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**APPENDIX E**

Social Services Workgroup:  
Supporting Detail for Findings

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SUPPORTING DETAIL FOR FINDINGS**

Category	Findings	Supporting Detail/ Rationale
<p>1. <i>Support for Caregivers</i></p>	<p>A. Informal family caregivers are the essential underpinning of in-home services for older adults, and older adults are often themselves caregivers for spouses and other family members, including grandchildren.</p>	<ul style="list-style-type: none"> <li>• Using national figures, it is estimated that 80 percent of the approximately 35,000 older adults in Washtenaw County, or 28,000 individuals are dependent upon family caregivers to continue living at home:               <ul style="list-style-type: none"> <li>- This estimate is based on national research by AARP as well as a study published by Johns Hopkins University.</li> <li>- On average, caregivers spend 18-20 hours per week providing care.</li> </ul> </li> <li>• The true economic value of the actual services provided by these voluntary family caregivers is estimated nationally at \$257 billion per year</li> <li>• Moreover, the presence of a family caregiver allows individuals to receive the more economical home-based health and social services:               <ul style="list-style-type: none"> <li>- Using figures for the State of Michigan, the annual cost of health and social services support for an older adult is estimated to be about \$12,000.</li> <li>- In the absence of a family caregivers, dependent older adults would likely be forced to move into a an institutionalized setting, such as a nursing home, at an annual cost of about \$38,000, or three times as much as in-home care.</li> </ul> </li> <li>• In increasing numbers, older adults are stepping forward to parent grandchildren or other relatives when their parents cannot or will not.</li> </ul>
	<p>B. Informal family caregivers can greatly benefit from "respite" care that provides periodic relief from the stressful daily routine of caregiving.</p>	<ul style="list-style-type: none"> <li>• "Respite" refers to short-term temporary assistance provided to persons with chronic conditions in order that caregivers can take an occasional break from the demanding responsibilities of caregiving:               <ul style="list-style-type: none"> <li>- In-home respite typically involves a paid professional or volunteer coming to the home to provide several hours of care.</li> <li>- Overnight respite is typically provided by facilities that lodge the patient in a supervised setting on a scheduled basis.</li> <li>- Adult day services are provided by transporting the client to a day care center where they receive appropriately programmed activities/services for a scheduled number of hours.</li> </ul> </li> <li>• Numerous studies have documented the fact that family caregivers suffer extremely high incidence of depression and other stress-related conditions, and that caregivers consider respite to be very helpful.</li> <li>• Family caregivers that are not afforded the benefits of respite care can be expected to experience higher rates of "burnout":               <ul style="list-style-type: none"> <li>- These caregivers include grandparents raising grandchildren, who may face enormous financial and emotional stress.</li> </ul> </li> <li>• The inability of a family caregiver to continue in that role oftentimes results in seriously negative social and financial consequences (e.g. the individual prematurely requires a costly institutionalized living arrangement).</li> </ul>

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	<p>C. Respite services (including in-home, overnight and adult day) that are available and accessible to Washtenaw County family caregivers fall short of needs.</p>	<ul style="list-style-type: none"> <li>• It has been reported that only about 10-20 percent of informal caregivers actually use formal respite services through public or private agencies.</li> <li>• This lack of utilization can be largely explained by the fact that the cost of respite care is prohibitively expensive for low to average income families:               <ul style="list-style-type: none"> <li>- Medicare and most insurance policies do not normally cover respite costs.</li> <li>- In-home respite provided by home health or non-medical senior care agencies costs about \$27 to \$60 per visit.</li> <li>- Private facilities providing overnight respite (i.e. adult foster care homes, long term care and assisted living facilities) typically charge from \$75 to \$150 per day, and restrictions sometimes apply regarding physical/mental limitations of guest, minimum number of days stay, ability to reserve in advance, etc.</li> </ul> </li> <li>• There is an excellent local program for overnight respite that is subsidized, but its capacity is limited to one bed in the County:               <ul style="list-style-type: none"> <li>- The Area Agency on Aging uses grant funding to offer an innovative overnight program in which caregivers can reserve up to two weeks respite two times per year.</li> <li>- Cost is on a sliding scale, based on income, ranging from \$5 to \$81 per day.</li> <li>- However, only one bed as allocated to Washtenaw County, and the waiting list is long.</li> </ul> </li> <li>• Additionally, adult day services are not always available/accessible to County residents:               <ul style="list-style-type: none"> <li>- Adult day services are generally available only in the Ann Arbor, Ypsilanti and Dexter areas, leaving a large portion of the County underserved.</li> <li>- Most adult day services are not adequately funded to provide transportation, personal care and dementia-specific programming.</li> </ul> </li> </ul>
	<p>D. Beneficial education and support group programs for caretakers reach only a fraction of the many caretakers in the County.</p>	<ul style="list-style-type: none"> <li>• Excellent education and support group programs for caretakers are provided by County-based organizations such as Catholic Social Services, Saint Joseph Mercy Health System, University of Michigan Health System, and Alzheimer's Association.</li> <li>• However, it is estimated that such programs reach only a fraction of the approximately 28,000 caretakers of older adults in the County.</li> <li>• Agencies involved in these education and support programs report that caretakers' attendance is often contingent upon the availability of respite services to care for their family members while they attend sessions.</li> <li>• It should be noted that there are excellent support and education programs in the County that target caretakers facing specific challenges (e.g. Alzheimer's, grandparents raising minor children, and older adults who are raising developmentally disabled adult children.), but they too fall short of reaching all who could benefit from them.</li> </ul>

