The following programs are funded wholly or primarily with state General Revenue dollars. They provide a wide variety of home and community-based services for elders, including adult day care, Alzheimer’s disease screening, caregiver training and support, case management, congregate meals, counseling, education and training, home-delivered meals, personal care, respite, and transportation.
Alzheimer’s Disease Initiative (ADI)

Description
The Alzheimer’s Disease Initiative (ADI) was legislatively created in 1985 to provide a continuum of services to meet the changing needs of individuals and families affected by Alzheimer’s Disease and Related Disorders (ADRD). In conjunction with a 15-member advisory committee, of which 11 members are appointed by the Governor, the program includes three components: 1) Supportive services such as counseling, consumable medical supplies, and respite for caregiver relief; 2) Memory Disorder Clinics to provide diagnosis, education, training, research, treatment, and referral; and 3) the Florida Brain Bank to support research.

Administration
The Department plans, budgets, coordinates, and develops policy at the state level necessary to carry out the statutory requirements for the ADI.

Eligibility
- ADI respite care is available for caregivers of adults age 18 and older who have been diagnosed as having ADRD.
- ADI respite care is available for individuals who have been diagnosed with or are suspected of having a memory loss where mental changes appear and interfere with the Activities of Daily Living.
- Caregivers of eligible consumers can receive training and other ADI support services in addition to respite care. Individuals of any age suspected of having a memory disorder may request that a Memory Disorder Clinic conduct diagnostic evaluations to determine probable Alzheimer’s Disease and Related Disorders.
- Individuals of any age, regardless of a diagnosis of ADRD, are eligible to sign up with the Alzheimer’s Disease Initiative Brain Bank. Medical records documenting a general physical examination, neurological examination, hematological and biochemical studies, and a scan of the brain must be available.

Statutory Authority
Sections 430.501-430.504, Florida Statutes.

Funding Source and Allocation Methodologies
The Alzheimer’s Disease Initiative is wholly funded by General Revenue. There is no match requirement. The Department allocates General Revenue funding to each of the Area Agencies on Aging, which then fund providers of respite care programs in designated counties. The allocation for ADI respite funding is based on each county’s population age 75 and older (50 percent weight) and probable number of Alzheimer’s cases (50 percent weight). Additional Alzheimer’s disease services are administered by Department staff through contracts with designated Memory Disorder Clinics and
the Florida Brain Bank. Remaining funds are allocated to special projects per proviso language and legislative intent in the General Appropriations Act. Clients are assessed a co-payment based on a sliding scale developed by the Department. Co-pay collections help expand the availability of client services.

Services and Activities

RESPITE SERVICES FOR CAREGIVER RELIEF
Alzheimer’s respite care programs are established in all of Florida’s 67 counties, with many counties having multiple service sites.

Many individuals with Alzheimer’s disease require care 24 hours a day, especially in the late stages of the disease. ADI respite includes in-home, facility-based (usually at adult day care centers), emergency, and extended care (up to 30 days) respite for caregivers who serve individuals with ADRD.

In addition to respite care services, caregivers and consumers may receive supportive services essential to maintaining persons with ADRD in their own homes. The supportive services may include caregiver training and support groups, counseling, consumable medical supplies, and nutritional supplements. Services are authorized by a case manager based on a comprehensive assessment including unmet needs.

MEMORY DISORDER CLINICS
The Legislature has authorized 17 Memory Disorder Clinics to provide comprehensive diagnostic and referral services for persons with ADRD. The clinics, all of which receive funding from the State, also conduct service-related research and develop caregiver training materials and educational opportunities. Memory Disorder Clinics are required to:

- Provide services to persons who are suspected of being afflicted with ADRD. Services include accepting referrals from all respite and service providers and conducting subsequent diagnostic evaluations for all referred consumers and the public within the Memory Disorder Clinic’s designated service area.
- Provide four hours of in-service training during the contract year to ADI respite service providers in the designated service area and develop and disseminate training models to service providers and the Department of Elder Affairs. A staff member of the Memory Disorder Clinic is to be designated to act as a training liaison for service providers.

