Connecticut State Department on Aging

At a Glance

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Established - January 1, 2013
Statutory authority – CGS Section 17a-301a
Central office - 55 Farmington Ave, Hartford, CT 06105
Number of employees – 17 in the State Unit on Aging; 13 in the Office of the Long Term Care Ombudsman
Program Budget - $27,866,500 (32% State funds / 68% Federal funds)
Organizational structure - Commissioner’s Office; State Unit on Aging, Long Term Care Ombudsman’s Office with Regional Ombudsman Program Offices

Mission

The mission of the State Department on Aging is to empower older adults to live full independent lives and to provide leadership on aging issues on behalf of older adults, families, caregivers, and advocates.

DEPARTMENT OVERVIEW

The Department administers Older Americans Act programs for supportive services, in-home services, and congregate and home-delivered meals. It also administers programs that provide senior community employment, health insurance counseling, and respite care for caregivers. Further, the Department provides oversight of and leadership for the Coalition for Elder Justice in Connecticut.

The Connecticut State Department on Aging, as the designated State Unit on Aging, ensures that Connecticut’s elders have access to the supportive services necessary to live with dignity,
security, and independence. The Department is responsible for planning, developing, and
administering a comprehensive and integrated service delivery system for older persons in
Connecticut.

The Long-Term Care Ombudsman Program, administratively housed in the State Department
on Aging, provides individual advocacy to residents of skilled nursing facilities, residential care
homes and assisted living facilities. The State Ombudsman also advocates for systemic changes in
policy and legislation in order to protect the health, safety, welfare and rights of individuals who
reside in those settings.

The Department works closely with the aging network partners to provide these services.
Partners include Connecticut’s five area agencies on aging, municipal agents for the elderly, senior
centers, and many others who provide services to older adults.

Statutory Responsibility

The State Department on Aging, and its programs and responsibilities as the State Unit on
Aging, are found in sections 17a-300 – 17a-316a of the Connecticut General Statutes (C.G.S.)
including:

Sec. 17a-301a (Establishment of the State Department on Aging); Sec. 17a-303a (Fall
Prevention Program); Sec. 17a-314 (CHOICES, the federally funded health insurance assistance
program); Sec. 17a-302 (Nutrition programs for elderly persons); Sec 17b-349e (Respite care
services for caretakers of Alzheimer’s patients) Sec. 17a-316a (Aging and Disability Resource
Centers); The Office of the Long-Term Care Ombudsman and associated statutes relative to the State
Department’s responsibilities appear in Sec. 17a-405 – 422; Sec. 17b-252 (Connecticut Partnership
for Long-Term Care outreach program; Sec. 7-127b (Municipal Agent for the Elderly)

PUBLIC CONTACT POINTS

Websites and web pages:
• State Department on Aging: www.ct.gov/aging
• Long-Term Care Ombudsman: www.ct.gov/ltcop
• Aging and Disability Resource Centers: www.myplacect.org
• Connecticut Partnership for Long Term Care: www.ctpartnership.org
• Coalition for Elder Justice in Connecticut: http://www.elderjusticect.org/

Toll-free information:
• General public information: 1-866-218-6631
• TDD/TTY for persons with hearing impairment: 1-800-842-4524
• Long-Term Care Ombudsman: 1-866-388-1888
• Aging and Disability Resource Centers: 1-800-994-9422
• CHOICES (Connecticut’s programs for Health Insurance
Assistance, Outreach, Information and referral, Counseling
and Eligibility Screening): 1-800-994-9422
• Connecticut Partnership for Long Term Care: 1-800-547-3443
State Department on Aging Programs

Advance Directives: Developed by the Legal Assistance Developer, in cooperation with the Office of the Attorney General, “Advance Directives: Planning for Future Health Care Decisions” empower residents to make informed decisions about their own health care needs. Advance Directives are available in both English and Spanish either by calling the Department or on the Department website. The Legal Assistance Developer also makes public presentations concerning Advance Directives upon request.

