



1550 Corporate Woods Parkway | Uniontown, OH 44685-7840 800.421.7277 | directionhomeakroncanton.org

©2015 Akron Canton Area Agency on Aging | 14AAG012





MANAGING CARE FOR AGING ADULTS AND INDIVIDUALS WITH DISABILITIES

40th anniversary

Welcome Home

Direction Home akron Canton 2014 Mission Report

With our role in the Ohio Home Care Waiver, we have expanded our mission to include those under 60 by providing case management to over 200 new members from birth through 59 years of age. **These additions** increase our membership to nearly 6.000 people with disabilities we assist regardless of age.

In 2014, Direction Home Akron Canton Area Agency on Aging celebrated its 40th year of helping older adults and people with disabilities remain independent with dignity. Reflecting on our history provides a unique opportunity to appreciate how far we have come, our recent accomplishments and the opportunities that the future presents.

Our Evolution

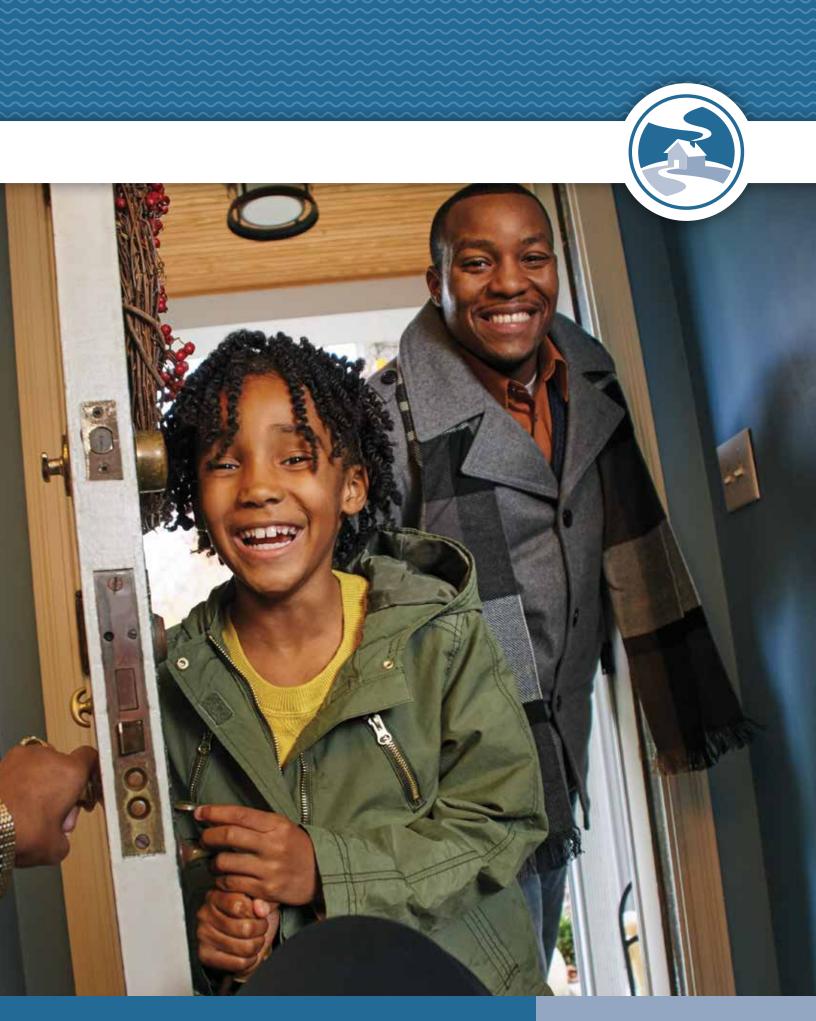
Five years ago, as we celebrated our 35th anniversary, 150 Agency co-workers served over 3.600 older adults with disabilities across our two Medicaid Waiver programs, PASSPORT and Assisted Living, and our Care Coordination program serving those seniors with disabilities unable to qualify for Medicaid. Today, we provide care management for five programs, adding Ohio Home Care Waiver (OHC) and MyCare Ohio. With our role in the Ohio Home Care Waiver, we have expanded our mission to include those under 60 by providing case management to over 200 new members from birth through 59 years of age. These additions increase our membership to nearly 6,000 people with disabilities we assist regardless of age.

We have grown our nursing home transition role since 2009, assisting Medicaid beneficiaries to transition back into the community settings through HOME Choice. This program has allowed nearly 600 previous nursing home residents to return to community settings over five years.

We grew our role in acute care transitions as well, contracting with the U.S. Centers for Medicare and Medicaid (CMS) to reduce avoidable hospital readmissions for Medicare fee-for-service beneficiaries. Through the Community-based Care Transitions Program (CCTP), we have











coached 10,500 patients being discharged from 12 hospitals in our region since April 2012.

Last year we debuted our new name, *Direction Home Akron Canton*. This year, we are proud to add "Disabilities" to our name, just as we have added this population to our mission.

Our Current Reality

Today, many of our "extension of government" roles are growing. Our Aging and Disability Resource Center role has grown to include assessments for the MyCare dual demonstration pilot, adding nearly 1,700 visits in 2014 as well as three new co-workers. Our Ombudsman program has grown as well, adding MyCare Ohio rights protection to our responsibilities.

Our role significantly changed regarding our largest program, PASSPORT. Historically, the scope of our responsibility included screening, assessment, care management, compliance and claims payment. The MyCare Ohio dual



Willaul P. Roderich

Willard P. Roderick | Chairman

integration pilot moves Ohio towards the privatization of Medicaid for those receiving both Medicare and Medicaid. This "dual demonstration" unifies Medicare and Medicaid services for those eligible for both benefits into one system administered by Managed Care Organizations. Today, we focus on our screening, assessment, and care management roles as opposed to backroom services.

Being the Architect of our Future

Our future presents tremendous opportunity for growth, but we have urgency to act. We must advocate to extend Home Choice and Community-based Care Transition programs that are set to expire after September 2016. In addition, we must advocate to extend our role in MyCare Ohio beyond the pilot which will end after April 2017. PASSPORT and Assisted Living Waiver programs are extremely popular, but their evolution to new administrative structures is imminent as well. Public policy is moving toward the consolidation of these programs with the OHC program. Discussions have taken place that would combine these programs with other waivers in Ohio, creating a "single waiver" for non-dual eligible Medicaid beneficiaries across the lifespan. We must advocate for our role in this "single waiver" scenario and position ourselves to compete.

We believe this period of change presents tremendous opportunities. But to prepare for a competitive future environment, we continue to address four imperatives:

- Get to scale
- Get to price
- Get a payor partner(s)
- Get clinical integration

We possess the will and the ability to seize new opportunities, take smart risks and work with partners to achieve our mission. We will to continue to play a leadership role at the national and state levels in order to assure a strong network to support people with disabilities. We are pleased to share our vision of the future, and look forward to working together to further our mission.