### ADI Appropriation History and Numbers Served*

<table>
<thead>
<tr>
<th>State Fiscal Year</th>
<th>State Funding</th>
<th>Clients Served</th>
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*In previous years, this table was titled Respite/Special Projects Appropriation History and Numbers Served, though this did not represent all of the data presented. The previous title was derived from the funding streams as they are listed in the program contracts, though this funding can be used to provide all services offered through the ADI program, not only respite and expenditures funded through special projects.

**Beginning 2012-2013, clients served is an unduplicated number.

#Projection

Source for clients served: CIRTS
• Develop training materials and educational opportunities for lay and professional caregivers who serve individuals with ADRD and provide specialized training for caregivers, caregiver groups, and organizations in the designated service area.

• Conduct service-related applied research that may address, but is not limited to, therapeutic interventions and support services for persons living with ADRD.

• Establish a minimum of one annual contact with each respite care and service provider to discuss, plan, develop, and conduct service-related research projects.

Memory Disorder Clinic services are available to individuals diagnosed with or suspected of having a memory loss where mental changes appear and interfere with Activities of Daily Living. A map of the Memory Disorder Clinics with contact information can be found on page 50 of this publication.

RESEARCH
The Alzheimer’s Disease Initiative Brain Bank is a service, education, and research-oriented network of statewide regional sites. The intent of the brain bank program is to ultimately find a cure for Alzheimer’s disease by collecting and studying the brains of deceased patients who were clinically diagnosed with dementia. Mt. Sinai Medical Center contracts annually with the State of Florida to operate the primary Brain Bank. Coordinators at regional brain bank sites in Orlando and Miami help recruit participants and act as liaisons between the Brain Bank and participants’ families. Alzheimer’s disease respite care program providers and memory disorder clinics also recruit participants. Families of Alzheimer’s patients obtain two significant service benefits from the Brain Bank, including: 1) a diagnostic confirmation of the disease written in clear, understandable terms; and 2) involvement in various research activities both inside and outside of Florida.

### Memory Disorder Clinics Appropriation History and Numbers Served

<table>
<thead>
<tr>
<th>State Fiscal Year</th>
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</table>

Note: The definition of unduplicated persons served is total new patients seen plus registered persons who had at least one clinic visit during the annual contract. New and registered persons are counted only once each contract year for an unduplicated count. #Projection
Source for clients served: Memory Disorder Clinics manual reports regardless of payer source.
Program Highlight

Recently, the daughter of a client at Lee Memory Care MDC applied for long-term care services after several elopement incidents, police calls by worried neighbors, and a transition from her mother living alone to moving in with her. The daughter works full-time and is also a full-time caregiver to her two-year-old granddaughter. Over the past few months, she has been managing work, her grandchild, and her mother who has a behavioral component to her memory disorder. The opportunity for in-home care services has been outside the realm of their fiscal realities. The MDC was instrumental in providing education on disease process, behavioral interventions, medication management, and serving as a sounding board to listen and provide support. Within two months of completing an application, long-term care services were approved and the daughter is now in the process of looking at assisted living facilities. Having this program in place and expediting this client’s application has provided hope to a client’s caregiver who will soon be able to step back into the role of daughter while her mother receives the care she needs in a safe environment.

Brain Bank Appropriation History and Numbers Served

<table>
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<tr>
<th>State Fiscal Year</th>
<th>State Funding</th>
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<tr>
<td>2019-2020</td>
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#Projection  
*Source for persons registered and autopsies: Brain Bank reports*
MEMORY DISORDER CLINIC LOCATIONS

1. **West Florida Hospital**
   - 8383 N. Davis Hwy.
   - Pensacola, FL 32514
   - (850) 494-6490

2. **Tallahassee Memorial**
   - 1401 Centerville Rd., Ste. 504
   - Tallahassee, FL 32308
   - (850) 431-5001

3. **Mayo Clinic Jacksonville**
   - 4500 San Pablo Rd.
   - Jacksonville, FL 32224
   - (904) 953-7103

