



Gap Analysis of Long Term Care Services

June 2009

**Developed and Submitted By
Sullivan County Long Term Care Council**

**SULLIVAN NYCONNECTS is a joint initiative of three departments
within the Sullivan County Division of Health and Family Services:**

**Office for the Aging
Public Health Services
Department of Family Services**



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Introduction

The Sullivan County Long Term Care Council (LTCC) was formed in February 2007 in response to a State requirement associated with the establishment in each county of a Long Term Care Point of Entry, now called NYCONNECTS. The purpose of the Long Term Care Council is to conduct long term care system planning and development in order to ensure achievement of the goals and objectives of NYCONNECTS. The primary roles defined for the Long Term Care Council are:

- To identify and analyze emerging community needs in the long term care service delivery system based on identified gaps, service accessibility, and availability, and to develop strategies to respond to those needs in a timely and appropriate fashion;
- To solicit input from long term care stakeholders regarding changes in the community environment (e.g., new resources or closing of providers), legislation, or regulations;
- To review the long term care service delivery system by identifying entry points to the system and the manner by which populations in need of long term care services navigate or access services throughout the system;
- To serve in its advisory capacity as a catalyst to advance changes in the long term care system when modifications are required to ensure the availability of appropriate and quality community services.

Membership on the Council includes representatives of the consumer populations served, providers of long term care services, and advocacy groups. There are also many providers/stakeholders/advocates who are not members of the Council yet attend meetings regularly and contribute to the work of the Council through committee work. Members and non-members of the Council helped greatly with many aspects of this report. (See Appendix A for Long Term Care Council membership list and committee list.)

This report represents the Long Term Care Council's assessment of Sullivan County's long term care service delivery system and recommendations for improvements to the system. Data was gathered from a Community Forum held in June 2008 for both consumers and providers, and a consumer survey distributed from July to October 2008. While analyzing the long term care needs of consumers and their family members, the Council identified the strengths and weaknesses of the system, gaps in services, and the barriers that limit services.

The information in this report represents an initial analysis of some of the targeted areas of need; many aspects of the system remain to be discussed.

Executive Summary

This report is the work of the Sullivan County Long Term Care Council, the advisory board for SULLIVAN NYCONNECTS: *Choices for Long Term Care*. Based on data gathered in 2008 from a community forum and a consumer survey, the Long Term Care Council has analyzed the long term care needs of consumers and their family members, and identified the strengths and weaknesses of the system, the gaps in services, and the barriers that limit services. This report includes the initial analysis, goals, and recommendations of the Council.

SULLIVAN NYCONNECTS is a State-mandated program that is relatively new, having become operational in July 2007. The purpose of SULLIVAN NYCONNECTS is to make available, through one point of contact, information about all long term care services. This system, called a single Point of Entry, helps consumers, caregivers, and professionals learn about all appropriate long term care services and make informed choices.

The Long Term Care Community Forum, held on June 11, 2008, was attended by 9 consumers and 43 providers. The facilitator asked “What are the key areas of need for Sullivan County long term care consumers?” and people spoke about their experiences and their concerns. The SWOT Analysis (Strengths, Weaknesses, Opportunities, Threats) was used to identify and categorize areas of need. Participants were invited to join a committee to address a targeted area of need and begin the process of developing strategies to respond to the need.

The 2008 Consumer Survey of Long Term Care Services was distributed from July to October to consumers and their caregivers asking for current and anticipated long term care needs, barriers to obtaining services, health and disability status, financial need, and basic demographics. This survey was available in English and Spanish. A total of 233 surveys were completed (224 in English and 9 in Spanish). The survey results were tallied and the statistics were used by the Long Term Care Council in their analysis of Sullivan County’s long term care service delivery system.

The six targeted areas of need are:

- Transportation
- Housing
- Education and the Coordination/Collaboration of Services
- Workforce
- Caregiving
- Adult Day Care (medical and social models)

Transportation: It was no surprise that transportation issues were mentioned frequently by both consumers and providers. The rural nature of Sullivan County affects consumers who need long term care services and providers who arrange for services in the home and in the community. These issues include: concentration of public transportation services in the

eastern part of the county and along the Route 17 corridor, lack of transportation in the more rural northern and western parts of the county, elimination of the Shuttle service, elimination of the Blue Route, the need for door-to-door demand response service by disabled persons and the elderly, prohibitive cost of medical trips for low income residents who are not eligible for Medicaid, shortage of vendors -- especially during summer months when the population increases dramatically, poor coordination of out-of-county medical transportation, difficulty in accessing public transportation, confusion caused by the many changes in County transportation management. The following recommendations were made:

- Increase van transportation for non-medical trips to supplement existing services. These transports are essential to Activities of Daily Living (ADLs), maintaining quality of life, and the ability to remain in one's own home.
- Implement the recommended service improvements found in the Sullivan County Transportation Development Plan dated May 31, 2005. The needs assessment in this Plan remain unchanged and pertinent.
- Bring back the Blue Route (Monticello-Fallsburg-Woodridge-Wurtsboro) and expand this type of loop service to other areas of the county.

Housing: First and foremost, consumers want to age in place – to stay in their own homes and remain part of the community. They want housing that is affordable, accessible, clean and safe. If a move from their own home is necessitated, consumers want the next best thing: a senior housing apartment or an assisted living apartment. There are many senior housing complexes in the county, but they have long waiting lists and there is no assisted living in Sullivan County, creating a serious gap in long term care services. Another hard reality is that consumers may face homelessness in these difficult economic times. The following recommendations were made:

- Development of assisted living facilities to enable greater numbers of disabled persons and the elderly to age in place.
- Development of more senior housing, especially housing that meets seniors' expressed needs.
- Encourage town governing and planning boards to enact zoning regulations which require builders to construct a percentage of units in their developments for low to moderate income disabled persons and/or the elderly, usually 10% to 20% of units.
- Encourage the Sullivan County Legislature to continue research of the Green House Project and plan for development of a Green House Project facility in Sullivan County.

Education and Coordination/Collaboration of Services: Consumers and providers would benefit from knowing more about available long term care services. Consumers who are not able to coordinate their own care would benefit from free case management. People have difficulty understanding the application process for benefits and may not know how to use the benefits when they are obtained. Providers would make more appropriate referrals if they were better informed about all long term care services available in the county. The following recommendations were made:

- Implement quarterly speed networking forum for providers.
- Develop strategies to reach shut-ins and people in remote areas.
- Institute brown bag monthly informational meetings where professionals may share program updates/changes.
- Create a universal screening tool for long term care services that covers all eligibility criterion, thus streamlining the screening process for consumers.

Workforce: Issues centered around the demand for Personal Care Aides (PCA) and Home Health Aides (HHA) and the workforce shortages in these occupations, despite free training programs leading to certification. Home care workers complain that hourly wages are low and that they must travel between jobs and are not always reimbursed for mileage by agencies. Agencies explain that they must allow for low reimbursement from Medicaid and from private insurance companies plus many operating costs when they establish hourly rates and mileage reimbursement rates. The following recommendations were made:

- Ask governing entities to increase the hourly reimbursement rate so that home care salaries may be raised to a living wage for this region.
- Establish a Home Health Aide training program through Public Health Services.
- Urge Sullivan County Community College and BOCES to include a Home Health Aide component in their CNA and Nursing program curricula.
- Encourage the Center for Workforce Development to increase public awareness of the demand for home care workers.
- Ask Sullivan County Legislature to lobby for increase in Federal aid assistance and/or scholarships for home care training.
- Ask Sullivan County Legislature to give a tax credit to residents who work in the home health care field (similar to the volunteer firefighters/EMT tax credit).

Caregiving: Without pay or reimbursement and having little or no formal training, the informal caregiver provides care and assistance to loved ones who want to remain in their homes and communities. The informal caregiver meets daily challenges and makes great personal sacrifices. For caregivers who also work outside the home, there are schedules to coordinate and coverage issues to handle. Consequently, some caregivers have had to give up their full-time jobs or work part-time in order to be a caregiver. Employers are often not aware of ways to help employees who are also caregivers. Many caregivers feel isolated and are not aware of caregiver services and supports or respite available through the Caregiver Resource Center. The following recommendations were made:

- Encourage support of Federal and State legislation that provides tax credits or other compensation to informal caregivers for their caregiving.
- Join the Statewide Caregiving & Respite Coalition of New York.
- Educate employers about caregiver support groups and caregiver training.

Adult Day Care (medical and social models): Sullivan County has three medical model adult day care programs and there is a need for more. Despite demand, Sullivan County has no social model adult day care programs and this presents a serious gap in long term care services. There are also concerns about the affordability of programs, availability of transportation to and from programs, and the lack of public awareness of the existence of adult day care. The following recommendations were made:

- Encourage development of social day care programs in every township of Sullivan County.
- Encourage development of more medical model day care programs to supplement existing programs.
- Encourage existing day care providers to create greater awareness of their programs.

SULLIVAN NYCONNECTS

The purpose of SULLIVAN NYCONNECTS is to empower individuals to make informed choices and to streamline access to long term care services by utilizing a single Point of Entry. Information and assistance is at one location making it easy for people to learn about long term care services and to make decisions. At SULLIVAN NYCONNECTS, consumers, caregivers, and professionals receive comprehensive and unbiased information about long term care options for:

- Adults with physical disabilities
- Children with physical disabilities
- The elderly

SULLIVAN NYCONNECTS became operational in June 2007, however, the idea of a single Point of Entry for long term care services was not new to Sullivan County. A previous attempt to establish a Long Term Care Point of Entry began in 1996 in response to a Federal proposal for the consolidation of access to long term care. A Long Term Care Continuum committee worked to create a single access system. In 1999 a central intake was established, but there was no funding for this program and it did not continue after the first year of operation.

SULLIVAN NYCONNECTS is a partnership of three agencies: Sullivan County Office for the Aging (lead), Sullivan County Public Health Services, and Sullivan County Department of Family Services. At present, the program is located at the Office for the Aging in the Government Center in Monticello. Information and assistance, screening, and public education are performed by the Point of Entry Coordinator who reports to the Director of the Office for the Aging. There is back-up staff at the Office for the Aging and it is expected that staff from the other two partner agencies will be added as needed, however current funding is not sufficient to provide additional staff. (See Appendix B for Organizational Chart.)

Inquiries to SULLIVAN NYCONNECTS may be made in person, by telephone, by fax, by e-mail, and via an Internet queue.

Long Term Care Community Forum

June 11, 2008

The Long Term Care Council hosted a Long Term Care Community Forum to gather information about the needs of the community and to begin the process of addressing those needs. The Forum was held in Liberty at the Cornell Cooperative Extension on June 11, 2008 from 1:30 to 4:30 p.m. and was facilitated by Barbara A. Hill, Consultant.

The Long Term Care Council agreed that the success of the Forum rested on good representation of both consumers and providers. A special effort was made to encourage consumers to attend. Invitations were sent to 60 providers, 40 consumers, and a dozen members of County government. There were 52 people in attendance – 9 consumers and 43 providers. The Point of Entry Coordinator also had notes from four consumers who were unable to attend, yet wanted their voices to be heard.

The facilitator set the agenda, as follows:

Participants were given time to share issues of concern, stories, experiences, etc.

Facilitator introduced the concept of SWOT analysis. This is a method of identifying strengths and weaknesses and examining opportunities and threats to a business or system. The information gathered may then be used to develop strategies for making improvements to the business or system.

Group brainstorming of Sullivan County's long term care needs.

Participants were given four or five 5x8 index cards and asked to write down the key areas of need for Sullivan County long term care consumers. The cards were then placed on the wall at the front of the room where they could be seen by everyone.

The cards were sorted into relevant issue areas. Headings were created for each targeted area of need.

Group discussion of targeted areas of need.

The original agenda called for small break-out groups to discuss the targeted areas of need, however there were so many cards on the wall (191) that the sorting of the cards and the identification of areas of need took more time than was anticipated. The small break-out groups were replaced by group discussion.

Concerns were identified in the following areas:

Education
Transportation
Coordination/Collaboration of Services
Caregiving
Workforce
Housing
Funding and Legislation
Adult Day Care (medical and social models)
Mental Health Services

At the close of the session, participants were invited to join a committee to address a targeted area of need. It was explained that each committee would continue the SWOT analysis, make suggestions for action steps, and then report to the Long Term Care Council. The committees would be comprised of both consumers and providers..

Three subcommittees were formed to work on six of the targeted areas of need, as follows:

- Transportation, Housing
- Education, Coordination/Collaboration of Services
- Workforce, Caregivers, Day Care

The subcommittees met in October and November and reported their findings to the Long Term Care Council in January 2009.

Consumer Survey: Long Term Care Services 2008

In an effort to fully assess the long term care needs of Sullivan County residents, the Long Term Care Council created a second tool for gathering information from consumers. It was decided to survey consumers and their caregivers regarding their current and anticipated long term care needs. After reviewing a consumer survey prepared and distributed by neighboring Orange County, a subcommittee developed a survey tailored to the needs of the residents of Sullivan County.

