



Commission on Aging
Margot Smith, Chair
Darlene Bronson, Commission Secretary

COMMISSION ON AGING MEETING AGENDA

Wednesday, February 21, 2024
North Berkeley Senior Center
1:30 p.m. – 3:30 p.m.

Preliminary Matters

1. Call to Order by Chair Smith
2. Roll Call by Secretary
3. Public Comments
The public may comment about any item not on the agenda. Public comments are limited to two minutes per speaker. Public comments regarding agenda items will be heard while the Commission is discussing the item.
4. Approval of minutes from January 17, 2024 (Attachment B)

The Commission may discuss any subject listed on the Agenda. Public comments regarding agenda items will be heard while the Commission is discussing the item. Public comments are limited to two minutes per speaker.

Introduction of new commissioner member Karin Evans – Darlene Bronson,
Commission Secretary

Presentation

1. Report on growth trends in Berkeley's aging population and trends in spending on aging services and approval of proposed recommendation to Council — Collins, Orrick, Chisholm (Attachment G)

Discussion / Action Items

1. Commission meeting schedule- continue meeting 3rd Wednesday of every month, with exception of August & December
2. Chair and Vice Chair elections
3. Discussion of formalizing process for soliciting and submitting items on meeting agenda

Commissioner reports

1. Follow-up on One Medical senior parking issues – George Porter, Vice Chairman
2. Discussion of opportunity for housing downsizing for seniors – George Porter, Vice Chairman

Items for Ongoing Discussion

1. Financial and digital literacy
2. Around town shuttle buses
3. City website
4. Support for Senior Centers/ Age-Friendly Berkeley

Information Items

1. Revised November Commission meeting minutes (Attachment A)
2. Data on Aging trends in Berkeley & budget summary (Attachment C)
3. Council meeting timeline for 2024 (Attachment D)
4. Community member letter of concern, Clifford Fred- Ohlone Greenway Project (Attachment E)
5. Community member letter of concern, Constance Anderson- Ohlone Greenway Project (Attachment F)

Adjournment

COMMUNICATION ACCESS INFORMATION

This meeting is being held in a wheelchair accessible location. To request a disability-related accommodation(s) to participate in the meeting, including auxiliary aids or services, please contact the **Disability Services Specialist at 981-6418 (V) or 981-6347 (TDD)** at least three business days before the meeting date. Please refrain from wearing scented products to this meeting.

Communications to Berkeley boards, commissions or committees are public record and will become part of the City's electronic records, which are accessible through the City's website. Please note: e-mail addresses, names, addresses, and other contact information are not required, but if included in any communication to a City board, commission or committee, will become part of the public record. If you do not want your e-mail address or any other contact information to be made public, you may deliver communications via U.S. Postal Service or in person to the secretary of the relevant board, commission or committee. If you do not want your contact information included in the public record, please do not include that information in your communication. Please contact the commission secretary for further information.

Any writings or documents provided to a majority of the Commission regarding any item on this agenda will be made available for public inspection at the North Berkeley Senior Center located at 1901 Hearst Avenue, during regular business hours. The Commission Agenda and Minutes may be viewed on the City of Berkeley website: <http://www.cityofberkeley.info/commissions>.

Secretary:

Darlene Bronson
Health, Housing & Community Services Department
(510) 981-5194
E-mail: dbronson@berkeleyca.gov

Mailing Address:

Commission on Aging/HHCS
Darlene Bronson
1901 Hearst Ave.
Berkeley, CA 94709



Health, Housing & Community
Services Department
Commission on Aging

COMMISSION ON AGING MEETING MINUTES

Wednesday, November 15, 2023
1:30 p.m.

1. Roll Call

Present: (7) Cochran, Collins; Lavault; Orrick; Porter; Smith; Yamaguchi

Absent:

Excused Absence: Chisholm

Staff Present: (2) Tanya Bustamante, Darlene Bronson

Public: (3)

2. Public Comment (2)

Presentations

1. Use and multifunctionality of senior centers as a City resource – Aging Services staff.

Action Items

1. Approval of the Minutes from October, 2023 Regular Meeting:

M/S: Porter / Cochran

Ayes: Lavault, Collins, Smith, Yamaguchi, Orrick

Noes: None

Abstain: None

Absent: Chisholm

Motion passed.

2. Postpone a response to City Council referral regarding Berkeley Municipal code updates on bike / pedestrian usage, until next meeting in January 2024 giving the fact the items has been changed.

M/S: Orrick / Collins

Ayes: Lavault, Smith, Yamaguchi, Cochran

Noes: Porter

Abstain: None

Absent: Chisholm

Motion passed.

3. Decision to email Commission on Aging agenda packets to all Commissioners unless requested otherwise.

M/S: Orrick / Smith

Ayes: Lavault, Yamaguchi, Porter, Cochran, Collins

Noes: None

Abstain: None

Absent: Chisholm

Motion passed.

Discussion Items

- 1. Commissioner discussion for Aging Services staffing report on aging trends among Berkeley citizens and spending trends.**
Discussion; Creation of Sub-Committee
- 2. Need for increased outreach to community regarding Sr. Center services and activities.**
Discussion; No action taken

Commissioners adjourned at 3:26 p.m.

Minutes Approved on:

Darlene Bronson, Commission Secretary



Health, Housing & Community
Services Department
Commission on Aging

COMMISSION ON AGING MEETING DRAFT MINUTES

Wednesday, January 17, 2024
1:30 p.m.

1. Roll Call

Present: (8) Chisholm, Cochran, Collins; Lavault; Orrick; Porter; Smith;
Yamaguchi

Absent: 0

Excused Absence: 0

Staff Present: (2) Tanya Bustamante, Darlene Bronson

Public: (7)

2. Public Comment (5)

Presentations

1. Tenant policies – Leah Simon-Weisberg & Nathan Dahl, Berkeley Rent Board
2. Senior services update – Darlene Bronson & Tanya Bustamante, Aging Services Division

Action Items

1. Approval of the Minutes from November, 2023 Regular Meeting with edits:

M/S: Orrick / Collins

Ayes: Chisholm, Lavault, Cochran, Smith, Yamaguchi, Porter

Noes: None

Abstain: None

Motion passed.

2. Finalize data and comments, regarding general budget data for Aging Services. Report will be submitted at the next meeting.

M/S: Collins/ Orrick

Ayes: Chisholm, Lavault, Smith, Yamaguchi, Cochran, Porter

Noes: None

Abstain: None

Motion passed.

Discussion Items

1. Commissioner discussion on aging population trends in Berkeley and

Aging Services budgets and staffing.

Discussion; Action taken to draft report for City Council.

2. People's Park update

Discussion; No action taken.

3. Ohlone Greenway Safety & Modernization Project

Discussion; No action taken.

4. Mixed population in housing for the aging

Discussion; No action taken.

Commissioners adjourned at 3:35 p.m.

Minutes Approved on:

Darlene Bronson, Commission Secretary

Senior Services Coalition of Alameda County AGING IS SOMETHING WE ALL HAVE IN COMMON

Status and Trends - Alameda County's Older Adult Population

We are Aging

- Over 288,000 people age 60+ live in Alameda County.i
- 12% of our County's residents were age 65+ in 2016, about 199,000 people.ii
- By 2025, that number is expected to increase by 50%.iii
- By 2030, Alameda County will be home to 368,000 people age 65+.iv

Economic Insecurity is High

- Census data tells us that 18.3% of people age 65+ live below 150% of the Poverty Level.v
- 150% FPL is \$1,561/month, less than FMR for a studio apartment in Alameda County.vi
- 3 out of every 4 single older adults live below 200% of Poverty Level, and well below the Elder Economic Security Index – a measure of what it takes to meet basic needs. vii
- One in five calls to the Alameda County Community Food Bank are from older adults.viii
- Economic insecurity is highest among African Americans, the result of systematic racial injustice. 80% of homeless older adults in the HOPE Home study were African American.ix

The Housing Crisis is a Senior Crisis too

- About 75% of seniors who live below the Elder Economic Security Standard are renters.x
- Over 60% of seniors who rent their homes have a housing cost burden well over 30% of their total household income.xi
- Over 42,000 aged 65+ live alone, a majority of them women.xii Living alone puts elders at greater risk of isolation and associated serious cognitive and health consequences.xiii
- 10% of people counted in Alameda County's 2017 Point-In-Time survey were age 60+;xiv 30% of homeless older adults experienced their first homelessness in the last year.xv

Health and Disability are Major Factors that Challenge One's Ability to Live at Home

- Over 68,000 people 65+ have a disability (hearing, vision, cognitive, mobility, selfcare).xvi
- Over 28% of Alameda County seniors age 65+ have fair to poor health status.xvii
- Over 66% have high blood pressure; over 18% have heart disease; over 14% experience frequent mental distress.xviii

Coverage for Health Care and Long Term Services and Supports

- 98% seniors age 65+ have Medicare coverage, which covers only 50% of medical care costs, does not cover long term care services, and covers only 90 days in skilled nursing.xix
- Over 42,000 of those with Medicare also have Medi-Cal coverage.xx
- Over 12,400 seniors receive Medi-Cal funded In-Home Supportive Services.xxi

Increasing Diversityxxii

- Alameda County's older adults are increasingly diverse: 48% white, 27% Asian, 12% African American, 11% Latino, 2% multi-race, .4% Pacific Islander, .2% American Indian.
- 38% of seniors in Alameda County are foreign born, and about 10% are not US citizens.
- 40% of older adults speak a language other than English at home.

www.seniorservicescoalition.org

The Senior Services Coalition of Alameda County is a coalition of 40 nonprofit and public organizations that provide health care and supportive services to over 79,000 Alameda County seniors. We are committed to establishing an easily accessible, coordinated system of social, medical and supportive care for seniors in Alameda County.

footnotes

i CA Department of Finance

ii U.S. Census, 2016 American Community Survey 5-year estimates

iii CA Department of Finance, Report P-1

iv Ibid.

v U.S. Census, 2016 American Community Survey 5-year estimates

vi FMR for fiscal year ending September 2018, California Department of Social Services and US Department of

Housing and Urban Development

vii Elder Economic Security Standard Index for Alameda County, based on 2010 Census data. Insight Center and

UCLA Center on Health Policy. In 2011, the EESSI for a single elder renter in Alameda County was \$2,170.

viii Alameda County Plan for Older Adults, May 2016; data from ACCFB calendar 2015.

ix Kushel, Margot et al; Pathways to Homelessness Among Older Adults; PLoS One, 2016 May 10.

x Elder Economic Security Standard Index for Alameda County, Insight Center and UCLA Center on Health Policy.

xi American Community Survey, 2014

xii 2010 Census.

xiii Social Isolation, Loneliness and All-Cause Mortality in Older Men and Women, by Andrew Steptoe, et.al.

Proceedings of the National Academy of Sciences, vol. 110, no.15.

xiv Alameda County 2017 Point in Time Count & Survey; Everyone Home.

xv Kushel, Margot et al; Residential patterns in older homeless adults: Results of a cluster analysis; Social Science &

Medicine, March 2016

xvi 2010 Census

xvii CHIS, California Health Interview Survey 2014, UCLA Center for Health Policy Research. Data is for non-

institutionalized seniors. xviii ibid

xix CMS 2014 Medicare enrollment data.

xx California Department of Health Care Services Certified Eligibles Count February 2018.

xxi Alameda County Social Services Agency, July 2016.

