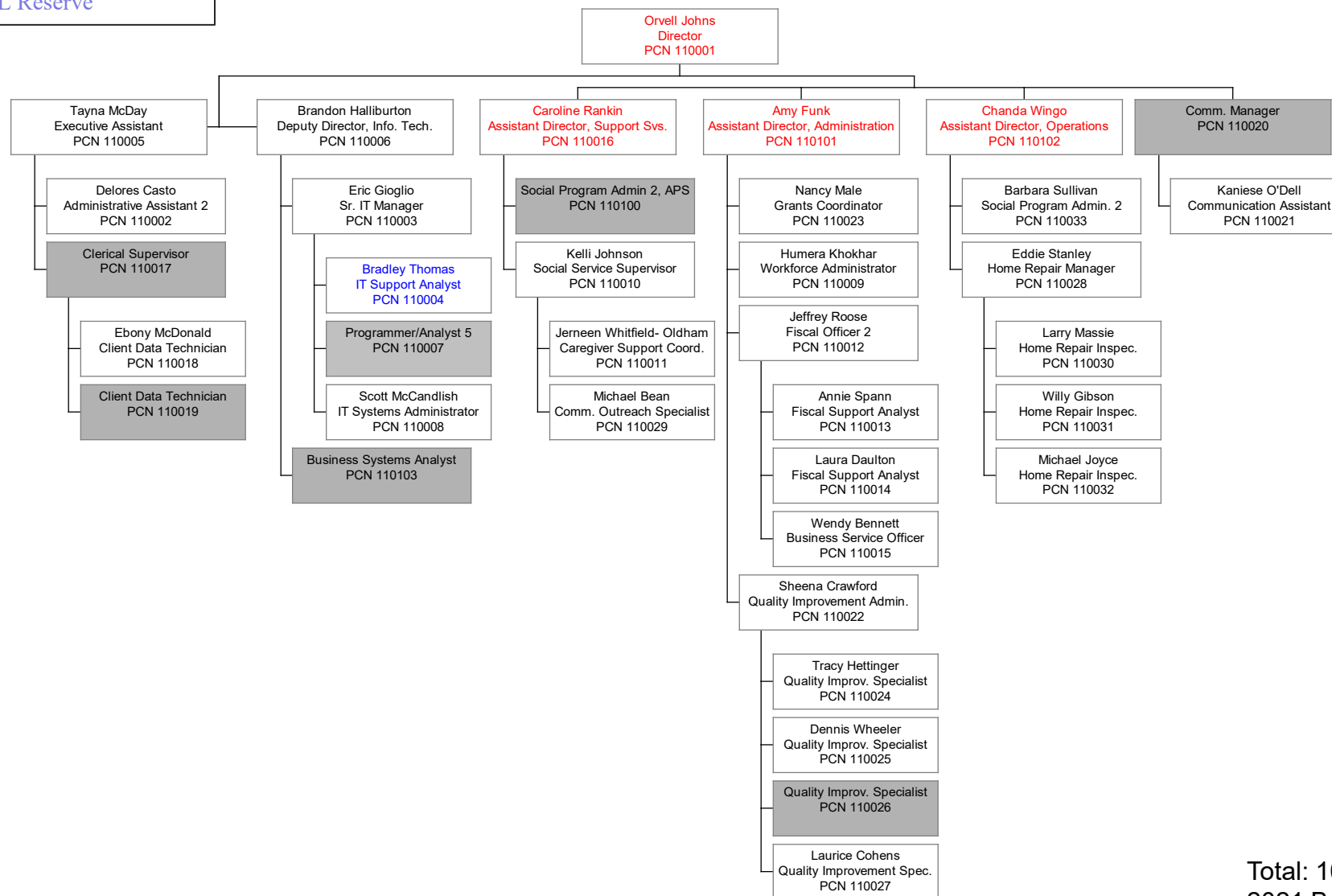


FRANKLIN COUNTY OFFICE ON AGING

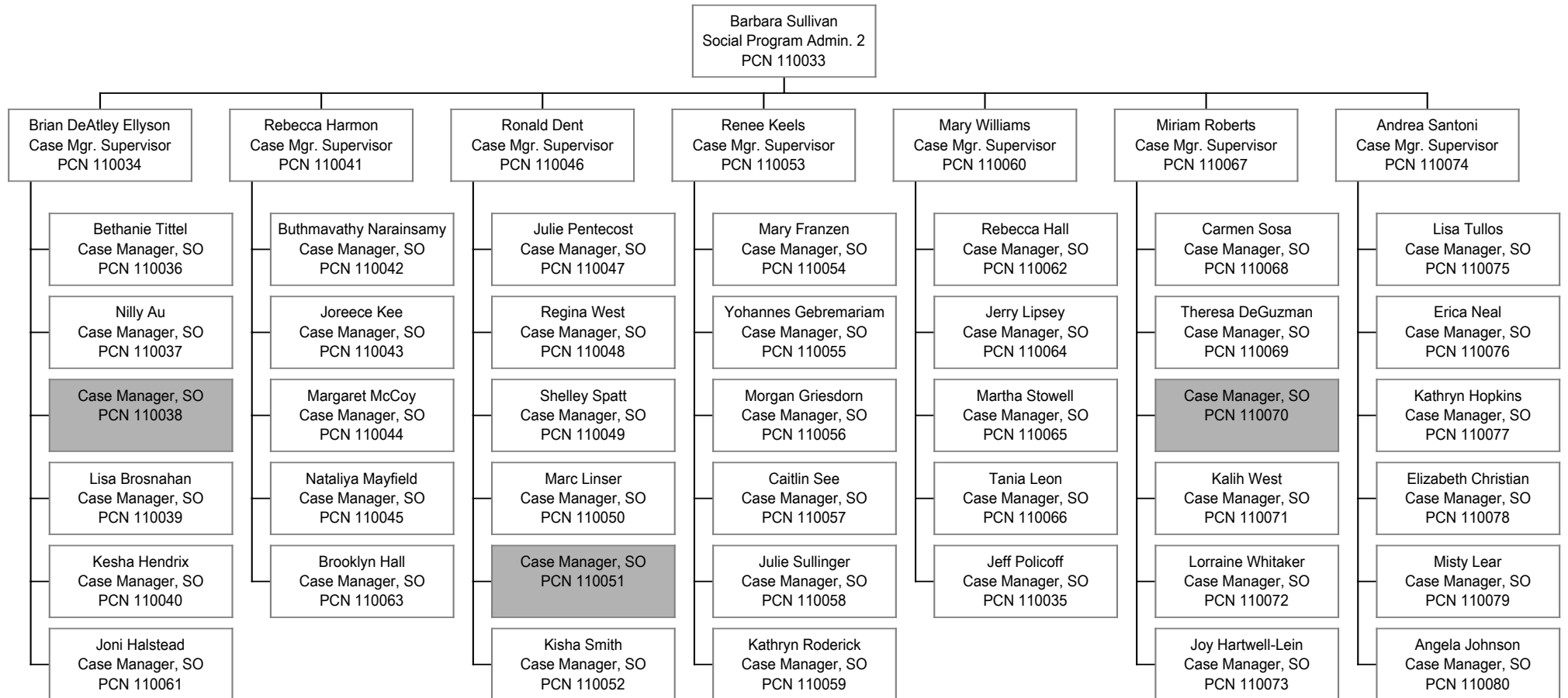
Unclassified Position
TWL
Potential New Hire
Posted
Vacant
TWL Reserve



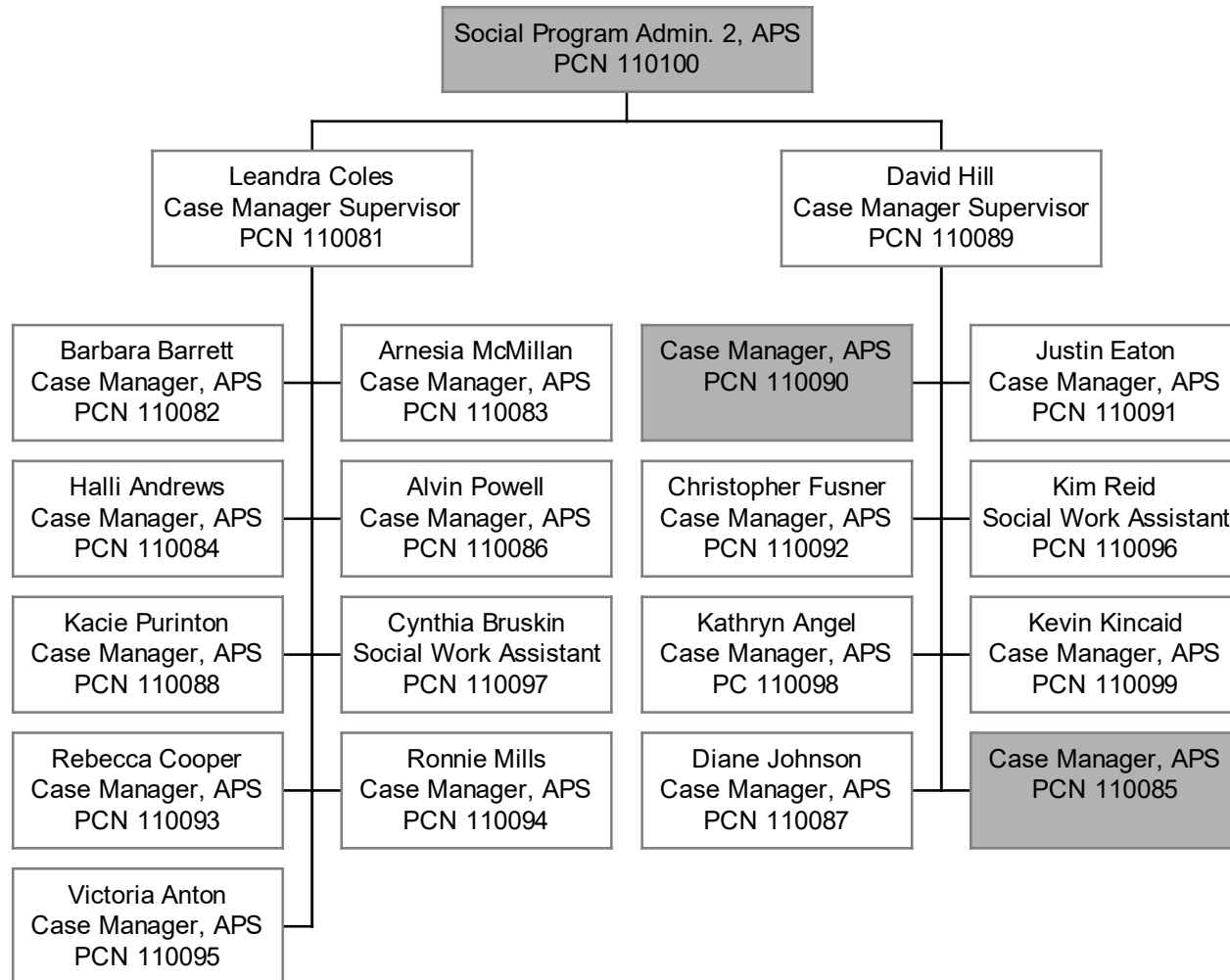
Total: 103
2021 Budget

2/22/2022

Senior Options



Adult Protective Services



FCSO Provider List
(This list is updated daily with any changes.)

FRANKLIN COUNTY SENIOR OPTIONS New rates effective November 1, 2020	Homemaker	Personal Care Assistance	Respite	Adult Day Services	Home Delivered Meals	Emergency Response Systems	Transportation Lift	Transportation Non-Lift
A-1 Preferred Sources 2500 Corporate Exchange Dr., Suite 220 Columbus OH 43231	\$23.46	\$23.72	\$23.72					
Aarow Express LLC 261 W. Johnstown Rd. Suite 212 Columbus, Ohio 43236							\$5.50	\$3.69 Escort: \$35
ABC Star Services (ABC Ocheltree Inc.) 1100 Beecher Crossing North, Suite B, Gahanna, OH 43230	\$23.56	\$23.66	\$23.66					
ABLE Support Services, Inc. 2931 E.Dublin Granville Rd, Suite 190 Columbus, Ohio 43231	\$23.26	\$23.45	\$23.45					
ADT,LLC 32100 U.S. Highway 19 N Palm Harbor, FL 34684						V: \$17.00 P: \$4.95 C:\$17.00 Fall: (cell only)\$4.95		
Airport Taxi Service, Inc. 4900 Reed Road #209 Columbus, OH 43220							\$6.40	\$2.92
Always Neighbors, LLC 2392 Stewart Hollow Court Hilliard, Ohio 43026	\$23.73 Escort: \$35.60	\$23.92	\$23.92					
Angels Extended Care Home Health Services 7606 Slate Ridge Blvd. Reynoldsburg, OH 43068	\$21.94	\$21.94	\$21.94					
Arcadia Home Care and Staffing (Addus) 425 Schrock Rd., Suite 204 Westerville, Ohio 43081	\$21.47	\$22.39	\$22.39					
Assisted Care by Blackstone 445 Hutchinson Avenue Suite 640 Columbus Ohio 43235	\$20.66	\$20.66	\$20.66					
Best Choice Transportation 6500 Busch Blvd, Suite 128 Columbus, Ohio 43229							\$4.45	\$3.50
Blue Cab of America 5900 Roche Drive, Suite LL13 Columbus, Ohio 43229							\$6.00	\$3.50 Escort: \$27
Bobcat Radio Service, Inc. 1097 Camden Ave Columbus, Ohio 43201								\$3.75

FCSO Provider List
(This list is updated daily with any changes.)

FRANKLIN COUNTY SENIOR OPTIONS New rates effective November 1, 2020	Homemaker	Personal Care Assistance	Respite	Adult Day Services	Home Delivered Meals	Emergency Response Systems	Transportation Lift	Transportation Non-Lift
Bobcat Taxi, LLC 1097 Camden Ave. Suite B Columbus, Ohio 43201								\$3.50
BrightStar Care/Advanced Home Health Care 1685 Old Henderson Rd. Columbus, Ohio 43220	\$23.73 Escort: \$35.60	\$23.92	\$23.92					
Caring Hands Transport. of Ohio, Inc./Harrison Transportation Mgmt. 2167 S. James Road Columbus, Ohio 43232							\$5.50	\$3.50 Escort: \$35
Central Ohio German Village Taxi 3463 Halpern Street Gahanna, OH 43230							\$5.50	\$3.75
Certified ZipMobility2Go, Inc. 1230 Little John Drive Columbus, Ohio 43227							\$5.46	\$3.66 Escort: \$30
Chosen Home Care Services, LLC 1600 Brice Rd. Suite D Reynoldsburg, Ohio 43068	\$20.00 Escort: \$30.00	\$20.25	\$20.25					
Clossman Catering, LLC 3725 Symmes Road Hamilton, Ohio 45015					F: \$6.85			
Columbus Family Heath Care, LLC 1425 E. Dublin-Granville Rd., Suite 110 Columbus, Ohio 43229	\$23.73	\$23.92	\$23.92					
Columbus Global Family Care, LLC 6100 Channingway Blvd Suite 402 Columbus Ohio 43232	\$21.88	\$22.90	\$22.90					
Columbus Green (Yellow) Cabs 1989 Camaro Avenue Columbus, Ohio 43207							\$5.20	\$3.30
Comforcare Senior Services of Central Ohio 6430 E. Main Street 102 Reynoldsburg, Ohio 43068	\$23.63 Escort: \$35.45	\$23.92	\$23.92					

FCSO Provider List
(This list is updated daily with any changes.)

FRANKLIN COUNTY SENIOR OPTIONS New rates effective November 1, 2020	Homemaker	Personal Care Assistance	Respite	Adult Day Services	Home Delivered Meals	Emergency Response Systems	Transportation Lift	Transportation Non-Lift
Connect America.com, LLC 816 Park Way Broomall, PA 19008						V: \$22.00 GPS: \$32.00 Cell: \$27.00 MM:\$30.00 IM: \$20.00 Fall: \$5.00 Strobe: \$5.00		
Covenant Home Health Agency, LLC 3805 N. High St. Suite 204 Columbus, Ohio 43214	\$23.73 Escort: \$35.60	\$23.92	\$23.92					
Covenant Home Health Plus, LLC 5109 W. Broad Street, Suite 205 Columbus, Ohio 43228	\$23.56	\$23.77	\$23.77					
Critical Signal Technologies, Inc 27475 Meadowbrook Road Novi, MI 48377						V: \$23.00 GPS \$35.00 C: \$26.00 P: \$5.00 MM: \$30.00 IM: \$20.00 Fall:+\$10		
Crosby's Drugs, Inc. 2609 N. High Street Columbus, OH 43202	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Day and Night Transportation Services, LLC 2700 E. Dublin-Granville Road, Suite 433 Columbus, OH 43231							\$5.75	\$3.25 Escort: \$29
Diversified Health Management, Inc. 3569 Refugee Rd. Suite, C Columbus, Ohio 43232	\$23.72	\$23.92	\$23.92					
Duraline Medical Products, Inc. 324 Werner St. PO Box 67 Leipsic, OH 45856								
Embassy Forest Hills Adult Day Center 2841 E. Dublin-Granville Road Columbus, OH 43231				\$52.87 T: \$21.60 B: \$16.89				
Express Medical Transportation 700 Morse Road, Suite 104A Columbus, OH 43214							\$5.95	\$3.95 Escort: \$35
Express Taxi and Medical Transport LLC 4770 Indianola Avenue Suite 108 Columbus, OH 43214							\$4.75	\$2.95 Escort: \$25

FCSO Provider List
(This list is updated daily with any changes.)

FRANKLIN COUNTY SENIOR OPTIONS New rates effective November 1, 2020	Homemaker	Personal Care Assistance	Respite	Adult Day Services	Home Delivered Meals	Emergency Response Systems	Transportation Lift	Transportation Non-Lift
First Light Homecare 130 E. Wilson Bridge Road, Suite 75 Worthington, OH 43085	\$23.73	\$23.92	\$23.92					
Franklin Transportation Resources 2999 E Dublin Granville Rd., Suite 215 Columbus, OH 43231							\$5.50	\$3.75
Friendly Care, Inc. 6501 E. Livingston Ave Unit #3 Reynoldsburg, OH 43068	\$23.26 Escort: \$34.89	\$23.45	\$23.45					
Gentle Hands Non-Medical Homecare (Tender Home Care Providers, LLC) 950 - D Taylor Station Rd., Room 100 Gahanna, OH 43230	\$22.44 Escort: \$33.66	\$22.44	\$22.44					
German Village Shuttle 3463 Halpern Street Gahanna, Ohio 43230								\$3.50
Global Meals (Casleo Corporation) 2761 East 4th Avenue Columbus, OH 43219					HDM: \$6.85 Froz only Kosher \$8.87	Veg. \$8.73 GF: \$8.87 Mech soft/Puree \$9.27		
Golden Rule Home Health Care, LLC 5150 E. Main St. Suite 204 Columbus, OH 43213	\$22.96	\$23.16	\$23.16					
Goodhearts Care Services, LLC 3314 Morse Road, Suite 201 Columbus, OH 43231							\$4.79	3.99 Escort: \$32.99
Grannies Cooked Delivered Meals, LLC 1995 E. Main St. Lancaster, OH 43130					Frzn \$7.58	Mech soft/Puree \$9.27		
Guardian Medical Monitoring 18000 W. 8-Mile Road Southfield, MI 48075						V:\$25.00 C:\$32.00 P: \$10.00 M: \$65.00 IM: \$65.00		
Hands From Heaven, LLC 1624 Brice Rd Reynoldsburg, , Oh 43068	23.26 Escort: \$34.89	\$23.45	\$23.45					
Health Pro, Inc. 950H Taylor Station Road Gahanna, OH 43230	\$19.89	\$20.91	\$20.91					

FCSO Provider List
(This list is updated daily with any changes.)

FRANKLIN COUNTY SENIOR OPTIONS New rates effective November 1, 2020	Homemaker	Personal Care Assistance	Respite	Adult Day Services	Home Delivered Meals	Emergency Response Systems	Transportation Lift	Transportation Non-Lift
Heritage Day Health Centers dba National Church Residences Center for Sr Health 1700 E. Dublin-Granville Rd 43229 (614)890-1099 (back up 890-1224) (614) 236-0586; 240 N. Champion, Columbus OH 43203 (614)253-1185				\$53.93 T: \$22.03 B: \$17.23				
Holland Park Investments LLC dba Universal Transportation Systems LLC dba UTS 20 S. Third St. Suite 233 Columbus, OH 43215							\$4.99	4.99 Escort: \$32.99
Home Health Connection, Inc. 6797 North High Street, Suite 113 Worthington, OH 43085	\$23.72 Escort \$35.58	\$23.87	\$23.87					
Home Instead Senior Care (Ultimate Senior Care) 169 East Livingston Avenue Columbus, OH 43215	\$23.26 Escort: \$34.89	\$23.92	\$23.92					
Immaculate Home Health Care Services 5670 Westbourne Avenue Columbus, OH 43213	\$21.94	\$21.96	\$21.96					
NCR Home & Community Services Central Ohio Health and Wellness(Formerly InCare) 2245 North Bank Drive Columbus, OH 43220	\$23.73 Escort: \$35.60	\$23.45	\$23.45					
Independent US Taxi 3272 Kady Lane Columbus, OH 43232								\$3.50
Inga Taxi (Gint Corporation) 1226 Hooverview Drive Westerville, Oh 43081								\$4.05
Interim Healthcare 784 Morrison Road Gahanna, Ohio 43230	\$23.73 Escort \$35.60	\$23.92	\$23.92					
Ivory Home Health Services, Inc. 1401 Haft Drive Reynoldsburg, OH 43068	\$23.46	\$23.77	\$23.77					
JDT Concierge 5979 E. Livingston Avenue #212 Columbus, OH 43232								\$5.25

FCSO Provider List
(This list is updated daily with any changes.)

FRANKLIN COUNTY SENIOR OPTIONS New rates effective November 1, 2020	Homemaker	Personal Care Assistance	Respite	Adult Day Services	Home Delivered Meals	Emergency Response Systems	Transportation Lift	Transportation Non-Lift
Kemper Shuttle Services 3316 N. High Street Columbus, OH 43202							\$5.55	\$3.13
Life Care Alliance (LCA) 1699 W. Mound Street Columbus, OH 43223	\$23.22	\$23.41	\$23.41		HDM-\$7.55 2HDM = \$15.10 Froz\$6.65 Kosher \$8.47	Veg : \$8.47 Mech soft /Puree = \$9.01 Halal: \$8.47		
Lifeline Systems Company 111 Lawrence St. Framingham, MA 01702						V: \$22.50 C: \$26.00 P: \$5.00 MM: \$50.00		
Love'n Comfort Home Health 2020 Brice Road, Suite 230 Reynoldsburg, OH 43068	\$23.26	\$23.45	\$23.45					
Mary McLeod Bethune Center 271 Hedges Street Mansfield, OH 44902							\$3.90	\$5.60
Mercy Medical Transportation 1395 E. Dublin Granville Rd. Suite 111 Columbus, OH 43229							\$6.99	\$4.50
Metro Transportation 2700 E Dublin Granville Rd. Suite 450 Columbus, OH 43231							\$4.25	\$2.50
Metro Transit/A-1 Shuttle and Taxi 458 Scandia St Blacklick OH 43004							\$4.25	Escort: \$35.00
Nina's Health Care Services, LLC 6455 E. Livingston Ave Renoldsburg, Oh 43068	\$23.73	\$23.92	\$23.92					
Nurse Medical Home Healthcare, LLC 30 Northwest Blvd, Ste 230 Columbus, OH 43235	\$23.26 Escort: \$35.89	\$23.45	\$23.45					
PDQ Transportation DBA Urban Express Charter 1640 E. 5th Ave. Columbus, OH 43219							\$6.00	\$5.00 Escort: \$35
Phoenix Home Health Care Services, LTD 30 Northwoods Blvd. Suite 200 Columbus, OH 43235	\$21.42	\$22.44	\$22.44					

FCSO Provider List
(This list is updated daily with any changes.)

FRANKLIN COUNTY SENIOR OPTIONS New rates effective November 1, 2020	Homemaker	Personal Care Assistance	Respite	Adult Day Services	Home Delivered Meals	Emergency Response Systems	Transportation Lift	Transportation Non-Lift
Precise Mobility Solutions 6161 Busch Blvd. Suite 224 Columbus, OH 43229								\$3.63
Prime Home Care (formerly Ainecare Homecare) 1105 Schrock Road, Ste 208 Columbus, Ohio 43229	\$23.66 Escort: \$35.49	\$23.82	\$23.82					
Pro Care Transportation, LLC 3280 Morse Road, Suite 208 Columbus, OH 43231							\$6.05	\$7.05
Pro Health Care Services, LTD 270 Main St. Groveport, OH 43125	\$23.73	\$23.92	\$23.92					
RX Home Healthcare, Inc. 1000 E. Broad St. Suite 204 Columbus, Ohio 43205	\$23.73	\$23.92	\$23.92					
Reidy Medical Supply 1397 Commerce Drive Stow, Ohio 44224	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Security One Systems, Inc. P.O. Box 485 Reynoldsburg, OH 43068						V:\$32.00 GPS: \$39.00 P: \$8.12 Cell \$38.00 Smk: \$10.00 Strobe:\$10.00 IM: \$32.00 M: \$40.00		
Seed Sowers 700 Morse Rd, Suite 203 Columbus , Oh 43214	23.26 Escort: \$35.04	\$23.45	\$23.45					
Shield HealthCare 17520 Eagle Lake Drive Heights, Ohio 44130 Middleburg	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Simply E-Z of Columbus, Ltd 3593 Interchange Road Columbus, Ohio 43204					\$6.65 = 1 meal \$13.30 =2meals			
Tender Nursing Care 7110 E. Livingston Ave. Reynoldsburg, OH 43068	\$23.73 Escort: 35.60	\$23.92	\$23.92					

FCSO Provider List
(This list is updated daily with any changes.)

FRANKLIN COUNTY SENIOR OPTIONS New rates effective November 1, 2020	Homemaker	Personal Care Assistance	Respite	Adult Day Services	Home Delivered Meals	Emergency Response Systems	Transportation Lift	Transportation Non-Lift
The Patience Home Healthcare Services 3184 West Broad Street, Suite D Columbus, Ohio 43204	\$23.46	\$23.61	\$23.61					
The Sun Home Health 554 W Central Ave Suite 5 Delaware, OH 43015	21.20 Escort: \$31.80	\$22.00	\$22.00					
Triad Home Health Services, LLC 1200 Chambers Road, #307 Columbus, OH 43212	\$21.42	\$21.42	\$21.42					
United P Plus 297 Woodland Ave. Suite 102 Columbus, Ohio 43203	\$21.69	\$21.88	\$22.90					
Valued Relationships, Inc. 1400 Commerce Center Drive Franklin, Ohio 45005					Fall:\$6.12	V: \$24.43 C: \$32.59 GPS \$35.70 P: \$6.12 Smk: \$10.20 M:\$20.40 IM:\$25.50		
Visiting Angels of Central Ohio (NQTWO, LLC) 1660 NW Professional Plz. Suite G Columbus, Ohio 43220	\$23.46	\$23.46	\$23.46					
Washington's Intergenerational Adult Day Care, Inc. 4241 Eastland Square Dr. Suite A Columbus, Ohio 43232				\$53.93 T: \$22.03				
West Side Taxi 310 Pruden Drive Pickerington, OH 43147								\$3.15
Wise Medical Staffing, Inc. 611 Park Meadow Rd., Suite M Westerville, Ohio 43081	\$21.00	\$ 22.00	\$ 22.00					
Wheels to Go (Dublin Express Transport) 4900 Reed Road, Suite 325 Columbus, Ohio 43220							\$6.49	\$4.49 Escort: \$20.00

Agency	Project
1 Alzheimer's Association, Central Ohio chapter	<i>Care Consultation Program</i>
2 Asian American Community Services	<i>Cambodian and Korean Senior Outreach Village Services</i>
3 At Home by High	<i>Blendon Senior Center Transportation</i>
4 Blendon Township	<i>Pulmonary Health for Seniors</i>
5 Breathing Association	
6 Canal Winchester Human Services Corporation	<i>Canal Winchester Senior Transportation</i>
7 Catholic Social Services	<i>Foster Grandparent Program</i>
8 Catholic Social Services	<i>Money Management</i>
9 Catholic Social Services	<i>Senior Companion Program</i>
10 Catholic Social Services	<i>Supportive Services</i>
11 Central Community House of Columbus	<i>Village Central</i>
12 Central Ohio Area Agency on Aging	<i>Medicare Outreach</i>
13 Central Ohio Area Agency on Aging	<i>SPARC</i>
14 Central Ohio Area Agency on Aging	<i>Volunteer Guardian Program</i>
15 Charitable Pharmacy of Central Ohio Inc.	<i>Prescription Access</i>
16 City of Groveport	<i>Groveport Senior Transportation</i>
17 Clintonville-Beechwold CRC	<i>CFS' Senior Small Group Transportation</i>
18 Clintonville-Beechwold CRC	<i>Personal Finance Management</i>
19 Clintonville-Beechwold CRC	<i>Senior Supportive Services</i>
20 Clintonville-Beechwold CRC	<i>Village in the Ville</i>
21 Columbus Recreation & Parks Department	<i>Senior Fitness</i>
22 Columbus Speech & Hearing Center	<i>Senior Hearing Healthcare Program</i>
23 Community Refugee & Immigration Services	<i>Franklin County Older Refugee and Immigrant Program</i>
24 Concord Counseling Services	<i>Westerville/New Albany Senior Support Program</i>
25 Employment For Seniors Inc.	<i>Volunteer Employment Services</i>
26 Gladden Community House	<i>Pantry Senior Services</i>
27 Gladden Community House	<i>Seniors Outreach</i>
28 Greater Hilltop Area Shalom Zone CDC	<i>Ville on the Hill</i>
29 Joint Organization for Inner-city Needs	<i>Prescription and Medical Assistance for Seniors</i>
30 Jewish Family Services	<i>Senior Link</i>
31 Legal Aid Society of Columbus	<i>Housing Crisis Intervention</i>
32 Legal Aid Society of Columbus	<i>LASC Senior Outreach</i>
33 LifeCare Alliance	<i>Community Wellness Centers</i>
34 LifeCare Alliance	<i>Congregate Dining and Transportation</i>
35 LifeCare Alliance	<i>Produce Supplement Program for Seniors</i>
36 Mid-Ohio Foodbank	<i>Connecting Seniors to Fresh Healthy Food</i>
37 NCR Centers for Senior Health	<i>Intergenerational Program</i>

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

38	Ohio State University	<i>Age Friendly Columbus and Franklin County</i>
	Ohio State University Extension Franklin	<i>Senior Series Education</i>
39	County	
	OhioHealth Gerlach Center for Senior	
40	Health	<i>Connecting the Ages</i>
41	St. Stephen's Community House	<i>Senior Supportive Services</i>
42	St. Stephen's Community House	<i>Small Group Transportation</i>
43	Syntero Inc.	<i>Caregiver Consultation Program</i>
44	Syntero Inc.	<i>Older Adult Supportive Services</i>
45	Upper Arlington Commission on Aging	<i>Senior Health and Wellness Program</i>
46	Village Connections	<i>Village Connections Outreach</i>

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Care Consultation Program
Agency Alzheimer's Association, Central Ohio chapter
Address 1379 Dublin Road, Columbus, Ohio 43215
Phone 614-457-6003
Fax 614-457-6634
Web address alz.org/centralohio

Contact person for overall project Pamela Myers, Programs Director
567-302-3612
pjmyers@alz.org

Contact person for referrals Mackinzie Douglas, Care Consultant
614-442-2016 (phone)
614-457-6634 (fax)
mkdouglas@alz.org

Project description

Care consultations are a personalized care assessment service provided by a full-time social worker. They address the issues that arise from possible Alzheimer's disease or other dementias that affect the person living with dementia, the caregiver, the family members through discussion and identification of caregiving challenges, problem solving and the action steps to improve quality of life issues for all.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Cambodian and Korean Senior Outreach
Agency Asian American Community Services
Address 4700 Reed Road, Suite B, Upper Arlington, Ohio 43220
Phone 614-220-4023
Fax 614-220-4024
Web address aacsohio.org

***Contact person
for overall project*** Danny Nam, Senior Services and Special Programs Director
614-203-7474
dnam@aacsohio.org

***Contact person
for referrals*** As above

Project description

AACS staff provides culturally specific comprehensive social services to improve the lives of Cambodian and Korean seniors in Franklin County. The program uses bilingual, bicultural case managers to identify underserved Cambodian and Korean seniors, assess their needs, and provide them with case management services. In conjunction with the Senior Companion Program, staff visit clients who are isolated from society, and conduct case reviews to ensure the seniors receive necessary healthcare and social services. The goal of the program is to bridge the linguistic and cultural barriers, and connect the Cambodian and Korean seniors with mainstream social services and healthcare systems.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Village Services
Agency At Home By High
Address 692 North High Street, Suite 306, Columbus, Ohio 43215
Phone 614-686-4363
Fax
Web address athomebyhigh.org

***Contact person
for overall project*** Katie Beaumont, Executive Director
614-686-4363
Katie.beaumont@athomebyhigh.org

***Contact person
for referrals*** As above

Project description

At Home By High (AHBH) uses a comprehensive, community-based approach to address growing needs of adults aged 60 and older – particularly those that lack economic security, so they can age successfully within their community. AHBH uses volunteers and staff to provide services and social opportunities to ensure lasting mental and physical health for their members. Social events and activities now include a shift to virtual opportunities through the use of Chromebooks, access to internet and training to ensure members feel confident connecting to others from the safety of their homes.

Geographical area project serves

Short North neighborhoods (Victorian Village, Italian Village, and Harrison West), Milo-Grogan and the University District south of 11th Avenue (including Weinland Park). AHBH serves parts of 43201, 43210 and 43215 zip codes.

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Blendon Senior Center Transportation
Agency Blendon Township
Address 6330 Hempstead Road, Westerville, Ohio 43081
Phone 614-882-1260
Fax 614-882-5618
Web address blendontwp.org

***Contact person
for overall project*** Charel Bowman, Director
614-882-1260
cbowman@blendontwp.org

***Contact person
for referrals*** As above

Project description

This program provides transportation to for seniors living in Blendon Township and surrounding areas. Transportation is provided for medical appointments, grocery shopping, prescription pick-up, and to the Blendon Township Senior Center for classes, programs and social activities.

Geographical area project serves

Zip codes 43054, 43081, 43224, 43229, 43230, and 43231

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Pulmonary Health for Seniors
Agency Breathing Association
Address 788 Mount Vernon Avenue, Columbus, Ohio 43203
Phone 614-457-4570
Fax 614-457-3777
Web address breathingassociation.org

***Contact person
for overall project*** Alisha Hopkins, Director of the Lung Health Clinic
614-437-1520
alisha.hopkins@breathingassociation.org

***Contact person
for referrals*** Heather McCary, Pulmonary Health Education Specialist
614-457-4570 ext. 121
Heather.McCary@breathingassociation.org

Project description

The Breathing Association's Pulmonary Health for Seniors program provides education to seniors diagnosed with, or who are at-risk for, Chronic Obstructive Pulmonary Disease (COPD) and their caregivers. Services provided through this program include one-on-one in-home pulmonary rehabilitation services scaled to meet the client's individual needs, community-based classes, and linkages to other community services that address health, safety, nutrition and transportation needs of seniors. The program recognizes that there is a great need for public education on COPD, and will address this via its senior group educational programming efforts.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Canal Winchester Senior Transportation
Agency Canal Winchester Human Services Corporation
Address 80 Covenant Way, Canal Winchester, Ohio 43110
Phone 614-834-4700
Fax 614-834-4700
Web address cwhumanservices.org

***Contact person
for overall project*** Aletha Mullins, Director
614-834-4700
aletha.cwhs@gmail.com

***Contact person
for referrals*** As above

Project description

The Canal Winchester Human Services Senior Transportation Program provides free transportation to all Canal Winchester School District residents aged 60 and over. Medical and dental appointments receive top priority and then are followed by any other transportation needs the clients may have, scheduling permitting.

Geographical area project serves

Canal Winchester School District (zip code 43110) in Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Foster Grandparent Program
Agency Catholic Social Services
Address 197 East Gay Street, Columbus, Ohio 43215
Phone 614-221-5891
Fax 614-228-1125
Web address colscss.org

***Contact person
for overall project*** Tameko Martin, Program Director
614-857-1246
tmartin@colscss.org

***Contact person
for referrals*** Nicole McFadden, Volunteer Coordinator
614-221-5891
nmcfadden@colscss.org

Project description

The purpose of the Foster Grandparent Program is to have Franklin County senior volunteers age 55 and over to stay active in their communities by serving as role models, mentors, and friends to disadvantaged/special needs students in the pre-K through grade 5. The senior volunteers will address the needs of early learning students being prepared for school and elementary-aged children doing better in school. Additionally, the program will allow for inter-generational connectedness that will provide an opportunity for younger and older generations to interact and become engaged in issues concerning our youth and their education.

Geographical area project serves

Franklin County

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

<i>Project</i>	Money Management
<i>Agency</i>	Catholic Social Services
<i>Address</i>	197 East Gay Street, Columbus, Ohio 43215
<i>Phone</i>	614-221-5891
<i>Fax</i>	614-228-1125
<i>Web address</i>	colscss.org
<i>Contact person for overall project</i>	Alecia Howard, Supportive Services Program Director 614-857-1201 ahoward@colscss.org
<i>Contact person for referrals</i>	As above

Project description

The Money Management program identifies seniors, aged 60 or older, who are at risk financially due to exploitation, cognitive decline, physical disability, or poor spending habits. The money management program aims to stabilize any current financial crisis and then educate clients on how to better manage their finances in the future. Clients are assisted with money management tasks that they cannot perform such as paying bills online or suing checks, advocating for clients when their bills are incorrect, and linking clients with appropriate services to help them meet their needs.

Geographical area project serves

Zip codes 43068, 43109, 43110, 43119, 43123, 43125, 43137, 43146, 43201, 43203, 43204, 43205, 43206, 43207, 43209, 43212, 43213, 43215, 43216, 43217, 43222, 43223, 43227, 43228 and 43232

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Senior Companion Program
Agency Catholic Social Services
Address 197 East Gay Street, Columbus, Ohio 43215
Phone 614-221-5891
Fax 614-228-1125
Web address colscss.org

***Contact person
for overall project*** Tony Parks, Program Manager
614-857-1211
tparks@colscss.org

***Contact person
for referrals*** Margo Arnold, Volunteer Coordinator
614-857-1260
marnold@colscss.org

Project description

This program matches low-income active seniors with low-income seniors to provide companionship including outings, visitation, socialization and community engagement to reduce social isolation and increase community engagement with the goal of improved quality of life for both the volunteer and the client. This is a dual beneficiary program.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

<i>Project</i>	Supportive Services
<i>Agency</i>	Catholic Social Services
<i>Address</i>	197 East Gay Street, Columbus, Ohio 43215
<i>Phone</i>	614-221-5891
<i>Fax</i>	614-228-1125
<i>Web address</i>	colscss.org
<i>Contact person for overall project</i>	Alecia Howard, Supportive Services Program Director 614-857-1201 ahoward@colscss.org
<i>Contact person for referrals</i>	As above

Project description

The Supportive Services case managers are licensed social workers who provide specific and ongoing assistance to seniors in the following areas: coordination of direct material assistance, locating and applying for housing, money management, making end of life plans, arranging home care services, assisting with medical appointments and prescription access, transportation, application and maintenance of Medicaid, Medicare, Social Security, HEAP, Ohio Life Line and other assistance programs.

Geographical area project serves

Zip codes 43068, 43109, 43110, 43119, 43123, 43125, 43126, 43137, 43146, 43201, 43203, 43204, 43205, 43206, 43207, 43209, 43212, 43213, 43215, 43217, 43222, 43223, 43227, 43228 and 43232

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Comprehensive Senior Services through Village Central
Agency Central Community House of Columbus
Address 1150 East Main Street, Columbus, Ohio 43205
Phone 614-252-3157
Fax 614-252-9164
Web address cchouse.org

***Contact person
for referrals*** Allison Cozzone, Associate Director
614-252-3157
acozzone@cchouse.org

***Contact person
for referrals*** Jim Trickett, Senior Program Manager
614-252-3157
jtrickett@cchouse.org

Project description

Central Community House has decades of experience responding to the needs of seniors in our community. Effective service provision includes 1. outreach to seniors in the community to inform them about Village Central and its services, 2. weekly programming and activity offerings for seniors aimed at improving social connection and health/wellness, 3. recruitment and engagement of community volunteers to help meet seniors' needs, and 4. case management/navigation to address housing and health barriers.

Geographical area project serves

Columbus' Near East and South side neighborhoods (zip codes 43203, 43205, 43206 and 43207)

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project SPARC
Agency Central Ohio Area Agency on Aging
Address 3776 South High Street, Columbus, Ohio 43207
Phone 614-645-7250
Fax 614-645-7250
Web address coaaa.org

Contact person for overall project Megan Gish, RREACT and SPARC Supervisor
614-569-1145
mgish@coaaa.org

Contact person for referrals As above

Project description

Specialized Program Providing Assessment, Resources and Connection (SPARC) connects Columbus Division of Fire first responder EMS staff to social workers assigned to CDF. EMS makes referrals to the social workers as a coordinated response to non-emergency or excessive (frequent) non-emergency 911 calls by individuals who are in need and often do not have access to other resources.

SPARC will provide assistance to vulnerable individuals who call 911 and may be experiencing unmanaged chronic illnesses, mental or behavioral health conditions, addiction, homelessness, hunger, or other issues. SPARC will provide assistance by connecting these individuals to the appropriate healthcare system or social service agencies for assessment or services.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Medicare Outreach
Agency Central Ohio Area Agency on Aging
Address 3776 South High Street, Columbus, Ohio 43207
Phone 614-645-7250
Fax 614-645-7250
Web address coaaa.org

Contact person for overall project Andy Haggard, Medicare Outreach Program Manager
614-645-7186
ahaggard@coaaa.org

Contact person for referrals John LaMotte, Medicare Outreach Specialist
614-645-8557
jlamotte@coaaa.org

Project description

This project is designed to provide much needed one-on-one assistance to those new to Medicare, current beneficiaries and their caregivers in Franklin County so they can make informed decisions about their healthcare/prescription coverage options. This includes answering questions about and providing assistance with Medicare benefits, claims, access issues and help with Medicare Part D. In addition, the project seeks to find and assist low-income beneficiaries sign up for the Limited-Income Subsidy available to help pay for the prescription drug coverage.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Volunteer Guardian Program
Agency Central Ohio Area Agency on Aging
Address 3776 South High Street, Columbus, Ohio 43207
Phone 614-645-7250
Fax 614-645-8923
Web address coaaa.org

***Contact person
for overall project*** Jane Moog, VGP Case Manager
614-645-3883
jmoog@coaaa.org

***Contact person
for referrals*** As above

Project description

The Volunteer Guardian program addresses the shortage of professional and family guardians in Franklin County by providing trained and program-supported volunteer legal guardians to cognitively impaired individuals, age 60 or over, who live in a nursing home or assisted living facility and who do not have family or friends to be their guardian for medical and quality of life decisions.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Prescription Access
Agency Charitable Pharmacy of Central Ohio Inc.
Address 200 East Livingston Avenue, Columbus, Ohio 43215
Phone 614-227-0301
Fax 614-227-0387
Web address charitablepharmacy.org

Contact person for overall project R. Taylor Reed, Executive Director
614-227-0301
Taylor.charitablepharmacy@gmail.com

Contact person for referrals Beth Collier, Patient Services Manager
614-227-0301
Beth.charitablepharmacy@gmail.com

Project description

The program provides medicine and pharmaceutical services to income-eligible seniors in Franklin County. At regular (typically monthly) visits, each patient receives medication at no cost, education about their medication, appropriate clinical markers (e.g., blood pressure, blood glucose) monitoring, answers to health-related questions or concerns, and information about available community resources and lifestyle modifications (healthy diet, increased activity) that can help improve the outcomes associated with chronic diseases. This continuity of care plan is especially important for seniors with complex medication regimens.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Groveport Senior Transportation
Agency City of Groveport
Address 655 Blacklick Street, Groveport, Ohio 43125
Phone 614-836-7433
Fax 614-836-2999
Web address groveport.org/transportation

***Contact person
for overall project*** Bob Dowler, Director of Transportation
614-836-7433, option 2
bdowler@groveport.org

***Contact person
for referrals*** Lisa Zurbriggen, Transportation Coordinator
614-836-7433, option 1
lzurbriggen@groveport.org

Project description

Groveport Senior Transportation Program serves seniors of the city by providing medical and personal transportation to get clients to needed appointments and to promote a greater sense of independence. The objective is to provide these transportation resources in order to reduce the seniors' reliance on friends and family and to provide safe, accessible and reliable transportation options to them.

Geographical area project serves

City of Groveport, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Personal Finance Management
Agency Clintonville-Beechwold Community Resources Center
Address 3222 North High Street, Columbus, Ohio 43202
Phone 614-268-3539
Fax 614-268-5028
Web address clintonvillecrc.org

Contact person for overall project Bill Owens, Executive Director
614-268-3539
Bill.Owens@clintonvillecrc.org

Contact person for referrals Robyn Brown, Senior Services Director
614-268-3539
Robyn.Brown@clintonvillecrc.org

Project description

The Personal Finance Management program at CRC provides finance management for seniors who are unable to maintain this function on their own. Assistance provided varies from budgeting, debt reduction, completing tax returns, setting up monthly bill payment systems, credit card consolidation, financial organization, planning for property tax and mortgage insurance payments, setting up checking and saving accounts, understanding pension and retirement benefits and how to access them, and accessing additional resources and benefits.

Geographical area project serves

Zip codes 43054, 43081, 43202, 43210, 43214, 43224, 43002, 43016, 43017, 43026, 43064, 43065, 43085, 43212, 43220, 43221, 43234, 43235, 43004, 43211, 43219, 43229, 43230, 43231

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project CFS Senior Small Group Transportation
Agency Clintonville-Beechwold Community Resources Center
Address 3222 North High Street, Columbus, Ohio 43202
Phone 614-268-3539
Fax 614-268-5028
Web address clintonvillecrc.org

***Contact person
for overall project*** Bill Owens, Executive Director
614-268-3539
Bill.Owens@clintonvillecrc.org

***Contact person
for referrals*** Reuben Shendo, Transportation Coordinator
614-268-3539
transport@clintonvillecrc.org

Project description

The Senior Small Group Transportation Program provides transportation for weekly grocery shopping and monthly socialization/educational trips to seniors from 40 designated senior locations. Clintonville-Beechwold Community Resources Center (CRC) in conjunction with four other settlement houses, LifeCare Alliance and Canal Winchester Human Services will provide the service, with CRC being the lead agency.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Senior Supportive Services
Agency Clintonville-Beechwold Community Resources Center
Address 3222 North High Street, Columbus, Ohio 43202
Phone 614-268-3539
Fax 614-268-5028
Web address clintonvillecrc.org

***Contact person
for overall project*** Bill Owens, Executive Director
614-268-3539
Bill.Owens@clintonvillecrc.org

***Contact person
for referrals*** Robyn Brown, Senior Services Director
614-268-3539
Robyn.Brown@clintonvillecrc.org

Project description

The goal of the Senior Supportive Services Program at the CRC is to provide services to seniors that will allow them to remain living independently in their own homes as long as safely possible and to remove barriers to accessing adequate health and wellness services. Each case begins with a home visit and the completion of a bio-psychosocial assessment, which is updated periodically. CRC staff work with the client to develop a service plan and assist with a variety of basic human needs including housing concerns, food security, health and wellness services, budgeting, Medicare, public assistance appointments, and other paperwork. Once these needs are met, the program also addresses higher level needs such as social integration. To accomplish this, CRC provides ongoing socialization opportunities to participants in the program.

Geographical area project serves

Zip codes 43202, 43210, 43214 and 43224

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Village in the Ville
Agency Clintonville-Beechwold Community Resources Center
Address 3222 North High Street, Columbus, Ohio 43202
Phone 614-268-3539
Fax 614-268-5028
Web address clintonvillecrc.org

Contact person for overall project Christine Happel, Program Director
614-268-3539
Christine.Happel@clintonvillecrc.org

Contact person for referrals As above

Project description

Village in the Ville was started in 2015 by a group of community volunteers and neighbors who developed a virtual village to provide support, education, and friendship to adults aged 50 and older in the Clintonville-Beechwold neighborhood. The program meets members' needs through organized social and educational events, volunteer assistance, referral to service providers, volunteer help with tasks inside and outside the home, and assistance with research, information, and service coordination. Volunteers help with transportation, minor home maintenance repair, friendly visiting or phone calls, pet care assistance, computer/technology help, assistance with errands, and clerical/office work.

Geographical area project serves

Clintonville-Beechwold and University District neighborhoods, including most of zip codes 43202 and 43214

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Senior Fitness
Agency Columbus Recreation and Parks Department
Address 1111 East Broad Street, Columbus, Ohio 43205
Phone 614-645-8432
Fax 614-645-5801
Web address columbus.gov/recreationandparks

***Contact person
for overall project*** Bryana Ross, Health and Wellness Manager
614-645-3950
baross@columbus.gov

***Contact person
for referrals*** As above

Project description

The Senior Fitness Project aims to provide fitness and wellness programming for Central Ohio senior citizens. This will encourage them to exercise safely and effectively by providing various kinds of equipment, instruction and special workshops/programs that will help them to improve their health and wellness for a better quality of life. This project will serve the following senior sites under the Columbus Recreation and Parks department: Dodge, Marion-Franklin, Barnett, Gillie, and Martin Janis.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Senior Hearing Healthcare Program
Agency Columbus Speech and Hearing Center
Address 510 East North Broadway, Columbus, Ohio 43214
Phone 614-263-5151
Fax 614-261-5440
Web address columbusspeech.org

***Contact person
for overall project*** Jennifer Thomson, Assistant Director of Audiology
614-261-5457
jthomson@columbusspeech.org

***Contact person
for referrals*** Audiology department
614-261-5452
hearing@columbusspeech.org

Project description

Columbus Speech and Hearing Center provides comprehensive hearing services to Franklin County seniors who would not otherwise have access to hearing healthcare. Hearing aids, fittings, and repair services may also be available to qualifying seniors. The goal is to increase seniors' independence and community involvement by reducing the emotional and social effects of hearing loss.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Franklin County Older Refugee and Immigrant Program
Agency Community Refugee and Immigration Services
Address 1925 East Dublin-Granville Road, Suite 102, Columbus, Ohio 43229
Phone 614-235-5747
Fax 614- 235-6127
Web address crisohio.org

**Contact person
for overall project** Angela K. Plummer, Executive Director
614-987-1650
aplummer@cris-ohio.org

**Contact person
for referrals** Raj Chhetri, Senior Services Program Manager
614-987-1641
[rchhetri@cris-ohio.org](mailto:rchetri@cris-ohio.org)

Project description

Community Refugee and Immigration Services (CRIS) Older Refugee and Immigrant Program will assure that refugees age 60 and over living in Franklin County receive services that will help them remain independent, become US citizens, and have full access to resources and opportunities of the mainstream. CRIS staff will implement outreach and needs assessment, case management and referral, and naturalization services for program participants in Franklin County.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Westerville/New Albany Senior Support Program
Agency Concord Counseling Services
Address 700 Brooksedge Boulevard, Westerville, Ohio 43081
Phone 614-882-9338
Fax 614-882-3401
Web address concordcounseling.org

Contact person for overall project Debra Tindall, Manager of Older Adult Services
614-882-9338 ext. 269
debratehrani@concordcounseling.org

Contact person for referrals Lisa Clark, Senior Support Coordinator
614-882-9338 ext. 230
lisaclark@concordcounseling.org

Project description

The Westerville/New Albany Senior Support Program enables seniors to maintain safe independence while residing in their community. Since most seniors report a desire to maintain their autonomy while living at home, the program is designed to help them achieve this goal. It provides transportation to medical appointments, financial institutions, grocery stores and food banks, pharmacies, and social and wellness activities. In addition, it offers assistance with medical and other forms, temporary assistance with reading and handling mail, and referral and linkage to other services. Friendly conversation and emotional support characterize interaction with clients. The program is led and staffed by seniors, and is designed to capitalize on their skills, talents, and experiences in a peer-to-peer relationship. There is no cost to participants, but their donations to the program are gladly accepted.

Geographical area project serves

Zip codes 43054 and 43081

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Volunteer Employment Services
Agency Employment For Seniors, Inc.
Address 4300 East Broad Street, Suite B, Columbus, Ohio 43213
Phone 614-863-1219
Fax 614-863-1358
Web address employseniors.org

Contact person for overall project Interim Executive Director - Open
614-863-1219
director@employseniors.org

Contact person for referrals As above

Project description

The mission of Employment For Seniors, Inc. is to empower mature adults to reach their desired employment potential by providing personalized employment assistance, strengthening partnerships with employers and the community, and promoting awareness through advocacy and education.

EFS assists qualified mature job seekers find employment through the utilization of the services of the Volunteer Counseling team. Volunteer counselors interview and counsel mature job seekers, register them for services and provide them the information necessary to pursue the job referral. Services are provided free of charge to both clients and employers. EFS also hosts the annual Senior Career Expo, various employment workshops and special programs.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Pantry Senior Services
Agency Gladden Community House
Address 183 Hawkes Avenue, Columbus, Ohio 43223
Phone 614-227-1600
Fax 614-227-1648
Web address gladdenhouse.org

Contact person for overall project Mardi Ciriaco, VP of Community Services
614-227-1614
MardiCiria@aol.com

Contact person for referrals As above

Project description

The Gladden Food Pantry Senior Services program aims to meet the emergency food assistance needs of low-income seniors in Franklinton and the near west side of Columbus, Ohio, by providing a three-day supply of emergency food supplies for pick-up at the food pantry or by home delivery each month. The program serves approximately 300 senior households each month, helping to maintain their health, preserve and strengthen their quality of life, and enhance their ability to continue living independently in their own homes.

Geographical area project serves

The Franklinton and near west side neighborhoods of Columbus, Ohio, including all of zip codes 43222 and 43223 plus the part of 43215 west of the Scioto River

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Seniors Outreach
Agency Gladden Community House
Address 183 Hawkes Avenue, Columbus, Ohio 43223
Phone 614-227-1600
Fax 614-227-1648
Web address gladdenhouse.org

***Contact person
for overall project*** Mardi Ciriaco, VP of Community Services
614-227-1614
MardiCiria@aol.com

***Contact person
for referrals*** As above

Project description

Gladden's Seniors Outreach Program helps near west side seniors maintain independent living in their homes or apartments by reducing their loneliness, isolation, and insecurity, and by addressing any unmet housing, health, and safety issues negatively affecting their quality of life.

Geographical area project serves

The Franklinton and near west side neighborhoods of Columbus, Ohio, including all of zip codes 43222 and 43223 plus the part of 43215 west of the Scioto River

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Ville on the Hill
Agency Greater Hilltop Area Shalom Zone CDC
Address P.O. Box 44083, Columbus, Ohio 43204
Phone 614-398-1230
Fax
Web address HilltopShalomZone.org

Contact person for overall project Rev. Dr. Kevin Orr, Executive Director
614-398-1230
Director@HilltopShalomZone.org

Contact person for referrals Barbara Camfield, Village Director
614-276-8224 ext. 5028
VilleontheHilldirector@gmail.com

Project description

Ville on the Hill is a senior village serving the Hilltop area. The program connects neighbors with neighbors to assist with minor home maintenance, and social engagement through volunteerism. Spring and Fall Home Maintenance Days will be offered to members to help with weeding a flower bed, mowing a lawn, picking up trash, painting a room, etc. Other activities offered will include social outings, volunteer opportunities, and the opportunity to serve as program elder advisory council members or board members of the Greater Hilltop Area Shalom Zone. Members of the program will be encouraged to volunteer to further connect them with the community and ensure that the program is sustainable.

Geographical area project serves

43204, 43223, 43228 zip codes inside Greater Hilltop Commission Area

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Prescription and Medical Assistance for Seniors
Agency J.O.I.N. (Joint Organization for Inner-City Needs)
Address 578 East Main Street, Columbus, Ohio 43215
Phone 614-241-2531
Fax 614-241-2532
Web address columbuscatholic.org/join

**Contact person
for overall project** Lisa Keita, Director
614-241-2530
lkeita@columbuscatholic.org

**Contact person
for referrals** Pat Huffman
614-241-2531
phuffman@columbuscatholic.org

Project description

The purpose of this project is to provide direct assistance to the medically indigent senior citizens in Franklin County, Ohio, in the form of prescriptions and medical aid until a more concrete medical plan of help is in place. All monies from this project go directly to the clients to fill prescriptions and other medical needs. Many low-income seniors are waiting for social security, Medicare/Medicaid, and would benefit from the program – usually in a one-time emergency situation while JOIN tries to establish long-term assistance for them. The maximum benefit is \$200 per senior over a 12-month period.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

<i>Project</i>	Senior Link
<i>Agency</i>	Jewish Family Services
<i>Address</i>	1070 College Avenue, Columbus, Ohio 43209
<i>Phone</i>	614-231-1890
<i>Fax</i>	614-231-4978
<i>Web address</i>	jfscolumbus.org

<i>Contact person for overall project</i>	Garett Ray, Chief Program Officer 614-559-0379 gray@jfscolumbus.org
--	---

<i>Contact person for referrals</i>	Sheila Camden or Kris Bratt 614-273-9675 accesspoint@jfscolumbus.org
--	---

Project description

Jewish Family Services strives to help seniors maintain their dignity and independence for as long as possible. Beginning with a telephone consultation and an in-home assessment, JFS social workers develop service plans based on a wraparound service model that incorporates services provided by the agency and other community organizations. JFS provides geriatric case management, counseling and psychotherapy to Franklin County residents who are age 60 and over as well as their families.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Housing Crisis Intervention
Agency Legal Aid Society of Columbus
Address 1108 City Park Avenue, Columbus, Ohio 43206
Phone 614-224-8374
Fax 614-224-4514
Web address columbuslegalaid.org

***Contact person
for overall project*** Kathleen McGarvey, Director
614-737-0146
kmcgarvey@columbuslegalaid.org

***Contact person
for referrals*** Marcia Palof, Managing Attorney, Intake
614-737-0168
mpalof@columbuslegalaid.org

Project description

The attorneys at the Legal Aid Society of Columbus will provide legal representation, referrals, and counsel and advice to seniors on housing issues. The types of cases for which services will be provided include evictions, housing conditions, Section 8 voucher issues, and foreclosures. The social worker will work with the attorneys and any seniors who have housing issues to keep them from becoming homeless, to assure that their housing is safe, and to keep them from losing a Section 8 voucher.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project LASC Senior Outreach
Agency Legal Aid Society of Columbus
Address 1108 City Park Avenue, Columbus, Ohio 43206
Phone 614-224-8374
Fax 614-224-4514
Web address columbuslegalaid.org

***Contact person
for overall project*** Kathleen McGarvey, Director
614-737-0146
kmcgarvey@columbuslegalaid.org

***Contact person
for referrals*** Marcia Palof, Managing Attorney, Intake
614-737-0168
mpalof@columbuslegalaid.org

Project description

The Senior Legal Outreach Program provides outreach and legal assistance to the low-income and/or disabled seniors in Franklin County, including the most isolated and homebound, so they can receive the civil legal assistance they need to assert their legal rights to essential income, housing, property, health and survival benefits, and to plan for incapacity and for the future of their families. This project provides counsel and advice, brief service, appropriate pro bono and reduced fee referrals and full representation.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

<i>Project</i>	Community Wellness Centers
<i>Agency</i>	LifeCare Alliance
<i>Address</i>	1699 West Mound Street, Columbus, Ohio 43223
<i>Phone</i>	614-278-3130
<i>Fax</i>	614-278-3143
<i>Web address</i>	lifecarealliance.org
<i>Contact person for overall project</i>	Melinda Rowe, Dir. of Wellness, Comm. & Corp. Immunizations 614-437-2880 mrowe@lifecarealliance.org
<i>Contact person for referrals</i>	Maurice Elder, Customer Service Director 614-437-2895 melder@lifecarealliance.org

Project description

LifeCare Alliance Community Wellness Centers' mission is to provide health care services and education with the goal of assisting individuals in achieving their optimal health, so they can maintain their independence in their community.

LifeCare Alliance's Community Wellness Centers are staffed with registered nurses and registered dietitians experienced in the needs of seniors, and work as a team to monitor and maintain participants' good health. The Wellness Centers offers the following: 1) health evaluations for high blood pressure, high cholesterol, anemia, and diabetes, 2) skilled nursing care for medication management, ear irrigation, administering prescription injections and changing dressings, 3) tests such as hematocrit, cholesterol, blood glucose, depression, memory, nutrition, urinalysis, vision and hearing screenings, 4) nutrition education for weight management, diabetes, blood pressure and cholesterol, 5) fitness classes for arthritis, and 6) referrals to help with transportation, legal issues, medical care, and meal programs.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Congregate Dining and Transportation
Agency LifeCare Alliance
Address 1699 West Mound Street, Columbus, Ohio 43223
Phone 614-278-3130
Fax 614-278-3143
Web address lifecarealliance.org

**Contact person
for overall project** Molly Haroz, Director, Nutrition Programs
614-437-2861
mharoz@lifecarealliance.org

**Contact person
for referrals** Maurice Elder, Customer Service Director
614-437-2895
melder@lifecarealliance.org

Project description

LifeCare Alliance's Congregate Dining and Transportation program seeks to meet Franklin County seniors' needs holistically by providing transportation to all of LCA's dining centers in Franklin County, at which they receive a nutritious, delicious meal, educational programming, and socialization.

LifeCare Alliance provides transportation for our clients who would otherwise be homebound. Transporting our clients to a dining center for a meal and socialization allows support for their emotional and psychological needs thus providing socialization and educational opportunities. These dining centers engage seniors into a healthier lifestyle and provide a hot, nutritious meal that they may not otherwise receive.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Senior Produce Supplement Program
Agency LifeCare Alliance
Address 1699 West Mound Street, Columbus, Ohio 43223
Phone 614-278-3130
Fax 614-278-3143
Web address lifecarealliance.org

***Contact person
for overall project*** Molly Haroz, Director, Nutrition Programs
614-437-2861
mharoz@lifecarealliance.org

***Contact person
for referrals*** Maurice Elder, Customer Service Director
614-437-2895
melder@lifecarealliance.org

Project description

LifeCare Alliance's Senior Produce Supplement Program will provide Franklin County seniors at or below 185% of the poverty level with \$50-worth of coupons that can be redeemed for locally grown fruits, vegetables, and honey. The program aims to increase access to healthy foods and improve clients' overall nutritional health.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Connecting Seniors to Fresh Healthy Food
Agency Mid-Ohio Food Collective
Address 3960 Brookham Drive, Columbus, Ohio 43123
Phone 614-274-7770
Fax 614-274-8063
Web address mofc.org

***Contact person
for overall project*** Brad Draper, VP of Agency Services
614-317-9473
bdraper@mofc.org

***Contact person
for referrals***

Project description

The goal of the project is to enhance the quality of life for food-insecure seniors by providing them with consistent access to the variety, quality, and quantity of food needed to thrive. The Mid-Ohio Foodbank intends to collaborate with more than 300 non-profit agency partners in Franklin County to distribute four million pounds of food to roughly 38,000 seniors who do not have enough to eat. This will be delivered via a variety of programs, which include food pantries, senior food boxes, and community-based mobile market and produce market distributions.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Intergenerational Program
Agency NCR Centers for Senior Health
Address 1700 East Dublin-Granville Road, Columbus, Ohio 43229
Phone 614-890-1099
Fax 614-890-1088
Web address nationalchurchresidences.org

**Contact person
for overall project** Heather Fleshman, Clinical Director
614-890-1099
hfleshman@nationalchurchresidences.org

**Contact person
for referrals** As above

Project description

National Church Residences Centers for Senior Health provides programming that encourages seniors and the youth to interact, naturally allowing the generations to benefit and learn from each other through shared experiences. In addition to activities such as games, crafts, gardening, and adaptive sports, the program contracts with local therapists to provide music therapy, art therapy, Tai Chi, drama therapy and Mindful Awareness in intergenerational settings.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Age-Friendly Columbus and Franklin County
Agency Ohio State University Age Friendly Columbus Franklin County
Address 1275 Kinnear Road, Columbus, Ohio 43212
Phone 614-549-7980
Fax
Web address agefriendlycolumbus.org

***Contact person
for overall project*** Katie White, Director
614-549-7980
white.3073@osu.edu

***Contact person
for referrals***

Project description

The Age-Friendly Columbus initiative is a major step in ensuring seniors can remain in their own environment and live an active and safe lifestyle in this region. Through the lens of the eight domains as outlined by AARP and the World Health Organization, this project will now focus on the implementation of the Age-Friendly Columbus and Franklin County Strategic Plan, and the education and training of leaders and cross-sector experts of cities, villages and townships in Franklin County to designate this region as Age-friendly within the WHO and AARP network of Livable Communities.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Senior Series Education
Agency Ohio State University for OSU Extension, Franklin County
Address 2548 Carmack Road, Columbus, Ohio 43210
Phone 614-292-7775
Fax
Web address franklin.osu.edu

***Contact person
for overall project*** Jenny Lobb, FCS Educator
614-292-7775
lobb.3@osu.edu

***Contact person
for referrals*** Loretta Sweeney, Program Assistant
614-292-8338
sweeney.400@osu.edu

Project description

The Ohio State University Extension, Franklin County Family and Consumer Sciences, Senior Series staff will teach senior citizens at 110 sessions yearly. The purpose of the programming is to encourage health and vitality in adults age 60 and older within Franklin County, so as to encourage an independent lifestyle. Education programs are 30-60 minutes long and offered at convenient locations for senior citizens to attend. The educator interprets knowledge developed at the Ohio State University and other land grant universities to Franklin County senior citizens.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Connecting the Ages
Agency OhioHealth Gerlach Center for Senior Health
Address 3830 Olentangy River Road, Columbus, Ohio 43214
Phone 614-566-5858
Fax 614-566-1916
Web address ohiohealth.com/gerlach

Contact person for overall project Michele Stokes, System Director, Neuroscience
614-566-4226
michele.stokes@ohiohealth.com

Contact person for referrals Christa Spencer, Intergenerational Coordinator
614-566-3305
christa.spencer@ohiohealth.com

Project description

This program provides opportunities for older adults to work with those ages 3-24 in a variety of activities and settings. Older adults served range from community-based well adults to more frail individuals in long-term care settings. We aim to continue the provision of mutually-beneficial opportunities for socialization, learning, therapeutic activities, and volunteerism for the younger and older individuals. Older participants will continue to assist the program coordinator with interactive "Aging in America" curriculum in classrooms. Structured student visits to long term care facilities such as First Community Village, Whetstone Gardens and Care Center, and National Church Residences facilities will continue, as will senior volunteer outings to Bright Horizons Day Care Center. In addition to other benefits, this program allows older adults to 'give back' even at the end of life. Opportunities for civic engagement are often missing in older age and particularly with frailty. Additionally, students who participate in these programs are introduced to potential healthcare/geriatric career fields -- a need that is growing rapidly.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

<i>Project</i>	Senior Supportive Services
<i>Agency</i>	St. Stephen's Community House
<i>Address</i>	1500 East 17th Avenue, Columbus, Ohio 43219
<i>Phone</i>	614-294-6347
<i>Fax</i>	614-294-0258
<i>Web address</i>	saintstephensch.org
<i>Contact person for overall project</i>	Marilyn Mehaffie, CEO 614-294-6347 ext. 135 mmehaffie@saintstephensch.org
<i>Contact person for referrals</i>	LaTisha Lewis, Director of Family and Senior Services 614-294-6347 ext. 153 llewis@saintstephensch.org

Project description

This project assists clients aged 60 years and older in the greater Linden area to access and connect with community resources and thus improve and maintain their independent living. This will be achieved through a referral to a senior case manager who would complete an assessment with client and follow through with connecting and/or providing the client with the appropriate services to maintain his/her independence.

Geographical area project serves

Zip codes 43004, 43211, 43219, 43224, 43229, 43230 and 43231

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Small Group Transportation
Agency St. Stephen's Community House
Address 1500 East 17th Avenue, Columbus, Ohio 43219
Phone 614-293-6347
Fax 614-294-0258
Web address saintstephensch.org

**Contact person
for overall project** Marilyn Mehaffie, CEO
614-294-6347 ext. 135
mmehaffie@saintstephensch.org

**Contact person
for referrals** LaTisha Lewis, Director of Family and Senior Services
614-294-6347 ext. 153
llewis@saintstephensch.org

Project description

This project provides transportation to seniors in the Linden community and northeast Columbus, so they can access key community resources including pharmacies, visits to the food pantries, hairdressers, banks, post office, etc.

