



AGING IN PLACE

AGING IN COMMUNITY



Year One Evaluation Report

HEALTH MANAGEMENT ASSOCIATES COMMUNITY STRATEGIES
SEPTEMBER 2017

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EXECUTIVE SUMMARY

The City of West Hollywood initiated the development of a five-year strategic plan, Aging in Place, Aging in Community (AIP), to help the City evolve as a community where aging is embraced. West Hollywood's shared vision for Aging in Place is that the City is a caring and supportive city where aging is embraced. Therefore, it has the vision that, as they age, adults are supported in ways that help them to remain in their homes.

Why Do this Evaluation?

From the beginning, the City believed it was critical to conduct an evaluation of this initiative for many reasons. First, the City wanted to know whether the investments of time and money into the Initiative resulted in the hoped-for changes. In other words, is the Initiative improving the lives of older adults in West Hollywood and helping make West Hollywood a more age-friendly city? Second, the City knew that, if it saw the changes it hoped to see, the evaluation would help the City understand what was done that led to the changes it was seeing.

Only by documenting what was done and what changed can the community learn whether the investment in time, money, and resources is making the lives of older adults better and helping make West Hollywood an age-friendly community.

The awareness of the concepts of age friendliness and what it means for a city to be age-friendly are high and growing among older adults, City staff, and members of West Hollywood Advisory Boards and Commissions.

A. OVERVIEW

In December 2014, the West Hollywood City Council authorized the development of a five-year strategic plan for an “Aging in Place, Aging in Community” Initiative (the “Initiative”) to help the City evolve as a community where aging is embraced, and where people can remain in the housing of their choice for as long as possible. The vision for the Aging in Place, Aging in Community Strategic Plan is to support individuals as they choose to live at home within a community they know, where safety and independence are givens, regardless of age, income, or ability level.



From the beginning of the Initiative, it was intended that this vision be achieved through a combination of:

- + Activities that occur organically within the West Hollywood community involving neighbors, family, friends, and other circles of support. Public funds and programs alone will never be able to address all the identified needs.
- + Policies and programs established by the City that guide and direct successful aging in place and engage the community in the decision-making process.
- + Supports that are provided by the City and other organizations, such as nonprofits, businesses, religious institutions, clubs, and other government organizations.
- + Additional funds that are provided by foundations and other charitable entities to support expanded programs and services that advance the AIP strategic plan.
- + Strategies to employ a community-wide collective impact strategy that would lead to lasting culture change in the City.

In 2013, the City completed a Community Study, which included a demographic analysis of West Hollywood and an extensive public outreach and engagement campaign. The findings of the Community Study echoed the community's goal to age in place in West Hollywood. One recommendation from the study was to "develop innovative approaches to support residents aging in place to maintain independence." This Community Study aligns with the AARP suggested procedure for Age-Friendly Communities to conduct assessments to identify needs.

The evaluation documents the implementation of the Initiative, capturing its successes and challenges, supporting the development of additional data collection, analyzing data, and helping the City use the findings both internally and externally.

This executive summary highlights the components of the evaluation, the activities and accomplishments of the first year of the Initiative, and next steps. The details of each of these are provided in the Year 1 full report.

B. YEAR 1 EVALUATION QUESTIONS

The five-year evaluation has many key questions, all of which relate to the overall purpose of the evaluation and many of which are related to the collective impact strategy that underlies the Initiative. In Year 1, the primary evaluation questions included:

- 1. Implementation:** What does the roll out and implementation of the Aging In Place Strategic Initiative look like? In the first year, the evaluation focused on the degree to which the implementation plan was rolled out as planned.
- 2. Changes in Awareness of AIP:** To what degree are older adults, other residents, and community leaders aware of the Initiative, its agenda, and its concepts and goals, and is awareness growing? In the first year, the evaluation focused on whether awareness of the AIP Initiative and AIP concepts went up among City program staff and members of West Hollywood Advisory Boards and Commissions. The evaluation also focused on whether awareness went up among older adults about the Initiative and services that are available to them, as well as uncovered unmet needs.
- 3. Changes in Incorporation of AIP Concepts:** To what degree do City staff, members of West Hollywood Advisory Boards and Commissions, and other key leaders begin to incorporate age-friendly concepts into their work, as part of the “lens” through which they conduct their work? In the first year, the evaluation focused on whether City staff reported efforts to incorporate AIP concepts into their work at the City.
- 4. Changes to Programs and Services:** What changes to programs and services occur in the City and to what degree can these changes be attributed to the work of the Initiative? This includes an examination of older adults’ engagement in and satisfaction with activities and services, as well as their perceived quality of life. In the first year, the evaluation focused on whether programs and services became more sensitive and responsive to the needs of older adults.

5. Development of Shared Measurement for Future Year Evaluation:

Did the AIP Initiative take steps in its first year to incorporate more data collection methods that will allow for evaluation in upcoming years regarding the use of programs by older adults, satisfaction with these services, and additional needs? In the first year, the evaluation focused on the degree to which the Initiative took steps toward a shared measurement system.

6. Work Toward Sustainability: Will the implementation activities of Year 1 support the implementation of Years 2-5 of the Initiative in ways that contribute to meeting future goals? In the first year, the evaluation focused on collecting anecdotal evidence of the degree to which steps are being taken to support growth and sustainability of the Initiative.

7. Short Term Outcomes for Older Adults: To what degree do older adults experience changes/improvements in access to services and resources; participate and engage more in the community; and have improved quality of life? In the first year, the evaluation focused on surveys of older adults to assess participation, engagement, and perceived quality of life.

C. YEAR 1 EVALUATION METHODS AND ACTIVITIES

In the first year, the evaluation used multiple methods to explore the questions noted above. These included surveys, interviews, focus groups, review of program documentation, review of outreach activities, content analysis of key meetings, and content analysis of the City's Requests for Proposals.

Surveys

In 2016 and 2017, surveys of older adults, City staff, and members of The City of West Hollywood Advisory Boards and Commissions were administered. HMA Community Strategies (HMACS) developed and disseminated three surveys, including a survey of older adults, administered at the annual Senior Health Fair and in the community, a survey of city staff, and a survey of members of West Hollywood Advisory Boards. All three were administered twice (in May 2016 and in May 2017 for the City staff survey and older adult survey, and in Fall 2016 and May 2017 for the West Hollywood Advisory Boards and Commissions survey). Responses to the surveys were as follows:



Interviews and Focus Groups

In the winter of 2016, HMACS conducted three focus groups with older adults to explore many of the same issues that were explored in the surveys (and described above), but in more detail. A total of 17 older adults participated in the focus groups. Additionally, through 2016 and 2017, HMACS conducted informal interviews with City staff and program managers to collect information about the current status and evaluation of programs, plans for the future, and to gather qualitative data about levels of staff engagement with AIP concepts. In mid-2017, interviews were conducted with a small set of participants in a new housing-related program and with a few individuals who participated in interviews as part of the strategic planning process.

Content Analysis: Key Meetings

Another method the evaluation used to measure the level of awareness of the AIP Initiative, and the degree to which AIP concepts are taking hold and being incorporated into the City's way of doing business, was a systematic examination of existing documentation of key meetings. This process assessed whether AIP topics were being discussed and, if so, how frequently. Content analysis was conducted using the meeting minutes from 13 ongoing meetings from fiscal year 2010-2011 to fiscal year 2016-2017. Content analysis was also used to examine changes over time in all staff reports submitted to the City Council.

Documentation of Program Activities and Changes

In Year 1, no shared data system was in place, so a systematic analysis of changes in all of the programs was not possible. However, in Year 1 the Initiative took the critical step of requiring that programs collect and share with the City a standard set of data about the number of older adults who participate in programs and services, their satisfaction with programs and services, the perceived value and importance of those services and programs, and perceived quality of life. Because standardized data is not yet available from programs and services, the evaluation worked to collect anecdotal information about new programs that emerged in response to the AIP Initiative, changes and enhancements to existing programs that may have been related to the AIP Initiative, and changes in the level of attention paid to the needs of older adults by existing programs.

Review of Outreach Activities and Department Level Activities and Accomplishments

The evaluation also reviewed documentation of all outreach activities conducted by staff, as well as documentation and reports from City department leaders about activities and accomplishments related to the Initiative in the first year.

D. YEAR 1 FINDINGS

Findings from the first year of the Initiative are very promising. Each of the following is described in greater detail in the full report:

- + Awareness of the concepts of age-friendliness and what it means for a city to be age-friendly are high and growing among older adults, City staff, and members of West Hollywood Advisory Boards and Commissions.
- + There is growing attention being paid by City staff and City leaders to the needs of older adults and to Aging to Place, suggesting these issues are a growing and sustained priority.
- + There is evidence that the Initiative is helping City staff and City leaders understand how they can contribute to making West Hollywood more age-friendly, believe that their work can move the City in that direction, and supporting their intentions to do so.
- + The AIP Initiative is having an impact on how City staff do their work in concrete ways.
- + A higher percentage of programs and services being offered (and being funded by the City) have a focus on serving older adults, including the needs of older adults in their goals and scope of services than in the past.
- + Tangible activity has been documented within every division of work of the City, with some divisions having done a considerable amount. Activities include enhancements or new efforts as well as significant planning for future work.

E. NEXT STEPS FOR THE AGING IN PLACE INITIATIVE AND ITS EVALUATION

In Years 2-5, the Initiative will need to continue to build awareness of AIP, and to begin to move more programs to address the needs of older adults. This will begin with using new data the City is collecting to help hone in more closely on the needs of older adults and how best to meet these needs.

As the Initiative evolves and grows in Years 2-5, the evaluation will continue to collect some of the same data, but will add new data collection efforts to mirror the expanding work of the Initiative, and capture additional accomplishments, challenges, and lessons learned.

Specifically, the evaluation will implement the following:

1. Continued tracking of activities and progress made on the implementation plan
2. Older adult surveys in May 2018, 2019, 2020, 2021
3. Surveys of City staff in May 2018, 2019, 2020, 2021
4. Surveys of members of West Hollywood Advisory Boards and Commissions in May 2018, 2019, 2020, 2021
5. Interviews with a larger group of older adults in 2018 and 2020
6. Analyses of data generated from new evaluation requirements in City contracts
7. Analyses of additional measures to be collected by new and expanded programs in Years 2 and beyond
8. Close tracking and analyses of process and outcome measures within several key programs across program areas, in alignment with priorities in the implementation plan

These data collection methods and analyses will allow for continued and expanded evaluation of the Initiative, resulting in annual reports and a final report that will assess outcomes across the five years.

YEAR 1 EVALUATION REPORT

Aging in place is the ability to live in one's own home and community safely, independently and comfortably, regardless of age, income, or ability level, as long as possible.

BACKGROUND

Background of the Initiative

In December of 2014, the City of West Hollywood City Council formally approved the development of a five-year strategic plan for an "Aging in Place, Aging in Community" Initiative (AIP) to help the City evolve as a community where aging is embraced, and where people can remain in the housing of their choice for as long as possible. The vision for the Aging in Place, Aging in Community Strategic Plan is to support individuals as they choose to live at home within a community they know, where safety and independence are givens, regardless of age, income, or ability level. This approach offers many benefits to adults as they live longer lives, including a stable sense of community life, satisfaction, health, and self-esteem, all of which are central to successful aging.

From the beginning of the Initiative, it was intended that this vision be achieved through a combination of:

- + Activities that occur organically within the West Hollywood community involving neighbors, family, friends, and other circles of support. Public funds and programs alone will never be able to address all the identified needs.
- + Policies and programs established by the City that guide and direct successful aging in place and engage the community in the decision-making process.
- + Supports that are provided by other organizations, such as nonprofits, businesses, religious institutions, clubs, and other government organizations.
- + Additional funds that are provided by foundations and other charitable entities to support expanded programs and services that advance the AIP strategic plan.
- + Strategies to employ a community-wide collective impact strategy that would lead to lasting culture change in the City.

In 2013, the City completed a Community Study, which included a demographic analysis of West Hollywood and an extensive public outreach and engagement campaign. The findings of the Community Study echoed the community's goal to age in place in West Hollywood.

In June 2014, the 2014-2016 City Budget was approved, highlighting Aging in Place as a key City initiative. The methods and community engagement process for the Aging in Place Strategic Plan project were approved by the City Council in December 2014. City staff moved forward with community engagement in the first quarter of 2015, gaining insight from experts in the field of aging, West Hollywood Advisory Boards and Commissions, small group meetings, meetings with health care providers, social service agencies, the West Hollywood Chamber of Commerce, the arts community, and residents. Through this process, the Aging in Place, Aging in Community Five-Year Strategic Plan was created to build on a foundation of city services to proactively address the needs of older adults in the City.

In 2016, the City hired a consultant to develop and implement an evaluation of the initiative. The evaluation is documenting implementation of the Initiative, capturing its successes and challenges, supporting the development of additional data collection, analyzing data, and helping the City use the findings both internally (for Initiative and program improvement, sustainability) and externally (to share findings with interested cities, funders, and others). Additionally, the evaluation is looking beyond the program level and the City government level to assess on a macro level, evidence of and progress toward collective impact across the community and early indicators of a culture change underway in West Hollywood. Collective impact and the strategy of culture change are discussed further on in this report.

This report provides information from Year 1, which covers July 1, 2016 – June 30, 2017, of the Initiative's implementation and evaluation, and provides information about the plans for the ongoing evaluation.



BACKGROUND OF THE EVALUATION

Why Do this Evaluation?

From the beginning, the City believed it was critical to conduct an evaluation of this initiative for many reasons. First, the City wanted to know whether the investments of time and money into the Initiative resulted in the hoped-for changes. In other words, is the Initiative improving the lives of older adults in West Hollywood and helping make West Hollywood a more age-friendly city? Second, the City knew that, if it saw the changes it hoped to see, the evaluation would help the City understand what was done that led to the changes it was seeing.

Only by documenting what was done and what changed can we learn whether the investment in time, money, and resources is making the lives of older adults better and helping make West Hollywood an age-friendly community.

Third, it was understood that if we measure both the work that was done and the changes seen, it would be possible to use that information to improve the initiative in future years, share those accomplishments and challenges with potential funders and partnering organizations, and develop plans and best practices that both West Hollywood and other cities can use for future work.

BUT WITH EVALUATION, THE CITY CAN AND WILL:

Explore and uncover the impacts of the Initiative:

Understand the impacts are at the program level, individual level, and community level.

Explore and document what is working well and what could be improved:

Information from this evaluation is being used to help strengthen the Initiative, and to help improve programs, services, and efforts to increase awareness about the Initiative and about aging in place concepts. It also brings more consciousness to every corner of the city about the Initiative.

Highlight to key partners what has been accomplished:

The City of West Hollywood can share this information with City residents, leaders, and other key stakeholders, as well as potential funders of future aging in place work, and other cities that may be interested in replicating West Hollywood's Initiative.

Help the City have a plan for the future:

The City can use this information to be as effective as possible in the future when addressing the needs of older adults.

WHY DO EVALUATION?

- + UNDERSTAND WHAT OCCURRED
- + HIGHLIGHT AND PUBLICIZE SUCCESSES
- + LEARN FROM CHALLENGES
- + DEVELOP PLANS FOR THE FUTURE

Without evaluation, it would not be possible to know what the impacts are of the investment and the work. The City would not know what worked and what did not work. City staff, members of West Hollywood Advisory Boards and Commissions, and the older adults who are so important to the City would not be able to look back and say whether the Initiative was worth the investment of time and energy.

Throughout the evaluation, and at the end of the evaluation, the City will understand what was and is being done, what is working, what lessons were learned, how challenges were met, what outcomes were achieved, and how to sustain the Initiative over time.

THE WORK OF AIP IN YEAR 1 AND GOALS FOR YEAR 1

The work of the AIP in Year 1 was guided by the AIP Strategic Plan and its goals, and the AIP implementation plan. The Initiative works across multiple areas (i.e., transportation, arts and culture, housing) but the goals for the first year were similar across areas. These included increasing awareness of the AIP Initiative and AIP concepts, beginning the process of making programs and services more responsive to the needs of older adults, and beginning the process of ensuring older adults know about, use, and are satisfied with the services available to support them. Specifically, in Year 1, the AIP Initiative set out to:

- + Roll out the Initiative in alignment with the Implementation Plan
- + Raise awareness among City program staff and members of West Hollywood Advisory Boards and Commissions about AIP, and raise awareness among older adults about AIP and services that are available to them, as well as uncover unmet needs
- + Increase the degree to which City staff and West Hollywood Advisory Boards and Commissions believe they can incorporate AIP concepts into their work at and for the City, and increase their intent to do so
- + Begin to increase the degree to which programs and services are sensitive and responsive to the needs of older adults, especially through new strategies to find and connect isolated seniors with urgent needs to existing programs
- + Incorporate data collection methods into City-funded programs that allow for a more accurate evaluation in upcoming years of the use of programs by older adults, satisfaction with these services, and additional needs
- + Set up mechanisms to ensure sustainability of the Initiative in Years 2-5

YEAR 1 INITIATIVE GOALS

- + Implement the Initiative according to plan
- + Increase awareness of AIP
- + Increase ability and intent to incorporate AIP into the work of the City
- + Increase responsiveness of programs and services
- + Increase data collection opportunities
- + Work toward sustainability in Years 2-FOR THE FUTURE

Overview of Years 1-5 Goals for AIP Initiative

- Years 1-5**
- Build Awareness of AIP
 - Support and Encourage Changes in Programs and Services
 - Support Incorporation of AIP into City Programs
 - Increase Availability of Services for and Use of Services by Older Adults
- Years 2-5**
- Incorporate Additional Data to Measure Outcomes: Quality of Life, Social Connectedness, Mental Health, Access to Resources, Other Outcomes
- Years 3-5**
- Program and Services Improve Quality of Life, Social Connections, Ability to Remain in Home (where possible) and in Community for Older Adults
- To Achieve the Vision**
- ...that adults as they age are supported in ways that help them to remain in their homes for as long as possible. The City, as an age-friendly community, is a place where older adults safely age with health and dignity.

Strategies and Activities in Year 1

To accomplish these goals across all of the program areas, a number of strategies were employed by the City of West Hollywood, lead by the Department of Human Services and Rent Stabilization. These included:

1. Leadership by the Department of Human Services and Rent Stabilization to engage multi-sector stakeholders to generate buy-in and commitment to shared AIP goals, including City staff leadership, City elected leadership, West Hollywood Advisory Boards and Commissions, foundations, civic & nonprofit leaders, and business leaders. This included continuous and ongoing meetings with City staff to develop new programs and expand programs in all areas (housing, planning, transportation, arts and culture, social services); continuous and ongoing meetings within each of these areas to develop work plans that incorporate AIP concepts and continuous and ongoing meetings with City funded programs and services operated by external social service agencies.
2. Addition of new requirement in the Social Services Request for Proposals for funding cycle 2016-2019
3. The partnership of 20+ social service agencies under contract or other partnership with the City to distribute older adult surveys on their experiences with the age-friendliness of West Hollywood
4. New program development and pilot implementation of programs with new external funding
5. Evaluation planning meetings to document and support the incorporation of AIP strategies in the work of City staff, departments and funded social service agencies
6. Seeking to increase the City's connectivity to the larger work of LA County, AARP and WHO for ongoing sharing of best practices

EVALUATION QUESTIONS ACROSS ALL FIVE YEARS, AND IN YEAR 1

The five-year evaluation has many key questions, all of which relate to the overall purpose of the evaluation noted above (“Why Do This Evaluation”) and many of which are related to the collective impact strategy that underlies the initiative (explained below). These questions are divided into process, outcome, and collective impact questions and are noted below.

Process Questions

Implementation: What does the roll out and implementation of the Aging In Place Strategic Initiative look like? In the first year, the evaluation focused on the degree to which the implementation plan was implemented.

Challenges and Successes: What challenges does the Initiative face and what are its successes? This includes an examination of how challenges were met and overcome, which will result in lessons learned around implementation. In the first year, the evaluation focused on collecting anecdotal information about challenges and successes, and on developing additional mechanisms for collecting additional data in Years 2-5.

Short Term Outcome Questions

Changes in Awareness of AIP: To what degree are older adults, other residents, and community leaders aware of the Initiative, its agenda, and its concepts and goals, and is awareness growing? In the first year, the evaluation focused on whether awareness of the AIP Initiative and AIP concepts went up among City program staff and West Hollywood Advisory Boards and Commissions. The evaluation also focused on whether awareness went up among older adults about the Initiative and services that are available to them, as well as uncovered unmet needs.

Changes in Incorporation of AIP Concepts: To what degree do City staff, members of West Hollywood Advisory Boards and Commissions, and other key leaders begin to incorporate age-friendly concepts into their work, as part of the “lens” through which they conduct their work? In the first year, the evaluation focused on whether City staff reported efforts to incorporate AIP concepts into their work at the City.

Changes to Programs and Services: What changes to programs and services occur in the City and to what degree can these changes be attributed to the work of the Initiative? This includes an examination of older adults’ engagement in and satisfaction with activities and services, as well as their perceived quality of life. In the first year, the evaluation focused on whether programs and services became more sensitive and responsive to the needs of older adults.

Development of Shared Measurement for Future Year Evaluation: Did the AIP Initiative take steps in its first year to incorporate more data collection methods that will allow for evaluation in upcoming years about the use of programs by older adults, satisfaction with these services, and additional needs? In the first year, the evaluation focused on the degree to which the Initiative took steps toward a shared measurement system.

YEAR 1 EVALUATION QUESTIONS

- + Is the implementation plan being rolled out as planned?
- + Did awareness go up among City staff, West Hollywood Advisory Boards and Commissions and program staff?
- + Did programs begin to change?
- + Do older adults know about services and programs?
- + Are steps being taken to ensure additionally needed data will be collected in future years to continue to measure success?
- + Are steps being taken to ensure the goals of upcoming years can be met?

The use of a collective impact approach was determined based on the City's desire to create a long-term sustainable culture change within the City. Such a culture shift would embrace ideals of AIP and carry them deeper and in a more lasting way throughout the community, well beyond the reach of any funded program(s) on their own.

Work Toward Sustainability: Will the implementation activities of Year 1 support the implementation of Years 2-5 of the Initiative in ways that contribute to meeting future goals? In the first year, the evaluation focused on collecting anecdotal evidence of the degree to which steps are being taken to support growth and sustainability of the Initiative.

Short Term Outcomes for Older Adults: To what degree do older adults experience changes/improvements in access to services and resources; participate and engage more in the community; and have improved quality of life? In the first year, the evaluation focused on surveys of older adults to assess participation, engagement, and perceived quality of life.

Long Term Outcomes

Community-Level Changes: To what degree does the Aging In Place Strategic Initiative have an impact on making West Hollywood a more age-friendly City? This includes an examination of shifts in awareness about the Initiative and the concept of age-friendliness, shifts in prioritization of age-friendliness, shifts in policy, practice, and funding of age-friendly programs and services, shifts in outcomes related to making West Hollywood more age-friendly and, over the long term, changes in quality of life for older adults in West Hollywood. This is a focus for years 3-5.

Collective Impact Evaluation Questions

At its core, the AIP Initiative uses a collective impact strategy. The use of a collective impact approach was determined based on the City's desire to create a long-term sustainable culture change within the City. Such a culture shift would embrace ideals of AIP and carry them deeper and in a more lasting way throughout the community, well beyond the reach of any funded program or programs on their own. Similarly, a key part of the evaluation is a focus on understanding the effectiveness of this collective impact strategy. To pursue a collective impact strategy, an Initiative must meet several criteria. These are discussed below, along with an overview of how these criteria are incorporated into the evaluation plan and into implementation of the Initiative.

First, in order to be a collective impact Initiative, there must be a common agenda. The City's vision or shared agenda is that West Hollywood is a caring and supportive City where aging is embraced; aging adults are supported in ways that help them remain in their homes; the City is a place where older adults safely age with health



and dignity. As part of its Initiative, the City is working to make this a common agenda across the City's work and the work of community partners, including nonprofit organizations, the City council, West Hollywood Advisory Boards and Commissions, the West Hollywood Chamber of Commerce, foundations, and other community stakeholders. The degree to which the development of this common agenda occurs is being measured and explored as part of the evaluation via surveys, focus groups, and analyses of documents, policies and practices, and media. In the first year, the evaluation focused on changes in awareness of the Initiative and Aging in Place concepts as a first step in building the common agenda, and as part of the measurement of progress toward a shared vision. Further, the evaluation captured process detail on the Department of Human Services and Rent Stabilization's robust efforts to reach out to multi-sector stakeholders and build their interest and commitment to AIP.

Second, mutually reinforcing activities must occur. The City's strategic plan and implementation plan outline the pursuit of mutually reinforcing activities, including many that address needs in multiple domains and across many City departments, and activities and programs that involve external vendors. While these activities and programs differ in their approaches, the City has outlined and is implementing strategies that all move the City toward a mutual goal: making the City as age-friendly and supportive of aging in place as possible. The degree to which City activities and the activities of partners embrace the strategic plan and its underlying concepts is being measured as part of the evaluation, through program-level measures, surveys, focus groups, and analyses of documents, policies and practices, and media. In the first year, the evaluation focused on the degree to which City staff are incorporating Aging in Place concepts into their work and the degree to which programs and services are incorporating activities that reflect a greater focus on AIP concepts, including an analysis of City-funded external social service agency programs and services.

Third, a shared measurement system is developed. In this goal, the Initiative and the evaluation are working hand in hand. For example, the evaluation team has worked closely with City staff to identify gaps in data to measure progress toward Initiative goals and to make recommendations around additional data collection opportunities. As the Initiative begins to incorporate these recommendations and pushes for more shared measurement across programs, the evaluation is documenting these efforts, challenges, and successes, and is utilizing these shared measures as they emerge. Additionally, the evaluation is developing shared metrics across programs where possible, and examining community level metrics that can help uncover impacts of the AIP Initiative. In the first year, the evaluation focused on progress toward the implementation of a shared measurement system.