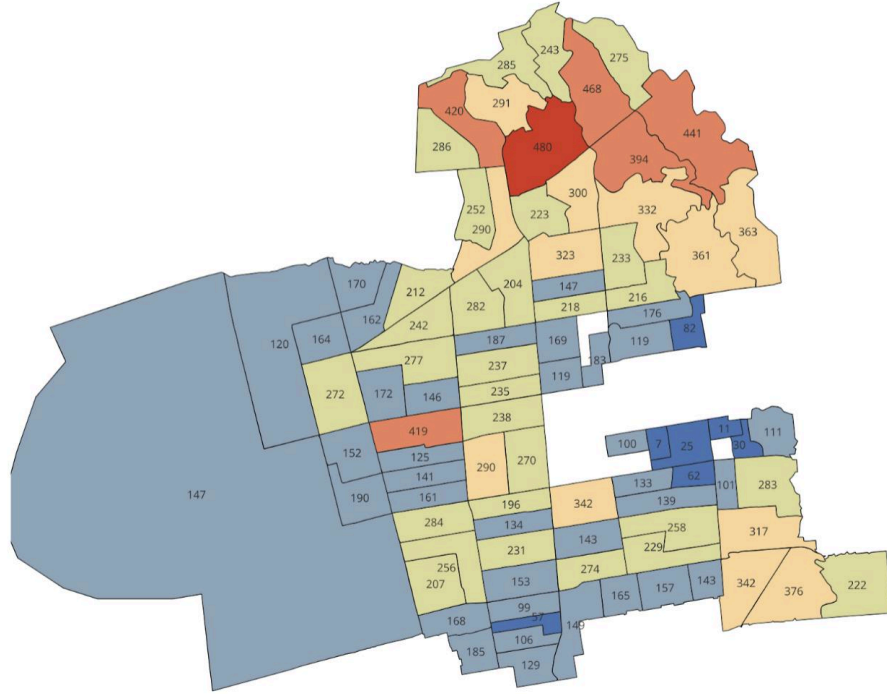
xxii All data in this section is from Alameda County CAPE Unit (Community Assessment, Planning and Evaluation) 2015 report on Alameda County Older Adults.
www.seniorservicescoalition.org

From David Shere's first analysis

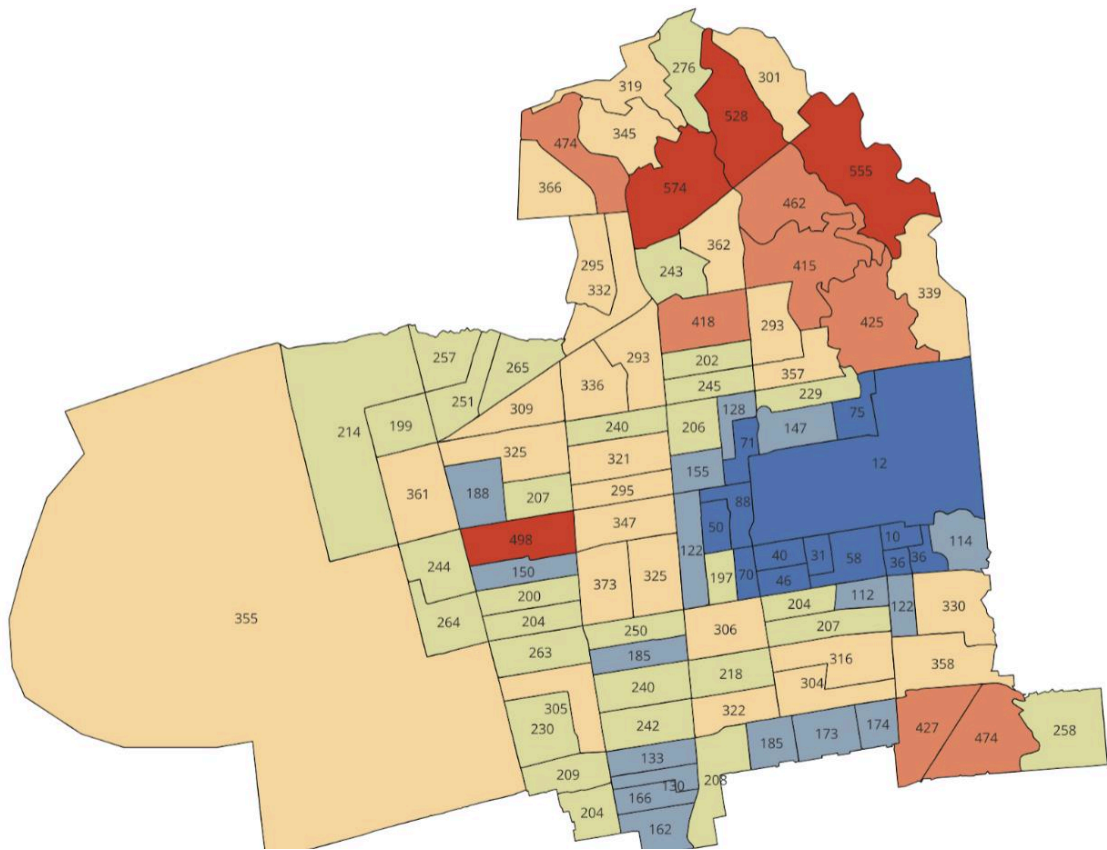
✓ Change In Senior Population



2010 Age 60+ Population By Block Group



2020 Age 60+ Population By Block Group

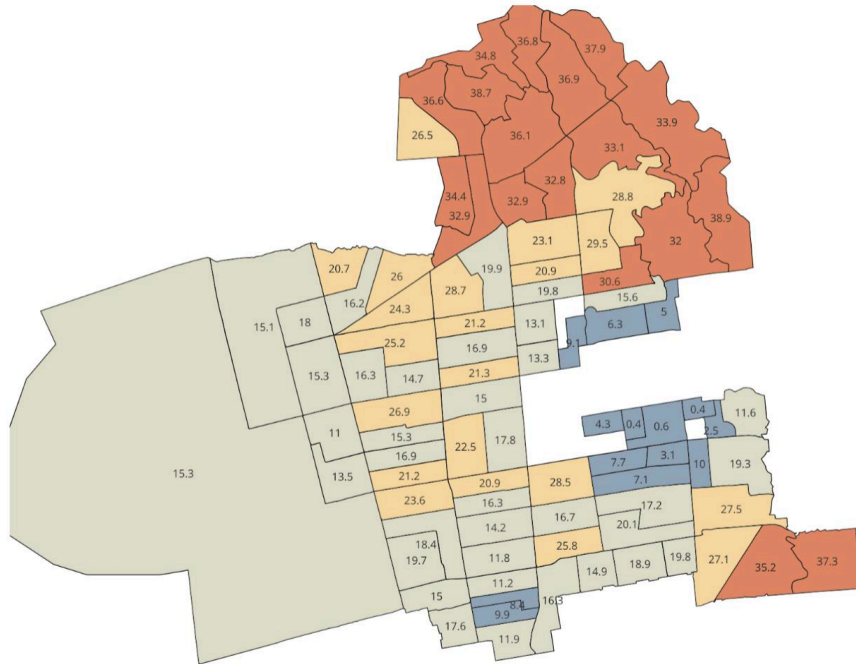




✓ Change In Senior Population



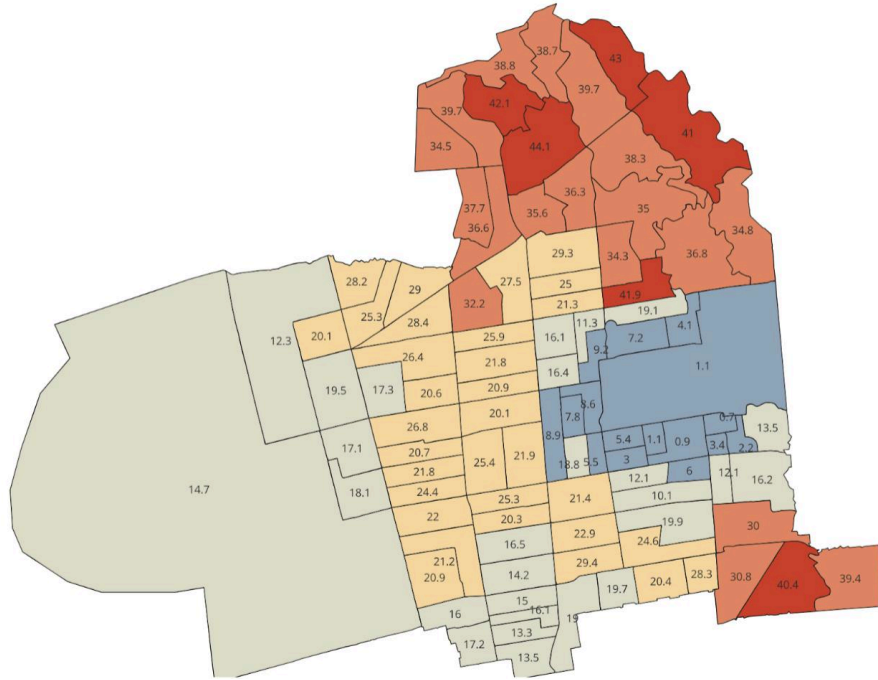
2010 60+ Population As A Percent Of Population



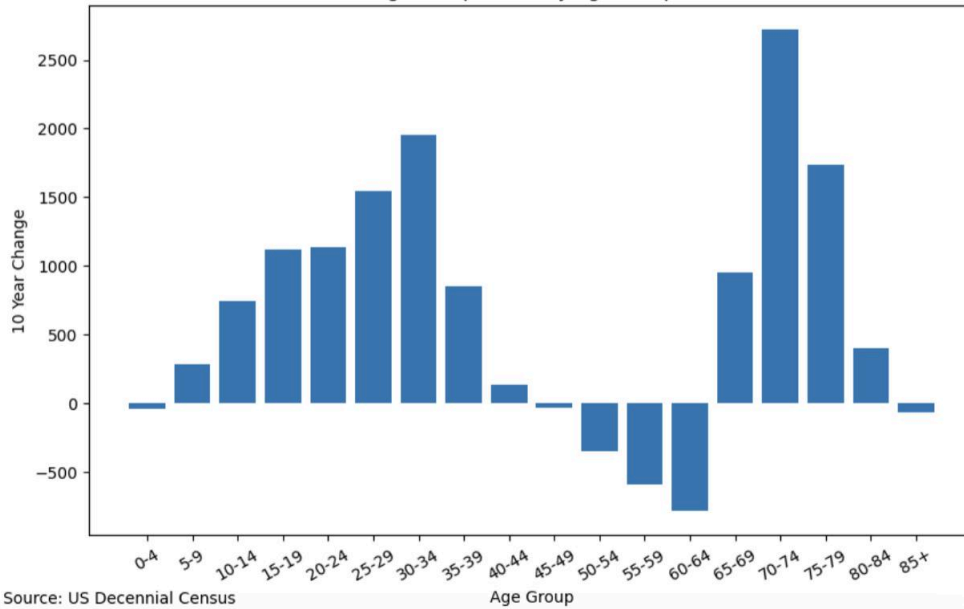
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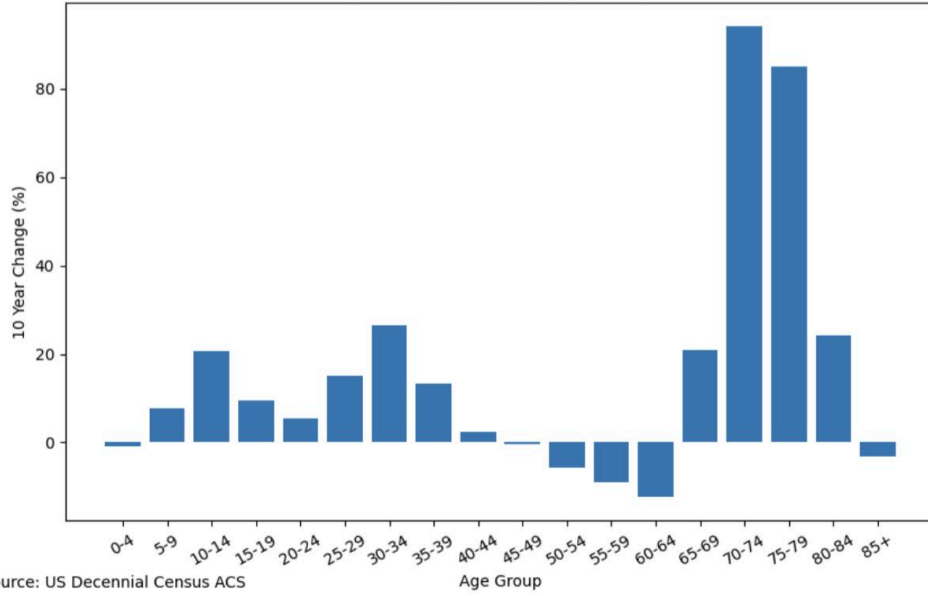
2020 60+ Population As A Percent Of Population