4. **University of Florida**
   - 1149 Newell Dr.
   - Gainesville, FL 32611
   - (352) 273-5550

5. **Orlando Health Center for Aging**
   - 21 W. Columbia St.
   - Orlando, FL 32806
   - (321) 841-9700

6. **AdventHealth Orlando**
   - 601 E. Rollins St.
   - Orlando, FL 32803
   - (407) 303-3408

7. **East Central Florida**
   - 3661 S. Babcock St.
   - Melbourne, FL 32901
   - (321) 434-7612

8. **University of South Florida**
   - 3515 E. Fletcher Ave.
   - Tampa, FL 33613
   - Phone: (813) 974-3100

9. **St. Mary’s Medical Center**
   - 5305 Greenwood Ave., Ste. 102
   - West Palm Beach, FL 33407
   - (561) 882-6363

10. **Florida Atlantic University**
    - 777 Glades Rd., Bldg. AZ-79
    - Boca Raton, FL 33431
    - (561) 297-0502

11. **Sarasota Memorial**
    - 1515 S. Osprey Ave., Ste. A-1
    - Sarasota, FL 34239
    - (941) 917-7197

12. **Lee Memorial**
    - 12600 Creekside Ln., Ste. 7
    - Fort Myers, FL 33919
    - (239) 343-9220

13. **Broward Health North**
    - 201 E. Sample Rd.
    - Deerfield Beach, FL 33064
    - (954) 786-7392

14. **Mt. Sinai Medical Center**
    - 4300 Alton Rd.
    - Miami Beach, FL 33140
    - (305) 674-2543 ext. 54461

15. **University of Miami**
    - 1695 N.W. 9th Ave., Ste. 3202
    - Miami, FL 33136
    - (305) 355-9065

16. **Miami Jewish Health**
    - 5200 NE 2nd Avenue
    - Miami, FL 33137
    - (305) 514-8652

17. **State of Florida Brain Bank**
    - Wien Center for Alzheimer’s Disease and Memory Disorders
    - 4302 Alton Road, Suite 650
    - Miami Beach, Florida 33140
    - (305) 674-2018
    - In Central Florida:
      - (800) 330-1910 ext. 308

County coloring represents area served by the corresponding Memory Disorder Clinic.
Alzheimer’s Disease and Related Disorders (ADRD) Training

Description
ADRD training is an important training component for licensed residential and in-home caregivers. Individuals living with ADRD have unique needs which requires paid caregivers to have additional training to meet those unique needs. The training prepares licensed residential and in-home caregivers to understand normal brain disease, behavioral intervention strategies, common dementia medications, safety, and other relevant subjects.

Services and Activities
The Department of Elder Affairs must approve Alzheimer’s Disease and Related Disorders (ADRD) training providers and training curricula for the following entities licensed in Florida:

- Adult day care centers;
- Assisted Living Facilities (ALFs) that provide special care for persons with ADRD;
- Home health agencies;
- Hospices;
- Nursing homes; and
- Specialized Alzheimer’s adult day care facilities.

The approval process is designed to ensure employees of these licensed entities receive quality Alzheimer’s disease training.

Administration
The Department contracts with the University of South Florida’s Training Academy on Aging within the Florida Policy Exchange Center on Aging for the review and approval of training providers and curricula, as well as for the maintenance of the website that lists the approved training providers. This information is available at trainingonaging.usf.edu.

Eligibility
The specific eligibility requirements for trainers and curricula are documented in Florida Statutes and Florida Administrative Code. The Florida Statutes and rules, along with the names of the forms that need to be submitted, are listed on page 53.

