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# FY21 QUARTER #3 PERFORMANCE REPORT

**Aging and Long-Term Services Department**



# Aging and Long-Term Services Department

## **Agency Mission:**

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

## **Agency Goals/Objectives:**

The Aging and Long-Term Services Department's three primary goals and objectives for FY21 are:

**Goal 1:** Protect the population we serve.

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

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

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

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

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

**Goal 3:** Strengthen Program Infrastructure.

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

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

## **Key Strategic Plan Initiatives:**

Protecting the population, we serve.

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

Build and maintain a sustainable service delivery system.

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

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

**Strengthen Program Infrastructure.**

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

## AGENCY PROGRAMS

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

## Consumer and Elder Rights Division and the Long -Term Care Ombudsman Program

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

CERD consists of the following areas:

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

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

### Program Budget (in thousands):

FY20	General Fund	Other State Funds	Federal Funds	Other Transfers	TOTAL	FTE
200	1,621.0	-	995.0	1,200.0	3,816.0	50
300	24.8	-	591.1	-	615.9	
400	195.1	-	522.7	-	717.8	
TOTAL	1,841.5	-	2,108.8	1,200.0	5,150.3	

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

### Program Performance Measures Annual:

1. Percent of calls to the Aging and Disability Resource Center that are answered by a live operator.
2. Percent of residents who remained in the community six months following a nursing home care transition.
3. Percent of individuals provided short-term assistance that accessed services within 30 days of a referral from options counseling.
4. Percentage of facilities visited monthly.
5. Percent of ombudsman complaints resolved within sixty days.

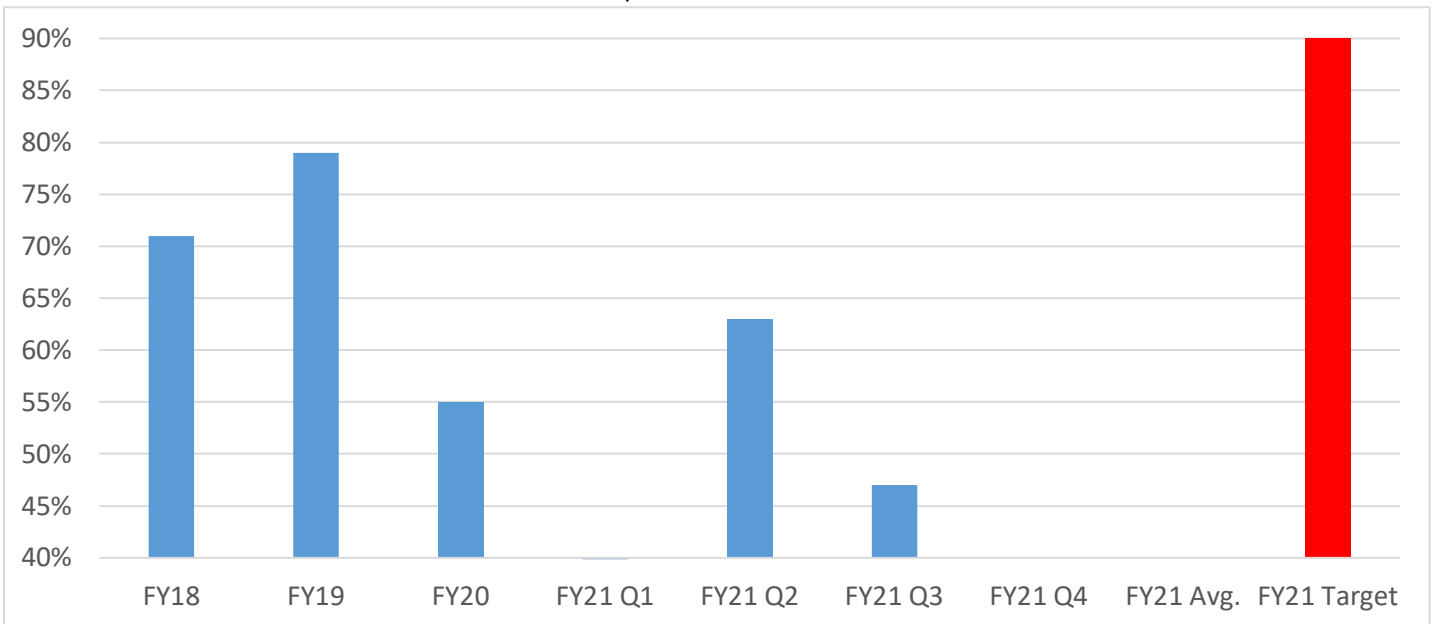
# PERFORMANCE MEASURE #1

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

## Results

FY18	FY19	FY20	FY21 Q1	FY21 Q2	FY21 Q3	FY21 Q4	FY21 Avg.	FY21 Target
71%	79%	55%	0%	63%	47%			90%

Graph of Data Above



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

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

**STORY BEHIND THE DATA:** During the third quarter, the ADRC received 12,495 (average of 202 calls per day), 47% of which were answered by a live operator. The 16% decline in the calls answered by a live operator in the 3<sup>rd</sup> quarter, was a direct result of the need for the Aging and Disability Resource Center staff to assist the New Mexico Department of Health in both registering, and scheduling appointments for the COVID-19 vaccinations. Other barriers during the third quarter included call system issues and 1 vacancy.

**IMPROVEMENT ACTION PLAN:** To address some of the barriers faced in the 3<sup>rd</sup> quarter, in the 4<sup>th</sup> quarter, we will be advertising our vacant Options Counselor position and upgrading our call system to ICE. The new call system would alleviate the issue of abandoned calls, it would allow immediate callbacks, rather than voicemails, and the option of CHAT and robotchat, providing additional assistance to live calls.

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

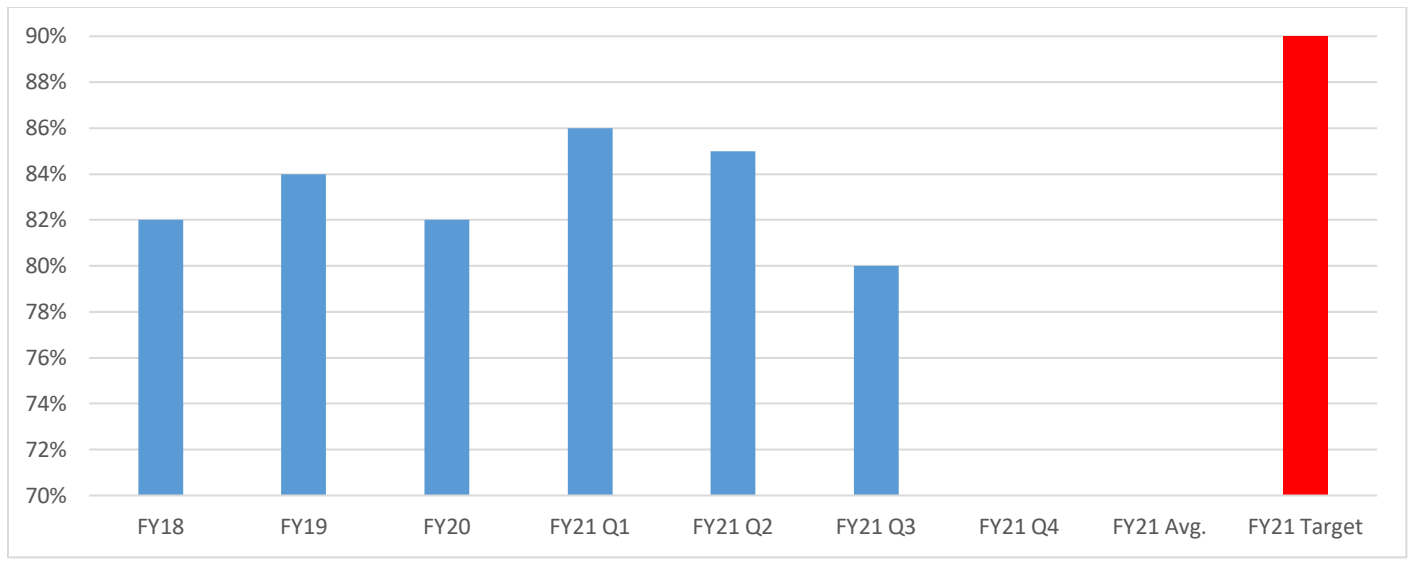
- Medicaid – 8,019 consumers
- Medicare – 3,534 consumers (benefit explanation, enrollment, and counseling).
- COVID – 1,281 consumers
- Prescription Drug Assistance – 329 consumers
- Social Security - 121 consumers

## PERFORMANCE MEASURE #2

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

FY18	FY19	FY20	FY21 Q1	FY21 Q2	FY21 Q3	FY21 Q4	FY21 Avg.	FY21 Target
82%	84%	82%	86%	85%	82%			90%

Graph of Data Above



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

**DATA SOURCE/METHODOLOGY:** Data will be gathered through Wellsky, SAMS, and individual CTS case managers. This data is developed from the aggregate amount of people served and the wellbeing check provided after their reentry or transfer.

