CCSP

Community Care Services Program

2014 STATEWIDE ANNUAL REPORT

Living Longer, Living Safely, Living Well.

- 32 Years of Supporting and Growing the Home and Community-based Service Industry
- Quality and person-centered care is our focus
- CCSP costs less than nursing homes

DIVISION OF AGING SERVICES

DAS

Aging • Disability • Support • Safety

2014 ANNUAL REPORT

The Community Care Services Program (CCSP) Annual Report reflects State Fiscal Year 2014 (SFY 2014) activities completed by the Georgia Department of Human Services (DHS) Division of Aging Services (DAS) and other agencies. It is prepared for the following members of the Georgia General Assembly:

- Speaker of the House of Representatives
- President of the Senate
- Chairman of the House Health & Human Services Committee
- Chairman of the House Human Relations & Aging Committee
- Chairman of the Senate Health & Human Services Committee

CCSP Statewide SFY 2014 Annual Report reflects data through June 2014 issued December 2014.

ACKNOWLEDGMENTS

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TABLE OF CONTENTS

COMMUNITY CARE SERVICES PROGRAM (CCSP)

Acknowledgments	2
Table of Contents	3
Who We Are	4
CCSP's Purpose	4
CCSP's Legal Authority	4
CCSP's Scope of Services	5-6
CCSP Consumer Eligibility	6
CCSP's Operational Structure	7
The Area Agencies on Aging (AAAs)	8
Aging and Disability Resource Connection (ADRC)	9
Statewide Collaboration	10

CCSP SAVINGS & EXPENDITURES

Program Cost Effectiveness	11
Program Expenditures	12
CCSP Medicaid Funds by Service Type	13

CCSP CONSUMERS

CCSP Consumer Demographics	14
CCSP Consumer Length of Stay in Community &	15
Reasons for Discharge	15

CCSP PROVIDER AGENCIES & PARTNERSHIPS

Service Provider Agencies by Service Type	15
Leveraging Public / Private Partnerships	16-17

LOOKING FORWARD

Quality Initiatives	17-18
Quotables	19
Relieving Caregiver Burden	20-21
Looking Forward	22

Who We Are

The Georgia Department of Human Services Division of Aging Services (DAS) leads and administers a statewide system of assistance, referral resources and programs for senior citizens, individuals with disabilities, their families and caregivers throughout Georgia's 159 counties.

CCSP's Purpose

CCSP provides an alternative to institutional placement for individuals meeting Medicaid eligibility and nursing home level of care. Consumers continue to live safe, healthy, independent lives in the community with needed services at significant cost-savings over institutional care.

We are person-centered in our work with consumers. Together, we develop a plan of care that recognizes individuals' strengths and natural support systems as well as local community options and resources.

CCSP's Legal Authority

The Georgia Department of Human Services (DHS) Division of Aging Services (DAS) is responsible for the day-to-day operation of traditional case management under Georgia's Elderly & Disabled Medicaid Waiver (CCSP) through an interagency agreement with the Georgia Department of Community Health (DCH) Division of Medicaid. AAAs identify and respond to the needs of Georgia's senior population so that individuals may make informed choices about care and remain independent in the community.

The Medicaid Home and Community-Based Services waiver CCSP program is authorized in Section 1915(c) of the Social Security Act. The federal government, through a waiver agreement, approves a State to furnish a broad array of home and community-based services, not otherwise determined as medical assistance in the state plan, that assist eligible Medicaid beneficiaries to live in the community and delay or avoid institutionalization. Funded with federal and state dollars, the Department of Community Health (DCH) reimburses provider agencies for CCSP services provided.

Some key objectives of The Elderly & Disabled Medicaid Waiver CCSP are to:

- Serve those most in need with a budgeted program.
- Offer eligible consumers a community-based, less costly alternative choice to nursing facility placement.
- Train and monitor qualified Medicaid waiver service providers.

CCSP Scope of Services

Care Coordination/Traditional Case Management serves individuals who receive Medicaid through their eligibility for Supplemental Security Income or Medical Assistance Only determined by the Georgia Department of Human Services, Division of Family and Children Services. In Traditional Case Management, recipients choose and maintain their relationship with their personal physician because care coordinators, in this case management model, may work with any and all physicians licensed in Georgia. A Consumer Directed Option for delivery of Personal Support services is available to recipients who prefer to employ and manage their personal support services staff member(s).