Funding Source and Allocation Methodologies
ADRD Training is funded by General Revenue. There is no match requirement. The Department allocates General Revenue funding to one provider.
# ADRD Appropriation History

<table>
<thead>
<tr>
<th>State Fiscal Year</th>
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</tr>
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## ADRD Trainer and Curricula Requirements

<table>
<thead>
<tr>
<th>Entity</th>
<th>Statutory Authority</th>
<th>Training Provider Certification Form</th>
<th>Training Curriculum Certification Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Day Care Centers</td>
<td>See section 429.917(1), Florida Statutes; and Rules 58A-6.015 and 6.016, Florida Administrative Code.</td>
<td>DOE Form ADC/ADRD-001, Application for Alzheimer’s Disease or Related Disorders Training Provider Certification</td>
<td>DOE Form ADC/ADRD-002, Application for Alzheimer’s Disease or Related Disorders Training Three-Year Curriculum Certification</td>
</tr>
<tr>
<td>Assisted Living Facilities</td>
<td>See section 429.178, Florida Statutes; and Rules 58A-5.0191 (9), 5.0191(10) and 58A-5.0194, Florida Administrative Code.</td>
<td>DOE Form ALF/ADRD-001, Application for Alzheimer’s Disease and Related Disorders Training Provider Certification</td>
<td>DOE Form ALF/ADRD-002, Application for Alzheimer’s Disease or Related Disorders Training Three-Year Curriculum Certification</td>
</tr>
<tr>
<td>Home Health Agencies</td>
<td>See section 400.4785(1), Florida Statutes; and Rules 58A-8.001 and 8.002, Florida Administrative Code.</td>
<td>DOE Form HH/ADRD-001, Application for Alzheimer’s Disease and Related Disorders Training Provider Certification</td>
<td>DOE Form HH/ADRD-002, Application for Alzheimer’s Disease and Related Disorders Training Three-Year Curriculum Certification</td>
</tr>
<tr>
<td>Hospices</td>
<td>See section 400.6045(1), Florida Statutes; and Rules 58A-2.027 and 2.028, Florida Administrative Code.</td>
<td>DOE Form Hospice/ADRD-001, Application for Alzheimer’s Disease or Related Disorders Training Provider Certification</td>
<td>DOE Form Hospice/ADRD-002, Application for Alzheimer’s Disease or Related Disorders Three-Year Curriculum Certification</td>
</tr>
<tr>
<td>Nursing Homes</td>
<td>See section 400.1755, Florida Statutes; and Rules 58A-4.001 and 58A-4.002, Florida Administrative Code.</td>
<td>DOE Form ADRD-001, Application for Alzheimer’s Disease or Related Disorders Training Provider Certification</td>
<td>DOE Form ADRD-002, Application for Alzheimer’s Disease or Related Disorders Training Three-Year Curriculum Certification</td>
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<tr>
<td>Specialized Alzheimer’s Adult Day Care Centers</td>
<td>See section 429.918(6)(b), Florida Statutes; and Rule 58A-6.016(3), Florida Administrative Code.</td>
<td>DOE Form ADC/ADRD-001, Application for Alzheimer’s Disease or Related Disorders Training Provider Certification</td>
<td>DOE Form SAADC/ADRD-003, Application for Alzheimer’s Disease or Related Disorders Training Three-Year Curriculum Certification</td>
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### ADRD Approved Trainers and Curricula

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#Projection

Note: Rule 58A-6.0151, F.A.C. Specialized Adult Day Care was finalized in August 2015. No applications were approved in State Fiscal Year 2016-2017. In State Fiscal Year 2017-2018, six applications were approved.

Source: University of South Florida Alzheimer’s approval program database quarterly reports
State-Funded Programs

Community Care for the Elderly (CCE)

Description
The Community Care for the Elderly (CCE) Program provides community-based services in a continuum of care to help elders with functional impairments to live in the least restrictive and most cost-effective environment suitable to their needs.

Services and Activities
Eligible individuals may receive a wide range of goods and services, including adult day care, adult day health care, case management, case aide, chore assistance, companionship, consumable medical supplies, counseling, escort, emergency alert response, emergency home repair, home-delivered meals, home health aide, homemaker, home nursing, legal assistance, material aid, medical therapeutic services, personal care, respite, shopping assistance, transportation, and other community-based services.

Administration
The Department administers the program through contracts with Area Agencies on Aging (AAAs), which subcontract with Community Care for the Elderly (CCE) Lead Agencies. Service delivery is provided by 51 Lead Agencies and their subcontractors.

