

**SUBMITTAL TO THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

850



FROM: Office on Aging

SUBMITTAL DATE:
May 25, 2016

SUBJECT: Riverside County Office on Aging 90 Day Status Report

RECOMMENDED MOTION: That the Board of Supervisors:

1. Receive and File the Riverside County Office on Aging 90 Day Status Report

BACKGROUND:

Summary

On behalf of the Director of Office on Aging appointed January 7, 2016, please accept the attached 90 Day Status Report on the Office on Aging operations and progress. During this initial period, the Office on Aging Leadership Team participated in the development of a three-year Strategic Plan, which includes goals and objectives, and an analysis of the organization's strengths and weaknesses. The Strategic Plan will serve as a road map to maintain and improve the organization over the next three years.

(Continued on Page 2)


Anna L. Martinez
Director

Departmental Concurrence

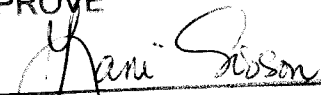
FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost:	POLICY/CONSENT (per Exec. Office)
COST	\$ 0	\$ 0	\$ 0	\$ 0	Consent <input checked="" type="checkbox"/> Policy <input type="checkbox"/>
NET COUNTY COST	\$ 0	\$ 0	\$ 0	\$ 0	
SOURCE OF FUNDS: N/A				Budget Adjustment: N/A	
				For Fiscal Year: 2015/2016	

C.E.O. RECOMMENDATION:

APPROVE

County Executive Office Signature


BY:


Lani Sioson

MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Benoit, seconded by Supervisor Washington and duly carried, IT WAS ORDERED that the above matter is received and filed as recommended.

Ayes: Jeffries, Washington and Benoit
Nays: None
Absent: Tavaglione and Ashley
Date: June 7, 2016
xc: OoA

Kecia Harper-Ihem
Clerk of the Board
By: 
Deputy

- A-30
- Positions Added
- 4/5 Vote
- Change Order

Prev. Agn. Ref.:

District: ALL

Agenda Number:

2-11

SUBMITTAL TO THE BOARD OF SUPERVISORS, COUNTY OF RIVERSIDE, STATE OF CALIFORNIA

FORM 11: Riverside County Office on Aging 90 Day Status Report

DATE: May 25, 2016

PAGE: Page 2 of 2

BACKGROUND:

Summary (continued)

The 90 Day Status Report also contains the following:

- An overview of the Office on Aging including a description of the department's organizational structure and a brief overview of the programs and services the department provides;
- A brief summary of the 2016 Operational Strategic Plan developed and implemented by the Office on Aging Leadership Team on February 3, 2016;
- A synopsis of the 2016-2020 Riverside County Area Plan on Aging, "The Changing Face of Aging", approved by the Board of Supervisors on May 24, 2016; and
- A budget summary, which includes total estimated revenues, revenue trends, total estimated expenditures, staffing trends, information regarding the current office space, and funding for the Older Americans Act programming.

Impact on Citizens and Businesses

Office on Aging provides more than 24 different programs and services, either directly or through contracted providers to constituents of Riverside County. All of the services assist older adults to remain independent, in their homes and communities, and are provided free of charge to those who qualify.

ATTACHMENTS:

- A. 90 Day Status Report for Riverside County Office on Aging



90 DAY STATUS REPORT

Anna L. Martinez, Director

With Baby Boomers in the United States reaching age 60 at the rate of 330 people every hour, many older adults and people with disabilities of all ages will require improved community based services and support so that they can choose the best options for themselves and their families as they age. Critical to the aging process will be programs and services that focus on independence, health and wellness, nutrition, long term care and developing meaningful partnerships that coordinate services amongst service organizations.

Included in this overview:

- Overview of Office on Aging.....Pg. 1
Overview of Programs and Services.....Pg. 1
Operational Strategic Plan.....Pg. 3
Synopsis of the Area Plan on Aging.....Pg. 4
Community Assessment Survey Results.....Pg. 9
Area Plan Goals.....Pg. 11
Budget Summary..... Pg. 11
Conclusion and Future Outlook.....Pg. 17

OVERVIEW OF OFFICE ON AGING

- The Riverside County Office on Aging (OoA) is one of 33 Area Agencies on Aging (AAA) in California. OoA operates with an annual budget of approximately \$13 million in federal, state, and local funds. Office on Aging currently has 68 authorized positions, and - as of the date of this update - 54 positions filled. The Executive Team consists of the director and two deputy director positions for fiscal and program operations. The program deputy position is currently in the recruitment process.
The Department is organized into operational units, each of which is overseen by a supervisor/lead. Operational units include Fiscal and Administration, Care Coordination and Caregiver Services, Contracts and Nutrition, Options Counseling and Decision Support - including Grandparents Raising Grandchildren services, Employment Services, and Planning and Community Services (including Healthy Lifestyle and Wellness programs, Social Activity and Community Engagement programming, Outreach and Community Education services, and Planning services).
Please see Attachment A - Office on Aging Organizational Chart

OVERVIEW OF PROGRAMS AND SERVICES

- The Office on Aging provides more than 24 different programs and services, either directly or through contracted providers. All of the services assist older adults to remain independent, in their homes and communities, and are provided free of charge to those who qualify.

The following is a brief summary of services and programs offered by the Office on Aging:

- Care Coordination: These services offer frail and vulnerable older adults, persons with disabilities, and their caregivers an alternative to more costly institutional and nursing home care by offering options for home-based services, and a variety of options for care in the home. Trained social workers and public health nurses conduct comprehensive in-home evaluations and provide links to critical services and respite, training, and support groups for caregivers. Care coordination programs also assist older adults with care transitions from hospital to home and reduce the rate of costly readmissions.
Services include long term and short term case management, award winning caregiver support programs, hospital liaisons for discharge patients, and services for grandparents who are raising their grandchildren.
In FY 2014/15, Office on Aging and contracted providers provided over 7,600 hours of care coordination services.
Three of the care coordination programs won state and national awards in FY 2015/16.



2. **Options Counseling and Decision Support:** The Office on Aging provides interactive decision-support and option counseling to consumers, family members, and/or caregivers to assist with any decisions related to services and care options appropriate to the consumer's needs, preferences, values, and individual circumstances.
- Services include information and assistance with referrals to in-house, other county, community based services and programs through the 800 number (1-800-510-2020) and the Network of Care web portal, legal assistance, health insurance counseling, long-term Ombudsman, elder abuse prevention, and assisted transportation. The information line is staffed by trained and certified Information Specialists.
 - During FY 2014/15, the Office on Aging and contracted providers assisted over 35,000 callers on the 800 line, provided over 3,000 hours of legal services, and over 15,000 one way trips.
3. **Healthy Lifestyle and Wellness Programs:** The Office on Aging provides an array of services and programs to assist older adults with maintaining their overall health and wellness as they age. Office on Aging assists older adults with understanding what a critical role good health plays in the quality of the aging process.
- Specific programs and services include physical fitness, chronic disease self-management, congregate and home delivered meals, nutrition education, behavioral health screenings for depression, and activities that promote social engagement and connections with others.
 - See Table 1 for detailed performance data for Health and Wellness programs in FY 2014/15.

Table 1

FY 2014/15 Levels of Service for Health and Wellness Programs

Health & Wellness Program/Service	FY 2014/15 Levels of Service
Chronic Disease Self-Management Classes (6 week module)	150 graduates
Exercise and Fitness Programs	30 weekly classes for 1,100 participants
Congregate and Home Delivered Meals	Over 550,000 to more than 6,000 older adults
Health and Nutrition Education	Over 10,000 hours
Pre-Depression Screening (through Riverside University Health System – Behavioral Health partnership)	1,500 screenings

4. **Social Engagement and Community Activity:** The Office on Aging provides specific programs and services designed to encourage social connections and to keep older adults active in their communities through activities like continued employment, intergenerational activities with school age youth and younger adults, and opportunities to volunteer in the local community.
- Specific programs and services include the nationally sponsored Retired Senior Volunteer Program (RSVP), which has operated in the Coachella Valley for more than 40 years, intergenerational volunteer activities and events that bring together younger and older volunteers, and service-based training and employment for low-income, unemployed adults over age 55 with low employment prospects.



