Senior Services Division
2019 Program Portfolio and Strategies

City of Chicago
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BACKGROUND

The Chicago Department of Family and Support Services (DFSS) Senior Services Division is the City of Chicago’s lead agency for older adults and serves as the local Area Agency on Aging as designated by the Illinois Department on Aging. DFSS/Chicago Area Agency on Aging (AAA) is part of a national network of services and programs that protect the rights and support the needs of the nation’s seniors. This network includes the Administration for Community Living (ACL) at the Federal level, the Illinois Department on Aging (IDoA) at the State level, Area Agencies on Aging at the regional level, and local community service providers.

Working in collaboration with the network, DFSS Chicago AAA’s efforts are focused on:

• supporting older persons to live independently in their own communities and homes for as long as possible;
• ensuring that those who reside in institutions are treated with dignity and care, and;
• guaranteeing that older persons have access to full and accurate information to participate in public policy.

Before Chicago was designated as a AAA, the Mayor’s Commission for Senior Citizens was established in 1956 as the first municipal office on aging in the nation. The Commission evolved into the Chicago Department on Aging and Disability in 1974, when it became the planning and coordinating agency for individuals with disabilities of all ages. By the early 1990s, the aging and disability functions separated and the Chicago Department on Aging was formed and later named the Chicago Department of Senior Services. In January 2009, the Department was merged with other social service departments to create the Chicago Department of Family and Support Services (DFSS). Chicago is proud of the legacy of being the first AAA in the United States.

In July of 2012, Chicago applied for and received the World Health Organization’s designation as an age-friendly city, demonstrating Chicago’s commitment to ensuring that the city remains welcoming as the population ages. Additional information regarding Chicago’s Age-Friendly initiative is provided in Appendix 1.

While the work of an Area Agency on Aging is multidimensional and spread across a wide spectrum of programs that support and protect seniors, DFSS Senior Services Division must prepare for the increasing demand on the service system. The partnerships we form will become even more critical to our success as we work with service providers and other nonprofit partners to ensure greater access and higher quality service for the populations most in need.

This is significant for DFSS Senior Services Division and other social service planners and providers who are committed to targeting services to those individuals with the greatest economic or social need. In addition, the special needs of various racial and ethnic groups increasingly require discrete assessments to appropriately plan and allocate resources; for example, different ethnic groups respond differently to various types of outreach, or may find particular types of services inappropriate for their particular circumstances.

Unfortunately, years of limited funding have restricted access to services, resulting in waiting lists for many of these essential programs. The Federal Older Americans Act programs represent less than one third of one percent of federal discretionary spending (.0031), yet offers an incredible return on investment by leveraging state, local, and private dollars, as well as volunteerism. These services save taxpayer dollars by enabling seniors to remain independent and healthy in their own homes, where they prefer to be and where they are less likely to need more costly hospital and institutional care paid for through Medicare and Medicaid. Despite this, federal funding has not kept pace with inflation (fuel, commodities and wages) or population growth for years and is roughly the same as it was in 2004; current levels are insufficient to meet burgeoning needs.

1 For the purposes of this strategy document, seniors are defined as individuals age 60 years and older, unless otherwise noted.
PROFILE OF OLDER CHICAGOANS: 
THE SENIOR POPULATION BOOM

TRENDS IN SENIOR POPULATION

Aging is a success story. People are living longer and healthier lives because of medical advancements and other positive developments that have previously constrained human life expectancy. But sustained growth in the older adult population also presents challenges. The current aging population is affecting economic growth, formal and informal social support systems, and the ability of private and public entities to provide resources for older adults. We must quickly recognize the scope of the new demographic reality and adjust current policies and service delivery systems accordingly.

According to national census projections, more than 10,000 baby boomers are turning 60 every day. It is projected that the population of seniors in the United States, which stood at 35 million in 2000, will grow to 57 million by 2023.

The senior population in the State of Illinois has also grown from 1.9 million in 2000 to 2.5 million in 2015, representing 19.6% of the population, and is projected to grow to nearly 3,000,000 by 2023.

Mirroring national and state trends, it is projected that the older population in Chicago will also continue to increase - based on current census numbers and projections, the number of seniors in Chicago will grow from approximately 455,000 in 2017 to nearly 650,000 in 2023, representing 22% of the total population.

* ACS 5 year Estimates, U.S. Census Bureau, American Community Survey
In addition to the overall increase, the characteristics of Chicago’s elderly population have continued to change from 2010 to 2015. The demographic landscape of seniors in Chicago is defined by a population which is growing older, increasingly poor, and increasingly diverse.

**SUB-POPULATIONS AND SPECIAL ISSUES**

**OLDEST AND FASTEST GROWING SEGMENT OF SENIORS: 85 AND OLDER**

Growing faster than the overall senior population in the city of Chicago is the segment of the older population age 85 and older; these individuals tend to be in poorer health and require more services than the young elderly. By 2023, this segment of the seniors population is expected to increase by 7%.

The growth among this segment of the population is expected to necessitate a corresponding increase of in-home assistance (e.g., homemaker services, adult day services, home-delivered meals).

**ETHNIC AND MINORITY SENIORS**

Currently, African-Americans comprise 156,830 or 35.6% of the senior population within the city of Chicago and more than half of the African-American elderly in the entire state of Illinois.

The senior Asian population in Chicago constitutes 26% of the entire population group statewide. Significantly, slightly more than half of all senior Asians who are below the poverty level in the state of Illinois reside within Chicago. Thus, the highest concentration of low-income Asians in Illinois reside within the city limits.

**SENIORS WITH LIMITED ENGLISH PROFICIENCY**

Seniors with limited English proficiency comprise 21.8% of the City’s overall senior population (as compared to 9.6% within Illinois). These seniors may encounter additional challenges as they attempt to navigate the existing array of senior services available to them.

