

Home & Community Based Services

FACT SHEET – HOME & COMMUNITY BASED SERVICES

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Child Care

High quality child care has a positive effect on children by facilitating healthy growth and development and enhancing their success in school. The most beneficial care for children is safe, healthy, nurturing, cognitively stimulating, culturally appropriate, and sensitive to individual needs. High-quality care should be available, accessible, and affordable to all parents regardless of income. Parents who are in the workforce or in school to prepare themselves for employment need to become informed and knowledgeable about child care choices that can provide positive experiences to their children.

Adult-Senior Services

Home and Community-Based Services (HCBS) for Adults/Seniors include a variety of supportive services delivered in community settings or in a person's home. These services help older persons and adults with disabilities remain at home with services such as personal care with bathing, chore assistance, adult day services, transportation to medical appointments, and home-delivered meals.

As part of the 2009 Community Needs Evaluation, 1,736 people in Nashville (including clients of DHS, Catholic Charities, MAC, MSS, etc.) and 627 social service professionals were surveyed, and more than 100 consumers participated in focus groups, to help identify the greatest needs in Nashville. In addition, research findings from existing data were included about the areas of Food & Nutrition, Workforce & Economic Opportunity, Housing & Related Assistance, Home & Community Based Services and Transportation.

Key Findings – Child Care

High quality child care helps children develop better language skills, score higher in school-readiness tests, and have better social skills and fewer behavioral problems once they enter school. They are 40% less likely to need special education or be held back a grade.

Nationwide, 65% of mothers with children under age 6 are working (compared with 79% of mothers with children ages 6-13).

Regarding longer-term effects, research findings indicate that if a child enters school reading below grade level, that child has only a 12.5% chance of catching up. In addition, adults who participated in high-quality early childhood education programs during their preschool years are more likely to be literate and enrolled in post-secondary education, and are less likely to be school dropouts, dependent on welfare, or arrested for criminal activity.

When children are exposed to age-appropriate activities, children can develop a sense of well-being, which can reduce a cycle of crime, school dropout rates, and welfare dependency.

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Child care can be expensive and is often unaffordable for families with limited financial resources. In 2007, almost 50% of families with female householders lived below the poverty level and had children under the age of 5 years.

Child care programs are distributed unevenly across Davidson County. For example, more child care programs are located in 37207 than in any other Davidson County Zip Code, while other areas have very few programs.

Average annual fees in Tennessee paid for full-time center care are \$6,252 for an infant and \$5,732 for a four-year old, compared to the cost of annual tuition and fees for a four-year state college average of \$5,684.

There is limited availability of care for infants/toddlers for families at all income levels. In Tennessee, more than half of the requests for child care are for children under age 3. The required low adult-to-child ratios contribute to the high operating costs for infant and toddler child care.

The Tennessee Department of Human Services does not regulate or license child care providers who care for four or fewer children. They license other types of facilities: family homes caring for 5-7 children; group homes caring for 8-12 children; centers caring for 13 or more children; drop-in centers caring for 15 or more children (not to exceed 14 hours per week with up to 6 additional hours per week of evening [after 6 p.m.] care; and Alternative Child Care for back-up care).

Since there is a shortage of affordable center-based care, there is greater usage of informal providers (adult relatives, neighbors, or friends who take care of children while the parent is out of the home for a portion of the day). There is no effective way to identify or count the number of unregulated providers who care for children. Some informal child care providers often lack the resources and training available to center-based providers, and they have fewer opportunities for interactions in educational experiences and professional experiences that could benefit the children in their care.

Key Findings – Adult/Senior Services

In 2009, 39 million Americans (13% of the U.S. population) are age 65 or older, compared to 4% in 1900. The increase in age is caused by factors such as dramatic advances in medical science and public health, declines in fertility rates and the birth patterns (aging baby boomers). About 15,000 adults in Davidson County have at least one self-care disability. Many of them now need or can be expected to need long-term care.

The importance of HCBS is growing in low-to-middle income families because of the increase in aging/disabled family members. By 2050, it is anticipated about 20% of Americans will be over age 65 and about 5% will be age 85 or older. Depending on the specific services rendered and on the type of service provider, hourly rates for homemaker and personal care services range from under \$20 to more than \$50, or even more if special skills are required.

Many Davidson County residents are also caregivers who need help in their homes to take care of loved ones, with almost 25% providing some care for a person age 65 or older and about 42% assisting a family member or friend who is 60 years of age or older with personal care needs such as eating or bathing

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For persons who meet the income and other stringent eligibility guidelines, there is some government-funded in-home care, but there is not enough care for those who are eligible, so there are often waiting lists.