Geographical area project serves

Zip codes 43004, 43211, 43219, 43224, 43229, 43230 and 43231

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

<i>Project</i>	Caregiver Consultation Program
<i>Agency</i>	Syntero Inc.
<i>Address</i>	3645 Ridge Mill Drive, Hilliard, Ohio 43026
<i>Phone</i>	614-889-5722/614-457-7876
<i>Fax</i>	614-889-9335/614-457-7896
<i>Web address</i>	syntero.org
<i>Contact person for overall project</i>	Victoria Larsen, Older Adult Program Coordinator 614-273-2950 vlarsen@northwestcounselingservices.org
<i>Contact person for referrals</i>	Dan Brochetti, Caregiver Consultant 614-301-4030 No e-mail referrals please

Project description

The Caregiver Consultation Program provides information, support, and planning assistance to caregivers of seniors. The consultations assist caregivers with stress management, identification of community resources, understanding specific health conditions such as mental illnesses and dementias; learning to care for the caregiver; and ideas for evaluating living arrangements. These consultations can be over the phone and/or face to face. Meetings may take place at Syntero offices, caregivers' locations or other community settings. Consultations are available daytimes, evenings and weekends. Educational seminars are available for community groups.

Geographical area project serves

Franklin County, Ohio

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project	Supportive Services
Agency	Syntero Inc.
Address	3645 Ridge Mill Drive, Hilliard, Ohio 43026
Phone	614-889-5722/614-457-7876
Fax	614-889-9335/614-457-7896
Web address	syntero.org
Contact person for overall project	Victoria Larsen, Older Adult Program Coordinator 614-273-2950 vlarsen@northwestcounselingservices.org
Contact person for referrals	As above

Project description

Syntero provides supportive services through a combination of assessment of needs and service linkage and direct service provision for frail/dependent elderly. Following assessments, the staff develop service plans and when feasible, bring in needed home and community-based services. Some of the services include transportation for shopping and appointments, helping with bill paying, interpreting mail, providing intensive case management, finding affordable and/or safer housing, and finding affordable medications. As needed and as appropriate, the program coordinates with family and other service providers and with any informal support providers such as neighbors.

Geographical area project serves

Zip codes 43002, 43016, 43017, 43026, 43064, 43065, 43085, 43212, 43220, 43221, 43234 and 43235

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Senior Health and Wellness Program
Agency Upper Arlington Commission on Aging
Address 1945 Ridgeview Road, Bldg 2, Upper Arlington, Ohio 43221
Phone 614-583-5326
Fax 614-442-4006
Web address uacoa.com

Contact person for overall project Jennifer Monroe-Sega, Executive Director
614- 583-5326
jsega@uacoa.com

Contact person for referrals As above

Project description

The Senior Health and Wellness Program provides services to help seniors age in place safely within the Upper Arlington community. This program, under the auspices of the UA Commission on Aging, includes I Am Fine, formerly known as Kind Call (automated daily telephone check-up calls), Project Lifesaver (radio frequency wristbands to locate dementia patients who have wandered away from home), the File of Life, and community education to help seniors manage their safety, prevent falls, increase physical fitness, and remain in their homes for as long as possible. Community education takes place through classes, fitness and exercise activities, seminars, and quarterly newsletters. UACOA organizes the Senior Service Days and Snow Angels events that use volunteers to help seniors with yard work and snow removal. OSHIIP trained volunteers who reside in Upper Arlington also volunteer to counsel seniors with Medicare on a year-round basis.

Geographical area project serves

Zip codes 43220, 43221, 43212 where the homes are in Upper Arlington Fire Division service area

FRANKLIN COUNTY SENIOR OPTIONS GRANTS PROGRAM – 2021

Project Village Connections Outreach
Agency Village Connections
Address 588 South Third Street, Columbus, Ohio 43215
Phone 614-226-6567
Fax
Web address villageconnectionscolumbus.org

**Contact person
for overall project** Donald Wiggins, Executive Director
614- 226-6567
donald@villageconnectionscolumbus.org

**Contact person
for referrals** As above

Project description

Village Connections is an urban, community based non-profit organization that aims to empower its members to lead an active and engaged lifestyle in their own homes as they age. By providing a network of high-quality person-centered resources for members' evolving needs, this grassroots organization will offer information and referrals to cost effective services and activities designed to enhance members' health and wellness, support their social, educational, and cultural interests, and foster member to member volunteer support.

Geographical area project serves

German Village, Schumacher Place, Merion Village, Brewery District and Downtown Columbus

2021

Central Ohio Regional Assessment on Aging Survey

Findings Report

Franklin County Random Sample Results

Presented to the
Central Ohio Area Agency on Aging,
Franklin County Office on Aging,
and the Age-Friendly
Innovation Center

January 2022



Contents

Sections

1

Executive Summary

Page i

2

**Charts & Graphs:
Overall Results**

Page 1

3

Tabular Data

Page 67

4

Survey Instrument

Page 108

1

Executive Summary

Central Ohio Regional Assessment on Aging Survey (2021)

Executive Summary



Purpose

ETC Institute administered a regional assessment, to residents who were 50 years or older, and on the behalf of the Central Ohio Area Agency on Aging, the Franklin County Office on Aging, and the Age-Friendly Innovation Center. This is the first assessment survey ETC Institute has conducted for these organizations. The purpose of this survey is to establish priorities for making the community a better place to live as residents age. Information compiled from this assessment will be used by decision-makers when it comes time to make important decisions that affect the community, especially residents who are 50 years or older. Priorities will be made that best reflect the needs of the community.

Methodology

The survey instrument, cover letter, and postage paid return envelope were mailed to a random sample of households in the Central Ohio region. The cover letter explained the purpose of the survey and encouraged residents to either return their survey by mail or complete the survey online.

Approximately, ten days after the surveys were mailed, ETC Institute sent e-mails/text messages to the households that received the survey to encourage participation. The e-mails/texts contained a link to the online version of the survey to make it easy for residents to complete. To prevent people who were not residents of the study area from participating, everyone who completed the survey online was required to enter their home address prior to submitting the survey. This was done to ensure that only responses from residents who were part of the random sample were included in the final survey database. ETC Institute then matched the addresses that were entered online with the addresses that were originally selected for the random sample. If the address from a survey completed online did not match one of the addresses selected for the sample, the online survey was not counted.

These results are based on 719 completed surveys from randomly selected residents ages 50 years or older throughout Franklin County. The overall response for the sample of 719 respondents has a precision of at least +/- 3.6% at the 95% level of confidence.

This report contains:

- Executive summary of the survey methodology and major findings
- Charts showing the overall results for most questions on the survey
- Cross-tabular data showing the overall results broken up by County's
- Frequency tables that show the results for each question on the survey
- A copy of the cover letter and survey instrument

Major survey findings are on the following pages.

Central Ohio Regional Assessment on Aging Survey (2021)

Executive Summary



Major Findings – Franklin County Residents 50+ Years

Transportation

- 84.8% of residents indicated that they usually get around by driving themselves, 28.8% are driven by friends or family, and 16.4% walk.
 - 0.6% use flexible public transit and 1.1% take paratransit
- Residents were asked if their usual way of getting around was no longer an option, how would they get to where they wanted or needed to go, and 65.0% responded that they would be driven by friends or family. One-third (32.7%) of residents indicated they would use rideshare services and 21.8% would use a transportation service that picks them up from their location and requires a reservation.

Communication & Technology

- At least the majority of residents use internet (77.1%), word of mouth (55.8%), and the mail (50.3%) to find information about community services.
 - Three of ten residents use social media (38.8%), their mobile phone (36.7%), and TV ads (30.3%) to find information about community services.
- 86.8% of residents use a smartphone, 84.3% use a computer, and 56.6% use a tablet (iPad, Kindle). Less than a quarter of residents use a smart speaker (23.2%), like Echo/Alexa or GoogleNest, and 9/9% use a cellphone with limited minutes.
- Most (95.5%) of residents use the internet, 2.8% do not, and 1.7% do not know.
 - Of the 2.8% of residents that do not use the internet, 60.0% do not know how to access or use the internet, 30.0% do not want to access or use the internet, 20.0% cannot afford the internet or Wi-Fi device, and 5.0% indicated that their area does not offer any or sufficient Wi-Fi or internet access.
 - The residents that use internet (95.5%), the majority use the internet for;
 - searching for information (93.7%),
 - email (93.6%),
 - shopping (79.0%),
 - news (70.3%),
 - communication and socialization (67.8%), and
 - entertainment (i.e., relax, TV/movies, music, etc.) (52.3%)
- Residents were asked to rate how confident they feel using computers, smartphones, or other devices and 84.7% indicated they feel very/somewhat confident; 8.2% only a little confident, 2.5% not at all confident, 4.6% are not sure.

Central Ohio Regional Assessment on Aging Survey (2021)

Executive Summary



Community Resources

- Less than half of residents strongly agree/agree with the following statements:
 - “My community offers a wide range of services available to adults as they get older” (49.5%)
 - “It is easy to find information about services for older adults” (47.8%)
- 80.4% of residents have heard or are aware of the Franklin County Office on Aging and 69.4% are aware or have heard of the Central Ohio Area Agency on Aging.
- Residents were asked how likely they would use various services in the future and the top five services that residents, would either very likely, likely, or maybe use are listed below.
 - Transportation (41.0%)
 - Assistance with keeping the home clean and organized (35.2%)
 - Assistance with shopping for groceries, clothing, or necessities (35.1%)
 - Durable Medical Equipment such as shower chair or walker (31.4%)
 - Meal delivery (30.9%)
- In regard to the services residents indicated they would very likely, likely, or maybe use, they were asked what reason(s) would prevent them from seeking any of the services listed (of a list of ten). The top three highest responses were:
 - I do not believe that I would qualify (40.8%)
 - I do not want to take services from someone else who may be more needy (34.1%)
 - I believe those services are for people who have less money than me (33.8%)
- The bottom three responses were; I do not think I need them (7.9%), it would be too difficult/time consuming to apply (6.4%), and language barrier (0.8%).

Food Needs & Services

- 17.4% of residents use a personal or community garden for their own consumption and 13.3% have a neighbor or family member who provides food or meals at least a few times a year.
- 79.3% use the programs to help make their food budget stretch further, 77.0% to supplement the food they purchase at grocery stores and restaurants, 74.9% use them to make sure they eat healthier foods.
- 78.6% of residents indicated they are never worried about not having enough food to eat, 11.0% are rarely worried, 6.0% are sometimes worried, 1.9% are frequently worried, 0.6% are always worried, and 1.9% did not provide a response.

Central Ohio Regional Assessment on Aging Survey (2021)

Executive Summary



Housing and Associated Costs

- 75.4% of residents own their home, of those 48.3% have a mortgage, 49.1% do not have a mortgage, 0.2% are not sure, and 2.4% did not provide a response.
- 76.9% of residents do not have a concern about paying for their rent, mortgage, or utilities; 14.3% do and 8.8% do not know.
- 39.4% of residents indicated they spend less than 30% of their household income on housing expenses, including utilities. 37.6% of residents spend between 30% to 50% and 17.4% spend 50% or more of their household income on their housing expenses, including utilities. 5.7% did not provide a response.
- It is either very important or somewhat important to almost all (94.8%) residents to remain in their home as they age, and it is very somewhat important to 80.1% of residents to remain in their neighborhood as they age.
- 88.9% of residents indicated they are physically able to maintain the inside of their home, 85.9% are able to afford their indoor home maintenance, and 37.2% do have others help them maintain the inside of their home.
 - 77.1% of residents have a first-floor bathroom
 - 52.4% of residents have a first-floor bedroom
 - 48.3% of residents have a first-floor laundry
 - 25.0% of residents have an accessible entryway (zero step entry or ramp)
- 65.2% of residents are physically able to maintain the outside of their home, 79.9% are able to afford outdoor home maintenance, and 61.0% have others help them maintain the outside of their home.
- At least three of ten residents understand the benefits of the Homestead Exemption Program (35.9%) and know how to access the Homestead Exemption Program (32.8%).

Emergencies

- 76.1% of residents indicated that, based on the guidelines, they are prepared for an emergency; 13.9% are not and 10.0% do not know.
 - 94.9% have working air-conditioning, 93.6% have working smoke detector(s), 64.4% have working carbon monoxide detector(s), and 23.4% have an alternative source of electric power (23.4%).
- Extreme weather events have prevented 9.2% of residents getting to a community event or worship service, prevented 8.1% getting to a family member or friend, 6.8% remaining in their

Central Ohio Regional Assessment on Aging Survey (2021)

Executive Summary



home, 5.8% getting to a health-related appointment, 4.6% getting to work or volunteer service, and 3.3% from getting medicine.

Health and Well-Being

- 80.1% of residents indicated they are in excellent, very good, or good health, 15.9% indicated they are in fair health, 2.8% poor health, and 1.3% did not provide this information.
- 96.2% of residents have a primary care provider; 2.4% do not, 0.1% are not sure, and 1.3% did not provide a response.
- 78.0% engage in some form of physical exercise at least once a week (or more), 5.3% once or twice a month, 4.6% less than once a month, 10.3% rarely or never, and 1.8% did not provide this information.
- 20.4% of residents indicated they have fallen in the last six months, 78.5% have not, and 1.1% did not provide a response.
 - 25.6% of residents indicated it is a high to medium probability that they will fall in the next few months, 71.3% indicated it is a low probability, and 3.1% did not provide a response.
- 1.9% of residents always or frequently skip necessary medications due to the high cost, 6.0% sometimes skip, and 12.5% rarely skips for this reason. 74.0% of residents never skip their necessary medications due to the high cost and 5.6% did not provide a response.
- Residents were asked if they need physical assistance with various tasks and the task that had the highest response of *always need help* and *sometimes need help* was completing housework (33.3%). Followed by shopping for groceries, clothing, or other necessities (21.2%), preparing food for themselves (13.1%), scheduling and attending appointments (12.2%), and managing money and paying bills (11.6%).

Outdoor Spaces and Buildings

- Over half (63.6%) of residents rate their community as being an excellent or good place to live as they age, 24.9% rate it as moderate, 6.5% rate it as poor or very poor, and 5.0% are not sure.
 - 76.9% rate the public buildings and facilities, in their community, that are accessible to people of different physical abilities as excellent or good.
 - 70.7% rate the crosswalks with signals, in their community, as excellent or good.
 - 63.6% rate the sidewalks in their community as excellent or good.
 - 63.0% rate their crosswalks, in their community, with adequate count down timers.

Central Ohio Regional Assessment on Aging Survey (2021)

Executive Summary



Respect, Inclusion, and Participation

- 71.5% of residents strongly agree/agree with the statement that “there are negative stereotypes about older adults”; 22.2% are not sure and 6.3% disagree/strongly disagree.
- Residents were given a list of eight (8) potential reasons that could prevent them from going to activities or events more often. The top four responses were:
 - Not interested (31.2%)
 - Lack of awareness (28.9%)
 - Not enough time (25.5%)
 - Too expensive (24.1%)
- 58.0% of residents participate in activities outside of home, such as social events or religious services, at least once a week; 12.2% participate about once a month, 11.8% participate a few times a year, 15.7% participate rarely or never, and 2.2% did not provide a response.
- 42.5% often or some of the time feel a lack of companionship, 36.9% often or some of the time feel left out, and 36.7% often or some of the time feel isolated from others.
- 23.4% of resident prefer the language when referring to themselves or someone over 60, as senior, and 19.9% prefer the language of senior citizen.

Relationships

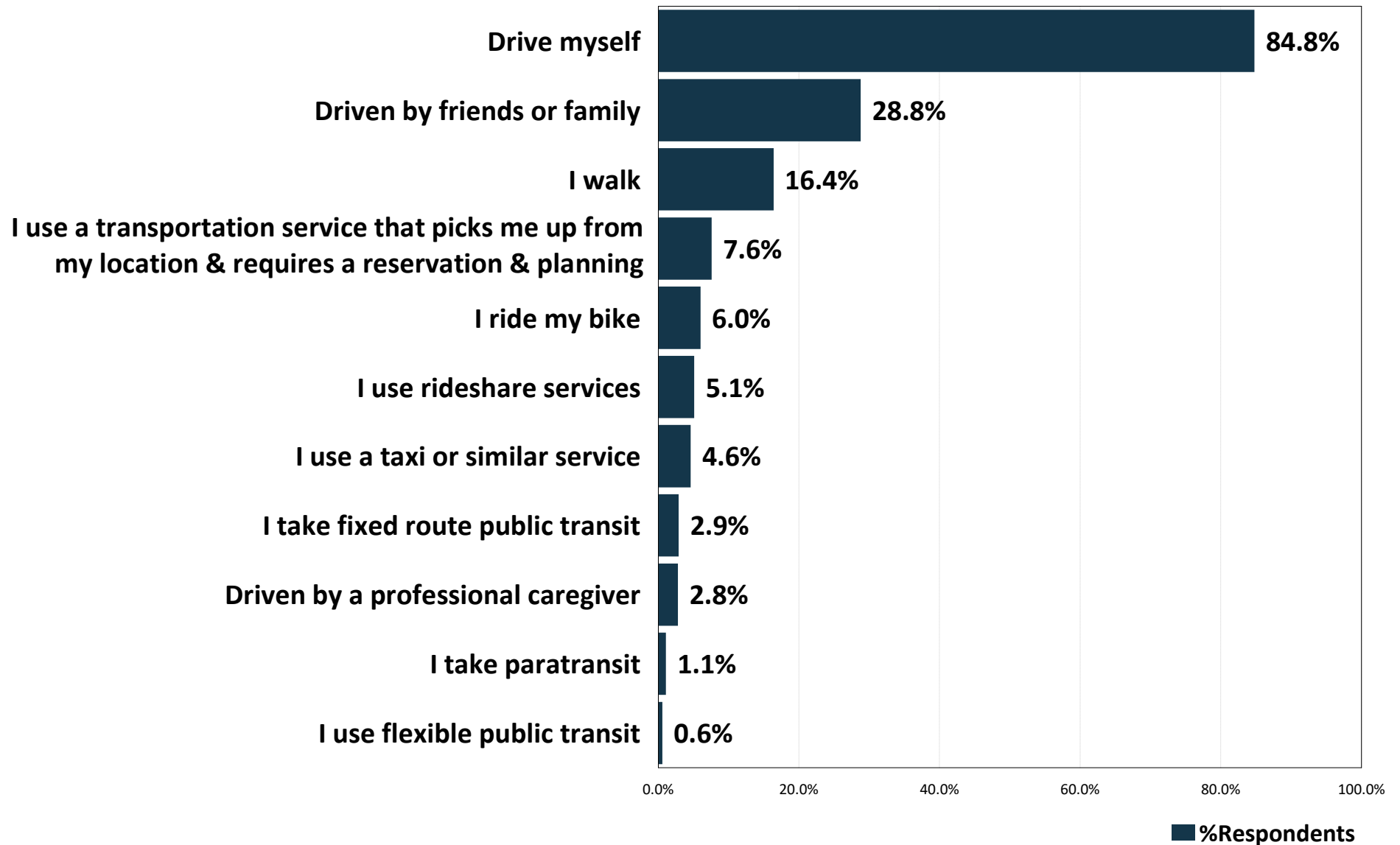
- 41.9% see or hear from at least five or more of their relatives at least once a month, 26.0% feel they are close to at least five or more relatives that they could call on them for help, and 17.1% have two to four relatives they feel at ease with who they can talk about private matters with.

2

Overall Results

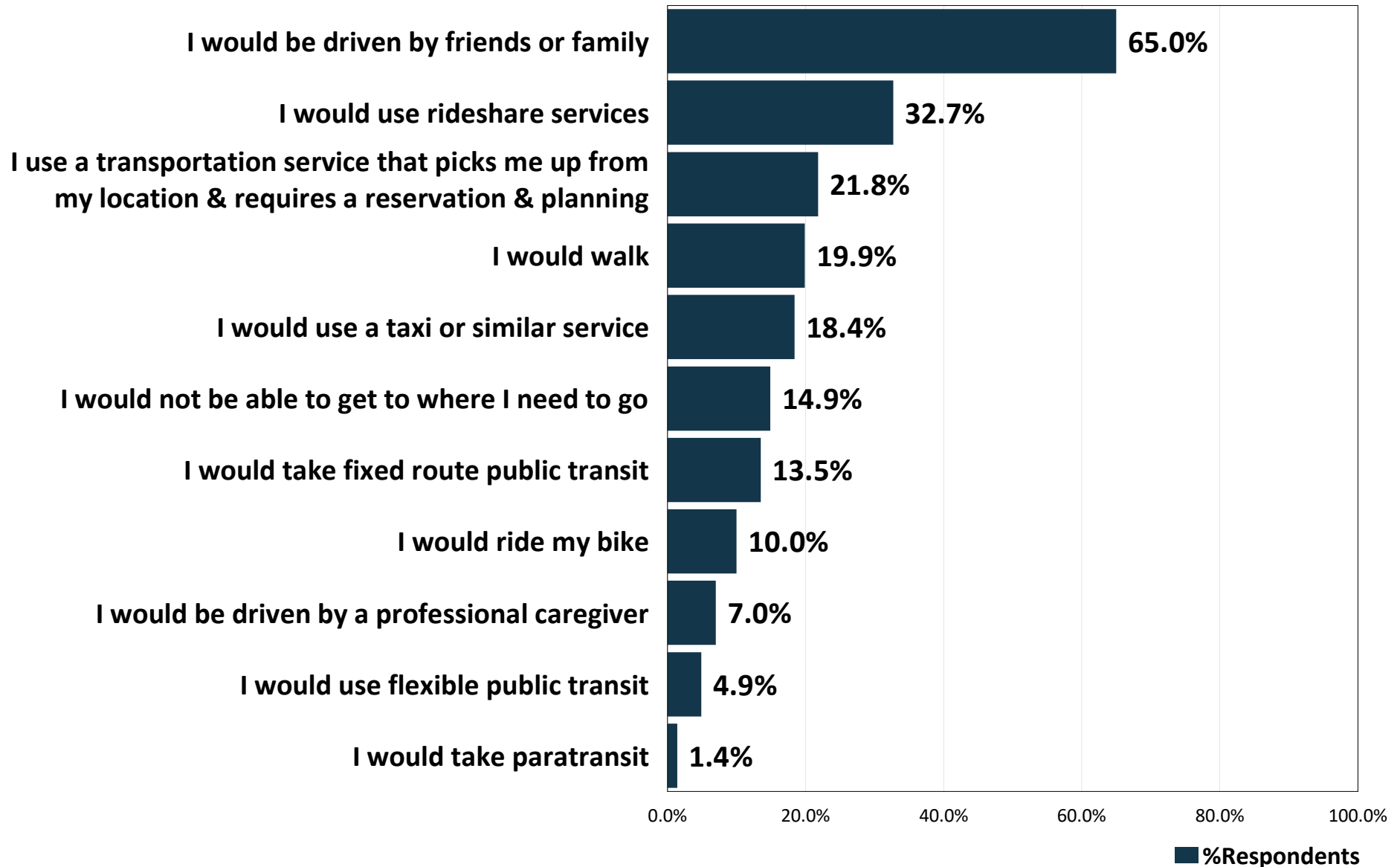
Q1. Transportation. What is your usual way of getting to where you want and need to go?

by percentage of Franklin County respondents (multiple choices could be selected)



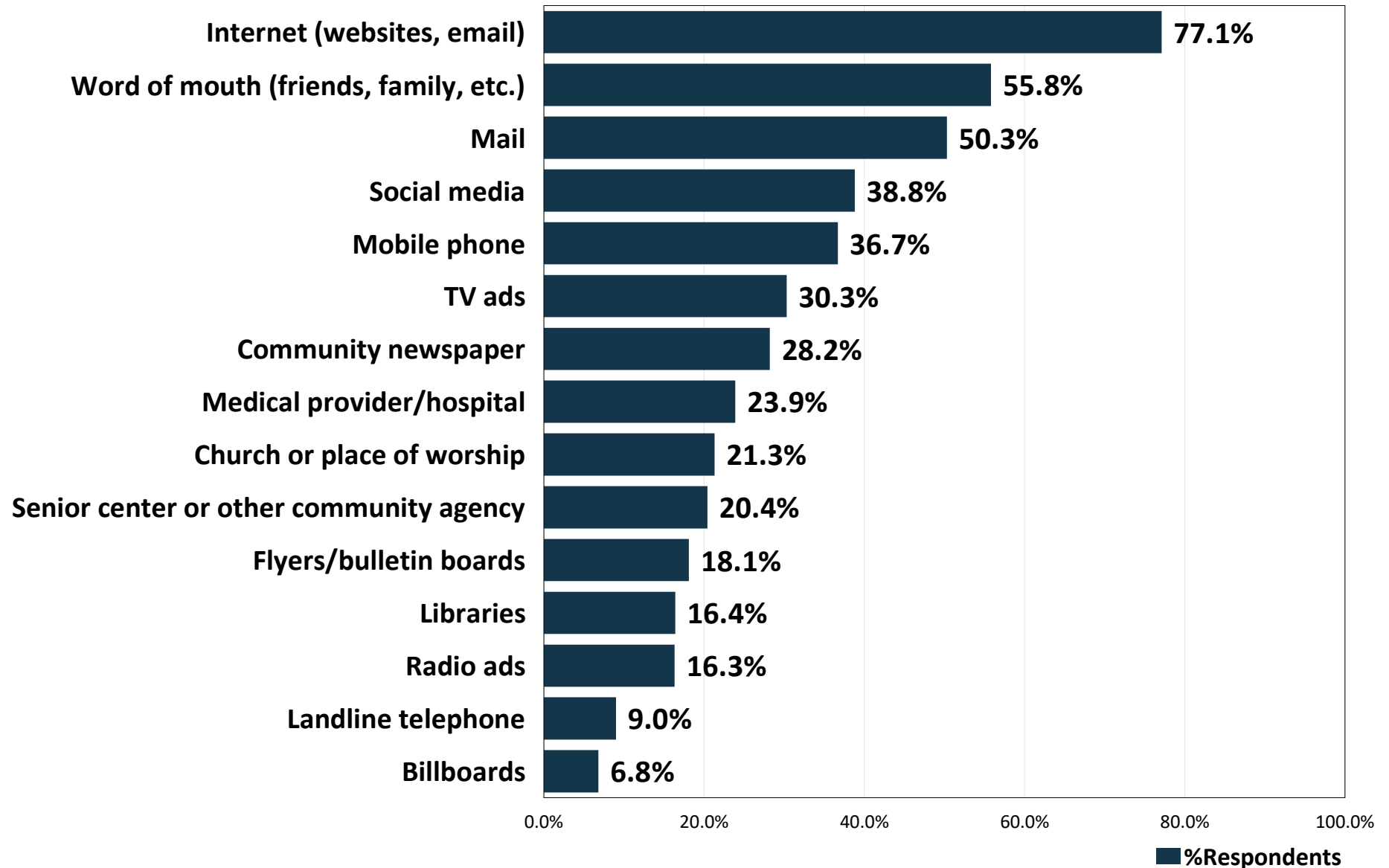
Q2. If your usual way of getting around was no longer an option, how would you get to where you want and need to go?

by percentage of Franklin County respondents (multiple choices could be selected)



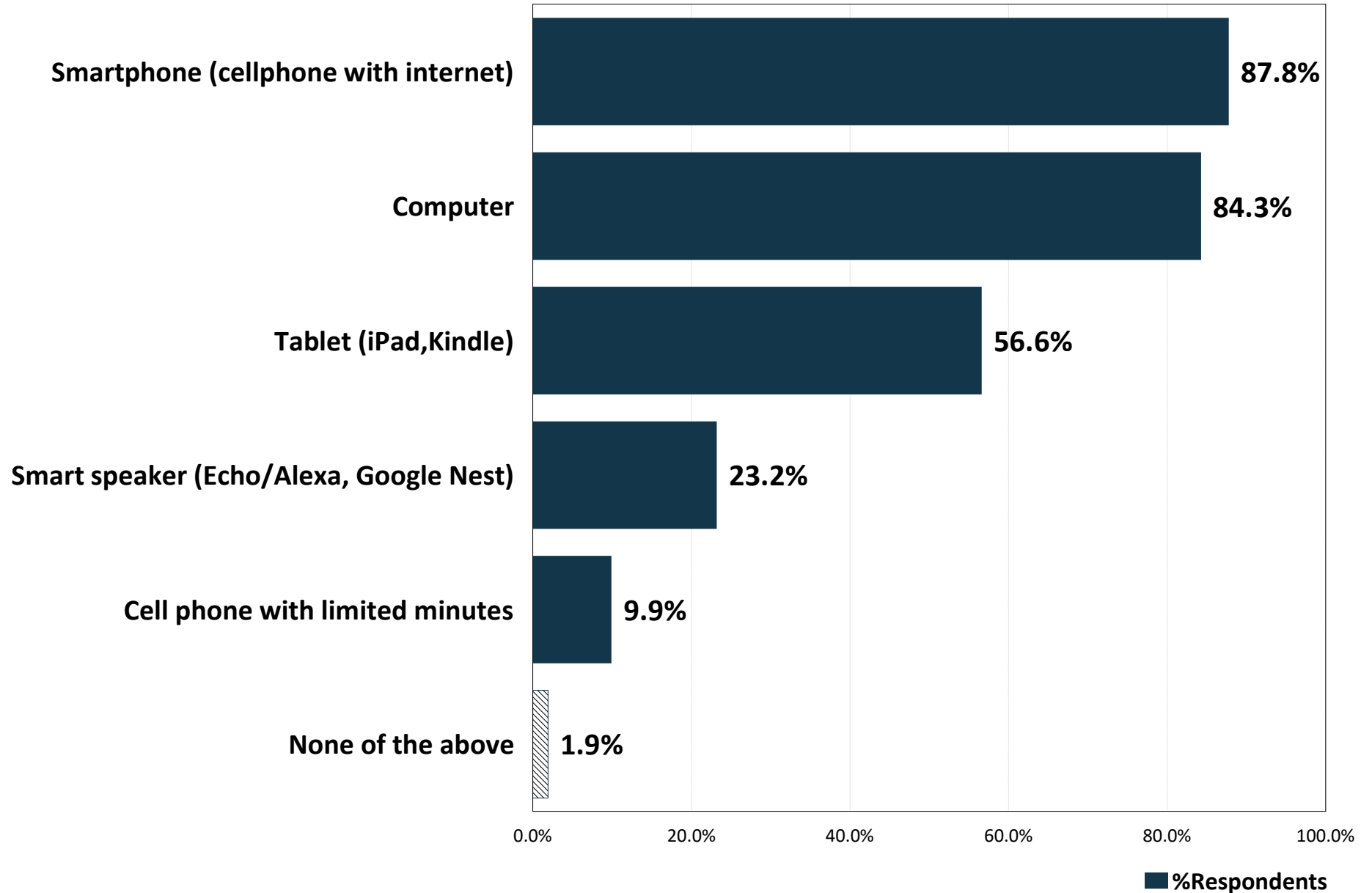
Q3. Communication and Technology. Which of the following sources do you use to find information about community services?

by percentage of Franklin County respondents (multiple choices could be selected)



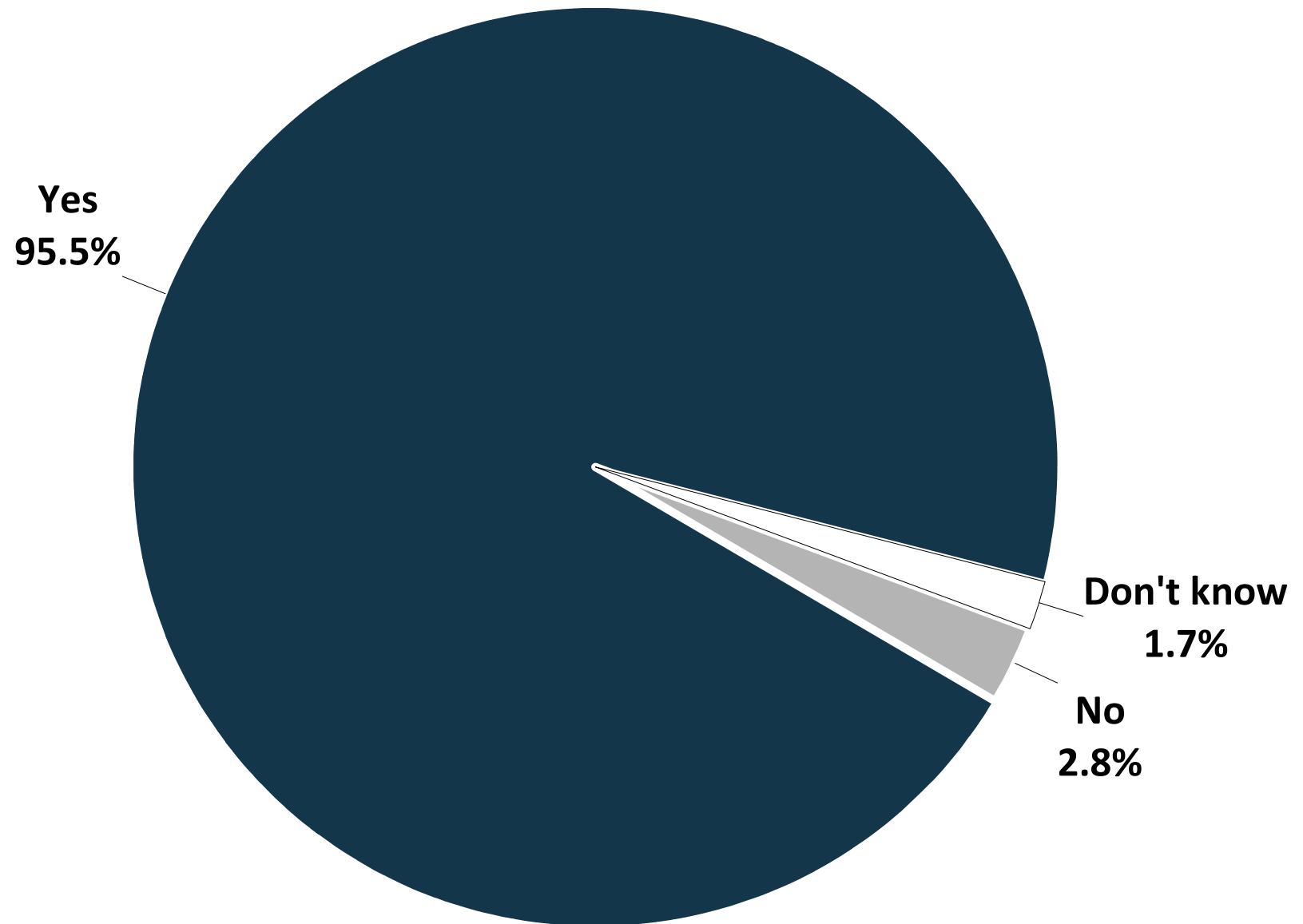
Q4. Do you use any of the following electronic devices?

by percentage of **Franklin County** respondents (multiple choices could be selected)



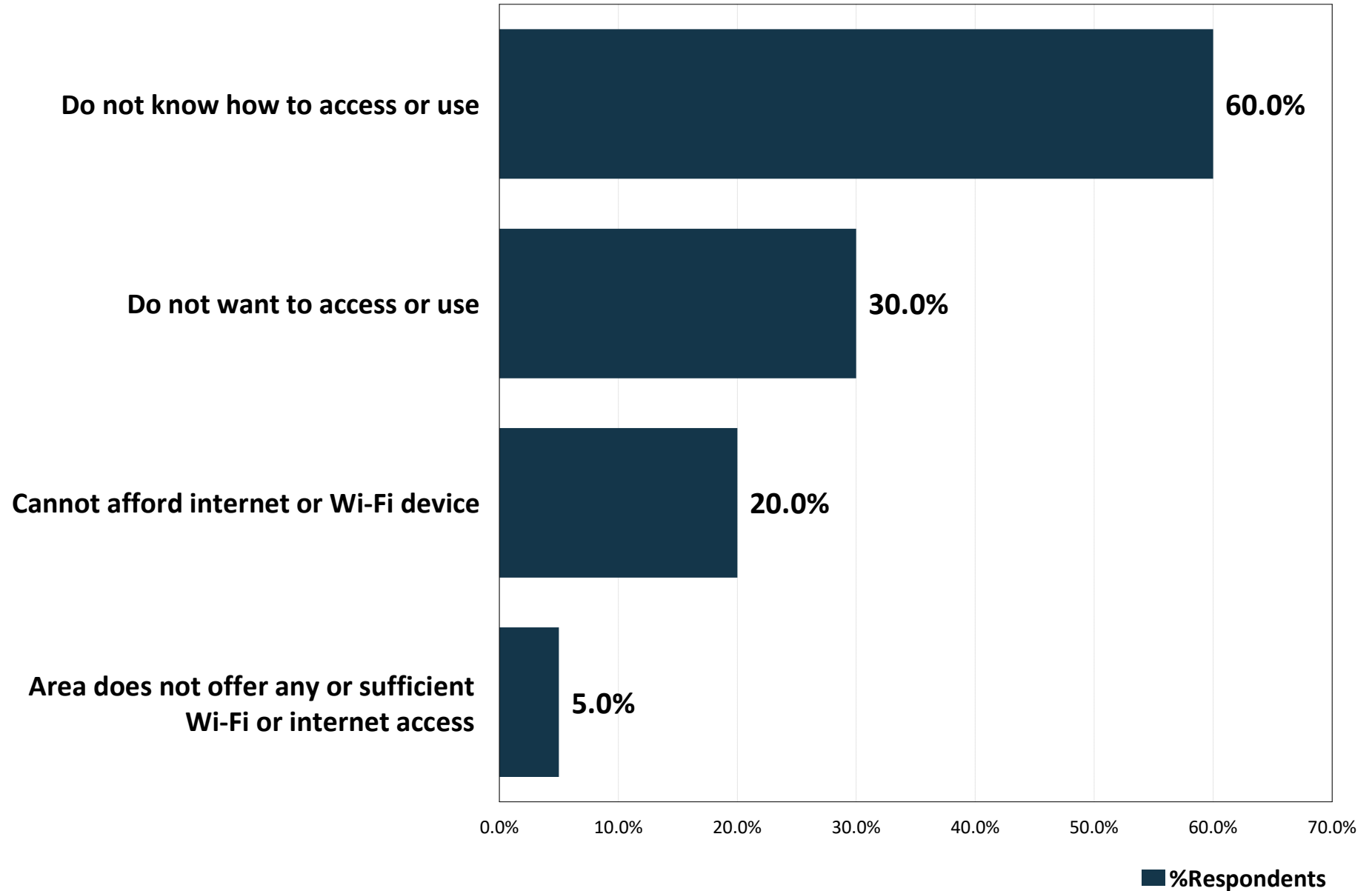
Q5. Do you use the Internet?

by percentage of Franklin County respondents



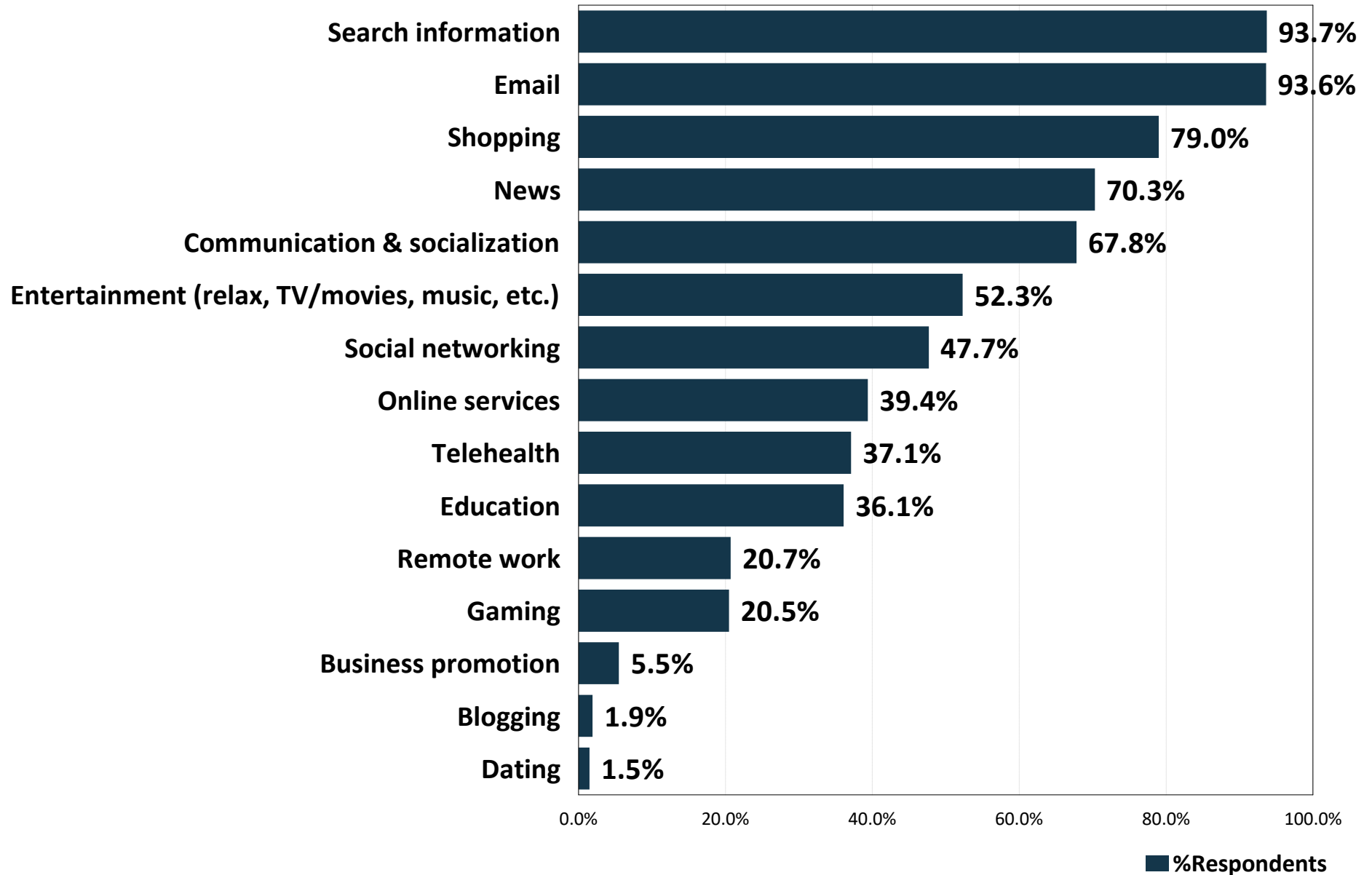
Q5a. Why do you not use the Internet?

by percentage of **Franklin County** respondents that do not use the internet (multiple choices could be selected)



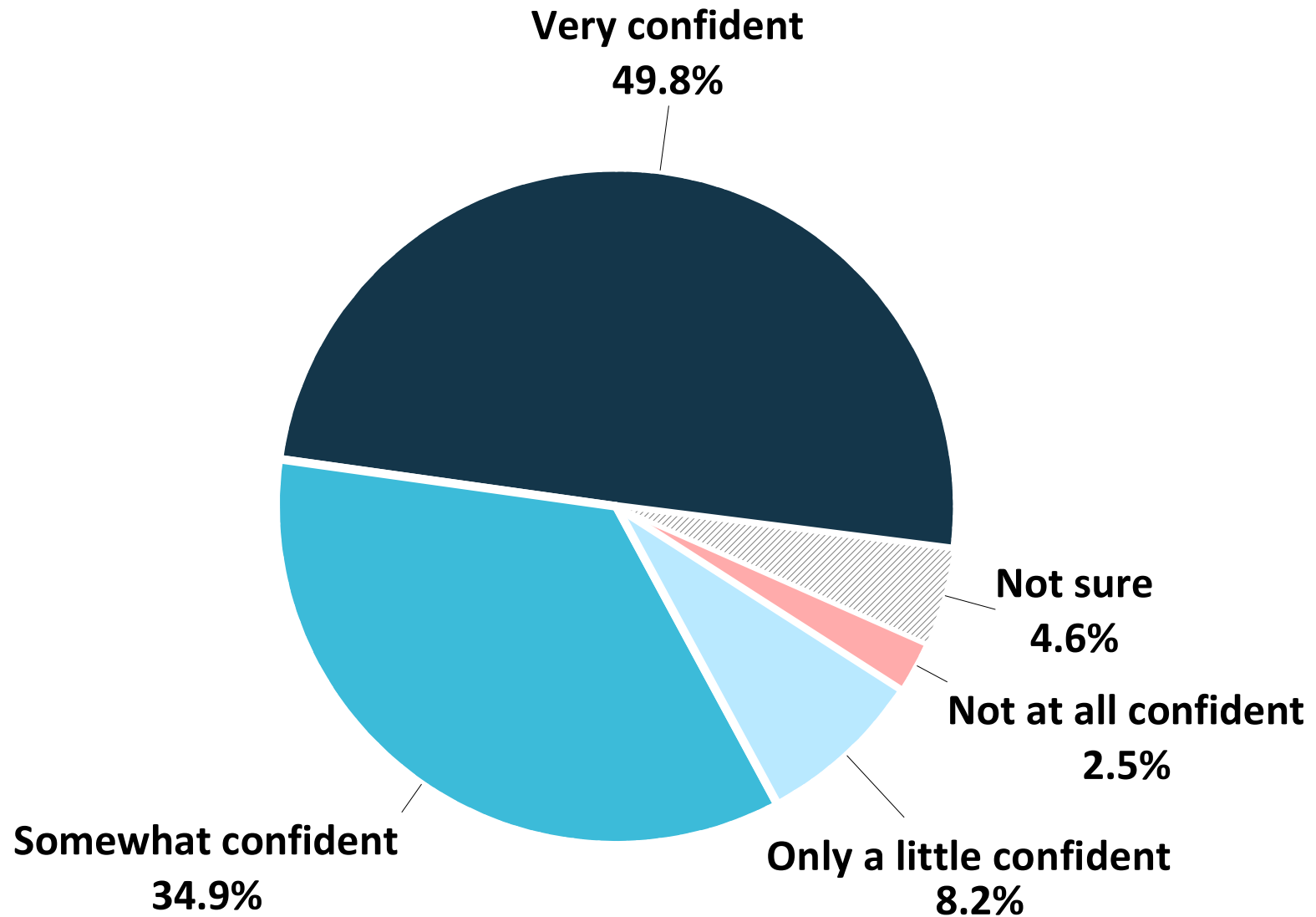
Q5b. What do you use the Internet for?

by percentage of Franklin County respondents that use the internet (multiple choices could be selected)



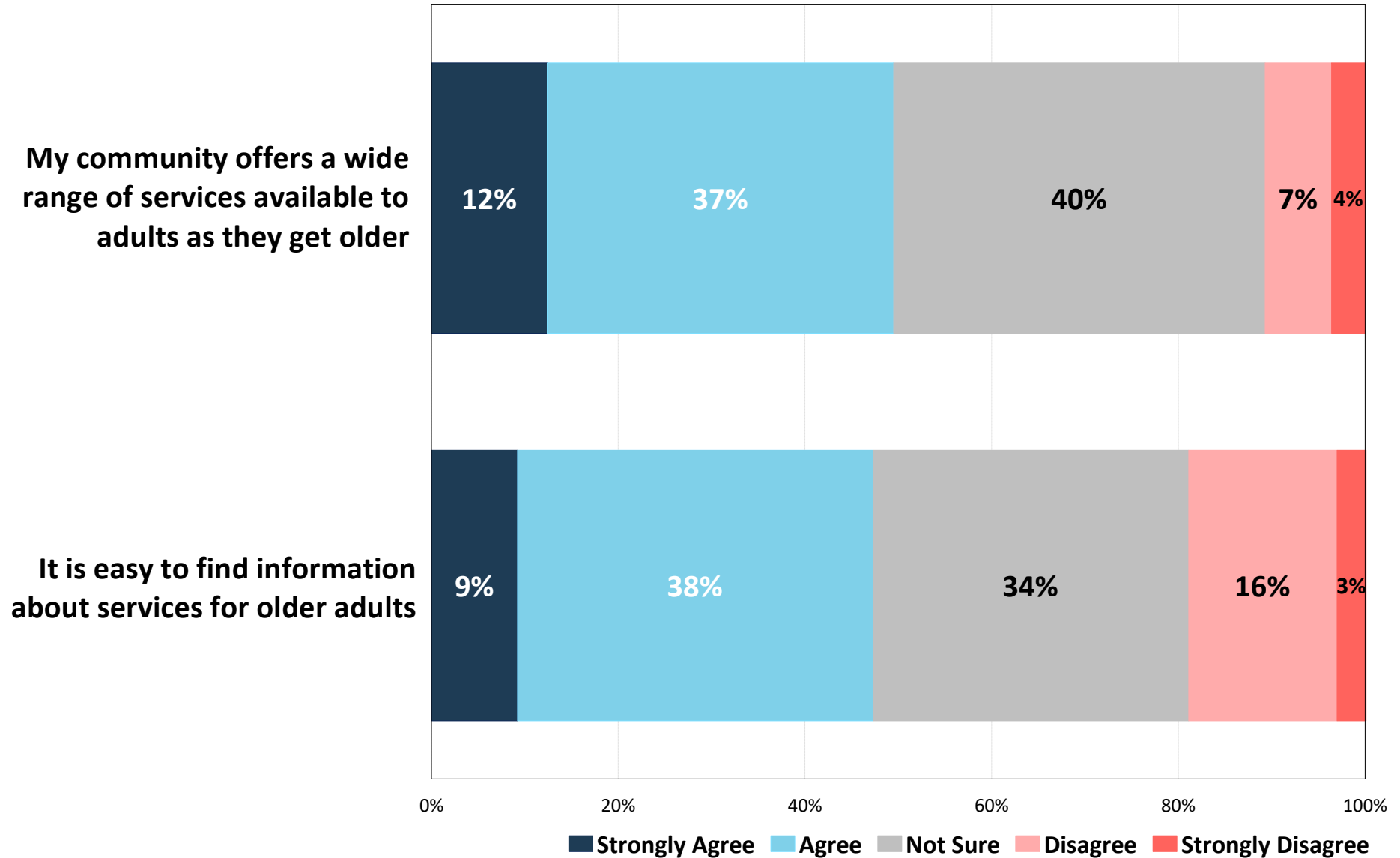
Q6. Overall, how confident do you feel using computers, smartphones, or other devices?

by percentage of Franklin County respondents



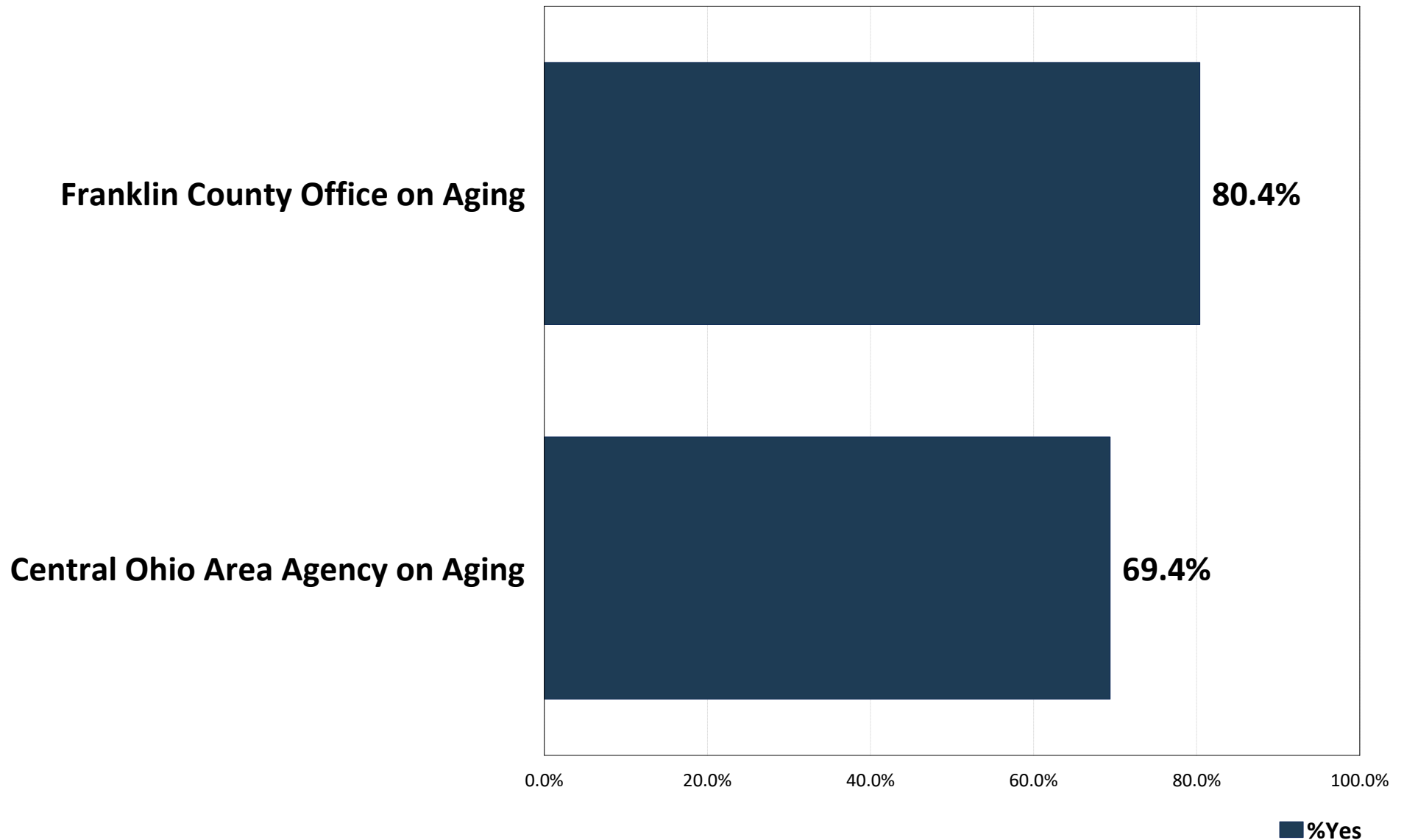
Q7. Community Resources. Please indicate your level of agreement with the following.

by percentage of **Franklin County** respondents using a 5-point scale, where 5 means *strongly agree* and 1 means *strongly disagree*



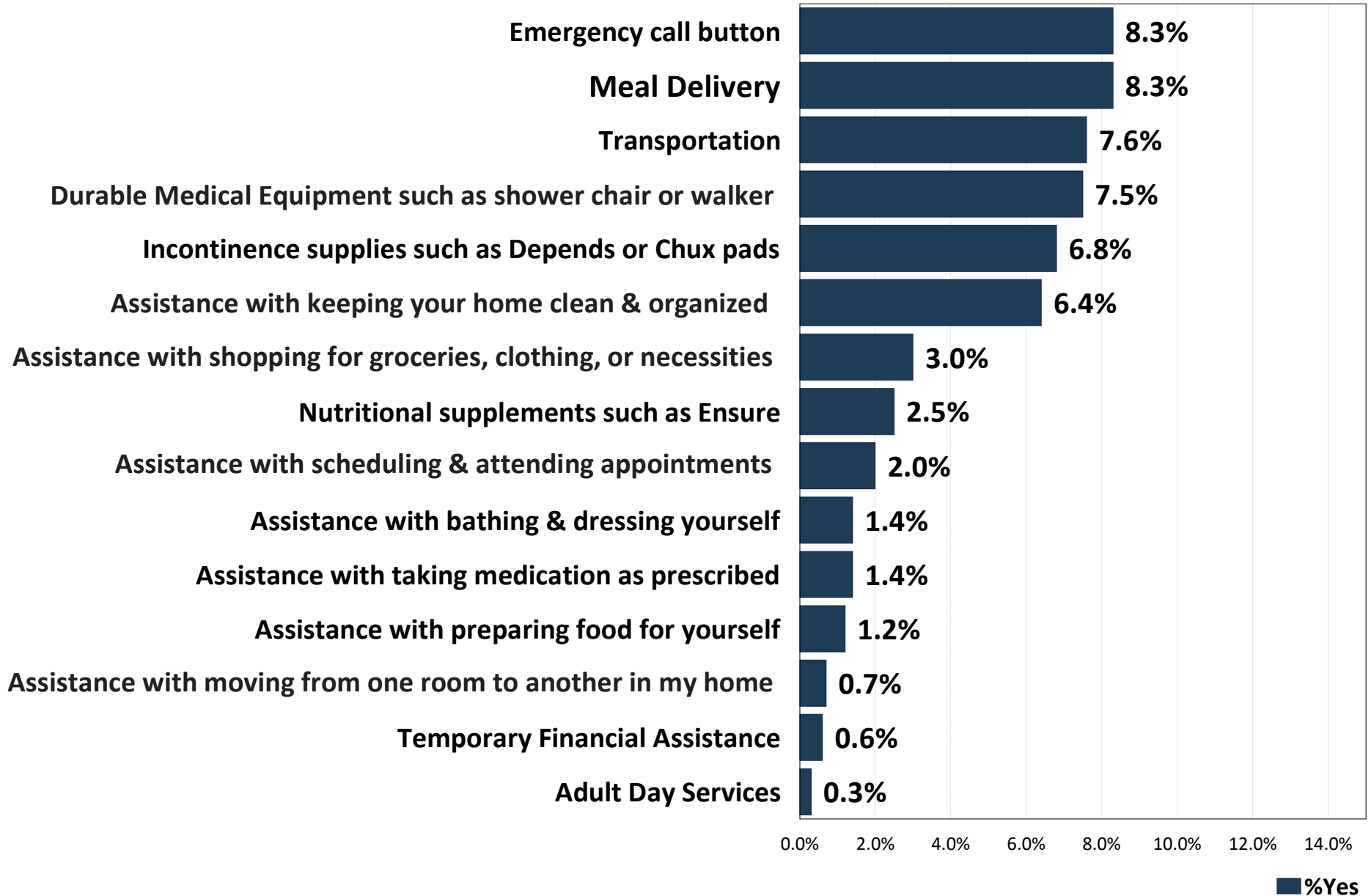
Q8. Are you aware of or have you heard of these agencies that serve older adults?

by percentage of **Franklin County** respondents that are aware or have heard of the agencies (excluding *not provided* responses)



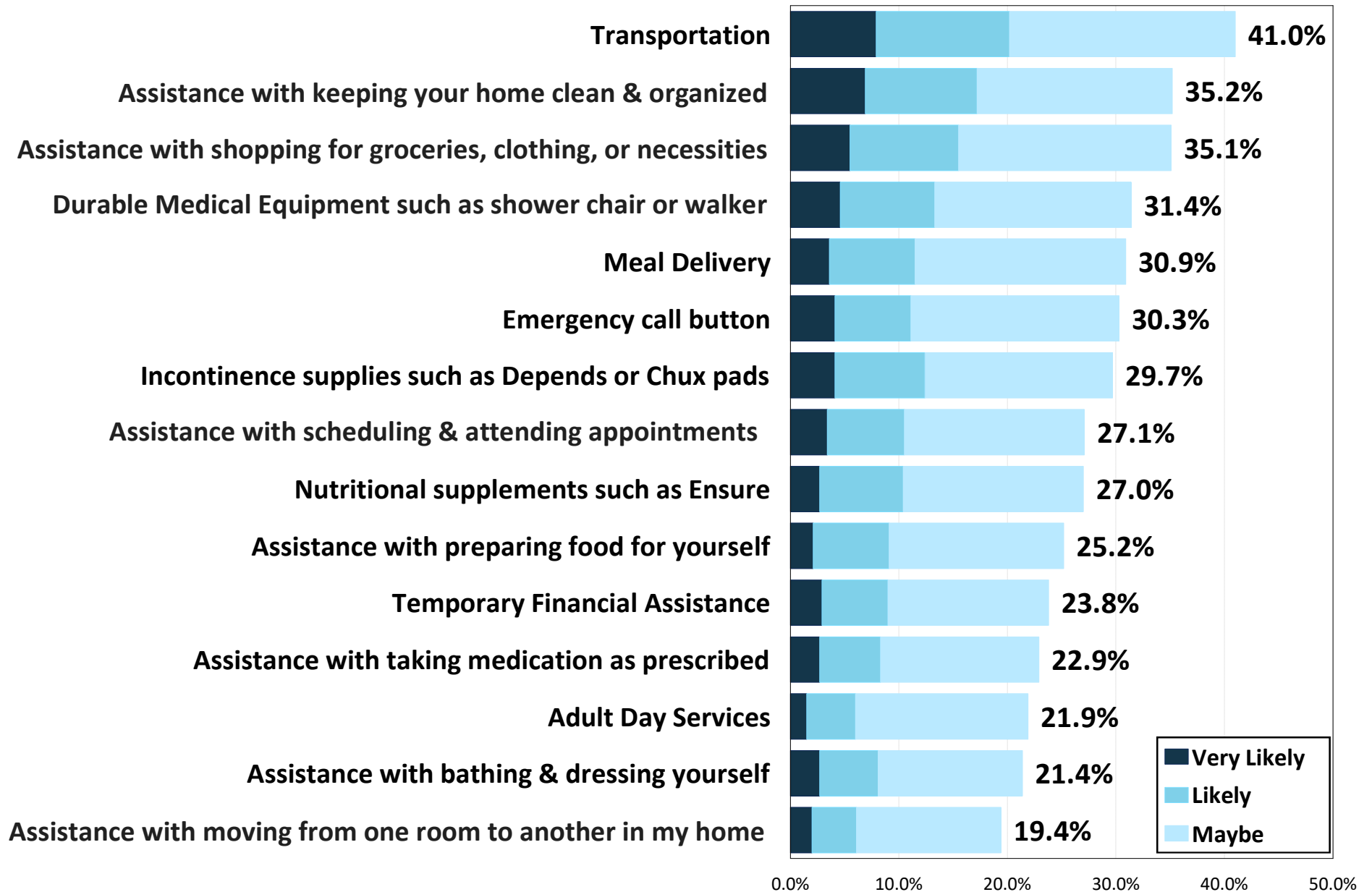
Q9. Are you currently receiving this service?

by percentage of **Franklin County** respondents that are receiving the service (excluding *not provided* responses)



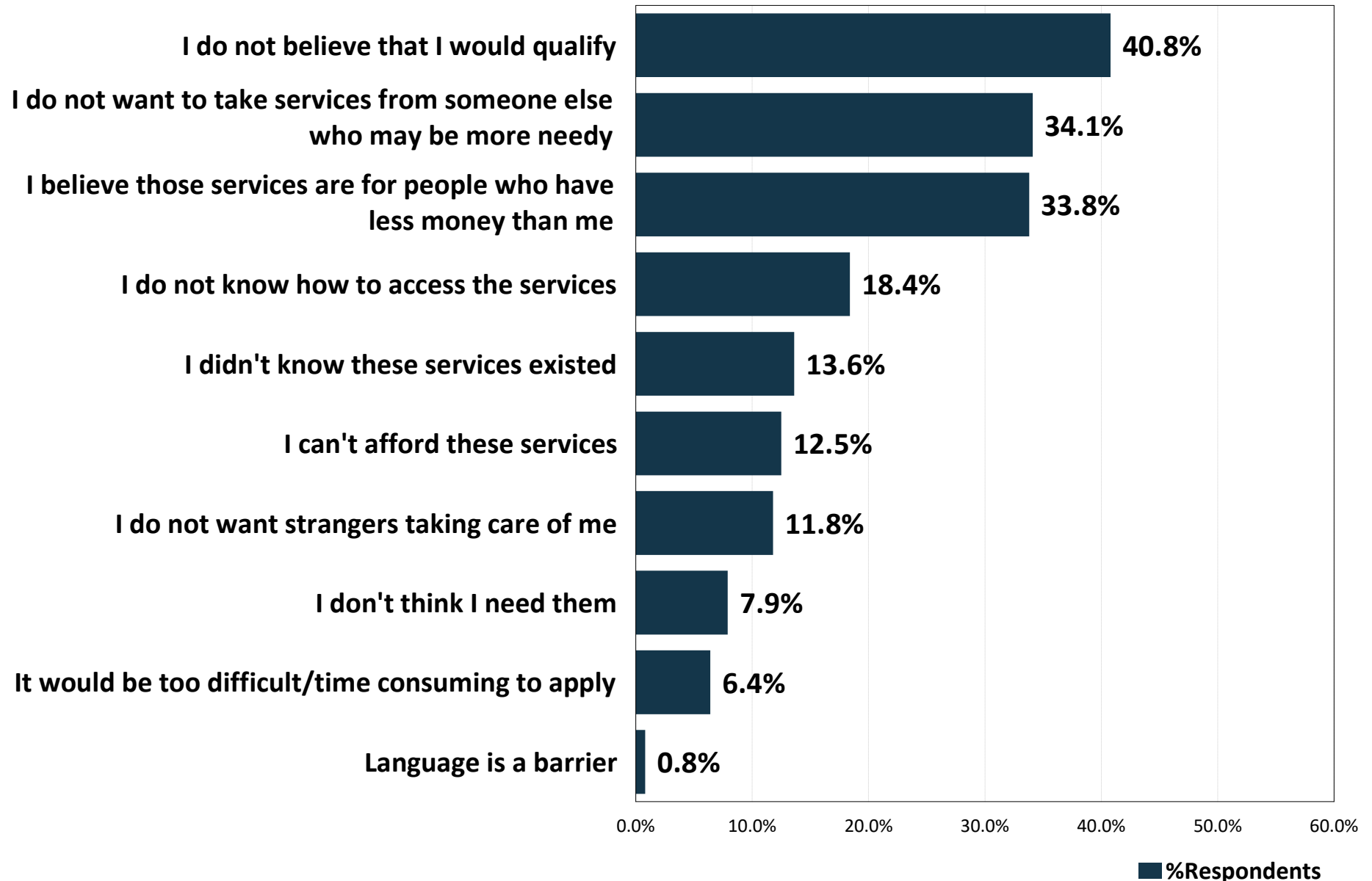
Q9. If "No," how likely are you to use this service in the future?

by sum percentage of **Franklin County** respondents, not currently receiving the service, that would *very likely*, *likely*, or *maybe* use the service



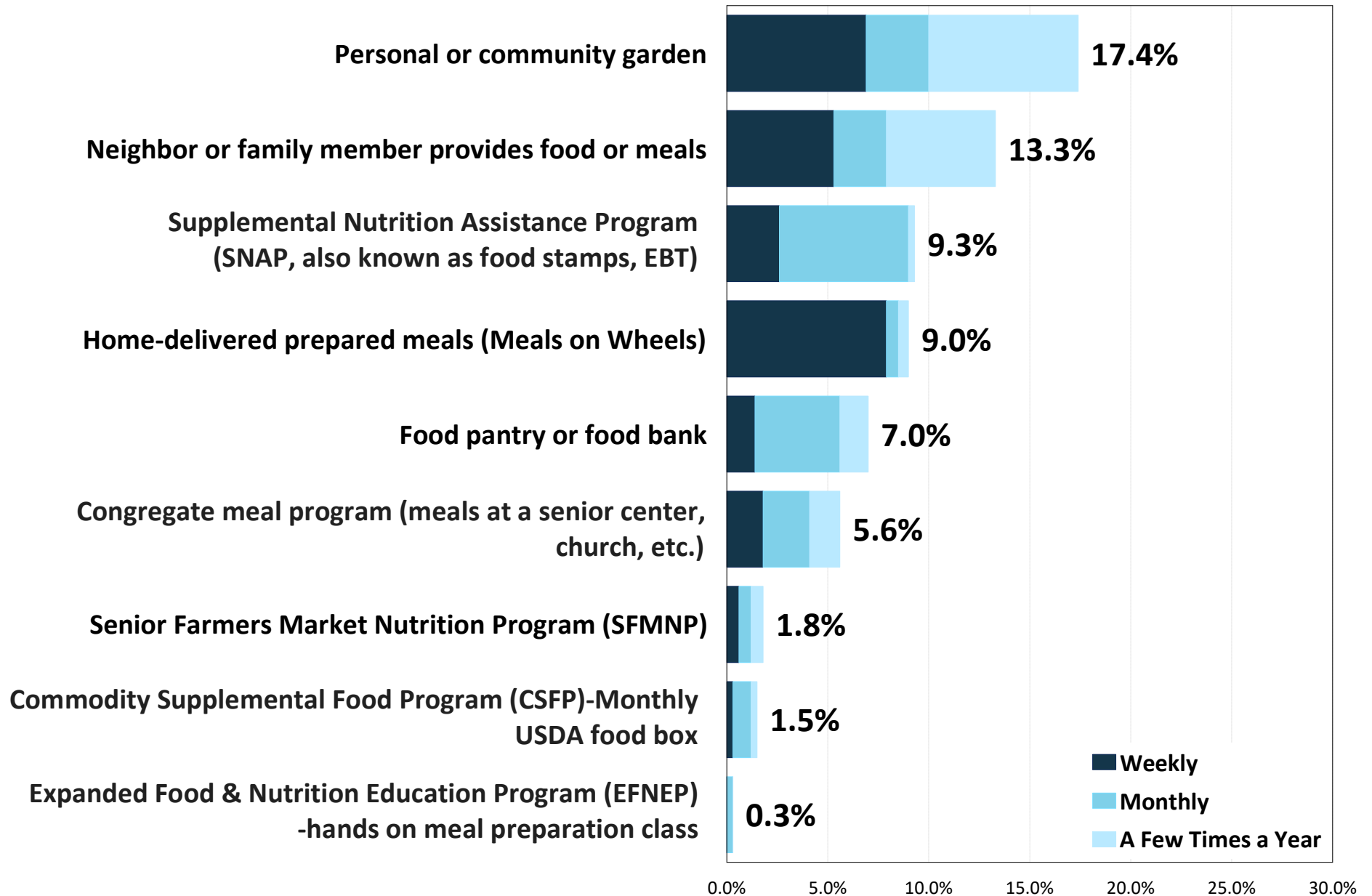
Q10. Would any of the following reasons prevent you from seeking any of the services listed in Question 9?

by percentage of Franklin County respondents (multiple choices could be selected)



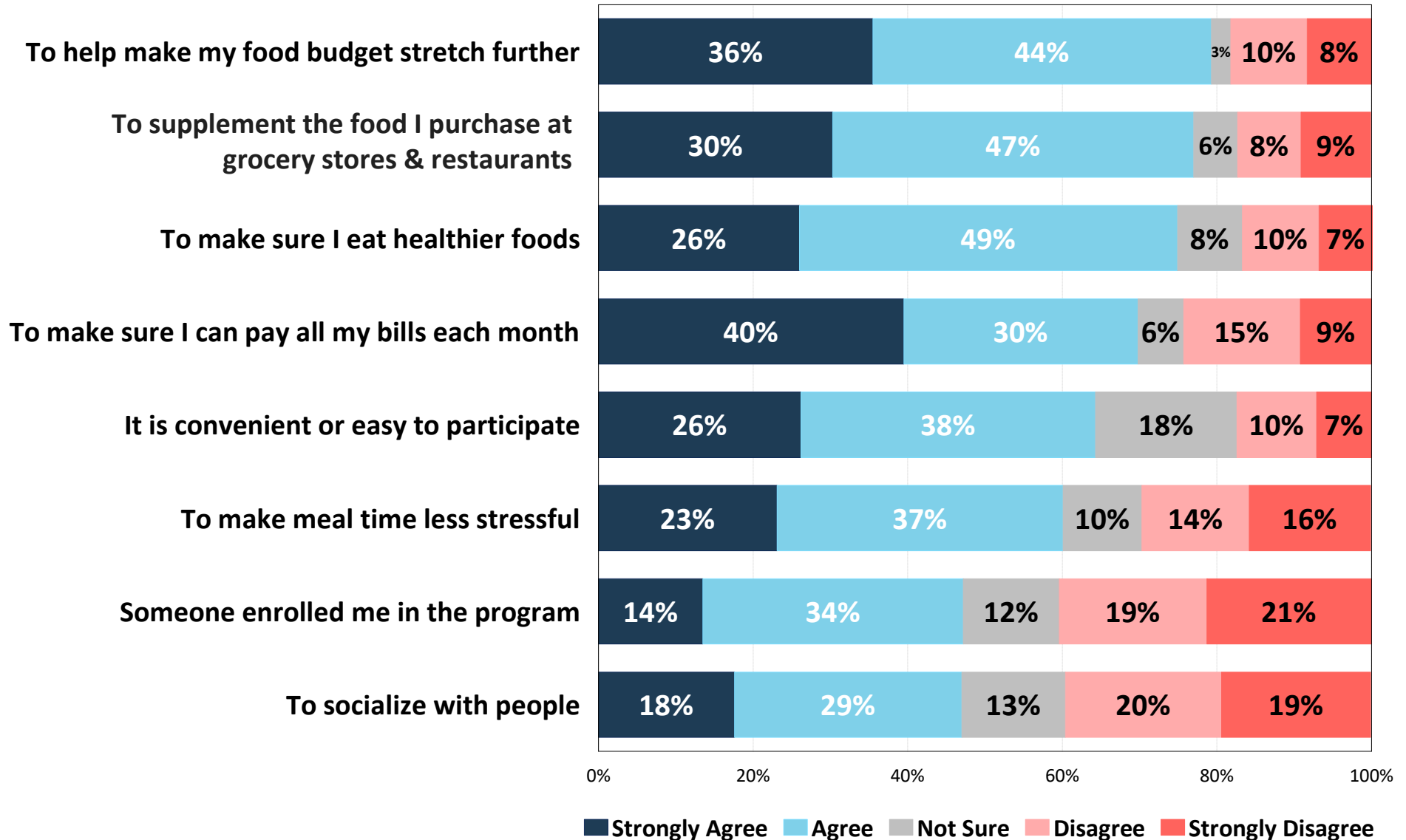
Q11. How often do you receive your food in these ways?

by sum percentage of Franklin County respondents that receive their food *weekly, monthly, or a few times a year* with the respective service



Q12. If you participate in any food or nutrition programs, why do you participate?