*ACS 5 Year Estimate, U.S. Census Bureau*
SENIORS IN POVERTY

Seniors in Chicago are increasingly faced with limited financial resources. Currently, the annual median income for Chicago households headed by a senior is only $30,347. By comparison, the overall median household income in Chicago is $49,000. Thus, seniors are confronted with difficult lifestyle choices as they grapple with limited financial resources. For many seniors, their primary means of support is Social Security with an average income of $16,215, leaving them particularly vulnerable to rising prices on everyday necessities such as food and housing. Additionally, only 59,033 (62.3%) of eligible seniors receive some form of income transfer payment such as public assistance or SNAP, leaving an estimated 35,746 (37.7%) of seniors below the poverty level who qualify for benefits, but who are not receiving them.

In 2015, 72,820 (17.4%) of the total senior population in Chicago had incomes below the poverty level, an increase of 34% from 2010.

HOMELESSNESS AND SENIORS

As part of a federal initiative required for HUD funding, DFSS conducts an annual “Point In Time Count (PIT)” of homeless persons in shelter and on the street. In January 2018, the study found that seniors represented 9.5% of the overall population residing in shelters, (a slight decrease from 10.3% in 2017) and 12.8% of individuals living on the streets (an increase from 10.8% in 2017). Increased homelessness among elderly persons is largely the result of poverty and the declining availability of affordable housing among certain segments of the aging.

NOTE: Maps showing the following demographic distributions by Community Area in the City of Chicago are provided in Appendix 2A, 2B, and 2C, respectively: Ethnic and Racial Minority Seniors, Limited English Proficient Seniors and Seniors in Poverty.
THE AGING NETWORK

FEDERAL PRIORITIES
For more than fifty years, the Older Americans Act (OAA), through the Department of Health and Human Services, has been the backbone of the home and community supports system, providing older adults with needed services that include home care, congregate and home-delivered meals, case management, caregiver support, transportation, health promotion and disease prevention, legal services, elder abuse prevention, community service employment opportunities for low-income older adults, and ombudsman programs that help protect residents in nursing homes and assisted living facilities.

STATE PRIORITIES
The Illinois Department on Aging (IDoA) was created to serve as the State Unit on Aging for the purpose of improving the quality of life for Illinois’ seniors by coordinating programs and services enabling older persons to preserve their independence as long as possible. IDoA is the agency authorized to receive and dispense Federal OAA funds and other specific State funds through AAAs and community-based service providers. Illinois is divided into 13 Planning and Services Areas (PSAs) led by AAAs responsible for planning and coordinating services and programs for older people in their respective geographies. Funding is based on a formula that takes into consideration the number of older adults and minorities in that area, as well as the number living in poverty, in rural areas, and alone.

AREA AGENCY ON AGING
As the designated Area Agency on Aging (AAA), DFSS Senior Services Division is responsible for planning, coordination, administrative and assessment functions that foster the development of a comprehensive and coordinated service delivery system for older adults and caregivers living in the City of Chicago. In addition, DFSS/Chicago AAA advocates for older adults and is the primary disseminator of information and technical assistance relating to aging issues within our area. As required by the OAA, an advisory council comprised of older adults works with DFSS Senior Services Division to develop and implement the Area Plan and to serve as advocates for older adults.

SERVICE PROVIDERS
Community-based service providers represent a key segment of the Aging Network, as well as key partners for DFSS in the implementation of the AAA responsibilities as they help to provide programs and services to older persons. The success of the Aging Network in connecting older persons with needed services is one tangible result of cooperation and coordination between IDoA, DFSS Senior Services Division, and local service providers.

FY2016-FY2018 STATEWIDE INITIATIVE NO WRONG DOOR (NWD) SYSTEM
Both nationally and in Illinois, long-term services and supports (LTSS) for older adults, and people with disabilities, behavioral health needs, and other chronic conditions, are provided by many organizations, through various programs and applications with different rules and funding streams. To streamline and improve access to LTSS for all populations, the Administration on Community Living (ACL), the Centers for Medicare & Medicaid Services (CMS), and Veterans Health Administration (VHA) developed a shared vision in which every state will have a single, coordinated statewide No Wrong Door (NWD) System.

The NWD System is designed to make it easier for everyone, regardless of a person’s age, income level, type of disability, or behavioral health need, to find information about and access LTSS. Consistent with the model as defined by ACL, DFSS Senior Services Division is responsible for developing and implementing a coordinated system of multiple entry point across the city to ensure seamless access to services. DFSS is in a unique position as local government to leverage other government resources, as well as, private partnerships to maximize the use of public and private funding in serving older adults and individuals with disabilities.
Chicago Department of Family & Support Services / Senior Services Division
DFSS SENIOR SERVICES DIVISION
SERVICE AREAS

Research and assessments, both locally and nationally, inarguably show that the vast majority of older adults prefer to stay in their own homes, or at least in their own communities, as they age. To be successful in caring for our aging population, we use the three stages of aging as a guide to our planning and delivery model, helping us identify our priorities and prepare for emerging trends in our senior population.

STAGE 1: HEALTHY - ACTIVE

In this first stage, older adults are independent, healthy and active, utilizing the services offered to help maintain their health and well-being, and challenging us to continue providing new, innovative programs that attract and benefit younger, healthier seniors. The older adults in this stage may participate as volunteers, helping to teach and facilitate health-promoting programs and services at the centers. Every opportunity should be taken to help older adults function as productive and independent members of their community for as long as they can. Investing in our senior centers to become “healthy aging centers” where older adults can participate in a variety of physical fitness, health and wellness, educational, and recreational activities results in a strong social return on the resources allocated.

STAGE 2: SLOWING DOWN

The second stage is the “slowing-down” phase where the risk of becoming frail or socially isolated increases. Older adults in this phase begin to slow down and may face some challenges in daily activities that are part of living at home, requiring some assistance in areas of housing, transportation, caregiving, or other supportive services that help them remain independent.

