2007 Seminole County

COMMUNITIES FOR A LIFETIME

Final Report

Report prepared by:

The Senior Resource Alliance
with assistance from the Health Council of East Central Florida

SRA
Senior Resource Alliance

Health
COUNCIL
OF EAST CENTRAL FLORIDA

Executive Summary

The proverbial "light at the end of the tunnel" may be, as the old saying goes, "an oncoming train." Without action, this could be the future Seminole County is facing, as the "oncoming train" of baby boomers approaches retirement age. The demographics are a fact, but the County's response now will shape its future. What's needed is nothing less than a new view of aging that recognizes the opportunities, as well as the challenges, that lie ahead. The majority of Seminole County's older adults are healthy, mobile, and financially stable. The County must find ways to harness seniors' energy, talents, purchasing power, and influence, so that they choose to remain here and help shape a vibrant community.

At the same time, the County must step up its efforts to ensure a safety net for the relatively small number of frail, vulnerable elders who have few other options. This is a shared responsibility; state agencies, municipal governments, not-for-profit service organizations, the business community, and concerned citizens must come together to fashion a broad-based coalition of care. The County is uniquely positioned to convene this initiative by establishing a Commission on Aging and dedicating a committed resource to ensuring that the existing services and opportunities for seniors are fully utilized through better coordination and public information. When financial resources are stretched, as they are currently, true leadership, collaboration and creative problem solving become essential.

Based on six months of research and discussion, the Seminole County Task Force on Aging, created through the passage of the Communities for a Lifetime resolution, recommends several actions to the Board of County Commissioners. Every effort has been made to be sensitive to the funding challenges currently faced by Florida counties and cities, while at the same time recognizing the commitment the County made to its older residents when it adopted the Communities for a Lifetime resolution. Many of these recommendations are possible for little or no cost to the County. Other recommendations must be addressed by a broader coalition of partners with leadership from the County.

1. Establish a Commission on Aging as a standing advisory committee of the Board of County Commissioners.
2. Authorize staff support for the Commission on Aging to enable it to work effectively.

In addition to these Administrative and Operational recommendations, the Task Force has prepared recommendations in the areas of Public Awareness and Involvement, Basic Needs, Health and Safety, Home and Neighborhood, Transportation, and Social and Community Involvement.

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Introduction

On September 12, 2006 the Board of County Commissioners of Seminole County passed a resolution dedicating the county to "first evaluate and later remove all barriers to become a *Community for a Lifetime*." The Communities for a Lifetime initiative of the State of Florida aims to make Florida a friendlier place to live for people of all ages, so that people may remain independent in their chosen communities for as long as possible. Concurrently, the Seminole County Commission established a Task Force on Aging "to create an inventory of services and opportunities available to our elder population."

On January 18, 2007 the Task Force on Aging held its first meeting, coordinated by the county's Department of Community Services. A cross-section of individuals who work with and advocate for senior citizens came together to plan for and carry out a community assessment, as recommended by the state Department of Elder Affairs.

Over the next six months, this group conducted research on best practices, administered surveys to seniors, and conducted a focus group with professionals in the aging and health fields. This report summarizes the results of their efforts and their recommendations to the Board for further action.

Acknowledgements

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- Laura Capp, Project Director, Senior Resource Alliance, Chairperson
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- Dotti Burkett, Elder Services Officer, Seminole County Sheriff's Office, Vice Chairperson
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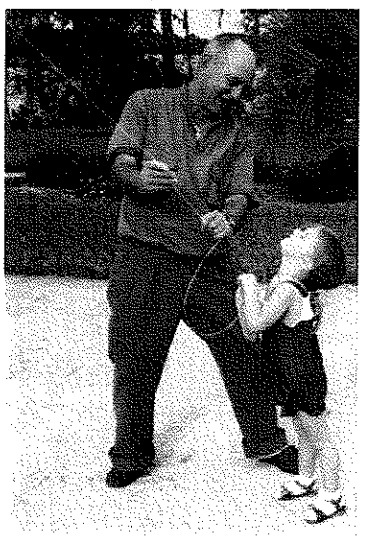
Vision Statement

What is a "community for a lifetime"? The Florida Department of Elder Affairs defines it as a Florida community that is "a great place for seniors to live, providing all residents the opportunity to achieve their full potential and contribute to the betterment of their communities." AARP promotes a similar concept, called "livable communities," that shares many of the same qualities, including: "affordable and appropriate housing, supportive community features and services, and adequate mobility options, which together facilitate personal independence and the engagement of residents in civic and social life." After reviewing these and other definitions, the Seminole County Task Force on Aging adopted its own vision that is outlined below.

Seminole County Task Force on Aging Vision

A community for a lifetime is a safe, friendly place where the generations mix and neighbors care for neighbors. Seniors are able to live the best life possible for them by having reasonable access to the people, resources and services that can meet their needs. In a community for a lifetime, there is access to transportation, decent housing, health care, and work opportunities, as well as social, cultural, educational, recreational, and civic activities for people of all ages.



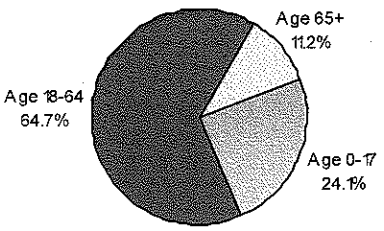
Community Assessment: Elder Profile

The community assessment conducted by the Task Force on Aging consists of two parts: a profile of elders in Seminole County and a profile of the services and opportunities the county (and its municipalities) provide for older residents. This section of the report will outline some of the key findings of the Task Force's research and is arranged in the discovery areas identified by the Florida Department of Elder Affairs

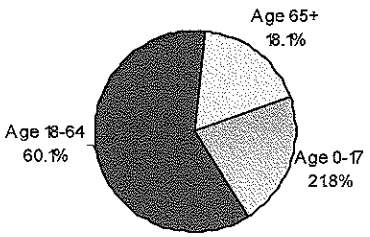
Demographics

The most recent population estimates from the 2005 American Community Survey conducted by U.S Census Bureau report Seminole County's population at 398,013 persons. From 2000 to 2005, Seminole County experienced a population increase of 9 percent. The charts below show the population distribution by age group for Seminole County and Florida.

Seminole



Florida



Seminole County's population is younger than the State, as reflected in the lower percentage of persons age 65 years/over and the higher percentage of persons age 0-17 years.

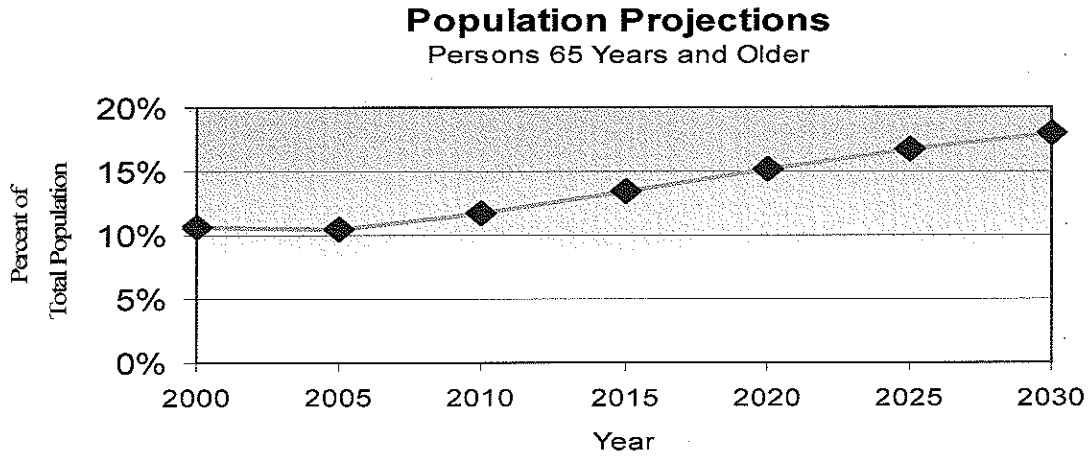
Senior Population

	1990		2000		2005	
	Number	*Percent*	*Number*	*Percent*	*Number*	*Percent*
Age 65+	29,700	8.7%	38,853	10.6%	41,584	10.4%

U.S. Census Bureau

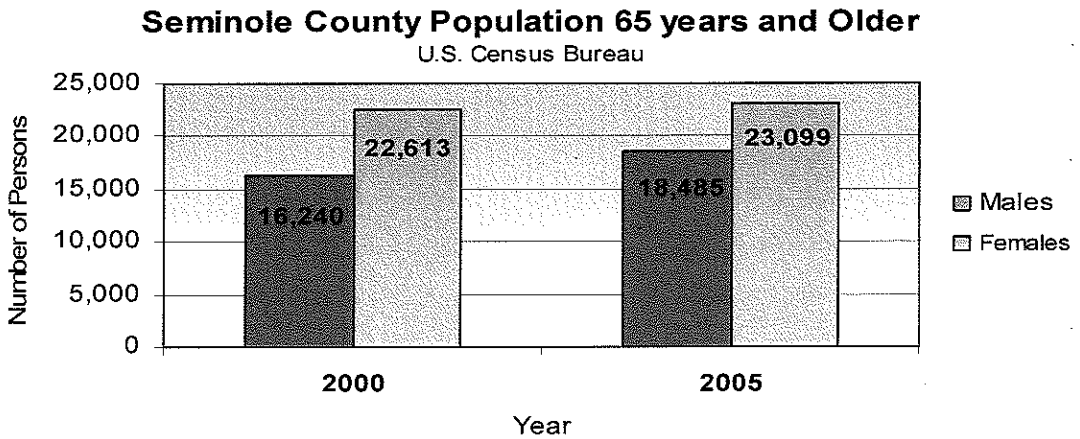
U.S. Census data reported the senior population in Seminole increased 38% from 1990 to 2000. Population estimates for 2005 showed seniors representing a slightly smaller percentage of the population.

Future population projections from the Bureau of Economics & Business Research show the senior population remaining stable until 2011 when it will experience a slight increase. As the baby boomer generation enters retirement, the number of person's age 65 years and older will increase substantially.



Gender

Women have traditionally represented a larger portion of the senior population than their male counterparts. The table below shows the gender distribution of senior men and women for 2000 and 2005 in Seminole County.



Race

The racial and ethnic distribution of older adults differs from that of the general population. The table below depicts the percentage of the population by race for the total and senior populations in Seminole County.