**STORY BEHIND THE DATA:** During the third quarter of FY21, 119 of the 145 residents, or 82% of residents requesting short-term transition assistance from a nursing facility remained in the community during the six-month follow-up. The Care Transition Bureau (CTB) residents requesting short-term transition assistance from a nursing facility who remained in the community during the six-month follow-up has decreased from our last reporting period from 85% to 82%.

We attribute the decrease this quarter to the COVID-19 public health crisis, which significantly continues to change the way CTB operates. CTB has seen an increase of those individuals wanting to remain in facilities, as the COVID-19 vaccine becomes more available. Also, as visitations become more available, family and residents are becoming more confident in their nursing level of care and are more confident with a slower pace for discharge as CTB continues to play a huge role for the advocacy of individuals to establish proper housing and access of intitled benefits that aid the success of reintegration for these individuals.

In addition, CTB Supervisor assisted NM Ombudsman with closure and relocation for nm nursing home residents from Raton Skilled Nursing Facility and nm assisted living facility Jim Wood. Relocating residents to proper setting of care and to community-based living as requested.

During the third quarter, some of the factors that contributed to the 80% were:

- Residents passing away,
- Residents delay in transition,
- Residents who returned to a nursing facility.

**IMPROVEMENT ACTION PLAN:** In the fourth quarter, CTB supervisors will continue to provide oversight of outreach conducted by regional CTS. This outreach will include Administrators, Social Service Directors and Business Managers of Nursing Facilities across the state. Our goal is to create an expedited referral process with these facilities to enhance response time and our advocacy services. By providing direct registry and referral access services then can be expedited both by CTS and ALTSD.

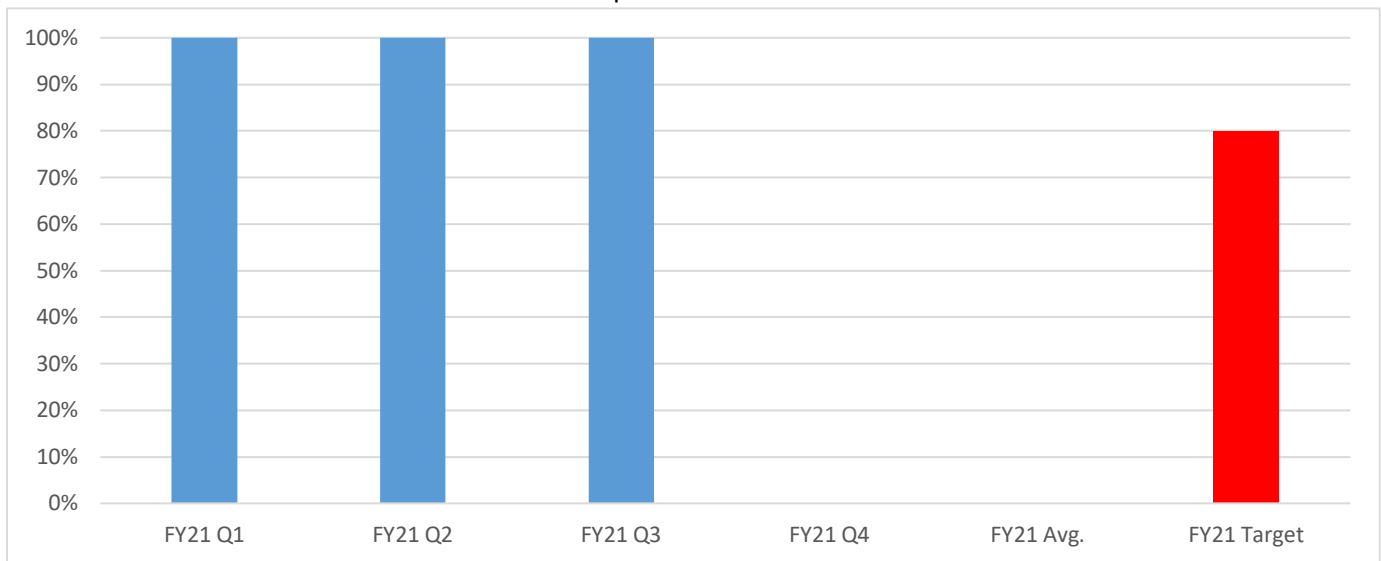
## PERFORMANCE MEASURE #3

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

### Results

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

Graph of Data Above



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

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

**STORY BEHIND THE DATA:** During the 3<sup>rd</sup> quarter, the STA program provided short term assistance to 100% of the seven individuals that accessed service within 30 days of a referral from options counseling.

**IMPROVEMENT ACTION PLAN:** In the 4<sup>th</sup> quarter, the STA program will receive referrals for all applicants who are requesting assistance with the application for Centennial Care Medicaid Home and Community-Based Services program. We will also receive referrals for everyone who needs assistance for long-term care services and supports.

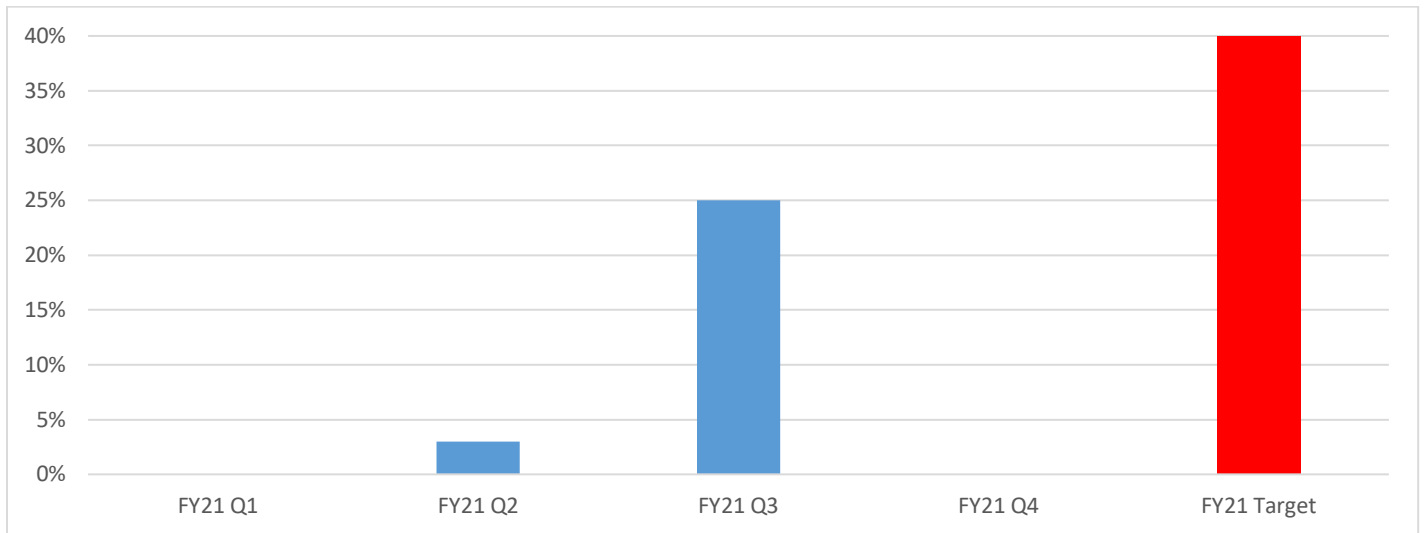
## PERFORMANCE MEASURE #4

### *Percent of Facilities Visited Monthly*

#### Results

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

Graph of Data Above



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

**DATA SOURCE/METHODOLOGY:** The OmbudsManager database is a comprehensive nursing home complaint and case management system that allows users to manage facility data, complaints, complainants, activities, residents, investigations, and resolutions. OmbudsManager fully automates National Ombudsman Reporting Systems (NORS) reporting. All complaint automated reports and statistics are aggregated automatically into the format required by the Federal Administration on Aging. OmbudsManager is the industry standard for nursing home complaint management and is used by 34 State Long-Term Care Ombudsman offices throughout the country.

