



**Legislative Department
Seattle City Council
Memorandum**

Date: June 27, 2007
To: Councilmembers
From: Mike Fong, Central Staff Analyst ^{MF}
Subject: Council's Phase II Senior Centers Review – Consultant Report

Last September, Central Staff completed an initial Phase I review of senior centers in Seattle. That report was initiated by Councilmember Rasmussen to evaluate the financial stability of the centers and lay the groundwork for a more thorough examination of the services and needs of older adults in our community. The City has historically provided financial support to several senior centers through Senior Services (non-profit county agency) and in some cases, the centers are located in City owned facilities. Since 2006, the Council has also added \$100,000 annually in General Fund operating support to senior centers as a result of declining revenues and rising costs.

At the same time, the centers are faced with multiple challenges that raise questions about their future. Those challenges include (but are not limited to) aging facilities, declining financial resources and a changing demographic that necessitates new service approaches and innovation.

Given these challenges and the increasing level of City support, Council has expressed a desire to develop clearer funding outcomes and a better understanding of the contributions that senior centers are making toward healthy aging and other benefits for older adults in Seattle.

These issues represent the underlying focus of Phase II of the Council's review of senior centers. In January of this year, the Council retained Andrea Cohen to examine the role of the City in the future of senior centers and offer specific recommendations for the Council to consider. That report has now been finalized and is attached for your review.

On Tuesday, July 3 at 9:00 a.m., Ms. Cohen will provide a summary of her findings and recommendations during the Housing, Human Services and Health Committee meeting. Ms. Cohen has also agreed to individual briefings with councilmembers. If you would like to discuss the report in a private meeting, please let me know and I will work with your staff to make the necessary scheduling arrangements.

In the coming weeks, I will be working with Councilmember Rasmussen and the Housing, Human Services and Health Committee on developing some recommendations on next steps the Council may want to pursue related to the Phase II final report. If you have questions or comments about this process, please contact me at 615-1675.

Phase II Senior Center Study Executive Summary

- By 2011, 60+ population will represent nearly 20% of city's total population.
- That represents an increase from 84,969 to 117,318 between 2000 and 2011 – 38% growth.
- Fastest growing age group nationally are 85+ - and many are "aging in place" – with need for support and community.
- Participants at Seattle's senior centers tend to be older than those participating in Parks community centers, although that's changing as senior centers market to "younger" old.
- Baby boomers reject the "senior" label. However, as they interact more with the "older" group, the discomfort begins to break down.
- Need continuum of programs for both less active and more active 50+ population – strong senior centers and strong Parks community centers to serve this population. Both are struggling financially.
- Many neighboring cities sampled provide greater support to senior centers than Seattle, even when Parks funding for its Lifetime Recreation Program is added to the mix.
- Senior centers are stressed by on-going financial instability due to diminishing support from sources such as United Way, coupled with little on-going operations support from the city. Directors talk about needing to "chase money to pay bills" – with no time to do strategic planning.
- New service models must emerge – and senior centers and Parks should collaborate in developing them.

Recommendations

- Basic Operations (city money) – increase from \$238,000 to \$318,000 in 2008
- Capacity-building (city money) – new money \$160,000 in 2008 and 160,000 in 2009 tied to eligibility thresholds and higher performance standards
- Geographic Sector-based Planning (public/private partnership) - \$50,000 city money in 2008 and \$50,000 in 2009
- Leadership Training (foundation and/or other funding such as United Way)
- Data Collection Technology Update (public/private partnership)

Seattle's Senior Centers

A Report for Seattle City Council

**Prepared by
Andrea S. Cohen, M.S.W.
Consultant**

June 2007

Table of Contents

	PAGE NUMBER
Project Scope	1
Issues Overview	
Demographics of the "Older Population"	2
Seattle Projections	2
Trends	3
Center-based Programs for Older People	
Senior Centers	4
Parks Community Centers	5
Perception and Reality	5
Senior Center Participants	7
Funding for Senior Center Operations	8
Senior Center Challenges	10
Standards and Best Practices	11
Opportunities and Partnerships	12
Conclusions	14
Recommendations	
Public Policy	15
Operations & Capacity-building	15
Geographic Sector-based Planning	19
Senior Center Leadership Training	21
Administrative	21
Appendices	
1 Resources Consulted	24
2 60+ Population Project Map – 2011	27
3 Center-based Programs for Older People by Geographic Sector	28
4 Operations Spreadsheet	32
5 Special Projects Spreadsheet	33

Project Scope

The City Council's Phase II study grew out of the results of its Phase I report, which provided information about Seattle's senior centers: who they serve, how they're funded, and the programs and services they provide.

This project arose in response to questions about the role the city should play in supporting senior centers – now and into the future. In attempting to do justice to this important question, I researched current literature and spoke to individuals and groups representing many facets of this complex issue.

In this report, you will find information about demographics, a description of the diverse "aging" populations, background on support for the city's senior centers, a review of current challenges and opportunities, and a number of recommendations that provide a roadmap for the city's support for senior centers into the future. Considering support for senior centers as the 50+ group ages inevitably required looking at the role Parks community centers play in meeting the needs of this group as well.

The Mayor's Office for Senior Citizens (MOSC), while not included under the definition of senior center used in this report, is an important resource for older people. The MOSC primarily focuses its assistance on helping people with utility discounts, promoting cultural programming, and providing employment assistance.

Information gathered for this report came, in part, from meetings with the following: many people in the 50+ group – ethnically diverse and geographically dispersed; service providers, including senior center directors and Parks staff; all major funders; Aging & Disability Services (ADS); and a group of countywide senior center experts (see Appendix 1).

Helping the people who live in Seattle to thrive – no matter what their age – contributes to the vitality and health of all of our communities. Older people, in particular, bring with them their wisdom, knowledge and experience. Our challenge and opportunity is to find ways in which to harness these assets for the benefit of all, while at the same time supporting a diverse, integrated infrastructure capable of meeting this population's ever-increasing needs.

It is my hope that this report will be useful in identifying how the city's senior centers fit into this picture and what an appropriate role might be for the city to play in supporting them.

Issues Overview

Demographics of the "Older" Population

People define the "older" population using diverse age categories. Among the descriptions are the following:

- 80's+ "The Greatest Generation"
- 70's+ "The Silent Generation"
- 50+ "The Baby Boomers"

"40 is the old age of youth and 50 is the youth of old age."
Victor Hugo

Whatever the nomenclature, older people comprise an ever-growing percentage of our population, both nationally and locally. For the sake of simplicity, this report will refer to two groups – the "younger" old and the "older" old - and they are distinguishable more by health, mobility, activities and self-perception than by chronological age.

Demographic data do not use consistent age categories, which you will see reflected in this report. Nonetheless, it is not difficult to identify significant trends.

