

PERFORMANCE AUDIT
OF THE
OFFICE OF SERVICES TO THE AGING
DEPARTMENT OF COMMUNITY HEALTH
May 2003



Michigan
Office of the Auditor General
REPORT SUMMARY

Performance Audit

Report Number:
39-645-02

Office of Services to the Aging

Department of Community Health

Released:
May 2003

The Office of Services to the Aging (OSA) has defined its mission as promoting independence and enhancing the dignity of Michigan's older persons and their families. OSA was created by the Older Michiganians Act (Act 180, P.A. 1981) as the primary advocate for the aging in the State of Michigan. OSA monitors and allocates federal and State funds to a network of 16 area agencies on aging (AAAs) to provide services to the aging. The AAAs are responsible for assessing the needs of the aging and for coordinating services.

Audit Objectives:

1. To assess the effectiveness and efficiency of OSA and the aging service delivery network in identifying and providing services to meet the significant needs of the aging.
2. To assess the effectiveness of OSA's and the aging service delivery network's coordination of efforts with the aging services provided by various State agencies.
3. To assess OSA's efforts to evaluate the effectiveness of the delivery of services to the aging in relation to stated program goals and objectives.

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Audit Conclusions:

1. We concluded that OSA and the aging service delivery network were generally effective and efficient in identifying and providing services to meet the significant needs of the aging.

2. We concluded that OSA and the aging service delivery network were generally effective in coordinating their efforts with the aging services provided by various State agencies.
3. We concluded that OSA's efforts to evaluate the effectiveness of the delivery of services to the aging in relation to stated program goals and objectives were generally not effective.

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Noteworthy Accomplishments:

OSA was recognized in November 2001 by the Michigan Quality Council and attained the Lighthouse Award for quality improvement efforts involving internal operations within OSA.

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Reportable Conditions:

OSA should ensure that its contractors obtain criminal background checks of all paid staff or volunteers who enter client

homes and provide services to clients. These checks will help OSA ensure the safety of its clients. (Finding 1)

OSA should ensure that the area agencies on aging conduct required in-service training for staff responsible for in-home services programs (Finding 2).

OSA should complete an annual update of its three-year State plan as required by State law (Finding 3).

OSA needs to enhance its continuous quality improvement process relating to the evaluation of program effectiveness. This

would enable OSA to determine whether it is achieving its mission of promoting independence and enhancing the dignity of Michigan's older persons and their families. (Finding 4)

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Agency Response:

Our audit report contains 4 findings and 4 corresponding recommendations. OSA's preliminary response indicated that it agreed with our findings and that it had complied or will comply with our recommendations.

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A copy of the full report can be obtained by calling 517.334.8050 or by visiting our Web site at: www.state.mi.us/audgen/



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AUDITOR GENERAL

May 23, 2003

Mr. Holliace Spencer, Acting Director
Office of Services to the Aging
7109 W. Saginaw Highway
Lansing, Michigan
and
Ms. Janet Olszewski, Director
Department of Community Health
Lewis Cass Building
Lansing, Michigan

Dear Mr. Spencer and Ms. Olszewski:

This is our report on the performance audit of the Office of Services to the Aging, Department of Community Health.

This report contains our report summary; description of agency; audit objectives, scope, and methodology and agency responses; comments, findings, recommendations, and agency preliminary responses; description of surveys and summaries of survey responses, presented as supplemental information; and a glossary of acronyms and terms.

Our comments, findings, and recommendations are organized by audit objective. The agency preliminary responses were taken from the agency's responses subsequent to our audit fieldwork. The *Michigan Compiled Laws* and administrative procedures require that the audited agency develop a formal response within 60 days after release of the audit report.

We appreciate the courtesy and cooperation extended to us during the audit.

AUDITOR GENERAL

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Description of Agency

The delivery of services to the aging* is the responsibility of several State departments and agencies. Also, coordination of human service programs, including programs for the aging, occurs through the Human Services Directors' Group, which includes the directors of the Office of Services to the Aging* (OSA), Family Independence Agency (FIA), Department of Community Health (DCH), and Department of Education. The Group meets quarterly to facilitate the coordination of the various health and human services to clients common to these departments. The basic purpose of the Group is to address common concerns and problems that arise within the various departments relating to the delivery of services to clients of these departments.

