



# Still Waters

Adult Day Center

## Still Waters Visioning Process Final Report

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Still Waters Adult Day Center (Still Waters) has grown steadily over the past several years and is an important ministry of Castleton United Methodist Church (CUMC). In order to take stock of this tremendous growth, Still Waters leaders embarked on a visioning process to figure out where to go from here so that the Still Waters staff and CUMC leadership can work toward that goal. In late fall 2013, Still Waters engaged Community Solutions, Inc., (CSI) to shepherd this visioning process resulting in a vision of what Still Waters will look like in the next five years. This vision would serve as the cornerstone for CUMC staff and leadership as Still Waters moves into the future.

## The Visioning Process

In order to construct a vision that would have broad support, Still Waters staff and consultants established a Visioning Committee in November 2013. The Visioning Committee was comprised of a diverse group of stakeholders who brought a variety of perspectives and included Still Waters staff and volunteers, Still Waters Board members, CUMC leaders, CUMC members, adult-aging industry experts, and family members of Still Waters' guests. The 14 Visioning Committee members and their titles/affiliations are listed below.

<b>Name</b>	<b>Title/Affiliation</b>
<b>Paul Bickle</b>	Still Waters Volunteer
<b>Mimi Ferrara</b>	Spouse of former Still Waters guest
<b>Chris Girvin</b>	Chair, CUMC Council
<b>Deb Harlamert</b>	Guest Care Staff, Still Waters
<b>Amy Hogan</b>	Assistant Director, Still Waters
<b>Kristen La Eace</b>	CEO, Indiana Association of Agency Areas on Aging
<b>Tracey Leslie</b>	Associate Pastor, Castleton United Methodist Church; Still Waters Board Member
<b>Chuck Mathis</b>	Son of former Still Waters guest
<b>Doug May</b>	Director of Planning and Quality Assurance, CICOA
<b>Kathy Pellman</b>	Director, Still Waters
<b>Emily Tisdale</b>	President, Indiana Association of Adult Day Services
<b>Meredith Wilson</b>	Board Chair, Still Waters
<b>Kim Yeager</b>	Daughter of current Still Waters guest

The Visioning Committee helped guide the process of collecting data and input to shape Still Waters five-year vision and provided advice and feedback along the way. In addition to direct feedback from the Visioning Committee, CSI gathered information in the following ways:

- Review of state and national adult day service trend data and best practices
- Community Survey to gather perspectives from stakeholders on the interest in/demand for adult day services and interests in Still Waters, specifically

- World Café to gather perspectives from the broader community about the vision for Still Waters and what the future should hold.

### **State and National Trend Data and Best Practices Review**

CSI conducted a review of literature on the national and state-wide trends for adult day service providers, including who the consumers are, who the providers are, and revenue streams. In addition to looking at the trend data, CSI reviewed national best practices for adult day service providers. The Adult Services Overview is included as Appendix A.

The trend data allowed Still Waters stakeholders to compare Still Waters with other adult day centers around the country. While much of the client population trend data echoes that of Still Waters' guest population, one of the most glaring differences between Still Waters and the national averages regards client capacity. For the 4,600 adult day centers operating across the United States, the average capacity is 40 adults.<sup>1</sup> Still Waters' current capacity is only half of that, about 20 adults. Still Waters does follow the National Adult Day Services Association's (NADSA) best practice of keeping enrollment at 1.5 to 2 times that of capacity, with current enrollment around 30.

The best practices also provide useful information to consider as Still Waters grows. NADSA recommends that a Registered Nurse (RN) or Licensed Practical Nurse (LPN) is on site at adult day centers at all times, and 59% of adult day service centers across the country have some RN staff<sup>2</sup>, and 45% have LPN staff<sup>3</sup>. Still Waters currently does not have any RN or LPN staff. NADSA also recommends providing transportation for clients to and from the center. Not only do 87% of adult day centers around the country provide round-trip transportation to and from the center, but 78% also provide transportation to and from social and recreational activities, while 55% provide transportation to and from medical and dental appointments.<sup>4</sup> Still Waters does not currently provide any transportation for clients. Another NADSA best practice is for adult day centers to provide case/care management to the families of clients. Although Still Waters has some services for caregivers of their guests – and considers many of the services provided to guests to benefit the caregivers – it does not currently offer case/care management services to guests' families.

Plans to expand capacity, increase the professional staff, add transportation services, and increase services for caregivers are all included in the five-year vision.

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<sup>1</sup> MetLife

<sup>2</sup> CDC/NCHS (2012)

<sup>3</sup> Ibid.

<sup>4</sup> Ibid.

## Community Survey

In December 2013, CSI administered the Still Waters Visioning Process Community Survey to community members, including friends of Still Waters, members of CUMC, professionals and experts in adult day services or related fields, and others with an interest in caregiving. The purpose of the survey was to inform the development of the five-year vision for Still Waters. An invitation with a link to an electronic version of the survey was sent to individuals on the Still Waters contact list, and those individuals were invited to share the survey link through their various networks and listservs. The invitation was emailed through the Still Waters listserv and the Indiana Association of Adult Day Services listserv. In addition, paper copies of the survey were made available at Still Waters and CUMC for individuals to complete. A total of 206 individuals completed the survey. These individuals are from 12 different Indiana counties; have a variety of roles within CUMC, Still Waters, the adult day/long-term care or service industry, and the health care industry; and vary in age from 18-39 to those who are over 75.

The survey results were summarized and reviewed by the Visioning Committee, which helped interpret the results. The full survey summary can be found in Appendix B. According to the Visioning Committee, the biggest takeaways from the survey related to the model for growth and the religious affiliation.

When survey participants were asked about their preference for the model of growth that Still Waters should pursue in the coming years, only two respondents (1%) preferred that Still Waters should ‘stay the same’. Ninety-nine percent of respondents indicated Still Waters should grow in some way, with 44% preferring expansion in its current location, 22% preferring Still Waters establish additional locations, and 13% preferring Still Waters grow through relocation. Based on these responses and their own knowledge of Still Waters and the adult day services industry, the Visioning Committee decided that the five-year vision for Still Waters would include some way to expand capacity.

In addition to the importance of growth, Visioning Committee members were struck by respondents’ feelings on the importance of Still Waters maintaining religious affiliation. Fifty-seven percent of survey participants indicated religious affiliation is ‘very important’, and about one-quarter (27%) said it is ‘somewhat important’. With this information and with members’ personal experiences with Still Waters and other adult day centers, the Visioning Committee began to highlight the importance of the relationship between Still Waters and CUMC.

The clear message that was communicated through the survey is that stakeholders, regardless of affiliation, believe that Still Waters should grow and expand – both in terms of number of individuals served and in terms of the types of services available. Additionally, they should maintain their religious affiliation.

## World Café

In February 2014, CSI facilitated a World Café conversation. Rooted in intentional design of space, effective questions, and connection of diverse perspectives, a World Café allows a group to respond to key questions, listen together for patterns and insights, and share collective discoveries.

Eighty-six (86) individuals – including Visioning Committee members, Still Waters staff and volunteers, family members of current/former Still Waters guests, CUMC members, CUMC staff, and CUMC leaders – were invited to attend the World Café and share their input on how Still Waters should grow and serve those in need of adult day services, while maintaining the spirit of what makes Still Waters such a unique program. Of those invited, 36 individuals participated in the World Café.

During the World Café, participants engaged in three rounds of small group discussion based on the following effective questions:

- 1) What are the key components that create the “environment” of Still Waters?
- 2) What are the most valuable/important services that Still Waters should offer now and in the future?
- 3) What should the relationship between CUMC and Still Waters be (assuming Still Waters maintains affiliation with CUMC)?

Throughout the various conversations, themes emerged. Visioning Committee members, most of whom participated in the World Café, reviewed the notes from the World Café and provided input on the vision based on those themes and their personal knowledge and experience. Detailed notes from the World Café are included in Appendix C.

While Visioning Committee members noted the importance of many of the themes discussed during the World Café – including the physical environment/atmosphere that Still Waters provides, the staff and volunteers, the activities for Still Waters’ guests, and the services for guests that support families – the conversations that stood out the most to Committee members were about Still Waters’ relationship with CUMC, the addition of services for caregivers and families of guests, and an interest in expanding professional staff.

Most of the comments during the World Café conversation about the relationship between Still Waters and CUMC were about Still Waters maintaining a strong relationship with the Church. With this in mind, the ideas of greater collaboration between Still Waters and CUMC, an advisory or governing board for Still Waters within CUMC, and stronger relationships with CUMC members and other CUMC ministries were discussed. One of the most common themes during this conversation was about the fact that this relationship should be maintained and strengthened because Still Waters is not just a ministry but a mission of the Church. When reviewing the notes from the World Café, the Visioning Committee noted the disconnect

between Church members' perception of Still Waters services and broader engagement with CUMC and the reality of the services and relationship. Committee members supported the idea that Still Waters should foster a stronger relationship with CUMC and its members.

Another common theme during the World Café was about the need for and interest in Still Waters providing more services to guests' caregivers and families. When asked about the services Still Waters should offer in the future, many of the suggestions were directly or indirectly in service of caregivers. Some of the direct services suggested include financial coaching, funeral/estate planning, art therapy, special events, support groups, and educational opportunities. Some ideas that indirectly serve caregivers and families include extending hours on weekdays and/or adding hours on the weekend, an on-site Minute Clinic to provide screenings and shots, adding a dental component, and providing transportation – at least to and from the facility and potentially to and from “field trips” and/or medical appointments.

The addition of professional staff, another common theme during the World Café, would also benefit caregivers and families. World Café participants suggested the addition of a case manager/social worker, an RN, activity director, and kitchen manager. The case manager/social worker could work with guests and families or caregivers of guests, while the RN could provide skilled nursing services on site. The activity director and kitchen manager would add focused expertise that would help Still Waters run smoothly and enhance the experience for guests and their caregivers and families.

The Visioning Committee members supported the idea of putting a stronger focus on families and caregivers as Still Waters moves forward, which, they noted, also better aligns Still Waters with the mission of CUMC and better connects it to the community.

### **Key Findings throughout the Process**

Throughout the data collection process, three central themes emerged and were continually reinforced. There was consistent demand for a future Still Waters that:

- Retains the caring, compassionate, more-than-a-business, high-quality service environment.
- Expands to serve more people, with more services, in more ways.
- Celebrates and maximizes the relationship with CUMC.

### **The Product: A Vision for the Future**

The Visioning Process afforded Still Waters staff and stakeholders the opportunity for learning and reflection. An unintended consequence of this learning and reflection was a clarification of Still Waters' mission and a repurposing of the role of the organization, in addition to a new, powerful vision for the future.

## A New Mission

Still Waters’ new mission statement broadens the purpose of the organization from its prior focus on the provision of adult day services. While the previous mission statement did acknowledge that providing services to families of guests was an equally important component of Still Waters’ services, the mission statement did not identify others – individuals and caregivers who are not connected to the adult day center – as part of the target population.

Previous Mission Statement	Revised Mission Statement
<p><i>To promote the maximum degree of independence and engagement of each guest, while attending to their physical, mental, social, and spiritual needs. Equally important is our mission to families, offering needed support and respite from the stress and responsibilities of caregiving.</i></p>	<p><i>To strengthen, support, and provide services for older adults and families throughout their journeys as aging individuals and caregivers.</i></p>

## A Clarified Role

In shifting the mission statement, the **role** of Still Waters is clearer. Instead of providing care that is an end in and of itself, Still Waters will serve three key roles that will help it fulfill its mission.

