



**TOWN OF LOS GATOS**  
**COMMUNITY HEALTH AND SENIOR SERVICES COMMISSION MEETING**  
**April 27, 2021**  
**110 East Main Street**  
**LOS GATOS, CA**  
**5:00 p.m.**

*George Rossmann, Chair*  
*Laura Kramer Rahmil, Vice Chair*  
*Jeffrey P. Blum, Commissioner*  
*Dick Konrad, Commissioner*  
*Lydia Norcia, Commissioner*  
*Arshia Mathur, Youth Commissioner*  
*Commissioner – Vacant*  
*Council Liaison - Vice Mayor Rennie*

**IMPORTANT NOTICE REGARDING THE APRIL 27, 2021 COMMUNITY HEALTH AND SENIOR SERVICE COMMISSION**

This meeting is being conducted utilizing teleconferencing and electronic means consistent with State of California Executive Order N-29- 20 dated March 17, 2020, regarding the COVID- 19 pandemic. **In accordance with Executive Order N-29- 20, the public may only view the meeting teleconference and not in the Council Chamber.**

**PARTICIPATION**

Join from a PC, Mac, iPad, iPhone or Android device:

Please click this URL to join. <https://losgatosca.gov.zoom.us/j/88445550807?pwd=eIBjM0t3UG1sUnhIVVl4dXNENThaQT09>

Passcode: 935571

Or Telephone:

Dial:

USA 636 651 0002 US Toll

USA 877 336 1829 US Toll-free

Conference code: 986172

During the meeting:

- When the Chair announces the item for which you wish to speak, click the “raise hand” feature in Zoom. If you are participating by phone on the Zoom app, press \*9 on your telephone keypad to raise your hand. If you are participating by calling in, press #2 on your telephone keypad to raise your hand.
- When called to speak, please limit your comments to three (3) minutes, or such other time as the Chair may decide, consistent with the time limit for speakers at a Council meeting.

If you are unable to participate in real-time, you may send an email to [PublicComment@losgatosca.gov](mailto:PublicComment@losgatosca.gov) with the subject line “Public Comment Item #\_\_” (insert the item number relevant to your comment) or “Verbal Communications – Non Agenda Item.” Comments will be reviewed and distributed before the meeting if received by 3:00 p.m. on the day of the meeting. All comments received will become part of the record. The Chair has the option to modify this action on items based on comments received.

## **REMOTE LOCATION PARTICIPANTS**

The following Commission Members are listed to permit them to appear electronically or telephonically at the Community Health and Senior Services Commission meeting: Commissioner George Rossman, Commissioner Kramer Rahmil, Commissioner Norcia, Commissioner Blum, Commissioner Konrad, and Youth Commissioner Mathur. All votes during the teleconferencing session will be conducted by roll call vote.

## **MEETING CALL TO ORDER**

## **ROLL CALL**

## **COMMISSIONER REPORTS**

Commissioner Konrad article submission (Attachment 1)

## **CONSENT ITEMS (TO BE ACTED UPON BY A SINGLE MOTION)**

1. Approve Community and Senior Services Commission Minutes of April 13, 2021 (Attachment 2)
2. Saratoga Community Assessment Survey for Older Adults (Attachment 3)

**VERBAL COMMUNICATIONS** *(Members of the public may address the Community Health and Senior Services Commission on any matter that is not listed on the agenda consistent with the Participation instructions contained on page 1 of this agenda. Unless additional time is authorized by the Community and Senior Services Commission, remarks shall be limited to three minutes.)*

**OTHER BUSINESS** *(Up to three minutes may be allotted to each speaker on any of the following items consistent with the Participation instructions contained on page 1 of this agenda.)*

3. Discussion of Town Council FY 2021/23 Strategic Priorities, CHSSC Goals for FY 2020/21, and Identification of Senior Service Gaps
  - a. Presentation by SCC Department of Aging and Adult Services
    - i. SCC Age-friendly Three-year Action Plan (Attachment 4)
    - ii. Master Plan on Aging Action Items (Attachment 5)
    - iii. Senior Nutrition Program Survey Results (Attachment 6)
  - b. Presentation by Los Gatos Director of Library Services
  - c. CHSSC Workplan (Attachment 7)
4. Staff Liaison Report
  - a. Updates from CHSSC partners
  - b. Update from staff liaison

## **ADJOURNMENT**

**IN COMPLIANCE WITH THE AMERICANS WITH DISABILITIES ACT, IF YOU NEED SPECIAL ASSISTANCE TO PARTICIPATE IN THIS MEETING, PLEASE CONTACT THE CLERK DEPARTMENT AT (408) 354-6834. NOTIFICATION 48 HOURS BEFORE THE MEETING WILL ENABLE THE TOWN TO MAKE REASONABLE ARRANGEMENTS TO ENSURE ACCESSIBILITY TO THIS MEETING [28 CFR §35.102-35.104]**

The Town of Los Gatos has a strategic goal of engaging Seniors in the Community. Covid has taken a toll on all of us but especially on our Seniors and our ability to help. Seniors make up an ever growing portion of our community and many have unique needs. Currently the Town offers services through the 55 Plus program which is managed by Saratoga Los Gatos Recreation. The 55 Plus program currently reaches a small percentage of Seniors in Town and we'd like to see that grow.

Recognizing that there is an unmet need of broadly engaging Seniors in Los Gatos, the Town Council has asked the members of the Community Health and Senior Services Committee to accelerate a recommendation to Town Council identifying Senior needs and to define what is necessary to make it easy to connect all Seniors with the many Service organizations offering help and recreation. The Council has also asked for a plan to improve facilities dedicated to Seniors. The Committee is currently executing goals set for the fiscal year.

To this end the Committee is holding special bi-monthly meetings with Vice Mayor Rob Rennie and Assistant Town Manager Arn Andrews participating. We will report our recommendations to the Town Council in June.

Ideas are being solicited from the Live Oak Senior Nutrition Center, Los Gatos Saratoga Recreation, 55 Plus, the Chamber of Commerce, West Valley Community Services, Saratoga Senior Coordinating Council, Santa Clara County and other interested members of the community. The Commission is also looking at Senior Services in our surrounding communities to see how they have achieved greater participation and organization in their efforts. All inputs will be used to determine a proposal to expand our reach and meet the varying needs of Los Gatos seniors.

There are also tremendous community-based volunteer organizations in Town that are looking to connect to the needs of seniors. We are reaching out to the Lions, Kiwanis and the two Rotary Clubs to ask for their assistance as well in future efforts.

The Community Health and Senior Services Committee is composed of 7 members appointed by the Town Council. One member is a Youth Commissioner. We are currently short one member and seeking applicants. Monthly public meetings are held on the 4<sup>th</sup> Tuesday of every month at 5:00 PM and are always open to inputs.

If you have ideas on what senior services you would like to see in Town or would like to volunteer in senior efforts, please share your thoughts at [CHSSC@losgatosca.gov](mailto:CHSSC@losgatosca.gov).

Dick Konrad, Member

Community Health and Senior Services



---

**DRAFT**  
**MINUTES OF THE COMMUNITY HEALTH AND SENIOR SERVICES COMMISSION**  
**SPECIAL MEETING**  
**APRIL 13, 2021**

The Community Health and Senior Services Commission of the Town of Los Gatos conducted a Special Meeting on Tuesday, April 13, 2021, at 5:04 p.m.

**MEETING CALLED TO ORDER**

**ROLL CALL**

Present: Commissioner Blum, Commissioner Rossmann, Commissioner Rahmil, and Commissioner Konrad

Absent: Commissioner Norcia, Youth Commissioner Mathur

Also Present: Vice Mayor Rennie and Liaison Andrews

**COMMISSIONER REPORTS**

Commissioner Konrad discussed an article he was drafting for an upcoming Los Gatos Living magazine edition.

Commissioner Blum shared some of his recent presentations to community groups and that the Commission approved article he drafted will published in Los Gatos Living also.

Commissioner Rahmil shared that she reached out to JCC and Shir Hadash regarding the Commission.

**CONSENT ITEMS (TO BE ACTED UPON BY A SINGLE MOTION)**

1. Approve Community and Senior Services Commission Minutes of March 23, 2021 (Attachment 1)

MOTION: Motion by Commissioner Norcia to approve the minutes of March 23, 2021. Seconded by Commissioner Blum

VOTE: Motion passed unanimously.

ATTACHMENT 2

**VERBAL COMMUNICATIONS** *(Members of the public may address the Community and Senior Services Commission on any matter that is not listed on the agenda. Unless additional time is authorized by the Community and Senior Services Commission, remarks shall be limited to three minutes.)*

Stephen Guruwaiya of Los Gatos Living expressed his magazines desire to support the Commission through the publication of articles from our Commissioners.

**OTHER BUSINESS** *(Up to three minutes may be allotted to each speaker on any of the following items.)*

1. Discussion of Town Council FY 2021/23 Strategic Priorities, CHSSC Goals for FY 2020/21, and Identification of Senior Service Gaps

- a. Presentation by Saratoga Area Senior Coordinating Council (SASCC) (Attachment 2)

SASCC Executive Director Tylor Taylor provided a PPT presentation outlining the services provided by SASCC. Services include the Adult Day Program, RYDE senior transportation program, publication of the Outlook print newspaper, and other senior oriented activities. Mr. Taylor explained that during COVID SASCC pivoted many of its programs to online and the RYDE Program helped significantly with food distribution for Live Oak Senior Nutrition Center. Commissioners asked questions regarding the SASCC business model and thoughts on next steps for Los Gatos. Mr. Taylor explained that a Community Assessment Survey of Senior needs would make a good starting point.

- b. Presentation by West Valley Community Services (Attachment 3)

West Valley Community Services (WVCS) Director Josh Selo provided a PPT presentation outlining the services provided by WVCS and Los Gatos client specific data. Services include food support, emergency rental and utility support, case management, homeless support services, and other safety net assistance programs. Mr. Selo shared that they saw increased demand across all WVCS programs during COVID, especially food and rental assistance. Mr. Selo also detailed the close coordination with the Town for residents requiring isolation or quarantine due to COVID exposure. Mr. Selo presented detailed charts illustrating the year over year increases in Los Gatans receiving assistance. Commissioners asked questions regarding the WVCS business model and strong volunteer participation.

- c. CHSSC Workplan and Staff Report (Attachment 4)
  - i. Attachment 4a – Work Plan
  - ii. Attachment 4b – 2020 Sourcewise COVID Impact Survey
- d. CHSSC Goals for FY 2020/21 (Attachment 5)

Discussion occurred during agenda items a and b

2. Staff Liaison Report
  - a. Updates from CHSSC partners
  - b. Update from staff liaison

No reports

## **ADJOURNMENT**

The meeting adjourned at 6:58 p.m.

This is to certify that the foregoing is a true and correct copy of the minutes of the April 13, 2021 meeting as approved by the Community Health and Senior Services Commission.

---

Arn Andrews, Assistant Town Manager

# Saratoga, CA

## 2016

### Report of Results

---

# CASOA<sup>TM</sup>

## Community Assessment Survey for Older Adults<sup>TM</sup>



2955 Valmont Road, Suite 300 • Boulder, Colorado 80301  
www.n-r-c.com • 303-444-7863

ATTACHMENT 3

# Contents

Introduction .....	1
City of Saratoga CASOA Methods.....	1
Structure of CASOA Report.....	2
“Don’t Know” Responses and Rounding .....	3
Benchmark Comparison Data .....	4
Key Findings .....	5
CASOA Survey Results.....	8
Overall Community Quality .....	8
Community and Belonging.....	11
Community Information .....	13
Productive Activities .....	15
Health and Wellness .....	27
Community Design and Land Use .....	36
Community Readiness.....	39
Saratoga Opportunities and Challenges.....	40
Older Resident Needs in Saratoga.....	41
Populations at High Risk .....	43
Responses to Saratoga’s Custom Questions .....	44
Appendix A: Complete Set of Survey Responses.....	45
Appendix B: Survey Methodology.....	66
Appendix C: Benchmark Comparisons.....	74
Appendix D: References .....	83
Appendix E: Survey Materials.....	84



CASOA™ Full Report | The City of Saratoga

• • • • •

NRC is a charter member of the AAPOR Transparency Initiative, providing clear disclosure of our sound and ethical survey research practices.



## Introduction

The Community Assessment Survey for Older Adults (CASOA™), administered by National Research Center, Inc., provides a statistically valid survey of the strengths and needs of older adults as reported by older adults themselves in communities across America. Used in conjunction with the CASOA *Strategies and Resources Handbook* (provided under separate cover), this report is intended to enable local governments, community-based organizations, the private sector and other community members to understand more thoroughly and predict more accurately the services and resources required to serve an aging population. With this report, Saratoga stakeholders can shape public policy, educate the public and assist communities and organizations in their efforts to sustain a high quality of life for older adults. The objectives of the CASOA are to:

- Identify community strengths in serving older adults
- Articulate the specific needs of older adults in the community
- Estimate contributions made by older adults to the community
- Determine the connection of older adults to the community

The results of this exploration will provide useful information for planning and resource development as well as strengthen advocacy efforts and stakeholder engagement. The ultimate goal of the assessment is to create empowered communities that support vibrant older adult populations.

The CASOA questionnaire contains many questions related to the life of older residents in the community. Survey participants were asked to rate their overall quality of life, as well as aspects of quality of life in Saratoga. They also evaluated characteristics of the community and gave their perceptions of safety in Saratoga. The questionnaire assessed the individual needs of older residents and involvement by respondents in the civic and economic life of Saratoga.

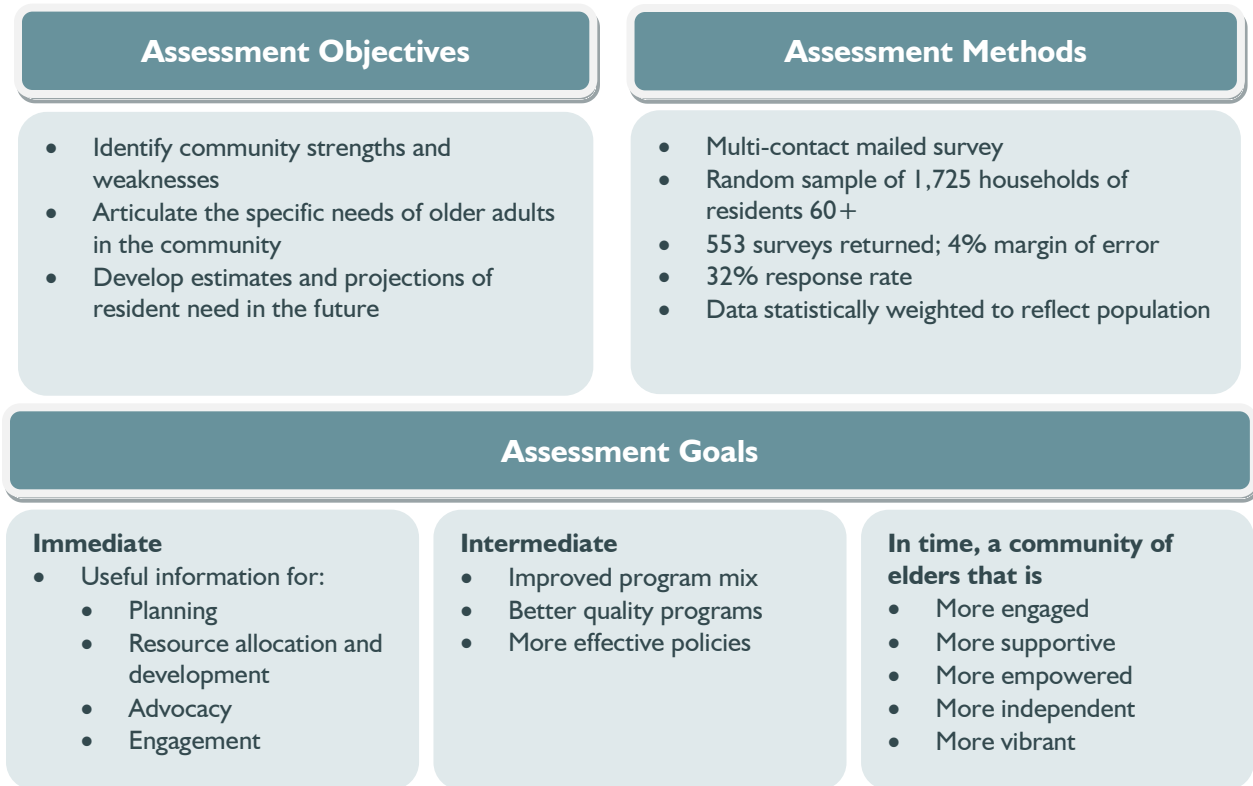
### City of Saratoga CASOA Methods

The CASOA survey and its administration are standardized to assure high quality survey methods and comparable results across communities. Participating households with residents 60 years or older were selected at random and the household member who responded was selected without bias. Multiple mailings gave each household more than one prompt to participate with a self-addressed and postage-paid envelope to return the survey. Results were statistically weighted to reflect the proper demographic composition of older adults in the entire community.

The survey was mailed in July 2016 to a random selection of 1,725 older adult households in Saratoga. Older adult households were contacted three times about participation in the survey. A total of 553 completed surveys were obtained, providing an overall response rate of 32% and a margin of error of plus or minus 4% around any given percent and 2.5 points around any given average rating for all respondents.

For additional methodological information, refer to *Appendix B: Survey Methodology*.

Figure 1: CASOA Methods and Goals



### Structure of CASOA Report

This report is based around six community dimensions (Figure 2):

- Overall Community Quality
- Community and Belonging
- Community Information
- Productive Activities
- Health and Wellness
- Community Design and Land Use

Each section discusses older adult ratings of Saratoga, participation in activities and potential problems faced by older adults as related to each of the six dimensions. The final section of the report, Community Readiness, summarizes these dimensions as index scores and provides an overall picture of Saratoga as a livable community for older adults.

**Figure 2: Community Dimensions Assessed through CASOA**

Overall Community Quality	<ul style="list-style-type: none"> <li>•Community as a place to live and retire</li> <li>•Recommend community to others</li> <li>•Residential stability</li> </ul>
Community and Belonging	<ul style="list-style-type: none"> <li>•Sense of community</li> <li>•Overall safety</li> <li>•Valuing older residents in community</li> <li>•Crime victimization and abuse</li> </ul>
Community Information	<ul style="list-style-type: none"> <li>•Availability of information about older adult resources</li> <li>•Financial or legal services</li> </ul>
Productive Activities	<ul style="list-style-type: none"> <li>•Civic engagement - volunteerism, voting, civic attentiveness</li> <li>•Social engagement - social and religious activities</li> <li>•Recreation - recreational activities, personal enrichment</li> <li>•Caregiving - providing care for children or adults</li> <li>•Economic contribution - the dollar value of activities</li> </ul>
Health and Wellness	<ul style="list-style-type: none"> <li>•Physical health - physical fitness, fitness opportunities, diet</li> <li>•Mental health - emotional well being, quality of life, confusion</li> <li>•Health care - health services, medications, oral and vision care</li> <li>•Independent living - activities of daily living, hospitalizations</li> </ul>
Community Design and Land Use	<ul style="list-style-type: none"> <li>•Housing variety and availability</li> <li>•Ease of travel by car, foot and bus</li> <li>•Access to daily needs</li> <li>•Overall quality of life</li> </ul>

### “Don’t Know” Responses and Rounding

On many of the questions in the survey, respondents could provide an answer of “Don’t know.” The proportion of respondents giving this reply is shown in the full set of responses included in *Appendix A: Complete Set of Survey Responses* and is discussed in the body of this report if it is 20% or greater. However, these responses have been removed from the analyses presented in the body of the report, unless otherwise indicated. In other words, the majority of the tables and graphs in the body of the report display the responses from respondents who had an opinion about a specific item.

For some questions, respondents were permitted to select multiple responses. When the total exceeds 100% in a table for a multiple response question, it is because some respondents are

counted in multiple categories. When a table for a question that only permitted a single response does not total to exactly 100%, it is due to the customary practice of rounding percentages to the nearest whole number.

## Benchmark Comparison Data

---

NRC has developed a database that collates responses to CASOA and related surveys administered in other communities, which allows the results from Saratoga to be compared against a set of national benchmarks. This benchmarking database includes responses from more than 35,000 older adults (age 55 and over) in over 175 communities across the nation. The demographics of NRC's database match the demographics in the nation, based on the U.S. Census estimates.

Ratings are compared when similar questions are included in NRC's database, and there are at least five communities in which the question was asked. Where comparisons for ratings were available, Saratoga's results are generally discussed in the report as being "higher" than the benchmark, "lower" than the benchmark or "similar" to the benchmark. In instances where ratings are considerably higher or lower than the benchmark, these ratings have been further demarcated by the attribute of "much," (for example, "much higher" or "much lower"). Detailed benchmark information can be found in *Appendix C: Benchmark Comparisons*.

## Key Findings

Not all older adults complain, nor does every community leave older adults raving about the quality of community life or the services available for active living and aging in place. Communities that assist older adults to remain or become active community participants provide the requisite opportunities for recreation, transportation, culture, education, communication, social connection, spiritual enrichment and health care.

Further, older adults, more than others, face difficulties with aspects of everyday life. For many older adults these difficulties vastly exceed the minor physical pains or small losses of function that characterize almost everyone's circumstances after a certain age. When individual problems are added together, a group picture emerges that provides a useful description of the entire community of Saratoga.

The results of this survey describe the City of Saratoga as a livable community for older adults within six community dimensions of Overall Community Quality, Community and Belonging, Community Information, Productive Activities, Health and Wellness and Community Design and Land Use. The extent to which older adults experience difficulties and problems within these dimensions is also described.

### Overall Community Quality

Overall Community Quality explores how older residents view the community overall, how connected they feel to the community and how well they can access information and services offered by Saratoga, as well as how likely residents are to recommend and remain in the community.

- Almost all of Saratoga's older residents gave high ratings to the community as a place to live.
- About two-thirds of older adults would recommend Saratoga to others.
- Over three-quarters of respondents had lived in the community for more than 20 years and at least 8 in 10 plan to stay in Saratoga throughout their retirement.
- When compared to other communities in the U.S., older residents in Saratoga tended to provide much higher ratings for the city as a place to live and retire.

### Community and Belonging

A "community" is often greater than the sum of its parts, and having a sense of community entails not only a sense of membership and belonging, but also feelings of emotional and physical safety, trust in the other members of the community and a shared history.<sup>1</sup> Older residents of Saratoga rated several aspects of Community and Belonging, including their sense of community and overall feelings of safety, as well as the extent to which they felt accepted and valued by others.

- Almost 9 in 10 respondents reported "excellent" or "good" overall feelings of safety and between 16% and 5% had experienced safety problems related to being a victim of crime, abuse or discrimination.
- About 6 in 10 older residents rated the sense of community as "excellent" or "good"; a similar proportion of respondents provided positive ratings for the City's neighborliness and openness and acceptance of the community toward people of diverse backgrounds.

- When compared to other communities across the nation, Saratoga older residents rated sense of community and neighborliness of residents lower, but gave more positive marks to the overall feeling of safety and valuing older residents.

## Community Information

The education of a large community of older adults is not simple, but when more residents are made aware of attractive, useful and well-designed programs, more residents will benefit from becoming participants.

- About 5 in 10 survey respondents reported being “somewhat” or “very” informed about services and activities available to older adults, which was much lower than reports from other communities in the U.S.
- About 4 in 10 older adults felt the city had “excellent” or “good” information about resources for older adults and financial or legal planning services.
- Over half of respondents had problems with not knowing what services were available to older adults and feeling like their voice was heard in the community.
- Less than one-third reported having problems with finding meaningful volunteer work, a rating that was similar compared to other communities.

## Productive Activities

Productive activities such as traditional and non-traditional forms of work and maintenance of social ties combine with health and personal characteristics to promote quality of life in later life and contribute to active aging.<sup>2</sup> Productive Activities examined the extent of older adults’ engagement participation in social and leisure programs and their time spent attending or viewing civic meetings, volunteering or providing help to others.

- At least 7 in 10 felt Saratoga had “excellent” or “good” volunteer opportunities, and about one-third participated in some kind of volunteer work, a volunteer rate much lower than other communities in the U.S.
- Few respondents (13%) had used the Saratoga Adult & Senior center, which was much lower when compared to senior center use in other communities.
- About 3 in 10 Saratoga seniors said that they had at least “minor” problems having interesting social events or activities to attend.
- The majority of older residents (76%) rated the recreation opportunities in Saratoga as “excellent” or “good”; opportunities for recreational and personal enrichment activities tended to be higher in Saratoga than in other communities.
- Over half of older residents in Saratoga said they were caregivers; respondents averaged between 9 and 10 hours per week providing care for children, adults or older adults.
- About one in five older adults in Saratoga felt physically, emotionally or financially burdened by their caregiving.
- Over two-thirds of respondents were fully retired, but 1 in 10 respondents experienced at least minor problems with having enough money to meet daily expenses or to pay their property taxes.
- The value of paid (part- and full-time work) and unpaid (volunteering, providing care) contributions by older adults in Saratoga totaled about \$153 million in a 12-month period.

## Health and Wellness

Of all the attributes of aging, health poses the greatest risk and the biggest opportunity for communities to ensure the independence and contributions of their aging populations. Health and wellness, for the purposes of this study, included not only physical and mental health, but issues of independent living and health care.

- Overall, the older adults in Saratoga rated aspects of physical health similar to or lower than other communities in the U.S. including ratings of fitness opportunities and physical health care, but more residents reported their own overall physical health as “excellent” or “good” compared to residents elsewhere.
- The portions of older residents reporting problems with doing heavy or intense housework (49%) and maintaining their homes (35%) was lower in Saratoga than elsewhere in the country while maintaining their yards (42%) was similar.
- About 3 in 10 older residents felt there was “excellent” or “good” availability of mental health care in Saratoga while over 9 in 10 rated their overall mental health/emotional wellbeing as “excellent” or “good.”
- The most commonly cited mental health issues included feeling bored (32%) and dealing with the loss of a close family member or friend (30%), while the least cited issues included figuring out which medications to take and when (6%) and feeling lonely or isolated (23%); these mental health problems experienced by Saratoga older adults tended to be lower than the problems experienced by older adults in other communities.
- Saratoga’s preventative health services were rated much lower than the services provided by its peers.
- One-third of respondents reported at least minor problems with having adequate information or dealing with public programs such as Social Security, Medicare and Medicaid.
- Less than 2 in 10 respondents reported having spent time in a hospital, and one-quarter had fallen and injured themselves in the 12 months prior to the survey. Falls and hospitalizations occurred at lower rates in Saratoga than in other communities.
- Close to one in five of older adults reported at least minor problems with aspects of independent living, including walking, eating and preparing meals.

## Community Design and Land Use

The movement in America towards designing more “livable” communities – those with mixed-use neighborhoods, higher-density development, increased connections, shared community spaces and more human-scale design – will become a necessity for communities to age successfully. Communities that have planned for older adults tend to emphasize access – a community design that facilitates movement and participation.

- Respondents rated the ease of car travel, ease of getting to the places they usually have to visit and ease of walking positively, with at least 7 in 10 rating each as “excellent” or “good.”
- About 1 in 10 respondents felt the city had “excellent” or “good” availability of affordable quality housing and variety of housing options.
- One-quarter (27%) of older adults experienced problems with having safe and affordable transportation available, while fewer experienced problems with having housing to suit their needs (13%) or having enough food to eat (3%). Daily living problems tended to be lower in Saratoga when compared to other communities across the nation.
- About 9 in 10 older residents in Saratoga rated their overall quality of life as “excellent” or “good”, a rating that was much higher than other communities in the U.S.

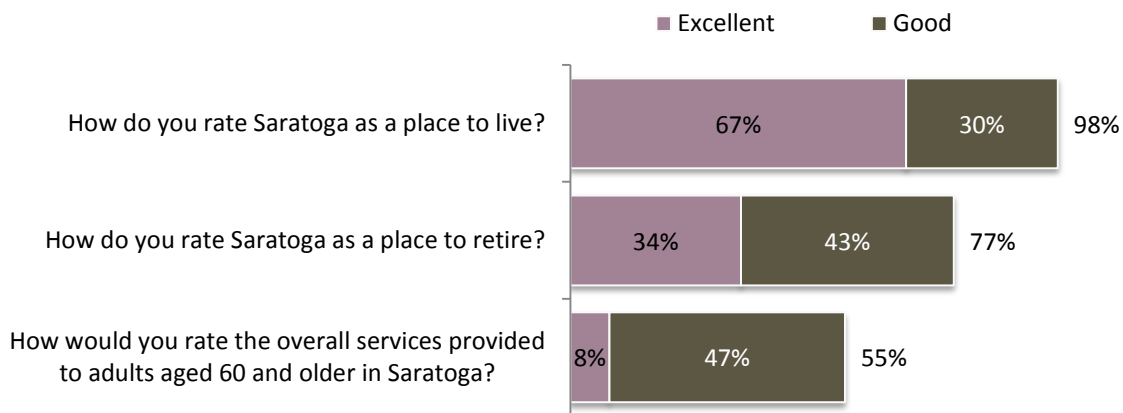
# CASOA Survey Results

## Overall Community Quality

CASOA contained a number of questions related to the life of older residents in the community. This section of the report explores aspects of the overall quality of the community by examining how older residents view the community overall, how connected they feel to the community and how well they can access information and services offered by Saratoga. Survey participants were asked to rate the City as a place to live and to retire as well as the overall quality of services provided to older adults. Further testament to the quality of a community is the likelihood of residents recommending and remaining in a community; respondents indicated how likely they would be to not only recommend Saratoga to other older adults but also how likely they would be to remain in Saratoga throughout their retirement.

Almost all of Saratoga's older residents gave high ratings to the community as a place to live and three-quarters rated Saratoga as a place to retire as "excellent" or "good." Services offered to older adults were considered "excellent" or "good" by about half of older residents in Saratoga. Generally, residents in Saratoga were much more likely to rate these aspects of the community as "excellent" or "good" than were other older adults across the nation, although overall services were rated lower than comparison communities (see *Appendix C: Benchmark Comparisons* for details).

**Figure 3: Saratoga as a Place for Older Residents**

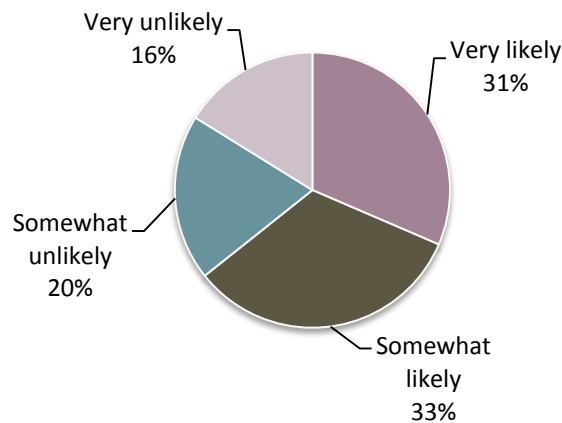




Generally, residents will not recommend a community to friends unless that community is seen to be offering the right services with optimal effectiveness. Just how successful Saratoga has been in creating an attractive setting for older adults can be sensed by the number of older residents that say they will recommend it to others. Overall, about two-thirds of older adults said they would recommend Saratoga to others. The portion of older adults that would recommend the community was much lower than other communities in the U.S. (see *Appendix C: Benchmark Comparisons* for more information).

**Figure 4: Older Residents' Likelihood of Recommending Saratoga to Others**

How likely or unlikely are you to recommend living in Saratoga to adults aged 60 and older?

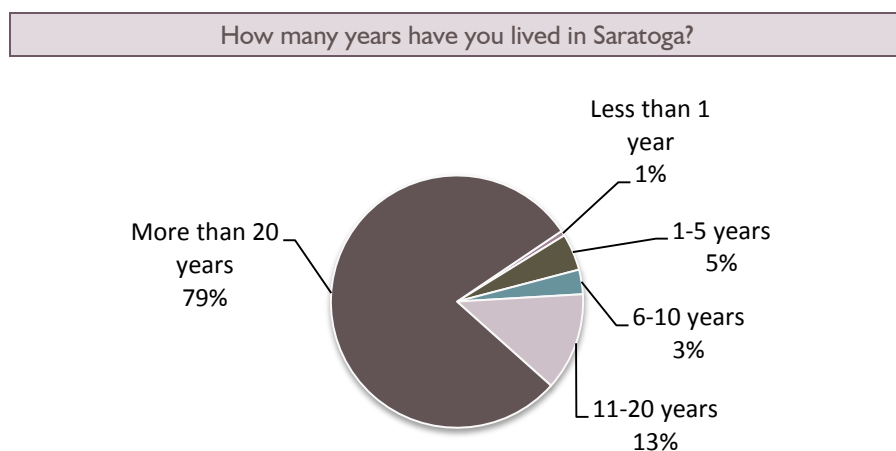


## Residential Stability

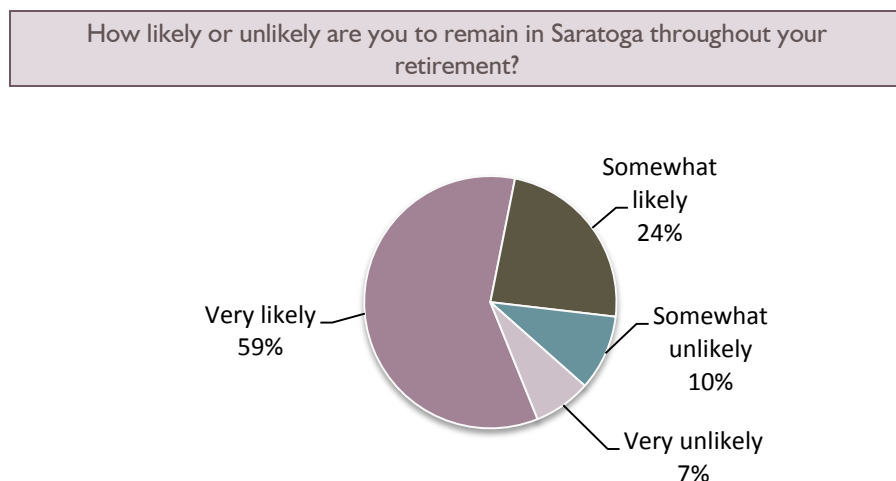
According to a survey by AARP, more than 8 in 10 adults over age 45 want to live roughly where they live now “as long as possible.”<sup>3</sup> In fact, Census Bureau data indicate that fewer than 5% of people 55 and older move in any given year, and the bulk of those do not go very far: 49% of movers stay within the same county and only 25% move to a different state. Of those who do cross state lines, the major lure is not weather, tax relief or a new adventure: people usually move to be closer to family.<sup>4</sup>

In different communities, older adults have different intentions, so it is essential to understand what older adults in Saratoga are anticipating in their retirement. The largest proportion of Saratoga’s older residents had lived in the community for more than 20 years. Further, 83% of seniors planned to remain in Saratoga throughout their retirement. When compared to ratings given by older residents in other communities across the nation, Saratoga residents were equally likely to report that they would remain in the City throughout retirement (see *Appendix C: Benchmark Comparisons* for details).