Fourth, there must be continuous communication. As with other elements of a collective impact strategy, observations and documentation on processes reflecting the degree to which this continuous communication occurs between Initiative leadership, City staff, and community partners is part of the evaluation. In this first year, the evaluation focused on analyzing meeting documentation, collecting anecdotal evidence of the communications, and developing more rigorous systems for collecting communication data in future years.

WEST HOLLYWOOD'S SHARED VISION FOR AGING IN PLACE

West Hollywood is a caring and supportive city where aging is embraced. Therefore, it has the vision that, as they age, adults are supported in ways that help them to remain in their homes. The City, as an age-friendly community, is the place where older adults safely age with health and dignity.

Last, implementing a collective impact strategy requires the existence of a “backbone” support organization that is at the core of the Initiative. The City of West Hollywood is the backbone organization, and the evaluation explores its role and both the successes and challenges it faces. Within the context of collective impact approaches and evaluation, a backbone organization is a separate organization dedicated to coordinating the activities of the Initiative amongst all partners. The backbone is essential to ensuring momentum and achieving the hoped for impact of the Initiative. In the first year, the evaluation collected some process information about the activities, challenges, and accomplishments of the backbone organization, but most data collection around this topic will occur in Year 2-5.

DATA SOURCES AND METHODS FOR YEAR 1

In the first year of the evaluation, many different data collection activities were undertaken to answer the questions above.

To document the roll out of the Initiative and the Year 1 successes and challenges, the evaluation used documentation by City staff of meetings, conferences, presentations and other work, as well as documentation of achievements, barriers, and course corrections. To document progress toward goals and outcomes, the evaluation used many data sources. These include survey data, interview and focus group data, content analyses of meetings and proposals to the City, and documentation of program changes. Each of these is described below.

Survey Data

In 2016 and 2017, surveys of older adults, City staff, and members of West Hollywood Advisory Boards and Commissions were administered. HMA Community Strategies (HMACS, the consultant) developed and disseminated three surveys, including a survey of older adults, administered at the annual Senior Health Fair and in the community, a survey of city staff, and a survey of members of West Hollywood Advisory Boards and Commissions. All three were administered twice (in May 2016 and in May 2017 for the City staff survey and older adult survey, and in Fall 2016 and May 2017 for the West Hollywood Advisory Boards and Commissions survey).

The surveys were intended to provide community-level measures of awareness of age-friendliness, awareness of the Aging In Place Initiative, needs of older adults, older adults’ experiences with West Hollywood and how these experiences and perceptions change over time with the implementation of the Initiative. The surveys were designed to capture a baseline measure from older adults, members of West Hollywood Advisory Boards and Commissions, and City staff of their awareness of age-friendliness, awareness of the Initiative, the needs of older adults, and older adults’ experiences with West Hollywood, and measure changes annually.

All of the surveys were developed in alignment with and with input from several resources. First, they were developed with input from City staff about their perceptions of the potential impact of the City’s programs and services. Second,

they were constructed in alignment with constructs from the World Health Organization's eight domains of age friendliness. Third, they were constructed to leverage, where possible, survey questions that have been used in previous City efforts. Survey items were designed to be reliable, valid, and focused on areas on which the City's efforts are likely to have an impact. The surveys were designed to provide data that can be used to measure the collective impact of City efforts, awareness of the Initiative, and to support course corrections.

For the survey of older adults in the community, a sampling strategy was developed to ensure representation from a diverse sample of the City's older adult population, and to allow for comparisons over time. This included dissemination of written surveys at the annual senior fair, as well as dissemination of written surveys to older adults by multiple agencies that serve older adults in West Hollywood. In 2016, 159 older adults responded to the survey. In 2017, 264 older adults responded. In upcoming years, the consultant will continue to implement the survey annually and will contact a sub-sample of respondents who provided contact information as part of their survey response for in-depth interviews.

For the City staff survey, the implementation strategy was primarily via an email request to complete an online survey. In 2016, 106 City staff responded to the survey. In 2017, 84 City staff responded. The consultant will implement this survey annually, as well. The West Hollywood Advisory Boards and Commissions survey was administered in the Fall of 2016 with 35 respondents, and again in May of 2017 with 22 respondents. Results from the survey data are included in below.

Interview and Focus Group Data

In the summer of 2016, the consultant conducted three focus groups with older adults to explore many of the same issues that were explored in the surveys (and described above), but in more detail. A total of 17 older adults participated in the focus groups.

Additionally, through 2016 and 2017, the consultant conducted informal interviews with City staff and program managers to collect information about the current status and evaluation of programs, as well as plans for the future, and to gather qualitative data about the level of staff engagement with AIP concepts. The evaluation team met with and explored awareness of AIP with City staff across many departments.

In mid-2017, interviews were conducted with a small set of participants in a new housing-related program and with a few individuals who participated in part of the strategic planning process. While these interviews represent the very early stages of qualitative analyses that will occur in Year 2 of the evaluation project, some information from these interviews is included in this report, focusing primarily on early thoughts from older adults about the impacts of AIP and one AIP-related program. In late 2017 and in 2018, interviews will be conducted with a larger sample of older adults who participate in several different AIP-initiated programs in order to gather additional data about the degree to which programs are contributing to the longer-term outcomes the Initiative hopes to achieve. Results from the interview and focus group data are included below.

Content Analysis: Key Meetings

Another method the evaluation used to measure the level of awareness of the AIP Initiative, and the degree to which the AIP concepts are taking hold and being incorporated into the City's way of doing business, was a systematic examination of existing documentation of key meetings. This analysis assessed whether topics related to the Initiative are being discussed and, if so, how frequently. This method of analysis is called content analysis. Evaluations often use this method, when possible, because it is unobtrusive and does not overburden people being served (in this case, older adults) or the people working hard to provide services (in this case, City staff, members of West Hollywood Advisory Boards and Commissions, and program staff) by asking for more data. Instead, existing information is analyzed. To do this, the meeting minutes from 13 ongoing Council, West Hollywood Advisory Boards and Commissions meetings from fiscal year 2010-2011 to fiscal year 2016-2017 were analyzed using a search function that looked for and counted any instance of the following words or phrases: aging, senior, older adult, Aging in Place, Aging in Community, age friendly, frail, Alzheimer's (or Alzheimers), caregiving, caregiver. Results of this content analysis are provided later in the report.

Content Analysis: Social Services Proposals to West Hollywood

Content analysis was also used to examine changes over time in proposals submitted to the City for funding of social services. This analysis was conducted for two reasons. First, a key change was made in the City's Request for Proposals from 2013 to 2016: a requirement was added in 2016 that proposals must address how the proposed programs and services would be attentive to the needs of older adults. As a result of this change, if the Initiative is having its intended impact, the proposals that were submitted to the City in 2016 should have had an increased focus on older adults. If they did, this is an accomplishment of the Initiative. If they did not, this would indicate a lack of progress and a potential challenge for the Initiative to overcome. Second, this analysis gives us insight into the specifics of how and to what degree programs and services are starting to change as a result of the Initiative's efforts, which allows us to assess program-level changes that are beginning to occur. Results of this analysis are part of the assessment of Year 1 accomplishments, but they also help us hone in on programs and services to closely evaluate in Years 2-5.

To conduct this analysis, social service organization proposals submitted to the City of West Hollywood for two program cycles, 2013-2016 and 2016-2019, were used. There were 63 proposals submitted for both program cycles; 56 proposals were analyzed. Seven proposals were excluded from the analysis based on their explicit focus on services for children and youth. To conduct the content analysis, each proposal was broken down into sections based on the request in the City's Requests for Proposals (RFPs). For this analysis, each section was reviewed for unique references to seniors, older adults, senior age demographics, Aging in Place, and the 8 Aging in Place domains. Any mention of or reference to these items was recorded into a spreadsheet and coded by color – green for unique mentions of the aforementioned terminology, yellow for mentions of items pertaining to the 8 AIP domains without explicit mention

"Content analysis" is a research and evaluation method used to systematically analyze and describe written, spoken, or visual communication. It uses systematic categorization, interpretation, and coding of textual material to generate replicable and valid inferences. By systematically evaluating texts (e.g., documents, oral communication, and graphics), qualitative data can be converted into quantitative data.

REACHING AND ENGAGING VULNERABLE SENIORS IN NEED

Yelena Miller serves as the City of West Hollywood's HUD Buildings Service Coordinator. This position is funded through a City program by Jewish Family Service. Because of West Hollywood's prioritization of Aging in Place, this former County service was restored to connect senior HUD residents with unmet needs to services. With 243 current clients, common service referrals include food security services, counseling, technology classes, recreational activities, home safety and fall prevention checks, help with immigration issues, and healthcare access. Residents tell Yelena that having her help when they feel overwhelmed, especially with their housing paperwork requirements and sifting through their mail, can be "lifesaving". She believes her work is crucial for residents, to keep them from feeling "completely alone, abandoned, [or] unimportant".

of seniors or older adults, and red if the section had no information relating to seniors, older adults, or AIP. This spreadsheet was used to inform summaries of each organization's proposals, and an overall analysis of changes in frequency of attention paid to these issues in the proposal and the intended programming. If an organization had proposals for both 2013 and 2016, comparisons were made between the two, highlighting new information regarding seniors, older adults, and AIP. If the organization only had one proposal, the summary highlighted pertinent items relating to seniors, older adults, and AIP, or the lack thereof. Results of this content analysis are provided later in the report.

Documentation of Program Activities and Changes

In Year 1, no shared data system was in place, so a systematic analysis of changes in all of the programs was not possible. However, in Year 1 the Initiative took the critical step of requiring that programs collect and share with the City a standard set of data about the number of older adults who participate in programs and services, their satisfaction with programs and services, the perceived value and importance of those services and programs, and perceived quality of life.

Because standardized data is not yet available from programs and services, the evaluation worked to collect anecdotal information about new programs that emerged in response to the AIP Initiative, changes and enhancements to existing programs that may have been related to the AIP Initiative, and changes in the level of attention paid to the needs of older adults by existing programs. These data came in the form of documentation from and interviews with program managers, as well as in-depth examinations of key programs that emerged in Year 1. Results of this content analysis are provided later in the report.

SUMMARY OF YEAR 1 EVALUATION: DOMAINS, TYPES OF EVALUATION, INITIATIVE GOALS, EVALUATION METHODS, AND DATA SOURCES

The evaluation for Year 1 is organized in alignment with the goals set out for Year 1, as illustrated in the table below.

DOMAINS	TYPE OF EVALUATION	GOALS	METHODS AND DATA SOURCES
1 Year 1 Implementation	Process	Roll out the Initiative in alignment with the Implementation Plan	Implementation plan; staff documentation of Initiative activities; program manager reports
2 Awareness	Outcome, Collective Impact	Raise awareness among City program staff about the Initiative and how AIP concepts could be incorporated into their work at the City	City staff surveys (2016 and 2017); City staff interviews
2 Awareness	Outcome, Collective Impact	Raise awareness among members of West Hollywood Advisory Boards and Commissions about the Initiative and how AIP concepts could be incorporated into their work as West Hollywood Advisory Boards and Commissions members	West Hollywood Advisory Boards and Commissions survey (2016 and 2017)
2 Awareness	Outcome, Collective Impact	Raise awareness among older adults about the Initiative and services that are available to them	Older adult surveys (2016 and 2017); Focus groups
3 Intent to Incorporate Concepts into Work	Outcome, Collective Impact	Begin to increase the degree to which City staff and the business of West Hollywood Advisory Boards and Commissions is attentive and responsive to the needs of older adults	West Hollywood Advisory Boards and Commissions survey (2016 and 2017); content analysis of meetings
4 Program Changes	Outcome, Collective Impact	Begin to increase the degree to which programs and services are responsive to the needs of older adults	Content Analysis of Proposals; Program Documentation
5 Outcomes for Older Adults: Use of Programs/ Services, Satisfaction, Unmet Needs	Outcome, Collective Impact	Incorporate data collection methods into City-funded programs that allow for a more accurate evaluation in upcoming years of the use of programs by older adults, satisfaction with these services, and additional needs	Documentation from the City on new contract requirements
6 Sustainability in Years 2-5	Process	Put mechanisms into place that ensure sustainability of the Initiative in Years 2-5	

RESULTS

Results Section 1:

IMPLEMENTATION

Outreach efforts were conducted by City staff. Throughout the course of the first year of the Initiative, they kept detailed notes about all of the outreach efforts, including the type of outreach, the content and types of attendees, and the number of attendees. Outreach ranged from presenting about the Initiative at previously scheduled meetings, presenting at conferences, to hosting the annual Senior Fair in West Hollywood. Conferences included the Southern California Grantmakers Policy Conference, the Aging and Technology Conference, the American Society on Aging Conference, the California Park and Recreation Society Conference, the City of West Hollywood Annual Congress of Boards and Commissions, the USC Symposium on Elder Abuse, and the Southern California Association of Non-Profit Housing Professionals. Outreach was conducted regularly at meetings such as the Wellness at Any Age Working Group and the Old Lesbians Organizing for Change, and many other meetings with key stakeholders across the city and region were held, including with academics, experts in aging, policy makers, nonprofit agencies, and with older adults. Additionally, outreach was conducted at special events like the Senior Valentine's Day Dance, and several AARP events, including one at which the Aging In Place Initiative was celebrated and West Hollywood received acknowledgement from AARP as an age-friendly city.

Foundation Effort

A key strategy of the Initiative, based on goals of sustainability and true collective impact of multiple sectors, was to engage the philanthropic sector. The outcomes hoped for were: 1) tangible expert advice and guidance from funders who maintain a broad base of expertise in aging programs; 2) awareness and reputation building for the Initiative, particularly amongst key influencers; and 3) attraction of new funds into services provided within West Hollywood for program enhancements and new program development. City staff undertook a robust effort that spanned the entire year and included research, ongoing foundation and grant program monitoring, outreach meetings/calls/inquiries, grant applications and new funds being secured. More detail on the results are included in the results section of this report.

Broad based research was updated quarterly to identify funders supporting programs that align with the Initiative. These program areas included those for older adults, as well as for California and Southern California community programmatic focal points and subpopulation program focal points such as HIV care and service, Russian community support, and older adult LGBTQ population concerns. This resulted in 24 foundations that were identified as holding moderate to high potential that were monitored throughout the year for opportunities. From those holding the highest possibility, a list of seven were tracked and used to focus outreach efforts. Meetings with direct foundation staff were conducted, inquiry phone calls were made to solicit guidance on the likelihood of support and shaping proposals, and ongoing relationships were

OUTREACH WAS CONDUCTED AT 56 EVENTS IN THE FIRST YEAR, INCLUDING DOZENS OF PRESENTATIONS.

+ In April 2016, West Hollywood received acknowledgement from AARP as an age-friendly city.

+ Outreach efforts reached over 1700 people in the first year.

established with multiple foundations and foundation leaders. In all, six grant applications were developed and two resulted in awards. One award was for \$50,000 to launch the Be Well WEHO program, highlighted elsewhere in this report, and \$5,000 to support innovation components of the Initiative. While difficult to benchmark against any standard for measurement, this volume of activity and tangible results in the first year of a new initiative stands out as much higher than typical for an effort of this scale and with its staffing level.

The AIP Initiative is guided by a five-year implementation plan, which was developed in accordance with the community-guided strategic plan.

The implementation plan can be found at the end of this report as Appendix A.



The Implementation Plan serves as a detailed road-map for the project, rather than a step-by-step work plan, covering the eight domains of the Strategic Plan. It is important to note here that there is overlap of the information that is being collected, tracked and reported in this section with information that is analyzed in other ways in the report. As noted earlier, the Implementation Plan and the Strategic Plan were organized around the WHO domains of living as a logical and well established model for organizing culture change around AIP issues. The earlier analysis of the logic models was organized around more traditional program areas (Housing; Arts/Culture etc.), due to the logic models condensing and streamlining inherently interconnected programs that hold potential to have synergistic impact.

Each domain has a cross-section of strategies from the Plan that have emerged as priorities based on urgent need, existing or anticipated capacity to implement them, community demand as determined through the planning process, or other contextual reasons as to why these were efforts that should be prioritized over the many options detailed in the Plan, as part of the ultimate vision of West Hollywood as an age-friendly community. The Department of Human Services and Rent Stabilization developed and managed the plan in its role as the backbone entity driving the Plan forward, regularly reaching out to prospective leads to develop consensus and buy-in on determining these priorities, facilitating dialogue on program development and implementation and building a broad base of support for the work amongst internal and external stakeholders.

Findings

The detail captured in the evaluation and summarized above reflects tangible AIP program advancements across all AIP domains and amongst all City divisions. Some domains and divisions covered more ground than others, and some are indicated in the Strategic Plan more than others. Significant progress was made toward the number of things detailed in the Year 1 implementation plan, but as often is the case, not everything happened. Reasons that were self-reported or observed and documented by the evaluation team include an overly ambitious scope of the plan with respect to staff resources and Initiative staffing, the need to develop implementation plans and enhance division efforts with AIP concepts over time as opportunities allow, and competing demands on time and resources for staff and the City broadly. Based on the performance of the Initiative so far, the level of enthusiasm across the city, and documented growing levels of awareness, there is reason to anticipate momentum will continue to build.

As noted in the findings, there is one point from the evaluator interviews with program staff that can be overlaid here. Operationalizing ideas out of the strategic plan can require significant program development such as staff discussion, planning, and resource allocation. In an environment of high staff demands and careful monitoring of City resources, moving ideas forward can often take more time than anticipated or hoped. In most cases, a delay or reschedule in programming did not appear to be due to a lack of effort, but rather the time it would take to have the necessary planning conducted and staff and other resources aligned.

Results from Domain 1. Open Space and Buildings

The development of the Implementation Plan resulted in seven priorities within Open Space and Buildings across categories of Safety and Security, Age-friendly Gathering Places, and Accessible Facilities and Public Thoroughfares. Scheduled Y1 work saw two of the three planned Y1 program launches happen with leadership by the City's Long Range and Mobility Planning and Facilities Divisions to increase green open spaces and make improvements to facilities to increase accessibility by older adults. Both of these efforts will continue through the duration of the project. Public Safety work to expand neighbor to neighbor involvement experienced delays and is not yet in process for Y2. The Implementation Plan calls for a steady uptick in additional program launches across Y2-4 consistently over subsequent program years.

Results from Domain 2. Transportation

The development of the Implementation Plan resulted in eight priorities within Transportation across categories of transit service options and pedestrian-friendly environment concerns. While seven programs were originally slated to begin implementation in Y1, four of those got started as planned, a fifth made only a partial start and two were rescheduled for launching in later years. This is a trend that has been seen in the first year of work and one that is not uncommon in initiatives of this size that involve multiple stakeholders. Reasons for delays or reschedules include factors such as staff limitation, reorganizing to sequence work with other efforts within the Initiative for programmatic reasons or simply competing priorities across many domains. The four on-time launches include program development for personal transit support, awareness building of transit options, addressing bike traffic concerns on sidewalks, and increasing pedestrian crosswalk safety. The Implementation Plan calls for all four of these efforts to continue over subsequent program years. One additional program is also planned for launch in Y2.

Results from Domain 3. Respect and Inclusion

The development of the Implementation Plan resulted in eight priorities within Respect and Inclusion across categories of Caring and Compassionate community, Older Adult Voices in City Decision Making, and Public Policy that supports aging in place. Scheduled Y1 work saw five of the six planned Y1 program launches happen with leadership provided across Social Services, Human Services and Rent Stabilization, Communications, and the City Manager's Department. The work included efforts to model respect for older adults and integrate concepts into trainings for service providers, ensure adaptive devices are publicly available, make public meetings more accessible and continue to hold legislative priorities for age-friendliness. These efforts will continue over the course of the program and plans for the additional efforts within this domain are staggered over the next two years.

Results from Domain 4. Housing

The development of the Implementation Plan resulted in eleven priorities within Housing across categories of Age-friendly Neighborhoods, Safe and Effective

Use of Existing Housing Stock, and Age-friendly Local Policy. Scheduled Y1 work saw two of the six planned Y1 program launches happen, in addition to two partial starts and one rescheduling of an effort to next year. The launched and partially started work was under the leadership of Social Services, and Housing and Rent Stabilization. These efforts will continue over subsequent years, and the remaining program launches are planned for the next two years.

Results from Domain 5. Communications and Information

The development of the Implementation Plan resulted in eleven priorities within the Communications Department and the Information Technology Division across categories of Culture of Receiving Help, Printed Resource Information, and Digital Resource Information. Scheduled Y1 work saw two of the five planned Y1 program launches happen with leadership by Recreation and Social Services to promote wellness and support community members with access and support around technology. These efforts will continue over the subsequent program years. Reasons noted for delays or reschedules include limited resources and staff. Different from other areas, two programs remain under consideration for program implementation plans. The City intends to explore nonprofit service provider partnerships to develop digital tools to improve the technological ability of people with hearing impairments, and to launch programming to build a group of social media savvy older adults to be peer mentors.

Results from Domain 6. Civic Participation and Employment

The development of the Implementation Plan resulted in eight priorities within Civic Participation and Employment across categories of Volunteer, Civic Service, and Mentoring Opportunities and Employment Assistance for People Over the Age of 50. Scheduled Y1 work saw one of the three planned Y1 program launches fully happen to increase knowledge about older adult issues among City staff, West Hollywood Advisory Boards and Commissions, and other stakeholders with leadership by the Department of Human Services and Rent Stabilization. The remaining two got off to partial starts with leadership by Jewish Vocational Services and Economic Development to establish a volunteer corps and support with starting a business. These efforts will continue over the subsequent years and the five remaining planned efforts are staggered over the next two years.

Results from Domain 7. Health and Community Services

The development of the Implementation Plan resulted in 20 priorities within Health and Community Services across categories of Care for the Caregivers, Physical and Mental Wellness, Social and Emotional Support, and Help in the Home. There was activity around 18 of these programs with six launching as planned, three being eliminated as priorities based on further review, three experiencing partial starts, five missing their planned start and requiring further work for launch-readiness, and one was reorganized under an intertwined effort in another domain. Those experiencing starts or partial starts will continue over multiple years and the remaining or rescheduled launches are staggered over the next two years. The disproportionate

Awareness of the concepts of age-friendliness and what it means for a city to be age-friendly are high and growing among older adults, City staff, and members of West Hollywood Advisory Boards and Commissions.

number of programs in this domain that were mobilized or under active development in Y1 appears to be driven by reasons including an existing City baseline capacity for services in these areas, community demand which was identified in the plan development, and a longer standing history of embedding age-friendly practices in the cultures and operations of these program types. While the large amount of reorganization described above does not indicate the highest proportion of fully successful Y1 launches, it does seem, however, to represent the highest level of program activity when assessing by domain.

Results from Domain 8. Social Participation

The development of the Implementation Plan resulted in four priorities within Social Participation in the category of Social Engagement and Enrichment. Scheduled Y1 work saw three of the four planned Y1 program launches happen to provide inclusive educational, art and cultural activities, to create intergenerational opportunities for older adults to share their life experiences, and to create welcoming opportunities for older adults to engage in physical activity. This work happened under the leadership the Arts and the Recreation divisions and will continue over subsequent years. The social model adult-day program is in need of additional planning and study by the City to inform decision making.

RESULTS SECTION 2: AWARENESS AND DISCUSSION OF WEST HOLLYWOOD'S AIP INITIATIVE AND AIP CONCEPTS

Results from Survey Data

To measure changes in awareness of West Hollywood's AIP Initiative and age-friendly concepts in general, the evaluation examined several sources of data. First, as described above, we administered six surveys in the first year of the evaluation. Surveys were administered twice (once in 2016 and once in 2017) to three groups of people: City staff, members of West Hollywood Advisory Boards and Commissions, and older adult residents of West Hollywood. These surveys asked about a number of issues, from awareness of the Initiative and age-friendly concepts and incorporation of these concepts into programs and services, to use of services by older adults, and perceptions of whether services are helpful and whether West Hollywood is an "age-friendly" city. In this section, we discuss survey results related to awareness of the AIP Initiative and age-friendly concepts, and measures of the degree to which these concepts are being operationalized in City business and services and programs that, ultimately, will help older adults remain healthy, active, and socially connected in their communities.

The surveys of older adults, City staff, and members of West Hollywood Advisory Boards and Commissions all asked respondents to state their level of agreement or disagreement with multiple statements designed to understand the degree to which these groups of people had heard of aging in place concepts, and the AIP Initiative in West Hollywood, and whether awareness seems to be growing as a result of the work of the Initiative. These included the following:

I know what it means for a city to be “age-friendly”.

I understand the concept of “age-friendly” as it applies to a city.