The “Consumer Survey: Long Term Care Services 2008” was designed to collect information about current long term care needs, barriers to obtaining services, anticipated needs for assistance including who would provide the assistance and who would pay for it, health and disability status, financial need, and basic demographics. The survey was available in both English (see Appendix C) and Spanish (see Appendix D).

The survey was distributed by 36 providers (public and private), 2 advocacy groups, and 4 consumers. Most surveys were distributed and collected with a personal touch by intake workers, caseworkers, home care workers, homebound meal drivers, visiting nurses, etc. When needed, help in completing the survey was offered. Some surveys were mailed by providers to their consumers with a cover letter of introduction and a stamped addressed envelope for returning the completed survey.

A total of 233 surveys were completed (224 in English and 9 in Spanish).

Questions 1, 9, 10, 11, 12, 13, 14, 15, 16, and 17 are based on a total of 233.

Questions 2, 3, 4, 5, 6, 7, and 8 allowed for multiple answers.

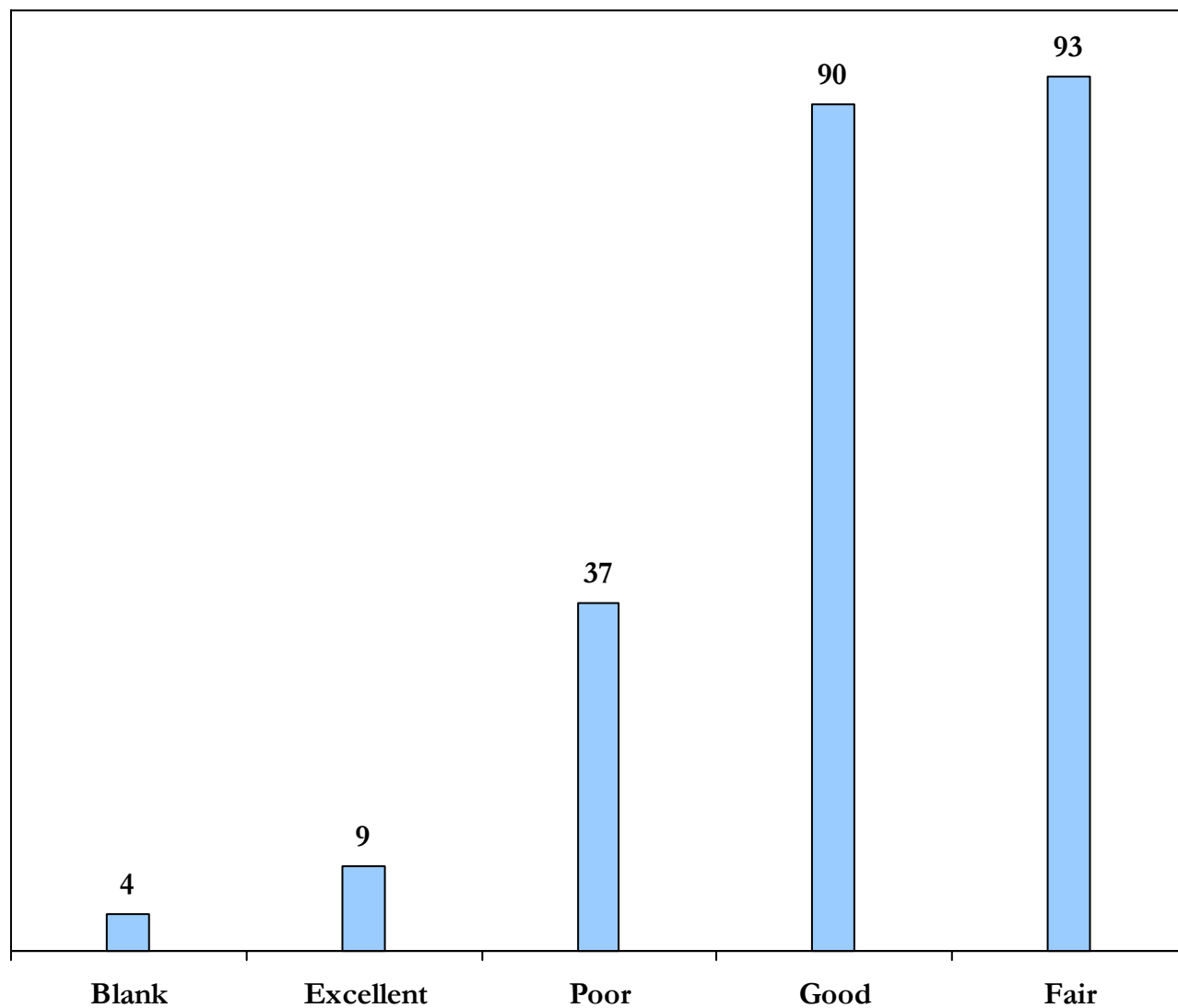
Question 18 allowed for respondents to add their own written comments.

The survey results follow.

Consumer Survey: Long Term Care Services 2008

1. How would you describe your health during the last three months?

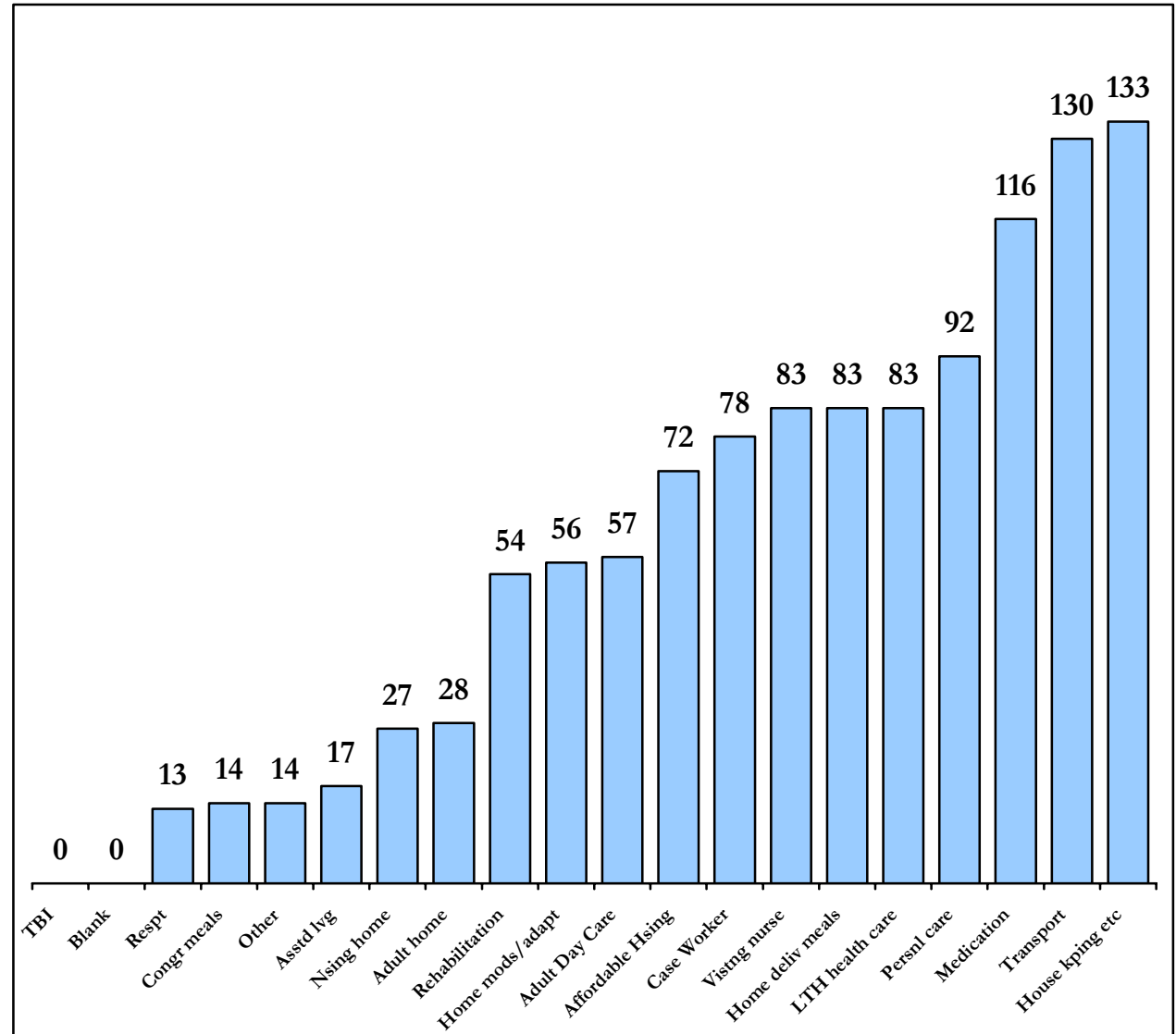
Blank	4
Excellent	9
Poor	37
Good	90
Fair	93



Consumer Survey: Long Term Care Services 2008

2. Which of the following services do you need, or have ever needed, for yourself or for someone else? Check all that apply.

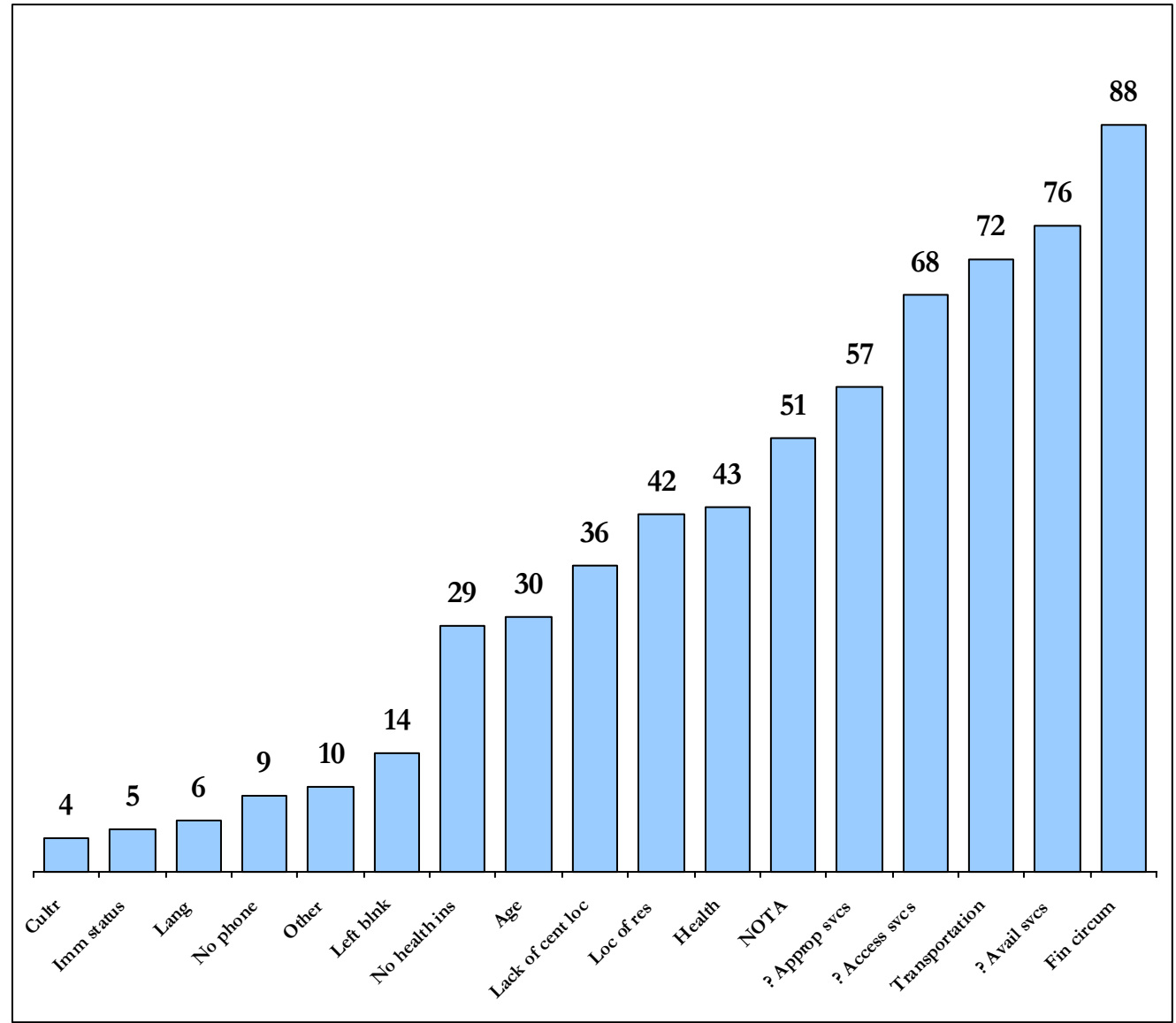
Traumatic Brain Injury	0
Left Blank	0
Respite Care	13
Congregate Meals	14
Other	14
Assisted Living	17
Nursing Home	27
Adult Home	28
Rehabilitation	54
Home Modification/ Adaptive Devices	56
Adult Day Care	57
Affordable Housing	72
Case Worker	78
Visiting Nurse	83
Home Delivered Meals	83
LT Home Health Care	83
Personal Care	92
Medication	116
Transportation	130
Housekeeping etc.	133



