AGING WITH DIGNITY:
FORGING PARTNERSHIPS FOR SYSTEM TRANSFORMATION

MISSION
THE SCAN FOUNDATION’S MISSION IS TO ADVANCE THE DEVELOPMENT OF A SUSTAINABLE CONTINUUM OF QUALITY CARE FOR SENIORS.

VISION
THE SCAN FOUNDATION’S VISION IS A SOCIETY WHERE SENIORS RECEIVE MEDICAL TREATMENT AND HUMAN SERVICES THAT ARE INTEGRATED IN THE SETTING MOST APPROPRIATE TO THEIR NEEDS AND WITH THE GREATEST LIKELIHOOD OF A HEALTHY, INDEPENDENT LIFE.
# TABLE OF CONTENTS

- Message from the Board Chair and President & CEO .................. 5
- Grants and Initiatives ...................................................................... 9
- Financial Statements ........................................................................ 26
- Board of Directors and Staff .......................................................... 28
If California improved its Long-Term Services and Supports system to the level of the best-performing state:

- 30,145 more low- or moderate-income adults age 21 and older with activity of daily living disabilities would be covered by Medicaid.
- 11,309 more new users of Medicaid Long-Term Services and Supports would first receive services in home and community based settings instead of nursing homes.
- 9,824 nursing home residents with low care needs would instead be able to receive Long-Term Services and Supports in the community.
- 7,796 unnecessary hospitalizations of people in nursing homes would be avoided.

Source: www.longtermscorecard.org
AGING WITH DIGNITY: FORGING PARTNERSHIPS FOR SYSTEM TRANSFORMATION

The SCAN Foundation’s Board of Directors and staff are happy to present our 2011 Annual Report. Last year was an important one for the Foundation, as we expanded our efforts on several key fronts to develop a more integrated, sustainable, and person-centered continuum of care for vulnerable older Californians.

In our strategic plan, we set out three funding priorities for our work in California:

- Raising public awareness and engagement;
- Advancing realistic policy options around financing and delivery system reform; and
- Bringing promising programs to scale.

In 2011, we worked closely with Governor Jerry Brown’s administration and the state legislature to make system transformation a priority. Given that 70 cents of every dollar spent on vulnerable older Californians comes from federal programs, we continued to target specific opportunities for improving those programs for the people of our state. Major efforts have included helping California maximize opportunities within the Affordable Care Act, such as better integrating care for people with Medicare and Medi-Cal, and releasing a national scorecard ranking all states in providing a high performing long-term services and supports (LTSS) system where California ranked 15th in the country. This first-ever national comparison sets a clear frame for improvement, challenging all of us to do better to meet the needs of vulnerable Californians.

Challenges also bring opportunities, and this axiom has never been truer than in California during 2011. The multi-year budget crisis has continued to erode the full range of “discretionary services,” particularly home- and community-based services. Raising public awareness about the challenges faced by all Californians was a pivotal part of our work this year. We completed a poll of California voters to better understand their knowledge about and preparedness for LTSS needs. Findings from this poll were widely covered across the state in both English and Spanish language media, helping to bring substantial attention to the issues of vulnerable older adults.

The Foundation also focused on building a broad community of constituents to give voice to the important changes confronting the state. We are proud of the work of the Sacramento-based California Collaborative, our 12 regional coalitions, and all of our “AGEnts for Change” community-based organizations. These groups have played important roles as proactive voices for constructive, thoughtful, and person-centered solutions to the difficult problems at hand.
To support a critical dialogue, the Foundation produced and commissioned a broad range of research and analyses to help inform interested parties. Highlights included comprehensive and updated reviews of various state budget proposals, critical research briefs on a range of aging issues in California, and most importantly, a framework for transforming aging services and supports in California.

Our polling results, policy research, and stakeholder engagement came together in the Foundation’s Long-Term Services and Supports Policy Summit in Sacramento, California. More than 200 people attended the day-long Summit, representing the various stakeholder communities concerned with LTSS across the state including consumer advocates, providers, state legislative and executive branch staff, media, and philanthropy. Attendees included individuals local to Sacramento as well as those from county and local aging services networks across the state. A diverse group of thought leaders from across the country spoke at the event, bringing forth their vision of how California can move forward in light of both budget realities and new information about what it will take to achieve a high-performing LTSS system for older adults and persons with disabilities.

