

Comprehensive Needs Assessment Process and Results

PRIORITY NEEDS OF OLDER CHICAGOANS

CDFSS-SS/AAA undertakes a wide range of activities in its planning process to determine how to best address the needs and issues identified with the funding that is provided by the Older Americans Act, State of Illinois General Revenue and other grants. As required by the Illinois Department on Aging, CDFSS/SS-AAA follows a five-step planning process:

Step One: Assess the Needs of Older Persons

To meet this requirement, CDFSS-SS/AAA provides numerous opportunities for Chicago residents, service providers and advocates to examine and respond to the CDFSS-SS/AAA planning process. Seniors meet to discuss the effectiveness of existing services and about unmet needs at Senior Centers citywide. Aging network service providers are also given on-going opportunities to voice their concerns and make recommendations about service planning and implementation at monthly Provider Council meetings. Along with our older constituents, social service providers are notified and encouraged to comment on CDFSS-SS/AAA's Public Information Document (PID) and to participate in the annual Area Plan public hearings. The Advisory Council on Aging also assess the needs of older adults and recommend actions to CDFSS-SS/AAA.

In addition, budget cycles on local and federal Community Development Block Grant (CDBG) funding sources have required annual budget hearings that are open to the public for review and comment. The city of Chicago also sponsors many community meetings across the city that are open to the public and often elicit aging-related concerns.

Comments and recommendations from the above sources are used to assist CDFSS-SS/AAA in developing and enhancing programmatic and legislative initiatives and improving service delivery. Staff collect additional information from analyzing service utilization data and requests for services through CDFSS-SS/AAA's Information and Assistance and Care Coordination Units. The information from these reports is reviewed and evaluated by CDFSS-SS/AAA's senior management staff to monitor progress in the achievement of the goals and objectives of the Area Plan.

In preparation for the FY2025 - 2027 Area Plan on Aging, various articles, reports, and research studies were reviewed to help better understand the needs of older adults and establish service and issue priorities. These studies included: "Caregiving in the U.S." (2020 Report), "2021 Profile of Older Americans (ACL Report)", "Second Half of Life Study" (June, 2022). AARP in collaboration with National Geographic. "The Age Well Study (2018-2022)", "Lifelong Learning Among 45+Adults (March, 2022)", Food Insecurity magnifies inequity in Chicago. Crains Chicago Business, (November, 2022). "Aging Reimagined: the Ingredients of Unequal Aging (February, 2024),

**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

“Family Caregiving for Older Adults (June, 2020) HHS Public Access, “Social, Economic, and Health Disparities Among LGBT Older Adults (March, 2017) HHS Public Access, “The Age Well Study: Year 5 Report” (2018-2022 Mather Institute), “What Do We Know About Healthy Aging (National Institute on Aging), “Justice in Aging: The Intersections of Inequity and Aging” (February, 2021), “Equity in Aging Collaborative” (NCOA), “Impact & Equity” (2023) National Council On Aging, “Social Determinants of Health and Older Adults, Health.gov, Healthy People 2030. Disrupt Disparities: Challenges and Solutions for 50+ Illinoisans of Color (February, 2021), Living Alone During COVID-19: Social Contact and Emotional Well-being Among Older Adults (March, 2021).

The studies provide a foundation for understanding how programs can be tailored to address the increasingly complex needs of the growing Chicago elderly population, including those related to social determinates of health, housing, food security, senior employment, access to medical services and caregiver services as well as other areas of services.

CDFSS-SS/AAA conducted and analyzed the results of the Senior Needs Assessment Surveys and Senior Provider Surveys. These surveys provided CDFSS-SS/AAA information regarding senior needs from both senior provider and client perspectives. To ensure input from minority populations served within our PSA, in the planning process, CDFSS-SS/AAA focused on seniors in low-income and minority areas of the city in the survey process. Significantly, 90% of the CHA Senior residents who completed the survey live in neighborhoods characterized by a high concentration of senior minority poverty and close to half (45%) of the senior clients who utilize DFSS senior center facilities were also living in neighborhoods characterized by a high concentration of senior minority poverty.

Senior Provider Survey

During January and February of 2024, 41 Chicago-based senior providers, including both CDFSS-SS/AAA funded and non-funded senior service organizations, representing senior service providers across the city of Chicago, were surveyed regarding their perceptions of unmet needs amongst older adults in Chicago. Agency service professionals were asked to identify service gaps and senior demographic trends in Chicago. Approximately 23 providers (56% of those surveyed) responded to the survey.

Unmet Senior Needs

Senior providers were asked to assess the level of senior need which has gone unmet within their service delivery area. Each respondent was asked to identify, in terms of level of need, key program components which play a significant role in the overall well-being of elderly residents in Chicago.

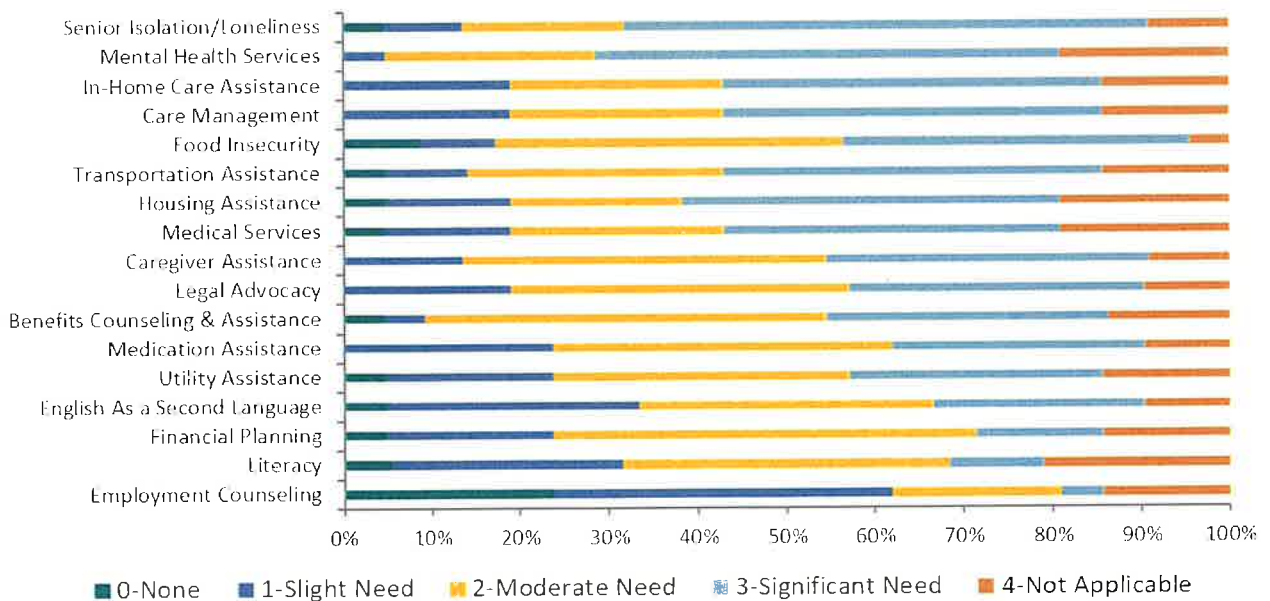
**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

Of the 23 providers that completed the survey, 13 indicated that isolation and loneliness is a significant need among seniors in Chicago. When asked if their agency noted any significant changes in senior issues and/or concerns over the past year, providers indicated that the most significant change witnessed was seniors reporting social isolation and loneliness. Twelve providers indicated that the lack of geriatric mental health practitioners was a significant barrier to senior mental health. Of the 23 providers that responded to the survey, nine indicated the following areas of significant unmet need among the seniors that they serviced: in-home care assistance, care management services, food insecurity, transportation assistance, and housing assistance.

Graph 1 (below) presents the results of unmet need, illustrated by the percentage of senior providers who identified these key program components as requiring more resource allocation.

Level of unmet senior need indicated by service providers in 2024.



Most significantly, mental health services, senior loneliness, in-home care assistance, transportation assistance remain high priorities in terms of service gaps to seniors in Chicago, suggesting a large proportion of seniors are dealing with issues related to social isolation and the ability to remain in their homes. Close to 70% of the senior providers in Chicago indicated their clients are food insecure. Monthly housing expenditures such as mortgages and rent also seem to remain a major concern for seniors. Finding available and affordable senior housing units in Chicago continues to be a challenge for most elderly residents. Additionally, seniors continue to struggle to understand government income transfer programs, identifying new and existing sources of public benefits.

Changing Demographics of Seniors

In order to better document trends and potential areas where additional resources should be directed within communities across Chicago, CDFSS-SS/AAA reviewed, examined and compared the perception of surveyed agency executives from 2021 to 2024. This included patterns in demographic indicators which suggest growth in social isolation as well as the economic insecurity of this population. Senior poverty, seniors living alone, food insecure seniors as well as, seniors with a disability have all increased or stayed stagnant in the past several years, suggesting that older adults continue to face stressors in terms of their overall financial situation, mental health outcomes, and their social well-being.

The City of Chicago is typical of many large urban areas across the United States in terms of witnessing an increase in the senior population. According to the U.S. Census, the characteristics of Chicago's elderly population have continued to change from 2010 to 2021. The demographic landscape of seniors in Chicago is defined by a population that is growing older, increasingly poor, and increasingly made up of diverse members of minority groups.

According to the 2022 American Community Survey 508,887 Chicagoans were aged 60 years or older and represented 18.7% of the overall population. This is an increase from the 2010 census, which reported a total of 391,795 (14.5%) seniors aged 60 years and above in Chicago. Likewise, the older population in the state of Illinois has grown from 1.9 million seniors aged 60 years and older in 2000 to 2.8 million in 2022 (representing 22.6% of the population).

The end of the decade will mark significant demographic turning points for the United States. According to census projections, more than 10,000 baby boomers are turning 65 every day and by 2030, one in every 5 Americans will be aged 65 or older (*Demographic Turning Points for the United States: Population Projections for 2020 to 2060, U.S. Census Bureau*). By 2030, all of the baby boomers will have moved into the ranks of the older population, resulting in a shift in the local age structure from 13% of the population aged 65 and older in 2010 to 19% in 2030.

In summary, the above graph presents results which are indicative of overall societal trends affecting seniors in Chicago. An increase in the percentage of seniors who are disabled, living alone and suffering economic hardship (poverty) within their respective client populations were all identified as concerns across senior providers within the City of Chicago. These characteristics coincide with the overall national trend of aging as well as the rising cost of living for basic life necessities such as food and housing, suggesting that more and more seniors are being pushed into poverty as older adult fixed incomes are unable to keep pace with the rising cost of living.

Service Requests

Senior providers were also surveyed in terms of whether the agencies had observed an increase or decrease in requests for services upon which older adults rely to maintain a social and economic safety net. These can be categorized in terms of caregiving issues, economic issues, housing and issues such as community violence directed at older adult residents. Table 1 below provides an overall summary of these results.

Table 1: Increase/Decrease in Senior Services Requests		
Type of Service Request	Percent of Respondents Reporting a Moderate or Significant Increase	Rank
Assistance in combating loneliness and isolation	60.8% (14)	1
Mental health services	56.5% (13)	2
Requests for food assistance	52.2% (12)	3
Transportation	52.2% (12)	4

The above table reflects the struggles seniors are experiencing related to mental, isolation, and a depleted sense of social wellbeing. In addition, senior providers are observing a continued need for food assistance, which points to larger economic difficulties faced by many older adults. Transportation remains another significant issue for older adults.

Need for Mental Health Services

The need for mental health services within the Chicago’s older adult population was identified by providers as showing the greatest increase in terms of client service requests. In order to gain more clarity in terms of why seniors were encountering barriers to receiving these services, DFSS-SS/AAA asked respondents to select the rationale as seen from the perspective of not-for-profit senior organizations.

Table 2 below presents the main take-aways in terms of barriers for older adult Chicagoans requesting mental health services as reported by senior providers.

Table 2: Senior Barriers in Accessing Mental Health Services	
Barrier	Response Percentage
Lack of funding sources to pay for older adult services	60.9%
Lack of in-home mental health services	60.9%
Lack of community mental health agencies	56.5%
Lack of geriatric mental health practitioners	52.2%

Overwhelmingly, senior providers identified the lack of funding sources to pay for older adult services and the lack of in-home mental health services as major barriers to

access mental health. Restrictions in physical mobility, the lack of transportation services, and economic issues encountered by older adults can limit seniors from visiting community mental health services outside of their home. This was followed by a scarcity of mental health agencies and lack of geriatric mental health practitioners.

A subsequent analysis of agencies who identified senior mental health as a service gap indicates that a majority of these providers were concerned with an increase in the number of seniors in poverty. Significantly, the results of a comparative analysis also demonstrated that over 68% of the providers who reported a lack of funding for mental health services also witnessed an increase in seniors living in poverty.

These results strongly corroborate evidence of an increasing need for mental health services for this economically vulnerable sub-population. Research has documented seniors living alone to be more likely to experience prolonged economic hardship. In addition, loneliness, depression, social isolation may contribute to lowered life expectancy and poor health outcomes. External life factors associated with aging, such as changes in medical coverage, the economy, loss of a loved one, and the resultant individual psychological responses to difficult circumstances thus necessitate special interventions. This includes senior in-home case management, mental health counseling, and other forms of community engagement.

In summary, the recent covid-19 pandemic and the economic fallout from business and service closure in the Chicago region, although now vastly improving, will likely have a negative effect on the emotional well-being of seniors for years to come. More attention should be paid to addressing the mental health needs of seniors, including case management and access to government subsidies.

In addition, the current economic situation in Chicago, as well as the recent Covid-19 pandemic discussed above, is placing an added burden on senior providers attempting to assist clients in maintaining their existing situation. CDFSS-SS/AAA, through satellite and regional senior centers and along with delegate agency partners, will continue to engage in community outreach and other strategies, intended to maximize the resources available to seniors.

Training Needs Identified by Senior Service Providers

As part of the Senior Provider Survey, respondents were asked which additional training areas they could use in order to increase program effectiveness. The following table presents, in rank order, training needs identified by these agencies. The greatest need for additional training was in the area of mental health services, social isolation and loneliness, services available to seniors through the Area Agency on Aging, followed by effective communication for older audiences, and working with challenging behaviors.

