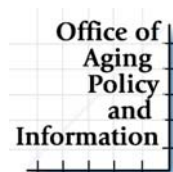


# **SURVEY RESPONSES ON THE READINESS OF STATE GOVERNMENT TO MEET THE CHALLENGES OF AN AGING TEXAS**

**JULY 2002**

This report is one in a series published by the Office of Aging Policy and Information (OAPI) at the Texas Department on Aging in an effort to provide timely, relevant, and customized information on aging issues to the legislature, state and local government, and other stakeholders.



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## **ACKNOWLEDGEMENTS**

**The Texas Department on Aging (TDoA) would like to thank the state agencies that responded to our survey. We appreciate the time devoted by each respondent in providing a review of the aging issues relevant to their agency's mission. TDoA is grateful to our colleagues for their willingness to participate in the readiness assessment and in actively preparing for an aging Texas population.**

**TDoA also thanks the Minnesota Board on Aging for providing the conceptual framework for assessing our state government's readiness.**



## **AGING MATTERS IN TEXAS**



The mission of Texas Department on Aging (TDoA) is to be the state's visible advocate and steward for a full range of services and opportunities that allow older Texans to live healthy, dignified, and independent lives. Federal and state law charges TDoA with conducting long-range planning activities on aging issues. The 76<sup>th</sup> Texas Legislature directed TDoA to serve as the state's primary resource on aging and to work with federal and state organizations in conducting studies and surveys on the special problems of older Texans (SB 374). The 75<sup>th</sup> Texas Legislature (SCR 36) endorsed TDoA's *Aging Texas Well* initiative to help Texans address individual and family preparedness for retirement and aging well, and to form partnerships between state government agencies and elected officials to address public policy issues related to older Texans.

To fulfill its mission and statutory mandates, TDoA established the Office of Aging Policy and Information (OAPI). OAPI's serves as a comprehensive resource for state government and the general public on issues, trends, services and programs for an aging Texas. It also conducts primary and secondary research, provides in-depth policy and planning analysis, and disseminates information about aging services through reports, public information, and partnerships with public and private sector organizations.

OAPI maintains a wide range of stakeholder relationships. An Aging Policy Resource Group -- consisting of experts from state government, consumer groups, service providers, and academic institutions -- helps identify and prioritize aging issues and policy solutions. OAPI also relies on community forums, policy roundtables and similar events to ensure consumers and experts inform the policy and planning analysis.

OAPI's future work will continue to focus on the readiness of state government and local communities for an aging population. TDoA is committed to ongoing analysis of aging issues and their policy implications for Texas. OAPI will serve as resource and partner to other state agencies and state leadership to ensure that allows older Texans live healthy, dignified, and independent lives.



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## EXECUTIVE SUMMARY

The older adult population increased steadily during the 20<sup>th</sup> century in terms of absolute numbers and as a percentage of the total population. As the Baby Boom generation ages, the population of older adults is projected to increase from the current 13 percent of the Texas population to 22 percent by 2030. How will this generation change the way we perceive aging in Texas? How will state government, social institutions and the private sector respond to it?

The purpose of this report is to begin to answer this question. It examines the readiness of state government for an aging Texas. Specifically, the report should be used to:

1. provide specific information to agencies, state legislators, and other aging stakeholders on current and future initiatives, goals, and desired outcomes,
2. raise awareness of the aging issues that pertain to state government readiness,
3. guide future research, and
4. shape public policy that impacts older Texans.

In February of 2001, The Texas Department on Aging's Office of Aging Policy and Information (OAPI) surveyed 192 state governmental agencies, commissions, and boards listed on the State of Texas website (<http://www.state.tx.us>). A total of 152 agencies completed and returned the survey. Of the responding agencies, 74 indicated they had no specific issues related to aging. The remaining 78 respondents offered insight into their aging issues, current initiatives, future needs, and methods that could be used to measure progress toward preparedness. This report focuses on state government and does not address all entities that serve the aging population in Texas.

To varying degrees, state agencies are aware of aging issues and have begun to consider how the aging of our society will shape the future for Texas. Many respondents cited the changing demographics of the older adult population as a primary issue. Most agencies are aware of the expected increase in the absolute numbers of older persons and the potential impact on the demand for services. Agencies recognize that these large demographic shifts are likely to increase

diversity among their service populations. As a result, many government entities are actively contemplating adjustments in the type of services and the manner in which they are delivered. Many agencies acknowledge that addressing these issues will require realignment of internal resources, collaborative efforts and partnerships, information and data gathering, and innovative ways of delivering services.

Texas agencies report specific aging issues related to providing caregiving support services, community-based alternatives to long-term care, and transportation. Other issues include technology skills gaps and ensuring a well-prepared health care workforce. Internally, agencies are primarily concerned with recruiting and retaining employees. Large proportions of agency employees are approaching retirement age, while qualified replacements are increasingly difficult to find. Thus, agencies may experience a drain on overall staff expertise. Agencies have begun training initiatives to transfer expertise of experienced staff members to new employees, yet agencies are increasingly concerned that shortage of qualified staff will impair their ability to serve clients.

This document serves only as a preliminary status report on current state government readiness. Our next step is to help state agencies conduct more detailed self-evaluation of readiness, and to develop an action plan addressing the needs of the growing aging population. Thus, leaders and planners across Texas state government can look to TDoA as a comprehensive resource in preparing for the future.

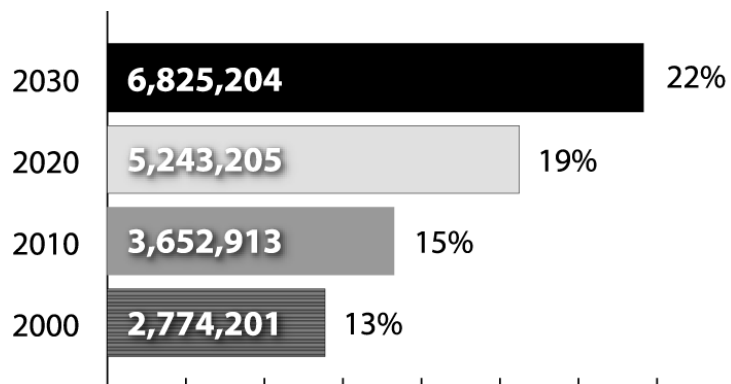
# CHAPTER I

## INTRODUCTION AND OVERVIEW

### BACKGROUND AND PURPOSE

The older adult population has increased steadily during the 20<sup>th</sup> century in terms of absolute numbers and as a percentage of the total population. Texans age 60 and over are projected to increase from 2.7 million in 2000 to 6.8 million by 2030, largely due to the aging of the Baby Boomers. Thus, the older population is projected to increase from the current 13 percent of the Texas population to 22 percent in 2030. These projections are displayed in Figure 1.

**FIGURE 1. PERCENTAGE GROWTH IN THE 60+ POPULATION IN TEXAS**



Source: Texas State Data Center, Population Growth Scenario 0.5 (2002)

How will this generation change the way we perceive aging in Texas? How will state government, our social institutions and markets react to these changes? The projected demographic changes will likely increase the demand for resources and services by our aged population. Ongoing research and discussions on the unique needs of older adults in Texas is essential in developing and planning for the imminent changes in service demands.

This report's findings are the foundation for evaluating state government's readiness to meet the challenges and opportunities of an aging Texas population. The report provides information on aging issues to agencies, legislators, and other aging stakeholders to raise awareness, direct future research, and shape public policy affecting older Texans. This information is intended as a catalyst for government

leaders to begin consideration on how this demographic shift will impact the business of state agencies in Texas. State government entities must take the lead in developing actions to address the demands we will likely face in the coming decades. By starting now, Texas will be better prepared to serve its citizens in the years ahead.

## **SURVEY METHODOLOGY**

In April 2000, TDoA surveyed 34 government agencies for which services and programs for older Texans are a major focus. A report describing the responses of 22 agencies was published in November 2000. To gain a more comprehensive picture of the readiness of Texas government to meet the challenges of an aging Texas, TDoA expanded the survey in February 2001 to include all state agencies. TDoA sent a one-page questionnaire via electronic mail, regular mail, or fax to 192 state agencies, commissions, and boards. The list of agencies surveyed was generated from the State of Texas website (<http://www.state.tx.us>). (See Appendix A for a complete list of state agencies surveyed) Agencies were asked to submit responses electronically, by fax, or regular mail. To increase the response rate, TDoA research staff administered the survey by telephone to agencies that did not respond by the first deadline.

### **Response Rate**

Survey responses were received from 152 agencies, for a response rate of 78.7 percent. Of the 152 agencies 74 (48%) reported no aging issues impacting the agency's business. The 78 (52%) who faced aging issues are summarized below.

### **Survey Items**

Agencies were asked the following four questions:

1. What are the current and emerging aging issues within your agency's business?
2. What are you doing now to address these issues?
3. What actions should be taken in the future by your agency to address these issues? Please describe the different collaborative approaches such as partnerships between agencies, the private sector, etc.

4. What are one or two ways (measurable indicators) that your organization would measure progress on these issues related to your agency's business?

## **SURVEY RESULTS**

Of the 152 responding state agencies, 52 percent (78/152) reported aging issues and 48 percent (74/152) said there were no specific aging issues affecting their business. Aging issues reported by the 78 state agencies have been divided into two general categories: 1) Issues related to providing services to the general Texas population (63 of 78 respondents), and 2) Issues specific to internal agency functions and staff (24 of 78 respondents). Some agencies reported both service-provision issues and internal agency function issues.

For each aging issue reported, respondents cited current initiatives that address the issues, and the actions they felt would be needed to address the issue in the future. Respondents also suggested possible ways to measure progress. (See Appendix A for an index of state agencies responses).

Common themes and initiatives are summarized below followed by tables containing each agency's response.



## **CHAPTER II**

### **DIRECT SERVICES FOR THE GENERAL POPULATION**

Of the 78 state agencies reporting aging issues, 63 respondents described aging issues related to providing services to the general population in Texas. Reported issues were then divided into two sub-categories: 1) Issues related to the delivery of direct services to the population (36 of 63 respondents), and 2) Issues related indirectly to the delivery of services through licensing, regulatory, research, and planning functions (27 of 63 respondents).

Many agencies provide services directly to the general population. Thirty-six agencies in this category described aging issues as they relate to the role of serving the overall Texas population.

### **CURRENT AND EMERGING AGING ISSUES**

**Changing demographics** of the older adult population were cited by many respondents as a primary issue. Most agencies are aware of the expected increase in the absolute numbers of older persons as individuals live longer and the large Baby Boom cohort approaches age 60. Age is associated with an increased risk of developing chronic conditions, declining health status, and disability. Thus, state agencies realize that as the older population increases in absolute size, **health care services will likely be in greater demand**. Substance abuse and chemical dependency are also recognized as medical issues for older adults.

Due to physiological changes of normal aging, the health care needs of older adults are unique and differ from those of the general adult population. Agencies recognize that these large demographic shifts are likely to **increase diversity among their agency's service populations** and many government entities are actively contemplating adjustments in the **type and manner in which services are delivered**. This is a particular issue cited by agencies that serve younger physically and mentally disabled populations. As they live longer, these individuals begin to experience age-related health problems in addition to existing disabilities.

