

**MEMORANDUM**  
**PLACER COUNTY HEALTH AND HUMAN SERVICES**  
**Adult System of Care**

**TO:** Honorable Board of Supervisors

**FROM:** Richard J. Burton, M.D., M.P.H.  
Placer County Health Officer and Director of Health and Human Services  
Maureen Bauman, Director of Adult System of Care

**DATE:** August 5, 2008

**SUBJECT:** 2007 Older Adult Advisory Commission Annual Report and Older Adult Needs Assessment Report

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**ACTION REQUESTED:**

The Older Adult Advisory Commission (OAAC) respectfully requests that your Board accept and approve its 2007 Annual Report, and review and accept the Older Adult Needs Assessment Report.

**BACKGROUND:**

The OAAC was established by the Board of Supervisors in 2004 to provide a voice for older adults in county government and to advise the Board of Supervisors and the Department of Health and Human Services on matters relating to the creation and delivery of services promoting well-being and quality of life for older adults. Commission responsibilities include submitting an Annual Report to the Board of Supervisors on the status of services for older adults.

In July 2007, under the leadership of this Board it was determined that a current and thorough assessment of Placer County older adults' needs be conducted. A joint project Task Force was established with the OAAC, Health and Human Services, Facility Services and the Redevelopment Agency to complete a needs assessment that was timely, comprehensive and specific to Placer County. The Redevelopment Agency provided funding in the amount of \$35,000 to complete this task allowing the needs assessment to be completed without using scarce service dollars dedicated to seniors.

Thus, during much of 2007 the Commission took a leadership role on the Task Force in contracting with Rebecca D. Moore, Millennium Advantage consultant to complete a very successful assessment of Placer County older adults' needs. One component of the needs assessment was distribution of 5,000 surveys through senior housing sites, senior centers, churches, and Placer County In-Home Supportive Services. The survey response rate was a very impressive 21.4%.

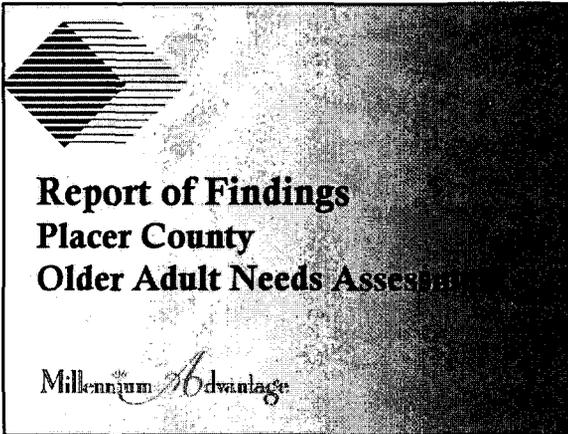
The needs assessment found that Placer County older adults, for the most part, are healthy, thriving and socially active, that they want to maintain their independence, and that they want help that will allow them to remain independent. In addition, older adults responding to the survey anticipated that in five years the issues that would be of most concern for them would include: having sufficient financial resources, the possibility of having to live with a chronic illness, and being able to get the services they would need to stay in their homes.

The next steps include having the OAAC host two-community forums to present the needs assessment results, and taking any additional community input into consideration. Next, the Commission will prioritize the needs and suggested strategies identified in the Needs Assessment Report and explore current and future resources for implementation of the strategies.

**FISCAL IMPACT:**

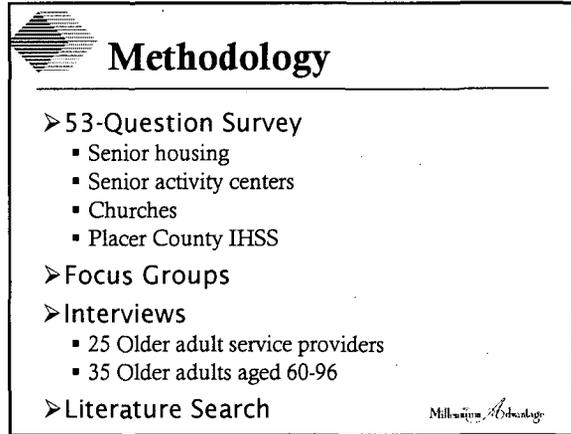
This action has no fiscal impact to the County General Fund.