Eligibility
Individuals must be age 60 or older and functionally impaired, as determined by an initial comprehensive assessment and annual reassessments. Primary consideration for services is given to elders referred to Department of Children and Families’ Adult Protective Services (APS) and determined by APS to be victims of abuse, neglect, or exploitation and in need of immediate services to prevent further harm.

Statutory Authority
Sections 430.201-430.207, Florida Statutes.

Funding Source and Allocation Methodologies
The CCE program is funded by General Revenue. A 10-percent match is required of service providers. Clients are assessed a co-payment based on a sliding scale developed by the Department. Co-pay collections help expand the availability of client services. No co-payments will be assessed on any CCE client whose income is at, or below, the federal poverty level as established by the U.S. Department of Health and Human Services. Additionally, no CCE client may have their services terminated for inability to pay their assessed co-payment.
CCE Appropriation History and Numbers Served

<table>
<thead>
<tr>
<th>State Fiscal Year</th>
<th>State Funding</th>
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</table>

*Increase beginning in SFY 2014-2015 reflects an increase in the number of individuals receiving intake and case management services while waiting for Medicaid waiver services.

*Projection

Source for clients served: CIRTS

Program Highlight

A client receiving Community Care for the Elderly (CCE) services lives alone, is unable to drive, has lung and heart problems, is visually and hearing impaired, and is at risk of falling. Due to health issues and her physical abilities, she unable to perform many tasks for herself. The CCE program provides her with homemaking, personal care, frozen home-delivered meals, and emergency medical alert services. Additionally, the client has issues with her knees and has problems rising to a standing position. The CCE program was able to provide the client with a chair to assist her from sitting to standing. The client states that words are not adequate to express her gratitude for the services she receives from CCE and without these services, she would not be able to remain in her home and maintain her independence with pride.
State-Funded Programs

Home Care for the Elderly (HCE)

Description
The Home Care for the Elderly (HCE) Program supports care for Floridians age 60 and older in family-type living arrangements within private homes as an alternative to institutional or nursing facility care. A basic subsidy is provided for support and maintenance of the elder, including some medical costs.

Services and Activities
Most HCE participants receive a monthly subsidy. Special subsidies are authorized for some participants and can be used for the following: incontinence supplies, medications, medical supplies, wheelchairs, assistive devices, ramps and home accessibility modifications, nutritional supplements, home health aides, home nursing, and other services to help maintain the individual at home. Formal case management is provided when needed.

Eligibility
Individuals must be age 60 or older, meet the Institutional Care Program (ICP) asset and income limitation, be at risk of nursing home placement, and have an approved adult caregiver living with them who is willing and able to provide or help arrange for care.

Statutory Authority
Sections 430.601-430.608, Florida Statutes.

Funding Source and Allocation Methodologies
Current funding allocations are based on Department of Children and Families (DCF) district allocations in use when the program was transferred to the Department of Elder Affairs in January 1996.
### HCE Appropriation History and Numbers Served

<table>
<thead>
<tr>
<th>State Fiscal Year</th>
<th>State Funding</th>
<th>Clients Served</th>
</tr>
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<tbody>
<tr>
<td>2010-2011</td>
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<td>2019-2020</td>
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#Projection  
Source for clients served: CIRTS

### Program Highlight

Ms. S is in her 60s, is bedbound, and requires 24/7 care from her daughter. She has many health and mobility issues as a result of rheumatoid arthritis, a broken back, and a history of strokes and a coma. Ms. S requires near total assistance to remain in the home. Ms. S’s daughter had to quit working in order to care for her and prevent nursing facility placement. However, affording Ms. S’s living and medical expenses and incontinence supplies became very challenging, which put her daughter at risk of returning to work and seeking other care arrangements. Recently, the Home Care for the Elderly (HCE) program increased its monthly basic subsidy, which further helps Ms. S’s daughter pay for her health care needs. The HCE special subsidy also assists Ms. S with acquiring incontinence supplies to maintain her hygiene. Ms. S and her daughter feel that the subsidies provided by HCE have greatly relieved their financial burden and Ms. S is comforted knowing she will be able to obtain her required supplies.
State-Funded Programs

Local Services Programs (LSP)

Description
Local Services Programs (LSP) provide additional funding to expand long-term care alternatives that enable elders to maintain a favorable quality of life in their own homes and avoid or delay nursing home placement.

