



Franklin County  
Board of Commissioners

**OFFICE ON AGING**



# SENIOR SERVICES LEVY FACT BOOK 2022

2023-2027

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## Executive Summary

### SENIOR SERVICES LEVY 2023-2027

Ohio has the 7<sup>th</sup> largest older adult population in the nation. In 1993, the long-term care service delivery system was seriously out of balance, with 90% of those with a severe disability receiving care in an institutional setting. By 2015, that ratio was close to 50/50 according to research conducted by the Scripps Gerontology Center. They identify the network of local senior services levies as a “tremendous asset” for seniors trying to remain in the community and an important part of the more balanced approach to long-term care.

This document will describe the accomplishments of the Franklin County Senior Levy during the period 2018-2022 with data regarding who is being served, what services are needed, service expenditures, quality control, performance measures, future business climate, and operational needs of the agency.

The Franklin County Office on Aging (FCOA) has administered the Franklin County Senior Options (FCSO) program on behalf of the Franklin County Board of Commissioners since 1993. Through a large provider network, FCOA makes available home and community-based care services for Franklin County residents in need age 60 and older.

The mission of FCSO is to help older adults maintain their sense of independence, retain a good quality of life, and avoid or delay the need for costly institutional care. In addition to being less costly, older adults have a strong preference to remain at home.

Enrollment into FCSO has increased 20% from 2016 to 2021, with the greatest enrollment increase (16%) occurring over the last two years, which reflects the increased demand for services from the growing elderly population. The seniors being served remain typically female, widowed, and living alone. A large proportion of non-white seniors than is represented in the county’s population are served which reflects a generally poorer health status of that group. Most seniors served reside in the areas of the county that have been identified as areas of vulnerability for seniors, such as the south end, the Linden area, the near eastside, and Franklinton as identified in the Franklin County Poverty Blueprint.

Service utilization data reflects high usage of some of the social services that are linked to better aging, such as home delivered meals, transportation, and emergency response pendants.

FCOA has had several opportunities to work collaboratively with other systems in Franklin County to promote a better quality of life. Recent initiatives include ADAMH, Franklin County Children's Services and the area hospital systems.

As recommended by the Human Services Levy Review Committee, a community needs assessment was conducted and an agency operational review was implemented during the current levy cycle.

The ability to continue to serve the growing number of seniors projected in Franklin County during 2023 through 2027 depends upon a strong senior services levy and an agency able to develop partnerships with other aging-serving agencies. After careful review of how projected revenues, expenses, and cash balance align with anticipated growth of the population of seniors in need, it is recommended that a 1.75 mill renewal be put on the November 8, 2022, ballot. This request includes a renewal of the existing 1.75 mill, 5-year levy expiring December 31, 2022, for a period of 5 years.

The Franklin County Auditor's Office has established the 2021 real and personal property valuation at \$36.9 billion. This levy is estimated to generate \$50.3 million in 2023 and would cost the owner of a \$100,000 home \$41.13 per year (approximately 11¢ cents per day).

The value to the community would be the continued development of a system of care that contributes to the healthy aging of Franklin County's senior population.

## Agency Overview

The mission of the Office on Aging is to provide centralized access to diverse programs and individualized services for older adults and their families so they can preserve their independence and quality of life. The vision of the Office on Aging is to be recognized as the premier provider of services that improve overall quality of life with dignity and respect for Franklin County's older adults.

The Franklin County Office on Aging (FCOA) is a mission-driven agency, which values its ability to respond to the changing needs of its customers, the seniors that are served. The program strives to be responsive to the changing needs of our seniors and adaptive to new initiatives within the aging network.

For each senior levy campaign since 1992 the voters have been assured that the following core elements of the Franklin County Senior Options (FCSO) program would be retained:

- The single-entry point or “one-stop shop” approach would be retained,
- A person would not be required to spend down to poverty to receive services. A cost sharing mechanism would remain a part of the program,
- A person would not have to decline to a nursing home level of frailty to get services, and
- A diverse set of services and programs would be made available.

These elements of service provision will remain in place during 2023-2027, should the senior levy be successful at the ballot box. The Senior Services Levy has gone before the voters every five years, since 1992. Each time the voters have approved its passage by over 60%.

FCSO provides social services that are designed to assist residents aged 60 and over with the maintenance of independent living, which in turn promote aging in place. The services available include:

- Emergency response systems (ERS) – a variety of systems are available to meet a client's individual needs, such as standard voice activated ERS systems to GPS enabled systems, which are excellent for more mobile seniors. The program also provides extra pendants for a spouse or partner, fall detectors, and monitored medication dispensers and smoke detectors.
- Home delivered meals - inclusive of a daily hot meal or frozen meals delivered weekly, offered in a variety of dietary styles, for example, Kosher or Vegetarian.
- Transportation – medical and non-medical transportation is available, as well as wheelchair accessible transportation.

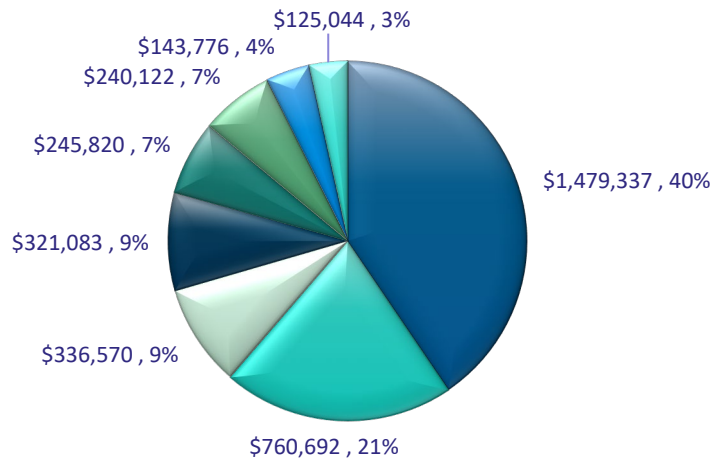
- Homemaker services – a general, light home cleaning service inclusive of laundry and shopping.
- Respite care – provides caregiver relief in larger blocks of time and can include personal care and homemaking tasks.
- Personal care – provides a home health-aid to ensure safety and support while bathing/showering.
- Adult Day Services – provides a safe and structured environment for older adults who need supervision and are unable to be alone for a length of time.

The Office on Aging values the diversity of the older adults that it serves and strives to approach every individual's situation with respect for that diversity. The plans of care developed are tailored to the needs of the individual participant. Although services may be needed to improve an individual's quality of life, the individual should be empowered to make informed choices about her/his care needs.

FCOA provides the following direct services to seniors and their families: Information and Referral (I&R), advocacy, crisis intervention, assessment of care needs, care plan development and ongoing case management for 70% of the enrolled participants. FCOA has a significant community partner, the Central Ohio Area Agency on Aging (COAAA), which provides all face-to-face assessments for FCSO, as well as ongoing face-to-face case management for approximately 30% of the enrolled caseload space.

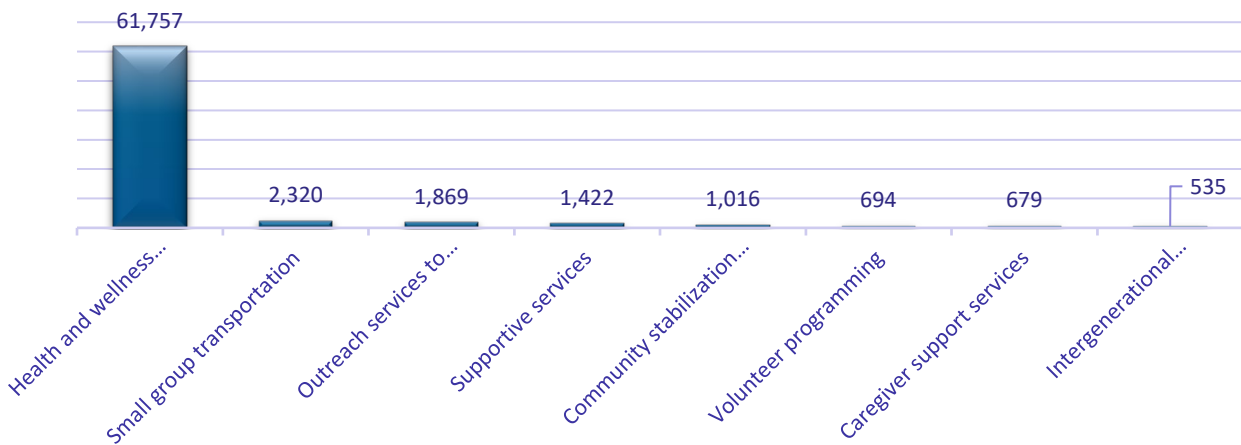
The Senior Options grant program partners with the community's network of educational and human service agencies to expand and enhance its services to seniors. Our grant program plays a significant role in the continuum of services that assist Franklin County's older adults and their families with independent living.

## 40% of Grant Funding Ensures Seniors Health and Wellness



- Health and wellness services
- Supportive services
- Outreach services to specialized populations
- Small group transportation
- Volunteer programming
- Community stabilization services
- Caregiver support services
- Intergenerational programming

## 70,292 Seniors Were Served Through Grant Funding in 2021





## **2021 Grant Recipient Agencies and Service Categories**

### **Caregiver Support Services - \$143,776.00**

Alzheimer's Association of Central Ohio  
Syntero, Inc.

### **Community Stabilization Services - \$240,122.00**

At Home By High  
Central Community House  
Clintonville-Beechwold Community Resources Center  
Greater Hilltop Area Shalom Zone CDC  
Legal Aid Society of Columbus  
Village Connections

### **Health and Wellness Services - \$1,479,337.00**

Breathing Association  
Charitable Pharmacy of Central Ohio  
Central Ohio Area Agency on Aging  
City of Columbus Recreation & Parks Department  
Columbus Speech and Hearing Center  
Gladden Community House  
Joint Organization for Inner-City Needs  
LifeCare Alliance  
Mid-Ohio Foodbank  
Ohio State University  
Ohio State University Franklin County Extension  
Upper Arlington Commission on Aging

### **Intergenerational Programming - \$125,044.00**

NCR Center for Senior Health  
OhioHealth Gerlach Center for Senior Health

### **Outreach Services to Specialized Populations - \$336,570.00**

Asian American Community Services  
Community Refugee and Immigration Services  
Gladden Community House  
Jewish Family Services  
Legal Aid Society of Columbus

**Small Group Transportation - \$321,083.00**

Blendon Township  
Canal Winchester Human Services  
City of Groveport  
Clintonville-Beechwold Community Resources Center  
St. Stephen's Community House

**Supportive Services - \$760,692.00**

Catholic Social Services  
Clintonville-Beechwold Community Resources Center  
Concord Counseling Services  
St. Stephen's Community House  
Syntero, Inc.

**Volunteer Programming - \$245,820.00**

Catholic Social Services  
Central Ohio Area Agency on Aging  
Employment for Seniors, Inc.

The FCOA and its residents greatly benefit from the rich offering of services and programs through our Franklin County partners. Presently, the County is aligning all Health and Human Service (HHS) agencies within a new initiative, One Door Franklin County. The goal of this initiative is to provide a seamless experience for Franklin County residents who present with multiple service needs from multiple county agencies. This approach ensures the resident will be provided with the wrap-around services and supports from their initial point of contact with Franklin County. The FCOA will have an important role in this, as many families contain multiple generations in a household and will create easy access to senior services for our residents. One pilot program currently operating in this capacity is the Family Stabilization Unit (FSU), administered by Franklin County Jobs and Family Services and Franklin County Juvenile Court. The goal of the FSU is to closely support justice-involved youth and their families by providing linkages to needed county and community services and resources, and to provide intensive case management to the youth as well as the family, which at times may include seniors or have a senior as the head of household. The FCOA can support the efforts of the FSU by providing needed services for the older adult and collaborate with the lead FSU case manager.

The FCOA has worked closely with the Veteran's Service Commission (VSC) since 2011 for specific service needs of veterans who qualify for both VSC and FCSO, such as emergency response systems. The VSC elected to utilize FCOA's existing service

specifications, eligibility criteria, and rates for this service rather than creating duplicate structures. The FCOA and the VSC can easily refer clients to each other, thereby enabling easy access to each agency's programs and services for our senior veterans and their families.

The FCOA worked collaboratively with the Franklin County Public Health (FCPH) team during the COVID-19 pandemic to assist seniors in scheduling vaccination appointments and obtaining transportation to FCPH's walk-in clinics. Many of the vaccination appointment sites were online only, and as this is not always possible for our older adults, FCSO case managers assisted clients by registering them and scheduling their appointments to obtain their vaccinations. FCSO created a new service, COVID Escort Transportation which enabled the program to provide free transportation for residents and compensated the providers by allowing billing by the hour instead of by mileage. Most clinic locations were very efficient and waiting times were minimal. FCSO also assisted homebound individuals with access to vaccinations by referring to community partners, such as FCPH and Columbus Health Departments, both of which have been very responsive and successful with vaccinating our homebound seniors.

In 2018 and 2019, the FCOA partnered with the ADAMH system to design a campaign aimed at reducing stigma of mental health concerns for older adults. A series of roundtables were held with community professionals to gain insights as to barriers for accessing services for seniors, as well as ideas to minimize the stigma with the older population. The agency also sponsored Senior Chats with older adult audiences, at various sites around the community to hear directly from older adults their perspectives on mental health and challenges they may have faced when accessing services. The ADAMH system with support from FCOA launched the "Emotional Wellness Matters" campaign based upon an assessment of the feedback received from the community.

The lack of affordable housing for seniors continues to be very concerning for our community. Eviction has critical impact on everyone, but the issues are more pronounced with the older adult population. To bolster mediation and provide wrap around support to those facing eviction, the FCOA has increased funding to Legal Aid to provide a team of social workers or other professionals to be present in Franklin County's Eviction Court to intervene and attempt to mediate eviction proceedings involving older adults. As prevention of eviction is the best approach, the funding to Legal Aid also provides for referrals to the intervention team to advocate and assist seniors at risk of eviction proceedings and attempt to mediate with landlords.

While this last program description is not a county agency partnership, it is an example of successful governmental partner collaboration. Occasionally, the FCOA receives referrals from law enforcement or EMS personnel upon having contact with an older adult who may appear to need in-home and community supports and services. Often, the senior has called 911 due to a fall in the home, and the EMS personnel determines the older adult may benefit from linkage to the Senior Options program. In 2015, the Columbus Fire Department (CFD) received funding from the FCOA and the COAAA to develop a pilot program, Specialized Program Assessing Resource Connectivity (SPARC), to “embed” a licensed Social Worker within the CFD. The goal of the pilot was to provide a multi-disciplinary team (Social Work and EMS) for linkage to programs for easy access to home and community-based care and supports for isolated older adults who utilize 911, at times inappropriately. This program has proven extremely successful and has now expanded to approximately 6 full time social workers. In 2020, there were 1,125 referrals made to this program, and 704 were older adults aged 60 and over. Of those referrals, 390 seniors were newly referred for in-home services and supports, and 251 were re-linked with a community-based case manager.

Under Ohio Revised Code 5101.60, each county’s Jobs and Family Services agency is responsible to provide Adult Protective Services for the investigation of allegations of Abuse, Neglect and Exploitation of adults 60 and older. In Franklin County this service is operated under the Franklin County Office on Aging with funding through Franklin County Jobs & Family Services.

