

KANSAS DEPARTMENT ON AGING

# Annual Report

Mark Parkinson, Governor

Martin Kennedy, Secretary



SFY 2010: July 1, 2009 - June 30, 2010

# About the Kansas Department on Aging

## **AGENCY MISSION:**

The Kansas Department on Aging promotes the security, dignity, and independence of Kansas seniors.

## **AGENCY VISION:**

KDOA envisions a community that empowers Kansas seniors to make choices about their lives.

## **AGENCY PHILOSOPHY:**

KDOA in its role of advocacy, funding services, quality assurance and oversight, directs programs and responsibly establishes collaborations that strengthen the Department's capability to be optimally responsive to the Social, Health Care, Nutritional, Housing and Transportation needs of Kansas Seniors. The Department is customer centered, placing emphasis on internal and external fair and reasonable delivery of services that result in pertinent, objective and measurable outcomes to benefit Kansas Seniors and Kansans living in adult care homes.

## **AGENCY GOALS:**

The goals of the Department are:

- **Health Promotion:** Help Kansas seniors achieve healthier, more active lives through prevention and intervention.
- **Array of Choices in Services:** Make an array of high quality community services and supports available to Kansas seniors and other individuals.
- **Nursing Home Culture Change:** Enhance Kansans' expectations toward person-directed options in the community and adult care settings.

The Kansas Department on Aging remains dedicated to those goals while addressing the financial challenges experienced by all State agencies during State Fiscal Year 2010. This has involved making difficult budget decisions.

The agency appreciates the support and collaboration of KDOA's stakeholders and constituents in helping achieve its goals and accomplishments in these difficult times. The numbers, charts and graphs in the following pages tell the nuts-and-bolts story of how that has been done.

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# KDOA Organizational Directory

## Senior Staff

Secretary .....	785-296-4986
Chief Counsel .....	785-368-7228
Administrative Services Commissioner .....	785-296-6464
Licensure, Certification and Evaluation Commissioner (vacant)	
Public Affairs Director .....	785-296-6154
Program and Policy Commissioner .....	785-296-0700

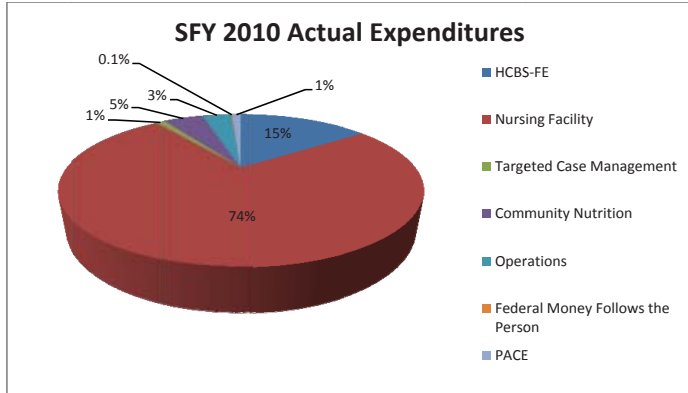
## Other Helpful Numbers

Human Resources Director .....	785-296-6361
Nursing Facility Complaint Toll-Free Hotline .....	800-842-0078
Long Term Care Consultant .....	785-296-1246
Senior Health Insurance Counseling for Kansas (SHICK) Hotline.....	800-860-5260
KDOA TTD.....	785-291-3167
KDOA Toll Free (in state only).....	800-432-3535
KDOA Fax.....	785-296-0256

# Expenditures & Sources of Funding

## SFY 2010

### Actual Expenditures



**Nursing Facility** **\$358.7**

**Home and Community-Based Services for Frail Elderly (HCBS-FE)** **\$74.5**

**Federal Money Follows the Person** **\$0.4**

**Program for All-inclusive Care for the Elderly (PACE)** **\$4.3**

**Targeted Case Management (TCM)** **\$4.9**

**Community Nutrition** **\$22.5**

- Congregate Meals
- Home-Delivered Meals
- Older Americans Act (OAA)
- Senior Care Act (SCA)
- Other Community Programs

**Operations** **\$16.6**

- Licensure, Certification and Evaluation (LCE)
- Client Assessment, Referral and Evaluation (CARE)
- SHICK and ADRC
- Administration

**TOTAL** **\$481.9**

*(Totals in millions)*

## Sources of Funding

Following are the Kansas Department on Aging's major program groups and sources of funding.

**Medicaid and ARRA Medicaid** – from Centers for Medicare and Medicaid Services

- Nursing homes
- Program of All-inclusive Care for the Elderly (PACE)
- Client Assessment, Referral and Evaluation (CARE)
- Home and Community-Based Services for the Frail Elderly (HCBS-FE)
- Targeted Case Management (TCM)

**Older Americans Act (OAA) programs** – grants from Administration on Aging

- III-B Access, In-home and Community Services – 5% state match, 10% local match
- III-D Disease Prevention and Health Promotion
- III-E National Family Caregiver Support Program – 25% state and/or local match
- VII Allotments for Vulnerable Elder Rights Protection Activities

**Older Americans Act (OAA) Nutrition Programs**

- III-C Nutrition and ARRA OAA Nutrition – grant from Administration on Aging
- Nutrition Services Incentive Program (NSIP)
- State Match (5%) and local cash and/or in-kind match (10%)
- U.S. Department of Agriculture – Commodities
- Participant contribution and non-match local cash

## **State Funded Programs**

- Senior Care Act (SCA) – includes Social Services Block Grant funds through a sub grant from the Kansas Department of Social and Rehabilitation Services
- Participant fees

## **Other**

- Senior Health Insurance Counseling for Kansas (SHICK) – Centers for Medicare and Medicaid Services (CMS)
- SMP – Administration on Aging grant with 25% matching state funds
- Aging and Disability Resource Center – Grant from the Administration on Aging and Centers for Medicare and Medicaid Services, with 5% matching state funds
- Seniors Together Enjoy Physical Success (STEPS) – Grant from the Sunflower Foundation: Health Care for Kansans
- Hospital Discharge Planning Model with Aging and Disability Resource Center expansion – Centers for Medicare and Medicaid Services, with 5% local cash match
- Money Follows the Person Rebalancing Demonstration – Sub grant for Department of Social and Rehabilitation Services for the Frail Elderly component of a Centers for Medicare and Medicaid Services grant, with 20% state match
- Partnership Loan Program (PLP) – Kansas Intergovernmental Transfer Program
- Partnership Grant Program – Interest from Partnership Loan Program loans

# Choices in Consumer Services

*Goal: Make an array of high-quality supports and services available to Kansas seniors and other individuals*

## Senior Care Act

### Purpose:

The Senior Care Act provides a coordinated system of in-home services for people age 60 or older who face difficulties in self-care and independent living to prevent inappropriate or premature institutionalization of persons who have not yet exhausted their financial resources. According to last year's Quality Assurance Review of customers, 99% reported that having services through Senior Care Act improved their quality of life.

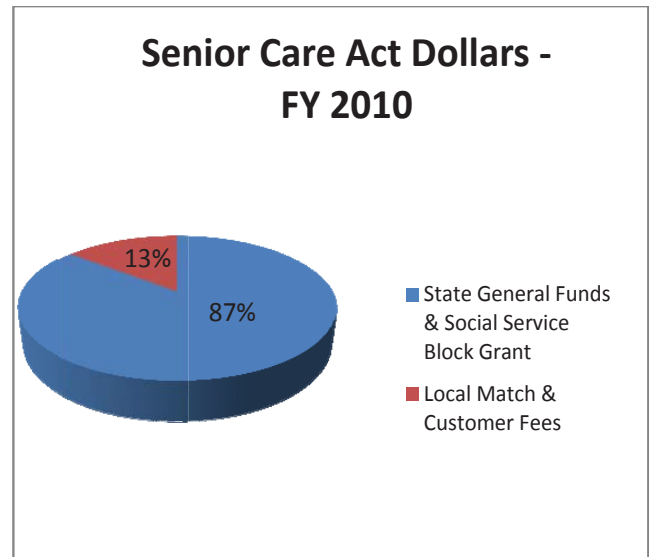
### Funding:

Although this program is funded through Federal State General Funds, it also includes local funding and customer co-payments. Each customer is charged a fee taken from a sliding scale based on the customer's family size, monthly income and liquid assets. Depending on those factors, the fee can be anywhere from a small donation to 100% of the cost of the services. State General Funds along with the federal Social Services Block Grant provided **\$6,510,010**. With additional local match and customer fees, the total amount of Senior Care Act expenditures in SFY 2010 was **\$7,482,311**.

