



IV.

Supporting Elder Health, Well-Being and Independence

"The more people you have in your community who can be all they can be, the more the community can be all it can be."

Developing a Livable
Tampa Bay Region
for all Ages

With a variety of services, older people can maintain their self-sufficiency and dignity as they age. Services improve the quality of life for seniors and those who care for them by promoting well-being, safety and independence.

AGING-IN-PLACE

“Aging-in-place” means living where you have lived for years (typically not in a health care environment) and using products, services and conveniences that allow you to remain at home as your circumstances and/or abilities change. In short, you continue to live independently and safely in the home of your choice as you get older. (aginginplace.com)

A major goal of aging-in-place is happier, more satisfied older citizens living with control, dignity and respect – essentially, independent. Another goal is better, more economical use of resources. In most cases, it is less expensive for people to stay at home with services than move to a residential care facility.

An AARP study shows that more than 80 percent of people older than 45 say they want to remain in their own homes, even when they need assistance. The same survey noted that 26 percent of older respondents feared losing independence and 13 percent feared moving to a nursing home compared with only 3 percent who feared dying.

Challenges to aging-in-place

Because an overwhelming majority of Americans want to stay in their homes as long as possible, communities need to look at what challenges those people face and how communities can overcome them. According to a 2007 MetLife Foundation report, some common barriers to aging-in-place are:

- A lack of affordable and appropriate housing options;
- Few opportunities for walking, bicycling or other forms of physical activity, making it

more difficult to remain healthy and engaged;

- Inadequate mobility options;
- Limited information about available health and supportive services in the community;
- Concerns about the safety and security; and
- Limited opportunities for meaningful, challenging volunteer service.

The Clark County Aging Readiness Plan discusses challenges seniors face to successfully age-in-place. The challenges associated with the services needed for successful aging are highlighted at the end of this chapter.



“People are usually the happiest at home”.

- *William Shakespeare*

The Village Model

The Village Model is a strategy for aging-in-place that has taken root across the county. The “village” approach is not a new idea, but one resurrected for today’s communities. Essentially, the approach bands neighborhood communities together to plan, negotiate and provide services that can be shared, such as transportation, home health visits, shopping and home repair.

The idea behind the Village Model is simple: community members come together in an organized manner to assist aging neighbors and friends stay in their neighborhood. One method is to create a neighborhood or village nonprofit. Each member pays a nominal yearly fee, and the money is used by the Village to provide support and services for members. The range of services varies depending on the resources, needs and desires of Village members. These grassroots, member-driven organizations focus on finding solutions for members' needs. In some models, members or friends of members are able to “trade services” to cover membership fees.



The core charge of each Village is to provide basic daily living assistance. Here is a list of services that could be provided to members in Clark County:

- Personalized transportation to shop, meet friends, get to the airport or to see a doctor;
- Meals prepared at your home or delivered to your home;
- Referrals to professionals for evaluations and customized home health care;
- Routine housecleaning; and
- Access to discounted services, such as the handyman work required to keep homes in good repair or to make home improvements so people can stay safe and comfortable

A well known village is located in Boston, MA. “The Beacon Hill Village originated with a dozen civic-minded residents of this neighborhood. They all wanted to remain at home, even after transportation and household chores became difficult or dangerous, the point at which many older people leave familiar surroundings. They also wanted to avoid dependence on adult children.” (NY TIMES article). More than 56 villages now exist across the United States, with another 120 or so in development, according to the Village to Village Network.

“This grassroots, nonprofit approach is based on the simple concept expressed in the African saying, ‘It takes a village to raise a child.’ People on the forefront of this new approach have reformulated this proverb to assert, ‘It takes a village to support successful aging’.”

- Elinor Ginzler, AARP

SUPPORT FOR YOUR PHYSICAL & MENTAL WELL-BEING

Remaining independent as they age is a primary concern for older adults. In the current economy, service providers are having more difficulty meeting the needs of older adults, given the limited availability of resources. As the aging population steadily grows, this problem will, too.