5. **Advocacy and Coordination:** The Office on Aging initiates two (2) ongoing collaborative efforts designed to assist providers and partners with providing services to older adults:

- ***Aging & Disability Resource Connection (ADRC):*** In 2008, the Riverside County Office on Aging received an Aging and Disability Resource Connection (ADRC) designation and is part of a collaborative effort of the U.S. Administration on Aging and the Centers for Medicare and Medicaid Services. The collaboration initiative is designed to streamline access to long-term services and supports by creating a “no wrong door” approach to assisting all individuals, regardless of age, ability or income. ADRC partners work together to help consumers with planning for their current and future long-term care needs and to advocate for consumers and clients. The ADRC Coalition meets quarterly.



- ***Grandparents Raising Grandchildren Task Force (GRGTF):*** The goal of the GRGTF is to address the multiple and complex issues faced by grandparents who are the primary caregivers of their grandchildren. The Task Force serves to identify needs and resources, collect data, advocate on behalf of grand-parents, and educate other service providers about the special needs and concerns of the GRG population. The GRGTF meets quarterly.



6. **Outreach and Community Education:** The Office on Aging offers information and education through a variety of programs and services:

- Programs include two (2) general information vans and a Healthy Lifestyle van each staffed by Information Specialists who travel throughout the County attending community events, visiting senior and community centers and other places where older adults congregate, to provide information about the Office on Aging services and other services available throughout the County for older adults.
- In FY 2014/15, Office on Aging reached over 16,000 older adults and caregivers.

7. **Planning Services:** The Planning team is responsible for research, legislative analysis, developing and analyzing community assessments, tracking and evaluating program performance, developing public education information (*such as presentations, publications, reports, etc.*), and drafting and updating the four-year *Riverside County Area Plan on Aging*. These activities help to determine the current and future needs of older adults in the County.

OPERATIONAL STRATEGIC PLAN

- ◆ On February 3, 2016, the Leadership Team of the Office on Aging met to develop a three year operational strategic plan. During the daylong session, the participants reached consensus on a new mission statement for the Department, conducted a Strengths, Weaknesses, Opportunities and Threats (S.W.O.T.) analysis and developed four goals with specific objectives.
- ◆ The new mission of the Office on Aging is as follows:

“The Riverside County Office on Aging serves to promote and support a life of dignity, well-being and independence for older adults and persons with disabilities.”



- ◆ The operational goals are as follows (*in no specific order*):
 - Improve organizational efficiencies and effectiveness;
 - Enhance services for older adults and persons with disabilities and their caregivers;
 - Improve internal and external communication; and
 - Enhance effective use of technology.
- ◆ Following the initial session, Department’s leadership agreed to meet and work together to complete the stated objectives by July 1, 2016, and to convene again in July of 2016, to continue the process by developing new objectives for the following six months.

**SYNOPSIS OF THE 2016-2020 RIVERSIDE COUNTY AREA PLAN ON AGING,
“THE CHANGING FACE OF AGING”**

- ◆ Every four (4) years, the Office on Aging, is required to develop and submit an “Area Plan” to the State of California in accordance with the guidelines set forth in the Older Americans Act (*Amended in 2006*) Sections 306(a) and 307(a)(1)). To that end, the Office on Aging developed the **2016-2020 Area Plan on Aging for Riverside County**, which was approved by the Board of Supervisors on May 24, 2016.
- ◆ Developing the 2016-2020 Area Plan included analysis of the following:
 - United States Census and other related demographic data;
 - Existing surveys and reports;
 - Approximately 3,000 Community Assessment Surveys conducted by Office on Aging from June 2014 to January 2016;
 - Stakeholder comments from focus groups and public hearings; and
 - Program data and research information related to demographic projections and policy trends.
- ◆ Key research findings highlighted in the Area Plan that affect older adults in Riverside County both today and in the future include:



Riverside County Older Adult Population Projections

- The aging Boomer generation (those born between 1946 and 1964) began turning age 60 in 2006. The advance of this generation into older adulthood equates to 330 people turning 60 every hour until December 31, 2024.
- Between 1990 and 2020, Riverside County will experience a 200% increase in persons over the age of 60. The fastest growing cohort proportionately are those over the age of 75, which is projected to grow between 240% (*age 75-84 years*) and 443% (*over 85 years*) by 2060.
- By the year 2060, there will be approximately one million adults over age 65, who will make up approximately 25% of the total population in Riverside County.

**Table 2** *Riverside County Population Projections 2010-2060*

Age Group	2010	2060	% of Increase
ALL Age Group (Total Population)	2,194,933	3,678,439	68%
Working Age (25-64 years)	1,085,492	1,750,307	61%
Young Retirees (65-74 years)	141,479	388,792	194%
Mature Retirees (75-84 years)	86,228	293,310	240%
Seniors (85+)	32,776	178,133	443%

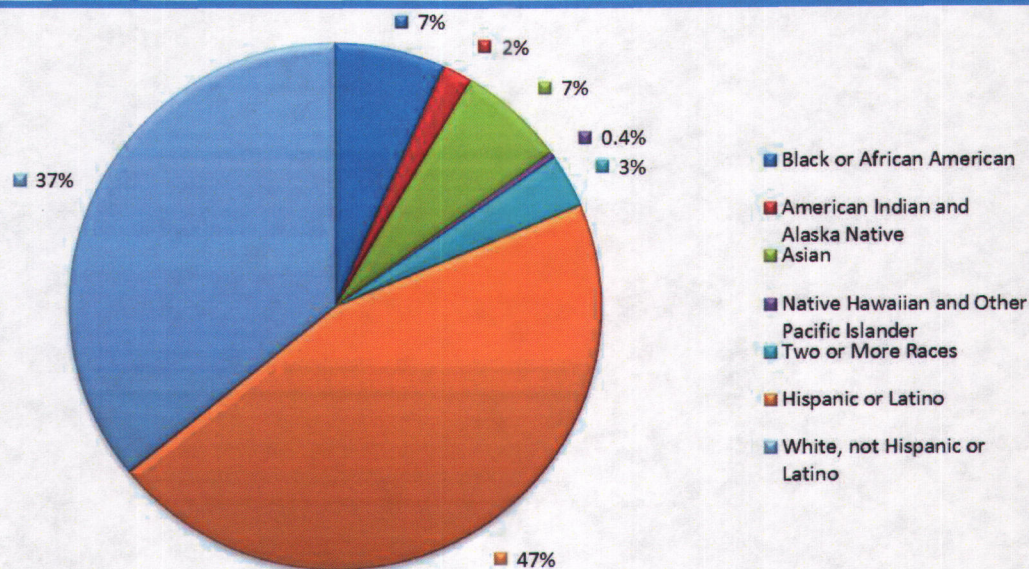
*P-1 (Age): State and County Population Projections by Major Age Group: 2010-2060. Year 2010.
California Department of Finance, Demographic Research Unit (December 2014)*

- The unprecedented growth in the older adult population will mean a demographic shift that will necessitate infrastructure changes to meet the needs of this population.

Ethnic and Cultural Diversity

- Per the United States Census (2014 updated data), the population of Riverside County is divided into specified racial/ethnic categories and the demographics are as follows: 47% Hispanic or Latino; 37% White (not-Hispanic or Latino); 7% Black or African American; 7% Asian; 2%; American Indian and Alaska Native; 0.4% Native Hawaiian and Other Pacific Islander; and 3% reported two or more races.

- Figure 1 illustrates the population by ethnicity in Riverside County.