A centerpiece of the Summit’s work was to review California’s performance on the first ever national LTSS Scorecard which ranked each state’s performance across four dimensions of care (See page 11 for more on the Scorecard). California’s ranking of 15th nationally leaves room for improvement. In fact, if California performed at the same level as the best state, 9,824 nursing home residents with low care needs would instead be able to receive LTSS in their communities, and 7,796 unnecessary hospitalizations of people in nursing homes would be avoided. Based on these results, Summit participants ranked the importance of specific opportunities to improve care for vulnerable Californians, thus helping to build consensus about statewide priorities.

Finally, a major new theme in 2011 was to call attention to organizations and programs that help those with advanced illness receive care that is consistent with their needs and desires, care that is focused on quality-of-life and not simply quality-of-health -- care that fundamentally respects peoples’ choices. Our Dignity-Driven Decision-Making (DDDM) initiative has brought together thought leaders from the best programs throughout California and the Pacific Northwest to work with the Foundation to help define and advance the availability of DDDM. We are helping California organizations prove that these sorts of programs are in fact sustainable and can deliver a strong business case, while also demonstrating that they deliver the care that individuals and their families prefer. We have helped DDDM programs compete for opportunities to bring new resources to California and expand their programs, such as the Centers for Medicare and Medicaid Services Innovation’s call for grant proposals, which could bring up to $30 million for a three year period in funding for programs that serve vulnerable Californians.

In California and across the nation we continue to see a huge need to reframe the language we use to describe vulnerable aging. During 2011, we completed groundbreaking work through
polling and focus groups to better understand how to give voice to this important need. What came through loud and clear is that while people are not prepared for and do not want to think about the realities of “long-term care,” they are anxious to participate in a movement and work towards building services that will encourage aging with “dignity,” “choice,” and “independence.” These are services that we all want to be available should we need them, yet fear we won’t receive in the current environment of cutbacks. It will take a united voice from seniors and boomers to demand that a robust network of support is available to meet the increasing need for these services.

Moving into 2012, we continue to confront great challenges that we perceive as tremendous opportunities. As California’s health care systems evolve under the pressure of budget deficits, LTSS will not be spared. How do we build better a better system that is person-centered as opposed to service-centered? How does that system make the best use of available resources? Breaking down the silos that currently exist is critical. Using standardized assessment tools, providing conflict-free care coordination, appropriately targeting services to needs, putting care in the community first, measuring and reporting quality – these are all keys to a transformed system that puts the person in the center. Pilot programs in the state to better integrate care for some of our most vulnerable residents offer an important opportunity to build and test better systems while helping spread best practices across the state. Finally, supporting communities and stakeholders to articulate their needs and desires will be important as well. The status quo is neither sustainable nor particularly person-centered. In 2012, we see important opportunities to improve both efficiency and outcomes based upon improved targeting that is driven by peoples’ desires. These are the fundamental building blocks of a health care system that promotes aging with dignity, independence, and choice.

Sincerely,

Thomas Higgins
Chairman of the Board

Bruce A. Chernof, M.D.
President and CEO
Raising the need for LTSS reform on a national level continued to be a priority. Stories generated by the Foundation and its grantees received coverage in a variety of national media outlets, including the New York Times, Los Angeles Times, Washington Post, National Public Radio, Sacramento Bee, San Francisco Chronicle, and USA Today. The Foundation also launched its social media presence in 2011 with a Facebook page and Twitter feed.
**Funding Priority 1: Public Engagement**

**Elevate the establishment of a comprehensive continuum of care for seniors as a national priority, and as state priority for California.**

In 2011, The SCAN Foundation continued to build public awareness and engagement around transforming the system of long-term services and supports (LTSS) through strategic partnerships and activities. In California, the Foundation released its second annual poll of voters, in partnership with the UCLA Center for Health Policy Research, to gauge understanding of and preparedness for LTSS. Results of this poll were widely disseminated across the state and were featured in national, state, and ethnic media. The poll was released in advance of the Foundation’s first statewide LTSS System Transformation Summit, which was held in Sacramento and featured a daylong program hosting more than 200 advocates, stakeholders, providers, and policy makers. Summit activities centered around the first ever national scorecard assessing long-term care delivery systems of each state. Titled, “Raising Expectations: A State Scorecard on Long-Term Services and Supports for Older Adults, People with Physical Disabilities and Family Caregivers,” the Scorecard was developed by the AARP Public Policy Institute with support from The SCAN Foundation and The Commonwealth Fund.

The Foundation’s ongoing media and communication strategy focused on continuing to leverage the brand recognition of several established media partners while elevating aging and LTSS issues in key national outlets. Kaiser Health News continued to develop and disseminate coverage of aging and LTSS issues in major media outlets across the country. The University of California, San Francisco continued its successful production of articles for the Journal of the American Medical Association (JAMA), engaging the physician community through its “Care of the Aging Patient: From Evidence to Action” series. Similarly, Health Affairs developed a new section in its publication entitled, “The Care Span,” in which stories about aging and long-term care are produced from a person-centered perspective with clear policy implications. The Foundation also initiated a new partnership in California with HealthyCal.org to develop an “Aging with Dignity” section to provide coverage of important issues across the state.