The CCSP is the program choice for 96.5% of eligible consumers assessed. Overall, services and care coordination effectively delay or prevent institutionalization of consumers. Community-based services support the Medicaid eligible consumer's choice to remain at home or in the community.

Personal Support Services (PSS/PSSX)

PSS provides a range of support services for CCSP consumers. Services include activities such as the provision of assistance and support with basic personal care needs, and stand-by assistance or supervision of consumers with inability to perform activities such as feeding, dressing, bathing, toileting, transferring or walking, as well as assistance with client meal preparation, light housekeeping and running essential errands. PSS-X provides personal support services in a home setting that includes respite care for the full-time caregiver over an extended period of time.

Home Delivered Meals (HDM)

HDM ensures improved nutrition to enhance consumer health and well-being. Consumers may receive home delivered meals only in conjunction with another CCSP service.

Emergency Response Service (ERS)

ERS provides an in-home electronic support system for two-way communication between isolated consumers and a communication control center 24 hours a day, seven days a week.

Alternative Living Services (ALS)

ALS provides 24-hour supervision, medically-oriented personal care, routine nursing supervision, and health-related support services in a residential setting other than the consumer's home. This service is provided in state licensed personal care homes.

Adult Day Health (ADH)

ADH provides care in a community-based day program for consumers who are functionally or cognitively impaired. ADH provides consumers a variety of activities and services in a group setting: nursing care, special therapeutic services, personal care services, planned therapeutic activities, dietary services, transportation and social work services. Mobile Day Care responds to needs for service of seniors living in rural areas.

Out of Home Respite Care (OHRC)

OHRC provides temporary relief for the individual(s) normally providing care in a setting outside of home.

Home Delivered Services (HDS)

HDS provides traditional home health on an intermittent basis to consumers in their homes and includes skilled nursing, physical speech and occupational therapy, home health aide(s), and medical social services.

Consumer-Directed Personal Support Services option (CD-PSS)

The eligible consumer hires and supervises worker(s) of choice who provide a range of PSS support services for the CCSP consumer. The consumer must also enroll in Financial Management Services (FMS): the provider agency issues worker paychecks and on behalf of the consumer adheres to federal and state tax laws.

CCSP's Consumer Eligibility

- The 12 Aging and Disability Resource Connection sites conduct telephone interviews to screen consumers for potential eligibility for the CCSP.
- CCSP consumers must meet the same medical, functional, and financial criteria as consumers receiving nursing home care under Medicaid.
- When funding is available, consumers with highest levels of impairment and greatest unmet need are the first to be referred to the care coordination agency.
- A Registered Nurse (RN) conducts a face-to-face assessment to verify eligibility, identify need and develop a plan of care with the consumer.
- The client's physician certifies that the needs of the consumer may be met by the CCSP and available community resources. The physician approves the Nursing Home Level of Care and Care Plan, and authorizes delivery of services to the consumer in the community.
- Eligibility staff at the Division of Family and Children Services determine consumer

financial eligibility for Medicaid and, if applicable, their cost share.