10 Year Change in Population by Age Group (2010-2020)



10 Year Change % in Population by Age Group (2010-2020)



Source: US Decennial Census ACS

A	B	C	D	E
Age Range	Count 2010	Count 2020	Population Change	Percent Change
0-4	4136	4097	-39	-0.9
5-9	3793	4082	289	7.6
10-14	3610	4352	742	20.6
15-19	11802	12921	1119	9.5
20-24	20826	21960	1134	5.4
25-29	10302	11848	1546	15.0
30-34	7395	9351	1956	26.5
35-39	6421	7271	850	13.2
40-44	6113	6252	139	2.3
45-49	6117	6085	-32	-0.5
50-54	6136	5790	-346	-5.6
55-59	6413	5827	-586	-9.1
60-64	6340	5559	-781	-12.3
65-69	4586	5539	953	20.8
70-74	2891	5612	2721	94.1
75-79	2044	3780	1736	84.9
80-84	1683	2088	405	24.1
85+	1972	1907	-65	-3.3

Second report from David Shere re: SES

A few things I took from the results:

- You've got about 8% of residents > 65 years either without a computer at home or internet access, ~1500 people
- You've got about 2000 people > 60 below the poverty line in the last 12 months
- About 4000 people 65 years and older below 200% of the poverty line, ~20% of Berkeley's seniors
- You've got about 700 kids living with "a grandparent householder" which I take to mean being raised by their grandparent
- You've got about 5500 people over 65 who live alone

- About 4500 people > 65 work. Only 1900ish drive alone. 400 take transit, 200 carpool, 350 walk, 1500 work from home. Only 150 take a taxicab, motorcycle, bicycle, or other means.
- Median household income in \$93,000, not too shabby
- About 2000 are on medicaid or other means tested public health insurance.
- About 3000 > 65 with an ambulatory difficulty
- About 1200 with a cognitive difficulty

Margins of error on all these estimates are around 10-20%

Data from Alameda County senior Services Coalition

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Census data from Aging Services:

Demographic Info (source:

<https://censusreporter.org/profiles/16000US0606000-berkeley-ca/>)

- 20% of population age 60 and over
 - 7% of seniors live below the poverty line
 - 30% of seniors live alone, age 65 & over
-

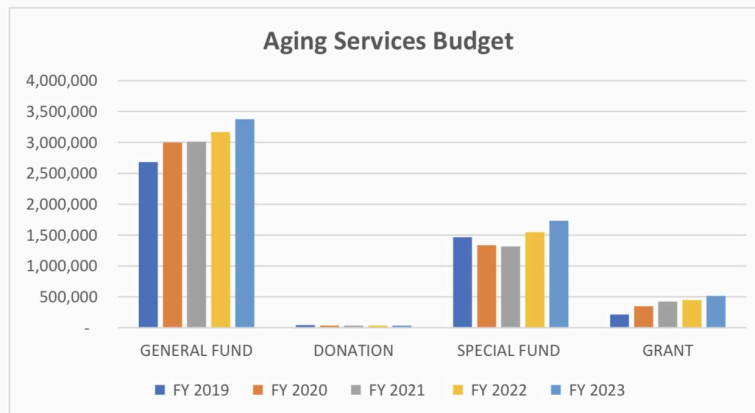
Funding as of FY 2024

✕ Division budget breakdown_FY19_FY24.pdf

	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024
General Fund	\$ 2,681,242	\$ 2,998,763	\$ 3,009,764	\$ 3,167,301	\$ 3,376,281	\$ 4,292,077
Donation	\$ 42,519	\$ 33,308	\$ 33,457	\$ 33,775	\$ 34,280	\$ 165,839
Special Fund	\$ 1,464,508	\$ 1,337,113	\$ 1,315,221	\$ 1,544,245	\$ 1,730,146	\$ 2,370,974
Grant	\$ 215,756	\$ 347,857	\$ 425,402	\$ 445,846	\$ 514,768	\$ 517,267
TOTAL	\$ 4,404,025	\$ 4,717,041	\$ 4,783,844	\$ 5,191,167	\$ 5,655,475	\$ 7,346,157

Aging Services Fiscal Year 2019-2023 Approved Budget

FUNDING TYPE	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023
GENERAL FUND	2,681,242	2,998,763	3,009,764	3,167,301	3,376,281
DONATION	42,519	33,308	33,457	33,775	34,280
SPECIAL FUND	1,464,508	1,337,113	1,315,221	1,544,245	1,730,146
GRANT	215,756	347,857	425,402	445,846	514,768
TOTAL	4,404,025	4,717,041	4,783,844	5,191,167	5,655,475



Special fund includes Measure B, Measure BB, Target Case Management (TCM) and Mental Health Service Act (MHSA).

Alameda Area on Aging funds

Here is the breakdown of the **funding we receive from Alameda Area on Aging**. And yes, state money filters down to the counties. We are a subcontractor for Alameda County.

Amounts below indicate FY2024 amounts; the percentages indicate the general breakdown overall, every year:

- Congregate Nutrition (dine-in lunch service): \$73,381 (15%)
- Home-Delivered Meals: \$140,192 (25%)
- Family Caregiver Support: \$99,528 (20%)
- Information & Assistance: \$156,803 (30%)
- Senior Center Activities: \$47,363 (10%)

Budget timeline

I have attached a document that breaks down our funding sources from Fiscal Year 2019 to now. Special Fund indicates County Measure BB that supports paratransit services, and Targeted Case Management from the CA Dept of Health Care Services. Grant funding is from Alameda Area on Aging. **Please do not distribute this document outside the Commission.**

Here is also a rough timeline of the upcoming Biennial Budget for Fiscal Year 2025 and 2026:

- Feb/March – CMO meetings with Dept Directors
- Late April - Budget docs posted on City website
- Early May – biennial budget presentation for City Council
- Mid may – public hearing #1
- Late May – public hearing #2

Aging Services Division Budget - PLEASE DO NOT DISTRIBUTE

	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024
General Fund	\$ 2,681,242	\$ 2,998,763	\$ 3,009,764	\$ 3,167,301	\$ 3,376,281	\$ 4,292,077
Donation	\$ 42,519	\$ 33,308	\$ 33,457	\$ 33,775	\$ 34,280	\$ 165,839
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Grant	\$ 215,756	\$ 347,857	\$ 425,402	\$ 445,846	\$ 514,768	\$ 517,267
TOTAL	\$ 4,404,025	\$ 4,717,041	\$ 4,783,844	\$ 5,191,167	\$ 5,655,475	\$ 7,346,157

Special Fund includes County Tax Measure BB, which supports countywide transportation systems, as well as Targeted Case Management funding from the Department of Health Care Services.

Grant funding includes allocation from the Alameda Area on Aging.

CITY CLERK DEPARTMENT 2024 COUNCIL MEETING TIMELINE

Attachment D

COUNCIL MEETING	THURSDAY 12:00 PM - Day 33 - DEPT. REPORTS DUE TO CLERK	MONDAY 5:00 PM - Day 22 - COUNCIL MEMBER REPORTS DUE TO CLERK	THURSDAY 12:00 PM - Day 19 - AGENDA COMMITTEE PACKET TO PRINT	MONDAY 2:30 PM - Day 15 - AGENDA COMMITTEE MEETING	WEDNESDAY 11:00 AM - Day 13 - FINAL AGENDA MEETING (PRINT AGENDA ON WED.)	THURSDAY By 5:00 PM - Day 12 - COUNCIL AGENDA DELIVERY
Winter Recess [December 13, 2023 through January 15, 2024]						
Jan 16	12/14	12/26 (Tue)	1/2 (Tue)	1/4 (Thur)	1/4 (Thur)	1/5 (Fri)
Jan 30	12/28	1/8	1/11	1/16 (Tue)	1/17	1/18
Feb 13	1/11	1/22	1/25	1/29	1/31	2/1
Feb 27	1/25	2/5	2/8	2/13 (Tue)	2/14	2/15
Mar 12	2/8	2/20 (Tue)	2/22	2/26	2/28	2/29
Mar 19	2/15	2/26	2/29	3/4	3/6	3/7
Spring Recess [March 20 through April 15, 2024]						
Apr 16	3/14	3/25	3/28	4/1	4/3	4/4
May 7	4/4	4/15	4/18	4/25 (Thur)	4/25 (Thur)	4/26 (Fri)
May 14	4/11	4/22	4/25	5/1 (Wed)	5/1	5/2
May 21	4/18	4/29	5/2	5/7 (Tue)	5/8	5/9
Jun 4	5/2	5/13	5/16	5/21 (Tue)	5/22	5/23
Jun 25	5/23	6/3	6/6	6/10	6/12	6/13
Jul 9	6/6	6/17	6/20	6/24	6/26	6/27
Jul 23	6/20	7/1	7/3 (Wed)	7/8	7/10	7/11
Jul 30	6/27	7/8	7/11	7/15	7/17	7/18
Summer Recess [July 31 through September 9, 2024]						
Sep 10	8/8	8/19	8/22	8/26	8/28	8/29
Sep 24	8/22	9/3 (Tue)	9/5	9/9	9/11	9/12
Oct 1	8/29	9/9	9/12	9/16	9/18	9/19
Oct 15	9/12	9/23	9/26	9/30	10/2	10/3
Oct 29	9/26	10/7	10/10	10/15 (Tue)	10/16	10/17
Nov 12	10/10	10/21	10/24	10/28	10/30	10/31
Nov 19	10/17	10/28	10/31	11/4	11/6	11/7
Dec 3	10/31	11/12 (Tue)	11/14	11/18	11/20	11/21
Dec 10	11/7	11/18	11/21	11/25	11/27	11/27 (Wed)
Winter Recess [December 11, 2024 through January 14, 2025]						

VTO Affected Dates	Holiday Affected Dates	Religious Holiday Affected Date
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Reports not submitted by the deadlines listed will not be included on the agenda.