In order to meet these changing demands in service delivery, state agencies recognize the **need for a well-prepared health care workforce** with specialized training and diverse skills to respond to the multiple health care needs of the elderly

population. Texas suffers from a shortage of health care providers across disciplines, including family practice, internal medicine, dentists, mental health professionals, advance nurse practitioners, and registered nurses. Rural counties are further disadvantaged because they often have more severe shortages than urban areas. Since health care services are increasingly expensive, cost is cited as a primary issue for many state service providers. Agencies that provide services through the state Medicaid program, state schools for the mentally ill, and long-term health care facilities all cite issues related to the **cost of providing medical care services and prescription medication**. Operational costs such as need for increasing staff and providing liability insurance for facility operators are also cited.

Survey respondents acknowledged the **need for family caregiving support services**. When people become incapable of major daily activities due to physical or mental illness, family caregivers are called upon for assistance and support. Caregiving is often provided in numerous ways even before the need becomes acute. More than five million older Americans receive some form of informal care from family members and friends to help them live independently in community settings. Studies indicate that family caregivers can become physically, emotionally, and financially burdened. Therefore, caregiver support services - primarily respite services - are a vital element of the informal support system.

**Suitable housing services** are critical in determining the quality of life for older adults. While the majority of elders live independently in their own homes, many need help with basic activities of daily living. Previous research indicates that older adults strongly prefer to age-in-place in their communities; however, options for doing so are often limited. State agencies report that many individuals could remain in their own homes if they had the appropriate resources. Yet, due to lack of adequate funding, many agencies are able to serve only a small proportion of those in need. Thus, **a greater supply of community-based resources** is needed to help older persons live independently and avoid unnecessary institutionalization. When community-based resources no longer support independent living at home, people **need housing alternatives** such as congregate housing, adult day care, or assisted living facilities.

Respondents cite the **need for basic transportation services** that allow people to move from one place to another for personal, medical, social, employment, or recreational reasons. Transportation alternatives for those who no longer drive must be available and easily accessible to older adults to avoid compromises in



personal mobility, access, choice, opportunity, and independent living. Transportation is especially important to rural Texans, for whom service access is often more limited.

Some older adults today choose to continue working, either for needed income or personal desire. In Texas, 15.6 percent of those over 60 are employed full time, and seven percent work part-time. However, older adult workers must maintain knowledge and job skills in order to remain competitive in today's job market. State agencies that provide **services for older workers** cite many aging issues related to the skills gaps between younger and older workers. This is a particular concern for agencies charged with training older workers. Occupations that were common 20 years ago are less common today. For example, manufacturing jobs have decreased in an era of technology where computer and data processing jobs are becoming the norm. The occupational gap widens when older workers have not had the opportunity to receive training for these technological positions.

State agencies also cite issues related to the anticipated increase in the number of older workers with disabilities. **Vocational rehabilitation services** help people with disabilities adjust their employment skills. Barriers to vocational rehabilitation for older Texans include training personnel shortages, age bias, restricted funds, and limited staff knowledge of geriatric rehabilitation techniques. Employment agencies express concern about recent research findings suggesting that older workers have higher rates of on-the-job injuries. Thus, many state agencies feel a greater burden to develop, fund, and implement safety and rehabilitation programs to prevent injuries among older workers.

## **CURRENT INITIATIVES AND FUTURE ACTIONS TO ADDRESS AGING ISSUES**

Many state agencies strive to meet the increases in service demand by **expanding delivery**. To meet financial barriers, numerous state agencies report seeking grant funding to supplement existing program budgets.

This survey's results indicate that many government agencies have recognized the unique needs of the older population and **have tailored components of the services provided** to meet those needs.

Many initiatives are centered on the prevailing need for consumer education. A large proportion of older Texans could benefit from state programs but are not receiving help, largely because they do not know what services exist or how to access them. State agencies recognize the importance of helping consumers and their families better understand government-sponsored programs, their options, and how to access available services. Therefore, **specialized outreach** that includes, but is not limited to, public service announcements, brochures, and information hotlines has been established by multiple respondents to increase awareness among aging consumers.

Agencies have also **implemented programs to educate staff members** about the older adult population, particularly for those providing care in mental health facilities and long-term care facilities. Some agencies not only train existing staff, but also report efforts to **hire additional employees with expertise in serving older adults**.

Respondents consistently emphasized communication between agencies who serve older adults, not only to streamline service delivery, but also to disseminate information about services to consumers and their families, seek additional funding, or promote policy changes. **Agencies acknowledged the importance of partnerships** with entities at the state, federal and local level and **actively collaborating to share expertise on aging issues**. For example, many state agencies had established internal task forces to address specific aging issues. Respondents identified agencies where partnerships did not yet exist and proposed methods of possible collaboration in the future.

Many agencies cited the need for ongoing research to better understand the special needs of the growing older population. Many cited **plans for formal studies to better coordinate services** at the state and local levels. Research initiatives are underway to improve the existing services, while other research focuses on pilot testing new programs. Research initiatives were also cited as critical components in **developing recommendations for more efficient policies**.

While some agencies were not actively involved in initiatives to specifically address aging, most acknowledged the need to consider the impact of demographic changes when planning for the future.

## MEASURES TOWARD PROGRESS

Since meeting the growing service demand was a primary aging issue, a common measure of progress was the **number of older adults served** by the agency. However, some agencies do not record consumers' ages and would need to modify data-collection methods before summarizing information on service to older adults. Other measurable indicators of service delivery included the **percentage of total need met**, and the **number of programs** for older adults implemented by the agency. Some agencies measured progress toward development of new programs by the number of grants received. Methods of measuring service quality included consumer satisfaction surveys and detailed feedback from service providers. Some agencies cited a reduction in the number of complaints received by consumers and their families as a measure of progress toward quality service delivery.

Many agencies reported **ongoing outreach initiatives** to educate older consumers and their families. Measurable indicators for outreach included numbers of brochures and public service announcements disseminated, numbers of calls made to an information hotline, and numbers of participants in information seminars. Agencies suggest compiling an annual outreach activity report to document such progress.

Respondents also cited measures of progress toward developing inter-agency partnerships and local collaborations. Methods included outcome evaluations on **Memorandum of Understanding (MOU) agreements** between agencies, or level of participation on an agency's task force.

Table 1 provides the verbatim responses from state agencies as they pertain to provision of direct services. Responses are grouped by alphabetical lists of responding state agencies. Appendix A lists all state agencies surveyed and the corresponding location of their response.

**TABLE 1: DIRECT SERVICE ISSUES**

<b>ABILENE STATE SCHOOL</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Medical expenses and meeting the daily costs of living.	We have secured a private grant to help fund medical expenses. Continually seek resources and information to aid the aging adults in meeting their cost of living. We have in-services for our seniors to pass on information regarding these issues. We also have a food pantry available for those in need.	Continue to gather resource information and stay tuned to private sector opportunities. Continue to collaborate with other agencies and network with other Foster Grandparent Directors by attending workshops, seminars, and conventions.	Monitor through personal observations the Foster Grandparents and yearly volunteer surveys.

<b>ALCOHOL AND DRUG ABUSE, COMMISSION ON</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Substance abuse (particularly prescription drug misuse/abuse), chemical dependency, gambling and associated medical problems	TCADA maintains a 24-hour toll-free information and referral hotline for individuals needing crisis counseling or drug and alcohol information. The Commission disseminates information through conferences and coalitions.	The Commission should engage in partnerships at the state and local level and should seek increased input from stakeholders. We would support funding for additional pilot projects and concur with other agencies in acknowledging the need to improve access.	Outcome evaluations on MOU; Number of participants in programs; number of older clients who have successfully completed programs.

<b>ATTORNEY GENERAL, CONSUMER PROTECTION DIVISION</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
High annual volume of consumer complaints, many from elderly consumers.	The Division has established a consumer outreach and public services section, a telephone hotline number, and a newsletter.	The Office will continue outreach initiatives.	Track consumer complaints; target distribution for consumer news.

**TABLE 1: DIRECT SERVICE ISSUES (CONTINUED)**

<b>ATTORNEY GENERAL, CRIME VICTIMS COMPENSATION DIVISION</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Increase in more mature crime victims, and grandparents parenting grandchildren.	The Division recognizes seniors as particularly vulnerable. Public service announcements and brochures have been designed specifically for the older citizen.	We should continue to aggressively network and partner with the other Divisions, particularly in outreach efforts.	Outreach data collected on a weekly/monthly basis. Annual report.

<b>ATTORNEY GENERAL, ELDER LAW DIVISION</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Lawsuits against nursing homes, assisted living facilities, and home health agencies, and hospice agencies; civil Medicaid fraud lawsuits against providers; rapid growth of home health agencies and assisted living facilities; increase in Medicaid beneficiaries that correlate with an increase in provider fraud; closing of nursing homes due to insolvency.	The Division has expanded its staff of attorneys and added a registered nurse certified in gerontology. Staff interacts with Department of Human Services, Texas Department of Health, Texas Department of Mental Health and Mental Retardation and Health and Human Services Commission. Full-time outreach coordinator and attorneys deliver speeches on fraud, advance care planning, and other senior issues. This Division initiates the Triad program, a cooperative effort between sheriffs, police, and senior leaders to educate law enforcement and seniors on senior issues, including fraud. The Division implements Triads through the Seniors and Law Enforcement Together (S.A.L.T.) Councils.	Continue aggressive enforcement of law affecting long-term care facilities and agencies for seniors. Continue outreach efforts for seniors. Provide education to the public at large on Medicaid fraud.	Statistics, including civil penalties recovered. Annual Report to Legislature and Governor on nursing homes.

**TABLE 1: DIRECT SERVICE ISSUES (CONTINUED)**

<b>AUSTIN STATE HOSPITAL</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
A need for placement options once a patient is ready for discharge. Many placement options, which include most nursing homes, are not able to deal with the psychiatrically involved individuals.	Planning with local mental health authorities for future needs and changes in services. To this point, Mental Health Associations have not identified an increased need for geriatric services on an inpatient basis.	Partnerships with local mental health authorities for future needs and changes in services.	Monitoring of census information and admission/discharge data to identify increased or decreased need for geriatric services; monitoring of placement barriers when working with Mental Health Authorities on discharge to identify trends in limited discharge options.

<b>BLIND, COMMISSION FOR THE</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
The Commission is concerned about the high number of older people in Texas who are blind or have severe visual impairment. Due to lack of adequate funding, we have been able to reach less than 1% of these persons. Many individuals could remain in their homes if they had resources to learn ways of living independently.	We regularly search for and utilize other sources of funding (grants) to supplement current funds. In-home skills training are available to eligible individuals either directly by Commission staff or through contracted providers. Staff assists in "train the trainer" activities with other community organizations to share basic self-help techniques.	Will continue to explore creative approaches to reaching more individuals and networking with other organizations to expand program capacity.	Percentage of need met. Number of older individuals that are blind who receive services.

