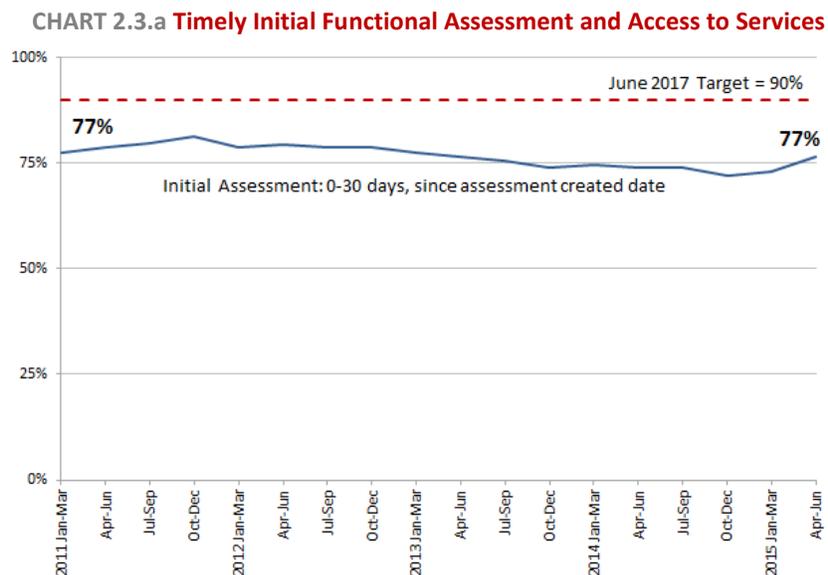
**Importance:** This objective has two related success measures. In order to receive support, an individual must be functionally eligible (meaning they require assistance with activities of daily living) and they must be financially eligible (meaning their assets and income must be within limits). This is not only necessary for determining eligibility but also ensures federal funding can be used to pay for services. When both functional and financial eligibility has been established, support services may be provided. It is very important to provide services in a timely manner to avoid problems that may occur without the support; including loss of mobility, poor nourishment, medication errors and other problems that can produce poor health outcomes for individuals. Once approved for services, re-assessment occurs on an annual basis to determine continued eligibility.

**Success Measure 2.3.a:** Increase the percentage of timely initial assessments from 73% in March 2015 to 90% by July 2017.

**Action Plan:**

- Standardize measurement criteria between financial and social services.
- Establish policy specific to timeliness of initial assessments.
- Implement a tracking system that allows staff to track and document work in greater detail.

See analysis and plan at: [ALISA HCS Initial Assessments SO2.3a](#)



**Success Measure 2.3.b:** Increase the percentage of timely financial eligibility determination from 76% in March 2015 to 90% by July 2017.

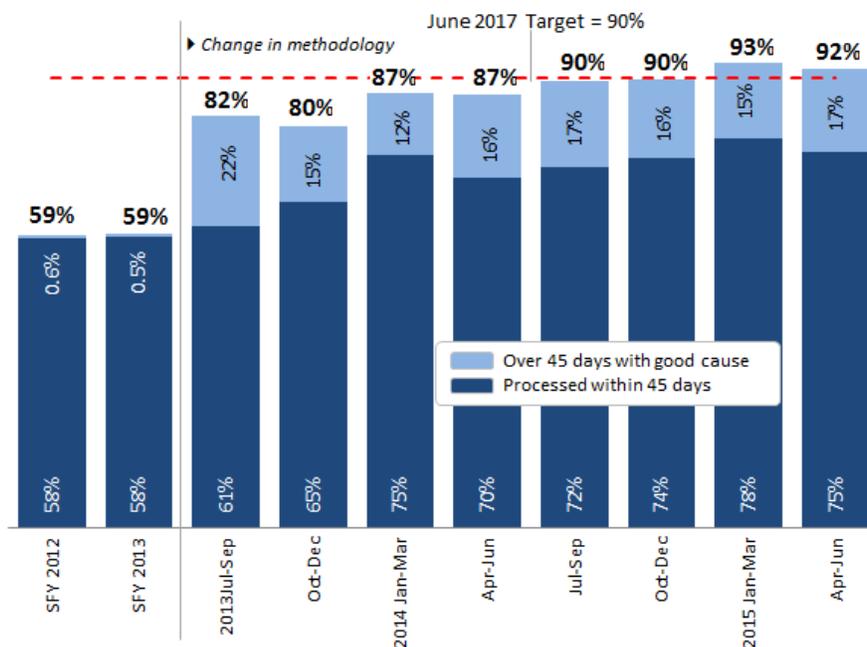
**Action Plan:**

- Modify current report to correctly identify and report on applications that are not processed timely.
- Continue to monitor coding for good cause that impact processing of applications.
- Submit a change request to the ACES system to require good cause coding on medical cases.

See analysis and plan at: [AL TSA Timely Financial Eligibility Determination SO2.3b](#)

