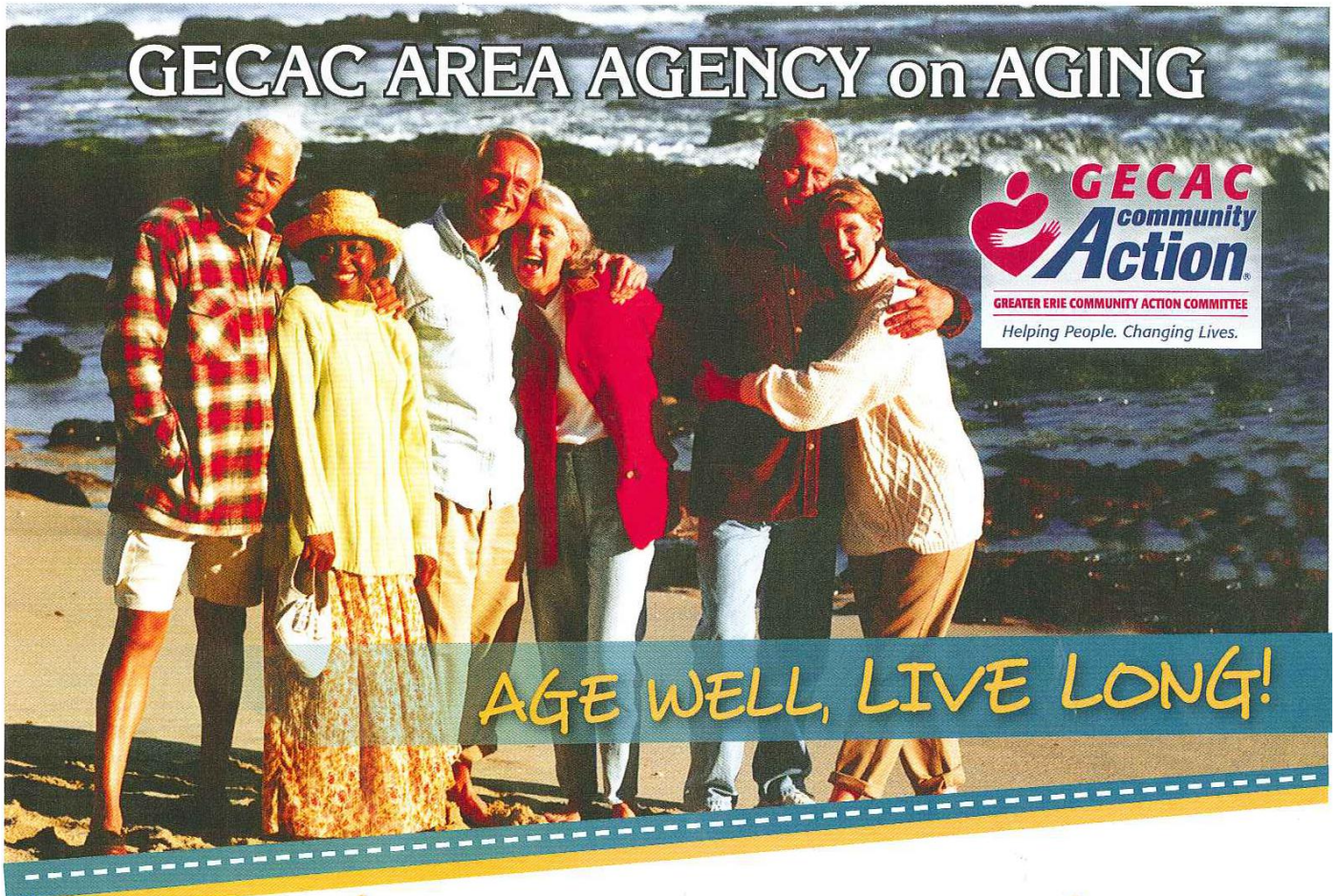


**2016 – 2020 Plan  
GECAC Area Agency on Aging  
PSA #01  
Erie County, Pennsylvania**



7/1/2016

Greater Erie Community Action Committee (GECAC)

2016 – 2020 Plan  
Area Agency on Aging  
PSA #01  
Erie County, Pennsylvania

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# 2016-2020 Area Agency on Aging Four Year Plan Erie County, PSA#01

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## 1. EXECUTIVE SUMMARY

To provide for the older adults in Erie County, the Greater Erie Community Action Committee (GECAC), was designated the **Area Agency on Aging (AAA)** for Planning & Service Area #01 in 1974. As mandated under the federal Older Americans Act, GECAC AAA is the focal point in the community for seniors and caregivers to understand the services available to them set forth in Pennsylvania Act 70. Through these state and federal laws, AAAs are mandated to identify and maximize resources and develop new methods of partnering and coordinating services with other providers and stakeholders while advocating for the needs of senior citizens.

This document provides the background that went into preparing the GECAC AAA to meet its mandate for the years 2016-2020. It builds upon **the experience and knowledge of** the designated AAA for Erie County since 1974. The AAA Plan summarizes **the areas of need expressed by older Pennsylvanians, their families, advocates, and representatives of agencies serving older people and people with disabilities in the Erie area.** This 2016-2020 plan was established with public input from consumers, professionals and government sources. It takes a community approach to providing services to seniors to include not only those provided by the AAA, but also supportive and collaborative local community-based organizations including a network of private service providers, faith-based entities, paid and unpaid caregivers, non-profits, public funded supports, and individuals willing to volunteer.

The plan for the Area Agency on Aging for 2016 – 2020 focuses on four themes issued by the PA Department of Aging (PDA):

- **Promote existing services**
- **Improve access to services**
- **Enhance quality of services**
- **Empower the workforce**

- **Promote existing services**

**Goal #1: Older adults in need of protective services have a safety net.**

- The objective of the *first goal* is to be a resource for ensuring safety and wellness of those vulnerable older adults who fall victim to abuse, neglect, abandonment or exploitation.

**Goal #2: Enable older adults to live independently in the community.**

- The objective of the *second goal* is to provide supportive services in the home that enable individuals identified with needing support to accomplish Activities of Daily Living/ Instrumental Activities of Daily Living (ADL/ IADL) to live independently in the community and avoid institutionalization for proper care.

- **Improve access to services**

**GOAL #3: Enable older adults to become informed about their individual needs and the available resources of support in the Erie community.**

- The objective of the *third goal* is to provide counseling and education of services available as evidenced by the number receiving Person Centered Counseling, Health Risk Assessment, Level of Care to document their awareness of the long term services and supports available to them in the community and enable them to make an informed decision on how their needs are met, how they are paid for and how they are provided.