<b>CONSUMER CREDIT COMMISSIONER, OFFICE OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
We believe that all Texas citizens who receive and utilize credit are affected by aging issues.	The Commission prepares and disseminates information to the public about credit rights. One of our major goals is to assist business and industry with compliance issues relating to credit laws and regulations.	The Commission will work to create an awareness of, and commitment to, the needs of elderly consumers. Publications can be developed and aimed at this specifically.	<i>None reported.</i>

**TABLE 1: DIRECT SERVICE ISSUES (CONTINUED)**

<b>COOPERATIVE EXTENSION SERVICE (FORMERLY AGRICULTURAL EXTENSION)</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
1) Caregiver education for professionals, paraprofessionals and family; 2) nutrition and health including health care accessibility and chronic disease prevention; 3) maintaining independence including accessible/adaptable housing options, maintaining financial security, preventing falls and incontinence; and 4) intergenerational connections.	1) Currently conduct over 10 eldercare conferences statewide with hospitals and colleges. Resources provided for Grandparents as Parents. Created Texas Community Futures Forum Eldercare Response Team (Members: A&M, TDoA, AARP, TAHSa, Alzheimer's Assoc, TxTech, UT Pan Am, and UTMB) to address strategies for action 2) Offer local information on nutrition and health, diabetes, exercise and physical activity. 3) Education on fall prevention, incontinence, depression, self-help devices, home modifications, preventing elder fraud, health care directives, and housing, 4) Intergenerational programs such as Simulation on Aging, Fact Sheets, and the Youth Exchange with Seniors Project.	Extension works with partners to develop educational experiences that will improve health, wellness and independence of elders and the knowledge, skill and attitude of caregivers. Form new partnerships with public and private sector groups. Collaboration to promote policy changes and improve delivery of services.	Progress on elder health and caregiver education measured by number of CEU's awarded, rating of the sessions, and knowledge/skill/practice changes following the program participation.

<b>CRIMINAL JUSTICE, DEPARTMENT OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Aging issues for this Department include 1) identification and housing of aging offenders, 2) programming for aging inmates, 3) release planning, and 4) increase demand for services.	The Department has established a Task Force to address these issues.	More work needs to occur with both the legislature and Board of Pardons and Parole. Data must be gathered on aging in Texas prisons. Partnerships should be developed between agencies and communities that provide needed services.	Agency's commitment to monitoring geriatric housing and specialized programs.

**TABLE 1: DIRECT SERVICE ISSUES (CONTINUED)**

<b>DEAF AND HARD OF HEARING, COMMISSION FOR THE</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Increased number of individuals with hearing loss who are unable to get financial assistance; Lack of information.	Notify AAA's, independent living centers, audiologists and hearing aid dealers about services.	More information, outreach programs, alerting consumer of services.	Number of outreach programs established. Number of programs provided.

<b>DENTON STATE SCHOOL</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Increased cost of drugs and medical care for aging population.	Requesting funding from the legislature. Requesting funding from NSSC for Senior Companion Program.	<i>None reported.</i>	<i>None reported.</i>

<b>DEVELOPMENTAL DISABILITIES, COUNCIL FOR</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
1) As our state's population ages, we have increasing numbers of individuals with severe disabilities living with aging family members. These families need increased in-home supports, including respite, to continue to provide support to their family member with a disability. Families desire community alternatives that will provide support and assistance to their family member when the aging caregiver is no longer able to provide the support. 2) Texas has not developed sufficient resources for individuals with disabilities who desire to work as they grow older.	TCDD has funded a grant to TDoA , which demonstrated building collaborative relationships between providers of aging services and providers of services and supports to people with disabilities in a number of local communities. We are hopeful that these efforts will continue when grant funding concludes.	We expect to continue to partner with various state and local agencies to create successful models of support both for aging caregivers and for older workers with severe disabilities.	Consumer satisfaction measures would be an important measure over time. That effort is beyond the scope of our time-limited grant project and is more appropriate for consideration by local providers.



**TABLE 1: DIRECT SERVICE ISSUES (CONTINUED)**

<b>EMPLOYEES RETIREMENT SYSTEM</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
ERS makes retirement annuity payments and provides health coverage and other benefits to retired state employees and their survivors. The aging issues with probable impact on our agency's business are (1) increase in senior population, especially arrival of baby boom generation in 50+ cohort, (2) longer lifespan of those retirees in 50+ cohort, and (3) increased costs of providing health care to 50+ cohort.	ERS will continue to build on its experience and knowledge regarding senior members. ERS (1) writes, edits, and publishes materials designed specifically for the senior population, (2) facilitates annual statewide seminars designed for seniors regarding retirement benefits plans and special topics (legal issues, federal programs, estate planning, lifestyle and health issues), and (3) develops technology which allows seniors easier access to personal information regarding benefits and services. The latter includes an Interactive Voice Response Telephone System and an Interactive web-based computer program which allows seniors direct access to service and information from ERS employees and contracted providers.	ERS will intensify marketing and outreach activities for the agency's annual "Senior Fair" in Austin and place more emphasis on encouraging senior attendance at regional fairs conducted in association with annual health insurance program enrollment.	ERS conducts a senior customer satisfaction survey regarding benefits and services. In 2000, the survey utilized web sites and email as an alternative for measuring satisfaction and participation. ERS received positive feedback from this communication and plans to expand its use in the future. ERS is designing new satisfaction surveys to be used in public presentation for Summer Enrollment. The new ERS "Customer Service Direct" interactive web based program contains a feedback feature allowing members to comment on programs or benefits directly to the Director of Customer Service.

<b>GENERAL LAND OFFICE</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Texas is in the process of building and opening four Texas State Veterans Homes using federal matching funds. There is a need for several additional Texas State Veterans Homes to service the needs of the aging Veteran population in Texas. The cost of liability insurance for the private operators of nursing facilities also has a huge impact upon the nursing home industry and has affected this Office by causing delays in the opening of the four new homes.	Representatives from the General Land Office are working with the Commissioner of the State Board of Insurance, The Governor's Office, and other legislative leaders in identifying the best possible solutions to make private liability insurance costs less prohibitive for operators of nursing facilities.	There should be continued efforts with the US Department of Veterans Affairs to secure federal matching funds to build more facilities on an as-needed basis. There should be collaboration with the Texas Department of Insurance, the nursing home industry representatives, and legislative officials to ensure that the Texas State Veterans Homes can be operated with adequate and reasonably priced liability coverage.	<i>None reported</i>

**TABLE 1: DIRECT SERVICE ISSUES (CONTINUED)**

<b>GUARANTEED STUDENT LOAN FUNDING CORPORATION</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
No pressing issues at this time, however, the demography of student loan borrowers is changing	<i>None reported</i>	The demography of student loan borrowers are changing, since students of all ages are going back to school, but the current number of students 60+ is small in number.	We would probably determine the needs and make modifications to practices.

<b>HEALTH AND HUMAN SERVICE COMMISSION</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
The key areas impacted by aging issues are 1) improvements needed in the delivery of long term services and supports; 2) increased cost of Medicaid, and 3) increased options for consumers and cost controls	<p>HHSC is the single State Medicaid Agency and provides oversight for the program to the six HHS agencies that administer the program. HHSC sets the overall policy direction for Medicaid and works to streamline eligibility and enrollment processes and coordinate waiver initiatives. By leveraging health care financing and interagency administrative resources, HHSC works to maximize cost-savings and produce greater efficiency.</p> <p>HHSC also serves in several roles as facilitator and coordinator among various state agencies that provide long-term services for older persons and persons with disabilities. The agency is leading the implementation of the Texas Promoting Independence Plan (Olmstead Supreme Court Decision), the Children's Policy Council, the Guardianship Alliance of Texas, and Regional Access Planning.</p>	The Commission should continue to address cross-agency issues in depth and identify ways to enhance consumer's quality of life.	<i>None reported.</i>

**TABLE 1: DIRECT SERVICE ISSUES (CONTINUED)**

<b>HEALTH, DEPARTMENT OF – CENTER FOR INFECTIOUS DISEASE</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
The facility treats all patients without regard to age. TB is a disease that people of all ages are afflicted with.	A new and modern hospital is being built to more adequately deal with patients with infectious diseases.	This facility is working closely with the San Antonio State Hospital and local physicians and hospitals to provide needed care for our patients.	Decrease falls while patients are hospitalized. Increase weight of patients who are hospitalized.

<b>HEALTH, DEPARTMENT OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
In the Department's 1999 report Aging Texas Well: A Health Perspective, five major issues relating to aging and health were identified: 1) the aging population and growing diversity, 2) the current health status of the aging population including opportunities for prevention and intervention, 3) the demand for health services including long-term care, 4) financing health care, including preparing the health care workforce. The Department also recognizes the safety of older drivers as a critical issue for the state.	TDH and TDOA received a joint charge from the State Health Care Coordinating Council to 1) identify the health needs of an aging population, 2) forecast health professionals and specialties that are needed to fulfill the health care needs of an aging population, and 3) to study and recommend health care policies and practices that enable individuals to age successfully. A report was prepared which contains several major recommendations relating to disease prevention practices, geriatric education, and analysis of data on lifestyle practices and behavior risk factors. The Department also maintains a Traffic Safety Program for Older Adults and continues this effort in cooperation with Department of Transportation,	The Department should consider implementation of the recommendations contained in the report previously described.	<i>None reported.</i>

**TABLE 1: DIRECT SERVICE ISSUES (CONTINUED)**

<b><i>HOUSING AND COMMUNITY AFFAIRS, DEPARTMENT OF</i></b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Agency responsible for addressing housing needs for lower income Texans.	Through affordable housing program design, the Department is promoting ways to increase the ability of elderly Texans to age in place. The Department gives weight to proposals that provide affordable housing for elderly, and encourages the development of multi-family affordable housing that serve elderly households. We fund community service programs. Recent legislation has directed the Department and TDoA to collaborate on providing affordable housing for elderly individuals and for families in which an elderly is head of household. Both agencies are asked to assess the need for housing among elderly, set standards relating to the design and construction of housing for elderly individuals, provide planning assistance to builders, and publicize the availability of the housing program to potential developers and residents.	We should continue to collaborate with local units of government, community-based non-profits, area agencies on aging, Public Housing Authorities, for-profits, and other organizations that provide services to elderly in order to better coordinate housing and services availability.	Monitor number of elderly served.

**TABLE 1: DIRECT SERVICE ISSUES (CONTINUED)**

<b><i>HUMAN SERVICES, DEPARTMENT OF</i></b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
<p>The Department identifies four key areas that impact aging consumers of human services: 1) an increasing need for access to state-funded assisted living and adult day care services; 2) an increasing number of citizens suffering from Alzheimer’s Disease; 3) continuing growth and demand for community based care services; and 4) a continuing need for improvement in nursing facilities and community settings.</p>	<p>The Department created concept of “aging in place”. Engaged in: 1) Implemented the use of fiscal intermediary agent; 2) Requests for funding from the legislature to expand services; 3) Development of reimbursement in nursing facility/community programs to create incentives for providers to increase wages to direct care staff; 4) New reimbursement for CBA assisted living based on levels of care; 5) Use of vouchers in CLASS program for severely disabled; 6) Expanding CARE project for Alzheimer’s and caregivers; 7) Assessments of nursing facility quality of care and consumer satisfaction to establish performance benchmarks; 8) Pilot study of 3 nursing facility quality improvement strategies; 9) Information to help consumers select nursing facility; encouraging quality-based competition among providers; and 10) Developing a performance-based incentive for nursing facilities.</p>	<p>The Department needs to continue providing support to service providers and to provide special staff training. The Department will develop a reimbursement methodology to provide levels of care in the Day Activity and Health Services program, including an Alzheimer’s rate. The Department will continue to interact with the Texas Department on Aging and other agencies to identify and address the unmet needs of the aging population.</p>	<p>Conducting consumer satisfaction surveys of community care clients.</p>

**TABLE 1: DIRECT SERVICE ISSUES (CONTINUED)**

<b>INSURANCE, DEPARTMENT OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
<p>The Department of Insurance is concerned about three key areas relating to the insurance needs of older persons in Texas. 1) consumer understanding of Medicare and options, 2) changing laws and regulations relating to insurance, 3) finding affordable supplemental insurance.</p>	<p>The Department provides information to help consumers make well-informed decisions. Staff travel around the state and provide educational presentations specifically on Medicare and other related insurance products. The Department also publishes Medicare information and utilizes the advice of a special Senior Action Team. We also continue the decade long partnership with TDoA to support the agency's Benefits Counselor Program</p>	<p>The partnership between TDoA and TDI is highly effective and needs to continue in light of the demographic changes and continual changes occurring in the insurance industry.</p>	<p><i>None reported.</i></p>