### Number of persons who received Senior Care Act services during SFY 2010:

There were 5,502 seniors statewide who received one or more services during the SFY 2010. Approximately 1,598 seniors received one or more services per month. The chart below shows the most common types of services and number of customers served during SFY 2010.

Service	Acronyms	SFY 2010
Case Management – Senior	CMGTS	3,789
Assessment	ASMT	3,621
Homemaker	HMKR	2,531
Attendant Care	ATCR	1,001
Other	All Other Services	2,711



## Home and Community-Based Services for the Frail Elderly (HCBS-FE)

### Purpose:

The Home and Community-Based Services for the Frail Elderly program provides Medicaid eligible customers with the opportunity to receive cost-effective community-based services as an alternative to nursing facility care.

### Persons served:

An average of 5,813 seniors a month received services, such as adult day care, sleep cycle support, installation and rental of personal emergency response equipment, wellness monitoring, attendant care services levels I and II, comprehensive support, assistive technology, nursing evaluation visit, medication reminder, and oral health services.

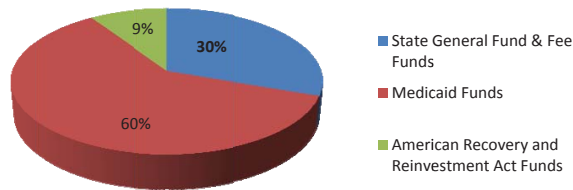
### Service providers:

Through SFY 2010, the average monthly number of HCBS-FE providers decreased to 378 unduplicated active providers per month from 388.

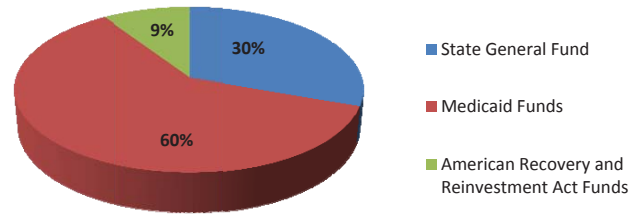
**Funding:**

In SFY 2010, \$74,476,067 was expended for services. The average cost per customer for HCBS-FE services was \$1,068 per month. Of this total amount for services, approximately 60% was federally funded by Medicaid funds, 9% was funded with funds from the American Recovery and Reinvestment Act, and 30 percent was state funded.

**HCBS-FE Funding**



**TCM Dollars**



## Client Assessment, Referral and Evaluation Program (CARE)

## Targeted Case Management

**Purpose:**

Targeted Case Management (TCM) provides long-term case management to Medicaid eligible frail elders who are seeking assistance to remain in their homes or community. TCM services include assessment, developing and updating plans of care, resource development, assisting the customer in acquiring needed services, ensuring that public and private resources are being used efficiently. The service is funded as a Medicaid State Plan Service expense rather than an expense to the Home and Community-Based Services-Frail Elderly waiver.

**Persons Served:**

In SFY 10, TCM served a monthly average of 4,289 customers.

**Funding:**

In SFY 2010, the average cost per customer per month for TCM was \$93, which breaks down to approximately 2.2 hours of service delivery per customer per month. The total cost of TCM services was \$4,764,753. These services are broken down with an approximate match of 60% federal Medicaid funds and 30% state funds with 9% of the funds coming from the American Recovery and Reinvestment Act.

**Purpose:**

The Client Assessment, Referral and Evaluation program provides an assessment to identify customer preferences on long-term care service options to determine appropriate placement in long-term care facilities and collects data regarding individuals being assessed for possible nursing facility placement. The CARE program complies with Federal Preadmission Screening and Resident Reviews (PASRR) laws, evaluates needs for community services, provides information and education regarding long term care choices, and diverts more than 20% of long term care residents to community living. A savings of \$1,794 per month is realized for each individual using Medicaid services and able to return to the community after a nursing facility stay.

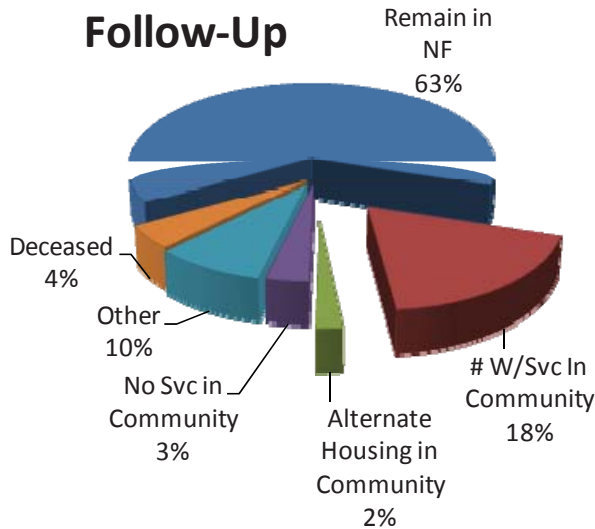
**Persons served:**

A total of 13,245 Level I assessments were completed for individuals; 110 individuals received more than one assessment due to a significant change in their physical and/or mental health condition. A total of 426 Level II assessments were completed. Of those, 343 were for persons with mental illness, and 83 with mental retardation/developmental disability. Follow-up contact is made 30 days after the CARE assessment. In SFY 2010, at the 30-day follow-up, 2,659 individuals (20.4%) had been diverted from nursing home care.

### Diversion emphasis:

The CARE program had a diversion rate at 30 days for SFY 10 of 20.36%, compared to SFY 09 of 20.52%. This achievement means that in Kansas 1 in 5 persons who enter a nursing facility is able to return to the community.

### Status at 30 Day Follow-Up

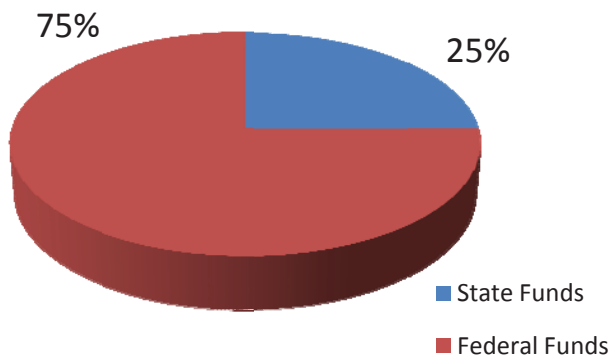


### Funding:

In SFY 2010, the cost for Level I assessments was \$1,337,478. The cost for Level II assessments was \$137,675.

During SFY 2010, the average monthly Medicaid payment for a resident in a nursing facility was \$2,861. During the same time, the average monthly Medicaid payment for a person served by the Home and Community-Based Services-Frail Elderly (HCBS-FE) waiver program was \$1,067. The potential overall savings from those individuals who were diverted from more costly nursing facility care for an entire year is approximately \$31.5 million.

### CARE Dollars



## State Money Follows the Person

### Purpose:

The Money Follows the Person Project allows funds for persons living in nursing homes to be transferred to the Home and Community Based Services-Frail Elderly (HCBS-FE) waiver program upon relocation to the community. Qualifications for this program require a 90-day continuous stay in a nursing facility.

### Persons served:

56 people moved from nursing homes to the HCBS-FE waiver program.

### Funding:

The state general funds were transferred from the nursing home budget (KDOA) to the HCBS-Frail Elderly waiver budget (KDOA) twice a year. The total state general fund transfer in SFY 2010 was \$536,888 for the Frail Elderly Waiver.

## Money Follows the Person Federal Demonstration Grant

### Purpose:

The Money Follows the Person Demonstration Grant allows for funds for persons living in nursing homes to transition



to the community with HCBS services for the frail elderly. This program allows for additional funds to help with the cost of transitions. In May, qualifications for this program changed. It now requires three months of continuous stay in the nursing facility instead of six months.

### Persons served:

Thirty-four people moved from the nursing home to the HCBS-Frail Elderly waiver.

### Funding:

The state general funds were transferred from the nursing home budget (KDOA) to the HCBS-Frail Elderly waiver budget (KDOA) twice a year. The

total state general fund transfer in SFY 2010 was **\$235,620**. These funds are to be used to sustain or develop new initiatives for the programs.

