

Family Care Partnership

*A Collaborative Led by
Partners in Care Foundation*

AGING/INNOVATIONS

Community Alliances Conference

July 23, 2009

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Aging/Innovations



- Rapidly growing elder population
- Tremendous impact on caregivers
 - Impacts employment and employers
- Reductions in state safety net for aging and poor
- Time to transform fragmented care resources
- Integration of services, collaboration key

Sources: "How Employers Can Support Working Caregivers". [AARP](#). Jul. 2008.

"Selected Caregiver Statistics". [Family Caregiver Alliance](#). 2005.



- There are already 52 million informal family caregivers providing care to someone aged 20+ who is ill or disabled

Sources: “How Employers Can Support Working Caregivers”. [AARP](#). Jul. 2008.

“Selected Caregiver Statistics”. [Family Caregiver Alliance](#). 2005.



- Elders & disabled typically require health care services from numerous providers across several care settings each year
- Multiple studies reveal that the health care needs of disabled and older adults are poorly managed
- Most are left on their own to find and arrange the non-medical services they need to live at home and stay out of the hospital or nursing home



Who is the Care Recipient?

Care Recipient Primary Diagnosis CRC System (2005)	
Unspecified Dementia Disease	32%
Alzheimer's Disease	30%
Stroke/Vascular Disease	19%
Parkinson's Disease	7%
Traumatic Brain Injury	3%
Multiple Sclerosis	2%

“Under One Roof”



- Medicare does not pay for many services except for limited periods in hospice, discharge planning, and skilled nursing episodes
- Services from other sources are available but are neither integrated nor adequate
- End result is patchwork - with many missing patches

“Under One Roof”



- Currently 70% of elders live in their own homes and more than 80% indicate that they never want to leave
- To remain in the community, elders need a wide range of services and resources:
 - Help with Activities of Daily Living
 - Direct and indirect financial support
 - Help maintaining a home
 - Social services and support
 - Transportation and proper nutrition
 - Financial planning
 - Legal services
 - And other forms of assistance

“Under One Roof”



- Caregiving services today are fragmented, difficult to find, confusing, and often contradictory
- The problem is compounded as communities experience more aging, chronically ill, and disabled adult populations—and a corresponding rise in the number of caregivers





Caregivers need help with:

- Legal issues
- Health care coverage
- Care management
- Skills in providing care at home
- Transportation
- Respite
- Accurate information, and more

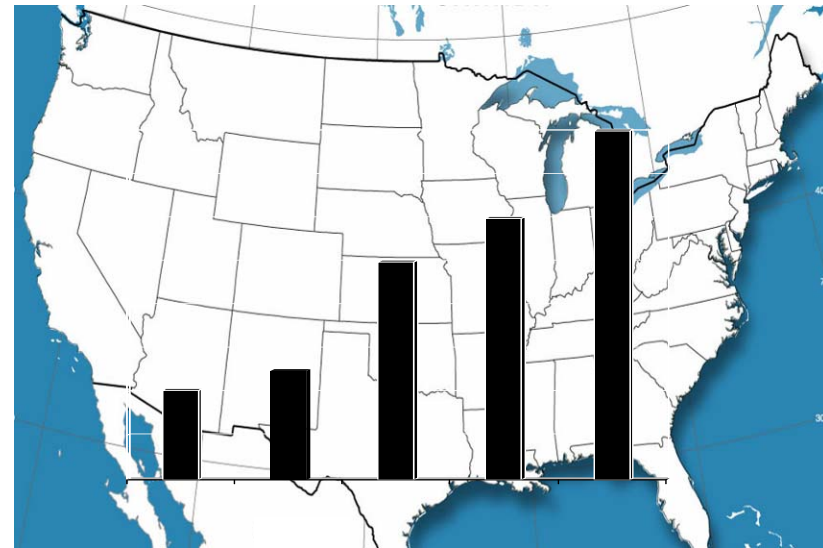
Caregiver’s Unmet Needs

- 35% report needing to find time for myself
- 29% need help managing emotional and physical stress and balancing work and family responsibilities
- 30% report needing help keeping the person they care for safe
- 22% report needing help talking with doctors
- 20% report needing help making end-of-life decisions