All allegations reported are reviewed within 24 hours to determine if the adult has suffered or is at risk to suffer abuse, neglect, or exploitation. For cases screened in, Adult Protective Services has 72 hours to complete the initial contact with the adult and most often this is done in person. For a case that is deemed an emergency, the adult is reported to be living in a condition which presents substantial risk of immediate physical harm or death, and the risk can be the result of the adult’s own action or inflicted on the adult by another person. Emergency cases must be initiated within 24 hours. Once a case is initiated a case decision must be made within 30 days. At 30 days the allegations are either substantiated or unsubstantiated. The case will then move into ongoing or be closed. A case is closed if there is no longer risk to the adult and a need for protective services.

Franklin County Office on Aging has a total of 103 full-time equivalent positions. 50% of the staff work directly with Senior Options, coordinating and managing services for over a dozen programs designed to help seniors remain independent. 19% provide additional services such as Adult Protective Services and Caregiver Support. 31% provide administrative support to the programs including Information Technology (IT) which

supports over 100 businesses in providing and billing for services through the case management system and Quality Improvement (QI) which ensures quality services are being provided to the community by business partners.

The chart below shows five-year staffing levels for both FCOA and COAAA. During 2023, FCOA anticipates adding a new case management team and COAAA anticipates adding a new case management team in 2024. The FCOA table of organization is included as Appendix A.

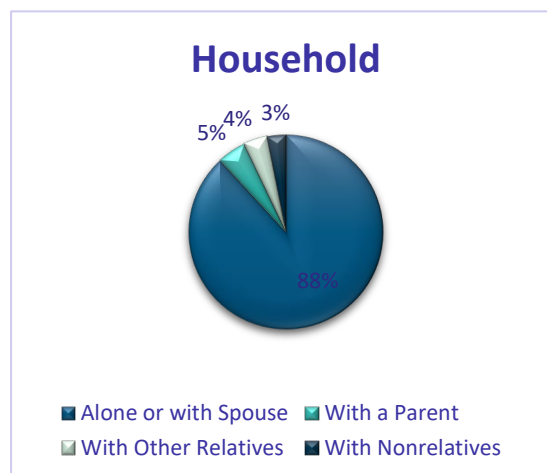
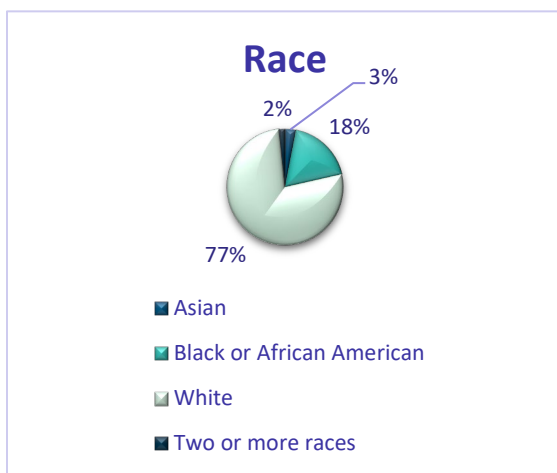
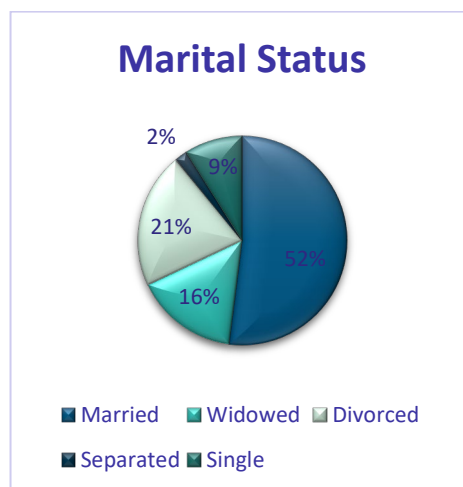
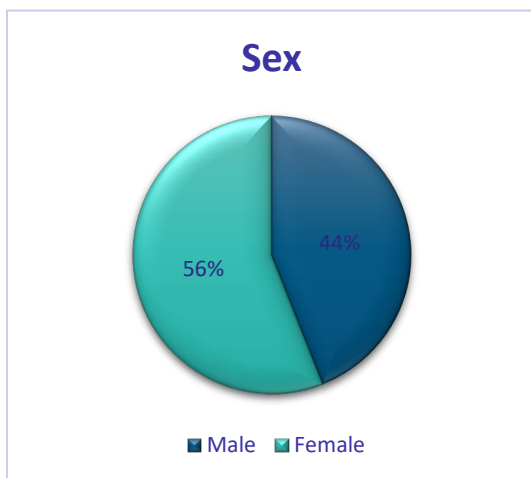
YEAR	FCOA	COAAA
2018	80.80	49.60
2019	81.60	49.71
2020	83.40	49.20
2021	83.45	53.40
2022	82.35	52.41

FCOA also administers Adult Protective Services (APS) under contract to Franklin County Jobs and Family Services. Those positions are not included in these figures since they are supported through Title XX funding.

## Need and Service Level

Census shows that the current population of those 60 years of age and older are 44% male and 56% female. 52% are married, 16% are widowed, 21% are divorced, 2% are separated, and 9% are single. Based on Franklin County Office on Aging's population served, it appears that more single, widowed, or divorced households seek services.

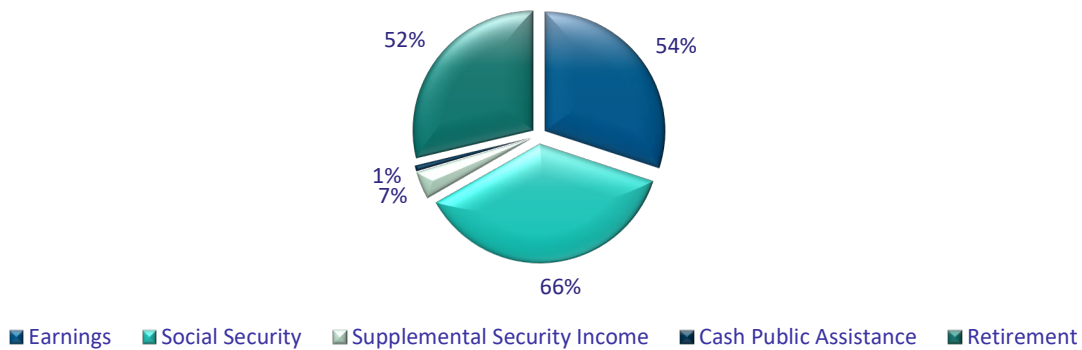
## Demographics



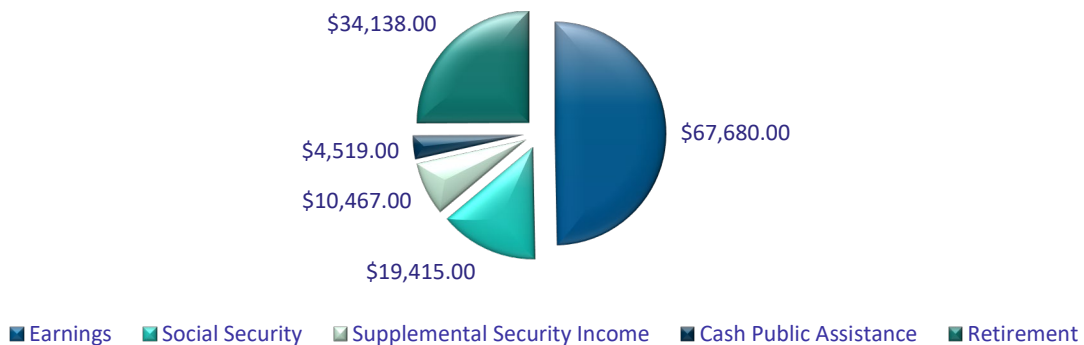
\*Other races not depicted were below 0%

Most of the population 60 years and over have income through Social Security (66%), earnings from employment (54%), and/or retirement (52%). Historically, the population served by FCOA has income below the poverty line which are likely individuals that have social security and cash public assistance as income and accounts for 67% of the population served.

### Percentage that Report This Type of Income



### Average Annual Income





**Mortgage 72%**

**\$1281**



**Rent 28%**

**\$830**



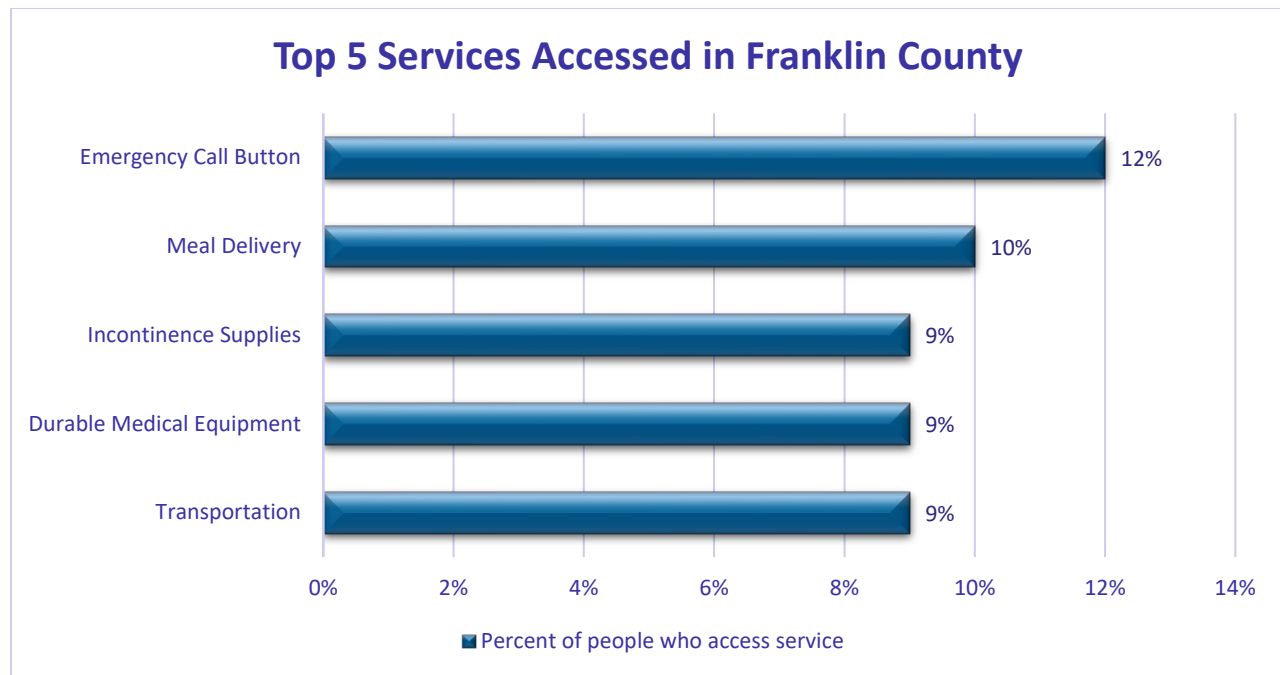
**Employed**

**33%**



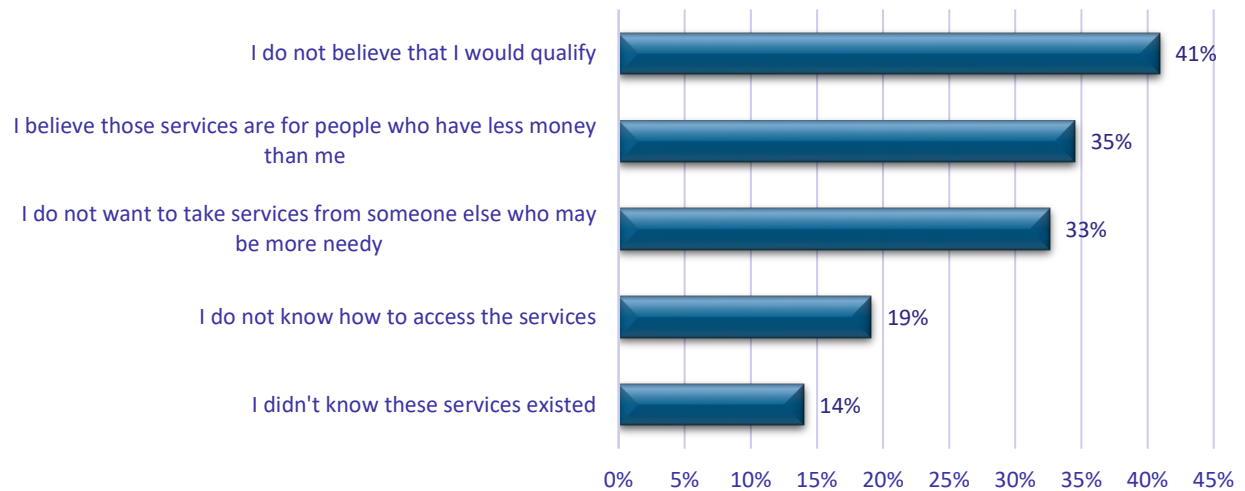
## Services Utilized

The Central Ohio Regional Assessment on Aging was a collaboration between Franklin County Office on Aging (FCOA), OSU's Age Friendly Innovation Center (Age-Friendly), and Central Ohio Area Agency on Aging (COAAA) conducted in 2021. The results provide affirmation for the services being offered at Office on Aging and opportunities to strategically plan and develop initiatives that can enhance the agency's impact in the community. Please see Appendix D for the full assessment results.



Out of the top five reasons the community stated they may not seek services, three are areas that Office on Aging are currently addressing and plan to continue addressing throughout the levy cycle. 41% of community members not receiving services stated that they believe they don't qualify. Historically, the population served by FCOA has income below the poverty line, however all seniors qualify for services with co-pays determined on a sliding fee scale. In addition, the scale is currently being revamped to redetermine co-pay amounts. 33% of the community not receiving services stated that they did not know how to access services or didn't know it existed. Office on Aging is partnering with the remaining Health and Human Services agencies in Franklin County to increase outreach activities and overall presence in the community.

## Top 5 Reasons Services May Not Be Sought



\*Percentage is based on community members not currently receiving any services.