Aging and Disability Resource Centers (ADRC): Aging and Disability Resource Centers are available statewide and currently serve older adults, individuals with disabilities, and caregivers through a coordinated No Wrong Door system of information and access. The ADRCs are using federal dollars to pilot a national Person Centered Counseling Curriculum and to pilot the No Wrong Door Governance Tool that will be used by states to evaluate their progress in offering services and supports seamlessly through a No Wrong Door approach. ADRCs, under the umbrella of CHOICES, continue to use their extensive knowledge and resources to help people connect to a myriad of services and supports including, but not limited to, benefits screening, information and assistance, decision support, follow-up and person centered options counseling. Program partners include the state’s five (5) Area Agencies on Aging, five (5) Centers for Independent Living, Connecticut Community Care, Inc., and UConn Center on Aging. In FY 2015 $135,000 was received in competitive federal grant funding. In FY 2015, 1,037 unduplicated consumers were served through the ADRC.

CHOICES: Connecticut’s program for Health insurance assistance, Outreach, Information and referral, Counseling and Eligibility Screening (CHOICES) is the Department’s State Health Insurance Assistance Program, a national volunteer based program that provides older persons, Medicare beneficiaries, their families, and providers information and assistance about current Medicare benefits and options. Free counseling and assistance is provided via telephone and face-to-face interactive sessions, public education presentations and programs and media activities. Certified CHOICES Counselors provided counseling to more than 32,800 Medicare beneficiaries in FY 2016. Volunteer and in-kind professional counselors spent 18,400 hours counseling Medicare beneficiaries throughout the year. Counselors provided enrollment assistance into the Medicare Savings Program (MSP), Medicare Part D prescription drug plans, and the Low Income Subsidy/Extra Help to more than 8,600 Medicare beneficiaries.

CHOICES is a cooperative effort with the five Area Agencies on Aging and the Center for Medicare Advocacy. In FY2016, $576,656 was received in federal funding and $722,393 was received in state funding.

Connecticut Partnership for Long Term Care: The Partnership provides education and outreach and through private insurers, offers special long-term care insurance to help individuals increase their options and avoid impoverishing themselves when paying for their long-term care. Coordinated by the Office of Policy and Management, the Partnership has an information and education program managed by the Department. The SDA also provides one-on-one counseling, distributes educational materials and conducts regional public forums and other community presentations. In SFY 2016, $5,000 in state funds was received by the SUA.
During state fiscal year 2016 the Partnership:

- Responded to 73 requests for information
- Counseled 107 people
- Reached 198 people through public forums

**Human Resources Agency - Las Perlas Hispanas Senior Center:** Las Perlas Hispanas Senior Center received funding in the amount of $18,300 for SFY 2016. The funding is used for outreach to low-income seniors in need of case management, socialization and information and referral services. 50 older adults received services in 2016.

**Alzheimer’s Aide funding:** This state funding is designated to assist in subsidizing the cost of Alzheimer’s Aides in Adult Day Care Centers. It is administered by the five Area Agencies on Aging. In SFY 2016, $173,323 was received in state funds, and 25 aides provided 18,107 hours of service to individuals with Alzheimer’s disease in adult daycare settings.

**Congregate Housing Services Program (CHSP):** With $369,812 in federal funding for FFY 2015 from the Department of Housing and Urban Development and $134,230 in state funding for SFY 2016 CHSP provides opportunities for socialization through congregate meals and supportive services to frail elders and persons with temporary or permanent disabilities in rural areas who would otherwise be vulnerable to premature institutionalization. This program serves 310 participants in twelve (12) of the most vulnerable housing communities located in the eastern and western areas of the state.

**Connecticut Statewide Respite Program:** In partnership with the Area Agencies on Aging and the CT Chapter of the Alzheimer’s Association, the Statewide Respite Care Program offers short-term respite care for persons with Alzheimer’s disease and related dementias. The program provides in-home assessments, the development of care plans and the purchase of necessary respite services. Respite services may include, but are not limited to adult day care, homemaker, and companion, transportation, personal emergency response system, or short-term inpatient care in a nursing facility, residential care home or assisted living community.