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<p>2. <i>Case Management</i></p>	<p>A. Older adults often need case management assistance in identifying and obtaining needed services required to maintain their quality of life.</p>	<ul style="list-style-type: none"> <li>• For older adults who are medically, emotionally, cognitively, or financially compromised, the task of finding, arranging and coordinating needed support services is beyond their capability:               <ul style="list-style-type: none"> <li>- It is estimated that 12 percent of the over-60 population in Washtenaw County suffers from one-to-six ADL (i.e. activities of daily living such as bathing, dressing, toileting and meal preparation) limitations.</li> <li>- The needs of this client population are not limited to assistance with ADL'S, but include services such as homemaking, chore, transportation, errands, financial assistance, legal assistance, tax assistance, home repair, etc.</li> </ul> </li> <li>• Many such seniors need an identified individual (i.e. a "case manager") to procure resources for services and to then provide ongoing support/monitoring.</li> <li>• By definition, "Case Management" is a system that focuses on the coordination of accountability for client care across a continuum of care:               <ul style="list-style-type: none"> <li>- It facilitates the achievement of quality outcomes through negotiation, procurement, and coordination of services and resources needed by the client/ family.</li> <li>- Case managers intervene at key points to address and resolve issues that result in negative quality-cost impact.</li> <li>- The many <u>services provided by case managers include</u>:                   <ul style="list-style-type: none"> <li>▪ Screening clients for eligibility</li> <li>▪ Identifying client needs through assessment and evaluation</li> <li>▪ Instituting care plans</li> <li>▪ Arranging and providing services</li> <li>▪ Finding formal and informal supports (both financial and otherwise)</li> <li>▪ Counseling and consulting</li> <li>▪ Measuring and monitoring outcomes</li> <li>▪ Teaching self-advocacy and prevention skills.</li> </ul> </li> </ul> </li> </ul>
	<p>B. Case management services that are available and accessible to older adults in Washtenaw County are insufficient to address the significant needs.</p>	<ul style="list-style-type: none"> <li>• Because case managers handle many clients, in instances hundreds, individual clients receive limited overall case coordination, monitoring, follow-up, and prevention.</li> <li>• Case managers often are unable to refer clients to needed no- or low-cost services (e.g., daily home care, mental health care, home repair, etc.) because providers have insufficient resources.</li> <li>• Meanwhile, agencies have experienced major cuts in funding, which has forced them to cut back on staffing and services, and to tighten eligibility guidelines.</li> </ul>

