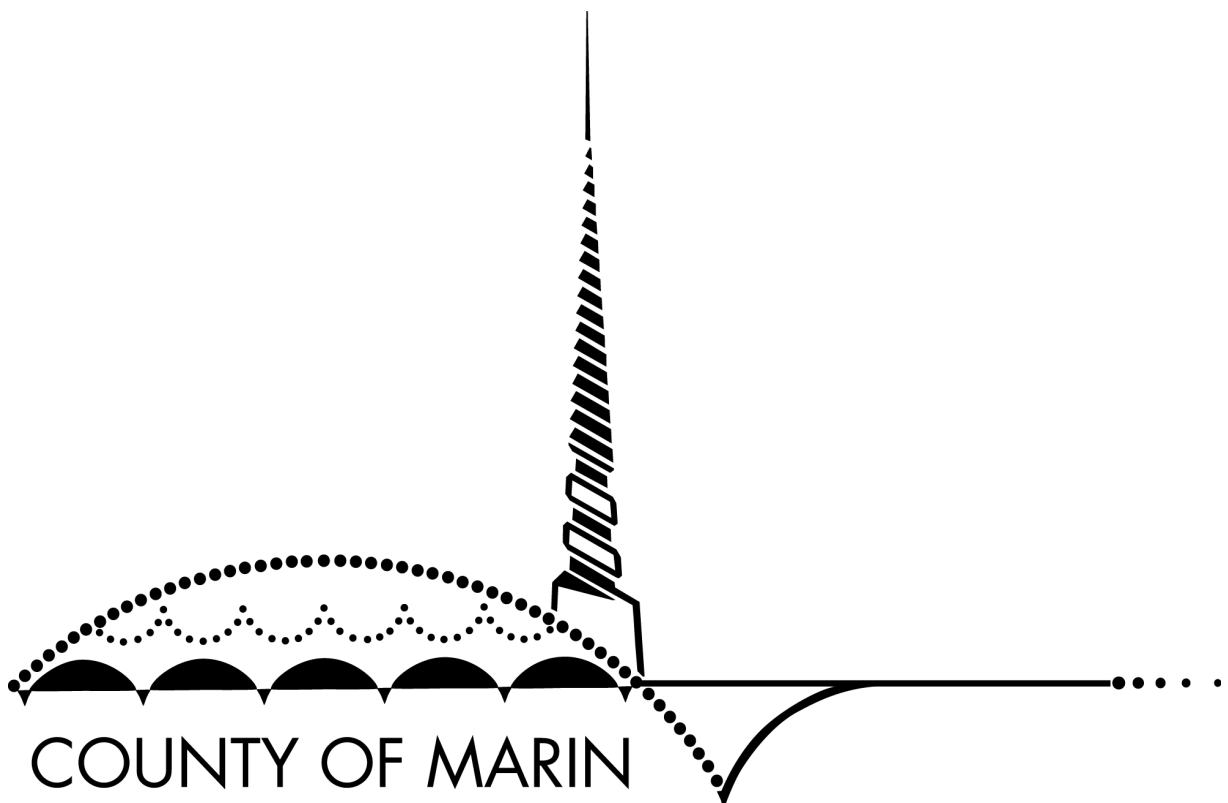
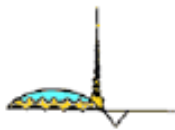


2013/2014 MARIN COUNTY CIVIL GRAND JURY

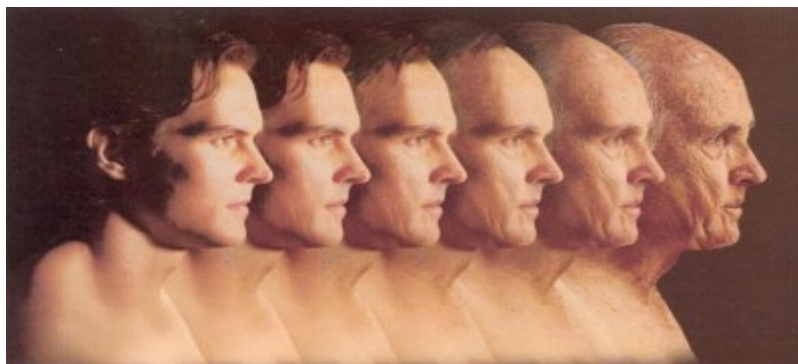
Aging in Marin: What's the Plan?

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AGING IN MARIN: WHAT'S THE PLAN?



*Aging*¹

SUMMARY

If we were smart, we'd be on top of this. "Silver Tsunami" ... The demographics are not like an earthquake; these demographics are a 100-percent probability.

Commission on Aging Member

Most of us, with a little luck, will grow old. For some it's an adventure, for others, a challenge — and for most — a bit of both. Every Tuesday morning, hardy women in their eighties and nineties play golf at McGinnis Park, if it isn't raining too hard. Others, men or women, delicate in their early sixties, remain homebound and struggle to get by.

The Grand Jury examined Marin County's ability to provide for its senior citizens, especially those who require support to live safe and healthy lives. Although our county is known as an enclave of wealth, thousands live at or near the poverty level. Today one in four residents of Marin is 60 years or older and by 2030, one in three residents will be a senior.² One of the consequences will be that, as our population ages, service demands will rise, while the number of people available to help is likely to decline.³ Marin County is home to more older adults—as a percentage of the population—than any other county in the state,⁴ and those over 85 years make up the fastest growing segment of

¹<http://guardianlv.com/2014/05/university-of-washington-develops-age-progression-program/>

² Adler, Marsha Nye, Ph.D., Advisory Report: Aging Action Initiative for Marin County Aging and Adult Services, March 2014

³ Redford, Donald et. el., The Aging of the Baby Boom and the Growing Care Gap: A Look at Future Declines in the Availability of Family Caregivers, Insight on the Issues 85, August 2013, AARP Public Policy Institute

⁴ Adler, Marsha Nye, Ph.D., Op. Cit.

that population. It is not surprising, therefore, that if nothing changes more Marin County seniors will fall through the “safety net,” and find themselves unable to meet their needs for food, housing, transportation and medical care.

Previous Grand Juries focused on the senior community. For example, “Aging in Marin — An Essay in Uneasiness,” published in 2007, claimed the county was ill prepared for the “Silver Tsunami” about to engulf it. We find that concern even more justified today. In fact, our review informs us that the big wave has broken on our shore. Whether we recognize it or not, we have already gotten wet.

There does not appear to be a long-term plan to address upcoming demands that the aging population will present. In the course of this review, the Grand Jury could not identify a countywide financial strategy that recognizes the inevitable growth in the number of seniors. The question is: How will we provide for the increasing number of our elders who cannot take care of themselves, those for whom the social safety net has frayed?

Recommendations:

- The County take on the leadership role by developing a long-term strategic plan that will address needs of the senior population and identify potential funding sources. This would include an assessment of currently unmet needs of low-income seniors in all areas of the county and work to provide services to address them.
- The County work with federal and state governments and nonprofits to provide adequate funding for mandated services, such as the Meals on Wheels program, to insure that there are no wait lists for eligible Marin seniors.
- The County work to improve access to services by:
 - a. Improving information and referral phone lines to make them more user-specific, friendly and immediate.
 - b. Providing training to organizations that offer information on senior programs to insure complete and uniform referrals to appropriate services.
 - c. Working with existing nonprofit agencies, encouraging development and staffing of a navigator program to be available to all senior citizens needing help finding adequate supports.
 - d. Working with nonprofits and other entities in establishing an aggressive outreach and/or advertising program to educate Marin County residents about services for seniors.
- The County develop a contingency plan for funding services when state and federal funding sources are unavailable or reduced.

Note:

The Grand Jury found representatives of the county, nonprofits, and others in support services to be caring, knowledgeable, and open to an honest discourse of important issues. And, while this report outlines concerns about the breadth of services available to seniors — especially as these relate to planning for future needs — those individuals who work tirelessly with limited resources on behalf of our aging population deserve recognition and praise.