- **Still Waters is a visible, outwardly focused program that serves as an entry point...**
  - ...for families who need help in caring for an elderly member.
  - ...for people who are unfamiliar with senior services but could benefit from the variety of services available (now or in the future).
  - ...for people who are unfamiliar with CUMC but have an interest in senior services to find a new church home.

*Still Waters can connect CUMC members to senior services and those engaged in senior services to CUMC.*

- **Still Waters services provide the emotional “space” that families need...**
  - ...to understand and plan for their future needs.
  - ...to cope with their conflicting emotions.
  - ...to age in place - for as long as it is desired and safe.
  - ...to (eventually) come to terms with the loss of their loved one.

*Still Waters can provide older adults and their families with a range of services – educational, emotional, spiritual, physical – to wrap around older adults and their families during a time of great need.*



- **Still Waters is the economic engine that funds much of the ministry, including...**  
...education, counseling, wellness programs, support groups, and various church-related ministries.

*Because adult day services is a fee-for-service operation, funds generated by the Center can be used to support the broader mission of Still Waters. Staff will continue to ensure that Still Waters operates on firm business principles so that it can fund both Still Waters and support other ministries for seniors and families of the church community.*

## A Five-Year Vision

In light of this clarified and expanded mission and role, the Visioning Committee envisions a Still Waters that is:

- **Closely aligned with the mission of CUMC and connected in the community**  
We seek to better integrate the services provided with the needs of the CUMC congregation as well as the surrounding community. The new mission statement stresses that the mission of Still Waters is to create relationships instead of making business transactions.
- **A holistic ministry to aging adults, their family members, and those in need of aging-related information, guidance, and support**  
The adult day program is a tool for establishing deeper connections that can help families in many ways. Through this ministry, we will provide “wrap around” services that allow us to better share God’s love and acceptance. It also expands our work, allowing us to provide services to those who aren’t Still Waters’ customers.
- **Focused on our target population: family caregivers and their loved ones**  
Going forward, we will focus on family as a whole, not just the elderly individual. Such relationships have been a strength of our program, and connection with families is a shared value between Still Waters and CUMC.

## Key Components of the Vision

While the particular strategies will be developed during the next phase of work, input provided during the Visioning Process indicate four necessary components for achieving the vision:

1. *Expanding our current physical capacity so a greater number of people can benefit from this ministry.*

As an adult day services provider, we recognize the tremendous unmet demand for this type of care. We seek to expand the program in ways that allow us to achieve excellence in service, using industry best practices, national and state standards of care, and the innovative, shared use of space with other ministries.

- *Expand the current program to accommodate a maximum of 40 guests per day.*

- *Expand the current space (larger kitchen and common area, increased storage area/ office space/programming rooms, improved restroom facilities, enhanced safety and security build-out).*
- *Explore the option of expanding to additional churches as satellite sites.*

2. *Expanding our program offerings to have greater capacity to meet a wide range of service needs for our guests.*

There are a host of services that could be offered to meet our guests' needs. Throughout the visioning process, stakeholders noted a number of programmatic elements that are also best practice offerings, including:

- *Expanded hours of operation to include Saturdays and at least one evening per week*
- *Addition of a RN, Social Worker, and Activity Director to the professional staff*
- *Becoming a Level II provider (some nursing services provided)*
- *Contract services including dentist, nurse practitioner, and pharmacist*
- *Daily transportation services to and from the Center, transportation for group outings, and some transportation to and from medical appointments.*

3. *Developing programs and services to respond to the physical, emotional, and spiritual needs of the family caregivers and support them on their journey with their loved one.*

In order to continue our success in adult day services, we need to place the same emphasis on family caregivers as we do on our guests. Our vision is to strengthen and support the caregivers so that they can succeed in a very difficult and demanding task. Their needs are physical, emotional, and spiritual.

- *Expanded library of resources about senior services and facilities*
- *Case management services for families to plan for care transition after Still Waters*
- *Expanded Scholarships for families with financial need*
- *Take-home meals*
- *Saturday and evening care hours*
- *Educational programs similar to "Learning to Grow Old" but offered on an ongoing basis*
- *Support groups for dementia care, stress management and grief*
- *Caregiver enrichment services including massages, beauty shop, meals, art, shopping services, manicures/pedicures*
- *Bible study group for caregivers*

4. *Forging a deeper connection with the larger CUMC family.*

The church family at CUMC is extremely mission-driven. Many members have supported Still Waters for the first 3 years and yet, church members have not availed themselves of the services provided here. A sizable number of CUMC members are family caregivers, older adults in need of care, or retired persons looking for meaningful opportunities to help others. By addressing the ministry needs of this demographic of the church family, CUMC and Still Waters can partner in new and exciting ways.

- *Providing staff support for Variety Bunch, Stephens Ministers, homebound ministry, and any groups/classes that are comprised of older members*
- *Developing small group studies around issues of concern to families of older adults including care options/financial and legal planning, end of life issues, funeral planning, legacy planning, and faith development in later life*
- *Providing spiritual, one on one support, for church families who are dealing with caregiving issues.*
- *Developing meaningful volunteer opportunities for retired church members.*
- *Developing mentoring opportunities for older members and young families, youth, and children.*
- *Developing programs to assure that older members receive services including transportation to and from worship and small group programs, meals and/or groceries, friendly visits, and assistance with yard work, handyman projects, etc.*

### **Necessary Conditions for Pursuit of the Vision**

In order to move forward with Still Waters' Vision for the next five years, the Church will need to provide encouragement and spiritual support, structure, authority, and resources. The Visioning Process is a first step. Through it, Still Waters has taken the lead in imagining a thoughtful, multi-faceted, creative ministry, which is more fully integrated into the life of CUMC. In order for it to become a reality, the Church, through formal and informal means, will need to embrace it. Specifically, CUMC must:

1. **Embrace Still Waters' five-year vision through formal affirmation by church leadership** by July 1, 2014 so that Still Waters can begin in earnest to develop the strategies to accomplish the five-year vision.
2. **Establish a structure for a new Still Waters' Board that delegates to them certain authority and responsibility** that will enable them to design and manage their evolution and to ensure long-term continuity of the organization. Still Waters and the CUMC Council will come to agreement on principles by October 1, 2014. Examples of authority and responsibilities that would be addressed in the negotiations include:
  - Management of the center's annual operating budget
  - Hiring, evaluation and compensation of Center Director and other staff
  - Establishing the duties and responsibilities of Center Director

- Establishing the Center's operations (fees, policies, services, etc)
  - Fund raising
  - Marketing
  - Grants procurement and management
3. **Allocate a seat at the table of the CUMC Council for a representative from Still Waters' Board** by January 1, 2015. This could be a non-voting member, but the purpose of this role would be to represent the unique needs and interests of Still Waters to the CUMC Council and to serve as a liaison between the CUMC Council and the Still Waters Board.
4. **Develop a new Covenant Agreement between CUMC and Still Waters** by July 1, 2015. This Covenant Agreement would incorporate delegated authority and responsibility, and would also address facility usage and financial agreements, such as:
- Facilities to be dedicated for use by Still Waters and terms of use
  - Facilities to be used in shared ministry by Still Waters and other ministries of the church and terms of use
  - Services included/excluded with facilities
  - Build-out specs, timetable and costs
  - Build-out costs to be financed by CUMC vs Still Waters
  - Monthly rental fee
  - Reporting/accountability/expectations of Still Waters
  - Duties/responsibilities of Still Waters Director as they relate to church

### Next Steps

The Visioning Process has positioned Still Waters to accept the challenges that lie ahead. If the CUMC Council affirms the proposed vision, Still Waters staff can begin to develop objectives and strategies to manifest this vision. While the terms of the initial commitment on the part of Visioning Committee members have expired, participants continue to offer their expertise and support - both formally and informally - for the next phase of this effort. The outward-reaching approach to developing this vision has created a sense of support for and momentum behind the evolution of Still Waters.

Through continued and strengthened partnership between Still Waters staff, CUMC leaders, and church and community allies, within five year Still Waters can become:

- Closely aligned with the mission of CUMC and connected in the community;
- A holistic ministry to aging adults, their family members, and those in need of aging-related information, guidance, and support; and
- Focused on our target population: family caregivers and their loved ones.

## Appendix A: Adult Services Overview

Adult Day Services (ADS) are community-based group programs designed to meet the needs of adults with impairments through individual plans of care. These structured, comprehensive, non-residential programs provide health, social, recreational, and therapeutic activities, as well as supervision, support services, and personal care. In Indiana, these services must be provided in a congregate, protective setting and meals and/or nutritious snacks are required<sup>5</sup>.

Adult day services also benefit family caregivers by enabling them to remain in the workforce as well as providing them with direct services. Historically, ADS have been divided into three models of care: social, medical, or combined. Social models tended to focus on socialization and prevention services, while medical models included skilled assessment, treatment, and rehabilitation goals, and combined models covered all areas. The distinction among these models has become increasingly unclear as these models have evolved into a dynamic, comprehensive model of care<sup>6</sup>.

### Who are the Consumers?

Nationwide, more than a quarter of a million adults (260,000) receive care through and estimated 5,000 adult day service centers<sup>7</sup>. Nearly 60% of these users/guests are female. 40% of users are aged 65 or younger, approximately 44% are between the ages of 66 and 84, and nearly 16% are 85 or older. 47.6% of adult day service users are white, 20% are Hispanic, 16.7% are Black/African-American, and 15.7% are Non-Hispanic “other.”<sup>8</sup>

More than ever, adult day services participants have higher levels of chronic conditions and disease, such as hypertension (46%), physical disability (42%), cardiovascular disease (34%), diabetes (31%), mental illness (25%), and developmental disability (20%)<sup>9</sup>. According to the CDC, nearly 32% of adult day service users have a diagnosis of Alzheimer’s or other forms of dementia, and at least 25% have been diagnosed with depression<sup>10</sup>. A 2010 MetLife Foundation study found that 52% of adult day center users have some cognitive impairment<sup>11</sup>. The CDC reports that nearly 40% of adult day service users have difficulty bathing themselves, while 38% have difficulty dressing, 37% have difficulty toileting, and 25% have difficulty eating<sup>12</sup>. Most—though not all—adult day center care recipients have some support in their living situation: 35% of adult day center users live with an adult child, 20% with a spouse, 18% in an institutional setting, 13% with parents or other relatives, while 11% live alone<sup>13</sup>.

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<sup>5</sup> Indiana Family and Social Services Administration Division on Aging, <http://www.in.gov/fssa>.

<sup>6</sup> MetLife National Study of Adult Day Services (October 2010)

<sup>7</sup> Ibid.

<sup>8</sup> CDC/NCHS National Study of Long Term Care Providers (2012)

<sup>9</sup> MetLife (October 2010)

<sup>10</sup> CDC/NCHS (2012)

<sup>11</sup> MetLife (October 2012)

<sup>12</sup> CDC/NCHS (2012)

<sup>13</sup> National Study of Adult Day Services, 2001-2002. Winston-Salem, North Carolina: Partners in Caregiving: The Adult Day Services Program, Wake Forest University School of Medicine, 2002.

## Who are the Providers?

The 2010 MetLife National Study of Adult Day Centers confirmed over 4,600 adult day service centers operating in the United States<sup>14</sup>, and the 2012 MetLife Study estimated that figure at more than 5,000<sup>15</sup>. Many are relatively small operations—47% of adult day service programs serve between 1-25 adults, though another 47% serve between 26-100 adults and slightly more than 5% serve 101 adults or more<sup>16</sup>. The average capacity of adult day centers is 40<sup>17</sup>.

A majority—55%—of adult day centers are nonprofit organizations, while 40% are for profit, and the remaining 5% describe themselves as government-run or “other.”<sup>18</sup> 70 percent of adult day centers are affiliated with larger organizations such as home care, skilled nursing facilities, medical centers, or multi-purpose senior organizations<sup>19</sup>.