Raising the need for LTSS reform on a national level continued to be a priority. Stories generated by the Foundation and its grantees received coverage in national media outlets, including the New York Times, Los Angeles Times, Washington Post, National Public Radio, Sacramento Bee, San Francisco Chronicle, and USA Today. The Foundation also launched its social media presence in 2011 with a Facebook page and Twitter feed. This funding priority has a significant body of work in progress, such as exploring continued innovative media partnerships and programs that will further expand the Foundation’s presence as a trusted source of information on long-term services and supports in 2012 and beyond.
AGING WITH DIGNITY BEAT
HealthyCal.org

Fiscal Sponsor: The Tides Center

$35,000 for 6 months

This pilot grant supported two freelance reporters for the development of “Aging with Dignity” articles on HealthyCal.org in order to provide media coverage on aging and long-term care issues to California policymakers, stakeholders, and the general public.

ASA NATIONAL FORUM ON THE AFFORDABLE CARE ACT: A WAY TOWARD AGING WITH DIGNITY IN AMERICA

American Society On Aging

$13,700 for 7 months

Dr. Bruce Chernof, president and CEO of The SCAN Foundation, served as guest editor of the Spring 2011 issue of Generations, the journal of the American Society on Aging (ASA). A half-day session was held at the ASA Annual Conference highlighting article topics on the Affordable Care Act implementation efforts that affect older adults.

BRIEFINGS FOR CONGRESSIONAL STAFF ON DEFICIT REDUCTION PROCESS RELATED TO THE WORK OF THE SUPER COMMITTEE

Alliance for Health Reform

$33,000 for 5 months

The Alliance for Health Reform held four briefings between September and December 2011 on implications of potential Congressional Super Committee considerations for Medicare and Medicaid.
Funding Priority 1 Project Spotlight: LTSS Scorecard

In 2011, AARP Public Policy Institute, with funding from The SCAN Foundation and The Commonwealth Fund, produced the first-ever Long-Term Services and Supports (LTSS) Scorecard that assessed each state’s delivery of LTSS on 25 indicators that reflect a high-performing LTSS system.

The Scorecard centered around four dimensions:
• support for family caregivers;
• ease of access and affordability;
• choice of settings and providers;
• and quality of care and life.

It provides a baseline measurement for where state LTSS systems are in achieving the vision of a high-performing LTSS system. This is critical in light of the opportunities in the Affordable Care Act to reform state LTSS systems and the steep increased projections of the senior population who will likely need these services.

In the short amount of time since its release, the Scorecard has resulted in important engagement of multiple stakeholders across states in identifying and addressing LTSS system deficits. The broad range of stakeholders includes consumers and consumer advocates, providers, state administration and legislative staff/members, and philanthropy. The California Collaborative, a Sacramento-based coalition of state-wide organizations that engages a multitude of stakeholders from the aging and disability communities, has created a special focus for the Scorecard in their agenda-setting work. The Scorecard has generated legislative hearings in California that have raised awareness about LTSS issues in the state, helped get legislation across the line in Indiana to support LTSS options counseling, and supported a resolution to create a task force in Louisiana to examine funding for LTSS.

To date, the Scorecard has generated important stakeholder, legislative, and administration engagement in more than a dozen states to improve aspects of each state’s LTSS system.
BUILDING THE CONTINUUM OF CARE IN THE CONTEXT OF HEALTH REFORM: EDUCATING FEDERAL HEALTH POLICYMAKERS
National Health Policy Forum at George Washington University
$725,000 for 24 months

The National Health Policy Forum at George Washington University developed a series of meetings and associated written products to educate, inform, and initiate an active dialogue among the policy community. The current and potential future landscape of home- and community-based long-term care services for older adults with functional impairments will be explored.

CARE OF THE AGING PATIENT: FROM EVIDENCE TO ACTION
University of California - San Francisco
$784,542 for 36 months

This renewal grant to the University of California San Francisco supported the production of an additional 18 articles for the Care of the Aging Patient series over a 36-month period for publication in the Journal of the American Medical Association.

DATA BRIEFS YEAR 2
Avalere Health, LLC.
$200,000 for 14 months

Avalere Health, LLC. developed The SCAN Foundation DataBrief series, producing 16 DataBriefs and leading the development of three national webinars organized around the DataBriefs within a current policy context. The DataBrief series presents descriptive statistics that focus on a single aspect of the continuum of care for seniors. Each statistic also includes a description of the policy context, an interpretation, and the implications for policymakers.