**Community Transition Opportunity:**

KDOA has received a grant from the Centers for Medicare and Medicaid Services (CMS) to develop an online web-based referral process for nursing facilities to use when a resident has expressed an interest in returning to the community upon completion of the MDS assessment. This referral process allows the Local Contact Agencies (Area Agencies on Aging and Centers for Independent Living) to make face-to-face contact with the resident to explore community options and talk about transitions. The project went live on October 1, 2010. To date, there have been 490 referrals made to the Local Contact Agencies.

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## Senior Health Insurance Counseling for Kansas (SHICK)

**Purpose:**

More than 450 Senior Health Insurance Counseling for Kansas volunteers, working through 14 regional Sponsoring Organizations across the state, help Kansans understand their Medicare benefits. SHICK counselors provide information and assistance with Medicare claims and appeals, Medicare Prescription Drug Coverage (Part D), Medicare supplemental insurance (Medigap) policies, programs that help pay Medicare premiums and deductibles, and long term care financing and options. SHICK counselors also help eligible consumers access the assistance programs offered by pharmaceutical companies to reduce medication costs.



**Number of persons served during Grant FY 2010:**

SHICK services are available to all Kansas Medicare beneficiaries at no cost to the customer. The SHICK program provided counseling services to 27,284 Kansans and reached 883,491 people through media and outreach events in the 2010 grant year.

**Funding:**

SHICK is funded by a grant from the Centers for Medicare and Medicaid Services (CMS). CMS provided a State Health Insurance Assistance Program (SHIP) Basic grant of \$433,875 for the 2010 grant year.

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## SMP

**Purpose:**

The Kansas SMP program (formerly Senior Medicare Patrol) educates Medicare and Medicaid beneficiaries and providers on how to recognize and report health care error, fraud and abuse. Kansas SMP collaborates with community-based organizations across the state to recruit and train volunteer educators.

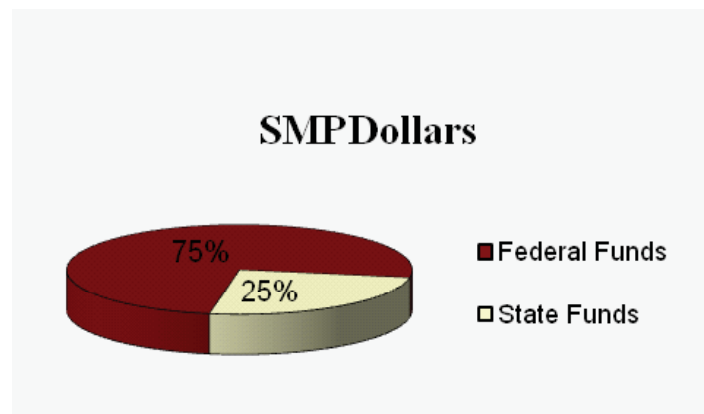


**Persons served:**

SMP has more than 180 trained volunteers across the state. In grant year 2010, staff and volunteers provided education about health care fraud and abuse to nearly 3,400 people through community education events. Kansas SMP also helped process 177 fraud inquiries.

**Funding:**

Kansas SMP is funded by a grant from the Administration on Aging (AoA), with 75% federal funds being matched with 25% state funds. In grant FY 2010, AoA provided **\$78,241** and the state provided **\$26,080**.



# Lifelong Communities Initiative

## **Purpose:**

The quality of life for senior citizens in Kansas communities is enhanced



through participation in the Lifelong Communities Initiative. KDOA assists communities to plan for and better serve seniors in the six Lifelong areas: Business, Community Service, Health Care, Housing, Transportation and Government. Previously, the Initiative was recognized as a “Program Champion” by the U.S. Administration on Aging (AoA). The honor is designed to highlight programs and initiatives that demonstrate principles of the AoA strategy to modernize health and long term care for senior citizens and those with disabilities.

## **Communities designated Lifelong:**

Communities that have officially been named Lifelong Communities are: Topeka, Dodge City, Great Bend and Chase County. New demonstration communities are Lawrence/Douglas County, Wyandotte County/Kansas City, and Liberal. Garden City is working to complete the Community Assessment Tool, and Oberlin is ready to be named. Communities are recognized for innovation in providing community service projects for seniors. Projects that benefit seniors benefit everyone in a community.

This year, the Lifelong Communities Initiative website was updated. A Lifelong Communities Tool Kit was developed to help Kansas communities become familiar with how to participate in the Initiative. The Tool Kit contains the community assessment tool, template for action plans and implementation of community projects. Technical assistance is provided to each community throughout the process by KDOA staff.

Lifelong Communities Initiative presentations have been made to the National Active and Retired Federal Employees (NARFE), KDOA Senior Summit and Kansas Area Agencies on Aging Association (K4A)

meeting. The Initiative is also mentioned during KDOA Overview presentations.

The four-step process involves:

- 1) Obtain support from local government.
- 2) Complete community assessment tool.
- 3) Develop and implement action plan.
- 4) Verification, designation.

## **Funding:**

KDOA does not have a budget line item for this Initiative. Money needed to participate in the Initiative is driven by the community’s action plan. Minimal expenses are covered through the administrative budget.

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# Nursing Facility Audits and Quality Review

## **Purpose:**

The KDOA auditors perform desk reviews and field audits on nursing home cost reports to ensure that reimbursement rates for Medicaid residents are in compliance with state and federal regulations and policies. The auditors perform financial compliance reviews of other programs funded by KDOA as required.

## **Audits done:**

In SFY 2010, 325 Medicaid cost reports were desk reviewed and 18 nursing home field audits were completed. Also, field work was completed on one nursing home chain. Because nursing home rates are determined from a three-year period, field audit work involves reviewing several years of cost data, from three to seven years for each facility audited. Eighty-one (81) facility asset rebase requests were processed. A special audit was also conducted to further scrutinize one of the rebase requests.

## **Savings:**

Nursing home cost reports were reduced \$2,772,440.

## Nursing Facility Rate-Setting

### Purpose:

KDOA is responsible for setting Medicaid rates for nursing homes. At the end of SFY 2010, 317 Medicaid certified nursing homes provided 24-hour skilled nursing care. The Medicaid rates are case mix adjusted based on the acuity level of Medicaid residents.

### Persons served:

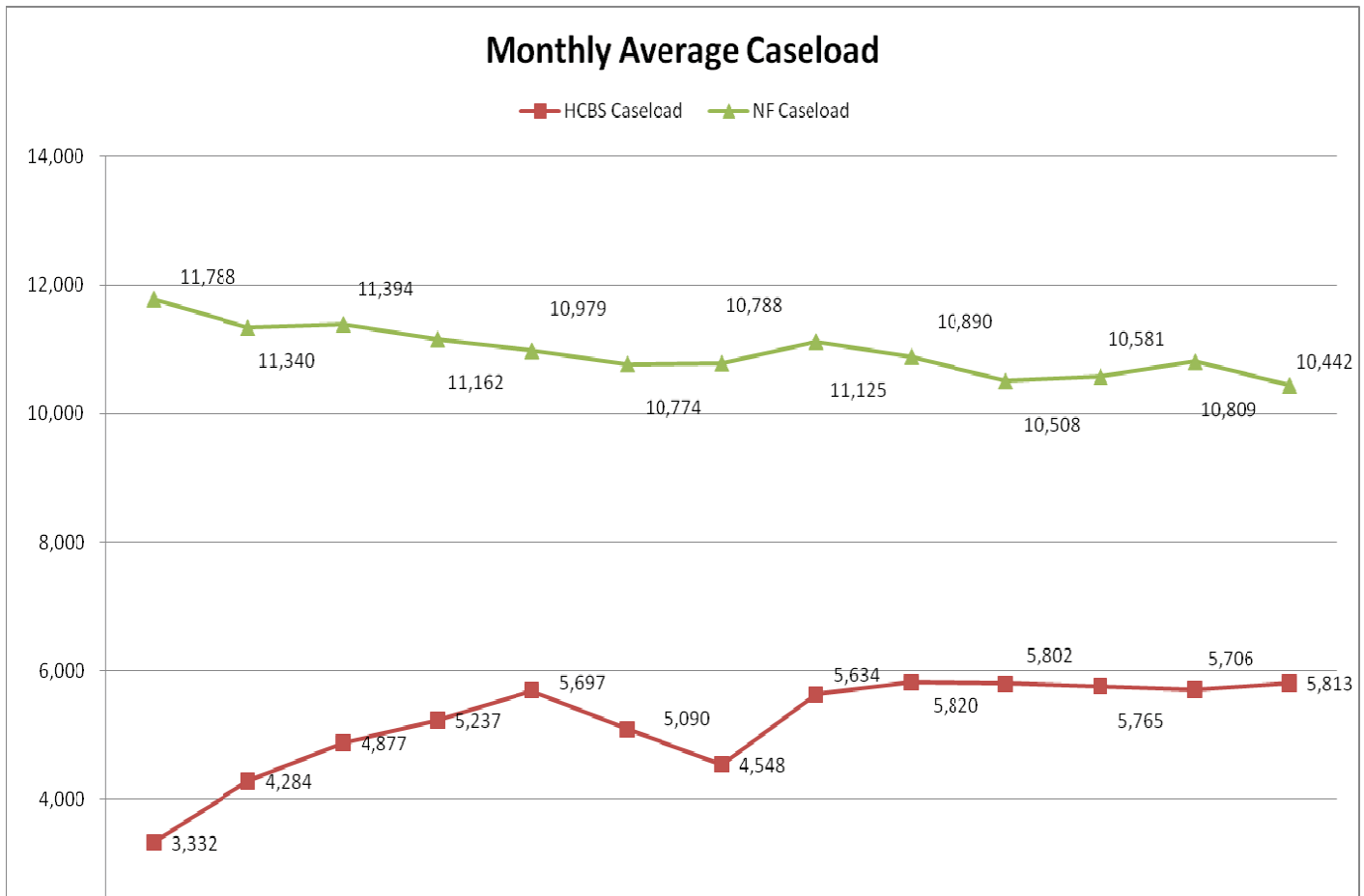
Services were provided to an average of 10,442 Medicaid eligible residents each month during the year.

