



Center for Active Adults 2019 Evaluation Report



February 5, 2020

BACKGROUND

It is the policy of Vintage Senior Center to conduct program evaluation activities on an annual basis. The Senior Center uses its program evaluation results to:

- Describe its strengths and weaknesses across activities and programs.
- Set priorities for improvement as part of the Quality Improvement Plan.
- Communicate conclusions with all appropriate constituents, to include participants, staff, participant advisory vehicle, Board, Area Agency on Aging, and other key stakeholders.

The Senior Center will develop and implement an annual Program Evaluation Plan for its activities/services which may include components such as:

- Quantity/Utilization/Demographics
- Satisfaction/Quality
- Outcomes/Impact
- Compliance

A variety of methods may be employed for the purposes of program evaluation:

- Use of AAA Network-wide survey tool or agency-designed survey tool
- Survey of program satisfaction (quality)
- Analysis of service utilization (quantity)
- Survey of program impact (outcomes)
- Evaluation of compliance with County requirements
- Review of Senior Center Policy Manual
- Other as identified

The Evaluation process is led by the Executive Director and Center Director. The Senior Center House Council will also assume a direct role in the Evaluation process. The role of House Council includes reviewing the tools in advance, assisting with distribution, collection, tabulation and review of results. The Evaluation will normally occur in the late Fall of each year, with the results being used to assist the Center in determining goal areas for the next year's Quality Improvement Plan.

It is anticipated that the following resource may be needed to complete the annual evaluation: Time resources/staff, volunteers and participants; Copilot data collection system; Survey tools; Knowledge of and ability to tabulate and analyze results.

2019 EVALUATION PLAN

Program Evaluation activities for calendar year 2019 were comprised of the following elements:

- Conduct AAA Network-Wide Senior Center Survey
- Complete Better Choices, Better Health Comprehensive Report
- Complete Center Operational Policy Review
- Review 2019 Quality Improvement Plan

2019 RESULTS

SECTION 1: AAA Network-Wide Senior Center Survey

The Allegheny County Area Agency on Aging conducted a survey from March-May, 2019 at the 21 focal point senior centers. The topics included: visit frequency, reasons for visiting, overall satisfaction, knowledge regarding information services, lunch experience. In total, 1,114 survey results were collected, an average of 53 per center. Vintage has the highest number of responses among all centers, with 222 responses.

See Attachment A for the full survey results.

Results

- Vintage respondents typically visit the center two days per week (24%) or three days per week (24%). The Network had the same top two visit frequencies.
- Vintage respondents' three most common reasons for visiting the center included socializing (78%), recreational activities (70%), health and wellness activities (52%). The Network had slightly different top three reasons, socializing (76%), recreational activities (67%) and lunch (61%).
Vintage respondents' three most common responses to 'has attending the center helped you' were: getting to socialize (78%), having something to look forward to (73%), and more physically active (70%).
The Network respondents had slightly different top responses: getting to socialize (82%), having something to look forward to (74%), and learning new things (60%).
- When asked if the senior center is clean, 89% said 'yes' and 11% said 'sometimes'.
- Vintage respondents stated that the staff members are courteous to them (96%) comparable to 95% for the Network.
- 94% of Vintage respondents were satisfied with the exercise/fitness options; 91% for the Network.
- 92% of Vintage respondents were satisfied with the health & wellness options; the Network results were the same.
- 88% of Vintage respondents were satisfied with the educational activities (86% for the Network).
- 91% of Vintage respondents were satisfied with the recreational activities; the Network results were the same.
- A majority of both Vintage and Network respondents (94%) were aware that the centers provide Information Services.
- 74% of Vintage respondents had received information about local resources, comparable with the Network at 71%.
- 97% of Vintage respondents who received information found it to be helpful, comparable with the Network (98%).
- 40% of Vintage respondents never have lunch at the center, compare to 22% for the Network.
- 85% of Vintage lunch users are satisfied with the lunch (all or some of the time), compared to 93% for the Network.
- 93% of Vintage lunch users found the overall dining experience pleasant, comparable to 94% for the Network.
- 99% of Vintage respondents would recommend the center to others, comparable to 98% for the Network.

