



STATE PLAN ON AGING 2020-2024

Keystone for Empowered Aging



PENNSYLVANIA DEPARTMENT OF AGING

Pennsylvania Department of Aging
State Plan on Aging
2020 - 2024

Governor Tom Wolf
Secretary Robert Torres



PENNSYLVANIA DEPARTMENT OF AGING



COMMONWEALTH OF PENNSYLVANIA
OFFICE OF THE GOVERNOR

Dear Fellow Pennsylvanians:

One of our highest priorities in public service is to help the most vulnerable populations among us, especially older adults. In support of our growing and diversifying older adult population, the commonwealth receives federal funding under the Older Americans Act and is obligated to develop a State Plan on Aging every four years. This strategic plan, developed by the Pennsylvania Department of Aging, will serve as a blueprint to help build capacity for a more age-friendly Pennsylvania. As we continue to improve access to and the quality of services, we must do so in a manner that honors all older residents and is responsive to racial, ethnic and cultural differences while promoting purpose, well-being and a sense of community.

This plan was informed by and developed with input from many partners and stakeholders that play an important role in serving Pennsylvania's older adults. Throughout the next four years, the Department of Aging will implement dozens of action steps with the assistance of the statewide network of Area Agencies on Aging, the Pennsylvania Council on Aging and other stakeholders to further the goals of the plan. To maintain a commitment to transparency and accountability, the plan provides measures and timelines that will be periodically monitored, and progress shared throughout the duration of this plan.

This plan is designed to meet the needs of older adults over the next four years and beyond while ensuring that the Department of Aging and its many partners and stakeholders work together to build an age-friendly commonwealth that will serve as a keystone to empowered aging.

Sincerely,

A handwritten signature in blue ink that reads "Tom Wolf".

TOM WOLF
Governor



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF AGING

Dear Fellow Pennsylvanians:

As Secretary of the Pennsylvania Department of Aging, it has truly been an honor to work with so many of our staff, partners and stakeholders on the development of this new State Plan on Aging. This plan is effective on October 1, 2020 and will be executed through 2024 to help meet the demand for services from our growing and diversifying older adult population.

Designated by the federal government as the State Unit on Aging, the Department of Aging is bound by the Older Americans Act to focus programs and develop targeted outreach to support older adults with the greatest economic and social need. This means focusing on older adults living at or below the poverty level or being impacted by non-economic factors such as physical and mental disabilities, language barriers, cultural, social or geographical isolation, including isolation caused by racial or ethnic status.

The Department of Aging has worked diligently on developing this new State Plan that will direct the commonwealth's efforts in support of older Pennsylvanians through 2024. It is a plan that was informed by a statewide survey that yielded 5,600 responses from adults all over the commonwealth including family caregivers, veterans, people living with a disability, direct care workers, volunteers who work with older adults, members of the LGBTQ community and grandparents raising grandchildren. It was also presented to the Pennsylvania Council on Aging and its corresponding Regional Councils, and at several virtual community forums where nearly 500 individuals participated and gave testimony, raised questions or shared comments.

I thank all of you who took the time to review the plan, provide input and pledge your support to help us meet our goals. No one organization can achieve these goals on their own. It will take a collaborative well aligned effort to ensure that Pennsylvania can lead the way and be a model to this nation on how to serve older adults. The Department of Aging looks forward to working with you on this journey.

Sincerely,

A handwritten signature in black ink that reads "Robert Torres".

Robert Torres
Secretary

Governor's Authorization and Verification of Intent

The Pennsylvania Department of Aging (PDA), serving as the State Unit on Aging, hereby submits the Pennsylvania State Plan on Aging for the period October 1, 2020 through September 30, 2024 and certifies that the development of the state plan is and its administration by PDA shall be in compliance with the required assurances and provisions of the Older Americans Act.

This State Plan will serve as a blueprint over the next four years to build capacity, promote innovation, implement best practices, improve data management and reporting, support healthy living and active engagement, embrace diversity, honor individual choice, advocate and protect against elder abuse and strengthen accountability.

PDA will work to enhance the development of comprehensive and coordinated systems for the delivery of supportive services, such as aligning health and social services, promoting multipurpose senior centers and expanding nutrition services. PDA is committed to serving as the commonwealth's visible and effective advocate for older individuals, at-risk older adults, and people with disabilities including their families and caregivers.



September 10, 2020

Robert Torres, Secretary
Pennsylvania Department of Aging

Date

I hereby authorize the Pennsylvania Department of Aging, as the designated State Unit on Aging for Pennsylvania, to submit the 2020 – 2024 State Plan on Aging to the United States Administration for Community Living (ACL) for their approval. Upon approval of the State Plan by ACL, I further direct the Department of Aging to execute the strategies outlined in the plan to achieve the stated goals and objectives.



September 10, 2020

Tom Wolf, Governor
Commonwealth of Pennsylvania

Date

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Mission, Vision, Values

MISSION

The mission of the Pennsylvania Department of Aging is to promote independence, purpose and well-being in the lives of older adults through advocacy, service and protection.

VISION

Our vision is a Pennsylvania where older adults are embraced and empowered to live and age with dignity and respect.

CORE VALUES

With older adults at the center of everything we do, we are guided by these core values:

Diversity and inclusion strengthen us.

Innovation drives us.

We are passionate about the **customer experience**.

We **lead strategically** to meet future needs.

We **listen** and **effectively communicate** with consumers and partners.

We **act with integrity**.

We **value our workforce**.

Partnership and collaboration enhance our capacity.

We hold ourselves and partners **accountable for results**.

We **manage resources** entrusted to us **responsibly**.

Executive Summary

The mission of the Pennsylvania Department of Aging (PDA) is to promote independence, purpose and well-being in the lives of older adults through advocacy, service and protection. This mission drove the development of our federally required four-year state plan on aging. The plan keeps the present and future needs of Pennsylvania's growing and diversifying population of older adults and their caregivers at the forefront. The department seeks to both honor and recognize the lives of more than 3 million adults over 60 years old who call Pennsylvania home by completing the goals, objectives and strategies outlined in this plan.

The development of the plan was accomplished with input, cooperation and support from the public, stakeholders and other state agencies who support our mission. Among our primary collaborators were the Pennsylvania Council on Aging (PCoA), the Pennsylvania Association of Area Agencies on Aging (P4A), and our statewide network of 52 Area Agencies on Aging (AAAs), all of whom support the needs of older adults within their respective communities.

We have many unique opportunities to be innovative in our approach to programming, advocacy and service for older adults in Pennsylvania, not only during this four-year plan, but well beyond. From changing the narrative around what it means to grow older to leveraging the experience and wisdom of our diverse and talented older adult population in order to combat ageism. We look to our many partnerships to help enliven the spirit of community for Pennsylvanians of all ages and to support our vision of a commonwealth where older adults are embraced and empowered to live and age with dignity and respect.

Over the next four years, PDA will strategically focus its efforts on the following five overarching goals in order to position Pennsylvania to meet the needs of and enhance services for older adults:

Goal One: Strengthen aging network's capacity, promote innovation and best practices, and build efficiencies to respond to the growing and diversifying aging population.

Goal Two: Improve services for older adults and the ability to advocate for them by using evidence-informed planning, committing to data integrity and being accountable for results.

Goal Three: Establish and enhance efforts to support healthy living, active engagement and a sense of community for all older Pennsylvanians.

Goal Four: Emphasize a citizen-first culture that provides outreach, embraces diversity, and honors individual choice.

Goal Five: Advocate for the rights of older adults and ensure their safety and dignity by raising awareness of and responding effectively to incidences of abuse, injury, exploitation, violence and neglect.

Currently, one in four Pennsylvanians is over 60 years old. This older adult population is expected to reach 4 million, nearly one-third of the total population, by 2030 and remain at that level through 2040. While a smaller part of the total population, those 85 years and older, represents a subgroup that is expected to continue growing steadily to nearly 610,000 in 2040. Among the special concerns of a rising 85-and-older population is the greater prevalence of comorbidities and higher rate of disability, which will increase the demand for home and community-based services.

In addition to the growth of Pennsylvania's older adult population, it is also becoming more diverse. Currently, diverse racial and ethnic groups make up only 12% of the 65-and-older population in PA; however, those numbers are expected to grow to 22% by 2050. Hispanics, currently a little over 2% of this population, are projected to experience the highest increase in older adults and reach 7% by 2050. These projections highlight the importance of continuing to focus on person-centered, culturally competent services and outreach to diverse communities in order to be responsive to the needs of everyone seeking services.

The increasing diversity in our population further extends to the LGBTQ community. The unique needs of LGBTQ older adults must be thoughtfully considered in our planning. Although data is still largely unavailable, we recognize our responsibility to be responsive to the needs of this growing sector of the aging community. We can be responsive by ensuring welcoming spaces, culturally-affirming services, and taking the steps necessary to allow these and all older individuals to age with the dignity and respect that every person deserves.

To address the needs of Pennsylvania's growing and diversifying older adult population, PDA needs to remain agile in its ability to respond to emerging trends and to stand ready to advocate for our most vulnerable residents. Supporting measures that allow for increased access to telehealth, telemedicine and socialization via technology are examples of ways we can help to improve access to health care and social services and to reduce social isolation, which are issues addressed by older adults who answered the State Plan on Aging 2020–2024 Community and Stakeholder Survey.

Social isolation of older adults is a significant concern because of the negative effect it can have on overall health and emotional well-being. Establishing innovative ways to reduce social isolation through new or existing technologies and strategic partnerships is important to impact the very real innate human need of simply connecting with others.

The State Plan on Aging 2020–2024 Community and Stakeholder Survey further validated this point when we asked participants to rate 14 factors in terms of importance to age-friendly communities. Rating fourth behind predictably high scoring areas like affordable housing, access to in-home services and affordable prescriptions was “opportunities to make meaningful connections with others,” reinforcing the need for continued work in this area.

Older adults who are socially isolated are also more susceptible to abuse, neglect, violence, and financial exploitation and scams perpetrated by people who are either known or unknown to them. Older adult protective services, which are overseen by PDA and carried out by AAAs in local communities, are the most urgent and critical services we provide. Reports of need for protective services have increased 97% in the past five years. This rise in reports is due in part to the growing population, but also community awareness efforts and targeted training and collaboration with other state agencies and partners. The trend of increasing reports of need is expected to continue and serves to highlight the need for the department to stay vigilant in the important role we serve in developing policy, providing oversight and promoting advocacy of this critical program serving the most vulnerable older Pennsylvanians.

Protective services and other programs administered by PDA, through the AAAs, are financed largely by the state lottery and federal funds. Pennsylvania has the distinct advantage of being the only state where all proceeds of the state lottery are for programs that benefit older residents. This significant infusion of funds each year helps to support major programs like prescription assistance, reduced-fare and free transit services, property tax and rent rebate programs, and home and community-based services. The state lottery system is critically important in helping to serve and meet the needs of older Pennsylvanians.

Commonwealth residents have resources available to assist them as they age whether they are older adults, caregivers of older adults, grandparents raising grandchildren, persons living with a disability, or older veterans. This State Plan on Aging provides a comprehensive roadmap to improve access to and the quality of services for older adults. PDA is committed to working tirelessly to implement this plan to improve quality of life and well-being for all older adults.

Introduction & Context

PDA was created by Pennsylvania's Act 70 of 1978, which established "a cabinet-level State agency whose jurisdiction, powers, and duties specifically concern and are directed to advancing the well-being of Pennsylvania's older citizens." It further established that PDA would "serve as an advocate for the aging at all levels of government."

As the State Unit on Aging (SUA) for Pennsylvania, PDA provides the strategic vision and leadership to develop and administer programs and services to meet the many unique needs of older adults and their caregivers through a network of 52 local AAAs. In addition to administering state and federal funding to the AAAs and ensuring adherence to contract requirements, PDA also provides policy guidance, programmatic structure, data collection systems management, technical assistance, quality assurance and training.

PDA, as the SUA, is federally required by the Older Americans Act (OAA) of 1965, as amended, to submit a state plan on aging to the Administration for Community Living (ACL) at the U.S. Department of Health and Human Services (HHS) at least once every four years. Local AAAs are similarly required to develop area plans for their local planning and service area which align with the state plan both in timing and, while keeping local needs in mind, content. Area plans undergo a similar development process to the state plan and are submitted to PDA for review and approval.

As part of the state plan development process, PDA must ensure the steps taken to create the state plan and the execution of the plan over the next four years adhere to assurances required by ACL. For the development of the state plan, this includes things like conducting a needs assessment, ensuring we seek public input on our plan, developing plan goals that align with the four focus areas identified by ACL and allowing for public feedback on the state plan draft. For the execution of the plan, it includes a promise that the department will adhere to its programmatic obligations under the OAA and be accountable to our plan by having measurable outcomes and transparently reporting results.

This plan is the product of a development process that began as an internal strategic planning meeting amongst the leadership team at PDA in mid-2019 and grew through the input of our staff, valued stakeholders and the public to be a robust, living, 2020-2024 strategy for the department.

State Unit on Aging Operations Overview

In conjunction with administering the OAA and ACL discretionary grants, PDA coordinates a comprehensive array of services that benefit older Pennsylvanians, their families, their caregivers, and the aging network. These services are made available primarily through the network of 52 local AAAs across the commonwealth. With guidance from the department, AAAs are responsible for planning, developing, and implementing a system of services for persons age 60 and over in their respective PSAs.

