

THE STATE OF MOUNTAIN VIEW SENIORS 2017

INTRODUCTION

Mountain View, like the rest of the country (and, indeed, the developed countries across the world) is graying. People are living longer thanks largely to improvements in hygiene, advances in medicine and medical technology, and better public health. The average life expectancy in the U.S. is currently 78.9 years and rising, although we are ranked 53rd in the world (residents of Monaco have a life expectancy of 89.52; those in Japan 84.74; Canada live to 82). Further, the Baby Boomers (those born between 1946 and 1964) are expected to swell the ranks of those 65 and older dramatically in the next 20 years. Mountain View is likely to feel a greater than average impact of these seniors since it has the climactic, educational, cultural, and ethnic factors that make it attractive to an older population.

Mountain View benefits greatly from being in an area where crossing City borders to get appropriate services for seniors is not a problem. For example, the Mountain View Senior Center serves not only seniors (and their families) from Mountain View, but seniors from surrounding communities as well. Where Mountain View's senior housing or care facilities are not available or appropriate, there are other options in 27 nearby cities and towns. In short, facilities and activities for Mountain View seniors should be considered part of a regional offering. However, a regional shortage of affordable senior housing affects Mountain View in particular.

That said, seniors in Mountain View have access to a wide variety of specialized services and programs, including housing and health care, transportation, nutrition, the outstanding Senior Center, protection from elder abuse, and in-home supportive services. It already has 1,088 subsidized housing units with 754 set aside for seniors, a senior day-care facility operated by Avenidas, various kinds of financial assistance programs administered by the Community Services Agency, other State-funded services provided through Santa Clara County, and programs offered through the Jewish Community Center and various cultural and ethnic groups. However, in the last several years, rental housing availability has gotten very tight, both for seniors and the general public, with rents climbing well out of reach of most seniors. Many seniors are now facing eviction from their market-rate units so that the owner can refurbish the units and then charge two to three times as much for the same unit.

This report summarizes the Mountain View-specific programs and services and discusses regional, State, and national trends where local data does not exist. It includes data from the 2017 Census estimates with information about seniors and for counties and cities. We also used the latest data we could find from the California

Department of Finance (which does its own population projections) and from estimates from the Census' American Community Survey estimates.

DEMOGRAPHICS

As of June 1, 2017, the Census Bureau estimated that there were 325,278,000 people living in the United States, a 16 percent increase over the 2010 figure. In California, there was a 6 percent increase over the same period, with a 2010 total of 37,253,956 and a 2017 total of 39,524,000 . Between the 2010 Census and its associated projections, and the California Department of Finance, data for the U.S., California, and Santa Clara County senior populations were available, including age-specific data for Mountain View. The following charts may provide some useful information:

UNITED STATES, CALIFORNIA, AND SANTA CLARA COUNTY SENIOR POPULATION PROJECTIONS

United States 278,094,000						
Year	2015	% of Pop.	2030	% of Pop.	2050	% of Pop.
Total Pop.	278,094,000		302,545,000		326,030,000	
Age:						
65+	41,424,000	14.89	61,612,000	20.36	66,101,000	20.27
85+	5,542,000	1.92	7,776,000	2.57	15,391,000	4.72
100+	105,000	0.03	119,000	0.03	328,000	0.10
California						
Year	2015	% of Pop.	2030	% of Pop.	2050	% of Pop.
Total pop.	39,059,809		44,019,846		51,056,510	
Age:						
65+	5,252,070	13.45	9,070,659	20.60	12,464,959	24.14
85+	674,711	1.79	993,497	28.30	2,309,379	4.52
100+	4,388	0.01	21,443	0.05	89,421	0.17
Santa Clara County						
Year	2015	% of Pop.	2030	% of Pop.	2050	% of Pop.
Total pop.	1,905,109		2,230,564		2,482,347	
Age:						
65+	250,369	13.07	455,558	20.42	672,868	25.48
85+	34,357	1.79	65,903	2.95	361,406	14.56
100+	395	0.01	772	0.06	1,489	0.21

Figure 1: Senior Population Projections, 2015, 2030, and 2050

Note: U.S. Census population projections have not been updated since 2014.

Source: U.S. Census Population Projections, 2015; California Dept. of Finance, Report P-1: Summary Population Projections by Race, Ethnicity, and Major Age Groups, 2015

As of 2015, approximately 13 percent of California's population was age 65 and older, according to the California Department of Finance. By 2030, it is projected that this percentage will have grown to about 20 percent of the total population. That means for every person under 18, the State will add another 7 seniors. Older Californians are the State's fastest growing age group, and their numbers will grow by 67 percent by 2030. This is a virtual tidal wave of older people, whose special needs will make demands on State funds in record numbers. By the year 2050, seniors are estimated to be somewhere around 24 percent of the State's population. (By 2050, most of the Baby Boomer generation will have died.) This will also have a huge impact on demands for State funds.

In Santa Clara County, 1 in 5 adults will be over 65 by 2030 and by 2050, they will be one-quarter of the County's population. Further, 14.5 percent of the County's population will be 85 and older, a population greater than the estimated total number of seniors today.

According to the American Community Survey,¹ as of 2017, Mountain View had a total of 79,278 residents. Of those, 8,068 residents age 65 and over (or about 10.3 percent of the City population): 4,411 of those were ages 65 to 74, 2,470 were 75 to 84, and 1,187 were 85 and over.

This senior population growth is largely driven by the Baby Boomers—an age group born between 1946 and 1964—the oldest of whom began turning 60 in 2006. Santa Clara County will experience probably a greater-than-average impact from this group since its climate, wealth of educational and civic resources, high-quality medical facilities, and vital economic environment will entice retirees into staying put if they can afford to do so. Of course, the growth of this population group will also mean much higher demand for senior services, roughly doubling the current demand by 2050.

1. *Santa Clara County Seniors' Agenda: A Quality of Life Assessment*, Santa Clara County Board of Supervisors, 2012, Section 5, Page 1

Population projections by the Bureau of the Census indicate the following changes for Mountain View:

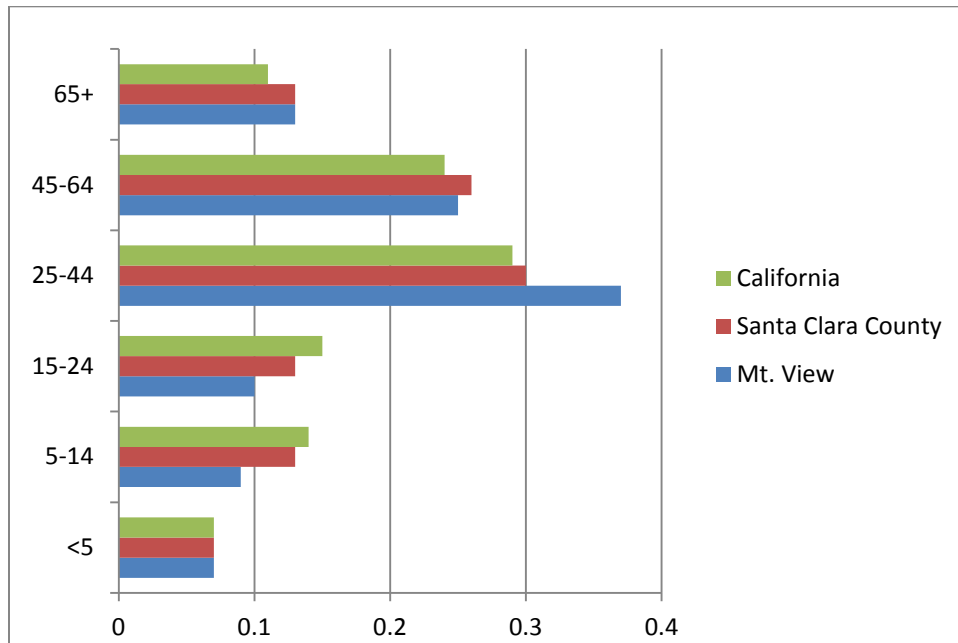


Figure 2: Population Age Groups for Mountain View

Population projections by the Bureau of the Census are often impacted by their assumptions, and the more local those projections are, the more likely they are to be in error. Seniors are more likely to gravitate toward areas where there are senior services, affordable housing, moderate climate, and good medical facilities than to those areas where those qualities are poor. However, in Mountain View and nearby cities, the cost of housing is forcing many seniors to weigh the cost of moving to nearby locations so they can stay in the same area, against staying in the same house. This, then, contributes to the scarcity of housing for new families wanting to move into the area, driving up prices for available homes. Increasingly, this means that seniors are retreating from living alone in detached single-family homes and isolated areas to condominiums, apartments, and congregate facilities in urban and suburban areas.

