

**District 5: Lane County**

**SUMMARY OF PROPOSED  
2006-07 Component  
of the  
AREA PLAN ON AGING & DISABILITY SERVICES  
for  
July 1, 2003 - December 31, 2007**

**For Progress Toward  
A Comprehensive and  
Coordinated Service System  
for Seniors and People with Disabilities**

**Senior & Disabled Services,  
a division of Lane Council of Governments**

(The Area Agency on Aging and Disability Services for Lane County, Oregon)  
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February 2006

**NOTICE OF PUBLIC HEARING**  
**on the**  
**2006-07 COMPONENT**  
**of the**  
**2003-07 AREA PLAN ON AGING AND DISABILITY SERVICES**  
**for**  
**LANE COUNTY, OREGON**

The draft 2006-07 Area Plan for senior and disability services will be available for public review at a hearing on **February 21, 2006 (Tuesday), from 1:30 p.m. to 2:30 p.m.** The hearing will be held at **Hilyard Community Center, 2580 Hilyard Street, Eugene, Oregon.**

Senior & Disabled Services (S&DS), a division of Lane Council of Governments, in its capacity as the Area Agency on Aging and Disability Services for Lane County, is the convener of this public hearing.

The hearing offers older people, people with disabilities and members of the public an opportunity to comment on S&DS= plans for the provision of services to older people and people with disabilities between July 1, 2006 and June 30, 2007.

Public comments on the draft Area Plan will be accepted through 2:30 p.m., February 21, 2006. Comments may be given orally or in writing at the hearing, or may be presented in written form to S&DS at the address noted below by 5:00 p.m., February 20, 2006.

Senior & Disabled Services  
ATTN: Kay Metzger  
1015 Willamette Street  
Eugene, OR 97401

The location of the hearing is wheelchair accessible. For the hearing impaired, a sign language interpreter will be provided with 48 hours notice prior to the hearing. Similarly, with advance notice, large print and other formats of the Summary of the 2006-07 Area Plan are available. Requests for these services can be made to S&DS at the address noted above, or by calling S&DS at one of the following phone numbers: 682-4498, 1-800-441-4038 or TTY 682-4567.

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## **Introduction**

### **Overview of Senior & Disabled Services:**

Lane Council of Governments (LCOG) is a voluntary association of general and special purpose governments in Lane County. The Council was formed in the mid-1940s to coordinate and provide intergovernmental and region-wide services. It is governed by a board of directors comprised of elected officials from twenty-seven (27) public agencies in the area. Among its many responsibilities, LCOG is the designated Area Agency on Aging and Disability Services for Lane County. Within LCOG, operational responsibility for services for senior citizens and people with disabilities rests with Senior & Disabled Services (S&DS) and two citizen advisory councils - the Senior Services Advisory Council and the Disability Services Advisory Council.

The mission of S&DS is:

*To advocate for seniors and people with disabilities and provide to them quality services and information that promote dignity, independence, and choice.*

S&DS currently provides a wide range of services to seniors and people with disabilities. S&DS employees provide many of these services; others are provided by organizations working under contract to S&DS.

### **Development of the Area Plan:**

In accordance with federal and state policy, S&DS is required to help create and maintain a comprehensive and coordinated service delivery system to meet the needs of older and disabled people in Lane County. To document its work toward this goal, S&DS is required to develop an Area Plan on Aging and Disability Services. The Area Plan is a multi-year document, with annual updates. It serves two purposes: (1) it is a planning document -- it identifies the needs of seniors and adults with disabilities, and describes the agency's plans for addressing these needs; and (2) it is a compliance document which provides the basis for the State of Oregon to contract with LCOG for the delivery of a range of services to older people and people with disabilities.

