Meeting Basic Needs

“Aging in Place”

April 1, 2013

Washoe County Commission Chambers
WCSS Mission Statement

• The mission of the Senior Services Department is to assist older adults in the community to maintain independence, dignity, and quality in their lives and that of their caregivers, by providing an array of direct and indirect social, legal and health services and opportunities.
## Mandates

- **County Code “Public Welfare” 45.400 – 45.490**
- **Senior Citizens 1 cent *ad valorem Property* Tax Fund**
  - 1986 voter-approved ballot measure
- **WCSS provides services mandated by NRS and Older Americans Act**
  - WCSS bids competitively on grants/RFP’s published by Nevada Aging and Disability Services Division, which is given authority by NRS 427A to develop and implement the “*State Plan for Providing Services to Meet the Needs of Older Persons*”
  - Older Americans Act, Public Law 109-365
Notable

• Growing Partnerships
  – Senior Coalition
  – Veterans Services/Outreach

• Increasing diversity
  – 31.5% “new” clients are member of a minority group

• Higher risk clients
  – Waiting lists for services
  – Increasing care needs
  – 43% HDM clients report service is only meal of day
FY 2013-14 Priorities

• Sustainability

• Master Plan for Senior Services
  – Collaboration, partnership, roles

• Strategic Goals
  – Serving the most vulnerable
    • Independence, Dignity and Choice

• Single Human Services Agency
Senior Services Functional Chart

**Director**
- Administration (Sup: AAII)
  - Budget, Grants Mgmt
  - Purchasing, contracts, A/R, A/P
  - Central Reception, systems and data support, facilities, equip., risk, operations
  - Legal Services, Nutrition, Pantry, Volunteers, Reno, Sparks, Sun Valley Centers

- **Social Services** (Sup: Soc. Serv. Sup.)
  - Social Workers
  - Info, Referral & Advocacy, Mental Health, Visiting Nurse
  - Eligibility – Home Care, HDM
  - Representative payee, Emergency services
  - Spec Programs: MDT, NH Diversion

- **DayBreak** (Sup: PHN Supervisor)
  - SW and RN Assessments
  - Daily Plan of Care; RN oversight
  - Direct Care

- **WCSS Advisory Board**
Legal Services

• Collaboration with Nevada ADSD
  – New contractor in place by July 1, 2013

• Maintain County standards
  – Home visits; extra time for interviews; planning to meet future needs

• Ongoing in-kind and financial support
  – Subject to negotiation and County requirements
<table>
<thead>
<tr>
<th>Sources</th>
<th>FY 2013/14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opening Fund Balance</td>
<td>$265,766.00</td>
</tr>
<tr>
<td>Property Tax</td>
<td>$1,225,217.00</td>
</tr>
<tr>
<td>Intergovernmental</td>
<td>$1,044,730.00</td>
</tr>
<tr>
<td>Charges for Services</td>
<td>$373,900.00</td>
</tr>
<tr>
<td>Miscellaneous</td>
<td>$37,500.00</td>
</tr>
<tr>
<td>General Fund Transfer</td>
<td>$917,466.00</td>
</tr>
<tr>
<td>Total Revenue and Sources</td>
<td>$3,864,579.00</td>
</tr>
</tbody>
</table>
## FY 2013/14 Initial Projected Budget

<table>
<thead>
<tr>
<th>Uses</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries and Wages</td>
<td>$1,294,237.00</td>
</tr>
<tr>
<td>Employee Benefits</td>
<td>$552,468.00</td>
</tr>
<tr>
<td>Services and Supplies</td>
<td>$1,999,562.00</td>
</tr>
<tr>
<td>Subtotal Expenditures</td>
<td>$3,846,267.00</td>
</tr>
<tr>
<td>Ending Fund Balance</td>
<td>$18,312.00</td>
</tr>
<tr>
<td>Total Expenditures and Other</td>
<td>$3,864,579.00</td>
</tr>
<tr>
<td>Uses</td>
<td>Amount</td>
</tr>
</tbody>
</table>

Total Expenditures and Other Uses $3,864,579.00
Initial Budget FY 2013/14 Expenditure by Program $3,864,579