**Figure 5: Length of Residency in Saratoga**



**Figure 6: Likelihood of Remaining in Saratoga throughout Retirement**

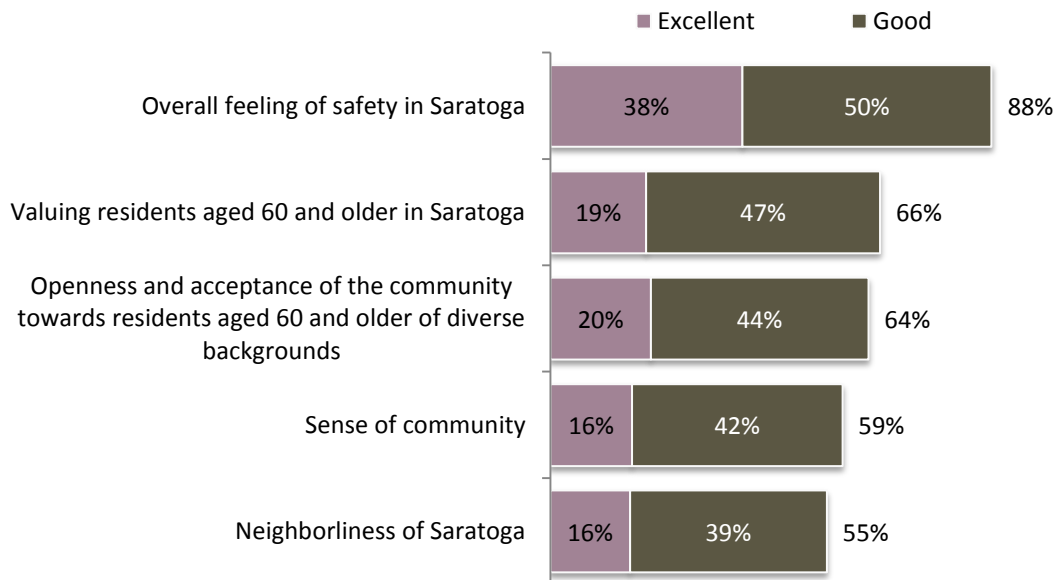


## Community and Belonging

A “community” is often greater than the sum of its parts, and having a sense of community entails not only a sense of membership and belonging, but also feelings of emotional and physical safety, trust in the other members of the community and a shared history.<sup>1</sup> Older residents of Saratoga rated several aspects of Community and Belonging, including their sense of community and overall feelings of safety, as well as the extent to which they felt accepted and valued by others.

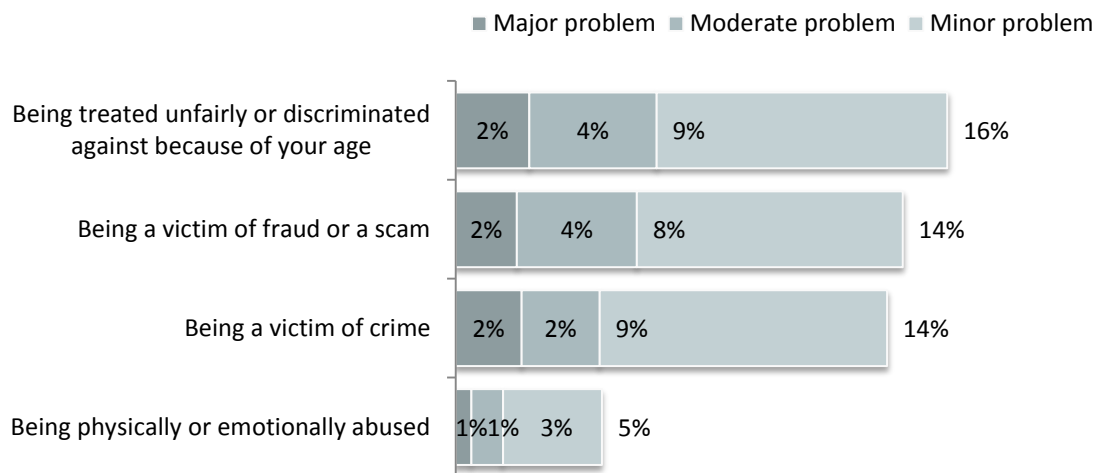
Overall, older residents rated Community and Belonging in Saratoga positively as 59% had an “excellent” or “good” sense of community. Feelings of safety in Saratoga were higher, with 88% rating their overall feeling of safety in the community as “excellent” or “good.” About two-thirds felt the community valued older residents and felt Saratoga was open and accepting of diverse older residents. When compared to other communities in the U.S., older residents in Saratoga provided a mix of ratings for aspects of Community and Belonging. Ratings for overall feelings of safety and valuing residents were much higher, while sense of community and neighborliness of residents in Saratoga were lower than comparisons (see *Appendix C: Benchmark Comparisons* for details).

**Figure 7: Older Adult Ratings of Community and Belonging in Saratoga**



The extent to which older residents have been victims of crimes can threaten their feelings of safety and overall sense of community. A small proportion of seniors in Saratoga reported problems with crime or abuse in the 12 months prior to the survey. Reports of crime or abuse generally were similar to reports from other communities across the country (see *Appendix C: Benchmark Comparisons* for details).

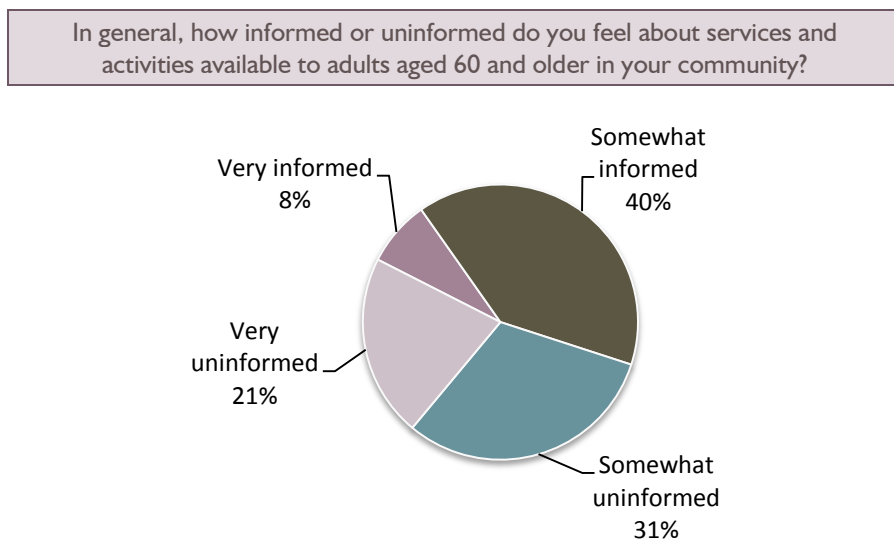
**Figure 8: Safety Problems in Saratoga**



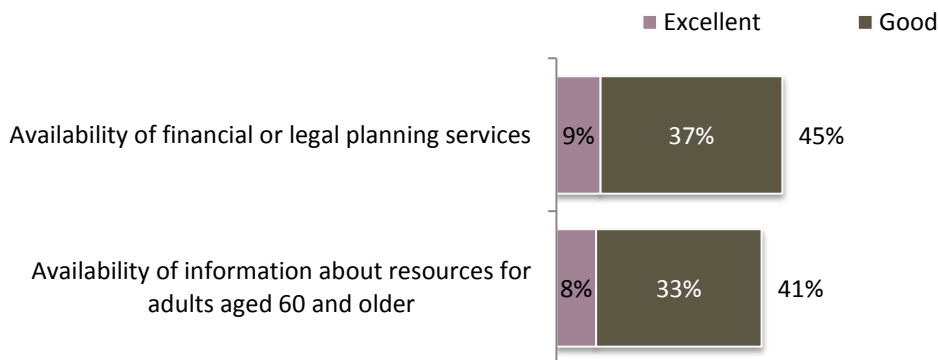
## Community Information

Sometimes residents of any age fail to take advantage of services offered by a community just because they are not aware of the opportunities. The education of a large community of older adults is not simple, but when more residents are made aware of attractive, useful and well-designed programs, increasing numbers of residents will benefit from becoming participants. In Saratoga, about 48% of survey respondents reported being “somewhat” or “very” informed about services and activities available to older adults, which was much lower than reports from other communities in the U.S (see *Appendix C: Benchmark Comparisons* for details). Further, a lower proportion of older adults in Saratoga rated the availability of information about resources for older adults positively than those in comparison communities, but a higher proportion rated the availability of financial or legal planning services as “excellent” or “good.”

**Figure 9: Awareness of Older Adult Services and Activities**

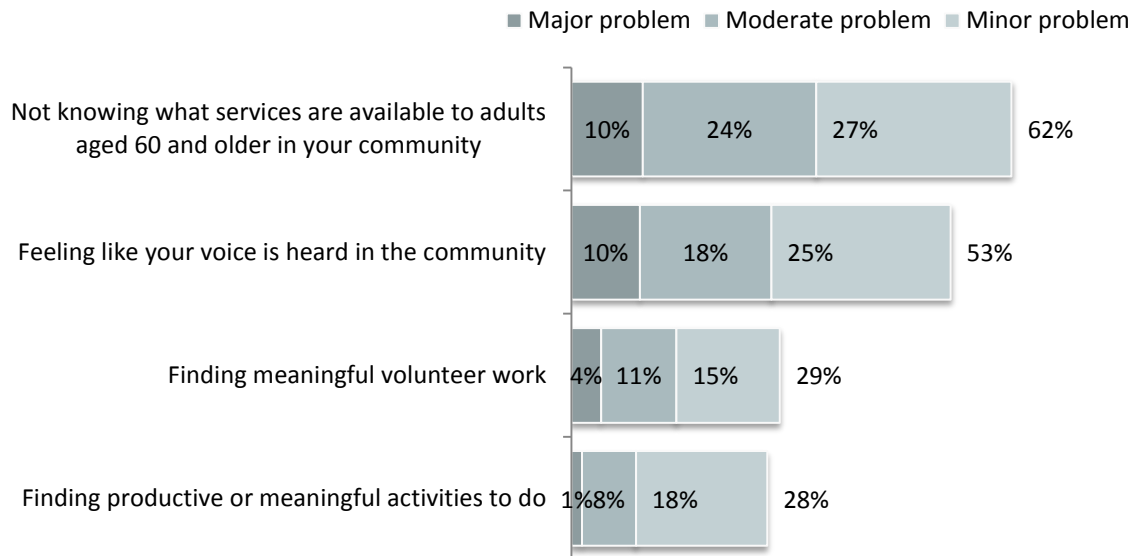


**Figure 10: Availability of Information About Older Adult Resources in Saratoga**



Older residents who may not know how to access services may have trouble finding ways to contribute to the community. In Saratoga, less than two-thirds had problems with not knowing what services were available, and even fewer reported having problems with finding meaningful volunteer work and feeling like their voice was heard. The proportion of older adults in Saratoga who had problems in these areas was generally similar to other communities across the country (see *Appendix C: Benchmark Comparisons* for details).

**Figure 11: Meaningful Activities Problems of Older Residents in Saratoga**



## Productive Activities

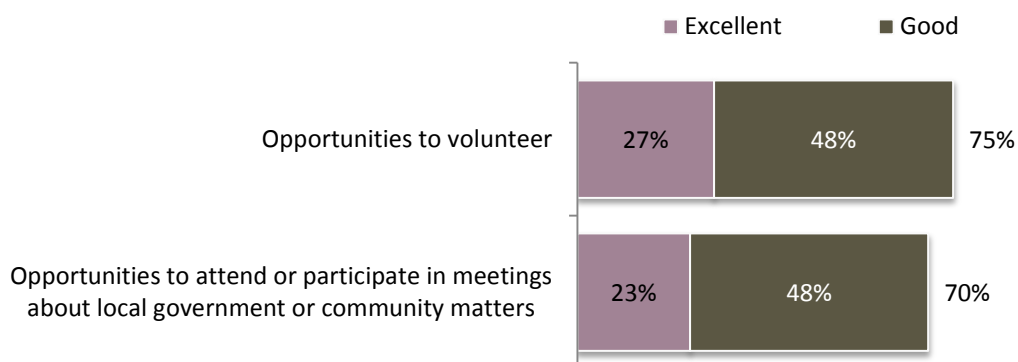
Productivity is the touchstone of a thriving old age. Productive activities such as traditional and non-traditional forms of work and maintenance of social ties combine with health and personal characteristics to promote quality in later life and contribute to active aging.<sup>2</sup> This section of the report examines the extent of older adults' engagement in the Saratoga community as determined by their participation in social and leisure programs and their time spent attending or viewing civic meetings, volunteering or providing help to others. The economic value of these contributions to the community is explored as well.

### Civic Engagement

In communities where residents care about local politics and social conditions, where they feel engaged and effective, there is greater social, economic and cultural prosperity. This results in more trust of local government officials, support for community-wide solutions recommended by elected council members, re-election of those councilors<sup>5</sup> and collective self-restraint in the face of community need.<sup>5,6</sup> Researchers even have discovered that American states with the highest levels of resident civic engagement are “more effective and more innovative.”<sup>7</sup> Where there is strong civic engagement, researchers have seen less crime, less poverty, more employment, better and more sustainable policies and more frequent resident cooperation.<sup>8</sup> Civic activity, whether volunteering, participating in religious or political groups or being active in community decision-making, not only provides benefit to communities but also serves seniors themselves.

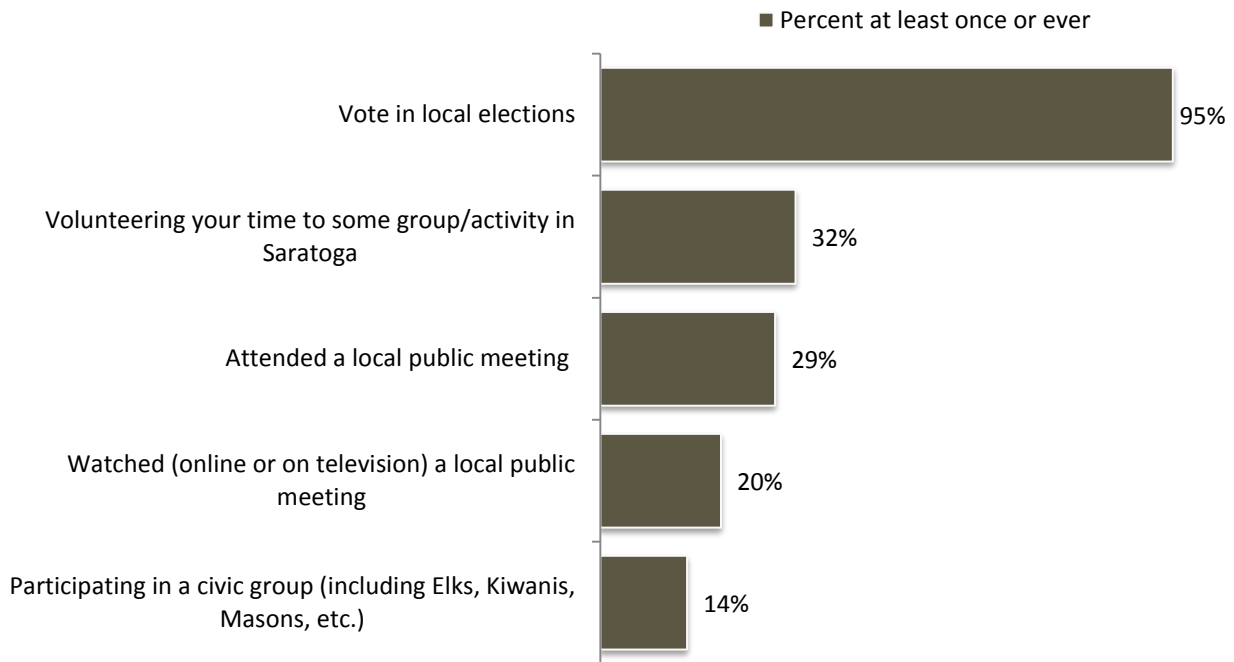
Studies have found that volunteering in later life is associated with better physical and mental health, and civically engaged seniors are less likely to become injured or to die prematurely.<sup>9</sup> In Saratoga, older residents rated the volunteer opportunities favorably. About 7 in 10 felt Saratoga had “excellent” or “good” volunteer opportunities, a rating that was similar to other communities across the country (see *Appendix C: Benchmark Comparisons* for details).

**Figure 12: Civic Engagement Opportunities in Saratoga**



In terms of civic engagement, about 3 in 10 reported attending a public meeting of local elected officials or other local public meeting in Saratoga and 2 in 10 indicated they had watched such a meeting on television, the Internet or other media in the past year. Additionally, about one-third participated in some kind of volunteer work, a volunteer rate much lower than other communities in the U.S. Almost all survey respondents indicated that they were registered to vote and had voted in the last general election.

**Figure 13: Participation in Civic Activities in Saratoga**



*Note: This chart combines the results of survey questions 12, 13 and 15, which use different response scales. Complete response frequencies for these questions can be found in Appendix A: Complete Set of Survey Responses.*

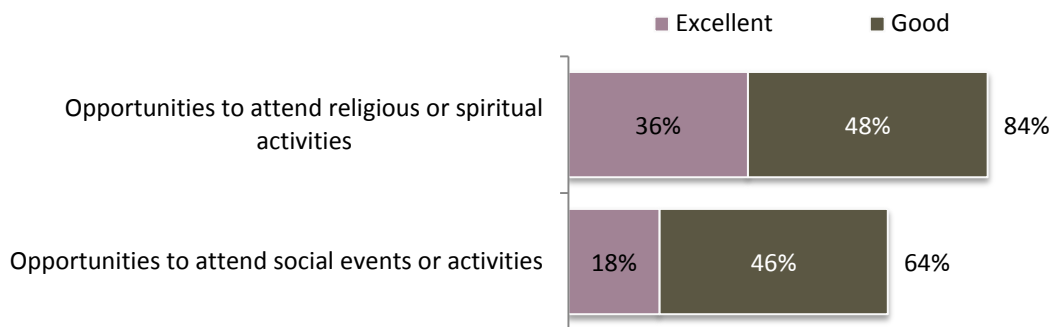


## Social Engagement

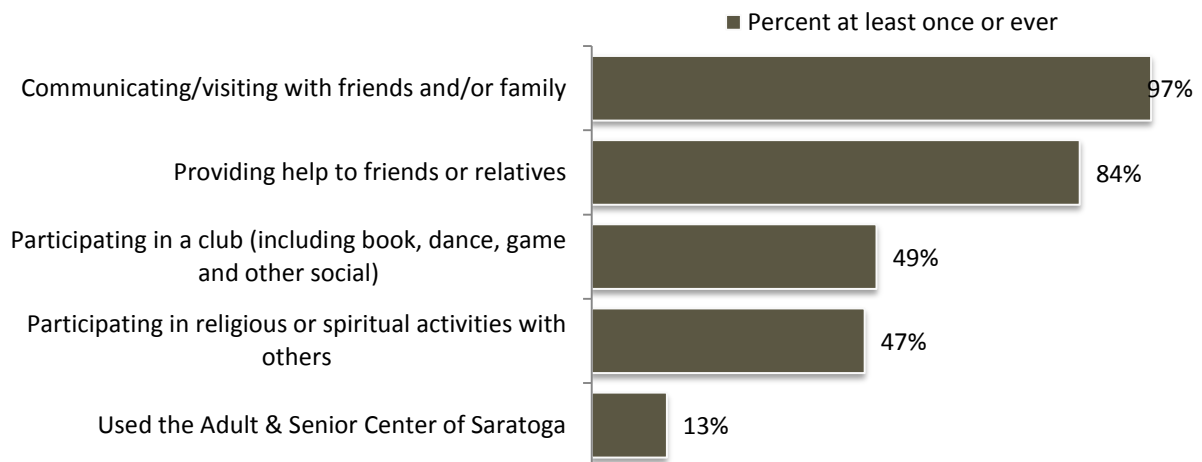
Communities are the foundation for social life. Sociologist Eric Klinenberg describes communities as “the soil out of which social networks grow and develop or, alternatively, wither and devolve.”<sup>10,11</sup> Saratoga has a great potential to strengthen the community by fostering increased social engagement of its older residents. About two-thirds of Saratoga older residents rated the opportunities to attend social activities in Saratoga as “excellent” or “good” and at least 8 in 10 rated opportunities to attend religious or spiritual activities in Saratoga this way. Ratings for social activities and religious activities in Saratoga were similar to the benchmark. See *Appendix C: Benchmark Comparisons* for additional details.

Older residents in Saratoga exhibited a moderate level of participation in social and religious activities. Older residents preferred to spend their time providing help to friends over clubs / religious or spiritual activities. About 1 in 10 used the Saratoga senior center, which can often serve as a social hub for many seniors; its use by Saratoga older adults was much lower compared to senior center use in other communities (see *Appendix C: Benchmark Comparisons*).

**Figure 14: Social Engagement Opportunities in Saratoga**



**Figure 15: Participation in Social Activities in Saratoga**

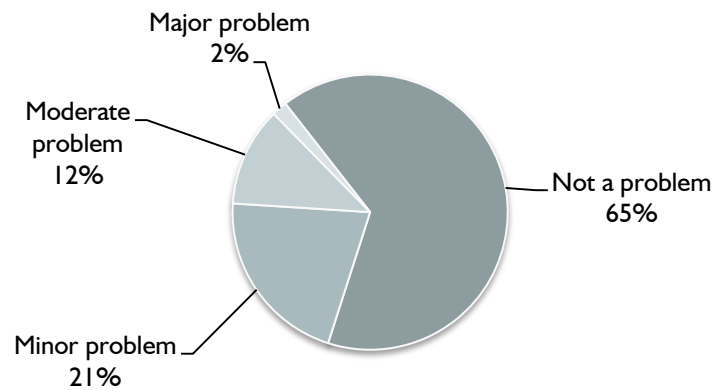


*Note: This chart combines the results of survey questions 11 and 13, which use different response scales. Complete response frequencies for these questions can be found in Appendix A: Complete Set of Survey Responses.*

About 3 in 10 of Saratoga seniors said that they had at least “minor” problems having interesting social events or activities to attend. These problems were much lower in Saratoga than in other communities (see *Appendix C: Benchmark Comparisons*).

**Figure 16: Social Engagement Problems in Saratoga**

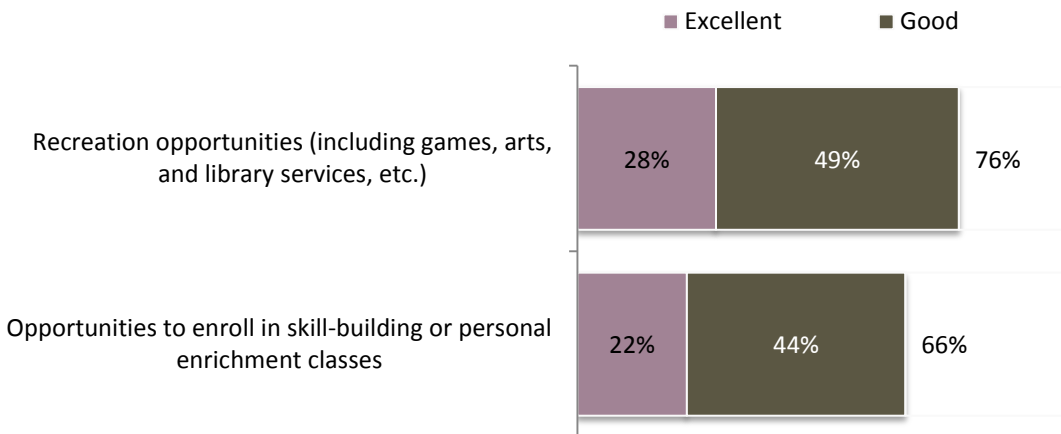
Thinking back over the last 12 months, how much of a problem has having interesting social events or activities to attend been for you?



## Recreation

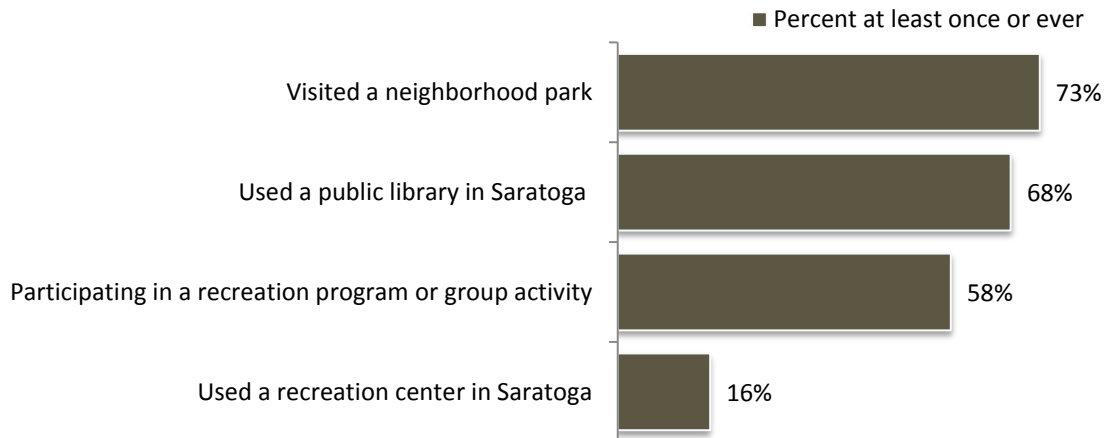
Once work becomes a part-time endeavor or thing of the past, residents have the time for and require the health benefits from regular leisure activities, including the stimulation derived from personal enrichment. Recreation and enrichment often replace work as the primary activity that brings older residents in contact with the outside world, while ample opportunities for these activities make a community more attractive to its residents. Many older residents of Saratoga viewed both recreation opportunities and opportunities to enroll in skill-building or personal enrichment classes favorably. Respondents in Saratoga were much more likely to rate these aspects of recreation as higher than those in other communities across the country (see *Appendix C: Benchmark Comparisons* for details).

**Figure 17: Recreational and Personal Enrichment Opportunities in Saratoga**



Respondents indicated how much time they spent participating in various recreation- and enrichment-related activities. Generally, older residents in Saratoga were most likely have visited a neighborhood park and least likely to have used a recreation center. Rates of participation and use tended to be lower in Saratoga when compared to other communities in the country (see *Appendix C: Benchmark Comparisons* for details).

**Figure 18: Participation in Recreational and Personal Enrichment Activities in Saratoga**

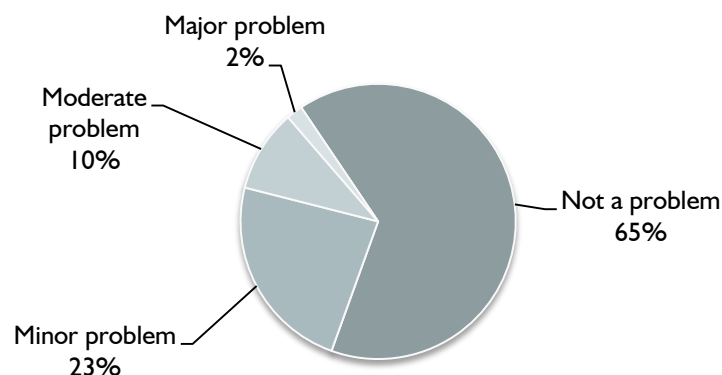


*Note: This chart combines the results of survey questions 11 and 13, which use different response scales. Complete response frequencies for these questions can be found in Appendix A: Complete Set of Survey Responses.*

One-third of Saratoga seniors said that they had at least “minor” problems having interesting recreational or cultural activities to attend. These problems were much lower in Saratoga than in other communities (see *Appendix C: Benchmark Comparisons*).

**Figure 19: Recreational Problems in Saratoga**

Thinking back over the last 12 months, how much of a problem has having interesting recreational or cultural activities to attend been for you?

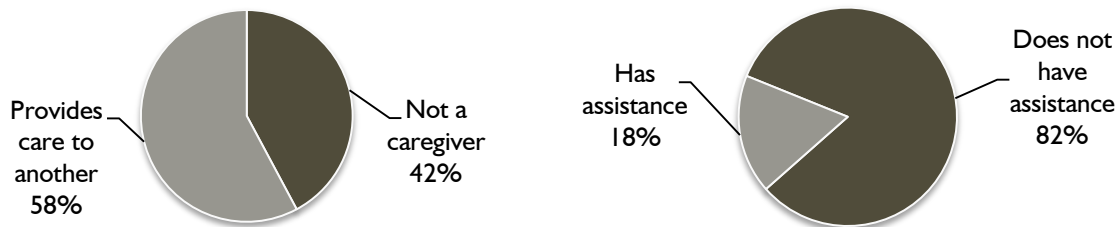


## Caregiving

More than 10 million people nationwide have disabling conditions that affect their ability to live independently<sup>12</sup> and almost 80% of these residents are seniors. Those who provide care to a loved one or friend with such a condition often feel a sense of contribution and personal worth despite the physical, emotional and financial burden such care can produce. While care is most often provided by family members and is unpaid, its value has been estimated at \$350 billion annually.<sup>13</sup>

Respondents indicated the number of hours they spent in a typical week providing care to children under 18, adults age 18 to 55 and adults age 55 and older. Overall, 58% older residents in Saratoga said they were providing care for others (most likely for adults age 55 or older) and 18% were the recipients of care.

**Figure 20: Providers and Recipients of Care in Saratoga**



*Note: Caregivers were identified by examining the number of hours spent providing care to children under 18, adults age 18 to 55 and adults age 55 and older as described in question 14 of the survey.*

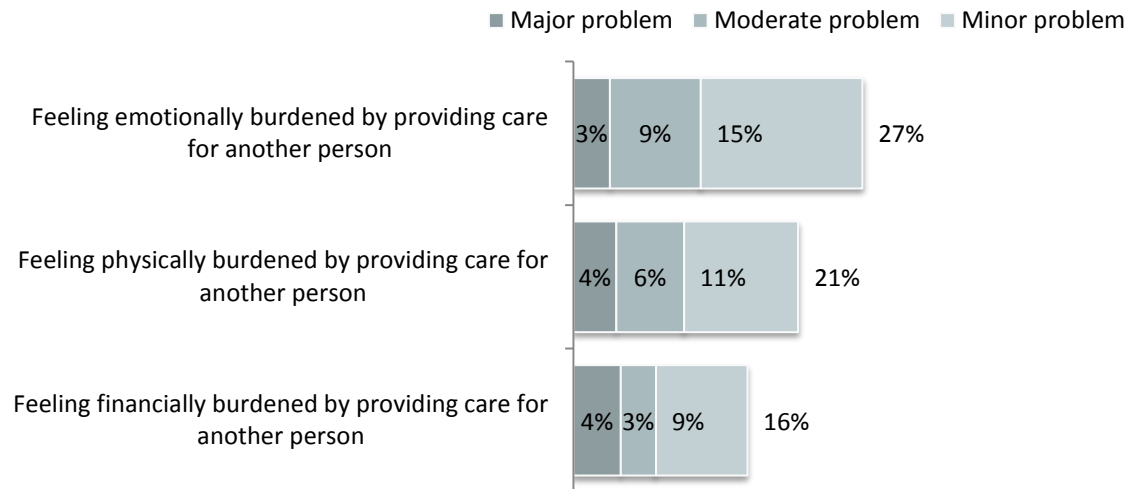
**Figure 21: Caregiving Hours of Older Residents in Saratoga**

During a typical week, how many hours do you spend providing care for one or more individuals with whom you have a significant personal relationship (such as spouse, other relative, partner, friend, neighbor or child), whether or not they live with you?	Never (no hours)	1 to 3 hours	4 to 5 hours	6 to 10 hours	11 to 19 hours	20 or more hours	Average number of hours of those who provide care*
One or more individuals age 55 or older	24%	30%	17%	13%	2%	15%	9
One or more individuals age 18 to 54	58%	20%	8%	4%	4%	6%	9
One or more individuals under age 18	63%	13%	8%	5%	4%	8%	10

\* Average number calculated from the mid-point of the ranges of those who provide care.

A “caregiving crunch” is predicted, where the average American will spend more years caring for parents than for their own children.<sup>14</sup> Older adults in Saratoga rated the extent to which they experienced physical strain, emotional stress or financial hardship as a result of being a caregiver. Overall, older adults in Saratoga were most likely to feel emotionally burdened by their caregiving and least likely to feel financially burdened.

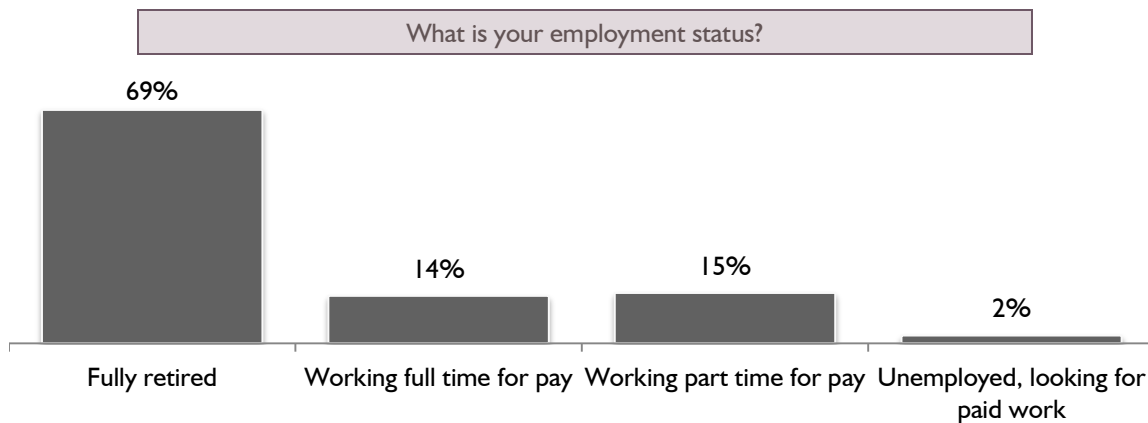
**Figure 22: Caregiver Burden in Saratoga**



## Economic Contribution

Recent studies have estimated that 70-80% of those 45 and older plan to continue working in their “retirement” years.<sup>15</sup> Financial stability is not the only reason; one study notes that pure enjoyment of work (35% of those questioned) or just a desire to try something new (5%) also will keep people on the job.<sup>15</sup> Survey results showed that 29% of older residents were still working for pay and about 2% said they would like to find a job. For those respondents who had not retired, the average age of expected retirement was 70 years old.