Program Year 2003-04 (July 1, 2003 B June 30, 2004) was the first year of the current Area Plan cycle. To prepare for this cycle, in 2002 S&DS completed an assessment of the needs of seniors and people with disabilities who live in Lane County. Since then, there have been dramatic reductions in the availability of services for both populations. In recognition of this fact, S&DS updated portions of its 2002 assessment in the summer of 2004. The contents of the Program Year 2006-07 Component to S&DS= 2003-07 Area Plan on Aging and Disability Services are guided by the findings and recommendations of the 2004 update to the 2002 assessment.

The development of the 2006-07 Component to the Area Plan was a joint effort involving staff and members of S&DS' Planning & Budget Committee, a standing committee of LCOG's two advisory councils. Work started in October 2005. First, the Committee was briefed on the findings and recommendations of the 2002 needs assessment and its 2004 update, as well as on the progress being made to accomplish the objectives in the current year component of the Plan. Second, it received preliminary information from staff on the availability of federal and State revenues for the 2006-07 program year. Based on both sets of information, it developed recommendations covering the key policy elements of the 2006-07 Component to the Area Plan, notably, the budget and objectives for the year.

This Summary of the 2006-07 Component to the Area Plan contains the following information:

- X Information on the needs of seniors and people with disabilities in Lane County;
- X Proposed Budget for 2006-07;
- X Proposed Service Delivery Plan for 2006-07;
- X Proposed Objectives for 2006-07; and
- X General information on S&DS, a division of Lane Council of Governments.

## **Information on the Needs of Seniors and People with Disabilities in Lane County**

To complete its 2002 assessment of the needs of seniors and people with disabilities, Senior & Disabled Services compiled and analyzed data from a variety of sources, including the 2000 U.S. Census, a 1998 needs assessment conducted by United Way of Lane County, S&DS client and service data, and secondary sources. It also sought input from community members, including consumers, providers of services, and government officials. From this work, demographic profiles for both populations were created, needs were identified, and recommendations developed. Key elements of this Assessment follow.

### **Demographic Information:**

- \$ There were 42,954 seniors (65+) in Lane County in 2000. Between 1990 and 2000, the number of Ayounger@ seniors (65-74 years of age) decreased by 361 persons, while the number of Aolder@ seniors increased by 6,257.
- \$ Seventeen percent, or 36,321, of Lane County residents, aged 16-64, living in the community, have some form of a disability.
- \$ The most frequent primary diagnoses for S&DS= younger disabled community-based, long-term-care clients are neurological, musculoskeletal, cardiovascular, and psychiatric impairments. S&DS= senior community-based, long-term care clients= most frequent primary diagnoses include cardiovascular, psychiatric, musculoskeletal, and endocrine disorders.
- \$ According to the 2000 Census, 14% of the residents of Lane County live in poverty. Of those 65+ years of age, 7.5% are low income. In contrast, the majority of S&DS clients, both seniors and people with disabilities, live at or near the poverty level.
- \$ The percentage of minority clients in S&DS= caseload appears to be low, when compared with Census data. However, it must be noted that Census data are not age specific, and many of S&DS= clients are over the age of 60.

### **Summary of Needs, as Identified in 2002:**

Based on the available data, S&DS concluded that seniors and people with disabilities were experiencing similar problems. While their needs were not identical, their top areas of concern were as follows:

- # Financial problems, including not having adequate funds to pay for doctors, dentists, pharmacy costs, medical insurance, legal assistance, clothing, utilities, housing, food, and recreation.
- # Problems with budgeting.
- # Cognitive and emotional problems.
- # Problems obtaining information on available resources and services, including fraud alerts.
- # Caregiver problems.
- # Problems obtaining transportation, including special transportation services.

As noted on Page 3 above, these findings were reached prior to the implementation of significant service cuts by the State of Oregon in response to a significant shortage of funds. Subsequent to the completion of this needs assessment, Oregon voters rejected Ballot Measure 28 and, in response, severe cuts to senior and disability services were implemented. In order to forestall further cuts, as well as to restore essential services, the 2003 State Legislature enacted a revenue enhancement package which involved a combination of temporary and permanent tax increases. This plan was referred to the voters as Ballot Measure 30. In February 2004, the voters soundly rejected it. As a result, most of the service cuts implemented in 2003 remained in place and additional cuts to Oregon Health Plan services were made.

