## Grants Awarded to Department of Elder Affairs and Descriptions

<table>
<thead>
<tr>
<th>Program</th>
<th>Amount</th>
<th>Start – End</th>
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<tr>
<td>The Florida Department of Elder Affairs (FDOEA) proposes a Community Living Program (CLP) project targeting elders at high risk for nursing home placement and spend down to Medicaid. The project will operate in Broward, Marion and Miami-Dade counties in concert with the Planning and Service Area (PSA) 10 Aging and Disability Resource Center (ADRC), and PSAs 3 and 11 Aging Resource Centers (ARCs), respectively. The goal of the project is to build on the current CLP Project, formerly known as Nursing Home Diversion Modernization, and expand innovative service delivery options in the areas served by the existing ADRC/ARCs. This expansion will increase the capacity of the aging services network and minimize the number of elders placed in nursing homes, readmitted to hospitals, or spending down to Medicaid.</td>
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<tr>
<td>Senior Companion Program</td>
<td>$100,000</td>
<td>7/1/2010 – 6/30/2011</td>
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<td>Senior Companion Program peer-volunteers provide services to elders, age 60 and older, at risk of institutionalization due to chronic illnesses, disabilities or social isolation. The program strengthens service communities in two major ways, with a primary focus on supporting older adults who require assistance to live independently. First, along with companionship, Senior Companion Program (SCP) volunteers provide a number of services, such as transportation to medical appointments, shopping assistance, meal preparation and advocacy for targeted at-risk elders. Volunteers provide in-home respite services for caregivers of frail elders and adult day-care respite through one-on-one social interaction. Second, through the services they provide, SCP peer-volunteers themselves benefit from the program by remaining active and finding renewed purpose through helping at-risk elders remain in their homes and avoid institutionalization, thus contributing to the well being of their communities.</td>
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<td>Next Generation: POMP</td>
<td>$60,000</td>
<td>8/1/2010 – 7/31/2011</td>
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<td>The Florida Department of Elder Affairs and the Florida Association of Area Agencies on Aging support the one-year Next Generation: POMP Project. The project will target individuals at risk of nursing home placement, particularly the populations emphasized by the Older Americans Act. The project goal is to enhance the performance measurement capability of the aging network by providing easy-to-use tools to assess program effectiveness, demonstrate cost-efficiency and document the importance of service interventions in keeping clients at home. The proposed objectives that correspond to the Administration on Aging’s (AoA) four performance measurement topics are as follows: 1) finish development of a “POMP TO GO” evaluation toolkit including POMP surveys; 2) develop longitudinal survey instruments and a protocol for a longitudinal study of elders; 3) validate Advanced POMP models and incorporate Advanced POMP findings into ongoing analyses; and 4) create a nursing home placement prediction model using POMP surveys including the longitudinal survey. The expected outcomes are as follows: 1) ready-to-use tools to easily measure program effectiveness and client satisfaction; 2) tools and a protocol for the collection of longitudinal data to measure program impacts over time; 3) incorporation of significant predictors of nursing home placement identified by Advanced POMP into the longitudinal study; and 4) a strategy for developing a predictive model for client risk of nursing home placement ready for validity testing by AoA. The project products include a POMP TO GO toolkit, a plan for a longitudinal study using a new longitudinal survey, a generic statistical model to predict nursing home placement and a report on key survey variables that predict nursing home placement.</td>
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### ADSSP Innovation: Healthy Brain Initiative (HBI) $644,838  8/1/2010 – 7/31/2012

The Florida Department of Elder Affairs (DOEA) proposes to partner with established Memory Disorder Clinics to address the priority area of Early Stage Dementia (ESD). The goals of the program are to provide educational programming designed to prolong brain function and independence of the person with ESD and to connect both the person with ESD and the care partner with resources and support to encourage pro-active planning for future care.