Nationally, the 85+ population is the fastest growing age group, and Seattle is above average in its percentage of people in this age group. In addition, in the next twenty years, the number of Americans 55 and older will nearly double.

Seattle Projections

In the city of Seattle, we are looking at the following projections based on a report by Lopez & Cheung:

- Growth in overall population (all ages) by 4.7% between 2000 and 2011
- Growth of 38.1% in 60+ population between 2000 and 2011 – from 84,969 to 117,318
- By 2011, the 60+ population will represent nearly 20% of the city's total population (compared to 15% in 2000)
- That is an increase in approximately 32,350 between 2000 and 2011

See Appendix 2 for a map that reflects the percentage of neighborhood districts' population projected to be 60+ in the year 2011.

What programs are these people wanting and needing now – and likely to want and need in the future, and where will people access them?

Trends

Many people have written about what this growing population is likely to need. A brief review reveals the following trends:

- Average life expectancy is increasing swiftly, and more people are likely to “age in place” than ever before. Some can expect to live in their own homes after retiring for 30 years or longer.
- People are likely to live with chronic conditions outside of nursing homes longer than before.
- People 45-65 are increasingly finding themselves in the position of not only meeting their own needs, but also caring for their physically or mentally disabled adult children, sometimes their grandchildren, and often their older parents.
- Depression afflicts 10-20% of 65+, and the incidence is growing. Isolation contributes to depression.
- Nationally, there is a growing disparity between rich and poor – and people are working longer, primarily for economic reasons.

One can conclude that communities will need to provide more people with a greater range of programs and services than ever before, including multi-level caregiver support and opportunities for socialization to mitigate against the mental, emotional and physical strain of these challenges.

Center-based Programs for Older People

Centers providing activities and services for older people are scattered throughout the city, with each geographic sector (North, Northwest, Southeast, Southwest, Central Area and Downtown) containing at least one senior center and several parks community centers.

In addition, private and public housing complexes, faith-based institutions, fitness clubs and other non-profits also may provide some services for their older residents.

See Appendix 3 for a list of Seattle’s senior centers and Parks community centers divided into geographic sectors. Only centers receiving city funding are included.

Senior Centers

For the purpose of this report, a senior center will be defined as:

A community drop-in center providing activities at least five days a week that focuses on meeting the social, health, educational and recreational needs of older adults by offering a range of services and resources on site, such as health screening, meals, and physical activity programs.

Senior centers meeting this description are geographically dispersed throughout the city:

- *North:* Greenwood Senior Center/Phinney Neighborhood Association, Wallingford Senior Center, and Hamilton House/University District Senior Activity Center
- *Northwest:* Ballard/Northwest Senior Center
- *Southeast:* Southeast Senior Center, IDIC – a Filipino drop-in center
- *Southwest:* Senior Center of West Seattle
- *Central Area:* Central Area Senior Center
- *Downtown:* Pike Market Senior Center

In addition, there are a number of ethnic and special populations meal sites that do not meet the definition of senior center used in this report. Nonetheless, they provide an important means of socialization, nutrition and often fitness activities for the communities they serve.

People going to senior centers report the following reasons for their participation:

- Good programs and classes
- Sense of belonging
- Many services at the same location
- Welcoming environment
- Opportunity to volunteer

While many senior center participants drive their own cars, many more are dependent on others to bring them to centers. As the “older” old population continues to grow and age, transportation to senior centers will become an even greater challenge than it currently is, requiring new and well-coordinated resources.

According to the quantitative data available and senior center directors’ anecdotal reporting, most current participants of Seattle’s senior centers have an annual income of approximately \$30,000 or less.

Although local senior center participation had been either flat or declining for several years, recently this trend has begun to reverse at some centers.

Parks Community Centers

The Seattle Department of Parks & Recreations also has numerous community centers in each of these areas. More than 20 have limited activities for adults aged 50+ through their Lifelong Recreation Program (LRP). While LRP classes are often at capacity in the north end of the city, they are underutilized in the south end. LRP staff has both a recreation and a senior focus – an important skill set for serving active seniors.

There is currently little crossover between people who use senior centers and community centers. Many people who go to community centers say they don't feel welcomed by the "in group" at senior centers – or they perceive that senior centers are for older, less active people. On the other hand, many users of senior centers say they do not feel that community centers are "senior friendly" because of the presence of so many active youth. Some senior and community centers in the same geographic sector provide identical fitness programs.

Among the benefits some community centers offer are large and attractive facilities with swimming pools and large parking lots. Yet, other than the LRP program, community centers are traditionally geared toward youth recreation rather than toward meeting older people's special needs and interests. Most are closed in the morning hours when senior programs are popular, except for those having "building monitors" on site if activities are going on. During the summer, youth programs may displace programs for older people.

At community meetings, it became apparent that participants at senior centers often were unaware of the programs offered at community centers and visa versa.

Seniors perceive that older adult programming is not a high priority for the Parks Department, and if budget cuts occur in 2008 as a result of the "sunsetting" of the Pro Parks Levy, the LRP budget will be reduced by \$169,274. If that happens, the vitality of this resource will be threatened.

Perception and Reality

Seattle's senior centers generally serve a late 70's and older population who look at these centers as a place to belong – often "a home away from home." For this group, the fact that activities and services are offered in the context of social community is important. Much research exists showing that reduced isolation, participation in health and fitness programs, and volunteering all contribute to overall health - and are clearly illness prevention strategies.

In addition, many of the services provided at senior centers – such as foot care, nutrition and exercise – help people remain active and mobile. Some have speculated that if senior centers did not exist, there would be more visits to emergency rooms at far greater public cost. Results published in the American Journal of Geriatrics Society concluded, "...a senior center-based approach to disability prevention and chronic illness self-management was effective in reducing major disability and hospitalizations in chronically ill older adults." (JAGS 46:1-9, 1998, authored by Leveille, Wagner, Davis, Grothaus, Wallace, LoGerfo and Kent)

The "younger" old group is more likely to be attracted to an activity than a venue per se. Some of the activities and services they want are:

- Physical fitness
- Employment assistance
- Interest-based clubs and classes
- Travel
- A place to volunteer and contribute

While some believe that baby boomers are not prone to volunteerism, a report released by the Corporation for National and Community Service found that boomers in their late 40's to mid-50's are volunteering at higher rates than members of the Greatest Generation and Silent Generation did at the same age.

Interviews with this "younger" group locally reveal that many are reluctant to participate in senior centers – in part because they perceive senior centers to be for "old" people, a term with which this group does not identify. They believe that senior centers do not have the more active programs they would be drawn to. In addition, to the extent that venues are important at all, they are more likely to be drawn to facilities that are physically appealing and serve a broader range of ages.

