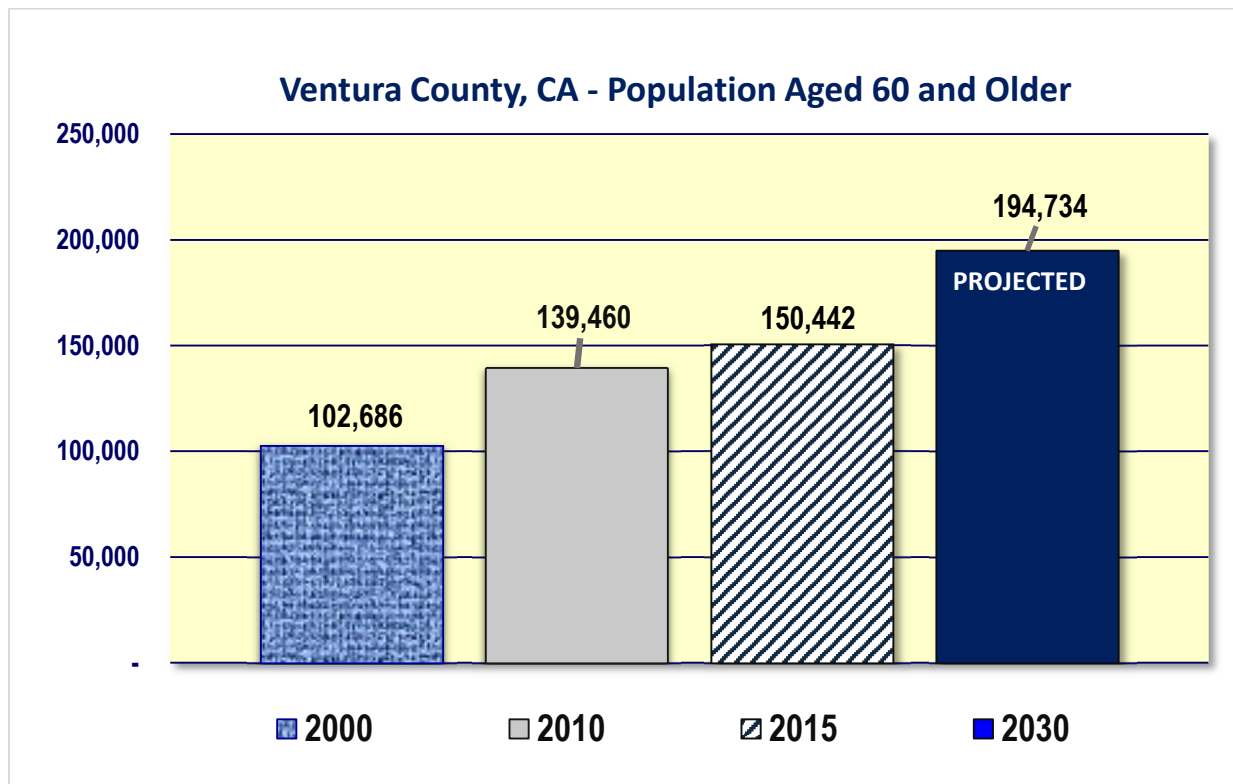




**Year 1**  
**FY 2016-2017**

# Master Strategic Plan 2016-2020

## *Summary of the Draft*



## Table of Contents

<b>VCAAA SENIOR CHARTER .....</b>	<b>I</b>
Purpose.....	i
Guiding Principles of the Charter .....	i
<b>FORWARD .....</b>	<b>II</b>
<b>SECTION 1 – MISSION, MOTTO, VISION CORE VALUES.....</b>	<b>1</b>
<b>SECTION 2 – DESCRIPTION OF PLANNING &amp; SERVICE AREA (PSA).....</b>	<b>3</b>
Geography .....	3
Economic Characteristics .....	5
Farming.....	6
Poverty and Economics .....	8
Population .....	14
<b>SECTION 3 – DESCRIPTION OF AREA AGENCY ON AGING – VCAAA.....</b>	<b>17</b>
Advisory Council .....	17
Our Role – Approved by VCAAA Advisory Council, January 2016.....	19
Visible Leadership.....	19
<b>SECTION 4 – PLANNING PROCESS – ESTABLISHING PRIORITIES .....</b>	<b>20</b>
<b>SECTION 5 – NEEDS ASSESSMENT PROCESS.....</b>	<b>21</b>
Methodology .....	22
Consumer Survey 2015.....	24
Professionals – Key Informants/Stakeholder Survey .....	25
<i>Comparison of Needs Expressed by Consumers Compared to Professionals.....</i>	<i>27</i>
<b>SECTION 6 – TARGETING PRIORITIES .....</b>	<b>28</b>
<b>SECTION 7 – IDENTIFICATION OF PRIORITY SERVICES – MINIMUM PERCENTAGES .....</b>	<b>31</b>
<b>SECTION 8 – NARRATIVE OF GOALS AND OBJECTIVES.....</b>	<b>32</b>
Goal #1 - Providing Resources and Services.....	32
Goal #2 - Broaden Awareness of Programs and Services.....	37
Goal #3 - Strategies to Address Current and Future Needs.....	39
<i>Goals and Objectives of Advisory Council Sub-committees.....</i>	<i>43</i>
Health Issues Committee.....	43
Legislative Committee.....	44
Livable Communities Committee.....	46
Optimal Aging Committee.....	47
Outreach Committee.....	50
<b>GLOSSARY OF TERMS.....</b>	<b>51</b>
<b>IN MEMORIUM.....</b>	<b>52</b>

REGARDING CHART ON THE COVER. Source: US Census data for 2000 and 2010. US Census American Community Survey, 2010-2015. (Note: For 2015, the US Census estimates aged 60+ population to be 150,442; whereas the California Department of Finance Demographics Units estimates 165,550.) Projections shown for 2030 are based on most recent CA DOF percentage of population estimates for aged 60+.



## **VCAAA Senior Charter**

### **Quality of Living Strategy**

### **For Ventura County Seniors – February 2016**

#### **PURPOSE**

The purpose of the VCAAA Senior Charter is to bring together seniors, families and caregivers, business community, policy makers, social service providers and public and private agencies to advocate for improving and/or maintaining the quality of living of Ventura County Seniors. The guiding principles of the charter are based on the congressional intent of the Older Americans Act, which honors the inherent dignity of the individual.

#### **GUIDING PRINCIPLES OF THE CHARTER**

- 1) Adequate resources to cover the basic needs of retirement.
- 2) Accessible and affordable health care (including mental health, fall prevention and fitness resources, healthy foods and quality rehabilitative and end-of-life care).
- 3) Suitable housing designed and located to meet a variety of senior housing opportunities, including institutional care and affordable housing; planning housing for the long-term needs of an aging society, including universal design and aging in place; and senior representation on planning and design review committees in every city.
- 4) Access to quality and convenient low-cost transportation – public and private transportation choices for seniors and disabled riders, including advocating for funding for senior transportation; providing a “third tier” of public transit for those unable to access paratransit; providing time-competitive public transportation (trains, HOV lanes); and efficient user-based coordinated regional public transit.
- 5) Opportunities for civic engagement, including cultural, education and training and recreational and volunteer opportunities.
- 6) Independent living and self-determination – seniors will enjoy the freedom, independence and exercise of the individual initiative in the planning and management of their own lives, including the opportunity for employment without age discrimination
- 7) Efficient community services with emphasis on maintaining a community-based continuum of care for the vulnerable elderly.
- 8) Family caregivers will have access to resources and services to ease the emotional and physical strains of caregiving and to support them in their efforts to care for their loved ones.

## **Forward**

The Ventura County Area Agency on Aging (VCAAA) receives funding from the federal Older Americans Act (OAA) and the California Department of Aging (CDA), as well as other sources, to provide programs and services for older adults, adults with disabilities, and their unpaid caregivers. A condition to receive funding from OAA in CDA is that the VCAAA (and all area agencies on aging in California) prepare a four-year plan outlining goals and objectives to be accomplished.

A new four-year planning cycle begins July 1, 2016, and runs through June 30, 2020. VCAAA refers to its plan as the Master Strategic Plan for FY 2016-2020.

**This document, the *Summary of the Draft*, is a condensed version of the full VCAAA Master Strategic Plan for FY 2016-2020. This document is intended to be a starting point for public discussion about the direction and vision of VCAAA for the next four years and longer.** Thus, it is a fluid and changeable document, which allows for changes that may be made as a result of the public hearing.

The objectives and performance measurements listed under Goals #1 and #2 (in Section 8), meet program and regulatory requirements of the federal Older Americans Act (OAA) and Title 22 of the California Code of Regulations (CCR) pertinent to the California Department of Aging. **The provision of any and all services is contingent upon the availability of federal, state, local and other funding sources.**

**The categories shown in the Table of Contents are mandated by the California Department of Aging with the exception of the Senior Charter and Glossary of Terms.**

**A notable difference in the objectives contained in this plan, compared to prior years, is that VCAAA will not be spending any federal funds on program development (PD) or coordination (C) activities for the VCAAA to address priority needs. Instead, these funds will be expended directly on programs and services.**

**We welcome your comments and suggestions at the public hearing to be held on Wednesday, March 9, 2016, at the Ventura County Area Agency on Aging, 646 County Square Drive in Ventura. The public hearing is scheduled to begin at 9:15 AM. Persons wanting to submit written testimony may do so. **Written comments must be received by the close of business on March 9, 2016.****

The complete Master Strategic Plan for FY 2016-2020 will include the many appendices required by CDA, and will incorporate any changes, additions, deletions and comments resulting from the public hearing and/or written testimony. Once finalized and approved by the Board of Supervisors, the plan must be received by CDA on or before May 1, 2016. Subsequent to CDA approval (expected no later than September 2016), the full plan will be available to the public on the VCAAA website; and it will be updated annually.

## SECTION 1 – Mission, Motto, Vision Core Values

### VCAAA MISSION

The Ventura County Area Agency on Aging's mission is to serve Ventura County's aged 60+ population, adults with one or more disabilities (as defined by the Americans with Disabilities Act Amended 2008), and their unpaid caregivers, by:

- Providing leadership in addressing issues that relate to older Californians, adults with disabilities, and their caregivers;
- Developing and maintaining community-based systems of care that provide services, which support independence within California's interdependent society, and which protect the quality of life of older persons and persons with functional impairments;
- Enhancing and supporting existing community based service providers systems of care and long-term services and supports; and
- Promoting citizen involvement in the planning and delivery of services for Ventura County's older population, adults with disabilities, and their caregivers.

**This mission shall be accomplished through a network of education, advocacy, problem solving, program planning and funding.**

**NOTE:** Title 22 of the California Code of Regulations requires the wording underlined above, to be used in the agency's mission statement.

### VCAAA MOTTO

*To Serve. To Guide. To Envision.*

### VCAAA VISION

*VCAAA envisions that it will be the focal point of aging in the county, identifiable to seniors and caregivers; a leader in the aging industry that is innovative and responsive to the changing and varied needs of older adults.*

### VCAAA CORE VALUES

- **Put People First** – All of VCAAA's actions shall benefit Ventura County's older adults, adults with disabilities, and their caregivers and especially those persons who are underserved, vulnerable, isolated and/or living with special needs.
- **Accessibility, Inclusivity and Diversity** – VCAAA's programs will be inclusive and available to Ventura County's older adults, adults with disabilities, and their caregivers (as permitted by regulations). Programs will be culturally appropriate, responsive and reflective of the diverse nature of the senior community, adults with disabilities and their unpaid caregivers.

- **Accountability and Transparency** – VCAAA will be an accountable steward of public funds by ensuring the efficiency, quality and cost-effectiveness of its programs and services, which will be provided in a “transparent” and open manner.
- **Collaboration** – VCAAA will create useful, effective forms of collaboration with partners, within and beyond the aging services sector, in the areas of service development and delivery, research, evaluation and management.
- **Integrity** – All programs and services, whether internal or external, will be delivered with integrity and will comply with legal, fiscal, and program mandates.
- **Respectful and Supportive Work Environment** – VCAAA will encourage creativity, diversity, innovation, teamwork, accountability, continuous learning, a continuous quality improvement loop inclusive of all employees, a sense of urgency, enthusiasm, trust, and the highest ethical standards.
- **Neutrality** – VCAAA staff will provide accurate, non-biased, reliable, understandable, and timely information and services to our service population, partners, and the public.
- **Responsive and Innovative** – VCAAA will be responsive in identifying and addressing the changing needs of the community. VCAAA will encourage innovation in the effective and diverse delivery of services.
- **Deliver Results** – VCAAA will deliver services and results that are useful to the people and communities directly served by its programs, and to the taxpayers who pay for these programs.

The mission statement, motto, vision, and core values shape the development and direction of VCAAA.

## SECTION 2 – Description of Planning & Service Area (PSA)

### GEOGRAPHY

VCAAA is in Planning and Service Area (PSA) 18, which is a single county planning and service area consisting entirely of Ventura County.

Ventura County is known as the “Gold Coast” because of its scenic beauty, fertile lands, and Mediterranean-type climate. Tourists and homebuyers alike enjoy the climate and lifestyle of Ventura County.

The county was formed in 1873 from Santa Barbara County. Native inhabitants were the Chumash Indians. Early Spanish settlers called the area “the land of everlasting summers.”

Ventura County is located in west-central California along the Pacific Ocean. Neighboring counties include Santa Barbara County to the northwest, Kern County to the northeast and Los Angeles County to the south and east. The county's western and southwestern borders are on the Pacific Ocean with 43 miles of coastline that includes 7.5 miles of coastline for public beaches and 411 acres state beach parks.



The total area of the county is 2,208 square miles, which includes 1,845 square miles of land and 363 square miles of water. In the state, the county ranks 26th out of 58 in land size. Mountain ranges, forests, agricultural plains, valleys and beaches dominate the topography. The Los Padres National Forest comprises most of the northern half of the county; thus, population centers are in the southern portion of the county.

Two of the eight Channel Islands are part of Ventura County: Anacapa Island and San Nicholas Island. Located eleven miles southwest of Oxnard, the 699-acre Anacapa Island is one of five islands that comprise Channel Islands National Park, a wilderness preserve and marine sanctuary. San Nicolas Island is 65 miles from Oxnard, making it the most remote of the Channel Islands. Consisting of 22.7 square miles, the island is owned and operated by the United States Navy.

