**Programs for the Aging**

Some federal programs that provide for respite care are designed solely for those in the aging population who have some special need or who have attained a particular age.

The following legislation supports grants for aging services:

- Older Americans Act: Title III—Supportive Services and Senior Centers Program
- Public Health Service Act (Grants for Supportive Services to Serve People with Alzheimer’s Disease and Related Disorders).

Each of these programs is described in this section.
Supportive Services and Senior Centers Program

Authorizing legislation:
Title III, Part B of the Older Americans Act.

Currently authorized through:
September 30, 2011.

Program purpose:
To maximize informal supports to older Americans so that they can stay in their homes and communities by developing and implementing comprehensive and community-based systems of service.

Beneficiaries:
Individuals age 60 and older, targeting those older individuals with the greatest economic needs, the greatest social needs, and those residing in rural areas.

Funding:
One-year noncompetitive formula grants are awarded on the basis of the proportion of individuals age 60 or older in the state in relation to the number in the nation, after approval of a 2-, 3-, or 4-year state plan. States must supply a 15% match.

Activities supported by the funding:
Approved state grants may include

- health, mental health, education and training, welfare, information, recreation, homemaker, counseling, or referral services;
- services to help older individuals avoid institutionalization and return to their communities, through
  - client assessment, case management, and development and coordination of community services;
  - supportive activities to meet the needs of caregivers; and
  - in-home and community services, including home health, homemaker, shopping, escort, reader, and letter-writing;
- maintenance of physical and mental well-being through physical activity, music, art, and dance-movement therapy;
- a coordinated system of support services designed to enable mentally impaired older individuals attain and maintain emotional well-being and independence;
- services designed to support family members and other persons providing voluntary care to older individuals who need long-term care;
- services to encourage and facilitate regular interaction between students and older individuals;
- in-home services for frail older individuals, including those with Alzheimer’s disease or related neurological and organic brain dysfunction, and their families; and
- “any other services necessary for the general welfare of older individuals, if such services meet standards prescribed by the Assistant Secretary and are necessary for the general welfare of older individuals.”
**Respite connection:**
While respite care is not specifically listed in the authorizing legislation, a case could be made for including respite services under any of the services listed above.

**Issues for consumers, providers, and advocates:**
The term “family caregiver” means an adult family member or another individual who is an informal provider of in-home and community care to an older individual or to an individual with Alzheimer’s disease or a related neurological or organic brain dysfunction.

For a comparable program for American Indians and Hawaiian Natives, see [Special Programs for Aging American Indians](#).

**Federal funding agency:**
U.S. Department of Health and Human Services, Administration for Community Living, Administration on Aging.

**Eligible entity:**
States that have Agencies on Aging designated by their governors.

**Points of contact:**
Contact information and links to each state’s Agency on Aging can be found on the National Association of State Units on Aging and Disability website.
[http://www.nasuad.org/about-nasuad/about-state-agencies/list-members](http://www.nasuad.org/about-nasuad/about-state-agencies/list-members)

To locate home and community-based services, use the Eldercare Locator on the U.S. Department of Health and Human Services website.
[http://www.eldercare.gov/Eldercare.NET/Public/Index.aspx](http://www.eldercare.gov/Eldercare.NET/Public/Index.aspx)

**Related links:**
Catalog of Federal Domestic Assistance: Special Programs for the Aging, Title III, Part B, Grants for Supportive Services and Senior Centers
[https://www.cfda.gov/index?s=program&mode=form&tab=core&id=59f3a8cefe2d1a5f92844aebada9bca8](https://www.cfda.gov/index?s=program&mode=form&tab=core&id=59f3a8cefe2d1a5f92844aebada9bca8)

National Aging Information and Referral Support Center.

National Council on Aging, National Institute of Senior Centers.

**References:**
U.S. Department of Health and Human Services. Administration for Community Living, Administration on Aging. Supportive Services and Senior Centers Program.
[http://www.aoa.acl.gov/AoA_Programs/HCLTC/supportive_services/index.aspx](http://www.aoa.acl.gov/AoA_Programs/HCLTC/supportive_services/index.aspx)

Alzheimer's Disease Supportive Services Program (ADSSP)

Authorizing legislation:

Currently authorized through:
September 30, 2002. Congress has continued to appropriate funds for this program.