**CHART 2.3.b Percent of Financial Eligibility Determinations Completed in 45 Days**

Percent processed timely (within 45 days) or late with good cause



**Success Measure 2.3.c:** Maintain the percentage of timely functional reassessments at 97% through June 2017.

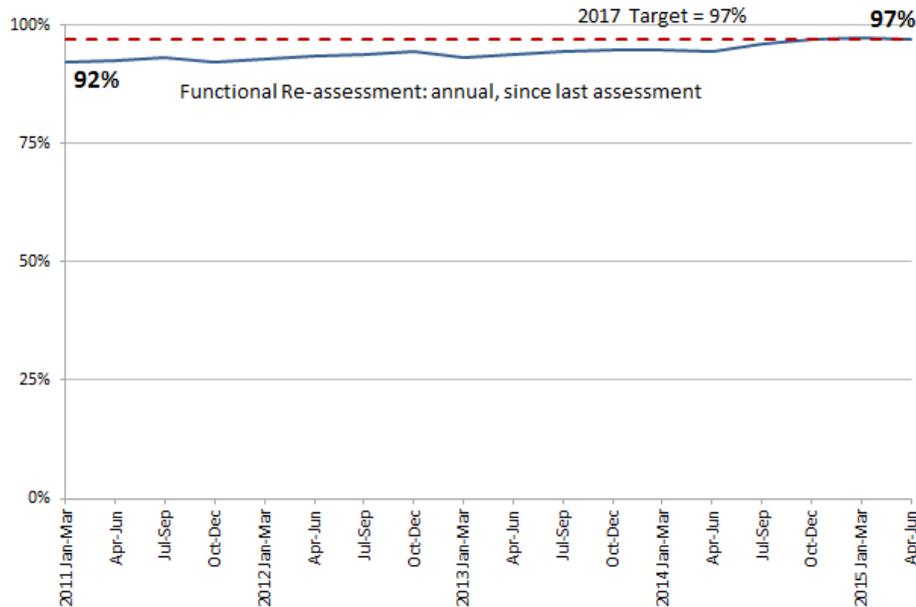
**Action Plan:**

- Monitor ProviderOne override reports monthly with Regional Administrators to ensure timely functional reassessments
- Determine need for overrides and appropriate actions to be taken.
- Continue staff training.



See analysis and plan at: [ALSA Timely Functional Reassessment SO2.3c](#)

**CHART 2.3.c Timely Determination of Functional Eligibility Annual Re-assessment and Access to Services**



**Strategic Objective 2.4:** Support families and informal caregivers who provide unpaid support to those in need.



**Importance:** Families and other informal support providers are integral to Washington’s long-term services and supports system. An investment to support informal caregivers ensures that Washington continues to be a national leader in providing critical family and caregiver services and resources. Data indicates that the higher the level of proven interventions<sup>2</sup> accessed by a caregiver, the greater the level of avoidance to access Medicaid long-term services and supports by their care receiver. Washington State invested in, and began implementing, an evidence-based caregiver assessment in



<sup>2</sup> These are: Screening, assessment, and care planning along with related authorized caregiver services



2009. A DSHS Research and Data Analysis report indicated positive outcomes of the Family Caregiver Support Program expansion data<sup>3</sup>.

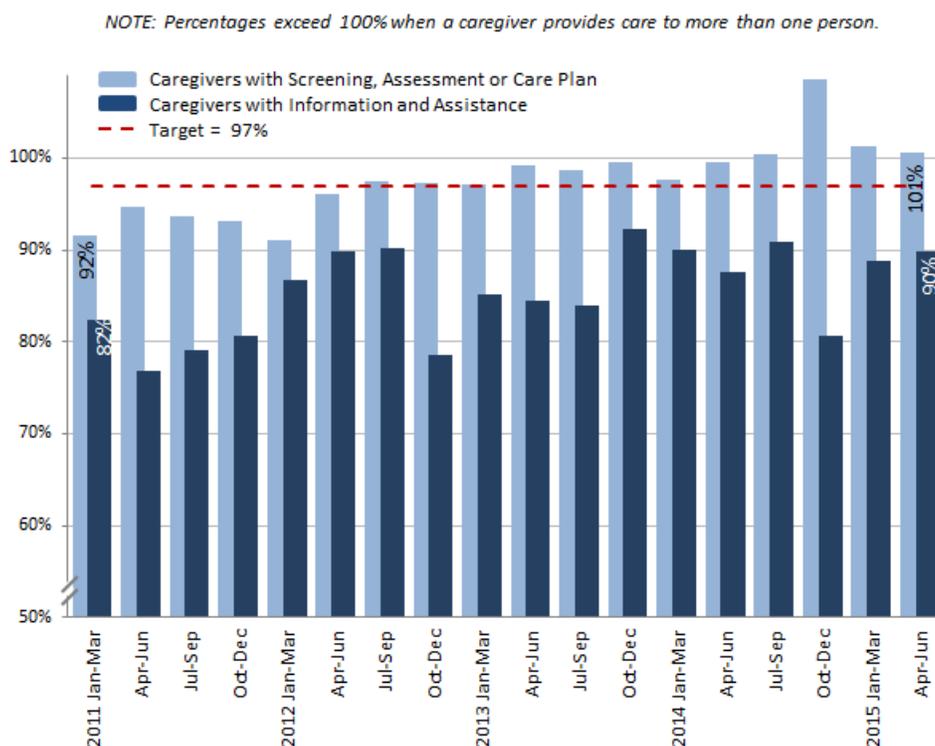
**Success Measure:** Maintain the percentage of caregivers supported in the Family Caregiver Support Program whose care receiver avoids the need for Medicaid long-term care services for 90 days or longer at 97%.

**Action Plan:**

- Develop more frequent access to TCARE Assessor Training utilizing new e-learning format.
- Provider TCARE Assessment in additional languages.
- Explore opportunities for federal matching funds as part of the 1115 Medicaid Transformation Waiver and re-approach state legislature with funding request to expand the Family Caregiver Support Program.

See analysis and plan at: [AL TSA Family Caregiver Support SO2.4](#)

**CHART 2.4 Percentage of Caregivers whose Care Receiver Avoided Paid Long-term Care Medical Services for 90 Days**



<sup>3</sup> <http://www.dshs.wa.gov/sesa/rda/research-reports/expanding-eligibility-family-caregiver-support-program-sfy-2012>.



**Strategic Objective 2.5:** Provide assistive technology and captioning services on behalf of people who are deaf and hard of hearing so they can communicate effectively.

	2012	2013	2014	2015
<b>2.5</b> Installation of Assistive Listening Systems				<b>YELLOW</b>

**Importance:** Many individuals with hearing loss do not use sign language. Assistive listening systems aid in ensuring that effective communication occurs between people with hearing loss and employees or contractors providing DSHS services during in-person office visits. These assistive listening systems help clients to access DSHS programs and services.