<b>MENTAL HEALTH AND MENTAL RETARDATION, DEPARTMENT OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
<p>In addition to the general aging of our priority population, we have identified major aging issues: 1) individuals who are at risk for being admitted to mental health facility, 2) individuals who are in state hospitals for over one year and 3) individuals in nursing facilities who have mental illness as well as nursing needs and desire to be served in the community. Also the issue of aging caregivers.</p>	<p>We encourage staff participation in initiatives that address aging issues such as aging conferences and education. Staff is involved in national, state, and local collaborative initiatives to raise awareness and build coalitions to better address the needs of the older adult population. Agency rules require follow-up assessment on all direct state hospital-to-nursing facility placements. Staff monitor the provision of the required assessments and provide technical assistance to support the care of these individuals. Promoting Independence initiatives such as the Mental Health Promoting Independence Advisory Committee. Also, we have received grants to do research and provide training to consumers, family members and staff relating to Promoting Independence. We are also seeking funds from the State Legislature to provide more intensive community services to the at risk population.</p>	<p>Education must be provided to MHMR providers. Existing partnerships with TDoA, the Mental Health and Aging Coalition, the Adult Community Resource Coordination Group, and Department of Human Service Alzheimer's Project should continue.</p>	<p>Measure inpatient admissions rates for older adult population. Provide training and measure attendance.</p>

**TABLE 1: DIRECT SERVICE ISSUES (CONTINUED)**

<b>MEXIA STATE SCHOOL</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Our clients are getting older	Additional and more intense health services	Additional and more intense health services	1) Increase age at death, 2) reduction in injuries due to falls

<b>PROTECTIVE AND REGULATORY SERVICES, DEPARTMENT OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
1) Protecting vulnerable adults from abuse, neglect, and exploitation 2) lack of access to health care 3) lack of mental health resources 4) lack of community-based services to meet the needs of vulnerable adults moving from institutions into the community setting and the potential for a resulting increased demand for APS programs 5) lack of resources for meeting the needs of unqualified immigrants who are incapacitated, indigent, victims of maltreatment, socially isolated, and no longer eligible to receive federally funded means-tested benefits such as long-term care 6) lack of resources to maintain children aging out of CPS conservatorship in community settings	Produce the Adult Abuse Prevention Kit. Participate in Adult Community Resource Coordination Groups, MHA Coalition, TRIAD and the State Agency Task Force on Victim's Services. PRS is 1) attempting to replicate the Texas Elder Abuse and Maltreatment (TEAM), a interdisciplinary approach to the identification/intervention/ prevention of elder abuse, neglect/, and exploitation, 2) engaged in elder abuse prevention campaign during Older Americans Month (May) of each year, 3) replicating the Oregon Bank Reporting Project to train employees to recognize/ report financial exploitation, provide free seminars to seniors on protecting themselves from financial abuse, 4) educating staff on community-based options and reviewing policy to support staff in moving clients to the least restrictive environment when the client chooses to do so, 5) coordinating with other state agencies and community organizations to identify resources on a case by case basis, and 6) leading initiative and meeting with TDH, TDHS, TDMHMR, and HHSC to identify barriers to accessing community-based services and ways to eliminate those barriers.	Increase APS partnerships in the community and with other state agencies to prevent maltreatment of vulnerable adults and create additional resources for clients; Improve the quality and consistency of the delivery of APS; Establish mechanisms to increase public access to information about resources that can prevent abuse, neglect and exploitation of vulnerable adults.	Measure improvement in quality and consistency of APS services through quality assurance tools. Tally the number of hits on our public website to determine if requests for information from the public are increasing. Improvement in the access to healthcare by senior citizens may be measured by decreases in the number of persons needing health-related services. Conduct ad hoc surveys of community agencies to obtain feedback on interactions with APS.

**TABLE 1: DIRECT SERVICE ISSUES (CONTINUED)**

<b>PUBLIC SAFETY, DEPARTMENT OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
<p>Texas does not mandatorily test or retest drivers who reach a certain age. Every driver, regardless of age, is tested for vision each time the license is renewed in person at a DPS driver license office.</p>	<p>DPS will examine or evaluate drivers of any age if concerns are raised about their ability to safely operate a motor vehicle. Anyone who has a concern about a driver including a friend or relative can write the DPS about those concerns. If the letter raises medically related concerns, the driver is contacted or sent a letter with questions they need to answer about their driving. If there is a medical problem that could interfere with good driving, the case is referred to the Texas Department of Health's Medical Advisory Board for review. If the Medical Advisory Board agrees that the license should be revoked, then DPS revokes the license. If the letter indicates that a driving examination is warranted, the driver is contacted or sent a letter asking them to report to a DPS Driver License office for a driving examination. If the driver fails the test, there is an administrative hearing process to revoke the driver license.</p>	<p>In addition DPS is committed to the public safety of all citizens and will work with any agency or private sector when necessary.</p>	<p>In fiscal year 2000, the Medical Advisory Board acted on 6,690 cases that had been referred by the Department. Of that number, 2,435 licenses were revoked and 442 people were required to submit to a driving test.</p>

<b>REHABILITATION COMMISSION</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
<p>The Commission recognizes that the number of older workers with disabilities will increase as aging population grows.</p>	<p>We provide vocational rehabilitation services to individuals to prepare for, get, and keep a job.</p>	<p>We will need to focus on retraining or upgrading of older workers skills so they can compete in a high-tech market. TRC counselors will need to identify and use older worker programs such as the one implemented by Goodwill Industries.</p>	<p>Monitor number of individuals served as well as type of services provided.</p>



**TABLE 1: DIRECT SERVICE ISSUES (CONTINUED)**

<b>RIO GRANDE STATE CENTER FOR MENTAL HEALTH AND MENTAL RETARDATION</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Accessibility issues—non-accessible buildings; Transportation issues – too few handicapped vehicles; Programming issues – need for an enhanced; retirement program; Health care needs – as population ages, primary dementia and loss of ambulation skills become a concern.	Making handicapped modifications; Requested monies for lift van; Some modified programming provided by vocational services; A few hours of contract OT services.	Looking at creating a retirement unit; Work to access community based transportation; Integration into community based services retirement programs; Permanent full-time OT on staff.	Number of environmental modifications made; Accessible transportation available at all times to meet individual needs; Number of individuals in enhanced retirement programs; Availability of OT services to enhance programs for older adults.

<b>SAN ANTONIO STATE SCHOOL</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Our agency serves people with mental retardation only. The average age of our residents is about 40 years old. In the next 10 years, we will be faced with the increasing challenge of serving people with mental retardation as they age. Primarily dementia issues and loss of ambulation skills.	Attempting to get more funding.	People who have mental retardation and dementia or ambulation problems require a more intensive client to staff ratio to ensure safety. This increased staffing level will need additional funding.	1) Frequency of serious injuries (partially due to falls) 2) Frequency of decubitus (breakdown of skin).

<b>SECURITIES BOARD</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Retired persons are frequently the target of securities fraud schemes.	We investigate all reports of securities fraud and initiate disciplinary or legal proceedings where appropriate. We also conduct investor education efforts specifically designed for retired persons.	Expansion of our current educational and consumer information oriented outreach programs.	Decrease in number of reported incidents of securities fraud involving retired persons.

**TABLE 1: DIRECT SERVICE ISSUES (CONTINUED)**

<b><i>SOUTH TEXAS HOSPITAL</i></b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Access to medical services--the fact that prescriptions are costly for older persons with limited income.	The state facility provides care on a sliding scale to elderly. Enrolling patients on medication programs that allow a 30 supply of medication free of charge.	To expand this medication program model throughout the state	Reduce the number of patients age 55-65 that require hospitalization. To increase knowledge of the elderly to seek medical attention early to prevent more serious conditions that require hospitalization.

<b><i>TEACHER RETIREMENT SYSTEM</i></b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
As the Texas population continues to age, it becomes increasingly important to collect data on member demographics to adjust our service delivery and benefit communications to meet needs of seniors. TRS offers retirement and health care benefits for retirees and dependents, optional long term care insurance, and other. It is important that members understand benefit options to make wise decisions. As people live longer, member retirement, employment after retirement, health and long-term care decisions will take on added significance.	Several TRS print publications have addressed financial and retirement planning issues, employment after retirement options, and the full range active member and retiree benefits, including recently approved benefits. TRS has addressed these and other related issues through print publications, one-on-one counseling, and toll-free information line, regional presentations, video-conference meetings, benefits video and information posted on TRS website.	Better understanding of retirement benefits (health care benefits and Medicare) is needed. Information needs to be accessible to seniors and disabled (large print for visually impaired, audio recording for website). TRS will explore opportunities for collaborations with TDoA, TDH, TDI that serve seniors and those responsible for health care. Increasing costs require TRS to educate members on health care options and proactive steps to promote good health. Similar education outreach will be needed for long-term care coverage options.	TRS will gauge both active member and retiree satisfaction with TRS services through periodic surveys.

**TABLE 1: DIRECT SERVICE ISSUES (CONTINUED)**

<b>TRANSPORTATION, DEPARTMENT OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
We recognize the increasing number of older drivers on our highways. The safety of older drivers is an urgent issue for our Department.	TRF-TS assists in fund development for safety programs targeting elderly. Provide funding to transit providers who serve elderly. Cooperation with TDH who maintains Traffic Safety Program for Older Adults. We are 1) Implementing a sign upgrade program to ensure reflectivity on all signs; 2) Developing a pavement-marking program to improve guidance for motorists; 3) Considering a higher intensity sheeting on the black/ white regulatory signs and overhead guide signs; 4) Considering fluorescent orange signs for work zones.	The Department believes that more education programs should be implemented. A partnership with AARP should be developed to conduct safety programs for older persons. The Department should also focus on building consensus among service providers.	<i>None reported.</i>

<b>VETERANS COMMISSION</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Health care and nursing care for the aging veterans population. Obtaining federal disability benefits for veterans.	TVC is working with the Department of Veterans Affairs to assist veterans receive health care and veterans disability benefits through agency veterans counseling program. Working with the Veterans Land Board to assist veterans obtain placement in Texas State Veterans Homes.	Continue efforts to reach the aging veterans population and work with other agencies to get available services to veterans.	Progress would be measured by the number of veterans disability claims filed to determine if the agency is reaching the veterans who need assistance?

**TABLE 1: DIRECT SERVICE ISSUES (CONTINUED)**

<b>WORKERS COMPENSATION COMMISSION</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Not a primary issue-but we do notice that as the workforce ages, one issue will be studies show that older workers have injuries. As they re-enter the workforce, will they have more injuries?	We have not seen more injuries, and we are not addressing any training toward aging issues. The workers health and safety division may look at these issues. There is a Bureau of Labor Statistics survey every year tracking where injuries occur and we look at % distribution by age and how long they are out of work. We don't yet see age as a factor.	If, as a result of the Bureau of Labor Statistics Survey on an annual basis, if we see age as an emerging factor, we would direct/design our training to address that issue across the state.	Bureau of Labor Statistics annual survey of occupation, injuries and illnesses, all states, identify and measure issues.