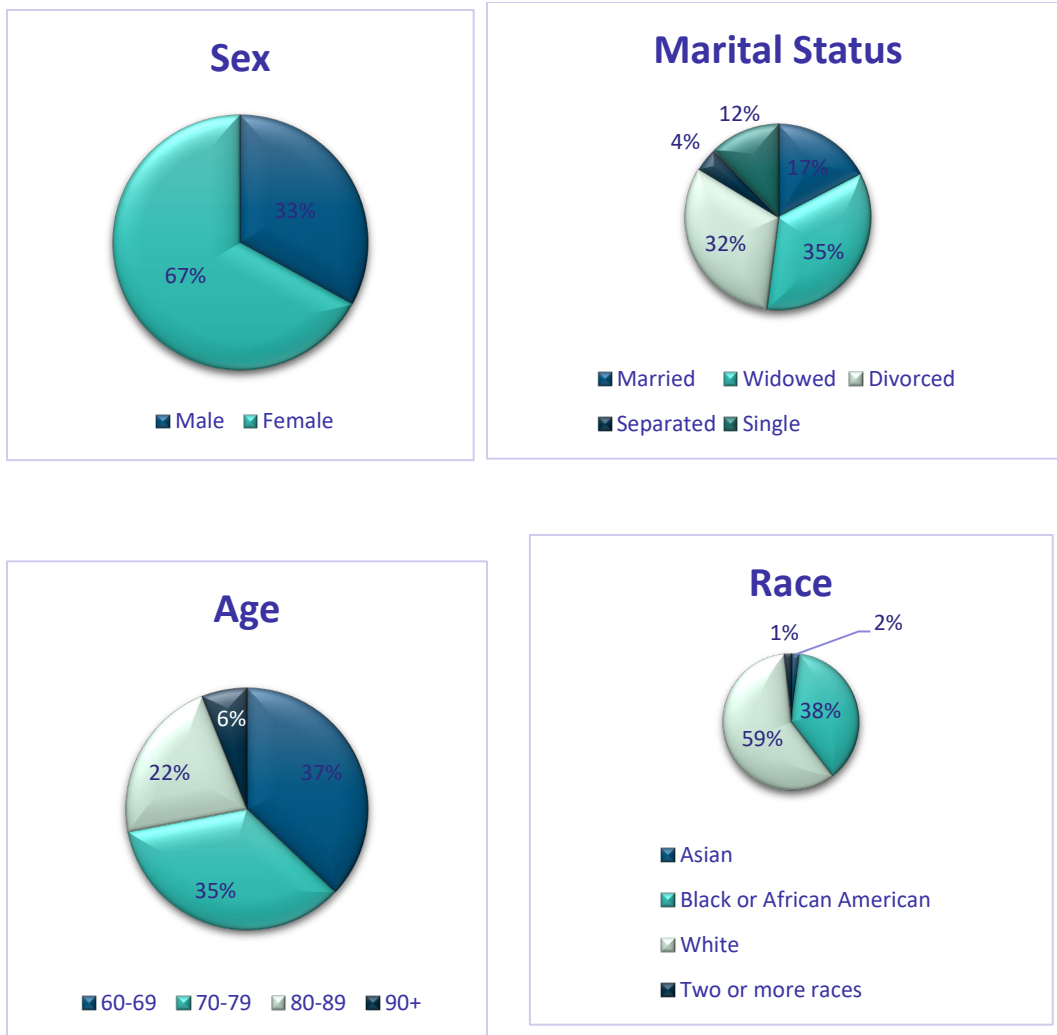
The census shows that 88% of the older population lives alone. Likewise, many Office on Aging clients are widowed, divorced, or single (77%). In addition, the census shows that 52% (majority) of the older population in Franklin County are married, however, Office on Aging only serves 17% of those married. Adult Protective Services data also shows that 23% of neglect and self-neglect reports are widowed, divorced, or single older adults compared to 9% that are married. This information further demonstrates the need for older adults that are living alone, those who are more susceptible to require some level of help to remain independent.



**Male**  
**5,901**

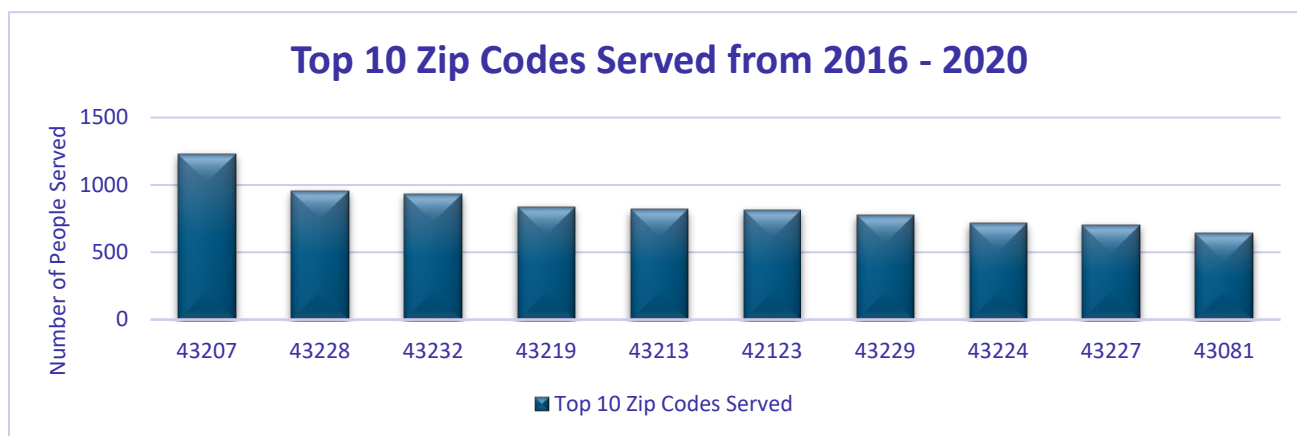


**Female**  
**11,837**



\*Graphs depict clients served from 2016-2020. Race does not depict less than 0%.

The top 10 zip codes served by Office on Aging shows equitable reach on the East, West, North, and South of Central Ohio.



## Service Enrollment

The assessment process typically begins when an individual calls the one-stop number (614) 525-6200. These initial calls are handled by a case manager at FCOA in one of three ways: simple I&R; more complex advocacy; and initial assessment for enrollment into community-based care services provided by the agency.

In addition, there are online mechanisms that community professionals can use to help a senior enter the system. To manage the volume of calls to the front door, FCOA in 2004 implemented an online tool through which professionals in the community could submit referrals on behalf of seniors in need. The referent must indicate that the referral has been discussed with the senior, who has agreed to the referral. This system links the referral to an assigned case manager, who will contact the client and begin the assessment process. If requested, the case manager will also provide follow up to the referent regarding the outcome of the referral. On an average day, the FCSO program receives about 15-20 online referrals.

Additionally, the agency often receives inquiries from the FCOA webpage from the public. There is an internal structure, established in 2020, to distribute referrals to the appropriate department, such as Senior Options or Adult Protective Services. These inquiries are assigned to a case manager for follow up, much like the process for online referrals from professionals. Often, these referrals result in I&R activities, but can lead to assessment and enrollment into FCOA programs. On an average day, the agency receives approximately 3-5 online inquiries from the website.

Whether from an initial phone call or an online referral, the assessment process is consistent. Information gathered over the telephone and verified by a case manager at the home visit includes name; address; phone number; social security number; pertinent

insurance information; emergency contacts; medical condition; services that are currently in place in the home, veterans' status, and Medicare/Medicaid status.

Case managers also collect information concerning the senior's ability to conduct activities of daily living (ADLs), such as bathing and eating and instrumental activities of daily living (IADLs), such as money management and laundry. These assessments help determine current level of functioning. Each service requested has a separate screening tool within the Q Continuum Case Management System designed to assess the need for that service.

In addition, information about monthly income and liquid assets is also collected to place the senior on the sliding-fee scale for the plan of services. Financial information is verified at the in-home assessment.

Four areas are evaluated to determine each participant's individualized care plan, or level of service:

- the participant's demonstrated need for a service FCSO provides
- the participant's (or caregiver's) wishes regarding service
- service availability
- cost of the care plan related to monthly cost cap amounts

The monthly cost cap for services is currently \$1,000 /month per participant. Additional discretion is given to case managers for clients who need 24-hour supervision. These plans of care can expand to \$1,500/month since these care plans often include several days of adult day health service or extended hours of personal care and respite.

Snapshot of Client enrollment levels for the last five years.

Year	Number of Clients Enrolled with Senior Options	Number of Clients Referred to Caregiver Support Program	Number of Clients Referred to Home Repair
2021	10, 853	307 (impacted by COVID)	1,582
2020	10,004	287 (impacted by COVID)	1,144
2019	9,333	527	1,044
2018	9,169	612	1,193
2017	9,254	Not available	1,143

Since the inception of the Senior Options program, there have been a variety of case management levels tailored to client's individual needs. Clients presenting with low intensity needs for case management are traditionally case managed by telephone at the FCOA. Clients with higher intensity needs are provided face to face home visiting case management through the relationship with the COAAA. During this levy cycle, the Senior Options program leadership wanted to develop a systematic method for assessing a client's need for case management and for tracking of risk factors which would indicate an intensive level of case management would be required. In 2020, the team explored various models, and created the program's Client Stratification Tool. The tool contains risk factors and a scale to assess severity of need impacted by the factors. A score is generated, which guides the case manager in determining the appropriate case management level. After a testing phase, the tool was implemented program wide for use in May of 2021.

With this effort came the development of additional levels of case management, both for the FCOA and COAAA. This effort was a significant undertaking and represents a full-scale re-evaluation of the case management services offered to our clients.

Case Management categories are categorized in the following levels:

#### COAAA Case Management Levels

- *Case Managed Monitored*: This level of case management is suitable for clients who score 4 or 5 on the Stratification tool but require home visiting case management.
  - Contact Schedule: At a minimum, quarterly phone calls, one annual home visit for reassessment/reauthorization. Additional contact, either by phone or in person is expected dependent upon client need.
- *Case Managed*: This level is suitable for clients who score 6 or 7 on the Stratification tool, requiring moderately intensive home visiting case management.
  - Contact Schedule: At a minimum, phone contact at 3-month and 9-month points; home visit for 6-month and Annual reassessment/reauthorization. Additional contact, either by phone or in person is expected dependent upon client need.
- *Case Managed Intensive*: This level is appropriate for clients who score higher than 7 on the Stratification tool, requiring intensive face-to-face home visiting case management.
  - Contact Schedule: At a minimum, quarterly home visits, inclusive of reassessment/reauthorizations. Additional contact, either by phone or in person is expected dependent upon client need.
- *Case Managed-Special*: This specialized level of case management is used infrequently. It is reserved for clients who are not suitable for telephone-based case management; require a more intensive level of case management; and may not respond well to in person case management or frequent contacts.
  - Contact Schedule: Varies dependent upon client needs. Tailored to meet client need for intervention and can include telephone contacts and home visits.
- *Case Managed Crisis*: This is a specialized level of case management, designed to be used for short-term use during periods of acute crisis for a client.
  - Contact Schedule: At a minimum, monthly phone contacts, and home visits as required by client need.

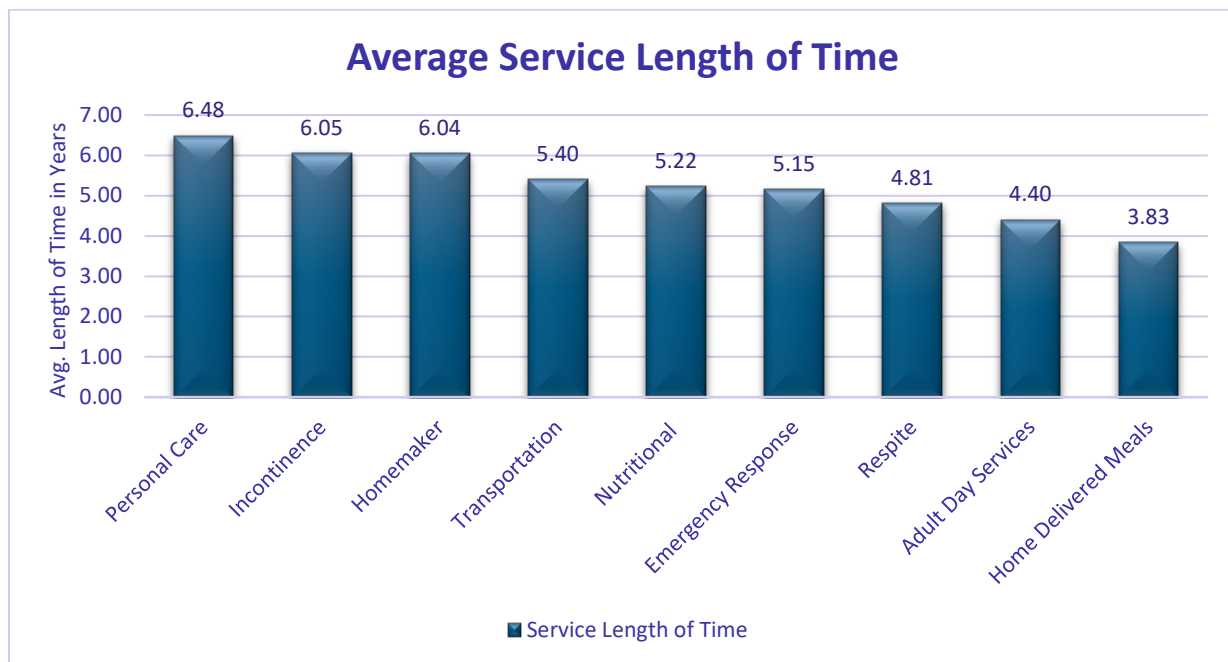
### FCOA Case Management Levels

- *Ongoing Monitored*: This level is appropriate for clients who score a zero on the Stratification Tool, requiring minimal telephone case management.
  - Contact schedule: At a minimum, one contact annually for reassessment/reauthorization.
- *Ongoing*: This level is appropriate for clients who score a 1 – 3 on the Stratification Tool, requiring moderate telephone case management.
  - Contact schedule: At a minimum, two contacts annually for reassessment/reauthorization.
- *Ongoing Intensive*: This level is appropriate for clients who score a 4 – 5 on the Stratification tool, requiring moderately intensive telephone case management.
  - Contact schedule: At a minimum, quarterly contacts inclusive of reassessment/reauthorization.

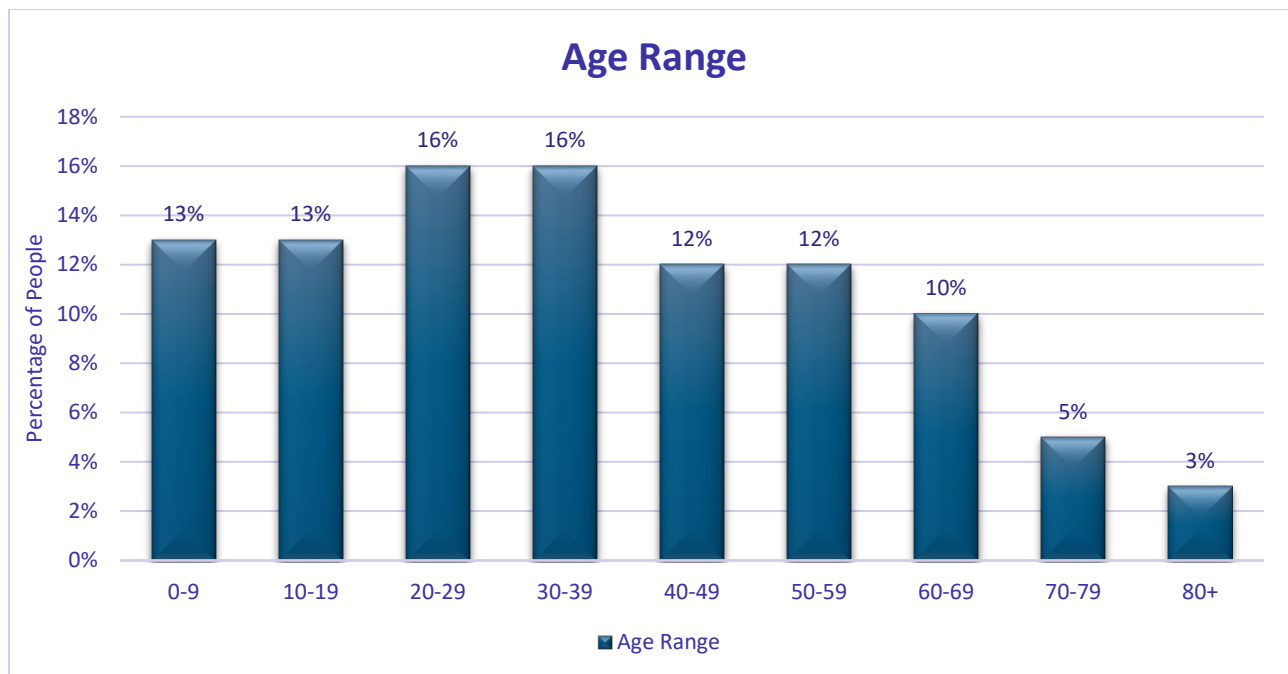


## Length of Service

Office on Aging clients utilize Personal Care Assistance, Incontinence Supplies, and Homemaker services for the longest amount of time on average. The longest length of time clients have been served is 26 years and the shortest amount of time is less than one year.



