

Georgia State University

ScholarWorks @ Georgia State University

GHPC Reports

Georgia Health Policy Center

2-28-2007

Data collection and Analysis in support of the State Plan on Aging and Community Care Services Program Waiver Renewals

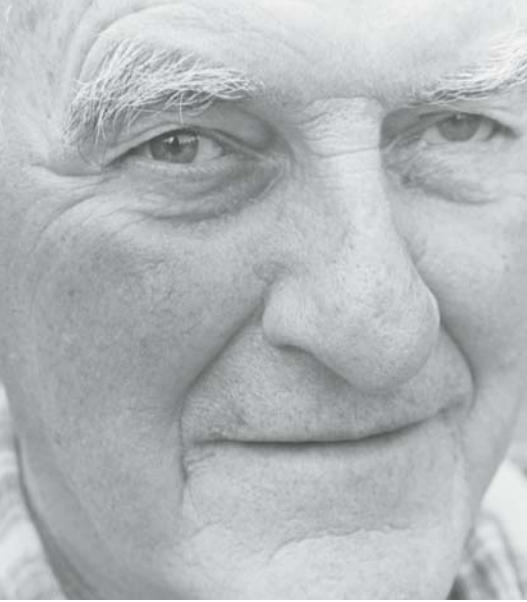
Georgia Health Policy Center

Follow this and additional works at: https://scholarworks.gsu.edu/ghpc_reports

Recommended Citation

Georgia Health Policy Center, "Data collection and Analysis in support of the State Plan on Aging and Community Care Services Program Waiver Renewals" (2007). *GHPC Reports*. 22.
https://scholarworks.gsu.edu/ghpc_reports/22

This Article is brought to you for free and open access by the Georgia Health Policy Center at ScholarWorks @ Georgia State University. It has been accepted for inclusion in GHPC Reports by an authorized administrator of ScholarWorks @ Georgia State University. For more information, please contact scholarworks@gsu.edu.



Data Collection and Analysis

in support of the

State Plan on Aging and Community Care Services Program Waiver Renewals

prepared for

Division of Aging Services, Georgia Department of Human Resources

February 2007

Karen J. Minyard, Ph.D.
Executive Director

Table of Contents

Executive Summary	2
Purpose – Scope of Work	5
Methodology	6
Analysis: State Plan on Aging Survey	9
Analysis: Community Care Services Program Waiver Renewal Survey	28
Analysis: Personal Care Home Interviews	51
Conclusions	54
Appendix A: State Plan on Aging Telephone Survey	57
Appendix B: Community Care Services Program Client Survey	60
Appendix C: Letter to Community Care Services Program Clients	63
Appendix D: Personal Care Home Discussion Guide	64

Executive Summary

In support of the renewal of the State Plan on Aging and the Community Care Services Program (CCSP) waiver, the Georgia Department of Human Resources (DHR) Division of Aging Services (DAS) requested that the Georgia Health Policy Center (GHPC) conduct telephone surveys with current CCSP clients and urban and rural Georgians over age 55 and in-person interviews with residents of Personal Care Homes to provide public input into the planning for the future of aging services in Georgia.

The surveys were developed jointly by DAS and GHPC and included Likert scale questions, open-end questions, and Yes/No questions (Appendices A and B). The discussion guide for Personal Care Home resident interviews was developed by GHPC with input from DAS (Appendix D). For the State Plan on Aging Survey, rural sample was drawn randomly from 192,000 Georgia records, and urban sample was drawn randomly from 420,000 Georgia records of Experian's Insource database. Sufficient sample was drawn to ensure responses were representative of all rural and urban Georgians over age 55 with 95 percent confidence and a margin of error of +/- five percent. For the CCSP Survey, sufficient sample was drawn per Area Agency on Aging (AAA) region to be representative of all clients at the regional level with 95 percent confidence. In most cases, the margin of error is +/- five percent; however, in several regions, sample was exhausted before the target margin of error could be achieved. In no instance is the margin of error greater than 6.6 percent, and the margin of error statewide is 1.5 percent. Interviews with residents of Personal Care Homes were not designed to be representative of all residents of Personal Care Homes.

Pegus Research, Inc. of Salt Lake City, Utah, was contracted to administer the telephone surveys, and data collection was conducted between October 11 and 30, 2006. All 10,000 potential State Plan on Aging Survey respondents were contacted at least once, resulting in a response rate of 10 percent and a cooperation rate of 29 percent. Approximately 22 percent of potential respondents refused to take the survey once contacted. Attempts were made to contact each CCSP client at least once, resulting in a response rate of 44 percent and a cooperation rate of 75 percent. Approximately 17 percent of potential CCSP respondents refused to take the survey once contacted.

State Plan on Aging survey responses, in general, do not differ significantly between urban and rural regions, although there are exceptions.

- About half of all respondents state they know who to contact for future information about long-term care needs. Urban respondents age 55 to 64 are significantly more likely to state they know who to contact.
- An insurance provider is the resource most often (24 percent) cited by respondents followed by medical provider (16 percent).
- Only 12 percent of respondents state they are aware of the services offered by the statewide Aging Network.

- Almost four in ten Georgians state they think they are healthier than the average Georgian their age, and about one-third think they are as healthy. Rural respondents age 55 to 64 are significantly more likely to state they are less healthy than their peers.
- Access to regular health care, consistent access to medication, and access to comprehensive health coverage are thought by respondents to be key factors in ensuring health and wellness.
- Over half of all respondents express the hope or expectation that their family members, most often their children, will participate in their care should they no longer be able to do so themselves.
- Thirty-four percent of respondents say they already have or plan to have long-term care insurance.
- Sixty percent say they already have or plan to have a pension.
- Eighty-two percent already have or plan to have a will.
- Thirty-five percent already have or plan to have an advance directive. The difference between urban and rural respondents age 55 to 64 is statistically significant, with a higher percentage of urban respondents stating they plan to have an advance directive.
- Eighty-two percent say they already have or plan to have life insurance.
- Sixty-nine percent already have or plan to have retirement savings or investments – 31 percent do not.
- Only three percent say they already have or plan to have a reverse mortgage.
- Sixty-six percent already have or plan to have supplemental health insurance. The difference is statistically significant for respondents age 55 to 64, with more urban respondents stating they plan to have supplemental health insurance.
- Most respondents state they do not have care responsibilities for dependent individuals, but almost 20 percent state they do care for an older adult.
- Almost one-quarter say the support they are receiving to provide this care is sufficient, but 21 percent say they need financial assistance in order to continue to provide care, and 18 percent say they need additional in-home help.
- The majority of respondents are able to specify an individual or agency that they will contact or a strategy they will employ to address a potential issue of exploitation or abuse. Sixty-one percent say they will contact law enforcement.
- When asked to think about what types of services they think they might need in the future, 19 percent say they do not know, 16 percent say in-home help, and 13 percent say they have what they think they will need.
- Overall, most respondents (48 percent) expect their incomes in retirement will be less than 300 percent of the federal poverty level – near the point at which elderly Georgians may qualify for Medicaid reimbursed institutional care and some home and community-based Medicaid waiver programs. Urban respondents age 65 to 84 are significantly more likely to say their incomes will exceed that threshold.

In general, urban and rural Georgians over age 55 do not differ in what they perceive they will need in the way of long-term care support services as they age. The survey results do highlight several planning, education, and outreach opportunities for the Division.

The CCSP waiver renewal survey results reveal clients are supportive of and happy with CCSP services overall. Responses are consistent across the 12 AAA regions.

- Ninety-four percent of respondents are very or somewhat satisfied with CCSP services.
- Most problems cited are with personal support (in-home) aides.
- Most know who their Care Coordinator is.
- Ninety-two percent of respondents believe their Care Coordinator helps them get the things they need.
- Seventy percent of clients are very or somewhat involved with their service planning, but 36 percent would like to more involved.
- One-quarter would like additional help, most stating they need help with durable medical equipment, more variety of in-home help, and more hours of in-home help.
- About one-third of clients would like to do things outside their homes that they cannot do now, and most of the tasks are simple things such as gardening, running errands, and just getting outside.
- Seventy-six percent of respondents get additional help from family and friends, and ninety-five percent of them state that the additional help is primarily from family.
- Eighty percent say the CCSP program has made their lives better.

The Personal Care Home Interviews revealed that residents of larger Personal Care Homes (which call themselves “assisted living facilities”), who tend to have sufficient financial resources to meet their personal needs, are largely unfamiliar with the services provided by Area Agencies on Aging (AAAs). None reported having used any of the services discussed: Elderly Legal Assistance Program (ELAP), GeorgiaCares, and Long-term Care (LTC) Ombudsman. They are most familiar with the LTC Ombudsman program because of information posted in their facilities. Less affluent Personal Care Home residents living in smaller Personal Care Homes are more acquainted with the services provided by AAAs, particularly the LTC Ombudsman program. Five of the seven residents interviewed in the small homes had used one or more of the services discussed. Transportation services were the most frequent requests of Personal Care Home residents, when asked about their unmet needs.

Purpose – Scope of Work

The Department of Human Resources' (DHR) Division of Aging Services (DAS), Georgia's State Unit on Aging (SUA), is responsible for the operation of the Community Care Services Program (CCSP) and the design and management of the State Plan on Aging under the federal Older Americans Act (OAA). The CCSP program is made possible through a federal Medicaid waiver and state legislation (O.C.G.A. 49-6-60[et seq. 49-6-64]) and is primarily intended to serve Georgians over the age of 60. CCSP services include: Adult Day Health, Alternative Living Services, Emergency Response Services, Home Delivered Meals, Home Delivered Services, Personal Support Services, and Out-of-Home Respite Care¹. Services provided under the OAA through Georgia's Aging Network include Area Agencies on Aging (AAAs) administration, Supportive Services, Congregate and Home-delivered Meals, Caregiver Support Program, and Elder Abuse and Long-term Care Ombudsman Activities, among others.

DAS coordinates with other aging organizations to provide services to appropriately sustain older Georgians in their homes and communities. These services also provide support to family members and caregivers. DAS administers these programs through AAAs that respond to the needs of Americans aged 60 and over in every local community. AAAs plan, coordinate, and offer services that help older adults remain in their homes. They provide services such as information and access, community-based, in-home, and housing and elder rights. The National Aging Network consists of SUAs, AAAs, Tribal and Native organizations, service providers, adult care centers, caregivers, and volunteers.

The CCSP waiver must be reviewed and approved for renewal by the Centers for Medicare and Medicaid Services (CMS) every five years, and the State Plan on Aging must be renewed and approved by the federal Administration on Aging (AoA) every four years. Integral to performance review and future planning for both programs, public input is sought on a regular basis to assist the state in developing future plans for Georgia's aging population. To achieve public input that is representative of the many stakeholders within the Aging Network, DAS requested data collection and analysis services from the Georgia Health Policy Center (GHPC).

To provide sufficient public input to the development of the State Plan on Aging, the Division requested that a telephone survey of urban and rural Georgians over age 55 be conducted. To achieve public input for the renewal of the CCSP waiver that is representative of 9,871 Georgia CCSP clients, all CCSP clients were included in a telephone survey designed to gauge satisfaction and assess future needs. Additionally, one-on-one interviews were conducted with residents of Georgia Personal Care Homes.

¹ Adult Day Health (ADH) – Health, therapeutic, and support services in a day center.

Alternative Living Services (ALS) – 24-hour personal care, health-related support services and nursing supervision in a licensed Personal Care Home.

Emergency Response Services (ERS) – 24-hour electronic medical communication support system.

Home Delivered Meals (HDM) – Meal delivery services.

Home Delivered Services (HDS) – Skilled nursing services and personal support in client's home.

Personal Support Services (PSS) – Personal care, support, and respite services in client's home.

Out-of-Home Respite Care (OHRC) – Temporary relief for the individual(s) normally providing care.

Methodology

For the State Plan on Aging, a telephone survey was developed in partnership by the Georgia Health Policy Center (GHPC) and Georgia Division of Aging Services (DAS) staff. The survey included two Likert scale questions, six open-end questions, and 14 Yes/No questions (Appendix A). The survey was translated and available in Spanish, and both the survey and embedded informed consent were approved by Georgia State University's Institutional Review Board prior to administration.

Urban and rural counties are defined using Metropolitan Statistical Areas (MSA)². Metropolitan Statistical Areas are geographic entities defined by the U.S. Office of Management and Budget (OMB) for use by federal statistical agencies in collecting, tabulating, and publishing federal statistics. MSA defines a core urban area of 50,000 or more population. Each MSA consists of one or more counties and includes the counties containing the core urban area, as well as any adjacent counties that have a high degree of social and economic integration (as measured by commuting to work) with the urban core. A county-to-ZIP code crosswalk is then used to classify ZIP codes corresponding to respective counties as "Urban" or "Rural." A map of urban and rural respondents' ZIP codes is presented on page nine.

Survey sample was purchased from Experian and included 5,000 urban and 5,000 rural Georgians age 55 years and older. Experian's Insource database is comprised of over 190 million consumers throughout the U.S. Its compiled data is mined from over 3,500 public and proprietary sources that Experian has contracts with to supply the latest information on consumers each month. Rural sample was drawn randomly from 192,000 Georgia records, and urban sample was drawn randomly from 420,000 Georgia records. In total, Experian's Insource file captures approximately 37 percent of all Georgians over age 55. The sample includes name, address, age, and telephone number. Pegus Research, Inc. of Salt Lake City, Utah, was contracted to administer the telephone survey, and data collection was conducted between October 11 and 30, 2006.

Potential respondents were contacted up to eight times; however, most responses were achieved within the first four survey rounds. All 10,000 potential respondents were contacted at least once, resulting in a response rate of 10 percent and a cooperation rate of 29 percent. The response rate is calculated by dividing all completed surveys by total phone record attempts. The cooperation rate is calculated by dividing all completed surveys by those potential respondents successfully contacted. Approximately 22 percent of potential respondents refused to take the survey once contacted.

Regarding open end questions, response categories are not mutually exclusive. Respondents may cite multiple answers in their responses, and each is coded and analyzed separately.

For the CCSP waiver renewal, a telephone survey was developed in partnership by GHPC and DAS staff. The survey includes four Likert scale questions, five open-end questions, and six Yes/No questions (Appendix B). The survey was translated and available in Spanish, and both

² www.georgiaplanning.com/documents/atlas/msa.pdf

the survey and embedded informed consent were approved by Georgia State University's Institutional Review Board. A letter from DAS was sent to all CCSP clients approximately 10 days before the start of survey administration (Appendix C). Fifty-two clients contacted the GHPC with further questions regarding the survey. Two clients requested that they be withdrawn from the survey.

Survey response targets were calculated to achieve results that are representative of all clients within each of the 12 Area Agencies on Aging (AAAs) with 95 percent confidence and a margin of error of +/- five percent. Pegus Research, Inc. of Salt Lake City, Utah, was contracted to administer the telephone survey, and data collection was conducted between October 11 and 30, 2006.

The number of clients per region, response goals per region, responses by region, and error terms are displayed in the table below.