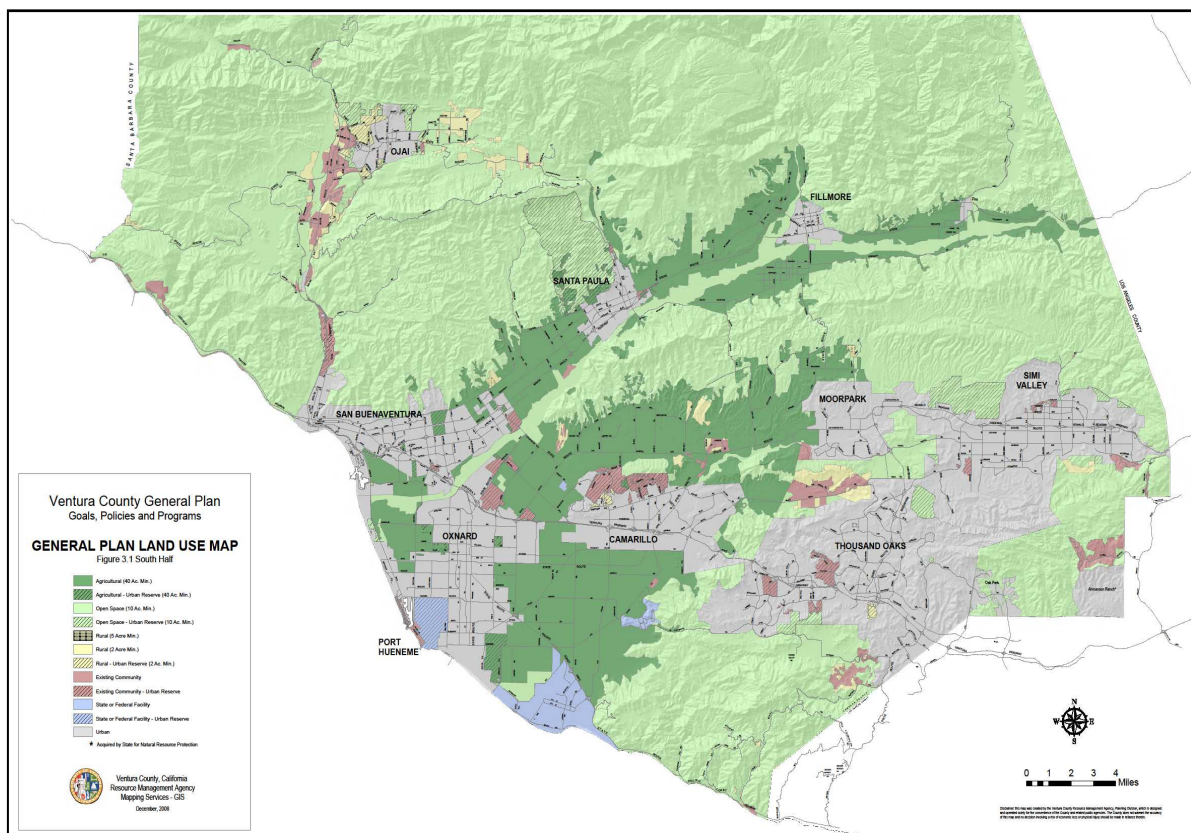
Ventura County's largest bodies of water are two large human-made lakes that provide recreation and serve as reservoirs. They are Lake Casitas (about 10 miles inland, north of Ventura and west of Ojai) and Lake Piru (about 40 miles inland, west of Fillmore and the unincorporated area of Piru and bordering Los Angeles County.) The Santa Clara River is the principal waterway and the Ventura River is a secondary waterway.

The northern portion of the county consists primarily of coniferous forests, chaparral and rugged inaccessible mountain areas. The Los Padres National Forest occupies 860 square miles or 46.6% of the land area. It includes the Chumash Wilderness (38,150 acres), the Sespe Wilderness



(219,700 acres), and the Matilija Wilderness (29,600 acres). The county's elevation runs from sea level to its highest peak, Mount Pinos, at 8,831 feet followed by Frasier Mountain at 8,017 feet.

The Topa Topa Mountains around Ojai, the Santa Susanna Mountains in the Simi Valley area, the Santa Monica Mountains in the southeastern section, and South Mountain of Santa Paula have created many fertile valleys and plains, making Ventura County one of the top agricultural producers in California.



With 43 miles of coastline, Ventura County has two recreational and fishing harbors: Ventura Harbor and Channel Islands Harbor; and hosts the Port of Hueneme, the only deep-water harbor between Los Angeles and the San Francisco Bay. The port services international businesses and ocean carriers and has a high cargo throughput of automobiles, fresh fruit and produce and is the primary support facility for the offshore oil industry.

Two United States Navy bases are along the coast: The Naval Air Station at Point Mugu (adjacent to Oxnard and Camarillo) and the Naval Construction Battalion Center in Port Hueneme, which supports the naval construction force known as the Seabees.

Ventura County has 10 incorporated cities, and all are located in the southern half of the county. In western Ventura County, Ojai is inland in the mountains on Highway 33; Ventura, Port Hueneme, and Oxnard border Highway 101 and the ocean with the natural border of the Santa Clara River dividing Ventura from the other two cities; Camarillo, also on Highway 101, rests



slightly inland and its south end borders the Conejo Grade, which serves as a natural divider between western and eastern Ventura County; Santa Paula and Fillmore are respectively 16 and 25 miles inland on Highway 126. In inland eastern Ventura County, Thousand Oaks borders Highway 101 as it leads into Los Angeles; and Simi Valley and Moorpark are further inland, north of the highway.

Major avenues of transportation include Highways 1, 23, 33, 34, 101 (the major route that runs along the coast, north to Santa Barbara and south to Los Angeles), 118, 126 (the major route that runs east from the coast in Ventura to the Los Angeles County line and intersects with Interstate 5, 150, and 232).

County railway service includes passenger service on Amtrak and frequent rail service by Southern Pacific and Ventura County Railway Company. There are both public and private transit companies operating in Ventura County. Metrolink provides commuter service from the eastern portion of the county to Los Angeles.

Ventura County has primarily a Mediterranean climate with an average annual temperature of 74 degrees F. There are six micro-climates, each has its own weather pattern. Average annual rainfall varies from 14 to 22 inches depending upon the area (when drought conditions are absent).

## **ECONOMIC CHARACTERISTICS**

### ***Employment***

Ventura County's economic forecast states that in 2014 the county had a total of 314,000 wage and salary jobs. Approximately 37.6% of residents are employed in some capacity. The average salary per worker is \$62,514 and the income per capita is \$50,185. The unemployment rate has improved substantially, dropping from 9% in 2012 to 5.4% in December 2015. This was slightly below the state unemployment rate of 5.8% in December 2015.

The major employment groups in Ventura County are listed below:

1. Government: 49,100 jobs
2. Retail trade: 40,400 jobs
3. Health care and social assistance: 35,600 jobs
4. Manufacturing: 30,500 jobs

Major industries expected to add the most jobs throughout the county are as follows:

1. Help care and social assistance: 10,155 jobs or 28.5% growth
2. Retail trade: 7885 jobs or 19.5% growth
3. Accommodation and food services: 7216 jobs or 24.9% growth

**“Over the next 10 years  
(2013-2023), Ventura  
County is projected to add  
48,150 jobs, with more than  
half of the growth (28,650  
jobs) projected for the east  
Ventura [County] area.”**

---

Source: Labor Market Report: Ventura County  
(August 2014) prepared by the Center of  
Excellence, Central Coast capital region (prepared  
for Ventura Community College District)

### Occupations projected to experience fastest growth in Ventura County, 2012-2022

(as of February 2015):

Occupation	Hourly Median Wage (2014)
Tire Repairers and Changers	\$13.32
Insurance Sales Agents	\$28.09
Physical Therapist Aides	\$12.41
Insurance Claims and Policy Processing Clerks	\$15.67
Cement Masons and Concrete Finishers	\$23.06
Home Health Aides	\$11.18
Roofers	\$22.33
Operations Research Analysts	\$29.26
Medical Secretaries	\$16.74
Web Developers	\$34.08

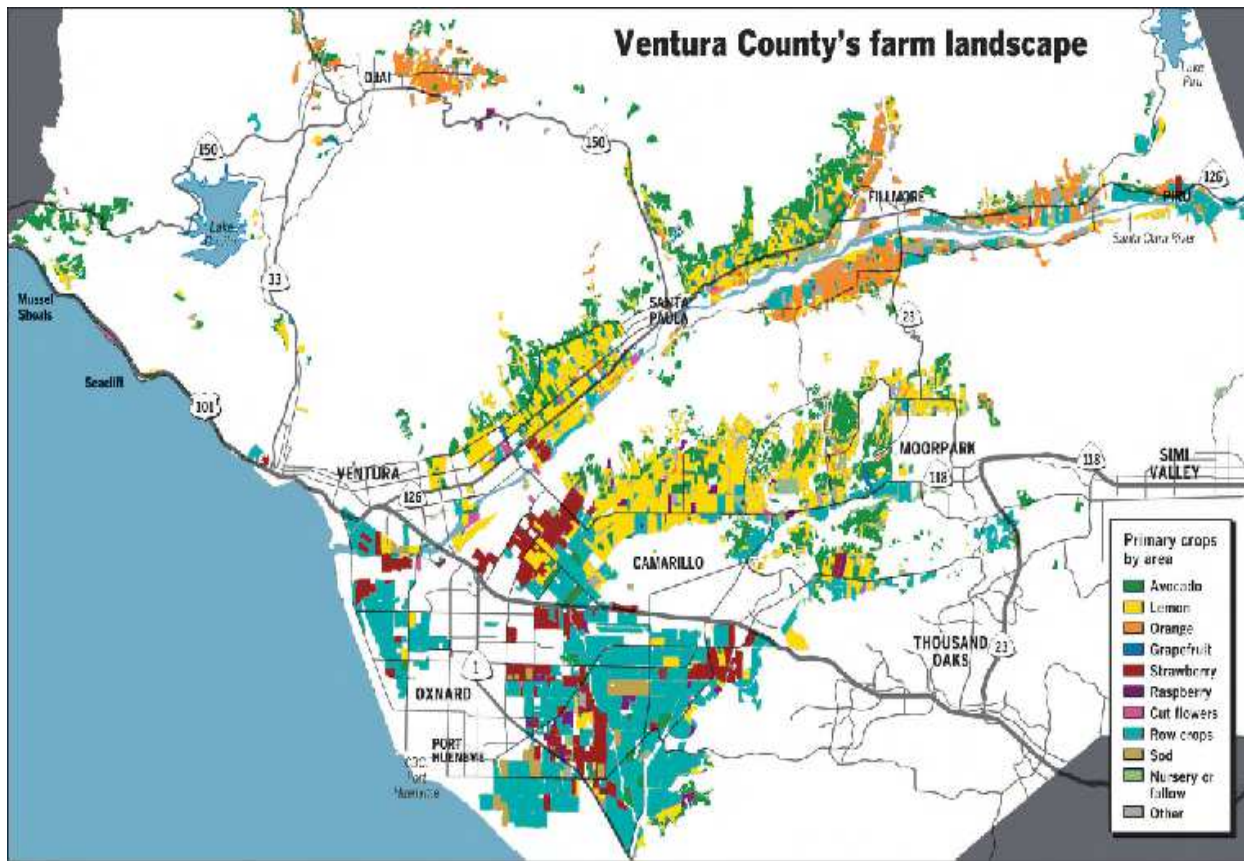
### Occupations projected to have the most job openings in Ventura County from 2012-2022

(as of February 2015):

Occupation	Median Hourly Wage (2014)
Farmworkers and Laborers, Crop, Nursery, and Greenhouse	\$9.03
Retail Salespersons	\$10.45
Cashiers	\$10.52
Combined Food Preparation and Serving Workers, Including Fast Food	\$9.33
Waiters and Waitresses	\$9.03
Laborers and Freight, Stock, and Material Movers, Hand	\$11.59
General and Operations Managers	\$50.11
Office Clerks, General	\$15.26
Landscaping and Grounds Workers	\$13.30
Personal Care Aides	\$10.21
Customer Service Representatives	\$17.34
Secretaries and Administrative Assistants, Except Legal, Medical, and Executive	\$17.69
Stock Clerks and Order Fillers	\$10.35

## **FARMING**

California leads the United States in cash farm receipts with combined commodities representing nearly 13% of the U.S. total. In 2013, 106,613 acres were being harvested for farm crops in Ventura County. Agriculture and agriculture-related businesses account for about 4.4% of overall economic activity in Ventura County, generating \$2.1 billion in revenue and \$76 million in indirect business taxes annually. One in 10 county residents relies, to some degree, on income derived from farming.



In 2013 the leading agricultural commodities in Ventura County were:

1. Strawberries: \$608,765,000
2. Avocados: \$209,723,000
3. Raspberries: \$196,370,000
4. Nursery Stock: \$190,889,000
5. Lemons: \$188,926,000
6. Celery: \$180,864,000
7. Tomatoes: \$72,512,000
8. Peppers: \$52,370,000
9. Cut Flowers: \$43,079,000
10. Cilantro: \$29,096,000

**The Farm Bureau of Ventura County states most recent data shows Ventura County's crop value as being No. 10 among all**

#### Farming Related Facts:

- Average farm size in Ventura County: 131 acres (statewide average is 328 acres)
- County's total land area: 1.2 million acres
- Acres of urban and built-up land: 105,461 acres
- 26% of land is agricultural land

## **POVERTY AND ECONOMICS**

According to estimates of the U.S. Census Bureau's 5-year estimates (2010-2014), the Ventura County's poverty rate in 2014, for persons of all ages living at or below 100% of the federal poverty rate was 11.1%, and 7.3% for persons aged 60 and over.

### **2016 Poverty Guidelines For the 48 Contiguous States and the District of Columbia**

<b>Persons in Family/Household</b>	<b>2016 Poverty Guideline</b>
<b>1</b>	<b>\$11,880</b>
<b>2</b>	<b>16,020</b>
<b>3</b>	<b>20,160</b>
<b>4</b>	<b>24,300</b>
<b>5</b>	<b>28,440</b>
<b>6</b>	<b>32,580</b>
<b>7</b>	<b>36,730</b>
<b>8</b>	<b>40,890</b>
<b>For families/households with more than 8 persons, add \$4,160 for each additional person.</b>	

### **Ventura County Residents Aged 65+ Living Below the Federal Poverty Level by Race/Ethnicity**

<b>Race/Ethnicity</b>	<b>Aged 65+ Percent Living Below Poverty Level</b>
<b>Native Hawaiian or Other Pacific Islander</b>	<b>&lt;1%</b>
<b>White, non-Hispanic</b>	<b>5.7%</b>
<b>Asian</b>	<b>8.8%</b>
<b>Two or more races</b>	<b>10.5%</b>
<b>Hispanic or Latino</b>	<b>11.9%</b>
<b>Black or African American</b>	<b>14.6%</b>
<b>American Indian or Alaskan Native</b>	<b>16.1%</b>
<b>Other</b>	<b>16.2%</b>
<b>Overall, all Races and Ethnicities</b>	<b>7.3%</b>

Source: U.S. Census American Community Survey, 2009-2013

**Ventura County Residents Aged 65+ Living below Federal Poverty**

			PERCENT of People Aged 65+ Living Below Poverty Level		
ZIP Code	City/Area	Trend	A	B	C
		Comparing Columns A to C	2009- 2013*	2008- 2012*	2007- 2011*
ALL	County of Ventura – Total	↓	7.2 %	7.3 %	7.6 %
91320	Thousand Oaks (Newbury Park)	↓	3.3	2.7	3.6
91360	Thousand Oaks (Northwest)	↓	7.2	7.2	7.7
91361	Thousand Oaks (Westlake Village, Lake Sherwood, Hidden Valley)	Same	6.3	6.3	6.3
91362	Thousand Oaks (North Ranch/East)	↑	4.3	4.8	3.6
91377	Thousand Oaks (Oak Park)	↓	9.5	12.7	14.3
	Thousand Oaks Average:	↓	6.1 %	6.7 %	7.1 %
93001	Ventura (includes Casitas Springs)	↓	14.5	13.4	15.4
93003	Ventura	↓	5.2	5.2	5.9
93004	Ventura (Saticoy/East)	↓	7.8	7.2	6.2
	Ventura Average:	No change	9.2 %	8.6 %	9.2 %
93010	Camarillo (West)	↓	6.2	5.8	7.0
93012	Camarillo (Santa Rosa Valley/East)	↓	4.1	5.0	4.5
93066	Somis – RURAL AREA	↑	8.3	6.1	6.2
	Camarillo-Somis Average:	↑	6.2 %	5.6 %	5.9
93021	Moorpark :	↓	4.5	5.1	7.3
93022	Oak View	↓	7.3	6.8	8.6
93023	Ojai (Meiners Oaks)	↑	7.9	7.8	7.3
	Ojai-Oak View Average:	↓	7.6 %	7.3 %	8%
93030	Oxnard (East)	↑	11.7	9.7	9.9
93033	Oxnard (College Park)	↓	11.0	12.5	13.1
93035	Oxnard (Channel Islands/South)	↓	4.0	4.4	4.8
93036	Oxnard (North/Riverpark)	↑	4.4	4.5	3.4
	Oxnard Average:	No change	7.8 %	7.8 %	7.8 %
93041	Port Hueneme Port Hueneme	↑	11.7 %	9.4 %	8.5 %
93063	Simi Valley (Northeast/Santa Susanna)	↑	7.7	7.6	5.6
93065	Simi Valley (Northwest)	↓	5.0	5.6	6.1
	Simi Valley Average:	↑	6.4 %	6.6 %	5.9 %
93015	Fillmore	↓	9.4	10.0	13.2
93060	Santa Paula	↓	13.9	13.6	15.1
93040	Piru – RURAL AREA	↓	10.9	10.6	18.7
	Highway 126 Corridor Cities-Average:	↓	11.4 %	11.4 %	15.7 %