Dramatic Growth in Demand



- In 2006, the baby boomers began to turn 60 and in 2011, they will turn 65
- In 2007, 9,000 Boomers a day turned 60
- From 2010 to 2020, the 65+ population is projected to “spike” by 72%
- By 2030, one in five Americans will be 65 or older



“Under One Roof”



- Half of the U.S. labor force will be caregivers in 5 years
- 37% of Caregivers to persons age 50+ reported quitting their job or reducing work hours in 2007
- U.S. companies pay between \$17.1 and \$33.6 billion annually, depending on the level of caring involved, on lost productivity

Sources: “How Employers Can Support Working Caregivers”. [AARP](#). Jul. 2008.

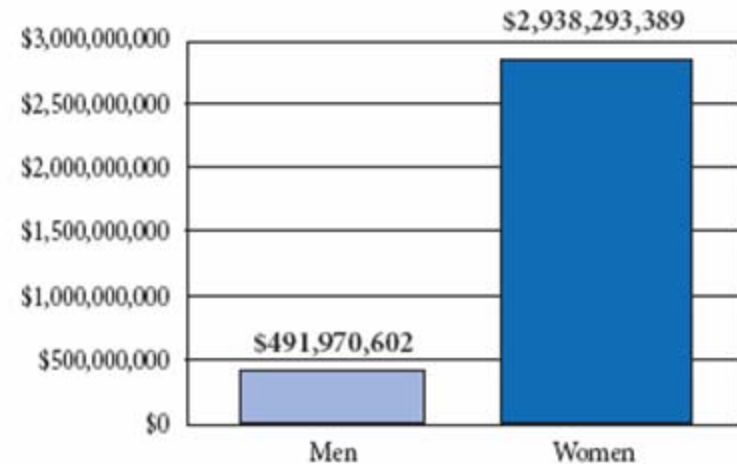
“Selected Caregiver Statistics”. [Family Caregiver Alliance](#). 2005.



Cost to Employers

- By attempting to coordinate fragmented care on their own, many caregivers compromise their own physical and mental health, as well as missing work days

Absenteeism Costs



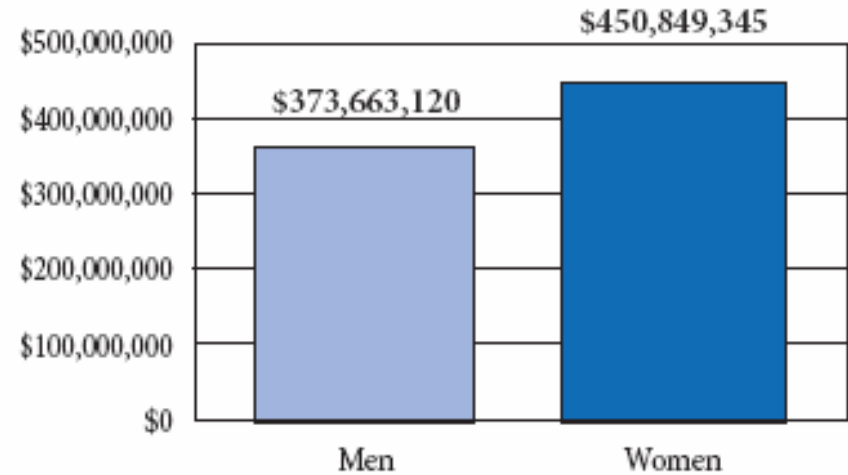
	Number Absent	Median Weekly Wage	Cost to Employers
Men	280,421	\$731	\$491,970,602
Women	757,136	\$588	\$2,938,293,389
Total	1,037,557		\$3,430,263,991



Cost to Employers

- Coming in late to work and leaving early are often associated with eldercare
- Estimate one hour a week for 50 weeks is lost on average