Region	Clients per Region	Response Goal per Region	Responses per Region	Error +/-
Atlanta Region	1,800	317	340	4.79%
CSRA	854	265	304	4.51%
Coastal	707	249	266	4.75%
Georgia Mountains	640	240	234	5.11%
Heart of Georgia	786	258	288	4.60%
Lower Chattahoochee	548	227	190	5.75%
Middle Georgia	685	245	253	4.90%
NE Georgia	548	226	177	5.75%
NW Georgia	1,122	287	315	4.68%
Southern Crescent	469	212	150	6.61%
SE Georgia	1,023	280	315	4.60%
SW Georgia	689	247	209	5.66%
Georgia	9,871	3,053	3,041	1.48%

Potential respondents were contacted up to eight times; however, most responses were achieved within the first four survey rounds. All CCSP clients with valid telephone numbers were contacted at least once, resulting in a response rate of 44 percent and a cooperation rate of 75 percent. Approximately 17 percent of potential CCSP respondents refused to take the survey once contacted.

Regarding open ended questions, response categories are not mutually exclusive. Respondents may cite multiple answers in their responses, and each is coded and analyzed separately.

In most cases, the margin of error for each region is +/- five percent; however, in several regions, sample was exhausted before the target margin of error could be achieved. In no instance is the margin of error greater than 6.6 percent, and the margin of error statewide is 1.5 percent.

Where quantitative results are cited, responses may be greater than or less than 100 percent due to rounding.

For the in-person interviews, DAS identified and obtained permission for GHPC to interview residents at two small and two large Personal Care Homes. GHPC identified and gained permission to interview residents at two additional Personal Care Homes to increase the number of interviewees. Staff at each facility identified residents that were capable of being interviewed and obtained their permission to be interviewed.

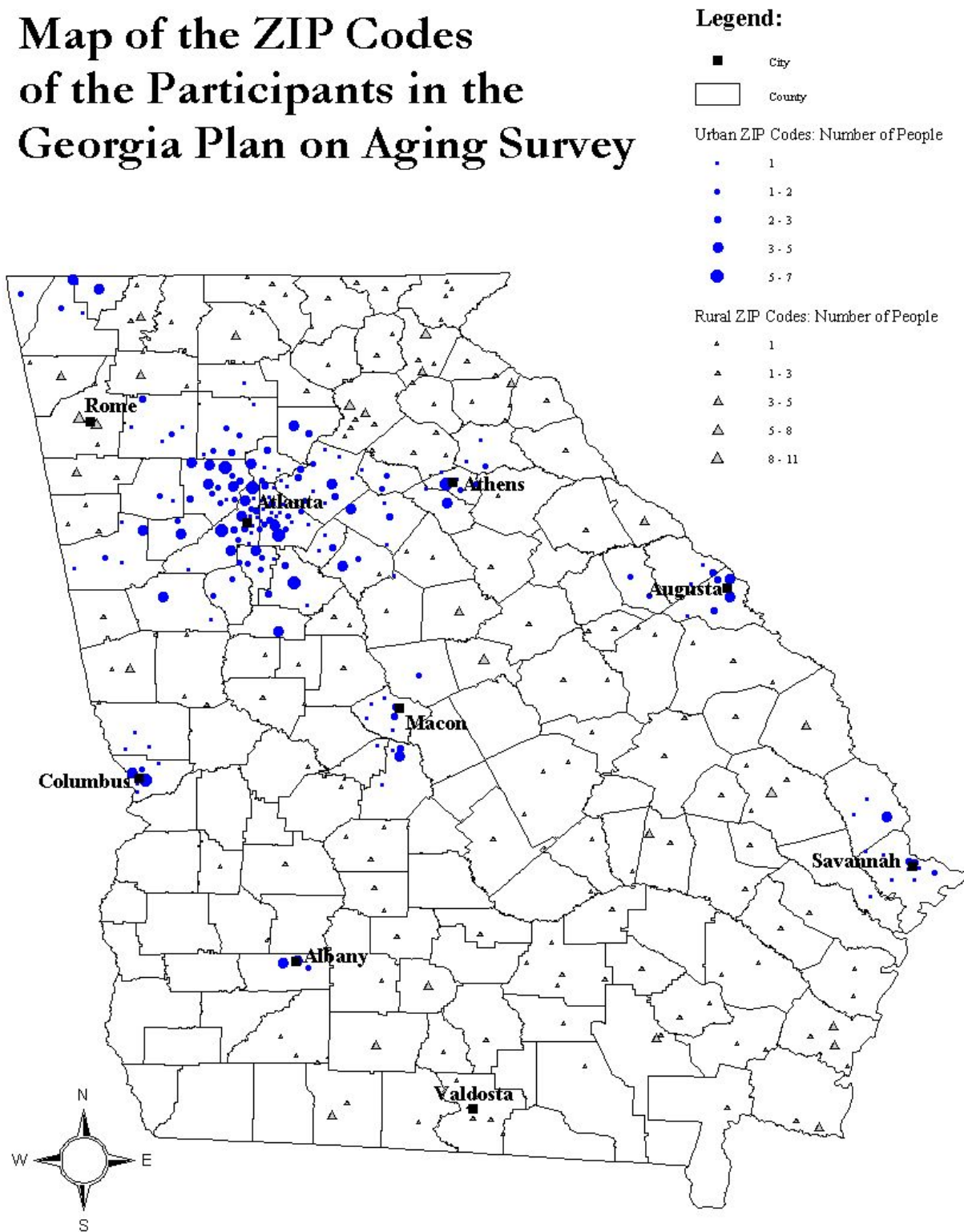
The following table identifies these facilities, their location, and the number of residents interviewed:

Facility	Location	Number Interviewed
Arbor Terrace	Athens	9
Brightmore	Griffin	8
Haven of Hope	Covington	2
Hebrews II	Lithonia	1
Englewood Health Care	Albany	2
Englewood Health Care	Dawson	2
Total Interviews		24

Interviews were conducted one-on-one with each resident. Residents were asked questions based on a discussion guide (Appendix D) developed by GHPC with input from DAS. All 24 interviews were audio-taped and transcribed for analysis.

Analysis: State Plan on Aging Survey

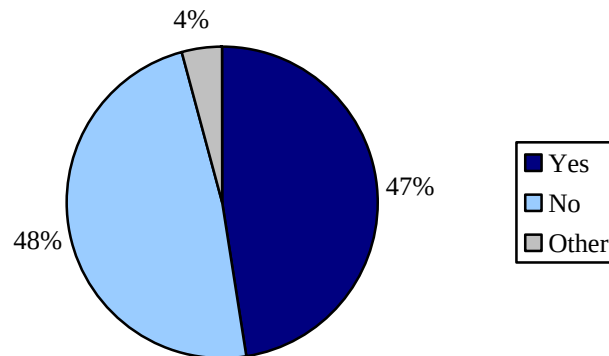
Map of the ZIP Codes
of the Participants in the
Georgia Plan on Aging Survey



State Plan on Aging Survey

Question 1: If you had a future need for information about long-term care services and resources would you know who to contact?

Statewide



	Rural (N = 403)		Urban (N = 412)		All (N = 815)	
	Number	Percent	Number	Percent	Number	Percent
1 - Yes	173	43%	208	50%	381	47%
2 - No	211	52%	183	44%	394	48%
3 - Unsure	12	3%	15	4%	27	3%
4 - Unclear Response	5	1%	5	1%	10	1%
5 - No Response	2	0%	1	0%	3	0%

About half of all respondents state they would know who to contact for future information about long-term care needs. There is a slight difference between rural and urban respondents overall, but the difference is not statistically significant. However, urban respondents age 55 to 64 are significantly more likely to say they will know who to contact. Almost half the respondents statewide say they would not know who to contact for information.

Question 1a: Who would you contact?

A total of 366 respondents out of 381 who state they would know who to contact about future needs for long-term care services answered this question. The first table presents the ten most commonly cited answers, representing 86 percent of all responses.

All Respondents	Number of Respondents	Percent
1. Insurance provider	86	24%
2. Medical provider (current primary care provider or specialist)	58	16%
3. Nursing home/Assisted living facility	36	10%
4. Family member	33	9%
5. Veteran's Administration/ VA hospital	18	5%
6. Employer benefits program/ Employer Human Resources administrator	18	5%
7. AARP	17	5%
8. Internet	16	4%
9. Department of Aging Services or Local DAS agency	15	4%
10. Financial institution or financial advisor	14	4%

An insurance provider is the resource most often cited by respondents. Of those who mention insurance providers, many respondents refer specifically to the insurance company with whom they have a long-term care policy. Other respondents do not mention a long-term care policy specifically but refer in general to the insurance industry as a potential source of information on long-term care services.

In addition to the ten responses listed above, thirty-four respondents cite county, state, and federal agencies such as the local Council on Aging or the local Senior Center, the Department of Family and Children Services (DFCS), Medicaid and Medicare, and the Social Security Administration as potential sources of information about long-term care services. Twenty-five respondents cite specific individuals such as their lawyer, a friend, their minister or pastor, or elected officials as trusted sources of information.

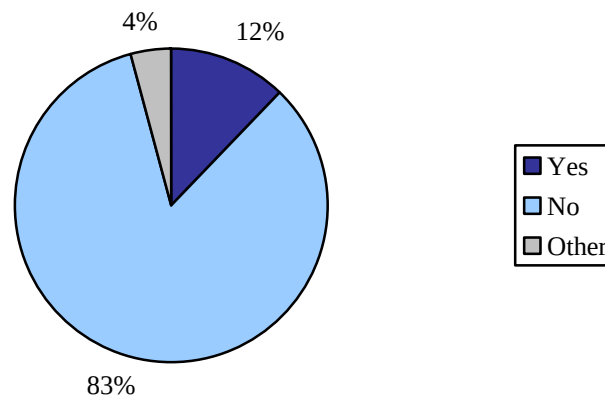
Of the 366 respondents who answered Question 1A, 199 (54 percent) are residents of urban areas, while 167 (46 percent) are from rural areas. Responses vary slightly from rural versus urban areas. The table below presents the ten most commonly cited resources for long-term care information and services by rural and urban residents.

Rural Respondents	Number of Respondents	Percentage	Urban Respondents	Number of Respondents	Percentage
1. Insurance provider	39	23%	1. Insurance provider	47	24%
2. Medical provider (current primary care provider or specialist)	26	16%	2. Medical provider (current primary care provider or specialist)	32	16%
3. Nursing home/ Assisted living facility	22	13%	3. Family member	18	9%
4. Family member	15	9%	4. Nursing home/ Assisted living facility	14	7%
5. Veteran's Administration/ VA hospital	11	7%	5. Internet	13	7%
6. Home health agency	7	4%	6. Employer benefits program/ Employer Human Resources administrator	13	7%
7. AARP	6	4%	7. AARP	11	6%
8. Other agency	6	4%	8. State agency (non-specified)	9	5%
9. Financial institution or advisor	6	4%	9. Social Security Administration	8	4%
10. DFCS	6	4%	10. Financial institution or advisor	8	4%

Rural residents are more likely to cite nursing homes as sources of information about long-term care services, while urban residents are more likely to mention the Internet or an employer's benefits office.

Question 2: Are you aware of the broad range of services offered by the statewide Aging Network?

Statewide

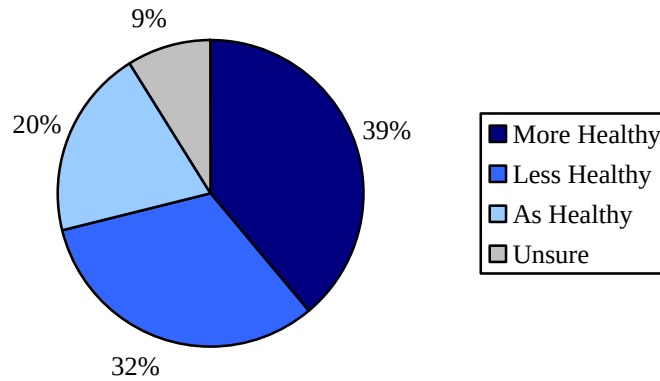


	Rural (N = 403)		Urban (N = 412)		All (N = 815)	
	Number	Percent	Number	Percent	Number	Percent
1 - Yes	48	12%	53	13%	101	12%
2 - No	335	83%	345	84%	680	83%
3 - Unsure	11	3%	10	2%	21	3%
4 - Unclear Response	8	2%	4	1%	12	1%
5 - No Response	1	0%	0	0%	1	0%

Only 12 percent of respondents statewide say they are aware of the services offered by the statewide Aging Network. Again, responses are not statistically significant between rural and urban respondents.

Question 3: Compared to others your age, would you say you are ...

Statewide



	Rural (N = 403)		Urban (N = 412)		All (N = 815)	
	Number	Percent	Number	Percent	Number	Percent
1 - More Healthy	146	36%	168	41%	314	39%
2 - As Healthy	131	33%	131	32%	262	32%
3 - Less Healthy	89	22%	78	19%	167	20%
4 - Not Sure	37	9%	35	8%	72	9%

Almost four in ten Georgians statewide say they think they are healthier than the average Georgian their age, and about one-third think they are as healthy. Again, there is no statistical difference between urban and rural respondents statewide; however, rural respondents age 55 to 64 are significantly more likely to say they are less healthy than their peers.

Question 4: What do you think you will need to improve or maintain your health and wellness in the future?

A total of 690 respondents (85 percent) answered this question. The table below presents the ten most commonly cited answers by respondents statewide.

Response	Number of Respondents	Percent	Explanation
1. Diet/Exercise	200	29%	Respondents stress the importance of a healthy lifestyle that includes good nutrition and exercise as key to maintaining health and wellness.
2. Access to care	126	18%	Respondents say that access to quality care (good providers, good facilities) as well as access to consistent care are key to maintaining good health. Maintenance care in the form of regular check-ups is often equated with maintaining good health.
3. Financial assistance	78	11%	The cost of care and insurance is a key concern for many respondents. Many respond to this question by simply stating: “More money”.
4. I don’t know	71	10%	Numerous respondents express doubt and uncertainty about what they will need to maintain their health and wellness.
5. Keep doing what I’m doing	70	10%	A number of respondents express the sentiment that they are already on the right track towards maintaining good health in the future. Many respondents answer by saying that they will “keep doing what I’m already doing” – exercising and eating right, planning for the future by taking out a long-term care plan and having a financial plan that will ensure they have the resources to pay for the care that they may need.
6. Consistent access to medication	55	8%	Related to access to regular check-ups and preventive care, respondents stress the importance of having access to the prescription drugs recommended by their providers.
7. Disease management	46	7%	Respondents mention the importance of possessing the ability to effectively manage chronic diseases like high blood pressure, diabetes, cardiovascular disease, and the sequelae of a stroke.
8. Access to insurance	41	6%	Respondents stress the importance of not only having health insurance, but of having a plan that provides comprehensive coverage of medical and prescription needs.
9. Information	23	3%	Respondents describe the need for better access to good and understandable information on multiple aspects of health maintenance: medications, treatment plans, services and aid available to seniors, etc.
10. Pray/Faith	23	3%	Respondents describe their belief that the future and their health are “in the hands of God” and that faith and prayer are important strategies for maintaining wellness.