- **Enhance quality of services**

**Goal #4: Enhance preventive health promotion efforts and nutritional programs to encourage older adults to develop healthier lifestyles.**

- The objective of the *fourth goal* from all the input, focus groups and data is to expand the health education of older adults through evidenced based preventative workshops and nutritional benefits through home delivered meals and congregate meals, as well as nutritional benefits to seniors.

- **Empower the workforce**

**Goal #5: The GECAC AAA seeks to empower the workforce by enhancing the time and talents of the 59,000 adults over the age of 60 in Erie County through increased volunteer opportunities to support the workforce.**

- The objective of the *fifth goal* from all the input, focus groups and data is to tap the resource of our active seniors and engage them into the community through meaningful and purposeful volunteer opportunities that help support the workforce to meet the needs of those with the greatest economic and social needs.

These themes and goals for Erie County are designed to align to national goals and initiatives including meeting the needs of those with the greatest economic and social need for the more than 59,000 persons age 60 years or older in Erie County.

## 2. AGENCY OVERVIEW

### Organizational Structure

#### Mission, Vision and Values

#### GECAC AAA Mission

**To serve the physical, social, and emotional needs of the senior citizens of Erie County by providing various informal and formal supports in a cost-effective manner, enabling seniors to make informed choices, to remain independent and to be involved in the community. We believe that all seniors have the right to be treated with respect and dignity and to maintain their chosen lifestyle in the least restrictive environment possible.**

#### Vision

We believe that seniors should have a choice of their desired environment and be treated with respect and dignity. We strive for all seniors to have adequate access to the services and supports needed to meet their needs, including physical, mental, and social when necessary through the work of the AAA or other organization. We are committed to eliminating the neglect, abuse and exploitation of seniors.

#### Values

- We believe that services should be focused on consumers' needs and choices, that they should be treated with dignity and respect to allow person centered choice. We believe in cooperation and collaboration with other providers. We have a commitment and dedication to what we do.
- Consumers should not be shamed for needing help. We maintain cultural awareness and provide an equal opportunity for services. We do not discriminate or condone discrimination. We believe that seniors should not be neglected, abused, nor exploited.
- Our workers don't impose their values or judgments on consumers. We maintain confidentiality; we do not take advantage of our authority. We have a proactive approach to services and provide proactive outreach and preventative services to assist individuals avoid crisis situations. We do not turn clients away without trying to make a referral or help.

## GECAC and the AAA organizational structure

In 1974, the Greater Erie Community Action Committee (GECAC) was designated as the umbrella agency to manage the Erie County Area Agency on Aging in Pennsylvania Public Service Area (PSA) #01. GECAC is Erie County's designated Community Action Agency, formed in 1965. Services are provided through four operational divisions offering coordinated assistance from preschool aged children to the elderly. A combination of local, state and federal public and private monies are utilized to fund programs and activities.

GECAC Erie County Area Agency on Aging is regulated by the Pennsylvania Department of Aging (PDA) located in Harrisburg, Pennsylvania. This department mandates program descriptions and procedure manuals. Annual operational plans, monthly reports and various program audits are required to ensure uniform compliance with PDA regulations. In addition, the Pennsylvania Department of Human Services / Office of Long Term Living (OLTL), provides oversight on the Aging Waiver and other Medical Assistance (MA) funded long term care programs operated by GECAC AAA.

### Greater Erie Community Action Committee (GECAC)

is Erie County's designated community action agency formed to provide advocacy and diverse services directed toward the elimination of poverty and the causes of poverty. GECAC is dedicated to empowering individuals and families to improve their quality of life through

- the advancement of opportunity for education and training,
- the opportunity to work, and
- the opportunity to live in decency and dignity.

The GECAC Board of Directors maintains legal jurisdiction concerning personnel, fiscal accountability and overall operation of the GECAC Erie County Area Agency on Aging, with day-to-day operations managed by the Chief Executive Officer and executive management staff of the agency. In addition, the GECAC Erie County Area Agency on Aging has an independent Advisory Board, which meets on a regular basis. Advisory Board members include representatives from local

government, consumers, a member of the GECAC Board of Directors, and other community-based agencies.

The Greater Erie Community Action Committee (GECAC) leverages base funding through the Community Services Block Grant (CSBG) and its mandated tri-partite Board of Directors to develop local plans and programs in response to the needs of Erie County, PA. This coordination focuses on the needs of the Erie County residents and establishes programs and supports to bring a comprehensive network of services and information to sustain older adults and their caregivers.

The GECAC Erie County Area Agency on Aging (AAA) is designed to secure and encourage maximum independence and dignity for persons capable of self-care, with appropriate supportive services for those less functional. GECAC AAA provides a continuum of community-based care services for people in greatest social and economic need. The AAA informs each consumer of the services and programmatic processes that meet their needs, helps identify problematic issues, and offers suggestions and guidance to other supportive entities, such as PA Independent Enrollment Broker (PAIEB), LINK to Aging and Disabilities Resource Center (ADRC) Partners, LIFE NW PA, and other community partners to ensure appropriate service.

The strength of this network of services is coordination, which provides continuous continuity of care options for our consumers. The GECAC Erie County Area Agency on Aging actively participates in local (Independent Council on Aging of Erie), regional, state PA Association of Area Agencies on Aging (P4A) , and national organizations (American Society on Aging and National AAA Association (N4A) who work together to bring national consultants to address issues that relate to the senior citizens of the Erie County. National Council on Aging; American Society on Aging; AARP; and National Adult Protective Services Association (NAPSA) and others.

These organizations help to insure a professional effort in meeting the needs of senior citizens throughout the service area. This coordinated network in Erie includes the Erie County Department of Human Services, the Erie County Aging and Intellectual and Developmental Disabilities (IDD) Team; periodic meetings with area hospital social services departments; Nursing Facilities; and coordinated activities with the local law enforcement entities and the judicial system. The primary



challenge of these current systems is the constant lack of appropriate resources to meet the ever-increasing service demands of those in need.

### **GECAC AAA Services**

The following chart details the number of services provided by the GECAC Area Agency on Aging during the 2015-2016 program year. These services were provided through the following programs: Intake and Assistance/ Referral, Pre Admission Assessment, Aging Block Grant Options Services, Family Caregiver Support Program, PA Aging Waiver, Senior Citizens Centers, Home Delivered Meals, Ombudsman, Senior Advocate, Adult Protective Services, and Domiciliary Care.