Costs Due to Partial Absenteeism



	# Unable to Make Up Missed Time (22%)	Median Weekly Wage	Cost to Employers
Men	357,817	\$731	\$373,663,120
Women	536,725	\$588	\$450,849,345
Total	894,542		\$824,512,465



Impact of Economic Conditions on Family Caregivers and their Ability to Provide Care

- A new study finds that during the past year, almost 20% of caregivers report a decline in the quality of care their loved ones receive as a direct result of the recession
- 14% say the amount of care they have been able to provide for others during this time period has decreased
- Survey shows 43% of working caregivers have experienced workplace pay cuts or a reduction in work hours



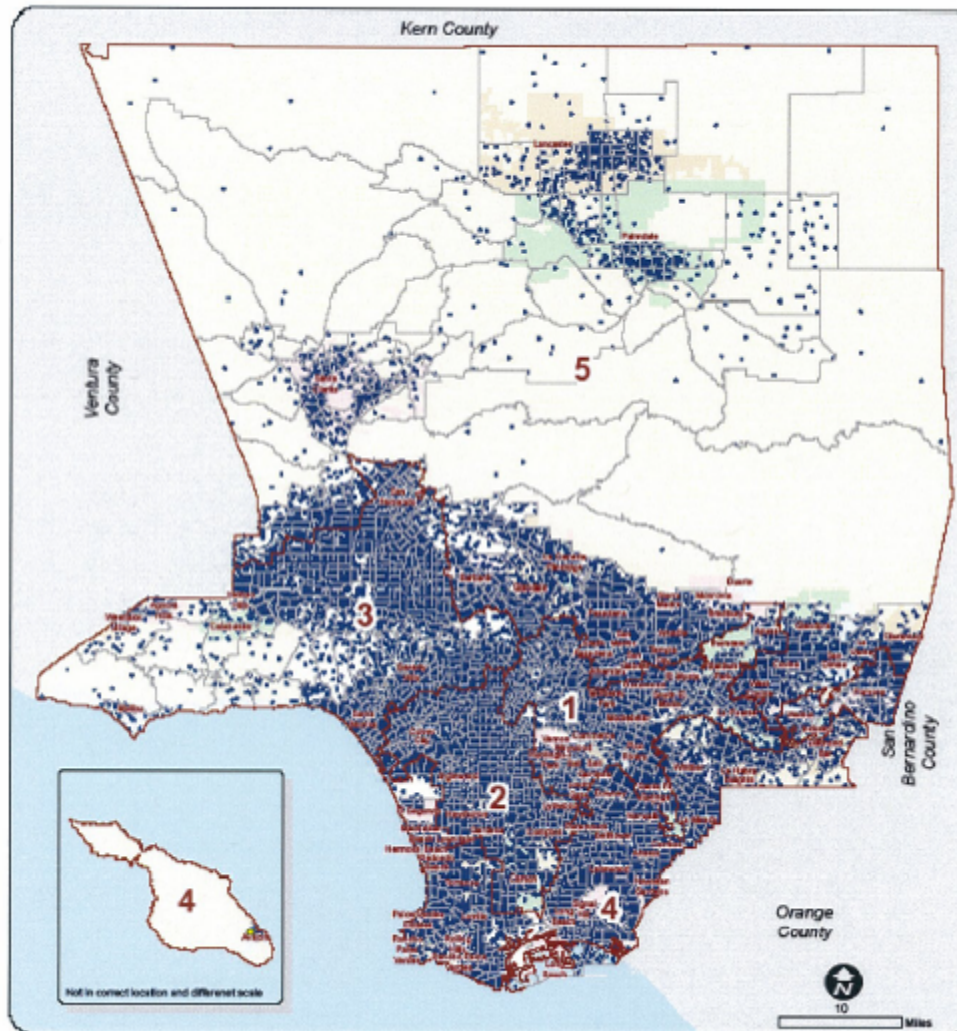
Impact of Economic Conditions on Family Caregivers and their Ability to Provide Care

- 15% have lost their jobs in the past year, adversely impacting their ability to continue caring for their loved one
- 51% of all caregivers surveyed are suffering from escalated stress over caregiving responsibilities as a result of the economic downturn, with half of working caregivers being less comfortable during the current economy asking for time away from work for caregiving duties
- The potential impact is that care recipients will experience greater risk in their health and well-being during these challenging economic times.