The federal Older Americans Act of 1965*, which established the federal Administration on Aging, authorizes funding for nutrition and social programs and requires each state to create a state agency on aging, develop a state plan for the delivery of aging services, serve as an advocate on behalf of older adults, and establish a network of area agencies on aging* (AAAs).

The Older Michigianians Act* (Act 180, P.A. 1981, being Sections 400.581 - 400.594 of the *Michigan Compiled Laws*), created OSA as an autonomous entity within the Department of Management and Budget to provide services to the aging. Effective May 20, 1997, OSA was transferred to DCH. The Governor appoints the OSA director. OSA is designated as the State agency to supervise and administer the State plan required by the federal Older Americans Act of 1965 and has primary responsibility for the coordination of all activities related to the purposes of the Older Michigianians Act. OSA has defined its mission* as promoting independence and enhancing the dignity of Michigan's older persons and their families. Oversight of State aging programs is the responsibility of the Commission on Services to the Aging*, which consists of 15 members appointed by the Governor with the advice and consent of the Senate. Federal and State funds used to provide services to the aging and administered by OSA are allocated to the Statewide network of AAAs, based on a funding formula that considers population and other factors required by federal and State laws and regulations. As the agency responsible for implementing the federal Older Americans

* See glossary at end of report for definition.

Act of 1965, OSA is responsible for developing and maintaining the system of federally mandated planning and service areas* served by the AAAs.

The AAAs are responsible for assessing the needs of the aging in their service areas; developing a plan for addressing those needs; coordinating services provided by local not-for-profit agencies, government agencies, and for-profit businesses; and purchasing services with funds made available through the federal Older Americans Act of 1965 and the Older Michiganians Act to help the aging maintain independence and dignity. The primary targets of programs for the aging are the frail, minorities, and low-income seniors. A key goal in this service delivery network is the coordination of resources from not-for-profit, public, and private agencies to provide the aging with easy access to needed services and to eliminate duplication and overlap of services.

The AAAs and service providers* request that clients with the ability to pay voluntarily contribute toward their cost of care. This voluntary system collected approximately \$7.9 million in fiscal year 2001-02. Funds collected are used to provide additional services to the aging.

For the fiscal year ended September 30, 2002, OSA employed 31.5 full-time equated employees, was appropriated \$91.7 million, and allocated approximately \$79.4 million to 16 AAAs to provide services to the aging.

The following State departments and agencies also provide services to the aging who meet additional eligibility criteria:

- a. FIA helps individuals and families (including the aging) meet financial, medical, and social needs; assists people to become self-sufficient; and helps protect children and adults from abuse, neglect, and exploitation. Eligibility for many of FIA's programs is based on income levels. FIA programs, such as Home Help Services, Adult Community Placement, and Medicaid, are generally need-based programs, which provide services to a significant number of the aging.

* See glossary at end of report for definition.

- b. DCH provides services to the mentally ill and developmentally disabled, including the aging. In conjunction with OSA, DCH operates the State Advisory Council on Mental Health and Aging to advise the director of DCH and the director of OSA on mental health and aging issues and to monitor programs for older adults with mental health needs and persons with Alzheimer's disease and related disorders.
- c. The Michigan State Housing Development Authority administers housing subsidy programs for low- and moderate-income tenants, including the aging.
- d. The Michigan Department of Career Development operates federally funded job training programs, including programs for the aging.
- e. The Michigan Department of Transportation provides State and federal funding to local public transit agencies to provide services for the aging and handicapped.

Audit Objectives, Scope, and Methodology and Agency Responses

Audit Objectives

Our performance audit* of the Office of Services to the Aging (OSA), Department of Community Health (DCH), had the following objectives:

1. To assess the effectiveness* and efficiency* of OSA and the aging service delivery network in identifying and providing services to meet the significant needs of the aging.
2. To assess the effectiveness of OSA's and the aging service delivery network's coordination of efforts with the aging services provided by various State agencies.
3. To assess OSA's efforts to evaluate the effectiveness of the delivery of services to the aging in relation to stated program goals* and objectives*.

Audit Scope

Our audit scope was to examine the program and other records of the Office of Services to the Aging and select area agencies on aging and to examine the Office of Services to the Aging's interaction with other State departments and agencies that provide services to the aging. Our audit was conducted in accordance with *Government Auditing Standards* issued by the Comptroller General of the United States and, accordingly, included such tests of the records and such other auditing procedures as we considered necessary in the circumstances.