In addition to the AAAs, the aging network includes senior community centers, adult daily living centers, Aging and Disability Resources Centers (ADRCs), direct care workers and other providers. These partners are crucial to the delivery of services and the well-being of older Pennsylvanians.

By recognizing the importance of our internal and external partnerships and leveraging resources through discretionary grants and other funding sources, we are continually striving to expand our capacity to serve older adults in new and innovative ways.



3.4M+

Adults 60 Years Old and Older in Pennsylvania



234K

Direct Care Workers



300+

Long-Term Care Advocate Ombudsmen



52

Area Agencies on Aging



2K

Aging and Disability Resources Center Partner Organizations



513

Senior Community Centers



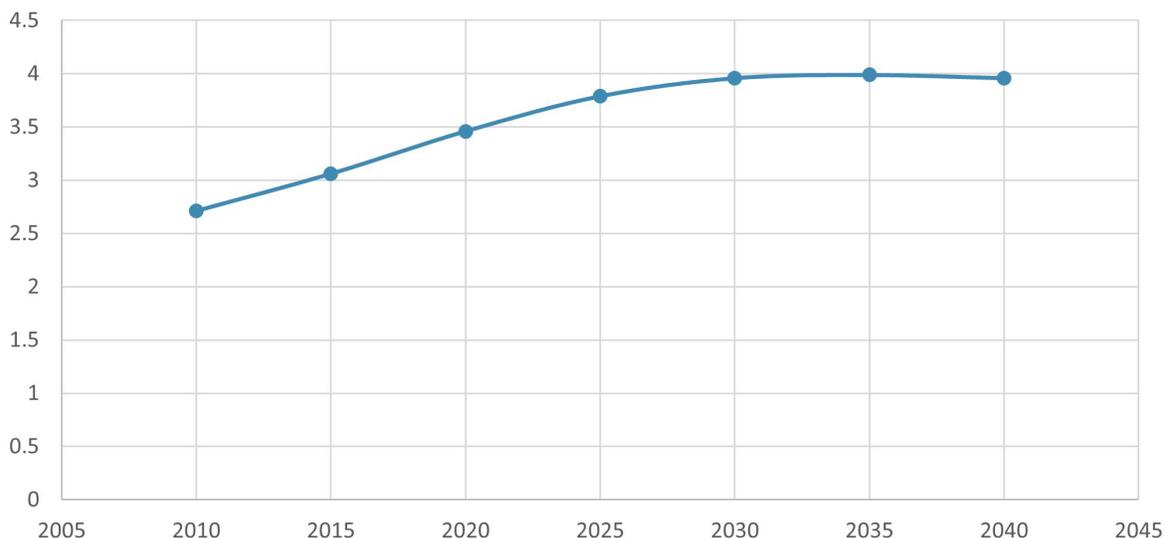
247

Adult Daily Living Centers

Population

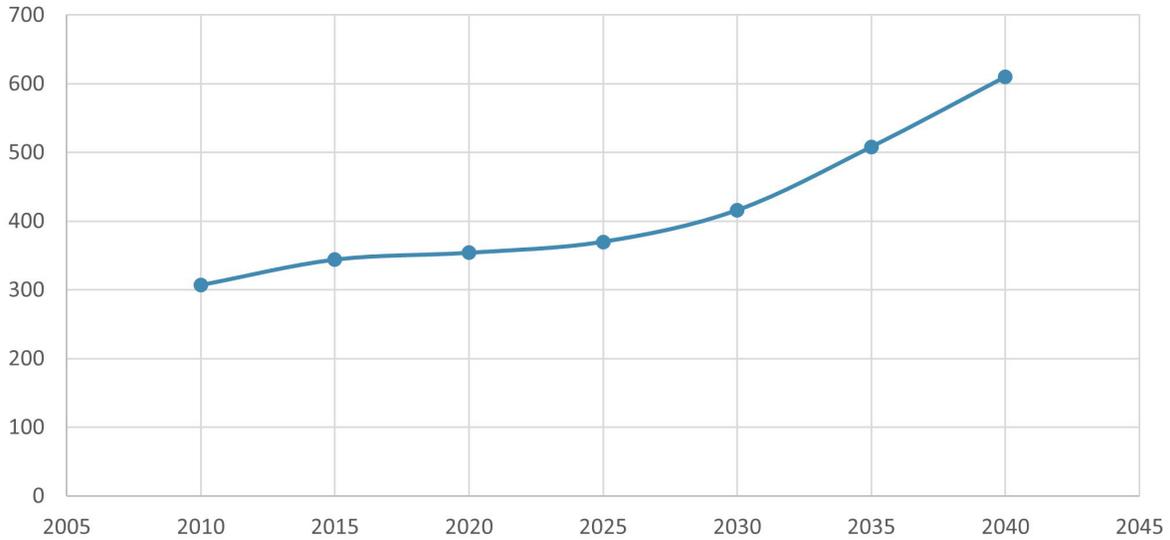
Pennsylvania's rapidly growing older adult population is also growing enriched with diversity, making the commonwealth a desirable place to live and age. Currently, one in four Pennsylvanians is over 60 years old, but in the next 10 years, the population shift is expected to be such that nearly one-third of our population will be over 60 years old.

Over Age 60 Population in Millions



While the 60-and-older population swells to nearly 4 million people and is estimated to hold rather steady for a number of years after 2030, there is expected to be a marked, steady increase in the 85 years old and older age group. In fact, it is expected the number of the oldest older adults (85+) in 2040 will be double the number there were in 2010. Projected increases in the oldest older adult (85+) are important to consider in our plans because they are more likely to be living with multiple health conditions or disabilities. They are also more likely to live alone and be at risk for social isolation.

Over Age 85 Population in Thousands



The growing older adult population is also becoming more diverse. This changing demographic is adding the experience and wisdom of older adults of different races, ethnicities, cultures, backgrounds, sexual orientations and gender identities. At the PDA, our first core value is “diversity and inclusion strengthen us,” so meeting the needs of our diversifying older adult population is an exciting challenge and opportunity. It will require us to continue to develop services that reach, speak and are responsive to every older Pennsylvanian who needs them.

65 + Diversity in PA - 2019



Projected 65 + Diversity - 2030



Projected 65 + Diversity - 2050



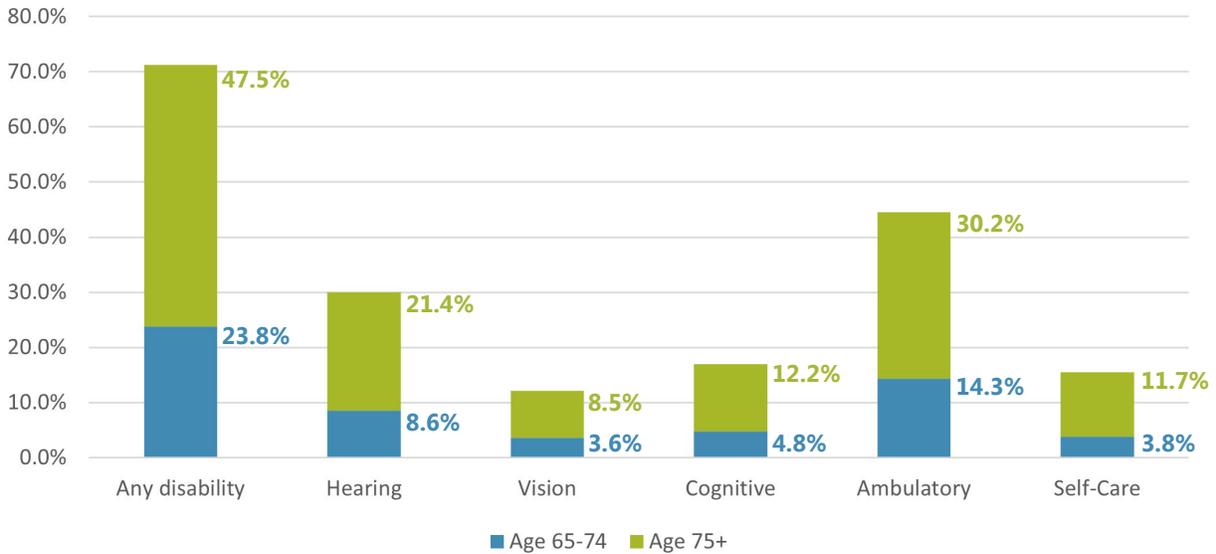
■ White ■ Black ■ Hispanic ■ Other
88% **7%** **2%** **3%**

■ White ■ Black ■ Hispanic ■ Other
86% **8%** **3%** **3%**

■ White ■ Black ■ Hispanic ■ Other
78% **9%** **7%** **6%**

PDA recognizes another layer of diversity includes the varying level of ability of each individual. Older adults live with disabilities at a much higher rate than adults 18-59, often with co-occurring conditions. Living with disabilities can make it difficult to access needed services and participate in opportunities like volunteerism, senior centers and other activities.

Disability Rates in PA by Age and Type in 2018



Programs & Funding

Older adults in Pennsylvania have access to a variety of aging programs and services funded by state and federal resources. A distinct advantage for older adults in the commonwealth is that our programming receives a significant amount of funding through the state lottery.

The Pennsylvania Lottery is the only state lottery that designates all of its proceeds to programs that benefit older residents. Thanks to loyal PA Lottery players, the PA Lottery has been able to contribute more than \$30 billion to programs for older adults since the lottery began in 1972. In 2019, the Pennsylvania Lottery generated more than \$1 billion in PA Lottery benefits for those programs, many of which would not exist without this funding. These include property tax and rent rebates, free and reduced-fare transit services, low-cost prescription drug programs, and an array of home and community-based services.

Specific to PDA’s programs and services, which do not include PA Department of Human Services Medicaid-funded home and community-based services for older adults and nursing facility care, our funding is as follows: For fiscal year 2020-21, the lottery generated \$463,795,000 toward services and supports for older Pennsylvanians. This represents 81% of the total budget for PDA-administered programs and services. PDA’s budget also included \$104,717,000 in federal funding and \$796,000 in other augmentations.

PDA allocates state and federal funding to PSAs across the commonwealth through allocations to AAAs calculated by an Intrastate Funding Formula approved by ACL. The weighted formula takes into consideration the population of older adults who are of greatest economic and social need. In particular, the formula considers the following factors: Low-income persons 60 years and older (at or below 100% of poverty), rural population 60 years and older, minority persons 60 years old and older, persons 75 years old and older, and persons 60 years old and older. The term “block grant” refers to state funds and not federal funds throughout this document.

Core Programs

Adult Daily Living Centers	Available through our OPTIONS program, Adult Daily Living Centers can provide supervision and support for older adults one or more days a week
APPRISE	Free and objective one-on-one Medicare counseling from trained APPRISE volunteers
Caregiver Support Program	Program of supports and services designed to ease caregiver stress
Education Programs	Medication management, nutrition classes, health screenings, and more
Health & Wellness	Evidence-based exercise, chronic disease management, falls prevention and other classes
Nutrition Services	Provide direct meal service and nutrition counseling at no charge to eligible individuals
Older Pennsylvanians Legal Assistance Program	Provides legal assistance, advocacy and counseling for qualifying older adults on a variety of issues
Office of the Long-Term Care Ombudsman	Advocacy and complaint resolution for individuals living in long term care facilities such as nursing or personal care homes and assisted living facilities
Ombudsman: PA Empowered Expert Residents (PEERs)	In-facility long-term care advocate residents, available to assist other residents in understanding their rights
OPTIONS – Help at Home	Cost-shared in-home services which could include care management, personal care, home modifications, home health care, adult day care, home-delivered meals, transportation and other services
PA Link to Aging & Disability Resources	Person-centered information and assistance for accessing long-term services and supports for adults 18 years and older. PA Link: 1(800)753-8827
PACE & PACENET Prescription Assistance	Income-based eligibility low-cost prescription medications for qualified residents age 65 and older. PACE/PACENET: 1(800)225-7223
PA Patient Assistance Program Clearinghouse (Sponsored by PACE)	Adults 18 and older can call the Clearinghouse for assistance with a variety of medical, food, housing, employment, and other programs. Statewide Clearinghouse: 1(800)955-0989
Protective Services	Protection for adults 60 years old and older from physical, emotional and financial abuse, exploitation, neglect and abandonment. Statewide hotline: 1(800)490-8505
Senior Centers	Offer socialization, activities and free, nutritious meals in a congregate setting
Senior Employment	Federally funded program providing job training and employment for low-income adults 55 and older
Transportation	Free and discounted rides to assist older adults getting to medical appointments, senior centers and other essential destinations
Volunteer Opportunities	The Department has many volunteer opportunities for older adults and others. Express your interest here .

Grant Funding

In addition to state and federal funding, PDA seeks ACL and other discretionary grants in order to develop innovative programs that allow us to expand our capacity, strengthen the aging network, and better serve Pennsylvania's older adults and those living with a disability.

The following are current grant initiatives at PDA:

Aging and Disability Resources Center Grant

The ADRC, also known as PA Link, was awarded a \$3 million grant in April 2020 from HHS-ACL to support capacity and resource allocation for the PA Link at the state and local level in its efforts to prevent, prepare for and respond to COVID-19. All activities within the scope of the grant will be completed within the performance period, which ends in September 2021.

