City of Palo Alto Office of Human Services

Program Semiannual Report Fiscal Year 2024

| Agency: Avenidas | |
|---------------------------------|--|
| Program: <u>Senior Services</u> | _Contract #C21178949 |
| Prepared By: Kristina Lugo | Phone #: 650-289-5400 Date: <u>July 15, 2024</u> |
| Semiannual: 1st(July-Dec) | 2ndX (Jan-June) |

| Goal #/ | Performance | July through | | January thi | | T | Contract |
|------------------------|---|--------------|--------|-------------|--------|---------|----------|
| Objective # | Measures | Projected | Actual | Projected | Actual | to Date | Goal |
| oal #1 Frail Elders | Provide adult day health care services to 100 participants | 70 | 98 | 30 | 29 | 127 | 100 |
| 2) | Provide 8,000 days of adult health services to less independent seniors | 4000 | 5,070 | 4000 | 5079 | 10149 | 8,000 |
| 3) | Provide Case Management to 40 frail, homebound seniors | 20 | 27 | 20 | 30 | 57 | 40 |
| 4) | Provide counseling, referral, or enrollment to 200 families and caregivers through the Avenidas Rose Kleiner Center (ARKC) | 100 | 118 | 100 | 115 | 233 | 200 |
| 5) | 75% of ARKC participants will remain enrolled for 3 months or longer demonstrating improved or maintained functional levels | 75% | 94% | 75% | 96% | 95% | 75% |

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ATTACHMENT 3

| 6 - 1 "/ | n c | July throu | gh December | January thi | angh June | | <u> </u> |
|---|--|------------|-------------|-------------|-----------|-------------------------|------------------|
| Goal #/ Objective # | Performance Measures | Projected | Actual | Projected | Actual | Total Actual to Date | Contract Goal |
| Support | Provide support group assistance to 150 caregivers/attend ees. | 75 | 308 | 75 | 90 | 398 (ARKC and ACP) | 150 |
| 2) | Provide conferences, workshops and classes on caregiving issues for 150 attendees through Avenidas Care Partners and ARKC. | 50 | 123 | 75 | 125 | 248 | 150 |
| 3) | Provide individualized consultations and support to 150 caregivers. | 75 | 75 75 | 75 | 158 | 233 | 150 |
| 4) | 90% of caregivers report being better able to manage the care of their family member because of the health education received, and improved understanding of their family members' health status | 90% | 90 % | 90% | 90% | 90% | 90% |
| Goal #3 Fransportation Assistance 1) | Provide transportation | 100 | 261 | 200 | 100 | 361 | 200 |

| | | QUANTITATI | VE PERFORI | MANCE MEA | SURES | | |
|---------------------------------------|--|--|------------|------------|--------------|-------------------------------------|--------|
| Goal #/ | Performance | unce July through December January through J | | rough June | Total Actual | Contract | |
| Objective # | Measures | Projected | Actual | Projected | Actual | to Date | Goal |
| 2) | Provide 2,500 services to seniors to Avenidas Door to Combat isolation during COVID (rides, grocery, medicine, other deliveries, assurance/assista nce/referral calls) | 1000 | 1123 | 1500 | 1470 | 2593 | 2500 |
| 3) | Provide 15,000 one-way trips through ARKC | 7500 | 8623 | 7500 | 9176 | 17,799 | 15,000 |
| Goal #4 Focus on Isolated 1) | Provide enrichment classes, services, and workshops to 1,500 individuals through Avenidas @450 Center, Avenidas Chinese Community Center @ Cubberly and online @ Avenidas Without Walls (unduplicated individuals) | | 1424 | 750 | 1736 | 2253 (unduplicate d for FY24) | 1,500 |
| 2) | Provide enrichment classes to 4,000 individuals through Avenidas @450 Center, Avenidas Chinese Community Center @ Cubberly and online @ Avenidas Without Walls (total registrations) | 2000 | 3561 | 2000 | 4953 | 8414 | 4000 |

