



At home, in the community and independent.

Multnomah County

Aging and Disability Services

Department of County Human Services

2009 Yearbook



ADS Office of Research and Evaluation

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At home, in the community and independent.

ADS Mission, Vision, and Values

Mission:

- To assist older adults and persons with disabilities to live as independently as possible with a range of accessible, quality services that meet their diverse needs and preferences.

Vision:

- Persons with disabilities and older adults in our community will be living quality lives with supports and living situations of their choice. ADS will be a leader and catalyst in developing, promoting and implementing options for those choices.

Organizational Values:

- Be customer-driven
- Provide exceptional customer service
- Respect diversity and ensure equal access
- Involve people in decisions that affect them
- Act with personal and professional integrity
- Promote partnerships, collaboration, innovation and community
- Pursue excellence in service and in the work place
- Use public and private resources responsibly
- Continuously advance innovation and quality improvements
- Work cooperatively on issues of aging and disability
- Promote independence, choice and dignity
- Respect privacy and safeguard confidentiality

Contact us:

Call the Helpline at **503-988-3646** or visit the Network of Care Website at <http://www.multnomah.or.networkofcare.org>



Welcome!

AGING AND DISABILITY SERVICES IS HAPPY TO PRESENT its first Annual yearbook, an overview in words, numbers and stories of 2009. During this last year our country has faced very difficult economic circumstances. Despite these challenges, ADS has taken some positive steps during the last fiscal year:

- Our Adult Care Home Program has just completed work on a new *Find-a-Home* website. Visitors will find its easier than ever to locate the right adult care home for themselves or a loved one.
- The Division has embarked on an innovative initiative to streamline the process of helping seniors and people with disabilities find services.
- Community Services received major funding from the U.S Administration on Aging for two projects this year. The Oregon Star-C Project is aimed at helping caregivers of people with dementia, and the Oregon Community Living Project enables individuals at risk of nursing home placement to remain in the community.

If you know a senior or person with a disability who could use some assistance, please give our Helpline a call so we can match them with the services they need. Our Helpline number is 503.988.3646.

Sincerely,

A handwritten signature in blue ink that reads "Mary Shortall". The signature is fluid and cursive.

Mary Shortall
Director, Aging and Disability Services



Independence. Choice. Dignity.

Table of Contents

Introduction

What We Do, How We Do It i

I. Access to Services

Helpline 3

Network of Care Website 4

Statewide Health Insurance Benefits Advisors..... 5

Veterans' Services 6

Transportation Services..... 7

Spotlight on Clients 8

II. Promoting Healthy Aging

Community-based Wellness Activities 11

Home Delivered and Congregate Meals..... 12

Spotlight on Clients 13

III. Home & Community Based Services

Long Term Care Services & Supports:

Oregon Project Independence Case Management
& Services..... 17

Home & Personal Care Services18

Medicaid Case Management & Services.....19

Family Caregiver Support Program 20

Adult Care Home Program..... 21



IV. Adult Protective Services

Adult Protective Services.....	25
Public Guardian and Conservator Program	26
GateKeeper Program	27
Emergency Services	28

<i>Spotlight on Clients.....</i>	29
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V. Appendices 30

Program Management	
Advisory Committees	
Branch Offices and District Senior Centers	
Community Partners	
Statistics at a Glance	
Funding Sources, FY 10	
Personnel, FY 09	
Budget, FY 09	





Who We Serve, How We Serve

ADS PROVIDES SERVICES TO LOW-INCOME SENIORS and people with disabilities, as well as to a broader county population, through a 24-hour Helpline, a web presence, nine District Centers, and five Medicaid offices throughout the County. In addition, its Adult Protective Services, Adult Care Home Licensing, and Public Guardian/Conservator programs offer targeted assistance to those who are most vulnerable and at risk. A Veterans' Services office works with former US service personnel.

The division's service motivation centers on assisting our clients to lead quality lives as independently as they are able by providing them with a range of material and service supports. Because ADS serves a diverse population, we are sensitive to the myriad needs and preferences of our clients. Additionally, we advocate for an increased range of client choices through partnership with state and national bodies that promote legislative initiatives supporting our service goals.

Who We Serve

In the spring of 2009 ADS asked Portland State University Institute on Aging to interview 500 county residents 55 years and older with incomes at or below 200 percent of Federal Poverty Level (FPL). Racial and ethnic minority elders were found to be faring more poorly than the white population in several areas such as health and access to information about services. Other findings include the following:

...ADS Services

- While the majority of adults 55 and over want to stay in their current residence as long as possible, 44% of those who had moved in the last five years had done so to reduce housing costs.
- One-third of adults surveyed said they currently provide help to an elderly friend or relative.
- Hispanic and other ethnic minority adults were significantly more likely than white, non-Hispanic adults to rate their health as fair or poor.

The full Community Needs Assessment is available in the Research and Evaluation section of the ADS website.

Multnomah County's overall population has been rising steadily for the last two decades (Chart 1). The County's population of adults 60 years and older was estimated at 94,567

Chart 1: Multnomah County Population, 1990 - 2010

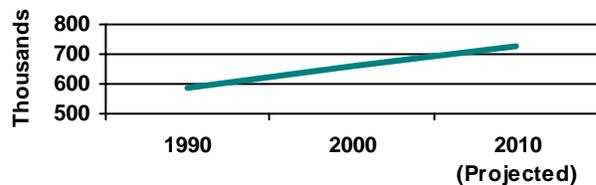
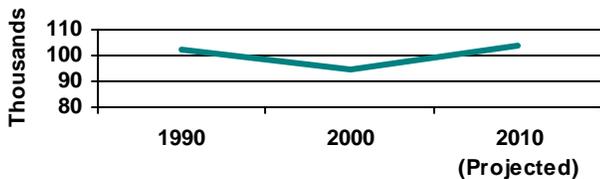


Chart 2: Multnomah County 60+ Population, 1990 - 2010



in 2000, which represented a decrease of almost 7,500 persons from the 1990 U.S. Census figure of 102,248 (Chart 2). The population of seniors ADS serves will increase again in 2010 (104,083) to more than 14 percent of all residents.

Our Five Service Areas

ADS divides the County into five service areas. All areas are projected to show increases in their 60+ population between 2005 and 2010.

West service area. The area is projected to show the greatest growth between 2005 and 2010—from 17,403 to 20,875, or an increase of 20 percent. The bulk of that growth will occur in the Southwest and Northwest sections of the service area, with a minimal increase anticipated for downtown Portland.

Community Needs...

North/Northeast service area. North/Northeast will add more than 3,200 60+ residents—an increase of 15 percent over 2005.

East service area. This area's senior population will jump by almost 2,800, or an increase of 17 percent over 2005.

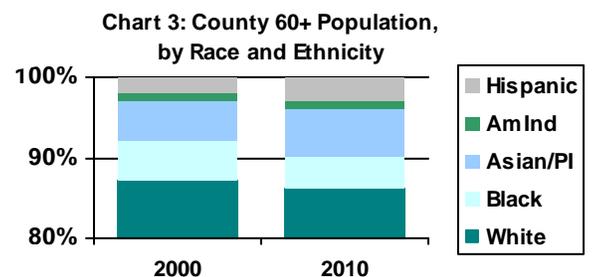
Southeast service area. This area's 60+ population is expected to increase by almost 2,000, an increase of 12 percent over 2005.

Mid-county service area. Mid-county's 60+ population is expected to grow by slightly more than 1,000 between 2005 and 2010. Mid-county is the only service area that experienced a decrease in its 60+ population between 2000 and 2005, and even though the number of those 60+ is anticipated to grow between 2005 and 2010, the area's senior population in 2010 will be less than it was in 2000. In addition Mid-county is projected to have the greatest number of seniors living below the Federal Poverty Level in 2010.

In 2000, 89 percent of the 60+ population in Multnomah County was white, five percent was Asian or Pacific Islander, four percent was Black, and one percent was American Indian.

In that year one percent of all 60+ Multnomah County residents were Hispanic, which represented three percent of the County's total Hispanic population. By 2010 we expect the white population will decrease to 85 percent of all adults 60 and older. Pro-

jections indicate that the absolute number as well as percent of white older adults in Multnomah County will continue to decline (Chart 3).



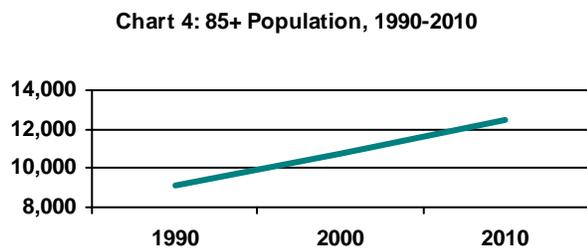
Poverty is Not Distributed Evenly

Over the initial decade of the twenty-first century, the proportion of Multnomah County residents 60 and older living in poverty remained stable at between nine and ten percent. According to the most recent American Community Survey, poverty is not distributed equally by race: almost 30 percent of African Americans and Hispanics 65+ and over 20 percent of Asians 65+ lived below the Federal Poverty Level (FPL, defined as \$14,000 for a family of two), while 10 percent of whites 65+ did

...ADS Services

so. The Census Bureau predicts concentrations by census tract of seniors living under FPL. Estimates for 2010 indicate that significant numbers of poor seniors will reside in the Mid-County service area.

The 85+ Population



The fastest growing age cohort in the United States and Multnomah County is persons 85 years and older. Estimates for 2010 indicate that those 85 years and older will number almost 12,500, equal to 12 percent of all persons 60 years and older (Chart 4).

Persons with Disabilities

The number of adults with disabilities in 2005 was estimated at 54,341, and is projected to increase to 56,839 in 2010. The Mid-county and East service areas are expected to be home to a significant share of adults with disabilities in the next few years.

Rural Multnomah County

Multnomah County's rural population was estimated at 11,476 in 2005, and of that number, 4,362 individuals (or almost 40 percent) were 60 years and older. Based on the U.S. Census Bureau's definition of rural, this population resided in eight census tracts situated in the East and Northwest areas of the County. Slightly more than 70 percent of rural residents lived in the eastern end of the county. As a group, the percentage of rural seniors living below the Federal Poverty Level was significantly lower than the percentage for all older adults countywide. The percentage of rural residents 85 years and older was markedly lower than the countywide figure for all 85+.