Funded activities include:

- Implementing e-services for PA Link staff and consumers to assist and overcome challenges related to accessing PA Link programs
- Supporting those most at risk in seeking transitional support from hospital-to-home and nursing home-to-home by using aging network supports
- Collaborating with local grocery stores, restaurants, mobile food ordering and delivery services to provide groceries to consumers in need
- Assisting older adults, people with disabilities, caregivers and clinicians to understand how to use telehealth technologies to provide and receive needed services and to reduce social isolation
- Providing personal protective equipment (PPE) for PA Link partners to ensure in-home supports can be maintained
- Increasing public awareness of the PA Link helpline
- Providing consumers with the ability to request periodic check-in calls by trained staff and increase awareness of consumers to low-cost programs that connect individuals through broadband and telecommunication equipment
- Assisting the PA Link network partners to respond to requests from consumers in need of resource information and assistance

Protective Services Office Grant

The Protective Services Office was awarded a \$1.568 million grant in September 2018 from ACL to collaborate with Pennsylvania Department of Health's Community Health Nurses to enhance services for older adults at risk of or found to be neglecting their own care needs and provide a multi-faceted approach to reducing identified risks. All activities within the scope of the grant will be completed within the performance period, which ends in August 2021.

Funded activities include:

- Providing person-centered one-on-one health education from a community health nurse to older adults at risk of, or who are currently neglecting their own care needs

- Educating older adults and the general public about elder abuse and reporting and available community programs designed to assist them in maintaining their health and wellness

Protective Services Office Grant

The Protective Services Office was awarded a \$600,000 grant in September 2019 as a subgrantee from the PA Commission on Crime and Delinquency (PCCD) Office for Victims of Crime to enhance the delivery of protective services for older adults through technology. All activities within the scope of the grant will be completed within the performance period, which ends in August 2021.

Funded activities include:

- Development and implementation of an online protective services report of need to increase access for the public to report elder abuse electronically
- Development of an electronic data dashboard designed to assist investigative staff to most efficiently manage the needs of victims in accordance with Pennsylvania’s Older Adult Protective Services Act (OAPSA)
- Enhancement of the functionality of the statewide Elder Abuse Reporting Hotline (1-800-490-8505)

Councils and Workgroups

The department has several councils that we consider to be key partners in advancing efforts on legislation, policy discussions, advocacy and more. They advise the department on current trends within older adult serving systems of care and provide recommendations on emerging issues.

Pennsylvania Council on Aging

The Pennsylvania Council on Aging (PCoA) was created in 1977 by Pennsylvania Statutes Title 71 State Government § 581-4 (Administrative Code § 2204-A). The 21 members who make up the council (the majority of whom are required to be age 60 or older) are nominated by the governor and subject to Senate confirmation. Five members of the council serve as chairs of five separate regional councils. Council members represent all older Pennsylvanians and serve as advocates for older adults and advise the governor and the department on planning, coordination, and delivery of services to older adults.

Pennsylvania Long-Term Care Council

The Pennsylvania Long-Term Care Council (LTCC) was established by Act 64 of 2015, replacing the Intra-Governmental Council on Long-Term Care in order to reflect today’s broader long-term care continuum. Chaired by the Secretary of Aging, the council is comprised of 35 members appointed by the governor, in consultation with the Secretary of Aging, including long-term care consumers, advocates, caregivers, providers, and policymakers. The LTCC consults with various departments and agencies to make recommendations on regulations, licensure, financing, or any other responsibilities of those departments or agencies relating to long-term care. The council’s scope includes all areas of long-term care, including, but not limited to, institutional care and home and community-based services.

Cultural Diversity Advisory Council

The Cultural Diversity Advisory Council advises PDA on developing and sustaining a network of providers and services that are culturally sensitive, responsive, and inclusive to the diverse needs of Pennsylvania’s older adults. The council is comprised of AAA representatives and stakeholders from diverse backgrounds and perspectives.

Alzheimer’s Disease and Related Disorders (ADRD) Task Force

The ADRD Task Force was established in 2018. It was created to take a lead role in implementing the goals and recommendations of the [Pennsylvania State Plan for ADRD](#). The objectives of the Task Force include:

- Working with local organizations, entities, advocates, and other stakeholders to identify and share best practices that support the goals and overall success of the ADRD State Plan at the local level
- Developing and facilitating the actions needed to carry out the recommendations and goals of the ADRD State Plan
- Encouraging research and reviewing any other issues that are relevant to ADRD
- Assisting in planning the annual ADRD Forum
- Leading efforts to review and revise the ADRD State Plan, as necessary

Task force members represent a diverse group of individuals and organizations from across the commonwealth. Its members include individuals and families living with ADRD, representatives from the Alzheimer’s Association, consumer advocacy groups, long-term care organizations, and other professionals. The ADRD Task Force is comprised of a chair and 15 members and meets at least quarterly.

Collaborative Engagement with other Commissions & Councils

Governor’s Commissions

As part of the Administration’s promise of a commonwealth committed to providing equality and opportunity for all its citizens, there are several commissions that advocate for and advise the Administration on the unique needs of diverse communities. Pennsylvania currently has five commissions: Commission on African American Affairs, Commission on Asian Pacific American Affairs, Commission on Latino Affairs, Commission on LGBTQ Affairs (established by Governor Tom Wolf and the first in the nation), and Commission for Women. Members of the commissions are appointed by the governor and have representation across the state.

PDA has developed well-established relationships with several commissions and consider them a valued resource in helping the department reach out and build trust within their communities. Commissions are a resource to PDA to ensure our outreach connects us with OAA targeted groups. A powerful example of these partnerships is the relationship built with the PA Commission on LGBTQ Affairs. This commission has an aging workgroup that includes a participating representative from PDA. This relationship has allowed for many collaborations, as well as sharing of information including the submission of formal recommendations to PDA to help inform this plan.

PA Supreme Court Advisory Council on Elder Justice in the Courts

The Advisory Council on Elder Justice in the Courts was established in 2015 to advise the Office of Elder Justice in the Courts regarding the implementation of the [Elder Law Task Force’s Report and Recommendations](#) regarding best practices, judicial rules, and legislation to benefit elder citizens of the commonwealth. The mission of the Advisory Council on Elder Justice in the Courts is to identify and address elder justice issues affecting the commonwealth’s elders. As part of their roles at PDA, both the Secretary of Aging and Chief Counsel are among the 24 members of this Council, which strategizes around elder justice matters such as guardianship, grandfamilies rights, protective services and others at their quarterly meetings.

Other Department of Aging Initiatives

University of Pennsylvania Behavioral Health Lab Partnership

To comprehensively serve beneficiaries of the Department's Pharmaceutical Assistance Contract for the Elderly (PACE), the program partners with the University of Pennsylvania to provide evidence-based, algorithm-driven services through the university's Behavioral Health Lab (BHL) program.

The Behavioral Health Lab program seeks to address depression, anxiety, and dementia, which are prevalent later in life and lead to significant morbidity and disability, thereby contributing to increased use of medical services, nursing home utilization, and mortality.

The BHL program has three arms:

- Supporting Seniors Receiving Treatment and Intervention (SUSTAIN) – outreaches to cardholders with depression or anxiety problems
- Caregiver Resources, Education, and Support (CREST) – addresses the needs of caregivers of cardholders with dementing illnesses
- High Dose Opioid Program (HDO) – provides cardholders with an innovative approach to managing chronic pain and addressing the unmet psychosocial needs that contribute to the cycle of chronic pain

Emerging Issues and Trends

COVID-19 and the Future of Service Delivery

The emergence of the COVID-19 pandemic, during the development of this four-year state plan, and its impact on older adults, has elevated the importance of the key services provided by SUAs and the AAAs. The delivery of nutrition services, in-home services and support, protective services and check-in services for older adults who faced adverse impacts from being socially isolated, were particularly critical during this emergency.

The overwhelming concern about social isolation of seniors during this pandemic has raised the level of awareness of the problem and interest, from both the public and private sectors, in helping to address it. This experience has also created opportunities to adapt and innovate how we deliver services to and support our seniors. Leveraging new partnerships and technology solutions will be key strategies for this plan to better support and empower older adults in ways we may not have imagined before this pandemic.

Addressing Racial Discrimination & Inequities

As Pennsylvania's older adult population continues to grow and become more diverse, it is important for PDA and AAAs to consider the implications that racial discrimination and systemic inequities have on individuals as they age. This includes issues, like health disparities, that were magnified during the COVID-19 pandemic. PDA and the AAAs are working during this plan to train on issues like unconscious bias, diversity and inclusion, cultural competence and trauma in order to more effectively outreach and be responsive to the needs of diverse older adults.

As the state unit on aging, we are bound by the OAA to ensure that preference will be given to providing services to older adults with greatest economic need and greatest social need. Greatest economic need means the need resulting from an income level at or below the poverty line. Greatest social need means the need caused by non-economic factors, which include: Physical and mental disabilities; language barriers and cultural, social or geographical isolation, including isolation caused by racial or ethnic status. We are further called specifically to undertake program development, advocacy and outreach efforts focused on the needs of low-income minority individuals.

Alzheimer's Disease and Related Disorders

Currently there are an estimated 280,000 people aged 65 and older in Pennsylvania who are living with Alzheimer's Disease. By 2025, that number is expected to increase by 14.3% to 320,000. Alzheimer's Disease and related dementias touch nearly every family in some way. For caregivers, the burden can be extreme. In Pennsylvania, 677,000 family caregivers provide 771 million hours of unpaid care valued at \$10.1 billion. At PDA, we not only focus on services for older adults who need help or assistance to remain in their homes, we also support these caregivers. The help and support of unpaid friend and relative caregivers for loved ones living with Alzheimer's and other dementias is indispensable.

PDA consistently partners with the two Pennsylvania chapters of the Alzheimer's Association on programs, services and outreach for the benefit of people living with Alzheimer's Disease and all dementias and their caregivers throughout the commonwealth. During the state plan period, we will engage the Delaware Valley and Greater Pennsylvania Chapters in several collaborative efforts:

- Community outreach to increase community and volunteer engagement and develop new community partnerships, with a focus on underserved and diverse communities
- Building public and private partnerships with health systems, public health centers and clinicians to change the way we diagnose, treat and support the aging population, especially around dementia and cognitive decline
- Engaging in evidence-based, person-centered best practices to deliver quality care and support in long-term care and community-based settings
- Marketing to increase public awareness and messaging about dementia and the importance of access to care, early detection, diagnosis, and risk reduction

Dementia Friendly PA

Dementia friendly communities promote communities working together to allow people living with dementia to remain in the community to engage with family and others in their day-to-day life. The Dementia Friends PA movement has trained over 4,200 people as dementia friends in the two short years since the program started. The department has partnered with Dementia Friends PA to train all our staff, the ADRD Task Force and AAA directors with plans to spread this movement to every county in the commonwealth.

LGBTQ Age-Friendly PA

In October 2018, PDA held the inaugural LGBTQ Aging Summit with the theme, "Connecting Communities & Inspiring Change." The objective of this historic summit, attended by over 300 LGBTQ community leaders and advocates, AAA staff, providers, and other stakeholders, was to raise awareness and mobilize collaborative efforts to support LGBTQ older adults. Since the summit, the department and the Pennsylvania Commission on LGBTQ Affairs have partnered to continue working on the issues raised at the summit and make further progress. The commission has also created an aging workgroup to help focus the work to remove obstacles and ensure equality and inclusive programming for LGBTQ older adults. The department has a participating member in the workgroup.

One of the key action items from the 2018 LGBTQ Aging Summit was the need for our aging network to have the cultural competency to make our entire organization welcoming, friendly and a safe space for LGBTQ older adults. PDA partnered with SAGECare, a training arm of the national advocacy organization SAGE to provide comprehensive cultural competency training for leadership and staff of PDA, P4A leadership and staff, and AAAs. PDA has received platinum-level SAGECare credentials, and once trainings are completed throughout the network, Pennsylvania will be the first state nationally to achieve this level of training with its state unit and AAAs. We plan to continue to roll out this training to more of our OAA programs during this state plan period.

Further action items from the summit include the need to collect sexual orientation and gender identity (SOGI) data on our consumers. In order to most effectively serve all older adults, we believe data collection that supports comprehensive care planning is critical, so the department has action steps to implement the collection of SOGI data. Data nationally on this topic is limited; however the American Community Survey completed a one-year estimate of same-gender households for select U.S. cities in 2017. Results of this survey indicated that Philadelphia households included 1% same-gender couples. Collection of SOGI data will allow PDA to improve care plans for individuals and contribute to more effective program development for LGBTQ older adults.

