

Strategic Plan

2010-2011

*Partners in Lifelong Independence
and Healthy Aging*



Bill Richardson, Governor • Michael Spanier, Acting Cabinet Secretary

A letter from Acting Cabinet Secretary Michael Spanier

Greetings!

At the heart of the Aging and Long-Term Services Department's mission, and inherent in all that we do, is the belief that New Mexico's elders and adults living with disabilities have the right to remain active participants in their communities, to age with respect and dignity, and have equal access to healthcare.

We recognize that geographic, economic, language and cultural dynamics often present barriers in accessing adequate food, transportation, housing and healthcare. These problems are particularly pronounced in our aging and disability populations whose needs are varied and complex. Given these barriers, we are committed to developing programs and policies and building partnerships that support lifelong independence and healthy aging.

This strategic plan is designed to address the contemporary challenges associated with growing numbers of New Mexicans who are age 50 and older, or

living with a disability. Annual updates to this plan will continue to reflect the strategic priorities of our state and New Mexicans in need of our services. This plan will guide the management, development, implementation and review of the Department's priorities, programs, and services.

We are extremely grateful to our Policy Advisory Committee, our volunteers, our committed staff, our advocates, and our collaborative partners including the Governor and the Legislature. Their dedication and commitment ensure the Department's continued success in addressing our strategic priorities.

We invite you to join us in our work to support lifelong independence and healthy aging!



Michael Spanier
Acting Cabinet Secretary

Making a Difference

Throughout these pages you will find stories about real New Mexicans who have received services through the Department's programs.

One story reflects how something as simple as home- and community-based services makes a positive impact in someone's life.

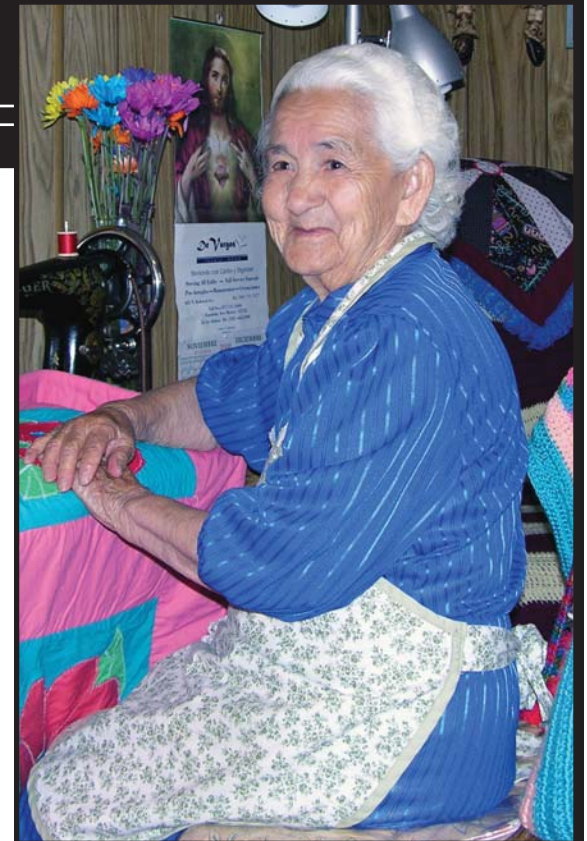
Another story shows the type of situations in which Adult Protective Services staff are involved and how the staff's care and compassion can affect positive results in a challenging life.

In Memoriam

Ramona Chacon of La Madera, a tiny community in northern New Mexico, was featured in the Department's 2008 calendar. She and her family were pleased that we were able to share her story as an indication of how our services can positively impact the life of an elder.

After nearly 96 years of life, Ramona passed away in September 2009.

The Department and its staff dedicate this Strategic Plan to the memory of Ramona Chacon and know that she is one successful example of why and how we focus our efforts.



Mission, Vision, Guiding Principles, and Populations Served

MISSION

The mission of the Department is to promote the independence and dignity of adults and persons living with disabilities and their families by offering services that support autonomy, health, safety, economic well-being, cultural diversity, community involvement, and personal responsibility, thereby enabling them to live on their own terms in their own communities.

VISION

The Department's vision is to serve as a leader in achieving lifelong independence and healthy aging for all adults, individuals living with disabilities, and their families.

GUIDING PRINCIPLES

The Department operates with the following guiding principles:

- We are here to serve the public and respond accordingly through our legislative and regulatory mandates
- The rights, well-being, and safety of those we serve are our first priority
- We treat all persons with respect and dignity
- We are advocates on behalf of those we serve
- We promote personal choice, self-determination, and independence
- We respond through active and effective communication
- We promote flexible, creative, and fiscally responsible service-delivery systems
- We are active partners with those we serve
- We promote healthy aging, which includes healthy and productive lives for those adults living with a disability
- We promote community involvement and civic engagement
- We foster dynamic teamwork and a shared sense of purpose
- We value and recognize the achievements of our volunteers, staff, and collaborative partners

POPULATIONS SERVED

The populations served by the Department include:

- Seniors (50 and older dependent on program)
- Behavioral health clients
- Adults living with disabilities
- Tribes, Pueblos, Navajo Nation
- People with employment barriers
- Retirees with no family support
- Long-term care facility residents
- Veterans with long-term needs
- Families and caregivers
- People living with HIV/AIDS
- Persons with Alzheimer's, dementia, Posttraumatic stress disorder, brain injury

Department Organization

The Aging and Long-Term Services Department (ALTSD) provides outreach, access, quality programs, and services through an organization that consists of the Office of the Secretary and five divisions.

OFFICE OF THE SECRETARY

The Office of the Secretary provides policy development, planning, legal counsel, information technology, communications, and constituent services to the Department. The Secretary's office includes the Long-Term Care Ombudsman, Indian Elder Affairs, Adult Abuse Prevention and Education, Geriatric Behavioral Health, and Faith-Based and Community Initiatives.

ADMINISTRATIVE SERVICES DIVISION

The Administrative Services Division delivers fiscal, human resource, clerical, record keeping, and other administrative support to the Department in the areas of personnel, budget, procurement, contracting, and capital projects.

ADULT PROTECTIVE SERVICES DIVISION

Adult Protective Services investigates reports from members of the public of abuse, neglect, and exploitation of adults who may be unable to protect or care for themselves. This Division has a statewide network of five regions and 23 field offices.

The program provides a system of protective services and remains on call for new reports on a 24 hour-a-day, seven days-a-week basis. Intervention services may include emergency protective placement, limited assistance in the home, short-term case management, attendant care, contracted home- or community-based care, and filing of guardianship or conservatorship petitions in district court. The program works with law enforcement, health care providers, and a host of social service agencies to assist incapacitated adults.