Consumer Survey: Long Term Care Services 2008

3. Which might prevent you or someone else from receiving the services checked in Question #2?
Check all that apply.

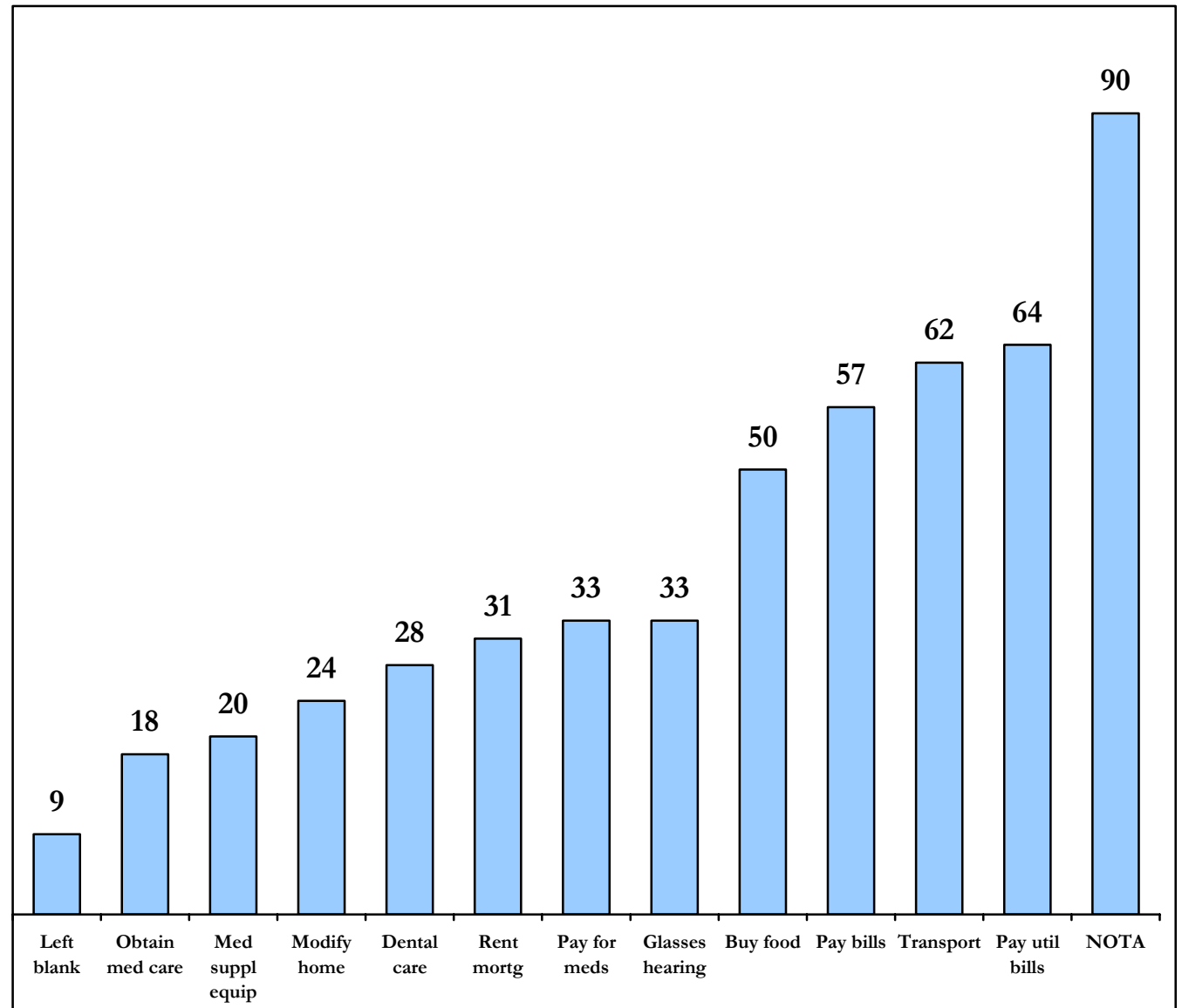
Culture	4
Immigration status	5
Language	6
No phone	9
Other	10
Left blank	14
No health insurance	29
Age	30
Lack of centralized info	36
Location of residence	42
Health	43
None of the above	51
Not knowing what services are appropriate	57
Not knowing how to access services	68
Transportation	72
Not knowing what services are available	76
Financial circumstances	88



Consumer Survey: Long Term Care Services 2008

4. Were there times in the past 12 months when you did not have enough money for any of the following? Check all that apply.

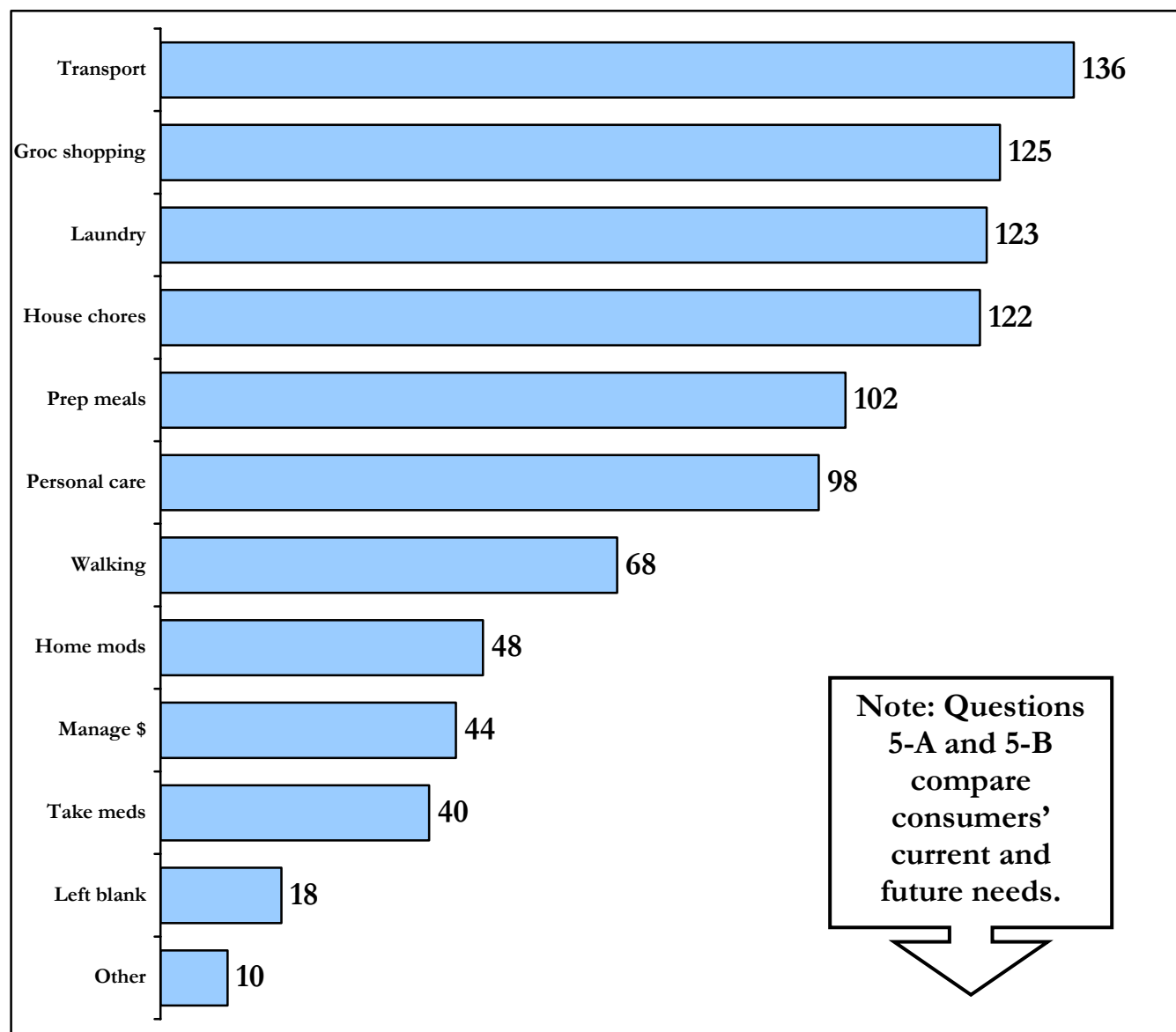
Left blank	9
Obtain needed medical care	18
Pay for medical supplies or equipment	20
Modify home	24
Pay for dental care	28
Pay rent, mortgage, or taxes	31
Pay for medications	33
Obtain eyeglasses or hearing aids	33
Buy food	50
Pay bills	57
Transportation	62
Pay utility bills (heat, electricity, phone)	64
None of the above	90



Consumer Survey: Long Term Care Services 2008

**5A. What type of assistance do you need now to remain in your present residence?
Check all that apply.**

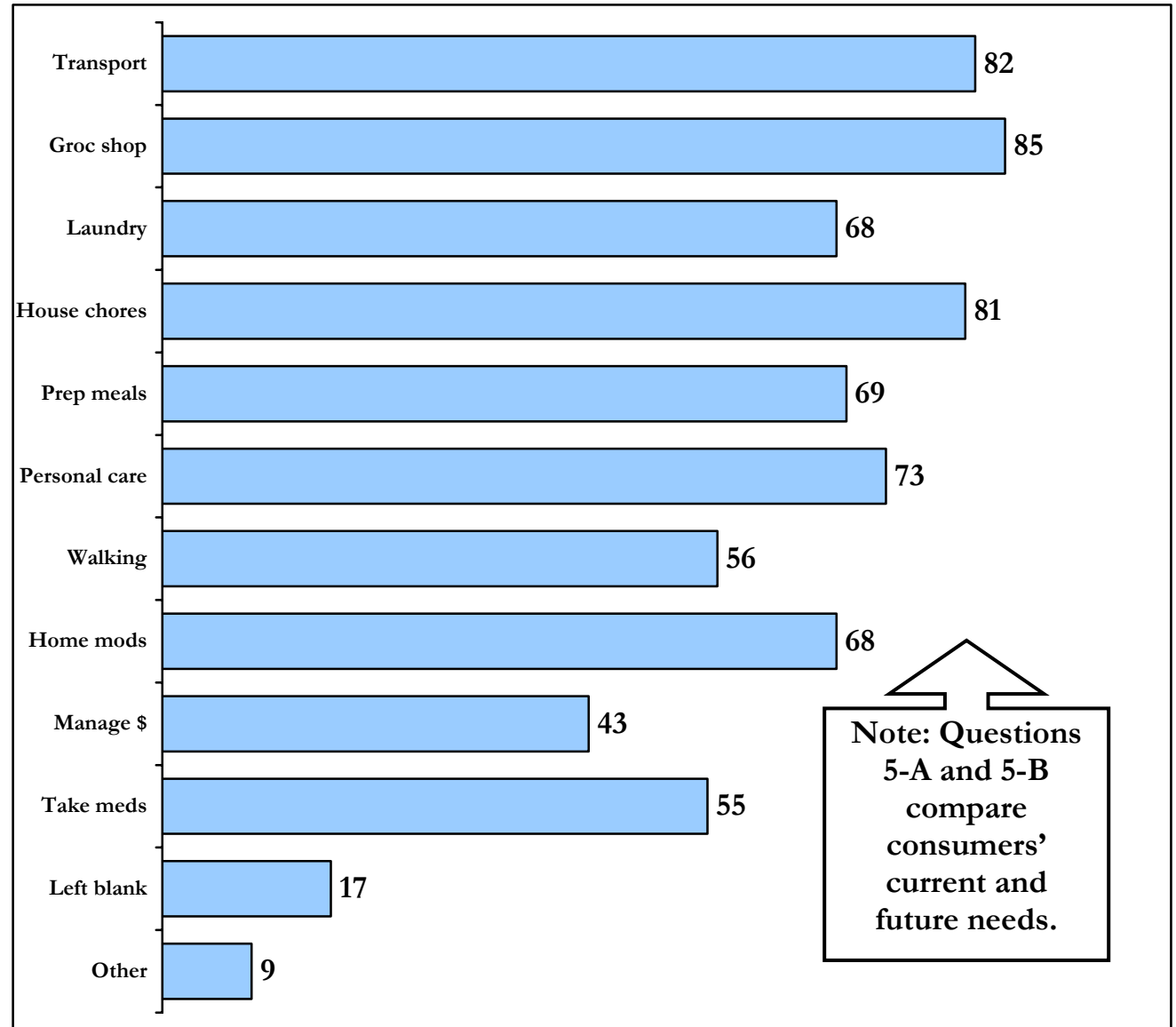
Transportation	136
Shopping for groceries	125
Laundry	123
Routine household chores	122
Preparation of meals	102
Personal care	98
Walking	68
Home modifications for special needs	48
Managing money	44
Taking medications correctly	40
Left blank	18
Other	10



Consumer Survey: Long Term Care Services 2008

5B. What type of assistance do you feel you may need in the future to remain in your present residence? Check all that apply.