Copies of the 2007 Annual Report and Older Adult Needs Assessment are on file with the Clerk of the Board.



## Report of Findings Placer County Older Adult Needs Assessment

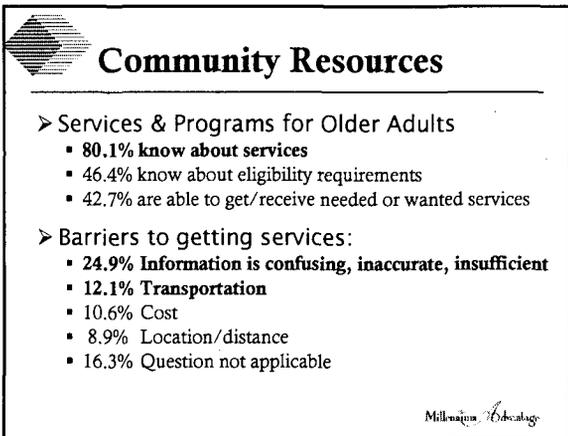
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## Methodology

- 53-Question Survey
  - Senior housing
  - Senior activity centers
  - Churches
  - Placer County IHSS
- Focus Groups
- Interviews
  - 25 Older adult service providers
  - 35 Older adults aged 60-96
- Literature Search

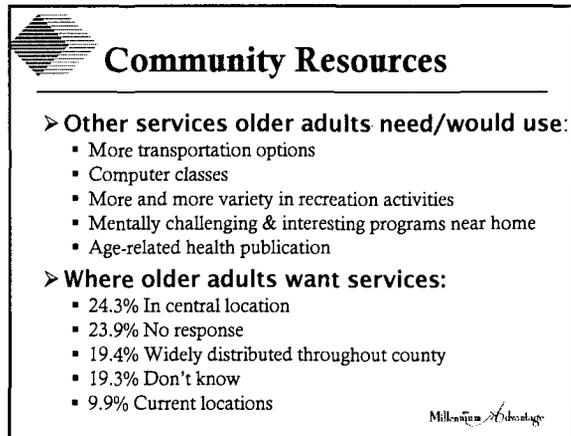
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## Community Resources

- Services & Programs for Older Adults
  - 80.1% know about services
  - 46.4% know about eligibility requirements
  - 42.7% are able to get/receive needed or wanted services
- Barriers to getting services:
  - 24.9% Information is confusing, inaccurate, insufficient
  - 12.1% Transportation
  - 10.6% Cost
  - 8.9% Location/distance
  - 16.3% Question not applicable

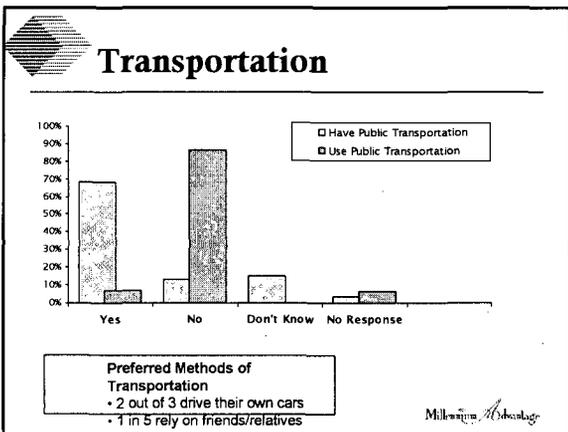
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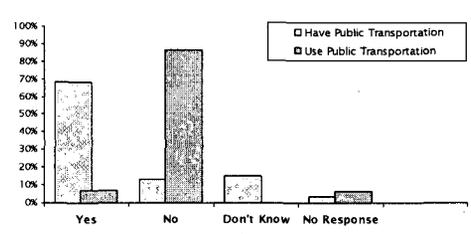
## Community Resources