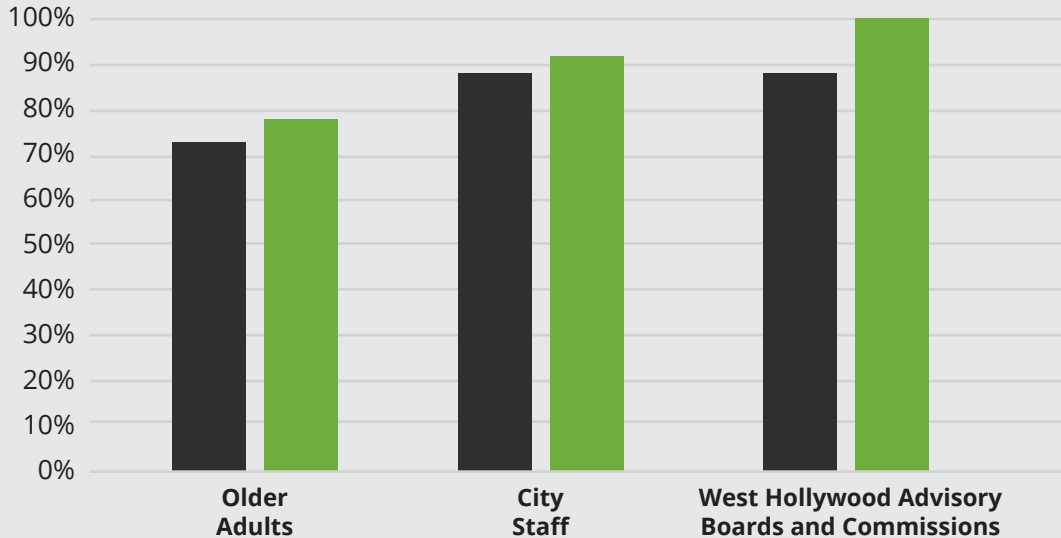
I have noticed changes in the awareness about age-friendly concepts among residents (not among city employees).

I have noticed changes in the awareness about age-friendly concepts within and among city employees.

Awareness of the AIP Initiative is high and growing. Among older adults, the percentage of adults who reported knowing the concept “age-friendly” and knowing what it means for a city to be “age-friendly” is high, and grew from 2016 to 2017. Among City staff and members of West Hollywood Advisory Boards and Commissions, most staff reported that they are familiar with the concepts of age-friendliness, they understand how age-friendly concepts apply to the City, and they know what it means for a city to be age-friendly. The percentages who reported this familiarity and understanding in 2017 was higher than in 2016.

I know what it means for a city to be “age-friendly”.

■ 2016
■ 2017



Additionally, the City staff surveys and the surveys of members of West Hollywood Advisory Boards and Commissions asked about the degree to which respondents noticed changes in the level of discussion about age-friendliness in their work for and with the City. These included questions about the degree to which age-friendliness is a regular part of meeting agendas and planning processes, the degree to which age-friendly concepts come up in meetings, are talked about among team members, and the degree to which incorporating age-friendly concepts is discussed at work and within the work of West Hollywood Advisory Boards and Commissions.

From 2016 to 2017, the percent of respondents who agreed or strongly agreed with these statements went up, sometimes dramatically, with very few exceptions. These responses demonstrate the effect the Initiative has had on the incorporation of AIP concepts into the day-to-day conversations happening within the City’s work, both at the staff level and at the level of West Hollywood Advisory Boards and Commissions. See Table 1 for additional details.

Table 1: Incorporation of Age-Friendly Concepts into Discussions and Planning

QUESTION	CITY STAFF 2016	CITY STAFF 2017	CHANGE	WEST HOLLYWOOD ADVISORY BOARDS AND COMMISSIONS MEMBERS 2016	WEST HOLLYWOOD ADVISORY BOARDS AND COMMISSIONS MEMBERS 2017	CHANGE
PERCENT AGREE OR STRONGLY AGREE						
Concepts related to age-friendliness come up regularly in conversations among city staff/West Hollywood Advisory Boards and Commissions members.	47.1%	50.0%	2.9%	51.4%	66.7%	+15.3%
Concepts related to age-friendliness come up regularly in meetings.	40.6%	46.4%	5.8%	54.3%	65.0%	+10.7%
Concepts related to age-friendliness are a regular part of meeting agendas and planning processes.	26.5%	38.1%	11.6%	42.9%	52.4%	+9.5%
I talk with my team about the importance of incorporating age-friendly concepts into our work.	38.8%	49.4%	10.6%	n/a	n/a	n/a

Results from Interviews with City Staff

In addition to the surveys, a sample of key City staff who oversee programs and services were interviewed throughout 2016 and 2017. Details about the timing of these meetings are provided below.

AREA	MONTH OF MEETINGS/INTERVIEWS
Planning	March 2016, May 2016, October 2016, December 2016
Arts & Culture	March 2016, May 2016, October 2016, December 2016
Housing	March 2016, May 2016, February 2017, March 2017
Transportation	March 2016, May 2016, October 2016, December 2016
Social Services	March 2016, May 2016, October 2016, December 2016 (2 meetings), March 2017

While there was variation in the degree to which City staff reported that they had become more aware of the Initiative and AIP concepts, without exception, every staff member reported that their awareness of both had increased since the beginning of the Initiative.

Intermittent evaluation team meetings included Initiative backbone leadership and were noted as having a strategy to double as implementation and program planning meetings. The dialogue that transpired and subsequent feedback from program staff indicate that the meetings appear to have driven an increase in dialogue amongst City program leaders. Extensive discussion was documented that included robust dialogue about strategies and plans for implementing AIP concepts into their work. A significant level of discussion took place amongst the staff present from within the same division who may otherwise have had little uninterrupted time to discuss implementation. Additionally, the backbone leadership and evaluation team were able to ask probing questions and provide examples from other areas of work that often served to generate additional ideas or elevate the level of consideration of AIP implementation directly at the level of program detail.

Examples of this kind of discussion include the reporting out and further brainstorming by Planning staff on strategic leveraging of the of public benefit framework to generate new development inclusive of AIP concepts and age-friendly infrastructure. Another example includes a brainstorming of internal and external program possibilities to address the unmet need for older adult roommate matching services and support.

These meetings also resulted in identifying tangible and important evaluation priorities in the formative year of the evaluation itself. For example, a discussion

about transit option workshops lead to identifying opportunities to capture data about the effectiveness of the program which have the potential to lead to more effective services in this area. Such dialogue also lead to inclusion of an additional evaluation question in future efforts related to substance abuse services utilized by and/or needed by the older adult population within West Hollywood.

Results from Content Analysis: Key Community Meetings

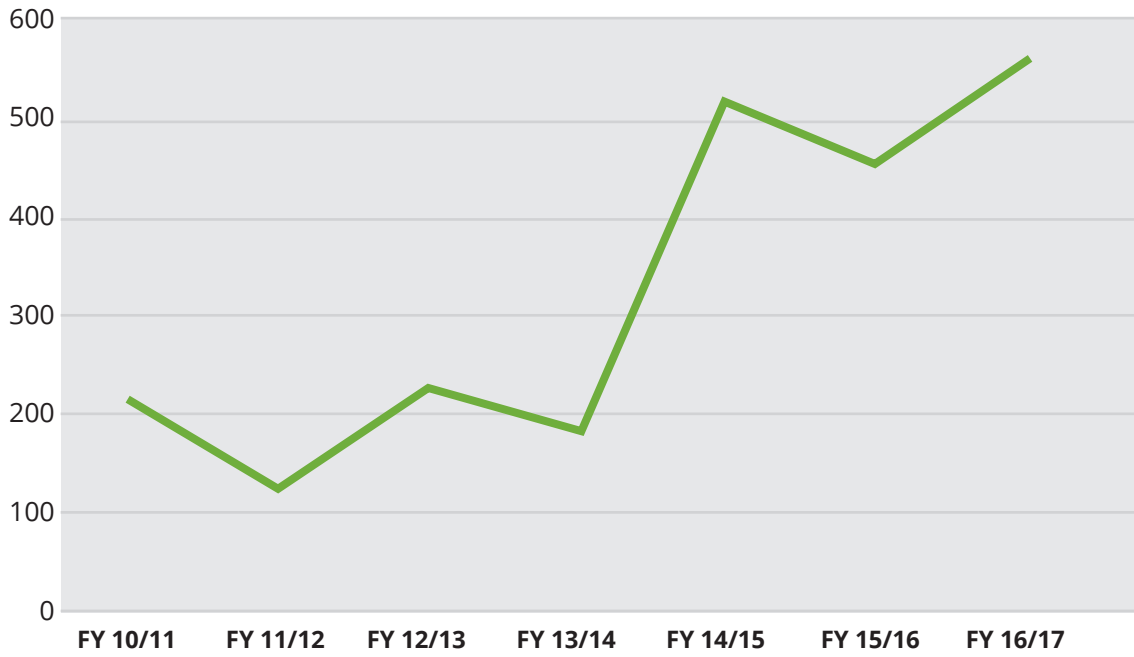
Second, we examined the degree to which AIP concepts were discussed in key West Hollywood meetings over time. Specifically, we analyzed meeting notes from fiscal year 2010/2011 through fiscal year 2016/2017 from the following 13 sets of meetings: City Council, the Human Services Commission, Public Facilities Commission, Rent Stabilization Commission, Planning Commission, Public Safety Commission, Transportation Commission, Disability Advisory Board, Lesbian and Gay Advisory Board, Russian Advisory Board, Senior Advisory Board, Transgender Advisory Board, and Women's Advisory Board.

We conducted a systematic analysis of the frequency with which key words were used by year in these meeting notes, which allows us to examine trends over time of awareness of (and attention to) older adults and AIP concepts. The results show a dramatic increase over time in the frequency with which issues related to the needs of older adults are discussed across these key meetings. An analysis was not conducted to uncover the content of these discussions, so it is not possible from our analysis to determine the nature of the discussions, and that was not the purpose of this analysis. The purpose was to explore whether it seemed that issues related to older adults, age-friendliness, and aging in place were gaining more attention and being discussed more frequently. The answer to this is a clear "yes", and this increased attention to and discussion of the needs of older adults and to aging in place in key City meetings seems to be closely linked with the AIP efforts.

Overall, there is a high and growing level of awareness among older adult residents, City staff, and members of West Hollywood Advisory Boards and Commissions, which is an accomplishment of the Initiative. Additionally, there is growing attention being paid by City staff and City leaders to the needs of older adults and to Aging to Place, suggesting these issues are a growing and sustained priority.

While achieving these are important accomplishments, they are perhaps most important as stepping stones toward another goal: that of staff and community leaders beginning to incorporate AIP concepts into their work at and for the City – beginning to perceive that they have an ability to incorporate AIP concepts into their work and having the intention to do so. The degree to which the Initiative is achieving this goal is discussed in Results Section 3.

Figure 1: Discussion of Older Adults and AIP in Key City Meetings, 2010-2017



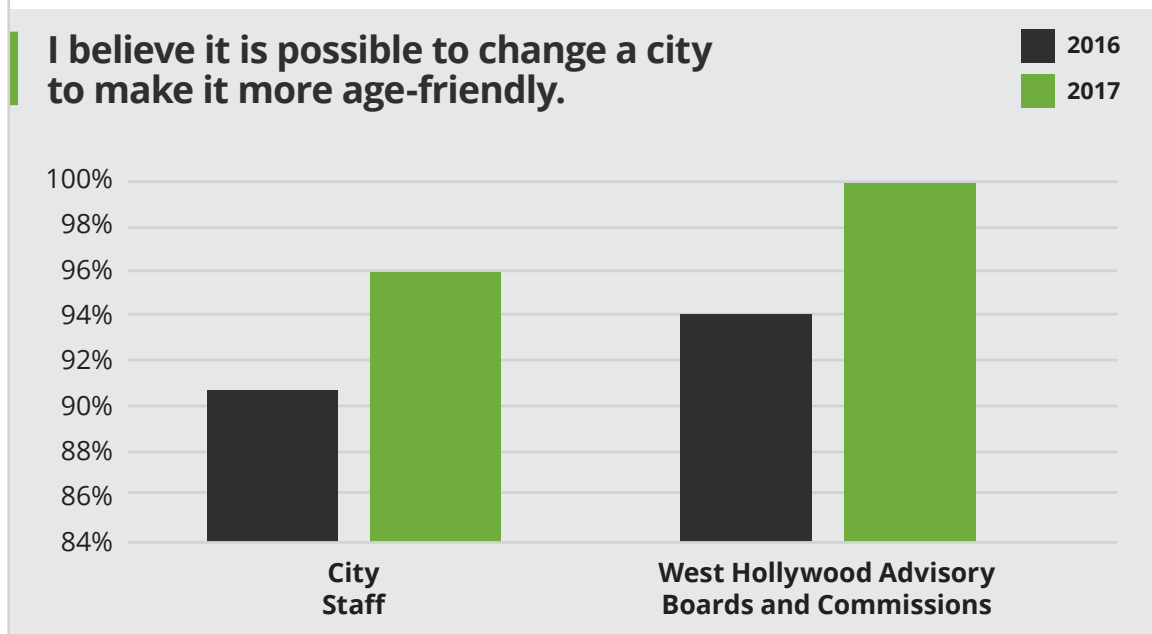
RESULTS SECTION 3: PERCEIVED ABILITY/INTENT TO INCORPORATE AIP INTO WORK/PROGRAMS/SERVICES

Beyond building awareness and understanding of the concepts of age-friendliness, another step in moving the City toward being age-friendly is helping City staff and City leaders understand how they can contribute to making West Hollywood more age-friendly, believe that their work can move the City in that direction, and support their intentions to do so. To assess progress on this goal, the City staff surveys and the West Hollywood Advisory Boards and Commissions surveys in 2016 and 2017 asked for responses to several statements. City staff reported high and growing levels of agreement with the following statements:

I believe it is possible to change a city to make it more age-friendly (90% agreed or strongly agreed in 2016, with 96% in 2017).

I know how my work can contribute to making West Hollywood more age-friendly (68% agreed or strongly agreed in 2016, with 80% in 2017).

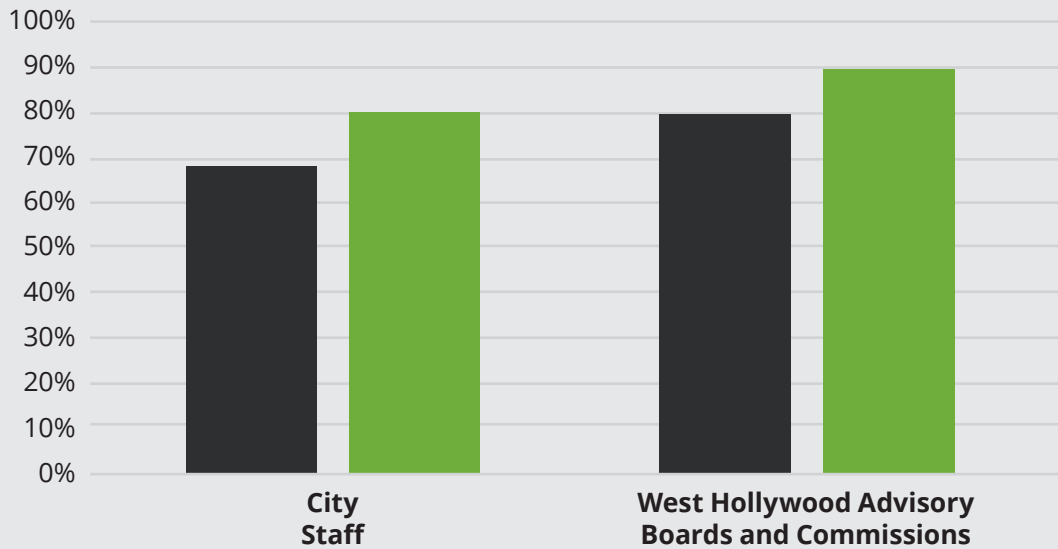
The same is true of members of West Hollywood Advisory Boards and Commissions who responded to the surveys. Members of West Hollywood Advisory Boards and Commissions had varying levels of agreement with the statements above (from 94% agreement in 2016 to 100% agreement in 2017 with the first statement, and from 80% agreement in 2016 to 91% agreement in 2017 with the second statement) suggesting that these key community leaders were also certain of ways that their work could have an impact on the goals of making West Hollywood as age-friendly as possible.





I know how my work can contribute to making West Hollywood more age-friendly.

2016
2017



In the next section, we examine early evaluation evidence regarding the degree to which increased awareness and intentions to incorporate AIP concepts into the City's program and services are resulting in changes to programs and services.

RESULTS SECTION 4: PROGRAM CHANGES

When examining changes to how the City is doing business, and changes to programs and services, several sources of data were used.

Survey Data

First, the survey of City staff asked very specific questions of City staff about how they are thinking about and incorporating AIP concepts into their work and into programs and services. Responses to these questions indicate that the AIP Initiative is having an impact on how City staff do their work. For example, from the 2016 to the 2017 survey, City staff responses to the following statements shifted upward (toward higher levels of agreement with these statements):

The AIP Initiative is having an impact on how City staff do their work.

- + I have changed how I write contracts with vendors to require that they do things in a more age-friendly way.
- + I have added measures of age-friendliness to evaluation related to my work.
- + Concepts related to age-friendliness are a regular part of meeting agendas and planning processes.
- + My supervisor has incorporated age-friendly concepts into my goals and key performance indicators.
- + I have incorporated age-friendly concepts into my staff's goals and key performance indicators.
- + I have specific goals for my work around age-friendliness.
- + When I am thinking about existing projects, I think about how to make them more age-friendly.
- + When I am undertaking a new project, I think about how to make it more age-friendly.
- + I have changed how I do my work in order to incorporate age-friendly concepts into the work.

In 2016, the mean response from City staff was “neither agree nor disagree” regarding each of the above statements, suggesting that this was an opportunity for the Initiative to have an impact on the City’s work in these areas. On every measure, the level of agreement with these statements has increased from 2016 to 2017, which is positive. However, the averages are still relatively low, suggesting much more room for change in this area. See Table 2 for more information.

Table 2: City Staff Responses – Incorporation of Age-Friendly Concepts into the Day to Day Work of the City

QUESTION	2016	2017	CHANGE
PERCENT AGREE OR STRONGLY AGREE			
I have changed how I do my work in order to incorporate age-friendly concepts into the work.	46.5%	62.7%	+16.2%
When I am undertaking a new project, I think about how to make it more age-friendly.	52.4%	61.9%	+9.5%
When I am thinking about existing projects, I think about how to make them more age-friendly.	50.0%	55.4%	+5.4%
I have specific goals for my work around age-friendliness.	40.4%	45.2%	+4.8%
I have incorporated age-friendly concepts into my staff's goals and key performance indicators. (Check "not applicable" if you do not supervise staff.)	30.5%	21.7%	-8.8%
My supervisor has incorporated age-friendly concepts into my goals and key performance indicators.	31.7%	42.9%	+11.2%
I have changed how I write contracts with vendors to require that they do things in a more age-friendly way.	17.1%	15.7%	-1.4%
I have added measures of age-friendliness to evaluation related to my work.	20.2%	26.2%	+6.0%

Table 3: West Hollywood Advisory Boards and Commissions Members Responses – Incorporation of Age-Friendly Concepts into the Day to Day Work of the City

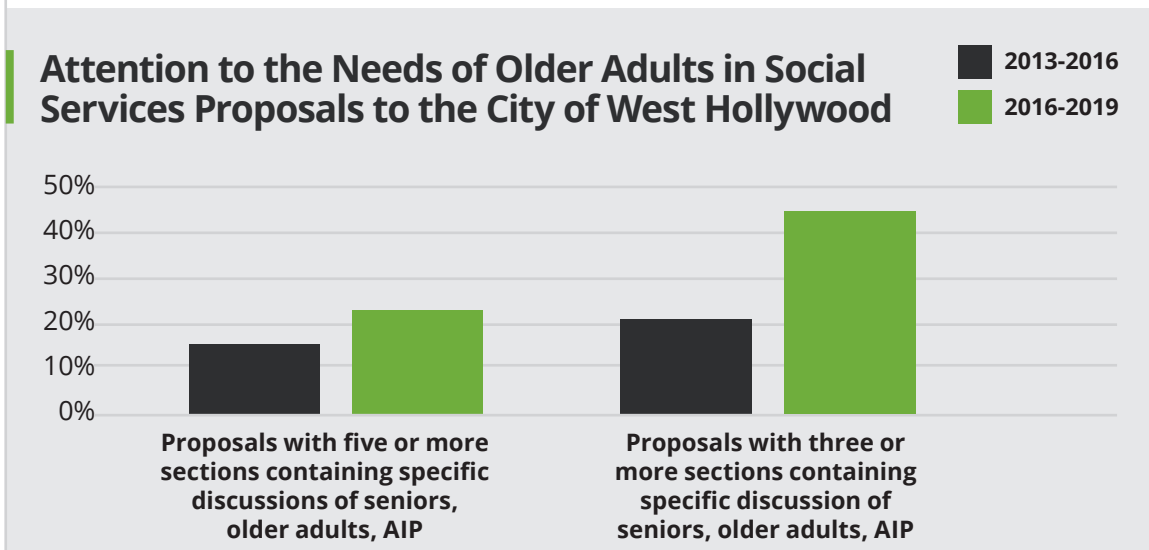
QUESTION	2016	2017	CHANGE
PERCENT AGREE OR STRONGLY AGREE			
I have changed how I do my work in order to incorporate age-friendly concepts into the work.	57.1%	75.0%	+17.9%
When I am undertaking a new project, I think about how to make it more age-friendly.	65.7%	85.7%	+20.0%
When I am thinking about existing projects, I think about how to make them more age-friendly.	62.9%	90.0%	+27.1%

Less than ¼ of all social services proposals to the City included attention to the needs of older adults in 2013. By 2016, the percentage that discussed the needs of older adults had increased to almost half.

Content Analysis: Social Services Proposals to the City

Another key area of data analysis regarding the degree to which increased awareness and intention to incorporate AIP concepts into actual programmatic and service delivery changes is the examination of proposals to the City for social services. This content analysis provides a key set of early data exploring whether this emphasis by the Initiative is resulting in concrete actions. As explained above, the content analysis was a systematic review and examination of social services proposals submitted to the City in 2013 and in 2016, to explore whether there were changes in the level of attention to the needs of older adults and whether programs and services were beginning to include and prioritize those needs into their future programming and service delivery efforts.

The graph and table below show increases in attention paid to older adults and AIP concepts across all areas of the proposals from 2013 to 2016. This is an outcome of the AIP Initiative, because it was the Initiative that ensured this requirement was included in the City's Request for Proposals in 2016, as well as an indicator or program shifts that are beginning to occur and that will continue into the future. A higher percentage of programs and services being offered (and being funded by the City) have a focus on serving older adults, including the needs of older adults in their goals and scope of services than in the past.



It is worth noting, however, that increasing the percentage of programs even more over time should be a goal of the Initiative, since the percentages are, in some cases, still quite low. This may require additional strategies on the part of the Initiative, such as providing additional technical assistance and guidance to organizations to explore how they might most effectively incorporate the needs of older adults and AIP concepts into their programming in the future.

Table 4: Content Analysis of Social Services Proposals to West Hollywood

	2013-2016		2016-2019		CHANGE
	COUNT	PERCENT	COUNT	PERCENT	
Proposals with five or more sections containing specific discussion of seniors, older adults, AIP	5	16.1%	6	24.0%	+7.9%
Proposals with three or more sections containing specific discussion of seniors, older adults, AIP	7	22.6%	11	44.0%	+21.4%

Proposal Sections: Counts and percentages of proposal sections containing specific discussion of and references to seniors, older adults, AIP

	2013-2016		2016-2019		CHANGE
	COUNT	PERCENT	COUNT	PERCENT	
Brief program goal	3	9.7%	4	16.0%	+6.3%
Target population check boxes	21	67.7%	18	72.0%	+4.3%
Brief proposal summary	2	6.5%	4	16.0%	+9.5%
Program Goal	5	16.1%	5	20.0%	+3.9%
Target Population	13	41.9%	10	40.0%	-1.9%
Member Demographics/Outreach	5	16.1%	7	28.0%	+11.9%
Need	7	22.6%	12	48.0%	+25.4%
Service History	5	16.1%	6	24.0%	+7.9%
Program Description	7	22.6%	10	40.0%	+17.4%
Cooperation/Collaboration	2	6.5%	4	16.0%	+9.5%
Scope of Services/Outcome Objectives	3	9.7%	4	16.0%	+6.3%
Additional Information	0	0.0%	2	8.0%	+8.0%
Proposals Analyzed	31		25		

Program Documentation: New Programs, Program Expansions, Enhanced Focus on Older Adults

In addition to survey data that examined City staff changes in their approach to programs and services, and content analyses that examined changes that social services organizations stated they were making to programs and services in their proposals to the City, throughout the first year, the evaluation collected information from City staff and organizations about changes being made within the areas of focus for the Initiative. Because standardized data to track these changes are not yet available, the evaluation utilized periodic check-ins with City staff and staff at organizations that are funded by the City to gather anecdotal information about new programs, program expansions, and changes in programs to make them more age-friendly. This piece of the evaluation is most helpful for the areas for which a content analysis of proposals was not possible in Year 1: housing, transportation, planning, and arts and culture, but we also examine changes in programs in social services that are not reflected in the content analysis.

To discuss these changes and updates to programs, it may be useful to refer to the Five-Year logic models for each major area of focus for the Initiative, which were developed as part of the evaluation in Year 1, and which are provided as an appendix. Below, we provide a summary of the Year 1 goals for each area, followed by a brief discussion of the progress made toward the goals in that area, as well as information about challenges and delays, and plans for the upcoming years.

Social Services

The strategies and activities being undertaken as part of the Initiative within the area of social services are:

- + Establish WeHo Volunteer Corps and match older adults with volunteer opportunities
- + Support peer-to-peer engagement and support (Jewish Family Service, Being Alive!, recreation programs)
- + Help older adults with services that meet their needs as they move through the aging process
- + Facilitate the process for accessing in-home supportive services
- + Ensure that older adults have access to proper nutrition services and outlets
- + Develop model for hands-on assistance for frail elderly (greater teamwork between case manager and resident services coordinator)
- + Provide assistance with basic household duties (changing sheets, basic cleaning)
- + Increase the awareness of the needs and desires of older adults among city program staff, partners, and external vendors and incorporation of attention to these needs into strategic planning, programming, implementation of programs and activities, and evaluation of programs and activities

In upcoming years, standardized data will be available. New data requirements have been added to City-funded programs. Additionally, standardized quarterly check ins with staff will be conducted using a standardized survey tool and interview guide.