While the degree of medical care provided varies widely between adult day service centers, nearly 60% (59.2) of these centers have some Registered Nursing staff<sup>20</sup>. Nearly 45% (44.7) have LPN staff, 77.4% have Nursing Aide staff, and almost 43% (42.8) have social work staff<sup>21</sup>. In addition to the medical/therapeutic care these staff deliver, most centers also offer an array of programming targeted to users’ needs. Approximately 90% of centers offer cognitive stimulation programs, almost 80% provide memory training programs, and more than 75% offer educational programs<sup>22</sup>. The CDC reports that roughly 73% of adult day centers provide programming related specifically to Alzheimer’s and other forms of dementia, while 63% provide programming related to cardiovascular disease, 58% provide programming related to depression, and 70% provide programming related to diabetes<sup>23</sup>.

Given the needs of their clientele, a significant majority of adult day centers provide some form of transportation services. Eighty-seven percent of adult day centers provide round-trip transportation to and from their center, while nearly 78% (77.7) provide transportation to and from social and recreational activities while another 55% provide transportation to and from medical and dental appointments<sup>24</sup>.

Many of these services and staffing structures closely follow the recommendations for a “best practice” adult day service center as described by the National Adult Day Services Association, which recommends that centers:

- Have a maximum of a 1:6 staff to client ratio
- RN/LPN staff on site at all times
- Provide transportation to and from the Center

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<sup>14</sup> MetLife (October 2012)

<sup>15</sup> 2012 MetLife Market Survey of Long-Term Care Costs (2013)

<sup>16</sup> CDC/NCHS (2012)

<sup>17</sup> MetLife (October 2012)

<sup>18</sup> CDC/NCHS (2012)

<sup>19</sup> MetLife (October 2012)

<sup>20</sup> CDC/NCHS (2012)

<sup>21</sup> Ibid.

<sup>22</sup> MetLife (October 2012)

<sup>23</sup> CDC/NCHS (2012)

<sup>24</sup> Ibid.

- Because daily census fluctuates, enroll between 1.5 - 2 times as many clients as capacity to serve
- Provide health services and/or rehabilitative services such as physical, occupational, or speech therapy on site
- Provide case management/care management that includes the entire family (caregiver support)<sup>25</sup>

### **Adult Day Services in Indiana**

It is difficult to find detailed data for Adult Day Services consumers and providers in Indiana. Indiana does not currently provide regular public data on long-term care service utilization and expenditures in the state (including Adult Day Services). In some cases, it lacks the technological capacity to gather and analyze the data. This makes it difficult to track the effectiveness of these programs in reducing institutionalization, improving quality of care or reducing costs<sup>26</sup>. The 2012 However, county, state, and regional data from multiple sources can illuminate the issues surrounding adult day services in our community.

While older adults are clearly not the only consumers of adult day services, they do comprise the majority of users nationally—so understanding the older population in Marion County can be useful in understanding the needs for adult day in Indiana/Indianapolis. According to the U.S. Census Bureau, there are nearly 850,000 adults over the age of 65 currently residing in Indiana, and roughly 100,000 of these adults live in the Indianapolis community<sup>27</sup>. According to a recent report by the AARP, the Commonwealth Fund, and the SCAN Foundation these adults may face grim prospects as they age<sup>28</sup>. Their report, “Raising Expectations: A State Scorecard on Long-Term Services and Supports for Older Adults, People with Physical Disabilities, and Family Caregivers,” gave Indiana an overall ranking of 47 out of 50 states. Crucially, Indiana was ranked 49 out of 50 for affordability of and access to the services that aging and disabled adults need, including adult day services<sup>29</sup>. This finding is underscored by the CDC’s report that Indiana’s rate for adult day center participants per 1,000 persons aged 65 and older on any given day is “significantly lower” than the national rate of 4/1,000 (though no specific rate for Indiana is given)<sup>30</sup>. This is certainly correlated with a lack of capacity in adult day services in our region: the CDC found that the capacity of adult day services across the Midwest is 3 per 1,000 adults aged 65 and older; the national rate is 6—and no other region of the country (Northeast, South, or West) is lower than the national average<sup>31</sup>. In fact, less than 20% (18.3) of all long-term care providers in the Midwest are adult day centers, compared to averages of 21%-32% in the United States Northeast, South, and West<sup>32</sup>. There are 19 adult day centers in the Indianapolis area (see attached).

Thus, Indianapolis has a large and growing population of older adults that may not have appropriate supports and services in place—and data from the Community Assessment of Older

<sup>25</sup> National Adult Day Services Association

<sup>26</sup> Indiana Association of Area Agencies on Aging 2013 Public Policy Priorities, [www.iaaaa.org/pdfs/2013%20IAAAA%20Public%20Policy%20Agenda%20final%20new.pdf](http://www.iaaaa.org/pdfs/2013%20IAAAA%20Public%20Policy%20Agenda%20final%20new.pdf)

<sup>27</sup> U.S. Census Bureau Quickfacts

<sup>28</sup> Raising Expectations: A State Scorecard on Long-Term Services and Supports for Older Adults, People with Physical Disabilities, and Family Caregivers. (September 2011). [www.longtermscorecard.org](http://www.longtermscorecard.org)

<sup>29</sup> Ibid.

<sup>30</sup> CDC/NCHS (2012).

<sup>31</sup> Ibid.

<sup>32</sup> Ibid.

adults indicate that this population is here to stay. Over half of respondents to this survey had lived in the community for more than 20 years, and almost 8 in 10 plan to stay in the area throughout their retirement<sup>33</sup>. It is clear from the data that this group will, indeed, need the kind of services adult day centers provide:

- 71% of respondents reported problems with their physical health.
- Almost half (49%) of respondents reported feeling depressed, and the same percentage reported experiencing confusion or forgetfulness.
- Around 4 in 10 of respondents reported at least minor problems with having adequate information or dealing with public programs such as Social Security, Medicare and Medicaid.
- Over one-third of respondents reported spending time in a hospital, and 43% had fallen and injured themselves in the 12 months prior to the survey.
- At least 1 in 5 of older adults reported at least minor problems with aspects of independent living, including half who reported having problems with performing regular activities, including walking, eating and preparing meals.
- Some older adults experienced problems with having safe and affordable transportation available (34%) while others experienced problems with having housing to suit their needs (29%) or having enough food to eat (11%)<sup>34</sup>.

Data from the same survey reveals that older adults in Marion County need support in their roles as caregivers as well. Over half of older residents said they were caregivers; respondents averaged between 7 and 10 hours per week providing care for children, adults and older adults<sup>35</sup>.

- A little over 1 in 5 older adults in Marion County felt physically, emotionally or financially burdened by their caregiving.
- About three-quarters of respondents were fully retired, and 43% of respondents experienced at least minor problems with having enough money to meet daily expenses.
- The value of paid (part- and full-time work) and unpaid (volunteering, providing care) contributions by older adults in Marion County totaled about \$1.9 billion in a 12-month period.

## Revenue Streams

Funding is one of the primary challenges for Adult Day Services. In 2010, according to the MetLife National Study of Adult Day Services, the revenue mix includes publicly paid fees such as Medicaid Waiver and Veterans Administration (55%), privately paid fees (26%) and then drops off significantly with the remaining 19% including private insurance, grants and fundraising. By 2012, the CDC reported that 65% of long-term care provider revenue was from Medicaid<sup>36</sup>. According to the MetLife study, fee structures vary widely with an average for a full day of \$61.71. This average fee did not cover the average actual cost per participant, which was \$68.89<sup>37</sup>. According to the 2012 MetLife study, daily costs for ADS in Indianapolis ranged from \$48-\$120, with an average daily cost of \$69.<sup>38</sup> Even so, adult day services are one of the least

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<sup>33</sup> National Research Center, Inc. "Community Assessment for Older Adults" (2013)

<sup>34</sup> Ibid.

<sup>35</sup> Ibid.

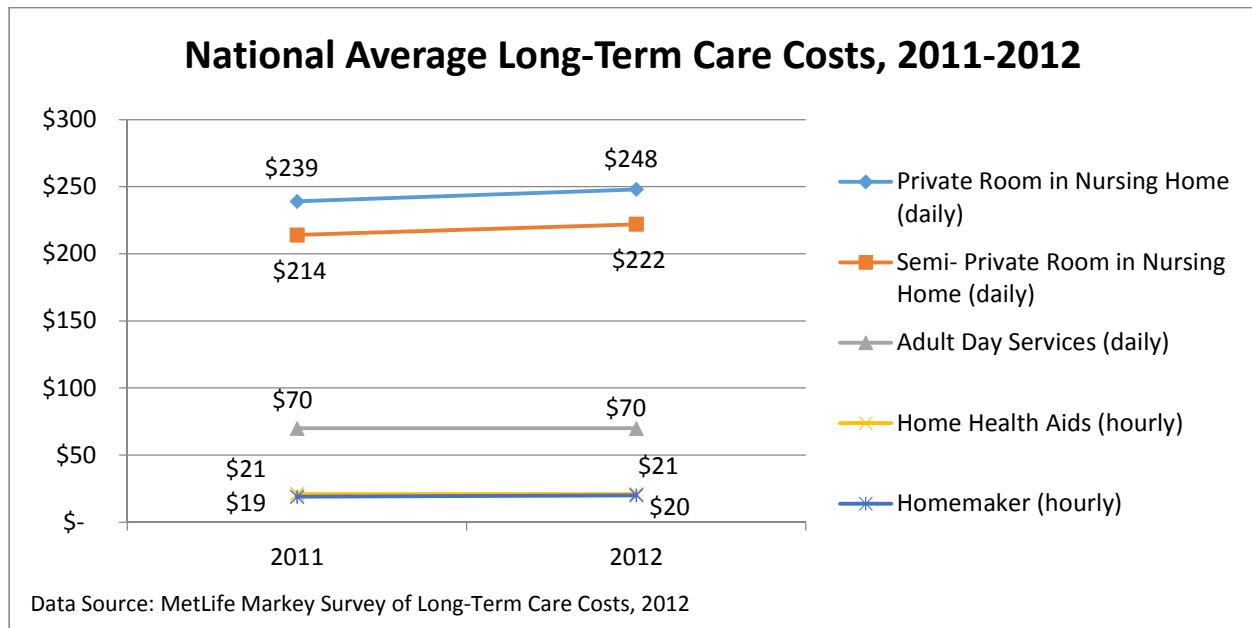
<sup>36</sup> CDC/NCHS (2012)

<sup>37</sup> MetLife (October 2010).

<sup>38</sup> The MetLife Market Survey of Long-Term Care Costs (2013)



expensive options for adults needing care when compared to the average rate for home health aides at \$20 per hour.<sup>39</sup>



Clearly, diversification of funding in home and community-based programs is essential because of the wide range of funding sources for these programs and services, and because revenue streams can change. The traditional array of funding options for operating revenue includes but is not limited to:

- Medicare (most commonly for home health and therapy services)
- Medicaid waiver programs, including personal care services
- Private pay/out of pocket
- Older Americans Act (Title III)
- Social Services Block Grants (Title XX)
- Child and Adult Care Food Programs (CACFP, USDA)
- Veterans Administration
- Budgeted state-specific funding programs (in Indiana, this funding might be secured through the State's Aging and Disability Resource Centers)
- County tax levies
- Long-term care insurance plans
- Asset protection long-term care plans<sup>40</sup>

In Indiana, ADS may be funded through the CHOICE program. The CHOICE (Community and Home Options to Institutional Care for the Elderly and Disabled) Program is a resource that

<sup>39</sup> The MetLife Market Survey of Adult Day Services & Home Care Costs, MetLife Mature Market Institute®, in conjunction with LifePlans, Inc., [www.MatureMarketInstitute.com](http://www.MatureMarketInstitute.com), September 2007.