| | QUANTITATIVE PERFORMANCE MEASURES | | | | | | |
|-------------|--|-----------------------|---------------------|---------------------------|----------------------|----------------------|---------------------------|
| Goal #/ | Performance | July through December | | January through June | | Total Actual | Contract |
| Objective # | Measures | Projected | Actual | Projected | Actual | to Date | Goal |
| 3) | Provide volunteer opportunities to 350 volunteers through Avenidas Volunteer Corps | 150 vol 2500 hours | 309 vol 3942 hrs | 150 (vol) 5,000 (hrs.) | 230 vol 5,668 hrs | 309 vol 9610, hrs | 350 (vol) 5000 (hours) |

| | NARRATIVE OF QUANTITATIVE PERFORMANCE MEASURES | | | | | |
|-------------------------------|---|--|--|--|--|--|
| Goal #/ Objective # | Performance Measures | Provide a description of how the objective was met, specific activities conducted and measuring tools utilized for this reporting period, if any. | | | | |
| Goal #1 Frail Elders 1) | Provide adult day health care services to 100 participants. | The Rose Kleiner Center served 29 new participants during the reporting period, exceeding the goal for the fiscal year serving 127 individuals. We are increasing the number enrollment of pending candidates (~2/week) and working toward our goal to increase back to our max capacity of 65 participants/day. We track all participants via electronic health record. The multidisciplinary team assesses and determines an appropriate plan of care for each participant. We develop a person-centered care plan for all participants and track interventions via flowsheets and progress notes. All participants have a quarterly review and biannual reassessment. | | | | |
| 2) | Provide 8,000 days of adult health services to less independent seniors | Adult day health care is provided up to 5 days per week for actively enrolled participants. We provided 5,079 days of service Jan 1-Jun 30, 2024. Daily attendance records are maintained and saved in the participant health record. We continue to provide Emergency Remote Services (ERS) as needed. This allows us to provide services to participants if they are unable to come to the Center and assist in helping them to return to in-Center services more seamlessly. At the Center we provide a variety of activities throughout a typical day of attendance. Activities include socialization, music, cognitive stimulation, exercise, lunch, personal care, and as needed, nursing or therapeutic intervention. This year we began offering Music Mends Minds, a drum circle with a trained facilitator. | | | | |
| 3) | Provide Case Management to 40 frail, homebound seniors | Care Managers are required to document every client interaction; conduct assessments, create and document plan of care with client, signed by clients. CM staff | | | | |

| | NARRATIVE OF QUANTITA | TIVE PERFORMANCE MEASURES | | | |
|---------------------------------------|--|---|--|--|--|
| Goal #/ Objective # | Performance Measures | Provide a description of how the objective was met, specific activities conducted and measuring tools utilized for this reporting period, if any. | | | |
| | | provide counseling and support to help clients access county, CA state and federal services, apply for housing, secure transportation, obtain emergency financial assistance for dental work, rent increase, medical equipment repair. CM assists clients connect to community and social events at senior centers. Conduct weekly or as needed check ins with clients, to review and update plan of care. Close case when client is stable. Avenidas recently started to work with Enhanced Care Management clients which tend to be higher risk and have higher needs. The goals of all CM services as Avenidas is to ensure our clients remain stable and healthy in the community for as long as it is safe. | | | |
| 4) | Provide counseling, referral, or enrollment to 200 families and caregivers through the Avenidas Rose Kleiner Center | We received 111 referrals this fiscal year. In addition to these new caregivers and families, we continually offer support and counseling to existing families for 127 total families served. This is an increase over FY 23. Counseling, referral, and help through the enrollment process is completed by our nurse and social worker. Information about each session is tracked in the electronic health record and a spreadsheet for tracking follow up services. We provide information to interested families and individuals about our services and other resources as needed. In addition to new callers, we also provide counseling and referral to current participants and their families. Many families are seeking support to know what other services are available, dementia education, and information about long-term care. | | | |
| 5) | 75% of ARKC participants will remain enrolled for 3 months or longer demonstrating improved or maintained functional levels | Goal was met and exceeded at 95%. During the reporting period 6 participants discharged within 3 months after enrollment this fiscal year. Overall, this is a high retention rate. We have seen an increase in acuity levels, mental health concerns, cognitive decline and caregiver support needs. This is a testament to the demand for Adult Day Health Care Services in the community. | | | |
| Goal #2 Caregiver Support 1) | Provide support group assistance to 150 caregivers/attendees. | Care Partners caregiver group facilitator conducts two monthly and one weekly caregiver support group. Unduplicated attendance in these various groups is 309 caregivers with the additional members being served through ARKC caregiver support. Focus is on emotional support, self-care, assisting members become educated consumers of relevant health, legal and financial services; including how to select quality home care assistance, assess local residential care communities, navigate medical discharge plans and transitions of loved | | | |

