



A Five-Year Plan for Meeting the Needs of a Growing Senior Population in Placer County

Submitted by Placer County Health and Human Services
September 2016

Table of Contents

Introduction.....	1
A Growing Demographic.....	2
Needs Assessment.....	3
Communication and Information.....	5
Transportation.....	5
Housing.....	5
Community and Health Services.....	6
Social Participation.....	6
Respect and Social Inclusion.....	7
Civic Participation and Employment.....	7
Outdoor Spaces and Buildings.....	7
Current Status in Placer.....	8
Communication and Information.....	8
Transportation.....	9
Housing.....	10
Community and Health Services.....	11
Social Participation.....	11
Respect and Social Inclusion.....	12
Civic Participation and Employment.....	12
Outdoor Spaces and Buildings.....	12
Recommendations and Implementation Plan.....	13
Conclusion.....	25
Bibliography.....	26

Introduction

This plan was created to respond to the growing older adult population in Placer County. The initial emphasis was on developing a 5 year plan for addressing the needs of seniors and disabled individuals in Placer County by researching and promoting a method, such as the Aging and Disabilities Resource Connection (ADRC) or other appropriate model, to consolidate services and establish a single point of entry for long term services and supports. This document includes an overall description and simple analysis of the growing older adult demographic, a needs assessment including sources and methods used to gather the information, current status in Placer County of efforts to respond to the identified needs, and recommendations to move Placer County forward in addressing the growing senior population. The recommendations and implementation plan are intended to form a dynamic document that will be informed by ongoing community participation.

In the process of gathering information through research and community presentations, several other ideas arose that focus on long term community development and environmental strategies as well as some innovative ways to address the impact of the increasing percentage of older adults while helping these seniors remain active and engaged in their communities. Ideas incorporated into the recommendations include: 1) reviewing and possibly altering building codes, 2) considering innovative housing ideas such as pod villages, developments that allow older adults independent living while offering housing solutions for college students or young working adults, 3) developing a coordinated effort at engaging and utilizing volunteers, 4) increasing available shaded seating in our communities and 5) installing buttons at bus stops and other gathering locations with recorded information on resources, services and events.

According to the World Health Organization (WHO), a key strategy to facilitate the inclusion of older persons is to make our communities more age-friendly. Age-friendly communities enable people of all ages to actively participate in their community and treat everyone with respect, regardless of their age or level of ability. Such communities make it easy for older people to stay connected to people that are important to them. They encourage people to stay healthy and active even at the oldest ages and provide appropriate support to those who can no longer look after themselves.

In 2000, The American Association of Retired Persons (AARP) published *Livable Communities: An Evaluation Guide* to assist older Americans in evaluating their communities. This guide was updated in 2005. Focus groups in several communities were asked to develop elements that they felt characterized a community as older adult friendly. Focus group participants were selected to represent a range of interests, economics, and experiences. Despite their diversity, the lists were remarkably similar and resulted in the identification of specific domains to consider. In 2006 WHO developed the Global Age-Friendly Cities Project. This project brought together thirty three cities from around the world that were interested in supporting healthy aging by becoming more

age-friendly. These cities also utilized focus groups to directly gather input from seniors, senior-care providers and other groups and individuals with an interest in age-friendly communities. The project sought to determine:

- What are the age-friendly features of the community they live in?
- What problems do they encounter?
- What is missing from their community that would enhance their health, participation and security?

This information was combined with the previous work done through AARP to identify eight key domains of community life which can be used to define communities as age-friendly. Age-Friendly communities are not a new concept for Placer County. In 2011 the City of Roseville's Senior Commission led the effort that resulted in Roseville being deemed a WHO age-friendly city.

The World Health Organization's (WHO) eight domains were used as a framework to assess age-friendliness and inform how Placer County can best address the growing senior population. Needs assessment data and community input collected was sorted into and will be reported through the lens of these eight domains: Communication and information, Transportation, Housing, Community and Health Services, Social Participation, Respect and Social Inclusion, Civic Participation and Employment, Outdoor Spaces and Buildings.

A Growing Demographic

When discussing seniors or older adults, the determining age to define someone as senior is not consistent. Individuals qualify for AARP services at age 50 yet most services and entitlements for seniors, such as Medicare, are not accessible until age 65. Although the specific age determination that qualifies one as a senior or older adult is not significant to the implications and information provided in this document, the determinant age for any demographic information used will be identified in context.

The term Silver Tsunami has been used to describe the increasing aging demographic across this country. In 2011 the oldest baby boomers turned 65 and 10,000 more Americans turn 65 each day. Some of the largest growth is in the higher age ranges with individuals over 85 increasing 143% from 2013 to 2014. California Department of Finance statistics show that the Placer County's population grew 5.5% during the five year period from 2010-2015. The over 50 population grew at a rate of 16%. The growth in population of those over 60 was 20% and the largest growth occurred for those over 80 with a 21% increase during this same time period.

It is projected that by 2030 California seniors requiring some level of assistance with daily living will be over a million, more than two times the current level. The vast majority, 88%, of these individuals will be in community settings, not assisted living, and the

largest growth will be for those that were never married and have no children. These individuals will rely on their communities to keep them engaged, healthy and safe.

