Deerfield
AND
Deerfield
CHARITABLE FOUNDATION
We are delighted to be here.
Presentation Objectives

I. Deerfield and Deerfield Charitable Foundation

II. Key Findings from Community Engagement Needs Assessment

III. Share current involvement in addressing the key findings

IV. Engage with you – feedback and Q&A
Deerfield is faith-based, nonprofit, open to all, and provides a continuum of services to empower residents to live life to the fullest.

We enrich the lives of those who live and work at Deerfield and commit to be a leader in the field of aging services.
Care For Life

Independent Living, Assisted Living, and Skilled Care

650 residents across the continuum of life and care
Deerfield Strategic Pillars

- Employer of Choice
- Lifestyle and Wellbeing Leader
- Dedication to Mission
- Financially Strong

To Be A Center of Aging Excellence
Mission Statement

Nurturing Deerfield’s spirit of generosity, enriching the lives of residents, and sharing our resources with the people of Western North Carolina.
WHY CENA? Data-Driven Decision-Making and Inspiration for all

Deerfield

- We are not the community aging service experts: we are here to learn from key informants and local seniors
- We want to be fiscally responsible and effective as we partner with local aging service providers
- We want to inspire our residents to enthusiastically support outreach to local seniors

Aging Service Partners

- Your insight and expertise shaped this assessment
- The results of the survey are free and available to you
- Data may be used to:
  - Shape goal-setting and forward motion
  - Build stronger cases for support for fundraising efforts
Community Engagement Needs Assessment

Older Adults in Buncombe County, NC

Most Pertinent Key Health and Social Issues

Four Key Findings

1. Aging in Place and Age-Friendly Community
2. Affordable Housing and Income
3. Navigation of Services and Access to Care
4. Chronic Disease Management and Prevention

Source Citation: Holleran, Community Engagement Research & Consulting
Finding #1

Aging in Place and Age-Friendly Community
• In 2041, it is predicted that 25% of all individuals in the county will be 65+.
  ▪ A higher percentage of 65+ householders live alone (44.9%) than in the state and nation (42.8%).
  ▪ About 32% of older adults report having a disability which may complicate their efforts to manage in their own home.
• Ability to age in place listed as the third most pressing health issue (56.7%) by Key Informants.
  ▪ Seeking home and community-based services to age in place is the top transition challenge.
  ▪ Over half list social isolation as one of the Top 5 key health issues facing older adults in the county.
Support services in short supply, often necessitating a move to a care setting.

- 67.9% of Key Informants say Adult Day Care is lacking.
- 45.6% know of clients moving to a personal care, assisted living or nursing home.
- 14% of people (all ages) reported to be without a reliable source of food; worse when compared to the state (12%) and the nation (8%).
You said...

• “We talk about 'aging in place' as if that could possibly happen without a **small army of support staff**, be they paid caregivers, willing family or friends, and/or community volunteers.”

• “Too much **social isolation** in this age group due to lack of facilities where they can go for activities, socialization, meals, exercises for mind and body to stay active.”

• “Since **transportation/mobility** are a huge issue in the rural mountainous regions, taking those services to people might be key.”
Sponsoring, volunteering, and providing Thanksgiving dinner for **Meals on Wheels** (Buncombe County). Volunteering with and funding for **Calvary Episcopal Food Pantry**. Funding for **MountainCare Adult Day**.
Finding #2

Affordable Housing and Income
• 56.7% of older adults who rent homes in Buncombe County are spending more than 30% of their household income on rent and therefore are “cost burdened.”
• Key Informants identified affordable housing as the most pressing health issue facing older adults in the community.
  • Only 8.2% of respondents agree that there is a variety of affordable housing options available in the area for older people.
• Living below 100% poverty line worsens as population ages.
  • Households with members aged 65 to 74, 8.0% were below poverty level in 2020.
  • Households 75+, 10.5% were below 100% poverty level.
You said...

• “Services that fall outside of what insurance companies will pay for are in some cases bankrupting our most vulnerable elders.”

• “The middle class is in a bind - access and affordability are very limited.”