**Figure 23: Employment Status of Older Residents in Saratoga**



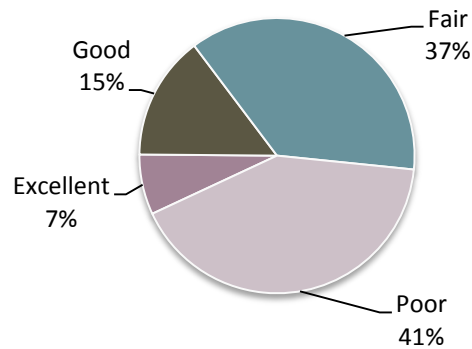
**Figure 24: Expected Retirement Age of Older Residents in Saratoga**

[If not yet fully retired] At what age do you expect to retire completely and not work for pay at all?	Percent of respondents
60 to 64	6%
65 to 69	40%
70 to 74	29%
75 or older	24%
Total	100%
Average age of expected retirement (for those not yet fully retired)	70

In Saratoga, 22% of respondents rated employment opportunities as “excellent” or “good” ratings that were much lower than other communities across the U.S. (see *Appendix C: Benchmark Comparisons* for details).

**Figure 25: Employment Opportunities in Saratoga**

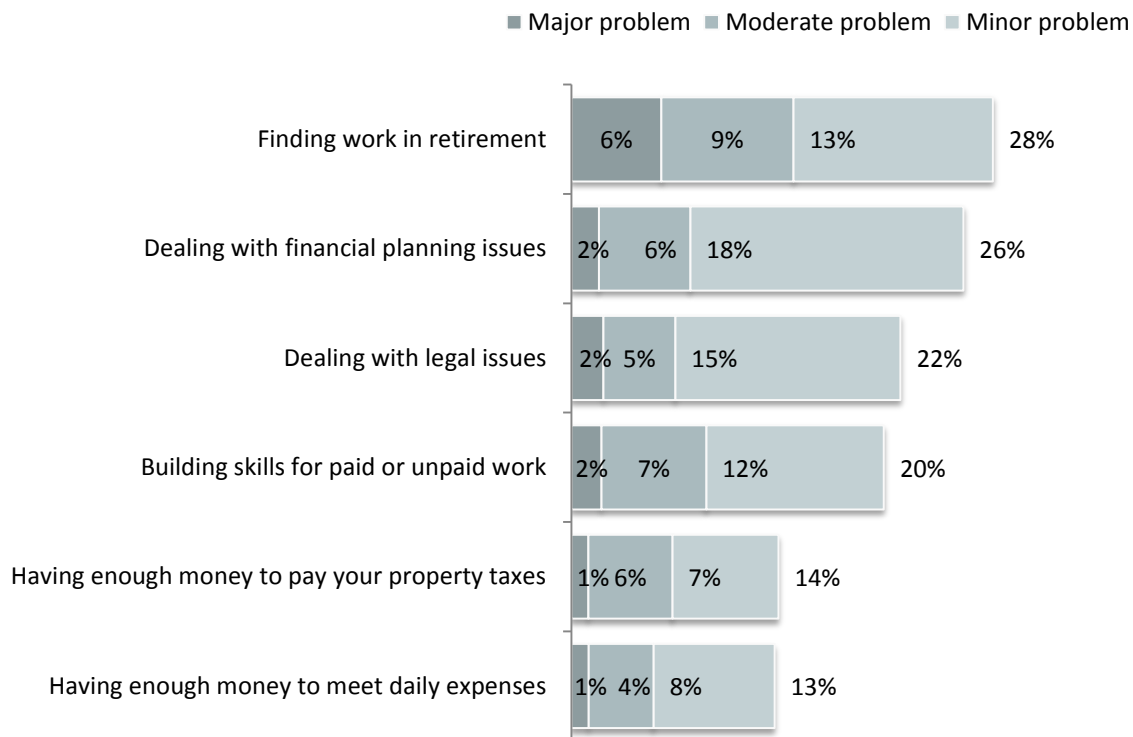
Please rate employment opportunities as it relates to Saratoga adults age 60 or older





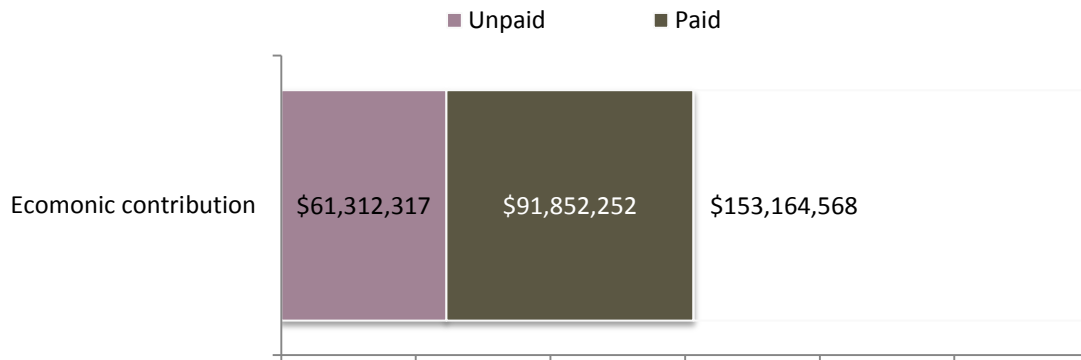
Regardless of residents' work status, one-quarter experienced at least "minor" problems with finding work in retirement or dealing with financial planning issues. Further, about 2 in 10 had problems dealing with legal issues and building skills for paid or unpaid work and fewer had problems with having enough money to pay their property taxes or meet daily expenses. The proportions of older adults that had financial and legal problems were much lower in Saratoga than in other communities (see *Appendix C: Benchmark Comparisons* for details).

**Figure 26: Financial and Legal Problems of Older Residents in Saratoga**



Productive behavior is “any activity, paid or unpaid, that generates goods or services of economic value.”<sup>2</sup> Productive activities include both paid and unpaid work of many kinds as well as services to friends, family or neighbors. Older adults provide significant contributions (paid and unpaid) to the communities in which they live. In addition to their paid work, older adults contributed to Saratoga through volunteering, providing informal help to family and friends and caregiving. The value of these paid and unpaid contributions by older adults in Saratoga totaled over \$153 million in a 12-month period (see *Appendix B: Survey Methodology* for additional detail).

**Figure 27: Economic Contribution of Older Adults in Saratoga**



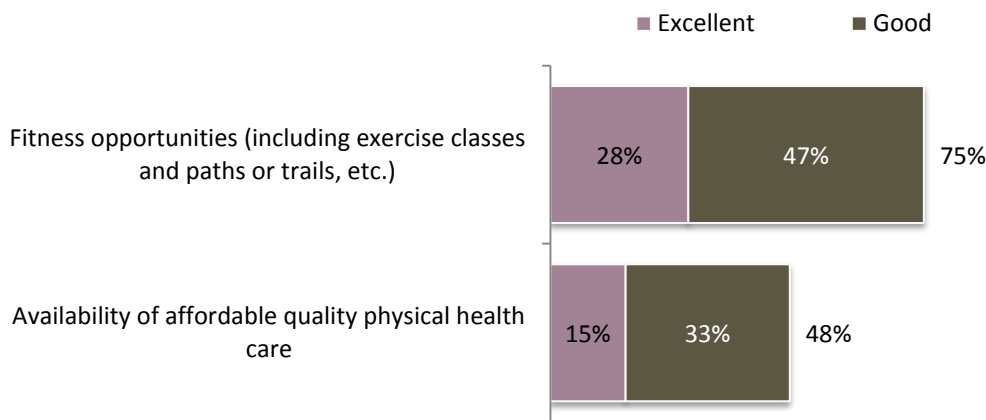
## Health and Wellness

The Centers for Disease Control and Prevention have argued, “Poor health is not an inevitable consequence of aging,”<sup>16</sup> yet community supports are needed to help maintain the health and independence of a growing senior population. Of all the attributes of aging, health poses the greatest risk and the biggest opportunity. If the community cannot assist the independence of residents who experience the inevitable decline in health that accompanies aging, the potential economic contribution of older residents will be lost to hospitals and nursing homes. Health and wellness for the purposes of this study included not only physical and mental health, but issues of independent living and health care.

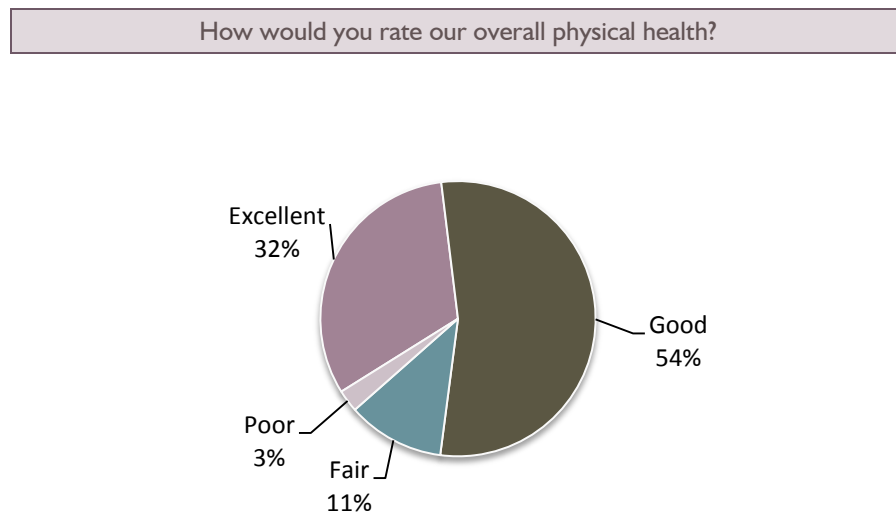
### Physical Health

CASOA assessed a variety of physical issues commonly affecting people as they age as well as provided older residents the opportunity to rate health opportunities in Saratoga. About 7 in 10 older residents rated fitness opportunities (including exercise classes and paths or trails, etc.) positively in Saratoga; the availability of quality physical health care was rated positively by 48%. Most older residents rated their overall physical health as “excellent” or “good” (see Figure 29). Overall, the older adults in Saratoga rated these aspects of physical health similar to or lower than other communities in the U.S.; however, more Saratoga residents reported being in “excellent” or “good” health than residents elsewhere (see *Appendix C: Benchmark Comparisons* for details).

**Figure 28: Physical Health Opportunities in Saratoga**

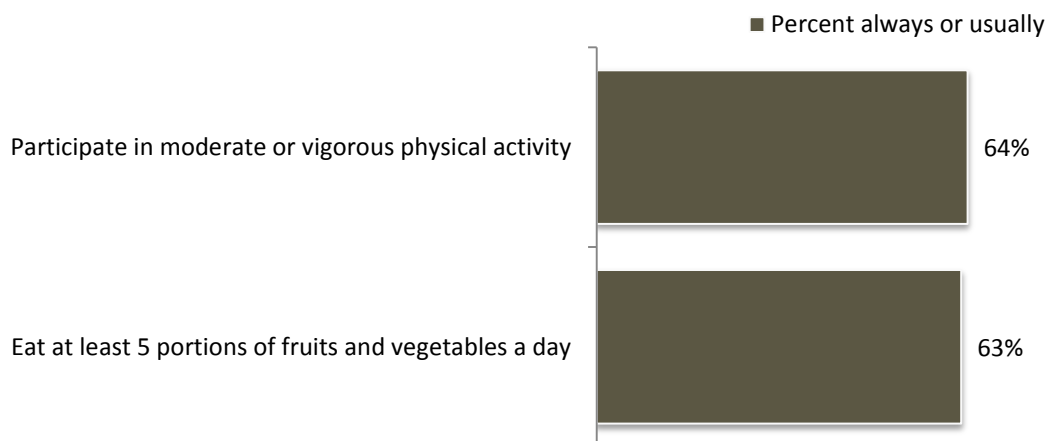


**Figure 29: Overall Physical Health of Older Residents in Saratoga**



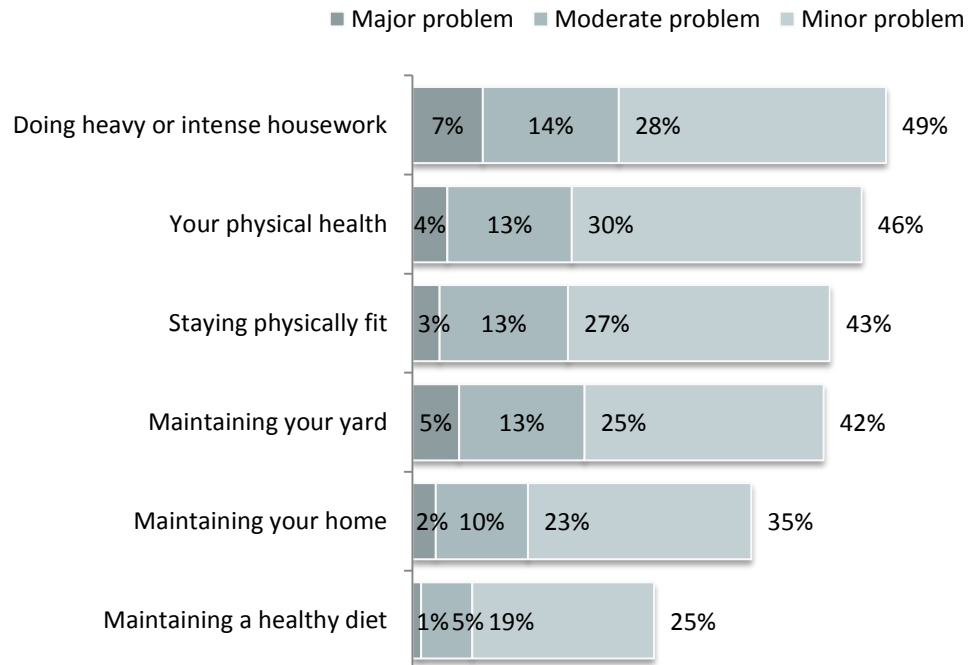
Respondents indicated how much time they spent participating in healthy activities. Generally, many older residents in Saratoga ate the recommended number of servings of fruits and vegetables and were able to exercise regularly. Rates of these healthy behaviors tended to be much higher in Saratoga when compared to other communities in the country (see *Appendix C: Benchmark Comparisons* for details).

**Figure 30: Participation in Healthy Activities in Saratoga**



Respondents reported the extent to which they had experienced problems with various physical health-related issues in the 12 months prior to the survey. Doing heavy or intense housework and physical health were reported as the highest health needs in Saratoga while maintaining a healthy diet and maintaining homes were reported as problems by the fewest respondents. The proportions of older residents reporting problems with doing heavy or intense housework, physical health, staying physically fit and maintaining their homes were lower in Saratoga than elsewhere. Additional comparisons are available in *Appendix C: Benchmark Comparisons*.

**Figure 31: Physical Health Problems of Older Residents in Saratoga**

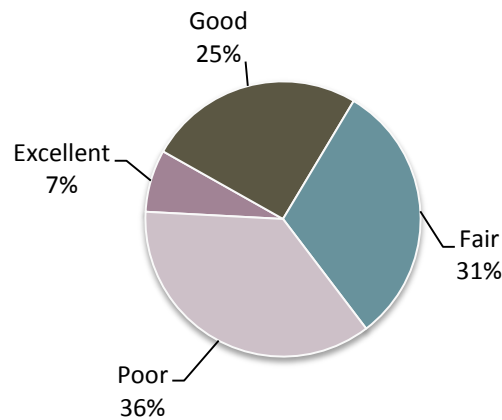


## Mental Health

In addition to rating aspects of physical health, older residents provided insight into aspects of their mental health. About 4 in 10 older resident felt there was “excellent” or “good” availability of mental health care in Saratoga while 9 in 10 rated their overall mental health/emotional wellbeing as “excellent” or “good”. Mental health ratings in Saratoga tended to be mixed compared other communities across the nation; availability of mental healthcare was much lower, while the proportion of Saratoga residents who reported high levels of emotional wellbeing were higher than levels seen across the country (see *Appendix C: Benchmark Comparisons* for details).

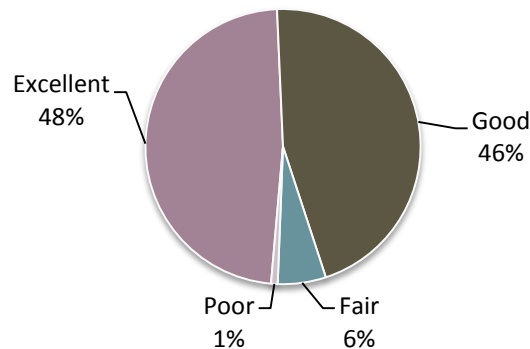
**Figure 32: Availability of Mental Health Care in Saratoga**

Please rate the availability of affordable quality mental health care it relates to Saratoga adults age 60 or older



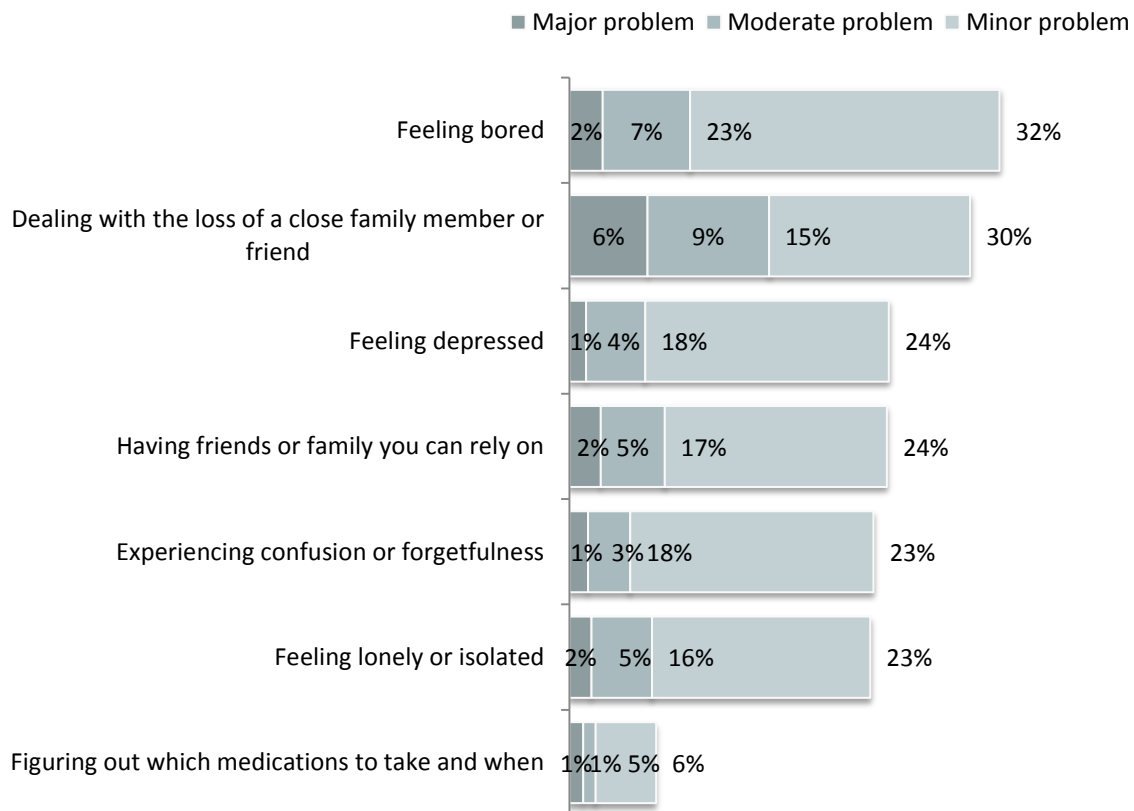
**Figure 33: Emotional Wellbeing of Older Residents in Saratoga**

How do you rate your overall mental health/emotional wellbeing?



While few older adults in Saratoga reported poor emotional wellbeing, they still reported at least “minor” problems with some aspects of their mental health. The most commonly cited mental health issues included feeling bored and dealing with the loss of a close family member or friend, while the least cited issues included feeling lonely or isolated and figuring out which medications to take and when. The mental health problems experienced by Saratoga older adults tended to be less common than the problems experienced by older adults in other communities (see *Appendix C: Benchmark Comparisons* for details).

**Figure 34: Mental Health Problems of Older Residents in Saratoga**

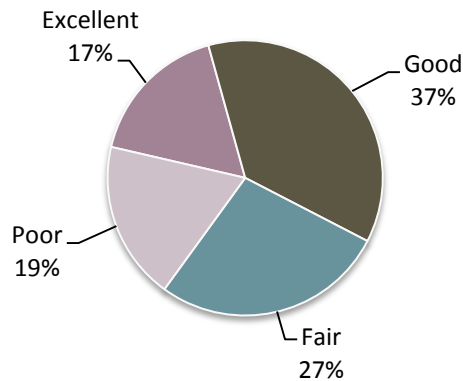


## Health Care

Saratoga's older residents rated the availability of preventive health services impartially, as 54% felt the availability of these services were "excellent" or "good." Compared to other communities across the nation, Saratoga's preventative health services were much lower than the services provided by its peers (see *Appendix C: Benchmark Comparisons* for details).

**Figure 35: Availability of Preventative Health Care in Saratoga**

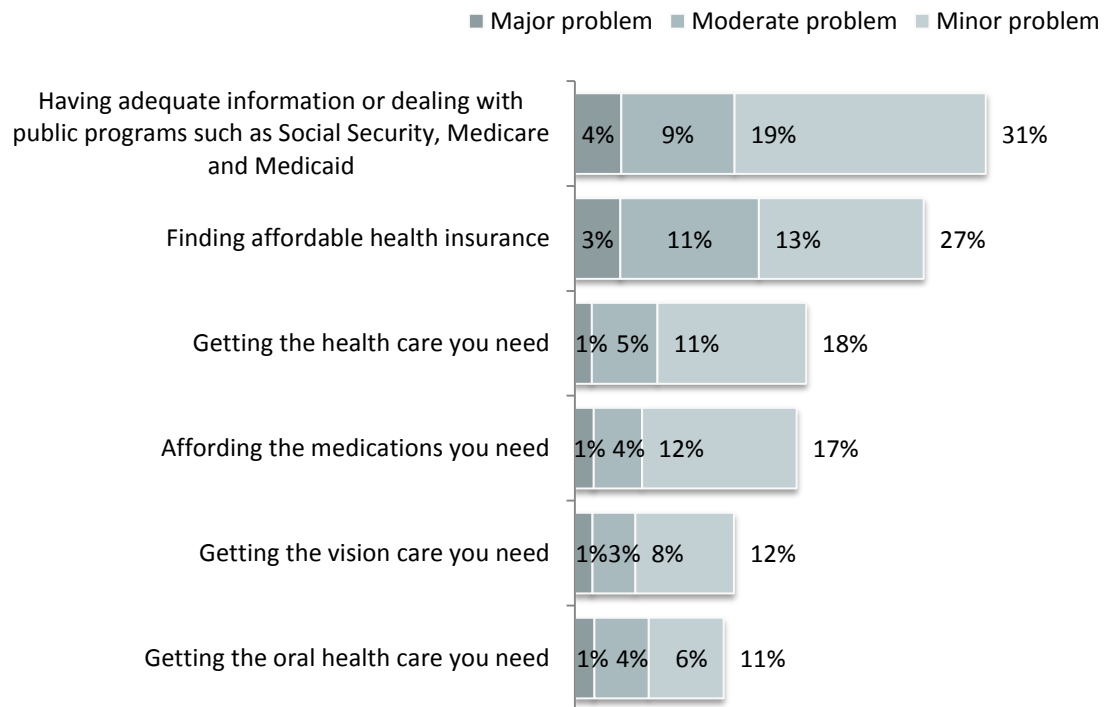
Please rate the availability of preventive health services (e.g., health screenings, flu shots, educational workshops) it relates to Saratoga adults age 60 or older





Older residents reported some problems with aspects of health care in Saratoga. The most commonly cited health care issues included having adequate information or dealing with public programs and finding affordable health insurance, while the least cited issues included getting the oral or vision care needed. Saratoga's older residents reported these health care problems at lower rates than the older residents of other communities across the U.S. (see *Appendix C: Benchmark Comparisons* for details).

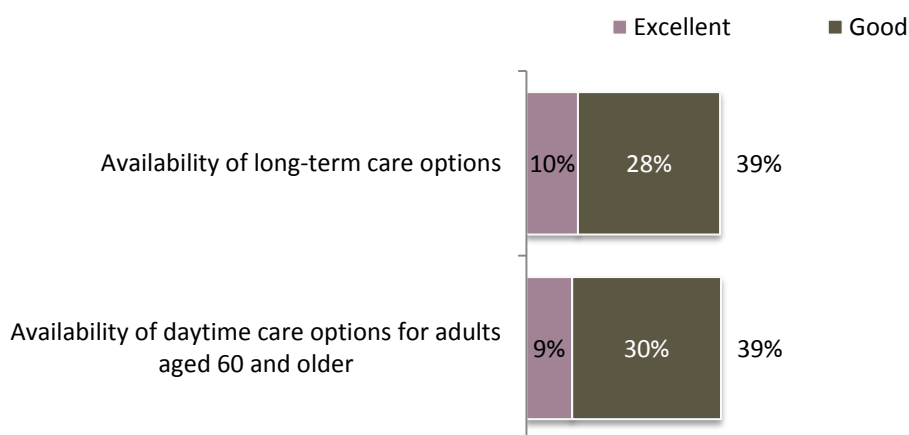
**Figure 36: Health Care Problems of Older Residents in Saratoga**



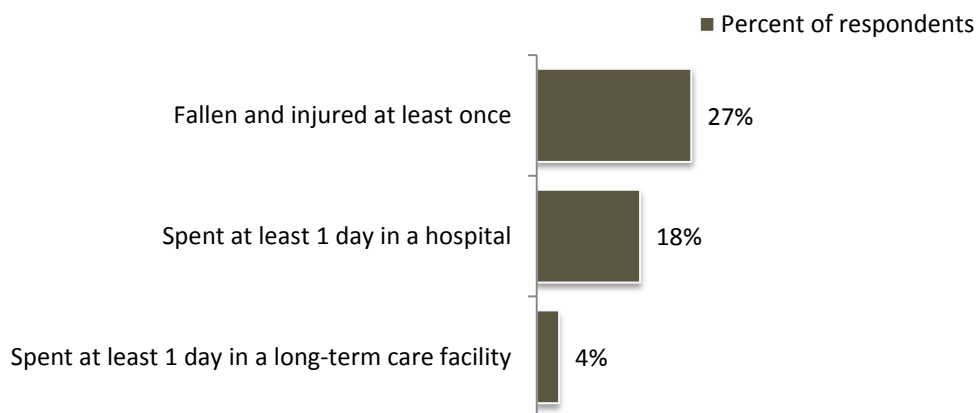
## Independent Living

For those unable to live independently (either temporarily or permanently), having care options available could mean the difference between remaining in or leaving the community. Saratoga's older residents gave less favorable reviews to the availability of long-term care options; about 39% felt the availability was "excellent" or "good." The availability of daytime care options for older adults was rated positively by a similar proportion of respondents. Availability of long-term care options in Saratoga were much lower than the services provided by other communities in the U.S., while the availability of daytime care options were rated much higher than residents in other communities (see *Appendix C: Benchmark Comparisons* for details). Additionally, less than one-quarter of respondents reported spending time in a hospital or nursing home, although 27% had fallen and injured themselves in the 12 months prior to the survey.

**Figure 37: Care Options for Older Residents in Saratoga**

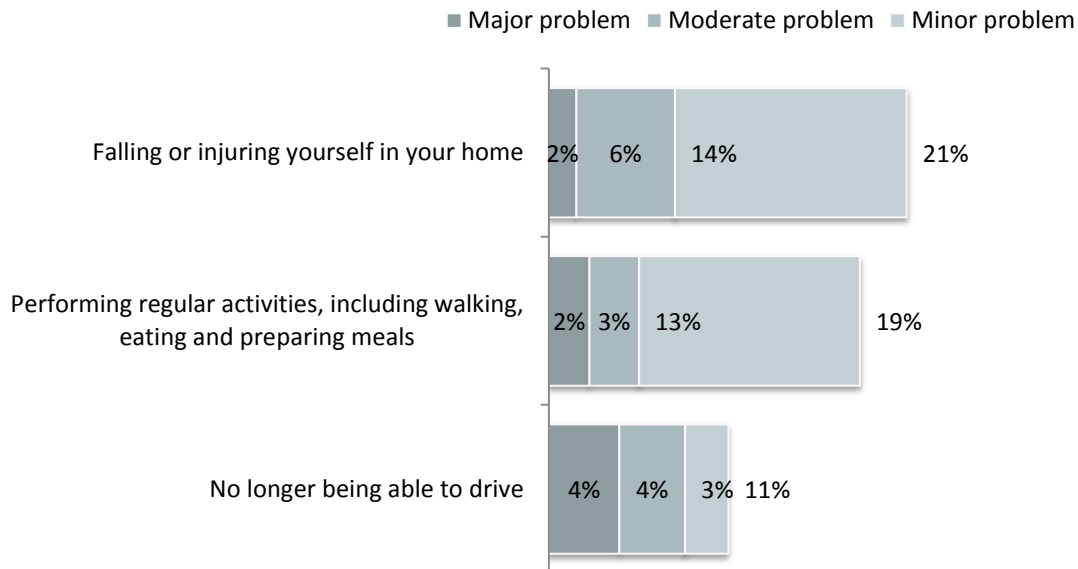


**Figure 38: Falls, Hospitalizations and Institutionalizations of Older Residents in Saratoga in Prior 12 Months**



Activities of daily living (ADL) usually include bathing, dressing and moving from bed to chair. Other activities of daily living, usually referred to as instrumental activities of daily living (IADL), include doing laundry, preparing meals, managing the household and so on. Inability to do one or more ADL or IADL means less independence. Overall, about one-quarter of older adults reported at least “minor” problems with aspects of independent living. Most notably, 21% reported having problems with falling or injuring themselves in their homes. Independent living problems tended to be lower in Saratoga than in peer communities see *Appendix C: Benchmark Comparisons* for details).

**Figure 39: Independent Living Problems Faced by Older Residents in Saratoga**

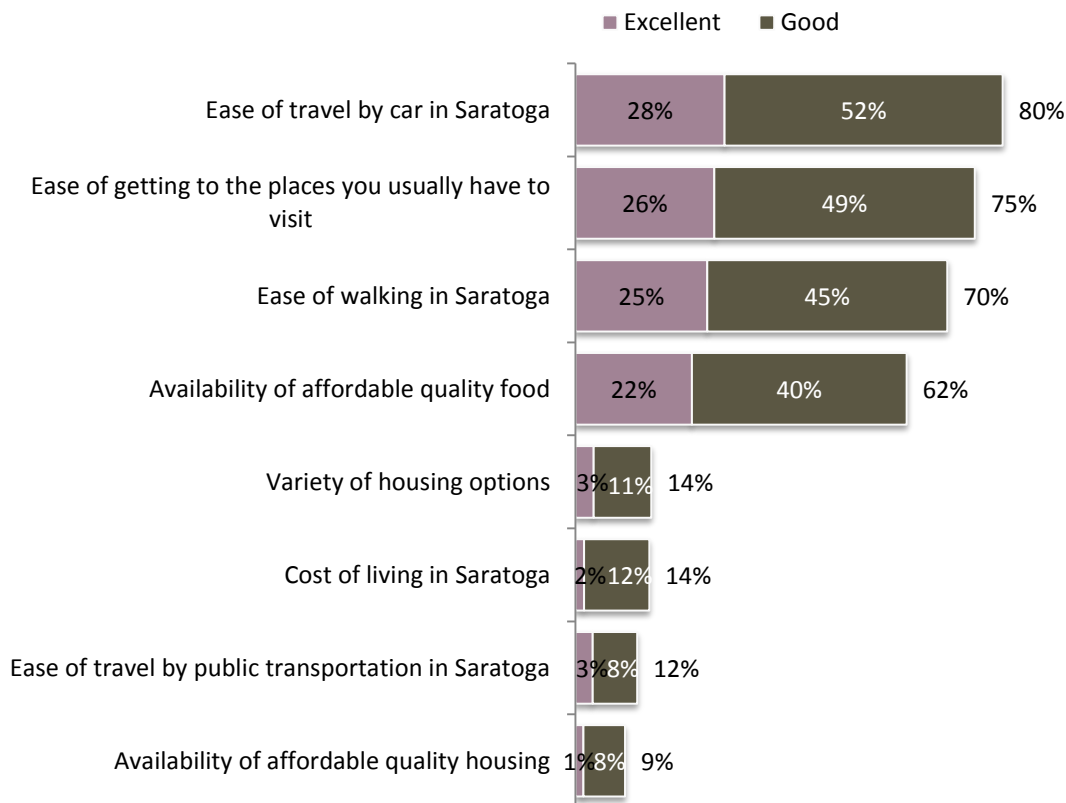


## Community Design and Land Use

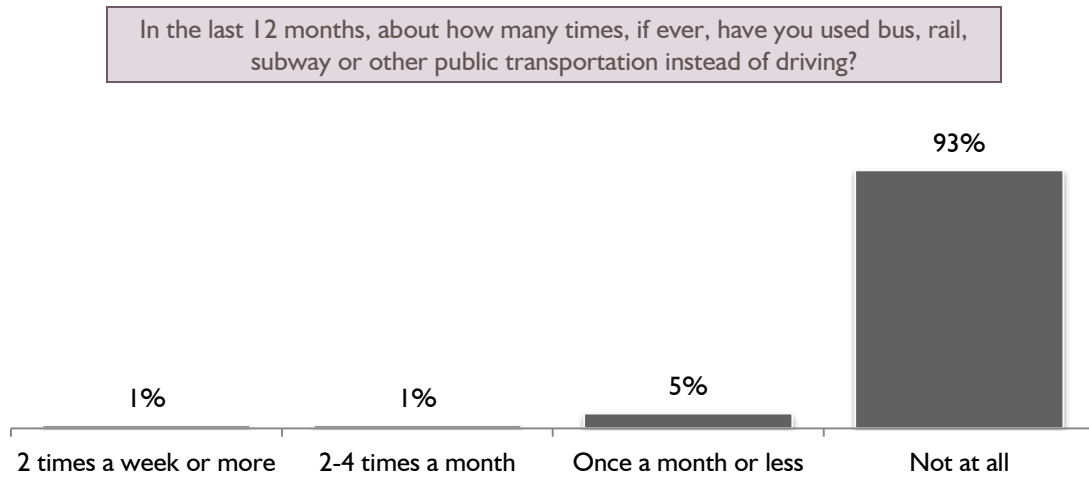
The movement in America towards designing more “livable” communities – those with mixed-use neighborhoods, higher-density development, increased connections, shared community spaces and more human-scale design – will become a necessity for communities to age successfully. “Smart growth” is not only beneficial for the environment, but holds great promise for the mobility, independence and civic life of its older residents. Generally, communities that have planned for older adults tend to emphasize access – a community design that facilitates movement and participation.