<b>WORKFORCE COMMISSION</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
1) In partnership with TWC, 28 local workforce development boards deliver employment services throughout Texas. Together, we help older workers find jobs. Current issues facing the Boards and TWC are 1) the re-training of laid-off manufacturing workers in areas along the TX-MX border. Although these older workers have excellent work histories, their inability to speak and read English hampers their ability to find new economy jobs. 2) Occupations that were not common 20 years ago (computer and data processing services, computer analysts, etc) have become increasingly important in this information technology era. Many older workers have not had the opportunity to receive training to prepare them to close the widening occupational gap.	1) TWC is conducting research to find models that have been successfully used to place limited English speaking workers into jobs. We are hopeful that this research will lead to models that we can adapt to place a large population of displaced Texas Workers into jobs. 2) TWC and LWDB support training in demand occupations for workers who come to workforce centers for assistance with job searches and are eligible to receive training vouchers from the TWC. We also make information available to job seekers about regional demand occupations.	1) Find ways to return older workers along TX -MX border who have limited English to jobs. 2) Promote training of older workers by local workforce development boards and companies seeking skilled (computer, technology) employees. 3) TWC has entered into MOU to accept referrals that include older workers. In the future, TWC should stress that older workers become full partners in the information technology age by supporting training that will lead to skills necessary to hold "new skill jobs". TWC should also aggressively seek employers who are willing to retrain and hire older workers. We could encourage skill development projects aimed at this population of workers.	TWC will continue to measure progress on the aging issues listed above by recording the number of persons over age 55 years of age who seek assistance from older worker program and the number who were placed in jobs or in a job training program.

## CHAPTER III

### LICENSING, REGULATORY, RESOURCE AND PLANNING ISSUES

Many agencies indirectly serve the general population through functions such as licensing and regulation of service providers, disseminating resource information, and strategic planning and policy development. Of the 78 agencies that reported aging issues, 27 discussed roles such as advising state leaders and setting guidelines.

#### CURRENT AND EMERGING AGING ISSUES

Texas' changing demographics, particularly its growing older **population**, are again cited as primary aging issues. Agencies charged with long-range planning are aware that the growth in the absolute size of this population will likely translate into increased service demand. They also recognize the **need to consider the older population's growing diversity** in order to modify existing services as needed and to develop appropriate options for the future. Many see a **need to continue research on the changing needs of the older population** and to continually evaluate whether future changes will affect expenditure and service patterns in Texas. Agencies that compile and manage state databases already report an increase in the number of requests for age-specific data.

A primary function of agencies in this category is to ensure that the appropriate resources are available to consumers and their families, and to other state and local entities. **Resource agencies must provide basic information on age-related topics** and be responsive to relevant research in the field of aging. For example, state libraries have expressed a need to purchase and maintain more age-related reference material for professionals and consumers. Similarly, banking institutions have cited a need to educate employees who may have direct contact with older adults-- a group often victimized by deceptive marketing and financial fraud.

Agencies that provide resources to consumers and their families must address issues associated with accessing available information and services. **Technology is an issue for these agencies who must develop accessible information and assistance systems.** Government entities tend to rely heavily on computer programs and Internet resources to disseminate information to consumers. Yet, many state agencies report not knowing if the older adult population will benefit

from any technological updates to the service delivery system or be hampered by the skills gap in utilizing such technology (often referred to as the “digital divide”). Previous research indicates that older adults are less likely to use computers due to socioeconomic and educational barriers. Therefore, when programs such as the e-government initiative are implemented, agencies must contemplate the extent to which aging issues affect customers’ ability to access state resources.

Education is often regarded as an integral part of personal enrichment. While each education institution has the autonomy to develop lifelong learning opportunities, **state regulatory agencies have an important role in directing state policies that promote lifelong learning** for older adults. People maintain their interest and ability to learn throughout life, and training with computers or other skills can help them satisfy this desire. Respondents were aware of increasing evidence that education and lifelong learning promotes health, encourages self-reliance and independence, and strengthens a person’s contribution and ties to society, and they recognized their role in setting policies that support educational opportunities.

Some licensing and certification boards reported the need to ensure the **sensitivity of licensed practitioners through rules and policies** regarding older adults. Licensing boards cited issues related to continuing education and maintaining certification in their respective fields. For example, some boards support policies requiring professional training in geriatrics and gerontology.

## **CURRENT INITIATIVES AND FUTURE ACTIONS TO ADDRESS AGING ISSUES**

Maintaining sensitivity to demographic shifts is a common initiative across agencies. Many cite activities that support continued research on the issues and trends of the older adult population. Existing agency research programs include a **routine review of practices, and/or intensive studies of potential or existing problems** that could threaten the equitable distribution of services. Agencies may expand future research to better understand how older consumers and their families process information and access services.

As with agencies providing direct services, partnerships are a common theme across licensing, regulatory, resource, and planning agencies. Many respondents expressed their desire to **continue the development of working relationships with relevant local and state entities** to prepare for the aging of the population.

Task forces and other formal collaborations have been developed by many to address shared aging issues. For example, agencies that are developing web-based access to services request input from other agencies to ensure that special needs of older adults (e.g, visual disabilities, technology barriers) are met with the appropriate accommodations. Agencies reported partnership initiatives not only for input in addressing issues, but also for dissemination of agency specific information. For example, due to resource constraints, agencies that focus on collecting and compiling databases often rely on other agencies to distribute information to the public. Partnership initiatives were also cited by research and planning oriented agencies, which must rely on other entities to advocate for policy reform. Thus, state agencies work together to address aging issues.

## **MEASURES TOWARD PROGRESS**

Measurable indicators for agencies responsible for regulation and planning are less quantifiable than those providing direct service. Rather than measuring the number of individuals receiving a service, these agencies tend to rely on measures such as the **level of communication between agencies, or whether a particular aging issue received appropriate attention from state leaders**. Some agencies cite a decrease in oversight complaints received as a measurable indicator of progress in increasing sensitivity of its licensed practitioners or in disseminating the appropriate resource information to consumers.

Table 2 provides the verbatim responses from state agencies as they pertain to licensing, regulatory, resource and planning functions of state government. Responses are grouped in alphabetical lists of responding state agencies. **Appendix A** lists all state agencies surveyed and the corresponding location of their responses.

**TABLE 2: LICENSING, REGULATORY, RESEARCH, AND PLANNING ISSUES**

<b>ADMINISTRATIVE HEARINGS, STATE OFFICE OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
As the aging population grows, it is likely that SOAHs workload will increase proportionately as agencies that directly serve the elderly, or that regulate services provided to them, will begin referring more licensing and regulatory cases to SOAH for hearing. We are also concerned about public access to our services. The ability of the older population to attend hearings or access SOAH services through alternative or conventional means will become a growing concern. SOAH adapts its facilities and remote sites to accommodate the needs of the public and to use technology in response to this challenge.	Regarding public access, SOAH conducts certain hearings by telephone and also offers a variety of information to the public through the agency website. Currently the field office location selection criteria is based on factors including population needs. This provides SOAH to analyze current population trends at the time and identify any new considerations for accommodations and services	SOAH should continue the practice of being sensitive to demographic shifts and changes in population for accommodation purposes and utilizing technology to facilitate public accessibility.	Include specific qualities as a standard in SOAH leased facilities that are favorable to the needs of an aging population such as large print building directories, comfortable seating and enhancements for the hearing and sight impaired.

<b>ARTS, COMMISSION FOR THE</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURE PROGRESS</b>
The projected increase in older Texans. By 2030, 17% of Texas Population will be 65 or older.	Enforcing and encouraging physical and programmatic access so that older Texans can enjoy the arts and cultural offerings in Texas.	Encourage expanded marketing and outreach to this service population	1) Track outreach to seniors through grants (physical and programmatic aspects of events). 2) Track overall numbers of applications received in the TCA Accessibility Initiative- a mini-grant program to enhance outreach to elderly and audiences with disabilities as specified in the Americans with Disabilities Act (ADA).



**TABLE 2: LICENSING, REGULATORY, RESEARCH, AND PLANNING ISSUES (CONTINUED)**

<b>BRAZOS RIVER AUTHORITY</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
We are in the water supply business. There are no issues specifically pertaining to aged, however peripheral issues are that as the population changes, people move here (retirees/snowbirds). The growth in the area population may translate into increased demand for water.	We comply with state laws regarding accessibility by disabled, of which the elderly may be a part. However, elderly are not a priority group for river authority.	We must identify how to meet water needs. Aging is taken into account as a factor, but plays a small role. There is the issue of user friendliness. Accessibility for disabled and maybe aging issues in the future.	It is difficult to even put aging into the mix. The access issues and approved accessibility for disabled may serve elderly.

<b>CANCER COUNCIL</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Cancer incidence rises with age. Adults in mid-life and older are most affected. In Texas as in the nation, the growing number of older adults will increase the number of people affected by cancer.	The Texas Cancer Council currently funds education programs that increase awareness of cancer issues, risk factors, early warning signs, and early detection and treatment. All of the Council's efforts are tied to the Texas Cancer Plan, the state's strategic plan for addressing cancer in Texas.	The Council is an agency that has fostered collaboration at every level since its inception. We will continue to develop partnerships with public and private agencies at the local, regional, state, and national level as it works to stimulate critically needed services in Texas. State funds invested in the Council have a synergistic effect when leveraged with other public and private cancer control efforts, resulting in tremendous volunteer support and professional involvement.	Resource sharing and collaboration are key tangible results of the Council's efforts.

**TABLE 2: LICENSING, REGULATORY, RESEARCH, AND PLANNING ISSUES (CONTINUED)**

<b>CHIROPRACTIC EXAMINERS, BOARD OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
<p>There are a limited number of people over the age of 65 who visit chiropractors. Most older adults that visit chiropractors are because of car accidents or work injuries, but, due to the nature of chiropractic techniques (pushing on body to re-align), may not be best for frail elders. However, there are other techniques used such as sound/electrical stimulation that may be used with older adults. It may be easier to go to medical doctor and get prescription for pain than going to chiropractor who may do a lot more for patient in terms of helping with pain rather than just covering it up with medications. Geriatric training is a requirement for chiropractors.</p>	<p>We are a regulatory agency and are not really doing much to promote the effectiveness of chiropractic services versus other medical care.</p>	<p>As science research improves, the equipment gets better, and there are more advances in the field, seniors may be more receptive to chiropractic treatment. It is a matter of trust, and many do not trust the field. More education about the field is needed, and once older adults know chiropractors can help, they may be more receptive to treatment. Can partner with associations and other professionals to disseminate information (e.g., Texas Chiropractor Association(TCA) [2500 members] and the Society of Texas Chiropractors [&lt;100 members]). TCA is very active with legislative process and pushing for legislation. Other collaborative approaches include working with other health care professions.</p>	<p>There is no easy way to measure, but education is needed.</p>

<b>COMPTROLLER OF PUBLIC ACCOUNTS</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
<p>Texas State Comptroller Carole Keeton Rylander's e-Texas is charged with developing recommendations to achieve change in Texas government, looking for ways to create efficiency and effectiveness in government.</p>	<p>The e-Texas Health and Human Services Team will examine government's role within the changing health care industry and its impact on health care delivery, improving the quality and accountability of health programs, and ensuring appropriate access to affordable health care.</p>	<p>The e-Texas Health and Human Services Team will identify critical issues to be included in the e-Texas report, which will be presented to the legislature prior to the 78<sup>th</sup> Legislative Session.</p>	<p><i>None reported.</i></p>

**TABLE 2: LICENSING, REGULATORY, RESEARCH, AND PLANNING ISSUES (CONTINUED)**

<b>ECONOMIC DEVELOPMENT, DEPARTMENT OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
We recognize the economic impact overall of an aging population.	The Department has created the Business & Independent Data Center program, as well as searchable on-line database. The Department also issues Smart-Job grants.	We must raise awareness about the importance of economic development. We must increase communication with local leaders.	Number of user sessions on web site. Number of mailings to community leaders.