Board of Directors

Emeritus Members

Kyle R. Allen Michael A. Bernatovicz Charles E. Booth Mercer F. Bratcher Beatrice J. Gingery William L. Luntz D. Bruce Mansfield Nancy McPeek Anne T. Nixon William A. Reynolds Edwin P. Schrank Helen I. Spitzer Joseph J. Straw John C. Weiser

Directors

Charles R. Alderson Sr. Director Finance, Physician Organization Mount Carmel Medical Group Mary Jane Falcone Retired Secretary, Green Local Schools Kay Feagles, CFP Retired Vice President. Marketing, Raymond James Financial Services, Inc. Eileen W. Good Sr. Vice President, Clinical Advocacy and Business Development & CEO of Post Acute Care and Rehab Services, Aultman Hospital Iris E. Harvey Vice President, University Relations.Kent State University Rodney K. Ison, M.D.

CEO, Community Health Care Inc. Nancy A. Istenes, D.O.

Medical Director, Long-Term and Transitional Care Services & Medical Director, Summa Homecare Tom Keathley

Executive Creative Director, Arras Keathley Agency

Robert A. Kent, D.O. CEO, Western Reserve Hospital Unhee Kim Sr. Vice President, Ambulatory

Services and Summa Physicians Inc., Summa Health System

Michael Novelli Vice President, Reform Implementation, AultCare Corporation Jon D. Oliverio, D.P.M. Foot & Ankle Institute Inc. Barbara R. Palmisano Director, Office of Geriatrics & Palliative Care, NEOMED Keeven White President & Creative Director, WhiteSpace Creative

Committees of the Board

Communications Keeven White, Chair Tom Keathley, Vice Chair Kay Feagles Iris E. Harvey Michael Novelli **Elder Rights** David B. Reynolds, Chair James Masi, Vice Chair Jack T. Diamond Kay Feagles Nancy A. Istenes Jon D. Oliverio Executive Willard P. Roderick, Chair David J. Peter, Vice Chair Stephen Colecchi Jack T. Diamond Julia T. DiFrancesco Charles L. Greene James Masi David B. Reynolds Fran D. Rice

Finance and Audit

Julia T. DiFrancesco, Chair Charles R. Alderson, Vice Chair Stephen Colecchi Charles L. Greene Robert A. Kent Unhee Kim **Human Resource**

Charles L. Greene, Chair Iris E. Harvey, Vice Chair Stephen Colecchi Jack T. Diamond Eileen W. Good James Masi

David J. Peter, Chair Rodnev K. Ison. Vice Chair Jack T. Diamond Marv Jane Falcone Nancy A. Istenes Robert A. Kent James Masi Jon D. Oliverio Barbara R. Palmisano Fran D. Rice Nominating Jack T. Diamond, Chair Keeven White, Vice Chair Charles L. Greene Tom Keathley David J. Peter **Provider Relations** Robert A. Kent, Chair Eileen W. Good, Vice Chair Charles R. Alderson Stephen Colecchi Rodney K. Ison Unhee Kim

Managed Long-Term Care

David J. Peter Quality Barbara R. Palmisano, Chair David J. Peter, Vice Chair Julia T. DiFrancesco Mary Jane Falcone Michael Novelli Fran D. Rice



Willard P. Roderick Chairman Retired President & CEO, Summa Barberton Hospital

Stephen Colecchi, J.D. Immediate Past Chairman President & CEO, Robinson Memorial Hospital

James Masi Vice Chairman Attorney at Law

Charles L. Greene Vice Chairman Attorney at Law, Davison & Greene Law Offices

David B. Reynolds, M.D. Vice Chairman Physician, Cleveland Clinic Foundation Wooster Regional Medical Campus

Fran D. Rice Vice Chairman *Community Liaison*

Julia T. DiFrancesco Treasurer Director, Health Care Advisory Services, McGladrey, LLP

Jack T. Diamond Secretary Attorney/Partner, Brennan, Manna & Diamond LLC

David J. Peter, M.D. Chief Medical Officer Senior Vice President & Chief Medical Officer, Akron General Medical Center, Medical Director, Akron General Hospice Care Center of VNS, Akron General Medical Center Our Consumer Plan

We will utilize the role of our President and **CEO** as the current **President of the National Association** of Area Agencies on Aging (N4A), our trade association in Washington, D.C., to facilitate a strategic alignment with **AARP** and focus our lobbving efforts on **Capitol Hill toward** our common goal of the reauthorization of the OAA.

Area Agencies on Aging have an explicit role in advocating for older adults as part of our national mandate borne of the Older Americans Act (OAA). We accomplish this through education and dialog with elected officials and staff as well as the empowerment of older adults. Through this connection of legislator and constituent, voices are heard, policy is guided, and choice is promoted in long-term care.

at the National Level

The Older Americans Act was enacted in 1963 to ensure older adults have support to age successfully in their communities. The Area Agencies on Aging (AAAs) were formed as a result of the OAA and since then have built a robust nationwide network of aging service organizations. AAAs provide OAA services such as home care, respite, home delivered meals, transportation, congregate meals, legal aid and other services for older adults. The act has a four-year authorization period, and has always had bipartisan support. Due to issues with the funding formula and the impact of sequestration on OAA funding, states with growing older adult populations are not receiving additional funds due to a "hold harmless" clause that protects funding levels from declining to the previous reauthorization. This issue could be resolved with the allocation of an additional \$140 million, not an extraordinary amount relative to the growing older adult population.

Despite general bipartisan support for the Older Americans Act, there is currently a lack of political will to increase allocations for the Act and the bill that would have reauthorized the OAA in 2014 never moved forward. Going forward, we will utilize the role of our President and CEO as the current President of the National Association of Area Agencies on Aging (N4A), our trade association in Washington, D.C., to facilitate a strategic alignment with AARP and focus our lobbying efforts on Capitol Hill toward our common goal of the reauthorization of the OAA. National policy leaders have recognized both the demand for community-based care options as well as the financial benefits of providing care to consumers in the least restrictive settings. Since 2009, the federal "Money Follows the Person" demonstration project called HOME Choice (Helping Ohioans Move, Expanding Choice) has become the primary means for safely and effectively transitioning Medicaid eligible consumers from an institutional setting to a community home. In FY 2014, 164 nursing home residents selected Direction Home Akron Canton to facilitate this journey, making our HOME Choice program the most successful in the state. Currently, 70% of referrals to HOME Choice are successfully transitioned, with 90% remaining in the community 90 days following transition. Referrals to the program have increased 37% over the same period last year. In order to streamline practice and processes, we have worked to align the efforts of our "pre-transition care managers" with our "transition coaches." We have increased our referrals through targeted outreach efforts and building strong relationships with nursing home partners. In order to make a case to policymakers supporting the continuance of the program, we will develop quantifiable evidence demonstrating the success of the HOME Choice program in terms of both consumer choice and Medicaid cost savings. and use this evidence to support a concrete strategy for legislative advocacy. This advocacy will be aimed at continuing HOME Choice beyond the 2016 sunset.