Be Well WeHo

The work of AIP cuts across many sectors, and when partnerships with different types of stakeholders form to serve the older adult community collaboratively, it can be a powerful combination. Beginning in 2017, and based on a longstanding relationship with Jewish Family Service (JFS) as the most extensive social services provider for older adults in West Hollywood, the City launched a program partnership with Cedars Sinai Medical Center (the funder), Partners In Care Foundation (the program technical advisor), West Hollywood Community Housing Corporation, and West Hollywood's Recreation Services Division (the program's overall coordinator). Be Well WeHo is offering workshops that address the physical, mental, and emotional wellness of older adults, as well as people of all ages. This includes frail older adults and seniors with chronic illness. Workshop series are evidence-based to enhance the health and wellness of participants. In June, the program began offering Arthritis Foundation Aquatic Exercise Class at West Hollywood Park. With the extensive staff trainings and other planning underway, more workshops will be offered throughout Y2 and beyond.

As a city that contracts a majority of its community services, West Hollywood had a significant opportunity to leverage its contract social service providers as partners in the work of the Initiative. In 2016, the City issued a Request for Proposals (RFP) from social service agencies for the 2016-2019 funding cycle. The RFP established the Aging in Place Aging in Community Strategic Plan as a City priority and encouraged applicants to align their proposals to address how the proposed programs and services would be attentive to the needs of older adults. This was a change from the 2013 request for proposals and the results of this work represent this division's considerable AIP activity in Y1. A qualitative analysis of proposals funded in 2013 and 2016 was conducted and can be found on page 38.



Arts and Culture

The strategies and activities being undertaken as part of the Initiative within the area of arts and culture are:

- + Provide inclusive educational, art and cultural activities where people already gather
- + Plan for the creation of intergenerational opportunities for older adults to share their wisdom and experiences (with youth and 20 somethings) in Year 2
- + Increase the awareness of the needs and desires of older adults among city program staff, partners, and external vendors and incorporation of attention to these needs into strategic planning, programming, implementation of programs and activities, and evaluation of programs and activities

AIP is included in the Arts and Cultural Affairs Commission work plan and City staff working in this area have held numerous discussions and meetings on developing program plans to implement these concepts into their work. Specific accomplishments were numerous and include:

- In the Arts grant funding, the Arts staff and reviewers report having more sensitivity to the needs, ideas and inclusion of older adults. This has resulted in funding for performance workshops to LGBTQ seniors and an art class specifically for older adults in response to an increased interest in art making.
- Continuation of free concerts in parks, which the leadership are focused on due to large senior attendance.
- Program launch plans for the “Senior Studio”, an art studio series to allow seniors to explore their own creativity.
- The successful operation of “Art to Us”, an intergenerational project that partnered older adults with high school students to make art together.

Additionally, the evaluation examined the City of West Hollywood's Arts and Cultural Affairs Commission (ACAC) work plans from 2007 through 2017, and the Arts and Culture City Staff reports from 2014 through 2017. Until 2016, there were no discussions of seniors, aging, and older adults in these work plans and staff reports. However, beginning in 2016, this began to shift, as evidenced by the following examples:

- In the 2016-2018 ACAC Work Plan, the Aging in Place Initiative was listed as a priority for the Commission. The Work Plan gave a brief overview of the AIP strategic plan, and noted that "the Commission will explore cultural programming opportunities and strategies to assist the City with implementing the plan". The Work Plan also mentioned an Artist in Residence (AIR) program that was in consideration for the 2016-18 program cycle, which could support AIP.
- In the 2017 Arts and Culture City Staff Report, a new project called California Dreams was awarded a grant to implement a workshop creation process that will "explore the experiences of LGBTQ seniors as they made their journeys West, both literally and symbolically, in search of places to live an open and 'out' lifestyle".

Plans for Years 2-5 are to continue refining the array of ideas they have, and to continue to work with ACAC to see which ideas surface most prominently for the next two-year Arts & Culture plan. It is noted that the City Council has added money to the budget to help with the free theater in parks and other grant programs. Considerations of the Initiative are being made in planning new programs and expanding existing programs.



Transportation

The strategies and activities being undertaken as part of the Initiative within the area of transportation are:

- + Increase knowledge among potential transit users of existing options by offering educational programs (travel training, workshops, education about using transit apps)
- + Consider approaches for a higher level of assistance (transit case management or a travel concierge for trip planning, Bus Buddies, triage to the most appropriate service)
- + Provide individualized personal support for those who otherwise would be unable to access transit (door-through-door service, "enhanced" taxi service)
- + Integrate improvements into existing efforts (scheduling nighttime and weekend outings, longer service hours, shuttle/connectivity to rail system, assistance with transporting belongings)
- + Further accommodate older adults with sight and hearing challenges by improving the number and effectiveness of audible signals at crosswalks, longer crossing times, innovative use of technology such as amplification-using smart phones
- + Increase visibility of slopes on pathways; use improved signage for way-finding and transit navigation
- + Reduce bike traffic on sidewalks (shared lanes with "sharrows," bicycle boulevards on neighborhood streets)

According to City staff working in this area, the following was accomplished in Year 1:

- Fixed Route CityLine is a free shuttle service available to the general public; it stops at significant city destinations including senior housing. In FY 16, 65,011 passengers were served.
- Dial-A-Ride provides curb-to-curb rides for resident seniors and those living with disabilities. In FY 16, 15,852 passengers were served.
- TLC is an enhanced service which provides an assistant to help passengers from home to vehicle. In FY 16, 2,518 passengers were served.
- The Taxi Assistance program allows resident seniors and those with disabilities to purchase taxi fare at a reduced rate. In FY 16, 16,032 passengers were served.
- During FY 15-16, the City spent a total of \$2.9 million in Proposition A funding; 3% of expenses were for Metro bus pass subsidies for senior/disabled residents as well as funding buses for senior excursions and school field trips.
- Specific transit marketing strategies geared towards seniors were developed, in both Russian and English.
- Transit workshops were offered at the West Hollywood Senior Center, as well as at booths at the Senior Fair.
- Current funding priorities: 40% of Prop A contract expenses are for programs targeting seniors and those with disabilities, including bus pass subsidies (\$1,116,113).

Plans for Years 2-5 are to:

- Improve Access to Transit Service Information – Target group: Seniors and individuals living with disabilities – Strategies:
 - Provide educational forums and other opportunities for community members to learn about using various transit options.*
 - Encourage formation of travel clubs and support for new transit users, including a “transit concierge” service to ensure access to the most appropriate service for each trip.*

**Denotes items which support the Aging in Place framework.*
- Facilitate community access and mobility options for all community members regardless of age and ability status – Target group: Seniors and individuals living with disabilities – Strategies:
 - Simplify trip request process, including establishment of on-line request capability for Dial-A-Ride reservations.
 - Consider piloting Dial-A-Ride service during weekend and evening hours.
 - Connect new riders by offering travel training and a “new riders group” to help people find travel companions.
 - Require additional training to taxi drivers and dispatch in order to improve the customer experience.
 - Provide education to allow taxi subsidy users to access balance information through the program’s online portal.
- Increase capacity/availability of service through improved efficiency, cost effectiveness and coordination of options – Target group: Seniors and individuals living with disabilities – Strategies:
 - Consider demand response and subsidy services as part of the same system and allocate funding to reflect complementary services.
 - Establish “transit concierge” program to triage callers to most effective service for their needs.
 - Contract for Dial-A-Ride and TLC, which are operationally parallel programs, as a single service, to more equally distribute operating costs.
 - Review and revise scheduling procedures and cancellation policies for Dial-A-Ride and TLC.
 - Adopt a fixed schedule for trips to UCLA, Veterans Administration, and Kaiser Permanente.
 - Consider alternative program structure for the current Taxi Assistance program with issue of RFP in late 2017.
 - Evaluate the potential for incorporation of shared ride services into City programs, and return to council with findings and recommendations.
 - Evaluate feasibility of adopting a small fare for Dial-A-Ride.

Housing

The strategies and activities being undertaken as part of the Initiative within the area of housing, by the City or other stakeholders as noted, are:

- + City Housing Division to conduct a case law review and develop a policy white paper on potential new policy options for allowing unit transfers
- + Home Secure program to be administered by additional community partners (WCIL and APLA) and offer a broader range of available services (i.e., ramps)
- + West Hollywood Community Housing Corp., an essential collective impact community stakeholder, to open additional affordable housing units for low-income older adults
- + West Hollywood Housing Corp to operate its resident service coordination program on site at affordable housing sites and connect residents to services in the community that they need in a highly coordinated way

According to City staff working in this area, the following was accomplished in Year 1:

- Completed the lease-up of 76 new senior low- and extremely-low income inclusionary units at Movietown Square.
- Worked with and provided referrals to Bet Tzedek Legal Services, Coalition for Economic Survival (CES) Tenants Rights Clinic, Eviction Defense Network, PATH, and Small Claims Court Advisors to provide legal counsel and defense for persons at risk of losing their housing.
- Tracked units vacated by use of the Ellis Act, owner occupancy evictions, and Section 8 contract cancellations, and monitored for compliance with local and state laws.
- Actively worked with the Housing Authority of the County of Los Angeles to ensure Section 8 tenants remained in their homes.
- Served as the lead Division for the “Aging in Place, Aging in Community” (AIP-AIC) 5-Year Strategic Plan development, and prepared to implement the “Eight Domains of Livability” from a wellness, social model, and program planning vantage point.
- In calendar year 2016, the Division received 12,863 phone calls, emails and counter visits, and responded to 95% of phone and email inquiries within one day.
- Continued to support and collaborate with the Community Development Department when developing incentives to encourage property owners to upgrade ailing apartment systems. Also continued to support the Community Development Department in developing the seismic retrofit program, and began developing a program to ensure in-place tenants are not unnecessarily impacted from seismic retrofitting or major improvements to their apartment buildings.
- Continued to make the “RSO Building Blocks” seminar series and other educational materials publicly available on the website and in City Hall.
- Continued a study of rehabilitation incentives to encourage rent-stabilized landlords to re-invest in their aging buildings.

The housing crisis, which is of particular severity in the state of California as well as in the City of West Hollywood, is challenging. Efforts to protect older adults and help them cope with fears of housing problems are at the center of City efforts, as reported by City staff and leadership. In addition, one program-level challenge that was encountered and addressed was that the Home Secure program was not being fully utilized with administration by just one social service provider. The program required a wider berth; therefore, the City decided to move the program forward using a model that had proven effective for substance abuse programs – pooling money and awarding contracts to multiple agencies. Three agencies now administer benefits to a wider population of clients, and more services are offered within the Home Secure program.

The Housing and Rent Stabilization division plans to specifically implement its Year 2 key priorities outlined in the 5-Year AIP-AIC Strategic Plan, with special emphasis on collaboration with outside agencies.

Living Strong on Her Own with Diabetes and Chronic Fatigue

Zita first came to West Hollywood almost 40 years ago, and only recently moved into HUD housing after waiting 3 and a half years. She has recently faced depression due to some changes in her life, and she struggles with daily activities due to her diabetes, chronic fatigue, and other health problems. Still an active person, there are just some things she cannot handle herself, and it can be hard sometimes. Things might be brightening up for Zita. Her good friend in the building has been taking her to meet the social worker on site, and she has seen how much she helps the other Russian people. Zita can still make calls on her own, but information from the social worker is helping her get taxi coupons to see the doctor, fill out paperwork to allow her new dog to live on-site, and find home caretaker help; because of her arthritis, she needs a hand around the apartment. When asked if things might be looking up for her, she grinned and said, “Big yes, big yes. I’m very grateful for the help”.

Planning

The strategies and activities being undertaken as part of the Initiative within the area of planning are:

- + Development and implementation of the Eastside Community Plan
- + Development and implementation of the Multi-Family Study
- + Development and implementation of walking and biking improvement plans
- + Revision and improvement of the public benefits strategy

All of the goals for the Planning division are Year 2-5 goals. Therefore, in Year 1 of the Initiative, significant plans were developed for Years 2-5. Nonetheless, Planning conducted significant AIP work in Y1 and accomplishments include:

- Extensive review of the East Side Community Plan was conducted, which is under development to incorporate age friendly policies. Numerous specific references were made to AIP in this planning document, which will guide future work.
- Extensive review of the Pedestrian Bicycle Mobility Plan was conducted, which is under development to incorporate age friendly policies. Numerous specific references were made to AIP in this document, which will guide future work.
- A “micro park” program was implemented that provided additional recreational space in the City. This includes new safe seating along sidewalks in two locations.
- Crosswalk improvements were planned and/or implemented at four sites in various locations.
- Neighborhood traffic calming improvements were installed based on an evaluation of needs, resulting in three traffic circles demonstrated to slow traffic and improve safety.

Challenges for Planning were that maintaining a balance for all road users can create tension between resident priorities. One such example is the need to slow traffic for pedestrian safety, and the need to maintain traffic flow for drivers. Similarly, requiring bicyclists to cycle only on the road is an improvement for pedestrian safety, but hinders bike safety. The City is making efforts to ensure that they hear the voices of those on all sides of these issues.

Plans for Years 2-5 are to:

- Review and enhance the public benefits framework, which identifies a menu of public benefit efforts developers can commit to when requesting a project be granted additional height or density. Including AIP concepts in the framework will lead to improvements for older adults.
- Implement the Pedestrian/Bicycle Mobility Plan which will include more crosswalk improvement and bike lanes.
- Continue neighborhood traffic calming improvements and expand as appropriate.

- Launch a “parklet” program for new gathering spaces along sidewalks by converting on-street parking spaces into small park space.
- Study Sunset Boulevard pedestrian spaces (seating, crosswalks, walkability issues for mobility challenges, opportunities for small parks, and more).
- Implement the Design District Streetscape Master Plan, which includes widening some sidewalks and creating additional gathering spaces.

Facilities

In the area of facilities, City staff are considering Aging in Place for all facilities projects on an ongoing basis. As a matter of routine, the City aligns any improvement to comply with ADA, but they are explicitly looking to move beyond that, especially as it relates to seating.

In Y1 of the Initiative, highlights include:

- Kings Road Park had a multi-purpose floor system installed that provides superior comfort and safety. They also installed a mix of chairs with and without arms, offering options for accessibility and support.
- New, firm furniture was installed in the City Hall Lobby, making it easier to get up.
- An expanded ADA area was added in the front of the City Council chambers to improve accessibility and civic participation.
- Upgraded Assisted Listening Devices were added in all facilities to include inductive loop devices for use with hearing aids.
- Chairs with arms have been provided in the Community Meeting Room at the Library for Public Meetings.

RESULTS SECTION 5: USE OF PROGRAMS, SATISFACTION, NEEDS

In order to begin to assess changes in use of programs, satisfaction with programs, and unmet needs (which will help with planning for Years 2-5 of the Initiative), several data sources were used. First, the surveys of older adults in 2016 and 2017 asked many questions about use of and satisfaction with services designed to support aging in place and the needs of older adults. These findings are presented here. Second, the focus groups held in 2016 with older adults explored these same issues, and the findings from these are discussed here. Third, a few interviews were conducted with older adults in West Hollywood in the summer of 2017, and those limited findings are discussed here. A larger interview and focus group effort is part of the evaluation plan for the upcoming year, including interviews with older adults who are engaged with specific programs and services and interviews with older adults who are currently not as engaged with services.

Data from Older Adult Surveys

A component of the surveys of older adults was an assessment of the degree to which older adults perceived that the programs and services provided by West Hollywood and the work of the AIP Initiative meets their needs, the degree to which they feel connected to community, and their perceived quality of life. By administering this survey annually for several years, the evaluation will explore changes in perceptions, and both met and unmet needs. The data will be used to track changes that occur during the Initiative's five years of work, and to explore whether there are correlations between the Initiative and these perceptions. Additionally, the data are being used by the Initiative to plan for areas of focus and activities in upcoming years.

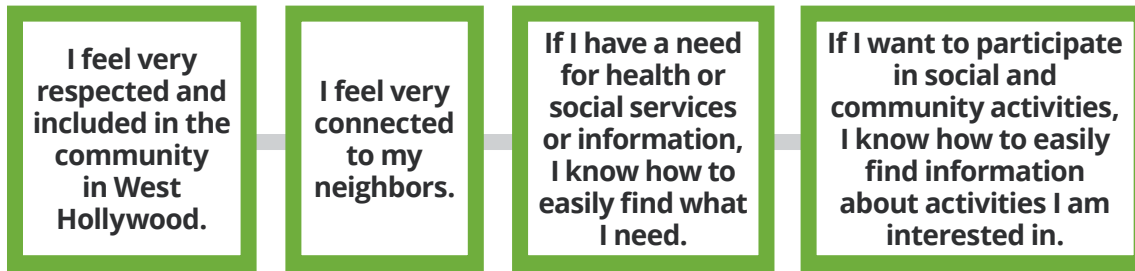
For this report, the evaluation examines data from the 2016 and 2017 administrations of the survey, and makes comparisons between years of data. Areas of change are highlighted, as are areas in which there may be opportunities for the Initiative to work to more effectively meet the needs of older adults.

In many areas of exploration, such as feeling connected with others and with transportation services, older adults report being highly satisfied with programs and services. In other areas, such as housing and safety, results suggest a need for continued efforts.



Connection with West Hollywood, with Neighbors, and with Services

There were four questions designed to measure the degree to which older adults feel connected to West Hollywood:



For each of these statements, agreement was high – with about $\frac{3}{4}$ of respondents agreeing or strongly agreeing with the statement. Additionally, agreement was higher in 2017 than in 2016, with the exception of the first statement, which was slightly lower in 2017.

Transportation

Older adults were asked about West Hollywood’s public transportation system. Most (77% in 2016 and 79% in 2017) agreed or strongly agreed that the “public transportation system is consistently very accessible and very easy to use”. A slightly lower percentage (68% in 2016 and 69% in 2017) agreed or strongly agreed that it “always has stops where I need them”.

Public Buildings and Open Spaces

Older adults were asked about West Hollywood’s open spaces, public spaces, and public buildings. A strong majority (85% in both 2016 and 2017) agreed or strongly agreed that “West Hollywood’s public buildings and public spaces are consistently very accessible”. About $\frac{3}{4}$ (78% in 2016 and 72% in 2017) agreed or strongly agreed that they “use West Hollywood’s open spaces regularly”.

Health Care

In terms of health care, a strong majority of respondents agreed or strongly agreed (84% in 2016 and 88% in 2017) that they “have a primary care doctor, or a regular source of health care services when I need them.” However, when asked to respond to the statement: “If I need home health services to help me recover from an illness, or personal care to help with chores that are too much for me lately, I know how to get them”, only 56% (in 2016) and 64% (in 2017) agreed or strongly agreed. Providing education to older adults about available home health services and how to access these services could be an area of additional focus for the Initiative in Years 2-5.

Food

Less than $\frac{3}{4}$ of respondents (69% in 2016 and 73% in 2017) agreed or strongly agreed that they are “able to afford and have easy access to healthy food”. Food security has not been a specific focus on the AIP Initiative in the first year, but the evaluation observed that there is an existing capacity of social services programs that do address food needs, including some City-funded programs which include congregate community meals and on-site meal distribution in HUD properties with older adult populations. There are also considerable case management and linkage efforts within several City programs that work to connect people with needed services. It may be important in the future for the Initiative to further explore the food security needs of its older adult residents, particularly in light of high housing costs that can cut into food budgets.

Providing education to older adults about available home health services and how to access these services could be an area of additional focus for the Initiative in Years 2-5.

Housing and Safety

When asked to respond to the statement: “I live in housing that is affordable and safe”, about 2/3 agreed or strongly agreed (67% in 2016 and 68% in 2017). This aligns with what was discussed in focus groups with older adults, in which housing concerns were a major topic of discussion. Interestingly, when City staff and members of West Hollywood Advisory Boards and Commissions were asked if they believe that “older adults are able to live in housing that is affordable and safe”, only about 1/3 of City staff agreed or strongly agreed, with West Hollywood Advisory Boards and Commissions members having even lower agreement (17% agreed or strongly agreed in 2017).

When asked about the safety of their neighborhood, only about 60% (in 2016) and an even smaller percentage in 2017 (55%) of older adult respondents reported that their neighborhood felt very safe or somewhat safe. When asked about the safety of West Hollywood in general, only about half (51% in both 2016 and 2017) felt West Hollywood was very safe or somewhat safe. It may be important to explore this finding in focus groups with older adults in the upcoming year, to find out what it is that feels unsafe, and whether there are things the City could do within the AIP Initiative to promote a greater sense of safety. Interestingly, both City staff and members of West Hollywood Advisory Boards and Commissions who responded to the survey had very different beliefs about how safe older adults perceive their neighborhoods and West Hollywood to be, with about ¾ of respondents saying they think older adults perceive their neighborhood and West Hollywood to be very safe or somewhat safe.

Helping Gene to Remain Independent

Gene has lived in West Hollywood for 36 years and loves that the city takes care of seniors in such an extraordinary way. He has never seen any place else like it. When Gene needed eyeglasses but could not afford them on his fixed income, he reached out, for the first time, to the social worker placed in his building through funding from the City. The social worker helped him navigate benefits he “never would have been able to figure out”, and he was able to obtain glasses. When his disabilities got more complex by a diabetes diagnoses, he stepped up his habits to better address his health. With the social worker’s help, a range of supports and benefits was set up for Gene to maintain his health and stay active. Most recently, the social worker helped him with his annual public housing recertification paperwork, which he had trouble figuring out. He says it is a good feeling to know that she is there because “otherwise, in an emergency, I wouldn’t know who to turn to”.

Quality of Life

Older adults were also asked, “How would you rate the overall quality of life in West Hollywood?”. Just under ¾ responded “excellent” or “very good” in both 2016 and 2017. This measure of quality of life will be an important one to continue to track over time, both at the community level and at the program level as the evaluation seeks to explore whether this changes over time and whether specific programs and services seem to have an impact on the quality of life of West Hollywood’s older adult residents.

Data from Focus Groups with Older Adults

A total of 17 older adults participated in three focus groups held in December 2016. Two of the focus groups were held in English, with 15 participants total. The third group was conducted in Russian and included two older adults. Each focus group was approximately 90 minutes long and covered multiple topics. The goals of the focus group were to begin to gather qualitative data from older adults about their experiences with the AIP Initiative, their thoughts on the progress being made by the Initiative in a number of areas, and to hear about continuing or new unmet needs. The focus group guide is provided as an appendix.

We began the focus groups by explaining what the Initiative is and what its goals are, and explaining the purposes of the focus group. We then explored the degree to which participants had heard the term “age-friendly city” and what that meant to them, and asked participants whether they thought West Hollywood was “age-friendly”. We asked what they think are the most important areas on which the Initiative should focus, what activities and services they engage in, what they (or other older adults) struggle with most, what would make their lives easier, how they access support and learn about what is happening in the community, what they know about the Initiative, and how the City could connect with people who don’t currently engage in programs or services but might need them.

Overall, West Hollywood is “pretty age-friendly”, but there is room to be more age-friendly.

Generally, focus group participants pointed to a number of things that they thought made West Hollywood age-friendly. These included great daily services at Plummer Park, a great library, excellent transportation services (especially the bus lines), and having people at the City, including staff, speak Russian to help that population of older adults. Additionally, older adults felt that something else that makes West Hollywood age-friendly is that it is a walkable city.

When asked what could make the City more age-friendly, focus group participants had many suggestions. These included five key areas:

- + Increasing awareness among all older adults (especially the most isolated and disconnected older adults) about programs and services that are available
- + Helping to prepare people for aging in advance
- + Developing more opportunities for neighbor-to-neighbor help/people helping people
- + Continuing to improve sidewalks to make the City even more walkable and safer
- + Continuing to address housing concerns

Feedback provided by the focus group participants in each of these areas is explained in more detail below.

1. There is a gap between older adults who know about programs and those who do not.

One critical finding from the focus groups was that there was a clear separation between people who know what City programs and services are available and how to access them, and people who do not know about programs and services and, therefore, are very disconnected and have high levels of unmet need. This was apparent throughout the focus groups, among the participants themselves and in terms of other people that participants know. For example, a focus group participant noted that they were really struggling with transportation problems, saying that the City's transportation services "do not stop where I need them to". Another focus group participant responded asking if the person knew about TLC that can arrange door to door pick ups. The participant who was struggling with transportation issues had never heard of this service. Similarly, when focus group participants mentioned friends and neighbors who were living alone unsafely or were extremely isolated, other focus group participants often responded by offering up services they knew about to meet these needs. One participant said that the "same 200 faces [are] involved in everything", suggesting that there may be a core group of people who are highly engaged, but that there may be a larger group of people who are much less engaged.

This dynamic seemed to suggest that some level of older adults' unmet needs in the community may be best met by finding innovative ways to get the right information about existing programs and services to people who do not know about them, and then assessing whether the right programs and services exist to meet their needs. When asked how they thought the City could get information out to people who currently do not know about services (i.e., the most isolated and disconnected people), participants did not have suggestions. However, the discussions around implementing more "neighbor to neighbor" helping programs could be useful in this context as that type of program may be an effective mechanism for informing the most disconnected people about programs and services that are available.

2. There is a lack of awareness of services until they are needed.

Another theme that emerged from the focus groups was the belief that many people do not explore what services are available until they find themselves in the position of needing them, and that this is very true for older adults. Participants noted that they didn't consider themselves to be "older" and did not pay attention to what was available until they found themselves needing something, and at that point it is hard to explore what is available and navigate the systems in order to be able to access what they need. A suggestion that emerged from this conversation is that it might be helpful to provide training or education to people about what is available before they need it.