Thirteen kinds of services are currently offered in Tennessee through the U.S. Administration on Aging, the Tennessee Options Program, and the HCBS Waiver (funded through TennCare and managed by the Greater Nashville Regional Council Area Agency on Aging & Disability). Services available depend on the funding source and the needs of each individual person, and include non-medical personal care help, homemaking, home-delivered meals, adult day care, personal care aides and attendants, personal emergency response systems, minor home modification, chore services, caregiver respite, assistive technology, partial assisted living facility funding, and case management.

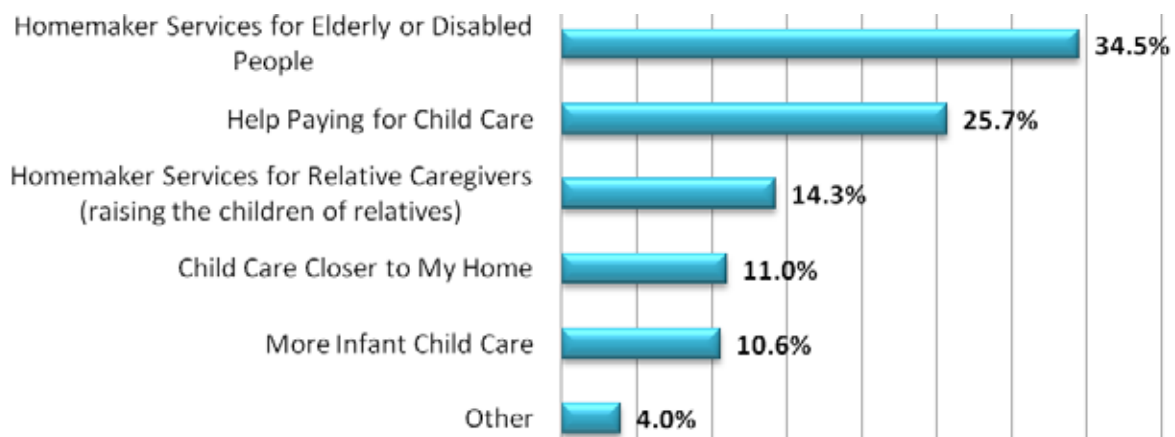
In March 2009 the waiting list at Greater Nashville Regional Council Area Agency on Aging & Disability had 671 people needing for federal- and state- funded in-home services in 13 Middle Tennessee counties, including Davidson. People in need of services may wait for more than two years. These services, including homemaking, non-medical personal care, home-delivered meals, personal emergency response systems, caregiver respite, minor home modification, and case management, are provided through state contracts with about 50 local agencies.

The aging of the population means an increasing number of older people seeking services. At the same time, the workforce of county service providers is also aging, creating additional stress on county governments as seasoned workers retire – the “Brain Drain.” In short, counties are being forced to provide more services for an aging population with fewer experienced public servants.

Grassroots Community Survey

Among the Home & Community Based Services listed on the survey, Grassroots Community Survey participants indicated that Homemaker Services for Elderly or Disabled People ranks as the greatest HCBS need in Davidson County (34.5%). The need ranked second was Help Paying for Child Care (14.3%). The other needs (Homemaker Services for Relative Caregivers, Child Care Closer to My Home and More Infant Care) were ranked significantly lower.

