

Senior Services Coalition of Alameda County

AGING IS SOMETHING WE ALL HAVE IN COMMON

PANDEMIC AND POLICY IMPACTS ON OLDER ADULTS AND THE ORGANIZATIONS THAT SERVE THEM September 28, 2020

The impact of the COVID-19 crisis on older adults in Alameda County is staggering. CBOs witness every day the distress and disruption that the pandemic has caused older adults who were already grappling with economic, housing and food insecurity, health and mobility challenges, and the task of navigating complex systems. Older adults in every city have been destabilized.

The crisis has increased the need for supportive services. Seniors and caregivers who were already receiving services have needed additional help as their resources and support networks have toppled. Many more seniors who have never before used community-based services now rely on these lifelines. Senior Services Coalition has conducted periodic field studies since April,¹ focused on Older Americans Act (OAA) services, and we found that:

- Calls from older adults to crisis lines are up 138%. Referrals from hospitals and APS to community-based case management programs have doubled.
- The number of seniors receiving services from food providers has increased by over 50%. The OAA congregate meal program – now “grab and go” – has increased 57% since the start of the pandemic, from 3,500 to 5,500 meals per week. The OAA home delivered meal program has increased 38%, from 11,600 to 16,000 meals weekly. Mercy Brown Bag is serving about 1,000 more seniors a week than normal.
- Many supportive services programs have seen their participant numbers increase 50 to 75%; while others are serving fewer people but with more services.
- Many people who were engaged in community-based activities are now sedentary and losing muscle strength, balance, and pulmonary function, increasing their vulnerability to falls and infection and exacerbating chronic conditions.
- Shelter-in-place has increased the burden on and support needs of family caregivers, especially those caring for people with significant medical needs and cognitive decline.
- Digital divide issues – equipment, internet connection, and skills – are keeping many people unnecessarily isolated and unable to take advantage of the many opportunities to connect with family, friends, doctors, services and community.

Over the past six months, CBOs have tapped every available resource in order to increased capacity and adapt delivery models to respond to the needs of communities in crisis. Our study has found that:

- CBOs have dialed up collaboration and are working in communities in every city with other CBOs, the food bank, pantries, senior/community centers, churches and hospitals to deliver groceries, meals, telephone reassurance, caregiver support, case management and much more.
- To increase capacity as the number of people and acuity of need has grown, CBOs raised new grant and donor funds, secured Federal PPP loans, repurposed funds and tapped into their reserves.

¹ Our field studies and surveys have focused on the community-based services provided under the Older Americans Act (OAA) and Alameda County Measure A.

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- Senior Nutrition providers used County Measure A and federal Families First emergency funding to increase capacity. Many other CBOs are also providing food using multiple funding sources, including flexible OAA IIIB dollars.

As the pandemic unfolds along with its economic, health and social fallout, the number of older adults needing help remains high. But funding to maintain increased capacity going forward is problematic.

All the CBOs we've spoken with indicate that they will be unable to maintain capacity to continue meeting the current expanded level of need without supplemental funding.

- The Families First dollars that has helped to pay for the emergency Senior Nutrition meals – an increase of 5,200 meals per week from pre-COVID numbers – is running out.
- Meals on Wheels providers have identified high risk individuals who need two meals a day; but meeting this need will be impossible without CARES Act or other additional funding.
- Without a new source of funding, at least 1,922 people will be waitlisted or lose services.²

Alameda County released an RFQ for Federal Emergency CARES Act funding for Older Americans Act programs – a decision creating delays and uncertainty. CBOs that provide Older Americans Act services are counting on CARES Act dollars to sustain their emergency response efforts this year and in 2021. But the RFQ is open, competitive, and to date no funding has been awarded. **We are concerned that existing older adult providers may not receive the funding they need, and will be forced to cut staff, reduce the number of people served, or limit services.**

CARES Act funding will not last. Looking at the impact that even a short delay in this federal funding will have on the community, we are also glimpsing the future. When the CARES Act money is spent, unless additional investments are queued up CBO's will lose the capacity to respond to the emerging and ongoing crisis in their communities.

While most aging services were spared cuts in California's recent 2020/21 Budget, supportive services administered by the California Department of Aging received a surprise 15% cut. This comes at a time when these programs should be expanded, as they are some of the few services available to people who are "not poor enough" to qualify for Medi-Cal and other supports. The cut has impacted 18 organizations in Alameda County and is forcing reductions in visiting, health promotion, adult day care, Information & Assistance, legal services and case management. Especially troubling, case management is already in short supply and is critically needed to serve elders in crisis who are not Medi-Cal eligible, but it was not included in the County's CARES Act RFQ.

California's budget will be under increasing pressure as pandemic-induced job losses and business closures drag down tax revenues. Without protections, aging services will face devastating cuts in 2021.

In this moment of pressing crisis, with a prolonged shelter-in-place still ahead of us and so many at risk of losing their lifeline services, it is clear that we must act. A proactive plan is needed to sustain emergency supportive services capacity to address the needs of the older adults who are most at risk in this pandemic. To make that happen, state and local policy makers must do whatever it takes to fund services, including identifying new sources of revenue.

² Based on our analysis of data from thirteen community-based organizations.