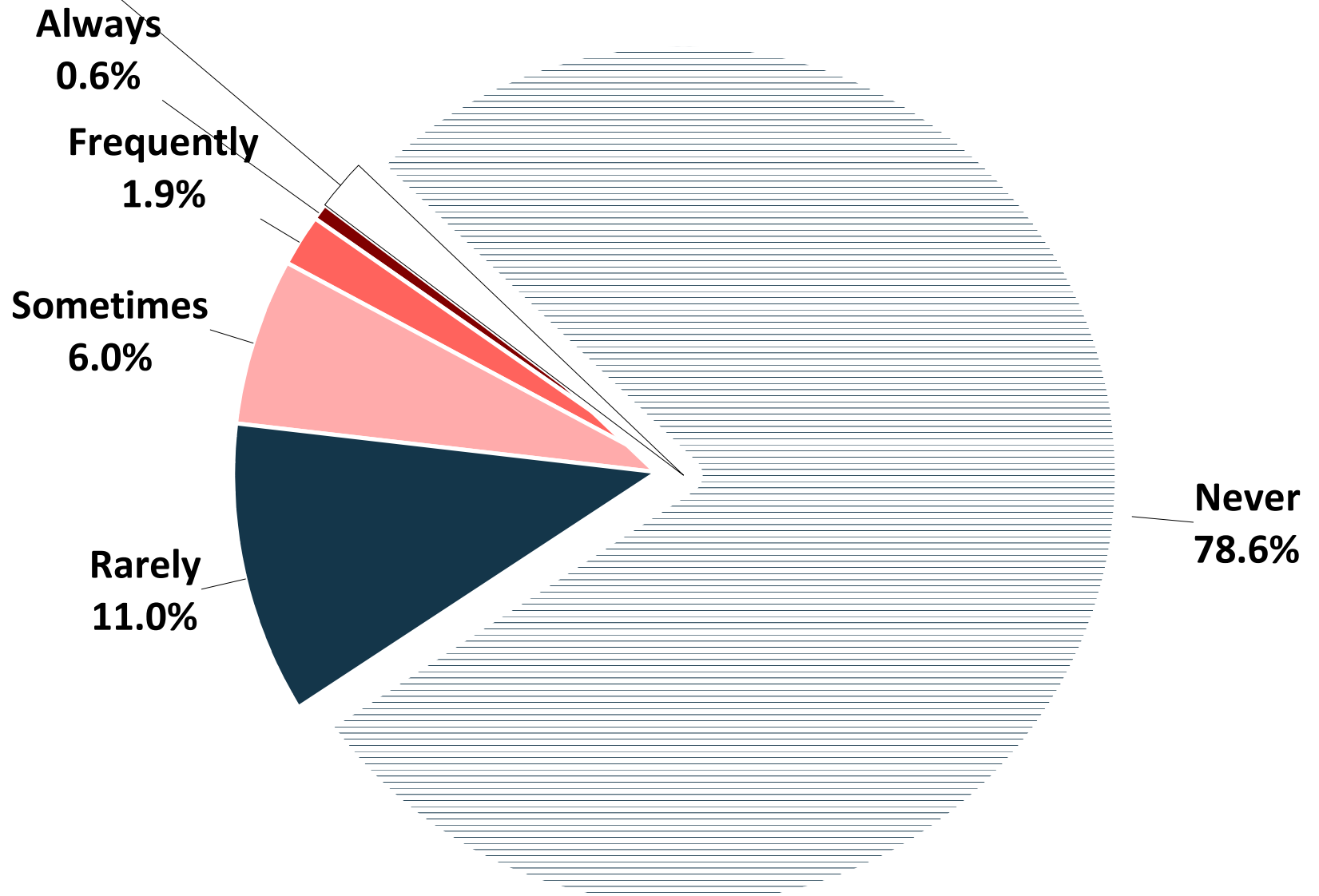
by percentage of **Franklin County** respondents using a 5-point scale, where 5 means *strongly agree* and 1 means *strongly disagree* (excluding N/A responses)



Q13. Over the last year, how often were you worried about not having enough food to eat?

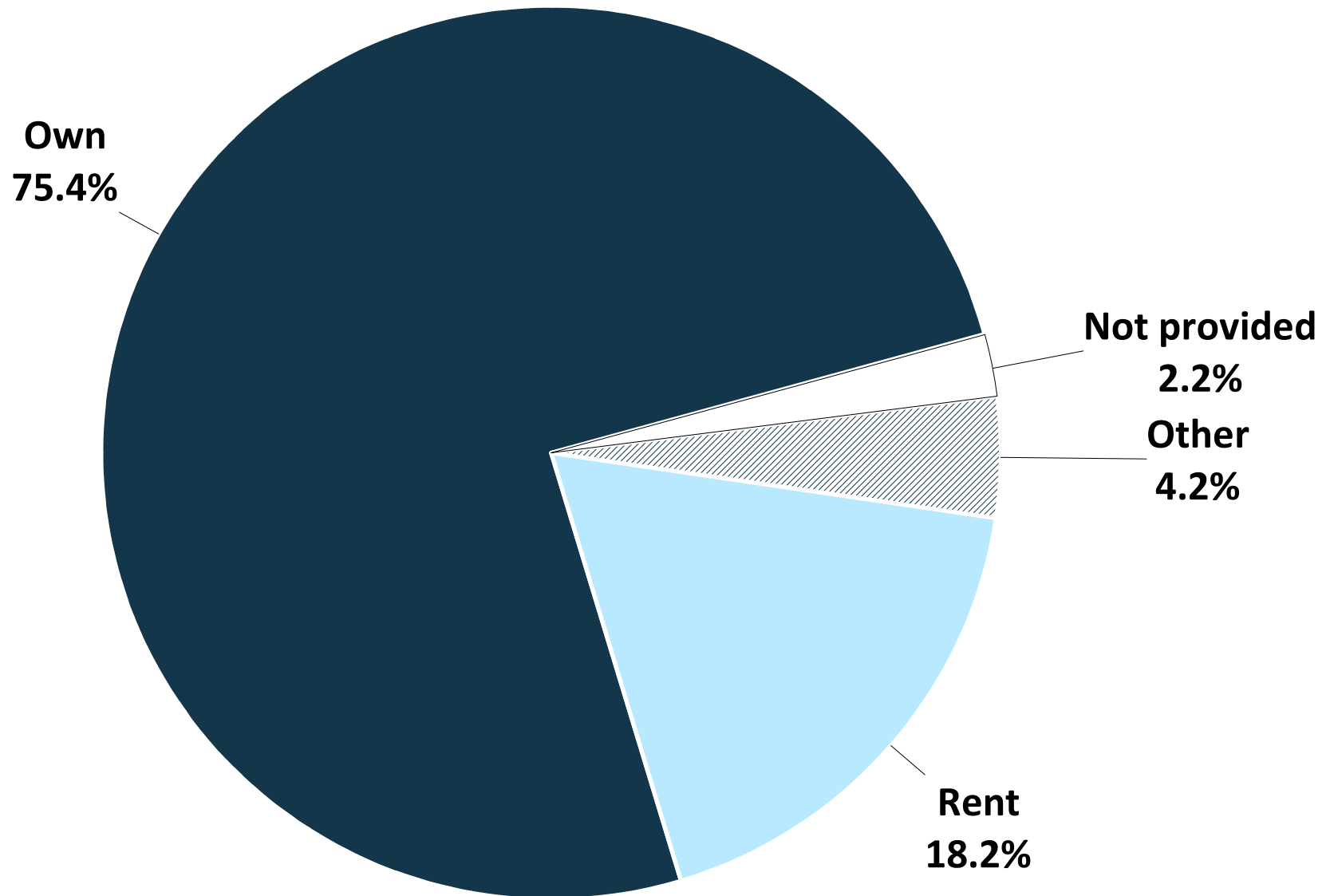
Not provided
1.9%

by percentage of Franklin County respondents



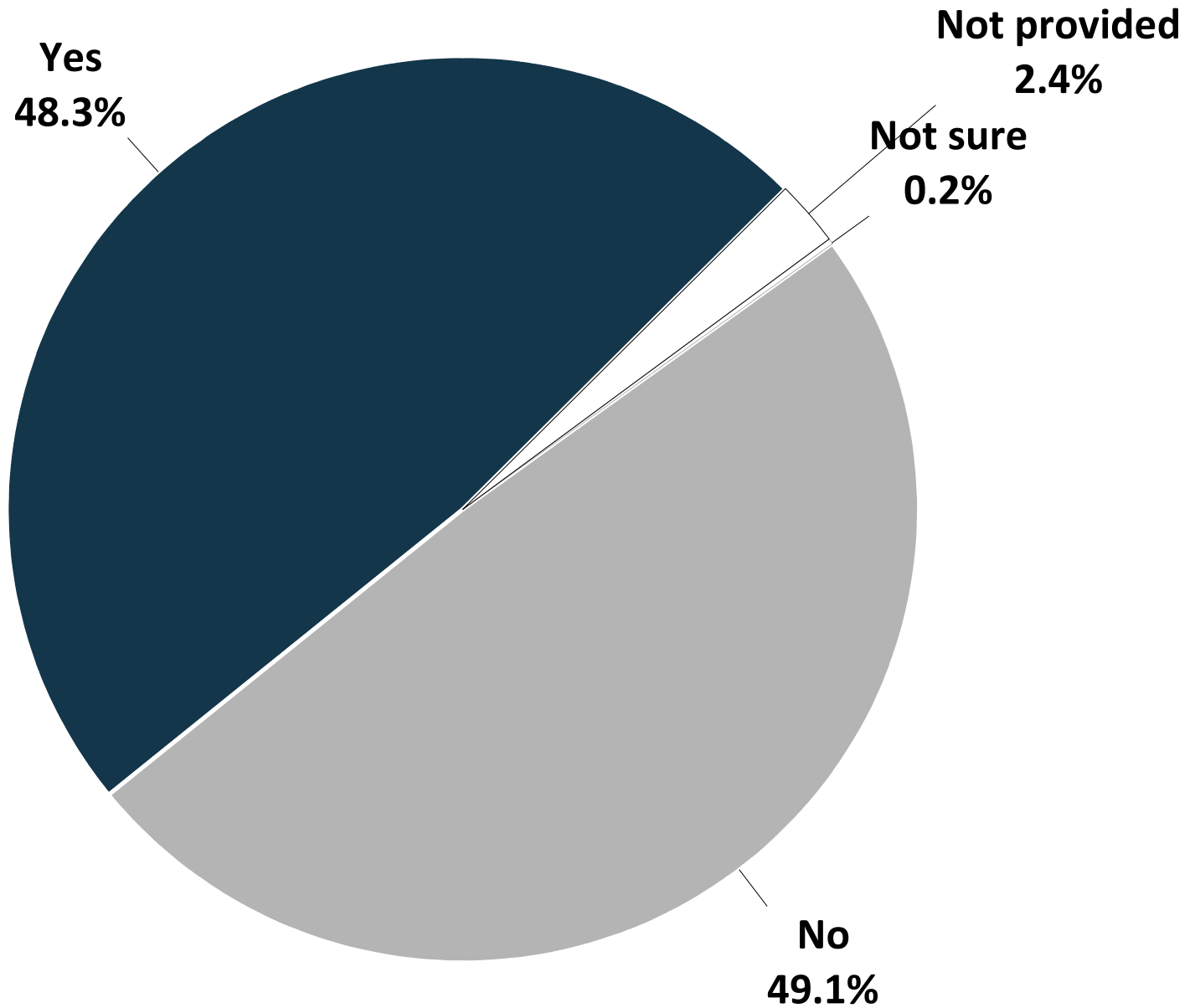
Q14. Housing. Do you own or rent your home?

by percentage of Franklin County respondents



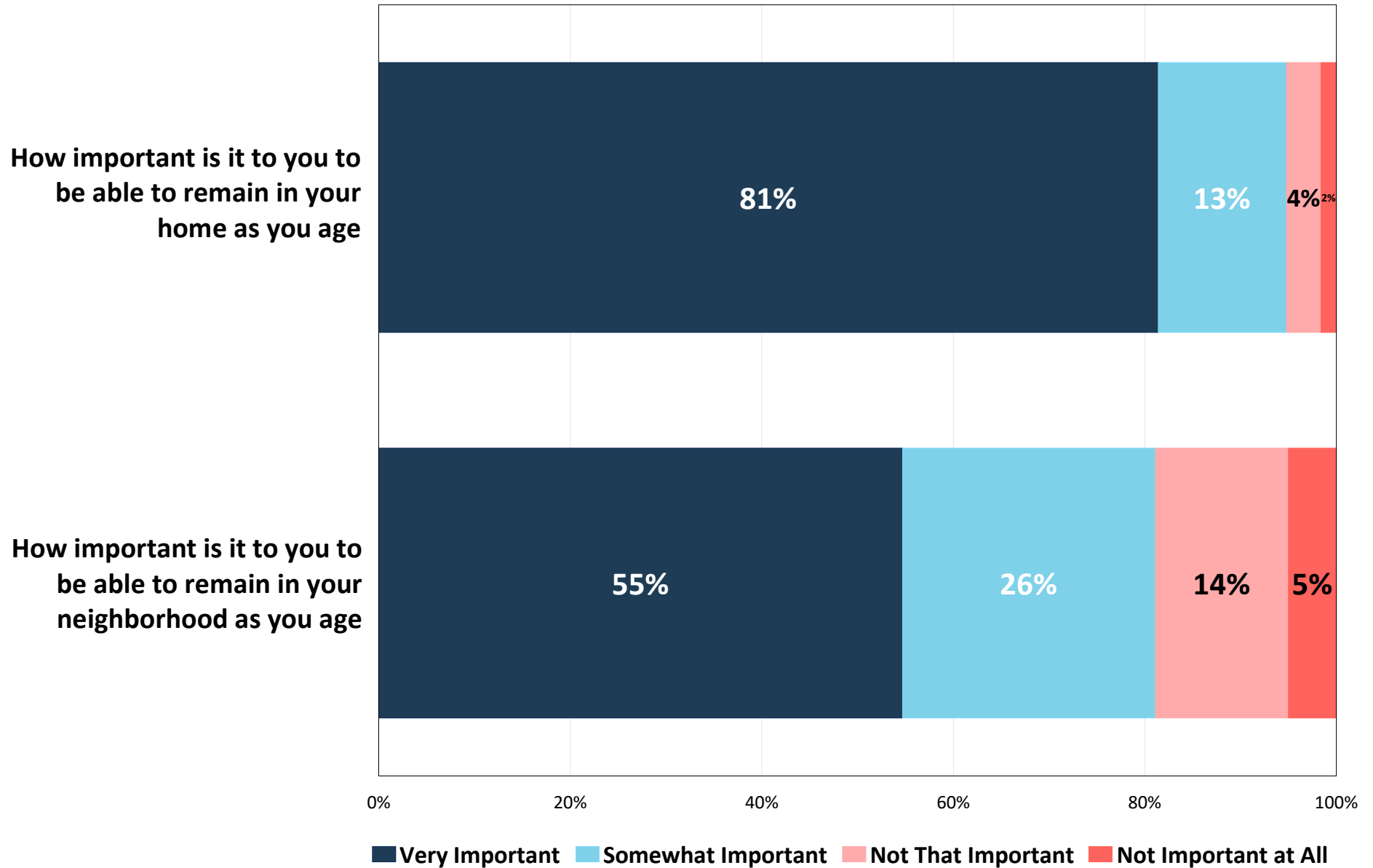
Q14a. Do you have a mortgage?

by percentage of Franklin County respondents



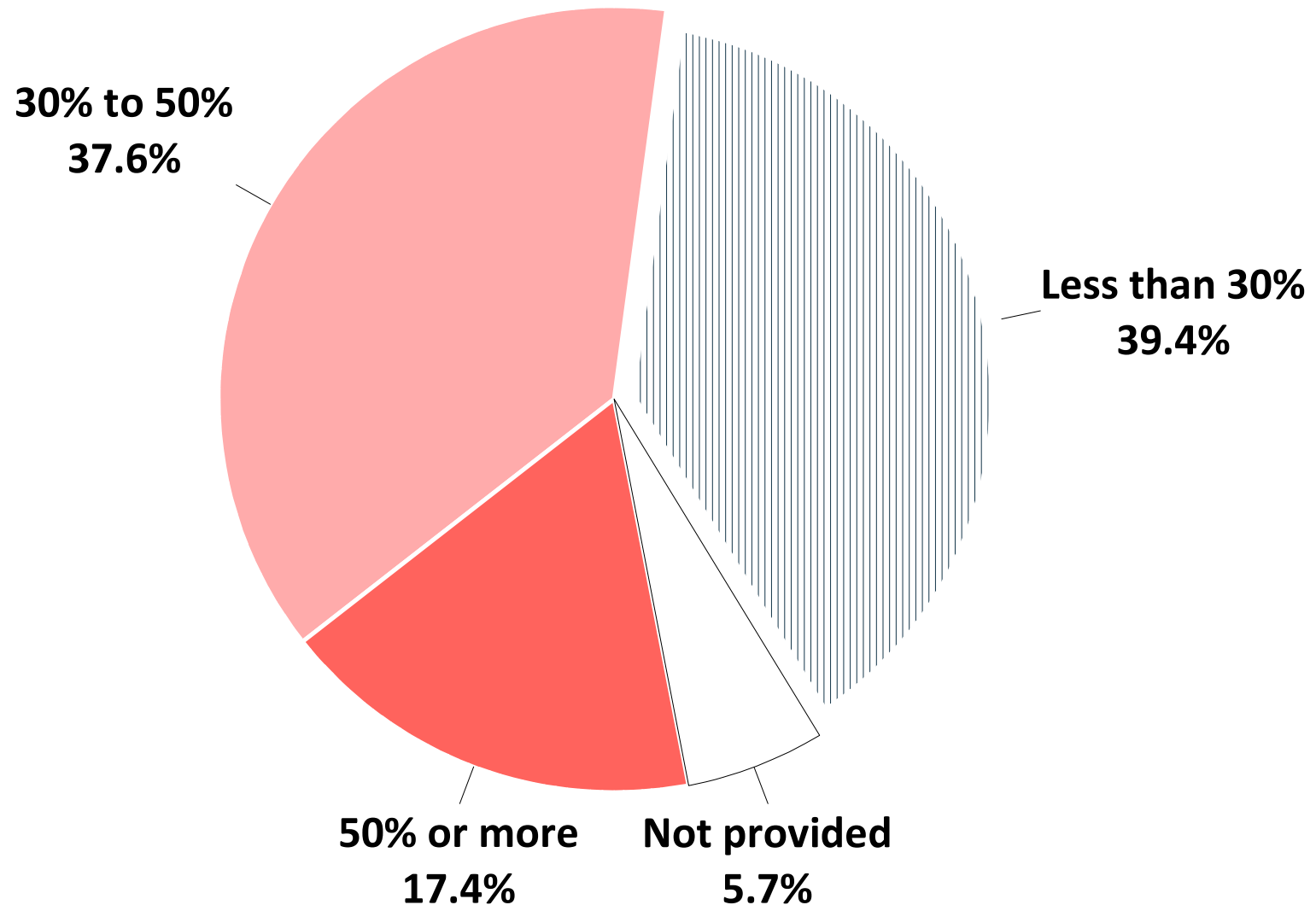
Q15. How important are the following...

by percentage of **Franklin County** respondents using a 4-point scale, where 4 means *very important* and 1 means *not important at all* (excluding *not provided* responses)



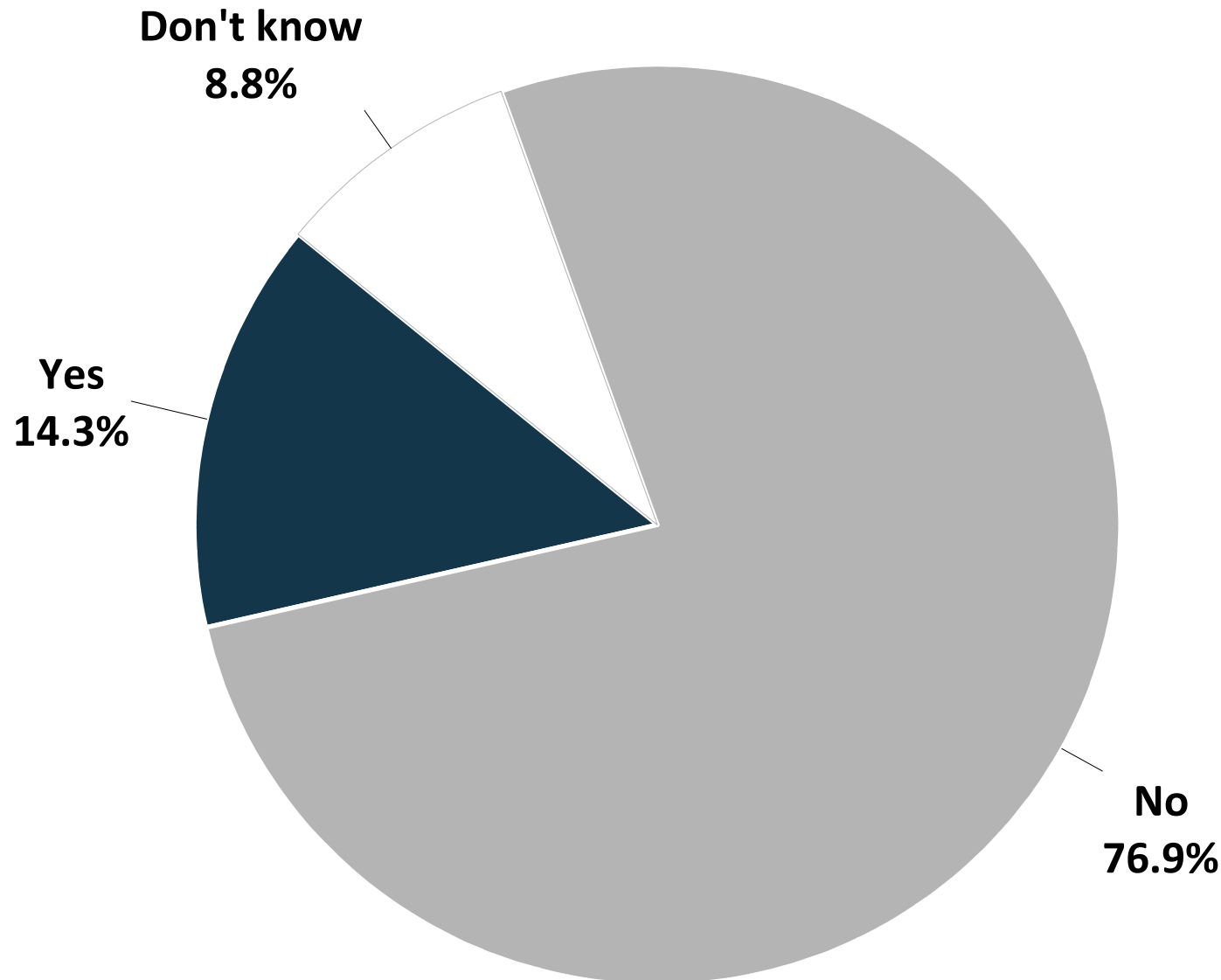
Q16. What percentage of your monthly household income do you spend on your housing expenses, including utilities?

by percentage of Franklin County respondents



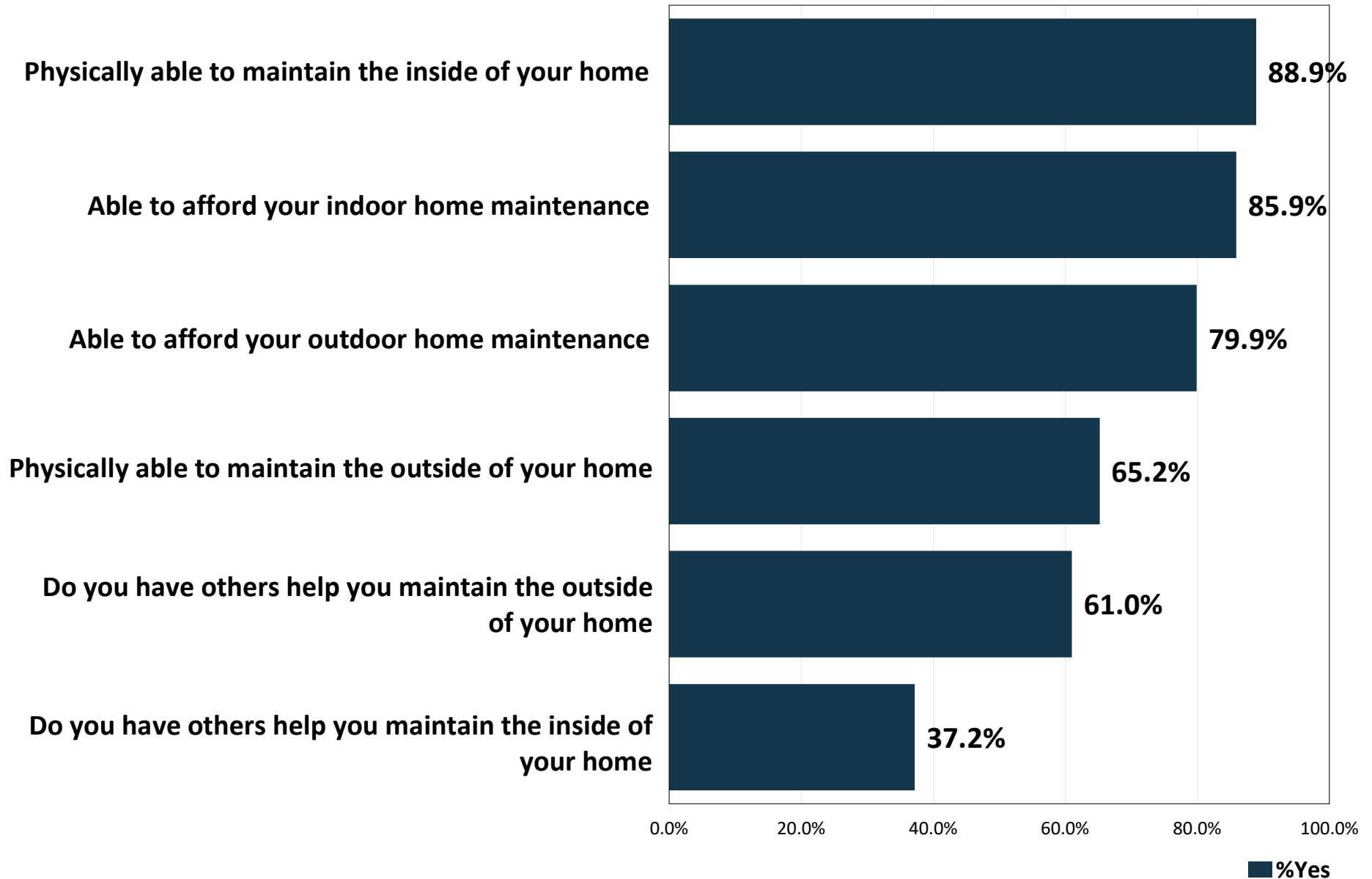
Q17. Do you have concerns about your ability to pay your rent, mortgage, or utilities?

by percentage of Franklin County respondents



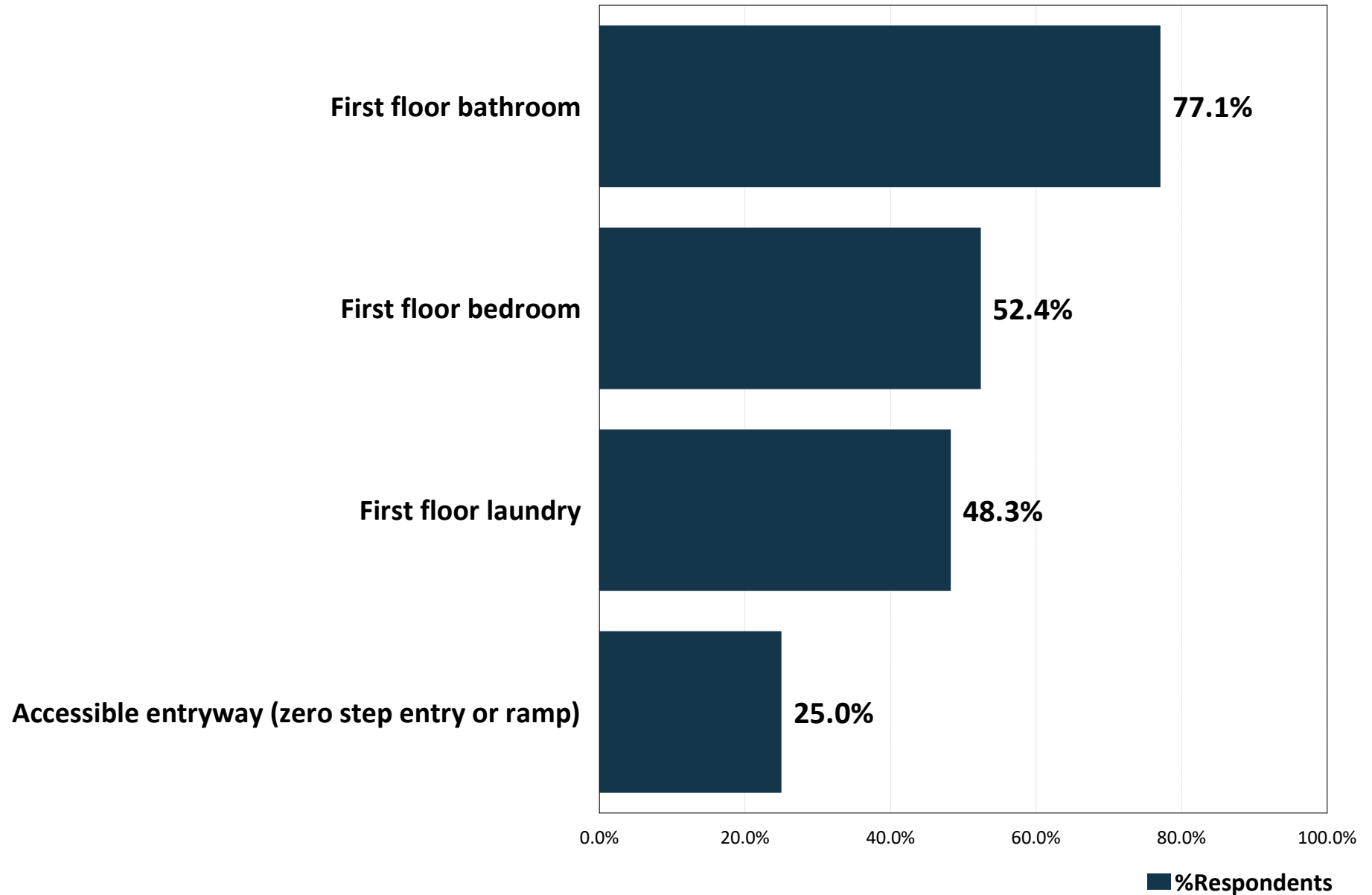
Q18. Are you...?

by percentage of **Franklin County** respondents that responded “yes” (excluding *not provided* responses)



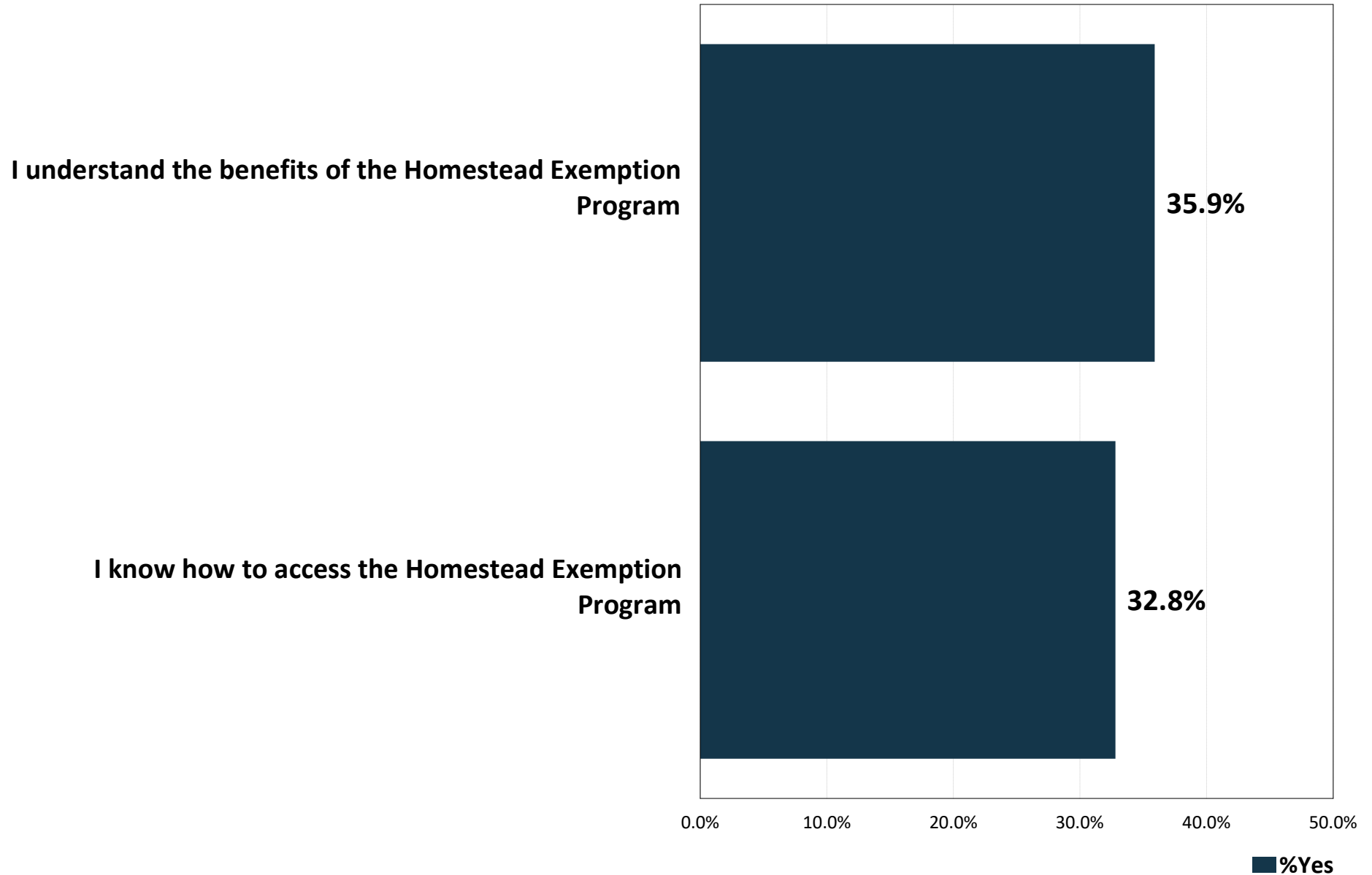
Q19. Does your home have any of the following?

by percentage of **Franklin County** respondents (multiple choices could be made)



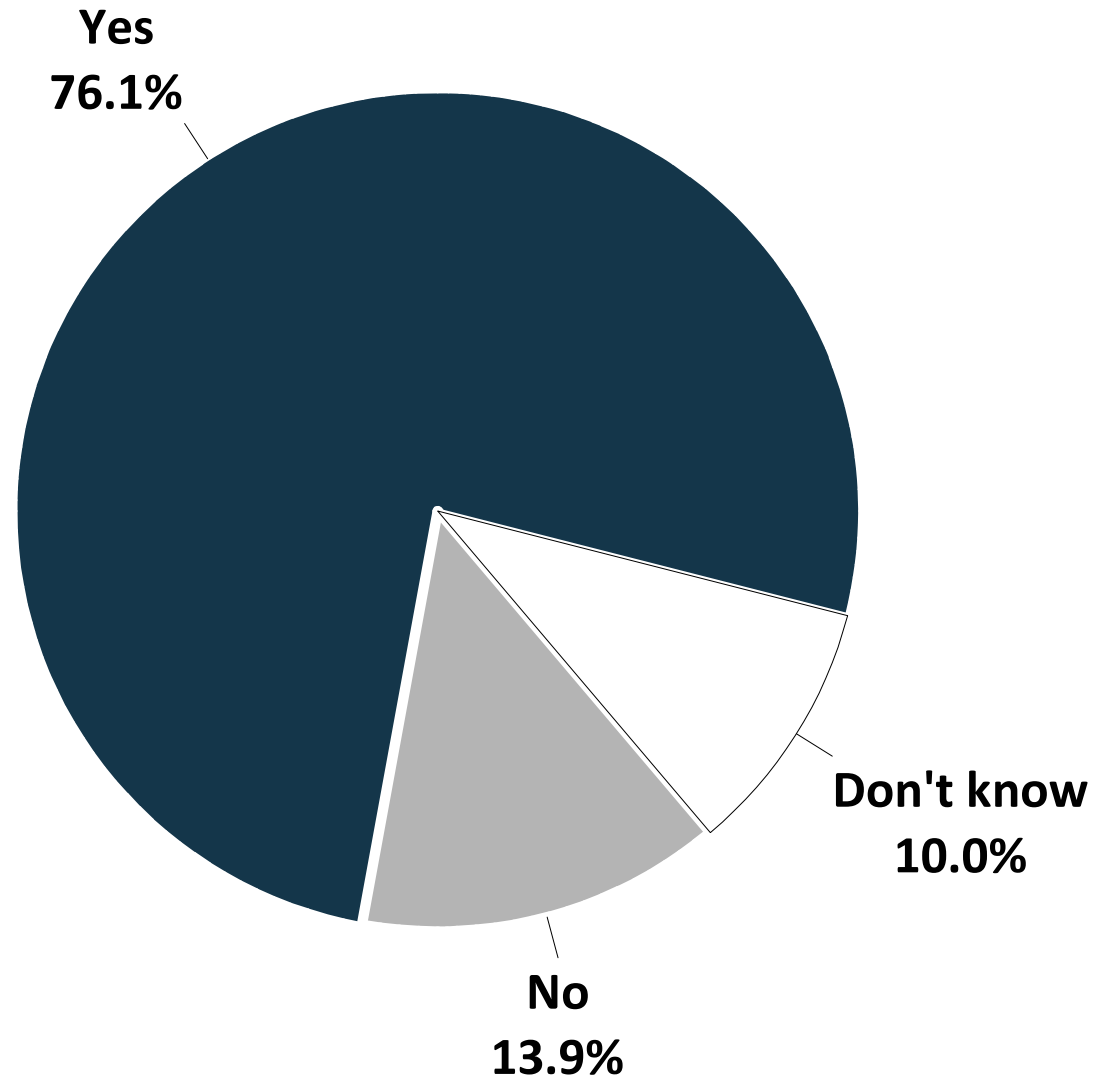
Q20. Please answer each of the following:

by percentage of Franklin County respondents that responded “yes”



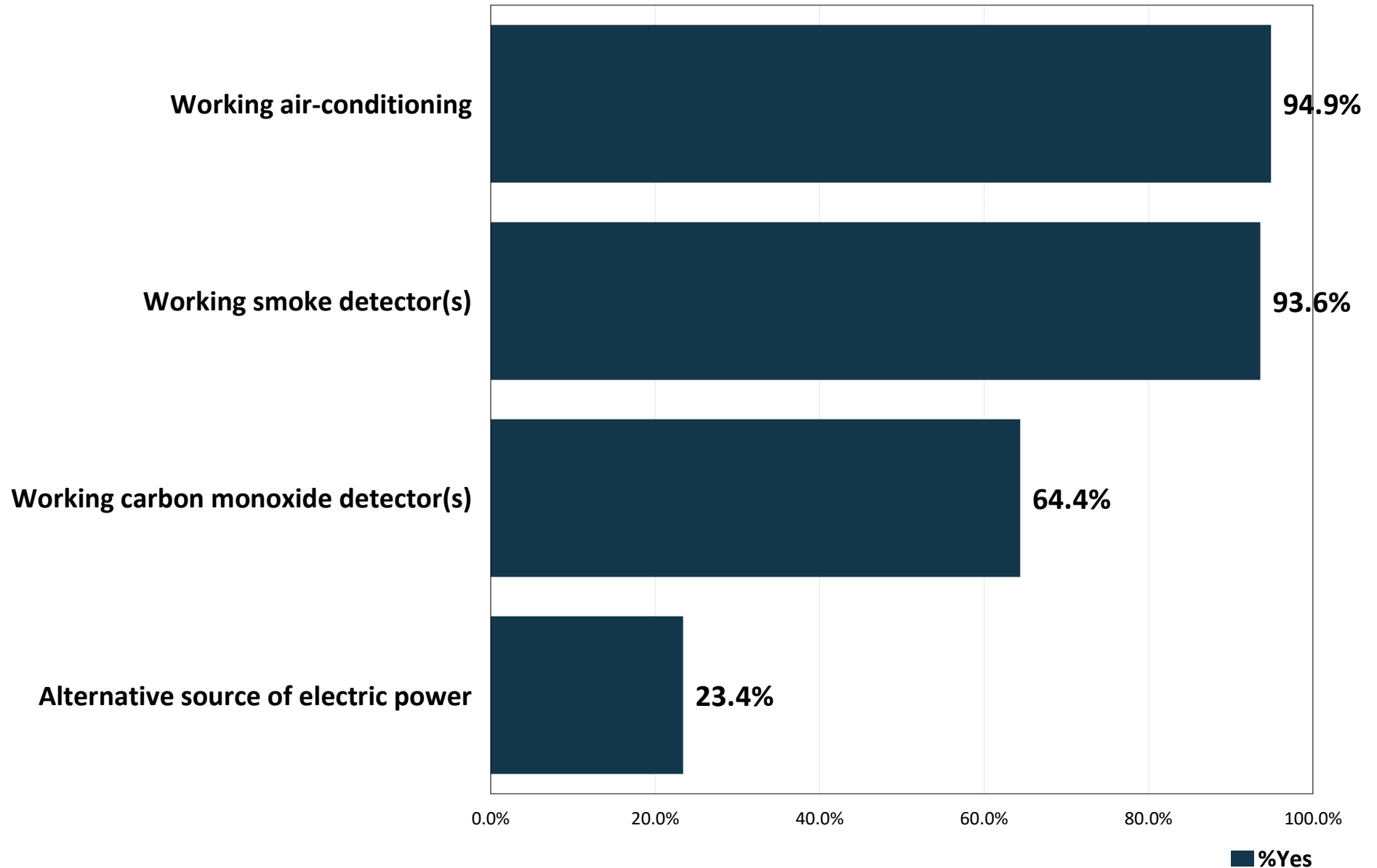
Q21. Based on these guidelines, are you prepared for an emergency?

by percentage of Franklin County respondents



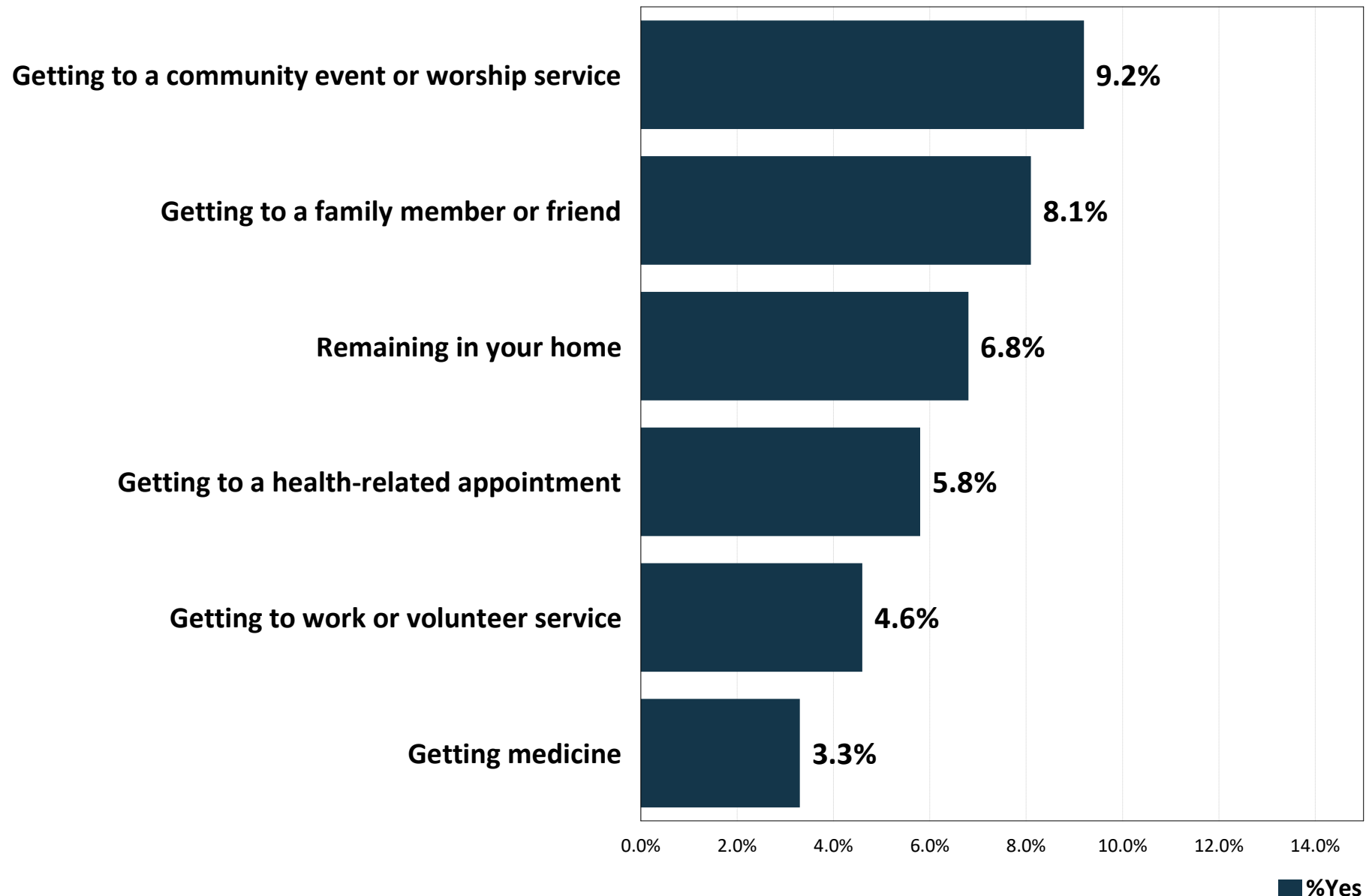
Q22. Do you have the following items in your home?

by percentage of Franklin County respondents that responded “yes”



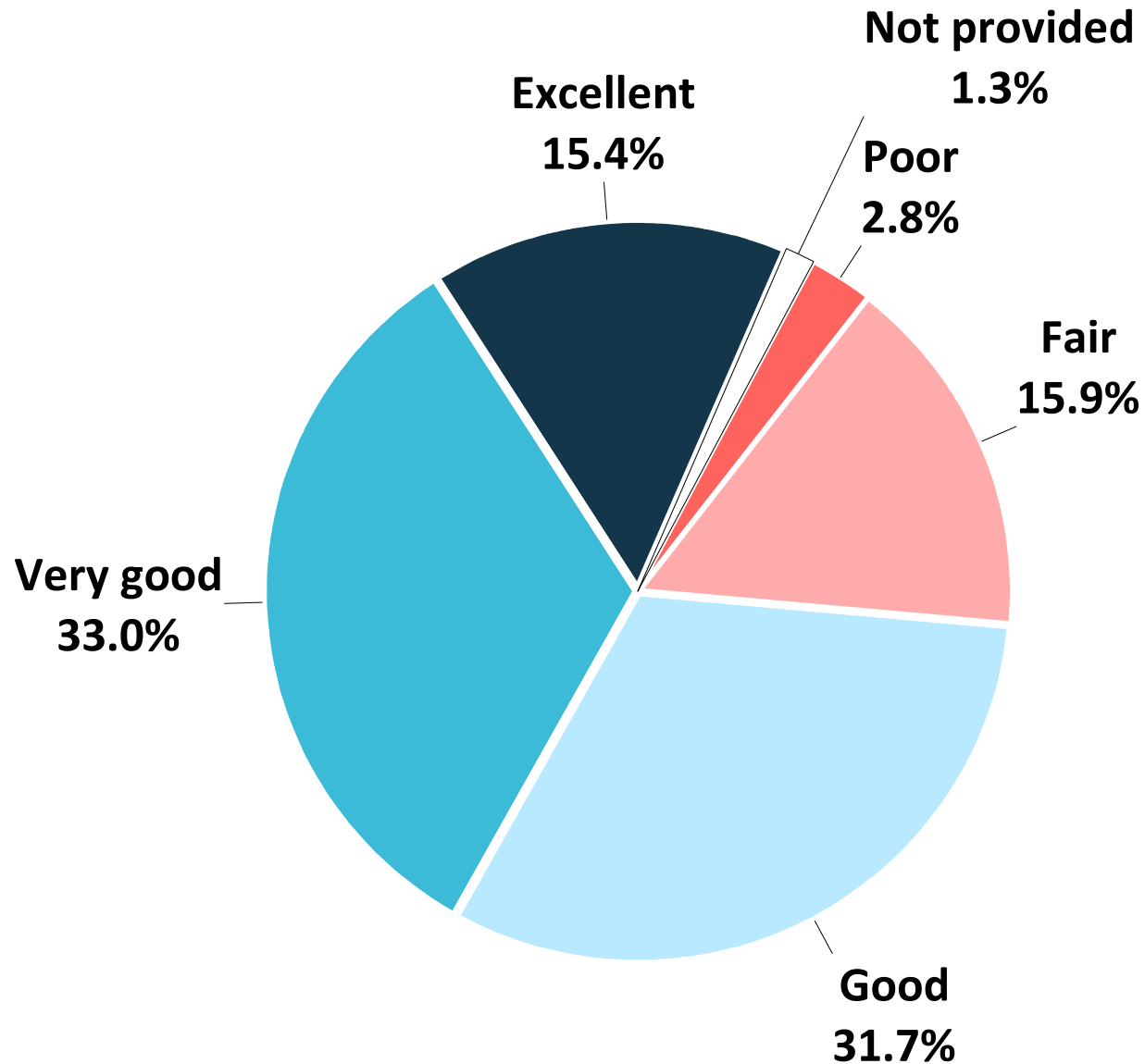
Q23. Have weather events like extreme heat, power outages, or flooding prevented you from any of the following?

by percentage of Franklin County respondents that responded “yes”



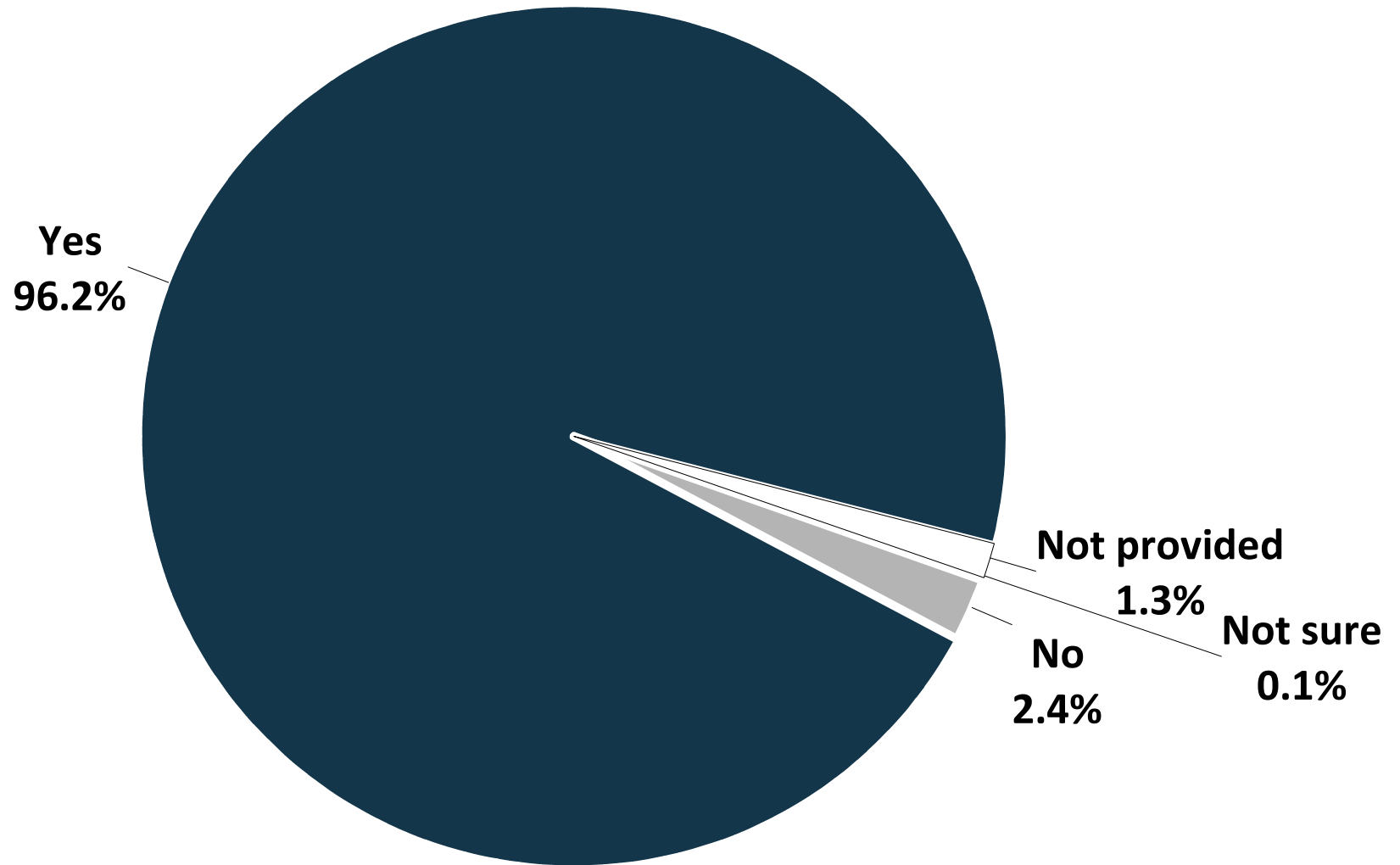
Q24. Health and Well-Being. How would you rate your overall health?

by percentage of Franklin County respondents



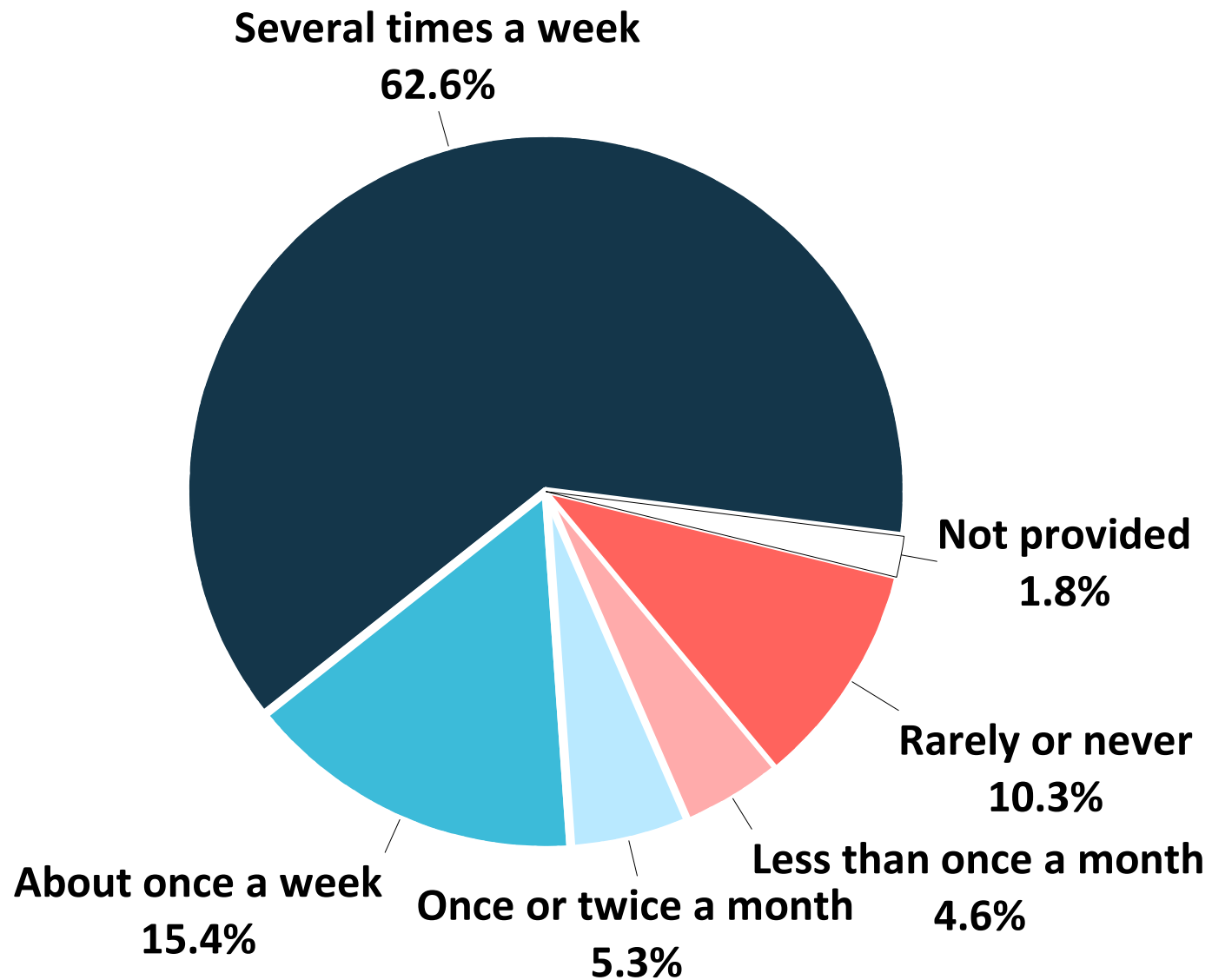
Q25. Do you have a primary care provider (general doctor or family doctor)?

by percentage of Franklin County respondents



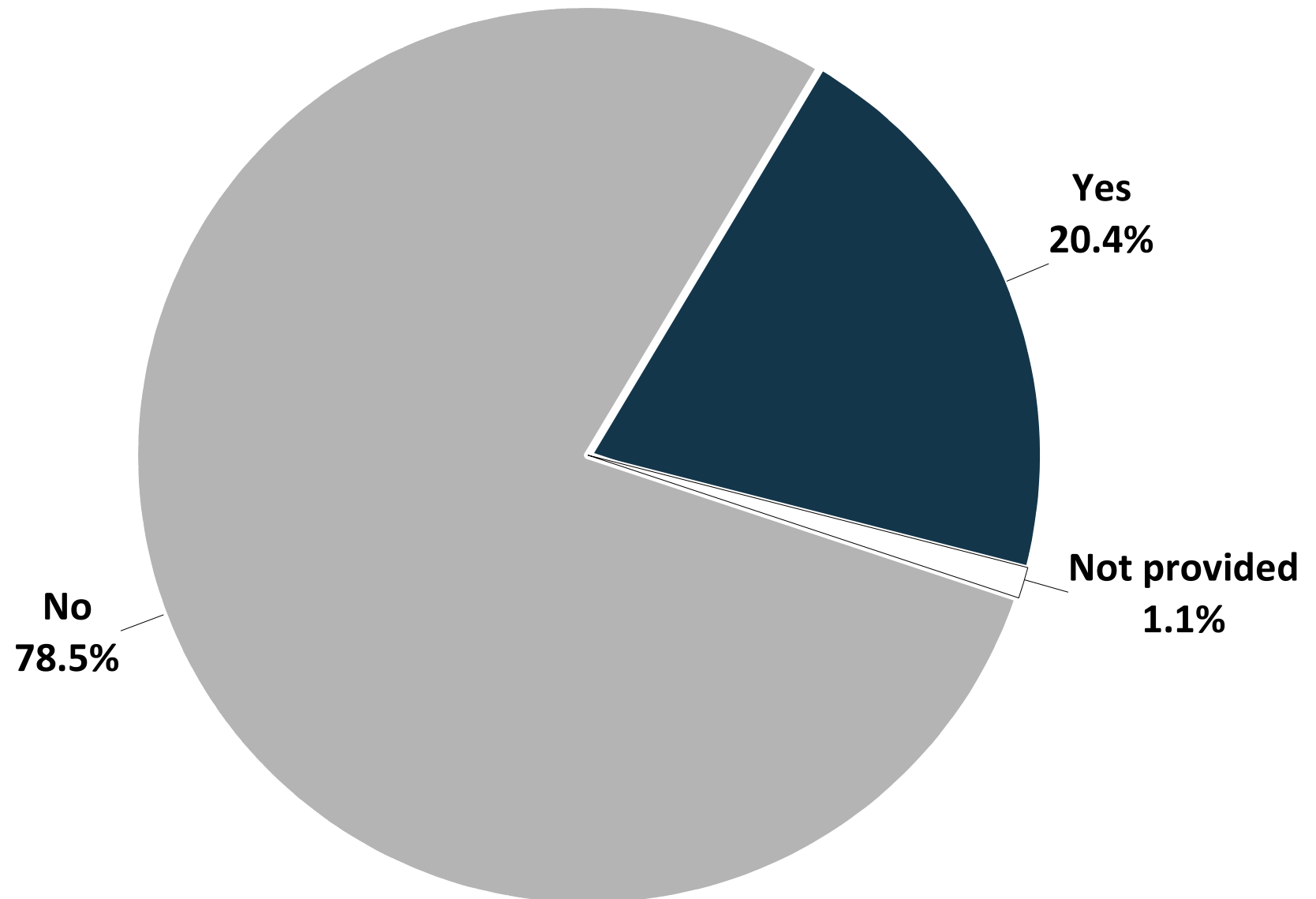
Q26. How often do you engage in some form of physical exercise (like walking, biking, sports, stretching)?

by percentage of Franklin County respondents



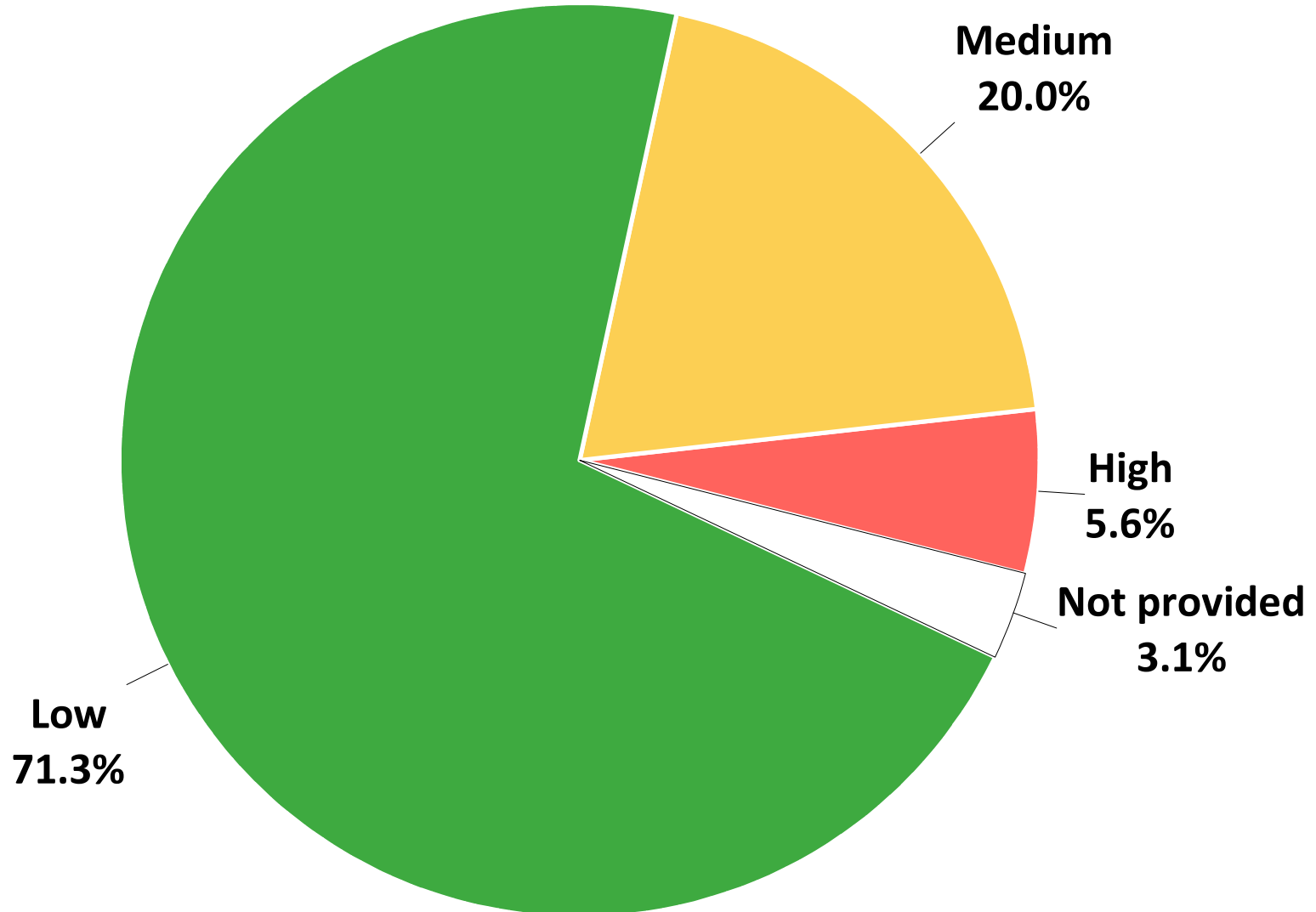
Q27. Have you fallen in the last 6 months?