The projected long-term costs of Medicare and Social Security are not sustainable under currently scheduled financing and will require legislative modifications, according to the 2011 annual report of the trustees of the Social Security and Medicare systems. Both Social Security and Medicare, the two largest federal programs, face substantial cost growth in upcoming decades because of population aging and growth in expenditures per beneficiary. Through the mid-2030s, population aging will be the single largest factor contributing to the programs' cost growth because of the large baby-boom generation entering retirement and lower birth-rate generations entering employment. In addition, Medicaid, which pays for supportive services/long-term care, faces similar financial constraints.

Given these forecasts, caring for people in their homes instead of institutions, when possible, is highly desirable. Model programs across the country demonstrate the potential for significant savings with home- and community-based service alternatives when managing chronic care clients. (Aging-in-place 2.0)

Lack of coordination of support services is another challenge. In any given community, an array of health care institutions, community organizations, faith-based groups, nonprofit

organizations and government agencies provides critical services that support independent living. These services often are provided to individuals piecemeal, rather than in a coordinated fashion. Without coordination, services might be duplicated, frustrating individuals' efforts to find appropriate health care while remaining in their homes and communities.

As the population of older adults and cost of health care grow, having coordinated home-based health and support services will be critical. This service is especially needed by the fastest-growing subset of the older population – individuals 85 and older. Several models around the nation work toward meeting this need, including the Program for all Inclusive Care for the Elderly (PACE) run by Providence Health and Services in Portland.



Program for All Inclusive Care for the Elderly (PACE)

The Program for All Inclusive Care for the Elderly (PACE) coordinates a person's health and supportive services, providing the opportunity to age-in-place. PACE is an optional benefit under both Medicare and Medicaid, and focuses on seniors who are frail enough to meet Washington's standards for nursing home care.

The program features comprehensive medical and social services typically provided at an adult day health center, home and/or in-patient facilities. For most patients, a comprehensive service package permits them to continue living at home while receiving services. A team of doctors, nurses and other health professionals assesses participant needs, develops care plans, and delivers services integrated into a complete health care plan.

Eligibility

Individuals who wish to participate must voluntarily enroll and:

- Be at least 55;
- Live in the PACE service area;
- Be screened by a team of doctors, nurses and other health professionals to meet the state's nursing facility level of care; and
- Be able to safely live in a community setting when enrolling



Providence ElderPlace, Multnomah County, OR



Services

PACE manages all medical, social and rehabilitative services. The PACE service package includes all Medicare and Medicaid services provided by the state. Minimum services provided in a PACE center include primary care services, social services, restorative therapies, personal care and supportive services, nutritional counseling, recreational therapy and meals. Services are available around the clock. Because PACE team members have frequent contact with their enrollees, they can detect subtle changes in condition and react quickly to changing medical, functional and psycho-social problems.

Payment

PACE receives a fixed monthly payment per enrollee from Medicare and Medicaid. The amount is the same throughout the contract year, regardless of services an enrollee may need. Persons enrolled in PACE also may have to pay a monthly premium, depending on their eligibility for Medicare and Medicaid.

(Providence web site:

http://www2.providence.org/Pages/continuum_a_dulldaynursing_elderplace_portal.aspx)

CAREGIVERS

According to a 2007 MetLife Foundation report, supportive services are critical to the health, independence and productivity not only of their direct “clients”, but also to the friends and family members who provide informal care. Providing more support to caregivers is an important economic and social priority for employers and communities that rely on their skills.

As the number of aging adults increases and number of health professionals decreases, family caregivers will become even more crucial to the well-being of Clark County’s older adults.

More than 65 million people – 29 percent of the U.S. population – provide care for a chronically ill, disabled or aged family member or friend each year. They spend an average of 20 hours per week providing care. The community needs an integrated approach to support caregivers, many of whom also are full-time workers. (AARP 2009)

Caregiving and work

According to a 2010 *MetLife Study of Working Caregivers and Employer Health Costs*, six in 10 family caregivers are employed. The study noted that 73 percent of family caregivers – defined as someone who cares for a person older than 18 – either work or have worked while providing care. Of those, 66 percent have had to make some adjustment to their work life, from reporting to work late to giving up work entirely. A staggering one in five family caregivers has had to take a leave of absence from their job.

AARP and the National Alliance for Caregiving estimate that the lifetime cost of caregiving for the average worker is more than \$650,000 in lost

wages, lost pensions and lost contributions to Social Security. They also estimate that employers anticipate more than \$1,100 annually in lost productivity for each employed caregiver. That adds up quickly, considering that approximately 60 percent of caregivers are employed.