KAISER HEALTH NEWS COVERAGE OF LONG-TERM CARE ISSUES
Henry J. Kaiser Family Foundation
$325,000 for 24 months

Under this grant, Kaiser Health News (KHN) produced 160 original articles and 220 daily news features on aging and long-term care issues affecting older Americans. Articles were posted to KHN’s website, distributed to KHN’s e-blast list, and submitted to KHN’s national media partners for dissemination.
LONG-TERM CARE POLL OF CALIFORNIA VOTERS
Lake Research Partners
$44,050 for 2 months

Under this grant, Lake Research Partners in partnership with UCLA Center for Health Policy Research conducted a statewide survey in California of 1,200 registered voters 40 years and older on their knowledge, attitudes, and beliefs on long-term care. Poll results were widely distributed through California media, policy, and advocacy networks.

LONG-TERM SERVICES AND SUPPORTS POLICY SUMMIT
Government Action and Communication Institute
$67,193 for 6 months

Under this grant, Government Action and Communications Institute (GACI) planned and organized the Long-Term Services and Supports Policy Summit in Sacramento, California to address the need to transform the state’s system of long-term care. With direction and vision provided by The SCAN Foundation, GACI provided logistical, consulting, and other expertise in planning and carrying out the summit.

PUBLIC POLICY & AGING REPORT ON THE SENATE SPECIAL COMMITTEE ON AGING 50TH ANNIVERSARY
National Academy on an Aging Society
$10,000 for 3 months

Established in 1961, the Senate Special Committee on Aging has served as a focal point in the Senate for discussion and debate on matters relating to older Americans. To honor its 50th anniversary and bring attention to the past and future work of the Committee, the National Academy on an Aging Society published a special edition of the Public Policy & Aging Report recognizing the past accomplishments and future importance of the Senate Special Committee on Aging.
STATE POLICY WORKSHOP FOR CONGRESSIONAL HEALTH AND AGING POLICY FELLOWS

Columbia University: Research Foundation for Mental Hygiene, Inc.

$60,200 for 9 months

The SCAN Foundation commissioned a two-day state policy workshop for all three cohorts of the 2011 Health and Aging Policy Fellows program in order to help reform state policy with regard to aging and particularly continuum of care issues beyond the fellowship year.

TECHNICAL ASSISTANCE BRIEFS ON THE EMPLOYER AND SELF-EMPLOYED MARKETS FOR LONG-TERM CARE INSURANCE

The Forbes Consulting Group, LLC.

$80,000 for 7 months

The Forbes Consulting Group, LLC. produced three briefs that outlined the marketplace for long-term care insurance programs in two different work settings: employers and those who are self-employed. The briefs demonstrated the need for long-term care coverage in both work environments.
This year was radically different than when the Foundation was created in 2008, offering both great opportunity for health care system transformation and great risks to programs that are the backbone of health care delivery and economic stability for older Americans. Implementation efforts of the Patient Protection and Affordable Care Act (ACA) continue while changing the funding formulas and operations for Medicare, Medicaid, and Social Security are central to the current entitlement reform debate. The work of Funding Priority 2 in 2011 addressed opportunities to reform the LTSS system and consider which system transformation activities are critical to framing the basis for these opportunities. Selected highlights for this transformation focus is at the state level, where many decisions are made about how to structure systems to produce desired outcomes. However, the federal government has a key role in working through these issues as most resources that fund long-term care are shared state/federal resources. Project highlights that inform system transformation include both foundation-produced and commissioned papers to address what The SCAN Foundation calls the five “pillars” of system transformation that are critical for achieving long-term care reform: 1) administrative reorganization; 2) global budgeting; 3) uniform assessment; 4) integrated information systems; and 5) quality monitoring and improvement. The Foundation’s first ever Long-Term Services and Supports Policy Summit, served as an opportunity to partner with a wide range of stakeholders to explore these issues around system transformation, with the LTSS Scorecard as the central focus of discussion.
ANALYSIS OF COMPREHENSIVE LONG-TERM CARE ASSESSMENT SYSTEMS IN FOUR STATES
C.E. Reed and Associates
$34,950 for 5 months

This brief was developed to support California’s efforts to move toward uniform assessment as a part of coordinated care. The brief is directly related to Governor Brown’s budget proposal, which included uniform assessment as part of its Coordinated Care Initiative.