Seminole County Population by Race

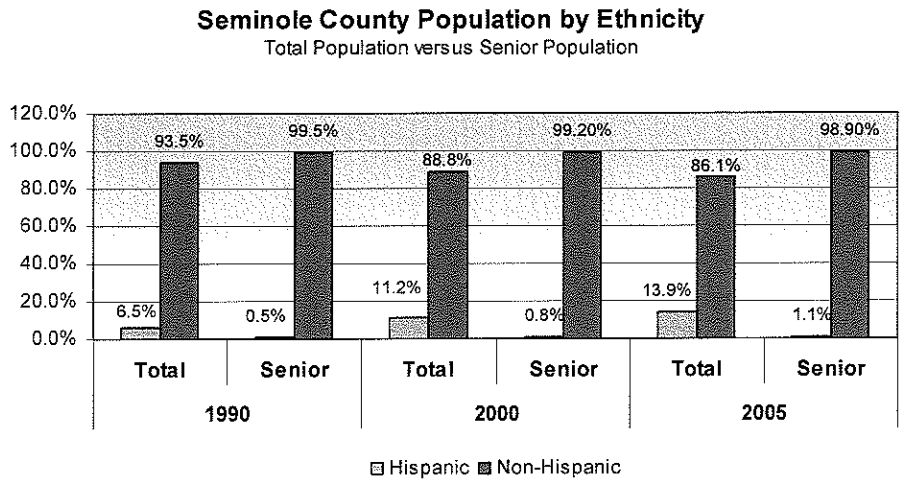
	1990		2000		2005	
Race	Total Population	Senior Population	Total Population	Senior Population	Total Population	Senior Population
Asian	1.7%	**0.6%**	2.5%	**1.4%**	3.4%	**1.5%**
Black	8.5%	**7.5%**	9.5%	**7.2%**	9.5%	**7.5%**
White	88.2%	**91.3%**	82.4%	**90.1%**	80.2%	**87.7%**
Other	1.4%	**0.5%**	3.1%	**1.1%**	6.3%	**1.4%**

US Census Bureau

It is interesting to note that the percentage of the White population increased with age and the percentage of other racial groups decreased with age. This table above also shows a shift in the racial composition that has occurred over the past fifteen years.

Ethnicity

The graph below illustrates the increase of the Hispanic population from 1990 to 2005 in Seminole County. The Hispanic population is much younger than the non-Hispanic population. As reported by the 2005 American Community Survey, the median age for a non-Hispanic male living in Seminole County is 40.4 years of age versus 29.4 years of age for an Hispanic male. Hispanic females are slightly older, with a median age of 33.4 years. Non-Hispanic females have the oldest median age at 41.8 years.



Marital Status

- 55.1% of adults age 65 years and older are married
- 2.9% of seniors are either separated or have some other living arrangement
- 2.5% have never been married
- 32.6% are widowed
- 9% are divorced

Basic Needs

Financial status is a significant indicator of access to, and utilization of, healthcare services and fulfillment of other basic needs. Seminole County has a higher per capita and median household income than other counties in the District VII (Brevard, Orange and Osceola) and the State.

Poverty

Despite the county's high standard of living, data from the 2006 Seminole County Profile show that 6.8 percent of Seminole County residents age 65+, more than 4,400 individuals, live below the federal poverty level.* Of the nearly 7,000 county residents 60+ who are eligible for food stamps, only about 23.5 per cent participate in the program.

6.8%
Percent of older adults in Seminole living below the poverty level (4,426 persons).

As of June 2007 some 550 low-income seniors, who have requested social services and been assessed, are awaiting services due to a lack of state and federal funding. The chart below shows the number of low-income seniors receiving services through each of the programs listed. Some individuals may be eligible for more than one program.

Federal or state program – June 2007	Seniors receiving services
Older Americans Act (home-delivered meals, homemaker services, transportation assistance, etc.)	1,722
Community Care for the Elderly	594
Home Care for the Elderly (caregivers)	72
Alzheimer's Disease Initiative	222

*2007 poverty level guidelines define poverty level as an annual income of less than $10,210 per individual or $13,690 per couple.

Health

The following health data were gleaned from the 2004 Community Health Assessment. In an effort to understand the healthcare issues affecting the residents of Seminole County, Florida, a community health telephone survey was conducted in late summer of that year. Respondents, aged 18 and older, were randomly selected. A total of 700 interviews were conducted for this survey. Of these, 108 respondents (15.4%) were age 65 or older. The survey contained 146 questions and took 20-25 minutes to complete. The survey incorporated "Healthy People 2010" measures and health information gleaned from the Health Council of East Central Florida, Inc. and other county-based planning groups. This methodology retains strong benchmarking potential.

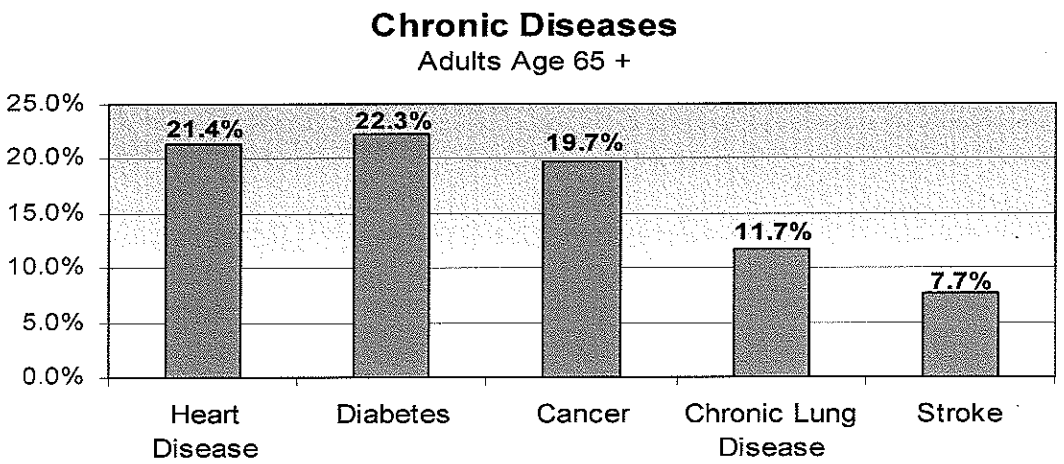
Mental Health

Of the senior respondents surveyed, 6.9% reported that they had been diagnosed by a physician with depression. This is slightly lower than the 7.7% of Seminole County respondents who reported suffering from depression. The survey revealed that of those diagnosed with depression, 22% sought professional help.

Physical Health

Almost 80% percent of respondents age 65 years and older reported that their general health was excellent, very good or good. Of the remaining twenty percent, 11.2% reported fair health and 9.6% reported that their health was poor.

Chronic Diseases



Diabetes was the most frequently reported chronic disease of seniors living in Seminole County. All respondents reported that they were doing something to control their diabetes (taking medication, changing diet and/or exercising). However, 64.6% of senior diabetic respondents reported that they needed help managing the disease. Diabetes

was closely followed by heart disease (21.4%) and cancer at 19.7 percent. Almost twelve percent of adults age 65 and over reported a diagnosis of chronic lung disease and 7.7% reported that they had suffered from a stroke. Many older adults are also afflicted with various other chronic ailments. Arthritis has affected 45.2% of senior's living in Seminole. Osteoporosis and chronic back pain account for 23% and 20.6%, respectively. Almost 19% of respondents reported hearing problems and 12.2% said they experienced problems with vision.

Human Immunodeficiency Virus (HIV)

Florida Department of Health, Bureau of HIV, reported in 2006, that 3.1% of adult's age 60 years and older tested HIV positive. When surveyed in 2004, the sample size of older adults having been tested for HIV was too small to yield significant results. HIV is a growing concern in the older population as their knowledge of the virus and its transmission is far less than younger generations.

3.1%
Percent of Seminole adults age 60+ who tested HIV positive

Additionally, with the advent of new medication for sexual dysfunction coupled with a longer and healthier life span, seniors are more sexually active and outreach prevention should focus on this population group.

Oral Health

Many older adults (60.5%) in Seminole County have been to the dentist in the past six months for some procedure. A total of 71% have seen a dentist within the past twelve months. Regrettably, 13.3% have not seen a dentist for the past five or more years.

Emergency room utilization

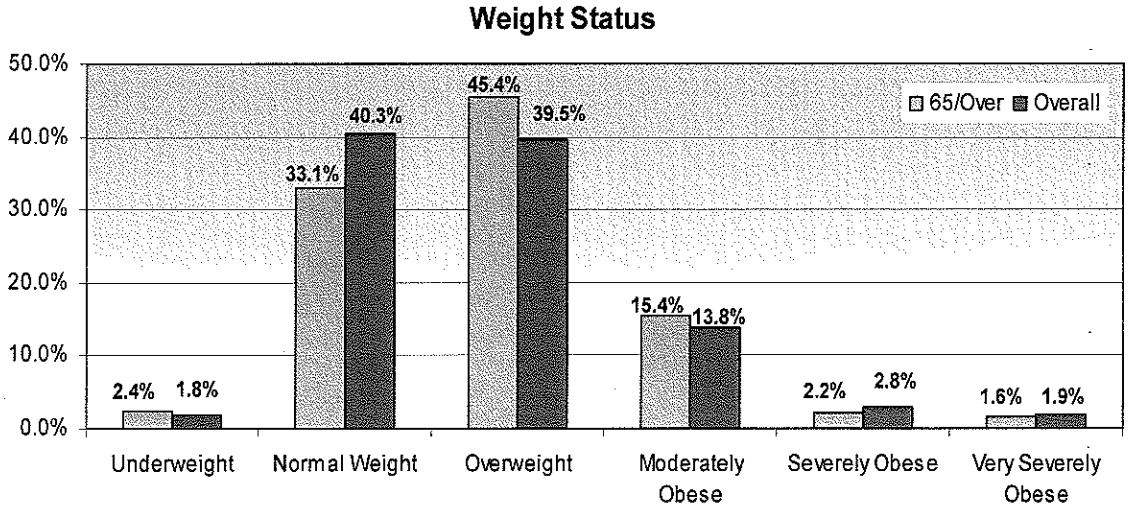
Over 13% of seniors accessed the emergency room at least once during the past twelve months. The majority of respondents reported the ER visit was for something that could not be treated in a doctor's office.

Immunizations

The best way to prevent the flu or lessen its effects is to get a flu shot. According to the 2004 Community Health Assessment, 37.9% of seniors living in Seminole County did not get a flu shot within the past twelve months. Only 64.5% reported that they had ever had the pneumonia vaccine.

Modifiable Risk Factors

Although genetics play a critical role in disease diagnosis, factors such as controlling weight, eating a healthy diet, exercising, and practicing good health behaviors can help delay onset and minimize complications from some common illnesses.



The National Institute of Health uses the Body Mass Index (BMI) as a measure of body fat based on height and weight that applies for both men and woman. A BMI range of 18.5-24.9 is defined as normal weight. A BMI above 25 is considered overweight and obesity is a BMI of 30 or greater. The chart above shows the weight status of seniors compared to that of the general population. Only 1/3 of the older adults in Seminole are at normal weight. Just over 60% of seniors are either overweight or moderately obese. Only 48.6% of seniors reported eating five or more serving of fruits and/or vegetables daily. Slightly more than one third of older adults ate three or more servings of vegetables and 65.2% ate two or more servings of fruit in an average day. This is somewhat higher than the percentage reported by the general population, of which 34.9% reported eating five or more servings of fruits/vegetables in a single day.

Participating in moderate or vigorous activities has health benefits as well. Over 33% of seniors reported that they get vigorous exercise for twenty minutes or more, three days per week. Only 14.4% of older adults partake in moderate exercise for thirty minutes a day, five days per week.

Just over 60%
Percent of Seminole County seniors who are either overweight or moderately obese.

