Public participation at Committee meetings is encouraged. We request that individuals limit their comments on any single item on the agenda to three minutes. The chosen spokesperson for a group may speak for five minutes.

1. Call to Order/Welcome 1:30
2. Consent Calendar – 1:30 – 1:35
   • Approve Minutes
3. Public Comment for items not on the Agenda 1:35 – 1:40
4. AAA Director’s Report 1:40 – 1:45
5. Thomas Gregory, Deputy Director 1:45-2:15
   Center for Independent Living (CIL)
   Presentation: Client-Directed Service: The Importance Many Seniors
   Place on Consumer Choice in the Delivery of Services
6. Consumer Survey 2:15 – 3:00
   • John Garvey – September Update
   • Report out on Outreach Efforts
   • Needs Assessment Survey for LTC Facility Residents
7. Data 3:00 – 3:30
   • Report from Data Committee
8. Focus Groups 3:30 – 3:45
9. Next Steps 3:45 – 4:00
   • Next Meeting: October 21
   • Next Speaker: Maricela Narvaez-Foster, Deputy Director Healthy Homes
Linda Gardner, Deputy Director Housing & Community Development
MINUTES
Planning Committee
Wednesday, August 26, 2015
1:30 – 4 pm
6955 Foothill Blvd. Suite 300
Oakland, California

Staff: Delbert Walker, Tracy Murray, John Garvey, Jose Villaflor

Committee Members: Wendy Petersen, Maricela Foster, Jamie Almanza, Lillian Schaechner, Carol Sugimura, Marlene Petersen, Angela Ball, Phil Altman, Karen Grimsich, Suzanne Shenfil, Geri Tablit, Shelley Zak, Tighe Boyle, Dana Bailey, Lara Calvert, Sister Ansar Muhammad

I. Consent Calendar

Motion to accept Minutes as amended to correct a typo that listed the City of Fremont twice.
(M) Carol Sugimura
(S) Wendy Petersen
Carried

II. Public Comment for Items not on Agenda: No comments

III. Guest Speaker: Behavioral Health Care’s Older Adult System of Care (Lillian Schaechner, Older Adult System of Care Director)

Lillian Schaechner presented the Alameda County Behavioral Health Care Services Agency’s Older Adult System of Care (presentation attached)

There followed a discussion regarding impediments to accessing seniors for behavioral health. The group identified numerous factors including stigma related to mental health, lack of comfort regarding having conversations with family members, and the complexity of determining causation when older adults don’t feel well. There was a brief discussion of the three D’s – Delirium, Dementia, and Depression and of the need for tools to determine mental health, like the Mental Health First Aid approach. The group discussed the need to have systems improvements, including funding, that would allow more seniors to receive behavioral health care services. The group identified the need for increased outreach, understanding, and expanded services, such as Behavioral Health’s Mental Health Train the Trainer Program. All require more funding.

IV. Consumer Survey
John presented an August update from his monitoring of survey response progress. When he created his report, more than 800 people responded.
Although the response to the initial electronic distribution and early print distribution is positive, the committee identified the need to continue to reach out to seniors through other avenues. Suggestions such as offering incentives for completing the survey and AAA reaching out to funded CBO’s were advanced. The Healthy Living Festival will include a station for completion of surveys, online and hardcopy. Faith-Based possibilities include Kinship Center, Dioceses, and Ministerial Alliances among others. Tracy will send a link to committee members that enable track to determine responses from faith-based efforts. Lara Calvert and the City of Fremont both reported that they will forward to coalitions that they will work with. John will prepare a report for the September meeting that identifies other groups to whom we should increase outreach.

V. Data: Report from Data Committee
Delbert reported on the Data Committee meeting of August 19 including the most recently updated data research resources. The committee members agreed to focus their specific research according to interest and expertise in conjunction with one of the 8 Domains of Livability, such as Housing, Civic Participation/Employment/Poverty, and Community Support/Health Services among others.

The first report of the Data Committee is due to the Planning Committee by the end of October.

VI. Focus Groups
Delbert explained 2011 Consumer and Key Informant Focus Group materials to provide background on the process used in development of the 2012 – 2016 Area Plan. Consumer Focus Groups included Consumers of Older Adult services while Key Informant Focus Groups included Providers of Older Adult Services.

Suzanne Shenfil suggested that the City of Fremont’s Train the Trainer Model might work well for the Focus Groups.

The Focus Groups Committee will need to begin meeting to establish the Design and Implementation aspects of the upcoming Focus Groups.