3. It may be helpful to develop more ways for neighbors to help neighbors.

A key suggestion that came out of the focus groups was that of developing more opportunities for neighbors to help neighbors, or “people helping people”. The idea behind this is that sometimes older adults may be wary of allowing staff from the City or nonprofit organizations into their homes and lives, but they may be more welcoming of help, connections to services, or information about programs and services that are available if these are coming from a neighbor or friend in a less formal capacity. Participants suggested that Home Owners Association leaders could be trained in how to informally “check on” residents and provide them with information about services they might need. Another suggestion was that, in many condominium complexes, there are “condo cops” – people who are very aware of what is happening in the complex and are interested in making sure everything is going well. The suggestion was that some of these individuals may be great candidates for becoming “condo helpers”, keeping an eye out for people who may need some help, and connecting those people with programs and services. Many focus group participants noted that some of the things they struggle with, or have seen other older adults struggle with, are isolation, fear of losing the ability to get out into the community, and possibly not being safe within their own home (i.e., because of losing the ability to cook safely), and that a “neighbors helping neighbors” program or training could help with these issues.

4. Sidewalks continue to need more improvement.

In the focus groups, several participants noted that, while West Hollywood is a walkable City, some sidewalks continue to need improvement. The improvements suggested ranged from uneven and buckled sidewalks that are hard for older adults to see to problems with bicycles and skateboarders on the sidewalks. Others noted areas in which lighting on the sidewalks is poor, per the discussion at the focus group.

It is important to note that in discussions on the same topic with City staff, key division leaders stated that the older City infrastructure, such as the sidewalks, were constructed pre-cityhood. As it is possible, the City updates the older sidewalk infrastructure by widening sidewalk access. Also, as cited in the AIP Strategic Plan, older adults live in a city with some steep topography.

5. Housing continues to be a very big concern.

Finally, the issue of housing came up repeatedly in focus groups. Older adults expressed concerns that development and increasing rents and taxes are going to push them out of their homes. Some were concerned about the safety of their home, condo or apartment, while others were concerned about their ability to continue to manage being in their home as their mobility declines. Participants noted that this is a large and complex issue, and an issue of growing concern for them.

Next Steps

The evaluation will reach out to these focus group participants to conduct another round of focus groups with them, likely in the winter of 2018, to explore whether they have seen any changes in the City's programs and services, and other activities related to the Initiative. Additional focus groups will be held with older adults who were not participants in the first round of focus groups. For at least two of these focus groups, the evaluation will work to recruit people who have very limited engagement with City programs and services, to explore some of the dynamics that were uncovered in the first round of focus groups.

RESULTS SECTION 6: SUSTAINABILITY

To ensure sustainability of the Initiative in Years 2-5, the City has implemented several key steps.

First, as discussed previously, the City has incorporated requirements in its social services Request for Proposal that organizations specifically work to meet the needs of older adults in their programs and services. This ensures ongoing attention to the needs of older adults within these funded projects for the next three years of this funding cycle. Additionally, it is anticipated that this requirement will be in the next round of social service funding (in 2019) and that it will be incorporated into other City RFPs and contracts as those renew.

Second, the City has successfully extended additional requests to 20+ City-funded social service agency programs for their partnership to distribute older adult surveys on their experiences with the age-friendliness of West Hollywood. This effort will provide data to ensure that contracted organizations are collecting data that will inform the evaluation of the Initiative in upcoming years and, equally importantly, that organizations are collecting data that will inform their own success and challenges in meeting the needs of older adults they serve.

Third, the Initiative has developed a detailed implementation plan that extends through Years 2-5. This Implementation plan was created in collaboration and with the support of City staff, which has served to increase the awareness and buy-in of City staff for the Initiative. This buy-in will continue to be leveraged in upcoming years by providing staff with ongoing communication about the goals, successes, and challenges of the Initiative, and opportunities for staff to continue to engage with the Initiative by holding cross department meetings and briefings about the Initiative, supporting increased collaboration between different program areas, and sharing evaluation findings across the City staff.

ADDITIONAL RESULTS: A NOTE ON PROGRESS TOWARD COLLECTIVE IMPACT GOALS

Among the key activities in this first year of the project is work to advance the collective impact framework and strategy of the project, including strengthening and solidifying the role of the City as the “backbone” organization of the AIP Initiative, improving communication between agencies across the City, moving toward a shared vision for West Hollywood as an age-friendly city, and moving toward shared measurement of progress toward becoming age-friendly.

To that end, this report has highlighted many of the successes in the first year of work. Awareness of the Initiative and the City’s role in it have increased across the board. Discussions among and between City staff and members of West Hollywood Advisory Boards and Commissions have increased. Early indications are that there is increased awareness of how each type of programming across the City contributes to the overall goals of moving West Hollywood toward being more age-friendly.

The City as the backbone organization seems to be functioning well, with good progress on the implementation plan, evidence of strong communication by the backbone organization to partners, and a growing sense of collaboration across City staff and members of West Hollywood Advisory Boards and Commissions.

The responsiveness to new City-initiated requirements – that organizations be more attentive to the needs of older adults – of nonprofit organizations that submitted proposals to the City in response to the Social Services RFP in 2016 demonstrates a growing sense for a shared vision for how programs and services can be supportive of and responsive to these needs.

Importantly, the implementation of a new data collection requirement in City contracts shows progress toward shared measurement.

The work of Years 2-5 will be to continue to strengthen the Initiative in these areas and move more organizations toward even more concrete changes in how they serve older adults.



EVALUATION PLAN FOR YEARS 2 AND BEYOND

Additionally, in Years 2-5, the Initiative will need to continue to build awareness of the Initiative, but also begin to move more programs to address the needs of older adults. This will begin with using new data the City is collecting to help hone in more closely on the what the needs of older adults are, and how best to meet these needs.

As the Initiative evolves and grows in Years 2-5, the evaluation will continue to collect some of the same data, but will add new data collection efforts to mirror the expanding work of the Initiative, and capture additional accomplishments, challenges, and lessons learned.

Specifically, the evaluation will implement the following:

1. Continued tracking of activities and progress made on the implementation plan
2. Older adult surveys in May 2018, 2019, 2020, 2021
3. Surveys of City staff in May 2018, 2019, 2020, 2021
4. Surveys of members of West Hollywood Advisory Boards and Commissions in May 2018, 2019, 2020, 2021
5. Interviews with a bigger group of older adults in 2018 and 2020
6. Analyses of data generated from new evaluation requirements in City contracts
7. Analyses of additional measures to be collected by new and expanded programs in Years 2 and beyond
8. Close tracking and analyses of process and outcome measures within several key programs across program areas, in alignment with priorities in the implementation plan
9. Analyses of community level measures in Years 3-5

These data collection methods and analyses will allow for continued and expanded evaluation of the Initiative, resulting in annual reports and a final report that will assess outcomes across the five years.

APPENDIX A: IMPLEMENTATION PLAN—See Separate Document

Appendix B:
Analysis of Baseline and End of Year 1 Survey
of City Staff, West Hollywood Boards and Commissions
Members, and Older Adults in West Hollywood
2016-2017

PREPARED FOR:
THE CITY OF WEST HOLLYWOOD

BY
HEALTH MANAGEMENT ASSOCIATES COMMUNITY STRATEGIES

SEPTEMBER 2017

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Background and Purpose of the Surveys

This report provides a detailed description of the findings from the baseline surveys implemented in Summer and Fall of 2016, and again in the Summer of 2017. The surveys are intended to provide community-level measures of awareness of age-friendliness and of the Aging in Place Initiative (the “Initiative”), the needs of older adults, and older adults’ experiences with West Hollywood and how these experiences and perceptions change over time with the implementation of the Initiative. The surveys are designed to capture a baseline measure from older adults, members of West Hollywood Boards and Commissions, and City staff of their awareness of age-friendliness, awareness of the initiative, the needs of older adults, and older adults’ experiences with West Hollywood.

Survey Development and Methods

HMA Community Strategies (HMACS) developed and disseminated three surveys for the City, including a survey of older adults, administered at the annual Senior Health Fair and in the community, a survey of City staff, and a survey of members of West Hollywood Boards and Commissions. All of the surveys were developed in alignment with and with input from several resources. First, they were developed with input from City staff and leadership about their perceptions of the potential impact of the City’s programs and services. Second, they were constructed in alignment with constructs from the World Health Organization’s eight domains of age friendliness. Third, they were constructed to leverage, where possible, survey questions that have been used in previous City efforts. Survey items were designed to be reliable, valid, and focused on areas on which the City’s efforts are likely to have an impact.

For the survey of older adults in the community, a sampling strategy was developed to ensure representation from a diverse sample of the City’s older adult population, and to allow for comparisons over time. In addition, residents were asked if they would be willing to share their names and contact information for inclusion in a pre/post matched survey effort, as well as in-depth interviews with a sample of survey respondents. In upcoming years, HMACS will leverage the resident survey by implementing it annually and contacting the sub-sample of respondents who provided contact information to match their responses from year to year. Interviews will be conducted annually as well, with a subset of these respondents. Data will be used to measure the collective impact of City efforts, awareness of the Aging in Place initiative, and to support course corrections.

For the City staff survey, an implementation strategy was designed to support a high response rate from City staff. Data will be used to measure the degree to which Aging in Place concepts are being integrated into day to day City processes, which is another domain of measurement for the collective impact evaluation – to what degree Aging in Place concepts are the lens

through which day to day work is conducted. The survey also explores the extent to which city staff perceive they have the capacity to increase the age-friendliness of West Hollywood. The city staff survey was disseminated via Survey Monkey in June of 2016 and again in June 2017. The West Hollywood Boards and Commissions survey was administered in the Fall of 2016 and again in the Summer of 2017.

Two additional surveys – one for city council members and one for members of the chamber of commerce – were developed using the same methodologies, and will be implemented in the future. Sampling strategies, longitudinal use of the surveys, and use of the data will likely be similar to that described for the city staff surveys.

Demographics

A total of 106 city staff responded to the baseline survey in 2016, and 84 responded in 2017. The city staff respondents were predominately Anglo/White/Caucasian and heterosexual. The average age range was 35-44 years old, and more respondents were female than male. Most respondents had a college or graduate degree, and the majority do not live in West Hollywood.

A total of 159 older adults and/or community members responded to the resident baseline survey in 2016, and 264 responded in 2017. The respondents were predominantly Anglo/White/Caucasian and over the age of 55. Respondents have lived in West Hollywood for an average of 18.6 and 18.4 years, respectively. The majority of respondents had college or graduate level degrees in 2016. In 2017, most respondents reported having some college or more, and current household incomes of less than \$24,999.

A total of 35 West Hollywood Boards and Commissions members responded to the baseline survey in 2016, and 22 responded in 2017. Most respondents were 55-80 in 2016, and 25-54 in 2017. Approximately half of the respondents had a graduate level education. The respondents were predominately Anglo/White/Caucasian, and the majority live in West Hollywood.

City Staff Respondents

In 2016, 106 city staff responded to the baseline survey. Just over half of the respondents were female (55.81% or 48). One individual was transgender. Most respondents were in the age group 35-44 (30.12% or 25), followed by 55-64 (22.8% or 19), 45-54 (21.69% or 18), and 25-34 (20.48% or 17). There were three respondents (3.61%) in age group 18-24 and one (1.2%) respondent age 65-80.

In 2017, 84 city staff responded to the baseline survey. Just over half (50.6%) of respondents identified as female (39), 49.4% identified as male (38), and one respondent identified as transgender. Most respondents were in the age group 35-44 (30.7% or 23), followed by 45-54 (26.7% or 20), 55-64 (21.3% or 16), and 25-34 (17.3% or 13). Two respondents were in the 18-24 age group (2.7%), and one respondent was 65-80 (1.3%).

September 2017

HMA Community Strategies

Table 1 Respondents by Age Group

Age	2016		2017		Change
	Count	Percent	Count	Percent	
18-24 years	3	3.6%	2	2.4%	-1.2%
25-34 years	17	20.5%	13	15.5%	-5.0%
35-44 years	25	30.1%	23	27.4%	-2.7%
45-54 years	18	21.7%	20	23.8%	2.1%
55-64 years	19	22.9%	16	19.0%	-3.9%
65-80 years	1	1.2%	1	1.2%	No change
80+ years	0	0.0%	0	0.0%	No change
Total Responses	83	100.0%	75	100.0%	
No Response	23		9		

In 2016, nearly half (47.06% or 40) of respondents had a graduate-level education, followed by a four-year college degree (27.06% or 23), and some college (25.88% or 22). As shown in Table 2, the diversity of the respondents was largely Anglo/White/Caucasian (58.75% of 47). 11.25% (9) of respondents were African-American, 6.25% (5) were Asian or Pacific Islander. Eleven (13.75%) respondents identified as Latino/Latina. In 2017, more than half (51.3% or 39) of respondents had a graduate-level education, followed by some college (28.9% or 22), and a four-year college degree (19.7% or 15). As shown in Table 2, the diversity of the respondents was largely Anglo/White/Caucasian (49.4% or 38). A total of 20.8% (16) respondents identified as Latino/Latina, 13.0% (10) identified as African American, and 9.1% (7) identified as Asian or Pacific Islander.

Table 2 Race/Ethnicity of respondents

Race/Ethnicity	2016		2017		Change
	Count	Percent	Count	Percent	
Anglo/White/Caucasian	47	58.8%	38	49.4%	-9.4%
Latino/Latina	11	13.8%	16	20.8%	7.0%
African-American	9	11.3%	10	13.0%	1.7%
Asian or Pacific Islander	5	6.3%	7	9.1%	2.8%
Other	4	5.0%	0	0.0%	-5.0%
Anglo/White/Caucasian; Asian or Pacific Islander	1	1.3%	0	0.0%	-1.3%
Anglo/White/Caucasian; Native American	1	1.3%	0	0.0%	-1.3%
Anglo/White/Caucasian; Other	1	1.3%	2	2.6%	1.3%

Asian or Pacific Islander; Other	1	1.3%	0	0.0%	-1.3%
Latino/Latina; Native American	0	0.0%	1	1.3%	1.3%
Anglo/White/Caucasian; Latino/Latina; Native American	0	0.0%	1	1.3%	1.3%
Total Responses	80	100.0%	77	100.0%	
No Response	26		7		

In 2016, half (50.67% or 38) of the respondents reported that they were heterosexual, followed by gay male (29.33% or 22), lesbian (14.67% or 11) and bisexual (5.33% or 4). As shown in Table 3, the majority of respondents had household incomes over \$100,000. More than one-third (35.8% or 29) of respondents reported an income of \$150,000 or more, followed by 32.1% (26) reporting an income of \$100,000-149,000. In 2017, more than half of the respondents identified as heterosexual (56.7% or 38), followed by gay male (29.9% or 20), lesbian (11.9% or 8), and bisexual (1.5% or 1).

In 2016, about one quarter (23.26% or 20) of respondents were residents of West Hollywood, with 12 respondents living in West Hollywood for more than 10 years. Four people have lived in West Hollywood for 25 years. Generally, respondents lived in many different zip codes, with 18.75% (12) living in zip code 90046 and 17.19% (11) living in zip code 90069. The majority (86.75% or 72) of respondents are not immigrants and report English as their first language (93.1% or 81). Four respondents spoke Spanish (4.6%) and two (2.3%) respondents spoke Russian.

In 2017, approximately one quarter (23.8% or 19) of respondents were West Hollywood residents. The average time respondents reported living in West Hollywood was 11 years, with a maximum of 26 years. Generally, respondents lived in many different zip codes, with 18.0% (9) living in zip code 90069 and 16.0% (8) living in zip code 90046. A majority (88.0% or 66) of respondents did not immigrate to the United States and identified English as their primary language (92.1% or 70). Three respondents identified Spanish as their primary language (3.9%), and three spoke Russian (3.9%).

Older Adults Respondents

In 2016, a total of 159 older adults participating in community events throughout West Hollywood responded to the survey. On average, respondents have lived in West Hollywood for 18.6 years, with a range of one year to 56 years, living "between Crescent Heights Boulevard and La Brea Avenue" (44.9% or 58), followed by "West of La Cienega" (32.6% or 42), and "between La Cienega Boulevard and Crescent Heights Boulevard" (22.5% or 29). Half of the respondents lived in the zip code 90046 (50.4% or 69), followed by zip 90069 (36.5% or 50). More than half (57% or 84) identified as female, followed by 43% (64) who identified as male

and one who identified as transgender. A total of 62.5% (65) reported being heterosexual, followed by 30.8% (32) reported being a gay male. Four individuals (3.9%) were bisexual and 2.9% (3) were lesbian. Over half of the respondents (22.9% or 34) were 56 to 80 years old, followed by 22.9% (34) who were 80 years or older.

In 2017, 264 older adults participating in community events and engaging with various social service organizations throughout West Hollywood responded to the survey. On average, respondents have lived in West Hollywood for 18.4 years, with a range of one year to 56 years, living "between Crescent Heights Boulevard and La Brea Avenue" (53.0% or 107), followed by "West of La Cienega" (26.2% or 53), and "between La Cienega Boulevard and Crescent Heights Boulevard" (20.8% or 42). More than half of the respondents lived in the zip code 90046 (62.9% or 134), followed by zip 90069 (22.1% or 47). Almost two-thirds (64% or 153) identified as female and 36% (86) identified as male. Three respondents (1.3%) identified as transgender. A total of 70.9% (107) of respondents identified as heterosexual, followed by gay male (22.5% or 34), bisexual (4.0% or 6), and lesbian (2.6% or 4). Half of the respondents (50.2% or 120) were among the 65-80 age group, followed by the 80+ age group (22.2% or 53).

Table 3 Respondents by Age Group

Age	2016		2017		Change
	Count	Percent	Count	Percent	
18-24 years	1	0.7%	0	0.0%	-0.7%
25-34 years	2	1.4%	1	0.4%	-1.0%
35-44 years	5	3.4%	11	4.6%	1.2%
45-54 years	12	8.1%	16	6.7%	-1.4%
55-64 years	16	10.8%	38	15.9%	5.1%
65-80 years	78	52.7%	120	50.2%	-2.5%
80+ years	34	22.9%	53	22.2%	-0.7%
Total Responses	148	100.0%	239	100.0%	
No Response	11		25		

In 2016, as shown in Table 4, over half (58.4% or 83) had a college degree (21.8% or 31) or higher (36.6% or 52), followed by "some college" (33.3% or 43). Out of the 128 individuals who responded to the question about household income, nearly two-thirds (63.1% or 82) reported having a household income less than \$24,999, as shown in Table 5.

In 2017, 31.4% of respondents (71) had "some college" education. A total of 28.8% (38) had graduate school education, followed by 20.4% (46) who had a 4-year college degree. Of the

221 individuals who responded about their household income, 71.5% (158) reported making less than \$24,999 per year, as shown in Table 5.

Table 3 Respondents by Level of Education (2016 n=142; 2017 n=226)

Level of Education	2016		2017		Change
	Count	Percent	Count	Percent	
Less than 12 years	4	2.8%	14	6.2%	3.4%
Completed High School	12	8.5%	30	13.3%	4.8%
Some College	43	30.3%	71	31.4%	1.1%
Four Year College Degree	31	21.8%	46	20.4%	-1.4%
Graduate School	52	36.6%	65	28.8%	-7.8%
Total Responses	142	100.0%	226	100.0%	
No Response	17		38		

Table 4 Respondent by Household Income (2016 n=128; 2017 n=221)

Household Income	2016		2017		Change
	Count	Percent	Count	Percent	
Less than \$10,000 a year	36	27.7%	46	20.8%	-6.9%
\$10,000-\$14,999	21	16.2%	63	28.5%	12.3%
\$15,000-\$24,999	25	19.2%	49	22.2%	3.0%
\$25,000-\$34,999	13	10.0%	16	7.2%	-2.8%
\$35,000-\$49,999	17	13.1%	16	7.2%	-5.9%
\$50,000-\$74,999	7	5.4%	12	5.4%	No change
\$75,000-\$99,999	3	2.3%	5	2.3%	No change
\$100,000-\$149,999	3	3.1%	8	3.6%	0.5%
\$150,000 or more	3	3.1%	6	2.7%	-0.4%
Total Responses	128	100.0%	221	100.0%	
No Response	31		43		

In 2016, as shown in Table 6, respondents were largely Angle/White/Caucasian (83.6% or 122). Just 3.4% (5) were African-American, with another 3.4% (5) identified as Asian or Pacific Islander. Four (2.7%) respondents identified as Latino/Latina. Nearly half (43.2% or 63) had immigrated to the United States, with just under one-third of respondents speaking primarily Russian (30.6% or 45), as shown in Table 7. Nearly all (95.3% or 151) were citizens, with 4.1% (6) reporting they were not citizens.

In 2017, respondents were largely Angle/White/Caucasian (75.7% or 178). A total of 11.5% of respondents (27) identified as Latino/Latina, followed by Other (4.7% or 11), Asian or Pacific Islander (4.3% or 10), and African-American (3.0% or 7). A total of 60.5% of respondents (136)

reported having immigrated to the United States; and 38.4% (86) identified Russian as their primary language (Table 7). Further, 92.5% of respondents (210) reported being US citizens.

Table 5 Respondents by Race/Ethnicity

Race/Ethnicity	2016		2017		Change
	Count	Percent	Count	Percent	
African-American	5	3.4%	7	3.0%	-0.4%
Latino/Latina	4	2.7%	27	11.5%	8.8%
Asian or Pacific Islander	5	3.4%	10	4.3%	0.9%
Anglo/White/Caucasian	122	83.6%	178	75.7%	-7.9%
Native American	1	0.7%	2	0.9%	0.2%
Other	9	6.2%	11	4.7%	-1.5%
Total Responses	146	100.0%	235	100.0%	
No Response	13		29		

Table 6 Respondents by Primary Language

Primary Language	2016		2017		Change
	Count	Percent	Count	Percent	
English	98	66.7%	115	51.3%	-15.4%
Russian	45	30.6%	86	38.4%	7.8%
Other	4	2.7%	23	10.3%	7.6%
Total Responses	147	100.0%	224	100.0%	
No Response	12		40		

Respondents were also asked about any health issues, as shown in Table 8. In 2016, about one-quarter of respondents reported living with AIDS/HIV, a mobility impairment, a learning disability, or a medical disability, and 40% reporting having a hearing or sight impairment. In 2017, those percentages changed somewhat, with a lower percentage reporting living with AIDS/HIV and a higher percentage reporting having a mobility impairment or medical disability.

Table 7 Respondent reported health issues

Reported Health Issues	2016		2017		Change
	Count	Percent	Count	Percent	
AIDS/HIV	18	22.2%	16	12.8%	-9.4%
Hearing or sight impairment	32	39.5%	45	36.0%	-3.5%
Mobility impairment	22	27.2%	47	37.6%	10.4%
Learning disability	17	21.0%	31	24.8%	3.8%
Development disability	2	2.5%	2	1.6%	-0.9%
Mental or emotional disability	9	11.1%	22	17.6%	6.5%

Medical disability	20	24.7%	43	34.4%	9.7%
Total individuals with at least one health issue	81		125		

In 2016, as shown in Table 9, nearly two-thirds (64.8% or 94) of respondents reported living in an apartment or duplex, followed by 13.1% (19) living in a condominium, 9.7% (14) in retirement home/grouping living quarters, and 8.3% (12) living in a single-family home. 45.3% (63) reported renting their residency with no housing subsidy, followed by 31.7% (44) renting under a government housing subsidy or low-income program, and 17.9% (25) who own their own residence or share ownership.

In 2017, almost half of the respondents (49.1% or 109) reported living in an apartment or duplex, followed by 14.0% (31) living in both a retirement or group living quarters, or other. 12.6% (28) reported living in a condominium, and 10.4% (23) live in single-family homes. 44.7% (97) reported renting their residency under a government housing subsidy or low-income program, followed by 31.8% (69) renting with no subsidy, and 17.5% (38) who own their own residence or share ownership.

Table 8 Respondents by Housing Type

Housing Type	2016		2017		Change
	Count	Percent	Count	Percent	
Apartment or duplex	94	64.8%	109	49.1%	-15.7%
Condominium	19	13.1%	28	12.6%	-0.5%
Single family home	12	8.3%	23	10.4%	2.1%
Retirement home/group living quarters	14	9.7%	31	14.0%	4.3%
Other	6	4.1%	31	14.0%	9.9%
Total Responses	145	100.0%	222	100.0%	
No Response	14		42		

West Hollywood Boards and Commissions Respondents

In 2016, 35 West Hollywood Boards and Commissions members responded to the baseline survey. Just over half of the respondents were male (56.3% or 18). Most respondents were in the age group 65-80 (31.0% or 9), followed by 55-64 (24.1% or 7), 45-54 (20.7% or 6), and 35-44 (13.8% or 4). Three respondents were 25-34 (10.3%).

In 2017, 22 West Hollywood Boards and Commissions members responded to the survey. Half of the respondents were female (50.0% or 8). One individual identified as transgender. Most respondents were in the age group 35-44 (25.0% or 4), followed by three individuals each in the age groups 25-34, 45-54, and 65-80 (18.8%). Two respondents were 55-64 (12.5%), and one was 81+ (6.3%).

Table 10 Respondents by Age Group

Age	2016		2017		Change
	Count	Percent	Count	Percent	
18-24 years	0	0.0%	0	0.0%	No change
25-34 years	3	10.3%	3	18.8%	8.5%
35-44 years	4	13.8%	4	25.0%	11.2%
45-54 years	6	20.7%	3	18.8%	-1.9%
55-64 years	7	24.1%	2	12.5%	-11.6%
65-80 years	9	31.0%	3	18.8%	-12.2%
80+ years	0	0.0%	1	6.3%	6.3%
Total Responses	29	100.0%	16	100.0%	
No Response	6		6		

In 2016, over half (59.4% or 19) of respondents had a graduate-level education, followed by some college (25.0% or 8), and a four-year college degree (15.6% or 5). As shown in Table 11, respondents were largely Anglo/White/Caucasian (86.7% or 26). Two respondents identified as mixed-raced (6.7%).