Program purpose:
To expand the availability of diagnostic and support services for persons with Alzheimer's disease and related disorders (ADRD), their families, and their caregivers and to improve the responsiveness of the home and community-based care system to persons with dementia. There are three types of ADSSP grants that have been funded over the life of the program:

- **Evidence-Based Cooperative Agreements to Better Serve People with Alzheimer’s Disease and Related Disorders.** Funds states to implement evidence-based supportive service programs at the community level, including: Resources for Enhancing Alzheimer’s Caregiver Health (REACH) II, Savvy Caregiver, Star-Caregiver, Reducing Disability in Alzheimer’s Disease (R-DAD), the New York University Caregiver Intervention (NYUCI) and Coping with Caregiving.

- **Innovation Cooperative Agreements to Better Serve People with Alzheimer’s Disease and Related Disorders.** Funds states and partner organizations to explore innovative approaches to improving the delivery of supportive services at the community-level to people with ADRD and their family caregivers.

- **Dementia Capability Grants.** Fund states to help ensure Systems Integration Programs to Create Dementia Capable, Sustainable Service Systems to help ensure that people with dementia and their family caregivers have access to a home and community-based services system that identifies those with dementia, ensures that program staff have appropriate dementia care training, and assures delivery of quality services.

In 2011, the ADSSP expanded its scope to focus on ensuring the availability of dementia-capable community-based social and health care services through the coordination and incorporation of ADRD into broader home and community-based service systems. Fifteen states initially were awarded grants dedicated to the implementation of dementia-capable services and through FY 2015, additional states have been awarded these grants to expand dementia capable systems.

Beneficiaries:
Services are targeted to 1) individuals with Alzheimer’s disease and related disorders; (2) families and other informal caregivers of those individuals; and (3) professional care providers of those individuals.

Funding:
Competitive cooperative agreements for usually 3-years. Grantees must provide a 25% match in the first year, a 35% match in the second year, and a 45% match in the third and future years.
Activities supported by the funding:
At least half of federal funding must be applied to direct services to individuals and their families. Direct services are listed as

- home health care,
- personal care,
- adult day care,
- companion services,
- short-term care in health facilities, and
- “other respite care to individuals with Alzheimer’s disease or related disorders who are living in single-family homes or congregate settings.”

These ADSSP initiative with a focus on promoting dementia capable systems have had a broad reach, but in an effort to fill existing gaps, the Alzheimer’s Disease Initiative – Specialized Supportive Services (ADI-SSS) project, funded with public health funds, was promoted by ACL in 2015. Successful applicants will be expected to engage in a minimum of 3 of the following activities in support of individuals with ADRD.

- Provision of effective supportive services to persons living alone with ADRD in the community.
- Provision of effective care/supportive services to persons living with moderate to severe impairment from ADRD and their caregivers
- Improvement of the quality and effectiveness of programs and services dedicated to individuals aging with intellectual and developmental disabilities with ADRD or those at high risk of developing ADRD.
- Delivery of behavioral symptom management training and expert consultation for family caregivers.

Respite connection:
Respite is a core activity of this funding. Respite was defined in the 2015 program announcement as “an interval of rest or relief or the result of a direct service intervention that generates rest or relief for the person with dementia and/or their family caregiver.” For example, if people with dementia and/or their family caregivers receive counseling or training through an intervention, the intervention was considered to have generated respite for the participants, and therefore this intervention may be considered part of the direct service requirement.¹

Issues for consumers, providers, and advocates:
There are no age restrictions on either the individuals with dementia to be served or their family caregivers. Individuals served do not need to have a diagnosis of Alzheimer’s disease, but they must

have evidence of progressive cognitive and functional decline due to a degenerative brain disease and require assistance with adult day care, companion services, home health care, personal care, respite, or short-term care in a health facility.

**Federal funding agency:**
U.S. Department of Health and Human Services, Administration for Community Living, Administration on Aging.

**Eligible entity:**
State Units on Aging

**Points of contact:**
Information about current and past grantees, along with state contact information for each, is available on the Aging & Disability Resource Center website. 

**Related links:**
Catalog of Federal Domestic Assistance: Alzheimer’s Disease Demonstration Grants to States. https://www.cfda.gov/index?s=program&mode=form&tab=core&id=a4b92ad5ae30f7709548cf10e839e795


**References**