SENIOR ETHNICITY

White, non-Hispanic people made up 34 percent of the Santa Clara County population as of the State’s 2015 projections, with 32 percent being Asian and 10.5 percent being Hispanic. However, that is due to change significantly in the near future. The California Department of Finance projects that by 2030 white, non-Hispanic residents

will make up only 31.6 percent of the County's population, with Asians representing 32.3 percent and Hispanics representing 28.4 percent.²

The category of "Asian" includes a number of ethnic groups, but in Santa Clara County the predominant subgroups are Chinese, Vietnamese, Japanese, Asian Indian, and Filipino.

Mountain View's Asian seniors represent about 27 percent of the City's senior population. Its Hispanic seniors represent almost 21 percent of its senior population.

SENIOR EMPLOYMENT

According to the American Community Survey 2015 estimates, 33.1 percent of those 65 and older in Santa Clara County were employed. With the economic recovery since 2008, seniors have marginally been able to find more work, but age discrimination in Santa Clara County remains a problem.³ Engineers, technical workers, and those previously employed in the computer industry begin experiencing subtle forms of age discrimination as of about age 50, usually with "restructuring" of the company given as the excuse. Since these workers are usually at the peak of their earning period, finding jobs with comparable pay is difficult, and many turn either to consulting or other entrepreneurial work, or take jobs with less pay, sometimes not in a technical occupation. Some of those trying to return to technical work find that their skills do not match what the market currently demands, such as experience with programming languages or familiarity with certain organizational protocols and practices, and need additional training to become employable.

For many seniors, the recession of 2008 meant a loss of anywhere between one-third and two-thirds of their retirement assets, including real estate.⁴ While many retirement accounts have recovered at least some portion of that loss, many still need to make up the difference between what they had and what they now need. This is particularly true for recently retired seniors who had just begun to draw on their retirement assets. For many of these seniors, the loss meant returning to the work force.

An additional problem has surfaced for many seniors who retired in the last 15 years in that many area companies have terminated their health insurance coverage of previous employees. This should not be considered the same as the limitations on COBRA coverage; it is a cancellation of a benefit promised as part of a retirement package.

² California Department of Finance, Total Estimated and Projected Population for California Counties: July 1, 2010 to July 1, 2060 in 5-year Increments.

³ Rukin, Peter (5/22/2014). Is the Silicon Valley Startup Culture Biased Based on Age? Retrieved from www.rhdtlaw.com/age-bias-silicon-valley.

⁴ *Santa Clara County Seniors' Agenda: A Quality of Life Assessment*, Santa Clara County Board of Supervisors, 2012, Section 5, Page 12.

When this happens, the senior is without health care insurance and has to get it via Medicare or Medicaid, an exchange via the Affordable Care Act, or privately, at an increase in personal expense.

SENIORS OVER 75

Older seniors are more likely to experience multiple health problems and geographic isolation, which can lead to more health problems. In Santa Clara County, 15 percent of the senior population is 75 plus, and 59 percent of those 75 plus live alone. Women are twice as likely as men to live alone.⁵

There are at least four major problems associated with living alone:

1. Lack of available transportation;
2. Lack of immediate help;
3. Increased isolation and depression; and
4. Lack of mental engagement with transportation being the problem cited most often.

After age 65, many seniors are on a year-to-year basis with their drivers' licenses, which can be removed any time the Department of Motor Vehicles feels it is appropriate. A doctor can recommend removal of driving privileges, one's immediate family members can request it, or the person him/herself can do so. However, once one can no longer drive, the senior needs alternate modes of transportation, whether that is a ride from a friend or relative or reliance on public transportation. This includes rides to and from medical appointments, the grocery store, the movies, civic events, and many other things access to which most nonseniors take for granted. Many seniors begin to feel like they are prisoners in their own homes.

Another problem with living alone is the lack of immediate help if there is a problem. Most people are aware of the "Help! I've fallen and can't get up!" commercials; they reflect a problem more common to seniors and even more common to seniors who live alone. While the Mountain View Fire Department does an admirable job of responding to emergency calls, sometimes a fall results in unconsciousness or inability to dial 911, which means a longer time for help to reach the victim.

⁵ *Santa Clara County Seniors' Agenda: A Quality of Life Assessment*, Santa Clara County Board of Supervisors, 2012, Section 5, Page 13.

Third, living alone tends to promote isolation and depression, both of which have been shown to contribute to heart disease and other mental and physical problems. Further, unless the isolated senior is very active on foot, it also leads to a general lack of strength, which leads to other problems. Finally, lack of mental involvement can also lead to further mental problems, including more rapid onset of symptoms associated with Alzheimer's disease or dementia.

Older seniors are also more likely to fall and injure themselves, sometimes requiring hospitalization. In Santa Clara County, 2.3 in 100 County seniors aged 65 to 84 suffered a nonfatal hospitalization due to a fall in 2011.⁶ However, the number for seniors 85 plus was 4.7 in 100. Unintentional falls caused 100 senior deaths in 2011 in Santa Clara County, more than double the other causes of fatal, unintentional hospitalization. The single most likely cause of these falls is related to balance and leg strength, both of which normally decline in one's senior years.

In case of a fall, a call to 911 will bring personnel from the Mountain View Fire Department to help the person get up again. These personnel will also determine whether the person needs medical attention or transportation to a hospital and will arrange for the appropriate resources to respond.

One possible answer to the problems of living alone is the LinkAges program, sponsored by the Palo Alto Medical Foundation. About five years old, the LinkAges program aims to provide a kind of online neighborhood, where participants can post requests or offer services to other participants. Among the more popular services requested are rides to various local destinations or learning how to do something, but can include things like reupholstering a seat cushion, transporting several cartons of donated books to the Senior Center, or preparing and serving an ethnic dinner for six. Members are not paid for their services; all "payment" is in the form of TimeBank hours, which one accumulates by offering services and "spends" by asking for a service.

INCOME LEVELS

Data about the income levels of seniors in Mountain View comes from the American Community Survey, which estimates that 15,300 seniors in Santa Clara County live below the Federal poverty line, defined as having less than \$907.50 in monthly income for a single person, and \$1,225.00 a month for a couple. (The Federal poverty line is a fixed number for all 50 states and does not reflect the local cost of living.)

⁶ www.scc.gov/scc/phd/en-us/partners/Data/Documents/violence_and_injury_quickfacts_2014/senior_falls_quickfacts_final_100314.pdf.

It should be noted that the Elder Economic Security Index (EESI), unlike the Federal Poverty Level calculations, covers housing, food, health care, and transportation expenses of a person 65 or older, and is calculated on a county-by-county basis. In Santa Clara County, the median annual income for a senior single renter in 2011 was \$27,423 (compared to the median California Poverty Measure of \$14,268 and the Federal Poverty Guideline of \$10,890 for the same period). More specific EESI guidelines are as follows:

Maximum Income Needed per Year

	Elder Index	Federal Poverty Level	Median Social Security Payment
Single owner without mortgage	\$18,082	\$10,890	\$12,605
Single owner with mortgage	\$39,846	\$10,980	\$12,605
Single renter, one bedroom	\$27,423	\$10,890	\$12,605
Couple without mortgage	\$26,803	\$14,710	\$20,736
Couple with mortgage	\$48,567	\$14,710	\$20,736
Couple, renter, one bedroom	\$36,145	\$14,710	\$20,736

According to the most recent information available, Mountain View had about 10.3 percent of those 65 and older with incomes under the Federal poverty level. Santa Clara County had about 15.3 percent of County residents 65 and older with incomes under the poverty level. In both Mountain View and Santa Clara County, minority seniors were significantly more likely to be living in poverty than their white, non-Hispanic counterparts.

That said, the subsidized housing program has income limits which could be used to infer senior income levels. Currently, an applicant for the below-market-rate (BMR) housing units for Mountain View seniors may not have a household income greater than \$55,500 in order to qualify for a single-occupancy unit.

HOUSING

In Mountain View, according to the 2010 Census, 32,002 residents were in owner-occupied residences and 41,799 were in renter-occupied residences. At that time, there were 41,468 white households (of whom some were Hispanic), 19,232 were Asian, 16,071 were Hispanic, and 1,639 were African-American.

There are a variety of housing alternatives available for seniors; most are represented in Mountain View. Among the choices:

- Your own house, condominium, mobile home, or apartment, with monthly mortgage, insurance, and taxes or with monthly rent payments.
- A senior residential community where you either purchase the unit and pay a monthly fee or where the monthly rental includes the care fee; a local example of the latter is Redwood Villa on Montecito Avenue.
- A life-care community where you purchase a unit and pay a monthly fee which depends on the level of service you need, all the way through hospice care; local examples are The Forum at San Antonio Ranch in Cupertino and The Sequoias in Portola Valley.
- A continuing care community. There are none in Mountain View and the nearest is The Terraces, located in Los Altos. Others nearby are the Taube-Koret Campus for Jewish Life on Charleston Road, Channing House, Webster House, and Vi by Hyatt, all in Palo Alto.
- Residential care facilities where you rent a room in a house; some services such as meals are provided.
- Nursing institutions where your monthly fee includes skilled nursing and many other services. These run from \$6,000 per month and up.
- Alzheimer's and dementia facilities (frequently called "memory care units"), usually secure, that specialize in the unique kinds of mental and physical care required by patients with Alzheimer's disease and other kinds of dementia. Care at local and nearby facilities starts at around \$5,000 per month, depending on the type of care needed.

