SECTION 7

2014-2015

COMMUNITY DEVELOPMENT BLOCK GRANT

APPLICATION FORM
CITY OF DAVIS
2014-2015 COMMUNITY DEVELOPMENT BLOCK GRANT APPLICATION

Organization Name: Citizens Who Care for the Elderly

Street Address: 409 Lincoln Ave., Woodland, CA 95695

Mailing Address: (same)

Email Address: Wecare.cwc@gmail.com

Fax Number: 530-662-6691

Contact: Joanne Bell

Address: (same)

Phone: 530-758-3704

(Be sure to list the best contact to get information to the organization as quickly as possible.)

Total Proposal Request: In Home Respite and Friendly Visiting Program

$ 5,000

(Check one)  x  On-going Support  ____ New Project

CDBG Eligible Category: Public Service

(See List A)

National Objective Compliance/Low and Mod Benefit: 1. Limited clientele /low/very income - seniors

(See List B)

City Council Identified Critical Needs: (See List C)

1) In-home care, respite,

2) Visitor support services for homebound elder adults

3) Elder care giver support and education services

PUBLIC SERVICE  X  NON-PUBLIC SERVICE

Beneficiary Information:

80 Total number of beneficiaries in proposed project

80 Number of beneficiaries in program to be served with CDBG funds

90 Percentage of the CDBG beneficiaries with low/moderate income

$ 62 Cost ($) per CDBG beneficiary (CDBG Request/CDBG Beneficiaries)
a. **Need**

The challenge is to make it possible for frail elderly adults to maintain their independence and avoid placement in a care home prematurely by providing no cost community-based in-home social support to at-risk individuals and respite for their caregivers, when there is one.

The majority of frail seniors and their caregivers identify loss of independence, isolation, and loneliness as causes of enormous stress in their daily lives. The National Alliance of Caregivers, AARP, and the Alzheimer's Association have all determined that most caregivers provide care with little or no support and more than one-third provide intense care to others while suffering from poor health themselves. This stress on the elderly and their family caregivers can lead to mental and physical breakdown, caregiver "burnout", premature institutionalization of the frail adult, and even elder abuse. Transfer to a long-term care facility often has a depressing impact on patient and family health, and every resource that supports independence is important.

Older people usually live a longer and higher-quality life in their own home environment. At some point in our later years, in order to remain in our own home most of us will need a caregiver – at first a family member or friend, later perhaps a paid person. Paralleling the population of older persons with caregivers are those elderly who can still manage alone, single or in couples, but who live in isolation. They are not frail enough to need constant care but are vulnerable and, especially when the nearest family member lives far away, often out of touch with the surrounding community. They need support from a friendly, observant visitor and referral to appropriate services.

Caring for a family member who has the physical and mental disabilities of age is stressful to body and mind. Frequently income limitations do not allow the assistance of paid caregiver support. The demands of care-giving can be overwhelming, even life altering. Respite from such stress is a basic need. A recent AARP study of working family caregivers in California concluded that as demands on the caregiver increase, adverse consequences tend to be compounded. In particular, difficulties at work, worries about one’s own well-being, and poor mental health are all associated with having heavy caregiving responsibilities. Elderly spousal caregivers (aged 66-96) who experience caregiving-related stress have a 63 percent higher mortality rate than non-caregivers of the same age according to a study published in the *Journal of American Medicine*.

Community and government resources to support the unique physical and mental needs of adults over 60 years of age are shrinking at an alarming rate. While the California Department of Aging estimates that in Yolo County the population of aged 85 and over will increase 150 percent by 2020, the Yolo County Healthy Aging Alliance has identified limited and declining availability of social services including in-home health services and mental heath care, a lack of affordable senior housing, and poor transportation to services as indicators of a crisis in the making for the most vulnerable elderly in Yolo County.

This comes at a time, when Adult Day Health programs have been required to tighten up eligibility requirements as they transitioned to Community Based Adult Services (CBAS). Advocates say there have already been several cases around California where people deemed ineligible by the state for CBAS have been left alone, hurt themselves and been put into psychiatric hospitals or nursing homes.

Paralleling the population of older persons with caregivers are those elderly who can still manage alone, single or in couples, but who live in isolation. They are not frail enough to need constant care but are vulnerable and, especially when the nearest family member lives far away, often out of touch with the surrounding community. They need support from a friendly, observant visitor, and referral to appropriate services. The Alzheimer's Association reports that of the 72,000 people with dementia in California half of them have no specific caregiver.