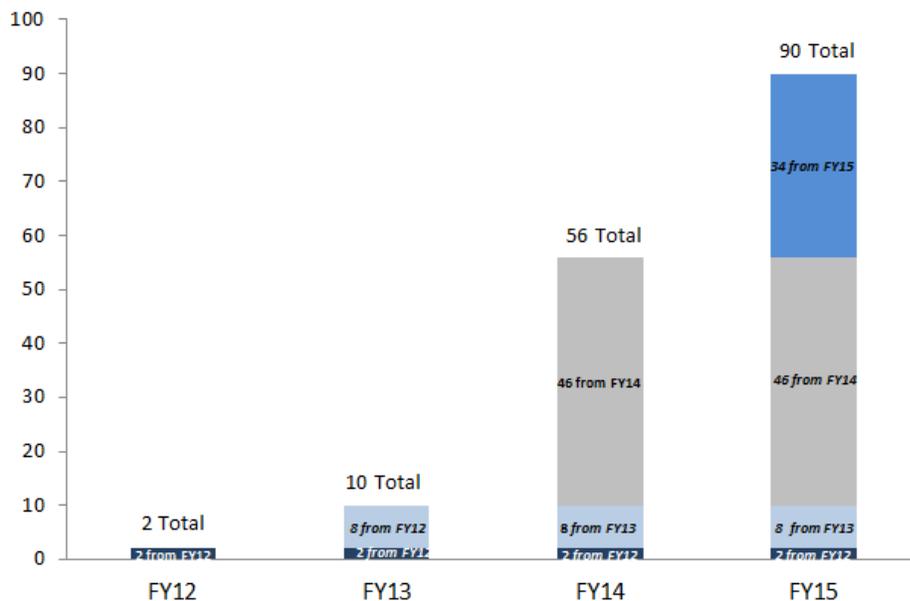
**Success Measure:** Increase the number of sites with assistive listening systems by 40 from July 2015 through June 2017.

**Action Plan:**

- Oversee contractor installation of induction loops at DSHS offices throughout the state.
- Continue training DSHS staff on using induction loops.
- Initiate an evaluation system for measuring client usage and staff knowledge of induction loops.

See analysis and plan at: [ALISA Assistive Tech Captioning Services SO2.5](#)

**Chart 2.5 Increase in the Number of DSHS and Contractor Sites with Assistive Listening Systems Installed**  
Number of Sites Installed - Cumulative Totals



**Strategic Objective 2.6:** Provide case management services to people who are deaf, hard of hearing and deaf-blind so they have equal access opportunities.

	2012	2013	2014	2015
2.6 Case management services for deaf, hard of hearing and deaf-blind clients				New in 15-17 plan <b>YELLOW</b>

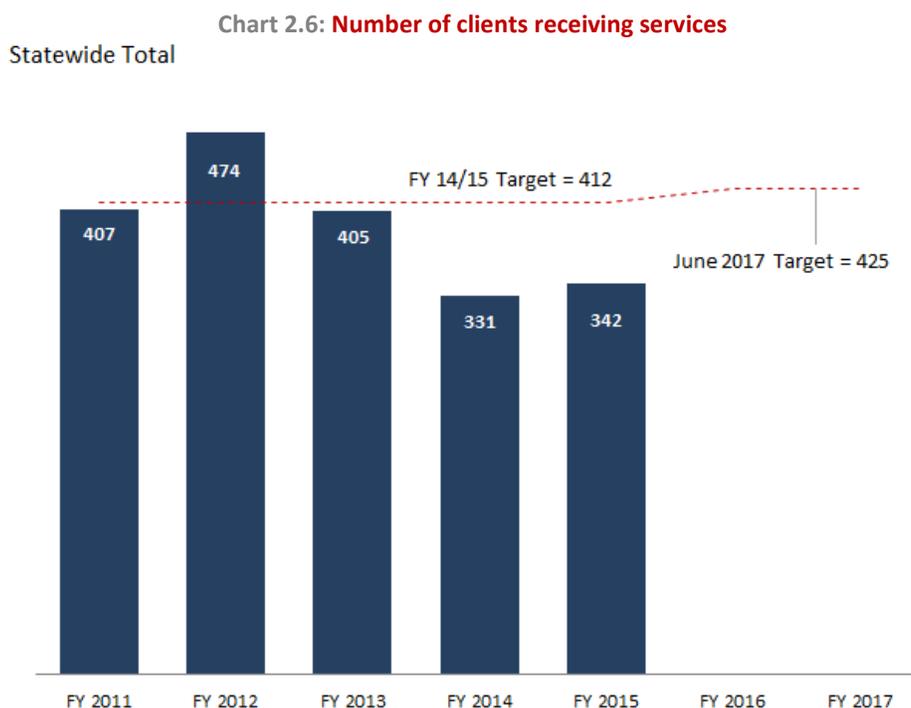
**Importance:** Clients who are Deaf, Hard of Hearing and Deaf-Blind, especially seniors, the underemployed and those with multi-disabilities, face barriers to various service delivery systems including housing, transportation, and socio-economic benefits. Case managers are available to assist these clients to obtain needed services by coordinating services, translating documents, advocating on their behalf, or teaching new abilities and skills. These services are provided by contracted, non-profit Regional Service Centers with 7 offices throughout Washington State.

**Success Measure:** Increase the number of clients receiving case management services from 248 in December 2014 to 425 by July 2017.

**Action Plan:**

- Monitor each Regional Service Center’s total caseload and contract performance and implement corrective actions for under performance as necessary.
- Identify and resolve issues impacting client case management utilization.
- Negotiate with Area Agencies on Aging to provide case management or establish a contract with a single provider.

See analysis and plan at: [ALTA Client Receiving Regional Center Service SO2.6](#)



**Strategic Objective 2.7:** Ensure that individuals with complicated personal care and behavioral challenges who reside in state hospitals have an appropriate community placement option through Enhanced Service Facilities.