As part of our review, the Grand Jury learned that there are thousands of Marinites volunteering to help seniors. Whether working with a nonprofit agency to drive seniors to medical appointments, raising funds, hosting cultural events or setting up a food pantry, these people make a gigantic contribution to aging adults' lives. We heard repeatedly how helpful this work is to both recipients and volunteers alike. We acknowledge their hard work and devotion. The Grand Jury encourages readers of this report to pitch in and help our older residents — and themselves.



Bocce Ball, San Rafael

BACKGROUND

All those people that are in “The Gap,” those numbers will increase because the county is aging. We don’t have sufficient resources. Nonprofit Provider Staff

The recession of 2008 left a growing number of moderate-to middle-income seniors with diminished pensions and 401(k) plans, as well as homes and financial portfolios that plummeted in value. Many seniors, primarily those living on Social Security, fell into “The Gap” — unable to make ends meet, yet not eligible for support services. Then, as state and federal funding all but dried up, the county strengthened alliances with numerous nonprofits, notably the Marin Community Foundation (MCF), in order to offset reductions. Fortunately, in the last year, the economy has improved, and we hope this trend continues.

The federal government has long had programs designed to help the poor. There is a Federal Poverty Level (FPL) adjusted yearly. Currently, this equates to an income of \$11,670 annually for one person or \$15,730 for a couple. Those who meet FPL guidelines usually qualify for programs such as Supplemental Security Income (SSI), Supplemental Nutrition Assistance Program (SNAP) and In-Home Supportive Services (IHSS). However, these programs cannot meet anything more than basic needs, barely enough for marginal living in Marin County.⁵

We will stop for a moment to describe “The Gap,” a term we use throughout this report. A more realistic benchmark to describe people struggling economically is the Elder Economic Security Standard Index (Elder Index), which takes into account real costs of living. In Marin, the current income allotted under this Elder Index for a single senior renter is about \$29,000 per year. Consequently, those making more than the FPL, but less than the Elder Index, are considered to be “in the gap.” (See Appendix A for a graphic example of the shortfall).⁶ In our investigation, we found that researchers are generally using the Elder Index as the point of reference to study low-income seniors.

In our reviews of the literature and in interviews, a frequently expressed goal is the option for seniors to “age in place.” The Grand Jury questions whether this goal is realistic for middle-class seniors with dwindling resources. As the senior population grows, the numbers of people needing to find other living situations will increase. The majority of those we interviewed shared our concern. If our elders need to find other places to live because of physical, mental or financial problems, there will be a concurrent increase in demand for social services.

Looking at the numbers, recent demographic studies show:

- Approximately 68,000 people over the age of 60 live in Marin County in 2014.⁷
- Of these, between 9,000 and 12,000 live below the Elder Index, that is, they exist on less than \$29,000 per year as individuals or \$37,000 for couples.⁸
- In Marin, there are approximately 3,500 people over 65 years old living on incomes below the FPL.
- The population in Marin of people over 60 is expected to grow by 53,000 to 121,000 by 2030. (See Appendix B)

As part of the safety net, delivered meals for the homebound, congregate meal programs, (nutritionally balanced meals served at specific locations such as community centers), and food provided by the San Francisco/Marin Food Bank can be crucial for struggling seniors. Congregate meal locations vary throughout the week and the Food Bank offers nutritious groceries at several sites every month.

⁵ <http://www.aspe.hhs.gov/poverty/14poverty.cfm>

⁶ <http://www.healthpolicy.ucla.edu/programs/health-disparities/elder-health/EIRD2011/Documents/Marin.pdf>

⁷ Marin County Division of Social Services Aging and Adult Services, *Live Long, Live Well: Area Agency on Aging Plan Fiscal Year 2014-2015 Update*, p. 5

⁸ Harder & Co. Community Research, *Successful Aging in Marin*, p. 1, Undated Document.

Meals on Wheels deliver meals only to people deemed “homebound,” that is, unable to leave their homes without assistance. During our review, we discovered a wait list for delivered meals, and the county, due to reduced funding, has tightened its definition of “homebound,” limiting the number of people who qualify.

The county is blessed with many well-educated, committed people who are concerned about the hardships of elders. Well-documented reports produced by the County and studies contracted by MCF attest to the growing number of seniors in Marin and the problems they face. Each report comes with recommendations for change. Unfortunately, reports and studies (including our own) are not action. Unless the reports result in actions, they tend to delay the process, offering only the illusion of change.

APPROACH

In assessing the availability and accessibility of senior services, the Grand Jury reviewed numerous published reports and studies on elder care. Included in this review was information on programs both in and outside Marin County. The Grand Jury interviewed thirty-four individuals, including staff of the Department of Health and Human Services (DHHS), employees of fourteen nonprofit organizations, a member of the Board of Supervisors (BOS), as well as two healthcare providers. Members of the Grand Jury also observed BOS and Commission on Aging (COA) meetings, toured a Residential Care for the Elderly facility, and visited several senior community centers. In an effort to assess their efficiency, adequacy, and accuracy, Grand Jurors phoned information and referral phone lines.

Since the Older Americans Act (OAA) provides services to a qualified person over the age of sixty, this report will use that as its working definition of a *senior*.

DISCUSSION

The Grand Jury recognizes there are additional issues vital to seniors, but they are outside the scope of this report. The most important is housing. Marin lacks reasonably priced housing that is appropriate for seniors. The demographic projections reveal that there will be a rapidly growing set of seniors who are not able to live in their current residences for either health or financial reasons, consequently, the need for affordable, accessible apartments and rooms will increase. A recent study shows that even relatively expensive facilities providing assisted living are over 90 percent full.⁹

⁹ Live Long, Live Well: Area Agency on Aging Area Plan Fiscal Year 2014-2015 Update, Marin DHHS



Senior at retirement center

Definition of “Senior”

The Grand Jury discovered in conducting our initial research that there seems to be no agreement on what defines a senior. As mentioned above, we are using 60 years old, yet some studies use 62, and most often 65.

What actually defines this target population is *ability* and not age. An 85 year old, driving safely, playing golf or tennis and regularly seeing friends may be a senior, but is not in need. In this report our primary concern is for seniors who: (1) are unable to leave their homes without assistance due to physical or psychological issues; (2) have lost their primary social network because of deaths or moves; or, (3) lack adequate income to cover basic needs.

Senior Needs

Twenty percent [of seniors] struggle to make ends meet... DHHS Senior Staff Member

As we age, our abilities often diminish. Over time, more and more of us require some help with activities of daily living. It could be that arthritis makes it difficult to cook a meal, because standing and lifting are painful, or diminished eyesight forces a senior to give up driving, consequently needing help with transportation. Then, if memory fades, help is needed to make day-to-day decisions and handle finances. These changes affect people across all socio-economic, racial and geographic strata. What differs is how support is provided.

Affluent county elders who need help in the home might simply hire someone to clean, cook, or drive. Others may have family or friends nearby who can step in to deliver services. However, a significant number of seniors do not have the resources to remain independent at home.

During our interviews, we repeatedly heard about the things that are important to older people. Most mentioned the same things: safe and adequate housing, access to outside services - principally health care - and wholesome nutrition and connection with others, as well as a way to feel useful. These things are no different for seniors than for people of any age. The difference is that fulfilling them often requires outside help.

Leadership: Who is Responsible?

I think the county is best to do it (take the lead) in partnership with community organizations, others that we haven't connected with, cities and municipalities and the business community... We need to work the policy... at the county, with the Board of Supervisors (BOS). Influence is better wielded by county organizations.
DHHS Senior Staff Member

Every Marin County official we queried said the County was ultimately responsible for providing a safety net of services for seniors. In practice, the County provides some services directly, while others come from nonprofits or other governmental agencies, such as the federal government.