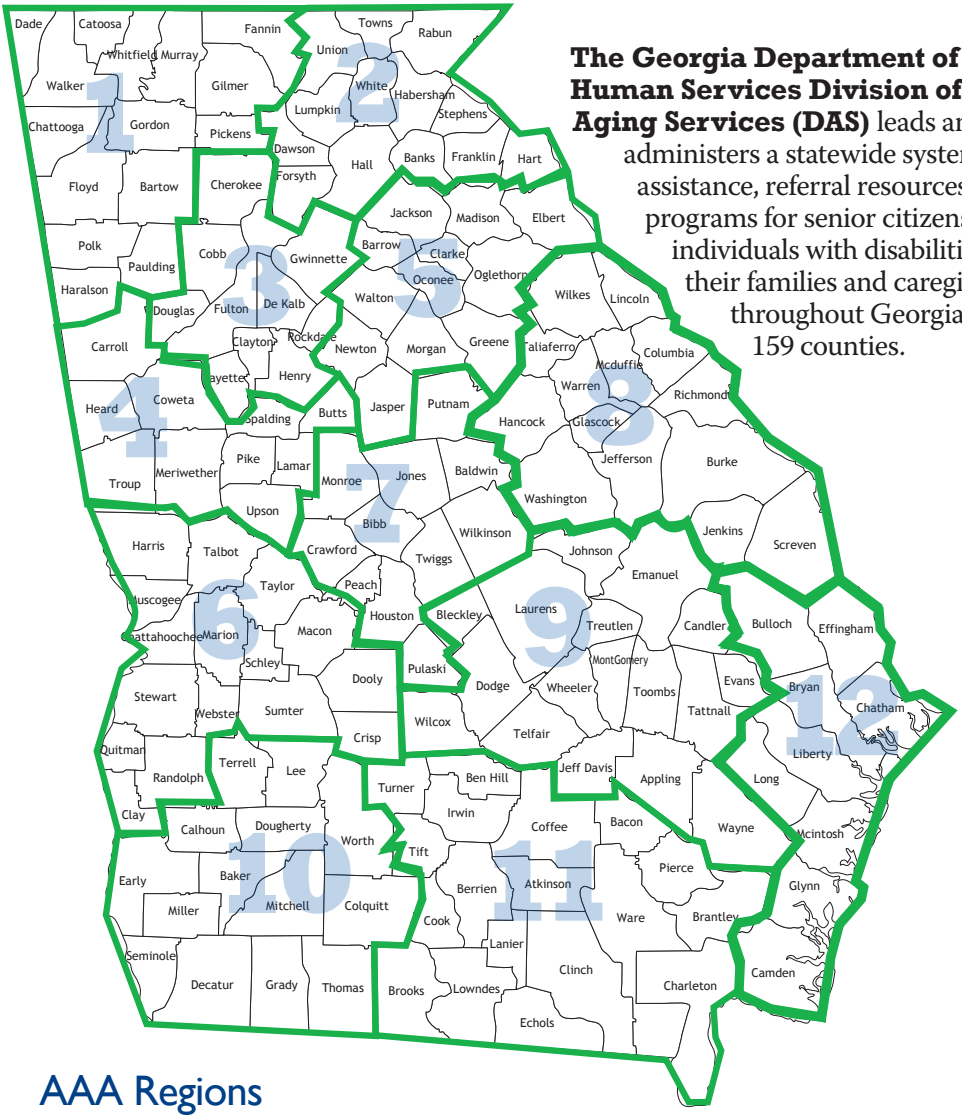
- Care coordination provides ongoing case management, care plan development and review, and re-evaluation annually or as needed.

CCSP's Operational Structure

The Georgia Department of Human Services (DHS) Division of Aging Services (DAS) is responsible for the day-to-day operation of traditional case management under Georgia's Elderly & Disabled Medicaid Waiver (CCSP) through an interagency agreement with the Georgia Department of Community Health (DCH) Division of Medicaid. As the state unit on aging, DAS contracts with the 12 Regional Area Agencies on Aging (AAAs) to manage the CCSP and provide consumer case management.

Consumers can continue to live safe, healthy, independent and self-reliant lives in the community with needed services at a significant cost savings over nursing facility placement. **The CCSP funding is determined each year by the Governor's Office of Planning and Budget and approved by the Georgia General Assembly.** DAS also provides support and direction to Georgia's Aging Network, including the AAAs, community service provider agencies, and other partners and stakeholders in strategic long term care matters and priorities.

Where We Are



The Georgia Department of Human Services Division of Aging Services (DAS) leads and administers a statewide system of assistance, referral resources and programs for senior citizens, individuals with disabilities, their families and caregivers throughout Georgia's 159 counties.