Innovations in Service

The ADS Division is in the beginning stages of changing our organization to align with recent national trends in aging and disability services. The single most important national trend driving the Division's efforts is the so-called *Age Wave*, or the aging of the Baby Boomer population. This

Community Needs...

wave will increase the demand for services precipitously over the next two decades. The good news is that we can predict the wave and there is time to prepare.

As we think of the coming Baby Boomer population, some characteristics emerge that help guide our efforts. In general the population is...

- more highly educated,
- adept at new means of communication and information transmission,
- more insistent on tailoring services to meet their needs, rather than fitting into a set service structure, and
- more health conscious and interested in health promotion.

Consequently, our drive to gear up for the *Age Wave* is focusing on greater choice through greater use of technology. This will result in greater autonomy for the client. This translates to the following innovations, implemented or in the pipeline:

- We have already set up a number of culturally specific congregate feeding sites (including a gay and lesbian site), that will serve as a nexus for services.
- We have just completed an adult care home website that assists the internet user by matching their needs to a suitable home.
- We are looking into expanding services offered through our Helpline and streamlining transfer of information by phone, including a "warm transfer" directly to a specialist.

We are changing the way we do business by pursuing the following three initiatives:

Aging and Disability Resource Centers

The federal Administration on Aging, the National Association of Area Agencies on Aging, and Oregon's Division of Seniors and Persons with Disabilities (SPD) all support our new *Aging and Disability Resource Center* (ADRC) initiative. Aging and Disability Resource Centers are a national model intended to convert agencies into "one-stop shopping centers." The goal of the model is to help people make informed decisions about their service and support options. ADS will be developing Long Term Care

...ADS Services

Options Counseling, a targeted service to assist individuals and their families to identify and plan for service options, in the coming year through a Community Living Program grant funded by the Administration on Aging. Initially, these services will be targeted to veterans and older adults at risk for nursing facility placement and spend-down to Medicaid.

Transition and Diversion

Another initiative aims at diverting Medicaid-eligible individuals from nursing home placement, through an expanded range of choices. For some people, a nursing facility is the most appropriate setting. For those who wish to remain in the community ADS is working to create options that will allow residents and potential residents to find a path back into the community through assisted living or even independent living in their own home.

Healthy Aging

Finally, the agency is expanding options for healthy aging. This involves partnering with other entities like Portland Parks and Recreation to introduce seniors to evidence-based exercise that really works to reduce falls, and promote health and self management of chronic diseases. The program will focus on falls prevention through increased exercise and restoration of balance. ADS will utilize its meal sites as the locus for the activities.

Conclusion

Increased poverty and need always follow an economic downturn, and ADS is seeing an increase in interest in our services. But looking ahead, we are seeing and preparing for a large generation of Boomers who will bring their own needs and preferences to the mix. We are making changes now to better meet our opportunities and challenges over the next decade.

Article source: Multnomah County Aging and Disabilities Services, 2008 Older Americans Act Area Plan. Available: http://www.multco.us/staticfiles/ADS/documents/AboutUs/ads20082011_areaplan_summary.pdf or by calling the ADS Helpline.

Community Needs...



I. Access to Services

- Respondents would most often go to a professional , family, or the media for information on services.
- Adults in ethnic minority communities rely largely on culturally-specific sources of information to learn about resources.
- 52% of respondents said they used the Internet.
- 33% of respondents said they currently provide help to an elderly friend or relative.
- 25% of helpers said they provide 11 or more hours of care per week.
- Of those not yet retired, 41% plan to volunteer when they retire.
- 23% reported doing volunteer work in their communities.
- Most respondents reported an interest in volunteering with seniors, teens, or for philanthropic organizations.

*...from the ADS/PSU Institute on Aging
2008 Community Needs Survey of low-income seniors
and people with disabilities.*



...ADS Services

Helpline 2

Network of Care Website 3

Senior Health Insurance Benefits Assistance 4

Veterans’ Services..... 5

Transportation Services 6

The way ADS communicates our presence to the community is key to our effectiveness. Both the Helpline and the Network of Care provide a means to obtain needed information about local resources. Veterans’ Services link former service personnel with resources. Transportation Services provides affordable public transportation, getting clients to critical appointments and to the pharmacy.



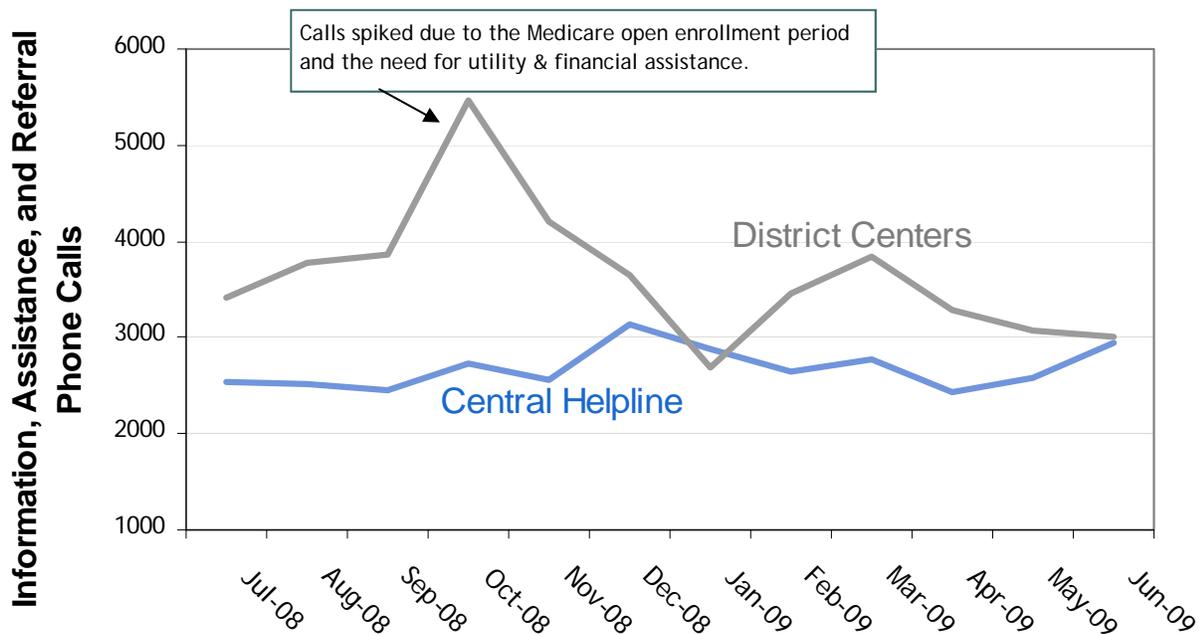
"Thank you again so much for coming to visit and putting together the training. It was really excellent and filled with useful information for our clinicians."
 – Account Manager for After-Hours Helpline Service

Helpline

Accomplishments:

- A training was developed for After-Hours operators to discuss new service innovations and clarify when on-call consultants would need to be contacted. The training was videotaped so that other operators across the US could glean the same information.
- Regional information on shelters providing heat and cold relief was compiled and distributed to Helpline staff and After-Hours operators so that seniors would have more resources to deal with extreme weather conditions.

ALTHOUGH ADS HAS A "NO WRONG DOOR" POLICY that insures callers are given the information they need as quickly and efficiently as possible, we consider the ADS Helpline to be the front door to our system of care. The Helpline operates 24 hours a day, seven days a week to provide seniors, people with disabilities, and caregivers information and assistance to address their needs. Helpline staff simplifies access to services and provides important follow-up and advocacy. The nine District Senior Centers throughout the county also provide information and assistance during their hours of operation. A total of 76,000 Helpline and district senior center calls were answered in FY09.

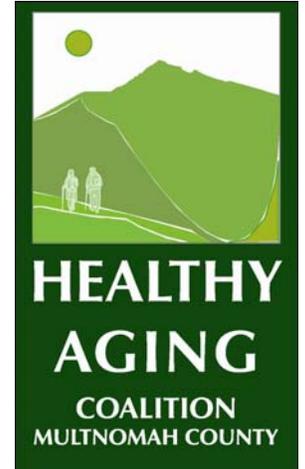


"Network of Care is great, kind of a one-stop shopping approach not only for seniors and persons with disabilities, but for family members trying to assist them with their needs—an incredible resource for out of area family and friends."
— Helpline staff member

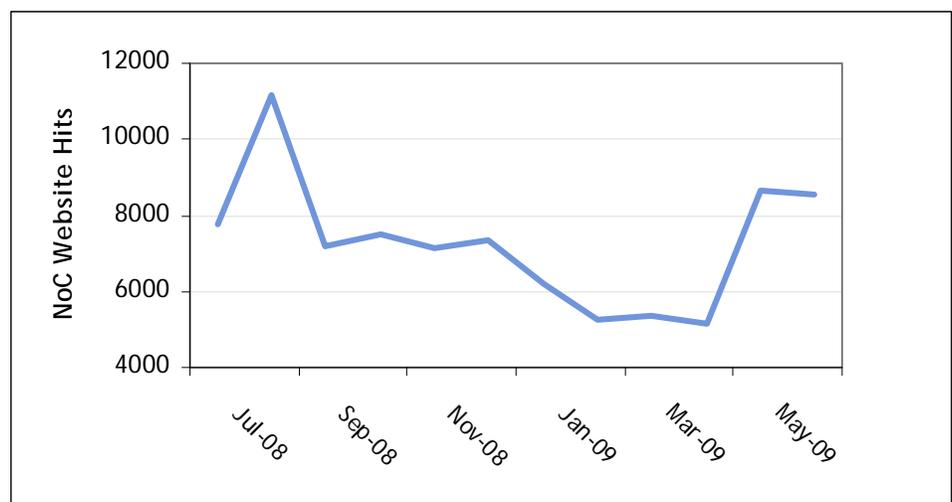
Network of Care Website

Accomplishments:

- The Healthy Aging Resource Directory debuted in 2009 on Network of Care. Developed and launched by the Healthy Aging Coalition of Multnomah County, a community partnership led by ADS, the directory provides information about many local resources for older adults including information on physical activity, healthy eating, emotional health, community engagement and spiritual well-being.
- ADS is including resources on the Network of Care that go beyond traditional non-profit referrals. The division is working hard to add "for-profit" resources to serve a broader population. With the increase of the over-60 population, more people will need information about services and many will utilize a private pay option.