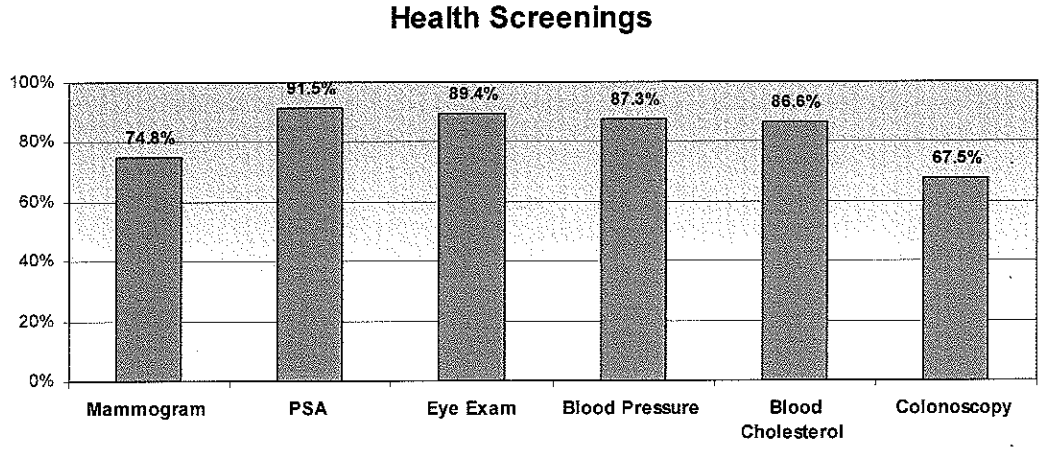
The negative effects of smoking and abusing alcohol are well known. Less than 8% of Seminole seniors reported smoking regularly. Chronic drinkers are defined as those who have had sixty or more drinks of alcohol in the past month. In Seminole, 7.3% of seniors classified themselves as chronic drinkers.

Alzheimer's Disease

The 2006 County Profile estimates over 6,000 individuals with probable Alzheimer's Disease reside in Seminole County.

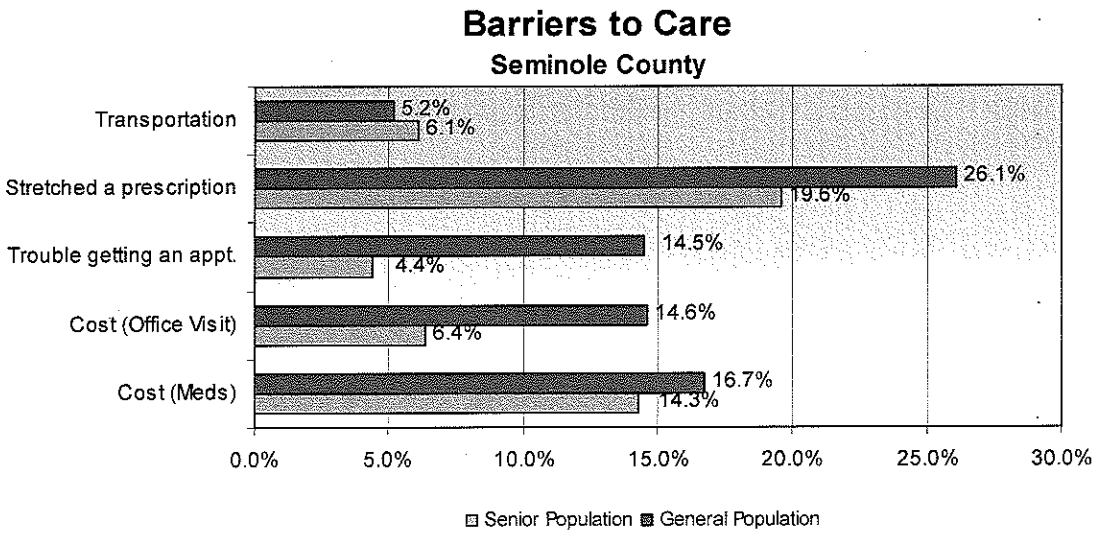
Health Screenings

Many older adults are getting regular health screenings, as seen from the results of the Community Health Survey, conducted in 2004 in Seminole County. Ideally, more seniors should be receiving regular sigmoidoscopy/colonoscopy screenings.



Access to Health Care

The 2004 Community Health Survey revealed that 6.5% of persons age 65 and older did not have Medicare coverage. Some 19.6% of seniors reported stretching a prescription. The graph below depicts the survey results of all the barriers to care encountered by senior adults living in Seminole County.



SHINE (Serving Health Insurance Needs of Elders), a service of the Department of Elder Affairs, trains volunteers to provide objective health insurance counseling to seniors. In 2006 SHINE volunteers responded to 595 requests for assistance from Seminole County residents.

Safety

Accurate information about crimes against seniors is not easy to obtain or verify, since privacy laws generally protect information about incidents of abuse or violence. The 2004 Community Health Survey, conducted by the Health Council of East Central Florida, found that one hundred percent of senior respondents reported that they have not been victims of a violent or domestic crime within the past five years. However, the Department of Children and Families Abuse Hotline recorded 426 calls of suspected abuse, neglect or exploitation of older adults in Seminole County between June 1, 2006 and June 1, 2007. In the same time period, the Seminole County Sheriff's Office reported 59 crimes against persons over 60 in unincorporated Seminole County.

In the Communities for a Lifetime (CFAL) Senior Questionnaire completed by some 300 Seminole seniors in 2007, nearly 93 percent of those polled believe their neighborhoods are safe, with only four percent answering they did not feel safe in their neighborhoods. When asked if they feel they can rely on local law enforcement, fire department and paramedics to assist them when needed, 96 percent responded positively, while only 3 percent answered negatively.

426
Number of calls in one year to the Abuse Hotline reporting suspected abuse, neglect, or exploitation of elders in Seminole County

Home and Neighborhood

One out of every five residents of Seminole County age 60 and older, nearly 14,000 in all, live alone. As individuals age, living alone can lead to isolation and put frail elders, without a live-in caregiver, at greater risk. Additionally, over 2,300 older residents live in rural areas, where access to basic services may be more difficult to access. In the CFAL Senior Questionnaire, nearly eight percent of adults age 60+ report caring for a family member or friend with a chronic illness or disability. While the presence of a reliable caregiver can greatly enhance the well-being of an older person, full time caregiving, particularly by spouses and adult children, can take a toll on the caregiver's health over time. A growing trend is the increase of older adults caring for youngsters. Over 3 percent of Seminole County grandparents are responsible for their grandchildren under age 18.

When asked in the CFAL Senior Questionnaire about the condition of their homes, 91.5 percent of respondents said they believe their residences are in good condition, while 7.4 percent do not. The Questionnaire also revealed that 17.6 percent of older adults believe their housing costs are too high, while the majority, nearly 73 percent, feels they are reasonable.

Transportation

Motor vehicle safety is a major community concern as adults age. Over 17 percent of Seminole County drivers with Florida driver's licenses, over 59,000 people, are age 60+ and over 3,500 of those are age 85+. A 2005 report by the Winter Park Health Foundation states, "Age alone is not a valid predictor of driving performance, but it is a marker of increased levels of risk to the driver. The commonly held belief that senior drivers present a significant risk to others is not supported by research findings. To the contrary, seniors who are involved in a crash are much more likely to be seriously injured or to die than is the case for younger cohorts." In 2006, Seminole County Traffic Engineering data show, some 1,688 vehicle crashes involved drivers age 62+; three fatalities resulted from those crashes. Fortunately, over 94% of Seminole seniors reported in the 2004 Community Health Survey that they wear their seat belt at all times while driving.

When the CFAL Senior Questionnaire asked, "Do you feel the roadways are safe and easily driven?" responses were nearly evenly divided. About 39 percent of the respondents felt the roadways are safe and easily driven, while about 37 percent do not think so. Six in ten seniors polled believe that road signs are visible and helpful, while 15 percent do not find them so. For older adults who do not drive a car, about one quarter rely on family and friends for mobility. Less than five percent use any of the following modes of transportation: walking, riding the bus, taking a taxi or other means of transportation.

4 in 10
Number of older drivers in Seminole who said the county's roads are NOT safe and easily driven.

Social and Community Involvement

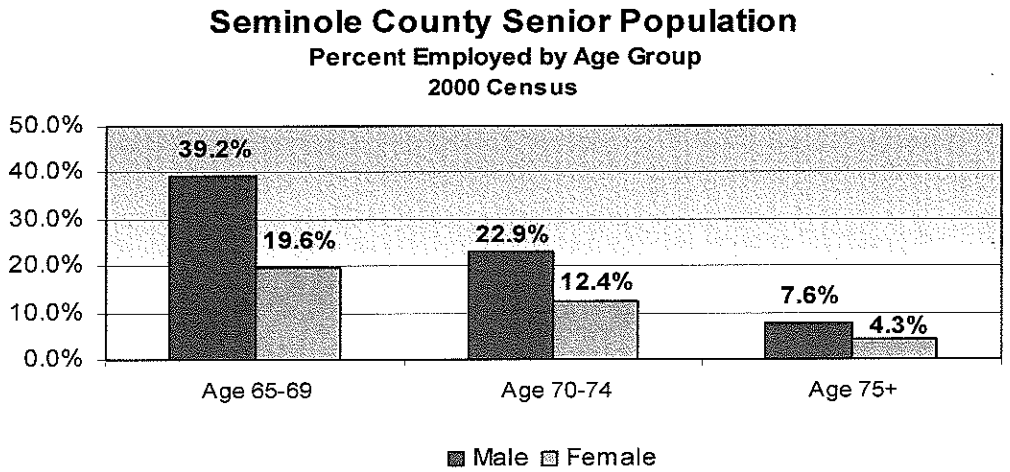
This discovery area encompasses a wide range of sub-topics including: civic, recreational, cultural, educational and social opportunities for seniors; volunteerism; employment of older workers; intergenerational activities; faith-based initiatives; and elder-friendly businesses.

Civic Involvement

Over 20 percent of Seminole County residents who are registered to vote are age 60 or older; this is significant since adults 60+ make up only 15 percent of the county population. Older adults also display their civic-minded values through involvement on many County and municipal boards and committees, as well as neighborhood associations. The County's 2006 annual report estimates that Seminole County is home to over 40,000 military veterans.

Workforce Composition

In 2000, over fifteen percent of Seminole County adults, age 65 years and older, were in the labor force and employed. As expected, the percentage of seniors in the workforce decreases with age. A higher percentage of older males stay employed for a longer period of time then did their female counterparts.



Volunteerism

A State of Florida study examined the effect of elder residents on the state and determined that seniors give more to their communities than they cost in services. The positive impact of older citizens can be measured in a variety of ways: taxes paid for local schools, purchasing power, donations to charities, and, in a big way, volunteerism. In the CFAL Senior Questionnaire, over 50 percent of respondents said they volunteer to help a school, religious congregation, or other charity. One of the largest volunteer organizations in Seminole County, the Retired and Senior Volunteer Program (RSVP), estimates that in 2006 their members contributed over 123,000 hours of service to over 80 nonprofit organizations. Based on an estimated value of $12.25 per volunteer hour, determined by the Points of Light Foundation, Seminole County seniors contributed the equivalent of over $1.5 million in services to children, elders, and others.

Socialization

Regular social activities, as well as participation in cultural and educational opportunities, help older adults stay active, involved, and mentally sharp. Social interactions with peers and across generations help elders feel valued and minimize isolation, which is often a precursor to depression. While over 80 percent of elders completing the CFAL Senior Questionnaire said they get together with friends or neighbors to socialize at least once a week, a sizeable number, over 16 percent, do not. When asked if they attended any educational activities (e.g., classes, lectures, etc) in the past month, only about 37 percent of seniors responded positively; nearly two-thirds had not attended educational activities.