### Funding:

The total nursing home expenditure in SFY 2010 was **\$358.7 million**. The budget is typically about 60% federally funded and 40% state funded, but with enhanced funding from the American Recovery and Reinvestment Act (ARRA), the split for SFY 2010 was about 70% federal and 30% state.

### Demographics of those served (Resident Acuity Level Profile as of July 1, 2009):

	RESIDENT CASE MIX		
CATEGORY	EXAMPLES OF PATIENT CHARACTERISTICS	PERCENT TOTAL RESIDENTS	PERCENT MEDICAID ONLY
Rehabilitation	Rehabilitation therapy received	12.41%	8.64%
Extensive Services	In past 14 days, received intravenous medication, tracheotomy care, required ventilator/respirator, or in past 7 days received intravenous feeding	5.06%	3.52%
Special Care	Multiple sclerosis, cerebral palsy, quadriplegia, or respiratory therapy	9.02%	9.10%
Clinically Complex	Comatose, have burns, septicemia, pneumonia, internal bleeding, dehydration, dialysis, or receive chemotherapy	21.49%	23.99%
Cognitive Impairment	Alzheimer's disease or other types of dementia	10.52%	11.10%
Behavior Problems	Resists care, combative, physically and/or verbally abusive, wandering, or delusional	1.14%	1.53%
Physical Function	Restricted physical functions	40.36%	42.09%



## Program of All-inclusive Care for the Elderly (PACE)

### Purpose:

The Program of All-inclusive Care for the Elderly (PACE) is a managed care program that combines traditional health care coverage with coverage for long term care services. The provider accepts a capitated payment rate in the form of a monthly premium to provide all Medicaid/Medicare long term care and medical services. This includes in-home services that might otherwise be accessed through the HCBS waiver program, as well as nursing home services. The capitated rates are paid by KDOA, the Kansas Health Policy Authority (KHPA) and the federal Centers for Medicare and Medicaid Services (CMS). The rates are based on the historical costs of traditional Medicaid programs incurred by beneficiaries residing in the PACE organization's service area. By federal regulation the state must negotiate a rate that is at least 5% less than the adjusted historical average Medicaid costs. The state benefits from this guaranteed savings factor and the predetermined all-inclusive payment rate.

Although the provider accepts full responsibility for the beneficiaries' medical and long term care needs, they also benefit from their oversight of the full health care network and the ability to better project revenues. The beneficiaries benefit from a seamless health care network that focuses on keeping individuals healthy and independent.

### Persons served:

Kansas has PACE projects operated by Via Christi Health Systems in Wichita and Midland Care Connection in Topeka. An average of 253 participants per month were enrolled in PACE during SFY2010. The average cost per customer per month was \$1,403\*.

### Funding:

The total PACE expenditures for KDOA were **\$4,255,763\*** (approximately \$1.7 million in state funds). The budget is approximately 70% federally funded and 30% state funded, with the ARRA enhanced funding..

\*Amounts reflect mandated 10% reduction

# Older Americans Act - Title III-E Family Caregiver Support Program

## Purpose:

The Family Caregiver Support Program provides a multifaceted system of support services to assist caregivers in the areas of health and finance, and in making decisions and solving problems related to their caregiving roles. Each Area Agency on Aging determines which services are needed within its planning and service area. Services may include: assistance, information, respite, counseling, support groups, training (in an individual or group setting), and supplemental service (attendant/personal care, bathroom items, chore, flex service, homemaker, transportation, and repair/maintenance/renovation). No fees are charged to the caregiver for services.

## Persons served:

Participants must meet one of the three following criteria to be eligible for services;

1. An individual who is an informal provider of in-home and/or community care to an older individual or an adult caring for an individual with Alzheimer's.
2. A grandparent or relative age 55 or older who provides care for a child younger than age 19 and meets all of the following conditions;
  - a. Lives with the child
  - b. Acts as the child's primary caregiver because the parents are unable or unwilling to care for the child.
  - c. Has a legal relationship (legal custody or guardianship) or is raising the child informally.
3. A grandparent or relative age 55 or older who provides care for an adult age 19 to 59 who has a disability

## Funding:

Estimated expenditures for FFY 2010 as of October 20, 2010, were estimated at **\$1,200,290**.

## Number of persons served during FY 2009:

### FFY 2009\* III-E Caregiver Services

Service	Persons Served	Units	Total Expenditure^
Respite Care	363	22,301	\$327,130
Access Assistance	5,254	10,784	269,819
Information Services	400,706	3,043	266,397
Supplemental Services	359	78,353	266,149
Counseling/Support Groups/Caregiver Training	326	1,266	70,941

### FFY 2009\* III-E Grandparent Services

Service	Persons Served	Units	Total Expenditure^
Counseling/ Support Groups/Caregiver Training	42	122	\$10,000
Supplemental Services	9	361	397

\*Due to reporting timelines, the most recent data available for persons services is from FFY 2009.

^Total Expenditure includes funding from all resources, including OAA, program income, match, in-kind and mill levy.

## Aging and Disability Resource Center (ADRC)

### Purpose:

The Aging and Disability Resource Center (ADRC) grants create streamlined access to program information, application processes and eligibility determination for all aging and disability services. In Kansas, the ADRC project is collaborating with the Social and Rehabilitation Services Real Choice Systems Transformation project as well as other projects that are focused on improving access to community services.



### Progress:

The Kansas Aging and Disability Resource Connection has pilot sites in Wichita (Central Plains Area Agency on Aging and Independent Living

Resource Center) and in Hays (Northwest Kansas Area Agency on Aging, Living Independently in Northwest Kansas, and Southeast Kansas Independent Living Resource Center). Staff members from the pilot site agencies are working with staff from KDOA, KHPA and SRS as well as community organizations, service providers and consumers to develop tools that will improve access to services. Work teams are developing a searchable online database of available resources; a referral and assessment process that will speed up referrals between partner agencies; and a web-based interface that will help streamline the Medicaid application process.

**Funding:**

ADRC is funded by a grant from the Centers for Medicare and Medicaid Services (CMS). CMS provides 95%, and the state provides 5%. In the 2010 grant year, CMS provided **\$166,145**; and the state provided **\$8,307** in-kind contribution from project partners.

## **Prevention of Elder Abuse, Neglect and Exploitation (PEANE) Special Project Grants**

**Purpose:**

The Special Project Grants, awarded to a variety of agencies and organizations, are designed to provide either education or training for the prevention or awareness of elder abuse, neglect, exploitation; or financial abuse of the elderly. The grant periods are July 1, 2010, through May 31, 2011, and August 1, 2010, through July 31, 2011.