For seniors in need, we discovered a three-pronged approach to providing care: the County, nonprofit organizations and voluntary providers.

First, the County, for its part, supplies some services directly, such as: Adult Protective Services (APS), IHSS and health care in transition from hospital to home. Other services are contracted out with grant monies. All of these services are paid for, at least in part, with federal or state funds.

Second, by collaborating with nonprofits and other entities, the County believes it can better leverage limited income streams. Funds that the nonprofits receive through County contracts represent only a fraction of their overall budgets. Nonprofits must raise funds to make up the difference.

The third prong — volunteers comprised of family, friends, neighbors, and entities such as churches or fraternal organizations that do not receive County funding — are an essential part of this care system.

This combination of entities may provide seniors with many needed services now. However, without strong leadership, the system will not be able to plan, prepare and implement programs that can provide needed services to the growing number of seniors in the county who will require these programs in the future.

In its 2007 report on seniors, the Grand Jury stated that in more than 50 interviews they did not find “.... a single strong voice, a leader who speaks for the seniors of Marin. And who has a plan, a real plan.” In our review, we have spoken to over 30 people, and have reached the same conclusion. We found that although there are many in the community

who support senior programs, there is no single person or agency that is considered to be taking the lead in Marin County.

County Services

We see the needs from the Area Plan. Most match funding streams, but we don't have a lot of flexibility with it... We have more Meals on Wheels, but it's only for those who aren't able to drive... We can't take nutrition money into another program.... There's not enough money to make ends meet. DHHS Senior Staff Member

The Division of Aging and Adult Services (DAAS), a major division of the County's DHHS, provides a range of services to seniors.¹⁰ As we learned, all services provided by DAAS are supported by federal and state funding. The funding stream is complex and differs for each program. We spoke with several County employees, and all agreed that the impetus for programs is availability of outside funding sources and requirements of the Older American and Older Californians Acts.

Some programs, such as APS, (handling cases of senior abuse or neglect) and County staff provide an Ombudsman program for people in long-term care facilities. The County manages IHSS that allots funds enabling senior and disabled people to hire help in the home.

A listing of DAAS programs (see Appendix C) is extensive, however, County services are less than comprehensive. For example, IHSS can offer only limited help in the home for those who meet Medi-Cal's stringent criteria. For seniors unable to handle their activities of daily living, having someone to clean or cook a few hours a day can make a huge difference, allowing people to stay in their homes for a longer period.

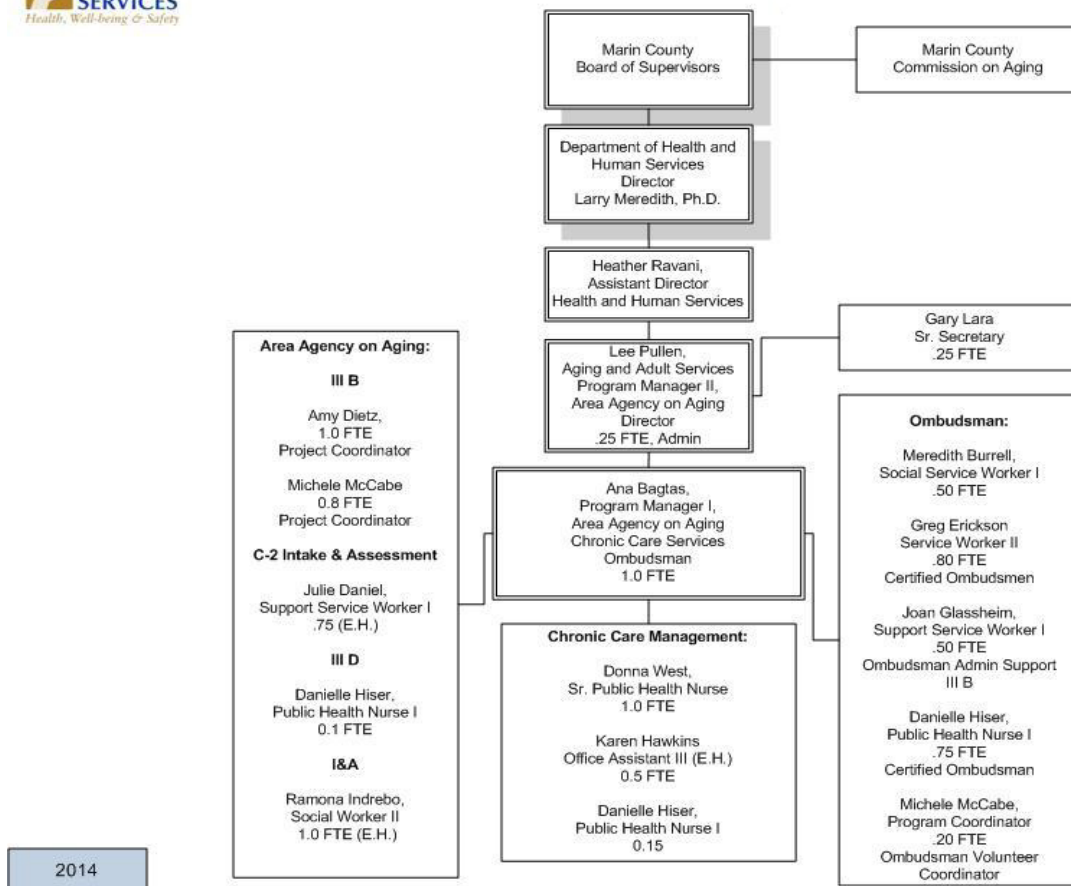
Under dire circumstances, for instance, if a senior is bedbound from progressive Multiple Sclerosis or a stroke, IHSS will cover only about 40 hours a week of in-home care (at \$12.10 per hour.)¹¹ Additional support must come from family, friends or private agencies. For those requiring round-the-clock care, IHSS funding may simply not allow them to remain in their homes indefinitely.

The organizational chart below reflects the current structure of the Division of Aging and Adult Services of the Department of Health and Human Services.¹² It should be noted the COA, in theory, advises the BOS directly. In practice, recommendations are presented to the Supervisors through DHHS staff. A member of the BOS stated that direct formal communications with the COA are rare.

¹⁰ <https://www.marinhhs.org/area-agency-aging>

¹¹ <http://www.pamarin.org/>

¹² County of Marin Department of Health and Human Services, Fiscal Year 2014-2015 Update Division of Social Services Aging and Adult Services, http://www.94903community.org/Area_Plan_14_15_Draft_Website_Copy.pdf



Finance

It's better to have a longer-term view [of finances], but exactly how to address it is much more a short-term issue. Elected County Official

Marin County provides funding for five programs serving seniors: Area Agency on Aging (AAA), Chronic Care Management, Adult Social Services, IHSS Provider Services and Helping Older People Excel (HOPE).

The federal government allocates subsidies to four of these programs (AAA, Chronic Care Management, Adult Social Services and IHSS). In addition, the state supplies subsidies to three of the programs (AAA, Adult Social Services and HOPE). The amount of money the County receives from the federal and state government for these senior services is largely in the form of reimbursements to the County based on the number of people served.

After federal and state funds are used, the County pays the difference to finance these programs. Unfortunately, the County cannot depend upon the federal or state government

to provide a consistent level of funding. For example, several County employees told us that due to the federal government sequestration, the amount of federal funds available for these senior programs decreased in FY 2011/2012 from the year before. In addition, the state's recent economic recession resulted in reduced state funding for these programs.

The County's DHHS provided the Grand Jury with a spreadsheet showing a history of budgeted and actual revenues and expenses for senior adult programs for the past five years. (Appendix D)

During the past four fiscal years, Marin County's net cost for these programs was:

FY 2009/2010	\$7,004,779
FY 2010/2011	\$7,176,611
FY 2011/2012	\$8,921,796
FY 2012/2013	\$7,709,973

Marin County's budget for its senior programs for the current Fiscal Year (2013/2014) is \$10,592,184.

