2017
Charlotte County Senior Health Assessment

HealthyCharlotte
# Table of Contents

- Introduction .......................................................... 3
- Executive Summary .................................................. 4
- Demographic & Socioeconomic Characteristics .............. 6
- Health Status ............................................................. 10
- Healthcare Access & Coverage ....................................... 17
- Community Input ....................................................... 18

Appendices:
- Appendix A: Positive Aging Members ......................... 45
- Appendix B: Community Survey ..................................... 46
- Appendix C: Focus Group Moderator Guide .................. 51
- Appendix D: Key Leader Interview Guide ................. 54
- Appendix E: Community Leaders Interviewed ............. 57

Prepared by:

Jennifer S. Sexton  
jennifer.sexton@flhealth.gov

Office of Strategic Planning, Communications and Preparedness  
Florida Department of Health in Charlotte County

In partnership with:

Positive Aging Subcommittee  
Healthy Charlotte County

October 2017
Introduction

Conducting a Community Health Assessment (CHA) is the first step in developing a Community Health Improvement Plan (CHIP), which provides a structured approach to addressing public health issues in a community. Charlotte County’s first CHIP, which was developed in 2012 with community input, identified strategic issue areas that would benefit from intervention and outlined goals and strategies to address these issues.

In developing the subsequent Community Health Improvement Plan for 2016, community leaders noted that a large portion of the Charlotte County population, namely its senior citizens, likely has unique health needs. This led to the development of a Community Health Improvement Plan subcommittee focused on Positive Aging.

The Positive Aging subcommittee, which met for the first time in January 2016, identified social isolation as a pressing issue for seniors in Charlotte County. While developing an intervention to address this issue, the group acknowledged that their data on Charlotte County seniors was limited. To best address this issue, the group decided to develop a Community Health Assessment that focused specifically on the health indicators related to the aging population in Charlotte County.

This Community Health Assessment includes a review of community health indicators, a community opinion survey, community focus groups, and key leader interviews. The purpose of the assessment is to lay the foundation for community health improvement efforts that will lead to a more equitable state of health for Charlotte County’s elder population.

Presented in this document is the most recent data available at the time of analysis – generally 2016 data – as well as trends over time. The assessment is intended to cover adults ages 60 and over, however, some data is only available at the county level for ages 65 and over.

A mixed-method approach was used, which combined both quantitative and qualitative data. Quantitative data sources include Florida Charts (www.flhealthcharts.com), the American Community Survey, the Social Security Administration, the Department of Elder Affairs, and the Behavioral Risk Factor Surveillance System*. Qualitative data was gathered through community surveys, focus groups, and interviews with key community leaders.

*The Behavioral Risk Factor Surveillance System (BRFSS) is conducted on at the county-level every three years. This telephone surveillance system is designed to collect data on individual risk behaviors and preventative health practices related to the leading causes of morbidity and mortality in the United States. All the data collected is from adults ages 18 and older, and is self-reported. The data is broken out by age, allowing for isolation of information specific to residents ages 65 and older.
Executive Summary

Many factors contribute to the health of an individual, including age and available resources. This document details the findings of a Community Health Assessment aimed at identifying the unique health concerns for the aging population in Charlotte County, Florida, and the availability of key health resources for this specific population.

The Positive Aging subcommittee of Healthy Charlotte County began work to develop a Community Health Assessment that focused specifically on the health of the population ages 60 and over* in January 2017. That population represents over 77,000 individuals in the county.

This Community Health Assessment includes a review of certain health indicators, a community opinion survey that was distributed throughout the county, community focus groups that took place in Englewood, Port Charlotte, and Punta Gorda, and interviews with key leaders who have experience working with the aging population of Charlotte County.

The data reported in this assessment focuses on the leading causes of death for the aging population and should not be considered an exhaustive health profile of Charlotte County seniors. For example, rates of communicable diseases in the senior population were examined during the secondary data research phase of this assessment. As the rates of HIV/AIDS and sexually transmitted infections were low for Charlotte County residents ages 60 and over, the subcommittee made the decision not to include that data in this report in efforts to focus solely on the health issues that were identified to be much more pressing to this population.