Saratoga’s older adults evaluated a number of aspects of design and land use in the community. Respondents rated ease of travel and ease of getting to places they usually have to visit most positively with at least 75% rating each as “excellent” or “good.” Ease of walking and the availability of affordable quality food were also assessed positively, while the availability of affordable quality housing and ease of travel by public transportation received the lowest ratings. Ease of car travel and walking in Saratoga received ratings that were much higher than those in other communities across the U.S., while aspects of housing (affordable quality and variety) were less favorable (see *Appendix C: Benchmark Comparisons* for details). Additionally, few respondents reported having used public transit within Saratoga (Figure 41).

**Figure 40: Aspects of Design and Land Use in Saratoga**

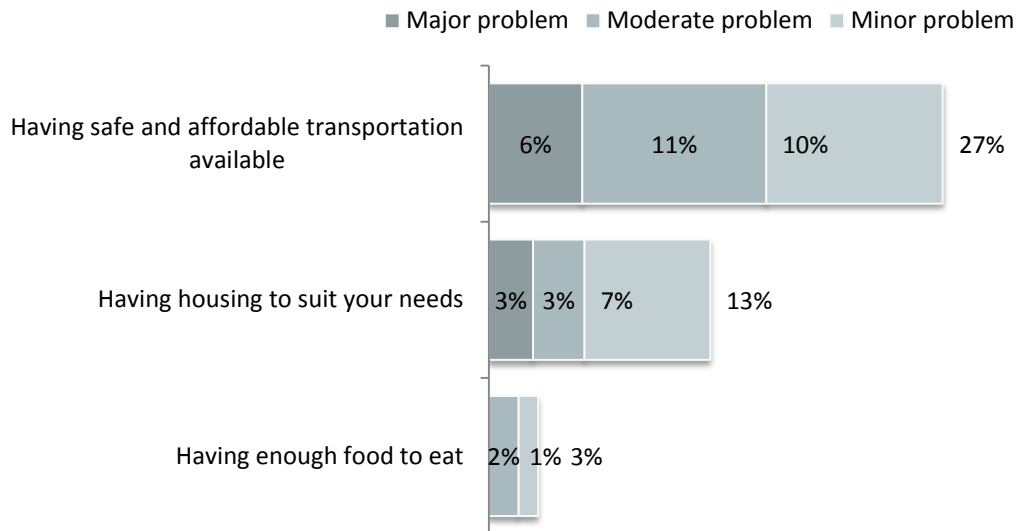


**Figure 41: Bus Ridership of Older Residents in Saratoga**



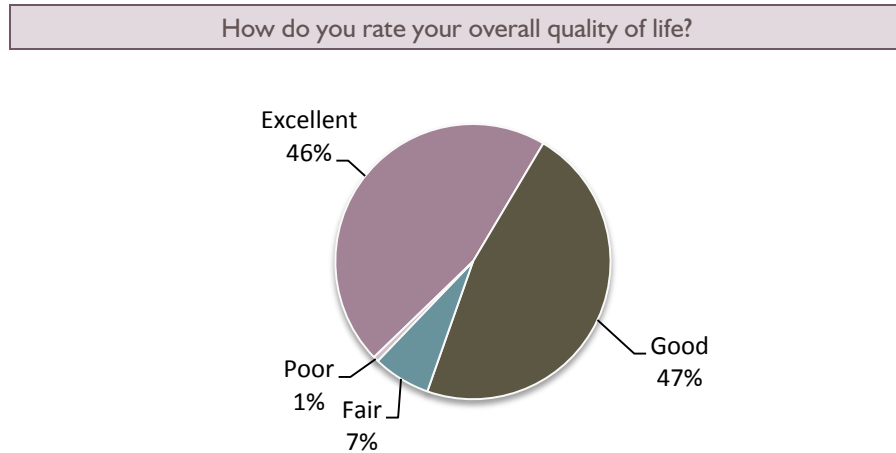
For residents to remain independent contributors to community quality, local government programs or policies can ease their participation in social and civic activities. This ease of participation comes from land use and economic planning that locates services in or close to residences, provides convenient transportation alternatives when services are too far to reach by walking and makes walking routes attractive. Few older adults experienced problems with having safe and affordable transportation available and even fewer experienced problems with having housing to suit their needs. Basic needs problems tended to be lower in Saratoga when compared to other communities across the nation (see *Appendix C: Benchmark Comparisons* for details).

**Figure 42: Basic Needs Problems of Older Residents in Saratoga**



Ultimately, communities that have planned well by promoting mobility, independence and meaningful engagement of its older residents provide a high quality of life for their residents of all ages. In Saratoga, about 9 in 10 older residents rated their overall quality of life as “excellent” or “good”; very few residents felt they had a poor quality of life. Saratoga’s quality of life was rated much higher than other communities in the U.S. (see *Appendix C: Benchmark Comparisons* for details).

**Figure 43: Overall Quality of Life of Older Residents in Saratoga**



## Community Readiness

Communities that assist older adults to remain or become active community participants provide the requisite opportunities for recreation, transportation, culture, education, communication, social connection, spiritual enrichment and health care. It is not a package mix, so each community must identify what its older adults seek and what the community provides. The judgments of the residents for whom community planning takes place provide the elements of an equation that describes overall community quality in Saratoga (Figure 44).

The following section of this report summarizes how older residents view Saratoga as a community that creates a thriving environment for its older adults within the six community dimensions of Overall Community Quality, Community and Belonging, Community Information, Productive Activities, Health and Wellness and Community Design and Land Use.

Further, older adults, more than others, face difficulties with aspects of everyday life. For many older adults these difficulties vastly exceed the minor physical pains or small losses of function that characterize almost everyone's circumstances after a certain age. When individual problems are added together, a group picture emerges that provides a useful description of the entire community of Saratoga. Nationally, areas where older adults face the largest share of life's challenges include caregiving, health and mental health, in-home support, nutrition and food security and transportation. This study also explored specific problems or stressors encountered by older adults in Saratoga, such as physical and emotional difficulties and injuries that have compromised their independence. Within the five community dimensions of Community and Belonging, Community Information, Productive Activities, Health and Wellness and Community Design and Land Use, the magnitude of these individual-level needs is presented (Figure 45), culminating in an exploration of high-risk populations (Figure 47).

## Saratoga Opportunities and Challenges

Survey respondents were asked to rate a number of aspects of the community which were converted to an average scale of 0 (the lowest rating, e.g., “poor”) to 100 (the highest rating, e.g., “excellent”) and then combined to provide one overall rating (index<sup>1</sup>) for each of the six dimensions of Community Readiness. (For more information on how the summary scores were calculated see *Appendix B: Survey Methodology*.)

Summary scores provide a broad picture of the perceived fit between what the City offered to older adults and what older residents needed:

- Older residents felt the areas of Community Quality and Productive Activities best met their needs
- The areas of Community and Belonging and Health and Wellness received slightly lower, but good average ratings
- Community Design and Land Use and Community Information were rated less favorably and received the lowest average ratings

**Figure 44: Saratoga Community Readiness Chart**



Scale: 0=Lowest/most negative, 100=Highest/most positive

<sup>1</sup> These ratings are not to be understood like ratings from school tests. Because they are summaries of several questions that range from 0 as “poor,” 33 as “fair,” 66 as “good” and 100 as “excellent”, a score of 58, as one example, should be interpreted as closer to “good” than “fair” (with the midpoint of the scale, 50, representing equidistance between “good” and “fair”).



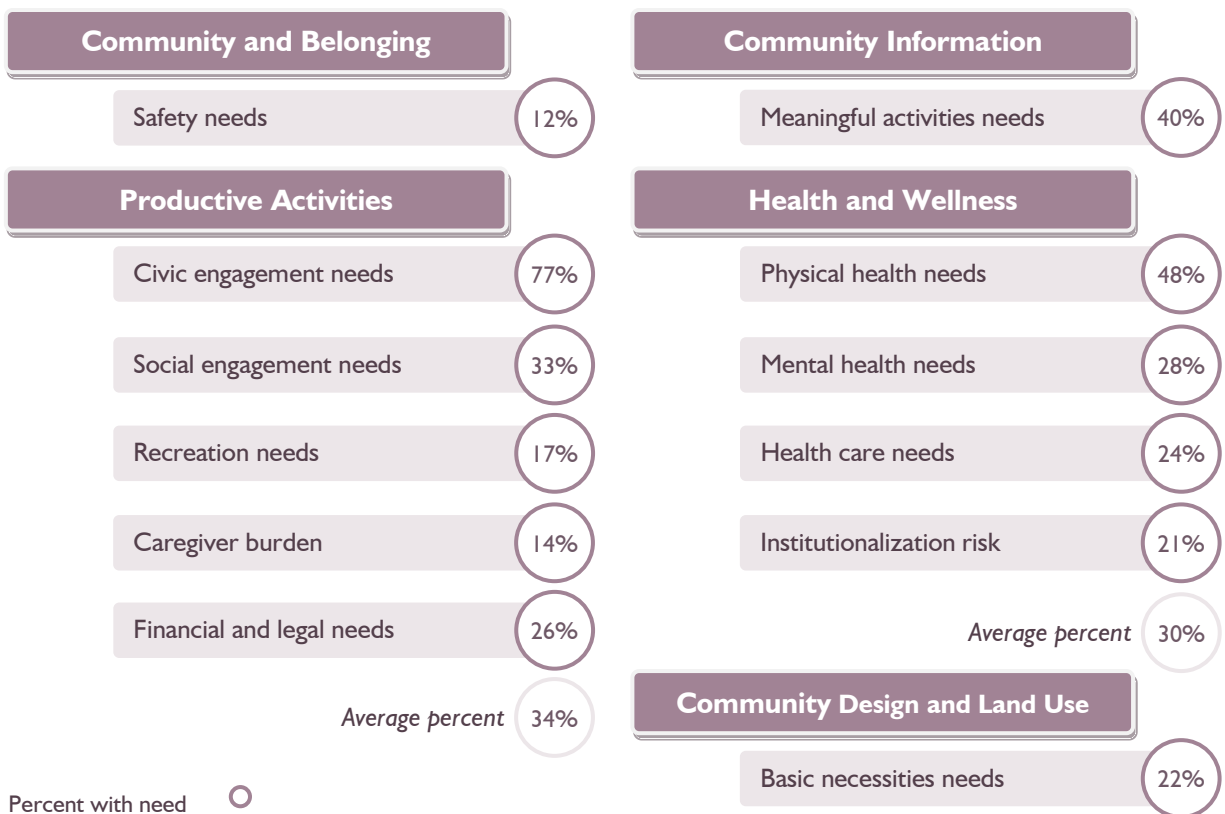
## Older Resident Needs in Saratoga

Over 40 individual survey questions about specific problems faced by older community members, as well as participation levels and community engagement were summarized into 12 larger areas to provide a broad picture of older resident needs in Saratoga. Summary scores are based on the average percent of respondents who experienced problems or had low levels of participation and engagement. *Appendix B: Survey Methodology* provides detailed information on the criteria used to identify respondents as having a need in a specific area. These 12 areas have been organized into the five community dimensions of Community and Belonging, Community Information, Productive Activities, Health and Wellness and Community Design and Land Use (no needs areas have been defined for the community dimension of Overall Community Quality).

Typically, it is understood that the self-reported needs of older adults represent a minimum level, a conservative estimate attenuated by respondents' strong desire to feel and appear self-reliant and further reduced by the silent voice of some older adults who, no matter how sensitive the attempt, are too frail to participate in any survey enterprise. Nonetheless, clear patterns of needs and strengths emerged from this assessment:

- Older residents had the largest needs in the areas of civic engagement and physical health
- A significant portion had needs in the areas of meaningful activities and social engagement
- Few reported needs in the areas of safety and caregiver burden

**Figure 45: Older Adult Needs in Saratoga by Community Dimension**



While older residents reported the lowest prevalence of need in the areas of safety and caregiver burden, needs can be quite serious for those affected. It should be understood that the percent of the population that experiences a problem is not a measure of how difficult a problem is to endure for the people who share it. Some needs or opportunities, though rare as a percent of residents, have a particularly devastating impact on residents' quality of life – for example, needing help transferring from bed to wheelchair or having a problem with safety, so it is important to consider both the prevalence of the need or opportunity and its centrality to residents' sustained independence.

**Figure 46: Older Resident Needs in Saratoga**

Area of need	Percent with need	Number affected in 2016 (N=7,881)
Safety	12%	946
Civic engagement	77%	6,045
Social engagement	33%	2,619
Recreation	17%	1,379
Financial and legal	26%	2,087
Meaningful activities	40%	3,153
Caregiver burden	14%	1,070
Physical health	48%	3,800
Mental health	28%	2,240
Health care	24%	1,899
Institutionalization risk	21%	1,660
Basic necessities	22%	1,739

## Populations at High Risk

As people age, many learn to take better care of themselves, to plan for retirement and, generally, to move more deliberately. Aging builds wisdom but can sap resources — physical, emotional and financial. Even those blessed by good luck or those prescient enough to plan comprehensively for the best future may find themselves with unanticipated needs or with physical, emotional or financial strengths that could endure only with help. Some people age better than others and aging well requires certain strengths that are inherent and others that can be supported by assistance from the private sector and government. For Saratoga's older adults, although needs were spread across the board, residents reporting the largest percent of unresolved needs in Saratoga were more likely to be age 85 or older, not white, Hispanic, report a lower income, live alone or rent their homes.

**Figure 47: Needs of Older Population by Sociodemographic Characteristics, Percent and Number Affected in 2016 (N=7,881)**

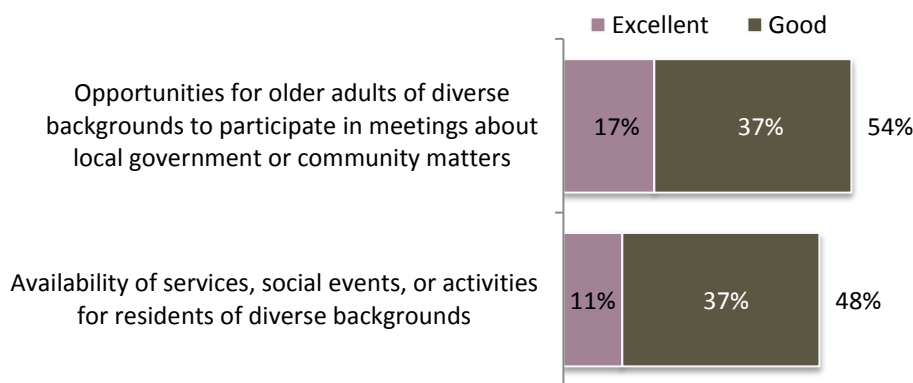
	Community and Belonging		Community Information		Health and Wellness		Productive Activities		Community Design and Land Use	
Female	12%	456	41%	1,663	32%	1,330	34%	1,410	23%	931
Male	13%	451	40%	1,461	28%	1,041	34%	1,250	21%	764
60 to 74 years	12%	910	42%	3,276	28%	2,236	33%	2,614	21%	1,635
75 to 84 years	9%	734	41%	3,198	24%	1,918	34%	2,684	19%	1,504
85 or over	15%	1,207	38%	3,027	38%	2,989	34%	2,682	26%	2,077
White	13%	996	37%	2,917	30%	2,358	33%	2,573	21%	1,631
Not white	9%	716	48%	3,766	30%	2,366	36%	2,852	23%	1,826
Hispanic	12%	958	44%	3,503	45%	3,521	28%	2,210	44%	3,491
Not Hispanic	12%	937	40%	3,149	30%	2,355	34%	2,652	21%	1,643
Less than \$25,000	37%	2,902	61%	4,797	53%	4,201	56%	4,446	52%	4,117
\$25,000 to \$74,999	11%	890	50%	3,911	41%	3,243	38%	3,028	30%	2,346
\$75,000 or more	10%	751	36%	2,841	25%	1,985	31%	2,434	17%	1,351
Rent	10%	761	54%	4,259	49%	3,889	42%	3,296	41%	3,208
Own	12%	926	39%	3,102	29%	2,256	33%	2,611	20%	1,610
Lives alone	15%	1,213	44%	3,448	40%	3,114	41%	3,234	32%	2,505
Lives with others	11%	868	39%	3,087	28%	2,177	32%	2,515	19%	1,513
<b>Overall</b>	<b>12%</b>	<b>946</b>	<b>40%</b>	<b>3,153</b>	<b>30%</b>	<b>2,388</b>	<b>34%</b>	<b>2,683</b>	<b>22%</b>	<b>1,739</b>

## Responses to Saratoga's Custom Questions

In addition to the uniform questions on CASOA, Saratoga included its own unique questions on the survey to aid in planning, resource allocation and policy analysis. “Don’t know” responses have been removed from the analysis for the following questions, when applicable.

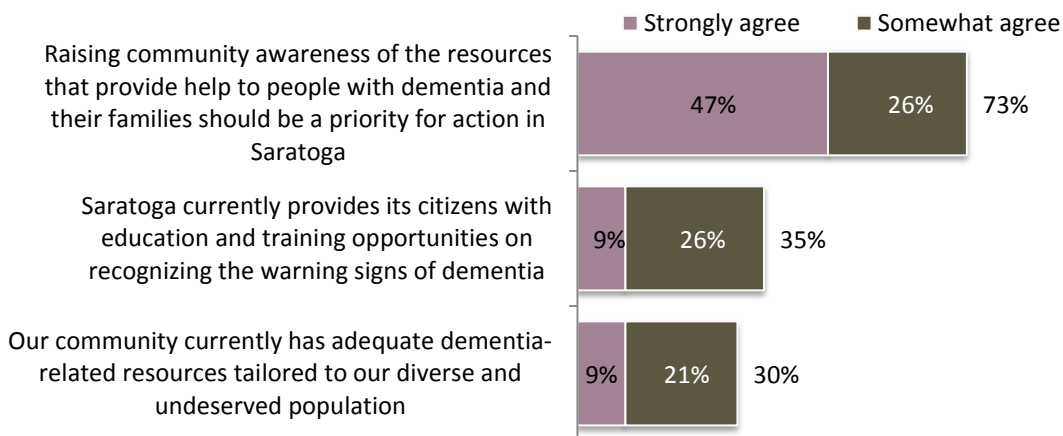
About half of Saratoga award “excellent” or “good” ratings for the opportunities for older adults of diverse backgrounds to participate in meetings about local government or community matters. A similar proportion also positively rated the availability of services, social events or activities for this specific group of older adults.

**Figure 48: Opportunities for Residents of Diverse Backgrounds**



Saratoga residents were also asked to indicate their level of agreement with aspects related to services provided to residents with dementia and their families. About three-quarters indicated that they “strongly” or “somewhat” agreed that raising community awareness for resources that provide help to these older adults should be a priority for the community. Close to 3 in 10 were also in agreement that Saratoga currently provides its citizens with education and training opportunities related to dementia, as well as adequate dementia-related resources tailored to this diverse and underserved population of the city.

**Figure 49: Community Services for Residents with Dementia**



## Appendix A: Complete Set of Survey Responses

### Frequencies Excluding “Don’t Know”

**Table 1: Question 1: Quality of Community**

Please circle the number that comes closest to your opinion for each of the following questions.	Excellent	Good	Fair	Poor	Total
How do you rate Saratoga as a place to live?	67%	30%	2%	0%	100%
How do you rate Saratoga as a place to retire?	34%	43%	17%	6%	100%

**Table 2: Question 2: Community Characteristics**

Please rate each of the following characteristics as they relate to Saratoga adults age 60 or over:	Excellent	Good	Fair	Poor	Total
Opportunities to volunteer	27%	48%	22%	3%	100%
Employment opportunities	7%	15%	37%	41%	100%
Opportunities to enroll in skill-building or personal enrichment classes	22%	44%	27%	7%	100%
Recreation opportunities (including games, arts, and library services, etc.)	28%	49%	19%	5%	100%
Fitness opportunities (including exercise classes and paths or trails, etc.)	28%	47%	20%	5%	100%
Opportunities to attend social events or activities	18%	46%	28%	8%	100%
Opportunities to attend religious or spiritual activities	36%	48%	15%	1%	100%
Opportunities to attend or participate in meetings about local government or community matters	23%	48%	21%	8%	100%
Availability of affordable quality housing	1%	8%	18%	73%	100%
Variety of housing options	3%	11%	33%	53%	100%
Availability of long-term care options	10%	28%	36%	25%	100%
Availability of daytime care options for adults aged 60 and older	9%	30%	37%	24%	100%
Availability of information about resources for adults aged 60 and older	8%	33%	35%	24%	100%
Availability of financial or legal planning services	9%	37%	32%	23%	100%
Availability of affordable quality physical health care	15%	33%	29%	23%	100%
Availability of affordable quality mental health care	7%	25%	31%	36%	100%
Availability of preventive health services (e.g., health screenings, flu shots, educational workshops)	17%	37%	27%	19%	100%
Availability of affordable quality food	22%	40%	29%	9%	100%
Sense of community	16%	42%	30%	12%	100%
Openness and acceptance of the community towards residents aged 60 and older of diverse backgrounds	20%	44%	26%	11%	100%
Ease of travel by public transportation in Saratoga	3%	8%	21%	67%	100%
Ease of travel by car in Saratoga	28%	52%	15%	5%	100%
Ease of walking in Saratoga	25%	45%	20%	10%	100%
Ease of getting to the places you usually have to visit	26%	49%	21%	4%	100%

Please rate each of the following characteristics as they relate to Saratoga adults age 60 or over:	Excellent	Good	Fair	Poor	Total
Overall feeling of safety in Saratoga	38%	50%	10%	1%	100%
Valuing residents aged 60 and older in Saratoga	19%	47%	28%	6%	100%
Neighborliness of Saratoga	16%	39%	32%	12%	100%
Cost of living in Saratoga	2%	12%	37%	49%	100%
Availability of services, social events, or activities for residents of diverse backgrounds	11%	37%	39%	13%	100%
Opportunities for older adults of diverse backgrounds to participate in meetings about local government or community matters	17%	37%	33%	13%	100%

**Table 3: Question 3: Overall Service to Older Adults**

	Excellent	Good	Fair	Poor	Total
How would you rate the overall services provided to adults aged 60 and older in Saratoga?	8%	47%	35%	10%	100%

**Table 4: Question 4: Level of Informedness about Services and Activities for Older Adults**

In general, how informed or uninformed do you feel about services and activities available to adults aged 60 and older in your community?	Percent of respondents
Very informed	8%
Somewhat informed	40%
Somewhat uninformed	31%
Very uninformed	21%
Total	100%

**Table 5: Question 5: Quality of Life and Health**

Please circle the number that comes closest to your opinion for each of the following questions.	Excellent	Good	Fair	Poor	Total
How do you rate your overall physical health?	32%	54%	11%	3%	100%
How do you rate your overall mental health/emotional well-being?	48%	46%	6%	1%	100%
How do you rate your overall quality of life?	46%	47%	7%	1%	100%

**Table 6: Question 6: Problems Faced by Older Adults**

The following questions list a number of problems that older adults may or may not face. Thinking back over the last 12 months, how much of a problem, if at all, has each of the following been for you?	Not a problem	Minor problem	Moderate problem	Major problem	Total
Having housing to suit your needs	87%	7%	3%	3%	100%
Your physical health	54%	30%	13%	4%	100%
Performing regular activities, including walking, eating and preparing meals	81%	13%	3%	2%	100%
Having enough food to eat	97%	1%	2%	0%	100%
Doing heavy or intense housework	51%	28%	14%	7%	100%
Having safe and affordable transportation available	73%	10%	11%	6%	100%
No longer being able to drive	89%	3%	4%	4%	100%
Feeling depressed	76%	18%	4%	1%	100%

The following questions list a number of problems that older adults may or may not face. Thinking back over the last 12 months, how much of a problem, if at all, has each of the following been for you?	Not a problem	Minor problem	Moderate problem	Major problem	Total
Experiencing confusion or forgetfulness	77%	18%	3%	1%	100%
Maintaining your home	65%	23%	10%	2%	100%
Maintaining your yard	58%	25%	13%	5%	100%
Finding productive or meaningful activities to do	72%	18%	8%	1%	100%
Having friends or family you can rely on	76%	17%	5%	2%	100%
Falling or injuring yourself in your home	79%	14%	6%	2%	100%
Finding affordable health insurance	73%	13%	11%	3%	100%
Getting the health care you need	82%	11%	5%	1%	100%
Affording the medications you need	83%	12%	4%	1%	100%
Figuring out which medications to take and when	94%	5%	1%	1%	100%
Getting the oral health care you need	89%	6%	4%	1%	100%
Getting the vision care you need	88%	8%	3%	1%	100%
Having enough money to meet daily expenses	87%	8%	4%	1%	100%
Having enough money to pay your property taxes	86%	7%	6%	1%	100%
Staying physically fit	57%	27%	13%	3%	100%
Maintaining a healthy diet	75%	19%	5%	1%	100%
Having interesting recreational or cultural activities to attend	65%	23%	10%	2%	100%
Having interesting social events or activities to attend	65%	21%	12%	2%	100%
Feeling bored	68%	23%	7%	2%	100%
Feeling like your voice is heard in the community	47%	25%	18%	10%	100%
Finding meaningful volunteer work	71%	15%	11%	4%	100%
Feeling physically burdened by providing care for another person	79%	11%	6%	4%	100%
Feeling emotionally burdened by providing care for another person	73%	15%	9%	3%	100%
Feeling financially burdened by providing care for another person	84%	9%	3%	4%	100%
Dealing with legal issues	78%	15%	5%	2%	100%
Having adequate information or dealing with public programs such as Social Security, Medicare and Medicaid	69%	19%	9%	4%	100%
Finding work in retirement	72%	13%	9%	6%	100%
Building skills for paid or unpaid work	80%	12%	7%	2%	100%
Not knowing what services are available to adults aged 60 and older in your community	38%	27%	24%	10%	100%
Feeling lonely or isolated	77%	16%	5%	2%	100%
Dealing with the loss of a close family member or friend	70%	15%	9%	6%	100%
Being a victim of crime	86%	9%	2%	2%	100%
Being a victim of fraud or a scam	86%	8%	4%	2%	100%
Being physically or emotionally abused	95%	3%	1%	1%	100%

The following questions list a number of problems that older adults may or may not face. Thinking back over the last 12 months, how much of a problem, if at all, has each of the following been for you?	Not a problem	Minor problem	Moderate problem	Major problem	Total
Dealing with financial planning issues	74%	18%	6%	2%	100%
Being treated unfairly or discriminated against because of your age	84%	9%	4%	2%	100%

**Table 7: Question 7: Days Spent in Facilities**

Thinking back over the past 12 months, how many days did you spend in...	No days (zero)	One to two days	Three to five days	Six or more days	Total
As a patient in a hospital?	82%	8%	4%	5%	100%
In a long-term care facility (including nursing home or in-patient rehabilitation)?	96%	0%	0%	4%	100%

**Table 8: Question 8: Falls in Last 12 Months**

Thinking back over the past 12 months, how many times have you fallen and injured yourself? Was it...	Percent of respondents
Never	73%
Once or twice	24%
3-5 times	2%
More than 5 times	0%
Total	100%

**Table 9: Question 9: Recommend Living in Community**

How likely or unlikely are you to recommend living in Saratoga to adults aged 60 and older?	Percent of respondents
Very likely	31%
Somewhat likely	33%
Somewhat unlikely	20%
Very unlikely	16%
Total	100%

**Table 10: Question 10: Likelihood of Remaining in Community Throughout Retirement**

How likely or unlikely are you to remain in Saratoga throughout your retirement?	Percent of respondents
Very likely	59%
Somewhat likely	24%
Somewhat unlikely	10%
Very unlikely	7%
Total	100%



**Table 11: Question 11: Participation in Activities**

In the last 12 month, about how many times, if ever, have you participated in or done each of the following?	2 times a week or more	2-4 times a month	Once a month or less	Not at all	Total
Used the Adult & Senior Center of Saratoga	2%	3%	8%	87%	100%
Used a recreation center in Saratoga	3%	4%	9%	84%	100%
Used a public library in Saratoga	10%	23%	35%	32%	100%
Used bus, rail, subway or other public transportation instead of driving	1%	1%	5%	93%	100%
Visited a neighborhood park	13%	18%	42%	27%	100%

**Table 12: Question 12: Attendance of Public Meetings**

Thinking about local public meetings (of local elected officials like City Council or County Commissioners, advisory boards, town halls, HOA, neighborhood watch, etc.), in the last 12 months, about how many times, if at all, have you or other household members attended or watched a local public meeting?	2 times a week or more	2-4 times a month	Once a month or less	Not at all	Total
Attended a local public meeting	1%	1%	27%	71%	100%
Watched (online or on television) a local public meeting	1%	2%	17%	80%	100%

**Table 13: Question 13: Hours Spent Doing Activities**

During a typical week, how many hours, if any, do you spend doing the following?	Never (no hours)	1 to 3 hours	4 to 5 hours	6 to 10 hours	11 or more hours	Total
Participating in a club (including book, dance, game and other social)	51%	23%	12%	9%	6%	100%
Participating in a civic group (including Elks, Kiwanis, Masons, etc.)	86%	9%	2%	1%	2%	100%
Communicating/visiting with friends and/or family	3%	26%	23%	20%	27%	100%
Participating in religious or spiritual activities with others	53%	30%	9%	4%	3%	100%
Participating in a recreation program or group activity	42%	25%	16%	9%	7%	100%
Providing help to friends or relatives	16%	45%	20%	10%	10%	100%
Volunteering your time to some group/activity in Saratoga	68%	19%	7%	4%	3%	100%

**Table 14: Question 14: Hours Spent Providing Care**

During a typical week, how many hours do you spend providing care for one or more individuals with whom you have a significant relationship (such as spouse, other relative, partner, friend, neighbor or child), whether or not they live with you?	Never (no hours)	1 to 3 hours	4 to 5 hours	6 to 10 hours	11 to 20 hours	20 or more hours	Total
One or more individuals age 55 or older	57%	17%	9%	7%	1%	9%	100%
One or more individuals age 18 to 54	77%	11%	4%	2%	2%	4%	100%
One or more individuals under age 18	79%	7%	4%	3%	2%	4%	100%

**Table 15: Question 15: Regularity Doing Activities**

How often, if at all, do you do each of the following, considering all of the times you could?	Never	Rarely	Sometimes	Usually	Always	Total
Eat at least 5 portions of fruits and vegetables a day	4%	9%	24%	43%	20%	100%
Participate in moderate or vigorous physical activity	5%	11%	19%	36%	28%	100%
Receive assistance from someone almost every day	80%	11%	2%	5%	3%	100%
Vote in local elections	5%	3%	3%	12%	76%	100%

**Table 16: Question 16: Agreement with Dementia Related Services**

Please indicate your level of agreement or disagreement with the following statements:	Strongly agree	Somewhat agree	Neither agree nor disagree	Somewhat disagree	Strongly disagree	Total
Raising community awareness of the resources that provide help to people with dementia and their families should be a priority for action in Saratoga	47%	26%	13%	7%	7%	100%
Our community currently has adequate dementia-related resources tailored to our diverse and undeserved population	9%	21%	49%	14%	6%	100%
Saratoga currently provides its citizens with education and training opportunities on recognizing the warning signs of dementia	9%	26%	41%	15%	8%	100%

**Table 17: Question D1: Length of Residency**

How many years have you lived in Saratoga?	Percent of respondents
Less than 1 year	1%
1-5 years	5%
6-10 years	3%
11-20 years	13%
More than 20 years	79%
Total	100%

**Table 18: Question D2: Housing Unit Type**

Which best describes the building you live in?	Percent of respondents
Single family home	87%
Townhouse, condominium, duplex or apartment	10%
Mobile home	0%
Assisted living residence	2%
Nursing home	0%
Other	2%
Total	100%

**Table 19: Question D3: Tenure (Rent or Own)**

Do you currently rent or own your home?	Percent of respondents
Rent	6%
Own (with a mortgage payment)	42%
Own (free and clear; no mortgage)	52%
Total	100%

**Table 20: Question D4: Monthly Housing Costs**

About how much is your monthly housing cost for the place you live (including rent, mortgage payment, property tax, property insurance and homeowners' association (HOA) fees)?	Percent of respondents
Less than \$300 per month	7%
\$300 to \$599 per month	13%
\$600 to \$999 per month	8%
\$1,000 to \$1,499 per month	14%
\$1,500 to \$2,499 per month	21%
\$2,500 or more per month	37%
Total	100%

**Table 21: Question D5: Total Number of Household Members**

How many people, including yourself, live in your household?	Percent of respondents
1 person (live alone)	21%
2 people	60%
3 people	11%
4 or more people	7%
Total	100%

**Table 22: Question D6: Number of Older Adult Household Members**

How many of these people, including yourself, are 55 or older?	Percent of respondents
1 person	34%
2 people	64%
3 people	2%
4 or more people	0%
Total	100%

**Table 23: Question D7: Retirement Status**

What is your employment status?	Percent of respondents
Fully retired	69%
Working full time for pay	14%
Working part time for pay	15%
Unemployed, looking for paid work	2%
Total	100%

**Table 24: Question D8: Expected Age of Retirement**

[If not yet fully retired] At what age do you expect to retire completely and not work for pay at all?	Percent of respondents
60 to 64	6%
65 to 69	40%
70 to 74	29%
75 or older	24%
Total	100%