Services and Activities
Planning and Service Areas (PSAs) offer specific services funded through LSP. LSP services provided include adult day care, case management, congregate meals, facility improvements, emergency alert response, health promotion, health risk assessments, home-delivered meals, home health care, home modifications/housing improvements, homemaker services, in-home respite, material aid, nutrition support program, physical and mental health support, recreation, respite, specialized medical supplies, and transportation.

Administration
The Department administers these programs through contracts with Area Agencies on Aging (AAAs), which then subcontract with local providers to deliver services.

Eligibility
Individuals age 60 or older may receive these services. There is no income criteria; however, emphasis is placed on serving those with greatest need.
Statutory Authority

General Appropriations Act, State of Florida.

Funding Source and Allocation Methodologies

The program is wholly funded by General Revenue, and funds are allocated as designated in proviso language of the General Appropriations Act. No match or co-payment is required.

LSP Appropriation History and Numbers Served

<table>
<thead>
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<th>State Fiscal Year</th>
<th>State Funding</th>
<th>Clients Served</th>
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<td>2019-2020</td>
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#Projection
Source for clients served: CIRTS and manual reports

Program Highlight

A Local Services Program client receiving adult day care services told employees at the center that prior to receiving these services, she was often isolated at home. Through participation, her caregiver states that the client's memory has started improving and the client feels like she is needed and valued at the adult day care center. With the services received, the caregiver has been able to feel less stress and know that the client is well-cared for while attending the program.
State-Funded Programs

Office of Public and Professional Guardians (OPPG)

Description
The Office of Public and Professional Guardians (OPPG) was formerly known as the Statewide Public Guardianship Office (SPGO), which was first created by the Florida Legislature in 1999 to help provide services to meet the needs of vulnerable persons who lack the capacity to make decisions on their own behalf and have no family or friends to serve as guardian. Guardians protect the property and personal rights of incapacitated individuals. SPGO was responsible for appointing and overseeing Florida’s public guardians, as well as for the registration and education of Florida’s professional guardians. With the signing of Senate Bill 232 in 2016, the program was renamed the Office of Public and Professional Guardians and given the additional duties of regulating professional guardians.

Services and Activities
OPPG provides direction, coordination, and oversight of public and professional guardianship services in the state; develops performance measures; collects data on individuals served; and works to find ways to enhance funding to increase the availability of public guardians to serve individuals in need. OPPG worked to develop the curriculum and training of public and professional guardians, creation and administration of the professional guardian competency exam, and registration of professional guardians as mandated by Florida Statutes.

OPPG is also responsible for establishing standards of practice for public and professional guardians, receiving and investigating complaints against public and professional guardians, and taking disciplinary action pursuant to Chapter 120, Florida Statutes, when warranted. OPPG may impose penalties, up to and including the permanent revocation of a professional guardian’s registration, for a violation of any administrative rule adopted by the office governing guardians or guardianship or for the violation of any offense enumerated in section 744.20041(1), Florida Statutes.

Administration
Currently, 17 public guardian programs serve all 67 counties. A map of the Offices of Public Guardians with contact information can be found on page 64 of this publication.

Eligibility
A person must meet the following criteria to be served by a public guardian, pursuant to Chapter 744, Florida Statutes:

- Be incapacitated pursuant to Chapter 744, Florida Statutes, or eligible for a guardian advocate under section 393.12, Florida Statutes;
- Be of low economic means (indigent); and
- Have no friends or family willing or able to serve.
Professional Guardian Oversight

In October 2016, OPPG entered into a Memorandum of Understanding (MOU) with seven Clerk of the Court’s Inspectors General to conduct investigations into allegations made against professional guardians. OPPG reviews all investigative findings and is responsible for determining whether disciplinary action is warranted.