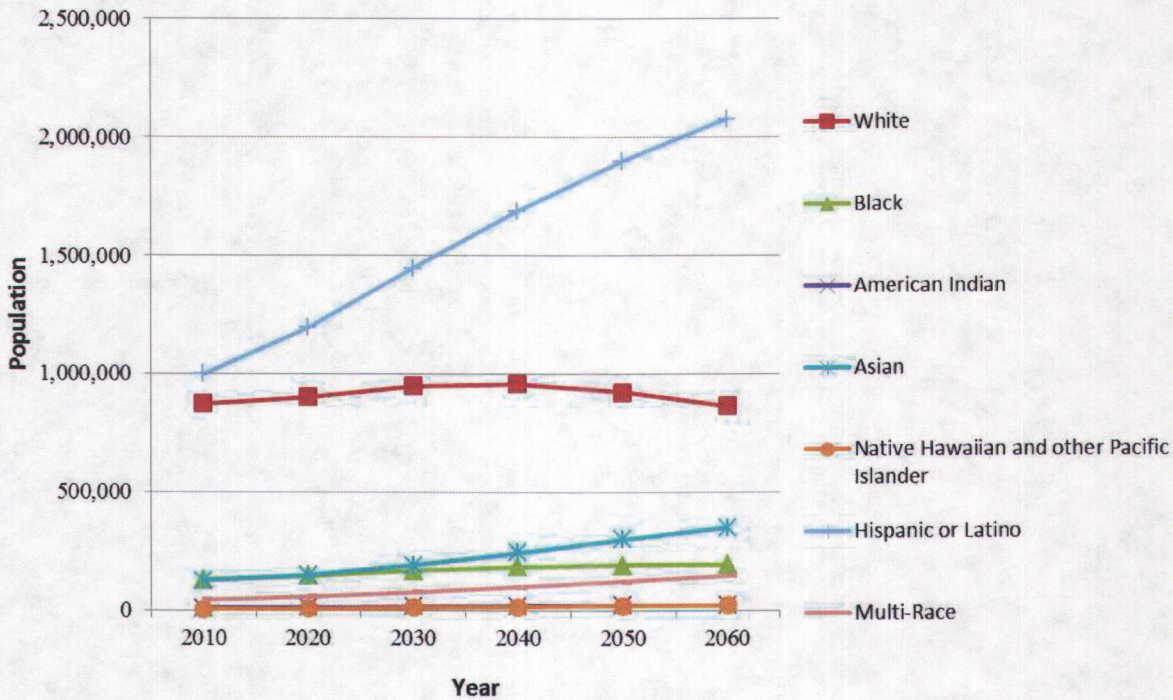
Figure 1 *2014 Riverside County Population by Ethnicity*

*United States Census American Fact Finder 2010-2014 American Community Survey 5-Year Estimates: Riverside County.
Data retrieved from: <http://www.census.gov/quickfacts/table/PST045215/06065,00>*



- The growing diversity will require the Office on Aging to adopt or develop new, culturally competent methods for service delivery.
- As ethnic populations increase, the varying backgrounds of the population will require alternative delivery systems and require professionals, providers, and caregivers who are sensitive to cultural differences and how those differences impact care.
- Figure 2 shows the projected growth of the ethnic population between 2010 and 2060.

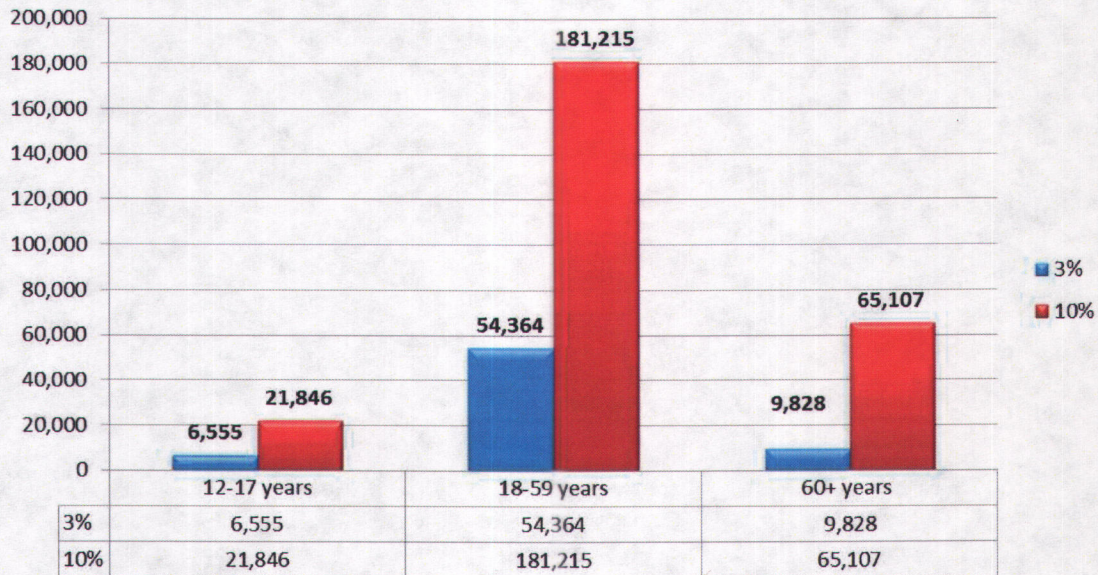
Figure 2 2010-2060 Projected Population Trend for Riverside County by Racial/Ethnic Groups



State of California, Department of Finance, Population Projections for California and Its Counties 2010-2060, by Age, Gender and Race/Ethnicity, Sacramento, California, December 2014

Older Adult Lesbian, Gay, Bi-Sexual and Transgender (LGBT) Population

- Riverside County’s current self-reported LGBT population is approximately 4.5%, making the County one of the largest LGBT communities, per capita, in the nation.
- Population estimates are likely to underestimate the true size of the LGBT population due to the reluctance of some individuals to identify as LGBT. In 2011, studies estimated the older adult LGBT population to be between 9,828 and 65,107 persons residing in Riverside County (Figure 3, Page 7).

**Figure 3*****Estimated LGBT Population of Riverside County by Age Group, 2011***

Gardner, Arron T. "Lesbian, Gay, Bisexual and Transgender Health and Wellness Profile". Riverside County Public Health. County of Riverside, 2014. <http://www.rivcoph.org/Portals/0/LGBT_Health_Wellness_2014.pdf>. [accessed February 2016]

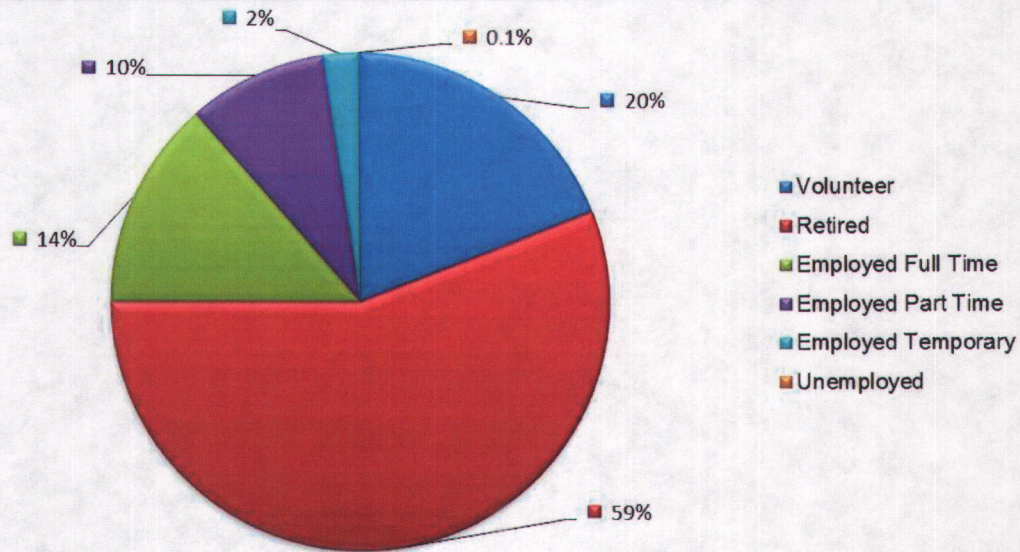
Workforce and Volunteerism

- Stock market fluctuations, the recent housing crisis, the privatization of retirement funds, and the recent debates over Social Security, leave many Boomers unsure about retirement. As a result, many are delaying retirement.
- In Riverside County,
 - ⇒ 24% of older adults (12% of the total workforce) are still working.
 - ⇒ 22% of older adults in the workforce are employed and 2% are unemployed.
- Based on surveys conducted by the Office on Aging, 20% of older adults also remain active through volunteering (Figure 4, page 8).