MOBILE HOMES

A disappearing resource for affordable housing is a mobile home in a dedicated mobile home park. Mountain View has six mobile home parks, all privately owned and thus subject to owners' willingness to sell the land to developers. However, selling for another use in Mountain View would require rezoning, which can be problematic. There have been several cases in Palo Alto and San Jose where a landowner has decided to sell the property and encountered resistance from the tenants.

In a mobile home park, each mobile home is owned and occupied by the resident, but the resident pays rent and other fees to the park's landlord. Mountain View's mobile home parks are:

- Moffett Mobile Homes Park, 440 Moffett Boulevard
- Santiago Villa, Armand and El Centro Avenues
- Sunset Estates Mobile Home Park, 433 San Veron Avenue
- Sahara Mobile Village, 191 East El Camino Real
- Bayshore RV Park and Apartments, 135 Fairchild Drive
- New Frontier Mobile Home Park, 325 Sylvan Avenue

Purchase price of a mobile home in one of these parks depends on the market, but there are usually a few available for under \$150,000. Mobile homes can be financed the same way that one finances a car purchase.

SUBSIDIZED HOUSING

In Mountain View, there are 1238 subsidized housing units with 746 that are available for seniors and have wheelchair access. Most are full and there is a waiting list for most units. Waiting time can be long. Usually, the only reason one moves up the wait list is because someone living in one of the units died. These subsidized units include studio, one-, two-, and three-bedroom units.

The Below-Market-Rate (BMR) units for seniors are:

Location	Units	Waitlist
Ginzton Terrace 375 Oaktree Drive	107	Open
The Fountains 2005 San Ramon Avenue	124	Closed
Paulson Park Studio Apartments 90 Sierra Vista Avenue	253	Closed
Shorebreeze 460 North Shoreline Boulevard	120	Closed

Location	Units	Waitlist
Monte Vista Terrace 1101 Grant Road	150	Closed
TOTAL	754	

BMR units open to specified groups but for which seniors may qualify are:

Location	Units	Waitlist	Preferences
San Antonio Place 210 San Antonio Circle	120	Closed	Studios Only
Maryce Freelen Place 2230 Latham Street	74	Closed	Families
Studio 819 819 North Rengstorff Avenue	49	Closed	Studios
Sierra Vista I 1909 Hackett Avenue	34	Closed	No Preferences
1585 Studios 1585 West El Camino Real	27	Closed	Developmentally Disabled
Franklin Street 135 Franklin Street	51	Closed	No Preferences
San Veron Park 807 San Vernon Avenue	32	Closed	No Preferences
Tyrella Gardens 449 Tyrella Avenue	56	Closed	No Preferences
Madera Apartments 455 West Evelyn Avenue	7	Closed	No Preferences

Location	Units	Waitlist	Preferences
Domus on the Boulevard 2650 West El Camino Real	7	Closed	No Preference
Oakwood Apartments 881 East El Camino Real	4	Closed	No Preference
Verve Mountain View 1984 West El Camino Real	7	Closed	No Preference
Montrose (East) 1616 West El Camino Real	3	Closed	No Preference
Montrose (West) 1720 West El Camino Real	5	Closed	No Preference
100 Moffett 100 Moffett Boulevard	8	Closed	No Preference
TOTAL	484		

All subsidized units come with income limits of 50 percent to 80 percent of Area Median Income.

LIFE-CARE FACILITIES

A life-care facility is like a combination of a senior residential community, assisted care facility, and skilled nursing facility. A resident buys into the facility for life and pays a monthly maintenance fee that depends on the level of care needed, but does not need to ever move out of the facility. Redwood Villa on Montecito Avenue offers life-care programs and, nearby, The Forum at San Antonio Park and The Terraces (373 Pine Lane) in Los Altos, The Sequoias in Portola Valley, Channing House and Palo Alto Commons in Palo Alto, and Chateau Cupertino in Cupertino offer life-care programs. The Moldaw Residences (899 Charleston Road) in Palo Alto offers a variety of residential and care options.

ASSISTED CARE AND RESIDENTIAL CARE

Assisted-care facilities differ from residential care homes in that the latter are licensed to offer care for up to six residents, while the former are licensed for more. In terms of function, both offer assistance with activities of daily living to people who are sufficiently ambulatory to live in their own units or rooms. An assisted-care facility usually has more resources and nursing or other medical professionals either on-site or on-call.

Assisted Care

Villa Siena at 1855 Miramonte Avenue, with a capacity of 68, offers assisted care. Nearby in Palo Alto, Vi by Hyatt, 600 Sand Hill Road, offers assisted living for up to 24 residents. Palo Alto Commons, 4075 El Camino Way, offers assisted living for up to 53 residents. In addition, assisted living programs are available at Bridgepoint in Los Altos, Canyon House in Sunnyvale, and Lytton Gardens and Sunrise in Palo Alto. Assisted living is also available at the Taube-Koret Campus for Jewish Life.

Residential Care

Residential care homes, sometimes also called board and care facilities, are usually homes where up to six paying residents can be cared for by licensed personnel who are not necessarily skilled nurses. The following residential facilities⁷ in Mountain View are currently licensed:

- Casa Alice Care Home, 809 Alice Avenue
- Casa Pastel, 13348 Pastel Lane
- Cypress Manor, 467 Sierra Vista Avenue, No. 1
- Diamond Care – Brook Place, 1309 Brook Place
- Monte Farley II, 386 Burgoyne Street
- Paradise Care Home, 1615 Miramonte Avenue
- Pinehill, 801 Rose Avenue

⁷ <http://residentialcareguide.org/RCFE/index.lasso>, July 30, 2008.

- Urso's Monte Farley Manor III, 381 Farley Street
- Villa Siena, 1855 Miramonte Avenue

Nursing Homes/Institutions

Grant Cuesta Sub-Acute Rehab, 1949 Grant Road, is licensed for 102 beds. It provides full-time nursing care, as well as physical therapy, occupational therapy, speech and language pathology services, dental services, mental health services, physician services, podiatry services, social work, and some X-ray and clinical lab services, as well as other activities for residents.

Villa Siena, 1855 Miramonte Avenue, provides long-term nursing care for up to 20 residents in addition to providing assisted care as described above. It provides full-time nursing for these residents in addition to physical therapy, occupational therapy, speech and language pathology services, dental services, mental health services, physician services, podiatry services, social work, and some X-ray and clinical lab services, as well as other activities for residents. Villa Siena does not provide specialized Alzheimer's or dementia services, although some of its residents have been diagnosed with dementia. These residents may remain at Villa Siena as long as they can function without posing a danger to themselves or others.

SKILLED NURSING/REHABILITATION FACILITIES

Skilled nursing and rehabilitation facilities offer nursing services beyond the levels provided by Assisted Living facilities, and employ Registered Nurses, Physical and Occupational Therapists to help care for patients. Unlike Assisted Living facilities, these facilities are intended to be transitional, usually an intermediate step from a hospital to home. In Mountain View, there are three such facilities.

- Mountain View Healthcare Center, 2530 Solace Place, offers skilled nursing and rehabilitation services, as well as a 32-bed Memory Care unit.
- Grant Cuesta Sub-Acute and Rehab Center, 1949 Grant Road, offers skilled nursing and rehabilitation services, specializing in post-acute surgical care.
- Outpatient Rehabilitation, 2400 Grant Road, is associated with El Camino Hospital and provides various kinds of rehabilitation services on an outpatient-only basis.

Additionally, The Terraces in Los Altos offers skilled nursing respite care.

ALZHEIMER'S CARE (MEMORY CARE) UNITS

There are few places in Santa Clara County that specialize in care for Alzheimer's patients and those with other dementias. In Mountain View, the following residential care units can care for patients with dementia:

- Casa Pastel Care Home, 13348 Pastel Lane
- Diamond Residential Care – Brook Place, 1309 Brook Place
- Monte Farley II, 586 Burgoyne Street
- Paradise Care Home, 1615 Miramonte Avenue
- Pinehill, 801 Rose Avenue
- Urso's Monte Farley Manor III, 381 Farley Street

In Palo Alto, the following residential care facilities can care for patients with dementia:

- The Birches Residential Care, 810 Sutter Avenue
- The Palo Alto/Taube Koret Campus for Jewish Life, 899 Charleston Road
- Palo Alto Commons, 4075 El Camino Way
- Sunrise Assisted Living of Palo Alto, 2701 El Camino Real
- The Wright Place, 2525 Annapolis Street, East Palo Alto

In Los Altos, memory care services for residents are available at The Terraces, 373 Pine Lane.