<b>Consumers Served by GECAC Area Agency on Aging (AAA)</b> (SAMS Data During the Period 7/1/2015 to 6/30/2016)			
Total Erie County population		Unduplicated Consumers Served by GECAC AAA	
Age 60+	59,283	5,778	9.7% of total population
Age 80+	13,247	2,706	20.4% of total population

The following senior centers operate in Erie County, PA:

#### **GECAC Operated Senior Centers**

##### **CORRY SENIOR CTR.**

25 First Avenue Corry, PA 16407  
814-664-2477

##### **NORTH EAST SENIOR CTR.**

50 Main Street North East, PA 16428  
814-725-5195

##### **ERIE WEST SENIOR CTR.**

1210 West 8th St. Erie, PA 16502  
814-451-4563

##### **UNION CITY SENIOR CTR.**

27 Johnson St. Union City, PA 16438  
814-438-2146

##### **NORTHWESTERN SENIOR CTR.**

9 Academy St. Albion, PA 16401  
814-756-5373

##### **TRI-BORO SENIOR CTR.**

7555 West Main St. Fairview, PA 16415  
814-474-2211

##### **R. BENJAMIN WILEY CENTRAL CITY SENIOR CTR.**

823 Peach St. Erie, PA 16501  
814-451-5633

#### **Non - GECAC Operated Senior Centers that receive funding through AAA:**

##### **LIFEWORKS ERIE**

406 Peach St. Erie, PA. 16507  
814-453-5072

##### **MERCY HILLTOP CENTER**

444 East Grandview Blvd. Erie, PA. 16504  
814-824-2214

##### **JOHN F. KENNEDY SENIOR CENTER**

2021 East 20th St. Erie, PA. 16510  
814-898-0400

GECAC AAA services include the following consumers served (not unduplicated):

<b>Assessment for care:</b>	<b>2,272</b>
<b>Care Management:</b>	<b>1,269</b>
<b>Senior Citizen Center:</b>	<b>1,516</b>
<b>Home Delivered Meals:</b>	<b>281</b>
<b>Adult Protective Services:</b>	<b>577</b>

## Demographics

The 2015 Census results highlight the following population in Erie County:

	<u>2010</u>	<u>2015</u>
Total Persons residing in Erie County	<b>280,766</b>	<b>278,045</b>
• persons age 60 and older	<b>56,408</b>	<b>59,283</b>
• persons age 65 and older	<b>40,824</b>	<b>44,765</b>
• age 75 and older	<b>14,991</b>	<b>20,210</b>

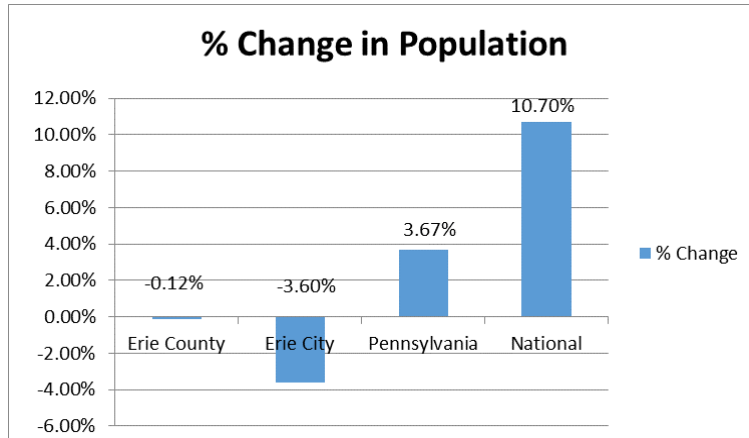
## General Description

Erie County is located in northwestern Pennsylvania on the south shore of Lake Erie. The state of New York is its eastern boundary, and the state of Ohio is its western boundary. Crawford County, Pennsylvania lies to the south. The county has a total land area of 799 square miles. Forestland constitutes 36.5 percent of the land area, with crop and pastureland composing 26.8 and 7.7 percent respectively.

According to the 2015 US Census population estimates, Erie County's population is 278,045, showing that the county population has remained relatively steady from the 2000 Census population of 280,843. Approximately eighty-one percent (81.2%) of the area's population is urban, residing chiefly in and around the city of Erie and a small urban cohort (6,420) in the city of Corry in southeastern Erie County. The 2015 estimates reported the City of Erie's population is 99,475, approximately 35.7% of the county population.

## Population: Population Change

Population change in Erie county from 2000-2013 is shown in Table 1. During the thirteen-year period, total population estimates for the area declined by -0.12 percent, decreasing from 280,843 persons in 2000 to 280,518 persons in 2013. The City showed a -3.6 % change in the same period.



**Table 1. Population Change 2000 - 2013**

County	Census 2000 Population	ACS 2009 - 2013 Population	Population Change	% Change
Erie	280,843	280,518	-325	-0.12%
Erie City	103,717	100,832	-2885	-3.6%
Pennsylvania	12,281,054	12,731,381	450,327	3.67%
National	281,421,906	311,536,591	30,114,685	10.70%

Source: [United States Census Bureau, Population Division, Census 2010. Release Date: February 2011](#) and [United States Census Bureau, American Community Survey, 2013 Data Release, December 2014.](#)

The 2013 American Community Survey 5-year data is a 5-year average of data collected from 2009 through 2013.

## Population Trends

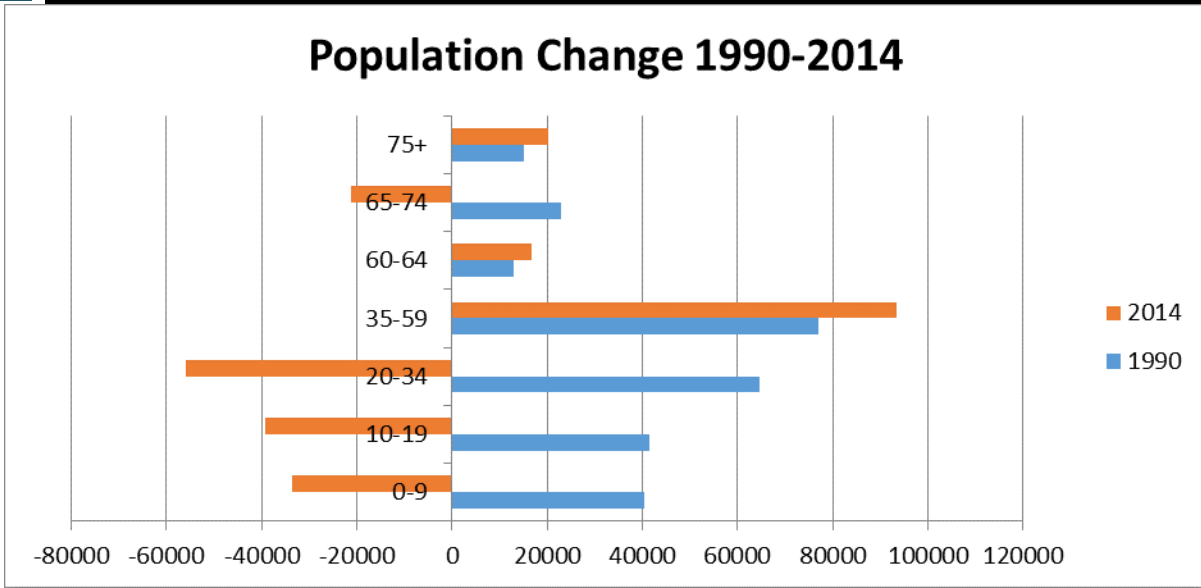
The population of Erie County has not varied more than two percent plus or minus 279,780 since 1974. The 2000 and 2010 Census population show that this trend continues.