		2012	2013	2014	2015
2.7	Enhanced Service Facility community placement option				New in 15-17 plan <b>YELLOW</b>

**Importance:** Washington has an identified gap in community placement options for individuals with complicated personal care needs and behavioral challenges. This lack in community placement options has resulted in longer stays in state hospitals for individuals deemed stable and ready for discharge. To address this service gap, AL TSA has developed a new category of licensed residential facility. Enhanced Service Facilities (as authorized by Chapter 70.97 RCW) support individuals eligible for home and community-based services to move from state hospitals back to the community who would not otherwise have a community placement option. This measure is subject to available additional funding.

**Success Measure:** Create the capacity to serve 60 additional individuals in the community with specialized supports, such as Enhanced Service Facilities, by July 2017.

**Action Plan:**

- License Enhanced Service Facilities by completing site review and approval of plans in coordination with the Department of Health; support providers in meeting licensing requirements; coordinate and sign contracts.
- Coordinate transition plans across agencies to successfully transition individuals into Enhanced Service Facilities by conducting individualized case planning for each transitioning resident with representatives from Eastern and Western State hospitals; field staff and other pertinent service providers to facilitate successful transitions.
- Build on the existing foundation of home and community-based long-term care behavioral support services through the expansion of Specialized Behavioral Services and Expanded Community Services in residential and skilled nursing facilities.
- Develop contracts across the state for adult family homes participating in the meaningful home-based activities pilot, the purpose of which is to strengthen the provider’s ability to support clients with challenging behaviors by providing meaningful, person-centered activities within the home environment.

See analysis and plan at: [AL TSA ESF Individuals Served SO2.7](#)



### 3. Improve Quality in Nursing Facilities and Other Settings

**Strategic Objective 3.1:** Affirm Adult Family Homes, Assisted Living Facilities and Nursing Homes are providing quality care and residents are safe through timely licensing re-inspections.

	2012	2013	2014	2015
<b>3.1</b> Timely surveys of Adult Family Homes, Assisted Living and Nursing Facilities	GREEN	GREEN	GREEN	GREEN

**Importance:** This measure ensures licensing re-inspections are completed timely, provider practice is consistent with quality care, and that adults who are vulnerable are protected from abuse. Licensing re-inspections are a valuable tool to ensure the quality of care.

**Success Measure:** Maintain the percentage of timely re-inspection at 99 percent.

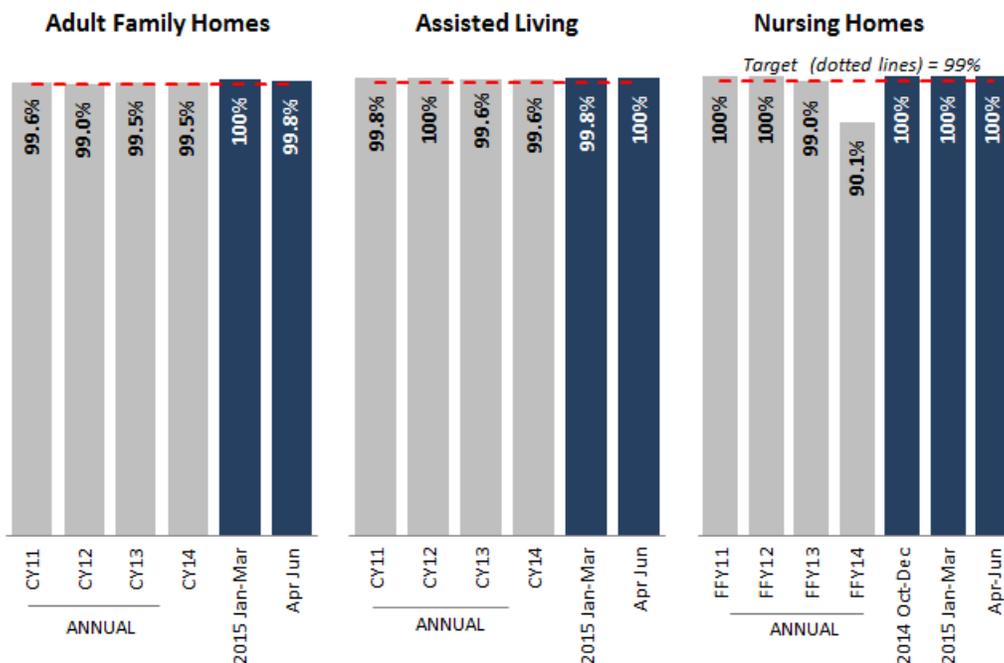
**Action Plan:**

- Utilize existing reports to meet inspection survey schedules.
- Collect, analyze and report recommendations for decreasing staff turnover based on data collected from exit interview process.
- Ensure data systems continue to meet business reporting needs through monthly meetings to review and address needed changes.

See analysis and plan at: [AL TSA AFHALFs Nursing Home Licensing Re-inspections SO3.1](#)

**CHART 3.1 Timely Licensing Re-inspections of Adult Family Homes, Assisted Living Facilities, and Nursing Homes**

Statewide Average



**Strategic Objective 3.2:** Affirm Residential Habilitation Centers and Supported Living programs are providing quality care and residents are safe through timely quality assurance activities.

	2012	2013	2014	2015
<b>3.2</b> Quality assurance of Intermediate Care Facilities and Supported Living				GREEN

**Importance:** This measure ensures quality assurance activities are completed timely to help promote the quality of care and protect adults who are vulnerable from abuse and neglect.