It is also important to consider household incomes and where older adults are located when considering how best to address the needs of this population. Using Esri's ArcGIS database systems, the Agency on Aging Area 4 (AAA4) was able to create geographically specific data correlating age, income and disability status. According to this data, 37 percent of Placer County citizens over 50 live in rural or unincorporated areas, 30 percent live in the city of Roseville, 13 percent in Rocklin and Lincoln respectively, 5 percent in Auburn, 2 percent in Loomis and 1 percent in Colfax. While the median age in the Tahoe region is lower than other parts of the county, the percentage of individuals over 50 is consistent with the county overall. The 2015 mean household income for individuals 65-74 is \$61,320, 17% lower than the overall county median of \$73,747, but on par with the statewide overall median income of \$61,489. Approximately half of those ages 65-74 have an income under \$50,000, and 28 percent have an annual income over \$100,000. Approximately fifteen percent of individuals ages 55-74 have annual incomes under \$25,000 and that goes up to twenty-five percent for those 75 and over.

Needs Assessment

Information to complete this report was compiled from many sources including the California State Plan on Aging, California Department of Finance statistics, United States Census data, Public Policy Institute of California and local community input. Over the last year, Placer County Health and Human Services Department (HHS) staff had focus group conversations with community groups including Placer Consortium on Housing and Homelessness, Placer County substance use provider meeting, Placer County visually impaired group, Community Agency Multi-disciplinary Elder Team (CAMEE) and Foresthill, Weimar-Applegate-Colfax, North Auburn, Newcastle-Ophir and Meadow Vista Municipal Advisory Committees to get input from the communities regarding their understanding of the needs and existing resources for older adults and suggestions for improvement. Over 200 people participated in these discussions from all areas of the county. All age groups were represented with the majority of responses from those in their 60's. These conversations will continue in the year ahead with ongoing efforts to inform recommendations. In addition to in-person focus groups, a short online survey was developed and offered through the county website and social media to gather input on existing resources, needs and suggestions from the general citizenship.

It is important to note that Placer County is made up of several unique somewhat isolated communities, often with diverse resources and needs. The Tahoe basin in particular must be considered separately from other communities in the county. Tahoe is geographically isolated from the Western areas of the county and is a community where two counties and two states converge; requiring unique and creative methods to serve this community. The data used to develop this plan included surveys

and forums from the Tahoe region which showed that the prioritization of needs for older adults are similar to the rest of the county, however, since the climatic and geographical characteristics of the Tahoe region combine with a large percentage of seasonal inhabitants to impact available supports, some recommendations may be unique to this region. Further assessments of the Tahoe region in coordination with Nevada County will be a priority for the coming year.

Placer County HHS has taken an active role in the AAA4 Community Centered planning approach by participating and gathering information on community needs and existing resources and services through town hall meetings in Auburn, Truckee and Roseville. AAA4 also conducted a countywide online and paper survey-based needs assessment for older adults, caregivers, family members and service providers. Over 400 surveys were completed. The data from these surveys has not yet been compiled. Once completed that information will be reviewed and incorporated as appropriate.

In addition to the ongoing focus groups and data analysis, HHS staff actively participates in monthly Older Adult Advisory Commission meetings and events and is a member of the Placer County Aging and Disability Resource Connections (ADRC) steering and advisory committees. HHS staff participated in community meetings addressing the feasibility and planning for a Multi-Generational Center. HHS coordinated with the District Attorney and CAMET to host the first Placer County Elder Abuse Awareness Event to help increase community awareness of elder abuse. All of these connections help to continue identifying needs and keep the focus on coordinated efforts to address the needs of the older and disabled populations in Placer County.

In 2008 Millennium Advantage was contracted to conduct the Placer County Older Adult Needs Assessment. Their assessment included a written survey distributed through 26 distribution sites, interviews with 30 individuals and 25 services providers and visits to 3 senior centers and 20 adult communities. 1070 of the surveys were returned and aggregated with the interviews and online research. "This survey found that Placer County older adults, for the most part, are healthy, thriving, and socially active, although about 1 in every 10 older adults says that a disability or health condition limits their ability to live as actively as they would like. Regardless of health limitations, they all still want to maintain their independence and want help that will allow them to do so."

The 2008 report included summary recommendations that were categorized as Community Resources, Social Activities, Transportation, Housing or Health and Safety and included specific strategies for increasing clarity and access to information in multiple formats, expanding social activities throughout the county or increasing transportation to access existing programs, expanding volunteer driving programs and ride-sharing options, expanding existing handyman and home modification programs and offering classes for independent living, cognitive stimulations, commuters and exercise programs. For the purpose of inclusion in this plan, the identified needs and subsequent recommendations from their report have been converted to the appropriate World Health Organization domain.

In this next section the identified needs are summarized and arranged according to WHO's eight domains. Each domain represents information from both County and community resources.

Communication and Information

A predominant recurring theme is the lack of readily available accurate information about services and the eligibility requirements for each. Specifically, access to information about the options for home care, medical support and transitioning from independent living were identified as well as information on existing transportation and social activities. Respondents reported that they would like to see one source for clear, accurate information on services and that this information should be available verbally via one centralized number such as 211 as well as written and on-line. Many of the respondents were aware of Seniors First information and referral but were not aware of several of the programs available through that organization such as meal delivery and volunteer transport services. Although some people were aware of the online Network of Care and the information available through that resource when HHS staff discussed it, none of the community members recalled it spontaneously.