STAGE 3: SERVICE - NEEDY

The third phase is the “service-needy” phase where an older adult can no longer continue to live in the community without some assistance in the house. If our efforts to support healthy aging are successful and informal caregivers can help meet the needs of older adults, the number of individuals in this group could be smaller than expected. However, regardless of the number, the ability to provide new and existing community based, in-home services to seniors in this phase is critical to delay, or even avoid, long-term care placement. The potential savings from keeping seniors in the community longer are considerable.

The chart on the following page provides a visual of the DFSS Senior Services Division Programs and Services through the three stages of aging. For some of the services, the typical clients are so wide-ranging that we see them across all three stages, while others are more defined within a specific phase. Detailed descriptions of the programs offered by DFSS Senior Services Division, as well as the funding distribution for services, are provided in Appendix 3.

2 James R. Knickman and Emily K. Snell: The 2030 Problem: Caring for Aging Baby Boomers
### DFSS AAA Chicago Programs & Services

<table>
<thead>
<tr>
<th>Program/Service</th>
<th>Stage 1: Healthy + Active</th>
<th>Stage 2: Slowing Down</th>
<th>Stage 3: Service Needy</th>
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<td>Health Promotion</td>
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<td>Physical Fitness</td>
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<td>Foster Grandparents Program</td>
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<td>Senior Centers</td>
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<td>Congregate Meals Program</td>
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<td>Older Relatives Raising Children</td>
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<td>Information and Assistance (I&amp;A)</td>
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<td>Home Delivered Meal</td>
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<td>Adult Protective Services Program</td>
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<td>Intensive Care Advocacy and Support</td>
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The DFSS Senior Services Division 2019 annual budget is $29.7M. The largest portion of DFSS Senior Services Division funding comes from the Older Americans Act (OAA) as part of the Area Plan Federal and State Funding. DFSS Senior Services Division also relies on other grants to help provide services to older adults in Chicago. The funding type and distribution is shown in the chart below.

DFSS Senior Services Division delivers vital programs and services within five core areas to over 150,000 older adults annually. A distribution of the funding dedicated for each area of service is provided below.
MEASURABLE GOALS

BUILDING A FRAMEWORK FOR SUCCESS

In late 2015, DFSS began working with partners and stakeholders to develop a strategic framework, an approach that has transitioned DFSS to a more outcome-oriented model that focuses on how many people leave better off after receiving our services, instead of how many people walk through our doors. It guides how we will use our mission, priorities, and goals to:

1. Measure, report on, and refresh outcomes in the years to come

2. Make decisions and drive greater collaboration

DFSS’ Senior Services Division primary responsibility is to protect the rights and support the needs of seniors in Chicago. Working with our aging network partners and guided by best practices, we seek to strengthen the commitment to helping older adults maintain their independence and live successfully at home and in their communities, while ensuring a sustainable and accountable service delivery system. Each year DFSS Senior Services Division is committed to focusing on achieving the goals outlined below.

Empower to Thrive

- 50% of long term nursing home residents who receive notice of involuntary discharge will remain in the facility due to ombudsman advocacy.

Expand the Safety Net

- 4,000 seniors will make service requests identified at intake that will help support them to remain in their communities.

- 21 Senior and Satellite Centers will have core operational components in place by the end of 2019.

- Engage 10% more clients with information and practical assistance

- Register 15% new program participants in Congregate and Senior Centers, annually

- 50% of new clients will return to the site a second time.

Demonstrate Good Stewardship of Resources

- Delegate Agency contracts will have a 95% expenditure rate

IDENTIFYING AND OVERCOMING BARRIERS TO SUCCESS

Our service delivery model is unique in that it includes both direct and contracted services that are designed to provide effective and reliable outcomes to meet the needs and interests of the aging population we serve. Over the years, DFSS Senior Services Division has requested approval from the Illinois Department on Aging for direct service waivers in program areas that needed better controls, improved performance and greater efficiencies. Current models that blend direct services and contracted service are most successful in leveraging resources from private partners and invested staff.

With the uncertainty of government funding and the growing senior population, a closer look at the services we provide and how they are provided is necessary for our success and sustainability. In working with our strategic framework initiative, we continuously use data to identify areas of vulnerability and prioritize the action steps needed to address these concerns.
Recently, it was discovered that a disproportionate number of service requests (38%) received through our Information and Assistance (I&A) function were for Benefit Access Applications (BAA). The BAA is the process through which seniors and individuals with disabilities must obtain their Regional Transit Authority (RTA) free ride card. With an average of 40,000 encounters annually, the impact of the large number of BAAs has affected other core and critical area agency programs and services resulting in a cascading and agency-wide effect on our service delivery system.

In order to serve the BAA/RTA clients visiting our senior centers and central I&A location, staff has been redirected from serving seniors needing information and practical assistance to conducting BAAs, resulting in a decrease in the number of calls answered through I&A - our gateway to all other services. With the emphasis on the RTA Ride Free related work, the reduction in the number of referrals received through our I&A function for other services has resulted in a decrease in the number of clients served overall and the underutilization of contracted services and funding for those services.

DFSS Senior Services Division is working on legislative and service delivery solutions that would help minimize the impact on our service system and allow us to rebuild and strengthen core services, as we look to shape the vision of our future for serving older adults in Chicago.

THE FOCUS FOR THE FUTURE: WHAT SUCCESS LOOKS LIKE

Based on the assumption that funding from OAA and other government sources for seniors will lag behind the growing senior population, the goal is to connect as many seniors as possible to services that help them remain more healthy and living independently in their homes. DFSS Senior Services Division has identified several strategies to support the vision and guide our progress in achieving that end. We are requesting support, where necessary, to fill the gaps and leverage more resources to help improve outcomes for seniors in the City of Chicago.