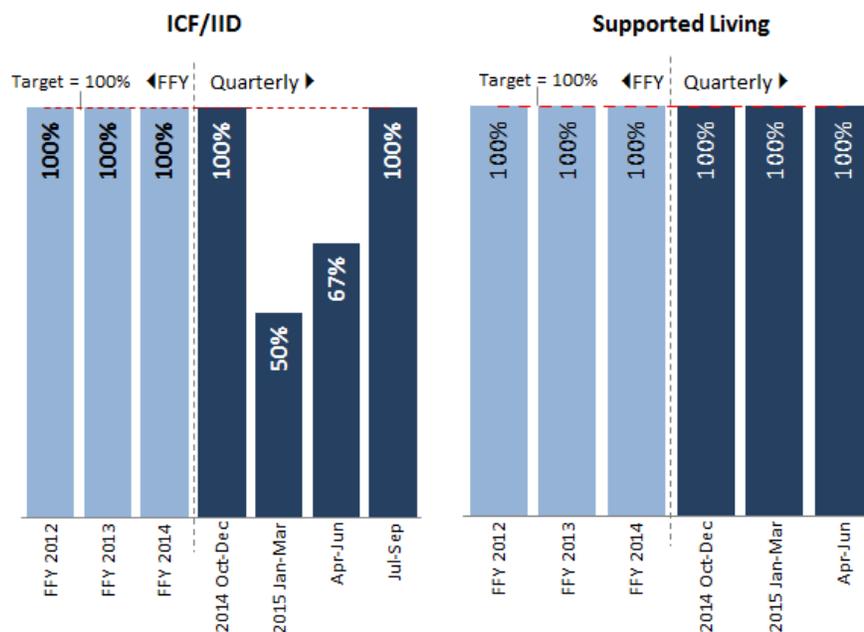
**Success Measure:** Maintain timely quality assurance activities at 100 percent.

**Action Plan:**

- Frequent monitoring of re-certification schedule to ensure surveys are completed in accordance to federal guidelines;
- Standardize data collection and entry statewide;
- Improve documentation and reporting.

See analysis and plan at: [ALSA Quality Assurance RHC-SLF SO3.2](#)

**CHART 3.2 Timely Quality Assurance for Residential Habilitation Centers and Support Living Programs**



Note: Performance beginning with the quarter ending March 2015 has been impacted by a request from our federal partners to conduct a joint survey of Lakeland Village Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) and the skilled nursing facility at the same time. This



resulted in a one quarter delay of the ICF/IID survey. Further, this schedule change has impacted timeliness in the subsequent quarter but is currently back on track.

**Strategic objective 3.3:** Timely quality assurance and oversight activities to ensure evidence of compliance with federal, state and program requirements.

		2012	2013	2014	2015
<b>3.3</b>	Compliance with other federal, state and program requirements				New in 15-17 plan <b>YELLOW</b>

**Importance:** Timely completion of quality assurance activities helps protect the health and safety of clients, secure and maintain federal funding and provides oversight of local operations. Activities include: auditing documents for compliance, developing improvement plans, data analysis to identify gaps in practices, publishing policy revisions, and offering training and technical assistance to AL TSA field offices. Through this function, AL TSA ensures that access to client services are timely and responsive to assessed needs, that providers and/or facilities are qualified to provide services, provider networks are adequate and federal assurances are met. Identified deficiencies are corrected and corrective action/performance improvement plans are developed and monitored to ensure continuous quality improvement. In addition, timely collection and provision of required documents including notation, and processing need to be within regulatory and operational standards.

**Success Measure 3.3.a:** 100% timely completion of Home and Community Services Division case management and financial eligibility compliance record reviews each calendar year.

**Action Plan:**

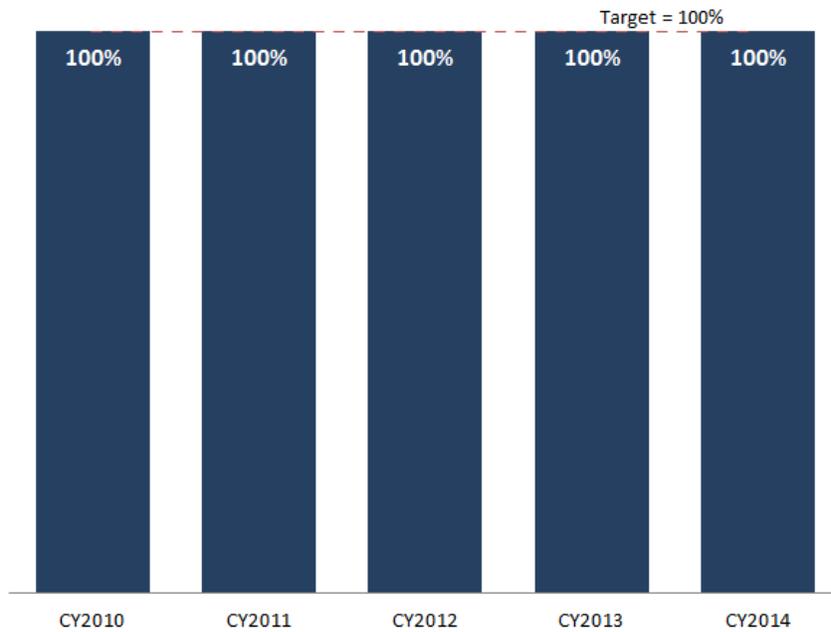
- Develop and implement an annual monitoring plan and schedule
- Issue monitoring reports, develop and implement statewide proficiency improvement plans to ensure areas of non-compliance are corrected and continuous quality improvement standards are achieved.
- Provide consultation to; review, and approved Home and Community Service (HCS) and Area Agency on Aging (AAA) office regional-specific proficiency improvement plans to address areas where proficiency standards are not met
- Analyze statewide trends to determine where training, technical assistance, policy revisions or other action is necessary.



See analysis and plan at: [ALISA Quality Assurance Oversight Activities SO3.3a](#)

Chart 3.3.a **Maintain Timely Quality Assurance of Home and Community Service Case Management**

Percent of Social Service Compliance Record Reviews Conducted Timely



**Success Measure 3.3.b:** 100% timely completion of the 3-year monitoring cycle for Area Agencies on Aging operations evidenced by a final report issued to each monitored AAA within 90 days of the monitoring exit interview.