Figure 4

Current Employment Status of OoA Surveyed Older Adult Population, 2015



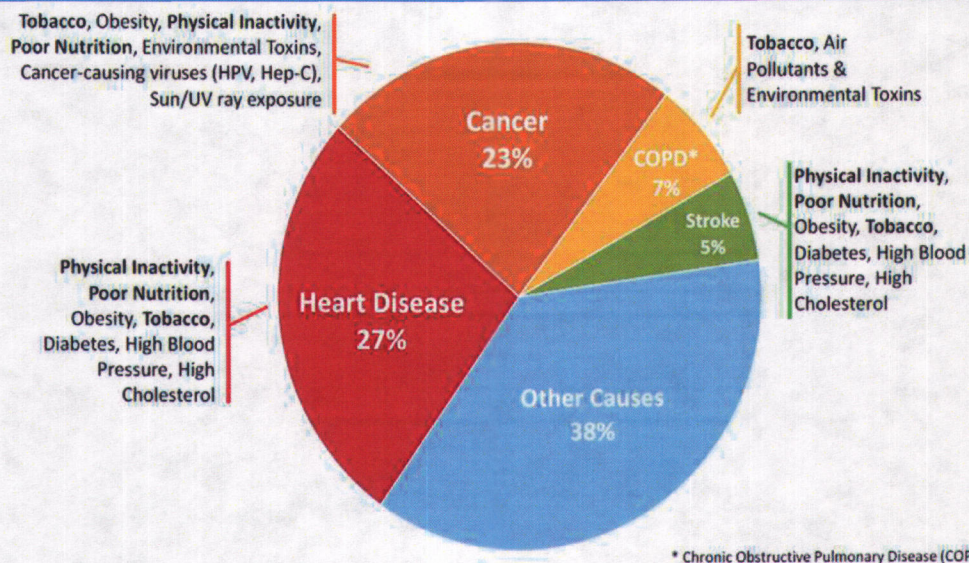
Riverside County Office on Aging Community Assessment Survey results: January 2014 to February 2016

Health and Wellness

- **Chronic Disease:** By 2030, 6 of every 10 Boomers in the U.S. will be living with multiple chronic conditions. The leading cause of death in Riverside County is heart disease for residents of all ages.
- **Alzheimer’s Disease (AD):** Currently 11% of Riverside County’s older adult population has AD. Between 2012 and 2014, AD cases increased by 1.2%. Based on both the national and statewide trends, Riverside County can expect a significant increase in those suffering from the disease.
- Figure 5 shows the leading causes of death in the general population of Riverside County in 2012.

Figure 5

Leading Cause of Death and Contributing Risk Factors, General Population, Riverside 2012

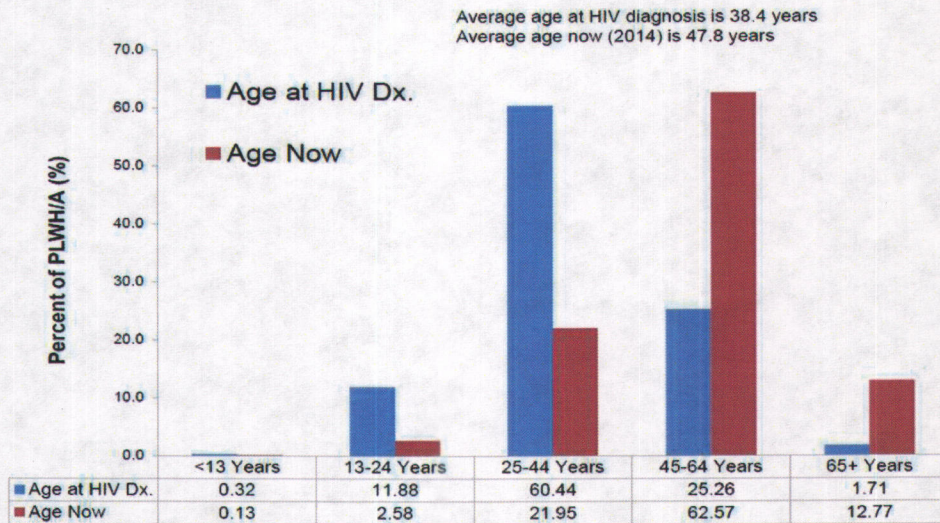


* Chronic Obstructive Pulmonary Disease (COPD)



- **HIV/AIDS:** According to a 2014 study by the Riverside University Health System – Public Health, approximately 70% of people living with AIDS and 48% of people living with HIV in Riverside County are over 50 years old.
- Between 2012 and 2014, 30% of all new HIV cases were in people 50 years or older, most of whom reside in the Coachella Valley.
- Figure 6 highlights the number of people by age who were living with HIV or AIDS in 2014.

Figure 6 *PLWH/A* by Age at Time of HIV Diagnosis (Dx) vs. Age Now (2014)*
 *People living with HIV/AIDS



County of Riverside Department of Public Health, *Epidemiology of HIV/AIDS in Riverside County, 2014, Epidemiology & Program Evaluation. Presented in 2012 at "Think Tank" for Desert Aids Project*

Family Caregivers

- Family caregivers are the backbone of the long term care system in the United States, with 55% of all caregivers contributing more than 21 hours of care per week.
- Boomers are the first generation that may spend more time caring for their parents than their own children. Research shows that caregiving can have deleterious behavioral and physical health effects on caregivers with serious consequences for society.
- Seventeen percent (17%) of the 43.5 million caregivers nationally indicated that in general their health has gotten worse since they assumed their caregiving responsibilities.

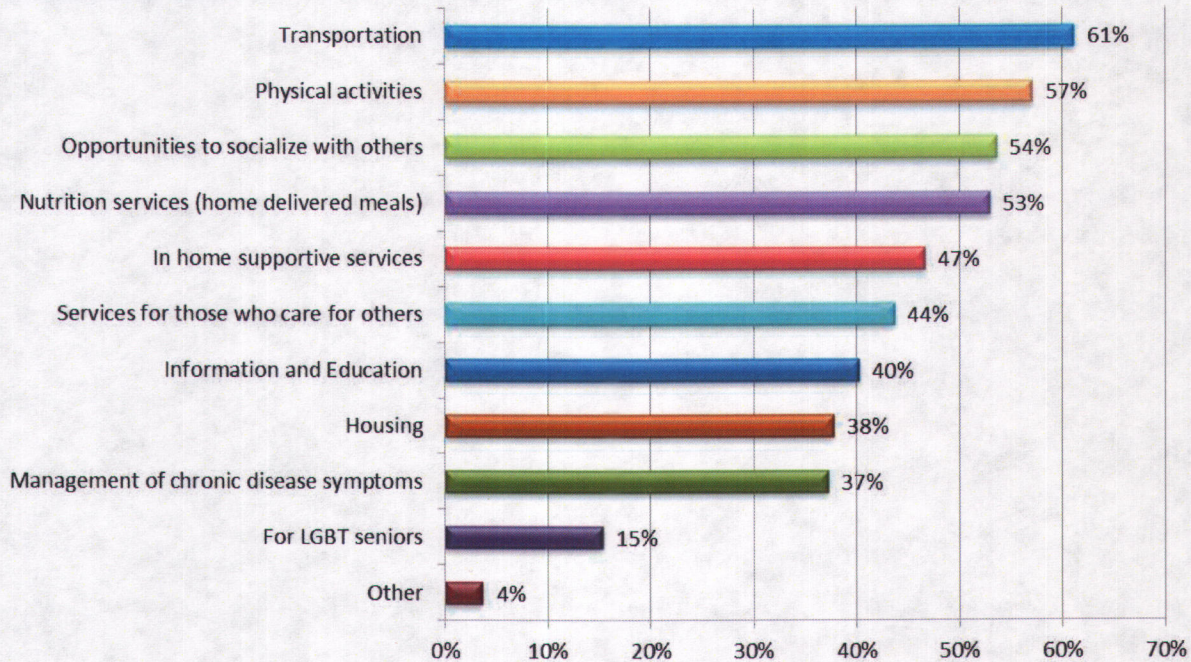
COMMUNITY ASSESSMENT SURVEY RESULTS

- ◆ Between June 2014 and January 2016, the Office on Aging collected 2,972 surveys from older adults in Riverside County at various community events, during support groups with caregivers, from senior and community centers throughout the County, the older adult LGBT community, via phone through Information and Assistance calls, and by mail from those receiving services.