**STORY BEHIND THE DATA:** The State Ombudsman program has provided reentry for its regional coordinators resulting in in person visitations and complaint reviews being done in person. We are just beginning this reentry and will begin allowing volunteers to reenter to assist with complaints and advocacy starting May 24, 2021.

**IMPROVEMENT ACTION PLAN:** The State Ombudsman program will be utilizing the newly created first responder program that has now identified over 415 prospective candidates that will be inside facilities during emergency-based situations. This initiative will assist with identifying key information on negligence, abuse, or harm. The program is confident the return of the statewide volunteer labor force alongside the first responder program will help meet and exceed the goals.

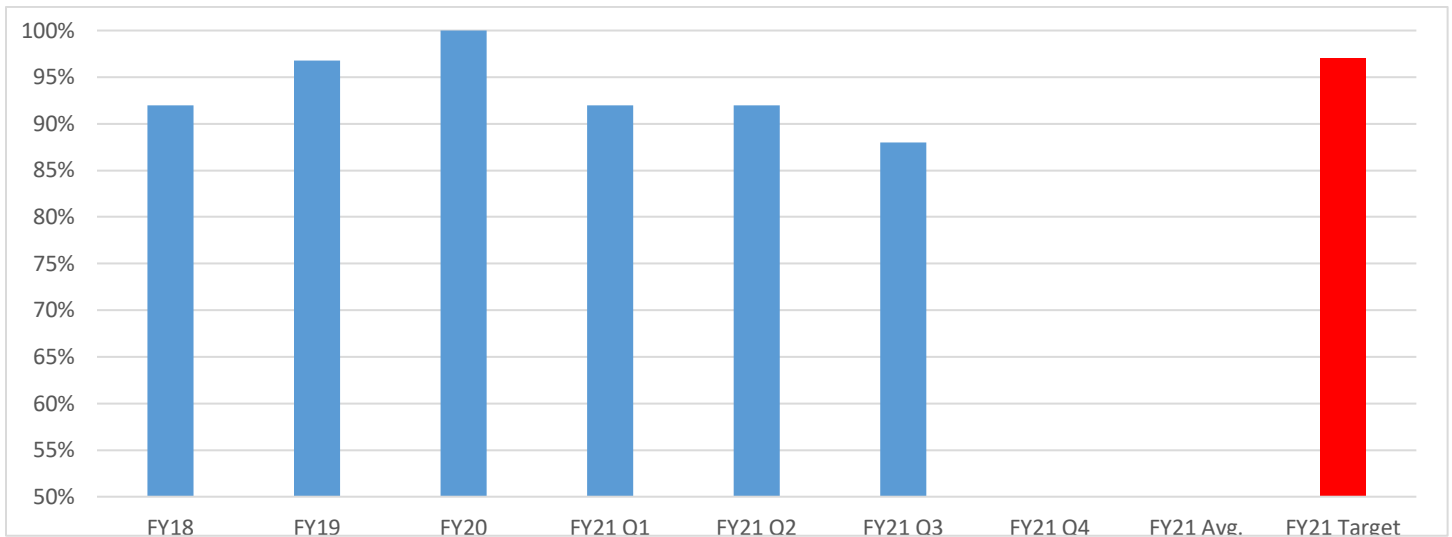
## PERFORMANCE MEASURE #5

*Percent of Ombudsman complaints resolved within sixty days.*

### Results

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

Graph of Data Above



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

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

**STORY BEHIND THE DATA:** The 3<sup>rd</sup> Quarter complaint data reflects the program returning to in person consultations. Many complaints that were not shared for various reasons are now being issued in person which is causing regional coordinators to take on a lot more and rely on changing their rotations with buildings where more issues are present. We are also seeing waiting times for residents who have a preference to do in person consultations instead of digital. The wait time exists because regional coordinators must do a covid safe check before their entry.

**IMPROVEMENT ACTION PLAN:** Our proposed improvement is to have the regional coordinators track the building and nature of the complaint (wound care) to establish a triage approach that will improve in person response time.

## Adult Protective Services

**Program Description, Purpose and Objectives:**

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

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

**Program Budget (in thousands):**

FY20	General Fund	Other State Funds	Federal Funds	Other Transfers	TOTAL	FTE
200	8,907.6	-	-	-	8,907.6	130
300	1,285.3	-	-	2,164.4	3,449.7	
400	1,460.4	-	-	11.9	1,472.3	
<b>TOTAL</b>	<b>11,653.3</b>	<b>-</b>	<b>-</b>	<b>2,176.3</b>	<b>13,829.6</b>	

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

**Program Performance Measures:**

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

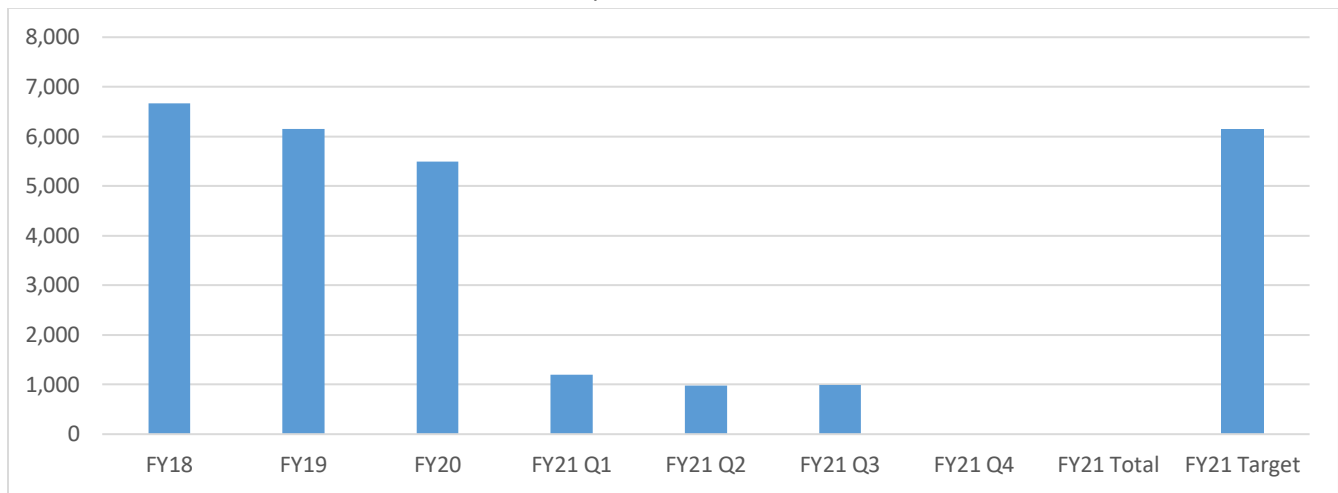
# PERFORMANCE MEASURE #1

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

## Results

FY18	FY19	FY20	FY21 Q1	FY21 Q2	FY21 Q3	FY21 Q4	FY21 Total	FY21 Target
6,233	6,671	5,494	1204	980	992			6,150

Graph of Data Above



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

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

**STORY BEHIND THE DATA:** APS Division relies heavily on community-based referrals of abuse, neglect, and exploitation. The COVID-19 pandemic has limited opportunities for referrals, thus adversely impacted the number of investigations conducted for the 3rd quarter.