- National Initiatives in several areas:
 - ADRCs
 - Evidence-based health/prevention
 - NORCs – naturally occurring retirement communities
 - Mapping where clustered populations are
 - Identifying “accessible” populations

"Under One Roof"



Source of Data: 2000 Census, WRMA, CSS
Base map Data: Thomas Brothers
Prepared by LA County CBO/IB Urban Research
Map created on 2/28/08
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The Broad View



- **OVERARCHING GOALS:**
 - **AGING WELL**
 - Evidence-based programs
 - **AGING IN PLACE**
 - Family Care Partnership –
 - A Virtual “under one roof” for easy access to the full range of needed services

Sources: “How Employers Can Support Working Caregivers”. [AARP](#). Jul. 2008.

“Selected Caregiver Statistics”. [Family Caregiver Alliance](#). 2005.

Mission Statement:

- Family Care Partnership, through a network of experts working together, focuses on addressing the complex challenges faced by caregivers, seniors and disabled adults.





- **Goals:**
 - Ease of access for professionals & families
 - Efficiency, especially in face of cuts
 - Seamless for consumers
 - Restorative focus
 - Broader impact, using same services to meet more needs

Aging in Place



- Our recent local initiatives
 - Santa Clarita Adult Day Health Center
 - Hollywood Assistance League

“Under One Roof”



- Targeting is essential – need to design integrated systems for specific geographies and populations
- Health partnerships include the medical community (hospitals/physicians/insurers)
 - More focus on frailty and medical needs
- Service partnerships target care sectors care, e.g. Adult Day Health/Meals at Home
 - Focus on isolation, social engagement



- **Health Model:**
- Especially in the face of state cuts:
 - Bring together IHSS, MSSP, ADHC & health community to coordinate care for frailest
- **Community Model:**
 - Address aging well/health promotion
 - Address special needs such as isolation
 - Targets those at home, isolation in housing, retiree NORC



- Santa Clarita Family Care Partnership consists of representatives from:
 - The Alzheimer’s Association of Southern CA
 - Los Angeles Caregiver Resource Center
 - Center for Health Care Rights
 - The American Heart and The American Stroke Association
 - Bet Tzedek
 - Personal Assistance Services Council and In-Home Supportive Services
 - Grandparents as Parents
 - LETMESAIL
 - Santa Clarita Adult Day Health Care Center
 - Veterans Administration – San Fernando Valley
 - MSSP/Life is Better at Home South Los Angeles (a program of Partners in Care)
 - California Health Innovation Center

"Under One Roof"



Do you have questions about memory loss, Alzheimer's or dementia?

Are you caring for an aging or disabled parent, relative, spouse or friend?



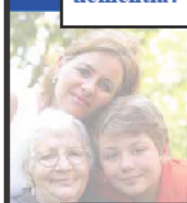
Are you getting the benefits you deserve?

"Ask an Expert" Saturday May 16th, 2009

Light refreshments will be served and items raffled!
Bring a friend!

10am- 12pm

Location: Santa Clarita Adult Day Health Care Center
22903 Soledad Canyon Road
Santa Clarita, CA



Are you looking for in home help and respite?

Are you parenting a grandchild?



Are you in need of emotional support?

Get advice and your questions answered on anything from Alzheimer's care to access to local services.

Our Expert Panel will consist of representatives from the following agencies:

- Center for Health Care Rights
- LA Caregiver Resource Center
- Grandparents as Parents
- Personal Assistance Services Council
- In Home Supportive Services
- Alzheimer's Association
- North Los Angeles County Regional Center
- Santa Clarita Adult Day Health Care Center

Special presentation from Brenda Avadian, MA

Author of eight books including, "Where's My Shoes? My Father's Walk through Alzheimer's".