AGING NETWORK DIVISION

The Department is New Mexico's federally designated State Unit on Aging serving older individuals by entering into cooperative arrangements with local providers for the provision of supportive services, such as transportation, meals, caregiver support, etc., and multipurpose senior centers.

Services within the division include Employment Programs, the Golden Opportunities for Lifelong Development (GOLD) Program, and the Senior Services Bureau. The Senior Services Bureau supports all Older Americans Act programs, Area Agencies on Aging (AAA), Foster Grandparent Program, Senior Companions Program, Retired and Senior Volunteer Program, and other aging network contractors such as Senior Olympics and the New Mexico Alzheimer's Association.

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Department Organization

CONSUMER AND ELDER RIGHTS DIVISION

The Consumer and Elder Rights Division is the advocacy arm of the Department, charged with increasing access to long-term care services by providing information, assistance, referrals, and resource coordination to individuals and their families.

Services within the division include the Aging and Disability Resource Center, Seniors Saving Medicare Program, Health Insurance and Benefits Counseling Program, HIV/AIDS Consumer Advocacy Program, and a Prescription Drug Assistance Program with MEDBANK and Brown Bag Assessments.

ELDERLY AND DISABILITY SERVICES DIVISION

The Elderly and Disability Services Division provides support that enables older adults and individuals living with disabilities to remain in their own homes and communities, or to return to their homes from a nursing facility or institution. The Division advocates for each consumer to live in the least-restrictive environment, and provides education and training for consumers, case managers, and direct service providers.

Services the Division administers include the Home- and Community-based Medicaid Waiver programs—Coordination of Long-Term Services (CoLTS), CoLTS C Waiver (formerly the Disability and Elderly [D&E] Waiver program), and Mi Via, New Mexico's Self-directed Waiver program; the Personal Care Option (PCO) program, the Program of All-inclusive Care for the Elderly (PACE), the Brain Injury (BI) and Traumatic Brain Injury (TBI) programs, and the Gap program.

Please see pages 25-28 for a list of services.

Strategic Priorities

The Aging and Long-Term Services Department's 2010-2011 Strategic Plan focuses on priorities that encourage partnership and collaboration across the Department's divisions and programs. These priorities, when addressed together, demonstrate a continuum of services and a comprehensive approach to supporting the long-term care needs of adults living with a disability and of older adults.

This section of the plan contains a description of the goals, objectives and impacts associated with the following eight strategic priorities. Collectively, these priorities support lifelong independence and healthy aging in concert with federal agencies, state executive and legislative agencies, and ALTSD's network of partners.

- Priority 1: Access to home- and community-based services
- Priority 2: Support of caregivers
- Priority 3: Support of an individual's self-direction of her or his long-term care services
- Priority 4: Zero tolerance for adult abuse, neglect, and exploitation
- Priority 5: Promote active and healthy lifestyles
- Priority 6: Promote civic engagement
- Priority 7: Advocacy for economic security—food, housing, transportation, and employment
- Priority 8: Support of geriatric behavioral health needs

Strategic Priority 1: Access to home- and community-based services

Goals

- Provide a person-centered system of services that minimizes stays in institutions by increasing access to less restrictive home- and community-based services. (Elderly and Disability Services Division)
- Offer seamless access to a choice of culturally responsive, appropriate, and high-quality long-term care services. (Elderly and Disability Services Division)
- Improve access to home- and community-based services and long-term care options. (Consumer and Elder Rights Division)
- Prevent and reduce adult abuse, neglect, and exploitation through access to home- and community-based services. (Adult Protective Services Division)
- Work with Agencies on Aging, Independent Living Resource Centers, and local service providers to support home- and community-based long-term care services. (Aging Network Division, Elderly and Disability Services Division, Consumer and Elder Rights Division)
- Provide technical assistance to faith-based and community organizations in rural areas to build capacity and mobilize resources in support of home- and community-based services. (Office of the Secretary – Faith Based and Community Initiatives)

Objectives

- Continue to partner with the Human Services Department to administer Coordination of Long-Term Services (CoLTS)—a system coordinating medical care and community-based services and supports. (Elderly and Disability Services Division)
- Facilitate training and collaboration with the Indian Affairs Department and tribes, Pueblos, and the Navajo Nation to enhance and improve the delivery of long-term care programs and services. (Office of the Secretary – Office of Indian Elder Affairs)
- Utilize resource coordination screening, assessment, and checklist tools to identify and address the daily living needs of individuals served through the Aging and Disability Resource Center. (Consumer and Elder Rights Division)

Facts

In 2007, 12.7% of New Mexicans were 65 and older—about 250,190 individuals.

Projections for 2015 indicate that 16.8% of New Mexicans will be 65 and older—343,000 individuals—increasing to 26% (550,000 individuals) in 2030.

300,000 NM residents of all ages are living with a disability; 42% of those 65 and older are living with a disability.

For every person in a nursing home paid for by Medicaid, three people could live in their own home with services.

In 2008, NM served as the leader in the nation by spending 73% of its Medicaid long-term care funding on home- and community-based services.

Impacts

- Money saved
- More people served
- Choice provided to individuals
- Increased access to social services and benefits
- Unnecessary, more costly institutional care is avoided
- More people living safely at home
- More people living with dignity

Strategic Priority 1: Access to home- and community-based services

Objectives continued

- Offer a person-centered online resource directory to help individuals identify long-term needs, strategies for care, services, and caregivers. (Consumer and Elder Rights Division)
- Provide increased outreach and education to social services providers, Area Agency on Aging providers, hospital discharge planners, Department of Corrections' transition caseworkers, pharmacies, and case managers. (Consumer and Elder Rights Division; Aging Network Division)
- Develop and implement a short-term case management program. (Consumer and Elder Rights Division)

Ramona Chacon, La Madera

Hard work and a commitment to family and home were the hallmarks Ramona Chacon of La Madera, a tiny community a few miles northwest of Ojo Caliente in Rio Arriba County.

Sitting in her favorite room just off the kitchen—a room adorned with dozens of images, including some of her 30 great grandchildren—Mrs. Chacon proudly displayed a quilt she recently made on her 100-year-old Singer sewing machine, which she powered with her foot.

If she wasn't working on a quilt, you could find her in the kitchen in her every-other-day commitment to crafting handmade tortillas on her wood-burning stove.

While being photographed, this visibly bashful northern New Mexican was asked about the Disabled and Elderly (D&E) Waiver services she receives. "*Si, si, me gusta,*" (Yes, yes, I like it) she responds before switching to English. "The program treats me well and I get to stay home and do what I want."

Doing part of what she wanted to do involved visiting with her children, some of whom live in the same community and regularly spent time with their diminutive matriarch.