by percentage of **Franklin County** respondents



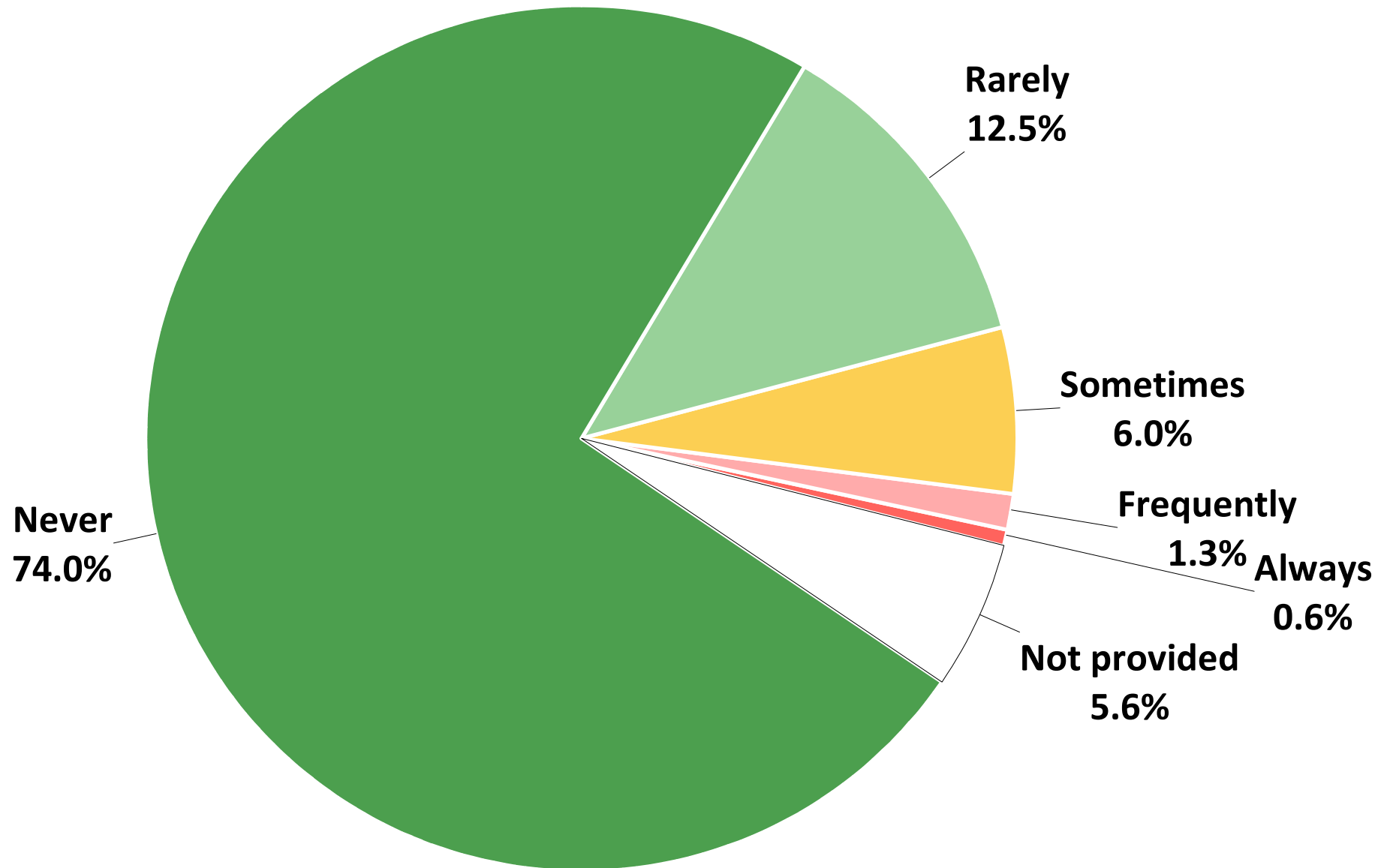
Q28. What is the probability that you will fall in the next few months?

by percentage of Franklin County respondents



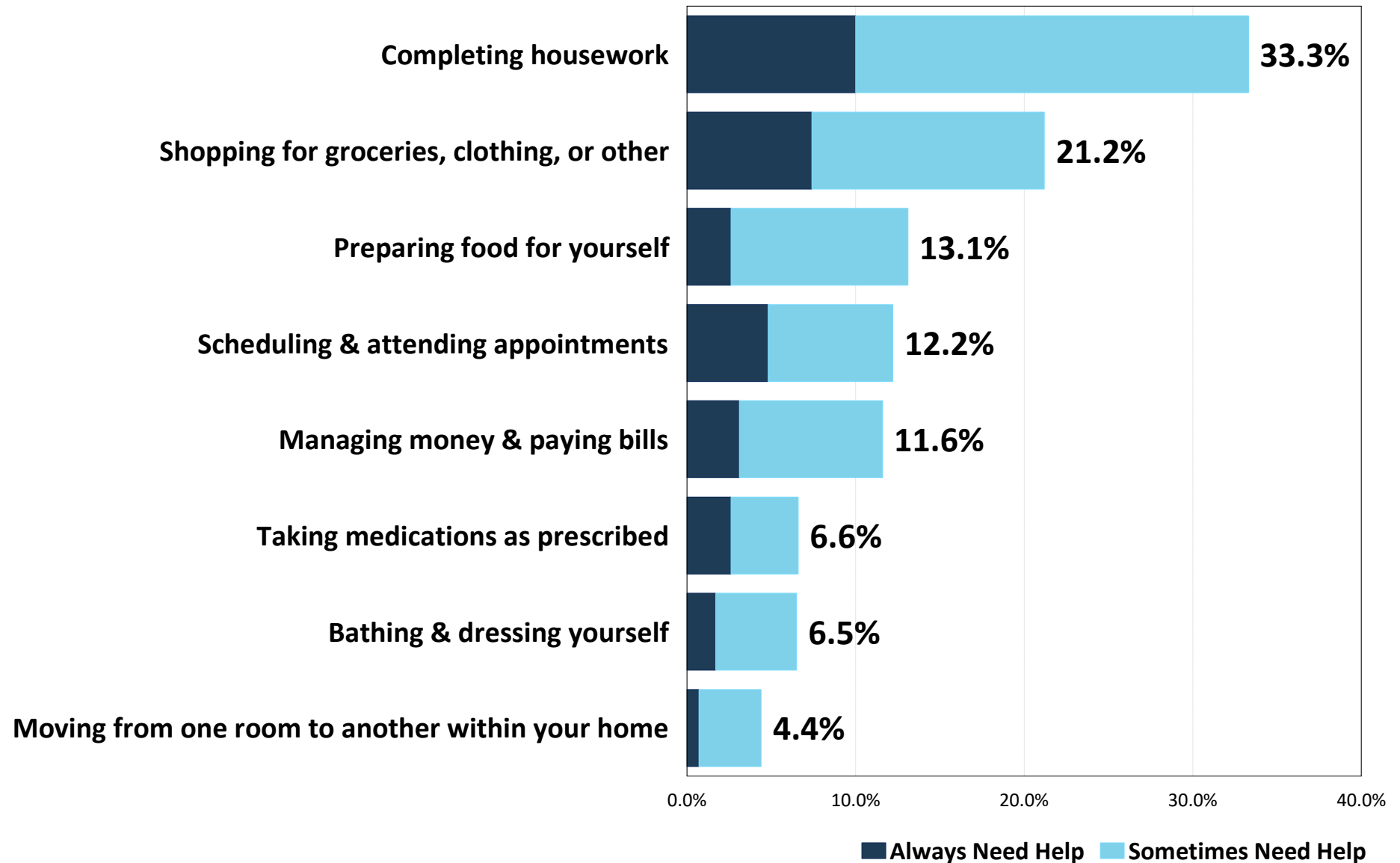
Q29. Do you skip necessary medications due to high cost?

by percentage of Franklin County respondents



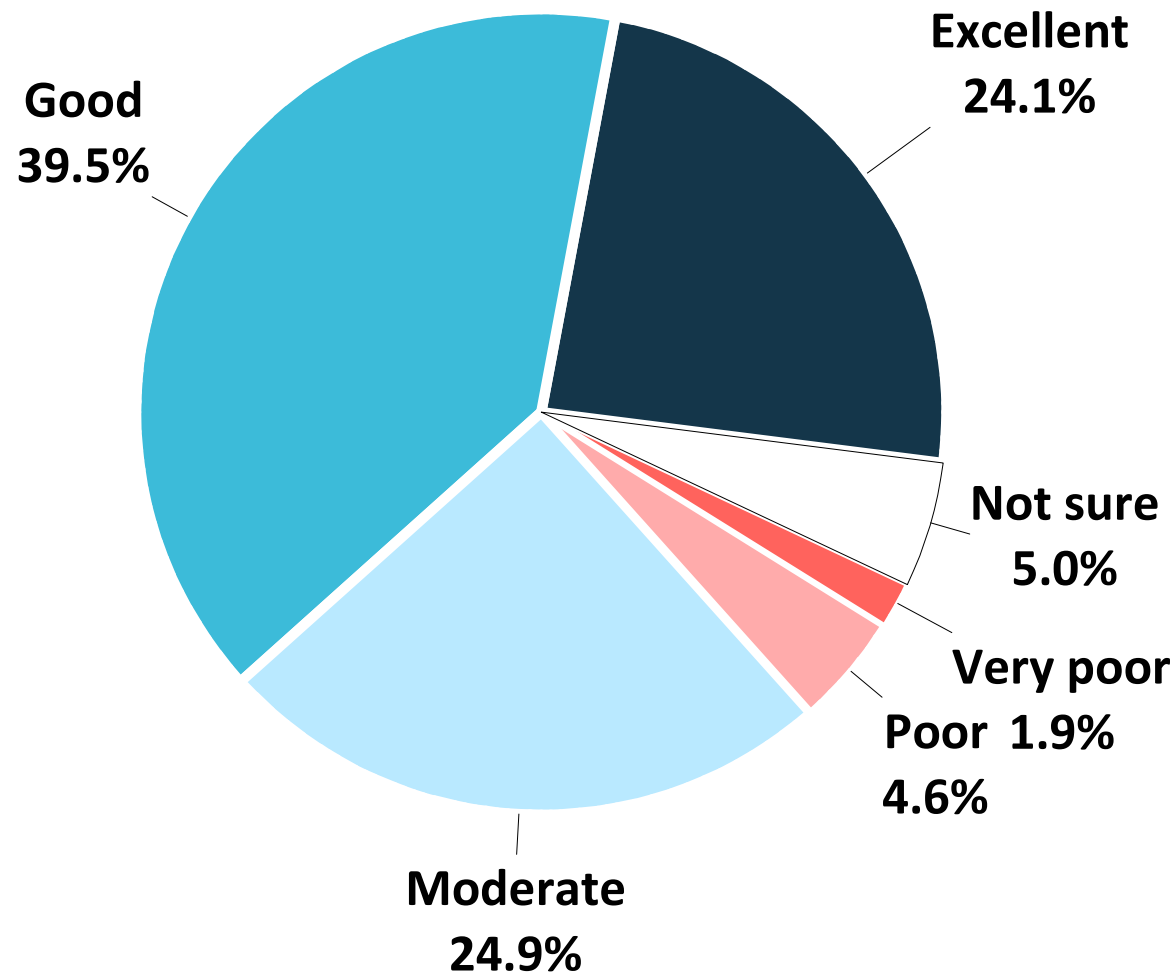
Q30. How often do you need physical assistance with the following?

by percentage of Franklin County respondents that *always* or *sometimes* need help
(excluding *not provided* responses)



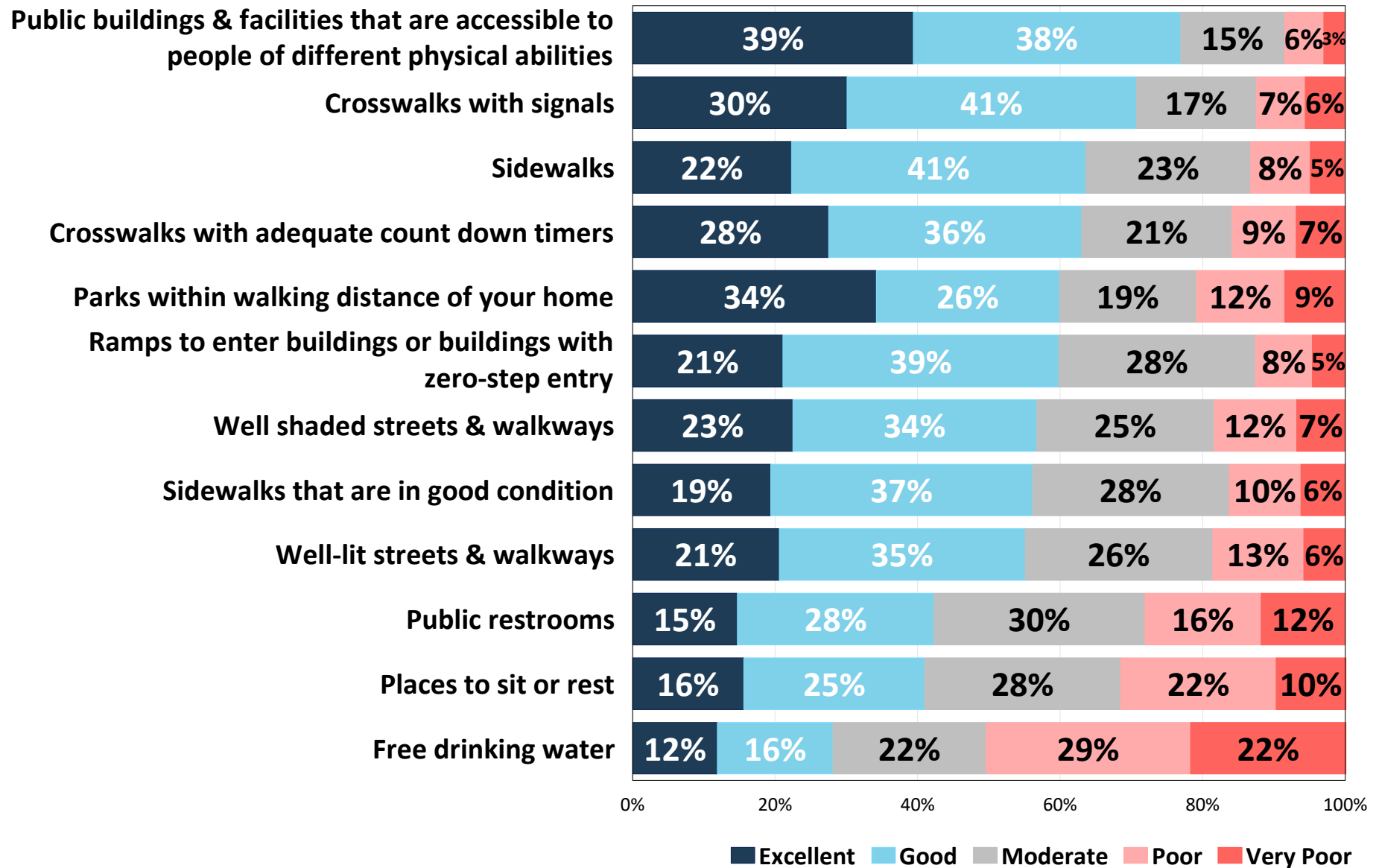
Q31. Outdoor Spaces and Buildings. How would you rate your community as a place for people to live as they age?

by percentage of Franklin County respondents



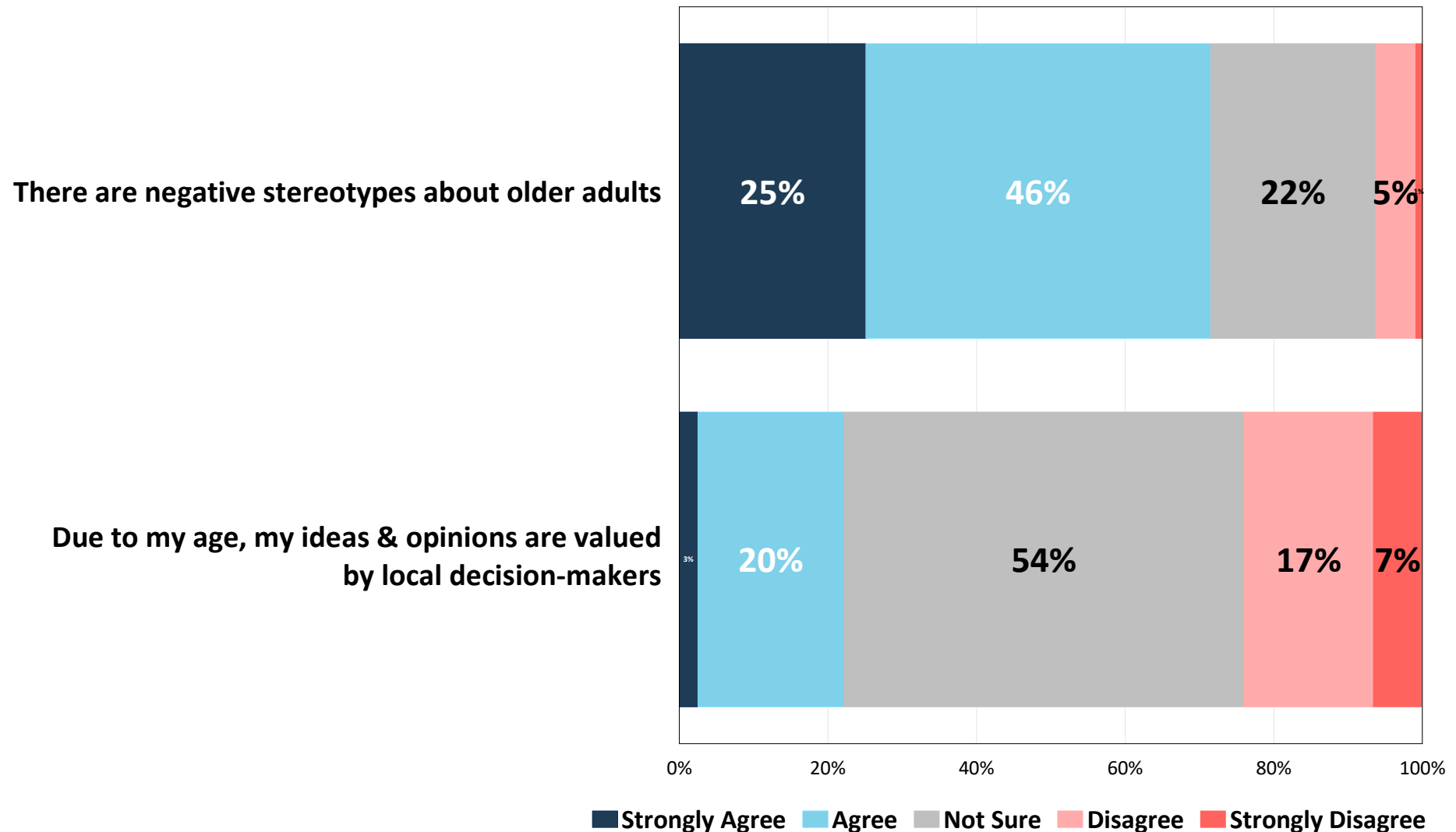
Q32. How would you rate your community on the following?

by percentage of Franklin County respondents using a 5-point scale, where 5 means *excellent* and 1 means *very poor*
(excluding *not provided* responses)



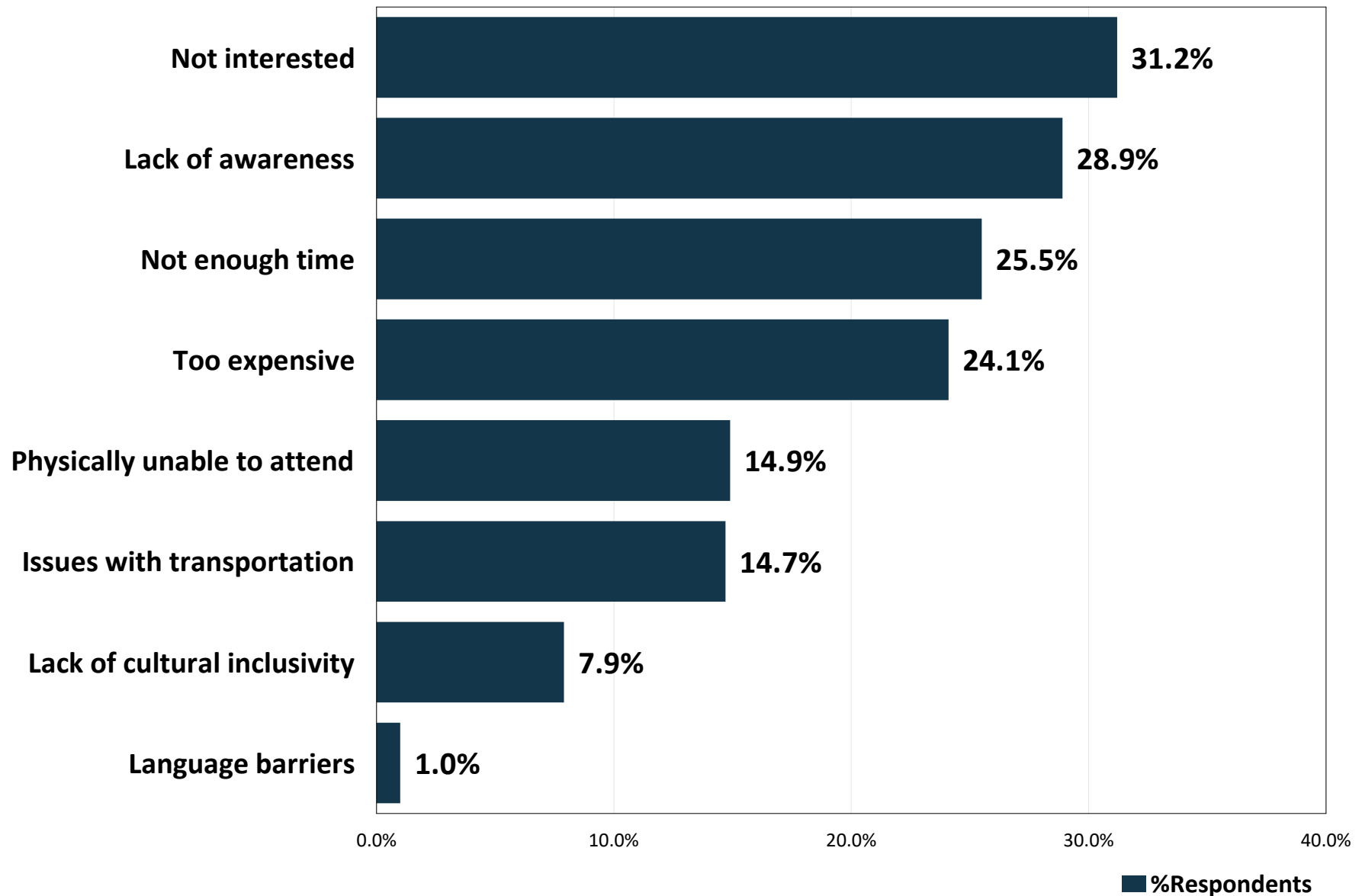
Q33. Respect, Inclusion, and Participation. Please indicate your level of agreement with the following statements.

by percentage of **Franklin County** respondents using a 5-point scale, where 5 means *strongly agree* and 1 means *strongly disagree* (excluding *not provided* responses)



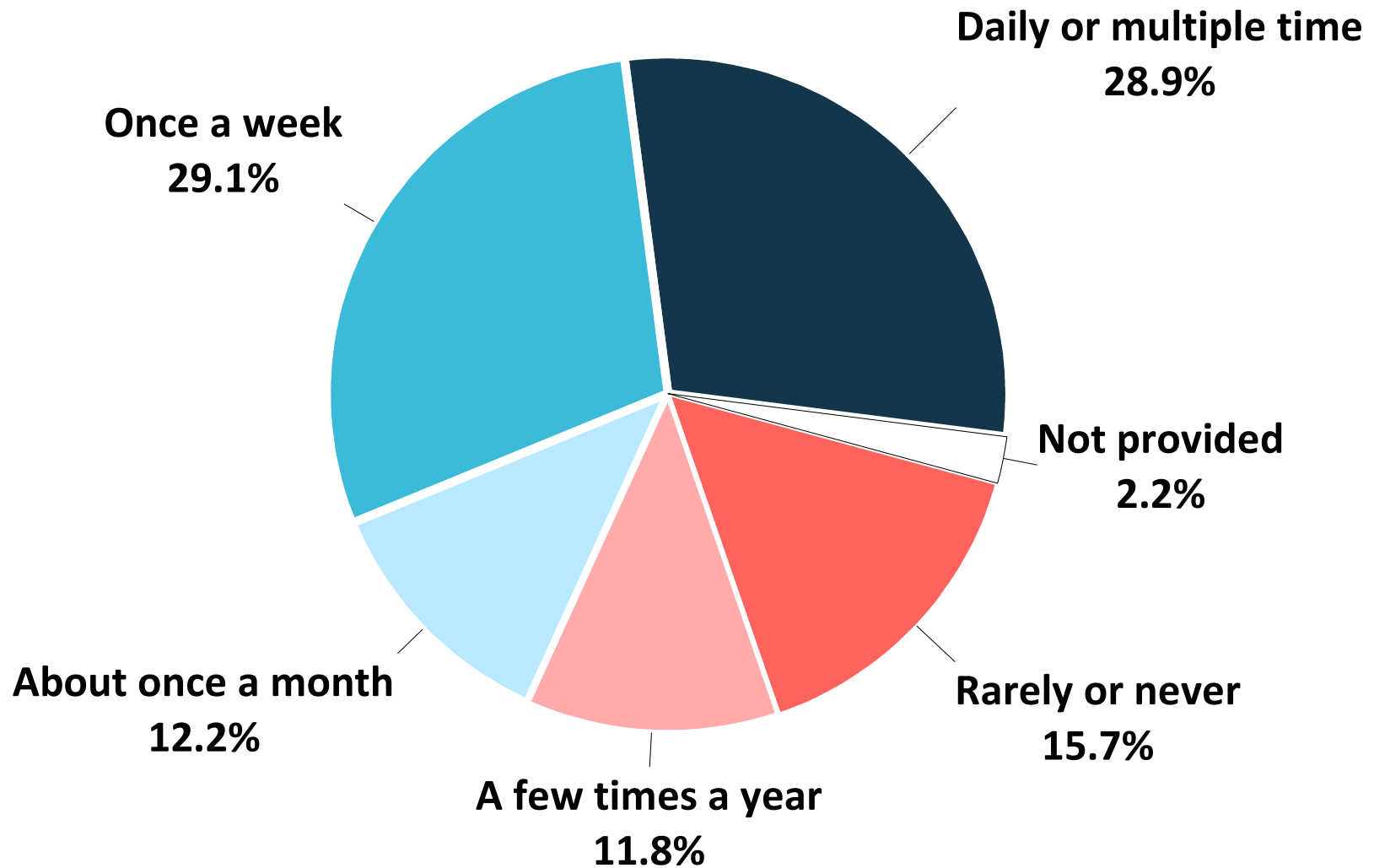
Q34. Do any of the following reasons prevent you from going to activities or events more often?

by percentage of **Franklin County** respondents (multiple choices could be selected)



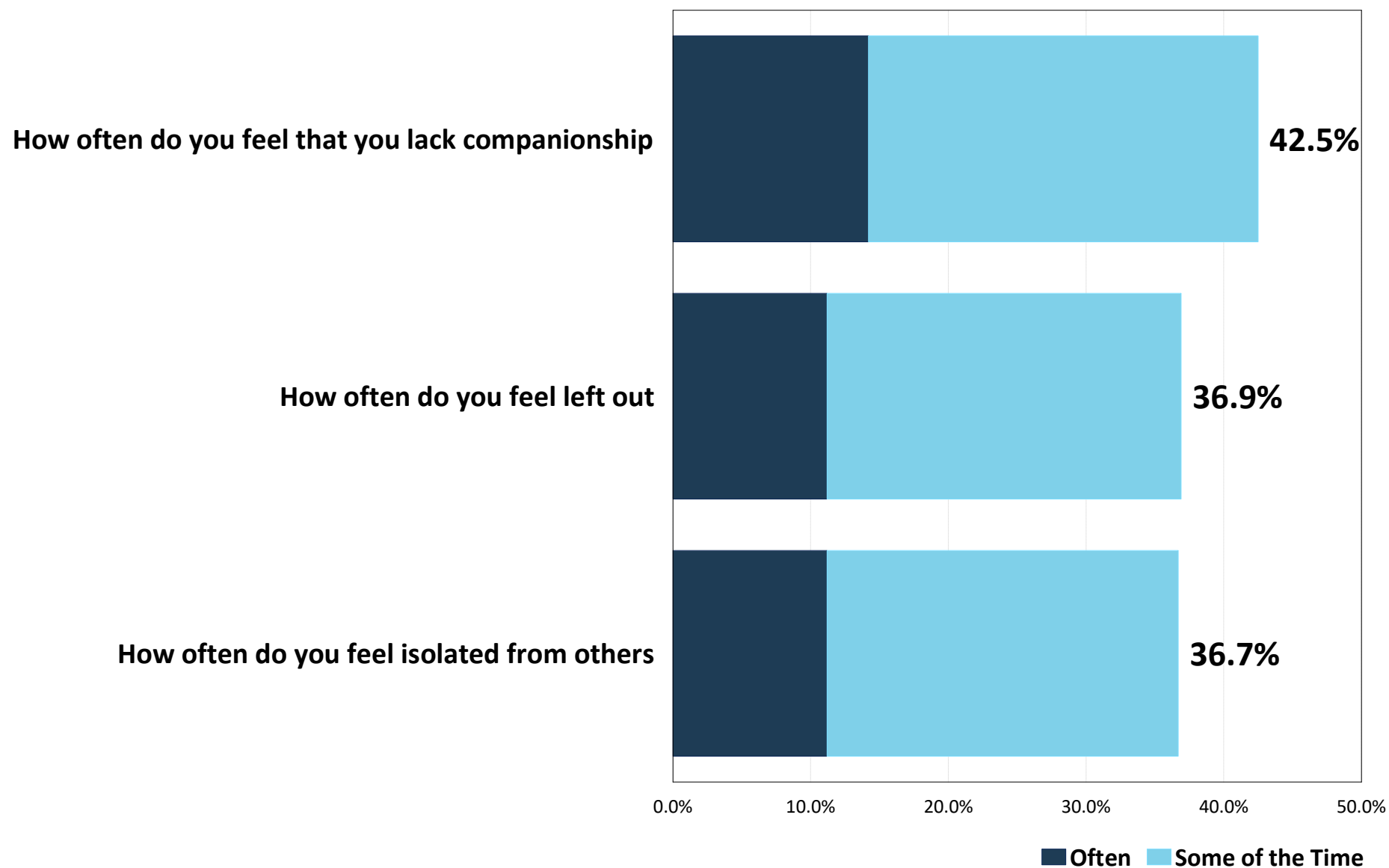
Q35. How often do you participate in activities outside of your home, such as social events or religious services?

by percentage of Franklin County respondents



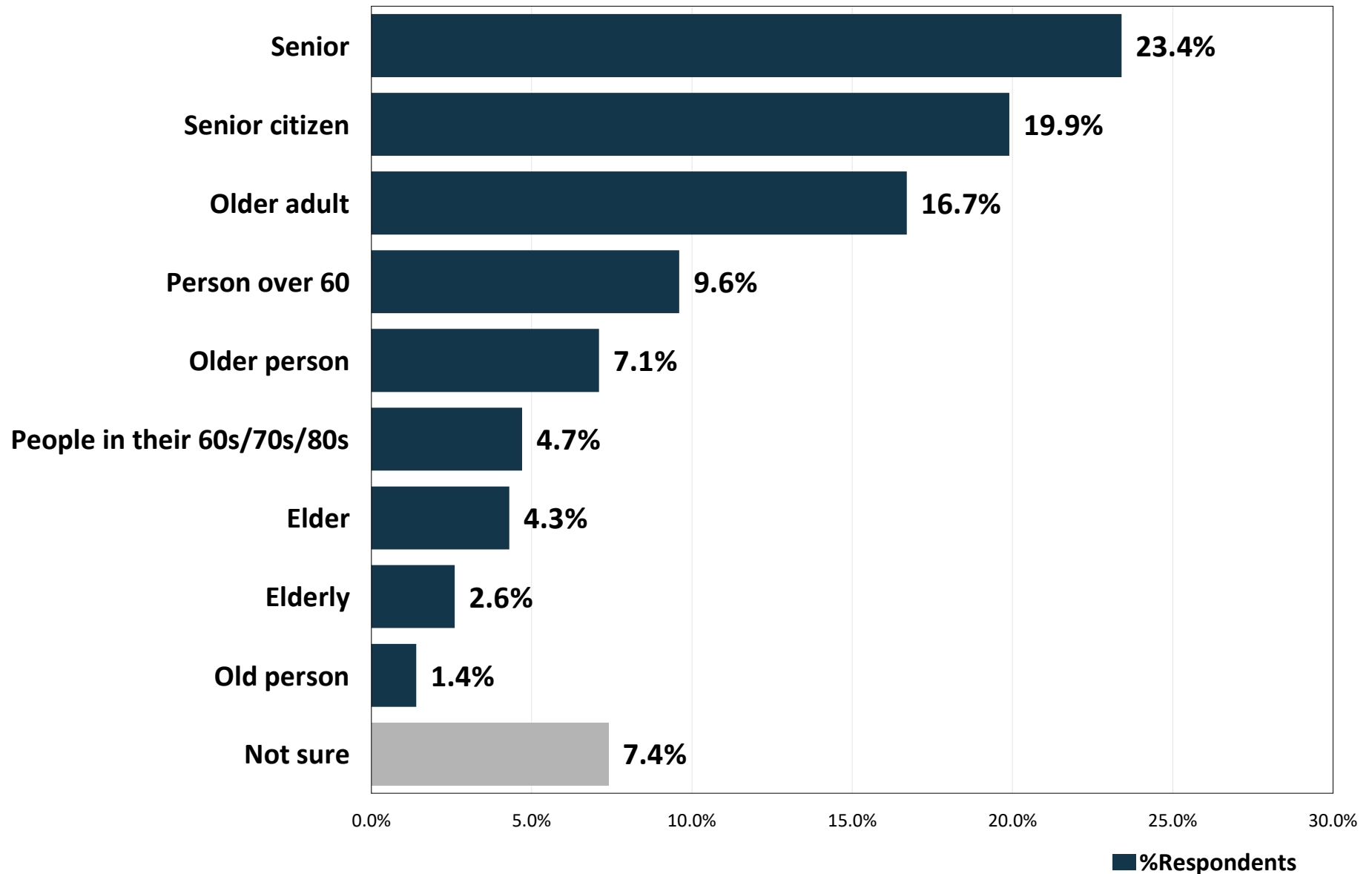
Q36. How often do you feel the following?

by sum percentage of **Franklin County** respondents that feel the following *often* or *some of the time*
(excluding *not provided* responses)



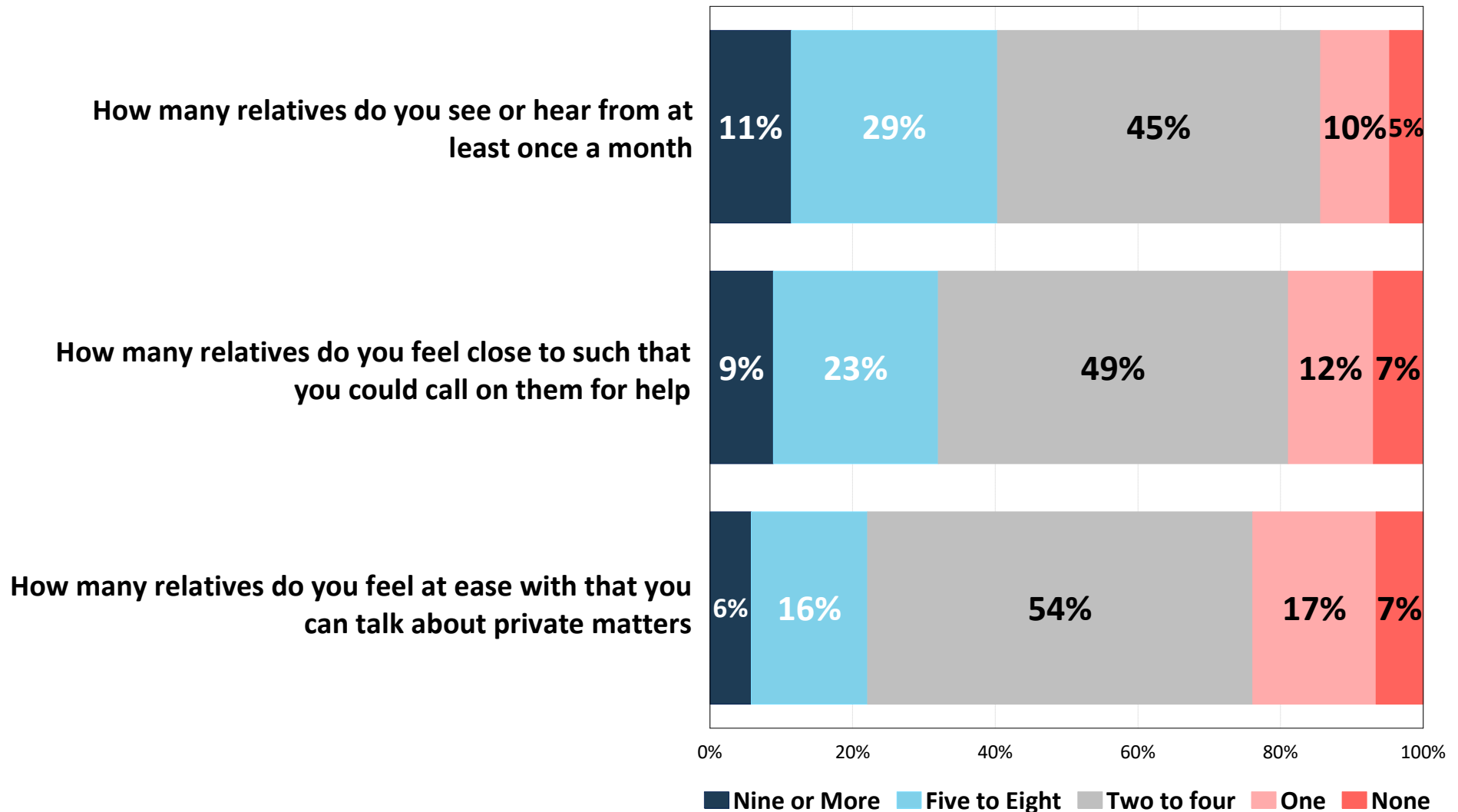
Q37. What is your preferred language when referring to yourself or someone else over the age of 60?

by percentage of Franklin County respondents



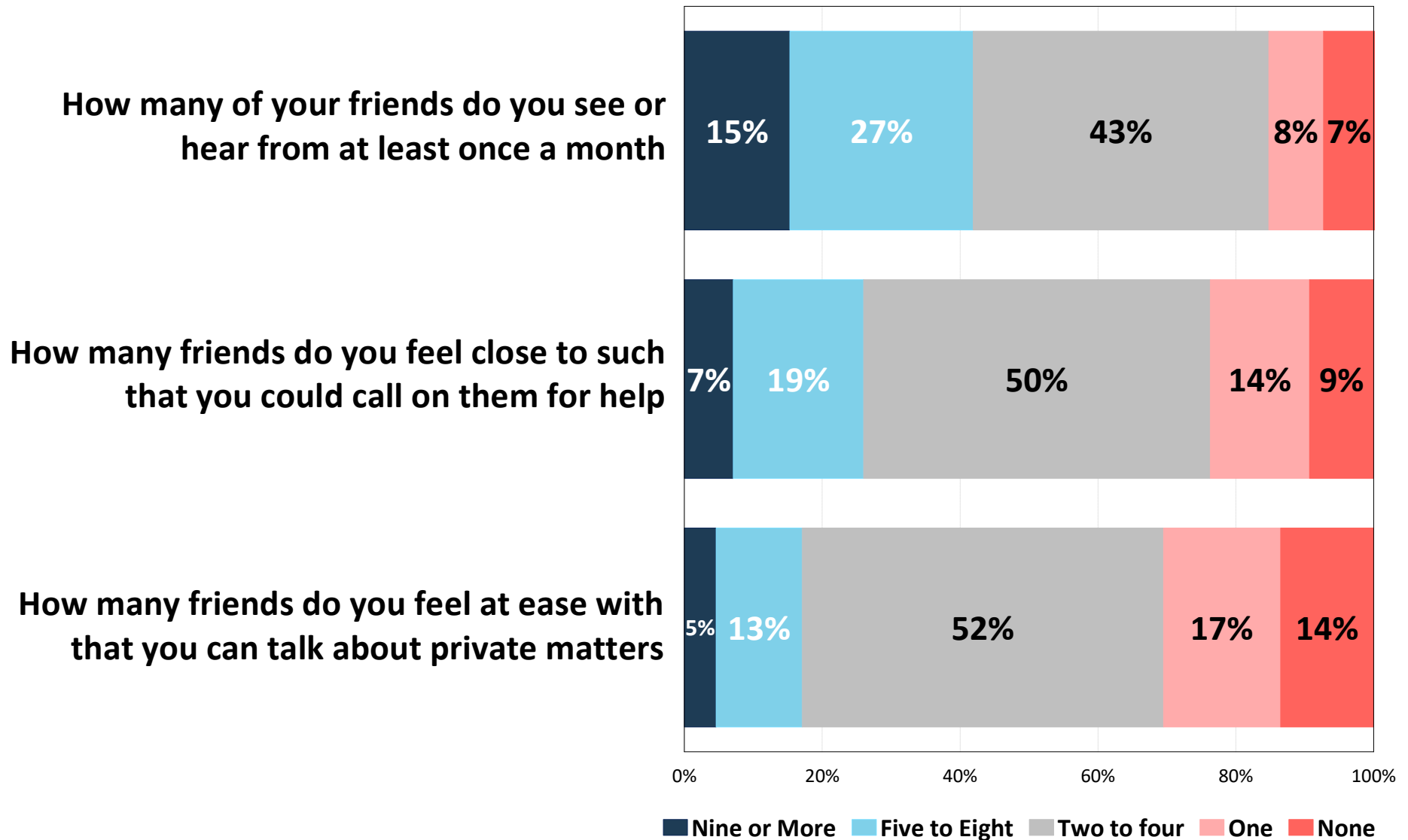
Q38. Family. Considering the people to whom you are related by birth, marriage, adoption, etc., please answer the following questions.

by percentage of Franklin County respondents using a 5-point scale, where 5 means *nine or more* and 1 means *none*
(excluding *not provided responses*)



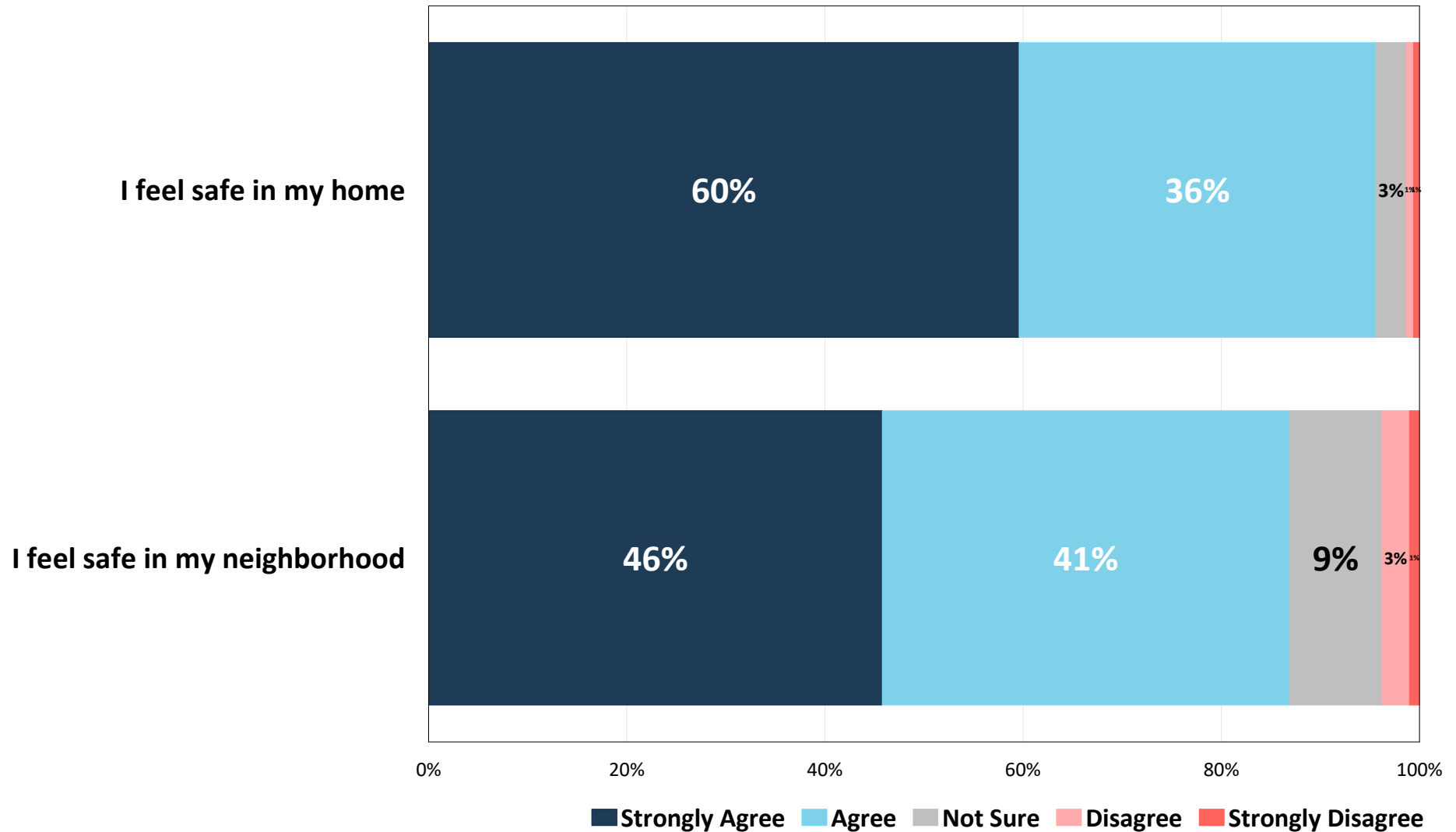
Q39. Friendships. Considering all your friends, including those who live in your neighborhood, please answer the following questions.

by percentage of Franklin County respondents using a 5-point scale, where 5 means *nine or more* and 1 means *none*
(excluding *not provided* responses)



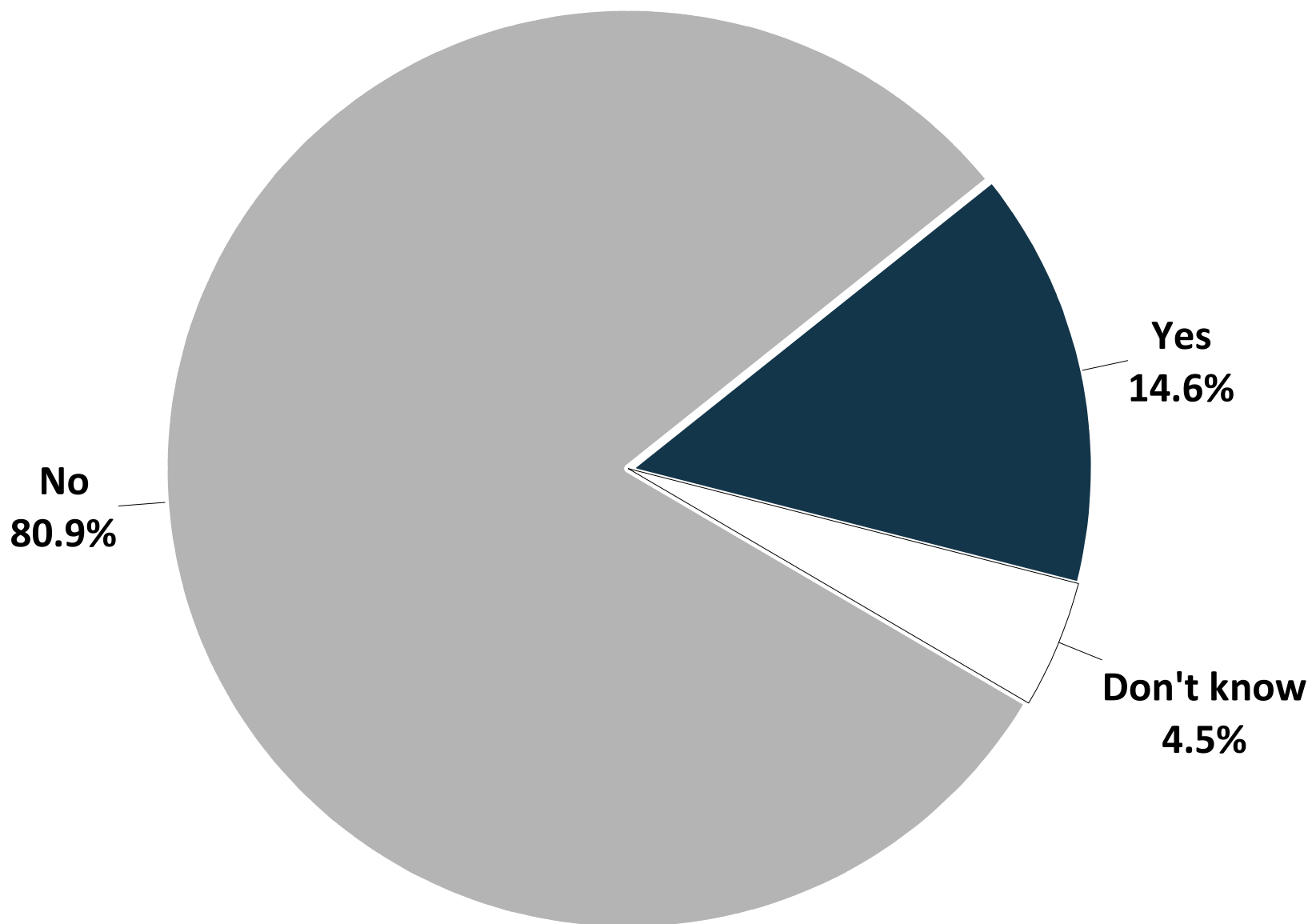
Q40. Please indicate your level of agreement with the following statements.

by percentage of **Franklin County** respondents using a 5-point scale, where 5 means *strongly agree* and 1 means *strongly disagree* (excluding *not provided* responses)



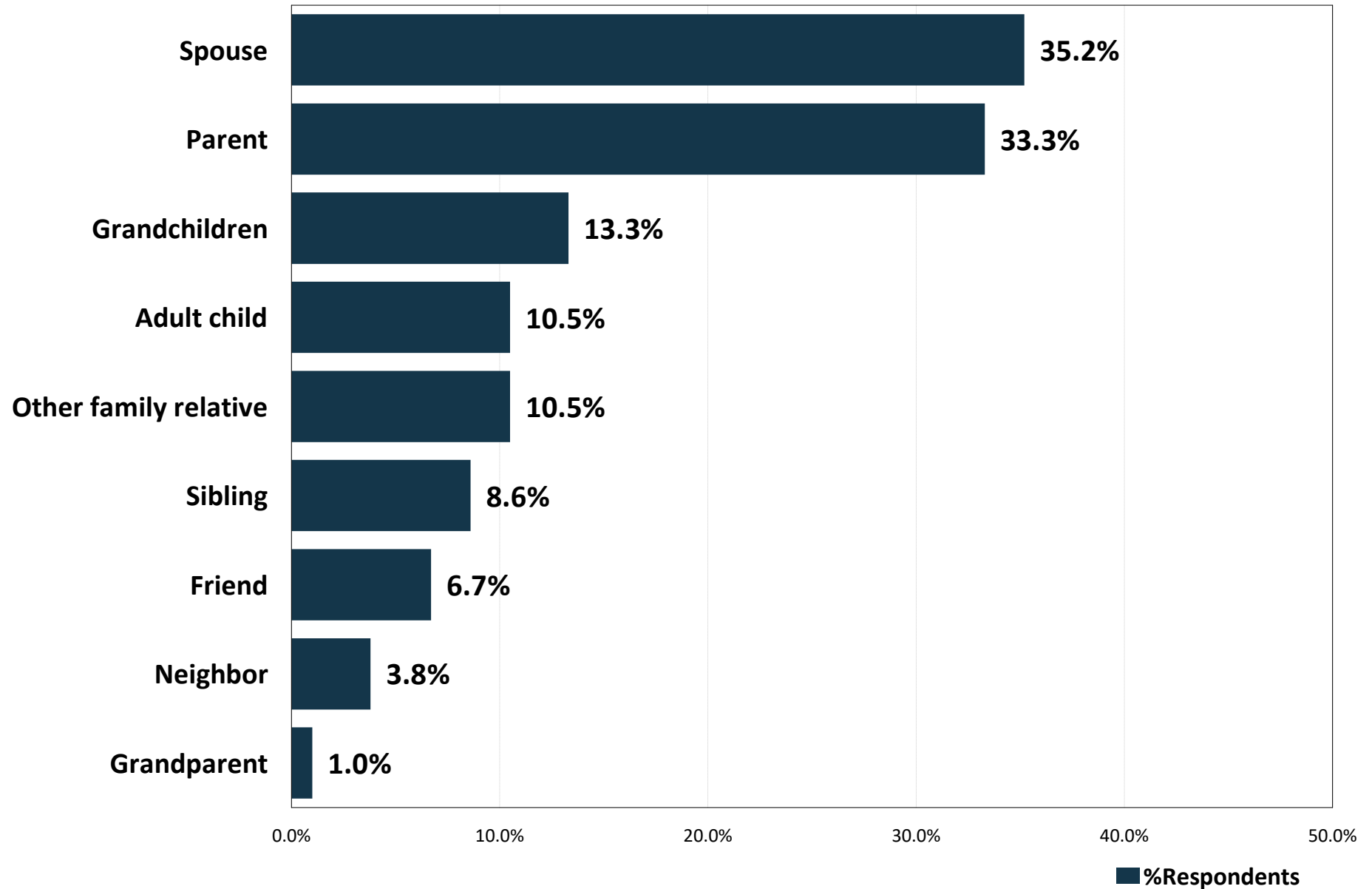
Q41. Are you currently a caregiver?

by percentage of Franklin County respondents



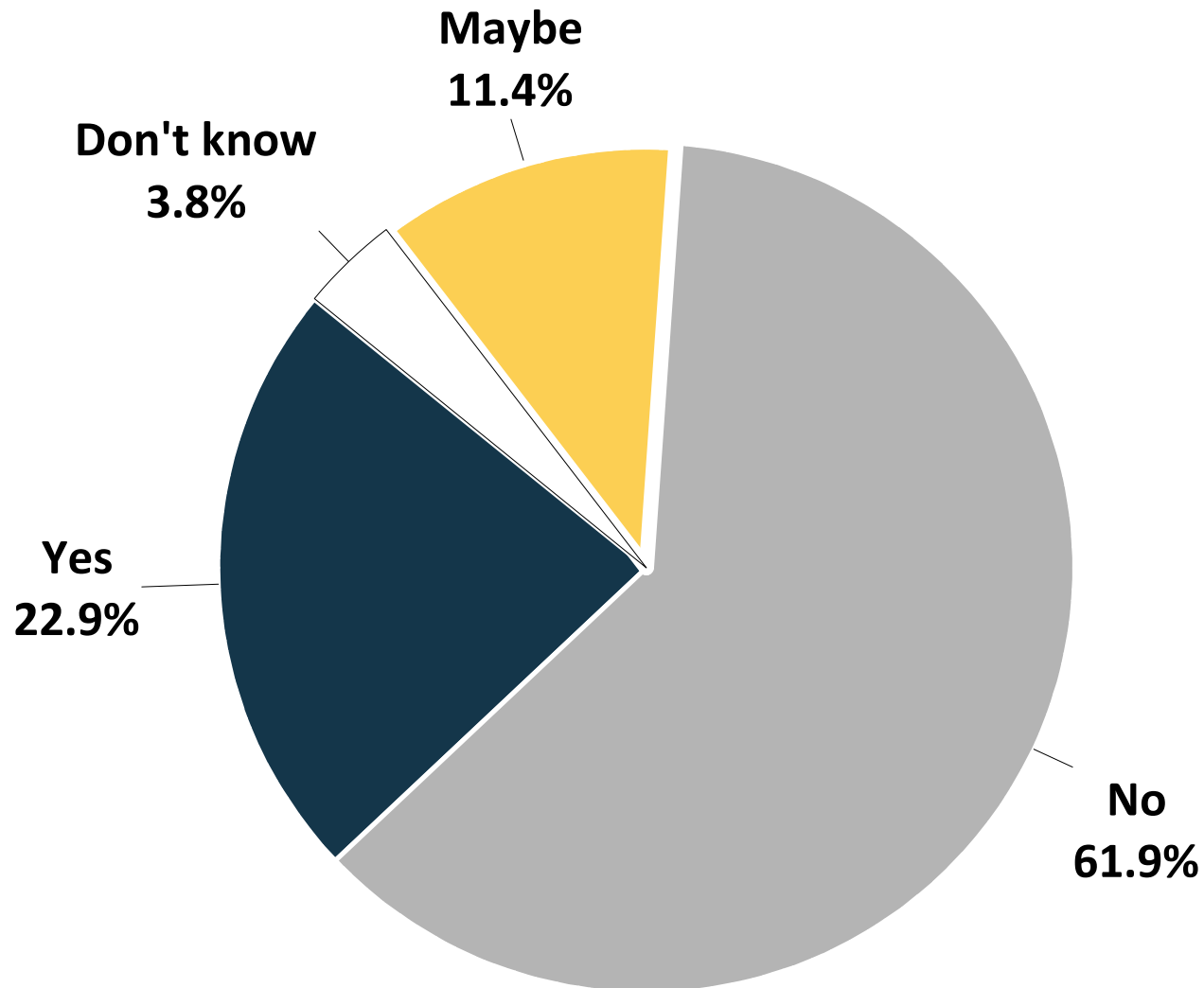
Q41a. Who do you care for?

by percentage of **Franklin County** respondents who are caregivers (multiple choices could be selected)



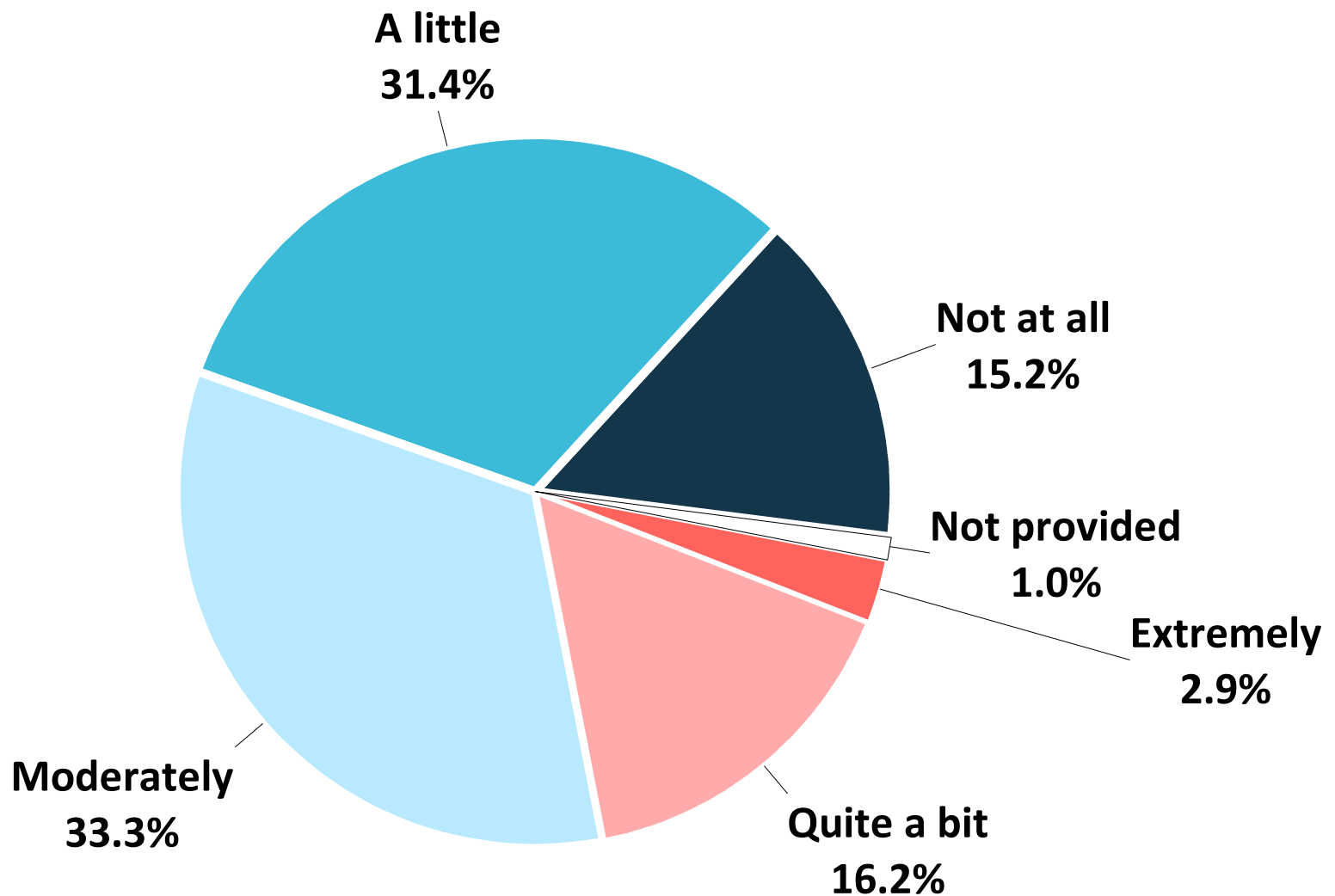
Q41b. Does the person you are caring for have dementia?

by percentage of Franklin County respondents who are caregivers



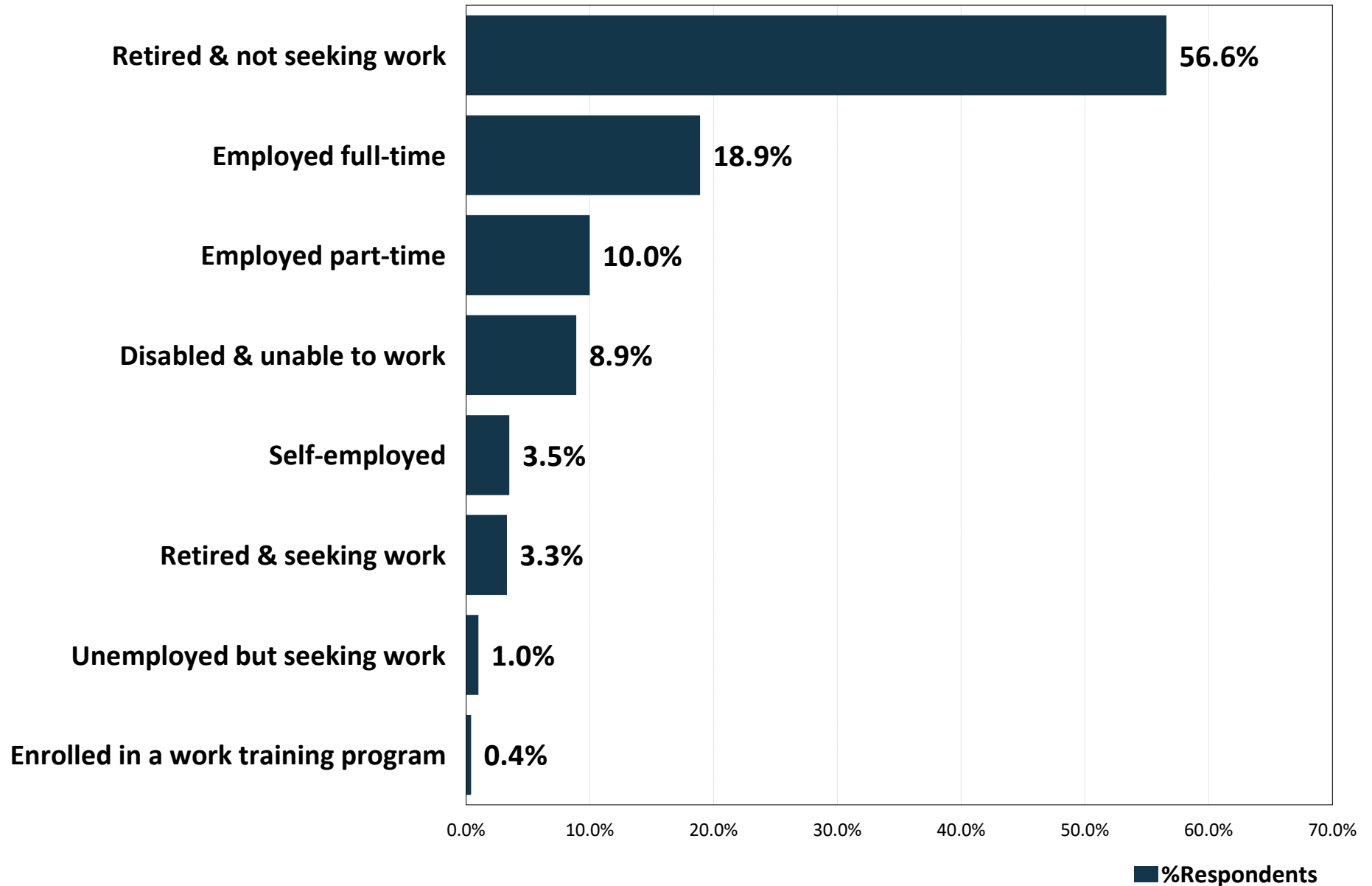
Q41c. Overall, how burdened (stressed) do you feel in caring for your family member or friend?