Among this "younger" group, there appeared to be a difference in perception between those who had been at senior centers and those who hadn't. Some who had taken an older parent to a center and actually witnessed the vitality of some of the participants were more open to the possibility of attending one in the future than those who had never set foot in a senior center.

Senior centers are doing what they can to make their facilities more appealing; however, limited resources in both time and money make it difficult for them to do the facility facelifts they would like. Even so, a number of them have managed to generate community contributions for painting and furniture, and financial support for improvements to their reception area and the addition of mini cafés.

Some are actively reaching out to the younger, employed group by offering evening classes. One center reported that after making aesthetic improvements, higher income people began attending. As centers continue to update, perception is likely to change – with increased attendance as a probable by-product.

Some focus group participants had strong reactions to the word “senior” – suggesting that senior centers rename themselves in a way that would be more appealing to them. The words “adult activity center” seemed to be more neutral and inviting. Others talked about wanting to be integrated with people of all ages in their community, rather than segregated out in a place for “old” people. They talked about the positives of intergenerational programming – and of contributing to youth in meaningful ways. Many expressed passion for working to leave behind a positive legacy for future generations. Accessing the energy and creativity of this group to enhance center-based programs makes good sense on every level.

Leadership is an important variable in making senior centers more appealing. A recent study of senior center nutrition programs in New York City concluded that by far the most critical variable in determining the success of centers was how inviting and welcoming the center leaders were - not its attractiveness, location, or any other single factor. In other words, the “trickle down” effect of human warmth and connection helped turn struggling programs into thriving ones – often in a short period of time.

Several of Seattle’s senior struggling senior centers have new, visionary leadership; and some of their boards of directors are beginning to add younger and more energetic members as well. This is an excellent time for the city to use its will and resources to support the efforts of these programs to revitalize and transform.

Senior Center Participants

People may initially come to a senior center because the center offers a class they want, such as a bridge, fitness or computer class. But others participate because something has changed suddenly, giving rise to a specific need.

“Life changes fast. Life changes in the instant. You sit down to dinner and life as you know it ends.” Joan Didion

The situation in which a 63 year-old man whose 70 year-old wife has a sudden stroke that leaves her with some functional impairments is a telling example. Neither person has previously ever considered participating in senior center activities; yet, suddenly the need is there – perhaps for adult day health or respite, a caregiver support group, intellectually engaging classes, cultural

activities they can easily attend, a social worker, or fitness classes for both spouses.

The only relevant questions the husband is looking at are:

"Where can I find the support and services I need right now?"

"Where can I learn about resources? "Can I afford them?"

"Can my wife and I get there?"

Another common scenario is one where a baby boomer becomes the primary emotional support for a newly widowed parent. Concerned about the parent's increasing isolation and depression, the adult child looks for an environment where the parent can find regular meaningful social interaction and intellectual stimulation. If s/he is lucky enough to learn about a nearby senior center, the adult child will often accompany the parent on a first visit to the center. If they both find it welcoming, the parent will return. The adult child may become involved as well, thus increasing his/her stake in helping this resource thrive.

These are two stories among many that provide a window into how and why people begin to participate at senior centers.

Because the 85+ population is our country's fastest growing age group – and these elders are living longer than ever before and "aging in place" - there is a great need to strengthen programs geared specifically to that population. Senior centers currently serve many clients between the ages of 85 and 100.

While many of the "boomers" interviewed were adamant about not participating in "senior" centers for the foreseeable future, they also could see that their need might change. In addition, they wanted these programs to be there for their parents.

Funding for Senior Center Operations

Senior centers "grew up" differently in Seattle than in many other cities. In several cities surrounding Seattle (for example Kent, Bellevue, Kirkland, Tukwila, Auburn and Redmond), senior centers are part of Parks Departments, with local municipalities providing funding for staff and facilities. Elsewhere around the country, cities also administer senior centers directly through their Departments of Aging or Human Services.

In Seattle, beginning in 1967, United Way helped develop Senior Centers, Incorporated (SCI), a non-profit organization now called Senior Services, to consolidate and streamline overhead costs at senior centers. The concept United Way envisioned was that SCI would function as an umbrella agency through which the centers would apply for United Way funding. The funds provided support for senior center operations.

At that time, most of the city's neighborhood senior centers and several in the county were administered under this umbrella. Since then, some senior centers have closed their doors while others are no longer affiliated with Senior Services, primarily for financial reasons. Currently, four of the nine centers are still affiliated with Senior Services. Each has its own board of directors.

Since the early days, Senior Services has branched out - now administering many programs in addition to senior centers, primarily related to health and wellness, nutrition, information and assistance, outreach and advocacy, and transportation.

For a number of reasons, Senior Services' allocations to its member centers have not kept pace with senior centers' increasing costs. Although United Way still provides considerable support for Senior Services, its priority areas have expanded to include homelessness and school readiness.

In 2005, Senior Services responded to the ever-tightening financial environment by decreasing allocations to three of its senior centers, including two in Seattle. The two city centers, in turn, successfully advocated with City Council to restore those funds. Beginning in July 2007, United Way is decreasing its allocations to both Senior Services and Wallingford Senior Center.

King County has traditionally been a small but significant funding source for Seattle's senior centers, a situation that is not likely to change. County funds primarily support senior centers in outlying, unincorporated areas.

Although the city funds nutrition and fitness programs at several senior centers, historically it has provided little funding for the operation of the facilities that house them. In 2007, Seattle put \$237,864 General Fund (GF) dollars into senior centers to support basic operations. However, nearly half of this money (\$100,000) came from last minute council add-ins advocated by seniors whose centers were receiving less money from Senior Services.

Seattle's investment in senior centers is low compared to the dollars other municipalities in King County invested in senior center operations (staff and facilities) last year.

A sampling of neighboring municipalities' General Funds support for senior center operations in 2007 revealed the following:

City	Number of 65+ according to 2000 census	% of total population 65+ according to 2000 census	General Fund dollars for senior center operations in 2007*	Per capita expenditure**	Notes
Bellevue	14,689	13.4	\$454,950	\$30.97	Also pays maintenance, utilities and custodial
Auburn	4,663	11.6	\$471,000	\$101.01	
Tukwila	1,345	7.8	\$313,955	\$233.42	

The above municipalities locate their senior centers in Parks facilities, but their budgets are separate.

Below, you will see two ways in which Seattle's GF expenditures on senior center operations can be viewed:

City	Number of 65+ according to 2000 census	% of total population 65+ according to 2000 census	General Fund dollars for senior center operations in 2007*	Per capita expenditure**	Notes
Seattle	67,807	12	\$237,864	\$3.51	Senior Centers alone
	67,807	12	\$817,242	\$11.55	Includes \$579,316 for Parks LRP staff

**All cities cited provide additional GF for programs such as nutrition, health promotion, etc.*

***All per capita expenditures are likely to be lower now, since the 65+ population has grown since 2000.*

Available data from many other suburban municipalities indicate similar disparities between Seattle and its neighbors.