Strategic Priority 2: *Support of Caregivers*

Goals

- Provide a seamless support system for caregivers. (Aging Network Division – Senior Services Bureau)
- Facilitate access to caregiver support services and resources. (Aging Network Division – Senior Services Bureau)
- Support innovation in evidence-based caregiver support initiatives. (Aging Network Division – Senior Services Bureau)
- Assist caregivers so that homebound individuals can remain in their own homes, live with dignity, and delay the need for institutional care. (Aging Network Division – Senior Services Bureau; Elderly and Disability Services Division)

Objectives

- Work with the Aging and Disability Resource Center, Area Agencies on Aging, Independent Living Resource Centers, community organizations, and service providers to maintain and enhance caregiver support programs. (Aging Network Division – Senior Services Bureau; Consumer and Elder Rights Division; Elderly and Disability Services Division)
- Provide Alzheimer’s disease and dementia caregiver training and technical assistance throughout the Aging Network. (Aging Network Division – Senior Services Bureau)
- Provide technical assistance to Area Agencies on Aging and Independent Living Resource Centers in the development of new programs designed to assist caregivers, including systems of care coordination and evidence-based programs. (Aging Network Division – Senior Services Bureau)
- Solicit input from stakeholders regarding needs of people with Alzheimer’s disease, dementias, or chronic diseases, and their caregivers, with regard to planning and service delivery. (Aging Network Division – Senior Services Bureau)
- Support legal services to help grandparents get legal guardianship of children who otherwise would enter the foster-care system. (Office of the Secretary)

Facts

Family caregivers report chronic health conditions at twice the rate of their equal-aged counterpart.

Elderly caregivers have a 63% higher mortality rate than non-caregivers of the same age.

60% of family caregivers are women, substantially increasing a woman’s risk of living in poverty.

An estimated 200,000, or 10% of New Mexicans, have served as a family caregiver.

2/3 of family caregivers reduce their work hours to provide care.

Businesses lose money every year due to employees’ need to care for family members.

About 46,000 NM grandparents live with their grandchildren and 50% of those have primary responsibility for their grandchildren.

As more troops are surviving war injuries, parents increasingly are being thrust into the role of long-term caregivers.

Impacts

- Money saved
- More people served
- Fewer children in foster care
- Healthier caregivers
- More people living at home

Strategic Priority 2: *Support of Caregivers*

Family caregivers are the primary long-term care provider for older adults. The Department supports this most precious resource, recognizing that family caregivers are faced with many challenges.

Among those challenges are the cost and limitation of caregiving services, personal time spent, balancing work and home, complex multi-generational home situations and, generally, the age and

type of frailty the older family member may have. The needs of families and individuals effected by Alzheimer's Disease and related dementias adds complexity to caregiving.

The Department directs state and federal funds for services that caregivers may benefit from, including, information and assistance, in-home respite, adult day care, care coordination, training, education, crisis assistance, support groups, and the dissemination of culturally sensitive materials.

Kim Swanwick, Albuquerque

Kim Swanwick's mother moved in with her family almost nine years ago. These days, Kim's mother looks forward to daily visits that provide meaning and purpose to her life at a Share Your Care site in Albuquerque, and Kim is an active member of the Share Your Care Board.

"My mother has to be somewhere where she feels happy," Kim says. "Share Your Care always has plenty of activities for her to do in a safe and nurturing environment, and this gives her a reason to get up in the morning.



"I truly am grateful for all the services that Share Your Care provides; as my mother's caregiver, I wouldn't be able to adequately cope with the daily challenges that confront me without them. I have found that the staff is dedicated to providing the best possible care for my mother and this gives my family piece of mind."

Share Your Care, Inc. provides day services to persons with Alzheimer's and related dementia, as well as adults with developmental disabilities and severely disabling mental illness.

Funding for some of its programs is provided through the Aging and Long-Term Services Department.

Strategic Priority 3: Support of an individual's self-direction of long-term care services

Goals

- Continue to develop and improve self-directed programs for individuals who want and are able to choose what long-term care services they need and how the services will be provided. (Elderly and Disability Services Division)
- Advocate for the civil and human rights of individuals living in long-term care facilities and to residents in long-term care settings who wish to transition to home- and community-based services. (Office of the Secretary – State Long Term Care Ombudsman Program)
- Facilitate training and collaboration with the Indian Affairs Department and tribes, Pueblos, and the Navajo Nation to enhance and improve the delivery of self-directed programs and services. (Office of the Secretary – Office of Indian Elder Affairs)
- Improve access to self-directed long-term support services for the brain-injured populations. (Elderly and Disability Services Division; Consumer and Elder Rights Division)

Objectives

- Develop and implement a person-centered planning tool so that individuals plan for their long-term care, which enables them to live on their own terms in their own communities. (Consumer and Elder Rights Division)
- Expand ombudsman coverage to additional long-term care settings, including assisted living facilities, board and care homes, and shelter homes. (Office of the Secretary – State Long Term Care Ombudsman Program)
- Advocate for stronger regulation that reflect clients' needs in assisted living facilities and shelter homes. (Office of the Secretary – State Long Term Care Ombudsman Program)
- Expand the trained and certified ombudsman volunteers to insure resident access to advocacy services. (Office of the Secretary – State Long Term Care Ombudsman Program)
- Operate an effective and efficient self-directed program called Mi Via, or My Way, for seniors, persons with disabilities, and persons with a brain injury. (Elderly and Disability Services Division)

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Facts

Every state has at least one self-directed service program.

Since the inception of Mi Via in 2006, there have been 910 active users.

As of 2006, 15% of New Mexicans were persons living with a disability.

Leading causes of brain injury are falls (28%), motor vehicle crashes (20%), blow to the head (19%), and assaults (11%).

Explosions are a leading cause of traumatic brain injury for active-duty military in war zones.

It is estimated that brain injuries of wounded service members (as of April 2008) might total 320,000, or 20% of those who have served in the military.

Traumatic Brain Injury may cause total functional disability and/or psychosocial disorientation.

Brain injury can cause epilepsy and increase the risk for conditions such as Alzheimer's disease, Parkinson's disease, and other brain disorders that become more prevalent with age.

Strategic Priority 3: Support of an individual's self-direction of long-term care services

Objectives continued

- Increase the number of people choosing the consumer-directed Personal Care Option—a home- and community-based service. (Elderly and Disability Services Division)
- Work with the brain-injured community to operate a self-directed long-term care service delivery system for the brain injured. (Elderly and Disability Services Division)
- Collaborate with the Department of Veterans Services to engage veterans and their families in self-directed long-term care programs. (Consumer and Elder Rights Division; Elderly and Disability Services Division; Office of the Secretary- Geriatric Behavioral Health Unit)

Impacts

- Choice and control
- Individuals empowered
- Increased quality of service
- Cost savings

Jessica Guttman, Santa Fe

Jessica Guttman is quick with a laugh and even quicker with a quip, and has an instantly recognizable and contagious love-of-life attitude.



