

COMMENTS FOR OAA LISTENING SESSION

IT IS AN HONOR TO SPEAK TODAY ABOUT THE FUTURE OF THE OLDER AMERICANS ACT—THE BEDROCK OF OUR NATION’S EXPANSIVE FEDERAL, STATE, REGIONAL AND LOCAL SYSTEM OF CONNECTING WITH THE NEEDS, INTERESTS, AND CONTRIBUTIONS OF OUR SENIORS AND AGING BOOMERS AND THEIR FAMILIES AND COMMUNITIES.

TO PREPARE FOR TODAY’S SESSION, THE NORTH CAROLINA DIVISION OF AGING AND ADULT SERVICES WORKED WITH NASUA TO SURVEY AREA AGENCIES ON AGING, LOCAL SERVICE PROVIDERS, SENIOR CENTERS, SENIOR ADVOCATES, CONSUMERS OF AGING SERVICES, STATE AND LOCAL GOVERNMENT OFFICIALS, AND EDUCATORS AND RESEACHERS TO GATHER THEIR VIEWS ABOUT THE REAUTHORIZATION OF THE OLDER AMERICANS ACT. NEARLY 250 PERSONS RESPONDED WITHIN A VERY SHORT TIME-FRAME, SHOWING GREAT INTEREST IN THE FUTURE OF THIS ACT.

WHILE I LOOK FORWARD TO SHARING A DETAILED REPORT OF THESE SURVEY RESULTS, I WILL HIGHLIGHT JUST A FEW AREAS.

- FIRST, MORE THAN 4 IN 10 OF THOSE FAMILIAR WITH THE ACT’S OBJECTIVES BELIEVE THEY NEED TO BE MODERNIZED. SOME WANT GREATER EMPHASIS ON ‘AGING’ AS A LIFELONG PROCESS. OTHERS

STRESS ELDER ABUSE ISSUES. OTHER AREAS OF EMPHASIS INCLUDE PERSON-CENTERED SERVICES, AND THE VALUE OF AGING AND DISABILITY RESOURCE CENTERS (OR ‘THE NO-WRONG DOOR’ COMMUNITY RESOURCE CONNECTIONS FOR AGING AND DISABILITIES AS WE CALL THEM IN NORTH CAROLINA).

- NEARLY A THIRD OF RESPONDENTS HAD SUGGESTIONS FOR STRENGTHENING THE NUTRITION PROGRAM. A MAJOR THEME, BESIDES THE NEED FOR ADDITIONAL FUNDING, IS MORE FLEXIBILITY IN THE FUNDING AND DELIVERY OF MEALS—WITH A SPECIAL EMPHASIS ON MEETING THE GROWING NEED FOR HOME-DELIVERED MEALS AND IN UPDATING CONGREGATE NUTRITION TO BE ATTRACTIVE TO BOOMERS AND RESPONSIVE TO AN INCREASINGLY DIVERSE POPULATION.

- FLEXIBILITY WAS AN OVERALL THEME—WITH NEARLY HALF OF RESPONDENTS FAVORING COMBINING ALL TITLE III FUNDING INTO ONE ALLOCATION TO MAXIMIZE FLEXIBILITY AT THE COMMUNITY LEVEL AND TO SUPPORT MORE PERSON-CENTERED SERVICES. WHILE ONLY 12% OPPOSED COMBINING TITLE III FUNDS, 4 IN 10 ARE UNSURE—SUGGESTING THE NEED FOR FURTHER STUDY OF THIS IMPORTANT POLICY ISSUE.

- MORE THAN A THIRD OF RESPONDENTS HAD SUGGESTIONS TO STRENGTHEN SENIOR CENTERS. NORTH CAROLINA’S COMMUNITIES HAVE MADE A MAJOR LONG-TERM INVESTMENT IN SENIOR CENTERS, AND WE ARE COMMITTED TO SEEING THEM REMAIN VIABLE AND ATTRACTIVE TO FUTURE SENIORS AND THE LARGER COMMUNITY. ONE RESPONDENT

NOTED THAT BECAUSE THEY ARE A SYSTEM OF SERVICES—THEY SHOULD HAVE THEIR OWN FUNDING IDENTITY AS WAS THE CASE IN THE 1970’S—WHICH SHOULD ALSO HELP FURTHER ADVANCE THE EVOLVING ADRC MOVEMENT.

- OTHER AREAS OF RECOMMENDATION INCLUDED IDEAS FOR STRENGTHENING THE FAMILY CAREGIVER SUPPORT PROGRAM, CONSUMER COST SHARING, THE LONG TERM CARE OMBUDSMAN PROGRAM, LEGAL SERVICES, ACTIVITIES TO PREVENT ELDER ABUSE/NEGLECT/EXPLOITATION, AND THE SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM.

- WHEN ASKED ABOUT THE EFFECTIVENESS OF THE FEDERAL DEMONSTRATION PROJECTS WITH WHICH NORTH CAROLINA HAS HAD EXPERIENCE—AT THE TOP OF THE LIST IS THE ALZHEIMER’S DISEASE DEMONSTRATION (WHAT WE CALL PROJECT C.A.R.E.—CAREGIVER ALTERNATIVES TO RUNNING ON EMPTY). MORE THAN HALF BELIEVE THAT THIS PROGRAM SHOULD BE MADE A PERMANENT PART OF THE OAA. THERE WAS ALSO STRONG SUPPORT FOR CHRONIC DISEASE SELF-MANAGEMENT (WHAT WE CALL ‘LIVING HEALTHY’) AND FOR ADRCs.

- WHEN WE ASKED ABOUT WHAT IMPROVEMENTS THE OAA NEEDS MOST—MORE THAN 8 IN 10 IDENTIFIED INCREASED FUNDING, AND MORE THAN 4 IN 10 STRESSED GREATER STATE FLEXIBILITY.

- SADLY, MORE THAN 8 IN 10 RESPONDENTS FEEL THAT WE ARE NOT PREPARED TO DEAL WITH THE AGE WAVE (AGING OF BABY

Dennis W. Streets, NC Division of Aging and Adult Services, February 25, 2010

BOOMERS)—ONLY 3% THINK WE ARE READY. BESIDES INCREASED FUNDING, NEARLY 6 IN 10 RESPONDENTS ADVOCATE INTRODUCING NEW GRANT INITIATIVES IN THE OAA TO TARGET BABY BOOMERS—WITH SOME CALLING FOR TURNING THE LONG-TERM CARE SYSTEM ON ITS HEAD WITH GREATER SUPPORT OF IN-HOME SERVICES, PERSON-CENTERED CARE, AND MORE HOME-LIKE SETTINGS FOR THOSE WHO CANNOT REMAIN AT HOME. STILL OTHERS QUESTION SUCH NEW INITIATIVES—AS ONE RESPONDENT PUTS IT, “DON’T SPEND MONEY TARGETING BOOMERS—THEY ARE THE ‘ME’ GENERATION—THEY WILL FIND US.” OBVIOUSLY THIS IS ANOTHER POLICY ISSUE WORTHY OF MORE DISCUSSION AND DEBATE.

I REALIZE THAT THIS IS JUST THE BEGINNING OF THE EFFORTS TO IDENTIFY AND PRIORITIZE THE MOST CRITICAL CHANGES TO STRENGTHEN THE OAA. THERE IS TREMENDOUS VARIANCE IN OPINIONS—FOR EXAMPLE, SOME ARGUE FOR RAISING THE ELIGIBILITY AGE TO 65 OR 75 GIVEN THE INCREASED LIFE EXPECTANCY AND IMPROVED HEALTH OF MANY; OTHERS PROMOTE DECREASING OR ELIMINATING THE AGE REQUIREMENT SO THAT YOUNGER ADULTS WITH DISABILITIES CAN BE ASSISTED TOO. INTERESTINGLY NEARLY HALF OF THE RESPONDENTS SUPPORT BROADENING THE SCOPE OF THE OAA AND THE WORK OF THE AOA TO INCLUDE PEOPLE WITH PHYSICAL DISABILITIES. STILL ABOUT 30% OPPOSE THIS.

I WILL CONCLUDE MY COMMENTS WITH THE RESPONSE TO ONE LAST QUESTION—WHEN GIVEN A CHOICE OF 16 POSSIBLE INITIATIVES IMPORTANT TO THE FUTURE SUPPORT OF OLDER NORTH CAROLINIANS THAT SHOULD BE ADDRESSED IN THE OAA REAUTHORIZATION—THE TOP FIVE ARE:

- (1) STRENGTHENING ADULT PROTECTIVE SERVICES (MENTIONED BY 79%)
- (2) COMMUNITY PLANNING FOR AN AGING POPULATION (78%)
- (3) LONG-TERM CARE OPTIONS/COUNSELING (68%)
- (4) GREATER ACCESS TO MENTAL HEALTH SERVICES (66%)
- (5) CONSUMER FRAUD PROTECTIONS (66%).

THANK FOR YOU LISTENING AND FOR YOUR LEADERSHIP AS WE BEGIN THE LONG AND VITAL PROCESS OF STRENGTHENING OUR FOUNDATION TO WEATHER FUTURE STORMS AND TO READY OURSELVES FOR THE PROMISING OPPORTUNITIES THAT LAY AHEAD.

2011 OLDER AMERICANS ACT REAUTHORIZATION

NORTH CAROLINA

Survey of Aging Network for input on
changes, suggestions, and recommendations
to the Older Americans Act

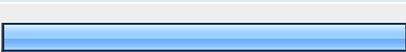
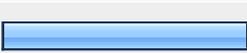
Results/Analysis

Conducted by NASUA through the direction of Dennis W. Streets

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

Please identify yourself by selecting the most appropriate box that best describes you and / or your affiliation:			
		Response Percent	Response Count
Area Agency on Aging	<input type="checkbox"/>	20.3%	50
Local Service Provider	<input type="checkbox"/>	19.5%	48
Senior Center	<input type="checkbox"/>	13.0%	32
Senior Advocate	<input type="checkbox"/>	12.2%	30
Consumer of Aging Services	<input type="checkbox"/>	2.8%	7
State Government	<input type="checkbox"/>	10.6%	26
Local Government	<input type="checkbox"/>	25.2%	62
Educator/Researcher	<input type="checkbox"/>	2.0%	5
		<i>answered question</i>	246
		<i>skipped question</i>	0

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

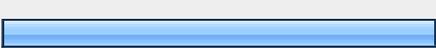
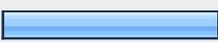
Are you familiar with the definitions referenced in the OAA?			
		Response Percent	Response Count
Yes		62.4%	111
No (Skip to question 3)		37.6%	67
		<i>answered question</i>	178
		<i>skipped question</i>	68

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

If you answered yes to question 1, how would you assess the definitions: (Check all that apply)			
		Response Percent	Response Count
The definitions used in the OAA remain appropriate		52.8%	56
Some definitions need to be added		34.0%	36
Definitions need to be deleted		6.6%	7
Don't know		10.4%	11
Other (Please specify any recommended changes to the objectives)		7.5%	8
		answered question	106
		skipped question	140

Other (Please specify any recommended changes to the objectives)		
1	They need to be reviewed and modified.	Feb 11, 2010 2:08 PM
2	Aging and Disability Resource Center	Feb 11, 2010 4:28 PM
3	Def. of ADRC as a covered service	Feb 11, 2010 4:55 PM
4	Compare and combine with other program definitions to better align services	Feb 12, 2010 3:51 PM
5	Some need to be changed	Feb 17, 2010 5:01 PM
6	Family Caregiver	Feb 17, 2010 7:48 PM
7	some need to be rewritten to be understandable by laymen	Feb 19, 2010 6:19 PM
8	Some need to be changed.	Feb 19, 2010 11:41 PM

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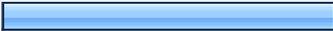
Are you familiar with the OAA Objectives?			Response Percent	Response Count
Yes			67.1%	116
No			32.9%	57
		<i>answered question</i>		173
		<i>skipped question</i>		73

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

If you answered yes to question 3, how would you assess the objectives: (Check all that apply)			
		Response Percent	Response Count
The objectives remain appropriate		41.3%	50
The objectives need to be modernized		42.1%	51
Objectives need to be added		15.7%	19
Objectives need to be deleted		3.3%	4
Don't know		9.1%	11
Please specify any recommended changes to the objectives		5.8%	7
answered question			121
skipped question			125

Please specify any recommended changes to the objectives		
1	Incorporate ADRC, Person centered hospital discharge planning	Feb 11, 2010 4:55 PM
2	More emphasis on addressing Elder Abuse issues	Feb 12, 2010 1:29 PM
3	More attention and care needs to be attributed to the older adults in need of care for them to remain at home. Often OAA expends and supports healthy older adults who can get out ad use their facilities. It is often the frail and more aged adults that need programs to help them to be as independent as possible in their own homes and avoid institutionalization for as long as possible.	Feb 15, 2010 5:58 PM
4	Aging is not confined to older adults. Life Course approach	Feb 16, 2010 12:52 PM
5	Bring into baby boomers meeds	Feb 16, 2010 2:44 PM
6	•Develop long-term plan to support State and local efforts in mental health services. Mental health services have deteriorated. LTC facilities have now taken on the role as service providers without needed training.	Feb 17, 2010 1:31 PM
7	Change the word "retirement" we are looking at old age regardless of working status in the OAA	Feb 19, 2010 11:41 PM

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Are you familiar with the National Elder Care Locator?			
		Response Percent	Response Count
Yes		51.4%	89
No (Skip other questions in this section)		48.6%	84
		<i>answered question</i>	173
		<i>skipped question</i>	73

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

Do you refer consumers to the Elder Care Locator?			Response Percent	Response Count
Yes			50.5%	50
No			49.5%	49
		<i>answered question</i>		99
		<i>skipped question</i>		147

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

Have you found the Elder Care Locator to be a valuable resource?			
		Response Percent	Response Count
Yes		54.8%	51
No		45.2%	42
		<i>answered question</i>	93
		<i>skipped question</i>	153

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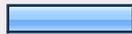
Please specify any suggestions for improving the Elder Care Locator initiative to enhance its value.		
		Response Count
		22
<i>answered question</i>		22
<i>skipped question</i>		224

Response Text		
1	State information is not always current or thorough	Feb 11, 2010 4:37 AM
2	Eldercare is on such a local level that it should be left at the community level.	Feb 11, 2010 2:08 PM
3	I could not access the previous suggestion box about title V as I think that needs to be revisited Income for the elderly now is higher than in the past and using the poverty level to assess the clients ia unrealistic as the poverty level stands now.	Feb 11, 2010 2:36 PM
4	Update it on a regular basis to ensure that all of its information is up-to-date and accurate.	Feb 11, 2010 6:42 PM
5	Let older people know that it exists. Even though I am a board member on the Council on Aging, I have never heard of the ECL.	Feb 12, 2010 4:57 PM
6	More training for staff	Feb 15, 2010 3:04 PM
7	It needs to be more comprehensive. I find it nothing more than a AAA Locator.	Feb 15, 2010 4:26 PM
8	I have found that the information is outdated. The names of the directors of the Senior Centers has changed and needs updating.	Feb 15, 2010 5:18 PM
9	I have no comments at this time	Feb 15, 2010 7:01 PM
10	making sure that all the main agencies within a community are utilizing this--more publicity.	Feb 16, 2010 1:03 PM
11	NA	Feb 16, 2010 2:45 PM
12	Rarely have opportunity or request to refer a consumer to some resource outside my state.	Feb 16, 2010 4:31 PM
13	was a big hype when it started but hear nothing now so don't think about it - the information is only good if current & with states having their own resource directory, why can't there be a uniformed marketing & updating effort -	Feb 17, 2010 1:55 AM
14	Better marketing strategies in order to reach more individuals.	Feb 17, 2010 1:32 PM
15	Increase awareness of tool in the general population	Feb 17, 2010 2:40 PM
16	Greater public awareness and education.	Feb 17, 2010 7:47 PM
17	I would rather refer to the AAA network	Feb 17, 2010 9:57 PM
18	They always refer people back to us, the AAA. They refer people to us that we do not have resources for. The AAA is their answer to everything.	Feb 18, 2010 4:40 PM
19	I do not necessarily receive feedback from individuals I refer there. Their website is very useful.	Feb 18, 2010 5:19 PM
20	Stronger confirmation of action taken to referring agency	Feb 19, 2010 3:42 PM
21	It's a wonderful resource.	Feb 19, 2010 11:35 PM

Response Text

22	Continue call routing to local AAA. It is great resource to make connections across State Lines. More funding for public awareness of elderlocator need to be available.	Feb 19, 2010 11:42 PM
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NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

Do you have suggestions to strengthen and/or improve Nutrition Services (congregate and home-delivered meals) that should be addressed in the OAA reauthorization process?			Response Percent	Response Count
Yes			31.1%	47
No (Skip to question 3)			49.7%	75
Not Sure (Skip to question 3)			19.2%	29
		<i>answered question</i>		151
		<i>skipped question</i>		95

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

If you answered yes to question 1, what are your specific suggestions?		
		Response Count
		47
	<i>answered question</i>	47
	<i>skipped question</i>	199

Response Text		
1	Increase Home Delivered Meal funding. The current congregate nutrition lobby has skewed the funding.	Feb 10, 2010 11:43 PM
2	Make meal tast better.	Feb 11, 2010 12:52 PM
3	Give communities more freedom to use funds as is appropriate for their community. Under current standards, end up serving tasteless food, and, as a result, we are losing clients. A block grant to communities that they can use as they wish would be more appropriate.	Feb 11, 2010 2:12 PM
4	More flexibility to meet modernize meal service, food selection and person-centered options.	Feb 11, 2010 2:35 PM
5	To have a variety of how food could be served i.e. Cafe style, all food groups offered without having to be taken on the plate to count, etc. Sometimes, a hearty salad with no fruit or bread would be the preference to the client. Recognizing the fact that the goal is to offer a five food group meal, but eliminating waste. The typical preplated congregate is a dying dinosaur for most.	Feb 11, 2010 2:49 PM
6	ADDITIONAL MEALS SHOULD BE PROVIDED FOR HOME & CONGREGATE MEALS	Feb 11, 2010 4:10 PM
7	Providing culturally/ethnic meals to ethnic/racial, LEP populations	Feb 11, 2010 4:39 PM
8	Allow home delivered meals to be delivered by paid staff or transportation service	Feb 11, 2010 4:58 PM
9	Maybe a stengthening of the qualifications for each service. A lot of gray areas.	Feb 11, 2010 6:59 PM
10	Icrease Funding	Feb 11, 2010 9:35 PM
11	improve nutrition/quality of foods	Feb 12, 2010 12:28 AM
12	Use more people who have to conduct community service, of course they would have to be prescreened, but they would be free.	Feb 12, 2010 12:45 PM
13	Request additional funding to increase participants.	Feb 12, 2010 2:55 PM
14	I think affordability is an issue with any seniors food program	Feb 12, 2010 4:13 PM
15	Provide more funding specifically to assist agencies reach more rural communities. HDM is needed in many rural areas, lack of volunteers and equipment are a barrier.	Feb 12, 2010 6:40 PM
16	NEED MORE MONIES AS THE PEOPLE ARE THERE BUT DUE TO NO MONEY THEY ARE LIMITED AS TO HOW MANY CAN BE SERVED	Feb 13, 2010 5:55 PM
17	Avoid the demeaning description of "congregate meal site." Improve quality of food servered.	Feb 15, 2010 3:08 PM
18	need to be able to have more sites, closer to where clients live	Feb 15, 2010 3:18 PM
19	More funds to make there more program and diversity in the services	Feb 15, 2010 3:19 PM
20	Allow for more funding	Feb 15, 2010 4:42 PM

Response Text		
21	I would recommend the fees for the service be in relation to a person's ability to pay or not pay.	Feb 15, 2010 6:13 PM
22	Home Delivered Meals: To add resources to assure the various routes providing meals on wheels have enough resources to serve all persons in need at any given time on the route. Additionally, is it possible for volunteers to receive training on recognizing the need for Adult Protective Services interventino. Congregate Meals Sites: Also, I have heard older adults talking about the way some adults are treated at the congregare meals sights that have problems with dementia or with continence issues. Can something be established to help older adults at the congregare meal sites and perhaps educate the stronger older adults to show compassion to those less fortunate.	Feb 15, 2010 6:14 PM
23	service addressed in this section is well intended. but services are often restricted by a lack of full funding. Demands exceeds the supply of funding.	Feb 15, 2010 7:07 PM
24	Increase funding support	Feb 16, 2010 12:55 PM
25	One meal per day is inadequate. Monies need to be provided to provide additional meals and to provide for weekends and holidays.	Feb 16, 2010 1:19 PM
26	food contractors should be closely monitored; if not certified. They seem to get away with a lot.	Feb 16, 2010 2:59 PM
27	Stop using so much salt and preservatives in the meals. They sometimes taste horrible.	Feb 16, 2010 3:27 PM
28	More funds for program...Neds are greater than can be meet	Feb 16, 2010 3:59 PM
29	Put more funding into Home Delivered meals instead of Congregate	Feb 16, 2010 9:33 PM
30	Allow more transfer of funds between titles.	Feb 16, 2010 9:36 PM
31	Possible resources for increased funding so that more of the older population can be served.	Feb 16, 2010 9:59 PM
32	update - many congregare sites are drying up so update them in more current/trendy/foods & make places that younger-seniors want to go & HDMS...presentation is important too - they are not desirable -	Feb 17, 2010 2:05 AM
33	it seems there are more dollars allocated to congregate meals than they use while the home-delivered has waiting list.	Feb 17, 2010 1:27 PM
34	Need more funding in the Home Delivered Meals sector	Feb 17, 2010 2:43 PM
35	We need to update congregare nutrition --- as it currently stands I don't see it as a program that Baby Boomers will use	Feb 17, 2010 5:04 PM
36	Maintain maximum flexibility in terms of menu's and programming. Look at potential income guidelines or maximum limits for participants.	Feb 17, 2010 5:58 PM
37	I have concerns that the most needy do not receive. This should be a consideration in this economy when many seniors are falling deeper into poverty.	Feb 17, 2010 7:59 PM
38	Emergency Meals	Feb 17, 2010 8:03 PM
39	allow for younger disabled adults to receive these services when there is no alternative program.	Feb 17, 2010 8:15 PM
40	More flexibility to deliver, define and be creative with services	Feb 17, 2010 9:59 PM
41	More money needs to be allocated to home delivered meals or at least give the states the authority to determine where the money needs to directed. As a local provider, we never have a waiting list for congregare but have a long waiting list for home delivered meals.	Feb 18, 2010 3:52 PM
42	Additional Funding. Increased mileage monetary credit for colunteers.	Feb 18, 2010 7:15 PM
43	Do away with seperate appropriation - have one Title 111 appropriations	Feb 18, 2010 7:44 PM
44	More flexibility	Feb 19, 2010 3:46 PM
45	Additional funding is required to reduce waiting lists for these services.	Feb 19, 2010 3:58 PM
46	Quality food	Feb 19, 2010 4:40 PM

Response Text		
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47	Additional funds are critically needed in this area! Far too many communities have long waiting list with seniors who desparately need this service.	Feb 20, 2010 5:29 PM
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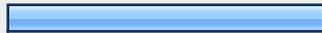
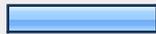
Would you favor combining all Title III funding into one allocation to maximize flexibility?			Response Percent	Response Count
Yes			47.0%	70
No			12.1%	18
Not Sure			40.9%	61
			Comments:	19
			answered question	149
			skipped question	97

Comments:		
1	If flexibility is left at the community level.	Feb 11, 2010 2:12 PM
2	Yes , leaving the distribution of the funding up to the local providers as needed in their area,	Feb 11, 2010 2:39 PM
3	More flexibility could better serve specific needs in deeper depth.	Feb 11, 2010 2:49 PM
4	SERVICES SHOULD BE SEPARATED FOR BETTER ACCOUNTABILITY	Feb 11, 2010 4:10 PM
5	Paperwork is a burden, annually and when adjustments need to be made	Feb 11, 2010 4:58 PM
6	I am afraid the more vulnerable adults in the community would receive even less services.	Feb 15, 2010 6:14 PM
7	I am not sure what would be acheived by combining the two. If one is over funded and the other is under funded, why not just transfer funds?	Feb 15, 2010 7:07 PM
8	If the one allocation's flexibility would meet the needs of those affected in a timely manner.	Feb 16, 2010 1:16 AM
9	If it could more efficiently streamline services and eliminate some of the Administration costs to put more funds into direct service provision, then that could potentially be a good move.	Feb 16, 2010 1:06 PM
10	flexibility is key when it comes to Aging and Aging services.	Feb 16, 2010 2:59 PM
11	Donot know the end and out of this program at funding level.	Feb 16, 2010 3:59 PM
12	should be an open to debate and consideration	Feb 17, 2010 7:59 PM
13	Depend on if the center directors used it properly. But if it isn't mandated, how do you know?	Feb 17, 2010 8:03 PM
14	Some bare minimums are probably good to ensure that all services are offered, but generally I would support the greatest local flexibility since those "in the trenches" know what is most needed in their own communities.	Feb 17, 2010 8:15 PM
15	There is sufficient flexibility already established with allowing transfer of funds between IIIB and IIC and between congregate and home delivered meals.	Feb 18, 2010 2:32 PM
16	too much room for abuse that way.	Feb 18, 2010 4:43 PM
17	There are benefits to keeping the funds separate and combining them. Moving towards combining funding would allow for more person centered services.	Feb 18, 2010 5:27 PM

Comments:

18	This would make the grant submission process easier and also allow for unexpected changes that may occur in a years that could require budget revisions.	Feb 19, 2010 3:58 PM
19	It has been my experience over the years when funding is combined under an overall category, focus may be lost for some of the important components within that category.	Feb 20, 2010 5:29 PM

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

Do you have suggestions for strengthening and/or improving the Family Caregiver Support Program that should be addressed in the OAA reauthorization process?			Response Percent	Response Count
Yes			28.7%	43
No (Skip to question 6)			48.7%	73
Not Sure (Skip to question 6)			22.7%	34
		<i>answered question</i>		150
		<i>skipped question</i>		96

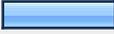
NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

If you answered yes to question 4, what are your specific suggestions?		
		Response Count
		43
<i>answered question</i>		43
<i>skipped question</i>		203

Response Text		
1	Make the program into its own Title with additional funding	Feb 10, 2010 11:43 PM
2	limitations on % of funds used for administrative expenses; more focus on using funds for supportive services (respite care, supplemental services, legal services)	Feb 11, 2010 4:42 AM
3	Utilize more volunteer programs for direct respite services for a lower cost per unit of service, example Senior Companion Program...Currently using in Region P, would be very cost effective to provide FCSP funding to other Senior Companion Programs in the state.	Feb 11, 2010 12:45 PM
4	educate the public more about it's availability.	Feb 11, 2010 12:52 PM
5	More funding. Since the program started, our demand has grown many times, yet routinely we receive approx. \$100 additional funds annually.	Feb 11, 2010 2:12 PM
6	This population continues to increase as the baby boomers turn 65 which means more people will become caregivers. There needs to be some financial compensation/ tax exemption included in this program for family members caring for their elderly parents. Some have to quit their jobs to care for them so their parents can remain in the home as long as possible, which saves the government billions of money in nursing home expenses	Feb 11, 2010 2:39 PM
7	Incentives to the employer to educate their work force and themselves on caregiver education to reduce loss time from work with comfort of mind.	Feb 11, 2010 2:49 PM
8	EACH PARTICIPANT SHOULD RECEIVE MORE HOURS BASED UPON THEIR PHYSICAL/MENTAL DIAGNOSES.	Feb 11, 2010 4:10 PM
9	Give benefits/tax exemptions for caregivers	Feb 11, 2010 4:39 PM
10	Allow funding of companions / sitters that are not certified nurse aides	Feb 11, 2010 4:58 PM
11	More assistance for care givers. Information, resources, respite	Feb 12, 2010 12:28 AM
12	Requests additional funding to increase participants.	Feb 12, 2010 2:55 PM
13	Let people know that you exist.	Feb 12, 2010 5:00 PM
14	Make monitoring about quality of programs and not a checklist of paperwork. Provide more professional leadership.	Feb 15, 2010 3:08 PM
15	Caregivers over 60 who cares for their own children under 60 should be able to get funding through the program.	Feb 15, 2010 5:57 PM
16	There should be more publicity for this program. In our community very few people are aware of the Family Caregiver Support Program.	Feb 15, 2010 6:14 PM
17	PROVIDE REASONABLY PRICED HEALTH INSURANCE TO FAMILY CAREGIVERS WHO HAVE STOPPED WORKING IN ORDER TO CARE FOR THEIR ELDERLY	Feb 15, 2010 7:38 PM
18	I would suggest that adequate funding be made available to train monitors to assure that Family Care Givers are assuring that the services needed are actually provided.	Feb 15, 2010 7:48 PM

Response Text		
19	Early educaton in school system	Feb 16, 2010 1:57 AM
20	increase funding	Feb 16, 2010 12:55 PM
21	Additional funding. The need for Caregiver support and respite services grows daily. With the American population aging at such a significant rate, we need to advocate for more resources to be apporpriated.	Feb 16, 2010 1:06 PM
22	More money should be given to Respite care and cost sharing should be vital (if above poverty guidelines)	Feb 16, 2010 2:59 PM
23	great & flexible program - has more ability to quickly respond to local needs - think we need to strengthen this component & follow through into other titles of the act	Feb 17, 2010 2:05 AM
24	More flexibility in service delivery.	Feb 17, 2010 1:00 PM
25	spend more money and time on getting the word out about the program. Make more funding available for respite care to these caregivers.	Feb 17, 2010 2:11 PM
26	Program should NOT be used for transportation or housecleaning services	Feb 17, 2010 2:26 PM
27	Expand services that are supportive of caregivers and not just "temporary" in nature	Feb 17, 2010 5:04 PM
28	Incorporate funding for seniors caring for disabled adults between 19 and 59. Increase funding and make respite longer term. Maintain the flexibility of the program.	Feb 17, 2010 5:58 PM
29	More flexibility to meet unique needs.	Feb 17, 2010 6:04 PM
30	The greatest need we see hands down is respite. Information on services and training on need to access services is of little value without those hands on services to rely on. The vast majority of respite referrals we see require a certified nursing assistant as the aide rather than a volunteer or lower level aide. keep the program flexible since this has been one of the best things about it. Efforts to cram it into the mold of In-Home Aide or other Title III services just don't work well.	Feb 17, 2010 8:15 PM
31	increase salaries for employees	Feb 17, 2010 9:02 PM
32	Allow a more person-centered appraoch. We seem to be delivering a "cookie cutter" service.	Feb 17, 2010 9:59 PM
33	more emphasis should be placed on consumer directed care	Feb 18, 2010 4:43 PM
34	Combining the funding for some of the Ombudsman Programs that provide a multitude of services to caregivers.	Feb 18, 2010 4:55 PM
35	Continue to keep the program flexible. Lower age of grandparent / relative caregiver to 50.	Feb 18, 2010 5:27 PM
36	again, more flexibility; less detail required on reports	Feb 19, 2010 3:46 PM
37	The reporting system is lengthy and burdensome. We do not see the benefits of the reporting system compared to the benefits of providing actual services versus filling out reports.	Feb 19, 2010 3:58 PM
38	Integrate evidence based programs	Feb 19, 2010 4:17 PM
39	allow more funding for respite	Feb 19, 2010 4:40 PM
40	Extend coverage to all caregivers of adults with mental retardation or other developmental disabilities regardless of age	Feb 19, 2010 6:23 PM
41	Broden eligibility for caregivers	Feb 19, 2010 9:36 PM
42	at the State Level NC should administer the progransm more uniformly across regions and give less options to the AAA. A portion of FCSP should be used to implement the orginal Project C.A.R.E. in all counties (this is not an OAA issue).	Feb 19, 2010 11:44 PM
43	I would like to see more money alloted to the Home and Community Care Block Grant.	Feb 20, 2010 12:14 AM

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Do you have any suggestions to improve Senior Centers that should be addressed in the OAA reauthorization process?			
		Response Percent	Response Count
Yes		35.1%	52
No (Skip to question 8)		48.0%	71
Not Sure (Skip to question 8)		16.9%	25
		<i>answered question</i>	148
		<i>skipped question</i>	98

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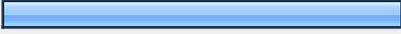
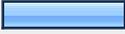
If you answered yes to question 6, what are your specific suggestions?		
		Response Count
		53
<i>answered question</i>		53
<i>skipped question</i>		193

Response Text		
1	Centers and programs need to target well Boomers in addition to older, frail at risk older adults to remain viable	Feb 10, 2010 11:43 PM
2	More money for transportation	Feb 11, 2010 2:33 AM
3	incentives to serve and support adults with early stage dementia and/or mild cognitive impairment	Feb 11, 2010 4:42 AM
4	Somehow get everyone from all backgrownds to using the center.	Feb 11, 2010 12:52 PM
5	Expand funding in small rural areas to allow Senior Centers to also be adult day care	Feb 11, 2010 1:13 PM
6	Give back a dedicated funding stream to senior centers as in the early days of the OAA.	Feb 11, 2010 2:35 PM
7	Incentives to the aging agency to partner deeper with Parks and Recreation, Community Centers, etc for funding. In the rural areas, the centers are tired, dull and serving a very limited population because of image.	Feb 11, 2010 2:49 PM
8	Part B, Section 321 (22) include depression and other mental health issues (these don't fit as "Alzheimers and related"...	Feb 11, 2010 3:43 PM
9	STAFF SHOULD BE PREDOMINANTLY SENIOR CITIZENS THEMSELVES.	Feb 11, 2010 4:10 PM
10	Increase funding substantially for senior center operations based upon the number of programs and services a center offers. The current allocation does not even cover overhead for a center. The centers should be magnets for older adult health and wellness programs and additional funding would help.	Feb 11, 2010 4:58 PM
11	To increase general purpose funding	Feb 11, 2010 9:35 PM
12	Provide more cleaning service.	Feb 12, 2010 12:28 AM
13	Jusat like schools, the Senior Centers should be mandated as well as their minimal programs.	Feb 12, 2010 12:45 PM
14	Make communities aware of what programs are offered at the local Senior Centers	Feb 12, 2010 2:55 PM
15	I believe the senior centers are critical for the well being of seniors. They not only provide nutritional and activity programs, but they also are an important part of social networking for seniors.	Feb 12, 2010 4:13 PM
16	Have your staff attend a board meeting to inform Sr. Center Boards about your organization	Feb 12, 2010 5:00 PM
17	More proactive health programs, intergenerational activities.	Feb 12, 2010 6:40 PM
18	NEED MORE MONIES AND EACH FACILITY SHOUD BE ABLE TO MAKE MORE DECISIONS AS TO HOW TO ADDRESS THE NEEDS AS THEY ARE ALL DIFERENT DEPENDING ON WHAERE THEY ARE LOCATED	Feb 13, 2010 5:55 PM
19	more health and wellness programs	Feb 15, 2010 1:20 PM