### TOTAL POPULATION

	<u>1990</u>	<u>2000</u>	<u>2010</u>	<u>2015</u>
Erie County	275,572	280,843	280,566	278,045
Erie City	108,079	103,717	101,786	100,832

Erie County has not escaped the nationwide aging trend. A thriving community must include independence, dignity and health and well-being for our older residents. Nearly 25% of seniors are still working in order to afford medicine, rent and food. Therefore, these seniors, mostly women, require training and placement.

	1990 Population		2000 Population		2014 Population		Estimated Change	
							1990-2014	
	#	%	#	%	#	%	#	%
0-9	<b>40,366</b>	14.60%	37,437	13.30%	33,687	12.00%	-6,679	-17.8%
10-19	<b>41,956</b>	15.20%	42,655	15.20%	39,247	14.00%	-2,709	-6.4%
20-34	<b>64,717</b>	23.50%	55,644	19.80%	55,898	19.90%	-8,819	-15.8%
35-59	<b>77,506</b>	28.10%	94,149	33.50%	93,412	33.30%	15,906	16.9%
60-64	<b>13,002</b>	4.70%	10,702	3.80%	16,735	6.00%	3,733	34.9%
65-74	<b>23,034</b>	8.40%	19,968	7.10%	21,319	7.60%	-1,715	-8.6%
75+	<b>14,991</b>	5.40%	20,288	7.20%	20,210	7.20%	5,219	25.7%
	<b>275,572</b>	100.00%	280,843	100.00%	280,508	100.00%	4,936	1.8%



The above chart shows a disturbing trend in Erie County. The age cohorts between 0 and 34 have lost members since 1990. In a healthy community these cohorts would be expanding not contracting. The population loss in the 20 to 34 age group is especially troubling. This age group represents the future if it is shrinking so will the overall population. Worse this age group represents the children of the still healthy 35-59 cohort. If the children have left the area the parents who have the resources will follow as they reach retirement age to be near the children and grandchildren. **This will leave the Erie area population older, poorer and sicker.**

Another trend is the increase number of grandparents caring for grandchildren. The number of grandparents living with their own grandchildren under age 18 is 5,209 (increased from 4,996 in 2010).

### **Poverty population**

Poverty is very much a reality for young and old in Erie County. Over 43,438 residents of Erie County, or 16%, are below poverty standard. Only 8.6% of those over age 65 are below the poverty standard. In the City of Erie, the overall poverty rate is 25.1% and 14.3% for those over age 65. (B17001 ACS 2014). The numbers of impoverished women in Erie County between the ages of 16 and 24 rose nearly 34% when comparing 2005-2009 to 2010-2014 US Census data. That percentage was much higher in the City of Erie, with 2238 women age 18 to 24 living in poverty in 2010-2014, up 57.4 percent from 1,427 women in 2005-2009.

The poverty line is the level of income below which one cannot afford to purchase all the resources one requires to live. People who have an income below the poverty line have no discretionary disposable income, by definition. Poverty rates for those under the age of 18 are 24.7. (US Census Bureau, 2010)

GECAC has traditionally served the most poor of these seniors. Twenty-five percent of the seniors responding to a recent survey of GECAC AAA reported household incomes below the poverty level. Fifty-two percent reported incomes below 150% of the poverty level. This also is evidenced by the low percentage of seniors who are cost sharing for services. Currently, less than 5% of all GECAC AAA consumers cost share for services.

Public Assistance enrollments have stayed steady over the past year in Erie County, changing only by tenths of percentages from month to month. Erie County ranks second in the state for persons receiving cash assistance as reported by the Pennsylvania Department of Human Services (DHS). In December 2011, 6,992 (2.5%) Erie County residents received cash assistance benefits. Erie County's numbers are well above the Pennsylvania state average of 1.7%. (PA Department of Human Services, 2011)

## **Home and Community Based Housing**

According to the 2015 estimates from U.S. Census, Erie County had a total of 120,094 housing units, 79,862 (66.5%) of which were occupied by the owner. Single-unit structures comprise the majority of this total – 81,565, or 68.4%. Of all multi-unit structures, smaller complexes (those with four or fewer units per structure) are the most prevalent making up 51% of the multi-unit total. (US Census Bureau, 2010)

41.9% of Erie City housing stock (DP 04 Selected Housing Characteristics 2010-2014) is prewar and as such needs more maintenance. Large numbers of these homes have little or no insulation as was the practice in those times. These inner city homes are overwhelmingly occupied by low income residents who have few resources to maintain or update their dwellings. The cost to heat the homes puts a real strain on already tight budgets. While GECAC weatherizes 30 homes per year with 60 to 80 houses on the wait list and at least another 80 available to us at all times and Utility Assistance and Neighbor for Neighbor help to stabilize these families during the cold winter months, more needs to be done to help families conserve energy, preserve financial resources and have healthier and safer environments for their families.

## **Long term Institutional Care**

The number of persons residing in Long Term Care Nursing Facilities in 2015 was 1,932, which is near the overall Erie County capacity of 2,250 nursing home beds in 20 licensed facilities. Additionally, Erie County has 24 Personal Care Boarding homes with a maximum capacity of 1,472 beds. Continuing Care Retirement Communities, Senior Living Communities and other entities also abound in the Erie area to provide a continuum of care for seniors from independent living apartments, to supported care, personal care, assisted living, rehabilitative and nursing facilities. In the 2012 AAA Consumer Survey, respondents overwhelmingly said that there was “adequate choice of long term care facilities in Erie County” as 78% agreed with this statement. Dementia/ Alzheimer beds however, are scarce and quickly becoming in demand as consumers live longer and the incidence of these

afflictions become more prevalent. The local county operated nursing facility 2010 strategic plan indicates:

“About 17 percent of long-stay residents have a primary diagnosis of Alzheimer's or dementia, or are in a special program for individuals with behavioral problems...” and “There are a number of statistics and leading indicators that the number of individuals with Alzheimer's disease will grow.”

