

Department of County Human Services

MULTNOMAH COUNTY OREGON

Aging and Disability Services Division

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March 3, 2010

Kathy Greenlee Assistant Secretary for Aging U.S. Administration on Aging Washington, DC 20201

Dear Secretary Greenlee:

Thank you for the opportunity to provide input on the Reauthorization of the Older Americans Act. I am the director of the Area Agency on Aging in Portland, Oregon where we have enjoyed the support and partnership from our County leaders, the largest city Portland, and three of the other smaller cities for the services delivered under the Older Americans Act. In addition to this support we have engaged thousands of hours of volunteer time in behalf of these services. The Older Americans Act in combination with these partnerships have improved the lives of seniors in our communities by helping them remain independent and free of institutional care in our area.

We are supportive of the changes made in the 2006 Reauthorization that are moving the aging network in the directions needed to support the independence of our rapidly aging population. The development of the Aging and Disability Resource Centers, evidenced based disease prevention and health promotion, programs that offer more choices to those at risk of nursing home placement and consumer directed care should be further developed and strengthened.

I recommend the following changes:

1. Planning to meet the unmet needs of older adults in our communities—we are beginning to experience the pressures of the growing aging population needing to serve more people without the commensurate funding to support that growing need. We are establishing wait lists for some services for the first time. It is important for the Administration on Aging to understand the extent of the unmet needs. The planning provisions should be amended to require specific information from each state about the degree to which the needs of the population are being met or not met as a part of the State Plan.



- 2. Strengthen the support services available for person-centered access to information by further clarifying the services available to older adults and adults with disabilities. Many within the Aging network already are serving people under 60 with disabilities under contracts and partnerships targeted for younger individuals with chronic conditions. And those with the designation as Aging and Disability Resource Centers have established networks and partnerships able to effectively serve younger people with disabilities. Language should be added that provides incentives to strengthen partnerships and collaborations that continue the access to information for all adults regardless of age needing long term services and supports.
- 3. Funding flexibility is needed to more easily build the home and community based services needed in local communities. The amendments should remove the restrictions within the titles for expending congregate vs. home delivered meals. It should also allow for cost sharing for certain services.
- 4. Services need to be strengthened for providing the critical services of information and assistance, healthy aging and disease prevention and home and community based services and supports. These functions can be improved by enhancing the capacity of the work force in providing these services. Training and technical assistance should be developed to continue development of these functions.
- 5. Home and community based services can be improved and expanded by engaging volunteers in providing supportive services for seniors. Older adults can be developed as helpful extenders in providing supportive services including health insurance counseling, health promotion and other supportive services that would benefit the ADRCs.

Sincerely,

Mary Shortall
Division Director