Dignity Fund
Community Needs Assessment

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Dignity Fund Overview

• Creates special fund (“Dignity Fund”)
  – Requires City contribution ($38M baseline to grow by $33M over next 10 years)
  – Allows unspent funding to roll into following year

• Establishes planning and allocation process
  – Including Community Needs Assessment and Service and Allocation Plan

• Creates Oversight and Advisory Committee
Dignity Fund Planning Cycle

- Year 1: FY 17/18
  - Community Needs Assessment

- Year 2: FY 18/19
  - Service and Allocation Plan

- Year 3: FY 19/20
  - SAP Year 1

- Year 4: FY 20/21
  - SAP Year 2

- Year 5: FY 21/22
  - SAP Year 3

- Year 6: FY 22/23
  - SAP Year 4
  - Community Needs Assessment
  - Service and Allocation Plan
Conduct a participatory Dignity Fund Community Needs Assessment (DFCNA) process rooted in robust data collection that will identify the strengths, opportunities, challenges, and gaps present in the current services landscape to support an equitable and data-informed Service and Allocation Plan.

- Review literature and conduct initial research
- Develop a robust data collection plan
- Conduct community forums, survey, and focus groups
- Complete equity and gaps analysis
- Create DFCNA to support the Fund’s Plan
DFCNA Findings: Strengths
(See report for full list)

• SF DAAS is serving 1 in 4 of city’s older adults
  – 1 in 2 of low-income older adults

• Populations with presence of an equity factor tend to access services at a higher rate than overall population

• Consumers participating in existing programs view them favorably
1) Consumers and service providers are often unaware of existing services – many do not know what is available or how to access support
   – Recommendations: Conduct public outreach campaign about existing services; consider peer ambassador models to support service navigation

2) Many older adults and people with disabilities report experiences of ageism and ableism
   – Recommendations: Conduct public marketing campaign to raise awareness and sensitivity to the needs of older adults and people with disabilities among the general public; support intergenerational programming
DFCNA Findings: Gaps and Recommendations
(See report for full list)

3) Adults with disabilities under age 60 access services at a lower rate than older adults
   – *Recommendations*: Enhance services that specifically focus on this population; consider department name change

4) Caregivers would benefit from additional support
   – *Recommendation*: Expand services that support caregivers, particularly those with limited or no English-speaking proficiency

5) Limitations in client data creates challenges in assessing service participation and completing equity analysis
   – *Recommendations*: Update Equity Analysis after first year under local SOGI requirement; work with service providers to improve data collection across all demographic fields
Equity Analysis: Overview

• Equity factors capture populations that experience systemic barriers that can inhibit accessing of services and resources.

• Service participation rates are standardized metrics that account for variation in population size.

• Comparing service participation rates across equity factors helps identify areas to address.
Equity Analysis: Nutrition

Figure 55. Participation Rate for Low-to-Moderate Older Adults for Congregate Meals, by District, FY16-17

Rate per 1,000 Individuals

City Rate: 281
Overall, consumers participate in Nutrition and Wellness service much more compared to other types of services, particularly congregate meals, home-delivered meals, home-delivered groceries. However, disparities were evident across districts and subpopulations, indicating there may be gaps in these services for some groups.
Opportunities continued

General recommendations:

• Expand outreach efforts and culturally appropriate services to address needs of adults with disabilities.

• Conduct targeted outreach strategies to engage populations with equity factors who have low participation.

• Examine how factors that increase service engagement can be leveraged to engage underrepresented populations.
More Information


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Questions and Discussion