<sup>40</sup> Planning and Creating Successful Adult Day Services and Other Home and Community-Based Services A NADSA-AAHSA Whitepaper By Marilyn Hartle, MSW, LCSW and LaDonna Jensen, RN

eligible individuals can use to receive support including case management, transportation, attendant care, home delivered meals, homemaker services, various therapies provided in the home, respite care, access to adult day programs, medical supplies and other services necessary to prevent residential placement into nursing homes, group homes, state hospitals and other large group living facilities.

The state of Indiana has funded CHOICE for all 92 counties since July 1, 1992, as part of a statewide IN-Home Services Program. The IN-Home Services Program brings together funding from CHOICE, Title III of the Older American's Act, Social Services Block Grant, Older Hoosiers Account, Medicaid Waivers and local funding. The program serves those who are 60 years of age or older and persons with disabilities of all ages who are eligible due to long term or lifelong limitations such as dependence on others to bathe, dress, eat, or go to the bathroom; limitations in ability to express personal needs and/or understand the communication of others; limitations in learning and maintaining self-care, communication, social and/or domestic skills; limitations in the ability to move purposefully between environments; and limitations in the ability to make decisions, show acceptable judgment, and/or recognize the consequences of one's actions. The program is available regardless of income, but there is a basic fee or cost share for services based on a sliding fee scale<sup>41</sup>.

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<sup>41</sup> Indiana Resource Center for Autism.

# Appendix B: Still Waters Visioning Process Community Survey Summary Report (January 2014)

## Contents

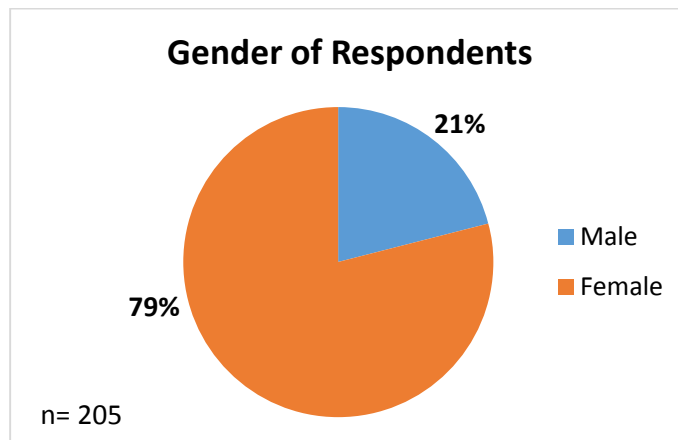
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### *About the Visioning Process Community Survey*

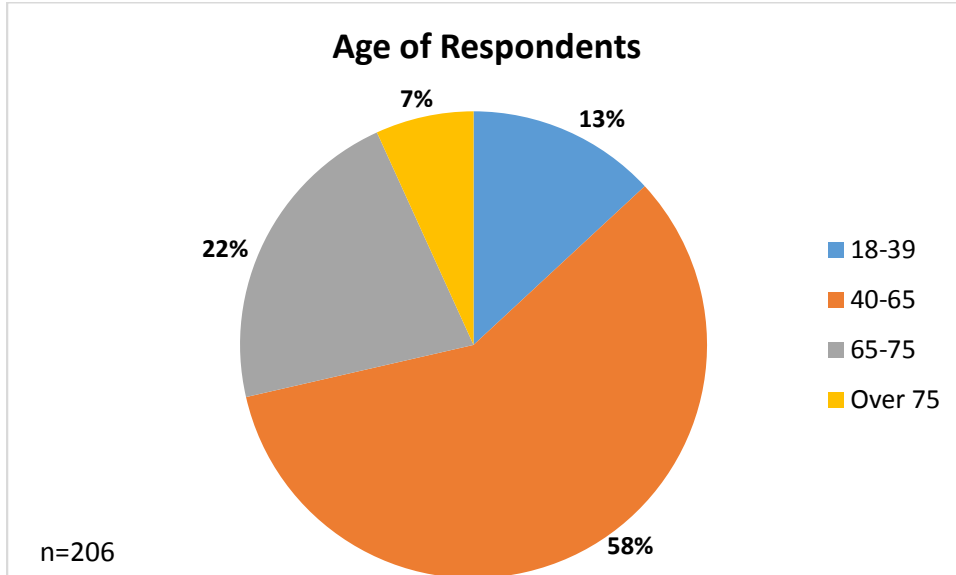
In December 2013, Community Solutions, Inc., administered a Still Waters Visioning Process Community Survey to community members, including friends of Still Waters, members of the Castleton United Methodist Church (CUMC), professionals and experts in adult day services or related fields, and others with an interest in caregiving. The purpose of the survey was to help inform the development of the five-year vision for Still Waters Adult Day Center (Still Waters) at Castleton United Methodist Church (CUMC). An invitation with a link to an electronic version of the survey was sent to individuals on the Still Waters contact list, and those individuals were invited to share the survey link through their various networks and listservs. The invitation was emailed to the Still Waters listserv and to the Indiana Association of Adult Day Services listserv. In addition, paper copies of the survey were made available at the Center and Church for individuals to complete. A total of 206 individuals completed the Visioning Process Community Survey.

### *Respondent Information*

Survey participants were asked to share a bit of information about themselves. Over three-quarters of survey respondents are female (79%), and 21% are male. One respondent did not indicate his or her gender.



The vast majority of respondents were between the ages of 40 and 75. Over one-half (58%) were ages 40 to 65, and over one-fifth (22%) were ages 65 to 75. Only 13% of respondents were between the ages of 18 and 39, and 7% were over the age of 75.

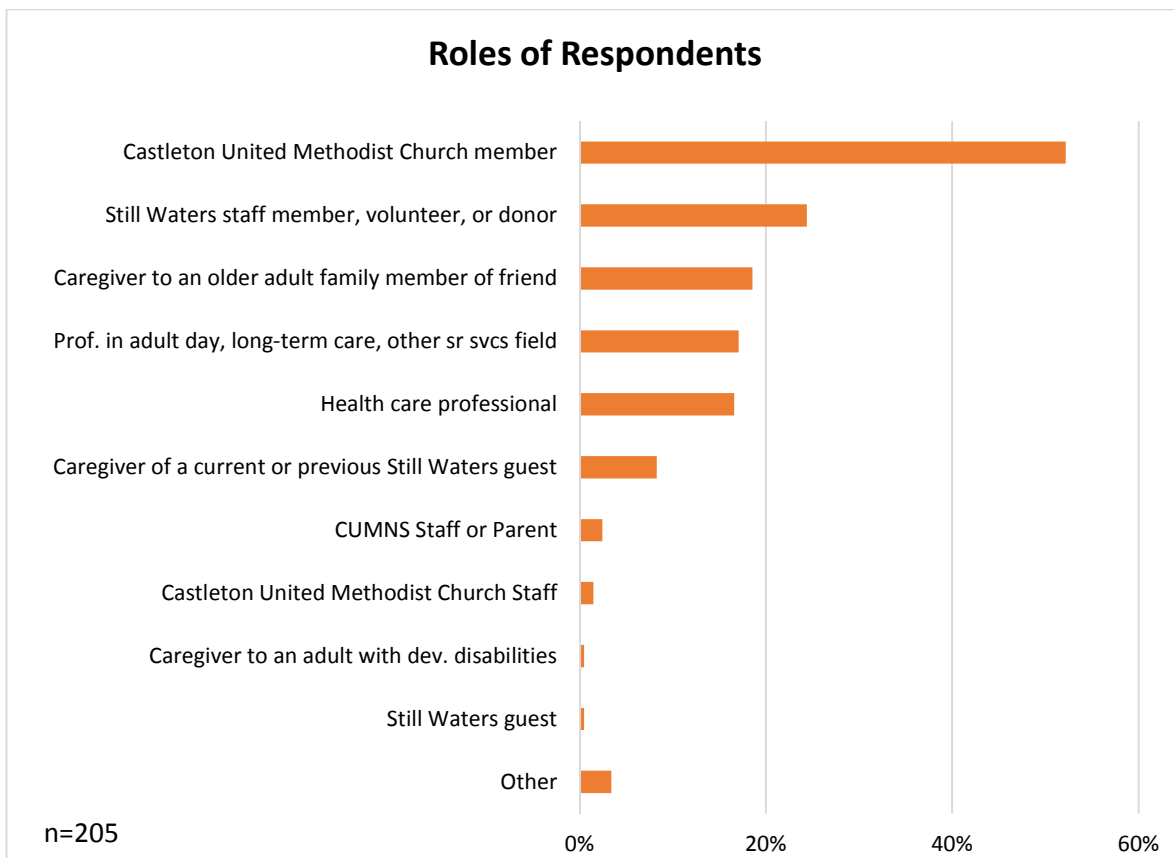


Survey participants were asked to share where in Indiana they live. Of the 200 respondents, most live in Central Indiana. Nearly three-quarters (72%) reside in Marion County, 19% live in Hamilton County, and 4% in Hancock County. Two respondents (1%) live outside of the state of Indiana. The full list of counties (12 total) and the number and percentage of respondents who reside in them are included in the table below.

### Where Respondents Live

Indiana County	# of Responses	% of Responses
Marion	143	72%
Hamilton	37	19%
Hancock	7	4%
Allen	2	1%
Madison	2	1%
Dearborn	1	0.5%
Hendricks	1	0.5%
Johnson	1	0.5%
Morgan	1	0.5%
Randolph	1	0.5%
Vigo	1	0.5%
Wabash	1	0.5%
Out of State	2	1%