<b>FUNERAL SERVICE COMMISSION</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Funeral costs and final disposition choices, and pre-paid burial plans are two key issues related to aging, however every resident in Texas is affected and certainly older persons.	The Commission conducts periodic meetings with consumer groups such as AARP and other professional groups.	The Commission should be included in any coordinating meetings that TDoA believes would benefit the consumer and address consumer issues.	<i>None reported.</i>

<b>GOVERNOR, OFFICE OF THE – COMMITTEE OF PEOPLE WITH DISABILITIES</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Look at 8 issues: education, environment, employment, community access to media, housing, healthcare, transportation, and parking.	Make recommendations to governor on these issues; reports printed on website.	Working with local non-profits, etc to look at issues affecting disability community.	Evaluate issues every 2 years to get input on issues affecting disability community.

**TABLE 2: LICENSING, REGULATORY, RESEARCH, AND PLANNING ISSUES (CONTINUED)**

<b>HEALTH CARE INFORMATION COUNCIL</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Our business consists of collecting data from HMOs and hospitals and converting it into usable information for consumers to use when selecting a provider. Due to resource constraints, we must rely on other entities to leverage the distribution of information to older Texans.	There is no specific consumer education effort aimed at distributing information to older Texans, however diagnosis and procedures within hospitals associated with older patients is a topical area that will be studied in the future.	The agency will continue in its efforts to establish relationships with organizations such as Consumers Union, AARP, AAAs, and other relevant organizations.	The agency lacks resources to print materials for distribution. However, one measure of progress would be for interested organizations to share information about the Council in their publications.

<b>HIGHER EDUCATION COORDINATING BOARD</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
In 1998, the Board requested a needs analysis from the Texas Institute for Research and Education on Aging. Three major issues were identified: 1) Lifelong learning-- it appears that many more adults have an interest in learning than those who actually pursue formal education. 2) Workforce -- marketing and communication efforts are not effective between higher education and industry, 3) Health Care and Social Services-- there is a need for a greater understanding of lifespan issues among people of all ages and increased enrollment in geriatric/gerontology education.	The Board hopes to continue the dialogue with TDoA on the issues identified in the report.	Call for the implementation of the various strategies and recommendations offered through the needs analysis such as 1) developing or expanding education offerings for life-long learning that will help people of all ages prepare for their later years and benefit society 2) promoting to major employers the programs and services offered by higher education institutions that can assist them with workforce retraining efforts aimed at curtailing worker obsolescence, and 3) developing and expanding gerontology instruction in Texas colleges and universities by implementing new programs in institutions not currently integrating gerontology curricula into existing courses across disciplines.	<i>None reported.</i>

**TABLE 2: LICENSING, REGULATORY, RESEARCH, AND PLANNING ISSUES (CONTINUED)**

<b>HUMAN RIGHTS, COMMISSION ON</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
<p>Texas Fair Housing Act does not have age as a protective class. Although the Act does have two exemptions-- one is a 55 and older Senior Citizen Property, and age 62 property exemption. If in either case, the property qualifies for the exemption, the property can prohibit children 18 and under from residing on property. The problem for the Rio Grande Valley occurs when retirees move to the area for winter months. Over 515 mobile home RV properties are now claiming this exemption, yet only 12% reside there throughout the year. The average age in these communities is 68 years old. The average age of the citizens in the lower Rio Grande Valley is 28 years old and 68% of the population are Hispanic. The exemption should not be so broad in this are because it has an adverse effect on removing affordable housing from Hispanics and families with children.</p>	<p>We are approaching the issue in two ways. First, if a complaint of either familial status or national origin discrimination is received, we investigate the property to make sure they qualify for the exemption. Secondly, we have partnered in a federal grant with the Greater San Antonio Fair Housing Council to test these properties under a HUD grant. If property is in violation, we enforce Fair Housing Act.</p>	<p>The partnership between the Fair Housing Initiative Agency (The Greater San Antonio Fair Housing Council) and the Texas Commission on Human Rights are examples of non-profit and state agencies working together to insure that the property qualifies or does not qualify for the exemption. We have such partnerships with other non-profit as well as other government agencies.</p>	<p>First, we would investigate the alleged complaints of housing discrimination based on familial status as well as other protected classes. On those we find in violation, we would enter into conciliation agreement, have an administrative hearing, or litigate against the violators.</p>

**TABLE 2: LICENSING, REGULATORY, RESEARCH, AND PLANNING ISSUES (CONTINUED)**

<b>INFORMATION RESOURCES, DEPARTMENT OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
<p>Generally, the older population in Texas does not utilize computers or have access to internet as much as younger population. Socioeconomics play a major role in Internet use. As more services are delivered on-line, how can the state provide access for this population? Will the older population be assisted by online access (prevent travel and time spent in office) or be hampered by Digital Divide? As e-government services are rolled out, how long will traditional channels for service delivery (face to face, paper, mail, office, etc.) be maintained? Will there be a decline in the use of traditional channels as the rate of online transactions increases? Are there aging issues that need to be included on government web sites to ensure accessibility (ADA compliance) for the older generation?</p>	<p>We work with an interagency task force to implement a central portal for e-government activities. A statewide survey was conducted to assess needs of state citizens. Higher percentages of older age groups did not use computers or the internet (50% used neither; 26% were computer/ internet users). People under age 55, were more likely to use internet than older adults. 18% of non-users were older, poorer, and minority. Through the e-government services, there is a customer feedback system for customers to provide input and shortcomings, and special consideration for different citizen groups. One question is whether a website devoted to elder population issues should be created?</p>	<p>If funds are available, the Department plans outreach efforts to understand the issues of providing online services to the populace. Information provided from the website (customer responses/ comments) will be used to review the site. The agency previously worked with PUC and UT Office of Survey Research to complete the state survey. Input from other agencies (Office of Aging, others) could help address accessibility issues in the state or in the design of surveys, websites. Other agencies could assist the e-government Task Force in developing a website on information for elderly population and issues related to online access. This information can be disseminated for use by all agencies.</p>	<p>State web sites should have customer forms that include demographic information to help address customer issues/questions regarding online service. These forms would be used to measure customer satisfaction by demographic groups, including elderly, and in penetration of online services to the general public. In addition, agencies could be surveyed or rules published requiring them to adopt state guidelines in implementation of online services. This measure would reflect compliance by the agencies.</p>

<b>LAW LIBRARY</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
<p>Providing information on Elder Law</p>	<p>We have purchased some information on Elder Law</p>	<p>To ensure that we have basic information resources available on the topic of elder law (will depend on overall materials budget</p>	<p>1) Number of items purchased that cover this topic 2) do we have at least 80% of what we see as important information and resources on elder law.</p>

**TABLE 2: LICENSING, REGULATORY, RESEARCH, AND PLANNING ISSUES (CONTINUED)**

<b>PENSION REVIEW BOARD</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
<p>PRB does not have a specific program for the elderly, but they function as the state agency to oversee and review state/local government retirement systems in Texas. PRB conducts a review and compares information on benefits, creditable service, financing and administration of service; conducts intensive studies of potential or existing problems that threaten the actuarial soundness of or inhibit an equitable distribution of benefits in one or more public retirement systems; provides information and technical assistance on pension planning to public retirement systems upon request; recommends policies, practices and legislation to public retirement systems and appropriate governmental entities.</p>	<p><i>None reported.</i></p>	<p><i>None reported.</i></p>	<p><i>None reported.</i></p>

**TABLE 2: LICENSING, REGULATORY, RESEARCH, AND PLANNING ISSUES (CONTINUED)**

<b><i>PODIATRIC MEDICAL EXAMINERS, BOARD OF</i></b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
In general, our practice is growing due to the increased life span of TX citizens, which means that medical issues emerge such as diabetes and other foot problems.	We can ensure the sensitivity of our licensed practitioners through rules and policies regarding geriatrics. Member of the TX Health Professions Council formed by Texas Ledge 5 sessions ago. All 12 state licensing agencies are members of this council.	Continue membership in TX Health Professionals Council made up of all state licensing agencies. This Council looks for better methodology to identify issues to plan and address them.	Measured by lack of complaints from aging patients about their podiatrist; Lack of complaints from podiatrists about aging patients. However, no funds for formal evaluation.

<b><i>POLYGRAPH EXAMINERS, BOARD OF</i></b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Older examiners are still practicing. Health issues may affect renewal of their licenses. Mandatory continuing education can cause a burden on elder examiners and computerized polygraph may become an issue in grading and charting. Note: age is not and never will be held against the individual.	Trying to increase licensing numbers; licensed examiners are older because of level of experience	Currently allow federal people to be licensed in the state of Texas	Market takes care of this

<b><i>RURAL COMMUNITY AFFAIRS, OFFICE OF</i></b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
We recognize that health care and economic impact of an aging population.	Recruitment is done to facilitate healthcare professionals to rural areas, and access to healthcare is interdependent upon a thriving economy. Housing funds such as the rehabilitation fund and the housing infrastructure fund are available to assist the elderly and disabled population.	We must raise awareness about the importance of health care and economic development. More communication is needed between local officials and citizens in those communities. Rural Health Summits and Rural Economic Summits are being held to address issues such as the elderly, healthcare, etc.	Community Development is the key in addressing both of these issues. Community involvement will help foster both health care and economic development.



**TABLE 2: LICENSING, REGULATORY, RESEARCH, AND PLANNING ISSUES (CONTINUED)**

<b>SAVINGS AND LOAN DEPARTMENT</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
<p>Our department regulates state savings banks and savings and loan associations. The Department also licenses and regulates first lien residential mortgage brokers and loan officers doing business in Texas. Two significant aging issues related to these industries are: 1) With financial institution modernization, increased type and complexities of products (e.g., annuities, securities, insurance, etc), the distinction between low risk products insured by the Federal Deposit Insurance Corporation (FDIC) and uninsured products that have higher risk can become difficult for consumers. 2) Home equity products, (reverse mortgages), may expose aging citizens to greater risk than they recognize. The greatest risk in each situation is aggressive marketing of these programs and/or failure to make adequate disclosures to customer.</p>	<p>In addition to comprehensive review of applicants for charter and licensing, including criminal history checks and regular examinations of state chartered savings institutions, the Department has active complaint resolution and investigation program to assist and protect citizens of the state. In response to hotline calls, our staff also provides confirmation of licensing status and responses to questions relating to the mortgage process.</p>	<p>Department collaborates with appropriate federal regulatory agencies as well as the State Office of the Attorney General and Office of Consumer Credit Commissioner to resolve issues of non-compliance with state and federal laws by any members of the industries under its jurisdiction. Continued aggressive enforcement of all applicable statutes and regulations, along with responsive complaint resolution will continue to be Department objectives.</p>	<p>Percent state savings institutions receiving examination required by priority schedule. Percent of licenses in regulatory compliance. Percent of complaints and inquiries answered within 10 days of receiving all information required to evaluate a complaint.</p>

<b>SOCIAL WORKER EXAMINERS, BOARD OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
<p>Retired social workers returning to work</p>	<p>Re-activating licensing status without penalty</p>	<p>Promote awareness of "emeritus" status license to retirees and lack of penalty for re-activating license from "inactive" to "emeritus" status</p>	<p>Increase number of licenses utilizing "emeritus" status for license when retiring</p>

**TABLE 2: LICENSING, REGULATORY, RESEARCH, AND PLANNING ISSUES (CONTINUED)**

<b>SPEECH-LANGUAGE PATHOLOGY AND AUDIOLOGY, BOARD OF EXAMINERS FOR</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
As individuals age, a decrease in their hearing ability occurs. Also, speech communication may be hindered by strokes, etc. The number of audiologists and speech-language pathologists is increasing in the State of Texas.	Our role is to license audiologists and speech-language pathologists who could assist the elderly.	Our agency does not have any funds or legislative mandates to address these issues.	We have no measurable indicators.