With her dogs Morgan and Ophelia nearby in her colorful and comfortable living room, the walls of which are adorned with her brilliant and creative paintings, Jessica displays an open and refreshing curiosity about her world, which includes living with a brain injury.

At ease when talking about the accident that sent her into a coma when she was a teenager, the 36-year-old enthusiastically praises her participation in Mi Via, the Department's self-directed waiver program.

"I'm really excited," she says of Mi Via. "It's so empowering. It's really good because I make decisions."

And, she says, if she has questions or needs to confer about any part of her self-directed approach, she speaks with her consultant, who Jessica describes as "awesome."

Strategic Priority 4: *Zero tolerance for adult abuse, neglect, and exploitation*

Goals

- Protect adult victims of abuse, neglect, or exploitation who do not have the capacity to protect themselves. (Adult Protective Services Division)
- Continue to provide all counties with a coordinated Adult Protective Services system of referral, response, assessment, investigation, and, when appropriate, short-term services. (Adult Protective Services Division)
- Provide the public with education and outreach to help people recognize and report adult abuse, neglect, and exploitation. (Adult Protective Services Division)
- Identify and assist persons with complex medical and behavioral health needs by effectively utilizing the protective services continuum and other public resources. (Adult Protective Services Division)
- Develop access to behavioral-health services for Adult Protective Services clients. (Office of the Secretary – Geriatric Behavioral Health)

Objectives

- Strengthen the capability of Adult Protective Services to respond to the growing numbers of elders and adults living with disabilities who are abused, neglected, or exploited. (Adult Protective Services Division)
- Develop a plan for recruitment and retention of caseworkers/investigators and supervisors who are critical to the health and safety of incapacitated adults living in urban and rural locales. (Adult Protective Services Division)
- Educate the public to make appropriate referrals to adult protective services through dissemination of the toll-free number and through a public information campaign. (Adult Protective Services Division; Consumer and Elder Rights Division)
- Explore the feasibility of expanding the current intake system to include online reports of abuse, neglect, or exploitation. (Adult Protective Services Division; Consumer and Elder Rights Division)
- Collaborate with the geriatric behavioral health director and the adult abuse prevention and education team in the identification and development of local multidisciplinary teams. (Office of the Secretary – Geriatric Behavioral Health, Adult Protective Services Division)

Facts

90% of abuse and neglect incidents are by known perpetrators, usually family members—2/3 are adult children or spouses.

42% of murder victims older than 60 are murdered by their own offspring.

The eldest of our seniors, 80 years and older, are abused and neglected at 2-3 times the proportion of others.

21.6% of all domestic elder abuse reports come from health-care professionals, 9.4% from service providers, and 14.9% from family members.

Financial exploitation exists in 4% of abuse victims each year.

Neglect is the most common form of elder maltreatment in domestic settings—55%.

Physical abuse was the most common type of abuse reported—15%.

60% of alleged victims are women.

Impacts

- Financial exploitation reduced
- Longer and safer life
- Reduced isolation and self-neglect
- Individuals and families receive assistance
- Independence maintained

Strategic Priority 4: Zero tolerance for adult abuse, neglect, and exploitation

Adult Protective Services (APS) was called to investigate the apparent “self-neglect” of a woman who lived alone. She had been abandoned by her adult children years ago when she refused to divorce her abusive husband who had recently died.

When an APS workers arrived at the home, they discovered piles of debris several feet high. In some rooms, the woman could walk between the piles but in other rooms, the piles had finally collapsed forming a mountain of rubbish.

The clutter interfered with cooking, cleaning and even sleeping. It threatened to block exits and could collapse onto the woman.

With the woman’s consent, APS placed her in an emergency housing while APS paid to have her home cleaned. Hoarding is a potentially serious health and life-safety risk. For some people, hoarding is an isolated behavior while for others; it is part of an obsessive-compulsive disorder, which is a treatable condition.



An Adult Protective Services employee in a room in the woman’s home.

Strategic Priority 5: *Promote active and healthy lifestyles*

Goals

- Improve the health and wellness of New Mexico's elders and adults living with a disability through a focus on nutrition, fall prevention, physical activity, chronic disease management, and medication management. (All Department Divisions)
- Support innovation in evidence-based health promotion and disease prevention.

(Aging Network Division – Senior Services Bureau)

- Collaborate with Native American health programs statewide to identify health and wellness issues of concern to Native American elders and adults with disabilities. (Office of the Secretary – Office of Indian Elder Affairs)
- Reduce premature disability or death through public awareness and education about immunizations. (Aging Network Division – Senior Services Bureau; Consumer and Elder Rights Division)

Objectives

- Promote appetizing meals that meet the nutritional requirements and dietary guidelines for older adults. (Aging Network Division – Senior Services Bureau)
- Promote the provision of therapeutic meals for seniors, particularly diabetes friendly meals. (Aging Network Division – Senior Services Bureau)
- Promote physical fitness for adults age 50 and older through Senior Olympics and other health-promotion activities. (Aging Network Division – Senior Services Bureau)
- Provide health promotion and disease prevention information, activities, and programs throughout New Mexico in collaboration with Area Agencies on Aging, Independent Living Resource Centers, aging network providers, governmental entities, and health-care organizations. (Aging Network Division – Senior Services Bureau)
- Provide information and education to New Mexico's elders and adults living with a disability about preventing HIV/AIDS. (Consumer and Elder Rights Division)
- Provide increased outreach and education at health fairs and other venues about prescription drugs to reduce drug interactions, duplications, and other medication management issues. (Consumer and Elder Rights Division)

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Facts

The top six chronic health conditions for age 65 and older are arthritis, hypertension, heart disease, cancer, diabetes, and breathing disorders.

Persons living with a disability have less health insurance coverage and use of the healthcare system, e.g. pap test, mammography, oral health exams.

Persons living with a disability have a higher rate of chronic conditions, e.g., diabetes, elevated blood pressure, depression, obesity, tooth loss, vision, and hearing impairments.

1/2 of older men and 1/3 of older women reported trouble hearing.

20% of our elders have vision problems.

25% of the older population do not have their natural teeth.

64% of those 65 and older reported having a flu shot in the past year—this varies by ethnicity.

57% of those 65 and older have received a pneumonia vaccination.