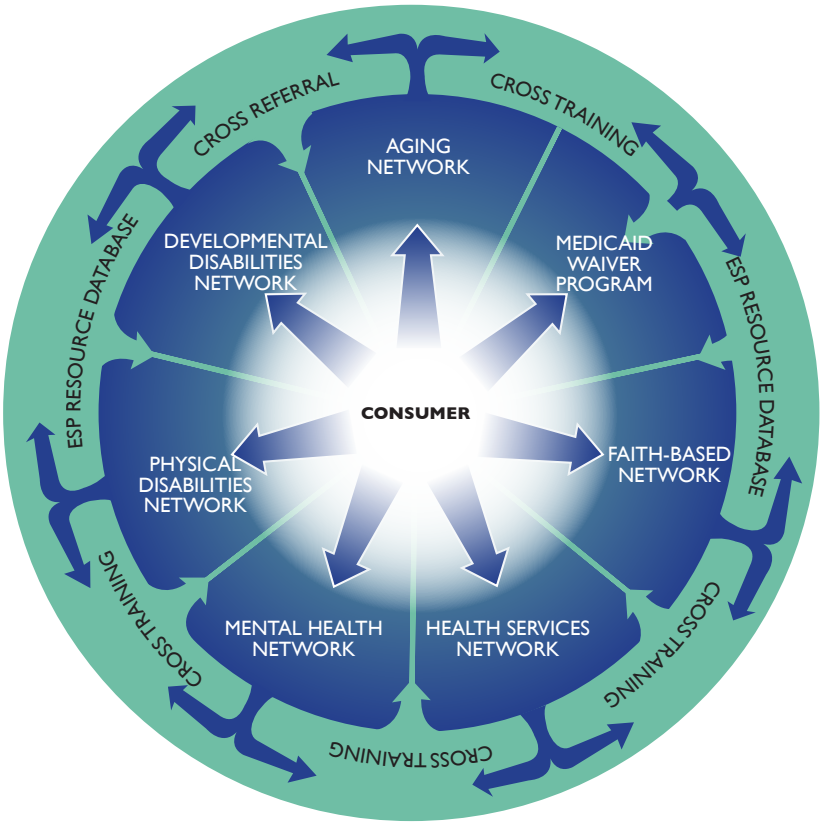
AAA Regions

We work with 12 regional Area Agencies on Aging (AAAs) throughout the state to identify and respond to the needs of Georgia's senior population so that individuals may make informed choices about care and remain independent in the community.

1. Northwest Georgia
2. Legacy Link
3. Atlanta Region
4. Southern Crescent / Three Rivers
5. Northeast Georgia
6. River Valley
7. Middle Georgia
8. Central Savannah River Area
9. Heart of Georgia Altamaha
10. Southwest Georgia (SOWEGA)
11. Southern Georgia
12. Coastal Georgia

Community Care Services Program

GEORGIA
AGING & DISABILITY RESOURCE CONNECTION



In SFY 2014, almost 330,0000 (328,672) unduplicated consumers contacted the ADRC.

Information, Referral & Options Counseling

Georgia's Aging and Disability Resource Connection (ADRC) is a "no wrong door" access point for older adults, individuals with disabilities, families and caregivers. The ADRC serves all populations regardless of ability to pay with information and options for people and families to make informed decisions related to their long-term service and support needs.

- ADRCs maintain the waiting list for CCSP.
- All ADRCs may be reached by calling 1-866-552-4464 or online at www.georgiaadrc.org

Statewide Collaboration

Col-lab-or-action!

Col-lab-or-action— (v) the act of working together resulting in positive achievement.

The following list captures only a few of the program-enriching partnerships that enable our program to flourish statewide, and we call this "Collabor-Action!"

Department of Human Services (DHS)

Division of Aging Services (DAS):

- Access to Services
- Adult Protective Services
- Community Care Services Program*
- Elder Rights
- Livable Communities
- Long-Term Care Ombudsman
- Public Guardianship
- Program Integrity

Division of Family & Children Services (DHS/DFCS)

DHS/DAS has the primary responsibility for the day-to-day operation of the CCSP program. Coordination of the various entities working together to deliver quality, consumer-focused and cost-effective services to eligible consumers is the priority of the CCSP. DAS Sections, particularly Adult Protective Services, Program Integrity, and Livable Communities (non-Medicaid community-based services) enhance consumer protection, program and services quality improvement, and, provides community resource availability to consumers.

DHS/DFCS determines consumer Medicaid eligibility and cost share for services for those whose income is over the Supplemental Security Income (SSI) limit.

Working with Area Agencies on Aging (AAAs):

- CCSP Care Coordinators
- CCSP Service Provider Agencies
- Gateway/ADRC (Information, Referral & Assistance)
- Non-Medicaid services
- Database of statewide services / resources

AAAs contract with DHS/DAS to serve as Lead Agencies or regional managers of the CCSP. The 12 AAAs serve as the "no-wrong-door" Aging and Disability Resource Connection (ADRC) coordinated system for consumers of all incomes and ages, their families, caregivers, and service providers, to get information on the full range of long term support services. The AAAs manage client service benefit allocations, assuring the CCSP does not exceed budgeted funding.