Those 60 years of age and older make up approximately 18% of the Franklin County population (Specifically .1777...%), according to the U.S. Census Bureau, between 2017 and 2021 there was an average population growth of .93% each year.



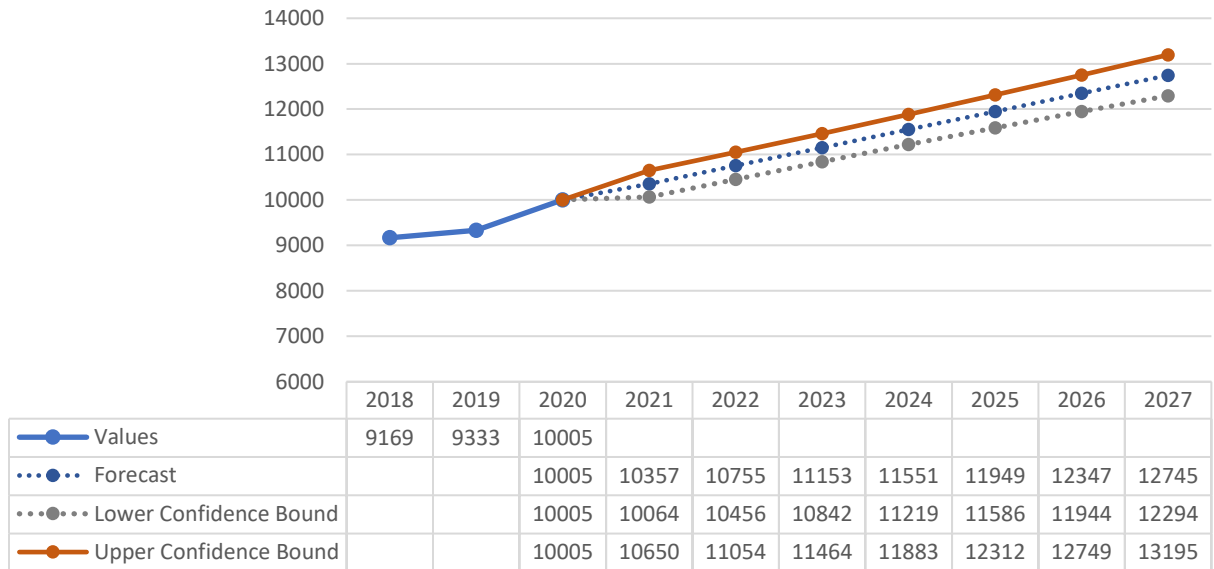
## Projected Clients

Population projections over five-year periods were verified through Ohio Development Services Agency (DSA) and Miami University Scripps Gerontology Center (MU).

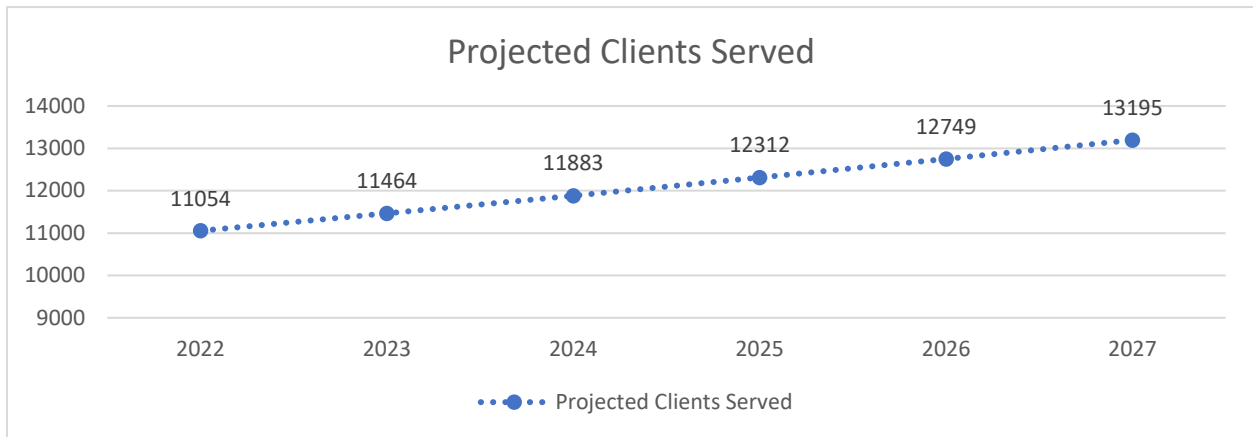
Age	2020	2025	2030
60-64	73760	72920	69280
65-69	58450	66360	66540
70-74	42040	48710	56310
75-79	23040	32640	38150
80-84	13970	18570	22900
85+	22390	22940	27290
<b>DSA Totals</b>	<b>233650</b>	<b>262140</b>	<b>280470</b>
<b>MU Totals (for verification)</b>	<b>233560</b>	<b>262120</b>	<b>280480</b>

Statistical projections consider historical data of clients previously served. It does not consider other contributing factors (e.g., population growth, pandemics, etc.). Considering this, the following projections are made regarding clients served.

## Projected Clients Served from 2022 - 2027



Historically, .04% of the Franklin County population that is 60 years and older requested services from FCOA. If the pattern continued, the projections can be made at the lower confidence bound. However, because FCOA is piloting initiatives such as temporary institutional respite and grocery delivery as well as increasing concentrated focus on information and referrals, the projections are made at the upper confidence bound during the next levy cycle.



Franklin County Office on Aging typically generates approximately \$50 million dollars each year from the levy. Historical data shows that it costs approximately \$3,511 to serve one client on average. Therefore, FCOA has the potential capacity to serve up to 14,239 clients each year. This equates to at least 18% of the senior population in Franklin County based on a projected population of 262,140 in 2025.



Cost to Serve One  
Person

**\$3,511**



Potential  
Capacity to Serve

**14,239**

## Current Levy Cycle

### Impact of COVID-19 Pandemic

Halfway through the current levy cycle the Coronavirus Pandemic hit. During the early stages of the pandemic, it became evident that older age is a risk factor for becoming severely ill with COVID-19. In addition to the virus impacting older adults experiencing a higher risk for severe infection, it also limited access to care for all health conditions and considerable social and economic hardships. Compared to their counterparts in other countries, older adults in the U.S. have suffered the most economically from the COVID-19 pandemic, with more losing a job or exhausting all or most of their savings. Latino/Hispanic and Black older adults in the U.S. have been far more likely to experience significant negative economic consequences than Caucasian adults.

The needs changed for the older residents that FCOA was serving, and the agency's workforce needed to adjust to maintain operations to continue supporting older residents and their families. As a result, FCOA staff had to transition to remote work. The transition to remote work caused a shift in operations. FCOA employees had to adapt to new forms of technology to maintain successful interactions with the older residents and meet their needs. This operational shift included I.T. staff issuing laptops, monitors, and cell phones to all staff and developing a work from home model. With calls coming to the office through the Automatic Call Distribution (ACD) line, a minimum number of staff needed to be in the office each day to receive calls. Still, case managers could successfully do most case management services while working remotely. In July 2021, FCOA employees came back into the office 50% and then transitioned to two days per week in October 2021. Staff continues to go to the office two days per week to align with the Board of Commissioners' policy (Impact of COVID-19 on Older Adults: 2021 International Survey, Commonwealth Fund).

### Home Delivered Meals

Beginning on April 1, 2020, the agency started providing Home Delivered Meals at no cost to the residents of Franklin County. This service ensured that all residents had access to healthy and nutritional meals. As a result of starting this service, we have seen a 15% increase in meal delivery from 2020 to 2021. A zero percent co-pay on meals will be continued to be offered to the residents in 2022.

## Unduplicated count of older adults receiving Home Delivered Meals

Zip Code	2020	2021
43204	204	230
43207	363	431
43224	208	251

## Grant Funding

Grant funding expands the range of assistance available in our senior community and fills gaps in services. The agency provides funding to thirty-two grant-funded partners and supports forty-six grant-funded programs within government and non-profit community organizations. Supported funding includes legal aid, housing assistance, hearing assessments, and nursing clinics. During the pandemic, many older adults were socially isolated in their homes. Franklin County residents could not participate in community events due to the pandemic. Once reopened, residents did not feel comfortable attending due to concerns of COVID-19. The agency partnered with Spectrum Cable on technology grants to fund four pilot projects to get technology into the hands of older adults.

Year	Total
2018	\$3,388,393
2019	\$3,506,416
2020	\$3,647,872
2021	\$3,652,444

## Minor Home Repairs and Modifications

Performance Measure	2018	2019	2020	2021
Clients Served	682	693	638	989
Repairs Completed	2,107	2,281	2,037	1722
Cost of Repairs	\$1,124,021	\$1,150,005	\$1,246,584	\$1,810,859

In 2021, the Home Repair Department modified how referrals are made. There is a faster response time for Home Repair Inspectors and accepting referrals, mainly level 1 jobs and balancing the level 2 and 3 work. Definition for each priority are as follows:

- **Level 1:** High Priority, such as the furnace, AC, stairlift, major plumbing issues, electric issues, wheelchair ramps.

- **Level 2:** Medium Priority, such as grab bars, railings, minor leak, or drip of the showerhead.
- **Level 3:** Low Priority, such as gutters, a window with a draft, or a bedroom door needing hinges.

A revised tracking sheet has been implemented to collect comprehensive information on the resident, service request, and order tracking.

The Home Repair Department has developed a dashboard that focuses on zip codes and other domains mentioned. This dashboard can show real-time status repairs being completed, the number of priority cases by levels, the reason for denial/approval, completion of jobs by each vendor, and clients served by zip codes. The Home Repair Dashboard can also show individual stats by each home repair inspector. The Home Repair Department has since added an area for home repair financials as well.

## Caregiver Support Program

“As our residents age, caregivers become vital to the support of older adults. Nationally, 53 million people fill the role of an unpaid family caregiver, providing an estimated \$470 billion worth of free care. Many caregivers are exhausted physically, emotionally, and financially” (*Wall Street Journal, December 30, 2021*).

The Family Caregiver Support Program, supported through Title III-E funding, provides support and services to families to enhance and restore independence to the resident and the caregiver. In 2021, the Caregiver Support Program provided services to 307 families.

Caregiver demographics included:

- 74% female, 26% male
- 38% of caregivers were under the age of 60
- 23% between the ages 60 to 69 years
- 28% between the ages of 70 and 79
- 11%, 80 years and older

Services offered included:

- Adult Day Services
- Durable Medical Equipment
- Institutional Respite in a Licensed Facility

- In-home Respite Services
- Caregiver Counseling

## Kinship Support Program

The Kinship Support Program began in February 2021 through the Caregiver Support Grant. The program supports the 55 and older population caring full-time for minor children who are not biological parents.

- A total of 52 families were served in 2021, with 88% led by female kinship caregivers and 12% male kinship caregivers.
- A total of 19 kinship care providers are also engaged and receiving Senior Options case management support.
- The highest age demographic of kinship caregivers was between 60 and 64, with 29%.
- The program can assist with supplemental services such as appliances, diapers/pull-ups, rent assistance, and utility assistance once a calendar year. The services are available regardless of the income or asset levels of the kinship caregiver.

## Collaboration and Outreach

Based on the focus group responses from the Central Ohio Regional Assessment of Aging and the Community Needs Assessment, the focus increased awareness of the agency and the needed services.

In 2021, Community Collaborations included:

- Catholic Social Services Foster Grandparent Advisory Council
- Dedicated Senior Medical Center
- Franklin County Public Health CHAT Groups
- Franklin County Suicide Prevention Coalition
- Ohio Grandparents Kinship Coalition
- Ohio Kinship & Navigator Regional Advisory Council Meetings
- Family Stabilization Unit

FCOA collaborated with COAAA and the Age-Friendly Innovation Center to complete the Central Ohio Regional Assessment of Aging Survey. Feedback from the survey has guided FCOA in developing a strategic plan for the next three to five years.



Critical findings included:

- Transportation
- Community and Technology
- Community Resources
- Food Needs & Services
- Housing

The Franklin County Board of Commissioner (BOC) health and human service (HHS) agencies are in collaboration to develop a “One Door” service model strategy for residents and families. Aligning the HHS goals, resources, and programs will allow for a cross agency implementation. Using a holistic person or family centered approach to administer program access and services is expected to address all of the needs residents and families at the individual or household level. Part of the strategy for the “One Door” service model will include streamlined access, reduced application fatigue, and eliminating challenges faced when residents and families need to interface with multiple agencies. Increased shared awareness of resources and utilizing one another for best practices for HHS staff will contribute the ability to provide improved outcomes for Franklin County, Ohio

## HSLRC Recommendations

Franklin County Office on Aging (FCOA) has made many innovative strides with business operations. This includes, but is not limited to:

- Restructuring positions for efficiency and effectiveness
- Improving the agency’s website, including the addition of online payments
- Developing and tracking impactful measures of success
- Creating leadership training programs to ensure employees maintain current and strong skillsets to serve the community

To see a list of all the initiatives and improvements accomplished through the Operational Review, see Appendix E.

The Franklin County Office on Aging has provided home and community-based services to older adults since 1991, before the inception of the Senior Services Levy in 1993. The FCSO program model aligns with the home and community-based waiver programs funded by the state via HCBS Home and Community Based Services (HCBS) 1915(c) waivers. The goal of these programs is to provide person-centered care in a person's home, supporting safe and independent aging and delaying the need for an institutional

level of care. HCBS and supports are more cost-effective than Assisted Living or Long-Term Care facility placement, and older adults prefer to age in place, in their own home, in their community.

Supporting a client-centered care planning approach is critical to successful HCBS programming. Since 1993, the FCSO program has enhanced service provision by expanding eligibility criteria and services available for older adults, such as adding non-medical or "expanded" transportation services to assist older adults in meeting their social and daily living needs in the community. The program also altered the eligibility criteria for respite care to best serve non-residential caregivers. Also, it has added escort transportation to enhance independence for seniors who need transportation and light assistance to fulfill their daily living tasks, such as grocery shopping.

Consistent evaluation of clients' service needs is managed through routine Community Needs Assessments, often pairing with other aging partners such as the Central Ohio Area Agency on Aging and Age-Friendly Columbus and Franklin County. These projects allow FCOA to hear from program and community consumers and provide a platform for continued evaluation of service needs. The program, on the other hand, can enhance service offerings to best serve clients and their caregivers.

Close collaboration with aging partners and funders provides a seamless transition to programs offering more intensive care plans with higher care plan cost limits. This collaboration facilitates enrollment into these programs when the client needs a higher level of care, significantly more efficient, cost-effective for the Senior Services Levy, and less stressful for the clients and caregivers.

Dedicated case managers offer the client a single point of contact for service and psycho-social unmet needs. Assessing a client's case management needs allows the program to reduce costly staff time allocation from mostly independent clients and reserve those resources for clients who present with multiple moderate to high-risk factors, warranting a higher level of case management assignment. A dedicated case manager provides continuity of care, higher satisfaction for clients, and reduces the instances that a client must repeatedly "share their story" with a generalized or pooled approach to case management, which the literature shows is not recommended for older adult or disabled populations.