Senior Center Challenges

Senior centers are facing many challenges due, in part, to inadequate resources. Among them are:

- Directors have little time to devote to necessary activities, such as:
 - Engaging in strategic and community-based planning
 - Developing thriving community partnerships
 - Securing general operations and facility upgrade funds
 - Creating appealing programs for "younger" old population
 - Broadening their marketing to attract new participants
- Potential decline in number of "older" old participants before "younger" group begins to fill the gap
- Inconsistent and inefficient data-gathering among senior centers
- Center boards of directors have differing capabilities
- Limited transportation resources

These challenges give rise to many opportunities for infusing new energy, vision and creativity into senior centers – and for motivating partnerships between senior centers and Parks community centers.

Wallingford and University District Senior Centers have begun collaborating more, and Wallingford's van is now available to shuttle people from neighboring senior centers who wish to participate in jointly sponsored programs. Wallingford Senior Center is planning to expand its focus beyond Fremont and Wallingford to Lake City and the northeast section of the city, where no senior center currently exists.

Greenwood has been in a tenuous financial situation in the past, but recently merged with the Phinney Neighborhood Association. This merger is infusing new energy and resources into the senior center, and Greenwood area businesses and organizations are showing increased interest in it as a result. The Greenwood/Phinney neighborhood has a large number of "baby boomers" interested in strengthening senior programming. This senior center is currently expanding outreach efforts into the Bitterlake, Crown Hill and Northgate areas.

Ballard Northwest Senior Center is on more stable footing and is actively seeking to attract Queen Anne residents.

Standards and Best Practices

The National Institute for Senior Centers (NISC), part of the National Council on Aging, currently certifies senior centers that meet specific standards related to purpose, community, planning, evaluation, governance, administration, fiscal management and facility. These could form the basis of threshold criteria which senior centers should meet when they receive new funding (see Recommendations for more detail).

There are numerous examples of "best practice" management philosophies, program models and innovative partnerships taking place in the city and surrounding areas.

Directors who have successful centers uniformly espouse a commitment to listening to what people want and need and empowering them to create those programs. In addition, successful senior centers ask their participants what they would like to contribute back. At the heart is a deep philosophical belief that a "healthy" center is one based on mutual respect, co-creation and empowered participants.

Current senior center participants in Seattle are primarily in their late 70's and 80's. However, most centers recognize the need to broaden their marketing in an effort to attract younger, more diverse participants. Some are succeeding slowly, using a number of strategies:

- Recruiting the "younger" old group as volunteers and board members - a strategy with many benefits. First, it brings in new energy from the ranks of the "younger" old, invigorating often-entrenched structures. Second, it provides a venue for newly retired people to contribute by leading classes, fulfilling their need for meaning while providing a "free" instructor for the center. Third, it eases these same people into feeling more comfortable integrating with those in the older group. And finally, it gives this new generation a stake in the ongoing success of the center.

- Offering programs during evenings and weekends to accommodate people still working
- Teaming up with local colleges/universities to provide intellectually stimulating programs
- One center received a grant to train volunteers wanting to support non-profits in a particular geographic area. The volunteers all received excellent training, and many became senior center volunteers.

All too often, senior centers and Parks community centers have been territorial about their programs, which has resulted in inefficiencies and duplications. This is changing slowly. Now, a number of senior centers are beginning to partner with other community organizations, including Parks community centers and neighboring senior centers.

For example:

- In SE Seattle, a senior center and community center are collaborating on a walking program and trips, and are sharing a van
- In West Seattle, the senior center and community center regularly share information about each others' programs with participants, and they also partnered on a successful fashion show
- SE and Central Area Senior Centers are doing joint recreational programming
- Senior centers in Seattle's north end are sharing a van for trips and other co-sponsored activities

Seattle senior center and Parks LRP staff would benefit from a regular forum in which to share "best practices" and nurture collaborative efforts.

Opportunities and Partnerships

These challenges demand that centers adapt, change and grow. Otherwise, their survival cannot be guaranteed. However, survival alone is not the goal; rather, the city now has an important opportunity to help senior centers emerge as the thriving resources that a truly holistic system depends on. While senior centers are only one arm of a healthy aging network, they are a critical piece of the entire service system.

Some believe that the city might have to choose the right basket to invest in: Parks community centers OR senior centers. Given the demographics, however, it would be unwise and shortsighted to see this as an "either/or" situation. There is and will continue to be enough need to go around, suggesting that both service paths must become more robust, relevant and integrated.

The true opportunity is for creative partnerships, such as mutual operating agreements, to emerge between these two city resources in response to the

ever-growing community need. In an area where neither community centers nor senior centers are truly thriving, both can "win" if they work together more closely and look for new service models.

There is a need to break down the separate "silo" or competitive models that have existed between community and senior centers. The concept that would be most useful as communities move ahead is one that integrates a geographically-based "center without walls" – that is, a fluid infrastructure between senior and community centers' LRP staff that reflects joint planning, marketing and resource utilization. Since city funds provide support to both entities, the city should require close collaboration between the two as a condition of funding.

Ways in which the two resources could collaborate are in:

- Joint program planning
- Shared marketing
- Regular information exchange
- Joint activities
- Shared resources, i.e. senior centers possibly using Parks facilities, staff and vans for some programs and visa versa.

Parks' recreational programs for older adults are a critical component of the overall service system. However, programs for older adults appear not to have been a high priority for Parks or for the Associated Recreational Council (ARC), which manages the finances related to class and trip fees as well as the hiring of instructors. For example, Parks has cut morning hours at community centers - a move that hits the senior population harder than other groups. And Parks' LRP Advisory Council members report that ARC has shown little support for senior program grant-writing, marketing and instructor recruitment.

To nurture these programs requires staff who are both knowledgeable about and committed to collaborating with other organizations serving the older population. The LRP staff are a skilled group who meet these criteria.

Parks' commitment to serving the older population is foundational to the emergence of innovative, collaborative models envisioned in this report.

Beyond the Parks-senior center collaboration, numerous opportunities for partnerships involving public schools, institutions of higher learning, health care providers, businesses, housing providers, non-profits such as Girls/Boys clubs, and others also exist and should be actively pursued.

Conclusions

A number of issues are converging that place Seattle at a crossroads in choosing how current and future elders will regard it – as a city that supports the activities and infrastructure older people need in order to remain healthy and thriving in their communities or one that does not. The demographic data are compelling. The political will must be there as well.