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Strategic Priority 5: *Promote active and healthy lifestyles*

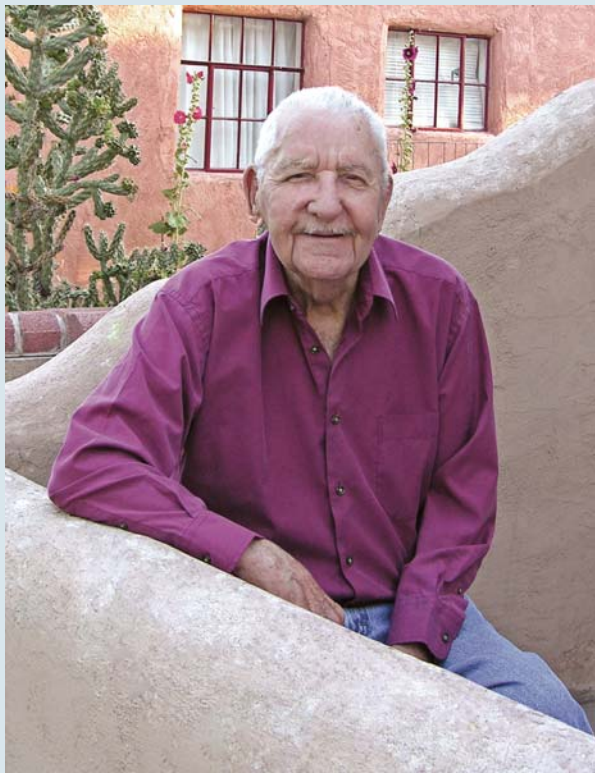
Objectives continued

- Participate in local immunization coalitions and immunization-related activities.

(Aging Network Division – Senior Services Bureau)

- Encourage grandparents to get grandchildren immunized by providing information about the importance of immunizations and how and where to be immunized. (Aging Network Division – Senior Services Bureau; Consumer and Elder Rights Division)

- Collaborate with community-based programs to identify and develop fall prevention and chronic disease best practices and programs. (Aging Network Division – Senior Services Bureau; Elderly and Disability Services Division)



Lloyd McGuire, Albuquerque

Lloyd McGuire is one of more than 1,200 individuals who receive home-delivered meals in Albuquerque each year. The Albuquerque program annually serves about 200,000 meals.

Facts continued

Diet quality decreased significantly from 2002 to 2005 with losses in grains, vegetables, and dairy products.

Obesity increased to 37% in older women and 33% in older men.

Older individuals spend more than 50% of their time watching television.

One in three adults 65 and older falls each year.

Of those who fall, 20% to 30% suffer moderate to severe injuries that make it hard for them to get around or live independently and increase their chances of early death.

Older adults are hospitalized for fall-related injuries five times more often than they are for injuries from other causes.

Impacts

- Fewer doctor visits
- Longer lives
- Healthier lives in an independent setting
- Cost savings

Strategic Priority 6: *Promote civic engagement*

Goals

- Promote local civic engagement initiatives and solutions throughout New Mexico.

(Office of the Secretary – Engage New Mexico)

- Promote mass media and public communications that portray older adults as assets. (Office of the Secretary – Engage New Mexico)
- Engage older adults to serve as community-based mentors, providing them with meaningful opportunities for civic engagement. (Aging Network Division – Employment Programs Bureau)
- Identify and create options for older persons to engage in meaningful activities to address the needs of New Mexico’s growing older-adult population. (Aging Network Division – Employment Programs Bureau)

Objectives

- Develop statewide awareness and interest in civic engagement. (Office of the Secretary – Engage New Mexico)
- Explore partnerships and collaborate with faith-based and community groups, foundations, and other private sector entities. (Office of the Secretary – Engage New Mexico; Office of the Secretary- Faith-based and Community Initiative)
- Identify organizations (and assess capacity) currently working in the area of lifelong learning, and/or offering job and volunteer opportunities. (Office of the Secretary – Engage New Mexico)
- Train and place compassionate, competent, older people to serve as mentors to children and TANF (Temporary Assistance to Needy Families) recipients. (Aging Network Division- Employment Programs Bureau)
- Work with social service and governmental agencies to identify individuals who may benefit from mentoring. (Aging Network Division- Employment Programs Bureau)
- Provide mentoring services to at-risk individuals entering or reentering the workforce, as well as to others who may be experiencing barriers. (Aging Network Division – Employment Programs Bureau)

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Facts

More people volunteer in midlife than in retirement.

Young seniors (the baby boomers) are not a single homogeneous social entity and cannot be assumed to attend senior centers or participate in senior programs.

An increasing number of seniors are still interested in learning and desire educational opportunities.

The elderly population is rapidly expanding while the core taxpaying population is shrinking.

Technological changes in the workplace or volunteer placements may require new job skills.

40% of those 55 and older offer their time and service as volunteers.

Impacts

- Volunteer value to both the individual and to society
- Senior centers serve as a springboard for civic engagement
- Retired workers recruited to volunteer their services
- Tangible benefits of volunteering— transportation, liability insurance

Strategic Priority 6: *Promote civic engagement*

Jessie Bayes, Lovington

Jessie Bayes of Lovington has been a volunteer Ombudsman for more than 10 years, serving nursing facility residents since before her 60th birthday.



Prior to officially becoming an Ombudsman, she informally served as an advocate for residents of a nursing facility that she met through their visiting relatives.

“I could see the need for an Ombudsman because of most of the residents were timid and would not ask for the things they needed,” she explains. “I felt that I could be a voice for them.”

Nowadays, the 74-year-old volunteer works in both Lovington and Hobbs to monitor nursing homes to ensure that individuals receive the services they need.

And she says her volunteer effort is very rewarding.

“I am a people person and I really care about other people’s needs,” she says.

“I am interested in pain control in nursing homes and in providing as good a quality of life for residents that we can. Knowing that I have made life a little easier for the elderly, or, sometimes, for people younger than I am, is very rewarding.”

The Department is fortunate to have more than 100 volunteer Ombudsman throughout the state. If you are interested in serving as a volunteer Ombudsman, please call 1-866-451-2901 for more information.