Facility Upgrades to Create Vibrant, Modern Senior Centers

The impact of the environment of our senior centers on clients cannot be overstated. Regardless of the size of the center, centers must be infused with vitality and energy - changes that are attractive, practical, and well-coordinated are needed with an appropriate understanding of universal design and aging-related considerations. Further discussions with qualified professionals are needed in the planning process for each of these areas of renovation listed below.

- **Facility Updates** (flooring, furniture, lighting and painting) that are aesthetic, comfortable, inviting, durable, and easily maintained.

- **Enhance flexible use spaces:** Senior centers sometimes struggle to create an appealing atmosphere. Overly generic flexible use spaces, large dividable rooms with folding walls and plain, durable finishes accommodate a variety of functions, but aren’t tremendously inviting. Given the ever-changing composition of Senior Center participation and program/service mix, it always makes sense to create spaces that are universally accessible and user-friendly, flexible to accommodate a variety of activities, yet adaptable to facility future needs. It should be carefully designed to look stylish, but functional.

- **Redesigning space to improve the operational flow of the center.** The lobby area of each of the centers is one of the most critical areas that not only makes the first impression on our clients, but also impacts participation in various programs and activities.

A list of the DFSS Senior Services Division Senior Centers and Satellites is provided in Appendix 4.
**Staffing Model that Supports Operational Sustainability**

As part of our planning process for the future of our centers, we reviewed the staffing pattern for each of the Regional and DFSS operated Senior Satellite Centers to identify gaps. A staffing strategy is being developed to ensure adequate resources are in place that reflect consistency and uniformity across all centers.

**Increasing partnerships with various sectors to expand programs and services**

Senior Centers exemplify the increasing role that human service, community-based organizations play in the overall continuum of care for older adults. In addition, they serve as models of collaborative governance, as their programs and services depend on support from and coordination among the public, nonprofit, and private sectors.

Consistent across all 21 Senior Centers and Satellites is the following programming structure:

- Fitness Programming
- Nutrition Programming
- Health and Wellness Programming
- Information and Access to services including linkages to DFSS Senior Services Division Information & Assistance, Benefits Assistance programs and to a wide array of community resources and programs.
- Life Enrichment Programming including class instruction, computer training, special events, and a variety of other educational and cultural opportunities.

Within the category of “Life Enrichment Programming” lies the greatest opportunities to provide customizable and scalable programming for seniors that is responsive to their interests, cultural preferences and demographic needs. Building stronger collaboration and coordination among community agencies, businesses, and local governments can help bridge financial strains and effective service-delivery while building or improving valuable programs and services. Examples of innovative workshops include retirement planning, social enterprise workshops, and senior caucuses.

#2. Responding to the needs of Chicago’s Aging Population: Age-Friendly Chicago’s Village Interdependent Collaborative (VIC)

**Establishing the VIC model across all 21 Senior Centers**

As demonstrated through Chicago’s Age Friendly baseline assessment (See Appendix 1), seniors overwhelming prefer to stay in their homes and to have their needs met through their community as they age, rather than going to nursing homes or assisted living facilities. One of the initiatives recommended by the Buehler Society on Aging was to look at novel approaches to Age-Friendly living, such as the Village Model to help coordinate access to a variety of supportive services that promote aging in place, social integration, health, and well-being.

Using our Senior Centers and Satellite Centers as the hubs for the initiative, DFSS Senior Services Division began the Village Interdependent Collaborative (VIC) model as a pilot in the Englewood Senior Satellite Center. The VIC is a community-based support model that relies on an informal network of community partners and members to provide assistance to aging populations within a specific geographic area. The model identifies, brings resources to and reintegrates isolated seniors back into their communities thereby reducing their risk.

DFSS Senior Services Division is also piloting a similar concept in apartment and high-rise buildings called, Vertical Interdependent Villages (VIVs). In collaboration with the Chicago Housing Authority (CHA), DFSS Senior Services Division recently created a number of these vertical villages within specific buildings to ensure seniors can age in place with dignity. DFSS Senior Services Division also united with the members of the Age-Friendly Commission and the University of Illinois at Chicago to create a training for high rise managers and staff to help seniors age with dignity in that environment.
The goals that inspired the village model are not necessarily revolutionary, however the model embraces innovation, combining the best new ideas in community-minded living, volunteerism, and person-centered focus. For Chicago, success for the VIC initiative means:

- Seniors aging in place will know about and have access resources to help them age successfully in their homes.

- It is anticipated that with access to and use of necessary supports, senior’s service needs will be met, they will feel less isolated from their family, friends, and community, feel more confident about staying in their homes, and feel more connected with the community.

- In the long-term, seniors will experience fewer hospital visits (slip and falls) and delayed nursing home stays, and the surrounding communities become more age-friendly.

- The system seeks to demonstrate that the VIC is a cost-effective solution to programs that traditionally have been provided by much more expensive private programs.

Significant improvements are needed to better support our planning, targeting and advocacy efforts. Consolidating and streamlining our databases will allow us to more effectively manage our clients and services, while increasing productivity and reducing staffing costs currently allocated to these functions. Once these steps are completed, the NAPIS Reporting system should be able to demonstrate that our programs are achieving the results intended by the OAA and that we are working systematically to improve efficiency and service coordination within our service area.

We should be able to:

- Demonstrate that our services are targeted to the most vulnerable older adults;

- Define the common data requirements needed for policy decision-making and state and local initiatives (including advocacy);

- Eliminate the need for older adults and caregivers to provide personal identification information repeatedly to various service providers;

- Improve data collection methods and systems by ensuring unduplicated counts of individuals served across service providers and geographic locations; and

- Make a greater impact on the aging population through our service delivery system.