Will the city choose to strengthen centers that house activities for older people – both the more active group and the less active group needing more specialized and integrated services - or will the city choose a different path? Currently, both senior centers and Parks community center older adult programs are struggling to survive.

In community meetings, people were extremely vocal about their fear that the programs they rely on – both at senior and community centers - might not survive. Many of them talked passionately about how they have lived and contributed to the city their whole lives and now owe their health – mental, emotional and physical - to the center-based programs they participate in. These are the people who repeatedly expressed concern about being forgotten and marginalized if the city chooses not to act.

Research cited earlier indicates that "...a senior center-based approach to disability prevention and chronic illness self-management was effective in reducing major disability and hospitalizations in chronically ill older adults" (*see Journal of American Geriatrics Society citation in Appendix 1*). The fact that healthier people require less costly care over time is a financial plus for government at all levels. Strengthening Seattle's senior centers is both a humane and sensible commitment of city resources.

What's Next?

A major component of this project has been to develop recommendations regarding the city's support for senior centers – now and into the future. The remainder of this report will be devoted to these recommendations.

Recommendations

Some of these recommendations are administrative in nature; a few will require additional city funding; and others can best be implemented via public/private partnerships that the city can be instrumental in fostering.

Public Policy

Need: A formal declaration that recognizes the importance of supporting center-based programs for seniors as an integral and important part of the city's aging service network.

Rationale: Unlike most other municipalities, Seattle has never developed a clear policy and standards for supporting senior centers. Given declining funding from other sources in recent years and growing need in the near future, it is an appropriate time for the city to make this commitment as part of its continuing investment in a healthy community.

In many other neighboring municipalities, ongoing support for senior center operations has come through their Parks' departments – with the city paying for staff, facilities, utilities and maintenance. Stable funding for these programs has helped them thrive over time.

Recommendation #1: Immediate adoption of a statement recognizing that older people are a valuable resource to our community and that senior centers are an important community focal point where older people come together for services and activities that enhance their dignity, support their independence and encourage their involvement in and contribution to the community. Senior centers are a key component of a healthy aging network capable of serving the increasing and diverse needs of current and emerging generations of older people.

Recommendation #2: The Department of Parks & Recreation's mission should include the importance of programs for the 50+ population. This, in turn, must be "bought off" at the highest levels of department leadership.

Recommendations Requiring Public and Private Funding

Priority #1. Funding for Senior Centers: Basic Operations and Capacity-building

Need: To strengthen existing centers' financial stability so they can build capacity and become more sustainable community resources.

Rationale: In the late 1960's, United Way of King County helped create Senior Centers, Inc. (now called Senior Services) in an effort to coordinate the myriad of neighborhood senior centers in business at the time under one umbrella organization. As time progressed, available funding did not keep pace with the cost of providing services to Seattle's rapidly aging community. Senior Services and the other senior centers in Seattle have survived by piecing funding sources together: United Way; federal, state and county; membership dues; program service fees; individual donors and fund-raising events.

Across King County, local municipalities have recognized the value and importance of supporting senior center operations by incorporating funding for local senior centers into their priorities. The city of Seattle has not had a policy in place to do that. Failure to do so at this opportune moment in time – before the "boomer" generation is fully on board – could well lead to the further deterioration of senior centers, most of which are struggling to survive with very limited resources.

Recommendation: The city should provide operations support to senior centers, with performance outcomes tied to capacity-building measures.

Over the next three years, the city should phase in funding for senior center operations in a manner that will support capacity building and sustainability. Centers receiving operations funding will be held to increasingly stringent threshold criteria and required to meet performance expectations based, in part, on the National Institute of Senior Centers' standards for certification.

This recommendation is designed to bring consistency into the senior center allocations process and tie city funding to outcomes related to expanded vision, marketing, community partnerships and community-driven strategic planning.

After continuing to fund senior centers currently receiving GF dollars for one year, only those meeting the to-be-developed threshold criteria would be eligible to receive future funding. In addition, centers would be eligible to receive special capacity-building funds via a competitive RFP process to add a half-time staff person. The additional staffing would enable center directors to concentrate on planning, marketing, building a more stable financial base, and nurturing new partnerships.

Year 1 - 2008. Current centers continue to be funded for one more year. New capacity-building funds for qualified centers added mid-year.

- **Beginning 1/08, the city should continue to fund senior centers that currently receive General Funds for Basic Operations for one year.**

Funded centers would be required to do the following:

- Participate in training opportunities as designated in its program contract.
- Develop formal partnerships with other community providers
- Complete a client satisfaction survey
- Additional quality improvement efforts as negotiated

- **Beginning 7/08, 18-month Capacity-building Funds (new money) granted to those centers meeting threshold eligibility criteria.**

Eligibility criteria might include the following:

- Updated mission statement
- Demonstrable community support and proven track record
- Sound business practices: organizational operating budget; audited financial statements, evidence of insurance
- Qualitative evaluation reflecting consumer input
- Diverse, actively committed Board of Directors

Additional consideration might be given to:

- Numbers of people served/unit cost
- Whether a special needs population is being served that would not otherwise be served

ADS should give special consideration to proposals that reflect partnerships between senior centers, between senior centers and Parks community centers, or any other collaborative efforts that lead to increased efficiencies and broader participation.

Performance guidelines might be:

- Strengthening community partnerships with...
 - Parks community centers
 - Educational Institutions
 - Churches
 - Housing
 - Businesses
 - Hospitals and other health care facilities
 - Other
- Engaging in long-range strategic planning that includes...
 - Thorough assessment of current center concerns
 - Active community involvement
 - Plans for facility maintenance and enhancements, if needed

- Greater financial sustainability as evidenced by increased number of donors, administrative efficiencies, partnerships that provide monetary or in-kind support
- Increasing marketing and outreach efforts aimed at...
 - Reaching 50+ population
 - Collaborations with other potential providers that involve joint fund-raising, co-marketing of services and activities, purchasing agreements that result in economies of scale, and other options that might increase access to services and consumer participation
- Program Evaluation that includes...
 - Efficient data-collection system
 - Qualitative measures
 - Participant feedback and input into new programming
- Participation in Center Leadership Development and Training program
- Participation in Community Planning

Year 2 - 2009. ADS will require more stringent criteria to be met for all Basic Operations funding. Capacity-building funds continue through 2009.

All centers funded previously for Basic Operations will be required to meet more stringent criteria based on NISC standards. At this point, some of the weaker centers may be forced to merge or partner in order to survive.

Year 3 – 2010. Merged Operations funding (Basic Operations and Capacity-building), via an RFP process. These funds will be ongoing, with a two-year funding cycle. Innovative models would be encouraged and rewarded.