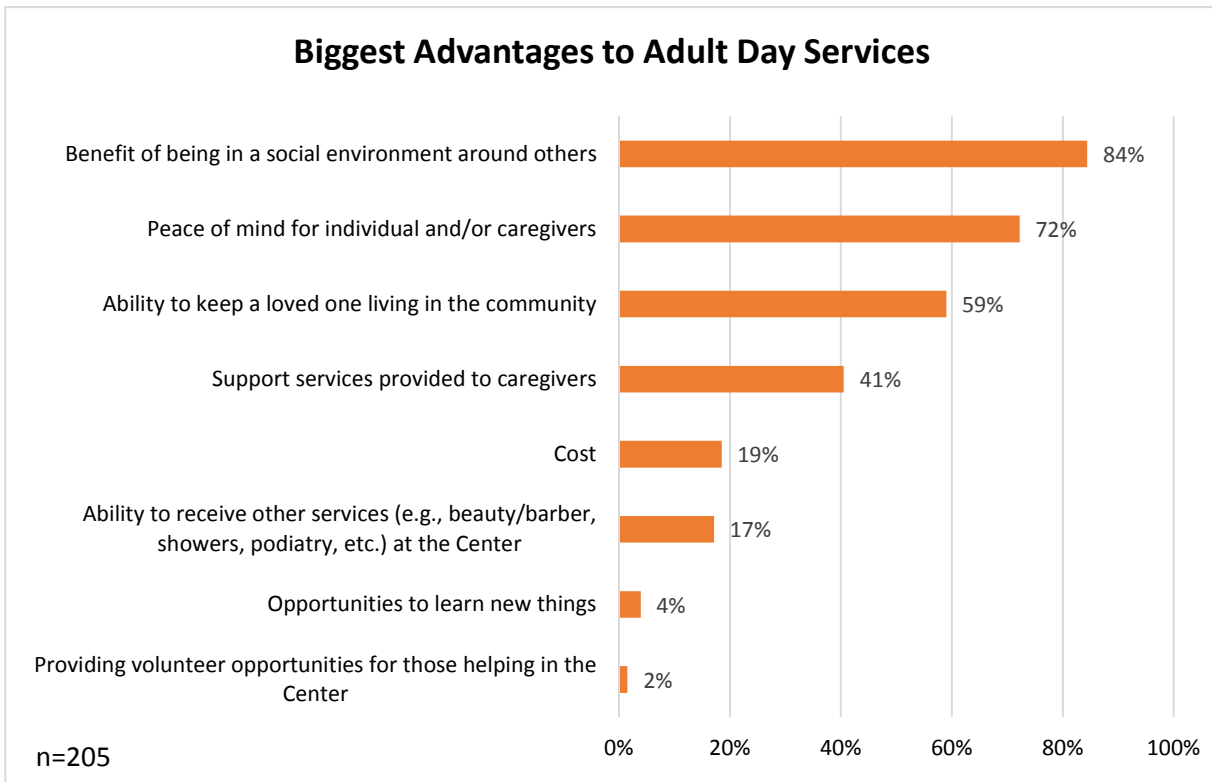
Those who responded to the survey were given a list of roles and asked to indicate all of the roles they felt described them. Over one-half (52%) of respondents are members of Castleton United Methodist Church (CUMC), and about one-quarter (24%) are Still Waters staff members, volunteers, or donors. Over one-quarter of respondents indicated they are – or were – care givers: 19% are caregivers to older adult family members or friends, 8% are caregivers to current or previous Still Waters guests, and one individual is a caregiver to an adult with developmental disabilities. Seventeen percent of respondent indicated they are professionals in adult day, long-term care, or other senior service fields, and the same percentage indicated they are health care professionals. Five individuals from the Castleton United Methodist Nursery School – either parents or staff – completed the survey (2%), as did two CUMC staff members (1%) one Still Waters guest (0.5%). Three percent of respondents indicated they have other roles, which include: Healing Touch Ministry, social worker, 85 year-old, visitor of homebound members of my church, pastor of compassion, friend, and community volunteer.



## Perspectives on Adult Day Services

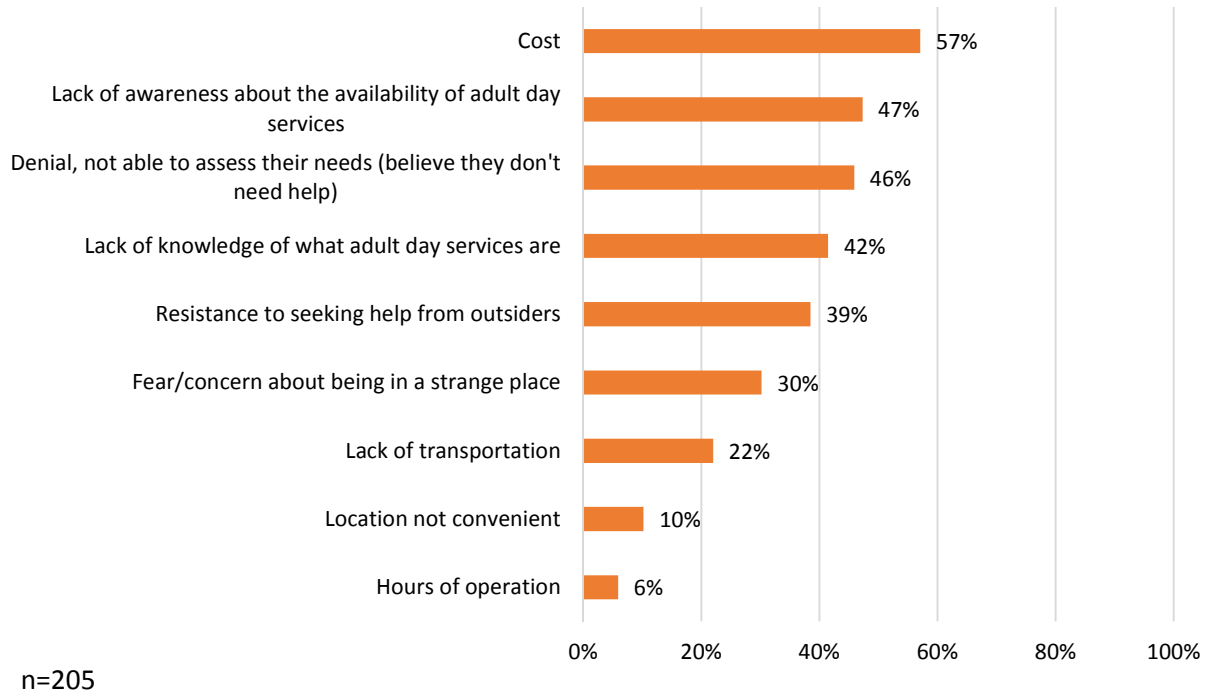
Survey participants were asked to share a bit about their perspectives of and familiarity with adult day services in general and with Still Waters Adult Day Center.

Respondents were asked to indicate the three biggest advantages to adult day services. The top three advantages were chosen by at least one-half of survey participants. An overwhelming 84% indicated the ‘benefit of being in a social environment with others’; 72% chose ‘peace of mind for individual and/or caregivers’; and 59% indicated ‘ability to keep a loved one living in the community’ as one of the three biggest advantages. ‘Providing volunteer opportunities for those helping in the Center’ and ‘opportunities to learn new things’ were chosen as big advantages by the smallest percentages of respondents, 2% and 4%, respectively.



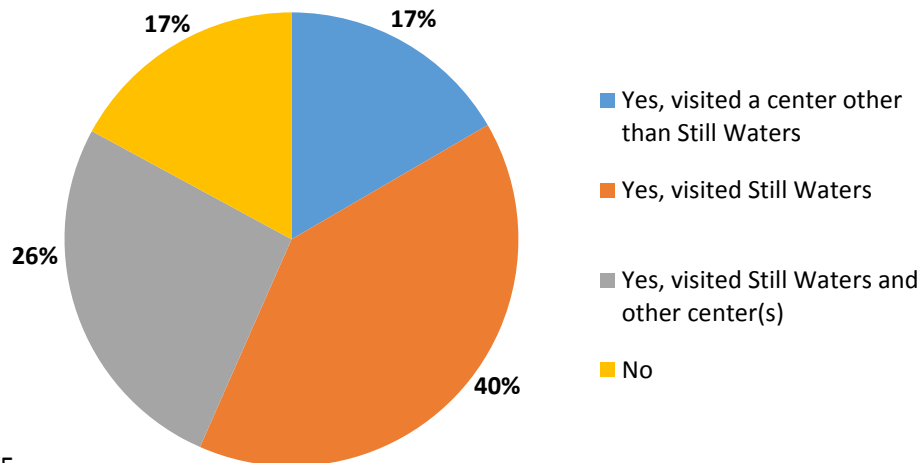
Survey participants were also asked to indicate what they feel are the three biggest disadvantages to adult day services. Over one-half (57%) of respondents indicated ‘cost’ is one of the biggest disadvantages. Lack of awareness and knowledge of adult day services are also drawbacks, according to respondents – nearly one-half (47%) chose ‘lack of awareness about the availability of adult day services’, and 42% chose ‘lack of knowledge about what adult day services are’. Forty-six percent of respondents indicated ‘denial, not able to assess their needs (believe they don’t need help)’ as one of the biggest disadvantages to adult day services. ‘hours of operation’ and ‘location not convenient’ were indicated as disadvantages by the smallest percentage of respondents, 6% and 10%, respectively.

### Biggest Disadvantages to Adult Day Services

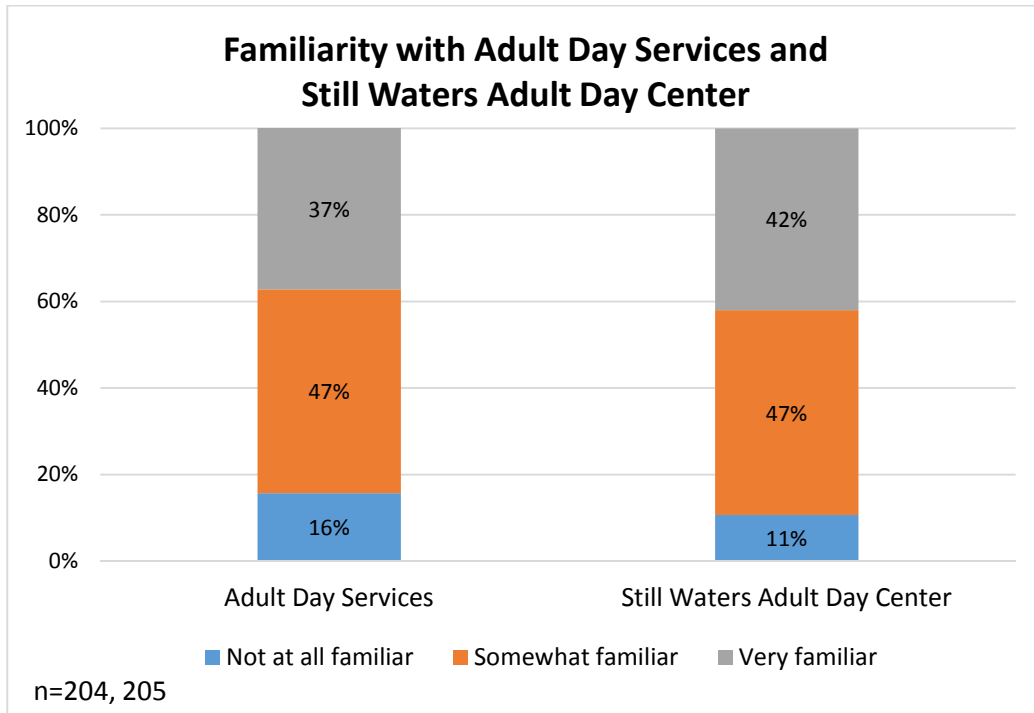


When asked if they have ever visited an adult day center, 83% of respondents indicated they had, and about two-thirds of respondents had visited Still Waters. About one-quarter (26%) of respondents had visited Still Waters and another adult day center; 40% had visited Still Waters only; and 17% had only visited a center other than Still Waters. Seventeen percent of respondents indicated they had never visited an adult day center.

### Have you ever visited an adult day center, including Still Waters, for any reason?



Survey respondents were asked to indicate how familiar they were – ‘very’, ‘somewhat’, or ‘not at all’ – with adult day services and with Still Waters Adult Day Center. The proportion of respondents who are ‘very’, ‘somewhat’, or ‘not at all’ familiar with adult day services is very similar to the proportions regarding Still Waters. For both adult day services and Still Waters, specifically, the vast majority of respondents were at least ‘somewhat familiar’ – 84% for adult day services and 89% for Still Waters. In both cases, 47% of respondents are ‘somewhat familiar’, but only 37% are ‘very familiar’ with adult day services and 42% are ‘very familiar’ with Still Waters. Regarding adult day services, in general, 16% of respondents are ‘not at all familiar’, while only 11% of respondents are ‘not at all familiar’ with Still Waters.





### *Perspectives on Still Waters Adult Day Center*

Survey participants were given the information listed below about how Still Waters compares to other adult day centers across the country.