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<p>3. <i>Services Supporting Independence</i></p>	<p>A. Older adults often need help in managing their affairs and thereby maintaining independence, but such help is frequently fragmented or unavailable.</p>	<ul style="list-style-type: none"> <li>• Social service agencies in the County that serve older adults report that the management of personal and financial affairs is a widespread problem:               <ul style="list-style-type: none"> <li>- There is a general lack of awareness/knowledge/skills to address such issues, on the part of both consumers and professionals.</li> <li>- Lack of pre-planning often results in devastating crises for older adults (eviction, lack of access to health care, institutionalization).</li> <li>- Crises are often precipitated by unexpected incident (death of spouse, illness or fall).</li> </ul> </li> <li>• Government regulations and policies regarding maintenance of basic needs for elderly people are so complex that widely available legal and financial assistance and advocacy services are a necessity.</li> <li>• Successful management of personal and financial affairs requires numerous services working together to resolve issues in a comprehensive way.</li> <li>• Reportedly, coordination among social service agencies in the County works well on an informal basis.</li> <li>• However, a severe shortage of resources for such programs is a major limitation that is getting worse.               <ul style="list-style-type: none"> <li>- Agencies report major cuts in funding for such services as legal assistance.</li> <li>- Meanwhile, ongoing funding is non-existent for many services and any start up funding is often exhausted.</li> </ul> </li> </ul>
	<p>B. Older adults face a confusing array of major health, financial and social issues with legal ramifications, but available legal assistance falls far short of needs.</p>	<ul style="list-style-type: none"> <li>• In particular, Medicare/Medicaid issues often require skills and knowledge not possessed by seniors or their family members:               <ul style="list-style-type: none"> <li>- Legal problems frequently experienced by older adults include Medicare/Medicaid applications for coverage, nursing home evictions, and benefits issues.</li> <li>- Often nursing home staff and FIA staff are not knowledgeable, trained and/or available to advocate for consumers.</li> <li>- As a consequence, seniors without resources who need nursing care face involuntary discharge and increasingly limited access to health care.</li> </ul> </li> <li>• Older adults often face complicated legal issues related to consumer issues and housing (e.g. property taxes; predatory lending; unreasonable landlord-imposed regulations for mobile home tenants; non-payment evictions; evictions for seniors with mental health issues).</li> <li>• Older adults have strong feelings about medical procedures and actions but often have not documented their wishes in the legally-binding form of advance directives.</li> <li>• Again, the County faces a severe shortage of resources for legal support for older adults, and the problem is getting worse.</li> </ul>

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	<p>C. There is a general lack of availability/affordability of basic ongoing housekeeping and chore services that allow frail seniors to adequately and safely maintain their independent households.</p>	<ul style="list-style-type: none"> <li>• Basic housekeeping assistance and chore services (e.g. plumbing, minor electrical, carpentry, etc.) are essential for frail seniors to continue to live independently, because frail seniors often no longer have the physical capacity to perform such necessary activities:               <ul style="list-style-type: none"> <li>- Frail seniors often no longer have the physical capacity to perform such necessary activities, even though they may be reasonably self-sufficient otherwise.</li> <li>- The consequences of not having access to such services include increased risk for safety issues, isolation, institutionalization, and dependence on family.</li> </ul> </li> <li>• Seniors with disabilities, as well as those waiting for discharge from hospitals and nursing homes, often require that their houses be outfitted with ramps that allow them to get in and out of their homes:               <ul style="list-style-type: none"> <li>- Without such needed ramps, these seniors are at risk for falls and injuries.</li> <li>- Alternatively, they might become prisoners in their own homes or a family member's home.</li> </ul> </li> <li>• Agencies serving seniors in the County report significant unmet demand for housekeeping and chore services, particularly such services that can be afforded by low to moderate incomes.               <ul style="list-style-type: none"> <li>- For example, one of the most frequent requests by seniors and family members is for housekeeping services, but virtually no such services are currently available that would be considered affordable by seniors with limited incomes.</li> <li>- Reportedly, only one agency-based chore worker is employed for all of Washtenaw County, and there is a serious backlog.</li> <li>- Even if chore services can be afforded, seniors need help to insure they access only reputable contractors who will not cheat them.</li> </ul> </li> <li>• The limited availability of affordable housekeeping, chore and ramp installation services appears to be largely a result of constrained funding from state, County and private foundations.               <ul style="list-style-type: none"> <li>- For example, funding for housekeeping through the Medicaid waiver is closed.</li> <li>- Certain volunteer services have been discontinued for lack of funding.</li> <li>- Only one agency chore worker is employed for all of the County.</li> </ul> </li> </ul>