Response Text		
20	Senior Centers should be seen as wellness centers and hubs for social services and allied health care.	Feb 15, 2010 3:08 PM
21	More openness to the community at large, more involvement with areas that senior congregate, more activities of value to seniors	Feb 15, 2010 3:19 PM
22	Senior Centers should be able to apply for funding to help them be accessible by people with disabilities, even when the disability means that some physical assistance is needed with for example toileting.	Feb 15, 2010 5:57 PM
23	Serve the healthy and the infirm seniors at the same rate.	Feb 15, 2010 6:14 PM
24	turn them into multi-generational centers. "Senior" is out-dated and stigmatizing.	Feb 16, 2010 12:55 PM
25	Senior centers need professionally trained, full time staff - knowledgeable in the field. Often senior centers rely on part time workers or volunteers who are under trained	Feb 16, 2010 1:19 PM
26	Senior Centers need to remain vital entities in keeping folks active and engaged and it is difficult with funding dwindling.	Feb 16, 2010 2:09 PM
27	It would be nice to see transportation provided to seniors who no longer drive and live in rural areas.	Feb 16, 2010 2:59 PM
28	More FUNDS!!!	Feb 16, 2010 3:59 PM
29	Attention seems to be centered on physical activities. I'd like to see more effort to encourage mental stimulation, e.g. groups working on mental puzzles, encouraging seniors to get involved with computers etc.	Feb 16, 2010 6:11 PM
30	Need funding to upgrade to the Baby bomber needs & interest	Feb 16, 2010 7:28 PM
31	Focus on designing centers to attract boomers.	Feb 16, 2010 9:29 PM
32	Increase focus on younger (60+, baby boomer) folks	Feb 16, 2010 9:33 PM
33	Set aside funding specific to Senior Centers	Feb 16, 2010 9:36 PM
34	update - maybe strongly encourage marketing & inclusion of more than 60 & disabled - get younger seniors & youth to use centers so they become a cool place to go	Feb 17, 2010 2:05 AM
35	More funding.	Feb 17, 2010 2:32 PM
36	Make them more technical accessible and take in account people over the age of 60 have a wide age span, educational background and even within those age categories populations are changing so rapidly as compared to 20 years ago	Feb 17, 2010 2:43 PM
37	require all staff to be educated in geriatric issues	Feb 17, 2010 3:50 PM
38	Again, we need to modernize to attract the Baby Boomer	Feb 17, 2010 5:04 PM
39	greater access for and outreach to isolated individuals	Feb 17, 2010 7:59 PM
40	need definition of multi-purpose senior center preferably tied to state or national certification	Feb 17, 2010 8:15 PM
41	increased funding	Feb 17, 2010 9:02 PM
42	MORE FUNDS and encourage and reward unique programs that will appeal to a younger senior	Feb 17, 2010 9:59 PM
43	More programs, trips, socials, where not necessarily "poor" people can meet.	Feb 17, 2010 11:06 PM
44	Require ENERGETIC staff that are TRULY interersted in what they are doing for seniors	Feb 18, 2010 1:05 AM
45	Provide more money to improve the education provided to Senior Centers	Feb 18, 2010 2:30 AM
46	As a "system" of services and not being a service, it should have its own fundiing identity (like in the 70's - when it was T-V). Currently it competes with an array of other T-III B services which makes it more difficult to fund, and it is not a discrete service, so it is not a good fit.	Feb 18, 2010 2:32 PM
47	More funding for capitol improvements or new centers.	Feb 18, 2010 3:52 PM
48	More accountability from Senior Center Directors.	Feb 18, 2010 4:43 PM
49	Increase Senior Center Funding for Outreach	Feb 18, 2010 7:15 PM

Response Text		
50	More flexibility on staffing hours; it should meet regulations ilf Director and Assistant Director are working a combined 60-70 hours	Feb 19, 2010 3:46 PM
51	Senior Centers need more money. The babyboomers wil cause a quick and dramatic increase in the need for services. Money needs to be provided so centers can prepare for the new demands.	Feb 19, 2010 3:58 PM
52	While allowing for flexibility, increase standards for senior centers so that consumers will know that all senior centers can and will meet at least a minimum set of services and programming diversity.	Feb 19, 2010 6:23 PM
53	Senior Centers should be encouraged to pursue certification, and then rewarded for getting their certification. This area is also lacking in funding in many areas.	Feb 20, 2010 5:29 PM

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Do you have suggestions for consumer cost sharing and/or contributions that should be addressed in the OAA reauthorization process?			Response Percent	Response Count
Yes			19.5%	29
No (Skip question 9)			61.7%	92
Not Sure (Skip question 9)			18.8%	28
		<i>answered question</i>		149
		<i>skipped question</i>		97

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If you answered yes to question 8, what are your specific suggestions?		
		Response Count
		30
<i>answered question</i>		30
<i>skipped question</i>		216

Response Text		
1	Cost share information should be automatically sent to all recipients from the state/county rather than on the provider or lead agency. if it comes from the state the clients are more likely to contribute.	Feb 11, 2010 2:33 AM
2	here is waht you owe but you don't have to pay it , is a very confusing thing.	Feb 11, 2010 12:52 PM
3	Require a minimum fee!! Allow local agencies to solicit aggressively from participants	Feb 11, 2010 1:13 PM
4	Again, this should be at the community level. When asked for contributons, they are rarely made. Yet senior centers needs that are independent nonprofits have to raise funds. We find most seniors could afford to pay some for services, but then, we need flexibilty - especially in the meal program - to improve the value. Currently, we have very few choices and must serve poor quality.	Feb 11, 2010 2:12 PM
5	I believe a "statement" not a bill of the cost of the program should be sent on a monthly basis to home care clients /MOW just like Medicare sends out "statements"	Feb 11, 2010 2:39 PM
6	Better education tools to give to the clients so they will understand the need to help with the cost if able.	Feb 11, 2010 2:49 PM
7	ALL CONTRIBUTIONS SHOULD BE TAX DEDUCTIBLE & LOCAL GOVERNMENT SHOULD PROVIDE FISCAL MANAGEMENT OF ALL FUNDS TO SENIOR CENTERS	Feb 11, 2010 4:10 PM
8	Limit fee free meals to income	Feb 12, 2010 12:28 AM
9	When you renew your driver's license and/or tags you should be given to option to donate \$1 to senior programs.	Feb 12, 2010 12:45 PM
10	Better method of tracking contributions; ability to accept debit cards via phone or monthly debit from checking account after authorization from client or family member.	Feb 12, 2010 3:53 PM
11	Remove requirements and paper work to ask or suggest. Just inform for all programs.	Feb 12, 2010 6:40 PM
12	WE NEED TO MAKE IT MANDATORY TO HAVE EACH PERSON USUNG THE FACILITIES TO MAKE DONATIONS EVEN IF IT IS A VERY SMALL AMOUNT BUT IT MAKES THEM UNDERSTAND THAT THIS IS THEIR PROGRAM AND THEY NEED TO HELP	Feb 13, 2010 5:55 PM
13	Get rid of the ridiculous paperwork trail. The whole process is confusing to families. It sounds like double talk.	Feb 15, 2010 3:08 PM
14	The entire eligibility for the service should be revamped in that people under the poverty should receive services free of charge and then others assessed a fee based on income in order to serve more people.	Feb 15, 2010 6:13 PM

Response Text		
15	More attention should be paid to educating seniors in the community that it is their civic duty to contribute if they are financially able to do so. At this time, I do not believe this is brought to the forefront. I certainly do not want seniors to be discouraged from receiving services; but, I do believe if they were more aware that others could receive help with their contributions, there would be an increase in giving.	Feb 15, 2010 6:14 PM
16	It should not be so complicated to determine who is exempt, everyone should be offered the option to contribute since it is entirely voluntary.	Feb 16, 2010 2:02 PM
17	I think too much time is spent on this issue...consumers should be encouraged to contribute toward services, but more time should be spent improving the quality of those services and not trying to make sure that consumer contributions are encouraged!!	Feb 16, 2010 4:33 PM
18	Allow sliding fee scale	Feb 16, 2010 9:36 PM
19	Please do think about incorporating some type of maximum income for recipients	Feb 17, 2010 5:58 PM
20	In an average year, I probably spend as much in soliciting for the contribution as I collect.	Feb 17, 2010 6:04 PM
21	Older Adults need to be asked to share in the cost of the service, not just suggest it. Many Older Adults are able to share in the cost for their services to allow additional service	Feb 17, 2010 6:19 PM
22	the consumer cost sharing provision should be dropped	Feb 17, 2010 7:42 PM
23	There are individuals who can not contribute and they would not be made to feel that this excludes them from services.	Feb 17, 2010 7:59 PM
24	If they can afford it and are willing, they will give. If they can afford it and are not willing, they will not give. If you mandate cost sharing, those who can not afford it get left out.	Feb 17, 2010 8:03 PM
25	Consumer contributions are confusing to consumers. We tell them what the service costs and what their suggested payment would be, but then tell them it is totally voluntary and how much they pay or IF they pay is up to them. We find the ones who can least afford it are most willing/anxious to pay while those who could pay only hear "I don't have to, so I'm not." It would be simpler to skip the charade of doing a suggested payment chart and just say, "If you want to pay something, we'll take it."	Feb 17, 2010 8:15 PM
26	The language needs to be clarified/modified. It is confusing and bureaucratic, and sends out mixed messages. Bottom line - OAA services do not require fees or contributions for recipients of service, but there is an established process for service providers to collect voluntary contributions from recipients of service. These two requirements should continue.	Feb 18, 2010 2:32 PM
27	The Act has no monetary eligibility requirements and many individuals who could pay or at least contribute are not required to do so. Either make individual who are over the poverty level contribute on a sliding scale or fund the program to meet all the needs.	Feb 18, 2010 3:52 PM
28	more freedom in solicitation of donations.	Feb 18, 2010 4:43 PM
29	It is way too complicated. You can ask this person, but not that one. You can show this person a sliding fee scale but not that one. You aren't supposed to ask actual income, yet some of the contribution guidelines are based on income. Give me a break.	Feb 19, 2010 3:58 PM
30	Allow counties to promote consumer contributions stronger than presently allowed. Using the suggested schedule is confusing to clients.	Feb 19, 2010 8:30 PM

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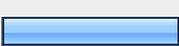
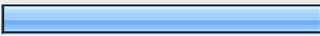
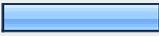
Please give your opinion for each of the following demonstration grants:						
	Very Effective (Should be made Permanent)	Effective, but Too Early to Tell (Remain a Demonstration)	Not Effective (Should End)	Not sure of Its Effectiveness	Don't know enough about Program	Response Count
Alzheimer's Disease Demonstration (Project C.A.R.E. and R.E.A.C.H.)	40.9% (56)	21.9% (30)	3.6% (5)	9.5% (13)	24.1% (33)	137
Chronic Disease Self-Management (Living Healthy)	32.6% (44)	25.9% (35)	5.9% (8)	16.3% (22)	19.3% (26)	135
Senior Medicare Patrol	24.6% (33)	12.7% (17)	6.7% (9)	15.7% (21)	40.3% (54)	134
Performance Outcome Measurement Project (POMP)	15.6% (21)	11.9% (16)	9.6% (13)	27.4% (37)	35.6% (48)	135
Medicare Beneficiary Outreach and Assistance (Relay for Extra Help)	28.7% (39)	25.7% (35)	5.9% (8)	12.5% (17)	27.2% (37)	136
Aging and Disability Resource Centers (Community Resource Connections for Aging and Disabilities)	37.5% (51)	28.7% (39)	5.9% (8)	12.5% (17)	15.4% (21)	136
Use this space to comment on any of these projects (Name the project and be specific)						18
answered question						138
skipped question						108

Use this space to comment on any of these projects (Name the project and be specific)		
1	get the work out that these programs are there!!!!	Feb 11, 2010 12:54 PM
2	<p>Chronic disease self-management is too underfunded to be effective without outside funds. How can a program be successful - and I don't mean the short-term intervention which is never known to have long-term outcomes, but follow-up - when funding is so low.</p> <p>Relay for Extra Help was a waste of time and duplicates SHIP></p> <p>ADRC - I havent been able to figure out the difference between ADRC and Information,Referral and Case Assistance except aging programs are now forced to join with disability providers creating extra levels of work and more meetings for very little improved results.</p>	Feb 11, 2010 2:16 PM

Use this space to comment on any of these projects (Name the project and be specific)		
3	<p>Living Healthy funding should go directly to the County rather than to the AAA.</p> <p>POMP should be expanded / mandatory for all service providers at the same time the HCCBG allocation is simplified. POMP would provide better management and measurement of resources than the onerous paperwork required by service providers.</p> <p>ADRC is the future and the best-yet devised strategy to improve access to services and deal with health illiteracy.</p>	Feb 11, 2010 5:01 PM
4	<p>SHIIP is currently overwhelmed and there needs to be easier access for seniors. With changes in healthcare regulations and combining their retirement insurance with Medicare, it is too confusing.</p> <p>There should also be more legal advice for minimal fees for wills, healthcare POAs,</p> <p>Adoption fees for seniors should be reduced or waived when they adopt pets.</p>	Feb 12, 2010 12:58 PM
5	Very little information is in the public domain.	Feb 12, 2010 5:01 PM
6	CARE seems to be working. It is too early to see the effectiveness of REACH. Community Resource Connections in the early stages seems much harder to organize and communicate than a bricks and mortar Aging and Disability Resource Center. As the OAA is edited, it should keep the concepts of REACH and CRCs at the forefront of the edits to make the theory a possibility.	Feb 15, 2010 3:15 PM
7	MIIPA funds and relay for extra help funds should stay with SHIIP Coordinating Agencies - not AAA	Feb 15, 2010 4:30 PM
8	ADRC is just an update of our I & R Program in our counties. I have got no referrals and other info from this program. Not needed.	Feb 15, 2010 7:15 PM
9	MEDICARE LOSES BILLIONS OF DOLLARS TO FRAUD EACH YEAR. THIS NEEDS TO BE ADDRESSED.	Feb 15, 2010 7:43 PM
10	Not sure that ADRC's will meet the objective for which they were designed. Many communities already operate efficiently and in collaboration, so perhaps targeting those that don't would be a better idea than forcing all communities to embrace this not yet proven methodology. Seems this might not be the very best use of aging funding and resources. If you look back through the years, this has been tried and proposed lots of times but it all comes down to how well the community partners embrace and implement the overall concept.	Feb 16, 2010 1:10 PM
11	Project C.A.R.E. has been great in our rural counties.	Feb 16, 2010 3:00 PM
12	Need more funding specific to CRC	Feb 16, 2010 9:37 PM
13	<p>Project Care in our area is a joke. All the money is spent primarily in one county even though it is supposed to be spent in 3 counties. It is spent in the Biggest more affluent county, instead of the two poor rural counties. People we refer call back and with lack luster reviews of the help they have received, mostly in the form of referrals.</p> <p>Pomp is a lot of work, and very little pay off.</p> <p>SMP and Medicare Beneficiary should be rolled into fund.</p> <p>ADRC/CRC - good idea.. but quit changing their names!</p>	Feb 18, 2010 4:54 PM
14	Project CARE and REACH - it is too early to determine the effectiveness of REACH. Living Healthy has been very successful and beneficial to attendees. CRC's - should be left flexible in each county to best meet the local needs. There is still a struggle with getting the disability community on board with this program.	Feb 18, 2010 5:30 PM

Use this space to comment on any of these projects (Name the project and be specific)		
15	<p>Performance Outcomes are great in helping an organization realize its strengths and importance to helping senior adults. However, the time spent in developing the outcomes and survey tools, completing and compiling the surveys, and then preparing the results in a usable form take away from time that could be spent in service delivery. We track everything and do not see any positive results in the way of funding that comes from the tracking. We see the "real" results when we get a hug or a smile from a happy or lonely senior. We don't need outcomes to tell us if we are doing a good job or if we are making a difference in the lives of those we serve. So who is really benefiting from all of this extra work?</p>	Feb 19, 2010 4:03 PM
16	<p>There are extremely high expectations for Aging and Disability Resource Centers but they cannot possibly fulfill the picture painted of them at the national level without, at a minimum, (1) true partnership of the aging network and Medicaid at the state level so that access to Medicaid services can be truly streamlined; (2) enough funding to adequately staff ADRC/CRC partnership organizations and train staff for a greatly expanded set of duties; and (3) enough funding for services (especially HCCBG services) that ADRCs can truly connect people with the services they need rather than places on the waiting list.</p> <p>POMP is very different from these other initiatives. Its great accomplishment is that it has given AOA growing evidence of the effectiveness of Older Americans Act services justify their funding to GPRA.</p>	Feb 19, 2010 6:32 PM
17	<p>Project CARE is not throughout the state.</p> <p>ADRC is great program conceptually, however, in practice it is not effective</p>	Feb 19, 2010 9:38 PM
18	<p>SUA's should be given the responsibility to implement ADRCs through the OAA. AAAs should be the designated agency to be or contract for ADRC functions.</p>	Feb 19, 2010 11:47 PM

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Do you have suggestions to strengthen the SCSEP that should be considered in the OAA reauthorization process?			Response Percent	Response Count
Yes			26.8%	37
No (Skip question 2)			49.3%	68
Not Sure (Skip question 2)			23.9%	33
		<i>answered question</i>		138
		<i>skipped question</i>		108

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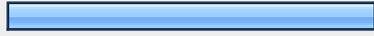
If you answered yes to question 1, what are your specific suggestions?		
		Response Count
		37
<i>answered question</i>		37
<i>skipped question</i>		209

Response Text		
1	Expectation specific programmatic training to all regional program managers and directors	Feb 10, 2010 11:45 PM
2	incentives for employers	Feb 11, 2010 2:35 AM
3	get the work out about it	Feb 11, 2010 12:54 PM
4	Discontinue Program. send funding to public school system to prevent HS dropouts thus seniors will work all their lives and not be 60 y/o and uneducated/unemployed	Feb 11, 2010 1:16 PM
5	Title V workers remain a valuable source of assistance to underfunded, understaffed aging service providers. Relax requirements for moving seniors out of the program to permanent employment. Not realistic for many, particularly in this economy.	Feb 11, 2010 2:40 PM
6	the title V program needs to be updated as the elderly needing jobs today do not qualify for the program because their income is too high. The program is based on the poverty level and that is too low. Also I think a study needs to be done on those title Vs that are placed and how long they stay with the job?	Feb 11, 2010 2:44 PM
7	THIS IS A GREAT PROGRAM...SENOIR SHOULD BE MATCHED TO JOBS BASED ON THEIR PAST EMPLOYMENT HISTORY	Feb 11, 2010 4:12 PM
8	The program is a mess. The administration is inconsistent, goals shift and the personnel running the program are detached from the reality of the skill development potential. I recommend that grants be made directly to County service providers that want to operate the program and cut out the ineffective and haphazard middle management.	Feb 11, 2010 5:03 PM
9	Closer monitoring on individual goals and rotation of trainees	Feb 11, 2010 7:01 PM
10	Allow more flexibility in host agency sites	Feb 11, 2010 7:45 PM
11	The guidelines for monitoring this program should be reviewed. Closer monitoring of this program is warranted	Feb 11, 2010 9:38 PM
12	Let people know about it.	Feb 12, 2010 5:02 PM
13	Turn the program over to WIA. Too many of the program requirements are steering away from the program being a community service program, where it actually assists the community agencies in operating such as senior centers. Regs for this program are rigid and can be moved away from AoA and not be missed.	Feb 12, 2010 6:43 PM
14	That all of these programs be housed at the Area Agency on Aging.	Feb 15, 2010 5:22 PM
15	State should pay the 10% match to ease the relationship with host communities and training agencies.	Feb 15, 2010 8:47 PM
16	increase funding	Feb 16, 2010 12:56 PM

Response Text		
17	Our agency has tried multiple times over the years to work with this program. Some of the workers have been helpful but our overall experiences with the management and program administration in the employment programs has not been as positive. not sure what the answer is to this problem but more accountability at the local level or even the state might be a start. Because it's a federal program and they report to regional offices (management), it appears lacking. This causes the Seniors within the program often times to suffer and decreases the overall program effectiveness.	Feb 16, 2010 1:14 PM
18	Selective placement of the older workers is needed - accomodating their physical limits. Prospective employers need incentives to hire these individuals	Feb 16, 2010 1:21 PM
19	Pay them a "living wage" for their contributions in the work force.	Feb 16, 2010 3:30 PM
20	FUNDS!!	Feb 16, 2010 4:00 PM
21	Allow longer length of employment for participants. Lessen requirements for employment eligibility.	Feb 16, 2010 4:48 PM
22	With the amount supervision and training you lose valuable time that could be utilized more effectively secure long term employment	Feb 16, 2010 7:36 PM
23	--No longer require annual grants--only submit program changes after initial grant is approved every four years. --Move program to Administration on Aging--it's the only program under OAA administered by DOL. --Simplify performance measures. --Make priority for service 55-61 years of age since they are not eligible for Social Security Benefits, but still need to work and be retrained if they lose their job.	Feb 16, 2010 9:50 PM
24	local flexibility & autonomy is essential as program goals & benchmarks should not be held hostage to urban pay & employment ratios -	Feb 17, 2010 2:11 AM
25	More oversight and skill training for workers. Often doing administrative duties. By improving skills, we will have a stronger older work force.	Feb 17, 2010 1:36 PM
26	We need to hear more about this program and where it is available for our area.	Feb 17, 2010 2:14 PM
27	Title V should have different performance requirements or goals for rural versus urban areas. In Franklin County, with few opportunities for professional work placement, due to our rural location and current high level of unemployment, title V as a training program with grants allocated on performance statics, puts undue pressure on the training sites and participating clients to find a professional job and move off Title V.	Feb 17, 2010 3:04 PM
28	Move from Department of Labor to Administration on Aging	Feb 17, 2010 5:08 PM
29	Reinstate dual track system in order to keep those participants least likely to be hired with the ability to earn this minimum age income.	Feb 17, 2010 6:53 PM
30	greatly simplify	Feb 17, 2010 7:45 PM
31	More Money to offer more positions!	Feb 17, 2010 8:05 PM
32	I have been concerned that the work opportunities are limited and/or selected unfairly. I have seen a system of offering the opportunity by friendship or association. This is a wonderful program that benefits both the worker and employer. My concerns are with selecting the employers. Also time frames are not followed as required. Perhaps the time frames should be lengenthed.	Feb 17, 2010 8:07 PM
33	Need to go back to Title V being a Community Service program, helping seniors to provide valuable help for their communities in exchange for a supplemental income to their Social Security. Trying to push unsubsidized job placements in one or two years max for this population in any economy is ridiculous and in this economy is a farce. Those who claim to have great success in the placement areas have only learned how to manipulate the numbers and work the system. True success stories in job placement are exceedingly rare.	Feb 17, 2010 8:22 PM
34	Try to place more people in jobs that aren't demeaning.	Feb 17, 2010 11:08 PM

Response Text		
35	Our agency uses the SCSEP program workers and have been able to employ many of them as vacancies occurred. It is a great program but like many others, especially in view of the "Baby Boomer' needs more funding.	Feb 18, 2010 3:55 PM
36	Much less travel expectations for program coordinator	Feb 19, 2010 3:48 PM
37	They need to be sure they will have adequate funding an entire year, every year.	Feb 19, 2010 4:04 PM

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

Do you have suggestions for strengthening and/or improving the Long-Term Care Ombudsman Program that should be addressed through the OAA reauthorization process?			Response Percent	Response Count
Yes			30.6%	41
No (Skip to question 3)			56.7%	76
Not Sure (Skip to question 3)			12.7%	17
			<i>answered question</i>	134
			<i>skipped question</i>	112

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If you answered yes to question 1, what are your specific suggestions?		
		Response Count
		41
<i>answered question</i>		41
<i>skipped question</i>		205

Response Text		
1	Increased funding to ensure that adequate numbers of regional Ombudsmen are available to answer complaints and resolve resident's concerns	Feb 10, 2010 11:47 PM
2	Do away with it. All they do is call APS.	Feb 11, 2010 12:57 PM
3	Greater staffing needed. Needs to be more easily assessed. When I try to contact the Ombudsman for a county other than my own, on behalf of a patient in my hospital, there is no central number that guides me to the right person. There needs to be an 800 number that can funnel callers to the right county or regional office representative.	Feb 11, 2010 1:50 PM
4	They need more authority. It doesn't help when someone is being wrongly discharged from a nursing home and the Ombudsman cannot stop it so the person is sent home to struggle to survive on their own/ or possibly die due to overmedication. There should be consequences for the nursing home	Feb 11, 2010 2:50 PM
5	The public is not aware of this service. It should be better positioned as a resource for those placing loved ones.	Feb 11, 2010 2:54 PM
6	Clarification and explicit language needs to be added to address systemic advocacy by the Program as well as the autonomy of the Program related to advocacy for long term care residents. Further clarification of the Conflict of Interest language.	Feb 11, 2010 3:30 PM
7	Incorporate some "muscle" here - all they do right now is talk.	Feb 11, 2010 3:47 PM
8	They need to be accountable to service providers or County personnel. There is an absence of communication between the Ombudsmen and the staff "on the ground". They operate in a detached realm - County service providers could more effectively assure the rights of facility residents if the funding for ombudsmen was directed to the County.	Feb 11, 2010 5:06 PM
9	I think that the North Carolina Regional Long-Term Care Ombudsmen are highly over-worked and under-paid! Ombudsmen are extremely important and a critical and crucial component to long-term care! I value their services and think that it is a highly-effective and valuable program that should remain permanent. But Ombudsmen need a dramatic increase in their salaries!!!	Feb 11, 2010 6:51 PM
10	Ombudsman should refer Elder Abuse, Neglect and Exploitation situations to APS on a routine basis. This program should have to partner with DSS Adult Protective Services staff to spend education/outreach money!	Feb 12, 2010 1:34 PM
11	Ombudsmen should have practical experience in Adult Care via DSS. This will give them more training and a more realistic view of the real job.	Feb 12, 2010 2:38 PM
12	Need to add more staff to the Ombudsman's Program.	Feb 12, 2010 3:01 PM
13	Make these paid positions to better secure appropriate people to fill these positions	Feb 12, 2010 3:55 PM

Response Text		
14	Let people know about it.	Feb 12, 2010 5:03 PM
15	Provide mre Ombudsmand funding for positions	Feb 12, 2010 6:44 PM
16	Occasionally spot-contact caregivers of the residents in long-term care	Feb 12, 2010 9:12 PM
17	That there be more funding for additional Ombudsman positions with in each Area Agency on Aging. There is not enough to look out for the rights of Residents	Feb 15, 2010 5:25 PM
18	Ombudsmen should be encouraged to involve CAC's to evaluate and refer when possible to better balance their work load.	Feb 15, 2010 7:28 PM
19	Increase funding to promote more educational programs for communities	Feb 15, 2010 7:52 PM
20	More funding for additional Ombudsmen and travel costs.	Feb 15, 2010 8:48 PM
21	Continue to support and strengthen the program.	Feb 16, 2010 1:22 AM
22	Concentrate upon redefinition to emphasize constructive formative improvement suggestions rather than whistle-blowing.	Feb 16, 2010 12:59 PM
23	Ombudsman don't visit elder facilities enough to truly assess what is happening to the elderly.	Feb 16, 2010 3:34 PM
24	Laptop requirements while on the job rather than returning to the office later for data entry input. Time of taking notes on site, then transferring notes to Ombudsman reporting system is inefficient. Better tools are needed by the Ombudsman to reduce reporting time & to help make their reporting better by being able to do the reporting while on site & the info is fresh.	Feb 16, 2010 4:51 PM
25	Increase the number of Ombudsmen.	Feb 16, 2010 6:14 PM
26	Ombudsman representatives need to be listen to people that work at ground level with clients not us listening to them per say	Feb 16, 2010 7:42 PM
27	re-examine the structure - it is about as old as the act - what has been in place from the beginning should not necessarily drive the ship -	Feb 17, 2010 2:15 AM
28	Since money is such an issue with the state, make it possible for the Ombudman to have regulatory power. Also strengthen the penalty review system to add more monetary punch.	Feb 17, 2010 1:39 PM
29	Ombudsmen should be given more authority to create change. They are in facilities more than State survey teams are and know more about care being offered. Ombudsmen often witness regulatory violations; a complaint is then turned over to DHSR. Survey team may not come in for 2 weeks, and often do not substantiate complaints. If ombudsmen were given proper authority this would lessen travel expenses and time restraints for State. I also encourage housing this program with State Ombudsman program.	Feb 17, 2010 1:44 PM
30	Increase the community awareness of the Program	Feb 17, 2010 2:46 PM
31	need more than one to manage all of the counties within AAA umbrella!	Feb 17, 2010 3:52 PM
32	Expand and recognize as a PROGRAM and not individual staff	Feb 17, 2010 5:09 PM
33	More well educated ombudsmen	Feb 17, 2010 8:06 PM
34	Strengthen working relationships with all parties involved in the provision of services/monitoring of long term care facilities and residents.	Feb 17, 2010 8:11 PM
35	Provide more funding to provide more Ombudsman	Feb 18, 2010 2:33 AM
36	Need more Ombudsman to provide adequate services to elderly especially as the baby boomers approach needing our services.	Feb 18, 2010 4:58 PM
37	Better understanding and support for Ombudsman responding to needs of younger mentally ill living in Adult Care Homes (Big, big issue in our area) Significantly less data collection, particularly when new data system is being implemented.	Feb 19, 2010 3:54 PM
38	They need more funds. I have seen the good these progams do while the funding keeps shrinking and staff are laid off. When something works, and this progam works, give it the money it needs to be effective.	Feb 19, 2010 4:07 PM
39	Increase funding and AoA staff time to support true elder abuse prevention activities at the state and local levels.	Feb 19, 2010 4:13 PM

Response Text		
40	Needs to be modernized with greater flexibility for implementation at local level.	Feb 19, 2010 9:39 PM
41	More resources should be allocated for this area to enable greater contact with Long-Term Care facilities. More follow-up is required when concerns are expressed.	Feb 20, 2010 5:29 PM

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

Do you have suggestions for strengthening and/or improving activities aimed at preventing elder abuse, neglect, and exploitation that should be addressed in the OAA reauthorization process?			Response Percent	Response Count
Yes			37.5%	48
No (Skip to question 5)			53.1%	68
Not Sure (Skip to question 5)			9.4%	12
		<i>answered question</i>		128
		<i>skipped question</i>		118

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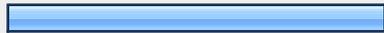
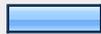
If you answered yes to question 3, what are your specific suggestions?		
		Response Count
		49
		answered question 49
		skipped question 197

Response Text		
1	Mandatory orientation on the subject and bi annual training for long term care staff	Feb 11, 2010 12:49 PM
2	education.	Feb 11, 2010 12:57 PM
3	Funding should be given at local levels so senior centers can build programs. I'm not even sure how this is being addressed currently through this funding. We have no real services in our County except after reports are made to the police/sheriff, and then it does not get back to the senior centers.	Feb 11, 2010 2:18 PM
4	The regulation of Nursing homes should also be placed under the local Dept of Social Services in stead of the state Dept Facility of Sevices with adequate funding and authority to make it sucessful.	Feb 11, 2010 2:50 PM
5	Very good program.	Feb 11, 2010 5:06 PM
6	Adult Protective Services at County Departments of Social Services need a more effective way of receiving complaints on abuse, neglect and/or exploitation. Sometimes when you call, you can not get through. And at other times, Adult Protective Services will not call you back or take a long time to respond.	Feb 11, 2010 6:51 PM
7	Provisions for individuals to be trained on the local level for assistance	Feb 11, 2010 7:06 PM
8	More funding for this program	Feb 11, 2010 9:41 PM
9	Better monitoring	Feb 12, 2010 12:31 AM
10	Financial support of Adult Protective Services should be included in this bill. Aging advocates should have to combine forces with Adult Protective Services to serve this vulnerable population to the best of our combined ability.	Feb 12, 2010 1:34 PM
11	<p>Tje case load for Adult Protective Services should be in line with that of Child Protective Services. Having done both the difference is that when I find something wrong with a child I could put the services in place to correct the situation, with adults; if you find something wrong, you must ask their permission to fix it. If they refuse and you beleive it is a question of capapcity, then you have to petition the court. If they refust and they appear to have capcity you have the public scorning you for doing nothing.</p> <p>The elderly and disabled are threatened by their family members and caretakers that if they file complaints against them, the elderly will be placed in 'a home'. This makes them feel hopeless and helpless.</p> <p>Use the same stategies that are used in Domestic Violence (DV) cases because they are very similar. The victim is threatened by the person they depend on for care/transportation, etc. They end up prisoners in their own homes. Or they do not want to put their family members at risk of imprisonment due to shame/love/loyalty.</p>	Feb 12, 2010 2:38 PM

Response Text		
12	Align priorities and objectives with the NC Health Care Personnel Registry and ensure all state personnel are clear on how to handle situations consistently and on a collaborative level.	Feb 12, 2010 3:55 PM
13	Let people know about it	Feb 12, 2010 5:03 PM
14	Regarding residents who can't speak, caregivers should often check on skincare/breakdown of residents.	Feb 12, 2010 9:12 PM
15	The definition of elder abuse/exploitation should be modernized. The current definitions are too restrictive, and vulnerable adults fall through the cracks.	Feb 15, 2010 3:17 PM
16	More involvement and support in the communities as a whole. More outreach to families as they are dealing with older and disabled family members in their homes.	Feb 15, 2010 3:21 PM
17	More screening for families who are caring for clients at home and getting paid for it. Either forbid payment or make sure they are actually taking care of the person.	Feb 15, 2010 3:24 PM
18	I think that the North Carolina Law needs to be reviewed. It is a 30 year old law that needs modernizing	Feb 15, 2010 5:25 PM
19	Provide (more) funding for this service.	Feb 15, 2010 6:15 PM
20	More funding is needed to better train those providing the service to our elder adults.	Feb 15, 2010 6:17 PM
21	Its about training and awareness, coupled with incentives for reductions of exploitation, neglect and abuse. Direct care workers are frequently overworked and underpaid. Better pay would probably attract better qualified and would probably improve the retention rated of direct care workers. Staffing ratios need to improve	Feb 15, 2010 7:28 PM
22	Increase funding to promote more community awareness.	Feb 15, 2010 7:52 PM
23	Existing programs and procedures are not nearly aggressive enough.	Feb 16, 2010 12:23 PM
24	It has to be viewed as symptomatic of a deeper problem, economic and educational inequality.	Feb 16, 2010 12:59 PM
25	Attention has got to be given to more local funding to employ APS staff. Reports have nearly trippled in some counties and resources remain the same. This is perhaps the most critical of all the needs in the OAA reauthroization process. With the elderly population expanding at such a rapid rate and the life expectancy increasing, this has to be addressed.	Feb 16, 2010 1:17 PM
26	Educate church members in local communities	Feb 16, 2010 1:23 PM
27	Ombudsman need to spend time in facilites training staff to recognize abuse, neglect and exploitation.	Feb 16, 2010 2:11 PM
28	Have someone else serve as representative payee other than dopey sons and uncaring relatives.	Feb 16, 2010 3:34 PM
29	Elder Abuse education should be done at the public level routinely - not just at the provider / participant level.	Feb 16, 2010 4:51 PM
30	Where's the data "analysis"? Data rich...analysis poor.	Feb 16, 2010 6:14 PM
31	The problem is elderly people don't recognize when they are being abused & exploitation. Especially EXPLOITATION	Feb 16, 2010 7:42 PM
32	Make reporting easier for medical community. Strengthen the programs for wellness so that older adults are not so vulnerable.	Feb 17, 2010 1:39 PM
33	Increase funding so that more resources can be offered.	Feb 17, 2010 1:44 PM
34	WE need to have people willing to come forward with information. Maybe more local training or classes on abuse and neglect at churches and SC.	Feb 17, 2010 2:18 PM
35	Trained Local Senior representatives to bridge the gap for seniors to the NC DOJ & local Police dept. Such as what the SHIP program does.	Feb 17, 2010 4:00 PM
36	Assist in the funding of staff to carry out this responsibility so that reports can always be addresses quickly and completely.	Feb 17, 2010 8:11 PM

Response Text		
37	provide more public education programs on preventing elder abuse or programs to help seniors learn to speak out for themselves	Feb 17, 2010 9:04 PM
38	Give more power to the Ombudsmen. They should be able to "write up" or "fine" centers that have chronic complaints...there should be repercussions and there currently are none.	Feb 17, 2010 11:10 PM
39	Unfortunately, this issue needs to be address by the state legislature to tighten laws up regarding elder abuse, neglect and exploitations. However, the Act could provide additional funding to expedite the solution.	Feb 18, 2010 3:57 PM
40	Tie the Elder abuse into the Family Caregiver program. We need to get more caregivers educated in what is elder abuse and how to spot it.	Feb 18, 2010 4:57 PM
41	Mandate random drug testing for employees working with elders. Education Programs.	Feb 18, 2010 7:28 PM
42	Less time for staff spent on data collection =s more time for support to residents.	Feb 19, 2010 3:54 PM
43	A coordinated national approach to elder abuse prevention that can be implemented at the state and local levels continually - not just a one shot effort.	Feb 19, 2010 4:13 PM
44	Increased funding to develop a more comprehensive and more visible program	Feb 19, 2010 4:19 PM
45	Fund a voluntary component similar to that available in child protective services	Feb 19, 2010 6:33 PM
46	Promote Vulnerable Adult Protective Services Program	Feb 19, 2010 8:36 PM
47	Require better coordination with APS services.	Feb 19, 2010 11:48 PM
48	More funding should follow the Adult Protective Services Program to prevent elders from being abused, neglected or exploited and to help bring awareness.	Feb 20, 2010 12:15 AM
49	More involmnet and collaboration is needed from community agencies i.e. law enforcement, Social Services and not-for-profit organizations. Public education is also a key issue.	Feb 20, 2010 5:29 PM