In June 2017, OPPG’s Standards of Practice and Disciplinary Guidelines pertaining to the regulation of Florida’s professional guardians were codified in the Florida Administrative Code. As of July 2018, OPPG received 128 legally sufficient complaints against professional guardians registered throughout the state. In addition to sending letters of concern to professional guardians, when the investigative findings so warranted, OPPG filed its first Administrative Complaint against a professional guardian with Florida’s Division of Administrative Hearings in February 2018.

Statutory Authority

Chapter 744, Florida Statutes; Chapter 120, Florida Statutes; and 58M-2.001-2.011, Florida Administrative Code.

Funding Source and Allocation Methodologies

Funding appropriation is from General Revenue and Administrative Trust Fund dollars. Public guardians receive funding from the State. Funds are distributed based on contracts with local entities to meet local needs. Additional funding sources for individual programs include counties, the United Way, and grants. Contracts are negotiated with OPPG annually.

OPPG Appropriation History and Numbers Served

<table>
<thead>
<tr>
<th>State Fiscal Year</th>
<th>State Funding</th>
<th>Clients Served</th>
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<td>2019-2020</td>
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</table>

*Beginning in 2016, with the transition to OPPG, a portion of funding will be used to investigate complaints against professional guardians.

#Projection

Source for clients served: Office of Public and Professional Guardians reports and data
Program Highlight

During the last fiscal year, the Office of Public and Professional Guardians worked alongside the Florida Public Guardian Coalition (FPGC) as they held the FPGC Second Annual Invitational Symposium. For fiscal year 2017-2018, the FPGC focused on disaster preparedness for their clients and Florida’s vulnerable adults. Guest speakers included representatives from the Department of Elder Affairs, the Agency for Persons with Disabilities, Capital Area Red Cross, the Florida Assisted Living Association, a professional guardian, a public guardian, and the Florida Health Care Association. Each speaker gave key tips on how to prepare vulnerable adults and clients for the event of a hurricane or a disaster, how to work with state agency representatives, identifying the supplies to have on hand, preparing for emergency contact lists, and what services are available to make sure elders and persons with disabilities are safe during the hurricane season and disasters.

Recently, the Panhandle was affected by Hurricane Michael, the largest and most devastating hurricane to hit the area in decades. The North Florida Office of Public Guardian, Inc., the public guardian tasked with assisting vulnerable incapacitated adults in the Panhandle area, noted that due to the information and suggestions shared during the FPGC symposium, they were able to successfully prepare their wards for the upcoming hurricane, and all supports were in place. Following the hurricane, the public guardian was able to verify within less than four days the safety and location of all wards served by their program.
OFFICE OF PUBLIC GUARDIANS LOCATIONS

1. LSF Guardianship Services, Inc.
   4600 Mobile Hwy. #9-343
   Pensacola, FL 34506
   (850) 469-4600

   1425 E. Piedmont Dr., Ste. 201-B
   Tallahassee, FL 32308
   (850) 487-6309

3. Eighth Circuit Public Guardian
   27052 83rd Place
   Branford, FL 32008
   (386) 438-8236

   425 N. Clyde Morris Blvd.
   Daytona Beach, FL 32114
   (386) 253-4700

5. Fifth Circuit Public Guardian Corporation
   110 N.W. 1st Ave., 4th Floor
   Ocala, FL 34475
   (352) 401-6753

6. Seniors First, Inc.
   5395 L.B. McLeod Rd.
   Orlando, FL 32811
   (407) 297-9980

7. Aging Solutions
   19001 Sunlake Blvd.
   Lutz, FL 33558
   Brevard: (866) 92-AGING
   Hillsborough: (813) 949-1888
   Pasco and Pinellas:
   (727) 442-1188