The Grand Jury requested that DHHS provide us with their projected senior program costs for the next five years. We were disappointed to learn that no such document exists. Staff indicated that County budgets for senior programs are largely based upon expected federal and state funding, and to project those figures out more than a year is not productive.

In addition to regular programs receiving government support, the County HHS staff does identify federal and state grants to help supplement funding for some senior programs. While this support is helpful, most of these grants offer limited funding, and they cannot be depended upon over the long term.

Nonprofit Organizations

Without stabilization, people can't have a better quality of life. How can we replace a lack of income, a pension, affordable housing? When people come to us, there's only so much we can do. They don't have a house to live in and not enough income. Add to this, they have disabilities and a fixed income. They're all struggling to make ends meet. And when they retire, there aren't enough funds left to live on. Marin Nonprofit Executive Director

For better or worse, it appears that, as one person noted, "There's no problem that Marin can't create a new nonprofit to address." The Grand Jury has learned the County is particularly rich in the number and diversity of nonprofit agencies. A recent study conducted for the Center for Volunteer and Nonprofit Leadership showed that there are over 1,500 nonprofits in Marin (one for every 175 people.)¹³ In this study, respondents

¹³ <http://www.cvnvl.org/media/69612/CVNL-Full-Report-FINAL-5-9-14.pdf>

confirmed what we had heard as well, that the demand for services, especially linked to changes in income, had increased dramatically since 2008. The study concluded that after the recession of 2008, nonprofits lost funding from most sources, including the County, which has impacted their ability to address this issue. There has been a loss of 171 agencies since 2010, in other words; roughly, 10 percent have closed their doors.

When the Grand Jury interviewed staff of nonprofit agencies serving seniors in Marin, we discovered their budgets are stretched to the limit. Every agency that we examined is attempting to do more with less. Some have wait lists; others are almost full and anticipate wait lists in the future. Several sites serving congregate meals operate at a loss, because seniors pay less for meals than they cost. A member of COA, as well as several County employees, informed us that governmental agencies do not reimburse enough money to cover the total cost of services. Uniformly, staff at the nonprofits also revealed they are not able to pay their employees at competitive rates comparable to the County.

A recent study made available to the Grand Jury points out the inadequacies of some services provided by nonprofits. It says, in part, “69 percent of seniors are at high or moderate risk of poor nutritional health.... federal funding to serve Marin’s aging community is woefully inadequate – there is a waiting list for Meals on Wheels that serves homebound seniors. Meals for seniors are not available every day at senior centers...”¹⁴

In fact, the Grand Jury visited several sites while lunches were served and saw that they were a wonderful opportunity for people to gather and share a meal. However, we reviewed the schedule and realized that geography plays a large part in determining availability.

For instance, a senior in Novato can go to the Margaret Todd Senior Center on the three days a week they provide lunches, while a senior living in Mill Valley could visit the Marguerite C. Johnson Senior Center in Marin City one day per week and could drive to Corte Madera’s Recreation Center another day. In order to have lunch at a congregate site on each of the five weekdays, a senior would have to visit a minimum of three different sites, in three different cities or towns.¹⁵

The Grand Jury notes the abundance of providers. Some nonprofits offer specific services for elders, such as care for people with dementias, and others assist a broad range of the population. Each geographic area may have a different provider or set of providers for similar services. It often is not clear to the uninitiated where to turn for help. (See Appendix E for a listing of many of the agencies providing services to seniors.)

As an example, a low-income senior living in Novato might contact Novato Human Needs Center (NHNC). NHNC serves nine percent of the Novato community, about 4,500 low-income people, of which about 500 are seniors. The food pantry and rental assistance

¹⁴ Adler, op.cit.

¹⁵ <https://www.marinhhs.org/nutrition-services-older-adults>

program at NHNC should sustain this senior, at least temporarily, as rental assistance is normally only for one month. Because she lives in Novato, referral to the Novato Independent Elders Program (NIEP) is another option. NIEP also provides case management, and help with groceries. Their volunteers make phone calls and shop for disabled seniors. At the food pantry, a big draw on Tuesdays, she may meet new friends, as 200 people come each week.

Staff at the NHNC would likely tell her about the Margaret Todd Senior Center (MTSC), where two nonprofits, Novato Senior Services Club and Episcopal Senior Communities, serve congregate meals for only \$3 on Tuesdays, Wednesdays and Thursdays. To qualify for reduced fees, her income must fall below the Elder Index. MTSC also offers a wide variety of classes, groups, trips, etc. to keep older people active and involved. Episcopal Senior Communities, with 696 clients, supplies home-delivered groceries; and clients pay for this service. Telephone wellness checks and Senior Center Without Walls (telephone conferencing) are also available.

The same senior, living in Point Reyes Station, however, would see a completely different roster of agencies. She would probably go to West Marin Senior Services (WMSS) for counseling on available services, perhaps be signed up for Meals on Wheels, but would have an eligibility check done by staff of WMSS, rather than DHSS staff as in the rest of the county. One day a week, she could share a congregate meal with others at the Dance Palace.

A WMSS staff person told us: “We have a significant number of low-income residents here. We can manage 300 clients, 67 percent of them are at the poverty level for Marin, which is gauged by the Elder Index.” It is likely that our elder would be referred to the West Marin Human Services Center, a satellite of Marin DHHS, where application could be made for Medi-Cal, CalFresh (formerly Foodstamps) or APS services. In addition, County staff could establish public health or mental health services.

Clearly, Marin has many private agencies helping seniors. While the Grand Jury applauds the County’s effort at inclusion, the large number of agencies may reduce efficiency in an already cash-strapped situation. A study for the Center for Nonprofit and Volunteer Leadership points out, “.... one organization with a \$5 million budget and 50 staff members has the potential for more efficiency and impact than 50 nonprofits with \$100,000 annual budgets, staffed by Executive Directors only.”¹⁶

One member of the community voiced in exasperation: “The need is far greater than the system can handle. I know of people with early dementia who are not in the system. What good does it do to know there are 200 more in the county (who need services, but can’t be served)?”

¹⁶ CVNL, Op Cit.

Can the current group of nonprofit providers continue to match the growing number of seniors without a significant increase in revenue? Is the current system providing equivalent services to all potential users in Marin?

The answer to the first question would appear to be “no.” If current providers are now struggling to provide services, they will need to find increased revenues as time passes. The second question is harder to answer. Any senior in Marin needing services, with enough ingenuity and perseverance, can find assistance. Where one lives, however, is a predictor of how easy it will be and how many services she or he might receive. Someone living in remote parts of West Marin or the southern Marin hills is less likely to receive a full range of services than a senior living in downtown San Rafael.

The Grand Jury spoke to most interviewees about how nonprofits coordinate services, and these responses varied. Several larger providers of senior services meet with the County DHHS staff once or twice a year. A Community Agencies Serving Seniors (CASS) group of representatives from nonprofits meets quarterly. In addition, there are ad hoc meetings on particular issues or clients. Anecdotally, we understand some COA members are also aligned with nonprofit agencies and may informally carry information back and forth.



Congregate Meal at San Rafael Community Center

Access to Services

.... We entrust the community to know we're here, from our website and information line. You need call only one number. With Aging and Adult Services, there's a 24-hour hotline. From my experience, neighbors, postal employees, family, bank, hospital, 911, and paramedics notify us. DHHS Senior Official

Just like most people, seniors often need additional support following significant changes in their lives. Whether driven by health problems, financial crises or the death of loved ones, seniors (or family members/friends on their behalf) tend to reach out in times of stress. Marin offers two main information & referral call centers designed to provide

citizens with contact information for the wide range of services available across the county:

- **211** is a toll-free telephone line available 24 hours/7 days (operated by United Way of the Bay Area) that “connects callers with local community services, such as food, shelter, counseling, etc.”¹⁷
- **415-457-INFO** (415-457-4636) is a hotline available 8:30 a.m. to 5:00 p.m. Monday through Friday (operated by the Marin County DHHS) “to link older adults and their family members to appropriate services by providing information and referrals.”¹⁸

In order to evaluate the ease of access to information that might be required by a senior, the Grand Jury placed a number of calls to these referral lines assuming the perspective of a senior’s family member seeking information for the first time:

My mother has just moved to Marin. She has adequate resources for day-to-day living, but not a lot of money in savings. She has declined physically and needs help to clean, cook and drive. She is low-income, but is not below the poverty level. I’m calling to find resources for her meals, transport and in-home help. I don’t know what is available.