Another program developed to address an issue critical to quality health care is the Community-based Care Transitions Program (CCTP). This program reduces avoidable hospital readmissions by providing transition coaching for Medicare fee-for-service individuals hospitalized with acute or chronic conditions. Our success in CCTP has been wide spread and diverse in nature. Using the evidence-based Care Transitions Intervention (CTI) of Dr. Eric Coleman, our Agency has collaborated not only with our hospital partners and patients, but with Dr. Coleman himself on his efforts to have transition coaching recognized as a permanent Medicare



allowable cost. In 2014 we developed an independent contract with Independent Living Systems (ILS) to coach the high risk population that is served by Anthem Senior Advantage. Our monthly goal is to provide health coaching to over 1,000 patients through CCTP and ILS combined. Recently we secured an amendment to our original CMS contract that includes health coaching to short-term nursing rehabilitation patients, a population that might otherwise be underserved. We must now use our success to demonstrate the feasibility of AAAs leading the CCTP initiative after the program's scheduled end in 2016. We will use a multi-pronged approach in our efforts to continue and expand our acute-care transitions business: 1) we will advocate through our national trade association (N4A) for CMS to continue the CCTP program for Medicare fee-forservice patients beyond 2016: 2) we will work with national health policy experts to advocate for the designation of transition health coaching as a permanent Medicare reimbursable benefit; and 3) we will seek to expand our service to other pertinent health entities, including expanding our contracts to a broader range of Medicare Advantage Plans.

In Ohio

Long-Term Services and Supports (LTSS) would not be possible without the network of direct care provider organizations. These organizations employ thousands of individuals who personally assist our members daily, making their independence in the community successful. The labor force supplied through these provider organizations is the critical component of the state's long-term care systems that use Medicaid dollars to care for people in their homes, rather than in more expensive institutional settings. Without these providers and their staff, efforts such as MyCare Ohio, Medicaid Waivers for LTSS and other Medicaid diversion programs would not be possible. We have advocated for adequate rates and roles for these providers in the MyCare Ohio pilot as well as across the programs we administer, such as PASSPORT and the Assisted Living Waiver. We have

partnered with Advocates for Ohio's Future to bring the issue of inadequate rates to light with Ohio's administration, including the impact to previous years cuts on provider rates. We will advocate in concert with O4A and likeminded groups such as Advocates for Ohio's Future, AARP Ohio and Disability Rights Ohio for adequate reimbursement rates across all LTSS programs in order to enable providers to attract and retain an adequate labor force to meet the demand for Medicaid home-based care.

MyCare Ohio, the State's dual integration pilot, kicked off in our region in July. Since then 76% of nearly 5,000 former PASSPORT and Assisted Living members were transitioned into that program. Area Agencies on Aging in the seven pilot regions retained their Care Management role, called waiver service coordination, within the new system, Using our expertise built from 30 years of experience in the PASSPORT program, we have been an integral part of the implementation of this program, assisting the State and our new managed care partners. However, there have been some bumps in the road to implementation and the AAAs are working diligently towards resolving these issues with our partners at the Ohio Department of Medicaid, the Ohio Department of Aging and the Managed Care Plans, We have worked toward solutions to provider network management issues as well as resolving problems regarding systemic loss of information between IT platforms. We will continue to "troubleshoot" these issues with ODM and the Managed Care Plans through the identification of jointly desired outcomes and our ability to achieve these outcomes. We will be an indispensable resource in resolving problematic issues related to the implementation of MyCare Ohio, using this experience, demonstrated cooperation, and ultimate success to position ourselves as the care management provider of choice for all LTSS programs in our region past the MyCare Ohio pilot period ending in 2017.



We will continue to expand relationships with area hospitals, health plans, nursing homes, and other residential care facilities by demonstrating that non-medical interventions such as transition coaching can lead to better health outcomes for patients, as well as cost savings for the medical community.

CCTP Hospitals

- Affinity Medical Center
- Akron General Medical Center
- Aultman Hospital
- Medina Hospital
- Mercy Medical Center
- Robinson Memorial Hospital
- Summa Akron City Hospital
- Summa Barberton Hospital
- Summa St.Thomas Hospital
- Summa Wadsworth-Rittman Hospital
- Western Reserve Hospital
- Wooster Community Hospital

The strength of our organization stems from the people within it. From our Board of talented and committed volunteers to our co-workers who all share a passion for our mission, we are empowered by these individuals who make Direction Home Akron Canton stronger by working together.

Our People Plan

Our Board of Directors

We continue to strategically transition our Board from one focused on general business leaders to one comprised of leaders in the medical field. The emphasis on "right fit" talent on our Board has paid tremendous dividends in material outcomes achieved, from our successful hospital partnerships that facilitated implementation of the Community-based Care Transitions Program (CCTP), to our ongoing interactions with new enterprises such as NewHealth Collaborative. an Accountable Care Organization (ACO) which links their beneficiaries to our programs in a more seamless fashion. Recently, we added new Board member acumen to enhance our expertise in partnering with Managed Care Health Plans. We will continue to recruit talented Board members with Managed Care experience in recognition of our new role and continuing in MyCare Ohio.

Our Co-workers

We have experienced tremendous staff growth. Thanks to the expansion of our business lines, and new roles and responsibilities we have added nearly 50 staff members, bringing our total co-workers to over 200. To prepare our co-workers for the new MyCare Ohio Care Management systems, we developed enhanced training plans and Lean processes with our Managed Care partners to enable co-workers to operate effectively in the new, integrated managed care environment and effectively utilize multiple IT systems. We will explicitly define the existing and future employee skillsets required to achieve our goals in the changing business environment of MyCare Ohio, and provide the necessary training and professional development to ensure these skillsets are integrated into our operations.

We have been fortunate to have a longstanding executive leadership team, with the majority of leadership working together for 20+ years to guide our organization. Mindful that the average age of our executive staff is nearing retirement age, we have been implementing our formal succession plan. This plan identifies experienced high potential individuals and places them in mentoring relationships with executive leaders to prepare for retirements. By identifying and grooming internal candidates for future leadership roles, we ensure the continuity of the organization's strategic vision, as well as an ongoing legacy for the organizational culture that we have carefully nurtured, which drives our success. As a part of this succession plan, we have identified and provided mentoring for internal successors for key executive leadership positions within the organization. To continue to grow the next generation of leaders. we will ensure that our high potential employees are provided with educational offerings and coaching specifically tailored to individual needs to assure their successful transition to higher levels of responsibility within the organization.

As we look to recruit and retain talented individuals to meet our growing needs for diverse staffing disciplines, an area of growing opportunity at Direction Home Akron Canton is our student intern program. In the past we have focused on clinical interns in Care Management and Elder Rights to help those who are looking for real world experience in their designated field. Recently, we broadened our program to include more traditional business fields such as fiscal and human resources. Building on this success, future plans include program expansion to greater businessbased areas of study such as analytics, statistics and management. This will allow us to provide a greater scope of intern work experiences, with the outcome of increasing the employability of future graduates. We will expand opportunities for student interns to have meaningful work experiences at **Direction Home Akron Canton, resulting** in the development of a pool of potential future co-workers who are passionate about our mission, as well as provide



them with valuable skills and memorable work experiences.