In Sunnyvale, there are three facilities offering memory care:

- Sunnyside Gardens, 1025 Carson Drive, offers memory care from minor memory issues to midstage memory loss to late-stage cognitive impairment.
- Atria Sunnyvale, 175 East Remington Drive
- Sunrise of Sunnyvale, 611 South Knickerbocker Drive

Additionally, many organizations that place caregivers offer respite service, where a licensed caregiver spends a period of time in the patient's home, offering the regular caregiver some time off. These services usually charge by the hour or the day and many provide overnight stays.

REFERRAL AGENCIES

There are several information and referral agencies located in Mountain View that keep tabs on available senior housing options:

- Mid-Peninsula Housing, 2330 Latham Street, 650-965-9749.
- Mid-Peninsula Housing, 90 Sierra Vista Avenue, 650-969-5600.
- Caring.com, 1-800-973-1540.

REPAIR PROGRAMS

Mountain View senior homeowners with an annual household income less than \$55,500 can obtain free home repairs by calling the Mountain View Senior Center for referral or by directly contacting Rebuilding Together in San Jose (408-578-9519). Projects range from house painting, minor electrical work, carpentry, and plumbing to yard work and installation of safety features (grab bars, railing, half-steps, wheelchair ramps or lifts). Repairs are provided at no cost to the homeowner because of donated funding, government grants, donated or discounted materials, and volunteer labor.

In addition, the Mountain View Day Worker Center can provide unlicensed but sometimes skilled workers for home repairs, yard work, window cleaning, and other home jobs at reasonable rates.

SENIOR HOMELESSNESS

In Santa Clara County, about 7,500 people are homeless on any given night, as counted in the biannual "Point in Time" count of Santa Clara County, and were without a home on any given night.⁸ Of those, 2,500 are considered chronically homeless, according to Destination: Home, a public-private partnership with Santa Clara County. However, it is difficult to find reliable statistics on the homeless because many of them do not want to be found, and are couch surfing, living in their cars or RVs, or finding room in public shelters on a day-by-day basis. In Mountain View, for instance, there are a number of RVs and trailers parked regularly along Leghorn Street, Independence Avenue, Crisanto Avenue, Latham Street near Showers Drive, and along Shoreline Boulevard near Eagle Park, and at night in parking lots at churches, office buildings, or large shopping centers. Those without vehicles sometimes wind up on the street, sleeping in bus shelters or all-night public buses, under freeway overpasses, or in makeshift unofficial campgrounds.

⁸ Kurhi, E. More Seniors on the Streets, *San Jose Mercury News*, July 25, 2017, pp. 1, 6.

A follow-up study of 587 people from the “Point in Time” survey found that 43 percent were over 51 years old, a 23 percent increase since 2015. “The lack of affordability in high cost markets such as Silicon Valley, New York, or D.C. definitely exacerbates the problem [for older people],” said Dan Soliman, who oversees housing impact studies at the AARP Foundation. “However, the issue is far-reaching into communities throughout the nation.” He added that many older adults “have not, and likely will not” recover from financial hits taken during the recession. ... We may see more older adults with little to no means in the future vying to survive,” he said.”

“Brian Greenberg of LifeMoves, which runs 17 shelters serving 750 people each night in Silicon Valley, said their five nonfamily shelters have seen a pronounced rise in average age of clients over the past three years—about 18 months each year. They are over age 55 and many have health-related challenges: more clients with mobility issues, bearing walkers and wheelchairs. Others take multiple medications that need management. And many have a hard time adapting to the dorm-style living.

“Many of them have never been homeless before and never imagined they would experience homelessness,” Greenberg said. “It’s people who were in service-sector jobs, whose spouse passed away and rent tripled over the past decade and they can no longer afford to rent, given their fixed income.”

“Homeless living takes a toll. According to the National Coalition for the Homeless; those chronically living on the streets have an estimated lifespan between 42 and 52 years, compared with 78 for the general population.

“Fifty is the new 75 for that population,” said Dr. Margot Kushel, a UCSF professor who has studied aging homeless extensively. “People basically prematurely age. ... There are 75 year olds who climb mountains. What we see here is an inversion of that.”

“Kushel added that does not mean the person with health issues has been on the streets their whole life. Those who became homeless later in life fared better than the long-term chronic homeless, but still much worse than the general population.

“What we know is that many of them were already poor, working class, doing physical labor jobs, low-skill but still high-stress jobs,” she said. “And they likely had poor access to health care.”

In the 2015 report *Home Not Found*, the County Social Services Agency noted that 70 percent of its clients were female, but 69 percent of the homeless who had contact with the criminal justice system were male. The HUD-funded nonprofit agencies whose client data are collected by the Homeless Management Information System (HMIS), Valley Medical Center, and Mental Health see roughly equal numbers of men and

women. However, the nonprofits represented by HMIS have the highest percentage of seniors in their caseloads.

It is difficult to get an accurate picture of senior homelessness in Mountain View, let alone of the homeless problem in general. We know, from the 2015 *Home Not Found* report, that 63 percent of the people in the County who died while homeless during 2007 through 2012 were 55 and older, while those over 55 made up only 17 percent of the County's homeless population.

Community Services Agency (CSA) is one of the agencies to which people in need of housing turn. Through their Alpha Omega Homeless Services department, they found that of their Mountain View clients during 2014, 24 percent were seniors. In highly desirable Mountain View, in 2014, CSA was able to assist 245 homeless individuals with case management, had 167 homeless individuals on waitlists for affordable housing, and was able to help place 20 percent of its 400+ clients in affordable housing.⁹

We also know that vacancies in subsidized affordable housing in Mountain View are rare, and that wait lists are long. As of this writing, the most recent site of affordable housing, 819 Rengstorff Avenue, filled its 48 units immediately when it opened in March 2015.

The County's 2015-2020 Consolidated Plan estimates from its surveys of the homeless population between July 1-2013 and June 30, 2014 that there were 119 unsheltered Mountain View residents and 3 living in shelters or subsidized housing. Palo Alto, although having a smaller overall population than Mountain View, had 143 unsheltered residents and 12 in shelters or subsidized housing. Sunnyvale, with a larger overall population than Mountain View, had 283 unsheltered residents and 142 in shelters or subsidized housing.

Of the residents and representatives of various County agencies and service organizations who provided responses to the survey, the highest-priority needs for services in their areas were emergency rental subsidy housing assistance, access to fresh and nutritious food, homeless services, abused or neglected children, and transportation services.

HEALTH

Mountain View seniors have access to some of the best medical facilities in the country. The number of physicians and other medical/dental/vision specialists in Santa Clara County means that County residents have a higher density of these local providers than most areas of the country.

⁹ www.csacares.org

That does not mean that all seniors have the financial means to use these professionals. Particularly hard hit are those in the 55-to-64 age group, who are frequently targeted for retirement before Medicare can kick in. In 2006, 16 percent of Californians in this age group did not have health insurance, one of the highest percentages in the country. While the Governor and State legislators have been trying to find solutions to this problem, their actions have been stymied by budget disagreements and concerns about the economy. In California in 2015, 13.4 percent in the 50 to 64 age group were still uninsured, even after implementation of the Affordable Care Act.¹⁰

Nationally, nearly 39 million Americans were uninsured in 2015, reports the U.S. Census Bureau. More than 5 million of them were between the ages of 50 and 64. But that number did not reflect the loss of jobs (and health benefits) during the 2008 recession. Many of these previously had insurance but lost it or gave it up. Some said the rates – ranging from \$400 a month for a healthy individual to \$8,000 per quarter for a couple with medical problems – were way beyond their means.

In addition, nearly half of the estimated 1.5 million personal bankruptcies filed each year prior to 2009 resulted from high health expenses. Even though 76 percent of the filers were covered by insurance at the onset of illness, Harvard researchers reported in *Health Affairs* in February 2007.¹¹ Half of all U.S. bankruptcies are caused by soaring medical bills and most people sent into debt by illness are middle-class workers with health insurance.

The study estimated that medical bankruptcies affect about 2 million Americans every year, if both debtors and their dependents, including about 700,000 children, are counted.¹² Fewer than 1 percent of all bankruptcy filings were due to credit card debt. These figures, of course, have changed since the recession began, although medical bankruptcies are still a significant problem.

There is no way of measuring how this national trend affects Mountain View seniors, nor does it reflect the uncertainty created by national Congressional attempts to repeal and replace the Affordable Care Act and periodic attempts to reduce Medicare payments, but it underscores the precarious nature of funding medical insurance for those in the 55-to-64 age group, who may or may not be eligible for Social Security Disability Insurance, and the fact that Medicare does not cover many of the medical expenses for those 65 and older.

¹⁰ www.cdc.gov/mmwrhtml/mm6418a9.htm

¹¹ <http://content.healthaffairs.org/cgi/content/full/hltaff.w5.63.DC1>

¹² <http://www.commondreams.org/headlines05/0202-08.htm>.