Department of Community Health (DCH):

Division of Medicaid

Healthcare Facility Regulation (HFR)

DCH/MEDICAID: Under federal administration by the Centers for Medicare & Medicaid Services (CMS), Division of Medicaid administers and oversees the Elderly and Disabled waiver program, and is responsible for provider enrollment, reimbursement, and utilization review.

DCH/HFR is the regulatory and licensing entity for CCSP service providers.

Department of Public Health (DPH)

Department of Behavioral Health and Developmental Disabilities (DBHDD)

DPH is the state lead agency in preventing disease, injury and disability; promoting health and well-being; and preparing for and responding to disasters from a health perspective.

DBHDD is the state BH and DD authority and provides mental health, developmental disabilities and addictive diseases resources for CCSP consumers in need of services, and also partners with DAS in grant projects and initiatives.

The work we do with these partners enhances consumer protection, overall program and service delivery quality, and clients' access to resources.

PROGRAM COST EFFECTIVENESS

CCSP Savings & Expenditures

Consumers in SFY 2014, who received home and community-based CCSP Medicaid services instead of nursing facility institutionalization, **saved Georgia taxpayers almost $316 million ($315,956,865)** *in Medicaid service benefits expenditures.*

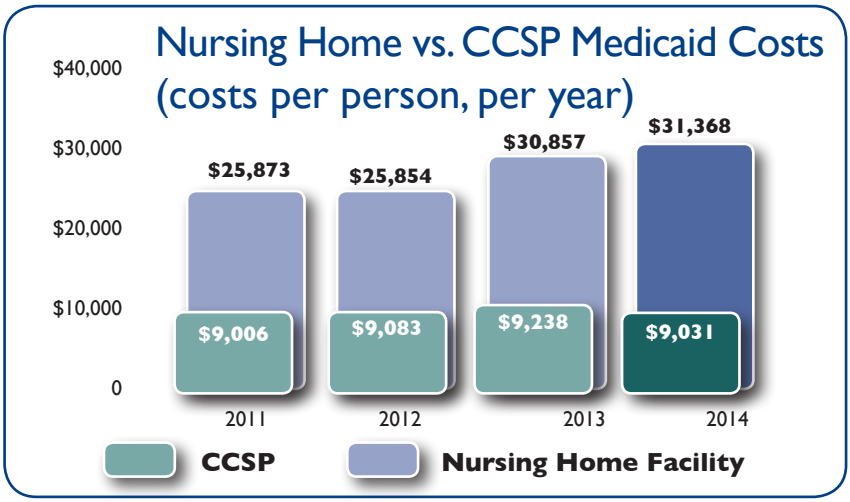
For eligible consumers, the CCSP Medicaid Waiver is a cost-effective alternative to nursing facility placement. The Department of Community Health reports that the average Medicaid cost for services received in a nursing home facility was $ 31,368 in SFY 2014. However, the average Medicaid cost for services rendered through the CCSP waiver was only $9,031.

This is a potential savings of approximately $22,337 per consumer in CCSP, or about 71% less than traditional costs of nursing home services.

Nursing Home vs. CCSP Medicaid Costs (costs per person, per year)

Consumer service benefits expenditure is based on payment data. Historically, CCSP reported Nursing Home vs. CCSP Medicaid Costs on a cost per person, per year basis. **The chart below shows that nursing homes costs are far higher than the cost of care for an individual in the CCSP.**

* CCSP average consumer benefits costs does not include care coordination or administrative costs.



CCSP Program Expenditures

In SFY 2014, DCH reimbursed CCSP provider agencies $130,515,867 for consumer services provided. The state administration costs were just under 2% of the total expenditure for the CCSP.

CCSP Program Expenditures SFY 2011 - SFY 2014

Category	SFY 2011	SFY 2012	SFY 2013	SFY 2014
Consumer Service Benefits*	$111,857,667	$116,486,614	$121,922,780	$130,515,867
Care Coordination	$23,589,962	$23,661,757	$23,640,966	$23,908,690
State Administration	$1,309,954	$1,774,514	$2,158,244	$2,230,720
TOTAL	$136,757,583	$141,922,885	$147,721,990	$156,655,277

*Consumer service benefits expenditure is based on payment data.

Individuals Are Able to Remain at Home or Stay in their Community

In SFY 2014 CCSP enabled 14,145 individuals to remain in the community. While this is a significant number, there remain, on average 1,686 eligible individuals waiting for service.