**KEY: Data Source and Time Frame**

A = U.S. Census American Community Survey, 2009-2013

B = U.S. Census American Community Survey, 2008-2012

C = U.S. Census American Community Survey, 2007-2011

**KEY: Other**

↓ = Percentage is less than in 2007-2011

↑ = Percentages more than in 2007-2011

**Data not available for the following ZIP Codes:**

Newbury Park: 91319

Thousand Oaks: 91358, 91359

Ventura: 93002, 93005, 93006, 93007

Camarillo: 93011

Fillmore: 93016

Moorpark: 93020

Ojai: 93024

Oxnard: 93031, 93032

Port Hueneme: 93043, 93044

Santa Paula: 93061

Simi Valley: 93044, 93062, 93064, 93093, 93099

**Poverty Comparisons by Age Group, County, State and National Percentages**

Age Group	Ventura County	California	United States
All ages	11.1%	15.9%	15.4%
Aged 65+	7.3%	9.9%	9.4%
Ages 18 to 64	9.9%	14.7%	14.3%
Under age 18	16%	22.1%	21.6%

Source: 2009-2013 American Community Survey 5-Year Estimates

**2013 Ventura County Elder Economic Index for Persons Aged 65 and Older**

This document contains the most recent version (2013) of the California Elder Economic Security Standard Index (Elder Index). It is a tool that quantifies how much income is needed for a senior with a given living arrangement and geographic location to adequately meet his or her basic needs living in the community.

It is the only elder-specific financial measure of its kind, based on credible, publicly available sources and has been calculated for all 58 counties in California.

The Elder Index sets a benchmark of income adequacy for older adults, and provides the true cost of meeting basic needs and maintaining independence in the community.

The Elder Index is intended to empower policymakers to allocate limited resources more effectively, and to prepare for the needs of seniors and aging Baby Boomers. The Elder Index can

**Among the older adult population, it's not just "poor" elders who are struggling in Ventura County.**

assist adults of *any* age to make informed decisions about *when* and *where* to retire, how much to save now, and whether to continue working even after they formally retire.

The California Elder Economic Security Standard™ Index (Elder Index) measures how much income is needed for a retired adult age 65 and older to adequately meet his or her basic needs, including housing, food, out-of-pocket medical expenses, transportation, and other necessary spending.

Per the tables shown below, a single elder with a mortgage needs an income of \$33,816; and an older couple needs \$40,668. A single elder renter needs \$24,648; and an elder couple needs \$31,500.

#### 2013 – Aged 65 and Older: Homeowner with Mortgage

Number of Elders	Housing	Health-care	Food	Transportation	Misc.	Monthly Total	Annual Total
Single Elder	\$1,939	\$166	\$254	\$233	\$226	\$2,818	\$33,816
Elder Couple	\$1,939	\$332	\$471	\$326	\$321	\$3,389	\$40,668

#### 2013 – Aged 65 and Older: Renter

Number of Elders	Housing	Health-care	Food	Transportation	Misc.	Monthly Total	Annual Total
Single Elder	\$1,175	\$166	\$254	\$233	\$226	\$2,054	\$24,648
Elder Couple	\$1,175	\$332	\$471	\$326	\$321	\$2,625	\$31,500

Source: UCLA Center for Health Policy Research. Numbers compiled for 2013 reflect the most recent information available. © 2015 Insight Center for Community Economic Development.

Furthermore, 39% of *all* elders age 65+ do not have enough income to meet their most basic needs, as measured by the Elder Index. *That's more than 31,000 elder struggling to make ends meet in Ventura County.*

In contrast, according to the Federal Poverty Line (FPL), only 4% (3,000) of Ventura County elders are considered “poor,” with annual individual incomes below \$10,210. But a large number of other elders (28,000 or 35%) fall into the “eligibility gap,” with incomes above the FPL but below the Elder Index. These elders don’t have enough money to cover their most basic needs, but have too much to qualify for many public programs.

#### Women Living Alone More Economically Vulnerable

Historically, women have earned less than men. Today they still earn, nationally, an average of 78 cents for every dollar a man earns. Without a partner to share the expenses, and in the face of increasing costs and fixed incomes, *1 out of every 2 elder women living alone in Ventura County is struggling to make ends meet.*



### **Race Makes a Difference**

*Nearly 8 out of 10 Latino elders in Ventura County have incomes below the Elder Index. Although non-Latino White elders are better off, 43% are still economically insecure. The number of African American and Asian elders who live alone on incomes below the Elder Index is less than 1,000, and therefore too small to calculate reliable estimates.*

### **Renters Living Alone are the Most Economically Vulnerable**

*More than 6 out of 10 elder renters living alone in Ventura County are trying to survive on incomes below the Elder Index. Close to half of elders living alone who own their home, but are still paying off a mortgage, are unable to meet their basic needs.*

### **Elders Rely on Social Security**

National Statistics: According to the Social Security Administration, nine out of 10 individuals aged 65 and older nationwide receive Social Security benefits. Social Security benefits represent about 39% of the income of the elderly. Among elderly Social Security beneficiaries, 53% of married couples and 74% of unmarried persons receive 50% or more of their income from Social Security; and 22% of married couples and approximately 47% of unmarried persons rely on Social Security for 90% or more of their income. As of June, 2015, the national average Social Security monthly payment to a retired worker is \$1,335. There are currently 2.8 workers for each Social Security beneficiary. By 2035, there will be 2.1 workers for each beneficiary.

**Social Security  
continues to be  
the major  
source of  
income for  
most of the  
elderly.**

California Statistics: In California, one out of three seniors rely exclusively on Social Security to cover their basic costs.

Ventura County Statistics: As of 2014, the estimated total number of persons aged 65 and older residing in Ventura County was 105,310 (according to the US Census Bureau's 2014 5-Year American Community Survey). Of persons aged 65 and older residing in Ventura County, 97,445 (92.5%) receive Social Security benefits. The gender breakdown is: Female: 53,760 females (55% of total recipients); and 43,685 males (45%). About 7.5% percent of persons aged 65 and older do not receive Social Security benefits.

### **2015 SocioNeeds Index for Selected ZIP Codes in Ventura County**

The 2015 SocioNeeds Index was created by *Healthy Communities Institute* to measure social and economic factors that are correlated to poor health outcomes. These factors (poverty, education, etc.) are analyzed and assigned an index value from 0 to 100 for each ZIP Code in the nation. ZIP Codes with the highest index values are estimated to have the greatest socioeconomic need, which is correlated with preventable hospitalizations and premature death.

*ZIP codes with an index value of 50 would be average as compared to the rest of the country; however, an index value of 50 could be high, compared to the values of the other ZIP codes in a*

*specific area.* To identify the relative level of need within a community, the national index values for each ZIP Code are sorted from low to high and divided into five ranks.

### 2015 SocioNeeds Index for Selected ZIP Codes in Ventura County

*Health Rank of 5 = Greatest Socioeconomic Need*

*Health Rank of 1 = Lowest Socioeconomic Need*

ZIP	City	Health Index Value	Health Rank	Percent of Persons Aged 65+ Living Below Poverty Level*
93015	Fillmore	79.5	5	9.4
93030	Oxnard (East)	85.8	5	11.7
93033	Oxnard (College Park)	95.4	5	11.0
93041	Port Hueneme	82.0	5	11.7
93060	Santa Paula	88.2	5	13.9
93001	Ventura	63.4	4	14.5
93036	Oxnard (North/Riverpark)	66.2	4	4.4
93003	Ventura	30.6	3	5.2
93004	Ventura	28.5	3	7.8
93022	Oak view	34.6	3	7.3
93023	Ojai	33.1	3	7.9
93035	Oxnard (Channel Islands/South)	32.4	3	4.0
91360	Thousand Oaks (Northwest)	13.9	2	7.2
93010	Camarillo (West)	18.2	2	6.2
93063	Simi Valley (Northeast/Santa Susanna)	18.1	2	7.7
93065	Simi Valley (Northwest)	13.2	2	5.0
93066	Somis - RURAL	14.3	2	8.3
91320	Thousand Oaks (Newbury Park)	6.2	1	3.3
91361	Thousand Oaks (Lake Sherwood)	5.8	1	6.3
91362	Thousand Oaks (North Ranch/East)	5.9	1	4.3
91377	Thousand Oaks (Oak Park)	2.4	1	9.5
93012	Camarillo (Santa Rosa Valley/East)	6.9	1	4.1
93021	Moorpark	9.3	1	4.5

\*People aged 65+ living below poverty level per U.S. Census Bureau's American Community Survey for the years 2009 to 2013 (most recent data available).

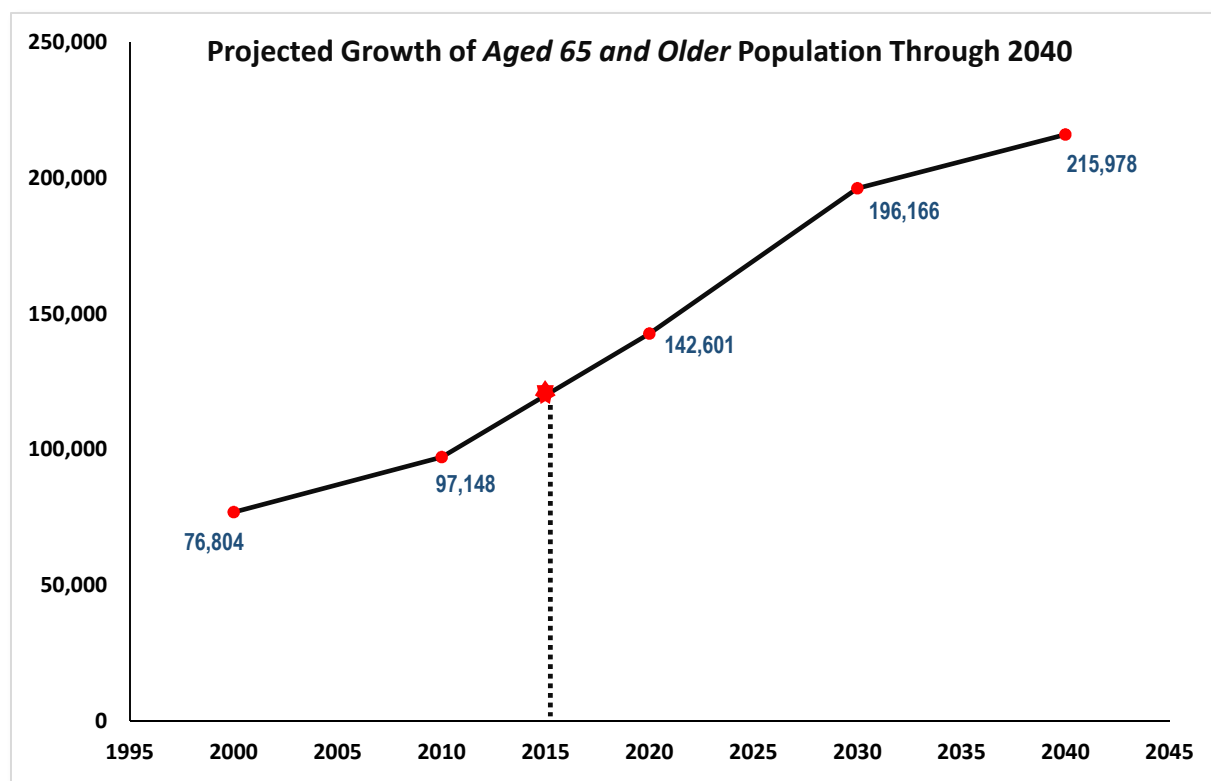
Source: Health Matters in Ventura County, <http://www.healthmattersinvc.org/modules.php?op=modload&name=NS-Indicator&file=socioneeds>

## POPULATION

### Ventura County Aged 60+ Population – Age Distribution by City

(Based on US Census American Community Survey 5-year estimates, 2010-2015)

CITY/AREA (listed alphabetically)	TOTAL POPULATION	POPULATION AGED 60+	AGED 60 = % OF CITY/AREA POPULATION	Ranking: Percentage of Aged 60+ Within Respective City/Area	% OF COUNTY'S TOTAL 60+ POPULATION	Ranking: Percentage of County's Total Aged 60+ Population
AREAS NOT LISTED BELOW	72,853	13,528	18.6%	5	9.0%	6
CAMARILLO	65,985	15,694	23.8%	2	10.4%	5
FILLMORE-PIRU	17,281	2,369	13.7%	9	1.6%	11
MOORPARK	35,033	4,589	13.1%	10	3.0%	8
OJAI-MIRA MONTE	28,681	7,573	26.4%	1	5.0%	7
OXNARD	201,744	25,500	12.6%	11	16.9%	2
PORT HUENEME	21,949	3,709	16.9%	7	2.5%	10
SANTA PAULA	29,990	4,439	14.8%	8	2.9%	9
SIMI VALLEY	125,699	22,262	17.7%	6	14.8%	3
THOUSAND OAKS	128,126	29,040	22.7%	3	19.2%	1
VENTURA	108,449	22,163	20.4%	4	14.7%	4
<b>TOTAL</b>	<b>835,790</b>	<b>150,866</b>			<b>100.0%</b>	



**Ventura County's Population Growth from 2000 to 2015**  
**Comparison of Total Population to Aged 60 and Older Population**

		2015 ACS Estimates	2000 Census Actual	Difference From 2000 to 2015	Percent of Increase 2000 to 2015
<b>Total Population:</b>		<b>835,790</b>	<b>753,197</b>	<b>82,593</b>	<b>11.0%</b>
<b>Age Group</b>	<b>2015 Percent of Total Population</b>	<b>2014 Estimate Population</b>	<p><b>From 2000 to 2015, Ventura County's total population increased approximately:</b>  <b>► For all ages, increased by 11% or 82,593;</b>  <b>► For ages 60 and older, increased by 47%.</b></p>		
45-54	14.6%	121,993			
55-59	6.6%	54,923			
<b>Ages 45 to 59:</b>	<b>21.2%</b>	<b>176,916</b>			
60-64	5.4%	45,267			
65-74	7.0%	58,421			
75-84	3.8%	31,438			
85 and over	1.9%	15,740			
<b>Ages 60+</b>	<b>18.1%</b>	<b>150,866</b>	<b>102,686</b>	<b>48,180</b>	<b>47%</b>