◆ A brief summary of the survey results is as follows:

Figure 7 *Survey Question: What types of services do you need now and/or will you need in the future?*



Riverside County Office on Aging Community Assessment Survey results: January 2014 to February 2016

1. **Top Priorities:** Older adults identified transportation (61%), physical activities (57%), opportunities to socialize with others (54%), and nutrition services (53%) as the most important services needed both now and in the future.
2. **Nutrition Focus:**
 - Nutrition surveys of participants from all nutrition sites showed that 40% of participants eat only one (1) meal per day – the one at the nutrition site;
 - 41% of those surveyed eat at a meal site five (5) days a week;
 - 53% of participants have been eating at the sites for more than two (2) years;
 - 24% have been utilizing nutrition sites for meals for more than five (5) years; and
 - Approximately 67% live at or below the poverty level.
3. **LGBT Focus:** 43% of respondents indicated that physical health, such as access to LGBT friendly health and long term care, and staying healthy were the highest concern, followed by discrimination (41%) and behavioral health services and support (40%).
4. **Elder Justice Focus:** 58% of those surveyed selected scams and telemarketing as the most important elder justice issue, followed by consumer fraud (81%).
5. **Caregiving Focus:** 80% of respondents indicated that support for caregiver behavioral health, education, and training are “very important” to address, followed by affordable alternatives to care (79%).



2016-2020 AREA PLAN GOALS AND OBJECTIVES

- ◆ Based on the key research findings and community assessments, the Office on Aging developed the following goals:
 - **Goal I: “Access is Key”, Enhancing Local and Community Based Services:** To develop programs and participate in efforts that provide opportunities for older adults, persons with disabilities and target populations to access local and community based services; to advocate for policies and legislation, and coordinate with community partners to address systemic issues affecting older adults and persons with disabilities such as transportation and affordable housing.
 - **Goal II: “Be Strong, Live Long”, Campaign for Health and Wellness:** To empower older adults and those with disabilities to improve their health and quality of life through community-based activities and initiatives that focus on preventative services, health and wellness, chronic disease self-management, behavioral health, social activation and engagement, employment, nutrition, and lifelong learning.
 - **Goal III: “Aging on Your Terms”, Independence, Person-Centered Care and Caregiving:** To provide options for long-term services and supports (LTSS) and focus on disaster preparedness and elder justice issues, which allow older adults and individuals with disabilities to preserve their independence and remain in their homes and communities for as long as possible; to provide essential support services, education and respite to caregivers; to advocate for caregivers, including grandparents raising grandchildren, who are a vital source for long term care and family and community stability.
 - **Goal IV: “Working Beyond Partnerships”, Developing True System Integration:** To work with existing and new community-based partners to strengthen infrastructure and service delivery system for older adults and persons with disabilities by increasing awareness, providing information and assistance and integrating access to services. To initiate or engage in collaborations and activities that increases the number of geriatric professionals and paraprofessionals in Riverside County and to educate current providers about issues concerning older adults and persons with disabilities.
- ◆ Each goal has a set of specific sub-objectives that can be found in the -- *2016-2020 Area Plan on Aging for Riverside County*, approved by the Board of Supervisors on May 24, 2016.

BUDGET SUMMARY

- ◆ The Riverside County Office on Aging’s adopted budget for FY 2015/16, in the amount of \$12,833,489 was approved by the Board of Supervisors on July 7, 2015. During the fiscal year, increases to the budget were approved through Form 11’s in the amount of \$699,429 to include federal one-time-only funding and other grant fund increases to result in a current budget of \$13,532,918.
- ◆ The Riverside County Office on Aging relies heavily on funding through the Older Americans Act (OAA), to provide core services to the County’s most frail and vulnerable older adults and persons with disabilities. In recent years, Older Americans Act programs have required increased resources to maintain current program operations due to population growth and cost inflation. Statistics indicate that by the year 2020, the age 65+ group will increase from 307,217 to more than 375,000 in Riverside County, and will be approaching over half a million by 2030. The unprecedented growth in older adult population will mean a demographic shift that will necessitate infrastructure changes to meet the needs of the growing population.

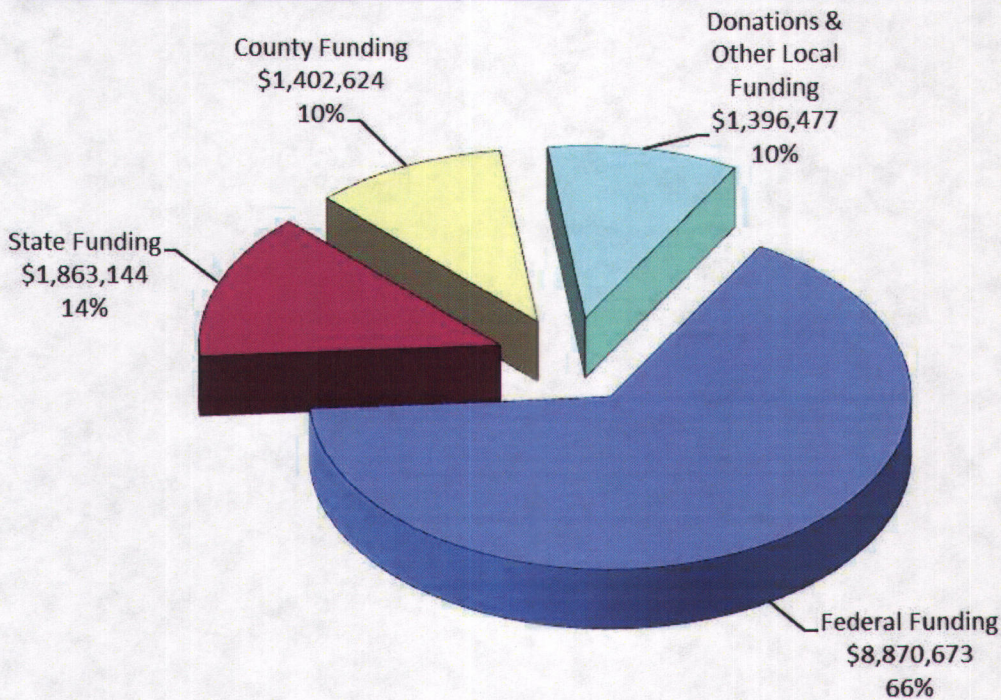


- ◆ The Office on Aging faces challenges entering FY 2016/17 in providing critical core services to Riverside County older adults due to the continuation of flat state and federal funding over the past three years. The Department has exercised sound fiscal management and has been able to mitigate the direct impact on core services through a number of cost-saving measures, such as strategically not filling vacant authorized positions. The Department submitted a balanced budget for FY 2016/17; however the core services and programs we provide to the frail, isolated older adults of Riverside County will be impacted in the coming year as a result of increased labor costs, along with continuing increases in indirect costs.

Total Estimated Revenues

- ◆ The Office on Aging’s budget is comprised of four revenue sources, including Federal (Older Americans Act), State (Older Californians Act), County Contributions and Donations, and Other Local funding. Primary funding for the Department is Federal funding, which totals \$8,870,673, approximately 66% of the total Department budget for FY 2015/16. Figure 8 below summarizes Office on Aging’s budget by funding source.