MULTNOMAH COUNTY'S NETWORK OF CARE is a comprehensive information source for seniors and persons with disabilities, as well as their caregivers and service providers. The website provides information on local resources, medical issues, pertinent legislation, a calendar of local events and more. The comprehensive service directory allows users to search for resources by need and by zipcode. A total of 87,000 website hits occurred in FY09.



"With your help, I was able to recover \$1,585 owed me. Be assured that I will spread the word and recommend your wonderful services in helping seniors with their rights and protections regarding Medicare payments."
 — SHIBA client

Senior Health Insurance Benefits Assistance

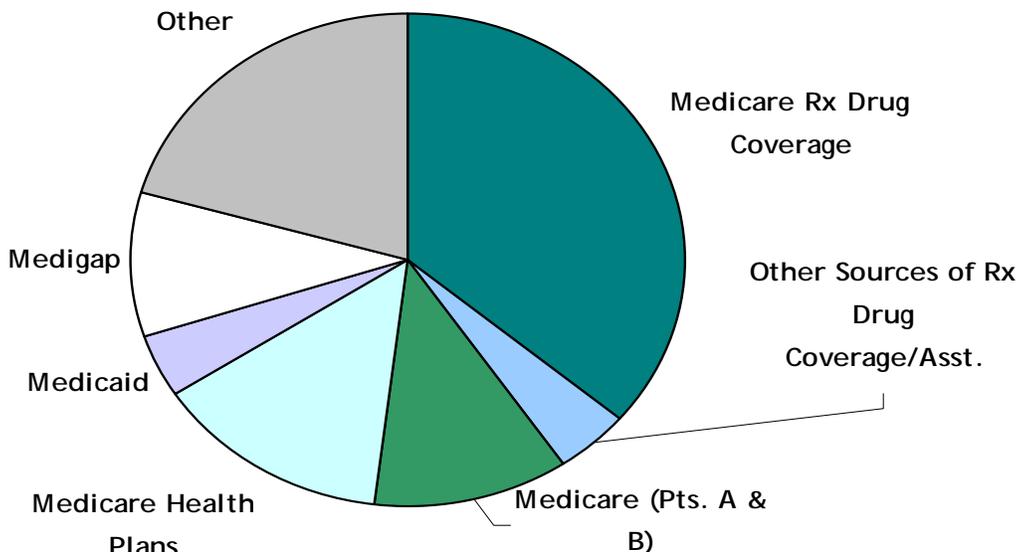
Accomplishment:

- Over the last year, SHIBA has increased appointment slots, opened a new site for volunteer counseling about health insurance options, and conducted new "Welcome to Medicare" classes in response to increasing client demand for services.

THE SENIOR HEALTH INSURANCE BENEFITS ASSISTANCE PROGRAM (SHIBA) is a statewide network of volunteers who are trained by the State Insurance Division to help seniors and people with disabilities navigate Medicare. Last year nineteen SHIBA volunteers met one-to-one with beneficiaries of all ages to educate, assist, and serve as advocates. Specifically, SHIBA volunteers help with Medicare claims, insurance comparisons, benefits denials, prescription drug assistance, and related issues.

Most SHIBA clients are over the age of 65 (58%), male (57%) and over half are below 150 percent of federal poverty. Nearly a quarter of clients (19%) are a racial minority. Appointments cover a broad range of topics, but Medicare prescription drug coverage was of particular interest to clients in 2009.

Topics Discussed with SHIBA Advisors



“We cannot thank you enough for all your work ... [Our family member is] now at 100% ... pay from benefits.”
 – Family member of a veteran client

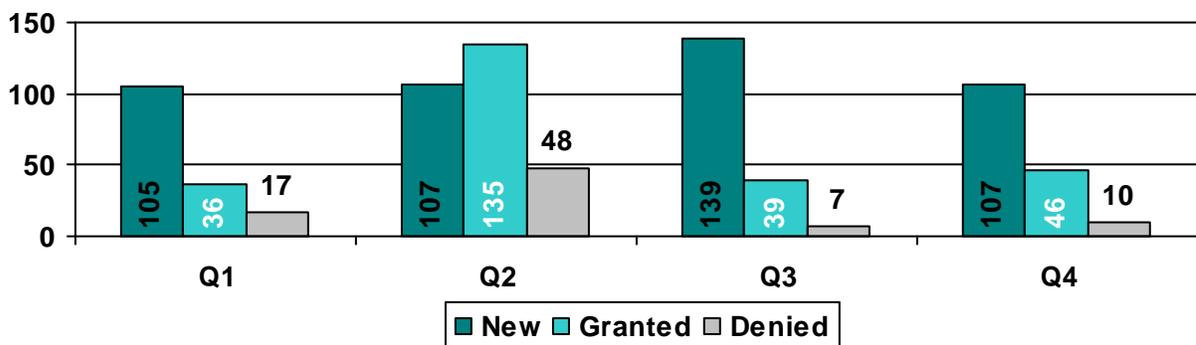
Veterans’ Services

Accomplishments:

- Multnomah County Veterans’ Services staffs four ADS locations weekly to provide better direct service to veterans and their dependents. Expanded outreach to clients has also strengthened collaboration with case managers and increased the number of referrals. As a result, the office increased veterans’ benefit recovery by 8%.
- This Year the office adopted a new client database, *VetRex*, that can better track veterans’ claims and benefits.

THE VETERANS’ SERVICE OFFICE IS AVAILABLE to assist veterans and their dependents with understanding and obtaining all benefits available to them under state and federal laws. The Office works closely with County Agencies, the Oregon Department of Veterans Affairs and the US Department of Veterans Affairs to provide all available services to veterans and their families. Additionally, veterans receive assistance in preparing applications and filing appeals for denied claims. The program is strongly committed to serving homeless veterans. Four hundred fifty eight new claims were filed in FY09 through the Multnomah County Veterans’ Office, 256 of which were granted. The total recoveries granted to Veterans was \$2,826,877.

Veterans Claims, FY09



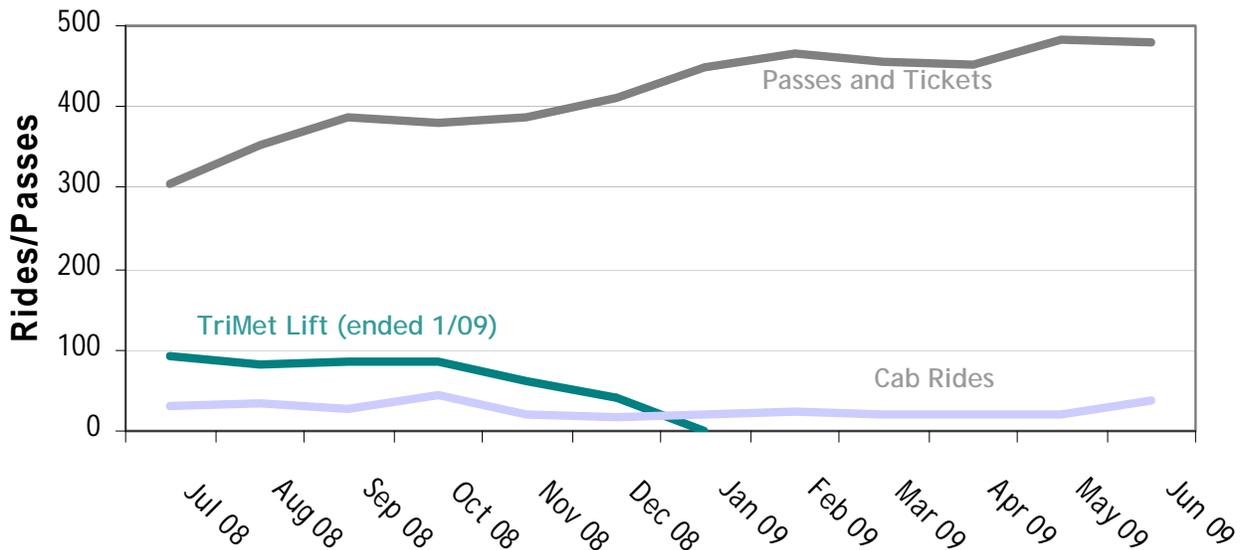
" This [transportation] service enables me to be more independent. I have never been able to drive because of my visual impairment. It means the difference between being self-sufficient or depending on others. It allows me to do more for myself. " – Transportation client

Transportation Services

Accomplishment:

- The program conducted a process improvement examination to help expedite issuance of passes and tickets. Now, seniors apply for tickets and arrange rides through the local District senior center.

TRANSPORTATION CAN BE A SENIOR'S SINGLE MOST IMPORTANT barrier to independence. District Senior Centers located throughout the county offer programs that provide a variety of transportation options. There is no charge for Senior Center clients to access medical, nutritional, or grocery shopping rides. When the TriMet door-to-door services ended in January 2009, clients received assistance to access TriMet ADA LIFT and bus tickets and passes. As a result, more passes and tickets were distributed. The total number of unduplicated transportation clients served in fiscal year 2009 was 942.



Lyda Overton

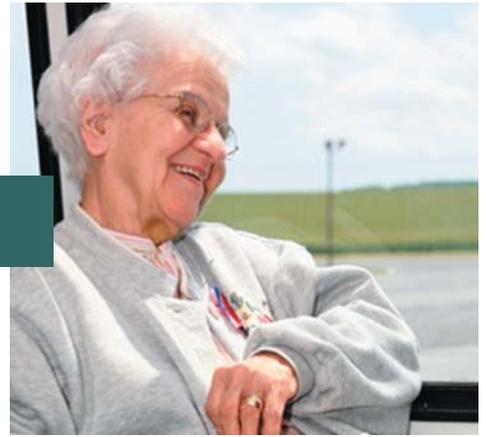
AS A YOUNG WOMAN LYDA WORKED IN THE SAME BUILDING as the Urban League Senior Center but she never imagined she'd be returning there as a participant.

However, three years ago she suffered a stroke and realized she needed assistance with daily activities in order to continue to live in the community. In addition to mobility issues which require that she walk with a cane, Lyda spends about **\$500 a month on medication** for diabetes, high blood pressure and cholesterol. This is a challenge to her, living on a **social security income of \$909**.

Oregon Project Independence (OPI) currently provides Lyda, age 73, with **six hours of housekeeping assistance** every month. This costs OPI \$57.81, but she is not charged a copay due to her low income. This help is particularly important because her washing machine is in the basement and the stroke-related difficulties with her left arm and leg make it a challenge to use stairs or do many household chores. Lyda used to get weekly assistance until **recent funding cutbacks**. However, she is **grateful** for what she receives, because maintaining clean clothes and her personal things is important to her **self-respect**.