#### **Nursing Facilities (N) and Personal Care Homes (PCH) with Alzheimer/ Dementia Units**

Barnabas Ct. Brevillier Village (PCH)	Pleasant Ridge Manor West (N)
Forestview (N)	Saint Mary's at Asbury Ridge (PCH)
ManorCare Health Services -Erie (N)	Saint Mary's Home of Erie (N)
Manchester Commons (N & PCH)	Sunrise Senior Living (PCH)
PA Soldiers and Sailors Home (N)	Sarah Reed Senior Living (PCH)

Besides Nursing Facilities and Institutional Care there are multiple rehab and acute care facilities including: **St Vincent Hospital, UPMC-Hamot, Millcreek Community/LECOM, Erie Veterans Medical Center and Corry Memorial Hospitals**. Other facilities for care include Health South Rehabilitation, LECOM-at Presque Isle (ability to care for ventilator dependent residents) and Select Specialty, along with the Transitional Care Unit at Millcreek Community Hospital. Three entities offer Adult Day Care centers (Saint Mary's East Adult Day, NW PA LIFE Program and Barber National has 3 locations) as another option for seniors to have their care needs met.

The total number of institutional Medicare and Medicaid providers, including hospitals, nursing facilities, federally qualified health centers, rural health clinics and community mental health centers for Erie County is shown in Table 48. According to the U.S. Department of Health and Human Services, there were 77 active Medicare and Medicaid institutional service providers in the report area in 2014.

**Table 48. Institutional Medicare and Medicaid Providers, 2014**

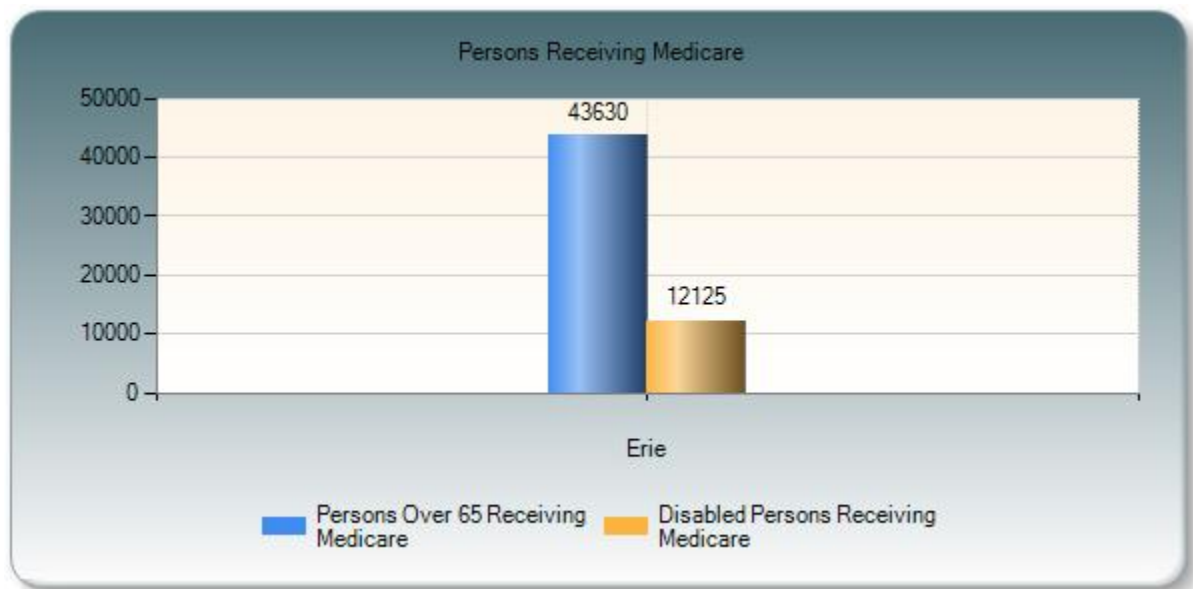
County	Total Institutional Providers	Hospitals	Nursing Facilities	Federally Qualified Health Centers	Rural Health Clinics	Community Mental Health Centers
Erie	77	7	20	6	2	0

Pennsylvania	2,780	257	700	205	69	16
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Source: [United States Department of Health and Human Services, Centers for Medicare and Medicaid Services, Provider of Services File, Second Quarter, 2014.](#)

### Health Care: Persons Receiving Medicare

The total number of persons receiving Medicare is shown, broken down by number over 65 and number of disabled persons receiving Medicare for Erie County in Table 49. The U.S. Department of Health and Human Services reported that a total of 55,755 persons were receiving Medicare benefits in the Erie County in 2012. A large number of individuals in our society are aware that persons over 65 years of age receive Medicare; however, many of them are unaware that disabled persons also receive Medicare benefits. A total of 12,125 disabled persons in the report area received Medicare benefits in 2012.



**Table 49. Medicare Enrollment by County, 2012**

County	Persons Over 65 Receiving Medicare	Disabled Persons Receiving Medicare	Total Persons Receiving Medicare
Erie	43,630	12,125	55,755
Pennsylvania	2,100,850	472,898	2,573,748

Source: [United States Department of Health and Human Services, Centers for Medicare and Medicaid Services, Medicare County Enrollment Report, 2012.](#)



## Public Transportation

The “e”, the Erie Metropolitan Transit Authority (EMTA) serves the city of Erie and the contiguous suburban areas. Although bus transportation is relatively inexpensive, busses do not provide the needed flexibility in routing and scheduling. The EMTA maintains a traditional, radial bus system with all routes running through downtown Erie. Only four (4) bus routes travel to communities in the county. Local bus ridership is increasing. From an eight-year low in 2003 of 2,727,307 riders a year, patronage grew to 3,408,171 in 2010, which includes schoolchildren, daily riders to Edinboro and weekly riders to Corry and along the Lake Erie shore.

## Para-Transit

The LIFT services Erie County with 29 vehicles. These vehicles are used for transporting the elderly, the handicapped and the general public in over 800 trips per day. Average trip length is eight miles and lasts one-half hour. The LIFT is a subsidized program that is available to any elderly or disabled resident in Erie County.

## Health

Erie County ranks poor in healthy behaviors (65<sup>th</sup> out of 67 PA Counties according to Robert Wood Johnson Foundation’s County Health Rankings data for Erie County, PA 2016). Primarily this is due to obesity, smoking, and physical inactivity. Interestingly, Erie County ranks high in the area of “Access to exercise opportunities” (with Presque Isle State park and other biking and jogging areas.)