As of 2016 data, the leading causes of death for Charlotte County residents ages 60 and over are:

- Cancer (23.7%)
- Heart Disease (23.2%)
- Chronic Lower Respiratory Disease (6.9%)
- Alzheimer’s Disease (5.9%)
- Cerebrovascular Disease (stroke) (5.8%)
- Influenza & Pneumonia (2.7%)
- Unintentional Injury (2.4%)
- Diabetes (2.1%)

Much like the population of Charlotte County as a whole, cancer and heart disease are the leading causes of death for the aging population. What is worth noting is the significant increase in deaths due to Alzheimer’s disease in recent years. 2014 data indicated that 63 deaths for seniors were attributed to Alzheimer’s disease, which increased to 119 deaths in 2015 and 134 deaths in 2016. Additionally, it has been suggested by numerous studies that Alzheimer’s disease contributes to more deaths than those that are reported, due to complications from Alzheimer’s disease sometimes being listed as the cause of death.

The unintentional injury category, while only a small percentage of overall deaths, should be examined carefully, as those deaths are often easily prevented. The majority of unintentional injury deaths in Charlotte County seniors were due to falls (41%).

Accessing needed healthcare is a common issue across all populations. Several focus group participants, as well as key leaders who were interviewed, noted that insufficient health insurance coverage and/or out-of-pocket expenses made all the difference in whether an individual was easily able to
Executive Summary

access needed healthcare.

Charlotte County offers a variety of health-related resources, including medical providers, senior activity centers, and clubs and churches where individuals have opportunities to meet their emotional and spiritual needs. Access to these resources were varied, however, again due to insufficient health insurance coverage, out-of-pocket expenses, and limited transportation options.

Transportation was mentioned frequently as a barrier to accessing healthcare during the process of gathering community input. Nearly 80% of residents who responded to the community opinion survey indicated that transportation was needed to improve the health of older adults in the community. For older adults, the current public transportation system can be difficult to navigate. Specific concerns were that a senior who is ill cannot always schedule a bus trip in advance, which is required, and a senior who is frail (and possibly ill as well) cannot always manage the long waits in their unwell state.

As the number of older adults living in Charlotte County continues to grow, leaders stressed the importance of coordination of care between different providers, and taking the unique needs of seniors into account when managing their care. Other suggestions for ways to build on the current healthcare system are included at the conclusion of each Community Input section.

With this data and community feedback, it is the desire of the Positive Aging subcommittee that community leaders will work together to solve the identified issues and improve upon the quality of life for the older adults in Charlotte County.

*Please note that some data is only available at the county level for ages 65 and over.*
Demographic & Socioeconomic Characteristics

Age

The State of Florida is known as a retirement haven due to its year-round warm weather, abundance of golf courses, and its many tax benefits (no state income tax, no estate or inheritance tax, and property and sales tax rates that are close to the national average). These factors combined make it no surprise that Florida has the largest number of residents age 65 and older of any state in the U.S.

Data from the 2014 Census Bureau’s population estimates indicates that Charlotte County, Florida has the second highest rate of residents age 65 and older (37.7%). The highest elderly population was in Sumter County, Florida (52.9%) and third place went to La Paz County, Arizona (36.1%).

It can be assumed that an older population will have different healthcare needs than that of a younger population. This can include difficulty obtaining healthy meals, limited transportation options, and issues that arise from a higher prevalence of chronic diseases, physical disabilities, mental illnesses, and other co-morbidities.

As of 2016 population estimates, Charlotte County had 77,276 residents ages 60 and over.

Race and Ethnicity

As can be see on the chart at the top of the page.

![Population by Age, 2016](image)

Data Source: The Florida Legislature, Office of Economic and Demographic Research
Demographic & Socioeconomic Characteristics

Page, the vast majority of Charlotte County seniors identify as white. Only five percent of the senior population of Charlotte County is non-white, compared to 12.2% statewide.

While the number of white seniors in the county far exceeds non-white seniors, those who identify as black have been on the rise in recent years, as noted in the chart below.

Of the elderly population, 3.4% identify as Hispanic, which is well below the Florida average of 17.4% of seniors identifying as Hispanic.

Language

According to 2011-2015 census five-year estimates, 92% of Charlotte County residents ages 65 and over speak only English at home.

Of those seniors in Charlotte County who speak other languages at home, the majority (66%) speak other Indo-European languages, 27% speak Spanish, and 5% speak Asian and Pacific Island languages.

Data Source: The Florida Legislature, Office of Economic and Demographic Research
Demographic & Socioeconomic Characteristics

**Marital Status**

Marital status can play a role in a variety of issues that can affect the health of an individual. Living alone, whether due to never having been married, divorce, or the passing of a spouse, can lead to isolation and/or depression. Additionally, the costs of maintaining a household for one person can be more difficult to manage than that of a two-person household when both individuals are contributing income.