**IMPROVEMENT ACTION PLAN:** Continue providing education and outreach to educate on the process for making a referral to APS. Create more robust cross-reporting mechanisms to ensure those that meet the APS investigation criteria are receiving an investigation. Additionally, APS developed policies and procedures for safely conducting in person investigations when necessary.

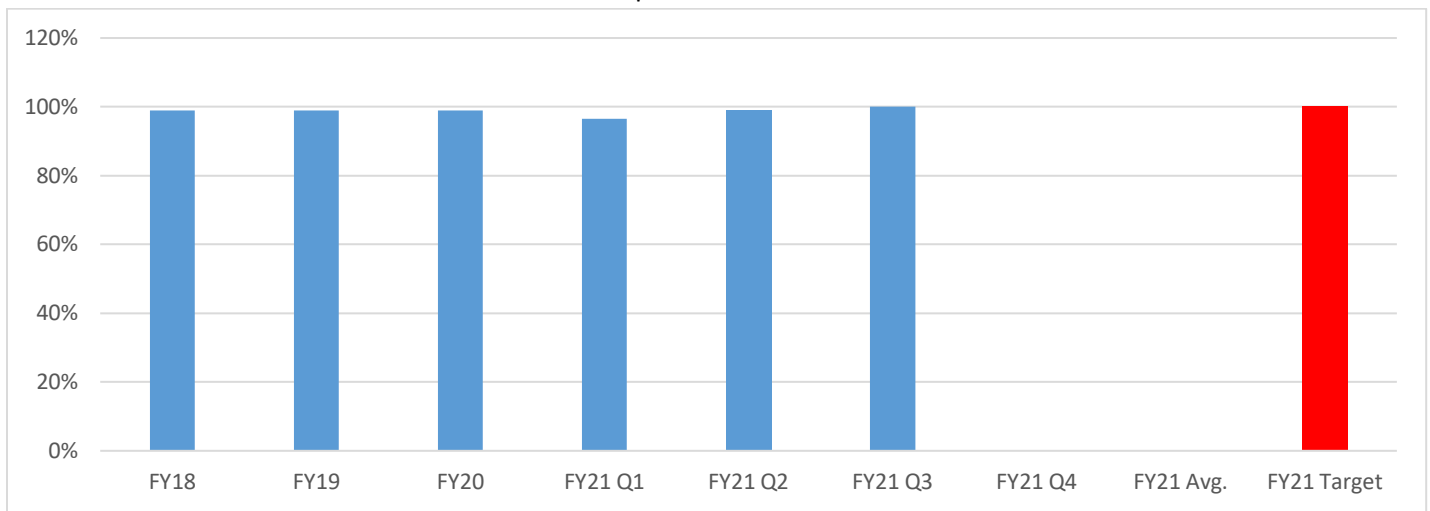
## PERFORMANCE MEASURE #2

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

### Results

FY18	FY19	FY20	FY21 Q1	FY21 Q2	FY21 Q3	FY21 Q4	FY21 Avg.	FY21 Target
99%	99%	99%	96.56%	98.86%	100%			>99%

Graph of Data Above



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

**DATA SOURCE/METHODOLOGY:** Adult Protective Services uses the WellSky Human Services system to maintain a data base of investigation information. To provide data for this performance measure APS uses a report within the WellSky Human Services system to extract the data. The calculation used in this measure in each quarter is based off an average of the emergency investigations and priority one investigations.

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

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

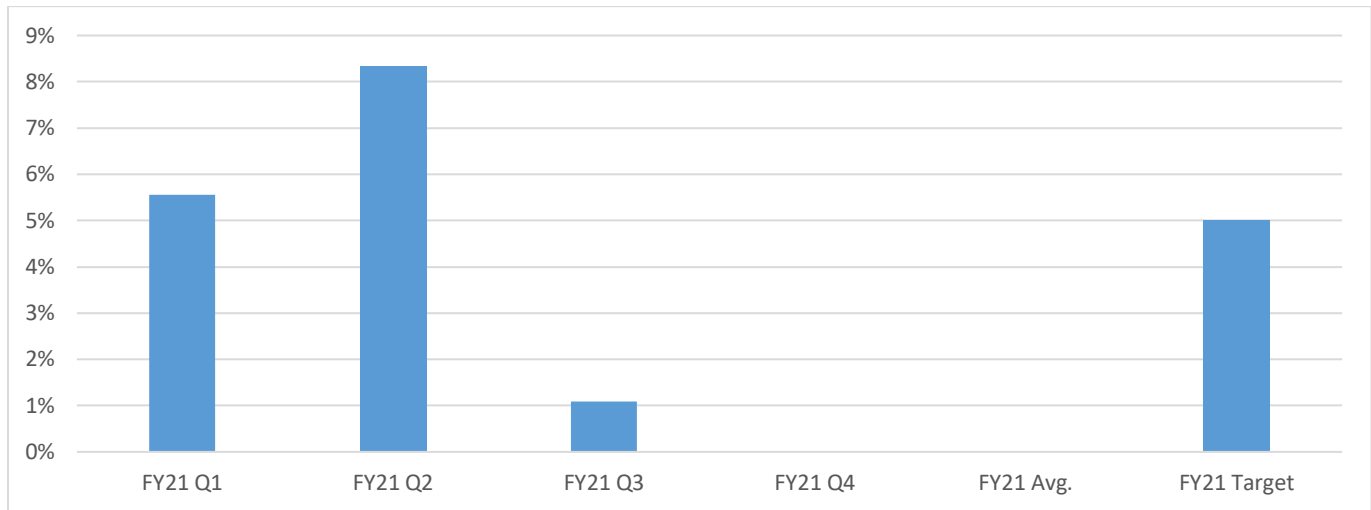
## PERFORMANCE MEASURE #3

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

### Results

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

Graph of Data Above



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

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

**STORY BEHIND THE DATA:** Third quarter recidivism, could be attributed to concern for older adults who are particularly vulnerable to the COVID-19 virus.

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

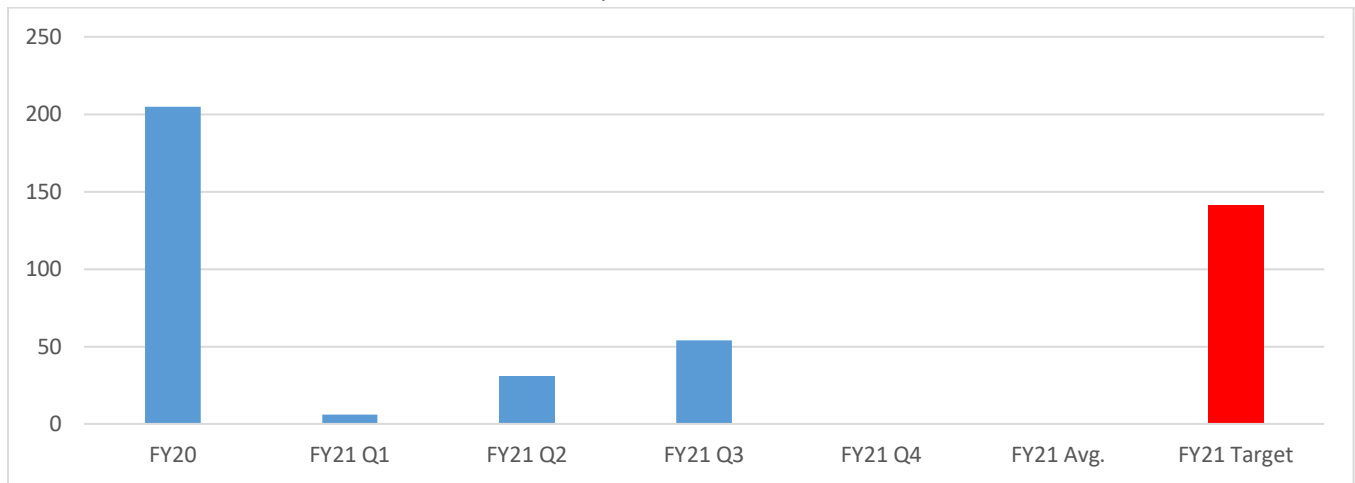
## PERFORMANCE MEASURE #4

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

### Results

FY18	FY19	FY20	FY21 Q1	FY21 Q2	FY21 Q3	FY21 Q4	FY21 Avg.	FY21 Target
N/A	N/A	205	6	31	54			141

Graph of Data Above



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

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

**STORY BEHIND THE DATA:** During the 2<sup>nd</sup> Quarter, APS pivoted and changed the way it had historically conducted outreach and education. APS now requires adaptation of these presentations to virtual means and methods.