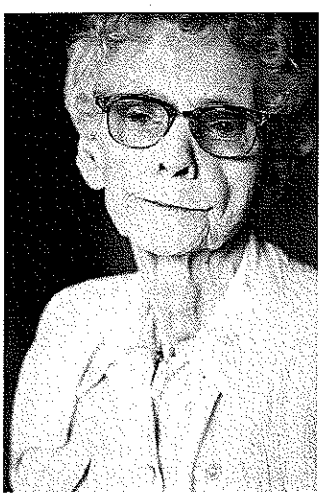
Community Assessment: Community Profile

This section of the Community Assessment will outline some of the services available in each of the discovery areas. This is not an all-inclusive list; while many opportunities exist, not all could be identified in the timeframe the Task Force on Aging had to complete its work. All discovery areas will require additional research, as well as increased coordination and communication among the county, Seminole cities, and public or private agencies serving older adults.

Basic Needs

Ensuring that healthy food, adequate housing, and other basic needs are met, particularly for elders living below or near the poverty level, is a critical need that must be addressed. Indeed, as housing and health care costs rise, even seniors of modest means, on a fixed income, are experiencing increasingly difficult choices, such as paying for food or filling much-needed prescriptions.

The primary organization in Seminole County charged with addressing these needs is Meals on Wheels, Etc., a long-standing agency that operates through federal funding authorized under the Older Americans Act and private donations. Meals on Wheels, Etc, best known for home-delivered meals, also provides noonday meals at seven sites around the county. Additionally, the agency offers transportation, chore and home repairs, and homemaking services. A second organization focused on assisting low income seniors is Visiting Nurse Association/CCE (Community Care for the Elderly), which provides a variety of services, and relies on state and private funding.



Both organizations have long waiting lists of low income seniors who have been assessed, but can not receive services due to inadequate funding. From July, 2007 through the end of the year, no additional clients can receive services until another senior citizen dies. Some 550 older adults are waiting; some will die waiting to receive as little as $6000 a year in basic services that could have kept them alive and healthy in their homes.

The value of home and community based services, versus institutionalization, has been well documented; not only is it significantly less expensive to help seniors remain in their homes for as long as possible, but it keeps communities and families intact. Even as Seminole County continues to thrive economically and culturally, pockets of severe need exist, mostly in Sanford, East

Altamonte, and central Oviedo. Local community efforts, along with initiatives by faith-based and charitable organizations, will be essential to ensuring that our seniors, particularly the fast-growing 85+ population, remain healthy and comfortable.

Health

Hospitals

There are currently three hospitals located in Seminole County: Florida Hospital Altamonte, Orlando Regional South Seminole and Central Florida Regional Hospital. Only Central Florida Regional Hospital has a skilled nursing unit with a total of 18 beds. The Florida Hospital system and Orlando Regional Healthcare operate hospitals in nearby Orange County that are accessed by Seminole County residents.

Florida Hospital Altamonte is a full-service, 269-bed, acute care community hospital and offers a variety of medical services.

Florida Hospital Altamonte Services

- Cancer
- Cardiac & Neurodiagnostic
- Emergency
- Endoscopy
- Maternity
- Women's Medicine
- Outpatient
- Pain Medicine
- Radiology
- Surgical
- Sleep Disorder

Orlando Regional South Seminole Hospital is an acute care community hospital with 126 beds. South Seminole offers a full range of healthcare services to the residents of Seminole County.

Orlando Regional South Seminole Hospital Services

- 24 Hour Emergency Care
- Behavioral Health
- Cardiovascular Imaging Center
- Cardiac Rehabilitation
- Progressive & Critical Care
- Pulmonary Wellness
- Outpatient and Same-day Surgery
- Home Health Care
- Women's Services
- Wound Care

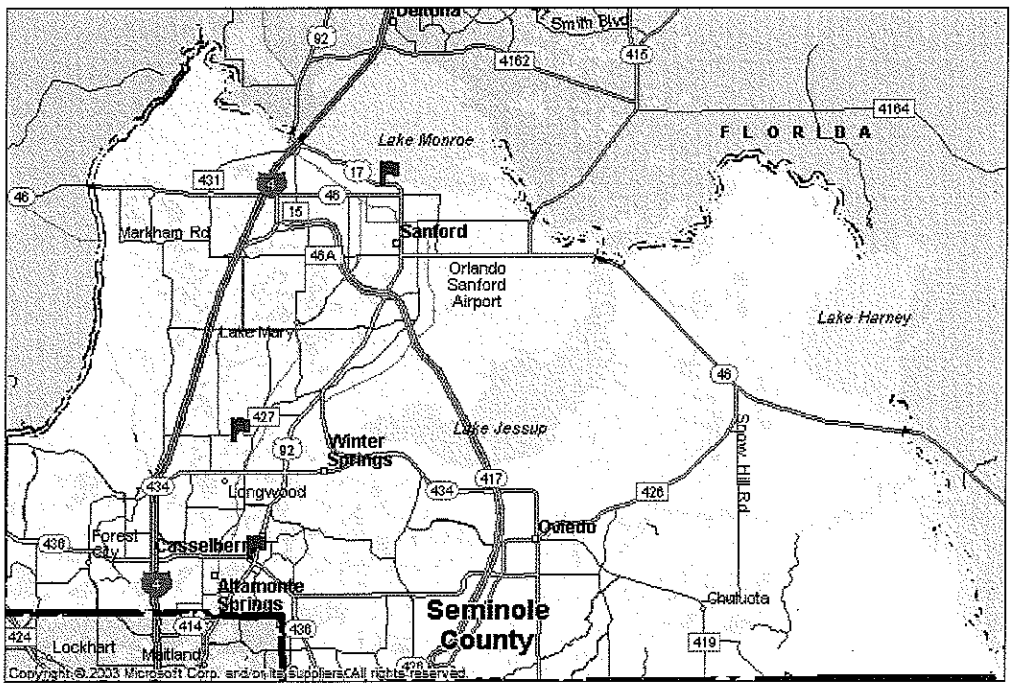
Central Florida Regional Hospital offers a wide range of state-of-the-art medical services designed for prevention or early detection of healthcare problems. It is the only

open-heart surgical program in Seminole County. This 344-bed facility also offers a full range of services.

Central Florida Regional Hospital Services

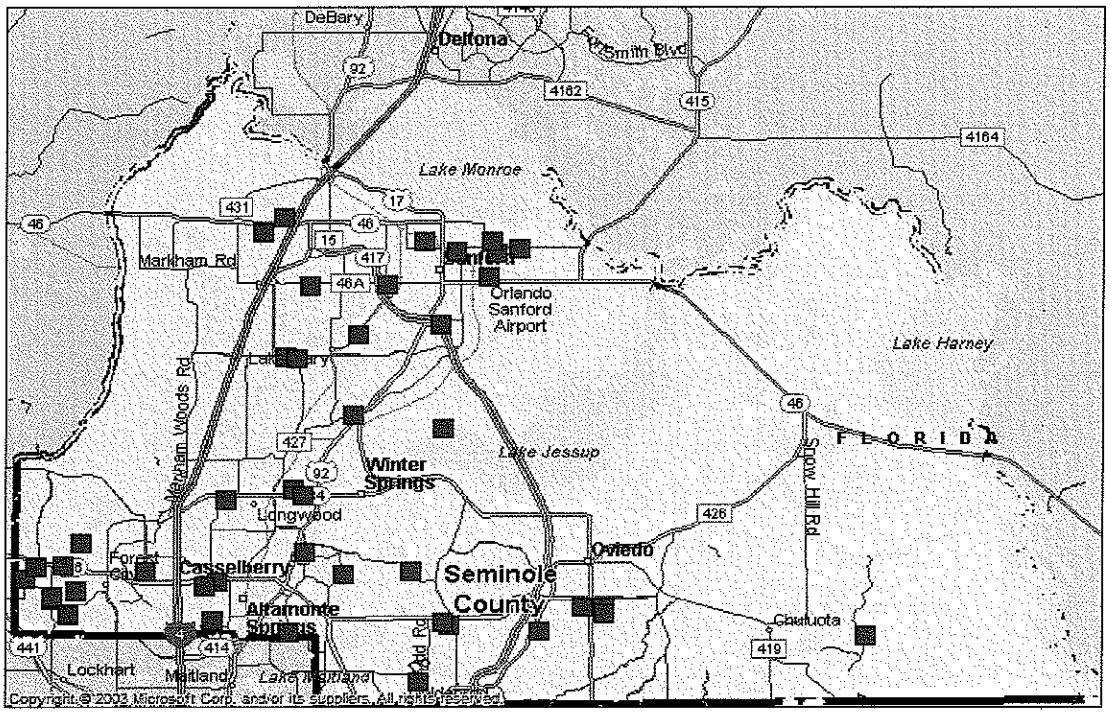
- Cancer
- Cardiac
- Company Care
- Diabetes Education
- Laboratory Services
- Rehabilitation
- Skilled Nursing Unit
- Surgical
- Health Information Management
- H2U-Health, Happiness, You
- Hyperbaric Medicine & Wound Care
- Imaging and Outpatient Network of CF
- Neurohealth Sciences Center
- Skilled Nursing Unit
- Sleep Disorders Laboratory

The illustration below shows the location of the three hospitals in Seminole County, all of which are located west of Highway 417. Population growth in the east side of the county suggests that a hospital is much-needed to serve the needs of this area. While a certificate of need has been issued for a hospital in the Oviedo area, no firm plans are yet underway. With population and traffic increases in the county, the travel times to an existing hospital from the eastern half of the county have risen, jeopardizing the well-being of critically ill or injured residents.



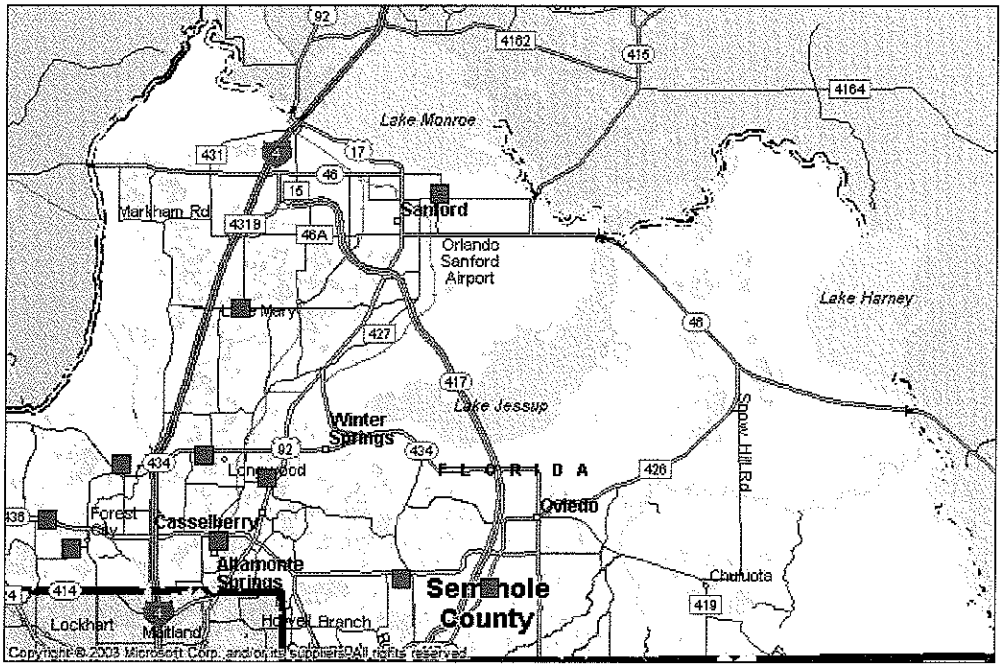
Assisted Living Facilities

In Seminole County there are forty-five assisted living facilities with a total of just over 2000 beds. Capacity ranges from 5-185 residents per facility. Assisted living facilities provide residential care to older adults that need some help in activities of daily living, such as bathing and dressing. The illustration below shows the locations of the assisted living facilities in Seminole County.