Aging and Disability Resource Center

The Aging and Disability Resource Center Program (ADRC) is a collaborative effort of the U.S. Administration on Community Living and the Centers for Medicare & Medicaid Services (CMS). ADRCs serve as single points of entry into the long-term supports and services system for older adults and people with disabilities.

In Ohio, the approach is to create an Aging and Disability Resource Network (ADRN) comprised of partner organizations working together to ensure those who need services can access support through a variety of platforms. This network approach recognizes that individuals may access long-term services and supports in a variety of ways through differing organizations. The ADRN brings together diverse organizations that play a role in long-term services and supports to streamline access to services for the consumer. We currently partner with all area hospitals, county departments of job and family services, Tri-County Independent Living Center, Summit Co. Public Health District. United Way of Greater Stark County, Summit Co. Adult Protective Services, and ICAN Housing Solutions. To position our ADRN to meet the needs of our growing population of those who look to us for assistance, we will strengthen the role of these partners in our ADRN, and include additional partners such as Federally Qualified Health Centers, additional public health organizations, and organizations providing support to people with developmental disability.

Our Health Care Partners

Building on our strong partnership with area hospitals, we were able to expand CCTP to Medina Hospital and Wooster Community Hospital, while increasing the target of our monthly coaching from 304 to 785 (a 158% increase). This brings our CCTP hospital partners to 12, covering

multiple major hospital systems, as well as independent hospitals. This expansion recognizes our success in reducing avoidable hospital readmissions and acknowledges our importance in the comprehensive achievement of better population health outcomes. Our CCTP success has led to a new role in providing transition health coaching to reduce readmissions for a Medicare Advantage Plan, Wellpoint Health Plan. This new program is provided by Anthem for their members through a contract with Independent Living Systems (ILS) and represents the opportunity to provide supportive health coaching services to a new health care market. Medicare Advantage Plans. We will continue to expand relationships with area hospitals, health plans, nursing homes, and other residential care facilities by demonstrating that non-medical interventions such as transition coaching can lead to better health outcomes for patients, as well as cost savings for the medical community.

Another area of growth for Direction Home Akron Canton is in our health education offering. These popular classes use evidencebased methods to empower attendees to enhance their health, and thereby help to reduce hospital admissions, emergency department visits, and hospital readmissions. Our Chronic Disease Self-Management Program was developed by Stanford University, and now has grown to include Chronic Pain Self-management, A Matter of Balance and Tai Chi falls prevention. We have offered these courses through partnerships with Mature Services, the Stark Co. Urban League, and provider agencies such as Family and Community Services, Inc. As we move forward, we plan to secure the ability to offer another evidence-based class as a newly defined Medicare reimbursable service. Diabetes Self-Management. This new offering aligns with our goals for the education program. We have started the Medicare provider certification process and anticipate being able to begin this service in 2015. We will build on our relationships with our Accountable Care Organizations, specialty practices, and health plans in order to grow this service though their referral processes.





In our increasingly competitive environment. it is essential that we maximize our productivity to provide competitive prices to our customers and high quality services to our members. We must demonstrate the value added by our services to the bottom line of customers. If approached properly, increased efficiency and quality service are complementary. Therefore, our Quality Plan consists of two main focuses: Continuous Quality Improvement (CQI) and Building our Culture of Excellence. We have enhanced these concepts by adding Lean and Six Sigma expertise, providing a more robust set of tools to our co-workers. These new skills allow us to redefine quality improvement and evolve our approach in building our corporate culture to exceed expectations.

Our Quality Plan

Continuous Quality Improvement

Historically, we have ensured that all of our co-workers are certified in Lean. Lean is the quality improvement methodology by which waste is removed from work processes by eliminating non-value-added tasks. Constant improvement is the expectation. We now are enhancing our quality improvement programs by using more expansive data to inform our CQI efforts. The ability to measure process results (input, output and outcome) through explicit data tracking and analysis is a key in selecting projects to implement, solutions to pilot and actions to take regarding Lean events. With our new Lean and Six Sigma skillsets, we are able to combine our Lean program with our new data-driven analytical mindset. Moving forward, we will create standard work within and across functional areas that integrates new Six Sigma concepts and methods into our CQI program. This will include formal reviews and evaluations of proposed and piloted solutions to quality issues brought forward during a Lean event.

This will be particularly critical as new opportunities come with inherent inefficiencies (wasted time) and as new processes are developed and implemented. As with much of the health care industry, we are moving to

performance-based payment systems that pay capitated rates. Success will depend on our ability to demonstrate our value through concrete results, ensuring we achieve program service goals and meet adequate financial thresholds. In 2014, Direction Home invested in new IT infrastructure and staff training to support the development of a comprehensive, centralized data warehouse and performance dashboards containing all relevant programmatic metrics. These dashboards will illustrate key performance indicators at the individual staff, team and division level and will assist the Agency in better managing to our program and organizational outcome goals. Comprehensive and timely data is the key to ensure our new Business Intelligence system is robust enough to achieve our ends. We will work with our payor partners to identify the quality metrics critical to our joint success. In addition, we will work with the health plans to share data seamlessly so that our outcomes are transparent and our performance is verifiable and constantly improving.

Building a Culture ofExcellence

This year we worked to create a planned and aligned corporate culture with our Northeast Ohio Coalition of Area Agencies on Aging (NEOCAAA) partners. Clinical competencies related to care transitions, health and wellness programming and care management have been standardized. Best practices from each organization are generating standard work and supporting our goal for clinical integration. Members from our Disney Institute Leadership group have generated quality standards that will quide decisions for staff members across all three Area Agencies on Aging, ensuring that we exceed the expectations of our customers. This "Better Together" philosophy tethers programs and processes to ensure positive outcomes across our operations. We will formalize our "Better Together" philosophy through the creation of a standard work culture and corresponding reinforcement

and training to ensure our community members and payor partners receive consistent high-quality services.

Within the overarching manifestation of our Disney-influenced corporate culture, program specific "local performance cultures" have helped drive consistent quality services that are valued by our community members. As new program and partnership opportunities are identified, understanding value from the perspective of our members will be critical to our ongoing success. Lean mastery has provided our co-workers with the tools to increase efficiency of every day processes while ensuring that members receive high quality services. New programs such as MyCare Ohio require new tools to ensure that we can absorb the ever increasing complexity that is an unavoidable consequence of any change on such a massive scale. In 2014, selected staff received Lean Six Sigma Green Belt certification to acquire new up-to-date skillsets allowing us to identify opportunities for driving quality through data driven techniques. With the addition of Six Sigma tools, we will identify metrics that are critical to guality from the perspective of our members and apply this perspective specifically to our respective local performance cultures.

We will identify metrics that are critical to quality from the perspective of our members and apply this perspective specifically to our respective local performance cultures.

We will evaluate models of organizational structure to manage shared services such as Human Resources, Information **Technology and** Finance. We will offer to include members of the **Ohio Association of** Area Agencies on Aging (O4A) and other appropriate stakeholders in NEOCAAA's shared services.