by percentage of Franklin County respondents who are caregivers



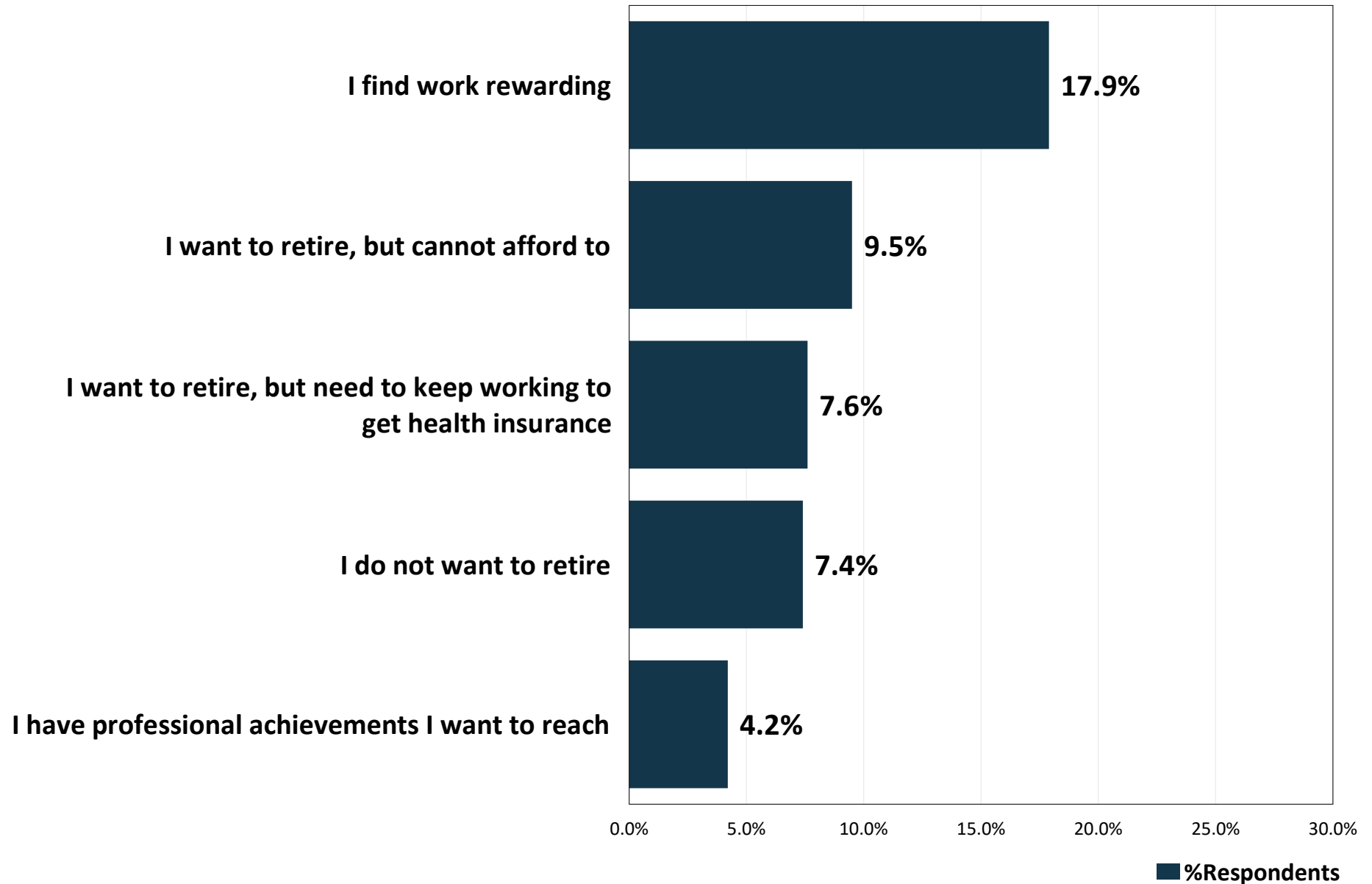
Q42. Employment and Volunteerism. What is your employment status?

by percentage of Franklin County respondents (multiple choices could be selected)



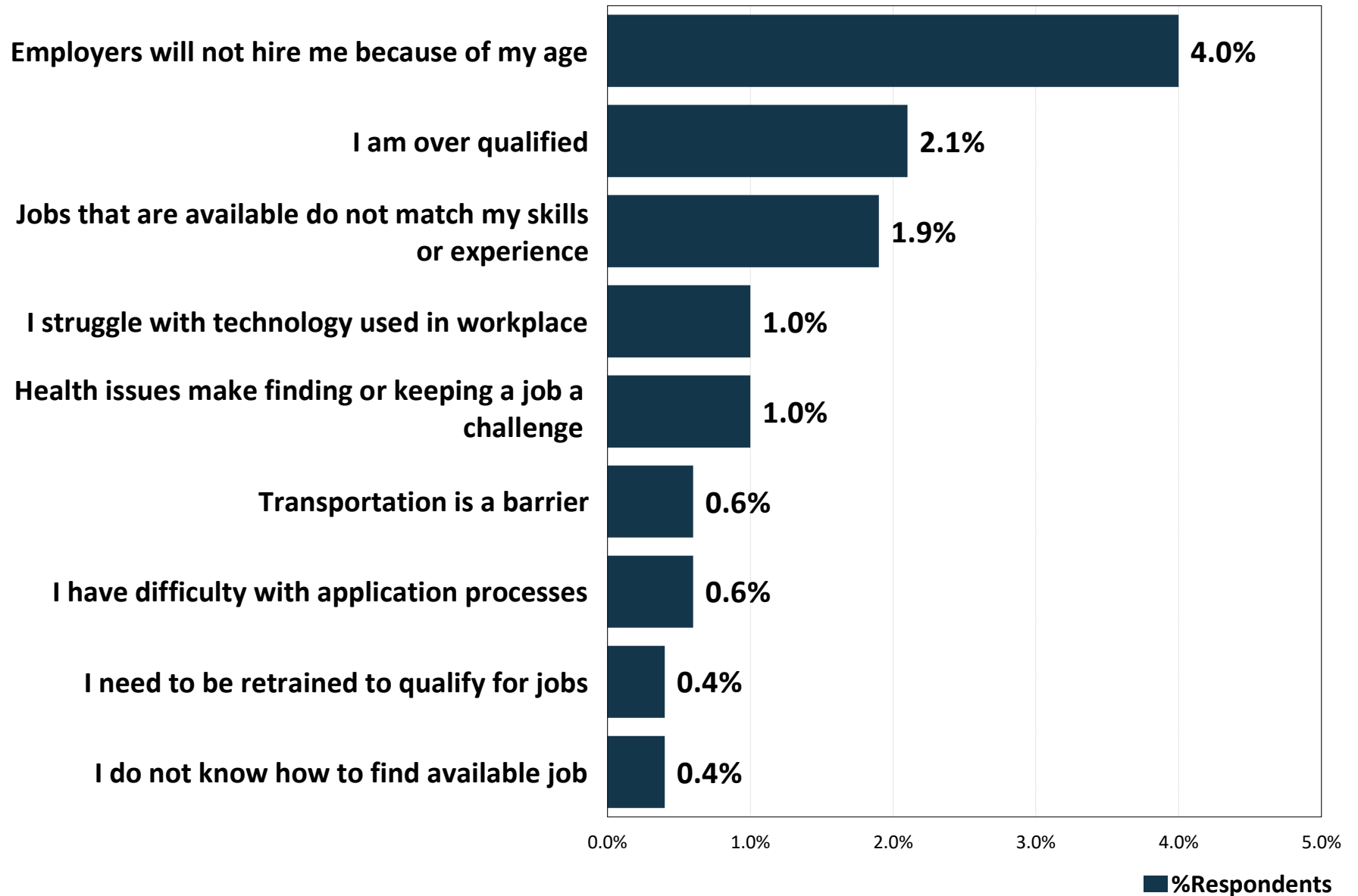
Q43. If you are employed or seeking employment, what are the main reasons for your continuing to work?

by percentage of Franklin County respondents (multiple choices could be selected)



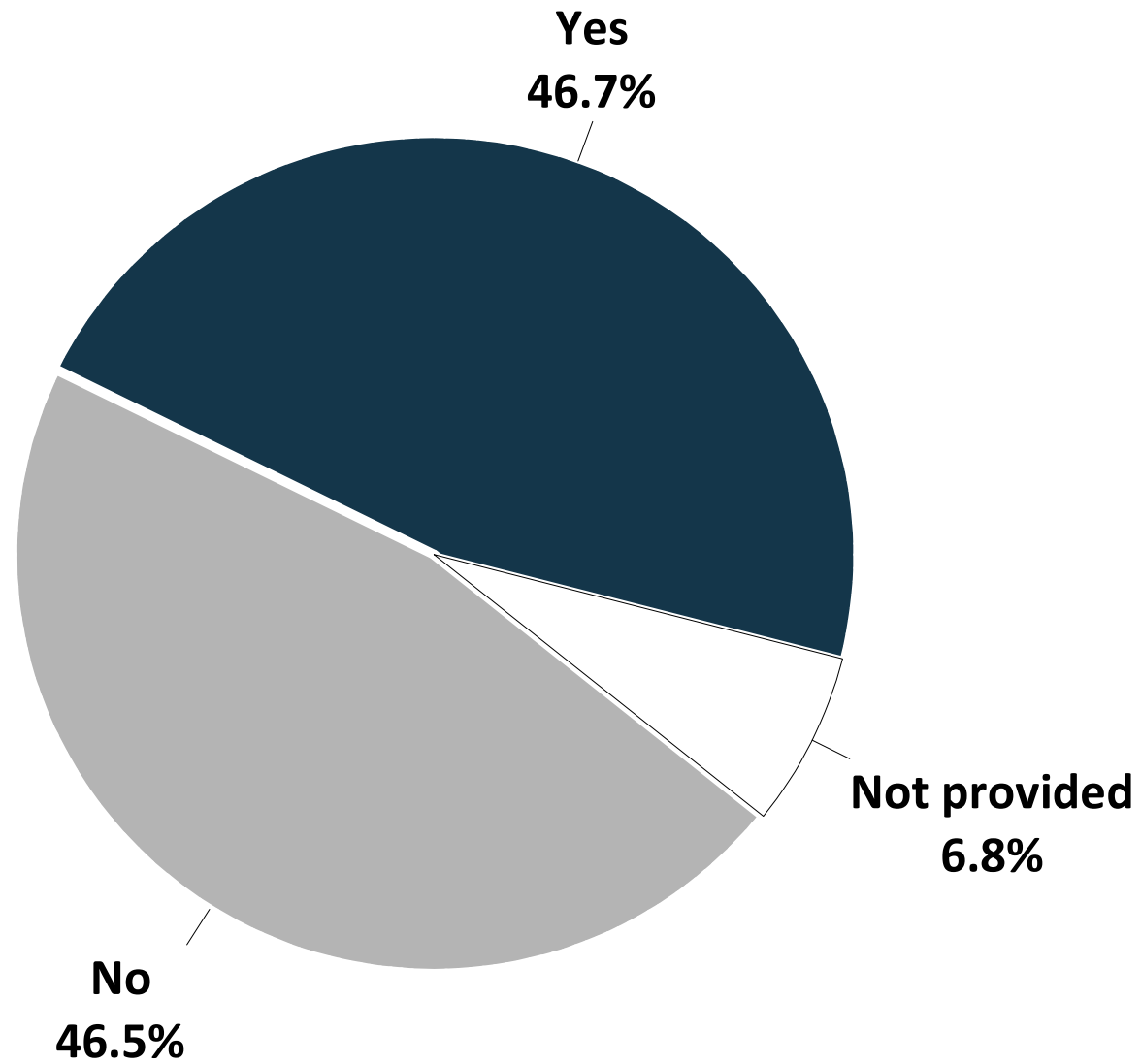
Q44. If currently seeking employment, have you experienced any of the following?

by percentage of Franklin County respondents (multiple choices could be selected)



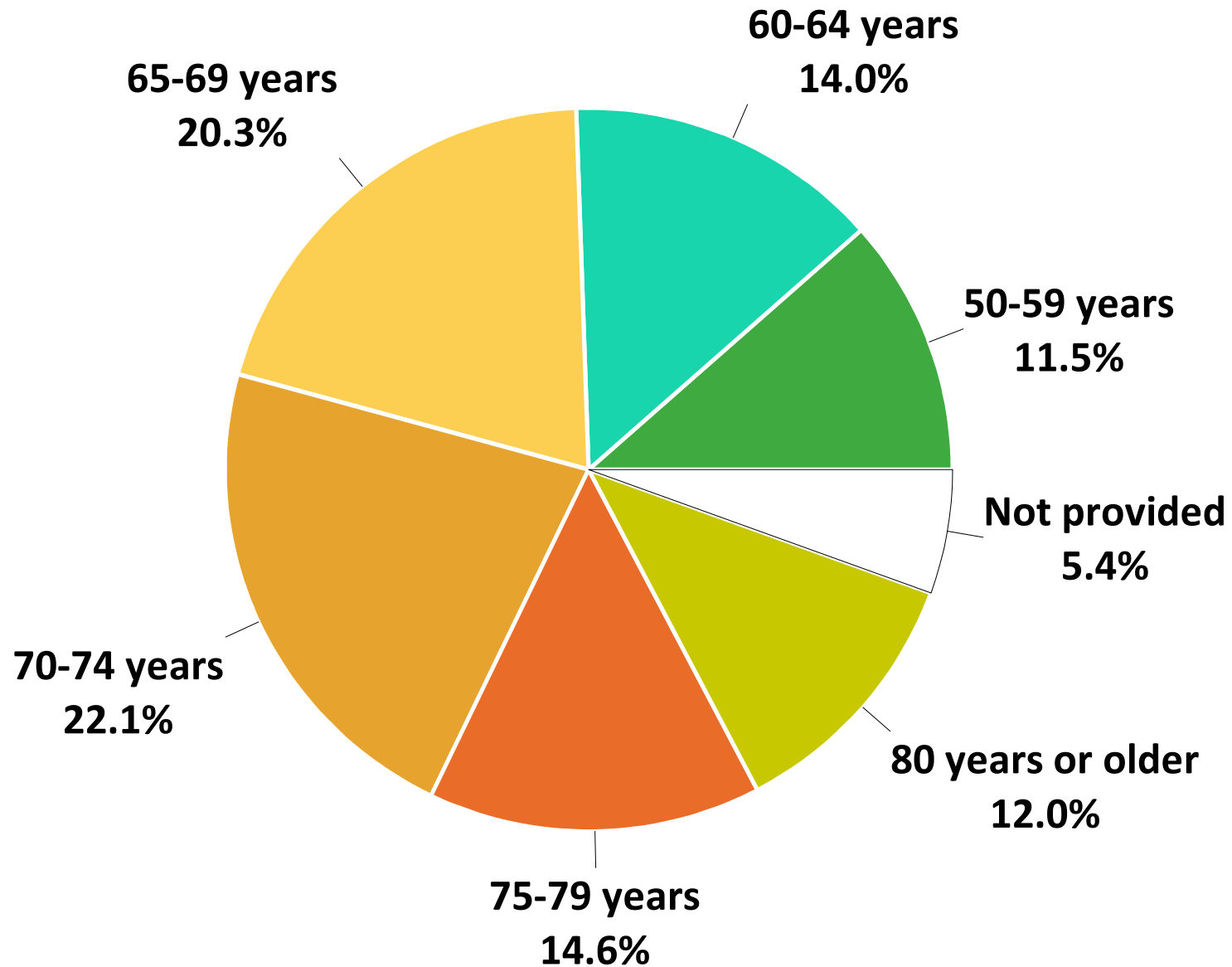
Q45. Do you volunteer?

by percentage of Franklin County respondents



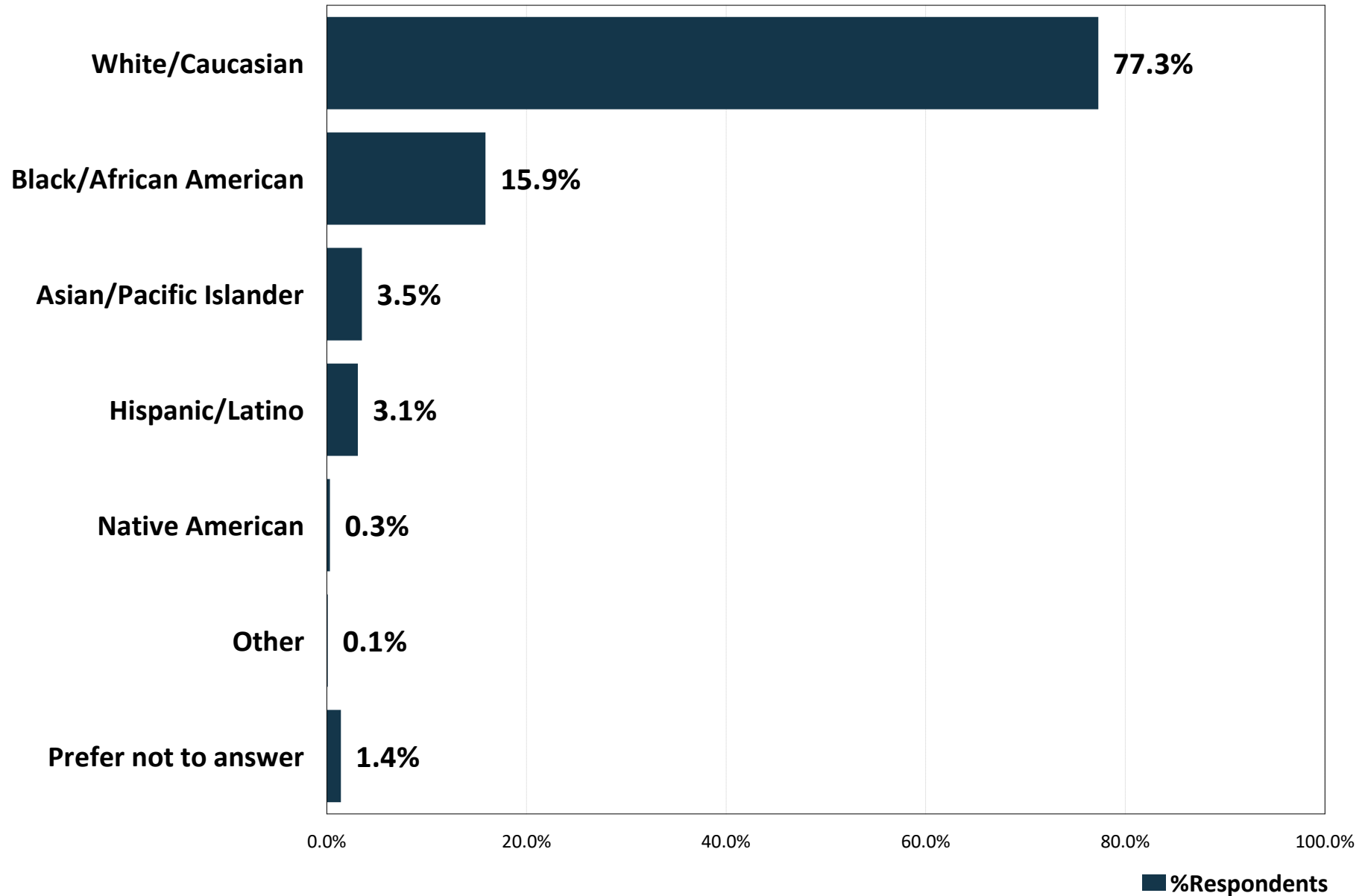
Demographics: Q46a. What is your age?

by percentage of Franklin County respondents



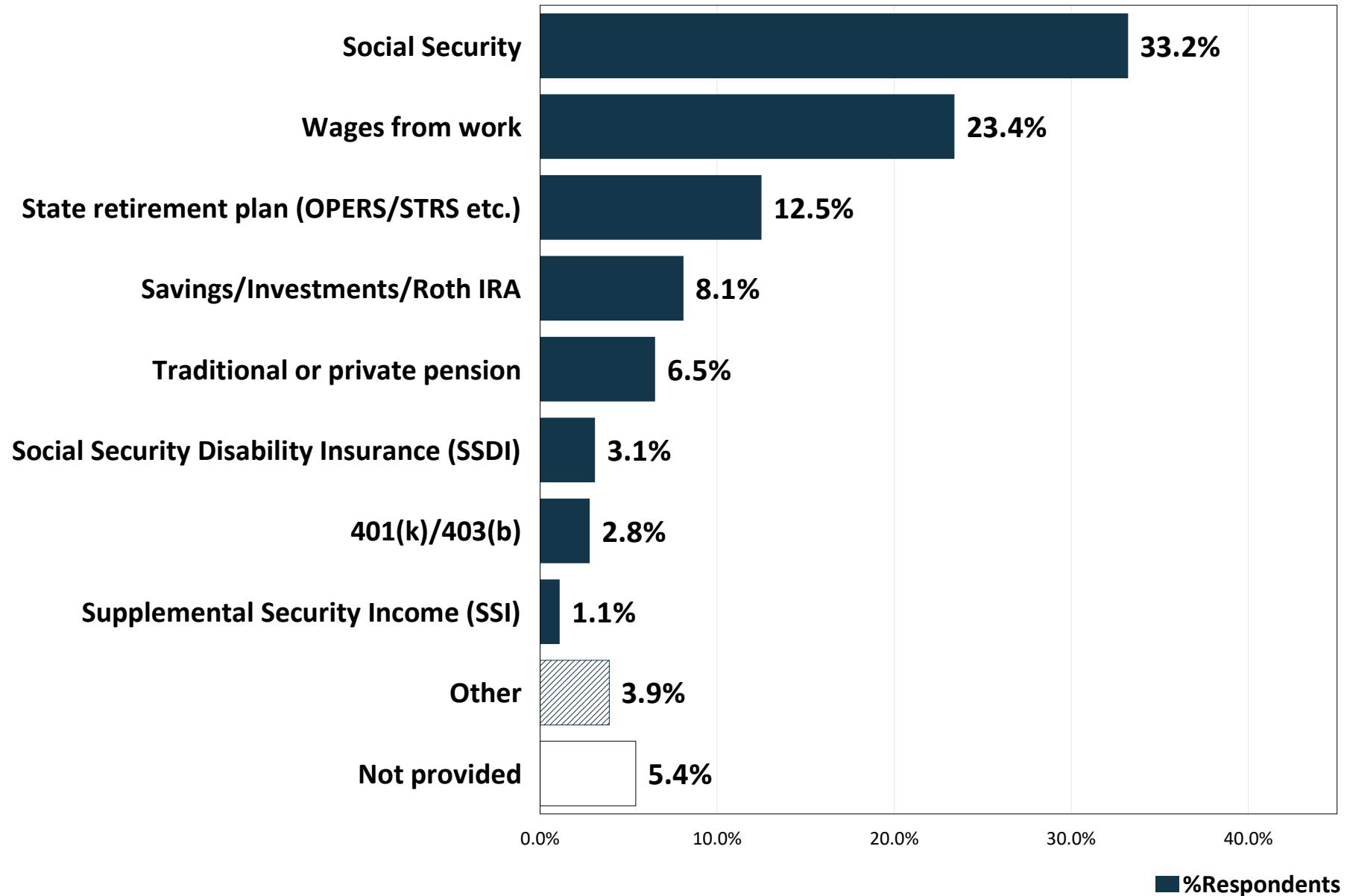
Demographics: Q49. What is your race?

by percentage of **Franklin County** respondents (multiple choices could be selected)



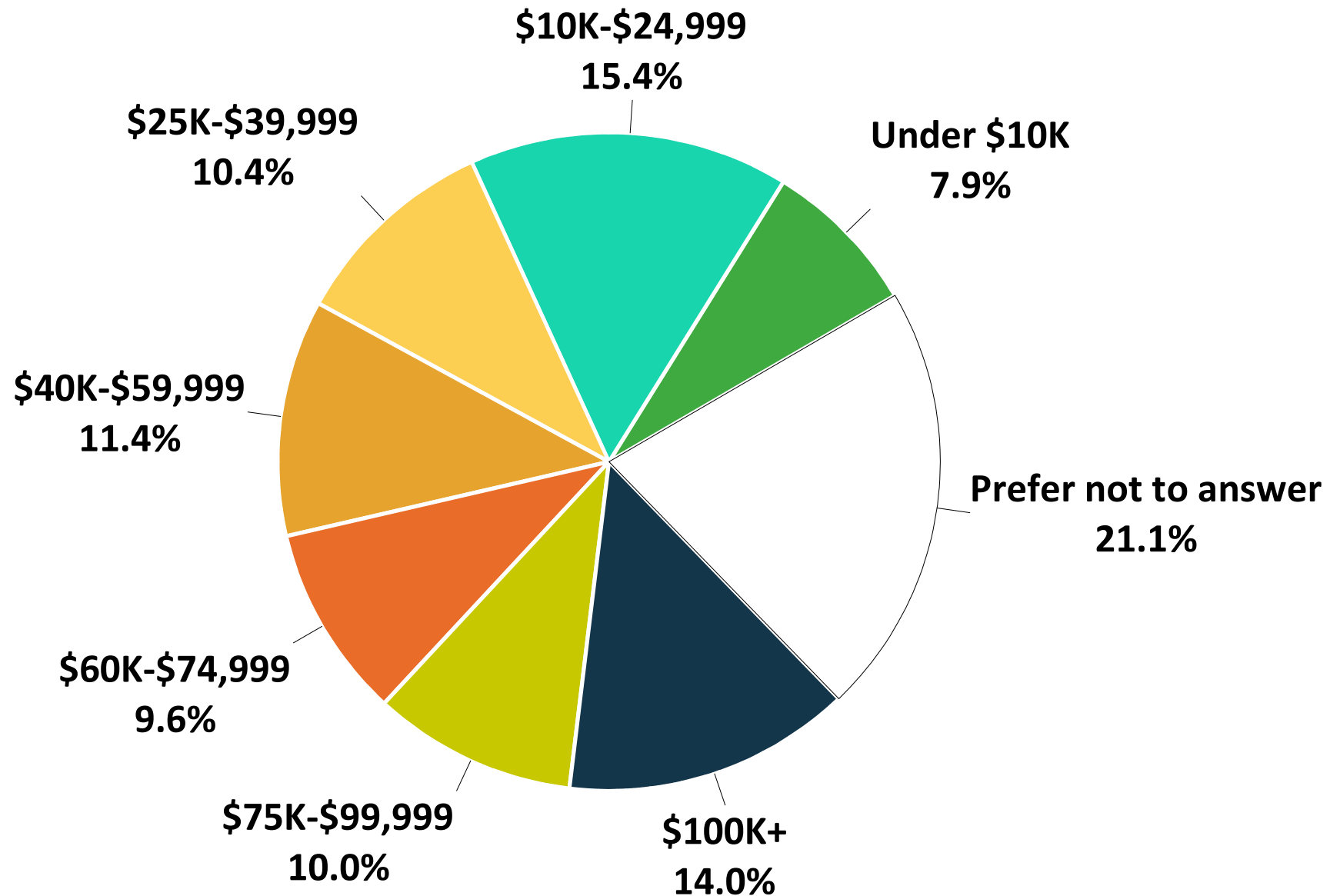
Demographics: Q50. What is your main source of income?

by percentage of Franklin County respondents



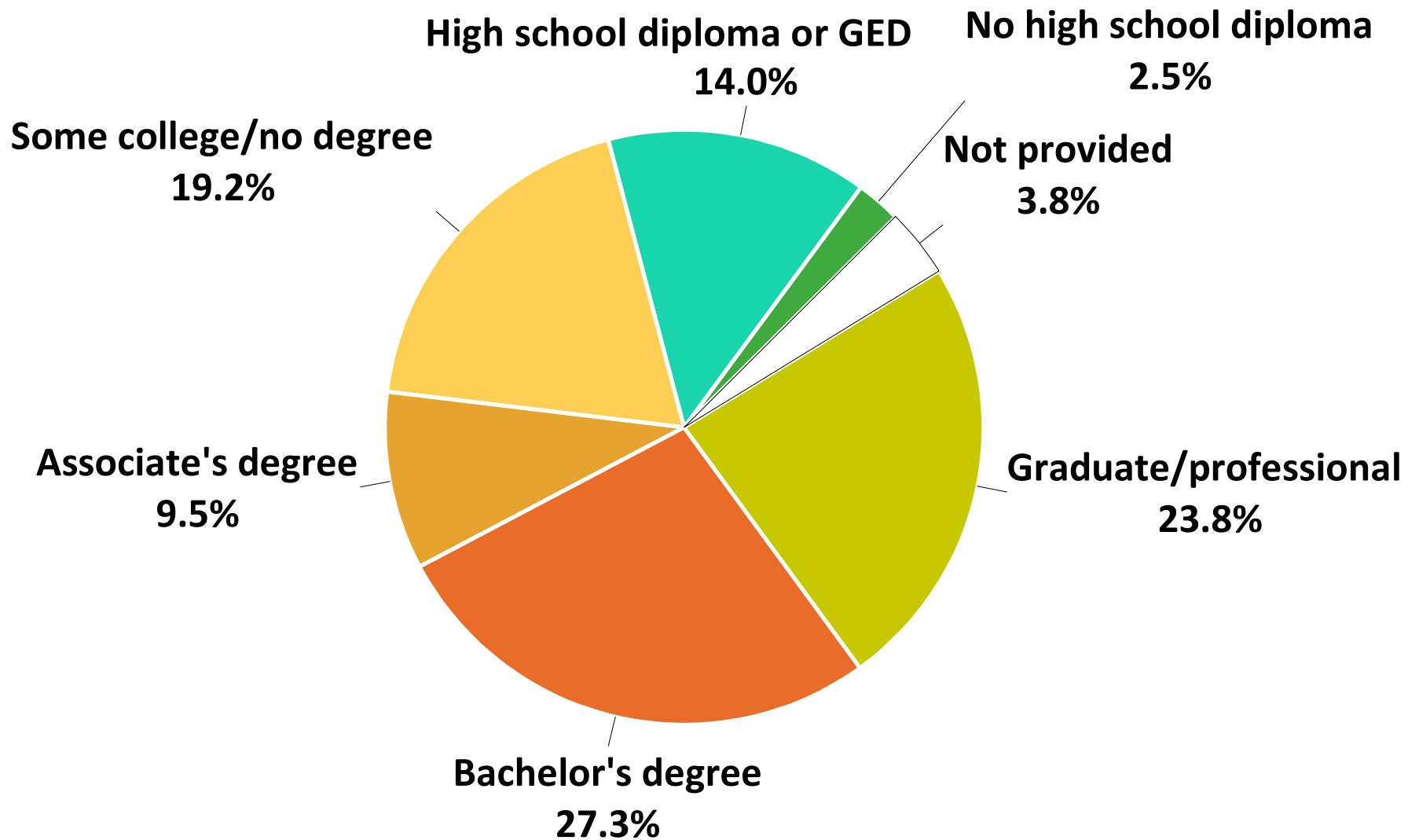
Demographics: Q51. What was your household income last year?

by percentage of Franklin County respondents



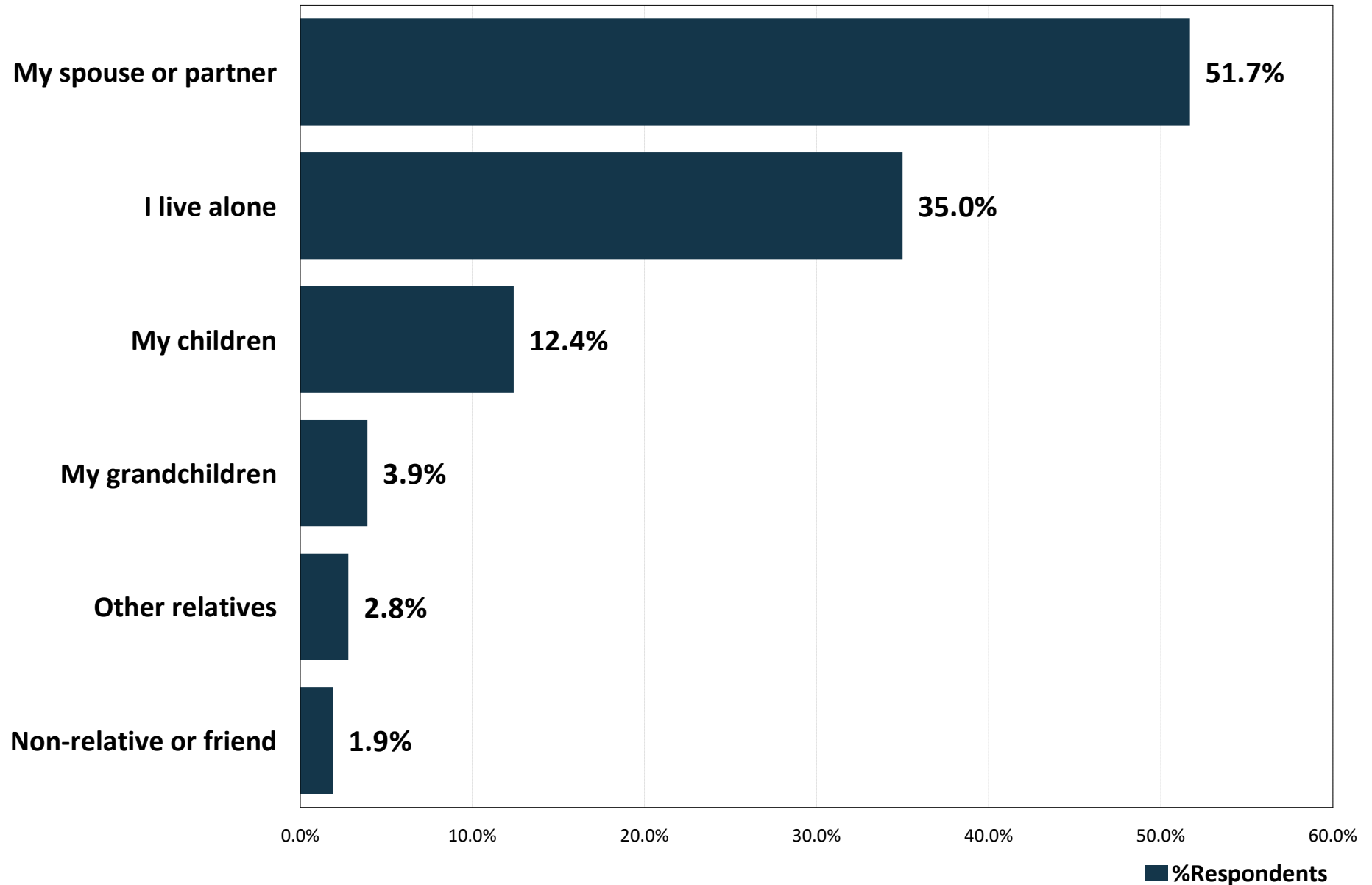
Demographics: Q52. What is the highest level of education you completed?

by percentage of Franklin County respondents



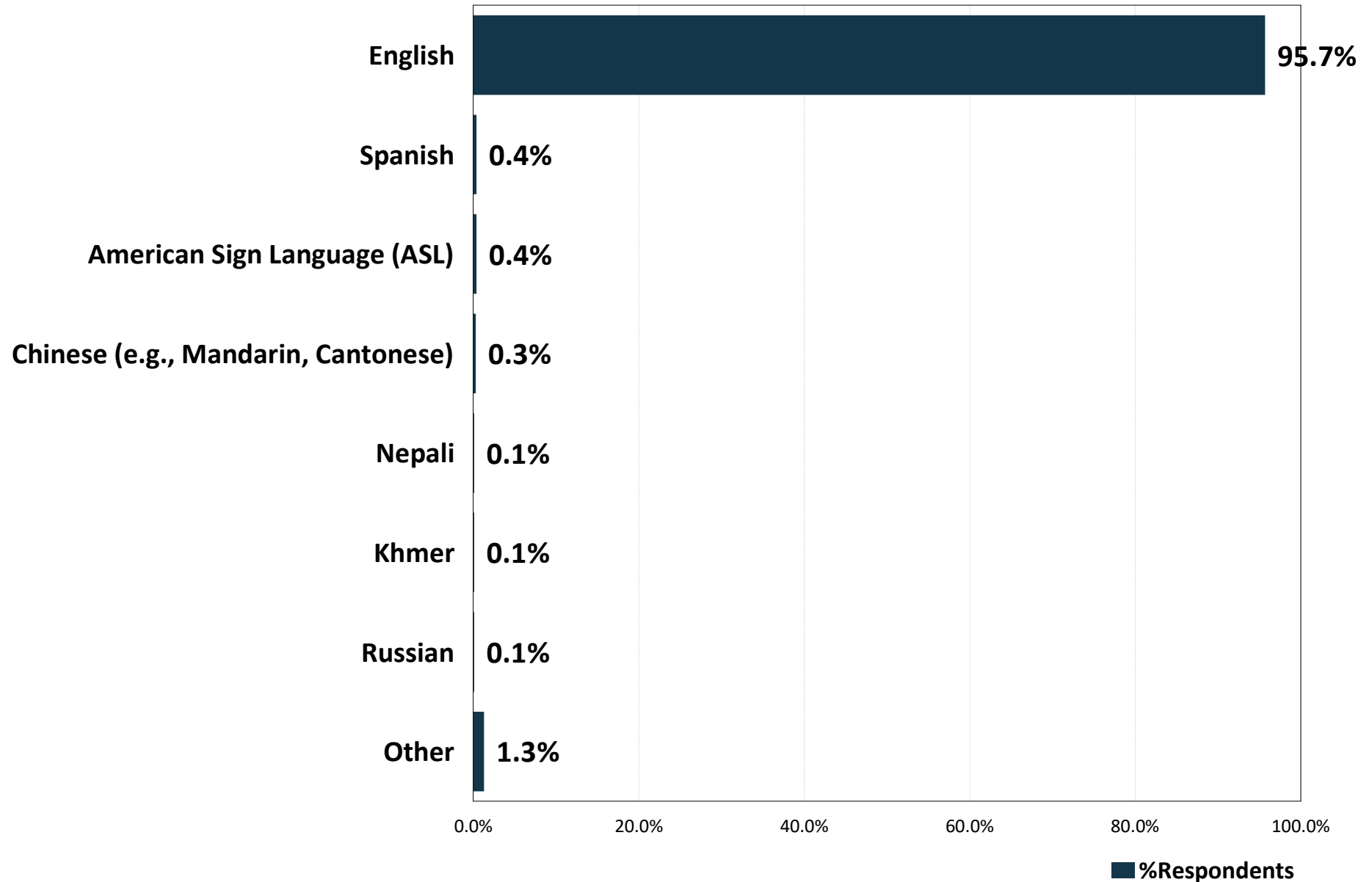
Demographics: Q53. Who lives in your household?

by percentage of **Franklin County** respondents (multiple choices could be selected)



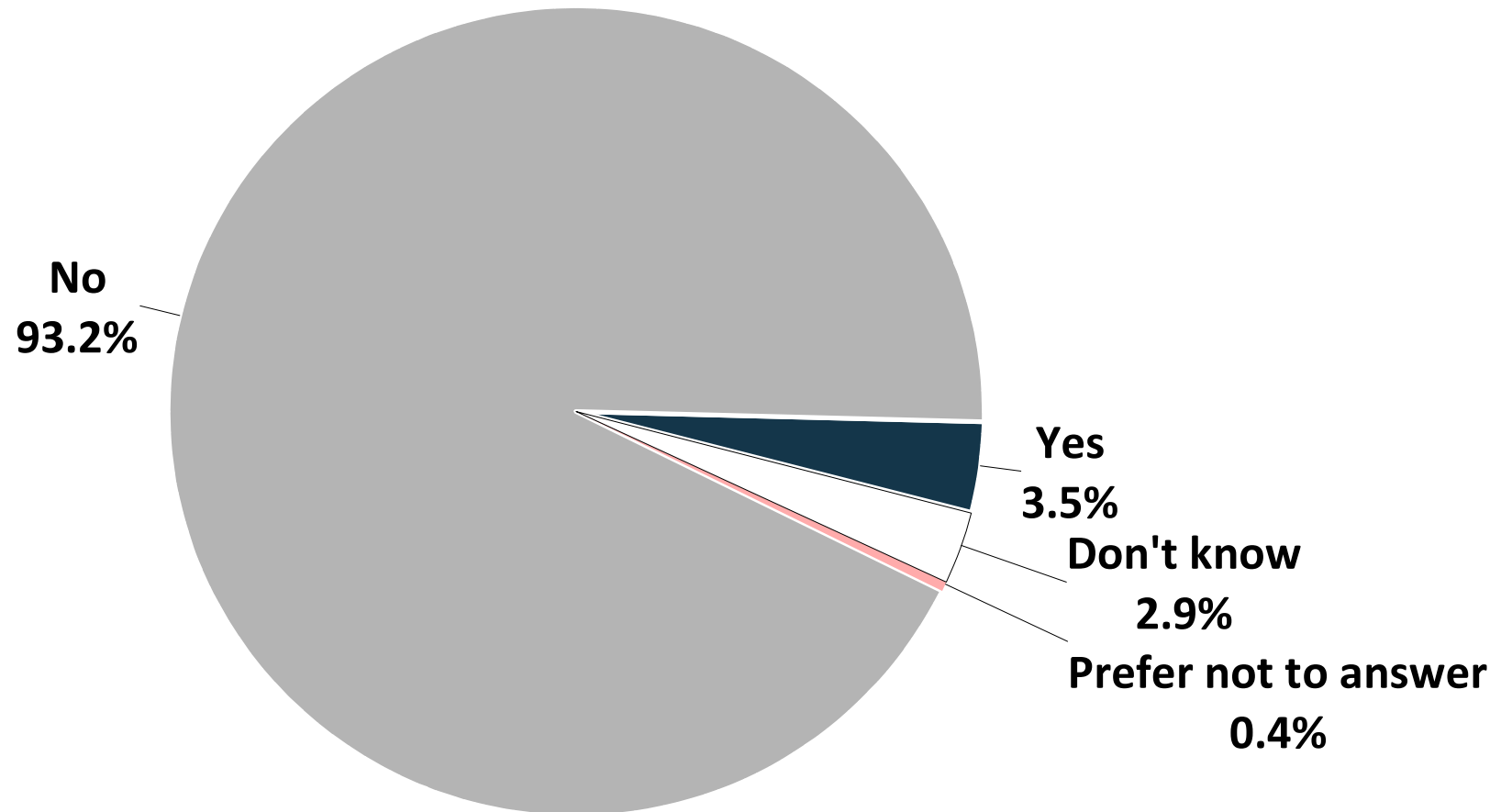
Demographics: Q54. What language(s) are primarily spoken in your home?

by percentage of Franklin County respondents (multiple choices could be selected)



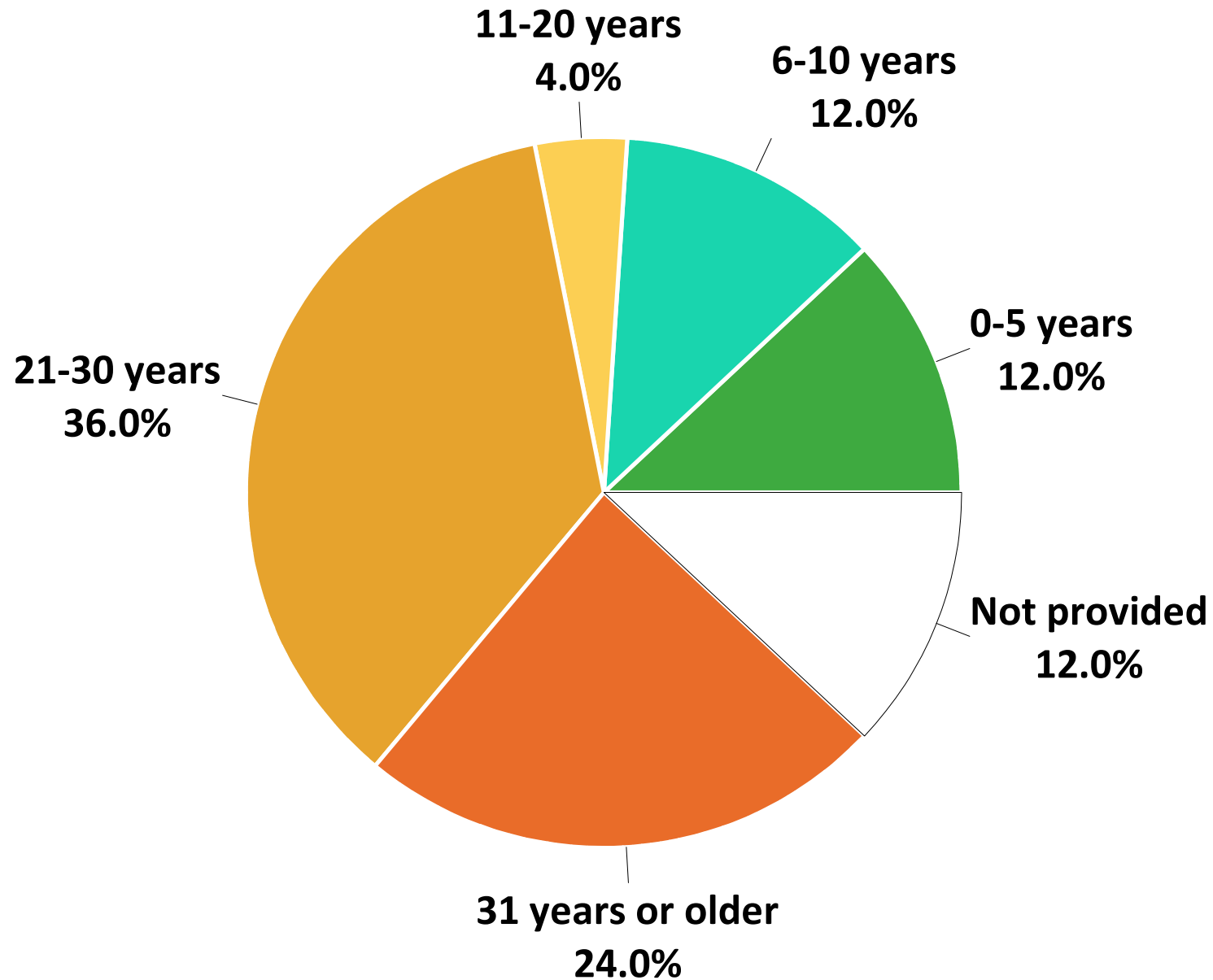
Demographics: Q55. Did you immigrate to this country?

by percentage of Franklin County respondents



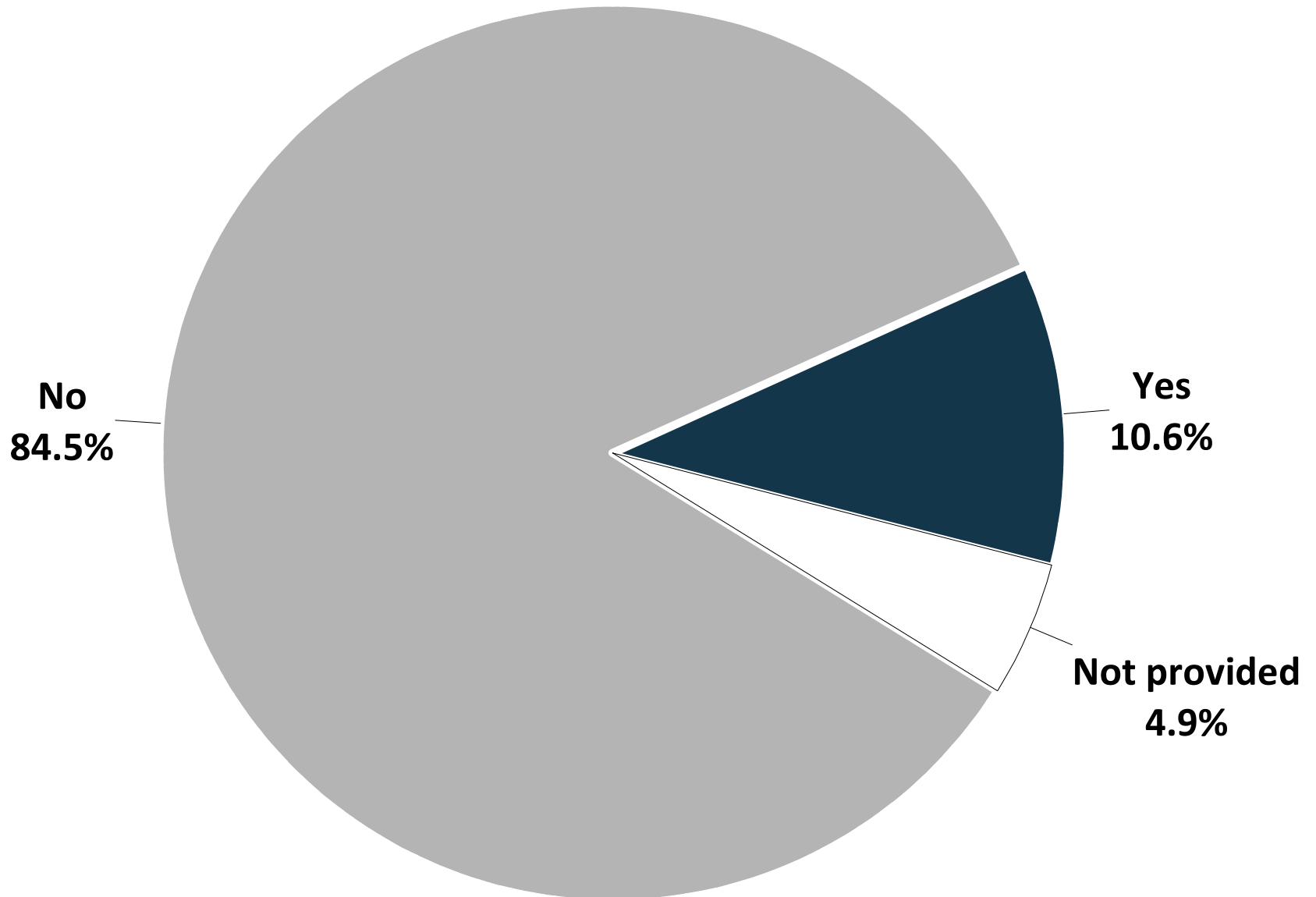
Demographics: Q55a. How old were you when you immigrated?

by percentage of Franklin County respondents that immigrated to the U.S.



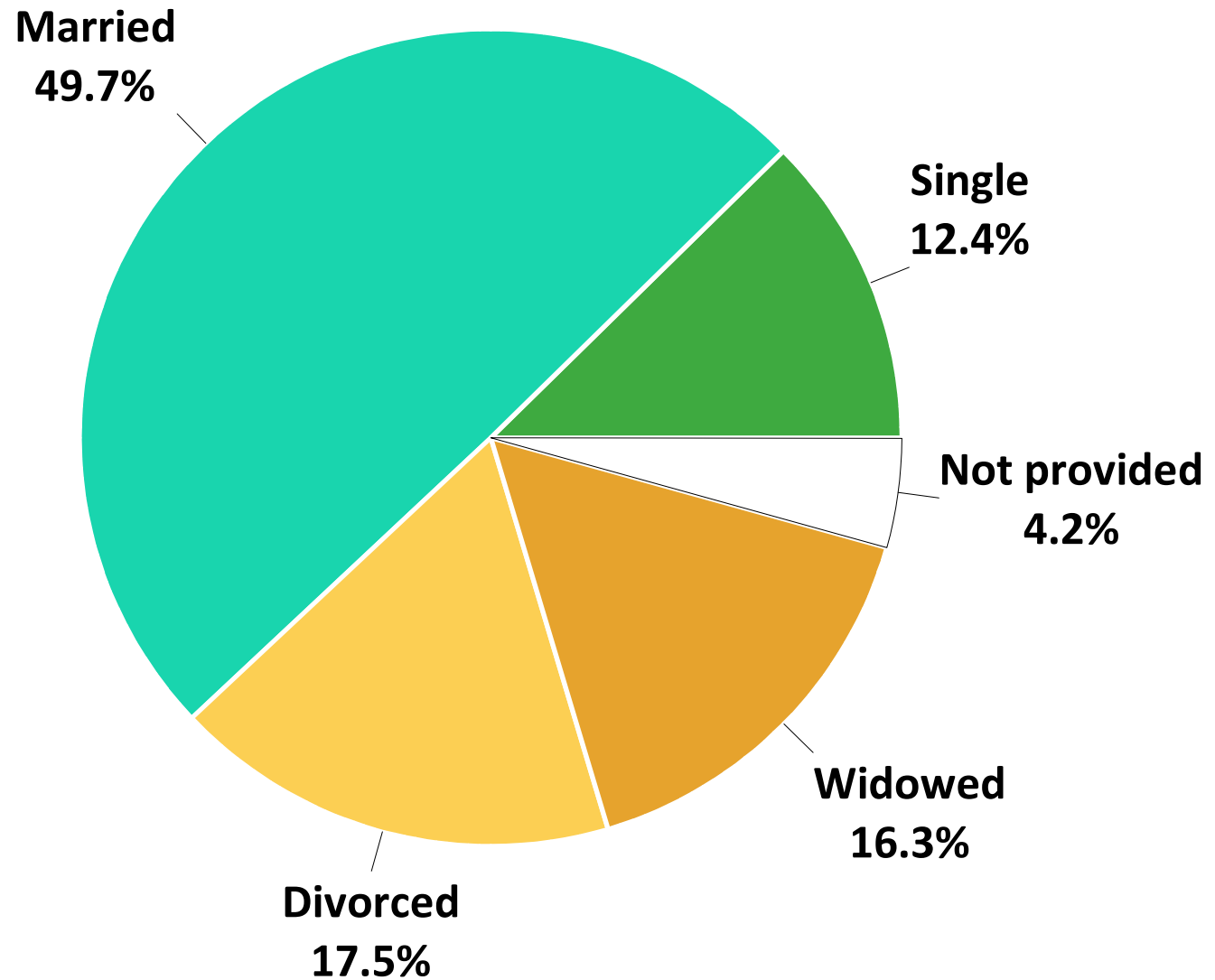
Q56. Are you a veteran?

by percentage of **Franklin County** respondents



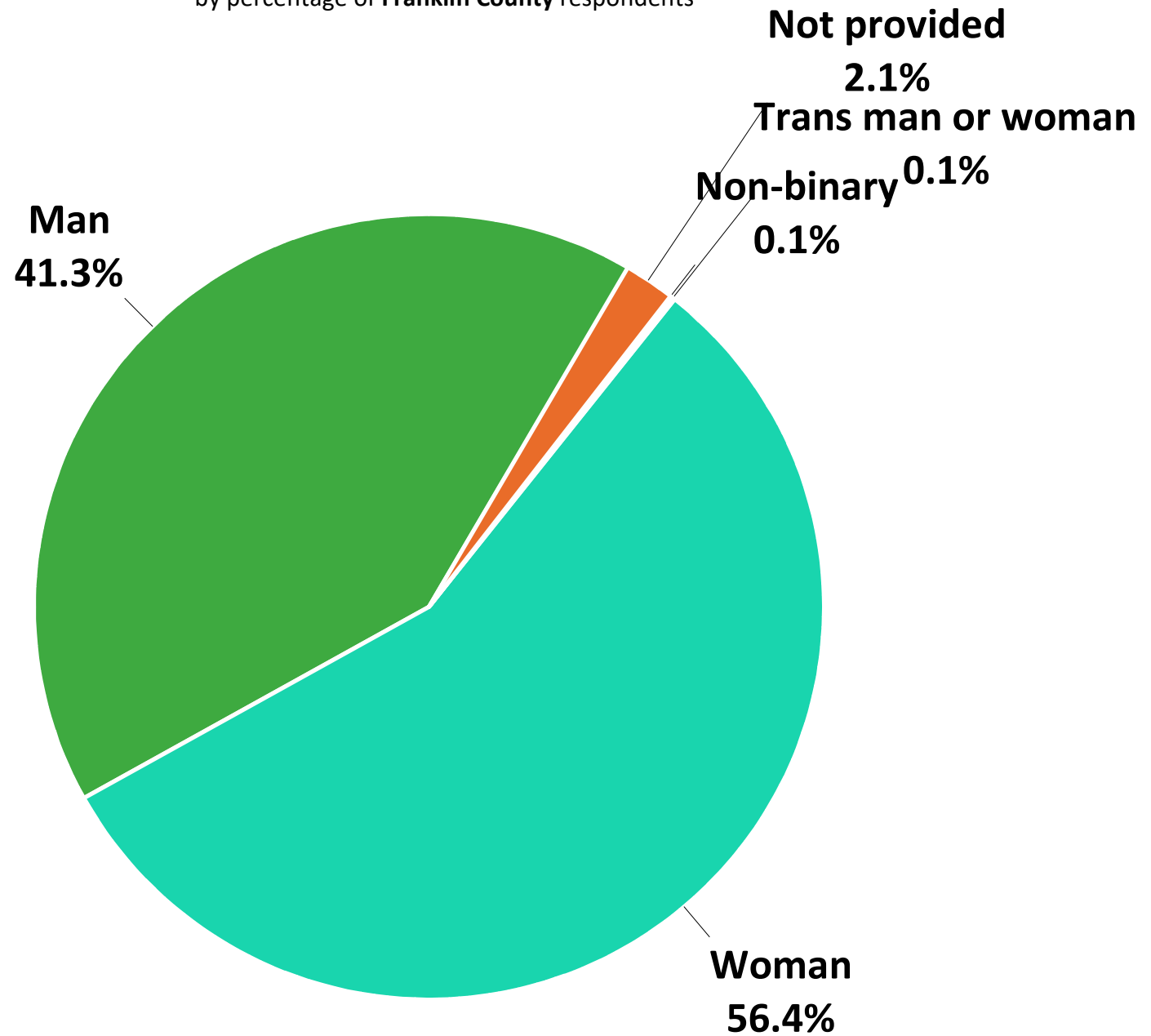
Demographics: Q57. What is your marital status?

by percentage of Franklin County respondents



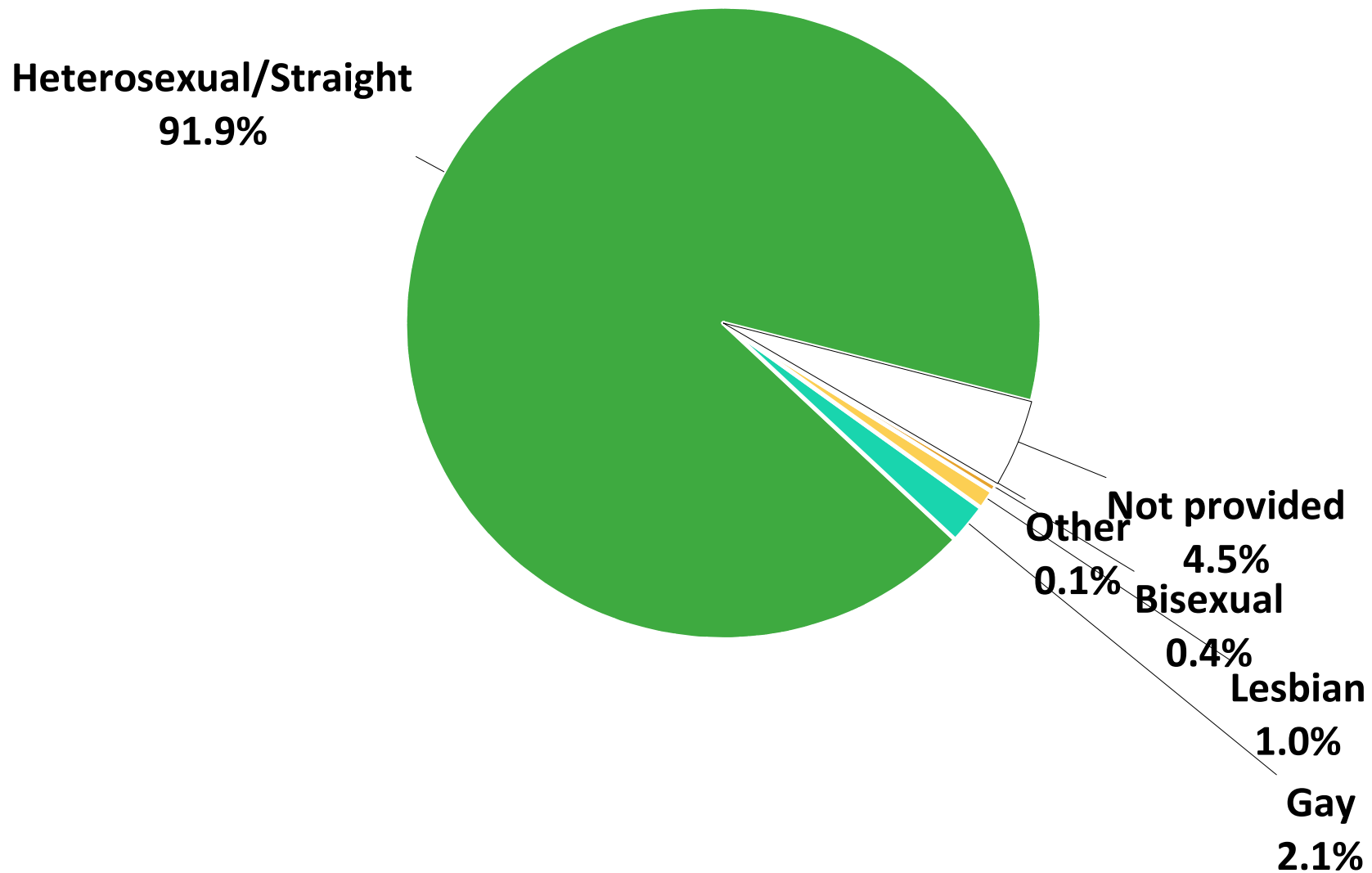
Demographics: Q58. What is your gender identity?

by percentage of Franklin County respondents



Demographics: Q59. What is your sexual orientation?

by percentage of Franklin County respondents



3

Tabular Data

Q1. Transportation. What is your usual way of getting to where you want and need to go?

Q1. What is your usual way of getting to where
you want & need to go

	Number	Percent
Drive myself	1346	88.5 %
Driven by friends or family	409	26.9 %
Driven by a professional (paid) caregiver	24	1.6 %
I take fixed route public transit (with bus stops & a time schedule)	31	2.0 %
I take paratransit (door to door public transit for people with disabilities)	10	0.7 %
I use flexible public transit (vehicles operate on a fixed route & have a time, but can deviate from the route)	5	0.3 %
I use a transportation service that picks me up from my location & requires a reservation & planning (includes services provided by public entities, nonprofits, & private providers)	75	4.9 %
I use rideshare services (Uber, Lyft)	53	3.5 %
I use a taxi or similar service	40	2.6 %
I walk	245	16.1 %
I ride my bike	80	5.3 %
Other	2	0.1 %
Total	2320	

Q1-12. Other

Q1-12. Other	Number	Percent
Ride my motorcycle	1	50.0 %
VA pick up my power chair	1	50.0 %
Total	2	100.0 %

Q2. If your usual way of getting around was no longer an option, how would you get to where you want and need to go?

Q2. How would you get to where you want & need to go	Number	Percent
I would not be able to get to where I need to go	233	15.3 %
I would be driven by friends or family	1039	68.3 %
I would be driven by a professional (paid) caregiver	87	5.7 %
I would take fixed route public transit (with bus stops & a time schedule)	163	10.7 %
I would take paratransit	20	1.3 %
I would use flexible public transit (vehicles operate on a fixed route & have a time, but can deviate from the route)	54	3.6 %
I would use a transportation service that picks me up from my location & requires a reservation & planning (includes services provided by public entities, nonprofits, & private providers)	300	19.7 %
I would use rideshare services (Uber, Lyft)	394	25.9 %
I would use a taxi or similar service	221	14.5 %
I would walk	275	18.1 %
I would ride my bike	135	8.9 %
Other	28	1.8 %
Total	2949	

Q2-12. Other

Q2-12. Other	Number	Percent
BUS WORK/WOULD RETIRE	1	3.7 %
Borrow a vehicle	1	3.7 %
Don't know	12	44.4 %
I WOULD HAVE TO MOVE TO WHERE MY CHILDREN LIVE	1	3.7 %
I WOULDN'T GO	1	3.7 %
I use the shuttle bus operated by the retirement facility where I reside	1	3.7 %
I will drive myself	2	7.4 %
Investigate options	1	3.7 %
Motorized chair	1	3.7 %
Move	1	3.7 %
Our retirement community has a shuttle	1	3.7 %
SENIOR SERVICE VEHICLE	1	3.7 %
Stay home	1	3.7 %
UBER/LYFT	1	3.7 %
Use my new computer for meetings with my doctor	1	3.7 %
Total	27	100.0 %

Q3. Communication and Technology. Which of the following sources do you use to find information about community services?

Q3. Which following sources do you use to find information about community services

	Number	Percent
Mail	742	48.8 %
Radio ads	272	17.9 %
Church or place of worship	332	21.8 %
Senior center or other community agency	311	20.4 %
Word of mouth (friends, family, etc.)	834	54.8 %
Flyers/bulletin boards	227	14.9 %
Community newspaper	492	32.3 %
Landline telephone	126	8.3 %
Mobile phone	521	34.3 %
Internet (websites, email)	1110	73.0 %
Social media	598	39.3 %
Libraries	236	15.5 %
TV ads	392	25.8 %
Billboards	98	6.4 %
Medical provider/hospital	307	20.2 %
Other	22	1.4 %
Total	6620	

Q3-16. Other

<u>Q3-16. Other</u>	<u>Number</u>	<u>Percent</u>
At my place of employment	1	4.5 %
CHURCH	1	4.5 %
Caresource	1	4.5 %
Caseworker	2	9.1 %
City email	1	4.5 %
DON'T USE COMMUNITY SERVICES, I TAKE CARE OF MYSELF	1	4.5 %
HelpLine 2-1-1/24-hour info & referral service for community resources	1	4.5 %
Magazine news	1	4.5 %
Magazines, AARP	1	4.5 %
Mailers/brochures from a variety of agencies	1	4.5 %
My caseworker or psychologist	1	4.5 %
My husband	1	4.5 %
My own printed resources and archived websites	1	4.5 %
My own research on internet	1	4.5 %
Newspapers, magazines, blogs, texts	1	4.5 %
NextDoor app most useful for neighborhood information	1	4.5 %
TV	1	4.5 %
Village Connections	1	4.5 %
WORK	1	4.5 %
Water bill always notes what is happening monthly	1	4.5 %
YouTube	1	4.5 %
Total	22	100.0 %

Q4. Do you use any of the following electronic devices?

<u>Q4. What electronic devices do you use</u>	<u>Number</u>	<u>Percent</u>
Smartphone (cellphone with internet)	1301	85.5 %
Computer	1268	83.4 %
Tablet (iPad,Kindle)	832	54.7 %
Smart speaker (Echo/Alexa, Google Nest)	341	22.4 %
Cell phone with limited minutes	151	9.9 %
None of the above	38	2.5 %
Total	3931	

Q5. Do you use the Internet?

<u>Q5. Do you use internet</u>	<u>Number</u>	<u>Percent</u>
Yes	1417	93.2 %
No	79	5.2 %
Don't know	25	1.6 %
Total	1521	100.0 %

Q5a. Why do you not use the Internet?

<u>Q5a. Why do you not use internet</u>	<u>Number</u>	<u>Percent</u>
Cannot afford internet or Wi-Fi device	17	21.5 %
Do not know how to access or use	34	43.0 %
Do not want to access or use	32	40.5 %
Area does not offer any or sufficient Wi-Fi or internet access	5	6.3 %
Total	88	

Q5b. What do you use the Internet for?

<u>Q5b. What do you use internet for</u>	<u>Number</u>	<u>Percent</u>
Search information	1330	93.9 %
News	994	70.1 %
Communication & socialization	923	65.1 %
Email	1305	92.1 %
Social networking	676	47.7 %
Entertainment (relax, TV/movies, music, etc.)	698	49.3 %
Gaming	299	21.1 %
Business promotion	74	5.2 %
Shopping	1120	79.0 %
Education	494	34.9 %
Online services	507	35.8 %
Blogging	30	2.1 %
Dating	13	0.9 %
Remote work	272	19.2 %
Telehealth	456	32.2 %
Total	9191	

Q6. Overall, how confident do you feel using computers, smartphones, or other devices?

Q6. How confident do you feel using computers, smartphones, or other devices	Number	Percent
Very confident	719	47.3 %
Somewhat confident	520	34.2 %
Only a little confident	148	9.7 %
Not at all confident	58	3.8 %
Not sure	76	5.0 %
Total	1521	100.0 %

Q7. Community Resources. Please indicate your level of agreement with the following.

(N=1521)

	Strongly agree	Agree	Not sure	Disagree	Strongly disagree
Q7-1. It is easy to find information about services for older adults	10.3%	37.5%	33.5%	15.3%	3.4%
Q7-2. My community offers a wide range of services available to adults as they get older	12.9%	34.1%	38.9%	9.9%	4.2%

Q8. Are you aware of or have you heard of these agencies that serve older adults? (without "not provided")

(N=1521)

	Yes	No
Q8-1. Franklin County Office on Aging	67.2%	32.8%
Q8-2. Central Ohio Area Agency on Aging	67.8%	32.2%

Q9. Are you currently receiving this service?

(N=1521)

	Yes	No
Q9-1. Transportation	6.8%	93.2%
Q9-2. Meal Delivery	7.5%	92.5%
Q9-3. Temporary Financial Assistance	0.7%	99.3%
Q9-4. Assistance with shopping for groceries, clothing, or necessities	3.0%	97.0%
Q9-5. Assistance with keeping your home clean & organized	6.4%	93.6%
Q9-6. Assistance with taking medication as prescribed	1.2%	98.8%
Q9-7. Assistance with scheduling & attending appointments	2.0%	98.0%
Q9-8. Assistance with bathing & dressing yourself	1.4%	98.6%
Q9-9. Assistance with moving from one room to another within your home	0.6%	99.4%
Q9-10. Assistance with preparing food for yourself	1.4%	98.6%
Q9-11. Emergency call button	8.3%	91.7%
Q9-12. Adult Day Services	0.3%	99.7%
Q9-13. Nutritional supplements such as Ensure	2.5%	97.5%
Q9-14. Durable Medical Equipment (DME) such as shower chair or walker	8.3%	91.7%
Q9-15. Incontinence supplies such as Depends or Chux pads	7.6%	92.4%

Q9. If "No," how likely are you to use this service in the future?