Skilled Nursing Facilities

As the map below illustrates, there are ten skilled nursing facilities (nursing homes) in Seminole County for a total of approximately 1200 beds. Skilled nursing facilities provide 24-hour nursing care to individuals who can not care for themselves. As of 2006 the occupancy rate for these facilities was 95 percent with about 61 percent of them Medicaid funded.



Other Health Care Services and Facilities

Other health-related services and facilities are shown in the chart below; these data are based on 2006 records from the Florida Department of Elder Affairs.

Service/Facility	Number	Capacity
Adult day care facilities	2	52
Adult family care homes	8	40
Home health agencies • Medicare certified • Medicaid certified	14 5 4	
Home and companion service agencies	21	

These data highlight the need for additional adult day care facilities to be located throughout the county. Of the two existing programs, one is located near Oviedo and one in Altamonte Springs. As the elder population expands, adult day care is a proven community-based solution that provides respite for caregivers and a safe, stimulating, social environment for elders.

Safety

The safety of Seminole County seniors is a high priority, and the county has distinguished itself in the state as an elders advocate. Seminole County is the only county in Florida that has an Elder Intervention Team. This 18-member team is specifically trained to identify and respond effectively to vulnerable adult issues. All elder crime cases are processed through the State Attorney's Office, 18th Judicial District, Seminole County Office. The Elder Crime Unit has one prosecutor and one investigator; there were no prosecutions between June 2006 and June 2007.

The Seminole County Sheriff's Office has a full time Elder Issues Specialist that coordinates and assists all seven cities and county jurisdictions for law enforcement and fire/medical responders. The Elder Issues Specialist and Elder Intervention Team are available 24/7 for crisis situations or emergencies related to vulnerable adults. The Sheriff's Office has addressed one incident of abuse, neglect or exploitation per week for the past year. These cases required intervention through Adult Protection Services of the Department of Children and Families, provision of basic services, or enforcement (e.g., relocation of the elder, arrest of the perpetrator).

Some of the services and programs of the county's Elder Services Unit include:

- Maintaining a database of "at risk" seniors and vulnerable adults so that they can intervene quickly if an adult wanders from home or becomes incapacitated
- Supplying emergency information cards for home or car that alert first responders to any special medical conditions of the person
- Offering reassurance phone calls to homebound seniors who live alone
- Making presentations to community groups on a wide range of topics

Seminole County also actively participates in Triad, a national organization, which is a partnership of seniors, law enforcement, state attorneys, first responders, criminal just personnel, and community organizations. They come together to address the issues and concerns of senior citizens under an agreement between the National Sheriff's Association, the International Association of Chiefs of Police, and AARP. Seminole County Triad works on such issues as personal safety, health concerns, transportation needs, crime prevention and education on important topics. They sponsor seminars, host forums to help identify problems and develop

community-wide solutions, and reach out to homebound seniors to reduce fear and increase peace of mind.

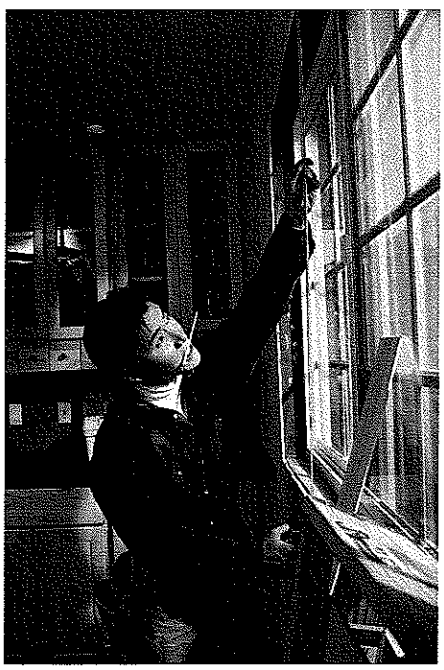
When hurricanes or other disasters occur, the county activates its emergency plans, which include a network of shelters for individuals with special needs, including the elderly. It is a voluntary program intended primarily for those who live at home with special medical needs and have no alternative such as family or friends in the area. Participants who qualify must register in advance with the Emergency Management Division.

Home and Neighborhood

Housing

Growth, economic conditions, and changing demographics are altering the housing landscape in Seminole County. Older adults have a cause and effect relationship with these changes. Many residents in their 50's and older are downsizing from free-standing family homes, making townhomes, condominiums, and other smaller housing units more popular. At the same time, housing prices have increased substantially in recent years, causing a negative impact on low-wage earners and those on fixed incomes. Older adults who choose to remain in their aging family homes may find it difficult to maintain them due to their own physical limitations or lack of funds.

Through its Community Services Department, Seminole County offers the Special Needs Home Modification Program. It provides financial assistance for eligible elderly and/or disabled persons who need home modifications, such as grab bars or a roll-in shower, in order to maintain their independence. In addition to a free inspection, participants can receive a deferred paid loan and other services. Specific guidelines apply and funds for this program are limited. Meals on Wheels, Etc. can provide home repair assistance to low income seniors, when they are eligible and funds are available.



Emergency home energy assistance is available to low income elders who meet the criteria through a state program called EHEAP. This program is administered for the Department of Elder Affairs through the Area Agency on Aging of Central Florida, the Senior Resource Alliance.

Housing and Neighborhood Development Services of Central Florida operates several programs that assist residents in locating affordable housing and educational programs for first time home buyers. Their website, www.cflhands.org lists only two affordable senior apartment complexes in Seminole County. Local governments would be wise to work closely with developers and other private entities to develop strategies to meet the area's affordable housing goals, establish a "home repair trust," and ensure new residential development incorporates universal design principles.

Caregiving

Home is commonly understood, not only as a safe and comfortable domicile, but a place where there are people that care about us and can care *for* us, when we need it. One of the key markers of successful aging is access to a caregiver, usually meaning proximity to family, friends, neighbors, and faith congregation members who are willing to help an elder with socialization needs, transportation, and activities of daily living.

The aging network has long recognized the importance of providing assistance to full-time, home-based caregivers in order to prevent their decline. Assistance for caregivers takes several forms, including: cash assistance to defray out of pocket expenses uncovered by Medicare; education on caring for the elder and oneself; support groups; respite care and adult day care programs that give caregivers a short break to take care of personal matters and recharge their own spirits.

Services for caregivers are available in Seminole County, but there's a great need for more. Faith communities occasionally offer educational programs and respite, under programs like "Community Care Teams," "Helping Hands," etc. Only two adult day programs are available in Seminole County, one in Oviedo and one in Altamonte Springs. Support groups and respite are offered by organizations such as the Alzheimer's Resource Center and Alzheimer's Association, both based in Orange County. Unpaid, family caregivers are a critical link in elder care and save taxpayers billions of dollars each year. More must be done, at all levels of government, to ease the burden of family caregivers.

Transportation

For seniors, mobility is the key to continued independence. Having the ability and freedom to drive, particularly in a "bedroom" community such as Seminole County, is so highly valued by older adults that some continue to drive beyond their capability to do so safely. Other seniors, recognizing their growing limitations, self-monitor their driving—meaning they drive in daylight in familiar surroundings close to home. A one mile distance to the pharmacy or grocery, when a senior can no longer drive, can seem like an impassable chasm; lack of mobility can trigger a decline in health and isolation with resulting depression. Experts in senior transportation typically address the problem in three ways: safe driving, safe roadways, and alternate forms of transportation.

Safe Driving

AARP and other organizations periodically offer driving classes for adults 55+. As the normal changes of aging—in vision, reaction time, and flexibility— begin to occur, drivers must adapt their driving skills. Programs like AARP's help drivers become aware of the adjustments that may be necessary to maintain safe driving into their elder years. When family members of older adults notice that they are experiencing changes in memory or cognitive abilities, a driving assessment is recommended. These computer-based and on-road driving assessments can be scheduled through the Senior Resource Alliance at any of three sites in Orange County. There are no Seminole County sites at this time.

Safe Roadways

Improvements in Seminole County roadway signage, road markings, and intersection design benefits all age groups, but especially senior citizens. Larger, better lit signs and advance signage for major intersections are easier to read and help prevent dangerous, last-minute maneuvers. Likewise, enhanced pedestrian crossing signals minimize traffic dangers for all ages of walkers. Seminole County and its municipalities have implemented many of these roadway improvements, and this progress must continue. One group in Seminole County government that addresses these issues is the Community Traffic Safety Team. The CTST is comprised of members from city, county and state agencies, as well as business representatives and private citizens. The mission of CTST is to reduce the number of fatalities, injuries and the severity of injuries due to traffic crashes in Seminole County. The CTST is encouraged to work closely with Triad and other groups representing seniors' interests to ensure senior input is incorporated into their plans and activities.

Transportation Options: Alternatives to Driving

One of the reasons seniors cling to their driving privileges so forcefully is that they realize that alternatives to driving are severely limited, inconvenient and/or expensive. The Florida Department of Transportation estimates that only 1 percent of the state's senior population utilizes public transportation. This fact was confirmed in the recent CFAL Senior Questionnaire.

The senior transportation dilemma can not be solved with a "one size fits all" solution. Several new initiatives, spearheaded by the Winter Park Health Foundation, are underway in Orange County and have begun to make in-roads in Seminole County. One of these is a faith-based, volunteer initiative called Community Care Teams, started eleven years ago at St. Margaret Mary Catholic Church in Winter Park. The program is still operating successfully, and the process has now been implemented in several churches, including three churches in Seminole County.

Another promising new senior transportation option is ITNOrlando, a replication of the successful Independent Transportation Network of Portland, Maine. Rides in private vehicles are provided, at a reduced charge, to members of ITNOrlando. The nominal membership fee offers riders door-to-door pick up and delivery to sites within ITNOrlando's designated service area. Currently, the service area includes portions of Casselberry, Altamonte Springs and Longwood. Utilizing both paid and volunteer drivers, ITNOrlando's expansion plans depend on recruiting additional volunteer drivers, members, and private donations.