In SFY 2016, $1,973,368 was received in state funds for this program and 657 individuals received respite services.

**Grandparents as Parents Support Network:** The State Department on Aging, with support from agencies throughout Connecticut, developed the Grandparents as Parents Support network (GAPS). Utilizing its Listserve, information is shared among the network of over 150 agencies, individuals and community organizations regarding advocacy, legislative updates and the 75 known support groups in Connecticut that provide assistance to grandparents and relative caregivers.

**National Family Caregiver Support Program/OAA Title III-E (NFCSP):** In partnership with the Area Agencies on Aging, this program considers caregivers’ unique values and needs and offers a range of services that enable caregivers to easily access the right services at the appropriate times. The major components of the program include information about available services, access to supportive services, individual counseling, support groups, caregiver training, respite care and supplemental services. Priority consideration is given to those with the greatest social and economic need.
In FFY 2015 $1,717,627 was allocated to Area Agencies on Aging who work with local community providers to provide these services. 495 outreach related activities were delivered, reaching 110,390 people; 22,421 contacts with caregivers were made to help resolve caregiving related issues and there were 1,457 unduplicated caregivers who received 43,325 units of service for respite and other caregiver services.

**Reverse Annuity Mortgage:** Reverse Mortgages are a type of home loan which allow older homeowners in need of extra income to convert some of the equity in their homes to cash. It allows older adults aged 70 and older to use the equity in their homes to collect tax-free payments as income. This income allows homeowners to stay in their homes and to help avoid institutionalization. The Connecticut Housing Finance Authority (CHFA) provides the funds and determines eligibility. The State Department on Aging forwards reviewed applications to CHFA for processing. In SFY 2016, four applications were forward to the CHFA.

**Supportive Services/Older Americans Act Title III-B** Funding provides home and community based care, most supportive services fall under three broad categories:

- Access services i.e. case management, information and referrals, outreach and transportation;
- In-home services such as homemakers services, chore maintenance, and supportive services for family members of older individuals diagnosed with Alzheimer’s disease; and
- Community Services including adult day care and legal assistance.

In FFY 2015, $4,358,914 was received in Title III B funds.

**Veteran’s Directed Home and Community Services Program** Through funding from the federal Veterans Administration (VA) and in partnership with the Administration for Community Living, the Department facilitated the implementation of the Veteran’s Directed Home and Community-based Services program in the south central region of the state in 2008. It is now offered throughout the state in partnership with the five Area Agencies on Aging. The program is designed to keep veterans in the community by self-directing their own care, managing an individualized budget and receiving services in their home by the caregiver of their choice. Funding passes directly from the VA CT Healthcare System to the AAAs to provide services. While the State partners with these agencies to streamline program operations, it does not receive any state or federal funding to act in this capacity.

Number of Veterans served statewide:
- 62 Veterans served in FFY15

**Chronic Disease Self-Management Program:** The Chronic Disease Self-Management Program (CDSMP), or “Live Well” as branded in Connecticut, is a six week lay-led participant education program developed by Dr. Kate Lorig at Stanford University for adults who are experiencing chronic conditions. The program provides information and teaches practical skills on managing and living with chronic health problems.

Since 2008, the State Unit on Aging (SUA), in partnership with the CT Department of Public Health has received competitive grants from the Administration for Community Living to disseminate and embed Chronic Disease Self-Management Education Programs (CDSME) within Connecticut’s health and community service systems. Currently the SUA is partnering with The CT Department of Public Health, CT Community Care Inc. (CCCI), and several CT Health Foundations to build upon
previous efforts to create a network of centralized implementation, information, training and support for the dissemination of CDSME and other evidence-based programs in Connecticut.

Since 2010, Connecticut’s lay leader network has facilitated over 350 workshops with 3,700 older adults and persons with disabilities taking part in self-management programs. The infrastructure includes 1 T-Trainer, 13 Master Trainers and a core of approximately 115 certified lay leaders managed through the area agencies on aging and CCCI who deliver programs to the host sites.