In 2017, just under half (47.1% or 8) of respondents had a graduate-level education, followed by some college (35.3% or 6), and a four-year college degree (17.6% or 3). As shown in Table 11, respondents were largely Anglo/White/Caucasian (87.5% or 14). Two respondents were Latino/Latina (12.5%).

Table 11 Race/Ethnicity of respondents

Race/Ethnicity	2016		2017		Change
	Count	Percent	Count	Percent	
Anglo/White/Caucasian	26	86.7%	14	87.5%	0.8%
Latino/Latina	1	3.3%	2	12.5%	9.2%
African-American	0	0.0%	0	0.0%	No change
Asian or Pacific Islander	0	0.0%	0	0.0%	No change
Native American	1	3.3%	0	0.0%	3.3%
Other	0	0.0%	0	0.0%	No change

Anglo/White/Caucasian; Asian or Pacific Islander	1	3.3%	0	0.0%	-3.3%
Anglo/White/Caucasian; Latino/Latina	1	3.3%	0	0.0%	-3.3%
Total Responses	30	100.0%	16	100.0%	
No Response	5		6		

In 2016, over half of the respondents identified as gay males (51.7% or 15), followed by heterosexuals (37.9% or 11). One respondent each identified as fluid (3.4%), bisexual (3.4%), and lesbian (3.4%). In 2017, nearly half of the respondents identified as heterosexual (43.8% or 7), followed by gay males (31.3% or 5). Two respondents identified as lesbian (12.5%), and two as bisexual (12.5%).

In 2016, 97.0% of respondents were residents of West Hollywood (32), with 24 respondents living in West Hollywood for more than 10 years. Eight respondents have lived in West Hollywood for 25+ years. A majority (89.7% or 26) of respondents were not immigrants and spoke English as their primary language (96.8% or 30). One respondent identified Russian as their primary language (3.2%).

In 2017, 88.2% of respondents were residents of West Hollywood (15), with 10 respondents living in West Hollywood for more than 10 years. Five respondents have lived in West Hollywood for 25+ years. A majority (88.2% or 15) of respondents were not immigrants and spoke English as their primary language (94.1% or 16). One respondent identified Spanish as their primary language (5.9%).

Summary of Findings

Awareness and Discussion of West Hollywood’s AIP Initiative and AIP Concepts

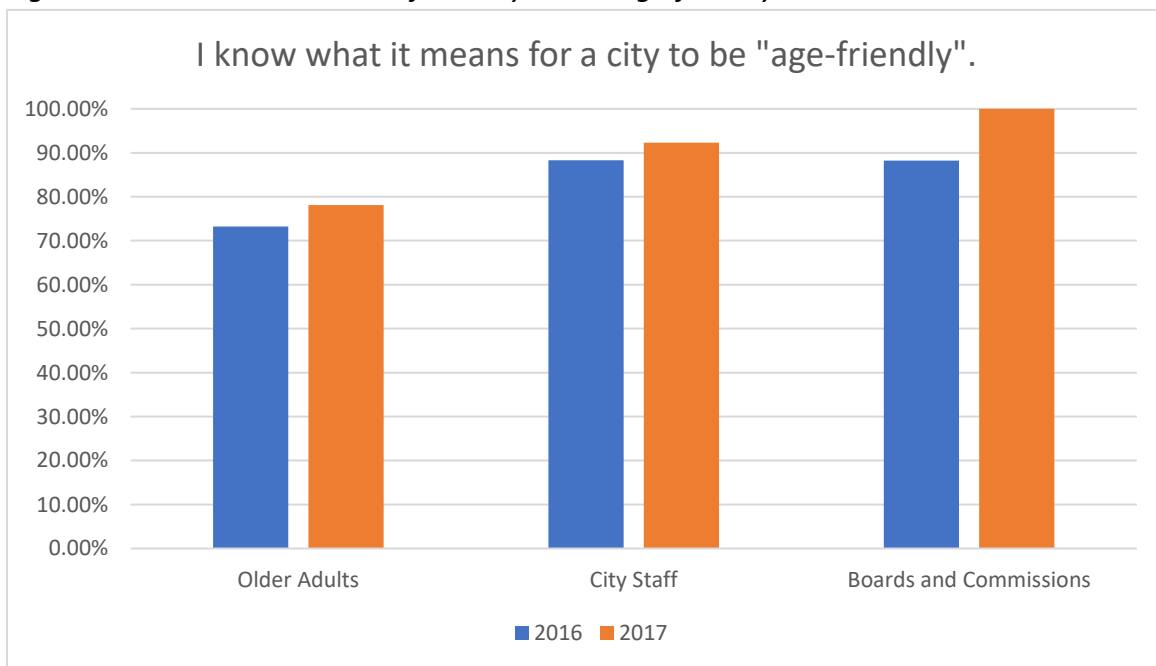
The surveys of older adults, City staff, and members of West Hollywood Boards and Commissions all asked respondents to state their level of agreement or disagreement with multiple statements designed to understand the degree to which these groups of people had heard of Aging in Place concepts, and the AIP Initiative in West Hollywood, and whether awareness seems to be growing as a result of the work of the Initiative. These included the following:

- I know what it means for a city to be “age-friendly”.
- I understand the concept of “age-friendly” as it applies to a city.
- I have noticed changes in the awareness about age-friendly concepts among residents (not among city employees).

- I have noticed changes in the awareness about age-friendly concepts within and among city employees.

Awareness of the AIP Initiative is high and growing. Among older adults, the percentage of adults who reported knowing the concept “age-friendly” and knowing what it means for a city to be “age-friendly” is high, and grew from 2016 to 2017. Among City staff and members of West Hollywood Boards and Commissions, most staff reported that they are familiar with the concepts of age-friendliness, they understand how age-friendly concepts apply to the City, and they know what it means for a city to be age-friendly. The percentages who reported this familiarity and understanding in 2017 was higher than in 2016.

Figure 1: I know what it means for a city to be “age-friendly”.



Additionally, the City staff surveys and the surveys of members of West Hollywood Boards and Commissions asked about the degree to which respondents noticed changes in the level of discussion about age-friendliness in their work for and with the City. These included questions about the degree to which age-friendliness is a regular part of meeting agendas and planning processes, the degree to which age-friendly concepts come up in meetings, are talked about among team members, and the degree to which incorporating age-friendly concepts is discussed at work and within the work of West Hollywood Boards and Commissions.

From 2016 to 2017, the percentage of respondents who agreed or strongly agreed with these statements went up, sometimes dramatically, with very few exceptions. These responses

demonstrate the effect the Initiative has had on the incorporation of AIP concepts into the day-to-day conversations happening within the City’s work, both at the staff level and at the level of West Hollywood Boards and Commissions. See Table 12 below for additional details.

Table 12 Incorporation of age-friendly concepts into discussions and planning

Question	City Staff 2016	City Staff 2017	Change	West Hollywood Boards and Commissions Members 2016	West Hollywood Boards and Commissions Members 2017	Change
Percent Agree or Strongly Agree						
Concepts related to age-friendliness come up regularly in conversations among City staff/ West Hollywood Boards and Commissions members.	47.10%	50.00%	2.90%	51.40%	66.70%	15.30%
Concepts related to age-friendliness come up regularly in meetings.	40.60%	46.40%	5.80%	54.30%	65.00%	10.70%
Concepts related to age-friendliness are a regular part of meeting agendas and planning processes.	26.50%	38.10%	11.60%	42.90%	52.40%	9.50%
I talk with my team about the importance of incorporating age-friendly concepts into our work.	38.80%	49.40%	10.60%	n/a	n/a	n/a

Perceived Ability/Intent to Incorporate AIP into Work/Programs/Services

Beyond building awareness and understanding of the concepts of age-friendliness, another step in moving the City toward being age-friendly is helping City staff and City leaders understand how they can contribute to making West Hollywood more age-friendly, believe that their work can move the City in that direction, and support their intentions to do so. To assess progress on this goal, the City staff surveys and the West Hollywood Boards and Commissions surveys in 2016 and 2017 asked for responses to several statements. City staff reported high and growing levels of agreement with the following statements:

- I believe it is possible to change a city to make it more age-friendly (90% agreed or strongly agreed in 2016, with 96% in 2017).

- I know how my work can contribute to making West Hollywood more age-friendly (68% agreed or strongly agreed in 2016, with 80% in 2017).

The same is true of members of West Hollywood Boards and Commissions who responded to the surveys. Members of West Hollywood Boards and Commissions had very high levels of agreement with the statements above (from 94% agreement in 2016 to 100% agreement in 2017 with the first statement, and from 80% agreement in 2016 to 91% agreement in 2017 with the second statement), suggesting that these key community leaders were also certain of ways that their work could have an impact on the goals of making West Hollywood as age-friendly as possible.

Figure 2: I believe it is possible to change a city to make it more age-friendly.

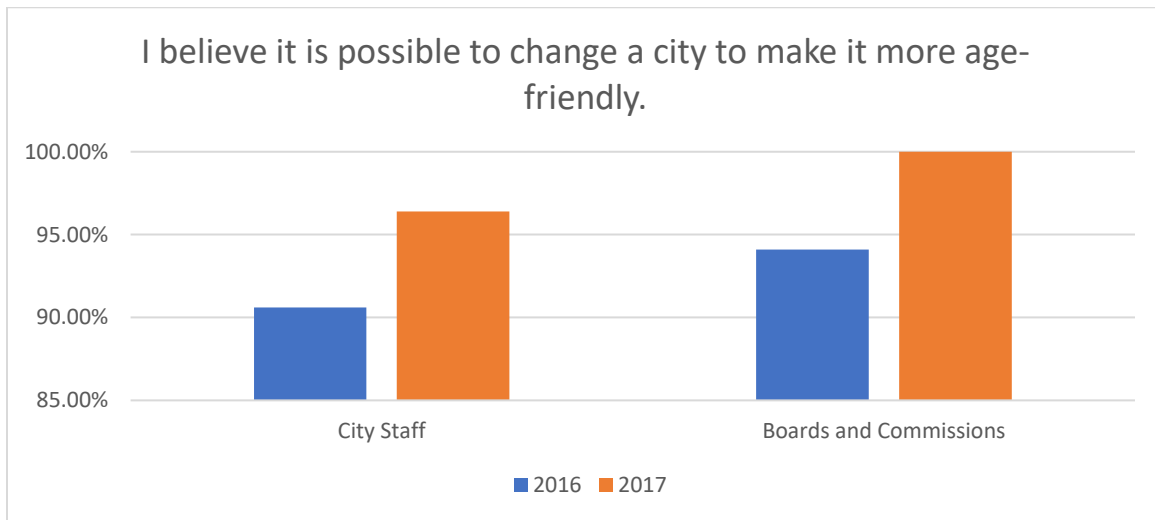
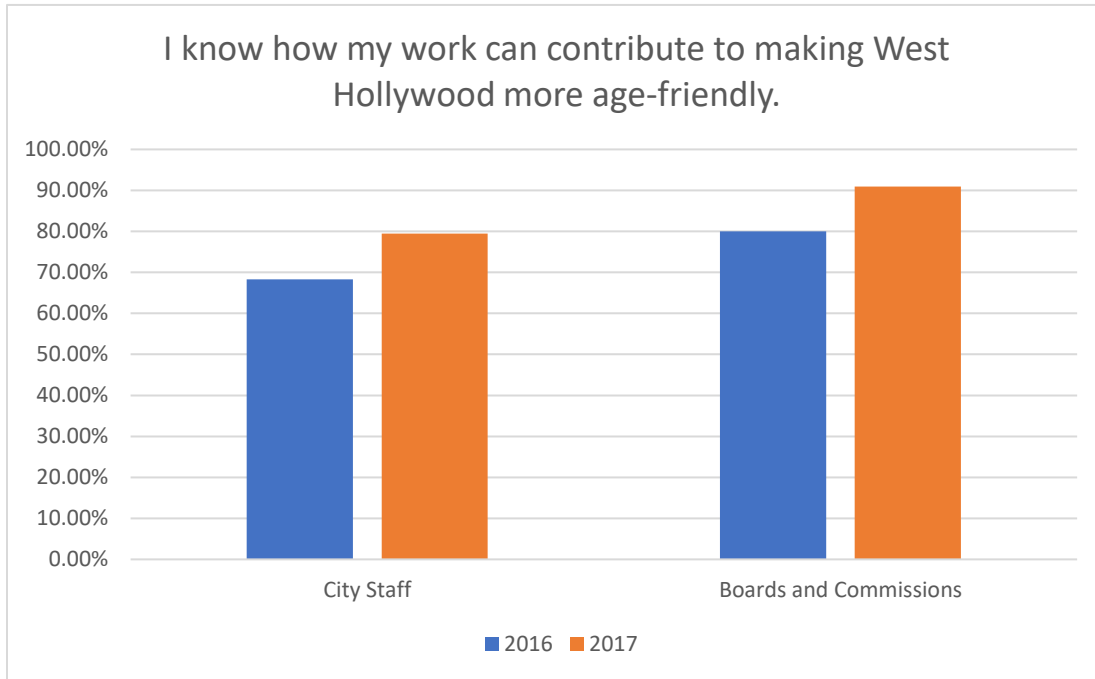


Figure 3: I know how my work can contribute to making West Hollywood more age-friendly.



Program Changes

The survey of City staff asked very specific questions about how they are thinking about and incorporating AIP concepts into their work and into programs and services. Responses to these questions indicate that ***the AIP Initiative is having an impact on how City staff do their work.*** For example, from the 2016 to the 2017 survey, City staff responses to the following statements shifted upward (toward higher levels of agreement with these statements):

- I have changed how I write contracts with vendors to require that they do things in a more age-friendly way.
- I have added measures of age-friendliness to evaluation related to my work.
- Concepts related to age-friendliness are a regular part of meeting agendas and planning processes.
- My supervisor has incorporated age-friendly concepts into my goals and key performance indicators.
- I have incorporated age-friendly concepts into my staff's goals and key performance indicators.
- I have specific goals for my work around age-friendliness.
- When I am thinking about existing projects, I think about how to make them more age-friendly.
- When I am undertaking a new project, I think about how to make it more age-friendly.

- I have changed how I do my work in order to incorporate age-friendly concepts into the work.

In 2016, the mean response from City staff was “neither agree nor disagree” regarding each of the above statements, suggesting that this was an opportunity for the Initiative to have an impact on the City’s work in these areas. On every measure, the level of agreement with these statements has increased from 2016 to 2017, which is positive. However, the averages are still relatively low, suggesting much more room for change in this area. See Table 13 below for more information.

Table 13 Incorporation of age-friendly concepts into the day to day work of the city

Question	City Staff 2016	City Staff 2017	Change	West Hollywood Boards and Commissions Members 2016	West Hollywood Boards and Commissions Members 2017	Change
	Percent Agree or Strong Agree					
I have changed how I do my work in order to incorporate age-friendly concepts into the work.	46.50%	62.70%	16.20%	57.10%	75.00%	17.90%
When I am undertaking a new project, I think about how to make it more age-friendly.	52.40%	61.90%	9.50%	65.70%	85.70%	20.00%
When I am thinking about existing projects, I think about how to make them more age-friendly.	50.00%	55.40%	5.40%	62.90%	90.00%	27.10%
I have specific goals for my work around age-friendliness.	40.40%	45.20%	4.80%	n/a	n/a	n/a
I have incorporated age-friendly concepts into my staff's goals and key performance indicators. (Check "not applicable" if you do not supervise staff.)	30.50%	21.70%	-8.80%	n/a	n/a	n/a
My supervisor has incorporated age-friendly concepts into my	31.70%	42.90%	11.20%	n/a	n/a	n/a

goals and key performance indicators.						
I have changed how I write contracts with vendors to require that they do things in a more age-friendly way.	17.10%	15.70%	-1.40%	n/a	n/a	n/a
I have added measures of age-friendliness to evaluation related to my work.	20.20%	26.20%	6.00%	n/a	n/a	n/a

Connection with West Hollywood, with Neighbors and Services, and Quality of Life

A component of the surveys of older adults was an assessment of the degree to which older adults perceived that the programs and services provided by West Hollywood and the work of the AIP Initiative meet their needs, the degree to which they feel connected to community, and their perceived quality of life. By administering this survey annually for several years, the evaluation will explore changes in perceptions, and both met and unmet needs. The data will be used to track changes that occur during the Initiative’s five years of work, to explore whether there are correlations between the Initiative and these perceptions. Additionally, the data are being used by the Initiative to plan for areas of focus and activities in upcoming years.

In many areas of exploration, such as feeling connected with others and with transportation services, older adults report being highly satisfied with programs and services. In other areas, such as housing and safety, results suggest a need for continued efforts.

There were four questions designed to measure the degree to which older adults feel connected to West Hollywood:

- I feel very respected and included in the community in West Hollywood.
- I feel very connected to my neighbors.
- If I have a need for health or social services or information, I know how to easily find what I need.
- If I want to participate in social and community activities, I know how to easily find information about activities I am interested in.

For each of these statements, agreement was high – with about $\frac{3}{4}$ of respondents agreeing or strongly agreeing with the statement. Additionally, agreement was higher in 2017 than in 2016, with the exception of the first statement, which was slightly lower in 2017.

Transportation

Older adults were asked about West Hollywood's public transportation system. Most (77% in 2016 and 79% in 2017) agreed or strongly agreed that the "public transportation system is consistently very accessible and very easy to use". A slightly lower percentage (68% in 2016 and 69% in 2017) agreed or strongly agreed that it "always has stops where I need them".

Public Buildings and Open Space

Older adults were asked about West Hollywood's open spaces, public spaces, and public buildings. A strong majority (85% in both 2016 and 2017) agreed or strongly agreed that "West Hollywood's public buildings and public spaces are consistently very accessible". About $\frac{3}{4}$ (78% in 2016 and 72% in 2017) agreed or strongly agreed that they "use West Hollywood's open spaces regularly".

Health Care

In terms of health care, a strong majority of respondents agreed or strongly agreed (84% in 2016 and 88% in 2017) that they "have a primary care doctor, or a regular source of health care services when I need them." However, when asked to respond to the statement: "If I need home health services to help me recover from an illness, or personal care to help with chores that are too much for me lately, I know how to get them", only 56% (in 2016) and 64% (in 2017) agreed or strongly agreed. Providing education to older adults about available home health services and how to access these services could be an area of additional focus for the Initiative in Years 2-5.

Food

Less than $\frac{3}{4}$ of respondents (69% in 2016 and 73% in 2017) agreed or strongly agreed that they are "able to afford and have easy access to healthy food". Food security has not been a specific focus on the AIP Initiative in the first year, but the evaluation observed that there is an existing capacity of social services programs that do address food needs, including some City-funded programs which include congregate community meals and on-site meal distribution in HUD properties with older adult populations. There are also considerable case management and linkage efforts within several City programs that work to connect people with needed services. It may be important in the future for the Initiative to further explore the food security needs of its older adult residents, particularly in light of high housing costs that can cut into food budgets.

Housing and Safety

When asked to respond to the statement: "I live in housing that is affordable and safe", only about $\frac{2}{3}$ agreed or strongly agreed (67% in 2016 and 68% in 2017). This aligns with what was

discussed in focus groups with older adults, in which housing concerns were a major topic of discussion. Interestingly, when City staff and members of West Hollywood Boards and Commissions were asked if they believe that “older adults are able to live in housing that is affordable and safe”, only about 1/3 of staff agreed or strongly agreed, with West Hollywood Boards and Commissions having even lower agreement (17% agreed or strongly agreed in 2017).

When asked about the safety of their neighborhood, only about 60% (in 2016), and an even smaller percentage in 2017 (55%), of older adult respondents reported that their neighborhood very safe or somewhat safe. When asked about the safety of West Hollywood in general, only about half (51% in both 2016 and 2017) felt West Hollywood was very safe or somewhat safe. It may be important to explore this finding in focus groups with older adults in the upcoming year, to find out what it is that feels unsafe, and whether there are things the City could do within the AIP Initiative to promote a greater sense of safety. Interestingly, both City staff and members of West Hollywood Boards and Commissions who responded to the survey had very different beliefs about how safe older adults perceive their neighborhoods and West Hollywood to be, with about ¾ of respondents saying they think older adults perceive their neighborhood and West Hollywood to be very safe or somewhat safe.

Quality of Life

Older adults were also asked “How would you rate the overall quality of life in West Hollywood?” Just under ¾ responded “excellent” or “very good” in both 2016 and 2017. This measure of quality of life will be an important one to continue to track over time, both at the community level and at the program level as the evaluation seeks to explore whether this changes over time and whether specific programs and services seem to have an impact on the quality of life of West Hollywood’s older adult residents.

Comparison of Similar Questions from City Staff, West Hollywood Boards and Commissions, and Older Adult Surveys

There were some interesting differences in how older adults perceive West Hollywood and its services, and how city staff and members of West Hollywood Boards and Commissions *believe* that older adults feel about West Hollywood and its services. Generally, older adults report knowing what Aging in Place concepts are, and feel that West Hollywood is an age-friendly city, much more than city staff or West Hollywood Boards and Commissions members think they do. They also report higher levels of access to housing, food, social services, medical services, home health services, and a greater connection to neighbors than key city leaders expect. These differences may be related to the sample of people who responded to the survey, or there may

be another explanation for this difference. It will be important to explore this discrepancy in future years of the evaluation.

Table 14 Differences in responses between older adults, city staff, and members of West Hollywood Boards and Commissions

Survey Item	City Staff		West Hollywood Boards and Commissions		Survey Item	Older Adults		Change: City Staff and Older Adults		Change: West Hollywood Boards and Commissions and Older Adults	
	2016	2017	2016	2017		2016	2017	2016	2017	2016	2017
Older adults know what it means for a city to be "Age-Friendly".	3.05	3.23	3.37	2.88	I know what it means for a city to be "Age-Friendly".	3.97	4.06	0.92	0.83	+0.6	1.18
Older adults feel that West Hollywood is an "Age-Friendly" city.	3.37	3.49	3.48	3.06	I feel that West Hollywood is an "Age-Friendly" city.	3.99	4.13	0.62	0.64	+0.51	1.07
Older adults are able to live in housing that is affordable and safe.	3.11	3.13	3.09	2.35	I live in housing that is affordable and safe.	3.75	3.96	0.64	0.83	+0.66	1.61
Older adults feel very connected to their neighbors.	3.27	3.34	3.03	3.00	I feel very connected to my neighbors.	3.79	4.00	0.52	0.66	+0.76	1.0
Older adults are able to afford and have easy access to healthy food.	3.07	3.34	2.81	3.06	I am able to afford and have easy access to healthy food.	3.78	3.93	0.71	0.59	+0.97	0.87

Table 14 Differences in responses between older adults, city staff, and members of West Hollywood Boards and Commissions

Survey Item	City Staff		West Hollywood Boards and Commissions		Survey Item	Older Adults		Change: City Staff and Older Adults		Change: West Hollywood Boards and Commissions and Older Adults	
	2016	2017	2016	2017		2016	2017	2016	2017	2016	2017
If older adults have a need for health or social services or information, they know how to easily find what they need.	3.38	3.46	3.16	3.18	If I have a need for health or social services or information, I know how to easily find what I need	4.00	4.02	0.62	0.56	0.84	0.84
If older adults want to participate in social and community activities, they know how to easily find information about activities they are interested in.	3.42	3.60	3.13	3.29	If I want to participate in social and community activities, I know how to easily find information about activities I am interested in.	4.03	4.02	0.61	0.42	0.9	0.73
Older adults have a primary care doctor, or a regular source of health care services when they need them.	3.14	3.37	3.27	3.12	I have a primary care doctor, or a regular source of health care services when I need them.	4.27	4.35	1.13	0.98	1.0	1.23
If older adults need home health services to help them recover from an illness, or personal care to help with chores that are too much for them lately, they know how to get them.	3.04	3.28	2.87	2.63	If I need home health services to help me recover from an illness, or personal care to help with chores that are too much for me lately, I know how to get them.	3.55	3.78	0.51	0.5	0.686	1.15

Appendix C: Older Adult Survey

West Hollywood Aging IN Place/Aging IN Community Strategic Plan (2016-2020) – Questionnaire

Thank you for taking time to respond to this survey. Your answers are completely anonymous (unless you choose to identify yourself at the end of the survey), and you are free to skip any questions. The information you provide will help the City of West Hollywood understand the impact of their efforts to make West Hollywood an Age-Friendly city. Information from the surveys will be grouped together and reported as a group. If you have any questions about this survey, please contact Marci Eads at meads@healthmanagement.com.

	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree	N/A
I use West Hollywood’s open spaces regularly.						
West Hollywood’s public buildings and public spaces are consistently very accessible.						
West Hollywood’s public transportation system is consistently very accessible and very easy to use.						
West Hollywood’s public transportation system always has stops where I need them.						
I feel very respected and included in the community in West Hollywood.						
I live in housing that is affordable and safe.						
I feel very connected to my neighbors.						
I am able to afford and have easy access to healthy food.						
If I have a need for health or social services or information, I know how to easily find what I need.						
If I want to participate in social and community activities, I know how to easily find information about activities I am interested in.						
I have a primary care doctor, or a regular source of health care services when I need them.						
If I need home health services to help me recover from an illness, or personal care to help with chores that are too much for me lately, I know how to get them.						
I know what it means for a city to be “Age-Friendly”.						
I feel that West Hollywood is an “Age-Friendly” city.						

