

Budget Request: Pilot Program for Village Infrastructure to Fulfill Objective #90 of the Governor's Master Plan for Aging

Submitted February 23, 2022 by Charlotte Dickson, Village Movement California Executive Director
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Questions and format from the "Assembly Guidance to Advocates", Revised January 7, 2022

1. (a) Please provide a title for your proposal

Pilot Program for Village Infrastructure to Fulfill Objective #90 of the Governor's Master Plan for Aging

- **The Sponsoring Organization, Village Movement California, requests a one-time amount of \$2,985,000 million over three years to invest in the growth, impact, and sustainability of California's village movement to fulfill objective #90 of the Governor's Master Plan for Aging:** Promote and adapt the village model of volunteerism and services to reflect the strengths of California's diverse communities. The annual progress report covering the Governor's Master Plan for Aging states: CA Department of Aging is in active discussions with the peer-to-peer Village Movement CA to assess the feasibility of expanding to underserved communities with a focus on racially and ethnically diverse older adults and seniors who are economically disadvantaged.

This one-time investment in the pilot project will be matched by \$1,052,500 in private funds. The pilot project will support development of an infrastructure for Village communities and services to expand to reflect and serve CA's diverse older adults.

Villages are intentional, community based, intergenerational, membership organizations led by older adults to support healthy aging in community. They deliver social care to low, moderate, and middle class Californians: high-quality social connections; access to resources; mutual aid and support; opportunities for volunteerism and social integration; and contributing to the greater good. Providing for older adults' social/emotional needs addresses a core social determinant of health and mitigates the negative physical and mental health impacts of isolation, loneliness, and depression. During Covid, Villages stepped up to assure older adults stayed connected to community and services. Many villages experienced increases in membership as older adults realized they needed support to maintain mental and physical health.

Villages offer social and educational programs in brick and mortar locations and online. Villages vet, train, and then match volunteers with members to arrange for services that are typically delivered in the home. Currently 46 villages engage 10,000 + older adults and intergenerational volunteers. Village Movement California (VMC) is the statewide coalition of villages and the entity responsible for administering State funding.

Specifically the pilot program will:

1. **Build Village Movement California’s infrastructure** for seeding and supporting village development and operations with a focus on underserved communities and older adults of diverse identities.
2. **Launch seven villages in communities** seeking to build peer to peer support for older adults reflective of CA’s diverse populations. **Expand nine operating villages** into underserved communities. Currently VMC is supporting Village exploration and development in Fresno, Kern, Los Angeles, San Joaquin, Sonoma, and Yolo Counties.
3. **Scale a state of the art technology platform** to boost volunteerism and civic engagement among older adults, scale social care, and collect data across the Village Movement to measure impact and connect Villages to healthcare and government systems.
4. **Integrate Villages into the California Department of Aging’s Hubs and Spokes** system of services delivery to reach and support older adults of the moderate and middle class who currently are not served by the public system of care.

If approved, the funding will be administered by VMC and shall include but not be limited to the development of a technical assistance collaborative with a:

- a) Village Incubator to offer materials, workshops, coaching, and a learning community in a variety of languages.
- b) Diversity Equity and Inclusion Training Institute to offer materials, workshops, and a learning community to introduce knowledge and skills for reaching diverse older adults. The Training Institute will emphasize institutionalizing policies and practices of equity and cultural competency into the Village Movement.
- c) Establish a technology platform to aggregate and report demographic, social, and health data for government and healthcare partners, including regional Hubs and Spokes.

The University of California will support the monitoring and evaluation of the pilot program.

A three year investment by the legislature will build a sustainable infrastructure to delay or avoid over-utilization of higher levels of long- term care and long-term services and supports paid for primarily by the State’s Medi-Cal program.

2. Additional background information, research, or other source material to explain the justification and rationale for the proposal.

According to AARP, nearly 90% of older adults want to continue living in their own homes and communities as they age, regardless of income. Currently, publicly funded services that support aging-in-community in California are primarily focused on low-income older adults and those who qualify for Medi-Cal. Village members are typically Medicare recipients, enrolled in either Traditional Medicare or Medicare Advantage plans. Some Village members are dually eligible for

Med-Cal and Medicare. Most are moderate and middle income and part of the “forgotten middle.” Approximately 10% of Village members statewide are low income.