Access is a theme often repeated by respondents. Access to regular health care, consistent access to medication, and access to comprehensive health coverage are considered key factors in ensuring health and wellness. Related to the issue of access is cost. Many respondents express concern over the rising cost of health care, medication, and coverage. Respondents often equate ability to pay with good health outcomes. Many seniors report having to put off needed care or medicines because they cannot afford them:

“Medicine, sometimes I need it but I don't have the co-pay and I can't get the medicine without the co-pay...and I can't visit the doctor if I don't have the co-pay.”

“Mine is a situation that they don't have any way to improve. My home owners taxes went up by 30 percent and our Social Security only went up by 3percent. This is a big gap and only one of the many places that our income is going and we don't have a way to get a higher income due to our [poor] health.”

Related to the theme of access, some respondents talk about the importance of having access to local social and wellness programs for seniors. Many respondents lament the lack of safe and affordable spaces where they can get the exercise that they need and enjoy the opportunity to socialize with other seniors.

“They should have more exercise places that are free for seniors and more walking paths for seniors that are safe.”

“I will need exercise programs for older people and community activities so I can socialize with older people.”

Nineteen respondents mention the importance of staying active and engaged within their communities as key to maintaining health and wellness. They talk about the importance of staying connected socially by continuing to work as long as possible, staying in touch with friends and families, and having opportunities to get out of the house and engage in social activities.

Rural and urban respondents share eight of the top 10 responses to question 4. Rural respondents' religious faith appears to play more of a role in their perceptions of health maintenance strategies (four percent of rural residents versus three percent of urban residences refer to their faith or God). Rural respondents are more likely than urban respondents to report hoping or planning for in-home help in the future (four percent versus two percent, respectively).

Question 5: If you were unable to care for yourself in the future, what would you do?

A total of 769 respondents (94 percent) answered this question. The table below summarizes the ten most common answers cited by all respondents.

Response	Number of Respondents	Percentage	Explanation
1. Family members	416	54%	Over half of all respondents report they plan to depend on members of their family for either provision of care or with assistance in making care and service-related decisions.
2. Go into a nursing home or assisted living facility	229	30%	Many respondents plan to move into an assisted living facility or a nursing home once they are unable to care for themselves. Respondents differentiate between a nursing home and an assisted living facility, stating they would prefer to be in assisted living because it affords them more independence. For many respondents, going into a residential facility is a back-up option if home nursing services are not an option or family members are unable to provide care.
3. I don't know	67	9%	A number of respondents report they have not made plans or even thought about what they will do if they are no longer able to care for themselves.
4. Contract in-home help	47	6%	Respondents plan to hire in-home nursing assistance to care for them.
5. Depend on long-term care or other insurance policy	43	6%	Some respondents refer to long-term care policies and other insurance policies they have purchased that will ensure they are cared for in the way they wish when they are no longer able to care for themselves.
6. Depend on government benefits/assistance - Veteran's Administration	40 18	5% 2%	Some respondents plan to depend on whatever federal and state government aid and benefits are available to them in the future. Medicaid, Medicare, and "the State" are mentioned by respondents. The Veteran's Administration (referred to by some respondents as the "Old Soldiers' Home") is also a government benefit upon which respondents plan to depend.
7. Hope for death	32	4%	A few respondents simply state that they prefer death over a life lived dependent on others for care. These respondents cite their fears of becoming a burden to their families, and express their desires to die with dignity.

8. Plan <u>not</u> to depend on children for care	24	3%	Some respondents are specific in their desire not to have to depend on their children for care or support when they are no longer able to care for themselves. Many of these respondents say they plan to go into a nursing home or hope for death rather than have their children care for them.
9. Remain in their home/ Plan <u>not</u> go into a nursing home	24	3%	These respondents express their wishes to remain in the home for as long as possible. They are firm in their resolve not to be placed in a residential facility. Some of them believe that residential facilities take elderly people's money, while others do not think such a facility can provide a good quality of life.
10. Recommendations from a trusted professional	11	1%	A small number of respondents plan to consult with a trusted professional such as their physician, lawyer, or insurance agent before making plans about their care.

Respondents have divergent opinions of the role that family members should play in providing care or decision-making support for those no longer able to care for themselves. Over half of all respondents express the hope or expectation that their family members, most often their children, will participate in their care.

"I would see what my children could do to care for me. It would be their responsibility. Family takes care of family."

Still, many respondents express the desire not to become a burden on their family members.

"I would go to an assisted living home. I would not join my children under any circumstances as long as I'm able to pay for myself that would be ideal."

"I would have to go to the nursing home unless my daughter takes me. I wouldn't want to put that burden on her. I hope I can take care of myself until God takes me home."

Related to the desire not to burden family members, some respondents express the desire to die before being forced to depend on others for care or before having to go into a nursing home.

"I think I would put a bullet in my head, I don't like to impose on people. Why have people suffer, people don't like to suffer. We don't want to be a burden."

"I'd rather the Lord take me home. I don't want to be anybody's burden."

"I would die. I don't want to go into a nursing home."

When comparing rural and urban areas of the state, there is little difference between the two groups in their responses to this question.

Question 6: In the future, do you plan to have...

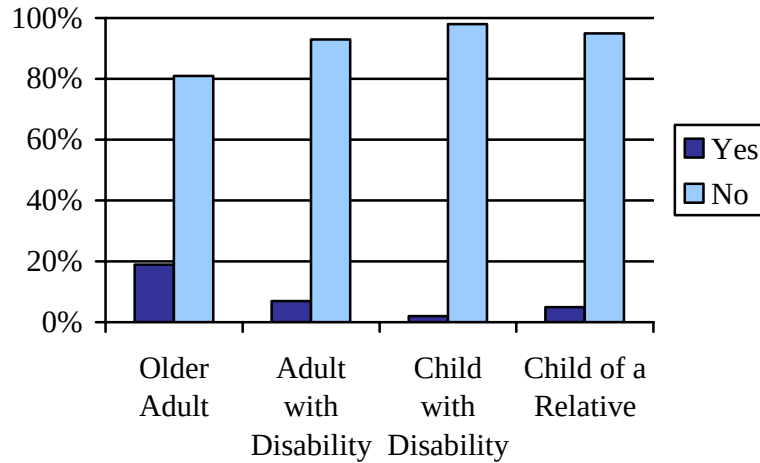
	Rural (N = 403)		Urban (N = 412)		All (N = 815)	
	Number	Percent	Number	Percent	Number	Percent
6.1) In the future, do you plan to have Long-term Care Insurance?						
1 - Yes	64	16%	83	20%	147	18%
2 - No	282	70%	256	62%	538	66%
3 - Already Have	57	14%	73	18%	130	16%
6.2) In the future, do you plan to have a Pension?						
1 - Yes	92	23%	110	27%	202	25%
2 - No	168	42%	158	38%	326	40%
3 - Already Have	143	35%	144	35%	287	35%
6.3) In the future, do you plan to have a Will?						
1 - Yes	163	40%	172	42%	335	41%
2 - No	73	18%	70	17%	143	18%
3 - Already Have	167	41%	170	41%	337	41%
6.4) In the future, do you plan to have an Advance Directive?*						
1 - Yes	71	18%	120	29%	191	23%
2 - No	279	69%	248	60%	527	65%
3 - Already Have	53	13%	44	11%	97	12%
6.5) In the future, do you plan to have Life Insurance?						
1 - Yes	137	34%	137	33%	274	34%
2 - No	76	19%	76	18%	152	19%
3 - Already Have	190	47%	199	48%	389	48%
6.6) In the future, do you plan to have Retirement Savings or Investments?						
1 - Yes	131	33%	138	33%	269	33%
2 - No	138	34%	113	27%	251	31%
3 - Already Have	134	33%	161	39%	295	36%
6.7) In the future, do you plan to have a Reverse Mortgage?						
1 - Yes	14	3%	13	3%	27	3%
2 - No	387	96%	397	96%	784	96%
3 - Already Have	2	0%	2	0%	4	0%
6.8) In the future, do you plan to have Supplemental Health Insurance?*						
1 - Yes	128	32%	164	40%	292	36%
2 - No	156	39%	123	30%	279	34%
3 - Already Have	119	30%	125	30%	244	30%

Thirty-four percent of respondents already have or plan to have long-term care insurance. Sixty percent already have or plan to have a pension. Eighty-two percent already have or plan to have a will. Thirty-five percent already have or plan to have an advance directive. Here, the difference between urban and rural respondents age 55 to 64 is statistically significant, with a

higher percentage of urban respondents stating they plan to have an advance directive. Eighty-two percent already have or plan to have life insurance. Sixty-nine percent already have or plan to have retirement savings or investments – 31 percent do not. Only three percent already have or plan to have a reverse mortgage. Sixty-six percent already have or plan to have supplemental health insurance. Again, the difference is statistically significant for respondents age 55 to 64, with more urban respondents stating they plan to have supplemental health insurance.

Question 7: Do you provide care for any of the following:

Statewide



	Rural (N = 403)		Urban (N = 412)		All (N = 815)	
	Number	Percent	Number	Percent	Number	Percent
7.1) Do you provide care for Older Adult(s) (age 60+)						
1 - Yes	78	19%	79	19%	157	19%
2 - No	325	81%	333	81%	658	81%
7.2) Do you provide care for Adult(s) with disability (age 18 - 59)						
1 - Yes	32	8%	29	7%	61	7%
2 - No	371	92%	383	93%	754	93%
7.3) Do you provide care for Child(ren) with disability (under age 18)						
1 - Yes	8	2%	6	1%	14	2%
2 - No	395	98%	406	99%	801	98%
7.4) Do you provide care for Child(ren) of other relative (under age 18)						
1 - Yes	20	5%	23	6%	43	5%
2 - No	383	95%	389	94%	772	95%

Most respondents say they do not have care responsibilities for dependent individuals, but almost 20 percent state they do care for an older adult. Seven percent care for an adult with a disability, two percent care for a child with a disability, and five percent care for the child of a relative. The categories are not mutually exclusive, and there are no statistical differences between rural and urban respondents.

Question 8: What kind of assistance, if any, would you need to continue to provide this care?

A total of 182 respondents answered this question. The table below summarizes the most common answers offered by respondents.

Response	Number of Respondents	Percentage	Explanation
1. Current benefits and support are sufficient	43	24%	Many respondents report that the support and benefits they currently have are sufficient.
2. Financial assistance	38	21%	These respondents speak of the necessity of maintaining stable income to be able to provide for their dependents. For these respondents, the cost of providing specialized care for their dependents is of great concern.
3. In-home help	33	18%	These respondents mention the need for skilled home nursing care for their dependent or for respite care for the caregiver and help with household chores such as cleaning and cooking.
4. Access to medical care or therapy	13	7%	Some respondents identified the need for specialized health care (such as mental health services, disease management or intensive medical treatments).
5. I don't know	11	6%	Some respondents are unable to answer this question, saying that future needs will depend on their own health and ability to care for their dependent or on their dependent's health condition in the future.
6. Help from other family members	11	6%	These respondents state other members of the family are currently sharing the responsibilities of caring for the dependent or if they are unable to care for the individual in the future, another family member will step in to provide care.
7. Access to comprehensive health coverage	8	4%	These respondents speak of the need for comprehensive health insurance that covers the medical needs of their dependent.
8. Prescription medication assistance	6	3%	Respondents identify assistance in obtaining medications and ensuring access to prescriptions as needs.
9. Meal assistance	6	3%	These respondents need someone to prepare meals in the home or deliver nutritious meals for them and their dependents. "Meals on Wheels" is mentioned by some of these respondents.
10. Transportation services	4	2%	These respondents need transportation.

When comparing rural and urban areas of the state, there is little difference between the two groups in their responses. The two groups share six of the top eight most common response categories.

Question 9: If you or someone you knew was the victim of abuse, neglect, or exploitation, where would you go to get help?

A total of 750 respondents (92 percent) answered this question. The table below summarizes the ten most cited response categories among all respondents who answered the question.

Response	Number of respondents	Percent	Explanation
1. Law enforcement	456	61%	This response category includes mentions of the police, the sheriff's office, and calling 911 to report abuse/exploitation.
2. DFCS	98	13%	The Division of Family and Children Services is responsible for the welfare and employment support, protecting children, foster care, and other services to strengthen families.
3. I don't know	66	9%	Many respondents report that they will not know who or which agency to call to report fraud or abuse. Many of these respondents state they have never had to, nor believe they ever will have to confront such an issue.
4. The Church/Pastor	31	4%	
5. Other agencies	28	4%	This response category includes: nonprofits and civic organizations like the United Way or the Red Cross, federal agencies like Social Security or Medicare, counseling or mental health services, or other government offices such as the District Attorney or the Attorney General.
6. The County	27	4%	Many respondents said they will go to "the county" or "local county agencies that deal with this type of issue". They do not mention a specific county-level agency.
7. The State	22	3%	These respondents answer that they will simply go to "the state" or the "state agency that handles that." They do not mention a specific state agency.
8. Social Services	21	3%	
9. Medical provider	21	3%	These respondents say they would consult the family doctor or known physician or take the case to the hospital.
10. A women's shelter	19	3%	Respondents mention local shelters for battered women.

The majority of respondents are able to specify an individual or agency they will contact or a strategy they will employ to address an issue of exploitation or abuse. Beyond the strategies detailed above, respondents also mention local abuse hotlines and abuse centers as well as agencies that protect children and the elderly from abuse. Respondents are more likely to reply with strategies specific to confronting abuse than exploitation. Those few respondents who detail

strategies for confronting exploitation mention the LTC Ombudsman's office or the Governor's Office of Consumer Affairs³.

When comparing respondents from rural and urban areas of the state, there is little difference between the two groups in their responses to this question. The two groups share seven of the ten most common response categories.

³ LTC Ombudsman Program works to improve the quality of life of residents in Nursing Homes and Personal Care homes by acting as their independent advocate. Ombudsmen informally investigate and resolve complaints on behalf of residents.

Adult Protective Services (APS) provides a mechanism to report abuse, neglect, or exploitation of disabled adults or elder persons who are not residents of Nursing Homes or Personal Care Homes. APS was housed in DFCS for 20 years until transitioning to the Division of Aging Services in 2004.

Question 10: In planning for the future, what types of services or assistance might you want?

A total of 607 respondents (75 percent) answered this question. The table below presents a summary of the ten most commonly cited response categories.