Transportation

Lack of transportation options, particularly in the rural areas, was identified as a barrier to social engagement, health and living independently. Most participants were not aware of all of the options for transportation and those that were reported they are too limited and cannot be accessed by individuals living in the more rural areas. Lack of information as well as stigma and pride issues were identified as further barriers to individuals seeking alternative transportation.

Housing

Affordable housing is an issue throughout Placer County and this was echoed in each of the discussions as a primary need to support older adults in remaining healthy, vibrant and independent. Placer County currently has a vacancy rate of 1.7% and when we include the specific needs of older adults such as proximity to services, low maintenance, and increased safety features the options decrease. There are senior living facilities in Placer County yet they are not even sufficient to serve the current need. Many are not available for individuals on limited incomes and those that are have significant waiting lists.

Community and Health Services

Availability and affordability of adequate in-home care was a consistent theme. Another concern that was reflected in all of the community conversations so far was difficulty in finding information about healthcare and in-home care options and transitional care when older adults reach the point where they are no longer able to remain in home. The recommendation is to develop a comprehensive resource for levels of care from in-home to skilled nursing options that includes eligibility, insurance coverage and costs. Support for existing caregivers was also identified as an area for improvement. Needs identified included training to insure caregivers adequately understand their role and are able to competently complete tasks easily, as well as respite and emotional support for family members caring for their loved ones. Access to health care was also a concern for individuals in the more rural areas of the county; this need is best addressed through increased transportation flexibility.

Social Participation

The opportunity to engage in activities that offer personal enjoyment, intellectual stimulation, social satisfaction, and a sense of community are important aspects of healthy aging. The Corporation for National and Community Service found that while volunteering at any age provided positive benefits, volunteering among adults 60 and older provided physical and mental health benefits that were not found in younger adults who volunteered.

Data from the 2008 needs assessment indicated that "the majority of respondents are socially active, getting together with other people daily (24%) or several times a week (40%). Most socialize with family and friends (74%) and participate in a wide variety of activities, including clubs, churches, senior centers, and classes. One in three considers helping family and others as an opportunity for socializing.

Volunteering supports both the volunteer and the agency or recipient of the service provided. The majority of Placer County's older adult population is active and interested in volunteering. Research also indicates that older adults gain increased value by assisting other older adults in remaining independent and active. Volunteers indicate their greatest hesitation in volunteering is not being clear on the expectations prior to committing. Interviews and research indicate a need for a more coordinated process for recruiting, training and supporting volunteers.

Respect and Social Inclusion

This category relates to the stigma and overall social image applied to older adults. Indicators of respect and inclusion of older adults include that they are actively engaged in activities, and their opinions and input is actively sought out and incorporated into, decision-making about community efforts.

Marketing of social activities should include non-stereotypical images of older adults. Feedback from focus groups and research do not indicate this is a significant issue in Placer County. Some older adults did indicate a sense that they are seen as less useful. The recommendations are to verify inclusion of older adult representation in all community workgroups and planning commissions and to pursue a media campaign that emphasizes the value and contributions of older adults.

Civic Participation and Employment

A great concern of many older adults is financial stability that allows them to remain independent in their homes. Access to ongoing employment opportunities also allows for social engagement. A need for a more coordinated effort to support employment of older adults and market opportunities to this population was discovered during this assessment. Recommendations include having an older adult representative on the Workforce Investment Board and increasing coordination with the Business Advantage Network to market appropriate opportunities. Residents over 60 are eligible for the Mature Edge Job Readiness Program through AAA4, however, none of the individuals interviewed or surveyed was aware of this resource. Older adults in Placer County have many opportunities to engage in civic groups and committees, however, information about how to apply and participate as well as the requirements and expectations of these councils and committees is not well known. Including these options in a coordinated volunteer recruitment and placement system is recommended to increase participation. Recommendations also include looking into how information is transferred between policy making bodies and older adult populations.

Outdoor Spaces and Buildings

Needs around buildings and outdoor spaces include increased access to safe walkways and shaded seating in public areas throughout the county and consideration of older adult needs in all new construction. Some specific areas of concern included the highway 49 interchanges with Bell Rd and Elm Ave where many older citizens walk to retail services and there is inadequate sidewalk and no shading available. Other recommendations included shaded seating in shopping areas. One individual commented that while there were benches available in many locations, they were metal or cement and therefore not usable in

hot or very cold weather. Additional recommendations were better access to existing trails and outdoor spaces by ensuring smooth wide pathways.

Current Status in Placer

Placer County has several community groups and coordinated efforts taking place that support the recommendations for addressing this demographic. The Older Adult Advisory Commission (OAAC) meets monthly to discuss older adult issues and is tasked with making recommendations to the Board of Supervisors to improve services and activities for older adults in Placer County. The Older Adult Collaborative (OAC) meets monthly to discuss issues and services pertinent to aging; their membership is primarily for-profit businesses that serve older adults. Community Agency Multidisciplinary Elder Team (CAMET) is coordinated through the District Attorney and Adult Protective Services and focuses on preventing and addressing issues of elder abuse. This group brings law enforcement and service providers together to increase communication, identify gaps and improve service delivery and response to elder abuse. Other collaborative groups such as the Campaign for Community Wellness (CCW) and Placer Collaborative Network (PCN) bring together community and government organizations to coordinate care and resources around mental health and community service delivery. Placer Consortium on Homelessness (PCOH) meets monthly to address issues of homelessness and housing concerns. Some organizations, including HHS, are represented at each of these groups. The ongoing challenge is how to coordinate the information between these efforts and get direct input to and from the general older adult population. Placer County has existing services, supports and opportunities to build on in each of the eight domains for age-friendly communities:

Communication and Information

Seniors' First was identified in the 2008 needs assessment and by at least one participant at each of the recent community meetings as the primary sources of information for senior resources and services in Placer County. Their information and referral specialists, available Monday through Friday, are equipped to respond to individuals, caregivers, family members or other interested citizens assisting seniors on a variety of topics including care options, transportation, counseling, financial assistance, assistive devices, utility discounts, subsidized housing and more. In September 2015, Placer County's Older Adult Advisory Commission hosted a forum to discuss the implementation of an Aging and Disability Resource Connection in our county. This resulted in the newly developed and actively engaged Aging and Disability Resource Connection (ADRC) advisory committee, which includes a representative from Seniors First and HHS, working to assess if the ADRC model makes sense for Placer and how it

could best be implemented. One of the goals of the ADRC model is ease of access to services through a No Wrong Door system. Even if an ADRC proves not the right model for Placer County, some form of coordinated No Wrong Door centralized contact where seniors and families can get answers clearly and simply is recommended.

Feasibility for implementing a 211 system in Placer County has been ongoing for several years. 211 could provide the centralized point of contact for information. If a 211 system is adopted, the recommendation is that the information provided is more comprehensive than a phone number, that any referrals include information on eligibility requirements and any costs or restrictions for services.

Placer County has offered an online Network of Care service for several years. This model provides the referral information requested by the community including hours of operation, eligibility requirements and contact information. As noted prior, none of the community groups or individuals mentioned this as a resource during the discussions. When the presenter shared this resource to the groups, only those agencies included in the listings indicated awareness. For this to be a viable source of information, there needs to be increased marketing to the general public. Additionally, many seniors indicated reliance on technology as a barrier to accessing information. While most stated they use the internet, they also indicated it was not helpful to them in getting real information and that they often struggled to maneuver through websites.

The OAAC has a monthly Seniors Need to Know article in several local papers. Articles are based on current issues or events, but could be expanded or utilized to promote existing resources and any ongoing campaigns supporting seniors access to services and information.

Transportation

As indicated, transportation is considered a high need in every discussion or report. Despite this, there is a good foundation of options for transportation in Placer County. Public transportation in the cities of Roseville and Auburn and close surrounding areas, while limited on evenings and weekends, appears to meet the needs of most. Adequate public transport is available in the Tahoe region as well, in fact, the Tahoe Transportation District recently became eligible for increased federal funding. The challenges in accessing these services are similar throughout the county. For those in more rural areas or that cannot get to bus lines, Dial-a-Ride can offer some assistance in the Western areas of the county. Challenges reported with this system are the requirement for pre-notice, limitations on service areas, and not staying on schedule so older adults may be waiting for more than an hour without notification or appropriate accommodations for waiting. Health Express can assist in accessing non-emergency medical appointments only, also requires pre-approval for eligibility, and is limited to M-F until 4:30. In many areas of the county, My Rides is

an option that uses volunteer drivers to provide free transportation services to non-emergency medical appointments and other essential services for eligible Placer County residents. Challenges still exist for older adults who can no longer comfortably or safely drive to access social opportunities or get out in the evenings or on weekends. Recommendations include expanding the volunteer driver program through a coordinated volunteer system.

Housing

As previously noted, affordable housing in Placer County is a serious issue that is impacting all age groups. Placer County Older Adult Advisory Commission has a housing specific subcommittee and is a representative on the Placer Consortium on Homelessness that is a voice for seniors in addressing this ongoing concern. Several efforts are in process in Placer County to address this issue. Placer County Board of Supervisors recently approved easing restrictions on secondary dwellings, often called "granny units", in most areas of the county in an effort to increase affordable housing within existing residential areas. After several years, work has begun on The Timberline Project in North Auburn. Timberline will be a continuum of care community offering a total of 858 housing units, 90% of which are reserved for seniors. Placer Vineyards is a master planned community that currently plans to add over 14,000 new housing units. It is unclear at this stage how many of these will meet the needs and affordability of older adults. The Dewitt Center Master Plan is in process of being developed and community input has suggested a need for affordable housing to be included.

The North Tahoe Community recently completed a regional workforce housing study. Data was collected from multiple sources including over 1600 employees, 400 employers, focus groups and public forums. Discussions included regulatory policy, workforce needs, and public programs. Results indicate a significant need for increased affordable housing in the area. While the residential vacancy rate is substantially higher than comparison counties, this is primarily due to seasonal rentals and does not provide affordable housing options for the workforce or older adult residents. Data also showed a mismatch in housing stock with the majority of available stock being larger units although nearly two-thirds of local households are only one or two people. There are several housing projects proposed or under development in the area as well as a number of master or area plans under review, which will also impact housing availability. While these are all subject to inclusionary requirements, it is not clear if any of these projects will thoroughly consider older adult access and needs. A primary recommendation of the study is the development of a regional housing council that and regional housing solutions fund to help develop and implement regional strategies to increase available and affordable housing.