Audit Methodology

Our audit fieldwork, performed from June through October 2002, included an examination of OSA's and related DCH records and selected area agency on aging (AAA) records primarily from October 1, 1999 through October 31, 2002.

Our methodology included a preliminary survey of OSA operations, including a review of policies and procedures and monitoring and reporting systems. We reviewed OSA's

* See glossary at end of report for definition.

methodology for allocating funds to the AAAs. We also reviewed OSA's and the AAAs' efforts to establish and measure program goals and objectives and report the results.

We conducted a survey of aging clients who were receiving services or had recently received services through the AAAs to determine the respondents' satisfaction with the services that they received. We also conducted a survey of aging Michigan residents to assess the respondents' awareness of the services that are available to the aging through the AAA network. Summaries of the survey responses are presented as supplemental information.

We reviewed activities at 4 of the 16 AAAs, taking into consideration area populations and State and federal funding allocations. Our review focused on care management* and nutrition services*, which were the largest categories of expenditures by the AAAs. The review focused on planning, contracting with subcontractors, monitoring, and reporting systems.

We identified State agencies that provide services to the aging and met with their staffs to assess their efforts to coordinate services and prevent duplication.

We reviewed OSA's performance measurement system* for establishing management expectations for the services provided through the aging service delivery network. We assessed OSA's process for establishing performance indicators* for measuring outputs* and outcomes*.

Agency Responses

The agency preliminary response that follows each recommendation in our report was taken from the agency's written comments and oral discussion subsequent to our audit fieldwork. Section 18.1462 of the *Michigan Compiled Laws* and Department of Management and Budget Administrative Guide procedure 1280.02 require DCH to develop a formal response to our audit findings and recommendations within 60 days after release of the audit report.

Our audit report contains 4 findings and 4 corresponding recommendations. OSA's preliminary response indicated that it agreed with our findings and that it had complied or will comply with our recommendations.

* See glossary at end of report for definition.

COMMENTS, FINDINGS, RECOMMENDATIONS, AND AGENCY PRELIMINARY RESPONSES

EFFECTIVENESS AND EFFICIENCY IN IDENTIFYING AND PROVIDING SERVICES

COMMENT

Audit Objective: To assess the effectiveness and efficiency of the Office of Services to the Aging (OSA) and the aging service delivery network in identifying and providing services to meet the significant needs of the aging.

Conclusion: We concluded that OSA and the aging service delivery network were generally effective and efficient in identifying and providing services to meet the significant needs of the aging. However, we noted reportable conditions* related to criminal background checks, in-service training, and the annual update of OSA's State plan (Findings 1 through 3).

Noteworthy Accomplishments: OSA was recognized in November 2001 by the Michigan Quality Council and attained the Lighthouse Award for quality improvement efforts involving internal operations within OSA.

FINDING

1. Criminal Background Checks

OSA should ensure that its contractors obtain criminal background checks of all paid staff or volunteers who enter client homes and provide services to clients. These checks will help OSA ensure the safety of its clients.

OSA contracted with 16 area agencies on aging (AAAs) throughout the State to provide various services to seniors in Michigan. OSA's operating standards require all AAAs to obtain a criminal background check through the Michigan Department of State Police for each paid staff member and/or volunteer who will be entering client homes and providing services to program clients.

* See glossary at end of report for definition.

Our review of 72 personnel files at 4 AAAs disclosed that 2 AAAs had not obtained criminal background checks for 20 staff and volunteers responsible for providing services in client homes. Also, 1 AAA did not maintain documentation for 10 staff and volunteers for whom they had conducted earlier criminal background checks.

OSA stated that a felony conviction would not necessarily preclude an individual from working for an AAA or any service provider. However, knowledge of any such conviction would enable OSA, the AAAs, or service providers to better ensure that program clients are receiving services in a safe environment.

RECOMMENDATION

We recommend that OSA ensure that its contractors obtain criminal background checks of all paid staff or volunteers who enter client homes and provide services to clients.

AGENCY PRELIMINARY RESPONSE

OSA agreed that it did not ensure that criminal background checks were always obtained for paid or volunteer staff entering homes of older adults to provide services through the aging service delivery network and informed us that it has initiated measures to comply with the recommendation. While not required in either federal or State law, criminal background checks are a new addition to the OSA Minimum Service Standards. OSA is confident that criminal background checks are being conducted on all new staff and volunteers. OSA will continue to monitor compliance with this new requirement through the annual AAA assessment process and technical assistance. Full compliance may take another year, given the newness of the requirement and the thousands of people impacted. OSA recognizes that the safety of Michigan's older citizens is of primary importance.