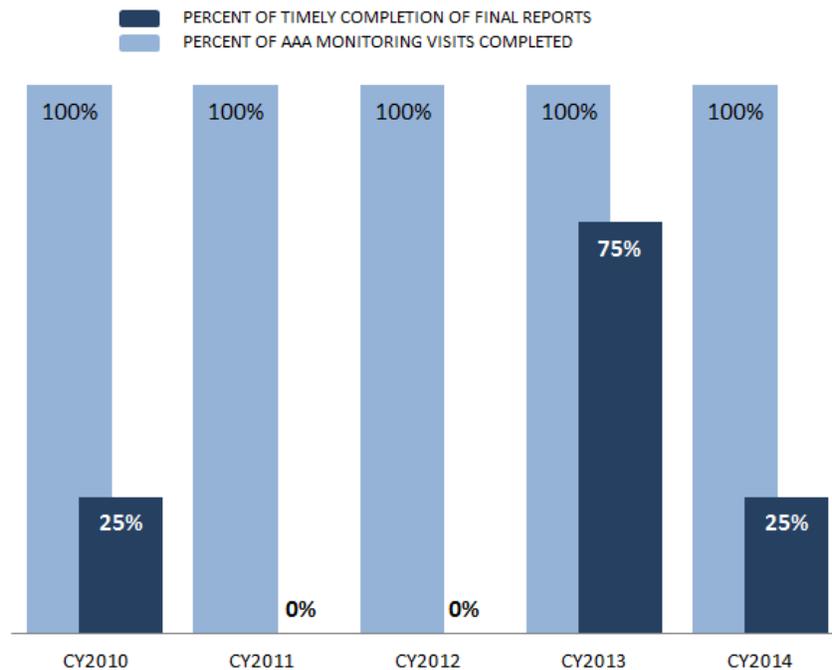
**Action Plan:**

- Streamline AAA monitoring activities to ensure that accurate reports are reviewed, and sent to AAAs timely.
- Streamline the monitoring process for Tribal AAAs following the Tribal Communications Protocol to coordinate with Tribes and the DSHS Office of Indian Policy.



See analysis and plan at: [ALISA Quality Assurance AAA Oversight Activities SO3.3b](#)

**Chart 3.3.b Timely Quality Assurance Monitoring for Area Agencies on Aging (AAAs)**



**Success Measure 3.3.c:** As of June 2017, 95% of audited Nursing Home Statements of Deficiency (SODs) are sent to the facility within the federal regulatory standard of 10 working days after onsite visit exit for complaint investigations or surveys.

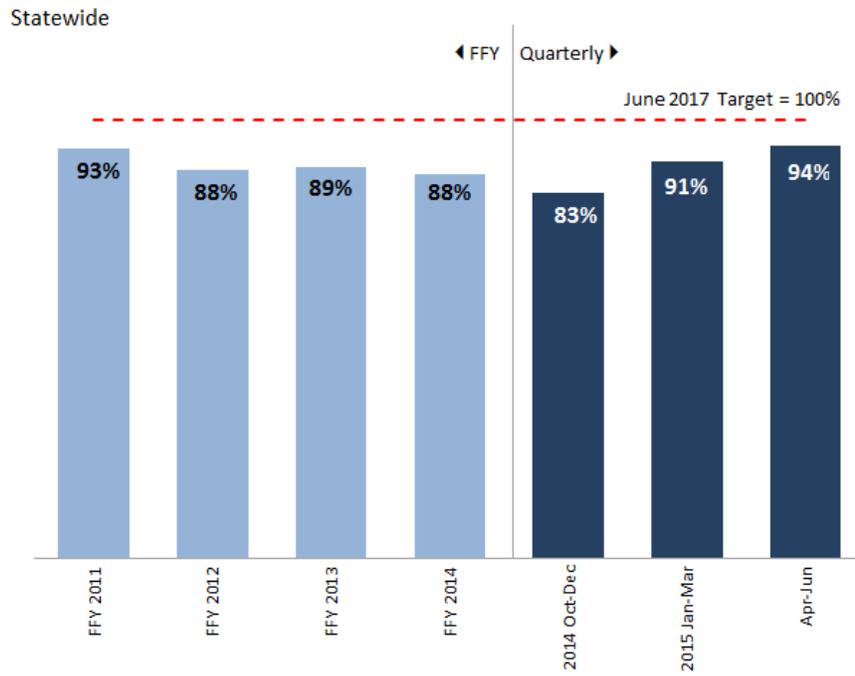
**Action Plan:**

- Create curriculum and procure vendor to train staff on principles of investigation.
- Conduct quarterly audits from a sample of SODs from each region to assure acceptable evidence of compliance per CMS guidelines.
- Assess and evaluate gaps in data entry using SOD tracking reports.
- Create standard operating procedures for SOD delivery to ensure timely mailing of SODs within 10 working days.



See analysis and plan at: [ALTA Quality Assurance SOD Oversight Activities SO3.3c](#)

**Chart 3.3.c Percent of Nursing Home Deficiencies Sent to the Facility within 10 Working Days**



#### 4. Other Mission Critical Goals

**Strategic Object 4.1:** Implement an electronic payment system (known as IPOne) that will significantly increase overall integrity of payments made to Individual Providers who contract with DSHS to provide personal care services to DSHS clients.

		2012	2013	2014	2015
4.1	Implementation of an electronic payment system				<b>YELLOW</b>

**Importance:** Washington State is engaged in the second phase of consolidating long-term care services and supports’ payments into a single, federally-certified payment system for Individual Providers who provide personal care to DSHS clients. This system is referred to as IPOne. The new system will significantly increase overall integrity of payments made to these providers. Every payment will be verified and accounted for by automatically checking client and provider eligibility, and other audit requirements, bringing the state into compliance with federal requirements. With these changes, Washington State will continue to be a model for other states to follow.

**Success Measure:** Meet identified benchmarks to successfully implement the payment system for use by Individual Providers who contract with DSHS to provide long-term services and supports to DSHS clients no later than April 1, 2016.