- **Capacity** – The average capacity of adult day centers in the US is 51, with an average daily attendance of 34. The capacity of Still Waters is 20, with an average daily attendance of 17.
- **RN on Staff** – Nationally, 59% of adult day centers have a full-time RN on staff who can provide skilled nursing services such as diabetes monitoring, wound care, injections, and colostomy & catheter care. Still Waters does not have a full time RN on staff who can provide these services.
- **Social Worker on Staff** – Nationally, 78% of adult day center has a fulltime Social Worker on staff who can provide assistance to families who need additional services such as home care, financial assistance, and help with choosing a long term care facility. They also provide emotional support and counseling to caregivers. Still Waters does not have a fulltime Social Worker on staff who can provide these services.
- **Transportation Services** – A majority of adult day centers across the nation provide transportation for medical appointment (55%), social and recreational outings (78%) and transportation to and from the Center (87%). Still Waters does not provide any transportation for its guests for these purposes.
- **Affiliation** – Nationally, 55% of adult day centers are classified as non-profit organizations and 40% are classified as for-profit organizations. 3% of adult day centers nationwide are affiliated with a religious organization.

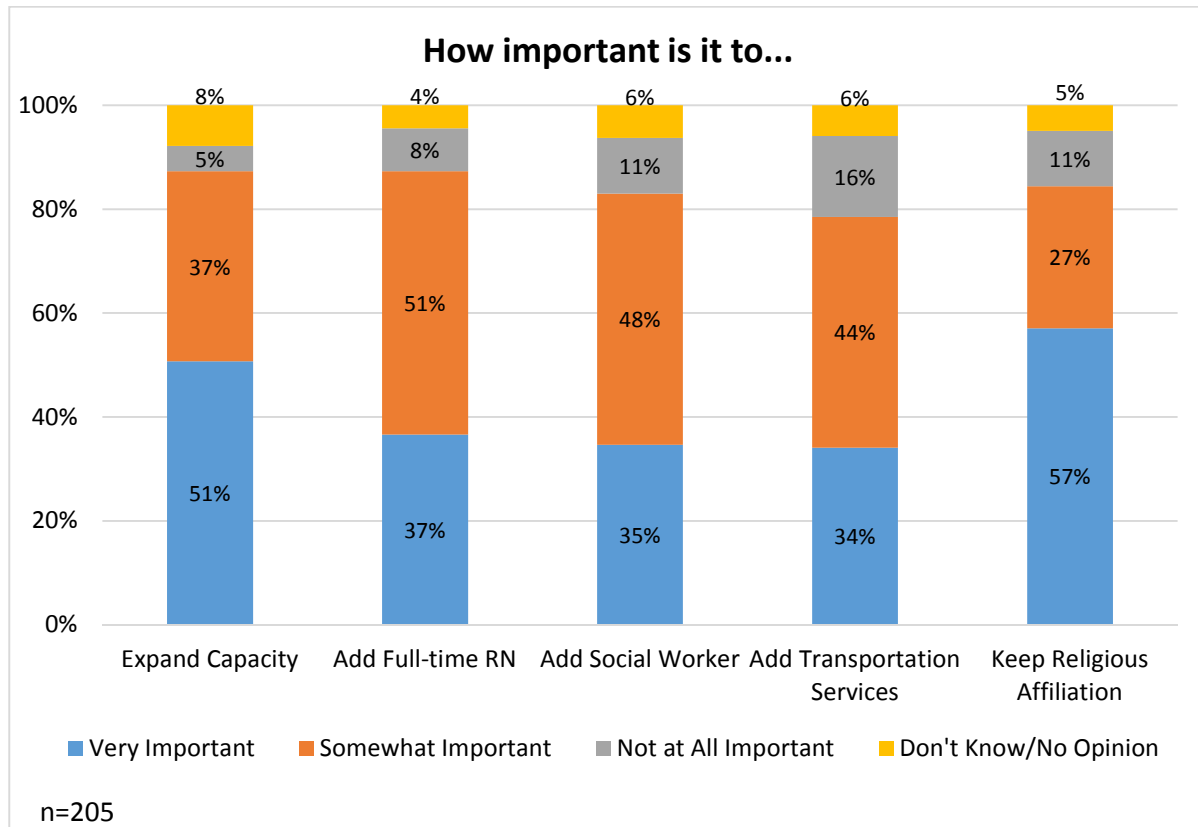
Based on the information provided, respondents were asked to indicate how important they felt it was for Still Waters to do the following:

- Expand its capacity
- Add a full-time RN to the staff
- Add a social worker to the staff
- Add transportation services
- Maintain its religious affiliation

Over three-quarters of respondents indicated they felt all five actions are ‘very important’ or ‘somewhat important’.

- 88% of respondents feel it is at least ‘somewhat important’ to expand capacity, and the same percentage feel it is at least ‘somewhat important’ to add a full-time RN to the staff.
- 84% of respondents indicated it is ‘very important’ or ‘somewhat important’ to keep the religious affiliation, while 83% feel it is at least ‘very important’ or ‘somewhat important’ to add a social worker to the staff.
- The smallest share of respondents indicated adding transportation services is at least ‘somewhat important’ (78%).
- Over one-half of respondents feel it is ‘very important’ to expand capacity and ‘very important’ to keep the religious affiliation (51% and 57%, respectively).
- Only about one-third of respondents feel it is ‘very important’ to add a full time RN (37%), add a social worker (35%), or add transportation services (34%).

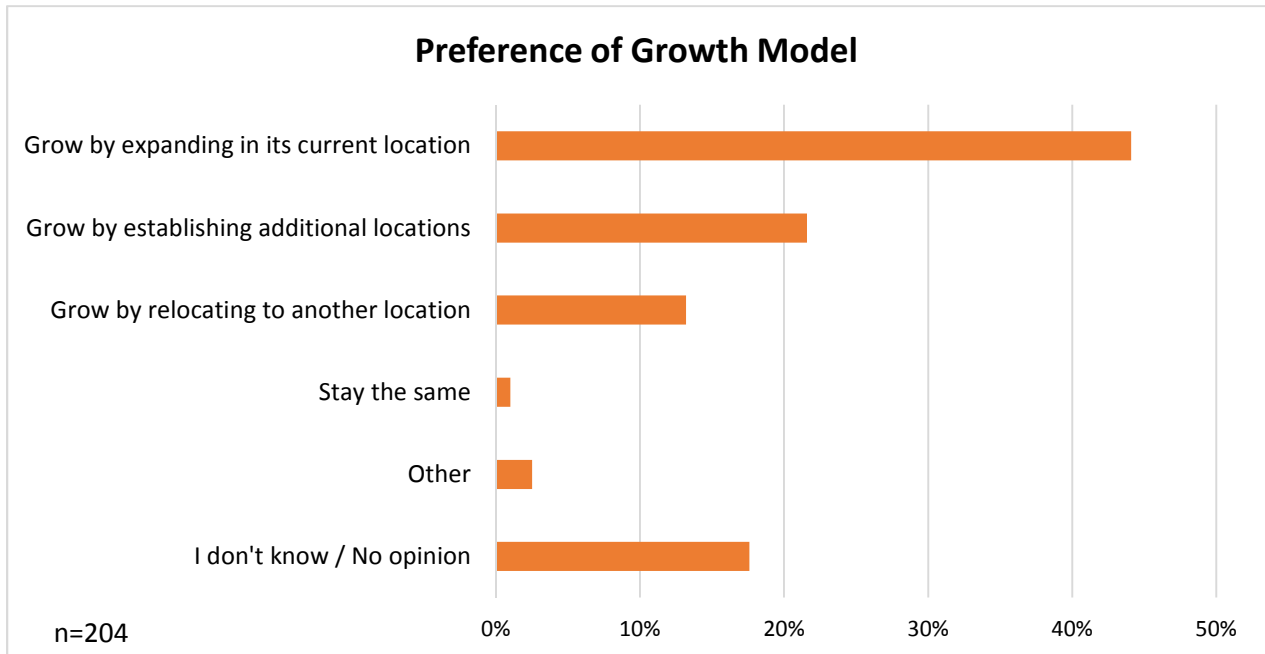
- Some respondents feel that each action is ‘not at all important’ Only 5% indicated expanding capacity is ‘not at all important’, 8% for adding a full-time RN, and 11% each for adding a social worker and maintaining the religious affiliation. 16% of respondents feel adding transportation services is ‘not at all important’.
- For each issue, a small share of respondents indicated ‘I don’t know/No opinion’. Only 4% responded this way about adding an RN, which was the smallest share, while 8% of respondents, the largest share, are unsure about how important it is to expand capacity.



Survey respondents were asked about their preference for the model Still Waters should use if it planned to grow in the next five years. Nearly one-half (44%) of respondents indicated that they would prefer Still Waters to ‘expand in its current location’, and 22% would like Still Waters to ‘establish additional locations’. Only 13% would prefer Still Waters ‘grow by relocated to another location’, and two individuals (1%) would like Still Waters to ‘stay the same’. Eighteen percent of those who participated in the survey indicated ‘I don’t know/No opinion’ regarding the model Still Waters should use were it to grow. Five respondents (3%) provided comments about ‘other’ models for growth; they are listed below.

- Grow based on the needs of current families and those you wish to serve. A new location may throw current families off due to convenience, etc.
- Would a survey of need/additional areas be helpful?
- Sorry I do not know enough. Is there room to expand? What would be the cost? Do the number of clients support the expansion?
- Needs research on available options on site and/or another site

- Growing in the current location provided that there is somewhere then for the youth to use or share



### Comments

Those who participated in the survey were also invited to share any additional comments regarding Still Waters, and 68 chose to do so. The majority of the comments fell into the following categories:

- **Increasing Capacity:** whether it would be positive or negative, why it is or is not important, ideas on the best model for growth or why some models would not work, etc.
- **Advice or Things to Consider:** questions that still need to be answered, ideas or suggestions on how to move forward, financial impact of some of the proposed ideas, etc.
- **Relationship with CUMC:** whether it is a positive or negative aspect for Still Waters, financial considerations, impact Still Waters has on the church, etc.
- **Praise for Still Waters:** how wonderful the staff and volunteers are, how important the work is, etc.

While some comments fell into multiple categories, they are listed below by the primary idea.

*Please note, while some comments are listed verbatim, some have been edited for readability or to maintain anonymity.*

### Increasing Capacity

- Still Waters is an outstanding Adult Day Center. I'm sure there is a need for more people to be served, but the most important aspect is the loving care. If that can be maintained with growth.....fine, but sometimes bigger isn't always better. There is an important balance. Still Waters utilizes a lot of competent volunteers who provide loving care. A larger more commercial facility may not rely as much on volunteers and that would be a loss to the program.

- Considering the size of the entire ministry center and the "Family Life Center" (formerly the CUMC sanctuary) it may be wise to have a professional architect provide options, for consideration, for use of these facilities.
- Still Waters is one of the best ADC's I have ever visited, that is due, I believe to its small size and personalized attention of the staff.
- I think there is a great advantage to Still Waters remaining the size it is - it creates more of a "family" atmosphere which I think could easily be lost if the center grew larger
- A RN & SW would be nice, but I think there would need to be many more people before a full time SW. I there would also need to be more people before there would be enough money for a full time RN. It's kind of a chicken and egg sort of question. I don't think there is room for expansion at the present location, so I don't know which would be better relocation of having additional locations. I do think part of Still Waters charm is its small size.
- I wish my mom had this option when she and my disabled father. He would have gotten some social interaction, and she would have received a desperately needed break. I think expanding and advertising is important as this could benefit so many more adults and their caregivers.
- I would like to see Still Waters grow by expanding in its current location until all available space is utilized and after that look for another location. Multiple locations would be hard to manage.
- I like the fact that has a smaller enrollment that gives more individual attention to clients.
- I don't think with our youth growing like it is, we have room for Still Waters to grow and stay in the same place. There just isn't enough room. Their services are phenomenal and should be growing but probably at a different location with bigger and better facilities.
- It would be beneficial to grow in all capacities.
- There is really no need to open more locations because you have to consider the cost of running one. If you have a large turn out, then you need expansion and provide transportation. When people get a ready available transportation, they will be willing to get there as long as that place gives them joy.
- Brick and mortar are always costly. I think using the available space is better, if the church lets you.
- I think that by staying in the current location and expanding, if possible, would be the least disruptive for the staff and the guests. However, if that is not possible then moving to a more centralized location might be a better solution.
- Expanding to a new location close by would allow the Church to continue to grow and provide a place where Still Waters could continue to expand as needed.
- The boutique approach is very, very important to me because older folks can't get too easily pigeon holed in larger "one size fits all" facilities.
- Definitely need a bigger facility. A quiet place away from the stream of activity, where guests can lie down for napping or when they are ill is much needed.
- However BIGGER is not necessarily better.
- We like Still Waters because it is a smaller place and the individual does not get lost in a crowd.