- Adult Daycare 16%
- Nutrition 24%
- Legal 2%
- Admin Support 18%
- Social Services 22%
- Overhead 18%
Initial Projected Budget FY 2013/14

- Initial Budget: $1,400,000.00
- Projected Budget: $800,000.00
- Budget: $1,000,000.00
- Budget: $1,200,000.00

Taxes: $400,000.00
Intergovernmental Charges for Services: $600,000.00
Miscellaneous: $800,000.00
General Fund: $200,000.00
Master Plan for Senior Services

• Where we are today
  – Demographic changes
  – Growing gap in services

• Building for the future
Engage Stakeholders

- Public-Private Partnerships
  - Senior Coalition
  - Role of governments, non-profits, business
- Comprehensive, coordinated service delivery
- Best practices; innovation
- Support for family caregivers
Roles

- State and County
  - Long Term Care
  - Home and Community Based Services
  - Support for poor; frail and most vulnerable
  - Collaborative Plan
- City and County
  - Building Community
  - Civic engagement; active lifestyles
  - Access to services
The Senior Services Department is Washoe County’s

- first point of contact for access to care and public benefits for seniors, their families, and caregivers
- a provider of community-based services for the most vulnerable
- leader in preparing Washoe County for an aging society, one of the great challenges of the 21st Century.
# Senior Centers

<table>
<thead>
<tr>
<th>Role</th>
<th>Services</th>
<th>Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Community focal points</td>
<td>• Congregate and home delivered meals (9 sites)</td>
<td>• Neighborhood based services</td>
</tr>
<tr>
<td>• Co-located and integrated Services</td>
<td>• Public education and outreach events</td>
<td>• Modern facilities</td>
</tr>
<tr>
<td>• Leads effective partnerships and county wide planning</td>
<td>• Activities, socialization, health/wellness and prevention programs</td>
<td>• Service integration</td>
</tr>
<tr>
<td>• Advocate for seniors and vulnerable adults</td>
<td>• Civic engagement</td>
<td>• Strong partnerships</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Resources for seniors, families and communities</td>
</tr>
</tbody>
</table>
## Aging & Disability Resource Center

<table>
<thead>
<tr>
<th>Role</th>
<th>Services</th>
<th>Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>• First point of contact for information/public benefits</td>
<td>• Information, assistance and advocacy</td>
<td>• Integrate screening/access to services</td>
</tr>
<tr>
<td>• Access to services and advocacy</td>
<td>• HELP-line</td>
<td>• Co-locate with many partners</td>
</tr>
<tr>
<td>• Screening and early intervention</td>
<td>• Options and choice counseling</td>
<td>• Increase information accessible to constituents</td>
</tr>
<tr>
<td>• Outreach to underserved and at-risk</td>
<td>• Screening for public benefits</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Detailed information on services</td>
<td></td>
</tr>
</tbody>
</table>
# Social Services

<table>
<thead>
<tr>
<th>Role</th>
<th>Services</th>
<th>Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Consultation on complex financial, medical, social and mental health issues</td>
<td>• Short and long term case management</td>
<td>• Multi-disciplinary care plans responding to increasingly complex needs</td>
</tr>
<tr>
<td>• Program eligibility</td>
<td>• Needs assessment</td>
<td>• Improve early identification and intervention of at-risk seniors</td>
</tr>
<tr>
<td>• Care coordination</td>
<td>• Care plans and care monitoring</td>
<td>• Community based care as a nursing home alternative</td>
</tr>
<tr>
<td>• Support families and caregivers</td>
<td>• Eligibility</td>
<td></td>
</tr>
<tr>
<td>• Community based network</td>
<td>• Representative Payee</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• In-home care</td>
<td></td>
</tr>
</tbody>
</table>
# DayBreak – Adult Day Health

<table>
<thead>
<tr>
<th>Role</th>
<th>Services</th>
<th>Goals</th>
</tr>
</thead>
</table>
| • Prevents institutionalization of adults with severe physical/cognitive impairment  
• Medical model adult day service | • Nursing oversight for those that require nursing facility care  
• Medication management and personal care  
• Support with activities of daily living  
• Secure setting | • Increased capacity  
• Diversify funding  
• Increase referral base  
• Support private partners |
2014 Master Plan for Senior Services