| | NARRATIVE OF QUANTITA | ATIVE PERFORMANCE MEASURES |
|------------------------|---|---|
| Goal #/ Objective # | Performance Measures | Provide a description of how the objective was met, specific activities conducted and measuring tools utilized for this reporting period, if any. |
| | | ones to higher levels of care, cope with grief, loss and death of loved ones. Members are active users of many Avenidas services; such as Door to Door transportation, the Avenidas Rose Kleiner Center, and schedule one on one consults with ACP staff. |
| | Provide conferences, workshop and classes on caregiving issues for 150 attendees through Avenidas Care Partners and ARKC | ACP SW active member of conference task force; assist with developing conference theme, title, selecting session speakers. ACP SW facilitates a session each year on topics such as contingency planning, cultivating resilience, dementia care communications and strategies. The conference will be in Spring/Early Summer 2024. ACP has hosted it's Aging Wisley series this year, serving 70 attendees identifying as caregivers. |
| 2) | | In August, the Rose Kleiner Center hosted Day-Caring In Action Open House Tours serving 21 members of the community including caregivers and their care partners. They were able to see the Center in action, meet with members of the team, and receive a variety of resources, information and support. In November, in celebration of National Family Caregiver Month, the Center hosted "Self-Care Is Your Superpower" and served 32 individuals including caregivers and their care partners. The event honored the contributions of family caregivers in our community. We facilitated a variety of self-care activities and education regarding the importance of self-care, provided refreshments, professional support and celebrated with live entertainment. |
| 3) | Provide individualized consultations and support to 150 caregivers. | ACP staff conduct in person and Zoom consults to help caregivers proactively plan for their care recipient's transition to higher levels of care, navigate hospital discharge plans, assist with referrals to home care, assisted and memory care, board and care, adult day health care; consider aging in place and or relocation to a care community, connect to peers, and provide emotional support to those grieving and or experiencing anticipatory grief. SW provides clients with relevant |
| 4) | 90% of caregivers report being better able to manage the care of their family member because of the health | books, articles and tool kits for all aspects of caregiving. We conduct surveys of clients, group members, conference participants and receive positive reviews/ |

| | NARRATIVE OF QUANTITA | TIVE PERFORMANCE MEASURES |
|---|--|---|
| Goal #/ Objective # | Performance Measures | Provide a description of how the objective was met, specificactivities conducted and measuring tools utilized for this reporting period, if any. |
| | education received, and improved understanding of their family members' health status | We are thanked for "creating safe space for compassionate dialogue." And for providing updated educational resources on health, legal and financial services. We provide patient care and caregiver advocacy bedside with families who spend hours in the ER, ICU, CCU, SNF, assisted and memory care, and during the final stages of life, while the care recipient is on hospice. SW will answer crisis calls off work hours and during holidays, to help solo caregiver clients who lack the support of friends or relatives. We affirm caregivers by helping them cultivate self -care practices, obtain respite. We help them develop their "Bill of Caregiver Rights" navigate loved one's transition to higher levels of care. |
| Goal #3 Transportation Assistance 1) | Provide transportation assistance to 200 older adults through Avenidas Door to Door, Avenidas Volunteer Corps, and the ARKC. | The Door to Door Program provides volunteer rides from our 9 volunteer driver and 1 part time paid driver, using Lyft as a backup provider of rides when driver schedules are full or to go beyond our geographical limits (volunteers use their own cars). We added on delivery of durable medical equipment from Avenidas' loan closet to seniors who cannot come to the center for pick up. We also have added on a partnership with the south Palo Alto food closet to deliver donated groceries to homebound seniors. We continue the grocery delivery efforts that first started during the pandemic. Door to Door serviced 190 clients this first six months of the fiscal year. |
| | | Avenidas Rose Kleiner Center coordinated transportation for 81 individuals through four different transportation options; VTA Access Paratransit, Avenidas Door to Door Program, Contracted Provider and El Camino Road Runners. |
| 2) | Provide 2,500 one-way trips through Avenidas Door to Door | 2,593 services were provided through Door to Door staff and volunteers. The City of Palo Alto recently granted Avenidas with an Emerging Needs Fund grant. These funds will go to increasing services these next six months to further meet the needs of homebound, frail older adults. Funds were used to attract new volunteers. |
| 3) | Provide 15,000 one-way trips through ARKC | ARKC staff has been scheduling safe transportation to and from the center and have seen an increase in transportation needs. We have four vendors that we use to provide transportation. Appropriate transportation is |

