



24-5529

**DATE:** May 7, 2024 (Item No. {{item.number}})  
**TO:** Board of Supervisors  
**FROM:** Daniel Little, Director, Social Services Agency  
**SUBJECT:** Santa Clara County Adult Caregiver Study Update

### **RECOMMENDED ACTION**

Under advisement from August 29, 2023 (Item No. 13): Receive report from the Social Services Agency, Department of Aging and Adult Services, relating to the Santa Clara County Adult Caregiving Study Update.

### **FISCAL IMPLICATIONS**

There are no fiscal implications associated with receiving this report. Proposals for funding respite care and launching a caregiver registry would follow the budgetary process recommended by the County Executive and approved by the Board of Supervisors.

Administration recommends that a strategy be developed prior to considering funding Adult Caregiving initiatives, which would include the role and funding sources of the Area Agency on Aging, in combination with engaging foundations and healthcare plans that focus on the preventative and long-term care benefits of the service.

### **REASONS FOR RECOMMENDATION AND BACKGROUND**

On August 29, 2023, at the request of Supervisor Simitian, the Board of Supervisors (Board) directed the Social Services Agency, Department of Aging and Adult Services (DAAS) to report back in April 2024 regarding family caregivers, with a focus on the caregiver information and referral system, respite care, and the current and future resource needs for the recommendations presented in the study.

The Seniors' Agenda reconvened the workgroup that participated in making recommendations for the Adult Caregiver Study. Additional stakeholders from In-Home Supportive Services (IHSS), the Public Authority, Sourcewise, Santa Clara Valley Healthcare, and the Office of the County Executive (CEO) were engaged to participate in the workgroup. Two subgroups were created to provide subject matter expertise in the areas of respite care and information and referral. The full workgroup met monthly from November through February. The subgroups met monthly from December through February and presented their ideas to the full workgroup.

The following are the resulting recommendations and related information developed by the

workgroup:

## **Respite Care**

The Adult Caregiving Study recommended the County “[d]evelop a long-term plan to increase the number and affordability of respite care services in- and out-of-the-home.”

Utilization of Adult Day Programs (ADPs) and Adult Day Health Care (ADHC) dropped during the pandemic when these in-person programs closed; subsequently, many older adults were hesitant to gather in congregate settings. Adequate space is still currently available with many providers, as people have become more comfortable being around others again, with ADP and ADHC service providers reporting more utilization of services this past winter than at any time in the last few years.

Recommendations related to increasing the affordability of respite care and increasing out-of-home respite care capacity at the appropriate time:

1. Launch respite care subsidy beginning April 1, 2025.

Family caregivers need affordable and accessible breaks from their caregiving duties and creating a new respite care subsidy helps meet this need. Launching a respite care subsidy in April 2025 allows time to competitively procure a vendor to administer the subsidy program. Because the program would take time to enroll participants and ramp up, it is estimated that the program would serve 50 people for one quarter in FY25 and 100 people in fiscal year (FY) 26. Program eligibility and subsidy level would be based on the Elder Economic Security Index (EESI) for Santa Clara County and level of care needed. Each participant’s subsidy would vary between \$500 to \$1,250 per month.

This program would differ from the existing Adult Day Services Pilot Program in that participants could choose the appropriate type of care for their own situation, including out-of-home care, home care agencies, and private caregivers. Priority would be given to individuals who do not receive other assistance paying for care.

The estimated cost for this program will be \$150,000 in FY25 and \$1,250,000 in FY26. Identification and evaluation of resources available for funding to sustain and expand affordable respite care will be researched.

2. Strengthen the Senior Care Commission.

The Senior Care Commission can be strengthened by reviewing commission rules to remove participation barriers and creating a unique webpage for the Commission that is clear about the important work it does. The webpage would describe what the commission is, how a commissioner can make an impact on the community, and who the commission influences. It would also include the number of members on the commission and how each seat is appointed.

Additionally, support of AB817 at the state level would, if enacted, allow the county the flexibility to “remove barriers to entry for appointed ... office by allowing non-decision-making legislative bodies to participate virtually” in certain circumstances.

The website could also highlight interesting work of the commission, by listing past accomplishments and policy issues the commission has addressed. The page should be easy

to navigate for individuals of all technical abilities and include a direct link to apply.

There is no cost associated with this recommendation if the website is updated by existing County staff and the website update could be done by existing county staff.