**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

Training Needs Identified by Senior Service Providers			
Area in Which Agencies Expressed Need for More Training	Number of Agencies Responding	Percent of Agencies Responding	Rank
Mental health and older adults	15	65.2%	1
Social isolation and loneliness	13	56.5%	2
Services offered by the Area Agency on Aging	12	52.2%	3
Effective communication for older audiences	11	47.8%	4
Working with challenging behaviors	11	47.8	5
Legal resources for older adults	11	47.8%	6
Home repair/modifications	8	34.8%	7
Health and Wellness	8	34.8%	8
Livable communities	6	26.1%	9
Public benefits	6	26.1%	10
Services and supports for LGBTQ seniors	6	26.1%	11
Caregiving	4	17.4%	12
Trauma-based care	4	17.4%	13
Other (please specify)	0	0%	14

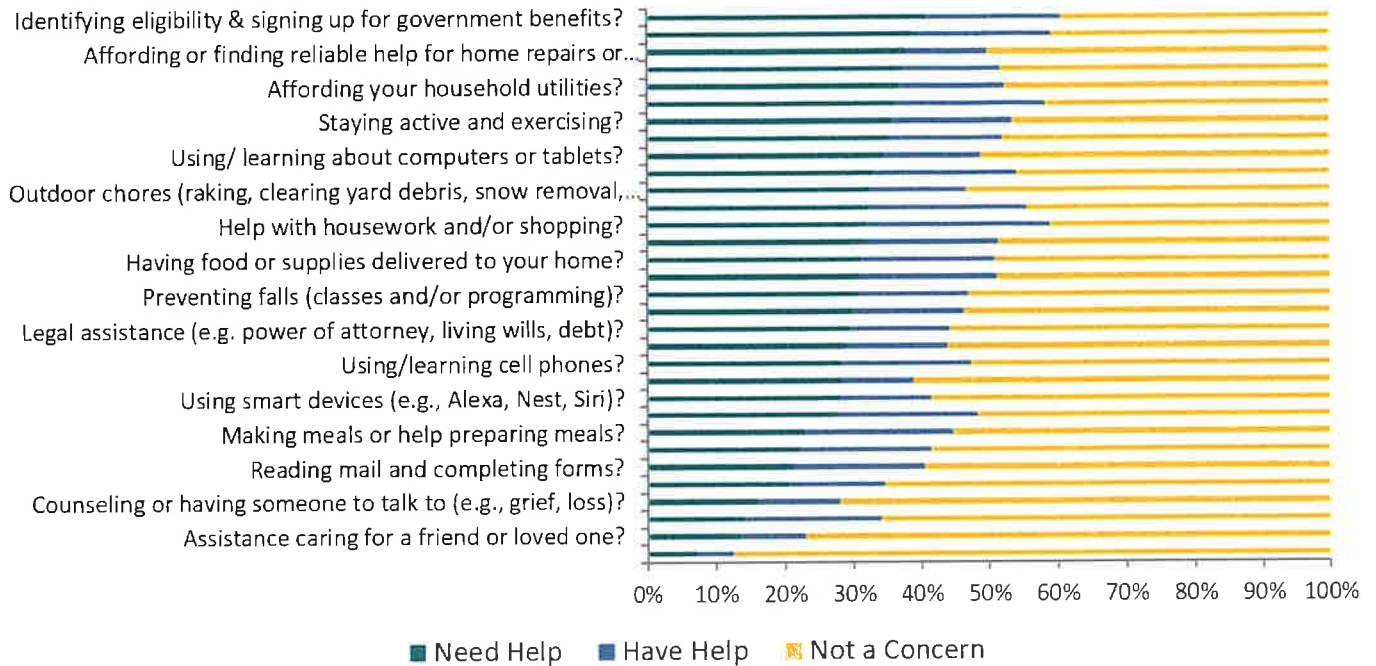
Senior Needs Assessment Survey

During April of 2024, CDFSS-SS/AAA conducted a survey of senior needs which assessed service gaps within the older adult population in Chicago as indicated by individual senior Chicago residents. Surveys were distributed to seniors and caregivers through Chicago Housing Authority (CHA) Senior buildings, CDFSS-SS/AAA Senior Centers and Satellite Centers, and home delivered meals clients across the City of Chicago.

Approximately 2,371 responses were received from surveys distributed to seniors at Senior Centers, those at Chicago Housing Authority Sites, seniors participating in the Caregiver programs and the Home Delivered Meals program. Surveys were also delivered online. Many survey distribution sites are home to or particularly provide services to racial or ethnic, minority communities in Chicago. These include senior centers or satellite centers that are culturally specific to Chinese American, Indian American, Vietnamese American, or Korean American groups in Chicago. Surveys were also distributed to CHA Senior Housing units that provide services to Chinese, Korean, Spanish, and Polish communities.

The median (average) age of all seniors responding to this survey was 73 years. Seniors were surveyed as to whether they needed assistance in the following areas: in-home services, housing, utilities, health care, finances, public benefits, transportation, access to food, accessible transportation, recreation, and counseling. The table on the following page summarizes the responses by all clients to the survey questions.

Senior Clients Needs Assessment Survey: Reported Needs



Of the seniors indicating a need in the categories listed on the survey, the highest percentage was in identifying eligibility and signing up for government benefits (41%), moving and removing big items in their homes (39%), affording, or finding reliable help for home repairs or modifications and finding opportunities to learn new things (38%), and affording household utilities (37%). This could also be explained as part of the impact on seniors experiencing social isolation and the need to use technology to connect with others and the impact of more recent economic inflation which has left many seniors facing financial precarity.

The rising cost of living in Chicago has placed a large burden on seniors trying to maintain their existing lifestyle. In addition to identifying new sources of government benefits and affording household utilities, 36% of senior respondents indicated that they needed help understanding health benefits like Medicare and Medicaid, 35% indicated they needed help affording food. Approximately, 28% of respondents needed help finding affordable housing. Approximately 1 out of 6 seniors were concerned with medications. The latter underscores the critical tipping point experienced by many seniors in Chicago suggesting rising costs for such basic items as food, housing, and medicine thus forcing seniors to make difficult life choices.

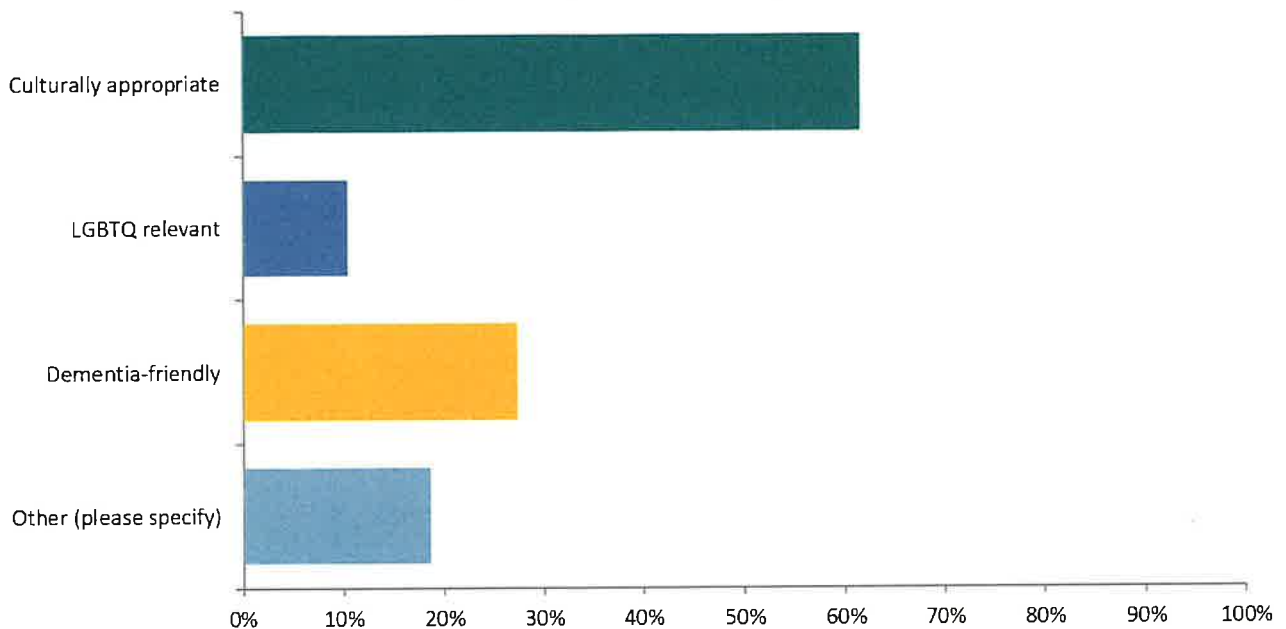
Senior concerns around social isolation, mental health support, and overall social well-being remain persistent over the last few years. Approximately 30% indicating they needed help with finding a nearby social gathering place and 32% stated they needed help accessing health care services including both medical and mental health care.

**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

Furthermore, respondents indicated that they were interested in senior services that were culturally appropriate (62%), dementia-friendly (27%), and programs that better served LGBTQ seniors (10%). Other responses contributed by seniors included economic services (utility services), health related services (information on healthy eating, how to better cope with stress), and increasing social networks (games rooms, craft hobbies, dating and relationships).

Senior Clients Needs Assessment Survey: Desired Services

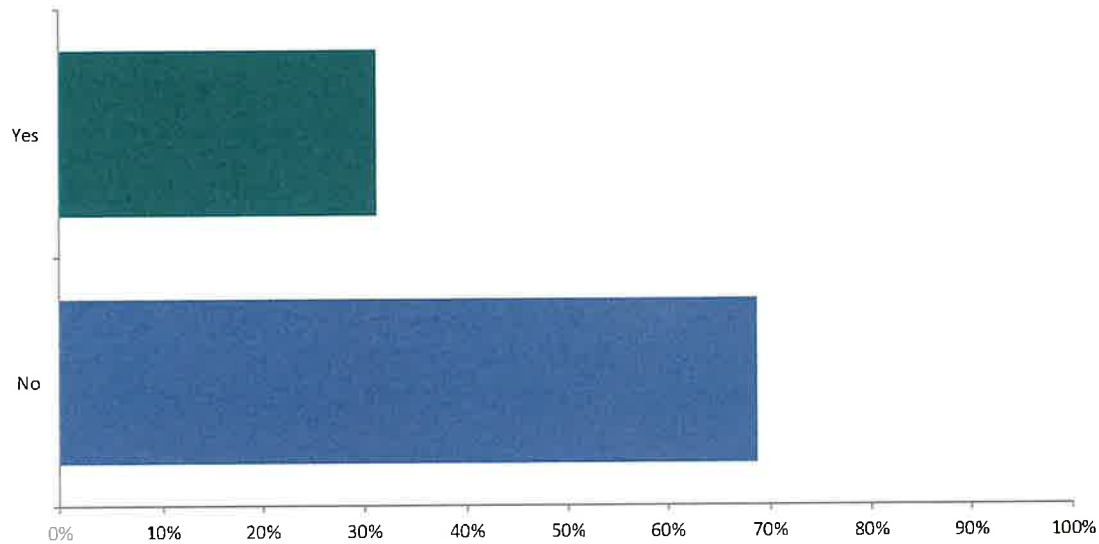


Mental health and functioning issues also effect a senior's ability to care for themselves. This is especially concerning in cases of dementia, situational depression, and physical disability. Such health concerns are further complicated with accompanying changes in independence. Research by the University of Chicago regarding the mental health of seniors found that feelings of social isolation and loneliness can predict morbidity and mortality from broad base causes in later life, even when controlling for health behaviors and genetic risk factors. As the number of adults in the United States grows increasingly older, such factors as loneliness and isolation also become increasingly important for providers (Chicago Health Aging and Social Relations Study, University of Chicago Department of Psychology, 2015).

Of the seniors surveyed, approximately 32% of respondents reported that they had a disability that affected their quality of life. Age, illness, and disability particularly bring about unique challenges for older individuals. Approximately 31.3% of all seniors aged 60 years and older in Chicago had some form of disability, a percentage much higher

than the general population where 10.9% of all people have a disability. Of all individuals in Chicago that had a disability (300,631) in 2021, 41.2% were people aged 65 years or older. In comparison, 27.7% of all seniors in the State of Illinois and 29.4% of adults in the United States are living with a disability. Close to 144,609 seniors aged 65 and over in Chicago have a physical disability (hearing, vision, and/or ambulatory) that limits mobility and affects senior overall mental health and wellbeing.

Senior Clients Needs Assessment Survey: Disability Status



CDFSS-SS/AAA conducted a separate analysis of the Senior Needs Assessment survey by type of client surveyed. Below are the survey results from each of the three sub-populations: seniors utilizing CDFSS-SS/AAA Regional and Satellite Senior Centers, CHA Senior Housing residents, and Home Delivered Meal clients.

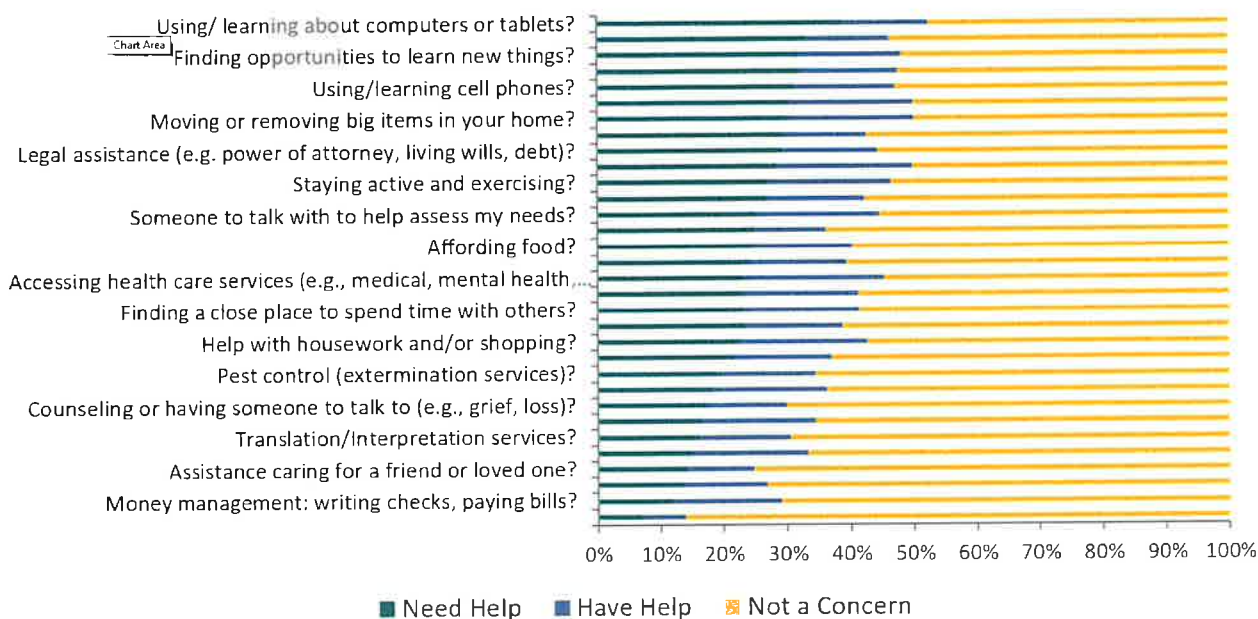
Survey Results by CDFSS-SS/AAA Senior Center Clients

CDFSS-SS/AAA distributed the needs assessment survey to seniors visiting our Senior Centers and Satellite Centers in order to identify areas in which older adult clients perceived citywide service gaps. Approximately 48% of survey responses were collected from Senior Centers and Satellite Centers. DFSS clients utilizing the Department's program facilities expressed a keen interest in developing their technology skills (39%), finding opportunities to learn new things (33%), and accessibility to internet or wireless services (32%). Many reported that they needed help using and learning how to use cell phones (32%).

Nearly 30% of respondents needed help with financial or legal services such as identifying and signing up for government benefits, moving or removing big items from their home, affording or finding reliable help for home repairs, and legal assistance.

Other reported needs requested by seniors included services such as dog walking, community safety, legal advice. More than 55% of seniors at Senior Centers reported that they would like services that were more culturally appropriate and 30% reported that they would like to see more dementia-friendly services at DFSS program facilities.

Senior Clients Needs Assessment Survey: Reported Needs at Senior Centers

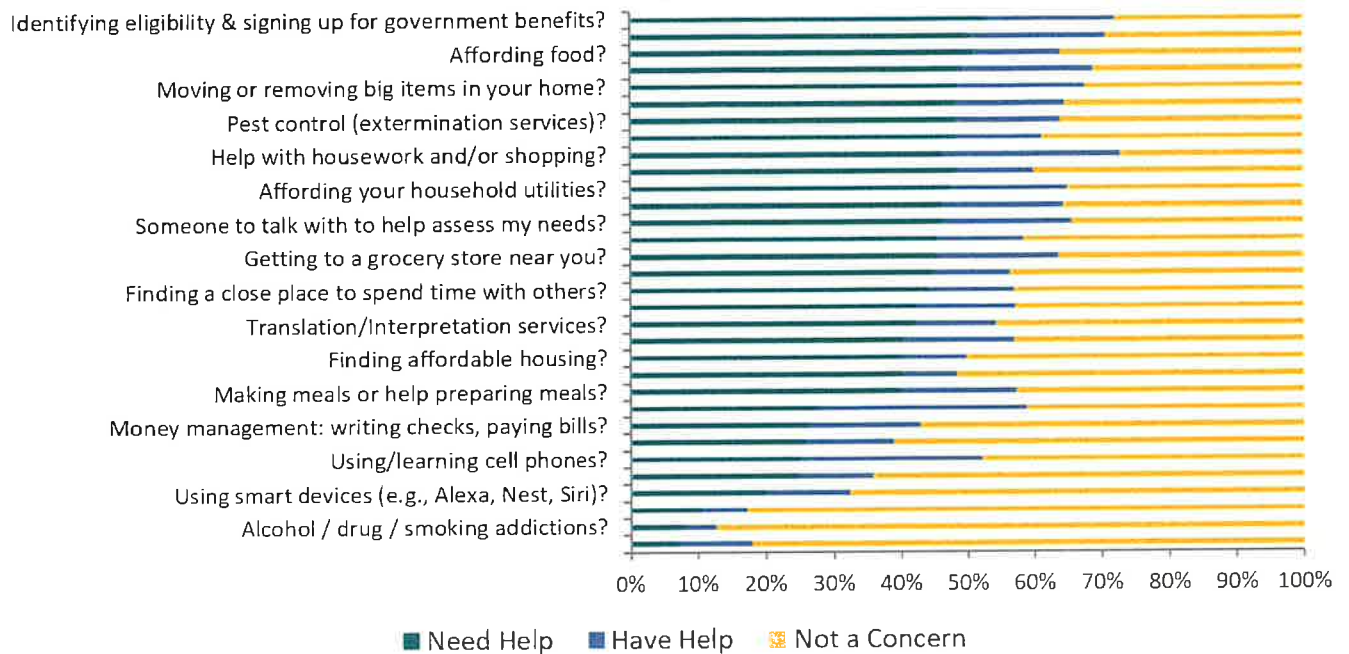


Survey Results by CHA Senior Housing Residents

The following table presents service gaps or needs identified by residents living within CHA Senior housing. Approximately 24% of all survey responses were from respondents that occupied CHA Senior housing. This provided seniors the opportunity to express their voice regarding senior programming areas where they needed additional assistance.