Community and Health Services

Like many of the other domains, Placer has some strong foundational resources to address community and health services for older adults. However, many citizens are not aware of these resources, what the eligibility requirements are, or how to access them. Del Oro Caregiver Resource Center offers support for family caregivers. Respite programs to support existing caregivers are held in Lincoln and Auburn. There are several private fee-based homecare agencies and many of them offer free training that is open to the public on topics such as moving and lifting non-mobile individuals. In-Home Supportive Services (IHSS) provides funds for providers to assist elderly and disabled individuals on Medi-Cal to remain independent in their homes. Placer County Public Authority provides training for these IHSS providers. There is a gap in options for in home care for those individuals who do not qualify for Medi-Cal and cannot afford private care. There is also a shortage of willing providers for those who do not have family members willing or able to provide for their care. Recommendations include augmenting training and recruitment for existing programs and working with local schools and colleges to increase possible providers. Limited resources for in home care also exist in the Tahoe area. The availability of entry level service jobs in the area that compete with in home care provider positions, low year round residency rate, and extreme workforce housing issue make it even more challenging to find in-home care providers in Tahoe. Access to general health care was also identified as a significant issue for older adults in the Tahoe region who do not have transportation and resources to access care in Reno or Western Placer County.

The Adult System of Care Older Adult Services coordinator, a practitioner skilled in geriatric social work, provides training and supervision to a team of volunteer Senior Peer Counselors, coordinates care for older and dependent adults accessing multiple services and connects isolated older adults who need a higher level of care to services. As the needs of our senior population is growing, in FY 15-16 and FY16-17 Placer County increased staffing for Adult Protective Services, In Home Supportive Services and Public Authority to better serve and support this growing demographic.

Social Participation

Western Placer County has an active Senior Center in Auburn, Maidu Center in Roseville, Placer Adult School, Community Education classes at Sierra College and many opportunities for ongoing learning and social participation including multiple churches and nonprofit and social groups. These organizations offer a myriad of opportunities to stay active or to volunteer. In the Tahoe region, Sierra Senior Services offers some opportunities for social engagement. The Tahoe Community Foundation supports a variety of social activities for youth in the area and could be a possible resource for greater social participation for seniors as well. The challenge reported is access to consistent and accurate information regarding these programs and opportunities.

Recommendations include a centralized access point such as 211 or an ADRC that includes or connects with coordinated volunteer recruitment, training and oversight. Isolation can be a challenge as seniors age in their homes and begin to have increased limitations. Volunteer programs such as Seniors First's friendly visitors or Adult System of Care's Senior Peer Counselors provide outreach to these isolated seniors in Western Placer County and could possibly be expanded or duplicated to serve Tahoe area seniors.

Respect and Social Inclusion

This was not an area identified by any of the resources used in preparing this report as a specific need in Placer County. In reviewing online marketing for the county or county businesses and activities, older adults were often portrayed with positive, active images. This domain was therefore not prioritized and recommendations center around a possible campaign in the future that would focus on the contributions and ongoing capacity of older adults.

Civic Participation and Employment

Older adults participate in most advisory and decision making bodies in Placer County. The system of Municipal Advisory Councils and multiple advisory commissions within the county and cities allows older adults to have an active voice in civic policy and recommendations. The Older Adult Advisory Commission's mission is to be the voice for seniors in making recommendations to the Board of Supervisors. Many of these commissions and councils have difficulty filling open positions and engaging new members. A coordinated volunteer system and better information dissemination could help increase civic participation.

Data on the employment percentages of older adults in Placer County was not reviewed. This will be included in future updates.

Outdoor Spaces and Buildings

Many communities in Placer County have excellent outdoor spaces for older adults to exercise and engage in their communities. Some parks in Roseville, Meadow Vista, and the Tahoe area have smooth flat trails for walking and many inner city areas in the county have safe sidewalks and seating available. Feedback from community discussions recommends increased consideration for older adult needs in building design particularly in older developments or unincorporated areas of the county.

Recommendations/Implementation Plan

The recommendations and implementation plan is intended to be a dynamic document that will be updated as actions are completed and/or more information comes forward. Many of the recommendations to move Placer towards an age-friendly county require collaboration and efforts on the part of business and civic groups, community agencies and city and county government beyond Health and Human Services (HHS). While these recommendations are identified in the implementation plan, many action steps and timelines beyond engaging the appropriate entities cannot yet be determined at this point. Creating more defined action steps is much of the work to be accomplished in year two.

Additionally, it is helpful to have a committee or commission to oversee the implementation processes. The recommendation is for HHS to support the Older Adult Advisory Commission (OAAC) in taking a more integrated and active role in community planning and advocacy. Commission members are asked to be the voice of Placer County older adults and can do so by taking a lead role in engaging in discussions over the next year to clarify what is possible in our communities, determine action steps and set timelines for implementation. The OAAC would continue to have an active role in monitoring and supporting the progress of implementation.