Awards were provided to the following agencies:

- Central Plains Area Agency on Aging
- Mental Health Association of South Central Kansas
- Jayhawk Area Agency on Aging
- Butler County Department on Aging
- Kansas Advocates for Better Care
- Southwest Kansas Area Agency on Aging
- Four County Mental Health Center
- Mainstream, Inc.
- Kansas Home Care Association

**Persons served:**

Participants include individuals, caregivers and professionals in the fields of social work, health care, law enforcement and local government services.

**Funding:**

Title VII FFY 10 state award was **\$45,843**.

## **Older Americans Act - Title III-B Legal Services**

**Purpose:**

The Legal Assistance Program provides access to the system of justice by offering advice and representation by an attorney who acts as an advocate to ensure older individuals have:

- Access to essential services and/or financial resources.
- Assistance in understanding their rights and exercising choices.
- Protection of their rights to be autonomous and retain dignity.

Services were provided in the following priority areas of law: protective services, income, public benefits, health care, housing/real estate, consumer/financial, individual rights. Also community education programs are given on specific legal topics. Outreach interventions are made to identify or target potential customers to encourage their use of legal assistance services.

**Funding:**

Older Americans Act III-B with a minimum Area Agency on Aging proportion of 5%.

**Persons served:**

<b>Service</b>	<b>Persons Served</b>
Priority areas of law with advice or representation	2,434
Community education programs	1,684
Greatest social or economic needs	692
Frail/disabled or homebound	343

# Older Americans Act - Title III-B Access, Community and In-Home Services

Title III-B of the Older Americans Act (OAA) provides for Access, Community and In-Home Services.

- **Access Services** provide seniors with community services, such as Information and Assistance (receiving current information from KDOA and AAAs regarding opportunities and services), Case Management (determining types and amounts of services needed), Legal Services (provides seniors access to the system of justice by offering advice and representation by an attorney) and Transportation (assisting an individual

to get to a location where services are provided).

- **In-Home Services** help seniors remain in their homes and communities and include attendant care services, homemaker services, respite care and adult day care.
- **Community Services** are designed for seniors with the ability to travel to the point of service and encourage seniors to remain active members of the community. Services are provided either directly by the AAA or under contract or grant by other agencies.

### Funding:

Expenditures reported for Federal Fiscal Year (FFY) 2010 as of October 20, 2010, were estimated at **\$3,522,076**. This includes OAA, program income, match, in-kind and mill levy.

## Select OAA Title III-B Services

### FFY 2009\* III-B Access Services

Service	Persons Served	Total Expenditure^
Information & Assistance	58,818	\$ 909,176
Transportation	671	\$ 336,621
Case Management	792	\$ 137,584
Outreach	3,270	\$ 70,042
Assessment (Abbrev & Full)	662	\$ 45,852

### FFY 2009\* III-B Community Services

Service	Persons Served	Total Expenditure^
Legal Assistance	1,555	\$ 323,509
Newsletter	178,090	\$ 202,278
Material Assistance	147	\$ 60,936
Repairs/Maint/Renovation	158	\$ 67,205
Screening	742	\$ 56,668
Supervision	84	\$ 44,441
Public Education/Training	28,157	\$ 38,342
Recreation	561	\$ 23,072
Advocacy/Representation	30	\$ 9,824

### FFY 2009\* III-B In-Home Services

Service	Persons Served	Total Expenditure^
Homemaker	614	\$ 678,957
Attendant Care	241	\$ 321,892
Respite	120	\$ 57,140
Telephoning	964	\$ 35,687
Visiting	226	\$ 24,791

\*Due to reporting timelines, the most recent data available for persons served is from FFY 2009.

^ Total Expenditure includes funding from all resources, including OAA, program income, match, in-kind and mill levy.

# Culture Change in Long Term Care

*Goal: Enhance Kansans' expectations toward person-directed options in the community and adult care settings.*

## Promoting Excellent Alternatives in Kansas (PEAK)

### Purpose:

The Promoting Excellent Alternatives in Kansas (PEAK) program promotes and supports culture change in nursing homes as they pursue person-directed care in the areas of resident control, staff empowerment, home environment, and community involvement. The two components of PEAK are recognition and education. KDOA has partnered with Kansas State University's Center on Aging to develop the education component. The resources they developed are available on the KDOA website.



### PEAK Awards:

Since 2002, KDOA has recognized homes for their achievements in person-centered care. The 2010 PEAK winners were:

- Bethesda Home, Goessel
- Brewster Health Center, Topeka
- Evergreen Community of Johnson County, Olathe
- Kansas Masonic Home, Wichita
- Lone Tree Retirement Center, Meade
- Parkside Homes, Hillsboro

### Funding:

No funds are budgeted for the PEAK Nursing Home Initiative. The Nursing Facility Civil Monetary Penalty fund was used to provide a small cash gift to the homes recognized.

## Long Term Care Division

### Purpose:

The Long Term Care Division professional staff, which consists of two registered nurses, a registered licensed dietitian, and an environmental specialist, serves as consultants to consumers, adult care home providers, health care facility surveyors and other stakeholders in the long term health care industry. Consultation is provided through individual technical support, educational presentations, a quarterly newsletter and participation in work groups. Division staff is also responsible for the development of state adult care home regulations and conducting physical environment inspections of adult care homes following construction projects.

### 2010 Activities:

Staff presented 37 education programs attended by 1,350 individuals. Topics included regulatory updates, care practices, culture change initiatives and MDS 3.0.

Division staff continued to assist adult care homes transitioning to person-centered care both in practice and in their physical plant. Staff met in person with 38 adult care home owners/providers to review regulatory requirements for construction and remodeling projects. In addition, 54 onsite licensure inspections were conducted.

Through the Workforce Enhancement Grant, monies totaling **\$140,500** were awarded to seven entities to provide joint education for unlicensed and licensed staff in free standing nursing homes and long term care units of hospitals.

### Funding:

In SFY 2010, **\$546,521** was budgeted from Medicare, Medicaid, state general funds and fee funds. Expenditures were **\$534,747**.

## Mental Health and Residential Care Facilities Division

### **Purpose:**

The Mental Health and Residential Care Facilities Division evaluates intermediate care facilities, assisted living facilities and other “state licensed only” facilities for state licensure and federal certification. These facilities serve several thousand elderly, physically impaired and intellectually disabled who reside in a variety of institutional and community-based settings.

### **State licensing:**

Of the 9,771 beds in state only licensed facilities, 6,132 are within licensed Assisted Living Facilities, 1,548 are in Residential Health Care Facilities, and 984 are encompassed by state institutions for the mentally ill and developmentally disabled. The remaining 1,107 beds are in community-based facilities including Boarding Care Homes, Homes Plus and Adult Day Care Centers.

### **Quality Review:**

The division also administers the Quality Review Program responsible for collecting field data for use in determining compliance with state and federal regulation by the Area Agencies on Aging (AAAs) and other case management entities and service provision through the state general fund, the Older Americans Act and the Home and Community-Based Services-Frail Elderly waiver. On-going reviews are completed on a statewide, statistically significant sample of customers.

### **Funding:**

In SFY 2010, **\$1,184,872** was budgeted from Medicare, Medicaid, Older Americans Act, state general fund and fee funds. Expenditures were **\$1,138,229**.

## Licensure, Certification and Evaluation Division

### **Purpose:**

The Licensure, Certification and Evaluation Division promotes excellence in the health care and living conditions of more than 18,000 individuals residing in adult care homes through the application of federal and state regulatory standards. Through initial licensure processes and ongoing annual surveys, state surveyors review a variety of aspects of nursing home care. Federal and state regulations assure that residents receive care that meets accepted standards.

Other regulations assure that residents’ rights are protected and they are protected from abuse, neglect and exploitation. In addition, the surveyors examine the physical environment to assure facilities provide safe and sanitary conditions for residents. Fire and safety inspections are provided under contract by the State Fire Marshal.

This division is also responsible for surveyor training and orientation; survey quality improvement efforts; policy and procedure development; survey management; enforcement activities; complaint intake; referral and investigation management. Many of the activities of the Division are performed under contract to the federal Centers for Medicare and Medicaid Services (CMS). During SFY 2010, the Division continued implementation of CMS’ Quality Indicator Survey (QIS) process.

The Division is required to survey all nursing facilities within an overall 12-month average, with no individual facility exceeding 15 months.

### **Nursing home complaints:**

KDOA conducted investigations about adult care homes, including some for abuse, neglect and/or exploitation of residents, generated from 6,249 complaints.

### **Funding:**

In SFY 2010, **\$5,505,746** was budgeted for licensure and certification programs, including complaints, from Medicare, Medicaid, state general funds and fee funds. Expenditures were **\$5,220,267**.