3. Track service capacity and utilization for ADP and ADHC centers over the next 18 months to assess whether closed programs could reopen in the future.

Seniors' Agenda, in coordination with the respite workgroup, will create a survey to track the capacity, utilization, and special characteristics (such as language skills and ability to service special care needs) of ADPs in the County. Findings will be included in the Seniors' Agenda annual reports that are presented at Children Seniors and Families Committee in Fall 2024 and 2025.

When ADP utilization nears capacity, the Senior Care Commission should assess whether closed ADP and ADHC locations can reopen in the future, brainstorm ideas to increase capacity, and make recommendations to present to the Board about where and how capacity can be increased.

There is no cost associated with this recommendation at this time.

4. Advocate at the state and federal level to expand eligibility for respite care funding.

The older adult population is growing and additional funding for respite care subsidies to increase the supply of ADPs will be needed. Intergovernmental Relations (IGR) in the CEO should advocate at the state and federal level for respite care funding and support legislation that would increase funding for these services.

There is no cost associated with this recommendation and new legislation could offset other County costs.

## **Information & Referral**

The Adult Caregiving Study recommended that the County “enhance an existing information and referral system to create a ‘no wrong door’ model that meets the needs of caregivers wherever they are in their caregiving journey.” The study also noted that the County has a variety of places where the public, including caregivers, can access information about resources and services. These sources include 2-1-1, the Santa Clara County Community Resource Guide, and the Sourcewise information and referral website.

Since the report was received, Sourcewise and Silicon Valley Independent Living Center have been granted emerging status as an Aging and Disability Resource Connection (ADRC) by the state of California. Sourcewise is currently revamping and improving its information and referral program into a more robust single source that provides enhanced information and referral services for older adults and caregivers. These improvements, although early in the change process, include creating a public facing information portal and training five staff to handle these services and provide referrals with a warm hand off that will meet the needs of new and experienced caregivers.

Additionally, the inability to easily connect people who need care with care providers was identified as a common need without a clear solution. Information and referral providers and medical social workers are frequently asked for help in finding care. Difficulty finding care

providers was also a gap mentioned in the respite care system. The Adult Caregiving Study also recommended the county “[e]valuate the opportunity to develop a countywide direct care worker registry for care recipients, family caregivers, and others.” This recommendation was found to be a core component needed to improve the information and referral system.

Recommendations to enhance the information and referral system:

1. Create an ongoing caregiver information and referral workgroup.

The existence of multiple information sources, including the emerging ADRC, can create confusion regarding which source should maintain what information and which services caregivers most need. As such, Seniors’ Agenda will create and lead an ongoing Caregiving Information & Referral Workgroup to create a forum to clarify roles. The workgroup will focus on the three items below, in order:

- A. Define and distinguish the roles of 2-1-1 and the emerging ADRC; identify the top 10 to 20 services caregivers need, including caregivers of individuals with dementia; map how the top services interact; and make sure information for those services is current.
- B. Develop a no-cost or low-cost (utilizing existing budget) marketing campaign to notify the public of the ADRC and 2-1-1 roles, making sure to remember individuals who are not traditionally connected. The campaign would launch during Family Caregiver Month in November 2024.
- C. Map the landscape of caregiver registry options regarding community needs, including strengths and weaknesses of existing systems.

There is no additional cost needed for this recommendation due to the leveraging of existing resources, but ongoing marketing after the November 2024 campaign could require additional funding to hire a marketing agency or to develop marketing materials.

2. By FY27, launch a caregiver registry and cover the costs of background checks of care providers in the registry.

This recommendation has two parts: creating and launching a caregiver registry and ensuring the providers in the registry have passed a background check.

- A. A caregiver registry should be created and launched within the next two fiscal years. The registry should reflect the community needs and strengths and weaknesses identified by the workgroup. The registry could be a stand-alone application to address the caregiving needs of disabled and older adults, a system that also addresses care needs of children, or a broader system that includes other types of gig work and benefits a variety of county departments. Staffing would be needed to operate and maintain the registry. A marketing campaign would help potential care providers learn about the system. The cost will vary depending on the type, features, and robustness of the system built. Funding could be sought from agencies and partners in the community who use the final system. Types and cost estimates are included below:
  - a. A simple, non-customized caregiver registry operated by a non-profit could cost about \$100,000 annually, inclusive of one full-time employee.
  - b. A robust custom-built care registry similar to the system used by the Public Authority for IHSS care providers would be a one-time cost of up to \$550,000,

plus ongoing licensing costs. Staffing costs would vary based on the complexity of the system.