Responses	Number of Respondents	Percent	Explanation
1. I don't know	117	19%	Many respondents say they do not know what kind of help they will need in the future. These respondents state they have not thought about it yet or say it will depend on what their medical condition is in the future.
2. In-home help	96	16%	The most commonly-cited service is in-home help. Home-based services include help with home maintenance and housework, medical care, self care, and help running errands.
3. Current plans are sufficient	81	13%	A number of respondents say they feel that they have planned well for their future. Many respondents have financial plans in place, have purchased long-term care insurance or have secured other services. Some respondents in this category state they feel like they do not need any services or assistance, nor do they feel like they need to plan for the future.
4. Access to medical care	55	9%	These respondents speak of the importance of having access to high quality medical care.
5. Transportation services	53	9%	Transportation is a significant issue for many respondents. People detail transportation needs to/from medical appointments, to run errands and buy food, as well as transportation services to enable seniors to participate in social activities and remain connected with other people.
6. Government benefits/assistance	35	6%	These respondents plan on drawing government financial and health benefits such as Social Security, Medicare, and disability.
7. Nursing home/ Assisted living facility	35	6%	These respondents plan to move into a residential facility where they will be cared for.
8. Meals assistance	33	5%	Food security is of concern to a number of respondents. These respondents mention expecting to need help buying food and preparing food as well as needing financial assistance (food stamps) to purchase sufficient food. "Meals on Wheels" is a very popular program among this group and is mentioned by twenty respondents.
9. Access to comprehensive health coverage	28	5%	These respondents feel that access to comprehensive health insurance will be key to maintaining good health and not going into debt paying for needed health care.
10. Prescription drug assistance	25	4%	These respondents are concerned about the rising price of drugs and see financial support to ensure they are able to get the drugs that they are prescribed as a needed service in the future.

When asked what types of services or assistance they might want when planning for their future, a common response from those surveyed is that they are not worried about the future.

“I’m satisfied with what I got right now. I don’t look at the future. I take it one day at a time.”

“At my age, I’m not planning for the future. I just take it a day at a time. If God lets us live each day, that’s fine, but if no, that’s fine too. We’re not making plans for the future like we did when our children were young.”

Besides the responses noted above, respondents report needing additional information on the types of services available and the kinds of planning they should be doing for the future.

“I think it would be neat if they would offer seminars for seniors or the local churches would give us info on what they offer us.”

“The service that tells me what I am eligible for, and make it known. Make sure that you let the senior citizens know they have a central point of contact. Make sure they know what services are available to them.”

Respondents mention an interest in learning how to plan financially for the future.

“I would like some information on how to better prepare for retirement - to find ways of having some savings or investments, some type of an investment plan.”

“I would like information on how to improve my financial literacy.”

Of particular interest to some respondents is training on how to live independently and take care of themselves in their own homes for as long as possible.

Respondents are also interested in ensuring that they have social connections and activities designed for the elderly in the community. Respondents describe the need for more places for seniors to gather and opportunities for seniors to continue working part-time as a way to both generate additional income and stay engaged in the community.

“It’d be nice if we had some kind of senior citizens’ gathering place here that we didn’t have to pay for. In the adjoining town they have a Senior Citizens’ Center and they seem to do a lot for them in the way of entertaining and so on and so forth.”

“I would love to work on the weekends but with the small town I live in there just no need for me.”

When comparing respondents from rural and urban areas of the state, there is little difference in their responses. The two groups share eight of the ten most common responses.

Question 11: Do you expect your annual income in retirement will be more or less than \$29,400 (in today's dollars)?*⁴

	Rural (N = 403)		Urban (N = 412)		All (N = 815)	
	Number	Percent	Number	Percent	Number	Percent
1 - More	133	33%	181	44%	314	39%
2 - Less	215	53%	174	42%	389	48%
3 - Don't Know	32	8%	33	8%	65	8%
4 - No Response	23	6%	24	6%	47	6%

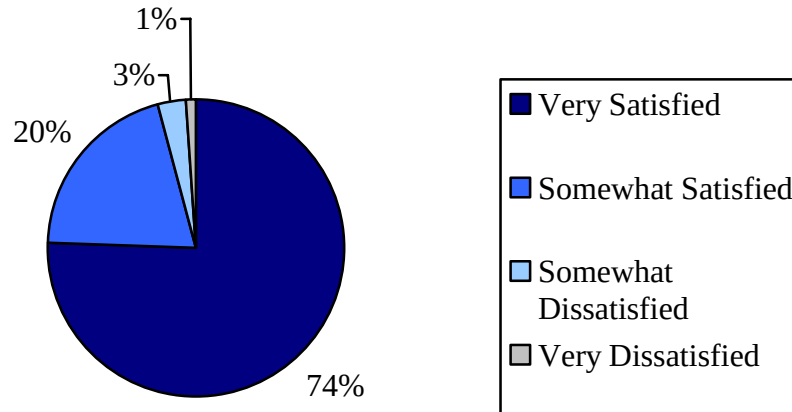
Overall, most respondents expect their incomes in retirement to be less than 300 percent of the federal poverty level – near the point at which elderly Georgians may qualify for Medicaid reimbursed institutional care and some home and community-based Medicaid waiver programs. Urban respondents age 65 to 84 are significantly more likely to say their incomes will exceed that threshold.

⁴ \$29,400 is 300 percent of the 2006 Federal Poverty Level.

Analysis: CCSP Waiver Renewal Survey

Question 1: How satisfied are you with your CCSP services?⁵

Statewide



	Very Satisfied		Somewhat Satisfied		Somewhat Dissatisfied		Very Dissatisfied	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Atlanta Region	251	74%	66	19%	9	3%	6	2%
CSRA	216	71%	66	22%	8	3%	3	1%
Coastal	187	70%	56	21%	10	4%	4	2%
Georgia Mountains	178	76%	43	18%	7	3%	2	1%
Heart of Georgia	212	74%	61	21%	4	1%	3	1%
Lower Chattahoochee	142	75%	35	18%	8	4%	3	2%
Middle Georgia	172	68%	60	24%	8	3%	5	2%
NE Georgia	132	75%	35	20%	4	2%	2	1%
NW Georgia	245	78%	49	16%	7	2%	8	3%
Southern Crescent	111	74%	33	22%	1	1%	3	2%
SE Georgia	240	76%	53	17%	9	3%	2	1%
SW Georgia	162	78%	36	17%	3	1%	1	0%

Overall, CCSP clients statewide say they are happy with CCSP services. No less than 91 percent of clients in any region are very satisfied or somewhat satisfied with their CCSP services.

⁵ Three percent of respondents offered no response to Question 1.

Question 1a: Can You Tell Me About That?⁶

This question was asked of respondents who reported being somewhat or very dissatisfied with their CCSP services. A total of 115 respondents in the state, or four percent of the total survey sample, answered this question.

The table below presents and describes the response categories into which the respondents' answers are categorized.

Response category	Description
Problems with aides	Respondents describe dissatisfaction with personal support (home help) aides. Answers coded under this response category include respondent reports of unreliable aides (e.g. aides who do not show up on time or at all); aides who do not perform their duties at all (e.g. aides who spend their time talking on the phone). Some respondents also report having aides who mistreat them or steal from their homes.
"I don't get what I pay for"	Respondents report either receiving no services at all from CCSP or receiving fewer services than what they qualify for and what they say they have paid for.
Lack of communication	Respondents report they do not receive adequate information from providers if their aide cannot make it as scheduled. Some respondents also describe instances where their benefits/services change without advance notice.
Need more CCSP hours	Respondents feel the hours of in-home help they are currently receiving are not sufficient for their needs. They state that they require more hours of care. Many respondents express the desire to have in-home help on the weekends.
High cost of services	Respondents report the co-payments required of them for participation in the CCSP are too costly.
Dissatisfaction with meals service	These respondents complain about the quality of the food that they are given. Some say that the meals they receive are repetitive. Others say that the food is not prepared well (e.g. the food is over or undercooked, or not very nutritious).
Have additional special needs	These respondents have special medical or care needs that are not being met by the CCSP program. They often need more extensive therapy or rehabilitation.
Transportation services	Respondents state the transportation service is not adequately meeting their needs.
Other	Answers were indistinguishable or appeared only once.

The table below presents the results of this open-ended question statewide and then by each CCSP service region.

- A total of 142 responses are coded from the 115 respondents (some respondents list multiple answers, and each item was separately coded to a response category).
- The number (#) column under each region is the total number of times the response category is mentioned. The percent (%) column for each region is the percent of respondents in the region that mention the specific response category.

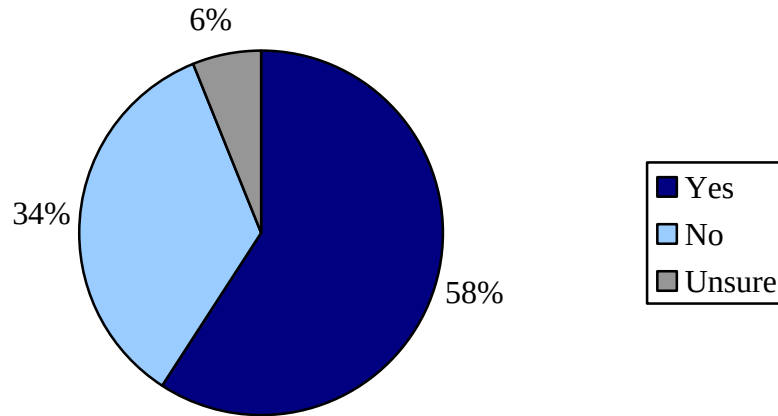
⁶ Asked only of those who say they are somewhat or very dissatisfied.

	State		Atlanta Region		Coastal		CSRA		Georgia Mountains		Heart of Georgia		Lower Chatta-hoochie		Middle Georgia		NE Georgia		NW Georgia		Southern Crescent		SE Georgia		SW Georgia	
	N=115		N=15		N=14		N=11		N=8		N=7		N=11		N= 12		N= 6		N= 14		N= 4		N= 11		N= 2	
Response Category	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%
Problems with aides	78	68%	8	53%	12	86%	8	73%	5	63%	5	71%	8	73%	11	92%	3	50%	11	79%	1	25%	7	64%	2	100%
Lack of communication and response from management	13	11%	2	13%	1	7%	0	0%	0	0%	0	0%	0	0%	0	0%	1	17%	2	14%	2	50%	1	9%	0	0%
"I don't get what I pay for."	12	10%	0	0%	2	14%	2	18%	1	13%	1	14%	2	18%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Need more CCSP hours	11	10%	1	7%	1	7%	0	0%	0	0%	2	29%	0	0%	2	17%	1	17%	2	14%	0	0%	1	9%	0	0%
High cost of services	7	6%	0	0%	0	0%	1	9%	1	13%	0	0%	1	9%	2	17%	1	17%	1	7%	0	0%	1	9%	0	0%
Dissatisfaction with meals service	7	6%	1	7%	2	14%	1	9%	1	13%	0	0%	1	9%	0	0%	1	17%	0	0%	1	25%	0	0%	0	0%
Have additional special needs	5	4%	2	13%	0	0%	0	0%	1	13%	1	14%	0	0%	1	8%	1	17%	0	0%	0	0%	2	18%	0	0%
Transportation	2	2%	1	7%	0	0%	1	9%	0	0%	0	0%	1	9%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Other	7	6%	1	7%	2	14%	0	0%	0	0%	1	13%	0	0%	1	9%	0	0%	1	17%	0	0%	1	25%	0	0%

Across all 12 regions, dissatisfaction with in-home aides is the most common reason that the respondent is dissatisfied with the CCSP. Issues with their in-home aides account for almost 70 percent of all responses given.

Question 2: Do you know who your CCSP Care Coordinator is?⁷

Statewide



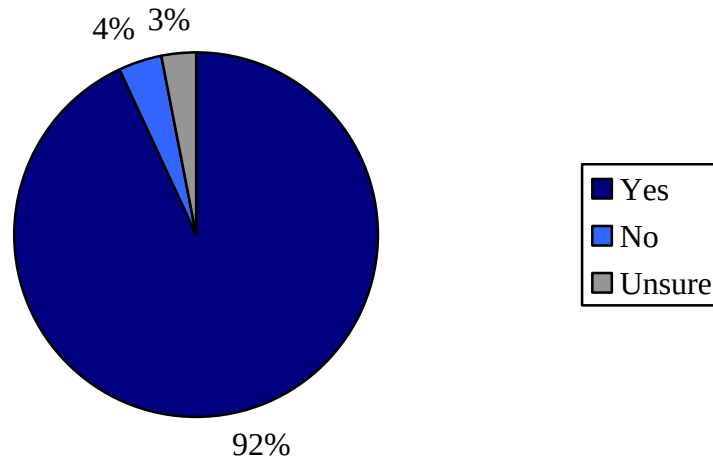
	Yes		No		Unsure	
	Number	Percent	Number	Percent	Number	Percent
Atlanta Region	235	69%	82	24%	18	5%
CSRA	158	52%	124	41%	13	4%
Coastal	158	59%	84	32%	19	7%
Georgia Mountains	131	56%	80	34%	19	8%
Heart of Georgia	162	56%	106	37%	15	5%
Lower Chattahoochee	108	57%	65	34%	14	7%
Middle Georgia	142	56%	93	37%	16	6%
NE Georgia	101	57%	65	37%	10	6%
NW Georgia	186	59%	108	34%	13	4%
Southern Crescent	97	65%	37	25%	10	7%
SE Georgia	166	53%	124	39%	20	6%
SW Georgia	111	53%	79	38%	13	6%

More than half of all clients in each region and almost 60 percent of clients at the state level say they know who their Care Coordinator is. Clients are most likely to say they know who their Care Coordinator is in the Atlanta region.

⁷ Two percent of respondents returned an unclear response.

2a: Does your CCSP Care Coordinator help you get what you need when you need it?⁸

Statewide



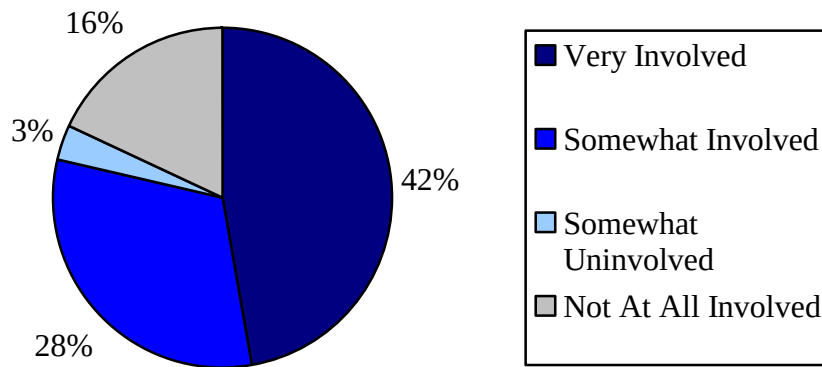
	Yes		No		Unsure	
	Number	Percent	Number	Percent	Number	Percent
Atlanta Region	207	88%	18	8%	7	3%
CSRA	146	92%	6	4%	4	3%
Coastal	142	90%	9	6%	4	3%
Georgia Mountains	115	88%	7	5%	6	5%
Heart of Georgia	152	94%	3	2%	4	2%
Lower Chattahoochee	97	90%	3	3%	7	6%
Middle Georgia	130	92%	5	4%	4	3%
NE Georgia	92	91%	4	4%	3	3%
NW Georgia	176	95%	5	3%	2	1%
Southern Crescent	94	97%	1	1%	1	1%
SE Georgia	158	95%	1	1%	4	2%
SW Georgia	99	89%	5	5%	3	3%

In most cases, more than 90 percent of CCSP clients at the regional level believe their Care Coordinator helps them get what they need when they need it. This is least likely to be the case in the Atlanta region.

⁸ Asked only of those who answer “Yes” to Question 2. One percent of all clients returned an unclear response.