Of Charlotte County residents age 60 years and over, 65.4% are currently married. Fewer than three percent have never been married.

**Educational Attainment**

Another factor that often plays heavily into the health of a population is educational attainment. Charlotte County’s 60 and over population has a 10.9% rate of having less than a high school diploma; 35.1% of the population are high school graduates or have a GED.

Over half of the population, however, have achieved higher levels of education. 30.6% of seniors have completed some college or an associate’s degree, and 23.4% have attained a Bachelor’s degree or higher.

**Income and Poverty Status**

Of the 60 and over population, 15.9% are still considered part of the civilian labor force and are employed. This is further illustrated in the table below, by the fact that 30.8% of households in this population bring in employment income. 88.2% of households

---

Data Source: 2010-2014 American Community Survey 5-Year Estimates
Demographic & Socioeconomic Characteristics

age 60 and over in Charlotte County receive Social Security income, and 51.8% of households receive retirement income.

The rate of elderly residents living below the Federal Poverty Level in Charlotte County (7.2%) is better than the State rate (10.8%) during this same time period. In Charlotte County, this comes out to approximately 5,600 seniors.

Data estimates from 2010-2014 indicate that of those 60 and over in Charlotte County, 7.2% live below 100% of the poverty level; 8.6% live between 100 and 149% of the poverty level; and 84.2% live at or above 150% of the poverty level.

According to data provided on the Department of Elder Affairs 2016 Profile of Older Floridians, 4,858 Charlotte County residents age 60 and over are Medicaid eligible based on limited resources. Ninety-one percent of those are considered Dual Eligible (both Medicaid and Medicare).

Other possible avenues for resources for Charlotte County seniors include the Area Agency on Aging of Southwest Florida, which had over 400 clients waitlisted for access to needed services as of May, 2017.

*While the vast majority of seniors that reside in Charlotte County are receiving income from Social Security, the average monthly benefit for retired workers in the United States is approximately $1,360 per month, according to the December 2016 Beneficiary Data from the Social Security Administration. At an annual rate of $16,320, this is 135% of the Federal Poverty Level (FPL) for a household of one. Although it is a large source of income for many seniors, Social Security income alone is likely insufficient to live comfortably in retirement.*

Data Source: 2010-2014 American Community Survey 5-Year Estimates

<table>
<thead>
<tr>
<th>Sources of Income, Charlotte County Residents</th>
<th>Percentage of households age 60 years and over</th>
</tr>
</thead>
<tbody>
<tr>
<td>With earnings</td>
<td>30.8%</td>
</tr>
<tr>
<td>With Social Security income*</td>
<td>88.2%</td>
</tr>
<tr>
<td>With Supplemental Security Income</td>
<td>3.8%</td>
</tr>
<tr>
<td>With cash public assistance income</td>
<td>1.0%</td>
</tr>
<tr>
<td>With retirement income</td>
<td>51.8%</td>
</tr>
<tr>
<td>With Food Stamp/SNAP benefits</td>
<td>5.1%</td>
</tr>
</tbody>
</table>

Data Source: 2010-2014 American Community Survey 5-Year Estimates

Data Source: 2010-2014 American Community Survey 5-Year Estimates

Data Source: 2010-2014 American Community Survey 5-Year Estimates
Health Status

Leading Causes of Death

As can be seen in the table below, chronic diseases top the list of leading causes of death for Charlotte County’s elder population. As of 2016 data, cancer was cited as the cause of the largest number of deaths for those age 60 and over (23.7% of all deaths for this population), with heart disease coming in a close second (23.2% of all deaths for this population). While there are many factors that can lead to either of these conditions, obesity is a risk factor for both.

These top two causes of death are the same for the overall population of Charlotte County as well, accounting for nearly half of all deaths in 2016.

Chronic diseases share many of the same risk factors. According to the World Health Report 2010, the major risk factors for chronic diseases include:

- tobacco use
- the harmful use of alcohol
- raised blood pressure (or hypertension)
- physical inactivity
- raised cholesterol
- overweight/obesity
- unhealthy diet
- raised blood glucose

The graphs on the next page indicate the trends for the death rates for the top two causes of death for seniors in Charlotte County, cancer and heart disease, compared to rates for the State of Florida as a whole. Please note that rates are provided as crude rates (i.e. they are not age-adjusted).

Cancer

Cancer death rates for residents ages 60 and over have remained fairly consistent over the past decade, just below the State rate most years. In 2016, for example, Charlotte County’s death rate for seniors due to cancer (693.6 per 100,000) was below the State rate (727.9 per 100,000).