Worksession	Thursday 12:00 PM	Thursday 5:00 PM
	Day 26	Day 5
	Dept. Reports Due to Clerk	Council Agenda Delivery
Jan 23	12/28	1/18
Feb 6	1/11	2/1
Sep 17	8/22	9/12
Oct 8	9/12	10/3

2-11-2024
Clifford Fred
Berkeley Calif.

Attachment E

To the City of Berkeley Commission on Aging,

PLEASE NOTE MY OPPOSITION TO THE CITY'S FLAWED OHLONE GREENWAY SAFETY & MODERNIZATION PROJECT

The City is pursuing fast moving bicycle, e-bicycle, & electric scooter lanes along the Ohlone Right of Way from Virginia Street to the Albany line.

The Plan would remove mature trees & shrink Cedar Rose Park; but would not provide any separate pedestrian pathways, including at the Gilman, Hopkins, Rose & Cedar intersections.

Bicyclists & e-scooter riders do not & will not safely share the Ohlone Pathway with pedestrians. Bicycle-pedestrian collisions & near collisions occur daily.

Pedestrians, including people with disabilities & parents pushing strollers need their own safe pathway, as exists along the nearby West Street Path, and under the BART tracks in Albany.

An ADA compliant pathway should be of an easy to walk or roll on compacted material, not rocks or gravel.

RECKLESS BICYCLE, E-BICYCLE, & E-SCOOTER RIDERS POSE GREAT THREAT TO THE SAFETY OF SENIOR CITIZENS:

The growing problem of fast-moving reckless bicycle, e-bicycle and e-scooter users is posing a great threat to the safety of senior citizens.

As a 73-year-old and long-time resident of Berkeley, I find that the growing recklessness of bicycle, e-bicycle, & e-scooter riders makes it more and more dangerous for me to simply take a walk or try to cross the street. This situation should not be tolerated.

THIS ILL-CONCEIVED PLAN MAKES THINGS WORSE!

Bicycle and e-scooter riders in Berkeley go too fast already. Wider pathways will encourage bicyclists & e-scooter riders to go even faster, putting pedestrians – including people with disabilities – at even greater risk of being banged into, knocked over, & seriously or fatally injured.

The willful lack of an ADA compliant pedestrian path invites bicycle-pedestrian accidents & exposes the City to lawsuits.

The developmentally disabled students who participate in the after-school programs at the Ala-Costa Center in Cedar Rose Park will be especially vulnerable to being hit by bicycles & e-scooters. At the January 2024 Transportation and Infrastructure Commission meeting, the City staff person assigned to the project – when asked – responded unapologetically that the people who run the program at the Ala-Costa Center were never consulted about the project.

The consultants did not even consider including a separate pedestrian pathway. Why not?

A city council aide said that people can just walk across the grass at Cedar Rose Park. This is ridiculous. The grassy field is very uneven and can be covered with dog waste. The field is often filled with aggressive unleashed dogs. And the field is fenced off for several months every year during the rainy season, and it is fenced off right now.

The Plan violates the Americans With Disabilities Act – ADA. The city's consultant acknowledged that no consideration was given to the ADA in the development of this plan.

WHY ARE RECKLESS BICYCLISTS AND E-SCOOTER RIDERS TOLERATED?

Bicyclists, e-bicyclists, & e-scooter riders are getting more and more reckless. They routinely run stop signs and stop lights, pass pedestrians on the right, and overtly knock into pedestrians. It's time to strictly enforce all traffic laws against bicyclists and e-scooter riders.

Electric scooters should NOT be on sidewalks nor in bicycle lanes. Electric scooter riders should be licensed and at least 18. It makes no sense to exempt them from the rules of the road.

Last month, my partner had to quickly pull a young girl to safety who was about to be hit by a speeding e-bicyclist on the Ohlone Path.

Several weeks ago, the Public Works Department did install a stop sign for bicyclists on the Ohlone Pathway where it approached the Peralta Ave. sidewalk, so as to make walking on the sidewalk safer. I and my neighbors are very appreciative of the City for installing this stop sign. However, nine out of ten bicyclists, e-bicyclists and e-scooter riders ignore this stop sign. Clearly, separate pathways for bicyclists and for pedestrians are needed.

For the above reasons, Paris France recently banned all electric scooter rentals.

Please see Donna DeDiemar's thoughtful comments in your January meeting packet concerning how essential for one's health it is to be able to take a walk without worry about being hit from behind by a two wheeled vehicle.

Senior citizens need to be able to take walks, so as to be able to keep walking. But we need separate pathways for pedestrians and sidewalks without two wheeled vehicles to be able to walk safely.

LITTLE THOUGHT WAS PUT IN TO MAKING THE OHLONE GREENWAY STREET INTERSECTIONS SAFER

Separate, ADA compliant, pedestrian crosswalks are needed at Gilman/Curtis, Gilman/Hopkins, the Rose & Cedar street intersections with Cedar Rose Park and Virginia Street intersection.

These intersections are already very dangerous.

A transportation expert has stated that the Diablo Engineering Consultant's proposal for the Hopkins – Peralta intersection would be especially dangerous to pedestrians. Much greater thought needs to be given to this intersection since Hopkins Street is a critical City Evacuation Route.

There should be clear & separate pathways for pedestrians, including wheel chair users, versus bicyclists, e-scooter, and e-bicycle users at each of these intersections.

PLEASE DO NOT REMOVE ANY PARKING ON PERALTA AVENUE

The Plan would remove 12 or more parking spaces on Peralta Avenue & more on Hopkins & Rose streets. The pickle ball players at the Hopkins-Peralta courts will quickly fill the remaining nearby parking spaces. People won't be able to park in front of their homes again. High speed bicycle lanes with concrete barriers will keep people from safely backing out of their driveways. People without driveways will be forced to park far away from their homes & will risk assault walking or rolling home after dark.

Removing street parking on Peralta Ave and on other nearby streets will result in more auto break-ins, more catalytic converter thefts, & more out right car thefts. Catalytic converters can cost thousands of dollars & many months of waiting to replace. Thieves are savvy. They will quickly recognize the loss of street parking on Peralta as an opportunity to break into cars on adjacent streets that belong to Peralta Avenue residents.

People on Peralta and nearby streets have healthcare workers who assist them at home. Home healthcare workers depend on easily accessible parking. With no place to park, many home health care workers will quit. People will lose their critical home healthcare. Their lives will be put in danger.

There would be no place for the delivery people who bring our food and packages to park.

People with driveways would be forced to back out into high speed bicycle lanes.

People without driveways would be trapped in their homes. Is this what the City of Berkeley wants?

Our neighborhood is getting more dangerous. Don't make it even more dangerous by taking away our street parking.

There's no reason to remove our vitally needed parking spaces.
Safe bicycle lanes can & should be designed w/out taking away street parking.

The Diablo Engineering consultants and City staff should be told to design a safe alternative that does not remove any street parking.

One way to make Peralta Ave safer for all modes of travel would be to ban trucks from Peralta Ave now. 50 or more large trucks barrel down the 1300 block of Peralta every day, posing a danger to pedestrians, bicyclists, & people backing out of their driveways.

OHLONE PLAN WOULD MAKE IT EASIER FOR CITY TO IMPLEMENT THE CONTROVERSIAL HOPKINS CORRIDOR PLAN

The controversial Hopkins Corridor Plan would have eliminated well over 200 parking spaces on Hopkins Street, greatly harming the small businesses around Hopkins & Monterey, and causing great harm to the hundreds of residents on & adjacent to Hopkins Street from Sutter to San Pablo Ave.

Although the Hopkins Corridor Plan has been delayed indefinitely – due to strong community opposition and to the opposition of the Fire Chief - as it would be incompatible with Hopkins' status as a critical evacuation route, the City Council has refused to kill the Plan. Instead it hired more consultants to figure out a way to approve the Hopkins Corridor Plan.

Approval of this Ohlone Plan would codify into city policy that high speed bicyclists, e-bicycles and e-scooter riders trump the safety of pedestrians and of neighborhood residents.

And it would codify that it's ok to remove critically needed neighborhood street parking to the sole benefit of high-speed bicyclists and high-speed e-bicycles and e-scooters.

Thus, the approval and implementation of the Ohlone Plan would make it much easier for the Council to then approve the Hopkins Corridor Plan.

ALL WORK ON THE OHLONE PLAN SHOULD STOP UNTIL THE FIRE DEPT'S EVACUATION & RESPONSE TIME STUDY IS AVAILABLE AND HAS BEEN REVIEWED

The Berkeley Fire Department has contracted with a consultant to perform an Evacuation and Response Time Study, which is projected to be completed in the Fall of 2024.

The Fire Department's Standards of Coverage and Community Risk Assessment Study states that current response times are already too long, and that these problems will worsen s Berkeley's density further increases. The report states that survival decreases by 7-10% for every minute of delay getting a heart attack victim.

By not providing an ADA compliant separate pedestrian pathway for the entire length of the Ohlone Greenway, the Plan will result in more pedestrian – two wheeled vehicle collisions and thus the need for yet more 911 emergency calls to an already overburdened Fire Department.

THE WIDENING OF PATHWAY THROUGH CEDAR ROSE PARK FOR BICYCLES, E-BICYCLES & E-SCOOTERS WOULD VIOLATE MEASURE 'L'

Measure L is a parks and open space Citizens Initiative that was adopted by Berkeley voters in Nov. 1986 It states that no public park or public open space can be converted to any non-recreational use without been first submitted to a vote of the citizens at a general election.

The Bicycle, E-Bicycle and E-Scooter pathway through Cedar Rose Park is clearly for transportation – i.e. getting from one place to another. That's the whole point of the Ohlone Corridor Pathway – transportation.

It is NOT for recreation. Cedar Rose Park is NOT an off-road vehicle park.

Widening the pathway through Cedar Rose Park – especially to make more room for 2 wheeled motorized vehicles, would be taking away land in a city park that is designated as recreational open space, and instead making it a transportation route.

Thus, a vote of the people of Berkeley is needed before the existing pathway in Cedar Rose Park can be widened.

WHERE'S THE PUBLIC REVIEW?

The city is moving ahead with the Plan now, without adequate public review. We need real public review, before any plan is approved. All we got was a short meeting in with a consultant, who would not take notes. No city staff was present when the Diablo Engineering consultant made himself available in Cedar Rose Park. Staff says that as a homeowner on Peralta Ave since 1977 who would be greatly adversely effected by this Plan, I was never contacted by city staff nor the consultants during this process.

Every indication is that the Ohlone Plan was determined by City Hall insiders first. Then, consultants were hired to rationalize and flesh out what had already been decided.

This is not the way planning is supposed to work.

TO SUM UP:

The Ohlone Path Plan as currently proposed is deeply flawed. The City and consultants should start over, with a plan that provides separate ADA pedestrian pathway for the entire length of the Plan, that does NOT remove any street parking, and that makes sure that pedestrians can cross safely and away from bicycles, e-bicycles and e-scooters at each intersection within the Ohlone Greenway.

I therefor ask the City of Berkeley Commission on Aging to oppose the Ohlone Plan as currently proposed.

Thank you,
Clifford Fred
Berkeley Calif.