Those reporting the highest rates of poor health status include females (16%), those over the age of 65 (25%), those with less than a high school education (40%), and those earning less than \$25,000 a year (26%). As is the case with many health indicators, education and income levels have a strong influence on health status. As education and income increase, so does one’s chances for better health status. Transversely, the lower one’s education and income level, the more likely they will have poor health status. Although new research published in JAMA suggests that this does to have to be the case:

Nora Super Chief, Programs & Services, n4a & Project Director, the National Aging and Disability Business Center

“Yet new [research in JAMA](#) shows a widening age gap between the rich and poor: the richest American men live 15 years longer than the poorest; for women, the gap is 10 years. While this may not be surprising, what is more surprising is that *where you live* has a strong influence on *how long you live*—regardless of income, education, and race. What can we learn from the communities where everyone is living longer, even the low-income?

There is hope. Low-income individuals tend to live longer and adopt healthier behaviors in cities—such as San Francisco and New York City— with highly educated populations and high levels of government expenditures. Makes sense, right? When we surround ourselves by others who exercise, eat healthy foods and don’t smoke, we are more likely to maintain a healthy weight and reduce the impact of chronic disease. When we live in communities that invest in the health and well-being of their residents—by spending more government dollars on health promotion and interconnected health and long-term services and support systems—longevity increases for all.”

Just over two-thirds of Erie County residents are overweight or obese according to the most recent data available from the Erie County Behavioral Risk Factor Surveillance System Survey. Erie residents have a higher rate than both Pennsylvania and the United States. Having 68 percent of residents overweight or obese is too high for good health, any way you look at it.

Obesity is an epidemic in our country. The cause for this exponential increase in weight gain across the country in the past decade is a combination of sedentary lifestyles coupled with unhealthy eating habits. There is a very simple solution to this problem: eat less and move more. And yet, the problem, along with waistlines, continues to grow. Those most likely to be overweight or obese include Erie County residents with less than a high school diploma, residents who earn less than \$25,000 a year, and males.

Erie County has traditionally had relatively high rates of smokers. Despite a dip in 2007, the rate of smokers has crept up to 27 percent in 2013. Even more distressing is the widening gap between Erie County smoking rates and state rates. While Erie County adult smokers have increased to 27 percent of the adult population, the state rate remains steady at 22 percent and the nation has dropped

to 19 percent. This is concerning, since smoking causes lung cancer and heart disease and is one of the leading causes of preventable deaths. Erie County residents who are most likely to smoke cigarettes are 18-to-44 year olds, males, those without high school diplomas, and those who earn less than \$25,000 a year.

Getting adequate regular physical activity continues to be a problem for adults in Erie County. In 2011 (the most recent data for this indicator), 28% of adults in Erie County reported being physically inactive—an increase from 2007 when only 24% of adults in Erie were physically inactive. This rate is higher than the national rate, the statewide average, and the benchmark average for the regions against which Erie is compared. Those most likely to be physically inactive include those Erie County residents who are not high school graduates, who earn less than \$25,000 a year, and who are 65 and older.

Much of the data for the above Health Indicators come from the Behavioral Risk Factor Surveillance System (BRFSS) Survey.

### **Local, political and economic conditions**

The Erie Area has recently been home to numerous study groups and civic improvement movements all of which have reached out to the community to provide input to develop community wide plans. Rather than duplicate these efforts GECAC has chosen to pull from these citizens based inputs to inform our Community Need Statement. These movements include Erie Together, Emerge 2040 and the City of Erie's new comprehensive plan.

#### Erie Together

Erie Together is a movement of hundreds of local individuals, organizations, and businesses working together in strategic ways to prevent and reduce poverty, elevate prosperity, and make the Erie region a community of opportunity where everyone can learn, work and thrive.

In 2006, The Erie Community Foundation convened a panel to study the prevalence and impact of poverty in our community. After extensive research, in 2007 the group released its findings in a report entitled, ["The High Cost of Poverty: It Affects Us All"](#).

Following the study, three organizations - The Greater Erie Community Action Committee (GECAC), United Way of Erie County, and Mercyhurst University - came together to identify ways to address the issue. After extensive due diligence regarding best practices elsewhere in the United States and beyond, these three entities launched Erie Together in 2009.

#### Emerge 2040

*Emerge 2040 Erie* brought Erie County residents and leaders together to create a common vision and action plan to meet the challenges facing the region in the 21st century. The vision reflects the values of the community as collected in interviews, public meetings and forums throughout the process. The process focused on the issues, opportunities and connections between the housing, transportation, environment, infrastructure and economic systems, with a focus on implementation and capacity building in the region. The plan emphasizes Erie County and its 38 municipalities, while the economic growth component is broader in scope, encompassing Erie County as well as the four adjacent counties of Warren and Crawford Counties (PA), Chautauqua (NY) and Ashtabula (OH).

#### City of Erie Comprehensive Plan

The City of Erie Comprehensive Plan addresses Erie's future needs in a number of areas, including housing, transportation, land use and economic development. The plan recommends, among other things, that the City of Erie should develop market-rate and mixed-use housing in targeted areas; build consistent, high-quality downtown streetscapes; create an "iconic connection" between Erie's Bayfront and its downtown; improve Erie's 12th Street industrial corridor via redevelopment of mixed-use spaces and strategies to lure new businesses there; establish more parks and green spaces along bayfront neighborhoods; develop strategies to encourage homeowners to reinvest in their properties; and look for ways to attract private financial investment for various projects. "I think it's a good plan, although it might be tough to implement some of the things," said Planning Commission member Don Marinelli, a licensed real estate appraiser. "It's going to take a lot of people coming together.

## Description of AAA needs assessment

The methodology for gathering public input into this 2016-2020 Aging Four Year Plan included: focus groups held with AAA staff (June 13, 2016), Corry Senior Center (June 7, 2016) and Foster Grandparent Program in-service (May 23, 2016); and other well-attended community events, such as the distribution of Senior Farmers Market Nutrition Vouchers, yielded over 500 survey responses.

Through the series of focus groups and surveys, it has been determined that the needs of older persons in Erie County mimic those of the state and nation and include the following issues: Financial, Health, Caregiving, Housing and Transportation.

The summary of the survey results indicates that a majority of professional staff feel that: **Health, Education, Affordable Housing and Transportation** are the key needs.

The older adults in the community and consumers who responded feel: **Health Care Costs, Income, and Social Security** are the key needs.



### **Identification of resources that could be accessed**

As Pennsylvania plans to implement and adjust to the Community Health Choices (CHC) model of long term services and supports by January 2019, it is difficult to assess the next four years (2016- 2020) with any degree of certainty.

The goal is to reinforce the supports that family, friends and neighbors can provide so that community entities, such as faith-based organizations, non-profits and other public, private and non-profit organizations, have the common mission to assist older adults maintain independence, thrive in the community and live in decency and dignity.