FINDING

2. In-Service Training

OSA should ensure that the AAAs conduct required in-service training for staff responsible for in-home services* programs.

* See glossary at end of report for definition.

OSA operating standards require that staff of homemaker, personal care, home health aide, home-delivered meals, home care assistance, and respite care programs receive in-service training at least twice each year. The standards also require that the training be designed to increase staff's knowledge and understanding of the program and clients and to improve their skills at tasks performed in the provision of service. The standards further require that comprehensive records identifying dates of training and topics covered be maintained in each employee's training file.

We reviewed personnel files at 4 AAA regions for 40 staff responsible for providing services to clients. Our review disclosed that, during fiscal years 2001-02 and 2000-01, 15 (38%) staff did not receive all of the required training, including 5 staff who received no training.

In-service training helps ensure that staff are properly trained to meet the needs of their clients.

RECOMMENDATION

We recommend that OSA ensure that the AAAs conduct required in-service training for staff responsible for in-home services programs.

AGENCY PRELIMINARY RESPONSE

OSA agreed that not all staff received the required training and informed us that it has initiated several measures to comply with the recommendation by the end of fiscal year 2003-04. The AAAs will be monitored for compliance with this requirement through the annual AAA assessment process. The assessment will include a review of corrective action plans (including due dates for corrective action) that AAAs developed to bring contractors into compliance. OSA will ensure that documentation of training is maintained at the AAA and local service contractor levels. OSA will also modify the general requirements for in-home services programs to specify the minimum amount and type of training to be provided. Technical assistance will be offered as necessary to ensure compliance. Finally, relevant training offerings will be posted on the OSA Web site to improve access to training information.

FINDING

3. Annual Update of OSA's State Plan

OSA should complete an annual update of its three-year State plan as required by State law.

The Older Michiganians Act (Section 400.586(n) of the *Michigan Compiled Laws*) requires OSA to develop a comprehensive three-year State plan and to make yearly updates to the State plan. These annual updates should include information on objectives that had been met, any newly established objectives, the annual operating budgets of and the annual allotments to the AAAs, any changes in commission members, any changes in the priority of the needs of the aging, and recommendations for future action.

OSA stated that it reviews the three-year State plan on an annual basis but was not aware of the requirement to prepare an annual update as required in the Older Michiganians Act.

Annual updates would enable OSA to carry out its three-year State plan based on current priorities and needs.

RECOMMENDATION

We recommend that OSA complete an annual update of its three-year State plan as required by State law.

AGENCY PRELIMINARY RESPONSE

OSA agreed that it had not prepared annual updates to its State plan and will take necessary corrective action to comply with the recommendation. Annual updates are not mandated in federal law governing older adult programs, and OSA was unaware of the State requirement during fiscal years 2000-01, 2001-02, and 2002-03. Starting with a new three-year planning cycle beginning in fiscal year 2003-04, the State plan will be reviewed each year and appropriate changes made to reflect program, policy, and budget shifts and related information. Such changes will be presented as annual amendments with the appropriate public hearing. The format of OSA's 2002 Annual Report has already been altered to reflect accomplishments according to State plan goals. This will allow OSA to report State plan accomplishments in the Annual Report.

EFFECTIVENESS OF THE COORDINATION OF SERVICES PROVIDED BY VARIOUS STATE AGENCIES

COMMENT

Audit Objective: To assess the effectiveness of OSA's and the aging service delivery network's coordination of efforts with the aging services provided by various State agencies.

Conclusion: We concluded that OSA and the aging service delivery network were generally effective in coordinating their efforts with the aging services provided by various State agencies. Our report does not include any reportable conditions related to this objective.

EFFECTIVENESS OF THE DELIVERY OF SERVICES TO THE AGING IN RELATION TO STATED PROGRAM GOALS AND OBJECTIVES

COMMENT

Audit Objective: To assess OSA's efforts to evaluate the effectiveness of the delivery of services to the aging in relation to stated program goals and objectives.

