

Community Living Program Grants

State Agency: Oregon DHS-Seniors & People with Disabilities

Project Title: Oregon Community Living Project

Project Period: September 30, 2009 to September 30, 2011

Contact:

Elaine Young

676 Church St.

Salem, OR 97301

503-373-1726

elaine.young@state.or.us

Project Abstract:

The State of Oregon Department of Human Services, Seniors and People with Disabilities Division (SPD), in collaboration with two Area Agencies on Aging—Multnomah County Aging & Disability Services (ADSD) and Washington County Disability, Aging, & Veterans Services (DAVS)—seeks Community Living Program grant funding to enhance efforts at diverting individuals from nursing home placement and empowering them to be well-informed long-term care consumers. The goal of this project is to pilot key systemic changes at ADSD and DAVS that will enable those at risk of nursing facility placement and spend-down to Medicaid to remain in home and community-based settings.

Project objectives include: 1) Revising the intake screening process to identify and respond quickly to those at imminent risk of nursing facility placement and spend-down to Medicaid; 2) Implementing long-term care options counseling to help targeted individuals and their families make informed decisions about available services; 3) Expanding existing programs that promote self-directed care and developing new Web-based tools that enable consumers to research benefits and service options; 4) Increasing knowledge, skills, and abilities of case management staff and community partners to equip them to provide consumer-directed care; 5) Developing an evaluation process to track client outcomes and cost avoidance attributable to nursing facility diversion activities.

The project will have four measurable outcomes: 1) Key indicators of imminent risk will be validated; 2) Consumer awareness and use of home and community-based services will increase as a result of long-term care options counseling; 3) 100 at-risk individuals will delay or avoid nursing home placement and spend-down to Medicaid; and 4) Screening and case management staff will increase their knowledge, skills, and abilities to provide consumer-directed care.