| | NARRATIVE OF QUANTITA | TIVE PERFORMANCE MEASURES |
|---------------------------------------|--|--|
| Goal #/ Objective # | Performance Measures | Provide a description of how the objective was met, specific activities conducted and measuring tools utilized for this reporting period, if any. |
| | | assessed by social worker and is determined by cognitive and physical abilities. |
| Goal #4 Focus on Isolated 1) | Provide enrichment classes, services, and workshops to 1,500 individuals through Avenidas @450 Center, Avenidas Chinese Community Center @ Cubberly and online @ Avenidas Without Walls (unduplicated individuals) | This is the number of unduplicated people who participated in: classes, workshops, clubs, and special events (see below for details) and who received services such as SALA (legal), tax counseling, HICAP (Medicare counseling), therapeutic nail care, massage, reiki, and/or used the medical equipment loan closet. |
| 2) | Provide enrichment classes to 4,000 individuals through Avenidas @450 Center, Avenidas Chinese Community Center @ Cubberly and online @ Avenidas Without Walls (registrations) | This number reflects the total number of registrations in the programs offered at 450 Bryant Street (Lifelong Learning & Leisure, health & Wellness, Technology Plus), the Avenidas Chinese Community Center, and the Avenidas Rainbow Collective. Classes: fitness, wellness, fall prevention, art, crafts, music, drama, bridge instruction, technology, writing, mobile photography, current events, and more. Workshops: health topics, driver safety, photo journeys, safe driving, brain games, technology (including privacy and fraud/scam prevention), other general interest topics. Clubs: hiking, walking, needlework, art/crafts, chess/Mah Jong/bridge, music, book clubs, reading clubs, movies, LGBTQ specific. Special events: cultural/holidays, meet-ups, social/tea/appreciation. |
| 3) | Provide volunteer opportunities to 350 volunteers through Avenidas Volunteer Corps | The Avenidas Volunteer Corps is comprised of approximately 309 volunteers who provide services at all three Avenidas sites, do work in the community, serve on committees, help with events, tutor children, provide rides and MedPal support, tech tutoring, support LGBTQ outreach, teach classes, serve on the board and support staff administratively. |

| | UNMET PERFORMANCE MEASURES | | | | | |
|------------------------|--|--|--|--|--|--|
| Goal #/ Objective # | Unmet Performance Measures | Provide an explanation of why the objective is not being met and the corrective action taken to address the problem. | | | | |
| Goal #4, Obj #3 | We have 309 current volunteers across all functions, reduced from our goal of 350. | Our volunteers are all working many hours collectively and this makes up the shortfall of our goal but our hope is to have higher numbers of | | | | |

| | UNMET PERFORMANCE MEASURES | | | | |
|------------------------|----------------------------|--|--|--|--|
| Goal #/ Objective # | Unmet Performance Measures | Provide an explanation of why the objective is not being met and the corrective action taken to address the problem. | | | |
| | | volunteers, especially for our transportation program. We have placed ads, using social media, and using our e-blast to attract additional volunteers. | | | |
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UNMET CLIENT NEEDS

Please discuss any unmet client needs your agency has identified during this period. If none, please explain.