Conclusion: We concluded that OSA's efforts to evaluate the effectiveness of the delivery of services to the aging in relation to stated program goals and objectives were generally not effective. Our assessment disclosed a reportable condition related to continuous quality improvement (Finding 4).

FINDING

4. Continuous Quality Improvement (CQI)

OSA needs to enhance its CQI process relating to the evaluation of program effectiveness. This would enable OSA to determine whether it is achieving its mission of promoting independence and enhancing the dignity of Michigan's older persons and their families.

CQI is a process that aligns the vision* and mission of an organization with the needs and expectations of internal and external customers. It normally includes a process to improve program effectiveness by assessing performance indicators that measure outputs and outcomes related to the program vision, mission, goals, and objectives, based on management expectations, peer group performance, and/or historical data. The process should also provide a comparison of the actual data with desired outputs and outcomes; a reporting of the comparison results to management; and proposals of program changes to improve effectiveness.

The Legislature and the Governor have required in various appropriations acts and in Executive Directive No. 1996-1 that State programs use CQI processes to manage the use of limited State resources. Also, in Executive Directive No. 2001-3, which rescinded Executive Directive No. 1996-1 on June 8, 2001, the Governor established the goal to increase efforts toward continuous improvement and directed department and agency heads to actively support the State's Quality Recognition System and ensure the implementation of quality and customer service management techniques. The proper measurement of goals and objectives is essential to determine whether OSA's programs are effective.

OSA's three-year State plan does identify goals and objectives, some of which are required by federal and State statutes. However, OSA had not established quantifiable goals and objectives that would help enable OSA to evaluate the performance of its programs. OSA's stated goals and objectives use generalized terms, such as "develop," "encourage," "increase," and "provide," that are not measurable. These nonquantified goals and objectives do not provide OSA with a measurable basis for determining program effectiveness.

Our review also disclosed that OSA does identify certain outputs in its annual reports, which can be linked to some of the goals and objectives in the State plan and enables OSA to measure quantities of services produced by its programs. However, OSA's State plan did not specify desired outcomes, which is necessary to measure the actual impact of its programs. For instance, in its 2001 Annual Report, OSA indicated that 75 people were placed in unsubsidized employment. However, OSA did not specify what its goal was for annual placements in

* See glossary at end of report for definition.

unsubsidized employment. Thus, OSA and others could not readily determine if OSA was meeting its stated objective to increase the unsubsidized employment placement rate.

Tools to measure performance add purpose to the process of developing program goals. Reporting the results of program activities holds OSA accountable for its performance, adding value to the services provided to its customers. An integral part of a fully developed CQI process is the assessment of OSA's progress in achieving stated goals and objectives and the development of program modifications to improve effectiveness.

RECOMMENDATION

We recommend that OSA enhance its CQI process relating to the evaluation of program effectiveness.

AGENCY PRELIMINARY RESPONSE

OSA agreed that it needs to strengthen its management efforts to improve how it measures program effectiveness and will implement new procedures to comply with the recommendation. The plan to address this deficiency will build on the five-program budget objectives developed for the current State budget. The newly created State plan for fiscal years 2003-04, 2004-05, and 2005-06 will interface aging program priorities, budget allocations, and desired measureable outputs. This approach requires that goals and objectives be quantifiable with clearly stated performance outcomes. OSA's annual reports will mirror accomplishments as presented in the previous State plan for services to the aging. With these steps in place, OSA will be in a position to better measure and report on program effectiveness. Data on documenting program accomplishments will be available during the first six months of fiscal year 2004-05.

SUPPLEMENTAL INFORMATION

Description of Surveys

We developed two surveys requesting feedback from the aging regarding satisfaction with and awareness of aging programs:

1. Client Satisfaction Survey

We mailed copies of this survey to 155 aging clients who were receiving services or had recently received services through the area agencies on aging (AAAs). Thirteen surveys were returned as undeliverable mail. We received 59 responses from the 142 deliverable surveys, a response rate of 42%. This survey focused on respondents' satisfaction with the services that they received. The responses indicated that a large majority of respondents were satisfied with the services that they received.

2. Awareness of Service Availability Survey

We mailed copies of this survey to 166 aging Michigan residents. Twenty surveys were returned as undeliverable mail. We received 54 responses from the 146 deliverable surveys, a response rate of 37%. This survey focused on the respondents' awareness of the services that are available to the aging through the AAA network. The responses indicated that 32 respondents were aware of services available to the aging and 19 were not.