**Connecticut Statewide Fall Prevention Initiative:** The overall objective of the Connecticut Collaboration for Fall Prevention (CCFP) is to decrease the rate of falls among community dwelling older adults. By recruiting, developing and supporting a variety of local initiatives the initiative aims to embed an evidence-based, multidisciplinary, multifactorial fall risk assessment and intervention strategy throughout Connecticut. The intervention consists of changing prevailing knowledge, attitudes, skills, and behaviors related to fall risk factor assessment and prevention among older persons and relevant care providers. Through the Statewide Initiative funds have allowed research that has demonstrated that fall related 9-1-1 calls, rates of admission to the emergency departments and acute care hospitals can be reduced.

In SFY 2016, $475,000 was received in state funds for fall prevention initiatives.

**Elderly Nutrition Program:** Using Federal OAA Title III C-1, C-2 and NSIP as well as state funding, the Elderly Nutrition Program serves nutritionally balanced home delivered and congregate meals and provides other nutrition services such as nutrition education or nutrition counseling to individuals age 60 and older and their spouses.

The Elderly Nutrition Program is supported by federal, state, Social Service Block Grant Funds, local funds as well as voluntary client contributions. Funds are distributed to the five (5) Area Agencies on Aging (AAA) who contract with nine (9) Elderly Nutrition Projects (ENPs). In 2015, $12,334,111 was received in funding for the Elderly Nutrition Program.

In 2015:
- 16,107 participants were served 729,393 congregate meals
- 6,470 participants were served 1,362,602 home delivered meals

**Health Promotion Services and Disease Prevention/OAA Title III-D:** Through the Area Agencies on Aging, the Department supports education and implementation activities that support healthy lifestyles and promote healthy behaviors. Additionally, evidence-based health promotion programs are supported to reduce the need for more costly medical interventions. In FFY 2015, $244,076 was received in federal funds. In FFY 2015, 1,207 consumers were provided with Health Promotion Services.

**Healthy IDEAS:** is a community-based depression program designed to detect and reduce the severity of depressive symptoms in older adults with chronic health conditions and functional limitations through existing case management services. The program seeks to improve the linkage between community aging services providers and health care professionals through better communication, referrals and effective partnerships. The program also focuses on enhancing the self-management skills of older adults with depressive symptoms. The program targets underserved, chronically ill older adults in the community
New England Cognitive Center-Brain GYMM: The NECC designs and provides targeted exercises to stimulate identified parts of the brain that are affected by Alzheimer’s disease. Individuals are tested to determine their level of cognitive function and then work with a trainer to complete exercises that seek to address cognitive deficits. In SFY 2016, $49,035 was received in state funds and 78 individuals with Alzheimer’s disease received services through this project.

Senior Community Service Employment Program (SCSEP): Using Older Americans Act Title V funds, SCSEP is a federally funded program through the U.S. Department of Labor designed to assist workers age 55 years and older prepare for today’s job market and re-enter the workforce. The State Unit on Aging, as the State Grantee, received $944,193 in funding for SFY 2015 to administer the program. There are four (4) contractors in Fairfield, Litchfield, New London and New Haven counties providing SCSEP services. There are two national grantees that provide services in the other counties of Connecticut.

SCSEP provides job skills training and job development services to low-income residents. Services are delivered through on-the-job training at local non-profit agencies and classroom training. Supportive services are often provided including, but not limited to, Dress for Success, assistive technology and transportation.