#### **2004 Needs Assessment Update:**

Given the service reductions referenced above, S&DS' Advisory Councils asked agency staff to reconvene the focus groups consulted in 2002 to ascertain the impact of service cuts on seniors and people with disabilities. In response, participants who attended the 2002 focus groups were invited to attend similar groups in the summer of 2004. Based on their input, S&DS determined that the needs of both populations continue to be substantially similar to those identified in 2002. Notwithstanding this fact, the 2004 participants put far more emphasis on the importance of the agency targeting its resources on the provision of information, referral, and assistance for the purpose of helping people access available services from all public and private sources, including pharmaceutical manufacturers. In addition, they urged the agency to allocate more funds for group meals, meals on wheels, transportation, and in-home services for people not eligible for Medicaid.

## Area Plan Budget for 2006-07

The budget set forth in this document focuses exclusively on the funds that S&DS receives from Oregon's Department of Human Services (DHS) via the Area Plan Contract. These funds are derived from three sources: Older Americans Act, Type B AAA Funds (including Medicaid, Food Stamps, and Oregon General Funds), and a State in-home services program known as "Oregon Project Independence" (OPI). Information on the permitted uses of these funds is presented below. This information is followed by specific budget information for 2006-07, including anticipated revenues and recommendations for the use of these funds for the delivery of services in Program Year 2006-07.

(Note: In addition to the funds identified in this document, each year S&DS receives and uses funds from a variety of other sources, including grants, contracts, fees, contributions from program participants, and donations. The agency has little decision-making control over the use of most of these revenues; they must be spent for the purposes prescribed by the funding sources and/or grantors.)

### Permitted Uses of Area Plan Contract Funds:

#### OLDER AMERICANS ACT (Federal funds):

##### Title III-B: Support Services and AAA Administration, including:

##### 1. Federal Priority Services:

\$ Access Services: transportation, including assisted transportation (a.k.a. "escort"); outreach; information and assistance; and case management;

\$ In-home Services: home care; personal care; friendly visiting; telephone reassurance; chore; coordination of in-home volunteers (a.k.a. "ElderHelp"); and in-home support services (such as, respite); and

\$ Legal Services

2. Other allowable services: Virtually all supportive services, other than meals, are allowable under OAA Title III-B. In addition to the "federal priority services" listed above, S&DS currently spends III-B funds on: AAA Administration, Money Management, Mental Health Counseling, and support to the Long Term Care Ombudsman Program.

##### Title III-C-1: Group Meals and AAA Administration.

Title III-C-2: Home-Delivered Meals (a.k.a. AMeals on Wheels®) and AAA Administration.

Title III-D: Health promotion, disease prevention and prescription medication services. Federal law requires that a minimum of 23.6% of OAA III-D funds be spent on medication services. S&DS currently uses its Title III-D funds for mental health counseling and prescription drug assistance services.

Title III-E: Family Caregiver Support Services and AAA Administration. S&DS= current plan for the use of III-E funds calls for the provision of the following services to eligible individuals and families: information, assistance, caregiver training, counseling, organization of support groups, respite, and supplemental services.

Title VII-A: Elder abuse prevention services.

TYPE B AAA FUNDS (a blend of federal and State funds, including Medicaid, Food Stamps, and State funds):

These funds are utilized for eligibility determination, benefits issuance, case management, protective services, the licensure and monitoring of adult foster care homes, and AAA Administration. These funds may not be used for direct services.

OREGON PROJECT INDEPENDENCE, or AOPI® (State funds):

OPI can be used for the services listed below. Of these, S&DS currently funds: Home Care, Personal Care, Meals on Wheels, Money Management, Case Management and AAA Administration.