**Ventura County Selected Population Characteristics 2015**

Characteristic	Total Population	Aged 60 and Older Population
<b>TOTAL POPULATION</b>	835,790	18.1% or 150,866 *
Persons aged 65 and older		12.6% or 105,310
Persons aged 75 and older		5.6% or 46,804
<b>SEX AND AGE:</b>		
Male	49.6%	68,794 or 45.6%
Female	50.4%	82,071 or 54.4%
<b>MEDIAN AGE:</b>	36.9 years	69.1 years
<b>RACE AND HISPANIC OR LATINO ORIGIN:</b>		
One race:	95.9%	98.3% or 148,301
White (includes Hispanic or Latino)	77.7%	84.6% or 127, 633

Characteristic	Total Population	Aged 60 and Older Population
Black or African American	1.8%	1.4% or 2,112
American Indian and Alaska Native	0.7%	0.5% or 754
Native Hawaii and Other Pacific Islander	0.2%	0.2% or 302
Some other race	8.5%	4% or 6,035
Two or more races	4.1%	1.7% or 2,565
Hispanic or Latino origin (of any race)	41.2%	20.1% or 30,324
White alone, not Hispanic or Latino	47.5%	69.5% or 104,852
	52%	32% or 48,277
<b>MINORITY ADULTS:</b>		
	48%	68% or 102,588
<b>NON-MINORITY ADULTS:</b>		
	267,829	87,128
<b>HOUSEHOLDS:</b>		
Family households	73.6%	61% or 53,148
Married-couple	55.6%	49.2% or 42,867
Householder living alone	20.6%	35.4% or 30,843
		3.5% or 5,252
<b>GEOGRAPHICALLY ISOLATED OLDER ADULTS*:</b>		
<b>MARITAL STATUS:</b>		
Married now, not separated	51%	60% or 90,520
Widowed	5%	19% or 28,665
Divorced	10%	15% or 22,630
Separated	2%	2% or 3,017
Never Married	32%	4% or 6,035
<b>RESPONSIBLE FOR GRANDCHILDREN UNDER AGE 18 YEARS:</b>		
Living with grandchild(ren)	5.1%	8% or 12,069
Responsible for grandchild(ren)	1.1%	1.4% or 2,112
	7.4%	19.5% or 29,914
<b>VETERAN, CIVILIAN:</b>		
<b>DISABILITY STATUS:</b>		
Civilian non-institutionalized population	828,410	149,050
With any disability	10.1%	29.2% or 43,523
		12.4% or 18,699
<b>MEDI-CAL ELIGIBLE OLDER ADULTS*:</b>		
<b>PERSONS AGED 65 AND OVER ON SSI/SSP*</b>		6,611
<b>PLACE OF BIRTH AND CITIZENSHIP:</b>		
Native	645,228	74.9% or 113,013
Foreign born	190,562	25.1% or 37,853
U.S. citizen	45.7%	71.8% or 108,322

Characteristic	Total Population	Aged 60 and Older Population
Not a US citizen	54.3%	28.2% or 42,544
<b>LANGUAGE SPOKEN AT HOME &amp; ABILITY TO SPEAK ENGLISH:</b>		
English only	61.8%	72.1% or 108,774
Language other than English	38.2%	27.9% or 42,092
Speak English less than "very well"	16.3%	16.3% or 24,592
Non-English-speaking*		5% or 7,535
<b>EMPLOYMENT STATUS:</b>		
Civilian labor force	66.7%	32.6% or 49,182
Employed in civilian labor force	60.4%	30.1% or 14,804
Unemployed in civilian labor force	6.3%	2.5% or 1,230
Armed forces	0.6%	0.0%
Not in labor force	32.8%	67.4% or 101,684
<b>POVERTY STATUS IN THE PAST 12 MONTHS:</b>		
Population for whom poverty status is determined:	824,329	98.8% or 149,045
Below 100% of the poverty level	11.1%	7.3% or 10,880
100 to 149% of the poverty level	8.4%	6.9% or 10,284
At or above 150% of the poverty level	80.4%	85.7% or 129,292
<b>HOMEOWNER CHARACTERISTICS:</b>		
Median value of homes owned	\$444,800	\$448,000
Median monthly owner costs with mortgage	\$2,447	\$2,074
Median monthly owner costs without mortgage	\$521	\$490
Median gross rent	\$1,494	\$1,245
<b>CHRONICALLY HOMELESS ADULTS AGED 62 AND OLDER:</b> 35 persons aged 62 and older of 451 persons identified as being chronically homeless. Thus, 8% of chronically homeless individuals are aged 62 and older. <i>Source: Ventura County 2015 Homeless Count and Subpopulation-Final Survey, April 2015.</i>		

\*California Department of Finance (DOF) estimates there are 165,550 persons aged 60 and older in Ventura County which differs by 14,684 persons; however, no other data is available from the DOF for that segment of the population.

All data is from the *US Census American Community Survey*, 5-year estimates 2010-2014/2015, for Ventura County's aged 60 and older population unless indicated otherwise.

\*Source: *California Department of Aging Population Demographic Projections by County and PSA for Intrastate Funding Formula* to be 150,866.

## **SECTION 3 – Description of Area Agency on Aging – VCAAA**

The Ventura County Area Agency on Aging (VCAAA) was formed in 1980, as an agency of the County of Ventura. VCAAA is the principal agency in Ventura County charged with the responsibility to promote the development and implementation of a comprehensive coordinated system of care that enables older individuals and their caregivers to live in a community-based setting and to advocate for the needs of those 60 years of age and older in the county, providing leadership and promoting citizen involvement in the planning process as well as in the delivery of services.

In 2016, VCAAA, in collaboration with the Independent Living Resource Center (ILRC), opened the VCAAA Aging and Disability Resource Center (ADRC) in Ventura and is awaiting formal designation as a state-certified ADRC.

The agency operates under the auspices of the Ventura County Board of Supervisors, which has local policy-making authority over the VCAAA. The Board gives final approval to the budget, and any advocacy, program development, coordination efforts, or programs proposed for funding. This structure has been advantageous to the VCAAA by enabling it to: (1) establish and maintain a strong local presence; (2) facilitate good communication with other public agencies and units of local government; (3) have a sound framework for financial accountability; and, (4) have an office and meeting facility designated for the Advisory Council.

### **ADVISORY COUNCIL**

A 37-member Advisory Council provides advice to VCAAA staff on the agency's policies, programs and funding, and makes recommendations to the Ventura County Board of Supervisors. The Advisory Council reflects the geographic and cultural diversity of Ventura County comprised of the below listed representatives:

- Board of Supervisors – Six persons appointed by the Board of Supervisors
- City councils on aging/commissions on aging – Two representatives for each of the 10 cities in the county (20 persons)
- Senior service providers – Two representatives (elected by the Advisory Council)
- Special populations – Five persons, one each representing:
  - Older adults with one or more disabilities
  - Family caregivers (informal, unpaid)
  - Lesbian, Gay, Bisexual, Transgender (LGBT) population
  - Military veterans
  - Older adults with mental health issues
- California Senior Legislature (CSL) – One CSL senator and two CSL assembly members
- Immediate past chair of the Advisory Council

The Advisory Council forms task forces and committees as needed to address specific issues. Current standing committees of the Advisory Council include:

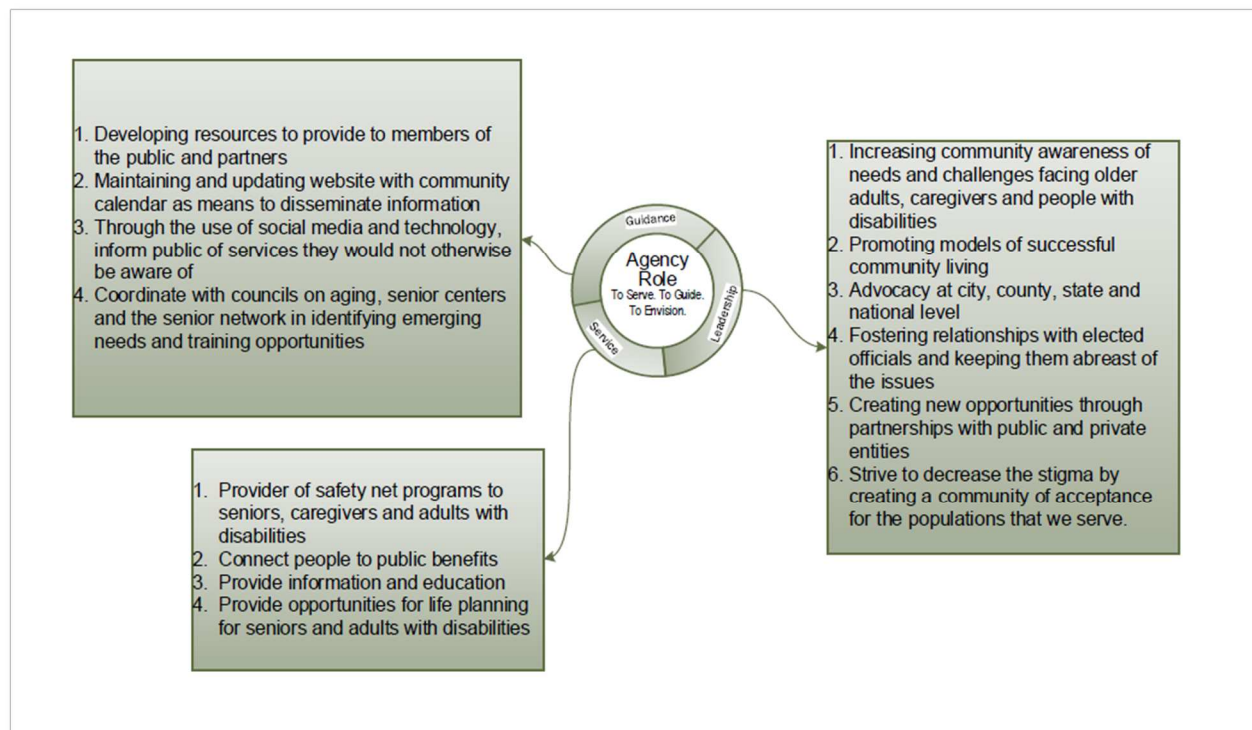


- By-Laws Committee
- Health Issues Committee
- Legislative Committee
- Livable Communities Committee (previously Housing and Transportation)
- Planning and Allocation Committee
- Optimal Aging Committee
- Outreach Committee
- Senior Nutrition Program Committee

All committees work closely with the agency director and staff to address issues and to develop recommendations for programs and funding. Interested members of the public are welcome to attend and participate on committees; however, they cannot vote on policies or actions.

The VCAAA interacts directly with the U.S. Administration for Community Living/U.S. Administration on Aging, the California Department of Aging and local agencies to improve the quality of life for older adults in Ventura County. The primary source of funding for the agency is the federal Older Americans Act; however, other sources contribute to our total funding.

#### **OUR ROLE – APPROVED BY VCAAA ADVISORY COUNCIL, JANUARY 2016**



## **VISIBLE LEADERSHIP**

The VCAAA is a visible and effective leader in aging issues through its interaction with senior service providers, volunteers, the senior community, and the public. It is financially the largest single funding source of senior programs and services in Ventura County. Through community forums, public hearings, and presentations to community-based organizations, the VCAAA receives public opinion on issues relating to the older population. The VCAAA collaborates with organizations to develop and enhance a community-based system of care for older residents of Ventura County. VCAAA staff members participate on numerous committees, coalitions, etc. in support of senior issues.

The VCAAA provides a comprehensive and coordinated community-based system that includes the following characteristics:

- A visible point of contact where anyone can visit or call for help or information;
- A range of program and service options;
- Accessible service options for all older individuals and others served by VCAAA programs, regardless of income or level of dependency;
- Support of the system by the commitment of public, private, voluntary and personal resources;
- Collaborative decision making among all concerned organizations with input from older individuals being taken into consideration;
- Special help or resources are available for those who are most vulnerable (those in danger of losing their independence);
- Effective agency-to-agency referral and follow-up;
- Sufficient flexibility in the service delivery system to provide appropriate individualized assistance;
- The system is tailored to the nature of the community;
- Direction by leaders with the stature and ability to convene meetings; assess needs; design solutions; track successes; stimulate change; and plan present and future community responses.

## **SECTION 4 – Planning Process – Establishing Priorities**

In preparing the Strategic Plan, a review of the organizational structure, purpose and required mandates of the agency are necessary to frame the parameters of the goals and objectives. Many services and programs may seem like good ideas and something that the agency should provide; however, they may not fall under the auspices of the VCAAA.

VCAAA bases its priorities on needs assessments conducted in 2014 and 2015, input from members of VCAAA's Advisory Council and subcommittees, and data collected from a multitude of resources listed in the next section. Targeting priorities are consistent with priorities mandated in the Older Americans Act, Older Californians Act and the California Code of Regulations 3§7310, and are as follows:

1. Older individuals living at or below the federal poverty level with particular attention to low-income minority individuals, females aged 85 and over.
2. Older individuals with the greatest social need with particular attention to low-income minority individuals, persons with disabilities, persons with language barriers (especially Spanish-speaking persons aged 60 to 64), and persons affected by cultural, social or geographic isolation (especially females aged 80 and over).
3. Older individuals who are abused, neglected, or exploited with particular attention to financial abuse, neglect (including self-neglect), psychological/mental abuse and physical abuse.
4. Family and informal caregivers as defined by the OAA including amendments of 2006.
5. Older individuals with Alzheimer's disease or related disorders with neurological and organic brain dysfunction and their caregivers.
6. All county residents aged 60 and over whose needs, if not addressed now, may force them into the category of greatest need.
7. Residents in long-term care facilities or those at risk for placement.

## **SECTION 5 – Needs Assessment Process**

### **METHODOLOGY**

In addressing and determining the needs of the aging community and needs of unpaid family caregivers, VCAAA staff utilized the most recent demographic information available, held planning/brainstorming sessions with its Advisory Council and members of the public, and conducted several surveys:

- CONSUMERS' SURVEY (a survey of older adults and family caregivers) – Conducted November 2014 through January 2015.
- PROFESSIONALS' SURVEY (also called known as the survey of Key Informants/Stakeholders) consisting largely of professionals and some volunteers in the aging services network. Conducted November-December 2015
- SURVEY OF LONG TERM CARE OMBUDSMAN VOLUNTEERS who regularly visit long-term care facilities throughout Ventura County. Conducted November-December 2015.
- SWOT SURVEY OF VCAAA staff to assess Strengths, Weaknesses, Opportunities and Threats (SWOT analysis). Conducted November-December 2015.
- OPTIMAL AGING SURVEY conducted March 2014. The survey sought input from VCAAA Advisory Council members relative to their thoughts on what is successful aging.

VCAAA Advisory Council members and the public participating on the agency's Health Issues Committee, Legislative Committee, Optimal Aging Committee, Outreach Committee, Livable Communities Committee (housing and transportation) and Senior Nutrition Committee also provided valuable input regarding needs and issues pertinent to their respective committees.

The primary sources for obtaining input regarding the needs of Ventura County's older adults and their unpaid caregivers were the Consumers' Survey and the Professionals' Survey. Additional information from those surveys follows this section.

Numerous resources were used to assist in the assessment of needs projecting future trends and they included, but are not limited to the entities listed below.