Residents within CHA Senior Housing expressed a number of financial and economic concerns including identifying eligibility and signing up for government benefits (53%), understanding health benefits like Medicare/Medicaid (50%), and affording food (51%). This suggests that many senior residents of CHA are experiencing economic hardship. Nearly twenty percent of CHA senior residents reported having a disability which affected their overall quality of life. Eighty-one percent indicated they would like additional services which were more culturally appropriate, and 11% reported that they would like services that were more dementia friendly.

Senior Clients Needs Assessment Survey: Reported Needs at CHA Housing



Survey Results by Home Delivered Meal Clients

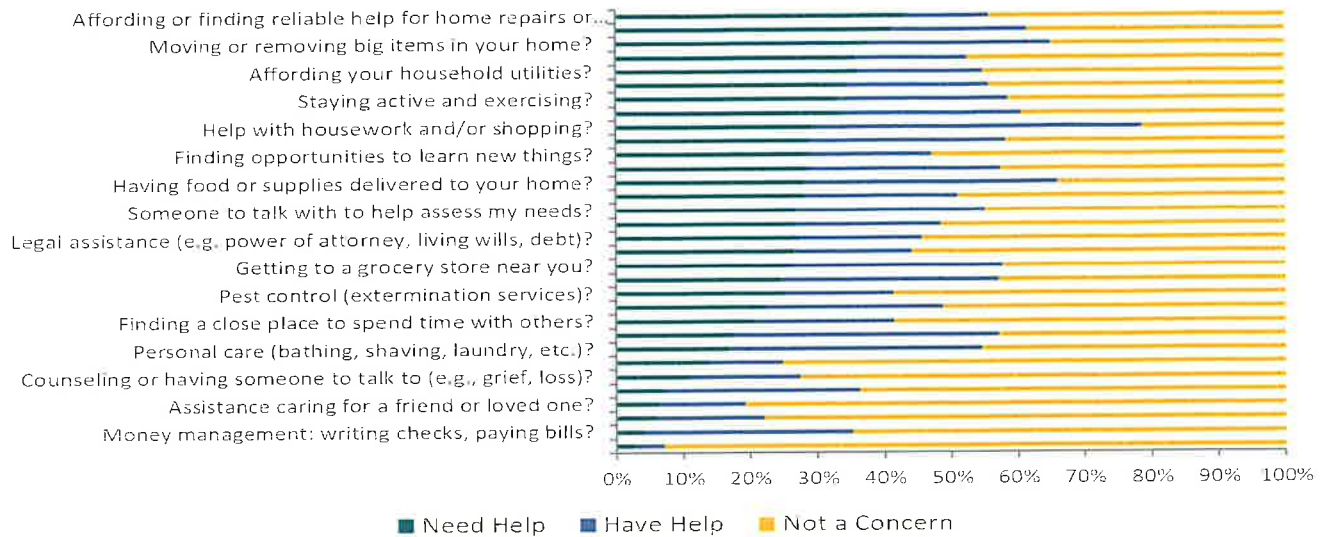
Within the home delivered meal sub-population, the primary concern as indicated on the senior needs assessment survey were affording or finding reliable help for home repairs or modifications (43%), identifying eligibility and signing up for government benefits (41%), and moving or removing big items in your home (38%). Other concerns within the home delivered meals population included affording utilities (36%), help with outdoor chores (34%), and staying active and exercising (33%).

Significantly, more nearly 60% of respondents that received Home Delivered Meals reported that they had a disability that impacted their quality of life. Nearly 60% of HDM clients reported wanting more culturally appropriate programming and 31% reported that they wanted more dementia-friendly services. Twenty-four percent reported other service options such as services related to transportation and services that could improve their mobility.

**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

Senior Clients Needs Assessment Survey: Reported Needs for HDM Program



Summary Response Regarding What Seniors Felt They Needed Most

Seniors surveyed were also asked what they needed most in an open-ended question. Many of the respondents indicated they were in need of assistance regarding finances, homemaker services or were concerned about social isolation. In addition, many seniors also expressed concern about their health and the senior centers re-opening following the pandemic, suggesting CDFSS-SS/AAA Senior Centers remain a focal point for senior socialization and community building. Finally, assistance with utility bills and services for people with disabilities, was also a high priority for those seniors who responded to this survey.

Table 3 below presents the overall number and percentage of respondents in terms of what seniors felt they wanted most.

Table 3: Senior Need Identified Overall		
Need Identified	Number of Respondents	Percent
Identifying eligibility and signing up for government benefits	916	41%
Moving or removing big items in your home	869	38.8%
Affording or finding reliable help from home repairs or modifications	845	37.9%
Finding opportunities to learn new things	828	37.3%
Affording household utilities	811	36.6%
Understanding health benefits like Medicare/Medicaid	801	36%

Table 3A below shows the responses to what seniors felt they wanted most by Home Delivered Meal Clients.

Table 3A: Senior Need Identified by HDM Clients		
Need Identified	Number of Respondents	Percent
Affording or finding reliable help from home repairs or modifications	316	43.0%
Identifying eligibility and signing up for government benefits	314	41.0%
Moving or removing big items in your home	306	37.9%
Using/leaning about computers or tablets	317	35.6%
Affording your household utilities	309	35.9%
Outdoor chores (raking, clearing yard debris, snow removal, etc.)	314	34.4%

Table 3B below presents the responses to what seniors felt they wanted most by CHA Senior Residents.

Table 3B: Senior Needs Identified by CHA Senior Housing Building Residents		
Need Identified	Number of Respondents	Percent
Identifying eligibility and signing up for government benefits	285	53.5%
Understanding health benefits like Medicare/Medicaid	271	50.5%
Affording food	269	51.0%
Accessing healthcare services (medical, mental health, pharmaceutical, and/or dental)	267	49.3%
Moving or removing big items in your home	263	48.3%
Finding transportation that meets your needs	260	48.3%

Table 3C below presents the responses to what seniors felt they wanted most by CDFSS Senior Regional/Satellite Facilities.

Table 3C: Senior Need Identified by CDFSS-SS/AAA Senior Center Clients		
Need Identified	Number of Respondents	Percent
Using and learning About Computers	423	38.8%

**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

Using smart devices (e.g. Alexa, Nest, Siri)	347	33%
Finding opportunities to learn new things	342	32%
Accessibility to internet or wireless services	341	32.2%
Using or learning how to use cell phones	336	31.1%
Identifying & getting benefits you may be eligible for	329	30.5%

Senior Utilization of Services

Thirty-eight percent (38.2%) of the seniors surveyed responded that they had utilized the City of Chicago’s Information and Assistance System (I&A). This is consistent with the percentage of the city’s overall population of seniors requesting and receiving services through I&A annually. Thus, CDFSS-SS/AAA, through outreach and other activities, is addressing the growing magnitude of the senior population needs in terms of providing the needed services.

Social Isolation Experienced by Seniors

Similar to other large urban areas within the United States, Chicago seniors continue to experience challenges in connecting to both formal and informal support networks within their communities which could alleviate loneliness and feelings of social isolation. Seniors who reside in urban neighborhoods characterized by high concentrations of poverty and crime are more likely to exhibit mental health issues such as depression, lack of companionship and social isolation. Many seniors who reside within these neighborhoods are fearful of leaving their homes due to becoming a victim of crime or witnessing a violent crime, resulting in psychological trauma. This has the effect of contributing to social isolation from neighbors and other neighborhood social supports which could alleviate some of the adverse neighborhood social conditions experienced by these elderly individuals. (Klinenberg 2001, Gleckman, 2018, Bernard, 2013). Map 4 in the appendix presents the number of individuals arrested by the Chicago Police Department between January-December, 2019. Not surprisingly, many of these arrests occurred in Chicago neighborhoods characterized by high concentrations of senior poverty (Map 2).

CDFSS-SS/AAA has, for many years acknowledged and taken action to ensure senior programs are both accessible and visible to older adults residing in high crime, high poverty communities within Chicago. Approximately 60% of all congregate dining, DFSS facilities as well as DFSS funded senior agencies are located within these neighborhoods, providing a “safe haven” for elderly residents. These facilities are accessible to economically vulnerable as well as unserved/underserved senior residents and provide them opportunities to:

- Gain the needed emotional support of other residents, and;

- Obtain crucial knowledge of City of Chicago senior resources which can alleviate the negative effects of economic hardship and social isolation.

Conclusion

Results from the Senior Needs Assessment completed by clients participating CDFSS-SS/AAA Senior Centers, HDM participants, and at CHA Senior Housing residents suggest that seniors illustrate a need for social connections as well as an intellectual curiosity reflected by the desire to be engaged in life-long learning as it relates to developing technology skills. There is also a need to support and maintain both physical and mental health. According to the survey, the top six areas seniors identified in which they needed help included learning about computers, improving their skills regarding smart technologies such as smart devices and cell phones, identifying and applying for benefits, staying active and exercising, finding nearby places to socialize, as well as finding opportunities to learn new things.

Seniors in Chicago continue to report economic hardship and the need for mental health services to address issues such as social isolation, loss of loved ones, and an increasingly complex health care system which increases in cost and requires navigation. The increase in senior poverty, seniors living alone, and the need for increased assistance with obtaining needed government benefits, all points to evidence of a senior population which is increasingly isolated, facing difficult economic circumstances, and in need of community and family support. CDFSS-SS/AAA, in submitting this Area Plan, is committed to putting the resources of the Area Agency on Aging to the best use, not only to address these immediate concerns, but to address the challenges of seniors in the coming years.

Regional Senior Center Focus Group Analysis

In addition to collecting senior survey data, CDFSS-SS/AAA gathered both client and provider feedback by facilitating focus group discussions at five different regional senior centers. Senior clients that participated in focus groups were asked the following questions.

1. What services (may need to provide some examples of services) do older adults need to assist them to remain independent in their home and/or their community?
2. What current gaps in service do you observe for the City of Chicago's older adult population? (For senior focus group)
3. What do you fear most or are most concerned about regarding getting older in the city of Chicago?

Facility providers at participated in each focus group were asked the following questions as well.

**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

1. As a provider, what are your specific concerns for the aging population in the City of Chicago?
2. What specific concerns do your older adult participants discuss with you?
3. What methods should the Senior Services Area Agency on Aging use to promote awareness to older adults and caregivers about our services?
4. What methods should the Senior Services Area Agency on Aging use to get honest and impactful feedback from program participants about the services they are receiving?

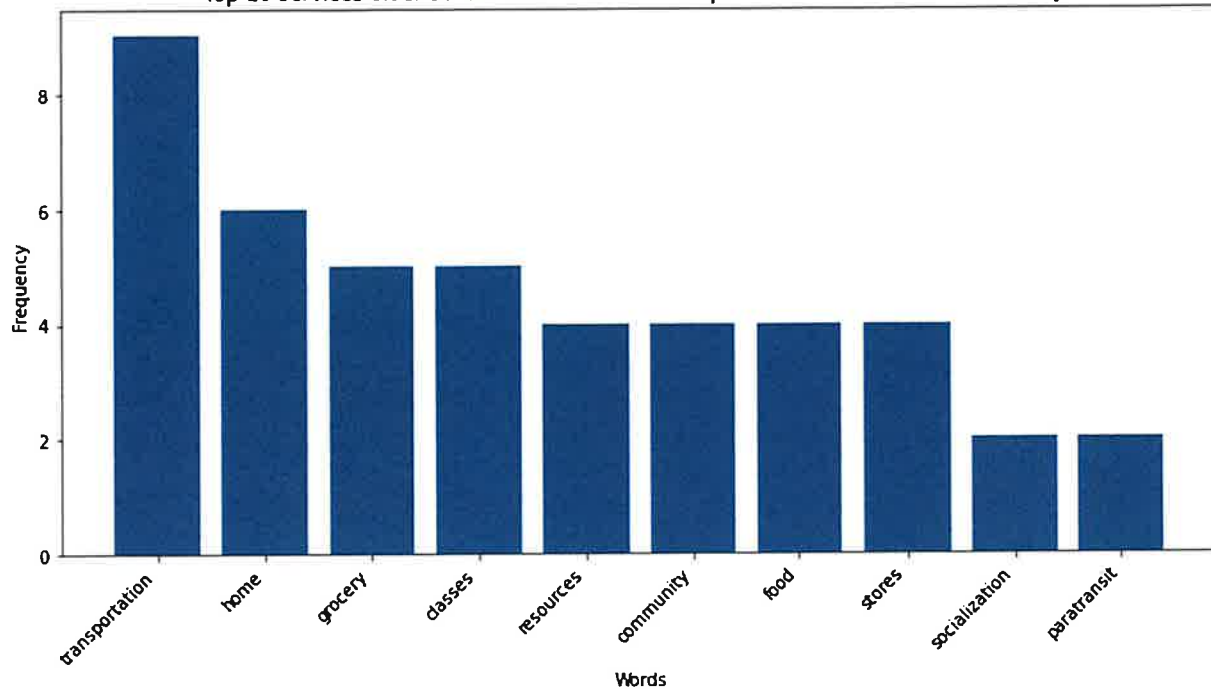
Senior Client Focus Groups

The focus groups with seniors involved participants aged 55-90 years old. The average age of the participants was 72 years old. In terms of minority status, 88% of the participants were African American, 7 were White, while 2 Middle Eastern and 1 Asian. Ethnically, 66% of the participants were non-Hispanic and 34% were Hispanic. Seniors asked if they are also caregivers to other older adults and if they are a member of the same community area where the DFSS regional site was located. Eighteen percent of the participants reported that they were caregivers to other older adults and 17% stated that they were community members.

Needed Services

In sum, senior clients reported a number of needs including a demand for affordable transportation services, assistance with stairs, and better services to assist older adults access essential services and amenities. Seniors also stressed that existing transportation services are costly and may not adequately meet the needs of older adults. There is also a demand for more diverse options in home-delivered meals to cater to different dietary needs and preferences among older adults. The lack of technology classes and support exacerbates the digital divide among older adults, hindering their access to essential resources and services. There is also a need for increased availability of homemakers during nights and weekends to provide assistance with household tasks. Services addressing depression and grief, including support groups and counseling, are necessary to address the mental health needs of older adults. Support programs to help older adults afford essential medications and utility bills, ensuring their well-being and comfort. Access to social workers or case managers to assist with housing-related challenges and facilitate housing applications and transitions. Services providing assistance with home repairs and modifications to enhance accessibility and safety for older adults.