The “forgotten middle” accounts for approximately 3.4 million, or 40% of older Californians. Many do not currently qualify for services, yet lack sufficient income to pay for what they need on their own. Now, and well into the future, millions of moderate- and middle-income older Californians and their families will be left to rely on themselves to secure services required to age with optimal health and dignity. The state’s initiative to create a public long-term care insurance program is fueled by concerns about the forgotten middle. The development, funding, and implementation of a public long-term care benefit will occur several years into the future. Investing in the Village Movement now is a low risk/high return proposition that enables the state aging services continuum to support this population and prevent undue expenses.

Evidentiary Support

- Pearson, C.F., Quinn, C.C., Lognathan, S., Datta, A.R., Mace, B.B., Grabowski, D.C. The Forgotten Middle: Many Middle-Income Seniors Will Have Insufficient Resources for Housing and Health Care. *Health Aff.* 2019; 38(5):1-9.
- California Department of Aging, 2020 Income Data
- Graham, Carrie L., Scharlach, Andrew E., Worl, Jennifer P. The Impact of the “Village” Model on Health, Well-Being, Service Access, and Social Engagement of Older Adults. *Health Education and Behavior.* 2014; 41(1S) 91S-97S.
- Department of HealthCare Services, Profile of the California Medicare Population, February 2022.
- DaSilva, Jessica. Findings from the California Pacific Medical Center ACE Unit & San Francisco Village Discharge Pilot Project, PowerPoint Presentation. 2021

3. Who is the Assemblymember and/or Senator who is sponsoring your proposal, with staff contact information.

We are in conversation with Representative Jacqui Irwin and her staff member Cassandra Mar. We met with Liz Fuller, Consultant for the Assembly Aging and Long Term Care Committee, on February 14. We are setting up meetings with the offices of Assemblymember Mullin and Wood.

4. How much General Fund (one-time or on-going) you're asking for and how you arrived at that estimate. If federal, special, or other funds are involved, please provide that detail as well. In addition, please complete the following table:

	2022-23	2023-24	2024-25	2025-26	Ongoing? (Y/N)
General Fund	\$ 980,000	\$ 980,000	\$ 1,025,000	\$ 0	N
Federal Funds	\$	\$	\$	\$	
Special/Other Funds	\$	\$	\$	\$	

The three year budget includes:

\$1,627,478 - Staff of Village Movement California to develop, implement, and oversee the pilot project. Five FTE with benefits will support statewide efforts.

\$216,028 - Project Operations

\$ 905,000 - Village Subcontracts in four areas

- a. Start-up funding for seven new Villages
- b. Funding to support expansion of nine Villages into underserved communities
- c. Seed funding for diversity, equity, and inclusion practices and policies in 21 Villages

\$ 645,000 - Consultant Expertise in six areas

- a. Communications
- b. Website programming
- c. New Village development
- d. DEI policies and practices
- e. Language translation
- f. Monitoring and Evaluation

\$276,527 - Indirect for Village Movement California @ 15% of personnel and operating

\$367,003 - Costs to the State @ 10% of total project expenses

5. What technology/automation, state operations, and staffing costs may be involved (these should be accounted for in your estimate and in the total numbers per the above bullet).

10% of the total expense budget - \$ 367,003

6. If trailer bill or **budget bill language** is necessary, please provide drafts of those language pieces (with unbacked RNs from Legislative Counsel for trailer bill language for statutory changes, a Word version for budget bill language is adequate). If you do not yet have this prepared, please describe what will be needed and indicate when you can provide drafts to me and all other institutional stakeholders, keeping in mind that the earlier you can vet language in our process prior to April/May, the better your chances of coming to agreement on language if your proposal is ultimately funded.

Language to be submitted.

7. Details on who you've connected with within the Administration (all levels) and Senate.

Village Movement CA leadership met with Susan DeMarois, CA Department of Aging (CDA) Director, and Amanda Lawrence, CDA Master Plan For Aging Leader, on January 22, 2022 to discuss the proposal. Leaders were encouraged to pursue the Stakeholder Process for budget requests.