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

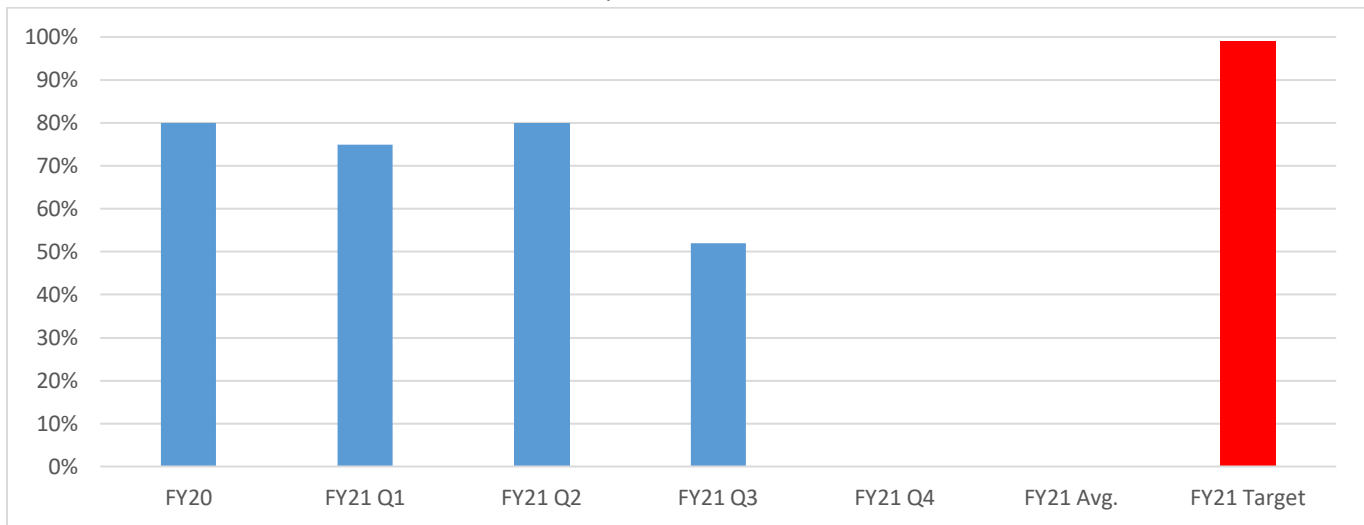
## PERFORMANCE MEASURE #5

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

### Results

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

Graph of Data Above



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

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

**STORY BEHIND THE DATA:** The pandemic has created numerous challenges for APS, and appropriately assessing clients for services was one of these challenges. When a referral is made, the adult services contractors must contact the client and conduct their own assessment. The pandemic caused fear in many people and particularly older adults who we know are the most vulnerable. Many of these clients were hesitant to allow the contractors in their homes to provide a proper assessment of needed services (for example, some clients would only want to talk to the contractor from the door and at least 6 feet apart, which wouldn't allow them to enter the home and assess additional needs such as laundry and housekeeping needs). This was ultimately not a barrier to providing the services, but a delay in the assessment of appropriate need.

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

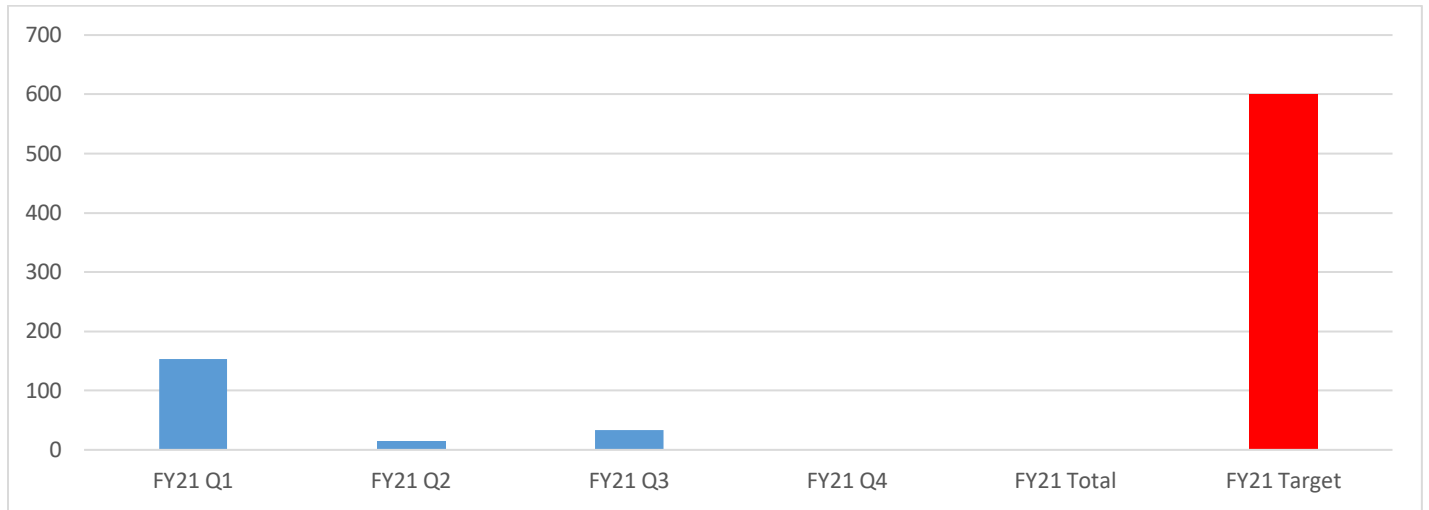
## PERFORMANCE MEASURE #6

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

### Results

FY18	FY19	FY20	FY21 Q1	FY21 Q2	FY21 Q3	FY21 Q4	FY21 Total	FY21 Target
N/A	N/A	N/A	153	15	33			600

Graph of Data Above



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

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

**STORY BEHIND THE DATA:** During the 3rd quarter of FY21, there were 33 referrals and enrollments into home care and adult day services, as a result of an APS investigation into abuse, neglect, or exploitation. Due to limitations and closures, referrals to providers have been limited.

**IMPROVEMENT ACTION PLAN:** APS will continue to identify when referrals are necessary and enroll clients on an as needed basis. Additionally, referrals to providers will also continue as reopening across the state continues.