CCSP Medicaid Funds Expended By Service Type & Consumers Served

CCSP Service	#Consumers Served	% Total Consumers	$Funds Expended	%Total Funds
Adult Day Health	941	7%	$6,751,089	4%
Alternative Living Services	1,670	13%	$11,793,316	8%
-Group Model	790	6%	$5,505,614	4%
-Family Model				
Consumer-Directed PSS Option	388	3%	$8,274,680	5%
- Financial Management	388	3%	$293,040	<1%
Emergency Response Services	5,483	42%	$1,534,283	1%
Home Delivered Meals	6,015	46%	$12,005,131	8%
Home Delivered Services	26	<1%	$33,215	<1%
Skilled Nursing Services	139	1%	$308,065	<1%
Out of Home Respite Care	47	<1%	$57,135	1%
-Day				
-Night	48	<1%	$35,394	<1%
Personal Support Services	9,655	73%	$100,430,897	70%

CCSP Consumers by Gender / Age July 2013-June 2014

Age Category	#Consumers	SFY 2014
Consumers 100 years of age or older	119	<1%
Consumers 90 - 100 years of age or older	1,469	10%
Consumers 85 - 95 years of age or older	2,953	21%
Consumers 75 - 85 years of age or older	6,190	44%
Consumers 60 - 75 years of age or older	10,649	75%
Consumers under 60 years of age	3,495	25%

CCSP Consumers by Race 2014

In SFY 2014, 48% of CCSP consumers were Caucasian and 45% were African American. The remaining 7% included several other ethnic groups.

"I thank each and every one at this agency for getting help for my Mom. I've been trying over 11 to 12 months to get accomplished what your agency has in 1-2 months. Thanks."

— Caregiver son, CCSP consumer
Atlanta Regional Commission Area Agency on Aging

CCSP Consumer Length of Stay in the Community & Reasons for Consumer Discharge

During SFY 2014, CCSP services supported consumers living in the community for nearly four (4) additional years, and 97% of CCSP clients chose to remain in their respective communities instead of going into a nursing home.

That means that 14,145 consumers eligible for nursing facility placement maintained their independence in the community for an average of 44 months – and at significantly less cost than in institutional settings.

Additionally, the need for continuous/higher level of skilled care services resulted in only 24% of those discharged from the CCSP to enter a nursing facility.

Discharged CCSP Consumers by Reason	# Clients Discharged	% of Total Discharges*
Death	1,385	40%
Nursing Facility placement	833	24%
Moved Out of State / No Services Provided / Never received Service / Unable to Contact / Other	507	15%
Refused Service / Requested Termination	415	12%
Does Not Meet Level of Care / Does Not Meet Eligibility Criteria	90	3%
Other Service or Program / Over Income / Financially Ineligible	106	4%

*Percentages rounded

CCSP Service Provider Agencies

CCSP supports local economic business development. CCSP manages, coordinates, and provides services to consumers by **partnering with 646 public and private licensed CCSP enrolled businesses and agencies.** CCSP recommends qualified provider agency applicants to DCH for CCSP Medicaid enrollment, and provides training to prospective service provider agencies. **In SFY 2014, we enrolled 210 new providers.** Provider agencies deliver services identified by the consumer's care coordinator and approved by the primary physician.

Provider Agencies - By Service Type*

Adult Day Health	74
Alternative Living Services - Family Model (2-6 beds)	25**
Alternative Living Services - Group Model (7-24 beds)	162
Consumer Direction Option / Financial Management Service	2/2
Emergency Response Services	13
Home Delivered Meals	34
Home Delivered Services / Skilled Nursing Services	5/45
Out-of-Home Respite Care Services	11
Personal Support Services	370
Total	646

*Some providers offer more than one service. **Under ALS-Family Model provider agencies, there were 535 registered homes during SFY 2014.

Leveraging Public-Private Partnerships

Fuqua Center for Late-Life Depression at Emory University

In 1999, a generous gift from J.B. Fuqua established the Fuqua Center for Late-Life Depression of Emory University at Wesley Woods. Mr. Fuqua recognized that all too frequently a lack of understanding regarding depression in older adults on the part of professionals and the general public as well as poor access to geriatric psychiatry services was causing older adults with depression to go untreated. Untreated depression results in a poor quality of life, decreased ability to remain independent and the exacerbation of physical illnesses leading to increased healthcare costs.