Dear Secretary Bronson,

Attachment F

Since the Commission on Aging will be discussing the Ohlone Project on Wed Feb 21, I am writing you to explain my grave concerns about the plan as currently proposed. The major concern outlined here is that the plan does not provide for any separate pedestrian pathway, including at busy intersections (Gilman, Hopkins, Rose, and Cedar) and will consequently increase the city's liability risk.

The concerns that I raise here have all been raised by concerned citizens back when public input was formally invited and **none of these concerns were subsequently addressed**. So, the city clearly needs to hear from more members of the public who share those concerns. I am hoping that the Commission on Aging, which represents one of the vulnerable populations put at increased risk of injury and death by the proposed expansion plan, can help to get the city to revisit and amend the plan.

My mom (a spry woman in her late 80s) uses a walker for backup security against falls when we're out for our daily walks. For many years I myself needed a medical mobility scooter to get around. As a result, I have a heightened awareness of extremely dangerous transit situations, such as the bike speedway that this expansion will create.

As should be abundantly clear to anyone who spends even a short time observing the Ohlone Pathway, or the reckless behavior of bicyclists, including electric bike and scooter riders on sidewalks, streets and pathways anywhere in Berkeley, **two-wheeled electric vehicles clearly should not share the same pathway space with regular bicyclists and pedestrians**. This is true especially given that pedestrians in Berkeley and on the Ohlone Greenway include many people with all degrees of physical disabilities, as well as parents and nannies pushing strollers. Already, bicyclists have become more aggressive and are not sharing the pathway with pedestrians. The other day, a friend of mine saw a parent pushing her baby in a stroller when a posse of bikes bore down on them, forcing them off the path into the muddy grass beside it. That is unacceptable!

Widening the path is not the solution to this problem. The only effective way to protect pedestrians would be to include a **separate, ADA-compliant path**. Widening the pathway and lumping pedestrians and those on wheels together will only create a hazardous biking speedway, encouraging more bicyclists, e-bikers, e-scooters to go even faster than they already do and ride even more aggressively.

I'd like to point out that the absence of a separate pedestrian pathway should be of concern to **everyone**, since any able-bodied pedestrian (or bicyclist, for that matter) is just one bike accident away from being disabled... especially when hit by an electric bike going up to 28 mph!

Why not simply follow the example of the West Street Path and the Ohlone Greenway in Albany, which both provide a separate pedestrian path? I don't understand why there seems to be such resistance to amending the plan in this way: We're not asking for a lot here! The consultants just need to include a separate pedestrian pathway at the west edge of Cedar/Rose Park, as well as elsewhere on the greenway.

Last Fall, an aid to Rashi Kesarwani somewhat thoughtlessly suggested to a concerned citizen that pedestrians who are afraid of being run into on the Ohlone Greenway would be able to avoid the bikes and scooters at Cedar Rose Park by crossing the park on the grass. She wasn't thinking of the fact that the field is uneven and often has dog waste on it. Most importantly, during the rainy season, the field is fenced off for several months.

I find it incredible that the city paid over \$100,000 to have a consultant draw up the current plan, but did not instruct them to take into consideration the ADA and the dangers posed by reckless e-bikes and e-scooters to pedestrians, especially the disabled (including the vision-impaired), the elderly, and people pushing babies and toddlers in strollers.

Not long ago, Paris, France, [banned all electric scooter rentals](https://www.npr.org/2023/09/01/1197167800/paris-is-the-first-european-capital-to-ban-rentable-electric-scooters)? (See <https://www.npr.org/2023/09/01/1197167800/paris-is-the-first-european-capital-to-ban-rentable-electric-scooters>) Paris took this radical measure in great part because Parisians were seeing a **significant increase in pedestrian injuries and accidents caused by the proliferation of those "recreational" electric vehicles** (an impressive **89%** of all the voters who participated in the election supported the ban!). Berkeley would do well to follow the enlightened example of the City of Lights, instead of going in the opposite direction. Unfortunately, the current plan to expand the Greenway will only invite a further proliferation of electric two-wheeled vehicles onto the Greenway, which will endanger pedestrians (as well as other bicyclists) of all ages and physical conditions. In an ideal world, electric bikes and scooters would not be considered "recreational" and would require a license and only be allowed on city streets, not on paths/trails such as the Ohlone Greenway. But that day may never come. Consequently, to protect pedestrians **now**, we need a separate ADA-pathway included in the Ohlone Greenway expansion.

We shouldn't have to wait till after someone gets hit and dies unnecessarily to get this change made to the Ohlone Expansion plan.

In addition, the city needs to find an alternative to removing parking spaces on Peralta Ave. Many seniors living on Peralta Avenue need street parking for themselves and for deliveries and healthcare providers they depend on.

The city hasn't provided adequate opportunity for public review of the Ohlone Greenway expansion plan. More public meetings and a City Council public hearing should take place before any truly final plan is approved and work begins.

Please consider helping concerned Berkeley citizens persuade the city to include a separate ADA-compliant pathway in the plan, and preserving precious parking spots for the elderly and disabled who live along Peralta Avenue.

Sincerely,
Constance Anderson

The Commission on Aging would like to share the following Recommendations on Taking Steps toward Achieving goals of the 2018 Age-Friendly Berkeley Action Plan to “enable people to remain in their homes and communities as they navigate the transitions of aging; maintain and enhance the ethnic and economic diversity of Berkeley; ensure that people of all ages and abilities can enjoy the social and cultural assets Berkeley has to offer.” [Source: “Mayor’s Letter” from Mayor Jesse Arreguin, December 2018 Age-Friendly Berkeley Action Plan. (See Attachment 1 2018 **Berkeley Age-Friendly Action Plan.**)]

From: Commission on Aging

Recommendation: That Council refer to the Council Policy Committee on Health, Equity, Life Enrichment, and Community steps to revisit and act on the recommendations of the Berkeley Age-Friendly Action Plan by building on what is already occurring in the community, expanding the Plan’s impact, and addressing gaps by increasing funding for personnel and other services currently being offered as well as others identified in the Age-Friendly Plan.

While recommendations are too numerous to list here, the Aging Commission identified as first steps four (4) priority areas and goals for the Action Plan:

1. **HOUSING AND ECONOMIC SECURITY:** Develop a continuum of affordable, accessible housing options for older adults to age in their community regardless of their health or financial status.
2. **TRANSPORTATION AND MOBILITY:** Advance a network of public and private transportation (including transit, assistive devices, e-bikes and e-scooters and bicycling and walking) that equitably serves residents and connects them to services, social activities, and employment opportunities.
3. **HEALTH AND WELLNESS:** Develop a more integrated system of services and supports that is person-centered and ensures that all residents have the opportunity to engage in health promoting activities.
4. **SOCIAL PARTICIPATION AND CIVIC ENGAGEMENT:** Enhance neighborhood cohesion and social connectedness of all Berkeley residents with community events and activities that are inclusive, affordable, and accessible.

In the short term, the Commission recommends that these plans should include a budget referral to the Council Budget and Finance Committee for consideration in the June budget process.

These plans should at a *minimum* take into account and address the following:

1. It is important that we continue to track Berkeley’s aging population (the original plan was based on earlier data that should be re-evaluated based on the the 2020 United

States Census, and later American Community Surveys). Berkeley must consider how to increase funding for aging services while our population continues to age (See Attachment 9 **Highlights of Census Data on Aging in Berkeley**). Also compare the rate of expenditure on services for this population in the Department of Health, Housing and Community Services to the overall size of the City's budget during the same period and to its growth or lack of growth in relation to the growth in the aging population (See Attachment 2 **City Departmental Budgets**; Attachment 3 **HHCS Departmental Summary**; Attachment 4 **HHCS Division Summary** and Attachment 9 **Highlights of Census Data on Aging in Berkeley**).

2. An examination and evaluation of staffing challenges and key needs in the Division of Aging Services as shown in the agency budget line items and staffing levels, as well as Berkeley's unique way of structuring aging services under the mantle of the Health, Housing and Community Services (one of only three cities in the state to do so), rather than the way most cities do, which is to put it under Parks and Recreation (See Attachment 5 **Berkeley's Unique Structure for Aging Services**).

There is an immediate need to bring the division up to its allocated staffing numbers of 21 full-time, and 7 part-time career positions and approximately 15 hourly positions. These hourly workers assist with many of the face-to-face services offered at the two senior centers, including lunch service, front desk operations, Meals on Wheels deliveries, and facility rentals on nights and weekends. They supplement the work of 5 permanent staff, only 1 of whom is full-time; the Meals on Wheels program currently has no full-time program manager or case manager; they are currently 80% and 75% respectively. The program also needs another full time senior center staff person; currently it is budgeted for a 50% position, but that is vacant; in order to fulfill the responsibilities of the position and to attract qualified candidates, this position, ideally, would be 100% and permanent.

3. The dire need for increased outreach. Berkeley residents over 60 currently number approximately 20,000– or 1 in 5 residents. This number doubled in the decade from 2010 to 2020 and is projected to increase at a similar rate well into the future. Given this explosive growth, it is important that all Berkeley households and residences are made aware of the breadth of services available to individuals, their families, and their caregivers. At this time only a very small fraction of those over 60 years of age are receiving materials from the Berkeley Senior Centers and the Division of Aging Services, due to staff and budgetary shortages that have made it difficult to upgrade outreach: for instance, the main communication is via a print newsletter that is mailed to several hundred people, with no way of tracking whether it has been received. We recommend that the City invest in outreach to this growing demographic group.

This could include:

- a city-wide mailing, similar to the citywide mailings by the City Parks and Recreation Department about activities,

- updating and keeping relevant websites current,
- investing in collecting email addresses and disseminating information by email,
- reaching out to civic institutions and groups to seek their help with outreach to the aging community and their families.

CURRENT SITUATION AND ITS EFFECTS: In December 2018, the Mayor presented the Age-Friendly Berkeley Action Plan. This three-year plan was the result of two years of extensive outreach and engagement. It sought to ensure that older adults remain at the heart of our community and recognized them as a vital part of the fabric of our neighborhoods and civic life.

Among the motivations for the plan was the recognition of our city's rapidly changing demographics: at the time it was written—2017—it projected that by 2030 over 1 in 5 people in Berkeley would be over 65 years of age. (For the purposes of the City of Berkeley's Aging Services programs, the generally accepted age cut-off for determining that someone is a senior is 60 and above. That is the figure used in the rest of this report.) The number of older Berkeley residents was expected to double from 2018, when the plan was finalized. Those numbers have since been validated and expanded on by the 2020 Census and subsequent American Community Surveys. Berkeley residents over 60 currently number approximately 20,000—or 1 in 5 residents. This number doubled in the decade from 2010 to 2020 and is projected to increase at a similar rate well into the future. On behalf of the Commission on Aging, we would call on the Mayor, City Council and all agencies to consider how our aging city should ensure that residents 60 and older can remain a vital and active part of our community.

We would be remiss if we didn't seek to build on the investment that the city made in the Age-Friendly Berkeley Report, and allowed the Action Plan to languish. We call on our city's leadership to consider how we move forward and implement the many recommendations in the plan.

The issues of concern identified in the report—high cost of living, lack of affordable housing, limited reliability, coordination, and options for transportation, problems with sidewalks, poor lighting, lack of benches and limited parking, crime, widespread homelessness, insufficient number of affordable, desirable settings for out-of-home assisted living, limited options for subsidized services for moderate-income individuals, and lack of “human touch” for information, referral and system navigation assistance—are recognizable to many of us who live in Berkeley, and we need to ask ourselves whether we have made progress in addressing these issues.