## Partnership Loan Program and Partnership Grant Program (PLP and PGP)

### Purpose:

The Partnership Loan Program supports the expansion of services and housing alternatives for senior Kansans by providing low interest loans. The Partnership Grant Program uses interest income from the PLP loans to fund competitive matching grants for the benefit of long term care programs.

### PLP Projects:

Since the inception of the PLP, 10 housing projects with a total of 150 units have been funded. They are located in Anthony, Caldwell, Dighton, Eskridge, Holyrood, Newton, Norton, Hutchinson, Wilson and Winchester. The PLP focuses on rural communities lacking adequate housing options for seniors and, more recently, innovation in the long term care environment. Projects include senior apartments, assisted living, homes plus, and Green Houses®, which are group homes for elders built to residential scale. Green Houses® provide the necessary clinical care found in nursing homes in a more social environment, where both residents and staff benefit from the person-centered approach to daily living.

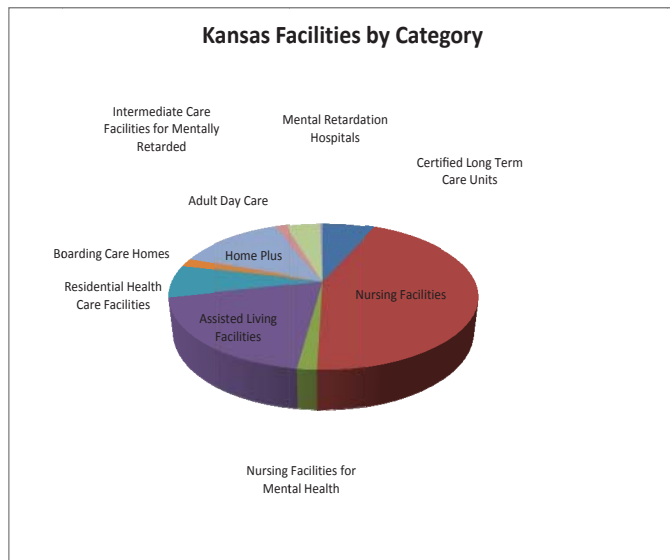
### PGP Projects:

A grant, awarded in SFY 2007 from the PGP, established a long term care home telehealth pilot project in southeastern Kansas. Additional grant funding was provided to extend the pilot through SFY 2010. This proactive care model, involving technology and telecommunications, provides participants with chronic diseases the opportunity to take an active role in their health care by helping to identify the need for preventive intervention before situations become acute. KU Medical Center has signed a research contract to determine the effectiveness in terms of cost and quality of life for this type of care delivery system on a frail elderly population living in a community environment.

### Funding:

Total funds distributed or committed for distribution from program inception through SFY 10: Partnership Loan Program, **\$5,638,491**; Partnership Grant Program, **\$651,959**.

Kansas Facilities by Category		SFY 2010
Certified Long Term Care Units	LTCU	44
Nursing Facilities	NF	289
Nursing Facilities for Mental Health	NFMH	11
Assisted Living Facilities	ALF	128
Residential Health Care Facilities	RHCF	47
Boarding Care Homes	BCH	12
Home Plus	HP	88
Adult Day Care	ADC	10
Intermediate Care Facilities for Mentally Retarded	ICF/MR	29
Mental Retardation Hospitals	MRH	2
<b>TOTAL</b>		<b>660</b>



Number of Complaint Intakes	SFY 2010
Long-Term Care Providers	4,967
Unlicensed Facilities	0
ICFMR	201
ALF, RHCF, BCH, HP, ADC	751
Non-Long Term Care Providers Regulated by KDHE	330
<b>TOTAL</b>	<b>6,249</b>

# Healthy Aging

*Goal: Help Kansas seniors achieve healthier, more active lives through prevention and intervention.*

## Older Americans Act - Title III-C Nutrition Program

Meals are provided to eligible participants on a contribution basis in a congregate setting (Title III-C(1)), or within a homebound individual's place of residence (Title III-C(2)).

### Persons served:

There were 25,785 congregate customers (68%) provided with 1,555,678 meals and 11,934 home delivery customers (32%) provided with 1,798,864 meals in FFY 2009.

### Demographics of those served:

Characteristics of persons receiving meals are shown in the following table:

Characteristics	Congregate	Home Delivered
Male	37%	32%
Female	63%	68%
Lives alone	43%	55%
Aged 60 and under	6%	1%
Aged 61 to74	39%	27%
Aged 75 to 84	37%	38%
Aged 85 or older	18%	34%

### Funding:

**\$18,306,053** from all sources was spent to provide meals to seniors in FFY 2009.

## Older Americans Act - Title III-D Disease Prevention and Health Promotion Services

Title III-D of the Older Americans Act provides Disease Prevention and Health Promotion Services grants to Area Agencies on Aging. These grants support any of the 15 health-related services, such as health risk evaluations, screening, nutrition counseling, health promotion programs, physical fitness and exercise programs, home injury control screening and the educational activities for the prevention of depression.

### Funding:

As of October 20, 2010, **\$226,524** from all sources was expended for health-related services in Federal Fiscal Year (FFY) 2009.

### Number of persons served during FY 2009\*:

#### FFY 2009 III-D Disease Prevention and Health Promotion Services

Service	Persons Served	Total Expenditure <sup>^</sup>
Medication Management Education	4,593	\$ 80,231
Physical Fitness and Exercise Programs	807	\$ 71,157
Screening	1,121	\$ 26,750
Health Promotion Programs	1,690	\$ 22,971
Information on Age-Related Disorders	690	\$ 21,927
Nutrition Education	902	\$ 3,488

\*Due to reporting timelines, the most recent data available for persons served is from FFY 2009.

<sup>^</sup> Total Expenditure includes funding from all resources.

Based on financial reports submitted by AAAs as of October 20, 2010.

## Seniors Together Enjoy Physical Success (STEPS)

### Purpose:

The Seniors Together Enjoy Physical Success program provides fitness classes addressing unique physical needs of seniors age 60 and over. Instructors are nationally certified and trained in fitness for seniors. STEPS is a component of the Governor's Healthy Kansas Initiative. Participants are assessed before they begin classes and throughout to evaluate overall strength and balance.



### Persons served:

In 2010, three new communities – Arkansas City, Osawatomie and Satanta – implemented STEPS and one existing community added a second class. Existing communities that hold classes are Cottonwood Falls, Dodge City, Garden City (two classes), Great Bend (added a second class in 2010), Haysville, Oberlin and Topeka (two locations).

### Funding:

This project began in 2006 and is serving many seniors in 10 Kansas communities. Sunflower Foundation: Health Care for Kansans funded this program in the amount of **\$150,000**.

## Alzheimers Disease Innovation - 'Dementia Crisis Bridge Project'

### Purpose:

The Dementia Crisis Bridge Project assists individuals with Alzheimer's and their caregivers with information, resources and tools about the disease. It will provide crisis support to individuals and families, will serve as a resource to health professionals, offer dementia training to mental health centers and provide a model for dementia integration at the state level.

KDOA partners for this project include: Alzheimer's Association, Heart of American Chapter; Area

Agencies on Aging; and the University of Kansas Center for Research Institute.

### Funding:

This project is funded through a **\$285,031** grant from the U.S. Administration on Aging. This is an 18-month project that will run from September 30, 2009, through March 31, 2011.

### Persons served:

The service area includes four Area Agencies on Aging that cover 18 counties in the eastern part of the state: Jayhawk AAA in Topeka, Northeast Kansas AAA in Hiawatha, Southeast Kansas AAA in Chanute, and Wyandotte-Leavenworth AAA in Kansas City.

Service	Units of Service	Persons Served
Respite	355	131

Persons with Dementia	Total	Age			
		60	60-74	75-84	85+
Female	33	2	12	24	17
Male	22	1	4	11	6

Caregivers	Total	Age			
		60	60-74	75-84	85+
Female	44	24	8	8	2
Male	13	3	7	2	1

## Kansans Optimizing Health Program (HOHP)

In March 2010, KDOA was awarded a \$400,000 American Recovery and Reinvestment Act (ARRA) grant to help older individuals with chronic conditions improve their health and reduce their use of costly medical care. Through this grant project, KDOA will help build the state's infrastructure for Kansans Optimizing Health Program (KOHP) and other self-management and evidence-based programs.