(N=1521)

	Very likely	Likely	Maybe	Unlikely	Very Unlikely	Not Sure
Q9-1. Transportation	6.5%	11.2%	20.0%	9.2%	7.4%	45.7%
Q9-2. Meal Delivery	3.6%	8.0%	19.0%	11.9%	11.1%	46.5%
Q9-3. Temporary Financial Assistance	2.9%	5.1%	14.0%	15.1%	17.5%	45.5%
Q9-4. Assistance with shopping for groceries, clothing, or necessities	4.3%	8.6%	19.2%	12.7%	10.2%	45.0%
Q9-5. Assistance with keeping your home clean & organized	5.4%	9.3%	17.9%	11.4%	9.7%	46.3%
Q9-6. Assistance with taking medication as prescribed	2.5%	5.3%	15.0%	16.2%	15.3%	45.6%
Q9-7. Assistance with scheduling & attending appointments	3.1%	6.6%	16.2%	15.4%	13.0%	45.6%
Q9-8. Assistance with bathing & dressing yourself	2.4%	4.5%	13.6%	17.3%	16.3%	45.8%
Q9-9. Assistance with moving from one room to another within your home	1.7%	3.9%	13.5%	16.7%	18.0%	46.2%
Q9-10. Assistance with preparing food for yourself	2.1%	5.6%	16.3%	16.5%	13.9%	45.5%
Q9-11. Emergency call button	4.4%	7.9%	17.9%	11.0%	11.7%	47.1%
Q9-12. Adult Day Services	1.8%	4.3%	14.4%	16.2%	16.7%	46.7%
Q9-13. Nutritional supplements such as Ensure	2.8%	6.4%	15.8%	14.5%	14.3%	46.2%
Q9-14. Durable Medical Equipment (DME) such as shower chair or walker	4.3%	8.5%	16.9%	11.1%	11.1%	48.0%
Q9-15. Incontinence supplies such as Depends or Chux pads	4.1%	7.5%	16.6%	11.9%	11.5%	48.4%

Q10. Would any of the following reasons prevent you from seeking any of the services listed in Question 9?

Q10. Would any following reasons prevent you from seeking any services	Number	Percent
I do not believe that I would qualify	655	43.1 %
I believe those services are for people who have less money than me	530	34.8 %
I do not want strangers taking care of me	221	14.5 %
I do not want to take services from someone else who may be more needy	555	36.5 %
It would be too difficult/time consuming to apply	91	6.0 %
I do not know how to access the services	266	17.5 %
I didn't know these services existed	213	14.0 %
Language is a barrier	11	0.7 %
I can't afford these services	165	10.8 %
I don't think I need them	117	7.7 %
Other	37	2.4 %
Total	2861	

Q11. How often do you receive your food in these ways?

(N=1521)

	Weekly (once a week)	Monthly (once a month)	A few times a year (4 to 6 times a...	Seldom (1 to 3 times a year)	Never	Don't know
Q11-1. Food pantry or food bank	1.2%	2.6%	1.6%	7.4%	80.1%	7.2%
Q11-2. Neighbor or family member provides food or meals	4.3%	2.3%	4.7%	13.0%	68.5%	7.2%
Q11-3. Personal or community garden	6.3%	3.4%	6.7%	7.1%	68.6%	8.0%
Q11-4. Home-delivered prepared meals (Meals on Wheels)	5.0%	0.4%	0.5%	3.7%	83.0%	7.4%
Q11-5. Congregate meal program (meals at a senior center, church, etc.)	1.4%	1.4%	1.6%	6.8%	80.9%	7.8%
Q11-6. Supplemental Nutrition Assistance Program (SNAP, also known as food stamps, EBT)	2.0%	4.3%	0.3%	3.6%	82.0%	7.8%
Q11-7. Senior Farmers Market Nutrition Program (SFMNP)	0.3%	0.5%	0.7%	5.7%	84.0%	8.9%
Q11-8. Commodity Supplemental Food Program (CSFP)-Monthly USDA food box	0.1%	0.7%	0.5%	4.6%	84.4%	9.7%
Q11-9. Expanded Food & Nutrition Education Program (EFNEP)-hands on meal preparation class	0.0%	0.1%	0.0%	4.1%	85.8%	10.0%

Q12. If you participate in any food or nutrition programs, why do you participate?

(N=1521)

	Strongly agree	Agree	Not sure	Disagree	Strongly disagree	N/A
Q12-1. To help make my food budget stretch further	5.0%	5.0%	0.7%	1.3%	1.4%	86.7%
Q12-2. To make sure I can pay all my bills each month	5.1%	3.9%	1.1%	1.6%	1.2%	87.1%
Q12-3. To supplement the food I purchase at grocery stores & restaurants	4.1%	5.9%	1.1%	1.0%	1.2%	86.7%
Q12-4. To socialize with people	2.2%	4.5%	1.7%	2.8%	2.2%	86.7%
Q12-5. To make sure I eat healthier foods	3.9%	6.4%	1.4%	1.3%	1.2%	85.7%
Q12-6. Someone enrolled me in the program (friend, family member, social worker, home health aide)	1.4%	2.8%	1.6%	1.8%	2.4%	90.0%
Q12-7. To make meal time less stressful	2.4%	4.0%	1.6%	1.8%	1.6%	88.6%
Q12-8. It is convenient or easy to participate	3.4%	5.7%	2.4%	1.4%	1.1%	86.0%

WITHOUT N/A**Q12. If you participate in any food or nutrition programs, why do you participate? (without "N/A")**

(N=1521)

	Strongly agree	Agree	Not sure	Disagree	Strongly disagree
Q12-1. To help make my food budget stretch further	37.4%	37.4%	4.9%	9.9%	10.3%
Q12-2. To make sure I can pay all my bills each month	39.3%	30.1%	8.7%	12.2%	9.7%
Q12-3. To supplement the food I purchase at grocery stores & restaurants	31.2%	44.1%	7.9%	7.4%	9.4%
Q12-4. To socialize with people	16.3%	33.5%	12.8%	21.2%	16.3%
Q12-5. To make sure I eat healthier foods	27.2%	45.2%	10.1%	9.2%	8.3%
Q12-6. Someone enrolled me in the program (friend, family member, social worker, home health aide)	14.5%	27.6%	15.8%	18.4%	23.7%
Q12-7. To make meal time less stressful	21.3%	35.1%	13.8%	15.5%	14.4%
Q12-8. It is convenient or easy to participate	23.9%	40.4%	17.4%	10.3%	8.0%

Q13. Over the last year, how often were you worried about not having enough food to eat?

Q13. How often were you worried about not
having enough food to eat over last year

	Number	Percent
Always	9	0.6 %
Frequently	22	1.4 %
Sometimes	74	4.9 %
Rarely	197	13.0 %
Never	1188	78.1 %
Not provided	31	2.0 %
Total	1521	100.0 %

Q14. Housing. Do you own or rent your home?

Q14. Do you own or rent your home

	Number	Percent
Own	1239	81.5 %
Rent	202	13.3 %
Other	37	2.4 %
Not provided	43	2.8 %
Total	1521	100.0 %

Q14a. Do you have a mortgage?

Q14a. Do you have a mortgage

	Number	Percent
Yes	564	45.5 %
No	643	51.9 %
Not sure	3	0.2 %
Not provided	29	2.3 %
Total	1239	100.0 %

Q15. How important are the following... (without "not provided")

(N=1521)

	Very important	Somewhat important	Not that important	Not important at all
Q15-1. How important is it to you to be able to remain in your home as you age	79.3%	15.9%	3.6%	1.2%
Q15-2. How important is it to you to be able to remain in your neighborhood as you age	55.7%	25.1%	14.5%	4.7%

Q16. What percentage of your monthly household income do you spend on your housing expenses, including utilities?

Q16. What percentage of your monthly household
income do you spend on your housing expenses,
including utilities

	Number	Percent
Less than 30%	635	41.7 %
30% to 50%	555	36.5 %
50% or more	237	15.6 %
Not provided	94	6.2 %
Total	1521	100.0 %

Q17. Do you have concerns about your ability to pay your rent, mortgage, or utilities?

Q17. Do you have concerns about your ability to
pay your rent, mortgage, or utilities

	Number	Percent
Yes	210	13.8 %
No	1192	78.4 %
Don't know	119	7.8 %
Total	1521	100.0 %

Q18. Please answer the following questions by circling either "Yes" or "No." (without "not provided")

(N=1521)

	Yes	No
Q18-1. Are you physically able to maintain the inside of your home	89.6%	10.4%
Q18-2. Do you have others help you maintain the inside of your home	35.3%	64.7%
Q18-3. Are you able to afford your indoor home maintenance	87.5%	12.5%
Q18-4. Are you physically able to maintain the outside of your home	65.5%	34.5%
Q18-5. Do you have others help you maintain the outside of your home	58.7%	41.3%
Q18-6. Are you able to afford your outdoor home maintenance	83.2%	16.8%

Q19. Does your home have any of the following?

<u>Q19. What following does your home have</u>	<u>Number</u>	<u>Percent</u>
Accessible entryway (zero step entry or ramp)	342	22.5 %
First floor bathroom	1242	81.7 %
First floor bedroom	915	60.2 %
First floor laundry	836	55.0 %
Total	3335	

Q20. Please answer each of the following:

(N=1521)

	<u>Yes</u>	<u>No</u>	<u>Don't know</u>
Q20-1. I understand the benefits of the Homestead Exemption Program	37.3%	36.3%	26.4%
Q20-2. I know how to access the Homestead Exemption Program	34.4%	40.6%	25.0%

Q21. Based on these guidelines, are you prepared for an emergency?

<u>Q21. Are you prepared for an emergency</u>	<u>Number</u>	<u>Percent</u>
Yes	1193	78.4 %
No	191	12.6 %
Don't know	137	9.0 %
Total	1521	100.0 %

Q22. Do you have the following items in your home?

(N=1521)

	Yes	No	Don't know
Q22-1. Working smoke detector(s)	93.6%	4.5%	1.9%
Q22-2. Working carbon monoxide detector(s)	64.4%	28.7%	6.8%
Q22-3. Working air-conditioning	94.9%	3.6%	1.5%
Q22-4. Alternative source of electric power (generator, solar, etc.)	23.4%	73.0%	3.6%

Q23. Have weather events like extreme heat, power outages, or flooding prevented you from any of the following?

(N=1521)

	Yes	No	Don't know
Q23-1. Getting to a health-related appointment	5.4%	91.3%	3.3%
Q23-2. Getting medicine	3.9%	92.8%	3.4%
Q23-3. Getting to work or volunteer service	5.3%	85.3%	9.4%
Q23-4. Getting to a community event or worship service	9.2%	85.0%	5.8%
Q23-5. Getting to a family member or friend	7.8%	87.6%	4.6%
Q23-6. Remaining in your home	6.8%	88.9%	4.3%

Q24. Health and Well-Being. How would you rate your overall health?

Q24. How would you rate your overall health	Number	Percent
Excellent	228	15.0 %
Very good	536	35.2 %
Good	469	30.8 %
Fair	219	14.4 %
Poor	50	3.3 %
Not provided	19	1.2 %
Total	1521	100.0 %

Q25. Do you have a primary care provider (general doctor or family doctor)?

Q25. Do you have a primary care provider	Number	Percent
Yes	1457	95.8 %
No	40	2.6 %
Not sure	5	0.3 %
Not provided	19	1.2 %
Total	1521	100.0 %

Q26. How often do you engage in some form of physical exercise (like walking, biking, sports, stretching)?

Q26. How often do you engage in some form of physical exercises	Number	Percent
Several times a week	912	60.0 %
About once a week	242	15.9 %
Once or twice a month	94	6.2 %
Less than once a month	78	5.1 %
Rarely or never	172	11.3 %
Not provided	23	1.5 %
Total	1521	100.0 %

Q27. Have you fallen in the last 6 months?

Q27. Have you fallen in the last 6 months	Number	Percent
Yes	306	20.1 %
No	1198	78.8 %
Not provided	17	1.1 %
Total	1521	100.0 %

Q28. What is the probability that you will fall in the next few months?

Q28. What is the probability that you will fall in next few months	Number	Percent
High	67	4.4 %
Medium	293	19.3 %
Low	1117	73.4 %
Not provided	44	2.9 %
Total	1521	100.0 %

Q29. Do you skip necessary medications due to high cost?

Q29. Do you skip necessary medications due to high cost	Number	Percent
Always	14	0.9 %
Frequently	17	1.1 %
Sometimes	78	5.1 %
Rarely	193	12.7 %
Never	1116	73.4 %
Not provided	103	6.8 %
Total	1521	100.0 %

Q30. How often do you need physical assistance with the following? (without "not provided")

(N=1521)

	Always need help	Sometimes need help	Never need help
Q30-1. Shopping for groceries, clothing, or other necessities	7.4%	11.1%	81.5%
Q30-2. Completing housework, e.g., keeping your home clean & organized	9.2%	20.1%	70.7%
Q30-3. Managing money & paying bills	3.2%	7.2%	89.6%
Q30-4. Taking medications as prescribed	2.2%	3.6%	94.2%
Q30-5. Scheduling & attending appointments	4.6%	6.3%	89.1%
Q30-6. Bathing & dressing yourself	1.7%	3.8%	94.5%
Q30-7. Moving from one room to another within your home	1.0%	3.6%	95.4%
Q30-8. Preparing food for yourself	2.4%	8.7%	88.9%

Q31. Outdoor Spaces and Buildings. How would you rate your community as a place for people to live as they age?

Q31. How would you rate your community as a place for people to live as they age	Number	Percent
Excellent	321	21.1 %
Good	564	37.1 %
Moderate	426	28.0 %
Poor	105	6.9 %
Very poor	25	1.6 %
Not sure	80	5.3 %
Total	1521	100.0 %

Q32. How would you rate your community on the following? (without "not provided")

(N=1521)

	Excellent	Good	Moderate	Poor	Very poor
Q32-1. Parks within walking distance of your home	26.1%	23.4%	20.4%	15.2%	14.9%
Q32-2. Public buildings & facilities (e.g., library, community center) that are accessible to people of different physical abilities	33.9%	37.7%	17.7%	6.8%	3.9%
Q32-3. Public restrooms	11.9%	24.6%	29.2%	19.7%	14.6%
Q32-4. Crosswalks with signals	28.8%	37.6%	17.6%	8.9%	7.1%
Q32-5. Crosswalks with adequate count down timers	24.6%	34.0%	20.5%	10.8%	10.1%
Q32-6. Places to sit or rest	14.0%	24.9%	27.9%	22.1%	11.0%
Q32-7. Well shaded streets & walkways	19.8%	32.1%	28.2%	12.9%	7.1%
Q32-8. Well-lit streets & walkways	18.0%	32.4%	29.5%	13.5%	6.6%
Q32-9. Ramps to enter buildings or buildings with zero-step entry	17.5%	36.4%	30.5%	9.9%	5.7%
Q32-10. Sidewalks	19.9%	38.6%	25.7%	9.3%	6.5%
Q32-11. Sidewalks that are in good condition	16.8%	35.6%	29.2%	10.7%	7.6%
Q32-12. Free drinking water	8.4%	14.7%	22.6%	28.9%	25.4%

Q33. Respect, Inclusion, and Participation. Please indicate your level of agreement with the following statements. (without "not provided")

(N=1521)

	Strongly agree	Agree	Not sure	Disagree	Strongly disagree
Q33-1. There are negative stereotypes about older adults	23.3%	44.0%	23.6%	7.1%	2.0%
Q33-2. Due to my age, my ideas & opinions are valued by local decision-makers	3.7%	21.4%	52.9%	15.9%	6.0%

Q34. Do any of the following reasons prevent you from going to activities or events more often?Q34. Do any following reasons prevent you from
going to activities or events more often

	Number	Percent
Not enough time	398	26.2 %
Issues with transportation	149	9.8 %
Lack of awareness	440	28.9 %
Language barriers	7	0.5 %
Physically unable to attend	206	13.5 %
Not interested	532	35.0 %
Too expensive	307	20.2 %
Lack of cultural inclusivity (a sense of feeling welcomed)	105	6.9 %
Other	93	6.1 %
Total	2237	

Q35. How often do you participate in activities outside of your home, such as social events or religious services?

Q35. How often do you participate in activities outside of your home	Number	Percent
Daily or multiple times per week	444	29.2 %
Once a week	440	28.9 %
About once a month	200	13.1 %
A few times a year	164	10.8 %
Rarely or never	239	15.7 %
Not provided	34	2.2 %
Total	1521	100.0 %

Q36. How often do you feel the following? (without "not provided")

(N=1521)

	Often	Some of the time	Hardly ever
Q36-1. How often do you feel that you lack companionship	12.7%	25.3%	62.0%
Q36-2. How often do you feel isolated from others	10.2%	24.1%	65.7%
Q36-3. How often do you feel left out	9.9%	24.9%	65.2%

Q37. What is your preferred language when referring to yourself or someone else over the age of 60?

Q37. What is your preferred language when referring to yourself or someone over 60	Number	Percent
Elder	44	2.9 %
Elderly	55	3.6 %
Old person	28	1.8 %
Older adult	245	16.1 %
Older person	100	6.6 %
Person over 60	157	10.3 %
People in their 60s/70s/80s	72	4.7 %
Senior	328	21.6 %
Senior citizen	316	20.8 %
Other	37	2.4 %
Not sure	139	9.1 %
Total	1521	100.0 %

Q38. Family. Considering the people to whom you are related by birth, marriage, adoption, etc., please answer the following questions. (without "not provided")

(N=1521)

	9+	5-8	2-4	1	None
Q38-1. How many relatives do you see or hear from at least once a month	12.4%	30.4%	42.5%	11.0%	3.7%
Q38-2. How many relatives do you feel at ease with that you can talk about private matters	6.7%	17.8%	52.2%	16.9%	6.4%
Q38-3. How many relatives do you feel close to such that you could call on them for help	10.3%	23.2%	47.4%	13.3%	5.9%

Q39. Friendships. Considering all your friends, including those who live in your neighborhood, please answer the following questions. (without "not provided")

(N=1521)

	9+	5-8	2-4	1	None
Q39-1. How many of your friends do you see or hear from at least once a month	17.4%	27.1%	39.5%	8.5%	7.6%
Q39-2. How many friends do you feel at ease with that you can talk about private matters	5.3%	14.2%	47.4%	18.5%	14.6%
Q39-3. How many friends do you feel close to such that you could call on them for help	8.9%	19.8%	46.6%	15.5%	9.1%

Q40. Please indicate your level of agreement with the following statements. (without "not provided")

(N=1521)

	Strongly agree	Agree	Not sure	Disagree	Strongly disagree
Q40-1. I feel safe in my home	60.3%	35.5%	3.3%	0.6%	0.3%
Q40-2. I feel safe in my neighborhood	49.8%	39.7%	7.9%	2.0%	0.7%

Q41. Are you currently a caregiver?

Q41. Are you currently a caregiver	Number	Percent
Yes	264	17.4 %
No	1194	78.5 %
Don't know	63	4.1 %
Total	1521	100.0 %

Q41a. Who do you care for?

Q41a. Who do you care for	Number	Percent
Spouse	101	38.3 %
Adult child	29	11.0 %
Parent	91	34.5 %
Grandparent	3	1.1 %
Sibling	15	5.7 %
Other family relative	24	9.1 %
Neighbor	7	2.7 %
Friend	11	4.2 %
Grandchildren	33	12.5 %
Total	314	

Q41b. Does the person you are caring for have dementia?

Q41b. Does the person you are caring for have dementia	Number	Percent
Yes	56	21.2 %
No	175	66.3 %
Maybe	27	10.2 %
Don't know	6	2.3 %
Total	264	100.0 %

Q41c. Overall, how burdened (stressed) do you feel in caring for your family member or friend?

Q41c. How burdened (stressed) do you feel in caring for your family member or friend	Number	Percent
Not at all	54	20.5 %
A little	87	33.0 %
Moderately	81	30.7 %
Quite a bit	30	11.4 %
Extremely	10	3.8 %
Not provided	2	0.8 %
Total	264	100.0 %

Q42. Employment and Volunteerism. What is your employment status?

Q42. What is your employment status	Number	Percent
Employed full-time	290	19.1 %
Employed part-time	134	8.8 %
Self-employed	60	3.9 %
Unemployed but seeking work	14	0.9 %
Enrolled in a work training program	3	0.2 %
Retired & seeking work	46	3.0 %
Retired & not seeking work	867	57.0 %
Disabled & unable to work	132	8.7 %
Total	1546	

Q43. If you are employed or seeking employment, what are the main reasons for your continuing to work?

Q43. What are the main reasons for your continuing to work	Number	Percent
I want to retire, but need to keep working to get health insurance	125	8.2 %
I want to retire, but cannot afford to	142	9.3 %
I find work rewarding	289	19.0 %
I have professional achievements I want to reach	60	3.9 %
I do not want to retire	111	7.3 %
Other	34	2.2 %
I'm not employed or seeking employment	949	62.4 %
Total	1710	

Q44. If currently seeking employment, have you experienced any of the following?

<u>Q44. What following have you experienced</u>	<u>Number</u>	<u>Percent</u>
Jobs that are available do not match my skills or experience	32	2.1 %
I am over qualified	41	2.7 %
I struggle with technology used in workplace	18	1.2 %
Employers will not hire me because of my age	53	3.5 %
Transportation is a barrier	4	0.3 %
I have difficulty with application processes	6	0.4 %
Health issues make finding or keeping a job a challenge	14	0.9 %
I need to be retrained to qualify for jobs	8	0.5 %
I do not know how to find available job	10	0.7 %
I am not seeking employment	1365	89.7 %
Total	1551	

Q45. Do you volunteer?

<u>Q45. Do you volunteer</u>	<u>Number</u>	<u>Percent</u>
Yes	670	44.0 %
No	737	48.5 %
Not provided	114	7.5 %
Total	1521	100.0 %

Q46. What year were you born?

Q46. What year were you born	Number	Percent
1926	2	0.1 %
1927	2	0.1 %
1928	2	0.1 %
1929	2	0.1 %
1930	7	0.5 %
1931	7	0.5 %
1932	6	0.4 %
1933	11	0.8 %
1934	12	0.8 %
1935	10	0.7 %
1936	14	1.0 %
1937	20	1.4 %
1938	24	1.7 %
1939	29	2.0 %
1940	22	1.5 %
1941	29	2.0 %
1942	47	3.2 %
1943	43	3.0 %
1944	36	2.5 %
1945	47	3.2 %
1946	45	3.1 %
1947	72	5.0 %
1948	57	3.9 %
1949	66	4.5 %
1950	59	4.1 %
1951	70	4.8 %
1952	74	5.1 %
1953	69	4.7 %
1954	60	4.1 %
1955	61	4.2 %
1956	64	4.4 %
1957	40	2.8 %
1958	45	3.1 %
1959	43	3.0 %
1960	44	3.0 %
1961	36	2.5 %
1962	23	1.6 %
1963	34	2.3 %
1964	21	1.4 %
1965	24	1.7 %
1966	14	1.0 %
1967	21	1.4 %
1968	14	1.0 %
1969	8	0.6 %
1970	11	0.8 %
1971	7	0.5 %
Total	1454	100.0 %

Q46a. What is your age?

Q46a. Your age	Number	Percent
50-59	177	11.6 %
60-64	208	13.7 %
65-69	328	21.6 %
70-74	324	21.3 %
75-79	218	14.3 %
80+	199	13.1 %
Not provided	67	4.4 %
Total	1521	100.0 %

Q47. What is your zip code?

Q47. What is your zip code	Number	Percent
43001	3	0.2 %
43002	1	0.1 %
43004	11	0.7 %
43008	2	0.1 %
43013	2	0.1 %
43015	31	2.0 %
43016	41	2.7 %
43017	62	4.1 %
43021	4	0.3 %
43023	5	0.3 %
43025	2	0.1 %
43026	32	2.1 %
43031	5	0.3 %
43035	8	0.5 %
43040	58	3.8 %
43045	3	0.2 %
43046	4	0.3 %
43054	14	0.9 %
43055	40	2.6 %
43056	14	0.9 %
43061	2	0.1 %
43062	21	1.4 %
43064	25	1.6 %
43065	23	1.5 %
43066	1	0.1 %
43067	2	0.1 %
43068	28	1.8 %
43071	2	0.1 %
43074	7	0.5 %
43080	2	0.1 %
43081	79	5.2 %
43082	23	1.5 %
43085	112	7.4 %
43102	1	0.1 %
43103	16	1.1 %
43105	4	0.3 %
43106	5	0.3 %
43107	4	0.3 %
43110	28	1.8 %
43112	5	0.3 %
43113	41	2.7 %
43116	1	0.1 %
43119	16	1.1 %
43123	43	2.8 %
43125	14	0.9 %
43128	13	0.9 %

Q47. What is your zip code?

Q47. What is your zip code	Number	Percent
43130	46	3.0 %
43137	3	0.2 %
43140	32	2.1 %
43143	6	0.4 %
43145	2	0.1 %
43146	8	0.5 %
43147	32	2.1 %
43150	1	0.1 %
43153	1	0.1 %
43154	1	0.1 %
43160	54	3.6 %
43162	16	1.1 %
43164	4	0.3 %
43201	8	0.5 %
43202	16	1.1 %
43203	5	0.3 %
43204	27	1.8 %
43205	3	0.2 %
43206	28	1.8 %
43207	19	1.2 %
43209	34	2.2 %
43211	7	0.5 %
43212	5	0.3 %
43213	17	1.1 %
43214	32	2.1 %
43215	41	2.7 %
43217	1	0.1 %
43219	6	0.4 %
43220	18	1.2 %
43221	21	1.4 %
43222	5	0.3 %
43223	10	0.7 %
43224	13	0.9 %
43227	7	0.5 %
43228	21	1.4 %
43229	19	1.2 %
43230	26	1.7 %
43231	8	0.5 %
43232	15	1.0 %
43235	33	2.2 %
43334	1	0.1 %
43344	9	0.6 %
Total	1521	100.0 %

Q48. What County do you live in?

<u>Q48. What County do you live in</u>	<u>Number</u>	<u>Percent</u>
Franklin	910	59.8 %
Delaware	106	7.0 %
Fairfield	107	7.0 %
Fayette	73	4.8 %
Licking	102	6.7 %
Madison	73	4.8 %
Pickaway	71	4.7 %
Union	79	5.2 %
Total	1521	100.0 %

Q49. What is your race?

<u>Q49. What is your race</u>	<u>Number</u>	<u>Percent</u>
Asian/Pacific Islander	45	3.0 %
Black/African American	163	10.7 %
Native American	4	0.3 %
White/Caucasian	1255	82.5 %
Hispanic/Latino	44	2.9 %
Other	4	0.3 %
Prefer not to answer	31	2.0 %
Total	1546	

Q49-6. Other

<u>Q49-6. Other</u>	<u>Number</u>	<u>Percent</u>
Croatian	1	25.0 %
More than one	1	25.0 %
Semitic	1	25.0 %
Ukrainian	1	25.0 %
Total	4	100.0 %

Q50. What is your main source of income?

<u>Q50. What is your main source of income</u>	<u>Number</u>	<u>Percent</u>
Social Security	526	34.6 %
Wages from work	353	23.2 %
Supplemental Security Income (SSI)	16	1.1 %
Social Security Disability Insurance (SSDI)	37	2.4 %
Traditional or private pension	116	7.6 %
401(k)/403(b)	37	2.4 %
Savings/Investments/Roth IRA	109	7.2 %
State retirement plan (OPERS/STRS etc.)	205	13.5 %
Other	48	3.2 %
Not provided	74	4.9 %
Total	1521	100.0 %

Q50-9. Other

Q50-9. Other	Number	Percent
CSR	1	2.1 %
Consulting income	1	2.1 %
Federal employee survivor annuity	1	2.1 %
Federal retirement program	2	4.3 %
Have more than one source of income	1	2.1 %
Husband still working	1	2.1 %
Husband works	5	10.6 %
Husband's salary	1	2.1 %
I have pension for emergency use with limited funds	1	2.1 %
I receive a monthly pension from Federal Government	1	2.1 %
INHERITED IRA	1	2.1 %
Income and savings	1	2.1 %
Income from my husband's retirement and social security	1	2.1 %
Military disability	1	2.1 %
Military pension	1	2.1 %
Military retirement	5	10.6 %
My SS plus husbands SS and pension	1	2.1 %
My husband gets social security	1	2.1 %
Navy retirement	1	2.1 %
Railroad retirement	2	4.3 %
Retired federal employee	1	2.1 %
Retired military	1	2.1 %
STATE TEACHER'S DISABILITY	1	2.1 %
Short term disability since near fatal car accident	1	2.1 %
Social security and a pension plan	1	2.1 %
Social security and income from investments	1	2.1 %
Spouse	4	8.5 %
Spouse works	1	2.1 %
Spouse's income	2	4.3 %
Spouse's wages and STRS retirement plan	1	2.1 %
Title V	1	2.1 %
VA poverty pension	1	2.1 %
Working spouse	1	2.1 %
Total	47	100.0 %

Q51. What was your household income last year?

<u>Q51. What was your household income last year</u>	<u>Number</u>	<u>Percent</u>
Under \$10K	104	6.8 %
\$10K-\$24,999	204	13.4 %
\$25K-\$39,999	171	11.2 %
\$40K-\$59,999	189	12.4 %
\$60K-\$74,999	144	9.5 %
\$75K-\$99,999	176	11.6 %
\$100K+	205	13.5 %
Prefer not to answer	328	21.6 %
Total	1521	100.0 %

Q52. What is the highest level of education you completed?

<u>Q52. What is the highest level of education you completed</u>	<u>Number</u>	<u>Percent</u>
No high school diploma	74	4.9 %
High school diploma or GED	245	16.1 %
Some college, no degree	281	18.5 %
Associate's degree	151	9.9 %
Bachelor's degree	384	25.2 %
Graduate or professional degree	343	22.6 %
Not provided	43	2.8 %
Total	1521	100.0 %

Q53. Who lives in your household?

<u>Q53. Who lives in your household</u>	<u>Number</u>	<u>Percent</u>
My spouse or partner	873	57.4 %
My children	212	13.9 %
My grandchildren	50	3.3 %
Other relatives	48	3.2 %
Non-relative or friend	32	2.1 %
I live alone	460	30.2 %
Total	1675	

Q54. What language(s) are primarily spoken in your home?

Q54. What language(s) are primarily spoken in your home	Number	Percent
English	1471	96.7 %
Spanish	10	0.7 %
Chinese (e.g., Mandarin, Cantonese)	2	0.1 %
Nepali	1	0.1 %
Khmer	1	0.1 %
Russian	1	0.1 %
American Sign Language (ASL)	3	0.2 %
Other	16	1.1 %
Total	1505	

Q54-9. Other

Q54-9. Other	Number	Percent
AKAN (From Ghana)	1	6.3 %
Arabic	1	6.3 %
Farsi, Turkish	1	6.3 %
Filippino	1	6.3 %
German	2	12.5 %
Korean	1	6.3 %
Polish	1	6.3 %
Portuguese	1	6.3 %
Thai	1	6.3 %
Urdu	4	25.0 %
Vietnamese	1	6.3 %
Yiddish	1	6.3 %
Total	16	100.0 %

Q55. Did you immigrate to this country?

Q55. Did you immigrate to this country	Number	Percent
Yes	39	2.6 %
No	1433	94.2 %
Prefer not to answer	8	0.5 %
Don't know	41	2.7 %
Total	1521	100.0 %

Q55a. How old were you when you immigrated?

Q55a. How old were you when you immigrated	Number	Percent
0-5	4	10.3 %
6-10	3	7.7 %
11-20	3	7.7 %
21-30	16	41.0 %
31+	6	15.4 %
Not provided	7	17.9 %
Total	39	100.0 %

Q56. Are you a veteran?

Q56. Are you a veteran	Number	Percent
Yes	182	12.0 %
No	1282	84.3 %
Not provided	57	3.7 %
Total	1521	100.0 %

Q57. What is your marital status?

Q57. What is your marital status	Number	Percent
Single	153	10.1 %
Married	839	55.2 %
Divorced	227	14.9 %
Widowed	253	16.6 %
Not provided	49	3.2 %
Total	1521	100.0 %

Q58. What is your gender identity?

<u>Q58. What is your gender identity</u>	<u>Number</u>	<u>Percent</u>
Man	649	42.7 %
Woman	843	55.4 %
Trans man or Trans woman	4	0.3 %
Non-binary	1	0.1 %
Not provided	24	1.6 %
Total	1521	100.0 %

Q59. What is your sexual orientation?

<u>Q59. What is your sexual orientation</u>	<u>Number</u>	<u>Percent</u>
Heterosexual/Straight	1408	92.6 %
Gay	21	1.4 %
Lesbian	13	0.9 %
Bisexual	6	0.4 %
Other	1	0.1 %
Not provided	72	4.7 %
Total	1521	100.0 %

Q59-5. Other

<u>Q59-5. Other</u>	<u>Number</u>	<u>Percent</u>
ASEXUAL	1	100.0 %
Total	1	100.0 %

Sampling area

<u>Sample area</u>	<u>Number</u>	<u>Percent</u>
Franklin County	442	29.1 %
Columbus	356	23.4 %
Delaware County	106	7.0 %
Licking County	102	6.7 %
Fairfield County	107	7.0 %
Pickaway County	71	4.7 %
Union County	79	5.2 %
Madison County	73	4.8 %
Fayette County	73	4.8 %
<u>Worthington</u>	<u>112</u>	<u>7.4 %</u>
Total	1521	100.0 %

4

Survey Instrument

Dear Neighbor,

As an adult aged 50 years or older, you have been selected to participate in the **2021 Regional Assessment on Aging**. The Central Ohio Area Agency on Aging, the Franklin County Office on Aging, and the Age-Friendly Innovation Center will use the survey results to establish priorities for making our community a better place to live as we age.

Your voice is important to us!

Your response is very important to us, and we thank you in advance for taking 20-30 minutes to complete this survey. Upon completion, please return the survey in the prepaid addressed envelope.

If you are interested in learning more about services for older adults in your area, please reach out to the Central Ohio Area Agency on Aging (COAAA) at (800) 589-7277 or www.coaaa.org or the Franklin County Office on Aging at (614) 525-5230 or www.officeonaging.org if you are a Franklin County resident.

If you would like to request a survey in another language or have questions, please contact 1-888-801-5368. You can also complete this survey online at regionagingsurvey.org.

Thank you for your participation in helping Central Ohio to be an even better place to grow older.

Sincerely,



Franklin County
Board of Commissioners
OFFICE ON AGING

Central Ohio Regional Assessment on Aging Questionnaire

1. Transportation. What is your usual way of getting to where you want and need to go? [Check all that apply.]

- | | |
|--|---|
| <input type="checkbox"/> (01) Drive myself
<input type="checkbox"/> (02) Driven by friends or family
<input type="checkbox"/> (03) Driven by a professional (paid) caregiver
<input type="checkbox"/> (04) I take fixed route public transit (with bus stops and a time schedule)
<input type="checkbox"/> (05) I take paratransit (door to door public transit for people with disabilities)
<input type="checkbox"/> (06) I use flexible public transit (vehicles operate on a fixed route and have a time, but can deviate from the route) | <input type="checkbox"/> (07) I use a transportation service that picks me up from my location and requires a reservation and planning (includes services provided by public entities, nonprofits, and private providers)
<input type="checkbox"/> (08) I use rideshare services (Uber, Lyft)
<input type="checkbox"/> (09) I use a taxi or similar service
<input type="checkbox"/> (10) I walk
<input type="checkbox"/> (11) I ride my bike
<input type="checkbox"/> (12) Other: _____ |
|--|---|

2. If your usual way of getting around was no longer an option, how would you get to where you want and need to go? [Check all that apply.]

- | | |
|---|---|
| <input type="checkbox"/> (01) I would not be able to get to where I need to go
<input type="checkbox"/> (02) I would be driven by friends or family
<input type="checkbox"/> (03) I would be driven by a professional (paid) caregiver
<input type="checkbox"/> (04) I would take fixed route public transit (with bus stops and a time schedule)
<input type="checkbox"/> (05) I would take paratransit
<input type="checkbox"/> (06) I would use flexible public transit (vehicles operate on a fixed route and have a time, but can deviate from the route) | <input type="checkbox"/> (07) I would use a transportation service that picks me up from my location and requires a reservation and planning (includes services provided by public entities, nonprofits, and private providers)
<input type="checkbox"/> (08) I would use rideshare services (Uber, Lyft)
<input type="checkbox"/> (09) I would use a taxi or similar service
<input type="checkbox"/> (10) I would walk
<input type="checkbox"/> (11) I would ride my bike
<input type="checkbox"/> (12) Other: _____ |
|---|---|

3. Communication and Technology. Which of the following sources do you use to find information about community services? [Check all that apply.]

- | | |
|--|---|
| <input type="checkbox"/> (01) Mail
<input type="checkbox"/> (02) Radio ads
<input type="checkbox"/> (03) Church or place of worship
<input type="checkbox"/> (04) Senior Center or other community agency
<input type="checkbox"/> (05) Word of mouth (friends, family, etc.)
<input type="checkbox"/> (06) Flyers/Bulletin boards
<input type="checkbox"/> (07) Community newspaper
<input type="checkbox"/> (08) Landline telephone | <input type="checkbox"/> (09) Mobile phone
<input type="checkbox"/> (10) Internet (websites, e-mail)
<input type="checkbox"/> (11) Social media
<input type="checkbox"/> (12) Libraries
<input type="checkbox"/> (13) TV ads
<input type="checkbox"/> (14) Billboards
<input type="checkbox"/> (15) Medical provider/hospital
<input type="checkbox"/> (16) Other: _____ |
|--|---|

4. Do you use any of the following electronic devices? [Check all that apply.]

- | | |
|--|--|
| <input type="checkbox"/> (1) Smartphone (cellphone with internet)
<input type="checkbox"/> (2) Computer
<input type="checkbox"/> (3) Tablet (iPad, Kindle) | <input type="checkbox"/> (4) Smart speaker (Echo/Alexa, Google Nest)
<input type="checkbox"/> (5) Cell phone with limited minutes
<input type="checkbox"/> (6) None of the above |
|--|--|

5. Do you use the Internet? ☐ (1) Yes [Answer Q5b.] ☐ (2) No [Answer Q5a.] ☐ (9) Don't know

5a. Why do you not use the Internet? [Check all that apply.]

- | | |
|---|---|
| <input type="checkbox"/> (1) Cannot afford internet or Wi-Fi device
<input type="checkbox"/> (2) Do not know how to access or use
<input type="checkbox"/> (3) Do not want to access or use | <input type="checkbox"/> (4) Area does not offer any or sufficient Wi-Fi or internet access |
|---|---|

5b. What do you use the Internet for? [Check all that apply.]

- | | | |
|-----------------------------|--------------------------------|--------------------------|
| ____(01) Search information | ____(06) Entertainment (relax, | ____(11) Online services |
| ____(02) News | tv/movies, music, etc.) | ____(12) Blogging |
| ____(03) Communication and | ____(07) Gaming | ____(13) Dating |
| socialization | ____(08) Business promotion | ____(14) Remote work |
| ____(04) Email | ____(09) Shopping | ____(15) Telehealth |
| ____(05) Social networking | ____(10) Education | |

6. Overall, how confident do you feel using computers, smartphones, or other devices?

- ____(1) Very confident ____ (2) Somewhat confident ____ (3) Only a little confident ____ (4) Not at all confident

7. Community Resources. Please indicate your level of agreement with the following.					
	Strongly Agree	Agree	Not Sure	Disagree	Strongly Disagree
1. It is easy to find information about services for older adults	5	4	3	2	1
2. My community offers a wide range of services available to adults as they get older	5	4	3	2	1

8. Are you aware of or have you heard of these agencies that serve older adults?

	Yes	No
1. Franklin County Office on Aging	Yes	No
2. Central Ohio Area Agency on Aging	Yes	No

9. Type of Service		Are you currently receiving this service?		If "No," how likely are you to use this service in the future?				
				Very Likely	Likely	Maybe	Unlikely	Very Unlikely
01.	Transportation	Yes	No	5	4	3	2	1
02.	Meal Delivery	Yes	No	5	4	3	2	1
03.	Temporary Financial Assistance	Yes	No	5	4	3	2	1
04.	Assistance with shopping for groceries, clothing, or necessities	Yes	No	5	4	3	2	1
05.	Assistance with keeping your home clean and organized	Yes	No	5	4	3	2	1
06.	Assistance with taking medication as prescribed	Yes	No	5	4	3	2	1
07.	Assistance with scheduling and attending appointments	Yes	No	5	4	3	2	1
08.	Assistance with bathing and dressing yourself	Yes	No	5	4	3	2	1
09.	Assistance with moving from one room to another within your home	Yes	No	5	4	3	2	1
10.	Assistance with preparing food for yourself	Yes	No	5	4	3	2	1
11.	Emergency call button	Yes	No	5	4	3	2	1
12.	Adult Day Services	Yes	No	5	4	3	2	1
13.	Nutritional supplements such as Ensure	Yes	No	5	4	3	2	1
14.	Durable Medical Equipment (DME) such as shower chair or walker	Yes	No	5	4	3	2	1
15.	Incontinence supplies such as Depends or Chux pads	Yes	No	5	4	3	2	1

10. Would any of the following reasons prevent you from seeking any of the services listed in Question 9? [Check all that apply.]

- | | |
|---|--|
| ____(01) I do not believe that I would qualify | ____(05) It would be too difficult/time consuming to apply |
| ____(02) I believe those services are for people who have less money than me | ____(06) I do not know how to access the services |
| ____(03) I do not want strangers taking care of me | ____(07) I didn't know these services existed |
| ____(04) I do not want to take services from someone else who may be more needy | ____(08) Language is a barrier |
| | ____(09) I can't afford these services |
| | ____(10) Other: _____ |

11. How often do you receive your food in these ways?	Weekly (once a week)	Monthly (once a month)	A Few Times a Year (4 to 6 times a year)	Seldom (1 to 3 times a year)	Never	Don't Know
1. Food pantry or food bank	5	4	3	2	1	9
2. Neighbor or family member provides food or meals	5	4	3	2	1	9
3. Personal or community garden	5	4	3	2	1	9
4. Home-delivered prepared meals (Meals on Wheels)	5	4	3	2	1	9
5. Congregate meal program (meals at a senior center, church, etc.)	5	4	3	2	1	9
6. Supplemental Nutrition Assistance Program (SNAP, also known as food stamps, EBT)	5	4	3	2	1	9
7. Senior Farmers Market Nutrition Program (SFMNP)	5	4	3	2	1	9
8. Commodity Supplemental Food Program (CSFP) -- Monthly USDA food box	5	4	3	2	1	9
9. Expanded Food and Nutrition Education Program (EFNEP) -- hands on meal preparation class	5	4	3	2	1	9

12. If you participate in any food or nutrition programs, why do you participate?	Strongly Agree	Agree	Not Sure	Disagree	Strongly Disagree	N/A
1. To help make my food budget stretch further	5	4	3	2	1	9
2. To make sure I can pay all my bills each month	5	4	3	2	1	9
3. To supplement the food I purchase at grocery stores and restaurants	5	4	3	2	1	9
4. To socialize with people	5	4	3	2	1	9
5. To make sure I eat healthier foods	5	4	3	2	1	9
6. Someone enrolled me in the program (friend, family member, social worker, home health aide)	5	4	3	2	1	9
7. To make meal time less stressful	5	4	3	2	1	9
8. It is convenient or easy to participate	5	4	3	2	1	9

13. Over the last year, how often were you worried about not having enough food to eat?

____(1) Always ____ (2) Frequently ____ (3) Sometimes ____ (4) Rarely ____ (5) Never

14. Housing. Do you own or rent your home?

____ (1) Own [Answer Q14a.] ____ (2) Rent ____ (3) Other: _____

14a. Do you have a mortgage? ____ (1) Yes ____ (2) No ____ (3) Not Sure

15. How important are the following...	Very Important	Somewhat Important	Not That Important	Not Important at All
1. How important is it to you to be able to remain in your home as you age?	4	3	2	1
2. How important is it to you to be able to remain in your neighborhood as you age?	4	3	2	1

16. What percentage of your monthly household income do you spend on your housing expenses, including utilities?

____ (1) Less than 30% ____ (2) 30% to 50% ____ (3) 50% or more

17. Do you have concerns about your ability to pay your rent, mortgage, or utilities?

____ (1) Yes ____ (2) No ____ (9) Don't know

18. Please answer the following questions by circling either "Yes" or "No."		
1. Are you physically able to maintain the inside of your home?	Yes	No
2. Do you have others help you maintain the inside of your home?	Yes	No
3. Are you able to afford your indoor home maintenance?	Yes	No
4. Are you physically able to maintain the outside of your home?	Yes	No
5. Do you have others help you maintain the outside of your home?	Yes	No
6. Are you able to afford your outdoor home maintenance?	Yes	No

19. Does your home have any of the following? [Check all that apply.]

- ☐ (1) Accessible entryway (zero step entry or ramp)
 ☐ (3) First floor bedroom
☐ (2) First floor bathroom
 ☐ (4) First floor laundry

20. Please answer each of the following.			
1. I understand the benefits of the Homestead Exemption Program.	Yes	No	Don't Know
2. I know how to access the Homestead Exemption Program.	Yes	No	Don't Know

Emergency Preparedness. The Federal Emergency Management Agency (FEMA) recommends that all residents have on hand at least a 3-day supply of items necessary to sustain life during an emergency, including food, water, clothing, flashlights, medicine, etc.

21. Based on these guidelines, are you prepared for an emergency? ☐ (1) Yes ☐ (2) No ☐ (9) Don't know

22. Do you have the following items in your home?			
1. Working smoke detector(s)	Yes	No	Don't Know
2. Working carbon monoxide detector(s)	Yes	No	Don't Know
3. Working air-conditioning	Yes	No	Don't Know
4. Alternative source of electric power (generator, solar, etc.)	Yes	No	Don't Know

23. Have weather events like extreme heat, power outages, or flooding prevented you from any of the following?			
1. Getting to a health-related appointment	Yes	No	Don't Know
2. Getting medicine	Yes	No	Don't Know
3. Getting to work or volunteer service	Yes	No	Don't Know
4. Getting to a community event or worship service	Yes	No	Don't Know
5. Getting to a family member or friend	Yes	No	Don't Know
6. Remaining in your home	Yes	No	Don't Know

24. **Health and Well-Being.** How would you rate your overall health?

- ☐ (1) Excellent
 ☐ (2) Very good
 ☐ (3) Good
 ☐ (4) Fair
 ☐ (5) Poor

25. Do you have a primary care provider (general doctor or family doctor)?

- ☐ (1) Yes
 ☐ (2) No
 ☐ (3) Not Sure

26. How often do you engage in some form of physical exercise (like walking, biking, sports, stretching)?

- ☐ (1) Several times a week
 ☐ (3) Once or twice a month
 ☐ (5) Rarely or never
☐ (2) About once a week
 ☐ (4) Less than once a month

27. Have you fallen in the last 6 months? ☐ (1) Yes ☐ (2) No

28. What is the probability that you will fall in the next few months? ☐ (1) High ☐ (2) Medium ☐ (3) Low

29. Do you skip necessary medications due to high cost?

____(1) Always ____ (2) Frequently ____ (3) Sometimes ____ (4) Rarely ____ (5) Never

30. How often do you need physical assistance with the following?	Always Need Help	Sometimes Need Help	Never Need Help
1. Shopping for groceries, clothing, or other necessities	3	2	1
2. Completing housework, e.g., keeping your home clean and organized	3	2	1
3. Managing money and paying the bills	3	2	1
4. Taking medications as prescribed	3	2	1
5. Scheduling and attending appointments	3	2	1
6. Bathing and dressing yourself	3	2	1
7. Moving from one room to another within your home	3	2	1
8. Preparing food for yourself	3	2	1

31. Outdoor Spaces and Buildings. How would you rate your community as a place for people to live as they age?

____(1) Excellent ____ (2) Good ____ (3) Moderate ____ (4) Poor ____ (5) Very poor

32. How would you rate your community on the following?	Excellent	Good	Moderate	Poor	Very Poor
01. Parks within walking distance of your home	5	4	3	2	1
02. Public buildings and facilities (e.g., library, community center) that are accessible to people of different physical abilities	5	4	3	2	1
03. Public restrooms	5	4	3	2	1
04. Crosswalks with signals	5	4	3	2	1
05. Crosswalks with adequate count down timers	5	4	3	2	1
06. Places to sit or rest	5	4	3	2	1
07. Well shaded streets and walkways	5	4	3	2	1
08. Well-lit streets and walkways	5	4	3	2	1
09. Ramps to enter buildings or buildings with zero-step entry	5	4	3	2	1
10. Sidewalks	5	4	3	2	1
11. Sidewalks that are in good condition	5	4	3	2	1
12. Free drinking water	5	4	3	2	1

33. Respect, Inclusion, and Participation. Please indicate your level of agreement with the following statements.	Strongly Agree	Agree	Not Sure	Disagree	Strongly Disagree
1. There are negative stereotypes about older adults	5	4	3	2	1
2. Due to my age, my ideas and opinions are valued by local decision-makers	5	4	3	2	1

34. Do any of the following reasons prevent you from going to activities or events more often? [Check all that apply.]

____ (1) Not enough time ____ (6) Not interested
 ____ (2) Issues with transportation ____ (7) Too expensive
 ____ (3) Lack of awareness ____ (8) Lack of cultural inclusivity (a sense of feeling welcomed)
 ____ (4) Language barriers ____ (9) Other: _____
 ____ (5) Physically unable to attend

35. How often do you participate in activities outside of your home, such as social events or religious services?

____ (1) Daily or multiple times per week ____ (3) About once a month ____ (5) Rarely or never
 ____ (2) Once a week ____ (4) A few times a year

36. How often do you feel the following?	Often	Some of the Time	Hardly Ever
1. How often do you feel that you lack companionship?	3	2	1
2. How often do you feel isolated from others?	3	2	1
3. How often do you feel left out?	3	2	1

37. What is your preferred language when referring to yourself or someone else over the age of 60?

- ☐ (01) Elder ☐ (05) Older Person ☐ (09) Senior Citizen
☐ (02) Elderly ☐ (06) Person Over 60 ☐ (10) Other: _____
☐ (03) Old Person ☐ (07) People in their 60s/70s/80s
☐ (04) Older Adult ☐ (08) Senior

38. Family. Considering the people to whom you are related by birth, marriage, adoption, etc., please answer the following questions.	Nine or More	Five to Eight	Two to Four	One	None
1. How many relatives do you see or hear from at least once a month?	9+	5-8	2-4	1	0
2. How many relatives do you feel at ease with that you can talk about private matters?	9+	5-8	2-4	1	0
3. How many relatives do you feel close to such that you could call on them for help?	9+	5-8	2-4	1	0

39. Friendships. Considering all your friends, including those who live in your neighborhood, please answer the following questions.	Nine or More	Five to Eight	Two to Four	One	None
1. How many of your friends do you see or hear from at least once a month?	9+	5-8	2-4	1	0
2. How many friends do you feel at ease with that you can talk about private matters?	9+	5-8	2-4	1	0
3. How many friends do you feel close to such that you could call on them for help?	9+	5-8	2-4	1	0

40. Please indicate your level of agreement with the following statements.	Strongly Agree	Agree	Not Sure	Disagree	Strongly Disagree
1. I feel safe in my home	5	4	3	2	1
2. I feel safe in my neighborhood	5	4	3	2	1

Caregiving. A caregiver is someone who is not paid to provide care for someone else, such as a family member or friend.

41. Are you currently a caregiver? ☐ (1) Yes [Answer Q41a-c.] ☐ (2) No ☐ (9) Don't know

41a. Who do you care for? [Check all that apply.]

- ☐ (1) Spouse ☐ (4) Grandparent ☐ (7) Neighbor
☐ (2) Adult child ☐ (5) Sibling ☐ (8) Friend
☐ (3) Parent ☐ (6) Other family relative ☐ (9) Grandchildren

41b. Does the person you are caring for have dementia?

- ☐ (1) Yes ☐ (2) No ☐ (3) Maybe ☐ (9) Don't know

41c. Overall, how burdened (stressed) do you feel in caring for your family member or friend?

- ☐ (1) Not at all ☐ (2) A little ☐ (3) Moderately ☐ (4) Quite a bit ☐ (5) Extremely

42. Employment and Volunteerism. What is your employment status? [Check all that apply.]

- ☐ (1) Employed full-time ☐ (4) Unemployed but seeking work ☐ (7) Retired and not seeking work
☐ (2) Employed part-time ☐ (5) Enrolled in a work training program ☐ (8) Disabled and unable to work
☐ (3) Self-employed ☐ (6) Retired and seeking work

43. If you are employed or seeking employment, what are the main reasons for you continuing to work? [Check all that apply.]

- ☐ (1) I want to retire, but need to keep working to get health insurance ☐ (5) I do not want to retire
☐ (2) I want to retire, but cannot afford to ☐ (6) Other: _____
☐ (3) I find work rewarding ☐ (7) I'm not employed or seeking employment
☐ (4) I have professional achievements I want to reach

44. If currently seeking employment, have you experienced any of the following? [Check all that apply.]

- ☐ (01) The jobs that are available do not match my skills or experience
 ☐ (06) I have difficulty with application processes
- ☐ (02) I am overqualified
 ☐ (07) Health issues make finding or keeping a job a challenge
- ☐ (03) I struggle with technology used in the workplace
 ☐ (08) I need to be retrained to qualify for jobs
- ☐ (04) Employers will not hire me because of my age
 ☐ (09) I do not know how to find available job
- ☐ (05) Transportation is a barrier
 ☐ (10) I am not seeking employment

45. Do you volunteer? ☐ (1) Yes ☐ (2) No**Demographics****46. What year were you born? _____****47. What is your zip code? _____****48. What county do you live in?**

- ☐ (1) Franklin
 ☐ (4) Fayette
 ☐ (7) Pickaway
- ☐ (2) Delaware
 ☐ (5) Licking
 ☐ (8) Union
- ☐ (3) Fairfield
 ☐ (6) Madison
 ☐ (9) Other: _____

49. What is your race?

- ☐ (01) Asian/Pacific Islander
 ☐ (04) White/Caucasian
 ☐ (99) Other: _____
- ☐ (02) Black/African American
 ☐ (05) Hispanic/Latino
- ☐ (03) Native American
 ☐ (88) Prefer not to answer

50. What is your main source of income?

- ☐ (1) Social Security
 ☐ (6) 401(k)/403(b)
- ☐ (2) Wages from work
 ☐ (7) Savings/Investments/Roth IRA
- ☐ (3) Supplemental Security Income (SSI)
 ☐ (8) State retirement plan (OPERS/STRS etc.)
- ☐ (4) Social Security Disability Insurance (SSDI)
 ☐ (9) Other: _____
- ☐ (5) Traditional or private pension

51. What was your household income last year?

- ☐ (1) Under \$10,000
 ☐ (4) \$40,000 - \$59,999
 ☐ (7) \$100,000+
- ☐ (2) \$10,000 - \$24,999
 ☐ (5) \$60,000 - \$74,999
 ☐ (8) Prefer not to answer
- ☐ (3) \$25,000 - \$39,999
 ☐ (6) \$75,000 - \$99,999

52. What is the highest level of education you completed?

- ☐ (1) No high school diploma
 ☐ (3) Some college, no degree
 ☐ (5) Bachelor's degree
- ☐ (2) High school diploma or GED
 ☐ (4) Associate's degree
 ☐ (6) Graduate or professional degree

53. Who lives in your household? [Check all that apply.]

- ☐ (1) My spouse or partner
 ☐ (3) My grandchildren
 ☐ (5) Non-relative or friend
- ☐ (2) My children
 ☐ (4) Other relatives
 ☐ (6) I live alone

54. What language(s) are primarily spoken in your home? [Check all that apply.]

- ☐ (1) English
 ☐ (4) Nepali
 ☐ (7) Russian
- ☐ (2) Spanish
 ☐ (5) Khmer
 ☐ (8) American Sign Language (ASL)
- ☐ (3) Chinese (e.g., Mandarin, Cantonese)
 ☐ (6) Somali
 ☐ (9) Other: _____

55. Did you immigrate to this country?

____(1) Yes [Answer Q55a.] ____ (2) No ____ (3) Prefer not to answer ____ (9) Don't know

55a. How old were you when you immigrated? _____ years

56. Are you a veteran? ____ (1) Yes ____ (2) No

57. What is your marital status? ____ (1) Single ____ (2) Married ____ (3) Divorced ____ (4) Widowed

58. What is your gender identity?

____ (1) Man ____ (3) Trans man or Trans woman ____ (5) Other: _____
____ (2) Woman ____ (4) Non-binary

59. What is your sexual orientation?

____ (1) Heterosexual/Straight ____ (3) Lesbian ____ (5) Other: _____
____ (2) Gay ____ (4) Bisexual ____ (6) Prefer not to answer

60. Comment. What else would you like to share?

This concludes the survey. Thank you for your time!

Please return your completed survey in the enclosed return-reply envelope addressed to:
ETC Institute, 725 W. Frontier Circle, Olathe, KS 66061

Your responses will remain completely confidential. The information to the right will ONLY be used to help identify the level of need in your area. Thank you!

2021

Central Ohio Regional Assessment on Aging Survey

Open-Ended Comments

Presented to the
Central Ohio Area Agency on Aging,
Franklin County Office on Aging,
and the Age-Friendly Innovation Center

December 2021





Q10. Would any of the following reasons prevent you from seeking any of the services listed in Question 9?

Q10-10. Other

- At this point I believe my family and friends will be instrumental in making sure my needs will be met.
- Depend on family members
- Do not want different people in and out of my home...COVID concerns.
- Do not want strangers to know my business.
- Family helps.
- By federal eligibility guides, I do not qualify. Only \$100.00 over income. Very disappointed.
- Friends and family would cover.
- Have not considered that necessary.
- Health is still very good.
- Healthy and competent at 57. Not sure that Worthington has any benefits for those over fifty and under retirement age.
- Hoping I will not need.
- I currently live with my granddaughter; she fulfills most of the services listed above. I do not live alone, she does have a job, so she is not always able to provide transportation for medical appointments.
- I have a son who currently takes care of all my needs, particularly the ones listed above.
- I have attempted to get assistance with housecleaning, but these companies are very short-staffed because of the pandemic.
- I have family who can assist.
- I like to care for myself.
- I live in an assisted living facility. They are or can meet all my needs.
- I still work outside my home, and I do not really need these services right now. At the rate I am going, it will be another ten years before I apply for them. I believe God will continue keeping me healthy.
- I take care of myself and my wife. That's my responsibility.
- People need to take responsibility for themselves unless they cannot otherwise survive.
- I want to remain as independent as possible.
- I would be embarrassed for other people to see me use these services.
- I would move to assisted living service if I would have a stroke, fall, or be unable to be independent.
- I would not hesitate to apply for these services when I might need them. I do believe I would qualify for them.
- If/when I need these services I will apply.

Central Ohio Regional Assessment on Aging Survey (2021)

Open-Ended Comments



- In the past I have asked for help cleaning up my house I was on the waiting list for four to five months and still did not have anyone to come help me clean this service is incompetent two seniors.
- Not ready for help.
- Not ready for this yet.
- So far, I am independent. I drive, shop, cook, etc. I do use the service to prepare my medical, dental insurances every year. Cheryl Stockwell is well knowledgeable in helping me prepare for all the new changes in the above.
- So far, I can provide all services listed for myself.
- So many times, these service people have different "agendas" from what the social worker planned. I am being asked for unnecessary information which would put me at risk. I had a call button from Franklin County at the caseworker's insistence. They ended up charging me for it and it was an unnecessary service to start with. I explained my insurance company provides those for free. At the time I had never applied for one from them. Well, I have one from my insurance company now and it seems fine. I can get \$250 in over-the-counter medical supplies from my insurance company too. I got a phone call from them a few months ago; I was given a number that I can call 3 days before I need transportation to the doctor's office. They will take me home from the office too, I was told. I have not used that number yet; I do not see it in the company insurance book as a service! I do want to try it though. Many services you provide are given by my advantage plan.
- Still able to do these things.
- The people I have dealt with were not helpful and did not explain things. Trying to get aid/care for my mother.
- Would depend on need from outside family and friends.
- Would pay for private services



Q14. Do you own or rent your home?

Q14-3. Other

- I live in independent living in a continuing care community.
- Family-owned condominium that I am permitted to live in.
- I live in a facility where I "bought" the apartment and pay a monthly fee; however, on my death, apartment remains with facility.
- I live in a family-owned condominium in my mother's name.
- I live in a retirement community.
- I live in a senior residence.
- I live in independent living in a senior facility.
- I live with my daughter, her husband and their two children.
- I live with my daughter. She is my caregiver.
- I live with my son in his home which he owns.
- I live with others.
- I am living with my son, paying rent while I move up in a senior apartment list.
- Independent living in a retirement facility.
- Live in a congregate care facility.
- Live in a life planned community in independent living.
- Live in a retirement community.
- Live in a retirement community.
- Live in a retirement community.
- Live with cousin.
- Live with family.
- Live with family.
- Live with family.
- Live with homeowner.
- Live with my daughter.
- Live with my daughter.
- Live with my son & daughter in-law.
- Live with my son, he owns the home.
- Live with son.
- Live with son.
- Lives with son.
- Living with our daughter and her family in a mother/daughter suite.
- Mobile home.
- My daughter owns our home.
- Senior continuum living community.

Q34. Do any of the following reasons prevent you from going to activities or events more often?

Q34-9. Other

- [illegible]

Central Ohio Regional Assessment on Aging Survey (2021)

Open-Ended Comments



- COVID 19.
- COVID 19.
- Dates we do not have the energy. Not sure of our steps. Sometimes too crowded. We are to slow moving.
- Depression, hard to see at night.
- Dialysis Treatments Monday Wednesday and Friday.
- Difficult to drive at night.
- Do not drive after dark so only attend daytime events.
- Do not drive at night.
- Do not go out alone at night without a ride.
- Do not drive at night.
- Fear of violence; fear of COVID-19.
- Feeling welcome and included.
- Few to none in the area.
- Getting to farmer markets during the summer without having to call a taxi to and from the location.
- Going with someone.
- Health of spouse.
- Hot weather for outside events.
- I am a full-time caregiver for my spouse.
- I do what I like to do the American legion my church and friends.
- I do not like to drive after dark.
- I get to the number of events I choose to attend.
- I have a physically impaired adult child and often unable to secure care coverage.
- I have intense pain sometimes.
- Just do not.
- Lack of companionship, not wishing to attend events alone.
- Lack of parking.
- Money.
- Most keyed to young people.
- My emotional/mental health holds me back from joining in even though I would really like to.
- My husband needs my help.
- My partner's physical issues -- hearing, walking, easily tired, and so on.
- My spouse is much more limited than I.
- My spouse is not interested, and I do not always like to go alone.
- My wife had a stroke a month ago. She needs 24-hour care, and I am her caregiver.
- Not interested.
- Not interested.
- Not interested.

Central Ohio Regional Assessment on Aging Survey (2021)

Open-Ended Comments



- Not interested.
- Not wanting to contract or spread COVID 19 or its mutations keeps me from attending any indoor and most outdoor social events.
- Often parking is not close enough to actual event. Unable to walk long distances.
- Often unaware of activity until either moment before it starts, or a mention on news AFTER the event, useless.
- Only one place and it is always too full.
- Other is safety due to pandemic. On transportation where I live there is no bus service close enough. And on too expensive I mean music tickets and they are too difficult to buy - scalpers buy them out and they go on sale when we are at work.
- Pandemic.
- Pandemic.
- Parking far from venue.
- Parking, and lighting around parking, safety.
- People that will not wear mask.
- Potential COVID-19 exposure is keeping me home now. Normally very active, going to library, parks, etc. Participating in 5K walks and other activities.
- Public health risks, particularly COVID-19.
- Refusal of some to wear masks.
- Relative new resident. Not familiar with the city & locations of events.
- Sadly, COVID makes this question difficult to answer.
- Social distancing.
- Spouse is handicapped.
- Stay away from a lot of events because of COVID.
- The COVID-19 pandemic lockdowns, and then the failure of many citizens to get vaccinated and to wear masks indoors.
- The need to get cleaned up, dressed, and drive into town for an event.
- Time of day conflicts with work.
- Too far away.
- Too busy maintaining the house/yard.
- Too crowded.
- Too crowded so worry about a fall.
- Too many steps.
- Too much crime.
- Usually too tired.
- Walking not good, use walker.
- We are limiting activities that we can feel are COVID safe.
- Weakened immune system means avoiding certain places, events. COVID low vaccine rate makes it impossible to attend Mass, go to library or museums, theatre etc.



Q37. What is your preferred language when referring to yourself or someone else over the age of sixty?

Q37-10. Other

- Fifty plus person.
- Adult.
- By my name, grandma, or ma'am.
- Citizen.
- Citizen or Seasoned Citizen.
- Depends on the person.
- Do not understand the need for a label. I do not like some of the more derivative names such as ""boomer"" but the older I become, the less old I feel. Guess Senior is okay or more mature.
- Experienced.
- Experienced.
- Granny.
- I might refer to someone as "older" but not connected to person or adult.
- I prefer to not have any such label.
- I am OK being called "old".
- Just by my name.
- Mature.
- Mature.
- Mature adult.
- Mature adult.
- Mature adult.
- Mature person.
- Mr./Mrs./Miss.
- Old man.
- Old guy.
- Old guy.
- Old guy.
- Old guy.
- Old guy.
- Old person.
- Person.
- Person.
- Person.
- Person.
- Person.
- Seasonal.

Central Ohio Regional Assessment on Aging Survey (2021)

Open-Ended Comments



- Seasoned.
- Seasoned.
- Seasoned adult.
- Simply my name.
- Vintage.
- Well-seasoned person.
- Young fella.

Q43. If you are employed or seeking employment, what are the main reasons for you continuing to work?

Q43-6. Other

- A reason to interact with others.
- Always open to new investments that require work. I still maintain property I own.
- Benefits.
- Enjoy dog sitting.
- Have not reached retirement age.
- I am not old enough to receive my full social security benefits.
- I am not yet eligible to retire.
- I am too young to retire, need health insurance.
- I continue to work to pay my bills and to save for my retirement and for my children's college expenses. Retirement is not yet on the horizon.
- I enjoy the people I work with.
- I enjoy what I do and enjoy the interaction with people.
- I need the extra money.
- I retire at the end of 2021.
- I want to remain relevant.
- I will be working for a couple more years. I have an expected retirement date and I am on the path to achieve that goal.
- I am not ready to retire and need to work to help support my family.
- Money.
- Need the income.
- Need to supplement income.
- Not eligible to retire yet.
- Not old enough to retire.
- Not old enough to retire.
- Not old enough to retire.
- Not old enough to retire.
- Not old enough to retire.
- Not old enough to retire.
- Pay taxes.

Central Ohio Regional Assessment on Aging Survey (2021)

Open-Ended Comments



- Planning to retire 2022.
- Retiring next year - had weddings to pay for before retiring.
- Retiring soon.
- Something to do.
- Spending money.
- STAY ACTIVE.
- To pay bills.
- Volunteer.

Q60. What else would you like to share?



Central Ohio Regional Assessment on Aging Survey (2021)

Open-Ended Comments



- A little annoyance: I do not like to be called honey, sweetie or dear by clerks etc. I would like to see my community offer transportation for individuals as needed and occasionally offer help with home maintenance. More single level homes for seniors, in clusters would be helpful for aging in place.
- A need for better communication about social services in the community and how to access them.
- A very important item for aging is reliable affordable frequent public transportation including buses, light rail, which discourages car-dependent suburban sprawl in favor of urban, walkable neighborhoods with basic amenities like grocery stores, pharmacies, retail shopping etc.
- Admire the job central area agency is doing. It is a great help to many. Would love the travel trips to return while i am able to participate. Good job.
- All central Ohio (especially Worthington) needs better sidewalks. Better means wider sidewalks with no cracks or offset and better lighting. The Olentangy Trail needs to provide great access to cleaner and more frequent porta potties. The bridges on the Olentangy Trail are old and very slippery when wet. They need to be replaced. They are not very safe.
- As a retiree, I feel we should not have to pay school taxes. We moved from Cobb County Georgia, and we did not have to pay school taxes.
- Bike paths are needed.
- Columbus and surrounding areas really need a few programs that address transportation. I work for a senior center and that is one thing we do not provide that has a real need. Trans to our center, to their doctors or to social events.
- Columbus claims to help those with low income, but it is difficult to get that if at all. Example- new roof- gutters, etc.
- Currently I am an active, healthy person. As parents age I see a desperate need for elderly care services, including transportation, in-home care giving, better medical care, etc.
- Delaware county has levy that provides great services to seniors.
- Delaware County source point is where I volunteer, and it is great for our senior citizens.
- Do not have anyone to call for repairs, painting, my refrigerator is not working and afraid to call someone on Angie list or other to fix it. Need help buying large dollar items, someone to be with me for deliveries, repairs. Need legal advice for executor, wills, funeral, do not have any family, friends to ask. Someone trustworthy to call for advice when needed.
- Due to the pandemic and COVID restrictions makes it hard on people. I live alone and choose to stay isolated so that I will continue to stay healthy.
- Fear of COVID has limited me from attending gym and volunteer work.
- Finding services for the elderly is very complicated and not centralized.
- Food stamps i received are \$20 per month. What can that feed?
- Franklin Co. Office on aging has been very helpful to us since my husband had a heart attack 6 yrs. Ago. I thank God for them!
- Glad i could help.