Placer County 5-Year Plan for Addressing the Needs of a Growing Senior Population Recommendations and Implementation Plan September 2016

1 Communication and Information					
	RECOMMENDATIONS	TIMEFRAME	ACTION STEPS	PARTNERS	HHS ROLE
1.1	Continue to engage community groups through forums and discussions to inform plan	Year 2-5	Schedule focus group presentations at MACS and service groups	OAAC, Community Agencies and Groups, MACs, Community Collaborative of Tahoe Truckee (CCTT)	Find out meeting times and work with OAAC to conduct focused conversations

1.2a	Create a sustainable model for information related to older adults	Year 2-3	Review feasibility of Aging and Disability Resource Connections (ADRC) and 2-1-1 as models for coordinated No Wrong Door service delivery	OAAC, ADRC Advisory Committee, Community Agencies	Investigate and review alternative models for comparison; Participate on ADRC Steering and Advisory Committees; Staff and support the OAAC,
1.2b	Create a sustainable model for information related to older adults	Year 3-4	Provide a cost/benefit analysis of options	OAAC, ADRC Advisory Committee, Community Agencies	Gather information and create report.
1.3	Increase community awareness of how to access information	Year 2	Design press releases that can be sent out and updated regularly to existing publications and social media	Placer County Public Information Officer(PIO) , OAAC, CCW, PCN, CCTT	Coordinate with PIO, Work with OAAC, PCN, CCW and other existing groups to distribute information
1.4	Engage media to promote community events for agencies to network and share information with citizens	Year 2	Design press releases that can be sent out regularly to existing publications and social media	Placer County Public Information Officer(PIO) , OAAC	Coordinate with PIO, Work with older adult community through OAAC on the best methods to receive and distribute information
1.5.a	Increase technological skills and access to technology for older adults	Year 2	Determine action steps and necessary partners	Placer Adult School, Seniors First, Connections	Research existing programs and gaps.

1.5.b	Increase technological skills and access to Technology for older adults	Year 3-5	Offer free classes throughout the county on use of websites	Placer Adult School, Seniors First, Connections	Track Progress
--------------	---	----------	---	---	----------------

2 Transportation					
	RECOMMENDATIONS	TIMEFRAME	ACTION STEPS	PARTNERS	HHS ROLE
2.1	Increase awareness of existing transportation supports and options	Year 2	Design press releases that can be sent out and updated regularly to existing publications and social media	PIO , OAAC, CCW, PCN, CCTT	Coordinate with PIO, Work with older adult community through OAAC on the best methods to receive and distribute information
2.2	Improve Participation of Older Adults in the transit planning process	Year 2-5	Designate an OAAC representative to coordinate with Placer County Transportation Planning Agency (PCTPA)	PCTPA, OAAC	Track progress
2.3	Improve amenities at bus stops-suggestions include: easy to read simple signage, more shaded seating and audio information	Year 2	Determine action steps and necessary partners	OAAC, PCTPA, Community Development agencies, Tahoe Transportation District	Track progress

2.4.a	Address access to public transportation from rural communities	Year 2	Gather information on costs and processes for increasing Dial-A-Ride service areas	OAAC, PCTPA, Community Development agencies,	Track progress
2.4.b	Address access to public transportation from rural communities	Year 2	Consider other options such as neighbors and volunteers	OAAC, Placer County Transit, Seniors First, Health Express, Tahoe Transportation District	Research feasibility of a coordinated volunteer system

3 Housing					
	RECOMMENDATIONS	TIMEFRAME	ACTION STEPS	PARTNERS	HHS ROLE
3.1	Ensure older adult participation in community housing strategies	Year 2	Regular reports by OAAC representative for Placer Consortium on Homelessness and the Housing Authority Senior representation on Tahoe Regional Housing Council	PCOH, OAAC, Housing Authority, Community Development Agency, CCTT, Tahoe Regional Housing Council	Track Progress
3.2.a	Create coordinated list of housing options including level of care, eligibility, costs and ratings if licensed	Year 2	Determine the appropriate lead in creating a resource list with options.	Seniors First, Community Care Licensing, California Dept of Aging, AAA4,	Track Progress

3.2.b	Create coordinated list of housing options including level of care, eligibility, costs and ratings if licensed	Year 3	Gather information, create database/list	Seniors First, Community Care Licensing, California Dept. of Aging, AAA4,	Track Progress
3.3	Increase awareness of choices in housing options for older adults	Year 3- 4	Print, post, distribute list once created.	PIO, designated lead agency	Coordinate with PIO and lead agency, Track Progress
3.4.a	Increase options to assist seniors with homecare and repair	Year 2	Determine what services exist and best avenue/next steps for increasing options	Seniors First, Placer Independent Resource Services (PIRS), AAA4,	Assist in gathering information and researching options including coordinated volunteer system
3.4.b	Increase options to assist seniors with homecare and repair	Year 3	Make specific recommendations to increase options	OAAC, PIRS, AAA4,	Coordinate workgroup to develop and present recommendations
3.5	Increase number of affordable living units with amenities that support older adults	Year 2-3	Determine action steps and necessary partners	PCOH, OAAC, Housing Authority, Community Development Agency, Tahoe Regional Housing Council	Track Progress
3.6	investigate innovative options for multi-generational and alternative living development designs	Year 2-3	Determine action steps and necessary partners	PCOH, OAAC, Housing Authority, Community Development Agency	Track Progress

4 Community and Health Services

	RECOMMENDATIONS	TIMEFRAME	ACTION STEPS	PARTNERS	HHS ROLE
4.1	Increase Caregiver Supports	Year 2	Determine action steps and necessary partners	Seniors First, Del Oro Caregiver Resource Center, AAA4, OAAC, Private home care companies	Research existing programs. Assist in marketing current options. Consider Public Authority hosted trainings
4.2	Develop coordinated list or source of contact for caregivers.	Year 2	Determine the appropriate lead in creating a resource list with options.	ADRC Committee, Seniors First, California Dept of Aging, AAA4,	Track Progress
4.3.a	Increase affordable in home health care options	Year 2-3	Research innovative options such as college students providing care as interns or for room and board	Local Colleges, ADRC, Older Adult Collaborative (OAC), AAA4, OAAC, private home care companies, Hospitals	Research innovative options and work with local groups to consider applicability in Placer
4.3.b	Increase affordable in home health care options	Year 3-4	Determine action steps and necessary partners based on recommendations	Local Colleges, ADRC, OAC, AAA4, OAAC, private home care companies, Hospitals	Track Progress