\$ Home Care, including Money Management

\$ Personal Care

\$ Chore Services

\$ Assisted Transportation/Escort Services

\$ Meals on Wheels

\$ Case Management

\$ AAA Administration

Note: The Oregon Legislature enacted SB 870 in 2005. This act expanded the range of services which can be funded with OPI dollars, and made adults with disabilities (18-59 years) eligible for its services. However, until administrative rules from the

implementation of this act are drafted by Oregon's Department of Human Services, S&DS is limited to funding the services listed above, and to serving those individuals eligible for OPI services prior to 2005, namely, older people and individuals younger than 60 years of age with dementing illnesses.

### **Revenues for 2006-07:**

The revenue picture for the upcoming fiscal year looks reasonably good. S&DS anticipates that available resources for Program Year 2006-07 will be 1% - 2% higher than for the current year. Regarding federal Older Americans Act revenues, initial projections for the six different "titles" show a collective decrease of one percent (1%). These estimates are based on information obtained from Oregon's Department of Human Services (DHS). Unfortunately, they were developed prior to the recent approval by the U.S. Congress of a one percent (1%) across-the-board cut to federal "discretionary" spending for federal fiscal year 2006. How this Congressional action will impact the revenue numbers supplied to S&DS by DHS remains to be seen. Therefore, S&DS' Planning & Budget Committee elected to utilize the DHS-supplied estimates for Older Americans Act revenues, with the understanding that a revised budget may need to be developed later in the year, once firm revenue figures are available.

Concerning Oregon Project Independence (OPI), S&DS anticipates receiving approximately \$95,000 more than in the current year. This amount represents an eighteen percent (18%) increase, moving OPI revenue up from \$520,000 (current year) to \$614,786 (next year).

Finally, S&DS estimates that its Type B AAA Funds will be 5.8% higher than in the current fiscal year. This translates into an actual dollar increase of \$372,027 for the year.

Anticipated revenues for Program Year 2006-07 are displayed in the table on the top of the next page. In addition to showing the revenues that S&DS projects to be available for the upcoming year, the table provides comparative information based on the agency's current year budget.

REVENUE SOURCE	Estimated Revenues - Fiscal Year 2006-07			Changes from 2005-06	
	New Revenues	Carry-over Funds	Total Funds	\$	%
Older Americans Act	\$ 1,339,163	\$ 0	\$ 1,339,163	(\$ 11,536)	-1 %
Oregon Project Independence	614,786	0	614,786	94,786	18 %
Type B AAA Funds	6,738,179	0	6,738,179	372,027	6 %
<b>TOTALS</b>	<b>\$ 8,692,128</b>	<b>\$ 0</b>	<b>\$ 8,692,128</b>	<b>\$ 152,644</b>	<b>2 %</b>

### **Recommended Expenditures for 2006-07:**

At the beginning of the budget development process, the Planning & Budget Committee provided the following directions to S&DS staff:

- Provide funds for all currently-funded programs.
- Regarding the use of Older Americans Act III-D (Disease Prevention and Health Promotion) funds, allocate them for the support of medication assistance services, including: Medicare Part D education and enrollment assistance, assistance with the enrollment in pharmaceutical manufacturers' prescription assistance programs, performance of medication assessments, and management of medication dispensing devices.
- Given the anticipated reduction in Older Americans Act revenues, do not provide additional funds to all programs to off-set the impact of increasing costs (i.e., inflation). Rather, as funds allow, budget increases to programs on a case-by-case basis.
- Attempt to reduce all Older Americans Act-funded programs by the same percentage.

Based on these directions, staff developed an initial version of the 2006-07 budget. It was presented to the Committee in early January 2006. After careful review, the Committee accepted it as the preliminary draft budget for 2006-07 and authorized staff to use it in the development of the Proposed Area Plan Update, which is now subject to public review.