Economics and impact on caregiver’s health

Regardless of employment, a local caregiver spends an average of \$5,500 annually on out-of-pocket expenses and long-distance caregivers spend approximately \$9,000, according to the National Alliance for Caregiving. Beyond the financial burden, caregivers experience a toll on their health, as well. Research shows that caregivers have higher rates of depression, anxiety, sleep problems, elevated blood pressure and compromised immunity. Family caregivers experiencing extreme stress can show age prematurely, taking as much as 10 years off a person’s life.

To manage the growing needs of our aging population, communities will need to provide better support to the unpaid but critical network of caregivers.



CLARK COUNTY RESOURCES

Many agencies and organizations in Clark County provide a range of supportive services to our older population. These services include fitness and nutrition programs, in-home care, housing referral programs, adult day care, family caregiver support programs and travel training programs for riding transit, among others. Still, it can be difficult and challenging to find out what resources are available to you or a family member.

Fortunately, a new resource has been developed to assist Clark County residents with finding information on programs and services. Residents 50 and older can learn about age-related topics ranging from assisted living options and health care to dog walking services and continuing education classes through a new website, www.MyEncoreYears.org.

MyEncoreYears.org, was developed by the 2011 Leadership Clark County project team, and made possible by financial and in-kind contributions from Clark County, Southwest Washington Agency on Aging & Disability (SWAAD), 211 Info, United Way of Columbia-Willamette and Human Services Council. The outreach program's goal was to create a portal to key information resources. The program connects residents with resources to help address the challenges and opportunities that come with aging.

The website features five area agencies that are clearinghouses for information on issues of aging. Of the five, SWAAD's Information and Referral Program houses a complete listing of county services. Callers can get referrals to a variety of services as well as help determining

what services or agencies they or family members need.

Thousands of refrigerator/household magnets featuring the program's toll-free hotline and website address are being distributed through Clark County fire districts, law enforcement agencies, hospital and health clinic networks, public agencies and community centers.



 **MyEncoreYears**
Your first stop resource for
life transitions after 50

Aging can present challenges and opportunities. It's often difficult to find resources, whether for yourself as you enter into the over 50 stage of your journey, or for your family and friends.

Make MyEncoreYears.org your first stop for locating resources in SW Washington. The organizations listed here and on the website were selected because they offer extensive links, information, resources, and help locating direct services for residents of Clark County who are over 50. There is help available to connect you with services and enrich your life.

Just visit MyEncoreYears.org or contact any of the providers listed on back of this card.

 **MyEncoreYears.org**
Your first stop for locating resource service opportunities in Clark County for residents over 50

SW WA Agency on Aging & Disabilities
Call 360-694-8144 - 888-637-6060

A Leadership Clark County Class of 2011 Project made possible by: Clark County Aging Readiness Task Force, Southwest Washington Agency on Aging & Disabilities, United Way of the Columbia-Willamette, 211 Info, and Human Services Council.

WHAT DOES OUR COMMUNITY WANT & NEED?

The 2011 Elder Economic Security Standard Index for Washington determines an income range that will be adequate for older adults to age-in-place as health status, expenses and life circumstances change. (The entire report is included in the Appendix.) In Clark County, it shows a marked increase in the number of people who may need services. The Aging Readiness Task Force hosted a community workshop to discuss this issue.



March 17, 2011 Supportive Services Workshop

Aging Readiness Healthy Community Workshop

Clark County's Aging Readiness Task Force held a workshop on March 17, 2011, and more than 90 community members attended.

Bill Barron, Clark County administrator, opened the session, explaining its purpose and format. Jesse Dunn, Aging Readiness Task Force chair, welcomed attendees and introduced task force members. Vanessa Gaston, director of Community Services, introduced keynote speakers Judy Canter, Marc Berg and Liesl Wendt.

Judy Canter is founder and president of Mindful, Inc., which provides supportive services for adults and their systems of care. She is a licensed independent social worker and has worked with adults in Clark County for more than 10 years. Judy explained that supportive services are resources and programs that help people age-in-place or wherever they want to live. They support the physical body, emotional body, caregivers and systems of care.