1. How would you rate the overall quality of life in West Hollywood?
 Excellent Good Fair Poor Very Poor
2. What is your perception of the safety of your neighborhood?
 Very safe Somewhat safe Fairly safe Not very safe
3. What is your perception of the safety of the city as a whole?
 Very safe Somewhat safe Fairly safe Not very safe
4. If I needed to make a modification to my home to be able to continue to live in it, I know that the city has a program that will work with the landlord or owner to help install the modifications.
 Yes No
5. I have done volunteer work in the last 30 days.
 Yes No, but I wanted to. No, and I did not want to.
6. I have participated in paid employment in the last 30 days.
 Yes No, but I wanted to. No, and I did not want to.
7. I have participated in cultural or social activities in the last 30 days.
 Yes No, but I wanted to. No, and I did not want to.
8. I have heard of West Hollywood's "Aging in Place" Initiative.
 Yes No I don't know

Is there anything else you would like to share with us about any of these topics? _____

Demographics

The following questions are of a personal nature, but will aid our understanding of the community's needs. All responses to the survey are confidential and you will not be identified in any way (unless you choose to identify yourself below). Even if you choose not to respond to some of these questions, please return your survey anyway.

1. Are you: Male Female
2. Are you transgender? Yes No
 If Yes, please self-identity: _____
3. How old are you? Please check (1) one.
 18-24 25-34 35-44 45-54 55-64 65-80 80+

4. How many years of education have you completed?
 Less than 12 years Completed high school
 Some college 4-year college degree
 Graduate education
5. What is your racial or ethnic background? (check all that apply)
 African-American Anglo/White/Caucasian
 Latino/Latina Native American
 Asian or Pacific Islander Other _____
6. Do you identify yourself as:
 Bisexual Gay male
 Heterosexual Lesbian
7. What is the approximate annual income (before taxes) for your household? (*If you live with a roommate/housemate, only count your own income.*)
 Less than \$10,000 a year \$50,000-\$74,999
 \$10,000-\$14,999 \$75,000-\$99,999
 \$15,000-\$24,999 \$100,000-\$149,999
 \$25,000-\$34,999 \$150,000 or more
 \$35,000-\$49,999
8. How many years have you lived in West Hollywood? _____ years
9. Which of the following best describes the area in which you live? Please check (1) one.
 West of La Cienega
 Between La Cienega Blvd. and Crescent Heights Blvd.
 Between Crescent Heights Blvd. and La Brea Ave.
10. What zip code do you live in?
 90069 90046 90048
11. Did you immigrate to the United States from another country? Yes No
 If YES, from _____ (name of country) in _____ (year of first entry).
12. What is the primary language you speak at home?
 English Russian
 Spanish Other (Please describe) _____
13. Are you a citizen of the United States?
 Yes No
14. Is your household affected by any of these health issues? Please check all that apply.
 AIDS/HIV Learning disability
 Hearing or sight impairment Development disability
 Mobility impairment Mental or emotional disability

___ Medical disability (please describe) _____

15. What kind of housing do you live in? Please check (1) one.

- ___ Apartment or duplex ___ Single family home
___ Condominium ___ Retirement home/group living quarters
___ Other (Please describe)

16. Please check what best describes your housing situation:

- ___ I own my own residence or share ownership
___ I rent under a government housing subsidy or low-income program (e.g., HUD building, Section 8, the City's inclusionary housing program, West Hollywood Community Housing Corporation)
___ I rent my residence (no housing subsidy)
___ Other (please describe)

Opportunity to Provide Ongoing Feedback and Information

The questionnaire you completed today (or that you will complete later, if desired) is part of a larger effort to understand the impact of the City of West Hollywood's Aging In Place Initiative on the lives of West Hollywood's residents. If you would like to participate in this larger evaluation effort, we would appreciate your input.

You would be asked to do provide your name and contact information below so HMA can contact you in 6-12 months to ask you to complete this questionnaire again and/or to ask if we can conduct a brief interview with you, and so that we can link your answers today with your answers later. Your individual responses would be kept confidential to the evaluation team at HMA and would not be shared publicly, with the City of West Hollywood, or with anyone outside of the evaluation team.

Please check all that apply:

- I agree that HMA can use the contact information provided below to contact me in 6-12 months to ask that I complete the questionnaire again and to link my responses.
- I agree that HMA can use the contact information provided below to contact me in 6-12 months to ask that I participate in an individual or group interview.
- I agree that HMA can leave a voice mail or email me for these purposes.
- I am interested in participating as an advisor to this project.

Name _____

Email Address _____

Phone Number _____

Signature _____

If you have any questions about this questionnaire or the larger evaluation, please contact Marci Eads, PhD at meads@healthmanagement.com.

Appendix D: Older Adult Survey, Russian

Стратегический план поддержания качественного уровня жизни пожилых категории населения в домашних условиях на 2016-2020 годы – Опрос общественного мнения.

Благодарим за то, что нашли время заполнить эту анкету, которая является частью масштабного мероприятия, проводимого руководством города Западный Голливуд с целью оценить результаты усилий, прилагаемых для того, чтобы сделать Западный Голливуд городом, комфортным для проживания пожилых людей.

Ваши ответы абсолютно анонимны (если только Вы сами не захотите указать свое имя в конце анкеты).

Вы также можете оставить без ответов любые вопросы.

Информация, полученная из анкет, будет объединена в группы, и отчеты будут составлены по группам.

	Совершенно не согласен	Не согласен	Затрудняюсь ответить	Согласен	Совершенно согласен	Не применимо ко мне
Я регулярно пользуюсь зонами отдыха в Западном Голливуде.						
Общественные здания и общественные зоны Западного Голливуда удобны и легко доступны.						
Общественный транспорт в Западном Голливуде легко доступен, им удобно пользоваться.						

	Совершенно не согласен	Не согласен	Затрудняюсь ответить	Согласен	Совершенно согласен	Не применимо ко мне
Остановки общественного транспорта расположены в тех местах, где мне удобно.						
Я чувствую себя уважаемым и вовлеченным в общественную жизнь Западного Голливуда.						
Мое жилье доступно (в финансовом смысле) и безопасно.						
У меня очень хорошие отношения с соседями.						
Я могу себе позволить здоровую пищу. Мне не составляет труда ее приобрести.						

	Совершенно не согласен	Не согласен	Затрудняюсь ответить	Согласен	Совершенно согласен	Не применимо ко мне
Если мне необходимы медицинские или социальные услуги или информация, я знаю, где легко найти то, что мне нужно.						
Если я хочу участвовать в социальной и общественной жизни, я знаю, где легко получить информацию о событиях, которые мне интересны.						
У меня есть терапевт или постоянный медицинский уход, когда мне это нужно.						
Я знаю, как получить медицинские услуги, когда болею, и помощь с работой по дому, которую мне в последнее время тяжело выполнять.						

	Совершенно не согласен	Не согласен	Затрудняюсь ответить	Согласен	Совершенно согласен	Не применимо ко мне
Я знаю, что значит город, комфортный для проживания пожилых людей.						
Я считаю, что Западный Голливуд является городом, комфортным для проживания пожилых людей.						

1. Как бы Вы оценили общее качество жизни в Западном Голливуде?

Великолепно Хорошо Нормально Плохо Очень плохо

2. Каково Ваше ощущение безопасности в районе, где Вы живете?

Очень безопасно Безопасно Довольно безопасно Не очень безопасно

3. Каково Ваше ощущение безопасности в городе в целом?

Очень безопасно Безопасно Довольно безопасно Не очень безопасно

4. Если мне необходимы преобразования в доме для дальнейшего проживания в нем, я знаю, что существует городская программа, которая поможет договориться с арендодателем или владельцем, чтобы выполнить необходимые преобразования.

Да Нет

5. За последние 30 дней я выполнял работу волонтера.

Да Нет, но хотел бы Нет, и не хотел

6. За последние 30 дней я выполнял оплачиваемую работу.

Да Нет, но хотел бы Нет, и не хотел

7. За последние 30 дней я участвовал в общественных мероприятиях.

Да Нет, но хотел бы Нет, и не хотел

Демографические данные

Следующие вопросы носят личный характер, но они помогут нам понять потребности общества в целом. Все ответы на вопросы конфиденциальны, и Ваша личность не может быть установлена никаким образом (если только Вы сами не захотите указать свое имя в конце анкеты).

Даже если Вы решите не отвечать на вопросы ниже, пожалуйста, всё равно верните Вашу анкету.

1. Вы: Мужчина Женщина
2. Вы транссексуал? Да Нет
Если да, пожалуйста, уточните как Вы себя идентифицируете: _____
3. Ваш возраст? Пожалуйста, отметьте один из вариантов.
 18-24 25-34 35-44 45-54 55-64 65-80 80+
4. Какое у Вас образование? Вы закончили:
 Менее 12 лет Старшую школ
 Колледж 4-летний курс колледжа
 Университет
5. Ваша раса или национальность? (Пожалуйста, отметьте все подходящие варианты).
 Афро-американец Белый
 Латиноамериканец Коренной американец
 Представитель Азии или житель Тихоокеанских островов Другое _____
6. Вы считаете, что Вы:
 Бисексуал Гей (мужчина)
 Гетеросексуал Лесбиянка
7. Каков примерный общий годовой доход Вашей семьи (до вычета налогов).
Если Вы проживаете не с членами семьи, пожалуйста, укажите только свой личный доход.
 Менее, чем \$10,000 в год
 \$10,000-\$14,999
 \$15,000-\$24,999
 \$25,000-\$34,999
 \$35,000-\$49,999
 \$50,000-\$74,999
 \$75,000-\$99,999
 \$100,000-\$149,999
 \$150,000 или более

8. Сколько лет Вы живете в Западном Голливуде? _____ лет

9. Что из нижеперечисленного наилучшим образом описывает район, где Вы живете?

Пожалуйста, отметьте один из вариантов.

___ На запад от бульвара *La Cienega*

___ Между *La Cienega Blvd.* и *Crescent Heights Blvd.*

___ Между *Crescent Heights Blvd.* и *La Brea Ave.*

10. Какой у Вас почтовый индекс (zip-код)?

___ 90069 ___ 90046 ___ 90048

11. Вы иммигрировали в Соединенные Штаты из другой страны? ___ Да ___ Нет

Если Да, из _____ (укажите страну) в _____ (год первого въезда).

12. На каком основном языке вы говорите дома?

___ Английский

___ Русский

___ Испанский

___ Другой (пожалуйста, укажите) _____

13. Вы являетесь гражданином Соединенных Штатов?

___ Да ___ Нет

14. Страдаете ли Вы или кто-либо из проживающих совместно с Вами, от нижеперечисленных заболеваний? Пожалуйста, отметьте все подходящие варианты.

___ СПИД/ВИЧ

___ Проблемы с памятью

___ Проблемы со слухом или зрением

___ Задержка развития

___ Ограниченная подвижность

___ Умственные или психологические

заболевания

___ Инвалидность (пожалуйста, уточните) _____

15. Тип Вашего жилья. Пожалуйста, отметьте один из вариантов.

___ Квартира или полдома

___ Отдельный дом

___ Кондоминиум

___ Дом для пенсионеров / квартиры для совместного

проживания

___ Другое (пожалуйста, поясните)

16. Пожалуйста, выберите из нижеперечисленного вариант, который лучше всего описывает Ваш у ситуацию с жильем:

___ Я являюсь единственным владельцем или владею частью жилья

___ Арендую, пользуясь правительственными жилищными субсидиям или программой для малообеспеченного населения (такими, как дома принадлежащие строительному управлению HUD , 8 программа, жилищная программа города Западный Голливуд, строительная корпорация города Западный Голливуд.)

___ Арендую самостоятельно (без жилищных субсидий)

___ Другое (пожалуйста, уточните) _____

Возможность дальнейшего предоставления отзывов и информации.

Если Вы хотите и далее участвовать в опросе, мы будем очень благодарны за Ваш вклад.

В этом случае мы просим Вас указать свое имя и контактную информацию ниже с тем, чтобы сотрудники, проводящие опрос, могли связаться с Вами через 6 -

12 месяцев и попросить Вас заполнить эту

анкету снова или взять у короткое интервью, чтобы сравнить Ваши сегодняшние

ответы с тем, что Вы ответите позже.

Ваша личная информация будет конфиденциальна для сотрудников компании, обрабатывающей результаты анкетирования, и не будет разглашаться ни в Западном Голливуде, ни где-либо за пределами компании.

Пожалуйста, отметьте все подходящие варианты:

Я соглашаюсь на то, чтобы компания, проводящая опрос, использовала контактную информацию, предоставленную ниже, чтобы связаться со мной через 6-12 месяцев и попросить заполнить анкету еще раз, чтобы сравнить мои ответы с сегодняшними.

Я соглашаюсь на то, чтобы компания, проводящая опрос, использовала контактную информацию, предоставленную ниже, чтобы связаться со мной через 6-12 месяцев и попросить меня участвовать в индивидуальном или групповом интервью.

Я соглашаюсь на то, чтобы компания, проводящая опрос, оставила мне голосовое сообщение или отправила сообщение по электронной почте для этих целей.

Имя _____

Адрес электронной почты _____

Телефон _____

Подпись _____

Если у Вас есть вопросы относительно анкеты или дальнейшего опроса, пожалуйста, свяжитесь с Марси Идз (Marcie Eads) по электронному адресу meads@healthmanagement.com.

Appendix E: City Staff Survey

West Hollywood Aging *IN* Place/Aging *IN* Community Strategic Plan (2016-2020) – Questionnaire

Thank you for taking time to respond to this questionnaire. Your answers are completely anonymous (unless you choose to identify yourself at the end of the questionnaire), and you are free to skip any questions. **The information you provide will help the City of West Hollywood understand the impact of their efforts to make West Hollywood an Age-Friendly city.**

The questionnaire will take only 10 minutes to complete.

Your participation is completely voluntary, and is very appreciated.

- Your participation by completing this questionnaire is completely voluntary. You can choose not to respond.
- You can choose to skip any questions you do not want to answer.
- There will be no consequences to you of not participating. In other words, participating or not participating will have no impact on your employment, any services you wish to receive or participate in with the city or any other interaction you may have with the city.
- Only the researchers at Health Management Associates (HMA) will have access to your responses and information will be shared in aggregate only. (Information from the surveys will be grouped together and reported as a group.)

If you have any questions about this questionnaire or the larger evaluation, please contact Marci Eads, PhD at meads@healthmanagement.com.

	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree	N/A
I understand the concept of “age-friendly” as it applies to a city.						
I know what it means for a city to be “age-friendly”.						

	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree	N/A
I believe it is possible to change a city to make it more age-friendly.						
I know that my work can contribute to making West Hollywood more age-friendly.						
I know how my work can contribute to making West Hollywood more age-friendly.						

I have changed how I do my work in order to incorporate age-friendly concepts into the work.						
When I am undertaking a new project, I think about how to make it more age-friendly.						
When I am thinking about existing projects, I think about how to make them more age-friendly.						
Projects in which I am involved provide inter-generational opportunities, i.e., for people of different ages to interact.						
I have specific goals for my work around age-friendliness.						
Concepts related to age-friendliness come up regularly in conversations at work.						
Concepts related to age-friendliness come up regularly in meetings.						
Concepts related to age-friendliness are a regular part of meeting agendas and planning processes.						
I talk with my team about the importance of incorporating age-friendly concepts into our work.						
I have incorporated age-friendly concepts into my staff's goals and key performance indicators. (Check "not applicable" if you do not supervise staff.)						
My supervisor has incorporated age-friendly concepts into my goals and key performance indicators.						
I have changed how I write contracts with vendors to require that they do things in a more age-friendly way.						
I have added measures of age-friendliness to evaluation related to my work.						

In what ways have you incorporated age-friendly concepts into your work?

	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree	N/A
West Hollywood's open spaces are age friendly.						
West Hollywood's public buildings and public spaces are consistently very accessible.						
West Hollywood's public transportation system is consistently very accessible and very easy to use.						
West Hollywood's public transportation system always has stops where I need them.						
Older adults feel very respected and included in the community in West Hollywood.						
Older adults are able to live in housing that is affordable and safe.						
Older adults feel very connected to their neighbors.						
Older adults are able to afford and have easy access to healthy food.						
If older adults have a need for health or social services or information, they know how to easily find what they need.						
If older adults want to participate in social and community activities, they know how to easily find information about activities they are interested in.						
Older adults have a primary care doctor, or a regular source of health care services when they need them.						
If older adults need home health services to help me recover from an illness, or personal care to help with chores that are too much for me lately, they know how to get them.						
Older adults know what it means for a city to be "Age-Friendly".						
Older adults feel that West Hollywood is an "Age-Friendly" city.						

In what ways have you seen age-friendly concepts being incorporated within the city?

	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree	N/A
I feel that West Hollywood is an “Age-Friendly” city.						
I have noticed changes in services, facilities, and/or programs in the city that make it more age-friendly.						
I have noticed changes in the awareness about age-friendly concepts within and among city employees.						
I have noticed changes in the awareness about age-friendly concepts among residents (not among city employees).						

- How do you think older adults would rate the overall quality of life in West Hollywood?
 Excellent Good Fair Poor Very Poor
- How safe do you think older adults perceive their **neighborhood to be**?
 Very safe Somewhat safe Fairly safe Not very safe
- How safe do you think older adults perceive **the city of West Hollywood to be**?
 Very safe Somewhat safe Fairly safe Not very safe
- If an older adult needed to make a modification to their home to be able to continue to live in it, they know that the city has a program that will work with the landlord or owner to help install the modifications.
 Yes No Maybe I don't know

Is there anything else you would like to share with us about any of these topics? _____

Demographics

The following questions are of a personal nature, but will aid our understanding of the community's needs. All responses to the questionnaire are confidential and you will not be identified in any way (unless you choose to identify yourself below).

- Are you: Male Female
- Are you transgender? Yes No
 If Yes, please self-identity: _____

3. How old are you? Please check (1) one.
 18-24 25-34 35-44 45-54 55-64 65-80 80+
4. How many years of education have you completed?
 Less than 12 years Some college Graduate education
 Completed high school 4-year college degree
5. What is your racial or ethnic background? (check all that apply)
 African-American Anglo/White/Caucasian
 Latino/Latina Native American
 Asian or Pacific Islander Other _____
6. Do you identify yourself as:
 Bisexual Gay male
 Heterosexual Lesbian
7. What is the approximate annual income (before taxes) for your household? (*If you live with a roommate/housemate, only count your own income.*)
 Less than \$10,000 a year \$50,000-\$74,999
 \$10,000-\$14,999 \$75,000-\$99,999
 \$15,000-\$24,999 \$100,000-\$149,999
 \$25,000-\$34,999 \$150,000 or more
 \$35,000-\$49,999
8. How many years have you lived in West Hollywood? _____ years
9. What zip code do you live in? _____
10. Did you immigrate to the United States from another country? Yes No
 If Yes, from _____ (name of country) in _____ (year of first entry).
11. What is the primary language you speak at home?
 English Russian
 Spanish Other (Please describe) _____
12. Are you a citizen of the United States?
 Yes No
13. Is your household affected by any of these health issues? Please check all that apply.
 AIDS/HIV Learning disability
 Hearing or sight impairment Development disability
 Mobility impairment Mental or emotional disability
 Medical disability (please describe) _____
14. What kind of housing do you live in? Please check (1) one.

- Apartment or duplex
- Condominium
- Other (Please describe)

- Single family home
- Retirement home/group living quarters

15. Please check what best describes your housing situation:

- I own my own residence or share ownership
- I rent under a government housing subsidy or low-income program (e.g., HUD building, Section 8, the City's inclusionary housing program, West Hollywood Community Housing Corporation)
- I rent my residence (no housing subsidy)
- Other (please describe)

16. In which department do you work? _____

Opportunity to Provide Ongoing Feedback and Information

The questionnaire you completed today (or that you will complete later, if desired) is part of a larger effort to understand the impact of the City of West Hollywood's Aging **IN** Place Initiative on the lives of West Hollywood's residents. If you would like to participate in this larger evaluation effort, we would appreciate your input.

You would be asked to do provide your name and contact information below so HMA can contact you in 6-12 months to ask you to complete this questionnaire again and/or to ask if we can conduct a brief interview with you, and so that we can link your answers today with your answers later. Your individual responses would be kept confidential to the evaluation team at HMA and would not be shared publicly, with the City of West Hollywood, or with anyone outside of the evaluation team.

Please check all that apply:

- I agree that HMA can use the contact information provided below to contact me in 6-12 months to ask that I complete the questionnaire again and to link my responses.
- I agree that HMA can use the contact information provided below to contact me in 6-12 months to ask that I participate in an individual or group interview.
- I agree that HMA can leave a voice mail or email me for these purposes.

Name _____

Email Address _____

Phone Number _____

Signature _____

If you have any questions about this questionnaire or the larger evaluation, please contact Marci Eads, PhD at meads@healthmanagement.com.

Appendix F: Boards and Commissions Survey

West Hollywood Aging IN Place/Aging IN Community Strategic Plan (2016-2020) – Questionnaire

Thank you for taking time to respond to this questionnaire. Your answers are completely anonymous (unless you choose to identify yourself at the end of the questionnaire), and you are free to skip any questions. **The information you provide will help the City of West Hollywood understand the impact of their efforts to make West Hollywood an Age-Friendly city.**

The questionnaire will take only 10 minutes to complete.

Your participation is completely voluntary, and is very appreciated.

- Your participation by completing this questionnaire is completely voluntary. You can choose not to respond.
- You can choose to skip any questions you do not want to answer.
- There will be no consequences to you of not participating. In other words, participating or not participating will have no impact on your employment, any services you wish to receive or participate in with the city or any other interaction you may have with the city.
- Only the researchers at Health Management Associates (HMA) will have access to your responses and information will be shared in aggregate only. (Information from the surveys will be grouped together and reported as a group.)

If you have any questions about this questionnaire or the larger evaluation, please contact Marci Eads, PhD at meads@healthmanagement.com.

	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree	N/A
I understand the concept of “age-friendly” as it applies to a city.						
I know what it means for a city to be “age-friendly”.						

The following questions are related to your Board or Commission work:

	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree	N/A
I believe it is possible to change a city to make it more age-friendly.						
I know that my work as a board or commission member can contribute to making West Hollywood more age-friendly.						

I know how my work as a board or commission member can contribute to making West Hollywood more age-friendly.						
I have changed how I do my work as a board or commission member in order to incorporate age-friendly concepts into the work.						
When the board or commission I serve on is undertaking a new project, I think about how to make it more age-friendly.						
When I am thinking about existing projects that the board or commission is involved in, I think about how to make them more age-friendly.						
Concepts related to age-friendliness come up regularly in board or commission meetings.						
Concepts related to age-friendliness are a regular part of board or commission meeting agendas and planning processes.						
I talk with the board or commission about the importance of incorporating age-friendly concepts into our work.						

In what ways have you incorporated age-friendly concepts into your work as a board or commission member?

	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree	N/A
West Hollywood's open spaces are age friendly.						
West Hollywood's public buildings and public spaces are consistently very accessible.						
West Hollywood's public transportation system is consistently very accessible and very easy to use.						
West Hollywood's public transportation system always has stops where older adults need them.						

Older adults feel very respected and included in the community in West Hollywood.						
Older adults are able to live in housing that is affordable and safe.						
Older adults feel very connected to their neighbors.						
Older adults are able to afford and have easy access to healthy food.						
If older adults have a need for health or social services or information, they know how to easily find what they need.						
If older adults want to participate in social and community activities, they know how to easily find information about activities they are interested in.						
Older adults have a primary care doctor, or a regular source of health care services when they need them.						
If older adults need home health services to help recover from an illness, or personal care to help with chores that are too much for them lately, they know how to get them.						
Older adults know what it means for a city to be "Age-Friendly".						
Older adults feel that West Hollywood is an "Age-Friendly" city.						

In what ways have you seen age-friendly concepts being incorporated within the city (beyond board and commission work)?

	Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree	N/A
I feel that West Hollywood is an "Age-Friendly" city.						
I have noticed changes in services, facilities, and/or programs in the city that make it more age-friendly.						

I have noticed changes in the awareness about age-friendly concepts within and among board and commission members.						
I have noticed changes in the awareness about age-friendly concepts among residents (not among board and commission members).						

- How do you think older adults would rate the overall quality of life in West Hollywood?
 Excellent Good Fair Poor Very Poor
- How safe do you think older adults perceive their **neighborhood to be**?
 Very safe Somewhat safe Fairly safe Not very safe
- How safe do you think older adults perceive **the city of West Hollywood to be**?
 Very safe Somewhat safe Fairly safe Not very safe
- If an older adult needed to make a modification to their home to be able to continue to live in it, they know that the city has a program that will work with the landlord or owner to help install the modifications.
 Yes No Maybe I don't know

Is there anything else you would like to share with us about any of these topics? _____

Demographics

The following questions are of a personal nature, but will aid our understanding of the community's needs. All responses to the questionnaire are confidential and you will not be identified in any way (unless you choose to identify yourself below).

- On which board or commission do you serve? _____
- Are you: Male Female Transgender
- How old are you?
 18-24 25-34 35-44 45-54 55-64 65-80 81+
- How many years of education have you completed?
 Less than 12 years Some college Graduate education
 Completed high school 4-year college degree
- What is your racial or ethnic background? (check all that apply)
 African-American Anglo/White/Caucasian

Latino/Latina Native American
 Asian or Pacific Islander Other _____

6. Do you identify yourself as:

Bisexual Gay male
 Heterosexual Lesbian

7. What is the approximate annual income (before taxes) for your household? (*If you live with a roommate/housemate, only count your own income.*)

<input type="checkbox"/> Less than \$10,000 a year	<input type="checkbox"/> \$50,000-\$74,999
<input type="checkbox"/> \$10,000-\$14,999	<input type="checkbox"/> \$75,000-\$99,999
<input type="checkbox"/> \$15,000-\$24,999	<input type="checkbox"/> \$100,000-\$149,999
<input type="checkbox"/> \$25,000-\$34,999	<input type="checkbox"/> \$150,000 or more
<input type="checkbox"/> \$35,000-\$49,999	

8. Are you a West Hollywood resident? Yes No

9. If yes, how many years have you lived in West Hollywood? _____ years

10. What zip code do you live in? _____

11. Did you immigrate to the United States from another country? Yes No
If Yes, from _____ (name of country) in _____ (year of first entry).