**Table 25: Question D9: Household Income**

How much do you anticipate your household's total income before taxes will be for the current year? (Please include in your total income money from all sources for all persons living in your household.)	Percent of respondents
Less than \$15,000	3%
\$15,000 to \$24,999	6%
\$25,000 to \$49,999	8%
\$50,000 to \$74,999	12%
\$75,000 to \$99,999	14%
\$100,000 or more	59%
Total	100%

**Table 26: Question D10: Respondent Ethnicity/Origin**

Are you Spanish, Hispanic or Latino?	Percent of respondents
Yes	2%
No	98%
Total	100%

**Table 27: Question D11: Respondent Race**

What is your race?	Percent of respondents
American Indian or Alaskan Native	1%
Asian, Asian Indian or Pacific Islander	22%
Black or African American	0%
White	77%
Other	2%

*Total may exceed 100% as respondents could select more than one option.*

**Table 28: Question D12: Respondent Age**

In which category is your age?	Percent of respondents
--------------------------------	------------------------

In which category is your age?	Percent of respondents
60-64 years	25%
65-69 years	22%
70-74 years	17%
75-79 years	16%
80-84 years	10%
85-89 years	6%
90-94 years	4%
95 years or older	1%
Total	100%

**Table 29: Question D13: Respondent Gender**

What is your sex?	Percent of respondents
Female	53%
Male	47%
Total	100%

**Table 30: Question D14: Respondent Sexual Orientation**

What is your sexual orientation?	Percent of respondents
Heterosexual	99%
Lesbian	0%
Gay	0%
Bisexual	0%
Total	100%

## Frequencies Including “Don’t Know”

**Table 31: Question 1: Quality of Community**

Please circle the number that comes closest to your opinion for each of the following questions.	Excellent		Good		Fair		Poor		Don't know		Total	
How do you rate Saratoga as a place to live?	67%	361	30%	163	2%	12	0%	0	0%	1	100%	538
How do you rate Saratoga as a place to retire?	33%	175	41%	218	16%	86	6%	32	3%	15	100%	525

**Table 32: Question 2: Community Characteristics**

Please rate each of the following characteristics as they relate to Saratoga adults age 60 or over:	Excellent		Good		Fair		Poor		Don't know		Total	
Opportunities to volunteer	20%	102	36%	180	16%	82	2%	11	25%	127	100%	502
Employment opportunities	4%	18	8%	37	19%	94	21%	105	48%	238	100%	491
Opportunities to enroll in skill-building or personal enrichment classes	17%	86	35%	172	22%	108	5%	27	21%	102	100%	496
Recreation opportunities (including games, arts, and library services, etc.)	25%	125	44%	220	17%	85	4%	20	10%	49	100%	500
Fitness opportunities (including exercise classes and paths or trails, etc.)	25%	123	42%	210	18%	87	5%	24	11%	54	100%	499
Opportunities to attend social events or activities	15%	76	38%	190	23%	117	6%	32	17%	86	100%	500
Opportunities to attend religious or spiritual activities	28%	140	37%	187	11%	56	1%	5	23%	116	100%	504
Opportunities to attend or participate in meetings about local government or community matters	19%	95	40%	200	18%	90	7%	34	16%	81	100%	500
Availability of affordable quality housing	1%	6	7%	34	15%	78	62%	315	14%	71	100%	505
Variety of housing options	3%	14	9%	44	27%	135	43%	217	18%	90	100%	500
Availability of long-term care options	7%	32	18%	89	23%	113	16%	79	37%	185	100%	499
Availability of daytime care options for adults aged 60 and older	5%	24	15%	77	19%	95	12%	62	49%	248	100%	506
Availability of information about resources for adults aged 60 and older	5%	27	22%	112	24%	118	16%	80	33%	162	100%	498
Availability of financial or legal planning services	5%	23	19%	95	17%	83	12%	59	48%	240	100%	499
Availability of affordable quality physical health care	10%	50	22%	110	19%	97	15%	77	33%	165	100%	499
Availability of affordable quality mental health care	3%	16	11%	57	14%	69	16%	81	55%	273	100%	496
Availability of preventive health services (e.g., health screenings, flu shots, educational workshops)	12%	58	26%	126	19%	94	13%	64	31%	152	100%	494

Please rate each of the following characteristics as they relate to Saratoga adults age 60 or over:	Excellent		Good		Fair		Poor		Don't know		Total	
Availability of affordable quality food	20%	97	36%	179	26%	128	8%	40	10%	49	100%	493
Sense of community	15%	76	39%	195	28%	138	11%	53	6%	32	100%	494
Openness and acceptance of the community towards residents aged 60 and older of diverse backgrounds	16%	80	35%	174	21%	102	9%	42	19%	97	100%	496
Ease of travel by public transportation in Saratoga	3%	13	7%	33	17%	83	53%	266	21%	103	100%	499
Ease of travel by car in Saratoga	28%	139	52%	258	15%	74	5%	24	1%	6	100%	501
Ease of walking in Saratoga	24%	122	44%	221	20%	99	10%	50	2%	13	100%	505
Ease of getting to the places you usually have to visit	26%	129	48%	243	21%	104	4%	20	1%	6	100%	502
Overall feeling of safety in Saratoga	38%	192	49%	249	10%	51	1%	6	1%	6	100%	504
Valuing residents aged 60 and older in Saratoga	15%	74	36%	180	21%	106	5%	24	23%	112	100%	496
Neighborliness of Saratoga	15%	77	38%	191	31%	156	12%	59	4%	20	100%	504
Cost of living in Saratoga	2%	7	12%	58	35%	174	47%	232	4%	21	100%	492
Availability of services, social events, or activities for residents of diverse backgrounds	7%	36	24%	120	25%	125	8%	40	36%	180	100%	501
Opportunities for older adults of diverse backgrounds to participate in meetings about local government or community matters	11%	56	24%	119	21%	107	8%	42	36%	178	100%	501

**Table 33: Question 3: Overall Service to Older Adults**

How would you rate the overall services provided to adults aged 60 and older in Saratoga?	Percent of respondents	Count
Excellent	5%	27
Good	33%	166
Fair	25%	124
Poor	7%	34
Don't know	30%	149
Total	100%	500

**Table 34: Question 4: Level of Informedness about Services and Activities for Older Adults**

In general, how informed or uninformed do you feel about services and activities available to adults aged 60 and older in your community?	Percent of respondents	Count
Very informed	8%	39
Somewhat informed	40%	200
Somewhat uninformed	31%	156
Very uninformed	21%	108
Total	100%	503

**Table 35: Question 5: Quality of Life and Health**

Please circle the number that comes closest to your opinion for each of the following questions.	Excellent		Good		Fair		Poor		Don't know		Total	
How do you rate your overall physical health?	32%	161	54%	272	11%	57	3%	13	0%	0	100%	503
How do you rate your overall mental health/emotional well-being?	48%	240	46%	228	6%	28	1%	4	0%	0	100%	500
How do you rate your overall quality of life?	46%	229	47%	235	7%	34	1%	3	0%	0	100%	501

**Table 36: Question 6: Problems Faced by Older Adults**

The following questions list a number of problems that older adults may or may not face. Thinking back over the last 12 months, how much of a problem, if at all, has each of the following been for you?	Not a problem		Minor problem		Moderate problem		Major problem		Don't know		Total	
Having housing to suit your needs	86%	425	7%	37	3%	15	3%	13	1%	5	100%	495
Your physical health	54%	265	30%	147	13%	63	4%	18	0%	0	100%	493
Performing regular activities, including walking, eating and preparing meals	81%	404	13%	65	3%	15	2%	12	0%	0	100%	496
Having enough food to eat	97%	482	1%	6	2%	9	0%	0	0%	0	100%	497
Doing heavy or intense housework	50%	249	27%	134	14%	68	7%	35	2%	8	100%	494
Having safe and affordable transportation available	67%	329	10%	47	10%	49	5%	25	9%	43	100%	494
No longer being able to drive	82%	393	2%	11	4%	17	4%	18	9%	42	100%	482
Feeling depressed	75%	371	18%	89	4%	22	1%	6	2%	9	100%	497
Experiencing confusion or forgetfulness	76%	376	18%	89	3%	16	1%	7	1%	6	100%	494
Maintaining your home	65%	321	23%	114	9%	47	2%	12	0%	2	100%	495
Maintaining your yard	56%	275	24%	118	13%	62	5%	23	3%	13	100%	491
Finding productive or meaningful activities to do	72%	353	18%	90	8%	37	1%	7	1%	3	100%	491



The following questions list a number of problems that older adults may or may not face. Thinking back over the last 12 months, how much of a problem, if at all, has each of the following been for you?	Not a problem		Minor problem		Moderate problem		Major problem		Don't know		Total	
Having friends or family you can rely on	76%	379	17%	83	5%	24	2%	12	0%	1	100%	498
Falling or injuring yourself in your home	78%	380	14%	67	6%	28	2%	8	2%	8	100%	491
Finding affordable health insurance	73%	357	12%	61	11%	52	3%	17	1%	4	100%	491
Getting the health care you need	82%	407	11%	56	5%	25	1%	6	1%	4	100%	498
Affording the medications you need	83%	409	12%	58	4%	18	1%	7	0%	1	100%	494
Figuring out which medications to take and when	93%	458	5%	22	1%	5	1%	5	1%	3	100%	493
Getting the oral health care you need	88%	433	6%	28	4%	20	1%	7	1%	3	100%	492
Getting the vision care you need	88%	432	8%	37	3%	16	1%	7	0%	1	100%	493
Having enough money to meet daily expenses	87%	430	8%	39	4%	21	1%	6	0%	0	100%	496
Having enough money to pay your property taxes	85%	416	7%	33	5%	27	1%	5	2%	10	100%	491
Staying physically fit	57%	279	27%	132	13%	65	3%	14	0%	1	100%	490
Maintaining a healthy diet	75%	366	19%	91	5%	26	1%	4	0%	1	100%	488
Having interesting recreational or cultural activities to attend	62%	296	22%	107	9%	44	2%	9	5%	25	100%	480
Having interesting social events or activities to attend	62%	297	20%	97	11%	53	2%	8	5%	26	100%	481
Feeling bored	67%	328	23%	112	6%	32	2%	12	1%	6	100%	490
Feeling like your voice is heard in the community	33%	156	18%	84	13%	62	7%	32	30%	145	100%	479
Finding meaningful volunteer work	53%	256	11%	53	8%	38	3%	15	25%	118	100%	480
Feeling physically burdened by providing care for another person	75%	361	10%	49	6%	29	4%	18	5%	27	100%	484
Feeling emotionally burdened by providing care for another person	69%	335	14%	69	8%	39	3%	16	5%	26	100%	485
Feeling financially burdened by providing care for another person	79%	381	8%	39	3%	15	4%	20	6%	29	100%	484
Dealing with legal issues	74%	362	14%	68	4%	22	2%	10	5%	25	100%	487
Having adequate information or dealing with public programs such as Social Security, Medicare and Medicaid	66%	324	19%	91	8%	41	3%	17	3%	17	100%	489
Finding work in retirement	52%	248	9%	45	6%	30	4%	20	29%	138	100%	480
Building skills for paid or unpaid work	55%	261	8%	38	5%	23	1%	6	30%	143	100%	471
Not knowing what services are available to adults aged 60 and older in your community	31%	151	22%	108	20%	96	8%	40	18%	88	100%	482
Feeling lonely or isolated	76%	367	16%	77	4%	21	2%	8	2%	8	100%	481
Dealing with the loss of a close family member or friend	67%	327	15%	70	9%	43	6%	27	4%	18	100%	485
Being a victim of crime	81%	391	8%	41	2%	11	2%	9	7%	33	100%	485
Being a victim of fraud or a scam	81%	392	8%	38	4%	17	2%	9	6%	30	100%	487

The following questions list a number of problems that older adults may or may not face. Thinking back over the last 12 months, how much of a problem, if at all, has each of the following been for you?	Not a problem		Minor problem		Moderate problem		Major problem		Don't know		Total	
Being physically or emotionally abused	91%	440	3%	14	1%	5	0%	2	5%	23	100%	485
Dealing with financial planning issues	72%	348	17%	84	6%	28	2%	8	3%	14	100%	483
Being treated unfairly or discriminated against because of your age	79%	384	9%	42	4%	18	2%	11	6%	30	100%	484

**Table 37: Question 7: Days Spent in Facilities**

Thinking back over the past 12 months, how many days did you spend in...	No days (zero)		One to two days		Three to five days		Six or more days		Total	
As a patient in a hospital?	82%	398	8%	41	4%	20	5%	25	100%	484
In a long-term care facility (including nursing home or in-patient rehabilitation)?	96%	409	0%	0	0%	2	4%	15	100%	426

**Table 38: Question 8: Falls in Last 12 Months**

Thinking back over the past 12 months, how many times have you fallen and injured yourself? Was it...	Percent of respondents	Count
Never	73%	361
Once or twice	24%	120
3-5 times	2%	10
More than 5 times	0%	2
Don't know	0%	0
Total	100%	493

**Table 39: Question 9: Recommend Living in Community**

How likely or unlikely are you to recommend living in Saratoga to adults aged 60 and older?	Percent of respondents	Count
Very likely	29%	129
Somewhat likely	30%	135
Somewhat unlikely	18%	80
Very unlikely	15%	66
Don't know	9%	40
Total	100%	450

**Table 40: Question 10: Likelihood of Remaining in Community Throughout Retirement**

How likely or unlikely are you to remain in Saratoga throughout your retirement?	Percent of respondents	Count
Very likely	57%	254
Somewhat likely	23%	102
Somewhat unlikely	9%	42
Very unlikely	7%	32
Don't know	5%	21
Total	100%	450

**Table 41: Question 11: Participation in Activities**

In the last 12 month, about how many times, if ever, have you participated in or done each of the following?	2 times a week or more		2-4 times a month		Once a month or less		Not at all		Total	
Used the Adult & Senior Center of Saratoga	2%	10	3%	13	8%	42	87%	429	100%	494
Used a recreation center in Saratoga	3%	15	4%	21	9%	43	84%	407	100%	486
Used a public library in Saratoga	10%	51	23%	113	35%	172	32%	155	100%	492
Used bus, rail, subway or other public transportation instead of driving	1%	5	1%	5	5%	26	93%	454	100%	491
Visited a neighborhood park	13%	62	18%	89	42%	209	27%	135	100%	494

**Table 42: Question 12: Attendance of Public Meetings**

Thinking about local public meetings (of local elected officials like City Council or County Commissioners, advisory boards, town halls, HOA, neighborhood watch, etc.), in the last 12 months, about how many times, if at all, have you or other household members attended or watched a local public meeting?	2 times a week or more		2-4 times a month		Once a month or less		Not at all		Total	
Attended a local public meeting	1%	4	1%	6	27%	132	71%	348	100%	489
Watched (online or on television) a local public meeting	1%	4	2%	10	17%	85	80%	385	100%	484

**Table 43: Question 13: Hours Spent Doing Activities**

During a typical week, how many hours, if any, do you spend doing the following?	Never (no hours)		1 to 3 hours		4 to 5 hours		6 to 10 hours		11 or more hours		Total	
Participating in a club (including book, dance, game and other social)	51%	232	23%	104	12%	54	9%	42	6%	26	100%	457
Participating in a civic group (including Elks, Kiwanis, Masons, etc.)	86%	385	9%	42	2%	7	1%	5	2%	11	100%	450
Communicating/visiting with friends and/or family	3%	16	26%	125	23%	113	20%	99	27%	132	100%	485
Participating in religious or spiritual activities with others	53%	246	30%	139	9%	44	4%	21	3%	16	100%	465
Participating in a recreation program or group activity	42%	199	25%	117	16%	76	9%	43	7%	34	100%	469
Providing help to friends or relatives	16%	74	45%	215	20%	94	10%	45	10%	47	100%	475
Volunteering your time to some group/activity in Saratoga	68%	313	19%	90	7%	30	4%	16	3%	14	100%	462

**Table 44: Question 14: Hours Spent Providing Care**

During a typical week, how many hours do you spend providing care for one or more individuals with whom you have a significant relationship (such as spouse, other relative, partner, friend, neighbor or child), whether or not they live with you?	Never (no hours)		1 to 3 hours		4 to 5 hours		6 to 10 hours		11 to 20 hours		20 or more hours		Total	
One or more individuals age 55 or older	57%	271	17%	81	9%	45	7%	34	1%	6	9%	41	100%	477
One or more individuals age 18 to 54	77%	350	11%	49	4%	19	2%	11	2%	9	4%	16	100%	454
One or more individuals under age 18	79%	368	7%	34	4%	20	3%	13	2%	10	4%	20	100%	464

**Table 45: Question 15: Regularity Doing Activities**

How often, if at all, do you do each of the following, considering all of the times you could?	Never		Rarely		Sometimes		Usually		Always		Total	
Eat at least 5 portions of fruits and vegetables a day	4%	19	9%	44	24%	121	43%	216	20%	97	100%	497
Participate in moderate or vigorous physical activity	5%	27	11%	54	19%	96	36%	177	28%	140	100%	494
Receive assistance from someone almost every day	80%	395	11%	53	2%	8	5%	23	3%	16	100%	495
Vote in local elections	5%	27	3%	13	3%	17	12%	61	76%	380	100%	497

**Table 46: Question I6: Agreement with Dementia Related Services**

Please indicate your level of agreement or disagreement with the following statements:	Strongly agree	Somewhat agree	Neither agree nor disagree	Somewhat disagree	Strongly disagree	Don't know	Total
Raising community awareness of the resources that provide help to people with dementia and their families should be a priority for action in Saratoga	45%	24%	12%	7%	7%	6%	100%
Our community currently has adequate dementia-related resources tailored to our diverse and undeserved population	3%	7%	16%	5%	2%	68%	100%
Saratoga currently provides its citizens with education and training opportunities on recognizing the warning signs of dementia	3%	9%	14%	5%	3%	66%	100%

**Table 47: Question D1: Length of Residency**

How many years have you lived in Saratoga?	Percent of respondents	Count
Less than 1 year	1%	3
1-5 years	5%	24
6-10 years	3%	16
11-20 years	13%	63
More than 20 years	79%	394
Total	100%	499

**Table 48: Question D2: Housing Unit Type**

Which best describes the building you live in?	Percent of respondents	Count
Single family home	87%	435
Townhouse, condominium, duplex or apartment	10%	49
Mobile home	0%	1
Assisted living residence	2%	8
Nursing home	0%	0
Other	2%	8
Total	100%	500

**Table 49: Question D3: Tenure (Rent or Own)**

Do you currently rent or own your home?	Percent of respondents	Count
Rent	6%	31
Own (with a mortgage payment)	42%	207
Own (free and clear; no mortgage)	52%	256
Total	100%	494

**Table 50: Question D4: Monthly Housing Costs**

About how much is your monthly housing cost for the place you live (including rent, mortgage payment, property tax, property insurance and homeowners' association (HOA) fees)?	Percent of respondents	Count
Less than \$300 per month	7%	31
\$300 to \$599 per month	13%	61
\$600 to \$999 per month	8%	39
\$1,000 to \$1,499 per month	14%	68
\$1,500 to \$2,499 per month	21%	100
\$2,500 or more per month	37%	173
Total	100%	473

**Table 51: Question D5: Total Number of Household Members**

How many people, including yourself, live in your household?	Percent of respondents	Count
1 person (live alone)	21%	106
2 people	60%	298
3 people	11%	56
4 or more people	7%	35
Don't know	0%	0
Total	100%	496

**Table 52: Question D6: Number of Older Adult Household Members**

How many of these people, including yourself, are 55 or older?	Percent of respondents	Count
1 person	34%	163
2 people	64%	310
3 people	2%	7
4 or more people	0%	2
Don't know	0%	0
Total	100%	483

**Table 53: Question D7: Retirement Status**

What is your employment status?	Percent of respondents	Count
Fully retired	69%	337
Working full time for pay	14%	68
Working part time for pay	15%	73
Unemployed, looking for paid work	2%	11
Total	100%	489

**Table 54: Question D8: Expected Age of Retirement**

[If not yet fully retired] At what age do you expect to retire completely and not work for pay at all?	Percent of respondents	Count
60 to 64	6%	9
65 to 69	40%	55
70 to 74	29%	39
75 or older	24%	33
Total	100%	136

**Table 55: Question D9: Household Income**

How much do you anticipate your household's total income before taxes will be for the current year? (Please include in your total income money from all sources for all persons living in your household.)	Percent of respondents	Count
Less than \$15,000	3%	13
\$15,000 to \$24,999	6%	26
\$25,000 to \$49,999	8%	34
\$50,000 to \$74,999	12%	53
\$75,000 to \$99,999	14%	64
\$100,000 or more	59%	268
Total	100%	458

**Table 56: Question D10: Respondent Ethnicity/Origin**

Are you Spanish, Hispanic or Latino?	Percent of respondents	Count
Yes	2%	11
No	98%	477
Total	100%	489

**Table 57: Question D11: Respondent Race**

What is your race?	Percent of respondents	Count
American Indian or Alaskan Native	1%	3
Asian, Asian Indian or Pacific Islander	22%	107
Black or African American	0%	0
White	77%	378
Other	2%	9

*Total may exceed 100% as respondents could select more than one option.*



**Table 58: Question D12: Respondent Age**

In which category is your age?	Percent of respondents	Count
60-64 years	25%	125
65-69 years	22%	108
70-74 years	17%	83
75-79 years	16%	77
80-84 years	10%	51
85-89 years	6%	30
90-94 years	4%	19
95 years or older	1%	3
Total	100%	495

**Table 59: Question D13: Respondent Gender**

What is your sex?	Percent of respondents	Count
Female	53%	262
Male	47%	236
Total	100%	498

**Table 60: Question D14: Respondent Sexual Orientation**

What is your sexual orientation?	Percent of respondents	Count
Heterosexual	99%	456
Lesbian	0%	1
Gay	0%	2
Bisexual	0%	2
Total	100%	461

## Appendix B: Survey Methodology

### Data Collection Methods Used in the CASOA

The CASOA™ survey instrument and its administration are standardized to assure high quality survey methods and comparable results across CASOA™ communities. The CASOA™ was customized for Saratoga to reflect the correct local age definition of older adults and so that the mailing materials used official Saratoga graphics, contact information and signatures. The City of Saratoga sponsored and funded this research.

### Survey Development

The CASOA™ questionnaire contains many questions related to the life of older residents in the community. The instrument includes questions related to overall quality of life, characteristics of the community, perceptions of safety in the community and of 40 different needs common to older adults.

The questionnaire grew from a synthesis of a number of data collection processes including a national search of needs assessments conducted by communities across the United States, a review of the literature on aging and the conduct of numerous surveys and large scale needs assessments by NRC. A blue-ribbon panel of national experts contributed to the concept and content of CASOA™.

The items in the questionnaire were pilot tested on senior residents using a “think-aloud” method in which older adults were asked to complete the survey and describe their thought processes related to specific questions and question sets. The results of the pilot test were used to alter the questionnaire for better understanding by senior participants. The final questionnaire was tested in a set of diverse U.S. communities and modifications again were made as necessary.

### Survey Sampling

“Sampling” refers to the method by which survey recipients are chosen. The “sample” refers to all those who were given a chance to participate in the survey. A list of households with a high likelihood of having a resident age 60 years or older within the City was purchased. Although the purchased list of known senior households contained names of the residents 60 years and older, no name was printed on the survey envelope; instead, the survey was addressed to “Resident.” The list of households was purchased from Group 3 List Marketing.

A larger list than needed was sampled so that a process referred to as “geocoding” could be used to eliminate addresses from the list that were outside the study boundaries. Geocoding is a computerized process in which addresses are compared to electronically mapped boundaries and coded as inside or outside desired boundaries. All addresses determined to be outside the study boundaries were eliminated from the sample. A systematic sampling method was used with the remaining addresses to create a mailing list of 1,725 Saratoga older adult households. Systematic sampling is a procedure whereby a complete list of all possible households is culled, selecting every Nth one, giving each eligible household a known probability of selection, until the appropriate number of households is selected.

In order to select a random individual 60 years of age and older within the household, the cover letter requested that the questionnaire be given to the person 60 years of age and older who most

recently celebrated their birthday (regardless of year of birth) to complete. This “birthday method” is a respondent selection method which helps to randomly select an individual within a household and is similar to other more complex methodologies (e.g., “Kisch” or “Trodahl”), but easier to implement.

## Survey Administration and Response

Each sampled household received three mailings beginning on July 6, 2016. Completed surveys were collected over the following six weeks. The first mailing was a prenotification postcard announcing the upcoming survey. A week after the prenotification postcard mailed the first wave of the survey was sent. The second wave was mailed one week after the first. The survey mailings contained a letter from Mayor Cappello inviting the household to participate in the CASOA, a questionnaire and postage-paid envelope in which to return the questionnaire. Respondent could also complete the survey online via a survey link provided in the survey packets.

A total of 8 out 1,725 postcards were returned as undeliverable because they either had addresses that were undeliverable as addressed or were received by vacant housing units. Of the 1,717 households receiving the survey mailings, 553 completed the survey (126 of these were completed online), providing a response rate of 32%.

**Table 61: Survey Response Rates**

	Number mailed	Undeliverable postcards	Delivered surveys	Returned surveys	Response rate
Overall	1,725	8	1,717	553	32%

## Confidence Intervals

The 95% confidence interval (or “margin of error”) quantifies the “sampling error” or precision of the estimates made from the survey results. A 95% confidence interval can be calculated for any sample size, and indicates that in 95 of 100 surveys conducted like this one, for a particular item, a result would be found that is within plus or minus four percentage points of the result that would be found if everyone in the population of interest was surveyed. The practical difficulties of conducting any resident survey may introduce other sources of error in addition to sampling error. Despite best efforts to boost participation and ensure potential inclusion of all households, some selected households will decline participation in the survey (potentially introducing non-response error) and some eligible households may be unintentionally excluded from the listed sources for the sample (referred to as coverage error).

While the 95 percent confidence interval for the survey is generally no greater than plus or minus four percentage points around any given percent reported for all respondents and plus or minus 2.5 points on the 100-point scale, results for subgroups will have wider confidence intervals. Where estimates are given for subgroups, they are less precise. For each subgroup from the survey, the margin of error rises to as much as plus or minus 10% or six points (on the 100-point scale) for a sample size of 100.

## Survey Processing (Data Entry)

Completed surveys received were assigned a unique identification number. Additionally, each survey was reviewed and “cleaned” as necessary. For example, a question may have asked a respondent to pick one response, but the respondent checked two; the cleaning process would involve randomly selecting one of the two selected responses to be recorded in the dataset.

Once all surveys were assigned a unique identification number, they were entered into an electronic dataset. This dataset was subject to a data entry protocol of “key and verify,” in which survey data were entered twice into an electronic dataset and then compared. Discrepancies were evaluated against the original survey form and corrected. “Range checks” (examination of the data for invalid values) as well as other forms of quality control were also performed.

## Survey Data Weighting

The primary objective of weighting survey data is to make the survey sample reflective of the larger population of the City. This is done by: 1) reviewing the sample demographics and comparing them to the population norms from the most recent Census or other sources and 2) comparing the responses to different questions for demographic subgroups. The demographic characteristics that are least similar to the Census and yield the most different results are the best candidates for data weighting. Several different weighting “schemes” are tested to ensure the best fit for the data. The data were weighted by age and gender. The results of the weighting scheme are presented in the following table.

**Table 62: Weighting Scheme for the 2016 City of Saratoga CASOA**

	2010 Census <sup>1</sup>	Unweighted	Weighted
White	75%	78%	77%
Not white	25%	22%	23%
Not Hispanic	97%	98%	98%
Hispanic	3%	2%	2%
Female	53%	52%	53%
Male	47%	48%	47%
Age 60 to 64	25%	20%	25%
Age 65 to 74	39%	34%	38%
Age 75 and over	37%	46%	36%
Female 60 to 64	12%	11%	12%
Female 65 to 74	20%	18%	20%
Female 75 and over	20%	24%	20%
Male 60 to 64	13%	10%	13%
Male 65 to 74	18%	16%	18%
Male 75 and over	16%	23%	16%

<sup>1</sup>Source: U.S. Census Bureau - Census 2010

<sup>1</sup>Source: U.S. Census Bureau - Census 2010, householder age 60 and over

## Survey Data Analysis and Reporting

The survey dataset was analyzed using the Statistical Package for the Social Sciences (SPSS). For the most part, frequency distributions and mean ratings are presented in the body of the report. A complete set of frequencies for each survey question is presented in *Appendix B: Complete Set of Survey Frequencies*.

A variety of analyses were presented in the body of the report. The following sections summarize how these analyses were conducted or scores calculated.

### Estimates of the Contribution of Older Adults to the Economy

The calculations of the economic contributions of older adults in Saratoga were rough estimates using data from the U.S. Department of Labor Bureau of Labor Statistics (Metropolitan and Nonmetropolitan Area Occupational Employment and Wage Estimates).

**Table 63: Contribution of Older Adults to the Economy**

	Percent of older adults	Number of older adults <sup>1</sup>	Average number of hours*	Average hourly rate**	Annual total
Providing care to older adult(s)	43%	3,411	9.5	\$11.99	\$17,378,010
Providing care to adult(s)	23%	1,810	8.5	\$11.99	\$7,910,398
Providing care to child(ren)	21%	1,626	10.5	\$14.10	\$10,505,213
Providing help to family and friends	84%	6,655	4.6	\$11.78	\$16,230,473
Volunteering	32%	2,553	4.2	\$19.84	\$9,288,223
<b>Subtotal unpaid</b>					<b>\$61,312,317</b>
Working part time	15%	1,170	15.0	\$37.80	\$30,540,110
Working full time	14%	1,101	32.0	\$37.80	\$61,312,142
<b>Subtotal paid</b>					<b>\$91,852,252</b>
<b>Total contribution</b>					<b>\$153,164,568</b>

<sup>1</sup>Based on U.S. Census Bureau - 2010 Census; about 7,881 adults age 60 and over in Saratoga

The proportion of older adults who work was estimated by examining the responses to question D7 from the survey (“What is your employment status?”). Those working full-time were assumed to work 32 hours per week and those working part-time were assumed to work 15 hours per week. The proportion of survey respondents was multiplied by the number of adults 60 and over in the community to ascertain the number of employed older adults. To determine the average paid wage, information from the Bureau of Labor Statistics for the San Jose-Sunnyvale-Santa Clara, CA was examined. Working full-time and part-time was assumed to be the equivalent of “All Occupations” (occupation code 00-0000).

The proportion of older adults doing volunteer work and providing help to friends and neighbors was determined by looking at the responses to question 12 (“During a typical week, how many hours, if any, do you spend doing the following?”), items f (“providing help to family and friends”) and g (“volunteering your time to some group/activity”). Those responding “1 to 3 hours” were assumed to spend two hours, “4 to 5 hours” were assumed to spend 4.5 hours, those responding “6 to 10 hours” were assumed to spend eight hours, and those responding “11 or more hours” were assumed to spend 13.75 hours (125% of 11). To determine the average hourly wage, “providing help to family and friends” was assumed to be the equivalent of “Personal Care and Service

Workers, All Other” (occupation code 39-9099) and volunteering was assumed to be the equivalent of “Office Clerks, General” (occupation code 43-9061).

The proportion of older adults providing care to family and friends was determined by examining the responses to question 12. Those responding “1 to 3 hours” were assumed to spend two hours, “4 to 5 hours” were assumed to spend 4.5 hours, those responding “6 to 10 hours” were assumed to spend eight hours, and those responding “11 to 19 hours” were assumed to spend 15 hours and those responding “20 or more hours” were assumed to spend 25 hours (125% of 20). To determine the average hourly wage, “providing care for older adults and adults” (items a and b) were assumed to be the equivalent of “Personal and Home Care Aides” (occupation code 39-9021) and “providing care for children” (item c) was assumed to be the equivalent of “Child Care Workers” (occupation code 39-9011).

### Community Summary Scores

The community score presented in the body of the report represents the average of the questions included in the index. Although the evaluative or frequency questions were made on 4- or 5- point scales with 1 representing the best rating, the scales had different labels (e.g., “excellent,” “not a problem,” “very likely”). To calculate these average scores, the questions used in the index were converted to a common scale where 0 is the worst possible rating and 100 is the best possible rating. If everyone reported “excellent,” then the result would be 100 on the 0-100 scale. If the average rating for quality of life was right in the middle of the scale (half way between “good” and “fair”), then the result would be 50. The new scale can be thought of like the thermometer used to represent total giving to United Way. The higher the thermometer reading, the closer to the goal of 100 – in this case, the most positive response possible. The table below shows the individual questions comprising each summary score.

Index	Individual Variables Used in Index
Quality of Community	q1a. How do you rate Saratoga as a place to live?
	q1b. How do you rate Saratoga as a place to retire?
	q3. How would you rate the overall services provided to older adults in Saratoga?
	q9. Recommend living in Saratoga to older adults
	q10. Remain in Saratoga throughout your retirement
Community and Belonging	q2s. Sense of community
	q2t. Openness and acceptance of the community towards older residents of diverse backgrounds
	q2z. Overall feeling of safety in Saratoga
	q2aa. Valuing older residents in Saratoga
	q2bb. Neighborliness of Saratoga
Community Information	q2m. Availability of information about resources for older adults
	q2n. Availability of financial and legal planning services
	q4. In general, how informed or uninformed do you feel about services and activities available to older adults in Saratoga?
Opportunities for Productive Activities	q2a. Opportunities to volunteer
	q2b. Employment opportunities
	q2c. Opportunities to enroll in skill-building or personal enrichment classes
	q2d. Recreation opportunities (including games, arts and library services, etc.)
	q2f. Opportunities to attend social events or activities
	q2g. Opportunities to attend religious or spiritual activities
	q2h. Opportunities to attend or participate in meetings about local government or

Index	Individual Variables Used in Index
	community matters
Health and Wellness Opportunities	q2e. Fitness opportunities (including exercise classes and paths or trails, etc.)
	q2k. Availability of long-term care options
	q2l. Availability of daytime care options for older adults
	q2o. Availability of affordable quality physical health care
	q2p. Availability of affordable quality mental health care
	q2q. Availability of preventive health services (e.g., health screenings, flu shots, educational workshops)
Community Design and Land Use	q2i. Availability of affordable quality housing
	q2j. Variety of housing options
	q2r. Availability of affordable quality food
	q2u. Ease of travel by public transportation in City of Saratoga
	q2v. Ease of car travel in Saratoga
	q2w. Ease of walking in Saratoga
	q2x. Ease of getting to the places you usually have to visit
	q2bb. Cost of living in Saratoga

### Needs Summary Scores

The needs summary scores (indices) are based on the response patterns of older adults in the community. The table below contains each question included in the index and the required response to that question. So, for example, if a respondent indicated that her overall physical health (q5a) was “fair,” she would be counted as having a physical health issue along with other respondents who may have noted that they had a moderate or major problem with falling or maintaining a healthy diet, etc. Respondents with many physical health problems are counted only once in this category so that the total percent shown in the report graph represents the percent of older adults with at least one physical problem.