Figure 8 *Office on Aging Funding for Fiscal Year 2015-16*



Revenue Trends

- ◆ As shown in Table 3 (page 13), the Office on Aging’s revenue trends have been increasing since FY 2013/14. This is attributed to State supplemental funding and an increase in other local funding, such as an increase in funds from Department of Public Social Services – in the form of childcare subsidies for the Grandparents Raising Grandchildren program through First 5 Riverside. Although the trends are positive, the increases in revenue are very program specific and cannot be utilized for the overall operation of the department.



Table 3 *Summary of Funding FY 2012/13 - FY 2016/17*

Description	FY 2012/13	FY 2013/14	FY 2014/15	FY 2015/16 Current Budget
Office on Aging	\$ 12,523,642	\$ 12,375,887	\$ 13,082,830	\$ 13,532,918

Total Estimated Expenditures

- The Office on Aging’s total expenditures for FY 2015/16 increased by \$450,088 from FY 2014/15:
 - ⇒ Salaries & Benefits: net increase of \$346,193 due to increase in labor costs from union concessions;
 - ⇒ Supplies & Services: net increase of \$48,548 due to increase in Internal Service Fund (ISF) rates; and
 - ⇒ Other Charges: net increase of \$55,347 due to contractual agreements with service providers.

Figure 9 *Office on Aging Appropriation for Fiscal Year 2015-16*

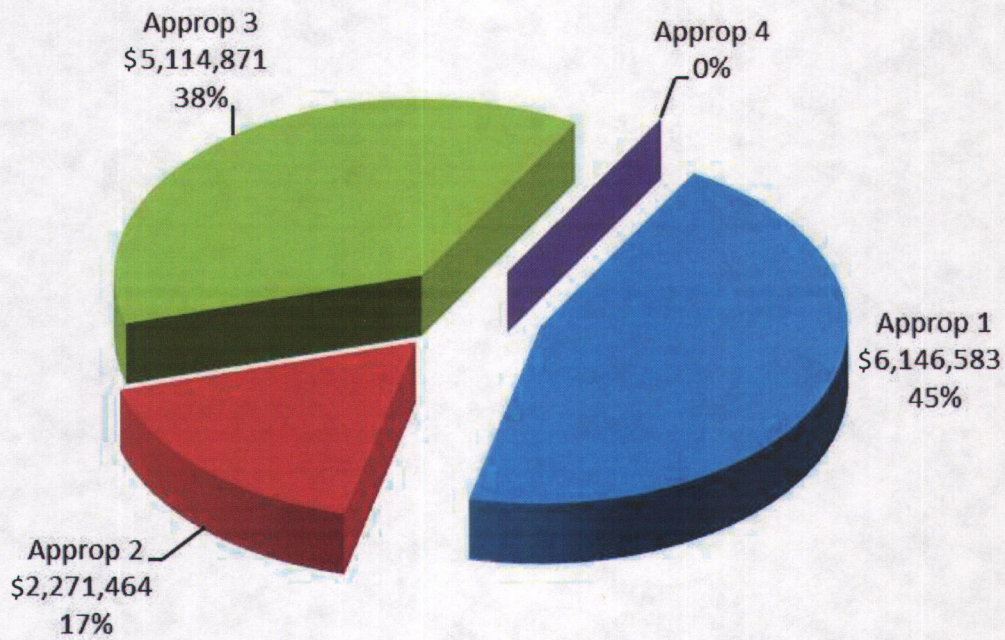




Table 4

Summary of Expenditures FY 2012/13 - FY 2015/16

Description	FY 2012/13	FY 2013/14	FY 2014/15	FY 2015/16 Current Budget	FY 2016/17 Proposed Budget
Approp 1 - Salaries & Emp Benefits	\$ 5,803,714	\$ 5,500,642	\$ 5,800,390	\$ 6,146,583	\$ 6,544,833
Approp. 2 - Supplies & Services	\$ 1,992,503	\$ 2,241,612	\$ 2,222,916	\$ 2,271,464	\$ 1,776,438
Approp 3 - Other Charges	\$ 4,640,156	\$ 4,633,633	\$ 5,059,524	\$ 5,114,871	\$ 4,558,601
Approp 4 - Fixed Assets	\$ 87,269	\$ -	\$ -	\$ -	\$ 56,000
Total:	\$ 12,523,642	\$ 12,375,887	\$ 13,082,830	\$ 13,532,918	\$ 12,935,872

◆ Although a balanced budget was submitted for FY 2016/17, the Office on Aging continues to experience an increase in labor costs, in the amount of \$398,250 going into next fiscal year, along with increases in ISF charges. The Department recognizes the significant fiscal challenges the County faces moving into the new fiscal year. Alongside the commitment of the Executive Office, the Office on Aging is dedicated to holding the line on spending levels, maximizing existing resources, and pursuing further operating efficiencies. However, as identified in Table 5, the Office on Aging has experienced substantial decreases in County contributions since FY 2009/10, totaling \$652,480 through FY 2013/14. The \$212,368 in funding received in FY 2014/15 was specifically designated for the Senior Nutrition Program to feed older adults through our congregate and home-delivered meal program and has been allocated as such since then. In addition, the Office on Aging is appreciative of the assistance of County contributions in the amount of \$300,000 received in FY 2015/16 to mitigate increased costs. In order to continue to meet the growing needs of our older population, the Office on Aging respectfully requests the continuance of assistance of County contributions at FY 2015/16 levels in the amount of \$300,000 for FY 2016/17.

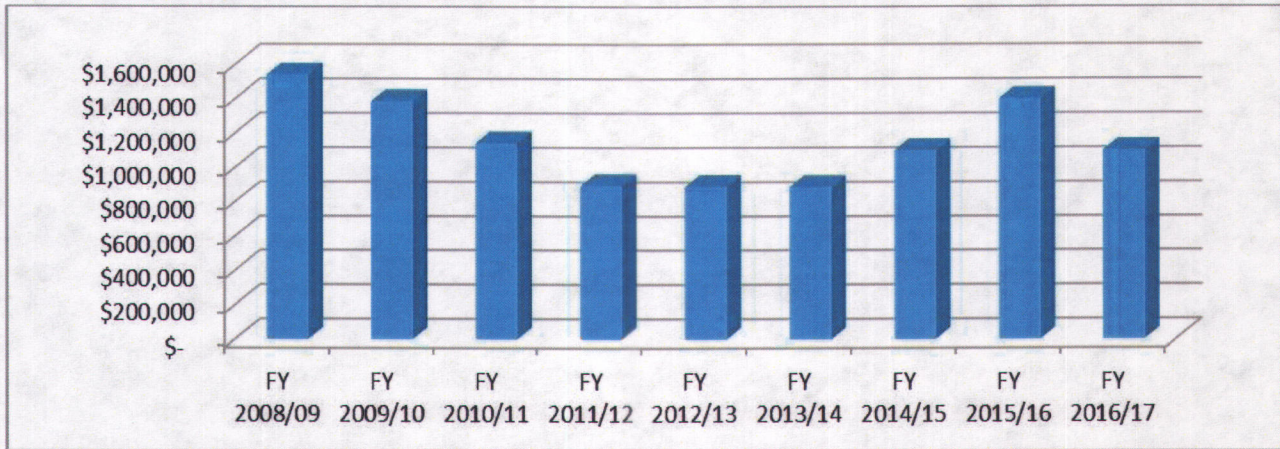
Table 5

County Contributions by Fiscal Year

Fiscal Year (FY)	County Contributions	Increase/Decrease From Prev. FY	Increase/Decrease From Prev. FY (% Change)
FY 2008/09	\$ 1,542,736		
FY 2009/10	\$ 1,388,471	\$ (154,265)	-10.0%
FY 2010/11	\$ 1,144,853	\$ (243,618)	-17.5%
FY 2011/12	\$ 896,256	\$ (248,597)	-21.7%
FY 2012/13	\$ 891,256	\$ (5,000)	-0.6%
FY 2013/14	\$ 890,256	\$ (1,000)	-0.1%
FY 2014/15	\$ 1,102,624	\$ 212,368	23.9%
FY 2015/16	\$ 1,402,624	\$ 300,000	27.2%
FY 2016/17	\$ 1,102,624	\$ (300,000)	-21.4%