12. What is the primary language you speak at home?

English Russian
 Spanish Other (Please describe) _____

13. Are you a citizen of the United States?

Yes No

14. Is your household affected by any of these health issues? Please check all that apply.

<input type="checkbox"/> AIDS/HIV	<input type="checkbox"/> Learning disability
<input type="checkbox"/> Hearing or sight impairment	<input type="checkbox"/> Development disability
<input type="checkbox"/> Mobility impairment	<input type="checkbox"/> Mental or emotional disability
<input type="checkbox"/> Medical disability (please describe)	_____

15. What kind of housing do you live in? Please check (1) one.

<input type="checkbox"/> Apartment or duplex	<input type="checkbox"/> Single family home
<input type="checkbox"/> Condominium	<input type="checkbox"/> Retirement home/group living quarters
<input type="checkbox"/> Other (Please describe)	

16. Please check what best describes your housing situation:

I own my own residence or share ownership
 I rent under a government housing subsidy or low-income program (e.g., HUD building, Section 8, the City's inclusionary housing program, West Hollywood Community Housing Corporation)

- ___ I rent my residence (no housing subsidy)
- ___ Other (please describe)

Opportunity to Provide Ongoing Feedback and Information

The questionnaire you completed today (or that you will complete later, if desired) is part of a larger effort to understand the impact of the City of West Hollywood’s Aging **IN** Place Initiative on the lives of West Hollywood’s residents. If you would like to participate in this larger evaluation effort, we would appreciate your input.

You would be asked to provide your name and contact information below so HMA can contact you in 6-12 months to ask you to complete this questionnaire again and/or to ask if we can conduct a brief interview with you, and so that we can link your answers today with your answers later. Your individual responses would be kept confidential to the evaluation team at HMA and would not be shared publicly, with the City of West Hollywood, or with anyone outside of the evaluation team.

Please check all that apply:

- I agree that HMA can use the contact information provided below to contact me in 6-12 months to ask that I complete the questionnaire again and to link my responses.
- I agree that HMA can use the contact information provided below to contact me in 6-12 months to ask that I participate in an individual or group interview.
- I agree that HMA can leave a voice mail or email me for these purposes.

Name_____

Email Address_____

Phone Number_____

Signature_____

If you have any questions about this questionnaire or the larger evaluation, please contact Marci Eads, PhD at meads@healthmanagement.com.

Appendix G: Older Adult Focus Group Guide

Focus Group Guide

Introduction:

Thank you for being here today. We are here speaking with you today on the behalf of the City of West Hollywood's Aging in Place, Aging in Community initiative. The initiative seeks "to support individuals as they choose to live at home within a community they know where safety and independence are givens, regardless of age, income, or ability level". The City has hired our firm, Health Management Associates, to conduct an evaluation of the initiative. The evaluation is intended to help the city improve upon services and outreach to older adults in West Hollywood.

We wanted to note up front that we will not be focusing significantly on issues related to housing. The affordable housing crisis is a problem about which the City has considerable concerns. However, systemically addressing affordable housing and development policy is outside the scope of this project. We know this is an important issue for many older adults living in West Hollywood and want to alert you to other opportunities to learn about resources for this issue. The City is hosting two meetings in early February that focus on the City's housing programs to educate and provide resources on programs and services available. The meetings are called "Housing Elements". They are an opportunity for community members to learn about City programs and to participate in the design and implementation of those programs. The City will also have staff there that can speak to folks about specific situations. The meeting dates are February 2nd in the, Community Room at West Hollywood Park and February 16th at Plummer Park.

For today, we are going to focus on what the City has the ability to change and improve upon right now.

This focus group will take about 90 minutes. It is an informal conversation. We intend for it to be lively and fun. Please help yourself to snacks and a beverages at any time. Also, feel free to get up or walk around if you feel you need a break.

You can choose whether or not to participate in the focus group and stop at any time. Although the focus group will be recorded, your responses will remain confidential. Information gathered from this group will never be attributed to participants individually or you personally, and all information will be grouped together and shared with the City of West Hollywood in aggregate.

There are no right or wrong answers to the focus group questions. We want to hear many different viewpoints and would like to hear from everyone. We hope you can be honest even when your responses may not be in agreement with the rest of the group. In respect for each other, we ask that only one individual speak at a time in the group and that responses made by all participants be kept confidential.

Does anyone have any questions for us?

Before we begin, we ask that you sign a participation consent form.

Questions

1. How many people have heard the term "age-friendly city"?

- a. When you think of that term, what do you think of? What do you think makes a city “age-friendly”?
 - b. In what ways do you think West Hollywood is “age-friendly”?
 - c. In what ways is it NOT age-friendly?
 - d. Here on this handout is a list of the eight domains of an age-friendly city, as established by the World Health Organization. In the first column, please rank these domain in terms of importance, and then in the second column rank them according to which needs the most attention or improvement.
2. When thinking about <<list domains of interest>>, what do you value most about what the City of West Hollywood is currently doing for older adults in West Hollywood? Why?
- a. Probe into any domains not mentioned, exploring whether they are aware of other initiatives in these domains. Domains include:
 - i. Open Space and Buildings
 - ii. Transportation
 - iii. Respect & Inclusion
 - iv. Housing
 - v. Communications & Information
 - vi. Civic Participation & Employment
 - vii. Health & Community Services
 - viii. Social Participation
3. What specific city-organized activities have you taken part in? How have they impacted you? What needs have been met by those activities?
- a. <<Are there specific activities/domains we want to be sure to explore? >>
 - b. The survey we recently conducted – and many of you responded to -- indicated that 70% of respondents participated in cultural or social activities. Why do you think this participation rate is so high?
4. With the exception of housing, what do you feel that you, or your friends in the community, struggle most with? What do you feel older adults are lacking? (if a probe is needed, mention the domains.)
- a. What kinds of things do you wish were more available?
 - b. In our survey, "Neighborhood Safety" was reported as a concern for many people who responded to the survey. Do you agree this is a concern? If so, why? What makes West Hollywood neighborhoods unsafe? Can you describe specific ways in which you feel unsafe?
 - c. The survey also indicated that many of you would like to volunteer but are not volunteering (44%). What are the barriers to volunteering? What could help make volunteer opportunities more available to older adults?
 - d. <<Are there specific activities/domains we want to be sure to explore?>>
5. Given these struggles we’ve discussed, what might make your life easier? Are there programs or services that the City is not offering that you think it should?

6. How would you want to access support? Where do you go to learn about what is happening in your community, such as events, resources, or other types of opportunities?
7. For those you know who do not participate in city activities and supports, why do you think that is?
 - a. Is the City seen as a helpful resource?
 - b. Do people feel they can turn to the City for help?
 - c. If necessary, probe into trust and communication issues.
8. Are aware of the City's initiative Aging IN Placing, Aging IN Community? If yes, what do you know about the initiative? How did you learn of the initiative?
9. When you think about other older adults in West Hollywood, especially older adults who are not very connected with the City or its services, what do you think they need most? Do you think they have different needs than we have talked about today?
 - a. How do you think the City can connect with them?

At the end of the group, thank everyone and ask them about their level of interest in continuing to be part of this project over time? Would they be willing to come back together in six months or a year to talk about whether anything has changed, any new needs they are hearing about, etc.?



Acknowledgements

THE CITY OF WEST HOLLYWOOD

City Council

Mayor John Heilman
Mayor Pro Tempore John J. Duran
Councilmember John D'Amico
Councilmember Lindsey P. Horvath
Councilmember Lauren Meister

Human Services Commission

Chair: Barbara Meltzer
Vice Chair: Patrick Shandrick
Elizabeth Anderson
Sam Borelli
Nate Clark
Steven L. Davis
Jimmy Palmieri

City Manager

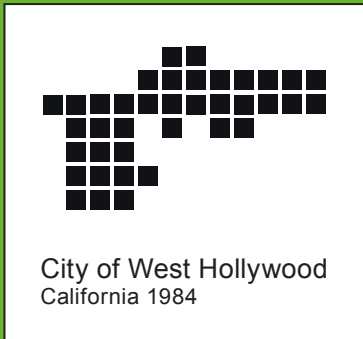
Paul Arevalo

Human Services and Rent Stabilization Department

Elizabeth Savage, Director

Consultant Firm

Health Management Associates
Community Strategies
Marci L. Eads, PhD, Managing Director
John O'Connor, Principal
Jaime Gilliland, MA, Research Assistant



City of West Hollywood
8300 Santa Monica Boulevard
West Hollywood, California 90069

Telephone: (323) 848-6400
TTY Hearing Impaired: (323) 848-6496

www.weho.org

AGING IN PLACE
AGING IN COMMUNITY



Implementation Tracking

Strategy	Responsible - Lead	Responsible- Support	Year 1 2016/17	Year 2 2017/18	Year 3 2018/19	Year 4 2019/20	Year 5 2020/21
1. Open Space and Buildings							
1.1. Safety and security							
1.1.1. Work with Public Safety to expand neighbor to neighbor involvement emergency preparedness for seniors, Neighborhood Watch, block events, open houses, health and welfare checks)	Public Safety	City Manager's Dept.	Planning	Started			
1.2. Age-friendly gathering places							
1.2.1. Redesign the Senior Lounge in Plummer Park to become a space for older adults to share art and culture as well as a sense of positive community with conversation and activities	Recreation	Facilities				Planning	
1.2.2. Encourage the creative development of existing, shared open and green spaces for gathering and sense of community (alleyways, rooftops, and raised community gardening beds, partnerships with local businesses for meeting spaces)	Long Range and Mobility Planning	LRMP Studies & Plans include many of these components	Active	→	→	→	→
1.2.3. A) Install seating/places to rest in public areas through Smart Street Furniture and B) beautify crosswalks and sidewalks	A) Innovation	B) Long Range and Mobility Planning		Planning	Planning	Active	→
1.3. Accessible facilities and Public Thoroughfares							
1.3.1. Assess and improve City facilities to encourage gathering (ramps and wide entrances, readable signage, seating that is helpful to older adults, grab bars, railings)	Facilities	---	Active	→	→	→	→
1.3.2. Encourage local business to improve accessibility and amenities (entrances, lighting)	Business Development	---			Planning		
1.3.3. Assess and improve accessibility of parking spaces and walking paths for people with mobility challenges (accommodate scooters, walkers, and appropriate signage and lighting)	Parking Operations	---			Planning		
2. Transportation							
2.1. Transit options for range of abilities							
2.1.1. Increase knowledge among potential transit users of existing options by offering educational programs (travel training, workshops, education about using transit apps)	Social Services	Transit Services	Active	→	→	→	→
2.1.2. Consider approaches for a higher level of assistance (transit case management or a travel concierge for trip planning, Bus Buddies, triage to the most appropriate service)	Social Services	Transit Services	Planning	Planning	Started		

Strategy	Responsible - Lead	Responsible- Support	Year 1 2016/17	Year 2 2017/18	Year 3 2018/19	Year 4 2019/20	Year 5 2020/21
2.1.3. Provide individualized personal support for those who otherwise would be unable to access transit (door-through-door service, "enhanced" taxi service)	Social Services	Transit Services	Active	➔	➔	➔	➔
2.1.4. Integrate improvements into existing efforts (scheduling nighttime and weekend outings, longer service hours, shuttle/connectivity to rail system, assistance with transporting belongings)	Social Services	Transit Services	Started				
2.2. Pedestrian-friendly environment							
2.2.1. Further accommodate older adults with sight and hearing challenges by improving the number and effectiveness of audible signals at crosswalks, longer crossing times, innovative use of technology such as amplification-using smart phones	Engineering	External experts needed	Move to year 3		Planning		
2.2.2. A) Increase visibility of slopes on pathways; B) use electronic signs for way-finding and transit navigation	A)TBD B)Innovation	---		Planning			
2.2.3. Reduce bike traffic on sidewalks (shared lanes with sharrows, bicycle boulevards on neighborhood streets)	Long Range and Mobility Planning	---	Active	➔	➔	➔	➔
2.2.4. Increase pedestrian crosswalk safety (longer walk signals, islands with crosswalk cue buttons, consider adding more no right turn on red rules)	Engineering	---	Active	➔	➔	➔	➔
3. Respect and Inclusion							
3.1. Caring and compassionate community							
3.1.1. Continue to model respect for older adults in City activities	HSRS Director		Active	➔	➔	➔	➔
3.1.2. Integrate respect for older adults in cultural competency training	Social Services	HSRS Director	Active	➔	➔	➔	➔
3.1.3. Require service providers to incorporate LGBT cultural competency training for in-home and other service providers who care for older adults	Social Services	Jewish Family Service, APLA Health	Not started	Started	Active	➔	➔
3.1.4. Expand cultural competency and physical accommodation training to local business owners and employees	Business Development				Planning		
3.2. Older adult voices in City decision making							
3.2.1. Adopt consistent guidelines for large typeface and readable design (on printed materials, online, on signage)	Communications	Facilities		Planning			
3.2.2. Ensure adaptive devices are available in all locations (closed captions, assisted listening, reading companions, audible documents)	Communications	Facilities	Active	➔	➔	➔	➔
3.2.3. Continue to improve meeting accessibility so older people can participate in community meetings (transit, digital access, printed materials)	All Boards and Commissions	Staff Liaisons	Active	➔	➔	➔	➔
3.3. Public policy that supports aging in place							

Strategy	Responsible - Lead	Responsible-Support	Year 1 2016/17	Year 2 2017/18	Year 3 2018/19	Year 4 2019/20	Year 5 2020/21
3.3.1. Continue the City’s legislative priority for aging in place and creating age-friendly communities.	City Manager’s Division-Government Affairs Liaison	HSRS Director	Active	→	→	→	→
4. Housing							
4.1. Age-friendly neighborhoods							
4.1.1. Institute the concept of land use planning and development Educate/survey businesses that provide easy access to those products and services used by older adults (supermarkets, hospitals, universities, gyms, hair salons)	Business Development				Planning		
4.1.2. Geographic Information System (GIS) mapping of businesses to identify age-friendly goods and services in proximity to where people live (provide mobile app and small printed booklets)	Business Development	---				Planning	
4.1.3. Encourage new residential construction projects to include shared spaces (laundry, shared kitchens, common space social areas)	Rent Stabilization and Housing	---	Active	→	→	→	→
4.1.4. Continue the dialogue on the balance of residential neighborhood needs and business/commercial needs – include in Housing Element annual community meeting	Rent Stabilization and Housing	---		Planning			
4.2. Safe and effective use of existing housing stock							
4.2.1. Preserve and expand the supply of affordable housing, including the possibility of special needs housing (people with HIV who do not need intensive medical care, housing that is adaptable over peoples’ life spans)	Rent Stabilization and Housing	Long Range and Mobility Planning			Planning		
4.2.2. Review City ordinances and offer education and incentives for landlords to address the needs of older adults (unit transfers, unit modifications)	Rent Stabilization and Housing	---	Started				
4.2.3. Explore Affordable Living for Aging (ALA) model of self-organizing senior housing options (collectives, shared housing/ co-housing, roommate matching and referral program, intergenerational)	Rent Stabilization and Housing	---		Planning			
4.2.4. Conduct home safety checks for older adults (fall hazards, lighting, clutter, smoke and CO ₂ detectors)	Social Services	JFS, WCIL, APLA Health	Active	→	→	→	→
4.3. Age-friendly local policy							
4.3.1. Develop an Accessibility Incentive Program (Home Secure) for apartment owners to integrate into rental units older adult safety features (friction patio tiles, curb-less showers, scooter accessible, lighting, exterior ramps, caregiver space)	Rent Stabilization and Housing	Social Services	Started	Active	→	→	→

Strategy	Responsible - Lead	Responsible- Support	Year 1 2016/17	Year 2 2017/18	Year 3 2018/19	Year 4 2019/20	Year 5 2020/21
4.3.2. Consider including varied housing products such as independent living, assisted living or PACE programs into the City’s list of public benefits as a part of the development incentives process (incentivize adding elevators, develop assisted and/or skilled nursing facilities, consider Assisted Living waivers through Department of Health Care Services, memory care facilities, assisted living residences with reduced parking requirements)	Rent Stabilization and Housing	Long Range and Mobility Planning	Planning	Started			
4.3.3. Address issues of an aging housing stock by structuring a program for rehabilitation of residential mechanical, electrical, and plumbing systems including ramps, grab bars, lighting, and security	Rent Stabilization and Housing	Nonprofit affordable housing providers, possibly landlords	Started				
5. Communications and Information							
5.1. Culture of receiving help							
5.1.1. Launch a media and education campaign to encourage people to ask for and receive help, recognizing the need for respect and confidentiality	Social Services	Communications	Planning	Started			
5.1.2. Develop one-on-one support systems that introduce the concept of asking for help in a positive and proactive way. Develop a system to identify needs of those who are socially isolated (in person, remotely, intergenerational, through social circles, faith- based groups, Neighborhood Watch, TheVillage.com)	Social Services	Rent Stabilization and Housing		Planning	Active	→	→
5.1.3. Promote proactive planning for wellness in relation to medical, financial, and support systems that are sensitive to the unique attributes of West Hollywood affinity groups (various materials that promote services and include community segments such as LGBT, Russian- speaking, single adult)	Recreation	Social Services	Active	→	→	→	→
5.2. Printed resource information							
5.2.1. Provide and maintain clearly identified, easily accessible, large-font, comprehensive resource guides in multiple languages and a volunteer reader program	Social Services	Rent Stabilization and Housing			Goal: start planning this in year 3		
5.2.2. Offer specialized resource guides for caregivers and family members, addressing general challenges of aging, resilience of older adults, available services, options for accessing benefits for same-sex partners; include transgender-sensitive materials (see Domain 7, Priority 1 Care for the Caregivers)	Social Services	Social service agencies			Planning	Active	→
5.2.3. Distribute written resources throughout the community (hospitals, social service agencies, faith-based organizations) as a part of the campaign	Social Services	Agencies / other collaborators	Planning	Started			

Strategy	Responsible - Lead	Responsible- Support	Year 1 2016/17	Year 2 2017/18	Year 3 2018/19	Year 4 2019/20	Year 5 2020/21
5.3. Digital Resource Information							
5.3.1. Support community members who may not have access to electronic technology or who are not comfortably digitally literate by providing computers at Plummer Park and the West Hollywood Public Library	Recreation Services	Social Services	Active	→	→	→	→
5.3.2. Develop community-based and vetted in-home assistance via electronic technology capacities	Information Technology	Innovation					Planning
5.3.3. Provide digital GIS based resource guides for clients, caregivers, family members, and social services providers with culturally inclusive information	Social Services	Innovation; Information Technology	Not started		Planning		
5.3.4. Use digital tools to improve the ability of people with hearing impairment to access information	Nonprofit service providers - TBD	---			Planning		
5.3.5. Build a group of social media savvy older adults to be peer mentors	Nonprofit service providers - TBD	---				Planning	
6. Civic Participation and Employment							
6.1. Volunteer, civic service, and mentoring opportunities							
6.1.1. Establish WeHo Volunteer Corps and match older adults with volunteer opportunities, leveraging web-based resources	Jewish Vocational Services	---	Started				
6.1.2. Increase knowledge about older adult issues among City staff, boards, commissions and other stakeholders	HSRS Director	Commission Liaisons	Active	→	→	→	→
6.1.3. Offer transportation support to help people participate in volunteer activities	Social Services	Transit Services			Planning		
6.1.4. Incorporate volunteer openings information wherever paid employment opportunities are posted	Jewish Vocational Services	---			Planning		
6.1.5. Create mentoring program so that older adult retirees can offer guidance for high school students, non-profits or others in need (Executive Service Corps consults to non-profits)	Recreation Services	Jewish Family Service			Planning		
6.2. Employment assistance for people over the age of 50							
6.2.1. Work with the West Hollywood Chamber of Commerce to support businesses in hiring older adults	Economic Development	Chamber of Commerce			Planning		
6.2.2. Promote workshops, services, and websites that support work re- entry and encore careers (websites and services targeted to older adults, and use West Hollywood employment services training programs)	HSRS Director	WeHoAging.org		Planning			
6.2.3. Connect older adults with programs that assist them with starting a business ("Business in a Box" styled toolkits)	Economic Development	---	Started				

Strategy	Responsible - Lead	Responsible- Support	Year 1 2016/17	Year 2 2017/18	Year 3 2018/19	Year 4 2019/20	Year 5 2020/21
7. Health & Community Services							
7.1. Care for the caregivers							
7.1.1. Provide opportunities for family and other volunteer caregivers to receive respite care through training of nonprofit agency social work staff to be knowledgeable of respite programs	Social Services	Agency: LA Family Caregiver Resource Center (USC)	Best handled by LAFRC				
7.1.2. Develop and implement an education campaign to help caregivers to recognize their role	Social Services	Jewish Family Service, APLA Health	Needs discussion and decision making				
7.1.3. Offer caregivers case management to continue and improve care for their loved one; link to existing resources (Family Caregiver Support Center, caregiver classes, Master Caregiver education, digital resources and/or a call-in hotline for questions and answers)	Social Services	Jewish Family Service	Started				
7.1.4. Develop and implement training for caregivers so they better understand how to provide care as well as how to deal with the stress of the caregiving role in a culturally sensitive context (family, friends, neighbors, and long-distance, paid and unpaid)	Social Services	Agencies: LA Caregiver Resource Center (USC), Alzheimer's Association, Human Rights Campaign	Needs discussion and decision making				
7.2. Physical and mental wellness							
7.2.1. Conduct regular health testing with collaborative social service agencies through City funded health fairs and in collaboration with Cedars-Sinai Medical Center and other innovative providers	Social Services	Cedars-Sinai and other city partners	Active	➔	➔	➔	➔
7.2.2. Build on the Health Neighborhood model to create a network of services with a well-coordinated client entry system and health navigation (day care programs, respite for caregivers)	---	---	Uncertainty of ACA implementation for program area				
7.2.3. Encourage healthy exercise and preventative self-care habits that are geared to the level of mobility (higher activity levels for more mobile older adults; gentler pace for more frail older adults, dog walking)	Recreation Services	Partners in Care Foundation, Jewish Family Service, WHCHC	Active	➔	➔	➔	➔
7.2.4. Identify and engage people who are isolated, homebound or institution-bound, with special attention to LGBT older adults who may be coming out or re-closeted (pet visits, pet companions, shared ownership and expenses) connect with 5.1.1, 5.2.3 Outreach Campaign	Social Services	Social services agencies	Started	Started	Active	➔	➔

Strategy	Responsible - Lead	Responsible- Support	Year 1 2016/17	Year 2 2017/18	Year 3 2018/19	Year 4 2019/20	Year 5 2020/21
7.2.5. Train physicians and other providers in the needs of older adults, including those of LGBT and Russian-speaking community members	Nonprofit service providers - TBD	---					
7.3. Social and emotional support							
7.3.1. Support peer-to-peer engagement and support (Jewish Family Service, Being Alive, recreation programs, TheVillage.com)	Social Services	Recreation Services	Active	→	→	→	→
7.3.2. Engage neighbors and other informal providers with isolated older adults (volunteers, youth, faith-based groups, neighborhood news apps)	Social Services	Planning & Coordination Meeting		Planning			
7.3.3. Provide planning for financial literacy and management; durable power of attorney, wills and trusts, support proactive decision making	Nonprofit service providers	---	Needs more decision making				
7.3.4. Review the inter-agency coordination for health, wellness and adult education programs (location-based, virtual)	Nonprofit service providers	---	Needs more decision making				
7.4. Help in the home							
7.4.1. Help older adults with services that meet their needs as they move through the aging process	City's Capital and Social Infrastructure Planning	Various Divisions	Started				
7.4.2. Facilitate the process for accessing in-home supportive services	Social Services	Various social service agencies	Active	→	→	→	→
7.4.3. Ensure that older adults have access to proper nutrition services and grocery stores	Social Services	Various social service agencies	Active	→	→	→	→
7.4.4. Develop model for hands-on assistance for frail elderly (greater teamwork between case manager and resident services coordinator)	Social Services	---	Needs more decision making				
7.4.5. Explore shared services or bartered and group purchasing (TheVillage.com)	---	---	Covered by Chai Village, and apps like NextDoor				
7.4.6. Provide assistance with basic household duties (changing sheets, basic cleaning, shared errands)	Social Services	Jewish Family Service, CONNECT	Active	→	→	→	→
7.4.7. Work with businesses to provide a directory of home delivery for goods and services	see 6.2.1						

Strategy	Responsible - Lead	Responsible- Support	Year 1 2016/17	Year 2 2017/18	Year 3 2018/19	Year 4 2019/20	Year 5 2020/21
8.1. Social engagement and enrichment							
8.1.1. Provide inclusive educational, art and cultural activities where people tend to gather	Arts Division	WeHo Arts: The Plan	Active	→	→	→	→
8.1.2. Create intergenerational opportunities for older adults to share their wisdom and experiences (with youth and 20 somethings)	Arts Division	Recreation Services	Active	→	→	→	→
8.1.3. Create welcoming opportunities for older adults to engage in physical activity (using technology and virtual events, exclusive time at a gym and other normalized settings)	Recreation Services	Partners in Care Foundation, Jewish Family Service, WHCHC	Active	→	→	→	→
8.1.4. Offer social model adult-day programs with opportunities for socialization and therapeutic activities with supervision, if needed, with culturally competent care providers	Social Services	Planning & Coordination Meeting	Needs more decision making				