During State Fiscal Year 2016, SCSEP

- provided services to 108 low-income older workers;
- met 142.7% of its expected service level; and
- 39.3% of enrollees secured unsubsidized employment (U.S. Department of Labor’s Goal: 41.2%)

Elder Rights/Elder Abuse Programming/Title III and Title VII: Through the Legal Assistance Developer the Department monitors and advocates to improve the quality and quantity of legal and advocacy services available to the state’s vulnerable older residents and serves as a resource to provide technical assistance to and with legal assistance providers within the aging network. The Older Americans Act, Title IIIB federal funding is provided to the five Area Agencies on Aging which are required to expend a portion of their Title IIIB allotment in contracting with the legal services organizations in Connecticut to provide free counseling and representation on many civil elder law issues – CT Legal Services Inc. (CLS), Greater Hartford Legal Aid (GHLA), and New Haven Legal Assistance (NHLA). Due to limited funding, the following categories have priority for representation: access to health care; federal and state benefit and support programs; rights of nursing home residents; and legal issues which are a direct result of a client’s poverty. During FFY 2015, numbers of consumers and units of service increased from the prior year to 1,187 consumers receiving a total of 8,586 ‘units’ of legal services.

The Department, through the Legal Assistance Developer, assists in the development of elder abuse programming and resources throughout the state. The Developer also collaborates with the aging network and law enforcement to support community initiatives such as Triads which work to reduce criminal victimization of older persons. In FFY 2015, the Department received $59,907 in federal funds. Funds were distributed to the area agencies on aging to provide programming throughout each
region to, among other initiatives, develop and support multidisciplinary teams, support shelters and raise awareness of elder abuse issues in the community. The remainder of the funding supported Elder Abuse education for prosecutors and Coalition agency members, End of Life Coalition efforts, and best practice research.

**SMP:** Formerly known as Senior Medicare Patrol, this program empowers seniors to prevent becoming victims of health care fraud. SMP helps Medicare and Medicaid beneficiaries, family members and caregivers avoid, detect and prevent health care fraud. The primary goal is to teach Medicare beneficiaries how to protect their personal identity, report errors on their health care bills, and identify deceptive health care practices (i.e. charging for services that were never provided). In FFY 2015, $250,017 was received in federal funds. In FFY 2015, the SMP program conducted 117 group education events reaching 2,462 beneficiaries and provided 187 community outreach events reaching 7,309 attendees.

### Long Term Care Ombudsman Program

The Long Term Care Ombudsman Program (LTOCP) works to improve the quality of life and quality of care of Connecticut citizens residing in nursing homes, residential care homes and assisted living communities.

The Mission of the Connecticut Long Term Care Ombudsman Program is to protect the health, safety, welfare and rights of long term care residents by:

- Investigating complaints and concerns made by residents, or on behalf of residents, in a timely and prompt manner;
- Bringing residents to the forefront to voice their concerns directly to public officials on issues affecting their lives;
- Supporting residents in their quest to shape their own legislative agenda and to represent the residents’ interests before governmental agencies; and
- Working with other stakeholders, policy makers and legislators to improve residents quality of life and services

The LTOCP responds to, and investigates complaints brought forward by residents, family members and/or other individuals acting on their behalf. Ombudsmen offer information and consultation to consumers and providers, monitor state and federal laws and regulations, and make recommendations for improvement. All Ombudsman activity is performed on behalf of, and at the direction of, the residents and all communication with the residents, their family members or legal guardians, as applicable, is held in strict confidentiality.
**Volunteer Resident Advocates**

One of the most successful ways the Ombudsman program has of helping residents is its Volunteer Resident Advocate Program. Volunteers are trained by Ombudsman staff in residents’ rights problem solving, interviewing skills, negotiating, working with nursing home staff, the health care system and state and federal policies and legislation that affects residents. After training, Volunteer Advocates are asked to spend four (4) hours per week in one assigned nursing home and help residents solve problems or concerns. Volunteer Resident Advocates meet monthly and participate in ongoing training.

**Resident Councils**

The Coalition of Presidents of Resident Councils is an organization of residents of long term care facilities who work to improve the quality of care and the services in their homes. The LTCOP supports the Coalition in their efforts to effect positive change in larger systems such as state and federal governments. The Executive Board of Presidents of Resident Councils is formed to represent the interests of the Coalition and to develop legislative initiatives on behalf of all Connecticut residents of skilled nursing facilities. The Executive Board meets regularly and is available to the Office of the State Ombudsman for consultation upon request.