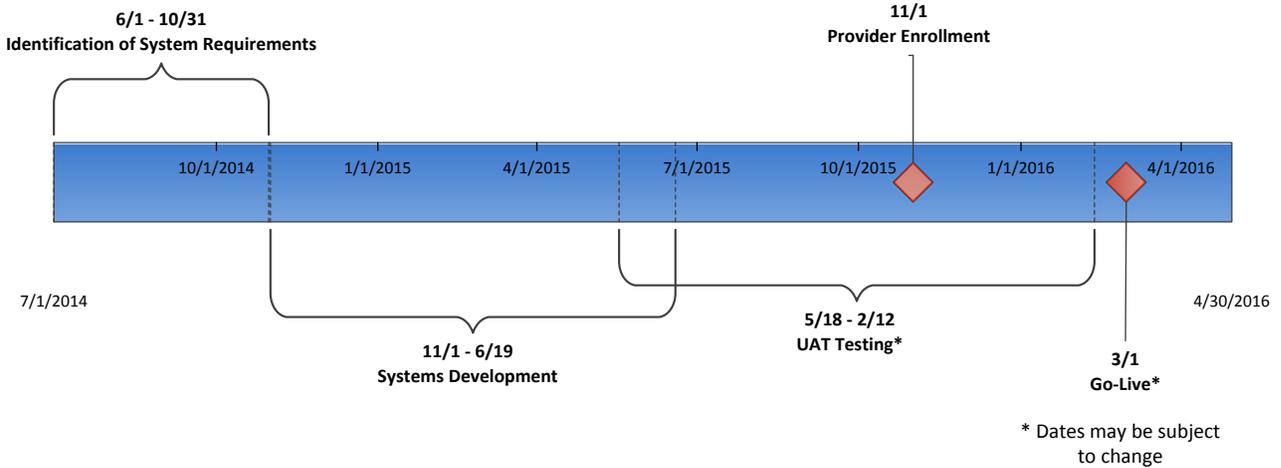
**Action Plan:**

- Complete User Acceptance Testing of system requirements to ensure all high-severity defects have been resolved.
- Complete provider enrollment implementation so that individual providers are properly registered and ready to use IPOne.
- Identify key milestones for all systems, business resources, and data activities. Monitor progress by developing metrics based off of key milestones and communicate progress. In addition, identify and monitor potential risks on missing key milestones.



See analysis and plan at: [AL TSA IP One Payment System SO4.1](#)

**Timeline for Implementing IPOne Payment System for Individual Providers**



**Strategic objective 4.2:** Increase IT security support to improve and enhance data security and perform oversight activities to ensure evidence of compliance for both internal and external business partners. Data security requirements are mandated by state and federal laws, the Washington State Office of the Chief Information Officer (OCIO), and the U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR) as well as specific DSHS security standards and policies.

	2012	2013	2014	2015
4.2 Improve data security and oversight activities				RED

**Importance:** The AL TSA Information Security Unit, in close collaboration and coordination with the DSHS Information Security Office and AL TSA Technical Services Unit, provides statewide information security support and services for AL TSA, Behavioral Health Administration (BHA) and the Developmental Disabilities Administration (DDA). This work is vital in protecting the department from reputable damage, Office of Civil Rights (OCR) fines, and civil legal actions that could arise from security breaches. Recent DSHS cybersecurity initiatives and an OCR investigation of DSHS identified the need for heightened security to include an ongoing Vulnerability Management Program (VMP), and the need to verify contract compliance as it relates to protecting DSHS data our contractors have access to. Optimizing IT security staff resources will improve compliance with the following requirements:

- 1) Performing vulnerability scans on all computers, servers, applications, and databases ensuring timely resolution of identified vulnerabilities.
- 2) Verifying data security compliance with those we contract with and their sub-contractors.
- 3) Security log monitoring of more than 167 headquarters’ servers for additional VPM security required by DSHS security policies, and OCIO IT standards and HIPAA regulations.



**Success Measure:** Reduce the monthly security vulnerabilities weighted score by 5 percent for servers and workstations from July 2015 to June 2017.

**Action Plan:**

- Develop Compliance Verification (CV) policy & procedure, to include schedules and develop tool for CV reviews.
- Communicate with staff about new process within AL TSA & DDA programs.
- Address vulnerability scans backlog to reach maintenance mode.
- Conduct regular vulnerability scans on systems, applications, and databases.
- Provide oversight and track progress on corrective action plans to completion.
- Collect vulnerability data to support monthly reporting.
- Conduct 1-2 random audits of AL TSA sites to determine data security compliance and risk, establish corrective action plans and track to completion.

See analysis and plan at: [AL TSA IT Security Support SO4.2](#)

**Strategic objective 4.3:** To establish a comprehensive initiative to embed diversity awareness and culturally-appropriate services into AL TSA business practices through staff training in Cultural Humility and Diversity Issues in Service Delivery and other diversity activities.

	2012	2013	2014	2015
4.3 Promote diversity and inclusion practices				New in 15-17 plan <b>YELLOW</b>

**Importance:** AL TSA recognizes the relevance of understanding and practicing diversity and inclusion principles in the delivery of long-term care services and supports and as provided for in DSHS Administrative Policy 7.22. Our staff, clients and providers are from very diverse cultural backgrounds. As such, creating and maintaining a service delivery environment that: recognizes, values, supports, and embraces respect for the individual differences is paramount to supporting the administration’s vision and providing equal access to populations that may otherwise be left out. AL TSA is committed to implementing a multi-prong initiative that includes providing the Cultural Humility and Diversity Issues in Service Delivery training to its employees and AAA staff, as well as embedding other diversity awareness practices into our daily operation.

The Cultural Humility and Diversity Issues Service Delivery Training is designed to accomplish the following:

- Develop an increased self-awareness of what it means in our culture to be a person of our own gender, race, class, etc. as well as an understanding of how these categories affect those who are different from ourselves.
- Describe structures of inequality that have differentially shaped peoples’ lives and choices.
- Explain the concept of cultural humility as it relates to working with clients effectively.