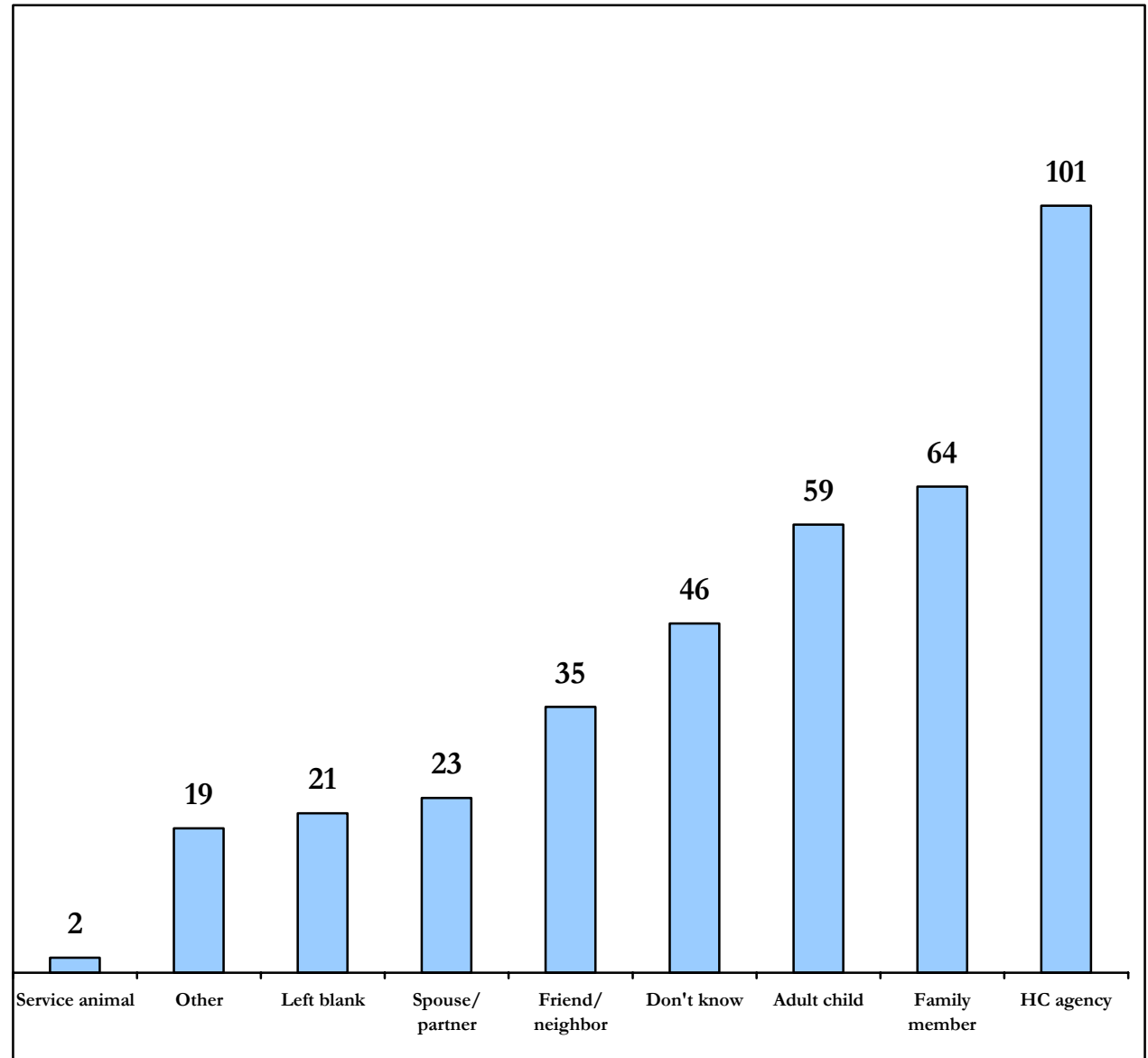
Transportation	82
Shopping for groceries	85
Laundry	68
Routine household chores	81
Preparation of meals	69
Personal care	73
Walking	56
Home modifications for special needs	68
Managing money	43
Taking medications correctly	55
Left blank	17
Other	9



Consumer Survey: Long Term Care Services 2008

6. If you checked any items in Question #5, who would assist you? Check all that apply.

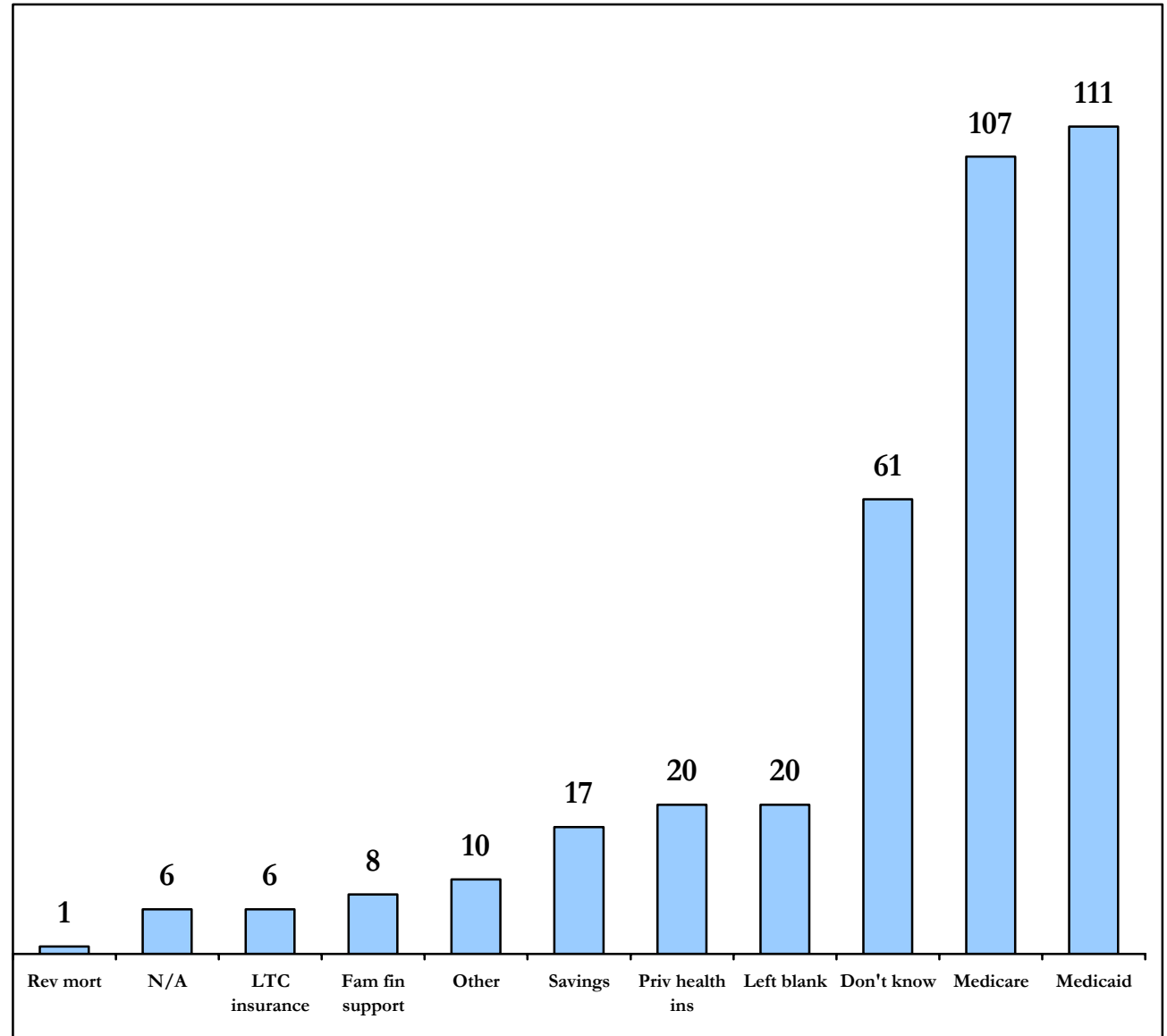
Service animal	2
Other	19
Left blank	21
Spouse/partner	23
Friend/neighbor	35
Don't know	46
Adult child	59
Family member/relative	64
Home care agency	101



Consumer Survey: Long Term Care Services 2008

7. If you checked any items in Question #5, how would you pay for this assistance?
Check all that apply.

Reverse mortgage	1
Not applicable	6
Long term care insurance	6
Family financial support	8
Other	10
Savings	17
Private health insurance	20
Left blank	20
Don't know	61
Medicare	107
Medicaid	111

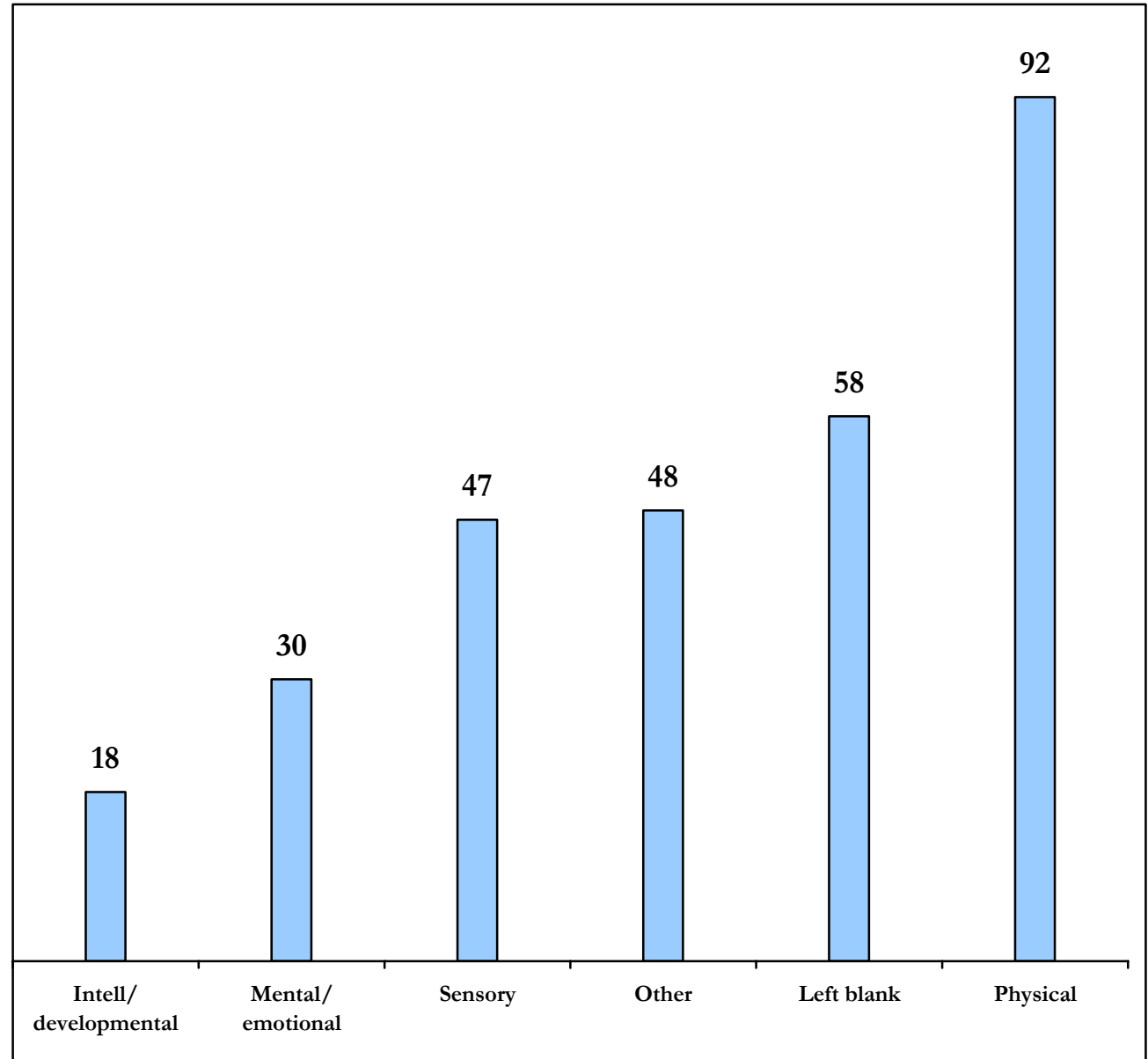


Consumer Survey: Long Term Care Services 2008

8. If you have a need for long term care services, is it based on your having one of the following conditions? Check all that apply.