Proposal criteria should include indicators of how centers are progressing in/benefiting from the community planning process, including special consideration for new innovations.

For example, special consideration might be given to a senior center-Parks' community center partnership that might involve two nearby facilities (i.e. an underutilized, well designed community center and a senior center with inadequate accessibility) coming up with a new model whereby the senior center might relocate to the community center. This could result from a sector-based community planning process, and should not be a "top-down" administrative directive. Recommendation #2 below describes the community planning process envisioned.

Cost justification for city General Funds to support senior center operations:

2008: \$318,000 for Basic Operations reflects the 2007 GF dollars allocated for senior center basic operations plus an amount to account for the further decrease in United Way funds. (\$238,000+\$80,000)

Additional \$160,000 through RFP to fund capacity-building that begins in July 2008. This figure is based on a 6-month cost of providing ½ time staff at 8 centers. However, some centers may not meet the threshold criteria.

Total: \$478,000

2009: Continue \$318,000 for Basic Operations.

Annualize capacity-building funds to \$320,000. This amount is based on additional ½ time staff for a full year.

Total: \$638,000

2010: \$638,000 granted through an RFP. This reflects merged funds with an adjustment for inflation and maintenance of higher level of support for centers to remain robust over a period of time. It also includes \$100,000 as an incentive to help support newly created, collaborative models developed as a result of community-based planning. This could include a Parks-senior center model that utilizes Parks facility for all programming, among many other options.

All geographic sectors will receive money, and the RFP will be open to new providers.

Total: \$738,000

Priority #2. Geographic Sector-based Community Planning

Need: This is particularly important given the current lack of integration among center-based programs. Each community has unique populations and resources, and community involvement in designing unique service models will result in the best, most sustainable and integrated systems. Broad participation in this process could inspire the long-term partnerships needed for these programs to flourish.

Process: This process would occur in six geographic sectors (SE, SW, Central Area, Downtown, NW and NE).

A central advisory group composed of private funders (such as United Way and other foundations) and relevant city agencies (Parks, HSD) would oversee the planning process. A number of stakeholders at the geographic sector level would be represented: current and future consumers; racial and ethnic groups; senior center and Parks community center staff; adult day health and public and private senior housing providers; rotary clubs and businesses; other non-profits, community clubs, and area faith-based organizations.

The lead organization (possibly United Way or ADS) would manage this effort. Depending upon the availability of resources, they would either hire a full-time planner who would work with community leaders in each geographic sector - or ¼-time planners for each sector (a more expensive option).

Innovative models are likely to emerge from this process that take into account the unique demographics and needs of each sector. Examples might include center mergers, a strong central core with satellite operations, Parks-senior center pilot projects, circuit-riding across centers, among many others.

The RFP for the Merged Operations funding in 2010 will provide financial incentives for innovative models to help ensure their success.

Benefit: Outcomes from the community planning process will reflect each sector's best thinking about **center-based infrastructure** needed to support the continuum of services and activities for the city's burgeoning older population. This, in turn, will help policymakers make sound allocation decisions over time.

Funding: \$200,000 needed from a coalition of partners. Potential partners to consider soliciting for match would be United Way, City of Seattle, King County, The Seattle Foundation, The Paul Allen Foundation, Boeing Blue Bells, Philanthropy Northwest, Weyerheuser, Safeco, and others.

Note: Some foundation letter-of-interest deadlines for 2008 funding (Paul Allen Foundation) are approaching in July.

City contribution: \$100,000 (One-time city commitment needed to initiate the process – half made available in 2008 and half made available in 2009.)

Priority #3. Senior Center Leadership Training Program (1 year)

Need: There is a critical need for senior center directors and their boards to become stronger and more effective.

This proposal provides an ideal opportunity for the city to leverage its influence to create a private-public partnership able to fund a Senior Center Leadership Program for boards and directors. Ideally, this program would begin no later than March of 2008 and continue for one year.

Through this program, center leaders will receive practical training that supports each center's capacity to expand their vision, build capacity and become more financially secure and independent. Seminars would focus on a range of topics, including:

- Strategic planning
- Financial management
- Partnership development
- Board development (evening, as many board members work)
- Market expansion
- Creative facility enhancements
- Working effectively with volunteers
- Emergency preparedness & response

Senior centers not currently receiving city funding should be invited to participate. Involvement in this training program will position center directors to be effective players in the sector-based community planning process.

Funding: \$30,000 would come from potential community partners, such as United Way, King County and local foundations. Non-profit Assistance Center, Executive Alliance, and Executive Service Corps are among the resources that might have a role to play. This program would be managed either by a funding partner or by Seattle Human Services' Department's Aging & Disability Services (ADS).

Priority #4. Administrative Recommendations.

Quarterly Center "Best Practices" Meetings

ADS should partner with Senior Services to host quarterly meetings with all senior centers, including Parks' Lifelong Recreation staff, for the purpose of sharing "best practices" and nurturing partnerships that might inspire new service models. Currently, Senior Services holds meetings with its affiliated centers, primarily around issues related to data collection.

These meetings could be integrated into the Senior Center Leadership Program for the first year but should be on-going after that. All centers, whether they receive city funding or not, should be invited to attend.

Consolidated Data Collection and other Technology

ADS should work with other area senior center funders, such as United Way and King County, to implement a user-friendly data-collection and reporting method. The system would provide useful demographic, outcome and performance data for center administrators and more accurate, consistent information for funders.

A state-of-the-art system called MySeniorCenter.com is now being used in a number of senior centers nationwide to high acclaim from center administrators, funders and program participants. There is a one-time set-up and equipment fee based on the number of computer stations needed and a small annual maintenance fee that individual centers would absorb.

ADS, Senior Services and others interested should actively pursue a source of funding for this type of technology. Among the sources tapped in other areas to cover the system's initial costs have been foundations, city and county governments, and non-profit "friends-of-center" groups.

Other technology needs include replacing antiquated phone systems and website development.

Urban Centers and Station Area Redevelopment Projects

The city should add providing center-based senior services as one of the benefit options for developers taking advantage of incentive zoning in Seattle's urban centers and station areas. Currently, options include day care centers and addition of low-income housing units.

City-owned Senior Center Facilities

Three of Seattle's nine senior centers are in city-owned buildings. None is ideal in terms of its location and/or accessibility. As a result of the sector-based community planning process envisioned, communities may decide that moving to a different facility would be beneficial. If that is the case – and if the city decides to sell these buildings to private developers, the money should be earmarked to support operations funding for centers serving seniors.

If the city redevelops city-owned property to provide new housing, it should explore the possibility of providing ground level space to serve seniors in a center-based setting.