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	<p>D. Seniors' access to needed health care through Medicare and Medicaid is seriously compromised by coverage limitations as well as the confusing procedures for eligibility and reimbursement.</p>	<ul style="list-style-type: none"> <li>• Public debate in the U.S. has recently focused on the fact that prescription medications (which are not currently covered by Medicare) are unaffordable for a large portion of senior consumers.</li> <li>• Anticipated cuts in the Medicaid reimbursement/eligibility, driven by the recent state budget shortfall, are expected to further reduce coverage for low-income seniors.</li> <li>• Agencies in the County report that they find health care financing issues to be virtually impossible for consumers and professionals to understand without extensive training in benefits and access issues (e.g. forms are difficult to understand and process; long term care issues are particularly complicated).</li> <li>• Seniors seeking assistance in navigating the eligibility/reimbursement system have few options:               <ul style="list-style-type: none"> <li>- Volunteer-based programs providing such assistance are severely under-funded, even as number of cases increases.</li> <li>- Agencies report that many nursing homes do not advocate for consumers.</li> <li>- No other low cost assistance in navigating the system is available.</li> </ul> </li> <li>• These Medicare/Medicaid issues affect virtually every senior in the County, since only those with vast financial resources are in a position to ignore these problems.</li> </ul>
	<p>E. Seniors and their families need assistance in dealing with financial management and tax issues.</p>	<ul style="list-style-type: none"> <li>• Social service agencies report that seniors often need help in managing personal finances, but resources are not adequate to address this need:               <ul style="list-style-type: none"> <li>- Required assistance ranges from basic budget counseling to ongoing help to maintain financial systems.</li> <li>- Need is often precipitated by the death of a spouse or increasing inability to manage checkbook and pay bills.</li> <li>- No organization currently provides these services, although some volunteers or bank personnel may assist on an informal basis.</li> <li>- As a result, seniors experience financial and budgeting problems, which may result in loss of resources, housing, victimization, etc.</li> </ul> </li> <li>• Similarly, social service agencies report that seniors often are unable to understand and process tax forms, but support programs are limited by lack of financial support:               <ul style="list-style-type: none"> <li>- Complicating issues intensify the need for professional assistance, particularly in the area of state rebate and income tax forms (rebates represent important discretionary income available for low-income seniors).</li> <li>- Reportedly, only three volunteer-based programs currently serve low-income seniors, in varying amounts and with different niches, and they are stretched to the limit.</li> </ul> </li> </ul>

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4. <i>Nutrition</i>	A. Washtenaw County seniors rely upon a number of formal nutrition programs, consisting of both congregate and home-delivered meals.	<ul style="list-style-type: none"> <li>• Adequate nutrition is essential for maintenance of physical and mental well-being and effective response urgent health problems (e.g. recovery from surgery or illness).</li> <li>• There are many reasons that a person does not eat an adequate diet including:               <ul style="list-style-type: none"> <li>- Inability to shop and /or cook</li> <li>- Insufficient economic resources</li> <li>- Loneliness or isolation</li> <li>- Lack of awareness of nutritional requirements</li> <li>- Loss of appetite and taste</li> </ul> </li> <li>• Many older adults in Washtenaw County rely on congregate and home-delivered meals programs to meet their daily nutritional needs.</li> <li>• 16 home delivered meal programs in Washtenaw County serve those who are homebound, those who have no one to assist them and those who are unable to shop or cook for themselves.</li> <li>• These home delivered meal programs provide the food which is required daily to sustain life, outside contact and a daily check on a client's well being.</li> <li>• Congregate meal programs typically provide a nutritious meal at lunchtime, in an atmosphere of respect and dignity that also provides the benefits of socialization, companionship and education related to nutrition and exercise.</li> </ul>
	A. Nutrition programs for seniors are now under-funded, and further funding reductions are expected that will reduce/eliminate many needed programs/ services.	<ul style="list-style-type: none"> <li>• These nutrition programs are generally funded by state and federal funds, along with community grants, fundraising and donation programs.</li> <li>• Nutrition programs report that they are experiencing waiting lists because of insufficient financial resources.</li> <li>• Meanwhile, demographic trends are expected to increase demand further.</li> <li>• In the face of this increasing need, state funding for home delivered meals was recently reduced.</li> <li>• Thus, state, federal and local program cuts are forcing agencies to reevaluate program services; for example it has been reported that:               <ul style="list-style-type: none"> <li>- State cuts have currently been established at 6 percent or over \$150,000 for AAA I-B, and there is an additional 10 percent cut possible.</li> <li>- Federal cuts are currently being debated.</li> <li>- Ypsilanti has cut back to the delivery of one meal per day instead of two.</li> <li>- Motor Meals is evaluating the elimination of a cold meal as a possible way of cutting costs.</li> <li>- Liquid meals supplied to clients at nutritional risk are considered to be cost-prohibitive and may also have to be cut to meet budget constraints.</li> </ul> </li> </ul>