Index	Individual Variables Used in Index	Required Rating
Safety	Must have at least one of the following:	
	q6(b)r. Being a victim of crime	Moderate or major problem
	q6(b)s. Being a victim of fraud or a scam	Moderate or major problem
	q6(b)t. Being physically or emotionally abused	Moderate or major problem
	q6(b)v. Being treated unfairly or discriminated against because of your age	Moderate or major problem
Civic engagement	Must q15d	
	q15d. Vote in local elections	Never or rarely
	Or q13b and q13g	
	q13b. Participating in a civic group (including Elks, Kiwanis, Masons, etc.)	Never (no hours)
	q13g. Volunteering your time to some group/activity in Saratoga	Never (no hours)
	Or q12a and q12b	
	q12a. Attended local public meeting	Not at all
	q12b. Watched (online or on television) a local public meeting	Not at all
Social engagement	Must have:	



Index	Individual Variables Used in Index	Required Rating
	q6(b)d. Having interesting social events or activities to attend'	Moderate or major problem
	Or all of the following:	
	q11a. Used a senior center in Saratoga	Not at all
	q13a. Participating in a club (including book, dance, game and other social)	Never (no hours)
	q13d. Participating in religious or spiritual activities with others	Never (no hours)
Recreation	Must have q6(b)c:	
	q6(b)c. Having interesting recreational or cultural activities to attend	Moderate or major problem
	Or all of the following:	
	q11b. Used a recreation center in Saratoga	Not at all
	q11c. Used a public library in Saratoga	Not at all
	q11e. Visited a neighborhood park	Not at all
Caregiver burden	q13e. Participating in a recreation program or group activity	Never (no hours)
	Must have:	
	q6(b)h. Feeling physically burdened by providing care for another person	Moderate or major problem
	q6(b)i. Feeling emotionally burdened by providing care for another person	Moderate or major problem
Financial and legal	q6(b)j. Feeling financially burdened by providing care for another person	Moderate or major problem
	Must have at least one of the following:	
	d9. How much do you anticipate your household's total income before taxes will be for the current year? (Please include in your total income money from all sources for all persons living in your household.)/ d5. How many people, including yourself, live in your household?	Income was at or below the income limits set by HUD for Section 8 programs
	q6(a)u. Having enough money to meet daily expenses	Moderate or major problem
	q6(a)v. Having enough money to pay your property taxes	Moderate or major problem
	q6(b)k. Dealing with legal issues	Moderate or major problem
	q6(b)m. Finding work in retirement	Moderate or major problem
	q6(b)n. Building skills for paid or unpaid work	Moderate or major problem
	q6(b)u. Dealing with financial planning issues	Moderate or major problem
Meaningful activities	Must have at least one of the following:	
	q6(a)l. Finding productive or meaningful activities to do	Moderate or major problem
	q6(b)f. Feeling like your voice is heard in the community	Moderate or major problem
	q6(b)g. Finding meaningful volunteer work	Moderate or major problem
Physical health	q6(b)o. Not knowing what services are available to older adults in your community	Moderate or major problem
	Must have at least one of the following:	
	q5a. How do you rate your overall physical health?	Fair or poor
	q6(a)b. Your physical health	Moderate or major problem
	q6(a)e. Doing heavy or intense housework	Moderate or major problem



Index	Individual Variables Used in Index	Required Rating
	q6(a)j. Maintaining your home	Moderate or major problem
	q6(a)k. Maintaining your yard	Moderate or major problem
	q6(a)w. Staying physically fit	Moderate or major problem
	q6(a)x. Maintaining a healthy diet	Moderate or major problem
	q15a. Eat at least 5 portions of fruits and vegetables a day	Never or rarely
	q15b. Participate in moderate or vigorous physical activity	Never or rarely
Mental health	Must have at least one of the following:	
	q5b. How do you rate your overall mental health/emotional wellbeing?	Fair or poor
	q6(a)h. Feeling depressed	Moderate or major problem
	q6(a)i. Experiencing confusion or forgetfulness	Moderate or major problem
	q6(a)m. Having friends or family you can rely on	Moderate or major problem
	q6(a)r. Figuring out which medications to take and when	Moderate or major problem
	q6(b)e. Feeling bored	Moderate or major problem
	q6(b)p. Feeling lonely or isolated	Moderate or major problem
	q6(b)q. Dealing with the loss of a close family member or friend	Moderate or major problem
Health care	Must have at least one of the following:	
	q6(a)o. Finding affordable health insurance	Moderate or major problem
	q6(a)p. Getting the health care you need	Moderate or major problem
	q6(a)q. Affording the medications you need	Moderate or major problem
	q6(a)s. Getting the oral health care you need	Moderate or major problem
	q6(a)t. Getting the vision care you need	Moderate or major problem
	q6(b)l. Having adequate information or dealing with public programs such as Social Security, Medicare and Medicaid	Moderate or major problem
Institutionalization risk	Must have at least one of the following:	
	q6(a)c. Performing regular activities, including walking, eating and preparing meals	Moderate or major problem
	q6(a)g. No longer being able to drive	Moderate or major problem
	q6(a)n. Falling or injuring yourself in your home	Moderate or major problem
	q7a. A hospital	Spent 3 or more days in past 12 months
	q7b. In a long-term care facility (including nursing home or in-patient rehabilitation)	Spent 3 or more days in past 12 months
	q8. Thinking back over the past 12 months, how many times have you fallen and injured yourself? Was it...	Fell 3 or more times in past 12 months
Basic necessities	q15c. Receive assistance from someone almost every day	Sometimes, usually or always
	Must have at least one of the following:	
	q5c. How do you rate your overall quality of life?	Fair or poor
	q6(a)a. Having housing to suit your needs	Moderate or major problem
	q6(a)d. Having enough food to eat	Moderate or major problem
	q6(a)f. Having safe and affordable transportation available	Moderate or major problem

## Appendix C: Benchmark Comparisons

NRC has developed a database that collates responses to CASOA and related surveys administered in other communities, which allows the results from the City of Saratoga to be compared against a set of national benchmarks. This benchmarking database includes responses from more than 35,000 older adults (age 55 and over) in 175+ communities across the nation. The demographics of NRC's database match the demographics in the nation, based on the U.S. Census 2010 estimates.

### Interpreting the Results

Ratings are compared when similar questions are included in NRC's database and there are at least five communities in which the question was asked. Where comparisons are available, three numbers are provided in the table. The first column is Saratoga's proportion of the population responding in a particular way (e.g., percent "likely" to recommend living in Saratoga). The second column is the rank assigned to this rating among communities where a similar question was asked. The third column is the number of communities that asked a similar question. The fourth column shows the comparison of Saratoga's rating (column one) to the benchmark.

Where comparisons for ratings were available, the City of Saratoga's results were generally noted as being "higher" than the benchmark, "lower" than the benchmark or "similar" to the benchmark. In instances where ratings are considerably higher or lower than the benchmark, these ratings have been further demarcated by the attribute of "much," (for example, "much higher" or "much lower"). These labels come from a statistical comparison of the City of Saratoga's rating to the benchmark where a rating is considered "similar" if it is within the margin of error; "higher" or "lower" if the difference between your community's rating and the benchmark is greater the margin of error; and "much higher" or "much lower" if the difference between your community's rating and the benchmark is more than twice the margin of error.

**Table 64: Saratoga as a Place for Older Residents Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Saratoga as an excellent or good place to live	98%	17	466	Much higher
Saratoga as an excellent or good place to retire	77%	155	464	Much higher
Excellent or good overall services provided to older adults in Saratoga	55%	67	104	Lower

**Table 65: Recommendation of Saratoga to Others Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Likely to recommend living in Saratoga to older adults	64%	372	387	Much lower

**Table 66: Remaining in Saratoga Throughout Retirement Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Likely to remain in Saratoga throughout retirement	83%	75	104	Similar

**Table 67: Older Adult Community and Belonging Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Excellent or good sense of community	59%	304	465	Much lower
Excellent or good openness and acceptance of the community towards older residents of diverse backgrounds	64%	193	446	Similar
Excellent or good overall feeling of safety in Saratoga	88%	75	250	Much higher
Excellent or good valuing of older residents in Saratoga	66%	19	98	Much higher
Excellent or good neighborliness in Saratoga	55%	174	247	Lower

**Table 68: Safety Problems Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Problems with being a victim of crime	14%	31	104	Similar
Problems with being a victim of fraud or a scam	14%	49	103	Similar
Problems with being physically or emotionally abused	5%	80	103	Similar
Problems with being treated unfairly or discriminated against because of age	16%	11	11	Much lower

**Table 69: Awareness of Older Adult Services and Activities Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Informed about services and activities available to older adults in Saratoga	48%	98	104	Much lower

**Table 70: Availability of Information About Older Adult Resource Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Excellent or good availability of information about resources for older adults	41%	70	104	Much lower
Excellent or good availability of financial and legal planning services	45%	43	98	Higher

**Table 71: Meaningful Activities Needs Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Problems with finding productive or meaningful activities to do	28%	75	103	Lower
Problems with feeling like your voice is heard in the community	53%	68	104	Similar
Problems with finding meaningful volunteer work	29%	40	104	Similar
Problems with not knowing what services are available to older adults in your community	62%	33	104	Higher

**Table 72: Civic Engagement Opportunities Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Excellent or good opportunities to volunteer	75%	229	378	Similar
Excellent or good opportunities to attend or participate in meetings about local government or community matters	70%	36	104	Much higher

**Table 73: Participation in Civic Activities Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Attended a local public meeting in Saratoga at least once in past 12 months*	29%	234	464	Lower
Watched (online or on television) a least once in past 12 months*	20%	356	389	Much lower
Participating in a civic group (including Elks, Kiwanis, Masons, etc.) for one hour or more per week	14%	26	104	Similar
Volunteering your time to some group/activity in Saratoga for one hour or more per week	32%	436	459	Much lower
Voted in the last local election	88%	160	462	Higher

**Table 74: Social Engagement Opportunities Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Excellent or good opportunities to attend social events or activities	64%	194	373	Similar
Excellent or good opportunities to attend religious or spiritual activities	84%	167	332	Similar

**Table 75: Participation in Social Activities Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Used a senior center in Saratoga at least once in past 12 months*	13%	97	104	Much lower
Participating in a club (including book, dance, game and other social) for one hour or more per week	49%	257	359	Much lower
Communicating/ visiting with friends and/or family for one hour or more per week	97%	34	252	Much higher
Participating in religious or spiritual activities with others for one hour or more per week	47%	317	329	Much lower
Providing help to friends or relatives for one hour or more per week	84%	61	246	Much higher

**Table 76: Social Engagement Problems Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Problems with having interesting social events or activities to attend	35%	86	104	Much lower

**Table 77: Recreational and Personal Enrichment Opportunities Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Excellent or good opportunities to enroll in skill-building or personal enrichment classes	66%	36	104	Much higher
Excellent or good recreation opportunities (including games, arts and library services, etc.)	76%	149	462	Much higher

**Table 78: Participation in Recreational and Personal Enrichment Activities Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Used a recreation center in Saratoga at least once in past 12 months	16%	404	406	Much lower
Used a public library in Saratoga at least once in past 12 months	68%	174	421	Similar
Visited a neighborhood park at least once in past 12 months	73%	294	460	Lower
Participating in a recreation program or group activity for one hour or more per week	58%	4	104	Much higher

**Table 79: Recreational Problems Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Problems with having interesting recreational or cultural activities to attend	35%	79	104	Much lower

**Table 80: Caregiver Burden in Saratoga Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Problems with feeling physically burdened by providing care for another person	21%	26	37	Similar
Problems with feeling emotionally burdened by providing care for another person	27%	16	37	Similar
Problems with feeling financially burdened by providing care for another person	16%	34	37	Much lower

**Table 81: Employment Opportunities Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Excellent or good employment opportunities	22%	300	449	Much lower

**Table 82: Financial and Legal Problems of Older Residents Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Problems with having enough money to meet daily expenses	13%	103	104	Much lower
Problems with having enough money to pay your property taxes	14%	101	104	Much lower
Problems with dealing with legal issues	22%	97	103	Much lower
Problems with finding work in retirement	28%	91	104	Much lower
Problems with building skills for paid or unpaid work	20%	101	104	Much lower
Problems with dealing with financial planning issues	26%	100	103	Much lower

**Table 83: Physical Health Opportunities Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Excellent or good fitness opportunities (including exercise classes and paths or trails, etc.)	75%	127	254	Similar
Excellent or good availability of affordable quality physical health care	48%	321	418	Much lower

**Table 84: Overall Physical Health of Older Residents Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Excellent or good overall physical health	86%	8	255	Much higher

**Table 85: Participation in Healthy Activities Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Always or usually eats at least 5 portions of fruits and vegetables a day	63%	3	160	Much higher
Always or usually participates in moderate or vigorous physical activity	64%	13	161	Much higher

**Table 86: Physical Health Problems of Older Residents Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Problems with your physical health	46%	102	104	Much lower
Problems with problems with doing heavy or intense housework	49%	84	103	Much lower
Problems with maintaining your home	35%	84	104	Lower
Problems with maintaining your yard	42%	57	104	Similar
Problems with staying physically fit	43%	101	104	Much lower
Problems with maintaining a healthy diet	25%	100	104	Much lower

**Table 87: Availability of Mental Healthcare Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Excellent or good availability of affordable quality mental health care	33%	192	236	Much lower

**Table 88: Emotional Wellbeing of Older Residents Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Excellent or good overall mental health/emotional well being	94%	6	104	Much higher

**Table 89: Mental Health Problems of Older Residents Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Problems with feeling depressed	24%	100	103	Much lower
Problems with experiencing confusion or forgetfulness	23%	100	103	Much lower
Problems with having friends or family you can rely on	24%	61	104	Similar
Problems with figuring out which medications to take and when	6%	32	38	Lower
Problems with feeling bored	32%	92	103	Much lower
Problems with feeling lonely or isolated	23%	97	103	Much lower
Problems with dealing with the loss of a close family member or friend	30%	87	104	Lower

**Table 90: Availability of Preventative Health Care Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Excellent or good availability of preventive health services (e.g., health screenings, flu shots, educational workshops)	54%	278	348	Much lower

**Table 91: Health Care Problems of Older Residents Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Problems with finding affordable health insurance	27%	96	104	Much lower
Problems with getting the health care you need	18%	100	104	Much lower
Problems with affording the medications you need	17%	102	103	Much lower
Problems with getting the oral health care you need	11%	97	97	Much lower
Problems with getting the vision care you need	12%	38	38	Much lower
Problems with having adequate information or dealing with public programs such as Social Security, Medicare and Medicaid	31%	99	104	Much lower

**Table 92: Care Options for Older Residents Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Excellent or good availability of long-term care options	39%	29	39	Much lower
Excellent or good availability of daytime care options for older adults	39%	11	38	Much higher



**Table 93: Falls, Hospitalizations and Institutionalizations of Older Residents Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Spent at least 1 day in a hospital in past 12 months	18%	88	102	Lower
Spent at least 1 day in a nursing home or in-patient rehabilitation facility	4%	31	102	Similar
Had at least 1 fall in the past 12 months	27%	83	102	Lower

**Table 94: Independent Living Problems of Older Residents Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Problems with performing regular activities, including walking, eating and preparing meals	19%	97	104	Much lower
Problems with no longer being able to drive	11%	83	104	Lower
Problems with falling or injuring yourself in your home	21%	65	103	Similar

**Table 95: Aspects of Design and Land Use Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Excellent or good availability of affordable quality housing	9%	450	456	Much lower
Excellent or good variety of housing options	14%	372	378	Much lower
Excellent or good ease of bus travel in Saratoga	Not available	Not available	Not available	Not available
Excellent or good ease of public transit travel in Saratoga	12%	165	170	Much lower
Excellent or good ease of car travel in Saratoga	80%	60	449	Much higher
Excellent or good ease of walking in Saratoga	70%	176	447	Much higher
Excellent or good ease of getting to the places you usually have to visit	75%	131	250	Similar
Excellent or good cost of living	14%	156	162	Much lower

**Table 96: Public Transportation Use by Older Residents Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Used bus, rail, subway or other public transportation instead of driving at least once	7%	200	227	Much lower

**Table 97: Basic Needs Problems of Older Residents Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Problems with having housing to suit your needs	13%	89	103	Lower
Problems with having enough food to eat	3%	97	103	Much lower
Problems with having safe and affordable transportation available	27%	42	104	Similar

**Table 98: Overall Quality of Life of Older Residents Benchmarks**

	Saratoga percent	Rank	Number of Jurisdictions for Comparison	Comparison to benchmark
Excellent or good overall quality of life	93%	6	104	Much higher

## Appendix D: References

1. McMillan DW. Sense of community. *Journal of Community Psychology*. 1996;24(1):315-325.
2. Rowe JW, Kahn RL. *Successful Aging*. New York: Pantheon Books; 1998.
3. Harper L. *Fixing to Stay: A National Survey of Housing and Home Modification Issues*: American Association for Retired Persons (AARP); May 2000.
4. Kochera A, Straight A, Guterbock T. *Beyond 50.05: A Report to the Nation on Livable Communities: Creating Environments for Successful Aging*. Washington, DC: AARP Public Policy Institute; May 2005.
5. Rahn WM, Randolph TJ. A Tale of Political Trust in American Cities. *Public Opinion Quarterly*. Winter 2005;69(4):530-560.
6. Tyler TR, Degoey P. Collective Restraint in Social Dilemmas: Procedural Justice and Social Identification Effects on Support for Authorities. *Journal of Personality and Social Psychology*. September 1995;69(3):482-497.
7. The American Democracy Project: Civic Engagement, Higher Education, and the 21st Century. 2003; <http://www.wku.edu/aa/civic%20engagement/adpcompleteproposal.pdf>.
8. Putnam RD. *Bowling alone: The collapse and revival of American community*. New York, NY: Simon and Schuster; 2000.
9. Namkee GC, Burr A, Mutchler JE, Caro FG. Formal and informal volunteer activity and spousal caregiving among older adults. *Research on Aging*. 2007;29:99-124.
10. Klinenberg E. *Heat Wave: A Social Autopsy of Disaster in Chicago*: University of Chicago Press; 2003.
11. Walker J, Herbitter C. *Aging in the Shadows: Social Isolation Among Seniors in New York City*. New York: United Neighborhood Houses of New York; 2005.
12. Greene LV. New Directions in Work and Family Policy. *APA Briefing Paper on Work and Family Policy* 2004; <http://www.apa.org/ppo/issues/workandfam.html>. Accessed February 5, 2008.
13. Gibson MJ, Houser AN. *Valuing the Invaluable: A New Look at the Economic Value of Family Caregiving*. Washington, DC: AARP Public Policy Institute; June 2007.
14. Dychtwald KPD. *Age Power: How the 21st Century Will Be Ruled By The New Old*. New York: Jeremy P. Tarcher/Penguin Putnam, Inc.; 1999.
15. Roper ASW & AARP. *Baby Boomers Envision Retirement II: Survey of Baby Boomers' Expectations for Retirement*: AARP; May 2004.
16. Centers for Disease Control and Prevention. *Healthy Aging: Preventing Disease and Improving Quality of Life Among Older Americans* 2004. Atlanta, GA: National Center for Health Statistics, Department of Health and Human Services; 2004.

## Appendix E: Survey Materials

## Important Survey on the Way!

Dear Fellow Resident,

It only takes a few minutes to make a big difference!

Your household has been randomly selected to participate in a survey about our community. Your survey will arrive in a few days.

Thank you for helping create a better community!

Sincerely,

A handwritten signature in black ink, appearing to read 'Manny Cappello', with a small blue circular stamp to the right.

Manny Cappello  
Mayor  
City of Saratoga

## Important Survey on the Way!

Dear Fellow Resident,

It only takes a few minutes to make a big difference!

Your household has been randomly selected to participate in a survey about our community. Your survey will arrive in a few days.

Thank you for helping create a better community!

Sincerely,

A handwritten signature in black ink, appearing to read 'Manny Cappello', with a small blue circular stamp to the right.

Manny Cappello  
Mayor  
City of Saratoga

## Important Survey on the Way!

Dear Fellow Resident,

It only takes a few minutes to make a big difference!

Your household has been randomly selected to participate in a survey about our community. Your survey will arrive in a few days.

Thank you for helping create a better community!

Sincerely,

A handwritten signature in black ink, appearing to read 'Manny Cappello', with a small blue circular stamp to the right.

Manny Cappello  
Mayor  
City of Saratoga

## Important Survey on the Way!

Dear Fellow Resident,

It only takes a few minutes to make a big difference!

Your household has been randomly selected to participate in a survey about our community. Your survey will arrive in a few days.

Thank you for helping create a better community!

Sincerely,

A handwritten signature in black ink, appearing to read 'Manny Cappello', with a small blue circular stamp to the right.

Manny Cappello  
Mayor  
City of Saratoga



City of Saratoga  
c/o Saratoga Area Senior Coordinating Council (SASCC)  
19655 Allendale Avenue  
Saratoga, CA 95070

Presorted  
First Class Mail  
US Postage  
**PAID**  
Boulder, CO  
Permit NO. 94



City of Saratoga  
c/o Saratoga Area Senior Coordinating Council (SASCC)  
19655 Allendale Avenue  
Saratoga, CA 95070

Presorted  
First Class Mail  
US Postage  
**PAID**  
Boulder, CO  
Permit NO. 94



City of Saratoga  
c/o Saratoga Area Senior Coordinating Council (SASCC)  
19655 Allendale Avenue  
Saratoga, CA 95070

Presorted  
First Class Mail  
US Postage  
**PAID**  
Boulder, CO  
Permit NO. 94



City of Saratoga  
c/o Saratoga Area Senior Coordinating Council (SASCC)  
19655 Allendale Avenue  
Saratoga, CA 95070

Presorted  
First Class Mail  
US Postage  
**PAID**  
Boulder, CO  
Permit NO. 94



July 2016

Dear Fellow Resident:

Please help us shape the future of your community! You have been selected at random to participate in the 2016 Saratoga Area Senior Coordinating Council (SASCC) Community Assessment Survey.

Please take a few minutes to complete the enclosed survey. Your participation in this survey is very important – especially since your household is one of only a small number of households being surveyed. Your feedback will help the agency to better understand and plan for the needs of older adults in our community.

A few things to remember:

- Your responses are completely anonymous.
- In order to hear from a diverse group of older residents, the **adult age 60 years or older** in your household who most recently had a birthday should complete this survey.
- **You may return the survey by mail in the enclosed postage-paid envelope, or you can complete the survey online at:**

**[www.n-r-c.com/survey/saratoga2016.htm](http://www.n-r-c.com/survey/saratoga2016.htm)**

If you have any questions or need assistance with this survey, please call 408-868-1255.

Thank you for your time and participation!

Respectfully,

A handwritten signature in black ink, appearing to read "Manny Cappello".

Manny Cappello  
Mayor  
City of Saratoga



July 2016

Dear Fellow Resident:

Here's a second chance if you haven't already responded to the 2016 Saratoga Area Senior Coordinating Council (SASCC) Community Assessment Survey. **(If you completed it and sent it back, we thank you for your time and ask you to recycle this survey. Please do not respond twice.)**

Please help us shape the future of your community! You have been selected at random to participate in the 2016 Saratoga Area Senior Coordinating Council (SASCC) Community Assessment Survey.

Please take a few minutes to complete the enclosed survey. Your participation in this survey is very important – especially since your household is one of only a small number of households being surveyed. Your feedback will help the agency to better understand and plan for the needs of older adults in our community.

A few things to remember:

- Your responses are completely anonymous.
- In order to hear from a diverse group of older residents, the **adult age 60 years or older** in your household who most recently had a birthday should complete this survey.
- **You may return the survey by mail in the enclosed postage-paid envelope, or you can complete the survey online at:**

**[www.n-r-c.com/survey/saratoga2016.htm](http://www.n-r-c.com/survey/saratoga2016.htm)**

If you have any questions or need assistance with this survey, please call 408-868-1255.

Thank you for your time and participation!

Respectfully,

A handwritten signature in black ink, appearing to read "Manny Cappello".

Manny Cappello  
Mayor  
City of Saratoga



**Please complete this questionnaire if you are the adult (age 60 or older) in the household who most recently had a birthday. The adult's year of birth does not matter. Please circle the response that most closely represents your opinion for each question. Your responses are anonymous and will be reported in group form only.**

**1. Please circle the number that comes closest to your opinion for each of the following questions:**

*Excellent      Good      Fair      Poor      Don't know*

How do you rate Saratoga as a place to live?..... 1 ..... 2 ..... 3 ..... 4 ..... 5

How do you rate Saratoga as a place to retire?..... 1 ..... 2 ..... 3 ..... 4 ..... 5

**2. Please rate each of the following characteristics as they relate to Saratoga adults age 60 or older:**

*Excellent      Good      Fair      Poor      Don't know*

Opportunities to volunteer..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Employment opportunities..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Opportunities to enroll in skill-building or personal enrichment classes..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Recreation opportunities (including games, arts, and library services, etc.)..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Fitness opportunities (including exercise classes and paths or trails, etc.) ..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Opportunities to attend social events or activities..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Opportunities to attend religious or spiritual activities ..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Opportunities to attend or participate in meetings about local  
government or community matters ..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Availability of affordable quality housing..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Variety of housing options ..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Availability of long-term care options ..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Availability of daytime care options for adults aged 60 and older ..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Availability of information about resources for adults aged 60 and older ..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Availability of financial or legal planning services..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Availability of affordable quality physical health care..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Availability of affordable quality mental health care ..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Availability of preventive health services (e.g., health screenings,  
flu shots, educational workshops) ..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Availability of affordable quality food ..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Sense of community ..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Openness and acceptance of the community towards residents aged 60  
and older of diverse backgrounds ..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Ease of travel by public transportation in Saratoga ..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Ease of travel by car in Saratoga..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Ease of walking in Saratoga ..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Ease of getting to the places you usually have to visit ..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Overall feeling of safety in Saratoga..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Valuing residents aged 60 and older in Saratoga..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Neighborliness of Saratoga..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Cost of living in Saratoga..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Availability of services, social events, or activities for residents  
of diverse backgrounds ..... 1 ..... 2 ..... 3 ..... 4 ..... 5

Opportunities for older adults of diverse backgrounds to participate  
in meetings about local government or community matters..... 1 ..... 2 ..... 3 ..... 4 ..... 5

**3. How would you rate the overall services provided to adults aged 60 and older in your community?**

- ☐ Excellent  
☐ Good  
☐ Fair  
☐ Poor  
☐ Don't know

**4. In general, how informed or uninformed do you feel about services and activities available to adults aged 60 and older in your community?**

- ☐ Very informed  
☐ Somewhat informed  
☐ Somewhat uninformed  
☐ Very uninformed

**5. Please circle the number that comes closest to your opinion for each of the following questions:**

	<i>Excellent</i>	<i>Good</i>	<i>Fair</i>	<i>Poor</i>	<i>Don't know</i>
How do you rate your overall physical health? .....	1	2	3	4	5
How do you rate your overall mental health/emotional well-being? .....	1	2	3	4	5
How do you rate your overall quality of life? .....	1	2	3	4	5

**6a. The following questions list a number of problems that older adults may or may not face. Thinking back over the last 12 months, how much of a problem, if at all, has each of the following been for you?**

	<i>Not a problem</i>	<i>Minor problem</i>	<i>Moderate problem</i>	<i>Major problem</i>	<i>Don't know</i>
Having housing to suit your needs .....	1	2	3	4	5
Your physical health.....	1	2	3	4	5
Performing regular activities, including walking, eating and preparing meals .....	1	2	3	4	5
Having enough food to eat.....	1	2	3	4	5
Doing heavy or intense housework .....	1	2	3	4	5
Having safe and affordable transportation available.....	1	2	3	4	5
No longer being able to drive.....	1	2	3	4	5
Feeling depressed .....	1	2	3	4	5
Experiencing confusion or forgetfulness.....	1	2	3	4	5
Maintaining your home .....	1	2	3	4	5
Maintaining your yard .....	1	2	3	4	5
Finding productive or meaningful activities to do.....	1	2	3	4	5
Having friends or family you can rely on.....	1	2	3	4	5
Falling or injuring yourself in your home.....	1	2	3	4	5
Finding affordable health insurance.....	1	2	3	4	5
Getting the health care you need .....	1	2	3	4	5
Affording the medications you need .....	1	2	3	4	5
Figuring out which medications to take and when .....	1	2	3	4	5
Getting the oral health care you need.....	1	2	3	4	5
Getting the vision care you need.....	1	2	3	4	5
Having enough money to meet daily expenses .....	1	2	3	4	5
Having enough money to pay your property taxes.....	1	2	3	4	5

**6b. The following questions list a number of other problems that adults aged 60 and older may or may not face. Thinking back over the last 12 months, how much of a problem, if at all, has each of the following been for you?**

	<i>Not a problem</i>	<i>Minor problem</i>	<i>Moderate problem</i>	<i>Major problem</i>	<i>Don't know</i>
Staying physically fit.....	1	2	3	4	5
Maintaining a healthy diet.....	1	2	3	4	5
Having interesting recreational or cultural activities to attend.....	1	2	3	4	5
Having interesting social events or activities to attend.....	1	2	3	4	5
Feeling bored.....	1	2	3	4	5
Feeling like your voice is heard in the community.....	1	2	3	4	5
Finding meaningful volunteer work.....	1	2	3	4	5
Feeling <u>physically</u> burdened by providing care for another person ....	1	2	3	4	5
Feeling <u>emotionally</u> burdened by providing care for another person .	1	2	3	4	5
Feeling <u>financially</u> burdened by providing care for another person ..	1	2	3	4	5
Dealing with legal issues.....	1	2	3	4	5
Having adequate information or dealing with public programs such as Social Security, Medicare and Medicaid .....	1	2	3	4	5
Finding work in retirement .....	1	2	3	4	5
Building skills for paid or unpaid work .....	1	2	3	4	5
Not knowing what services are available to adults aged 60 and older in your community .....	1	2	3	4	5
Feeling lonely or isolated.....	1	2	3	4	5
Dealing with the loss of a close family member or friend .....	1	2	3	4	5
Being a victim of crime .....	1	2	3	4	5
Being a victim of fraud or a scam.....	1	2	3	4	5
Being physically or emotionally abused .....	1	2	3	4	5
Dealing with financial planning issues .....	1	2	3	4	5
Being treated unfairly or discriminated against because of your age ..	1	2	3	4	5

**7. Thinking back over the past 12 months, how many days did you spend...**

As a patient in a hospital?..... \_\_\_\_\_ number of days

In a long-term care facility (including nursing home or in-patient rehabilitation)? ..... \_\_\_\_\_ number of days

**8. Thinking back over the past 12 months, how many times have you fallen and injured yourself? Was it...**

- ☐ Never                      ☐ 3-5 times  
☐ Once or twice           ☐ More than 5 times  
☐ Don't know

**9. How likely or unlikely are you to recommend living in Saratoga to adults aged 60 and older?**

- ☐ Very likely                      ☐ Somewhat unlikely  
☐ Somewhat likely              ☐ Very unlikely  
☐ Don't know

**10. How likely or unlikely are you to remain in Saratoga throughout your retirement?**

- ☐ Very likely                      ☐ Somewhat unlikely  
☐ Somewhat likely              ☐ Very unlikely  
☐ Don't know

**11. In the last 12 months, about how many times, if ever, have you participated in or done each of the following?**

	<i>2 times a week or more</i>	<i>2-4 times a month</i>	<i>Once a month or less</i>	<i>Not at all</i>
Used the Adult & Senior Center of Saratoga.....	1	2	3	4
Used a recreation center in Saratoga.....	1	2	3	4
Used a public library in Saratoga .....	1	2	3	4
Used bus, rail, subway or other public transportation instead of driving.....	1	2	3	4
Visited a neighborhood park.....	1	2	3	4

**12. Thinking about local public meetings (of local elected officials like City Council or Sheriff's Department Forums, advisory boards, town halls, HOA, neighborhood watch, etc.), in the last 12 months, about how many times, if at all, have you or other household members attended or watched a local public meeting?**

	<i>2 times a week or more</i>	<i>2-4 times a month</i>	<i>Once a month or less</i>	<i>Not at all</i>
Attended a local public meeting .....	1	2	3	4
Watched (online or on television) a local public meeting.....	1	2	3	4

**13. During a typical week, how many hours, if any, do you spend doing the following?**

	<i>Never (no hours)</i>	<i>1 to 3 hours</i>	<i>4 to 5 hours</i>	<i>6 to 10 hours</i>	<i>11 or more hours</i>	<i>Don't know</i>
Participating in a club (including book, dance, game and other social).....	1	2	3	4	5	6
Participating in a civic group (including Elks, Kiwanis, Masons, etc.).....	1	2	3	4	5	6
Communicating/visiting with friends and/or family.....	1	2	3	4	5	6
Participating in religious or spiritual activities with others.....	1	2	3	4	5	6
Participating in a recreation program or group activity .....	1	2	3	4	5	6
Providing help to friends or relatives.....	1	2	3	4	5	6
Volunteering your time to some group/activity in Saratoga .....	1	2	3	4	5	6

**14. During a typical week, how many hours do you spend providing care for one or more individuals with whom you have a significant personal relationship (such as a spouse, other relative, partner, friend, neighbor or child), whether or not they live with you?**

	<i>Never (no hours)</i>	<i>1 to 3 hours</i>	<i>4 to 5 hours</i>	<i>6 to 10 hours</i>	<i>11 to 19 hours</i>	<i>20 or more hours</i>	<i>Don't know</i>
One or more individuals age 55 or older .....	1	2	3	4	5	6	7
One or more individuals age 18 to 54.....	1	2	3	4	5	6	7
One or more individuals under age 18 .....	1	2	3	4	5	6	7

**15. How often, if at all, do you do each of the following, considering all of the times you could?**

	<i>Never</i>	<i>Rarely</i>	<i>Sometimes</i>	<i>Usually</i>	<i>Always</i>
Eat at least 5 portions of fruits and vegetables a day.....	1	2	3	4	5
Participate in moderate or vigorous physical activity.....	1	2	3	4	5
Receive assistance from someone almost every day .....	1	2	3	4	5
Vote in local elections .....	1	2	3	4	5

**16. Please indicate your level of agreement or disagreement with the following statements:**

	<i>Strongly agree</i>	<i>Somewhat agree</i>	<i>Neither agree nor disagree</i>	<i>Somewhat agree</i>	<i>Strongly agree</i>	<i>Don't know</i>
Raising community awareness of the resources that provide help to people with dementia and their families should be a priority for action in Saratoga .....	1	2	3	4	5	6
Our community currently has adequate dementia-related resources tailored to our diverse and underserved population.....	1	2	3	4	5	6
Saratoga currently provides its citizens with education and training opportunities on recognizing the warning signs of dementia .....	1	2	3	4	5	6

**Our last questions are about you and your household. Again, all of your responses to this survey are completely anonymous and will be reported in group form only.**

**D1. How many years have you lived in Saratoga?**

- ☐ Less than 1 year  
☐ 1-5 years  
☐ 6-10 years  
☐ 11-20 years  
☐ More than 20 years

**D2. Which best describes the building you live in?**

- ☐ Single family home  
☐ Townhouse, condominium, duplex or apartment  
☐ Mobile home  
☐ Assisted living residence  
☐ Nursing home  
☐ Other

**D3. Do you currently rent or own your home?**

- ☐ Rent  
☐ Own (with a mortgage payment)  
☐ Own (free and clear; no mortgage)

**D4. About how much is your monthly housing cost for the place you live (including rent, mortgage payment, property tax, property insurance and homeowners' association (HOA) fees)?**

- ☐ Less than \$300 per month  
☐ \$300 to \$599 per month  
☐ \$600 to \$999 per month  
☐ \$1,000 to \$1,499 per month  
☐ \$1,500 to \$2,499 per month  
☐ \$2,500 or more per month

**D5. How many people, including yourself, live in your household?**

..... members

**D6. How many of these people, including yourself, are 60 or older?**

..... members

**D7. What is your employment status?**

- ☐ Fully retired → *Go to Question D9*  
☐ Working full time for pay  
☐ Working part time for pay  
☐ Unemployed, looking for paid work

**D8. [IF NOT YET FULLY RETIRED]**

**At what age do you expect to retire completely and not work for pay at all? ..... years old**

**D9. How much do you anticipate your household's total income before taxes will be for the current year? (Please include in your total income money from all sources for all persons living in your household.)**

- ☐ Less than \$15,000  
☐ \$15,000 to \$24,999  
☐ \$25,000 to \$49,999  
☐ \$50,000 to \$74,999  
☐ \$75,000 to \$99,999  
☐ \$100,000 or more

**Please respond to both questions D10 and D11.**

**D10. Are you Spanish/Hispanic/Latino?**

- ☐ Yes ☐ No

**D11. What is your race? (Mark one or more races to indicate what race you consider yourself to be.)**

- ☐ American Indian or Alaskan native  
☐ Asian or Pacific Islander  
☐ Black, African American  
☐ White/Caucasian  
☐ Other

**D12. In which category is your age?**

- ☐ 60-64 years ☐ 80-84 years  
☐ 65-69 years ☐ 85-89 years  
☐ 70-74 years ☐ 90-94 years  
☐ 75-79 years ☐ 95 years or older

**D13. What is your sex?**

- ☐ Female ☐ Male

**D14. What is your sexual orientation?**

- ☐ Heterosexual ☐ Gay  
☐ Lesbian ☐ Bi-sexual

**Thank you for completing this survey. Please return the completed survey in the postage-paid envelope to:**

**National Research Center, Inc. Data Entry  
P.O. Box 549, Belle Mead NJ 08502-9922**



City of Saratoga  
c/o Saratoga Area Senior Coordinating Council (SASCC)  
19655 Allendale Avenue  
Saratoga, CA 95070

Presorted  
First Class Mail  
US Postage  
PAID  
Boulder, CO  
Permit NO.94





# **AGE-FRIENDLY SANTA CLARA COUNTY**

## Three-Year Action Plan

SANTA CLARA COUNTY SOCIAL SERVICES AGENCY  
Department of Aging and Adult Services

July 2020

ATTACHMENT 4







# Message from the Board of Supervisors

By leading and acting together, we can create a far better future for our community.