Judy also discussed gaps in services. For example, a home caregiver paid by Medicaid or Medicare can help with bathing but cannot take the client's dog for a walk. She said funding for in-home services is declining as state budgets suffer in the current economy. Yet the state would pay more if the individual were to move to an assisted care system.

Marc Berg is director of HomeCare and Hospice Southwest. He has more than 30 years of experience in the health care industry. Marc described the Program for All Inclusive Care for the Elderly (PACE), a program for serving seniors with complex care needs. Marc explained that a growing number of seniors have complex care needs that require nursing-home levels of care. While residents have access to acute medical care and long-term care services, what's missing in Southwest Washington, he said, is a program that integrates all types of medical and long-term care services such as



transportation, adult day care, mental health care, home health and personal care, social services and respite care. A PACE model would fill that gap.

Liesl Wendt is chief executive officer for 211info, a nonprofit that provides health and human



services information to residents of Oregon and Southwest Washington.

Liesl explained how her organization receives and disseminates information. She concluded by discussing

how programs communicate today and how they will need to find new ways to communicate as people increasingly receive information through technology advances.

Following the speakers' presentation, attendees gathered into groups for a facilitated discussion centered on three questions developed by the Task Force. Ideas were recorded on flip charts, and brief summary reports were presented to all attendees.



March 17, 2011 Supportive Services Workshop

Summary of workshop discussions

The workshop discussion focused on gaps in our supportive services, potential innovative solutions, who other than the traditional providers could help and how best to provide information and access to services. The following are some of the gaps and solutions identified:

1. Support for residents to age in place through housing, transportation and safety initiatives.
2. Services that support both physical and mental health through preventive measures and coordination of care.
3. Provide access to information and programs for the aging population, their families and caregivers.

Subcommittee Overview

The supportive services subcommittee's charge was to develop specific recommendations to the Aging Readiness Task Force that would serve as a blueprint for short-term (0-3 years), medium-term (4-6 years) and long-term (7+ years) actions. The goal is to identify specific strategies and, where possible, implementation actions to enable all Clark County residents to continue to be integral members of the community throughout their life, not matter their condition.

Workshop Questions

1. Looking to the future when one in four Clark County residents will be 60 or older, what gaps exist within our support services network that must be filled to meet our growing population's needs?
2. Today, 10.4 percent of Clark County households care for adults age 50 or older. By 2025, that number is estimated to double: a) facing limited financial and human capital, what innovative ideas/solutions can we put in place to prepare for the silver tsunami facing our support system and b) aside from traditional service providers such as governments and nonprofits, are there other entities that could provide services?
3. Aging-in-place (staying in your home) and aging-in-community (staying in your community as your needs change) remain the preferences for the majority of older adults. How can we provide better information and access to services to people who want to age in place/age in community? For example, how do you prefer to get information? Are there barriers? What are some positive experiences you've

CHALLENGES & STRATEGIES

Self-sufficiency is maintained through a range of services that adjust to each individual as we age and are culturally sensitive, accessible and integrated. Services improve the quality of life for seniors and those who care for them by promoting well-being, safety and independence with dignity. These services include the contributions of individuals, groups, and organizations working together to have sustainable and viable communities that support aging-in-place.

Through research and community discussions, the task force has learned that older residents want to stay in their homes and communities. Members recognize that the current support systems will most likely not sustain the baby boomer generation as those people approach their later years. Nationwide, the cultural mindset is moving from institutional care for the elderly to supporting individuals at home with services that offer independence and dignity.

With the information from the workshop, an online survey and national research, the supportive services subcommittee identified four major challenges and possible solutions to address them. They are:

Aging-in-place

Support for your physical and mental health

Caregiver support

Information and communication



CHALLENGE 1: AGING-IN-PLACE

Aging-in-place is staying in one's home when age- or health-related changes make it difficult to safely be self-sufficient. Although most say they want to age-in-place, people trying to assist an older relative or friend may find it difficult. The subcommittee concluded that people wanting to age-in-place in their current home or another home of their choosing need more support.

Strategy 1a (short term) - Work with state legislators to secure funding for the Senior Citizens Services Act (SCSA). SCSA was enacted in 1976 to honor the choice and dignity of seniors who want to stay in their homes and communities. SWAAD uses federal SCSA dollars to pay for services such as its Senior Transportation program.