Integration of Healthcare & Social Services

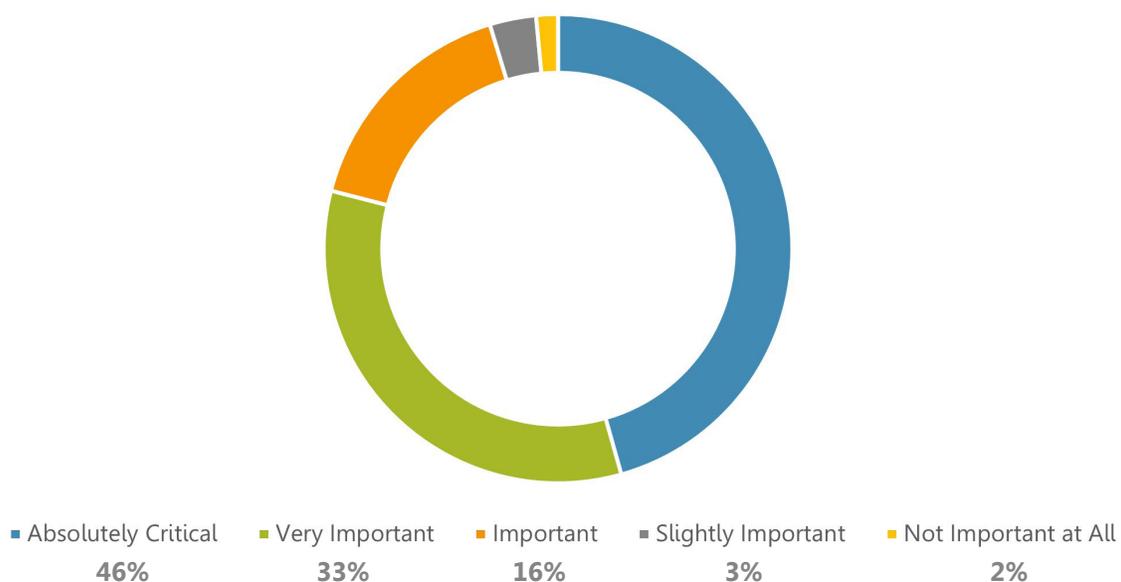
Pennsylvania currently has four AAAs that have been members of a health information exchange (HIE), receiving valuable benefits such as quicker access to medical information on consumers, future appointments, notification of emergency room visits and hospital admissions, allowing the AAAs to more effectively manage their resources and better support their consumers. As a result, PDA has promoted and facilitated the participation of all AAAs in health information exchanges to take advantage of and leverage the integration of healthcare and social services data. This will provide a holistic picture of an individual’s health and social support status enabling healthcare providers, AAAs and other social services organizations to better support older adults.

Affordable/Available Housing

In Pennsylvania, nearly one-third of all households have at least one person over 65 living in them. In fact, there are more than 630,000 individual householders over 65 in Pennsylvania who live alone. PDA recognizes that access to safe, affordable, inclusive and accessible housing is a key factor to being able to age in place.

The PDA State Plan Community and Stakeholder Survey revealed just how important this is to Pennsylvanians when respondents were asked to rate the importance of affordable/available housing to ensuring age-friendly communities for older adults over the next five years:

Available/Affordable Housing & Importance to Age-Friendly Communities



PDA's Division of Housing and Community Services is addressing the need for affordable housing by collaborating with local, state, and federal agencies to develop and implement innovative housing pilot projects to expand housing options for older adults throughout the commonwealth. The pilots have created affordable and accessible housing options that can be replicated in communities statewide and have proven to be successful options for older adults to remain in their homes and communities. Ongoing initiatives include:

- Shared Housing and Resource Exchange (SHARE) is an ongoing shared housing pilot program funded by a Money Follows the Person (MFP) grant from the Centers for Medicare and Medicaid Services (CMS). This pilot has been successfully implemented in Pike, Wayne and Monroe counties, with expansion plans in several other counties throughout the state plan period.
- Elder Cottage Housing Opportunity (ECHO) cottages in Clearfield County have successfully placed two units housing two older adults, and in July 2020 through a partnership with PDA, P4A was awarded a \$400K PHARE Grant (Pennsylvania Housing Affordability and Rehabilitation Enhancement Fund) which is expanding the ECHO cottage program to several other counties.

Direct Care Worker Shortage

Pennsylvania's more than 234,000 direct care workers are critically important to the long-term services and supports system (LTSS), helping older adults remain connected to their communities and live their best lives possible as they age. Our state faces a growing crisis, however, due to a shortage of these crucial paid caregivers. In April 2019, PDA's LTCC released its [Blueprint for Strengthening Pennsylvania's Direct Care Workforce](#). The report cites low wages, high turnover and lack of a clear career path as just a few of the reasons for the shortage. As the older adult population in the commonwealth continues to grow, especially in the oldest age category of those over 85, there will be an even higher demand for direct care workers. This need was further supported in our State Plan Community & Stakeholder Survey, in which over 80% of respondents over 65 years old categorized the need for access to in-home care and services as either "absolutely critical" or "very important" to age-friendly communities.

The volatility experienced by this workforce due to low wages, minimum training and high emotional and physical demands threatens both access to and the quality of services and supports on which many older Pennsylvanians depend. This further jeopardizes continuity of care – a proven factor in improved health outcomes. The recommendations contained in the LTCC's blueprint provide strategies needed to empower this workforce and LTSS providers in order to meet the increasing need. PDA is committed to pursuing initiatives that remove barriers to entering and remaining in this noble profession.

Hunger and Food Insecurity

According to the America's Health Rankings 2020 report, food insecurity among older adults is expected to increase through 2050 as the baby boomers continue to age. Older adults may report missing meals due to a variety of factors including functional limitations affecting their ability to prepare them, lack of social support, lack of transportation, and having to choose between food and other necessities because they can't afford both. Food insecurity can have a negative impact on overall health for older adults, including increased incidence of heart attack, congestive heart failure, high blood pressure, depression, exacerbation of chronic conditions and others.

The America's Health Rankings 2020 report also found that 14.7% of Pennsylvania adults age 60 and older faced the threat of hunger in the preceding 12 months. Although the Supplemental Nutrition Assistance Program (SNAP) reaches qualifying older adults in poverty in our commonwealth, there are opportunities to be creative in how we execute nutrition services provided through the OAA that might allow us to better reach and serve individuals at greater risk for food insecurity, including older adults who are black/African American, are Latino, live with a disability, live alone, live in poverty, or live in a food desert.

Financial Exploitation

Financial exploitation is a rapidly growing form of elder abuse which has catastrophic impacts on both the individual and the economy. As a result of Governor Tom Wolf's Executive Order on the Protection of Vulnerable Populations, PDA was directed to conduct a study, in 2020, of the current impact of financial exploitation on older Pennsylvanians and the commonwealth. The study found that over 80% of victims lived in urban communities, over 60% were female, and nearly two-thirds were either widowed or single. The study further found that the average age of a victim was 79 years old.

As a result of the study, the department is implementing several recommendations over the course of the state plan. These recommendations include updating the statutory and regulatory language of Pennsylvania's Older Adults Protective Services Act; creating an intra-agency financial exploitation team to explore opportunities across state government to address regulatory barriers to reporting financial abuse; creating a task force comprised of state agencies and stakeholders; and enhancing communications to increase prevention education and outreach strategies to those most vulnerable to being financially exploited.

Opioid Crisis

PDA is an active member of Pennsylvania's OPIOID Command Center and works to ensure older adults have access to the treatment they need. While older adults are not often directly impacted by opioid addiction, the department plays a role in educating them on safe storage, use and proper disposal of unused medications.

PDA's Pharmaceutical Assistance Contract for the Elderly (PACE) Program has opioid case management built into each enrollee's file. The program holds and edits opioid claims if they seem inappropriate and offers real-time assistance to pharmacies to ensure proper dispensing.

PACE also utilizes academic detailing through a partnership with Harvard University to provide physician-to-physician education on the latest and best practices on prescribing opioids to older adults. Sessions include information on treating chronic pain with non-opioid and non-pharmacological therapies, when possible.

Grandfamilies

According to the U.S. Census Bureau 2018 American Community Survey 5-Year Profile, more than 235,000 grandparents lived with their grandchildren under 18 years old in Pennsylvania, and of that, over 84,000 were responsible for the basic needs of their grandchildren. Grandparents and other older relative caregivers of children face emotional, financial, and legal challenges as they raise children a second time, often unexpectedly. The need to provide effective and comprehensive support to these caregivers, particularly grandparents raising grandchildren, is vital to ensuring they have access to resources that will strengthen their caregiving relationship.

The department has been actively advocating for the needs of grandfamilies through collaborations with other state agencies, stakeholder groups, advocacy organizations, the legal community including the Pennsylvania Supreme Court Advisory Council on Elder Justice, SeniorLAW Center and legislators. PDA’s Caregiver Support Program (CSP) provides resources and assistance to caregivers, including grandfamilies, with the purpose of alleviating stress and enhancing the caregiving relationship. Grandfamilies can benefit from reimbursements for care-related and respite expenses through this program. However, there is more work to be done for all of Pennsylvania’s grandfamilies.

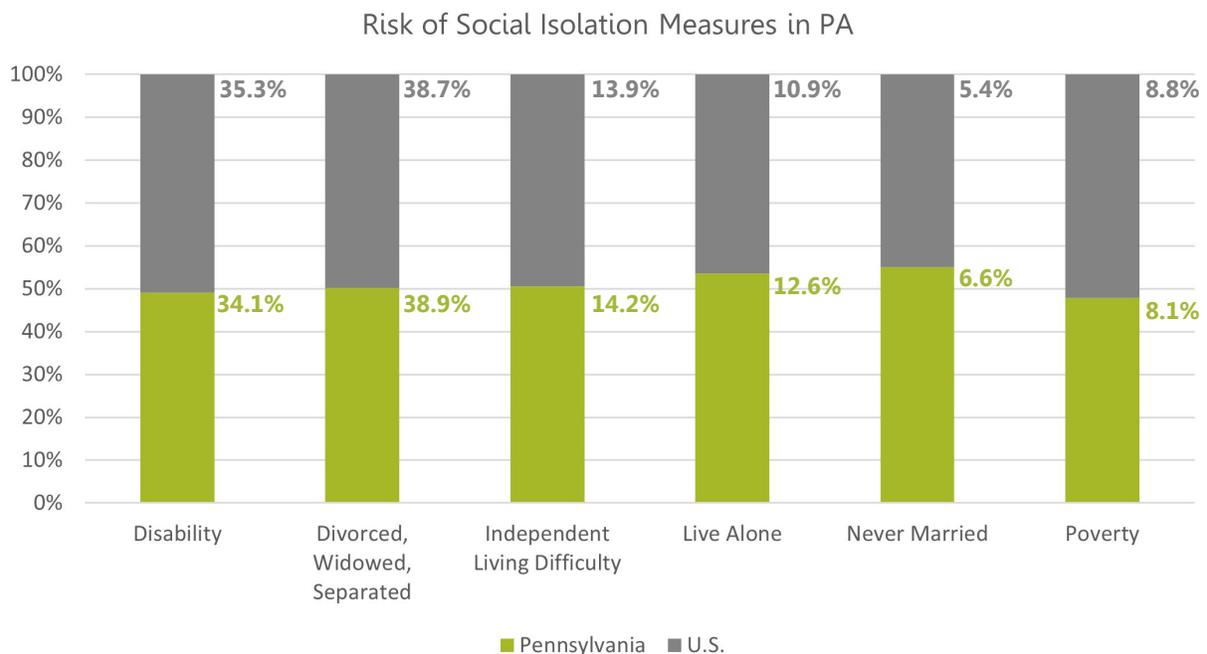
The PA Joint State Government Commission Report, [Grandfamilies in Pennsylvania: “The Second Time Around”](#), recommends the Caregiver Support Program be expanded to serve grandparents under the age of 55. While the PDA CSP will continue to serve individuals 55 and older, we hope to expand the program by removing the statutory CSP monthly care plan cost cap and allowing it to be set by the department; removing the \$300 aggregate average requirement for all CSP cases; removing the assistive devices limit and \$2,000 CSP home modification lifetime limit and allowing it to be set by the department.

Social Isolation

Social circles change as we age, and while there are many definitions of social isolation, it is, in essence, a lack of meaningful social connections. For older adults, the type and number of connections shift with changing social roles, increasing the risk of isolation. Social isolation can have a negative impact on physical health, mental well-being and is associated with a lower use of healthcare and an increased risk of mortality. Strong social support and connection, however, have positive effects on health and well-being.

The U.S. Census American Community Survey uses six measures as risk factors for social isolation, which includes the status of an individual on each of the following: Poverty; living alone; divorced, separated or widowed; never married; disability; and independent living difficulty. According to the 2018 5-Year American Community Survey, Pennsylvania ranks higher in terms of the number of adults 65 and older having these risk factors on four of six factors.

Source: U.S. Census Bureau, American Community Survey, 2014-2018



Social isolation has long been a concern of the department. Efforts to study social isolation, develop tools to address isolation and mitigate risk are being driven by the Social Isolation Task Force of the PCoA. However, the COVID-19 pandemic magnified the focus on social isolation and the issue gained the department's full attention when older adults who attended senior centers daily suddenly needed to stay home for their safety.

As the council's work continues, so do innovative projects and partnerships at the department aimed at addressing this problem. For example, our Office of the Long-Term Care Ombudsman partnered with AARP Pennsylvania to provide phones and tablets to nursing facilities to increase the opportunity to allow residents to interact virtually with their loved ones. In addition, the department is developing partnerships within the state university system to match older adults at risk of social isolation with students who need service learning encounters as part of their degree program.

Technology

Access to technology is something many of us may take for granted. Yet there are nearly 1 million Pennsylvanians, including older adults, without broadband internet access. As the COVID-19 pandemic demonstrated, many aging adults could benefit from technology to remain at home and virtually connect with loved ones, obtain food and medications, participate in telehealth/telemedicine and even socialization.