One side effect of the problem of soaring medical costs is the trend for those 65 and older to remain in the work force. After all, Baby Boomers and seniors face not only rising medical costs, but changing investment and housing values, plus skyrocketing energy costs. Meanwhile, in 2008, stock losses had led 14 percent of retirees to consider returning to work, according to the AARP.¹³ That changed during the recession, since there were far fewer jobs available, but seems to be recovering.

SENIOR HEALTH CENTER

El Camino Hospital's Senior Health Center provides a comprehensive approach to senior health care both inside the hospital and beyond its walls. At the Senior Health Center, patient-centered approach means that seniors not only have access to the primary care services outlined below, but also more access to senior resources like the Health Library and Resource Center, Roadrunners and Lifeline services, and Advanced Health Care Directive assistance. (Roadrunners is a home-to-hospital transportation system staffed by volunteers. Lifeline is an in-home emergency response system that gives people living alone a wearable pendant that, when pressed, immediately connects the person with medical support.)

Its clinicians are dedicated to providing care unique to each individual and situation. Senior Health Center services are highly coordinated, electronically accessible, and multi-disciplinary. Electronic access to patient records lets patients, clinicians, and physicians collaborate in real-time, streamlining the care process and program patient interests.

Primary care services include:

- Senior-focused wellness and prevention care.
- Chronic disease management, acute illness and diagnosis, and injury diagnosis and care.
- Nutritional assessments and education.
- Medication counseling.
- Social and psychotherapy evaluations.

Care coordination may occur across multiple disciplines, including nutritionists, geriatric case workers, laboratory staff, pharmacists, financial counselors, and more.

¹³ http://www.businessweek.com/magazine/content/08_21/b4085050690420.htm?chan=search.

The Senior Health Center accepts only Medicare Part B fee for service, commercial secondary insurance, and cash for services.

COOLING CENTERS

When the weather gets hot, Mountain View offers cooling centers to its seniors and other members of the community. The Mountain View Fire Department makes the decision to open cooling centers (the Senior Center and the Library) and bases its decision on information from the National Weather Service and calls for service within Mountain View. Hours for the cooling centers are related to hours the facilities are staffed, and are:

- Senior Center: Monday through Thursday, 8:30 a.m. to 9:00 p.m.; Friday, 8:30 a.m. to 5:00 p.m.
- Mountain View Public Library: Monday through Thursday, 10:00 a.m. to 9:00 p.m.; Friday, 10:00 a.m. to 6:00 p.m.; Saturday, 10 a.m. to 6:00 p.m.; Sunday, 1:00 to 5:00 p.m.

When the Fire Department makes the decision to open the centers, it uses as many methods as possible to spread the word, including television, radio, newspapers, and the Internet.

During heat events, the notification list included:

Broadcast Media

- KMVT (local cable Channel 15 for Mountain View residents).
- KTVU, Channel 2.
- KRON, Channel 4.
- KPIX, Channel 5.
- KGO, Channel 7.
- KNTV, Channel 11.
- KLIV Radio.
- KCBS Radio.

Print Media

- *Mountain View Voice.*
- *San Jose Mercury News.*
- *Bay City News Service.*
- *El Observador.*
- *Metro News.*

- *Palo Alto Daily News.*
- *Palo Alto Weekly.*
- *Los Altos Town Crier.*
- Internet
- City website: <http://www.mountainview.gov>.
- County website: www.sccgov.org.
- Countywide 2-1-1 phone system: www.211scc.org.

Only the City website is under Mountain View control, however. While information is sent to all media outlets, there is no guarantee that they will run the information.

Mountain View is working with Santa Clara County to implement a telephone alerting and warning system that will allow residents to be placed on a notification list when shelters are opened.

TRANSPORTATION

Transportation options provide the mobility that prevents isolation and promotes independence, enabling access to health care and employment, to stores and entertainment venues, to civic and social activities, and to family and friends.¹⁴ Seniors frequently find their options limited because of cost, safety, time, and frequency of services, and destinations served. For many, simply getting to and from a bus stop is a limiting factor. Seniors who have chosen not to drive themselves have found that getting around is difficult. Many report that they cannot depend on friends or family to take them shopping, to medical or other appointments, or to social or civic events. Public transit is frequently inconvenient or perceived as not safe, and paratransit services such as Outreach are perceived as not timely, inappropriate, or too expensive.

The free Mountain View Community Shuttle route links downtown and the San Antonio Shopping Center with a stop at the Mountain View Senior Center, in addition to 50 other stops around the City. It operates from 10:00 a.m. to 6:00 p.m. seven days a week, and is considering evening service to the Shoreline Boulevard/Pear Avenue area on weekend evenings. It connects with the light rail and Caltrans systems at the Castro Street station transit hub. Another major transfer point is near Walmart on Showers Drive, and a third major transfer point is at the Palo Alto Caltrain station.

Valley Transportation Authority's (VTA) primary local routes in Mountain View include service along San Antonio Road, Rengstorff Avenue/Charleston Road/Shoreline Boulevard/Castro Street/Miramonte Avenue/Grant Road, El Camino

¹⁴ Community Transportation Association, *Senior Transportation*.
<http://web1.ctaa.org/webmodules/webarticles/annviewer.asp?a=18>, May 21, 2008.

Real, Central Expressway, California Street, Montecito Avenue, and Middlefield Road.¹⁵ It charges a fee for using the service.

VTA sells senior discount tickets and Clipper cards online; a one-month Clipper card pass for rides anywhere that VTA goes costs \$25. To qualify for the senior/disabled/Medicare fare, seniors must present one of the following: a Medicare card, a Regional Transit Connection (RTC) discount card or a valid card from another California transit provider, or a DMV Disabled License Plate registration, DMV Disabled Parking Placard printout, or proof of age (65 or older). In Mountain View, monthly passes or cash value can be added to a Clipper card at most Walgreens pharmacies and at the VTA Light Rail Station in downtown Mountain View at 101 Castro Street. All VTA ticket vending machines can add value for senior/RTC Clipper cards. VTA's ticket vending machines accept cash, credit cards, and debit cards as payment.

VTA also has a paratransit service called VTA Access that provides door-to-door service for a fee. Additionally, fixed route service on regular buses and light rail is free to those qualified individuals with a Paratransit picture ID card. Assistance animals (on leash or harness) may ride with their handlers.

Stanford's Marguerite Shuttle serves stops in Mountain View. For more information, visit <http://transportation.stanford.edu/marguerite/>.

COMMUNITY TRANSPORTATION SERVICES

Roadrunners is a transportation program operated by El Camino Hospital that benefits underserved seniors and the disabled. Volunteers use vehicles owned by El Camino Hospital to get program participants to and from medical appointments at El Camino Hospital and nearby medical offices within a 10-mile radius of El Camino Hospital and between the limits of Atherton and Saratoga. Fees start at \$4.50 and go up to \$16.50 each way, depending on origination and destination locations. Both locations must be within a 10-mile radius of El Camino Hospital. For enrollment and more information, contact 650-940-7016 Monday through Friday, 8:00 a.m. to 4:30 p.m.

Community Services Agency (CSA) of Mountain View provides free transportation services within the area from Palo Alto to City of Santa Clara limits to older adults 60+ years of age who are residents of Mountain View, Los Altos, and Los Altos Hills and who require an advocate to go with them. For more information, contact 650-968-0836, Monday through Friday, 8:00 a.m. to 5:00 p.m.

¹⁵ www.vta.org/seniorguide

The American Cancer Society provides up to three rides per week to cancer patients who need transportation to their cancer treatment appointments within Santa Clara County (ambulatory, no bone involved). For more information, contact 800-227-2345 Monday through Friday, 9:00 a.m. to 5:00 p.m.

Hospice of the Valley provides free limited transportation within Santa Clara County exclusively to families whose loved ones wish to live the remainder of their lives with peace and dignity when a cure is no longer an option. For more information, contact 408-559-5600 or visit www.hospicevalley.org.

Love, Inc., is a network of local church ministries and church volunteer of all denominations that help people in need. Love, Inc., provides free ride (donations welcomed) within Santa Clara County to doctor's appointments and errands in the individual's local community. For more information, contact 408-723-9223 or visit www.loveinc santaclaracounty.org.

PRIVATE TRANSPORTATION

Additionally, several private for-profit companies provide transportation services within Santa Clara County for a fee.

Boundless Care, Inc., provides nonemergency transportation and escort services in the South Bay. Transportation is provided for doctor's appointments, dialysis, chemotherapy sessions, and recreational activities. For more information, contact 408-363-8900 or visit www.boundlesscare.org/transportation.html.

Family Tree Medical provides nonemergency medical transportation within the entire San Francisco Bay Area. Costs are a flat fee with no mileage rate and will be given when the trip is scheduled. Same-day service is available. For more information, contact 408-694-3350 or visit www.familytreemedtrans.com.