Heart Disease

Death rates for seniors due to heart disease have been steadily declining across the nation in recent years. During this time, Charlotte County’s rate has declined as well, and remained consistently below the State rate.

<table>
<thead>
<tr>
<th>Cause of Death</th>
<th>Rate per 100,000</th>
<th>Percent of Total Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALL CAUSES</td>
<td>2,927.2</td>
<td>100.0%</td>
</tr>
<tr>
<td>CANCER</td>
<td>693.6</td>
<td>23.7%</td>
</tr>
<tr>
<td>HEART DISEASE</td>
<td>679.4</td>
<td>23.2%</td>
</tr>
<tr>
<td>CHRONIC LOWER RESPIRATORY DISEASE</td>
<td>203.2</td>
<td>6.9%</td>
</tr>
<tr>
<td>ALZHEIMER’S DISEASE</td>
<td>173.4</td>
<td>5.9%</td>
</tr>
<tr>
<td>CEREBROVASCULAR DISEASES</td>
<td>170.8</td>
<td>5.8%</td>
</tr>
<tr>
<td>INFLUENZA &amp; PNEUMONIA</td>
<td>78.9</td>
<td>2.7%</td>
</tr>
<tr>
<td>UNINTENTIONAL INJURY</td>
<td>69.9</td>
<td>2.4%</td>
</tr>
<tr>
<td>DIABETES</td>
<td>62.1</td>
<td>2.1%</td>
</tr>
</tbody>
</table>

Data Source: Florida Department of Health, Office of Health Statistics and Assessment
Health Status

Cancer Crude Death Rate, Ages 60 and Over

Data Source: Florida Department of Health, Bureau of Vital Statistics

Heart Disease Crude Death Rate, Ages 60 and Over

Data Source: Florida Department of Health, Bureau of Vital Statistics
Health Status

Chronic Lower Respiratory Disease

One set of chronic conditions that often affects older adults are chronic respiratory diseases. These are chronic diseases of the airways and other structures of the lung. Some of the most common are: asthma, chronic obstructive pulmonary disease, occupational lung diseases and pulmonary hypertension.

Chronic lower respiratory disease (CLRD), primarily Chronic Obstructive Pulmonary Disease, is more likely to be diagnosed in individuals who are aged 65–74 years, non-Hispanic whites, women, current or former smokers, and those who have a history of asthma. Tobacco smoking is the most common cause of chronic respiratory diseases, accounting for approximately 80% of all cases of chronic bronchitis and emphysema.

Rates of CLRD in Charlotte County have remained steady in recent years, closely mirroring the State rate.

Alzheimer’s Disease

Alzheimer’s disease, a type of dementia, is a chronic condition that is often associated with the aging population as the majority of people with Alzheimer’s do not experience symptoms until after age 60. It is a progressive brain disease that is the fifth leading cause of death for seniors in America, and the fourth leading cause of death for seniors in Charlotte County.

The disease slowly destroys brain function, leading to memory loss, language difficulty, poor executive function, behavior and psychiatric disorders, and declines in functional state (e.g., ability to engage in activities of daily living and self-care). Individuals with Alzheimer’s gradually lose the ability to remain independent due to these issues.

Rates of deaths due to Alzheimer’s disease remained mostly below the State of Florida rate up until 2015. The number of seniors in Charlotte County who died due to Alzheimer’s nearly doubled from 2014 (63 deaths) to 2015 (119 deaths), just slightly over the State rate. An additional increase occurred in 2016 (134 deaths).

Some studies suggest that Alzheimer’s deaths reported on death certificates might be underestimates of...
Health Status

the actual number of Alzheimer's deaths in the United States for a variety of reasons. For example, complications from Alzheimer’s, such as pneumonia, might be reported as the cause of death although the actual underlying cause of death, Alzheimer’s, was not reported on the death certificate.

According to Department of Elder Affairs calculations, there are an estimated 7,969 probable Alzheimer’s cases in Charlotte County’s 65+ population as of 2013 data. The number of Alzheimer’s cases is expected to continue to grow in the coming years across the nation as a whole.

Cerebrovascular Disease

The fifth leading cause of death for older adults in Charlotte County is cerebrovascular disease or stroke. A stroke, sometimes called a brain attack, occurs when the blood supply to part of the brain is blocked or when a blood vessel in the brain bursts. In either case, parts of the brain become damaged or die. A stroke can cause lasting brain damage, long-term disability, or even death.

According to data from the 2013 Behavioral Risk Factor Surveillance System (BRFSS), 8.6% of residents 65 and older have been told they had a stroke.

