

A-3 PLANNING AND REVIEW PROCESS:

Scope of Need:

The SE/ALTC service area includes eight counties in south central Washington.



SE/ALTC Service Area

Agriculture is the primary source of stability in the economy of all of the counties except Benton and Franklin. Agriculture provides income and wealth in widely disparate (and potentially divisive) ways. There is a saying: “Those who grow, glow; those who pick and sort, fall short.” In the population of the elderly and the disabled, these disparities surface in key areas relevant to the Area Plan: nutrition and hunger, transportation to nutrition and health care appointments, access to information (especially on computers), health care access, and the housing options available to age in place.

The primary minority population in our service area is Hispanics. Most of the elderly Hispanics have experienced health issues related to early years of very strenuous physical labor, exposure to pesticides, and repetitive functions that can damage the arms, elbows and shoulders needed for work in canneries. Many do not have or never have had access to any consistent health care, especially during the

years of most intense physical work. Access to other services has been hampered by language barriers and fear of bureaucracies they do not understand.

Elders of any minority or special population tend to be the poorest members of our society and often this is worse for women. In rural areas, regardless of economic need, seniors and the disabled have long distances to travel, usually without benefit of public transportation. Senior Centers with limited resources have struggled to keep up with the need for services to the rural areas.

Services to the disabled tend to be adequate when the person is very disabled, is eligible for assistance through the Division of Developmental Disabilities (DDD), or has access to a good support system among family members, friends, or church. Even then, the central issues here are isolation, advocacy, and limited knowledge among physicians regarding chronic disease.

Note: One frustration in the planning and review process and the scope of need is that SE/ALTC lost 9% of its OAA, Respite, Family Caregiver, and Senior Citizens Service Act (SCSA) funds through a 2002 to 2007 shift of resources to other areas of the state. It is difficult to plan in an environment whose resources have not only not kept up with 7% inflation but have also further been eroded to the more urban areas of the state.

Persons Consulted:

SE/ALTC is especially challenged when trying to provide planning in eight different counties. In order to accomplish this, a series of forums were held, beginning in the fall of 2006 and continuing through June of 2007. Several members of the SE/ALTC administrative staff were trained in group process and facilitation so that there could be a wide variety of subject areas considered. Forums were offered in Kittitas County, Upper Yakima County; Lower Yakima County; Walla Walla/Columbia counties, Benton/Franklin counties; and Asotin/Garfield counties. Participants at each group session were separated by interest areas and asked a series of need-related questions. Each table reported shared their suggestions and concerns with the entire group, affording an opportunity for additional input. A summary of each table's points was recorded for later use. The effort to present these forums included two days of training and six forums including staff time from eight individual members of the administrative staff: Helen Bradley, Carolyn New, Sheila Brogdon, Eliticia Sanchez, Sue Bubnash, Joyce Lucas, Lori Brown, Lynne Van Horn and LPC's Merletta Roberts, Corrie Blythe, Rosemary Meyer, Dorothy Reynolds, Mary Cleveland, Virginia Vogel, and Jane Clear. Each LPC made specific phone calls after the invitations had been sent to request that key staff from various agencies join us for the forums. In addition, SE/ALTC Advisory Board members, as well as several local I&A office staff, participated in all counties.

In addition to the forums, SE/ALTC distributed a series of need-related surveys to agencies and Advisory Board members

for distribution to specific target groups such as low income or disabled seniors, patrons of SE/ALTC-funded or public transportation, and minority health care consumers.

In counties where there is a senior network or a health care access team, those individuals were included both in the forums and as key informants. Examples include the Senior Network in Ellensburg and the Yakima County Health Care Coalition.



Coming Of Age seminar participants learn about aging options

Tools Employed: Hand-delivered surveys; forums as described above; data searches and consultation with key stakeholders comprised the variety of methods used to gather data. Key stakeholders included mental health professionals, physicians, nurses, county and city planners, emergency medical personnel, aging partners, contractors, social service agencies, and staff members from 211.



SE/ALTC Administration office resource library in Yakima

Resources: Census data, ADSA service data, regional demographic reports from Office of Financial Management (OFM), county planning data (where available) and data from national sources such as the National Association of Area Agencies on Aging (N4A), AARP, Administration on Aging (AoA), National Council on Aging (NCOA), NACO, United Way, the Neurological Center, and the Alzheimer's Association.

The SE/ALTC Advisory Board consists of six to eight members from each county who meet six times a year in Pasco. Additionally, local Advisory Boards meet twice a year for planning and allocations. The Advisory Board participated in a forum at one of its meetings in the same format as was used for those described above, grouping each county as a single table, and reviewing the topics in order. In addition, SE/ALTC held several informational forums to raise awareness of topics related to the area plan: Senior Centers (history, services, funding challenges); Elder Friendly Communities (speaker Jerry Fireman, Planner, Snohomish County); adult day health services; Elder Abuse (Speaker was

Advisory Board member who also is in law enforcement);

At the August meeting, the Advisory Board members were separated into tables by county and were able to review the Area Plan with respect to their individual communities. Opportunities were then given for further clarification of both needs and resources.

See Appendix D for documentation of forums, advisory board meetings, surveys and public hearings.