FISCAL IMPACTS OF RECOMMENDATION Fiscal impacts shall be identified by the Council Policy Committee on Health, Equity, Life Enrichment, and Community. We have identified a handful of small steps in increasing staffing and spending, but these are only the start of this long march toward fulfilling what was promised in the 2018 Plan. We would be remiss if we didn't seek to build on the investment that the city made in the Age-Friendly Berkeley Report, and allowed the Action Plan to languish. In addition, for every year we fail to address this situation,

the aging population and the services they need will only grow. We call on our city's leadership to consider how we move forward and implement the many recommendations in the plan.

ENVIRONMENTAL SUSTAINABILITY There are no identifiable environmental effects, climate impacts, or sustainability opportunities associated with the subject of this report.

BACKGROUND On February 21, 2024, the Commission on Aging voted as follows:

That Council refer to the Council Public Safety Policy Committee on Health, Equity, Life Enrichment, and Community to develop plans to revisit and act on the recommendations in the Berkeley Age-Friendly Action Plan by building on what is already occurring in the community, expanding the Plan's impact, and addressing gaps, by increasing funding for personnel and other services currently being offered as well as others identified in the Age-Friendly Plan..

M/S/C:

Ayes:

Noes:.

Abstain:

Absent:

LOA:

RATIONALE FOR RECOMMENDATION In December 2018, the Mayor presented the Age-Friendly Berkeley Action Plan. This three-year plan was the result of two years of extensive outreach and engagement. It sought to ensure that older adults remain at the heart of our community and recognized them as a vital part of the fabric of our neighborhoods and civic life.

Among the motivations for the plan was the recognition that our city's rapidly changing demographics: Berkeley residents over 60 currently number approximately 20,000—or 1 in 5 residents. This number doubled in the decade from 2010 to 2020 and is projected to increase at a similar rate well into the future. On behalf of the Commission on Aging, we would call on the Mayor, City Council and all agencies to consider how our aging city should ensure that residents 60 and older can remain a vital and active part of our community.

We would be remiss if we didn't seek to build on the investment that the city made in the Age-Friendly Berkeley Report, and allowed the Action Plan to languish. We call on our city's leadership to consider how we move forward and implement the many recommendations in the plan.

ALTERNATIVE ACTIONS CONSIDERED To leave the situation as is and not provide needed services in support of Berkeley's rapidly expanding over-60 population and fall short of the commitment it made when applying for and being awarded the designation of an Age-Friendly City in 2018.

CITY MANAGER The City Manager takes no position on this recommendation.

CONTACT PERSON

, Chair, Commission on Aging

Tanya Bustamante, Aging Services Division Manager 510-981-5178

Attachments:

Attachment 1 2018 Berkeley Age-Friendly Action Plan

Attachment 2 City Departmental Budgets

Attachment 3 HHCS Departmental Summary

Attachment 4 HHCS Division Summary

Attachment 5 Berkeley's Unique Structure for Aging Services

Attachment 6 Aging Division Activities Summary

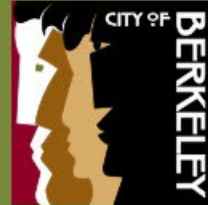
Attachment 7 Aging in Alameda County: A Changing Landscape July 2022 (PDF) to come

Attachment 8 Breakdown of Alameda Area on Aging Funds for Berkeley

Attachment 9 Highlights of Census Data on Aging in Berkeley

Attachment 1 Berkeley Age-Friendly Plan (PDF) to come.

Age-Friendly Berkeley Action Plan



Berkeley, California • December 2018

Attachment 2 City Departmental Budgets

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SUMMARY OF EXPENDITURES BY DEPARTMENTS – ALL FUNDS

SUMMARY OF EXPENDITURES BY DEPARTMENTS – ALL FUNDS						
	FY 2020	FY 2021	FY 2022	FY 2022	FY 2023	FY 2024
	Actual	Actual	Adopted	Est Actual	Adopted	Adopted
Mayor & Council	2,525,920	2,708,844	3,096,559	3,334,707	4,785,155	4,835,380
Auditor	2,527,125	2,526,081	2,805,883	2,688,657	3,101,376	3,124,862
Police Review Commission ^(a)	775,701	744,950				
Office of the Director of Police Accountability	-	-	1,114,235	815,258	1,422,432	1,374,911
City Manager	8,104,984	8,432,572	8,770,554	9,733,300	11,732,034	11,763,275
Office of Economic Development	8,951,152	4,966,525	5,082,163	8,668,166	7,555,553	6,380,895
Information Technology	15,495,905	16,552,132	20,423,888	16,448,551	22,287,156	22,500,474
City Attorney	4,555,976	6,214,367	7,278,096	6,200,455	8,562,688	8,553,021
City Clerk	2,069,740	3,194,204	2,901,739	2,402,842	3,501,282	3,190,547
Finance	8,362,334	8,146,012	9,431,102	8,722,333	11,444,157	11,669,774
Human Resources	3,924,687	4,078,091	4,438,053	3,711,625	5,009,883	5,124,741
Health, Housing & Community Services	60,608,060	81,811,330	84,514,926	91,734,085	95,182,974	93,913,527
Police	79,762,713	79,395,632	77,807,443	82,704,040	87,444,720	88,658,439
Fire	48,213,947	49,891,701	60,351,430	58,014,192	63,377,259	63,450,868
Public Works	140,021,855	125,907,423	147,438,656	140,757,036	203,608,562	190,276,318
Parks, Recreation & Waterfront	43,593,445	60,795,051	52,979,556	63,569,334	53,378,913	53,954,977
Planning	21,595,429	21,687,691	25,252,729	22,485,141	29,022,035	27,993,361
Library	18,865,464	20,255,244	25,566,341	18,476,577	24,918,604	25,182,279
Rent Board	5,755,222	5,517,190	6,825,535	5,803,127	7,247,755	7,406,431
Non-Departmental ^(b)	60,402,889	95,581,042	127,522,399	106,147,842	110,594,086	96,618,910
Total All Funds	536,112,550	598,406,081	673,601,287	652,417,270	754,176,624	725,972,990

(a) Police Review Commission has become the Office of the Director of Police Accountability in FY 2022

(b) Non-Departmental consists of operational overhead costs such as Property Insurance and School Board Salaries, General Fund allocation for Community Based Organizations, Workers' Compensation costs, Debt Service, and Interfund Transfers.

Attachment 3 HHCS Departmental Summary

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**DEPARTMENT OF HEALTH, HOUSING AND COMMUNITY
SERVICES FINANCIAL SUMMARY**

	FY 2020 Actual	FY 2021 Actual	FY 2022 Adopted	FY 2022 Est. Actual	FY 2023 Adopted	FY 2024 Adopted
EXPENDITURES						
By Type:						
Salaries and Benefits	29,297,601	29,612,569	38,009,426	31,488,654	43,694,077	44,664,508
Services and Materials	27,154,559	48,761,541	42,113,206	56,211,016	44,814,001	42,713,357
Capital Outlay	665,935	20,652	247,062	63,054	137,062	247,062
Internal Services	3,471,744	3,380,540	3,956,417	3,917,790	3,851,576	4,001,576
Indirect Cost Transfer	18,221	36,028	188,815	53,571	51,882	52,648
Adopted Tier 1 Funding *	-	-	-	-	2,634,376	2,234,376
	60,608,059	81,811,330	84,514,926	91,734,085	95,182,974	93,913,527
By Division:						
Office of the Director	4,785,842	7,149,835	8,386,513	10,242,281	10,224,323	10,716,725
Aging Services	4,019,360	3,935,411	5,246,576	4,121,581	5,708,535	5,768,626
Environmental Health	1,804,421	1,845,027	2,423,328	1,980,543	2,634,129	2,659,881
Housing & Community Services	19,528,452	39,861,365	38,447,750	46,486,427	39,149,783	39,356,464
Mental Health	14,579,581	15,441,645	19,746,135	14,949,664	23,438,326	22,821,837
Public Health	7,859,736	6,550,238	10,264,624	7,603,083	11,393,502	10,355,619
Community Funding	8,030,668	7,027,809	-	6,350,507	-	-
Adopted Tier 1 Funding *	-	-	-	-	2,634,376	2,234,376
	60,608,060	81,811,330	84,514,926	91,734,085	95,182,974	93,913,527
By Fund:						
General Fund	27,809,295	25,566,360	23,455,690	32,520,546	27,130,179	27,412,701
U1 - Housing	1,071	1,181,981	5,510,572	3,860,232	5,781,330	5,501,451
Capital Improv. Fund	74,145	80,887	74,170	80,769	75,424	76,240
Federal Funds	7,877,758	14,062,593	12,422,667	14,741,039	12,553,811	12,388,043
State Funds	14,793,788	17,935,905	23,002,415	19,116,703	27,963,550	26,817,359
County Grants	1,845,459	1,975,663	2,587,122	2,406,856	2,910,438	2,959,842
Local and Foundation Grants	4,148,734	3,104,535	3,275,813	3,178,294	3,797,526	4,138,539
Rental Housing Safety	-	-	-	57	-	-
Measure E Disabled Tax	1,297,768	1,341,961	1,432,011	1,482,011	1,569,911	1,601,060
Measure B Paratransit	455,244	527,845	525,433	370,307	36,797	36,797
Measure BB Paratransit	142,168	49,074	447,741	296,138	934,031	940,629
Measure GG Fire Prep	137,856	204,136	242,527	78,912	256,28	260,632
Measure O	0	14,923,810	6,445,567	9,683,661	6,445,567	6,445,567
Sewer Fund	184,481	343,797	437,189	235,598	503,102	509,045
Other Funds	1,840,293	512,783	4,656,009	3,682,963	5,225,020	4,825,622