CWC’s clients are principally low to moderate-income. Convalescent hospital care in Yolo County averages $6,000 per month. These families need help to avoid having to prematurely transfer their loved elder to a convalescent facility. This looming financial burden alone substantiates the need for the TOC program. In addition, TOC meets the emotional and physical health needs of clients and caregivers, and the community’s need to reduce unnecessary strain on the long-term care system.
b. Benefit

Citizens Who Care for the Elderly (CWC) In Home Respite and Friendly Visiting Program supports Davis’ at-risk, under-served, and largely low-income population, of frail elderly residents and their caregivers by 1) providing regular and predictable social activity for the frail elderly, 2) providing regular and predictable respite for their caregivers to optimize mental health by reducing isolation and stress, and 3) providing professional case management and referral to beneficial health/community resources CWC’s volunteer-based respite support and friendly visits result in strengthened families, increased caregiver well-being, and a substantial cost savings to the elders’ families and our community.

Citizens Who Care for the Elderly (CWC) In-Home Respite and Friendly Visiting Program provides friendly companionship to frail older adults and gives caregivers of dependent adults a weekly break from care giving. CWC trained and supervised volunteers provide the weekly in-home visits and respite service which last a minimum of two hours, offering services vital to the functioning and health of individuals and families faced with extraordinarily stressful late-life circumstances. With program support these elderly individuals and their families are better able to maintain their quality and dignity of life, to stay connected to their communities, receive referrals to needed community health and social service resources and, for those at home, remain in their familiar and safe home environment for as long as possible.

Ninety percent of the clients CWC serves in its In-Home Respite and Friendly Visiting Program are low income as defined by HUD. This program -- offered FREE OF CHARGE -- meets the emotional and physical health needs of clients and caregivers, and reduces the costs of aging in place.

c. Other Resources and Collaboration

In Davis, approximately 30 volunteers provide in-kind support for the program by donating 3,600 hours of time annually to respite and visiting services at a market value of $83,800 ($23/hour as per www.independentsector.org/programs/research/volunteer_time.html). CWC receives 60 percent of its financial and in-kind support from individuals, charitable organizations, and businesses in the community. The agency’s donor drive brings about $20,000 (15%).

Two community fundraising events that support the program proposal are held each year – CWC’s Winter Concert and Davis BeerFest – underwriting about 40 percent of CWC’s overall operating budget. The In-Home Respite and Friendly Visiting Program, or portions of it, have been funded for 2014-15 or will be submitted to the following funders for consideration:

- Dignity Healthcare: $4,000 (for Davis residents/clients served)

Additional grant funding is also being identified and CWC will apply for all possible funding opportunities.

Collaboration is the KEY to CWC’s success. For the last twenty-eight years the organization has provided unique and critical services in Yolo County, strengthened by enduring relationships with other community organizations. The agency strives to fill its unique niche while avoiding duplication of services. CWC staff regularly receives and makes client and service referrals, solicits feedback, and discusses emerging needs with many senior service providers. Key partnerships in assuring that seniors’ mental and physical health needs are met include agency representation on the Yolo County Healthy Aging Alliance. Client referrals are received from Yolo Community Based Health Services (formerly Adult Day Health), Sutter, UCD, and Woodland, Healthcare services, Yolo Hospice, and the Yolo Elderly Nutrition Program. CWC staff attends the Yolo Multi-Disciplinary Team, Yolo County Social Services and Older Adult Program, Commission on Aging/TRIAD, the Woodland and Davis Senior Centers, and Woodland Senior Outreach. The Yolo County Public Guardian’s office is represented on the CWC Board of Directors and is activity making referrals for those in dire need of a friendly visitor.

d. Organizational Capacity

The mission of Citizens Who Care for the Elderly is to improve the quality of life for Yolo County’s elderly and their caregivers. In 2013, over 140 volunteers contributed more than 6,000 hours in CWC’s three programs – In-Home Respite and Friendly Visiting, Time Off for Caregivers (a weekend social respite program), and Convalescent Hospital Visiting & Pet Visitation Program.