**Programs**

The VOICES forum is an annual event jointly convened by the LTCOP, with the State Department on Aging and the Statewide Coalition of Presidents of Resident Councils. It is an opportunity for Presidents of Resident Councils from around the state to gather and discuss issues and concerns in their homes and to provide input into legislative proposals for the upcoming legislative session. Over the years the VOICES Forum has been the impetus for significant work to protect the rights of residents. For instance, as the result of conversation at a VOICES Forum the Ombudsman Program initiated groundbreaking work about fear of retaliation, including research and a video and curriculum for training nursing home staff. The legislature mandated annual training for staff based on this initiative. The Connecticut Long Term Care Ombudsman Program is the sponsor and partner of the Statewide Coalitions of Presidents of Resident Councils.

**Advocacy**

In federal fiscal year 2015, the Ombudsman Program handled 2,694 complaints. The majority of these complaints were filed by residents or their representatives (relative or friend or conservator of person). Complaints about resident care, resident rights and discharge issues were among the top categories of complaints during FFY 2015. The Program participated in the Long-Term Care Advisory Council, CT Elder Action Network and served on many workgroups and boards focused on policies and programs to ensure high standards of quality care and services for Connecticut residents.

The State Ombudsman continues to co-chair the Coalition for Elder Justice in Connecticut and works closely with other agencies and with members of the private and public sectors to raise awareness and to promote identification of elder abuse, neglect and exploitation. This initiative is modeled after the federal Coalition for Elder Justice and in Connecticut there is a Coordinating Council as well as the Coalition.
In 2015, the White House convened the 2015 White House Conference on Aging. The Connecticut LTCOP was proud to be invited to the regional Conference meeting held in Boston in the spring of 2015 and even more proud that a member of the Executive Board of Presidents of Resident Councils, Brian Capshaw, was invited to the White House for the culminating meeting of the White House Conference on Aging. Brian represented not only CT long-term care residents, he was the resident representative at the conference for all residents across the country.

The Program continues its work when skilled nursing homes close to ensure that residents have opportunity for informed choice about where they will move, including looking at options offered through the Money Follows the Person Program. The State Ombudsman served as the federally appointed Patient Care Ombudsman in homes that filed for bankruptcy reorganization. And the Program continued to sponsor and produce the annual Voices Forum, the only such forum held in the country at which nursing home residents convene to discuss their concerns and raise ideas for policy and legislation which will improve the quality of their care and services in the nursing home.

STATE DEPARTMENT ON AGING

IMPROVEMENTS/ACHIEVEMENTS FOR 2015 - 2016

1. The Department continues to lead the Coordinating Council of the Coalition for Elder Justice in Connecticut [CEJC] as the central focus of the state’s Elder Rights / Elder Justices initiatives. CEJC is a public / private collaborative including aging /disability / elder rights / law enforcement / financial institutions / state agencies / educational institutions / victims services, etc. The mission is to prevent elder abuse and protect the rights, independence, security, and well-being of vulnerable elders through communication and collaboration with Public and Private Stakeholders addressing elder justice issues in Connecticut. Each year the Coordinating Council develops an annual conference, bringing together Connecticut stakeholders from the public and private sectors to learn from national experts in the field of elder abuse identification and prevention. This collective forum provides a unique opportunity to better understand and develop strategies to protect older Connecticut citizens from abuse, neglect and exploitation. One Coalition Action Team has been operating a Fraud Watch Awareness campaign; a second team spearheaded the development of Financial Organization training for banks and credit unions concerning ways to combat financial exploitation of seniors and has begun conducting prototype training sessions in the western part of the state.

