Quarterly Report of the Senior Services Task Force

1. <u>Organizational Progress</u> - a) <u>Core Group</u> - one member added and an additional

candidate interviewed.

b) <u>Subcommittees</u> – three candidates interviewed, one

recruited and two added.

2. <u>Activities</u>   a) Data from the Census Bureau and the Department of Health & Human

Services collected and analyzed.

b) Senior Service needs identified and prioritized.

c) Data and service recording procedures from the OP Senior Center given

initial review.

d) Senior Service Centers in other localities toured and data gathered

regarding services, programs, space and activities.

e) Past Plans for a Community Activity Center in Orchard Park were reviewed.

3. <u>Reports Attached</u>

a) **Orchard Park – A Graying Community**

b) **Identifying and Prioritizing Senior Service Needs in Orchard Park**

c) **The Senior Center – A Quantitative Profile**

Orchard Park – A Graying Community

1. <u>Orchard Park is a growing Community with a changing profile of age groups:</u>

   a) The population of the Town of Orchard Park has been growing slowly at a rate of about one half of one percent a year.

   b) Average age in Orchard Park was 41 in 2000, 44 in 2010 and will be 46 by the end of 2014

   c) About 1/3 of the residents of Orchard Park are now 55 or older

   d) While every age category over 45 is growing, the fastest growing demographic in OP is 85+ (up 54.5%) followed by 60-64 (up 43.2%)

2. <u>The aging phenomenon is occurring in two parts</u>. While the number of older people is growing, the number of younger people is concurrently shrinking. With the exception of the 15-25 age group, the number of people in every census group under 45 has dropped. The number of people in every age group over 45 has grown.

3. <u>Based on data from the Census Bureau and the Department of Health and Human Services:</u>

   a) <u>The proportion of our population that seniors comprise will continue to grow rapidly through the year 2030</u> at which time it will still grow, but at a slower rate, for at least 20 more years (as illustrated in the Department of Health & Human Services graph below).

Older Population by Age: 1900-2050 - Percent 60+, Percent 65+, and 85+
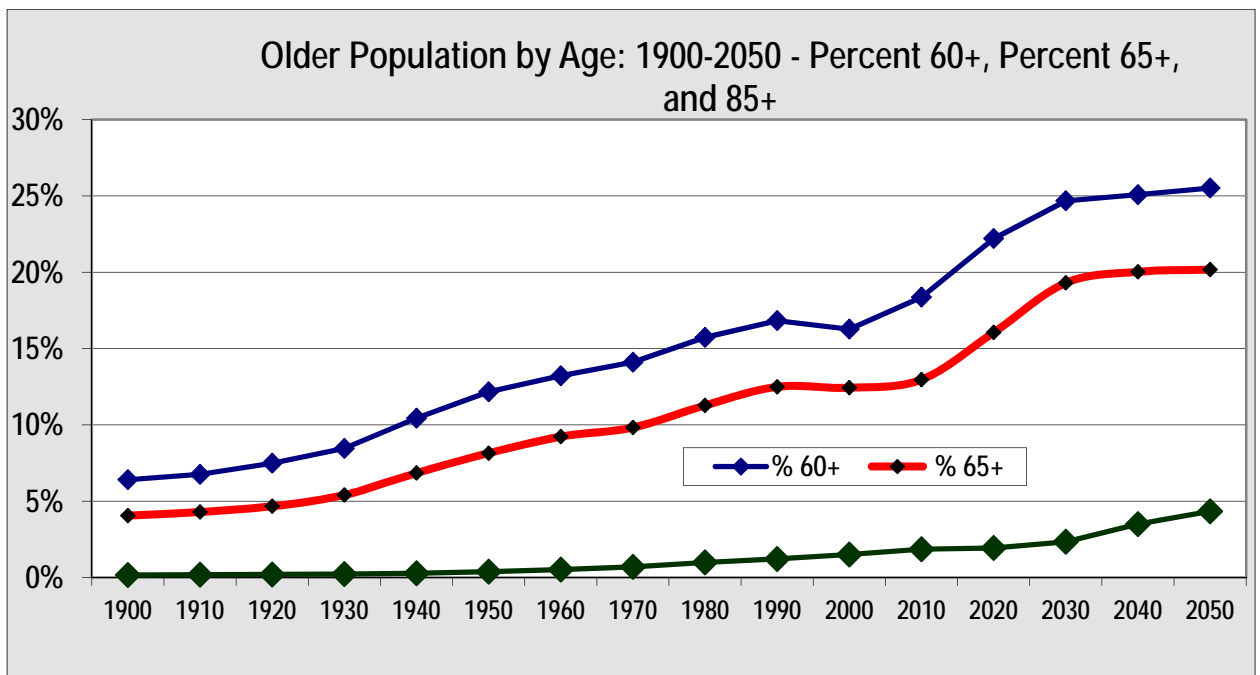
b) Barring an economic, military, health or natural event of historic proportions, no new baby boom is anticipated through 2050. With a stagnant or declining birth rate, foreign immigration is projected to be the major avenue by which young people will be added to our national population.