Top 10 services older adults need to remain independent in their home/community:

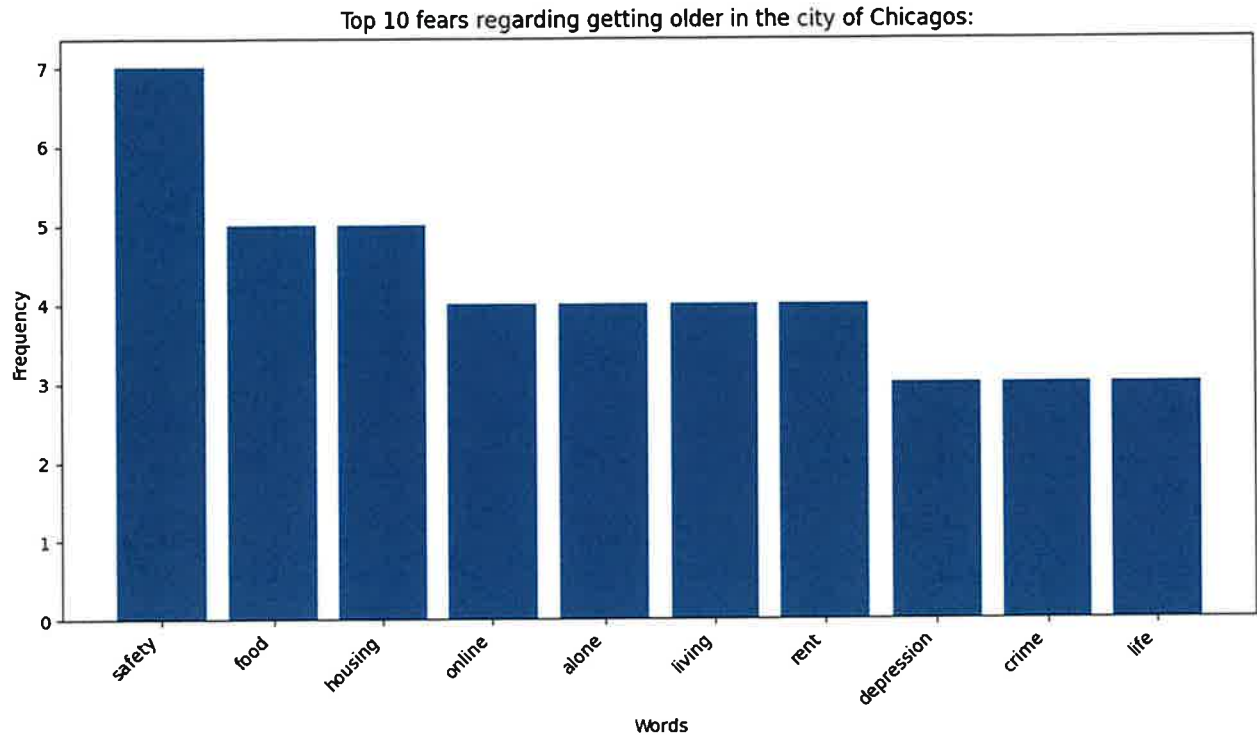


Observed Gaps in Services

Seniors stressed three main gaps in services including inadequate information and assistance services, limited socialization opportunities, and weekend availability of services. In regard to the first, long wait times and lack of follow-up in information and assistance services contribute to dissatisfaction and frustration among older adults seeking support. The need for more social activities and outings to combat loneliness and foster companionship among older adults was a well vocalized point of concern for many focus group participants. In addition, seniors stressed that services be offered over the weekend to better accommodate their schedules.

Common Fear and Concerns Stressed by Senior Clients

Conducting focus groups with seniors and allowing for open dialogue allowed CDFSS-SS/AAA to better understand the concerns and fears that burden the older community members of Chicago. The following were issues of deep concern and stress for clients that participated in our focus groups.



Issues Related to Safety and Crime

Participants expressed significant fears related to safety and crime, including robberies, being targeted for crimes due to age, and concerns about gang/youth violence. More specifically, these concerns included feeling unsafe traveling alone, fear of being alone in the community after dark, and worries about being robbed or attacked in their homes.

Financial Stability and Housing

Financial stability and affordability were recurring concerns, including worries about the cost of living, difficulty affording housing, and uncertainty about sustaining their current lifestyle on fixed incomes. Specific housing-related concerns included rent increases, long waiting lists for senior housing, and the lack of rent control policies to protect older adults from drastic rent hikes.

Isolation and Loss of Independence

Participants expressed fears of isolation, loneliness, and loss of connection with others in the community as they age. Loss of independence and autonomy were also significant concerns, along with worries about falling or becoming sick at home without anyone knowing.

Technology and Scams

appointments, social engagements, and daily errands. Meal Delivery and Nutritional Support: There is a demand for meal delivery services with options for both prepared meals and fresh produce. Additionally, there's a desire for nutritional meal prep classes to promote healthier eating habits among seniors.

Home Maintenance and Repairs

Assistance with home maintenance, repairs, and outdoor chores such as lawn cutting and snow removal is highlighted as crucial for enabling seniors to remain independent in their homes.

Access to Health Care and Mental Health Services

There's a significant emphasis on the importance of access to adequate healthcare services, including mental health services, to support the overall well-being of older adults.

Technology Education

Free technology and digital classes/workshops are suggested to help seniors navigate smartphones and health-related apps. This indicates a need for digital literacy programs tailored to older adults.

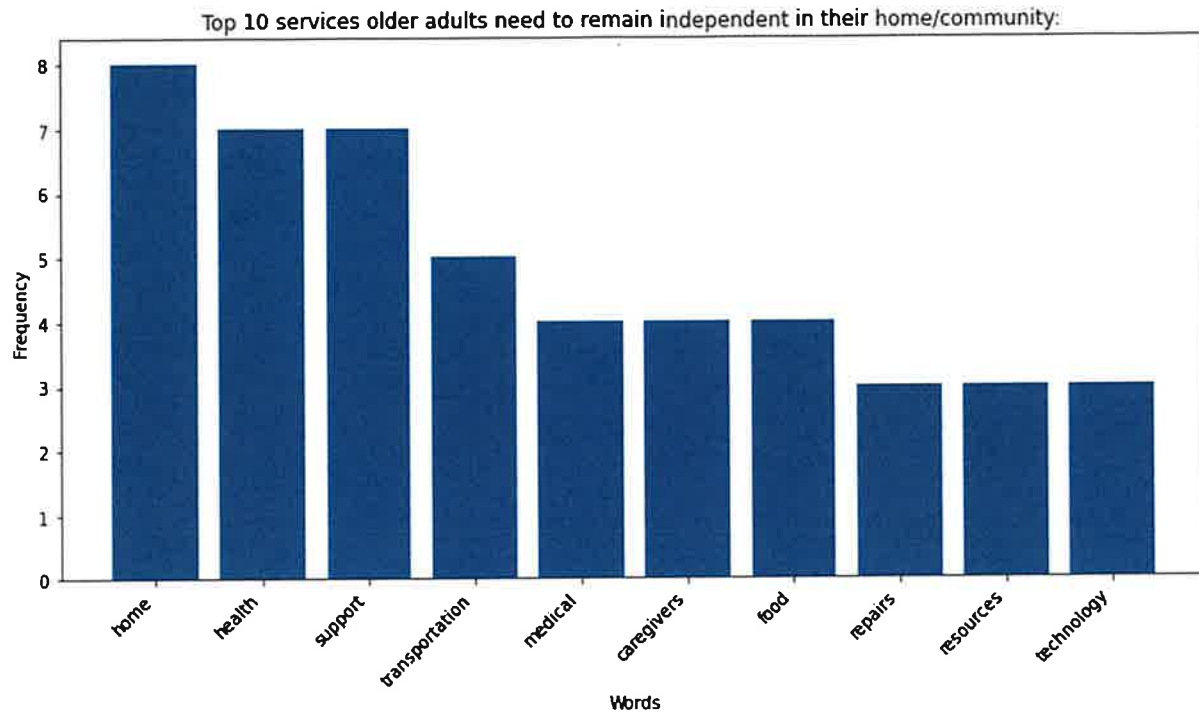
Financial Assistance and Housing Support

Several respondents mentioned the need for financial assistance to help seniors maintain a good quality of life. Additionally, there's a call for lower age eligibility requirements for certain services, recognizing the financial challenges faced by some seniors.

Observed gaps in services included waitlist and administrative hurdles and access to technology and transportation. Respondents highlighted the existence of waitlists for certain services like Meals on Wheels and mentioned paperwork or costs associated with accessing support services, suggesting administrative hurdles in accessing services. In addition, there was a noted gap in access to computers and technology, indicating a need for more resources in this area. Additionally, there are concerns about transportation, including the difficulty in accessing proper transportation to and from places.

Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan

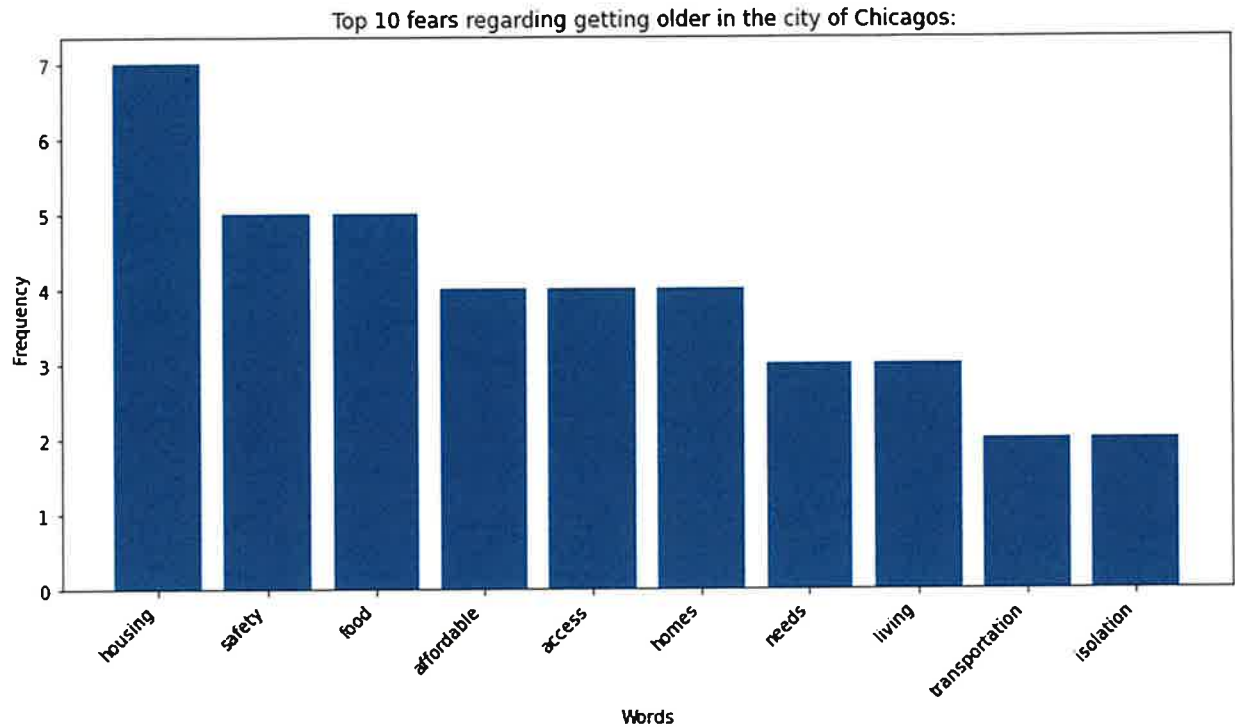
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Concerns raised by providers included issues around safety and violence, the financial and economic strain faced by many senior clients, access to health and medical assistance, and affordable housing. Food insecurity among clients was also discussed as a topic of concern for many staff. Providers emphasize the need for more safety measures in communities to address concerns about safety and violence affecting older adults. Providers note the impact of isolation and loneliness on older adults' well-being and advocate for more social interaction opportunities. There are concerns about high medication costs, housing needs, and the overall financial strain faced by older adults in maintaining their quality of life. Providers highlight challenges with Medicare coverage, navigating healthcare services, and accessing benefits, indicating a need for more assistance and advocacy for seniors. Concerns about the affordability of senior housing and the lack of updates in funding models pose challenges in providing affordable homes for seniors. Providers raise concerns about food security and access to nourishing food for older adults, including the need for culturally appropriate meal options.

Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan

PSA:12



When asked; what methods should the Senior Service Agency use to get honest and impactful feedback from program participants about the services that they are receiving, respondents provided the following feedback.

1. Utilizing community locations such as libraries, churches, post offices, primary care providers, clinics, and community agencies as venues for outreach can effectively reach older adults and caregivers where they frequent.
2. Using traditional media channels such as radio, brochures, billboards, buses, and elevated train stations/cars can help disseminate information about senior services to a wide audience.
3. Conducting face-to-face outreach through free workshops, informational programs, and events hosted at senior-based facilities, community centers, and local community events can provide direct interaction and engagement with older adults and caregivers.
4. Collaborating with community-based organizations, AARP, local unions, large employers, and businesses that offer free services to seniors can expand outreach efforts and reach diverse populations. Partnerships with libraries, convenience stores, pharmacies, grocery stores, banks, credit unions, and faith-based communities can further extend the reach of awareness campaigns.
5. Utilizing direct communication channels such as Robo calls, mail, brochures/outreach materials sent out with home-delivered meals, and text messages can provide targeted and personalized information about senior services.

Home Delivered Meals

Since FY2019, CDFSS-SS/AAA has observed an upward trend in the demand for home delivered meals reaching an unprecedented rate amid the COVID-19 pandemic with an increase of nearly 60% from prior to the pandemic. With the senior population being at greatest risk during this crisis, CDFSS-SS/AAA developed and implemented a plan to help maintain the health and safety of seniors in Chicago by ensuring that all older adults in need of meals were enrolled in the HDM program without a waiting list. Over 19,000 unduplicated clients received home delivered meals in FY2020. By the end of FY2021 the number of unduplicated clients served decreased to 13,294 with the number of clients served leveling off in FY2022 and FY2023 at 11,124 and 11,419 respectively.

Although many of the older adults initially enrolled in the program during the pandemic are no longer in the program, CDFSS-SS/AAA observed a continued increase in the number of clients served each week since the beginning of FY2023 aligning with the timeframe that the COVID SNAP benefits terminating in February of 2023. To date, in FY2024, 9,976 unduplicated clients have already been served 2.1 million meals through the home delivered meals program, with an average of 8,200 HDM clients served weekly. CDFSS-SS/AAA projects the number of meals served to exceed 4 million meals by the end of FY2024. As demonstrated by these statistics, the CDFSS-SS/AAA home delivered meals program remains a vital lifeline relied upon in unprecedented times but more importantly, continues to serve as the foremost response to combatting daily food insecurity and malnutrition for City of Chicago older adults.

CDFSS-SS/AAA recently conducted a citywide survey of the Home Delivered Meals participants in 2023 to assess client satisfaction and to determine whether the meal program has contributed positively to the overall well-being of the clients being served and to assess overall client satisfaction with program. Surveys were distributed to clients citywide. Out of the 2,100 surveys distributed, a total of approximately 1193 clients responded to the survey.

Of the seniors who responded to the survey, more than 83% indicated the meals were necessary for their overall well-being. Close to one hundred percent (97%) of the seniors indicated that their driver was courteous and 93% indicated the meals were well sealed. In addition, 71% indicated the driver was the only person who the HDM client had contact with during the day, suggesting many of these seniors are socially isolated.

Seniors receiving home delivered meals may not often be aware of government subsidized programs designed to assist them. With many seniors having to choose between paying for their medications or housing costs, community outreach through programs such as home delivered meals may increase their awareness. This is critical as many seniors may be living on fixed incomes and experience difficulty meeting monthly costs for essential items such as food and housing. CDFSS-SS/AAA

**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

disseminates information regarding available benefits such as the Low-Income Subsidy, SNAP and the Medicare Savings Program to Home Delivered Meals clients and continues to provide the necessary support to enroll Chicago's older adults in programs which can assist them with their on-going expenses.

Additionally, efforts have been focused on identifying special menus, where feasible and appropriate, that will help meet health requirements and/or ethnic or cultural preferences of clients in need of home delivered meals. In preparation for the release of the Request for Proposals (RFP) for HDM in FY21, CDFSS-SS/AAA added the following new diets that comply with the Dietary Guidelines for Americans/DRIs to the HDM Program for FY22:

- South Asian Diet which offers Indian and Pakistani meals
- Eastern Asian Diet which offers a bended menu that includes Chinese, Korean, and Vietnamese meal options.

CDFSS-SS/AAA will continue to explore the need for other special menus, where feasible and appropriate, that meet health requirements and/or ethnic or cultural preferences. CDFSS-SS/AAA has developed a survey to help identify unmet need among seniors being assessed for meals with specific attention to health related or medically tailored meals, as well as culturally specific meals. CDFSS-SS/AAA plans to distribute the survey to Care Coordination Units (CCUs) and Managed Care Organizations (MCOs) on an annual basis to help identify unmet needs.