In order to prosper in our new dynamic competitive business environment we must allocate our resources with a consistent emphasis on our long-term vision. One of our long held corporate values is to "emphasize long-term success over shortterm expediency". New opportunities require new investments, both in time and money. To meet the needs of the people whom we serve, take advantage of competitive windows of opportunity, and to provide the best support for our co-workers, we must ensure resources are directed effectively to the areas of the greatest impact. By tying these efforts to our strategic vision, we ensure we are investing in the future.

Our Financial Plan

Better Together-Shared Regional Services

The Northeast Ohio Coalition of Area Agencies on Aging (NEOCAAA) is comprised of Direction Home Akron Canton, The Western Reserve Area Agency on Aging in Cleveland and the Area Agency on Aging, 11 Inc. in Youngstown. Since its inception, NEOCAAA has had tremendous success in reducing costs by collaborative efforts such as health insurance, payroll, program development, strategic planning and leadership training. We have also jointly negotiated new business contracts, and therefore grew revenue, with our joint efforts on the Ohio Home Care Waiver, MyCare Ohio, and Independent Living Systems (ILS) which provides regional health coaching to individuals with Anthem's Medicare Advantage Program. The current business environment now prompts us to move strategically to a scale of risk/reward business among the three AAAs that presents significant market share advantages to our customers while also providing economies of scale that allow us to offer competitive market prices for our services. To continue with the momentum of these collaborations, we will evaluate models of organizational structure to manage shared services such as Human Resources, Information Technology and Finance. We will offer to include members of the Ohio Association of Area Agencies on Aging (04A) and other appropriate stakeholders in NEOCAAA's shared services.

Information Technology System Development-Supporting New Business Models

With the implementation of MyCare Ohio and OHC. new IT software and hardware requirements have been introduced. Each of our new health plan partners have their own systems for care management, as does the State for our current PASSPORT/ Assisted Living waiver program. These programs also require additional functionality from our hardware systems, including a phone system that supports 24-hour coverage and remote access to our network. We commissioned an independent report to evaluate our IT infrastructure to identify areas where effectiveness can be enhanced and productivity can be increased. Acting on the findings of this report we will invest in recommended new or enhanced systems, reduce redundancy where appropriate, optimize network reliability and improve our employee productivity. We will work with our NEOCAAA partners to replicate our IT efforts to create common denominators for IT systems, standards and competencies across northeast Ohio AAAs. This will enhance operations and facilitate interactions with our current and future customers.

Business Intelligence -Translating Data Into action to achieve Outcomes

One of the hallmarks of our organization is continuous quality improvement. This motivates us to find creative solutions and never be satisfied with status quo. Quality improvement processes such as Lean have guided us in removing waste from our processes and laid the foundation for Business Intelligence. Business Intelligence translates program data into guided action of staff which in turn leads to the efficient achievement of our desired outcomes.



For example, data from the Aging and Disability Resource Center provides us with information on call volume, customer service and productivity. We have invested in hiring new staff with analytical and statistical skillsets to have data-driven, goal-oriented decision support systems. This enables staff to base their actions and decisions on concrete performance metrics and analysis, and subsequently to see the quantifiable impact of these actions and decisions. This facilitates a true "PDSA" (Plan, Do, Study, Act) process. We have invested in information system software that facilitates the integration of program data among our various functional areas. Moving forward, we will invest in the creation of a "data warehouse" framework, which will be the foundation of our decision support and performance measurement systems. This will link our multifaceted programmatic efforts and create a system that we call "Project Elegant", which was created to comprehensively and continuously improve our performance.

Regional Staffing -Onboarding Those With a Passion for Our Mission

The recent changes in the provision of longterm care in Ohio have greatly impacted the employment landscape for Area Agencies on Aging. Implementation of the MyCare Ohio program has resulted in greater competition for social work and registered nurse care management staff. These changes present greater potential for increased turnover and recruiting challenges. We use our Continuous Quality Improvement methods to remove waste in our onboarding process from posting to hire. We are not alone in this issue, however. as regional competition impacts our NEOCAAA partners as well. We pride ourselves in having the best employees in their respective fields on our staff, and we intend to continue this long history. Therefore, to address this issue we will invest in a NEOCAAA regional compensation, recruitment, and retention analysis to ensure that we continue to attract and retain the best available employees.





agency awards



2014 Senior Hall of Fame Winners (left to right) – Dave Paltani, Lawrence Gorman, Joseph Ruby, Sylvia Gage, Brenda and Robert Ajtaji

Each year Direction Home Akron Canton honors individuals for their dedication to the betterment of older adults. At an annual awards ceremony, we honor our Senior Citizen Hall of Fame Inductees, the Student Scholarship Award winner and the Ombudsman Volunteer of Distinction award winner.

Senior Citizen Hall of Fame

This ceremony is dedicated to acknowledging the life-long contributions honorees have made to their communities by inducting four well-deserving seniors into the Direction Home Akron Canton Senior Citizen Hall of Fame. The 2014 Senior Citizen Hall of Fame inductees were Dave Paltani of Portage County, Lawrence Gorman of Stark County, Sylvia Gage of Summit County, and Robert & Brenda Ajtaji of Wayne County.

Student Scholarship award

Direction Home Akron Canton presents one student with a \$5,000 scholarship award each year to further the education of a student with a passion aligned with our mission. Winners are chosen based on their interest and intent to impact the lives of older adults. The 2014 Student Scholarship was awarded to Karlissa McDonald, a student at Kent State University majoring in Human Development and Family Studies.

Ombudsman Volunteer of Distinction Award

The Ombudsman Volunteer plays a vital role in advocating for the rights of those accessing long term services and supports, primarily in the nursing home. The 2014 Ombudsman Volunteer of Distinction Award was presented to Lucy Fesler. Lucy has selflessly dedicated over 400 hours of voluntary service to residents and families of Northfield Village, Manor of Grand Village, Brentwood Health Care, Grand Village Suites and Elmcroft. Lucy has touched the lives of over 1,300 residents by protecting their rights, improving care and brightening their days. Lucy is a wonderful advocate for older adults.

Congratulations to all the honorees. Thank you for all you have achieved throughout your lives and for all you continue to accomplish. Thanks to your hard work, the lives of older adults are continually enhanced.