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Do you have suggestions for strengthening and/or improving legal assistance that should be addressed in OAA reauthorization process?			Response Percent	Response Count
Yes			27.6%	37
No			58.2%	78
Not Sure			14.2%	19
		<i>answered question</i>		134
		<i>skipped question</i>		112

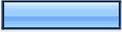
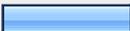
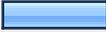
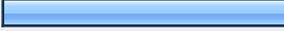
NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

If you answered yes to question 5, what are your specific suggestions?		
		Response Count
		39
<i>answered question</i>		39
<i>skipped question</i>		207

Response Text		
1	Additional funding is imparative as our needs far exceed our available funds	Feb 10, 2010 11:47 PM
2	Help for the families of the elderly who need to get guardianship	Feb 11, 2010 12:57 PM
3	There may be existing legal assistance, but I don't know what it is. This is an area that needs better publicity, easier access.	Feb 11, 2010 1:50 PM
4	Put some funding into this! We supposedly have this, but have never had any funding. I believe AAA negotiates this, but it doesn't get relayed down to community level. Funding should go to community.	Feb 11, 2010 2:18 PM
5	MONEY to fund legal assistance	Feb 11, 2010 2:41 PM
6	Allow \$s to be used from the funding for retainer attorney with knowledge in elder law, wills, etc to use as a resource for "simple" matters to the clients. Legal Aid is hard to connect with for our clients.	Feb 11, 2010 2:54 PM
7	This function needs an OAA funding allocation specific to the requirements.	Feb 11, 2010 3:30 PM
8	LEGAL SERVICES FOR ELDERLY NEEDS TO BE ACCESSIBLE 24/7--A STATE HOT LINE TO ANSWER QUESTIONS	Feb 11, 2010 4:13 PM
9	Legal Aide is very difficult to communicate with - not team players.	Feb 11, 2010 5:06 PM
10	When one Agency services several counties, make sure that a rep from that Agency comes to the County it services at least quarterly	Feb 11, 2010 7:06 PM
11	Legal assistance should be addressed in each county with an increased awareness	Feb 11, 2010 9:41 PM
12	Make Older Amreicans more aware of legal assistance	Feb 12, 2010 12:31 AM
13	Offer free clinics for POA's, have notaries available, explain the difference between POA and guardianship.	Feb 12, 2010 2:38 PM
14	Let people know about it.	Feb 12, 2010 5:03 PM
15	turn the program over to LSC.	Feb 12, 2010 6:44 PM
16	It should be made known to caregivers that concerns within reason will be fully investigated.	Feb 12, 2010 9:12 PM
17	Provide free assistancein obataining guardianship for elders	Feb 15, 2010 1:26 PM
18	More funds need to be directed for legal assistance	Feb 15, 2010 4:31 PM
19	Transportation of our seniors is a growning issues. A number programs that could be started to help may never get off the ground as funding to cover the cost of transportation in not covered. There appears to never be enought funds to cover all the needs for transportation.	Feb 15, 2010 4:48 PM
20	Access to legal services for low income older adults needs to be made easier with no or little wait time before help is received.	Feb 15, 2010 6:28 PM

Response Text		
21	Again, this is another area where education and awareness need to improve. I believe that better education of clients is the key. Often times the authors of a particular Act know all of the details of how something is suppose to work, but those details fail to get to the level that reall use the services.	Feb 15, 2010 7:28 PM
22	I feel like we need to delete the attorney monitoring tool that is part of the monitroing tool for OAA that wants the service provider to access this with the attorneys. In contacting attorneys in our area they all think this tool needs to be done away with because they provide enough time to clients for such a low fee and don't have time to answer these questions. Some say its like a "slap in the face".	Feb 15, 2010 7:32 PM
23	More funding and holding contracted providers accountable for meaningful services, outside of wills and advance directive execution.	Feb 15, 2010 8:48 PM
24	Need greater availability	Feb 16, 2010 2:13 PM
25	More money need to be allocated to Legal Aid services for seniors.	Feb 16, 2010 3:01 PM
26	More funding needed	Feb 16, 2010 5:57 PM
27	Increase amt. of required funding for program Fund Legal Services Developer position	Feb 16, 2010 9:52 PM
28	Broaden the age and services that Legal Aid can provide to clients such as Grandparents raising grand children.	Feb 17, 2010 1:39 PM
29	Again, I believe we need to get the word out to people. Most don't even know these services are available to them or where they can get such help.	Feb 17, 2010 2:18 PM
30	Need more funding	Feb 17, 2010 2:46 PM
31	should be greatly expanded	Feb 17, 2010 7:45 PM
32	Should be offered in all counties more than once a month!!!	Feb 17, 2010 8:06 PM
33	Increased funds for this service.	Feb 17, 2010 8:11 PM
34	I would like to see "form" wills, POA's, etc. drawn up for a state so that elders could access these forms without paying for an attorney or waiting on limited legal aid assistance. Legal funds could be used to draw up and periodically revise/update these forms and then the remaining part could be used to fund help with more complex legal issues.	Feb 17, 2010 8:24 PM
35	Senior Law Clinics	Feb 18, 2010 7:28 PM
36	We have a great Legal Aid program in our region.	Feb 19, 2010 3:54 PM
37	They need more funding. In our county, legal aide goes through 100% of their HCCBG funds within just a few months. I don't know where they get the money to continue to operate for the rest of the year, but they always do.	Feb 19, 2010 4:07 PM
38	Additional funding in order to provide needed legal assistance	Feb 19, 2010 4:13 PM
39	Same as above	Feb 19, 2010 4:19 PM

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What improvements do you think the OAA needs most? (Check all that apply)				
			Response Percent	Response Count
New Programs			24.2%	31
Expanded Authority			18.0%	23
Increased funding			84.4%	108
More stringent benchmarks and performance measures			19.5%	25
More oversight			15.6%	20
More state flexibility			43.8%	56
			Comments:	19
			answered question	128
			skipped question	118

Comments:		
1	the standards need to be more clear for providers	Feb 11, 2010 2:39 AM
2	New Program needed: Initiatives to help our culture gain ability to accept end of life with grace, dignity. Thanks to our acceptance of so many cultural beliefs, our feelings of entitlement to the best services possible, healthcare costs have become outrageous. We have lost the knowledge that death is as natural as birth, it is not the enemy. How can OAA help families and individuals to respect the natural process, without blaming someone else (doctors, one another) when someone dies?	Feb 11, 2010 2:05 PM
3	These programs operate at the community/local level. Give local communities the funds and flexibility to do the work.	Feb 11, 2010 2:25 PM
4	LOCAL GOVERNMENT SHOULD HANDLE FISCAL MANAGEMENT	Feb 11, 2010 4:22 PM
5	Consolidated funding that the County can allocate as necessary with POMP as the performance measurement tool.	Feb 11, 2010 5:15 PM
6	MORE FUNDING AND HIGHER PAY FOR REGIONAL LONG-TERM CARE OMBUDSMEN!! Regional Ombudsmen should AT LEAST be making \$40,000 a year!!	Feb 11, 2010 7:01 PM
7	OAA needs to address Elder Abuse in relation to Adult Protective Services not just the ineffective ombudsman program!	Feb 12, 2010 1:43 PM
8	Guardianship should be recognized country wide. Families should not have to re-register Guardianship when they move from state to state.	Feb 12, 2010 2:48 PM
9	Increased funding for Ombudsman in each state within the United States	Feb 15, 2010 5:49 PM

Comments:		
10	I would like to see more uniformity between the states in services offered. This would mean that OAA has more authority and the states get less flexibility. That way older adults moving from area of the country to another may be able to predict the services available.	Feb 15, 2010 6:44 PM
11	We can provide services if we had the funding	Feb 15, 2010 7:52 PM
12	Badly needs refocusing.	Feb 16, 2010 1:04 PM
13	More \$ can't always be the solution but more careful evaluation of program effectiveness and giving states more flexibility to put the resources where the needs are greatest, could be an effective solution.	Feb 16, 2010 1:28 PM
14	Allocations marked for Consumer Directed Service	Feb 16, 2010 4:39 PM
15	Too much money is expended now in bureaucratic red tape...we need money for services	Feb 17, 2010 8:38 PM
16	Based on the need according to financial status of counties	Feb 17, 2010 9:59 PM
17	Support Project 20/20 proposal and would like to see ADRCs, CDSMP, and Community Living Programs (Nursing Home Diversion) made permanent parts of the OAA with formula funding as opposed to discretionary funding	Feb 18, 2010 2:58 PM
18	Definitely not more oversight or performance measures. Enough is enough.	Feb 19, 2010 4:17 PM
19	Additional funding is needed with state flexibility that allows each state to determine priorities based on the needs in their state.	Feb 20, 2010 5:57 PM

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

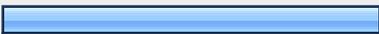
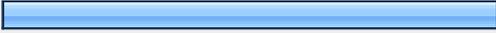
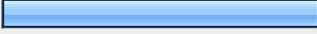
Do you think the OAA is prepared to deal with the Age Wave (aging of baby boomers)?			Response Percent	Response Count
Yes (Skip to Question 4)	<input type="checkbox"/>		3.1%	4
No	<input checked="" type="checkbox"/>		84.4%	108
Not Sure	<input type="checkbox"/>		12.5%	16
Comments:				39
answered question				128
skipped question				118

Comments:		
1	Current funding levels not adequate to meet rapidly growing needs of our aging population	Feb 11, 2010 5:03 AM
2	Currently the baby boomers are possibly caring for parents, possibly grandchildren, in 20 years the baby boomer population will be much larger than the current aging population increased funding to meet their needs will be critical	Feb 11, 2010 12:53 PM
3	Everyone talks about it but does nothing that i can see.	Feb 11, 2010 1:14 PM
4	The OAA is keenly aware of the upcoming Age Wave but nobody knows how the generation that sees itself as forever young will truly depend upon services. There is s shift to aging with dignity, aging in place, better utilizing volunteers and nonfunded assistance. Support of these initiatives may help us less dependent upon monies, strengthen families and neighborhoods for help with the elderly.	Feb 11, 2010 2:05 PM
5	This is already occurring but no funding seems to be following as we have to change up our programs to match these changes.	Feb 11, 2010 2:25 PM
6	Better Resource Centers and Senior Centers.	Feb 11, 2010 2:57 PM
7	Pro-active and program development funding is not available. Let the strong County programs have some flexibility to improve wellness and health literacy issues at the senior centers.	Feb 11, 2010 5:15 PM
8	Maybe it is, but I have my doubts.	Feb 11, 2010 7:01 PM
9	Cannot adequately address current seniors	Feb 12, 2010 12:37 AM
10	WE, Baby-Boomers, are not going to go quietly into the night. We will raise the roof until people hear us. As soon as we can get over the fact that we are old and all the creams and potions in the world will not make us young, and we admit that we are old- we will begin to focus on how shabbily the elderly are treated. When we realize how much medical insurance we have lost, how much personal care is, how little monitoring is done for those services, etc. their will be massive uprisings.	Feb 12, 2010 2:48 PM
11	Biggest Ponzi scheme in history	Feb 15, 2010 1:36 PM
12	More attention should be paid to mental health and dementia.	Feb 15, 2010 3:23 PM

Comments:		
13	Because if there is going to be a wave of boomers then we as a society need to prepare for the need for complaintants to have the ability to access both the enough regulators and Ombudsman to deal with the increase need for long term care and services. And a system well equipped to handle this issue in the waves of boomers that we will see in the long term care setting.	Feb 15, 2010 5:49 PM
14	I don't think any of us is prepared for the age wave.	Feb 15, 2010 6:44 PM
15	It was inadequate from the beginning.	Feb 16, 2010 1:04 PM
16	Refer back to question # 1. When the federal and state governments are going broke, and resources are drying up...there has to be more efficient utilization of resources and flexibility. Performance Based Budgeting is a good start.	Feb 16, 2010 1:28 PM
17	Housing, health care, and social services are all lacking	Feb 16, 2010 1:29 PM
18	More funding needed and some specifically earmarked for Consumer Directed Service	Feb 16, 2010 4:39 PM
19	It is going to be important to come up with more creative & active programs to keep baby boomers engaged.	Feb 16, 2010 4:58 PM
20	Most senior in the region are not prepared for the interest, numbers, likes & dislikes of the baby boomers	Feb 16, 2010 8:00 PM
21	At least not financially	Feb 16, 2010 9:41 PM
22	update - needs a facelift	Feb 17, 2010 2:49 AM
23	Not enough money or services to assist this population in living in their homes.	Feb 17, 2010 1:47 PM
24	Maybe not. But if they will listen to the people that work with this population group everyday they will begin to see what we see and hear what we hear regarding needs and concerns.	Feb 17, 2010 2:52 PM
25	Funding needs will be great, but grant funding is stretched too far.	Feb 17, 2010 6:09 PM
26	I think funding is grossly inadequate. Especially during this economic downturn, our county, which has put millions of dollars in IHA, ADC and Nutrition, is looking at cutting back and these dollars are on the table. Even with the county money, we were turning people away.	Feb 17, 2010 6:16 PM
27	I do not feel we are at a point to be fully prepared due to funding structures and lack of additional money for services	Feb 17, 2010 6:25 PM
28	Insufficient funding to meet needs.	Feb 17, 2010 8:21 PM
29	Available services and funding are totally inadequate. Long-term care is totally outdated...too little for in-home care and facility care in even the best facilities is for most of us a very bad last resort for care.	Feb 17, 2010 8:38 PM
30	NC is already in a financial crisis.	Feb 17, 2010 9:59 PM
31	Currently OAA funding is being rationed and targeted to certain populations. With the age wave, and with older adults living longer and needing more services, a better way of targeting would be to up the age to 65 for eligibility, and to have a future plan that would some day up the age to 70. By limiting the field of participants to the most needy, which for the most part could be the older cohorts (functionality declines with age), a better targeting strategy would be in place for rationing limited funds. The fact that the OAA has never increased the eligibility age is a major weakness, as older adults are more healthy, better educated, and more self-sufficient than they were when the Act was created in the mid-sixties.	Feb 18, 2010 2:58 PM
32	I'm not sure anyone is really ready for this crisis. These individuals are much more demanding than the current client we deal with and have an entitlement attitude which will be a challenge when we have no way to exclude from service.	Feb 18, 2010 4:36 PM
33	The Baby boomers are very technology savvy and I am not sure any of us are prepared to deal with or keep up with.	Feb 18, 2010 5:02 PM
34	On some levels, yes, but more flexibility is needed to meet these changing needs.	Feb 18, 2010 5:42 PM
35	I know that the age wave is being recognized by the AOA, but unsure how to translate this into legislation.	Feb 19, 2010 4:00 PM

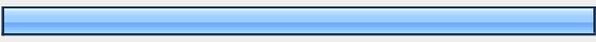
Comments:		
36	This is not a "yes" or "no" question. Some local providers have been working to try to prepare for the cultural differences between the Boomers and their predecessors. On the other hand, the growth in people who need services is already outstripping the growth of funds in many areas. In addition, at least within this state, there is little preparation for the massive nearly simultaneous retirement of the most experienced and knowledgeable members of our aging network.	Feb 19, 2010 6:41 PM
37	Not enough vision or preparation for onslaught of older adults.	Feb 19, 2010 9:45 PM
38	The funding level is not enough to provide the current needs much less plan for future needs and provide those services.	Feb 19, 2010 11:55 PM
39	The budget need to be increased more, so we may assist more seniors in many programs.	Feb 20, 2010 12:17 AM

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

If you answered No in question 2, how could the OAA be better prepared to deal with the Age Wave? (Check all that apply)			
		Response Percent	Response Count
Introduce new programs targeting this group		47.8%	55
Introduce new grant initiatives targeting this group		58.3%	67
Increased funding		76.5%	88
More state flexibility		48.7%	56
Other (please specify)		13.9%	16
		answered question	115
		skipped question	131

Other (please specify)		
1	More flexible grant initiatives with emphasis on innovation and services rather than infrastructure building or research; longer grant period (e.g., 5 years)	Feb 11, 2010 5:03 AM
2	More control at community level as each community is different.	Feb 11, 2010 2:25 PM
3	more local provider flexibility	Feb 11, 2010 3:25 PM
4	make sure CAP/DA stays viable	Feb 11, 2010 3:52 PM
5	LOCAL GOVERNMENT HAVE CONTROL OF STATE/FEDERAL OVERSIGHT OF THE PROGRAMS	Feb 11, 2010 4:22 PM
6	More local flexibility	Feb 15, 2010 4:45 PM
7	thourly evaluate what is in place now and focus on short comings	Feb 15, 2010 7:42 PM
8	PROVIDE INCENTIVES FOR THIS GROUP TO ASSIST PROVIDERS IN DELIVERY OF SERVICES	Feb 15, 2010 7:51 PM
9	nutrition education	Feb 16, 2010 2:04 AM
10	adopt a life course approach rather than "targeting" old people	Feb 16, 2010 1:04 PM
11	More flexaility at the local level for program like CN Vouchers program	Feb 16, 2010 8:00 PM
12	Get out of the office, be open mined, and listen.	Feb 17, 2010 2:52 PM
13	turn the long-term care system on its head with the vast majority of funding available for in-home supports tailored to an individuals needs and wishes and a totally revamped nursing facility with person-centered care and more home-like atmosphere available for those who cannot remain at home.	Feb 17, 2010 8:38 PM
14	Project 20/20 and see above comments about age eligibility.	Feb 18, 2010 2:58 PM
15	Dont spend money targeting boomer - boomers are the me generation - they will find us. Put more money in Congregate, HMB and Transportation	Feb 18, 2010 5:16 PM
16	Allow county planning committees to decide how to distribute new funding for their county.	Feb 19, 2010 4:17 PM

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

Please list the top three aspects of the Older Americans Act that you want to make sure are maintained.				
			Response Percent	Response Count
*			100.0%	74
*			91.9%	68
*			83.8%	62
			answered question	74
			skipped question	172

*		
1	Nutrition	Feb 10, 2010 10:55 PM
2	FCSP	Feb 10, 2010 11:51 PM
3	HCCBG Programs-In Home Aide	Feb 11, 2010 2:39 AM
4	dementia specific programs	Feb 11, 2010 5:03 AM
5	meals	Feb 11, 2010 1:14 PM
6	Ombudsman program	Feb 11, 2010 2:05 PM
7	Congregate & Home delivered meals - with modifications	Feb 11, 2010 2:25 PM
8	Independence and choice	Feb 11, 2010 2:57 PM
9	In home care	Feb 11, 2010 3:25 PM
10	Title VII Elder Abuse Prevention Awarenes	Feb 11, 2010 3:30 PM
11	CAP/DA the alternative for Nursing Home Placement	Feb 11, 2010 3:52 PM
12	EVERYTHING related to improvement of Long Term Care facilities/services	Feb 11, 2010 3:56 PM
13	MEALS	Feb 11, 2010 4:22 PM
14	In home aide services and Caregiver support	Feb 11, 2010 5:15 PM
15	Regional Long-Term Care Ombudsman Program	Feb 11, 2010 7:01 PM
16	Senior Nutriton Program	Feb 11, 2010 7:10 PM
17	Senior employment	Feb 12, 2010 1:43 PM
18	Lighter APS caseloads	Feb 12, 2010 2:48 PM
19	Nutrition	Feb 12, 2010 6:51 PM
20	volunteering	Feb 15, 2010 12:32 PM
21	Meals On Wheels	Feb 15, 2010 3:13 PM
22	Maintain Information and Assitance	Feb 15, 2010 3:23 PM
23	Better Medical Care	Feb 15, 2010 3:24 PM
24	Nutrition	Feb 15, 2010 4:34 PM
25	Ombudman Program	Feb 15, 2010 5:49 PM
26	Support Services in the Home	Feb 15, 2010 6:27 PM
27	Support for aging in place programs. This means funding for home retrofitting, assistive technology, and needed in home services.	Feb 15, 2010 6:44 PM
28	Ombudsman program	Feb 15, 2010 7:42 PM

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29	IN HOME AIDE	Feb 15, 2010 7:51 PM
30	Home Delivered Meals	Feb 15, 2010 7:52 PM
31	support for facility care when appropriate	Feb 15, 2010 8:00 PM
32	Flexibility of FCSP	Feb 15, 2010 8:54 PM
33	Title III - In-home services	Feb 16, 2010 1:41 AM
34	Elder Abuse	Feb 16, 2010 1:28 PM
35	In Home Care	Feb 16, 2010 1:29 PM
36	senior centers and services	Feb 16, 2010 1:48 PM
37	Funding for Ombudsman Program & Adult Protective Services - Abuse, Neglect & Exploitation	Feb 16, 2010 2:35 PM
38	Senior Center Operations	Feb 16, 2010 3:31 PM
39	Congregate/Home Delivered Meals	Feb 16, 2010 4:58 PM
40	Senior Centers at the local level	Feb 16, 2010 5:01 PM
41	Nutrition Programs to stay in place	Feb 16, 2010 8:00 PM
42	Title III programs	Feb 16, 2010 9:39 PM
43	Aging network	Feb 16, 2010 9:41 PM
44	consumer contributions	Feb 17, 2010 2:49 AM
45	SCSEP	Feb 17, 2010 1:32 PM
46	Caregiver Programs	Feb 17, 2010 1:47 PM
47	home-delivered meals	Feb 17, 2010 2:05 PM
48	Nutrition Monies	Feb 17, 2010 2:50 PM
49	Keep focused on the again folks	Feb 17, 2010 2:52 PM
50	Meals	Feb 17, 2010 4:08 PM
51	The Network	Feb 17, 2010 5:15 PM
52	Targeting Low Income and under served populations	Feb 17, 2010 6:16 PM
53	Funding for Older Adults at sustainable levels for enhanced service	Feb 17, 2010 6:25 PM
54	in-home aide program, services for home care	Feb 17, 2010 8:21 PM
55	Supportive services including nutrition, in-home aide, and transportation	Feb 17, 2010 8:38 PM
56	Congregate Nutrition	Feb 17, 2010 9:59 PM
57	Nutrition	Feb 17, 2010 10:04 PM
58	Ombudsman Program	Feb 18, 2010 2:37 AM
59	Home and Community Care Block Grants	Feb 18, 2010 2:35 PM
60	T- III B C and E (FCSP)	Feb 18, 2010 2:58 PM
61	Elderly Nutrition	Feb 18, 2010 4:36 PM
62	Area Agency on AGing	Feb 18, 2010 5:02 PM
63	Congregate	Feb 18, 2010 5:16 PM
64	National Nutrition Program	Feb 18, 2010 7:46 PM
65	Community Services	Feb 18, 2010 7:50 PM
66	Prevention	Feb 19, 2010 3:16 PM
67	funding	Feb 19, 2010 4:00 PM
68	HCCBG funding needs to increase or stay the same at a minimum	Feb 19, 2010 4:17 PM
69	Meals	Feb 19, 2010 4:22 PM
70	Nutrition - Congregate and Home Delivered Meals	Feb 19, 2010 5:00 PM
71	Community and In Home Programs	Feb 19, 2010 9:45 PM
72	Auth. to SUA	Feb 19, 2010 11:55 PM

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73	Title VII	Feb 20, 2010 12:17 AM
74	Health Promotion and Wellness	Feb 20, 2010 5:57 PM

*		
1	Transportation	Feb 10, 2010 10:55 PM
2	All Title III programs	Feb 10, 2010 11:51 PM
3	Meals on Wheels	Feb 11, 2010 2:39 AM
4	caregiver support	Feb 11, 2010 5:03 AM
5	legal aide	Feb 11, 2010 1:14 PM
6	Meals for the elderly	Feb 11, 2010 2:05 PM
7	Funding senior centers	Feb 11, 2010 2:25 PM
8		Feb 11, 2010 2:57 PM
9	Family Caregivers	Feb 11, 2010 3:25 PM
10	LTC Ombudsman Program	Feb 11, 2010 3:30 PM
11		Feb 11, 2010 3:52 PM
12	Caregiver support services	Feb 11, 2010 3:56 PM
13	TRANSPORTATION	Feb 11, 2010 4:22 PM
14	Nutrition nutrition nutrition	Feb 11, 2010 5:15 PM
15	Nurtition Services (Congregate and Home-Delivered)	Feb 11, 2010 7:01 PM
16	Protection of Senior Citizens	Feb 11, 2010 7:10 PM
17	Legal Services	Feb 12, 2010 1:43 PM
18	More transportation in rural areas that is not income based	Feb 12, 2010 2:48 PM
19	Ombudsman Program	Feb 12, 2010 6:51 PM
20	HBM	Feb 15, 2010 12:32 PM
21	Senior Centers	Feb 15, 2010 3:13 PM
22	Expand family caregiver services	Feb 15, 2010 3:23 PM
23	Better assistance with Nutrition	Feb 15, 2010 3:24 PM
24	Legal	Feb 15, 2010 4:34 PM
25	Elder Abuse	Feb 15, 2010 5:49 PM
26	Funding for fighting abuse, neglect and exploitation at home and in facilities	Feb 15, 2010 6:27 PM
27	Elder justice, which in my opinion should include non-discrimination in employment as society will be dependent on maintining older workers in the workforce if they are willing and able.	Feb 15, 2010 6:44 PM
28	Block grants	Feb 15, 2010 7:42 PM
29	HOME DELIVERED MEALS	Feb 15, 2010 7:51 PM
30	Congregate Nutrition	Feb 15, 2010 7:52 PM
31	support for home based services	Feb 15, 2010 8:00 PM
32	Funding to senior centers	Feb 15, 2010 8:54 PM
33	Supportive Services and Senior Centers	Feb 16, 2010 1:41 AM
34	Caregiver Support and Respite Programs	Feb 16, 2010 1:28 PM
35	Respite	Feb 16, 2010 1:29 PM
36	medicare assistance	Feb 16, 2010 1:48 PM
37	Provision of Serivces to foster independence such as HCCBG funding for In-Home Services, SA In-Home Services, etc.	Feb 16, 2010 2:35 PM
38	Information and Assistance	Feb 16, 2010 3:31 PM
39	Ombudsman Program	Feb 16, 2010 4:58 PM

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40	Home delivered meals	Feb 16, 2010 5:01 PM
41	General transportation is ongoing	Feb 16, 2010 8:00 PM
42	Alzheimer's Demonstration Project	Feb 16, 2010 9:39 PM
43	Advocacy	Feb 16, 2010 9:41 PM
44	not needs based on eligibility	Feb 17, 2010 2:49 AM
45		Feb 17, 2010 1:32 PM
46	Livable Communities	Feb 17, 2010 1:47 PM
47	congregate meals	Feb 17, 2010 2:05 PM
48	Ombudsman	Feb 17, 2010 2:50 PM
49	Don't re-invent the wheel, make the working programs better	Feb 17, 2010 2:52 PM
50	In Home Aides	Feb 17, 2010 4:08 PM
51	Title III	Feb 17, 2010 5:15 PM
52	Caregiver Support Funding	Feb 17, 2010 6:16 PM
53	Caregiver Initiative with enhancements	Feb 17, 2010 6:25 PM
54	support programs especially to reduce isolation	Feb 17, 2010 8:21 PM
55	supports for family caregivers	Feb 17, 2010 8:38 PM
56	Transportation	Feb 17, 2010 9:59 PM
57	HPDP Title III D	Feb 17, 2010 10:04 PM
58		Feb 18, 2010 2:37 AM
59		Feb 18, 2010 2:35 PM
60	T- VII Elder Rights	Feb 18, 2010 2:58 PM
61	In Home Aide Services	Feb 18, 2010 4:36 PM
62	Ombudsman Program	Feb 18, 2010 5:02 PM
63	Transportation	Feb 18, 2010 5:16 PM
64	Area Agencies on Aging	Feb 18, 2010 7:46 PM
65	Family Caregiver Support	Feb 18, 2010 7:50 PM
66		Feb 19, 2010 3:16 PM
67	new program initiatives	Feb 19, 2010 4:00 PM
68	FCSP funding needs to be increased or at a minimum remain the same.	Feb 19, 2010 4:17 PM
69	Transportation	Feb 19, 2010 4:22 PM
70	Elder Rights - Ombudsman Program	Feb 19, 2010 5:00 PM
71	FCSP	Feb 19, 2010 9:45 PM
72	Role of the AAA as a non service provider	Feb 19, 2010 11:55 PM
73	Title IV	Feb 20, 2010 12:17 AM
74	Support for Senior Centers	Feb 20, 2010 5:57 PM

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1		Feb 10, 2010 10:55 PM
2	Basic integrity of the Act	Feb 10, 2010 11:51 PM
3	Adult Day Health Programs	Feb 11, 2010 2:39 AM
4	respite care service provision	Feb 11, 2010 5:03 AM
5	socialization for the elderly	Feb 11, 2010 1:14 PM
6	home-centered care	Feb 11, 2010 2:05 PM
7	Caregiver support	Feb 11, 2010 2:25 PM
8		Feb 11, 2010 2:57 PM

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9	transportation	Feb 11, 2010 3:25 PM
10	Legal Assistance Development Program	Feb 11, 2010 3:30 PM
11		Feb 11, 2010 3:52 PM
12	Supportive services and senior centers	Feb 11, 2010 3:56 PM
13	SENIOR CENTERS	Feb 11, 2010 4:22 PM
14	Senior Center operations	Feb 11, 2010 5:15 PM
15	Family Caregiver Support Program	Feb 11, 2010 7:01 PM
16	Provisions for Senior Centers	Feb 11, 2010 7:10 PM
17	Elder Abuse protection	Feb 12, 2010 1:43 PM
18	Guaranteed medical insurance that will not bankrupt us	Feb 12, 2010 2:48 PM
19	IHA programs	Feb 12, 2010 6:51 PM
20	ENP	Feb 15, 2010 12:32 PM
21	Title Five Program	Feb 15, 2010 3:13 PM
22		Feb 15, 2010 3:23 PM
23	Better support for transportation	Feb 15, 2010 3:24 PM
24	In-Home Aide services	Feb 15, 2010 4:34 PM
25	Programs that will allow individuals remain at home as long as possible	Feb 15, 2010 5:49 PM
26	Outreach to the most vulnerable population	Feb 15, 2010 6:27 PM
27	Caregiver respite funding	Feb 15, 2010 6:44 PM
28	Support of senior centers	Feb 15, 2010 7:42 PM
29	MEDICARE FRAUD PATROL	Feb 15, 2010 7:51 PM
30	Transportation	Feb 15, 2010 7:52 PM
31	Ombudsman program	Feb 15, 2010 8:00 PM
32	Funding for nutrition sites	Feb 15, 2010 8:54 PM
33	National Family Caregiver Support Program	Feb 16, 2010 1:41 AM
34	Council of Government as an oversight agency (COG's)	Feb 16, 2010 1:28 PM
35	Meals Programs	Feb 16, 2010 1:29 PM
36	more new program	Feb 16, 2010 1:48 PM
37	Transportation Services to assist clients to medical appointments & to errands.	Feb 16, 2010 2:35 PM
38	In Home Aide	Feb 16, 2010 3:31 PM
39	Family Caregiver Support Program	Feb 16, 2010 4:58 PM
40	County flexibility in utilization of the available funds	Feb 16, 2010 5:01 PM
41	IHA program Level 2 & 3 to have funding increase to prolong seniors stay at home	Feb 16, 2010 8:00 PM
42		Feb 16, 2010 9:39 PM
43	Planning	Feb 16, 2010 9:41 PM
44	flexibility maintained & improved	Feb 17, 2010 2:49 AM
45		Feb 17, 2010 1:32 PM
46	Wellness programs	Feb 17, 2010 1:47 PM
47	general transportation	Feb 17, 2010 2:05 PM
48	Family Caregiver	Feb 17, 2010 2:50 PM
49	Funding, funding, funding.	Feb 17, 2010 2:52 PM
50	Transportation	Feb 17, 2010 4:08 PM
51	Family Caregiver	Feb 17, 2010 5:15 PM
52	Flexibility for the States and local communities	Feb 17, 2010 6:16 PM
53	Remain services for 60 population without regard to disability	Feb 17, 2010 6:25 PM

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54	health related programs including emotional health	Feb 17, 2010 8:21 PM
55	caring across all socio-economic levels and including preventative as well as supportive servives	Feb 17, 2010 8:38 PM
56	Meals On Wheels	Feb 17, 2010 9:59 PM
57	Ombudsman	Feb 17, 2010 10:04 PM
58		Feb 18, 2010 2:37 AM
59		Feb 18, 2010 2:35 PM
60	AOA Discretionary Programs (ie Alzheimers Demonstrations, ADRCs, CDSMP, etc.)	Feb 18, 2010 2:58 PM
61	Care Giver Support Programs	Feb 18, 2010 4:36 PM
62		Feb 18, 2010 5:02 PM
63	In home aid	Feb 18, 2010 5:16 PM
64	Caregiver Support Programs	Feb 18, 2010 7:46 PM
65	Long Term Care Ombudsman	Feb 18, 2010 7:50 PM
66		Feb 19, 2010 3:16 PM
67	building on state/federal working relationships	Feb 19, 2010 4:00 PM
68	Funding for Senior Center operations/construction need to be increased.	Feb 19, 2010 4:17 PM
69	Respite	Feb 19, 2010 4:22 PM
70	In-Home Services	Feb 19, 2010 5:00 PM
71		Feb 19, 2010 9:45 PM
72		Feb 19, 2010 11:55 PM
73	Title III	Feb 20, 2010 12:17 AM
74	In-Home Assistance	Feb 20, 2010 5:57 PM

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

Please list the top three changes you would like to see made to the OAA through the reauthorization process to strengthen the Act.				
			Response Percent	Response Count
*			100.0%	59
*			79.7%	47
*			62.7%	37
<i>answered question</i>				59
<i>skipped question</i>				187

*		
1	More Targeted Programs	Feb 10, 2010 10:49 PM
2	Flexibility in target audience served with funds	Feb 10, 2010 11:51 PM
3	more funding	Feb 11, 2010 2:39 AM
4	more funding for caregiver support	Feb 11, 2010 5:03 AM
5	more PR--get the word out	Feb 11, 2010 1:14 PM
6	End of Life education, services	Feb 11, 2010 2:05 PM
7	More funds	Feb 11, 2010 2:25 PM
8	Dedicated funding for senior centers	Feb 11, 2010 2:47 PM
9	More flexibility to local providers	Feb 11, 2010 3:25 PM
10	Revisit role of AAAs	Feb 11, 2010 3:56 PM
11	FUNDS COME DIRECTLY TO LOCAL GOVERNMENT	Feb 11, 2010 4:22 PM
12	Increase County flexibility with funds tied to POMP	Feb 11, 2010 5:15 PM
13	More funding/increased pay for North Carolina Ombudsmen	Feb 11, 2010 7:01 PM
14	Title V 55 & Beyond Training Program	Feb 11, 2010 7:10 PM
15	Provide funding for Adult Protective Services	Feb 12, 2010 1:43 PM
16	Title V to WIA	Feb 12, 2010 6:51 PM
17	Demand educational standards for staff	Feb 15, 2010 3:23 PM
18	increased funding	Feb 15, 2010 4:34 PM
19	Ombudsman Program	Feb 15, 2010 5:49 PM
20	Increased Funding	Feb 15, 2010 6:27 PM
21	Strengthen support of transportation for everybody	Feb 15, 2010 6:44 PM
22	Not sure	Feb 15, 2010 7:42 PM
23	Standards need revising	Feb 15, 2010 7:52 PM
24	Increase standards and oversight of group homes	Feb 15, 2010 8:00 PM
25	Added tax break for caregivers of older adults	Feb 15, 2010 8:54 PM
26	Do not feel qualified to recommend	Feb 16, 2010 1:41 AM
27	increase funding for APS/Elder Abuse	Feb 16, 2010 1:28 PM