Partners in this collaborative effort include KDOA, the Kansas Department of Health and Environment, the Kansas Health Policy Authority and the state's 11 Area Agencies on Aging.

Developed by Stanford University, KOHP is an evidence-based program known nationally as the Chronic Disease Self-Management Program. The program is designed to help people gain self-confidence in their ability to control their symptoms and how their health problems affect their lives. KOHP helps people who are living with on-going health conditions to become better self-managers.

The KOHP is a six-week workshop conducted for 2½ hours each week in various community settings. Under the grant, the statewide goal is to have at least 500 adults age 60 and older complete this program by March 2012.

**Funding:**

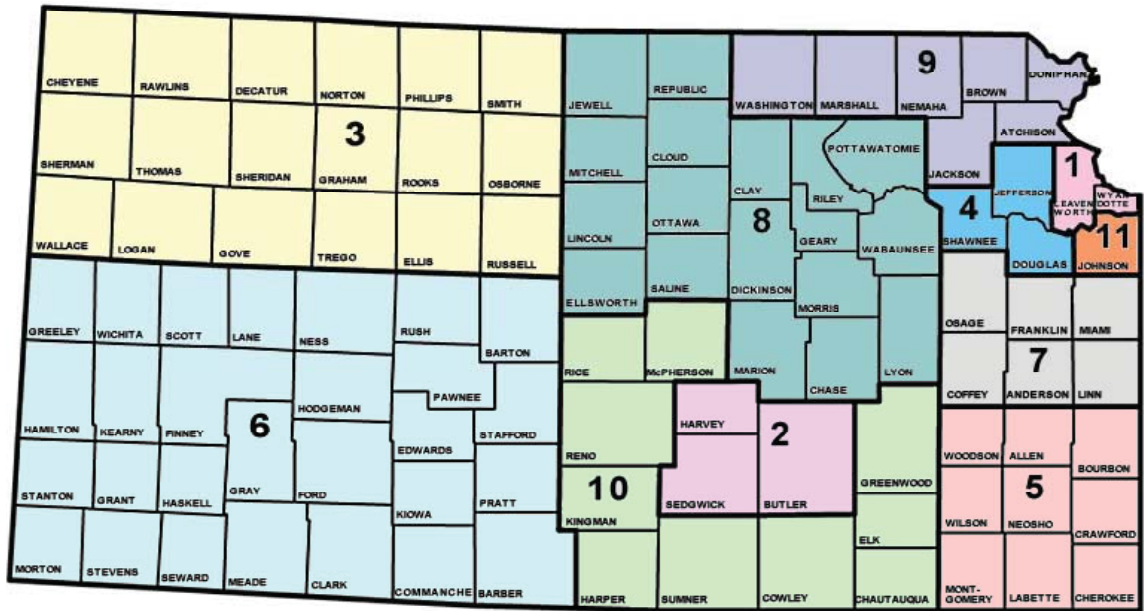
The last two quarters of SFY 2010 represent grant start-up activity; the first annual financial report is due in spring 2011.

Number of persons served during SFY 2010:

	<b>Persons Served</b>	<b>Total Expenditures</b>
Attendees	41	No report available
Completers*	35`	No report available

\*A person is counted as a “completer” after attending four of the six sessions.

# Area Agencies on Aging



The Department on Aging administers many of its programs through grants and contracts of state and federal funds to the 11 Area Agencies on Aging (AAAs) and other providers serving designated geographical areas. For programs not funded by Medicaid, the AAAs may directly provide services or award sub-grants and contracts to other community organizations to provide services. In SFY 2010, the AAAs provided services through the following programs:

- Older Americans Act (OAA);
- Congregate Meals;
- Home Delivered Meals;
- In-Home Services for the Frail Elderly;
- Disease Prevention and Health Promotion;

- Elder Abuse Prevention;
- Targeted Case Management (TCM);
- State-funded Case Management;
- Senior Care Act (SCA);
- Client Assessment, Referral, and Evaluation (CARE) program; and
- Family Caregiver Support Program.

Each AAA serves a Planning and Service Area (PSA), required under the Older Americans Act, and has a director, staff members, and a local advisory board. Employees of the AAA are not state employees but are employed by each AAA's governing body, which can be a governmental entity or nonprofit organization.

# Area Agencies on Aging Directory

## **PSA 01**

### **Wyandotte-Leavenworth AAA**

Ruth Jones, director  
1300 N. 78<sup>th</sup> St., Suite 100  
Kansas City, KS 66112-1540  
913-573-8532 / 1-888-661-1444  
Fax: 913-573-8577

## **PSA 02**

### **Central Plains AAA**

Annette Graham, director  
2622 W. Central, Suite 500  
Wichita KS 67203-3725  
316-660-7298 / 1-800-367-7298  
Fax: 316-383-7757

## **PSA 03**

### **Northwest KS AAA**

Michelle Morgan, director  
510 W. 29<sup>th</sup> St., Suite B  
Hays, KS 67601-3703  
785-628-8204 / 1-800-432-7422  
Fax: 785-628-6096

## **PSA 04**

### **Jayhawk AAA**

Jocelyn Lyons, director  
2910 SW Topeka Blvd.  
Topeka, KS 66611  
785-235-1367 / 1-800-798-1366  
Fax: 785-235-2443

## **PSA 05**

### **Southeast KS AAA**

John Green, director  
1 W. Ash  
Chanute, KS 66720-1010  
620-431-2980 / 1-800-794-2440  
Fax: 620-431-2988

## **PSA 06**

### **Southwest KS AAA**

Dave Geist, director  
236 San Jose Dr.  
Dodge City, KS 67801-1636  
620-225-8230 / 1-800-742-9531  
Fax: 620-225-8240

## **PSA 07**

### **East Central KS AAA**

Elizabeth Maxwell, director  
117 S. Main  
Ottawa, KS 66067-2327  
785-242-7200 / 1-800-633-5621  
Fax: 785-242-7202

## **PSA 08**

### **North Central Flint Hills AAA**

Julie Govert-Walter, director  
401 Houston  
Manhattan, KS 66502  
785-776-9294 / 1-800-432-2703  
Fax: 785-776-9479

## **PSA 09**

### **Northeast KS AAA**

Karen Wilson, director  
526 Oregon  
Hiawatha, KS 66434-2222  
785-742-7152 / 1-800-883-2549  
Fax: 785-742-7154

## **PSA 10**

### **South Central KS AAA**

Jodi Abington, director  
304 S. Summit  
Arkansas City, KS 67005  
620-442-0268 / 1-800-362-0264  
Fax: 316-442-0296

## **PSA 11**

### **Johnson County AAA**

Dan Goodman, director  
11811 S. Sunset, Suite 1300  
Olathe, KS 66061-7056  
913-715-8800 / 1-888-214-4404  
Fax: 913-715-8825

# 2010 Annual Report of the State Advisory Council on Aging

Established by Kansas statute in 1977, the Kansas State Advisory Council on Aging (SAC) is composed of 15 members who represent diverse geographical, social and ethnic groups. By statute, at least half of the membership must be 60 years of age or older. Eleven members are appointed by the Governor; one member each is appointed by the President of the Senate and the minority leader of the Senate from among the members of the Senate; one member each is appointed by the Speaker and by the Minority Leader of the House of Representatives from among the members of the House of Representatives.

The council meets at least twice a year, but can meet more often. Among other duties, the council serves in an advisory capacity to the Governor and the Secretary of Aging and other public and private, state and local agencies affecting aging issues as required by the federal Older Americans Act. It also has the duty to review and comment on Kansas Department on Aging (KDOA) activities. The members review and comment on plans prepared by the Department, consult with the Secretary on the operations of the Department, and advocate for Kansas seniors.

State Advisory Council members during SFY 10:

- Trish Moore, Overland Park, chair
- Rep. Bob Bethell, Alden
- Leo Bracciano, Lawrence
- Rita Griffith, Overland Park
- Sen. David Haley, Wyandotte
- Irv Hoffman, Lenexa
- Barbara Hutchinson, Circleville
- Luella "Lu" Janzen, Hillsboro
- Patrick Lawless, Jr., Osage City
- John Lehman, Sabetha
- Bill Moriarity, Hays
- Rep. Shirley Palmer, Fort Scott
- Sen. Vicki Schmidt, Topeka
- Jean Taylor, Topeka
- Larry Turner, Wichita

The State Advisory Council on Aging met quarterly in SFY 10. Secretary of Aging Martin Kennedy provided agency updates at each of the meetings.