c) As impacts Orchard Park, the overall population will grow at an average rate of about 0.5% per year while the senior population will increase at an average rate of no less than 1.55% per year. Projected minimum numbers of seniors starting with 2010 as a baseline are:

    a) 2010 -   9,336 (actual count)
    b) 2015 - 10,176
    c) 2020 - 11,194
    d) 2025 - 12,089
    e) 2030 - 12,573

d) It is expected that the number of individuals seeking Senior Services will increase in proportion to the expected rate of growth of the senior population and resource availability will need to commensurately expand to address that need.

e) As baby boomers move into older age groups, the age structure of the senior population will change with greater numbers moving into the most elderly groups. The direction and magnitude of this phenomenon are illustrated in the Health and Human services graph below and will necessitate anticipatory adjustment in the type and quantity of program service offerings.

Population by Age: 1900-2050
Source: U.S. Bureau of the Census
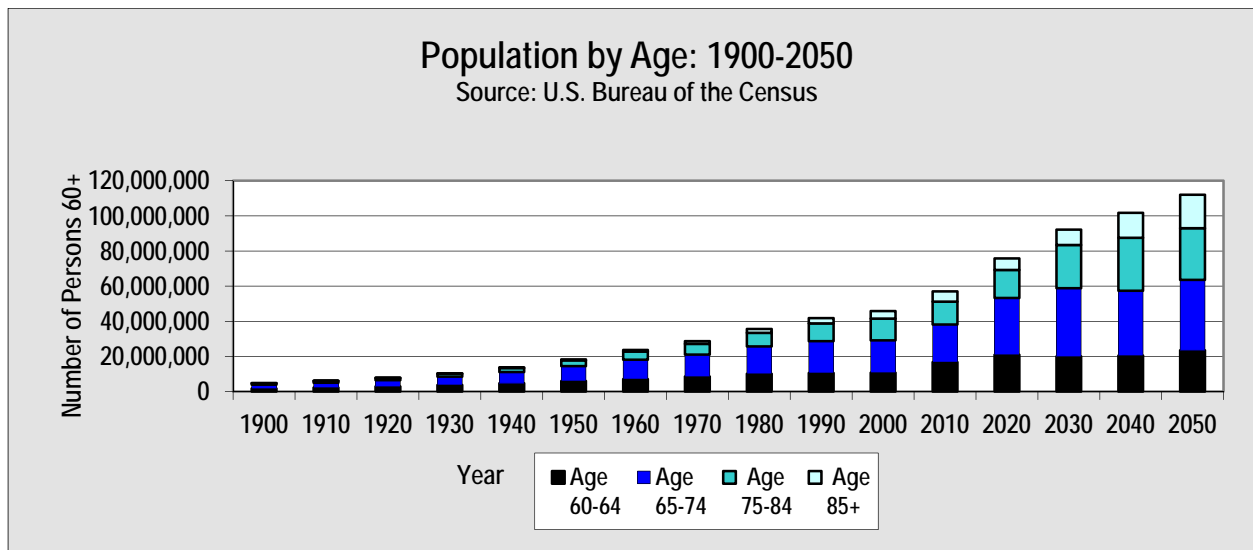
References: - U.S. Census Bureau 2000 Census
U.S. Census Bureau 2010 Census
U.S. Census Bureau – American Fact Finder
U.S. Census Bureau – **The Next Four Decades, *The Older Population in the United States: 2010 – 2050***, Vincent, Grayson K. and Victoria A. Velkoff
U.S. Department of Health and Human Services – Administration on Aging – ***Projected Future Growth of Older Populations***

Senior Service Needs in Orchard Park

1. <u>Problems which have particularly strong impact on the senior population are</u> social isolation, increased vulnerability to loss of memory and mental alertness, chronic health and physical fitness problems, mobility limitations, nutrition problems, stressors consequent to dealing with loss of friends, family and loss of the physical, mental and financial resources to maintain the level of independence that has been customary in adult life. The impact of each of these problems can be profound. For example, the AARP Foundation cites Dr. Lisa Berkman, Director of the Harvard Center for Population and Development Studies, who reports that the mortality risk for socially isolated individuals, a particularly pervasive problem for the elderly, is three times as high as for those who are not .