Community Needs...



II. Promoting

- 37% rated their state of health compared to others as fair or poor.
- Hispanic and other minorities were significantly more likely than white, non-Hispanic adults to rate their health as fair or poor.
- 10% of those surveyed said they eat as many as four or more servings of fruits and/or vegetables per day.
- Race and ethnicity are associated with eating fewer fruits and vegetables per day.
- 31% said they did not have the kinds of food they wanted to eat, owing to cost.
- 72% were aware that Medicare covered all or part of screening procedures.
- 66% were aware that Medicare covered all or part of vaccinations.
- 19% reported engaging in four or more physical activities.
- Both race/ethnicity and self-reported health status were associated with fewer numbers of activities, as well as lesser frequency of activities.



*...from the ADS/PSU Institute on Aging
2008 Community Needs Survey of low-income seniors
and people with disabilities.*

Healthy Aging

Community-based Wellness Activities 10
Home Delivered and Congregate Meals..... 11

Prevention is much less expensive than treatment. ADS works to promote healthy behaviors so our clients can live fully in the community of their choice. In addition to activities through our District Centers, we published a Healthy Aging Directory, available on our Network of Care website. Nutrition programs distribute free or low-cost meals to seniors and people with disabilities in their own home and in congregate settings throughout the county.



"This has made my life so much better. I can get out of my house and see people now."

— Transportation & Focal Point client

Community-based Wellness Activities

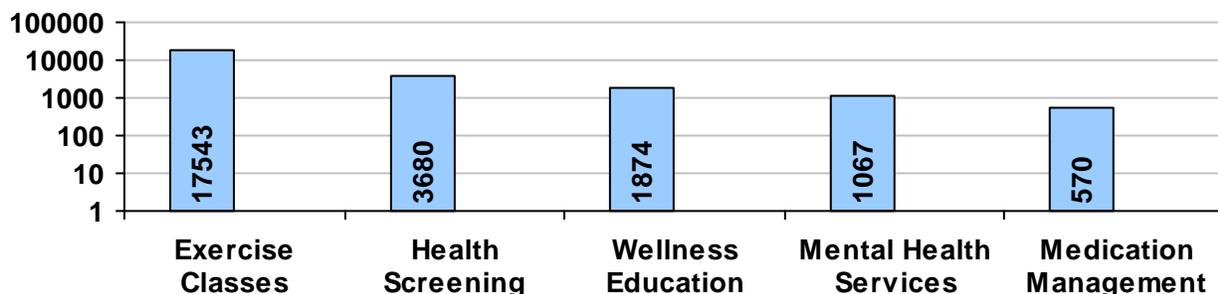
Accomplishment:

- District Centers have begun using more evidence-based health promotion programs as a way for seniors to maintain social and physical health (Evidence-based activities involve planning, implementing and evaluating programs from tested models). Seniors experience improved health outcomes, greater well-being and increased coping skills through participation in these programs.

OUR NINE STRATEGICALLY-LOCATED DISTRICT CENTERS SERVE AS A FOCAL POINT for Multnomah County seniors. *Focal point activities* serve to promote socialization, health and wellness. Socialization activities include a variety of events organized or coordinated by a District Center either on or off site. In FY09, District Centers coordinated 6,505 activities, reaching a duplicated count of 70,098 people.

In addition to social and recreational services, District Centers also coordinate activities specific to health promotion including health screenings, exercise classes, wellness education, mental health services and workshops about medication management. There were 2,670 health promotion classes in Multnomah County that reached 24,734 duplicated clients.

**People Served by Health Promotion Activities, FY09
(Logarithmic scale)**



“Seniors who are on a fixed income or who are struggling to make ends meet are more likely to come to a neighborhood center to meet their dietary needs and to help stretch their food budget.”
— Loaves & Fishes Executive Director

Home Delivered and Congregate Meals

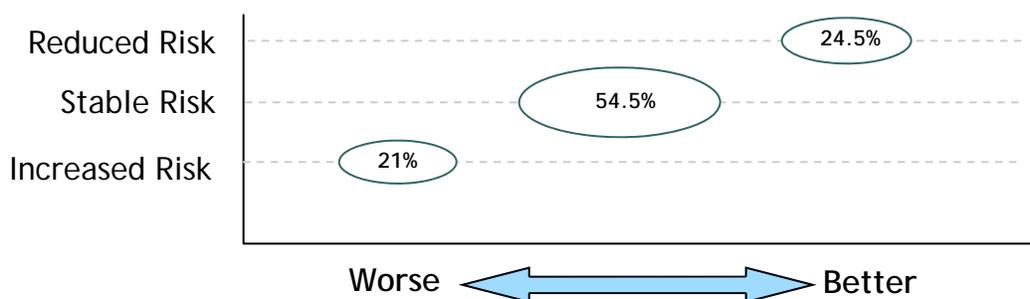
Accomplishment:

- ADS implemented a new ethnic outreach strategy that included the development and support of four culturally specific meal sites to serve the major limited English speaking and Native American communities in its service area. Each site was integrated into an overall outreach strategy based on partnerships with culturally specific providers in the targeted communities. This outreach approach combined existing ethnic outreach and meal funding to create enhanced contracting opportunities for highly leveraged community based organizations serving the rapidly growing Latino, Eastern European, Asian, and Native American populations in Multnomah County.

WITHIN AGING & DISABILITY SERVICES, Community Services serves a variety of people not receiving Medicaid services. Of the estimated total of 10,227 clients served, 8,232 clients received home delivered meals or attended a congregate meal site. In addition, Multnomah County’s ethnic outreach program reached 677 seniors through targeted congregate meal sites.

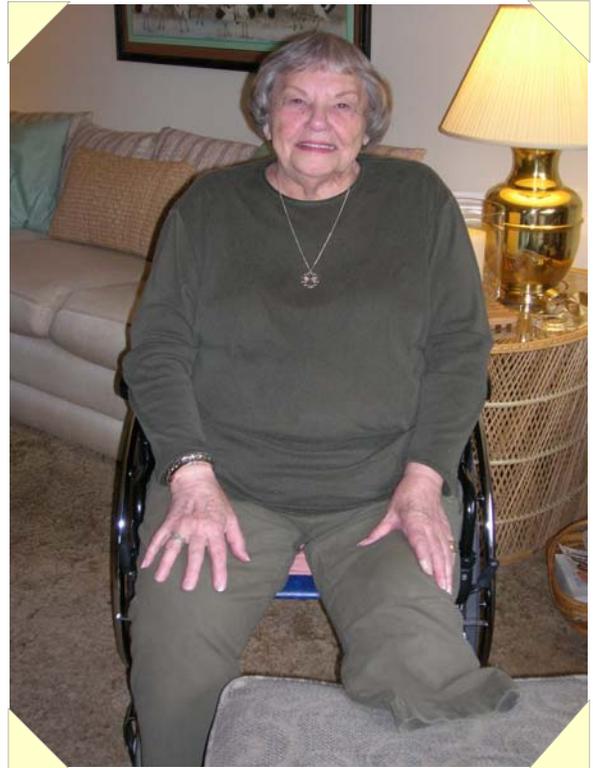
Nutrition Services provide a gateway for clients to access additional resources in the Aging & Disability Service network. Congregate meal sites help connect clients to peers in the hopes of reducing feelings of isolation. Nutrition services have consistently been shown to stabilize or improve client’s nutritional risk status.

Results of Six Month Checkup for Nutritional Risk, FY09



Jocelyn Fee

JOCELYN HAS BEEN A RECIPIENT OF OPI since the loss of one leg from a circulatory disease in 1995. She has always led a busy life, raising two sons as a single parent and working for 42 years in the banking industry.



Even with her disability, she manages to get around her apartment in a wheel chair, cooking and bathing herself, as well as doing some gardening in pots on her balcony. The things she cannot do for herself are housekeeping and laundry, particularly since the **washing machines are in the basement** of her apartment complex. As Jocelyn explained, going up and down stairs with a laundry basket or pushing a vacuum are impossible.

Jocelyn's income is \$1,355 per month from social security and a small pension. With the help of OPI, she receives **two hours of housekeeping** service per week at a cost to the program of \$95.30 per month; she pays **\$30.10 copay** for this help.

Jocelyn has lived in her apartment complex for 38 years so she is very familiar with the surroundings and is **eager to do as much for herself as possible**.



Independence. Choice. Dignity.

Community Needs...



III. Home and

- 86% of renters and 68% of homeowners spend more than 30% of their income on housing.
- 44% of those moving within the last year did so to reduce housing costs.
- 63% of homeowners and 87% of renters were worried they could not find affordable housing if they had to move.
- 25% of homeowners reported needing repairs or modifications to their home as they age.
- 80% of respondents said they did not feel very confident of financial stability upon retirement.
- 75% of those not yet 65 years old said they planned to keep working past retirement age.
- 81% of those expecting to work expected to work five or more years past retirement.



*...from the ADS/PSU Institute on Aging
2008 Community Needs Survey of low-income seniors
and people with disabilities.*

Community-based Long Term Care

Oregon Project Independence Case Management Services & Supports	17
Home and Personal Care Services	18
Medicaid Case Management Services & Supports	19
Family Caregiver Support Program.....	20
Adult Care Home Program	21

Home is where people want to be, and our home and community-based services insure that clients have the choice to remain independent in their own community for as long as possible. Our home and community-based services promote stability for clients in their own community and home.