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5. <i>Employment Support</i>	A. Job-finding assistance is needed for those older adults who require income from continued employment.	<ul style="list-style-type: none"> <li>• Social service agencies report that:               <ul style="list-style-type: none"> <li>- A substantial proportion of seniors does not have adequate savings, pensions, Social Security benefit, etc. to cover living expenses.</li> <li>- These seniors must continue working to survive.</li> <li>- These seniors often need help in job training and job-seeking skills.</li> <li>- Employer receptivity to older job applicants could be improved.</li> </ul> </li> <li>• Programs and funding to support employment of seniors are limited, and are not sufficient to meet needs:               <ul style="list-style-type: none"> <li>- For example, the Title V Workforce Investment Act no longer includes 3 percent "set-aside" money for training older adult workers.</li> <li>- There is only one Title V Workforce Investment Act program available to older adults in Washtenaw County, and this program has a waiting list.</li> </ul> </li> </ul>
6. <i>Diversity</i>	A. There is inadequate information on diversity in Washtenaw County.	<ul style="list-style-type: none"> <li>• 2000 census data confirms that minorities represent a growing proportion of the County's population:               <ul style="list-style-type: none"> <li>- The census shows that 21 out of 28 municipalities' minority populations have grown over the past decade.</li> <li>- In fact, 16 of the municipalities experienced more than 50 percent growth in their minority populations.</li> </ul> </li> <li>• The vagueness of the census categories for minorities, together with self-reporting bias, makes the census data on minorities of questionable utility for detailed planning:               <ul style="list-style-type: none"> <li>- The 2000 census only provides information on White, Black/African-American, American/Alaskan native, Asian, Hawaiian or Pacific Islanders, other races, and two more races.</li> <li>- From the census, we do know that Ann Arbor, Pittsfield Township, Scio Township, Superior Township and Ypsilanti Township have shown the most growth within the minority groups of Asian, Hawaiian or Pacific Island, and Black or African-American.</li> <li>- However, this information does not provide needed insight into the specific cultural attributes of people who are in the various broad categories.</li> </ul> </li> </ul>
	B. Lack of diversity sensitivity adversely affects how well agencies assist minority older adults.	<ul style="list-style-type: none"> <li>• The apparent lack of readily available information on various cultural and ethnic groups in Washtenaw County is emblematic of an historical inattentiveness to this issue.</li> <li>• Representatives of social service agencies reported that they lack sufficient knowledge and information to appropriately address diversity issues.</li> </ul>

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<p>7. <i>Protection from Abuse</i></p>	<p>A. National research indicates that older adults are sometimes subject to various types of elder abuse.</p>	<ul style="list-style-type: none"> <li>• Domestic elder abuse generally refers to any of several forms of maltreatment of an older person by someone who has a special relationship with the elder (e.g. a spouse, a sibling, a child, a friend, or a caregiver in the older person's home or in the home of a caregiver).</li> <li>• There are several different categories of elder abuse:             <ul style="list-style-type: none"> <li>- They are: physical, sexual, emotional or psychological, neglect, abandonment, financial or material exploitation and self-neglect.</li> <li>- Generally a combination of psychological, social, and economic factors, along with the mental and physical conditions of the victim and the perpetrator, contribute to the occurrence of elder maltreatment.</li> <li>- While recognizing that elder abuse, like other types of domestic violence, is extremely complex, researchers have tended to categorize elder abuse into three basic groupings:                 <ul style="list-style-type: none"> <li>▪ Domestic elder abuse.</li> <li>▪ Institutional elder abuse.</li> <li>▪ Self-neglect or self-abuse.</li> </ul> </li> </ul> </li> <li>• Elder abuse is even more difficult to detect than child abuse, since the social isolation of some elderly persons may increase both the risk of maltreatment itself and the difficulty of identifying that maltreatment</li> <li>• Risk factors include:             <ul style="list-style-type: none"> <li>- An already established pattern of domestic violence "grown old".</li> <li>- Caregiver stress.</li> <li>- Certain predisposing personal characteristics of the elder.</li> </ul> </li> <li>• Elder abuse is even more difficult to detect than child abuse, since the social isolation of some elderly persons may increase both the risk of maltreatment itself and the difficulty of identifying that maltreatment:             <ul style="list-style-type: none"> <li>- Approximately a quarter of elders live alone, and many others interact primarily with family members and see very few outsiders.</li> </ul> </li> <li>• The results of the National Elder Abuse Incidence Study (NEAIS) confirm the validity of the "iceberg" theory of elder abuse that has been accepted in the aging research community for 20 years or more:             <ul style="list-style-type: none"> <li>- According to this theory, official reporting sources (e.g., Adult Protective Services), receive reports about the most visible types of abuse and neglect.</li> <li>- However, a large number of other incidents are unidentified and unreported</li> </ul> </li> </ul>