In the summaries of survey responses, the total number of responses for each item may not agree with the number of responses noted because some respondents provided more than one response to an item and other respondents did not answer all items.

Written comments that accompanied the surveys generally expressed satisfaction with, and appreciation for, services provided. These written comments were not included in our summaries of survey responses but were provided to the Office of Services to the Aging in summary form.

OFFICE OF SERVICES TO THE AGING

Department of Community Health

Client Satisfaction Survey

Summary of Survey Responses

Number of delivered surveys 142
Number of responses 59
Response rate 42%

1. Please indicate who is completing this survey:

<u>35</u>	Senior citizen addressed in survey
<u>18</u>	Family member or friend of senior citizen
<u>6</u>	Guardian of senior citizen

2. Senior income:

<u>25</u>	Under \$10,000
<u>30</u>	\$10,000 - \$29,999
<u>1</u>	\$30,000 - \$59,999
<u>0</u>	\$60,000 and over

3. Senior education:

<u>12</u>	K - 8
<u>29</u>	K - 12
<u>15</u>	Some college, trade school, or vocational school
<u>2</u>	Bachelor's degree
<u>1</u>	Graduate degree

4. Age of senior:

<u>5</u>	60 - 64
<u>8</u>	65 - 69
<u>9</u>	70 - 74
<u>7</u>	75 - 79
<u>15</u>	80 - 84
<u>14</u>	85 and over

5. I am receiving or have recently received services in the last 24 months:

<u>54</u>	Yes	<u>5</u>	No
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6. I am receiving or have received the following services:

<u>16</u>	Home-delivered meals
<u>7</u>	Meals at senior centers or other facilities
<u>41</u>	Home care services
<u>11</u>	Information and referral
<u>5</u>	Elder Prescription Insurance Coverage (EPIC)
<u>3</u>	Retired and Senior Volunteer Program (RSVP), senior companions, or foster grandparents
<u>0</u>	Senior employment
<u>11</u>	Care management
<u>18</u>	Medicare/Medicaid Assistance Project (MMAP)
<u>1</u>	Legal services
<u>2</u>	Nursing home ombudsman
<u>6</u>	Respite care or adult day care
<u>7</u>	Senior centers
<u>3</u>	Other

7. I learned about these services from:

<u>30</u>	Family and/or friends
<u>2</u>	TV/newspaper/radio
<u>23</u>	Other

8. Following my initial request for services, I was contacted within a reasonable amount of time:

<u>16</u>	Strongly agree
<u>31</u>	Agree
<u>2</u>	No opinion
<u>1</u>	Disagree
<u>1</u>	Strongly disagree
<u>2</u>	Not applicable

9. The service(s) that I received has helped maintain my independence:

<u>19</u>	Strongly agree
<u>31</u>	Agree
<u>1</u>	No opinion
<u>1</u>	Disagree
<u>0</u>	Strongly disagree
<u>2</u>	Not applicable

10. I am satisfied with the services received:

<u>20</u>	Strongly agree
<u>28</u>	Agree
<u>2</u>	No opinion
<u>3</u>	Disagree
<u>0</u>	Strongly disagree
<u>1</u>	Not applicable

11. Have you ever had to wait for a service?

<u>12</u>	Yes
<u>41</u>	No

12. Are you currently waiting to receive a service?

<u>9</u>	Yes
<u>47</u>	No

OFFICE OF SERVICES TO THE AGING
Awareness of Service Availability Survey
Summary of Survey Responses

Number of delivered surveys	146
Number of responses	54
Response rate	37%

1. Please indicate who is completing this survey:

<u>49</u>	Senior citizen addressed in survey
<u>3</u>	Family member or friend of senior citizen

2. Senior income:

<u>11</u>	Under \$10,000
<u>25</u>	\$10,000 - \$29,999
<u>8</u>	\$30,000 - \$59,999
<u>4</u>	\$60,000 and over

3. Senior education:

<u>1</u>	K - 8
<u>24</u>	K - 12
<u>17</u>	Some college, trade school, or vocational school
<u>5</u>	Bachelor's degree
<u>4</u>	Graduate degree

4. Age of senior:

<u>19</u>	60 - 64
<u>12</u>	65 - 69
<u>4</u>	70 - 74
<u>8</u>	75 - 79
<u>3</u>	80 - 84
<u>5</u>	85 and over

5. Are you aware of services available to seniors in your community?

<u>32</u>	Yes
<u>19</u>	No

6. Please check the appropriate box to indicate those services that you are aware of and those services that you have used. For any services that you have used, please indicate whether you were satisfied or were not satisfied.