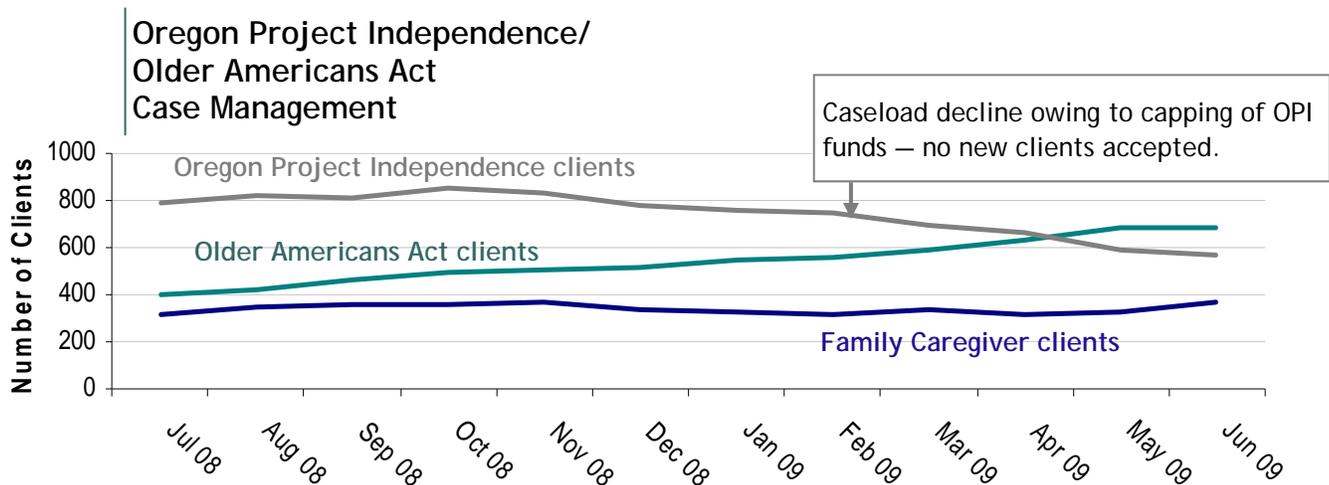
"I received more help than anticipated or even was aware was available [from my case manager]."

Oregon Project Independence Case Management & Services

Accomplishments:

- The County increased the number of home-care agency providers from two to four to better serve the needs of clients requiring in-home services such as housekeeping, meal preparation, bathing and other personal care.
- District Center case managers were able to meet with all new clients in spite of OPI's in-home services waiting list (extending most of the fiscal year), and help clients access other ADS and community support services.

OLDER ADULTS IN MULTNOMAH COUNTY may receive access to services and care coordination when they are experiencing diminished function or other limitations which require care providers. Typical case management activities include assessing needs, developing care plans, authorizing services, arranging services, coordinating the provision of services among providers, follow-up and reassessment. Services are authorized depending upon client needs and may include some combination of nutrition, in-home care and caregiver support, adult day services, transportation, as well as other services. A total of 2,404 Multnomah County residents were served through Oregon Project Independence and the Older Americans Act in FY09.



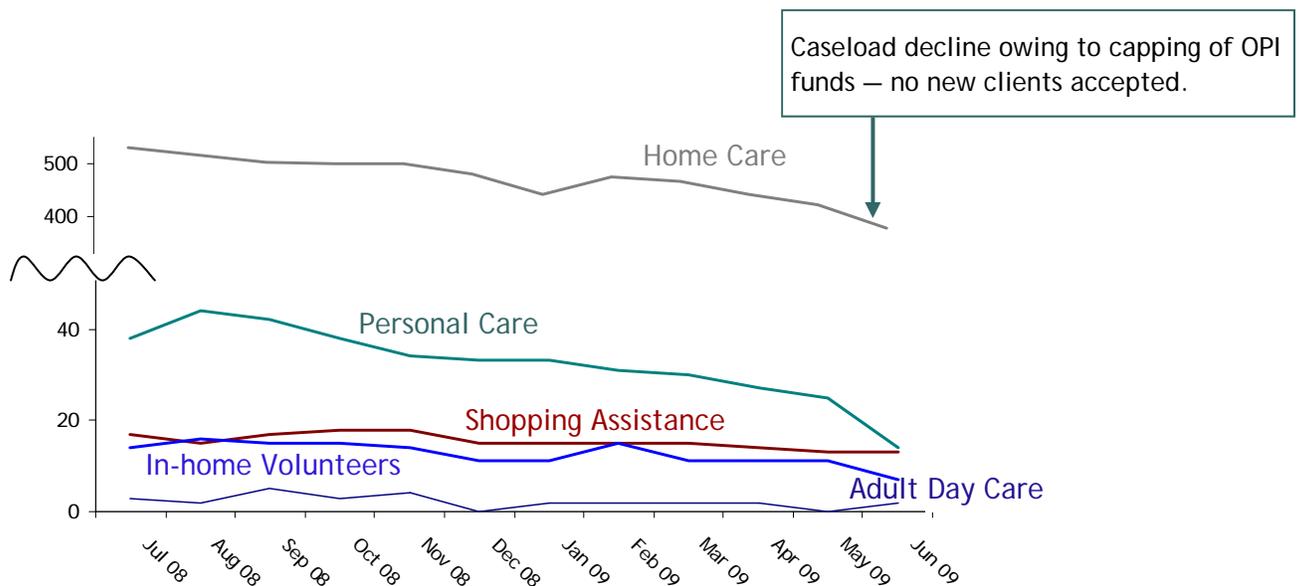
"I could not survive without these services. I have a handyman and a housecleaner who help me. I cannot handle it all by myself."
 — Daughter caring for parent

Home & Personal Care

Accomplishment:

- After conducting a program review, in-home service and adult day service contracts were expanded to include respite care for caregivers as well as increasing the number of contracted partners to better meet the overall need.

ONE OF THE PRIMARY GOALS OF ADS is to help seniors and people with disabilities to remain in their own community. Low-income people who are not Medicaid-eligible stay independent through the community-based programs funded by Oregon Project Independence and the Older Americans Act. Frequently, all it takes is the services of a home health nurse or meals delivered to the home to provide the support people need to remain independent. Home and personal care services can also include assistance with bathing, dressing, personal hygiene, mobility and transfers, getting to and from the bathroom, housekeeping, laundry and shopping. The number of people on home care services decreased throughout the year because Oregon Project Independence began a waiting list for eligible clients in the fall.



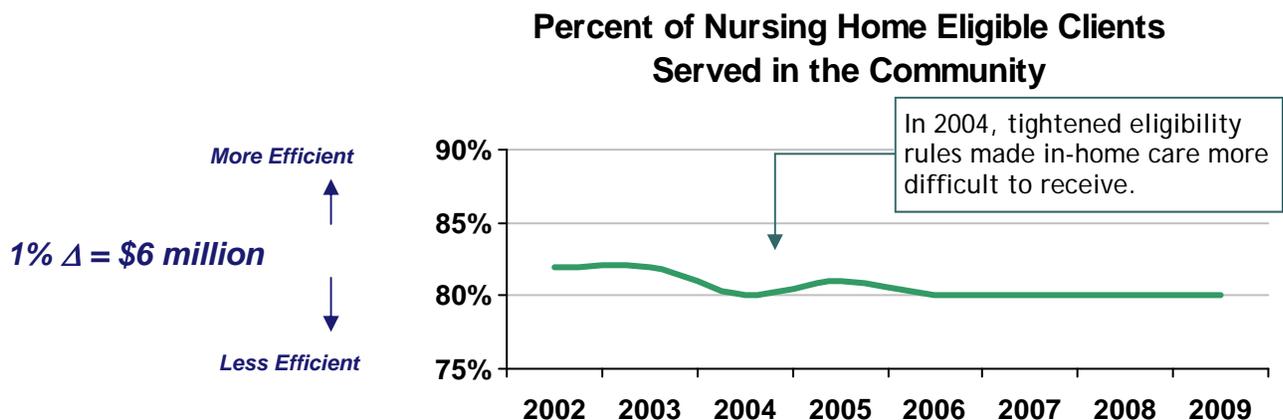
"[My case manager] was very thorough and made sure I understood."

Medicaid Case Management & Services

Accomplishments:

- Allowing people to stay in their homes and in the community makes good sense and reduces costs to the county, state, and federal systems. Long Term Care is improving its ability to transition seniors and people with disabilities out of nursing facilities, as well as delaying or avoiding nursing facility care altogether.
- Long Term Care is revamping the way clients access information and services. The goal is to eliminate barriers, reduce the time required to initiate services and improve follow-up for those not eligible.

THE DIVISION'S LONG TERM CARE PROGRAM CONDUCTS ASSESSMENTS and ongoing case management for programs that include basic Medicaid, Food Stamps, State Plan Personal Care and Medicaid Long Term Care Services through five area offices strategically located around the county. The program then monitors care through case management. The goal of Long Term Care is to keep people independent and in their own home or community. The Nursing Facility Program provides a higher level of care to over 1,300 of the most vulnerable seniors and persons with disabilities living in the county's 32 nursing homes.



"You have no idea what a big help this program gave me – such peace of mind . I don't feel so stressed out right now because of all the breaks I received the past 2 months."

– Daughter caring for her mother with kidney failure

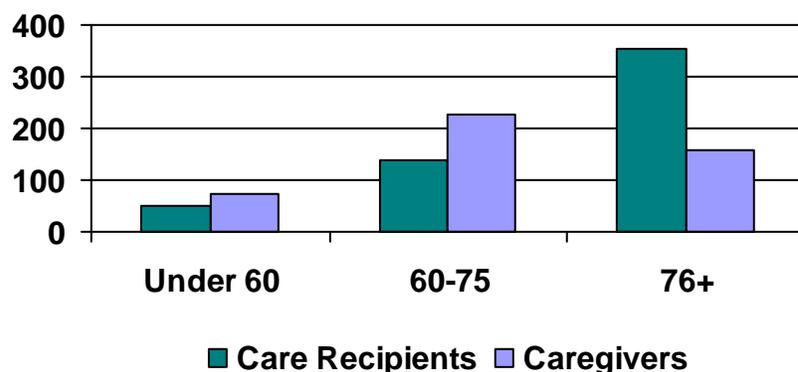
Family Caregiver Support Program

Accomplishments:

- The Multnomah County Family Caregiver program collaborated with Clackamas & Washington counties to provide better services and events for family caregivers in our area.
- The Spring Grandparent Raising Grandchildren event was held to recognize the invaluable contributions of grandparents who lovingly take on the responsibility of raising their grandchildren. Sixty-five grandparents were able to connect to community resources, take educational workshops, and meet other grandparents caring for their family members.

WHEN FAMILY CAREGIVERS NEED HELP, THE FAMILY CAREGIVER SUPPORT PROGRAM helps link caregivers to available resources such as respite, counseling and training to make their caregiving duties easier. Funds are available for short-term respite or to purchase special equipment. Additionally, there is financial assistance available to individuals caring for grandchildren to purchase respite and related services.