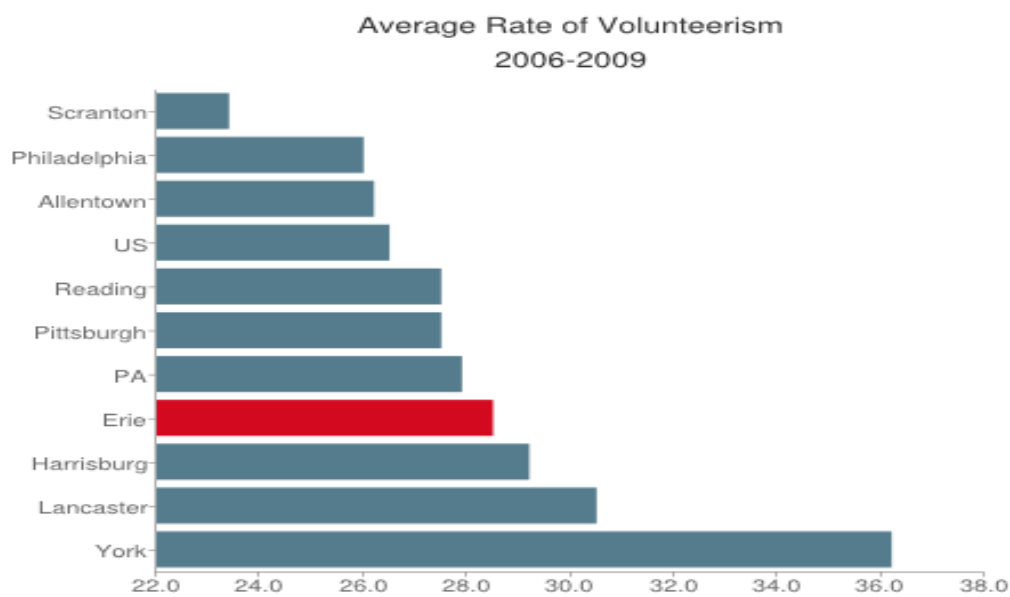
There is also a unique focus on improving the health care of consumers and the three important revolutions of DNS Genome sequencing, technology that provides instant health data and the collective data warehousing provide a backdrop for some potential game changing and revolutionary advances in medicine and longevity.

GECAC AAA can impact this area of health by continuing to provide what it always has and what it has seen as the most valuable resource and most impactful model on older adults. Casework and the coordination of multiple supports to effectuate change in condition. Over the years, there has been no better outcome than having a skilled, trained and observant case worker to conduct in-home visits with consumers to know their household and their primary needs. This same caseworker can not only document the situations, but provide very specific targeted services and supports to enhance the quality of life of individuals on their caseload. The continued Options (Aging Block Grant), Waiver (Medical Assistance Service Coordination) and future Managed Care Organization (MCO) supports and services empowers the case workers to impact and properly address the needs efficiently and effectively for a large number of consumers served.

To support this goal, a robust network of volunteers should also be established using existing resources such as the neighborhood-located senior centers and Senior Corps programs - Foster Grandparent Program (FGP) and Retired and Senior Volunteer Program (RSVP). Volunteers can simultaneously reward themselves with the benefits of volunteerism as well as provide and maintain an

older adult through caregiving and other purposeful tasks that help others. Volunteers will be critical as supports not always funded sufficiently to meet needs.

Although we realize that **volunteers cannot do everything, volunteers certainly are vital to enable local agencies to continue to provide essential services while public funding diminishes.**



### 3. GOALS / OBJECTIVES/ STRATEGIES

The progressive models of evidenced-based care as indicated in the Affordable Care Act (Health Care Reform) of March 2011 include the following tenets: Person Centered, Aging in Place, and communities that encourage the development of Naturally Occurring Retirement Communities.

The goal is to reinforce the supports that family, friends and neighbors can provide so that community entities, such as faith-based organizations, non-profits and other public, private and non-profit organizations, have the common mission to assist older adults maintain independence, thrive in the community and live in decency and dignity.

To this goal GECAC provides supports through the neighborhood-located senior centers and Senior Corps programs - Foster Grandparent Program (FGP) and Retired and Senior Volunteer Program (RSVP) – that recruit more than 700 Erie older adults to be involved in the community to assist with children’s education, local



nonprofits and other entities beneficial to the community. Although we realize that volunteers cannot do everything, volunteers certainly are vital to enable local agencies to continue to provide essential services while public funding diminishes.

Older adults require protection from abuse and advocates that will assist them in obtaining services and benefits. To keep seniors living independently in their own homes, they require recreational and social activities as well as nutritional meals, safety checks and resources for caregivers.

The GECAC AAA's 2016 – 2020: Plan for Erie County strives to achieve the following goals:

### **Theme 1: Promote existing services**

#### **GOAL #1: Older adults in need of protective services to have a safety net.**

The objective of the *first goal is* to **be a resource for ensuring safety and wellness of those vulnerable older adults who fall victim to abuse, neglect or exploitation.**

#### **Goal #1 Strategies:**

- This goal is to be a resource for ensuring safety and wellness of those vulnerable older adults who fall victim to abuse, neglect or exploitation. A disturbing trend over the past several years of increased Reports of Need referrals under the Older Adult Protective Services Act continues and is growing as economic and community pressures mount on already marginalized households, many individuals have crisis that require costly immediate interventions and services. This trend is similar to using the Emergency Room for medical treatment, rather than getting preventative care and making healthy lifestyle choices. This goal will provide a safety net for those in crisis. The list of Erie area stakeholders in the welfare of the older adult includes every aspect of our community. There are many whose mission is focused on the medical physical health, many on the mental and spiritual health and still many others that are focused on the social health and quality of life for older adults.

- This safety net will include Ombudsman, for those individuals receiving long term services and supports.

## Theme 2: Improve access to services

### GOAL #2: Enable older adults to live independently in the community.

- The objective of the *second goal* is to **provide supportive services in the home that enable individuals identified with needing support to accomplish Activities of Daily Living/ Instrumental Activities of Daily Living (ADL/ IADL) to live independently in the community and avoid institutionalization for proper care.**

#### **Goal #2 Strategies:**

- The strategy for attaining this second goal will be to continue to enhance the supportive services provided older adults and track those who do in fact remain in independent living situations.
- Long Term Services and Supports are provided through a variety of programs including Aging Block Grant Options Program, Caregiver Support Program, and Service Coordination of the Aging Waiver Medical Assistance Program, Nursing Home Transition, Money Follows the Person, Home Plus Program funded by the local Housing Authority of City of Erie, and Community Based Care Coordination funded by UPMC Health Plans.

### GOAL #3: Enable older adults to become informed about their individual needs and the available resources of support in the Erie community.