Complete with tips for caregivers and ten warning signs of Alzheimer's.
TheCaregiversVoice.com

Please RSVP to Jillian at (818) 837.3775 ext.146 or jtarrab@picf.org
Seating Limited

Family Care Partnership is made possible by a grant from The SCAN Foundation.

Presented by:



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Hollywood Target Populations

- Home meals recipients
- Low income senior housing
- Retiree group
- Natural clusters





Family Care Partnership/Hollywood

Five unique populations have been identified within the Family Care Partnership/Hollywood service area:

- 1000+ clients receiving home delivered meals daily from two area agencies
- 112 residents and approx 150 wait-listed for low-income GLEH
- 800+ seniors living in three contiguous urban high-density residential blocks in Hollywood
- 1,002 members of the Motion Picture and Television Fund labor affinity NORC

Our goal is to integrate the services and programs provided by each of the member agencies to:

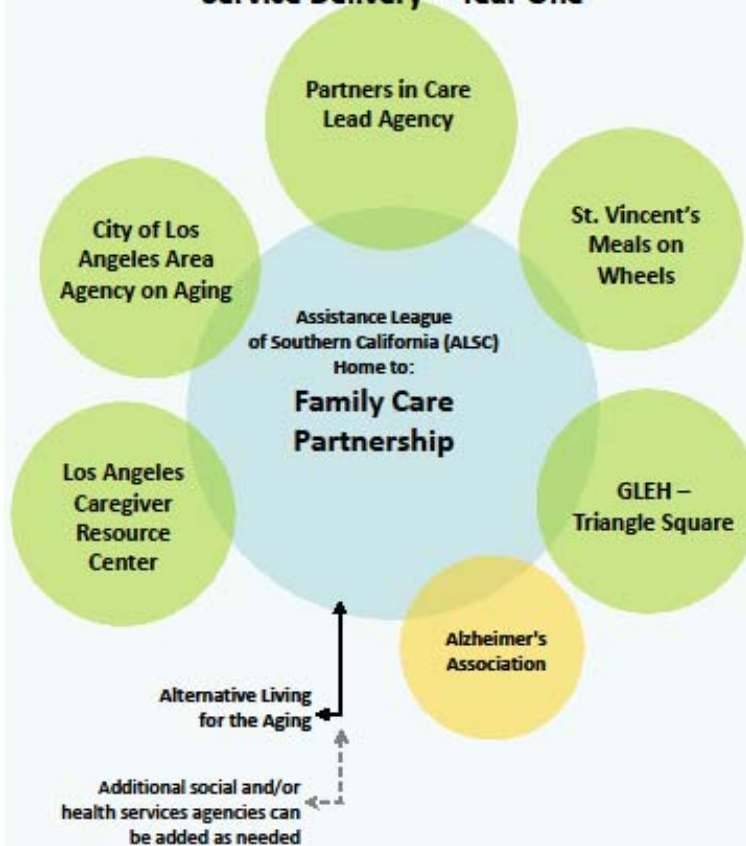
- Reduce isolation by moving clients into community-based services/activities to support successful social network development and restoration and/or maintenance of health
- Create efficiency through integration
- Develop a shared information technology system
- Eliminate redundancies in services and/or programs
- Expand evidence-based health and wellness programs
- Identify and serve additional eligible clients within the service area over time

Our priorities are:

- Economic security
- Social connectedness
- Optimal health and wellness

These three priorities form the foundation for successful aging in place.

Family Care Partnership-A New Model of Integrated Service Delivery -- Year One



Year Two

Motion Picture & Television Fund / ITN
MPTV has an 1,002 member labor affinity NORC

Veterans Administration
Additional social and/or health services agencies can be added as needed

Year Three

Additional social and/or health services agencies can be added as needed

“Under One Roof”



- Elements in building a collaborative:
 - Sizeable population in need
 - Shared perceived agency need
 - Aligned strategic incentives
 - Strong stable natural integrator

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- Prime drivers:
 - Breakdown of safety net will drive us together
 - Inspiring vision
 - Grants – possibility of money and honor
- The time is now – challenge and opportunity

“Under One Roof”



Please visit our website
www.picf.org