One-Stop MedEx provides nonemergency ambulatory, wheelchair, and stretcher transportation within Santa Clara County and throughout Northern California. One-Stop MedEx provides transportation for doctor's appointments, medical trips, outpatient surgery, community service centers, rehabilitation facilities, physical therapy, and long-distance trips. For more information, contact 408-907-5629 or visit www.onestopmedex.com/index.html.

SilverRide provides assisted transportation, companions, personalized activities, and group events for older adults who are able to walk a minimum of 20' with a walking aid. SilverRide coordinates and refers a network of complementary products and services that together provide a comprehensive lifestyle solution for older adults. The

fare is \$85 per hour. For more information, contact 877-874-3310 or visit www.silverride.com.

Delivered by Grace provides transportation and shopping services within a 15-mile radius of Mary Avenue in Sunnyvale. Pickup service is available Monday through Friday, 8:00 a.m. to 4:00 p.m. Reservations must be made 24 hours in advance. They will accompany patients to appointment upon request and take notes (\$50 for the first hour and \$12.50 for each 15-minute interval thereafter). For more information, call 408-590-5898 or visit www.deliveredbygrace.org.

OTHER TRANSPORTATION RESOURCES

The VTA Senior Mobility Guide is available to download online at www.vta.org/seniorguide.

511: Free information about transportation within the Bay Area is available by dialing 511 or visiting them online at 511.org.

SENIOR NUTRITION

Santa Clara County's Senior Nutrition Program (SNP) provides meals and nutrition services to those 60 and older through congregate nutrition sites (Mountain View Senior Center, Asian Americans for Community Involvement, Billy DeFrank LGBTQ Community Center, Catholic Charities, Community Child Care Council, Community Services Agency of Mountain View/Los Altos/Los Altos Hills, First United Methodist Church of Sunnyvale, India Community Center, Korean American Community Services, Avenidas' La Comida, Los Gatos United Methodist Church, Portuguese Organization for Social Services and Opportunities, Salvation Army, Santa Clara Valley Blind Center, Self-Help for the Elderly, YMCA of Silicon Valley, Yu-AI Kai, City of Campbell, City of Milpitas, City of San Jose, City of Santa Clara) and via home-delivered Meals on Wheels. Meal site addresses are provided at <https://ssc.gov.org/sites/ssa/daas/snp/Documents>. In Fiscal Year 2015-16, the SNP delivered 1,339,814 meals to 16,205 unduplicated participants and provided an estimated total of 394,688 one-way rides to seniors with transportation barriers for those meals.

Meals served at congregate facilities are intended to be balanced, main meals with meat or other protein serving, vegetables, and fruit, milk, and dessert. Also available to eat at the site or to take home are items for breakfast or light evening meals. The Meals on Wheels Program delivers seven frozen lunch/dinner entrees and seven breakfasts supplemented by milk, bread, fresh fruit, juice, and other grocery items per week to seniors who are homebound because of illness, disability, or other conditions that make them unable to shop or prepare meals for themselves.

In Mountain View, the Community Services Agency sponsors the lunch program. Lunch is served at the Senior Center Monday through Friday to an average of 134 seniors a day. This is supplemented by the Brown Bag Program on Tuesdays only. The cost for lunch is a suggested donation of \$3 for ages 60 and up and \$8 for ages 59 and younger. Sign-in is at 11:15 a.m. Monthly menus can be seen at mountainview.gov/senior_center.

The Rose Kleiner Adult Day-Care Center next door to the Senior Center provides lunch to an average of 40 daytime care participants a day.

In addition to the lunch programs and Meals on Wheels, the Senior Center offers Brown Bag Program sponsored by Second Harvest Food Bank every Tuesday morning. Bags of free food are distributed to preregistered seniors to take home. More than half of the food in the bags is fresh produce. As of July 2017, there were 1,103 seniors registered with more expected to register throughout the year. They do not have to be Mountain View residents. Currently, to qualify, a single person has to make less than \$2,010 per month or \$2,707 per month for a household of two people with a sliding scale for larger households. The income guidelines may change annually.

The Seniors' Farmer's Market Nutrition Program (SFMNP) provides low-income seniors with check booklets to be used to purchase fresh fruit, vegetables, cut herbs, and honey at Certified Farmers' Markets (CFM). This program is administered nationally by the U.S. Department of Agriculture's Food and Nutrition Services Agency, and in California by the California Department of Food and Agriculture (CDFA). Locally, CDFA has partnered with Sourcewise, the Area Agency on Aging of Santa Clara County, to distribute SFMNP check booklets which include 10 checks redeemable for \$2 each. Sourcewise administers senior programs for the communities in Santa Clara County, either directly or through affiliations with other senior organizations and centers.

THE SENIOR CENTER

The Mountain View Senior Center is a recreational facility for adults 55 years and over. The Senior Center provides programs and services that meet the individual needs of seniors, promote personal growth, and foster feelings of achievement, companionship, and well-being. It provides a space for older adults to build community, socialize, and stay active. The Senior Center is open Monday through Thursday, 8:30 a.m. to 9:00 p.m., and Friday, 8:30 a.m. to 5:00 p.m., for regular programming. The Senior Center is also available for rent Friday evenings and on the weekends.

A variety of classes and activities are held each day at the Senior Center. These programs are offered through partnerships with volunteer instructors, independent

contractors, Stanford Health Care, Foothill and Mountain View-Los Altos Adult Education. The classes and activities cover a wide range of interest such as arts and crafts, computer classes, dance classes, enrichment programs, exercise classes, music classes, and even a senior garden. There are also several drop-in amenities the Senior Center offers, including the game room, the exercise room, the technology room, and a weekly movie program. The Senior Center also has a wonderful lounge where people can gather and socialize, read books, do puzzles, play board games, or enjoy a cup of coffee. The Senior Center is also very proud of the partnership it has with Kanen Tours which provides scheduled day and overnight trips for seniors. Throughout the year, the staff at the Senior Center also sets up special events for seniors to participate in such as a talent show, fashion show, summer picnic, fairs, festivals, and conferences, seasonal dances and an annual holiday gala.

Health services, social services, and food/nutrition services are a few of the programs the Senior Center currently provides. Health professionals offer scheduled blood pressure checks, and hearing testing. The Valley Transportation Authority (VTA) provides bus schedules and Clipper Card applications. AARP offers driving classes for seniors every month. The Health Insurance Advocacy Program (HICAP) offers insurance counseling. On-site free legal services are offered by Senior Adult Legal Assistance (SALA). Senior case managers through the Community Services Agency of Mountain View-Los Altos (CSA) offer free counseling appointments to seniors and their families for living and medical issues. In addition, notary services and behavioral Alzheimer's screenings are provided. American Association of Retired Persons (AARP) volunteers donate hundreds of hours helping people prepare their taxes. Each month, the Senior Center also provides a variety of free workshops led by outside professionals that cover a wide range of interest from health-related topics to educational discussions to culture and entertainment.

The Mountain View Senior Center is the center point for seniors in the community. It can act as a safety net and a resource for seniors to use in all aspects of their lives.

VOLUNTEERS

Volunteers provide many of the functions that allow the Senior Center to operate economically.

PARKING

There is a chronic shortage of parking at the Senior Center during the midday hours when the lunch program is in operation. Many seniors come early for classes, stay for lunch, and participate in classes or other programs after lunch. By about 2:30 p.m. or 3:00 p.m., parking becomes more available and there is usually no problem in the late afternoon or evening.

Seniors continue to express concern about the impact of the Child-Care Center on parking. The Senior Advisory Committee (SAC) and the Child-Care Center staff have worked out an agreement to allow 15-minute parking for parents in front of the Child-Care Center during the busy morning periods.

While many seniors use VTA Paratransit, El Camino Hospital's RoadRunner Transportation, and City shuttles to reach the Senior Center, many more still drive their own cars, although some of these carpool with other seniors.

FUNDING FOR SENIOR PROGRAMS

Seniors in California are entitled to services from a very wide range of Federal, State, County, and private nonprofit agencies. Some of these agencies live from budget year to budget year; others are built into budgets as "entitlements," such as the Senior Nutrition Programs, Medicaid, or hospice programs, and tend to survive budget fluctuations, although not without some adjustments.

The Senior Center, for example, is 100 percent funded through Mountain View's General Fund. It weathered the most recent budget cuts, but the Senior Advisory Committee is always concerned about budget cuts and cuts in State funds.

Other senior programs are funded through specific programs that can be Federal, State, or County-originated.

IN-HOME SUPPORTIVE SERVICES

The In-Home Supportive Services (IHSS) program is a Medicaid, State, and locally funded program designed to provide assistance to those eligible aged, blind, and disabled individuals who, without this care, would be unable to remain safely in their own homes. IHSS provides services according to the IHSS recipient's ability to perform daily activities, and can include feeding, bathing, dressing, housekeeping, laundry, shopping, meal preparation and cleanup, respiration, bowel and bladder care, moving in and out of bed, rubbing the skin (to prevent skin breakdown), accompaniment to medical appointments, paramedical services, and protective supervision.