The push for high-speed internet everywhere in Pennsylvania has been a part of Governor Wolf's [Restore Pennsylvania](#) initiative that addresses the commonwealth's vital infrastructure needs. In August 2019, PDA participated in a listening session held by the governor's office on the initiative, which could make a difference for aging adults with telemedicine, home monitoring, fall prevention, and staying connected to prevent social isolation.

The PCoA has voiced its unanimous support of the governor's Restore PA initiative. Older adults make up the fastest-growing age group to use technology, and when they are given the opportunity to learn about technology and how to use it, their communication with family and friends increases. In April 2020, the PCoA released [the findings of its statewide survey](#) on how older adults managed during the COVID-19 pandemic and the results revealed an eagerness to learn about and use technology. Further, the State Plan Community and Stakeholder Survey uncovered a strong desire for accessible and available technology.

Mental Health

A lack of connection with loved ones and friends can put older Pennsylvanians at risk of social isolation, which could lead to depression, loneliness, lack of self-care and more. Many aging and disability communities lack a system of support to treat mental health, while many facilities specializing in mental health services do not have appropriate accommodations to properly serve older adults and people living with disabilities.

Suggestions to help combat mental health among older Pennsylvanians include: Provide specialized training for mental health providers, reevaluate billing codes that may hinder proper care and treatment, improve accessibility to services, place social workers specialized in geriatrics in senior centers, encourage hospitals and medical practices to seek accreditation through the Age-Friendly Health Systems initiative, and develop destigmatizing public service announcement campaigns involving different cultures and age groups.

According to a 2017 study from the University of Southern California, approximately 1 million adult Pennsylvanians struggled with serious psychological distress at least once in 2015. Of those adults, more than 27% had an unmet need for mental health care. That population includes 42% who did not receive mental health care because they could not afford it.

In early 2020, PDA hosted two roundtable discussions that focused on reducing stigma and understanding mental health issues and service needs. The discussions were in coordination with the governor's Reach Out PA: Your Mental Health Matters initiative, which is aimed at expanding resources and the state's comprehensive support of mental health and related health care priorities in Pennsylvania.

Trauma-Informed Pennsylvania Plan

On July 27, 2020, the Wolf Administration released its “Trauma-Informed PA” plan to guide the commonwealth and service providers on what it means to be trauma-informed and healing-centered in Pennsylvania. The implications of trauma and stress on individuals as they age is a particular concern for PDA. Throughout the state plan period, PDA will be promoting and facilitating training within the department and to aging network partners to help recognize and be more responsive to older adults impacted by trauma.

The Trauma Informed Plan focuses on six key areas:

1. Ensuring that state culture is trauma-informed through universal training
2. Ensuring state agencies’ policies and practices are trauma-informed and more focused on prevention and healing
3. Mandating that all licensed and funded entities become trauma-informed
4. Building and supporting grass roots/community-based efforts to become trauma-informed in every part of the commonwealth
5. Recognizing and healing from traumas of major crisis like COVID-19
6. Preventing and healing racial, communal and historical traumas, whether they be individual or systemic

Suicide

Suicide is a public health concern that affects all communities and in PA, is on the rise in older adults. For men, older adult suicide rates are considerably higher than that of younger adults. Suicide is also higher in white older adults than in people of color. In the LGBTQ community, lifelong experiences of discrimination and homophobia now coupled with ageism can cause feelings of grief that are difficult to overcome; and with the information available anecdotally, the number of suicides in LGBTQ older adults is also on the rise.

According to the Centers for Disease Control and Prevention, one out of four older adults who attempts suicide dies. While the exact reasons for that figure remain unknown, researchers suggest aging adults are frailer and therefore more vulnerable to self-inflicted injury. They can also be more isolated, which makes rescues more difficult, and they perhaps even plan their attempts more carefully. Men who are 65 and older face the highest risk of suicide, while adults 85 and older, regardless of gender, are the second most likely age group to die from suicide.

In late 2019, PDA participated in several listening sessions held across the commonwealth by the Pennsylvania Suicide Prevention Task Force. These sessions provided opportunities for attendees to share their stories of how suicide and mental health impacted their lives and communities, to offer educational information and to share recommendations for the task force to consider in developing a statewide suicide prevention plan.

Access to social connections, trauma informed interventions and mental healthcare continue to be important to ensuring Pennsylvania is equipped to serve an aging and diversifying commonwealth.

Older Adult Released Prisoner Reentrants

Over the past decade, the Pennsylvania Department of Corrections has paroled or released an average of 20,000 “reentrants,” annually, some of whom are 60 years of age or older. The recidivism rate for these individuals exceeds 70%. Many of those who recidivate are unable to sustain themselves in their community because they do not have adequate health care, paid employment, affordable transportation, or housing.

PDA’s PACE Program “Clearinghouse,” established in 1999, has a legislative authorization to assist persons 19 years of age and older in these circumstances. Working closely with the Department of Corrections, since January 2015 the Clearinghouse has provided critical resources to many reentrants that have sustained them in their communities. This program has completed 25,000 phone calls with reentrants, assisted 15,000 individuals, and achieved a recidivism rate of under 3%.

State Plan on Aging Development

Strategic Planning and Initial Steps

State plan development began in mid-2019 when senior department leadership gathered for a strategic planning meeting to reassess the department's mission and to create a vision and core values statement that aligned with our direction. During this effort, we added the opening statement to our core values, "With older adults at the center of everything we do, we are guided by these core values." These watchwords consistently kept the development of this plan focused on older adults as our most important consideration.

Upon release of ACL's state plan guidance in October 2019, we began to consider how programs and initiatives we had in place and those we were considering over the next several years aligned with ACL's four focus areas. This led to a natural emergence of the five overarching goals being pursued through 2024.

Concurrent to the development of our goals, we also began to share information with our key stakeholders including the PCoA, who are key partners in ensuring our plan meets the needs of older adults in every community throughout the commonwealth. We also began communicating with our network of AAAs about our intended development process, as well as the type and scope of guidance they could expect from the department for their four-year area plans.

It was very important to our leadership team that this process remain transparent, so wherever possible, we shared information with stakeholders. The ACL guidance was shared with the PCoA, AAAs, PA LTCC and others, for example. As each step of our internal process was completed, information was shared, and feedback welcomed.

In late 2019, the entire PDA team gathered for an all-staff meeting, part of which was dedicated to reviewing the 2016-2020 State Plan on Aging and initiating objective and strategy development for this plan. It was important to assess ourselves on progress made on that plan, as well as the mechanics of it, to determine how this plan could be developed to allow us to clearly demonstrate our results to stakeholders, older adults and their caregivers, our network, legislators and the public. We also want to ensure that we could adequately hold ourselves accountable to the actions set forth in this plan.

Needs Assessment

In June 2020, the department conducted a needs assessment by using a survey available online or by phone. The PA State Plan on Aging 2020-2024 Community and Stakeholder Survey was available on the PDA website, through a direct hyperlink, or could be completed by phone, and was available in English and Spanish.

We relied on and appreciated the support of the PCoA, AARP Pennsylvania, the Pennsylvania Commission on LGBTQ Affairs and the Pennsylvania Commission on Latino Affairs as well as many other commissions and stakeholders, to assist in getting the survey press release distributed to encourage participation. We also reached out directly to many community organizations to ask for participation and shared several different versions of culturally affirming marketing materials with a direct link to the survey.

In the survey, we sought to gauge public awareness of aging services and how to access them, including protective services. We also asked respondents to rate factors important to age-friendly communities over the next five years, including what was most important. Finally, we asked respondents to consider the next 10 years and beyond and freely share thoughts on what would be needed to maintain age-friendly communities in the future.

The survey was open for nearly three weeks and we were pleased to receive 5,599 responses covering all 67 counties in the commonwealth. The survey was open to all adults 18 years and older; however nearly 4,200 or 75% of respondents were 60 years old and older. The response by race and ethnicity closely mirrored that of the current older adult population in the state: American Indian or Alaska Native .6%, Asian .9%, Black or African American 6.6%, Hispanic or Latino 2.7%, Native Hawaiian or other Pacific Islander .05%, Other 1.9%, White 89%.

We also heard from several stakeholder groups whose unique needs assisted in informing this plan. From caregivers to veterans, people living with disabilities, grandparents raising grandchildren, LGBTQ older adults and more; we heard from Pennsylvanians who shared their opinions, concerns and hopes for how they will age in our state. Feedback from some of these groups was used throughout the plan to further support our actions over this planning period.

Key takeaways from the survey included our need to ensure older adults throughout Pennsylvania are better aware of the services available and how to access them, including protective services.

Respondents told us that over the next five years (2020-2025) and beyond, the following six factors are absolutely critical to age-friendly communities:

- Affordable prescription medications (67.9%)
- Access to in-home care & services (51%)
- Available/affordable housing options (45.6%)
- Available/affordable transportation (43%)
- Dementia-capable/ dementia-friendly communities (40.5%)
- Access to mental health services (40.2%)

We also asked survey participants to choose the one factor they believe to be the most critical to age-friendly communities, and access to in-home care and services came in at the top, followed closely by accessible/affordable housing and affordable prescription medications. Interestingly, the next closest factor considered to be most important after these three was the opportunity to make meaningful connections with others.

Finally, the survey asked respondents to share what innovations they felt Pennsylvania needed to meet the needs of our growing and diversifying 60+ population in the next 10-20 years. Overwhelmingly, Pennsylvanians told us about the need to advance technologies that could help older residents. Broad-band access in every community in the commonwealth could allow for virtual senior centers, telehealth, telemedicine and mental healthcare, remote home monitoring and other services not available in many areas, especially rural communities and for those living in poverty. We also heard about the need for innovations such as drone and robotic technologies, driverless vehicles and more innovations in housing for older adults.

The survey validated the department's work and assisted in ensuring our strategies addressed concerns of older adults and their caregivers. Some actions were developed in direct response to what we heard on the survey. In addition, it gave us an opportunity to hear what we need to consider in our strategies beyond the current planning period.

Statewide Feedback & Virtual Community Conversation

In July 2020, the department held two Statewide Virtual Community Conversations to formally present the State Plan draft and to hear from stakeholders, advocates, older adults and caregivers. Online meetings, which could be joined by tablet, computer or telephone, were held in lieu of in-person public hearings due to the social-distancing requirements of the COVID-19 pandemic and for the safety of all those who might want to attend. Community conversation testimony, as well as participant feedback submitted during the conversation, was used to ensure plan goals, objectives, strategies and actions met with the needs of older adults and make adjustments where we felt as though we could better align with what we were hearing from stakeholders.

The first Community Conversation was held specifically for members of the five regional councils of the PCoA as a follow-up to a formal presentation of the plan given to the statewide council a month earlier. Prior to the pandemic, our in-person conversations would have been held in the regions represented by these dedicated council members, and they were instrumental in the planning of these events before the department elected the virtual format ultimately used. Nearly half of the 60 members of the five regional councils participated in the conversation. The department welcomed comments and recommendations for the plan shared by the PCoA following their review of the draft.

The second Community Conversation was statewide, open to the public, and was well attended with over 200 people from across the commonwealth participating virtually either online or by phone. Participants were required to register in advance and could request time to present public testimony. In all, eight stakeholders, advocates and community members presented testimony on a variety of topics. All the valuable testimony was considered in furthering the development of a responsive state plan. Participants in the Community Conversation were also given the opportunity to submit questions about the plan, which were answered during the event.

LGBTQ Aging in PA Statewide Virtual Town Hall Meeting

In addition to the two virtual Community Conversations, the department hosted a statewide LGBTQ Aging in PA Virtual Town Hall with the Secretary of Aging. This was a follow up to the work done by the department on LGBTQ aging issues since it hosted a LGBTQ Aging Summit in 2018. Over 250 people from the LGBTQ community, allies, service providers, AAAs, stakeholders, advocates and others joined in the dialogue. Twelve stakeholders and advocates from the LGBTQ community, and allies shared testimony on issues important to LGBTQ older adults, several of which impacted the state plan.

Draft Posted for Public Comment

During July 2020, the draft State Plan on Aging was posted to the department's website where stakeholders and the public were able to view specific goals, objectives and strategies of the plan as well as the action steps and measures the department would be using to ensure our accountability to the plan. Those who desired could also offer feedback on the plan through a link to an open text survey which was available throughout the two-week public comment period. We received several feedback submissions, many of them affirming the actions set forth in the draft. Other feedback included wonderful suggestions that helped us be more thorough in our explanations and develop a plan that more fully meets the needs of older adults in the commonwealth.

Stakeholder Recommendations

In addition to the above discussed methods for gathering state plan input, the department also encouraged advocates, stakeholders and even other state agencies to share recommendations to help inform the vision and direction of the plan. The aging workgroup of the Commission on LGBTQ Affairs conducted its own statewide survey on issues of importance to LGBTQ older adults and based on those findings, submitted formal recommendations to the Secretary of Aging. We also received recommendations from the Department of Military and Veterans Affairs (DMVA), with whom the department already meets regularly to ensure we meet the needs of older and disabled veterans. We found these recommendations and others received to be indispensable when creating a plan that spoke to the needs of specific stakeholder groups.