- 2015 White House Conference on Aging
- California Association of Area Agencies on Aging (c4a)
- California Department of Aging
- California Department of Finance – Data Source Handbook 2015 along with demographics projections and statistics from the Demographics Unit
- California Department of Transportation – Ventura County Economic Forecast 2014
- California Economic Development Department, Labor Market Division
- California Senior Legislature
- Center of Excellence, South Central Coast Region
- County of Ventura Farm Bureau
- County of Ventura Public Health Department
- County of Ventura Resource Management Agency
- County of Ventura Workforce Development Board

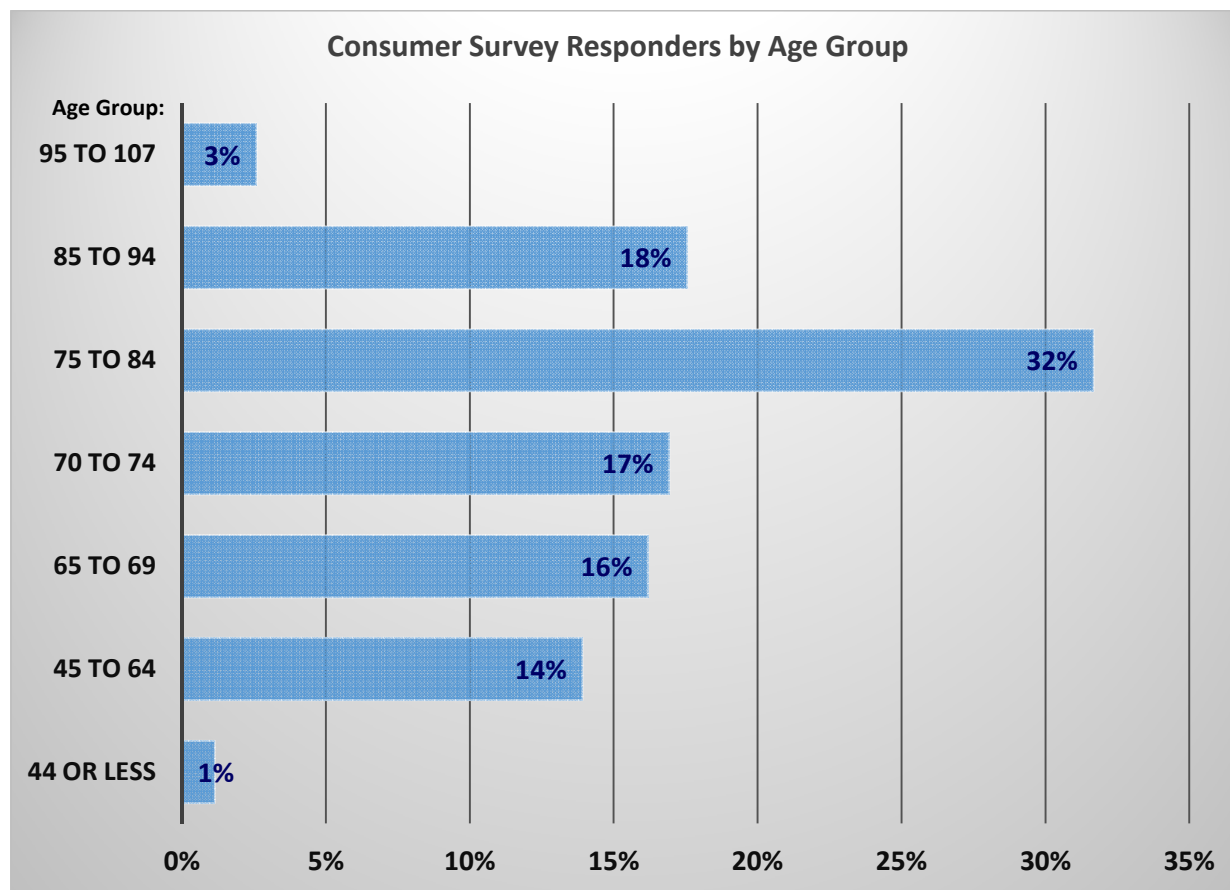
- Elder Economic Index for California Counties, 2013 (provided courtesy of c4a)
- Healthy Communities Institute – *2015 SocioNeeds Index* (via Health Matters in Ventura County website provided by County of Ventura Public Health Department)
- Institute for Optimal Aging
- Kaiser Family Foundation (regarding poverty among seniors, June 2015)
- Kyser Center for Economic Research
- Los Angeles Economic Development Corporation
- Milken Institute
- National Association of Area Agencies on Aging (n4a)
- National Center on Senior Transportation
- National Institute on Aging
- Social Security Administration
- SocialSecurityhop.com
- U.S. Administration on Community Living
- U.S. Census Bureau, including but not limited to, data from the U.S. Census 2010 and American Community Surveys, primarily 5-year estimates, 2010-2015
- U.S. Department of Labor
- Ventura County Civic Alliance (2015 State of the Region Report)
- Williams Institute and its Data Blog re LGBT population and issues

### **CONSUMER SURVEY 2015**

VCAAA distributed hardcopy questionnaires via senior centers throughout Ventura County and posted the survey on its website resulting in 1,068 responses. The geographical breakdown of the responses is as follows:

- The highest percent of responses was received from Camarillo (24%) and Oxnard (16%)
- Simi Valley and Ventura had an equal number of responses (12% for each city)
- Ojai and Oak View comprised 15% of the responses (7% and 8% respectively)
- Thousand Oaks and Newbury Park comprised 11% of the responses (7% and 4% respectively)
- Santa Paula, Fillmore and Piru comprised 4% of all responses
- Port Hueneme and Moorpark had an equal number of responses (3% for each city)

The age groups of the responders is shown below. The largest response was received from persons aged 75 to 84, and there was a surprising response from individuals aged 85 and older.



Shown below are the key characteristics of individuals responding to the consumer survey:

- ▶ 1,068 persons completed the survey between November 2014 and January 2015
- ▶ 92% prefer to speak English; 7% prefer Spanish
- ▶ 70% of responders were female
- ▶ 38% were married; 29% were widowed

- ▶ 65% were retired (not working); 35% work part-time or full-time
- ▶ 43% live alone
- ▶ 39% of all responders have a college degree (associates or higher)
- ▶ 29% of those persons live on \$2094+/month
- ▶ 34% regularly go to a senior center (66% do not attend)

One section of the survey concerned the reporting of falls. The responses provided important information regarding the need for fall prevention programs per the data shown below.

- ▶ 32.3% of responders said they had fallen at least once in the past 12 months.  
Of the individuals reporting falls, the age breakdown is as follows:
  - Persons aged 85 and older: 25% reported having fallen
  - Persons aged 65 to 74: 23% reported having fallen
  - Ages 45 to 64: 10% reported having fallen
- ▶ 3 out of 4 persons who reported having fallen were female
- ▶ 54% sought medical treatment at a hospital, doctor's office or urgent care center
- ▶ Age breakdown of persons reporting falls:
- ▶ *Ages 75 to 84 reported the highest number of falls with 32%.* This age group had the highest number of responders to the survey.

#### **PROFESSIONALS – KEY INFORMANTS/STAKEHOLDER SURVEY**

In the fall of 2015, surveys were emailed to 456 key informants/stakeholders who VCAAA identified as individuals working directly in the aging services network or in some allied capacity. The majority of the professional responders work in nonprofit organizations, for-profit organizations and government entities. VCAAA received 112 responses equaling a high response rate of 25%.

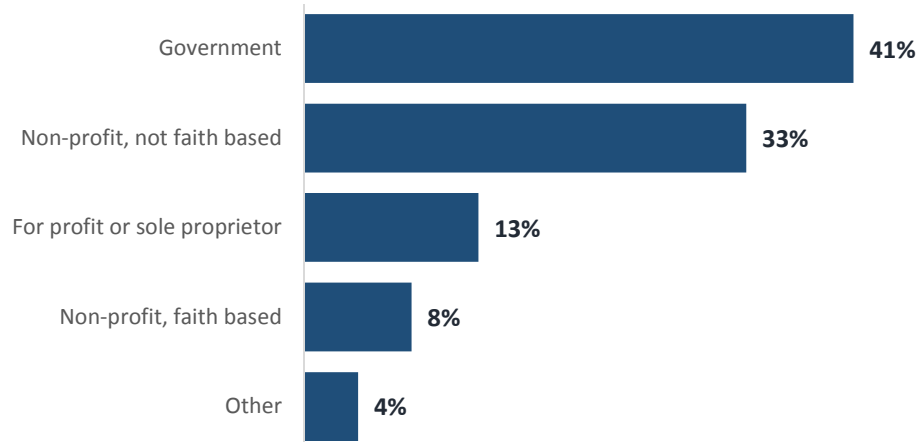
Shown below are the key characteristics of individuals responding to the survey of professionals.

- ▶ 71% of the responders were professionals and 29% were volunteers.
- ▶ Responders stated their primary role in the organization was as follows:
  - 35% work in an executive or management capacity
  - 28% work in day-to-day operations
  - 12% work in administrative support
  - 6% work in another capacity
  - 19% said they were volunteers
  - 75% of the responders stated they work with older adults who have difficulty paying for food and/or housing, and/or medicine, and/or utilities, and/or transportation, and/or basic comforts of life.

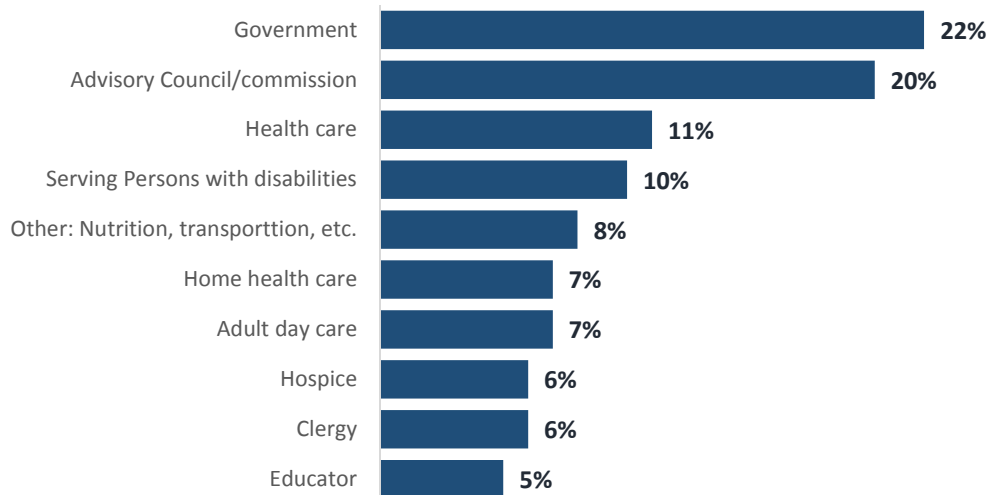
Persons completing the Professionals Survey (key informants/stakeholders) represent a five different types of organizations and provide various types of services as shown in the charts below.



### Responders to the Professionals Survey Work in These Types of Organizations



### Professionals Primarily Provide Services in These Areas



### ***Comparison of Needs Expressed by Consumers Compared to Professionals***

The survey sent to consumers and professionals asked to them to prioritize the current and projected needs of older adults and their unpaid, informal caregivers. For planning purposes, VCAAA will be focusing on the long-term projected needs (through 2030) expressed by the consumer responders. It is interesting to note the different priority of needs stated by the two groups, as shown in the table below. The most obvious explanation for the differences is the professionals are familiar with and work with individuals who have immediate need for services. In contrast, consumer responders may have no experience seeking assistance or services but can project those needs based upon their own experience. Priorities of both groups are important and will be considered in the planning process. That being stated, VCAAA is mandated to give priority to addressing the needs of the consumers.

TIMEFRAME: 2016-2030	PRIORITIES	
AREAS OF NEED	CONSUMERS	PROFESSIONALS
<b>TRANSPORTATION:</b> Local and out-of-area for trips.	1	6
<b>FOOD:</b> Access to nutritious food; nutrition education and counseling.	2	9
<b>HEALTH, FITNESS AND RECREATION PROGRAMS AND FALL PREVENTION</b>	3	12
<b>FAMILY CAREGIVER SERVICES</b>	4	4
<b>INFORMATION AND REFERRAL</b>	5	16
<b>HOME AND LIFESTYLE:</b> Help with tasks to enable a person to age-in-place and maintain lifestyle.	6	5
<b>PERSONAL CARE:</b> Help with grooming, dressing, feeding, etc.	7	8
<b>CASE MANAGEMENT</b>	8	13
<b>SOCIALIZATION:</b> Programs to prevent isolation, loneliness and that support companionship.	9	14
<b>DISASTER/EMERGENCY PREPAREDNESS</b>	10	
<b>RIGHTS AND SAFETY:</b> Protection of rights, property and dignity; personal safety; prevention of elder abuse.	11	11
<b>EDUCATION:</b> Opportunities for lifelong learning.	12	
<b>EMPLOYMENT:</b> Counseling and services to find employment.	13	
<b>HEALTH &amp; LONG-TERM CARE INSURANCE:</b> Information on/help with applying for health insurance or prescription coverage. Access to affordable health insurance and long-term care insurance.		7
<b>HEALTH CARE:</b> Affordable health and medical services.		2
<b>HOUSING:</b> Affordable housing; rent subsidy for low-income seniors; programs to prevent or cease homelessness of older adults.		1
<b>LONG-TERM CARE:</b> Access and availability of locally affordable long-term care facilities, including facilities dedicated to Alzheimer's patients.		3

## SECTION 6 – Targeting Priorities

Priorities are established by analyzing the results of needs assessments and input from a variety of entities that participate in the planning process PLUS by ensuring that the agency is compliant state and federal mandates.

### STATE AND FEDERAL MANDATES

The Older Americans Act (OAA), the Older Californians Act (OCA) and the California Code of Regulations, Article 3, Section 7310 (CCR.3§7310) require that specific segments of the population be “targeted” as having priority for services funded or provided by the VCAAA. The targeted populations are as follows:

1. Older individuals with the greatest economic need (i.e., an income level at or below the federal poverty line), with particular attention to low-income minority individuals.
2. Older individuals with the greatest social need with particular attention to low-income minority individuals. Social need is caused by non-economic factors, including:
  - a. Physical and mental disabilities, especially severe disabilities;
  - b. Language barriers, which include limited English-speaking ability among older adults; and,
  - c. Cultural, social or geographical isolation including isolation caused by (1) racial or ethnic status that: (a) restricts the ability of an individual to perform normal daily tasks, or (b) threatens the capacity of the individual to live independently; and (2) isolated, abused, neglected and/or exploited older individuals
3. Older Native Americans
4. Older individuals who reside in rural areas
5. Older individuals at risk for institutional placement
6. Family or informal caregivers – Under the Older Americans Act, as amended in 2006, a caregiver is a person 18 years of age or older who is an informal (unpaid) provider of in-home or community care of a care receiver who is (a) aged 60 or older or (b) is an individual of any age with Alzheimer’s disease or related disorder with neurological and organic brain dysfunction (dementia, Parkinson’s disease, Huntington’s disease, etc.); and/or (c) a person aged 55 or older who is related (by blood, marriage or adoption) to and is living with a child aged 18 or younger and has been identified through a legal or informal arrangement as being the child’s primary caregiver.
7. Older individuals with Alzheimer’s disease or related disorders with neurological and organic brain dysfunction and their caregivers

### **OTHER METHODS USED BY VCAAA TO REACH TARGET POPULATIONS**

1. The request for proposal (RFP) process focuses on targeted populations.
2. During the VCAAA's application review process, the VCAAA Advisory Council members, which includes people with disabilities and/or low-income status and/or minority status, make funding recommendations based on targeting policies.
3. The application review process contains a point-scoring mechanism that provides for recognizing and distinguishing those applicants who indicate the ability to reach and serve targeted populations relative to that population's need for services.
4. Minority service providers are encouraged to apply for funding and are funded where appropriate.
5. Informational publications about programs have been prepared in languages other than English and distributed to appropriate target populations.
6. The VCAAA conducts program evaluations on effective methods of outreach to target populations using NAPIS data and monitoring reports.
7. For residents of long term care facilities, VCAAA contracts with the Long Term Care Ombudsman to ensure that the rights of residents are being protected. VCAAA also offers two case management programs that offer services to those who no longer want to live in a long term care facility.
8. The Advisory Council's Planning and Allocations Committee and VCAAA staff ensure that new programs meet one or more specific service gaps (as determined by needs assessments) and serve one or more target populations.
9. Target populations are represented on the Advisory Council. Since the preparation of the previous Master Strategic Plan (2012-2016), the Advisory Council's membership has expanded to include representatives of these populations:
  - ▶ Family Caregivers
  - ▶ Lesbian, Gay, Bisexual, Transgender and Queer (LGBT&Q)
  - ▶ Veterans
  - ▶ Persons with Mental Health Issues
  - ▶ Persons with Disabilities

Services offered to target populations are proportionate to the 60 years and over population at large. In order to target services to underserved populations, VCAAA staff has identified and addressed the barriers that currently exist to accessing existing services. The intent is that by studying and understanding the various barriers that people face, programs and outreach can be developed that take into account these barriers.