Dear County of Santa Clara resident:

Since 2018, the County and all 15 cities in it have been part of the Age-Friendly network and it is with great enthusiasm that we share the Age-Friendly Three-Year Action Plan for the County of Santa Clara with you. The Action Plan calls for assessing the domains of community life which impact older residents in our community and developing a plan to improve the well-being of those residents.

Adults age 60 and over make up 18% of Santa Clara County's population, but current trends indicate that by 2030 that number will grow to one in four. This demographic shift is an opportunity to engage our older residents in ways that will improve our entire community.

The leaders of every city in the County, along with the Board of Supervisors, share the goal of improving programs, policies, and the environment for residents of all ages. With adequate planning and investment, we can build accessible spaces, deliver responsive services, and create a more equitable society. This Three-Year Action Plan is meant to be a guide for moving the County and its cities forward together.

COVID-19 has shown us not only how strong and resilient we are as a community but also how adaptable we are. We have worked diligently with our many community partners to prioritize health and community services, social participation, and outreach. We look forward to partnering with you as we work towards a more inclusive and age-friendly Santa Clara County.

Be well,



Cindy Chavez  
President, Santa Clara County Board of Supervisors





# Table of Contents

Age-Friendly Framework	7
Age Friendly Timeline	8
Community Profile	10
COVID-19	11
Domains of Livability	
Public Spaces	12
Social Participation	14
Housing	16
Communication & Information	18
Dementia Friendly Community	20
Health & Community Services	22
Transportation	24
Volunteerism & Civic Engagement	26
Employment & Finances	28
Action Plan Summary	30
Assessment Method	32
Partners	33





# Age-Friendly Framework

In 2007, the World Health Organization developed an Age-Friendly Cities and Communities Framework outlining domains of community life impacting older residents' well-being. The framework calls for assessing needs under each of the domains and developing an action plan for improvement. AARP serves as the national Age-friendly affiliate in the United States, providing support and resources for network members. The County of Santa Clara, as well as all 15 cities within the county, joined the Age-friendly network by 2018.

Like many communities, the County of Santa Clara adapted the WHO framework to fit local needs, resulting in the following nine domains:

<b>Public Spaces</b>  How we interact with outside spaces and built environments	<b>Social Participation</b>  Participation in leisure, social, cultural, and spiritual activities	<b>Housing</b>  The range of available living spaces to be safe and sheltered
<b>Communication &amp; Information</b>  Staying connected with access to timely and practical information	<b>Dementia Friendly Community</b>  Support and services for individuals and caregivers	<b>Health &amp; Community Services</b>  Support to maintain health, independence, and quality of life
<b>Transportation</b>  Access to transportation options to move around the city	<b>Volunteerism &amp; Civic Engagement</b>  Opportunities to engage in decisions and give back to the community	<b>Employment &amp; Finances</b>  Promotion of flexible paid work and financial stability



**2011**

Seniors' Agenda established by the Board of Supervisors

**2013**

Seniors' Agenda develops first three-year strategic plan

**2016**

Age-friendly community survey conducted

Age-friendly Silicon Valley Website launched

**2017**

37 focus groups conducted throughout 15 cities

Community Conversations of Assessment

All cities in Santa Clara County are accepted into the Global Age-friendly Network

County of Santa Clara accepted into the  
Global Age-friendly Network

2018

2019

Board of Supervisors holds Special  
Hearing on Issues Affecting Older Adults

Age-friendly Logic Model workshops hosted  
throughout Santa Clara County

2020

Three-year Age-friendly Action Plan  
established

2023

Evaluation of progress on three-year plan





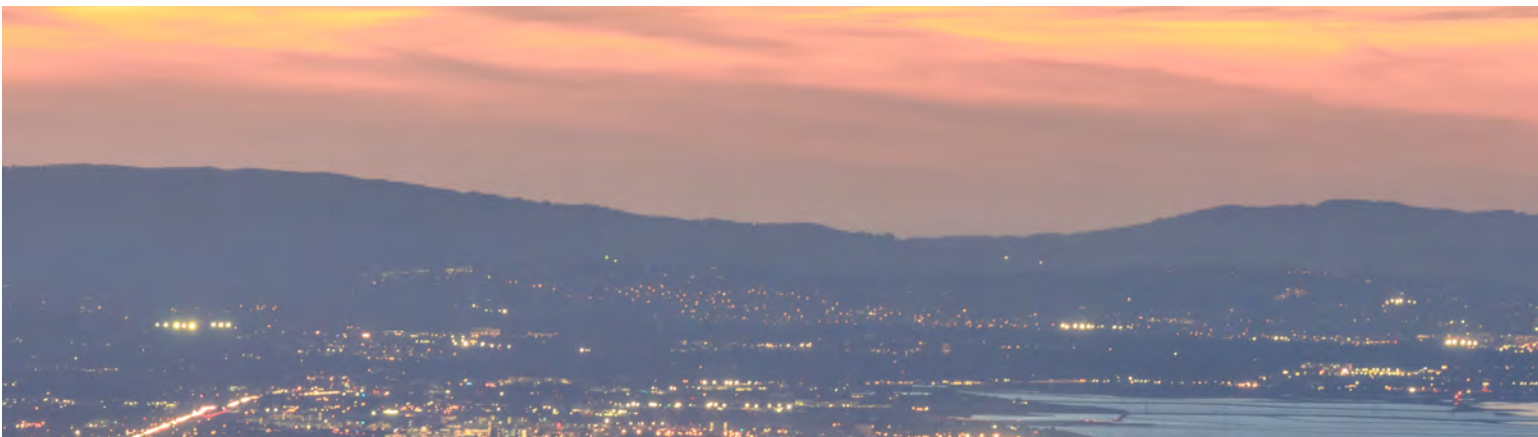
# Community Profile

Santa Clara County is the largest county in the San Francisco Bay Area and has become known as “Silicon Valley” because it is a global hub for high technology. Largely because of the many technology companies, many of the cities in the northern part of the county are densely populated urban areas, while the southern part of the county is more sparsely populated and rural, reflecting its historically agricultural economy.

There is significant linguistic diversity in Santa Clara County, with more than half of all residents speaking languages other than English at home. Additionally, more than a third of residents were born outside of the United States. This brings a rich culture to the county with a wide variety of community events, ethnically diverse restaurants and businesses, and unique opportunities for cultural exchange.

In 2018, the County of Santa Clara became the first in the US to have all cities and the county join the World Health Organization’s Age-Friendly Global Network. This project was led by the Seniors’ Agenda, which is a collective-impact effort created by the Board of Supervisors in 2011 to prepare for the growing aging population. Currently, approximately 13% of residents are age 65 or older, but this is expected to grow to 22% in the next decade. This demographic shift presents an opportunity to engage residents in efforts to improve the community for all.

While each of the cities within Santa Clara County has unique strengths and challenges, the leaders in every city share the goal of improving programs, policies, and the built environment for residents of all ages. With adequate planning and investment, we can build accessible spaces, deliver responsive services, and create a more inclusive society. This Three-Year Action Plan is meant to be a guide to move the County forward together.





# COVID-19 Resilience

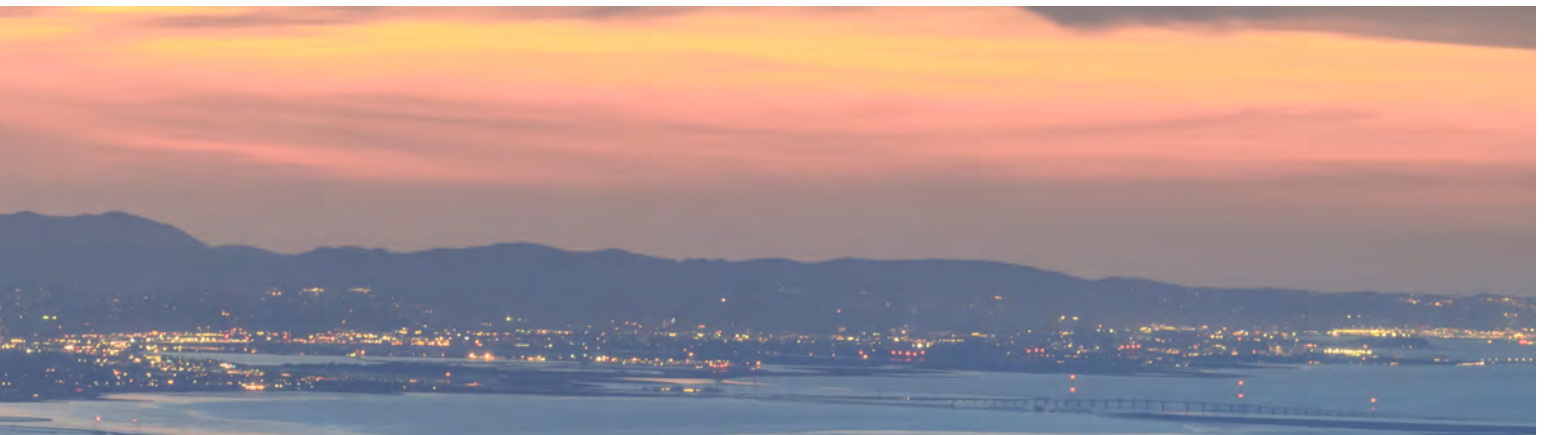
While developing this report, the COVID-19 pandemic began to spread around the world. With early evidence of serious health complications for older adults, community organizations began innovating and collaborating to adapt programs. While all Age-friendly domains have been impacted, three stood out as particularly critical:

- **Health and Community Services:** Nutrition, emergency housing, access to health care and telehealth, chronic disease management, and mental health services
- **Social Participation:** social isolation and ageism
- **Communication:** digital inclusion and accurate health information

Below are some Age-friendly examples of Santa Clara County's response to COVID-19:

- The Senior Nutrition Program adapted congregate meal sites to to-go meal pick-up locations and increased home-delivered meal capacity
- San Jose State University nursing students collaborated with the Senior Nutrition Program to make check-in calls with program participants
- The SCC Fire Department developed home safety videos, including falls prevention
- The County Library system hosted virtual book clubs for all ages
- The County of Santa Clara, City of San Jose, and Continuum of Care partners worked together to provide shelter, hygiene resources, and health care for residents facing homelessness, prioritizing those who are older or have chronic conditions
- The Board of Supervisors approved repurposing pilot funding to support virtual programming at three Adult Day Services organizations

Our community partners have all been working diligently to help older residents through this public health crisis and we look forward to maintaining the momentum to implement this action plan.



# Public Spaces



The design of public spaces impacts residents' health by influencing their likelihood of participating in healthy activities. Universal Design, which considers the needs of all users, increases the accessibility of spaces beyond the minimal legal standards. More public buildings, seating areas, parking lots, and community centers should incorporate universal design to ensure usability for all. Parks are particularly valuable public spaces because they encourage physical activity, provide opportunities for social connection, and reduce stress. The 2018 County Park Visitor Survey found that 58% of park visitors over age 50 report going to the park to improve their health. To promote health for all, parks should be accessible for all residents. However, while 90% of county residents live within 5 miles of a park, none the 28 county parks in Santa Clara County can be easily visited using public transportation. Improvements to parks should include increasing access through active and public transportation routes.

## Goal

To increase the accessibility, inclusivity, and safety of public spaces.

## Current Age-Friendly Practices

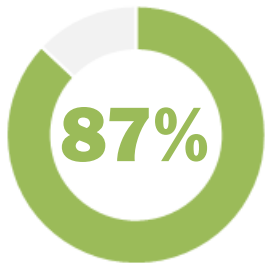
- The Department of Parks and Recreation offers a variety of year-round activities, including virtual "PlayHere on Demand" programming during COVID-19
- A senior discount is available on annual county park passes
- Restrooms and seating are available at county parks
- Accessible trails are available and clearly designated at county parks

### Age-Friendly Practice Highlight

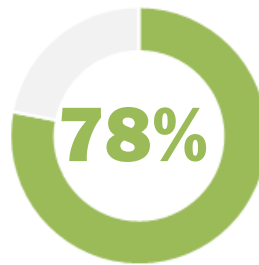
Senior Safari is a popular free event hosted once a month, May through October, by Happy Hollow Park and Zoo, traditionally a park geared toward children. Seniors' Agenda has been a key partner for this event since its inception in 2014. The event offers accessible walking paths, animal meet-and-greets, zookeeper chats, dancing, art, and hula hooping. This program is designed to help older adults socialize, exercise, and enjoy the fresh air.

# 2016 Age-Friendly Survey Results

It's extremely or very important to have...



parks with enough benches



well-maintained and safe parks within walking distance of home



well-maintained public buildings and facilities that are accessible



well-maintained public restrooms that are accessible

## Action Steps

- Adopt and implement an Age-friendly designation for Santa Clara County parks
- Host a Public Spaces Network Summit incorporating universal design best practices
- Sponsor marketing and outreach for the Senior Safari
- Initiate a pilot Park Rx program with Bay Area Older Adults and medical providers
- Increase participation of older adults in the Our City Forest Lawn Buster program



# Social Participation



Inclusive and affordable social opportunities can support older adults' wellbeing by preventing isolation. According to the National Institute on Aging, studies of isolation and loneliness have found links to serious health conditions ranging from depression to heart disease. The county-wide Behavioral Risk Factor Survey found that about one out of four adults age 55+ do not receive the social and emotional support they need. Making activities more inclusive, as well as increasing age-specific options, will help more older adults engage and stay connected to their communities. Our Age-friendly assessment found that county residents value affordable activities, diverse cultural events, and intergenerational opportunities. The 34 senior centers throughout the county offer many opportunities that meet these criteria, but more collaboration is needed to broaden the range of social settings that welcome older people. The challenges of the COVID-19 pandemic have highlighted the importance of a supportive social network and the need for action in this domain.

## Goal

To expand opportunities for participation in varied social and cultural activities.

## Current Age-Friendly Practices

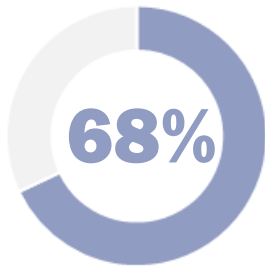
- Santa Clara County libraries offer free or low-cost classes in a variety of languages
- Bay Area Older Adults facilitates free outdoor and social activities for groups
- The Senior Nutrition Program provides congregate meals and friendly visitors
- The Office of LGBTQ Affairs trains county staff on best practices, collaborates on community engagement events, and provides individual referral assistance

### Age-Friendly Practice Highlight

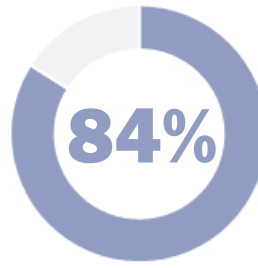
In 2019, West Valley College was the first community college in the US to be designated Age-friendly. This designation recognizes their partnership with the Saratoga Area Senior Coordinating Council to share spaces and classes. They plan to continue improving their policies and infrastructure using an Age-friendly lens.



# 2016 Age-Friendly Survey Results

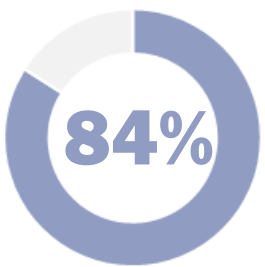


report interacting with friends, families, or neighbors at least daily

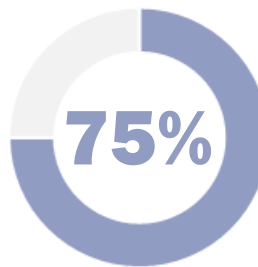


report participating in continuing education or self-improvement classes

It's extremely or very important to have...



activities that are affordable to all residents



activities involving young and older people together

## Action Steps

- Engage libraries and senior centers to enhance virtual and in-person activities
- Collaborate with a college or university to pursue Age-friendly designation
- Host an intergenerational activity with a senior center and high school students
- Design a positive aging campaign to combat ageism
- Connect more Meals on Wheels participants to friendly visitor programs



# Housing



According to our Age-friendly assessment, housing is the top concern for older adults in Santa Clara County. In the county's 2019 Homeless Census and Survey, 40% of people facing homelessness were over 50 years old. Part of the problem is a lack of affordable housing, with an average rent of \$2,926 per month and a median monthly household income of about \$3,644 for adults age 65+. Innovative housing models, such as co-living and accessory dwelling units, have been growing in popularity, but it is critical to expand all affordable housing. Most people report they would prefer to stay in their current home as they age, which requires access to in-home services and home modifications. Older adults who responded to the 2016 Age-friendly survey reported needing to modify their homes to age in place, but additional assistance and educational programs are needed to help homeowners make these improvements with a trusted contractor. Safe and comfortable housing is such a vital part of supporting health and quality of life for older adults that it must be prioritized.

## Goal

To increase the availability of safe, accessible, and affordable housing options.

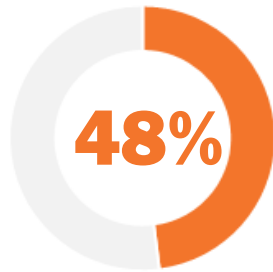
## Current Age-Friendly Practices

- 77% increase in county ADU permits following recent state policy changes
- Rebuilding Together offers home safety repairs for low-income homeowners
- Adult Protective Services offers the Home Safe program for clients at risk of eviction
- Measure A to fund 120 affordable housing developments, with 21 completed

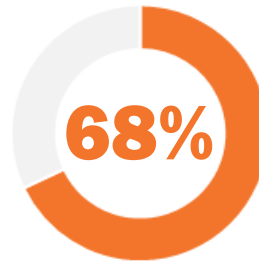
### Age-Friendly Practice Highlight

The Board of Supervisors created a House Sharing program in 2018 managed by Catholic Charities that matches homeowners with someone in need of affordable housing. Homeowners participating in the program, who are typically older adults, benefit from additional income as well as companionship. The program aims to prevent homelessness for the homeowner and renter by reducing both of their living expenses. During the pilot, the program served 1,650 people with navigation services, referral, and home matching.

# 2016 Age-Friendly Survey Results

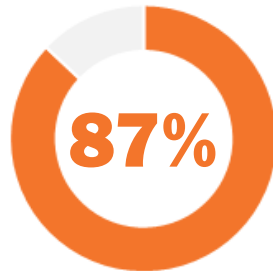


report the expense of home maintenance influencing their need to move

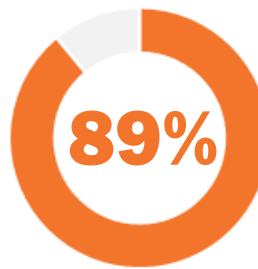


report wanting a home compatible with living independently as influencing their need to move

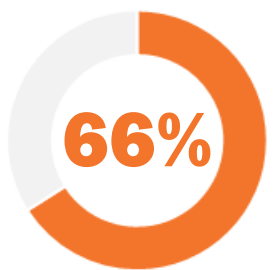
It's extremely or very important...



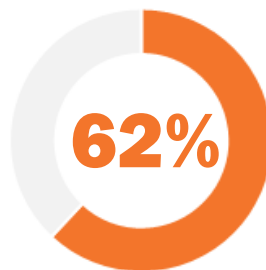
for older adults to live independently in their own home



for older adults to remain in their cities as they age



to have a home repair service for low-income and older adults



to install home bathroom modifications, such as grab bars and non-slip tiles

## Action Steps

- Develop a universal design and home modification class with Rebuilding Together
- Create a taskforce to address rent-burdened older adults living in Area Median Income-linked affordable housing
- Support continuation of funding for Catholic Charities' House Sharing program
- Reduce permit fees for low-income adults 60+ who need accessibility or safety-related home modifications



# Communication & Information



Effective communication is the backbone of success in all Age-friendly domains. According to the 2018 American Community Survey, about half of county residents age 65+ speak a language other than English at home and 19% speak English “not well” or “not at all.” Translation services are essential to make sure this large part of the population can access community resources. Additionally, the COVID-19 pandemic has highlighted the critical importance of digital inclusion for older adults. According to 2018 American Community Survey estimates, there are 19,807 adults 65+ in the county who do not have a computer and, of those that do have a computer, 9.4% do not have broadband internet access. It is critical to address this digital divide by connecting older adults to low-cost internet connection and devices. Organizations, including county departments, also need to adopt Age-friendly best practices to communicate effectively with older residents. By avoiding age stereotyping language and using accessible formatting, organizations will be able to more effectively reach their target audience.

## Goal

To expand technology use to keep older adults connected with the community.

## Current Age-Friendly Practices

- 2-1-1 is a regional health and human services information and referral portal
- AlertSCC is a county-wide emergency alert system
- Libraries and most senior centers offer computers and internet access
- The Senior Nutrition Program has a new app to search for meal programs
- A ‘Good Place to Start’ brochure is available in multiple languages
- Santa Clara County Social Services Agency’s redesigned website is user-friendly

## Age-Friendly Practice Highlight

Age Friendly Silicon Valley has its own website with a page for each of the 15 cities, with information about events, annual reports, results of the survey, and a link to sign up for the monthly newsletter. The monthly newsletter provides information about local events and updates from the Seniors’ Agenda.

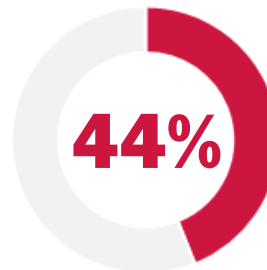


# 2016 Age-Friendly Survey Results

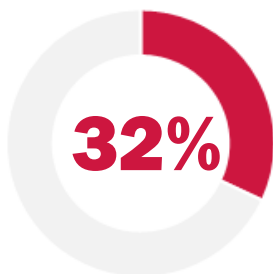
It's extremely or very important to have...



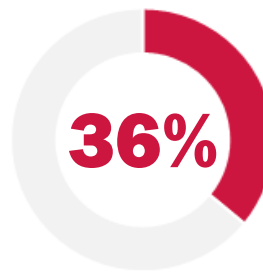
access to community information in one central source



community information that is delivered in-person to people who may have difficulty



free access to computers and the internet in public places



community information that is available in a number of different languages

## Action Steps

- Ensure older adults are incorporated into county digital-inclusion policies
- Engage media and communications staff with an Age-friendly communication guide
- Collaborate with the Senior Nutrition Program on an Age-friendly filter for their app
- Create a technology access website with a list of classes, affordable devices, and Wi-Fi resources



# Dementia Friendly Community



Dementia has significant physical and financial consequences for patients and their family members, who often serve as long-term care providers. The Family Caregiver Alliance reports that caregivers have a higher mortality rate than non-caregivers and lose an estimated \$660,000 in forgone wages, social security income, and pension benefits over a lifetime. COVID-19 has been an added challenge for this community with Adult Day Programs closed, limited respite care, and nursing homes particularly impacted by the virus. Women, African Americans, and Latinos are more likely to be diagnosed with dementia, and women are also more likely to be caregivers in their lifetime. According to the Alzheimer's Association, there are currently about 30,000 older adults diagnosed with dementia in Santa Clara County, but that is projected to double by 2050. As a Dementia Friendly Community, Santa Clara County needs to build greater awareness of prevention measures, improve resources for family caregivers, and broaden social inclusion for people living with dementia.

## Goal

To ensure people with dementia and their families are supported by the community.

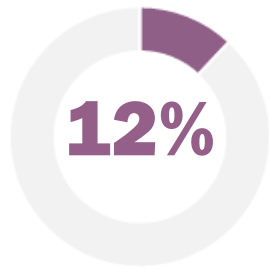
## Current Age-Friendly Practices

- The County of Santa Clara was designated a Dementia Friendly Community in 2015
- There are over 1,000 'Dementia Friends' in the county
- The County partners with the Alzheimer's Association for staff and public education
- The Senior Care Commission initiated a pilot for Adult Day Care subsidies
- County Public Health received one of six state grants for a Healthy Brain Initiative

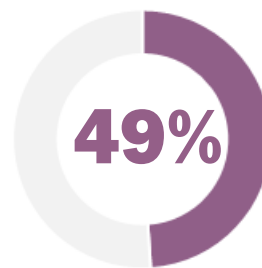
## Age-Friendly Practice Highlight

Launched in 2017, Dementia Friends USA helps community members become Dementia Friends by viewing a series of informational online videos and making a commitment to help. There are specific videos for first responders, transit operators, librarians, pharmacists, faith communities, and others. Currently, Santa Clara County has over 1,000 Dementia Friends, including county staff, professionals in aging, San Jose State University students, and elected officials.

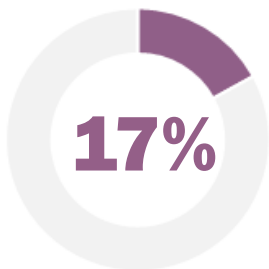
# 2016 Age-Friendly Survey Results



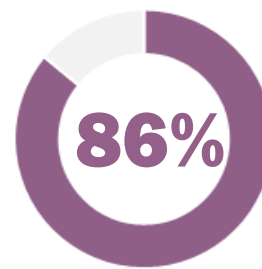
report experiencing an increase in confusion or memory loss in past 12 months



of those with increased confusion or memory loss discussed it with their doctor



report providing care or assistance to a family member or friend with cognitive impairment or dementia



report it is extremely/very important for the community to have home care services

## Action Steps

- Provide trainings to double the number of Dementia Friends in the county
- Commission a study of family caregiver and long-term care workforce needs
- Host a Brain Health Network Summit for professionals and community members
- Collaborate with senior centers and libraries to provide dementia friendly programs
- Conduct a county employee survey about family caregiving needs



# Health & Community Services



As the population ages, the county's investment in preventative health programs will need to expand and evolve to meet the needs of older adults. Three key issues that already have cross-agency collaboration are falls prevention, oral health, and brain health. Data from the Public Health Department shows that about one in three older adults fall each year and the cost of fall-related ER visits is \$26.5 million. In response, the Santa Clara County Falls Prevention Task Force is working on raising awareness about risk factors and increasing access to evidence-based falls prevention classes. In California, half of older adults in skilled nursing facilities and one-third of older adults in the community have untreated tooth decay. The Oral Health Initiative Subcommittee for Older Adults is working to increase older adults' access to dental care. In 2020, the Public Health Department was awarded one of six state grants to pilot a Healthy Brain Initiative that will increase awareness of dementia prevention measures. For all health programs, access barriers, such as transportation, language, and finances, must be addressed to reduce health disparities.

## Goal

To expand access to preventative health services and resources for health emergencies.

## Current Age-Friendly Practices

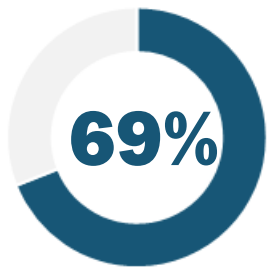
- Evidence-based falls prevention classes are available throughout the county
- ReadySCC is a county-wide emergency preparedness mobile app
- The Oral Health Initiative includes older adults as a priority population
- A Senior Health & Wellness Expo is facilitated by the county each year
- Better Health Pharmacy provides free medications to low-income residents

### Age-Friendly Practice Highlight

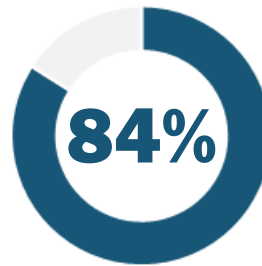
Emergency Medical Services has distributed over 65,000 Lifesaving Information For Emergencies (L.I.F.E.) Files, which residents can place on their refrigerator for first responders to access. The files contain personal information, emergency contacts, prescriptions, and basic medical history which can expedite an appropriate response to a medical emergency or natural disaster.



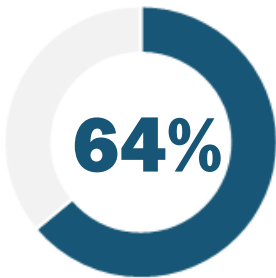
# 2016 Age-Friendly Survey Results



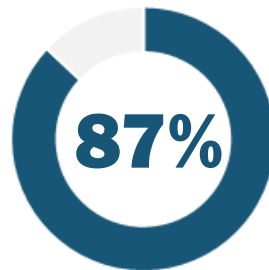
report their health is excellent or very good compared to people of a similar age



report engaging in some form of physical exercise at least several times a week



report it is extremely or very important to have health care professionals who speak different languages



report it is extremely or very important to have easy to find information on local health and supportive services

## Action Steps

- Distribute an additional 5,000 L.I.F.E. files to older adults
- Establish a pet care protocol for hospitalized low-income older adults
- Expand falls prevention training capacity with additional instructors and classes
- Develop an emergency response plan for the Senior Nutrition Program
- Provide free dental care at senior centers with the Oral Health Collaborative
- Collaborate with Public Health to offer brain health trainings for older adults



# Transportation



Access to transportation allows older adults to stay independent and socially connected. Over 90% of older adults who responded to the Age-friendly survey reported driving to get around. However, when driving is no longer an option, it is easy to become isolated if safe and convenient alternatives are not available. Walking was the second most reported mode of transportation, but pedestrian safety is a concern for older adults, who have the highest pedestrian fatality rate in the county. Much of our community was not designed with pedestrians in mind. Vision Zero, a traffic safety initiative that aims to eliminate traffic fatalities, is being adopted by cities in the county. Less than four out of 10 Age-friendly survey respondents reported using public transportation to get around and the 2015 Area Agency on Aging survey found 20% of survey respondents did not feel comfortable using it. Of those who reported not feeling comfortable, almost a third said a lack of knowledge was the reason. Education is needed to ensure all residents feel confident using any transportation option available to them.

## Goal

To improve transportation options and pedestrian safety for older adults.