- Other services older adults need/would use:
  - More transportation options
  - Computer classes
  - More and more variety in recreation activities
  - Mentally challenging & interesting programs near home
  - Age-related health publication
- Where older adults want services:
  - 24.3% In central location
  - 23.9% No response
  - 19.4% Widely distributed throughout county
  - 19.3% Don't know
  - 9.9% Current locations

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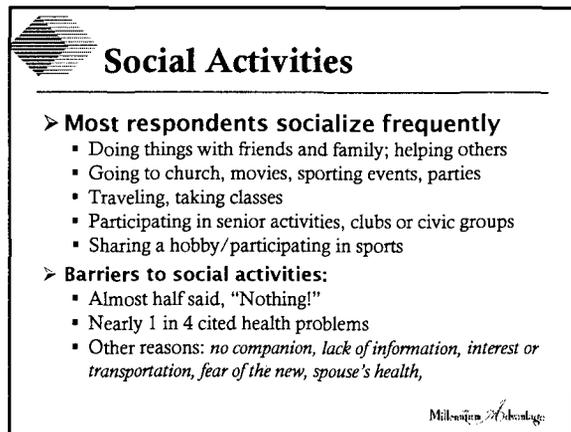
## Transportation



Response	Have Public Transportation (%)	Use Public Transportation (%)
Yes	~65%	~10%
No	~85%	~15%
Don't Know	~15%	~5%
No Response	~0%	~10%

Preferred Methods of Transportation  
 • 2 out of 3 drive their own cars  
 • 1 in 5 rely on friends/relatives

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## Social Activities

- Most respondents socialize frequently
  - Doing things with friends and family; helping others
  - Going to church, movies, sporting events, parties
  - Traveling, taking classes
  - Participating in senior activities, clubs or civic groups
  - Sharing a hobby/participating in sports
- Barriers to social activities:
  - Almost half said, "Nothing!"
  - Nearly 1 in 4 cited health problems
  - Other reasons: *no companion, lack of information, interest or transportation, fear of the new, spouse's health,*

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## Health & Safety

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- **Exercise**
  - More than 70% exercise regularly
    - walk, jog, aerobics, sports, classes
  - They exercise at home, community/senior center, private or public facilities
- **Barriers to Exercise**
  - Health problems
  - Don't like it
  - No companion

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## Housing

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- **Number of years in current community**
  - 68.5% for 10 years or less
- **Housing Information**
  - 80% are content w/current housing/living situation
  - 56% live in senior communities
  - 48.3% live alone
  - 55% live in houses
  - 33% live in apartments or condominiums
  - 54% own their homes
  - 36% rent their homes

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## Future Needs & Issues

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- **Issues of Most Concern in 5 Years**
  - Having sufficient financial resources
  - Having to live with a chronic illness
  - Getting services to stay in own home ("age in place")
- **Anecdotal comments**
  - *"I live for today. I don't worry about next year, not even next week."*
  - *"The future is unpredictable, so I will continue to exercise ...take supplements...and avoid foreseeable medical issues."*
  - *"... keeping social contacts and staying active."*

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## Conclusions

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- **Four Recurring Themes**
  1. **Information:** easy, accessible descriptions of services, activities and issues
  2. **Independence:** self-sufficiency and self-determination
  3. **Social Interaction:** fun, intellectual stimulation, sense of community
  4. **Recognition of Worth:** still making a contribution

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## Next Steps

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**The Commission Will:**

- Host two community forums to present the needs assessment results.
- Prioritize the needs and suggested strategies identified in the report and explore current and future resources for implementation of the strategies.
- Report on these activities in the 2008 Annual Report.

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*"...consider the qualities that aging develops  
 in wines, whisky, antiques and cheese  
 and then look for comparable qualities that age develops in people.  
 While age brings challenges, it also brings rewards—  
 the depth and richness of experience, the complexity of beliefs,  
 serenity, and wisdom as well as its own power and grace."*

Dr. Andrew Weil  
 Healthy Aging