With the goal of the program to support aging in place, there is particular focus on program disenrollment data. The agency has established a benchmark for achieving 15% or fewer participant disenrollment's due to placement in a nursing home. The FCOA recognizes that long-term placements are at times the best/safest option for the

client; however, the agency monitors rates of disenrollment for this reason and will continue to evaluate whether alternative interventions could have further delayed the long-term care placement.

Franklin County Office on Aging (FCOA) partnered with Central Ohio Area Agency on Aging (COAAA) and OSU's Age-Friendly Innovation Center (AFIC) to conduct a regional community needs assessment for the aging population. The assessment included a representative sample of mail, phone, and in-person surveys and a convenience sample of online surveys. Focus groups were conducted, including the following priority populations: low income, severe disabilities, LGBTQ+, limited English speaking, African American men fifty-five and older, and religiously observant people of color. FCOA grant awarded organizations and Franklin County Job and Family Services (JFS) also helped with the project's success. The Central Ohio Regional Assessment on Aging helped inform projections, future performance measures, and focus areas on meeting the growing and changing needs of the older population in Franklin County. The community needs assessment report can be found in Appendix D.

The demand for homemaker services has increased during the levy period; however, the availability of homemaker services has decreased.

The loss of homemaker providers during the levy period caused FCOA to look at this service strategically. For 2022, FCOA has collaborated with other agencies on new solutions to deliver services to the aging community while stewarding the resources provided through the community-approved levy. Solutions include, but are not limited to:

- Partnering with Franklin County Job and Family Services (FCJFS) and Veteran Services Commission (VSC) on a Cooperative Transportation Contract allows each agency to share an extensive network of transportation businesses to serve each agency's clients.
- Partnering with Franklin County Children Services (FCCS) on a contract with Mack Mattress, which allows bulk purchasing of mattresses.
- Partnering with Central Ohio Area Agency on Aging (COAAA) and OSU's Age-Friendly Innovation Center (AFIC) on the Community Needs Assessment and Franklin County Job and Family Services (FCJFS) contract with Advocacy & Communication Solutions, Inc. to conduct focus groups. This collaboration saved approximately \$100,000.
- Qualifying home repair contractors under the Cooperative Residential Services Contract allows for improved processes for contractor quotes and ensures the best and lowest contractor is awarded.

- Partnering with Franklin County Treasurer’s Office on their online payment system contract to utilize Point & Pay system for processing online payments from clients.
- Partnering with Veteran Services Commission (VSC) to provide Emergency Response Services to veterans sixty years and older allows for VSC reimbursement.

Providing comprehensive care to older adults to age in place requires many agencies to work together, and FCOA continues to increase these collaborations. One aspect that requires increased collaboration is our information and referral process supported by LSS 211 Central Ohio, formally known as HandsOn Central Ohio. Over 70,000 calls are received by FCOA annually, and many callers may not receive or require direct services, only information, and referral (I & R). "Every Senior Every Day" is the agency's focus regardless of providing direct services.

Information, Referral, and Advocacy Data:

Total Calls	2018 – 69,110
	2019 – 70, 002
	2020 – 58,966
	2021 – 71,114
Residents receiving	2018 – 9,169
Case Management	2019 – 9,332
	2020 – 10,004
	2021 – 10,853
Callers served	2018 - 8,238
through I&R	2019 - 7,455
	2020 - 7,953
	2021 -7,852

Over the next five years, FCOA will move to a new case management system that can increase linkage, collaboration, and collect data on services being provided and referrals made to community partners. I & R is an additional avenue to identify gaps in service needed for older adults. Other resources for identifying gaps include feedback from the community needs assessment and aligning FCOA's performance measures to social determinants of health. As this information is collected, FCOA plans to develop initiatives and promote pilot programming for new Service Options through grant dollars.

Social Determinants of Health have a significant impact on an individual's health, well-being, and quality of life and contribute to wide health disparities and inequities (Healthy People 2030). FCOA plans to offer five pilot programs beginning in 2023 and can determine which new services should grow within the agency based on the pilot outcomes. Focus areas for the pilots include, but are not limited, to senior housing, computer literacy, digital equity, nutrition, and transportation.

Another collaboration being strengthened is with Medicare and Medicaid. Most FCOA's clients are at or below the poverty line and qualify for Medicaid and/or Medicare insurance. Services offered through FCOA are either not covered by insurance or after insurance has been fully utilized. FCOA has collaborated with the medical community to overcome this challenge, including partnerships with three local hospital systems. FCOA's mission is to help older adults maintain their independence in their homes; however, there are times when older adults have been temporarily admitted into hospitals and care facilities. FCOA ensures safe discharge when returning home from these facilities to provide continual support to our residents.

FCOA also coordinates with the Central Ohio Hospital Council (COHC), a forum for area hospitals and community stakeholders to collaborate to improve the region's quality, value, equity, and accessibility of health care. As we move forward with discussions regarding enhancing patient outcomes and savings related to the anticipated reduction in hospital readmission rates for FCOA clients, it is critically important we work with the COHC. The Hospital Readmission Reduction Program (HRRP) is a Medicare value-based purchasing program that encourages hospitals to improve communication and care coordination to engage patients and caregivers in discharge plans better and, in turn, reduce avoidable readmissions. Value-based programs reward health care providers with incentive payments for the quality of care they give to people with Medicare. These programs are part of the larger quality strategy to reform how health care is delivered and paid for. Value-based programs also support, better care for individuals, better health for populations and lower cost.

Many older adults have care plans in place when they're first released from the hospital, but those are often short-term. Once short-term services are completed, many older adults need additional support. This is where FCOA starts assisting in ensuring services are available and in place.

In Ohio, 30.9% of Medicaid covers low-income older adults that are 65 years of age and older, blind, or have a disability. In the most recent Health Policy Institute of Ohio (HPIO) analysis of the Ohio Department of Medicaid caseload report (April 2021), 16% of the enrollment was for aged, blind, and disabled (ABD) adults and accounted for 45%

of the expenditures. This is an opportunity to focus on population health management in specific zip codes.

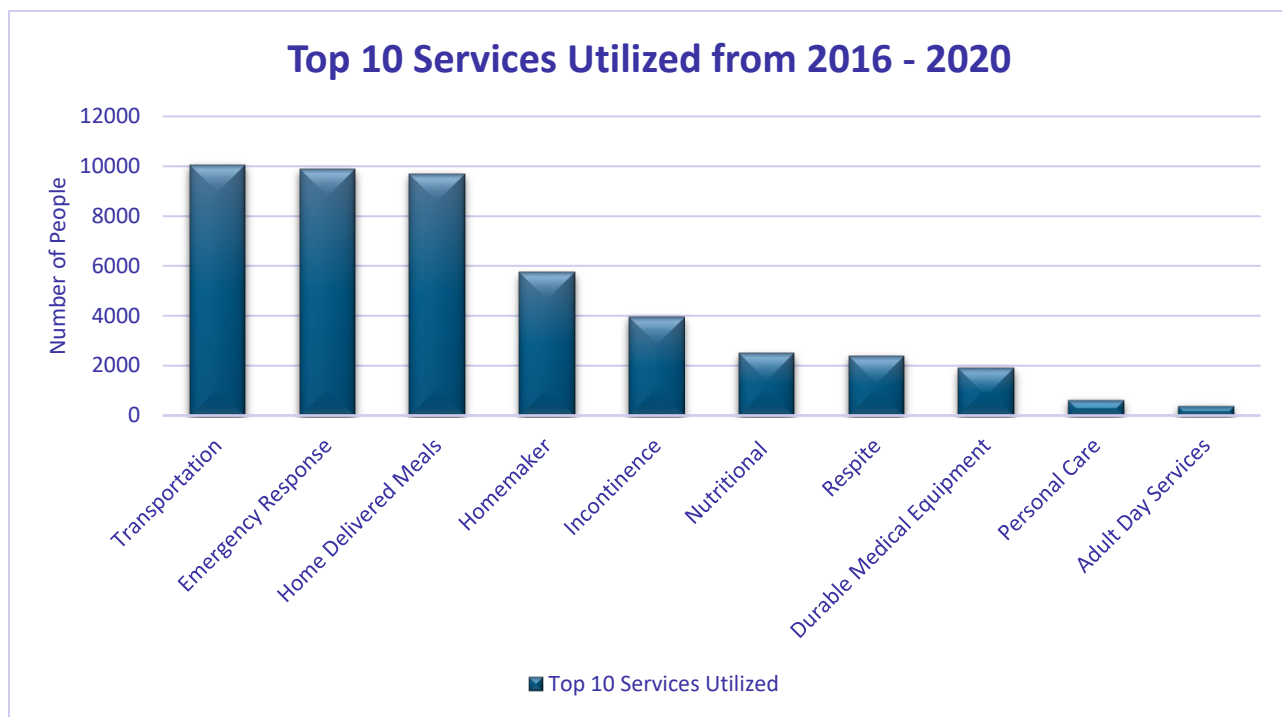
In Franklin County, many community care providers offer a value-based model and Patient Centered Medical Homes (PCMH). Dedicated Senior Medical Centers has three locations serving seniors on the north and west side of Columbus and the City of Whitehall. They serve many older adults living in zip codes most impacted by social determinants of health and where FCOA receives the highest number of referrals. FCOA started conversations with community-based health providers on collaborating more intentionally to serve the older adult better. This is an opportunity to work together for collaborative funding.

Community Health Centers provide primary care and serve many with Medicaid and Medicare Insurance. The majority of Community Health Centers are PCMH's, a care delivery model where patient treatment is coordinated through their primary care physician to ensure they receive the necessary care. This is an opportunity for FCOA to work collaboratively and look for funding opportunities with PCMH's. FCOA brings the expertise of serving older adults to complement the primary care provided. Preliminary discussions have been held with Heart of Ohio Health Centers on collaborating better to help older adults in Franklin County.

The Franklin County Office on Aging is one of four agencies within of the Health and Human Services collaboration, which integrates county services over the next five years to improve Franklin County residents' engagement, services, and outcomes. This increased collaboration with other county agencies will assist in identifying funding resources and partnerships.

## Performance Measures

Franklin County Office on Aging contracted with 97 businesses that partnered in serving the older population. 61 of those businesses (63%) were women or minority owned small businesses. Transportation, Emergency Response Systems, and Home Delivered Meals are the most utilized services from 2016-2020.



## Determining Success

The agency determines success by the number of clients served which is a total of 17,771 unique individuals between 2016 and 2020.

SERVICE UTILIZATION					
Service	2016	2017	2018	2019	2020
<b>Transportation</b>					
Number Served	5,037	5,224	5,361	5,557	5,481
Services Provided (Miles Traveled)	2,115,654	2,035,758	2,011,356	1,955,202	1,239,704
Annual Cost	\$7,794,742	\$7,219,465	\$7,129,241	\$6,936,155	\$4,294,662
<b>Escort Transportation</b>					
Number Served	N/A	N/A	590	622	581
Services Provided (Hours)	N/A	N/A	5,858	5,953	4,789
Annual Cost	N/A	N/A	\$203,539	\$203,334	\$181,361
<b>Home Delivered Meals</b>					
Number Served	3,642	3,842	3,809	3,883	5,069
Services Provided (# Meals)	651,907	673,446	681,998	710,385	922,074
Annual Cost	\$4,374,726	\$4,609,304	\$4,808,517	\$5,023,628	\$7,371,160
<b>Homemaker</b>					
Number Served	3,019	2,923	2,947	2,903	2,625
Services Provided (Hours)	116,789	102,755	105,185	102,517	85,882
Annual Cost	\$2,547,195	\$2,071,178	\$2,361,177	\$2,304,349	\$1,769,891
<b>Personal Care/Respite Care</b>					
Number Served	1,068	1,060	972	991	984
Services Provided (Hours)	117,318	111,116	98,906	95,785	93,628
Annual Cost	\$2,104,762	\$2,322,126	\$2,255,448	\$2,184,384	\$1,656,706
<b>Adult Day Health</b>					
Number Served	199	185	164	154	92
Services Provided (Days)	14,202	12,590	9,810	8,268	1,982
Annual Cost	\$656,398	\$629,711	\$515,851	\$434,717	\$130,536
<b>Emergency Response Systems</b>					
Number Served	5,054	5,067	5,054	5,232	5,270
Services Provided (ERS Units)	49,146	43,628	44,218	44,302	12,572
Annual Cost	\$1,332,800	\$1,178,474	\$1,279,843	\$1,368,754	\$1,638,295
<b>Incontinence Supplies</b>					
Number Served	1,932	1,935	2,031	2,107	2,184
Services Provided (# Products)	47,173	48,405	52,840	55,709	60,146
Annual Cost	\$902,419	\$885,344	\$930,991	\$999,250	\$1,094,353
<b>Nutritional Supplements</b>					
Number Served	1,111	1,101	1,121	1,150	1,175
Services Provided (# Supple.)	11,598	11,446	11,979	12,306	12,369
Annual Cost	\$379,882	\$466,429	\$489,185	\$501,297	\$527,476
<b>Durable Medical Equipment</b>					
Number Served	524	528	482	402	457
Services Provided (DME Items)	674	680	656	524	549
Annual Cost	\$39,452	\$42,160	\$44,201	\$34,648	\$47,488



## Agency Impact Snapshot

Although Office on Aging offers over 20 different services, the following depiction is a snapshot of how services impacted the community and clients served during the last levy cycle.



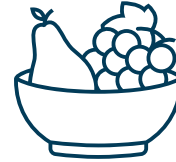
**Hours of  
Homemaking**

**513,128**



**Miles traveled  
Transportation**

**9,357,674**



**Number of Nutritional  
Supplements**

**59,698**



**Number of Meals  
Delivered**

**3,639,810**



**Number of Durable  
Medical Equipment**

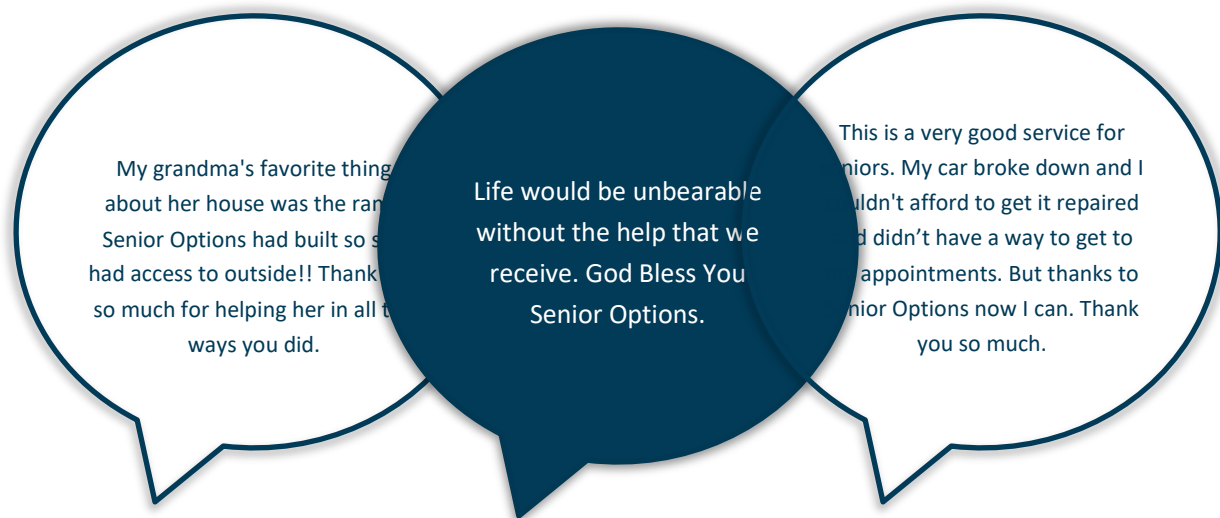
**3,083**



**Seniors Served with  
Community Grants**

**45,805**

The agency also determines success through feedback received from clients through satisfaction surveys. A sample of clients are surveyed annually. Survey questions include: My Senior Options services help me meet my daily needs, My Senior Options services help me maintain my independence, My Senior Options services have improved my quality of life, and My Senior Options case manager does a good job for me.