Attachment 4 HHCS Division Summary

	FY 2020 Actual	FY 2021 Actual	FY 2022 Adopted	FY 2022 Est Actual	FY 2023 Adopted	FY 2024 Adopted
DIVISION/ACTIVITY SUMMARY						
Office of the Director						
Administration	3,690,597	3,792,938	3,421,380	4,603,860	4,054,641	3,462,354
Fiscal & Administration	1,083,552	1,163,556	1,483,505	1,412,982	1,787,464	1,822,239
Health Officer Unit	11,694	2,193,340	3,481,628	4,225,439	4,382,218	5,432,132
Division Total	4,785,842	7,149,835	8,386,513	10,242,281	10,224,323	10,716,725
Environmental Health						
Admin	1,607,288	956,478	2,099,820	417,107	887,854	944,893
Health Protection	196,001	858,707	323,508	1,545,322	1,746,274	1,714,987
Policy Development	1,132	29,843	-	18,114	-	-
Division Total	1,804,421	1,845,027	2,423,328	1,980,543	2,634,129	2,659,881
Mental Health						
Administration	2,590,957	2,175,382	2,680,054	2,254,541	2,717,965	2,751,871
Adult Services	4,833,608	4,820,148	7,343,041	2,848,316	7,017,024	7,137,623
Medical	1,113,480	721,094	2,036,694	423,638	923,427	934,216
Family & Youth Services	207,236	783,936	97,787	1,173,048	1,067,770	1,098,405
Access	1,370,356	1,131,770	1,583,108	903,406	1,451,534	1,625,284
Crisis Services	2,396,419	926,332	4,769,438	102,077	2,610,183	2,611,707
MHSA	2,067,525	4,577,114	-	6,241,976	6,173,375	5,480,862
Homeless Services	-	305,868	1,236,013	1,002,661	1,477,048	1,181,868
Division Total	14,579,581	15,441,645	19,746,135	14,949,664	23,438,326	22,821,837
Housing & Community Services						
Administration	4,786,372	8,522,191	6,227,155	11,125,863	6,084,232	6,159,656
Community Services	112,146	1,306,734	1,245,846	386,157	1,280,903	1,286,011
Employment Services	1,130,033	421,451	63,734	61,502	123,727	129,955
Housing Development & Rehabilitation	4,248,745	19,855,131	18,016,647	22,839,516	18,786,949	18,849,692
Homeless Services	9,251,157	9,755,858	12,894,368	12,073,389	12,873,972	12,931,150
Division Total	19,528,452	39,861,365	38,447,750	46,486,427	39,149,783	39,356,464
Aging Services						
Administration	555,462	456,293	450,368	463,354	455,029	453,220
North BSC**	740,300	682,381	990,399	647,703	913,211	919,455
North BSC – Transportation**	685,594	698,955	1,129,864	751,677	1,125,731	1,129,609
South BSC**	411,481	396,519	471,750	399,782	534,844	547,747
West BS - Case Management**	1,005,102	1,024,535	1,220,913	1,143,840	1,690,341	1,734,436
West BSC – Nutrition**	577,080	638,383	805,613	649,233	809,216	802,551
Division Total	4,019,360	3,935,411	5,246,576	4,121,581	5,708,535	5,768,626

**Berkeley Senior
Center (BSC)

Attachment 5 Berkeley’s Unique Structure for Aging Services

The Mission of the Health, Housing, and Community Services Department is to enhance community life and support housing, health, and wellness for all.

ORGANIZATIONAL CHART



HEALTH, HOUSING & COMMUNITY SERVICES OVERVIEW

The Department of Health, Housing and Community Services (HHCS) is organized in an Office of the Director and five divisions which support the Department’s mission: Aging Services, Housing and Community Services, Environmental Health, Mental Health, and Public Health. Together these divisions provide a wide array of services to the community, including Meals on Wheels for seniors, affordable housing development loans for nonprofit organizations, restaurant health inspections, mental health services for people with high level needs, health services at Berkeley High School, and much more. In addition, the Department currently staffs seven commissions, and also works closely with the Homeless Services Panel of Experts, now staffed in the City Manager’s Office. Baseline activities of each division are described in more detail below.

Attachment 6 Aging Division Activities Summary

- **Aging Services:** The Aging Services Division enhances the well-being and independence of older adults by offering social connections, activities, and lifelong learning. The Division operates two vibrant senior centers that offer thousands of classes, events, workshops and day trips as well as a nutritious weekday lunch for older community members. The Meals on Wheels program provides nutritious meals to home-bound seniors. Case managers provide consultation, referral, and linkage to community resources. Additionally, Aging Services provides taxi and van trips for older adults and disabled Berkeley residents to improve quality of life and access to community resources.

Attachment 7 Aging in Alameda County: A Changing Landscape July 2022 (PDF) to come



SENIOR SERVICES COALITION
OF ALAMEDA COUNTY

Aging in Alameda County: A Changing Landscape

July 2022

Attachment 8 Breakdown of Alameda Area on Aging Funds for Berkeley

Division of Aging Services is a subcontractor for Alameda County.

Amounts below indicate FY2024 amounts; the percentages indicate the general breakdown overall, every year:

- Congregate Nutrition (dine-in lunch service): \$73,381 (15%)
- Home-Delivered Meals: \$140,192 (25%)
- Family Caregiver Support: \$99,528 (20%)
- Information Assistance: \$156,803 (30%)
- Senior Center Activities: \$47,363 (10%)

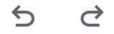
Attachment 9 Highlights of Census Data on Aging in Berkeley

Changes in >60 Population 2010 and 2020

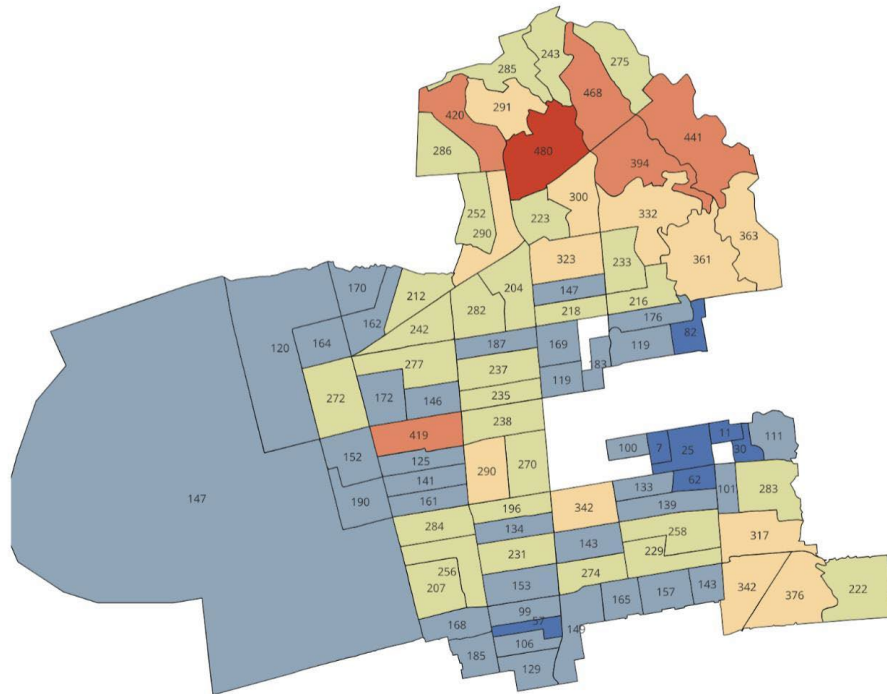
Red-orange high; blue low.

First two figures show absolute numbers. Second two are percentages of population.

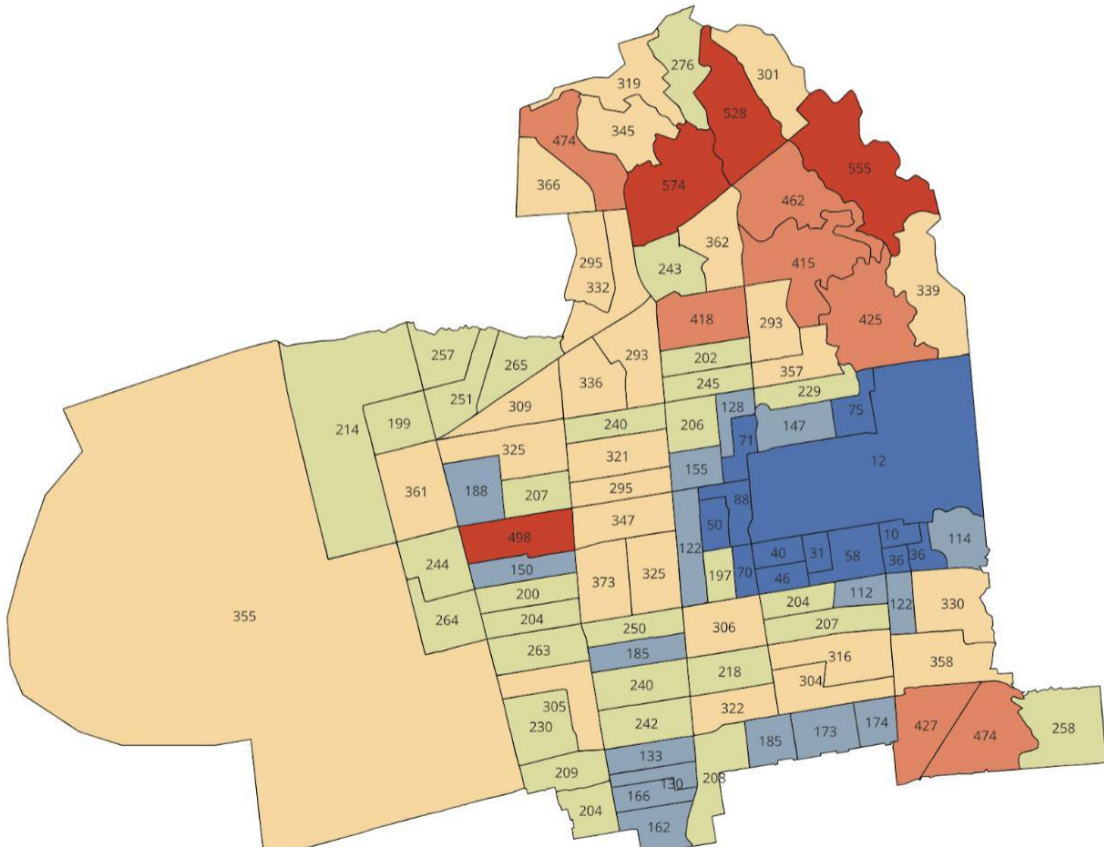
✓ Change In Senior Population



2010 Age 60+ Population By Block Group



2020 Age 60+ Population By Block Group



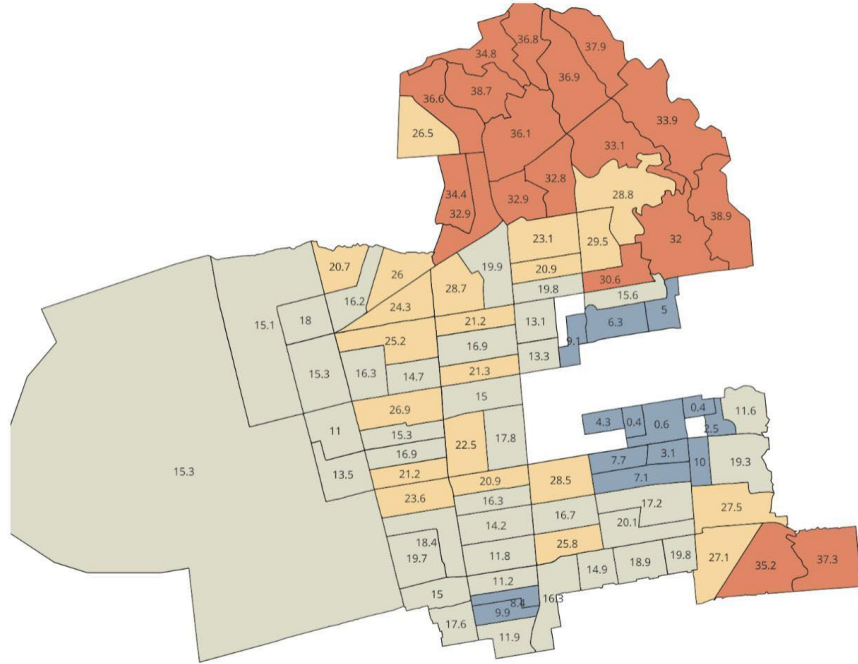
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✓ Change In Senior Population