Question 3: How involved are you in planning your CCSP services?⁹

Statewide



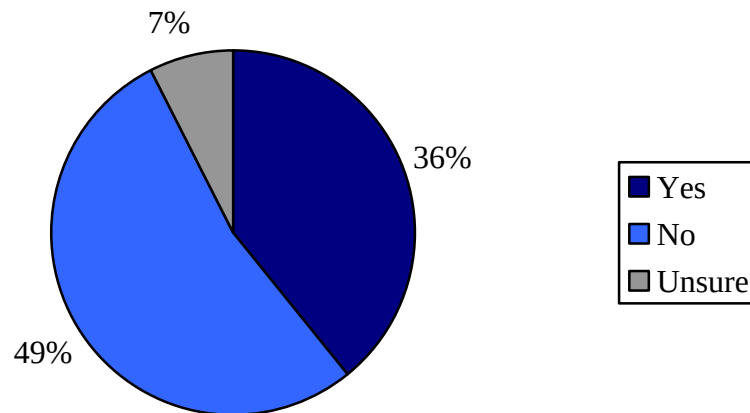
	Very Involved		Somewhat Involved		Somewhat Uninvolved		Not at all Involved	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Atlanta Region	163	48%	90	26%	10	3%	54	16%
CSRA	113	37%	80	26%	10	3%	56	18%
Coastal	116	44%	68	26%	7	3%	45	17%
Georgia Mountains	93	40%	68	29%	6	3%	31	13%
Heart of Georgia	120	42%	84	29%	8	3%	51	18%
Lower Chattahoochee	91	48%	44	23%	9	5%	30	16%
Middle Georgia	113	45%	71	28%	6	2%	36	14%
NE Georgia	77	44%	58	33%	3	2%	24	14%
NW Georgia	125	40%	76	24%	11	3%	57	18%
Southern Crescent	66	44%	43	29%	2	1%	19	13%
SE Georgia	114	36%	104	33%	11	3%	44	14%
SW Georgia	78	37%	66	32%	7	3%	32	15%

Seventy percent of all CCSP clients say they are very or somewhat involved in planning their CCSP services. Clients appear to be most involved in planning their CCSP services in the Atlanta and Lower Chattahoochee regions and the least involved in the CSRA, Heart of Georgia, and NW Georgia regions.

⁹ Twelve percent of all clients returned no response.

Question 4: Would you like to be more involved in planning your CCSP services?¹⁰

Statewide



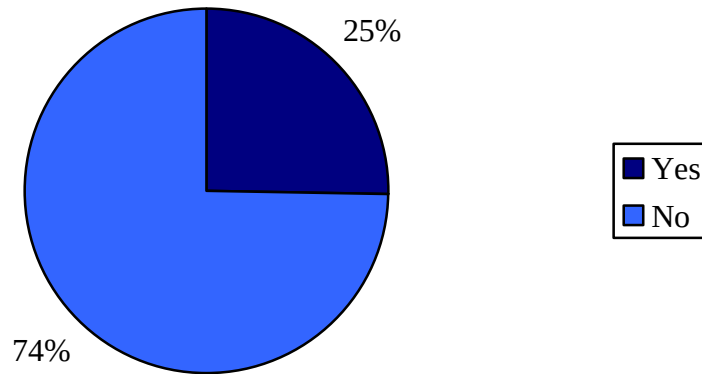
	Yes		No		Unsure	
	Number	Percent	Number	Percent	Number	Percent
Atlanta Region	141	41%	160	47%	19	6%
CSRA	114	38%	145	48%	25	8%
Coastal	107	40%	127	48%	16	6%
Georgia Mountains	76	32%	125	53%	19	8%
Heart of Georgia	99	34%	147	51%	24	8%
Lower Chattahoochee	69	36%	93	49%	17	9%
Middle Georgia	106	42%	108	43%	14	6%
NE Georgia	66	37%	87	49%	14	8%
NW Georgia	103	33%	150	48%	33	10%
Southern Crescent	58	39%	72	48%	11	7%
SE Georgia	96	30%	175	56%	15	5%
SW Georgia	73	35%	105	50%	11	5%

More CCSP clients statewide say they would not like to be more involved in the planning of their services (49%) than would like to be involved (36%). Responses are fairly consistent across AAA regions.

¹⁰ Five percent of respondents returned an unclear response, and two percent of respondents returned no response.

Question 5: Is there anything else you need help with?¹¹

Statewide



	Yes		No	
	Number	Percent	Number	Percent
Atlanta Region	92	27%	244	72%
CSRA	86	28%	215	71%
Coastal	84	32%	180	68%
Georgia Mountains	54	23%	176	75%
Heart of Georgia	52	18%	229	80%
Lower Chattahoochee	46	24%	141	74%
Middle Georgia	72	28%	180	71%
NE Georgia	40	23%	134	76%
NW Georgia	75	24%	238	76%
Southern Crescent	34	23%	115	77%
SE Georgia	72	23%	240	76%
SW Georgia	42	20%	162	78%

Almost three-quarters of respondents statewide say there is nothing with which they need additional help. Clients in the Heart of Georgia region are most likely to say they do not need additional help. Clients in the Coastal region are most likely to say they need additional help.

¹¹ One percent of CCSP clients returned no response.

Question 5a: Can you tell me about that?¹²

A total of 737 respondents, or 25 percent of the survey sample, answered this question. The table below describes the response categories into which the respondents' answers are sorted.

Response Category	Description
Durable Medical Equipment	Respondents mention the need for access to durable medical equipment like wheelchairs, scooters, chair lifts, etc., as well as medical supplies. Respondents most often mention supplies related to incontinence (adult diapers/ Depends, bed pads.)
Expanded in-home assistance	These respondents talk about the need to have help around their home - cleaning, doing repairs and maintenance, yard work, cooking, or providing medical/nursing assistance. Some respondents mention they have aides from CCSP coming into their homes currently, but that they need additional help that aides are not providing.
More hours with CCSP aides	Respondents mention the need for additional hours with CCSP aides in their homes.
Transportation services	Respondents need transportation to medical appointments or to run errands. Some also talk about the need for transportation services that are appropriate for handicapped people (e.g. a van with a wheelchair lift). Some respondents comment that current transportation services available are often not reliable. They talk about having missed multiple medical appointments because the van service was late or did not show up at all.
Financial Assistance	These respondents talk about their financial difficulties - they mention the challenges of paying utilities or paying for their prescribed medications. These respondents state they need financial aid to be able to pay bills, buy food, and cover their medical costs.
Need specialized medical care	These respondents need specialized medical attention like physical therapy, rehabilitation, or regular blood work. Some respondents also need help understanding their medical care regime - when and how to take the medicines prescribed and what each medicine does for them.
Home modifications/repairs	These respondents describe the need for changes to be made to their homes to make them handicap accessible for themselves or their spouse/dependent. Respondents mention wheelchair ramps, bars, or rails in the bathroom, widening of doors, etc.
Improved quality of care from CCSP aides; communication with Care Coordinator	Respondents describe the difficulties that they have with the CCSP. They comment that the aides do not show up on time or do not show up at all, that they cannot communicate with case managers or program management, and that the aides "don't do what they are supposed to do."
Assistance with meals	Respondents need help preparing meals, or would like meals delivered to their homes because they are no longer able to prepare meals for themselves. Many of these respondents mention the "Meals on Wheels" program - some have been waiting to receive meals for some time and have not been able to get into the program. Other respondents complain about the quality of the meals that they receive from the program - the meals are often repetitious or not well-prepared.
Information needs	These respondents request information on services available to them, what they qualify for, how the CCSP program works, or why their benefits change. Respondents also describe their need for help navigating "the system"- who to contact when they have problems or needs, how to sign up for various aid programs.
Other	This response category includes those answers that are not related to the question posed or are indistinguishable. Also included in this category are answers that occur only once or fall outside the purview of the CCSP.

¹² Asked only of those who answer "Yes" to question 5.

The table below presents the results of question 5a statewide and then by each CCSP service region.

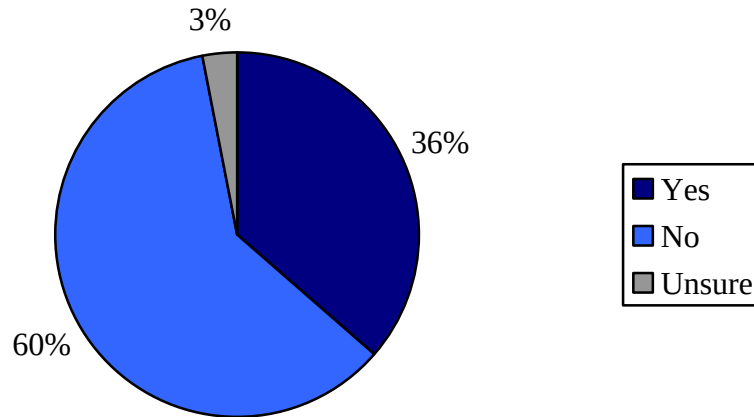
- A total of 823 responses from 737 respondents are coded across categories (some respondents provide multiple answers).
- The number (#) column under each region is the total number of times the response category is mentioned. The percent (%) column for each region is the percent of respondents in the region that mention the specific response category. For example, in the Atlanta region 13 people, or 14% of all respondents answer that they need help purchasing or locating durable medical equipment and medical supplies.

	State		Atlanta Region		Coastal		CSRA		Georgia Mountains		Heart of Georgia		Lower Chattoohoochie		Middle Georgia		NE Georgia		NW Georgia		Southern Crescent		SE Georgia		SW Georgia	
	N=737		N= 91		N=82		N=83		N=53		N=51		N=45		N=71		N=39		N=75		N=35		N=71		N=41	
Response Category	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%
Durable Medical Equipment	128	17%	13	14%	15	18%	13	16%	9	17%	6	12%	12	27%	14	20%	8	21%	11	15%	10	29%	7	10%	10	24%
Expanded in-home assistance	122	17%	15	16%	15	18%	16	19%	9	17%	14	27%	4	9%	8	11%	6	15%	13	17%	2	6%	15	21%	5	12%
More hours with CCSP aides	119	16%	16	18%	10	12%	17	20%	8	15%	7	14%	5	11%	14	20%	7	18%	9	12%	3	9%	14	20%	9	22%
Transportation Services	78	11%	7	8%	9	11%	5	6%	12	23%	4	8%	4	9%	7	10%	5	13%	12	16%	4	11%	6	8%	3	7%
Financial Assistance	69	9%	5	5%	6	7%	5	6%	7	13%	10	20%	5	11%	6	8%	2	5%	8	11%	4	11%	10	14%	1	2%
Medical Care	59	8%	5	5%	5	6%	8	10%	5	9%	4	8%	6	13%	9	13%	1	3%	6	8%	3	9%	6	8%	1	2%
Home modifications/repairs	43	6%	5	5%	10	12%	4	5%	3	6%	3	6%	2	4%	4	6%	0	0%	2	3%	0	0%	7	10%	3	7%
Improved quality of care from CCSP	41	6%	4	4%	7	9%	6	7%	1	2%	2	4%	2	4%	4	6%	3	8%	4	5%	3	9%	1	1%	4	10%
Assistance with meals	33	4%	5	5%	3	4%	4	5%	0	0%	1	2%	1	2%	2	3%	0	0%	6	8%	4	11%	5	7%	2	5%
Information needs	23	3%	3	3%	5	6%	3	4%	1	2%	2	4%	0	0%	3	4%	2	5%	2	3%	0	0%	0	0%	2	5%
Other	108	15%	25	27%	8	10%	13	16%	4	8%	3	6%	8	18%	9	13%	7	18%	8	11%	5	14%	12	17%	6	15%

There is slightly more variation in the most commonly-cited responses across the twelve regions. Six regions share the top three responses: durable medical equipment, expanded in-home assistance, and more hours with the CCSP aides.

Question 6: Is there anything you want to do outside your home that you don't do now?¹³

Statewide



	Yes		No		Unsure	
	Number	Percent	Number	Percent	Number	Percent
Atlanta Region	137	40%	191	56%	7	2%
CSRA	102	34%	190	63%	9	3%
Coastal	92	35%	166	62%	7	3%
Georgia Mountains	85	36%	142	61%	6	3%
Heart of Georgia	84	29%	191	66%	12	4%
Lower Chattahoochee	61	32%	119	63%	8	4%
Middle Georgia	80	32%	159	63%	11	4%
NE Georgia	50	28%	120	68%	6	3%
NW Georgia	130	41%	170	54%	15	5%
Southern Crescent	53	35%	93	62%	4	3%
SE Georgia	135	43%	173	55%	5	2%
SW Georgia	79	38%	121	58%	5	2%

More than half of respondents statewide say there is nothing outside the home that they would like to do that they do not do now. Clients in the NE Georgia region are most likely to say this.

¹³ One percent of respondents have no response.

Question 6a: What would you like to do?¹⁴

A total of 1,075 individuals, or 36 percent of the total sample, responded to this question. The table below presents and describes the response categories into which the respondents' answers are grouped.

Response Category	Description
Work in the yard/ Spend time outside	Work in their gardens, plant flowers, work in their yard (raking, mowing, upkeep), spend time outside.
Engaged in activities	Activities include: dancing, movies, out to dinner, arts and crafts, hunting, doing volunteer work, having social contact, sew/quilting.
Shopping/errands/riding	Many want to be able to do their own grocery shopping rather than depend on others because people do not know what they want/need and do not buy the right things. Want to just go into town and look around, ride around a bit.
Get out of the house	"I just want to get out of the house" "Go places" "Go anywhere"
Transportation services	These respondents name a lack of transportation as a barrier to doing things outside the home. Many respondents do not drive and do not have someone who can provide transportation.
Walk/Exercise	Respondents who are no longer mobile express their desire to be able to walk again. Some respondents also mention wanting to get out of the house and get more exercise.
Home bound	Answer that they cannot do anything because they are stuck - unable to leave the house because of physical issues; no one to help them.
Go to Church	For these respondents, going to church each week is a key activity that they miss.
Travel/ Visit friends or family	Want to travel or visit friends and family.
Durable Medical Equipment	Need specific equipment - wheelchairs, scooters, ramps, wheelchair lifts ,etc.
Get a job	Respondents describe their desire to go back to work to earn some extra money, or to "keep their minds occupied."
Respite care for caregivers	Many caregivers answered the survey on behalf of their dependent who was unable to respond to the survey. The caregivers often mention their own need for respite care which would allow them to take a break from providing care.
Medical care	These respondents describe unmet medical care needs, usually specialized care like physical therapy or rehabilitation.
Home repairs	Respondents describe their desire to "keep up" their house and need assistance making necessary repairs and performing basic home maintenance repairs.
Drive a car	These respondents wish they were still able to drive themselves around in their own car.

The table below presents the results of question 6a statewide and then by each CCSP service region.

- A total of 1,393 responses from 1,075 respondents are coded across categories (some respondents provided multiple answers).
- The number column for each region is the total number of times the response category is mentioned by respondents. The percent column for each region is the percent of respondents in the region that mention the specific response category.

¹⁴ Asked only of those who answer "Yes" to question 6.