Citizens Who Care for the Elderly began in 1975 as a Citizens Advisory Committee of the Mental Health Association of Yolo County. In 1986, the agency established its in-home respite friendly visiting program. Citizens Who Care for the Elderly incorporated in 1988 as an independent private non-profit organization. The 2.7 FTE staff is small but mighty. All personnel are part-time. CWC’s Executive Director has more than two decades of nonprofit, human service program policy and management experience, largely in Yolo County. CWC’s Davis-based Assessment Nurse has over twenty-five
years’ experience as a family nurse practitioner, nursing educator and health administrator. She also holds a State of California certificate in community care administration. The Director of Volunteers has many years experience managing volunteer programs, fifteen years of which have been with CWC.

SCOPE OF SERVICES

a. Project Description  (Activity Summary: Describe the activities of the proposed budget)

The In-Home Respite and Friendly Visiting Program provides friendly companionship to frail older adults and gives caregivers of dependent adults a weekly break from care giving. Citizens Who Care for the Elderly (CWC) trained and supervised volunteers provide these weekly in-home social visits and respite service, which last a minimum of two hours.

The program serves the frail elderly, defined as seniors over 60 years of age experiencing one or more chronic conditions that restrict daily living and their caregivers where there is one. Approximately seventy percent of the clients have Alzheimer’s or another type of dementia which places particular challenges on caregivers. Clients served by this program can be living alone or with a family caregiver. The current average age of a CWC client is 84. Of those living at home, 80 percent have a family caregiver. CWC refers to these as client families as CWC programs benefit both the frail client and the caregiver.

Ninety percent of CWC clients are low income (HUD guidelines). Elderly clients are approximately 60 percent female, 40 percent male. Their caregivers are 80 percent female. Ninety-five percent of our clients are white. Our clients are located in both urban and rural Yolo County, but primarily in Davis and Woodland.

CWC In-Home Respite and Friendly Visiting Program cost per home-based client family in Davis is about $38 per month or $10 per week [$36,650 expenses (excluding in-kind volunteer support)/80 annual clients/12 months/4 weeks]. If a family must pay for private in-home respite service the family will encounter fees of $20 to $25 per hour with a four-hour minimum or $400 per month for respite services similar to those provided by Citizens Who Care for the Elderly free of charge. The average cost of assisted living facilities is $3,300 per month in Yolo County. Convalescent hospital care in Yolo County averages $47,000 per year. These looming financial burdens alone substantiate the need for CWC’s In-Home Respite and Friendly Visiting Program.

Citizens Who Care for the Elderly In-Home Respite and Friendly Visiting program matches, screens, and trains volunteers and then places a volunteer with frail elderly individuals, in the elder’s own home, for a minimum of two hours of social companionship each week. These scheduled visits provide support and socialization for the elderly and, where there is a family caregiver, support and time off for the caregiver. If the senior lives alone, the regular visits ensure that someone is regularly checking on the client’s well-being. Caring for a family member who has the physical and mental disabilities of age is stressful to body and mind. Respite from such stress is a basic need. While our volunteers spend time with the frail elderly, our respite program provides caregivers of older adults with a weekly break from care giving, so that they have the opportunity to replenish themselves.

Most client referrals begin with a telephone call from a senior care agency or health worker or a family member. The CWC Administrative Assistant documents the call and obtains preliminary case information and then forwards the referral to an Assessment Nurse. The nurse makes contact with the potential client within seven days and an in-home assessment is scheduled. This initial assessment determines client appropriateness, identifies other community services of potential benefit, and notes interests/challenges that will influence volunteer placement. The frail elderly individual’s health must be at a level that their usual physical care demands during a two hour span can be meant by volunteers who are not trained health care professionals. Upon admittance, the Assessment Nurse completes an In-Take Packet. CWC’s two staff nurses each devote about 8 hours/week to assessing new clients, assisting with matching volunteers, reassessing existing clients, making referrals to other needed services, and maintaining regular phone contact with caregivers.

Once a suitable volunteer is interviewed an introduction visit with the client family is arranged. If everyone is comfortable, visits can begin. CWC strives to place a volunteer with the client within 30 days of assessment. Volunteers are required to adhere to a predictable visiting schedule so that caregivers can plan for respite accordingly. The Director of Volunteers communicates with volunteers at least once a month, and whenever volunteers have questions or need additional staff support or direction. Following placement with a CWC volunteer, elderly clients and their caregivers are contacted by the Assessment Nurse at least every 60 days. The Assessment Nurse maintains an ongoing status file on each client, documenting communication, challenges, etc. These updates document any improvements or declines in health. The Assessment Nurse maintains the client file. The nurses confer on case management issues.