The results of our calls to “211” with this scenario were disappointing. Operators who responded were in southern California with little or no knowledge of Marin County. We were referred to an agency in Palo Alto and, when we indicated Palo Alto was 50 miles away, we were referred to the Marin County DHHS.

On our first call to the 457-INFO hotline, we were guided through two branches of a telephone tree before a woman answered. She was neither friendly nor helpful, and we had to ask many questions. Because her answers were minimal, we had to prompt her for further details each time. She didn’t seem to care about the problem and, more importantly, she did not volunteer information. We had to probe, and that brought her to refer us to Meals on Wheels, Marin Access (Transit), Whistlestop, Marin Center for Independent Living (MCIL), and medical IHSS. She startled us when we asked for phone numbers, as she responded, “Google it!” It is important to note that she invited us to call back if we had further questions.

Another call to the 457-INFO hotline was a more pleasant experience. We spoke with a helpful woman who provided the appropriate referrals, including detailed information about the Meals on Wheels program. She told us there were seven people on the wait list, but she anticipated “our mother” would start receiving meals possibly within a month.

We contacted the County hotline (457-INFO) two more times with a scenario involving an allegation of potential financial abuse of an elder. In the first call, we received an

¹⁷ 211bayarea.org/marin/

¹⁸ marinhhs.org

automated greeting and left a message, which was returned two days later. The operator referred us to the Institute on Aging Financial Services Program. On our second call, a pleasant woman responded immediately. She was compassionate and seemed to understand the problem. She provided additional referrals that the earlier operator had not. Despite the fact that these two calls involved allegations of elder financial abuse, we were surprised that neither operator made an immediate referral to the APS unit of DHHS. The two telephone information and referral lines appear to be effective for those seeking very specific resources. For callers who only express their needs, the information provided was often too general and sometimes misleading. The 2007 Grand Jury report "Aging in Marin" indicated that the County information line was confusing and often an impediment to helpful information. We find that nothing has changed significantly since that report.

Numerous web sites have information about services. Each nonprofit provider, as well as DHHS, has information online. None that we found was able to help a person to assess their needs. Websites provided either very specific information about the services provided by the agency hosting the site, or, as with the County site and several others, there was a bewildering list of providers. We did find a few publications available online, such as "Choices for Living" produced by DHHS, that is very good at describing the issues and alternatives for people considering leaving their homes.¹⁹

All of these resources, however, share a significant drawback. None provides a method of assessment to help guide a person to the best services for their individual needs. The ideal way for people to navigate the system of care is to be able to talk with a person experienced and knowledgeable enough to help them assess their own situation, understand their needs and then point towards appropriate sources of help.

There are several places where a senior or family member can receive face-to-face advice. Whistlestop offers Information and Referral using volunteer peer counselors. Staff at WMSS or the MTSC, for example, can provide referrals in their respective communities. Social workers and discharge planners at the three area hospitals are excellent sources of information, especially for people transitioning to home with changes in their condition. However, these resources are scattered geographically and organizationally, so that connecting with them is often more a result of chance than anything else.

Another issue that surfaced during our research is that various Marin communities do not have ready access to senior support services, often due to language, cultural differences or geography. The Grand Jury met with members of Mission Possible, a group comprised of people of color and representatives of minority groups. Originally formed to gather information for a study commissioned by the MCF, this group provides on-going outreach to their constituent communities. We learned that some seniors have little or no English language skills. Older immigrants may be alone for long periods while their family members are away at work. Gay and lesbian seniors may be reluctant to come to group activities for fear of encountering negative responses from other participants. LGBT

¹⁹ http://marinsectiononaging.org/wordpress/wp-content/uploads/2013/08/Choices_for_Living_2013.pdf

seniors may also be reluctant to hire caregivers who could be insensitive to their differences from the majority population. In terms of geography, services for homebound seniors living in isolated areas of West Marin or the hillsides above Mill Valley and Fairfax are limited at best.

Inevitably, some seniors may find out about the services they need either through their own networks or from those who have dealt with similar issues and ultimately found workable solutions, often through trial and error. However, it is critical for the County to make improvements in providing reliable uniform access to information about senior services.



Card Players, San Rafael

Planning

Failing to plan is planning to fail. Alan Lakein, time management author

County Supervisor's response to the 2006-2007 report recommending better long-term planning is revealing. When the Grand Jury recommended the County pursue long-term planning for seniors, the response was that the County was doing so. The response cited the series of planning documents known as "Live Long, Live Well." These are actually mandated documents outlining goals for the Area Agency on Aging. As such, they speak primarily about those programs already in place.

The aging population in Marin is increasing annually, resulting in the need to continue to provide increased services. The County must develop a long-term Senior Needs Assessment and related financial strategy to fund these and other programs. The plan would involve obtaining resources from the federal and state government, as well as from nonprofit agencies. The BOS must be prepared, if necessary, to reallocate funding of existing non-senior programs to provide the County's share of needed senior programs.

During the course of our investigation, we became aware that AAA is preparing the Aging Action Initiative. Although the Grand Jury does not know what will be recommended in

this report, we remain concerned that recommendations lead to actions that improve services. Historically, the County has developed a number of reports on the aging, but has yet to implement a comprehensive long-term plan to begin to address this issue.

One important aspect the BOS will need to consider in making decisions on this issue is that a significant percentage of those who vote in Marin County elections are seniors. In 2008, 42 percent of those who voted were 55 years old or older. In 2010, that number was 46 percent, and in 2012, that number grew to 49 percent. These numbers will increase as the population ages.²⁰

Promising Ideas

The Grand Jury identified a number of promising ideas we believe county officials and others should consider as enhancements to current programs.

Navigators

*Family coaches understand services in the county and how to access them. They partner with persons who need them. People call them **navigators**. They offer culture and language appropriateness....* Marin Nonprofit Executive Director.

The Grand Jury discovered from sources in local government and nonprofits that “navigators,” or people experienced with county services, could serve as pathfinders for seniors through the complex network of services.

Hospital and clinic discharge planners and social workers often have knowledge and contact information to make referrals. The 457-INFO (4636) line and County website, as we have mentioned, although flawed, are sources of information. Some nonprofits, notably Jewish Family and Children's Services (JFCS), Marin Center for Independent Living (MCIL), WMSS, and Whistlestop have staff who know the community and can help match people to needed services.

However, finding navigators can be hit or miss. A hospitalized senior visited by a social worker will learn of resource information before discharge. On the other hand, a disabled person may be referred to MCIL and discover this nonprofit has a resource directory. Seniors living at home with no connection to any agency (the majority of seniors) probably would not know where to turn.

Navigator programs exist throughout the country. Often in medical settings, there are specialists in prenatal care, oncology or heart wellness programs who can walk patients through the complicated worlds they need to enter. These navigators often have special

²⁰ Marin County Registrars Office

skills (nurses and social workers), but primarily serve as guides to explain how systems work and how best to negotiate the medical and financial bureaucracies in place.

For mental health, we have Promotoras [educators serving the Hispanic community] who are trained to recognize people who may need help. They are out in the community. Residents do community surveys. There are ways we reach out and ways people know about us. Nonprofit Executive Director

Outreach

The Grand Jury heard from many people there is a lack of awareness among Marinites about issues relating to seniors. There was agreement that people don't plan as they could for the changes that aging may bring. One person suggested marketing; perhaps similar to the advertising related to the "Schools Rule" program, which would focus on how successful aging works, the diversity of older adults and volunteer programs. The Grand Jury imagines that a coalition of County, nonprofits and for-profit companies could join together as they have in other situations, to fund such a campaign.