*		
28	additional funding	Feb 16, 2010 1:29 PM
29	funding for on-going and new programs	Feb 16, 2010 1:48 PM
30	More funding for Adult Protective Services to provide services after substantiation to provide protection.	Feb 16, 2010 2:35 PM
31	Strengthen Critical Services	Feb 16, 2010 4:58 PM
32	Wide blitz / public education of the funds & their purpose	Feb 16, 2010 5:01 PM
33	The age limit maybe change for the extreme disabled starting at 55	Feb 16, 2010 8:00 PM
34	More funding	Feb 16, 2010 9:41 PM
35	more local flexibility with funding	Feb 17, 2010 2:49 AM
36	More Flexibility	Feb 17, 2010 1:47 PM
37	More authority to ombudsmen program	Feb 17, 2010 1:50 PM
38	more funding to reach the demand	Feb 17, 2010 2:50 PM
39	Take time to get a better understanding of what the needs are	Feb 17, 2010 2:52 PM
40	Senior Services should be mandatory at the county level.	Feb 17, 2010 4:08 PM
41	Expand the Network	Feb 17, 2010 5:15 PM
42	Strengthen Outcomes for Elder Abuse education projects	Feb 17, 2010 6:16 PM
43	Prevention of and addressing elder abuse	Feb 17, 2010 8:21 PM
44	increased flexibility for states and local communities	Feb 17, 2010 8:38 PM
45	increase funding	Feb 17, 2010 10:04 PM
46	Relate funding to number of older Americans	Feb 18, 2010 2:35 PM
47	Move the eligibility age up to 65	Feb 18, 2010 2:58 PM
48	Greater Flexibility for the states	Feb 18, 2010 4:36 PM
49	Increased number and funding for Ombudsman	Feb 18, 2010 5:02 PM
50	lose I&A - not enough return on investment.	Feb 18, 2010 5:16 PM
51	Strengthen Adult Protective and Legal Services	Feb 18, 2010 7:46 PM
52	Have one Title 111 authorization	Feb 18, 2010 7:50 PM
53	Needs to include funding for remodeling or construction of new Senior Centers to replace old centers.	Feb 19, 2010 4:17 PM
54	more resources for aging group	Feb 19, 2010 4:46 PM
55	Increased Funding to meet needs of age wave	Feb 19, 2010 5:00 PM
56	Flexibility with Ombudsman Program	Feb 19, 2010 9:45 PM
57	fund ADRC as a regular program	Feb 19, 2010 11:55 PM
58	Increased Funding	Feb 20, 2010 12:17 AM
59	More state flexibility to determine funding	Feb 20, 2010 5:57 PM

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1	Higher Funding	Feb 10, 2010 10:49 PM
2	Increased support for caregivers	Feb 10, 2010 11:51 PM
3	more training	Feb 11, 2010 2:39 AM
4	more funding for respite care	Feb 11, 2010 5:03 AM
5	more cooperation between Adult Services and Aging	Feb 11, 2010 1:14 PM
6		Feb 11, 2010 2:05 PM
7	More flexibility at the community level	Feb 11, 2010 2:25 PM
8	More flexibility with nutrition program	Feb 11, 2010 2:47 PM
9	More funding	Feb 11, 2010 3:25 PM

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10		Feb 11, 2010 3:56 PM
11	TAX BREAK FOR CORPORATIONS/INDIVIDUALS MAKING DONATIONS TO ELDER PROGRAMS	Feb 11, 2010 4:22 PM
12	Require ADRC's	Feb 11, 2010 5:15 PM
13	More funding for Nutrition Services (Congregate and Home-Delivered)	Feb 11, 2010 7:01 PM
14	Legal Aid Services	Feb 11, 2010 7:10 PM
15	Redefine ombudsman duties and provide more oversight for outcomes with this program. It seems to function as a social program not a program that benefits those in facilities.	Feb 12, 2010 1:43 PM
16	Legal to LSC	Feb 12, 2010 6:51 PM
17	Include clinical counseling in caregiver program	Feb 15, 2010 3:23 PM
18		Feb 15, 2010 4:34 PM
19	Elder Abuse	Feb 15, 2010 5:49 PM
20	Increased oversight to the programs provided	Feb 15, 2010 6:27 PM
21	Strengthen mental health services for older adults	Feb 15, 2010 6:44 PM
22		Feb 15, 2010 7:42 PM
23	Increase funding	Feb 15, 2010 7:52 PM
24	Apply governing standards to all congregate settings	Feb 15, 2010 8:00 PM
25		Feb 15, 2010 8:54 PM
26		Feb 16, 2010 1:41 AM
27	increase funding for Caregiver Support	Feb 16, 2010 1:28 PM
28	separation of recreational vs intervention programs	Feb 16, 2010 1:29 PM
29	more flexibility to meet state and local needs	Feb 16, 2010 1:48 PM
30	New programs for older Americans who are not elderly but need minor assistance and socialization.	Feb 16, 2010 2:35 PM
31	Local Flexibility	Feb 16, 2010 4:58 PM
32	Less flexibility at the AAA level for use of the funds.	Feb 16, 2010 5:01 PM
33	Transportaion for extreme disabled starting at age 55	Feb 16, 2010 8:00 PM
34	Greater state flexibility	Feb 16, 2010 9:41 PM
35	update-ability in programs	Feb 17, 2010 2:49 AM
36	Better understanding of boomers needs	Feb 17, 2010 1:47 PM
37	Expand on mental health services	Feb 17, 2010 1:50 PM
38	more public awareness	Feb 17, 2010 2:50 PM
39	Don't make rules or mandates that you don't fund	Feb 17, 2010 2:52 PM
40		Feb 17, 2010 4:08 PM
41	Incorporate Project 2020 Initatives more strongly	Feb 17, 2010 5:15 PM
42		Feb 17, 2010 6:16 PM
43		Feb 17, 2010 8:21 PM
44		Feb 17, 2010 8:38 PM
45	update/modernize terminology, definitions, etc.	Feb 17, 2010 10:04 PM
46		Feb 18, 2010 2:35 PM
47	Enable consumer directed service to be funded as a service like other T-III services as opposed to being a mechanism for servcie delivery. This change would facilitate the growth of this choice/empowerment option for many older adults, especially for boomers who will expect to have these options.	Feb 18, 2010 2:58 PM
48	Increased Funding	Feb 18, 2010 4:36 PM
49		Feb 18, 2010 5:02 PM

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50	Lose Volunteer dev. - not enough return on investment	Feb 18, 2010 5:16 PM
51	Better Community Planning for Aging	Feb 18, 2010 7:46 PM
52	Gives states more flexibility	Feb 18, 2010 7:50 PM
53	Why does it have minimum percentages to certain programs. Certainly the country is not the same all over, and changes occur constantly. Can't you trust the counties to do the right thing for their residents.	Feb 19, 2010 4:17 PM
54	preventive programs	Feb 19, 2010 4:46 PM
55	More state flexibility	Feb 19, 2010 5:00 PM
56	Greater emphasis on Preventative health care programs	Feb 19, 2010 9:45 PM
57	Give SUA authority to designate ADRC	Feb 19, 2010 11:55 PM
58	New grant initiative	Feb 20, 2010 12:17 AM
59	Requirement for more collaborative efforts with state and local agencies.	Feb 20, 2010 5:57 PM

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1	More State Flexibility	Feb 10, 2010 10:49 PM
2		Feb 10, 2010 11:51 PM
3	more education	Feb 11, 2010 2:39 AM
4	federal grant opportunities with more flexibility, longer grant periods and more realistic proposal deadlines (e.g., 90 days to allow adequate time for planning and preparation)	Feb 11, 2010 5:03 AM
5	mandatory training	Feb 11, 2010 1:14 PM
6		Feb 11, 2010 2:05 PM
7	Removing layers of bureaucracy.	Feb 11, 2010 2:25 PM
8	Expand housing and home improvement	Feb 11, 2010 2:47 PM
9	More financial assistance for the caregiver	Feb 11, 2010 3:25 PM
10		Feb 11, 2010 3:56 PM
11		Feb 11, 2010 4:22 PM
12	Require Dept of Social Services that receive OAA funding to comply with the same standards as Aging services agencies	Feb 11, 2010 5:15 PM
13	More funding/grants for Family Caregiver Support Program	Feb 11, 2010 7:01 PM
14	Mental Health	Feb 11, 2010 7:10 PM
15	More funding for legal services	Feb 12, 2010 1:43 PM
16	More programs preventing premature aging	Feb 12, 2010 6:51 PM
17	More funding for ADRCs to increase staff	Feb 15, 2010 3:23 PM
18		Feb 15, 2010 4:34 PM
19	Program that will allow individuals to remain at home as long as possible.	Feb 15, 2010 5:49 PM
20	Give equal attention to healthy and frail older adults	Feb 15, 2010 6:27 PM
21	Strengthen community efforts for aging in place	Feb 15, 2010 6:44 PM
22		Feb 15, 2010 7:42 PM
23	Training	Feb 15, 2010 7:52 PM
24	Educational programs for older americans re:available services	Feb 15, 2010 8:00 PM
25		Feb 15, 2010 8:54 PM
26		Feb 16, 2010 1:41 AM
27	more efficient evaluation with real consequences for underperforming programs	Feb 16, 2010 1:28 PM
28		Feb 16, 2010 1:29 PM
29		Feb 16, 2010 1:48 PM

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30	Innovative systems using new technology to monitor health and welfare of frail elderly that live alone (that is low cost).	Feb 16, 2010 2:35 PM
31	Address changes in the Aging population	Feb 16, 2010 4:58 PM
32	Specific & Identified allowable activities at the AAA level.	Feb 16, 2010 5:01 PM
33	Senoir Center need to offer more physical & recreation activities for baby boomers	Feb 16, 2010 8:00 PM
34		Feb 16, 2010 9:41 PM
35	strengthen grass-roots advocacy component	Feb 17, 2010 2:49 AM
36		Feb 17, 2010 1:47 PM
37	Better funding opportunities for ombudsmen.	Feb 17, 2010 1:50 PM
38	adapting the programs to meet the ever changing population	Feb 17, 2010 2:50 PM
39	Realize the providers can do the job required, just let us to it.	Feb 17, 2010 2:52 PM
40		Feb 17, 2010 4:08 PM
41	Expand Family Caregiver	Feb 17, 2010 5:15 PM
42		Feb 17, 2010 6:16 PM
43		Feb 17, 2010 8:21 PM
44		Feb 17, 2010 8:38 PM
45	allow more creativity	Feb 17, 2010 10:04 PM
46		Feb 18, 2010 2:35 PM
47	Incorporat Project 20/20 into the regular funding stream and move it out of discretionary status.	Feb 18, 2010 2:58 PM
48	Continued emphasis on keeping seniors in their own homes.	Feb 18, 2010 4:36 PM
49		Feb 18, 2010 5:02 PM
50		Feb 18, 2010 5:16 PM
51	Long Term Care Options-Education	Feb 18, 2010 7:46 PM
52		Feb 18, 2010 7:50 PM
53	Need to increase funding to allow for the predicted growth from the baby boomers aging.	Feb 19, 2010 4:17 PM
54	strategies to maintain current effective programs	Feb 19, 2010 4:46 PM
55	Less funding to Family Caregiver, more to in-home services	Feb 19, 2010 5:00 PM
56		Feb 19, 2010 9:45 PM
57	fund EBHP as a regular program	Feb 19, 2010 11:55 PM
58	More state flexibility	Feb 20, 2010 12:17 AM
59		Feb 20, 2010 5:57 PM

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

Some advocates may propose to add a new Title to the OAA during reauthorization, which would focus on Housing. Do you support such a change to the OAA?			Response Percent	Response Count
Yes			45.2%	56
No			21.8%	27
Not Sure			33.1%	41
			Comments:	23
			answered question	124
			skipped question	122

Comments:		
1	We already have housing people, just work with them more.	Feb 11, 2010 1:14 PM
2	As long as it doesn't take funding away from other programs - especially rehabilitation of existing housing.	Feb 11, 2010 2:25 PM
3	It is difficult to deliver services without an adequate place to deliver them!	Feb 11, 2010 2:47 PM
4	AFFORDABLE housing is what matters	Feb 11, 2010 3:56 PM
5	Would be very beneficial	Feb 11, 2010 5:15 PM
6	Housing is fragmented. Make it a one call service.	Feb 15, 2010 3:23 PM
7	Affordable housing is needed for older adults	Feb 15, 2010 6:27 PM
8	Accessible and affordable housing is key to aging in place	Feb 15, 2010 6:44 PM
9	Lets focus on what we have now	Feb 15, 2010 7:42 PM
10	Don't take away funding from the programs already receiving funding. New program needs more funding	Feb 15, 2010 7:52 PM
11	This is an increasing problem for all Americans especially the elderly	Feb 16, 2010 12:27 PM
12	more fragmentation	Feb 16, 2010 1:04 PM
13	with adequate funding not impacting existing programs	Feb 16, 2010 1:29 PM
14	Low cost housing is a big problem in our area.	Feb 16, 2010 2:35 PM
15	affordable & accessible housing is an issue & services with housing are verbalized jointly yet keep funding separately	Feb 17, 2010 2:49 AM
16	I believe that a "shared housing program" should be put in place. Someone needs to help pair older people up so they can share in the cost, and expenses of a home and food. It would help with loneliness, watching out for each other and so many other benefits.	Feb 17, 2010 2:52 PM
17	Addressing housing needs allows people to remain in their homes.	Feb 17, 2010 6:09 PM
18	Millions of Foreclosures in spite of refinancing process	Feb 17, 2010 9:59 PM
19	Only if it is high quality housing..we don't need HUD units.	Feb 17, 2010 11:14 PM
20	Housing is a major issue but from my prospective, it is more important to keep seniors in their own home rather focusing on building housing to warehouse them.	Feb 18, 2010 4:36 PM
21	We have Hud for that	Feb 18, 2010 5:16 PM

Comments:

22	There are many seniors that can not afford decent housing. Waiting lists for low-income subsidized housing can be several years long.	Feb 19, 2010 4:17 PM
23	Housing, and more particularly housing adaptation, is an essential need that is not being met. On the other hand, I would not like to see an increase in this area if it took money from other OAA programs	Feb 19, 2010 6:41 PM

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

Do you support a distinct federal agency and federal funding stream for people with physical disabilities, separate from aging?			Response Percent	Response Count
Yes			45.5%	56
No			31.7%	39
Not Sure			22.8%	28
			Comments:	24
			answered question	123
			skipped question	123

Comments:		
1	We don't need another agency--just get the ones who are there to do it.	Feb 11, 2010 1:14 PM
2	People with physical disabilities of any age have very different needs from the elderly.	Feb 11, 2010 2:05 PM
3	People with disabilities are WHOLE people with many needs	Feb 11, 2010 3:56 PM
4	We already have too many siloes--but if there is not a separate agency, the Administration on Aging should change its name to reflect a broader population	Feb 11, 2010 4:50 PM
5	Aging and Adult Services for adults with disabilities go hand in hand as the ADRC's have proven. Combined funding should be an option for aging services providers poised to offer both groups of services.	Feb 11, 2010 5:15 PM
6	Their needs are too similar	Feb 12, 2010 2:48 PM
7	We have enough agencies already	Feb 12, 2010 5:21 PM
8	We do not need any more federal meddling-high cost with little money actually going to clients.	Feb 15, 2010 1:36 PM
9	It conflicts with the ADRC concept	Feb 15, 2010 3:23 PM
10	Both populations have many of the same needs. I see the younger disabled population currently missing needed services such as Home and Community Block Grant and Adult Day Care Services because of their age.	Feb 15, 2010 6:27 PM
11	The federal government established the ADRC's so it makes sense to keep them together going forward and not establishing two agencies that will have to cooperate all the time.	Feb 15, 2010 6:44 PM
12	I don't separation would work very well for seniors who are also disabled.	Feb 15, 2010 7:42 PM
13	more fragmentation	Feb 16, 2010 1:04 PM
14	Fear would be that this is just layering the bureaucracy more and not effective use of funding in a time when efficiencies are most needed.	Feb 16, 2010 1:28 PM
15	Lumping both together does a disservice to all	Feb 16, 2010 1:29 PM
16	Those with physical disabilities tend to be younger.	Feb 16, 2010 4:58 PM
17	At what age or a what disability do you cross over to the next?	Feb 17, 2010 2:52 PM
18	I feel these are two totally separate populations unless the disabled individual is over 60	Feb 17, 2010 6:25 PM

Comments:		
19	I believe younger people with disabilities often fall through the cracks. Whether the answer is expanding OAA services to include them or having a separate agency and funding stream I'm not sure.	Feb 17, 2010 8:38 PM
20	Need of financial support is greater for the people with disabilities	Feb 17, 2010 9:59 PM
21	Too often we are seeing the mentally ill, many with violent tendencies, housed with the frail elderly. If the issue is strictly physical disabilities it isn't so important that they be seperated.	Feb 18, 2010 4:36 PM
22	Only because of the age differences	Feb 19, 2010 4:00 PM
23	No. They already have access to all of the programs that a non-disabled person has. Why should they be singled out for special treatment..	Feb 19, 2010 4:17 PM
24	I agree there needs to be a federal agency but it should be integrated with AoA and not ANOTHER stand alone agency.	Feb 19, 2010 11:55 PM

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

Do you support broadening the scope of the Older Americans Act and the work of the Administration on Aging to include people with physical disabilities?			Response Percent	Response Count
Yes			47.6%	60
No			29.4%	37
Not Sure			23.0%	29
			Comments:	25
			answered question	126
			skipped question	120

Comments:		
1	go for it.	Feb 11, 2010 1:14 PM
2	That's like curing world hunger. Each group of people need services that address their specific deficits. Their place financially, within the family, and their role in life are very different. A person with physical disabilities my still desire to work. An older American may need more advocacy for being able to retire with dignity.	Feb 11, 2010 2:05 PM
3	It would become too cumbersome.	Feb 11, 2010 2:25 PM
4	Seniors	Feb 11, 2010 3:56 PM
5	background and philosophies of people with physical disabilities and Administration on Aging are totally different--it would have to be more than just name changing, and would have to be more than just a surface change. With the age wave coming, I am afraid that people with physical disabilities would be lost. On the other hand, it is an artificial distinction to separate the two.	Feb 11, 2010 4:50 PM
6	Absolutely. The community of service providers for people with physical disabilities need the senior centers as points of outreach / program delivery,	Feb 11, 2010 5:15 PM
7	If disabled and a Senior Citizen, yes.	Feb 11, 2010 7:10 PM
8	The needs are so different, these two programs need separation	Feb 12, 2010 1:43 PM
9	Already have a disability acat	Feb 15, 2010 1:36 PM
10	It is crazy to deny meals to disabled people under 60	Feb 15, 2010 3:23 PM
11	feel that this should be separate and regulated differently	Feb 15, 2010 3:45 PM
12	I support this move if more funding will be provided to serve the disabled population.	Feb 15, 2010 6:27 PM
13	In the aging services we already get a lot of referrals for people with disabilities who are younger and it would make for a smoother service if we could also serve this group from the same funding source.	Feb 15, 2010 6:44 PM
14	People with disabilities are most likely to better understand the nature of others with disabilities	Feb 15, 2010 7:42 PM
15	in a life course context	Feb 16, 2010 1:04 PM
16	Young disabled persons do not minx/interact with aging.	Feb 16, 2010 3:39 PM
17	Define disabilities, only higher level disabilities should be considered.	Feb 16, 2010 6:17 PM

Comments:		
18	Fits with CRC	Feb 16, 2010 9:41 PM
19	As long as they do not get first priority, only after the 60 and older are helped.	Feb 17, 2010 2:05 PM
20	Have seen this work in smaller settings	Feb 17, 2010 2:50 PM
21	You can't always separate the two.	Feb 17, 2010 2:52 PM
22	If they are of age	Feb 17, 2010 8:09 PM
23	This would seem to make sense since the structure is already in place	Feb 17, 2010 8:38 PM
24	In situations where they can handle the challenges	Feb 17, 2010 9:59 PM
25	the disabled is far to encompassing for it to be an add-on	Feb 18, 2010 5:16 PM

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

How important do you believe the following are to the future support of older North Carolinians that should be addressed in the OAA reauthorization process?					
	Very Important	Somewhat Important	Not Important	Not Sure	Response Count
Pension and Other Financial Counseling	58.7% (74)	34.9% (44)	2.4% (3)	4.0% (5)	126
Promotion of Livable and Senior-Friendly Communities	56.5% (70)	35.5% (44)	4.8% (6)	3.2% (4)	124
Community Planning for an Aging Population	78.0% (99)	18.9% (24)	2.4% (3)	0.8% (1)	127
Strengthening Use of Assistive Technology	38.4% (48)	54.4% (68)	3.2% (4)	4.0% (5)	125
Training for the Aging Network	57.8% (74)	38.3% (49)	1.6% (2)	2.3% (3)	128
Strengthening Use of Information Technology within Aging Network	53.6% (67)	38.4% (48)	4.8% (6)	3.2% (4)	125
Public Education about Healthy Aging Practices	65.9% (83)	30.2% (38)	2.4% (3)	1.6% (2)	126
Long Term Care Options/Counseling	68.0% (85)	28.8% (36)	1.6% (2)	1.6% (2)	125
Consumer Fraud Protections	66.4% (83)	30.4% (38)	2.4% (3)	0.8% (1)	125
Helping Naturally Occurring Retirement Communities (NORCs)	27.8% (35)	49.2% (62)	14.3% (18)	8.7% (11)	126
Promoting Lifelong Learning	41.3% (52)	43.7% (55)	13.5% (17)	1.6% (2)	126
Greater Access to Substance Abuse Assistance	31.5% (40)	53.5% (68)	11.0% (14)	3.9% (5)	127
Greater Access to Mental Health Services	66.4% (85)	28.9% (37)	1.6% (2)	3.1% (4)	128
Consumer-Directed Service Options	47.2% (60)	38.6% (49)	6.3% (8)	7.9% (10)	127
Older Driver Safety	49.6% (63)	40.9% (52)	7.9% (10)	1.6% (2)	127
Strengthening Adult Protective Services	79.0% (98)	18.5% (23)	0.8% (1)	1.6% (2)	124

	<i>answered question</i>	128
	<i>skipped question</i>	118

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

Comments: (Identify item(s) and offer specific comments)		
		Response Count
		18
	<i>answered question</i>	18
	<i>skipped question</i>	228

Response Text		
1	All Adult Services should be funded better and payed attention to more.	Feb 11, 2010 1:14 PM
2	Most younger consumers that are dealing with aging don't want to understand the aging network until they need it, In many cases	Feb 11, 2010 3:25 PM
3	1) Supporting NORCs can reduce need for Long Term Care. 2) Long Term Care is in crisis - mostly due to the payment system	Feb 11, 2010 3:56 PM
4	Livable and Senior-Friendly Communities--the title is too narrow--should be a cross-agency coordinated effort that is not just focused on seniors	Feb 11, 2010 4:50 PM
5	The Regional Long-Term Care Ombudsman Program is very beneficial to the support of older North Carolinians.	Feb 11, 2010 7:01 PM
6	Adult Protective Services needs funding for staff in local programs, money for a state wide training coordinator, money for training law enforcement and DA staff and money to fund services for those who were victims of abuse, neglect or exploitation. Further, centralized intake of abuse reports is essential for ensuring calls don't slip through the cracks due to access issues with local reporting agencies but to voicemail attendents, poor screening decisions based upon staff resources not state law and to provide consistent screening state wide	Feb 12, 2010 1:43 PM
7	About 20 yrs ago I read an article that a major university was creating a retirement community on their campus. The cost of living there would include not only the apartment, but the residents would be allowed to audit classes for free and take classes for credit at a reduced rate. Is this idea spreading and if so where?	Feb 12, 2010 2:48 PM
8	Very unfair system for older americans who are just over Medicaid financial requirements and get no help, they pay a very high portion of their income for medical needs. Medicaid is the Taj Majal of insurance, it should not be.	Feb 15, 2010 1:36 PM
9	I am much in support of the Ombudsman Program and Adult Protective Services through efforts to eliminate Elder Abuse	Feb 15, 2010 5:49 PM
10	Aging in place community groups appear to have a difficult time getting started in NC due to a restrictive home care law. Other places in the country we have community groups starting aging in place/NORC services which stumble here. A differently worded home care law may help volunteer groups start aging in place communities that will greatly benefit consumers (and not harm the home care industry)	Feb 15, 2010 6:44 PM
11	Adult Protective Services is and will continue to be an area of need and growth that will strain existing community resources.	Feb 15, 2010 9:27 PM
12	Senior living communities that are financially accessible are very important. Mental Health services are currently not available and are needed.	Feb 16, 2010 1:29 PM
13	Planning is a major issue in the planning for the future,aging, that we are not prepared for at this time.	Feb 16, 2010 8:00 PM
14	Consumer-Directed, you can't tell me there won't be abuse to such programs.	Feb 17, 2010 2:52 PM

Response Text		
15	Promoting lifelong learning for better quality of living Promoting increased awareness of fraud alerts	Feb 17, 2010 9:59 PM
16	I think I&A and Vol Dev should be dropped from HCCBG funding. It sounds callous, but the numbers of seniors are growing and the need for more life necessities (in home aid, medical trans, hbm) are growing too. If funding doesnt increase, we need to cut out the less necessary programs.	Feb 18, 2010 5:16 PM
17	Greater Access to Mental Health Services particularly in the rural communities. Strengthening Adult Protective Services. Our older Adults are very vulnerable and services need to be in place to assure their safety and well-being.	Feb 19, 2010 8:43 PM
18	I would like to see Health Promotion and Wellness include emphasis on quality/proven community-based programs as well as the evidence-based programs.	Feb 20, 2010 5:57 PM

NASUA—2011 Older Americans Act Reauthorization Survey for North Carolina

What other suggestions and/or comments would you like considered relative to the OAA reauthorization and funding?		
		Response Count
		12
<i>answered question</i>		12
<i>skipped question</i>		234

Response Text		
1	Paperwork streamlining. Improve state reporting system. Aren't there examples from other states that aren't antiquated. And why are communities charged to file the reports in ARMS when they are required reports? The state already takes the money off the top and then they take more.	Feb 11, 2010 2:25 PM
2	More funding and higher pay is deperately needed for the North Carolina Regional Long-Term Care Ombudsmen. They are over-worked and under-paid. This wonderful program is in high demand and more funding is needed!!	Feb 11, 2010 7:01 PM
3	Grants for smaller communities to assist with provision of services.	Feb 12, 2010 1:43 PM
4	Please consider that we will all age and that at some time we will need services with in a Long Term care facility. There for we need greater need for protection of our aging seniors rights, and protection for abuse.	Feb 15, 2010 5:49 PM
5	This is such important legislation that has helped many older adults live in dignity and it should be maintained and improved to reflect the changing society.	Feb 15, 2010 6:44 PM
6	Reevaluate often to determine if money is being spend wisely.	Feb 15, 2010 7:42 PM
7	I appreciate all efforts for our aging population as most have contributed greatly to our communities.	Feb 16, 2010 1:41 AM
8	They are to many gaps in cover for the aging population.	Feb 16, 2010 8:00 PM
9	Don't waste time and money on feel good programs. Today we have to provide the care and the needs with services and programs that get to the meat of the matter. Survey whats working, stop whats not, and move on to meet the needs of the older adults in our state.	Feb 17, 2010 2:52 PM
10	Training if Older Driver Safety	Feb 17, 2010 9:59 PM
11	Thanks for this opportunity!	Feb 19, 2010 4:00 PM
12	I would like to see flexibility in some funding in order for states and communities to seriously access the thoughts, talents, and volunteer base of baby boomers to be strong partners in addressing the issues of aging.	Feb 20, 2010 5:57 PM

Survey Results/Analysis

Part II

Divided up categorically by the type of respondent:

- Area Agency on Aging
- Local Service Provider
- Senior Center
- Senior Advocate
- Consumer of Aging Services
- State Government
- Local Government
- Educator/Researcher

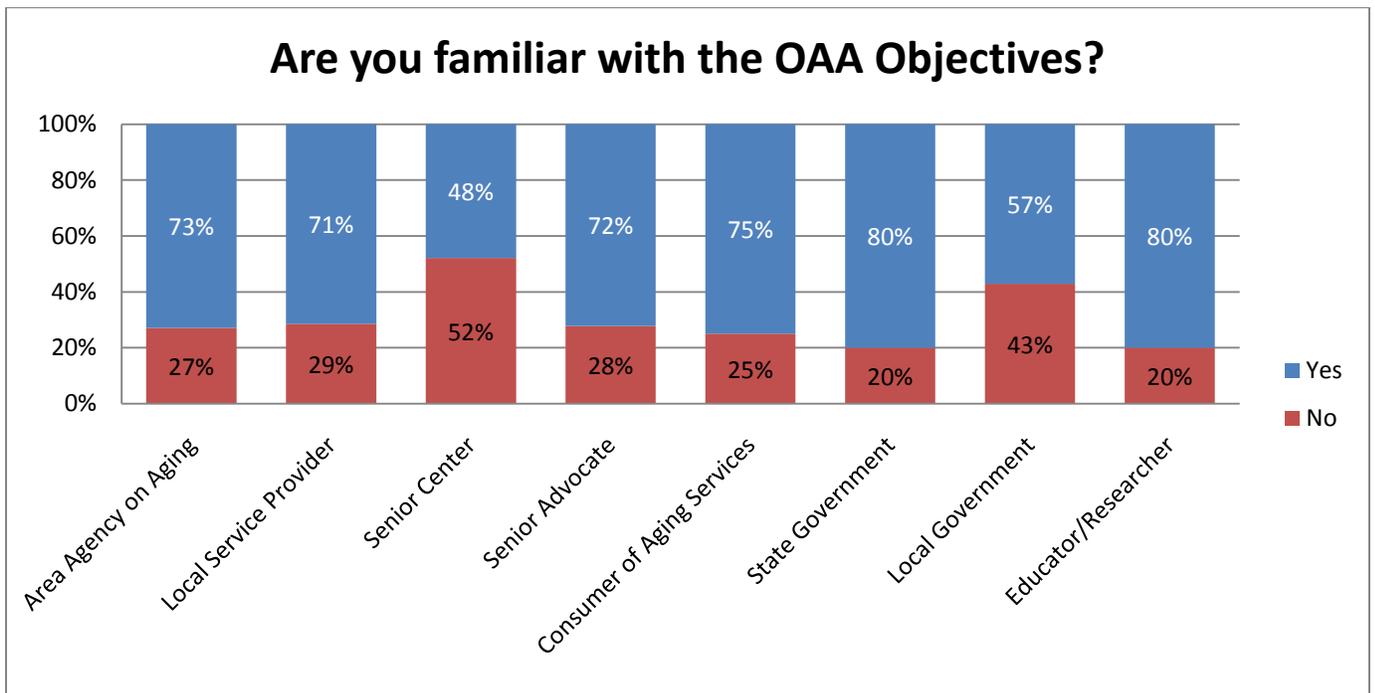
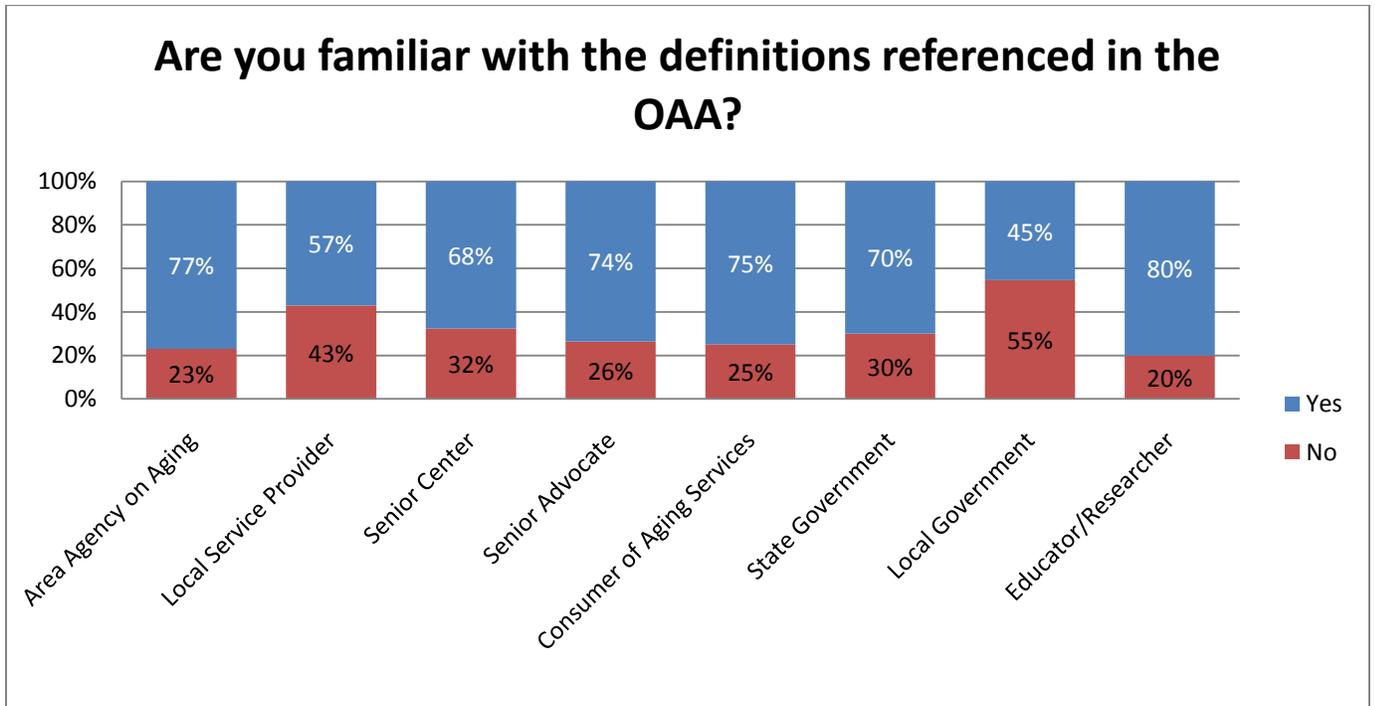
NORTH CAROLINA'S

SURVEY RESULTS

2011 OLDER AMERICANS ACT

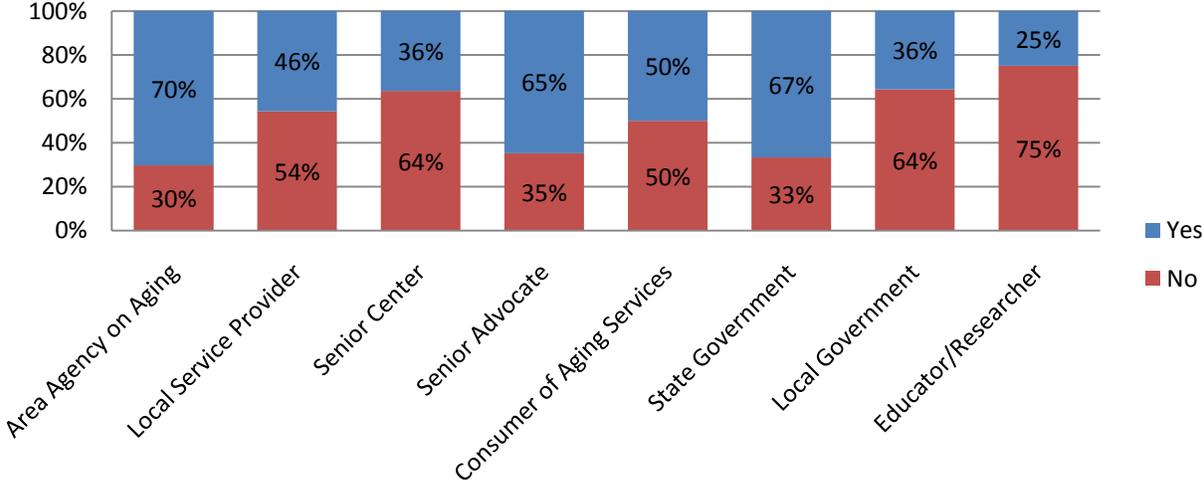
REAUTHORIZATION

TITLE I

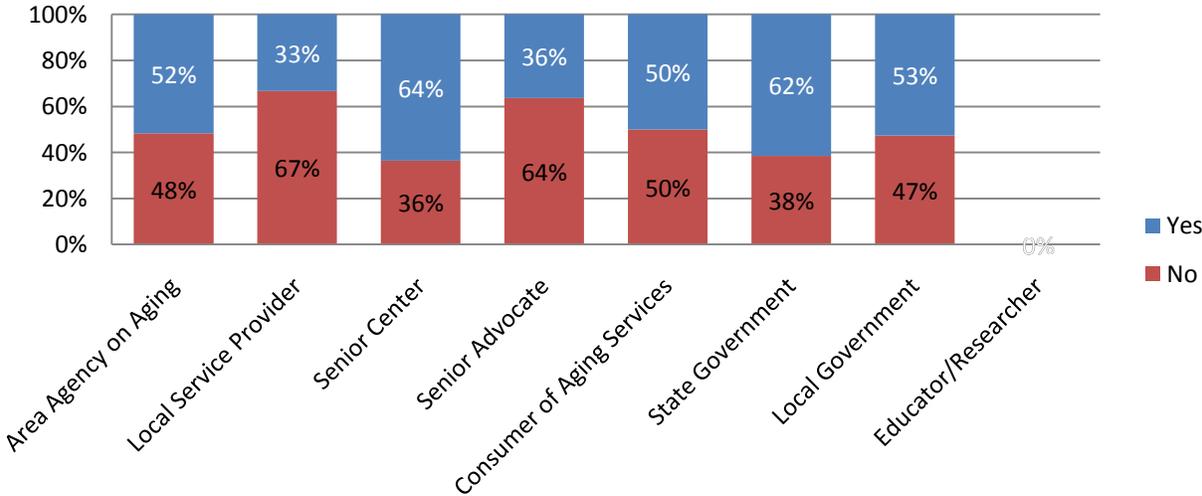


TITLE II

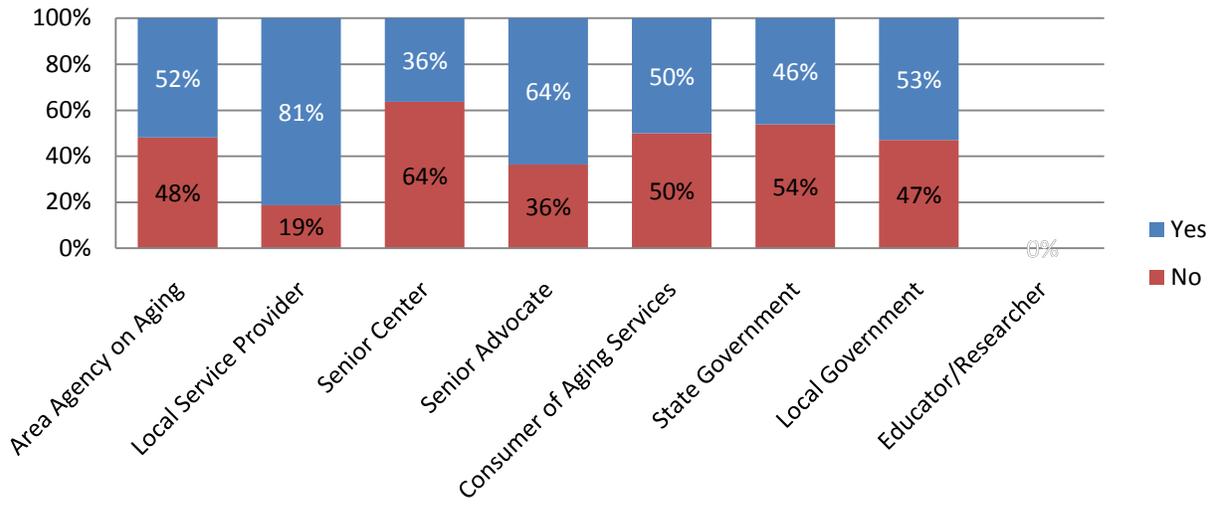
Are you familiar with the National Elder Care Locator?