Services	Aware of	Used	Satisfied	Not Satisfied
Home-delivered meals	26	4	4	0
Meals at senior centers or other facilities	26	4	3	0
Home care services	21	5	4	0
Information and referral	11	0	0	0
Elder Prescription Insurance Coverage (EPIC)	4	0	0	0
Retired and Senior Volunteer Program (RSVP), senior companions, or foster grandparents	11	1	1	0
Senior employment	7	0	0	0
Care management	6	0	0	0
Medicare/Medicaid Assistance Project (MMAP)	6	2	0	1
Legal services	8	2	2	0
Nursing home ombudsman	6	0	0	0
Respite care or adult day care	10	0	0	0
Senior centers	28	2	1	0
Other	3	2	2	0

7. How did you become aware of these services?

<u>8</u>	Hospital/doctor
<u>20</u>	Family and/or friends
<u>16</u>	TV/newspaper/radio
<u>4</u>	Other

8. Have you ever had to wait for a service?

<u>1</u>	Yes
<u>25</u>	No

9. Are you currently waiting to receive a service?

<u>1</u>	Yes
<u>27</u>	No

Glossary of Acronyms and Terms

aging	Individuals age 60 and over.
area agency on aging (AAA)	An agency designated by the Commission on Services to the Aging as being responsible for assessing the needs of the aging within a single planning and service area and for implementing programs to address those needs.
care management	An in-home service provided to the most frail elderly. Care managers assess needs and arrange, coordinate, and monitor an optimum package of services. The primary objective of care management is to provide services to maintain clients in their homes as long as possible.
Commission on Services to the Aging	A 15-member body appointed by the Governor that advises the Governor and the Legislature on coordination and administration of State programs, changes in federal and State programs, and the nature and magnitude of aging priorities. Also, the Commission reviews and approves grants made by OSA and participates in development of the State plan and budget.
CQI	continuous quality improvement.
DCH	Department of Community Health.
effectiveness	Program success in achieving mission and goals.
efficiency	Achieving the most outputs and outcomes practical with the minimum amount of resources.
FIA	Family Independence Agency.
goals	The agency's intended outcomes or impacts for a program to accomplish its mission.

in-home services	Assistance that consists of homemaker, personal care, and home health aide visits; telephone reassurance; chore maintenance; and other family support services.
mission	The agency's main purpose or the reason that the agency was established.
nutrition services	Assistance that consists of home-delivered meals and meals provided to participants in a congregate setting (congregate meals).
objectives	Specific outcomes that a program seeks to achieve its goals.
Office of Services to the Aging (OSA)	The State agency responsible for administering aging programs funded by the Older Americans Act of 1965 and the Older Michigianians Act.
Older Americans Act of 1965	Federal law that provides grants to the states for community planning and service programs for the aging.
Older Michigianians Act	Act 180, P.A. 1981 (Sections 400.581 - 400.594 of the <i>Michigan Compiled Laws</i>), which created the Commission on Services to the Aging, OSA, and the AAAs.
outcomes	The actual impacts of the program.
outputs	The products or services produced by the program.
performance audit	An economy and efficiency audit or a program audit that is designed to provide an independent assessment of the performance of a governmental entity, program, activity, or function to improve public accountability and to facilitate decision making by parties responsible for overseeing or initiating corrective action.
performance indicators	Information of a quantitative or qualitative nature used to assess achievement of goals and/or objectives.

performance measurement system	A system for capturing and processing data to determine if the program is achieving its goals.
planning and service areas	Distinct geographic areas in the State used for planning and delivering services to the aging that are designated by the Commission on Services to the Aging.
reportable condition	A matter that, in the auditor's judgment, represents either an opportunity for improvement or a significant deficiency in management's ability to operate a program in an effective and efficient manner.
service providers	Not-for-profit agencies, government agencies, and for-profit businesses that contract with the AAAs to identify seniors in need of services and to provide services in order to help seniors remain as independent as possible.
vision	An inspiring picture of a preferred future not bound by time, representing continuing purposes to serve as a foundation for a system of strategic planning.