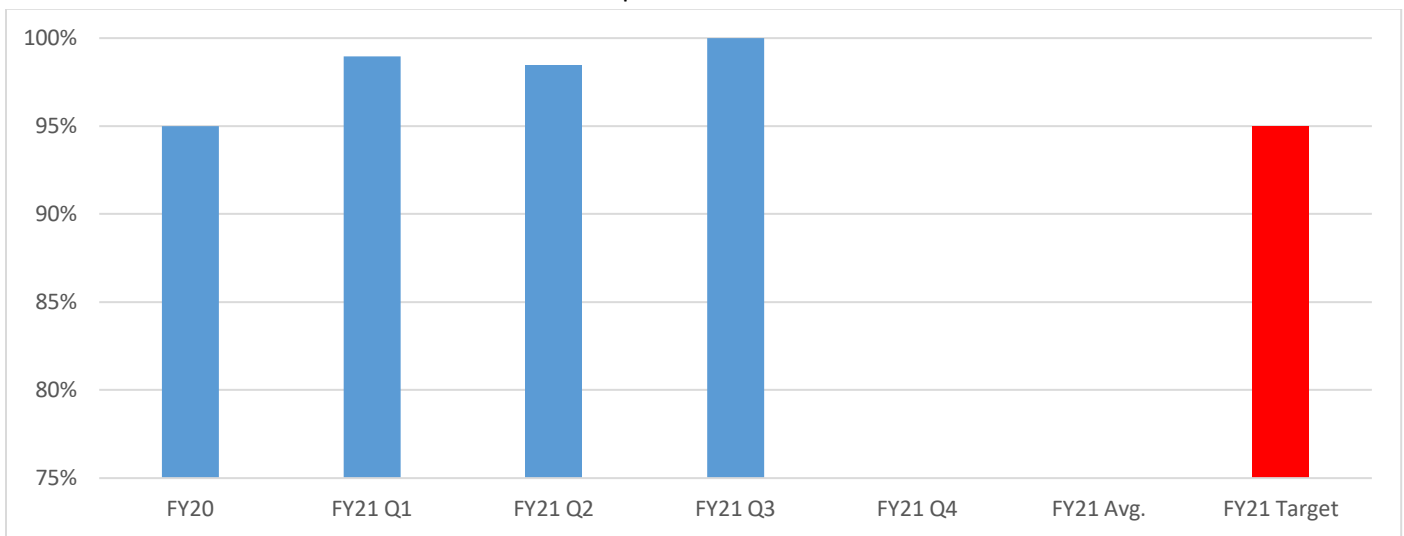
## PERFORMANCE MEASURE #7

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

### Results

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

Graph of Data Above



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

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

**STORY BEHIND THE DATA:** APS was able to meet priority two investigation time frames more quickly due to the additional time allowed for these investigations. It gives caseworkers additional time to interview the alleged victim and coordinate a safe way to conduct the face-to-face visit. Versus a priority one referral, which requires a face to face within 24 hours, and is slightly more difficult to navigate during the pandemic.

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

## Aging Network

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

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

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

**Program Budget (in thousands):**

FY20	General Fund	Other State Funds	Federal Funds	Other Transfers	TOTAL	FTE
200	608.3	34.9	555.3	-	1,198.5	14
300	622.2	10.0		-	632.2	
400	27,787.0	70.9	10,506.6	-	38,364.5	
TOTAL	29,017.5	115.8	11,061.9	-	40,195.2	

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

**Program Performance Measures:**

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

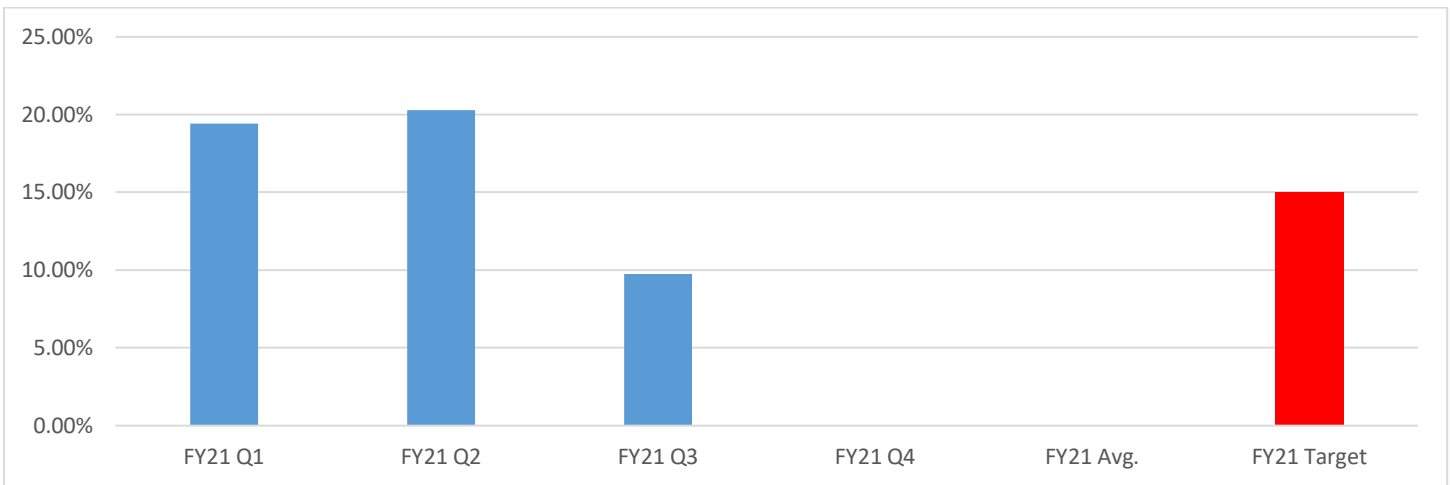
## PERFORMANCE MEASURE #1

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

### Results

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

Graph of Data Above



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

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

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

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

The COVID-19 pandemic resulted in a significant data change after Governor; Michelle Lujan - Grisham declared a state of emergency on March 11, 2020. The state of New Mexico was granted a major disaster declaration by the Federal Government in March 2020. After this date, provisions of services were altered to comply with the public order and isolation guidance. FY 21 Quarter 3 has been affected by the pandemic. During FY21 Q3 weather related closures at sites

and colder temperatures had seniors not attending grab-n-go. Adult Day Care Centers and Senior Centers are closed. Congregate meal delivery has been modified to "grab and go" or home delivered meals. The remaining services are affected by the stay at home and social distancing orders. The percentage decrease of "high nutritional" consumers is explained by fewer consumers receiving home-delivered meals.

**IMPROVEMENT ACTION PLAN:**

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

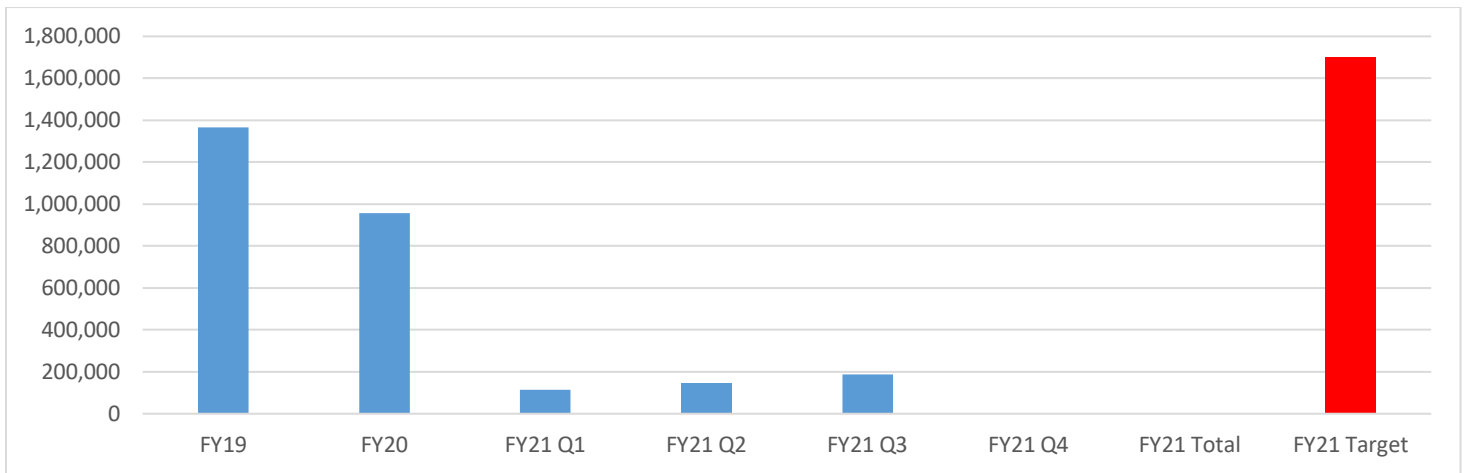
## PERFORMANCE MEASURE #2

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

### Results

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

Graph of Data Above



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

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

**STORY BEHIND THE DATA:** The COVID-19 pandemic resulted in a significant data change after Governor, Michelle Lujan - Grisham declared a state of emergency on March 11, 2020. The state of New Mexico was granted a major disaster declaration by the Federal Government in March 2020. After this date, provisions of services were altered to comply with the public order and isolation guidance. FY 21 Quarter 3 has been affected by the pandemic. Volunteer services are affected by the stay at home and social distancing orders. \*Due to COVID-19, AmeriCorps Senior Program volunteers were not able to perform projected volunteer hours because of the stay-at-home order, volunteers being classified as a vulnerable population, and the restrictions of teleworking. The numbers reported are state funded volunteer hours. AmeriCorps Seniors granted a temporary stipend allowance in March 2020 so that under COVID19 volunteer programs could continue to retain volunteers.