Age of Family Caregivers and Recipients, FY 2009



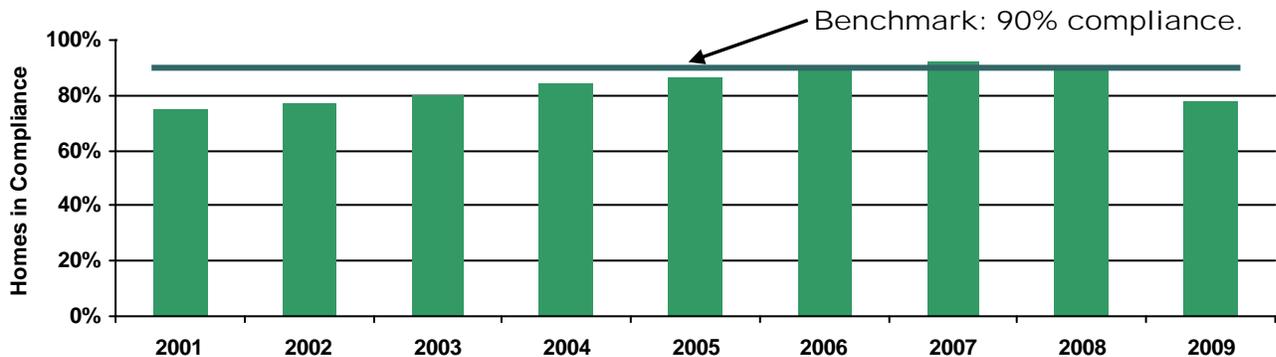
"I appreciate that you gave my name to someone who was looking for a room to place her mom. You and my licenser have supported me a lot through the years. Thank You!"
 — Adult Care Home Operator

Adult Care Home Program

Accomplishments:

- The Adult Care Home Program (ACHP) has launched a new web-based Find-a-Home search tool that allows families and case managers to generate a customized list of Adult Care Homes to meet the care needs of a person needing care. See <http://findahome.multco.us>.
- ACHP partners with the State of Oregon's On the Move program to allow people living in nursing facilities the opportunity to live in a less restrictive, home-like setting.
- The 8th Resident Satisfaction Survey was completed to track resident satisfaction and quality of life in Adult Care Homes. In FY09, 89% of residents reported they were "very satisfied" or "satisfied" with living in Adult Care Homes which was an increase of five percent from the 2006 results.
- Attendance at the 9th Annual Summer Conference for Adult Care Home operators and staff increased ten percent from the prior year. Topics for workshops included identify theft, domestic abuse, and special issues of Lesbian, Gay and Transgender senior citizens.

ADULT CARE HOMES OFFER SENIORS AND PERSONS WITH DISABILITIES affordable room, board, care and services that allow them to live in a home-like environment with 24 hour supervision. Adult care homes provide care and are located in residential neighborhoods throughout Multnomah County and care for up to five people who have a wide range of care needs. The ACHP ensures that over 600 homes meet the health, welfare and safety requirements for residents. Through licensing, monitoring and regulation, the ACHP ensures that the homes comply with standards described in the Multnomah County Administrative Rules for the Licensure and Regulation of Adult Care Homes. In FY09 ACHP assigned one licenser to work the 157 Developmentally Disabled Homes in Multnomah County. As a result many compliance issues were found and corrected. It is expected that the coming fiscal year will see a return to a more normal compliance rate.





**MULTNOMAH
COUNTY**



Community Needs...

IV. Adult

- 15% of respondents said they feel unsafe in their neighborhoods.
- 92% said they had a family member to call in an emergency.
- 31% said they would need assistance in evacuating their house during a disaster or emergency.
- Of those who would need assistance during a disaster, 11% were aware of the Voluntary Emergency Registry. The Registry provides a list for emergency responders of vulnerable seniors and people with disabilities who have self-identified as needing help to evacuate during a disaster or emergency.

*...from the ADS/PSU Institute on Aging
2008 Community Needs Survey of low-income seniors
and people with disabilities.*



Protective Services

Adult Protective Services.....	25
Public Guardian & Conservator	26
GateKeeper Program	27
Emergency Services	28

Protecting vulnerable adults and people with disabilities is one of the most important functions of ADS. Each year thousands of Multnomah County residents face situations that overwhelm their ability to cope. That's when these county programs step in to insure health and safety.



"I know it's your job to look out for the elderly, but I sensed through our conversations that this was more than just a job for you. You went out of your way, and, I believe well beyond your job, to assure that our Uncle remained safe..."
— APS client

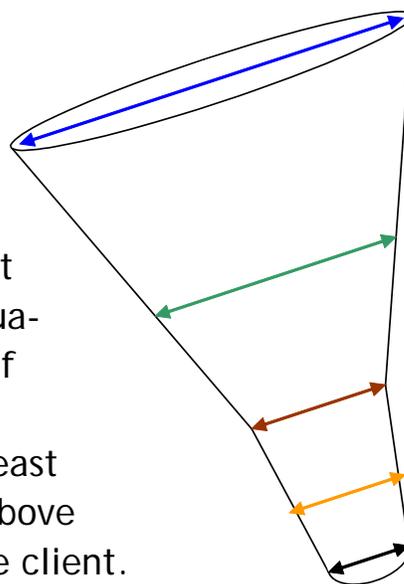
Adult Protective Services

Accomplishments:

- The Multidisciplinary Team, an evidence-based practice, changes the lives of clients. A recent study showed that 94% of vulnerable Adult Protective Services clients receiving the team's intervention improved their safety and living situation within 90 days.
- Financial exploitation is the fastest growing form of abuse. Adult Protective Services returned over \$1,000,000 to victims in FY09.
- Because only 15% of adult abuse is reported, in FY09 the program conducted over 200 hours of community programs that help people identify when abuse occurs.

ADULT PROTECTIVE SERVICES SCREENS CALLS and provides service for Multnomah County's vulnerable seniors and people with disabilities. Abuse takes many forms: physical, sexual, verbal, and financial. Neglect by a caregiver and *self-neglect* are also considered abuse. If you think you might have seen or heard about abuse of an adult, you should call **503.988.3646**.

Protective Services workers are available to investigate abuse and to give assistance such as emergency placement away from the dangerous situation. The guiding principles of APS are to respect self-determination, provide the least restrictive alternative, and above all, do no further harm to the client.



All abuse in Multnomah County: Unknown.

Screening: 8,300 cases each year come to APS for screening.

Investigation: APS investigates 3,500 cases each year.

Substantiation: Abuse is determined in 2,900 cases each year.

Risk Management: APS monitors 176 cases closely for evidence of further abuse.

"Last year we were able to stabilize one client who was showing up in the ER almost every other night. Today she's in her own home, secure, and much less medically needy ... and she hasn't visited the ER for six months."

– Deputy Public Guardian

Public Guardian and Conservator

Accomplishments:

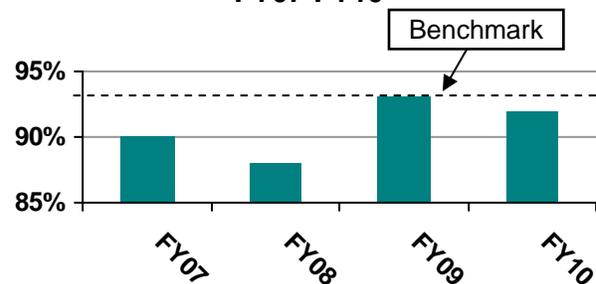
- In FY09 the Public Guardian program has been able to increase its effectiveness in stabilizing the clients it takes: up 2% over last year.
- The Public Guardian Program faces enormous pressure from case managers and family members to take cases the program does not have the resources to supervise. The program has increased the number of cases successfully diverted to less expensive resources, without directly taking on additional burden.

THE MULTNOMAH COUNTY PUBLIC GUARDIAN AND CONSERVATOR PROGRAM is an integral part of the county response system for abuse and neglect. The program serves adults with diminished capacity when less restrictive interventions are unsuccessful. Program clients are characterized by significant cognitive and functional impairments, complex medical problems, inappropriate housing, lack of financial resources, and severe abuse, neglect and exploitation.

For these clients, the best course of action is for the court to appoint a guardian (authority over the person) or conservator (authority over property and finances). The public guardian or conservator has the legal power to intervene as a surrogate to stabilize and secure the individual.

The program works closely with law enforcement, medical professionals, social service organizations, and abuse investigators from all county human service programs serving seniors and disabled adults to protect the well-being of this vulnerable population.

Percent of Clients with Urgent Needs Met Within Five Days, FY07-FY10



GateKeepers are community members who call with a concern about a senior or person with disability. Vulnerable, hard-to-find people are identified and are often not receiving services that they are eligible for.

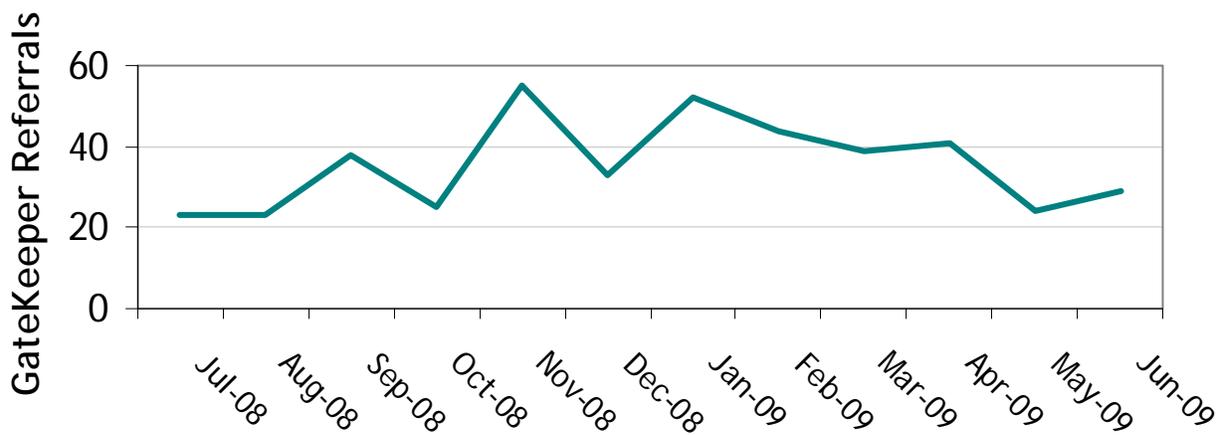
GateKeeper

Accomplishments:

- The GateKeeper program prepared for outreach expansion by applying for a grant to update and create new training materials, develop and innovate community partnerships, and recruit volunteer trainers. The program received the award in FY09; services will begin FY10.
- After-hours consultants have been granted remote rights to the state client database. When contacted, they are now able to review client histories and determine the most appropriate support.
- In order to provide consistent training to after-hours consultants who field GateKeeper calls, ADS videotaped a training explaining ADS services that could be used in future trainings.