State Plan Quality Assurance

PDA is committed to ensuring continuous quality improvement of all aging programs, as well as continued progress on the action steps and timelines set forth in this plan. PDA regularly completes quality assurance monitoring on programs and services delivered by AAAs. These monitoring efforts are followed up by remediations, technical assistance and corrective action plans that assist the AAA in ensuring compliance with policy and regulations. AAAs are similarly required to complete quality assurance monitoring on vendors with whom they contract to provide services. Further, PDA is rigorously working with AAAs to ensure data integrity by working through data irregularities with exception reporting. Benchmark and other reports assist the department in determining if a AAA is in need of programmatic guidance. It also assists in crafting more specific program directives and technical assistance documents to ensure better accountability, which we also require of ourselves and AAAs in the four-year plan.

One of the department's core values is that we hold ourselves and partners accountable for results, and for a strategic plan that stretches over four years, this value couldn't be more critical. Every quarter throughout the plan period, the department leadership reviews a reporting dashboard of the actions laid out in the plan to ensure adherence to targeted benchmarks, monitor progress made and adjust, if necessary. If more frequent monitoring is necessary, PDA leadership will consider what adjustments are needed to maintain meaningful progress while keeping the end goal a priority.

We ensure transparency of our progress by posting results of specific goals to a simple dashboard when milestones are reached, allowing stakeholders and the public to see progress made on the plan. In addition, the department makes routine periodic updates on plan progress to the PCoA. Throughout the state plan period, the department makes data-informed decisions to ensure the actions remain viable and on course to meet target outcomes.

Specific to AAAs, the department also has a critical role in monitoring and follow-up of area plans. Each AAA has outcomes and performance measures detailed in their Area Plan and is required to report to PDA on progress achieved in reaching their goals, objectives and strategies throughout the four-year plan period.

PDA Goals, Objectives & Strategies

PDA wants to ensure steady progress toward the five main goals introduced in the executive summary of this plan. The PDA management team developed goals, objectives and strategies for the plan, keeping in mind the need to continually improve and innovate, expand our capacity, serve a diverse commonwealth and ensure consistent program compliance.

Elements in support of the objectives and strategies are woven throughout the plan; however, the heart of the work to reach the goals comes in the action steps outlined in the plan. While the goals demonstrate our alignment to the ACL focus areas and our own mission and vision, the actions are a subset of each objective and strategy.

The following pages contain details of the goals, objectives and strategies for the 2020-2024 planning period. Keeping older adults at the center of everything we do, our efforts focus on furthering all aspects of this plan, with adjustments as needed, to improve lives.

ACL Older Americans Act Core Programs Focus Area

Goal One: Strengthen aging network's capacity, promote innovation and best practices, and build efficiencies to respond to the growing and diversifying aging population.

Objectives:

- Leverage technology to improve quality and efficiency of aging services network.
- Increase the department's capacity to serve older adults through strategic and meaningful partnerships and collaborations.
- Ensure OAA programs are reaching diverse, LEP and socially isolated older adults, including LGBT older adults & those living with a disability.
- Help older adults achieve better quality of life by ensuring those who seek assistance are connected to supportive programs and services.
- Support families and friends who are caregivers to enable them to thrive in their caregiving roles.

Goal Two: Improve services for older adults and the ability to advocate for them by using evidence-informed planning, committing to data integrity and being accountable for results.

Objectives:

- Ensure excellence in service delivery through use of data and analytics to assess the outcomes, quality and value of services provided to older adults.
- Ensure that data capture is efficient, compliant, and provides meaningful information and knowledge.

ACL Discretionary Grants & Other Funding Sources Focus Area

Goal Three: Establish and enhance efforts to support healthy living, active engagement and a sense of community for all older Pennsylvanians.

Objectives:

- Ensure a network of age and dementia-friendly providers and communities throughout Pennsylvania.
- Advance efforts to reduce stigma associated with mental health disorders and connect older adults with mental healthcare resources.
- Expand the availability and use of programs that reduce social isolation.
- Promote engagement in healthy aging, nutrition, education and prevention programs.

ACL Participant-Directed/Person-Centered Planning Focus Area

Goal Four: Emphasize a citizen-first culture that provides outreach, embraces diversity, and honors individual choice.

Objectives:

- Ensure aging services information and resources are accessible, inclusive, consistent and available through a variety of sources.
- Build a workforce that prioritizes and is responsive to the needs of older Pennsylvanians by listening, being inclusive, having empathy and respecting individual choice.

ACL Elder Justice Focus Area

Goal Five: Advocate for the rights of older adults and ensure their safety and dignity by raising awareness of and responding effectively to incidences of abuse, injury, exploitation, violence and neglect.

Objectives:

- Increase effectiveness in responding to elder abuse and protecting older adults through expanded outreach, enhanced training, innovative practices and strategic collaborations.
- Increase capacity and expertise in the ability to investigate and resolve allegations of financial exploitation.
- Equip older adults, their loved ones, advocates and stakeholders with information needed to identify and/or prevent abuse, neglect and exploitation, and support them in their ability to exercise their full rights.

Pennsylvania State Plan on Aging 2020 – 2024 Goals, Objectives, Strategies, Actions, Measures

ACL Older Americans Act Core Programs Focus Area

Goal One: Strengthen aging network’s capacity, promote innovation, and best practices, and build efficiencies to respond to the growing and diversifying aging population.

Objective #1: Leverage technology to improve quality and efficiency of aging services network.

Strategies:

1. Enhance user and consumer experience by creating efficiencies through technology.

Actions	Goals/Measures	Target Dates
Develop E-grants technology to allow grant applications to be submitted and processed electronically expediting financial support for senior community centers for capital improvements and program enhancements that benefit seniors.	Implement new E-grant system and report on enhancements to grant process.	1st QTR 2021 Progress monitored quarterly on enhancements
Enroll PDA & AAAs with one of Pennsylvania’s health information exchanges to leverage health and social services data in serving seniors and improve financial and resource management throughout aging network.	PDA and 40% of AAAs enrolled year one, remaining AAAs enrolled year two	Complete by end of FFY 21-22
Develop, using discretionary grant funding, and launch public-facing report of need (RON) self-reporting tool, on PDA website to improve access and increase reporting of elder abuse.	Implement public-facing RON self-reporting tool and use first year statistics as baseline to set future goals for years 2-4	Implementation date: TBD
Expand PACE iDashboard capacity to interface with AAA network to improve timeliness, follow-up and accountability on Protective Service’s case management for older Pennsylvanians.	Implement protective services dashboard interface	Implementation date: TBD
Develop and launch interactive dashboards to effectively present ombudsman and Pennsylvania Empowered Expert Residents (PEER) program data.	Data collection will be more efficient and accurate as data will be provided in single report rather than compiling 53 reports. PEER data will be accurately captured to reflect program impact on LTC facility residents’ quality of care and quality of life.	Implementation date: TBD

Update department website to improve readability and user experience for all, including differently abled people and improve access to information about aging services.	Implement web-based improvement quality initiatives that enhance user experience	Spring 2021 and ongoing
2. Explore and develop avenues to use virtual programming to serve more people, including those who are isolated.		
Actions	Goals/Measures	Target Dates
Pilot and implement technology recommendations of the PA Council on Aging presented as part of their research on social isolation.	PCoA will pilot technology assistance with its members.	October 2020
Create safe and effective telehealth and virtual communication systems for consumers of long-term care and assure technology is a resource for long-term care residents of all ages and all abilities.	Establish a workgroup of residents in LTC facilities, Tech Owl, the Office of the LTC Ombudsman, Local Ombudsmen Entities, the Department of Health, the Department of Human Services, along with other private and public partners (to be determined) to create a technology lending library, adaptive devices and technical assistance to be provided/available for all LTC ombudsmen to effectively and consistently schedule virtual visits with 100% of LTC facility residents. Increase technology utilization in 25% increments each fiscal year.	October 2020 and ongoing

Objective #2: Increase the Department’s capacity to serve older adults through strategic and meaningful partnerships and collaborations.

Strategies:

1. Expand partnerships and enhance existing collaborations to grow the aging network’s capacity to deliver services.

Actions	Goals/Measures	Target Dates
Local SHIPs will continue to collaborate with businesses on Medicare education for those turning 65 or nearing retirement.	Add 20 additional businesses statewide each year. Develop a virtual presentation to support this effort.	July 2020 – June 2022
Work with formal partners and the Alzheimer’s Disease and Related Disorders (ADRD) Task Force to advance the goals and objectives of the PA ADRD State Plan.	Implement 2 strategies in the ADRD State Plan per year.	Measured annually and progress monitored quarterly through 2024
Develop programming with state university system to conduct research, expand capacity to deliver services and promote careers in aging.	Number of partnership and summary of success compared to agreed to objectives for each partnership.	August 2020 and ongoing
Collaborate with local, state, and federal agencies to leverage housing resources for older adults.	Identify 2 new collaborative housing partnerships or resources per year.	Measured annually and progress monitored quarterly through 2024
PA Link will continue to collaborate with home and community-based services resource partners and build upon the PA Link network.	Increase the PA Link statewide resource network by 20 partners per year.	Measured quarterly through 2024

<p>2. Build and strengthen partnerships with organizations representing diverse or isolated older adults (culture/race/ethnicity/LGBTQ/disability/rural) to conduct more effective outreach in these communities.</p>		
Actions	Goals/Measures	Target Dates
Local SHIPs will continue to build and/or strengthen partnerships with government agencies and local community partnerships to help educate Medicare beneficiaries.	Add 5 additional government/community partnerships statewide each year.	July 2020 – June 2024
Local SHIPs will continue to develop and/or build partnerships with various organizations/foundations to disseminate Extra Help and MSP outreach materials.	Add 5 additional government/community partnerships statewide each year.	July 2020 – June 2024
PA Link will continue to provide education and training for partners and organizations on topics related to home and community based services.	Facilitate PA Link Monthly Webinars to statewide partners - 12 each year	Measured quarterly through 2024
<p>Objective #3: Ensure OAA programs are reaching diverse, LEP and socially isolated older adults, including LGBTQ older adults & those living with a disability.</p>		
<p>Strategies:</p>		
<p>1. Improve marketing and outreach materials directed at underserved communities.</p>		
Actions	Goals/Measures	Target Dates
Collaborate with the Office for the Deaf and Hard of Hearing to deploy Deaf and/or Deaf/Blind optimally appropriate web-based PACE materials.	Measure website visits and satisfaction rates.	Measured quarterly through 2024
Disseminate culturally & linguistically appropriate PACE materials and deliver through trusted community organizations.	Measure effectiveness and rate of enrollment in underserved communities.	Measured quarterly through 2024
Update resident rights information and make available in targeted languages, MP3 audio, and large font editions.	Increase awareness of LTC facility Resident Rights information to a broader audience by providing a variety of methods in which to obtain the information and coordinating/branding with the Office of Advocacy and Reform.	Measured quarterly through 2024

Engage in volunteer recruitment from culturally diverse and LGBTQ communities.	Increase in the numbers of the culturally diverse and LGBTQ volunteers by 50%. Ombudsman staff will create a focus group with SAGE, RSVP and other LGBTQ stakeholders along with various local ombudsmen to create targeted volunteer recruitment platforms.	Measured annually through 2024
Continue to update and expand communication reach and offerings through various channels to help establish PDA and the aging network as an inclusive, empowering resource for a diverse audience of older adults and caregivers.	Measure number of communication channels utilized, number and demographics of consumers reached and effectiveness of effort.	October 2020 and ongoing
Expand distribution of PDA communications into underserved communities by partnering for distribution and making materials available in Spanish and other languages.	Measure number of communities and citizens reached, number and demographics consumers and effectiveness of effort.	October 2020 and ongoing
Diversify older adult resources and topics available through PDA's communications channels and publications, including the Benefits and Rights booklet, Inside Aging, and social media.	Measure number of communication efforts targeted at older adults in diverse communities.	October 2020 and ongoing

<p>2. Drive program engagement efforts to include diverse, LEP, socially isolated and LGBTQ older adults, veterans & older adults living with a disability.</p>		
Actions	Goals/Measures	Target Dates
Conduct PACE services enrollment outreach projects with trusted community organizations, counties, HIEs, health systems and community and advocacy organizations such as PASSI, LGBTQ organizations in Pittsburgh and Philadelphia, PA Assn. of Community Health Centers and the Consumer Health Coalition.	Enrollment in PACE and other benefits in diverse communities.	Measured quarterly through 2024
Ensure senior staff attendance at events supporting older adults held in diverse communities.	Measure number of events and participation rate.	October 2020 and ongoing
Engage in systems training and advocacy to promote person-centered models of long-term care.	State Office staff will research and provide training on newest person-centered care approaches/best practices to local ombudsman entities to engage in and improve systems advocacy with nursing facility staff when facilities are developing care plans for residents they serve.	Measured quarterly through 2024
Designate LGBTQ older adults as a population of “greatest social need” and ensure they are appropriately supported with OAA programs.	Issue policy statement, related communication	December 31, 2020
<p>Objective #4: Help older adults achieve better quality of life by ensuring those who seek assistance are connected to supportive programs and services.</p>		
<p>Strategies:</p>		
<p>1. Raise public awareness about all programs and services available through area agencies on aging and advocacy organizations.</p>		
Actions	Goals/Measures	Target Dates
Coordinate with the PA Libraries Association through their PA Forward Initiative to outreach PACE to libraries via social media.	Measure number of times PACE information is pushed out to social media via PA Forward and resulting enrollments	Measured quarterly through 2024