The founding of the Fuqua Center, a community education and outreach entity within Emory's Department of Psychiatry and Behavioral Sciences, Division of Geriatric Psychiatry provides education activities for professionals coupled with policy change aimed at improving older adult's access to appropriate treatment. In

the next fiscal year, the Georgia Department of Behavioral Health and Developmental Disabilities, the Georgia Division of Aging Services and the Fuqua Center will enter into a partnership to increase Georgia's capacity to care for the growing older adult population with behavioral health disorders.

Together a robust cross-training program will be implemented, initially focusing on CCSP and the program's work with colleagues in public mental health across the state. The Aging and Disability Resource Connection, Long Term Care Ombudsman, Public Guardianship and Adult Protective Services will also be involved in the capacity building efforts.

Quality Initiatives

Program Improvement Project (PIP)

The Georgia Department of Community Health (DCH) was awarded a two-year Adult Medicaid Quality Grant in December 2012 from the Centers for Medicare and Medicaid Services (CMS).

In February 2013, DCH partnered with DAS, and DAS started to implement program improvement projects for CCSP Medicaid members around depression. PIP has focused on increasing the screening and follow-up of consumers whose assessment indicated the presence of depression. CCSP staff have specifically been looking to see whether early identification of depression and subsequent case management for depression (treatment including antidepressant medications) has resulted in improved short-term and long-term compliance with either antidepressant therapy or a reduction in depressive symptoms.

The interventions have included administration of the standardized PHQ-9 depression screening tool for all CCSP clients coming into the program during initial assessment, training to the field, and improved provision of case management services to help ensure medication compliance. DAS has identified possible barriers impacting treatment and inhibiting symptom stabilization. We continue to institute ongoing quality measures in regards to depression, in the hopes of improving our clients' lives based on the outcome of our research.

Consumer Direction

In SFY 2014, 388 CCSP consumers elected the Consumer Directed Personal Support Services (CD-PSS) option. Eligible CCSP consumers have more control in organizing service resources, implementing choice in determination of how to meet their needs,

and taking responsibility for planning, hiring, and managing their own PSS service staffing support and delivery.

Money Follows the Person (MFP)

The Money Follows the Person program is a grant administered by the Centers for Medicaid and Medicare Services (CMS), authorized by the 2005 Deficit Reduction Act, and currently funded through 2016. The program's purpose is to identify and transition eligible individuals from long-term acute care settings back into the community. The 12 Area Agencies on Aging are instrumental in facilitating MFP transitions. During SFY 2014, there were 154 CCSP clients who benefitted from transitions back into their communities, comprising roughly 55% of the total amount of MFP transitions statewide. MFP is able to provide durable medical equipment and home modifications (among other services) for CCSP members when they leave the nursing home and return home.

RIVER VALLEY

"CCSP gives me and my family peace in knowing all is well. They provide the best care by ensuring their providers are the best. My loved ones can work without worry. It promotes my independence because I know that someone is always available to assist with anything I need. The services have provided someone to assist with cooking, cleaning, bathing and good conversation."

— 94 year old female consumer who receives PSSX and HDM
Americus, River Valley Area Agency on Aging

"This program helps me stay clean, dressed and takes away a lot of burdens. The aide assists with my physical disabilities and is good company. It allows me to remain at home and transfer to my wheelchair so I can move around on my own."

— 57 year old female consumer who receives PSS and HDM
Woodland, River Valley Area Agency on Aging

Quotables

MIDDLE GEORGIA

"Through the assistance with CCSP I have been able to avoid admitting my mother to a nursing home, allowing her to maintain more of her independence. My mother does not have the finances that would allow her to go to assisted living, and would as a result have to be admitted to a skilled nursing facility . . . Through CCSP, she is able to have an assistant come into the home a few hours a day and cook for her, assist in her personal care, shop for supplies, and provide transportation to doctor visits."

— Caregiver daughter for female consumer, age 87, who receives PSSX, HDM and ERS
Fort Valley, Middle GA Area Agency on Aging

"I love the CCSP Consumer Directed Care program. The program gives me the flexibility to control the care that my mom needs. The best part about the program is that I am in charge of the care and I do not have to touch any of the money, as the funds are handled by the fiscal agent."