### #3. Using Technology to Improve Data Collection, Communication, and Reporting for Better Service Outcomes

**Streamline and Improve Database Systems to improve data collection and reporting**

The Older Americans Act (OAA) requires annual program performance reports from the aging network through the National Aging Program Information System (NAPIS) that includes uniform data on how and where the funds are being spent. These reports also serve as critical data sources for measuring the performance of OAA programs. The data collected by area agencies and funded service providers is a powerful tool for aging network partners in planning and advocating for resources that are vital to our older adult population.
Communication Enhancements to Help Engage and Connect Seniors to Information and Services

Emerging technologies will enable both older adults and their caregivers to address a comprehensive range of health, social, and functional needs. Technology-based solutions such as those listed below that connect older adults to their communities are becoming more important as older adults and their caregivers are growing increasingly tech savvy. Whether it is social networking, text messaging, use of the internet, or use of mobile phones/tablets, technology usability among older adults is growing and we should respond by redesigning what our service delivery looks like through some of these opportunities.

- **Website Calendar with Plug Ins:** An interactive and engaging solution for our website that includes a full calendar, upcoming events listing and email list options to send subscribers event reminders, invitations, and newsletters.

- **Software that makes Life Enrichment Brochure Digital and Interactive:**
  - Center-based software that can be used to promote programming
  - Online Service Request Application

- **Website Enhancements:** Working with our Public Information team to redesign our website to enhance usability and accessibility of our services.

- **Other Communication / Information Dissemination Methods:**
  - Designing On-line payment options for Senior Center life enrichment and health promotion programs.
  - Robocall Services
  - Text Messaging
  - Constant Contact (emailing services)

#4. Identifying Revenue Streams for Local Support of Senior Services

The foundation of any healthy organization is multiple revenue streams. Tight federal and state budgets make it extremely difficult for the Aging Network to maintain existing services. OAA funding is not sufficient to cover all of the services a community needs. As the number of older adults is increasing, funding has decreased or remained stagnant, making resources more scarce and reducing the ability of DFSS Senior Services Division to provide services in their communities.

To reach new clients and improve sustainability, DFSS Senior Services Division is implementing strategies such as contracting and marketing our agency and its services to new funders, seeking other grants to help expand our funding base and exploring sponsorship opportunities to help support our programs. Additional support is needed to identify other funding possibilities that could help support aging services long term.
APPENDICES

APPENDIX 1:
CHICAGO’S AGE FRIENDLY DESIGNATION

In July of 2012, Chicago applied for and received the designation from the World Health Organization as an age-friendly city to demonstrate the city’s commitment to ensuring that the city remains welcoming as the population ages. In partnership with the Buehler Center on Aging, Health and Society, a needs assessment was conducted to determine needs for an aging Chicago population, to understand the current strengths, and to offer recommendations for improvement.

As a part of this important designation, the city completed a baseline assessment to identify the current strengths, needs, and priorities for maintaining and improving its status as an Age-Friendly City in eight areas: Transportation, Housing, Social Participation, Respect and Social Inclusion, Civic Participation and Employment, Communication and Information, Community Support and Health Services, and Outdoor Spaces and Buildings.

FINDINGS & RECOMMENDATIONS

Overall, the results from the baseline assessment of Chicago’s age-friendliness indicated that Chicagoans view the City of Chicago as “age-friendly”. Older Chicagoans found the city was most responsive to communication and information, social participation, and transportation needs. However, most reported additional housing support needs, namely support to continue living independently in their communities.

Recommendations based on the stakeholder prioritization of these eight domains combined with satisfaction ratings from Chicago residents were submitted to DFSS Senior Services Division by the Buehler Center and Northwestern University. Recognizing the city’s assets such as Senior Centers, parks and outdoor spaces, and transit choices, the report identified specific areas for which initiatives to build capacity needed to be developed. The initiatives are listed in the chart on the next page.
AGE FRIENDLY STRATEGIES AND INITIATIVES

A commission comprised of civic leaders from across sectors and disciplines working together to help implement the strategies and initiatives for Age-friendly was formed in 2015. The Commission assists in initiating an array of innovative projects that support Chicago becoming a leader in the age friendly movement. These activities will be accomplished across multiple years using a combination of strategies which include promoting awareness through education and training, networking with service providers to provide needed services for isolated individuals, and expanding and improving existing services in areas where there is an identified consumer driven need.

For more information about Chicago’s Age-friendly designation, please visit www.cityofchicago.org/agefriendlychicago.
APPENDIX 2A: DISTRIBUTION OF ETHNIC RACIAL MINORITY SENIORS BY COMMUNITY AREA IN THE CITY OF CHICAGO

City of Chicago
Chicago Department of Family and Support Services
Community Areas with High Concentrations of Senior Minority Residents Below the Poverty Level

Lisa Morrison-Butler
Commissioner
Department of Family and Support Services

Senior Minority Residents
- 10% - 20%
- 21% - 25%
- 26% - 30%
- 31% - 35%
- 36% - 40%
- 41% - 48%

Map Created: July 2018
Copyright © 2018 City of Chicago
APPENDIX 2B: DISTRIBUTION OF LIMITED ENGLISH PROFICIENT SENIORS BY COMMUNITY AREA IN THE CITY OF CHICAGO

Percent of Non-English Proficient Seniors
65 Years of Age and Above
by Chicago Community Area,
December, 2016

Legend
Non-English Proficient Seniors
- 0% - 5%
- 6% - 10%
- 11% - 20%
- 21% - 30%
- 31% - 61%

Map Created: July 2016
Copyright © 2016 City of Chicago
Age-Friendly Chicago
Village Interdependent Collaboration (VIC)