- The objective of the *third goal* is to **provide counseling and education of services available as evidenced by the number receiving Person Centered Counseling, Health Risk Assessment, Level of Care to document their awareness of the long term services and supports available to them in the community and enable them to**

**make an informed decision on how their needs are met, how they are paid for and how they are provided**

**Goal #3 Strategies:**

- This goal supports the Administration on Aging initiative of Person Centered Counseling as well as furthers the goals of the LINK to Aging and Disability resources. The goal is to explain all the available programs, program eligibility criteria, service providers and care plan development and enable people quick access to the network of supports and assistance. The ultimate goal is to streamline the access and eligibility determinations for those in need, this is a new innovative initiative of both federal and state level funders. GECAC AAA will combine the efforts of APPRISE, Veterans Administration, Centers for Independent Living (CILs) and other community partners, to innovate the way Information and Referral are handled between Erie County service providers. The key components which define ADRCs include: 1. Assessing, 2. Planning Care, 3. Monitoring, 4. Coaching, 5. Chronic Disease Self-Management, 6. Educating and Supporting Caregivers, 7. Coordinating Transitions, and 8. Access to Community Services.

**Theme 3: Enhance quality of services**

**GOAL #4: Enable older adults to remain healthier through increased nutrition and socialization opportunities.**

The objective of the *fourth goal* from all the input, focus groups and data is **to continue to provide timely service to increase socialization and recreation activities, as well as, nutritional benefits to seniors.**

**Goal #4 Strategies:**

- Under Innovation, the GECAC AAA will increase participation at the seven GECAC operated Senior Centers through healthier and enhanced nutrition options. Nutrition buffet cart equipment was purchased and installed to supplement and enhance the nutritional services provided to participants. These will enable centers

to innovate the way they provide meals and nutritional support to participants, as well as, add the potential for optional income-generating components as the increased choices from this innovation attracts new center participants.

- The innovation of the Buffet Stations serve a multipurpose need of expanding nutrition services while also elevating the appeal of the Center and visibility of all its programs.
- The benefits include increased and healthier nutrition options. For those seniors utilizing the breakfast option, we anticipate that they will stay at the Center and participate in more programming, including classes for exercise, computers, and more.

#### **Theme 4: Empower the workforce**

**GOAL #5: Empower the workforce by expanding the number of aging network volunteers who support the workforce and enhance their capabilities through education and training.**

##### **Goal #5 Strategies:**

- Assess current volunteer capacity within GECAC AAA's programs including Retired Senior Volunteer Program (RSVP), Foster Grandparent Program (FGP), APPRISE counseling volunteers; Ombudsman volunteers and Senior Community Center volunteers-and identify the areas needed more support from volunteers based on current capacity to projected need.
- As part of the volunteer development plan; explore innovative volunteer engagement approaches, such as self-directed volunteer teams.
- Work with local volunteer coordinators and PDA program areas to develop and implement a volunteer marketing recruitment and development plan to engage volunteers from diverse communities to serve as liaisons in their respective communities for targeted aging network programs and services.
- As part of the volunteer development plan, engage trusted community groups as a potential pool for volunteers.

- Leverage existing resources and programs that coordinate volunteers to combine areas to enhance the capacity to recruit, retain and support volunteers. Explore the management capacity of volunteer coordinators through education and training, dissemination of best practices, lessons learned, and on-site technical assistance and support. Work with community entities that develop and implement a process for auditing the quality and identifying best practices of local volunteer management programs. Create a cultural competency training plan for volunteers who will serve diverse communities and ensure a multilingual volunteer corps in the aging network.
- The GECAC AAA seeks to empower the workforce by enhancing the time and talents of the 59,000 adults over the age of 60 in Erie County. These individuals are our greatest untapped resource, and providing them with meaningful and purposeful volunteer opportunities is a goal of the AAA. The benefits of volunteering go beyond the good feeling that comes from helping others and changing lives; it also engages these seniors into the community and provides them with continuous activity to meet the challenges of society. Volunteer opportunities will be expanded in the following areas:
  - APPRISE - Health Insurance and Person Centered Counseling
  - Foster Grandparent Program (FGP)
  - Ombudsman Program
  - PEER - Pennsylvania's Empowered Expert Residents
  - Retired Senior Volunteer Program (RSVP)
  - Meals for Seniors through Center Congregate and Home Delivered Meals

## 4. PERFORMANCE MEASURES

### Promote existing services

#### **Goal #1: Safety Net**

**Of the expected 300 Reports of Need for older adults taken each year by the AAA, it is anticipated that one third of these will result in a substantiated risk identified**

and a care plan implemented and their issues resolved as guided by the Older Adults Protective Services Act, thus alleviating and mitigating their crisis.

**Goal #2: Care needs to maintain independence**

Of the more than 59,000 individuals in Erie County over age 60, at least 1,500 each year will be able to remain in home and community based settings through GECAC AAA providing services to maintain their independence. Services will be tracked via SAMS to indicate those older adults who have an identified need (through either Needs Assessment Tool, Care Management instrument or other standard tool) and are successful in staying in the community and avoiding institutionalization via their identified needs and subsequent access to supports and services.

**Improve access to services**

**Goal #3: Outreach, Health Education and Individual Needs:**

Of the estimated 5,000 inquiries made of the Erie County AAA each year, at least 30% (1,500) will be given successful counseling and education of services available as evidenced by the number receiving Person Centered Counseling, Health Risk Assessment, Level of Care to document their awareness of the long term services and supports available to them in the community by either completing being referred to complete an Assessment, APPRISE Medicare Counseling, OMBUDSMAN consultation, or referred to proper community supportive services.

**Enhance quality of services**

**Goal #4: Healthier Seniors**

To measure the success of goal four the number of older adults eating congregate meals, receiving meals at home and participating at centers will be tracked. This goal will include use of innovative nutritional programs at centers and to provide a holistic program that includes volunteerism and community involvement helping older adults live healthier. The milestone for this fourth goal is: **Of the more than 59,000 persons age 60 years and older in Erie County, at least 10% will be provided each year with**

nutritional benefits through either congregate (1,700) or home-delivered meals (585).

### **Empower the workforce**

#### **Goal #5: Expanding the number of Volunteers to Support the Workforce**

GECAC provides supports through goal #5 to recruit more than 500 older adults in Erie to be involved in the community by creating a volunteer opportunity and placing an older adult into the opportunity to assist with children's education, local nonprofits and other entities beneficial to the community.

**Of the more than 59,000 persons age 60 years and older in Erie County, at least 500 will be placed each year into a meaningful volunteer opportunity through RSVP, FGP, Ombudsman APPRISE, or at senior community centers.**