## Current Age-Friendly Practices

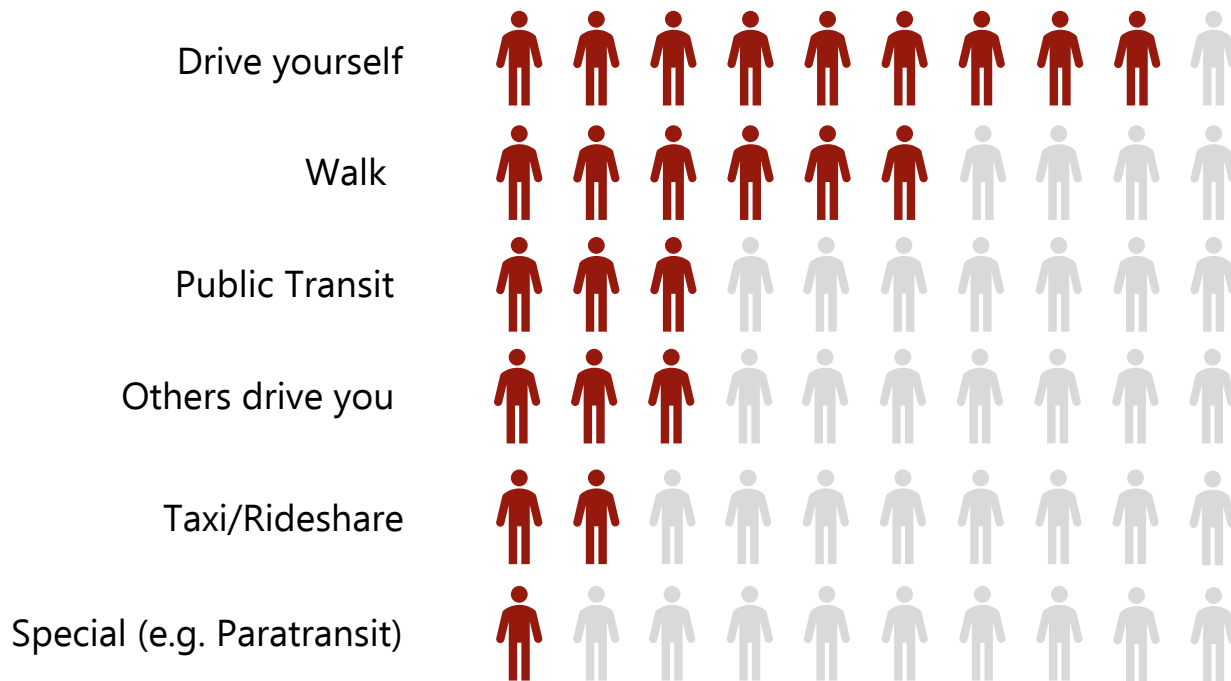
- Traffic Safe Communities Network has over 20 years of cross-agency collaboration
- VTA offers transit orientation and training for older adults
- AARP and the California Highway Patrol provide defensive driving classes
- Five volunteer driver programs provided a total of 12,871 rides in 2019
- Cupertino and Mountain View have free shuttles
- California Walks educates and advocates for pedestrian safety in San Jose

### Age-Friendly Practice Highlight

Reaching Your Destination Easily (R.Y.D.E) provides rides with a sliding scale fee for adults age 65+ in West Valley with funding from cities and the County. Trips can be requested for appointments, visits with friends, grocery shopping, and more. Other essential volunteer driver programs are provided throughout the county by Avenidas, the City of Morgan Hill, the Portuguese Organization for Social Services and Opportunities, and Heart of the Valley Senior Services.

# 2016 Age-Friendly Survey Results

Older adults report the following methods of transportation:



## Action Steps

- Adapt transportation training opportunities considering COVID-19 safety
- Identify five new Senior Safety Zones near senior centers or housing complexes
- Implement the Traffic Safe Communities Network recommendations for older adults
- Create a Volunteer Driver Program Collaborative to increase ride capacity
- Support cities applying for Measure B funding for older adult pedestrian safety





# Volunteerism & Civic Engagement



Volunteerism and civic engagement provide an opportunity for older adults to share their skills, influence decision making, and replace social networks lost after leaving the workforce. According to the Corporation for National and Community Service, 23.5% of adults 65+ formally volunteer, contributing 1.9 billion hours of service with an annual economic value of \$45.4 billion. Santa Clara County older adults are also active in our democracy, with about 72% voter turnout for adults 65+ in the 2016 Presidential Primary compared to only 43% of adults ages 25 to 34. Additionally, members of the Senior Care Commission advise on programs and policies impacting older adults. However, some older adults report difficulty getting information or transportation to volunteer and civic engagement opportunities, indicating better outreach and coordination is needed. Especially as the older adult population grows, it will be important to ensure diverse voices are heard and there are ample opportunities to contribute to community life at every age.

## Goal

To expand opportunities and resources for volunteerism and civic engagement.

## Current Age-Friendly Practices

- A professional network of volunteer managers is supported by the Seniors' Agenda
- Over a dozen county departments, including parks and the animal shelter, utilize older adult volunteers
- The Board of Supervisors allocated an addition \$1 million in Census outreach
- A special BOS hearing on older adults in September 2019 identified policy priorities
- Office of the Census created 1,500 educational placemats for senior meal programs

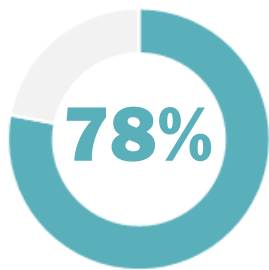
### Age-Friendly Practice Highlight

Implementing the Voter's Choice Act in 2019 offers additional ways for Santa Clara County voters to cast their ballot. All registered voters are automatically provided with a vote by mail ballot, which they can either mail back for free, put in a drop box, or bring to one of the 114 voting centers throughout the county. The intention is to increase voter participation by expanding the options for when, where, and how to vote.

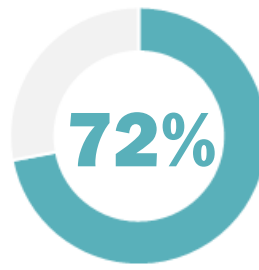


# 2016 Age-Friendly Survey Results

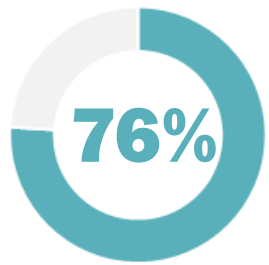
It's extremely or very important to have...



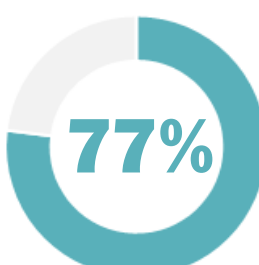
easy to find information about local volunteer opportunities



volunteer training opportunities



opportunities for older adults to participate in decision-making bodies



transportation to and from volunteer activities

## Action Steps

- Include a question on volunteerism in the Behavioral Risk Factor Survey
- Promote the 2020 Census through senior centers and the Senior Nutrition Program
- Host volunteer fairs for older adults with the Volunteer Managers Network
- Convene the Volunteer Managers Network to share best practices during COVID-19
- Collaborate across departments to design a user-friendly county volunteer webpage



# Employment & Finances



There are a growing number of older adults in the work force, with many who need to work to remain financially stable. According to the US Bureau of Labor Statistics, 40% of adults 55+ are employed or actively seeking work. Due to the unprecedented economic impact of COVID-19, many older adults are having increased difficulty finding and keeping employment. With the cost of living in Santa Clara County, even those that have worked their whole lives may struggle to meet basic expenses. Approximately 8% of Santa Clara County residents age 65+ live at or below the Federal Poverty Level. However, the FPL doesn't consider regional housing, medical, or transportation costs. A better indicator is the Elder Economic Index, which is more than three times the FPL (\$3,718 per month) for a single homeowner in Santa Clara County. Because of this discrepancy, many older adults who need financial assistance do not meet eligibility criteria. In addition to these challenges, the county received over 1,500 reports of elder financial abuse in 2019. Older adults are more likely to be targets of scams or fraud because they are more likely to have assets to lose; therefore additional protections and education are needed.

## Goal

To improve employment opportunities and financial literacy resources for older adults.

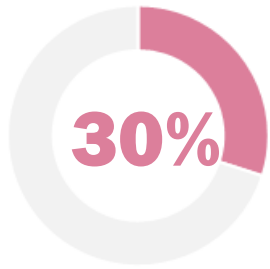
## Current Age-Friendly Practices

- County Tax and Collections provides information about parcel tax exemptions online
- Office of Veterans Services helps veterans and their families access their benefits
- Elected officials sponsor fraud and scam prevention town halls for older adults
- Observe World Elder Abuse Awareness Day with an annual community event

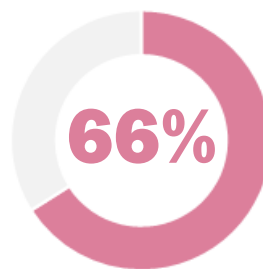
### Age-Friendly Practice Highlight

The Financial Abuse Specialist Team (FAST) is a collaboration between Adult Protective Services, the Office of the Public Guardian, the District Attorney, and County Counsel. FAST members meet regularly to discuss solutions to complicated financial fraud cases, which can result in criminal charges and civil lawsuits to recover damages. Referrals to the team result in a rapid response protocol that, since 1999, have protected more than \$435 million in assets.

# 2016 Age-Friendly Survey Results

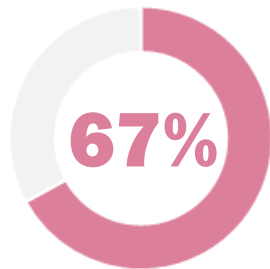


of older adults work at least part time or are actively looking for work

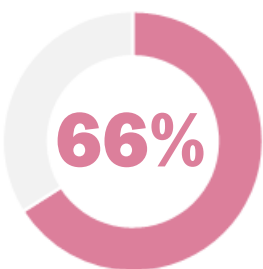


of those working are extremely or very likely to work as long as possible

It's extremely or very important to have...



a range of flexible job opportunities for older adults



job training opportunities for older adults

## Action Steps

- Work with county departments to include adults 50+ in their internship programs
- Host an older women's financial forum with the Office of Women's Policy
- Promote the Elder Economic Index to determine eligibility for low-income program
- Host an annual financial fraud prevention event in collaboration with AARP



# Action Plan Summary

Action	Primary Partners
<b>Public Spaces</b>	
Adopt and implement an Age-friendly designation for Santa Clara County parks.	Parks and Recreation
Host a Public Spaces Network Summit incorporating universal design best practices.	Parks and Recreation; Planning Department
Sponsor marketing and outreach for the Senior Safari.	Happy Hollow Foundation
Initiate a pilot Park Rx program with Bay Area Older Adults and medical providers.	Bay Area Older Adults; Open Space Authority
Increase participation of older adults in the Our City Forest Lawn Buster program	Our City Forest
<b>Social Participation</b>	
Engage libraries and senior centers to enhance virtual and in-person activities.	Senior Centers; Libraries
Collaborate with a college or university to pursue Age-friendly designation.	West Valley Community College
Host an intergenerational activity with a senior center and high school students.	Senior Centers; Gen2Gen
Design a positive aging campaign to combat ageism.	Age-Friendly Cities Collaborative
Connect more Meals on Wheels participants to friendly visitor programs.	Senior Nutrition Program
<b>Housing</b>	
Develop a universal design and home modification class with Rebuilding Together.	Rebuilding Together Silicon Valley
Create a taskforce to address rent-burdened older adults living in Area Median Income-linked affordable housing.	Destination: Home; SCC Supportive Housing
Support continuation of funding for Catholic Charities' House Sharing program.	Catholic Charities
Reduce permit fees for low-income adults 60+ who need accessibility or safety-related home modifications.	Rebuilding Together Silicon Valley
<b>Communication &amp; Information</b>	
Ensure older adults are incorporated into county digital inclusion policies.	Age-Friendly Cities Collaborative
Engage media and communications staff with an Age-friendly communication guide.	Public Information Officer
Collaborate with the Senior Nutrition Program on an Age-friendly filter for their app.	Senior Nutrition Program
Create a technology access webpage with a list of classes, affordable devices, and Wi-Fi resources.	Age-Friendly Cities Collaborative
<b>Dementia-Related Support</b>	
Provide trainings to double the number of Dementia Friends in the county.	Alzheimer's Los Angeles
Commission a study of family caregiver and long-term care workforce needs.	Working Partners USA; LTSS Task Force
Host a Brain Health Network Summit for professionals and community members.	Public Health Department

Action	Primary Partners
<b>Dementia-Related Support (con't.)</b>	
Collaborate with senior centers and libraries to provide dementia friendly programs.	Senior Centers; Libraries
Conduct a county employee survey about family caregiving needs.	Family Caregivers Alliance
<b>Health &amp; Community Services</b>	
Distribute an additional 5,000 L.I.F.E. files to older adults.	Emergency Medical Services
Establish a pet care protocol for hospitalized low-income older adults.	SCC Animal Shelter
Expand falls prevention training capacity with additional instructors and classes.	SVHAP; SCC Falls Prevention Task Force
Develop an emergency response plan for the Senior Nutrition Program.	Senior Nutrition Program
Provide free dental care at senior centers with the Oral Health Collaborative.	Oral Health Collaborative
Collaborate with Public Health to offer brain health trainings for older adults.	Public Health Department
<b>Transportation</b>	
Adapt transportation training opportunities considering COVID-19 safety.	VTa
Identify 5 new Senior Safety Zones near senior centers or housing complexes.	Traffic Safe Communities Network
Implement the Traffic Safe Communities Network recommendations for older adults.	Traffic Safe Communities Network
Create a Volunteer Driver Program Collaborative to increase ride capacity.	Volunteer Driver Programs Collaborative
Support cities applying for Measure B funding for older adult pedestrian safety.	VTa; Age-Friendly Cities Collaborative
<b>Volunteerism &amp; Civic Engagement</b>	
Include a question on volunteerism in the Behavioral Risk Factor Survey.	Public Health Department
Promote the 2020 Census through senior centers and the Senior Nutrition Program.	Senior Centers; SNP; Office of the Census
Host volunteer fairs for older adults with the Volunteer Managers Network.	Volunteer Managers Network
Convene the Volunteer Managers Network to share best practices during COVID-19.	Volunteer Managers Network
Collaborate across departments to design a user-friendly county volunteer webpage.	All county departments
<b>Employment &amp; Finances</b>	
Work with county departments to include adults 50+ in their internship programs.	All county departments
Host an older women's financial forum with the Office of Women's Policy.	Office of Women's Policy
Promote the Elder Economic Index to determine eligibility for low-income programs.	Age-Friendly Cities Collaborative
Host an annual financial fraud prevention event in collaboration with AARP	AARP



# **Assessment Method**

## **Age-Friendly Survey**

Between May and October 2016, Santa Clara County's Public Health Department and Department of Aging and Adult Services conducted a survey that collected over 2,500 responses. The survey was offered in four languages (English, Spanish, Chinese, and Vietnamese) and was available online. To reach older county residents, advertisements were purchased in the San Jose Mercury News and community partners helped spread the word. Survey participants represent all 15 cities and 65% have lived in the county for at least 25 years. For the participants who filled out the demographics questions, 71% were female, 62% were White, 18% were Asian/Pacific Islander, 10% were Latino, and 2% were African American/Black. The average age of respondents was 71 years old. Data was analyzed by the Department of Public Health and the main findings are presented under each domain in this report.

## **Focus Groups**

In 2015, the Center for Age-Friendly Excellence (CAFE) began facilitating 37 focus groups with about 400 community members and professionals serving older adults. Participants discussed the Age-friendly domains and were asked to identify priorities for the action plan. The results were used to inform the development of this plan.

## **Community Conversations**

Over 100 organizations came together for Community Conversations to review the survey and focus groups results. Based on the results, participants provided guidance on how to prioritize actions to be taken to create better programs, policies, and practices to benefit older adults. Representatives from Age-friendly cities and county agencies collaborated with community based organizations with input from older adults.

## **Logic Model Workshops**

In 2019, the Social Services Agency's Research and Evaluation staff and the Seniors' Agenda facilitated 10 workshops with community members to help draft logic models for each Age-friendly domain. The results helped identify measurable goals for the three-year plan.

# Partners

## Public

Adult Protective Services  
Emergency Medical Services  
Employee Services Agency  
Falls Prevention Task Force in SCC  
In-Home Supportive Services  
Parks and Recreation Department  
Oral Health Collaborative  
Office of Women's Policy

Public Health Department  
Senior Care Commission  
Senior Nutrition Program  
Senior Centers  
SCC Fire Department  
SCC Traffic Safe Communities Network  
Transportation Department  
Valley Transit Authority

## Community-Based

AARP  
Alzheimer's Association  
Avenidas  
Bay Area Older Adults  
California Walks  
Catholic Charities  
Happy Hollow Foundation  
Heart of the Valley  
Our City Forest  
Portuguese Organization for Social Services  
and Opportunities

R.Y.D.E.  
Rebuilding Together Silicon Valley  
Senior Planet  
Sourcewise  
The Health Trust  
Vision Zero SJ  
Volunteer Managers Network  
West Valley Community College  
Working Partners USA

## Age-Friendly City Collaborative

Campbell  
Cupertino  
Gilroy  
Los Altos  
Los Altos Hills  
Los Gatos  
Milpitas  
Monte Sereno

Morgan Hill  
Mountain View  
Palo Alto  
San Jose  
Santa Clara  
Saratoga  
Sunnyvale



**World Health  
Organization**



**WHO Global Network  
for Age-friendly Cities  
and Communities**

This is to certify that

**County of Santa Clara**

has been accepted as a member of the  
World Health Organization's  
Global Network for Age-friendly Cities  
and Communities

Members of the Network commit to share and promote  
the values and principles central to the World Health Organization  
Age-friendly City approach, and to the process of creating  
more age-friendly cities and communities.

A handwritten signature in black ink, appearing to read 'John Beard'.

Dr John Beard — Director  
Department of Ageing and Life Course  
World Health Organization  
Geneva, Switzerland





THIS IS TO CERTIFY THAT

## Santa Clara County, California

has committed to becoming more age-friendly under the criteria established by AARP and has been accepted as a member of

## The AARP Network of Age-Friendly States and Communities

THIS CERTIFICATION IS VALID UNTIL MARCH 11, 2022

*Nancy A. LeaMond, Chief Advocacy and Engagement Officer*  
COMMUNITY, STATE AND NATIONAL AFFAIRS, AARP | WASHINGTON, D.C.

The AARP Network of Age-Friendly States and Communities is a program of the AARP Livable Communities initiative and an independent affiliate of the World Health Organization Global Network for Age-Friendly Cities and Communities.®

[AARP.org/AgeFriendly](https://www.aarp.org/AgeFriendly)

# Livability Domains and Comm



LEARN MORE: [AARP.org/Livable](https://www.aarp.org/Livable)

The **AARP Network of Age-Friendly States and** improvements that make communities more livab and states enrolled in the network use the **8 Dom** global coronavirus pandemic, communities in the domains (along with commitments to emergency individuals. The following examples, shared with u the power of volunteers can spark innovative idea

## Respect and Social Inclusion



- Create online programming for schools and senior care facilities on topics of shared interest to students and older adults
- Ask children to make and deliver greeting cards to Meals on Wheels recipients and people in senior care facilities

## Outdoor Spaces and Buildings



- Close streets to motor vehicle traffic so people can safely walk and bicycle while social distancing
- Automate crossing signals so pedestrians won't need to touch the crosswalk buttons

## Social Pa



- Create a drive-in a movie onto a w
- Host a "dragging residents can get people by driving community's ma
- Ask local enterta online or outside

## Transportation



- Modify transit schedules, stations and seating to enable social distancing
- Provide specialized services for essential workers
- Suspend transit fares
- Increase paratransit services
- Enlist volunteers to deliver needed items to people who can't leave their homes or use their usual modes of transportation

## Housing



- Provide 24/7 services and shelter for individuals and families experiencing homelessness
- Work with local leaders and legislators to enact and enforce a moratorium on evictions
- Capitalize on relationships with funding sources to provide financial assistance to older adults and others struggling with housing costs
- Create a housing grant program for people with low-incomes and/or a job loss due to COVID-19

## Communication



- Create a "friendly for checking on p
- Establish informa distribute "neces contain needed s

# Community Responses to COVID-19

**Communities** informs and inspires local leaders to implement the types of policies and programs for people of *all* ages — especially older adults. Many of the towns, cities, counties and local governments are using the **Principles of Livability** framework to organize and prioritize their work. In response to the COVID-19 pandemic, many communities are applying their existing plans, programs and partnerships to all of the areas of the framework (and beyond) in order to protect and assist older residents and other high-risk populations. The examples below, provided by the communities themselves, show how the use of best practices, creativity and innovation can lead to effective and achievable solutions that effectively meet community needs.

## Community Participation

- Start a daily, community-wide "appreciation clap" for health care workers and first responders

theater by projecting  
all near a parking lot

Main" event so  
out and see other  
slowly along their  
in roadway

ainers to perform  
of their homes

## Communication and Information

Work with  
businesses and  
internet service  
providers to expand  
access to affordable  
high-speed internet

y voice" call program  
people who live alone

ation hotlines and  
"community bags" that  
supplies

## Health Services and Community Supports



- Work with municipal offices, houses of worship and first responders to coordinate deliveries and visits to people who can't go out
- Provide vouchers for groceries and household goods to residents in need
- Expand where SNAP (supplemental nutrition assistance program) benefits can be used
- Conduct wellness checks and implement quarantine measures in senior care facilities
- Prioritize assistance to people with underlying medical conditions
- Stock book-swap boxes (such as Little Free Libraries) with needed items
- Improve access to fresh foods from farm stands, farmers' markets or community supported agriculture (CSA) harvests by enabling pre-orders and providing free or low-cost grab-and-go and home delivery options

## Civic Participation and Employment



- Connect people with educational and social opportunities through online "virtual" academies
- Promote online volunteerism for advocacy or service campaigns
- Foster local economic assets, such as maker spaces or by adapting commercial properties for needed but temporary uses

## Emergency Preparedness



- Add safety resources and tips to utility bills and local government mailings
- Create tool kits that can help older adults manage in the event of a power outage, food shortages or other disruptions
- Use or adapt existing emergency plans and resources



## **Master Plan on Aging Action Items- March 26, 2021**

### **Housing for All Ages and Stages: AB 695 (Arambula)**

This bill would provide homeless prevention and longer-term housing assistance and support through the Home Safe Program. It would authorize a county that receives grant funds under the Home Safe Program to, as part of providing case management services to elder or dependent adults who require adult protective services, provide housing assistance to those who are homeless or at risk of becoming homeless.

### **Inclusion and Equity: Bridging the Digital Divide**

Digital technologies are fostering new opportunities for connection and inclusion for work, play, community, culture, and commerce. However, over two million Californians do not have access to high-speed internet and approximately 34 percent of adults over 60 do not use the Internet at all. The COVID-19 pandemic has brought these issues into greater focus and heightened the need for improved access to broadband, digital devices, and technology support for older adults.

### **Health Reimagined: SB 515 (Pan)/AB 911 (Nazarian)**

These bills would set up a state board to organize a LTSS social insurance plan to cover LTSS for Californians needing those services, but not qualifying for Medi-Cal. This would both protect the health of those receiving its benefits and provide protection for many of their caregivers. When funds became available for a LTSS social insurance plan, the board could see that funds go to support LTSS provided by institutions, by in-home support services, and by unpaid caregivers.

### **SB 56 (Durazo)/ AB 4 (Arambula)**

These bills would provide full-scope Medi-Cal to all income-eligible seniors (ages 65+) by removing immigration status as an eligibility exclusion. Seniors are amongst the most vulnerable populations and Immigrant seniors are often amongst the lowest income and live in multi-generational households which can put them at even greater risk during a pandemic.

### **Caregiving that Works: State Budget Ask (Nazarian)**

We are asking the state legislature and Governor to extend the Caregiver Resource Center Pilot Project for another two years – to provide training, resources and support to family and other caregivers. We are also requesting a special \$2 million addition to insure diversity and inclusivity in these CRC's.



## **Affording Aging: SB 107 (Wiener)**

This bill would, to the extent permitted by federal law, give an individual the option to apply, report, and recertify for CalFresh in person, by mail, online, or by telephone, and permit an individual to complete the interview requirement and client signature by telephone. The bill would also authorize counties to implement any method of telephonic or electronic signature that is supported by county business practice and technology, making it easier for older adults and others to apply for and receive the food stamps they so desperately need.

## **Next Steps – Get Active/Get Engaged:**

- Sign up to be part of the **Virtual Senior Lobby Day on May 21<sup>st</sup>:**

### **APRIL 23<sup>RD</sup> @ NOON – TRAINING: COMMUNICATING WITH PUBLIC OFFICIALS**

REGISTRATION LINK:

<https://zoom.us/meeting/register/tJ0kde2ppjstH9JooTIRQf8XwyzPMnWNVRb6>

### **MAY 14<sup>TH</sup> @ NOON – TRAINING FOR MAY 21<sup>ST</sup> LOBBY DAY**

REGISTRATION LINK:

<https://zoom.us/meeting/register/tJMkc-mpqD4iEtYQd9RRQ81-4gFLdD8U17Cf>

### **MAY 21<sup>ST</sup> – CARA VIRTUAL LOBBY DAY WITH YOUR LEGISLATOR.**

CARA will be coordinating virtual meetings with all 120 state legislators on this date. If you would like to participate in a Zoom or teleconference meeting with your state Assemblymember or Senator, you can sign up by contacting [caralobby@gmail.com](mailto:caralobby@gmail.com).

- Please contact your State Assemblymember or Senator to urge their support of these bills and budget items that will help move the Master Plan on Aging Forward. To find your legislator and their contact information, go to: [http://www.legislature.ca.gov/your\\_legislator.html](http://www.legislature.ca.gov/your_legislator.html)

# Senior Nutrition Program

Participant Satisfaction Survey 2019



**All Sites (40)**  
**Total Responses: 2798**

**Q1. Senior Nutrition Program helps me to stay healthy.**

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
47.20%	40.55%	10.49%	0.88%	0.88%

**Q2. Socialization at the meal site helps me maintain my overall health.**

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
47.79%	38.10%	11.55%	1.34%	1.22%

**Q3. I am satisfied with the meals provided by the Senior Nutrition Program.**

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
46.99%	39.51%	9.77%	2.41%	1.33%

**Q4. The reason I enjoy coming to this meal site is:**

Food	Friends / Socialization	Location	Other Services / Activities	Others
72.23%	71.42%	48.00%	41.26%	N/A

**Q5. How do you most often reach the meal site?**

Drive Alone	VTA Bus	Drive with Others / Carpool	Walk	Paratransit Services	Site Van	Take the Shuttle
44.72%	21.96%	20.88%	14.48%	3.66%	2.43%	2.43%

**Other (please specify):**

VTA Bus, Walk, Drive with Others/Carpool



**Q6. What foods do you especially like on the menu?**

- Fish/Seafood (452)
- Chicken (268)
- Salad (93)
- Beef (171)
- Vegetable (66)
- Chinese (72)
- Soup (111)
- Fruits(71)

**Q7. Are there any foods you do not like on the menu?**

- Pork (66)
- Vegetables (27)
- Fish/Seafood (123)
- Chicken (46)
- Soup (12)
- Spicy food (20)
- Salad ( 24)
- Beef (42)

**Q8. Are there any new foods you would like to see on the menu?**

- Vegetables (29)
- Soup (54)
- Fish/Seafood (67)
- Chicken (38)
- Chinese (106)

# Senior Nutrition Program

Nutrition Risk Assessment 2019



All Sites (40)  
Total Responses: 13,290

Person has an illness or condition that changes the kind and/or amount of food eaten (2 points)	14.45%
Eats fewer than 2 meals per day (3 points)	10.99%
Eats fewer than 2 daily servings of each of the following food groups: fruits, vegetables, milk products (2 points)	25.55%
Has three or more drinks of beer, liquor or wine almost every day (2 points)	1.92%
Has tooth or mouth problems that make it hard to eat (2 points)	13.47%
Does not always have enough money to buy the food needed (4 points)	19.27%
Eats alone most of the time (1 point)	27.26%
Takes three or more prescribed over the counter drugs a day (1 point)	35.03%
Without wanting to, lost or gained 10 pounds in the past six months (2 points)	9.60%
Not always physically able to shop, cook and/or feed self (2 points)	19.00%
Total Over 6 Points	21.93%

# Senior Nutrition Program

Covid-19 Survey 2019



All Sites (40)  
Total Responses: 2,430

**Q1. Please indicate if you currently have adequate access to the following?**

## Nutrition-related resources

Food	Groceries Delivery	Home Delivered Meals
76.58%	32.35%	23.17%

## Health-related resources

Telehealth	Dental Care	Prescription Medication	Mental Health Services
32.67%	36.38%	62.22%	18.48%

## Other Supportive Services

Case Management	Transportation	Legal Aid	Housing	Wellness Check-ins	Internet	Pet food
11.65%	32.84%	9.38%	30.21%	21.60%	35.51%	8.40%

**Q2. How do you stay connected with friends and family?**

Phone call	Unable to connect with friends and family	Text Messages	Video call	Other
68.56%	1.65%	35.60%	21.69%	6.75%

**Q3. How do you feel about the Senior Nutrition Program?**

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Overall, I am satisfied with the quality of the To-Go meals during COVID-19.	41.63%	41.09%	12.83%	2.76%	1.69%
There are adequate instructions on how to safely reheat the meal.	39.72%	36.35%	17.35%	3.45%	3.13%
During meal distribution, staff at meal sites always share with me the extra precautions to mitigate the spread of COVID-19.	47.91%	33.71%	12.52%	3.69%	2.17%
I would prefer to pick up more meals at one time.	26.62%	26.02%	28.44%	11.41%	7.52%

**Q4. Which meal type would you prefer?**

Hot Meals	Shelf Stable Meals	Frozen Meals
52.47%	14.86%	9.01%

# Senior Nutrition Program

## Participant Satisfaction Survey 2019



Site: **Live Oak Nutrition Center**

Total Responses: **39**

### Q1. Senior Nutrition Program helps me to stay healthy.

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
40.00%	37.14%	22.86%	0.00%	0.00%

### Q2. Socialization at the meal site helps me maintain my overall health.

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
54.29%	37.14%	8.57%	0.00%	0.00%

### Q3. I am satisfied with the meals provided by the Senior Nutrition Program.

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
36.11%	50.00%	11.11%	2.78%	0.00%

### Q4. The reason I enjoy coming to this meal site is:

Food	Friends / Socialization	Location	Other Services / Activities	Others
47.50%	80.00%	50.00%	42.50%	N/A

### Q5. How do you most often reach the meal site?

Drive Alone	VTA Bus	Drive with Others/ Carpool	Walk	Paratransit Services	Site Van	Take the Shuttle
55.00%	5.00%	27.50%	20.00%	5.00%	2.50%	2.50%

Other (please specify):

VTA Bus, Walk, Drive with Others/Carpool

**Q6. What foods do you especially like on the menu?**

- Fish (1)
- Salad (4)
- Chicken (3)
- Beef (2)
- Pork (1)
- Soup (1)

**Q7. Are there any foods you do not like on the menu?**

- Vegetables (3)
- Beef (1)
- Fish (1)
- Pork (1)

**Q8. Are there any new foods you would like to see on the menu?**

- Chinese (1)
- Soup (2)
- Salad (1)
- Chicken (1)
- Veg (1)

# Senior Nutrition Program

## Nutrition Risk Assessment 2019



Site: **Live Oak Nutrition Center**

Total Responses: **177**

<b>Person has an illness or condition that changes the kind and/or amount of food eaten (2 points)</b>	<b>5.65%</b>
<b>Eats fewer than 2 meals per day (3 points)</b>	<b>6.21%</b>
<b>Eats fewer than 2 daily servings of each of the following food groups: fruits, vegetables, milk products (2 points)</b>	<b>13.56%</b>
<b>Has three or more drinks of beer, liquor or wine almost every day (2 points)</b>	<b>0.00%</b>
<b>Has tooth or mouth problems that make it hard to eat (2 points)</b>	<b>5.65%</b>
<b>Does not always have enough money to buy the food needed (4 points)</b>	<b>11.86%</b>
<b>Eats alone most of the time (1 point)</b>	<b>22.03%</b>
<b>Takes three or more prescribed over the counter drugs a day (1 point)</b>	<b>23.73%</b>
<b>Without wanting to, lost or gained 10 pounds in the past six months (2 points)</b>	<b>3.39%</b>
<b>Not always physically able to shop, cook and/or feed self (2 points)</b>	<b>9.60%</b>
<b>Total Over 6 Points</b>	<b>10.17%</b>





# Senior Nutrition Program

Covid-19 Survey 2019

Site: **Live Oak Nutrition Center**

Total Responses: **29**

**Q1. Please indicate if you currently have adequate access to the following?**

## Nutrition-related resources

Food	Groceries Delivery	Home Delivered Meals
79.31%	48.28%	34.48%

## Health-related resources

Telehealth	Dental Care	Prescription Medication	Mental Health Services
37.93%	48.28%	72.41%	27.59%

## Other Supportive Services

Case Management	Transportation	Legal Aid	Housing	Wellness Check-ins	Internet	Pet food
13.79%	48.28%	24.14%	41.38%	31.03%	48.28%	20.69%

**Q2. How do you stay connected with friends and family?**

Phone call	Unable to connect with friends and family	Text Messages	Video call	Other
62.07%	3.45%	34.48%	20.69%	13.79%

**Q3. How do you feel about the Senior Nutrition Program?**

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Overall, I am satisfied with the quality of the To-Go meals during COVID-19.	25.00%	41.67%	33.33%	0%	0%
There are adequate instructions on how to safely reheat the meal.	20.00%	30.00%	40.00%	0%	10.00%
During meal distribution, staff at meal sites always share with me the extra precautions to mitigate the spread of COVID-19.	36.36%	36.36%	18.18%	9.09%	0%
I would prefer to pick up more meals at one time.	27.27%	9.09%	54.55%	0%	9.09%

**Q4. Which meal type would you prefer?**

Hot Meals	Shelf Stable Meals	Frozen Meals
41.38%	17.24%	3.45%



# CHSSC WORKPLAN

	TOPICS	TOPICS	TOPICS
MARCH 23, 2021	LGS Rec 55+ Presentation	Live Oak Senior Nutrition Presentation	Commission Discussion
APRIL 13, 2021	West Valley Community Services Presentation	Saratoga Area Senior Coordinating Council Presentation	Commission Discussion
APRIL 27, 2021	SCC Department of Aging and Adult Services TBD	Los Gatos Library Director	Commission Discussion
MAY 11, 2021	City of Los Altos Senior Commission Liaison	TBD	Summary of Current Senior Service Provision
MAY 25, 2021	Identification of Senior Service Provision Gaps	Commission Discussion	
JUNE 8, 2021	Review of Commission Report to Council		
JUNE 15, 2021 COUNCIL PRESENTATION			