Chore Services

In preparation for the release of the RFP for Chore Services this year, the team explored new ways to expand outreach and improve services to clients seeking Chore Services. One of the enhancements made to the services was to address the issue of infestations and the provision of extermination services to better and more widely address complex cases received by the service provider. CDFSS-SS / AAA will add lawn care and snow removal as part of seasonal tasks provided under Chore services. The provision of lawn care, snow removal and extermination services was first piloted through time limited American Rescue Plan funding. Additionally, in response to the high survey responses identifying housework and assistance with removing heavy items from the home as a significant need for seniors and caregivers, CDFSS-SS/AAA is increasing the Chore budget in FY2025 to support the additional services added to ensure older adults continue to receive the needed support.

A survey of Chore Services completed by the service provider in 2024 found that nearly 77% of the clients lived alone. Overall, clients indicated that they were either satisfied or very satisfied when asked about their experience with both heavy-duty and short-term housekeeping services. Seniors indicated that the services they received helped them meet their needs, maintained and improved their quality of life, and helped seniors remain in their home.

Congregate Dining Program

Prior to the pandemic, the Congregate Dining Program served nearly 800,000 meals to over 25,000 older adults through the congregate nutrition sites citywide each year. Nearly 3,000 meals were served daily (approximately 750,000 meals served annually) to older adult participants at 50 nutrition sites citywide. In FY2023, the Congregate Dining Program served 437,749 meals to 17,385 participants. As of FY2024, quarter 1, the Congregate Dining Program has served 179,863 meals to 11,835 participants.

CDFSS-SS/AAA continues to work to return Congregate Dining program participation back to pre-pandemic levels and continues to fervently conduct outreach, solicit and implement participant feedback, and introduce new initiatives. In FY2024, DFSS-SS introduced the "Passport to the World" program, funded by the American Rescue Plan (ARP), to provide culturally inspired meals twice per month to Congregate Dining sites citywide. This initiative has been well received and the Congregate Dining Program has experienced an increased rate of participation on these days, which CDFSS-SS/AAA looks to harness moving forward.

CDFSS-SS/AAA conducted a survey of seniors visiting some of the nutrition sites to attempt to identify reasons that seniors may not be participating in the nutrition program and to determine overall client satisfaction. The surveys were disseminated to 12 of CDFSS-SS/AAA's regional and satellite senior centers located throughout the city of Chicago (Northside, Southside and Westside) where nutrition programs were offered.

Approximately, 36% of the respondents were ages 60 to 79 and 43% were ages 70-79 years of age. Nearly 40% of the respondents indicated that they ate at the Congregate Dining Program more than 4 times per week, 36% stated that they ate at their Golden Diners site two to three times per week. Participants indicated that their top reasons for visiting the Diners site was for nutritious meals (1,420), to have something to look forward to (831), for socialization (805), due to limited income (611), and to attend other programs at the site location (687).

The high frequency usage rate suggests older adults in Chicago visit the Congregate Dining nutrition sites not only as a means to visit with other seniors, but also to assist them in addressing the rising cost of food. Of those that answered the question regarding why they do not participate in the meal program at the site, approximately, 13% indicated the reason is due to conflicts with work or schedule and 11% indicated they did not like the food being served.

CDFSS-SS/AAA continues to explore new culturally appropriate menus to address the myriad of ethnic needs within the City of Chicago, as well as incorporating more choices within the menus offered as we prepared for the release of the Congregate Dining RFP in FY2022. In addition, CDFSS-SS/AAA provides outreach to those seniors who are unaware of the Congregate Dining Program through flyers, website information, and

other public awareness campaigns. Information is also made available at all the senior center locations informing visitors that the meals served through the program are nutritionally designed to help seniors stay healthy.

Multipurpose Senior Centers and Congregate Dining

Senior Center and Congregate Dining participation are among the many areas impacted by the pandemic. CDFSS-SS/AAA continues to work toward regaining lost participation while also taking the time to better understand the needs of older adults in the aftermath of the pandemic. The strong relationship between senior center participation and the congregate meal program has been evident. While a variety of valuable programs are offered at each of the centers, congregate dining meal services are a core component of the programs provided. Congregate meals are offered at each of the 20 senior centers and satellites and at 30 other community sites.

After analyzing the attendance data collected at the 20 senior centers and satellites, CDFSS-SS/AAA found that nearly 50% of the older adults attending senior centers and satellites are also receiving congregate meals – higher than any other activity offered at the centers. Interestingly, the data also revealed a significant disparity in participation across the 20 senior centers and satellites which led to a closer look into the demographic composition of the population participating at these sites.

To help close the gap in attendance at sites with lower rate of participation, CDFSS-SS/AAA is working with our meal providers to add more variety to the menus, increase the frequency of culturally diverse meals offered, and upgrade the quality of the meals overall. These steps will support the goals of increasing participation at both senior centers and congregate dining sites to help seniors maintain their independence and nutritional well-being.

Caregiving

During 2022 and 2023, DFSS conducted a survey of clients within the various program models offered within the Caregiving portfolio of services. Within the Caregiving Counseling and Support Program, 78% of the clients stated that they were treated with dignity and respect by counseling staff and also felt that their counselor strongly understood their concerns and their struggles. Although a small sample of individuals responded to the survey, those that contributed a response indicated that they agreed or strongly agreed when asked about their level of satisfaction with services. The lack of mental health services and providers, in-home mental health programs, and the affordability of mental health services are greater areas of concerns in regard to caregiving and counseling services.

Within the Caregiver Respite Program Facility Survey 2022-23, most of the participants sought the respite service either to attend to personal needs such as social, business,

**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

recreational or medical. The use of respite also allows the caregiver opportunities for self care to relieve emotional stress and prevent burnout. CDFSS-SS/AAA's Caregiver Respite program served 291 clients and 26,670 units in FY23. Pre-pandemic numbers for respite use were at 1,741 units. Service utilization, since 2019, grew by 1,431%. Based on this performance, we anticipate exponential growth as caregivers are beginning to access and utilize services. Additional Caregiver State Funds support the increased use of respite services.

About staff performance, 90% of the clients indicated the facility staff treated their loved ones and them with respect and dignity with 21% agreeing strongly, 87% indicated the facility staff responded promptly to their loved ones needs with 34% strongly agreeing. 89% of the participants agreed that facility staff made an effort to learn about their loved one's routines, personal habits, and medical needs and only 5% strongly disagreed. The same number of participants (89%) also agreed that the staff had knowledge and skills to do their job, with 29% agreeing strongly. They also indicated that adequate facility staff was available on all shifts, including evenings, nights and weekends, to meet caregiving needs while 10% were not satisfied.

Of all participants, 95% agreed that the building and grounds were monitored to ensure the security of the premises with only 5% strongly agreeing. Among these, 76% agreed that the interior layout and furnishing of the respite facility minimized the risk of accidents and injuries to their loved ones while 24% were not satisfied with the layout and furnishing.

About the maintenance of facilities, 82% agreed that the rooms and common living areas were clean, well maintained and attractive. 92% of the participants agreed that precautions were taken to prevent residents with dementia or Alzheimer's from wandering. Overall, 59% of the participants suggested to improve the services.

For the Caregiver Respite Program In-Home Survey 2022-23, 31% of the clients sought the respite services to relieve emotional stress, 7% to get time for work, 7% to attend to the needs of family members, and 55 % for other reasons.

About the worker's performance, 87% indicated that worker arrived at scheduled time while 13% indicated that sometimes worker arrived at scheduled time. 96% of the clients indicated the worker was friendly and courteous, 93% indicated the staff was well-trained and capable of meeting their relative's special needs with 29% strongly agreeing, and 87% agreed that agency staff was responsive to any questions or concerns they had raised about services.

The provided services helped clients in a variety of ways. It helped 81% of the clients to maintain their physical and/or emotional health, 74% to improve their ability to care for their family members, 67% to continue to be a caregiver so their family member can live in place of their choice, and 57% to accomplish their respite goal. All of the

participants were satisfied with the services they received. Some of them suggested to improve the services with 33% asking to provide more service hours.

The CDFSS-SS/AAA survey conducted from 2022-2024 of the Grandparents and Older Adults Raising Grandchildren program indicated that Grandparents found the program increased their ability to care for their grandchildren, increased their confidence in helping their grandchildren to grow and develop, increased their confidence in continuing to raise their grandchildren. The program also helped reduce stress for Grandparents. When asked how program services could be improved, seniors indicated that they would like to see more counseling staff, have additional time for communication, have more frequent as well as longer support group meetings.

CDFSS-SS/AAA is releasing Requests for Proposals (RFPs) for the Caregiving and Older Relatives Raising Children programs with the goal of improving program utilization and positioning our area agency on aging to better meet the needs of caregivers in Chicago.

Step Three: Determine Availability of Resources to Meet Needs and Alternative Approaches Available to Meet Needs

CDFSS-SS/AAA receives specific allocations of funds for services from the Illinois Department of Aging, the City of Chicago, and the Federal Government which it uses to develop a variety of services and programs that address the needs and interests of older adults. CDFSS-SS/AAA also submits or supports proposals to foundations, corporations, and federal agencies for the purpose of funding innovative programs to foster coordination within the existing system. Below are several examples of the partnerships, programs and initiatives that have been developed.

Pharmaceutical Assistance

CDFSS-SS/AAA continues to provide information and assistance, conduct outreach activities and education programs, and counsel Medicare beneficiaries about prescription coverage available under the Medicare Part D drug plans, and other public benefit and pharmaceutical assistance programs. CDFSS-SS/AAA will apply for funding to support these vital services to our seniors and individuals with disabilities in FY2022. More than 64% of senior provider agencies reported an increase in the number of clients requesting medication assistance over the past year and this was ranked 4th highest amongst the various survey categories. In addition, more than 1 out of 5 seniors who responded to the senior client need assistance indicated they needed help with understanding their health benefits. The grant will help address two significant needs as identified through the Senior Needs Assessment Survey and the Senior Provider Survey.

Medicare Improvement for Patients and Providers Act (MIPPA) Grant

CDFSS-SS/AAA continues work to expand outreach activities regarding Medicare Savings Programs (MSP), the Low-Income Subsidy (LIS) Program, and prescription coverage available under Medicare Part D drug plans. CDFSS-SS/AAA plans on submitting an application for a grant from IDOA to continue to provide this outreach and assistance.

Computer and Technology Series

CDFSS-SS/AAA offers technology classes for older adults to increase their computer and technology skills. They learn basic, intermediate, and advanced skills, including how to set-up an e-mail account and to how to navigate social media. The "Ask Joe Anything!" class is specifically designed with all technology questions in mind. This 'study hall' will consist of fielding questions about specific issues older adults may have about any of their devices (e.g.: Desktop, tablet/ iPad, smartphone). Additionally, in partnership with White Crane Wellness, CDFSS-SS/AAA offers a tutorial on using Zoom specifically designed for older adults. CDFSS-SS/AAA also works with the state to promote the Illinois Assistive Technology Program (IATP) provides technology solutions to seniors 60 and older including IPADS and training assistance.

Digital Skills Building with CyberNavigator: Computer Tutors Helping Older Adult Library Patrons Build Essential Skills

CDFSS-SS/AAA is forging a new partnership with the Chicago Public Library through their CyberNavigator Program to help older adults build technology skills. The term "digital readiness" means that people have both access to digital tools and online resources, and the skills they need to effectively use those tools. To help ensure that seniors can fully participate in a world that has increasingly moved online, Chicago Public Library offers CyberNavigator computer tutors! Through free one-on-one help sessions, video modules, and small group classes, patrons create resumes and fill out online job applications. They set up personal email accounts, learn how to protect themselves online, and find resources such as educational programs and health information. Support from the Chicago Public Library Foundation and its donors ensures that the CyberNavigator program can continue to help Chicago's older adults develop crucial digital skills. Among the courses offered to choose from include:

- Using Healthcare.gov to Enroll in Health Insurance
- Why Use a Computer?
- Getting Started on a Computer
- Basic Search
- Navigating a Website
- Intro to Email
- Intro to Email 2: Beyond the Basics
- Using a PC (Windows 10)

- Making Your Computer Easier to Use
- Intro to Searching Videos on YouTube
- Accounts & Passwords
- Internet Privacy
- Online Scams
- Keeping your Computer Secure
- Disinformation in Social Media
- Cloud Storage
- Online Job Searching
- Creating Resumes
- Applying for Jobs Online

Financial Education Series

CDFSS-SS/AAA in partnership with the Office of the City Treasurer hosts presentations on current financial issues affecting older adults. Through this partnership, financial workshops are provided at CDFSS-SS/AAA Regional and Satellite Centers. In addition, CDFSS/AAA works closely with the Illinois Attorney General Office in providing presentations on consumer fraud issues at our Regional and Satellite Centers. Due to Covid-19, some presentations were made to older adults through Zoom.

Income Tax Preparation Assistance

CDFSS-SS/AAA partners with the AARP Foundation Tax Aide Program and Ladder Up to offer free Federal and Illinois tax return preparation assistance to older Chicagoans resulting in over 2100 tax returns filed for 2023 through this partnership with AARP.

Supplemental Nutrition Programs through Innovative Partnerships

Older Adult Markets:

In addition to the Older American Act funded nutrition programs, CDFSS-SS/AAA has partnered with the Greater Chicago Food Depository (GCFD) in hosting a consumer choice food pantry initiative serving older adults and their families by providing free, nutritious food, including fresh produce at targeted Regional and Satellite Centers. In this model, Food is distributed using a “farmers’ market style” approach providing a dignified “shopping” experience that allows older adults to choose products that suit their nutritional need. CDFSS-SS/AAA is currently in discussions with GCFD regarding opportunities to expand the partnership to bring Farmer Market Vendors directly to the Regional Senior Centers where older adults can visit the center and if approved, they can obtain vouchers and shop onsite.

Pop Up Event Food Box Deliveries at Regional Senior Centers:

The Senior Food Box Program is designed to alleviate food insecurity by providing delivery of fresh produce, pantry staples, and frozen meats. The main goal of the Senior Food Box Program is to reduce the risk for food insecurity by creating access to fresh produce and frozen meats. The Senior Food Box Program will be offered to all older adults 60+. Although the program primarily focuses on monthly home deliveries, the program will also feature food box deliveries to our six Regional Senior Centers to provide additional opportunities to access fresh and nutritional food. Food Boxes will include nutritional and supportive information such as recipes based on the ingredients offered in each box. Furthermore, the Delegate Agency will be encouraged to coordinate outreach efforts through sharing promotional materials regarding CDFSS-SS/AAA Senior Center in-person and virtual programming cooking classes that complement Food Box ingredients.

Nourish Chicago Food Pantry and Pop Up Markets:

To align with OOA and help with food insecurity, CDFSS-SS/AAA launched the Nourish Chicago Food pantry which has served a total of 54,996 meals since its launch in May of 2023. Unlike other pantries, Nourish Chicago offers a large percentage of food comprised of fresh produce and proteins. The events follow an educational opportunity or recipe theme each month such as foods that help with inflammation and holiday menus. To help with social isolation, there is a pet program component that provides monthly pet packs containing medicine, food, treats and/or toys each month to seniors to help them care the pets that care for them. Up to 150 participants are enrolled that own cats or dogs who benefit from this assistance. To help with wellness, the program gives wellness packs that include toiletries and/or cleaning supplies, and shopping carts to help with senior's mobility when given so many pounds of food. The average amount of grocery cost per senior given out and saved for them per month is \$108.

Meals on Wheels Chicago expanded the Nourish Chicago Food Pantry to offer fresh produce through pop-up markets at senior centers throughout the city in 2023. The pantries are set up to allow seniors from all around the city to come in and shop just like they would in a regular grocery store. The pantries offer 70% fresh produce, proteins, pantry, and other wellness essentials. The pop-up markets provide an additional resource for Seniors who may be struggling to make ends meet. The pop-up events are expected to collectively provide enough food to create 215,750 healthy meals for over 7,650 seniors. The continuation of this program is contingent upon funding from our nonprofit partner, Meals on Wheels Chicago.