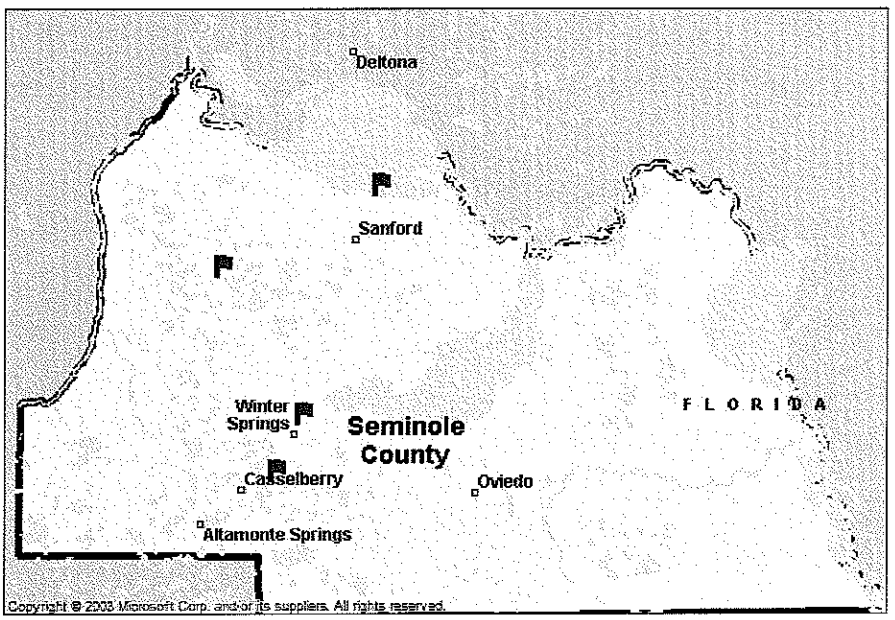
As longevity increases, greater numbers of older drivers will be on the roads. More must be done to help seniors safely transition to driving in their later years and to transition to viable alternatives when driving is no longer recommended.

Social and Community Involvement

For many seniors in Seminole County life is full of opportunities for staying active, mentally and physically, as well as giving back to the community through employment or volunteerism. Even older adults with limited mobility or income can find opportunities to stay involved through senior centers, civic and community organizations, and religious congregations. Numerous studies of aging confirm that staying active is the key to staying well and living a better quality of life.

Senior Centers

The four senior centers in Seminole County are busy, vibrant places. The centers in Sanford, Casselberry, Lake Mary and Winter Springs are each operated by their respective cities, with funding provided by a variety of sources, including Seminole County government. Two other cities, Altamonte Springs and Oviedo, provide some senior programming, but do not have a dedicated facility. As the map below shows, the eastern part of the county appears to be in need of a senior facility in closer proximity to that area's growing population. While attendance at the existing four centers is not limited to city residents, the distance to them is a barrier to many seniors who lack transportation.



Senior centers are a vital piece in the elder care puzzle, because they serve as a kind of "one stop shop" for senior needs—from socialization and physical exercise, to health screenings and nutritious meals, to educational classes and volunteer or intergenerational activities. For low income seniors and those with limited mobility, the centers may be their primary outlet and link to assistance and access to services. As longevity increases, senior centers find themselves serving at least two "generations" of seniors, with different needs, attitudes, and interests. The challenge for senior centers is to remain attractive to both groups and to tailor activities and programs that meet the needs of each.

Employment, Volunteerism, Educational Opportunities

Over half of Seminole seniors volunteer their time, and there is no shortage of opportunities for them to do so. Activities range from serving on a city board or neighborhood association, to crocheting blankets for hospitalized children, to mentoring a young adult

needing guidance. Civic and community involvement are excellent ways for older adults to continue utilizing their skills and abilities for the betterment of their communities. The Retired and Senior Volunteer Program offers many opportunities as do Seminole County Public Schools' D-V-DENDS program and religious congregations.

While numerous opportunities exist for seniors to give back, finding employment as an older adult can be difficult. More and more adults age 50 and older are finding either the necessity or inclination to continue working past the traditional retirement age. For those whose skills need updating, Seminole Community College offers a wide variety of classes through its Senior Adult Learning Institute (SALI). Both credit and non-credit courses available through the College can assist older workers in updating and sharpening their workplace skills. A partnership with Seminole Community College that specifically targets helping older workers find suitable employment would be a great boon to Seminole seniors who wish to continue working.

Conclusion

The proverbial "light at the end of the tunnel" may be, as the old saying goes, "an oncoming train." Without action, this could be the future Seminole County is facing, as the "oncoming train" of baby boomers approaches retirement age. The demographics are a fact, but the County's response now will shape its future. What's needed is nothing less than a new view of aging that recognizes the opportunities, as well as the challenges, that lie ahead. The majority of Seminole County's older adults are healthy, mobile, and financially stable. The County must find ways to harness seniors' energy, talents, purchasing power, and influence, so that they choose to remain here and help shape a vibrant community.

At the same time, the County must step up its efforts to ensure a safety net for the relatively small number of frail, vulnerable elders who have few other options. This is a shared responsibility; state agencies, municipal governments, not-for-profit service organizations, the business community, and concerned citizens must come together to fashion a broad-based coalition of care. The County is uniquely positioned to convene this initiative by establishing a Commission on Aging and dedicating a committed resource to ensuring that the existing services and opportunities for seniors are fully utilized through better coordination and public information. When financial resources are stretched, as they are currently, true leadership, collaboration and creative problem solving become essential.

If isolation of seniors is the biggest problem, let's mobilize well elders and others to provide transportation alternatives that keep elders healthy and involved in the community. If managing chronic disease is a problem, let's establish linkages between our health care resources and senior centers to make them "well clinics" that emphasize prevention. If lack of appropriate senior housing is an issue, let the County establish new guidelines and incentives for residential development that encourage builders to adopt "universal design" principles. Addressing the issues of aging can not be solved with money alone— it does not require "extras"—it requires doing what we would do anyway with an awareness of and forethought to how it will impact citizens of all ages. When road signs must be replaced, why not replace them with signs that have larger, brighter lettering? The cost difference is minimal and the benefits impact, not only seniors, but new drivers and visitors as well.

Communities for a Lifetime principles provide a framework for considering all decisions with an age-sensitive lens—one that envisions communities that are livable and safe for residents throughout the life cycle.

Recommendations

The Seminole County Task Force on Aging arrived at the following recommendations through discussion and consensus. Every effort has been made to be sensitive to the funding challenges currently faced by Florida counties and cities, while at the same time recognizing the commitment the County made to its older residents when it adopted the Communities for a Lifetime resolution. Many of these recommendations are possible for little or no cost to the County. Other recommendations must be addressed by a broader coalition of partners with leadership from the County. The recommendations are grouped by looking first at administrative and operational objectives; later recommendations focus on the specific discovery areas.

Administrative and Operational

1. **Establish a Commission on Aging as a standing advisory committee of the Board of County Commissioners.**

   The purpose of the Commission on Aging would be to serve as the link between the Board/County Government and the older residents of Seminole County. Working from the data and recommendations in this report, the Commission on Aging would fill several roles, including: sponsoring opportunities for residents to get involved in building a more elder-friendly community; launching public awareness campaigns to let county residents know about existing services; convening interested partners in the governmental, social service and business sectors to work together on initiatives of mutual interest; seeking research and community discussion on specific topics of concern; and working with state and local legislators to keep them apprised of elder needs and aging issues.

   Seminole County is the only county in the district (Orange, Osceola, Brevard) that does not currently have an official committee of the Board focused on senior issues. While the county does have some excellent programs and services for older adults, these programs are not widely known by older adults, and they are not well coordinated. Seminole County lacks a focal point and clearinghouse for senior-related information and services. A critical role of the Commission on Aging would be to close the information gap and serve as a convener for senior-related programs and services, so that duplication can be avoided and existing programs can be better utilized.

   Appendix F contains an overview of the Brevard and Orange Commissions on Aging, their membership, missions and staff support

2. **Authorize staff support for the Commission on Aging to enable it to work effectively.**

In researching how Commissions on Aging in other counties have accomplished their goals, all have emphasized the necessity of having some form of staff support to enable the Commission to carry out its work. The number and type of staff support varies, as outlined in Appendix F. The Seminole County Task Force recommends a *minimum* of .5 FTE, in the form of a professional level individual familiar with aging issues, dedicated to the Commission on Aging; this individual will need access to regular administrative support.

Public Awareness and Involvement

1. Encourage all Seminole cities to pass the Communities for a Lifetime resolution and to develop action plans for implementing activities that support their CFAL commitment.

2. Conduct aging sensitivity training for all County staff that interact with the public.

3. Update the County website with a special section for senior-related information, such as services and how to access them, senior housing and transportation options, senior center locations and programs, etc.

4. Dedicate some air time on SGTV to broadcast senior-related programs, available at no cost from the Orange TV/Orange County Office on Aging.

5. Publicize the availability of 2-1-1 on the County website and in County publications. 2-1-1, which operates under the auspices of the Heart of Florida United Way, provides information and referral on all social service resources in the tri-county Metro Orlando area, including Seminole County. County Government departments and social service providers should be encouraged to submit an agency profile to 2-1-1 to be included in its database of service providers.

Basic Needs

Minimize, as much as possible, funding cuts to existing senior programs in the county.

Health and Safety

1. Encourage continued and increased cooperation among County departments, the Sheriff's Office, and others working with vulnerable adults to better utilize existing resources and further improve response processes.

2. Sponsor and/or support senior health fairs, health screenings, and other community efforts focused on preventing illness and injury among older adults, particularly with regard to communicable diseases and HIV prevention.

Home and Neighborhood

1. Initiate a review of the County's comprehensive plan and land development code to allow construction of accessory dwelling units that enable elders to live in close proximity to family caregivers.

2. Encourage developers of new residential construction to set aside units that have barrier-free construction and amenities that will accommodate seniors as they age.

3. Establish a "home repair trust fund," using a portion of development fees, which will help qualified seniors to modify their existing homes to make them barrier-free or make necessary repairs to their aging dwellings.

Transportation

1. Support efforts to establish alternative modes of transportation for seniors in the county.

2. Implement elder-friendly roadway designs and signage, as outlined in Department of Transportation guidelines.

Social and Community Involvement

1. Support efforts to establish a new senior center to serve the growing eastern side of Seminole County.

2. Encourage the Seminole Regional Chamber of Commerce to collaborate with the County and senior-related organizations to establish guidelines for designation as a senior-friendly business.

Appendix A:
Communities for a Lifetime Resolution

Item # ____

SEMINOLE COUNTY GOVERNMENT
AGENDA MEMORANDUM

SUBJECT: Communities for a Lifetime

DEPARTMENT: Community Services **DIVISION:** Administration

AUTHORIZED BY: David Medley **CONTACT:** David Medley **EXT.** 3383

Agenda Date 9/12/06 **Regular** ☒ **Consent** ☐ **Work Session** ☐ **Briefing** ☐
Public Hearing – 1:30 **Public Hearing – 7:00** ☐

MOTION/RECOMMENDATION:

Approve Resolution to enact the Communities for a Lifetime initiative and authorize the Community Services Department to develop, organize and support an independent Task Force on Aging to create an inventory of services and opportunities and report findings to the Board of County Commissioners. County wide

BACKGROUND:

On May 23, 2006, the Board gave directions to bring back a Resolution as the initial step to move forward with Communities for a Lifetime initiative that encourages independence and quality of life for older adults in our community. Also requested, was a plan to establish a start up committee or Task Force of volunteers to begin the self assessment process.

The attached, "Getting Started" plan provides the initial foundation to assemble our local Task Force on the aging and develop a process to inventory, assess, and evaluate the seven Areas of Discovery: physical spaces, transportation, land use, community development, health, education, cultural and social opportunities. The Community Services Department working in partnership with others will identify and assemble those required to provide the leadership for the project. The Department will also act as liaison and staff support and will provide resources as needed.

Reviewed by:
Co Atty:
DFS:
Other:
DCM:
CM:

File No. RCS04

The State of Florida, Department of Elder Affairs will work in partnership with the County and Task Force to provide consultative support and review the completed inventory. Results and findings will be presented to the Board of County Commissioners.