FCOA established 13 performance measures connected to the Senior Options levy. Although the pandemic which occurred in 2020 slightly affected progress toward some goals, the agency was able to meet many critical performance measures.

Performance Measures	2016	2017	2018	2019	2020	Goal
1. Number of calls received by Senior Options program	N/A	N/A	69,110	70,002	58,966	70,000
2. Number of seniors in total average monthly caseload	7,216	7,205	7,245	7,407	7,795	7,650
3. Number of I&R, Advocacy, and Crisis Interventions provided by a Case Manager	12,090	11,085	9,688	8,885	7,953	10,000
4. Number of new seniors coming to Senior Options for services per month	270	294	296	316	284	365
5. Percent of seniors served who report satisfaction with their case manager	94%	93%	93%	93%	100%	93%
6. Number of seniors requesting service	9,473	9,651	7,968	8,115	9,883	10,500
7. Number of weeks between initial assessment and assignment of in-home assessment	7	3	3	3	2	2
8. Number of older adults residing in concentrated poverty areas of Franklin County who gained access to nutritious food	N/A	N/A	N/A	773	1058	935
9. Number of seniors enrolled in Senior Options	9,068	9,254	9,169	9169	10005	11,080
10. Percent of seniors served who report services helped preserve their independence	94%	93%	94%	93%	92%	94%
11. Number of minor home repairs requested	1,847	2,092	2,107	2,281	2,037	2,200
12. Number of minor home repairs provided	1,847	2,092	2,107	2,281	2,037	2,200
13. Percent of minor home repairs provided/completed within time standards	100%	100%	100%	100%	100%	100%

The agency plans to establish new performance measures that are aligned with the social determinants of health identified through the Center for Disease Control and Prevention (CDC), Franklin County Public Health, and Franklin County's Rise Together Blueprint for Reducing Poverty.

Social Determinant	Franklin County Public Health	Rise Together Blueprint	Program	Performance Measures
Economic Stability	Housing and Neighborhoods: Increased affordability of housing	Housing: Enabling more families at or near poverty to afford quality housing, reducing the percentage of housing-cost burdened families.	Grants	1. Provide rental, mortgage, or utility assistance to 1,500 Seniors through grantee program.
Economic Stability	Economic Stability: Access to long term employment and Access to livable wages	Jobs: Improving and increasing the delivery of supportive services for individuals to access employment.	Grants	2. 2000 jobs secured through the grantee program to Seniors.
Economic Stability	Education: Access to adult education and job training	Jobs: Improving and increasing the delivery of supportive services for individuals to access employment.	Grants	3. 5% (6191) of Seniors working in Franklin County received employment training through grantee programs.
Social and Community Context	Social and Community Connections: Social Cohesion	Youth: Expand the use of home visiting programs for families at or near poverty.	Grants	4. 50 Seniors actively participating in intergenerational program. 5. 90% of Seniors and youth participating in intergenerational program report that it was impactful.
Neighborhood and Built Environment	Housing and Neighborhoods: Increased quality of safe housing	Housing: Increasing the supply of and equitable opportunity to access quality housing.	Home Repair	6. 30% of home repairs are emergency and priority level.

Neighborhood and Built Environment	Housing and Neighborhoods: Improved environmental conditions	Housing: Increasing the financial resources available to implement housing supports	Home Repair	7. Increase clients receiving home repairs by 15%.
Neighborhood and Built Environment	Food and Nutrition: Regular and consistent access to healthy foods	Health: Improve overall environmental conditions in neighborhoods of concentrated poverty so that they are safe, walkable, and have easy access to basic resources including access to nutritious food.	Senior Options	8. Provide 1.5 million meals and nutritional supplements to Seniors.
Neighborhood and Built Environment	Transportation: Access to reliable transportation	Job: Create innovative transportation options connecting neighborhoods of concentrated poverty to jobs by including stronger partnerships with employers and economic development planners.	Senior Options	9. 17,000 transportation trips completed for Seniors. 10. 6500 Seniors receiving transportation service. 11. 90% clients satisfied with transportation service.

## Business Environment

There are several challenges expected to present during the next levy cycle and opportunities for change will be necessary to mitigate. It is assumed that the previously discussed collaborations within the community will be retained.

### Worker Shortage

In late 2014, FCSO started to experience a slow response from our contracted agencies in accepting new referrals for homemaking, personal care, and respite services. In 2020, the COVID-19 Pandemic subsequently intensified the shortage in direct care workers as many experienced layoffs, lack of adequate childcare, and the fear of the COVID-19 virus. Consequently, the demand for home healthcare services is even greater now than before as the number of people able or willing to do the work is far less than the total number of older adults in need of services. Direct care workers have a tough job accompanied by low wages, endure physical labor with little room for advancement or the opportunity to earn more. In addition to the low pay, the jobs lack fringe benefits such as healthcare, paid time off, travel expenses, and more. The difficulty of the work and low pay leads to high turnover and low recruitment for our contracted agencies. As a result, workers compete for control over their schedules by choosing to serve clients with larger care plan amounts, ongoing weekly schedules, and minimal travel time. In addition, FCSO must compete with other funding sources who offer these larger care plans.

Many of our agencies remain loyal to us and have become creative with their incentives to recruit and retain their home health aides. The FCSO home care contract will be re-bid in 2022, and it will be necessary to contract with more agencies to accommodate our growing demand for these services. It is anticipated that this shortage will remain during the next levy cycle as the population of older adults is continuously increasing and many direct care workers have opted not to return to this line of work and have found higher paying employment opportunities in other industries such as retail and fast food.

### Affordable Housing

Affordable and accessible housing is in short supply for Seniors in Franklin County. Franklin County residents are cost burdened, spending on average more than half of their total income on housing costs. Older adults are likely to sacrifice other necessities such as food and medication in the attempt to meet the demand of their housing expenses. This sacrifice often leads to more seniors needing emergency medical care

as the result of malnutrition or lack of proper medication. Increasing rent, mortgage cost, and the lack of resources such as a savings is forcing residents who have insufficient or fixed incomes out of their homes when met with increasing housing expenses or other unforeseen expenses. The number of seniors who will experience homelessness is expected to double by 2030 and the number of seniors living in poverty is also expected to increase significantly. In addition to the interventions FCSO can provide that allow seniors the ability to age in place in their own homes, there is an anticipated increase in the need to provide seniors with interventions that allow for housing affordability. These interventions may include housing navigation, as many seniors are not able to navigate systems on their own when met with the need to locate affordable housing or affordable housing resources.

## Caregiver and Kinship Care Needs

Franklin County's growing population of older adults, direct care worker shortages, and other barriers presented by the COVID-19 pandemic has increased the need for non-paid family caregivers to provide direct care for their older adult relatives. This has caused a dramatic increase in the demand for respite, durable medical equipment, and mental health services to allow caregivers the opportunity to have the ability to balance their lives. Many non-paid family caregivers are full time employees with many competing responsibilities; thus, they require the additional supports.

Due to the impact of the opioid crisis, Franklin County has also experienced a significant increase in the number of older adults providing full time custody and care for their minor relatives. In some cases, the multigenerational family household includes great-grandparents as the custodial caregivers for minor children.

## Impact of the COVID-19 Pandemic

The need to maintain social distancing measures for older adults has increased the number who are homebound. This prevents older adults from being able to engage in social and physical activity outside of the home. Thus, the digital divide has become more prevalent as a challenge as lack of access or inability to pay for broadband, lack of technology such as computers or tablets, and access to training are some of the barrier's older adults experienced. As a result, some older adults will or have experienced a decline in wellbeing due to social isolation. Interruption to routines, such as exercise may lead to a decrease in muscle strength and increased instances of falls and fall injury due to deconditioning or physical decline. Decreased social or civic engagement opportunities allows for a reduction in cognitive stimulation and rapid decline in mental health decline.

The full impact the COVID 19 pandemic has had on older adults has yet to be fully understood and as well as what impact future variants may have. But what we have learned is that there is a need to increase virtual interventions and improve technology access such as equipment, internet accessibility, and training for older adults.

Allegations of abuse in a skilled licensed nursing facility are handled by the Ohio Department of Health. The Franklin County Office on Aging through the Adult Protective Services department has jurisdiction to investigate allegations of Abuse, Neglect, Exploitation, and self-neglect on adults 60 and older living in the community or an independent, non-licensed facilities.



In 2018, Ohio law expanded the definition of elder abuse and the groups who are mandated reporters.

There are 7 different types of elderly abuse:

1. Physical Abuse
2. Emotional Abuse
3. Sexual Abuse
4. Neglect
5. Self-Neglect
6. Exploitation
7. Abandonment

Mandated reporters now include:

- Health Professionals (e.g., nurses, physicians, home health providers)
- EMS, Firefighters and First Responders
- Social Services (e.g., social workers, counselors, mental health professionals)
- Employees of the Health Departments
- Legal Professionals (e.g., attorneys)
- Law Enforcement (e.g., police and sheriff)
- Clergy
- Pharmacists
- Financial Institutions
- Building Inspectors
- Certified Public Accountants
- Real Estate Brokers or Agents
- Notary Publics
- Investment Advisors
- Accredited Financial Planners

## Esther's Law

Esther's Law was signed into law by Governor Mike DeWine and goes into effect on March 23, 2022. The law permits cameras and other electronic monitoring devices to be installed by residents or their families or guardians inside a resident's room. The law requires permission to be given by the resident or family member or guardian and any possible roommates. In addition to consent being given, a sign alerting people of a recording in process must also be posted. The cameras are one of the many steps families can take to ensure patients' safety beyond cameras in the room.

## Senate Bill 22

Senate Bill 22 went into effect in June 2021 and blocks the health department from issuing any kind of stay-at-home order like those of the early weeks of the COVID pandemic. It also allows the 132 lawmakers in the General Assembly to vote down health orders or emergency declarations without needing the governor's approval. Another impact of SB 22 is that it limits the authority of the Franklin County Public Health Department on situations of code enforcement. Hoarding cases have risen within Franklin County and the FCOA worked in partnership with the Franklin County Public Health Department to ensure older adults lived in a safe setting. This included referrals to Adult Protective Services from the department on hoarding situations and development of a plan for the older adult to remain safely in their home. Franklin County Public Health is still able to make referrals to APS, but they have no authority with enforcement of a clean-up plan on the inside of a dwelling unit.

## Housing Evictions

The CDC Eviction moratorium ended on Thursday, August 26, 2021. Assistance is available for those behind on rent in all 88 counties, for up to 12 months of missed rent and 3 months of future rent. In Franklin County this is operated through IMPACT Community Action Agency (IMPACT). To apply, visit IMPACT ([impacthopefund.org](https://impacthopefund.org)) or by calling 614-252-2799.

## Rent Escrow Program

The Rent Escrow Program through Franklin County Municipal Court permits a tenant with complaints regarding housing conditions to deposit rent due into an escrow account until the dispute between the landlord and tenant is resolved. The escrow is a legal process by which an individual can pay their rent to the Court instead of paying it to their landlord.

Mediation is a process where a landlord and a tenant can try to resolve a dispute with the assistance of a neutral third-party (a mediator). Mediation can be completed in-person, by phone, or online. Participants can discuss repairs and other issues relating to the landlord-tenant relationship. If the parties reach an agreement in mediation, then the mediator can document the agreement in writing. If the Rent Escrow case is not resolved in mediation, then the Rent Escrow process will continue, and a court hearing scheduled.

## Operational Needs

### Case Management System Replacement

FCOA aims to replacing the existing case management system, Q Continuum System, which has been in operation by FCOA, COAAA, and all home care and transportation providers since 2000. After documenting the agency's business processes and performing an extensive gap analysis of current state and future state of a case management system, it was determined Q Continuum Systems, nor it's upgrade solution, met the agency's business requirements and evolving needs of older adults and their families. Approximately 45% of system quality areas were found to be a "GAP" and not met satisfactorily. The new solution, Enterprise Case Management (ECM), has been identified as the solution to further assess and interact with older adults, facilitate daily operations to support our client's needs, and ensure quality delivery of community-based services. Implementing ECM will increase the productivity and efficiency of FCOA staff, thus growing support for older adults and their families. This web-based solution will also possess up-to-date technology, user-friendly interfaces and address our current business requirements and further enhancements. New features with ECM include, but are not limited to, virtual meeting functionality, an enhanced interactive voice response system, client portal, improved vendor support, SMS functionality, improved geographic and socioeconomic analysis, improved document and file management system, and integration with applications such as Microsoft Office 365.

### Data Center Migration

In 2020, FCOA partnered with the Franklin County Data Center (FCDC) to have a technology assessment to review existing technology utilized by the FCOA. The assessment strived to identify areas of risk, evaluate agency tools and services, and identify gaps where industry standards were not observed. As a result of the assessment, it was recommended that FCOA migrate infrastructure (network equipment and servers) to the Data Center to allow for a balance between security and flexibility. The migration will enable FCOA to leverage a wide range of tools and services owned by FCDC. Lastly, migrating infrastructure to FCDC will enable the agency to focus on improving support of our internal application, such as our case management system. In return, this will allow FCOA to be more strategic in our support to staff, providers, and older adults and their families. FCDC has begun management of FCOA network equipment as of June 2021. Future phases of the migration include performing a more in-depth assessment of remaining infrastructure, migration of those remaining devices and collapse of the AGIN domain.

## Alleviating Burdens from Worker Shortage

FCOA providers have reported worker shortages which are experienced around the country, primarily within Homemaker, Respite, and Personal Care Assistant Services. However, “nationally, 53 million people fill the role of an unpaid family caregiver providing an estimated \$470 billion worth of free care” (*Wall Street Journal, December 30, 2021*). Therefore, the agency is planning to allow caregivers to be paid homemaker employees through provider services. This helps ensure seniors can remain independent and alleviates some of the burden due to the homemaker worker shortage. In addition, 5% of the sample population surveyed in the 2021 Central Ohio Regional Assessment on Aging reported they were not interested in services because “they didn’t want strangers taking care of them”. Allowing caregivers to be paid through providers gives comfort and support for seniors that prefer a loved one to care for them.

## Digital Equity

Digital equity for older adults is a priority for the Franklin County Office on Aging. The agency wants to ensure seniors have access to affordable internet, have skills to utilize the devices, and are educated and protected from potential scams. In 2020, the agency funded three projects providing socially and economically disadvantaged seniors living in the Near East, Southeast and Hilltop communities with devices, hot spots, and opportunities to learn and experience the digital world. Two pilots were offered through Central Community House and one at the Community Refugee and Immigration Services in the Hilltop. In the six months that these three projects were funded, a total of 291 unduplicated seniors were served in Franklin County. In 2021, FCOA joined the Franklin County Digital Equity Coalition which includes business, government, education, non-profit and social sector representatives that focus on the digital divide and short and long-term possibilities for increasing broadband adoption. As the coalition continues to focus on affordability and access, along with digital skills and technical support it is important that representation for seniors is present. Therefore, this partnership is a priority for FCOA moving forward.