- Engage Community Leaders and Policy Makers
- Analysis of 2006-16 Strategic Plan
- Random Survey/Community Needs Assessment
- Data Analysis of Survey; focus groups
- Enumerate Current Service Levels and Gap in Needs
- Develop Strategies to Address Gaps; Publish
State of Washoe County Elderly 2013

- **Good news***
  - Lower rates obesity
  - Increased income since 2006
  - Self-reported physical activity
  - Hospitalization readmission rates
  - Fewer falls
  - Lower cost of care (Adult Day, in-home, Assisted Living, Nursing Home)
  - Nursing Home admissions

* “EldersCount 2013” University of Nevada-Reno Sanford Center for Aging; February 2013
Not so good . . .

- Lower life expectancy; higher mortality rates
- Poverty; near poverty
- Nutrition
- Medically underserved
  - Immunization rates; physician access, utilization
- High rate of growth in health care expenditures
- # Nursing Homes opened
- Increasing demand on Caregivers
- Limited Home and Community Based Services options
Most vulnerable WC Seniors don’t have access to basic services

<table>
<thead>
<tr>
<th>Senior Services Performance Measures</th>
<th>WCSS served FY 2010-11</th>
<th>2010 Estimated</th>
<th>2016 Projected</th>
</tr>
</thead>
<tbody>
<tr>
<td>Live Alone</td>
<td>2,520</td>
<td>14,200</td>
<td>18,000</td>
</tr>
<tr>
<td>85+ years</td>
<td>756</td>
<td>4,260</td>
<td>6,940</td>
</tr>
<tr>
<td>Below poverty</td>
<td>1,864</td>
<td>4,970</td>
<td>6,300</td>
</tr>
<tr>
<td>Below 185% of Poverty</td>
<td>~ 5,000</td>
<td>35,500</td>
<td>44,300</td>
</tr>
<tr>
<td><strong>Total 60+ Population</strong></td>
<td><strong>6,000</strong></td>
<td><strong>76,000</strong></td>
<td><strong>88,600</strong></td>
</tr>
</tbody>
</table>

Sources: Department internal reports; “Survey of Older Adults and Caregivers” conducted as a part of the “2006 Strategic Plan for Washoe County Senior Citizens;” “Washoe County 2012 Consensus Forecast”
Senior Poverty

Fig. E6: Sources of Income for Nevada Households with Householders Age 65 and Older by Income Quintile

$140,000
$120,000
$100,000
$80,000
$60,000
$40,000
$20,000
$ -

$9,900
$19,620
$31,725
$50,251
$123,224

Lowest 5th
Second 5th
Third 5th
Fourth 5th
Highest 5th

Other
Earnings
Social Security
Pensions
Assets

(EldersCount Nevada 2013; American Community Survey, 5-Year PUMS: Nevada, 2006-2010)
Other Concerns

- Senior Hunger
  - 16.5% NV seniors “food insecure”; 10th highest

- Health
  - At 77.6 yrs., Nevada’s life expectancy 37th lowest.
  - 60% - 80% WC seniors did not see Dr. in last year

- Caregivers
  - More than ½ million Nevadans provide care
  - 47% age 65+

Source: Elders Count Nevada 2013
Which risk factors affect basic needs?

- Living alone – 27.7%*
- Poverty – 20% at or near poverty
- Aged 85+ - 7.8%, today; +38% by 2020
- 18% - 40% frail; functional limitations
- 2000-2010 Alzheimer’s disease +38% among 65+; an additional 45% by 2025
- Cultural barriers; limited English proficiency

* US Census American Community Survey 5-Year Estimates-B09017, 2006-2010
2.0 Strategic Objective: Economic development and diversification