Objectives continued

- Assist mentored clients in building self-sufficiency and economic security. (Aging Network Division – Employment Programs Bureau)
- Continue to enroll additional volunteers to serve their communities and meet growing demand. (Aging Network Division – Employment Programs Bureau)
- Provide civic engagement opportunities for HIV-positive elders and adults living with a disability so that self-empowerment and lifelong learning is encouraged. (Consumer and Elder Rights Division)
- Support foster grandparent mentoring of children with special or exceptional needs throughout New Mexico. (Aging Network Division – Senior Services Bureau)
- Increase the number of volunteer counselors offering personal face-to-face benefit counseling in their own community. (Consumer and Elder Rights Division)

Strategic Priority 7: *Advocacy for economic security* —*food, housing, transportation, and employment*

Goals

- Support public policies and programs that promote the economic security of elders and adults living with a disability. (All Department Divisions)
- Create employment opportunities for older workers. (Aging Network Division – Employment Programs Bureau)
- Support access to affordable and accessible housing and transportation options for elders and adults living with a disability. (All Department Divisions)
- Connect Area Agencies on Aging, Independent Living Resource Centers, community organizations, and faith-based groups to federal and statewide resources. (Office of the Secretary – Faith Based and Community Initiatives)

Objectives

- Assist older workers to prepare and secure meaningful employment, including transition from subsidized employment programs. (Aging Network Division – Employment Programs Bureau)
- Educate employers about the value of hiring older workers and assist employers wishing to hire older workers. (Aging Network Division – Employment Programs Bureau)
- Coordinate a statewide effort to incorporate faith-based, private/public, secular, and other community organizations in housing, transportation, employment, and food programs. (Office of the Secretary – Faith Based and Community Initiatives)
- Increase screening of and enrollment in Medicare low-income subsidy programs. (Consumer and Elder Rights Division)
- Increase access to counselors trained to resolve complex Medicare, Medicaid, and private insurance billing issues, appeals, and grievances so that insurance fraud, error, and abuse is reduced. (Consumer and Elder Rights Division)
- Increase access to certified counselors who assist people in their home to organize and pay bills. (Consumer and Elder Rights Division)

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Facts

35% of people age 65 and older live in poverty or in the low-income category.

New Mexico leads the nation in food needs and hunger.

11.4% of all seniors do not know where they will get their next meal.

25% of those 65-69 are employed in the labor market.

41% of households with individuals 65 and older had one or more housing problems: cost burden, physically inadequate housing, and/or crowded housing.

Problems with physical functioning of those 65 and older limits driving—as high as 18%.

Public transportation accessibility does not encourage participation by persons with disabilities.

Impacts

- Increased economic security
- Improved quality of life
- Healthier, happier, and more satisfactory living
- Increased mobility and independence
- Hunger alleviated
- Housing accessibility increased

Strategic Priority 7: *Advocacy for economic security* —*food, housing, transportation, and employment*

Objectives continued

- Increase access to prescription drug assistance programs so that seniors and adults living with a disability obtain the medications they need at costs they can afford. (Consumer and Elder Rights Division)

- Measure the income that older adults require to maintain their independence in the community and meet their daily costs of living, including affordable and appropriate housing and health care.

(Office of the Secretary)

- Collaborate with state agencies, local government, and community-based organizations to maximize access to affordable and accessible housing options. (Office of the Secretary)

- Participate in a statewide transportation collaborative to coordinate the planning, design, and delivery of affordable, accessible, and available transportation services. (Office of the Secretary)

Improve nutritional health, alleviate hunger and prevent malnutrition by providing nutritionally adequate meals through the Aging Network. (Aging Network Division – Senior Services Bureau)

Leopoldo Gallegos, Los Chaves

Mr. Gallegos has four sons and three daughters, all who live in the Albuquerque area except for one daughter who lives in Belen. He currently lives alone in a house trailer in Los Chaves, a village between Los Lunas and Belen. He gets around the trailer with the help of a walker.



“Sam Gurule, the gentleman who deliveries the meals, whom I call Mr. Hoover because he asks lots of questions, got them to build the ramp for me,” Mr. Gallegos said in a meeting with Department staff. “I can now walk and sit outside thanks to a ramp built by the senior center staff.

“Sam Gurule is an angel sent to me from heaven,” he says. “I would starve if it wasn’t for the daily meals he brings me. On Friday he leaves two extra meals for Saturday and Sunday. They do not work on Saturday and Sunday. They deserve to rest.”

Mr. Gallegos is a veteran of World War II. Although he did not see combat, he served in Germany mostly guarding Germans prisoners of war. After he was honorably discharged, he worked in shipyards in California, later moving back to New Mexico.

“I do not worry because I know I can depend on at least one meal per day,” he says. “Mr. Hoover (Sam Gurule) never fails to bring me my daily meal. He is my friend. He visits with me at least for a little while before he continues on his route. He is a wonderful person.”

Strategic Priority 8: *Support of geriatric behavioral health needs*

Goals

- Design a service delivery system that addresses barriers to behavioral health services for the older/disabled populations. (Office of the Secretary – Geriatric Behavioral Health)
- Assure that medical, behavioral health, and long-term care service providers receive training in best practices for the older/disabled populations. (Office of the Secretary – Geriatric Behavioral Health)

Objectives

- Increase the use of comprehensive community-support services for adults so they have access to treatment and services in their home or community. (Office of the Secretary – Geriatric Behavioral Health)
- Enhance coordination and collaboration with community mental health centers, nursing homes, and shelter homes to increase the number of adult clients receiving behavioral health services in their communities. (Office of the Secretary – Geriatric Behavioral Health)
- Develop and arrange training for medical professionals, behavioral health clinicians, and senior center staff on best practices in the referral, assessment, and treatment of adults. (Office of the Secretary – Geriatric Behavioral Health)
- Lead the Behavioral Health Collaborative’s multi-disciplinary team designed to provide clinical case consultation for adult clients referred by state agencies. (Office of the Secretary – Geriatric Behavioral Health)
- Identify best and promising geriatric behavioral health practices. (Office of the Secretary – Geriatric Behavioral Health)

Facts

In 2004, 14% of those ages 65 and older suffer from depression— about 35,000 New Mexicans.

The proportion of people with clinically relevant depressive symptoms was higher for people age 85 and older—19%.

2% of those 65 and older have a diagnosable mental disorder, such as schizophrenia, bipolar disorder, and severe suicidal ideation.

People 65 years of age or older have the highest rates of suicide in the U.S.

Workforce shortage of health-care professionals trained to address geriatrics and mental health.

Impacts

- Lives improved
- Improved quality of life
- Healthier, happier, and more satisfactory living
- Additional trained providers in geriatric behavioral health
- More treatment in the home and community than in residential setting

Department Support Services

Several programs and divisions exist within the New Mexico Aging and Long-Term Services Department to support our mission with qualitative and quantitative services. These include Information Technology, Office of the General Counsel, Policy and Planning, Public Information, Constituent Services, and the Administrative Services Division.

Goals

- Implement cost-effective and secure information technology systems in support of organizational priorities.
- Provide quality legal advice, counsel, and representation in the areas of law that the Department is mandated to administer and enforce.
- Develop and implement a comprehensive and responsive Department policy and planning program.
- Provide and disseminate concise and understandable public information about issues of importance to seniors and disabled New Mexicans, their families and caregivers, and the public.
- Provide timely and appropriate follow-up to all constituent issues.