VII. Next Steps
Next Meeting Date: September 16, 2015 from 1:30 – 4 pm
Next Meeting topic: Housing

Motion to adjourn: Jamie Almanza
Second: Angela Ball
All Approved
ALAMEDA COUNTY SURVEY FOR OLDER ADULTS

Up to September 3rd Update

RESPONSE RATE IS INCREASING

PROGRESS
As of September 3rd, there have been 1,152 responses from people aged 55 and up and who are Alameda County residents.

TARGET
For a "good" sample, we need at least 304 surveys. This will statistically cover the 280,742 residents of Alameda County who are 60 years old or older.

A busy summer of surveys...

HOW ARE THEY COMING TO THE SURVEY?

<table>
<thead>
<tr>
<th>Method</th>
<th>Email</th>
<th>Phone</th>
<th>Mail</th>
<th>Social Media</th>
<th>Friends</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent</td>
<td>52%</td>
<td>22%</td>
<td>12%</td>
<td>12%</td>
<td>4%</td>
</tr>
</tbody>
</table>
| IHSS surveys entered: 141

WHERE ARE SURVEYS COMING FROM?

As of September 3rd, there were 1,152 surveys which qualify for the survey. 21% are from IHSS surveys.

AGE OF RESPONDENTS

<table>
<thead>
<tr>
<th>Age Group</th>
<th>0-14</th>
<th>15-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65-74</th>
<th>75+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent</td>
<td>6%</td>
<td>11%</td>
<td>10%</td>
<td>12%</td>
<td>14%</td>
<td>16%</td>
<td>12%</td>
<td>22%</td>
</tr>
</tbody>
</table>

GENDER OF RESPONDENTS

<table>
<thead>
<tr>
<th>Gender</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent</td>
<td>40%</td>
<td>60%</td>
</tr>
</tbody>
</table>
**FACTOIDASBOARD - AUGUST EDITION**

- 69% live in homes & 18% in an apartment
- 25% live alone
- 60% do not have a care-giver
- 9% are veterans & 33% have family members who are veterans
- 63% drive themselves & 24% use public transit

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**PRELIMINARY FINDINGS**

Q22. Do you experience any of the following limitations to your daily activity? Please check all that apply.

- HEARING 194 16
- VISION 117 11
- MOBILITY 208 18
- MEMORY LOSS 86 7.5
- OTHER 105 10

**HEALTH**

Q23. Do you experience any of the following health issues? Please check all that apply.

- CANCER 48
- DIABETES 104 14
- HEART DISEASE 104 9
- STROKE 29 2
- ARTHRITIS 296 26
- OBESITY 161 14
- ASTHMA 121 11
- OTHER 195 17

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**CONCERNS**

Q4. "My level of concern about this is..."

<table>
<thead>
<tr>
<th>Limitation</th>
<th>Rating</th>
<th>Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Having the ability to maintain your home</td>
<td>3.53</td>
<td></td>
</tr>
<tr>
<td>Being able to stay in your current home as you age</td>
<td>3.50</td>
<td></td>
</tr>
<tr>
<td>Having enough income to meet all your basic needs (e.g. food, medical care, housing, etc.)</td>
<td>3.48</td>
<td></td>
</tr>
<tr>
<td>Having enough income to save for future</td>
<td>3.47</td>
<td></td>
</tr>
<tr>
<td>Being able to afford housing as you age</td>
<td>3.46</td>
<td></td>
</tr>
<tr>
<td>Being included in decisions that affect your lifestyle</td>
<td>3.41</td>
<td></td>
</tr>
</tbody>
</table>
### GAPS IN RESOURCES

**Q3. "This resource or service is available to me."**

<table>
<thead>
<tr>
<th>Resource Description</th>
<th>Yes</th>
<th>No</th>
<th>Don't Know</th>
<th>Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Job opportunities for people your age</td>
<td>153</td>
<td>262</td>
<td>554</td>
<td>2.36</td>
</tr>
<tr>
<td>Affordable housing</td>
<td>428</td>
<td>425</td>
<td>211</td>
<td>1.9</td>
</tr>
<tr>
<td>A trusted source to go to when you can't understand something (e.g., filling out a form, understanding requirements)</td>
<td>573</td>
<td>171</td>
<td>320</td>
<td>1.76</td>
</tr>
<tr>
<td>Emotional health services that are culturally appropriate and in a language you understand (e.g., for depression, anxiety)</td>
<td>505</td>
<td>144</td>
<td>315</td>
<td>1.73</td>
</tr>
<tr>
<td>Free or affordable opportunities for you to learn (e.g., about computers, internet, health, politics)</td>
<td>625</td>
<td>164</td>
<td>289</td>
<td>1.61</td>
</tr>
</tbody>
</table>