2. <u>The Task Force has identified a set of core needs and prioritized subcommittee review in the order listed below</u>:

- <u>Activities</u> - Structured experiences to promote mental alertness, age-appropriate fitness, health teaching, wellness, knowledge relative to managing chronic illnesses , social stimulation, social support, intellectual stimulation, personal education, caregiver education, stable cognitive functioning and leisure time skills. These serving the goal of maximizing independence, optimizing health and maintaining quality of life.

- <u>Transportation</u> - Providing avenues of access to medical appointments, health and fitness services, health care products, groceries, nutritional services, activities and supportive programming for persons with enduring transportation and mobility limitations related to health as well as seasonal and situational needs related to weather and weather emergencies.

- <u>Supports</u> - Helping assistance with a variety of life activities additional to those noted above including home healthcare, close personal support, financial supervision, legal guidance, delivered meals, emotional counseling, home handyman and property maintenance services, all

provided to maximize independence and quality of life and to minimize demands for ongoing family and agency intervention.

- Housing - Specialized housing opportunities to environmentally address issues and provide supports noted above. These can include specialized apartments, patio homes with services and specialized communities. Identifying needs to guide development with possible supplement by zoning and/or other enhancement actions can be offered to promote any recommendations noted by study.

- Funding – Research in this area addresses exploration of funding options for facilities, programs and activities.

- Other - As identified.

3. Activities and an Activity Center have been identified as the first need area to be addressed for the following reasons:

A. Many of the key critical problems and needs that have been identified can be most effectively and efficiently addressed in the setting of an Activity Center that has adequate space and parking and is properly sized and configured to support events, groups, classes and activities. An appropriate physical space is required to host programs in order for them to occur.

B. As has been already documented on numerous occasions, the current Center for senior activities has numerous shortcomings. There are serious questions about the accessibility, usable space, configuration, safety, handicapped suitability, cost efficiency and contiguous parking resources of the current structure

Senior Center – A Quantitative Profile

1. While interrelated, quantitative and qualitative aspects of Senior Center functioning will be reviewed separately for purposes of clarity.

2. The Quantitative Profile addresses attendance, utilization and capacity relative to present and projected population needs.

3. <u>Three measures of Utilization are:</u>

   a) <u>number of different individuals</u> attending in a given time period
   b) <u>number of individuals signing in</u> during a given time period
   c) <u>number of program contacts</u> i.e. the total number of people attending in each group totaled for all groups offered during a given time period

4. <u>The Orchard Park Center presently uses the number of "sign-ins"</u> as its quantitative indicator.

   a) This is a prevailing "industry standard" – four of the six Senior Centers in area towns that provided data use that system (one of the other two does not record attendance; the other uses program contact numbers)
   b) The "sign-in" record is identified as a best practice by program directors since it facilitates the most effective planning for space utilization, staffing and resource deployment.

5. Orchard Park generally has between 75 and 150 "sign-ins" per day totaling 20,822 per year. This compares favorably to most other communities.

Community	# Seniors	#Sign-ins	Ratio
Amherst *	33,379	-	-
Cheektowaga	28,816	39,889	1.38
Clarence	8,940	29,095	3.25
East Aurora	9,959	20,525	2.06
Orchard Park	9,336	20,822	2.23
West Seneca	15,108	26,500	1.75

* Program contact method used

6. <u>Calculating an accurate number of different individuals served</u>:

    a) Presuming usable similarities in models for data collection, the Service Department of West-Herr Ford (the largest Ford dealership in New York State) was contacted to inquire as to their procedures. Service department staff indicated that they focus on service and customer relations leaving data analysis to the West Herr Group's central Information Technology department.

    b) The President of the West Herr group was contacted and the charge of the Senior Services Task Force explained. He offered the services of the Auto Group's IT department to assist.

    c) During initial discussion with the head of West-Herr Information Technology, an offer was made by West Herr to assist by developing a user-friendly attendance system to generate unduplicated numbers, work with Senior Center staff to implement it and use the West-Herr data processing system to generate unduplicated numbers and other types of information useful in planning,

7. <u>Projecting utilization of an upgraded Activity Center</u>:

<u>Utilization rates for the existing center will serve as a base. These will need to be augmented by</u>:

a) The number of seniors currently attending meetings and activities that now have to be held in larger venues than the current center which is too small to hold their numbers.

b) The number of Orchard Park seniors who must now travel to other towns to attend activities which the floor plan of current space is not configured to accommodate and who will choose to participate locally when their activity of interest can be offered here.

c) The number of residents who have mobility limitations commonplace among the elderly and cannot attend because of lack of nearby parking. Parking is a convenience to most young people but a decisive factor in determining participation for a large number of the elderly.(There are currently 36 spaces (3 handicapped) in the Senior Center lot, 17 in a nearby Municipal lot and 9 proximal street spaces. Of these 26 additional, at least half are typically used by local residents and patrons and employees of nearby businesses)