The County provides speakers and sets up tables at senior-related events. There are certainly opportunities for more aggressive outreach to begin as early as possible to help people prepare for the older years.

The Village Concept

The Villages concept began in Boston and is aimed at keeping seniors active and independent. From their local website: "Marin Villages was formed in response to a 2007 Marin Grand Jury Report on Aging which found Marin County to be one of the fastest aging counties in the State. Rather than depend on agencies or public services, members and volunteers of Marin Villages lean on each other to make life's simple tasks — like driving to the store, changing out batteries on a smoke detector, or learning the newest app on your iPad — still manageable. By matching neighbor to neighbor, not only do we alleviate some daily stress, but we provide opportunities to build new friendships, develop interests and utilize skills and knowledge."²¹

Members of Marin Villages are charged \$365 (single) or \$450 for household annually, or the fees can be paid on a monthly basis of \$32 (single) or \$39 for household. Reduced fees are available based upon income eligibility. The members range in age from the late 50s to late 90s. There were 325 members in 2013, using 150 volunteers, and of those volunteers, 45-50 were members. There are limitations on what services the Villages can offer. Volunteers are not trained professionals and, therefore, people with a high level of need, for instance requiring significant help walking, cannot be served.

²¹ <http://www.marinvillage.org>

The Grand Jury sees great promise in the Villages concept. We hope that this type of grassroots project will prosper. We believe that the County and nonprofit agencies can find ways to partner with The Villages to help expand their reach.

Technology

The Digital Age has arrived in full force — and many seniors are embracing technology at various levels. E-mails and Skype promote connectivity among families not in the same area. Seniors with teen grandchildren learn fast, and we have heard, their empathetic feelings for one another overcome the inevitable learning curve.

The availability of relatively low-cost methods of communication could allow people to remain at home with increased safety. Electronic medical alert systems are available with location tracking, as well as motion detection to notify loved ones if a senior wanders or falls and does not get up. In-home detectors can give loved ones assurance that a senior is mobile, taking medications appropriately and that food is being prepared.²² Seniors in most of the county are already able to order food deliveries by telephone or via the Internet. Computer tablets are now available with senior-friendly features developed for the generations who grew up without PCs or Apples.

Virtually any assistive device that can keep a senior out of a nursing facility will be cost effective for the community. The problem is paying for them. For low-income seniors, even a simple computer may be cost prohibitive. Programs that can reduce the costs, or allow payments over time or sharing, could potentially save vast amounts of money.

Conclusion

There's one more terrifying fact about old people: I'm going to be one soon.
P.J. O'Rourke, political commentator

The Grand Jury concludes that there are many rich and varied services for seniors in Marin. However, low-income seniors are not benefiting as much as they should be. Yes, low-income seniors can get some help in 2014, with food, limited assistance in the home, and transportation, but it won't always be enough to keep people at home. Demand currently outstrips the availability of services. The system cannot be stretched much further. The safety net is frayed.

Next year, there will be more low-income seniors, and even more the following year. We can expect increased demand every year for the foreseeable future. It appears there is no plan for expansion to meet those needs.

²² <http://abcnews.go.com/Technology/story?id=6722085&page=2>

The Grand Jury encourages the County to formally recognize the challenges it faces with assisting the needs of the growing senior population and begin to develop a long-term strategy and financial plan to address those needs.

FINDINGS

The Grand Jury finds that:

- F1. Marin County senior population will grow significantly over the next ten years.
- F2. Marin County does not have a comprehensive, long-term, strategic and financial plan to accommodate the inevitable growth in the number of low-income seniors.
- F3. There are a growing number of Marin seniors without adequate financial resources to meet their basic needs.
- F4. There is a lack of recognized leadership in addressing senior needs in Marin County.
- F5. County programs are largely in existence because of the availability of federal and state sources. These funds were drastically reduced during the recent recession and as a result of the federal government's sequestration.
- F6. Many services for seniors are provided by nonprofit agencies, often using volunteers. These agencies are not fully funded by the county and must use donations and fees to cover costs.
- F7. Information for senior services is inconsistent and often difficult to access.
- F8. Services provided to seniors in Marin are inconsistent geographically.

RECOMMENDATIONS

The Grand Jury recommends that:

There is no recommendation associated with F1.

- R1. The County take on the leadership role by developing a long-term strategic plan that will address needs of the senior population and identify potential funding sources. This would include an assessment of currently unmet needs of low-income seniors in all areas of the county and work to provide services to address them.
- R2. The County work with federal and state governments and nonprofits to provide adequate funding for mandated services, such as the Meals on Wheels program, to insure that there are no wait lists for eligible Marin seniors.
- R3. The County work to improve access to services by:
 - a. Improving information and referral phone lines to make them more user-specific, friendly and immediate.

- b. Providing training to organizations that offer information on senior programs to insure complete and uniform referrals to appropriate services.
- c. Working with existing nonprofit agencies, encouraging development and staffing of a navigator program to be available to all senior citizens needing help finding adequate supports.
- d. Working with nonprofits and other entities in establishing an aggressive outreach and/or advertising program to educate Marin County residents about services for seniors.

R4. The County develop a contingency plan for funding services when state and federal funding sources are unavailable or reduced.

REQUEST FOR RESPONSES

Pursuant to Penal code section 933.05, the grand jury requests responses as follows:

From the following governing body:

- Marin County Board of Supervisors

The governing body indicated above should be aware that the comment or response of the governing body must be conducted in accordance with Penal Code section 933 (c) and subject to the notice, agenda and open meeting requirements of the Brown Act.

The following individual is invited to respond:

- Director, Marin County Department of Health and Human Services

BIBLIOGRAPHY

- Burd-Sharps, Sarah & Lewis, Kristen. "A Portrait of Marin: Marin County Human Development Report 2012," American Human Development Project.
www.measureofamerica.org
- Redfoot, Donald, Feinberg, Lynn & Houser, Ari, "The Aging of the Baby Boom and the Growing Care Gap: A Look at Future Declines in the Availability of Family Caregivers," AARP Public Policy Institute.
- "A Report on Services for Older Adults in Marin - Executive Summary." Harder & Company Community Research, September 2008.
- "Aging in Marin: An Essay in Uneasiness," Marin County Civil Grand Jury, May 2, 2007.
- County of Marin: Budget-in-Brief 2013-2014. <http://www.marincounty.org>
- "Live Long, Live Well: Area Agency on Aging Area Plan 2012-2016." FY 2013-2014 & FY 2014-2015 Updates. Marin Health & Human Services.
www.marincounty.org/aging

- Marin County Community Resource Guide, Marin County Office of Education.
<https://www.marinhhs.org>.
- "Mission Possible: Improving the Lives of All Older Adults in Marin — Needs and Assets Scan of Culturally Appropriate Services for Older Adults in Marin County." Research and report by Center for the Health Professions, University of California-San Francisco, January 2013.
- "Resilience, Resourcefulness and Recovery: Marin Nonprofits after the Great Recession — Marin County Nonprofit Landscape Study 2013." Center for Volunteer and Non-Profit Leadership. Prepared by Harder & Company Community Research.

Please Note: Some of the links listed in the footnotes, bibliography and appendices may not be active and might require copying the information into a search engine. At the time this report was prepared, the information was available at the sites listed.

Reports issued by the Civil Grand Jury do not identify individuals interviewed. Penal Code Section 929 requires that reports of the Grand Jury not contain the name of any person or facts leading to the identity of any person who provides information to the Civil Grand Jury. The California State Legislature has stated that it intends the provisions of Penal Code Section 929 prohibiting disclosure of witness identities to encourage full candor in testimony in Grand Jury investigations by protecting the privacy and confidentiality of those who participate in any Civil Grand Jury investigation.