The Healthy Brain Initiative (HBI) proposes these objectives:

1. To provide early detection of cognitive problems such as ESD through free community memory screening available from the Memory Disorder Clinics.
2. To provide educational programs on memory enhancement training techniques within each of the three Memory Disorder Clinic services areas.
3. To create/enhance a monthly educational support group at the three Memory Disorder Clinic sites for participants in the memory training class, as well as community participants.
4. To train volunteer class facilitators in each of the three Memory Clinic’s service areas.

The expected outcomes are to provide memory enhancement training to a total of 360 people including individuals with ESD and their care partners; to train a minimum of 24 volunteers to be able to teach the memory enhancement program; to provide opportunity for discussion about ESD and future planning with available resource information in dual ESD Support Groups for people with ESD and care partners; to train Elder Helpline staff of the participating Aging and Disability Resource Centers (ADRCs), and to present the program to the state’s Alzheimer’s Disease Advisory Committee and other Memory Disorder Clinics to expand the reach of the grant statewide.

The products from the HBI project include a final report on lessons learned, with specific information on implementation and replication; a manual including training tools and marketing materials; a cost analysis including start-up and operations costs; and data reports including demographic and unit-of-service data.

### ADSSP: Evidence-Based Intervention Programs $1,383,907  8/1/2010 – 7/31/2013

The Florida Department of Elder Affairs (FDOEA) proposes to implement a pilot project translating the Adult Day Services (ADS) evidence-based intervention (Femia, Zarit, Stephens, & Greene, 2007) assisting both persons with dementia and their family caregivers. The project goal is to demonstrate how the ADS intervention can be translated into effective programs in adult day care and home settings. The pilot project will translate and extend the procedures employed by Femia et al., 2007 to three adult day care center locations in Brevard County.

Project objectives are as follows:

1. Deliver project services to individuals with ADRD.
2. Deliver project services to caregivers and family members.
3. Evaluate project and disseminate project findings.
4. Involve the aging network in planning and implementing the project.
5. Integrate the findings of the project into the current aging services network.

The pilot project will examine the efficacy of the ADS intervention in conjunction with ongoing medical and psychological services to reduce problem behavior and psychological problems faced by individuals with ADRD and their caregivers in community settings. An additional focus will be on increasing skills of family caregivers and ADS staff in managing problem behaviors of persons with ADRD. FDOEA will contract with the Florida Institute of
Technology in Melbourne, Florida, to translate the ADS intervention at the three project ADS sites.

The three project outcomes are:
1. Patients with ADRD will show improvement in behavior and psychological well-being.
2. Caregivers will learn effective strategies for assessing and treating behavior at the individual and system-wide levels.
3. ADS staff and caregivers will evidence reduced stress and burden.

ADSSP: Evidence-Based Caregiver - Applying New York University Caregiver Intervention (NYUCI) to Better Serve People with Alzheimer’s Disease and Related Disorders  $1,512,586  8/1/2010 – 7/31/2013

The Florida Department of Elder Affairs’ (DOEA’s) goal for this 36-month project is to increase the well being of caregivers of people with ADRD. Sarasota Caregiver Counseling & Support Program (SCCSP) will be implemented by Jewish Family & Children’s Service of Sarasota-Manatee, Inc., (JFCS) in partnership with Sarasota Memorial Hospital’s Memory Disorder Clinic. SCCSP addresses the needs of individuals with ADRD and their families through five interventions from the New York University Caregiver Intervention (NYUCI).

These interventions constitute the following five major objectives and measurable outcomes: maintain caregiver physical health, improve caregiver mental health, increase caregiver social support networks, increase caregiver understanding of memory loss and behaviors, and increase length of time between enrollment in SCCSP and nursing home placement of the care recipient.

Goals are reached through individual and family counseling, wraparound case management to build social support networks, referral to caregiver support groups, ad hoc counseling by telephone and email, and follow-up counseling and services that extend for two years after participant completion. SCCSP will reach 105 people with ADRD and their families each year, for a total of 315 families served over the three years of the project. Special populations that will be targeted include lower-income individuals who cannot afford to pay for professional services, families of military veterans, and families from minority populations.