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	<p>B. National experience suggests that a substantial number of older adults in Washtenaw County are victims of abuse and neglect.</p>	<ul style="list-style-type: none"> <li>• In the absence of detailed data on elder abuse in Washtenaw County, reliance was placed on a national study of this phenomenon:               <ul style="list-style-type: none"> <li>- The U.S. Administration on Aging conducted a "National Elder Abuse Incident Study" that submitted its final report in September 1998.</li> <li>- While several years have since transpired, the findings are still considered valid.</li> <li>- Moreover, there is no reason to suspect that Washtenaw County is somehow insulated from national experience cited in the report.</li> </ul> </li> <li>• Extrapolating national experience to the over-60 population in Washtenaw County, the following estimates were made:               <ul style="list-style-type: none"> <li>- On an annual basis, about 360 persons age 60+ in Washtenaw County experience abuse/ neglect in a domestic setting alone.</li> <li>- If self-neglect is added, the number rises to about 430.</li> <li>- As a frame of reference, in 2000 there were over 35,000 residents in Washtenaw County over the age of 60.</li> </ul> </li> </ul>
<p>8. <i>Senior Centers</i></p>	<p>A. Senior centers in Washtenaw County play a vital role in providing older adults with access to needed programs and services, but funding support is generally insufficient</p>	<ul style="list-style-type: none"> <li>• Many older persons are at risk of social isolation due to factors such as physical decline, loss of mobility, physical distance from family members and loss of individuals in their social circle.</li> <li>• In response to this need, Washtenaw County senior centers strive to promote independence, enhance dignity and advocate for Washtenaw County's older persons and their families through innovative programming.</li> <li>• Although the federal Older Americans Act directs senior centers to serve as a focal point for access to services for older adults, local senior centers actually receive little state or federal support.</li> <li>• Because of funding limitations, Washtenaw County senior centers are very heterogeneous, some vital with full-time programming; others struggling simply to maintain a location and staffing.</li> <li>• A member of the BASP Steering Committee convened a group of Washtenaw County senior center representatives, and conducted a survey, to identify priority issues facing senior centers in the County, including the following:               <ul style="list-style-type: none"> <li>- One third of the centers receive no funding from local governments, despite their service to local residents.</li> <li>- While most senior centers have some form of financial support to address annual operating costs, one center has no source of such funds, and one third of the centers do not have the resources to operate full time.</li> <li>- Only two-thirds of surveyed centers operate on a full-time basis during the business week.</li> <li>- Only one half the centers report being open to operate or facilitate programs in the evening or on weekends.</li> <li>- None of the 15 Washtenaw County Senior Centers has been certified by the National Senior Center Accreditation Program of the National Council on the Aging.</li> </ul> </li> </ul> <p style="text-align: center;"><i>[Continued on the following page]</i></p>

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		<p><i>[Continued from the prior page]</i></p> <ul style="list-style-type: none"> <li>- While all surveyed centers have a large central meeting room, and most have multiple activity rooms, 83 percent of county senior centers have had to limit participation in their programs within the last year due to facility space limitations.</li> <li>- 83 percent of the senior centers reported they knew of residents who were unable to participate in center programs within the past 6 months due to lack of transportation.</li> <li>- A survey of senior center directors found that one third do not have adequate time in their work schedules to attend meetings that are necessary for professional development and coordination of their center activities.</li> </ul>