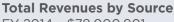


2014 Volunteer of Distinction (left to right) – Francine Chuchanis [Volunteer Manager], Lucy Fesler [Ombudsman Volunteer of Distinction], Liz Pfeiffer [Ombudsman]

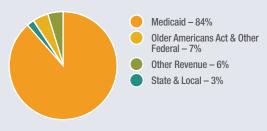


2014 Student Scholarship Winner (left to right) – Rhonda McDonald, Karlissa McDonald, and Alan McDonald

Consolidated Statements of Financial Position

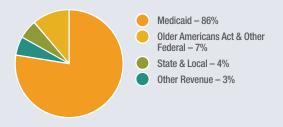


FY 2014 - \$78,000,901



Total Revenues by Source

FY 2013 - \$68,050,914



Total Expenditures

FY 2014 - \$76,644,133



Total Expenditures

FY 2013 - \$67,348,579



Assets	June 30, 2014	June 30, 2013
CURRENT ASSETS Cash and cash equivalents Accounts/grants receivable Prepaid expenses Total Current Assets	\$ 11,168,237 2,778,847 <u>11,959</u> 13,959,043	\$ 9,898,173 636,634 <u>10,649</u> 10,545,456
PROPERTY AND EQUIPMENT Land Building and improvements Equipment Total Less accumulated depreciation Total Property and Equipment	 330,000 2,016,736 594,626 2,941,362 1,013,451 1,927,911	 330,000 2,016,736 561,291 2,908,027 902,393 2,005,634
OTHER ASSETS Investment in Direction Home Ohio LLC Bond issuance fees, net Deposits Deferred compensation plan trust Total Other Assets	 10,000 0 11,104 <u>392,968</u> 414,072	 10,000 9,514 11,104 <u>335,506</u> 366,124
TOTAL ASSETS	\$ 16,301,026	\$ 12,917,214
Liabilities and Net Assets CURRENT LIABILITIES Current maturities of long-term debt Accounts payable Accrued payroll and payroll related accruals Deferred revenue Total Current Liabilities	\$ 0 7,508,598 769,307 1,149,590 9,427,495	\$ 100,000 5,490,717 626,603 <u>570,591</u> 6,787,911
LONG-TERM LIABILITIES Long-term debt, net of current maturities Deferred compensation plan trust Total Long-Term Liabilities	 0 <u>392,968</u> 392,968	 670,000 <u>335,506</u> 1,005,506
TOTAL LIABILITIES	\$ 9,820,463	\$ 7,793,417
NET ASSETS		

NET ASSETS Unrestricted 6,447,901 5,093,768 Temporarily restricted 32,662 30,029 **Total Net Assets** 6,480,563 5,123,797 TOTAL LIABILITIES AND \$ 16,301,026 \$ 12,917,214 NET ASSETS

Consolidated Statements of activities

Revenue and Support	Unrestricted	Temporarily Restricted	Jı	Year Ended ine 30, 2014 Total	Jı	Year Ended une 30, 2013 Total
GOVERNMENT SUPPORT Medicaid Older Americans Act & other federal State & local grants Total Government Support	\$ 65,537,075 5,052,067 2,552,218 73,141,360	 - - -	\$	65,537,075 5,052,067 2,552,218 73,141,360	\$	58,130,017 4,973,193 2,489,493 65,592,703
OTHER REVENUE Non-government revenue Fundraising Program revenue Loss on disposal of equipment In-kind revenue Interest income Total Revenue	 3,588,683 182,267 904,890 (983) 121,657 59,641 4,856,155	 3,386 - - - - - - - - - - - - - - - - - - -		3,592,069 182,267 904,890 (983) 121,657 59,641 4,859,541		1,240,874 161,643 917,257 (68,795) 140,596 66,636 2,458,211
TOTAL REVENUE AND SUPPORT	\$ 77,997,515	\$ 3,386	\$	78,000,901	\$	68,050,914
Expenses						
Salaries Benefits Professional services Equipment and supplies Travel and training Depreciation and amortization Occupancy Other Program allocations Fundraising In-kind expenses Interest expense Other rental expenses	\$ 10,087,585 2,823,418 424,803 1,255,470 678,903 117,743 240,683 442,587 60,323,187 22,839 121,657 36 104,471	- - - 753 - - -	\$	10,087,585 2,823,418 424,803 1,255,470 678,903 117,743 240,683 442,587 60,323,940 22,839 121,657 36 104,471	\$	$\begin{array}{c} 8,356,333\\ 2,468,808\\ 328,142\\ 786,259\\ 536,862\\ 91,602\\ 242,298\\ 334,717\\ 53,821,290\\ 19,463\\ 140,596\\ 93,551\\ 128,658\end{array}$
TOTAL EXPENSES	\$ 76,643,382	\$ 753	\$	76,644,135	\$	67,348,579
CHANGE IN NET ASSETS NET ASSETS, BEGINNING OF YEAR	 1,354,133 5,093,768	 2,633 30,029		1,356,766 5,123,797		702,335 4,421,462
NET ASSETS, END OF YEAR	\$ 6,447,901	\$ 32,662	\$	6,480,563	\$	5,123,797

Year ended June 30, 2014		Year ended June 30, 2013		Expenditures as reporte
Program services Building operations Administration and fundraising	\$\$74,217,461 186,942 2,239,732	Program services Building operations Administration and fundraising	\$ 64,918,318 273,894 2,156,367	statement of activities b elimination of inter-com transactions are allocat functional areas.
TOTAL EXPENDITURES	\$76,644,135	TOTAL EXPENDITURES	\$67,348,579	

Subsidiary was performed by Bober Markey Fedorovich. The financial information in this report has been extracted from the consolidated financial statements covered by the reports of independent auditors dated January 7, 2015 in which Bober Markey Fedorovich expressed an unqualified opinion. The audited consolidated financial statements may be reviewed upon request at Direction Home Akron Canton Area Agency on Aging, 1550 Corporate Woods Parkway, Uniontown, Ohio 44685.

on the ore ny to the

Provider Network Earnings

Agency	Service 2	014 Total
A Better Home Health Care North, Inc.	Homemaker, Personal Care	\$1,200,113
A.S.A.P. Home Care, Inc.	Homemaker, Personal Care	\$614,688
Absolute Health Services, Inc.	Homemaker, Personal Care, Nutrition Consultation, Social Work Counseling	\$658,504
	Personal Care, Homemaker	
	Homemaker, Personal Care	
Access Nursing Care, LLC.	Personal Care, Homemaker	\$179,408
	Minor Home Modification	
	Home Medical Equipment	
	Emergency Response System	
, , ,	How Hower drandparents of companions	
	Home Medical Equipment	
	Home weardal Equipment	
	Homemaker, Personal Care	
•	Assisted Living	
	Adult Day Service, Adult Day Service Transportation	
	Social Work Counseling and Respite	
	Transportation	
	Transportation	
	Assisted Living	
	Homemaker, Personal Care, Chore, Pest Control	
	Homemaker, Personal Care	
	Congregate Meals, Socialization	
	Transportation	
Atlantic Medical Transportation, LLC.	Transportation	\$54,214
	Chore, Pest Control	
Bel Air Convalescent Center	Adult Day Service, Adult Day Service Transportation	\$15,155
Beyond Eating LLC.	Nutrition Consultation	\$26,658
Boardman Medical Supply Co.	Home Medical Equipment	\$5,577
Brewster Parke, Inc.	Assisted Living	\$3,440
Briarwood Leasing, LLC.	Assisted Living	\$48,074
Brookdale Place of Bath, LLC.	Assisted Living	\$4,736
Brookdale Senior Living Communities, Inc.	Assisted Living	\$77,842
Buckeye Transport Service, LLC.	Transportation	\$13,208
	Assisted Living	
BXN Health Services. LLC.	Homemaker, Personal Care, Adult Day Service, Adult Day Service Transportation	\$87.912
	Homemaker, Personal Care, Nutritional Consultation	
0	Homemaker, Personal Care	. ,
	Assisted Living	
e e e e e e e e e e e e e e e e e e e	Emergency Response System, Homemaker, Home Medical Eqpt., Personal Care, Social Work Counselin	
-	Adult Day Service, Adult Day Service Transportation	-
	Assisted Living	
	Homemaker, Personal Care	
	Home Medical Equipment	
	Transportation	
	Homemaker, Personal Care, Community Transitions	
Coleman Professional Services		
	Personal Care, Pest Control	
	Homemaker, Personal Care	
Community Caregivers of Green, Inc.	Homemaker, Personal Care	\$1,126,962