Create and implement effective social media campaigns through Facebook and Twitter to support the ombudsman function.	State Ombudsman staff will expand on current social media platforms that are in existence such as the Virtual Family Council and the Volunteer Facebook page.	October 2020 and ongoing
Develop joint communications and education efforts with advocates, courts, partners and stakeholders on services for older adults.	Measure number of joint communications and effectiveness of communications.	Spring 2021 and ongoing
Provide 'Benefits and Rights for Older Pennsylvanians' to the following veterans advocates: DMVA's Bureau of Veterans Programs, Initiatives, Reintegration and Outreach, Offices for County Directors of Veterans Affairs, VA Medical Centers, Vet Centers, Transition Assistance Advisors.	Annual distribution	Annually
2. Support employment opportunities for older adults through advocacy, training and on the job experience.		
Actions	Goals/Measures	Target Dates
Promote Senior Community Service Employment Program (SCSEP) within senior community centers through distribution of electronic marketing materials.	100% distribution to senior community centers	Annual through 2024
Develop an outreach effort highlighting the need and value of older adults' life experience in work and through volunteer opportunities.	Develop partnerships to identify key opportunities, pathways and possibilities; develop funding and marketing plan.	Fall 2021
	Produce and launch campaign	Spring 2022

3. Leverage experience of older adults to connect them to meaningful volunteer opportunities that maximize their talent.		
Actions	Goals/Measures	Target Dates
Strengthen the areas of volunteer recruitment, retention, and recognition.	Provide 4 tools each year to strengthen volunteer programs.	Provide 4 volunteer tools each year October 2020 – September 2024
Enlist Statewide Volunteer Coordinators to identify and share volunteer program best practices.	Conduct 4 Quarterly Statewide Volunteer Coordinator meetings each year to discuss best practices.	Annual through September 2024
Provide an online resource tool to access volunteer program enhancement materials.	Build an online resource tool for the statewide volunteer coordinators consisting of 4 modules.	Online tool – January 2021
Objective #5: Support families and friends who are caregivers to enable them to thrive in their caregiving roles.		
Strategies:		
1. Enhance existing statewide marketing and outreach efforts to inform caregivers about benefits and services available through the caregiver support program, including respite assistance.		
Actions	Goals/Measures	Target Dates
Enhance statewide inclusive marketing/outreach efforts to expand participation in the Caregiver Support Program, especially for grandparents raising grandchildren.	Increase enrollment in the Caregiver Support Program by 5% over the next four years.	Measured annually through 2024
2. Advocate for the needs of caregivers, including grandfamilies, caregivers of those with dementia, and older caregivers of people living with disabilities.		
Actions	Goals/Measures	Target Dates
Support AAAs in their collaborations with existing providers and organizations in developing, delivering, and promoting training for family and volunteer caregivers.	Each AAA will provide two trainings per year.	Measured annually and progress monitored quarterly through 2024

Advocate for legislative changes to improve access to and utilization of the Caregiver Support Program.	Enactment and implementation of legislation	By December 2023
Goal Two: Improve services for older adults and the ability to advocate for them by using evidence-informed planning, committing to data integrity and being accountable for results.		
Objective #1: Ensure excellence in service delivery through use of data and analytics to assess the outcomes, quality and value of services provided to older adults.		
Strategies:		
1. Use data to tell the story of our success in reaching target communities.		
Actions	Goals/Measures	Target Dates
Evaluate the value and impact of PACE and other PDA programs on the health and well-being of program enrollees by applying evidence-based research methods.	Design and conduct research to complete evaluation.	June 30, 2021
Develop reporting that clearly measures the reach of our programs into diverse communities in order to ensure OAA services are reaching target of greatest economic and social needs population.	Create fields in state system of data collection to reflect the diversity of participants in Aging programs. Create standard tracking reports based on new fields.	Develop and implement new fields and new reports by December 31, 2021.
2. Identify and analyze data on at-risk older adults and develop interventions to mitigate risk.		
Actions	Goals/Measures	Target Dates
Enhance file-matching system that uses existing enrollment files from partners, such as community health centers and health information exchanges, to target outreach for PACE and other federal and state benefits based on discharge and patient level exchange data.	Evaluate new applications and enrollments and measure value.	Annually through 2024
Develop reporting method to identify consumers at risk for social isolation and develop interventions that can be offered and customized as part of care planning in order to improve the well-being of older adults.	Development of reporting process for social isolation risk and related procedures to better support consumers using care management and ombudsman data	Measured quarterly through 2024

Objective #2: Ensure that data capture is efficient, compliant, and provides meaningful information and knowledge.		
Strategies:		
1. Collect data necessary to ensure our effectiveness in reaching target communities.		
Actions	Goals/Measures	Target Dates
Develop, offer training on and implement method to collect SOGI data within state system of data collection.	Create new fields in case management database to collect SOGI data and develop relevant reporting.	Develop and implement new fields in case management database and issue new reports by October 1, 2021.
2. Ensure consumer engagement instruments are efficient, thorough, culturally competent and gather necessary information.		
Actions	Goals/Measures	Target Dates
Redesign PACE Program's "PACE Cares" website and program materials to align with web-based accessibility guidance provided by the PA Office of Vocational Rehabilitation.	Completion and implementation of redesign	4th QTR 2020
Review and update assessment tools (NAT, CAT, NAT-E) to ensure cultural competence and efficiency of data collection.	Establish workgroup to review, update, and publish updated Assessment Policy Chapter and related assessment tools.	1 st QTR 2022 update 3 rd QTR 2022 publish

ACL Discretionary Grants & Other Funding Sources Focus Area

Goal Three: Establish and enhance efforts to support healthy living, active engagement and a sense of community for all older Pennsylvanians.

Objective #1: Ensure a network of age and dementia-friendly providers and communities throughout Pennsylvania.

Strategies:

1. Advance efforts to make Pennsylvania’s communities age-friendly for all older adults and respectful of their unique needs.

Actions	Goals/Measures	Target Dates
In conjunction with the Alzheimer’s Association, provide training to care managers and person-centered counselors to effectively work with persons living with ADRD.	Develop training and ensure all current AAA Care Managers and Person-Centered Counselors are trained. All new staff trained within first year of employment.	Measured quarterly through 2024
Provide Dementia Friends Information Sessions to AAAs, senior center staff, and various community members/entities.	Conduct 50 Information Sessions	December 2021
Provide Dementia Champion training to AAAs, senior center staff, and various community members/entities	Conduct 30 Training sessions	December 2021
Translate Dementia Friends/Champions materials into additional languages to recruit Champions from various cultural and ethnic backgrounds.	Materials translated and distributed to diverse partners and communities	December 2021
Develop partnership with Penn State College of Nursing to expand and promote age-friendly care to a broader range of providers of services to older adults, in order to provide more age-friendly care that more effectively serves older adults.	Development of program and measure of providers receiving training and effectiveness of program.	Measured quarterly through 2024
2. Advocate for and expand existing models of innovative housing that allow older adults and individuals with disabilities to age in place.		
Actions	Goals/Measures	Target Dates
Expand innovative housing models to additional counties throughout the commonwealth and strive for inclusivity in new models	Expand housing initiatives to 8 additional counties.	December 2023

Launch media campaign to build awareness and create accompanying earned media to tell success stories and build momentum for program expansion.	Launch campaign and measure effectiveness.	Fall 2021
Objective #2: Advance efforts to reduce stigma associated with mental health disorders and connect older adults with mental healthcare resources.		
Strategies:		
1. Raise awareness about mental health issues affecting older adults and ensure our network is properly leveraged to make referrals to mental healthcare providers.		
Actions	Goals/Measures	Target Dates
Educate AAAs regarding county-based cross-system protocols to better respond to mental health crises involving older adults.	1 education session provided to AAAs per year	Measured annually and progress monitored quarterly through 2024
Partner with Department of Drug and Alcohol Programs (DDAP) and Single County Authorities to develop awareness and education partnership on older adults and substance use disorder.	Develop action plan in conjunction with partners and deploy programming.	April 1, 2021 October 1, 2021
Objective #3: Expand the availability and use of programs that reduce social isolation.		
Strategies:		
1. Expand participation in programs that help reduce social isolation.		
Actions	Goals/Measures	Target Dates
Encourage innovation in the function, form and operation of senior community centers to improve participation and allow more older adults to find meaningful activities and connections.	Highlight 2 innovative best practices with the senior center network annually and measure improvements in participation levels. Interview new center participants on their satisfaction with programs and use first year as baseline for comparison to future year results.	Measured annually and progress monitored quarterly through 2024

Develop partnership program with universities that engages students and older adults at risk for social isolation in supportive projects that are meaningful to both.	Onboard universities and older adults beginning fall 2020 with a goal of 5 university partnerships by 2022/23 academic year.	Measured quarterly through 2023
Objective #4: Promote engagement in healthy aging, nutrition, education and prevention programs.		
Strategies:		
1. Increase the number of workshops and participants in evidence-based health & wellness programs in communities of greatest economic need and/or greatest social need.		
Actions	Goals/Measures	Target Dates
Increase number of evidence-based program (EBP) workshops in rural and/or medically underserved areas.	5% increase in the number of EBP workshops conducted in rural counties over baseline year of SFY 2020-2021 5% increase in the number of workshops conducted in medically underserved counties over baseline year of SFY 2020-2021	Measure percent increase of EBP workshops in rural counties and in medically underserved counties from baseline by SFY 2023-2024.
Increase number of EBP participants with a focus on minority and low-income populations.	5% increase in number of low-income participants in EBP workshops over baseline year of SFY 2020-2021 5% increase in number of minority participants in EBP workshops over baseline year of SFY 2020-2021.	Measure percent increase of low-income and minority participants in EBP workshops from baseline by SFY 2023-2024.
Provide nutrition education materials to AAAs for congregate and In-Home meal consumers that reduces food insecurity for older adults in Pennsylvania.	Obtain and provide nutrition education materials in other languages 4 times per year.	Measured quarterly through 2024

2. Improve health & well-being by educating and enrolling older adults in the best Medicare, prescription drug, and other benefits appropriate for their needs that can help improve their health outcomes.

Actions	Goals/Measures	Target Dates
Coordinate with APPRISE to obtain data needed to focus outreach on the Medicare beneficiaries who are not enrolled in Part D and Low Income Subsidy.	Obtain data, conduct outreach and measure enrollment results.	Measured quarterly through 2024

ACL Participant-Directed/Person-Centered Planning Focus Area

Goal Four: Emphasize a citizen-first culture that provides outreach, embraces diversity, and honors individual choice.

Objective #1: Ensure aging services information and resources are accessible, inclusive, consistent and available through a variety of sources.

Strategies:

1. Improve quality and availability of information about aging services.

Actions	Goals/Measures	Target Dates
Develop and disseminate informational brochures/flyers specific to Medicare Part B and D penalties and how to avoid the penalties, including a brochure/flyer for those who do not take medications. Ensure these materials are available electronically and distributed to senior centers for print on demand for congregate meal consumers.	Develop brochure/flyers first year; disseminate information Years 2–4	Develop brochure/flyer by June 30, 2021. Disseminate brochure/flyer July 2021-June 2024.
Local State Health Insurance Programs (SHIPs) continue to host “Medicare 101” events with an emphasis on Medicare enrollment periods and penalties.	Add 20 additional Medicare 101 presentations each year statewide. Develop a virtual presentation to support this effort.	July 2020-June 2024
Issue updated Policy Chapters and Aging Program Directives to the Aging Network.	Issue Care Management, Nutrition, Domiciliary Care, Assessment, and Senior Center Policy Chapters and provide training to the Aging Network.	Measured annually and progress monitored quarterly through 2024

Objective #2: Build a workforce that prioritizes and is responsive to the needs of older Pennsylvanians by listening, being inclusive, having empathy and respecting individual choice.

Strategies:

1. Provide services to older Pennsylvanians in the manner they prefer by exercising individualized and person-centered planning.

Actions	Goals/Measures	Target Dates
Provide ongoing training to ADRC counselors on person-centered planning to empower older adults and persons living with disabilities to exercise self-determination and make decisions on their own behalf across the spectrum of long-term care services to ensure their satisfaction with service and personal ownership of planning process.	100% counselors trained	Measured quarterly through 2024
As part of the ADRC grant, provide person-centered planning materials, including access information to ADRC person-centered counselors to senior center directors to improve access to person-centered planning across the spectrum of long-term care services, including home, community and institutional settings.	Measure referrals from senior centers, using first year as established baseline.	Measured quarterly through 2024
Provide person-centered training to volunteers and staff who serve as long-term care ombudsmen to ensure person-centered care to residents of long-term care facilities across the commonwealth.	100% of ombudsmen trained	Measured quarterly through 2022
Enhance and expand assistance and placement services for Department of Corrections reentrants through the Patient Assistance Program Clearinghouse, particularly for 'early release' reentrants.	Count recipients and identify specific benefits received.	Measured quarterly through 2024
Develop assistance and placement services for Deaf and Hard of Hearing individuals through the Patient Assistance Program Clearinghouse.	Count recipients and identify specific benefits received. Use first year as baseline for future measures.	Measured quarterly through 2024
Work with Office of Advocacy and Reform to provide trauma-informed training to AAA network and key stakeholders. Incentivize continued efforts to achieve elevated trauma informed requirements.	100% of AAA network trained and progress tracked on effort to achieve higher levels on trauma continuum	Network trained by June 30, 2021 and progress tracked annually through 2024

2. Educate Department of Aging, AAA staff and partners on the unique needs of diverse older adults, and provide training on cultural competence, implicit bias and other relevant subjects to help strengthen responsiveness to older adults.		
Actions	Goals/Measures	Target Dates
Provide training to the Department, AAA Network, and partners on cultural competence, implicit bias and other related subjects.	Measure number of participants, satisfaction level and outcomes.	October 2020 and ongoing
Ensure the Department and AAAs stay current on SAGECare LGBTQ cultural competency training.	Maintain Platinum Certification Level for PDA and AAAs complete Platinum Certification requirements.	Annually December 31, 2021
Expand SAGECare LGBTQ cultural competency training to make it part of training for senior center staff.	100% of centers certified	July 1, 2022

ACL Elder Justice Focus Area

Goal Five: Advocate for the rights of older adults and ensure their safety and dignity by raising awareness of and responding effectively to incidences of abuse, injury, exploitation, violence, and neglect.