Central Ohio Regional Assessment on Aging Survey (2021)

Open-Ended Comments



- Good survey.
- Good survey! I answered assuming my wife stays healthy so very independent now but could need help in the future.
- Government-induced inflation is robbing senior citizens (and all people) of their purchasing power. Printing money, no matter how noble the cause, only results in more poverty for more people.
- Greatest Fear -- loss of independence. Greatest Irritation -- uninvited intrusions into our privacy (junk phone calls, threats to the peace and quiet of our neighborhood from development, etc.) Do You Have Pets? -- yes, a very active Australian Shepherd. Do you need Help with your Pets? -- In future (see City of Chicago pet services for elders).
- Growing older is sometimes very lonely.
- Have a blessed day.
- Having taken the survey, I feel very fortunate.
- Having trouble finding people or agencies that will install railings, repair interior/exterior, clean up yard for free or in a timely manner. MORPC is supposed to retrofit my bathroom to fit wheelchair, but their time schedule is nonexistent and when pressed response is up to 5 yrs. I will be dead by then.
- Health Insurance- I will not be eligible for Medicare until I am 65, 2025-6.
- Help with pets, handyman repairs for emergencies. Public transportation is very limited. No set routes only by appt. Weeks in advance. Visiting public nurse would be welcome or mobile unit for simple checkups, BP, nail trim, nutrition, and med guidance.
- Home services within our county will still be helping with seniors. I was very blessed to have worked in home services at LCAP for over 23 years.
- Hope this info will be helpful to the agencies.
- I am fifty-eight, and cannot imagine calling myself a senior citizen, elderly, or older adult.
- I am fifty-nine, in good health, and plan to work for as long as I can. About 10 more years.
- I am a Christian.
- I am a grandmother and great great grandma.
- I am at the younger end of the target of this survey. My observations of my friends and loved ones suggest that once one loses the ability to drive oneself, this community becomes a much less friendly and accommodating place to live. We do not have good public transportation.
- I am bedbound and must have an ambulance service take me to all appointments. I have serious issues being able to get any service to transport me and usually must cancel my appointments because of lack of transportation.
- I am currently working a contractual job that could end when COVID-19 is under control. I live with two small dogs. I need help with cleaning my house and with cutting my lawn.
- I am disabled and in much pain. This limits my capabilities.
- I am divorced. Was married 9.5 years to an abuser. Since we were not married for 10 years, I am not entitled to his Social Security. I had children who were not safe so did not stay

Central Ohio Regional Assessment on Aging Survey (2021)

Open-Ended Comments



married. He died in January of 2021. I do not know whether the correct answer is Divorced or Widowed.

- I am frustrated every time I do research I'm trying to find help for myself I also helped my friends try to find help since the pandemic I am home by myself all the time I can't attend church I have a compromised immune system I like to work out at the gym but I'm afraid because of COVID and I'm totally isolated with my three cats I do have two friends but one of them works and the other one has disability problem I desperately need somebody to come in and help clean my home I have been paying someone around \$80 a month and I can't afford that I am also responsible for upkeep on the outside of my home I just time to spend \$100 to have it power washed because I have a mobile home trailer park requires it now it's full I have to have somebody come and blow the leaves four or five times before winter hits and that's \$25 a time that I can't afford not seeing any handiwork that I may have to have done or repairs I may have to have. I love you have a blessed day
- I am fully prepared to take advantage of any available programs.
- I am healthy except arthritis that impacts my mobility. I would be more active if public spaces had frequent places to sit and rest. It is cheap to add benches and I know many would walk more and be more active if they could take frequent breaks.
- I am glad you are asking these questions. I am temporarily disabled and plan to return to work following rehab. I have worked with older adults for about 40 years. I am surprised how people can be kind or unkind when I meet them while in a wheelchair.
- I am looking for a sedentary part time job.
- I am not on medications
- I am ok now but If I could not drive, I am concerned that there is no public transportation in my neighborhood.
- I am the third oldest of nine children and all of us are still living and are very close. Thank You all for the wide range of services you provide to us, senior citizens, here in Columbus. All or Your services are very much needed and are appreciated!
- I am very blessed (and my wife) at this time but who knows what the future may hold. This has given me much to think about. Thank you
- I am worried that when I plan to retire at 67, I will no longer be able to stay in my home with social security and what I have saved in my 403b. I still have a mortgage on my home and may need to hire help to maintain the yard and other home maintenance on a fixed income. There do not seem to be many affordable options for ranch style condominiums in the area if I decide to sell/move, and I am not sure about living in an apartment as I have pets and do rescue work with local animal rescues. I applied for the Homestead Exemption not knowing that there was an income level of \$33-34K stipulated. I have friends who have had the exemption for years and never were asked about their income (and they make more than the \$33-\$34K) - so I assume that ruling has been a recent addition, which is disappointing.

Central Ohio Regional Assessment on Aging Survey (2021)

Open-Ended Comments



- Columbus is attempting to improve aging services and beginning to make a difference, but with the increase in the number of older adults, better communication about not only services, but the opportunity to serve, is essential.
- I belong to several organizations and volunteer my time.
- I desire public transportation for seniors.
- I did not realize there is an Age-Friendly Worthington Organization. We are both still fit and able to live independently in our home, but we want to know more about services/options available to help us age in place for as long as possible.
- I do childcare for supplement income. Family is dysfunctional and do not communicate. My childcare parents have more to do with me than bio family. I love going places but hate going alone. Most activities for people my age is in the daytime hours. I need things to go to and happen on evenings and weekends.
- I do not drive at night but get around fine in the daytime.
- I do not hear much about services for the disabled senior. If they do exist, they need to be promoted. If they do not, then they need to be developed.
- I do not feel old—when i talk to friends and say, "someone is old", i stop and think "hey, that is me!" have a great sense of humor—life can be fun! Thank you!
- I go to lunch with the retirees from the Fay County Health Department, where I worked for 30 yrs. As a RN, BSN, and have been retired for 21 years. Also, the Red Hat Club lunch and church circle each month (1x a month).
- I have a dog (Cooper) he helps keep me sane and I craft paper things also helps with the aloneness.
- I have a very high mortgage. How prices all going up will i be able to pay bills down the road. Moved from paid off home in Columbus to grove city to be close to son who looks after me. Had lots of stairs in old home that was beautiful on west side. Crime was moving in. Live here 44 years. Husband only made it one year.
- I have a wonderful family and support system that i thank God for every day.
- I have had to search for others. There are services for the rich that they pay for, services for poor that my taxes pay for. Little for the middle class. There is NO safe, affordable housing in Central Ohio. I must move from my home due to stairs. Homes where I might be comfortable living are at Least 250,000. Those of us in the middle class cannot afford that. Would like to move. Nowhere to do so.
- I have low vision, which causes me to wonder how long I can live alone. I have discussed with some family members. Computer is getting harder to use. I do not have a mobile phone because I cannot see to text or receive texts, see pictures, etc. I resent so many place requiring apps to access their services (ordering pizza, groceries, other items). Thank you for this opportunity to answer this questionnaire.
- I have mobility problems. I can only stand or walk for short periods of time. Cleaning the house takes a lot longer than it used to. I must sit down and rest more. We watch our

Central Ohio Regional Assessment on Aging Survey (2021)

Open-Ended Comments



grandkids after school until their parents get home. We have them 3 or 4 days a week in the summer and holidays.

- I hesitated to do this survey. My situation is nontypical. I doubt I will need any public services.
- I just feel old and irrelevant. Not a good feeling!
- I live in a retirement community (independent living -- and now you know where since you also have the zip code) and I find myself feeling that we are all in a 'gilded ghetto'. It is a nice place, we have services and pleasant staff, but we are more isolated from the community than I would like, and the community does not benefit from our knowledge, experience, and money. We, in turn, do not benefit from the new ideas and liveliness of younger people. The corporate bosses of our community feel that we are a captive audience. They can do whatever they want, and we will not or cannot move out - and if we do, there is always someone else with the interest and money to take our place. So, our local staff are very caring. The corporate staff give the impression of caring only about the bottom line, not the people they are supposed to be serving.
- I live in a rural area. Walking anywhere is not an option.
- I live in a very rural area, five miles from a village and ten miles from a town, so many of the questions do not apply to me. My son and his family are living with me temporarily due to loss of income during COVID. Normally I live alone and will again once they are settled.
- I live in an apartment in a retired senior center. I owned my apartment which I consider my home.
- I live in an independent living retirement community apartment. I must take some meals from the owner/operator of the apartment, but I take no meals from any public assistance source. My apartment supplies utility services, laundry in my apartment, back-up utility services in case of emergency, elevator to my floor, all exterior and some interior maintenance services, social activities.
- I live in Fayette County, 32 years. Just living in the US is blessed. I do not understand some people who complain about the US government. This is the best country on Earth.
- I live in the country so drive for most things. Right now, do not need services.
- I live in the country. That is why there are no sidewalks.
- I live in the outskirts of Fairfield County, and it is a rural area.
- I live with my daughter and her family. I have never gone to Senior Citizens Events to the pandemic. I moved here 2 years ago w my daughter from Springfield due to my health. I volunteered until I was unable. I miss all things I did I was a poll worker for over 10 years in Clark County. I would love to do that again here if it were in the BOE which is close for-me. I have a scooter as I cannot stand Long nor walk far. I am very social and miss all my friends in Springfield.
- I live with my daughter; she makes sure I have everything I need. If not for her I would be in serious trouble.

Central Ohio Regional Assessment on Aging Survey (2021)

Open-Ended Comments



- I lived in the country, since I can no longer drive, I had to move into town, no transportation is available.
- I love my little one floor home. It is very easy to live in. Also, I have my bathroom made safe for an old 90-year-old. Modern kitchen makes it easy to cook. In my yard is my pride and joy. I also do art. I love my freedom and hope i can stay in my home. I will be about 90 years old on March 17, 2022. I am blessed to be able to stay in my home.
- I may have missed this one, but my groceries and medications are delivered to my door.
- I missed the question on volunteering. I do volunteer at least twice a week.
- I moved her in January 2021 to be near my daughter, so she can take care of me.
- I need a homemaker to maintain my home.
- I need home repairs and upkeep, need referral or list for grass and snow removal. Do not qualify or no response from inquiries made for home repair and upkeep, as I do not have a Columbus zip code. Never hear back from (MOPRC) or whatever the Franklin County Agency states. Not Columbus but services for Franklin County.
- I never imagined getting old would be so painful.
- I own a dog.
- I recently signed up for Senior Options for medical transportation. I will have to limit my medical appointments because my income is just high enough for a co-pay. This sounds reasonable, but I need a lot of care and cannot afford my co-pay for transportation. Also, I had scheduled my first medical transportation for Oct 11, 2021, and the guy was a no-show. The provider was rude to me, prying, treated me like some old thing that does not matter. When I called to ask about my missing ride, he told me to reschedule my appointment, one 18 months overdue because of the pandemic and not easy to schedule. I am very disappointed, when we have a tax levy for senior services in Franklin County. I cannot afford the assisted grocery shopping, so will continue to give a friend of my daughter gas money to take me. This is disappointing, too. However, I know many seniors are in greater need.
- I recently turned fifty.
- I repatriated to the USA in 2001. So, I have immigrated twice. My career never recovered from working overseas.
- I see many challenges coming up in being able to remain in my home when we retire, mostly high property taxes and utility costs. Many will not get the homestead exemption because of income restrictions and that is not right for those that paid into school districts so many years and they will not be using them again. I live in an all-electric house built in the late seventies and the City of Westerville ended their "winter rate" for those and the rates are going up. Westerville also offers no senior discounts. We will be forced to move to Columbus or something more cost effective when we can retire.
- I spent time filling this out for you and when I got to the last page, I almost tore it up. I found the gender questions offensive. I do not think seniors think about the last two questions to be honest.

Central Ohio Regional Assessment on Aging Survey (2021)

Open-Ended Comments



- I still have a working brain but bad arthritis. I would like to work or volunteer more but see no advertising about how to do this when I need to mostly be dentary.
- I think 60-70 is young to get questions like these. Maybe just ask seventy and above.
- Our area needs more affordable housing for seniors when they want to downsize. They are building everywhere but they are \$300,000 plus homes.
- People rely too much on state and federal assistance. I was thought to take care of mine and myself.
- I thought the homestead exemption was automatic when owner-occupied. Is there something I am missing?
- I walk 2 to 4 hours a day in my neighborhood and NEVER see a police officer. I wonder what I would do if a real emergency came up. Fortunately, when I fell, breaking my hip recently, a person who lived nearby, came to my aid.
- I want to start going to the community center and find groups of people who are interested in music, art, storytelling, writing stories about our lives, and drawing pictures and painting pictures that tell of our life journeys.
- I want to work part time or remotely, I just never get a call for an interview. I have a BA in Political Science and a Master's degree in Public Administration and 104 hours toward my PhD in education.
- I was born a woman and I will continue to be a woman that is my gender I believe in God I am a Christian and I do not believe in going with somebody that is the same is me to each his own.
- I would like to see closed captions be strongly encouraged on all website's videos and such as YouTube.
- I wish I could go somewhere, like community center, and get help with technology.
- I wish the Veterans Service Commissions would talk with each other. Resourcing varies from vary to county.
- I wish your questions offered answers that acknowledged gay people, esp. Gay couples like my partner and me.
- I worry about who will take care of my pet if I die or am unable to. I also worry about medical insurance and affording healthcare if I retire.
- I would be happy to volunteer for a focus group or whatever else you need. However, I am a professor, ordained minister, public speaker, and author very interested in countering stereotypes and limitations on older adults as well as widespread lack of interest in their skills and experience. Our culture is very worshipful of youth and demeaning of age. We need to work together to counteract that.
- I would like to downsize from a four bedroom, two story house but there are very few options for downsizing and remaining in the community where I have lived for 45 years (Worthington).
- I would like to have Adult Daycare available in Union County.

Central Ohio Regional Assessment on Aging Survey (2021)

Open-Ended Comments



- I would like to move closer to my kids, they live in Delaware and Dublin OH. It is impossible to find affordable housing for Sr's there. I just need to be closer to them the older I get and pray I do not outlive my savings.
- I would like to see more crosswalks beyond the downtown center. At New England and High and 161 and High I think all way crossing would be a could idea. It is clearly safe and used in many towns and cities in busy areas. It decreases the time cars idle while waiting their turn and seniors have a shorter distance to walk if going diagonally. Cross walks need to be strictly monitored so cars do not move into the intersection when it is for pedestrians. Other states have strict laws and punishments for cars not waiting at a crosswalk
- I would like to see the City of Columbus install more outdoor pickleball courts. It is the fastest growing sport, and many older people play. Great way to stay active and socialize.
- I would love any valuable information to make my life better or easier.
- I would love to see more streetlights.
- I would say there is a need for hearing, eye, and dental care for seniors.
- I am lonely.
- If there are programs to help S.S. get home repairs or items needed, please let me know. I need a new range, I have no dryer, I desperately need new windows, new flooring, kitchen cabinets. I have vision/dental plan but cannot find a major medical plan due to costs. Feeling frustrated, stuck and alone. Sister also needs help, severe arthritis, walker bound.
- I am fifty-seven and very able to take care of myself. I am very active. My husband is fifty-two and very active.
- I am not tech but leaning. I love Worthington and colonial hills.
- In caring for my brother-in-law and serving my clients over the years, services provided for seniors are inconsistent and that in-home care providers do not show up at regular times and are not continuous providers.
- Regarding Q44 my husband is unemployed for a year and feels he cannot find a job because of his age.
- Insecure financially due to medical costs, co-pays, medications. After 64, my long-term disability stops. Do not know how I will live with under 1,000.00 per month.
- It is difficult to find help with vacuuming floors and mopping floors. I can dust and do some light housework, but it is difficult with physical balance issues. There should be some way to find a person to hire for housecleaning issues, without paying an arm and a leg.
- It is hard to face the fact that everything is harder to do as you age especially if you were very active. Everything begins to hurt so it is easier to just sit home then spend the energy and reserve to get dressed up and go out. You really must force yourself to do everything. Getting old is a lot harder than I thought it would be. Especially do not like the loss of balance and strength. I love my home, but the steps are getting harder and harder to do.
- It is lonely being old.
- Just sold my home, moved in July to a one floor plan home because of falling. Could not maintain inside or outside of my older home, neighbors were nosey but no help...I fell in the

Central Ohio Regional Assessment on Aging Survey (2021)

Open-Ended Comments



snow and almost froze after 45 min! The power chair came in 2020. Meals on wheels help but I can only eat so many TV dinners! I had one aid that cared but she is back in Ghana. Even before COVID the aides were horrible, like laying on my couch with croak's on while on their phone. I offered mask; they did not wear mask.

- Lack of good reliable transportation (public) in central Ohio is what will drive my husband and i away eventually. States like MN have higher taxes but far better programs for older adults. Ohio is increasingly backward in every way. When called upon to navigate state websites for friends, i find them to be glitchy and antiquated.
- Lack of stamina is sometimes a problem. There used to be a bus stop at the end of my street, but it was eliminated. If I must carry a lot, it is a real struggle to make it home from the bus.
- Legal services for elderly.
- Liberals are making life harder with all their freebies that are eating away at my hard-earned monies to live on.
- Limited activity due to constant pain and need for use of a device (cane). Poor short-term memory.
- Live isolated in the country. Worry some about future. No kids or grandkids. How will life be if lose spouse.
- Makes me sad and resent those social activities for the elderly in my area cost so much. Even joining the senior center has a cost. Cannot even go play cards or join a quilting group without being charged something. I would expect a charge to go on a trip or having a meal there.
- More income-based housing.
- Most of my answers are personality driven. I am married and my husband and I get around still pretty good. I feel if I were alone, I COULD ask for assistance, but feel like I would be embarrassed to ask for food, financial or mobility assistance.
- Most of questions on "home" are misleading. My "home" is where i reside even if rental. Most questions apply to homeowners not renters.
- Much of this was not appropriate for a 51 yr. old like me who is 15 yrs. Off retirement. Our local groups encouraged this for over fifties.... might revisit that.
- My answers re: activities ate pretty COVID. Since COVID I do not participate in any social activities. My entertainment is solely taking dogs to the park.
- My biggest hardship is no longer driving!! Having to depend on others to haul me around is such an inconvenience. I would be a lot more active if I drove. I love to just go shopping and meander thru the stores like Dollar General or Kohl's at my convenience. Or to run up and pick up some yarn and sewing needs. It would be fun to just not be held down with someone being with me. Most of the time they get fidgety and want to go. Using Uber is costing me an arm and a leg. They are OUTRAGEOUS!!!!
- My Caregiver needs some type of assistance in taking care of my needs. Need some type of help in hiring private help with the home and repairs - I cannot do R & M now.
- My community needs more streetlights and sidewalks. Senior transportation is not offered.

Central Ohio Regional Assessment on Aging Survey (2021)

Open-Ended Comments



- My income is 12,000. Nowhere near the twenty-four in this question. Also, transportation should be easier to access than it is. If I did not take the essential extra benefit with my insurance company, I would not be able to make my doctor appointments.
- My main concerns about aging are being able to stay in my home when i retire—due to financial issues.
- My mother is ninety-four. It is hard to shop for groceries for two households. It is hard to let her stay alone, yet she is active and strong, dresses herself, takes all her meds. And does meals. It is overwhelming being her only caregiver.
- My partner died this spring, and I have not been on my own in 35 years. I am not afraid to live alone with my pets, but I do have concerns about what would happen to them if I were not able to care for them. I do believe the city of Columbus targets older homeowners and tries to force them out based on anonymous calls to the city code enforcement department. This has happened to me and several of my friends. Last year I had to spend a huge amount of savings because of cosmetic work then city demanded (painted trim and shed, plus forced to cut a tree that may or may not be on my property. I could not afford a surveyor to find out, but the city inspector said she could tell just by ""eyeballing"" it.) The city did not care that the furnace died in March, and we were trying to find someone to replace it. I was only able to get a new furnace in the past month because my partner made me the beneficiary of his retirement fund's death benefit.
- Need for escort services for doctor's appointment.
- Need more Focus Group to discuss needs interest and health for specific populations like African Americans who feel overlooked.
- Need more S.S.I. a month.
- Not all retired people above the poverty level can afford to pay co-pays at the DR. We should get discounts on house insurance, car insurance, and the payments due. Everyone did not retire from working the same job for over 30 years, neither did they have a degree. Have you not noticed the cost of living is ridiculous, it is very hard for people to live on retired money unless they have a spouse, career, or had a job making 6 figures?
- Not enough affordable housing.
- Nothing; thanks for the survey.
- Our Pickaway Senior Center is very helpful and helps me stay active!
- Outside of house needs help, just cannot afford without some help.
- Part of my life includes volunteering. Seniors have many needs that change as their health changes. Knowing how to access needed services can be tricky for them.
- Pickaway County needs a private taxi service, but it would not be financially possible for the company. It would be nice to have a health shuttle — sponsored by Berger — to medical appointments.
- Please do something to make it easier to find out about programs and do something about the crime in the area.
- Please mail results/findings/actions.

Central Ohio Regional Assessment on Aging Survey (2021)

Open-Ended Comments



- Please share the results of this survey. Thank you.
- Presently we are doing well. Health problems are increasing so one never knows what the future holds. We appreciate the area agencies on Aging although we do not use this service. We may someday.
- Programs are usually running during the day which makes it impossible for us over fifty who are still working to participate.
- Property taxes are getting too high for seniors to stay in their homes. Several friends and I my age are going to have to be looking to move out of Delaware City because we will no longer afford to pay our taxes on our homes with a year or so.
- Property taxes are prohibitively high. I think about moving often.
- See that people get their coupons for produce during the summer. And fruit & produce boxes.
- Seniors need help in many ways but are often afraid that if they say anything they will find themselves forgotten in a nursing home. They feel they will have to give up their home and contents. It is hard for seniors to exist.
- Since the pandemic I have not been socializing as much as before, so no church, classes, visiting with family and friends, going to restaurants, etc. Before the pandemic I would do all the mentioned several times a week. It would be nice to have a neighborhood database for people to be able to recommend people that they had do work in their homes to do work, such as painters, repairs services, etc... I have been in this neighborhood for 38 years and until recently some people have not been taking care of their property or respecting other neighbors' property.
- Small places with small parcels of land as affordable places to live. I bet a lot of people my age would like that. My wife died this year and i must find another place to live that i can afford. I really hate to move but i must. Cannot find a nice place where i would like to go and can afford.
- Socialization is the most important factor for seniors to stay healthy, vibrant and self-confident.
- Sometimes it is hard to find information for seniors but with a bit of effort I can usually find what I need.
- Staying in Worthington is very important. One floor independent option (non-congregate) does not much exist.
- Stop with the multiple gender and sex questions already.
- Support groups to share concerns would be great!
- Survey is a good idea.
- Take care of Americans first.
- Thank heavens there are those looking after senior citizens. Thank you.
- Thank you for all services that I can use and or participate in.

Central Ohio Regional Assessment on Aging Survey (2021)

Open-Ended Comments



- Thank you for conducting this survey. It is difficult to find information on caring for the elderly, assisted living. Anything you can do to spread the word on available programs is appreciated.
- Thank you for taking interest in the aging. I am blessed with the benefits of my life's work in the railroad, national guard, and military. I share what i can with the Ohio food bank and St. Vincent de Paul.
- Thank you for taking the time to find ways to best care for senior citizens.
- Thank you for thinking about the needs of the elderly.
- Thank you for working to improve Worthington for older adults.
- Thank you for your concern.
- Thanks.
- Thanks.
- The community we live in has access to a metro park, great rec center and safe streets. There is no reason not to exercise. They provide senior transportation for appts.
- The only hurdle to aging & retirement while living in Worthington is property taxes. They are very high & not compatible with retirement income reductions. Particularly in a village with additional bonds.
- The property taxes in Gahanna are making it hard for the seniors to keep their homes, even with homestead exemption. Many people in my neighborhood are single women and home maintenance is harder and more expensive on a limited budget. Property taxes of 3400\$ a year with Social Security of \$24,000/ year, but where would I go? Apartments are expensive too in good, safe neighborhoods. Never married, so it is just my income. I help my 93-year-old mother by taking her to the grocery, doctor appointments and clean her house. She lives in the 43227 area, and she has heard gunshots at night! She does not want to move though. I retired at 62 to take care of mom after she had surgery from colon cancer, I was a nurse and it really messed up my retirement plans to collect social security early, but I did not feel there was any other option, she was very weak and needed to be taken care of, I love my mom!
- The timers accessing side streets to the main thoroughfare could be shortened, they are too long.
- The transportation from Senior Options is terrible.
- There are tons of mental/emotional issues to deal with even if you are healthy.
- There is a need for home care assistance.
- There is a tremendous lack of housing for disabled adults in Fairfield County, outside of nursing homes or assisted living. Needed are single homes one floor, handicap accessible for middle-aged adults who are handicapped/disabled and seeking to live independently.
- There is not enough information for elderly people to know what is available or for what they qualify. Most elderly think that the benefits they have will be taken away if they apply for new things.

Central Ohio Regional Assessment on Aging Survey (2021)

Open-Ended Comments



- There needs to be more support for people with physical disabilities (e.g., housekeeping services).
- There should be an aged-related cap to Dublin school taxes, or an age-related exemption of some amount, much more than the "up to \$600 homestead", WHICH IS NOT EVEN AVAILABLE ANYMORE-- unless you already had it PRIOR to it being ELIMINATED. Once I sell my home, I lose it. If I want to downsize house-wise or condo-wise in Dublin to lower my Dublin school taxes, the homestead exemption is not available anymore, and it is the one and ONLY relief I am getting from paying \$10,000 in Dublin school taxes. I am one of the people who will be leaving because of Dublin school tax. It is like Dublin does not want us. In addition to this, Dublin senior programs are a mystery, what are they? -- and I have been here for ten years. So, it is not like I am a burden to the community in any way shape or form. I am free cash to Dublin.
- These are good times for the USA the trouble is disinformation. cov19 would be gone if country had one policy not fifty states doing, they think wars are won as one this land of freedom would serve itself if the lies stopped.
- This is a great survey, but because it will hit primarily the independent older adult if done electronically, the situation of the older people in need will not likely be reflected.
- This survey is really designed for those that live in an urban or suburban area. I live in the country. The nearest neighbor is one-half mile away, so there is not really a "community" according to how the questions are worded. There are no streetlights, crosswalks, or public transportation. Asking a question about general living arrangement would have made this a more effective survey.
- This was a great survey and I hope that it helps many seniors that truly need help!
- Though I do not at this time have direct services from COAAA or Franklin County Office on Aging I am familiar with their work and have personally seen the positive impact of their programs. I support the continuation and expansion of programs for older adults in my community.
- Union County needs a Senior Center like Champaign County built.
- Very affordable apartments in nice areas for seniors. Should not be based on income unless income ceiling is raised.
- Very happy to live where I do.
- Very important that elders have a person-to-person communication on a regular basis for a variety of reasons.
- Very interesting set of questions.
- We have an adult child who is a quad. We have gone to great expense to make our home accessible including the installation of an elevator. We are very fortunate. We are dismayed at the new buildings (i.e., Apartments and planned apartments that are not accessible, roll-in showers, wider doorways and hallways, consideration to turning radii, etc.) Accessibility is more than just ramps, folks. Most people who develop mobility issues must leave our community for assisted living because that is their only option. I do not think there is one



new apartment complex that has apartments that my child could live in or even lived in by someone with a walker.

- We have just been living at Thurber Tower for five weeks. I intend to get more involved in the community in the future. I was fairly involved in my former community.
- We have multiple sources of income among the options offered. I did not see how to answer the question about the 'main' sources of income.
- We have no life insurance so if he dies before me, I will need to move out of the house and taxes would be too high.
- We have pets. One dog and three cats.
- We in Union County and Marysville and we are taken care of pretty good. Could use some more attention.
- We live in the country, many of the resources mentioned are not in our area.
- We moved to this community for the purpose of aging in place here. At this point, we are self-sufficient. We currently maintain a farm and this home, so we do not require services yet. Having cared for our elderly mothers, we know aging in our own home is key. Being close to excellent healthcare is most important.
- We participate in Village in the Ville.
- We personally know people nearby that are struggling and can use these types of services. Our country needs a better health care system that does not depend on everyone being employed until age 65.
- Why does someone's sexual orientation matter? Treat everyone equally and do not worry about who sleeps with who.
- Will be helpful to have a view of how political figures see Worthington as a place in which seniors can age in place, walk / easily get to groceries / libraries / parks in their immediate neighborhood, and have easy and convenient access via bus or the like to areas that are only now reachable by car within the Columbus metropolitan area.
- Worthington needs an actual stop light at Stafford and High, not a personal hybrid beacon. Stafford is the ONLY intersection on High between North Street and South Street (Old Worthington) without an actual stop light. The city's reasoning for not installing one is flawed despite the best efforts of citizens' research and desire.
- You all need to get info on what your agencies do to help people out there. And how to get in touch.



**Focus Groups of
Franklin County Senior Citizens
Report of Research Findings
*October 2021***

- ▶ Three in-person focus groups conducted on behalf of the Franklin County Office on Aging
- ▶ Held on October 27 and October 28, 2021
 - Group 1: Low-income people of color age 60+
 - Group 2: Religiously observant people of color age 60+
 - Group 3: African American men age 55+
- ▶ Focus groups were conducted by a professionally-trained moderator
 - Each focus group was approximately 90 minutes in length
- ▶ By design, focus groups are qualitative, not quantitative research, and are not designed to be statistically representative of any larger population
- ▶ Participants were asked to show proof of COVID-19 vaccination and wear masks for the duration of the discussion

- ▶ Key topics of conversation directed by the moderator's guide in each group included:
 - Aging in your community
 - Built home and community environment
 - Social environment
 - Services needed for aging and maintaining independence

Key Findings

- ▶ Older residents of Franklin County are aware of some available services to them, but generally recognize that there are gaps in their knowledge. Participants expressed desire for a single resource where they could be directed to the information they seek.
- ▶ Outreach is especially needed for the oldest residents who lack the ability or means to access the internet.
- ▶ Participants noted that socialization is key for the aging population, as are transportation and community centers to enable older residents to stay active and involved as they age.



**Group 1: Low-income
people of color age 60+**

Group 1 Profile

	Gender	Age	Ethnicity	Household Income	Education	Zip Code	Employment
Participant 1	Male	73	Black/African American	Less than \$30K	Postgraduate	43213	Retired
Participant 2	Male	60	Black/African American	\$30-50K	Some College	43203	Retired
Participant 3	Female	65	Black/African American	Less than \$30K	Some High School	43068	Retired
Participant 4	Male	73	Black/African American	\$30-50K	College Graduate	43227	Retired
Participant 5	Female	62	Black/African American	Less than \$30K	Some College	43211	Retired
Participant 6	Female	76	Black/African American	Less than \$30K	Some College	43203	Retired
Participant 7	Female	60	Black/African American	Less than \$30K	High School Graduate	43207	Homemaker

Group 1: Aging in Your Community

"I really like the community... It's nice and quiet and I like my neighbors."

"I'm so central to everything... I have a lot of different places that I can go and a lot of different things that I can do."

"There needs to be more things accessible... You've got to go all the way to Easton to do something."

"We have a lot of diversity."

"Lack of stimulation intellectually."

"I've seen the deterioration of all, pretty much all of the city and even some of the suburban neighborhoods. There are still a lot of positive environments out there, but because of gentrification, the city is sort of deteriorating."

- ▶ When asked about their communities, participants appreciated safety, quiet, and proximity to shops.
 - Participants valued access to grocery stores, shops, restaurants, and even the interstate, bus line, hotels, and the airport.
- ▶ Many felt connected to their neighbors and community and said it's been enjoyable to age in their area.
- ▶ Participants who haven't enjoyed aging cited lack of intellectual stimulation and the deterioration and gentrification of their neighborhoods.

Group 1: Physical Home Environment

- ▶ When it comes to personal homes, participants noted many aspects that would help older residents:
 - Ramps outside
 - Lighting (including night lights)
 - Carbon monoxide and smoke detectors
- ▶ Though stairs were recognized as unideal for the aging population, participants offered suggestions for how to make the best of a home with stairs, such as having railings on both sides or including amenities (bathroom, kitchen) on all floors.
- ▶ For apartments/condos, having washer/dryer in the unit, safe off-street parking, and numerous elevators would be helpful.

“Night lights. Making sure people are aware it’s not going to break the bank.”

“Ramps on the outside just to take you out the front door or back door.”

Group 1: Physical Community Environment

- ▶ Proximity to grocery stores and post offices in particular is important to participants.
- ▶ When it comes to traveling, participants wanted improved and increased sidewalks, streetlights, and speed bumps.
- ▶ Nearby parks are also beneficial and desired by participants.

"Traffic slowing in highly abused areas."

"City lights on streets... we need to light those areas because bad people don't like to be seen."

"The biggest one, it's stores – grocery stores... an actual grocery store in the neighborhood, there isn't one. I mean thank God we've got a car, we can go to Kroger"

Group 1: Social Environment

“I don’t go to church anymore... As far as I’m concerned, these churches are inadequate, they used to be in our communities.”

- ▶ Participants noted the change over time that they’ve experienced socially in the community.
- ▶ Jobs that churches and neighbors used to provide are now services from state or county departments.

Group 1: Service Environment

- ▶ In order to maintain quality of life and independence, participants identified the following as important services:
 - Affordable access to dental, vision, hearing care
 - Transportation
 - Food delivery
 - Internet/cell phone access
 - Assistance with prescription drug costs
 - **Access to information in one place**

Group 1: Service Environment

- ▶ As participants discussed different services for seniors, they realized knowledge was a huge barrier for receiving services.
- ▶ Access to information is key, and would help both quality of life and independence.
- ▶ Many are aware that a lot of these services already exist, but they struggle to find it and recognize that it's even harder for seniors who can't use the internet.

"That's all we're really talking about here, is lack of information, lack of divergent points of view so we can get the kind of information we need so we can live a certain quality of life... we all don't have the information."

"The resources are there, they are available, the services are available...it's just people don't have the information to access it."

"if you just compiled all of that information into one repository... it's already there, it's just being able to access it."



Group 2:
Religiously observant
people of color age 60+

Group 2 Profile

	Gender	Age	Ethnicity	Household Income	Religion	Education	Zip Code	Employment
Participant 1	Male	62	Black/African American	\$50-100k	Christian	Some College	43211	Veteran
Participant 2	Male	68	Black/African American	More than \$100k	Christian	College Graduate	43016	Retired
Participant 3	Female	70	Black/African American	\$50-100k	Christian	Postgraduate	43229	Retired
Participant 4	Female	68	Black/African American	\$50-100k	Christian	Some College	43206	Retired
Participant 5	Male	61	Black/African American	\$50-100k	Christian	Some College	43229	Retired
Participant 6	Female	60	Asian or Pacific Islander	More than \$100k	Else	High School Graduate	43123	Full Time
Participant 7	Male	71	Black/African American	\$50-100k	Christian	Some College	43068	Retired

Group 2: Aging in Your Community

“When I first moved in the area, it was a lot of families, but then people actually looked out for the seniors in the neighborhood, and they would help them. Somebody would come over and if you need your grass cut, they would help you cut the grass. There’s none of that no more. If you need your snow shoveled, they’d come over and help you shovel your snow. If you don’t have a family member to help you, you’re up the creek, you have to pay.”

- ▶ Most participants have enjoyed aging in their areas; they like their neighbors and have a close community.
- ▶ However, some feel as though their communities have gone downhill.

“When I first moved in my neighborhood, it was a very nice mixed community. But now, the area’s starting to go down.”

“I like the neighbors. We help a lot; we help our neighbors.”

Group 2: Physical Home Environment

- ▶ When asked about things that make their homes more usable, participants mentioned:
 - Few to no stairs
 - Walk-in showers with no tubs
 - Having a bathroom on each floor

- ▶ Participants mentioned that yard work has become more of a challenge, but getting help with services like that can be challenging on a fixed income.

"As the years pass by, you realize that the house you lived in at 42 years old, it's really not good for you or it's uncomfortable to the point where your knees are bad, if you have steps you have to go up and down the steps."

"If you have a walk-in tub or shower, grab bars in your shower area"

"I've retired, you know, I live off that fixed income and you have to learn how to live off a fixed income."

Group 2: Physical Community Environment

- ▶ Older residents appreciate proximity to establishments in their community.
- ▶ Priorities included grocery stores, libraries, parks, and easy freeway access.
- ▶ Quality sidewalks are also important.

"There's a senior center – I'm not part of it, but if I choose to be it's nice because it's cheap and it's close by."

"Convenience to freeway, grocery store."

"Everything's within a couple of miles, and I'm comfortable with that. The grocery store, the library."

"My husband has bad knees, so we moved into a condo... As you get older, you don't have to worry and everything's there [at the condo]."

Group 2: Social Environment

*"We help each other.
The younger people in
the neighborhood help
us."*

*"I don't know too much about
the area, I've been there
approximately about two years
but for the most part I keep to
myself and besides my church
family and my immediate family,
for the most part I keep to
myself."*

- ▶ Socially, some participants feel a sense of community with other older adults, while others lack a connection and rely more on their families or church groups.
- ▶ Participants take advantage of senior centers or community centers depending on what's near them.

Group 2: Service Environment

- ▶ Between all participants, they were aware of programs like Meals on Wheels and transportation services.
- ▶ However, many were worried about scams, particularly for the generation above them in their 80s and older. Seniors may want to use these services but are worried about who to trust.
- ▶ Older seniors are also less comfortable using the internet, so there is a desire to get information elsewhere.
- ▶ Some participants also brought up pride as a barrier to receiving services.

“There’s a lot of older people who struggle with how to pay their bills, how to get their medication. They don’t know the resources that’s out there to help them, what they need to do to get that.”

“My mother-in-law, she’ll be 90 soon. I think their concern is there’s so many scams.”

Group 2: Service Environment

- ▶ As with other groups, many said they were learning information from other participants during the discussion.
- ▶ They agreed that making this information available on a tv commercial with a phone number could help expand awareness.
- ▶ Services addressing food, transportation, cleaning services, and socialization are important to seniors.

"Some senior citizens are averse to doing that, they don't know how to do it, they can't get to the library to google it and they wouldn't know what google is to begin with. So I think if there's access to that or at least an advocate who can say okay here's everything. If there was a packet of information, that's all the free stuff you can get, there's phone numbers there. You don't gotta go on the internet, just call that number. That's a powerful thing"

"A lot of the seniors I know, they can't stand the idea of trying to find it on Google."



Group 3:
African American men age 55+

Group 3 Profile



	Gender	Age	Ethnicity	Household Income	Education	Zip Code	Employment
Participant 1	Male	65	Black/African American	\$50-100k	College Graduate	43229	Retired
Participant 2	Male	64	Black/African American	\$50-100k	College Graduate	43211	Full Time
Participant 3	Male	66	Black/African American	\$50-100k	Postgraduate	43228	Retired
Participant 4	Male	63	Black/African American	\$50-100k	Some College	43229	Retired
Participant 5	Male	63	Black/African American	\$50-100k	Some High School	43227	Retired
Participant 6	Male	60	Black/African American	\$50-100k	Some College	43227	Full Time

Group 3: Aging in Your Community

"My neighborhood has changed since I first moved in there."

"Now with everything growing came the crime and everything else and [Columbus] is really a big city now."

"It used to be more of a community."

- ▶ When asked about aging in their communities, older Black men immediately noted how much they feel things have changed.
- ▶ Those who have lived in Columbus for most or all of their lives had a lot of pride in their communities, but felt that things have not necessarily changed for the better as Columbus has become a true "big city."
- ▶ There was an overall fondness for a time when neighbors helped out more and kids were out playing.

Group 3: Physical Home Environment

- ▶ Participants were aware that their environmental needs have started to change, either due to numerous surgeries or simply aging in general.
- ▶ Environmental elements considered helpful for aging included:
 - Few to no stairs
 - Smaller yards
 - Walk-in showers (no tubs)
 - Shorter toilets
 - Door handles instead of knobs
 - Hard flooring instead of carpet/rugs
- ▶ While several participants noted that they no longer had the energy or the ability to maintain a lawn, others said they enjoyed yardwork

"The big thing [about moving to a condo] was the yard work."

"We've opened up the space by not having as much stuff...you have surgery, you're on a knee scooter or some other device and you cannot be crowded in with that stuff."

Group 3: Physical Community Environment

- ▶ Improved lighting was once again one of the first things participants homed in on, noting that worsening eyes makes driving with poor lighting especially intimidating.
- ▶ Participants also mentioned:
 - Better maintained sidewalks
 - Fixing bumpy streets and widening roads
 - Snow removal
 - More grocery stores in certain areas

“As long as I’m able to drive, I can get anywhere I want.”

“As we get older, our eyes change, we can’t see things. Lighting could be better, it’s too dark.. They either need to have more or it needs to be brighter or something.”

Group 3: Social Environment

"I do not feel there's a social network, as in senior services."

- ▶ Many older Black men felt that they didn't have a good social network or senior services.

"A community center would be amazing."

"I think there should be senior services for some seniors that are not able to drive."

- ▶ A few respondents said they did not have a community center in their area but would like one.

"Knowledge is key."

"There are benefits, but you don't know about them until you step out and look for them."


- ▶ There was widespread agreement that knowledge was part of the issue; many don't know these social networks exist.

"You gotta have your own network of family and friends."

- Finding this information isn't as easy for some seniors, especially the ones who aren't as tech savvy.

Group 3: Service Environment

- ▶ Some participants were aware of services that drive seniors to the grocery store or the doctor, and Meals on Wheels.
- ▶ Medicine was recognized as important, both being able to get to appointments and to pick up prescriptions.
- ▶ Participants identified socialization and companionship as an area they'd like to see services, such as visitation to check on people.



“Socialization, companionship, you know, some structured mechanism where you can bring folks together. I think that’s gonna be key.”

- ▶ A robust, multifaceted outreach campaign is necessary to get older adults informed of the services that are already available through the Franklin County Office on Aging.
 - Participants want a centralized website or number to call and are unaware that the phone number already exists.
- ▶ Current residents in their 60s-70s are fairly tech savvy. Older seniors without internet access or literacy are particularly in need of outreach.
- ▶ Specific areas of Columbus lack a community center; those seniors are more likely to have less sense of community and feel less connected and socially fulfilled.



Molly O'Shaughnessy
molly@emcresearch.com
614.827.9670

Susie Beecroft
susie@emcresearch.com
614.827.9663

Jack Miller
jack@emcresearch.com
510.550.8807



THE OHIO STATE UNIVERSITY
COLLEGE OF SOCIAL WORK

RESEARCH BRIEF

“WE WANT TO GO, BUT THERE ARE NO OPTIONS”

EXPLORING BARRIERS AND FACILITATORS OF TRANSPORTATION AMONG DIVERSE OLDER ADULTS

KEY FINDINGS

- *Existing transportation services in Columbus needs to be more affordable, accessible, available, reliable, coordinated, and safe.*
- *There were strengths and areas for improvement in every mode of transportation (e.g., bus, taxi).*
- *Participants identified preferences for different modes of transportation for different purposes (e.g., grocery shopping, doctor's appointment).*
- *Previous experiences with different modes of transportation before immigration influenced diverse older adults' transportation choice after migration.*

About this Study

This study is a collaboration between Age-Friendly Columbus and Franklin County (AFCFC) and the Senior Companions Program (SCP) of Catholic Social Services in Columbus, Ohio. The social connectedness of diverse older adults has important implications for their health and well-being. Transportation plays an important role in the social connectedness and social integration of older adults. Despite the increasing number of diverse older adults nationally and locally, there is limited information on factors influencing their transportation behaviors. To address this gap, this study explored barriers and facilitators of transportation among diverse older adults, particularly older immigrants and refugees in Columbus.

With the goal of building age-friendly communities and improving transportation of diverse older adults, the research team conducted eight 90-minute focus groups in six languages: English ($n = 33$), Nepali ($n = 4$), Khmer ($n = 7$), Somali ($n = 5$), Russian ($n = 17$), and Mandarin ($n = 4$) with diverse older volunteers from the SCP (40% male, 60% female) during a monthly in-service training.



“WE WANT TO GO, BUT THERE ARE NO OPTIONS”

About this Study (cont.)

SCP provides funded volunteer opportunities to low-income older adults (55+) by pairing them with homebound older adults. This approach aims to reduce the social isolation of both groups. Older adults serving in the SCP have diverse linguistic, cultural, and migration backgrounds. The mean age of participants was 76.81 ($SD = 8.51$). Data analysis followed the Rapid and Rigorous Qualitative Data Analysis (RADaR) technique and thematic analysis through an interactive team approach.

Four major factors influencing transportation use emerged:

- (1) Transportation services: certain aspects of transportation services hindered transportation use. The cost of transportation (e.g., taxis), lack of accessibility (e.g., absence of footstools), limited availability (e.g., lack of same-day medical transportation), unpredictable pick-up times, and limited public transportation options were barriers to transportation use. In contrast, coordinated and person-centered transportation options facilitated transportation use.
- (2) Built environment determinants: the lack of safety and walkability in neighborhoods were barriers to transportation, whereas living close to facilities was a facilitator.
- (3) Social environment: language barriers and lack of information hindered transportation.
- (4) Individual determinants: being able to drive, walk, and "ask a family member" facilitated transportation. When needing urgent medical services, "far friends are not comparable to close neighbors".

Conclusion

Personalized and coordinated transportation services, walkability and safety in the neighborhood, translated transportation information, and social support from family and friends may aid transportation use among diverse older adults. Findings also indicated that facilitators and barriers to transportation for diverse older adults are interconnected. Because various factors (e.g. service coordination, social environment, built environment, and individual behavior) influence the transportation use of diverse older adults, different organizations (e.g. transportation, health, and ethnic organizations) may collaborate to improve the transportation experiences of diverse older adults.

ABOUT THE RESEARCHERS

This project was led by **Katie White, MSW (PI)**, Director of Age-Friendly Columbus and Franklin County. **Dr. Holly Dabelko-Schoeny** and **Dr. Arati Maleku** from the OSU College of Social Work served as co-Investigators. PhD students **Qiuchang (Katy) Cao** (College of Social Work) and **Basar Ozbilen** (College of Engineering City and Regional Planning) assisted.

ABOUT THE RESEARCH

This study is part of a larger project titled "Mobility and Transportation among Older Immigrants in New Spaces" that aims to identify the transportation behavior and service use of older adults with diverse immigration backgrounds.

Contact information: white.3073@osu.edu



Franklin County
Board of Commissioners
OFFICE ON AGING





Operational Review Report for:
Franklin County Senior Options

For the following project:
Operational Review

Summer / Fall 2016

TABLE OF CONTENTS

EXECUTIVE SUMMARY	1
PROJECT OVERVIEW	4
Project Approach	4
Project Deliverables	5
DETAILED FINDINGS AND RECOMMENDATIONS	6
Senior Options Overview	6
Operational Review Findings	7
Operational Review Recommendations	15
Implementation Roadmap	25
Conclusion	29
Appendix A: Replacement of Q Continuum - Strategic Options to Consider	30

EXECUTIVE SUMMARY

Project Overview

This report contains the findings and recommendations from the independent study completed in response to Franklin County Board of Commissioners desire for an operational review of Franklin County Senior Options (FCSO) program within the Franklin County Office on Aging as it prepares to document it's need for a renewed and increased levy to fund services beginning in 2018 for five years. The purpose of the operational review was to determine opportunities for FCSO to operate more effectively and efficiently to maximize the benefit provided by the taxpayers funding.

The operational review included the following areas:

- Organization Structure
- Workforce
- Business Management and Service Delivery
- Technology

The scope of this review required studying the current state of FCSO practices as well as the definition of future state goals. The resulting recommendations are focused on closing the gap between the current state and future goals.

The scope of the project was limited to FCSO and the functions funded by levy money. The Adult Protective Services program within Office on Aging was specifically deemed out of scope by the project sponsors, yet will need to be considered when preparing to implement recommendations from the implementation roadmap in order to ensure overall success of implementation activities for the Office on Aging.

The goals of this project included the following:

- Identification of findings including practices to retain and opportunities for improvement
- Recommendations to address the outlined opportunities
- Outline of an implementation roadmap for action

Findings Summary

FCSO has had the same Director since its inception in 1993. Senior Options has experienced continuous growth in need for services as the overall population ages and as a result, has incrementally responded to this growth by adding structure, processes, and procedures. This operational review allowed the agency to stop and assess the current state from a current, objective point of view.

The most significant observations of the current state of the organization cover four key areas for investing in the future direction and capabilities of Senior Options:

Organization Structure: The current organization structure does not support future growth or sustainability of the workforce. Leadership at the top has too many direct reports of varying levels of management to allow for consistent direction. There are limited career growth opportunities.

Workforce: There is a need for workforce planning, organization design and development, business continuity cross training, performance accountabilities and leadership development. Furthermore, the current workforce is aging and attrition due to retirement will

become a important consideration. There is a significant amount of institutional knowledge embedded in current employees that risks being lost as employees retire. Performance management should have a link with business productivity metrics.

Business Management Practices: The business management practices have evolved in response to seniors' needs over time based on the experience and capabilities of the Agency leadership. With the anticipated growth of the senior population over the next 5-10 years coupled with limits in taxpayer funding, the emphasis in the future will be on optimizing business management practices and putting more of the levy funding to work directly assisting seniors and not being lost in Agency expenses. Productivity metrics, linked to performance management, will be important to define and monitor in response to the growth and changes to ensure the Agency is practicing good stewardship of the Levy monies.

Technology: Internal-facing support technology ("Q Continuum") is becoming obsolete and will need to be replaced by a new system that is more cost effective to support, secure, and addresses more of the business requirements than the current system is capable of supporting. External-facing technology improves the ways Clients and service Providers interact with FCSO. The website needs to be redesigned for improved Client interaction as more technology savvy seniors become eligible for Senior Option's services. FCSO may explore ways to take electronic payments and to become more mobile device friendly.

Recommendations Summary

The future focus of FSCO will result in these outcomes:

- An agency focused on continuing to equally balance delivering the mission while being good stewards of levy monies.
- An organizational structure that creates career path and development opportunities for workforce business continuity planning that address both current job satisfaction as well as the impacts of changes in an aging workforce.
- Increased performance results driven from performance accountabilities and best management practices.
- A more metric driven, measurable business of the delivery of services.
- An agency focused on continuous improvement, efficiencies and effectiveness.
- Updated technology and increased technology savvy to decrease risk and improve both internal effectiveness and the customer experience.

Implementation Summary

To meet these future aspirations, the agency should focus on four core implementation themes during the next levy cycle:

- Restructure the organization to establish two clear functions within the agency to operate: operations and administration. Operations will focus on providing mission-based services balanced by administration, which defines and measures productivity and consistent practices. Establish leadership for each area to lead the two functions as well as serve as change agents/champions.
- Increase and link productivity results and performance accountabilities of case management staff.
- Identify improved business metrics to measure utilization, productivity and cost of doing business.

- Implement a replacement to the “Q Continuum” system that not only modernizes this important capability, but also expands the automation to cover more of the agency’s business requirements than just senior case management.

Conclusion

Overall the Agency has managed to provide services in response to the increased need over the twenty-three years of continuous growth. There is a unique opportunity with the upcoming Senior Services Levy to be get back in front of the growing senior trend and increase the capacity to serve more seniors while holding costs at a reasonable level. The business results the agency has achieved to date will form the foundation for the next evolution of serving seniors with the improved management and performance of Agency staff, efficient processes that are guided by quality practices, and updated enabling technologies that help bring people and processes together effectively. Implementing these changes will allow the agency to be scalable tin response to workforce and client needs.

PROJECT OVERVIEW

The Franklin County Board of Commissioners engaged expert consultants to conduct an objective operational review to determine whether Franklin County Senior Options (FCSO) was operating as efficiently and effectively as possible through its workforce, technology, and agency practices. Franklin County Senior Options is funded by the Senior Services Levy and administered through Franklin County Office on Aging. The scope of this review included only those people, processes, and technologies funded by the Senior Services Levy within FCSO. It did not include Adult Protective Services (APS) although that division will need to be considered for any implementation activities.

The goals of this project included the following:

- Identification of findings including practices to retain and opportunities for improvement
- Recommendations to address the outlined opportunities
- Outline of an implementation roadmap for action

The operational review of FCSO included:

- Organization Structure
- Workforce
- Business Management and Service Delivery
- Technology

To meet these objectives, the following activities were performed:

- ~200 hours of discovery and analysis activities
- Visioning discussions with leadership
- SWOT sessions with management team
- Individual internal interviews with selected stakeholders, staff and contributors
- External interviews with selected stakeholders
- Observations of ACD, Case Management
- Existing documentation review
- Observations of Agency meetings
- Analysis of management reports describing volumes and trends

Project Approach

To meet the goals of the project, the three-person consulting team reviewed the organization structure, people, culture, processes, and technology systems in the organization. To conduct this assessment, the consulting team met with many of the FCSO staff members in individual discussions and team meetings. The consultants conducted working sessions with employees of FCSO to capture process maps and current state of business practices, workflows, and standard operating procedures. The consultants also reviewed manuals, systems, and other documentation.

The review included the following areas to determine effectiveness and efficiency in the organization:

Organization Structure: The review of the organization structure included the table of organization for functional lines, career path opportunities and workforce business continuity planning.

Workforce: The review of the workforce and culture identified the types and amounts of work being performed by each area as well as the skills and attitudes necessary for performance. This also included identification of the cultural norms for the way business is conducted, and incentives and rewards provided.

Business Management: The review focused on identification of consistency and repeatability in the delivery of services, how work was conducted, and the productivity measures used.

Technology: The technology review identified to what extent the technology, data, and systems support effectiveness of internal and external users and automate business practices to be efficient and effective.

Project Deliverables

The deliverables for this project include:

- Presentation of findings and recommendations for the Human Services Levy Review Committee
- Final *Operational Review Report* to the Franklin County Commissioners

DETAILED FINDINGS AND RECOMMENDATIONS

Senior Options Overview

Franklin County Senior Options (FCSO) helps Franklin County residents who are age 60 or older maintain their independence by providing services that allow seniors to avoid or delay institutional care. The mission of the agency is to *“Provide centralized access to diverse programs and individualized services for older adults and their families so they can preserve their independence and quality of life.”* FCSO also supports family members and care givers of eligible seniors with resources to benefit the senior. FCSO is funded by the Senior Services Levy and administered by Franklin County Office on Aging. Through a large provider network, FCSO makes home and community-based care services available for Franklin County seniors.

The services FCSO provides to the community include:

- Home delivered meals
- Homemaker services
- Personal care
- Respite care
- Adult day care
- Emergency response systems
- Minor home repair

FCSO prides themselves on being a “one-stop shop” for seniors and their caregivers to receive information and access to senior services. They are proud to have a single number for anyone to call and get connected to information or services immediately. The culture aligns itself around the four following principles:

- The central entry point or “one-stop shop” approach would be retained.
- A person would not be required to spend their available funds down to poverty level to receive services. A cost sharing model that recognizes the senior’s ability to contribute some or all of the cost of service(s) would remain a part of the program.
- A person would not have to decline to a nursing home level of care to be eligible for services.
- A diverse set of services and programs that would allow a senior to remain at “home” and out of institutions would be available.

Operational Review Findings

The following section includes detailed findings for each of the four areas reviewed: organization structure/ functional flow, workforce, business management and technology. These four sections are presented below and include identified practices to retain as well as opportunities for improvement based on the operational review discovery process.

Findings: Organization Structure / Functional Flow

Practices to Retain

- Leadership has significant influence in defining the culture for the organization.
- Mission and purpose of agency is clearly understood and followed.

Opportunities for Improvement

- The organization structure is flat with little opportunity for career mobility.
- Structure does not support workforce planning or career path and development.
- Lack of focus on workforce planning to assist and guide the organization design and development of the agency to respond to growth.
- IT Department strengths emphasizes networks and other infrastructure with limited focus on business automation and supporting systems.
- Case Managers responsibilities are defined to include receptionist/call routing roles and responding to information requests from callers in addition to their skills in care planning and overall case management. This creates a very broad set of responsibilities that are sometimes difficult to reconcile.
- Quality Improvement (QI) Department is underutilized in performing broader quality improvement functions that would benefit the entire Agency.
- The Director has multiple levels of authority reporting directly to her including supervisors, managers, senior managers, administrators, and program managers. Thus, she must to operate at varying levels of detail to accommodate the needs at each level. This leads to inconsistency in the direction and leadership of the agency as well as the feeling that the Director must be consulted on many decisions made at lower levels of the organization. This is also difficult to create repeatability of practices, clear communication channels, good management practices and scalability of the agency in response to growth, and would make the position difficult to replace.

The leadership of the current structure functions depicted by the graphic below:

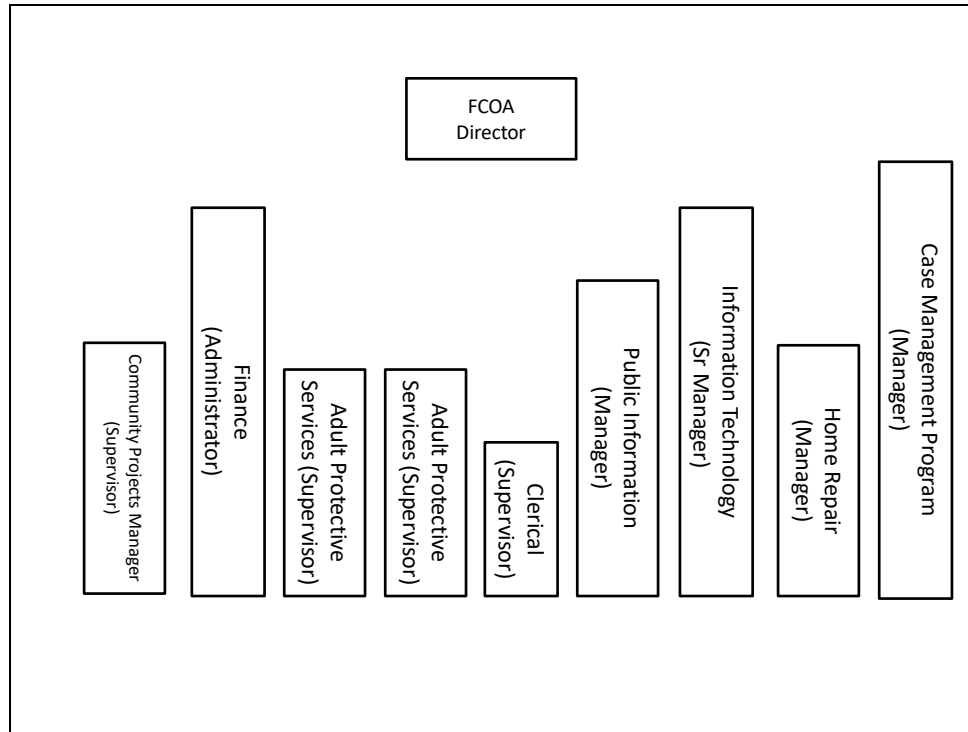


Figure 1 – Current Director Span of Responsibility and Relative Influence

- The results of this functional structure cause the people in the following positions to be single-threaded and/or critical points of failure and does not allow for business continuity of the positions. If any of the people currently in the following positions were to leave the Agency for any reason, it would cause a significant impact to the Agency as replacements are hired and acquire the necessary institutional knowledge and expertise to function in the role.
 - Toni Carroll - Director
 - Amy Funk - Finance Manager
 - Barbara Sullivan - Case Management Program Manager
 - Becky Becker - Program Manager
 - Eric Gioglio - IT Manager
 - Rik Gruber - Programmer/ Analyst III

Findings: Workforce**Practices to Retain**

- Many high performing knowledgeable people in current roles who are committed to the success of agency.
- Case managers are competent and insightful, thorough and professional, appropriate use of humor.
- New case manager training is well developed and delivered.
- Agency has a good reputation in the community.

Opportunities for Improvement

- The FCSO workforce is aging. The current and projected count and percentages of the employees who are 62 or older:
 - 8 employees (12%) currently 62 or older (2016)
 - 13 employees (20%) will be 62 or older by 2017
 - 24 employees (38%) will be 62 or older by 2022
 - 31 employees (49%) will be 62 or older by 2027
- Many positions have people with years of institutional knowledge that has not been cross trained or documented.
- Most of the current leadership positions have limited management experience drawn from internal organization growth only. This has led to inconsistent management practices for performance expectations and performance accountabilities.
- Although new case manager training is extensive, there is limited additional required training to expand capabilities in supervisory skills or technical savvy. Staff can self-select training opportunities that they feel would be beneficial, but there is no overall guidance/strategy on workforce development.
- Agency experience and expertise is very focused on social work and has limited experience or exposure to business practices and procedures. While they are focused on being mission-driven, there is the opportunity to better establish a managed balance of mission with being good stewards of public funds through use of good management practices. Performance management practices need to include productivity metrics and measures.
- Many positions have learned the practical job responsibilities and expertise from peers in the organization rather than from agreed upon best practices encompassing more than just stated policy. Staff members taking on new or expanded roles have as much a chance to be trained on bad habits and inefficient work practices as they are good.
- Case Managers who serve as Information and Referral specialists can feel a high level of task dissatisfaction.

Findings: Business Management**Practices to Retain**

- Continue to utilize the Public Information role as well as direct appeal by Senior Options leadership and staff to maintain its good reputation in the community.
- Financial management competency in finance administration.
- Processes are policy driven and policies are well documented. This provides a foundation for continuous improvement.
- Internal phone transfers are good, warm handoffs and avoids placing seniors into voice mail message systems.
- Awareness efforts in the community through festival/fairs, media articles, social media, handbooks & resources generates immediate increase in calls to Senior Options. Public Information can be used to communicate not only the presence of FCSO as it has in the past, but also how to access informational, self-serve resources as they evolve like the revised website, etc.
- Retain hands-on approach of “Case Managers” to focus on quality of service delivery to clients.
- Retain the periodic assessment of the services (reauthorizations) being performed with Clients to ensure the Client’s current and subsequent needs are being met with the appropriate level of quality and that Client’s that no longer meet the qualification criteria for Senior Options are either removed from the system in a timely manner or transferred to a more appropriate service/agency to serve their needs. Reauthorizations provide a useful “reconnection” of Senior Options to Client’s who may not always realize and appreciate that Senior Options is guiding (and sometimes subsidizing) the services they receive from Providers. Reauthorizations are performed every 3 months. Some scheduled reauthorizations are more in-depth or require re-verification of financial information.
- Retain individual Case Manager work space offices to allow for some privacy and reduced distractions when handling calls.
- Retain a dedicated function to lead Provider contracting and management. Ensures consistent provider selection process and that there is an adequate amount of work for selected services Providers.
- Continue to offer Grants as incentives to community/social organizations to provide services that are in line with FCSO’s mission, but don’t quite fit the criteria for regular FCSO Provider delivered services.
- Retain Home Repair for Seniors and/or Veterans as a clear means to promote safe and secure home environment. Home Repair in-home visits provide an additional view of the Client’s circumstances and identify needs for other FCSO services. In Q2 2016, 97% of repairs were completed within 30 days of initial authorization.

Opportunities for Improvement

- A wait list of seven to twelve weeks before performing an in-home assessment is used to queue Clients and manage allocation of FCSO funds and workload to FCSO staff. Over 50% of clients do not qualify for service provider subsidies and an additional 40% of clients require 30% or less in provider subsidies. While perceived “urgent” needs can be addressed at the Case Manager’s discretion, long lead times

- in the wait list queue can create dissatisfaction with Clients who are seeking assistance sooner to be able to meet their needs.
- Forecasting demand against the budget for FCSO services and servicing the Clients in the wait list is a mix of objective and subjective criteria that relies on the Director's extensive experience and past knowledge to develop the coming week's workload of cases to be evaluated. Information like typical monthly or seasonal disenrollment information (both in terms of Client counts and their associated subsidy burden) is not being gathered and applied to the forecast planning.
 - The combining of the call response roles for Automatic Call Distribution (ACD) (inclusive of Information and Referral (I&R), call routing and other receptionist/operation-like functions) and Case Management (inclusive of screening/qualifying, enrollment, client questions, and follow-up reauthorizations) creates employee job dissatisfaction, reduces the amount of time available for Case Managers to perform Clients responsibilities and reduces the number of Clients a Case Manager can manage, resulting in the need for more Case Managers.
 - FCSO has been reluctant to use an automated call attendant/call routing capability due to create a consistent "human answered" call experience. This results in Case Managers on "ACD duty" to spend a lot of their time answering phones and directing calls that do not require their Case Management skills. Consider that FCSO Clients that are entering the 60+ age group are more familiar with interacting with automated call attendants/call routing systems when contacting other businesses and government agencies.
 - It is not clear that having dedicated case managers assigned to specific clients adds value over other structures. Case Managers, operating with consistent policy and best-practice practical skills should be able to provide the same decisions on care regardless of which Case Manager is interacting with a client. This would increase the probability that a client calling in with questions or to change their service would receive immediate service. Current practice of detailed case noting would allow more than one Case Manager to service a Client. This would also reduce a significant amount of Clerical's time reviewing and assigning cases to Case Managers when they could instead be served from a pool.
 - Case Load metrics for assigned clients are not based on quantified performance capacity of staff. Furthermore, Case Manager workload is self-prioritized. Beyond being available for ACD calls and completing the requested reauthorizations in a month, Case Managers select and prioritize the types and quantity of tasks they want to do daily. This makes it difficult for supervisors to assess performance and identify high/low performers without consistent measurement for productivity or prioritization methods for all work activities.
 - In the eyes of the current system, all Clients are equal complexity and effort, yet in practice, the effort required to serve Client covers a wide span of effort and cost by Senior Options. Cases are not differentiated by complexity, frequency of contact, or challenges posed by the client's cognitive/physical health. This makes it difficult to balance the case load effort (rather than pure case counts) to Case Managers as well as to quickly identify high-risk or high-need Clients for special consideration.
 - While Home Repair calculates a "cost per client" and can trend that figure to measure their efficiency, Senior Options does not have a similar measurement for their services to establish an expected cost per Client to measure organizational efficiency.

- Revenue to support FCSO Mission is limited to primarily levy funds. Changes in served population needs or opportunities to provide additional services must wait several years for a subsequent levy renewal cycle for approval.
- Identifying, institutionalizing, and training “Best Practices” for best serving Clients beyond policy-specified required are not shared across teams to elevate FCSO’s performance.
- The Quality Improvement group’s quality focus is primarily on service Provider contracting and quality of service delivery and does a good job of ensuring the process of Provider management is This group possesses the foundation of good quality assurance/control skills that could be used in other parts of FCSO to help manage a broader quality-focused initiative.
- The *Senior Citizen Information Handbook* is a useful resource that is out of print and out of date. This has been a useful resource to hand out to current and potential clients that not only shares useful information for seniors, but also is effective “marketing” for services provided by Senior Options that can help attract Clients and direct them to additional information and referral resources, as well as the intake and evaluation processes in Senior Options.

Figure 2 illustrates the current conceptual business flow and services as a basis for comparison for subsequent alternative business flows for Senior Options.

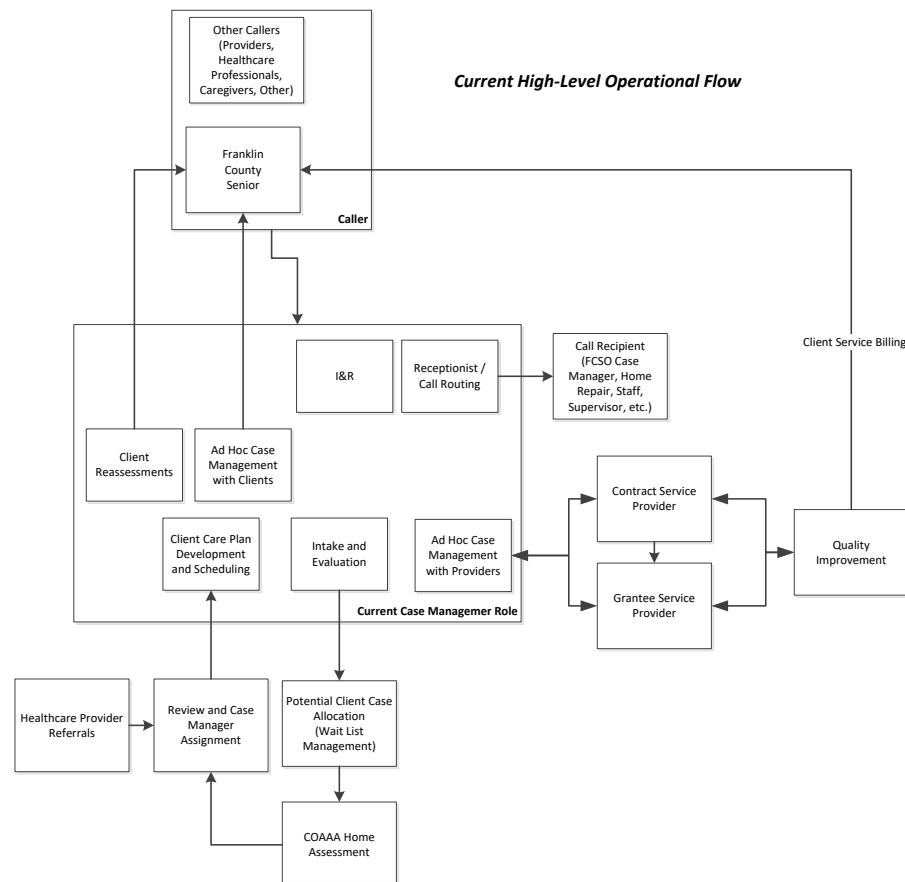


Figure 2 - Current High Level Operational Process Flow

Findings: Technology**Practices to Retain**

- Other than “Q Continuum”, hardware and software systems are current and supported
- Technology back-up and disaster recovery planning meet expectations regarding business continuity.
- Very strong in operations, including processes and documentation .
- IT leader is very knowledgeable about a wide range of IT topics, committed to the organization and manages the local area network well.
- Continue to provide mobile technology (laptops, tablets, etc) for staff functions that would benefit from being mobile within the office or within the community.