Products will include the following: a report describing key findings and lessons learned from the project that can be used to replicate the project in other states/communities, a manual for replication, a cost analysis, semi-annual data reports, and at least one article for publication in a peer-reviewed journal.

Implementing the Affordable Care Act Funding Opportunity Option A: 2010-2012 Florida SHINE MIPPA Grant Project Narrative

Formula Funding:  $2,004,107  9/30/2010 – 9/29/2011

Through this funding the Department will develop a statewide strategic plan that provides an outline for programs to use in the development of their expanded outreach and application assistance efforts. The local SHIP programs will revise their current recruitment plans to add strategies and goals for gaining a volunteer workforce and partner network in the low-income and rural areas. The Department will provide technical assistance to the local programs at quarterly SHINE Leadership Meetings, and throughout the grant as needed to assist all programs with the success of this grant. Additionally, Department staff will travel to the AAAs to offer individualized program development and outreach planning strategies. By funding the local SHIP programs as opposed to funding the MBOA programs, both which are housed at the AAAs, work will not be duplicated. Rather, this will expand the local SHIP programs’ abilities to assist the hard-to-reach low-income and rural areas, which have previously been cost-prohibitive to serve.
### Implementing the Affordable Care Act Funding Opportunity Option B: ADRC Options Counseling and Assistance Programs

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<td>$563,723</td>
<td>9/1/2010 – 8/31/2012</td>
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The Florida Department of Elder Affairs, in collaboration with the Area Agency on Aging of Pasco-Pinellas, Inc., (AAAPP) proposes to develop state-specific standards, expand long-term care (LTC) options counseling for the Aging and Disability Resource Center (ADRC) in Planning and Service Area (PSA) 5 and participate in the collaborative process to establish minimum national standards. The goal of this proposal is to implement standard operating procedures for options counseling in the ADRC by training and preparing staff to offer options counseling to adults of all ages and disabilities in PSA 5.

The objectives include the following: 1) Develop and implement a comprehensive set of standards that define policies and procedures for options counseling; 2) Train options counselors to follow the new standards; 3) Expand options counseling to include adults of all ages and all disabilities; 4) Gather feedback and evaluate the effectiveness of the new standards to improve future outcomes; and, 5) Collaborate with state, local and national partners in the development of national standards.

The expected outcomes of this proposal are to create state standards that increase the knowledge of consumers and caregivers in their understanding of available long-term care options without regard to age or disability and to participate in the collaborative process in the creation of national standards to guide the delivery of options counseling.

### Implementing the Affordable Care Act Funding Opportunity D: ADRC Evidence-Based Care Transition Programs

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<td>$383,612</td>
<td>9/30/2010 – 9/29/2012</td>
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The Florida Department of Elder Affairs, proposes to employ grant funding to expand the existing Evidence-Based Care Transitions Intervention (CTI) model of E.A. Coleman, MD, MPH, and associates, in Planning and Service Area (PSA) 7 (Metro Orlando and surrounding areas). The project will operate in Orange, Osceola and Seminole counties. Key project partners will be the Senior Resource Alliance, the designated PSA 7 Area Agency on Aging and ADRC, and Florida Hospital. The Alliance administers the current CTI program in three Florida Hospital community facilities.

The goal of the proposed project is to expand program services to three additional facilities, for a total of six project sites.

The project outcome is to demonstrate the capacity of the CTI project to reduce the incidence of re-hospitalizations of project patients as compared with Florida Hospital discharges of patients who do not participate in the project.

Project objectives are producing key grant deliverables, ensuring program quality, effectively using ADRC assets, increasing CTI effectiveness through home and community-based services and expanding the project to new sites. The project targets Medicare patients age 60 and older identified as most at risk of hospital readmission. The current CTI program and proposed project supplement CTI model services with the provision of home and community-based services to support elders in their homes during a 30-day recovery period without the need to meet financial eligibility requirements or service availability/waiting-list issues.

The project’s planned output for the two-year grant period is 720 enrollments. Project products will include an evaluation plan, formal evaluation tools, improved project database and semi-annual/final reports.