Strategy 1b (short term) - Encourage and promote the establishment of the Elder Justice Center. The center would provide assistance to seniors and vulnerable adults by investigating and prosecuting suspected cases of elder and vulnerable adult abuse. By pooling resources, dedicating knowledgeable professionals and using available facilities and trained volunteers, the Elder Justice Center could keep costs to a minimum, while maximizing returns to the community.

Strategy 1c (short term) - Encourage and promote the development of a voluntary Vulnerable Population Registration for emergency service providers. In a disaster, some residents may experience serious difficulties, such as being unable to leave their apartments because elevators aren't functioning or not being able to call for help because phone lines are down. The Vulnerable Population Registration would help emergency personnel to better respond to and recover from major storms or disasters. (Example - <http://www.broward.org/registry/Pages/Default.aspx>)

Strategy 1d (short-term) - Encourage neighborhood associations to implement a phone tree/reverse 9-1-1 system. A phone tree/reverse 9-1-1 system would enable residents to check on their neighbors in an emergency and ensure all neighbors are notified of an emergency.

Strategy 1e (medium term) - Develop a shared housing program: The program would help homeowners find someone of any age to share their home. Nonprofits such as the Council for the Homeless or Human Services Council could match the two parties based on the needs and abilities of each person. They would screen applicants before matching and follow up afterwards. Most organizations that perform this service are nonprofits and supported by sources other than people seeking their help.

Strategy 1f (medium term) - Encourage and support the development of a neighborhood based senior peer advocacy program. When people experience frustrations, worries and concerns, they typically turn to their friends, not professionals, for help and support. Peer helping can be as simple as someone who is

comfortable using a computer seeking other who need help solving computer problems.

Strategy 1g (medium term) - Encourage and support organizations collaborating to better use existing facilities to eliminate or ease the need to travel for services. In areas of the county that lack transportation options, promote alternative uses of existing public facilities as places residents can go to receive services or access social and physical activities. Nonprofits, private entities and neighborhood organizations should pursue joint-use agreements with schools, churches, fire stations and others structures that could places to share information, receive local medical services, and/or participate in recreational activities.

Strategy 1h (medium term) - Promote and expand the R.U.O.K. program countywide. For several years, the Camas Police Department has been the lead agency in a program called "ARE YOU OKAY?" The program's computer calls subscribers at a set time each day to make sure they are well. The program assumes that if the subscriber can answer the telephone, he or she is fine, or at least capable of calling 9-1-1. If the subscriber is unable to answer the phone due to illness or injury, the computer issues an alert and a police officer is dispatched to the subscriber's home.

Strategy 1i (medium term) - Develop a Village to Village Program to encourage aging-in-place. Essentially, the approach bands together neighborhood communities to plan, negotiate and provide services that can be shared such as transportation, home health visits, shopping and home repair. For more information, please refer to pages 2-3.

(http://vtvnetwork.org/content.aspx?page_id=0&club_id=691012)



CHALLENGE 2: SUPPORT FOR PHYSICAL AND MENTAL HEALTH

Access to quality health care – health care that is adequate, available and affordable – is the most important priority for many adults. A livable community for all ages has a high capacity to both prevent and address health problems. The capacity includes accessible hospitals and clinics, transportation to and from health care facilities, and home- and community-based care services.

Strategy 2a (short term) - Encourage the development of a “Vial of Life” program for county residents. The Vial of Life or Vial of L.I.F.E. (Lifesaving Information For Emergencies) is a program that allows individuals to provide health information to medical personnel during an emergency. Participants fill out a form stating their health status and current medications, and place it in an empty pill bottle or other container that bears a Vial of Life sticker. Another sticker is placed in the front window or on the refrigerator so

emergency personnel will know to find the bottle and important medical information in a standard location: the freezer.

Strategy 2b (short term) - Clark County should develop a blue ribbon committee to address issues among older jail inmates as this population is expected to increase. Two age-related challenges face law enforcement today. Current inmate populations are aging, and a 1997 Supreme Court ruling made communities responsible for providing medical services, at whatever cost. Second, declining revenues mean reduced services to the homeless, mentally ill, developmentally challenged and other groups, and a rise in arrests of individuals who are not receiving needed support services. These issues are complex and will require thoughtful consideration by knowledgeable professionals.