The proposed budget for 2006-07 is displayed in the table below.

**Proposed Program Year 2006-07 Area Plan Budget**

Program	Spent in FY04-05	Current Year Budget	Proposed FY06-07 Budget	Differences: Next Year to Current Year	
				Funds	Percent
AAA Administration	\$ 160,794	\$ 190,526	\$ 190,891	\$ 365	100.2%
LTC Ombudsman Support	1,222	1,254	1,243	(11)	99.1%
Information & Assistance	96,825	126,605	125,466	(1,139)	99.1%
OAA Case Management	96,826	126,605	127,290	685	100.5%
Caregiver Services (S&DS)	216,833	225,028	221,179	(3,849)	98.3%
Medication Assistance	5,078	26,920	28,992	2,072	107.7%
Rural Escort	9,943	10,206	10,114	(92)	99.1%
Legal Services	57,349	58,869	58,339	(530)	99.1%
Group Meals	318,002	326,429	323,491	(2,938)	99.1%
Meals on Wheels (Red Cross)	100,876	114,365	114,336	(29)	100.0%
Meals on Wheels (S&DS)	186,478	200,266	199,664	(602)	99.7%
ElderHelp	15,264	15,653	15,512	(141)	99.1%
Bill Payer / Money Mgmt.	14,393	16,277	16,231	(46)	99.7%
Mental Health Services	30,518	0	0	0	
Elder Abuse Prevention	3,408	7,500	9,811	2,311	130.8%
OPI Case Management	128,939	104,000	107,224	3,224	103.1%
Home Care	133,460	179,190	229,500	50,310	128.1%
Personal Care	87,267	121,810	155,423	33,613	127.6%
CEP Home & Personal Care	4,884	5,500	5,671	171	103.1%
Caregiver Counseling (CHS)	0	2,265	2,245	(20)	99.1%
Caregiver Training (CHS)	0	11,431	11,328	(103)	99.1%
Type B AAA Services	7,896,051	6,366,152	6,738,179	372,027	105.8%
Medicare D Enrollment	0	302,633	0	(320,633)	
<b>TOTALS</b>	<b>\$ 9,564,410</b>	<b>\$ 8,539,484</b>	<b>\$ 8,692,128</b>	<b>\$ 152,644</b>	<b>101.8%</b>

## Services to be Delivered in 2006-07

Implementation of the proposed budget should result in the delivery of services to older people and people with disabilities in Program Year 2006-07, as shown in the table on the next page. In that table, no service data are displayed for the services funded by the Type B AAA Funds. Rather than using units, these services are measured in terms of caseloads and regulatory activities.

Statistics on caseloads at the end of December 2005 are listed below:

Community-Based Long Term Care	1,900 cases
Nursing Home Care	498 cases
State (Medicaid) Plan Personal Care	236 cases
Medical Assistance	7,266 cases
Food Stamps	5,727 cases

During 2004-05 (the most recent period for which data are available), Type B AAA-funded S&DS staff performed the following regulatory and protective services work:

Licensed and monitored 245 Adult Foster Care homes.

Completed 4,478 criminal history checks on client employed providers and on owners, operators and staff in adult foster care homes.

Received and processed 1,841 complaints of abuse, neglect, or exploitation of seniors or people with disabilities. One thousand one hundred and seven (1,107) of these complaints resulted in formal investigations, including 735 (67%) involving individuals living in community settings outside of licensed facilities. The balance of investigations focused on individuals residing in licensed long term care facilities (nursing homes, adult foster homes, and various types of residential and assisted living facilities).