• “There is plenty of support for affluent retirees, but the same supportive services are miserably lacking for those with lower incomes.”
Sponsoring and volunteering to build 12+ Aging in Place homes with Habitat for Humanity in their New Heights and Glen Bridge neighborhoods.
Finding #3
Navigation of Services and Access to Care
• 0.1% of those aged 65+ are uninsured in Buncombe County yet,
  ▪ 73.3% indicate the inability to pay out-of-pocket expenses is the most significant barrier to receiving adequate healthcare.
  ▪ Low-cost medical care - dental, vision and hearing as well as medications - cited as one of the top 5 missing healthcare services (57.0%).
  ▪ Geriatricians/gerontologists, neurologists, behavioral health services and counseling identified as lacking.
Key Informants report that:

- The lack of health insurance;
- Available provider appointments, including Medicaid providers;
- Long wait times;
- Getting time off from work;
- And/or cognitive and physical limitations are barriers to accessing healthcare.
• Transportation and walkability are among the Top 5 most pressing issues facing older adults.
  - In Buncombe County, 2,457 persons age 65+ are without a vehicle.
• Case management services are perceived to be lacking as a support service by 61.6% of all respondents.
You said...

• “It seems to me if an older person has children and family to navigate the health system, the government bureaucracy, (then) they have a chance. Those that are missing this do not usually maintain a lifestyle that meets their needs.”

• “Many seniors are lulled into Medicare Advantage plans due to promises of low to no premiums and other package goodies, but then find it difficult to find medical specialists who participate in the plans to treat them when something serious comes along.”

• “So often needs can be met, but older people don’t know how to find or access whatever services are available. Seniors need access to the internet and guidance in using electronic devices for healthcare and socialization reasons.”
Finding #4

Chronic Disease Management and Prevention
Older adults are more likely to die from preventable accidents, unintentional injuries, osteoporosis, influenza and pneumonia, melanoma of the skin than more traditional causes such as cancer, chronic lower respiratory disease, stroke, Alzheimer’s disease and diabetes.
The percentage of those vaccinated (all ages) is 58% leaving many people vulnerable to the flu, particularly older adults.

Older adults more affected by depression, substance abuse, schizophrenia, and other psychoses than those in North Carolina or United States.
• 2.2% of Buncombe County Medicare beneficiaries have substance abuse disorders, more than in North Carolina or U.S., which is about 1,285 older adults.
• 39% of respondents identified dementia/memory challenges as one of the most pressing key health issues;

• 15.9% selected mental/behavioral health issues.
You said...

• “Gerontologists and memory care specialists are lacking in.” most rural communities

• “Low-cost medical, dental, vision, memory care specialists and mental health services are needed in the county.”

• “It takes 4 to 5 months to make an appointment with a new specialist, and some specialties are simply not taking new patients.”
Striving to Make a Difference: Strategic Partnerships
Access to Care and Disease Management/Prevention

Funding for MAHEC’s Center for Healthy Aging, MemoryCare, and Four Seasons Hospice. Funding and space provided for Council on Aging.
Making the Community a Better Place for Older Adults

KEY INFORMANT SUGGESTED SOLUTIONS

1. More than 3/4s of respondents think that a one-stop-shop for aging services is needed.
   • better coordination of aging services in general
   • a frequently updated referral system
   • continuity of case management by a well-organized health system.

2. Many of the chronic conditions that older adults are living with (and dying from) in Buncombe County may be lessened or prevented by
   • improved health education
   • lifestyle and environmental changes
   • Remote/telehealth services
Suggested Solutions from Survey Participants: Making the Community a Better Place for Older Adults

3. Better **affordable/universally designed housing stock**, access to maintenance services

4. Improved **transportation services** (esp. rural areas, bus stops shelters, sidewalks)

5. More **in-home supports** such as:
   - Home delivered health services
   - Increased supply of paid caregivers
   - Expanded opportunities for in-home medical care (home-based primary care and hospital at home)
   - Caregiver support (financial) and training and “hired” family members
6. More **assisted living and memory care units and respite services** with trained staff.

7. Recruitment of trained **gerontologists**.


9. Opportunities to contribute to society.
CENA Forum at Deerfield on April 12

Deerfield Resident Focus Groups on May 15, 16, 17, 20

CENA Presentation at Buncombe County Age Friendly Summit TODAY

Now What?
Q&A
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CENA Report
CENA Executive Summary
CENA Presentation