Attachment: Getting Started Plan

RESOLUTION NO. 06_____ **SEMINOLE COUNTY, FLORIDA**

A RESOLUTION OF SEMINOLE COUNTY, FLORIDA, DECLARING ITS SUPPORT FOR THE STATE OF FLORIDA DEPARTMENT OF ELDER AFFAIRS' *COMMUNITIES FOR A LIFETIME* INITIATIVE AND ESTABLISHING A COUNTY-WIDE TASK FORCE ON AGING

WHEREAS, the Board of County Commissioners of Seminole County, Florida supports the State of Florida Department of Elder Affairs' *Communities for a Lifetime* initiative to make Florida a friendlier place to live for people of all ages so that people may be independent as long as possible and remain in their homes and the communities they love; and

WHEREAS, the State of Florida has the highest percentage of elders of any state in the nation and growth projections reveal that Florida's elder population will continue to increase, reaching numbers without precedent in the first part of the 21st Century; and

WHEREAS, to allow all residents to maintain their dignity, security and independence, communities must evaluate, assess and modify local infrastructure to become a *Community for a Lifetime*; and

WHEREAS, the Board of County Commissioners of Seminole County, Florida and the State of Florida Department of Elder Affairs share a vision and responsibility to improve the life of all citizens by enabling preparation for and enjoyment of aging in place throughout the citizens' lives; and

WHEREAS, to achieve our mutual goals, cities and counties should begin to build together a place free of physical, emotional, and social barriers; and

WHEREAS, to accomplish the aforestated goals, Seminole County, Florida intends to establish, organize and support an independent Task Force on Aging as identified in the Attachment incorporated herein, to create an inventory of services and opportunities available to our elder population and subsequently report such findings to the Board of County Commissioners of Seminole County, Florida,

NOW, THEREFORE, BE IT RESOLVED, that the Board of County Commissioners of Seminole County, Florida, will make every effort to first evaluate and later remove all barriers to become *Community for a Lifetime* and in pursuit thereof hereby establishes a Task Force on Aging.

ADOPTED BY THE BOARD OF COUNTY COMMISSIONERS OF SEMINOLE COUNTY, FLORIDA, this _____ day of_____, 2006.

ATTEST:

BOARD OF COUNTY COMMISSIONERS
SEMINOLE COUNTY, FLORIDA

_____
MARYANNE MORSE
Clerk to the Board of
County Commissioners of
Seminole County, Florida.

By:_____
CARLTON D. HENLEY, Chairman

Date:_____

SED/sb
08/21/06

Attachment:
"Communities for a Lifetime"

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COMMUNITIES OF A LIFETIME
TASK FORCE COMPOSITION

The Communities of a Lifetime Taskforce would be comprised of representatives from (but not necessarily limited to) the following agencies, organizations and community representatives.

- Health Care interest (examples)
  - Local Hospitals
  - East Central Florida Health Planning Council
  - Health Department
- Representatives of the housing industry
- Local Area Agency on Aging
- Local Law Enforcement
- State Attorney's Office
- Local Senior Initiatives (examples)
  - Seminole Volunteers
  - Visiting Nurses
  - Meals on Wheels
  - Community Services Network (2-1-1)
- Local Planning and Development Staff
  - County
  - Municipalities
- Faith Based Organizations
- Community Services Staff

Appendix B:
Task Force on Aging Timeline

Date – 2007	Focus/Topics	Outcomes
September 12, 2006	Board of County Commissioners passes Communities for a Lifetime resolution and approves formation of a Task Force on Aging to conduct a community assessment.	• CFAL resolution passed • Task Force on Aging authorized
January 18	Organizational • Task Force mission • Importance of collaboration • Identification of other resources • Election of leaders • Meeting schedule	• Task Force leadership identified • Meeting schedule established • Mission clarified
February 16	Organizational • Scope of community assessment • Similar initiatives in adjacent counties • Discovery areas and community resources with relevant expertise • Time and budget constraints	• Identification of discovery areas • Naming of committee chairs for each area • Focus on future needs and identification of gaps
March 9	Work Plan • Definition of a "community for a lifetime" • Discussion of funding options and resource availability • Work plans and resources provided to committee chairs	• Work plans with timelines • Follow-up discussion to plan resource allocation • Working CFAL definition/vision

Date – 2007	Focus/Topics	Outcomes
April 6	Data Collection • Discussion of role of Health Council in obtaining health and other existing data on seniors • Discussed logistics of administering questionnaires and scheduling focus groups • Discussed the questionnaire and focus group process used in Oviedo • Discussed importance of reaching homebound seniors with the questionnaire as well as volunteers who help seniors	• Follow-up discussion to define scope of work and contract for Health Council • Adopted Oviedo process with appropriate modifications for Seminole County • Task Force members will distribute surveys and contact senior centers to host Senior focus groups
April 20	Data Collection • Presentation on health data for seniors by Health Council • Committee chair reports on activities conducted • Discussed survey data entry • Discussed and planned focus group for health and aging network professionals	• Health Council contracted by Senior Resource Alliance (SRA) to assist with report • UCF intern contracted by SRA to enter survey data • Surveys being collected and focus groups scheduled • Professionals focus group scheduled
May 2	Senior Questionnaires • Administered to seniors gathered for lunch at Winter Springs Senior Center • Due to lack of time, decision was made to distribute and collect surveys, instead of focus group	Collected senior questionnaires

Date – 2007	Focus/Topics	Outcomes
May 16	Senior Questionnaires • Administered to seniors at Casselberry Senior Center • Due to lack of attendance, decision was made to distribute and collect surveys, instead of conducting focus group	Collected senior questionnaires
May 18	Finalizing of Data Collection • Discussion of potential impact of property tax law changes • Health Council presents initial outline for senior health report • Committee chair reports • Final preparations for Professionals focus group	• Some 150 senior questionnaires collected by Meals on Wheels volunteers (surveys total about 300 in all). • Health Council presents report outline.
June 18	Professionals Focus Group • 20 professionals in the health and aging fields participated • Health Council presented key findings from all data sources • Small groups, one for each of the 5 topics, generated suggestions • All participants voted and prioritized the suggestions	• 20 professionals, representing a cross-section of expertise and affiliation with Seminole County, participated. • Some 15 suggestions were identified and prioritized based on importance and feasibility
July 20	Recommendations and Final Report • Revisited original mission and scope of work • Discussed and reached consensus on role and composition of a future Commission on Aging • Discussed format and presentation of final report	• Reached consensus on recommendations to include in report • Reached consensus on format of final report and willingness to review draft and give input

Appendix C:
Senior Questionnaire Results (N=284)

1. GENDER

This survey measured responses from 284 participants, **24.65%** of whom were male, **64.73%** female and **11.61%** who chose not to reveal their gender.

2. CURRENT AGE GROUP

Of these 284 respondents, **1.4%** did not disclose their age. Participation came from people in the following age groups: 50-55 (**2.11%**), 56-60 (**3.87%**), 61-65 (**5.99%**), 66-70 (**8.89%**), 71-75 (**15.99%**), 76-80 (**27.11%**), 81-85 (**19.01%**), and 85+ (**29.92%**).

3. MARITAL STATUS

The majority of the 284 men and women reported to be single (**62.32%**) while **32.74** % reported they were married and **4.92%** did not disclose their marital status.

4. LIVING ARRANGEMENT

51.40% live with others in a house or apartment situation, **41.54%** live alone in a house or apartment, **1.05%** live in a facility for seniors and **5.98%** did not answer this question.

5. IF LIVING WITH OTHERS, WHO ARE THEY?

Of those who live with others, **26.05%** live with a spouse, **13.73%** with their children, **3.52%** with their children and grandchildren, **2.81%** with a spouse and children, **2.11%** with their grandchildren, **1.76%** with friends, **1.40%** with a spouse and their children and grandchildren, and **.35%** reported living with a roommate, with a spouse and grandchildren, or with a child and friend. **44.36** % of the 284 participants did not disclose their cohabitation situation, and **3.16%** responded to "Other", but did not elaborate.

6. PROVIDE CARE FOR A FIREND OR FAMILY MEMBER WITH A CHRONIC ILLNESS OR DISABILITY?

When asked whether they provide care for a family member who has a chronic illness or disability, **86.26%** replied they did not, **7.74%** answered that they are caregivers and **5.63%** did not respond.

7. DESCRIBE YOUR OVERALL HEALTH

44.71% of the 284 seniors report their health as in "good" condition. The remainder said they were "fair" (**36.61%**), "excellent" (**11.97%**), "poor" (**5.28%**). **.35%** stated "fair-to-poor" and **1.05%** did not respond to this query.

8. DO YOU HAVE A PRIMARY DOCTOR THAT YOU SEE AT LEAST ONCE A YEAR?

93.30% of these surveyed seniors have a primary doctor whom they see once per year. Only **4.57%** responded they did not, and **2.11%** did not reply to the question.

9. DO YOU DRIVE A CAR?

63.02% of the contributors drive a car, **34.50%** do not and **2.46%** did not answer.

9a1. IF YES, HOW MANY TRIPS DO YOU MAKE PER WEEK?

Of those who drive, **27.46%** make five-ten trips per week, **18.30%** make less than five trips, **16.90%** make more than 10 trips per week, and **.35%** did not reply.

9a2. DO YOU FEEL THE ROADWAYS ARE SAFE AND EASILY DRIVEN?

Nearly evenly divided, **38.73%** of the participants feel the roadways are safe and easily driven, while **36.61%** do not and **24.64%** did not answer.

9a3. DO YOU FEEL THE ROAD SIGNS ARE VISIBLE AND HELPFUL?

Road signs are visible and helpful to **60.56%** of the answering seniors, **15.49%** did not find them so, and **23.94%** did not reply.

9b1. IF NO, HOW DO YOU GET WHERE YOU NEED TO GO?

For those who do not drive a car, **25.70%** use friends and family for mobility, **2.11%** walk, **1.05%** ride the bus, **1.05%** said they ride and walk, **.35%** take a taxi and marked "other" with no elaboration, **.35%** ride the bus and marked "other" with no elaborations, and **65.84%** did not answer.

10. HOW LONG HAVE YOU LIVED AT YOUR CURRENT ADDRESS?

Of the 284 participants, **55.28%** report having lived at their current address for over ten years, **20.77%** have lived there from two to five years, **13.38%** from five to ten years, **9.5%** less than two years and **1.05%** did not select an answer.

11. IS YOUR CURRENT RESIDENCE IN GOOD CONDITION?

91.54% of the people believe their residences are in good condition, **7.39%** do not and **1.05%** did not give an answer.

12. DO YOU FEEL SAFE IN YOUR CURRENT NEIGHBORHOOD?
While **2.81%** did not select an answer, the majority **(92.95%)** of those polled believe their neighborhoods are safe, with only **4.22%** answering they did not.

13. DO YOU FEEL THAT YOUR HOUSING COSTS ARE REASONABLE?
Housing costs seem reasonable to **72.88%** of the 284 answering seniors, **17.60%** said they were not reasonable and **5.98%** did not answer.

14. HAVE YOU HAD A DENTAL EXAM IN THE PAST 2 YEARS?
In the past two years, **56.69%** of the seniors had undergone a dental exam, **41.54%** had not and **1.76%** did not respond.

15. HAVE YOU HAD AN EYE EXAM IN THE PAST 2 YEARS?
During the past two years, **83.09%** of the participating seniors have had an eye exam, while **16.90%** replied they had not.