### AVAILABLE RESOURCES

**Q3. "This resource or service is available to me."**

<table>
<thead>
<tr>
<th>Resource Description</th>
<th>Yes</th>
<th>No</th>
<th>Don't Know</th>
<th>Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information about news and events in a language you understand</td>
<td>956</td>
<td>56</td>
<td>63</td>
<td>1.17</td>
</tr>
<tr>
<td>Health services that are culturally appropriate and in a language you understand (e.g., primary care, specialty care)</td>
<td>387</td>
<td>20</td>
<td>110</td>
<td>1.27</td>
</tr>
<tr>
<td>Fresh vegetables and fruit that you can afford</td>
<td>831</td>
<td>158</td>
<td>84</td>
<td>1.3</td>
</tr>
<tr>
<td>Clean and well-kept sidewalks for you to walk on</td>
<td>761</td>
<td>209</td>
<td>28</td>
<td>1.52</td>
</tr>
<tr>
<td>A computer that you feel comfortable using</td>
<td>507</td>
<td>132</td>
<td>127</td>
<td>1.36</td>
</tr>
</tbody>
</table>

### Questions?

Next steps.....
SUGGESTED NEEDS ASSESSMENT FOR RESIDENTS OF LTC FACILITIES

Number of years in facility □ Number of beds □ □ SNF □ RCFE □

1. What caused your move to a nursing home/RCFE?
   - Afraid to live alone □
   - Couldn't fix meals □
   - No transportation □
   - Couldn't shop □
   - Needed nursing care □
   - No one to help with my care needs □
   - Other ____________________________

2. Who made the decision for your move to a facility?
   - You □
   - Family □
   - Doctor □
   - Discharge Planner □
   - Friend □
   - APS □

   Were you involved in the decision-making? Yes □ □ No □

   Did you agree with the move? Yes □ □ No □

3. What services did you use prior to moving to this facility?
   - Case Management □
   - Adult Day Health Care □
   - Home-Delivered Meals □
   - Adult Day Care □
   - Transportation □
   - Housekeeping Services □
   - In-home Supportive Services □
   - Home Health Care □
   - Other □
   - None □

   Were you satisfied with the quality of services you received? Yes □ □ No □

   If no,

   Did you know about services in your community? Yes □ □ No □

   Could you afford the services you needed? Yes □ □ No □

4. What is your source for paying for care?
   - Medicare □
   - Medi-Cal □
   - Private Pay □
   - Long-Term Care Insurance □
   - Other □

5. If you have long-term care insurance, did it pay for the services that you thought it would? Yes □ □ No □

   If no, what didn't it pay for? ____________________________

6. Do you belong to an HMO? Yes □ □ No □

   Are you getting the services you thought you would? Yes □ □ No □

   If no, what was your understanding of the services you were to receive?
7. Has a doctor visited you since your move to this facility? Yes ☐ No ☐
   If so, how often?

8. Are you involved in your plan of care? Yes ☐ No ☐
   Are you satisfied with your plan of care? Yes ☐ No ☐

9. Do you have family and friends in the area who visit? Yes ☐ No ☐
   How often do you get visitors? Daily ☐ Weekly ☐ Once a month ☐ Never ☐

10. Does your facility have a resident council? Yes ☐ No ☐
    Do you attend the meetings? Yes ☐ No ☐
    If not, why not?

11. Does your facility have a family council? Yes ☐ No ☐
    Do members of your family attend? Yes ☐ No ☐

12. How often do you leave the facility for outings? Daily ☐ Weekly ☐
    Once a month ☐ Less often than once a month ☐ Never ☐

13. Are you able to attend the worship services of your choice? Yes ☐ No ☐ Not applicable ☐

14. If you could return home, what kinds of services would you need?
   Nursing care ☐ Meal preparation ☐ Home maintenance ☐
   Help with bathing ☐ Housekeeping ☐ Shopping ☐ Other ☐

15. Who would be available to assist you if you needed help?
   Close family ☐ Other relative ☐ Friends ☐
   Professional, such as a doctor or nurse ☐

16. Please rate your quality of life (1=lowest; 10=highest)

   1 2 3 4 5 6 7 8 9 10