BUILDING STAKEHOLDER SUPPORT FOR CALIFORNIA’S DUALS INTEGRATION
Harbage Consulting, LLC.
$74,880 for 2 months

Harbage Consulting provided short-term technical assistance and support to California’s Department of Health Care Services as it develops and implements its integrated systems of care for dual eligibles.

CALIFORNIA COLLABORATIVE AND REGIONAL COALITION CONFERENCE FACILITATION
LifeCourse Strategies, LLC.
$17,150 for 4 months

The Foundation convened representatives of the California Collaborative, a Sacramento-based coalition of state-wide organizations that seeks to engage a multitude of stakeholders from the aging and disability communities, and the 12 Regional Coalitions, a group of local and regional organizations made up of service and advocacy organizations divided by region, for a one-day meeting in Sacramento to discuss regional and local advocacy opportunities to promote reform of California’s system of long-term services and supports. The meeting was prepared and facilitated by Monique Parrish, DrPH, director of LifeCourse Strategies, LLC.

EQUITABLE AND SUSTAINABLE FINANCING FOR THE LONG-TERM CARE SAFETY NET: POLICY OPTIONS FOR FEDERAL-STATE FINANCING
Georgetown University
$48,990 for 6 months

This project was one of two related policy briefs, each aimed at promoting a major policy goal for future advances in long-term care policy. For this project, Drs. Harriet Komisar and Judy Feder of Georgetown University developed a policy brief to motivate, identify, and promote policy reforms to federal-state financing for long-term services and supports in order to achieve an equitable, adequate, and sustainable safety net.
FRIDAY MORNING COLLABORATIVE CONTINUATION GRANT

National Council on Aging

$419,760 for 21 months

The National Council on Aging convened and staffed a working group of aging and disability organizations, known as the “Friday Morning Collaborative,” to jointly educate and inform policymakers and stakeholders on federally-driven LTSS policy initiatives. The Collaborative leveraged the group’s collective voice to educate and inform policymakers and stakeholders during time-sensitive long-term care policy discussions.

INCORPORATION OF THE COALITION TO TRANSFORM ADVANCE CARE (C-TAC)

Coalition to Transform Advance Care

Fiscal sponsor: The Center for Practical Bioethics

$70,000 for 3 months

This project helped to establish a formal, non-partisan coalition of diverse stakeholders known as C-TAC, with a mission to transform care of people with advanced illness by empowering consumers, changing the health delivery system, improving public and private policies, and enhancing provider capacity.

PROFILES OF STATE INNOVATIONS TRANSITION PROJECT PART I – PREPARATION FOR IMPLEMENTING THE PROFILES OF STATE INNOVATION ROADMAPS

Center for Health Care Strategies

$69,123 for 4 months

In 2010, The SCAN Foundation commissioned the Center for Health Care Strategies to develop three Profiles of State Innovation roadmaps to help states explore and understand emerging options, best practices, and proven models of success in three areas: (1) rebalancing LTSS care options to support home and community-based services; (2) development and implementation of managed LTSS programs; and (3) integrated care for adults who are dually eligible for Medicaid and Medicare. This project provided the planning for and selection of states seeking to receive technical assistance to implement the roadmaps.
In order to raise the profile of long-term services and supports (LTSS) in California and build momentum for LTSS system transformation among stakeholders, advocates, policymakers and the media, the Foundation hosted its first statewide summit on LTSS on September 27, 2011. The goals of the LTSS Policy Summit were to highlight the new State Long-Term Services and Supports Scorecard developed by the AARP Public Policy Institute and specifically the rankings for California while building champions for LTSS system transformation. The Summit also sought to shift the dialogue surrounding LTSS issues in the state from program preservation toward transforming the state’s health system to a truly person-centered, integrated, and efficient program. The summit succeeded in bringing together hundreds of advocates, stakeholders, legislative staff, and health plan representatives to begin the work of system transformation. Following the Summit, Senator Elaine Alquist called a hearing November 7, 2011 to discuss LTSS in the state, further elevating the issue of LTSS reform within the California state legislature.
PROFILES OF STATE INNOVATIONS TRANSITION PROJECT PART II – IMPPLEMENTING THE PROFILES OF STATE INNOVATION ROADMAPS

Center for Health Care Strategies
$705,310 for 24 months

This project provided assistance to California and other states seeking to implement at least one of the three Profiles of State Innovation roadmaps, which outline pathways for states to transform their system of care serving older and disabled adults with an emphasis on improving access to community-based long-term services and supports.