Intellectual/developmental	18
Mental/emotional	30
Sensory	47
Other*	48
Left blank	58
Physical	92

*Other, in the consumers' own words, includes: heart and arteries, diabetes, back discs, cataract, leukemia, arthritis, hernia, asthma, ADL assist, prostate cancer, osteoarthritis, depression, stress, muscle deterioration, heart failure, high blood pressure, sleep apnea, ambulation issues, forgetfulness, aging, short-term memory loss, severe knee pain, loss of balance, neuropathy, heart disease, Alzheimer's, broken hip, difficulty walking, hip pain.



Consumer Survey: Long Term Care Services 2008

9. What is your age range?

Under 18	2
18-59	54
60-74	68
75-84	58
85+	49
Left blank	2
TOTAL	233

10. What is your gender?

Male	81
Female	149
Left blank	3
TOTAL	233

11. Do you live alone?

Yes	115
No	113
Left blank	5
TOTAL	233

12. Are you a veteran?

Yes	29
No	195
Left blank	9
TOTAL	233

13. How would you describe yourself in regard to your race or ethnicity?

African American/ Black	23
Asian/Pacific Islander	0
American Indian/AK native	1
Hispanic/Latino	25
White/Caucasian	171
Multiracial	2
Other	3
Left blank	8
TOTAL	233

14. How many people live in your household, including yourself?

1	120
2	68
3	13
4 or more	25
Left blank	7
TOTAL	233

15. What is the primary language spoken in your home?

English	208
Russian	0
Spanish	13
Ukrainian	0
Yiddish	0
Other	10
Left blank	2
TOTAL	233

16. Which best describes your annual family income?

Less than \$12,000	92
\$12,000 - \$19,999	56
\$20,000 - \$29,999	12
\$30,000 - \$49,999	20
\$50,000 and over	5
Left blank	44
Unknown	4
TOTAL	233

Consumer Survey: Long Term Care Services 2008

17. What is your zip code?

TOWN	ZIP	#
Barryville	12719	1
Bloomington	12721	3
Callicoon	12723	5
Callicoon Center	12724	1
Cochecton	12726	2
Eldred	12732	1
Ferndale	12734	3
Forestburgh	12777	3
Glen Spey	12737	1
Grahamsville	12740	3
Highland Lake	12743	2
Hurleyville	12747	5
Jeffersonville	12748	2
Kauneonga Lake	12749	2
Kiamesha Lake	12751	2
Lake Huntington	12752	1
Liberty	12754	45
Livingston Manor	12758	14
Loch Sheldrake	12759	3

TOWN	ZIP	#
Mongaup Valley	12762	1
Monticello	12701	56
Mountandale	12763	3
Narrowsburg	12764	14
Neversink	12765	2
North Branch	12766	2
Phillipsport	12769	1
Rock Hill	12775	1
Roscoe	12776	11
Smallwood	12778	1
South Fallsburg	12779	6
Summittville	12781	1
Swan Lake	12783	4
White Sulphur Springs	12787	1
Woodbourne	12788	7
Woodridge	12789	6
Wurstboro	12790	2
Youngsville	12791	4
Left blank		11
TOTAL		233

Consumer Survey: Long Term Care Services 2008

18. If you would like to add your own comments, please write below. Thank you.

Note: Seventy respondents wrote comments. They appear here in the consumers' own words.

My long term boyfriend of 23 years both receive over \$700/month income.

Some of the wording with the first few questions were difficult for me to understand and interpret.

More information sharing between agencies, more knowledge for workers on front lines – what affects medication have, what diseases best manner of approach, constant observatory reviews.

I need at least 3 day home care service. My condition is long term.

If you please, I definitely need more food stamps. Thank you. P.S. I need an aide at least 3 times a week.

Had a stroke November 2005. Walk with a walker. Need help to dress and help with having food cooked and served.

Transportation – APS helps client.

Medicaid doctors are not available.

Transportation is a big problem.

I currently hold a part-time job. My health issues are a major anxiety producing barrier to living a quality lifestyle. Transportation for laundry and grocery cost \$14.50 round trip for a taxi. Forget any kind of quality social life. Survival is main focus. I have housing now, but am single woman of 57 years. I'm caught in a housing situation that is affordable (which I am grateful for) but have to push a couch against my door at night because of gang activity in my affordable housing complex. The noise day and night causes me to suffer from insomnia. I am a woman who has worked all her life caring for other human being, i.e., ER Aide in small rural hospitals, worked for State of New Mexico caring for developmentally and physically disabled at training school and hospital. I also worked at a facility that housed New York's homeless in Chester, NY.

Life on life's terms has been a little hard to swallow. But I keep plugging away because I have received some benefits that have kept me above water. For all I am thankful!

There are times where I become very anxious about my future. If I end up having to give up my job, just the fact that I wouldn't be able to afford taxi to the grocery store is sufficient worry in itself (the only form of transportation for the not quite senior citizens) in Monticello.

Consumer Survey: Long Term Care Services 2008

Add loneliness to this mix and I'm sure you know how desperation can take hold ... In my case the part-time job keeps me connected to the community. I just don't know how long I can hold on.

Thanks for caring.

Someone should ask seniors what they would like as to making the apartments better ventilated: such as an extra window in the bedroom facing a different direction than the other one(s). A washing machine and a dryer on each floor would also be desirable for people who would find it very difficult to ride up and down in an elevator with their laundry, and who like the feeling of independence to do their own wash.

A bathtub is a necessity for many older persons because sitting or stretching out in tepid water can be very therapeutic for certain ailments. All seniors should not be denied that choice of having a bathtub if that is what they are used to. If all apartments could not have a bathtub, then at least some should have one.

Furthermore, with the country here so beautiful in spring, summer and early fall, a patio would also be nice to have in certain apartments. I am sure the rent would be higher, but for some seniors (do not know how many) it would be worth it even if family had to help, or other source of income besides social security.

I have written for you is to say that the remaining years left should be lived in a most cheerful and suitable environment.

Mr. E. suffers from multiple life threatening illnesses. He is not taking his medication correctly as he is becoming more mentally fuddled as his illnesses worsen. He is starting to be unable to manage his money to pay his bills.

Have been approved for a waiver with Medicaid resulting that our minor child is eligible for any and all services.

Thank you for a job well done.

Since his wife died, he's had to keep up with bills, taxes, repairs, and all home care by himself. He's losing service programs because he can't see the recerts when they come and has to use Shortline buses to get around. Today he came to OFA at 9:00 a.m. and had to wait until 4:30 for Shortline bus back to Woodridge.

Difficult to understand, but he claims family provides his needs.

Family all works and needs someone in home during the day time.

Family takes care of many needs.

The needs are uncertain until doctor gives orders upon discharge.

Consumer Survey: Long Term Care Services 2008

No car. No license.
Needs help with medicine.
Needs someone to live in – this is probably in the near future or at least on a daily basis.
The care provided at CRMC Adult Day Care has been most important to us. The caregivers there are warm and caring. The transportation has also been wonderful. It has enabled her to remain in our home. Thank you.
I don't feel good sometimes, but generally I'm all right.
Better communication Medicaid NAMI budget.
For E – we may need nursing home for a few days if she is sick. Same for C but she is younger now. I also believe they are used to your program. Respite would be less trauma on them. They could maybe still go to Day Hab.
I'm doing better than I ever have in the past.
Can stay home because of Co-Pilot Program.
The long term care aide is what makes it possible for me to live at home. If possible, I would like to be able to have her for more hours.
The home health assistance plus Senior Day Care with transportation has enabled her to remain in our home and not go to a nursing home. Thank you very much.
Need someone to shovel snow in winter at apartment complex.
Studying for GED. Is a citizen. Born in Dominican Republic.
I am living up here one year and at this time my only problem is transportation for healthcare. I don't know the area. Otherwise I am independent.
I am alone because my husband has dementia.
The long term care program has been very helpful in the care of my husband with Alzheimer's. The weatherization program helped greatly in making our home warm.

Consumer Survey: Long Term Care Services 2008

Will anyone read this...does anyone really care? Will anything change? The system is broken unless you are on Medicaid – then you get everything and then some. I am speaking for myself (daughter) and my father. It is so unfair that unless you qualify for Medicaid there is no assistance available. I have to work full time and take care of my father full time. When I get his FOB's and see what Medicare is being billed, it makes me sick – it is no wonder there are not additional services covered for those who wish to stay home with family. Disgusted.

Very confusing form.

My daughters do the housekeeping chores and laundry, shopping and etc. after they get home from work.

Limited resources, no Part B Medicare insurance. Insured for hospital bed only, no services.

Some homebound people need companionship during the day when their spouses work. Especially when they cannot afford day programs or cannot drive.

When I was working I did not need no help with anything. But now I do need help with my med and oil or gas. I had to borrow money. Thank you very much.

Thanks for your aid.

Family Service agency of Sullivan County very helpful.

I never thought there would come a time that I would have the need to depend on anything or anyone for help. Meals on Wheels are a great help to me. I am grateful and I know that there are so many people that are hungry and do not have or are afforded this help.

The caseworker has helped me very much in the past to make me aware of services and resources available to me.

My husband has Alzheimer's, bladder cancer, and a heart condition (83 years). Myself, I have severe anemia since 1984 and I receive blood transfusion often and iron through IV. Diabetes. Arthritis. I found in March 2008 that I am on a last stage of a liver disease (cirrhosis not due to alcohol abuse). I was told that I am too old for a liver transplant (soon 77 years).

I was unable to answer some of the questions at this time. Right now those things are not needed.

Patient likes PCA in home.

Ms.V has a serious degenerative bone condition. She's on SSD and Medicare since Sept 1992. She's gone into significant debt due to extensive medical expenses. Her "aide" is a friend. That's the only reason she can afford the care.

Consumer Survey: Long Term Care Services 2008

We need public transportation. It is horrible how they changed the old Sullivan County Transportation. You don't fix something that's not broke !!

Transportation is the biggest potential problem.

Transportation to and from medical appointments and hospital are not available, I don't think. I live in rural area.

Very bad heart and starting kidney failure. Out of heat and hot water since April because never told of 3rd HEAP benefit. 80% of his monthly income goes to pay the mortgage. Tried to sign him up for CACHE Hunger Prevention but he has to walk to pick up and his heart can't take walking or lugging groceries back home.

As long as I qualify for subsidized housing I am able to live on my own.

Public Health nurses were invaluable in checking blood pressure, etc. I felt most comfortable living alone with knowing they would arrive on schedule.

I have trouble paying my bills (oil, electricity, hospital, taxes).

Not someone to rattle off services available, rather someone to become involved to know how to meet your needs and give guidance.

Might not have enough money for ongoing significant in-home care, presuming that care was available in Sullivan. Both are legally blind. Need general in-home and other services care, cleaning, cooking, picking up prescriptions, transportation to medical and stores, someone to fill out paperwork.

Children have lives, families, and jobs, and not all close enough to help, even if none of above. The dearth of affordable public transportation and home care/assistance is forcing people who might otherwise stay at home, into nursing homes. Sullivan needs affordable assisted living, too.

I'm on waiting list for Section 8 since December 2005. I have an approved application for Hemlock Ridge Apartments – one bedroom downstairs apt. set up for disabled person.

To whom it may concern: Thank you for all your concern and cooperation.

Sullivan DSS and Public Health Nursing are refusing to authorize services at home. I have been trying to get home with PCA service since [date illegible]. I have been refused services by Sullivan DSS and they have refused to hear my side and have prejudged my case and have violated my right to return home.

Targeted Areas of Need

Consumers and providers clearly voiced their frustration with barriers to services, i.e., age, location of residence, lack of health insurance coverage, lack of transportation, shortage of health care workers, and difficulty in coordinating services. The words “not enough” were heard repeatedly -- not enough personal care aides, not enough public transportation, not enough affordable housing, not enough respite, etc. Even when a service is available, the reality for many people is that their needs will not be met because they live in a remote area, have no transportation, do not have the financial means to pay privately, and do not meet entitlement eligibility or have insurance that covers the service.

Examples:

- A family chooses to care for grandma in their home but has difficulty finding home care workers.
- An elderly man lives alone, but can no longer climb the stairs. He needs help with housekeeping, cooking, and getting in and out of the shower. He is willing to move, but still wants his independence -- a small apartment with staff that can help him with personal care – yet there is no assisted living in Sullivan County.
- A senior may sign up for door-to-door shopping bus service every week, but a disabled person under the age of sixty may not.

Professionals expressed how frustrating it is to be in a service position and yet be unable to help because of lack of services or because those in need of services live in parts of the county that are traditionally underserved and/or have no means of transportation.

Six targeted areas of need will be looked at in depth in the following pages. They are:

Transportation

Housing

Education and the Coordination/Collaboration of Services

Workforce

Caregiving

Adult Day Care (medical and social models)

Each area will be analyzed for assets and strengths, issues and challenges, and goals. At the end of each section, the Long Term Care Council has included recommendations for actions to be taken.