Respite/visitor volunteers come from all walks of life. They are trained and supervised by our Director of Volunteers and by our professional nursing staff. All volunteers are screened and receive an individual orientation before being placed in
any CWC program, including In-Home Respite. Volunteers are recruited through a variety of methods. Adults are recruited through talks at local organizations, churches and clubs, tables at community events, newsletter articles and news releases, as well as word-of-mouth by existing volunteers. Students are recruited through outreach at student volunteer events, student organization email lists, and student newspapers. CWC schedules educational in-services and collaborates with other senior organizations to cross-promote educational opportunities for volunteers. Volunteer hours are tracked monthly by the Director of Volunteers. CWC also tracks volunteers’ education in files maintained in the CWC office. Volunteers and their client families remain friends for years, and many volunteers continue to visit their client even after convalescent hospital placement.

b. Target Group

The program serves the frail elderly, defined as seniors over 60 years of age experiencing one or more chronic conditions that restrict daily living and their caregivers where there is one. Approximately seventy percent of the clients have Alzheimer’s or another type of dementia which places particular challenges on caregivers. Clients served by this program are living with a family caregiver. The current average age of a CWC client is 86. Of those living at home, 80 percent have a family caregiver. This program benefits both the frail client and the caregiver.

- 50 frail elderly, over the age of 60 (average age 86), 90 percent defined as low income per CDBG guidelines/ HUD guidelines, will receive weekly friendly visits.

- 30 caregivers to frail elderly, 80 percent over the age of 60 and also 90 percent low income, will receive weekly respite from eldercare responsibilities.

In total, 80 unique low income individuals in Davis (frail and dependent elderly and family caregivers) will be receiving program services and benefits

c. Outreach

CWC promotes its programs and volunteer opportunities through many methods. The agency distributes its brochures throughout the county. Brochures are maintained at senior centers, medical and social program facilities, and churches. The agency has a monthly educational column in the Davis Enterprise on senior health and care topics. The agency maintains a fully-descriptive website that includes printable forms for requesting services and becoming a volunteer. Finally, CWC distributes a newsletter twice annually to a readership of about 3000 persons. The agency seeks out public speaking engagements and participates in several health fairs and public events each year.

PERFORMANCE SCHEDULE

Work Plan  (Identify activities and completion dates)

<table>
<thead>
<tr>
<th>List Activity</th>
<th>Completion Date</th>
</tr>
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<tbody>
<tr>
<td>30 frail elderly individuals currently receiving friendly visits from volunteers and on-going nurse assessment will continue to receive weekly program services</td>
<td>June 2014</td>
</tr>
<tr>
<td>20 caregivers of frail elderly currently receiving respite will continue to receive program support</td>
<td>June 2014</td>
</tr>
<tr>
<td>30 newly referred frail elderly individuals will be assessed for appropriateness for In-Home Respite and Visiting services by Assessment Nurse: -- 20 new client families will be qualified &amp; enrolled in In-Home program</td>
<td>June 2015</td>
</tr>
</tbody>
</table>
-- 10 new client families referred to CWC will be identified as having medical needs beyond the scope of CWC service capabilities but will be referred to health care and social services appropriate for their level of need

10 new in-home visitor/respite volunteers will be recruited, screened and trained for placement with client families

June 2015

10 experienced volunteers will be reassigned to new clients subsequent to a placement concluding

June 2015

50 unique frail elderly individuals will visit with their CWC volunteer for two hours each week

June 2015

30 unique caregivers will be provided two hours of respite from caregiving responsibilities each week during CWC volunteer visits.

June 2015

50 unique frail elderly and their 30 caregivers (new and existing clients) will be assessed by nurse approximately every 60 days for health and well-being

June 2015

50 elderly clients and 30 of their caregivers will be surveyed every six months to identify effectiveness of volunteer placement, progress toward achieving positive outcomes and additional support requirements.