To be eligible for IHSS, you must be receiving Medi-Cal, be blind, disabled, or 65 years of age or older, AND be unable to live at home safely without help. IHSS Social Workers determine if you qualify for IHSS by assessing your functional need for specific services and by identifying the amount of time to be allotted for the performance of services. Depending on the amount of your monthly income, you may be required to pay a share of cost for these services.

Public Authority Services by Sourcewise (PA Services) provides a registry of prescreened, eligible, IHSS-approved home care providers for any IHSS recipient who wants to access the PA Registry. Not everyone who applies to join the registry is accepted; there is a rigorous process to have your name placed on the registry.

PA Services also provides the enrollment process for people to become approved IHSS home care providers. This includes an online registration with required videos, in-person verification of a government-issued ID and Social Security card, signing required State documents, and an in-person orientation meeting, fingerprinting, and DOJ review. PA Services also provides benefits, and all of this information is available on the PA Services website at www.pascc.org.

IHSS recipients are responsible for locating their own home-care providers, for hiring and supervising their providers, and for firing the provider if the services are not performed according to the client's specifications.

As of October 19, 2016, the number of IHSS recipients in Santa Clara County was approximately 22,354¹⁶. Under this program, Community Services Agency, which serves Mountain View, provided care for more than 260 individuals.¹⁷ (More were cared for under the County's IHSS program.)

Under this program, Community Services Agency social workers cared for more than 200 frail elderly with chronic diseases in Mountain View. (More were cared for under the County's IHSS program.)

The objective of this program is to provide a continuum of care services to low-income and uninsured seniors who are using the El Camino Hospital Emergency Department for medical care, mental health services, health screening services, and immunizations, using the El Camino Hospital Emergency Department for medical care, mental health services, health screening services, and immunizations.

ELDER ABUSE

Elder abuse is defined by California law to include physical abuse, neglect, financial abuse, abandonment, isolation, abduction, or other treatment resulting in physical harm, pain, or mental suffering to a person 65 years of age or older.¹⁸ Indicators of financial elder abuse include investments in unsuitable financial products, larger than

¹⁶ Santa Clara County In-Home Supportive Services, Fiscal Year 2016 Annual Report.

¹⁷ Community Services Agency, Annual Report 2016.

¹⁸ California Welfare & Institutions Code, Section 15610 and following.

necessary loans, unusual financial gifts, adding caregivers to accounts, and hurried changes to a will, trust or deed.¹⁹

Elder abuse occurring in Santa Clara County is investigated by Adult Protective Services (APS), which is part of the Department of Aging and Adult Services. In Fiscal Year 2016, APS received 4,927 reports of abuse (a 13.5 percent increase from Fiscal Year 2015) and maintained 8,348 active cases (a 12 percent increase from Fiscal Year 2015).²⁰

Some cases of financial elder abuse detected by APS are referred to the Financial Abuse Specialist Team (FAST). In Fiscal Year 2016, FAST investigated 45 cases. Seniors who own their homes are particularly at risk of financial elder abuse. In Fiscal Year 2016, the FAST program recovered approximately \$37 million in assets, of which approximately \$25 million was comprised of real estate.²¹

When a case of elder abuse is deemed to rise to the level of criminal conduct, it is referred to the Santa Clara County District Attorney for criminal prosecution.²² More often, cases of elder abuse are addressed through restraining orders and civil actions to recover misappropriated assets. Generally, only the victimized elder has the necessary legal “standing” to obtain a restraining order against an abuser or file a civil lawsuit to recover assets. However, when an elder lacks sufficient mental capacity to manage his or her finances, or is susceptible to undue influence, a conservator can be appointed who can take legal action on the elder’s behalf. The Santa Clara County Office of the Public Administrator/Guardian/Conservator (Public Guardian) has the legal authority to seek an order from the Santa Clara County Superior Court to have itself appointed as conservator for an at-risk senior.²³ Once appointed conservator, the Public Guardian can seek the legal remedies otherwise available to the conserved person. In addition, a family member, friend, or other interested person can file a petition with the Superior Court to be appointed conservator for an at-risk senior and, upon appointment, seek legal remedies for the protection of the senior.²⁴

¹⁹ CANHR Elder Financial Abuse Fact Sheet.

https://canhr.org/factsheets/abuse_fs/PDFs/FS_FinanElderAbuse.pdf

²⁰ APS 2016 Annual Report.

<https://www.sccgov.org/sites/ssa/daas/aps/Documents/APS%20Annual%20Report%202016%20FINAL.pdf>

²¹ Office of the Public Administrator/Guardian/Conservator (Public Guardian) 2016 Annual Report.

<https://www.sccgov.org/sites/ssa/daas/Documents/PAGC%202016%20ANNUAL%20REPORT.pdf>

²² Office of the District Attorney, Elder Fraud Unit.

<https://www.sccgov.org/sites/da/prosecution/DistrictAttorneyDepartments/Pages/Elderfraudunit.aspx>

²³ Public Guardian 2016 Annual Report.

²⁴ Superior Court for the County of Santa Clara, Self-Help Probate Conservatorship page.

http://www.scscourt.org/self_help/probate/conservatorship/conservatorship_home.shtml

According to the National Center on Elder Abuse²⁵, between 7.6 percent and 10 percent of the incidences of elder abuse are reported. The study suggests that:

- Seniors are likely to hide abuse because of shame, humiliation, fear of retaliation, and fear of placement in a nursing home.
- Some 60 percent to 90 percent of perpetrators of financial abuse are family members or in-home caregivers.
- Since people over 50 control at least 70 percent of the nation's household net worth, they are frequent targets for exploitation.
- Victims are usually female, frail, and mentally impaired and between the ages of 70 and 89.

INFORMATION FOR SENIORS

Dialing 2-1-1 lets anyone access free, nonemergency community, health, and disaster information, including specialized local information relevant to seniors. Callers receive personalized information from a live phone specialist who can answer questions about a variety of nonprofit services and agencies. Their online database is searchable as well.

MOUNTAIN VIEW'S AGE-FRIENDLY CITY DESIGNATION

Early in 2017, the City of Mountain View, acting on the recommendation of the Senior Advisory Committee and work by Santa Clara County, applied for and was granted the status of Age-Friendly City by the World Health Organization (WHO). The designation means that Mountain View has some elements of a city environment that supports people aging in place safely and in relative comfort. The WHO Guidelines list Essential Features to address when promoting an environment that is "Age-Friendly."

The interest in pursuing certification as an Age-Friendly City has increased with efforts under way around the country, throughout the continent, and internationally. Evidence of this is apparent, for example, by the increased membership in the WHO Global Network of Age-Friendly Cities and Communities which "was established in 2010 to connect cities, communities, and organizations worldwide with the common vision of making their community a great place to grow old in."²⁶ It can also be seen in

²⁵ National Center on Elder Abuse (2015), Statistics/Data. Retrieved from www.ncea.aoa.gov/library/data/#problem

²⁶ <http://agefriendlyworld.org/en/who-network/>

the articles and Dialogue postings which appeared between 2003-2010, on the City Mayors' Society website.²⁷

There have been many conferences, much university-level research, increased grant funding, and publications developed making information more available. In our own area, CAFÉ (Center for Age-Friendly Excellence) was established in Los Altos with the mission of assuming "a leadership role in advancing our understanding and creation of Age-Friendly cities and communities by applying research and best practices of academic gerontology to the task of advancing livable communities for all generations."²⁸ In Santa Clara County, the Senior's Agenda project seeks to support coordination of efforts among cities trying to achieve certification. Some of this has been referenced in this report and some work has been accomplished by the actions of the Senior Advisory Committee and other committees/commissions in Mountain View.

As of this report, the City's Age-Friendly City Task Force is in formation and will be meeting regularly at the Senior Center starting in August 2017.

What has remained as a constant to date are the eight major categories ("Essential Features"), with recommended targets, and the overarching guidelines which emphasize the necessity for sufficient, affordable and accessible resources. For convenience, the Essential Features Checklist is included here.

ESSENTIAL FEATURES CHECKLIST

1. Outdoor Spaces and Buildings
2. Transportation
3. Housing
4. Social Participation
5. Respect and Social Inclusion
6. Civic Participation and Employment
7. Communication and Information
8. Community Support and Health Services

Each of these Essential Features is discussed separately below with mention of what is being done/has been done within our own City, including mention of some of the recommended targets as they appeared in the WHO Checklist. In the 2013 report, all recommended targets in each Essential Feature were included, but that list is rather daunting and not all of them are necessary to apply for/achieve certification.

²⁷<http://www.citymayors.com/society/age-friendly-cities.html>

²⁸ <http://losaltoscf.org/cafe/>

OUTDOOR SPACES AND BUILDINGS

Mountain View has a history of attention to the environment and green spaces, which continues as evidenced in the work plans of the Environmental Planning Commission, the Parks and Recreation Commission, and the Downtown Committee. The Bicycle/Pedestrian Advisory Committee has been attentive to sidewalks, pathways, traffic and signage, which are among the recommended targets specifically mentioned in the WHO documents.