### **BARRIERS TO ACCESSING EXISTING SERVICES**

Barriers encountered by target populations to accessing existing services include the following:

1. Geography: The Conejo Grade divides the county's populated areas into east (Thousand Oaks, Simi Valley and Moorpark) and west (Camarillo, Oxnard and Ventura). Mountains isolate Ojai from the rest of the cities in the county. The remote unincorporated area of

Piru is adjacent to Los Angeles County. During natural disasters such as wildfires or floods, several areas in the county are at risk of being isolated due to road closures.

2. Transportation: Older individuals in target populations may no longer be able to drive, or have never driven, or do not have access to public transportation or are too frail to use public transportation including paratransit service especially if needing to travel outside of Ventura County. Many cannot afford bus tickets and must choose between buying a bus ticket and buying food.
3. Culture: There is reluctance by non-English speaking seniors to seek out and utilize services, especially those related to caregiving.
4. Limited Resources: Funding for programs, services and staff are not sufficient to address the needs of all the target populations.
5. Economic Barriers: Rich versus poor. Affordability. For example, significant portion of senior's income goes for housing, however, the person does not qualify for subsidized housing because they do not meet income requirements.
6. Health Issues: Multiple chronic conditions limit mobility and create isolation.
7. Family Caregiving Responsibilities: Family caregivers are unable or unwilling to leave their loved one to access services.
8. Death of a Loved One: As individuals age, it is a normal course of events to experience loss, especially the loss of a spouse or life partner. This can cause the surviving partner to become depressed, to choose not to leave the home and stay isolated, and to experience self-neglect.

## **SECTION 7 – Identification of Priority Services – Minimum Percentages**

The California Code of Regulations, Article 3, Section 7312, requires the AAA to allocate an “adequate proportion” of federal funds to provide Access, In-Home Services, and Legal Assistance in the PSA. The annual minimum allocation is determined by the AAA through the planning process. The minimum percentages of applicable Title III B funds listed below have been identified for annual expenditure throughout the four-year planning period. These percentages are based on needs assessment findings, resources available within the PSA, and discussions at public hearings on the Area Plan.

ACCESS SERVICES: Transportation, Assisted Transportation, Case Management, Information and Assistance, Outreach, Comprehensive Assessment, and Public Information

IN-HOME SERVICES: Personal Care, Homemaker, Chore, Residential Repairs/Modifications, and Telephone Reassurance.

Type of Service	Percentage
Access Services	5%
In-Home Services	5%
Legal Assistance	5%
<b>Total</b>	<b>15%</b>

LEGAL ASSISTANCE: Legal Advice, Representation, Assistance to the Ombudsman Program and Involvement in the Private Bar

Note: Title III B minimum percentages of applicable funds are calculated on the annual Title III B baseline allocation, minus Title III B administration and minus Ombudsman. At least 1% of the final Title III B calculation must be allocated for each “Priority Service” category or a waiver must be requested for the Priority Service category(s) that the AAA does not intend to fund.

## **SECTION 8 – Narrative of Goals and Objectives**

VCAAA's Master Strategic Plan sets forth the agency's strategies for carrying out its goals and objectives for fiscal years 2016 through 2020, amidst an ever-increasing service population and stagnant funding. It provides a framework to guide staff and the Advisory Council in focusing on the highest priority issues while meeting state and federal mandates and assuring effective use of taxpayer dollars. Delivery of program and services is contingent upon receipt of funding.

VCAAA will track the progress of each goal and objective through a series of performance measures, which will be used to assess progress and will provide essential input into planning for continued improvement.

The below-listed goals represent VCAAA's priorities and vision for providing leadership, services and advocacy to promote an optimum quality of life for service population: older adults (aged 60 and older), adults with disabilities, and their unpaid caregivers. They also carry the intention to collaborate and partner with other organizations in the aging services network to meet the needs of the service population.

**All activities will begin on July 1, 2016 and end on June 30, 2017.**  
**All activities are NEW for this planning cycle.**  
**There are NO program development (PD) or coordination (C) activities.**

### **GOALS & OBJECTIVES OUTLINED**

**GOAL 1 – PROVIDE RESOURCES AND SERVICES THAT PROMOTE OPTIMAL WELL-BEING FOR VENTURA COUNTY'S OLDER ADULTS, ADULTS WITH DISABILITIES, AND THEIR UNPAID CAREGIVERS, WITH AN EMPHASIS ON WELLNESS, SAFETY AND COMMUNITY LIVABILITY.**

#### **1.1 TRANSPORTATION**

##### ***Ranking on Consumer Needs Survey: #1***

For persons aged 60 and older, VCAAA will provide transportation to/from congregate meal sites; and will ensure the availability of medical transportation for frail elders who meet specific criteria and who would not otherwise be able to get to/from medical appointments/treatments within the county and outside of the county. VCAAA will provide public transit vouchers to low-income seniors and to persons aged 18 and over who are ADA certified. (Transportation provided to people under 60 years of age will be funded with non-Older Americans Act funds.) VCAAA's Livable Communities Committee provide guidance to VCAAA staff on all matters related to transportation.

*Measurement:* VCAAA will utilize contractors to provide 21,863 one-way door-to-door transportation trips for 800 eligible unduplicated persons aged 60 and over.



## **1.2 FOOD:**

### ***Ranking on Consumer Needs Survey: #2***

VCAAA and its Registered Dietitians will work with local governments/senior centers, service providers, Certified Farmers' Markets and VCAAA's Senior Nutrition Garden to ensure access to nutritional meals, fresh fruits and vegetables; as well as nutrition counseling and education. VCAAA will provide bags of food to older adults experiencing a food emergency. VCAAA's Senior Nutrition Committee will monitor performance measures and provide guidance to VCAAA staff on all matters related to senior nutrition.

*Measurement:* 67,295 congregate meals and 121,662 home delivered meals will be provided. VCAAA's Registered Dietitian will provide 20,000 sessions of evidence-based nutrition education and 67 sessions of evidence-based nutrition counseling. VCAAA's Registered Dietitians will encourage the reduction of consuming unhealthy beverages and promote physical activity via the Supplemental Nutrition Assistance Program Education (SNAP-Ed), serving approximately 340 unduplicated seniors. VCAAA will distribute coupons to low-income seniors to purchase fresh produce at seven Certified Farmers' Markets, and will supplement its meal program by planting and harvesting fresh produce in VCAAA's Senior Nutrition Garden. VCAAA will provide emergency food/meals for eligible homebound seniors experiencing a food crisis and adults with disabilities upon discharge from the hospital experiencing a food crisis. An estimated 100 persons will be served.

## **1.3 HEALTH, FITNESS AND FALL PREVENTION**

### ***Ranking on Consumer Needs Survey: #3***

VCAAA will provide evidence-based physical fitness classes for persons aged 60+ at sites throughout the county designed to promote health and prevent falls. Additional help will be made available to older adults who have already experienced a fall.

*Measurement:* Classes will be provided for older adults throughout the county and will include these evidence-based programs: *Tai Ji Quan: Moving for Better Balance™* (TCMBD), *Stepping On, A Matter of Balance* the Arthritis Foundation's *Walk with Ease*. Classes will be taught by individuals who have completed training for each program. VCAAA will serve 400 unduplicated clients with an estimated provide 3,200 units (contacts) of evidence-based health promotion.

VCAAA's Fall Prevention Program will provide resources to persons aged 65 and older who have experienced a recent fall and have been medically transported to and/or been seen in an emergency room at Ojai Valley Hospital, Community Memorial Hospital or Ventura County Medical Center. 150 fall risk assessments will be conducted.

#### 1.4 FAMILY CAREGIVER SERVICES

##### *Ranking on Consumer Needs Survey: #4*

VCAAA will provide programs and services that will help to relieve the burden of caregiving for unpaid, informal caregivers, including older adults (such as grandparents) aged 55 and older raising children aged 18 and younger (such as grandchildren).

*Measurement:* For unpaid caregivers who meet the OAA definition of Title III E Family Caregiver-Caring for Elderly, VCAAA will contract to provide:

Support Services: 120 hours of caregiver assessment; 240 hours of caregiver case management; 360 hours of caregiver support groups; 100 hours of caregiver training; and 150 hours of caregiver counseling (pre-placement) will serve 140 unduplicated clients.

Respite Services: 1,000 hours of respite in-home supervision will serve 82 unduplicated clients; 1,000 hours of out-of-home day care (adult day care) will serve 128 unduplicated clients.

Supplemental Services: 49 occurrences of caregiver adaptations and 39 occurrences of assistive devices will serve 168 unduplicated clients.

*Measurement:* For unpaid caregivers who meet the OAA definition of Title III E Family Caregiver-Caring for Child, VCAAA will contract to provide:

Support Services: 35 hours of caregiver assessment, 70 hours of caregiver case management, 60 hours of caregiver support groups; and 60 hours of caregiver training to serve a minimum of ten unduplicated clients.

Note: Family caregiver Access Services and Information Services are included under Goal #2.

*New Caregiver Center to Open in mid-2016:* A new family caregiver center, **Oasis Family Caregiver Center**, will open in the Santa Clara Valley (Santa Clara-Fillmore-Piru) in mid-2016. This center will target services for the monolingual family caregivers who meet the definition of Title III E family caregiver under the OAA. The center will target Spanish-speaking caregivers countywide to provide support to (1) unpaid family caregivers of older adults and (2) grandparents or other older relatives with primary caregiving responsibilities for a child through five broad categories of services: support; supplemental; respite; access assistance; and information services.

This will be the third family caregiver center in Ventura County to be created using federal Title III E funds. The two existing centers are: Wellness and Family Caregiver Center in Camarillo, CA (operated by the Camarillo Health Care District) and Caregiver Support Center headquartered in Thousand Oaks, CA (operated by Conejo Valley Senior Concerns).

**1.5 MAINTAINING INDEPENDENCE / BEING ABLE TO LIVE AT HOME / AGING-IN-PLACE**  
***Ranking on the Consumer Needs Survey: #6, #7 and #8***

VCAAA will provide access to programs and services that foster independence, help to enable a person to remain living in his or her home, and to age-in-place.

*Measurement:* For persons aged 60 and older, VCAAA will contract to provide 1,587 hours of community-based social-model case management for 180 people. For persons aged 65 and older and who meet the criteria for VCAAA's Multipurpose Senior Services program (MSSP, staff will make a minimum of 640 in-home visits to clients and will conduct 180 annual comprehensive health and psychosocial reassessments of clients.

VCAAA will provide case management services (the Housing Plus program) for older individuals living in public housing in the city of Ventura.

VCAAA's will contract to provide through its ElderHelp Program, 709 hours of in-home personal care, 500 hours of homemaker services and 150 hours of in-home chore services VCAAA will contract to provide 76 units of residential repairs/modifications and 20 units (products) of personal/home safety.

VCAAA will contract to provide the Title V Senior Community Services Employment Program (SCSEP). A minimum of nine unduplicated older adults will be served. VCAAA will provide 24 educational classes/activities/relative to financial management to aid older adults who are in or are trying to avoid financial distress and/or who may be at risk of losing their home.

**1.6 SOCIALIZATION / PREVENTION OF LONELINESS AND ISOLATION**  
***Ranking on the Consumer Needs Survey: #9***

VCAAA will contract to provide the Senior Help Line designed to promote the security of and verify the well-being of at-risk seniors; to reduce isolation, victimization and health concerns of those living alone, isolated and/or depressed; to provide a human connection for elders with few or no connections to family and/or friends; a check-in on seniors at-risk of losing their independence, and older adults recently discharged from a hospital setting or in an adult day health setting.

*Measurement:* VCAAA will contract to provide 616 hours of peer counseling and 2,236 contacts of telephone reassurance.

**1.7 PREVENTION OF ABUSE / PROTECTION OF RIGHTS OF OLDER ADULTS**  
***Ranking on Consumer Needs Survey: #11***

VCAAA will provide programs and services that protect the rights and property of older adults, and will protect them from abuse.

*Measurement:* VCAAA will contract to provide 1,400 hours of legal assistance regarding public benefits, landlord-tenant disputes, housing rights, elder abuse,

powers of attorney, consumer finance and creditor harassment, and consumer fraud and warranties; 800 unduplicated seniors will be served; Eight community education activities will be presented on rights and benefits; 208 unduplicated clients will be served. VCAAA will contract for the Financial Abuse Specialist Team (FAST) to provide eight training sessions for professionals.

VCAAA staff will assist with the distribution of educational materials regarding the prevention, detection, assessment, treatment and intervention and investigation of elder abuse, neglect and exploitation, including financial exploitation. This will include publishing and distributing 300 *Legal information or Elders* ("LIFE") and working with the legal services provider to present LIFE classes (which are presented based upon requests from local community groups).

## **1.8 PROTECTING OLDER ADULTS IN LONG-TERM CARE FACILITIES**

VCAAA will contract to ensure the rights and to ensure the well-being of individuals residing in long-term care facilities (skilled nursing facilities and board and care facilities in Ventura County).

FY 2016-2017 Objective for Long term Care Ombudsman contractor: To enable nursing home residents to remain as independent and self-sufficient as possible, free from chemical and physical restraints and to enable them to have the highest quality of life and care possible, the long-term care ombudsman will continue to educate and promote awareness to the community at large and nursing home residents and families, specifically about the dangers of off-label use of antipsychotic drugs for persons with dementia.

*Measurement:* 83% will be the complaint resolution rate; 314 resident council meetings will be attended; 23 family council meetings will be attended; 1,500 consultations to facilities will occur; 4,059 information and consultations to individuals will occur; 68 community education sessions will occur; at a minimum, 100% of the skilled nursing facilities will be visited quarterly; a minimum of 98% of all board and care facilities will be visited quarterly; Ombudsman will maintain the equivalent of at least four (4) full-time staff; and the Ombudsman will maintain an average of 62 certified long-term care Ombudsman volunteers.

## **1.8 HOUSING**

### **Ranking on the Professionals Survey: #1 (Not ranked on the Consumer Needs Survey)**

To aid in meeting the housing needs of older adults, VCAAA will offer the *HomeShare* Program, which match home providers with home seekers who may be willing to help with household tasks, transportation, companionship, financial support or a combination of these in exchange for affordable housing.