Do you refer consumers to the Elder Care Locator?

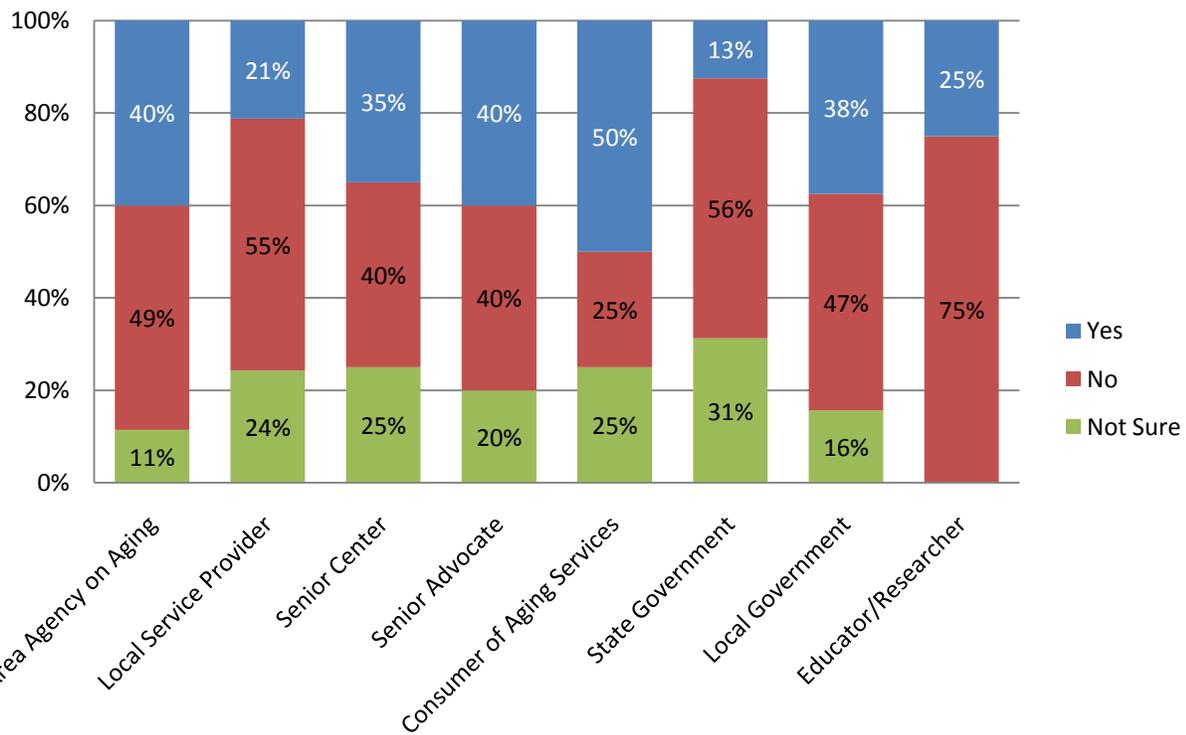


Have you found the Elder Care Locator to be a valuable resource?

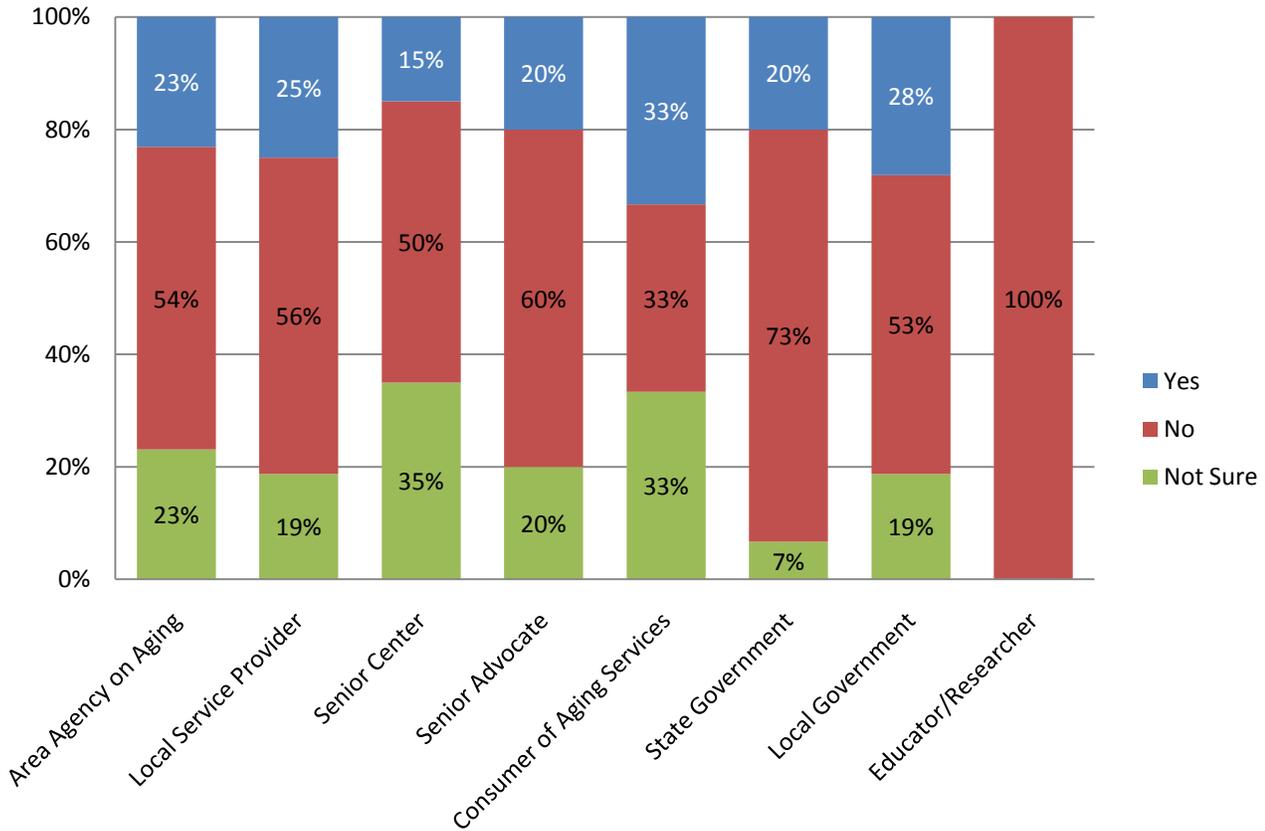


TITLE III

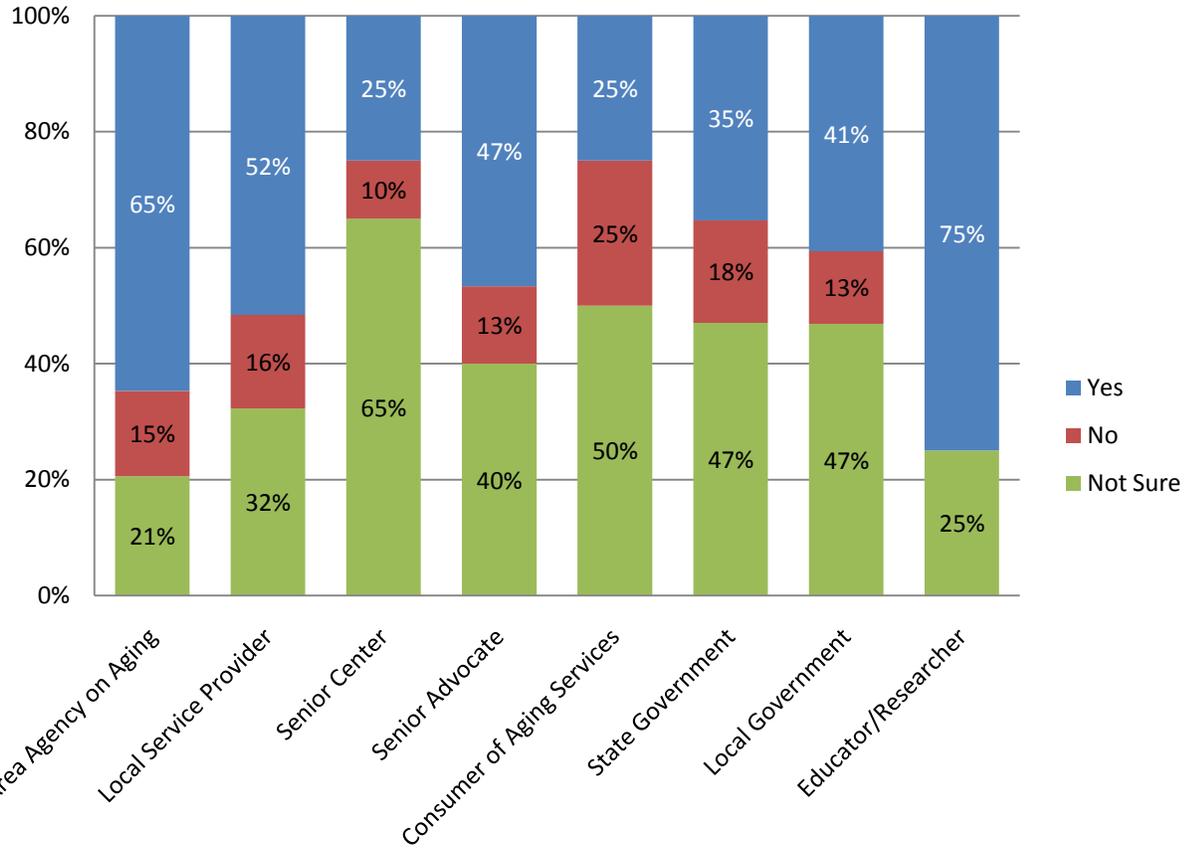
Do you have suggestions to strengthen and/or improve Nutrition Services (congregate and home-delivered meals) that should be addressed in the OAA reauthorization process?



Do you have suggestions for consumer cost sharing and/or contributions that should be addressed in the OAA reauthorization process?

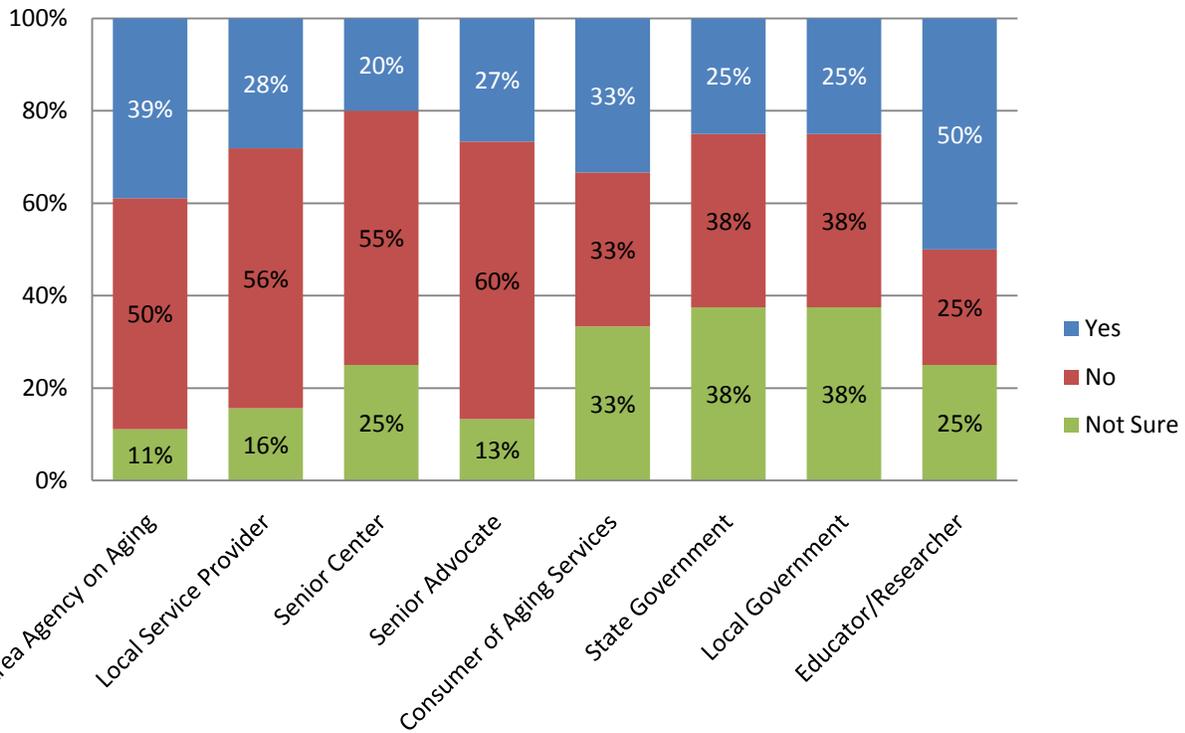


Would you favor combining all Title III funding into one allocation to maximize flexibility?

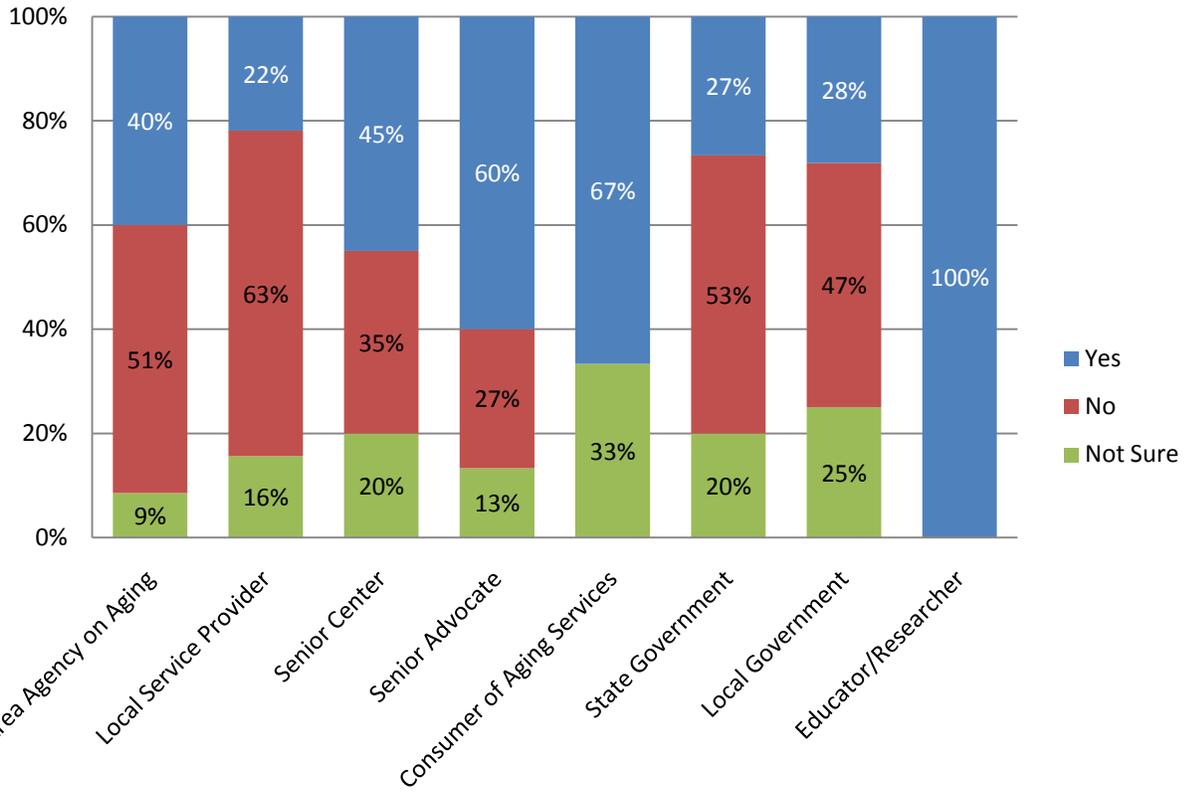


1

Do you have suggestions for strengthening and/or improving the Family Caregiver Support Program that should be addressed in the OAA reauthorization process?

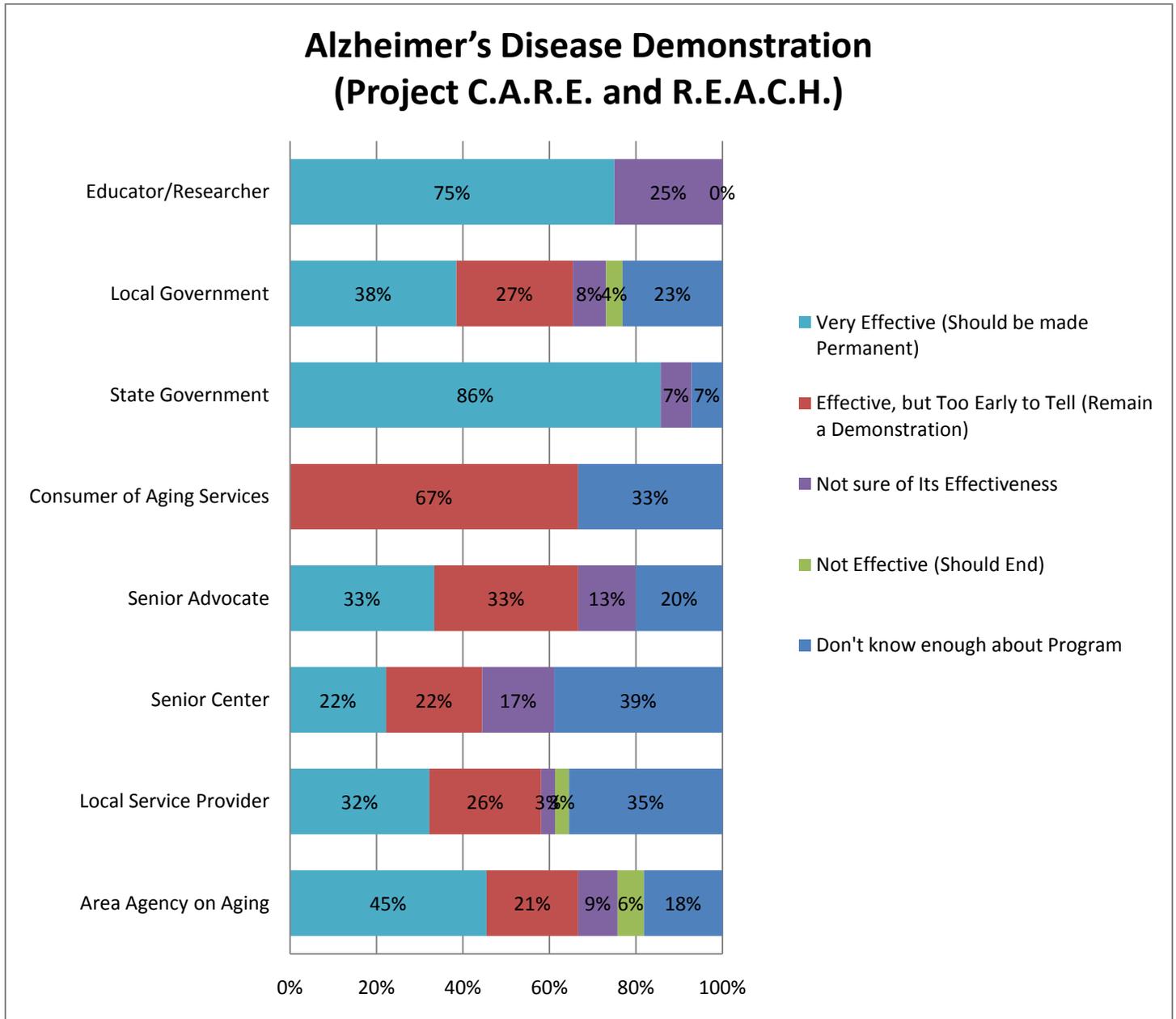


Do you have any suggestions to improve Senior Centers that should be addressed in the OAA reauthorization process?

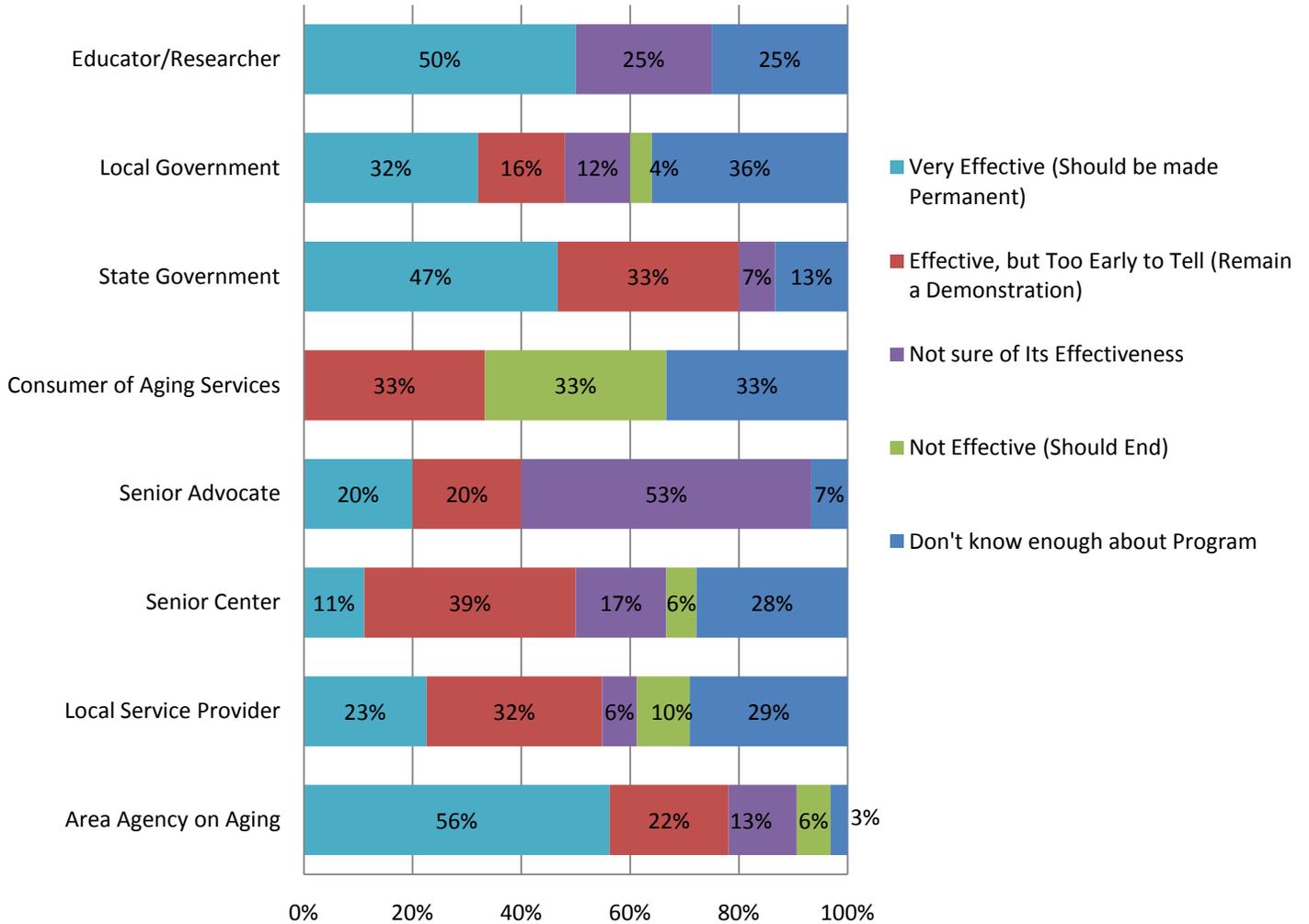


TITLE IV

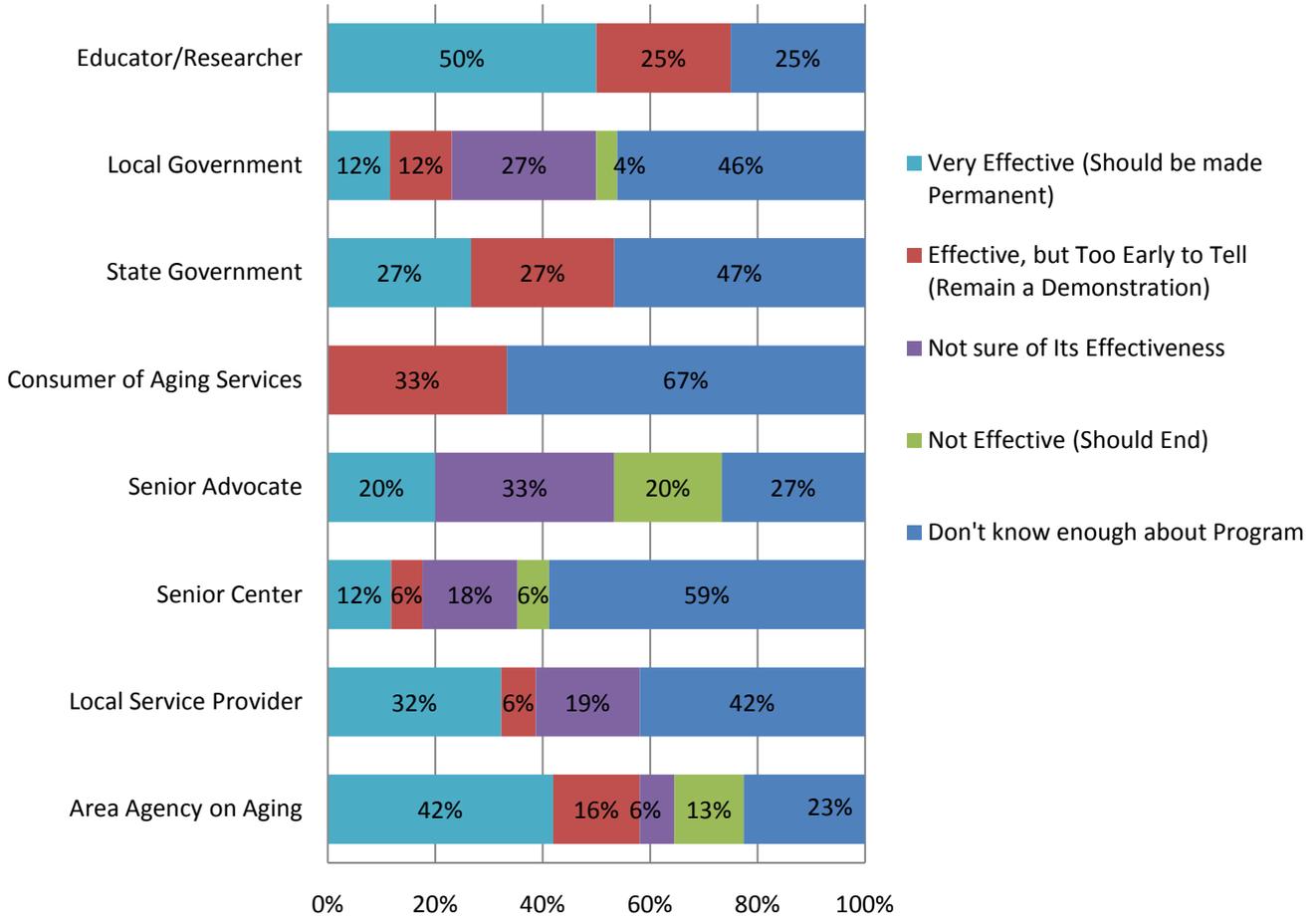
Please give your opinion for each of the following demonstration grants:



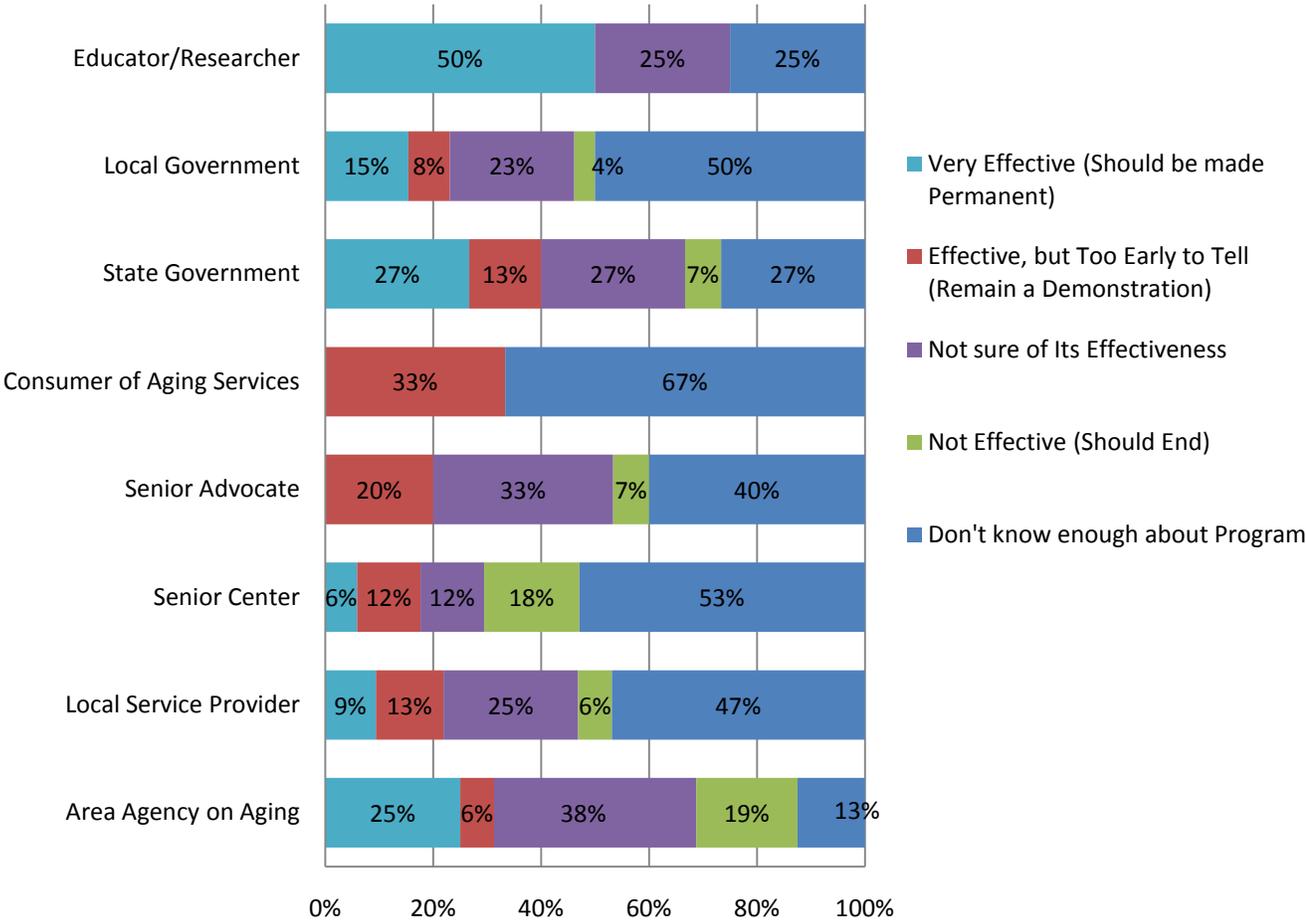
Chronic Disease Self-Management (Living Healthy)