Within Mountain View, there is a private campaign to achieve recognition for “Walkability.” Also, Great Streets Mountain View²⁹ was established as a nonprofit 501(c)(3) organization. Its mission includes working “towards people-friendly streets that are safe, accessible to all, and beautiful public spaces” and striving to:

- Build a diverse network of people and organizations to effectively advocate for a network of Great Streets throughout Mountain View.
- Plan and implement complete street designs for all ages, so everyone can walk and bike safely.
- Incorporate beautiful public space as a functional element of our streets.
- Promote transportation improvements that improve healthy and more active living.
- Educate Mountain View residents about the benefits of Great Streets.

The Mountain View Police continue to demonstrate commitment to public safety, as does the Mountain View Fire Department, in response times and public education campaigns.

The Senior Advisory Committee has collaborated with staff at the Mountain View Center for the Performing Arts to improve safety on the theatre aisles and encouraged City Council to examine steps at City Hall Plaza with consideration of railings.

TRANSPORTATION

Concerns about transportation are a long-standing issue recognized by City Council and agencies serving our area. They are discussed regularly at Senior Advisory Committee meetings. These have been included as a separate focus in this report. One recommended target for this Essential Feature addresses driver safety with refresher

²⁹ <http://www.greatstreetsmv.org>

courses. The Mountain View Senior Center offers AARP courses periodically. Another recommended target addresses age-friendly vehicles which have the attention of local businesses developing driverless cars and providing bicycles for use in the City. Finally, one of the recommended targets addresses the need to provide information regarding how to use public transportation and the range of transport options available. The Outreach Mobility Management Center does frequent presentations at the Senior Center to familiarize seniors with trip planning, buses, and sign-up procedures for their services.

HOUSING

Considerable information has been presented in the body of this report regarding housing. The Senior Advisory Committee has distributed copies of its previous State of Mountain View Seniors Reports to Mountain View City Councilmembers, California State legislators, County elected officials, and candidates for offices. The full reports are posted on the City of Mountain View website which was recently retooled. As such, these are available not only to elected officials but also Mountain View residents or, for that matter, anyone visiting the website. One of the recommended targets for this Essential Feature addresses modifications. The Senior Advisory Committee has forwarded recommendations to City Council about the availability of funds, particularly for seniors, who require modifications to their properties. The City already budgets financial support for the Rebuilding Together program.

SOCIAL PARTICIPATION

This Essential Feature emphasizes a range of events and activities which are accessible, affordable, and foster community integration. Mountain View has the advantage of having both a Senior Center and a Public Library where special events and programs are planned to promote involvement and facilitate interaction. Recently, the Public Library offered education sessions about how to use e-books and learn to play the ukulele. The Senior Center staff and Nutrition Program staff plan special events and special holiday meals where attendees can socialize informally, such as the Fourth of July Picnic.

RESPECT AND SOCIAL INCLUSION

The first recommended target under this Essential Feature speaks to respect and inclusive services which is defined as consultation of older people about ways to better serve them. This has been addressed routinely by the Senior Advisory Committee utilizing surveys/questionnaires at conferences and the recent speaker series (Life in a Senior-Friendly City) as well as the informal conversations one Committee member continues to do with monthly reports to the full Committee. Senior Center staff regularly solicit input from those utilizing the Center about what courses, workshops,

equipment, etc. they would like to have. By inference, accessibility is an element of this Essential Feature and it seems worth mentioning here that the Mountain View Center for the Performing Arts offers accommodations for the hearing and visually challenged with audio descriptions during selected performances. Another recommended target for this Essential Feature specifies intergenerational and family interactions which the City already recognizes with the annual Spring Family Parade.

Recently, there has been considerable discussion about whether Mountain View should commit to adopting a human rights measure, consistent with the U.N. Declaration of 1948, which would constitute establishing an official City policy. Because of far-reaching political and legal implications surrounding possible identification as a Sanctuary City, further study is being done before revisiting the question next year.

CIVIC PARTICIPATION AND EMPLOYMENT

Of the eight features on the Essential Features Checklist, this one is the one which appears to fall under other auspices within Mountain View City government addressing employees and retirees. For the purposes of discussion in this document, no information came to light while reviewing the recommended targets about any Citywide situations in Mountain View where options have been compromised, discrimination on the basis of age alone has been violated, workplaces have not been adapted to meet needs, or decision-making bodies in public, private, and voluntary sectors discouraged and/or obstructed membership of older people.

COMMUNICATION AND INFORMATION

Considerable attention and resources have been devoted in Mountain View to addressing these concerns not only for seniors but for all residents. The Senior Advisory Committee sponsored a Speaker Series this year (Life in a Senior-Friendly City) and the Human Relations Commission developed a Civility Roundtable series identifying topics of interest (such as Housing and Prevention of Violence as seen in Ferguson). Both were open to the public, and well publicized, with the latter also being broadcast on KMVT. The Senior Advisory Committee has sponsored a Meet/Greet at the Senior Center for five years running when Nutrition Program attendees have the opportunity to speak with members of the City Council and Senior Advisory Committee. Another program offered by the City is Thursday Night Live, where representatives of various programs and committees can meet with the public. City Council meetings are open to the public and broadcast live. Notification of all events/meetings is posted on the City website. Beyond this, residents have the opportunity to apply for appointment to the various committees, commissions, boards, and task forces as openings become available.

COMMUNITY SUPPORT AND HEALTH SERVICES

Mountain View already has policies and procedures in place for emergency planning and care, addressing emergency preparedness, interventions under unusual circumstances (e.g., Cooling Centers addressed elsewhere in this report), and public services provided by the Police and Fire Departments. Projects are in place exploring establishment of telephone call alerts and online notifications.

All Chairs of boards, committees, and commissions are able to communicate with each other during the Mayor's quarterly meetings, including those not otherwise mentioned here (Library Board, Performing Arts Committee, Visual Arts Committee, and Youth Advisory Committee).

Since receiving certification, the City of Mountain View has begun to set up a separate Age-Friendly City Task Force which will be responsible for designing and implementing elements of the Age-Friendly program in Mountain View. Concurrently, the Senior Advisory Committee will also be working on other elements of the program separate from or in cooperation with the City's board. As of this writing, the City's board has not had its initial meeting, and the SAC subcommittee is waiting to see what that board wants to take on so it can work on something different.

ADULT DAY CARE

For some seniors with memory problems or other long-term illnesses who are still ambulatory, there are a number of facilities offering daytime programs of activities, including breakfast and lunch. This gives the patients a change in daily environment, a chance to socialize with others, sometimes visits by children from a nearby preschool or children's day care facility, visits with animals, music and art, physical activities like dance or simple calisthenics, and memory encouragement. Some programs offer daytime field trips. Programs like these also provide time off for caregivers who need to work, take care of young children, run errands, or just rest.

Mountain View: Avenidas runs an adult day care health program at the Rose Kleiner Senior Day Health Center (650-289-5400) located next to the Mountain View Senior Center. Sutter Health runs the Alzheimer's and Adult Day Care center, 650-934-7800.

Palo Alto: Golden Castle Adult Day Health Center is located at 3803 East Bayshore Road, 650-964-1978.

Menlo Park: Peninsula Volunteers operates Rosener House Adult Day Services at 500 Arbor Road, 650-322-0126.

Sunnyvale: Catholic Charities of Santa Clara, 408-530-8734.

Cupertino: Live Oak Adult Day Services, 20920 McClellan Road, 408-973-0905.

Santa Clara: Grace Adult Day Health Care, 408-731-8686.

Campbell: SarahCare of Campbell, 408-374-2273.

San Jose: Great Endeavors 408-377-1622; Live Oak Adult Day Services, 408-971-9363; Alzheimer's Activity Center, 408-279-7515.

Saratoga: Saratoga Adult Day Care Center, 408-354-4782.

Milpitas: Silicon Valley Adult Day Health Care Center, 408-956-8578; Prestige Adult Day Health Care, 408-586-9000.

Gilroy: Live Oak Adult Day Services, 408-847-5491.

SUMMARY

Probably the single most important finding of this report is the impact of senior demographics. Following the national trend, the number of Mountain View seniors is likely to grow over the coming years to become about a quarter of the overall City population. This has implications for the number and type of City services demanded by Mountain View's population, including transportation, affordable housing, and information and referral services. Many of these seniors will likely have reduced incomes, meaning that they will probably resist new taxes and request more discounts or free services.

If Mountain View's seniors follow the model projected for Palo Alto and projections by Santa Clara County, the Baby Boomers will likely want to stay in Mountain View as they age and in their own homes as long as possible. They will want affordable access to medical facilities, shopping, and entertainment venues, and will continue to appreciate the lively multicultural environment currently prevalent in Mountain View.