Target Area: Transportation

Assets and Strengths

- Medicaid recipients receive medical transportation services. The change to privatized management (Medical Answering Services, LLC) made on 04-01-08, has resulted in improvements to dispatching, including 24/7 availability, decreased wait time, and fewer denials of service.
- Coach USA Bus, aka Shortline, provides coach service primarily in the Highway 17 corridor with alternate routes to Sullivan County Community College, Fallsburg, Woodbridge, and other locations.
- There are multiple vendors of taxi service.
- There are multiple vendors of ambulette service.
- Sullivan County Transportation provides vans and drivers to County Departments: Office for the Aging (shopping) and Veterans Service Agency (to Veterans Medical Centers).
- Volunteer drivers (Retired Senior Volunteer Program at the Office for the Aging) provide medical transportation for seniors with Medicare.

Issues and Challenges

- Public transportation serves a limited area; the Shortline Bus reaches only the more densely populated areas of eastern Sullivan County and the fixed routes are not user friendly.
- Many elderly have no funded medical transportation benefit. For the elderly who are Medicaid recipients, medical transportation is covered. For the elderly on Medicare and/or with private insurance, there is no coverage for medical transportation and payment is out-of-pocket.
- There is not enough year round transportation and when the population surges in summer months, there are not enough vendors.
- Rural areas such as Roscoe and the western region are underserved.
- NYC Medicaid recipients have transportation coverage issues because vendors don't like the NYC reimbursement rate and refuse to transport.
- Out-of-county medical transportation is not well coordinated, i.e., a person traveling to medical appointment in Westchester may be required to take two taxis and a bus.

- General cost is expensive and prohibitive for some county residents.
- Accessibility is a big issue.
- There have been many organizational changes at the County level over the past five years – from Sullivan County Transportation to Mobility Management to Department of Public Works – which have negatively impacted continuity of service.

Goals

- Serve the elderly.
- Serve people with non-medical needs, i.e., shopping, recreation, voting, commuting, etc.
- Serve people with disabilities of all ages
- All public buses will have lift access to accommodate those riders who cannot negotiate bus steps.
- Provide medical transportation to people who do not have Medicaid

Recommendations

- Increase van transportation for non-medical trips (shopping, picking up Rx at the pharmacy, applying for emergency HEAP, etc.) to supplement existing services. These transports are essential to Activities of Daily Living (ADLs), maintaining quality of life, and the ability to remain in one's own home.
- Implement the recommended service improvements found in the Sullivan County Transportation Development Plan dated May 31, 2005 prepared for Sullivan County Department of Planning and Community Development by RLS & Associates, Inc. Although this report was based on County transportation services that have since been eliminated (Blue Route, Trolley Route, and Shuttle), the needs assessment remains unchanged and pertinent.
- Bring back the Blue Route (Monticello-Fallsburg-Woodridge-Wurtsboro) and expand this type of loop service to other areas of the county.

Target Area: Housing

Assets and Strengths

- There are five adult homes: Arcadia Residence, Jeffersonville Senior Living, Narrowsburg Home for Adults, Roscoe Manor Adult Home, and The New Swan Lake Adult Home.
- There are over 1,000 units of subsidized senior housing.
- Sullivan County Housing Task Force is addressing homelessness and emergency housing. They have completed a needs assessment and are drafting a two-year plan.

Issues and Challenges

- There are no assisted living facilities in Sullivan County.
- There is a need for more senior housing. There are waiting lists at all complexes.
- Senior housing is often far from shopping and services.
- There is a need for transitional care, i.e., residences that offer personal care and act as a halfway place between living at home and living in a skilled nursing facility.
- Emergency housing is limited. The local Department of Family Services places people with housing crises in hotels.
- Increase in foreclosures means more people face homelessness.
- State budget cuts to funding for the Federation for the Homeless and Catholic Charities have reduced their housing services.
- The elderly need financial assistance with home maintenance, repairs, and access accommodations.

Goals

- Ability to age in place -- to stay in one's own home and remain part of community.
- Housing that is affordable, accessible, clean, and safe.

Recommendations

- Development of assisted living facilities to enable greater numbers of disabled persons and the elderly to age in place. Towns should provide incentives to developers of assisted living housing for the elderly, i.e., help them to identify potential sites for this type of housing, expedite site plan approvals, etc.
- Development of more senior housing, especially housing that meets seniors' expressed needs. Seniors want to live near shopping and services. Some seniors have expressed a preference for the garden apartment model where each unit has its own entrance, or for a balcony if the apartment is on an upper floor. Some seniors do not want a bathroom with a shower only; they want the option of a bathtub.
- Encourage town governing and planning boards to enact zoning regulations which require builders to construct a percentage of units in their developments for low to moderate income disabled persons and/or the elderly, usually 10% to 20% of units.
- Encourage the Sullivan County Legislature to continue research of the Green House Project and plan for development of a Green House Project facility in Sullivan County. These smaller family residence facilities are an alternative to large institutionalized skilled nursing facilities.

Target Area: Education and the Coordination/Collaboration of Services

Assets and Strengths

- Providers are enthusiastic and passionate in their dedication to helping people.
- Providers have collective experience and knowledge.
- SULLIVAN NYCONNECTS has a web-based Resource Directory of all long term care services, resources, and supports.
- SULLIVAN NYCONNECTS has a written agreement for collaboration with Hudson Valley Region 2-1-1.

Issues and Challenges

- Funding is needed to market SULLIVAN NYCONNECTS to providers and to the community, especially in remote areas of the county.
- Providers are not well enough informed about all services available in the county. This has a negative impact on the efficiency of the referral process.
- Free case management is needed by disabled citizens, the elderly, and other consumers who are not always able to coordinate their own care.
- People have difficulty understanding the application process for benefits. They are not aware of eligibility criteria and how to use benefits if they are obtained.
- The term “long term care” may have negative connotations.
- There is a lack of services outside of central locations.

Goals

- Establish better communication among providers of long term care services.
- Make services available in remote and traditionally underserved areas.
- Pool resources.
- Establish a Point of Entry for all issues.

- Increase support and rehabilitation services to help people return from or stay out of nursing homes.
- Establish a Sullivan County service providers consortium.
- Make case management available to individuals seeking direction, guidance, and services.
- Create software that screens for all services available to consumers and includes provider contact information.

Recommendations

- Implement quarterly speed networking forum for providers. In a short period of time these sessions give providers the opportunity to explain their own services and learn about other services.
- Develop strategies to reach shut-ins and people in remote areas, i.e., through events, marketing, local newspapers, etc.
- Institute brown bag monthly informational meetings where professionals may share program updates/changes.
- Creation of a universal screening tool for long term care services that covers all eligibility criterion, thus streamlining the screening process for consumers.

Target Area: Workforce

Workforce is the labor pool in employment and is generally used to describe those working for a single company or industry. The term generally excludes the employers or management, and implies those involved in manual labor. It may also mean all those that are available for work.

Assets and Strengths

- Free training programs for Personal Care Aide and Home Health Aide are available through New York State approved licensed home care agencies.
- There is accountability of services through licensed agencies due to laws, policies and guidelines as directed by federal, state and local governing entities. Thorough background checks, health screenings (including required annual TB test), and trainings regarding practices and polices (i.e. HIPAA, infection control, OSHA, Standard Precautions and Corporate Compliance Programs, etc.) are accomplished for the providers' workforce. The aides must have approved Personal Care Aide or Home Health Aide certificates.
- Training is available through the Sullivan County Center for Workforce Development.
- Training is available through the Board of Cooperative Educational Services (BOCES).

Issues and Challenges

- There is a shortage of Personal Care Aides and Home Health Aides.
- Agencies may pay low wages because the reimbursement from Medicaid and private insurance companies is low and the cost of running the agency (administrative and professional supervisory costs and mandatory continual education costs) must be factored in.
- Travel expenses greatly reduce real earnings of home care workers. Not all agencies reimburse for mileage. Agencies that do reimburse for mileage may pay at a lower rate than the IRS Standard Mileage Rate and/or may pay a lower hourly rate.
- Many people are not willing to work in home care field because of extensive travel, the difficulty of getting to destinations in severe weather, great distances between jobs, and difficult travel circumstances because of rural setting.

- People say they are not paid enough to accept the duties of home care workers, that the work is often only part-time, and that there is no opportunity for advancement. In previous years, Medicaid approved more hours for home care. In today's challenged economic times, the approved number of hours is approximately 2-4 hours, 2-5 days per week. In order to have full-time work, an aide may need to take on more than one case. In order to advance, an aide must have the financial support to continue with schooling.

Goals

- Increase community awareness of the critical role and need for home care workers.
- Increase community awareness of careers and training programs in the home care field.
- Increase salaries for Personal Care Aides and Home Health Aides.
- All agencies that employ home care workers should reimburse for mileage at the maximum IRS Standard Mileage Rate.

Recommendations

- Ask governing entities to increase the hourly reimbursement rate so that home care salaries may be raised to a living wage for this region.
- Establish a Home Health Aide training program through Public Health Services.
- CNA and Nursing programs at Sullivan County Community College and BOCES should have Home Health Aide component in the curriculum. This required component would be an internship providing services in the home.
- Center for Workforce Development should increase public awareness of the demand for home care workers.
- Ask Sullivan County Legislature to lobby for increase in Federal Aid assistance and/or scholarships for home care training.
- Ask Sullivan County Legislature to give a tax credit to residents who work in the home care field (similar to the volunteer firefighters/EMT tax credit).

Target Area: Caregiving

Informal caregivers are individuals that care for an aging or ill spouse, parent, sibling, neighbor, or friend without pay or reimbursement and have little or no formal training. Through their caring help, they assist the family member or friend to remain in his/her home. Some informal caregivers live with the person needing care, but many do not.

Respite services provide infrequent and temporary substitute care or supervision of frail or disabled children or adults. Respite care gives caregivers a break from caring for their loved ones, providing caregivers with temporary relief from the stresses or responsibilities of caregiving, enabling them to maintain their loved ones at home for as long as possible.

Assets and Strengths

- Caregiver Resource Center at Cornell Cooperative Extension. This program is made available through Federal Title 3E funding and NYS Caregiver Resource Center funding.
- Public access to Health Information Library at Catskill Regional Medical Center.
- Many Sullivan County residents provide informal caregiving for family members, friends, and neighbors.

Issues and Challenges

- Informal caregivers receive no salary or incentive for their caregiving.
- Informal caregivers often “learn as they go” and must handle many aspects of another person’s physical and medical needs.
- When a Personal Care Aide is only available a limited number of hours per day and there is not enough coverage, family members may have to stay home from work in order to provide informal caregiving and may lose vacation time and/or personal leave, or may take an unpaid day.
- There is not enough respite for caregivers. The daily challenges and personal sacrifices associated with caregiving are cause for physical, emotional, and financial strain that can result in burnout. Caregivers who need a break from their caregiving cannot find appropriate respite services.
- Discharge planners, case managers, and other service providers are not always knowledgeable about available caregiver services.
- There is a lack of public awareness of current programs for caregivers and for respite services for caregivers.

- Employers lack knowledge about caregiver services and supports that might benefit their employees.
- Consumer Directed Personal Assistance Program (CDPAP), currently available through Medicaid to eligible recipients, allows the consumer to recruit, interview, hire, train, and dismiss his/her own personal assistant. This program does not allow family members (spouse, parent, son, daughter, son-in-law, or daughter-in-law) to be hired as personal assistants.

Goals

- Payment or incentives to informal caregivers for their caregiving.
- More respite for family caregivers.
- Training for informal caregivers of sick and disabled family members that includes blood pressure, wound care, administering medications, first aid, emergency care, blood sugar level, and personal care training for helping people get dressed, bathed, and transferred.
- Increased education of the public and employers about available services and training for caregivers.

Recommendations

- Encourage support of Federal and State legislation that provides tax credits or other compensation to informal caregivers for their caregiving.
- Join the Statewide Caregiving & Respite Coalition of New York. This coalition's mission is to provide support services for caregiver and respite programs and to position New York State to receive Federal caregiving and/or respite care dollars recently appropriated through the Lifespan Respite Care Act.
- Educate employers about caregiver support groups and caregiver training. Send information packets to employers, Human Resource departments, and Employment Assistance Programs offering information to be shared with employees who are losing work hours or productivity due to informal caregiving. Existing business networks may also be utilized for distribution of this information.

Target Area: Adult Day Care

Adult Day Care describes programs, services, and facilities intended to assist physically or mentally impaired adults who might otherwise require institutionalization, allowing them to remain in the community. ***There are two general types of adult day care programs -- a medical model and a social model.*** The medical model provides comprehensive medical, therapeutic, and rehabilitation day treatment. The social model offers supervised activities, peer support, companionship, and recreation. Both models assist older adults and those with chronic conditions to remain as independent as possible, for as long as possible.