City of Chicago Senior Sites
3 mile radius by Community Areas

<table>
<thead>
<tr>
<th>Number</th>
<th>Center</th>
<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Central West Senior Center</td>
<td>2102 W. Ogden Ave</td>
</tr>
<tr>
<td>2</td>
<td>Northeast Senior Center</td>
<td>2019 W. Lawrence Ave</td>
</tr>
<tr>
<td>3</td>
<td>Northwest Senior Center</td>
<td>3160 N. Milwaukee Ave</td>
</tr>
<tr>
<td>4</td>
<td>Renaissance Court</td>
<td>78 E. Washington St.</td>
</tr>
<tr>
<td>5</td>
<td>Southeast Senior Center</td>
<td>1767 E. 79th St.</td>
</tr>
<tr>
<td>6</td>
<td>Southwest Senior Center</td>
<td>6117 S. Kedzie Ave</td>
</tr>
<tr>
<td>7</td>
<td>Abbott Park/Roseland</td>
<td>49 East 95th St.</td>
</tr>
<tr>
<td>8</td>
<td>Auburn Gresham</td>
<td>1040 W. 79th St.</td>
</tr>
<tr>
<td>9</td>
<td>Austin</td>
<td>5071 W. Congress Parkway</td>
</tr>
<tr>
<td>10</td>
<td>Chatham</td>
<td>8300 S. Cottage Grove Ave</td>
</tr>
<tr>
<td>11</td>
<td>Edgewater</td>
<td>5917 N. Broadway</td>
</tr>
<tr>
<td>12</td>
<td>Englewood</td>
<td>653-657 W. 63rd St.</td>
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<tr>
<td>13</td>
<td>Garfield Ridge</td>
<td>5674-B S. Archer Ave</td>
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<tr>
<td>14</td>
<td>Kelvyn Park</td>
<td>2715 N. C. Icer Ave</td>
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<td>15</td>
<td>North Center</td>
<td>4040 N. Oakley Ave</td>
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<td>16</td>
<td>Norwood Park</td>
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<td>17</td>
<td>Pilsen</td>
<td>2021 S. Morgan</td>
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<td>18</td>
<td>Portage Park</td>
<td>4100 N. Long Ave</td>
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<td>19</td>
<td>Roseland</td>
<td>10426 S. Michigan Ave</td>
</tr>
<tr>
<td>20</td>
<td>South Chicago</td>
<td>9233 S. Burley</td>
</tr>
<tr>
<td>21</td>
<td>West Town</td>
<td>1613 W. Chicago Ave</td>
</tr>
</tbody>
</table>
APPENDIX 3:
DFSS SENIOR SERVICES DIVISION SERVICES

1. HOME COMMUNITY-BASED SERVICES AND SUPPORTS

Home and Community Based Services (HCBS) help older adults and their caregivers live safely, healthily, and independently in their homes and communities. While a wide range of solutions are available under this category, the DFSS Senior Services Division determines the menu of services that best meet the needs of the senior population in their PSA. DFSS Senior Services Division provides the following services under this area:

• **Information and Assistance (I&A)** is a one-stop access portal for referral, advocacy and problem solving for all services and programs offered through Senior Services for older Chicagoans. Information, advocacy, and assessment are available by phone, email, or at City Hall, Room 100 and at any of our Senior Centers. As part of the Aging and Disability Network (ADRN), DFSS also provides options counseling activities which involve a person-centered, interactive, decision-support process in making informed long-term support choices within the context of the clients’ own preferences, strengths, and values.

• **Benefits Access and Assistance Programs** provide assistance and counseling with enrollment programs that help seniors maximize the coordination of their health care plans. Trained staff assist clients in applying for federal, state, and local benefits programs, including prescription drug coverage, weatherization, energy assistance, financial assistance, and foreclosure assistance. These services are funded through separate grants from the state (SHAP, MIPPA). DFSS also partners with the Greater Chicago Food Depository to conduct outreach and enroll eligible older adults in SNAP and Medicaid programs.

• **Chore Services** is one of the in-home services available to seniors offering a one-time intensive cleaning (Heavy duty chore) for seniors whose living conditions pose a threat to their health and safety. Chore services benefit many seniors who were on the verge of eviction because of the condition of their homes and have avoided the eviction court process and the hardship of having to move and find alternative housing. The program also offers short-term chore to assist seniors who need temporary assistance due to illness, recent hospitalization, or injury to assist them as they recuperate.

• **Senior Centers** are community facilities for the organization and provision of a broad spectrum of services, which include health promotion, social and recreational activities, and educational opportunities for older individuals. DFSS Senior Services Division operates 21 Senior Centers across Chicago in partnership with local community-based organizations that assist with some of the on-site management at these facilities. Life Enrichment Programs that include classes, special events, trips, and tours are also offered at all Senior Centers to address the recreational needs of Chicago’s seniors. The goal is to enrich and enhance their quality of life through a variety of social, educational, cultural and recreational activities.

Approximately 30,000 benefit-related encounters occur each year that help over 24,000 seniors enroll in Medicare, Medicaid, and other benefit programs.

Over 3,500 hours of chore service are provided annually to nearly 100 seniors, preventing evictions and helping them remain in their homes.

Approximately 100,000 requests for information and assistance are received each year, connecting over 70,000 seniors and caregivers to needed information and services.

Approximately 500,000 visits to senior centers are made annually, assisting more than 30,000 seniors to remain active and engaged in their communities.
• **Legal Assistance** services protect the legal rights and interests of seniors in legal matters including public entitlement, housing, health care, guardianship, consumer fraud, employment, family law, and property interests. The goal of the Legal Services program is to aid low-income seniors to achieve and maintain their autonomy and independence.

**Over 5,000 hours of legal services are provided annually, helping more than 300 seniors maintain authority and independence.**

• **Housing Assistance** program identifies and provides housing relocation assistance to seniors who are at risk of becoming homeless and/or need more appropriate housing. Eligible seniors are age 60 and older who face the threat of eviction or foreclosure; homeless or reside in a temporary shelter; in a dangerously abusive situation; and/or live in housing that is in serious disrepair. The goal of this service is to ensure that seniors remain in their current housing while resolving the issues that may lead to homelessness.