*Measurement:* VCAAA will make 300 referrals per year and will make 62 to 84 matches of home providers to home seekers.

**GOAL 2 – TO BROADEN AWARENESS OF PROGRAMS AND SERVICES THAT SUPPORT VENTURA COUNTY’S OLDER ADULTS, ADULTS WITH DISABILITIES, AND THEIR UNPAID CAREGIVERS.**

**2.1 INFORMATION AND RESOURCES**

***Ranking on the Professionals Survey: #5***

VCAAA will provide easy, uniform and streamlined access to a broad array of services, supports and advocacy for older adults, adults with disabilities and their family caregivers. VCAAA’s Aging & Disability Resource Center will give adults with disabilities the option to receive services and assistance from VCAAA, or from the Independent Learning Resource Center (ILRC) office in Ventura (located nearby).

*Measurement:* VCAAA will provide 3,264 contacts of information and assistance serving 2,000 unduplicated clients, and 2,296 contacts of outreach serving an estimated 2000 unduplicated clients. Services and literature will be available in English and Spanish.

*Measurement:* For unpaid caregivers who meet the OAA definition of Title III E Family Caregiver-Caring for Elderly, VCAAA will contract to provide:

Access Assistance: 1,400 contacts of information and assistance and 400 contacts of caregiver outreach will serve 1,500 unduplicated clients.

Information Services: 40 public information activities will serve 120,000 unduplicated clients; and 40 community education activities will serve 1,200 unduplicated clients.

*Measurement:* For unpaid caregivers who meet the OAA definition of Title III E Family Caregiver-Caring for Child, VCAAA will contract to provide:

Access Assistance: 30 contacts of caregiving information and assistance; and 120 contacts of caregiver outreach will serve 168 unduplicated clients.

Information Services: 13 events will serve 3,060 unduplicated clients.

Note: Family caregiver Respite Services, Supplemental Services and Support Services are included under Goal #1.4

**2.2 HEALTH INSURANCE COUNSELING AND ADVOCACY PROGRAM (HICAP)**

***Ranking on the Consumer Needs Survey: #5***

VCAAA’s HICAP registered staff and volunteers by the California Department of Aging, (CDA) will provide free, unbiased and accurate information and health insurance counseling to Medicare, Medicare Disabled, pre-Medicare beneficiaries and people with disabilities. Registered staff and volunteers will provide free and unbiased counseling and comparisons of all Medicare products and other health insurance products. The HICAP department may enroll clients into Medicare Part D plans, handle

all Medicare Part D problems and extra-help applications. HICAP counselors are able to problem- solve health insurance problems and help with appeals.

The **Benefit Enrollment Center (BEC)** now is the One-Stop Shop for all Medicare Beneficiaries and people with disabilities from ages 18 and older to screen for eligibility and complete applications for many Public benefit programs throughout Ventura County. Within the BEC, **HICAP Senior Medicare Patrol** counselors will help provide Medicare Fraud counseling and help resolve the case. HICAP will provide community education and outreach on Medicare Parts A, B, C D (Part D Prescription Drug Plans), Medigap insurance, Employer Group and Retiree, long-term care insurance, LTC Medi-Cal eligibility, all types of fraud, and now Public Benefits counseling and applications workshops.

*Measurement:* During the Medicare annual election period a minimum of two (2) enrollment events will be held in the cities; and a minimum of ten enrollment events will be held at the VCAAA office.

HICAP will educate isolated and homebound seniors about investment fraud, identity theft, and will provide this education by participating in 24 outreach events.

Three volunteers will be trained to be specialists on Medicare Fraud and other types of fraud. HICAP will utilize E-Learning to provide training to new and existing volunteers.

A minimum of three clients will receive three hours of HICAP legal representation. HICAP staff will receive a minimum of five hours of program consultation from the contracted legal services provider.

To better serve the Medicare population, HICAP will develop new partnerships and strengthen existing ones by working/partnering with numerous organizations, including but not limited to the Ventura County Medical Center social service department to consult on inpatient Medicare problems; local community colleges on developing an internship program; County of Ventura Behavioral Health; County of Ventura Public Guardian's Office; Tri-Counties Regional Center; and other community partners.

VCAAA's HICAP will use state and federal **Minimum Attainment Threshold ("MAT") performance measures** as specified in the California Department of Aging. VCAAA is awaiting receipt of the measures for FY 2016-2017.

**GOAL 3 – ADDRESS THE CURRENT AND FUTURE NEEDS OF THE AGENCY AND OF VENTURA COUNTY’S OLDER ADULTS, ADULTS WITH DISABILITIES, AND THEIR UNPAID CAREGIVERS.**

**3.1 STRATEGIES FOR COLLABORATIONS & CAPACITY BUILDING**

VCAAA will facilitate collaborations, partnerships and cooperation among the aging services network to support current services and projected service needs through the year 2030; and will develop new and innovative business strategies accordingly.

*Measurement:* VCAAA will coordinate/facilitate the Senior Network, which consists of community-based service providers (nonprofit, for-profit and government agencies) who represent the interests of older adults and persons with disabilities in Ventura County. VCAAA will work with Senior Network members to identify gaps in service, promote community awareness of the needs of seniors and persons with disabilities, encourage coordination and integration of services, create opportunities for collaborations and problem sharing, and provide leading-edge information and education. VCAAA will convene quarterly meetings of the Senior Network.

VCAAA will create a Business Leadership Committee to develop alternative funding resources for the agency. VCAAA will have a visible presence on the Work Force Development Board to advocate for employment, training and job placement needs of older adults. VCAAA will collaborate with public agencies and other stakeholders on a strategy for disaster planning and health emergencies.

**3.2 STRATEGIES FOR EMERGING NEEDS**

VCAAA will seek to identify and address emerging needs and issues of older adults, adults with disabilities, and especially those pertinent to special populations.

*Measurement:* VCAAA will work with older adults who identify as being LGBT&Q to increase awareness of the unique needs of LGBT&Q seniors, including but not limited to residents in long-term care facilities.

To increase awareness of the VCAAA among non-English speaking individuals and communities, VCAAA staff will identify and monitor the growth of the non-English speaking communities; and develop resource materials to serve those individuals. VCAAA will work its service providers to ensure that non-English speaking individuals are aware of VCAAA services. VCAAA will work with community based organizations to revise and update an inventory of service providers who speak and/or provide services in languages other than English, and the AAA will disseminate this information to service providers.

VCAAA will develop tools to aid its future clients (persons turning aged 55 to 59) to make informed decisions about retirement.



### 3.3 STRATEGIES FOR LIVABLE COMMUNITIES

VCAAA will advocate for and develop strategies to address housing and transportation issues that impact older adults and persons with disabilities and will examine other factors that contribute creating livable communities.

*Measurement/Activities:* VCAAA staff will work with its Livable Communities Committee to encourage communication among transportation service providers. Encourage the establishment of a neutral entity to receive complaints about operators. Support the development of and amend land-use strategies that will provide convenient access to public transportation. Help to educate seniors and persons with disabilities about how to use public and private transportation. Provide safety information about driving, seatbelts, pedestrians and bicyclists. Publish information about transportation related activities on the VCAAA website. Research and recommend practical and affordable solutions for seniors and adults with disabilities who cannot afford public transit. Encourage development of technology to improve scheduling and coordination of public transportation. Encourage the establishment of a transportation call center to include a link for volunteer drivers. Explore the use of alternate transportation modes such as driverless cars, Uber advance at senior centers.

VCAAA and its Livable Communities Committee is in process of developing strategies to allow for more affordable housing for seniors, next-generation use facilities, and the connecting housing and transportation in developing long-range planning around housing for seniors.

VCAAA staff will attend the Citizens Transportation Advisory Committee and the Ventura County Transportation Commission's Americans with Disabilities Task Force.

### 3.4 OPTIMAL AGING STRATEGIES

VCAAA and its Optimal Aging Committee will encourage and inspire older adults to enhance the quality of their lives, to maintain their identity and independence, to foster self-direction and to encourage them to be engaged and productive in a variety of activities regardless of disabilities or adverse medical conditions

*Measurement/Activities:* Create an Optimal Aging link on the VCAAA website that will provide information and resources on successful aging. Create a deck of 52 spiral-bound cards that contain information and inspirational tips on how to age successfully. Create and distribute a flyer that defines optimal aging and provides information on how to age successfully. Hold an annual story contest about "what successful aging means to me," which involves intergenerational activities. Pursue funding for optimal aging projects.



### 3.5 LEGISLATION STRATEGIES

VCAAA will have a leadership role in sharing information about legislation and advocating for legislation that impacts older adults and adults with disabilities.

*Measurement/Activities:* VCAAA's Legislative Committee will work with VCAAA staff to monitor and inform the full Advisory Council about pending legislation of interest; creating a communication piece for legislators and seniors in the community; fostering relationships of elected officials; using social media to promote support for legislation on the approved County legislative platform; adding a link to the VCAAA is a website that would provide links to legislators; assisting members of the California Senior Legislature developing potential proposals for legislation.

### 3.6 OUTREACH STRATEGIES

VCAAA and its Outreach Committee will develop strategies to promote the agency, and inform the public about programs and services.

*Measurement/Activities:* VCAAA will have a visible presence on social media sites, including Facebook, Instagram, Twitter and other social media venues. Working with its Outreach Committee, VCAAA will develop a speakers' bureau; create a video about all services offered by the VCAAA; create a calendar for communication piece; and coordinate committee activities, as needed, with other subcommittees of the Advisory Council.

### 3.7 HEALTH STRATEGIES

VCAAA and its Health Issues committee will develop strategies to promote health and wellness of older adults, adults with disabilities, and their caregivers.

*Measurement/Activities:* Provide evidence-based fitness classes for older adults throughout Ventura County. Sponsor and/or collaborate with other organizations to present an educational event for health-related providers that will educate them about community resources. Encourage the presentation of and/or coordinate sponsorship of classes for nursing professionals on the topic of Caregiver/Second Patient Syndrome. Distribute tips for taking care of yourself to be provided to home patients and caregivers. Encourage medical and/or social/case management programming to low income residents in senior housing communities to facilitate optimal aging in place. Identify best practices that address emerging health and wellness needs. Work with Food Share to develop potential collaborations and opportunities for participation in outreach events, including with their food truck. Continue to work with VCAAA staff and other Advisory Council committees to develop additional healthy living placemats for the Senior

Nutrition Program to be distributed at congregate meal sites, with home delivered meals and to Senior Share. Collaborate with the Ventura County Evidence-based Coalition and Fall Prevention Coalition to promote healthy living.

VCAAA will collaborate with the Alzheimer's Association and the Alzheimer's Foundation to promote awareness of this disease, dementia and memory screening.

VCAAA staff will participate on the Ventura County Evidence-Based Health Promotion Coalition; will attend Behavioral Health Advisory Board Adult Services Committee meetings; will collaborate with the Ventura County Behavioral Health Older Adult Mobile Team; and will collaborate with the Gold Coast Health Plan.

**GOALS AND OBJECTIVES OF ADVISORY COUNCIL SUBCOMMITTEES**  
(Listed alphabetically)

**HEALTH ISSUES COMMITTEE**

	<b>HEALTH ISSUES COMMITTEE GOALS 2016 to 2020</b> (listed alphabetically)
1	<b>Education for the Consumer:</b> Educate older adults to be wise health care consumers and to advocate for themselves by encouraging collaborations among the medical community, community based service programs, faith-based organizations, insurance providers and government entities.
2	<b>Education for Providers:</b> Educate representatives of the healthcare sector, including but not limited to hospitals, physicians, discharge planners, home health agencies and health insurance providers about community and family caregiver resources and services.
3	<b>Emerging Needs:</b> Identify and address, where feasible, emerging needs relative to healthcare and physical well-being of older adults in Ventura County.
4	<b>Fitness:</b> Encourage and/or facilitate fitness activities for older adults in Ventura County utilizing evidence-based activities.
5	<b>Family Caregivers:</b> Support the family caregiver to mitigate Caregiver/Second Patient Syndrome.
6	<b>Food Insecurity:</b> Help to identify and address food insecurity issues older adults.

<b>HEALTH ISSUES COMMITTEE OBJECTIVES</b>			
	<b>OBJECTIVES</b>	<b>STATUS/ PRIORITY</b>	<b>DATES</b>
1	Education for the Provider: Sponsor and/or collaborate with other organizations to present an educational event for health-related providers that will educate them about community resources.	Priority: A1	7/1/2016 to 6/30/2017
2	Family caregiving. Encourage the presentation of and/or coordinate sponsorship of classes for nursing professionals on the topic of Caregiver/Second Patient Syndrome.	Priority: A2	7/1/2016 to 6/30/2017
3	Family caregiving. Distribute tips for “taking care of yourself” to be provided to home care patients with caregivers. Suggestion: Assess what is currently being distributed by home health agencies and family caregiver centers.	Priority: A3	7/1/2016 to 6/30/2017
4	Emerging Needs. Encourage medical and/or social/case management (such as Housing Plus) programming to low-income residents in senior housing communities to better facilitate aging-in-place.	Priority: B1 Status: Ongoing	7/1/2016 to 6/30/2020

HEALTH ISSUES COMMITTEE OBJECTIVES			
	OBJECTIVES	STATUS/ PRIORITY	DATES
5	Emerging Needs. Identify best practices that address emerging health and wellness needs (such as the Village-to-Village concept).	Priority: B2	7/1/2016 to 6/30/2017
6	Food Insecurity. Work with Food Share to develop potential collaborations and opportunities for participation in outreach events, including with their food truck.	Priority C:	6/30/2016 to 6/30/2020
7	Education for the Consumer: Collaborate with the Ventura County Evidence Based in Coalition and Fall Prevention Coalition to promote healthy living.	Ongoing	7/1/2016 to 6/30/2020
8	Fitness. Provide evidence-based fitness classes for older adults throughout Ventura County.	Ongoing	7/1/2016 to 6/30/2020
9	Fitness. Collaborate with the Ventura County Evidence Based Coalition on the presentation of evidence-based classes.	Ongoing	7/1/2016 to 6/30/2020
10	Food Insecurity. Continue to work with VCAAA staff and other AC committees to develop additional healthy living placemats for the Senior Nutrition Program to be distributed at congregate meal sites, with home delivered meals and Senior Share.	Ongoing	7/1/2016 to 6/30/2020

## LEGISLATIVE COMMITTEE

LEGISLATIVE COMMITTEE OBJECTIVES				
OBJECTIVE	HOW WILL TASK BE ACCOMPLISHED?	WHO WILL DO THE TASK?	DO THIS OBJECTIVE NOW? OR STATUS	PRIOR-ITY
Monitor and inform the full Advisory Council about pending legislation of interest.	A report to the Advisory Council as needed	Monique and the Committee Chair will collaborate on this task	Yes	<b>A</b>
Create a communication piece for Legislators and Seniors in the Community – Legislative Update.	By collaboration, as needed	Monique and Chair will collaborate with Outreach Staff and Committee	Yes	<b>A</b>

<b>LEGISLATIVE COMMITTEE OBJECTIVES</b>				
<b>OBJECTIVE</b>	<b>HOW WILL TASK BE ACCOMPLISHED?</b>	<b>WHO WILL DO THE TASK?</b>	<b>DO THIS OBJECTIVE NOW? OR STATUS</b>	<b>PRIOR-ITY</b>
Continue to foster a relationship with Sue Hughes, CEO's Legislative Analyst.	By collaborating with Sue and continuing to periodically invite her to Committee Meetings	Facilitated by Staff	Yes	<b>A</b>
Foster relationships with elected officials, including inviting them to meetings and providing them with updates and communication pieces.	Invite elected officials or their designees to meetings as well as providing them with updates and communication pieces	Facilitated by Staff	Yes	<b>A</b>
Use social media to promote support for legislation on the approved county legislative platform for federal and state	Facilitated by Staff in collaboration with Outreach Coordinator	Staff, upon direction of the Committee	No	<b>B</b>
Collaborate with other Advisory Council Committees such as Outreach in order to develop strategies and projects of mutual interest.	By collaboration with other Committee Chairs and Agency Staff	Facilitated by Staff	Ongoing	<b>B</b>
Add a link for the Legislative Committee on the VCAAA website that would provide links to legislators, pieces of legislation and ways to advocate.	Agency Staff, in particular The Outreach Coordinator	Facilitated by Staff, upon direction from The Committee	Ongoing	<b>B</b>
Write letters of support or opposition of legislation as needed (approved on the county of Ventura legislative platform)	By collaboration with Committee members and Agency Staff	Committee Members, facilitated by Staff	As Needed	<b>B</b>
Assist members of the California Senior Legislature (CSL) in developing potential CSL proposals for legislation.	By collaboration with Committee members and Agency Staff	Committee Members, facilitated by Staff	As Needed	<b>A</b>

## LIVABLE COMMUNITIES COMMITTEE

This committee was previously known as the Housing and Transportation Committee. It was reorganized in mid-2015 to broaden its scope to address emerging needs (livability index factors in addition to housing and transportation issues); and to re-energize committee membership. Thus, their goals and objectives are in the late stage of being developed. Shown below are the issued to be looked at now and in coming years. These are subject to change.