As part of another initiative to promote health and well-being among seniors, Meals on Wheels Chicago is offering a new series of cooking demonstrations that will add an educational component to their monthly Nourish Chicago Pantry. Launched in February

of 2024, these engaging sessions will feature renowned local chefs such as Lawrence Letrero (Bayan Ko), David Wang (Asadito Taco), David Oland (Mercat a la Planxa), William Lara (Le Sud), and Austin Fausett (LG). They will be guiding seniors through the creation of healthy signature dishes. The goal is to empower seniors with culinary skills, promote nutrition, and foster a sense of community through the joy of cooking.

These cooking demonstrations are designed to be accessible, informative, and enjoyable for seniors, with each session tailored to the unique needs and interests of the participants. Attendees will learn to prepare delicious and nutritious meals from the food that is provided by Meals on Wheels Chicago at The Nourish Chicago Pantry, and will also connect with local chefs, fostering a sense of community and shared culinary experiences.

Benefits Check-Up (BCU) Program

The Benefits Check Up program is a comprehensive, free online tool made available by the National Council on Aging (NCOA) that connects eligible older adults with benefits. CDFSS-SS/AAA is seeking to refine the usage of Benefits Check Up in ways that continue to reflect the growing needs of older Chicagoans. CDFSS-SS/AAA is working with NCOA to create a landing page for Chicago's AAA integrated into Benefits Check-up. This website will enable more comprehensive and area-specific resources to be provided. Further, this site will enable area agency-wide data to be collected on the types of support sought and provided to older adults in Chicago.

Senior Housing

The Chicago Housing Authority (CHA) has approximately 9,000 senior units in 51 buildings citywide for individuals 55 years of age and older in need of subsidized and public housing resources. To serve the Chicago's diverse population, various nonprofit agencies offer culturally appropriate and Lesbian Gay Bisexual Transgender and Questioning (LGBTQ) services and resources for seniors ranging from discount savings programs to supportive and assisted living opportunities that help seniors remain independent.

Training for Senior Service Providers

Recognizing that the training of Senior Service providers *directly* impacts the quality of services that are delivered to older adults, a priority will be placed on training Delegate Agencies in FY2022. CDFSS-SS/AAA will begin planning for an annual training series that will be conducted 10 months of the year, on a monthly basis, with the exception of the months of December and August. A proposed schedule of training topics to be included is as follows:

**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

Month	Topic
October	Public Benefits Access and Assistance, Medicare, State-funding programs, and more (Prep for Open Enrollment)
November	Social Isolation and Loneliness (Prep for holidays / winter months)
January	Services Offered by the Area Agency on Aging (Prep for New Year)
February	Working With Challenging Behaviors
March	Legal Resources for Older Adults
April	Mental Health and Depression in Older Adults
May	Caregiving & GORRC (Prep for Summer)

Identification of Gaps in Services

The provision of mental health for older adults represents a gap within the service area. Further, as indicated in the survey, service requests for utility assistance, transportation, social isolation and mental health services were among the top five unmet needs in the Senior Provider survey. Additionally, in our review of the CDFSS-SS/AAA's I&A requests for service, the percent of calls requesting in-home assistance services such as case management and housing relocation continue to remain a priority for seniors in Chicago.

Monthly housing expenditures such as utilities and assistance with rent also seem to remain a major concern for seniors. This is occurring as there remains a high demand for available and affordable senior housing units in Chicago. The demand for affordable senior housing options continues to outpace existing resources.

Additional gaps which were identified in the Senior Needs Assessment included help with personal technology including computers and smart devices such as cell phones. In addition, one out of four seniors require help in understanding government benefits, an area of need which has been consistently documented in CDFSS-SS/AAA's senior needs assessment over the past several years. Results from the Senior Provider Survey also indicated a high demand for housing assistance as well as food and utility assistance, indicating seniors in Chicago continue to struggle to meet basic living expenses. More importantly, these results indicate seniors continue to experience economic hardship, likely exacerbated due to the Covid-19 pandemic which limited their ability to access external resources because of the CDC's guidance on social distancing and quarantine.

There is a need for improved and more demand/response-activated, accessible, door-to-door transportation for frail older adults. As seniors become more limited in their ability to drive, the demand for expanded transportation options continue to increase. Access to transportation was identified as a significant unmet need in the Senior Provider Survey. With over 147,000 seniors 60 and above, (as of December 2019), who were identified

**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

as disabled, close to 30,000 or approximately 20% (1 out of 5) utilized the paratransit services in Chicago, according to the Regional Transportation Agency (RTA).

Affordable housing in a safe neighborhood is essential to the safety and well-being of older adults and an important part of the environment affecting quality of life. The area of housing was ranked first (most important) among the stakeholders in a survey conducted by the Buehler Center on Aging and Northwestern University Feinberg School of Medicine for the Age-friendly Chicago initiative. Responses from seniors surveyed indicated that they were least satisfied with housing options in their neighborhood. These rankings indicated poor perceived availability of supportive housing options, affordable housing options and housing options with important amenities in respondents' neighborhoods. According to data from Public Policy and Aging, current nursing home provision across the US will be insufficient to accommodate the baby boomer generation (Society, September 2014), Home modifications can reverse the nursing home trend and help people age in place.

Potential Resources to Address Gaps in Services

Mental Health Services

In an effort to address the demand for in-home mental health assistance, CDFSS-SS/AAA is working with the Chicago Department of Public Health (CDPH) to coordinate and streamline access to various public resources and community agencies, including community based mental health agencies and healthcare system. CDFSS-SS/AAA is working with the Chicago Department of Public Health (CDPH) to develop a process that will improve access and service delivery for mental health services to older adults in need of mental health service. Projects that increase access to mental health services for the public and specialized populations. Includes CTA Outreach, Walk-In Crisis Services, NAMI 311 Connection, and Outreach. As Mayor Brandon Johnson works towards the reopening of mental health clinics within the Treatment not Trauma initiatives, CDFSS-SS/AAA will continue to work with and partner with CDPH to ensure the mental health needs of seniors are well known and addressed.

Additionally, a number of the CDFSS-SS/AAA's agencies within the Intensive Case Advocacy and Support (ICAS) program which is funded through the Community Development Block Grant (CDBG), have professional staff that can provide counseling to seniors and some agencies that offer mental health services. CDFSS-SS/AAA hopes to continue expanding the number of agencies providing mental health services through the ICAS program.

Affordable Housing Options & Housing Assistance & Home Repairs

CDFSS-SS/AAA supports the efforts of the Chicago Department of Housing (DOH) and the Illinois Housing Development Authority (IHDA) to expand the much needed supply of affordable housing for seniors. CDFSS-SS/AAA also partners with the DOH on many housing-related issues affecting seniors, including predatory lending, assistance with home repairs, and senior housing studies. DOH and IHDA regularly consult with the area agency staff on applications they receive for funding for senior housing as well as for securing additional funding for home modification and repairs.

CDFSS-SS/AAA provides technical assistance to housing developers seeking to develop appropriate, affordable housing for seniors, including information on the types of funding available for housing development and supportive services, the processes involved in providing the housing and supportive service needs of seniors, and consultation on location, architectural design, and marketing issues. CDFSS-SS/AAA provides assistance to seniors in finding affordable housing by distributing a Senior Housing Resource List that includes information on public and private housing developments, as well as long term care facilities.

Through the City of Chicago's Department of Housing, seniors meeting income and other eligibility requirements can access resources for minor repairs. The Small Accessible Repairs (SARFS) program provides safety, security and accessibility improvements that help seniors remain in their homes. Repair types include, but are not limited to: grab bars, faucets, door repairs, carbon monoxide detectors, smoke detectors and wheelchair ramps. CDFSS-SS/AAA makes service referrals for seniors seeking assistance with this service. CDFSS-SS/AAA is also currently piloting the Communities Aging in Place Advancing Better Lives for Elders (CAPABLE) program with DOH through American Rescue Plan Act funding. This program allows CDFSS-SS/AAA to secure a person-centered plan that includes the senior, a nurse and occupational therapist working with the delegate agency conducting home modifications and repairs to coordinate services around the self-identified challenges and needs of the senior. The goal is to make home modifications driven by the specific needs of the senior while ensuring the senior is receiving the training and support regarding modifications made to improve quality of life, reduce the risk of falls and aid the senior in successfully aging within their home.

The Mayor's Office of People with Disabilities (MOPD), one of our key partners in the ADRN statewide initiative, provides a home modification program through which individuals of any age can receive alterations to their home environment making them more accessible and improving the quality of life and their ability to remain independent in their own homes. The HomeMod Program provides financial assistance to qualifying individuals with disabilities for structural alterations that increase the accessibility of homes or apartments. Modifications are performed by licensed, insured and experienced home remodeling companies.

Transportation

While the City of Chicago has an expansive fixed route transportation system, including accessible bus routes and special accessible service options including the Paratransit and Chicago Taxi Access Program, seniors continue to express the need for more options. In FY 2023, CDFSS-SS/AAA provided services to over 5,000 seniors and individuals with disabilities seeking assistance with Benefits Access Applications (BAA)/ Seniors Ride Free. CDFSS-SS/AAA will continue to explore innovative solutions that will provide better access to affordable transportation for eligible seniors and individuals with disabilities, ultimately resulting in the ridership growing and the expanded mobility of the population improving.

Additionally, as a component of our partnership with RTA, representatives from the transit authority attend designated senior centers and provide consumer driven education and instruction to older adults and individuals with disabilities on how to use CTA, Metra and Pace buses and trains. Consistent with the altering of programming during the pandemic, these services have been available through the phone. In addition to their group presentations to DFSS Senior Center participants, they offer:

- Trip Training: Participants work one-on-one with a travel trainer to practice using buses and trains to travel to locations they go to on a regular basis.
- Individual Transit Orientation: Participants work one-on-one with a travel trainer to receive a general introduction to bus and train accessibility. The goal of Individual Transit Orientation is to educate participants on how to use the entire transit system.

Pharmaceutical Assistance and Assistance with Understanding and Enrolling in Benefits

Through the Senior Health Assistance Program (SHAP), nearly 2,000 seniors were assisted with enrollment in the Pharmaceutical Assistance Program, Medicare Part D Program, Extra Help with prescriptions, Medicare Savings Programs and other benefits. Overall, CDFSS-SS/AAA assisted over 11,000 seniors and individuals with disabilities with applying for benefits that include: ride free and license plate discount.

CDFSS-SS/AAA in coordination with IDoA, continues to provide training to all CDFSS-SS/AAA I&A staff to become SHIP-certified to support and expand our outreach efforts. Three waves of I & A staff were trained in FY23 – 24. This enhanced training provides more assistance to seniors who need help understanding their benefits and increase capacity to identify seniors who may be eligible for pharmaceutical assistance, Low Income Subsidy, Medicare Savings Program and Medicare enrollment.

Benefits Check Up (BCU) is a tool used by Chicagoans to explore benefits for themselves and loved ones. CDFSS-SS/AAA proposes to expand the BCU Program to our Delegate

agencies and additionally to create a landing page for Chicagoans specifically featuring resources within the AAA. The resource will then be widely promoted with Alders, elected officials, and other community partners. Historically, the Benefits Check Up program has identified millions in eligible benefits for seniors in Chicago, consistently among the highest in the nation, as recognized by the National Council on Aging (NCOA).

Care Coordination Units / Managed Care Organizations (MCOs)

CDFSS-SS/AAA is working on building closer relationships with the Care Coordination Units (CCUs) as well as Managed Care Organizations (MCOs). Given the large number of clients assessed by care coordination units citywide and the ability to help identify gap and meet the needs of older adults in Chicago, CDFSS-SS/AAA has been scheduling regular quarterly meetings. The goal of these meetings is to enhance partnerships, build rapport, discuss case management issues, and to expand bi-directional communications during the pandemic and beyond. CDFSS-SS/AAA is collaborating more closely with CCUs to identify client situations, brainstorm solutions, and enhance overall service provision. CDFSS-SS/AAA will work more closely with the CCUs in emergency response and mitigation periods. Individual meetings will also be scheduled on a more frequent basis as needed within specific program areas.

Step Four: Establishing Priorities

In preparation for this new Area Plan cycle, CDFSS-SS/AAA program directors, managers as well as their staff, met frequently to discuss ideas on ways to improve CDFSS-SS/AAA delivery of services and programs and the directions that they would like their programs to take. These ideas are then proposed to the executive staff that evaluate their implications, capability, and impetus for program/policy changes.

Subsequent feedback meetings are held before senior management staff reconvenes in April to make final program and policy recommendations. These recommendations are not only developed for OAA funding allocations that are included in the Public Information Document (PID), but also for other Federal and local funding resources, such as CDBG and Corporate dollars.

After reviewing all of the information collected throughout the planning process, CDFSS-SS/AAA remains committed to targeting services to those individuals with the greatest economic or social need with particular emphasis on low-income and minority older persons. CDFSS-SS/AAA will work to ensure that any reductions to existing service levels will be as minimal as possible through strong fiscal planning and identified cost-saving measures.

CDFSS-SS/AAA's priority has been and continues to be in maintaining in-home services for older adults to support aging in place. Many of CDFSS-SS/AAA's programs have experienced growth in the number of participants as well as increasing number of challenging cases that require more intensive services and are projected to continue to

Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan

PSA:12

increase in FY2025. Some of this increased demand is being met through the City of Chicago Corporate support for programming activities at Senior Centers, Community Development Block Grant (CDBG) funds for Case Advocacy and Support (CAS), Intensive Case Advocacy and Support (ICAS), and Home Delivered Meals.

While it can be challenging to maintain services to seniors as costs rise and multiple funding streams are needed to try match the pace of rising senior needs, CDFSS-SS/AAA continues to aggressively pursue alternative resources. Utilizing public private/partnerships and strong fiscal and programmatic planning, CDFSS-SS/AAA has thus been able to implement innovative solutions that help maintain and expand the service network to meet needs of older, poorer, and more frail Chicagoans.

American Rescue Plan Funding & Beyond

CDFSS-SS/AAA leveraged ARP funding to expand existing services and to pilot new service opportunities to meet the growing needs of seniors. The following programs are programs that CDFSS-SS/AAA plans to continue at the sunset of ARP funding:

In FY2023, CDFSS-SS/AAA's Home Delivered Meals (HDM) program served nearly 4 million meals to over 16,000 individuals and projects serving approximately 4 million meals by the end of FY2024. Supported by Mayor Brandon Johnson's commitment to provide home delivered meals to eligible seniors through Community Development Block Grant (CDBG) funding, CDFSS-SS/AAA has not experienced the same problem of on-going waiting lists and unmet need for the HDM program, like many other communities across the country. CDBG funding has been made available to ensure that our most frail and vulnerable seniors receive care. In addition to CDBG, CDFSS-SS/AAA has been able to leverage and utilize ARP funding to support diversity in meal options such as Chinese, Korean, Vietnamese and Pakistani meals. CDFSS-SS/AAA will continue to provide these meal options and more to continue to meet the ethnic and cultural needs of the diverse senior population.

In FY2023, the Congregate Dining Program served 437,749 meals to 17,385 participants. In FY2024, CDFSS-SS introduced the "Passport to the World" program, funded by ARP to provide culturally inspired meals twice a month to Congregate Dining sites citywide. This initiative has been well received and the Congregate Dining Program has experienced an increased rate of participation on these days. Additionally, this program speaks to the seniors request for cultural and ethnic diversity in service provision by offering a wide variety of cultural/ethnic meals; (Polish, German, Italian, Greek, Caribbean, Southern, Latinx etc.) while simultaneously providing opportunities for small businesses (restaurants and/or caterers), located within economically disadvantaged communities on the south and west side, to partner with DFSS Senior Services' contracted meal provider to create meal plans and deliver meals to nearby congregate sites. CDFSS-SS/AAA will continue to harness the success and popularity

**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

of this program by continuing Passport to the World Days beyond the life of ARP.

With ARPA funding in FY2022-FY2024, CDFSS-SS/AAA enhanced and adapted its programming to include a range of innovative programs such as the Senior Food Box Program and the Chore Expansion. The original projection for clients served under the Senior Food Box Program was 300 clients; however, due to the increased demand in services, CDFSS-SS/AAA expanded the program to service over 900 clients in FY2023 and will have served over 1000 clients by ARP's end. CDFSS-SS/AAA will be including Senior Food Box under the Gap-Filling model in FY2025 for continuation of the program. This is in keeping with Senior's identification of food insecurity as a significant area of concern and as an area of much needed support.