2010 60+ Population As A Percent Of Population



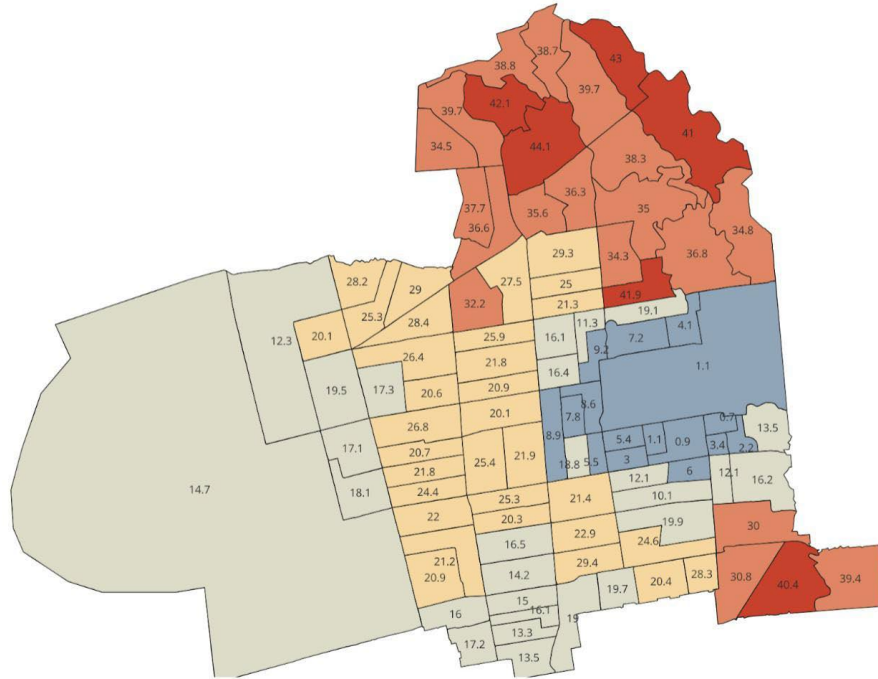
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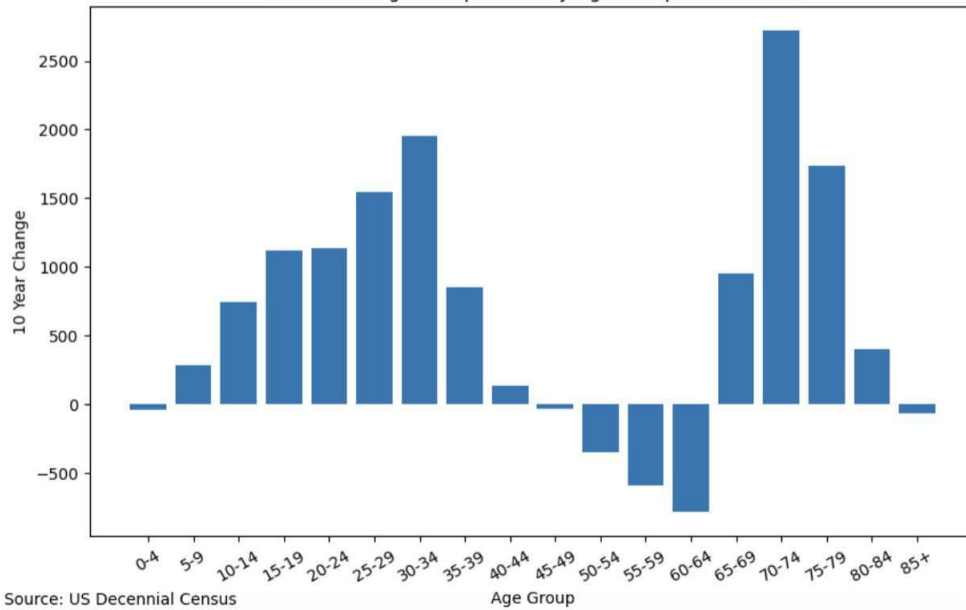
✓ Change In Senior Population

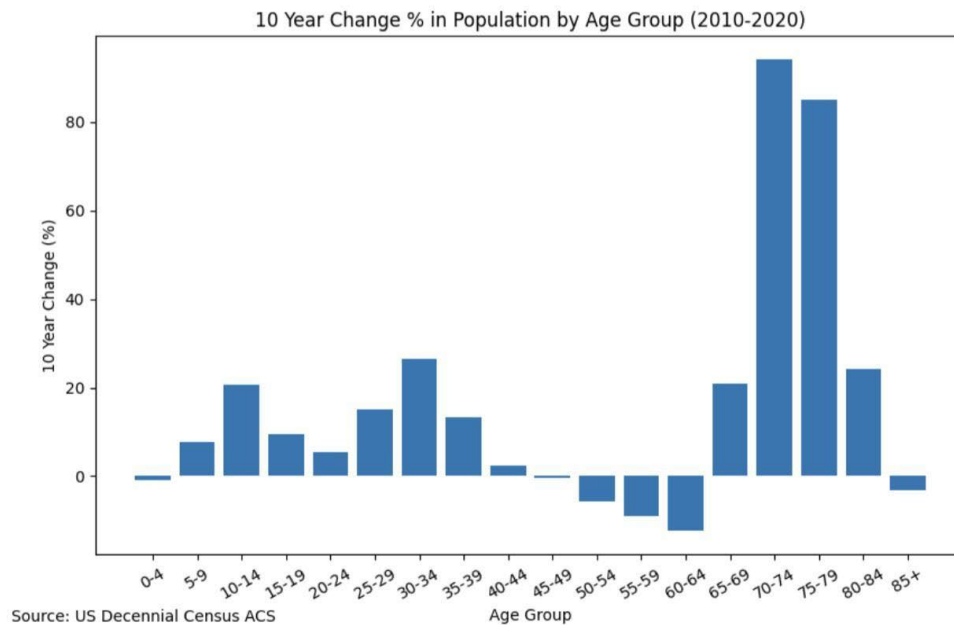


2020 60+ Population As A Percent Of Population



10 Year Change in Population by Age Group (2010-2020)





Some narratives about the figures:

- About 8% of residents > 65 years either without a computer at home or internet access, ~1500 people
- About 2000 people > 60 below the poverty line in the last 12 months
- About 4000 people 65 years and older below 200% of the poverty line, ~20% of Berkeley's seniors
- About 700 kids living with "a grandparent householder" which I take to mean being raised by their grandparent
- About 5500 people over 65 who live alone
- About 4500 people > 65 work. Only 1900ish drive alone. 400 take transit, 200 carpool, 350 walk, 1500 work from home. Only 150 take a taxicab, motorcycle, bicycle, or other means
- Median household income in \$93,000
- About 2000 are on medicaid or other means tested public health insurance
- About 3000 > 65 with an ambulatory difficulty
- About 1200 with a cognitive difficulty

Margins of error on all these estimates are around 10-20%

Data from Alameda County senior Services Coalition

Senior Services Coalition of Alameda County AGING IS SOMETHING WE ALL HAVE IN COMMON

Status and Trends - Alameda County's Older Adult Population

We are Aging

- Over 288,000 people age 60+ live in Alameda County.i
- 12% of our County's residents were age 65+ in 2016, about 199,000 people.ii
- By 2025, that number is expected to increase by 50%.iii
- By 2030, Alameda County will be home to 368,000 people age 65+.iv

Economic Insecurity is High

- Census data tells us that 18.3% of people age 65+ live below 150% of the Poverty Level.v
- 150% FPL is \$1,561/month, less than FMR for a studio apartment in Alameda County.vi
- 3 out of every 4 single older adults live below 200% of Poverty Level, and well below the Elder Economic Security Index – a measure of what it takes to meet basic needs. vii
- One in five calls to the Alameda County Community Food Bank are from older adults.viii
- Economic insecurity is highest among African Americans, the result of systematic racial injustice. 80% of homeless older adults in the HOPE Home study were African American.ix

The Housing Crisis is a Senior Crisis too

- About 75% of seniors who live below the Elder Economic Security Standard are renters.x
- Over 60% of seniors who rent their homes have a housing cost burden well over 30% of their total household income.xi
- Over 42,000 aged 65+ live alone, a majority of them women.xii Living alone puts elders at greater risk of isolation and associated serious cognitive and health consequences.xiii
- 10% of people counted in Alameda County's 2017 Point-In-Time survey were age 60+;xiv 30% of homeless older adults experienced their first homelessness in the last year.xv

Health and Disability are Major Factors that Challenge One's Ability to Live at Home

- Over 68,000 people 65+ have a disability (hearing, vision, cognitive, mobility, selfcare).xvi
- Over 28% of Alameda County seniors age 65+ have fair to poor health status.xvii
- Over 66% have high blood pressure; over 18% have heart disease; over 14% experience frequent mental distress.xviii

Coverage for Health Care and Long Term Services and Supports

- 98% seniors age 65+ have Medicare coverage, which covers only 50% of medical care costs, does not cover long term care services, and covers only 90 days in skilled nursing.xix
- Over 42,000 of those with Medicare also have Medi-Cal coverage.xx
- Over 12,400 seniors receive Medi-Cal funded In-Home Supportive Services.xxi

Increasing Diversityxxii

- Alameda County's older adults are increasingly diverse: 48% white, 27% Asian, 12% African American, 11% Latino, 2% multi-race, .4% Pacific Islander, .2% American Indian.
- 38% of seniors in Alameda County are foreign born, and about 10% are not US citizens.
- 40% of older adults speak a language other than English at home.

www.seniorservicescoalition.org

The Senior Services Coalition of Alameda County is a coalition of 40 nonprofit and public organizations that provide health care and supportive services to over 79,000 Alameda County seniors. We are committed to establishing an easily accessible, coordinated system of social, medical and supportive care for seniors in Alameda County.

footnotes

i CA Department of Finance

ii U.S. Census, 2016 American Community Survey 5-year estimates

iii CA Department of Finance, Report P-1

iv Ibid.

v U.S. Census, 2016 American Community Survey 5-year estimates

vi FMR for fiscal year ending September 2018, California Department of Social Services and US Department of

Housing and Urban Development

vii Elder Economic Security Standard Index for Alameda County, based on 2010 Census data. Insight Center and

UCLA Center on Health Policy. In 2011, the EESSI for a single elder renter in Alameda County was \$2,170.

viii Alameda County Plan for Older Adults, May 2016; data from ACCFB calendar 2015.

ix Kushel, Margot et al; Pathways to Homelessness Among Older Adults; PLoS One, 2016 May 10.

x Elder Economic Security Standard Index for Alameda County, Insight Center and UCLA Center on Health Policy.

xi American Community Survey, 2014

xii 2010 Census.

xiii Social Isolation, Loneliness and All-Cause Mortality in Older Men and Women, by Andrew Steptoe, et.al.

Proceedings of the National Academy of Sciences, vol. 110, no.15.

xiv Alameda County 2017 Point in Time Count & Survey; Everyone Home.

xv Kushel, Margot et al; Residential patterns in older homeless adults: Results of a cluster analysis; Social Science &

Medicine, March 2016

xvi 2010 Census

xvii CHIS, California Health Interview Survey 2014, UCLA Center for Health Policy Research. Data is for non-

institutionalized seniors. xviii ibid

xix CMS 2014 Medicare enrollment data.

xx California Department of Health Care Services Certified Eligibles Count February 2018.

xxi Alameda County Social Services Agency, July 2016.

xxii All data in this section is from Alameda County CAPE Unit (Community Assessment, Planning and Evaluation) 2015 report on Alameda County Older Adults.

www.seniorservicescoalition.org