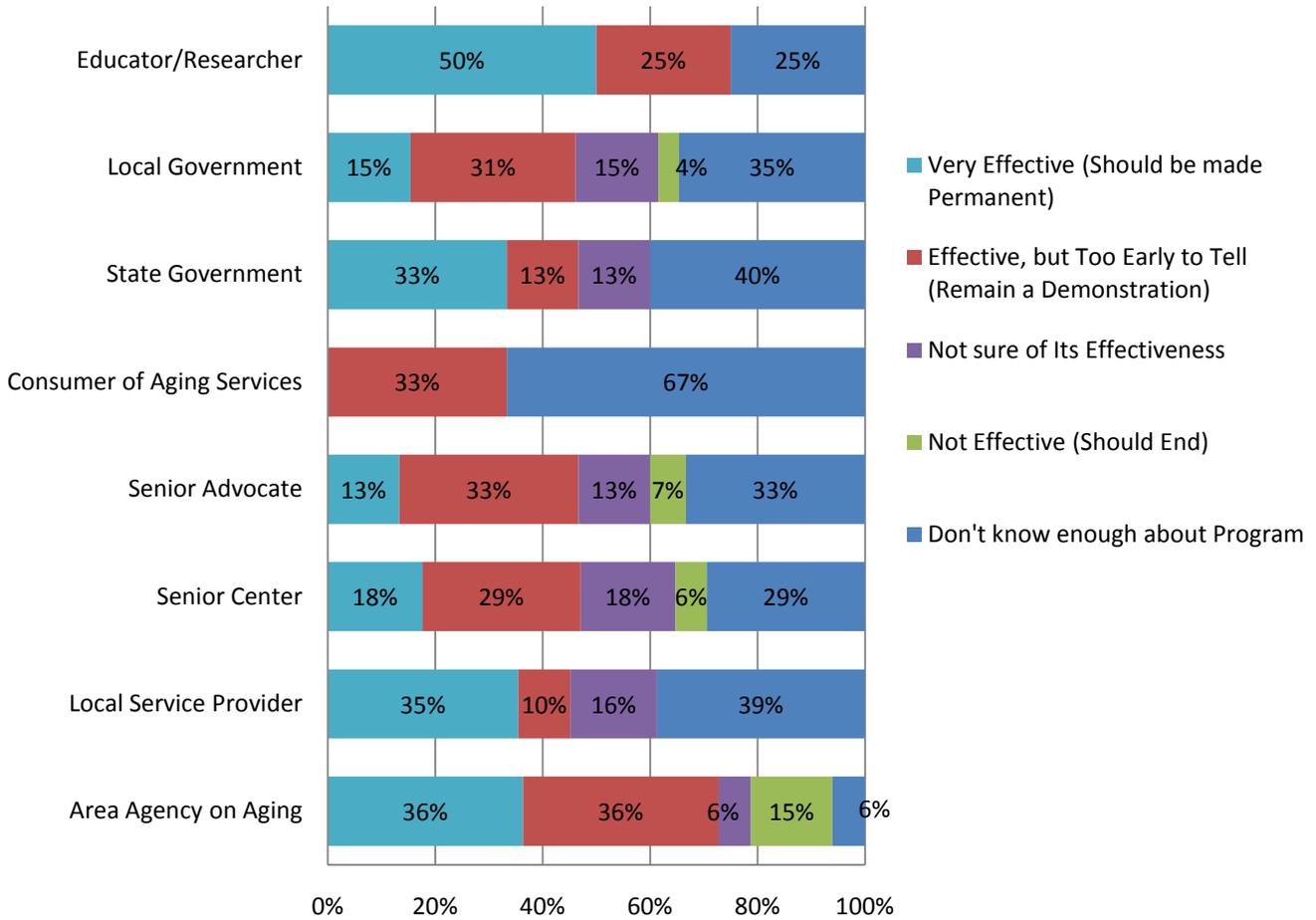
Senior Medicare Patrol



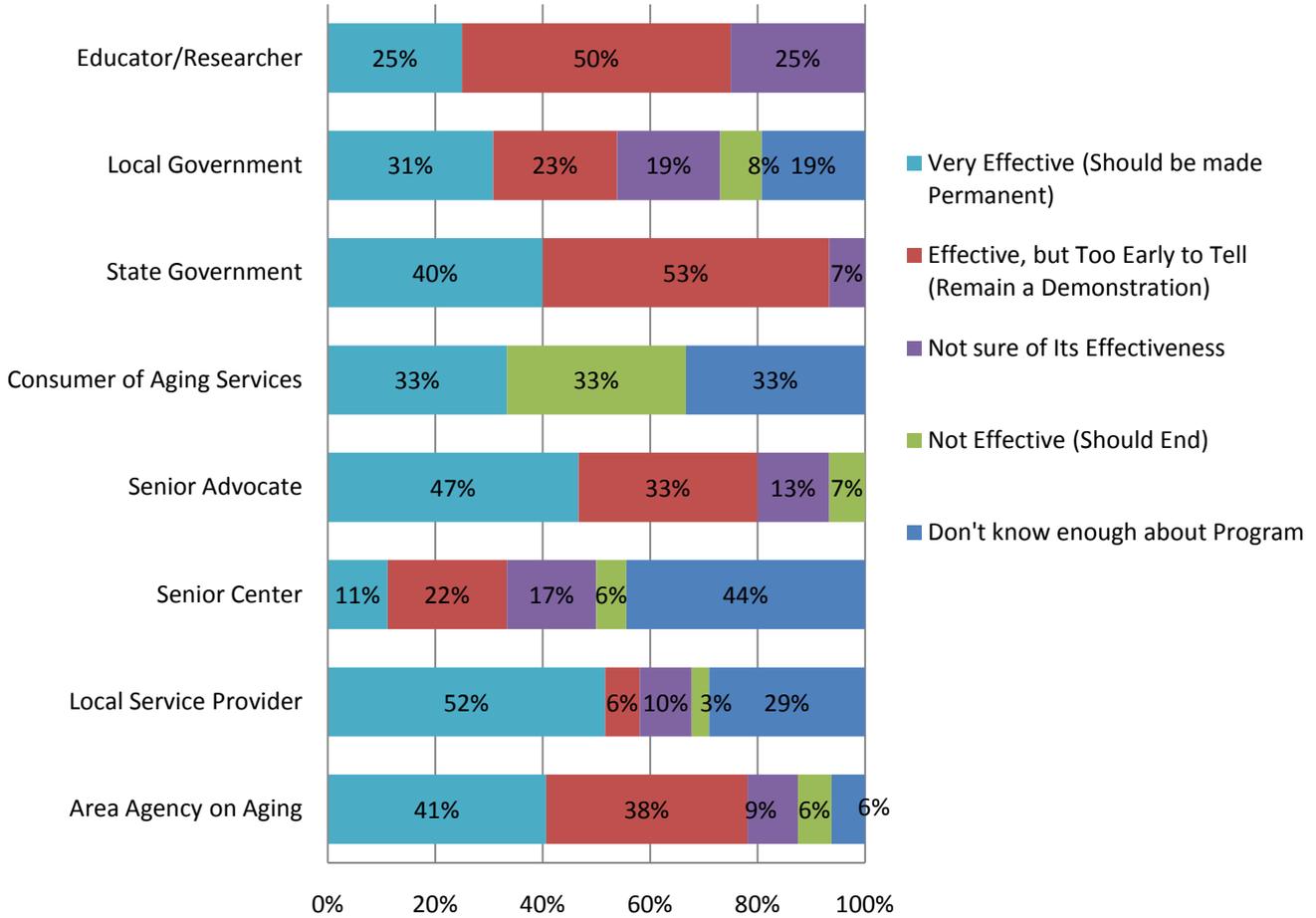
Performance Outcome Measurement Project (POMP)



Medicare Beneficiary Outreach and Assistance (Relay for Extra Help)

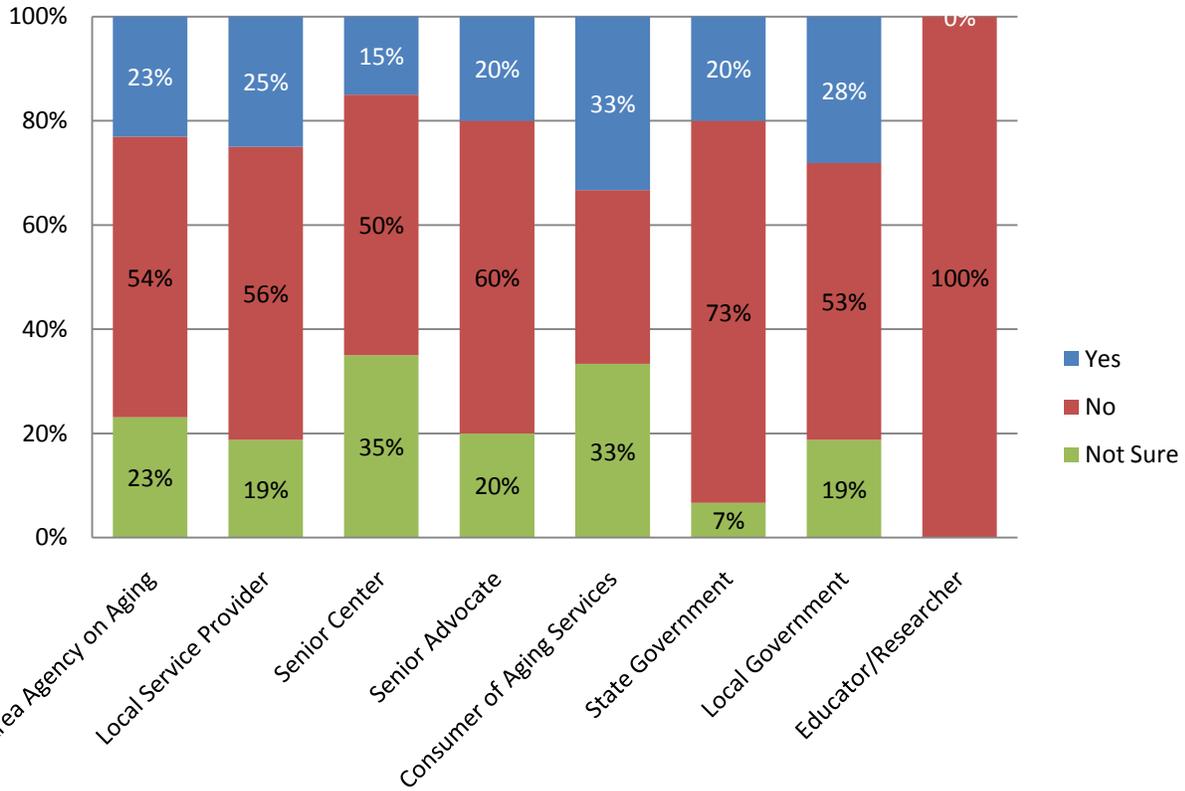


Aging and Disability Resource Centers (Community Resource Connections for Aging and Disabilities)



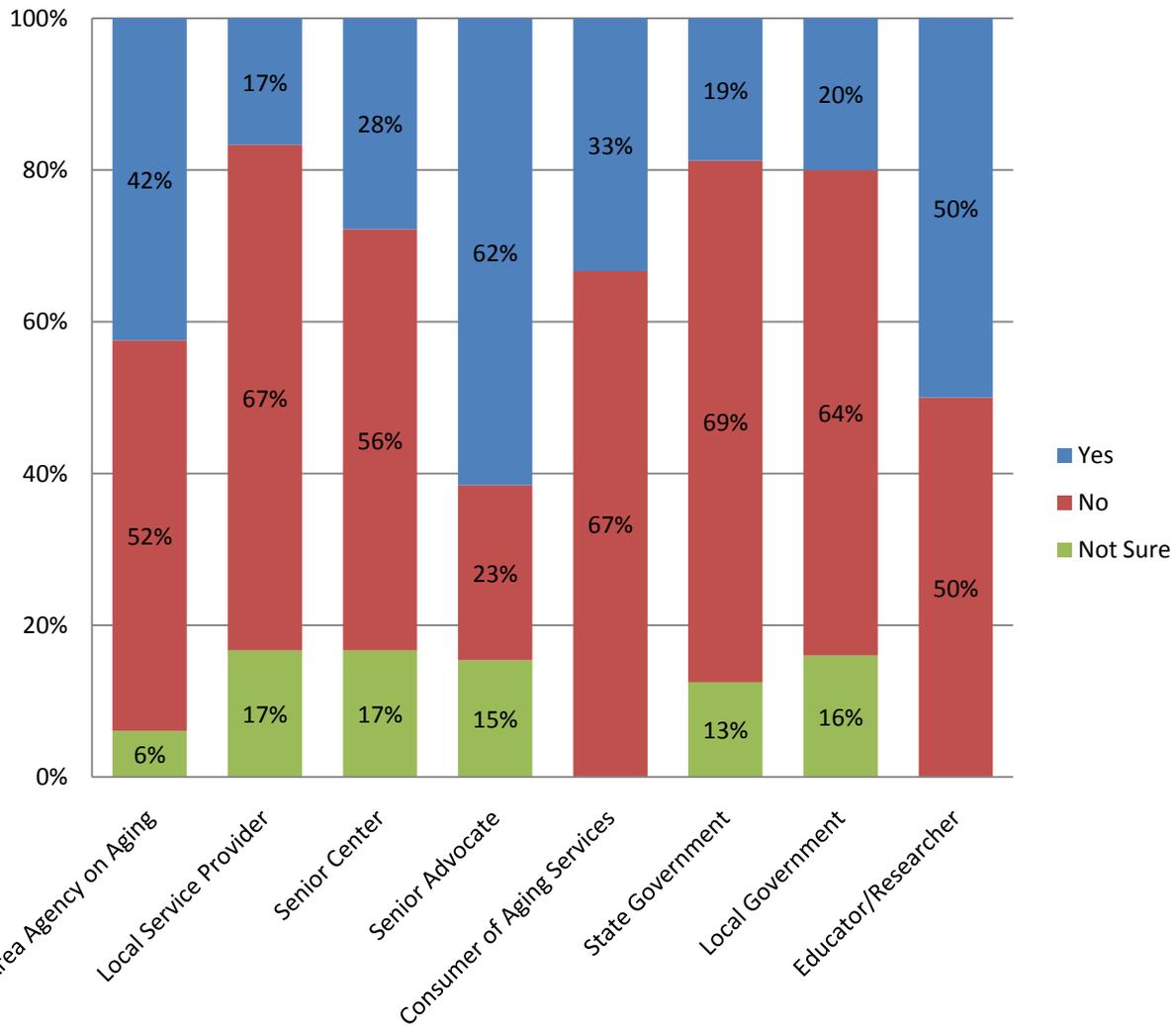
TITLE V

Do you have suggestions to strengthen the SCSEP that should be considered in the OAA reauthorization process?

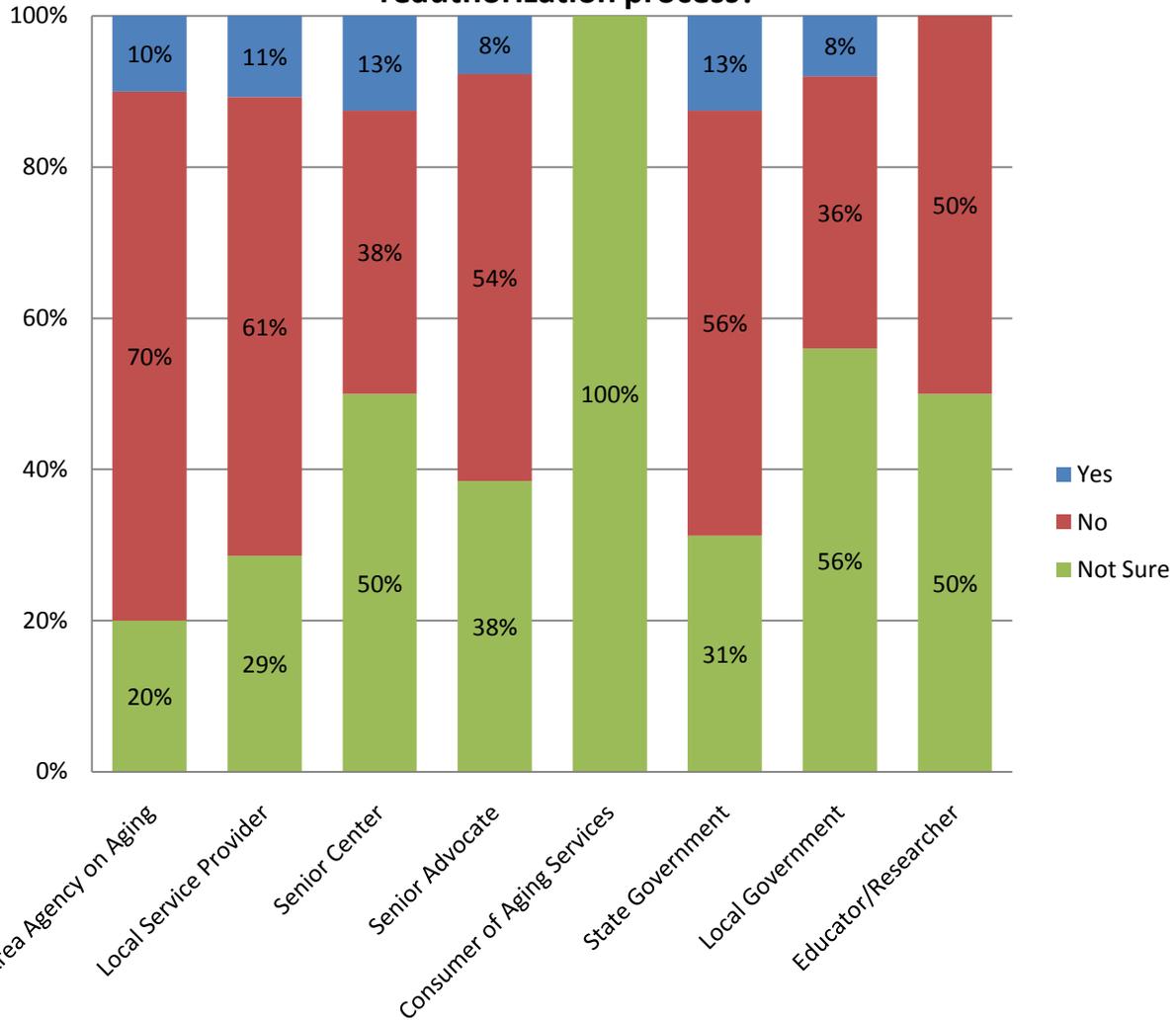


TITLE VII

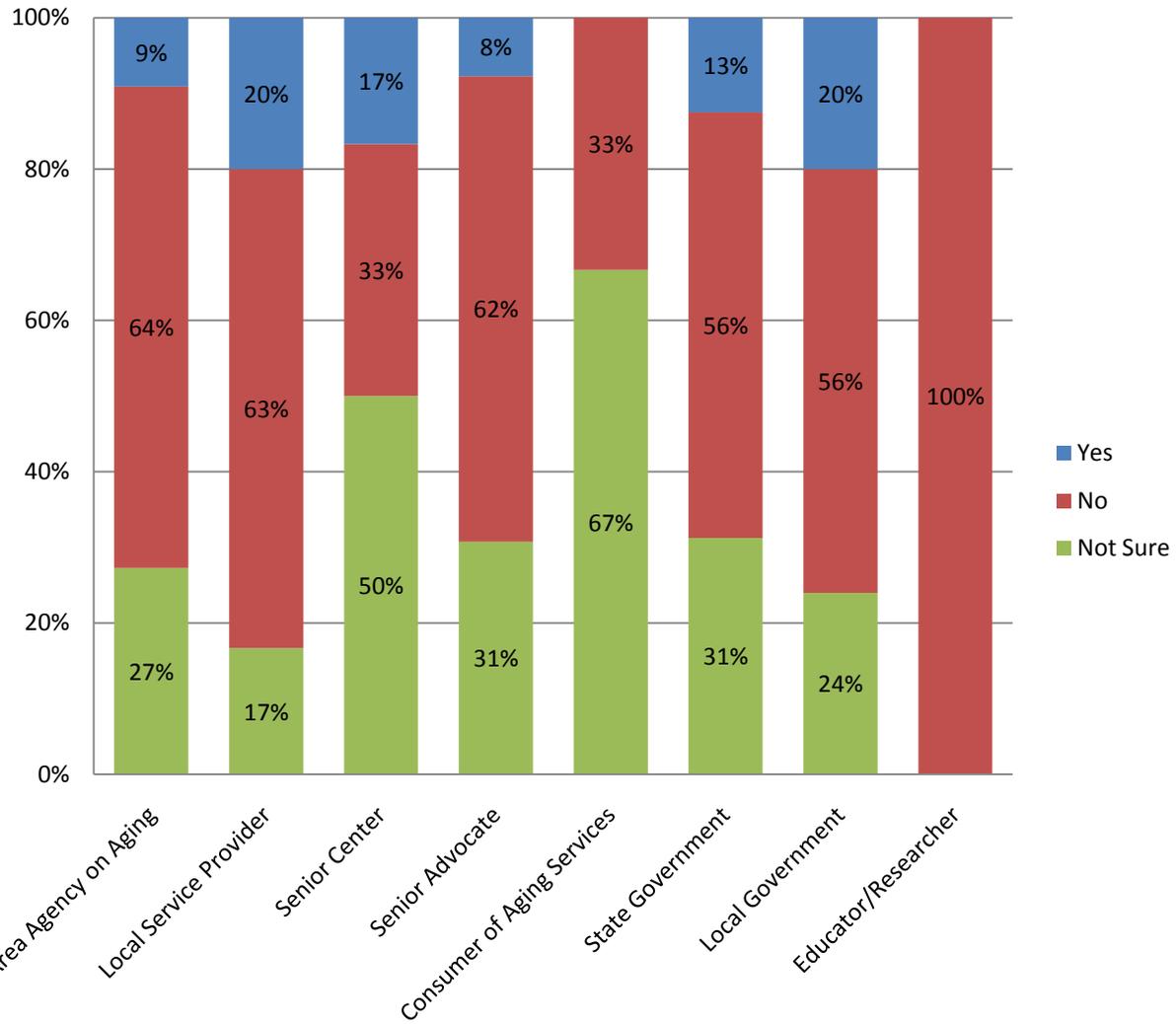
Do you have suggestions for strengthening and/or improving the Long-Term Care Ombudsman Program that should be addressed through the OAA reauthorization process?



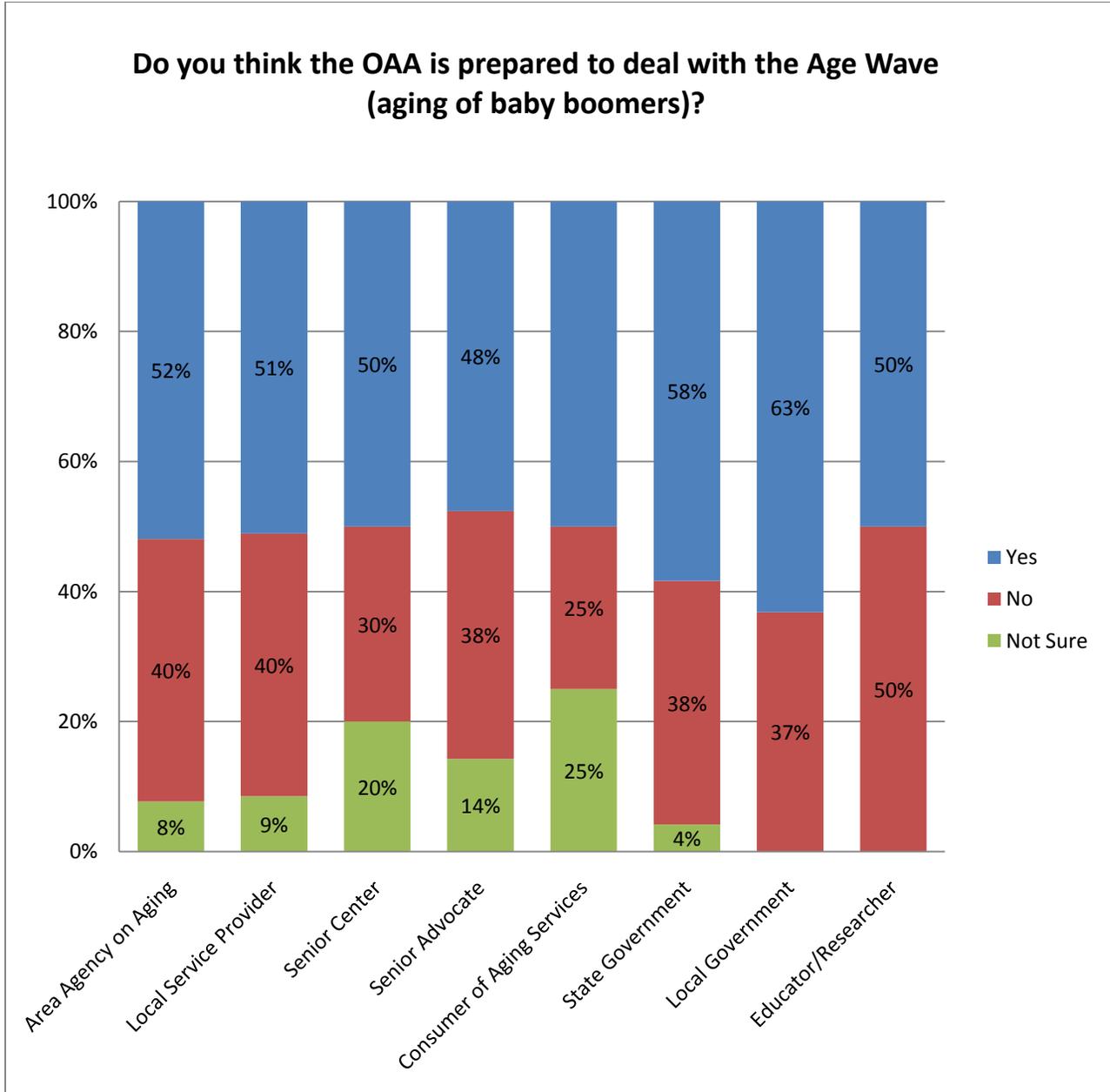
Do you have suggestions for strengthening and/or improving activities aimed at preventing elder abuse, neglect, and exploitation that should be addressed in the OAA reauthorization process?



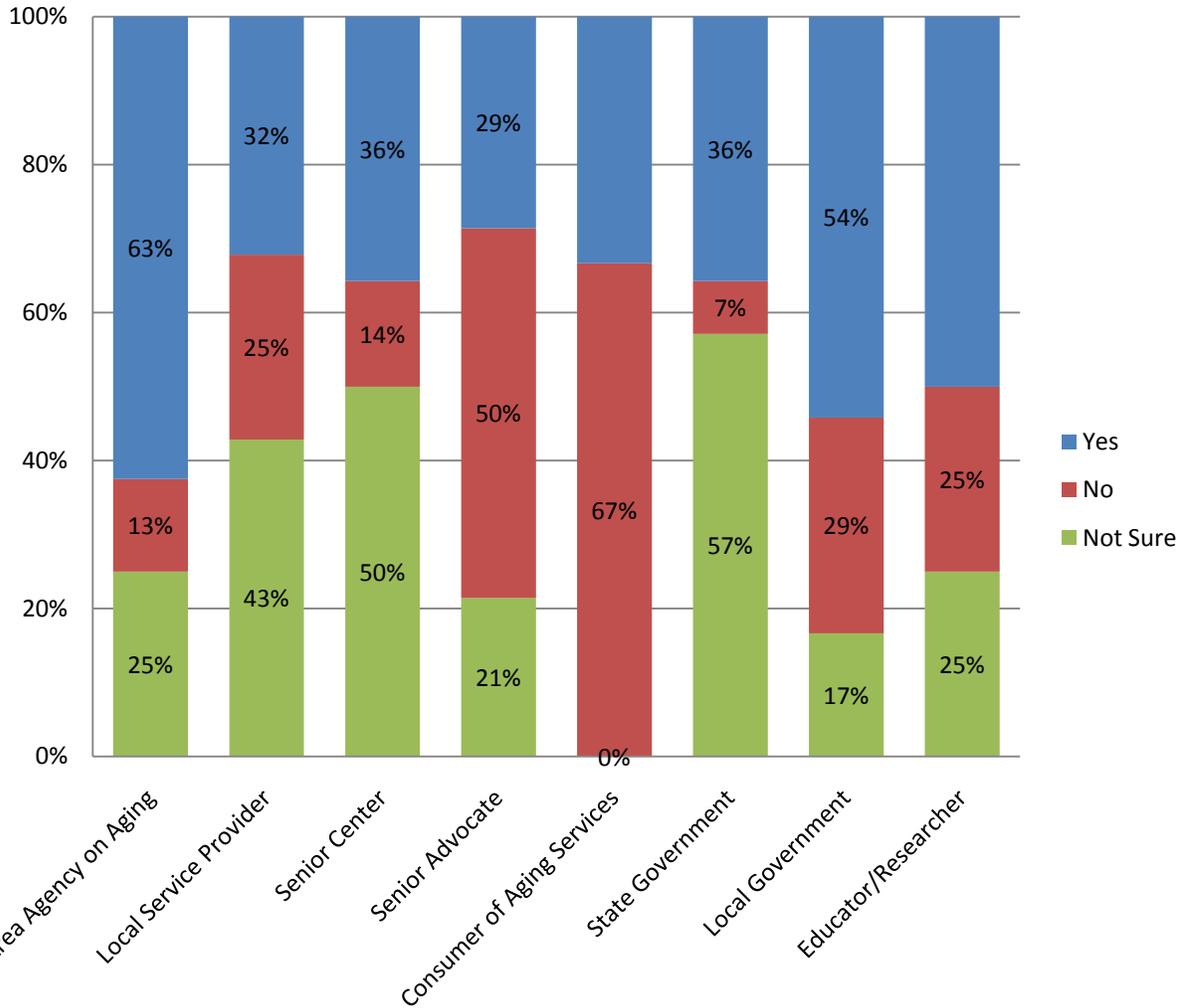
Do you have suggestions for strengthening and/or improving legal assistance that should be addressed in OAA reauthorization process?



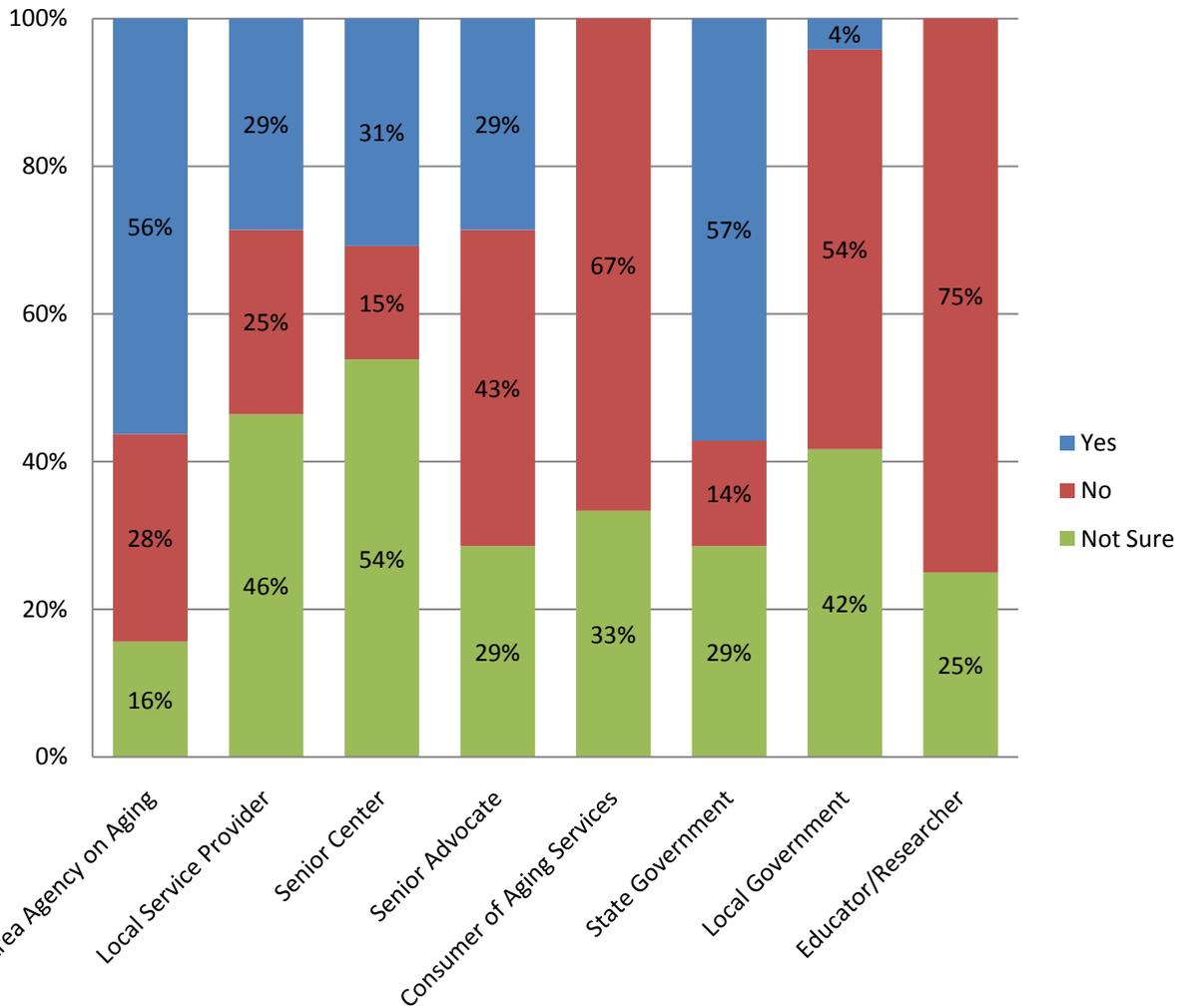
GENERAL QUESTIONS



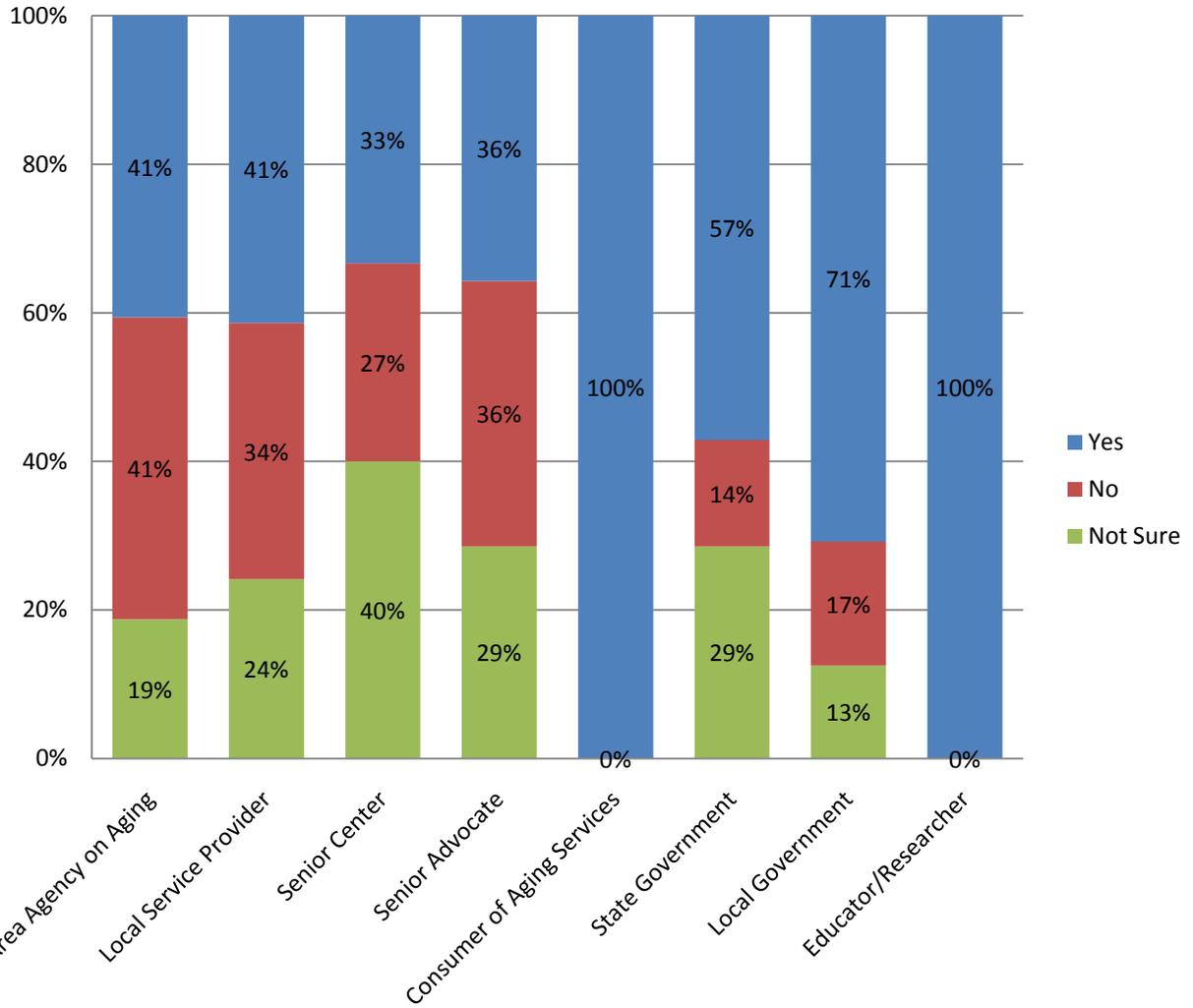
Some advocates may propose to add a new Title to the OAA during reauthorization, which would focus on Housing. Do you support such a change to the OAA?