On October 9, 2009, Deb Schwarz with KDOA

presented to SAC Members on the CARE (Client Assessment, Referral and Evaluation) Program.

On December 4, 2009, Blanche Parks, Senior Manager with KDOA, provided the group with specific information on programs within KDOA.

On March 5, 2010, Barbara Conant, Director of Public Affairs with KDOA, gave a legislative update; and Katie Glendening, Project Coordinator of the Aging and Disability Resource Connection with KDOA, informed the group on the Aging and Disability Resource Center (ADRC) Project and Senior Health Insurance Counseling for Kansas (SHICK) volunteer recruitment.

And, on June 4, 2010, Conant provided a budget update; Vern Norwood, Legal Service Developer and Family Caregiver Support Program Manager with KDOA, gave a presentation on hoarding.

Several of the SAC members attended the 2010 Senior Summit. They also provided input on the Kansas State Plan on Aging and are members of various committees within KDOA as well as in their communities.

Council members were active in representing senior interests in their communities.

# 2010 Report of the Kansas Silver Haired Legislature

The Silver Haired Legislature is a body of individuals age 60 and older who are elected by their peers to develop bills and resolutions that are of interest to Kansas elders and their families. The Silver Haired Legislature then works with the Kansas Legislature to get its bills and resolutions introduced and passed.

SHL officers are:

President: Irv

Hoffmann, Lenexa

Vice President:

Dorothy Zook,

Hesston

Treasurer, Bill

Dean, Overland

Park

Secretary: Sue

Peckham, Frankfort

Speaker: James

Snyder, Topeka

Speaker Pro Tem: Mary Ann Flunder, Kansas City

Floor Leader: Carlton McNair, Overland Park



The following bills and resolutions were approved during the SHL 28<sup>th</sup> annual session at the Ramada Hotel and Convention Center in Topeka:

**SHL BILL NO. 2702** – Grandparent Custody of Children – The court would consider a grandparent to be a custodian of a child if the child resides with the grandparent in a stable relationship and it is in the child’s best interest.

**SHL RESOLUTION NO. 2703** - Elimination of sales tax exemptions and exclusions to organizations that do not provide services and benefits on a statewide basis.

**SHL CONCURRENT RESOLUTION NO.**

**2704** – Term Limits for Kansas House and Senate – Proposition to amend Sec. 2 of Article 2 of the State Constitution to limit legislators to no more than two successive four-year terms in the Senate and no more than four successive two-year terms in the House.

**SHL RESOLUTION NO. 2705** – Requiring mandatory driver training for those drivers who operate 15-passenger vans; that all newly

manufactured multi-passenger vehicles be equipped with seat belts of the lap belt and shoulder restraint type for each seating position on such vehicle; and mandating that drivers ensure all passengers are properly buckled up before the van is set in motion.

**SHL RESOLUTION NO. 2706** – Using all moneys credited pursuant to statute to the Senior Services Fund or to the Health Care for Seniors Fund for programs administered through the Area Agencies on Aging. (This would affect continued proposals SHL Bill No. 2707, SHL Bill No. 2708 and SHL Bill No. 2710 listed below.)

Previously introduced legislation that has been endorsed for continuation by SHL include:

**SHL BILL NO. 2707** – An act concerning the Kansas Department on Aging relating to the Senior Services Fund; creating the Health Care For Seniors Fund; disposition of certain additional lottery proceeds; prescribing certain powers, duties and functions for the Secretary of Aging; amending K.S.A. 2010 Supp. 74-8768 and repealing the existing section.

**SHL BILL NO. 2708** – An act concerning the Kansas Department on Aging relating to the Senior Services Fund; creating the Health Care For Seniors Fund; disposition of certain additional tobacco litigation settlement proceeds; prescribing certain powers, duties and functions for the Secretary of Aging; amending K.S.A. 38-2101 and repealing the existing section.

**SHL BILL NO. 2709** – Enacting the Geriatric Mental Health Act establishing a Geriatric Mental Health Program administered by the Kansas Department on Aging.

**SHL BILL NO. 2710** – Creating the Health Care For Seniors Fund concerning the disposition of a sales tax and compensating use tax proceeds; prescribing certain powers, duties and functions for the Secretary of Aging and Secretary of Revenue; amending K.S.A. 2010 Supp. 79-3620 and 79-3710 and repealing the existing sections.

**SHL BILL NO. 2711** – An act relating to insurance concerning the mandatory reinstatement of certain insurance policies in case of mental incapacity of an insured.

During a Tuesday evening banquet, the Kansas Silver Haired Legislature presented the Irv Hoffmann SHL Nursing Scholarship, an annual scholarship for nurses entering the field of geriatric nursing as a career, to Christine Arnold, Lawrence, who is studying at Washburn University.

The following Silver Haired Legislators also were presented certificates of appreciation for their efforts in starting the SHL Nursing Scholarship: Dorothy Zook, Hesston; Virginia (Ginny) Graham, Reading; Kathryn (Pat) Grantham, Augusta; Berniece Smith, Topeka; and Martha Durst, Derby.

The Kansas Department on Aging was presented a certificate in recognition of exemplary programs for seniors.

James Snyder, Topeka, Speaker of the Kansas Silver Haired Legislature, received a standing ovation for his outstanding leadership over the past year.

Exceptional Service Awards were presented to: Marsha Ridinger, Jayhawk Area Agency on Aging, Topeka; Marjorie Thomas, Kansas Silver Haired Legislator, Garnett; and Marva Williams, Kansas Department on Aging.

## In Memorium

### Irvin W. “Irv” Hoffmann

February 2, 1934 - September 11, 2010



Irvin W. “Irv” Hoffmann, 76, President of the Kansas Silver Haired Legislature, passed away on Sept. 11, 2010, at his home. He also had been a member of the State Advisory Council on Aging and served on numerous committees at the Kansas Department on Aging.

He initiated legislation that later became the Grandparents as Caregivers Program in 2007 and the Kansas Silver Alert in 2009. A scholarship fund for nurses entering the field of geriatric nursing was established in his honor by the Silver Haired Legislature.

Born in Pendleton, Missouri, Hoffmann was a resident of Lenexa, Kansas, since 1985. He served as a City Councilman, member of the DeSoto and Lenexa Rotary Clubs and President of the Lenexa and Monticello Historical Societies. He served in the U.S. Air Force and spent his career as an Air Traffic Controller, retiring from the Federal Aviation Administration in 1994.

He is survived by his wife, Susan, five children and three grandchildren.

### Silver Haired Legislature’s Resolution for Irvin W. Hoffmann

WHEREAS, INASMUCH AS Irvin W. Hoffmann passed away on September 11, 2010, at his home; and

WHEREAS, Irv was the President of the Executive Committee of the Kansas Silver Haired Legislature (SHL) 2005-2010; and

WHEREAS, Irv regularly, thoughtfully, and passionately represented the interests and purposes of the KSHL before State of Kansas Legislators and their Committees; and

WHEREAS, he assisted in raising the level of knowledge and appreciation for the KSHL before Kansas Legislators and the Office of Governor; and

WHEREAS, Irv suggested/pushed/cajoled/urged Kansas Silver Haired Legislators to consider ideas for bills and resolutions on behalf of and for the benefit of older Kansas citizens; and

WHEREAS, Irv tempered his patience with a trenchant impatience to “make things happen;” and

WHEREAS, he constantly encouraged and supported Kansas Silver Haired Legislators to contact citizens

in their respective PSAs via word and deed to support older Kansans; and

WHEREAS, Irv blended the collective work necessary with the dreams of Silver Haired Legislators toward a better life for Kansas elders; and

WHEREAS, he was unstinting in fostering means of financial resources for the Irv Hoffmann KSHL Geriatric Nurse Scholarship awarded annually to a student in Kansas post-secondary institutions; and

WHEREAS, Irv promoted KSHL solidarity to energize Seniors to assume responsibility for an improved life style;

THEREFORE, BE IT RESOLVED THAT Irvin W. Hoffmann be honored by Kansas Silver Haired Legislators in the 2010 Annual Legislative Assembly; and

THAT our appreciation be expressed to his wife, Susan; and

THAT this Resolution be spread upon the Minutes of the Kansas Silver Haired Legislature in its 2010 Legislative Assembly.

A.D., September 28, 2010



New England Building  
503 South Kansas Avenue  
Topeka, KS 66603  
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1-800-432-3535