Objectives

- Improve client access to long-term care services by integrated IT system(s) development and distribution of publicity materials.
- Create and/or upgrade systems for the acquisition, analysis, and application of information and data collection.
- Maintain management and support staff necessary to conduct agency operations.
- Maintain a human resource system that supports the agency in personnel administration, personnel policy development, and employee benefits.
- Manage the process for prioritizing capital outlay needs.
- Initiate tracking of appropriated contract funding.
- Utilize a legislative funding priority setting process.

Objectives continued

- Ensure compliance by the Department with all applicable statutes and regulations.
- Provide legal representation to the Department in administrative and court cases.
- Provide legal review of contracts, proposed regulations, statutory amendments, and other documents as requested.
- Assure compliance with relevant federal and state statutes.
- Forecast, track, and analyze changing demographics and issues facing New Mexico's older adults and adults with disabilities, their families, advocates, and community of providers.
- Monitor, analyze, and report on relevant federal and state legislation, best practices, issues, information, and programs affecting the Department's ultimate customers.
- Develop and foster stakeholder networks and relationships.
- Develop and implement a constituent complaint tracking system.
- Develop, implement, and sustain a comprehensive quality/performance management strategy and capability, consistent with the state's transformation of its long-term support system.
- Promote public information about Department services through the Department web site, public service announcements, and news releases.
- Maintain an effective accounting, budget, and financial management system to meet federal and state requirements.
- Conduct periodic reviews of Department procedures and contractor operations.

Performance Measures

The Accountability in Government Act [6-3A-1 NMSA 1978] provides for cost-effective and responsive government services by using the state budget process and defined outputs, outcomes, and performance measures to evaluate the performance of state government programs annually.

Performance measures, which relate to ALTSD's strategic

priorities, are listed in the table below. These measures are used to evaluate performance and assess progress in achieving goals and objectives, integrated into the planning and budgeting process, maintained on an ongoing basis, and periodically revised. ALTSD's performance measures can be accessed by contacting the Department at 1-866-451-2901.

ALTSD Performance Measures FY10	Division	Reporting cycle or frequency	Type of measure
Percent of individuals participating in the federal older worker program obtaining unsubsidized permanent employment	AND	Annually	Outcome
Community service hours provided by the state older worker program as a percent of work hours budgeted	AND	Annually	Outcome
Annual number of clients placed in meaningful employment	AND	Annually	Output
Percent of temporary assistance for needy families clients placed in meaningful employment	AND	Annually	Outcome
Number of adult daycare service hours provided	AND	Annually	Output
Number of hours of respite care provided	AND	Annually	Output
Number of one-way trips provided to community services	AND	Annually	Output
Number of homemaker hours provided in the state fiscal year	AND	Annually	Output
AND=Aging Network Division APS=Adult Protective Services Division ASD=Administrative Services Division CERD=Consumer and Elder Rights Division EDSD=Elderly and Disability Services Division OOS=Office of the Secretary			

Performance Measures

ALTSD Performance Measures FY10	Division	Reporting cycle or frequency	Type of measure
Number of children served through the Foster Grandparent Program	AND	Annually	Output
Percent of individuals age 60 and older receiving aging network community services	AND	Quarterly	Outcome
Number of congregate meals provided through the aging network	AND	Annually	Output
Number of home-delivered meals provided through the aging network	AND	Annually	Output
Percent of adults with repeat maltreatment	APS	Annually	Outcome
Number of adults receiving Adult Protective Services intervention	APS	Quarterly	Output
Percent of contractors assessed with no significant findings	ASD	Annually	Output
Number of families served through the grandparents-raising-grandchildren initiative	CERD	Annually	Output
Number of individuals calling the Aging and Disability Resource Center in need of two or more daily living services who receive information, referral, and follow-up services	CERD	Quarterly	Outcome
Number of persons accessing the Aging and Long-Term Services Department's Aging and Disability Resource Center	CERD	Annually	Output
Number of individuals receiving free or low-cost prescription drugs through the Aging and Disability Resource Center Prescription Drug Assistance program	CERD	Annually	Output
AND=Aging Network Division CERD=Consumer and Elder Rights Division	APS=Adult Protective Services Division EDSD=Elderly and Disability Services Division	ASD=Administrative Services Division OOS=Office of the Secretary	

Performance Measures

ALTSD Performance Measures FY10	Division	Reporting cycle or frequency	Type of measure
Percent of total PCO cases that are consumer directed	EDSD	Quarterly	Outcome
Percent of D&E Waiver clients who receive services within 90 days of eligibility determination	EDSD	Quarterly	Outcome
Average number of months individuals spend on the D&E Waiver registry prior to receiving an allocation for services	EDSD	Quarterly	Outcome
Number of clients enrolled in CoLTS	EDSD	Annually	Output
Average annual cost per client in the CoLTS program	EDSD	Annually	Outcome
Number of brain injury clients served through the Mi Via Waiver	EDSD	Quarterly	Output
Number of individuals on the self-directed Mi Via Waiver	EDSD	Annually	Output
Number of persons reintegrated from nursing homes into home- and community-based Medicaid services	EDSD	Annually	Output
Number of ombudsman complaints resolved	OOS	Quarterly	Output
Number of granny cams loaned	OOS	Annually	Output
AND=Aging Network Division CERD=Consumer and Elder Rights Division	APS=Adult Protective Services Division EDSD=Elderly and Disability Services Division	ASD=Administrative Services Division OOS=Office of the Secretary	

Services by Age

For more information about the services listed above and ALL eligibility requirements, please call the Aging and Disability Resource Center at 1-800-432-2080

Program Description		
Adult Protective Services	Investigates reports of abuse, neglect, and exploitation of adults who are unable to protect or care for themselves; provides short-term services that address the health and safety needs of incapacitated adults.	18 and older
Gap	Provides interim services and goods to individuals to increase or maintain their independence in a home- and/or community-based setting. Goods and services include emergency housing, personal care, respite, home modifications, and assistive devices.	18 and older
Benefits Counseling/ State Health Insurance Program	Certified volunteers and staff provide group and one-on-one information, education, assistance, and enrollment assistance for Medicaid, public benefits, Medicare Part D, and many other benefits or services for which seniors and adults living with a disability may be eligible.	18 and older
Coordination of Long-Term Services (CoLTS)	A coordinated managed long-term care system designed to serve Medicaid recipients who reside in nursing facilities, receive PCO services, CoLTS C Waiver services, brain injury services, or individuals with both Medicare and Medicaid.	18 and older
Personal Care Option (PCO)	Provides a range of in-home services that enable individuals to live in their own homes and achieve the highest level of independence possible.	21 and older
Job Training	Provides employment counseling, job training, interviewing, and computer development skills.	21 and older

Services by Age

For more information about the services listed above and ALL eligibility requirements, please call the Aging and Disability Resource Center at 1-800-432-2080