SECTION 2: Better Choices, Better Health Comprehensive Report

The Chronic Disease Self-Management Program (known locally as Better Choices, Better Health) is an evidence-based approach originally developed by Stanford University. In numerous studies, participants of the program demonstrated measurable improvements in exercise, communications with physicians, self-reported general health, fatigue and other symptoms when compared to peers who did not take the program. The University of Pittsburgh released a comprehensive report covering the period 2010-2019, identifying the results of the program.

See Attachment B for the full report.

Results

- 3,529 enrollees and 2,936 program graduates
- 83% graduation rate benchmarked against the national average of 74%
- Average number of chronic conditions among participants was 2.8
- Most common conditions are arthritis, hypertension, diabetes, depression and heart disease
- Statistically significant improvements in self-report general health
- Statistically significant improvements in healthy behaviors
- Statistically significant improvements in health distress
- Statistically significant improvements in self-confidence to manage chronic disease
- Statistically significant improvements in communications with health providers
- Success in reaching out to minority community members (46%)

SECTION 3: Center Operational Policy Review

A comprehensive review of the Center Operation Manual was conducted by the Executive Director and Center Director. The review was conducted in December of 2019, and a total of 34 policies were reviewed.

Results

- 26 policies required no changes: Advisory Vehicle, Civil Rights, Commendations and Complaints, Communications, Community Partnerships, Community Resources, Confidentiality, Conflict of Interest, Evacuations, Facilities Management, Fire Safety, Guiding Principles, Hazardous Materials, Human Resources, Nutrition, OSHA Control, Participant Input, Quality Improvement, Reaching Older Adults, Research Guidelines, Risk Management, Smoking, Strategic Plan, Unusual Incidents, Volunteers, Workplace Safety.

- 8 policies were revised. Accounting, Business Continuity Plan, Emergency Response Plan, Participation Criteria, Program Description, Program Evaluation, Public Relations and Marketing, Volunteer Manual.

SECTION 4: Review 2019 Quality Improvement Plan

It is the practice of Vintage to develop an annual Quality Improvement Plan.

Following are the results of the 2019 Plan:

Category: Staff Training

1. Coordinate and Complete annual trainings	Completed – All staff
2. Attend AAA Regional Conference	Completed – 2 of 2 staff
3. Secure/Maintain First Aid Certification	Completed – 5 of 5staff
4. Secure AIRS re-certification	Completed – 2 of 2 staff
5. Secure Food Service certification	Completed – 2 of 2 staff

Category: Outreach

1. Conduct at least 24 outreach activities	Completed - 33 activities
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Category: Collaborations and Partnerships

1. Engage in at least 15 collaborations	Completed - 28 collaborations
2. Engage in at least 2 formal partnerships	Completed - 15 partnerships

Category: Compliance

1. Complete annual AAA validation process	Completed – November, 2019
2. Submit AAA Quarterly reports	Completed – All quarters
3. Secure Health Department Certificate	Completed – September, 2019
4. Implement Tier 3 Quality Programming	Completed – All quarters

Category: Facility

1. Complete renovations of main bathrooms	Completed – March, 2019
2. Complete phase 2 of HVAC replacement	Completed – April, 2019
3. Install commercial dishwasher	Completed – May, 2019
4. Paint 3 classrooms and fitness studio	Completed – June, 2019
5. Purchase 2 new recliners	Completed – March, 2019
6. Replace water fountain	Completed – June, 2019

Category: Special Projects

1. Implement Membership & Utilization Cmt.	Initiated – Continue in 2020
2. Initiate Accreditation Planning Committee	Initiated – Continue in 2020
3. Pilot After-Hours Programming	Carry Over to 2020
4. Develop/Implement Plan to Increase presence on Facebook	Carry Over to 2020

RECOMMENDATIONS

Based on the reported results, following are recommendations for calendar year 2020:

- Continue standing goals in Staff Training, Outreach, Collaborations and Compliance
- Continue membership & Utilization Committee
- Continue Accreditation Planning Committee
- Pilot After-Hours Programming
- Increase Presence on Facebook
- Identify priority facility upgrades
- Include Outcome Survey and Demographic/Utilization Study in annual evaluation plan