Greatest Need in Home & Community Based Services



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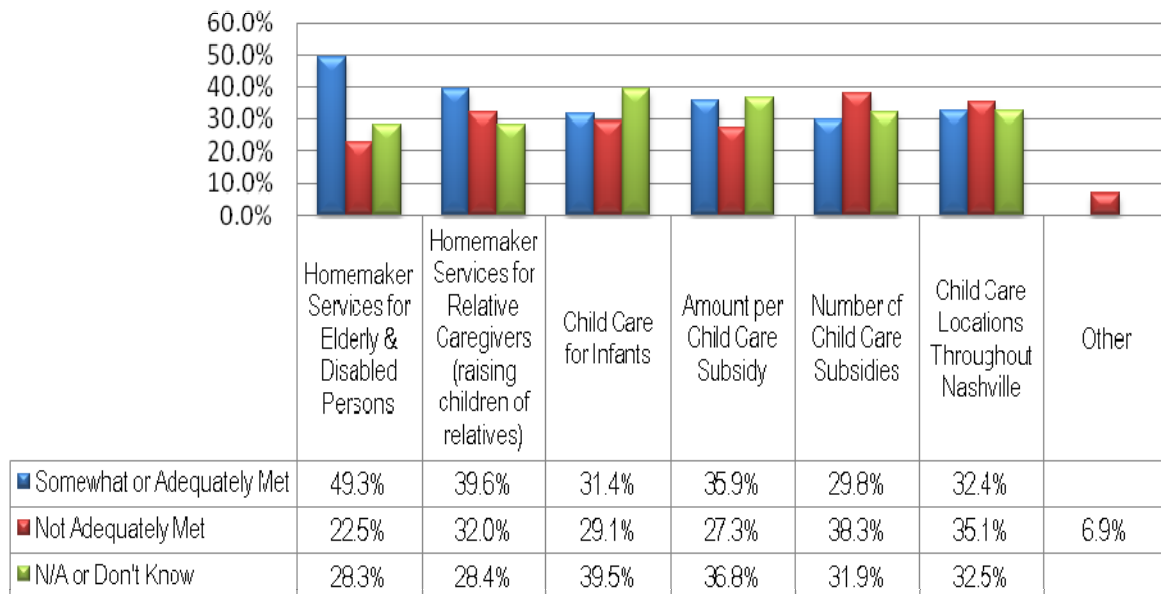
Professional/Agency Survey

Although the results of the Grassroots Community Survey identified Homemaker Services for Elderly or Disabled People as the greatest need, the Professional/Agency Survey responses indicated that those were more likely to be Somewhat Met or Adequately Met. Almost half of the agency professionals surveyed indicated that Homemaker Services for Elderly and Disabled were being adequately provided.

The Professional/Agency Survey used four categories instead of the three used in the Grassroots Community Survey. Since respondents to this survey were more likely to be familiar with the terms and benefits for subsidized child care, the categories differentiated between the need for higher subsidy benefits for each child for whom care is subsidized and the total number of subsidies available

Survey participants discussed the general need for more in-home services and their concern that eligibility for some programs may be too restrictive for some populations.

Greatest Need in Home & Community Based Services



A possible reason for the difference in apparent priorities is that additional categories were used for the Professional/Agency Survey. When all the child care categories are combined, they rank higher in both surveys than Homemaker Services for Elderly and/or Disabled Persons. In comparing survey data, it is important to consider not only the percentage identified but also the relative number of category choices, since more choices within a survey will result in fewer choices for each of its categories.

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Focus Group comments on Child Care:

- Many participants expressed concern about the cost of child care or the quality of care. Some suggested the need for more publicity about existing programs and services since many are not aware of what is available.
- Income eligibility limits should be increased for people who are working. Otherwise when people get jobs and make some money, co-pays for services are increased.
- “Services do help, but it’s like a Catch-22 - they don’t help overcome poverty.”
- “Once you make a certain amount, they up the cost of day care....basically, if they see you with a dollar trying to make things work, they take 95 cents of it.”
- For families which could not afford day care, some parents reluctantly had older siblings care for younger ones. Some parents sent children to community centers but expressed concern about bullying which takes place there.
- There is a need for help with the cost of child care (e.g., subsidies; fee waivers for DHS-certified child care).
- More quality, affordable child care programs with educational components are needed.
- Child care centers could be staffed by senior citizens as a way of reducing cost.
- There is a high cost of care and some believed that non-professionals are often used as a means to offset that cost.
- The scarcity of affordable child care centers has a direct impact on development, because babysitters do not cover the early stimulation needs of a child.
- “Head Start has a program for children, but there are too many children on [the] waiting list. My child has been on the waiting list for a year and a half, and has not been accepted.”
- “It is important that we help the children of undocumented people. Like it or not, they are the new citizens.”

Focus Group comments on Adult/Senior Services:

- Several participants mentioned the need for more services for seniors and those with disabilities in the community, particularly for homemaker services and home-based health care.
- Focus group members also indicated the need for more publicity about existing programs, services and support networks.
- They indicated that in the general public, there is little known about services for seniors and for those who are disabled. “We know there are services for seniors and handicapped people, but we don't have access to that information.”
- “Everything is quantity versus quality right now.”
- For immigrants, it was noted that medical care for recently arrived seniors who have not “adjusted their status” is very expensive and hard to obtain.

*For additional information, please see the 2009 Community Needs Evaluation at:
<http://www.nashville.gov/sservices/docs/2009CNER.pdf>*