### Units of Service to be Delivered in 2006-2007

Program	Units of Service	Unit of Service Definition
LTC Ombudsman Support	450	One visit
Information & Assistance	42,900	One contact
OAA Case Management	1,300	One case
Caregiver Services (S&DS)	11,500	Various definitions
Medication Assistance	250	One person served
Rural Escort	33,000	One person one-way ride
Legal Services	3,250	One hour
Group Meals	75,000	One meal at a dining room
Meals on Wheels (Red Cross)	56,000	One home delivered meal
Meals on Wheels (S&DS)	58,500	One home delivered meal
ElderHelp	4,300	One hour
Bill Payer / Money Mgmt.	1,600	One contact
Elder Abuse Prevention	10	One training or coordination activity
OPI Case Management	191	One case
Home Care	9,000	One hour
Personal Care	5,000	One hour
CEP Home & Personal Care	550	One hour
Caregiver Support Group (CHS)	1,500	One person served
Caregiver Training (CHS)	300	One person served
Type B AAA Services	Not Applicable	See note on previous page

## **Area Plan Objectives for 2006-07**

The annual work program of the staff and advisors of S&DS includes a range of activities, most of which are prescribed by virtue of the agency's status as the Area Agency on Aging and Disability Services for Lane County. However, each year the division has some flexibility to undertake special studies and projects (a.k.a. Objectives) directed at improving the lives of seniors and people with disabilities and/or enhancing the efficiency and effectiveness of the service delivery system. Recommended special studies and projects for 2006-07 are listed below.

1. Continue to assist seniors and people with disabilities secure prescription drug benefits under Part D of Medicare and assistance programs operated by pharmaceutical manufacturers.
2. Update S&DS' disaster preparedness plan and, as part of this work, coordinate S&DS' plans with local public and private non-profit agencies.
3. In preparation for the development of the 2008-2012 Area Plan on Aging and Disabilities, re-assess the needs of Lane County's seniors and people with disabilities.
4. Continue to pursue activities designed to generate non-public sources of support for services for seniors and people with disabilities.
5. Continue outreach efforts directed to minority seniors.
6. Develop and implement an educational campaign to encourage adults to take more responsibility for the financing of their own long term care.

## **General Information on Senior & Disabled Services**

### **The responsibilities of Senior & Disabled Services:**

1. Core Functions (responsibilities of all Area Agencies on Aging in USA)
  - a. Identify the needs of seniors and, locally, people with disabilities.
  - b. Develop and implement plans to address these needs.
    - X Coordinate existing services and develop new services, as needed.
    - X Advocate on behalf of seniors and people with disabilities.
  - c. Manage public resources.
  - d. Help people get the services they need (Information and Assistance).
2. Oregon Type B(2) Aging and Disability Agency Functions (additional responsibilities of all Oregon Type B-2 agencies)
  - a. Determine individuals= eligibility for medical and financial assistance.
  - b. Determine individuals= need and eligibility for long term care service.
  - c. Assess individuals= need for nursing home placement.
  - d. Provide case management services to people receiving long term care services, medical assistance, and financial assistance, including food stamps.
  - e. Enroll seniors and people with disabilities in the Oregon Health Plan.
  - f. Investigate complaints of abuse and provide protective services.
  - g. License and monitor adult foster care homes.
3. Special Responsibilities of Senior & Disabled Services
  - a. Operate the Senior Meals Program.
  - b. Operate the Senior Connections Program, including the provision of medication assistance to seniors and Family Caregiver services to eligible unpaid caregivers.

### **The Services System**

In broad terms, S&DS provides a single point of entry to many government-sponsored services for seniors and people with disabilities. At a practical level, services are provided through a county-wide network of local offices and sites staffed by S&DS employees and volunteers, or by personnel from other organizations working under contract to LCOG. A list of S&DS offices appears later in this Area Plan Summary. A person seeking help may call or visit any of these offices for assistance.

Services provided to seniors and people with disabilities fall into four main categories:

1. Long Term Care Services: S&DS staff assess a person's need for long term care services and his/her eligibility for government-sponsored care. Based on assessment findings, a coordinated plan of care is developed and implemented. Ongoing care coordination/case management is provided to respond to a client's changing needs.