GLOSSARY

AAA	Area Agency on Aging
ADL	Activities of Daily Living
APS	Adult Protective Services
BOS	Board of Supervisors
CASS	Community Agencies Serving Seniors
COA	Commission on Aging
DAAS	Division of Aging and Adult Services
Elder Index	Elder Economic Security Standard Index
DHHS	Department of Health and Human Services
FPL	Federal Poverty Level
HOPE	Helping Older People Excel
IHSS	In-Home Supportive Services
JFCS	Jewish Family and Children's Services
MCIL	Marin Center of Independent Living
MTCS	Margaret Todd Senior Center
MCF	Marin Community Foundation
NHNC	Novato Human Needs Center
NIEP	Novato Independent Elders Program
SNAP	Supplemental Nutrition Assistance Program
SSI	Supplemental Security Income
WMSS	West Marin Senior Services

APPENDIX A

Marin County, CA 2011 Elder Economic Security Standard™ Index

Elder Index Per Year, Annual Comparisons, and Basic Monthly Expenses for Selected Household Types

Elder Index Per Year [†]						
Income Needed to Meet Basic Needs (based on monthly expenses shown below*)	Elder Person			Elder Couple		
	Owner w/o mortgage	Owner w/mortgage	Renter, one bedroom	Owner w/o mortgage	Owner w/mortgage	Renter, one bedroom
	\$19,756	\$40,916	\$29,408	\$28,328	\$49,488	\$37,980
Annual Comparison Amounts						
Federal Poverty Guideline (2011 DHHS)	\$10,890	\$10,890	\$10,890	\$14,710	\$14,710	\$14,710
% of Federal Poverty (Elder Index divided by (/) Federal Poverty Guideline)	181%	376%	270%	193%	336%	258%
SSI Payment Maximum, California 2011	\$9,965	\$9,965	\$9,965	\$16,886	\$16,886	\$16,886
SSI Income Gap (SSI Payment Maximum minus (-) Elder Index)	-\$9,791	-\$30,951	-\$19,443	-\$11,441	-\$32,601	-\$21,094
Median Social Security Payment 2011	\$12,904	\$12,904	\$12,904	\$20,204	\$20,204	\$20,204
Soc Sec Income Gap (Average Social Security Payment minus (-) Elder Index)	-\$6,852	-\$28,012	-\$16,504	-\$8,124	-\$29,284	-\$17,776
*Basic Monthly Expenses Used to Calculate Elder Index						
Monthly Expenses	Elder Person			Elder Couple		
	Owner w/o mortgage	Owner w/mortgage	Renter, one bedroom	Owner w/o mortgage	Owner w/mortgage	Renter, one bedroom
Housing	\$598	\$2,362	\$1,403	\$598	\$2,362	\$1,403
Food	253	253	253	472	472	472
Transportation	239	239	239	335	335	335
Health Care (Good Health)	281	281	281	562	562	562
Miscellaneous @ 20%	274	274	274	393	393	393
Elder Index Per Month	\$1,646	\$3,410	\$2,451	\$2,361	\$4,124	\$3,165

†Note: Annual total may not equal the sum of monthly totals due to rounding.

For the complete report, methodology or other counties visit:

<http://healthpolicy.ucla.edu/elder-index2011>

For more information about the California Elder Economic Security Initiative™ program visit:

<http://www.insightccd.org/communities/cfess/cal-eesi.html>



APPENDIX B



Marin County Population Projections 2000-2035

Age	2000	2005	2010	2015	2020	2025	2030	2035
60-69	20,052	26,400	36,700	45,000	46,900	46,100	40,200	34,000
70-79	15,058	14,500	22,800	26,600	37,200	44,100	44,800	47,700
80+	9,537	11,400	16,400	18,700	22,800	30,000	36,800	49,700
Total	44,647	52,300	75,900	90,300	106,900	120,200	121,800	131,400
Pop Change		17%	45%	19%	18%	12%	1%	8%

Source: Senior Mobility Action & Implementation Plan (Draft) based on data from the Association of Bay Area Governments, September 2009

Appendix C

County Office of Aging and Adult Services, Direct Services:

Public Guardian conducts official conservatorship investigations, and serves as legally appointed guardian for those whom the courts have determined to be incapable of caring for themselves.

Long-Term Care Ombudsman Program advocates for those in Skilled Nursing and Residential Care Facilities; they monitor resident/patient care and regulatory compliance, investigate allegations of abuse or neglect, and provide information on placement matters.

Transitions Nurse Case Management, such as:

- **Chronic Disease Self-Management Program** meets two and a half hours, once a week, for six weeks, in community settings, and is facilitated by two trained leaders, one or both of whom are non-health professionals with chronic diseases themselves.
- **Healthy Housing** offers supportive services to residents of low-income senior housing, enabling residents to age in place and maintain a safe and independent lifestyle.
- **Project Independence/Advanced Care Transitions**, under the supervision of a public health nurse case manager, provides volunteer advocates to assist seniors in transition from hospital to home.

Adult Protective Services (APS), a program to prevent and remedy abuse of elders and dependent adults, strives to reduce risk, maintain and enhance quality of life, promote self-sufficiency and respect the right to self-determination.

In-Home Support Services (IHSS), assistance to elders and disabled adults living near the Federal Poverty Line to avoid out-of-home placement, pays for some domestic and personal care services, so they can remain safely in their own homes.

Office of Veterans Services helps veterans, their spouses and children obtain all types of veteran's benefits.

Information and Assistance (I&A) provides social workers to answer calls from the public regarding the full range of social services and related resources available to Marin county residents.

Area Agency on Aging (AAA), under a framework and funding put forth in the Older Americans and Older Californians Acts, plans, develops, and coordinates services for older adults in Marin County.

- **Information and Assistance (I&A)** links older adults and their families with information and referrals to appropriate services.
- **Nutrition Services** maintains or improves nutritional health and social well being of older persons through appropriate nutrition services, such as home-delivered and congregate meals.
- **Family Caregiver Support**, together with provider Alzheimer's Association, 415-472-4340, offers emotional support, education, training and respite care for family caregivers and grandparents.
- **Alzheimer's Day Care** maintains and improves the well-being of Marin's older adult community through increased access to services, resources and information on healthy aging, dementia care, and Alzheimer's.
- **Transportation**, together with provider Jewish Family and Children Services, 415-491-7060, assists eligible older persons to medical appointments and shopping.