### 1. Transportation Goals and Objectives (DRAFT)

**OVERALL or PRIMARY GOAL:** To ensure that the transportation needs of older adults and persons with disabilities are met by identifying current needs and projecting future needs; and implementing objectives that advocate, educate, innovate and transform service delivery.

#### Advocate

**GOAL 1:** To advocate for transportation issues that impact older adults and persons with disabilities, and to increase Ventura County's "livability score" relative to transportation. *This will be accomplished by advocacy efforts to:*

1. Encourage communication among transportation service providers to coordinate services to:
  - a. Expand the Dial-A-Ride fleet and coverage
  - b. Increase the number of accessible bus stops throughout the county
  - c. Address and improve connectivity issues of inter-city and intra-city bus travel
  - d. Have faster city-to-city bus service
  - e. Have more frequent turn-arounds and more frequent stops
2. Establish a neutral entity (such as an ombudsman) to receive complaints about operators.
3. Develop/amend land use policies that encourage group living, and modest construction, in locations convenient to public transportation.
4. Develop models (such as Park and Ride) for persons unable to drive long distances.
5. Raise awareness with the DMV of the limitations and restrictions on licenses...
6. Encourage agencies to allow volunteer time for driving seniors.

#### Educate:

**GOAL 2:** To provide education about transportation issues in Ventura County. *This will be accomplished by providing education as follows:*

1. Educate seniors and persons with disabilities about how to use public and private transportation. This may be achieved by providing information about current transportation programs (e.g. a transportation guide).
2. Safety information about driving, seatbelts, pedestrians and bicyclists.
3. Point-to-point personalized transportation information.

4. Ride-Sharing.
5. Publish on the VCAAA website information on transportation-related activities of this committee and of our partner agencies.

### **Innovate and Transform**

**GOAL 3:** To provide innovative solutions to transform the local transportation system to meet current future needs. *This will be accomplished by these encouraging activities:*

1. Plan for future transit needs (as individuals and as a community) through 2030 (at a minimum).
2. Research and recommend practical and affordable solutions for seniors and adults with disabilities who cannot afford public transit.
3. Develop technology to improve scheduling and coordination of public transportation
4. Establish a transportation call center to include a link to/for volunteer drivers.
5. Explore the use of alternate transportation modes such as driverless cars, Uber and vans at senior centers.

## **2. Housing Goals and Objectives – Currently under development**

### **OPTIMAL AGING COMMITTEE**

**OAC Mission Statement:** The Optimal Aging Committee's mission is to encourage and inspire older adults to enhance the quality of their lives, to maintain their identity and independence, to foster self-direction and to encourage them to be engaged and productive in a variety of activities regardless of disabilities or adverse medical conditions. The committee will accomplish this by exploring and recommending methods, programs, services and educational tools.

**OAC Target Population:** **First Priority: Persons aged 45 to 70 (based on survey and agreed upon in prior meetings).** Note: If using Older Americans Act funds for any committee projects, the target audience must be aged 60 and older. **Second Priority: Persons aged 71 and older.**

**Entities identified by OAC to engage/reach target populations:** VCAAA website, councils on aging, fraternal organizations, health care providers/physicians, YMCA and fitness centers, insurance companies (could provide incentives for persons working on their health), utility bill inserts, social media, print media, church groups, employers, employer-sponsored wellness programs, senior centers, family caregiver centers and organizations, service providers in the aging services network, and home delivered meals/meals on wheels.

### **GOALS**

*Reminder: Goals are intangible. Objectives are measurable with start and end date.*

1. To promote and facilitate positive aging, and overcome the stigma of ageism.
2. To facilitate opportunities for older individuals to engage in activities that will:

- Enhance and maintain their sense of identity and self-worth;
- Promote mental acuity, socialization and physical well-being, and
- Nurture financial viability.

3. To educate and inspire Ventura County's older adults, especially those aged 45 to 70 years, on how to successfully plan for their "second adult life-time."

To accomplish its goals, the OAC will (1) provide resources, education and information on successful aging, healthy aging, volunteerism, mentoring, intergenerational activities, financial planning and lifelong learning, and (2) will identify and collaborate with entities that support positive aging, and the goals of the OAC.

OPTIMAL AGING COMMITTEE 2016-2020 OBJECTIVES			
PRI-ORITY *	OBJ. #	OBJECTIVE	REQUIRED ACTION: WHO, HOW, STATUS & REMARKS
A	1	Participate in the planning process for VCAAA's four-year Master Strategic Plan, 2016-2019. Work w/staff to develop recommendations for optimal aging; and agree upon OAC objectives for inclusion in the 4-year plan. Status: Completed Completion date: by 12/31/2015	Make recommendations for inclusion in the master plan for 2016-2020. (Draft of Master Strategic Plan must be completed by 2/1/2016.)  Each year, the OAC will have the opportunity to review and update goals and objectives.
A	2	Provide tips or brain engaging activities and for aging well to be featured on Senior Nutrition Program Placements. Status: Ongoing Completion date: 6/30/2016	Optimal aging teaser tips have been developed for 15 Senior Nutrition Program placemats, which will be rotated. Additional versions of the placemat will be developed as funding becomes available
B	3	Create an Optimal Aging link on the VCAAA website that will provide information and resources on successful aging, and <i>Teaser Tips for Aging Well</i> . Status: Ongoing (after initial creation) Completion date: 6/30/2016	During the previous months, OAC members have submitted resources to C. Voth, and she has compiled a list which will be updated as needed.



OPTIMAL AGING COMMITTEE 2016-2020 OBJECTIVES			
PRI- ORITY *	OBJ. #	OBJECTIVE	REQUIRED ACTION: WHO, HOW, STATUS & REMARKS
C	4	Create a deck of 52 spiral bound cards that can be flipped. Cards would contain inspirational and/or informative tips about optimal aging. The tips would be humorous and clever. The cards would be a good gift item. Status: Continued (from 2015 to 2017). Completion date: by 6/30/2017	Suggestions for project funding: -- Have a sponsor (e.g., financial planning company or health agency like Dignity Health) underwrite costs. -- Collaborate with a nonprofit to write a grant and collaborate with the VCAAA to distribute. Sue added that grantors are looking for novel ideas.
C	5	Create and distribute a flyer that defines optimal aging and provides information on how to age successfully. Target audience: aged 45+. Status: Continued (from 2015 to 2017) Completion date: by 6/30/2017	Gather/develop information. Create, print and distribute flyer. Be mindful of reaching the aged 45+ persons to educate them about planning NOW to age optimally. Flyer may be attractive to financial planners, insurance companies, chambers of commerce, etc.
C	6	Hold an annual story contest about <i>"What Successful Aging Means to Me."</i> Obtain legal releases from authors so stories could be published in local free print media and on the VCAAA website. Status: Future project Completion date: by 6/30/2017	Criteria will need to be developed. Initial focus will be on involving young people in the lives of their elders; thus, partnering with a local school would be a good idea. Kids could submit their stories and photos via Instagram. It would be an opportunity for an intergenerational activity with local schools.
D	7	Recommend that the Advisory Council creates an annual award program to recognize the accomplishments of older adults and/or the magnificent state of aging. Status: Future project Completion date: by June 30, 2020	Action items to be determined. Possible recognition categories: writing, videography, art, persons who serve as role models in aging, etc. Award recipients might include persons of any age depending upon the topic and criteria. This could develop into an annual awards dinner. This would bring countywide attention to achievements related to aging, and to the VCAAA and its Advisory Council.

OPTIMAL AGING COMMITTEE 2016-2020 OBJECTIVES			
PRI-ORITY *	OBJ. #	OBJECTIVE	REQUIRED ACTION: WHO, HOW, STATUS & REMARKS
D	8	<p>Hold a series of seminars that feature topics pertinent to successful aging. Examples: Your Personal Plan for Longevity; Exploring Personal Values; Financial Planning; Managing Change; Self-Care and Balance; Housing and Living Arrangements; Physical Fitness; Mental Fitness, Exploring Resources for Well Being; Volunteerism; Legal Issues; Spiritual Living; Meaning, Purpose and Legacy-Your Personal longevity plan. <i>(Some ideas for topics extracted from the Collaborative on Positive Aging in Sonoma County.)</i></p> <p>Status: Future project Completion date: by 6/30/2020.</p>	<p>1. Determine how many seminars to hold, topics and format. 2. Determine time frame to rollout seminars such as one per month, one per quarter over a few years, etc. 2. Identify possible venues for seminars (senior centers, free community space). 3. Create an ad hoc planning committee for the seminars that would include volunteers from the community who have experience and/or ideas presenting such seminars. (This could include some senior center directors.) 4. Identify and arrange for speakers. 5. Publicize the seminars.</p> <p>This would be an opportunity for collaborating with other organizations (nonprofit, and/or for-profit and/or government).</p>

\*A = Top Priority, to accomplish between now and December 30, 2016.

B = to be accomplished by June 30, 2016.

C = to be accomplished by June 30, 2017.

D = to be accomplished between July 1, 2017 and December 30, 2020.

## OUTREACH COMMITTEE

OUTREACH COMMITTEE OBJECTIVES (Currently under development)	PRIORITY
Finalize a tri-fold brochure for VCAAA, to replace existing brochure.	A
Education – Development of Speakers’ Bureau. This includes recruiting more speakers.	B+
Develop “canned” presentations for the Speakers’ Bureau to provide community presentations (with or without staff).	B+
Create an Agency Video – Cover all services offered. The video will be on the VCAAA website and could be used in presentations.	C
Create a Calendar that could be used as a communication piece (such as each month being devoted to a particular topic or service).	C

## GLOSSARY OF TERMS

<b>AAAs</b>	Area Agencies on Aging. There are 33 AAAs in California (one for each PSA).
<b>ADRC</b>	Aging and Disability Resource Center
<b>BEC</b>	Benefit Enrollment Center
<b>Baby Boomer</b>	Persons born between 1946 and 1964. In 2006, the first wave of Boomers turned age 60 and became eligible for VCAAA services.
<b>CARS</b>	California Aging Reporting System (State's aging services database)
<b>CBSP</b>	Community-Based Service Programs
<b>CTP</b>	Care Transitions Program
<b>CDA</b>	California Department of Aging, a State agency
<b>CSL</b>	California Senior Legislature. See: <a href="http://www.4csl.org">http://www.4csl.org</a>
<b>DOL</b>	U.S. Department of Labor
<b>EB</b>	Evidence-Based
<b>FAST</b>	Financial Abuse Specialist Team
<b>FCSP</b>	Family Caregiver Service Program (OAA Title III E for Family Caregivers)
<b>HICAP</b>	Health Insurance Counseling and Advocacy Program
<b>HPC</b>	Health Promotion Coalition
<b>"I and A"</b>	Information and Assistance
<b>LGBT&amp;Q</b>	Lesbian, Gay, Bisexual, Transgender & Queer
<b>LTC</b>	Long-term care
<b>LTSS</b>	Long-Term Services and Supports
<b>MSSP</b>	Multipurpose Senior Services Program
<b>OAA</b>	Older Americans act, federal funding. See: <a href="http://www.aoa.gov">http://www.aoa.gov</a>
<b>OCA</b>	Older Californians Act, state funding. See: <a href="http://www.aging.ca.gov">http://www.aging.ca.gov</a>
<b>OTO</b>	One-time only funds
<b>PSA</b>	Planning and Service Area (There are 33 PSA's in California.)
<b>"Q"</b>	Q CareAccess (Database used by VCAAA to provide data to CARS)
<b>RURAL</b>	For targeting purposes, Ventura County rural zip codes = 91307, 93040 and 93066
<b>SCSEP</b>	Senior Community Services Employment Program (OAA – Title V)
<b>SNAP</b>	Supplemental Nutrition Assistance Program (Food Stamps/Cal-Fresh Program)
<b>SNAP-Ed</b>	SNAP Nutrition Education and Obesity Prevention
<b>SNP</b>	Senior Nutrition Program
<b>SPARQ</b>	SCSEP Performance and Results Quarterly (DOL data management system)
<b>Title III B</b>	OAA Support Services Programs (3B)
<b>Title III C</b>	OAA Senior Nutrition: Congregate Meals (C1) and Home-Delivered Meals (C2)
<b>Title III D</b>	OAA Health and Wellness Programs (3D)
<b>Title III E</b>	OAA Family Caregiver Service Programs (FCSP)
<b>Title V</b>	OAA Senior Community Services Employment Program ("SCSEP")
<b>Title VII</b>	OAA Elder Abuse Prevention Programs - Ombudsman & Legal Services
<b>VCAAA</b>	Ventura County Area Agency on Aging

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## IN MEMORIUM

This past year, the world lost some extraordinary individuals who served on the VCAAA Advisory Council. We honor their memory and their service.

### **Tony Bellasalma, Moorpark - 21 years of service**

From FY 1993-94 through FY 2013-14.

He held the offices of Chair (FY 2008-09), Vice Chair (FY 2006-07); and served as Immediate Past Year (FY 2009-10)

### **Darlene Benz, Ventura - 20 years of service**

From FY 1994-95 through FY 2013-14.

She held the offices of Chair (FY 2010-11), Vice Chair (FY 2009-10) and Secretary (FY 2008-09); and served as Immediate Past Chair (FY 2012-13 and FY 2013-14)

### **Mel Silberberg, Thousand Oaks – 13 years of service**

From FY 2002-03 until his death in FY 2015-16.

He held the offices of Chair (FY 2009-10), Vice Chair (FY 2008-09); and served as Immediate Past Chair (FY 2010-11 and FY 2011-12)

### **Ina Howard, Oxnard – Cumulative six years of service**

From FY 1997-98 through FY 2000-01 and FY 2003-04 through FY 2004-05.

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## **Ventura County Board of Supervisors**

**Steve Bennett, District 1**

**Linda Parks, District 2**

**Kathy I. Long, District 3**

**Peter C. Foy, District 4**

**John C. Zaragoza, District 5**

**Michael Powers, County Executive Officer**



## **Planning & Service Area 18**

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**Victoria Jump, Director**