### IMPROVEMENT ACTION PLAN:

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

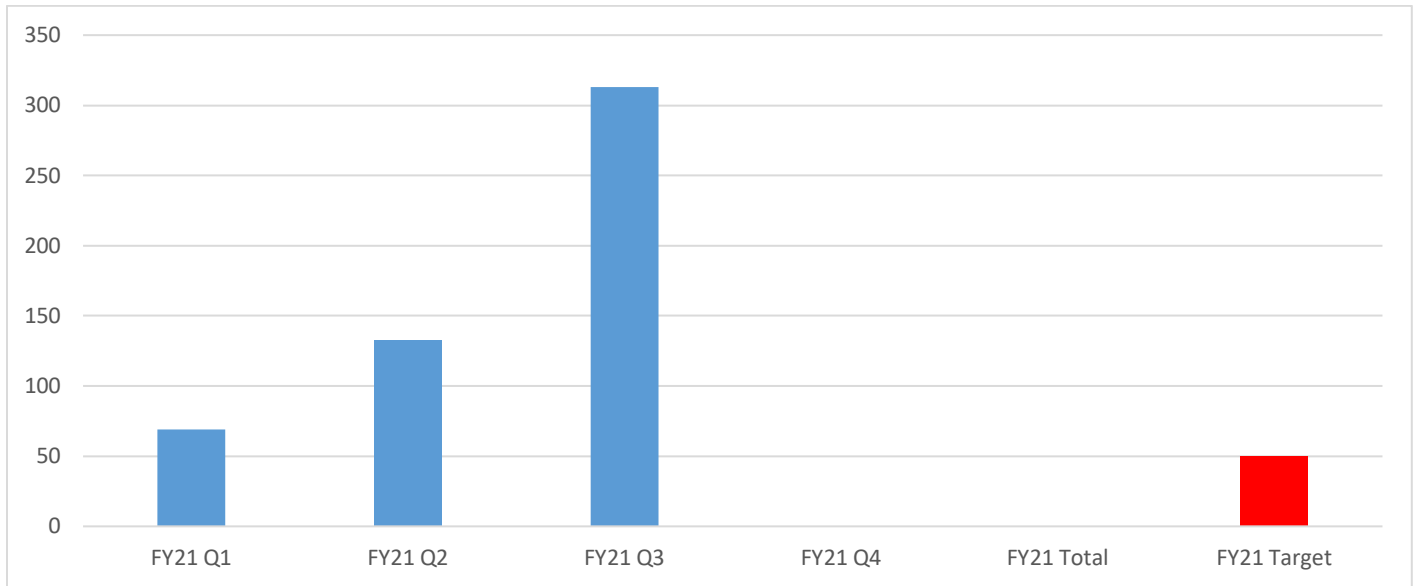
## PERFORMANCE MEASURE #3

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

### Results

FY18	FY19	FY20	FY21 Q1	FY21 Q2	FY21 Q3	FY21 Q4	FY21 Total	FY21 Target
N/A	N/A	N/A	69	158	313			50

Graph of Data Above



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

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

**STORY BEHIND THE DATA:** During the 3<sup>rd</sup> quarter of FY21 **AND** conducted **195** outreach events (including provider volunteer outreach events), **CERD** conducted **23** outreach events and **OMB** conducted **9** outreach events. Also, during the 3<sup>rd</sup> Quarter, there were **3**, COVID-19 vaccine clinics held at the Nursing Home facilities and **3**, COVID-19 vaccine clinics held at the Assisted Living facilities across the state; as well as **80**, COVID-19 vaccine clinics. The total number of events showcasing the availability of services within the Aging Network for the 3<sup>rd</sup> quarter was **313**, which was higher than our goal.

However, because of the COVID-19 pandemic, there was a significant data change after Governor, Michelle Lujan - Grisham declared a state of emergency on March 11, 2020. The state of New Mexico was granted a major disaster declaration by the Federal Government in March 2020. After this date, provisions of services were altered to comply with the public order and isolation guidance. The 3<sup>rd</sup> quarter was affected by the pandemic, in that agency outreach events were modified by using virtual collaboration. The remaining outreach events were affected by the stay at home and social distancing orders.

**IMPROVEMENT ACTION PLAN:**

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

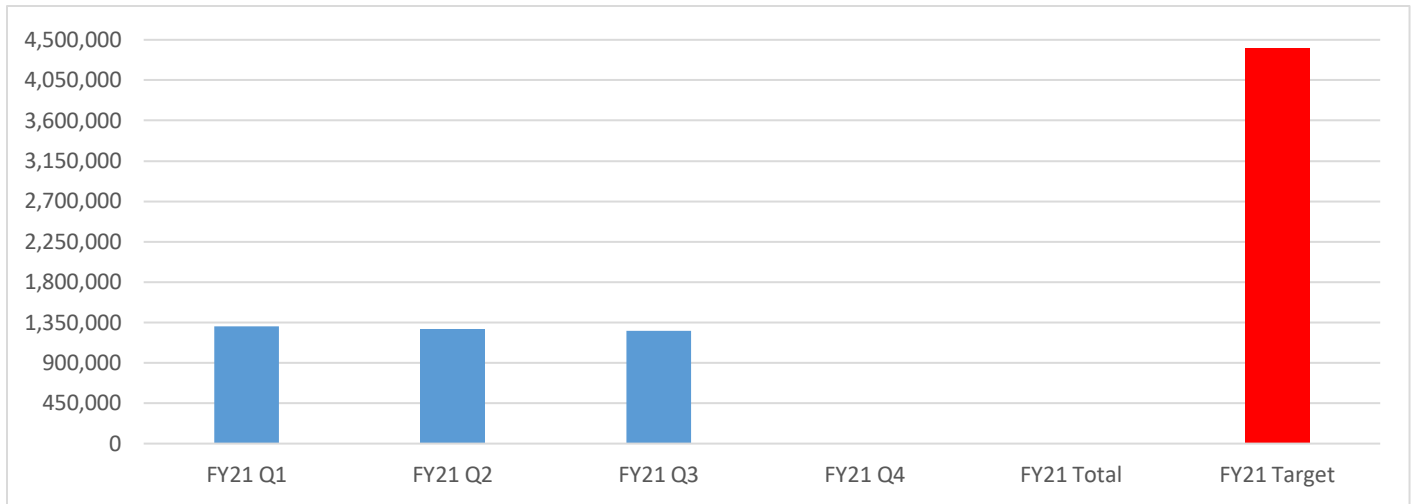
## PERFORMANCE MEASURE #4

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

### Results

FY18	FY19	FY20	FY21 Q1	FY21 Q2	FY21 Q3	FY21 Q4	FY21 Total	FY21 Target
N/A	N/A	N/A	1,307,763	1,277,363	1,257,396			4,410,000

Graph of Data Above



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

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

**STORY BEHIND THE DATA:** The COVID-19 pandemic resulted in a significant data change after Governor, Michelle Lujan - Grisham declared a state of emergency on March 11, 2020. The state of New Mexico was granted a major disaster declaration by the Federal Government in March 2020. After this date, provisions of services were altered to comply with the public order and isolation guidance. The 3<sup>rd</sup> quarter was affected by the pandemic. Adult Day Care Centers and Senior Centers continued to remain closed. Congregate meal delivery was modified to "grab and go" or home delivered meals. During FY21 Q3 weather related closures at sites and colder temperatures had seniors not attending grab-n-go. The remaining services were affected by the stay at home and social distancing orders.