Opportunities for Improvement

There is little strategy defined for information technology at FCSO. The information technology team has expanded with the needs of the agency, however, this growth has not been aligned to an overall IT strategy.

IT Team

- IT team mistrusts external services and resources including cloud solutions, software-as-a-service, Franklin Count Data Center, and outsourced consulting; consultants working as on-site, staff augmentation under the direction of FCOA IT are more trusted.
- Most technology roles are single-threaded and the technology team is not staffed to be scalable for future expansion.

Q Continuum

- Highly customized and outdated software package; the usability can be difficult to master, especially for providers, and the process flows within the system are not efficient.
- There is limited support provided by software vendor due to the age of the system and vendor issues.
- The Vendor no longer markets Q Continuum; has transitioned their development, support, and sales efforts to their package “MedCompass”.
- The current system does not accept electronic payments such as credit/debit cards or echecks. This adversely impacts the “customer experience” of being able to pay with means other than a mailed check/money order.
- The current system contains significant sensitive information and is high risk for undetected data breach.

Website

- Lacks a user-manageable content management solution. Results in dependency on IT to make content changes that compete with other IT priorities.

- The search process is poor (partially because of heavy use of PDF formatted documents) and navigation is not necessarily intuitive to an “outsider”. This adversely impacts the “customer experience” of using the website for information and resources.
- Information architecture and site map is focused on information about agency groups and not on customer-focused information, resources, and solutions to their issues.
- The website is not mobile friendly and needs to be updated with a responsive design template. As more seniors become eligible for Senior Options and have grown up with more connected technology (including smartphones), these technology savvy seniors will be more likely to use services which may be accessed through the same devices they are using for other activities such as shopping, banking, payments, directions, etc. The sign needs to be “responsive” to improve the customer experience of using the website for information and resources.
- Some website information is out of date and difficult to maintain. Seniors who are accessing the site may be directed to resources and information that is no longer accurate or relevant. This adversely impacts the “customer experience” of using the website for information and resources.

Mobile Technology

- The design of the “Q Continuum” does not provide for effective use of mobile devices.

Data Center

- FCOA reports poor service from the Franklin County Data Center and poor collaboration between the Data Center, FCOA IT and PFM (facilities).

Mitel Phone System

- Building-wide implementation means that other building tenants have Administrative rights to change phone settings and cause issues for configuration and use for FCOA.
- Opportunity to research underutilized features of phone system to improve communications and workflow within the Agency as well as to use this as a resource to improve the Client/Customer experience as a compliment to the live call responders.

Operational Review Recommendations

The following section includes detailed recommendations for each of the four areas reviewed: organization structure/ functional flow, workforce, business management and technology. These four sections are presented below and include the recommendations for increasing efficiency and effectiveness based on the synthesis of the practices to retain as well as the opportunities for improvement from the findings.

Recommendations: Organization Structure / Functional Flow

- Restructure the organization to establish two clear lines for business to operate: Operations and Administration. Operations is focused on mission service delivery, Administration consists of shared services that support, monitor, and measure delivery of services. Create a matrixed organization flow where shared administrative services intersect and support operational services.
- Focus the administrative area on providing the shared agency services that support the operational functions. These administrative services include: workforce development, information technology, finance and accounting, quality improvement etc. This area establishes the metrics, measures, forecasts and scorecards for the agency.
- Focus the operations area on providing the services of the agency including case management and adult protective services. This area reports on the productivity of the staff in meeting the metrics, measures, forecasts and scorecards for the agency.
- Establish leadership positions for each area to act as change agents.
- Establish the leadership of each area to work together to monitor, adjust, course correct and communicate the results of the productivity and measures working together.
- Position the Quality Improvement Department to be more involved in establishing, measuring, and monitoring productivity. Perform continuous quality improvement cycle.
- Position the IT Department to apply technology systems and capabilities to improve workflow by automating business practices for the entire Agency.
- Establish the Director to operate at a more strategic level and provide vision, direction and prioritization of work while allowing each function to manage their own objectives to meet the goals of the agency.

The recommended leadership structure for more efficient functionality is depicted by the graphic below:

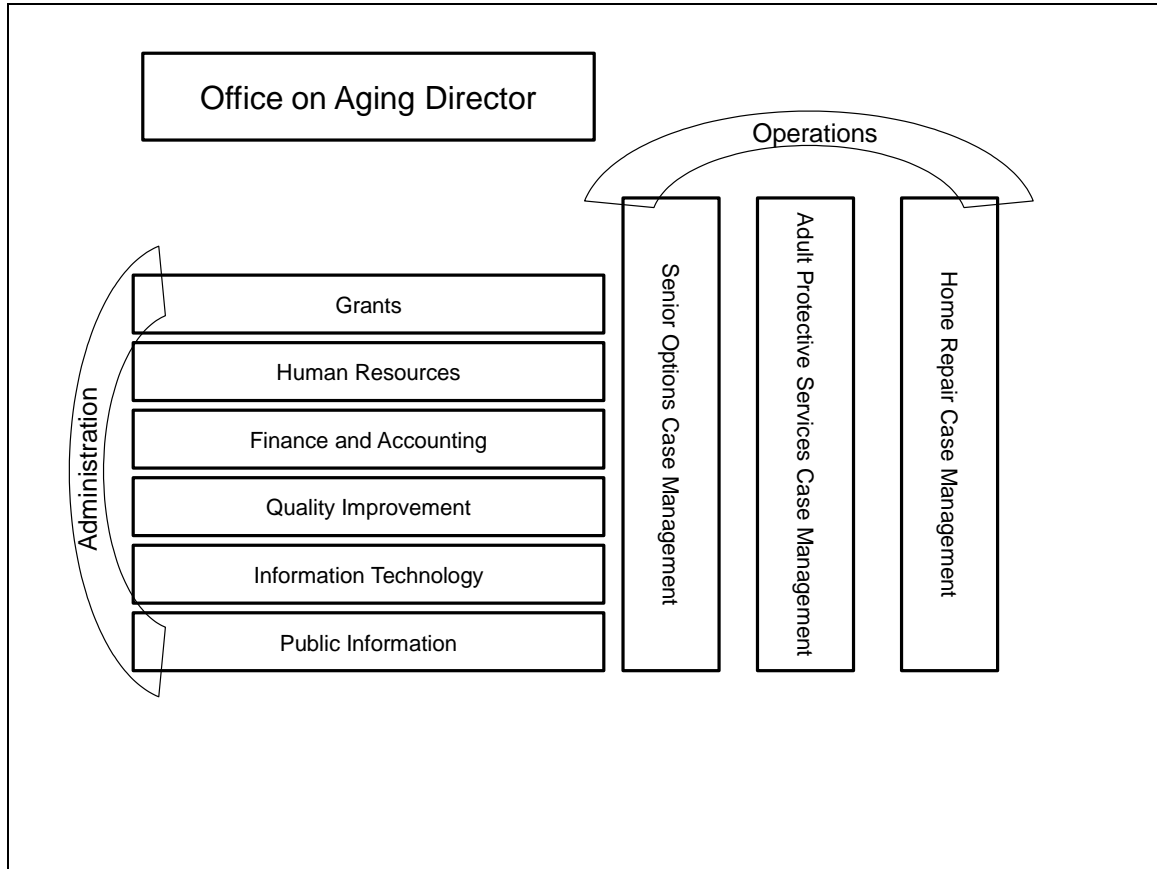


Figure 3 – FCOA Recommended Leadership Structure

- Align similar levels of leadership to the Director in the new structure.
- Add a business analyst position in Information Technology to determine the business requirements in the selection of a new technology system. This role should be hired with the intent of the person being mentored as a business continuity role for IT Manager.
- Add a workforce development position in Administration to assist with establishing performance expectations and accountabilities, conduct workforce planning activities perform recruiting, hiring and development of staff.
- Reclassify positions with appropriate titles for the level of authority and span of control as well as the appropriate compensation for the responsibilities of the position.
- Create career path and development plans for all positions.
- Consider restructuring case management program to separate Information and Referral / phone routing from client assessment and case management.

Historically, the Agency's organization structure has been flat, with a large portion of the organization's middle management reporting directly to the Director. Going forward, the Agency should consider a phased restructuring into a more hierarchical structure based on core functions and responsibilities. This will allow the Director to provide strategic oversight and leadership. The initial phase of restructuring would create an Assistant Director in Administration and alignment of the shared services functions of finance, public information, quality, workforce development and information technology under that position. This Assistant Director would also serve as the "change agent" for the Agency's organizational evolution, in addition to being part of the business continuity development for the Director. This position would develop measures and metrics for forecasting and reporting and assist in the definition of the data requirements for the selection of the new case management technology solution¹.

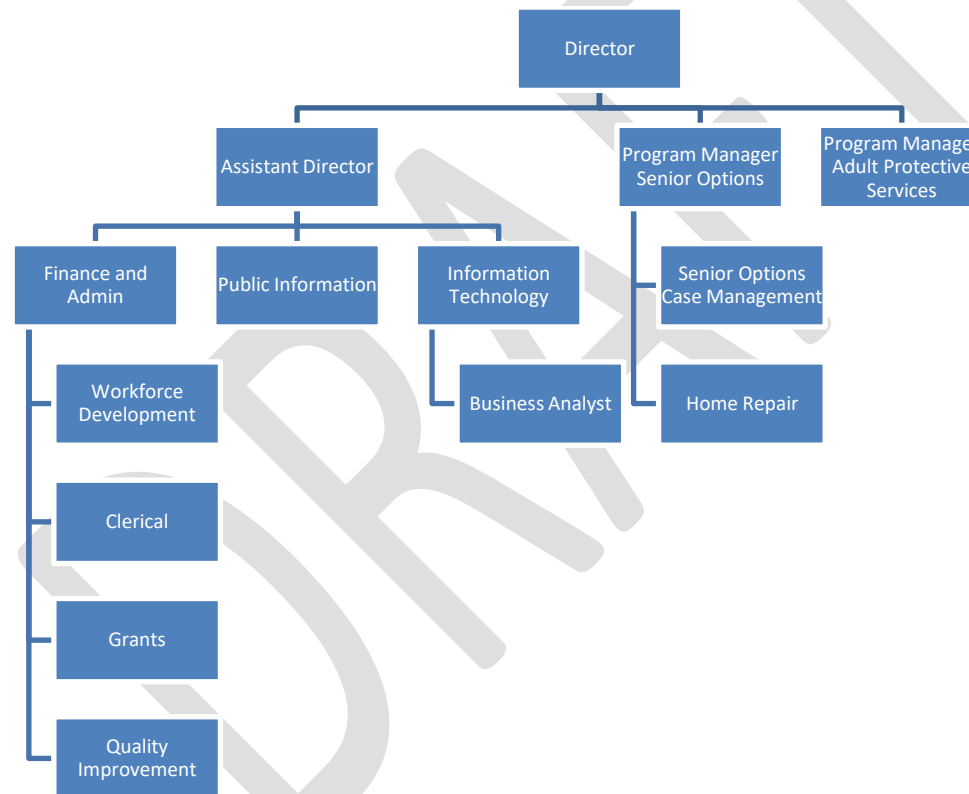


Figure 4 - Organization Structure Model Phase I

¹ Note - the models do not include all of the workforce positions. They are not all inclusive of a complete organization restructure. Each model is dependent on implementation of recommendations as well as business continuity activities of critical resources within the agency.

The subsequent phase of the Agency's restructuring would add a second Assistant Director position responsible for operational functions. This includes both Senior Options case management as well as Adult Protective Services. The Assistant Director of Operations is responsible for ensuring the Senior Options department as well as the Adult Protective Services functions are operating efficiently and effectively. This position leads the consistent setting of performance expectations and monitors performance accountabilities. The two Assistant Directors work closely together in order to ensure a balance of mission delivery with good stewardship of levy monies.

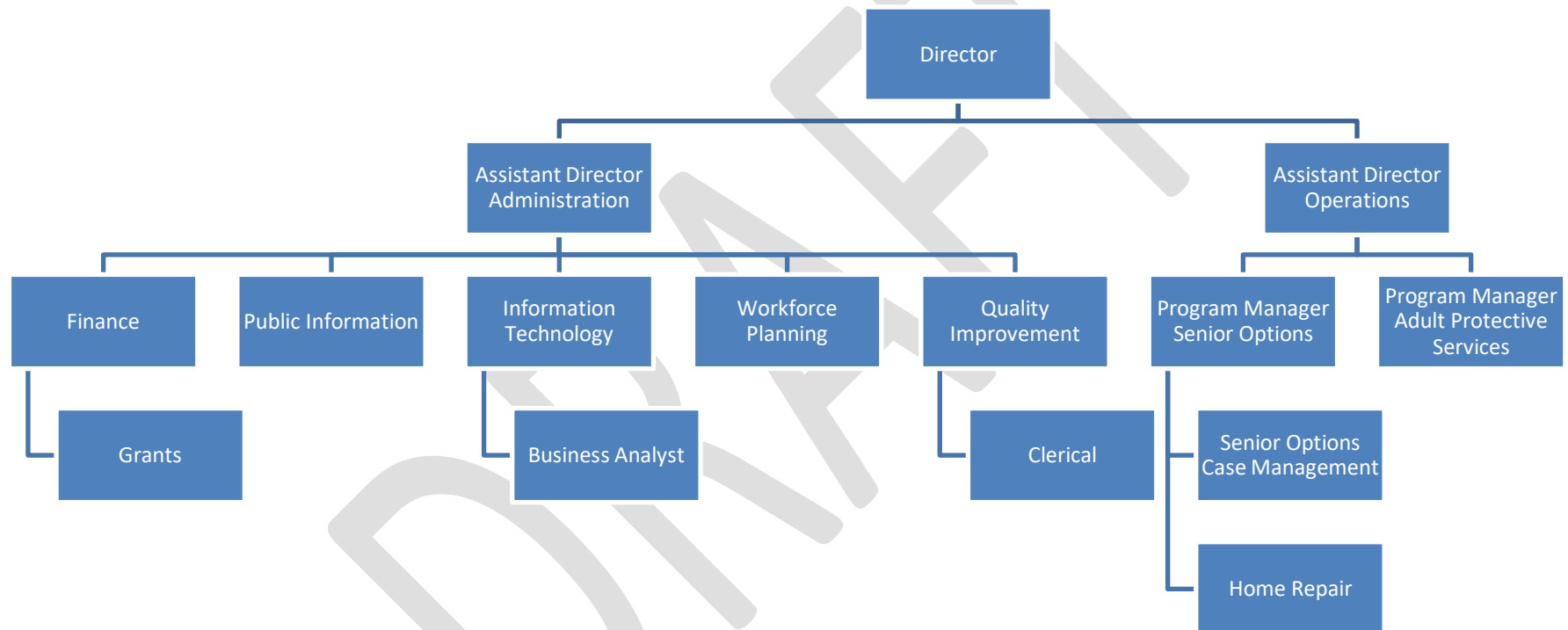


Figure 5 - Organization Structure Model Phase II

Recommendations: Workforce

- Perform change management and culture transformation activities to move the organization through the current changes. Evolve the focus from primarily mission driven to a balance of mission and business productivity.
- Hire a workforce development resource to establish programs and practices in organization design, workforce planning, training and development and performance management.
- Determine a plan to capture institutional knowledge through cross training of critical points of failure positions
- Establish levels of authority for each level of management in the agency and hold each position accountable to operate at that defined level.
- Provide management training to all levels of management to consistently provide guidance to the workforce about performance expectations and behaviors.
- Establish communication channels for sharing organization priorities (delegation, top-down) and work progress (escalation, bottom-up).
- Communicate performance expectations and accountabilities throughout workforce consistently and frequently.

Recommendations: Business Management

- Identify ways to reduce wait list time to qualify and triage a client's needs sooner.
- Research and define an improved Senior Options service demand forecasting model. This should incorporate both enrollment and disenrollment rates by month/season to determine forecasted availability of funding for new clients for the next 12 months as well as through the remainder of the current fiscal year. The result will be a more predictable and repeatable means of initiating service to clients that hinges on completion of the home assessment process
- Offer alternative reauthorization paths, such as mail-in summary reauthorizations or secure website in the future (as the Client base evolves to be more connected and technology savvy for reauthorizations). This may be best used for reauthorizations that require less information or Clients that are more comfortable with indirect contact. Consider using follow-up calls for exceptions or missed/late reauthorizations that require less involvement or randomly selecting a selection of Client for telephone reauthorizations.
- Separate the activities of Automatic Call Distribution (ACD) (inclusive of I&R, call routing and other receptionist/operation-like functions) from Case Management (inclusive of screening/qualifying, enrollment, client questions, and follow-up reauthorizations.)
- Evaluate the use of a single point, single choice automated call direction system for a specific audience of clients.
- Consider the benefits and efficiencies of using a pool approach for Case Managers to serve the Senior population. Case Managers, operating with consistent policy and best-practice practical skills should be able to provide the same decisions on care regardless of which Case Manager is interacting with a client. This would increase the probability that a client calling in with questions or to change their service would receive immediate service. Current practice of detailed case noting would allow more than one Case Manager to service a Client. This would also reduce a significant amount of Clerical's time reviewing and assigning cases to Case Managers when they could instead be served from a pool.
- Develop staff performance measurements that establish Case Load metrics based on role capacity relative to any revised organizational structure and role definitions. Effective methods include performing time studies on specific roles and working teams of staff members who can identify and recommend additional work flow changes to establish expected capacity.
- Develop performance measurements relative to the other responsibilities of Case Manager such as Client intake, evaluation, service initiation, and overall time to achieve desired outcome. This creates a consistent method for Supervisors to assess staff and identify high/low performers as well as additional opportunities for improvement in the way services are provided by FCSO.
- Consider classifying clients on a simple scale based on the relative amount of effort required by Senior Options to support their needs and interactions with Case Management. This classification can be used to assist in the assignment of Clients to Case Managers and aid in identifying/managing the appropriate level of effort to Clients that require more Case Manager involvement.
- Develop a "Cost per Client" metric that adds the average overhead Agency costs for classes of Clients to the costs incurred for typical subsidies and other costs associated with FCSO providing service to a class of Clients. Once a typical "Cost per Client" is

identified and agreed upon, consider assigning dedicated Case Managers to a selected class(es) of Clients in circumstances where there is a very high cost-per-client to manage the risk of the Agency's investment in those Clients.

- Define development resource staff member(s) role to actively solicit additional sources of revenue from private corporate and civic philanthropic foundations to augment levy funding with focus on increasing number of clients served and no necessarily funding the operational expenses of FCSO.
- Implement responsibility for Supervisors to identify and agree on "Best Practices" for specific ACE and Case Management situations, then work to institutionalize those Best Practices across the organization to ensure consistent service delivery / experience to Clients. Monitor staff performance to ensure these experience and efficiency Best Practices are followed as well as to identify refinements to the Best Practices for as part of a quality improvement cycle of feedback and adjustment.
- Within Quality Improvement, separate Provider Management and Client Billing from the quality and process improvement activities. Provider Management and Client Billing would be focused on operational elements of selecting, contracting, and ensuring adequate delivery of Provider services to Clients as well as the generation of invoices to Clients. Elevate the quality/process improvement functions to be the change agent for continuous improvement and consistent education of Best Practices and policies across the organization. QI has demonstrated the ability to serve as a quality change facilitator in the past through facilitating strategic planning, leading satisfaction surveys, process flow mapping and improvements within the organization.
- Complete the update to the out-of-print Senior Citizen Information Handbook and publish the revision. Copy this information to a web-searchable structure on the FCOS website that is easier to keep current than a consolidated PDF file. Begin awareness effort to drive interest for this information to the FCSO website rather than a paper booklet that falls out of date quickly. Establish a periodic review by FCSO to ensure the material is accurate. Consider using the organizations included in the Information Handbook to periodically be prompted via email to review and recommend changes to their information through a web-form to capture and make changes to the resource in a timelier manner. Also, consider revising the structure of the handbook to describe information / resources that change less frequently and then direct readers to the Senior Options website for the most current Senior Information resources that are curated more frequently.

**High-Level Operational Flow
Incremental Model 1**
- Separate Call Management from Case
Management
- Pooled Case Managers
- Revise In-Home Assessment Capacity

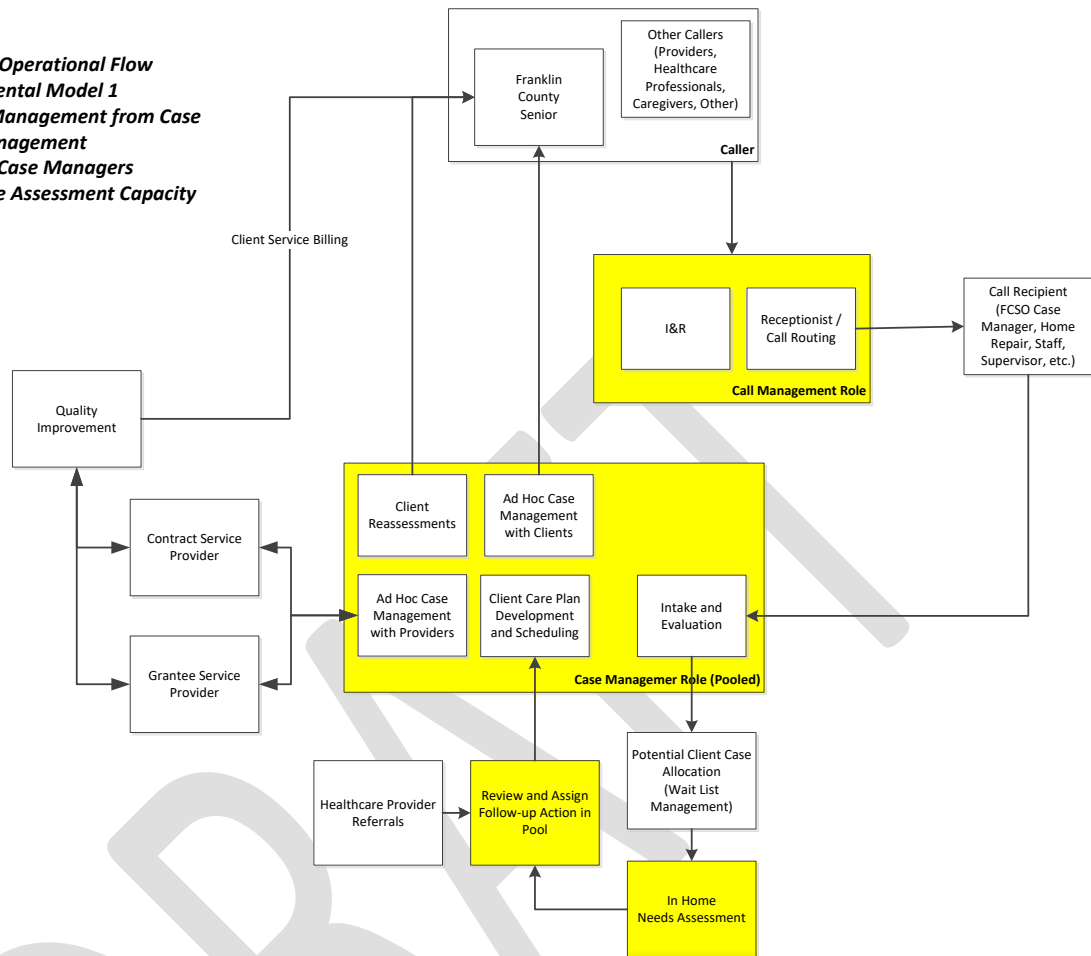


Figure 4 – Suggested High-Level Operational Flow Incremental Model 1

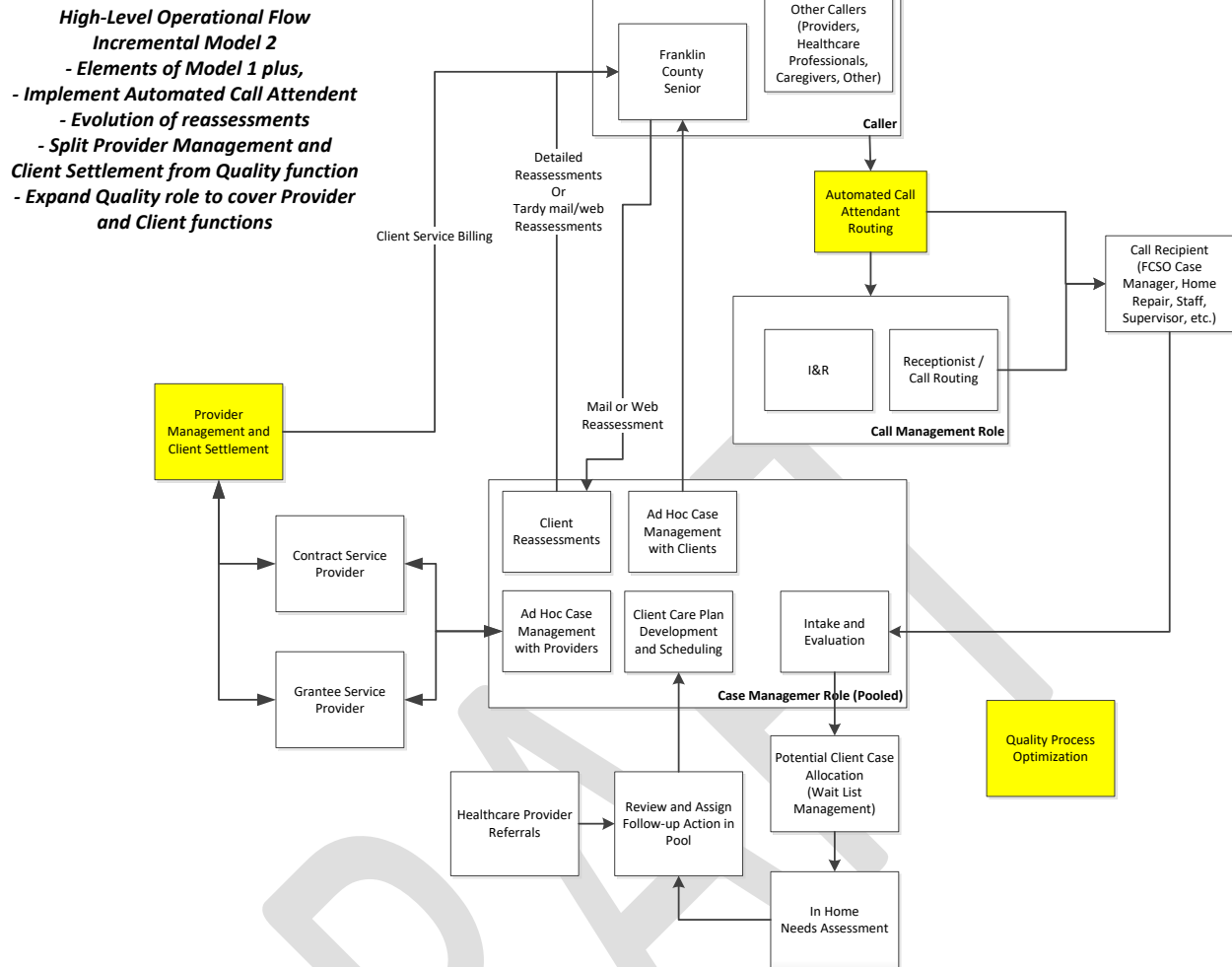


Figure 5 – Suggested High-Level Operational Flow Incremental Model 2

Recommendations: Technology

- Strengthen the strategic advisor relationship between FCOA IT Manager and CIO of the Franklin County Board of Commissioners to provide strategic guidance, mentorship and resources for expanding technology capabilities internal to FCSO.
- Extend IT Roadmap for the agency into an IT Application strategy.
- Replace Q Continuum: Document functionality needed, research replacement options in the market, select replacement, develop detailed requirements and implement new solution, and develop and implement a communication and change management plan, including training for all users (internal and external).
- Consider external IT services as a cost-effective means for expanding/contracting IT team capacity and expertise that flows with project and support demands.
- Redesign the FCOA web site:
 - Ensure site is optimized for mobile devices
 - Hire an external resource to consult on the design of the information architecture, site map, and navigation to ensure customer focus
 - Include a customer focus group in the design of the site.
 - Ensure resulting website redesign has a content management system that FCSO can maintain Client facing information resources
 - Reduce/eliminate use of PDF-format documents for delivering information. This will improve search effectiveness as well as allow for more frequent and relevant updates of useful information and resources to seniors.
- Research options for accepting money order and echeck payments for FCSO services provided to seniors.
- Research options for improving use of mobile technology for field personnel as well as for customers to interact with FCOA.
- Increase knowledge and use of Mitel phone system to support internal business practices and provide better external service.

Appendix A includes strategic options to consider for a replacement of Q Continuum system. The options include build versus buy strategies with advantages, disadvantages and staffing considerations to review.

IMPLEMENTATION ROADMAP

The following section includes detailed tasks for implementation of the recommendations included in this report. Implementation activities have been designated into two separate phases. The first phase includes activities to perform now and through the remaining Levy timeframe to establish a foundation for change. The second phase is the implementation of future focused activities to invest in a more efficient, effective agency.

PHASE I

Now through 2017 - Establish the Foundation for Change

- Create compelling reason for change for the organization. Develop messages to stay focused on the change management behaviors needed for the organization.
- Perform change management and culture transformation activities to move the organization through the current changes. Evolve the focus from primarily mission driven to a balance of mission and business productivity.
- Restructure the organization to establish two clear lines for business to operate: operations and administration. Create a matrixed organization flow where shared administrative services intersect and support operational services.
 - Establish the Director to operate at a more strategic level and provide vision, direction and prioritization of work while allowing each function to manage their own objectives to meet the goals of the agency.
 - Align similar levels of leadership to the Director in the new structure.
 - Focus the administrative area on providing the shared agency services that support the operational functions. These administrative services include: workforce development, information technology, finance and accounting, quality improvement etc. This area establishes the metrics, measures, forecasts and scorecards for the agency.
 - Focus the operations area on providing the services of the agency including case management and adult protective services. This area reports on the productivity of the staff in meeting the metrics, measures, forecasts and scorecards for the agency.
 - Establish leadership positions for each area to act as change agents.
 - Establish the leadership of each area to work together to monitor, adjust, course correct and communicate the results of the productivity and measures working together.
 - Add a workforce development position in Administration to assist with establishing performance expectations and accountabilities, conduct workforce planning activities perform recruiting, hiring and development of staff.
 - Establish levels of authority for each level of management in the agency and hold each position accountable to operate at that defined level.
 - Position the IT Department to apply technology systems and capabilities to improve workflow by automating business practices for the entire Agency.
 - Add a business analyst position in Information Technology to determine the business requirements in the selection of a new technology system. This role should be hired

with the intent of the person being mentored as a business continuity role for IT Manager.

- Position the Quality Improvement Department to be more involved in establishing, measuring, and monitoring productivity. Perform continuous quality improvement cycle.
- Provide management training to all levels of management to consistently provide guidance to the workforce about performance expectations and behaviors.
- Establish communication channels for sharing organization priorities (delegation, top-down) and work progress (escalation, bottom-up).
- Establish new performance accountabilities for all employees, separate policies that govern the agency from cultural behaviors that interpret the policies inconsistently. Use all resources to their fullest capacity.
- Communicate performance expectations and accountabilities throughout workforce consistently and frequently.
- Establish a strategic advisor relationship between FCOA IT Manager and CIO of the Franklin County Board of Commissioners to provide strategic guidance, mentorship and resources for expanding technology capabilities internal to FCSO.
- Document current business process flows and how they relate to the case management and other systems.
- Document business functionality needed in a new case management system and research options in the market.
- Complete the update to the out-of-print Senior Citizen Information Handbook and publish the revision.

PHASE II

2018-2022 - Focus on the Future

- Restructure case management program to separate I&R/Phone routing from client assessment and case management
- Reclassify positions with appropriate titles for the level of authority and span of control as well as the appropriate compensation for the responsibilities of the position.
- Select and replace Q Continuum: Use the functionality documentation in Phase I to inform further system research and to select a replacement for Q Continuum. Then develop detailed requirements, implement the new solution, and develop and implement a communication and change management plan, including training for all users (internal and external).
- Consider external IT services as a cost-effective means for expanding/contracting IT team capacity and expertise that flows with project and support demands.
- Redesign the FCOA web site:
 - Ensure site is optimized for mobile devices.
 - Hire an external resource to consult on the design of the information architecture, site map, and navigation to ensure customer focus.
 - Include a customer focus group in the design of the new system.

- Ensure resulting website redesign has a content management system that FCSO can maintain Client facing information resources.
 - Reduce/eliminate use of PDF-format documents for delivering information. This will improve search effectiveness as well as allow for more frequent and relevant updates of useful information and resources to seniors.
 - Redesign the Senior Citizens Information Handbook to a web-searchable structure on the FCOS website that is easier to keep current than a consolidated PDF file.
- Research options for accepting money order and echeck payments for FCSO services provided to seniors.
- Create career paths and development plans for all resources to increase competency and capabilities.
- Create career path and development plans for all positions.
- Determine a plan to capture institutional knowledge through cross training of critical points of failure positions.
- Identify ways to reduce wait list time in order to qualify and triage a client's needs sooner.
- Research and define an improved Senior Options service demand forecasting model that incorporates both enrollment and disenrollment rates by month/season to determine forecasted availability of funding for new clients for the next 12 months as well as through the remainder of the current fiscal year to have a more repeatable means of initiating service to clients that hinges on completion of the home assessment process
- Offer alternative reauthorization paths, such as mail-in summary reauthorizations or secure website in the future (as the Client base evolves to be more connected and technology savvy for reauthorizations) that require less information or Clients that are more comfortable with indirect contact). Consider using an exception model for follow-up calls for exceptions or missed/late reauthorizations that require less involvement.
- Separate the activities of Automatic Call Distribution (ACD) (inclusive of I&R, call routing and other receptionist/operation-like functions) from Case Management (inclusive of screening/qualifying, enrollment, client questions, and follow-up reauthorizations.)
- Evaluate the use of a single point, single choice automated call direction system for a specific audience of clients.
- Consider the benefits and efficiencies of using a pool approach for Case Managers to serve the Senior population. Case Managers, operating with consistent policy and best-practice practical skills should be able to provide the same decisions on care regardless of which Case Manager is interacting with a client. This would increase the probability that a client calling in with questions or to change their service would receive immediate service. Current practice of detailed case noting would allow more than one Case Manager to service a Client. This would also reduce a significant amount of Clerical's time reviewing and assigning cases to Case Managers when they could instead be served from a pool.
- Develop staff performance measurements that establish Case Load metrics based on role capacity relative to any revised organizational structure and role definitions. Effective methods include performing time studies on specific roles and working teams of staff members who can identify and recommend additional work flow changes to establish expected capacity.
- Develop performance measurements relative to the other responsibilities of Case Manager such as Client intake, evaluation, service initiation, and overall time to achieve desired

outcome. This creates a consistent method for Supervisors to assess staff and identify high/low performers as well as additional opportunities for improvement in the way services are provided by FCSO.

- Consider classifying clients on a simple scale based on the relative amount of effort required by Senior Options to support their needs and interactions with Case Management. This classification can be used to assist in the assignment of Clients to Case Managers and aid in identifying/managing the appropriate level of effort to Clients that require more Case Manager involvement.
- Develop a "Cost per Client" metric that adds the average overhead Agency costs for particular classes of Clients to the costs incurred for typical subsidies and other costs associated with FCSO providing service to a class of Clients. Once a typical "Cost per Client" is identified and agreed upon, consider assigning dedicated Case Managers to a selected class(es) of Clients in circumstances where there is a very high cost-per-client in order to manage the risk of the Agency's investment in those Clients.
- Define development resource staff member(s) role to actively solicit additional sources of revenue from private corporate and civic philanthropic foundations to augment levy funding with focus on increasing number of clients served and no necessarily funding the operational expenses of FCSO.
- Implement responsibility for Supervisors to identify and agree on "Best Practices" for specific ACE and Case Management situations, then work to institutionalize those Best Practices across the organization to ensure consistent service delivery / experience to Clients. Monitor staff performance to ensure these experience and efficiency Best Practices are followed as well as to identify refinements to the Best Practices for as part of a quality improvement cycle of feedback and adjustment.
- Within Quality Improvement, separate Provider Management and Client Billing from the quality and process improvement activities. Provider Management and Client Billing would be focused on operational elements of selecting, contracting, and ensuring adequate delivery of Provider services to Clients as well as the generation of invoices to Clients. Elevate the quality/process improvement functions to be the change agent for continuous improvement and consistent education of Best Practices and policies across the organization. QI has demonstrated the ability to serve as a quality change facilitator in the past through facilitating strategic planning, leading satisfaction surveys, process flow mapping and improvements within the organization.
- Research options for improving use of mobile technology for field personnel as well as for customers to interact with FCOA.
- Increase knowledge and use of Mitel phone system to support internal business practices and provide better external service.

CONCLUSION

The findings of the assessment determined that the current organization is functioning as the organization that has experience slow growth over many years. The agency has put in place processes and practices in response to the growth it experienced year after year without stopping to objectively review the structure, staffing and systems. This assessment has been the opportunity to review the workforce, process and technology in order to make recommendations to fix the fundamentals in order for the agency to respond to the future growth in a more repeatable, scalable way. Following the recommendations in the implementation roadmap will move the organization toward realizing these outcomes:

- An agency focus that maintains balance of delivering the mission while being good stewards of levy monies.
- An organization structure that creates career path and development opportunities for workforce business continuity planning.
- Increased productivity and measurable results driven from cross training, performance accountabilities and best practices.
- A more metric driven, measurable business of the delivery of Senior Services.
- An agency focused on continuous improvement, efficiencies, and effectiveness
- Updated technology and increased technology savvy providing less risk and improving both internal effectiveness and the customer experience.
- Better utilization of the workforce, processes and technology will allow FCSO to demonstrate with confidence the mission focused use of Levy monies.

APPENDIX A: REPLACEMENT OF Q CONTINUUM - STRATEGIC OPTIONS TO CONSIDER

Option	Advantages	Disadvantages	Staffing Considerations
1. Custom In-House: Purchase the Q code and assume ownership of the system locally within FCOA.	<ul style="list-style-type: none"> System will be customized for FCOA specifically and little change in process is required. Although the system will not be as secure itself, it would be more difficult for an outsider to gain access to the system from the outside, however access via phishing channels would be more likely. Expected to be least expensive initially. 	<ul style="list-style-type: none"> System will require significant overhead for maintenance and support. System will not keep up with feature advances in vendor systems.² Small in-house development teams tend to have less robust development practices than vendor teams.³ System would still have old technology and weak, outdated architecture unless totally redesigned and rewritten. More expensive over time Web developer would split time between web, intranet and the new system. 	<ul style="list-style-type: none"> Business Analyst is required for all options in order to ensure the correct solution is selected, maintained, supported, and leveraged effectively throughout the organization as changes occur. At least 1 additional developer would be needed since 2 staff members would be required to maintain the system. For initial “catch up” and implementation development, additional developer resources would be required.
2. Custom External Partner: Find a local, stable company to assist in development and support of a custom Q replacement.	<ul style="list-style-type: none"> System will be customized for FCOA specifically and little change in process is required. A company could put more resources on development than FCOA IT. Having the system supported by both an external vendor and FCOA IT decreases risk for continuity of support. 	<ul style="list-style-type: none"> System will not keep up with advances in vendor systems because vendor will provide updates as requested by FCOA. Web developer would need to split time between web, intranet and the new system. It is unlikely a company would accept the old Q code as it is, they would rewrite it. Expensive in short and long run. Need to decide if data from Q is archived or needs mapped into new system. 	<ul style="list-style-type: none"> Business Analyst is required for all options in order to ensure the correct solution is selected, maintained, supported, and leveraged effectively throughout the organization as changes occur.

² System will not keep up with feature advances in vendor systems because it is impossible for any small agency team to dedicate the resources and contain the expertise for constant industry study and rapid development advances. Also, the team would be internal focused and will not have other customers who provide innovative ideas for improvements; all ideas will need to come from FCOA.

³ Examples of Robust development practices recommended for systems containing sensitive personal data: Encrypted data (when at rest and in motion), version control, data architect expertise, application architecture expertise, regular testing with multiple operating systems and browsers, browser/OS patch testing, code review, regular penetration testing, testing for code security issues such as SQL injection, security certifications, bug roll-back contingencies, testers are separate from developers, testing teams test with detailed success criteria and automated scripts, etc.

Option	Advantages	Disadvantages	Staffing Considerations
<p>3. Vendor Product: Select Case Management owned and maintained by a stable company.</p> <p>3a. If you find a great product but it does not do everything you want, you could build (or partner with a development firm to build) custom applets that interface with it, (preferably with web services).</p>	<ul style="list-style-type: none"> • Vendors have product owners who do nothing but research industry needs and design technology to meet the evolving needs, so all vendor customers receive frequent updates to support industry best practices. • Vendors have teams of developers dedicated to maintaining the system and adding features regularly. • Robust development practices will make the system more stable, secure, scalable and supportable.⁴ • Vendor shares responsibility for security. • Most often a vendor product is less expensive than a custom system (total cost of ownership over life of system). SaaS (Software as a Service) products are especially cost effective and should be considered if they are available and meet most of business needs. 	<ul style="list-style-type: none"> • System will not be customized for FCOA specifically and this will require: <ul style="list-style-type: none"> ○ Significant change in processes will be required to leverage technology effectively. ○ Significant training will be required. ○ If a solution is selected which has updated architecture, smaller custom solutions may be created by FCOA to provide automation and features that are unique and mission-critical • A solution not custom for FCOA may result in stronger resistance to the change from staff; this may be mitigated by including staff in business process design and in demos/communications about the advantages of the “new”, but change will be difficult regardless. • Need to decide if data from Q is archived or needs mapped into new system. 	<ul style="list-style-type: none"> • Business Analyst is required for all options in order to ensure the correct solution is selected, maintained, supported, and leveraged effectively throughout the organization as changes occur. • At least 1 additional developer would need hired because 2 staff members would be required to maintain the system. • For initial “catch up” and implementation development, additional developer resources would be required.

⁴ Examples of Robust development practices recommended for systems containing sensitive personal data: Encrypted data (when at rest and in motion), version control, data architect expertise, application architecture expertise, regular testing with multiple operating systems and browsers, browser/OS patch testing, code review, regular penetration testing, testing for code security issues such as SQL injection, security certifications, bug roll-back contingencies, testers are separate from developers, testing teams test with detailed success criteria and automated scripts, etc.

Recommendation Category	Recommendation	2018 Status	2019 Status	2020 Status	2021 Projected	2022 Projected	Update
Organization Structure/Functional Flow	Restructure the organization to establish two clear line for business to operate: Operations & Administration	Completed	Completed Please note: Established 3 clear lines of business to operate: Operations, Administration, & Support Services	Completed	Completed		Added new positions beyond the recommendation. Established 3 clear lines of business to operate: Operations, Administration, and Support Services. Revised the Quality Improvement Manager to the Quality Improvement Administrator. Added a Deputy Director of IT and Business Analyst.
	Focus the administrative area on providing the shared agency services that support the operational functions. These administrative service include: workforce development, information technology, finance and accounting, quality improvement, etc. This area establishes the metrics, measures, forecasts and scorecards for the agency.	Completed	Completed Please note: Enhanced through Workforce development under Support Services leadership	Completed Please note: Further enhancements being explored.	Completed. Further enhancements being explored.	N/A	Administrative area was restructured to include Workforce Development, Quality Improvement, Grants, and Finance. Key performance indicators have been established for administrative areas and are tracked quarterly. Dashboards were created and are reported quarterly also. Progress toward KPIs have ongoing opportunities for improvement. APS metrics & measurement have been shared with QI. Changes have been proposed for programs funded in 2022 to support the Caregiver Support and the Kinship Program. Current KPI's and metrics will need to be reviewed, modified and/or revised for both programs. Also the KPI's for all three programs will need to complement and work with the KPI's of the other agency departments.
Organization Structure/Functional Flow	Focus the operations area on providing the services of the agency including case management and adult protective services. This area reports on the productivity of the staff in meeting the metrics, measures, forecasts and scoreboards for the agency.	Completed	Completed Please note: Enhanced through 2019 FCOA re-org to add Support Services division and increase leadership over APS	Completed	Completed		A leadership team is in place, including two assistant directors who oversee case management and Adult Protective Services. Metrics and measures for case management and adult protective services are collected and reported to ensure productivity of both departments. In 2022 a review of metric & measures of both departments should be reviewed to ensure they complement each other and demonstrate the older client is receiving the best service available.
	Establish leadership positions for each area to act as change agents.	Completed	Completed Please note: Enhanced through 2019 FCOA re-org to add Support Services division and increase leadership over APS	Completed	Completed		The Deputy Director of IT, Assistant Director of Social Services, Assistant Director of Operations, and Quality Improvement Administrator positions were created and filled.
	Establish the leadership of each area to work together to monitor, adjust, course correct and communicate the results of the productivity and measures working together.	In Progress	Continuous Progress	Continuous Progress	Continuous Progress	Completed	The Quality Improvement Department created dashboards of each program's key performance indicators and shares and discusses progress quarterly. Senior Options and QI teams working together to develop productivity expectations which are tied to case manager performance measures. Interdisciplinary Productivity Committee developed consisting of supervisors, case managers, and QI. Some measures that are being developed include: annual RAs completed in 30 days, online referrals are contacted in 3 business days, and reassessments are completed within 30 days. Best practices are being researched so measures can be finalized.
	Position the Quality Improvement Department to be more involved in establishing, measuring, and monitoring productivity. Perform continuous quality improvement cycle.	Incomplete	Incomplete	Planning Phase	Continuous Progress	Completed	Quality Improvement Department develops an annual quality improvement plan, identifies processes that can be improved, and coordinates internally and externally to implements projects based on strategic objectives. Senior Options and QI teams working together to develop productivity expectations. Interdisciplinary Productivity Committee developed consisting of supervisors, case managers, and QI. Some measures that are being developed include: annual RAs completed in 30 days, online referrals are contacted in 3 business days, and reassessments are completed within 30 days. Best practices are being researched so measures can be finalized.

Organization Structure/Functional Flow	Position the IT Department to apply technology systems and capabilities to improve workflow by automating business practices for the entire Agency.	Planning Phase	In Progress Please note: this includes Caregiver Program automation, KRONOS, Case Mgmt System Replacement, Electronic Billing Change Form	In Progress Please note: this includes teleworking, Case Mgmt System, & Business Analyst position	In Progress Please note: this includes the Case Mgmt System	Case management implementation expected to be no less than 12 months; Migrations will continue based on availability of FCDC staff	<p>Deputy Director of I.T. added to the team to develop I.T. strategy, policy, and roadmaps for FCOA in conjunction with the Franklin County Data Center and Board of Commissioners.</p> <p>In 2020, an I.T. assessment was performed by FCDC to identify areas of most significant I.T. risk exposure, areas in which industry standards are not observed or could be improved, and evaluate I.T. services and tools to determine if there are duplications within the environment compared to what the FCDC can provide. As a result of I.T. assessment, in July 2021, the FCDC took over the total support of FCOA's network and all associated network equipment at Memorial Hall. During Phase 2-3, FCDC will take over the administration of FCOA servers and Active Directory. Also, these activities will lead to the collapse of the AGIN domain.</p> <p>Lastly, we're in the process of implementing a new case management system. We are currently in the final stage of contact negotiations. Once negotiations are complete, we will begin the implementation; expected completion is expected to be by Q4 2022.</p>
	Establish the Director to operate at a more strategic level and provide vision, direction and prioritization of work while allowing each function to manage their own objectives to meet the goals of the agency.	Completed	Completed Please note: this was enhanced through 2019 FCOA re-org	Completed	Completed		Director was hired in 2019 and restructured the agency to allow each department to develop and manage departmental objectives and goals (i.e. Finance, IT, Senior Options, APS, Home Repair, Quality Improvement, and Caregiver) with Assistant Director oversight.
	Align similar levels of leadership to the Director in the new structure	Completed	Completed Please note: this was enhanced through 2019 FCOA re-org	Completed	Completed		Assistant Directors of Operation, Administration, and Support Services were established.
	Add a business analyst position in Information Technology to determine the business requirements in the selection of a new technology system. This role should be hired with the intent of the person being mentored as a business continuity role for the IT Manager	County Wide Collaborative Position	In Progress Please note: this was added as an RFR in 2019 Budget	In Progress Please note: to hire and deploy this position to support data analytics necessary to accomplish agency performance outcomes	In Progress (Expected Completion 12/31/21)	Expected to onboard business analyst by end of Q1 2022	We are in the process of hiring for a business system analyst to join the I.T. team at FCOA. The position is currently posted and will close on 11/3/2021. Expected to be completed by 12/31/2021.
Organization Structure/Functional Flow	Add a workforce development position in Administration to assist with establishing performance expectations and accountabilities, conduct workforce planning activities, perform recruiting, hiring and development of staff.	Completed	Completed	Completed Please note: there is a need to expand to reclass the position to Workforce Administrator	Completed		<p>Reclassified Workforce Coordinator to Workforce Administrator who leads recruitment, hiring, and development efforts.</p> <p>Created a LEAD training program for all supervisors on various topics including: Blueprint for Effective Supervision, Supervisor as a Teambuilder, Assert Yourself – Building Assertive Communication Skills, FMLA Management, Conducting Meaningful Performance Appraisals, Progressive Discipline Training, Ethics and Leadership, Implicit Bias & Cultural Competency Training, Leadership Compass, and Effective Coaching and Emotional Intelligence.</p>
	Reclassify positions with appropriate titles for the level of authority and span of control as well as the appropriate compensation for the responsibilities of the position.	In Progress	In Progress Please note: re-org continue this progress	In Progress	Completed		All positions were evaluated and the following positions were reclassified: Programmer Analyst 5, Program Administrator, QI Administrator, Workforce Administrator.
	Create career path and development plans for all positions.	Planning Phase	In Progress Please note: Career Path Framework developed and began deployment	In Progress Please note: Continued deployment of career path framework with staff	Continuous Progress		<p>Career development plan includes leadership training through The Ohio State University Leadership Center and Board of Commissioner HR trainings.</p> <p>This has opportunity to be strengthened (e.g. developing a mentorship program, shadow program, a day in X position, so internal employees can see different roles and learn what skills they may need to sharpen to obtain those roles)</p>

	Consider restructuring case management program to separate Information and Referral / phone routing from client assessment and case management.	Planning Phase	In Progress Please note: re-org begins the organizational structure	In Progress Please note: Development of the Client Intake Center to remove this responsibility from Case Managers	In Progress. Committee formed to create process.		It has been determined that using technology is the better solution. Included in the Case Management system upgrade technology is available such as an IVR that will allow for call routing, data collection, and dedicated call queues that shall allow for improved case management efficiency.
Workforce	Perform change management and culture transformation activities to move the organization through the current changes. Evolve the focus from primarily mission driven to a balance of mission and business productivity.	In Progress	In Progress Please note: lunch & learns and leadership trainings were held	Continuous Progress	Continuous Progress		Data analysis, management, and reporting; skillset from new leadership team; Workforce Administrator designed training curriculum of LEAD Series; participation in S4 Project Lift for executive team; enhancing one on one meetings; increasing communication across different departments and programs; implemented internal leadership meetings, MAPS training through OSU Glenn School for all employees.
	Hire a workforce development resource to establish programs and practices in organization design, workforce planning, training and development and performance management.	In Progress	In Progress Please note: this was enhanced through the 2019 FCOA re-org	In Progress Please note: there is a need to reclass the Workforce Administrator position, continued growth of Toastmasters formed in collaboration with FCPH & CSEA	Continuous Progress		Reclassified Workforce Coordinator to Workforce Administrator who is responsible for training, development, and performance management. 216 unique training opportunities were awarded to FCOA employees from 12/01/2021 – present, each employee has a \$400 training budget. 82 opportunities out of 216 was availed by staff for paid trainings, and staff also attended various BOC and community seminars that were free. Planning to partner with HHS agencies, specifically FCJFS, to offer Emerging Leaders program.
	Determine a plan to capture institutional knowledge through cross training of critical points of failure positions	In Progress	In Progress	In Progress	Continuous Progress		Developed department training manuals, began documenting departmental processes, implemented job shadowing opportunities, developed business continuity plan for IT, learning best practices from other HHS agencies and increasing shared awareness. Planning to use immersive training module within the new case management system. This is continuous process for the agency.
	Establish levels of authority for each level of management in the agency and hold each position accountable to operate at that defined level.	In Progress	In Progress	In Progress	Completed		The agency's authority levels now include supervisors, administrators, and (assistant) directors.
Workforce	Provide management training to all levels of management to consistently provide guidance to the workforce about performance expectations and behaviors	In Progress	Continuous Progress Please note: Required county trainings hosted at Memorial Hall and continuous individual training monitoring	Continuous Progress Please note: Expand on site trainings offered to all staff in conjunction with required trainings	Continuous Progress		The Workforce Administrator: <ul style="list-style-type: none"> • Developed and facilitates the LEAD Training Series for all levels of management at least once every month. • Guides supervisors through active disciplines and performance improvement plans. • Guides supervisors through writing meaningful performance appraisals. • Guides supervisors through various coaching and counseling sessions before advancing progressive discipline. • Purchased 14 Credits for Supervisors for MAPS Program from OSU's Glenn College. (Management advancement for Public Service Employees).
	Establish communication channels for sharing organization priorities (delegation, top-down) and work progress (escalation, bottom-up).	In Progress	In Progress Please note: Standing team & interdisciplinary team meetings & one on one meetings. Re-org to continue this progress. Quarterly all staff meetings.	Continuous Progress Please note: Standing team and interdisciplinary team meetings & one & one meetings. Re-org	Completed		Enhancing one on one meetings; increasing communication across different departments and programs; and implemented internal leadership meetings. Began participating in Performance Center which is a presentation of the agency's measures of success with other HHS agencies and county administrators. Developed quarterly QI reports that are shared throughout the agency. Utilize collaboration tools such as MS Teams for various departments. Continuous conversations and relationship building with FCDC, FCJFS, BOC, and FCHR.

	Communicate performance expectations and accountabilities throughout workforce consistently and frequently	In Progress	In Progress <i>Please note: Standing one on one meetings with Supervisor & employee bi-weekly</i>	In Progress	Continuous Progress		Enhanced one on one meetings, including discussion of performance expectations and accountability. Planning to develop productivity measures with case managers, first establishing measures to track, and then tracking measures monthly. Developed key performance indicators, including sharing progress.
Business Management	Identify ways to reduce wait list time to qualify and triage a client's needs sooner.	Planning Phase	In Progress	In Progress	Completed		Methods to triage resident needs and qualify them for services were implemented and evolved as the result of the COVID-19 Pandemic. As the result eligibility and enrollment for services occur during the Initial Assessment.
	Research and define an improved Senior Options service demand forecasting model.	Planning Phase	Planning Phase	In Progress	Completed		Utilizing Microsoft Excel forecasting feature based on previous years' data, current year enrollment data, and forecasting at the upper and lower bounds based on outreach, publicity, and advertising efforts and results.
Business Management	Offer alternative reauthorization paths, such as mail-in summary reauthorizations or secure website in the future (as the Client base evolves to be more connected and technology savvy for reauthorizations).	Planning Phase	Planning Phase	Planning Phase	Completed <i>Please note: this includes the Case Mgmt System</i>		The implementation of the Resident facing portal and the new Case Management system will provide ways for Residents to be connected and offer additional methods for Residents to engage with FCOA.
	Separate the activities of Automatic Call Distribution (ACD) (inclusive of I&R, call routing and other receptionist/operation-like functions) from Case Management (inclusive of screening/qualifying, enrollment, client questions, and follow-up reauthorizations.)	Planning Phase	In Progress	In Progress	In Progress		Customer Service models were reviewed that include multiple operations such as "receptionist and case management" tasks. Using a model that separates these tasks has proven to be problematic and has the potential to create backlogs, silos, and inefficiency. The agency is exploring the use of technology to increase efficiencies in customer call routing. For example, the utilization of call routing at the agency level (e.g. press 1 for Senior Options, press 2 for Adult Protective Services, press 3 for...) would decrease the call routing activities. FCOA has decided to maintain current ACD structure in its handling of calls to Senior Options, as I&R functions are a critical entry point to enrollment in the program, and case managers are highly trained in the provision of information and referral services. (May also be good to list the customer service models that were reviewed just in case they ask.)
	Evaluate the use of a single point, single choice automated call direction system for a specific audience of clients.	Planning Phase	Planning Phase	In Progress <i>Please note: this was developed in conjunction with the Mitel enhancement</i>	In Progress	Functionality will be included during the implementation of the new case management system (TBD)	The new case management system will include an Interactive Voice Response (IVR) and Tele-case module. At a high level, these tools will consist of: - A single local number that individuals can call to access specific FCOA services - Redirect to a centralized IVR system - A call tree that will be able to read data from the database of the system (client and/or provider-specific data) - Ability to incorporate multiple languages - Post-call surveys and call recording - messaging feature for virtual communication (chat) - Real-time language translation (auto-translate) - Video conference (person-to-person)
ent	Consider the benefits and efficiencies of using a pool approach for Case Managers to serve the Senior population. Case Managers, operating with consistent policy and best-practice practical skills should be able to provide the same decisions on care regardless of which Case Manager is interacting with a client.	Planning Phase	Planning Phase	In Progress	In Progress <i>Please note: deploy pilot with low need clients through the Client Intake Center</i>		It has been determined that using technology is the better solution. Included in the Case Management system upgrade technology is available such as an Interactive Voice Response (IVR) that will allow for call routing, data collection, and dedicated call queues that shall allow for improved case management efficiency.

Business Management	Develop staff performance measurements that establish Case Load metrics based on role capacity relative to any revised organizational structure and role definitions. Effective methods include performing time studies on specific roles and working teams of staff members who can identify and recommend additional work flow changes to establish expected capacity.	Planning Phase	In Progress	In Progress	In Progress	FCSO program leadership developed and implemented a Client Stratification Tool to provide a structured and systematic approach to assess the client's need for level of case management. The program also developed additional levels of case management, with corresponding contact schedules for both telephone based and home visiting case management activities. There are clients who truly need FCSSO to solely fund their service, usually transportation. These clients have a low need for case management, and we are now able to place them at a CM level that is most appropriate and avoids "over case managing" these clients. Additionally, the Stratification Tool will be used at reassessment levels to determine any changes in needs, which allows for adjustment in the level of case management assigned to the client. Additional development of staff performance metrics is an area of ongoing work for the program.
Business Management	Develop performance measurements relative to the other responsibilities of Case Manager such as Client intake, evaluation, service initiation, and overall time to achieve desired outcome.	Planning Phase	In Progress	In Progress	In Progress	Senior Options and QI teams working together to develop productivity expectations which are tied to case manager performance measures. Interdisciplinary Productivity Committee developed consisting of supervisors, case managers, and QI. Some measures that are being developed include: annual RAs completed in 30 days, online referrals are contacted in 3 business days, and reassessments are completed within 30 days. Best practices are being researched so measures can be finalized. For both the Caregiver support and Kinship program, performance measurements need to be developed around client intake process, service initiation, evaluation of services and if an older adult was referred onto additional services. Will work with Senior Options and the Quality Assurance Department on the development of performance measurements.
	Consider classifying clients on a simple scale based on the relative amount of effort required by Senior Options to support their needs and interactions with Case Management.	Planning Phase	In Progress	In Progress	Completed	The program leadership team developed a stratification tool to classify the level of care clients need.
	Develop a "Cost per Client" metric that adds the average overhead Agency costs for classes of Clients to the costs incurred for typical subsidies and other costs associated with FCSSO providing service to a class of Clients.	Incomplete	Planning Phase	In Progress	In Progress	One class of clients consists of those served through the agency's FCSSO single entry point (SEP), (614)525-6200 for Information and Referral (I&R) services. FCSSO staffs this SEP with seven CMs daily to appropriately manage call volume. Each FCSSO CM spends 8 hours weekly on I&R activities. In January of 2022, FCSSO is launching a new Resource Database which will enable CMs to obtain more appropriate data as to caller's needs for I&R services and for assessment for enrollment into FCSSO.
Business Management	Define development resource staff member(s) role to actively solicit additional sources of revenue from private, corporate, and civic philanthropic foundations to augment levy funding with focus on increasing number of clients served and not necessarily funding the operational expenses of FCSSO.	Continuous Progress	Continuous Progress	Continuous Progress	Continuous Progress. Example is the collaboration with the Columbus Foundation for the tech grants.	In 2021, several Tech Grants were awarded to community organizations to increase older adults access and knowledge to technology, while also addressing social isolation. The grants were a combination of FCOA funding and local community foundations and private entities. An Internal team along with community members is being developed to identify ways to increase collaboration as well as funding resources to serve older adults. The group will help identify the needs of the adults that are outside of the traditional services offered through Senior Options and Home Repair. Outside funding will allow for potential pilot programs to be offered and evaluated for programs and services. Collaborated with COAAA and OSU's Age Friendly Innovation Center on the community needs assessment and utilized an existing FCJFS contract to conduct focus groups which saved approximately \$100,000.

Bus	Implement responsibility for Supervisors to identify and agree on "Best Practices" for specific ACD and Case Management situations, then work to institutionalize those Best Practices across the organization to ensure consistent service delivery / experience to Clients.	Planning Phase	In Progress	Continuous Progress	Continuous Progress		The program certifies all case managers and supervisors in Alliance of Information and Referral Systems (AIRS accreditation). AIRS accreditation requires and provides training and standards for delivery of quality information and referral services. This is continuously improved.
Business Management	Within Quality Improvement, separate Provider Management and Client Billing from the quality and process improvement activities. Provider Management and Client Billing would be focused on operational elements of selecting, contracting, and ensuring adequate delivery of Provider services to Clients as well as the generation of invoices to Clients.	Incomplete	Incomplete	Planning Phase	Continuous Progress	Completed	Quality Improvement Department and Finance Department worked together to automate the billing change form in 2018. QI now only works with Finance to resolve client concerns about invoice discrepancies. In 2022, the agency plans to restructure the QI Department to continue focusing on quality assurance/compliance and increase efforts around quality improvement including data analysis, process improvement, productivity, and KPI management across the agency. Within the current organizational structure FCOA does not have adequate staffing to complete the restructure in the QI department as envisioned at this time.
	Complete the update to the out-of-print Senior Citizen Information Handbook and publish the revision. Copy this information to a web-searchable structure on the FCOS website that is easier to keep current than a consolidated PDF file. Begin awareness effort to drive interest for this information to the FCSO website rather than a paper booklet that falls out of date quickly.	Incomplete	In Progress	In Progress	In Progress	FCOA staff will continue to review and maintain resource database to ensure that is up-to-date.	We have implemented the LSS resource database on the FCOA website (resources.officeonaging.org). As we researched a viable solution for a web-searchable handbook, FCOA discovered that the senior citizen handbook and the resource database had similar information. We are currently comparing data in the handbook to the resource database. We will import any data not already in the database. Also, we are presently researching the printing functionality of the resource database to allow older adults and their families to request a printed handbook if desired. Ongoing efforts require to add and maintain agency data in resource database.
Technology	Strengthen the strategic advisor relationship between FCOA IT Manager and CIO of the Franklin County Board of Commissioners to provide strategic guidance, mentorship and resources for expanding technology capabilities internal to FCSO.	In Progress	Continuous Progress	Continuous Progress	Continuous Progress	Continuous Progress - Strengthening relationship with BOC CIO have been taken over by the Deputy Director of IT.	Since his arrival, the Deputy Director of I.T. has made efforts to have continuous engagement with the CIO of the Board of Commissioners and the CIO of the FCDC and JFS. This includes having monthly 1:1 meetings, receiving guidance on the new case management system implementation, and mentorship to enhance I.T. efforts at FCOA. In an effort to replace our legacy case management, we have collaborated with the CIOs from Franklin County Data Center and the Board of Commissioners. Both Adam Frumkin (FCDC) and Juan Torres (BOC) provided guidance based on their experience with Software-as-a-Service (SaaS) implementations in Franklin County. They have participated in the Request for Proposal (RFP) process, software demos, vendor selection, and contract negotiations.
	Extend IT Roadmap for the agency into an IT Application strategy.	Incomplete	Planning Phase	In Progress	In Progress	Migrations will be dependant upon FCDC time and availability; Case Management System implementation expected to be completed by end of Q4 2022.	Use Microsoft Office 365 suite, offered through FCSC, so that employees can access software via the cloud (Word, Excel, Teams and more). The new case management system will be web-based to allow for access from anywhere. It will also include a client portal for older adults and their families to access their specific case management data. Also, will include a providers portal. As a result of the IT Assessment performed by FCDC, migration of infrastructure to FCDC will allow us to focus more on the support of the case management system and local desktop requests. Donated 90+ desktop computers to FCDC to reinforce the importance of a hybrid and mobile workforce.

	Replace Q Continuum: Document functionality needed, research replacement options in the market, select replacement, develop detailed requirements and implement new solution, and develop and implement a communication and change management plan, including training for all users (internal and external).	Planning Phase	In Progress Please note: contractor hired to progress agency through planning of system conversion	In Progress Please note: contractor working through RFI & RFP process	In Progress	Kickoff expected in Q1 2022; Project estimated to be Q4 2022.	Mapping of business processes took place in 2018. Request for Information and Request for Proposal took place in 2020. We have identified a vendor with the best viable solution and are currently in the final stages of contract negotiations. The estimated start of project kickoff is expected to begin in Q1 2022.
Technology	Consider external IT services as a cost-effective means for expanding/contracting IT team capacity and expertise that flows with project and support demands.	Planning Phase	Completed Please note: Contractors in place	Completed Please note: Contractors in place, exploring collaboration with Franklin County Data Center	Completed	Migrations to FCDC will be dependant upon FCDC staff availability through 2022.	FCOA contracted a project manager for the new case management system project. FCOA has since explored ways to collaborate with FCDC to expand our team's capacity. FCOA transitioned our network support in June of 2021 to remove the burden of network maintenance from the FCOA IT staff. Phase 2-3 will begin as soon as FCDC staff is available and include migration of all physical service and collapse of the AGIN domain.
	Redesign the FCOA web site.	Completed	Completed	Completed	Completed	No further work needed at this time	FCOA received the Board of Commissioners website template in April 2017. FCOA redesigned the website to include responsive and mobile-friendly functionality. The website went live in June 2021.
	Research options for accepting money order and echeck payments for FCSO services provided to seniors.	Planning Phase	In Progress Please note: Surveyed clients and caregivers regarding desire for this solution.	Completed Please note: Development and deployment	Completed	Complete	Point & Pay online system went live on February 19, 2020. Survey issued by Q1 in 2019 to assess need for this solution.
	Research options for improving use of mobile technology for field personnel as well as for customers to interact with FCOA.	In Progress	In Progress Please note: Will be deployed through system conversion	In Progress Please note: Will be deployed through system conversion	Completed	FCOA IT will continue to identify tools and technology that will improve business processes and functions.	To maintain a hybrid and mobile workforce, the agency primarily uses laptops (Dell and Surface) to allow for our user base to become more mobile. We donated 90+ desktop computers as a result of having a mobile workforce. Field personnel currently utilize iPads for job functions. GlobalProtect VPN technology allows users to access shared network drives while working remotely. The new case management system will be web-based and accessed via an app on a mobile device. FCOA plans to upgrade iPads, implement a new case management system, and research technology to allow staff to be more flexible and mobile in the coming years. (ex., smartphones, cloud storage, automation, etc.)
	Increase knowledge and use of Mitel phone system to support internal business practices and provide better external service.	Planning Phase	Planning Phase	In Progress	Completed	Continous Improvement	FCOA Management has been utilizing the reporting to better understand call volume and implement or revise best practices.FCDC has plans to upgrade the voicemail system in the 4th quarter of 2021. Licenses wont work if the upgrade is not performed. In addition, FCOA has met with FCDC to understand the functionality and capabilities of the Mitel Phone System. Below is the Mitel functionality that is presently available to FCOA and/or in-development. *Call Center Queue Dashboard (in use by FCOA) *ADHOC/Historical Reporting (Queue and Agent Level) *Mitel Smartphone Phone App *MICollab Softphone Software *Microsoft Teams Softphone *Call Recording *Interactive Voice Response (IVR) *After-Call Survey .

Franklin County Senior Options Sliding Fee Scale Effective January 1, 2009

[illegible][illegible]

Effective January 1, 2022

Note: Income categories run down the left side and asset categories run across the top

[illegible][illegible]