	State		Atlanta Region		Coastal		CSRA		Georgia Mountains		Heart of Georgia		Lower Chatta-hoochie		Middle Georgia		NE Georgia		NW Georgia		Southern Crescent		SE Georgia		SW Georgia	
	N=1,075		N=137		N=89		N=97		N=85		N=83		N=61		N=80		N=50		N=127		N=53		N=134		N=79	
Response Category	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%
Work in the yard/ Spend time outside	203	19%	15	11%	14	16%	17	18%	11	13%	31	37%	12	20%	9	11%	8	16%	24	19%	12	23%	33	25%	9	11%
Engaged in activities	190	18%	42	31%	17	19%	15	15%	15	18%	6	7%	6	10%	11	14%	5	10%	24	19%	15	28%	17	13%	17	22%
Do errands and shopping/ Go into town	180	17%	19	14%	15	17%	19	20%	14	16%	12	14%	9	15%	18	23%	15	30%	26	20%	12	23%	11	8%	10	13%
Get out of the house	169	16%	16	12%	11	12%	10	10%	18	21%	16	19%	13	21%	11	14%	10	20%	19	15%	4	8%	29	22%	12	15%
Transportation services	108	10%	18	13%	11	12%	12	12%	9	11%	5	6%	5	8%	7	9%	7	14%	16	13%	2	4%	11	8%	5	6%
Walk/ Exercise	100	9%	15	11%	12	13%	12	12%	4	5%	2	2%	3	5%	8	10%	6	12%	12	9%	6	11%	9	7%	11	14%
Home bound	82	8%	6	4%	7	8%	5	5%	5	6%	11	13%	7	11%	7	9%	1	2%	10	8%	3	6%	11	8%	9	11%
Go to Church	74	7%	10	7%	4	4%	8	8%	6	7%	7	8%	4	7%	11	14%	2	4%	7	6%	2	4%	9	7%	4	5%
Travel/ Visit friends or family	50	5%	5	4%	5	6%	4	4%	7	8%	2	2%	1	2%	4	5%	4	8%	3	2%	2	4%	12	9%	1	1%
Durable Medical Equipment	49	5%	2	1%	4	4%	5	5%	9	11%	5	6%	1	2%	7	9%	2	4%	4	3%	1	2%	7	5%	2	3%
Get a job	35	3%	7	5%	3	3%	3	3%	3	4%	1	1%	0	0%	3	4%	3	6%	6	5%	1	2%	2	1%	3	4%
Respite care for caregivers	29	3%	7	5%	2	2%	1	1%	3	4%	1	1%	2	3%	3	4%	2	4%	4	3%	0	0%	1	1%	3	4%
Medical care	23	2%	5	4%	2	2%	1	1%	2	2%	1	1%	2	3%	1	1%	1	2%	1	1%	2	4%	5	4%	0	0%
Home repairs	21	2%	1	1%	3	3%	5	5%	1	1%	1	1%	1	2%	2	3%	0	0%	3	2%	0	0%	3	2%	1	1%
Drive a car	19	2%	2	1%	0	0%	1	1%	1	1%	2	2%	2	3%	2	3%	2	4%	2	2%	1	2%	3	2%	1	1%

Though there is some variation in the responses across response categories among the 12 regions, the trends in each of the regions tends to mirror the statewide trends.

When asked what they would like to be doing outside the home that they are currently unable to do, the most common answer for all respondents is to be able to spend time outside, working in the yard or gardening:

“I'd like to be able to work in my garden. I love outside but I can't do the work.”

“When the weather permits, go out in the wheelchair and get some sunlight. Because there are eight to ten months that he doesn't go outside except to go to the doctor.”

For many respondents, simply getting out of the house is a goal. Many respondents mention they would love to get out but are unable to because of physical limitations (they are wheelchair-bound or bed-bound) or because they lack the appropriate home modifications (e.g. wheelchair ramp), transportation (e.g. wheelchair lift) or durable medical equipment (e.g. wheelchair or scooter) to be able to leave their home.

“I would like to get out and get out and walk up and down the streets but I can't do it. So therefore I would like to have a scooter where I could ride up and down the streets, where I could go to the Dollar Store and get a Pepsi Cola every once and awhile...that ain't much to ask for is it?”

Transportation is a significant barrier for many clients. Respondents would like to do their own shopping and errands, travel, visit friends and family, go to church, or go to their medical appointments, but cannot drive themselves, have no one to drive them, and feel that the transport services available to them are not reliable. For many respondents, the loss of independence that comes with no longer being able to drive yourself around is very frustrating:

“I would like to be independent but I cannot do it. I have always done everything myself. I don't feel like I am myself anymore.”

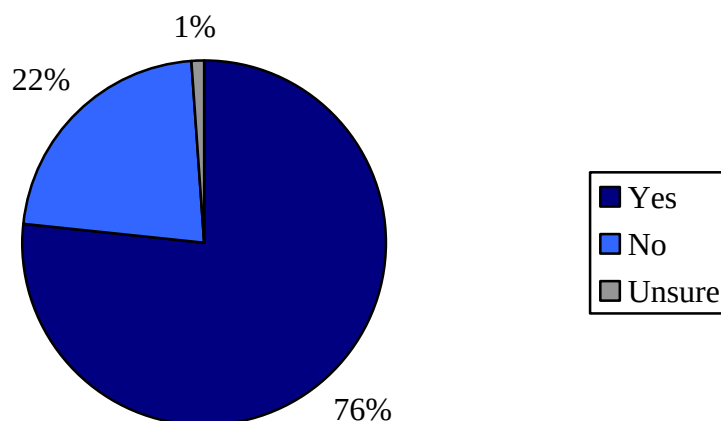
Many respondents express their desire for more social interaction or access to organized activities.

“[I want to] be involved more with community activities because I grow more depressed when I stay inside. I have no outside activities and no way to get around.”

“I'd like to be able to have some kind of a social group where we can meet and play bingo and that sort of stuff. I just think if we had a social group then the ladies and gentlemen would call each other and socially interact with each other maybe just have a talk with each other.”

Question 7: Do any of your family members or friends regularly help you with the things you need?¹⁵

Statewide



	Yes		No		Unsure	
	Number	Percent	Number	Percent	Number	Percent
Atlanta Region	257	76%	78	23%	3	1%
CSRA	225	74%	75	25%	4	1%
Coastal	203	76%	57	21%	4	2%
Georgia Mountains	182	78%	50	21%	1	0%
Heart of Georgia	211	73%	70	24%	6	2%
Lower Chattahoochee	143	75%	42	22%	3	2%
Middle Georgia	200	79%	50	20%	3	1%
NE Georgia	144	81%	30	17%	2	1%
NW Georgia	234	74%	78	25%	2	1%
Southern Crescent	118	79%	31	21%	1	1%
SE Georgia	233	74%	78	25%	4	1%
SW Georgia	165	79%	41	20%	3	1%

More than three-quarters of CCSP clients statewide say they regularly receive help from family members or friends. Responses are consistent across AAA regions. As noted in the answers to the next questions, 95 percent of those who receive assistance get help from a family member.

¹⁵ One percent of respondents have no response.

Question 7a: Who helps you the most?¹⁶

A total of 2,295 respondents, or 75 percent of the total sample, answered this question. The table below presents and describes the response categories into which the respondents' answers are categorized.

Response Category	Description
Family Member	Respondents mentioned different family members who help them – their children, grandchildren, siblings, their parents and grandparents, aunts, uncles, and cousins.
Home help aides	This category includes home visitors and CCSP aides. Some respondents also mention “the woman who helps me at home”.
Friend	A friend or acquaintance.
Medical provider	Includes any medical or care professionals - nurses and certified nursing assistants, care coordinators at residential homes, doctors, etc.
Neighbor	A neighbor helps the respondent.
Church	A representative or volunteer from the respondent’s church.
No one	Some respondents stated that they did not have anyone to help them.
Other	This category includes instances where the respondent states the name of a person but does not describe that person’s relationship to the CCSP client (e.g. “John Jones help us out a lot.”), or where the respondent does not provide enough detail to be able to categorize the source of help (e.g. “We all pitch in.”)

The table below presents the results of question 7a statewide and then by each CCSP service region.

- 2,634 responses are coded across the answer categories (some respondents provided multiple answers).
- The number column for each region is the total number of times the response category is mentioned by respondents. The percent column for each region is the percent of respondents in the region that mention the specific response category.

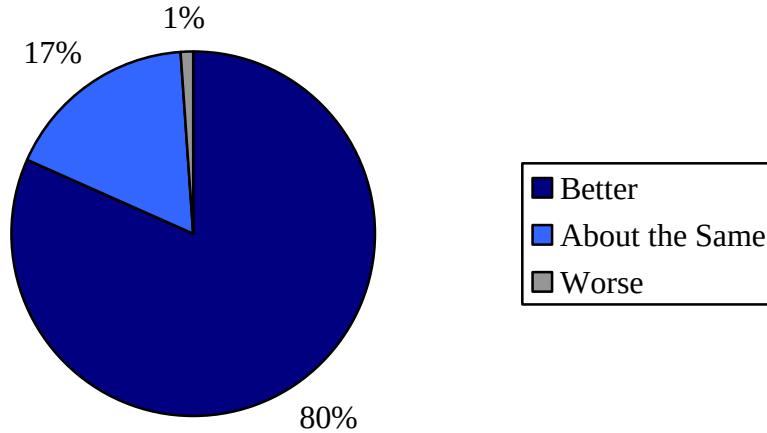
¹⁶ Asked only of those who answer “Yes” to question 7.

	State		Atlanta Region		Coastal		CSRA		Georgia Mountains		Heart of Georgia		Lower Chattha-hoochie		Middle Georgia		NE Georgia		NW Georgia		Southern Crescent		SE Georgia		SW Georgia	
	N=2,295		N=255		N=201		N=223		N=182		N=210		N=140		N=200		N=142		N=233		N=117		N=232		N=160	
Response Category	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%
Family Member	2,188	95%	243	95%	189	94%	220	99%	169	93%	196	93%	130	93%	179	90%	142	100%	227	97%	112	96%	219	94%	155	97%
Home help aides	168	7%	20	8%	15	7%	17	8%	17	9%	10	5%	9	6%	15	8%	9	6%	16	7%	9	8%	22	9%	9	6%
Friend	116	5%	13	5%	11	5%	12	5%	7	4%	13	6%	8	6%	18	9%	5	4%	14	6%	5	4%	7	3%	3	2%
Medical provider	35	2%	3	1%	2	1%	4	2%	3	2%	2	1%	3	2%	7	4%	1	1%	2	1%	3	3%	3	1%	2	1%
Neighbor	23	1%	2	1%	5	2%	1	0%	2	1%	0	0%	1	1%	1	1%	1	1%	0	0%	3	3%	4	2%	3	2%
Church	20	1%	2	1%	1	0%	1	0%	3	2%	2	1%	1	1%	1	1%	0	0%	5	2%	2	2%	1	0%	1	1%
No one	9	0%	2	1%	1	0%	0	0%	0	0%	1	0%	0		0	0%	1	1%	0	0%	1	1%	1	0%	2	1%
Other	82	4%	9	4%	7	3%	5	2%	11	6%	4	2%	8	6%	6	3%	7	5%	8	3%	7	6%	3	1%	7	4%

Across all regions, respondents are most likely to respond that a member of their family helps them the most with the things that they need. Of those respondents who say that a family member helps them, "children" are the most commonly-cited family members who provide assistance. Besides family members, respondents list home help aides, friends, neighbors, medical providers (e.g. nurses, nurses' aides at Personal Care Homes, doctors) and members of their churches.

Question 8: Would you say the help you receive from the CCSP has made your life. . .?¹⁷

Statewide



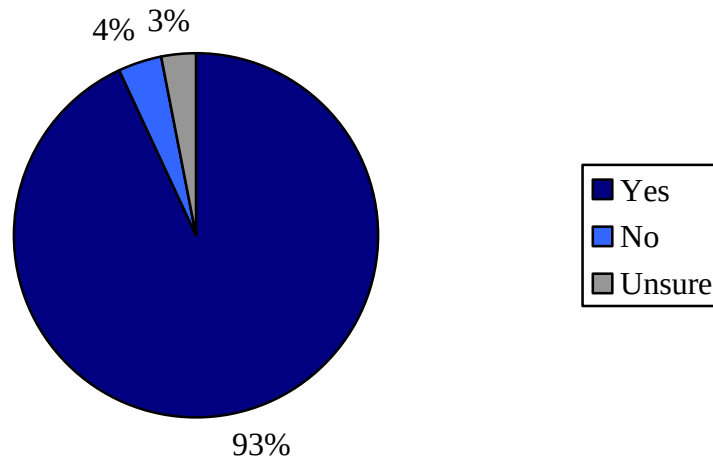
	Better		About the Same		Worse	
	Number	Percent	Number	Percent	Number	Percent
Atlanta Region	266	78%	63	19%	6	2%
CSRA	238	78%	48	16%	7	2%
Coastal	212	80%	45	17%	3	1%
Georgia Mountains	187	80%	38	16%	2	1%
Heart of Georgia	234	81%	49	17%	0	0%
Lower Chattahoochee	147	77%	37	19%	3	2%
Middle Georgia	190	75%	51	20%	2	1%
NE Georgia	147	83%	25	14%	1	1%
NW Georgia	262	83%	40	13%	4	1%
Southern Crescent	129	86%	20	13%	0	0%
SE Georgia	261	83%	45	14%	2	1%
SW Georgia	155	74%	43	21%	1	0%

Eighty percent of CCSP clients statewide say the CCSP program has made their lives better. No less than 74 percent in any region believe the CCSP program has made their lives better.

¹⁷ Three percent of respondents have no response.

Question 9: Would you recommend the CCSP to your family and friends?¹⁸

Statewide



	Yes		No		Unsure	
	Number	Percent	Number	Percent	Number	Percent
Atlanta Region	311	91%	18	5%	8	2%
CSRA	277	91%	17	6%	7	2%
Coastal	240	90%	14	5%	9	3%
Georgia Mountains	221	94%	2	1%	8	3%
Heart of Georgia	274	95%	6	2%	5	2%
Lower Chattahoochee	174	92%	11	6%	5	3%
Middle Georgia	235	93%	10	4%	5	2%
NE Georgia	169	95%	3	2%	5	3%
NW Georgia	294	93%	8	3%	8	3%
Southern Crescent	142	95%	5	3%	2	1%
SE Georgia	295	94%	8	3%	9	3%
SW Georgia	192	92%	9	4%	7	3%

Ninety-three percent of CCSP clients statewide would recommend the program to family and friends. No less than 90 percent of clients in any region would recommend the program, and responses are fairly consistent across AAA regions.

¹⁸ One percent of respondents have no response.

Question 10: Is there anything else you would like to tell me?

A total of 915 respondents, or 30 percent of the total survey sample, answered this question. The table below presents and describes the response categories into which the respondents' answers are sorted.