- c. A broader system that includes care providers of older and disabled adults, childcare providers, “handy” persons, temporary workers, day laborers, and other non-traditional workers at a cost of about \$200,000 annually, but with the ability to collect fees in the system to offset some costs. Technical support staff could be centralized, but other staffing costs would vary based on the number of participating departments because each may require dedicated staff.
- d. As an alternative to purchasing a system, County staff could build a caregiver registry. This option would reduce initial costs but would redirect staffing resources from other projects.

B. To reduce the likelihood of elder abuse for registry users, fund background checks for care providers of older and disabled adults. The cost of background checks is estimated at \$120,000 per year based on 200 checks per month. Additionally, a .25 full-time employee would be needed to review the background checks, plus additional staffing for technical support.

The cost associated with this recommendation is uncertain and would occur in FY26 or FY27 and would vary based on the type of system and robustness. A progress update will be included in the FY25 or FY26 Seniors’ Agenda annual report.

- 3. By FY27, fund short-term care for high-risk individuals discharged from the hospital who do not have other care.

To reduce the likelihood of hospital readmissions, Medi-Cal is beginning to provide short-term care for individuals being discharged from the hospital. Many older adults are above the income threshold for Medi-Cal, but still unable to afford short term post-discharge care and do not have anyone who can assist at this time. Nonetheless, tasks like filling prescriptions, cooking meals, and making sure homes are safe are simple actions that can yield a cost savings by reducing hospital readmissions. Funding a short-term hospital discharge care program would meet this need.

This program would cost approximately \$1,750 per discharge in FY27, based on an average of 30 hours of care. The demand for these services is not known but a pilot within County hospitals could be explored, prioritizing the most vulnerable individuals who do not have access to other care, and funded through the Health System’s budget. Grant funding could also be sought to cover the pilot. The annual estimated cost of this program would vary based on the number of participants served.

The cost associated with this recommendation would occur in FY27 and an update will be included in the FY26 Seniors’ Agenda annual report.

## **Next steps**

Since work began on this report back, Seniors’ Agenda has coordinated with the Clerk of the Board to discuss the process for updating the Senior Care Commission website and coordinated with IGR on AB817 and any bills related to respite care funding. It has also began identifying volunteers interested in participating in the ongoing caregiver information

and referral workgroup. Finally, it has added a new section in the monthly Seniors' Agenda newsletter with information for caregivers to better connect them with the information they need.

Moving Forward, Seniors' Agenda will take the following actions:

- a. Create a survey for out-of-home care providers, including ADPs and ADHCs to current service level capacity, maximum capacity with full staffing, average utilization census, and language abilities.
- b. Convene the caregiver information and referral workgroup to begin working on the goals above.
- c. Coordinate with Clerk of the Board on the Senior Care Commission information update.
- d. Collaborate with IGR as needed to help support legislation related to the respite care system or caregiver information and referral system.
- e. Monitor grant announcements for funding opportunities that may be used for the caregiver registry or hospital discharge program.
- f. Identify sources of funding to support adult caregiving and respite care. In addition to the next steps identified at the program level, the County is supporting SB 1249 (Roth) which would allow the County to petition the California Department of Aging to assume control of the Area Agency on Aging that serves the county. Control of the Area Agency on Aging would place funding priorities for various older adult programs, such as adult caregiving, under the direction of the Board. Support of the legislation is in alignment with Board legislative policies and priorities.

### **CHILD IMPACT**

The recommended action will have no/neutral impact on children and youth.

### **SENIOR IMPACT**

The recommended action will have a positive impact on seniors by providing public information about efforts to improve services and support for caregivers of older adults.

### **SUSTAINABILITY IMPLICATIONS**

The recommended action will have no/neutral sustainability implications.

### **CONSEQUENCES OF NEGATIVE ACTION**

The Board will not receive this update on the Santa Clara County Adult Caregiver Study.

### **STEPS FOLLOWING APPROVAL**

The Clerk of the Board will follow the usual procedure for a report of this type.

### **ATTACHMENTS:**

- SCC Caregiving Study Report Back Presentation