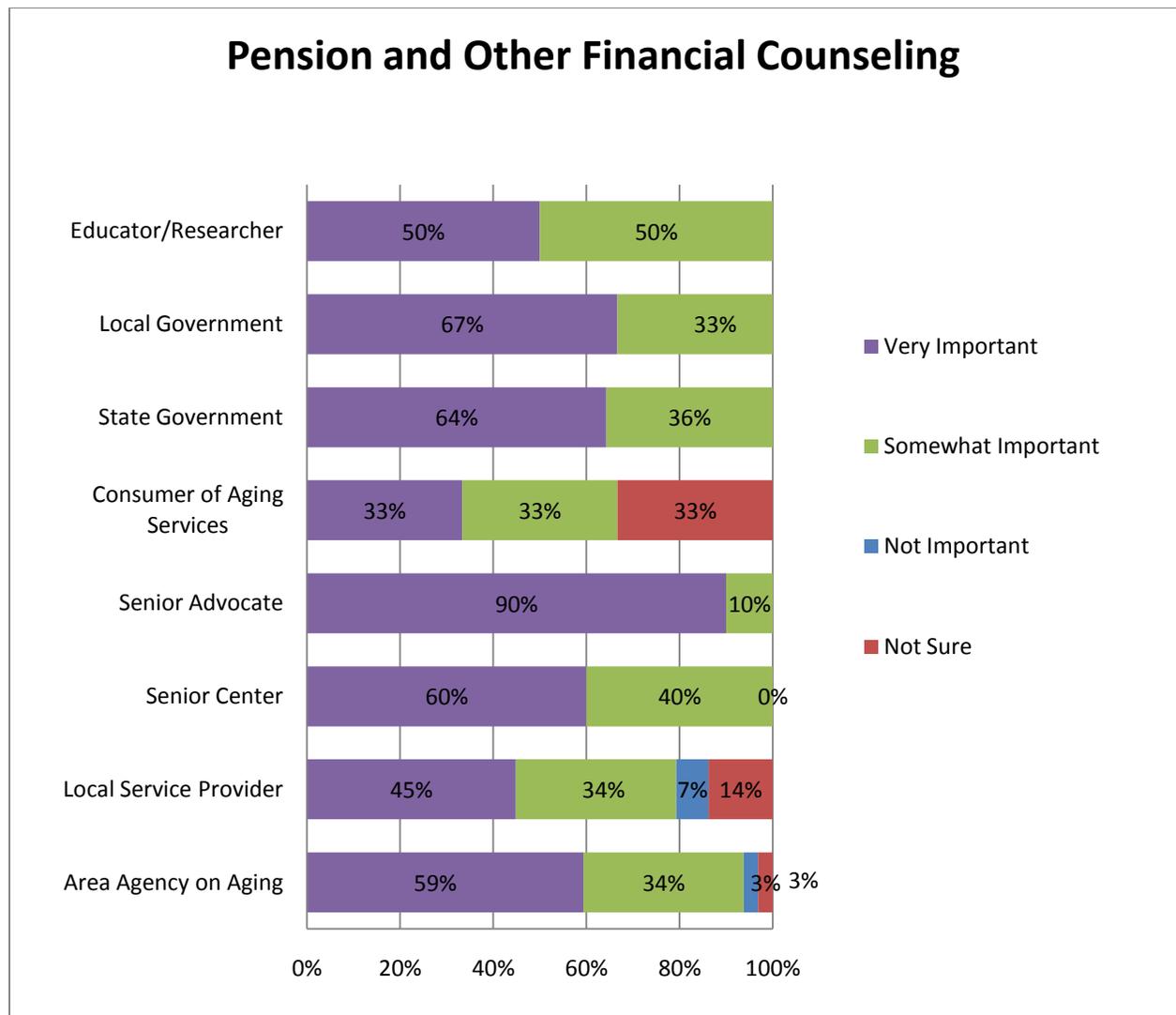
Do you support a distinct federal agency and federal funding stream for people with physical disabilities, separate from aging?



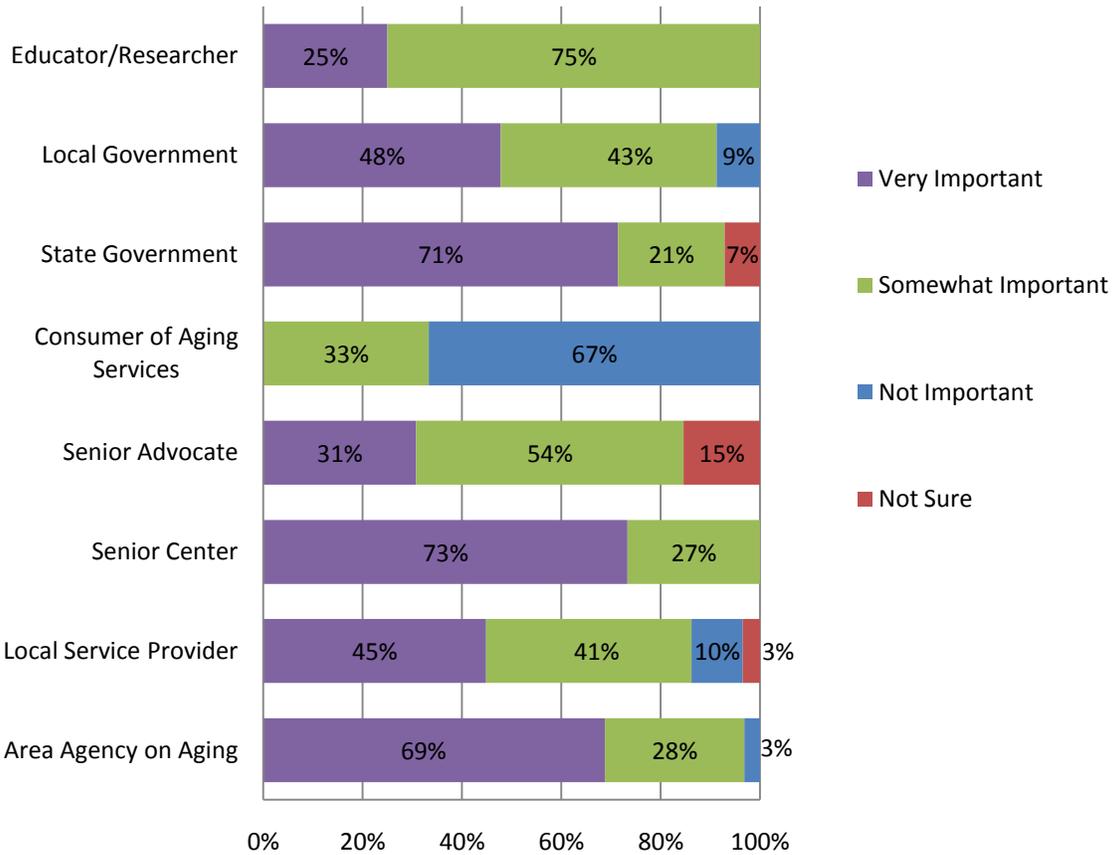
Do you support broadening the scope of the Older Americans Act and the work of the Administration on Aging to include people with physical disabilities?



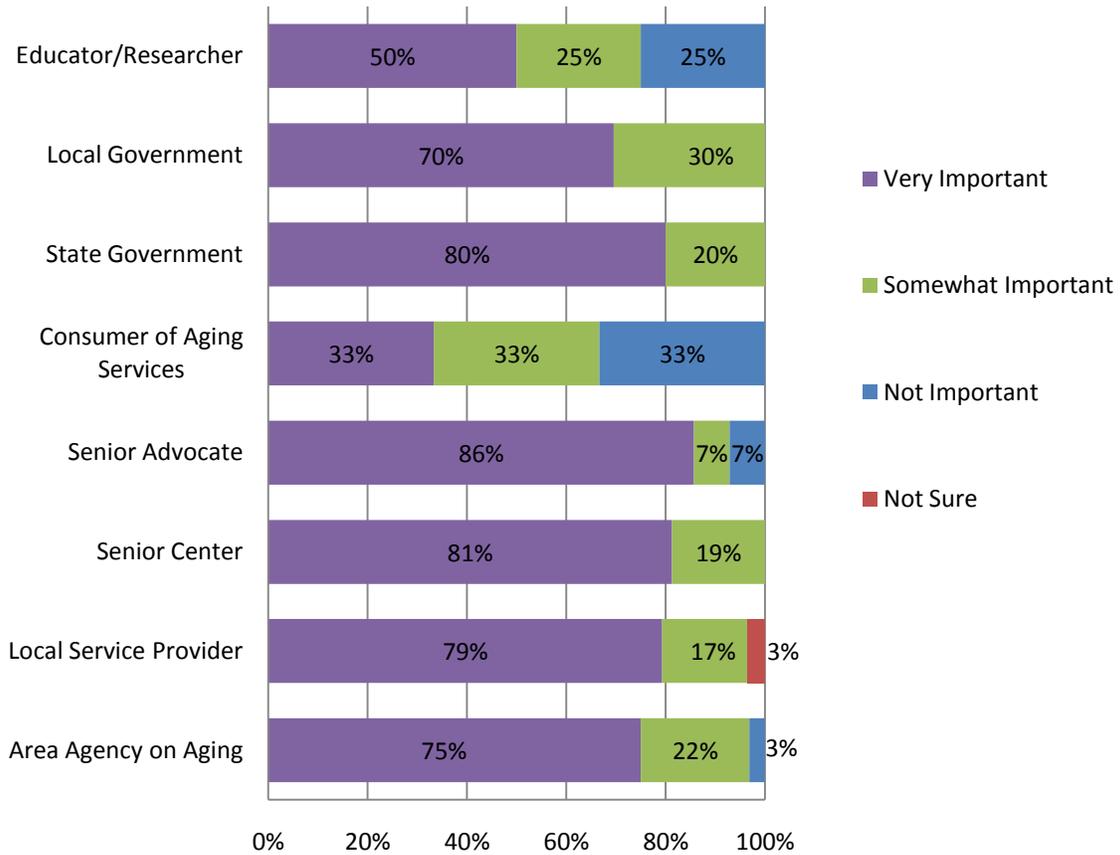
HOW IMPORTANT DO YOU BELIEVE THE FOLLOWING ARE TO THE FUTURE SUPPORT OF OLDER NORTH CAROLINIANS THAT SHOULD BE ADDRESSED IN THE OAA REAUTHORIZATION PROCESS?



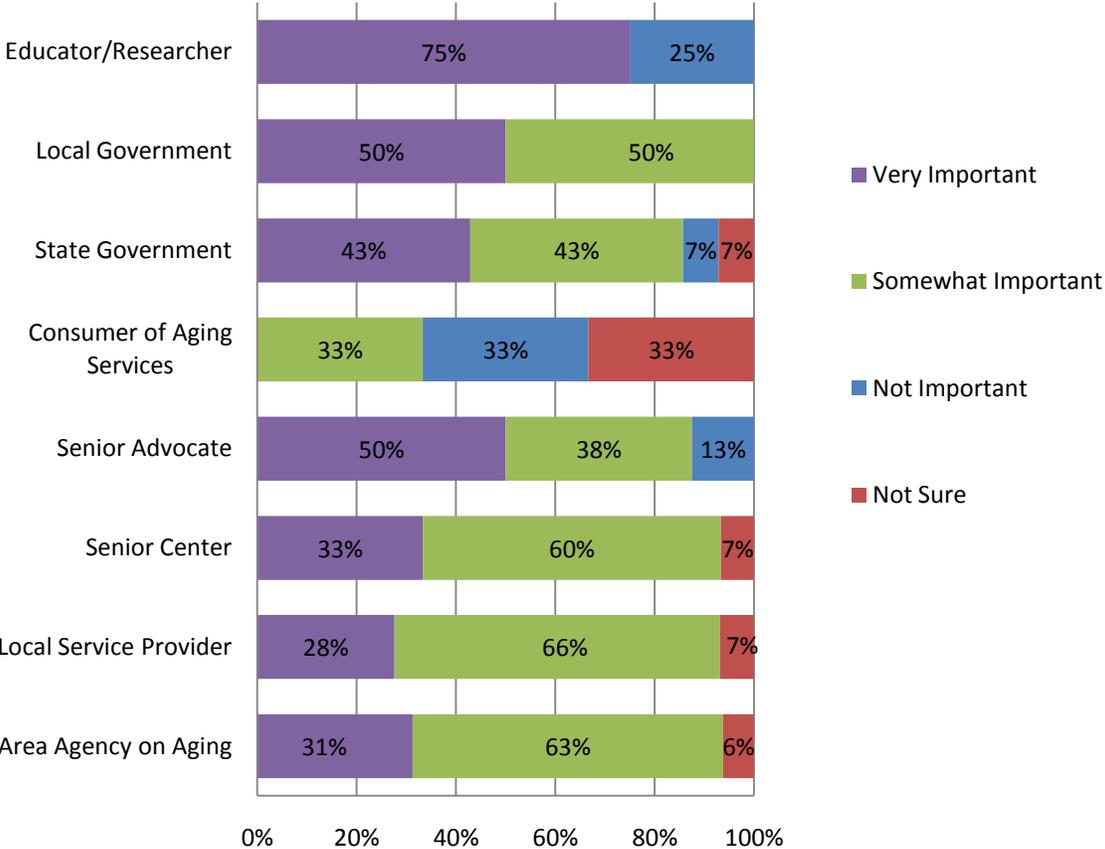
Promotion of Livable and Senior-Friendly Communities



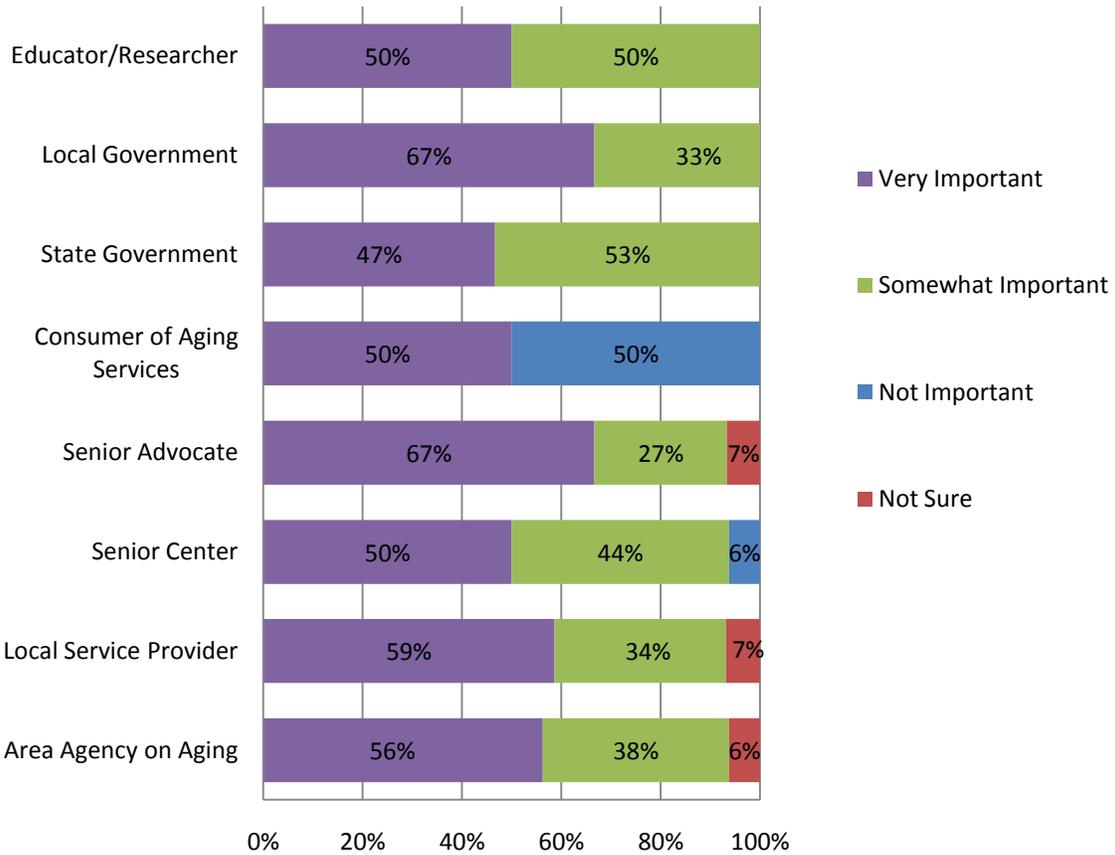
Community Planning for an Aging Population



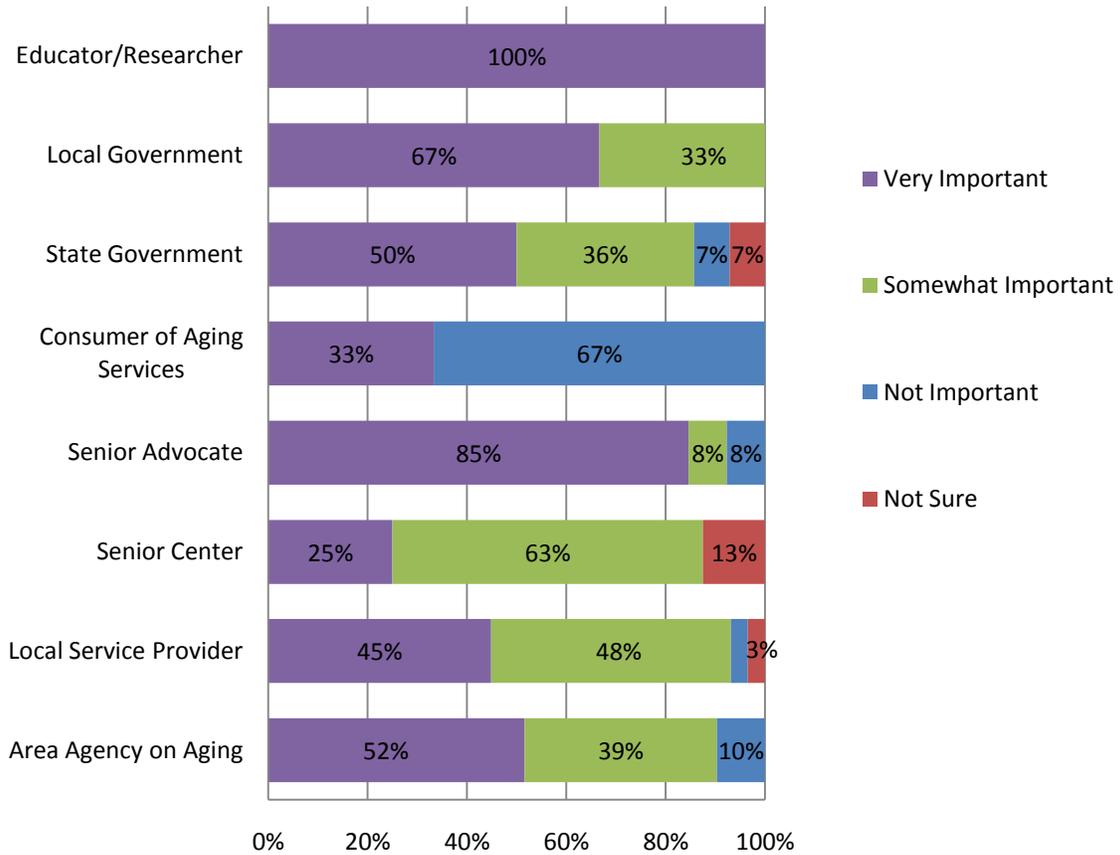
Strengthening Use of Assistive Technology



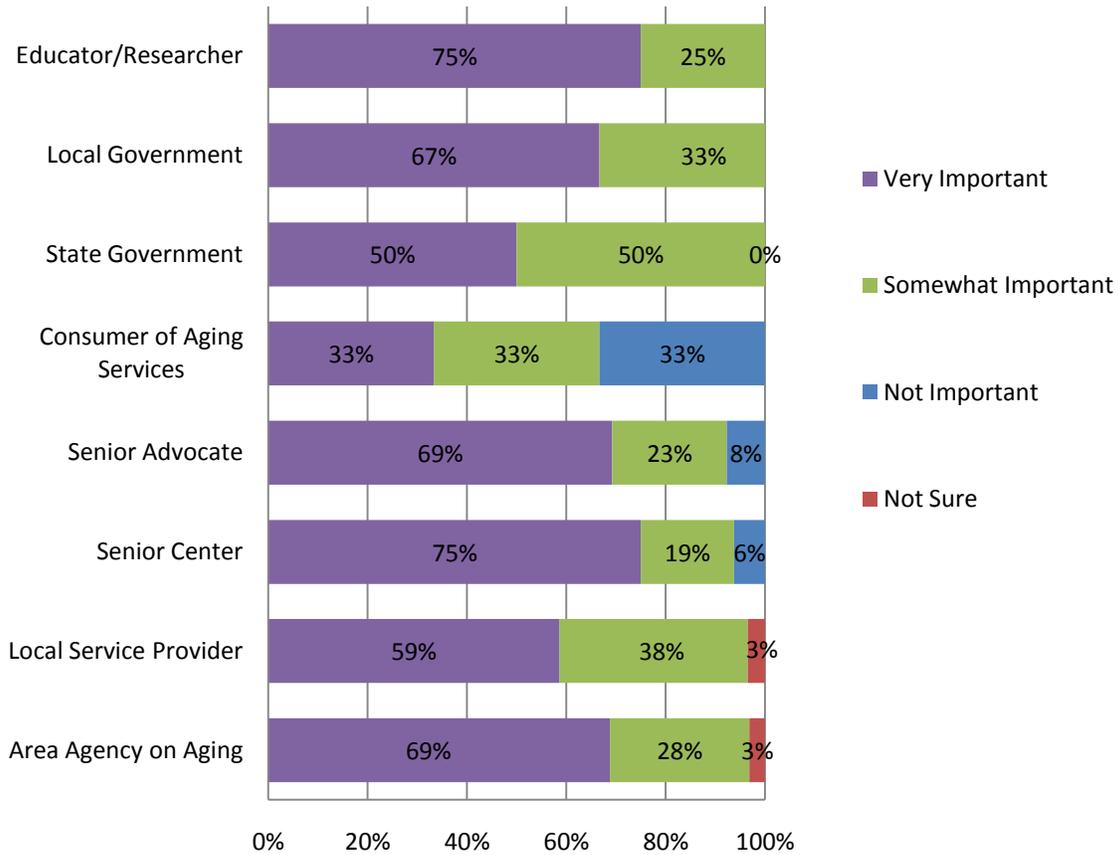
Training for the Aging Network



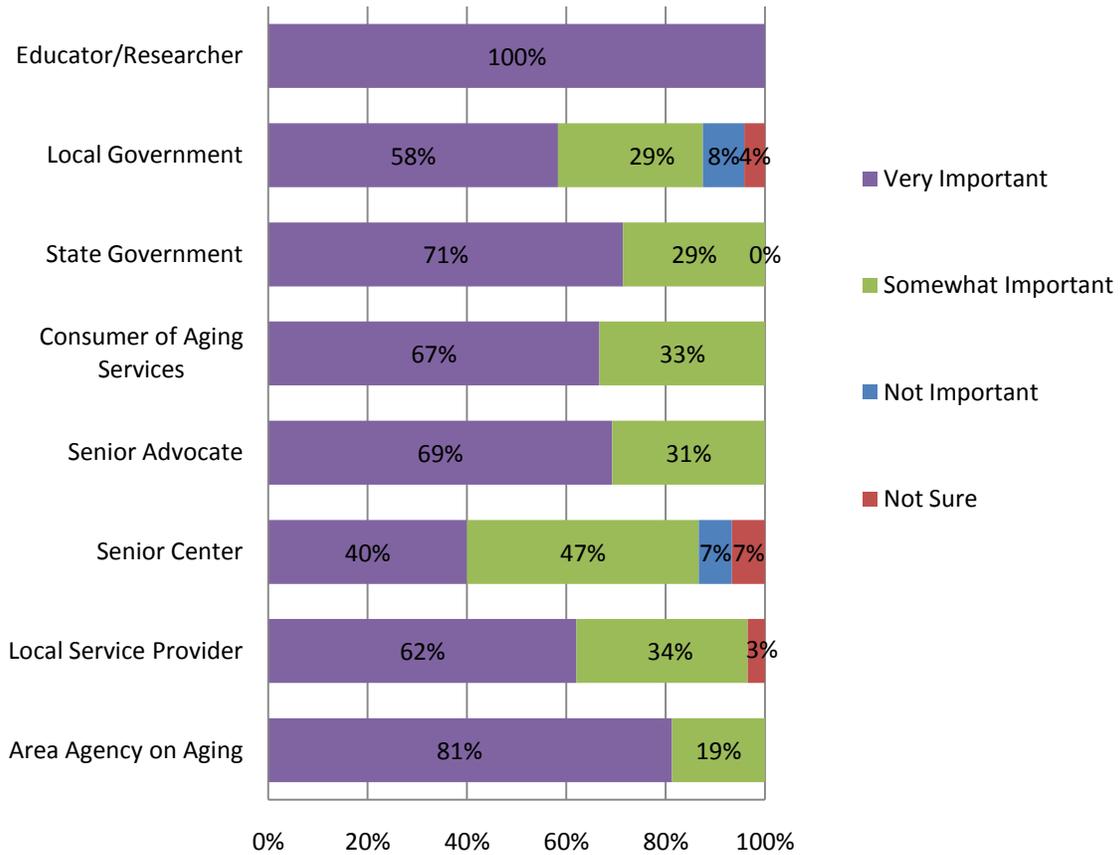
Strengthening Use of Information Technology within Aging Network



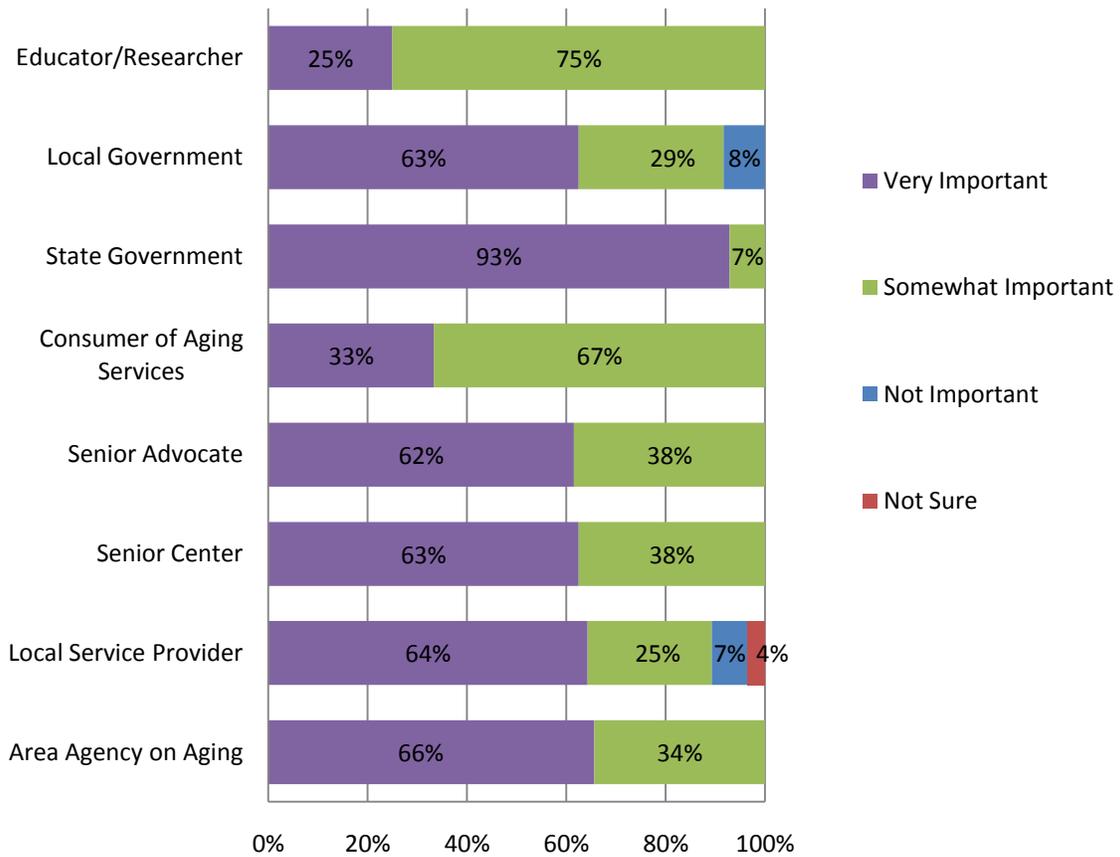
Public Education about Healthy Aging Practices



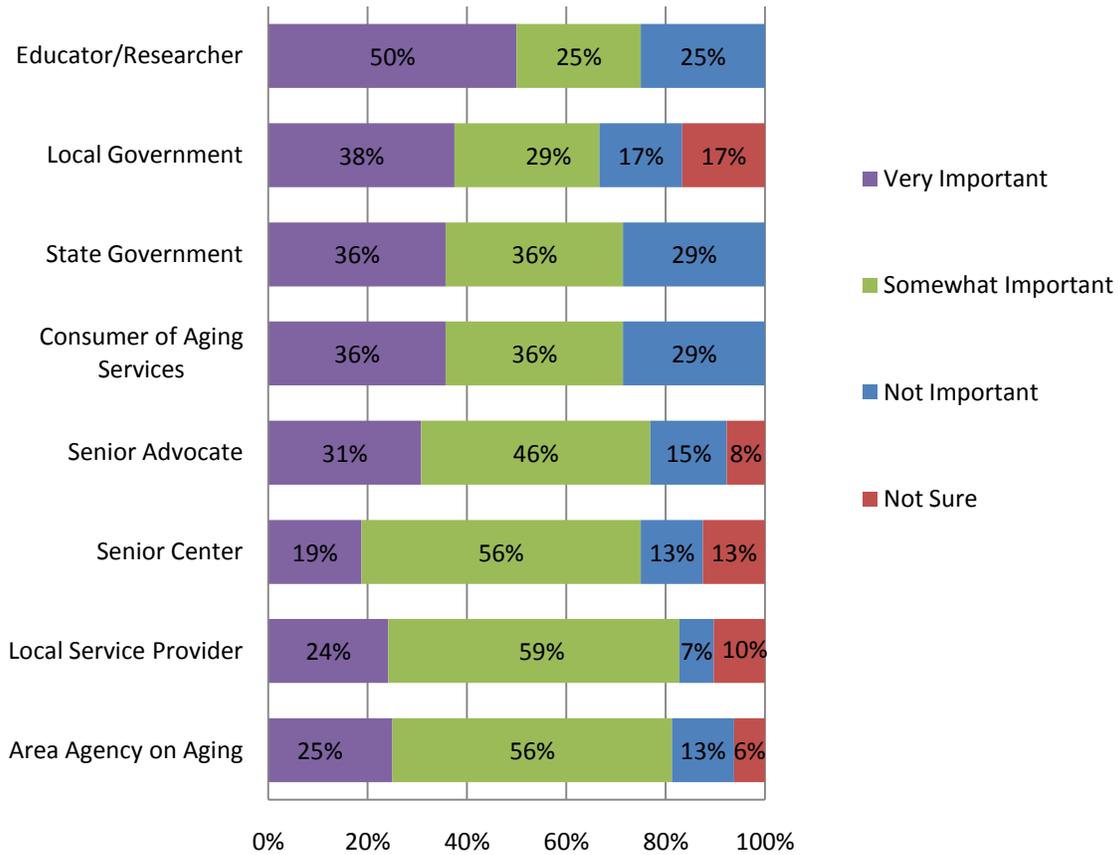
Long Term Care Options/Counseling



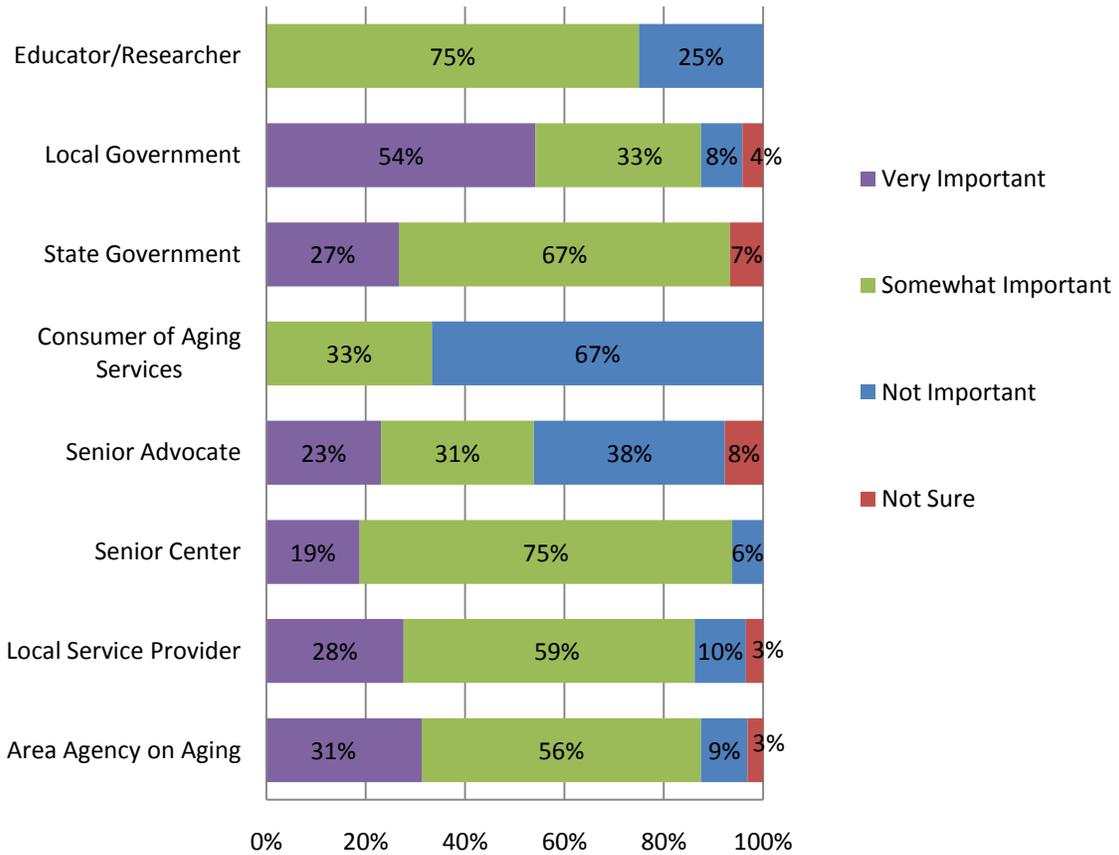
Consumer Fraud Protections



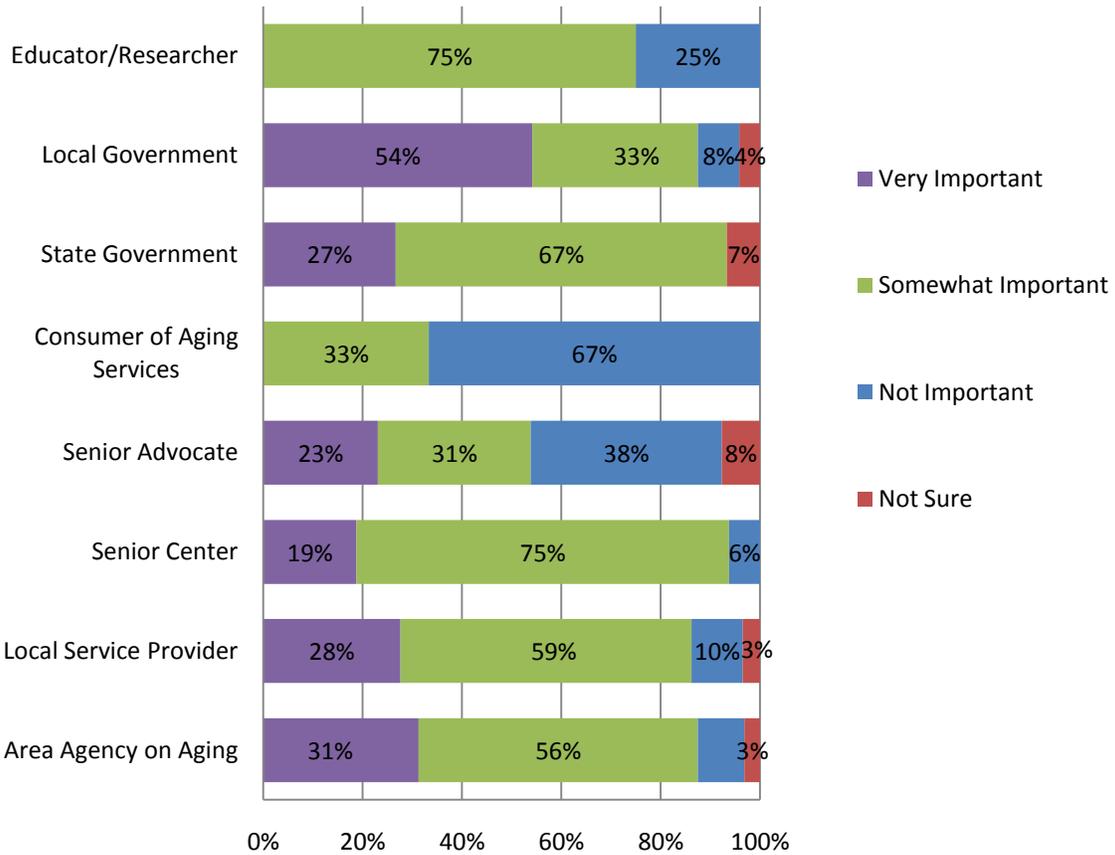
Helping Naturally Occurring Retirement Communities (NORCs)