## Office Space

Due to the pandemic, employees have been permitted to work remotely either full-time or part-time. This has allowed for adequate space at the office, however, as “in office” expectations continue to increase, the need for more space becomes more evident. The agency currently shares the first and second floor with Franklin County Public Health and occupies the full third floor. Cubicles have been creatively added to accommodate more employees however, space is limited. In addition to social distancing due to the

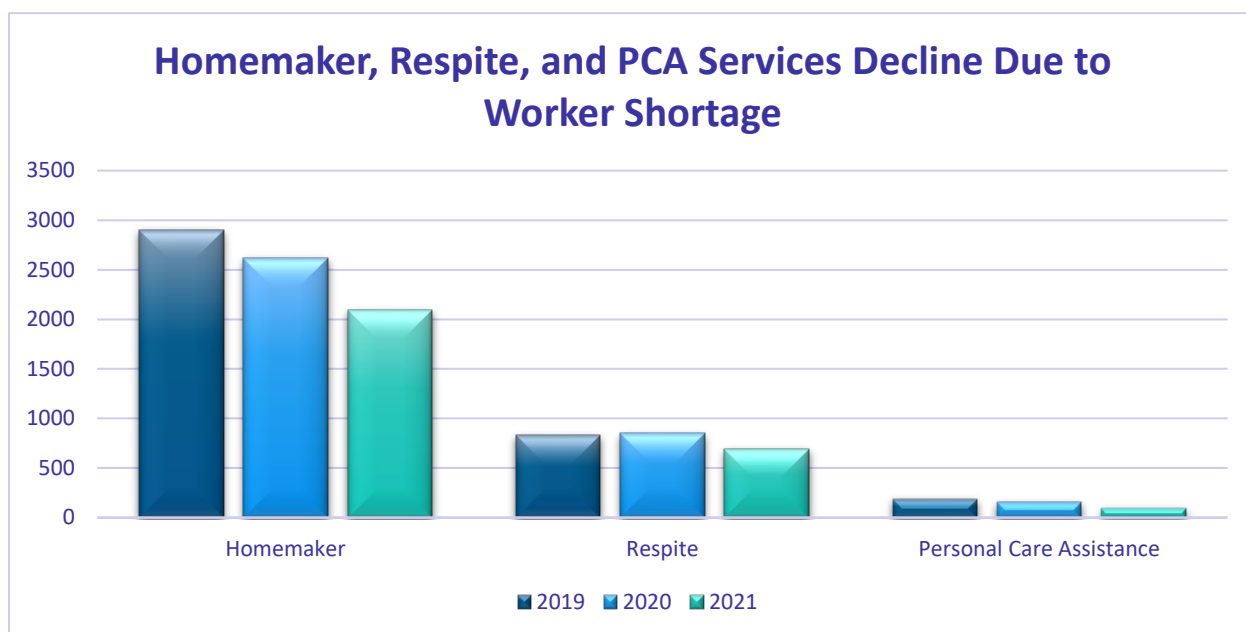
pandemic, space becomes a growing concern. As the aging population increases, along with the need for services, the role of the agency increases. We must continue to look for creative ways to support staff, guarantee they feel part of a team, while also ensuring safety and the ability to effectively do their job.

## Strategies and Initiatives

Regarding services for Franklin County residents, Office on Aging is considering innovative initiatives to further improve the quality of life for seniors and ensure services can continue to be provided at a quality level. New initiatives being considered for the next levy cycle include but are not limited to:

- Launching a Homemaker Worker Shortage Taskforce. Office on Aging has experienced a steady decline in homemaker services since the pandemic began due to the worker shortage experienced around the country. However, the number of residents requesting homemaker services have stayed steady. Addressing the worker shortage requires a community-wide effort of regulatory bodies regarding worker requirements, workforce development agencies and schools regarding increasing the current flow of workers into the industry and coordinated business processes with providers to alleviate burdens on workers through streamlined scheduling and client assignments.

Service	2019	2020	2021
Homemaker	2899	2619	2089
Respite	828	849	690
Personal Care Assistance	190	156	95



- **Revamping and Increasing Information and Referral Services.** Information and Referral Services includes providing referrals and resources to callers even if they opt out of receiving ongoing Senior Options services. Office on Aging has partnered with LSS 211 Ohio to provide a robust and tailored referral database of community resources. The database allows Office on Aging to track the total number of referrals and most referred sources. Office on Aging receives an average of 66,000 calls every year. Tracking the calls and referrals with this new system, can help Office on Aging plan for future initiatives, as particular needs are identified through the referral reports.
- **Adding Grocery Delivery and Laundry Services.** Due to the worker shortage Office on Aging is piloting innovative concepts to fill gaps. This includes grocery delivery and laundry services. Office on Aging is currently launching a campaign to determine which zip codes have the greatest need and a pilot is planned to provide services through grant projects. Once the pilot is implemented, Office on Aging can determine the most effective and efficient long-term approach for continuing services.
- **Adding Institutional Respite Services.** Office on Aging is adding Institutional Respite services for seniors that are in emergency or unsafe situations. This can include seniors experiencing physical, sexual, or mental abuse in the home or facing eviction, especially during months of extreme heat or cold weather.
- **Developing a Dashboard of the Community Needs Assessment.** Office on Aging is using more data to make informed decisions regarding services and operations and want to empower other agencies serving seniors to do the same. Therefore,

Office on Aging plans to publish an interactive data visualization dashboard based on the community needs assessment that the community and other agencies can use for their own planning and strategic initiatives.

- During the next Senior Services Levy cycle the legacy case management system (CMS) Q Continuum is scheduled to be replaced with a new CMS. FCOA has contracted with Adystech, Inc. and deployment is expected to occur in the later part of 2022, provided there are no unforeseen technology delays. The new CMS will include additional solutions; an Interactive Voice Response Solution (IVR), the design of the IVR will allow for a consolidation of our multiple phone lines into a singular local number, immediate access to case information for older adults and their families, text, fax, or email reminders, reduce the burden of call center, data collection, and increased access to emergency services. Tele-Case Solution (TC), the design of TC will allow virtual access using both mobile devices and the web for older adults and their families to apply for services, complete appointments, provide eligibility documentation, communicate changes, and follow the status of their case. Immersive Training (IT) is an e-learning tool that will allow for scenario-based training that allows hands on simulation for training modules. Reporting Services (RS) will allow for ADHOC, or scheduled reports used to monitor and evaluate quality and qualitative data.
- During the next Senior Services Levy cycle, FCOA expects to implement and use the data management system for service referrals. Data management systems allow health and human service providers the ability to refer older adults and their families to services available in the community to provide a holistic approach in improving outcomes. The alignment of service providers using a data management system provides person/family centered care coordination, improves follow up response timeframes, delivers services to those who are in need, and tracks outcomes.
- FCOA also plans to explore ways to improve telephone functionality, especially as it pertains to working remotely. Improving our call distribution and handling could impact caseload sizes and enhance staff efficiency.
- The Board of Commissioner (BOC) Health and Human Service (HHS) agencies are in the early stages of implementing a One Door approach to service model for Franklin County families. The collaboration includes Franklin County Office on Aging, (FCOA) Franklin County Department of Job and Family Services (FCDJFS), Franklin County Child Support (FCCS), Franklin County Family Stabilization Unit (FSU), and the Franklin County Office of Justice, Policy, and Programs (JPP).
- Enrollment projections, collaborative efforts, and community-based outreach initiatives indicate there is a need to expand staffing capacity and additional case managers, supervisors, and other administrative roles will be needed at both

FCOA and COAAA. It is estimated that FCOA will need approximately six case managers and one supervisor will be needed in year of one of the new levy cycle. Additional clerical and quality assurance staff may also be needed. Approval for these positions will go through the BOC budget process.

- An additional need to expand COAAA case management staff has been identified through a pilot project initiated in 2018 to conduct in-home assessments at Re-Authorization for the clients who were previously assessed to need only Transportation or Central Order services deeming them low need. For this group of clients in home assessments were conducted at the time of Re-Authorization and it was discovered that there were many clients living in very unsanitary home environments and were often ashamed or embarrassed of their home environment and were fearful of being removed from their home thus they had not made anyone aware they needed additional services. Thus, adding six case managers and an additional supervisor at COAAA will be needed to conduct the in-home assessments timely.

Additional initiatives are being planned through the agency's Strategic Action/Business Plan due to the Board of Commissioners in April 2022.



## Revenues and Expenses

### Levy Request Analysis

#### 1.75 mill renewal

*On behalf of the seniors in Franklin County, the Office on Aging requests that a 1.75 mill 5-year levy be placed on the November 8, 2022, ballot. This request includes a renewal of the existing 1.75 mill, 5-year levy expiring December 31, 2022, for a period of 5 years. The Franklin County Auditor's Office has established the 2021 real and personal property valuation at \$36.9 billion. This levy is estimated to generate \$50.3 million in 2023 and would cost the owner of a \$100,000 home \$41.13 per year (approximately 11¢ cents per day).*

A 1.75 mill renewal would enable FCOA to respond in a responsible manner to the needs of the seniors in our community. Passage of this levy will support the anticipated increased enrollment in 2023 with modest growth in 2024-2027. It is also anticipated that there would be more than the required three months' worth of operating funds remaining at the end of 2027. Therefore, the Franklin County Office on Aging requests the HSLRC to recommend the 1.75 mill renewal levy.

Provision of the social services needed by older citizens with chronic diseases has fallen primarily to the local senior services levy. Since the first time on the ballot, 1992, the senior levy has received strong, broad-based voter support as the chart below indicates.

### Levy History

1992 - .75 mill, 1st time on the ballot, 67% in favor

1997 - .85 mill, replacement plus increase, 72% in favor

2002 - .85 mill, replacement, 81% in favor

2007 - .90 mill, replacement plus increase, 78% in favor

2012 - 1.3 mill, replacement plus increase, 62% in favor

2017 - 1.75 mill, renewal plus increase, 84% in favor

## Term of Levy

Per the O.R.C. section 5705.71, senior services levies are allowed for a term up to five years. Passage of this levy will maintain the availability of FCSO which provides a range of home and community-based services, customer services management, minor home repair, community awareness efforts, and specialized services designed to fill gaps for those in need. These services could not be preserved for those in need without the support of the senior services levy. The informal care system of family, friends, neighbors, and churches would not be able to replace the services the levy provides. Those without an informal support system might enter institutional settings voluntarily or through court-order. The quality of life for those going without needed services would certainly diminish.

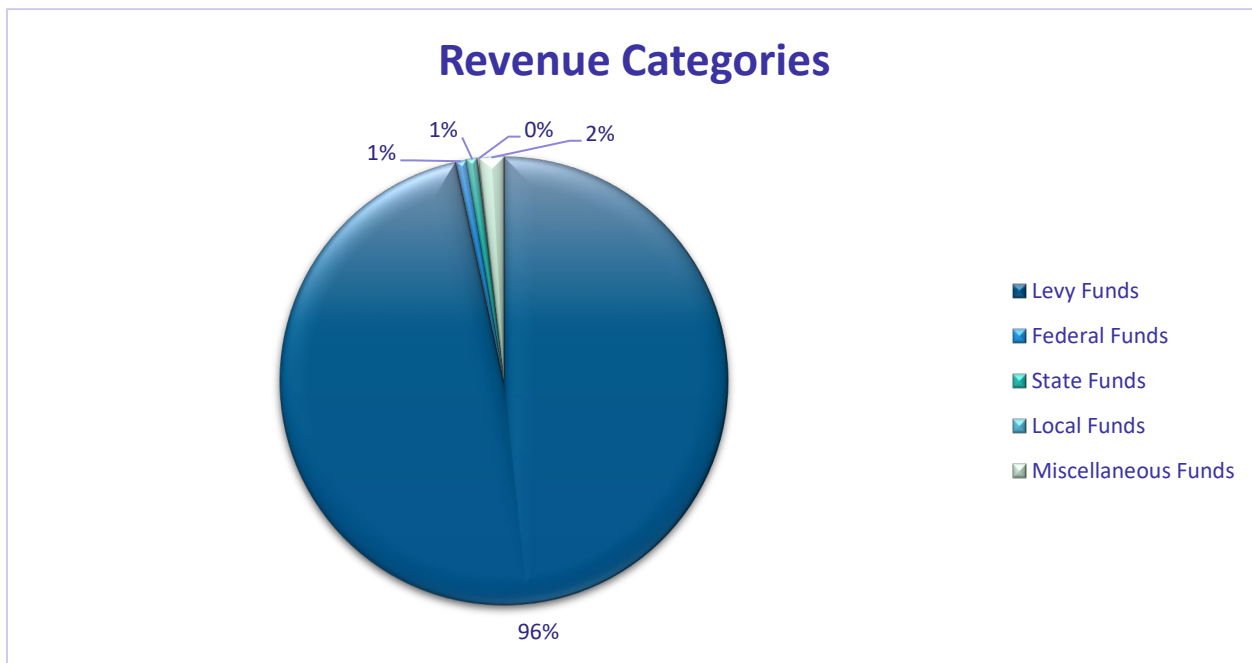
## Commitments for Senior Services Levy for 2023-2027

(1.75 mill renewal)

- As many seniors as possible will be served with existing resources
- Every effort will be made to avoid closing of enrollment throughout the course of the 2023-2027 levy cycle
- A central entry point, one-stop shop, for Senior Options will be maintained
- FCOA will continue its strong focus upon service quality
- Enrollment will focus upon serving the diversity that represents Franklin County's older adult population

The following section: Budget Assumptions will include Revenue and Expenditures associated with a 1.75 mill renewal levy.

## Budget Assumptions



## Revenues

FCSO has five sources of revenue. The primary source of funds is the senior services property tax levy, which represents 96%. Federal grants passed through to the FCOA, state and local funds and participant copayments (miscellaneous funds) provide a much less significant source of revenue. In addition to these sources of revenue, FCOA receives approximately \$1.5 million annually in Title XX revenue from Franklin County Job and Family Services, passed through from the Ohio Department of Jobs and Family Services, to administer Adult Protective Services. These funds assist in protecting our most vulnerable from abuse, neglect, and financial exploitation.

## Levy Funds

The proposed revenue/expenditure estimates are based upon the renewal of an existing 1.75 mill five-year levy. The Franklin County Auditor reports the assessed valuation for FY 2021 as \$36.9 billion. A property tax levy approved in 2022 would be calculated upon this figure and the revenue generated would be approximately \$50.3 million annually. The proposed 1.75 mill levy will begin collection in 2023. Levy revenue is projected based on a 97% collection rate. FCOA is also projecting a slow growth in new construction and has included a conservative .5% annual increase in levy revenue.

Since this is a renewal request, there will be no new taxes for the residents of Franklin County.

## Client Co-payment Funds (Miscellaneous Funds)

The next largest source of revenue for FCSO is co-payments from participants, or miscellaneous funds. Residents who are enrolled in Senior Options are placed on a Sliding Fee Scale, based on income and liquid assets, to determine the co-payment percentage that will be charged. Co-payments received average 2% percent of revenues collected, and they can range from 5% to 100% of the care plan costs.

FCOA's Sliding Fee Scale was last updated in 2009 and has remained unchanged for 12 years. FCOA plans to align the Sliding Fee Scale with the 2022 Home and Community Based Services (HCBS) Waiver Special Income Level (SIL). By adjusting the Sliding Fee Scale, this allows residents with income less than \$1,640 per month (150% of the Federal Poverty Level) and less than \$7,500 in assets to receive services without a cost share. FCOA also plans to protect the first \$7,500 in assets for those who have saved to cover their funeral costs and reassessment of this Sliding Fee Scale on an annual basis.