Assets and Strengths

- Adult Day Health Care at Catskill Regional Medical Center (medical model).
- Adult Day Health Program at Roscoe Regional Rehabilitation and Residential Health Care Facility (medical model).
- Adult Day Health Services at Sullivan County Adult Care Center (medical model).
- Always There Adult Day Care (social model) in Ellenville in Ulster County that serves residents of Sullivan County.

Issues and Challenges

- Need for more transportation options for people attending adult day care.
- Need for social model (non-medical) adult day care.
- When inclement weather causes day care centers to close, family members must have alternate care plans to accommodate the change in schedule.
- Adult Day Care is not affordable to many people unless they receive Medicaid or are able to pay privately. Medicaid pays for medical model, but not for social model. Medicaid also pays for transportation to medical model, but not for transportation to social model.

Goals

- Development of social model adult day care centers to provide regularly scheduled activities and socialization to all eligible adults/seniors.
- Development of more medical model adult day care centers, to supplement existing programs.

- Adult day care programs provide transportation as an optional service to their registrants.
- Increase public awareness of existing adult day care programs.

Recommendations

- Encourage development of social day care programs in every township of Sullivan County.
- Encourage development of more medical model day care to supplement existing programs.
- Encourage existing day care providers to market their programs.

Appendix A

NYCONNECTS: Choices for Long Term Care
Sullivan County Point of Entry for Long Term Care

Long Term Care Council
Membership List as of May 21, 2009

Member	Representing	Affiliation
Heidi Schneider	Consumer Populations Served	
Steven S. Katz	Consumer Populations Served	
Rev. Carlotta D. Wilson	Consumer Populations Served	Pastor Word of Life Youngsville, NY 12791
Jennie Cortese	Licensed Provider of Home Care – and – Consumer Directed Personal Assistance	Administrator/Director of Patient Services Willcare Middletown, NY 10940
Daniel M. Grady	Hospice	President and CEO Hospice of Orange and Sullivan Counties, Inc. Newburgh, NY 12550
Lina Lerentracht	Adult Home	Administrator Arcadia Residence Liberty, NY 12754
Suzanne Lange Ahmed	Hospital	Department Director Case Management Catskill Regional Medical Center Harris, NY 12742
Deborah Worden	Nursing Home	Director of Volunteer and Community Services Achieve Rehab and Nursing Facility 170 Lake Street Liberty, NY 12754
Lynn Brooks	Advocacy Group	Sullivan Office Supervisor Action Toward Independence Monticello, NY 12701

Member	Representing	Affiliation
Donna Davies	Advocacy Group	Care Consultant Alzheimer's Association Middletown, NY 10940
Member	Representing	Affiliation
Liliam Stettner	Consumer Populations Served	
Deborah A. Gayron	Adult Day Health Care	Director Adult Day Health Care Roscoe Regional Rehabilitative and Residential Health Care Facility Roscoe, NY 12776
Linda Ahnstrom	Consumer Populations Served	
Erin McGinley	Consumer Populations Served	
Priscilla Bassett	Ex Officio Member	NYS Long Term Care Advisory Council -- and -- Sullivan County Senior Legislative Action Committee
James A. Lyttle	Standing Member of Lead Partner Agency	Director Sullivan County Office for the Aging Monticello, NY 12701
Carol S. Ryan	Standing Member of Partner Agency	Director Sullivan County Public Health Services Liberty, NY 12754
Kathi W. Hitt	Standing Member of Partner Agency	Intervention and Outreach Coordinator Sullivan County Division of Health and Family Services Liberty, NY 12754
Martha Scoppa	Standing Member	Point of Entry Coordinator Sullivan County Office for the Aging Monticello, NY 12701

Providers/Stakeholders/Advocates Committee List

The following people contributed to the Gap Analysis report through committee work, event planning, survey distribution, research and statistics, and editing.

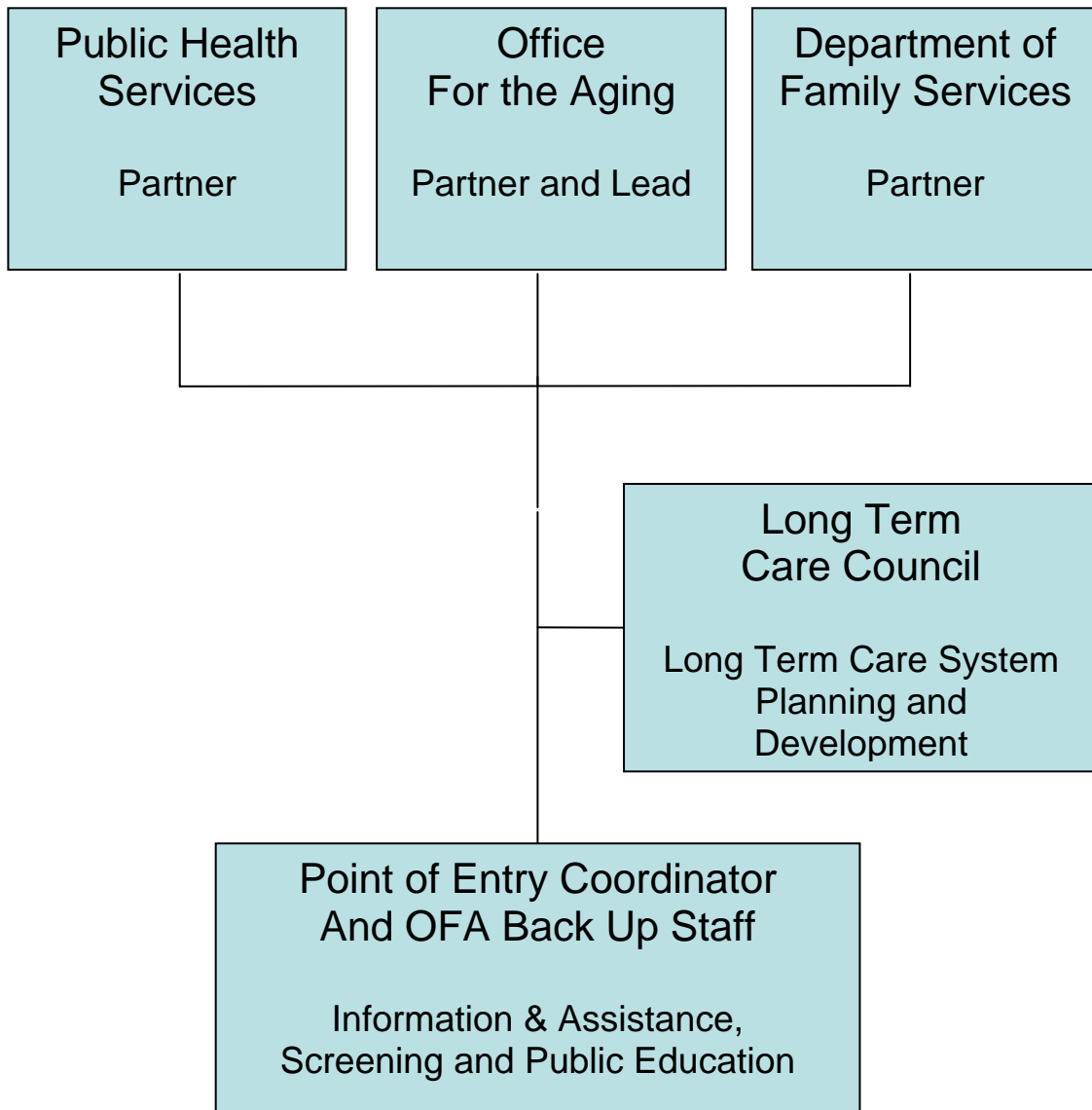
Member	Affiliation
Debi Allen	Sullivan County Office for the Aging Monticello, NY
Yvette Armstead	Always There Adult Day Care (social model) Ellenville and Kingston, NY
Jane Bozan	Sullivan County Office for the Aging Monticello, NY
Cathy Brown	Medicaid Department Sullivan County Department of Family Services Liberty, NY
Donna Brown	Consumer
John Crotty	Veterans Services Agency Monticello, NY
Chris Cunningham	Sullivan County Division of Health and Family Services Liberty, NY
Maria Dallin	Formerly with Geriatric Assessment/Managed Access Catskill Regional Medical Center Harris, NY
Lori Farina	Achieve Rehab and Nursing Facility Liberty, NY
Donna Delosh Feeney	Geriatric Assessment/Managed Access Catskill Regional Medical Center Callicoon, NY
Lenke Ganz	Empire BlueCross BlueShield Middletown, NY
Ellen Giuliano	Long Term Care Services Independent Living, Inc. Newburgh, NY
Nancy Kracht	Adult Services Sullivan County Department of Family Services Liberty, NY
Kathy Kreiter	Dispute Resolution Center Monticello, NY
Tom Maloney	Sullivan County Public Health Services Liberty, NY

Member	Affiliation
Eileen Mishk	Willcare Middletown, NY
Birgit O’Connell-Blatt	Long Term Home Health Care Program Sullivan County Public Health Services Liberty, NY
Gladys Rembert	Former member of Long Term Care Council representing consumer populations served
Babi Satzman	“Options” Consumer-Directed Personal Assistance Program Independent Living, Inc. Newburgh, NY
Fran Schaefer	Wellness Home Care, Ltd. Goshen, NY
Annemarie Sheehan	Action Toward Independence Monticello, NY
Barbara Snyder	Action Toward Independence Monticello, NY
Alicia Terrana	Former member of Long Term Care Council representing Alzheimer’s Association
Lisa Topolovec	Sullivan County Community College Loch Sheldrake, NY
Sarah Vacca	Medicaid and Temporary Assistance Departments Sullivan County Department of Family Services Liberty, NY
Cheryl Ann White	Action Toward Independence Middletown, NY
Yvette Windsor	Formerly with “Directions” Consumer-Directed Personal Assistance Program at Family Empowerment Council
Sharon Yabut	Jeffersonville Senior Living Jeffersonville, NY

SULLIVAN NYCONNECTS

Organizational Chart

March 2, 2009





**CONSUMER SURVEY:
LONG TERM CARE SERVICES
2008**

Here's your chance to be heard !

We need your opinion !

THE PURPOSE OF THIS SURVEY IS TO LEARN ABOUT SULLIVAN COUNTY'S LONG TERM CARE SERVICES FROM THE PEOPLE WHO NEED AND/OR RECEIVE THESE SERVICES.

IF YOU ARE THE CONSUMER, PLEASE ANSWER ALL THE QUESTIONS BASED ON YOUR OWN EXPERIENCE.

IF YOU ARE A FAMILY MEMBER, NEIGHBOR, OR FRIEND, PLEASE ANSWER ALL THE QUESTIONS TO THE BEST OF YOUR ABILITY FOR THE CHILD OR ADULT WHO NEEDS OR RECEIVES LONG TERM CARE SERVICES.

THANK YOU FOR YOUR WILLINGNESS TO COMPLETE THIS SURVEY. YOUR ANSWERS ARE TRULY VALUABLE. THE LONG TERM CARE COUNCIL WILL USE THE SURVEY RESULTS TO DEVELOP STRATEGIES TO RESPOND TO COMMUNITY NEEDS AND TO MAKE RECOMMENDATIONS FOR IMPROVEMENTS TO THE LONG TERM CARE DELIVERY SYSTEM.

ALL SURVEY RESPONSES ARE ANONYMOUS.

**IF YOUR SURVEY IS NOT COLLECTED, KINDLY RETURN IT TO:
SULLIVAN NYCONNECTS, SULLIVAN COUNTY OFFICE FOR THE AGING
P. O. Box 5012, 100 Norex Street, Monticello, New York 12701
(845) 794-3000, ext. 3191**

2008 CONSUMER SURVEY: LONG TERM CARE SERVICES, Page One

1. How would you describe your health during the last three months?

- Excellent
 Good
 Fair
 Poor

2. Which of the following services do you need or have you ever needed for yourself or for someone else? Please check all that apply.

- | | |
|---|--|
| <input type="checkbox"/> Adult day care | <input type="checkbox"/> Medication |
| <input type="checkbox"/> Adult home | <input type="checkbox"/> Nursing home |
| <input type="checkbox"/> Affordable housing | <input type="checkbox"/> Personal care |
| <input type="checkbox"/> Assisted living facility | <input type="checkbox"/> Rehabilitation |
| <input type="checkbox"/> Case worker | <input type="checkbox"/> Respite care |
| <input type="checkbox"/> Home delivered meals | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Congregate meals (at senior centers) | <input type="checkbox"/> Traumatic Brain Injury (TBI) waiver |
| <input type="checkbox"/> Home modification/Adaptive devices | <input type="checkbox"/> Visiting nurse |
| <input type="checkbox"/> Housekeeping/Chores/Laundry/Shopping | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Long term home health care | |

None of the above. [Please skip to Question # 4.]