Response Category	Description
Satisfied with CCSP services	Over half of the 30 percent that responded say they are happy with the services they receive from CCSP. Many say the service allows them or their family member to stay at home rather than have to go into a home, and that they wouldn't be able to survive without the assistance the service provides. Many respondents report they have had a positive experience with their home health aide or nurse and have close relationships with their aides. Some respondents describe good coordination of services by program managers and regular and effective communication from program managers.
Unsatisfied with CCSP services	Some respondents report being unsatisfied with their experience in the CCSP. Many of these respondents are not satisfied with service they receive from personal support (home health) aides. Respondents report they do not receive adequate information from providers if their aide cannot make it as scheduled. Some respondents describe a lack of care coordination. They say that because of confusion around benefits, billing, and payment, the program can be "more trouble than it's worth." Respondents observe that the high rate of staff turnover among both home aides and program management affects the quality and consistency of care that clients receive. Other respondents report being unsatisfied with the quality of the meals they receive from the program.
Have additional needs	These respondents describe the needs that are currently not being met by CCSP.
Suggestions for improving/expanding services	Respondents mention ways in which they would like to see CCSP program services expanded beyond the current program's purview to meet their needs. A summary of client suggestions for the program follows the presentation of results below.
Additional information needed	These respondents request additional information. Some respondents do not understand their benefits or how the program works. Some respondents do not understand how their level of benefits is determined and why their services are changed. Other request information on how to get their friends or family members enrolled in the program.
High cost of services	The respondents feel that the program's cost is prohibitive. Some interviewed say that they had to discontinue service because they could no longer pay for it. Others mention that co-pays have increased and they do not understand why.
Financial Assistance	These respondents talk about their financial difficulties. Some of these respondents also express concern over the increasing costs to receive CCSP services and fear they will not be able to make the service co-payments. A small group of respondents express great concern over the letter they received from DCH saying that they would have to pay back money for services received through CCSP.
Other	The answers coded under this response category are unrelated to the CCSP program or are indistinguishable.

The table below presents the results of question 10 statewide and then by each CCSP service region.

- A total of 1,116 responses from 915 respondents are coded across the answer categories (some respondents provided multiple answers).
- The number column for each region is the total number of times the response category is mentioned by respondents. The percent column for each region is the percent of respondents in the region that mention the specific response category.

	State		Atlanta Region		Coastal		CSRA		Georgia Mountains		Heart of Georgia		Lower Chatta-hoochie		Middle Georgia		NE Georgia		NW Georgia		Southern Crescent		SE Georgia		SW Georgia	
	N=115		N=15		N=14		N=11		N=8		N=7		N=11		N= 12		N= 6		N= 14		N= 4		N= 11		N= 2	
Response Category	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%
Satisfied with CCSP service	536	59%	66	56%	47	52%	57	62%	39	56%	54	74%	35	58%	43	57%	28	70%	57	59%	21	46%	64	63%	25	49%
Unsatisfied with CCSP service	125	14%	24	19%	16	18%	4	4%	13	19%	6	8%	9	15%	13	17%	3	8%	14	14%	10	22%	5	5%	8	16%
In need of additional services	112	12%	14	11%	14	15%	11	12%	13	19%	2	3%	5	8%	11	14%	5	13%	13	13%	8	17%	7	7%	9	18%
Suggestions for improving/expanding services	74	8%	11	9%	10	11%	12	13%	5	7%	3	4%	6	10%	6	8%	2	5%	3	3%	8	17%	5	5%	3	6%
Additional information needed	31	3%	8	7%	1	1%	5	5%	2	3%	1	1%	3	5%	3	4%	2	5%	0	0%	1	2%	2	2%	3	6%
Financial assistance needs	28	3%	4	3%	2	2%	3	3%	1	1%	2	3%	1	2%	3	4%	0	0%	3	3%	2	4%	4	4%	3	6%
Other	95	10%	8	7%	10	11%	9	10%	8	11%	7	10%	7	12%	8	11%	2	5%	14	14%	3	7%	15	15%	4	8%

Across all regions, 59 percent who answered this question state that they are satisfied with the services provided by the CCSP. Of those who are satisfied with the services they receive, some respondents specify the reason that they are pleased. Many respondents say that they are happy with the aide(s) who come into their home. A respondent describes the experience with her CCSP aide:

“She goes beyond the call. She stands up for me and solves the problems and she advocates for me, she is a good one... I am just very happy to be situated to where I get help and I am glad I am hooked up on this program. I would have to be in a nursing home, but now I get to live a normal life.”

Among those respondents who are unhappy with the services that they are receiving from CCSP, the most commonly-stated reason for their dissatisfaction is their experiences with aides who are unreliable (e.g. aides who do not show up on time or at all; aides who do not perform the tasks that they are supposed to).

Some respondents observe that the quality of care is dependent on the contracting agency providing the services. These respondents describe the differences in their experiences depending on the agency providing home care:

“We were with [one agency] and they were worthless. I had some aides leave my husband alone and one tried to sell him drugs. So I called [CCSP] and then they put me with [a different agency]. They are kind and caring - I have seen such a difference in the two agencies.”

Respondents suggest that the companies contracted by CCSP should be vetted more thoroughly and that CCSP needs to provide more oversight of these agencies to ensure that services are appropriate and of high quality. Respondents describe their experiences with some of the home visiting agencies:

“Do better about getting a company with those nursing services. They all have their problems. I would like to see more investigation into these companies.”

“[CCSP should] get into background checks, for the benefit of these old people they should. My mother has had stuff stolen.”

Respondents also share their thoughts on how the CCSP program can be improved beyond the scope of services the agency is currently offering. Respondents request help with maintaining/cleaning their home, additional assistance with personal care (more comprehensive medical care services provided by CCSP), as well as access to organized activities (classes, trips) and opportunities to socialize with other people.

Analysis: Personal Care Home Interviews

Familiarity With and Use of Services Provided by the Area Agencies on Aging

Very few of the 24 interviewed residents have used services provided by the Area Agencies on Aging (AAAs), either while residents at these facilities or prior to becoming residents. Less affluent residents of smaller Personal Care Homes are more likely to have used and to know about these services than are more affluent residents of larger Personal Care Homes.

Residents of Larger Personal Care Homes

When asked about the use of the Georgia Legal Assistance Program (ELAP), the more affluent residents of the larger Personal Care Homes report that they have wills and have completed the documents that allow others to make financial and medical decisions for them. A Griffin woman responded, “I can’t think of anything I would need from them because I have the living will and my daughter has the power of attorney. She has that right now, and I can’t think of anything that I might need.” Another Griffin woman reported, “My son has power of attorney. He writes all of the checks.” A third woman in Griffin added, “I don’t think I will be needing that kind of help. We had lawyers draw up wills. I made my son my power of attorney for health care. He also has the power of attorney for financial decisions. Everything is in order.” In Athens, a woman resident commented, “I don’t need those services because we have it all set up. My son has taken care of it.” However, she added, “I didn’t know that they had an organization that would help you. Thank goodness my son could do it for me. If they had a group of people who could step in and do what he has been doing for me, I think that would make a great deal of difference for the ladies who have never had to do all that stuff.” Another Athens woman said she does not need the services of Elderly Legal Assistance Program (ELAP) because she “has an attorney of my own.” And an Athens man said, “Our daughter has our power of attorney for health and finances. We depend on her entirely to make those decisions.”

These residents express the most interest in learning more about the GeorgiaCares program when they learn that they can receive assistance in understanding Medicare benefits. A Griffin woman said, “I would like to know about it because it seems to me that I’m paying this and paying that, and I’m not sure whether I’m paying enough or where it’s all going.” A Griffin man thought he could use the services of GeorgiaCares to help him organize his Medicare claims by “getting it all consolidated so I have one sheet to look at.”

More residents of the larger Personal Care Homes report having heard of the Ombudsman program than having knowledge of either ELAP or GeorgiaCares. Materials posted in the facility or distributed to residents are the main source of information about the Ombudsman program. A Griffin woman noted, “I saw that just recently at the nurse’s station.” A Griffin man concurred, “I see a sign out there, ‘Ombudsman will help you.’” Similarly in Athens, a man knew about the Ombudsman program because “there’s a sign downstairs.” One commented, “I have read it on the notice back there. I have heard of it. I know it’s there, but I’ve never used it.” One Griffin woman did indicate that she had twice seen the Ombudsman that visits Brightmore and that they “just talk.”

An Athens man may have best described why so few of these residents are familiar with the services provided by the AAAs when he said, “I’ll be honest with you, poor people don’t live here. Poor people could not afford to live here.”

Only a few of these individuals had used services provided by the Division of Aging (DAS) prior to becoming a resident. One Griffin resident reported having received the service of Meals on Wheels prior to becoming a resident at Brightmore. He said, “I used Meals on Wheels for three months. I was living alone, and a lot of days I couldn’t get out or didn’t feel like getting out. Meals on Wheels is very good.” An Athens man and his wife were volunteers for Meals on Wheels before moving to Arbor Terrace. He recounted the experience of waiting in the car while his wife delivered the meals, “Sometimes she would take a while. I would wait and wait and she didn’t come out. She said, ‘I can’t leave when they want to talk.’ Of course, I understood that.” A Griffin woman described her experiences at the senior center: “They offered bridge lessons, so I always went and played. Then they offered Tai Chi, and I did that for balance. I enjoyed it.” An Athens man, whose wife has Alzheimer’s Disease, told of having attended a conference sponsored by DAS, “In that program they covered the types of Alzheimer’s and what you can expect. They did a good job.”

Residents of Smaller Personal Care Homes

Of the seven residents of smaller Personal Care Home that were interviewed, five have used one or more services provided by the Area Agencies on Aging. A Covington woman used the services of GeorgiaCares to assist her in enrolling in a Medicare prescription benefit plan. This same woman knows the LTC Ombudsman by name and has spoken with her on several occasions. She said, “I know if things come up that are not supposed to come up, she told me to call her.” Both women interviewed in Albany know the LTC Ombudsman. One commented that the LTC Ombudsman “asks me how I like it here and things like that.” A Dawson woman receives services through the SOURCE program. She explained, “They come out to visit and talk to you and ask about your visit to the doctor. They are interested in you going to the doctor.” She also knows her LTC Ombudsman who she says “comes to see how I am doing and how I like the place.” A second Dawson woman reported that a LTC Ombudsman had provided assistance to her in moving from another Personal Care Home to the one where she currently resides.

Unmet Needs

Residents of Larger Personal Care Homes

Many of the residents of the larger Personal Care Homes that were interviewed still drive and are capable of taking care of most of their personal needs. Almost all indicate that they have family members that assist them when an issue arises that they cannot tend to themselves. A few of these residents do express a desire for transportation services, particularly to and from doctors’ appointments. When questioned about unmet needs, a Griffin man answered, “The only thing is transportation for going to the doctor or going for something along that line.” A Griffin woman concurred when she said, “We’re about three miles out of town, and some of us would like to see a form of transportation that is affordable. It would be nice if we had some sort of service.” Transportation is also an issue for several Athens residents. One said, “It would be nice if they

could provide a car to use if I wanted to go somewhere. I don't want to pay a taxi just to take me to the library. They take us to the doctor and the bank, but it's these little things. I would love to have a car to take me and let me visit a friend." Another noted, "There are some people here who need driving services to get to doctors and things like that." A third said, "It would be nice if they had some personnel here that could take you to buy some clothes or something you really need."

An Athens woman offered this suggestion for assisting families when a loved one has died: "In the military, they have what they call a CAO, Casualty Assistance Officer, where someone in the military acts for the family. You call the military, and they send somebody to help with affairs, what forms to fill out, who to contact and all of that. I don't expect we could do that for every citizen, but there could be some sort of information kit that anybody could follow."

Residents of Smaller Personal Care Homes

Residents of smaller Personal Care Homes identify more unmet needs than more affluent residents who reside in larger facilities. As with residents of larger facilities, transportation is the most important concern. One Covington woman reported having difficulty in scheduling the van that takes her to her doctor's appointments. She said, "It has been two weeks. I got in touch with transportation, but they told me I needed to call mental health. I called and called and called. When it wasn't busy, the person I needed to talk to wasn't there. I hope one of the ladies here can take me next week when I go see the doctor." Transportation is a concern for an Albany woman who lamented, "Sometimes I want to go to my sister's house, but I don't have any way to go." Similarly, a Dawson woman asserted, "I really need transportation to get back and forth to visit my daughter in Albany. On the weekend, maybe I could stay."

Two women - one in Dawson and one in Albany - requested assistance in obtaining new dentures. The Dawson woman said, "I need for somebody to carry me to the dentist and get some dentures, see about getting some teeth." The Albany woman expressed the same need: "I don't have natural teeth. I have dentures. These I have are getting to where I bite my lips. I need some new dentures, but I don't have the money to pay for them."

A woman in Covington, who is having problems receiving her allowance, told the interviewer, "I think this is about my fourth Personal Care Home. I'm supposed to get a \$95 allowance, but I haven't gotten it yet. Usually, in the other places I have been, they would take such and such amount out of my social security check and give it to me. I don't have anybody here, and it's hard to live off nothing."

Conclusions

These surveys were conducted to provide public input into the renewal of the State Plan on Aging and the CCSP waiver. In general, urban and rural Georgians do not differ in what they perceive they will need in the way of support services as they age. The survey results do highlight several planning, education, and outreach opportunities for the Division of Aging Services (DAS).

State Plan on Aging Survey

Only half of all respondents say they know who to turn to for information about future long-term care service needs, and the top responses cited are insurance and medical providers. Only 15 individuals mention (DAS) by name. Rural residents are more likely to say they would get information directly from nursing facilities. Because 83 percent of respondents are unaware of the services offered by the Aging Network, there is a significant opportunity for educational outreach.

Almost one-third of respondents think they need to focus on diet and exercise to improve or maintain health and wellness. There may be an opportunity here to promote Aging Network services that are aligned with diet and exercise. Other concerns focus on access to care, access to medication, and access to insurance. Promotion of Aging Network services that connect individuals with care, medications, and Medicare or Medicaid may be an important future emphasis of the DAS if not emphasized already.

More than half of respondents expect to depend on various family members to care for them in the future. It may be beneficial to the state and to the quality of life of aging Georgians to support programs that foster family support such as educational programs, coping classes, respite care, and paid family care. Because 30 percent of respondents cite institutional care, but emphasize assisted living, when asked who will care for them in the future, the state might investigate the promotion of affordable assisted living to meet the needs and desires of aging Georgians, as there appears to be an expectation that it will be available.

A portion of the respondents appear to have conducted a minimum of planning for their future. Two-thirds do not plan to have long-term care insurance, 40 percent do not have a pension, and 31 percent do not have retirement savings. Sixty-five percent do not plan to have an advance directive. An opportunity here to promote planning for future long-term care needs may be that 82 percent of respondents have or plan to have life insurance and only four percent have or plan to have reverse mortgages. Promotion and education about programs that tap life insurance and reverse mortgages for long-term care support may be beneficial.

Law enforcement may be the best, first contact when one needs to report abuse, neglect, or exploitation, but very few individuals cite Adult Protective Services (APS) as a resource, so there may be an opportunity to promote the services offered by the APS and LTC Ombudsman Program.

Many respondents have not thought about what kind of services they may need in the future, but others express a desire for information and education about financial planning, the type of services that may be available to them, independent living skills, and social outlets for seniors – all areas with which the Aging Network may be able to assist.