Through calls coming in to the Avenidas Door to Door program, we have identified that there are people living alone, or with limited family support, requiring more hands-on one on one transportation assistance. We applied to the City of Palo Alto's Emerging Needs fund to help grow our program and services to try to meet this unmet need. Door to Door has attracted new volunteers and is working to train and place them to help with this community gap that has emerged since the pandemic.

| PROGRAM STAFFING LEVELS | | | | |
|---|---------------------------------|-----------------------------------|---|--|
| Staff Position/Program | Effective Date of Vacancy | Effective Date Position Filled | Please indicate staff changes and discuss implications on service levels, if any. | |
| All positions filled for above services | | | | |
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| PROGRAM STAFFING LEVELS | | | | |
|---------------------------|---------------------------------|-----------------------------------|---|--|
| Staff Position/Program | Effective Date of Vacancy | Effective Date Position Filled | Please indicate staff changes and discuss implications on service levels, if any. | |
| | | | | |

AGENCY CHALLENGES

Please discuss any challenges you may be facing agency wide that may impact the provision of your programs and services.

Like many non-profits, we continue to have challenges with workforce issues, reaching our fundraising goals to allow for balanced budget and funds left for growth and innovation. Looking ahead, we are facing a 200% increase in the older adult population in our area and will need to greatly increase our capacity to meet the changing demographics and increasing needs of this population, and develop strong partnerships with other organizations to achieve this goal.

NARRATIVE STORIES

Please provide narrative stories that illustrate the impact that the city funding has made on your clients and families (Excluding real names).

ARKC Participant is diagnosed with Parkinsons, Mild Cognitive Impairment, Depression, Asthma, Osteoporosis and Hypertension. She lives with her husband, primary caregiver. In December, 2023, the day before she was scheduled to start the program she had a serious fall at home and it resulted in an emergency room visit. The Registered Nurse provided guidance and assisted to ensure when it was safe for her to begin attending the Center. The Social Worker provided support and conducted a home visit with the Physical Therapist. They provided information on how to prevent falls at home. She was able to start attending the program2 days per week. She has been thriving at the Center, actively engaging in activities and receives nursing care as needed, regular Physical Therapy maintenance, nutritious meals, and has made new friends. Spouse/Primary Caregiver is receiving much needed respite and support as he gets 4 days of respite. Transportation is also provided. In April they increased her attendance to 4 days per week. She has not had any ER visits or Falls since enrolling in the Center.

Long-time Door to Door client was found to not be answering the door or phone. Door to Door team checks on many clients during the week, especially those with limited family support. Manager called for a wellness check and after much effort, client was found on the floor. Client was transferred to the hospital to receive much needed care. Avenidas services are integral to the Palo Alto and surrounding communities, to support our older adults and their families.

| NARRATIVE STORIES |
|---|
| Please provide narrative stories that illustrate the impact that the city funding has made on your clients and families (Excluding real names). |
| YEAR END COMMENT FY23_24: In addition to the class/workshop/event registrations in FY 23_24, 41 individuals received Medicare counseling through HICAP, 42 people had meetings with Senior Adult Legal Assistance attorneys, 251 people received tax counseling from the AARP Tax Foundation, and 384 pieces of durable medical equipment were loaned to people in need. Loan closet recipients are especially grateful to be able to borrow equipment for the long or short term. Borrowers include post-surgery patients, people with injuries or chronic conditions, and those wanting to safely accommodate visiting relatives to name a . Donated equipment is accepted, thoroughly cleaned, tested for safety, and inventoried by center staff. Staff help borrowers identify what equipment they need if they aren't sure and show them how to use the equipment. If someone is home-bound, Avenidas door-to-door drivers are available to deliver the equipment. Equipment is free for anyone to |
| borrow (wheelchairs require a \$25 refundable deposit which can be waived). |
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FINANCIAL STATEMENT

Please attach a copy of your agency's semi-annual financial statement.

For more information:

Please contact Alayna Cruz at: (650) 463-4906 Fax: (650) 856-8756 Mailing address: 4000 Middlefield Road T-2, Palo Alto, CA 94303 Email: Alayna.cruz@cityofpaloalto.org