3. What might prevent you or someone else from receiving the services checked in Question # 2? Please check all that apply.

- | | |
|--|--|
| <input type="checkbox"/> Age | <input type="checkbox"/> Location of residence |
| <input type="checkbox"/> Culture | <input type="checkbox"/> No health insurance |
| <input type="checkbox"/> Financial circumstances | <input type="checkbox"/> No phone |
| <input type="checkbox"/> Health | <input type="checkbox"/> Not knowing what services are appropriate |
| <input type="checkbox"/> Immigration status | <input type="checkbox"/> Not knowing what services are available |
| <input type="checkbox"/> Lack of centralized information | <input type="checkbox"/> Not knowing how to access services |
| <input type="checkbox"/> Language | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Other: _____ | |

None of the above

4. Were there times in the past 12 months when you did not have enough money for any of the following? Please check all that apply.

- | | |
|---|---|
| <input type="checkbox"/> Buy food | <input type="checkbox"/> Pay for dental care |
| <input type="checkbox"/> Modify home | <input type="checkbox"/> Pay for medication |
| <input type="checkbox"/> Obtain eyeglasses or hearing aids | <input type="checkbox"/> Pay rent, mortgage, or taxes |
| <input type="checkbox"/> Obtain needed medical care | <input type="checkbox"/> Pay utility bills (heat, electricity, phone) |
| <input type="checkbox"/> Pay bills | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Pay for medical supplies/equipment | |

No, none of the above

2008 CONSUMER SURVEY: LONG TERM CARE SERVICES, Page two

5. What type of assistance do you need now or feel you may need in the future to remain in your present residence? Please check all that apply in the "Now" column and the "Future" column. [If none apply, please skip to Question # 8.]

	NOW	FUTURE	
Home modifications for special needs	_____	_____	Laundry
Managing money	_____	_____	
Personal care	_____	_____	
Preparing meals	_____	_____	
Routine household chores	_____	_____	
Shopping for groceries	_____	_____	
Taking medications correctly	_____	_____	Transportation
		WALKING	
Other: _____	_____	_____	

6. If you checked any items in Questions # 5, who would assist you? Please check all that apply.

- | | | |
|---|---|--------------------------------------|
| <input type="checkbox"/> Adult child | <input type="checkbox"/> Home care agency | <input type="checkbox"/> Don't know |
| <input type="checkbox"/> Family member/relative | <input type="checkbox"/> Service animal | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Friend/neighbor | <input type="checkbox"/> Spouse/partner | |

7. If you checked any items in Question # 5, how would you pay for this assistance? Please check all that apply.

- | | | |
|---|---|---|
| <input type="checkbox"/> Family financial support | <input type="checkbox"/> Private health insurance | <input type="checkbox"/> Not applicable |
| <input type="checkbox"/> Long term care insurance | <input type="checkbox"/> Reverse mortgage | <input type="checkbox"/> Don't know |
| <input type="checkbox"/> Medicaid | <input type="checkbox"/> Savings | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Medicare | | |

8. If you have a need for long term care services, is it based on your having one of the following conditions? If yes, please check all that apply.

- Intellectual/ Developmental: head injury, learning disability, autism, cerebral palsy, epilepsy, spina bifida, muscular dystrophy, Downs syndrome, etc., and/or receiving services from OMRDD
- Physical: spinal cord injury, amputation, HIV/AIDS, environmental illness, etc.
- Mental/ Emotional: mental illness, behavioral disability, emotional disability, substance abuse, etc.
- Sensory: blindness, low vision, deafness, hard of hearing, deaf and blind, etc.
- Other: _____

2008 CONSUMER SURVEY: LONG TERM CARE SERVICES, Page THREE

9. What is your age range? Under 18 18-59 60-74
 75-84 85+

10. What is your gender? Male Female

11. Do you live alone? Yes No

12. Are you a Veteran? Yes No

13. How would you describe yourself in regard to your race or ethnicity?

African American/Black

Asian/Pacific Islander

American Indian/Alaskan Native

Other _____

Hispanic/Latino

White/Caucasian

Multiracial

14. How many people live in your household, including yourself?

1

2

3

4 or more

15. What is the primary language spoken in your home?

English

Russian

Spanish

Ukrainian

Yiddish

Other _____

16. Which best describes your annual family income? Please check one box.

Less than \$12,000

\$30,000 - \$49,999

\$12,000-\$19,999

\$50,000 and over

\$20,000 - \$29,999

17. What is your zip code? _ _ _ _ _

18. If you would like to add your own comments, please write below. Thank you.

Thank you very much for participating in this survey.



Encuesta del consumidor: Cuidado de servicios a largo plazo 2008

**Aquí esta tu oportunidad para que seas escuchado!
Necesitamos tu opinión!**

El propósito de esta encuesta es para aprender todo sobre los servicios de cuidado a largo plazo de la gente que necesita o recibe estos servicios en el condado de Sullivan.

**Si UD. es el consumidor, Por favor responda a todas las preguntas
Basado en su propia experiencia.**

**Si UD. es un miembro familiar, vecino o amigo, por favor
Responda todas las preguntas lo mejor posible, para un niño o un adulto que necesita o recibe
los servicios de cuidado a largo plazo.**

Gracias por querer llenar esta encuesta. Sus respuestas son de mucho valor. El Long Term Care Council ya a utilizar esta encuesta para desarrollar estrategias que van a ayudar a encontrar lo que la comunidad necesita y hacer recomendaciones para mejorar el desarrollo de el sistema de cuidado a largo plazo.

Todas las respuestas de la encuesta serán anónimas.

**Si su encuesta no es obtenida, finalmente devuélvala a:
SULLIVAN NYCONNECTS, SULLIVAN COUNTY OFFICE FOR THE AGING
P. O. Box 5012, 100 NORTH STREET, MONTECELLO, NEW YORK 12701
(845) 794-3000, ext. 3191**

2008 Encuesta del Consumidor: SERVICIOS DE CUIDADO A LARGO PLAZO Primera pagina

1. ¿Como describiría su salud en los últimos 3 meses?

- Excelente
 Buena
 Regular
 Mala

2. ¿Cuales de los siguientes servicios necesita Ud. o alguna vez ha necesitado para Ud o alguien que conoce? Por favor marque todo lo que corresponda

- | | |
|---|--|
| <input type="checkbox"/> Cuidado de adultos
<input type="checkbox"/> Hogar de adultos
<input type="checkbox"/> Hogar a bajos costos
<input type="checkbox"/> Hogar con asistencia
<input type="checkbox"/> Trabajador social
<input type="checkbox"/> Entrega de comida en casa
<input type="checkbox"/> Distribución de comida en los centros de ancianos
<input type="checkbox"/> Modificación de vivienda
<input type="checkbox"/> Limpieza/Lavandería/compras
<input type="checkbox"/> Cuidado de salud a largo plazo
<input type="checkbox"/> Ninguna [por favor salte hasta la pregunta #4] | <input type="checkbox"/> Medicamentos
<input type="checkbox"/> Asilo para personas mayores
<input type="checkbox"/> Cuidado Personal
<input type="checkbox"/> Rehabilitación
<input type="checkbox"/> Respete cuido
<input type="checkbox"/> Transporte
<input type="checkbox"/> Trauma Cerebral
<input type="checkbox"/> Enfermera a domicilio
<input type="checkbox"/> Otro: _____ |
|---|--|

3. ¿Que le a impedido Ud. o alguien mas el no poder obtener servicios mencionados en la pregunta #2? Por favor marque todos lo que correspondan.

- | | |
|---|--|
| <input type="checkbox"/> Edad
<input type="checkbox"/> Cultura
<input type="checkbox"/> Circunstancias financieras
<input type="checkbox"/> Salud

<input type="checkbox"/> Estatus Migratorio
<input type="checkbox"/> Falta de información local

<input type="checkbox"/> Idioma
<input type="checkbox"/> Otro: _____ | <input type="checkbox"/> Lugar de Residencia
<input type="checkbox"/> No Seguro Medico
<input type="checkbox"/> No Teléfono
<input type="checkbox"/> No saber cuales son los beneficios apropiados
<input type="checkbox"/> No saber cuales servicios son disponibles
<input type="checkbox"/> No saber como encontrar los servicios disponibles
<input type="checkbox"/> Transportation
<input type="checkbox"/> Ninguna |
|---|--|

4. ¿Ha tenido ocasiones en los últimos 12 meses cuando no ha tenido suficiente dinero para lo siguiente: por favor marque todo lo que aplica.

- | | |
|--|--|
| <input type="checkbox"/> Comprar comida
<input type="checkbox"/> Modificación de casa
<input type="checkbox"/> Comprar lentes/ aparato auditivo
<input type="checkbox"/> Cuidado medico necesario
<input type="checkbox"/> Pago de cuentas
<input type="checkbox"/> Pago de equipo medico | <input type="checkbox"/> Pago para cuidado dental
<input type="checkbox"/> Pago de medicinas
<input type="checkbox"/> Pago de renta, casa o impuestos
<input type="checkbox"/> Pago de utilidades (electricidad, teléfono)
<input type="checkbox"/> Transporte
<input type="checkbox"/> No, ninguna |
|--|--|

2008 Encuesta del Consumidor: SERVICIOS DE CUIDADO A LARGO PLAZO
Página Dos

5. ¿Que tipo de asistencia necesita ahora o siente que podría necesitar en un futuro que le permitiría mantener su residencia presente? Por favor marque todo lo que corresponda en la columna "Ahora" y en la columna "Futuro". [Si no aplica, por favor salte hasta la pregunta #8]

		AHORA		FUTURO	
Modificación de casa/incapacitado	_____		_____		Layado
de ROPA	_____		_____		
Administrar su dinero		_____		_____	
Cuidado Personal		_____		_____	
Preparación de comida		_____		_____	
Diligencias		_____		_____	
Ir al Supermercado		_____		_____	
Tomar sus medicamentos adecuadamente		_____		_____	
Transportación		_____		_____	
Caminar		_____		_____	
Otro: _____		_____		_____	

6. ¿Si Ud. no marque ninguna de las de las cosas en la pregunta #5, ¿quien lo asiste? Por favor, marque todo lo que corresponde.

- | | | |
|--|--|-------------------------------------|
| <input type="checkbox"/> Cuidado de adulto | <input type="checkbox"/> Agencia del cuidado | <input type="checkbox"/> No se |
| <input type="checkbox"/> Miembro Familiar | <input type="checkbox"/> Servicio de Animal | <input type="checkbox"/> Otro _____ |
| <input type="checkbox"/> Amigo/vecino | <input type="checkbox"/> Esposa (o) Pareja | |

7. ¿Si Ud. marque alguna de las cosas en la pregunta # 5, Como podría pagar por la asistencia? Por favor marque todo lo que corresponde.

- | | | |
|--|--|-------------------------------------|
| <input type="checkbox"/> Manutención familiar | <input type="checkbox"/> Seguro de Salud Privado | <input type="checkbox"/> No aplica |
| <input type="checkbox"/> Seguro al largo plazo | <input type="checkbox"/> Préstamo reversible | <input type="checkbox"/> No se |
| <input type="checkbox"/> Medicaid | <input type="checkbox"/> Ahorro | <input type="checkbox"/> Otro _____ |
| <input type="checkbox"/> Medicare | | |

8. ¿Si Ud. Necesitara servicios a largo plazo, tendría que tener alguna de las siguientes condiciones? Si fuera así por favor marque todo lo que corresponda.

- | | |
|---|---|
| <input type="checkbox"/> Intelectual/
Desarrollos: | Lesión cerebral, incapacidad de aprendizaje, autismo, Palsy, Spina Bifida, Distrofia muscular, síndrome de Down, etc., y/o recibiendo servicios de OMRDD. |
| <input type="checkbox"/> Físico: | Lesión de espina dorsal, amputación, VIH/SIDA, Virales |
| <input type="checkbox"/> Mental/
Emocional: | enfermo mental, conducta, incapacitado mentalmente abuso de sustancias, etc. |
| <input type="checkbox"/> Sensorial: ciego, poca visión, sordera, sordo/ mudo etc. | |
| <input type="checkbox"/> Otro: | _____ |



The Sullivan County Long Term Care Council
is the advisory board for SULLIVAN NYCONNECTS: *Choices for Long Term Care.*

SULLIVAN NYCONNECTS is located at the Office for the Aging
in the Government Center :

Sullivan County Office for the Aging
100 North Street
P. O. Box 5012
Monticello, NY 12701
(845) 794-3000, ext. 0257 phone
(845) 807-0257 direct dial
(845) 794-7409 fax

For the SULLIVAN NYCONNECTS website and Resource Directory
go to the Sullivan County website:

www.scgnet.us

click on Departments
click on Office for the Aging
click on SULLIVAN NYCONNECTS

NYCONNECTS is endorsed and supported by
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in collaboration with the
New York State Department of Health

SULLIVAN NYCONNECTS is a member of the Rural Health Network.