4.3.c	Increase affordable in home health care options	Year 2-5	Increase available providers through the Public Authority for eligible IHSS recipients	Public Authority, United Domestic Workers	Increase recruitment and training for IHSS registry providers
4.4	Improve community awareness of existing caregiver options	Year 2-5	Design press releases that can be sent out regularly to existing publications and social media	Seniors First, Del Oro Caregiver Resource Center, OAC, AAA4, OAAC, Private home care companies	Coordinate with PIO OAAC, and OAC
4.5	Increase awareness and capacity of coordinated in-home programs like Friendly Visitors, Senior Peer Counselors, Promotoras	Year 2	Design press releases and ongoing methods to get information out to the community and solicit volunteers	PIO, OAAC, OAC, CCW, PCN, Seniors First, CCTT, Latino Leadership Council	Research feasibility of a coordinated volunteer system. Work with PIO and community groups to increase awareness
4.6	Increase awareness and access to prevention and health education programs	Year 2	Determine action steps and necessary partners	OAAC, ADRC, 211, CCTT	Track Progress
4.7	Help seniors understand their healthcare options and choices.	Year 2-5	Support Options Counseling	AAA4, Seniors First, OAAC, 211, ADRC	Track Progress

5 Social Participation

	RECOMMENDATIONS	TIMEFRAME	ACTION STEPS	PARTNERS	HHS ROLE
5.1	Improve access to information about available activities and volunteer opportunities	year 2	Look into options for a coordinated volunteer system and check with agencies on their interest in participating	Community Agencies, ADRC, 211, OAAC, CCTT	Research possible websites or other means to host the database. Determine staffing needs. Check with agencies.
5.2	Involve older adults in the planning of activities and programming throughout our communities	year 2	Determine current level of involvement, necessary partners and action steps if needed	Community Agencies, ADRC, 211, OAAC, CCTT	Research the inclusion of older adults on non-senior specific activities and programming in the county
5.3	Increase the participation of rural and isolated seniors in volunteering and community activities	year 2	Determine best method to get information on opportunities and transportation options to rural and isolated seniors	Senior Center, Multi-generational center planning team, Maidu Center, Sierra Senior Services, OAAC, ADRC, PIO, Sierra Native Alliance, PlacerArts,	Assist in linking partners for communication to determine next steps
5.4	Senior center with various activities accessible to Eastern county residents	year 2-3	Linking rural seniors to existing or future programs is related to transportation and information dissemination	Senior Center, Multi-generational center team, Maidu Center, Sierra Senior Services, PCTPA, PIO, OAAC, ADRC	Participate in planning meetings, Track Progress

6 Respect and Social Inclusion

	RECOMMENDATIONS	TIMEFRAME	ACTION STEPS	PARTNERS	HHS ROLE
6.1	Reduce Ageism	year 3	Develop a campaign to help change the image of older adults and emphasize their contributions and capacity	OAAC, media partners including Placer Public Information Office	Support OAAC and coordinate with PIO
6.2	Increase recognition of older adults contributions to the community	year 3	Develop a campaign to help change the image of older adults and emphasize their contributions and capacity	OAAC, media partners including Placer Public Information Office	Support OAAC and coordinate with PIO
6.3	Older Adult participation on community workgroups and planning groups	year 3	Increase awareness of options for participation through marketing strategies	OAAC, media partners including Placer Public Information Office	Support OAAC and coordinate with PIO

7 Civic Participation and Employment

	RECOMMENDATIONS	TIMEFRAME	ACTION STEPS	PARTNERS	HHS ROLE
7.1	Develop a coordinated volunteer database where individuals can call one place to volunteer and be matched with an appropriate agency	Year 2	Look into options for a coordinated volunteer system and check with agencies on their interest in participating	Community agencies, ADRC, 211, OAAC	Research possible websites or other means to host the database. Determine staffing needs. Check with agencies.
7.2.a	Engage older adults in civic affairs and policy making	Year 2-3	Investigate how information from policy making bodies is disseminated to older adult communities	City Councils, Municipal Advisory Councils (MACS), various commissions, senior housing communities	Coordinate discussions through OAAC, MACS and other community groups. Gather data
7.2.b	Engage older adults in civic affairs and policy making	Year 2-5	Communicate options for engaging to older adults. Increasing OAAC membership and active engagement	City Councils, Municipal Advisory Councils, various commissions, senior housing communities	Work with PIO and OAAC to get information out regarding opportunities to participate in policy making

7.3.a	Improve access to employment for older adults who wish to work	Year 2	Designate an OAAC representative to connect with existing employment programs and ensure older adults are included in employment options	Business Advantage Network, Workforce Investment Board, Connections, OAAC	Support OAAC
7.3.b	Improve access to employment for older adults who wish to work	Year 3-5	Communicate options for employment to older adults by posting strategically	Business Advantage Network, Workforce Investment Board, Connections, OAAC	Work with PIO and OAAC representative to get information out regarding employment opportunities for older adults