Long term care services range from help with housekeeping, to assistance with personal care (e.g., bathing, dressing), to complete dependence on others for all aspects of daily living. These services can be provided in a variety of settings, depending on the individual's needs and resources. Service settings include clients= homes or apartments, adult foster homes, assisted living or residential care facilities, or nursing homes. S&DS staff can authorize placement and services in any of these settings.

Long term care services are funded by Medicaid (a.k.a., Title XIX) and Oregon Project Independence.

**NOTE:** Due to budget constraints, eligibility for these services was tightened significantly in 2003. Thus, some people, especially those still in their own homes and apartments, are no longer eligible for publicly-funded long term care services.

2. Older Americans Act Programs: S&DS staff and contract providers deliver a range of services to seniors, including information and referral, short term assistance, case management for people not eligible for Title XIX and OPI, group and home-delivered meals, legal assistance, transportation, medication assistance services, in-home services, support for unpaid family caregivers, and bill paying/money management services.

These services are funded with Older Americans Act resources.

3. Elderly and Disabled Protection: S&DS staff provide protective services and investigate reports of abuse of elders and people with disabilities. S&DS staff also license and monitor adult foster homes, and completes criminal history checks of people working with older and disabled people in their own homes or in adult foster homes.

These services are funded with Medicaid and State General Fund dollars.

4. Cash and Medical Assistance: S&DS staff determine eligibility for seniors and people with disabilities to enable them to receive Medical Assistance, Food Stamps (via the Oregon Trail Card), and payment for a variety of special needs through the Oregon Supplemental Income Program. S&DS staff also enroll seniors and people with disabilities in managed care through the Oregon Health Plan.

These services are funded with Medicaid and Food Stamp Program resources.

**Services may be secured from S&DS at any of the following locations** (with the exception of the toll-free number, all numbers are within area code 541):

- A. Main Office  
Senior & Disabled Services 682-4038  
1015 Willamette Street 1-800-441-4038  
Eugene (TTY 682-4567)
  
- B. Full Service Satellite Offices
  - X South Lane Office  
Senior & Disabled Services 942-5577  
37 N. 6th. Street (TTY 682-7821)  
Cottage Grove
  - X Coast Office  
Human Resource Office 902-9430  
3180 Hwy. 101 N.  
Florence
  
- C. Community Offices
  - X Tony Garcia Service Center 935-2262  
88149 Territorial Road, Veneta
  - X Viking Sal Senior Center 998-8445  
245 W. 5th Street, Junction City
  - X Willamette Activity Center, Room A 782-4726  
47674 School Street, Oakridge

## **People Served by Senior & Disabled Services**

Senior & Disabled Services helps the various groups within the senior and disabled populations differently. With respect to S&DS= "core functions" (planning, service coordination and development, advocacy and information/access services), the agency serves all older and disabled residents of Lane County. Concerning its other functions and services, S&DS focuses on people in economic and social need, including frail, vulnerable, functionally impaired, socially isolated, and economically disadvantaged people. Special consideration is given to serving low income minority older people.

There are approximately 323,000 people in Lane County (2000 Census). Seniors 65 years of age and older number 42,954 and account for thirteen percent (13 %) of the total Lane County population. Approximately 36,300 of the Lane County residents are people (non-institutional, ages 16-64) who have some form of a disability.

S&DS serves approximately 18,000 seniors and people with disabilities each year. Individuals receive a variety of services, ranging in complexity from relatively straightforward Information and Referral (I&R) to highly specialized nursing home services. Based on available program statistics, the majority of senior clients served by S&DS are white, female, and living at or near the federal poverty level. Many of these clients live in the community and receive in-home services.

Each year, S&DS estimates that it serves 9,000 people with disabilities. Of these, 8,500 are age 18 to 64 and receive financial or medical assistance; the balance receives long-term care services in addition to financial and medical assistance. Program statistics suggest that S&DS serves nearly equal numbers of male and female individuals with disabilities.