**Approximately 1,800 hours of housing assistance are provided annually to over 400 seniors toward the goal of preventing homelessness.**

2. **NUTRITION SERVICES**

Older people risk their ability to maintain an independent, healthy lifestyle if they eat less because of health problems or financial restrictions. Nutrition Services provide a vital link in maintaining the health of older adults by preventing premature institutionalization and improving overall quality of life. Older adults are generally identified as being at particular risk of poor dietary intake and nutritional problems and are thus a high-priority target group for nutrition services. Nutrition services funded by the federal Older Americans Act and State General Revenue Funds help support access to nutritional meals.

• **Home Delivered Meal** Services provide nutritious meals to older persons (60 years and older) who are frail and/or homebound because of illness or incapacitating disability, or are otherwise isolated. Microwaveable, oven-ready frozen or hot meals are delivered to home-bound seniors who are unable to prepare meals for themselves and have no other means of acquiring nutritious meals. The program provides two meals a day covering two to seven days a week, depending on the seniors’ needs.

**Over 2,300,000 million meals are served annually to approximately 7,000 seniors, preventing food insecurity and helping seniors maintain their independence.**

• **The Congregate Meals Program** provides hot, nutritious lunches to seniors in communal settings at over 50 community locations across the city each weekday. In addition to the meals, seniors can participate in a variety of activities, from health education and exercise classes to field trips. The Congregate Program assists older adults to live independently by promoting better health through improved nutrition and reduced isolation. DFSS’s innovative employment training partnership with the **Chicago Housing Authority (CHA)** also provides opportunities for unsubsidized employment to some of Chicago’s low-income public housing residents through the Congregate Dining Program.

**Nearly 800,000 meals are served annually to over 25,000 seniors preventing food insecurity and social isolation.**

**Approximately 1,800 hours of housing assistance are provided annually to over 400 seniors toward the goal of preventing homelessness.**
In addition to the OAA-funded nutrition services listed above, DFSS Partners with the Chicago Food Depository to distribute free, nutritious food, including fresh produce, through community markets at designated senior center sites. Food is delivered and distributed bi-monthly at a place where seniors can get connected to other community resources for nutrition, health, and well-being. More than 25,000 seniors participate in the Older Adult Market Day Program, receiving approximately 224,000 pounds of fresh produce and canned fruits and vegetables.

3. HEALTH AND WELLNESS PROGRAMS

The Older Americans Act provides funding for programs that support healthy lifestyles and promote healthy behaviors. Evidence-based programs are now required for Title IIIID-funded activities; this follows a decade of progress by the aging services network to move their efforts toward implementing disease prevention and health promotion programs that meet the highest-level criteria of scientific evidence and are demonstrated to improve the health of older adults.

• The award-winning Physical Fitness program boosts endurance, strength, balance, and flexibility. DFSS Senior Services Division’s senior centers are equipped with senior-friendly exercise equipment and staffed by experienced, certified senior-fitness professionals who lead group exercise classes and one-on-one training. Exercise classes are offered at more than 40 locations throughout the City using evidence-based curriculums proven to be effective in providing older adults with more confidence in their ability to continue activities, increased social activity, and fewer doctor and emergency room visits.

When the Health Promotion program offers health education, counseling, and assessment services to seniors. The program plays a crucial role in enabling seniors to remain healthy and prevent chronic conditions using evidence-based curriculums: A Matter of Balance (Fall Prevention Program), Healthy Eating for Successful Living Among Older Adults, Tai Chi for Arthritis, and Stanford University’s Chronic Disease Self-Management program. The main goal is to keep older adults active, healthy and disease-resistant through the fostering of positive health choices.

Over 1,400 hours of health promotion services are provided to over 4,000 seniors annually, promoting wellness and maximizing their quality of life.

4. CAREGIVER SERVICES

The National Family Caregiver Support Program provides support services to caregivers of elderly adults and grandparents raising grandchildren. As a DFSS Senior Services Division, DFSS is mandated to develop and implement family caregiver programs that can provide a broad range of services to caregiving families including access to information, training, support groups, counseling, resource libraries, respite care, and supplemental services to family caregivers and grandparents raising grandchildren.

• The Caregiver Support Program provides a variety of assistance and supports to aid informal/familial caregivers in caring for their older loved ones. Services such as one-on-one counseling, family mediation, gap filling, information and referrals, and education opportunities are available.

• Older Relatives Raising Children provides support to seniors who have primary caregiving responsibility of children from birth to age 18. Services include counseling, gap filling, respite and case management, as well as emergency financial assistance for a one-time emergency rent payment, school uniform and equipment, medication, and other basic needs.

• Respite allows family caregivers time for themselves. Respite provides professionally trained staff on a temporary basis to care for a frail senior who has a familial caregiver. This care can be provided in the home or in a nursing facility.

Approximately 22,000 hours of fitness are provided annually to over 8,000 seniors, helping them remain physically active and in shape.

Nearby 9,000 hours of caregiving services are provided annually, helping to support older adults, young children, and their caregivers.
5. ELDER RIGHTS SERVICES

Protecting the rights of older adults has become an issue of national importance in recent years. As the local DFSS Senior Services Division, the local Regional Administrative Agency for the Adult Protective Services Program (APS), and the Regional Ombudsman for the city of Chicago, DFSS Senior Services Division uses a combination of strategies including: direct and supportive services, community education, outreach, advocacy, and coordination of public and private resources to assist seniors who reside in either institutional or community settings.

- **Ombudsmen** protect, defend, and advocate for residents in long-term care facilities such as nursing homes, assisted living facilities, and supportive living facilities. Utilizing staff and volunteers, they inform residents and families of their rights; investigate, mediate and report complaints; provide information on residents’ needs and concerns to families, facility staff and the department; and advocate for quality individualized care for the residents.