Strategy 2c (short term) - Encourage the implementation of the ElderFriends program. ElderFriends is a volunteer-based friendly visiting program designed to relieve isolation and loneliness among elders who wish to age-in-place. Such community support helps low-income older adults living alone maintain mental and physical health and remain independent as long as possible.

(www.cdmltc.org/what_we_do/ef.html)

Strategy 2d (medium term) - Encourage the development of a Geriatric Mobile Outreach program. A Geriatric Mobile Outreach program is a service whose mission is to reduce mental health hospitalizations and provide a greater level of behavioral interventions for individuals experiencing severe mental health cognitive disorders. The services could be offered around the clock and would be delivered in the person’s home most of the time.

Strategy 2e (medium term) - Encourage the development of a Regional Health Alliance. The goal of an alliance is to support the state’s mission of achieving a triple aim: better health for those served, better care and reduced costs. Stakeholders include health plans serving at-risk, vulnerable populations, hospitals, local service providers and the criminal justice system. Organizations in the alliance would provide comprehensive primary care, dental care and behavioral health services for children and adults, facilitating partnerships among patients, their physicians, specialty providers and, when appropriate, their family. An alliance would ensure coordination of services. Each partner has resources and expertise about how best to serve the safety-net population, and the alliance could leverage them across many systems to improve the quality and integration of care.

Strategy 2f (medium term) - Encourage proper geriatric care training and education for health care providers across disciplines. As our aging population increases, the need for medical professionals to be properly trained in geriatric care also will grow. Programs would train health professionals across disciplines and at various levels of education regarding the clinical and social aspects of aging. Area hospitals and educational institutions could jointly develop geriatric training programs to reduce health disparities and improve quality of life for the region’s elderly. (Example - Atlanta Geriatric Consortium)

Strategy 2g (long term) - Encourage the development of a Program for All-inclusive Care for the Elderly (PACE). A growing number of seniors have complex care needs that require a nursing home level of care. While these seniors may have access to acute medical treatment and long-term care services, a program that integrates all types of medical and long-term care services is currently not available in SW Washington. A PACE program would fill that void.

Strategy 2h (long term) - Encourage opportunities to provide health care in people’s homes with technology: Promote the use of video conferences between medical providers and patients, especially those in the rural areas, to deliver a virtual “house calls.” Clark County should recruit businesses that provide these services and aim to become a national leader in the field.





CHALLENGE 3: CAREGIVER SUPPORT

Informal caregivers are essential to home- and community-based support for the majority of seniors. Providing caregivers with information is key to help them effectively respond to the changing needs of aging parents and grandparents. Caregiver support must use a multi-prong approach, with information available by phone, the Internet or written materials. Because most informal caregivers also are full-time workers, providing information in quick, easily accessible ways is crucial.

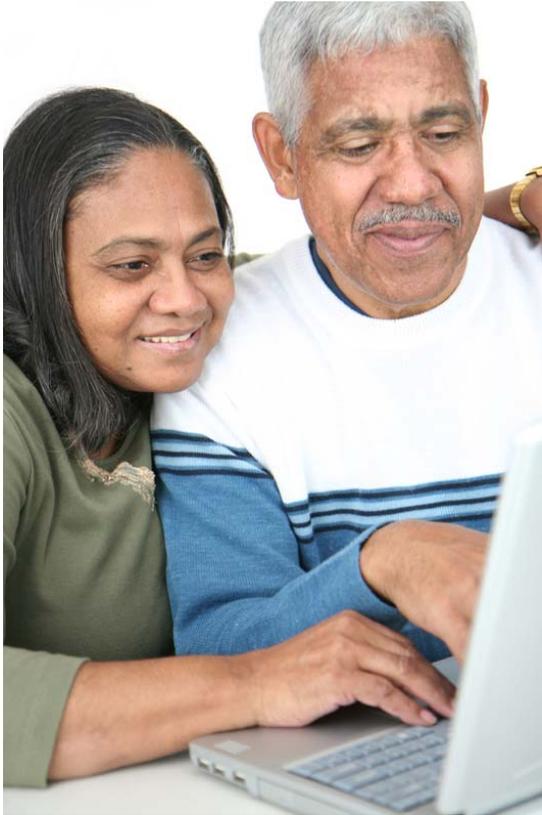
Strategy 3a (short term) Increase awareness of and provide education about technology that can enhance care and reduce stress (i.e., assistive technology or monitoring). Technology could include personal health record tracking, a web- or software-based personal health record system to track medications, test results and other data. A caregiving coordination system would log a person's medical appointments and coordinate the scheduling of supportive family members or volunteers. A medication support system uses devices to remind patients to take their meds, give them information on side effects, and alert a caregiver when the dose is not taken.