Objective #1: Increase effectiveness in responding to elder abuse and protecting older adults through expanded outreach, enhanced training, innovative practices, and strategic collaborations.

Strategies:

1. Ensure Older Adult Protective Services program is enabled to meet the unique and complex needs of Pennsylvania seniors.

Actions	Goals/Measures	Target Dates
Update the Older Adults Protective Services Act and corresponding regulations in order to more effectively provide protective services to Pennsylvania older adults.	Communicate monthly with the General Assembly and stakeholders on necessary components to be included in the Older Adults Protective Services Act Have a bill pass both chambers of the General Assembly and be sent to the Governor's desk for approval. Update corresponding regulations to incorporate legislative updates.	Ongoing November 30, 2021 Spring 2023

2. Enhance virtual training curriculum for protective services workers.		
Actions	Goals/Measures	Target Dates
Develop and implement a standardized yet customizable and person-centered protective service care plan for protective services workers, in order to promote more self-determination for older adults receiving protective services.	New service plan tool developed, gather feedback from workers on usefulness and compare to prior care planning process	Fall 2021
Provide training to protective services staff on self-determination and least-restrictive service care planning.	Network trained on new least restrictive care planning	Spring 2022
3. Ensure required entities and public are accessing and completing mandatory reporter training.		
Actions	Goals/Measures	Target Dates
Provide outreach and education to the public, ombudsman program, legal assistance providers, law enforcement, healthcare and other providers regarding the availability of the on-line mandated reported training.	Conduct follow up on 6/15/20 public launch (World Elder Abuse Awareness Day) with annual updates on how many mandated reporters have taken the training.	June 2021, 2022, 2023, 2024
Monitor usage of the training and outreach to any groups of mandatory reporters identified as not accessing the training.	Follow-up with those identified as not accessing training	Measured quarterly through 2024
Objective #2: Increase capacity and expertise in the ability to investigate and resolve allegations of financial exploitation.		
Strategies:		
1. Implement recommendations of the 2020 Financial Exploitation Study.		
Actions	Goals/Measures	Target Dates
Implement annual training for PS Caseworkers regarding financial exploitation investigations in order to improve outcomes for older adults.	Implement training and measure effectiveness	1 st QTR 2021/2022
Develop a multidisciplinary workgroup with protective services, ombudsman, legal assistance, law enforcement, healthcare, financial institutions, other state government agencies and other stakeholders, regarding financial exploitation and implement recommendations of the workgroup.	Develop workgroup, implement recommendations and measure effectiveness of addressing financial exploitation issue.	Measured quarterly through 2024

2. Increase AAA network access to Certified Financial Examiner through statewide pilot program.		
Actions	Goals/Measures	Target Dates
Identify and implement ways for Certified Financial Examiner to assist AAAs that need assistance with financial exploitation cases.	Implement process to efficiently and cost effectively address the needs of AAAs.	Spring 2021
Outreach to those AAAs who could use assistance with exploitation cases and offer services of Certified Financial Examiner.	Follow-up system implemented	Summer 2021
Objective #3: Equip older adults, their loved ones, advocates and stakeholders with information needed to identify and/or prevent abuse, neglect and exploitation, and support them in their ability to exercise their full rights.		
Strategies:		
1. Implement new approaches to increase public awareness of elder abuse and how to report it.		
Actions	Goals/Measures	Target Dates
Collaborate with financial institutions or other organizations to educate the public regarding financial fraud, financial exploitation and guardianships of older adults.	5 new collaborations per year	Measured quarterly through 2024
2. Increase public awareness of elder rights programs including legal assistance and long-term care ombudsman.		
Actions	Goals/Measures	Target Dates
As part of the legal assistance grant, develop outreach and targeting strategies for the most vulnerable underserved older adults regarding legal rights and legal services available through Title IIIB Legal Assistance Programs in order to ensure underserved older adults have knowledge of and access to legal assistance and ensure outreach materials available through this grant are placed where benefitting older adults will reach them, such as senior centers serving target communities.	Develop and implement outreach strategy, track results of outreach, use year one results as baseline for future years. Develop and implement a plan to push outreach materials to senior centers serving target communities.	Spring 2021 Measured quarterly though 2024
Continue the expansion of the Ombudsman Office Pennsylvania Expert Empowered Resident (PEER) program.	Expand PEER program into all 67 counties in the commonwealth and increase the total number of PEER facilities by 20%.	Measured annually through 2024

Explore the expansion of Ombudsman advocacy services to home and community based consumers of long-term supports and services.	Expand HCBS/LTSS advocacy services beyond Allegheny County.	October 2021
Evaluate and develop recommendations of Ombudsman program organizational structure to improve efficiency and implement cost effective strategies.	Present recommendations including resources and level of effort required to support any proposed changes.	October 2020 – June 2021

Contact Information

Pennsylvania Department of Aging

717-783-1550

www.aging.pa.gov

Pennsylvania Association of Area Agencies on Aging

717-541-4214

www.p4a.org

Area Agencies on Aging

Adams County 1-800-548-3240 www.acofa.org	Allegheny County 412-350-4234 www.alleghenycounty.us/Human-Services/About/Offices/Area-Agency-on-Aging.aspx
Armstrong County 1-800-368-1066 www.co.armstrong.pa.us/services/aaa	Beaver County 1-888-548-2262 www.bcoa.us
Bedford County 1-800-892-7903 www.hbfaaa.org	Berks County 610-478-6500 www.berksaging.org
Blair County 1-800-245-3282 www.blairsenior.org	Bradford County 1-800-982-4346 www.bsstaaa.org
Bucks County 267-880-5700 www.buckscounty.org/government/humanservices.AAA	Butler County 1-888-367-2434 www.butlercountypa.gov/292/Area-Agency-on-Aging
Cambria County 1-844-242-8915 www.cambriacountypa.gov/area-agency-on-aging.aspx	Cameron County 1-800-776-2191 www.ohsaging.com
Carbon County 1-800-441-1315 www.carboncounty.com/index.php/2-uncategorised/44-agency-on-aging	Centre County 814-355-6716 www.centrecountypa.gov/342/Aging
Chester County 1-800-692-1100 www.chesco.org/aging	Clarion County 814-226-4640 www.clarionaging.com
Clearfield County 1-800-225-8571 www.ccaaa.net	Clinton County 570-601-9551 www.stepcorp.org

Columbia County 1-800-598-5001 www.cmaa15.org	Crawford County 1-800-321-1792 www.activeaging.org
Cumberland County 1-888-697-0371 x6110 www.ccpa.net/aging	Dauphin County 1-800-328-0058 www.dauphincounty.org/government/departments/area_agency_on_aging
Delaware County 1-800-416-4504 www.delcosa.org	Elk County 1-800-672-7145 www.ohsaging.com
Erie County 1-800-769-2436 www.gecac.org/work/aging	Fayette County 1-888-300-2704 www.swpa-aaa.org
Forest County 1-800-281-6545 www.experienceinc.org	Franklin County 1-800-642-6990 www.franklincounty.pa/gov/index.php?section=human-services_aging
Fulton County 1-800-892-7903 www.hbfaaa.org	Greene County 1-888-300-2704 www.swpa-aaa.org
Huntingdon County 1-800-892-7903 www.hbfaaa.org	Indiana County 724-349-4500 www.agingervicesinc.com
Jefferson County 1-800-852-8036 www.jcaaa.org	Juniata County 1-800-348-2277 www.mymjrsc.com
Lackawanna County 570-963-6740 www.lackawannacounty.org/index.php/departments_agencies/human-services/area-agency-on-aging	Lancaster County 1-800-801-3070 www.lancoaging.org
Lawrence County 724-658-3729 www.ccpgh.org/sslpage.aspx?pid=368	Lebanon County 717-273-9262 www.lebcounty.org/depts/AAA/pages/default.aspx
Lehigh County 610-782-3034 www.lehighcounty.org/Departments/Human-Services/Aging-and-Adult-Services	Luzerne County 570-822-1158 www.luzernecounty.org/847/Aging
Lycoming County 1-800-332-8555 www.stepcorp.org	McKean County 1-800-672-7145 www.ohsaging.com
Mercer County 1-800-570-6222 www.mercercountyaging.org	Mifflin County 1-800-348-2277 www.mymjrsc.com
Monroe County 1-800-498-0330 www.monroecountypa.gov/Dept/Aging/Pages/default.aspx	Montgomery County 610-278-3601 www.montcopa.org/148/Senior-Services

Montour County 1-800-598-5001 www.cmaa15.org	Northampton County 1-800-322-9269 www.northamptoncounty.org/HS/AGING/Pages/default.aspx
Northumberland County 1-877-622-2251 www.ncaging.org/Contact.asp	Perry County 1-866-926-5118 www.perryco.org/Pages/default.aspx
Philadelphia County 215-765-9000 www.pcacares.org	Pike County 1-800-233-8911 www.pikeaaa.org
Potter County 1-800-800-2560 www.pottercountyhumansvcs.org/post.php?pid=10	Schuylkill County 570-622-3103 www.schuylkillloss.org
Snyder County 1-800-533-1050 www.usaaa17.org	Somerset County 1-800-452-0825 www.somersetaaa.org
Sullivan County 1-800-982-4346 www.bsstaaa.org	Susquehanna County 1-800-982-4346 www.bsstaaa.org
Tioga County 1-800-982-4346 www.bsstaaa.org	Union County 1-800-533-1050 www.usaaa17.org
Venango County 1-866-452-4464 www.co.venango.pa.us	Warren County 1-800-281-6545 www.experienceinc.org
Washington County 1-888-300-2704 www.swpa-aaa.org	Wayne County 570-253-4262 aging/waynecountypa.gov/149/Area-Agency-on-Aging
Westmoreland County 1-800-442-8000 www.co.westmoreland.pa.us/397/Area-Agency-on-Aging	Wyoming County 570-822-1158 www.luzernecounty.org/847/Aging
York County 1-800-632-9073 www.ycaaa.org	

Aging and Disability Resource Centers (PA Link)

Statewide Toll Free: 800-753-8827

www.carelink.pa.gov

Service Area #1 Clarion, Crawford, Erie, Venango Warren-Forest Counties 814-336-1792 information@activeaging.org	Service Area #2 Butler, Lawrence, Mercer Counties 724-431-1218 bbuzzell@co.butler.pa.us
Service Area #3 Allegheny, Beaver, Washington-Fayette-Greene Counties 412-310-0961 MOLeary@classcommunity.org	Service Area #4 Cameron-Elk-McKean, Clearfield, Jefferson, Potter Counties 814-765-2696 abell@ccaaa.net
Service Area #5 Armstrong, Indiana, Westmoreland Counties 724-237-1242 palinkcoordinator5@gmail.com	Service Area #6 Blair, Cambria, Somerset, Huntingdon-Bedford-Fulton Counties 814-233-9206 palinkcoordinator6@gmail.com
Service Area #7 Bradford-Sullivan-Susquehanna-Tioga Counties 570-268-1246 kahall@bsstaaa.org	Service Area #8 Centre, Columbia-Montour, Lycoming-Clinton, Northumberland, Union-Snyder, Schuylkill Counties 570-428-3521 mbottorf2016@gmail.com
Service Area #9 Adams, Cumberland, Dauphin, Franklin, Mifflin- Juniata, Perry, York Counties 717-240-7888 vmonsted@ccpa.net	Service Area #10 Monroe, Pike, Wayne Counties 570-253-4262 JDoyle@waynecountypa.gov
Service Area #11 Carbon, Lackawanna, Luzerne-Wyoming Counties 610-392-4254 ccaging14@ptd.net	Service Area #12 Lehigh, Northampton Counties 610-782-3096 kimberlymelusky@lehighcounty.org
Service Area #13 Berks, Lancaster, Lebanon Counties 717-380-9714 blllink@mail.com	Service Area #14 Bucks, Chester, Delaware, Montgomery Counties 484-364-6981 buckschestermontgomerylink@aim.com Delaware: 610-490-1842 kingj@co.delaware.pa.us
Service Area #15 Philadelphia 215-765-9000 ext. 4116 Julie.mcnaire@pccares.org	

**The 2020-2024 PA State Plan on Aging was prepared by
the Pennsylvania Department of Aging.**

**Questions or feedback regarding the state plan should be directed to the
Pennsylvania Department of Aging at:**

**555 Walnut Street 5th Floor
Harrisburg, Pennsylvania 17101-1919**

www.aging.pa.gov



PENNSYLVANIA DEPARTMENT OF AGING