STANDARDIZING THE EXPECTATIONS AND EVALUATION OF INTEGRATED CARE MODELS FOR PERSONS WHO ARE DUALLY ELIGIBLE FOR MEDICARE AND MEDICAID

National Committee for Quality Assurance
$74,909 for 21 months

The Foundation supported a project with the National Committee for Quality Assurance to develop a framework for standards, measures and tools for integrated care models in order to better assess the quality and integration of medical and non-medical services for dual eligibles.

STRENGTHENING CALIFORNIA’S LONG-TERM SERVICES AND SUPPORTS THROUGH GLOBAL BUDGETING

Mildred Consulting and Advocacy
$19,008 for 5.5 months

Mildred Consulting was funded to prepare a brief to better understand the practice of global budgeting (also known as flexible accounting practices) in the context of long-term services and supports and how this practice could be implemented in California.

SUPPORT FOR THE CENTERS FOR MEDICARE AND MEDICAID INNOVATIONS (CMMI) HEALTH CARE INNOVATION CHALLENGE GRANT APPLICATION

Coalition to Transform Advance Care (C-TAC)
Fiscal Sponsor: National Hospice and Palliative Care Organization
$75,000 for 3 months

This project provided support to the Coalition to Transform Advance Care to develop a competitive application for the Center for Medicare and Medicaid Innovation Health Care Innovation Challenge grant opportunity.
TECHNICAL ISSUE BRIEFS ON DUAL ELIGIBLES

National Senior Citizens Law Center

$190,414 for 12 months

Under this grant, the National Senior Citizens Law Center produced and disseminated four technical assistance briefs addressing legal and regulatory inconsistencies between the Medicare and Medicaid programs.

TRANSFORMING CARE FOR MEDICARE BENEFICIARIES WITH CHRONIC CONDITIONS AND FUNCTIONAL LIMITATIONS

Georgetown University

$48,990 for 9 months

This project was one of two related policy briefs, each aimed at promoting a major policy goal for future advances in long-term care policy. The focus of this brief was on the importance of incorporating long-term services and supports into new ways of organizing and paying for services for Medicare beneficiaries’ chronic conditions and functional limitations – an effort that is now heavily focused on acute and medical care.
In 2011, The SCAN Foundation continued to support the dissemination and evaluation of promising program models through a four-pronged approach:

1. The Foundation accepted letters of interest from potential grantees on a continuous basis. In 2011, the projects submitted and funded through this mechanism focused on volunteer-driven services models. The Foundation also deepened its understanding of housing with services models by evaluating new approaches to how effective programs are designed.

2. The Foundation maintained its efforts in testing the application of technologies that enable seniors to receive high quality care in the setting of their choice through its support of the Center for Technology and Aging. Through this Center, the Foundation funded five projects that explored the application and scaling of mobile health (or m-Health) technologies.

3. As in previous years, the Foundation sought to support projects and leverage funding by partnering with other foundations with similar interests, or to build on projects of interest that were initially supported by other foundations.

4. Each year, the Foundation develops a Themed Request for Proposals (RFP), which supports a set of projects. The 2011 Themed RFP was Dignity-Driven Decision-Making, a framework that builds on previous efforts to define and develop patient- and family-centered care for people with advanced illness.
ADVOCACY OUTREACH ON THE OLDER AMERICANS ACT REAUTHORIZATION: MONTHLY WEBINAR SERIES
Grantmakers in Aging
$5,000 for 1 month

Grantmakers in Aging partnered with the American Society on Aging as its technical partner in this new monthly webinar series, the first of which focused on reauthorization of the Older Americans Act (OAA). Kathy Greenlee, assistant secretary for Aging, spoke about the OAA and the challenges of reauthorization.

AGENTS FOR CHANGE INITIATIVE
Area 1 Agency on Aging
Bay Area Community Services
St. Barnabas Senior Center
The Health Trust
$399,738 for 24 months

Through its AGEnts for Change initiative, the Foundation provided support to four community-based organizations to expand volunteer programs. The goal of the initiative was to further the organizational capacity of these organizations to engage their volunteers in social action.

BRINGING THE PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY (PACE) TO HUMBOLDT COUNTY
Humboldt Senior Resource Center
$30,000 for 13 months

The funding for this project, in partnership with several other local foundations, supported the development of Humboldt Senior Resource Center’s PACE application and licensing in Humboldt County.