Strategy 3b (medium term) - Encourage more respite for caregivers aiding older adults and adults with disabilities. Organizations should increase the number of respite workers and volunteers so that there is a continuum of available, accessible and affordable support options for our diverse community.

Strategy 3c (long term) - Employers can develop and provide elder care assistance programs for employees as a benefit. Geriatric care management services increasingly are being offered by employers as a benefit to employees. Working with geriatric care management services, employers can secure discounts for employees in exchange for the care manager providing educational seminars to employees monthly or quarterly. Some programs do not provide a discount, but the employer pays a portion of the services, such as a free assessment.

Strategy 3d (long term) - Encourage employers to provide onsite adult day care facilities for employees' family members. The program would provide care for adult dependents who need minimal intervention services. Other features include: low staff-to-participant ratios; subsidized daily costs; activities and meals. (Example: Virginia Commonwealth Health System)

Strategy 3e (long term) - Encourage employers to provide more flexibility for employees who also are caregivers. For example, employers could offer flex-time, a shortened work week, flexible daily scheduling, job-sharing or telecommuting.



CHALLENGE 4: INFORMATION AND COMMUNICATION

Access to information and programs is critical for the aging population, their families and caregivers to find services and opportunities in their community.

Strategy 4a (short term) - Collect information on all resources and services and have it available in places or ways most often used by older adults and caregivers. Given that people first seek information from familiar sources, any effective strategy will need to include local community organizations and faith-based organizations as resource centers.

Continuing the work of the Leadership Clark County 2011 class, the task force recommends the MyEncoreYears.org website be added to all county and city agency websites. A one-stop

shop for information about available services would be helpful.

Strategy 4b (short term) - Increase public awareness of SWAAD's Information and Assistance service. In some cases, a problem may not be a lack of services, but rather a lack of knowledge about available services. If people don't know a service is available, they can't use it. More work is needed to educate both seniors and the general public about what services are available where and how they can tap into those services. Seniors need to know how to find appropriate housing, where to go for physical activity, what options exist for home health care, how to get a break on their property taxes, and where to go for dementia and end of life planning. Raising public awareness about Southwest Washington Agency on Aging and Disabilities Information and Assistance program should be a top priority.

Strategy 4c (medium term) - Encourage development of an annual Senior Resource Guide for the Senior Messenger. The Senior Messenger is a monthly periodical that provides information for seniors. It has a circulation of more than 45,000 residences countywide. The Senior Messenger would be the best medium in which to launch a Clark County-based resource guide.

Strategy 4d (medium term) - Encourage and promote diverse communication services. The county's increasing diversity will require more attention to cultural competency in service provision, including services that support seniors in home and community-based settings. Services could include interpreter assistance and visual or auditory impairment aides.

Strategy 4e (medium term) - Encourage the collaboration of existing agencies and networks to fill the needs of the aging population.



Strategy 4f (medium term) - Agencies that provide financial services to income-eligible seniors should coordinate their application processes. A one-time application process that could qualify the household for multiple programs would decrease the amount of time, frustration and confusion that can occur when filling out numerous applications for different agencies.

Supportive Services Internet Resources

MyEncoreYears.org:

www.myencoreyears.org

Southwest Washington Agency on Aging and Disabilities:

<http://www.helpingelders.org/>

Clark County Department of Community Services:

<http://www.clark.wa.gov/commserv>

Human Services Council:

<http://www.hsc-wa.org>

211Info

<http://www.211info.org/>

Retirement Connection:

<http://www.retirementconnection.com/>

Eldercare Locator:

<http://www.eldercare.gov>