16. DO YOU HAVE YOUR BLOOD PRESSURE CHECKED REGULARLY?
Those who check their blood pressure regularly were the majority **(95.07%)**, with **4.57%** stating they did not and **.35%** without an answer.

17. DO YOU GET PHYSICAL EXERCISE EACH WEEK BY WALKING, SWIMMING, FITNESS CLASSESS, ETC.?
When asked whether they get regular weekly exercise, **73.94%** replied yes, **25%** said no, and **1.05%** did not respond.

18. DO YOU KNOW HOW AND ARE YOU ABLE TO GET HELP IF YOU ARE ILL OR GET INJURED?
92.60% of the individuals know how to get help when they are ill or injured, **5.28%** do not and **2.11%** did not reply.

19. HAVE YOU HAD A HOSPITAL STAY IN THE PAST 6 MONTHS?
In the past six months, **15.84%** of the seniors had been hospitalized, **83.45%** had not and **.70%** did not disclose.

20. DO YOU VOLUNTEER YOUR TIME TO HELP A CHARITY, SUCH AS A CHURCH, SCHOOL, ETC.?
Volunteering their time is an activity for **52.46%** of the seniors with **45.77%** stating they did not and **1.76%** who did not answer.

21. DO YOU GET TOGETHER WITH FRIENDS OR NEIGHBORS TO SOCIALIZE AT LEAST ONCE A WEEK?

When asked whether they socialized with friends or neighbors at least once per week, **80.98%** said they did, **16.54%** said they did not and **2.46%** did not reply.

22. HAVE YOU ATTENDED ANY EDUCATIONAL ACTIVITIES IN THE PAST MONTH, SUCH AS CLASSES, LECTURES, MUSEUMS, ETC.?

In the past month, **36.97%** of the participants attended educational activities, **62.32%** did not and **.70%** did not respond.

23. DO YOU EAT AT LEAST TWO BALANCED MEALS PER DAY?

Eating at least two balanced meals per day is standard for **85.56%** of the 284 individuals, while **5.98%** report they do not eat two meals daily, and **.35%** did not answer.

24. ARE YOU TAKING ANY PERSCRIPTION MEDICINES ON A REGULAR BASIS?

On a regular basis, **85.56%** said they take regular prescription medication, **11.61%** do not and **2.81%** answers were not given.

25. ARE YOU ABLE TO AFFORD THE MEDICINE YOUR DOCTOR PRESCRIBES?

Affording their medication is a problem for **19.01%** of the seniors, while **75.35%** said they could afford them and **5.63%** did not answer.

26. ARE YOU CURRENTLY WORKING AT A JOB FOR PAY?

When asked whether they work at a job for pay, **87.32%** of the seniors queried stated they did not, while **7.74%** did work and **4.92%** had no answer.

IF YES, ARE YOU WORKING FULL TIME, PART TIME OR OCCASIONALLY?

Of those who work, **2.81%** are full-time employees, **2.81%** are part-time employees, **1.05%** are occasional workers and **1.05%** did not reply.

27. IS IT EASY TO STAY INFORMED ABOUT WHAT IS HAPPENING IN YOUR COMMUNITY?

Staying informed about community happenings is easy for **81.69%** of the seniors, while **15.14%** found it difficult and **3.16%** had no answer.

28. DO YOU FEEL THAT YOU CAN RELY ON LOCAL LAW ENFORCEMENT, FIRE DEPARTMENT AND PARAMEDICS TO ASSIST YOU WHEN NEEDED?

96.12% of those responding said that they feel they can rely on law enforcement, fire department, paramedics, etc., to assist them when needed and **3.16%** felt they could not, while **.70%** did not answer.

Appendix D:
Focus Group Summary

June 18, 2007

Twenty professionals involved in aging services and health services met to review the data collected from and about senior citizens in Seminole County and to craft recommendations for consideration by the Communities for a Lifetime Task Force. The group was welcomed by Dr. David Medley, Director of Community Services for Seminole County Government. Secretary of Elder Affairs, Dr Doug Beach, emphasized the importance of local initiatives in addressing the needs of Florida's older citizens. He mentioned that Communities for a Lifetime would be working closely with AARP's Livable Communities initiative in the coming year.

Laura Capp, Chairperson of the Communities for a Lifetime Task Force, facilitated the focus group. The Health Council of East Central Florida, represented by Assistant Director, Elaine Cauthen, and Senior Health Planner, Therry Feroldi, presented the data gathered by the Health Council, the Senior Resource Alliance, and the Task Force members.

The participants then divided into five topic groups to discuss the relevant data and develop three recommendations. The topic areas were: Demographics and Basic Needs, Health and Safety, Transportation, Home and Neighborhood, and Social and Community Involvement. Each group presented its recommendations to the others, and all attendees voted on their top five recommendations across all topics. Participants were asked to cast votes by considering which suggestions are most important (most worthy of attention) for Seminole County to pursue and which are most feasible (likely to be implemented or accomplished). The top choices were then plotted on a grid, showing the major opportunity areas (both important and feasible).

The chart below shows each recommendation and the number of votes it received, both for its relative Importance and its relative Feasibility. Items are ranked in approximate priority order.

Professionals Focus Group
Voting Summary

Recommendation	How important is this?	How feasible is this?
Heighten public awareness of health and safety issues from a prevention perspective	**15**	**11**
Establish Elder Transportation Council for Seminole County	**13**	**9**
Provide opportunities for increased social interaction among older adults	**9**	6
Develop intergenerational programs	5	**9**
Inform Seminole County residents of SHIP assistance	8	8
Identify those at high risk for needed services	7	7
Communicate info to all stakeholders about available transportation services	4	8
Develop better inter-communication among various entities working with older adults	5	4
Develop intervention strategies to enhance utilization of existing initiatives within Seminole County	3	4
Enhance all levels of response processes as it relates to health and safety for aging residents	4	3
Pass city code requiring a developer to include % of low income houses in PUD or opt out and pay fee to the "Repair Trust"	3	3
Identify areas that have not been addressed (in the current research) on seniors	3	3
Develop interface with Charts system to pull age-banded data.	2	4
Collect information re: existing options for senior transportation in Seminole County (public & private options); produce snapshot with visual images	2	3
Perform a scope of need for potentially condemned living spaces of seniors	1	2

Appendix E:
Brevard and Orange Counties Commissions on Aging

Brevard Commission on Aging

Mission: To plan for the future of the elder population in Brevard County.

Vision: To create and sustain a community that accommodates, supports, and values aging.

- Advisory Board: Formed February, 2000.
- Mandated by: County Commission Resolution.
- Primary Goal: To create and sustain a community that accommodates, supports, and values aging.
- Membership: 15 members and alternates representing aging services and the elder population.

Responsibilities:

- Is responsible for assembling statistical data that provides a demographic analysis of the current and future population of Brevard's senior population through the year 2010.
- Will also work to develop a baseline measure of the well being of the elder population in the county.
- Is tasked with identifying community resources for seniors, analyzing their strengths, and identifying areas that need improvement.
- Is committed to serving as an important source of information about the state of aging in Brevard County.

Membership Criteria:

- Comprised of 15 members and alternates drawn from the local business community.
- Community representatives are appointed by the organization they represent.
- Appointed in an effort to represent the geographic diversity of the county.

- Gender, race, culture, socio-economic status, and age, shall also be considered.
- Shall be residents of Brevard County, with the only exception being representatives of an agency with no administrative offices in Brevard County.
- Each appointee shall have an interest in planning for the future of Brevard County by supporting the services and infrastructure that benefits all citizens of the county, particularly our elder citizens.

Committees:

- Data Collection and Analysis
- Resource Development
- Community Response
- Legislative

Task force groups have been convened in the following subject areas:

- Education & Employment
- Housing, Health Care
- Long Term Care
- Legal & Safety Issues
- Recreation & Leisure
- Transportation

Staff Support and Budget:

Staff support is provided through the Brevard County Housing and Human Services Department. One, full-time professional, a planner by training, supports the Commission on Aging and two additional commissions of the Board. This individual coordinates the scheduling and documenting of Commission meetings, as well as those of related committees and task forces. She attends and assists with sponsoring Communities for a Lifetime activities conducted by the County and all of its 15 CFAL cities. She serves as an information conduit among the Commission, Brevard County and its municipalities, local service providers, and state level departments.

The Brevard Commission on Aging does not have an operating budget, however it may submit a request for funding to the Board of County Commissioners for specific activities or events.

Orange County Commission on Aging

The **Commission on Aging** was established as an advisory board to the Orange County Board of County Commissioners in July 2001. It was developed as a direct result of a County Interim Commission Task Force that looked at senior issues. This task force of community leaders spent nine months researching older adult issues and listening to the testimony of citizens, caregivers and providers. Their action plan for becoming an elder-friendly community was adopted by the Orange County Board of County Commissioners on March 6, 2001. On July 31, 2001, the Orange County Board of County Commissioners approved Resolution #2001-M-27, which established the Commission on Aging as a permanent advisory board.

Vision & Philosophy:

- **Encouraging an elder-friendly community:**
  The Commission on Aging envisions an elder-friendly community that empowers older adults through choices that allow them to support and maintain their independence within their home communities.
- **Improving the quality of life:**
  To identify the needs of the senior population and find ways to help by working collaboratively.

The Commission on Aging is not a provider or funder of senior services. It identifies Orange County resources dedicated to older adults and works with local, state and national partners to create an elder-friendly community. By promoting partnerships with organizations, identifying needed programs, and linking services to the citizens, the Commission's goal is to empower older adults to maintain their independence and quality of life within their home community.

Commission on Aging Membership

The Commission on Aging is an advisory board to the Orange County Board of County Commissioners. It consists of a diverse thirteen member voting board that is representative of the Orange County community. Members serve two-year, staggered terms and are appointed through the Membership and Mission Review Board process. In addition to the thirteen member voting board, there is a permanent, ex-officio position for the Chief Executive Officer of the local Area Agency on Aging, the Senior Resource Alliance. The Commission on Aging meets bi-monthly on the second Monday, starting in January.

Committees:

- *Community Partnerships:*
  The role of the Community Partnerships Committee is to assist the Commission on Aging with identifying emerging needs in the community. The Community Partnerships Committee is made up of local organizations that work directly with and provide services for older adults, their caregivers and their families. Committee members review the Commission's proposed projects and provide feedback for consideration. With operational and administrative support, the Committee facilitates the realization of the Commission's vision to make Orange County an elder-friendly community.

- *Central Florida Mental Health and Aging Coalition:*
  Established in January 2004, the Central Florida Mental Health and Aging Coalition promotes optimal mental health and aging and substance abuse services for older adults in Central Florida through collaboration, advocacy and education. This is the second regional coalition of its kind to be established in Florida and is associated with the statewide Coalition for Optimal Mental Health and Aging. The Office on Aging is one of several agencies that provides staff support to this ad-hoc coalition.

Staff Support and Budget

The Office on Aging, located within the Orange County Health & Family Services Department, provides staff support to the Commission on Aging. Two full time professional staff members support the Commission and senior-related activities throughout Orange County. In cooperation with Orange TV, they support production of several award-winning television programs for and about seniors. The staff also works closely with the Commission's two committees, produce a monthly electronic newsletter, and serve as an information conduit among the Commission, Orange County and its municipalities, local service providers, and state level departments. The budget for the Office on Aging is $43,000 plus salaries and benefits for its two staff.

Appendix F:
References