Agency	Service	2014 Tota
Community Caregivers of Stark County	Homemaker, Personal Care	\$883,36
Community Caregivers of West Akron	Homemaker, Personal Care	\$1,075,03
Community Legal Services	Legal Counseling	\$62,02
Companions of Ashland Homecare and Nurse Aide Training	g Homemaker, Personal Care	\$205,24
Complete Healthcare Services, Inc.	Homemaker, Personal Care	\$799,82
ConnectAmerica.com, LLC.	Emergency Response System	\$7
Creative Bath Systems	Minor Home Modification	\$37,42
Critical Signal Technologies, Inc.	Emergency Response System, Home Medical Equipment	\$111,09
Decor Built Construction, Inc	Minor Home Modification	\$292,03
Duraline Medical Products, Inc	Home Medical Equipment	\$2,57
E Group, Inc	Personal Care	\$13,82
Easter Seals Northeast Ohio	Visiting	\$20,08
Elmcroft of Sagamore Hills	Assisted Living	\$505,14
Emerald Transportation	Transportation	\$2,98
Empowerment Homes, Inc	Homemaker, Independent Living Assistance, Personal Care, Transportation	\$23,19
EMS Sentry, Inc.	Emergency Response System	\$36
Equal Access	Emergency Response System, Minor Home Modification, Home Medical Equipment	\$27,19
	Congregate Meals, Farmer's Market, Foster Grandparents, Home Delivered Meals, Homemak	
	RSVP, Social Work Counseling, Sr Companion	
inney's Institutional Pharmacy	Home Medical Equipment, Minor Home Modification	
	Homemaker, Personal Care	
	Transportation, Homemaker	
1 7	Home Medical Equipment	
	Assisted Living	
	Homemaker, Personal Care	
	Adult Day Service, Adult Day Service Transportation, Transportation	
1 7	Home Delivered Meals	
	Home Delivered Meals	
o (Minor Home Modification	
	Assisted Living	
e e e e e e e e e e e e e e e e e e e	Homemaker, Personal Care	
	Adult Day Service, Adult Day Service Transportation, Homemaker, Personal Care, Chore, Comm	
	Emergency Response System, Home Medical Equipment	
.	Assisted Living, Community Transitions	
	Homemaker, Personal Care	
	Home Medical Equipment	
	Home weuca Equipment	
-		
	Homemaker, Personal Care	
	Homemaker, Independent Living Assistance, Personal Care, Social Work Counseling	
	Homemaker, Personal Care	
	Homemaker, Personal Care	
	Homemaker, Personal Care	
	Homemaker, Personal Care, Nursing	
	Transitions Services	
	Emergency Response System, Homemaker, Home Medical Equipment, Personal Care	
	Homemaker, Personal Care	
·	Homemaker, Personal Care	
	Minor Home Modification	
	Assisted Living	
	Enhanced Community Living, Homemaker, Personal Care	
	Emergency Response System, Independent Living Assistance, Information & Referral	
	Information & Referral	
n-House Healthcare. Inc.	Homemaker, Personal Care	\$31,27

Provider Network Earnings

Adult Day Service, Adult Day Service Transportation, Minor Home Modification Minor Home Modification Homemaker, Personal Care Transportation Minor Home Modification	\$331,54
Homemaker, Personal Care Transportation	
. Transportation	\$27,31
Minor Homo Modification	\$156,993
	\$55,390
Homemaker, Personal Care	\$232,703
. Homemaker, Personal Care	\$53,113
. Emergency Response System	
. Emergency Response System, Home Medical Equipment	\$235,127
	<i>,</i>
0,	
	1 - 7
	. ,
	. ,
Homemaker, Personal Care	\$65,086
. Adult Day Service, Adult Day Service Transportation	\$271,393
Social Work Counseling	\$2,723,330
Congregate Meals, Information and Referral	\$5,096
. Assisted Living	\$222,211
. Homemaker, Personal Care	\$7,221
. Homemaker	\$4,094
Emergency Response System, Homemaker, Personal Care, Home Medical Equipment	\$681,785
. Homemaker, Personal Care	\$40,368
. Personal Care, Homemaker	\$112,691
	. ,
,	
-	
·	
	Insignity frequestion of the system, Home Medical Equipment. Homemaker, Personal Care Assisted Living Home Medical Equipment Image Adult Day Service Transportation, Independent Living Assistance, Transportation Home Medical Equipment Emergency Response System Chore, Congregate Meals, Counseling, Farmer's Market, Home Delivered Meals, Homemaker, Person Social Work Counseling, RSVP Homemaker, Personal Care Congregate Meals, Counseling, Farmer's Market, Home Delivered Meals, Homemaker, Person Social Work Counseling, RSVP Homemaker, Personal Care Congregate Meals, Counseling, Farmer's Market, Home Delivered Meals, Homemaker, Person Social Work Counseling, RSVP Homemaker, Personal Care Congregate Meals, Home Delivered Meals, Home Medical Equipment, Emergency Response System, Home Medical Equipment, Emergency Response System, Home Medical Equipment, Homemaker, Personal Care, Homemaker, Personal Care, Homemaker, Personal Care Adult Day Service Transportation Homemaker, Personal Care Adult Day Service, Adult Day Service Transportation Homemaker, Personal Care Adult Day Service, Rursing, Physical Therapy, Enhanced Community Living, Social Work Counseling Congregate Meals, Information and Referral Assisted Living Assisted Living Homemaker, Personal Care Homemaker, Homemaker, Homemaker, Homemaker, He