Figure 10 *County Contributions*

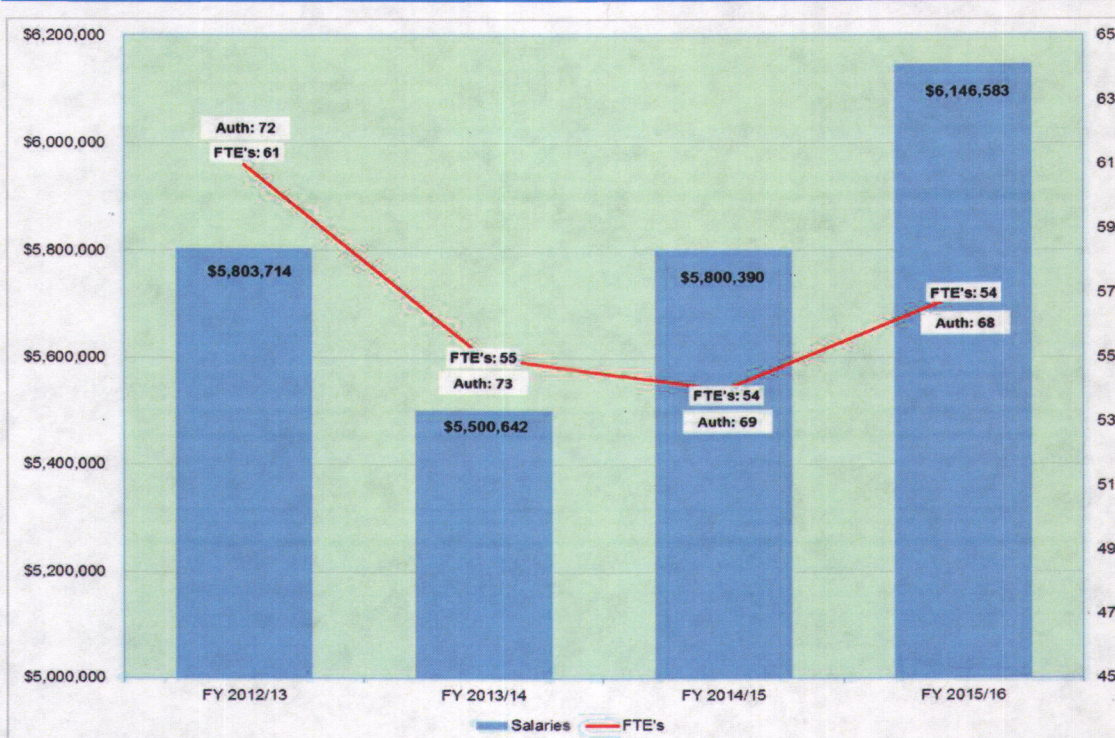


Staffing Trends

- ◆ The Office on Aging practices a conservative approach to the hiring of permanent staffing since the funding for both Older Americans Act and Californians Act is very volatile. Although the Department has had a maximum of 73 authorized positions over the past four fiscal years, the Department has not filled permanent positions that may be at risk of lost funding. The Department has utilized temporary assistance when there is a short-time operational necessity for projects or programs.

As Figure 11 depicts, the cost of labor has continued to increase over the past four fiscal years although the total staffing has remained stagnant.

Figure 11 *Cost of Labor Increase*





Succession Planning

- ◆ As a strong advocate of succession planning, the Office on Aging's Executive Team is in the process of evaluating the Department's organizational structure and will be making recommendations to restructure for improved efficiency and to fill key positions, such as the Deputy Director for Senior Services position. Although the Department is smaller in nature, the Office on Aging delivers services throughout the County, as such there is a greater need for leadership oversight and direction for the Department.
- ◆ Succession and workforce planning is essential, especially in a smaller Department, to identify internal employees as potential candidates for filling future vacancies that may arise within the organization and start training them well ahead of time to perform those roles. Every organization will have some form of job vacancy arising in the future due to attrition or retirement. However, it is important to continue to function smoothly irrespective of losing key employees who perform key roles. When organizations have a succession plan, it makes it easier for them to handle any unforeseen attrition and prevents the organization from being greatly impacted by such attrition. In addition, internal employees already have a good understanding of the organization and its goals. Thus, it saves a considerable amount of time and cost for the organization in hiring and inducting new candidates for these positions.

River Crest Facility

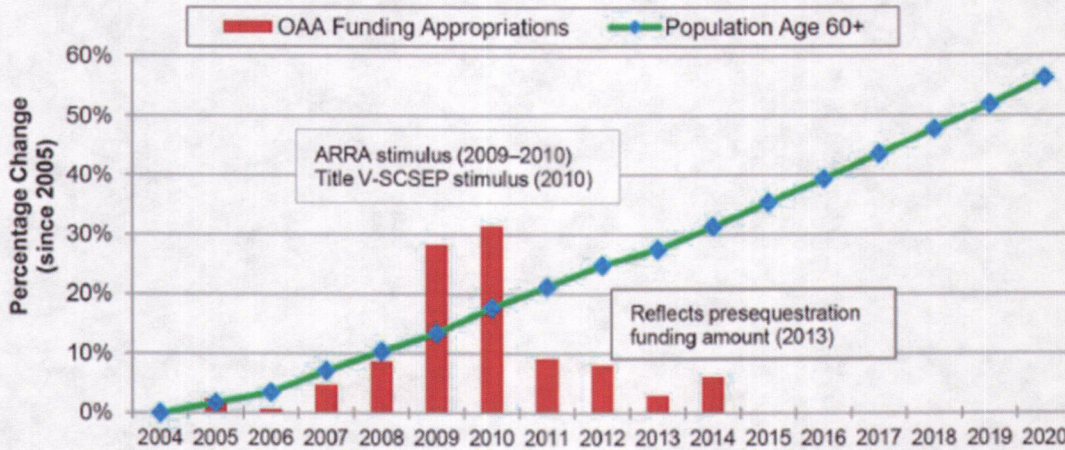
- ◆ The Office on Aging's main Riverside facility has been located at 6296 River Crest Drive, Suite K, Riverside, 92507 for 23 years, since October 1993. The facility has gone through several different owners and has not been kept up to safety, operational, structural or efficiencies and capacity standards. The current lease negotiated through the Economic Development Agency (EDA) fits the economic need of the Department; however, it is apparent the deferred maintenance of the building has not been kept up to County standards and would take significant costly repairs that were not included in the current lease set to expire in January 2019. In addition, the physical location is remote and not in the vicinity of other social services County departments, which is not easily accessible to the services we provide to the older adults of Riverside County.
- ◆ The Executive Team met with the Real Estate Division of EDA and will be working closely with EDA commencing in December 2016 to identify potential office space for the relocation of the main Riverside facility.



Funding for Older Americans Act Programming

- ◆ A 2014 policy brief from the American Association of Retired Persons (AARP) indicates that current federal funding levels for all Older American Act programs is \$1.88 billion.
- ◆ If 2004 funding levels had kept pace with inflation, 2014 funding should have been \$2.23 billion.

Figure 12 *Percentage Change in Funding for Older Americans Act Programs 2004-2014 vs. Age 60 Population, 2005-projected 2020*



Sources: Funding appropriations for FY 2005–FY 2012 from CRS Report for Congress, *Funding for the Older Americans Act and Other Aging Services Programs*, February 22, 2013. Data for FY 2013–FY 2014 funding appropriations from ACL Administration for Community Living, "FY 2015 ACL Budget Table," accessed March 12, 2014. Age 60+ population estimates from U.S. Census Bureau, Population Division, Table 1. Annual Estimates of the Resident Population by Sex and Five-Year Age Groups for the United States: April 1, 2000 to July 1, 2009 (NC-EST2009-01), released June 2010. Annual Estimates of the Resident Population by Single Year of Age and Sex for the United States: April 1, 2010, to July 1, 2012, released June 2013. AARP Public Policy Institute 2013 calculations from REMI 2012 baseline demographic projections.