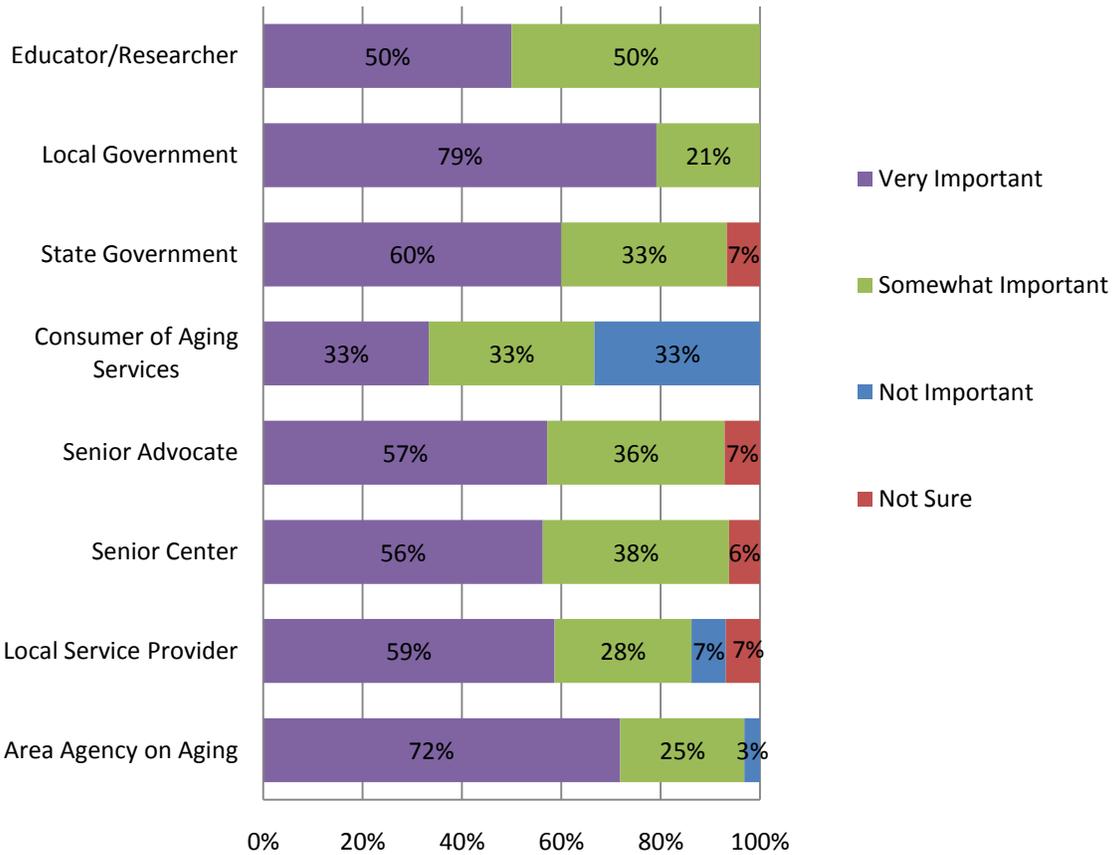
Promoting Lifelong Learning



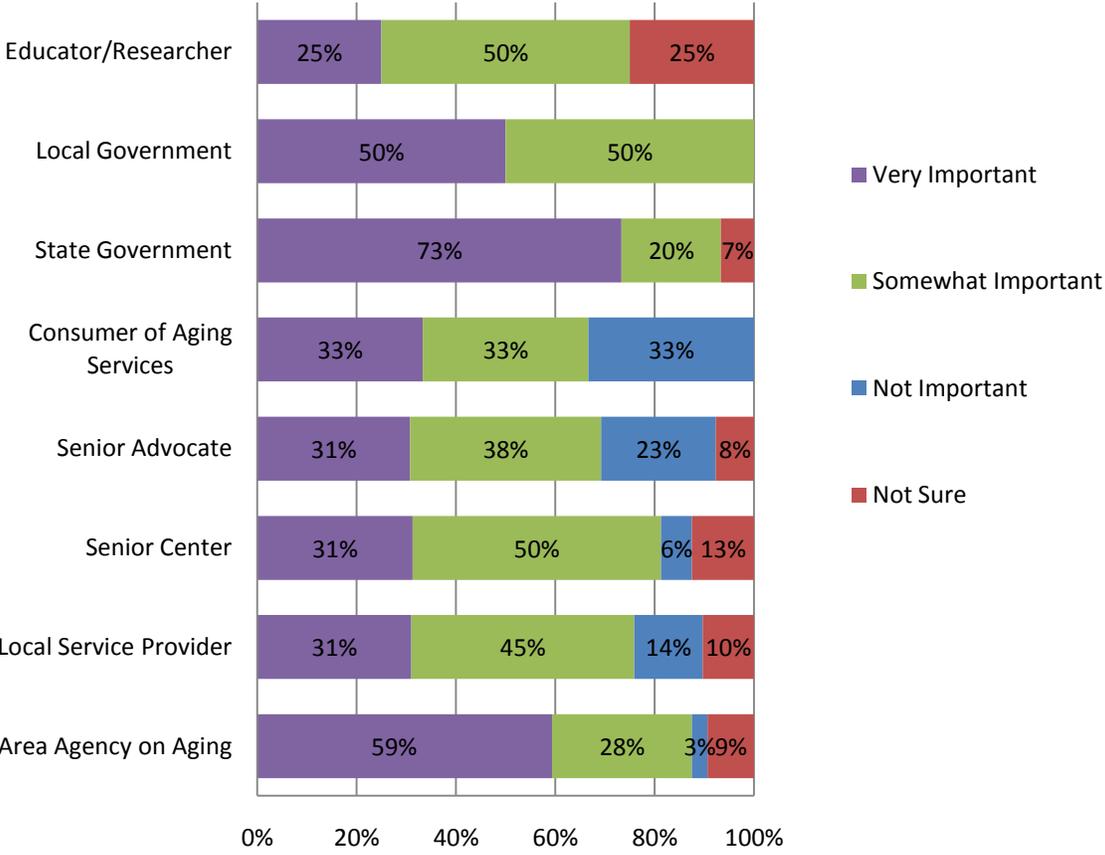
Greater Access to Substance Abuse Assistance



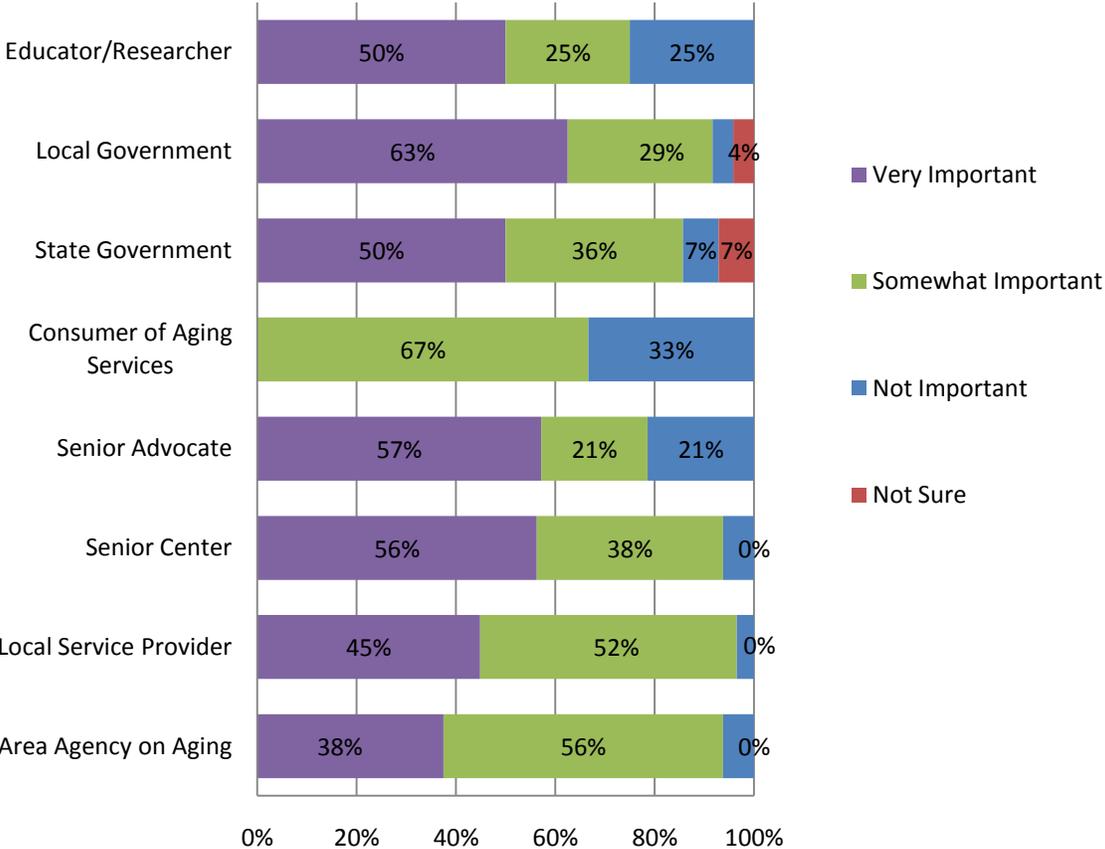
Greater Access to Mental Health Services



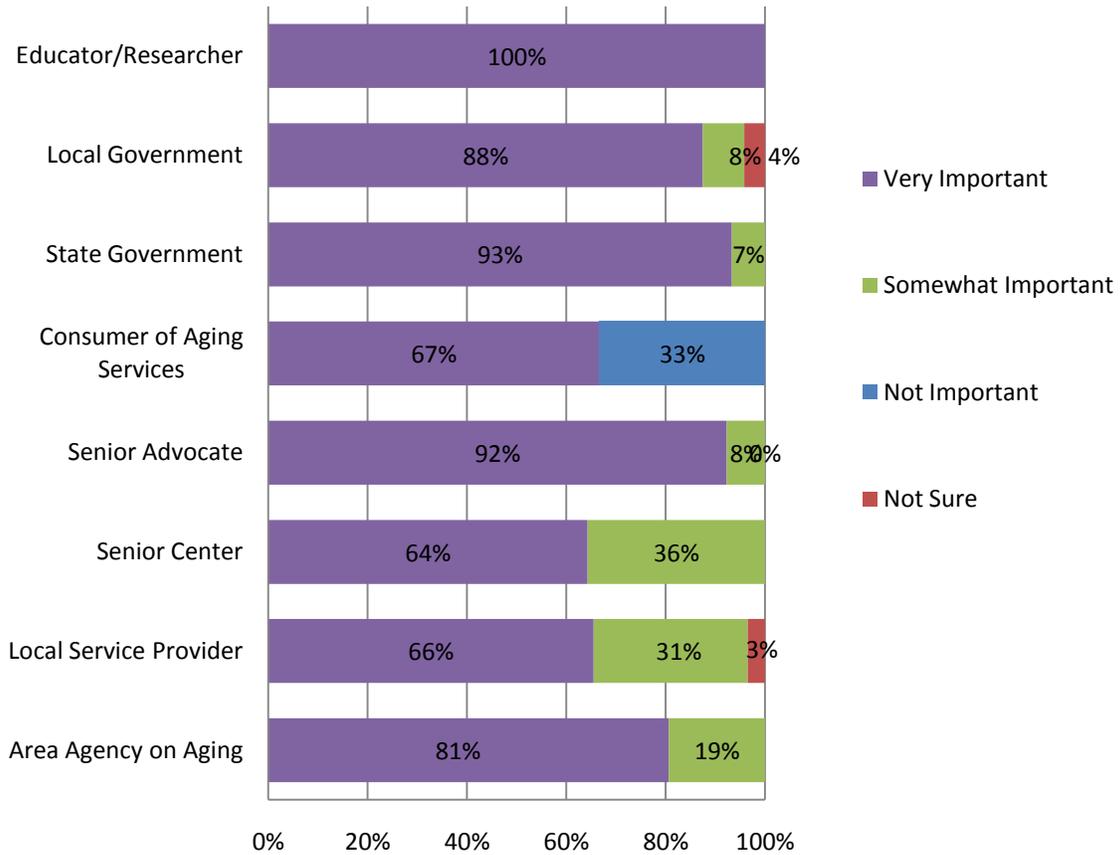
Consumer-Directed Service Options



Older Driver Safety



Strengthening Adult Protective Services



	Priority One	Priority Two	Priority Three
	Title V to WIA		
Local Service Provider	End of Life education, services	Apply governing standards to all congregate settings	Better funding opportunities for ombudsmen.
	funding for on-going and new programs	Better understanding of boomers needs	Educational programs for older americans re:available services
	FUNDS COME DIRECTLY TO LOCAL GOVERNMENT	Expand on mental health services	Give equal attention to healthy and frail older adults
	Greater Flexibility for the states	Greater state flexibility	Less funding to Family Caregiver, more to in-home services
	Increase County flexibility with funds tied to POMP	Increased oversight to the programs provided	more education
	Increase standards and oversight of group homes	Lose Volunteer dev. - not enough return on investment	More financial assistance for the caregiver
	increased flexibility for states and local communities	More funding	More state flexibility
	more funding	More state flexibility	
	More state flexibility to determine funding	more training	
	Relate funding to number of older Americans	New grant initiative	
	Standards need revising		
	Strengthen Outcomes for Elder Abuse education projects		
	Take time to get a better understanding of what the needs are		
Senior Center	Needs to include funding for remodeling or construction of new Senior Centers to replace old centers.	More funding for Nutrition Services (Congregate and Home-Delivered)	adapting the programs to meet the ever changing population
	Senior Services should be mandatory at the county level.	more funding for respite care	federal grant opportunities with more flexibility, longer grant periods and more realistic proposal deadlines (e.g., 90 days to allow adequate time for planning and

	Priority One	Priority Two	Priority Three
5 Respondents			preparation)
	The age limit maybe change for the extreme disabled starting at 55	more public awareness	Innovative systems using new technology to monitor health and welfare of frail elderly that live alone (that is low cost).
	Title V 55 & Beyond Training Program	New programs for older Americans who are not elderly but need minor assistance	More funding/grants for Family Caregiver Support Program
Senior Advocate 8 Respondents	Revisit role of AAAs	More flexibility at the community level	Removing layers of bureaucracy.
	Have one Title 111 authorization	Enable consumer directed service to be funded as a service like other T-III services as opposed to being a mechanism for service delivery. This change would facilitate the growth of this choice/empowerment option for many older adults, especially for boomers who will expect to have these options.	Incorporat Project 20/20 into the regular funding stream and move it out of discretionary status.
	Increased number and funding for Ombudsman	Higher Funding	mandentory training
	More flexibility to local providers	more cooperation with Adult Services	More State Flexibility
	more funding	preventive programs	Need to increase funding to allow for the predicted growth from the baby boomers aging.
	more funding to reach the demand	Requirement for more collaborative efforts with state and local agencies.	strategies to maintain current effective programs
	Not sure	update-ability in programs	strengthen grass-roots advocacy component
	Strengthen Adult Protective and Legal Services	Why does it have minimum percentages to certain programs. Certainly the country is not the same all over, and changes occur constantly. Can't you trust the counties to do the right thing for their residents.	
Consumer of Aging Services 2 Respondents	FUNDS COME DIRECTLY TO LOCAL GOVERNMENT		
	Not sure		
	Dedicated funding for senior centers	Elder Abuse	Program that will allow indivuals to remain at home a s long as possible.

	Priority One	Priority Two	Priority Three
State Government	fund ADRC as a regular program	Redefine ombudsman duties and provide more oversight for outcomes with this program. It seems to function as a social program not a program that benefits those in facilities.	More funding for legal services
	more funding for caregiver support		
	More Targeted Programs		
	Move the eligibility age up to 65		
	Provide funding for Adult Protective Services		
6 Respondents			
	additional funding	Better Community Planning for Aging	Address changes in the Aging population
	Demand educational standards for staff	Don't make rules or mandates that you don't fund	Long Term Care Options-Education
	increase funding for APS/Elder Abuse	Increase funding	Mental Health
	Increased Funding	Legal Aid Services	More programs preventing premature aging
	Increased Funding	Legal to LSC	Realize the providers can do the job required, just let us to it.
	More funding for Adult Protective Services to provide services after substantiation to provide protection.	Local Flexibility	Senoir Center need to offer more physical & recreation activities for baby boomers
	more PR--get the word out	Strengthen mental health services for older adults	Strengthen community efforts for aging in place
	Prevention of and addressing elder abuse	Transportaion for extreme disabled starting at age 55	Training
	Senior Services should be mandatory at the county level.		
	Strengthen Outcomes for Elder Abuse education projects		
	Strengthen support of transportation for everybody		
Wide blitz / public education of the funds & their purpose			
Local Government			
12 Respondents			
Local Govt. (cont.)			

	Priority One	Priority Two	Priority Three
Educator/Researcher 2 Respondents	Revisit role of AAAs	Less flexibility at the AAA level for use of the funds.	Specific & Identified allowable activities at the AAA level.
	Revisit role of AAAs	More flexibility at the community level	Removing layers of bureaucracy.

Comments of Analysis

AoA Listening Forum

Older Americans Act Reauthorization

February 25, 2010 - Washington, DC

Shared by Dennis Streets

COMMENTS FOR OAA LISTENING SESSION

IT IS AN HONOR TO SPEAK TODAY ABOUT THE FUTURE OF THE OLDER AMERICANS ACT—THE BEDROCK OF OUR NATION’S EXPANSIVE FEDERAL, STATE, REGIONAL AND LOCAL SYSTEM OF CONNECTING WITH THE NEEDS, INTERESTS, AND CONTRIBUTIONS OF OUR SENIORS AND AGING BOOMERS AND THEIR FAMILIES AND COMMUNITIES.

TO PREPARE FOR TODAY’S SESSION, THE NORTH CAROLINA DIVISION OF AGING AND ADULT SERVICES WORKED WITH NASUA TO SURVEY AREA AGENCIES ON AGING, LOCAL SERVICE PROVIDERS, SENIOR CENTERS, SENIOR ADVOCATES, CONSUMERS OF AGING SERVICES, STATE AND LOCAL GOVERNMENT OFFICIALS, AND EDUCATORS AND RESEACHERS TO GATHER THEIR VIEWS ABOUT THE REAUTHORIZATION OF THE OLDER AMERICANS ACT. NEARLY 250 PERSONS RESPONDED WITHIN A VERY SHORT TIME-FRAME, SHOWING GREAT INTEREST IN THE FUTURE OF THIS ACT.

WHILE I LOOK FORWARD TO SHARING A DETAILED REPORT OF THESE SURVEY RESULTS, I WILL HIGHLIGHT JUST A FEW AREAS.

- FIRST, MORE THAN 4 IN 10 OF THOSE FAMILIAR WITH THE ACT’S OBJECTIVES BELIEVE THEY NEED TO BE MODERNIZED. SOME WANT GREATER EMPHASIS ON ‘AGING’ AS A LIFELONG PROCESS. OTHERS

STRESS ELDER ABUSE ISSUES. OTHER AREAS OF EMPHASIS INCLUDE PERSON-CENTERED SERVICES, AND THE VALUE OF AGING AND DISABILITY RESOURCE CENTERS (OR ‘THE NO-WRONG DOOR’ COMMUNITY RESOURCE CONNECTIONS FOR AGING AND DISABILITIES AS WE CALL THEM IN NORTH CAROLINA).

- NEARLY A THIRD OF RESPONDENTS HAD SUGGESTIONS FOR STRENGTHENING THE NUTRITION PROGRAM. A MAJOR THEME, BESIDES THE NEED FOR ADDITIONAL FUNDING, IS MORE FLEXIBILITY IN THE FUNDING AND DELIVERY OF MEALS—WITH A SPECIAL EMPHASIS ON MEETING THE GROWING NEED FOR HOME-DELIVERED MEALS AND IN UPDATING CONGREGATE NUTRITION TO BE ATTRACTIVE TO BOOMERS AND RESPONSIVE TO AN INCREASINGLY DIVERSE POPULATION.

- FLEXIBILITY WAS AN OVERALL THEME—WITH NEARLY HALF OF RESPONDENTS FAVORING COMBINING ALL TITLE III FUNDING INTO ONE ALLOCATION TO MAXIMIZE FLEXIBILITY AT THE COMMUNITY LEVEL AND TO SUPPORT MORE PERSON-CENTERED SERVICES. WHILE ONLY 12% OPPOSED COMBINING TITLE III FUNDS, 4 IN 10 ARE UNSURE—SUGGESTING THE NEED FOR FURTHER STUDY OF THIS IMPORTANT POLICY ISSUE.

- MORE THAN A THIRD OF RESPONDENTS HAD SUGGESTIONS TO STRENGTHEN SENIOR CENTERS. NORTH CAROLINA’S COMMUNITIES HAVE MADE A MAJOR LONG-TERM INVESTMENT IN SENIOR CENTERS, AND WE ARE COMMITTED TO SEEING THEM REMAIN VIABLE AND ATTRACTIVE TO FUTURE SENIORS AND THE LARGER COMMUNITY. ONE RESPONDENT

NOTED THAT BECAUSE THEY ARE A SYSTEM OF SERVICES—THEY SHOULD HAVE THEIR OWN FUNDING IDENTITY AS WAS THE CASE IN THE 1970's—WHICH SHOULD ALSO HELP FURTHER ADVANCE THE EVOLVING ADRC MOVEMENT.

- OTHER AREAS OF RECOMMENDATION INCLUDED IDEAS FOR STRENGTHENING THE FAMILY CAREGIVER SUPPORT PROGRAM, CONSUMER COST SHARING, THE LONG TERM CARE OMBUDSMAN PROGRAM, LEGAL SERVICES, ACTIVITIES TO PREVENT ELDER ABUSE/NEGLECT/EXPLOITATION, AND THE SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM.

- WHEN ASKED ABOUT THE EFFECTIVENESS OF THE FEDERAL DEMONSTRATION PROJECTS WITH WHICH NORTH CAROLINA HAS HAD EXPERIENCE—AT THE TOP OF THE LIST IS THE ALZHEIMER'S DISEASE DEMONSTRATION (WHAT WE CALL PROJECT C.A.R.E.—CAREGIVER ALTERNATIVES TO RUNNING ON EMPTY). MORE THAN HALF BELIEVE THAT THIS PROGRAM SHOULD BE MADE A PERMANENT PART OF THE OAA. THERE WAS ALSO STRONG SUPPORT FOR CHRONIC DISEASE SELF-MANAGEMENT (WHAT WE CALL 'LIVING HEALTHY') AND FOR ADRCs.

- WHEN WE ASKED ABOUT WHAT IMPROVEMENTS THE OAA NEEDS MOST—MORE THAN 8 IN 10 IDENTIFIED INCREASED FUNDING, AND MORE THAN 4 IN 10 STRESSED GREATER STATE FLEXIBILITY.

- SADLY, MORE THAN 8 IN 10 RESPONDENTS FEEL THAT WE ARE NOT PREPARED TO DEAL WITH THE AGE WAVE (AGING OF BABY

Dennis W. Streets, NC Division of Aging and Adult Services, February 25, 2010

BOOMERS)—ONLY 3% THINK WE ARE READY. BESIDES INCREASED FUNDING, NEARLY 6 IN 10 RESPONDENTS ADVOCATE INTRODUCING NEW GRANT INITIATIVES IN THE OAA TO TARGET BABY BOOMERS—WITH SOME CALLING FOR TURNING THE LONG-TERM CARE SYSTEM ON ITS HEAD WITH GREATER SUPPORT OF IN-HOME SERVICES, PERSON-CENTERED CARE, AND MORE HOME-LIKE SETTINGS FOR THOSE WHO CANNOT REMAIN AT HOME. STILL OTHERS QUESTION SUCH NEW INITIATIVES—AS ONE RESPONDENT PUTS IT, “DON’T SPEND MONEY TARGETING BOOMERS—THEY ARE THE ‘ME’ GENERATION—THEY WILL FIND US.” OBVIOUSLY THIS IS ANOTHER POLICY ISSUE WORTHY OF MORE DISCUSSION AND DEBATE.

I REALIZE THAT THIS IS JUST THE BEGINNING OF THE EFFORTS TO IDENTIFY AND PRIORITIZE THE MOST CRITICAL CHANGES TO STRENGTHEN THE OAA. THERE IS TREMENDOUS VARIANCE IN OPINIONS—FOR EXAMPLE, SOME ARGUE FOR RAISING THE ELIGIBILITY AGE TO 65 OR 75 GIVEN THE INCREASED LIFE EXPECTANCY AND IMPROVED HEALTH OF MANY; OTHERS PROMOTE DECREASING OR ELIMINATING THE AGE REQUIREMENT SO THAT YOUNGER ADULTS WITH DISABILITIES CAN BE ASSISTED TOO. INTERESTINGLY NEARLY HALF OF THE RESPONDENTS SUPPORT BROADENING THE SCOPE OF THE OAA AND THE WORK OF THE AOA TO INCLUDE PEOPLE WITH PHYSICAL DISABILITIES. STILL ABOUT 30% OPPOSE THIS.

I WILL CONCLUDE MY COMMENTS WITH THE RESPONSE TO ONE LAST QUESTION—WHEN GIVEN A CHOICE OF 16 POSSIBLE INITIATIVES IMPORTANT TO THE FUTURE SUPPORT OF OLDER NORTH CAROLINIANS THAT SHOULD BE ADDRESSED IN THE OAA REAUTHORIZATION—THE TOP FIVE ARE:

- (1) STRENGTHENING ADULT PROTECTIVE SERVICES (MENTIONED BY 79%)
- (2) COMMUNITY PLANNING FOR AN AGING POPULATION (78%)
- (3) LONG-TERM CARE OPTIONS/COUNSELING (68%)
- (4) GREATER ACCESS TO MENTAL HEALTH SERVICES (66%)
- (5) CONSUMER FRAUD PROTECTIONS (66%).

THANK FOR YOU LISTENING AND FOR YOUR LEADERSHIP AS WE BEGIN THE LONG AND VITAL PROCESS OF STRENGTHENING OUR FOUNDATION TO WEATHER FUTURE STORMS AND TO READY OURSELVES FOR THE PROMISING OPPORTUNITIES THAT LAY AHEAD.

2011 Older Americans Act Reauthorization Survey Questions

NASUA—2011 Older Americans Act Reauthorization Survey for

1. Default Section

The North Carolina Division of Aging and Adult Services (DAAS) is joining the National Association of State Units on Aging (NASUA) in gathering information to help shape the future of the Older Americans Act (OAA). In 2011, the U.S. Congress will consider reauthorization of and amendments to this Act, which was first established in 1965. As director of the designated State Unit on Aging, I will have an opportunity to share North Carolina's recommendations to preserve and strengthen the Older Americans Act as we move forward to assist today's seniors as well as the aging boomers. The oldest boomers turned age 60 in 2006, and are already eligible for programs under the Older Americans Act.

As you prepare to participate in this survey, you first may want to revisit the Older Americans Act itself as well as review some related materials (see the following NASUA web-site:

http://www.nasua.org/issues/federal_policy/oaa_reauthorization.html and/or the web-site of the U.S. Administration on Aging: www.aoa.gov/AoARoot/AoA_Programs/OAA/Reauthorization/Index.aspx). Thank you for taking the time to provide input. I promise to put your views to good use. To have your thoughts considered in North Carolina's Older Americans Act Input-please respond by February 19, 2010.

Dennis W. Streets
Director, NC Division of Aging and Adult Services

* 1. Please identify yourself by selecting the most appropriate box that best describes you and / or your affiliation:

- Area Agency on Aging
- Local Service Provider
- Senior Center
- Senior Advocate
- Consumer of Aging Services
- State Government
- Local Government
- Educator/Researcher

2. Title I

This section asks questions about Title I of the OAA (42 U.S.C. §§3001-2). Title I describes the objectives of the OAA and provides definitions of key words and phrases that are used throughout the Act.

1. Are you familiar with the definitions referenced in the OAA?

Yes

No (Skip to question 3)

2. If you answered yes to question 1, how would you assess the definitions: (Check all that apply)

The definitions used in the OAA remain appropriate

Some definitions need to be added

Definitions need to be deleted

Don't know

Other (Please specify any recommended changes to the objectives)

3. Are you familiar with the OAA Objectives?

Yes

No

4. If you answered yes to question 3, how would you assess the objectives: (Check all that apply)

The objectives remain appropriate

The objectives need to be modernized

Objectives need to be added

Objectives need to be deleted

Don't know

Please specify any recommended changes to the objectives

3. Title II

Title II (42 U.S.C. §§3011-20) establishes the Administration on Aging and provides an operational framework for the Agency and its Assistant Secretary. Also, included in Title II are certain discretionary grants, including the National Elder Care Locator.

1. Are you familiar with the National Elder Care Locator?

Yes

No (Skip other questions in this section)

2. Do you refer consumers to the Elder Care Locator?

Yes

No

3. Have you found the Elder Care Locator to be a valuable resource?

Yes

No

4. Please specify any suggestions for improving the Elder Care Locator initiative to enhance its value.

4. Title III

This section asks questions relating to Title III of the OAA (42 U.S.C. §§3021-3030). Title III establishes a broad framework for the Aging Network and a diverse range of community based support services aimed at increasing older people's independence and preventing premature institutionalization. Answers from this section will help identify challenges and opportunities as we prepare for aging boomers.

1. Do you have suggestions to strengthen and/or improve Nutrition Services (congregate and home-delivered meals) that should be addressed in the OAA reauthorization process?

Yes

No (Skip to question 3)

Not Sure (Skip to question 3)

2. If you answered yes to question 1, what are your specific suggestions?

3. Would you favor combining all Title III funding into one allocation to maximize flexibility?

Yes

No

Not Sure

Comments:

4. Do you have suggestions for strengthening and/or improving the Family Caregiver Support Program that should be addressed in the OAA reauthorization process?

Yes

No (Skip to question 6)

Not Sure (Skip to question 6)

5. If you answered yes to question 4, what are your specific suggestions?

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6. Do you have any suggestions to improve Senior Centers that should be addressed in the OAA reauthorization process?

Yes

No (Skip to question 8)

Not Sure (Skip to question 8)

7. If you answered yes to question 6, what are your specific suggestions?

8. Do you have suggestions for consumer cost sharing and/or contributions that should be addressed in the OAA reauthorization process?

Yes

No (Skip question 9)

Not Sure (Skip question 9)

9. If you answered yes to question 8, what are your specific suggestions?

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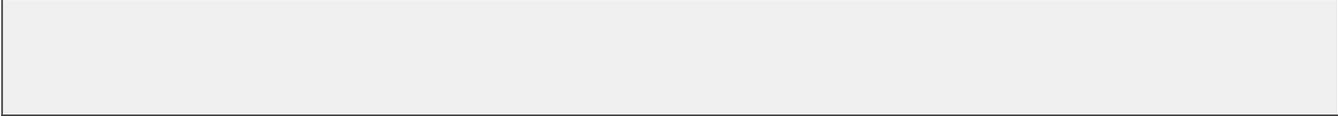
5. Title IV

This section asks questions related to Title IV of the OAA (42 U.S.C. §§3031-3033). Title IV provides a structure for the delivery of funding for innovative programs and initiatives aimed at building the capacity of the Aging Network. The responses from this section shall help identify which of the demonstration grants already in NC should be considered for permanent status.

1. Please give your opinion for each of the following demonstration grants:

	Very Effective (Should be made Permanent)	Effective, but Too Early to Tell (Remain a Demonstration)	Not Effective (Should End)	Not sure of Its Effectiveness	Don't know enough about Program
Alzheimer's Disease Demonstration (Project C.A.R.E. and R.E.A.C.H.)	jñ	jñ	jñ	jñ	jñ
Chronic Disease Self-Management (Living Healthy)	jñ	jñ	jñ	jñ	jñ
Senior Medicare Patrol	jñ	jñ	jñ	jñ	jñ
Performance Outcome Measurement Project (POMP)	jñ	jñ	jñ	jñ	jñ
Medicare Beneficiary Outreach and Assistance (Relay for Extra Help)	jñ	jñ	jñ	jñ	jñ
Aging and Disability Resource Centers (Community Resource Connections for Aging and Disabilities)	jñ	jñ	jñ	jñ	jñ

Use this space to comment on any of these projects (Name the project and be specific)



6. Title V

This section asks questions regarding Title V of the OAA (42 U.S.C. §3056). Title V establishes the Senior Community Service Employment Program (SCSEP), a community service and work-based training program for older workers.

1. Do you have suggestions to strengthen the SCSEP that should be considered in the OAA reauthorization process?

Yes

No (Skip question 2)

Not Sure (Skip question 2)

2. If you answered yes to question 1, what are your specific suggestions?

7. Title VII

This section asks questions about Title VII of the OAA (42 U.S.C. §3058). Title VII supports elder rights and funds activities aimed at preventing elder abuse, neglect, and exploitation, and at protecting the rights of long-term care residents. Responses to this section will help in advocating for creative solutions to any challenges in this area.

1. Do you have suggestions for strengthening and/or improving the Long-Term Care Ombudsman Program that should be addressed through the OAA reauthorization process?

Yes

No (Skip to question 3)

Not Sure (Skip to question 3)

2. If you answered yes to question 1, what are your specific suggestions?

3. Do you have suggestions for strengthening and/or improving activities aimed at preventing elder abuse, neglect, and exploitation that should be addressed in the OAA reauthorization process?

Yes

No (Skip to question 5)

Not Sure (Skip to question 5)

4. If you answered yes to question 3, what are your specific suggestions?

5. Do you have suggestions for strengthening and/or improving legal assistance that should be addressed in OAA reauthorization process?

Yes

No

Not Sure

6. If you answered yes to question 5, what are your specific suggestions?

8. General Questions

This section asks broad overarching questions about the OAA. Information gathered from this section is vital in helping DAAS and NASUA determine priorities for the reauthorization of the OAA.

1. What improvements do you think the OAA needs most? (Check all that apply)

- New Programs
- Expanded Authority
- Increased funding
- More stringent benchmarks and performance measures
- More oversight
- More state flexibility

Comments:

2. Do you think the OAA is prepared to deal with the Age Wave (aging of baby boomers)?

- Yes (Skip to Question 4)
- No
- Not Sure

Comments:

3. If you answered No in question 2, how could the OAA be better prepared to deal with the Age Wave? (Check all that apply)

- Introduce new programs targeting this group
- Introduce new grant initiatives targeting this group
- Increased funding
- More state flexibility
- Other (please specify)

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4. Please list the top three aspects of the Older Americans Act that you want to make sure are maintained.

- *
- *
- *

5. Please list the top three changes you would like to see made to the OAA through the reauthorization process to strengthen the Act.

- *
- *
- *

6. Some advocates may propose to add a new Title to the OAA during reauthorization, which would focus on Housing. Do you support such a change to the OAA?

- Yes
- No
- Not Sure

Comments:

7. Do you support a distinct federal agency and federal funding stream for people with physical disabilities, separate from aging?

- Yes
- No
- Not Sure

Comments:

8. Do you support broadening the scope of the Older Americans Act and the work of the Administration on Aging to include people with physical disabilities?

- Yes
- No
- Not Sure

Comments:

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9. How important do you believe the following are to the future support of older North Carolinians that should be addressed in the OAA reauthorization process?

	Very Important	Somewhat Important	Not Important	Not Sure
Pension and Other Financial Counseling	jn	jn	jn	jn
Promotion of Livable and Senior-Friendly Communities	jn	jn	jn	jn
Community Planning for an Aging Population	jn	jn	jn	jn
Strengthening Use of Assistive Technology	jn	jn	jn	jn
Training for the Aging Network	jn	jn	jn	jn
Strengthening Use of Information Technology within Aging Network	jn	jn	jn	jn
Public Education about Healthy Aging Practices	jn	jn	jn	jn
Long Term Care Options/Counseling	jn	jn	jn	jn
Consumer Fraud Protections	jn	jn	jn	jn
Helping Naturally Occurring Retirement Communities (NORCs)	jn	jn	jn	jn
Promoting Lifelong Learning	jn	jn	jn	jn
Greater Access to Substance Abuse Assistance	jn	jn	jn	jn
Greater Access to Mental Health Services	jn	jn	jn	jn
Consumer-Directed	jn	jn	jn	jn

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Service Options

Older Driver Safety	jn	jn	jn	jn
Strengthening Adult Protective Services	jn	jn	jn	jn

10. Comments: (Identify item(s) and offer specific comments)

11. What other suggestions and/or comments would you like considered relative to the OAA reauthorization and funding?