<b>STATE DATA CENTER</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Deal with demographic data and people frequently request age specific data pertaining to health care information, and nursing home data.	Currently dealing with new census data which covers ages 18 and higher. Expect to receive updated data this summer.	Over the next year as we receive data, we will publish several reports. We will begin estimates and projections on individual age groups.	Age is just one of the demographic categories we include in our reports.

**TABLE 2: LICENSING, REGULATORY, RESEARCH, AND PLANNING ISSUES (CONTINUED)**

<b>STRUCTURAL PEST CONTROL BOARD</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
1) Delusory Parasitosis 2) Inability to understand contracts and possible targeting by con artists, 3) greater sensitivity of children and older person to pesticides	1) assist in having samples of alleged parasites identified, consult with pest control operator if appropriate, refer to Extension Service Entomologist and/or suggest person contact a dermatologist. 2) assist in explaining pest control practices, require Board's name, number, and jurisdiction statement on all contracts and bids, require licensing of all structural pest control businesses, recognize fraud and false and misleading statements as violations, and investigate all complaints 3) require training, competency, testing and continuing education of pesticide applicators, promote proper pest control in nursing homes and hospitals 4) regulations contain hardship clause with provisions for replacement of certified applicators, extensions by be granted to obtain continuing education credits	For items 1-4, we are unaware of any specific additional actions that are needed at this time. the Structural Pest Control Board maintains strong working relationship with various trade associations, industry suppliers, and educational institutions in regard to pesticide applicator training. If violation identified, we will increase compliance assistance and enforcement efforts in that area	For items 1, 2, and 4, we have not kept any statistics on the age of the persons contacting the Structural Pest Control Board. We respond to all complaints and requests regardless of the age of the person contacting the agency. For item 3, Total number of exposure complaints involving licensed pest control applicators have decreased in recent years even though the number of applicators and the state's population have increased.

<b>TRANSPORTATION INSTITUTE</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
We are a research agency, and we do have some issues that are safety related. We have conducted some research related to aging drivers in the area of signals, signs, and other safety aspects related to accidents	Continue to conduct periodic research to provide information to TxDOT, DPS and others interested in the safety of older drivers	To continue to provide research findings to agencies who are in a position to make changes. We are an advisory agency only.	Reduction in accident rates among older drivers

**TABLE 2: LICENSING, REGULATORY, RESEARCH, AND PLANNING ISSUES (CONTINUED)**

<b>VOCATIONAL NURSE EXAMINERS, BOARD OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
<p>LVN population that is actively employed is aging. LVN educators are aging as well. As these individuals retire in the next 10-15 years, and because their numbers are not being filled by younger individuals entering LVN practice, a shortage of LVNs near crisis proportions could occur.</p>	<p>Discussing the issues on a state and national level. Participating in studies to collect data and propose and implement strategies to recruit and educate LVNs for the workplace.</p>	<p>Partnerships with the Board of Nurse Examiners (RN Board) RN and LVN professional organizations, for the studies mentioned in 3B above</p>	<p>Data collected would demonstrate sufficient numbers of LVNs working and average age would either decline or remain the same</p>

<b>WORKFORCE AND ECONOMIC COMPETITIVENESS, TEXAS COUNCIL ON (NOW IN OFFICE OF GOVERNOR)</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
<p>Are responsible for strategic planning and are aware of aging workforce and the significant impact it will have on skilled workers. We need to be sensitive to this and recognize that we need options to keep expertise of these persons retiring in the workforce.</p>	<p>When pool of job positions, making sure it is posted in as many places as possible. Using the skills of retired workers by re-hiring after retirement thereby keeping the knowledge (have already done this in their agency).</p>	<p>Look to Office of the Governor for guidance. Working with other state agencies to address the value of retired workers and articulate a need for a skilled workforce is key</p>	<p>Most measurable evidence would be to be reflected in the strategic planning.</p>

**TABLE 2: LICENSING, REGULATORY, RESEARCH, AND PLANNING ISSUES (CONTINUED)**

<b>WORKER'S COMPENSATION, RESEARCH AND OVERSIGHT COMMISSION ON</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
As aging issues impact the worker's compensation system, the ROC may need to research the topic of age which would become an issue indirectly	<i>None reported.</i>	The ROC will continue to examine age along with other demographic characteristics when analyzing data	The House Committee on Business and Industry (B&I) has an interim charge to identify barriers and study methods for returning injured workers to productive employment. The aging of the workforce has not been statistically correlated with increased frequency of injury because younger workers tend to be used for heavy labor. The interim study may identify opportunities to focus attention on two challenges 1) longer periods of recovery and increased co-morbidity factors, and 2) adequacy of vocational retraining and workplace re-integration resources. HB 2600 (77 <sup>th</sup> Session), added provisions to the Texas Labor Code and challenged the Commission to focus more attention on the challenges of getting injured workers back to work. This effort would re-examine the coordination of programs offered by TRC and workers' compensation insurance carriers to promote return to work for all ages.



## **CHAPTER IV**

### **INTERNAL AGENCY FUNCTIONS & STAFF**

Of the 78 state agencies reporting aging issues, 24 described issues related to internal agency functions and staff.

#### **CURRENT AND EMERGING AGING ISSUES**

State agencies are primarily concerned with **large proportions of employees collectively approaching eligibility for retirement**. In one case, as many as one-third of the total agency staff were within five years of retirement. Some employees are required to leave the agency prior to their retirement eligibility date to care for family members. **This surge in staff retirement is expected to be a drain on overall agency expertise**. Moreover, as employees age and retire, quality replacements become harder to find. Training costs are high for new personnel, and some responding agencies expressed a desire to use the skill and wisdom of people who have been with the agency for an extended period of time. While organizations recognize the benefit of experienced personnel, **policies are not yet in place to support the transfer of knowledge from older, experienced employees**. Agencies are concerned not only with retaining quality staff, but also recruiting new employees. Many agencies find that fewer young people are choosing careers in fields related to their mission. Based on research findings that younger employees in the job market stay in a job an average of only two years, agencies also are increasingly concerned that maintenance of a qualified agency staff will affect their ability to serve clients.

#### **CURRENT INITIATIVES AND FUTURE ACTIONS TO ADDRESS AGING ISSUES**

Individual retirement is often a personal choice beyond the control of the agency. Most responding agencies give **support to employees who are preparing for retirement** through referral to the Employee Retirement Services (ERS) to obtain information regarding benefits.

Some employees face the challenge of maintaining employment while caring for a loved one with a chronic disability. Since over half of all caregivers are between the ages of 35 and 64, many are forced to give up jobs in order to provide care. Some

Texas agencies recognize the burden employees face while managing employment and caregiving responsibilities. Therefore, some agencies **allow employees to utilize flextime and administrative leave to care for family members.**

**In-house professional development** is an ongoing initiative to help maintain qualified staff. Intergenerational cross-training programs are developed by some agencies to transfer knowledge and skill from older, experienced workers to new staff members. However, some agencies feel that additional policies are needed to support these practices.

## **MEASURES TOWARD PROGRESS**

With respect to recruitment and retention, responding agencies propose specific measures that may include, but are not limited to, calculating the **duration of time a staff member is employed** with an agency, the **annual staff attrition rate**, and the **number of qualified applicants who apply for positions of employment** as primary outcomes. With respect to educating employees, agencies mention tracking the **number of staff participating in cross-training leadership development programs** and.

Table 3 provides the verbatim responses from state agencies as they pertain to internal agency functions and staff. Responses in this category are grouped by responding state agency listed in alphabetical order. Appendix A lists all state agencies surveyed and the corresponding location of their responses.



**TABLE 3: INTERNAL AGENCY FUNCTIONS AND STAFF ISSUES**

<b>ADMINISTRATIVE HEARINGS, STATE OFFICE OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Many of our older employees will become eligible for retirement within the next 10-15 years. The anticipated impact of this is a drain on agency expertise, particularly among administrative law judges. Some employees may leave prior to normal retirement eligibility date to care for family members or because they become afflicted with an aging related illness or disability.	Currently, our administrative law judges are cross-trained through cross-assignment of cases. This effort initiated in 1999 to enhance all judges' expertise, broaden their breath of knowledge and to help absorb the impact should SOAH lose several veteran judges simultaneously or over short period of time. Also requested funding for more FTE positions which will also help SOAH cope with future turnover.	SOAH should maintain highly skilled workforce through cross training and by adequate staffing to accommodate existing and future workload.	Establish review staff to workload ratios then staff appropriately to maintain high quality of service.

<b>AGRICULTURAL EXPERIMENT STATION</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Employee populations are aging and retiring. Quality replacement employees are harder and harder to find.	Refocusing our mission	<i>None reported.</i>	<i>None reported.</i>

**TABLE 3: INTERNAL AGENCY FUNCTIONS AND STAFF ISSUES (CONTINUED)**

<b>ALCOHOLIC BEVERAGE COMMISSION</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURE PROGRESS</b>
The lack of familiarity with investigative techniques and knowledge of the Alcoholic Beverage Code will be lost as older workers begin to retire. Additionally, key positions in Information Technology management have not been targeted for succession planning although these employees have been identified as being eligible for retirement in the next five years.	Currently, the agency is considering rehiring critical employees after they retire. This will temporarily solve the problem of losing knowledgeable and skilled personnel that are needed to manage, make policy decisions, maintain information systems and effectively communicate with the public on matters dealing with the Alcoholic Beverage Code. The agency is in the process of developing additional strategies related to succession planning that address training, personal development and recruitment.	The TABC will have to identify critical positions held by personnel nearing retirement age and attempt to train and educate the staff that will likely move into these positions. Retention incentives and the re-engineering of workflow and processes will also need to be considered.	Conduct internal/external surveys related to efficiency and effectiveness. Use current performance measures to gauge success.