— Female consumer age 80 who receives CD-PSS
Warner Robins, Middle GA Area Agency on Aging

NORTHEAST GEORGIA

"It is our pleasure to write regarding the CCSP program and how it has allowed our family to have peace of mind that our mother is safe, secure, and treated with dignity and respect during the golden years of her life. It would literally take us days to express our appreciation to the State of Georgia for providing funding for these types of programs and we pray that any individual who has reached this stage in life can receive back as much or more than they have given."

— Caregiver Daughter for female consumer age 86, who receives PSSX and HDM
Monroe, Northeast Georgia Area Agency on Aging

"She relies on CCSP case manager to help her with referrals to GA Cares, assist in getting information to the Division of Family and Children Services on yearly Medicaid reviews, durable medical equipment referrals, and coordination of outside services from home health."

— Female consumer age 67, who receives HDM, ERS and PSSX
Commerce, Northeast Georgia Area Agency on Aging

Relieving Caregiver Burden

Reducing Caregiver Burden/Stress

Georgia's Area Agencies on Aging (AAAs) utilize three evidence-based caregiver intervention programs in order to reduce caregiver stress and burden. AAAs provides at least one of these programs within their regions:

Tailored Caregiver Assessment and Referral (TCARE®)

TCARE® is a protocol designed to enable care managers to more effectively support family caregivers by efficiently targeting services to their needs and strengths. TCARE® guides care managers through an assessment and care planning process that helps them examine the sources and types of stress that a caregiver is experiencing. TCARE® is presently being provided in five AAAs.

Powerful Tools for Caregivers (PTC)

Powerful Tools for Caregivers is a six week education program for family caregivers that have been shown to improve self-care behaviors, self-efficacy, and use of community resources. The classes have been shown to have a positive impact on caregiver health for a diverse group of caregivers including rural, ethnic minorities, adult children of aging parents, and caregivers at differing stages in their caregiving role, living situations, and financial and educational backgrounds.

"This program has helped me and my family in every way. We aren't able to keep mother at home with us, so she stays at the personal care home that is provided by CCSP. Mother enjoys being around the other residents and we know that she is safe."

— Daughter of client age 85, who receives ALS Griffin, Three Rivers Area Agency on Aging

Care Consultation

Care consultation is an information and coaching service delivered by telephone, and serves both adults with chronic health conditions and the primary family member or friend who helps them out with most daily activities.

A recent study in Georgia, conducted by the Health Policy Center at Georgia State University, involved analyzing data from 158 caregivers in eight AAAs across the state that participated in PTC classes. On all 12 measures examined, the change between pre- and post-test scores was statistically significant. PTC is presently being provided in all 12 AAAs.

The program provides four types of assistance: (1) health and care-related information (2) family and friend involvement in care (3) awareness and use of community resources, and (4) coaching and support. By January, 2015, it is anticipated that Care Consultation will be available in five AAAs.

What to look for in SFY 2015 and beyond

As we stand on the horizon of SFY 2015, we are reaching for opportunities to continuously improve by doing the following:

- We are **building** the program's capacity to enable a growing aging population to remain in their homes and avoid nursing home placement.
- We are **intensifying** our efforts to support and recruit service providers who demonstrate strong commitment to excellence in customer care and service delivery.
- We are **cultivating** service providers in underserved areas across our state, strengthening our network and ensuring choice for our consumers.
- We are **developing** quality initiatives targeting both underperforming agencies and high-achieving agencies to improve health and safety outcomes.
- We are **partnering** with the Georgia Department of Community Health in the planning and implementation of the Centers for Medicare and Medicaid Home and Community-Based regulations on person-centered planning and service settings.

SOUTHERN

"My wife has dementia and her personality has changed dramatically towards her family and especially me (her husband). Everything has become a constant battle and fight to just keep her clean and safe. Bath time became a 3-hour ordeal of fussing, coaxing, bribing and finally tears and screaming just to get my wife bathed, groomed and dressed. Since we have been on CCSP and have been receiving PSS services, my wife knows exactly when she will be bathing and she eagerly and pleasantly goes to the bathroom allowing the aide to assist her in the shower and then grooming as well as dressing . . ."

— Caregiver husband, age 78, of female consumer, age 75 who receives PSS Valdosta, Southern Area Agency on Aging

"I am not a has-been.
I am a will be."

— LAUREN BACALL

CCSP

Community Care Services Program

Division of Aging Services
Community Care Services Program

"A Partner in the Aging Network"

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DHS
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DIVISION OF AGING SERVICES
DAS
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