Agency	Service	2014 Tota
Rx Home Health Care, Inc	Homemaker, Personal Care	\$40,86 ⁻
S.M.I.L.E., Inc	Emergency Response System	\$7,22
Sanctuary Skilled Home Health Care	Homemaker, Personal Care	\$3,250
SarahCare	Adult Day Service, Adult Day Service Transportation, Homemaker, Personal Care	\$981,39 ⁻
Scenic View Transportation	Transportation	\$154,047
Schmidt Security Pro	Emergency Response System, Home Medical Equipment	\$14,819
Seeley Medical	Home Medical Equipment	\$6,255
Senior Independence	Adult Day Service, Adult Day Service Transportation, Personal Care, Transportation	\$362,657
SeniorCare Home Maintenance & Modifications, LLC	Minor Home Modification	\$5,538
Signature Health Services	Homemaker, Personal Care	\$118,601
Simply EZ Home Delivered Meals	Home Delivered Meals	\$1,829,688
Sonshine Medical, Inc	Home Medical Equipment, Minor Home Modification	\$7,749
	Transportation	
	Congregate Meals, Socialization	
	Assisted Living	
	Assisted Living	
	Transportation	
	Adult Day Service, Adult Day Service Transportation, Assisted Living, Homemaker, Personal Care	
	Evidence Based Prevention Program	
	Congregate Meal	
-	Chore, Minor Home Modification	
<i>.</i>	Chore. Homemaker. Personal Care	. ,
	Assisted Living	4)
	Assisted Living	· /
	Assisted Living	
	·	
	Assisted Living	
	Assisted Living	
-	Assisted Living	
	Assisted Living	
	Assisted Living	
	Transportation	
	Minor Home Modification	
	Assisted Living	
	Homemaker, Personal Care	
	Personal Care	
	Personal Care	
/isiting Social Workers of Ohio, Inc	Social Work Counseling	\$182,130
/RI	Emergency Response System, Home Medical Equipment	\$54,194
	Home Medical Equipment, Minor Home Modification	
Wayne Manor	Assisted Living	\$252,290
West View Manor, Inc	Assisted Living	\$35,205
Nestark Family Services	Counseling, Homemaker, Personal Care	\$529,496
Western Reserve Catering	Home Delivered Meals	\$351,473
Willcare	Homemaker, Personal Care	\$50,977
YWCA of Alliance	Congregate Meals	\$19.232

Grand Total: \$60,323,940

2014 Foundation Raffle Winners

Grand Prize: Seven nights plus airfare for two at The Ritz-Carlton Kapalua, Maui, Hawaii Pam Simmons, Canton, OH

First Prize: Choose Your Adventure – Five nights plus airfare for two Mark Yantek, Richfield, OH

Second Prize: *HD Home Theater* Sheri Mozea, North Canton, OH

Third Prize: *\$2,000 Visa Gift Card* Sandy Gent, Canton, OH

Fourth Prize: \$1,000 Visa Gift Card and two Nights at The Westin, Michigan Avenue, Chicago Gabe Toles, North Canton, OH

Fifth Prize: \$1,000 Visa Gift Card and a \$500 Gift Card to Gasser Fine Jewelers (Canton, OH) Connie Ring, Louisville, OH

Sixth Prize: \$500 Visa Gift Card and an overnight stay for two at Glenmoor Country Club (Canton, OH) Tony & Sookie Vallone, Canton, OH

Seventh Prize: Pamper Yourself Package – \$500 Visa Gift Card and an overnight package for two at Sheraton Suites Akron/Cuyahoga Falls Diane Gray, Ravenna, OH

Thousands of older adults in Portage, Stark, Summit and Wayne counties do not qualify for in-home assistance through Medicaid but cannot afford to purchase long-term services and supports on their own. These older adults have very few long-term care options. The absence of affordable long-term care can result in physical and financial decline, ultimately resulting in unnecessary Medicaid enrollment and nursing home placement. The goal of the Greater Akron/Canton Area Agency on Aging Foundation is to provide education and a greater understanding of the public policies affecting services available to older adults and to ensure adequate support of the senior populations who require assistance to remain independent.

The Foundation Story

Annually, funding for the Foundation comes from two separate campaigns: Care for a Lifetime and the Foundation Raffle Campaign. Care for a Lifetime is an annual internal fundraiser where Direction Home Akron Canton employees donate over \$50,000. These monies directly fund long-term services and supports to fifteen older adults on our Care Coordination Program. Without this generous support from our employees, these older adults would not have any other options to pay for their care. Thanks to the wonderful support and generosity of the Agency sponsors and staff, the 2014 Foundation Raffle raised over \$138,000. This will help fund the efforts of Direction Home Akron Canton's advocacy outreach campaigns. All prizes are graciously donated by our community partners at no cost to the campaign. Special thanks to our sponsors, whose generosity made our raffle prize package possible:

- Employee Benefits International, Inc.
- Gasser Fine Jewelers
- Glenmoor Country Club
- Sheraton Suites Akron/Cuyahoga Falls
- The Ink Well Akron
- UnitedHeathcare

We wish to thank our top donors, who include:

- Northeast Professional Home Care
- Simply EZ Home Delivered Meals
- Almost Family
- ClearPath Home Health
- Interim Health Care
- Haven Home Care
- Complete Healthcare Services, Inc.
- Callos Group
- Community Caregiver of West Akron



The Greater Akron/Canton Area Agency on Aging Foundation









David B. Reynolds, M.D. Chairman Physician, Cleveland Clinic Foundation Wooster Regional Medical Campus

Lee S. Walko Vice Chairman *Attorney, Brennan, Manna & Diamond LLC*

Hortense B. Bobbitt, MS, RD, LD Secretary *Retired, Registered Dietitian* George F. Sesock Treasurer Senior Banker, J.P. Morgan Government/Not for Profit

Suzanne M. Gill Director Vice President, Patient Care Services/CNO, Western Reserve Hospital

Margaret F. Medzie

Director Vice President, Development & Donor Engagement, Akron Community Foundation Fran D. Rice Director Community Liaison

Natalie E. Lindsay-Smith Director Senior Paralegal, Law Department, The Goodyear Tire & Rubber Company

Doug and Shirley Estes

Doug and Shirley Estes have been happily married for 63 years. Doug worked for Goodyear Tire and Rubber Company for 20 years before purchasing and running a very successful manufacturing company. In 2001 Doug suffered a serious stroke where he lost partial function to the right side of his body, and he lost all of his peripheral vision. After the stroke, Shirley found herself caring for her father as well as her husband.

During this time, Doug suffered his second stroke which brought additional damage, limiting Doug's function even more. While caring for her father and husband, Shirley broke her left hip. Not long after recovering from her broken hip, Shirley suffered a fall and broke her right hip. After enduring several health and financial declines, Doug and Shirley realized they needed additional help to perform necessary daily activities.

After talking with their doctor and getting a referral to Direction Home Akron Canton, Doug and Shirley were enrolled in the Care Coordination program through the Greater Akron/Canton Area Agency on Aging Foundation.

The Estes receive assistance from an aide five days a week. "We are so grateful for this program. When I wake up in the morning I know there's going to be someone here," said Shirley. The aide assists the Estes with any non-medical related chores including cleaning and errands. Doug also has an Emergency Response System (ERS) that has been provided to him by the Greater Akron/Canton Area Agency on Aging Foundation. While Shirley was at a doctor's appointment Doug fell and was unable to get up. He was able to use his ERS to call for help and stay connected with the emergency response personal while he waited for the paramedics to arrive.

"It gives me a sense of security if I need to go out," said Shirley.

Doug and Shirley love spending time with their nieces and nephews and volunteering for their church. They love to host family get-togethers and bible studies at their home and thank God every day for their ability to remain as independent as possible and in the home that they love. They open their home to others every opportunity they have. "We maintain a very happy, joyful life. He'll be 86 and I'll be 82, and we do a lot of things that we wouldn't be able to do because of the help we get."

Doug and Shirley are a perfect example of the thousands of older adults in our communities who struggle with long-term care needs. With your help, and the help of our community partners, people like Doug and Shirley can remain independent with dignity in the comfort and safety of their own homes.



Doug and Shirley Estes