<b>ANIMAL HEALTH COMMISSION</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
When staff retire, agency must decide whether to keep or discard FTE.	<i>None reported.</i>	<i>None reported.</i>	<i>None reported.</i>

<b>BOND REVIEW BOARD</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
One third of our staff is within 5 years of retirement.	<i>None reported.</i>	Actions pertaining to hiring, training, and replacing existing staff, yet we see this as a hiring issue and not just an aging issue.	<i>None reported.</i>

**TABLE 3: INTERNAL AGENCY FUNCTIONS AND STAFF ISSUES (CONTINUED)**

<b>COMPTROLLER OF PUBLIC ACCOUNTS</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
In the next four years, 22% of the agency workforce will be eligible to retire.	In terms of workforce within the Comptroller's Office, the Human Resource Division will be working with agency directors to plan for and manage projected changes in the Comptroller's Workforce.	<i>None reported.</i>	<i>None reported.</i>

<b>COMPTROLLER OF PUBLIC ACCOUNTS – DISTRICT COURTS JUDICIARY SECTIONS</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Issues staff faces regarding aging and health insurance. However, staff operate on 4 year terms so little employment issues	<i>None reported.</i>	ERS is aware of the concerns judges have regarding insurance but there is no trained Human Resource staff member within this agency	<i>None reported.</i>

<b>CONSUMER CREDIT COMMISSIONER, OFFICE OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
The Commission has concerns relating to keeping trained, qualified staff within our own agency as current staff approaches retirement age and vacates positions.	<i>None reported.</i>	<i>None reported.</i>	<i>None reported.</i>

**TABLE 3: INTERNAL AGENCY FUNCTIONS AND STAFF ISSUES (CONTINUED)**

<b>COURT ADMINISTRATION, OFFICE OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Many employees at OCA have aging parents and/or family members that they must place in home care, nursing homes, etc.	OCA has a very flexible policy regarding use of comp/vacation time to be used to address family caregiving issues. OCA Administrative Director will also approve administrative leave if needed to address these issues.	Continue to follow the leave policy for employee caregiving.	<i>None reported.</i>

<b>CRIMINAL JUSTICE, DEPARTMENT OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Staff Training	<i>None reported.</i>	<i>None reported.</i>	<i>None reported.</i>

<b>DEAF, SCHOOL FOR THE</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
We have an aging workforce of teachers and administrators. Young people not choosing careers in education and we anticipate greater shortages in upcoming years.	We are working with national groups on re-establishing leadership training programs for training administrators and trying to do in-house professional development of staff.	We are working through Foundation on partnerships with private and university groups to address the issue of teacher shortages.	Number of qualified and certified applicants for available positions.

**TABLE 3: INTERNAL AGENCY FUNCTIONS AND STAFF ISSUES (CONTINUED)**

<b>EDUCATOR CERTIFICATION, STATE BOARD FOR</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
75% of staff over age 50	Cross training so loss of 1 person does not mean loss of knowledge in workforce.	Continue cross training as way to keep knowledge of older workers.	Performance measures that state agencies attain.

<b>EMPLOYEES RETIREMENT SYSTEM</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Accommodating changing needs of larger and older retiree population will require specialized knowledge by agency employees and contracted providers, including specialized customer service training in understanding of senior issues.	Agency conducts regular training for front line employees on senior issues and customer service and supports continuing education for trainers and educators who work with our senior members and provide training to fellow employees who also provide services to our senior members.	Continue to adapt Senior Fair and annual health program enrollment presentations to address the needs of seniors.	Feedback from Customer Service Direct and Customer Satisfaction Surveys.

<b>FOREST SERVICE</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
The most significant issue is the aging of our staff of firefighters and law enforcement officers. The Texas Forest Service is the primary wildland firefighting agency for Texas in addition to responding to other emergencies across the state. The work is physically demanding and extraordinarily stressful. Most of our personnel are enrolled in TRS by our affiliation with Texas A&M University System. TRS offers no incentives for early retirement of these emergency service personnel.	We drafted an early retirement incentives proposal, however it has not been presented to TRS. We expect them to reject it given their opposition to previous retirement incentive proposals.	One alternative is to enact a law to provide early retirement incentives to TFS firefighting personnel and law enforcement officers and require TRS to comply with it. Another alternative is to place TFS firefighting personnel under ERS and permit them to participate in early retirement programs already offered by DPS and other state agencies. The bottom line is that people in this line of work need to be taken out of harm's way after 20 years on the job or age 50.	A reduction in the average age of firefighter employees group. Higher percentage of passing scores for employees taking the annual firefighter physical fitness test.

**TABLE 3: INTERNAL AGENCY FUNCTIONS AND STAFF ISSUES (CONTINUED)**

<b>INSURANCE, DEPARTMENT OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
The lack of qualified advisors to assist consumers with insurance fraud problems.	<i>None reported.</i>	<i>None reported.</i>	<i>None reported.</i>

<b>JUVENILE PROBATION COMMISSION</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Employees are aging, practically all original staff to retire or move on to other venues. A policy issue is how to utilize the skill and wisdom of people who have been around for a while. We are spinning our wheels without utilizing those in state government who have been there. How can we mentor within agencies where there is no career ladder or upward mobility? Organizations and individuals can benefit from people who are experienced and seasoned, passing on knowledge. Training costs are high for new persons. We are not taking advantage of resource. Elderly are put out to pasture which is a loss on both accounts	No specific aging initiatives. Small, family atmosphere, not a state objective or policy	We should involve elderly in process of what we do in state government. There is no structured plan in juvenile system to use elderly as a resource. We need to do a better job of incorporating seniors by developing a policy within the agency so people can take advantage of the skills, wisdom and knowledge of others. How to choose to use the resources? Would be interested in good public policy and minimizing costs. Would like to see cost-effectiveness in terms of saving the state "x" amount of money if we use these resources and increase the level of cohesiveness of communities.	What percent of volunteers are elderly? How have retired persons been contracted with and paid aside from volunteerism? How many elderly are actually paid (this is a good measure for all state agencies to answer to)

**TABLE 3: INTERNAL AGENCY FUNCTIONS AND STAFF ISSUES (CONTINUED)**

<b>LEGISLATIVE COUNCIL</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Aging issues deal with their internal workforce. Have a good number of employees eligible for retirement in next 5 years	Deal with issues as they come up. Biggest thing is we strive to make people aware of DCRA and that it can be used for elder care.	Nothing planned. Medium-sized agency with long-term employees; they do have ERS or outside vendor to conduct retirement planning seminar for their staff at their location; conduct health issues training resources such as cancer.	Aging population (employees) separated out for training; basically whatever pertains to their younger employees applies to their elder employees.

<b>MILITARY FACILITIES COMMISSION</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
As current staff approaches retirement age, issue is how to retain and/or hire qualified staff. Without significant funding for salary increases it will be difficult to retain or hire qualified staff. Many of our older employees need training in computer technology in order to perform jobs more efficiently.	We provide training to staff that have demonstrated management and leadership skills. We also allow employees to attend computer training classes. We have asked legislature to fund salary increases.	Due to limited budget of most small agencies, it would be helpful if DIR could provide training for current state employees at no charge. I realize DIR may not have funds to do this, but it may be easier for them to request the funds rather than each agency having to request the funding for training.	Decreased paper generated would indicate that our employees are comfortable using computer. Retention of non-management staff over several years would indicate that the staff is satisfied with salary and working conditions.

**TABLE 3: INTERNAL AGENCY FUNCTIONS AND STAFF ISSUES (CONTINUED)**

<b>PROTECTIVE AND REGULATORY SERVICES, DEPARTMENT OF</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Many of the key staff at PRS will be eligible for retirement within the next several years and recent research shows that the job market is filling with new employees who may stay in a job an average of only two years. Adult Protective Services is experiencing a shortage of workers in the labor pool who have education or training in geriatric social work. Maintaining PRS staffing levels is a critical issue that will affect our ability to serve clients	As part of a strategic initiative to address our workforce issues, PRS formed a Leadership Development Workgroup to review the impact of possible retirements and to make recommendations for developing staff to assume these roles. The department also created a Recruitment and Retention unit that will implement processes to assist with recruiting new staff and retain existing staff.	The Leadership Development Workgroup and the Recruitment and Retention Unit should help the agency create an environment where staff want to choose PRS as the vehicle for their professional growth and development, are supported in learning about career advancement within PRS, and have the opportunity to learn the necessary skills for doing so. PRS will use mentoring, internships, individual leadership initiative and formal leadership training as elements of the leadership development program	Track staff participating in the Leadership Development program and calculate how long these staff are employed with the agency.

<b>SOIL AND WATER CONSERVATION BOARD</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Replacing employees when they retire and our agency has a large percentage of aging employees. It is also difficult to replace District Directors who resign because of their age.	We are seeking younger employees to take developmental jobs. We attempt to broaden the involvement of agricultural land owners in all our programs	Have cross training and developmental programs in place. Target educational programs at younger agricultural producers.	1) Ability to fill non-entry level vacancies from within. 2) Decrease the average age of District Directors

<b>STATE PROSECUTING ATTORNEY</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Future retirement of employees	Providing retirement information to employees as needed	None that have been identified	<i>None reported.</i>



**TABLE 3: INTERNAL AGENCY FUNCTIONS AND STAFF ISSUES (CONTINUED)**

<b>STRUCTURAL PEST CONTROL BOARD</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
1) Incapacity or death of pest control business owners and responsible certified applicators 2) employee retirement and loss of experience	Employees provided with information on retirement system options and program savings. Agency provides training of staff for basic functions and a variety of training opportunities for each position.	The agency staff is very young and no additional need other than increasing salaries to foster staff retention is known at this time.	Percent of staff lost per year.

<b>TEACHER RETIREMENT SYSTEM</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Awareness of staff to employment and retirement issues	Providing print and electronic information and resources	TRS should also undertake steps to increase staff sensitivity to culturally diverse populations such as seniors.	TRS will gauge active member and retiree satisfaction with TRS services through periodic surveys.

<b>TERRELL STATE HOSPITAL</b>			
<b>AGING ISSUES</b>	<b>CURRENT INITIATIVES</b>	<b>FUTURE ACTIONS</b>	<b>MEASURING PROGRESS</b>
Lack of sufficient numbers of mental health professionals trained to work with the geriatric mentally ill.	Working in cooperation with UTSW Medical School to establish a geriatric psychiatry fellowship on the Geriatric Unit.	<i>None reported.</i>	<i>None reported.</i>



## **CHAPTER V**

### **CONCLUSION AND FUTURE DIRECTIONS**

Overall, state agencies are aware of aging issues and have begun to consider how the aging of our society will shape Texas' future. Specifically, agencies are aware of changing demographics and the potential impact on demand for services. Agencies recognize that these large demographic shifts are likely to increase diversity among the agency's service population and many government entities are actively contemplating adjustments in the services they provide and the ways they deliver them.

The most prominent theme across all current and future initiatives was the need for government agencies to maximize collective resources through formal partnerships and inter-agency collaborations. Most respondents felt a shared responsibility with other agencies to expand services, disseminate information to consumers, share expertise on aging issues, and promote policy changes.

Agencies identified specific methods they could use to measure progress toward addressing aging issues. Each agency is encouraged to implement the strategies they identified in efforts to increase progress toward state government's preparedness to serve Texans in the coming decades.

This study revealed that aging issues exist beyond health and human service agencies. They also affect other government services such as transportation, housing, and workforce. Lines of communication must remain open between agencies so they can understand the multi-faceted issues faced by older adults. Partnerships lead to design of collaborative strategies that respond to issues facing older adults and their families, identification of underutilized resources that could be developed, and decisions about how existing resources can best be utilized. Our collaborative efforts at the state level may encourage community entities to design and implement similar readiness strategies at the local level.

This report is intended to 1) provide specific information to agencies, state legislators, and other aging stakeholders on current and future initiatives, goals, and desired outcomes, 2) raise awareness of aging issues that pertain to state government readiness, 3) guide future research, and 4) shape public policy affecting older Texans. This document is intended as a catalyst for coordinated state action to address future needs.



# APPENDIX A

## INDEX OF INDIVIDUAL STATE AGENCIES SURVEYED

\*NR: No Response to Survey

\*R, NA: Responded, No Aging Issue

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\*NR: No Response to Survey

\*R, NA: Responded, No Aging Issue

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\*NR: No Response to Survey

\*R, NA: Responded, No Aging Issue

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\*NR: No Response to Survey

\*R, NA: Responded, No Aging Issue

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*NR: No Response to Survey	*R, NA: Responded, No Aging Issue	

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