CONSUMERS FOR QUALITY CARE - NO MATTER WHERE
The National Consumer Voice for Quality Long-Term Care
$51,744 for 36 months

“Consumers for Quality Care – No Matter Where” was a project initiated by Atlantic Philanthropies in four states. The Foundation built on this initiative by funding California as a fifth state. The initiative focused on expanding Consumer Voice’s national grassroots advocacy network to focus on health care issues faced by older long-term care consumers who receive care in their homes or communities.
The SCAN Foundation made a substantial investment in Dignity-Driven Decision-Making (DDDM) models of care, which focus on improving quality-of-life outcomes and bridging community services with medical care that result in system cost savings for people with advanced illness. The Foundation engaged partners to promote DDDM in three distinct ways. First, the initiative established a West Coast learning collaborative that strategized how to develop and support the dissemination of models of care in alignment with the principles of DDDM. Second, sustainability analyses of DDDM care models were conducted by Avalere Health with the goal of leveraging funding through the federal Innovation Center, and to highlight federal reimbursement structures that require adjustment to support these models. Third, research evaluated the patient and family experience of those participating in DDDM models of care, while also measuring the impact on their quality-of-life.
DIGNITY-DRIVEN DECISION-MAKING- LEARNING COLLABORATIVE AND SUSTAINABILITY ANALYSIS AND PATIENT AND FAMILY EXPERIENCE EVALUATION

Nexera, Inc.
$187,500 for 12 months

This project was part of the Foundation’s 2011 Themed RFP - Dignity-Driven Decision-Making (DDDM) initiative. DDDM’s specific focus is to shift the healthcare decision-making process for vulnerable older Californians to explicitly include not only quality-of-health efforts, but also quality-of-life, dignity, and self determination. As a key part of this work, Dr. Bruce Vladeck facilitated a DDDM learning collaborative, led a sustainability analysis, and the development of the patient and family experience evaluation.

ENGAGING CALIFORNIA FAMILY CAREGIVER PROJECTS IN POLICY AND COMMUNICATION WORK

Alzheimer’s Association Southern California Chapter,
Asian Community Center of Sacramento Valley, Inc.
Southern Caregiver Resource Center
$99,999 for 12 months

These projects were part of a larger Foundation initiative focused on developing advocates for caregivers of persons with Alzheimer’s and other dementias. This work built upon a current initiative supported by the Harry and Jeanette Weinberg Foundation - Family and Caregiver Informal Support Program.

HIGHLIGHTS OF THE 2011 ANNUAL CONFERENCE

Grantmakers in Aging $5,000 for 5 months

In collaboration with other aging-focused philanthropies, The Foundation supported Grantmakers in Aging’s effort to summarize important program and policy highlights from its 2011 Annual Conference.
REAL CHOICE SYSTEMS CHANGE GRANT TO BUILD A SUSTAINABLE HOUSING PARTNERSHIP FOR THE STATE OF CALIFORNIA

Mildred Consulting Group

$5,000 for 2 weeks

Mildred Consulting and Advocacy assisted the California Department of Health Care Services in submitting a proposal to the Centers for Medicare and Medicaid Services. The project’s goal was to develop sustainable partnerships with the state housing agency that result in long-term strategies to provide permanent and affordable rental housing for people with disabilities receiving Medicaid-funded home- and community-based services.

SENIOR ORAL HEALTH TRAINING IN LONG-TERM CARE FACILITIES

California Dental Association

$30,000 for 12 months

This project allowed the California Dental Association to use a recently developed oral health curriculum for caregivers to train and mentor staff at 50 nursing homes in Los Angeles County to improve their oral health practices for their residents. This project was co-funded by the Archstone Foundation.

TRIP-OC (TRANSPORTATION REFERRAL INFORMATION PROGRAM- ORANGE COUNTY)

OneOC-WECARE Collaborative

$112,920 for 12 Months

The WECARE (Working to Enhance Care and Resources for Elders) collaborative of Orange County replicated and evaluated the volunteer-based TRIP program for seniors in their county. The TRIP model is a scalable, culturally and linguistically appropriate, and cost effective approach to addressing the transportation needs of non-driving seniors.
**Financial Statements**

**Statements of Financial Position as of December 31, 2011 and 2010**

<table>
<thead>
<tr>
<th>Assets</th>
<th>2011</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CURRENT ASSETS:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and cash equivalents</td>
<td>$ 7,604,072</td>
<td>$ 5,181,495</td>
</tr>
<tr>
<td>Investments</td>
<td>179,590,424</td>
<td>190,237,379</td>
</tr>
<tr>
<td>Interest and dividend receivables</td>
<td>425,469</td>
<td>462,629</td>
</tr>
<tr>
<td>Prepaid expenses and other current assets</td>
<td>27,102</td>
<td>70,810</td>
</tr>
<tr>
<td><strong>TOTAL CURRENT ASSETS</strong></td>
<td>$187,647,067</td>
<td>$195,952,313</td>
</tr>
<tr>
<td><strong>PROPERTY AND EQUIPMENT—NET</strong></td>
<td>432,710</td>
<td>562,163</td>
</tr>
<tr>
<td><strong>INVESTMENTS</strong></td>
<td>214,637</td>
<td>146,351</td>
</tr>
<tr>
<td><strong>DEPOSITS AND OTHER ASSETS</strong></td>
<td>16,191</td>
<td>16,191</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>$188,310,605</td>
<td>$196,677,018</td>
</tr>
</tbody>
</table>