**IMPROVEMENT ACTION PLAN:**

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

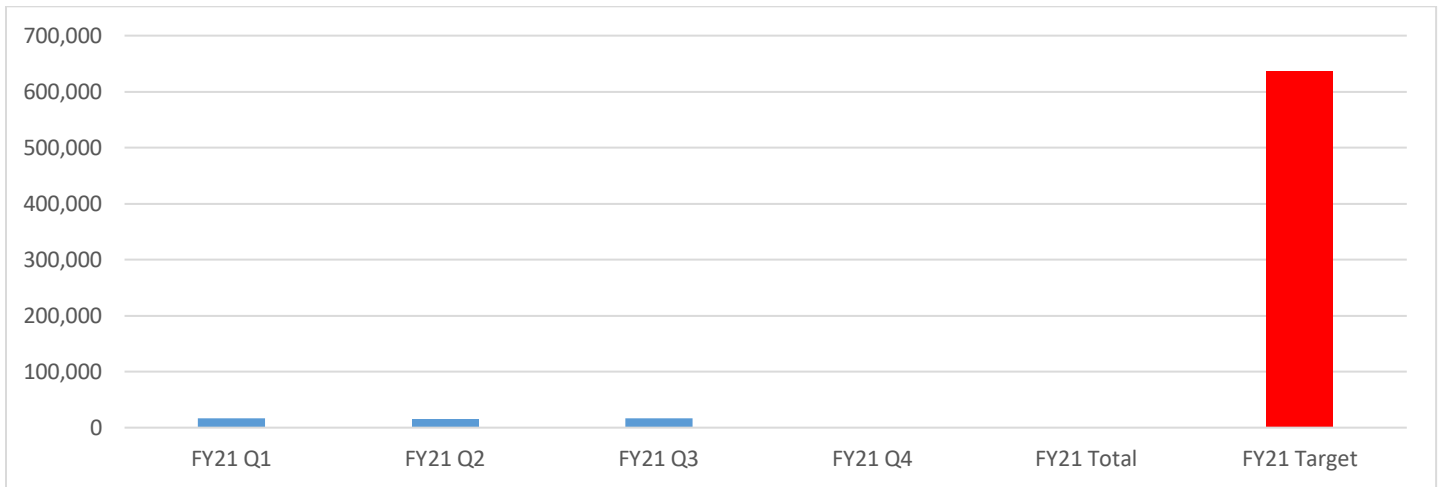
## PERFORMANCE MEASURE #5

### Number of Transportation Units Provided

#### Results

FY18	FY19	FY20	FY21 Q1	FY21 Q2	FY21 Q3	FY21 Q4	FY21 Total	FY21 Target
N/A	N/A	N/A	16,975	15,554	16,801			637,000

Graph of Data Above



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

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

**STORY BEHIND THE DATA:** The COVID-19 pandemic resulted in a significant data change after Governor, Michelle Lujan - Grisham declared a state of emergency on March 11, 2020. The state of New Mexico was granted a major disaster declaration by the Federal Government in March 2020. After this date, provisions of services were altered to comply with the public order and isolation guidance. FY 21 Quarter 3 was affected by the pandemic. During the 3<sup>rd</sup> quarter, weather related closures at sites and colder temperatures had seniors not requesting transportation services. Transportation services were modified to focus on medically necessary transportation. Transportation was altered to comply with the stay at home and social distancing orders.

#### IMPROVEMENT ACTION PLAN:

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

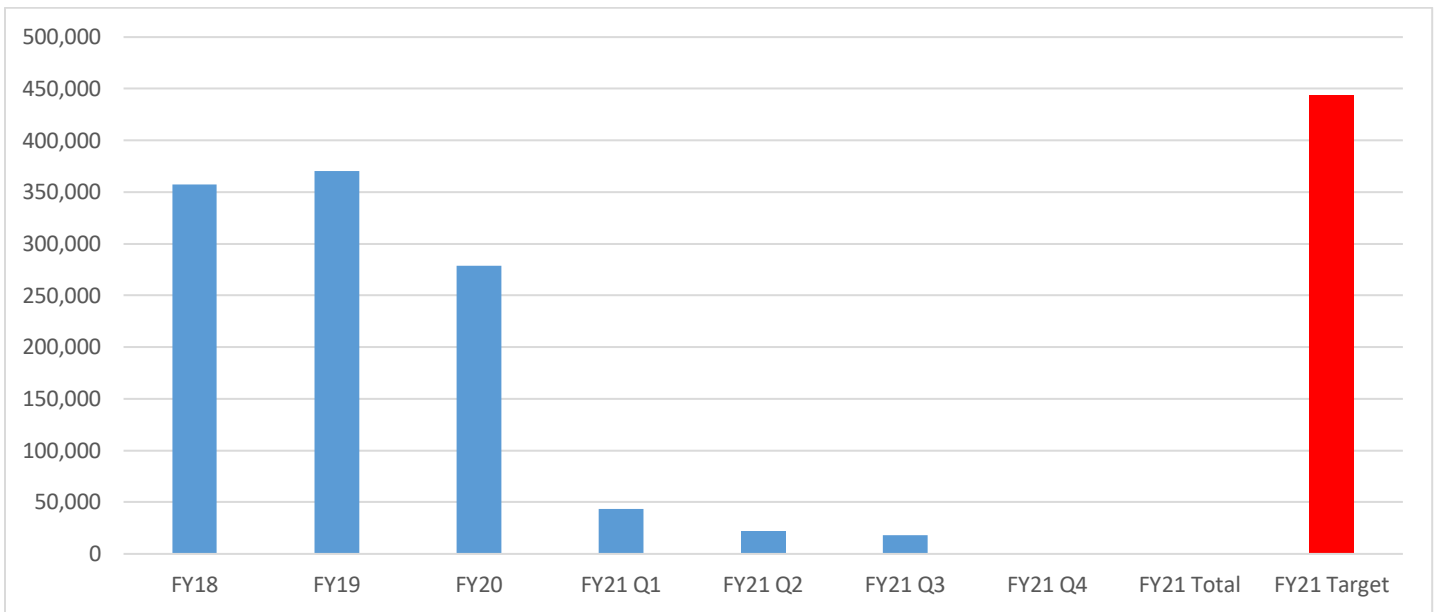
## PERFORMANCE MEASURE #6

### Number of hours of caregiver support

#### Results

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

Graph of Data Above



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

**DATA SOURCE/METHODOLOGY:** The WellSky Aging and Disability Database is the repository used by providers contracted through the AAAs and caregiver entities to document services provided by caregivers. All AAAs, except for the Navajo Area Agency on Aging (NAAA), use this database to capture monthly service data and report it to ALTSD. The Aging Network Division, Consumer and Elder Rights Division (CERD), Office of Alzheimer’s and Dementia Care, and the Office of Indian Elder Affairs compile the data for quarterly and annual performance measure reporting.

**STORY BEHIND THE DATA:** The purpose of the Aging Network is to provide supportive social and nutritional services for older individuals and persons with disabilities, so they can remain independent and involved in their communities. During FY21 Quarter 3, the number of hours of caregiver support were: **Respite Care = 7,192.00; Adult Day Care (IAAA) = 474.00; Homemaker = 7,325.50; and Other Support Services = 2,989.50.**

Due to the impacts of the COVID-19 pandemic, the number of hours of caregiver support was significantly lower during the 3<sup>rd</sup> quarter of FY21, which was at **17,989.50** hours. The COVID-19 pandemic resulted in a significant data change after Governor Michelle Lujan - Grisham, declared a state of emergency on March 11, 2020. The state of New Mexico was

granted a major disaster declaration by the Federal Government in March 2020. After this date, provisions of services were altered to comply with the public orders and isolation guidance. Adult Day Care Centers are closed, and the remaining services have also been affected by the stay at home and social distancing orders.

**IMPROVEMENT ACTION PLAN:**

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