Service	Program Description	Ages served
Senior Olympics	New Mexico Senior Olympics features more than 107 events in 28 different sports encouraging a healthy lifestyle for adults.	50 and older
Foster Grandparents Volunteer Program	Trained and certified volunteers who give one-to-one, daily attention to children with special needs.	55 and older
Bill Payer Program	Certified volunteers and staff provide assistance with monthly bill preparation, payment, and record keeping to low-income individuals.	55 and older
Senior Employment	Provides employment training to older individuals with low incomes entering or reentering the workforce.	55 and older
Program of All-Inclusive Care for the Elderly (PACE)	An integrated service-delivery system providing primary care, home care, rehabilitation services, personal care, meals, transportation, pharmacy, and hospitalization.	55 and older
Legal Services	Provides advocacy and legal representation of older adults so they may secure and maintain government benefits, housing, health care, basic human rights, consumer protection, and domestic relations protection.	55 and older
Retired Senior Volunteer Program	Trained and certified volunteers 55 and older who use their experience by supporting government and non-profit agencies.	55 and older
Senior Companion Volunteer Program	Trained and certified volunteers 55 and older who provide assistance and friendship to older seniors who have difficulty with daily life skills.	55 and older

Services by Age

For more information about the services listed above and ALL eligibility requirements, please call the Aging and Disability Resource Center at 1-800-432-2080

Service	Program Description	Ages served
Home Modifications/Retrofitting	Modifies living space to promote safety and accommodate special needs such as installing grab bars, wheelchair ramps, and safety rails, and other supportive equipment.	60 and older (55 for Native Americans), or spouse, or any age person with a disability who lives with an eligible elder
Congregate and Home-delivered Meals	Provides breakfast, lunch and/or dinner in a variety of settings including senior centers, community centers or in the home.	
Transportation	Provides transportation to doctor's visits, shopping, educational opportunities, etc.	
Homemaker Services	Provides non-medical care such as light housekeeping, personal care, and errands.	
Medicare/Medicaid Patrol Project	Certified retired professional volunteers and staff identify waste, fraud, abuse, and misuse in the Medicare and Medicaid programs and provide education to beneficiaries and their caregivers regarding how to become better health care consumers.	65 and older or adult disabled person on Medicare and Medicaid (18 and older)
Golden Opportunities for Lifelong Development (GOLD)	Provides mentoring services by individuals 50 and older to Temporary Assistance to Needy Families (TANF) recipients entering or reentering the workforce, as well as others who may be experiencing barriers to employment.	Any age
Mi Via, Self-Directed Waiver	Allows Medicaid Waiver (CoLTS C and BI) participants to choose goods and services they need, hire their own employees, and decide where and how to spend their Mi Via budget.	D&E=Any age BI=Up to 65

Services by Age

For more information about the services listed above and ALL eligibility requirements, please call the Aging and Disability Resource Center at 1-800-432-2080

Service	Program Description	Ages served
Traumatic Brain Injury Program	Provides case management, life skills coaching, and crisis interim services to individuals with a traumatic brain injury.	Any age
Alzheimer's Disease and Dementia Program	Provides caregiver and provider training, information and assistance, supports groups, advocacy and outreach, and education.	Any age
Aging and Disability Resource Center	Provides individuals, families, caregivers, providers, and advocates access to information, assistance, referrals, resource coordination, and advocacy in those areas of daily living that will maximize personal choice and independence for seniors and adults with disabilities.	Any age
HIV/AIDS Consumer Advocacy and Volunteer Network	Provides peer support and information, assistance, and referral to HIV/AIDS individuals and their families.	Any age
Prescription Drug Assistance	Provides access to free or low co-pay brand name prescriptions and \$300 vouchers to bridge the gap in the transition between prescription drug coverage.	Any age
Respite Care	Provides caregivers with relief from caregiving responsibilities.	Any age family caregiver of older adults, an elder caring for a child, or a younger adult with a disability
Caregiver Counseling, Support Groups, and Training	Provides support groups to help caregivers make decisions, resolve problems, and develop skills to care effectively for loved ones.	
Long-Term Care Ombudsman Program	Certified volunteers and staff advocate for recognition, respect, and enforcement of civil and human rights of people living in long-term care facilities.	Any age person living in a long-term care facility

A sincere thank you

The Aging and Long-Term Services Department thanks its dedicated employees, community partners, our Policy Advisory Committee, volunteers, and all who contribute to our mission to promote healthy aging and lifelong independence.

Employees

The Aging and Long-Term Services Department has 292 dedicated and highly skilled employees who are passionate in their commitment to serve New Mexico's elders and adults with disabilities.

Partners

- U.S. Administration on Aging (AoA)
- Centers for Medicare and Medicaid Services (CMS)
- Independent Living Resource Centers
- Area Agencies on Aging
- Human Services Department
- Department of Health
- Children, Youth and Families Department
- Department of Veterans Services
- Indian Affairs Department
- Department of Workforce Solutions
- Behavioral Health Collaborative
- Developmental Disabilities Planning Council
- Governor's Commission on Disability
- Department of Transportation
- Commission on the Status of Women
- The New Mexico Legislature
- The Office of the Governor

Policy Advisory Committee (PAC)

The Policy Advisory Committee, formed in 1989, exists to provide continuing advice to the Secretary and the Department regarding services, activities, and programs. The PAC consists of members appointed by the Governor for staggered, four-year terms and represent a cross-section of geographic locations, ethnic backgrounds, ages, and disabilities.

Policy Advisory Committee Members

Mr. John Aquino
Mr. Russell Boor
Ms. Joie Glenn
Mr. Ron Montoya
Ms. Gil Yildiz

Ms. Dorothy Bitsilly
Ms. Salome DeAquero
Ms. Cookie Johnson
Mr. Robert Peets

Volunteers

A statewide network of thousands of volunteers supports the Department's mission by providing outreach, creating quality programs, and delivering services. The scope and complexity of attracting, selecting, training, deploying, and managing volunteers is a continuing challenge that depends on and utilizes grass roots volunteer leadership, and creative, engaged employees.



New Mexico Aging and Long-Term Services Department
2550 Cerrillos Road • Santa Fe, New Mexico 87505
www.nmaging.state.nm.us • 866-451-2901
Adult Protective Services Intake: 866-65403291
Aging and Disability Resource Center: 800-432-2080

CITATIONS

AARP Magazine • AARP Public Policy Institute • American Medical Association • Centers for Disease Control • Federal Interagency Forum on Aging Related Statistics
Harvard School of Public Health • National Center on Caregiving • National Center on Elder Abuse • National Institute of Health • NM Health Policy Commission
US Department of Agriculture • US Department of Commerce • US Department of Defense • US Department of Health and Human Services • US Department of Justice
US Department of Labor • US Department of Veteran Affairs • Thanks to *Resources for Change* for providing technical assistance.