APPENDIX D

Older Adult Services Budget History										
Program		FY 09/10 Budget	FY 09/10 Actual	FY 10/11 Budget	FY 10/11 Actual	FY 11/12 Budget	FY 11/12 Actual	FY 12/13 Budget ⁽⁵⁾	FY 12/13 Actual	FY 13/14 Budget ⁽⁵⁾
Area Agency on Aging	Revenue - Federal	1,242,550	1,116,666	1,198,923	1,292,683	1,061,375	1,131,605	1,154,453	830,659	1,116,368
Area Agency on Aging	Revenue - State	95,642	150,294	87,509	79,300	72,788	72,502	81,920	263,543	93,973
Area Agency on Aging	Total Revenue	1,338,192	1,266,960	1,286,432	1,371,983	1,134,163	1,204,107	1,236,373	1,094,202	1,210,341
Area Agency on Aging	Expense	1,899,610	1,614,749	2,153,326	1,944,033	1,950,109	1,740,227	2,391,064	2,245,434	2,607,430
Area Agency on Aging	Net County Cost	561,418	347,789	866,894	572,050	815,946	536,120	1,154,691	1,151,232	1,397,089
Chronic Care Management	Revenue - Federal	118,957	124,132	103,000	116,996	185,006	96,341	106,000	158,451	512,017
Chronic Care Management	Expense	395,540	395,055	488,786	433,008	469,623	348,925	819,973	440,987	961,556
Chronic Care Management	Net County Cost	276,583	270,923	385,786	316,012	284,617	252,584	713,973	282,536	449,539
Adult Social Services ⁽⁴⁾	Revenue - Federal	571,574	537,985	521,808	340,775	496,912	544,377	3,913,128	4,947,463	1,717,467
Adult Social Services	Revenue - State	3,069,889	2,953,699	3,076,043	4,001,441	2,913,768	2,458,020	1,681,625	1,324,424	1,369,731
Adult Social Services	Total Revenue	3,641,463	3,491,684	3,597,851	4,342,216	3,410,680	3,002,397	5,594,753	6,271,887	3,087,198
Adult Social Services	Expense	5,712,335	5,153,638	6,609,420	6,052,626	6,451,212	6,064,774	6,552,979	5,784,801	6,481,246
Adult Social Services	Net County Cost	2,070,872	1,661,954	3,011,569	1,710,410	3,040,532	3,062,377	2,639,851	837,338	3,394,048
IHSS Provider Services ⁽²⁾	Revenue - Federal	1,299,109	1,102,601	1,284,654	1,277,779	1,284,654	1,079,031	1,284,654	888,019	1,283,239
IHSS Provider Services	Revenue - State	761,870	538,000	752,233	518,659	752,233	640,928	752,233	372,599	753,648
IHSS Provider Services	Expense	6,456,277	5,879,579	6,432,185	5,889,442	6,174,785	6,305,539	6,174,785	6,214,350	6,174,785
IHSS Provider Services	Net County Cost	4,395,298	4,238,978	4,395,298	4,093,004	4,137,898	4,585,580	4,137,898	4,953,732	4,137,898
Helping Older People Excel (HOPE) ⁽³⁾	Revenue-State	1,090,475	1,090,475	1,090,475	1,090,475	1,090,475	1,090,475	1,090,475	1,090,475	362,000
Helping Older People Excel (HOPE)	Expense	1,575,610	1,575,610	1,575,610	1,575,610	1,575,610	1,575,610	1,575,610	1,575,610	1,575,610
Helping Older People Excel (HOPE)	Net County Cost	485,135	485,135	485,135	485,135	485,135	485,135	485,135	485,135	1,213,610
Total Revenue		7,488,196	7,422,139	7,074,192	7,173,739	7,292,149	7,086,257	6,514,276	9,222,535	9,972,739
Total Expense		16,039,372	14,618,631	17,259,327	15,894,719	16,621,339	16,035,075	17,514,411	16,261,182	17,800,627
Net County Cost		7,789,306	7,004,779	9,144,682	7,176,611	8,764,128	8,921,796	9,131,548	7,709,973	10,592,184
1. Program funding is provided for "Older Adults" in most cases age 62 and above. 2. IHSS Provider Services budget reflects the county cost of IHSS provider salaries and the Administration of the IHSS Public Authority. Costs are driven by caseload. 3. The HOPE program is funded with Prop. 63 MHSA funds. 4. Adult Social Services includes Adult Protective Services (APS) and In Home Support Services (IHSS) 5. Community Care Transitions grant budgeted. Program has since been cancelled.										

APPENDIX E

Selected Nonprofit Agencies Serving Seniors

Alzheimer's Association – Marin Chapter, 4340 Redwood Hwy, San Rafael, CA 94903, 415-472-4340, <http://www.alz.org/norcal> Alzheimer's Association provides services to caregivers and those recently diagnosed with the disease, conducts early stage group discussions led by master facilitators and offers a 24/7 helpline — 800-272-3900 —manned by a highly trained staff.

Canal Alliance, 91 Larkspur St., San Rafael, CA 94901, 415-454-2640, <http://www.canalalliance.org> Canal Alliance helps low-income Spanish-speaking immigrants, including seniors, with a Food Bank on Tuesdays, English, job search, a place to live, computer skills, etc.

Institute on Aging, 3575 Geary Blvd., San Francisco, CA 94118, 415-750-4111, www.ioaging.org Institute on Aging enhances the quality of life for adults as they age by enabling them to maintain their health, well-being, independence and participation in the community.

Jewish Family & Children's Services (JFCS), 600 5th Ave, San Rafael, CA 94901, (415) 491-7960, www.jfcs.org/services/seniors JFCS serves seniors of all faiths with transportation, grocery shopping, mental-health services, financial assistance, or medical care.

Marguerite C. Johnson Senior Center, 640 Drake Ave, Marin City, CA 94965, c/o Marin City Community Services District (MCCSD), 415-332-1441.
The center sponsors three senior clubs: The Blind & Visually Impaired Group, Grandparents Group and Sunshine Club.

Marin Center for Independent Living (MCIL), 710 Fourth St., San Rafael, CA 94901, (415) 459-6245, TTY: (415) 459-7027, www.marincil.org
MCIL supports those with disabilities, including seniors, to achieve sustainable independence through assistive technology, home modifications, independent living skills training and individual advocacy.

Marin Community Foundation (MCF), 5 Hamilton Landing #200, Novato, CA 94949, (415) 464-2500, <https://www.marincf.org>
MCF, established in 1986 from the trust of Leonard and Beryl H. Buck, manages approximately \$1 billion in assets and distributes about \$50 million annually in grants, part of which supports local nonprofits for seniors.

SF-Marin Food Bank, 75 Digital Drive, Novato, CA 94949, 415-883-1302, <http://www.sfmfoodbank.org> SF-Marin Food Bank disburses supplemental food throughout Marin County through its partnership agencies.

Marin Villages, 415-457-4633, www.marinvillage.org, as part of the nationwide Village Movement, helps seniors remain in their homes as they age. By matching neighbor to neighbor, members build friendships and share skills and knowledge. Included are: Homestead, Mill Valley, North San Rafael, Ross Valley and Tiburon Peninsula.

Novato Human Needs Center (NHNC), 1907 Novato Blvd., Novato, CA 94947, 415-897-4147, www.nhnc.org. NHNC supports low-income seniors through immediate crises and toward self-sufficiency with rental assistance and a food pantry.

Novato Independent Elders Program (NIEP), a program of Episcopal Senior Communities, a nondenominational nonprofit organization, at Margaret Todd Senior Center, 1560 Hill Road, Novato, CA 94947, 415-899-8296, www.ci.novato.ca.us/index.aspx?page=562 <http://jtm-esc.org>. NIEP offers support and advocacy for senior citizens, especially frail, low-income and multicultural adults.

Novato Senior Services Club, circa 1964, a nonprofit sponsored by the City of Novato Parks, Recreation and Community Services Department, at Margaret Todd Senior Center, 1560 Hill Road, 415-899-8290, www.cityofnovato.org/Index.aspx?page=563. Novato Senior Services Club provides fellowship and recreation for members.

Senior Access, Wilfred George Adult Day Care Center, 70 Skyview Terrace, Bldg. B, San Rafael, CA 94903, 415-491-2500, <http://www.senioraccess.org>. Founded in 1973, Senior Access supports elder care for those with memory loss, enabling respite for family members who care for seniors at home.

Spectrum LGBT Center, circa, 1998, 30 N. San Pedro Road, #160, San Rafael, CA 94903, 415-472-1945, info@spectrumlgbtcenter.org. Spectrum engages, empowers and advocates for Lesbian, Gay, Bisexual and Transgender people, including senior citizens.

West Marin Senior Services (WMSS), 11435, California 1, Point Reyes Station, CA 94956, (415) 663-8148, <http://www.wmss.org>. For over 35 years, West Marin Senior Services has provided in-home support, assisted living and community services that foster independence and participation in the rural life of the community.

Whistlestop, Marin Senior Coordinating Council (MSCC), 930 Tamalpais Ave., San Rafael, CA 94901, 415-456-9062, www.whistlestop.org. Founded in 1954, Whistlestop offers older adults a hub for core essential needs: Transportation, nutrition, and connectivity to the community.