THE GATEKEEPER PROGRAM IS AN OUTREACH EFFORT to identify, refer, and respond to at-risk older adults and people with disabilities living in our community. Gatekeepers are trained to identify warning signs for vulnerable and isolated adults.

Individuals such as utility company employees who in the course of their work day come into contact with older adults or people with disabilities are trained to look for signs of trouble and call the ADS Helpline (503.988.3646) when they become suspicious. An ADS case manager follows up with a home visit to investigate and provide needed services such as case management or abuse prevention. For fiscal year 2009, the program fielded 426 referrals.



Emergency Services programs served **831** clients through housing assistance, emergency prescription assistance and special medical needs.

Emergency Services

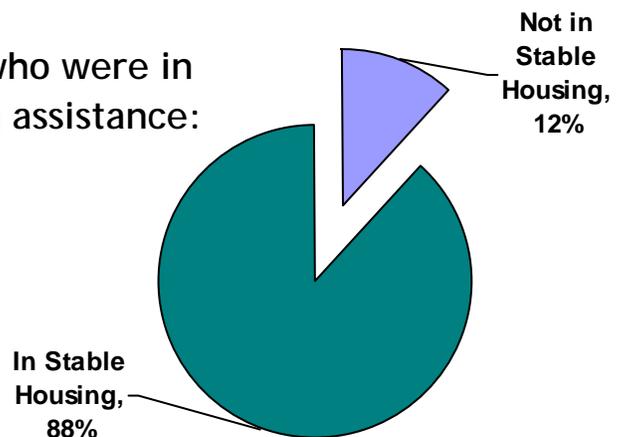
Accomplishment:

- ADS developed an excessive heat response plan for seniors and persons with disabilities in coordination with community partners and local emergency management representatives. The plan addressed: availability of senior cooling centers with senior specific programming and transportation support; distribution of air conditioners to medically fragile clients at risk of hospitalization or death; and increased client monitoring and public outreach to heighten awareness of heat-related vulnerabilities of the elderly and persons with disabilities.

EMERGENCY SERVICES HELP VULNERABLE ADULTS in Multnomah County through housing assistance, emergency prescription assistance, medical special needs and Multnomah Project Independence. The Emergency Prescription Assistance program is for uninsured seniors or those with out-of-pocket Medicare Part D costs, and for people with disabilities who are in the waiting period for Medicare. Housing Assistance is for those seniors and people with disabilities who are homeless, or at risk of homelessness, or in unsafe housing. The Special Needs program may cover durable medical expenses necessary to stabilize a client's medical condition or other life circumstance.

Multnomah Project Independence is for adults with disabilities 18-59 years old living in their own homes who need services but no longer meet the Medicaid financial criteria for in-home services. Possible services include transportation, prescription payment, meals and in-home services.

Percent of all housing clients in FY09 who were in stable housing 6 months after receiving assistance:



Jim Walsh

JIM HAS BEEN RECEIVING OPI HELP FOR A YEAR. Prior to that time he lived for over 30 years with an aunt and uncle until they both went into nursing homes and later died. He was employed in his younger years, often taking jobs that involved lifting and carrying heavy objects.

The hard physical labor took its toll on Jim and now he has limited mobility due to back pain and problems with his legs and he is reliant upon a walker to move around safely. In addition to the **pain** he suffers, Jim is treated for high blood pressure and a thyroid problem.

Jim feels fortunate because he lives in a low income senior complex where he pays monthly rent of \$128. However, his **medical insurance bill is \$627** each month, which is a large percentage of his monthly income of \$1,415 that he receives from social security and a pension. Through OPI Jim qualifies for **six hours of housekeeping assistance** each month, which costs the program \$95.30. During the housekeeper's visit his apartment is cleaned and sometimes the worker takes him shopping. A highlight of a recent trip was the opportunity to purchase an inexpensive Halloween costume for the party that is being arranged for apartment residents.

Through his case manager Jim learned about the **Cherry Blossom Senior Center** and he arranges **transportation** for himself to go and participate in some of the recreational activities. He is anxiously awaiting completion of the swimming pool at the center because his doctor has advised therapeutic swimming for his back. Jim also receives **Meals on Wheels** everyday at his apartment and looks forward to seeing the volunteer.



V. Appendices

Program Management
Community Partners
Funding Sources, FY10
Personnel, FY09
Budget, FY09



ADS Program Management

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Bob Palmer

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Mark Sanford

Public Guardian

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ADS Advisory Committees

Aging and Disability Services supports three advisory panels, also called "Advocates." the *Elders in Action* group represents the interests of older county residents; the *MAC*, or Multi-Ethnic Action Committee, represents minority seniors and people with disabilities. *DSAC*, or the Disability Services Advisory Council, represents the interests of people with disabilities.

Fran Ayerbil (Co-Chair, MAC)
Nicole Baker (MAC)
Lenore Bijan (EIA)
Betty Brislawn (EIA)
Patty Brost (EIA)
Ken Calvin (EIA)
Lois Chilcott (MAC and EIA)
Margaret Clark (EIA)
Ann Collins (EIA)
Michael Eagan (EIA and DSAC)
B.J. Findly Branch (EIA)
Theresa Flowers (EIA)
Lorraine Griffey (Chair, EIA)
Chris Hennel (MAC)
Ami Hsu (MAC)
Augusta B. Hayter (EIA)
Dolores Hubers (EIA)
Terry Johnson (EIA)
Christine Lau (MAC)
Victor Leo (MAC)

Fay Mack (MAC)
Mary MacKenzie (EIA)
Jose Martinez (MAC)
Sue Ofstad (Co-Chair, MAC)
LeRoy Patton (EIA)
Dan Pierce (EIA)
D’Norgia Price (MAC)
Claudia Robertson (EIA)
Sandra Rodriguez (MAC)
Bandana Shrestha (MAC)
Martha Simpson (EIA)
Frances Spak (EIA)
Mamak Tabrizian (MAC)
Nathan Teske (MAC)
Joe VanderVeer (Chair, DSAC)
Pam VanderVeer (DSAC)
Vince Wannassay (MAC)
Steve Weiss (EIA and DSAC)
Esther Whitingham (MAC)
Edna Williams (EIA)

EIA = Elders in Action
DSAC = Disability Services Advisory Council
MAC = Multi-Ethnic Action Committee

Branch Offices and District Senior Centers

West Area Services

The West District Offices serve people with disabilities living in Multnomah County west of the Willamette River.

West ADS Office
421 SW Oak St.
Portland OR 97204
503.988.5460

Friendly House Senior Center
1737 NW 26th Ave.
Portland OR 97210
503.224.2640

Neighborhood House Senior Center
1032 SW Main St.
Portland OR 97205
503.295.0044

Neighborhood House Senior Ctr.
7688 SW Capitol Hwy.
Portland OR 97219
503.244.5204

North/Northeast Area Services

The North/Northeast District Offices serve seniors and people with disabilities living in Multnomah County north of Burnside, east of the Willamette River, and west of 82nd Avenue.

North/Northeast ADS Office
5325 NE MLK Blvd.
Portland OR 97211
503.988.5470

Urban League Senior Center
5325 NE MLK Blvd.
Portland OR 97211
503.280.2632

Hollywood Senior Center
1820 NE 40th Ave.
Portland OR 97212
503.288.8303

Impact Northwest Senior Center
9022 N Newman Ave.
Portland OR 97203
503.285.6565

Southeast Area Services

The Southeast District Offices serve seniors and people with disabilities living in Multnomah County south of Burnside, east of the Willamette River, and west of 82nd Avenue.

Southeast ADS Office
4610 SE Belmont St., 2nd Floor
Portland OR 97215
503.988.3660

Impact Northwest Senior Center
4610 SE Belmont St.
Portland OR 97215
503.988.3660

Mid-County Area Services

The Mid-County Aging and Disability Services Offices serve seniors and people with disabilities living in Multnomah County east of 82nd Avenue and west of 162nd Avenue.

Mid-County ADS Office
10615 SE Cherry Blossom Dr.
Portland OR 97216
503.988.5480

IRCO Senior Center
10615 SE Cherry Blossom Dr.
Portland OR 97216
503.988-5480

East Area Services

The East District Offices serve seniors and people with disabilities living in Multnomah County on 162nd Avenue and in homes east of that street.