Facilities Upgrades

Several senior centers need enhancements to improve their safety, accessibility, energy efficiency and attractiveness. Where safety and accessibility are factors in one of the city-owned buildings (Greenwood Senior Center), the city should provide the upgrades needed. Before energy efficiency improvements are funded, the city should do a cost-benefit analysis to determine the wisdom of the expenditure. Whatever savings do result could translate into increased operating funds for the center.

In all other cases, ADS should help senior centers identify appropriate funding sources (such as Community Develop Block Grant and Real Estate Excise Tax) for structural improvements, as well as match fund opportunities for other enhancements.

See Appendix 4 and 5 for further detail on report recommendations.

Appendix 1: Resources

The following resources were consulted in the course of this project:

Individuals/Organizations

Aging & Disability Services:
Pam Piering and staff

Senior Services:
Denise Klein
Joanne Donahue
Senior Center Task Force
Dr. Paul Beck
Neal Broidy
Kathleen Crompton
Ruth Herold
Earle Leonard
Jean Veldwyk

Mayor's Office:
Marielyn Littlejohn
Jennifer Moon

King County:
Linda Wells

United Way:
Linda Woodall

Parks & Recreations:
David Jensen

MOSC:
Irene Stewart

Seattle Senior Centers:

Central Area

Cynthia Andrews and Theo Mace
(Board Pres.)

Greenwood/Phinney

Cecily Kaplan

Northwest

Carlye Teel

Pike Market

Dorothy Lengyel and Zoe Freeman

Southeast
Southwest
University (Tallmadge-Hamilton)
Wallingford

Mark Williams and Natalya Brusilovsky
Karen Sisson
Barbara Clarke and board members
Kathleen Crompton and board members

Filipino sites:
IDIC
PAEP

Conrado Rigor
Bob Friedlander

Public Health:

Robin Pfohman, Carlos Dominguez

Other organizations:

Sea-Mar
NCOA
John Chaney
Bill Freeman

Irma Farsch
Constance Todd
Historic Seattle
Myseniorcenter.net

Other individual experts consulted:

Teri Burke
Timmie Faghan
Suzy Favaro

Redmond Senior Center
Longtime Expert
Northshore Senior Center

Group Meetings

ADS Sponsors

ADS Advisory Council

"Brain Trust" – experts consulted

Dali Castillo
Connie Devaney
Burk Dykes
Ceil Erickson
Marianne Logerfo
Ed Medeiros
Gary Tang
Cathy VonWald

IDIC
Kawabe House
Senior center volunteer
Seattle Foundation
Longtime Expert
Phinney Neighborhood Association
ACRS
Bellevue Senior Center

Mayor's Council on African American Elders

United Way Impact Council

Focus groups

Elders and community leaders from the Filipino Community
Aged 50+ ethnically diverse people in central and southeast Seattle
North end "boomers" (late 40's to early 60's)

Reports

National

Baby Boomers Envision Retirement. AARP, 2004.

Boomer/Healthy Aging Database. Natural Marketing Institute, 2006.

BoomerANG Project Final Report prepared for Montgomery County, PA. 2006.

Generational Market Place Strategy. The Generational Imperative, 2006.

Critical Factors in the Successful Utilization of Senior Center Meals, New York City Department for the Aging, 2007.

Preventing Disability and Managing Chronic Illness in Frail Older Adults: A Randomized Trial of a Community-based Partnership with Primary Care, Leveille, Wagner, Davis, Grothaus, Wallace, LoGerfo and Kent, American Journal of Geriatrics, October 1998-Vol.46, No. 10.

Local

AAEP, Final Report Community Input n the Needs of African American Elders in Seattle and South King County, 2004 by Neal Adams, Global Consulting.

Area Plan on Aging, 2006-2007 Update. Aging and Disability Services.

Next Chapter focus group findings from 2006. Next Chapter is one of 35 organizations located in communities around the country focused on making the "second half of life" vital and meaningful. Next Chapter of Puget Sound, a non-profit using Senior Services as its fiscal agent, is a consortium of organizations that includes Senior Services, Antioch University, Executive Service Corps, Aging & Disability Services, Workforce Development Coalition, Leadership Tomorrow, Small Business Administration, Retired & Senior Volunteer Program of Washington, and the State Bar Association's Lawyers Assistance Program.

Seattle's 60 and Over Population Estimates and Projections 2000-2011. Completed for Aging & Disability Services by Lopez & Cheung, Inc. 2006.

Phinney Neighborhood Association Strategic Plan Update, 2007.

Aging Boomers and Seniors in Seattle – Populations Projects based on U.S. Census and OFM, Mayor's Office report produced in 2007.

Appendix 2: Map

2011 Population Age 60 and Over



Appendix 3

Senior and Community Centers Serving Older Adults (current as of Spring 2007)

Geographic Sector: Northwest

	Parks Community Center	Non-profit Senior Center	Affiliation	Activities
13035 Linden Ave. N.	Blitter Lake			Fitness, bridge
2101 NW 77 th	Loyal Heights			Support, fitness, arts and crafts
525 N. 85 th		Greenwood/PNA	Phinney Neighborhood Association	Meals, enhanced fitness, classes, support groups. City owns building.
5429 32 nd NW		Ballard NW SC	Senior Services	Classes, meals, social services, Meals, fitness, classes
6020 28 th NW	Ballard			
4649 Sunnyside Ave. N.		Wallingford (Community) Senior Center	Independent non-profit with unsustainable	Meals, fitness, classes, supportive services
		Good Shepherd Center – Historic Seattle		
2550 34 th Ave. W.	Magnolia			Fitness and other classes
1901 First Ave. W.	Queen Anne			Fitness and other classes
	Regional Trips			

Geographic Sector: Northeast

	Parks Community Center	Non-profit Senior Center	Affiliation	Activities
7201 E. Green Lake Dr. N.	Green Lake			Fitness, classes
10510 5 th NE	Northgate			Fitness, Social
7110 62 nd Ave NE	Magnuson			Enhanced fitness and classes
6535 Ravenna Ave NE	Ravenna-Eckstein			Fitness and pickleball
4554 NE 41st	Laurelhurst			Fitness and classes
10517 35 th NE	Meadowbrook			Fitness and classes
12531 28 th NE	Lake City			Chorus
5225 15 th NE		Hamilton House/ University District Senior Center	Independent. Supportive financial relationship with Kiwanis.	Range of services – some evening classes for boomer and intergenerational programming
	Regional Trips			

Geographic Sector: Southeast

	Parks Community Center	Non-profit Senior Center	Affiliation	Activities
4600 38 th Ave. S.	Rainier			Fitness and classes
8825 Rainier Ave. S.	Rainier Beach			Fitness and classes (pool)
2820 S. Myrtle	Van Asselt			Fitness and classes
4655 S. Holly St.		S.E. Seattle Senior Center	Senior Services	Fitness, support groups, meals, other services
3801 Beacon Ave. S.	Jefferson			Fitness and classes
7301 Beacon Ave. S.		Filipino Senior Center	International Drop-in Center (IDIC)	Advocacy, fitness, citizenship for Filipino seniors
5902 Lake Washington Blvd.	Seward Park			Walking
	Regional trips			