Finally, and perhaps providing the most insight into the level of need that may exist across Georgia in the near future as the population ages – 48 percent of respondents expect their incomes to be below 300 percent of the federal poverty level (\$29,400) - near the point at which elderly Georgians may qualify for Medicaid reimbursed institutional care and some home and community-based Medicaid waiver programs. This may be an indication of the potential need to promote the access of previously untapped resources (life insurance policies, home equity) and develop programs that support in-home care and less reliance on state resources.

Limitations

The State Plan on Aging survey was designed to be representative of the state's population of residents over age 55 in urban and rural areas of the state. It was not designed to be representative of any other demographic factors (age group, income, gender). Within urban and rural areas, the age group 65 to 84 is disproportionately represented (59 percent of total respondents). This is likely due to the fact that potential respondents age 55 to 64 are more likely to be working and not available to be interviewed. Nonetheless, the survey provides statistically valid data across rural and urban regions and provides a reliable baseline to support future surveys of Georgia's aging population.

CCSP Survey

Responses to the CCSP survey are fairly consistent across regions.

Clients are overwhelmingly satisfied with CCSP services, leaving little room to improve this metric. Ninety-four percent are either very or somewhat satisfied with their services. Of those who are not satisfied with the program, most have problems with their in-home aides. This area may have room for improvement in credentialing, training, or other areas that might improve the client experience.

In the area of care coordination, most clients know who their Care Coordinator is, and because of the nature of the client population, it is unclear if there is anything the program can do to improve on this metric. Ninety-two percent of clients believe their Care Coordinator helps get the things they need.

Seventy percent of clients are very or somewhat involved with their service planning, but 36 percent would like to be more involved in planning their services. This may present an opportunity for greater client-centered focus in care plan development.

Twenty-five percent of clients would like additional help, but it is not clear if clients are eligible for the additional help they desire. The most common request is for durable medical equipment, more variety of in-home help, and more hours with their in-home help.

More than one-third of respondents would like to do things outside their homes that they feel they cannot now do. Most would like to do simple things like gardening, being engaged in out-of-home activities, running errands, and just getting out of the house. Many do cite, however, that their physical limitations make these desires problematic, as there are no additional resources for the help that would allow them to do such things.

More than three-quarters of respondents are assisted by friends and family members, and family members are overwhelmingly (95 percent) the individuals providing the most additional support. There may be programmatic opportunities to provide additional incentives or support to caregivers that will prolong the time a client remains outside an institution.

Eighty percent of respondents state that the program has made their lives better, and 17 percent state the program has made their lives about the same, which appears to support the CCSP's legislative intent.

Ninety-three percent of respondents would recommend the program to family and friends, again a metric that would be hard to improve.

Finally, there is a small number of clients who have recommendations for improving the CCSP program. These suggestions focus on better credentialing of agencies and caregivers and improved oversight. The CCSP program may wish to review its process of gathering and acting upon client feedback.

Personal Care Home Interviews

More affluent residents of larger facilities, who tend to have sufficient financial resources to meet their personal needs, are largely unfamiliar with the services provided by Area Agencies on Aging (AAAs). None report having used any of the services discussed: Elderly Legal Assistance Program (ELAP), GeorgiaCares, and LTC Ombudsman. They are most familiar with the LTC Ombudsman program because of information posted in their facilities. Residents of smaller facilities, who tend to be lower income, are more acquainted with the services provided by AAAs, particularly the LTC Ombudsman program. Five of the seven residents interviewed had used one or more of the services discussed.

Transportation services are the most frequent requests of all Personal Care Home residents when asked about their unmet needs.

Appendix A: State Plan on Aging Telephone Survey

Hello! May I speak with _____? This is _____ calling on behalf of Georgia's Division of Aging Services. I am calling to ask you 15 questions related to your awareness of Aging Services programs. We pulled your name randomly from a list of Georgia residents age 55 and older. The questions are related to your knowledge of Aging Services programs. We are collecting this information as part of a research study so Aging Services can be sure the State Plan on Aging is responsive to the needs of its older citizens.

The survey will take about eight minutes to complete, and your participation is totally voluntary. We expect to collect answers from about 800 residents. Your name and other facts that might point to you will not appear when we present the results. You will not be identified personally. Your participation in the survey will help Aging Services plan better for aging services around the state, and we do not anticipate any risks to you as a result of your participation in this research.

May I ask you the 15 questions? <If "Yes," go to Q1>

1. If you had a future need for information about long-term care services and resources would you know who to contact?

1. Yes [Go to 1a]
2. No [Skip to 2]
3. Unsure [Skip to 2]
4. Unclear Response [Skip to 2]
5. No Response [Skip to 2]

1a. Who would you contact?

Open _____

2. Are you aware of the broad range of services offered by the statewide Aging Network?

1. Yes [Skip to 3]
2. No [Go to 2a]
3. Unsure [Go to 2a]
4. Unclear Response [Go to 2a]
5. No Response [Go to 2a]

2a. If no, *"The Aging Network seeks to improve the effectiveness and efficiency of services provided to older Georgians and their families through policy development and planning. The delivery system is comprised of Federal agencies, State Units on Aging, Area Agencies on Aging, service providers, adult care centers, caregivers, and volunteers."* <Go to Q3>

3. Compared to others your age, would you say you are ...

1. More Healthy
2. As Healthy
3. Less Healthy
4. Not Sure

4. What do you think you will need to improve or maintain your health and wellness in the future?

Open _____

5. If you were unable to care for yourself in the future, what would you do?

Open _____

6. In the future, do you plan to have ...

- | | | | |
|--------------------------------------|----------|---------|-------------------|
| 1. Long-term Care Insurance | Yes ____ | No ____ | Already Have ____ |
| 2. A Pension | Yes ____ | No ____ | Already Have ____ |
| 3. A Will | Yes ____ | No ____ | Already Have ____ |
| 4. An Advance Directive | Yes ____ | No ____ | Already Have ____ |
| 5. Life Insurance | Yes ____ | No ____ | Already Have ____ |
| 6. Retirement Savings or Investments | Yes ____ | No ____ | Already Have ____ |
| 7. A Reverse Mortgage | Yes ____ | No ____ | Already Have ____ |
| 8. Supplemental Health Insurance | Yes ____ | No ____ | Already Have ____ |

7. Do you provide care for any of the following?

- | | | | |
|--|----------|------------|---------|
| 1. Older Adult (age 60+) | Yes ____ | [Go to Q8] | No ____ |
| 2. Adult with a disability (age 18-59) | Yes ____ | [Go to Q8] | No ____ |
| 3. Child(ren) with a disability (under age 18) | Yes ____ | [Go to Q8] | No ____ |
| 4. Child(ren) of other relative (under age 18) | Yes ____ | [Go to Q8] | No ____ |
| 5. Not Applicable | | | |

8. What kind of assistance, if any, would you need to continue to provide this care?

Open _____

Interviewer prompt, if needed: (support group, counseling, info, respite care, assistive devices, home modification, transportation)

9. If you or someone you knew was the victim of abuse, neglect, or exploitation, where would you go to get help?

Open _____

10. In planning for the future, what types of services or assistance might you want?

Open _____

11. Do you expect your annual income in retirement will be more or less than \$29,400 (in today's dollars)?

1. More
2. Less
3. Don't Know
4. No Response

Appendix B: Community Care Services Program Client Survey

Hello! May I speak with _____? This is _____ calling on behalf of Georgia's Division of Aging Services, and the CCSP Program. I am calling to ask you 15 questions related to your experiences and ideas about the CCSP program. The Division of Aging Services provided your name to us to do this survey. The questions are related to your experiences with and ideas about the CCSP program. We are collecting this information as part of a research study so Aging Services can be sure the CCSP program is responsive to the needs of its clients.

The survey will take about 15 minutes to complete, and your participation is totally voluntary. We expect to collect answers from about 3,000 clients, who, like you, are a part of the program. Your name and other facts that might point to you will not appear when we present the results. You will not be identified personally. Your participation in the survey will help Aging Services plan better for the CCSP program, and we do not anticipate any risks to you as a result of your participation in this research.

May I ask you the 15 questions? <If "Yes", go to Q1>

1. How satisfied are you with your CCSP services?

1. Very Satisfied
2. Somewhat Satisfied
3. Somewhat Dissatisfied [Go to Q1a]
4. Very Dissatisfied [Go to Q1a]
5. No Response

1a. Can you tell me about that?

Open _____

If interviewee needs prompts for services: "Services like the Social Worker, the Center, the Home, the Button, Meals, the Nurse or Special Therapist, Help, and the Aide".

2. Do you know who your CCSP Care Coordinator is?

6. Yes [Go to Q2a]
7. No [Skip to Q3]
8. Unsure [Skip to Q3]
9. Unclear Response [Skip to Q3]
10. No Response [Skip to Q3]

2a. Does your CCSP Care Coordinator help you get what you need when you need it?

1. Yes
2. No
3. Unsure
4. Unclear Response
5. No Response

3. How involved are you in planning your CCSP services?

1. Very Involved
2. Somewhat Involved
3. Somewhat Uninvolved
4. Not at All Involved
5. No Response

4. Would you like to be more involved in planning your CCSP services?

1. Yes
2. No
3. Unsure
4. Unclear Response
5. No Response

5. Is there anything else you need help with?

1. Yes [Go to Q5a]
2. No [Skip to Q6]
3. No Response [Skip to Q6]

5.a Can you tell me about that?

Open _____

6. Is there anything you want to do outside your home that you don't do now?

1. Yes [Go to Q6a]
2. No [Skip to Q7]
3. Unsure [Skip to Q7]
4. No Response [Skip to Q7]

6a. What would you like to do?

Open _____

7. Do any of your family members or friends regularly help you with the things you need?

1. Yes [Go to Q7a]
2. No [Skip to Q8]
3. Unsure [Skip to Q8]
4. No Response [Skip to Q8]

7a. Who helps you the most?

Open _____

8. Would you say the help you receive from the CCSP has made your life. . .?

1. Better
2. About the Same
3. Worse
4. No Response

9. Would you recommend the CCSP to your family and friends?

1. Yes
2. No
3. Unsure
4. No Response

10. Is there anything else you would like to tell me?

Open_____

Those are all of the questions.

Thank you for taking the time to share your thoughts with the Georgia Division of Aging Services. Have a pleasant evening.

Appendix C



B. J. Walker, Commissioner

Georgia Department of Human Resources • Division of Aging Services • Maria Greene, Division Director
Two Peachtree Street, NW • Suite 9.398 • Atlanta, Georgia 30303-3142 • Phone: 404-657-5258 • Fax: 404-657-5285

September 28, 2006

Dear CCSP client:

The Georgia Division of Aging Services **Community Care Services Program (CCSP)** is conducting a phone survey. The survey's purpose is to understand your experiences as a CCSP client, your ideas about the services and thoughts you may have about improving the program.

About 3,000 CCSP clients will be contacted by Pegus Research, Inc., the agency hired to make the phone calls. If you are contacted, the 15-question phone survey will take about 15 minutes to answer. Taking part is voluntary. You will not be identified personally in any reporting. Your services will not be affected.

As a result of your being in this study, your ideas will be considered in the state's current review process. Responses received from the survey will assist the CCSP plan its program goals, services and set its priorities for the next 5 years.

Sincerely,

Maria Greene
Director, Division of Aging Services

Call Glenn M. Landers at 404-463-9562 if you have questions about this study. If you have questions or concerns about your rights as a participant in this research study, you may contact the Institutional Review Board (IRB) which oversees the protection of human research participants. Susan Vogtner in the office of research compliance can be reached at 404-463-0674.

Appendix D: Personal Care Home Discussion Guide

Greeting and Introduction – 5 minutes

- Interviewer is introduced to resident by Personal Care Home staff
- Interviewer greets resident and thanks them for meeting with her
- Interviewer explains purpose of visit
 - GA Division of Aging Services is preparing a plan for how to deliver their services to older Georgians for the next 5 years
 - This plan is required in order to get money from the Federal government for Georgia
 - It is important to hear from people that are receiving or may need services to know how to better meet their needs
- Interviewer emphasizes to resident that she is not an employee of the Personal Care Home and has not been hired by the Personal Care Home
- Interviewer tells resident that he/she does not have to answer any questions he/she does not want to answer
- Interviewer tells resident that their conversation is being recorded but that their name will not be associated with anything they say – the conversation is strictly confidential
- Interviewer stresses to resident that this conversation is just to hear about their experiences and ideas, their current services will not be changed as a result nor will they be getting any new services
- Interviewer reads Informed Consent Form and has resident sign it
- Interviewer asks resident if they have any questions before starting the interview

Learning About the Resident – 5 minutes

1. Please tell me something about yourself. What do think is important for people to know about you? What do you like to do?
2. How long have you been living at (name of residence)?

Current Services – 5 minutes

3. Other than your family and the people who work at (name of residence), does anyone else provide services to you or help you in any way?
4. Who are they, what do they do for you?

For each person mentioned, interviewer asks the following:

5. Does this person come often enough to meet your needs?

6. Could this person do something else related to (type of service being provided) that would be helpful to you?

Unmet Needs – 10 minutes

7. Do you ever have a problem that you don't have anyone to help you with? What kind of problem? How often do you have this problem? Have you ever asked anyone to help you with this problem? What happened when you asked?
8. Are there other things that may not be a problem but it would be nice to have somebody do for you? What things? Does (name of Personal Care Home) have anybody to help you with this? If so, why don't you use that help?

Awareness of AAA Services – 10 minutes

9. Do you know about the Elderly Legal Assistance Program? This program provides legal advice, counseling and representation by an attorney to elderly Georgians.

- Have you ever used this service?
- How was your experience?
- Would you use them again if you needed legal help?

Or

- If you haven't used this service before, would you use it now that you know about it?

10. Are you aware of a program called GeorgiaCares? This program provides information about eligibility for benefits like Medicare and Medicaid. They can also help you if you are having trouble with claims for these benefits.

- Have you ever used this service?
- How was your experience?
- Would you use them again if you needed this kind of help?

Or

- If you haven't used this service before, would you use it now that you know about it?

11. Do you know about the Ombudsman program? Ombudsmen check on residents in this facility and work to resolve whatever problems they might have.

- Has an Ombudsman ever visited you?

- Did they help you solve a problem you were having?
- Do you think you need the services of an Ombudsman?

12. Have you used any other services from your local Area Agency on Aging? Have you ever asked them to help you find any kind of assistance? Did you know that that was a service available to you? Now that you know, would you call them if you needed to find some type of assistance?

Closing

13. Is there anything else you would like to tell me about services that you have used or may need?

Interviewer thanks resident for their time.

Document Metadata

This document was retrieved from IssueLab - a service of the Foundation Center, <http://www.issuelab.org>

Date information used to create this page was last modified: 2010-12-21

Date document archived: 2010-05-21

Date this page generated to accompany file download: 2014-01-14

IssueLab Permalink: http://www.issuelab.org/resource/final_aging_report_2_2_07

Final Aging Report 2-2-07

Publisher(s): Georgia Health Policy Center of the Andrew Young School of Policy Studies

Date Published: 2007-02-01

Rights: Copyright 2007 Georgia Health Policy Center of the Andrew Young School of Policy Studies

Subject(s): Aging; Health