East ADS Office
600 NE 8th St., Rm 100
Gresham OR 97030
503.988.3840

YWCA Senior Center
600 NE 8th St.
Gresham, OR 97030
503.988.3840

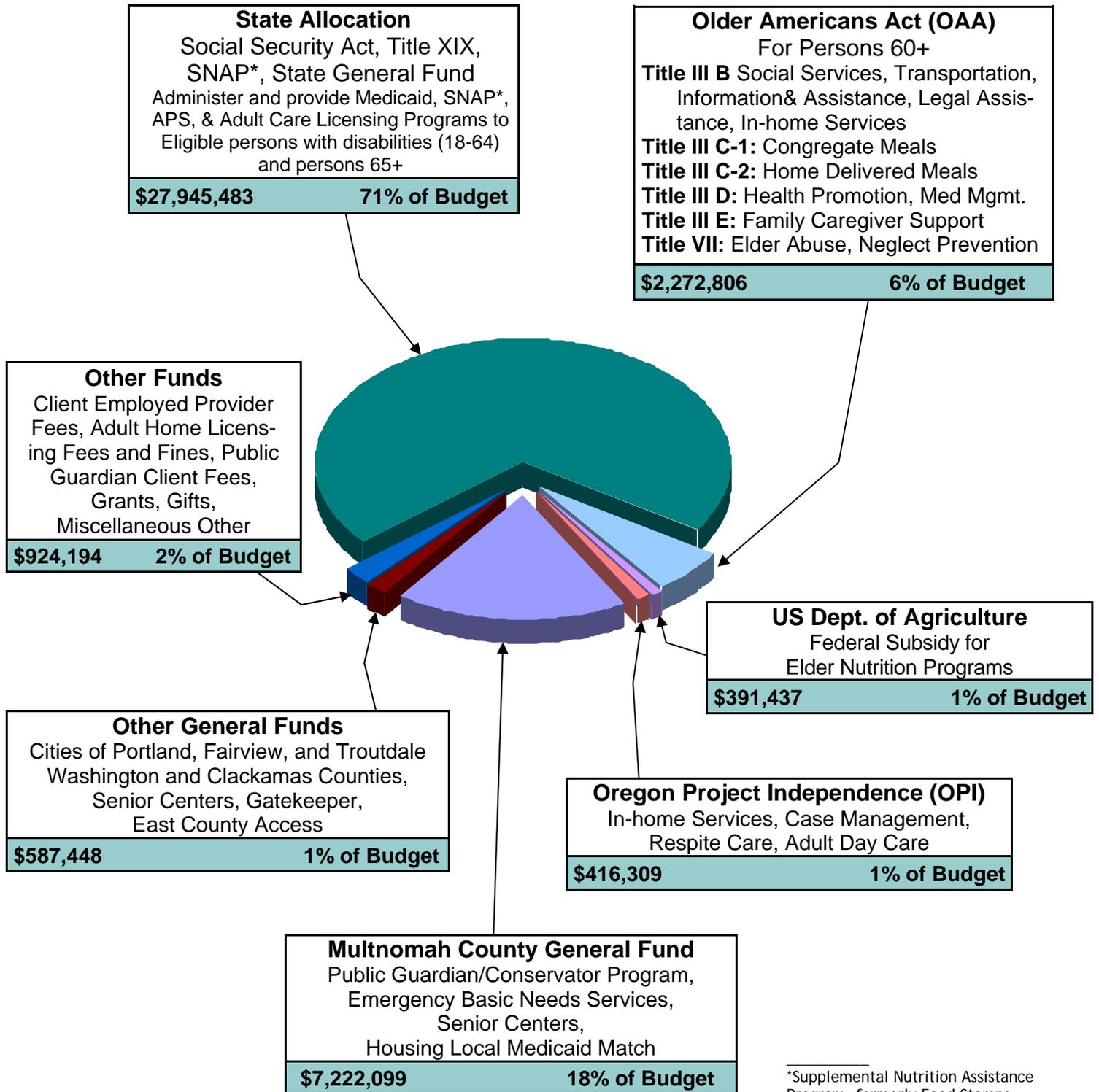
ADS Community Partners

Asian Health Center
Caregivers NW
East County YWCA
Elders in Action
Express Home Help
Friendly House
Green Transportation
Hollywood Senior Center
Homewatch Caregivers
Immigrant and Refugee Community Organization (IRCO)
Impact Northwest
IRCO Mid District Center
Legal Aid
Loaves & Fishes
Marquis at Home
Native American Recovery Association (NARA)
Native American Youth Association (NAYA)
Neighborhood House - SW
Neighborhood House - Downtown
North Impact
North YWCA
ProtoCall
Radio Cab
Store to Door
TriMet
Urban League
Volunteers of America

ADS by the Numbers, FY09

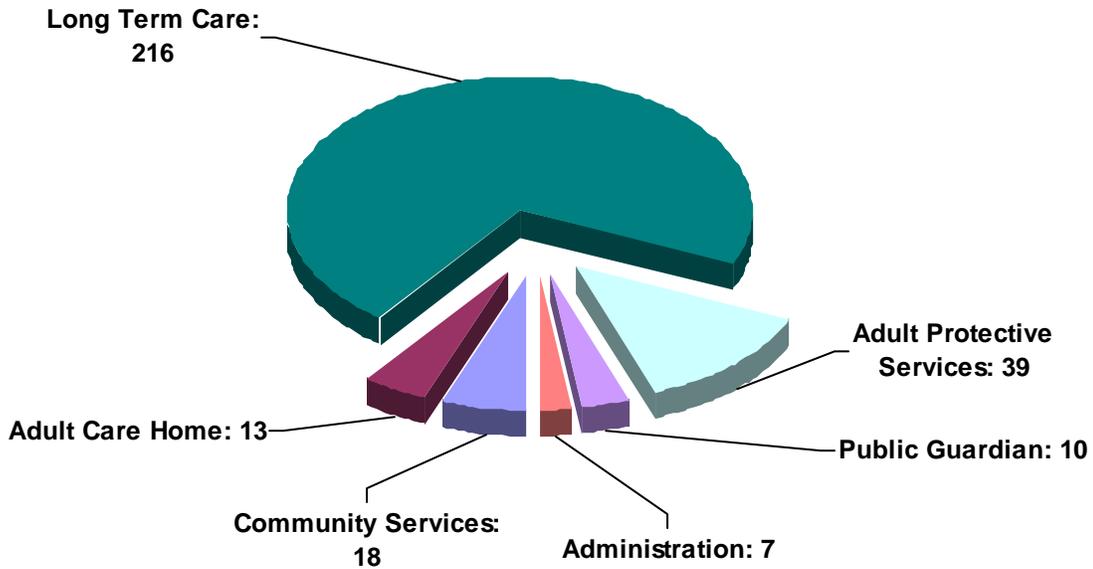
<i>Long Term Care:</i>		
Medicaid clients	30,542	
Food Stamp only clients	3444	
Subtotal Long Term Care		33,986
Info & assistance, info & referral	75,953	
GateKeeper program calls	426	
<i>District Senior Centers:</i>		
Case managed clients	2,668	
In-home clients	770	
Transportation clients	942	
Focal Point activities	6,505	
Health Promotion Activities	2,670	
Oregon Project Independence	1,074	
Family Caregiver Support Program	620	
LifeSpan Respite Care Awards	707	
<i>Emergency Services:</i>		
Housing Assistance	548	
Special Medical Needs	156	
Emergency Prescription	147	
SHIBA clients	2,268	
Multnomah Project Independence	139	
Ethnic Outreach Nutrition	677	
<i>Veterans' Services:</i>		
Claims filed	458	
Granted from VA	256	
Subtotal Community Services		10,227
<i>Public Guardian:</i>		
Total served	162	
Subtotal Public Guardian		162
<i>Adult Protective Services:</i>		
Abuse calls received	8,231	
Investigations completed	2,811	
APS Total Investigations		2,811
<i>Adult Care Home Program:</i>		
Homes Licensed and Inspected	565	
Number of Unduplicated Clients:		47,186

ADS Funding Sources, FY10



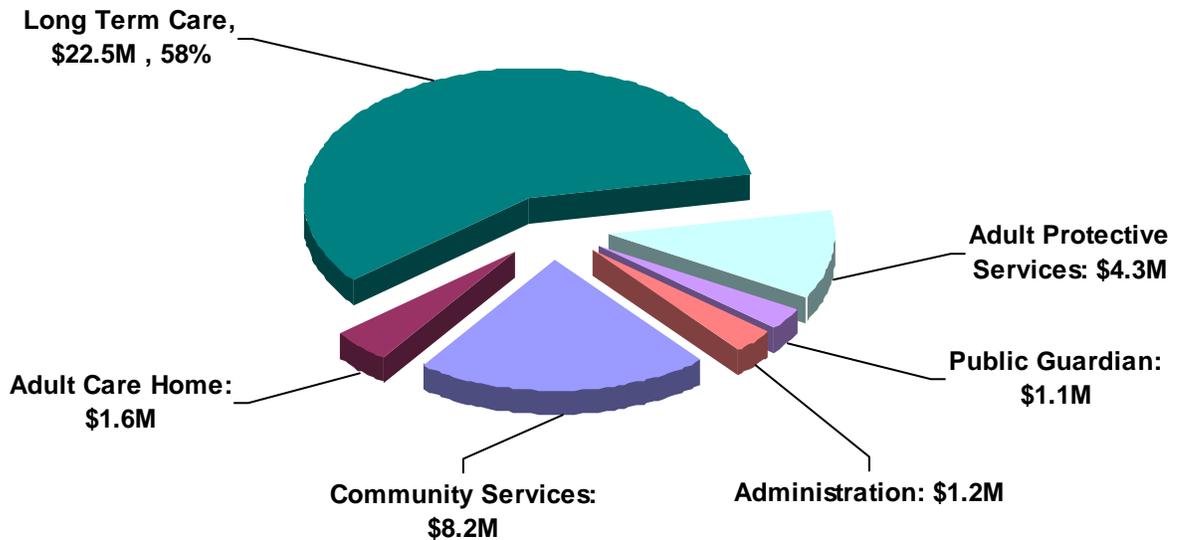
ADS Personnel, FY09

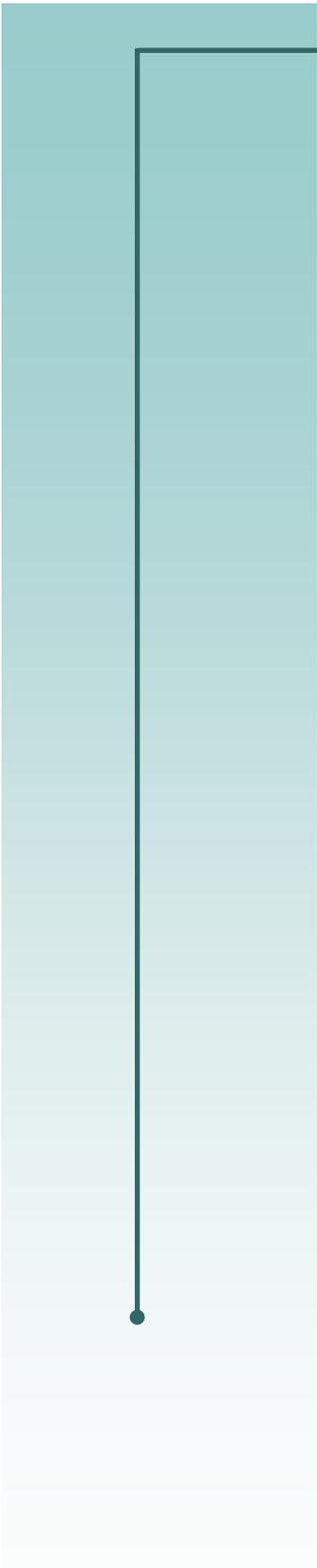
Total: 303



ADS Adopted Budget, FY09

Total: \$39,371,000





Multnomah County Aging and Disability Services
Department of County Human Services
421 SW Oak Street, Suite 510
Portland, Oregon 97204



Independence. Choice. Dignity.

ADS 24-hour Helpline: 503.988.3646

This publication is available at the ADS website:
www.multco.us/portal/site/ads