CONCLUSION AND FUTURE OUTLOOK

This initial 90 Day Status Report summarizes the great work of the Department to date and outlines a clear path for moving forward into next fiscal year and beyond. As mentioned in this report, the County’s population of older adults is increasing and the challenges of serving this growing population are also increasing. With the strategic direction and efficiencies proposed, the Office on Aging will be poised to meet these challenges and to better serve the older adults of Riverside County.



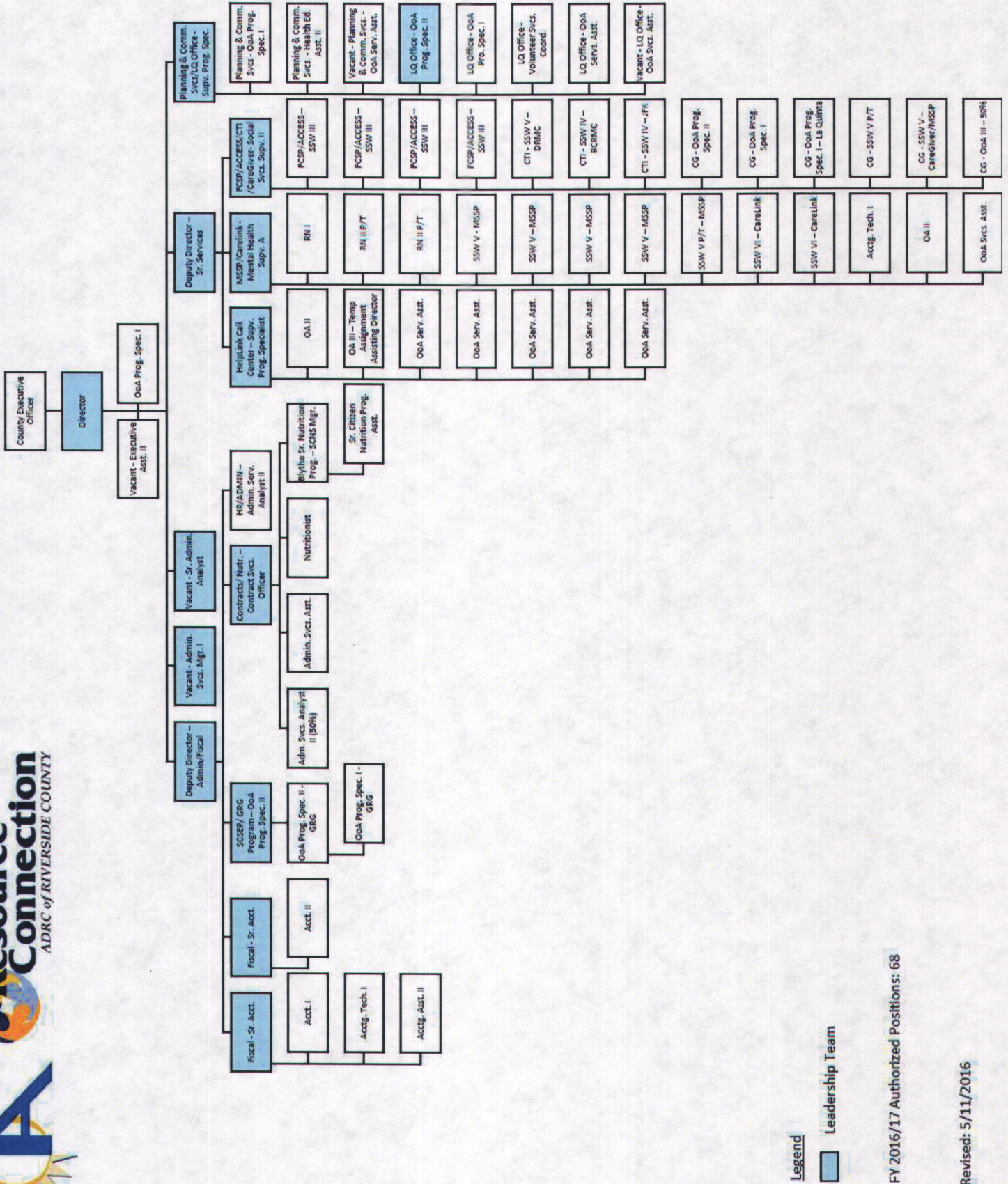
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Riverside County Office on Aging

Attachment A: Office on Aging Organizational Chart Office on Aging 90 Day Status Report (5.26.16)



Legend

■ Leadership Team

**Riverside County Board of Supervisors
Request to Speak**

Submit request to Clerk of Board (right of podium),
Speakers are entitled to three (3) minutes, subject
to Board Rules listed on the reverse side of this form.

SPEAKER'S NAME: Mark Holmstrom

Address: _____
(only if follow-up mail response requested)

City: Mead Valley **Zip:** _____

Phone #: _____

Date: _____ **Agenda #** 2-11

PLEASE STATE YOUR POSITION BELOW:

Position on "Regular" (non-appealed) Agenda Item:
_____ **Support** _____ **Oppose** _____ **Neutral**

Note: If you are here for an agenda item that is filed
for "Appeal", please state separately your position on
the appeal below:

_____ **Support** _____ **Oppose** _____ **Neutral**

I give my 3 minutes to: _____

BOARD RULES

Requests to Address Board on "Agenda" Items:

You may request to be heard on a published agenda item. Requests to be heard must be submitted to the Clerk of the Board before the scheduled meeting time.

Requests to Address Board on items that are "NOT" on the Agenda:

Notwithstanding any other provisions of these rules, member of the public shall have the right to address the Board during the mid-morning "Oral Communications" segment of the published agenda. Said purpose for address must pertain to issues which are under the direct jurisdiction of the Board of Supervisors. YOUR TIME WILL BE LIMITED TO THREE (3) MINUTES.

Power Point Presentations/Printed Material:

Speakers who intend to conduct a formalized Power Point presentation or provide printed material must notify the Clerk of the Board's Office by 12 noon on the Monday preceding the Tuesday Board meeting, insuring that the Clerk's Office has sufficient copies of all printed materials and at least one (1) copy of the Power Point CD. Copies of printed material given to the Clerk (by Monday noon deadline) will be provided to each Supervisor. If you have the need to use the overhead "Elmo" projector at the Board meeting, please insure your material is clear and with proper contrast, notifying the Clerk well ahead of the meeting, of your intent to use the Elmo.

Individual Speaker Limits:

Individual speakers are limited to a maximum of three (3) minutes. Please step up to the podium when the Chairman calls your name and begin speaking immediately. Pull the microphone to your mouth so that the Board, audience, and audio recording system hear you clearly. Once you start speaking, the "green" podium light will light. The "yellow" light will come on when you have one (1) minute remaining. When you have 30 seconds remaining, the "yellow" light will begin flash, indicating you must quickly wrap up your comments. Your time is up when the "red" light flashes. The Chairman adheres to a strict three (3) minutes per speaker. **Note: If you intend to give your time to a "Group/Organized Presentation", please state so clearly at the very bottom of the reverse side of this form.**

Group/Organized Presentations:

Group/organized presentations with more than one (1) speaker will be limited to nine (9) minutes at the Chairman's discretion. The organizer of the presentation will automatically receive the first three (3) minutes, with the remaining six (6) minutes relinquished by other speakers, as requested by them on a completed "Request to Speak" form, and clearly indicated at the front bottom of the form.

Addressing the Board & Acknowledgement by Chairman:

The Chairman will determine what order the speakers will address the Board, and will call on all speakers in pairs. The first speaker should immediately step to the podium and begin addressing the Board. The second speaker should take up a position in one of the chamber aisles in order to quickly step up to the podium after the preceding speaker. This is to afford an efficient and timely Board meeting, giving all attendees the opportunity to make their case. Speakers are prohibited from making personal attacks, and/or using coarse, crude, profane or vulgar language while speaking to the Board members, staff, the general public and/or meeting participants. Such behavior, at the discretion of the Board Chairman may result in removal from the Board Chambers by Sheriff Deputies.