8. Osceola Co. Council on Aging
   700 Generation Pt.
   Kissimmee, FL 34744
   (407) 846-8532

9. LSF Guardianship Services, Inc.
   3627A W. Waters Ave.
   Tampa, FL 33614
   (941) 358-6330

10. Tenth Circuit Public Guardian
    505 Avenue A N.W., Ste. 217
    Winter Haven, FL 33881
    (863) 875-5626

11. Lee Co. Public Guardian
    3613 Del Prado Blvd.
    Cape Coral, FL 33904
    (239) 549-2505

12. Charlotte & Collier Co. Public Guardians
    4680 Cardinal Way, Ste. 203
    Naples, FL 34112
    (239) 417-1040 Ext. 203

13. Public Guardianship Program of Indian River, Inc.
    2101 Indian River Blvd., Ste. 200
    Vero Beach, FL 32960
    (772) 538-7101

14. Legal Aid Society of Palm Beach Co., Inc.
    423 Fern St., Ste. 200
    West Palm Beach, FL 33401
    (561) 655-8944

15. Barry University School of Social Work
    12401 Orange Dr., Ste. 214
    Davie, FL 33330
    (954) 862-3655

16. Guardianship Care Group, Inc.
    337 Alcazar Ave., Unit 101
    Coral Gables, FL 33134
    (305) 748-6111

17. Guardianship Program of Dade Co., Inc.
    8300 N.W. 53rd St., Ste. 402
    Miami, FL 33166
    (305) 482-3101

County coloring represents area served by the corresponding office location.
Respite for Elders Living in Everyday Families (RELIEF)

Description
The Respite for Elders Living in Everyday Families (RELIEF) Program offers respite services to family caregivers of frail elders and those with Alzheimer’s disease and related disorders so that they can continue caring for a homebound elder, thus avoiding the need to institutionalize the elder. Individuals who do not currently receive other Department services are given first priority.

A multi-generational corps of volunteers receive pre-service training and are individually matched with clients to ensure that their personalities, skills, interests, and abilities are a good fit with the elders and caregivers they will be serving. Some volunteers may receive stipends.

Services and Activities
RELIEF respite care is provided during evenings and weekends – times that are not usually covered by other respite programs. Volunteers may spend up to four hours per visit providing companionship to a frail homebound elder, giving the caregiver an opportunity to take a much-needed break. Activities may include conversation, reading together, playing board games, or preparing a light snack.

Administration
Services are administered through Area Agencies on Aging (AAAs), and the Department provides contract management and technical assistance. The AAAs are selected for RELIEF contracts in Planning and Service Areas (PSAs) where it is determined that evening and weekend respite volunteers can be recruited, screened, matched with clients, and supervised. Contracts require regular reporting of activities and expenses. The RELIEF Program is administered in PSAs 1, 2, 4, 7, 8, 9, 10, and 11.

Eligibility
This program serves frail, homebound elders age 60 or older who live with a full-time caregiver who would benefit from up to four hours of respite, especially during evenings and weekends.

Statutory Authority
Section 430.071, Florida Statutes.

Funding Source and Allocation Methodologies
The RELIEF program is wholly funded by General Revenue.
## RELIEF Appropriation History and Numbers Served

<table>
<thead>
<tr>
<th>State Fiscal Year</th>
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<th>Clients Served</th>
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<td>#235</td>
<td>#92,352</td>
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*Source for clients served, volunteers, and hours: Monthly program progress reports and contracts*

### Program Highlight

“*My RELIEF volunteer is a godsend because all my friends and other relatives have passed on and I no longer have any real connection with anyone. I am 96 years old and my body requires a lot of care to stay mobile.*”

“I’m very happy that the RELIEF volunteer has come into my life. I feel that I can do more things and I feel like more of a member of society. Thank you for coming into my life.”

“The RELIEF program allows me to leave my father for a few hours to attend to buying groceries, paying bills, or just taking some time for myself, which is such a blessing. Being a caregiver can be very stressful at times, so having a RELIEF volunteer to visit and assist me with Dad is amazing.”

“As a RELIEF volunteer, I am able to provide a service to caregivers and clients on evenings and weekends, which is wonderful because it won’t conflict with my work schedule.”