**Success Measure:** Provide Cultural Humility Training to 240 ALTSA employees and AAA case management staff each fiscal year from July 2015 to July 2017.

**Action Plan:**

- Provide training to 40 staff, 6 times per fiscal year.
- Design and conduct client and provider surveys to determine satisfaction in relationship to cultural sensitivity.
- Determine capacity for all ALTSA staff and AAA staff to receive foundational training timely, including completion of fiscal modeling to request additional from the legislature if necessary.

See analysis and plan at: [ALTSA Diversity Inclusion Initiative SO4.3](#)

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## **Additional important work in ALTSA**

- Work with Tribal governments to plan, develop and implement the Money Follows the Person Tribal Initiative designed to: support seamless access to Medicaid-funded services; reduce the need for services provided in institutional settings; and increase the ability to provide culturally-relevant, long-term services and supports in Tribal communities.
- Build a sustainable future through development and implementation of innovative services designed to leverage federal funding and assist individuals and their caregivers to manage their own care when possible.
- Develop and adapt performance measures for inclusion in Area Agency on Aging contracts beginning July 1, 2016 required under House Bill 1519, to make: improvements in client health status and wellness; reductions in avoidable high-cost services; increases in stable housing in the community; and improvements in client satisfaction with quality of life.
- Support the work of the Joint Legislative Executive Committee in planning for aging and disability issues.
- Implement a public-facing resource directory and website to improve accessibility of self-service information for individuals with disabilities and older adults looking for services that will enable them to remain in their own homes and communities and access needed long-term services and supports.
- Increase system capacity and practice of person-centered service planning and options counseling.
- Develop a sustainability plan for grant-funded, evidence-based practice interventions in collaboration with the Department of Health.
- Continue to develop specialized information, supports, and support groups for people with traumatic brain injury in community-based settings, in hospitals and in nursing homes.
- Continue to provide critical services and supports for relatives raising children who have many unmet needs and are not involved with the DSHS child welfare system.
- Support a statewide lifespan respite voucher system to serve unpaid family caregivers who are not served through, or do not qualify for, other existing formal respite services.
- Update the Cultural Competence Action Plan to address: cultural competence accountability

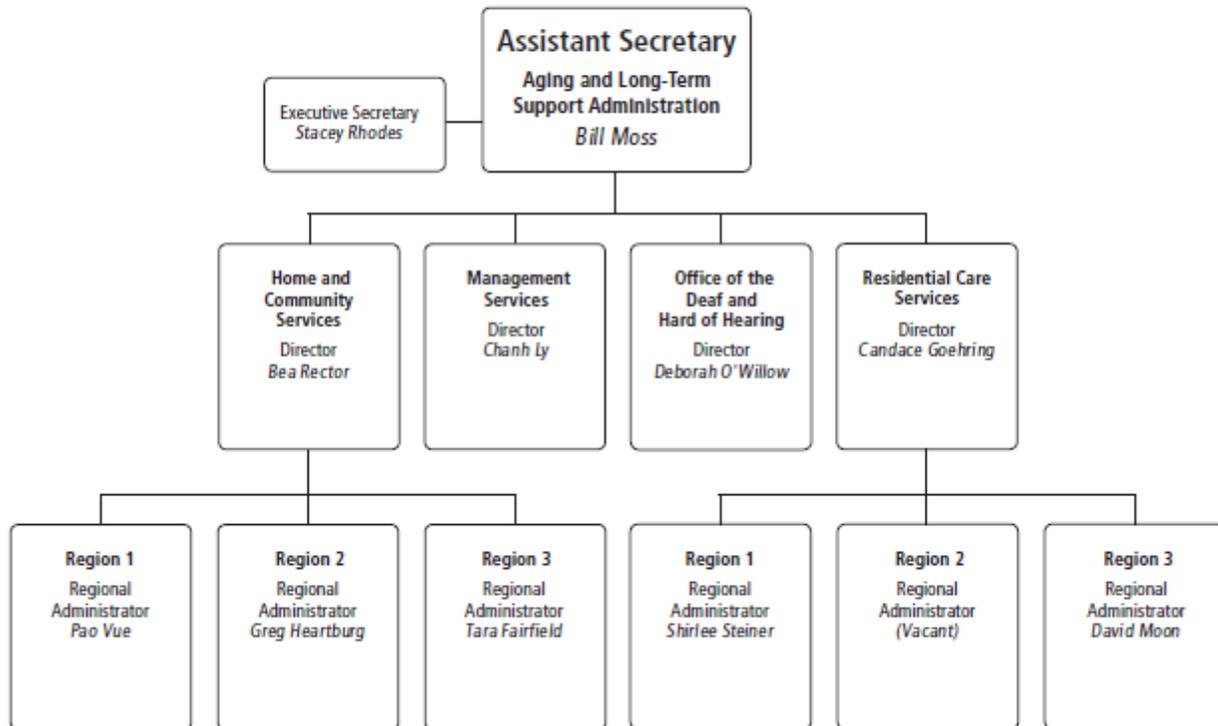


measures; building community partnerships and ensuring language access. Strive for ALTSA staffing to better reflect the population served.

- Continue work with stakeholders to improve Adult Family Home Specialty Training Curriculum as identified in House Bill 5630.
- Continue to ensure access to, and the availability of, a well-trained and qualified provider workforce statewide. Continue to work with service providers, training programs, the Department of Health, and disability advocates addressing barriers to a stable home and community-based workforce.
- Continue to work with Area Agencies on Aging to deliver quality services pursuant to the federal Older Americans Act. This includes providing technical support and monitoring to ensure value-based service delivery according to local Area Plans.
- Within DSHS, work with the federal Housing and Urban Development, the State Department of Commerce, local housing authorities, and landlords to develop affordable and accessible housing options for individuals served by ALTSA.



# Department of Social and Health Services Aging and Long-Term Support Administration



March 3, 2016