The program recognizes the need to make considerable adjustments to continue to provide home and community-based services to its most vulnerable clientele, low-income older residents. Adjusting the Sliding Fee Scale allows FCOA to further support the Rise Together Poverty Blueprint in addressing poverty and finding ways to help older residents stay in their homes and continue to add value to their communities. As older residents age, the goal is to support a seamless transition to a program that can provide for a higher level of care when required. Aligning the Sliding Fee Scale with the HCBS Waiver SIL ensures that older residents would be able to receive Senior Option's services at no cost to them and transition to a Medicaid Waiver program with no liability if their needs increase.

The 2009 Sliding Fee Scale and the new 2022 Sliding Fee Scale are included in Appendix F. This adjustment to the Sliding Fee Scale is projected to decrease copayment revenue by approximately \$600,000 or 45% annually.

## State Funds

FCOA will continue to take advantage of grant opportunities to expand specific areas of interest, for example caregivers. Annually, FCOA is awarded funding from Central Ohio

Area Agency on Aging through the National Family Caregiver Support Program authorized by Title III-E of the Older Americans Act Reauthorization of 2000. This grant provides core, support services and emergency supplemental services for caregivers. This grant is projected to continue at the current annual funding level of \$283,455.

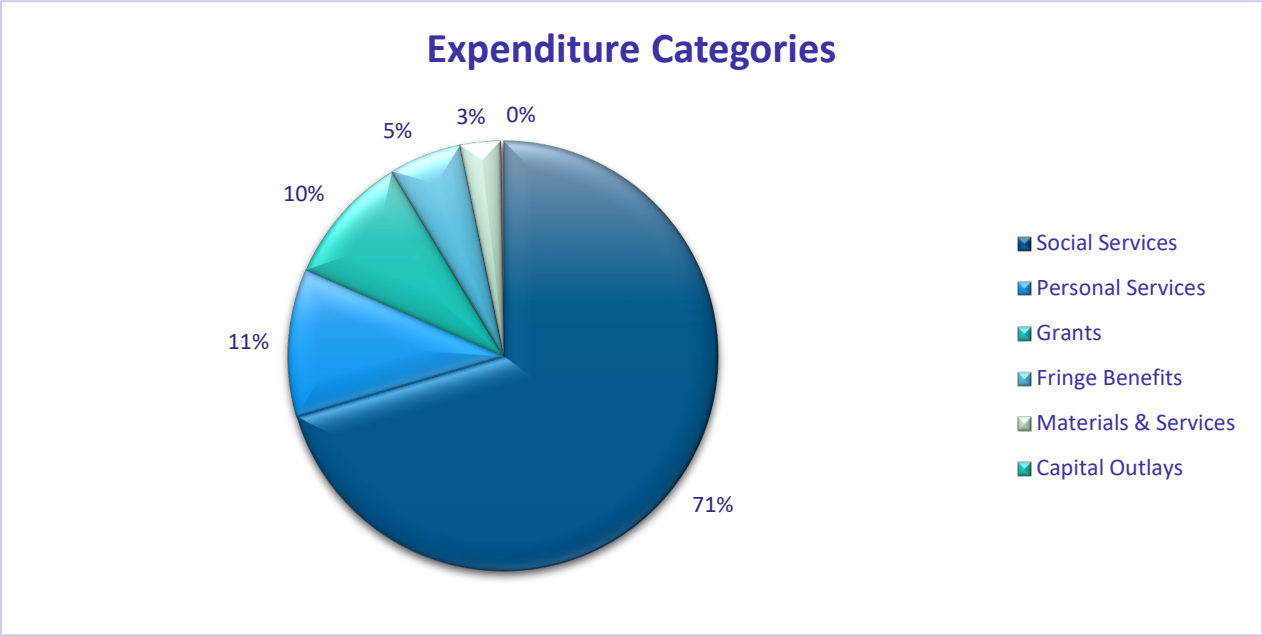
## Federal Funds

In 2020 and 2021, FCOA received CARES Act funding for providing free home delivered meals and funding five grant projects that addressed needs that arose from the COVID-19 pandemic. The COVID-19 response grants were awarded to LifeCare Alliance, Charitable Pharmacy of Central Ohio, Clintonville Beechwold Community Resources Center, Central Community House (CCH) and Community Refugee and Immigration Services (CRIS). These projects ensured critical essentials such as meals and prescription medicines were delivered to our older residents. CRIS and CCH both offered services and social interaction virtually via Zoom on Chromebooks provided to vulnerable minority seniors.

FCOA also receives funds through the Nutritional Services Incentive Program (NSIP). NSIP is administered by the Administration for Community Living (ACL) for the purpose of reducing the hunger and food insecurity of the elderly. The program is funded through Title IIIC of the Older Americans Act and provides access to healthy meals, nutrition education and nutrition counseling for older adults. The funding for this program is expected to generate approximately \$100,000 annually.

## Local Funds

The FCOA has partnered with Franklin County Veterans Services Commission (VSC) to provide qualified veterans with emergency response devices and minor home repairs. The VSC is projected to provide reimbursement funding to FCSO of approximately \$145,000 per year.



**Expenses**

FCOA divides its expenditures into six main categories that drive the agency’s annual budget. These categories are Personal Services, Fringe Benefits, Materials and Services, Capital Outlays, Grants and Social Services. The Social Services category was 71% of total expense in 2021.

**Social Services**

The following table shows the actual enrollment into the Home and Community-based Care program for the years 2016-2021 and estimates for 2023-2027. There has been a 20% increase in enrollment from 2016 through 2021. This table reflects unduplicated client counts for each year.

Year	Annual Client Enrollment	Annual % Increase
2016	9,068	
2017	9,254	2.1%
2018	9,169	(0.9%)
2019	9,332	1.8%
2020	10,004	7.2%
2021	10,853	8.5%
2022	11,054	1.9%
2023	11,464	3.7%
2024	11,883	3.7%
2025	12,312	3.6%
2026	12,749	3.6%
2027	13,195	3.5%

In 2023, the annual number to be served in the Home and Community Based Care program is estimated to be approximately 11,464 participants. This is a 3.7% increase from the 2022 enrollment projection. The projected enrollment increases for the remainder of the levy cycle will average 3.6% annually. Annual costs for senior options home care services have been calculated using projected client enrollment and average care plan costs.

The following chart shows the actual average monthly care plan cost per client for home care services for the years 2018-2021 and estimates for 2022-2027. In 2021, the average monthly care plan cost per client for senior options home care services was \$183.81 compared to an estimated monthly cost of \$7,148 for institutional care. As previously mentioned, the monthly cost cap for services is currently \$1,000/month per participant, with additional discretion given to case managers for clients who need 24-hour supervision. These plans of care can expand to \$1,500/month since these care plans often include several days of adult day health service or extended hours of personal care.

Year	Average Monthly Care Plan Cost
2018	\$175.94
2019	\$176.37
2020	\$178.10
2021	\$183.81
2022	\$188.59
2023	\$192.17
2024	\$196.02
2025	\$199.94
2026	\$203.93
2027	\$207.81

## Personal Services

FCOA staffing levels are anticipated to include 106 full-time equivalents (FTE's) through the remainder of this levy cycle. With the Hospital Care Transition initiative, an additional case management team of six case managers and a case manager supervisor is projected in 2023. This will bring the staffing level to 113 FTEs in the next levy cycle. Annual salary increases are assumed and included based on Moody's Analytics forecasted CPI-U index.

Six case managers and a case manager supervisor at the COAAA have also been included in the 2024 projection to handle the in-home assessments for the continuation of the Re-Authorization Home Visit Project mentioned previously. In addition, an annual increase is projected for the COAAA case management contract based on Moody's Analytics forecasted CPI-U index.

## Grants

The FCOA grant program involves funding for 32 private non-profit agencies that provide 46 specialized service programs for older adults. In 2023, FCOA plans to align its' grant process with the Health and Human Services agencies. FCOA will continue to consider grant funding for technology programs that support digital equity for older



residents. In the next levy cycle, annual increases for grants are projected using Moody's Analytics forecasted CPI-U index.

## Fringe Benefits

In 2023 through 2027, total fringe benefits are projected to increase approximately 5% annually except for the year 2023. In 2023, there is a 16.5% increase which is associated with the increased cost of healthcare plus the addition of the new case management staff. FCOA has projected an 5% annual increase in healthcare for this next levy cycle.

## Materials and Services

FCOA is projecting a significant increase in materials and services in 2022 compared to 2021. This is mainly due to the new case management system and a media/marketing plan to promote the agency's HOPE Campaign (Helping Our Residents and Families with Purposeful Engagement) and services. In the next levy cycle, annual increases for materials and services are projected based on Moody's Analytics forecasted CPI-U index.

## Capital Outlays

Capital outlays are those purchases of equipment with a cost of \$5,000 or more and a useful life of more than one year. FCOA has projected costs associated with information technology such as servers, a digital copier, document imaging and case management system maintenance, etc.

## Ending Cash Balance

The ending cash balance at the end of 2027 is projected to be \$60.6 million. This cash reserve is higher than the three-month average expenditure requirement of \$14.5 million. FCOA's proposed ending cash balance will allow the agency flexibility to cover any potential revenue losses, implement new strategic initiatives, new technology, cover any unanticipated expenses, and meet any unforeseen demand.

The following documents include:

Cash Flow analysis for a 1.75 mill renewal

Auditor's Certificate of Estimated Revenue

Franklin County Office on Aging  
Historical Revenue and Expenditures

	2016 <u>Actuals</u>	2017 <u>Actuals</u>	2018 <u>Actuals</u>	2019 <u>Actuals</u>	2020 <u>Actuals</u>	2021 <u>Actuals</u>	2022 <u>Projection</u>
Beginning Cash:	15,159,174	15,958,792	16,297,095	28,179,942	41,710,298	57,725,895.28	70,646,614.27
Revenue:							
Levy Funds							
1.75 Mill Levy - Expiring in 2022	34,280,613.87	34,915,143.71	47,737,262.37	48,005,970.74	48,759,182.12	49,273,306.55	50,213,779.00
Federal Funds	204,717.40	215,442.78	225,027.76	190,089.49	2,783,892.92	409,958.39	183,759.00
State Funds	220,199.00	157,410.00	322,981.00	342,507.00	86,347.38	410,590.22	308,230.00
Local Funds	229,238.99	259,823.09	247,911.88	211,491.61	113,542.17	47,374.83	284,129.00
Miscellaneous Funds	1,341,512.66	1,335,982.34	1,349,705.51	1,391,115.70	1,021,072.51	899,798.71	1,194,097.00
Total Revenue	38,296,299.92	38,880,801.90	49,692,789.32	50,111,174.54	52,744,017.08	51,031,028.67	52,131,991.00
Expenditures:							
Personal Services	3,213,098.85	3,555,562.49	3,729,942.65	3,830,122.24	4,087,020.23	4,222,733.67	4,489,039.80
Fringe Benefits	1,505,905.67	1,760,215.75	1,892,937.57	1,921,909.43	1,809,111.01	2,070,989.51	2,389,420.72
Materials & Services	901,354.05	1,820,507.78	883,182.88	991,949.20	1,203,615.79	1,132,895.80	2,377,399.00
Capital Outlays	20,139.35	0.00	81,594.53	79,830.51	8,498.85	92,545.41	213,445.00
Grants	3,075,627.00	3,188,540.00	3,388,393.00	3,506,416.18	3,700,972.00	3,733,029.00	3,832,641.00
Interfund	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Social Services	29,747,539.36	28,217,673.07	27,033,980.31	27,250,621.61	25,839,481.78	28,857,908.29	33,379,453.00
Total Expenditures	35,463,661.28	38,542,469.08	38,999,930.74	37,590,949.17	36,725,599.86	38,110,099.89	46,851,365.52
Ending Cash Balance:	\$15,958,792.07	\$16,297,094.91	\$29,179,942.49	\$41,710,267.86	\$57,725,695.28	\$70,646,614.27	\$76,127,239.75

Franklin County Office on Aging  
Historical Revenue and Expenditures

	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>2027</u>
Beginning Cash:	76,127,239.75	77,039,740.04	75,709,353.54	72,541,846.70	67,586,251.27
Revenue:					
Levy Funds					
1.75 mill Levy - Proposed through 2027	48,944,339.02	49,188,229.97	49,433,340.39	49,679,676.35	49,927,744.00
Federal Funds	114,529.50	101,032.72	100,000.00	90,000.00	80,000.00
State Funds	283,455.00	283,455.00	283,455.00	283,455.00	283,455.00
Local Funds	145,000.00	145,000.00	145,000.00	145,000.00	145,000.00
Miscellaneous Funds	485,890.19	495,607.99	505,520.15	515,630.56	525,943.17
Total Revenue	49,973,213.71	50,213,325.69	50,467,315.54	50,713,761.91	50,962,142.17
Expenditures:					
Personal Services	4,885,434.10	4,983,142.78	5,082,805.64	5,184,461.75	5,282,966.52
Fringe Benefits	2,731,825.12	2,844,456.92	2,949,588.94	3,072,087.75	3,199,362.54
Materials & Services	1,866,967.03	1,851,734.50	1,895,052.20	1,813,941.75	1,860,670.44
Capital Outlays	532,300.00	473,600.00	465,500.00	425,500.00	454,600.00
Grants	3,905,461.18	3,983,570.40	4,063,241.81	4,144,506.65	4,223,252.27
Interfund	0.00	0.00	0.00	0.00	0.00
Social Services	35,138,725.99	37,407,207.59	39,178,633.80	41,028,859.44	42,916,336.34
Total Expenditures	49,060,713.42	51,543,712.19	53,634,822.39	55,669,357.33	57,937,188.12
Ending Cash Balance:	\$77,039,740.04	\$75,709,353.54	\$72,541,846.70	\$67,586,251.27	\$60,611,205.32

Office on Aging  
1.75 renewal  
Tax Year 2021, Collection Year 2022

Office on Aging	Valuation	Current	Estimated Revenue	Office on Aging Cost per \$100,000 of Value	
Class 1	25,350,725,900	0.961749	\$ 24,381,035.28	Effective Residential/Agricultural Rate	0.961749
Class 2	10,166,923,200	1.086805	11,049,462.97	Assessed Value	\$35,000.00
PU Personal Property	1,467,833,360	1.300000	1,908,183.37	Cost per \$100,000	\$29.45
Personal Property	0	0.000000	-		
Total	<u>36,985,482,460</u>		\$ 37,338,681.62		
TPP Make Whole Reimbursement			-		
Total Estimated Revenue			<u>\$ 37,338,681.62</u>		\$29.45

Office on Aging  
1.75 renewal  
Tax Year 2021, Collection Year 2022

Office on Aging	Valuation	Current	Estimated Revenue	Office on Aging Cost per \$100,000 of Value
Class 1	25,350,725,900	0.333828	\$ 8,462,782.13	0.333828
Class 2	10,166,923,200	0.376201	3,824,806.67	\$35,000.00
PU Personal Property	1,467,833,360	0.450000	660,525.01	\$11.68
Personal Property	0	0.000000	-	
Total	<u>36,985,482,460</u>		\$ 12,948,113.81	
TPP Make Whole Reimbursement			-	
Total Estimated Revenue			<u>\$ 12,948,113.81</u>	\$11.68
Total Estimated Revenue			<u>\$ 50,286,795.43</u>	

## Appendices

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