<table>
<thead>
<tr>
<th>Strategic Goal</th>
<th>FY 13/14 Department Goal</th>
<th>Department Measure &amp; Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1 Support Regional Economic Development efforts</td>
<td>2.1.1 Use alternative service delivery to provide mandated home and community-based services (HCBS)</td>
<td>M: # of contractors providing WCSS mandated home and community-based services T: 3</td>
</tr>
</tbody>
</table>
3.0 Strategic Objective: Safe, secure and healthy communities

<table>
<thead>
<tr>
<th>Strategic Goal</th>
<th>FY 13/14 Department Goal</th>
<th>Department Measure &amp; Target</th>
</tr>
</thead>
</table>
| 3.4 Improve security of housing, income and basic human needs for vulnerable populations. | 3.4.1 Prioritize services to seniors at risk of institutionalization | M: % of total clients who live alone.  
T: 54%  
M: % of total clients 85+ years of age.*  
T: 18%  
M: % of Home Delivered Meal clients with 3+ ADL’s  
T: 12% |
3.0 Strategic Objective: Safe, secure and healthy communities

<table>
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<th>Strategic Goal</th>
<th>FY 13/14 Department Goal</th>
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</tr>
</thead>
</table>
| 3.4 Improve security of housing, income and basic human needs for vulnerable populations | 3.4.2 Prioritize services to seniors at greatest social and economic risk | M: % of total clients with incomes below federal poverty level *  
T: 45% |
| | | M: % of Home Delivered Meal clients at high nutritional risk. *  
T: 61% |
| | | M: % of total clients living in rural areas. *  
T: 20% |
### 3.0 Strategic Objective: Safe, secure and healthy communities - Pg. 3

| 3.4 Improve security of housing, income and basic human needs for vulnerable populations. | 3.4.3 Increase access to HCBS for seniors and people with disabilities. | M: # of state, local and regional partners of Aging and Disability Resource Center  
T: 30 |
### 3.0 Strategic Objective: Safe, secure and healthy communities

**3.5 Improve percentage of citizens rating Washoe County “good to excellent” as a place to live.**

<table>
<thead>
<tr>
<th>3.5.1 Client and family satisfaction with Home and Community-based Services</th>
<th>M: % of family members of DayBreak Adult Day Health clients reporting services exceed expectations.</th>
<th>T: 92%</th>
</tr>
</thead>
<tbody>
<tr>
<td>M: % of congregate meal clients rating customer service as very good or excellent.</td>
<td>T: 87%</td>
<td></td>
</tr>
</tbody>
</table>
### 4.0 Strategic Objective: Public participation and open, transparent communication

<table>
<thead>
<tr>
<th>Strategic Goal</th>
<th>FY 13/14 Department Goal</th>
<th>Department Measure &amp; Target</th>
</tr>
</thead>
</table>
| 4.1 Increase citizen involvement in Washoe County government | 4.1.1 Advice and advocacy from Senior Services Advisory Board for Department’s Strategic Planning and high level decisions | M: Agenda and minutes of monthly Advisory Board meetings  
T: 12 meetings |
4.0 Strategic Objective: Public participation and open, transparent communication - Pg 2

<table>
<thead>
<tr>
<th>Strategic Goal</th>
<th>FY 13/14 Department Goal</th>
<th>Department Measure &amp; Target</th>
</tr>
</thead>
</table>
| 4.1 Increase citizen involvement in Washoe County government | 4.1.2 Complete and publish a stakeholder and customer driven Master Plan for Senior Services | M: Master Plan proposal with performance targets and a published Master Plan with policy recommendations  
T: 100% completion |
### 4.0 Strategic Objective: Public participation and open, transparent communication - Page 3

| 4.3 Increase the number of volunteer hours. | 4.3.1 Complete revised volunteer recruitment orientation and oversight procedures | M: Increase Volunteer Hours by 25%  
T: 12,500 volunteer hours reported in FY ’13-14 |
5.0 County Strategic Objective: Valued, engaged employee workforce

| 5.2 Foster and sustain a culture of engagement, respect, recognition, professionalism and innovation. | 5.2.1 Hold Department wide staff meetings under direction of Department’s Leadership Team | M: Agenda and minutes of quarterly staff meetings T: 4 meetings |
Questions and Answers

Grady Tarbutton, Director
gtarbutton@washoecounty.us