### **Advice or Things to Consider**

- I can't completely answer some of the above questions, so it makes me want to ask questions. Are there currently enough inquiries about Still Waters services that makes you wish you had capacity beyond 20? Having an RN and Social worker on staff are a financial decision, what attendance number do you need to be able to support them?
- It is hard to answer some of these questions as I do not know the context. My assumption is if location is a major barrier, then additional locations might be preferable although the cost goes up for anything outside a central core. I do worry that the pressures of other ministries at the church compared to the growing and important needs of Still Waters may come in conflict, and that's not

the ultimate goal of anyone involved in any of these programs. In addition, I do not know if you have a waiting list that indicates you have pressures, although 17/20 spots indicates if it not now, probably very soon you will be. Congratulations on this success! You obviously have met a need in the community.

- I'm uncertain of what Still Waters "wants to be when it grows up." If it wants to be an Adult Daycare that competes in the marketplace with other such providers, then its present quarters are too small, it is probably understaffed with professionals (RNs and SWs), and I'm not sure why it needs/wants to be affiliated with CUMC. If it wants to be an Adult Daycare that is quaint and focused on the mission of our church, then the smaller venue, size, and professional staff may be sufficient.
- Community education as advantages of ADS for caregivers as well as their family member that will receive the service. Partnering with other community agencies that provide services for elderly and handicapped individuals, e.g., Area Agency on Aging, education facilities such as universities or Ivy Tech, with emphasis on nursing, social services, recreational and music students. ,and your United Way or Community Foundations will not only get your program availability recognition ,but provide possible fundraising sources and potential volunteers.
- I am neither opposed nor in favor of expanding the capacity of Still Waters. However, I believe they serve a unique niche in the elder care field and am less in favor of expanding into the skilled care field, unless a strong argument can be made that there is an overwhelming need. Similarly, I'm unsure whether the additional cost, liability, and responsibility of providing transportation services is a prudent addition to the services offered by Still Waters. The availability of a social worker, whether part-time or full-time, would seem to be a worthwhile addition.
- What if other churches could become involved? This might provide additional locations as well as a base for additional volunteers and clients.
- I have been involved in the startup of 6 centers and in my experience the growth happens quicker with the centers that offer transportation. VA contracts require it, and most Medicaid waiver client need it to attend.
- While these additional services would be great, they would also add greatly to center expenses. So then you have to figure how to continue to be affordable. While important, I am not sure you would need a full-time RN or social worker. Part-time might be more affordable. Also, while I think the need for adult centers continues to grow, I think it is important not to try to care for too many at one location. One thing I liked about Still Waters was that it was homey; there was a "comfortable" number of people there; it wasn't overcrowded.
- I think to add fulltime RN or Social worker or transportation Still Waters needs to clarify the level of care or needs they want to provide. However from a family standpoint it would be good to know a nurse is always there.
- If you take all levels of care that may impose greater problems for activity programming such as needing different levels, e.g., if you are more Alzheimer's based, then you'll need one level of programming, but if you're more "care based" but with good mental capacity, then you would need different programming. I think the more diverse the guests the more difficult to balance staffing needs and budget. You would almost need different rooms for different programming. The more diverse the guest the harder for staff to keep everyone in one group and the more distracting for guests if you have guests who are disruptive.
- Also providing transportation to appointments may pose a problem with having to go with the individual and then getting into medical needs for that person without a family member being present. This type of service would definitely increase the budgetary needs with a van and a qualified driver plus someone to go with the guest.
- I think it is also important to assess how much physical care you want to take on. This criteria should be set up as to what type of guest you can take or handle including criteria for what type of mental capacity, i.e., Alzheimer's vs mental illness dx.

- With regard to a full time nurse ... I am sure this would increase the cost, and feel cost is a very important consideration especially for the family using the service. There is not a full time nurse at home and family has learned how to deal with the care needed. I don't think it has to be a nurse in order to provide the care an adult attendee needs. The only advantage I see is that a nurse might notice change and realize additional attention or care is needed. This can be covered by a part time or consulting nurse/ physician assistant.
- If you are looking to grow consider advertising in (other) church bulletins. Many services with similar objectives (assisted living facilities, home care organizations etc.) find this an effective, reasonably priced way to get to an already interested market. With regard to a full time nurse ... I am sure this would increase the cost, and feel cost is a very important consideration especially for the family using the service. There is not a full time nurse at home and family has learned how to deal with the care needed. I don't think it has to be a nurse in order to provide the care an adult attendee needs. The only advantage I see is that a nurse might notice change and realize additional attention or care is needed. This can be covered by a part time or consulting nurse/ physician assistant.

### **Relationship to CUMC**

- I don't know enough about the financial arrangement with our church to know which of the above models would be most appropriate. I don't think that the church could be any more involved financially than it is currently.
- I answered that I think it is somewhat important for Still Waters to keep its religious affiliation because it clearly is based in a church, uses an important metaphor from the Psalm 23, and clearly has people throughout its management who are outwardly faith centered. I do not believe that a quality adult day service must be faith based. It clearly fits Still Waters.
- CUMC and still waters have to decide their relationship going forward for a lot of these questions to be answered accurately.
- Many of these questions depend on who is paying for the service and is Still Water looking towards CUMC. Until CUMC recovers from its other financial obligations, there isn't much money to be had from CUMC, though I like that we have the services provided on our property.
- It is extremely important to keep its religious affiliation.
- Still Waters certainly receives a lot of attention from Castleton Church, but with a daily attendance of only 17 people, I still question whether or not this is a ministry program worthy of the time, space and staff it takes to operate. Perhaps the best course of action for Still Waters would be to spin out from Castleton Church entirely - remove the religious affiliation and any monetary/administrative support - and see if the marketplace puts as much value on these services as a small group within Castleton Church seem to.

### **Praise for Still Waters**

- You all are doing an amazing job, such a great place serving so many. Keep up the good work, hope it grows and grows to serve as many people as needed!!
- Still Waters has the kindest, most attentive people to care for the elderly in such a loving manner. It's the best, and I tell everyone who is in need of an adult day care provider about Still Waters!!
- My loved one and I have both grown through his being a part of Still Waters.
- What a wonderful caring place
- Still Waters is an amazing program! The staff is so loving and caring to the adult day care participants!
- Thank you for doing this important work. God bless you.
- Still Waters is a wonderful program. Good job to all involved.

- Have heard such positive comments about still waters. Love seeing and hearing of involvement of staff and volunteers with guests!
- I have heard many great things about the program. As a healthcare worker, I know these services are greatly needed and I am proud to have them as part of our church
- I'm proud of CUMC for the courage to look at the real needs of those who need these services.
- Adult Day Centers are the ideal solution for patients and caregivers and are in such demand. I have recommended your center and will continue to in the future!
- I was very impressed when I visited Still Waters with my mother. I like the varied activities offered, including helping with church activities, e.g., pie making for the fish fry, using fresh vegetables grown for their meals, interacting with the children's program.
- What you are doing is wonderful. I pray that God will continue to lead this effort and bless all involved.
- I have heard only wonderful things about Still Waters.
- I think Still Waters is a marvelous facility and program. Thankfully, so far my parents have not been in a position to need a day care center.
- I think this is a fantastic ministry. I would love to see it continue to grow and add more services.
- Having a place like Still Waters to bring my mom to has dramatically improved her life (and mine as well). I think the current staff to guest ratio is wonderful, and I'm amazed that the rates charged are as reasonable as they are. I wish the center were a little closer to my home (the drive is 20 minutes each way), but the benefits my mom and I receive from Still Waters greatly outweigh the inconvenience of the relatively long drive.
- Still Waters does an excellent job of providing a safe, caring & stimulating environment. We love the fact that it is faith based!
- This program is an amazing ministry for our church and community!!!
- Very knowledgeable director and assistant director in the field of older adult care. They have created an open and caring environment for our guests.
- Still Waters is one of the best run Adult Daycare centers I have been involved in or visited. The appropriate and amount of activities are wonderful. The patient to staff ratio is phenomenal. The facility and staff are very friendly and helpful to everyone. They offer many additional services to assist patients and family in self-care needs and are a great support system. I highly recommend Still Waters to anyone interested.
- Doing a great job! Great leadership both paid staff and volunteers! Warm, caring caregivers!
- Keep up the great work!
- By being a volunteer at Still Waters, I see the loving care and concern the guests receive.
- Also, the thought and preparation taken to keep the guests involved.
- Your staff is beyond AWESOME!!
- Your staff makes the daycare a perfect fit for us as they are caring and attentive. They work hard to make people feel comfortable and a part of the group. You have done an awesome job in screening staff for this kind of work.
- It's a wonderful place and ministry, with outstanding staff and care-givers.
- We will be praying for you during this time of important decision making. God bless you and thank you for all you do.

## Other

- Be extremely friendly to all who don't see you on a daily basis
- Keep the vision for our community and involve more people. It is a needed service in which trust is needed for the elderly! Treat people with dignity!
- I think that the speaker series was wonderful! It offered great education. Maybe providing something for professional staff in community to be educated about newer dementia care

approaches. Also, having a social worker on staff or even a Mon licensed social worker would be helpful for families!

- The need for Adult Day Centers is only going to grow. I would like to see more promotion of the services offered at Still Waters with videos during Sunday services or in the Narthex.
- Most medical ADCs employ a LPN. A social worker is only needed to review level 3 charts if you are a medical model.
- I think a social worker could be important in assisting individual families toward other services or when to consider long term care.
- Would have liked more background information on question 16, such as demographics of current clientele, etc.
- I had a hard time answering the above questions because of the terminology "based on this". That implies that Still Waters should seek to model itself after the majority of other facilities. I think this should not be the determining factor for any decision. My mother used to say, "Just because someone else jumps off the bridge, does that mean you should jump off?"
- Need dishwasher, more kitchen counter space, and larger cart for serving food
- Need a dishwasher and larger kitchen area. It would be nice to have larger carts to serve food from and more counter space.
- Having the preschool and day center interact is a positive.
- Saturday services??
- Not sure that would need to be full time but would depend on the type of guests you take.
- I have worked in school settings, have cared for two elderly family members, and am a member of CUMC. I am very interested in becoming a volunteer at Still Waters.



## Appendix C: World Café Notes

### WELCOME AND OVERVIEW

On February 10, 2014, Kathy Pellman, the Executive Director of Still Waters Adult Day Center, welcomed everyone to the visioning process and World Café. Every person in this room is here for a reason. You play a significant role in determining where this ministry is headed.

Tracey Leslie opened with a prayer. Lena Hackett, from Community Solutions, Inc., introduced herself and the visioning process, which is being funded by CICF. The visioning process is about what Still Waters wants to be in 5 years. We knew what a lot of individuals want. What does the group as a whole want for Still Waters? What are best practices? What do adult day services look like around the country?