8 Outdoor Spaces and Buildings

	RECOMMENDATIONS	TIMEFRAME	ACTION STEPS	PARTNERS	HHS ROLE
8.1	Advocate for consideration of older adults when approving any new construction	Year 2	Make a presentation to CDRA leadership on the growing needs of active aging citizens	Community Development Resource Agency (CDRA), OAAC, PARC	Contact CDRA to coordinate presentation. Assist in presentation
8.2	Bring greater awareness to parks divisions on the needs of active aging citizens	Year 2	Make a presentation to Parks and Grounds leadership on the growing needs of active aging citizens	Facilities/Parks and Grounds, OAAC, community members	Contact Parks Division to coordinate presentation. Assist in presentation

8.3	Advocate for increasing access to parks trails and pathways	Year 2-5	Assign OAAC representative to attend appropriate meetings or provide necessary input	Facilities/Parks and Grounds, OAAC, community members	Determine appropriate methods to get information to decision makers-i.e. written materials or committee representation
8.4	Ensure Older Adult needs are considered in the design and construction of new or repurposed parks.	Year 2-5	Assign OAAC representative to attend appropriate meetings or provide necessary input	CDRA, Facilities/Parks and Grounds, OAAC, community members	Determine appropriate methods to get information to decision makers-i.e. written materials or committee representation
8.5	Review local building ordinances to consider what might support increased access for elder adults	Year 2	Assign an OAAC member to connect to building department to consider a process for review of ordinances	CDRA, OAAC,	Assist in finding an appropriate contact with building department and facilitate conversations
8.6.a	Increase shaded seating in public areas	Year 2	Find out about codes and processes to install benches and shade structures	OAAC, City Councils, Planning Department,	Assist in connecting OAAC representative to code enforcement and planning department
8.6.b	Increase shaded seating in public areas	Year 3-5	Work with shop classes and scout groups to get benches and structures donated and installed	City Councils, Planning Department, high school and Sierra Woodshops, Scout troops	Support Partners in developing plan and track progress

Conclusion

Data and conversations indicate that Placer County older adults want to be active, participate, remain independent and have options for their futures. Some of the reasons they moved to Placer County and appreciate living here include the myriad of outdoor opportunities and our county's unique and safe communities. If we work together we can develop and implement innovative strategies to allow the growing senior population to not just live in Placer County, but to thrive and continue to be a vital part of our economy and communities.

Grantmakers in Aging (GIA), a nonprofit comprised of philanthropies dedicated to improving the experience of aging, conducted a study to understand what principles would contribute to sustainable age-friendly efforts. GIA says: "Sustaining age-friendly efforts requires much more than financial support. It includes establishing enduring and productive partnerships, encouraging existing organizations to incorporate age-friendly activities into their core missions and providing hard data and evaluation findings to document the benefits of age-friendly communities. Sustainability also includes engaging a variety of audiences and constituencies in planning and implementation, and ultimately securing long-term sources of nonfinancial, as well as financial, support."

This participatory approach to sustainable, age-friendly communities is reflected in the implementation plan. Developing and fostering these strategies will require the ongoing efforts of many partners and community members. Placer County HHS is committed to being a part of the solution and will submit an annual update on the progress of the recommendations and implementation plan included in this report.

Bibliography

1. *Active Aging: A Policy Framework*. Geneva: World Health Organization, 2002
http://www.who.int/ageing/publications/active_ageing/en/
2. California Collaborative for Long Term Care Services and Supports
<http://www.ccltss.org/>
3. *California State Plan on Aging 2013-2017*. Sacramento, CA: California Department on Aging
https://www.aging.ca.gov/Docs/About_CDA/California_State_Plan.pdf
4. California Department of Finance
<http://www.dof.ca.gov/>
5. *Global Age-friendly Cities: A Guide*. Geneva: World Health Organization, 2007
http://www.who.int/kobe_centre/publications/age_friendly_cities_guide/en/
6. *Guiding Principles for the Sustainability of Age-Friendly Community Efforts*. Arlington, VA 22202: Grantmakers in Aging, Oct 2015
http://www.giaging.org/documents/160107_Sustainability_Principles.pdf
7. *Livable-communities*. American Association of Retired Persons (AARP)
<http://www.aarp.org/livable-communities>
8. *Livable Communities: an evaluation guide*. Washington, DC, AARP Public Policy Institute, 2005
9. North Tahoe Regional Workforce Housing Needs Assessment, 2016
<http://www.ttcf.net/impact/regional-housing-study/>

10. Placer County Rural Transit Study: Placer County Transportation Planning Agency
11. Placer County Strategic Plan: Older Adults and Substance Use
12. *Planning for California's Growing Senior Population*: Public Policy Institute of California (PPIC) , Aug 2015
<http://www.ppic.org>
13. *Report of Findings Placer County Older Adult Needs Assessment: Granite Bay CA*, Prepared by Millennium Advantage, April 2008
14. *The Dual Challenge: Preserving Services for the Oldest Old Today; Planning for Elderly Baby Boomers Tomorrow*. Sacramento, CA: Area Agency on Aging 4, June 2012
15. *The Health Benefits of Volunteering: A Review of Recent Research*. Washington, DC: Corporation for National and Community Service, 2007.
<http://www.nationalservice.gov/>
16. U.S Census, Current Population Survey, 2015