| Liabilities and Net Assets | | |
| **CURRENT LIABILITIES:** |           |           |
| Accounts payable and accrued expenses | $ 181,976 | $ 468,444 |
| Accrued payroll and related benefits | 414,507 | 288,685 |
| Grants payable | 3,651,944 | 3,489,338 |
| Due to parent and affiliates | 5,032,946 | 65,148 |
| **TOTAL CURRENT LIABILITIES** | 9,281,373 | 4,311,615 |
| **COMMITMENTS AND CONTINGENCIES** |           |           |
| **DEFERRED COMPENSATION** | 214,637 | 146,351 |
| **GRANTS GRANTS PAYABLE** | 647,278 | 1,271,345 |
| **TOTAL LIABILITIES** | 10,143,288 | 5,729,311 |
| **NET ASSETS** | 178,167,317 | 190,947,707 |
| **TOTAL** | $188,310,605 | $196,677,018 |
## Statements of Activities and Changes in Net Assets for the Years Ended December 31, 2011 and 2010

<table>
<thead>
<tr>
<th></th>
<th>2011</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NET REVENUES - INVESTED INCOME</strong></td>
<td>$ 9,762,612</td>
<td>$ 8,606,832</td>
</tr>
<tr>
<td><strong>OPERATING EXPENSES:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grants donation expense</td>
<td>5,468,179</td>
<td>3,771,040</td>
</tr>
<tr>
<td>Program expense</td>
<td>4,036,007</td>
<td>2,504,684</td>
</tr>
<tr>
<td>General and administrative expense</td>
<td>1,449,014</td>
<td>2,378,687</td>
</tr>
<tr>
<td>Depreciation and amortization</td>
<td>133,106</td>
<td>132,396</td>
</tr>
<tr>
<td><strong>TOTAL OPERATING EXPENSES</strong></td>
<td>11,086,306</td>
<td>8,786,807</td>
</tr>
<tr>
<td><strong>CHANGE IN NET ASSETS FROM OPERATIONS</strong></td>
<td>(1,323,694)</td>
<td>(179,975)</td>
</tr>
<tr>
<td><strong>UNREALIZED GAIN ON INVESTMENTS—NET</strong></td>
<td>(11,456,696)</td>
<td>10,551,197</td>
</tr>
<tr>
<td><strong>INCREASE IN NET ASSETS</strong></td>
<td>(12,780,390)</td>
<td>10,371,222</td>
</tr>
<tr>
<td><strong>NET ASSETS—BEGINNING OF YEAR</strong></td>
<td>190,947,707</td>
<td>180,576,485</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>$178,167,317</td>
<td>$190,947,707</td>
</tr>
</tbody>
</table>
BOARD OF DIRECTORS AND STAFF

Board of Directors 2011

Tom Higgins, Chairman
Nicholas Augustinos
Colleen Cain
Bruce A. Chernof, MD
Jennie Chin Hansen, RN, MS, FAAN
Ivelisse R. Estrada

Tom McDaniel
Patrick Seaver
Paul Torrens, MD, MPH
Ryan M. Trimble, DDS
Chris P. Wing

Executive Staff

Bruce A. Chernof, MD
President &
Chief Executive Officer

René Seidel, Soz. Paed. (FH)
Vice President,
Programs and Operations

Gretchen Alkema, PhD, LCSW
Vice President,
Policy and Communications

2011 Officers

Randy Stone
Chief Financial Officer

Douglas Jaques, JD
General Counsel
Program Staff

Victoria Ballesteros
Director of Communications

Karen Scheboth, MS, CRA
Director of Grants Administration

Eric Thai, CPA
Director of Finance

Athan G. Bezaitis, MA, MPW
Communications Specialist

Lisa R. Shugarman, PhD
Director of Policy

Erin Westphal, MS
Program Officer

Kali Peterson, MS, MPA
Program Officer

Sarah S. Steenhausen, MS
Senior Policy Advisor

Keyla Whitenhill, MPH
Policy Analyst

Administrative Staff

Gina Alferez
Executive Assistant

Susan Doles
Executive Assistant
Photos provided by Alzheimer’s.org, Health Trust, and Sutter Health.