CDFSS-SS/AAA also expanded Chore programming with ARPA funding to include exterior maintenance services including lawn care, snow removal, and professional extermination services. Due to the increased demand in services, DFSS will be including expansion services under Older Americans' Act Federal Chore programming.

CDFSS-SS/AAA utilized ARP funds to support Legal services expansion to protect seniors and those residing in long term care facilities with disabilities against involuntary discharges. This program expansion has been well received and provides this vulnerable population with much needed legal representation to protect their rights and to support the advocacy for their ability to participate in their own discharge planning.

Building upon the success of Alzheimer Disease Program Initiative (provided training to building managers on the signs of Dementia and related resources available) to provide onsite outreach and assistance to seniors in independent living buildings and connect them to services and programs. CDFSS-SS/AAA is piloting the Aging Well Navigators program primarily funded by ARP. The program directly speaks to one of the primary concerns of seniors as identified by the 2024 CDFSS-SS/AAA needs assessment which is the ability of seniors to ascertain their eligibility for benefits and resources that will help address issues of economic instability and help them better navigate growing expenses as they seek to age within their homes and communities. Community based agencies will receive training on benefits and resources available to seniors including caregiving and dementia related supports.

CDFSS-SS/AAA utilized ARP funds to pilot the Buried in Treasures/What's in Your Closet program, the first of its kind as implemented by a AAA to provide options counseling and support with respect to chronic disorganization and hoarding. The program was implemented virtually during inclement weather and onsite at senior centers and senior buildings to reach seniors wherever they were to advance decluttering, social engagement, better organizational strategies and to support fall prevention. CDFSS-SS/AAA will continue to provide this program through funds provided under the Older American's Act.

**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

CDFSS-SS/AAA is committed to assessing and meeting the needs of existing clients, conducting outreach to expand our reach and increase participation of new older adult clients, providing culturally and ethnically responsive programming and to engaging in strategies to support program sustainability. CDFSS-SS/AAA is actively marketing programs to funders and seeking out new grant opportunities to expand our funding base, as well as to explore corporate sponsorship opportunities. Overall, research on the aging population including and specifically the needs of the older adult population in Chicago demands that our existing portfolio of resources continues to grow and adapt to meet the evolving needs of Chicago's expanding and diversified senior population. CDFSS-SS/AAA is committed to meeting the needs of Chicago's seniors.

FY2025-2027 Area Plan Public Hearings

Three Area Plan Public Hearings were conducted by the Chicago Department of Family and Support Services, Senior Services Area Agency on Aging (CDFSS-SS/AAA) virtually and in-person as provided below.

Date and Zoom Link or Site Location of Public Hearings

March 19, 2024, 3:00 – 4:00 PM Central

https://us02web.zoom.us/webinar/register/WN_JqXSsVs4ThCTPxOobuBZsQ

Call-in information: 1-312-626-6799 Webinar ID: 831 3976 2257

March 20, 2024, 10:30 – 11:30 AM Central (In-person)

Southwest Regional Senior Center

6117 S. Kedzie Ave.

Chicago, IL 60629

March 21, 2024, 12:00 – 1:00 PM Central

https://us02web.zoom.us/webinar/register/WN_VOoJJVgvRK-5e-ZNpkTakA

Call-in information: 1 312 626 6799 Webinar ID: 863 2180 4205

Aggregated Summary of Attendees

A total of 137 individuals participated in the public hearings for the FY2024 Amendment to FY2025-2027 Area Plan on Aging. Twenty-one individuals testified and/or provided informal commentary. One written comment was submitted. Sign language and Spanish language interpreters were available for all three of the public hearings.

Basic attendee demographic information was collected and compiled for all three public hearings. The data collected included the following: age, race, ethnicity, caregiver

**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

status, and community member or service provider identification. It should be noted that not all attendees completed the survey and/or not all of the questions were answered.

Demographic Information	Number of Responses	Percent of Total
Age (over 60)	109	86%
Age (under 60)	18	14%
Race		
African American	75	61%
White	24	24%
Asian	8	8%
Native Hawaiian or Pacific Islander	7	7%
Middle Eastern	2	3%
American Indian or Alaskan Native	2	2%
Two or more Races	2	2%
Other	3	2%
Ethnicity		
Hispanic	90	74%
Non-Hispanic	32	26%
Are you a Family Caregiver for Older Adult or Raising Children?		
Yes	12	10%
No	111	90%
Are you a Senior Services Provider?		
Yes	25	20%
No	99	80%
Are you a Representative of the Business Community?		
Yes	11	9%
No	111	91%
Are you an Elected Official?		
Yes	6	5%
No	118	95%
Are you a Provider of Veteran's Healthcare?		
Yes	2	2%
No	122	98%
Are you a Representative of the Public?		
Yes	103	83%
No	21	17%

Public Information Document (PID)

**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

At each Public Hearing, information about the Public Information Document (PID) which summarizes the highlights of the Area Plan on Aging Fiscal Years 2022-2024 with the spending plan for Fiscal Year 2024 was provided to attendees.

Call to Order

The first Public Hearing was called to order at 3:03 PM, the second Public Hearing was called to order at 10:30 AM, and the third Public Hearing was called to order at 12:08 Noon by the Executive Director, Margaret LaRaviere.

Introductions

The CDFSS-SS/AAA Director began each meeting by welcoming members to the Public Hearing and introducing members of the *Public Hearing Panel*.

FY2025-2027 Area Plan on Aging Overview

The Executive Director provided an overview of the FY2025-2027 Area Plan on Aging and the purpose of the Public Hearing to obtain public comment on how best to deliver state and federal funded services to seniors 60 and older. The presentation included an overview of the AAA programs and services, the proposed funding allocations in the Governor's FY2025 budget, and the proposed funding increases and decreases in services. Following a review of the FY2025-2027 Area Plan on Aging and CDFSS-SS/AAA recommendations, the Director explained the Public Hearing rules. Each participant was limited to three minutes for providing testimony and was required to state their name and organization, if applicable. Participants were also notified that written testimony would be included in the Area Plan if sent to CDFSS-SS/AAA by 4:00 PM on March 27, 2024. Participants were also notified that the proceedings were being recorded. The public hearings were then opened for participants to testify.

No written comments were received during the public comment period.

Based upon the public hearings and the testimony provided, there were no changes made to the FY2025-2027 Area Plan.

AREA PLAN PUBLIC HEARING #1: The hearing was conducted virtually through Zoom and also included live participation from the **Southeast (Atlas) Regional Center**. A total of **55** participants attended the hearing.

Public Hearing Panel	CDFSS-SS/AAA Staff
Margaret LaRaviere, Executive Director, CDFSS-SS/AAA	Syed Naqvi
Yolanda Curry, Deputy Commissioner, CDFSS-SS/AAA	Madeline Pietryla
Karen Kolb Flude, Manager, CDFSS-SS/AAA	Alicia Henry
Nikki Proutsos, Assistant Commissioner CDFSS-SS/AAA	Margretta Thrift Rhodes

**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

Elizabeth Baum, Field Operations Manager, CDFSS-SS/AAA	Gladys Benitez
Stacy Subida, Supervisor of Family and Support Services, CDFSS-SS/AAA	Veronica Whitby
	Janiece Johnson

Discussion of Area Plan:

The Executive Director officially started the public meeting and welcomed the participants and panelists. Highlights were provided regarding the functions and responsibilities of the Area Agency on Aging, the purpose of the public hearings, the role of the advisory council, as well as an overview of the planning and preparation of the Area Plan on Aging. The Director stated the purpose of the hearing was to receive public comments on the Area Plan which summarizes the needs for older adults and identifies the array of services which are designed to meet these needs within the City of Chicago.

Director LaRaviere provided a summary of the comprehensive needs assessment conducted by the CDFSS-SS/AAA to identify the needs of older adults and caregivers in Chicago and to help determine how best to address those priority needs. The Director stated the purpose of the Public Information Document (PID) and referenced where the public can find the document online and at senior centers citywide.

The Director highlighted the wide range of services provided in collaboration with service providers as well as through direct services provided by the Area Agency on Aging. In FY2023, the CDFSS-SS/AAA provided over 5 million units of service to over 100,000 older adults and caregivers in the City of Chicago emphasizing our agency's commitment to targeting those in greatest social and economic need. The Director stated that the Area Plan remains focused on providing in-home services with particular focus on low-income and minority older adults in the City of Chicago and continues to pursue alternative resources as the cost of providing services continues to increase.

The Director provided a short summary regarding the local and statewide initiatives to be addressed by CDFSS-SS/AAA during the FY2025-FY2027 planning cycle.

Director LaRaviere provided an overview of the Governor's Budget to the Illinois General Assembly and the proposed changes in the total Area Plan funding as well as the breakdown of the AAA's proposed changes in direct and contracted services and the service projections for FY2025.

Included in the hearing presentation were some of the actions that CDFSS-SS/AAA proposes to take with its direct and contracted services using the projected FY2025 funding allocations. It was noted that during times of declining revenue projections from

Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan

PSA:12

federal, state, and local governments, service providers need to be prepared for potential budget reductions.

The Director stated that if CDFSS-SS/AAA receives funding allocations that are below the projected level for FY2025, new sources of revenue to maintain services would be explored. If services cannot be sustained, reductions in lower priority services will be made. If CDFSS-SS/AAA receives an increase in its funding above the level projected for FY2025, CDFSS-SS/AAA would allocate additional funding to services that will help support seniors to continue to live independently in their homes and their communities for as long as possible.

The Director opened the meeting for public comments and acknowledged the audience participating remotely from the Southeast (Atlas) Regional Center.

Testimony #1: Lashun James, Vice President of Government Affairs Addus Homecare:

My name is Lashun James, Vice President of Government Affairs with a national healthcare company called Addis Home Care. I was very interested in the statewide and local initiative, the plan to increase visibility of services. Many times, agencies will work in silos, but we have the same initiative to keep seniors at home for as long as they want with their families and out of institutions with support of services in place. How can we continue to support our seniors to stay at home with supportive services in place and enjoy their lives. How can we work closely together, with those, visibility of services to make sure that seniors are aware we continue to educate the community and continue to work with our state legislators and state representatives on services that are needed and just educating family members. Many times I get calls and asking me where to go or call for services? Just getting that word out to our community members who have elderly parents and don't know who to call or where to go. Thank you so very much for listening.

DFSS-SS/AAA Response: Margaret LaRaivere

Thank you. That was a great question and comment and one of the reasons it is our priority to increase visibility and awareness and related access to services. I think to your point a lot of people may not consider or think about the service that are needed to support older adults until that time and the responsibility is upon them. We want to make sure that everyone across the city is aware of the various services that we provide. That's why we do a media blitz through our local community area newspapers, to our community area neighborhoods. So we will have information in those local newspapers. We'll have information in the citywide or national papers such as the Chicago, we will utilize billboards across the city, we will do radio advertisements explaining what caregiver services are the benefits that caregiver services can provide. So to your point, it is so important that people know and understand the resources that are available for them when they need them and before they need them, because our population is growing older.

**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

People are either currently caregiving or they will be caregivers or they have been caregivers. Knowledge of the resources that we provide and the benefits that these resources provide are important as well and that its okay to accept these resources and supports. Often times, especially with caregivers, you care for your loved one, your family, your friend, out of love and you don't necessarily believe that there are services that can assist you or that you should be leveraging. The value that you provide to a loved one as a caregiver is substantial.

So, we want to make sure that you're educated and receive training on the ways to best care for that person that you love and to identify resources for yourself. Because as caregivers sometimes you're so focused on others that you forget to take care of yourself. And then in sharing this information, across the city. We also are calling attention to our different flyers that we provide to get information out. We have a seniors connected brochure that we use to get information out across the city and we hold different events across the city. We just held public health fairs and vaccination clinics where we were partnering with department of public health to identify some of the issues and concerns within public health that specifically apply to our seniors and then also making sure that our seniors has access to vaccinations.

We will continue to provide information and awareness on the services that we provide to your point. We will invite collaboration with various service providers, similar what we did and retrieving data and input for this planning on what service providers identify as the needs of older adults and then continue the conversation on how we can work collectively to meet the needs of older adults and caregivers across the city.

Testimony #2: Regina May

Is the reason for reduction of funds due to reduced use of the senior sites during COVID?

CDFSS-SS/AAA Response: Margaret LaRaivere

During the pandemic, and specifically during the stay-at-home order, a lot of agencies were closed across the city. Even though we weren't offering in-person services during COVID, we transitioned to services over the web and via telephone because we wanted to make sure that we continue to remain connected with our seniors. During COVID, we continued to offer pickup for food boxes at the senior center sites even though the centers were closed for other services. Older adults could come to a senior site to pick up a food box and, of course, we also continued to provide home delivered meals. I would say that any reduction in funding is not directly tied to the pandemic. There's a flow with funding that we receive and a flow with our services where we're looking at the services that we see are the greatest need that have the greatest impact. We are also looking at services that we want to strategize about doing something differently. So there are a number of considerations that are taken when looking at the distribution of the funding levels. Thank you for that question.

Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan

PSA:12

Testimony #3: Thelma Dean

I want to say, I am grateful to God that this center is here on 79th and King Drive. We have a wonderful, positive director and assistant director. All the staff here do all they can to help us. I am so grateful to be here. I've been here since September. I love this place. I'm trying to tell everybody about this place so we can come back this place. So thank you for all that you do for us. I remember I our ancestors had nowhere to go. They opened the door for us, so this place should be packed. Every day, there's all kinds of things here. Thank you so much.

CDFSS-SS/AAA Response: Margaret LaRaivere

Thank you so much for your comment and for talking about the value of Atlas. We appreciate the fact that you could spend your time anywhere, but you choose to come to Atlas and you choose to spend it with us. We greatly appreciate it and we appreciate you getting the word out.

Testimony #4: Rene Byrd Sullivan

It gives me such pleasure to be here today. I was working here when the center first opened and in fact knew. Frank Atlas and I am just so glad to see it from a participant perspective. When I was working here, we would see the seniors coming in and, you know, they just seem to be so happy. And now that I am here as a participant, I am happy to be here. The exercise classes, the special meals - I just really enjoy myself. Some of the people that I worked with meet up here, usually on Thursdays and Fridays. Thank you to the staff. The staff is outstanding and always pleasant. They make you feel that they are happy that you're here. Thank you.

CDFSS-SS/AAA Response: Margaret LaRaivere

Thank you for your comments. It's great to hear that you and your colleagues are meeting here as participants. I agree with you that the staff is amazing and we are so proud to have the leadership at the center that we do. We want everyone to consider Atlas when they walk through the door to be in their place, their spot, to hang out, to engage with others, to find peace and to engage in recreational activities that meet your needs. We greatly appreciate your input on the quality of services that you're receiving and welcome any other suggestions about what you'd like to see.

Testimony #5: Jistine Turnbough - Wilson

I am so happy that I found the Senior Center here at 79th Street because it is where I'm getting services along with my caregiver services. I participate in the exercise classes, and we are also participating in the choir here. I think this is the oldest center in this area that has a choir, and we rehearse every Wednesday. So, anyone can join us. We will be so happy to receive you all and this has been a blessing to me because I feel like this is my second home. Every day, Monday through Friday, I'm here so, I enjoy it. If it wasn't pleasant and peaceful here, I wouldn't come. This is a highly recommended place and I advise you to let everyone you know throughout the neighborhood. Just

come and enjoy and participate in the services that's provided here for everyone. It is a safe place. Thank you.

CDFSS-SS/AAA Response Margaret LaRaviere:

Thank you. We greatly appreciate those comments. I've had the honor and the pleasure of hearing choir here and we are glad that you feel so welcome in this space.

Testimony #6: Brenda Brown

I'd like to say how much of a blessing it is for me to be here at the Atlas Center. I am very happy to be here to exercise, to socialize, meet new people, and to have lunch. I lost my son, and I just buried him December 2nd, about two months ago and the Holy Spirit spoke to me. It clear said to get to the Atlas Center. I had never been here before. so the next morning I got up and got dressed and came here. And it was almost as if the staff was waiting for me. They welcomed me with open arms. I didn't know any of them, but I felt so happy. I'm here every day except for Thursdays and I love this place and everything I need seems to be right here. Thank you.