PERFORMANCE MEASUREMENTS

<table>
<thead>
<tr>
<th>ACTIVITY</th>
<th>INDICATOR</th>
<th>OUTCOME</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide frail elderly and their family caregivers with weekly in-home friendly visits and caregiver respite</td>
<td>50 frail elderly clients will receive a minimum of two hours weekly of friendly visiting by a trained and supervised volunteer (a total of 3,600 hours of social visits from CWC volunteers over a 12-month period) 30 elder caregivers will be provided a minimum of two hours a week of respite from their caregiving responsibilities (a total of 2,200 hours of caregiver respite support from CWC volunteers over a 12-month period)</td>
<td>Frail elderly individuals living at home will avoid premature institutionalization Frail elderly individuals living at home will be less socially isolated and feel mentally healthier Elder caregivers will experience less stress, improved mental health, and less caregiver burnout as a result of weekly respite opportunities</td>
</tr>
<tr>
<td>Home-bound frail elderly and their family caregivers receive on-going professional health and social assessment to meet emerging care and support needs</td>
<td>50 frail elderly individuals will receive in-home nurse assessments every 60 days for program services and/or referrals to helpful community and healthcare resources</td>
<td>Frail elderly individuals living at home will receive all available community and health resource support available to support their ability to age in place</td>
</tr>
</tbody>
</table>
CITY OF DAVIS
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

BUDGET SUMMARY FOR PROPOSED PROJECT*

<table>
<thead>
<tr>
<th>Budget Category</th>
<th>Proposed Project &quot;CDBG&quot; Portion</th>
<th>Other Funds (Non-CDBG)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Direct Project Related Costs</td>
<td>General Admin Costs of Service Provider</td>
</tr>
<tr>
<td>A. Salaries &amp; Wages</td>
<td>5,000</td>
<td>4,000</td>
</tr>
<tr>
<td>B. Fringe Benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C. Consultant/Contract Services</td>
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<tr>
<td>TOTAL PERSONNEL BUDGET</td>
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<td>24,000</td>
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<tr>
<td>D. Office Rent</td>
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<tr>
<td>E. Utilities</td>
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<tr>
<td>F. Telephone</td>
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<td>G. Office Supplies</td>
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<tr>
<td>H. Equipment</td>
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<td></td>
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<tr>
<td>I. Printing/Duplication</td>
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<tr>
<td>J. Travel/Conference</td>
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<tr>
<td>K. Other (Specify) : Insurance</td>
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<tr>
<td>TOTAL NON-PERSONNEL BUDGET</td>
<td>3,650</td>
<td>3,650</td>
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<tr>
<td>TOTAL PROJECT BUDGET</td>
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<td>4,000</td>
</tr>
</tbody>
</table>

- Please revise this form and annotate budget items as needed

**Funding Sources**
- **Private Funds Supporting Program**: These are provided by grants from Dignity Healthcare Community Fund Grant
- **Other Funds**: These are provided by proceeds from fundraising events and donor drives, and potential other grant sources to be identified.

**Budget Line Items**

Line A. Supports the following personnel & includes 9% payroll tax
- One Assessment Nurse who will devote 8 hours/week (50 weeks) to task at hourly salary of $21/hr.
- Director of Volunteers who will devote 9 hours/week to task (52 weeks) at hourly salary of $18/hr.
- Administrative Assistant who will devote 9 hours/week to task (52 weeks) at hourly salary of $17/hr.
- Executive Director who will devote 4 hours/week to program management and program evaluation (52 weeks) at hourly salary of $29/hr.

Line C. Payroll processing services and accountant
Line D. Portion of office rent
Line F. Portion of cost of annual phone bill associated with program
Line G. Supplies associated with administration and record keeping for the program
Line I. Cost of ink, paper and of duplicating records and other program forms
Line J. Mileage reimbursement for assessment nurse travel to in-home client visits and director of volunteers local travel to meetings with program volunteers. Reimbursement at $.505/mile
Line K. Insurance: General liability insurance required for program operation

**IN-KIND DONATION:** CWC estimates the annual value of this volunteer force behind the Davis In-Home Respite and Friendly Visiting Program at $83,800 ($23/hour x 3,600 hours, as per www.independentsector.org/programs/research/volunteer_time.html).

The CWC Davis In-Home Respite and Friendly Visitor direct program cost per home-based total clients served (elderly individuals and caregivers) is about $38 per month or $10 per week [$36,650 expenses (excluding in-kind volunteer support)/80 annual clients/12 months/4 weeks]. The grant funds requested from the Davis CDBG would provide about 13 percent of the funding for the Davis In-Home Respite and Friendly Visitors Program (excluding value assigned to in-kind volunteer service contribution).

Split CDBG Costs between direct costs associated with implementing the proposed activity and general administration costs used to operate the non-profit.

All applicants are requested to submit a copy of their organizations Operating Budget.