We have conducted several conversations, did a survey, researched best practices, and now we are having the World Café, which is focused conversations to come up with a vision. Folks get to hear from each other and come to a consensus on their discussion.

From all of the data we've gathered and the conversations we've had, we know that Still Waters wants to grow and expand. Based on the community survey, 88% of respondents felt that expanding capacity was either very or somewhat important – only 5% of respondents said it is 'not at all important'. What does that expansion look like? How should Still Waters grow? This session is about the development of the vision for that growth and what Still Waters should look like going forward.

### ROUND ONE: ENVIRONMENT

There has been lots of input that one of the things that makes Still Waters so special is the "environment" that exists at Still Waters. No matter what happens, the environment must be preserved.

**What are the key components that create the "environment" of Still Waters?** How is this experienced by guests? How is this experienced by the families? What would you want to make sure stays in place as Still Waters grows?

Responses are listed below, organized into themes.

- Environment/Atmosphere (19)
  - Small groups
  - Guests made to feel special
  - Creativity of people and activities – allow areas for individual interests.
  - Fun – you enjoy the guests, and they enjoy themselves
  - Create environment of 'normality'
  - Physical environment is cozy/homey/intimate with the living area, dining area, kitchen, game room, pictures on the walls
  - Environment of expectations, such as safety and credibility
  - Small, family atmosphere where the guests know each other.

- Structured so there is an open view of the majority of the Center – everyone is always invited.
- Staff offices close by
- Clean – doesn't smell like older care facility
- Located in a neighborhood area, not commercial
- Staff (14)
  - Good selection, very professional
  - Empathetic
  - Low guest to staff ratio
  - Continuity of staff
  - Blend of professionals and para-professionals working together
  - Leadership
  - Focus on people more than money and finances
  - Level of caring
  - Respect and sensitivity toward caregivers and guests
  - Not just working for paychecks. It's a ministry, and they treat everyone with dignity.
- Volunteers (11)
  - Called to serve
  - Trained
  - Appreciated by staff and guests
  - Low guest to volunteer ratio
  - Engaged
  - Consistent volunteer base
- Relationships/Interactions between Staff/Volunteers/Guests/Caregivers (9)
  - Guests don't have "history" to live up to – staff take them where they are
  - Sense of family among guests and between guests and staff/volunteers
  - Closeness between staff and guests and ability to give insight to caregivers/families of guests
  - Fun and laughter – relationships staff has with guests
  - Person-centered care – something available for every individual
  - Personal interactions that adjust to individual needs and personalities
  - Welcoming throughout the Center
- Activities (8)
  - Meaningful activities are available based on interest, level of ability, diagnosis
  - Activities/therapies allow for free discussions of deeper feelings
  - Enriching activities are well planned
  - Multisensory activities
  - Large number
  - Stimulating – activities board, get multiuse of space
  - Activities are adapted to everyone's abilities
- Safety/Security (8)
  - Always someone with guest
  - Professional people
  - Locked door
  - Report for personal hygiene

- Can see everything
- Policies and procedures for charge in rooms
- Front desk
- Support for caregivers (7)
  - Services provide relief for caregivers
  - Feels secure and like guests will be taken care of
  - Current accounting practices – up-to-date and accurate
  - Front desk is comforting to caregiver
  - Speaker series
- Christian focus (6)
  - Care for those who need help
  - 90% of volunteers from church
  - Church members as active participants and actively practicing ministry
  - Religious affiliation – being able to pray or Christian-love
- Guests (3)
  - 100% senior population
  - Diversity in levels of ability and expression
  - Guests give back as much as they can and teach the staff new things every day.
- Community Connections/Interactions (3)
  - Community connections with IUPUI Music Therapy, Heron, St. Mary of the Woods, Lawrence Township, service projects, McKenzie Career Center
  - Outreach – speaker series educating community and caregivers
- Services (3)
  - Added services like podiatrist, hair, OT/PT, massages, etc.
- Vision (1)
  - Our true vision is from a base of someone with deep personal knowledge of the needs. That drives all of it.

## **ROUND TWO: SERVICES**

There are a range of services that can be available at Adult Day Care programs for both guests and families of guests.

**What are the most valuable/important services that Still Waters should offer now and in the future?** What are the most valuable/important services that Still Waters currently offers? What other services do you think would be important components of growing Still Waters?

Responses are listed below, organized into themes.

- Providing Services and Support for Caregivers and Families (12)
  - Add financial coaching for families
  - Add funeral/estate planning with guidelines and help for caregivers
  - Caregiver education on the disease process of Alzheimer's
  - Continue to offer and expand services to help caregivers
  - More caregiver resources and services
  - Regular, formal reports from Still Waters staff to caregivers interpreting what's going on with their love one – maybe monthly?
  - Support group for caregivers – maybe run by chaplain?

- Hours on Saturday for weekend respite for caregivers
- Add art therapy for caregivers
- Have special events where caregivers and families are united
- Expanding Existing Services/Space (12)
  - Exercise, including improved outdoor area for walking
  - Expand current programs to make them bigger
  - Grow in numbers or care for needier people
  - Increase to Level 2 facility
  - Increased hours – evenings or some on Saturdays
  - Need larger space
  - Improve entrance/drop-off setting to make it covered and safer
  - Increase visual accessibility – security cameras, snapshot picture
  - Continue meals
  - Continue/expand relationship between Still Waters guests and CUMNS participants, and in turn, more of a connection to the Church as a whole
- Staff (11)
  - Add Case Manager/Social Worker (5)
    - Evaluate needs of guests
    - Purposeful communication with families within the first 60 days and at least every 6 months or more frequently as needed
    - Ask for input from family about the needs of the guest and medical situations
    - Disseminate resources and information to caregivers
    - Discuss what is currently going on as well as what might be the next steps regarding care for their loved ones.
    - Could be only part-time
  - Add Full-time RN
    - Increased medications and diagnoses
  - Add Full-time Activity Director
  - Maybe add a Kitchen Manager?
  - Have assigned pastor or chaplain for spiritual care
  - Retain consistency in staff, so guests and families know who will be there.
  - Unsure about skilled nursing care. We would have to be ready for how it impacts both Still Waters and the Church.
- Adding Services (7)
  - Occupational Therapist
  - Dental component
  - Equipment exchange for walkers, wheel chairs, shower seats, etc.
  - Increase “stimulation” therapies
  - On-site Minute Clinic of some kind with screenings, flu shots, TB shots, etc.
  - Weekly Communion at chapel service and Communion during Lent
- Transportation (6)
  - To/from the facility
  - To/from other facilities for activities (field trips)
  - To/from medical appointments
  - Affiliation with medical transportation service, e.g., Yellow Cab

- Contracted/concierge services as opposed to purchasing a bus
- Combine efforts with CUMC
- Mixed thoughts on transportation – should be based on needs of prospective guests
  - May increase cost of services
  - Cost of insurance, drivers, vehicle
  - Wheel chair accessible
- Maintaining Existing Services (5)
  - Keep existing games/activities
  - Safety services
- Community Interaction/Involvement (4)
  - Still Waters to be a part of CUMC, as part of a senior community as an outreach – both the church and Still Waters become the “aging experts” resource in the community.
  - Increase scholarships for those who can’t afford services
  - Don’t be all things to all people
  - Expanding opportunities for people looking for career placements/internships
- Volunteers (3)
  - Continue to train staff and volunteers for grown, and provide opportunities for additional training/education
  - Have volunteers join guests for doctors’ appointments
  - Increase volunteer opportunities and involvement, particularly for church members

### **ROUND THREE: ROLE OF CUMC WITH STILL WATERS**

Still Waters is currently a ministry of CUMC. That means that CUMC holds decision-making authority for Still Waters, and they provide some services and resources at low- or no-cost.

**What should the relationship between CUMC and Still Waters be?** Assuming that Still Waters continues in this relationship with CUMC, what should that look like in terms of other connections to the church, members of the congregation, etc.? What would you see that would tell you that the church is in full partnership with Still Waters?

Responses are listed below, organized into themes.

- Maintain Strong Relationship between CUMC and Still Waters (9)
  - Expansion away from Church could reduce richness of the volunteer experience and participation.
  - It is very important to families and caregivers like that Still Waters is based on the Church campus.
  - Keep Still Waters as a ministry of the Church and expand.
  - People trust Still Waters because it is part of the Church.
  - Run Still Waters with a heavy relationship with the Church.
  - Still Waters is not just a ministry of the Church, but it is a mission of the Church. CUMC should be able to use Still Waters to show our love as a mission as well as a ministry to the community.
  - Still Waters should have mutual involvement with CUMC.

- Still Waters should remain attached to the Church even if the facilities move off-site or it takes its show on the road to other churches.
- Collaboration between CUMC and Still Waters (6)
  - Each should have a better understanding of the other's needs and possibilities.
  - CUMC should do more bragging about Still Waters
  - Collaborate on space, e.g., sharing kitchen space
  - Have ministries more involved/advocating for Still Waters
  - There needs to be strengthened, more integrated communication between Still Waters and the Church, going both ways.
  - Concern that there is a disconnect between Still Waters and the Church. There should be a more open relationship and a better flow of information between the two.
- Still Waters needs to figure out how it governs itself with/without the Church. (5)
  - Need structural group – advisory or governing board
  - Questioning whether the new church governing structure can best support Still Waters, or is autonomy better?
  - Still Waters should establish their own governing board made up of elder care professionals, caregivers, volunteers, and others with people with a stake in Still Waters.
  - The Church has the potential to limit any growth Still Waters wants to do, whether they expand on-site or partner with other churches to start additional centers. There should be a strong relationship between Still Waters and the Church, but any plan to move grow needs to solve for this. Relationship should stay strong and vital, but then you have to solve for growth.
  - There are churches that, as part of their mission and ministry, let them operate on their own but provide space. How Still Waters governs themselves is of primary importance.
- Still Waters as Ministry and/or Mission of the Church (5)
  - Can the relationship exist if it weren't a ministry?
  - It may be alright for the ministry to exist without having Church members participate as guests.
  - The Church decided that it wants to prioritize caring for families, and elder care is a big part of that, so Still Waters is a big part of the Church's priorities.
  - The vision has to be shared by the Church and all of its ministries. We have to cooperate. If Still Waters reached the national average number of clients, expanding the facilities would take working together with all of the groups who utilize the space, so the ministries should complement each other instead of being competitive for space.
  - There's need for a total visioning by the Church to deal with space concerns. There may be expansion opportunities on campus, but that could impact other ministries.
- Community Interaction/Involvement (3)
  - Educate the congregation and community about getting involved and aging-related issues.

- What is the current disconnect in terms of participation? There's still that stigma with dementia. Because members are here and present, they may not want to ask for help within their church or disclose that their loved one has this dementia.
  - The congregation needs to be educated about dementia, caregiving and end of life issues.
- The need for Still Waters' services waxes and wanes. It is in a wane right now, which may be due to the weather, but we know there will be greater need for it in the future based on the aging population.
- Still Waters should not turn into a business (2)
  - Still Waters is still subsidized by the Church, which allows them to focus more on guests, which is a good thing. We don't want Still Waters to become a business.
- More Integration between CUMNS and Still Waters (2)
- Other (3)
  - How many caregivers or families are starting to attend CUMC?
  - Be transparent to families about the finances.
  - Will the Church become a primary healthcare provider in the future?

## **WRAP UP**

The Visioning Committee will review the comments from today and refine the themes and ideas. The Visioning Committee will draft a visioning statement by the end of February and present it to the Church board. The end result will be a vision that outlines the priorities for Still Waters over the next three years.