- DFSS Senior Services Division is designated by IDoA as the Regional Administrative Agency (RAA) for the Adult Protective Services Program for the city of Chicago. Trained and certified adult protective services caseworkers respond to reports of alleged physical, emotional and sexual abuse, neglect, confinement, or financial exploitation of individuals age 60 and older and individuals with disabilities age 18-59. The program provides investigation, casework, intervention, and implementation of alternative remedies and follow-up services to victims.

**ADDITIONAL SERVICES**

Area Agencies on Aging are allowed flexibility in the development of other programs required to meet the needs identified within their service area. As such, DFSS Senior Services Division provides the following services that assist older adults to maintain their independence and age successfully in place through various grants and reimbursements.

- Many of the requests received by DFSS Senior Services Division and its partnering service providers require **Intensive Case Advocacy and Support**: these are related to issues of hoarding, poor health and uninhabitable living conditions, undiagnosed and untreated mental health concerns, limited cognitive abilities, and other safety concerns. DFSS Senior Services Division provides CDBG grants to community-based organizations to provide one-on-one assistance to the identified seniors. Teams of professionals respond to referrals for well-being checks for these at-risk and isolated seniors and assess the senior for referral to appropriate agencies, programs, or services.

- **The Senior Community Service Employment Program (SCSEP)** is a temporary training and employment program funded by the Department on Labor (DOL) as a pass-through from IDoA. It encourages and lengthens self-sufficiency by supplementing income while providing training, increased marketability, and opportunities for transition into unsubsidized employment for men and women ages 55 and over. Eligible participants are enrolled into the program and assigned to nonprofit agencies or community service positions where they receive skill enhancement opportunities, personal and employment-related counseling, and assistance with the transition to unsubsidized employment.

- Nearly 20,000 hours of service are provided annually to over **18,000 seniors**, protecting and advocating for the safety and dignity of nursing home residents.

- Nearly 7,200 hours of service are provided annually to over **1,000 seniors** helping to stabilize their situation.

- Approximately **3,800 hours** of service annually are provided to nearly **4,000 individuals** through IDoA’s contracted APS agencies, protecting older adults from abuse.

- Nearly **50,000 hours** of self-sufficiency and on the job training are provided to over **100 low-income seniors** annually.
• **The Foster Grandparents Program (FPG)** provides an opportunity for seniors who meet the income requirements to earn a small stipend while volunteering part-time as role models, mentors/tutors, and a friend to children with special needs. By enhancing a child’s problem-solving skills through mentoring activities that improve their conflict resolution skills, and by providing a structured environment for youth who are struggling with academic performance, Chicago’s FGP helps keep adolescents engaged in school and positive activities.

Approximately 125,000 volunteer service hours are contributed annually by 140 low-income seniors assisting nearly 600 at-risk children and keeping seniors engaged in their community.

• **The Senior Companion Program (SCP)** provided companionship to homebound elderly persons through senior volunteers who meet the income requirements. The SCP volunteers earn a small stipend while making a difference in the lives of lonely, frail, and homebound seniors by engaging in conversation, preparing light meals, and other meaningful activities. The SCP continues to provide support to family caregivers by allowing seniors to stay in their homes and communities longer, thus delaying or preventing early admittance into nursing homes.

Approximately 83,000 hours of volunteer service are provided annually by nearly 100 low-income seniors who help other vulnerable seniors maintain their independence.
APPENDIX 4:
DFSS/CHICAGO AAA SENIOR CENTERS AND SATELLITES

CITY OF CHICAGO
DEPARTMENT OF
FAMILY AND SUPPORT SERVICES
CHICAGO AREA AGENCY ON AGING
SENIOR CENTERS AND SATELLITE CENTERS

Regional Centers

Northeast (Levy) Regional Senior Center
2019 W. Lawrence Ave. 60625

Northwest (Copernicus) Regional Senior Center
3160 N. Milwaukee Ave. 60618

Southeast (Atlas) Regional Senior Center
1767 E. 79th St. 60649

Southwest Regional Senior Center
6117 S. Kedzie Ave. 60629

Central West Regional Senior Center
2102 W. Ogden Ave. 60612

Renaissance Court Regional Senior Center
78 E. Washington St. 60602

Satellite Centers

Abbott Park Senior Satellite Center
49 E. 95th St. 60619

Austin Senior Satellite Center
5071 W. Congress Pkwy. 60644

Auburn Gresham Senior Satellite Center
1040 W. 79th St. 60620

Chatham Senior Satellite Center
8300 S. Cottage Grove Ave. 60619

Edgewater Senior Satellite Center
5917 N. Broadway St. 60660

Englewood Senior Satellite Center
653-657 W. 63rd St. 60621

Garfield Ridge Senior Satellite Center
5674-B S. Archer Ave. 60638

Kelvyn Park Senior Satellite Center
2715 N. Cicero Ave. 60639

North Center Senior Satellite Center
4040 N. Oakley Ave. 60618

Norwood Park Senior Satellite Center
5801 N. Natoma Ave. 60631

Pilsen Senior Satellite Center
2021 S. Morgan St. 60608

Portage Park Senior Satellite Center
4100 N. Long Ave. 60641

Roseland Senior Satellite Center
10456 S. Michigan Ave. 60628

South Chicago Senior Satellite Center
9233 S. Burley Ave. 60617

West Town Senior Satellite Center
1613 W. Chicago Ave. 60622
Lisa Morrison Butler
Commissioner

Joyce Gallagher
Deputy Commissioner of Senior Services
Executive Director of Area Agency on Aging

Alexandria Cooney
Deputy Commissioner of Senior Services

Yolanda Curry
Deputy Commissioner of Senior Services