2. With the subsequent passage of Public Act 15-40, the State Department on Aging, in collaboration with the Department of Social Services, Area Agencies on Aging, access agencies, the Legislative Commission on Aging, Nutrition providers, representatives from food security program and nutrition host site representatives, the SDA convenes regular quarterly meetings to discuss the programs and services which address Elderly Nutrition. The purpose of these meetings is to address complexities in the administrative process of nutrition services in efforts to move toward greater quality, efficiency and transparency in the elderly nutrition program. As outlined in Public Act 15-40, a summary report was submitted to the Connecticut General Assembly and the Chairs of the Aging Committee in July 2016. The summary report provided an overview of the
various Elderly Nutrition Programs, the challenges faced by the programs and recommendations for advocacy at the federal, state and program levels.

3. Connecticut submitted its Senior Community Service Employment Plan (SCSEP) for Program Years 2016 through 2019 to the U. S. Department on Labor and has received approval of this plan. The State Workforce Plan will be the primary vehicle used to meet the needs of low-income older adults in Connecticut. For the purposes of the plan, older workers are defined as workers ages 55 and older. The activities in the plan are focused on the development of skill for workers in Connecticut’s employment sector which are expected to show the most growth.

4. The State Department on Aging has undertaken several initiatives and policies that highlight its commitment to older adult behavioral health. The SDA is a founding partner and active participant in the state’s Older Adult Behavioral Health Workgroup. The mission of this workgroup, made up of state agencies and private non-profit organizations is to increase communication, collaboration and problem solving among providers who have contact with older adults in a broad range of settings.

Through a partnership between CT DMHAS and the SDA, the workgroup worked with the UConn Center on Aging to conduct the CT Asset Mapping Project. This year-long asset mapping project:

- Focused on identifying strengths and needs by region.
- Gathered information from provider/social service regional focus groups, provider interviews, community forums and a statewide electronic survey.
- Produced a final report, “Meeting the Needs of Older Adults with Behavioral and Substance Abuse Disorders: A Statewide Asset Mapping Evaluation in CT”, released in March 2016 by SDA and DMHAS.
- Included in this report: integrated findings from the asset mapping project and conclusions and recommendations for the Workgroup to inform the future direction of mental health and aging and action steps to improve the behavioral health services delivery system for older adults.

5. The 2015-2017 CT State Plan on Aging acknowledges that prevention and wellness efforts are essential for older adults to achieve an optimal quality of life as they age and to remain independent in the community. SDA was one of the first State Units on Aging to phase-in a 100% evidence-based requirement for health promotion programs under federal Title IIIID. Subsequently in FFY 2015 the SDA determined that the focus of state elderly health screening funds must shift and begin to provide older adults with quality evidence-based prevention and wellness programs. To further enhance its commitment to mental health and aging and to fill a gap in community-based mental health programs for older adults, the SDA sought to implement Healthy IDEAS – Identifying Depression, Empowering Activities for Seniors - an evidence-based depression program designed to detect and reduce the severity of depressive symptoms in older adults with chronic health conditions and functional limitations. To accomplish this, SDA:
  - Released an RFP for the Healthy IDEAS Depression Detection Program, to embed depressive screening, detection and intervention into existing case management programs.
• Awarded three community-based providers, including a local mental health authority, state funds for this three-year project, beginning in SFY ’16.

6. The SDA recognizes the need to bring awareness to LGBT Aging, a population that has long been closeted and overlooked. A primary goal was to address the many challenges LGBT older adults face as they age: access to medical care, long term care, benefits, and issues of dignity, respect and understanding.

Achievements:

• Designated an LGBT Liaison for SDA
• Provided a daylong LGBT training for SDA staff through the National Resources Center on LGBT Aging
• Placed a “safe space” triangle logo on our website, following the training
• Developed a resource page which appears on the SDA website and includes information and resources as well as upcoming events for the LGBT community.
• Featured the work of SDA to address this population in the National Resource Center on LGBT Aging online newsletter.

The staff liaison achievements:

• Elected by the American Society on Aging to serve a two-year term as a member of the LAIN (LGBT Aging Issues Network) Council
• Worked with the CT Coalition on Aging as they focused their annual Carlson Forum on the topic of The Aging Experience: LGBT Rights in June 2016.