Geographic Sector: Southwest

	Parks Community Center	Non-profit Senior Center	Affiliation	Activities
5817 SW Stevens	Alki			Fitness and classes
2700 California SW	Hiawatha			Recreation classes
6920 34 th SW	High Point			
6553 High Point Dr. SW			High Point Housing Authority	Bingo and Potluck
2801 SW Thistle	Southwest			Water exercise, recreation, classes
8201 10 th Ave. S.	South Park	South Park Senior Center*	South Park Area Redevelopment Committee (SPARC)	Meals Program, community center ceramics meets at SPARC
2801 SW Thistle	Alki			
4217 SW Oregon		Senior Center of West Seattle	Senior Services	Enhanced Fitness (pool) and classes
	Regional trips			Fitness, meals, classes, other services

*Does not meet senior center definition used in this report.

Geographic Sector: Central

	Parks Community Center	Non-profit Senior Center	Affiliation	Activities
2323 E. Cherry	Garfield			Fitness & classes Vietnamese Meals
104 17 th Ave. S.	Langston Hughes Performing Arts			Cultural, classes
330 19 th Ave. E.	Miller			Yoga, Korean meals
1618 E. Calhoun	Montlake			Arts & Crafts
917 Yesler Way	Yesler			Classes
500 30 th Ave. S.		Central Area Senior Center	Senior Services	Classes, meals, fitness, other services

Geographic Sector: Downtown

	Parks Community Center	Non-profit Senior Center	Affiliation	Activities
85 Pike St. #1000		Pike Market Senior Center	Pike Market Public Development Authority	Meals, extensive services, clinic

**Special Populations
(located in Central & South Seattle)**

Address	Site	Ethnicity &/or Group	Sponsoring Organization	Activities
409 Maynard Ave. S. 2121 26 th Ave.	Bush Hotel Center Park (SHA)	Indo-Chinese/Chinese Korean Elders, also open to the building residents.	ACRS ACRS	Meals – some programs Meals – some programs
330 19 th Ave. E.	Miller Community Center	Korean Senior Club	ACRS	Meals – some programs 2x/wk
2323 E. Cherry St.	Garfield Community Center	Vietnamese Senior Club	ACRS	Meals – some programs – Sound Step, Walking and stretching
6924 – 42 nd Ave. S. 8201 10 th	Duoc Su Vietnamese Temple South Park Community Center (SPARC)	Vietnamese Samoan/Polynesian Program	ACRS Pacific Asian Elderly Program (PAEP)	Meals – some programs Meals – some programs
5740 Martin Luther King Way S. 7031 Beacon Ave. S.	Filipino Community Center	Filipino Filipino	PAEP International Drop-in Center (IDIC)	Meals – fitness Meals, classes, lifetime fitness
5740 Martin Luther Link Way S.	Vietnamese Filipino community Center	Lao/Hmong Refugee Program Cambodian	PAEP	Meals – some programs
2524 – 16 th Ave. S.	El Centro de la Raza building	Hispanic	El Centro de la Raza	Meals – some programs
409 Maynard Ave. S.	Bush Hotel	Chinese/ Filipino	Seattle-Chinatown International Downtown PDA	Meals – some programs
1011 S. Weller	SHA Leschi Center	Native American	United Indians of All Tribes Foundation	Meals – some programs
3320 Rainier Ave. S.	Somali Community Services Building	Oromo-Somali Refugee	Somali Community Services	Meals – some programs
Parks' Sound Steps walking program serves 60% ethnically diverse people, including Laotian, Hispanic, Korean, African American, Vietnamese, and Korean active elders.				

Appendix 4: Operations

Senior Center Operations – Recommended City Funding 2008-2010

Year	Month	Activity	Program	Eligibility Criteria	Outcomes	Previous City \$	New City \$	City \$ Total
2008	Jan - Dec	Continue current centers	Basic Operations	Open to currently funded centers. Meets definition of senior center contained in report.	New performance outcomes	\$238,000 (includes council add-ins for 2007.	\$80,000 Anticipates cuts from other funders	\$318,000
	March	ADS issues RFP	Capacity-building Grant	Open to currently funded centers. Threshold criteria must be met.	High performance outcomes		\$160,000	\$160,000
	July – Dec	Funds begin						
TOTAL						\$238,000	\$240,000	\$478,000
2009	Jan-Dec		Basic Operations	Higher threshold - based on NISC standards.	Higher performance outcomes.	\$318,000		\$318,000
	Jan - Dec		Capacity-building	Continuation of funds from 2008		\$160,000	\$160,000	\$320,000
	October	ADS issues RFP	Ongoing Operations (Merges Basic Operations and Capacity-building)	See recommended guidelines in body of report				
TOTAL						\$478,000	\$160,000	\$638,000
2010	2 years		Merged Operations Funding	High threshold criteria	High performance outcomes	\$638,000	\$100,000* (see Notes)	\$738,000
TOTAL ANNUAL ALLOCATION						\$638,000	\$100,000	\$738,000

Appendix 5: Special Projects

Planning & Capacity Building (non-operations \$) Requiring Public/private Funding Partnership 2008-2009

Year	Month	Program	New City \$	Other \$	Total	Notes
2008	July - Dec	Geographic Sector-based Planning -- year-long process	\$50,000 <i>Planning can begin with city money only.</i>	\$50,000	\$100,000	Solicit foundation and other support. With or without this support, this process should move ahead with city money. This represents 6-months funding of a 12-month project.
	Jan-Dec	Center Leadership Training		\$30,000		Relevant parts of this program should be available to Parks LRP staff, as well as to all senior centers - not only those receiving city funds. Approach United Way and others for funding support.
	Ongoing	Quarterly "best practices" meetings	<i>Can be accomplished within existing resources</i>			ADS and Senior Services should partner in this. Parks and other senior centers should be included.
		Technology -- data collection and reporting system		<i>Comprehensive estimate needed</i>		ADS, Senior Services, King County and United Way should develop estimate and "game plan" for raising funds to purchase state-of-the-art data collection and reporting system
Total City \$			\$50,000			

Year	Month	Program	City \$	Other \$	Total	Notes
2009	Jan-June	Geographic Sector-based Planning -- completion of project	\$50,000	\$50,000	\$100,000	Planning can continue with city money only. Solicit foundation and other support. With or without this support, this process should move ahead with city money.
Total City \$			\$50,000			