CDFSS-SS/AAA Response: Margaret LaRaviere

Thank you for sharing your experience. I want to say so sorry about your loss and we appreciate your testimony regarding your experience there at the senior center.

Testimony #7: Jeanette Cobb (SCSEP Title V Worker)

I have been a qualify for almost 5 years and I will enjoy the building more. I work as a trainee at the front desk at the Atlas Center, and I really have a lot fun being here..

CDFSS-SS/AAA Response: Margaret LaRaviere

Thank you so much for the work that you do. We greatly appreciate the work of our Title 5 workers. You all contribute greatly and add value to the senior center.

Testimony #8: Brenette Jelks: Advisory Council member

I've been volunteering here at Atlas for over 20 years and I want to say that each and every one at the center is so pleasant and I love everyone, especially Alicia. It's been such a positive change for me. I've been here for 20 years. But I see the change in me. Everybody is so outgoing and very pleasant. Thank you, Alicia, for giving me the appreciation certificate and I just love coming here. When she first got here, I mentioned to her I had gone into some training to be a bus group leader and after talking to her. we went on a couple of trips. I love being a bus leader and helping out in the kitchen. I used to wash dishes in the kitchen. I served. I did little of everything in the office. I just want to say to each and everyone - God bless everyone and love everyone.

CDFSS-SS/AAA Response: Margaret LaRaviere

Thank you and I just want to thank you so much for your service as an advisory council member. That's how I first met you. You talked about the joy that you receive from the senior center. We receive joy from you through the advisory council as well. Thank you

for your testimony and your volunteerism and for your advocacy on behalf of older adults as a member of the Senior Advisory Council.

Testimony #9: Irene Houston

I have a two-part question. What I notice around here that we are so busy cause we do some of everything up in here that do you have plans to expand? This location because this is a great location close to the bus line and close to the everywhere. People will Stony Island, and up and down, Cindy's nice street and we don't want to see you move, but we do want to see you as fan and the next question is I exercise class is a wonderful class and it's so big at time do you plan on expanding because if other simmers are closing because of low turnout we are not Hello, turnout. So where are we going? There at Atlas with a range of activities that everyone engages in I will continue to support Alicia and Margareta as they continue to do wonderful things.

CDFSS-SS/AAA Response: Margaret LaRaviere

Thank you for the question and we are so glad that you enjoy the exercise classes. We are not looking to close any of our senior centers right now. We're continuing to look at each center to see what additional activities we may need to add. We appreciate the question and the recommendation to expand current locations. At this time, we are not looking at expanding locations, but Atlas did receive a renovation a couple of years ago. We can see why you're asking about expansion because Atlas has such a high participation rate.

Testimony #10: Alessandra Medina

I work at a health and medicine policy research group and we are leading the Illinois Aging Together Movement in Illinois, which is a movement for aging equity. One of the goals is to implement a master plan for aging in Illinois and we have met with the Governor's office about this. We would love the Chicago AAA's support on this. How can we reach out for potential partnership?

CDFSS-SS/AAA Response: Margaret LaRaviere

Thank you for your question. Please type your information in the chat and we will reach out to you to discuss it further.

Testimony #11: Unknown Speaker

My question is, I read the PID and I was wondering about help removing heavy equipment or furniture and so forth, but I didn't see it in the PID. What would it be under? If you have heavy furniture or anything that needs to be removed out of your home and where do you go for those servcces?

CDFSS-SS/AAA Response: Margaret LaRaviere

That service falls under our chore service. Chore provides short-term support in home support for those that have been recently released from the hospital it's so it provides support with removing environmental hazards and for those that may have an individual

**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

risk of falling or tripping. Please talk to Alicia and Margretta (Senior Center Director and Assistant Director) If you would like to submit a referral for these services.
The meeting adjourned at 4:02 PM.

AREA PLAN PUBLIC HEARING #2: The hearing was conducted at the **Southwest Regional Center** located at 6117 S. Kedzie in Chicago. A total of **58** participants attended the hearing.

Public Hearing Panel	CDFSS-SS/AAA Staff
Margaret LaRaviere, Executive Director, CDFSS-SS/AAA	Syed Naqvi
Yolanda Curry, Deputy Commissioner, CDFSS-SS/AAA	Madeline Pietryla
Karen Kolb Flude, Manager, CDFSS-SS/AAA	Alicia Henry
Nikki Proutsos, Assistant Commissioner CDFSS-SS/AAA	Margretta Thrift Rhodes
Stacy Subida, Supervisor of Family and Support Services, CDFSS-SS/AAA	Gladys Benitez
	Veronica Whitby
	Angelica Dichosa
	Janiece Johnson

Discussion of Area Plan:

The Executive Director officially started the public meeting and welcomed the participants and panelists. Highlights were provided regarding the functions and responsibilities of the Area Agency on Aging, the purpose of the public hearings, the role of the advisory council, as well as an overview of the planning and preparation of the Area Plan on Aging. The Director stated the purpose of the hearing was to receive public comments on the Area Plan which summarizes the needs for older adults and identifies the array of services which are designed to meet these needs within the City of Chicago.

Director LaRaviere provided a summary of the comprehensive needs assessment conducted by the CDFSS-SS/AAA to identify the needs of older adults and caregivers iChicago and to help determine how best to address those priority needs. The Director stated the purpose of the Public Information Document (PID) and referenced where the public can find the document online and at senior centers citywide.

During the Executive Director’s presentation a few of the attendees made comments regarding meal quality, more trips for seniors, and newer and better exercise equipment. The Director asked the Deputy Commissioner, Yolanda Curry, to take notes about the comments made.

The Director highlighted the wide range of services provided in collaboration with service providers as well as through direct services provided by the Area Agency on Aging. In FY2023, the CDFSS-SS/AAA provided over 5 million units of service to over

**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

100,000 older adults and caregivers in the City of Chicago emphasizing our agency's commitment to targeting those in greatest social and economic need. The Director stated that the Area Plan remains focused on providing in-home services with particular focus on low-income and minority older adults in the City of Chicago and continues to pursue alternative resources as the cost of providing services continues to increase.

The Director provided a short summary regarding the local and statewide initiatives to be addressed by CDFSS-SS/AAA during the FY2025-FY2027 planning cycle.

Director LaRaviere provided an overview of the Governor's Budget to the Illinois General Assembly and the proposed changes in the total Area Plan funding as well as the breakdown of the AAA's proposed changes in direct and contracted services and the service projections for FY2025.

Included in the hearing presentation were some of the actions that CDFSS-SS/AAA proposes to take with its direct and contracted services using the projected FY2025 funding allocations. It was noted that during times of declining revenue projections from federal, state, and local governments, service providers need to be prepared for potential budget reductions.

The Director stated that if CDFSS-SS/AAA receives funding allocations that are below the projected level for FY2025, new sources of revenue to maintain services would be explored. If services cannot be sustained, reductions in lower priority services will be made. If CDFSS-SS/AAA receives an increase in its funding above the level projected for FY2025, CDFSS-SS/AAA would allocate additional funding to services that will help support seniors to continue to live independently in their homes and their communities for as long as possible.

The Director opened the meeting for public comments.

Testimony #1: Jewel Phillips

I'm Jewel Phillips and I would just like to know when are they going to get the computer room open so we can learn how to use the computer, so we can check out our own groceries instead of listening to people when we pass by, calling us lazy because we don't want to check out our own groceries, which I would never want to do. Some of us want to check out our own groceries but our computer room is closed. I am hoping we can get this started so we can learn how to check out our own groceries.

CDFSS-SS/AAA Response: Margaret LaRaviere

I'm just going to restate your question, but first of all, I don't know of anyone who should be calling anyone lazy. That's totally inappropriate and it's unacceptable. So that should not be happening with respect to older adults and the ability to manage and operate on computers. I think the public as a whole we just need to be more respectful of each other with that. And so, your question is about the use of the computer labs in your

Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan

PSA:12

center. So, I will share across the centers, we've been working on upgrading the computers and all of our senior centers. Our previous computers were pretty outdated to say the least. We have also purchased new computers, and they're being installed. We're also in the process of conducting new wiring so that when you're when the new computers are installed, and the new wiring is in place, you'll be able to access the net more quickly.

Follow-up Comment: Jewell Phillips Will there be a fee?

CDFSS-SS/AAA Response: Margaret LaRaviere

Yolanda Curry is the Deputy Commissioner over the senior centers. Yolanda?

CDFSS-SS/AAA Response: Yolanda Curry

Generally speaking, for most classes and opportunities that we provide through the older American Act, we have to offer you the opportunity to make a suggested donation for programming and so certainly what we can do is we offer the opportunity, but we can kind of talk offline and more specifically with the management here to see which classes are offered and what we can do maybe at no cost. But again, we're going to always give you the opportunity to donate to programming. Donations are voluntary.

Testimony #2: Edith Mondragon

I would like to know about the English classes we registered for last year in November. Will there be a session on speaking English this spring?

CDFSS-SS/AAA Response: Margaret LaRaviere

We will follow up with the regional center director, Jewell Wilson and see what the scheduling is going to look like. But what I'm hearing from you is you would like for those classes to begin.

Testimony #3: Dr. Lawaune Moorman

It's very nice to see all of our compatriots here today. Anyway, I was listening to what was going on in terms of your budget and I'm concerned about the senior caregivers, it seems in 2025 there will be no funding. From what I see here, everything is gone.

CDFSS-SS/AAA Response: Margaret LaRaviere

No - we have continued funding for our caregiver program.

Follow-up Comment: Lawaune Moorman

Does it go under a new program? All the caregiver stuff is not funded for FY25.

CDFSS-SS/AAA Response: Margaret LaRaviere

We are redesigning our caregiver program so the way it was previously funded has changed, and it will now be funded in a different way. We're restructuring the program in hopes of meeting more caregivers across the city. So that's why you see the difference

with the funding. Caregiver support services is one of the major services that we provide, and we are going to continue to provide this service. Thank you for pointing out that change.

Testimony #4: Betty Seastrong

I'm speaking in terms of the social isolation program that you mentioned. We used to have senior outings and we used to have a senior ball. I wanted to know if you are going to work with other organizations to bring that back and that will help the isolation.

CDFSS-SS/AAA Response: Margaret LaRaviere

We have heard from other older adults as well about the senior outings. I will say Yolanda is currently working on some upcoming outings. Last year, we saw Romeo and Juliet at the Lyric Opera. This year, she's working on setting up another outing. We're also working on a big event. I can't say too much about it right now because it's still in the works, but we have heard you with respect to wanting to have more large-scale events as previously held before the pandemic.

CDFSS-SS/AAA Response: Yolanda Curry

I'm not going to talk about that event in particular, but what I can say is that the team is really out trying to hear and meet your demands about outings. Our partnership with the Lyric Opera continues and what they've committed to is providing tickets for us both in the fall and in the spring. So, their new season will have two opportunities to go to the opera. We have the Chicago White Sox, who are donating tickets to us. So, we're just kind of nailing down the dates to go to the games. We will be bringing back Senior Fest in September and so that's 8000 seniors down in Millennium Park. We are working in concert with CHA for the Senior Music Festival in the summer and we still are getting our tickets from the Chicago Symphony. In addition, like I said, we're continuing to try to find partnerships right for you all to have to get out in the community and I understand that the pandemic was hard, and folks were locked in the house. We want to make sure that you're vaccinated and safe. We want to bring opportunities to you to enjoy yourselves.

CDFSS-SS/AAA Response: Margaret LaRaviere

that's one of her roles is going out there, finding events, outings, talking with people. To get things events on the books and on the calendars. So, we do have additional events that are coming up as she shared.

Testimony #5: Juana Mejia (Angelica Dichosa from CDFSS-SS/AAA translated for Ms. Mejia.) Ms. Mejia stated that there is a lack of bilingual services in this center and even someone to reach out to regarding benefits. She would like more bilingual services in this center and across the city.

CDFSS-SS/AAA Response: Margaret LaRaviere

We appreciate that question and we wholeheartedly agree. Angelica is going to be working on a project for the expansion of bilingual services through webinars, working with other agencies to assist us with providing bilingual classes and other types of support. Chicago is a diverse city, and we all know this. We have to meet the needs of diversity. Angelica is one of our newest employees and this is one of her major projects: helping us with our bilingual services and support. We will be providing presentations in Spanish as well. As a side note, the benefit worker is bilingual, and our assistant Southwest regional center director is also bilingual, Felipe Sanchez. We wholeheartedly agree that we have to have more bilingual services and supports, and we are working on that.

Testimony #5: Debbie Sepulveda

I know it was previously mentioned about the fitness room, I really enjoy the use of it, but the equipment is very outdated. There is currently equipment that doesn't even work and it's been that way for months so I don't even know if it's going to be repaired or if we are thinking of getting that equipment replaced.

CDFSS-SS/AAA Response: Margaret LaRaviere:

Great question. So, what happened during COVID, when the senior centers were shut down, no one was using the existing equipment at all. By the time we reopened, we discovered that a number of our existing machines needed to be replaced. So, we are using some of the ARP dollars that we received from the state to update the equipment. The other part of that is the contracting element. It would be easy if we could just order the equipment online and replace it, but we have to identify someone to contract with and get permission to contract. They would need to take the old equipment and bring in the new. We are working on it.

Testimony #6: Ricardo

Some of the equipment doesn't need to be replaced but more so, repaired. How can we get the equipment repaired that doesn't need to be replaced?

CDFSS-SS/AAA Response: Yolanda Curry

We share your concern. However, with the City of Chicago, we have procurement processes that we have to follow. These processes are part of the bigger process with the city and so they have specific procedures that we have to go through to get a contract with the corporation or company that can come out and repair the equipment. There are a lot of technical aspects to this process, and we must follow the rules of the City of Chicago. We are in communication with our procurement team to work through getting new equipment and to fix equipment in need of repair. Unfortunately, it is a lengthy process.

CDFSS-SS/AAA Response: Margaret LaRaviere (Additional follow-up response from the Executive Director)

**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

All of that is to say, we are working on it. Are there any more questions? And if not, I want to say thank you all, so much. We appreciate you taking the time to review our planning document. If you have any additional questions or comments, you can always email me. We are very appreciative of the fact that you visit this center every day. We will take all of your questions and comments into consideration. Thank you.

The meeting was adjourned at 11:45 A.M.

PUBLIC HEARING #3: The hearing was conducted virtually through Zoom and included real-time participation from the **Central West Regional Center**. A total of 24 participants attended the hearing.

Public Hearing Panel	CDFSS-SS/AAA Staff
Margaret LaRaviere, Executive Director, CDFSS-SS/AAA	Elizabeth Baum
Yolanda Curry, Deputy Commissioner, CDFSS-SS/AAA	Madeline Pietryla
Karen Kolb Flude, Manager, CDFSS-SS/AAA	Stephania Rhue
Nikki Proutsos, Assistant Commissioner CDFSS-SS/AAA	Danielle Riley
	Veronica Whitby
	Angelica Dichosa

Discussion of Area Plan:

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**Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan**

PSA:12

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The Director opened the meeting for public comments.

Testimony #1: Carrie Chocolate

The senior stated that they want to see more events and trips planned for the seniors.

CDFSS-SS/AAA Response: Margaret LaRaviere

We have heard the same request from other seniors in terms of how important the trips and events and we are working on securing events.

Testimony #2:

The senior expressed concern about any possible budget reductions and asked which program we would eliminate if funding were reduced.

CDFSS-SS/AAA Response: Margaret LaRaviere

We do not foresee an extreme decrease in the budget. If there was a decrease, we would look at services that are not well utilized and/or look to see if we could address the decrease through administrative costs.

Testimony #3: Gwendolyn Turner

Are there any other providers offering free internet to seniors, as the current is ending?

Chicago Department of Family and Support Services
Senior Services Area Agency on Aging
FY2025 - FY2027 Area Plan

PSA:12

CDFSS-SS/AAA Response: Margaret LaRaviere

The Director provided information regarding the Illinois Assistive Technology Program (IATP).

Testimony #4: Cleven Wardlow

Can any of the senior centers be made to have a pool for water aerobics?

CDFSS-SS/AAA Response: Margaret LaRaviere

We have researched the design and costs of adding a pool in a Regional Senior Center and unfortunately, we are not able to do so. The costs associated with maintenance of the pool (checking the water temperature and making sure pool is clean) and having a life guard present is not something we are able to afford.

The meeting was adjourned at 12:52 P.M.