Deaths due to stroke in Charlotte County’s aging population has mostly remained below the State rate. In 2016, Charlotte County lost 132 residents ages 60 and over to stroke, and 116 in 2015.
Health Status

*Influenza & Pneumonia*

Pneumonia, an infection of the lungs, needlessly affects millions of people worldwide each year. The disease ranges from mild to severe, and in some cases, it can be fatal. The elderly are more susceptible to pneumonia than younger populations.

According to the American Lung Association, pneumonia has more than 30 different causes, with influenza being one of them. While only a small proportion of pneumonia deaths are influenza-related, both conditions should be avoided by seniors.

In Charlotte County, death rates due to influenza and pneumonia are higher than the State rate. In 2016, for example, the rate per 100,000 population of influenza and pneumonia deaths in Charlotte County (78.9) was considerably higher than the State rate (47.6). In Charlotte County, that rate amounts to 61 deaths, of which only one was listed as a combination of both influenza and pneumonia. Sixty deaths were attributed solely to pneumonia.

Fortunately, pneumonia can often be prevented. There are vaccines that help prevent infection by some of the bacteria and viruses that can cause pneumonia, such as the influenza (flu) vaccine, and the pneumococcal vaccine. The Centers for Disease Control and Prevention (CDC) recommend 2 pneumococcal vaccines for adults 65 years or older, given at least one year apart, as well as an annual flu vaccine. The CDC recommends that people 65 years of age and older should not get the nasal spray flu vaccine, the intradermal flu shot, or jet injector flu vaccine.

Data Source: Florida Department of Health, Bureau of Vital Statistics
Health Status

Survey results from the 2013 BRFSS indicate that 68.5% of Charlotte County residents ages 65 and over have received a pneumococcal vaccination, and 54.5% of that same population indicated that they had received a flu shot in the past year.

Unintentional Injuries

Reducing injury deaths, whether intentional or unintentional, is a Healthy People 2020 Leading Health Indicator, emphasizing its importance as a high-priority public health issue.

In 2016, 54 Charlotte County seniors died from causes related to unintentional injuries. Of these deaths, 22 of them were due to falls, and 12 were due to motor vehicle crashes.

Data Source: Florida Department of Health, Bureau of Vital Statistics

*Other & Unspecified Nontransport & Sequelae: This category includes a variety of diagnostic codes, ranging from exposure to inanimate mechanical forces (e.g. struck by falling object), pedestrian, pedal cycle rider, or motorcycle rider injured in transport accident, overexertion and strenuous or repetitive movements, or “late effects” (i.e. sequelae) of a previous condition.
Health Status

**Diabetes**

Diabetes is a disease in which blood glucose levels are above normal. When you have diabetes, your body either doesn’t make enough insulin to help glucose get into the cells of our bodies or can’t use its own insulin as well as it should. This causes sugar to build up in your blood.

According to the 2013 Behavioral Risk Factor Surveillance System (BRFSS) survey, 20.9% of Charlotte County seniors (ages 65 and over) indicated that they had been told they had diabetes. Another 7.0% of seniors indicated that they had been told they had pre-diabetes.

In the 60 and over population, diabetes accounted for 2.1% of all deaths in Charlotte County in 2016. While this is only a small percentage of all deaths in the County, diabetes can cause serious health complications including heart disease, blindness, kidney failure, and lower-extremity amputations.

The rate of deaths due to diabetes have declined in recent years in Charlotte County. For those ages 60 and over, the rate in 2016 in Charlotte County was lower than the State rate (62.1 Charlotte vs. 92.4 State).

Type 2 diabetes is associated with obesity. One in four Charlotte County seniors (ages 65 and over) identified as being obese (26.4%) in 2013, putting them at risk.

Data Source: Florida Department of Health, Bureau of Vital Statistics
Healthcare Access & Coverage

Accessing needed healthcare can be difficult without health insurance, transportation, and the finances to pay for prescriptions and other out-of-pocket expenses.

For seniors who are 65 or older, the federal health insurance program Medicare is available. Premiums are typically covered for individuals who worked and paid Medicare taxes for at least 10 years. For those who did not pay Medicare taxes, the individual can pay their own premiums.

On average, Medicare covers about half of the healthcare charges for those enrolled. Any remaining costs must be covered either with supplemental insurance, separate insurance, or out-of-pocket.

As of December, 2016, the Centers for Medicare & Medicaid Services reported that 57,071 Charlotte County residents were enrolled in original Medicare, Medicare Advantage, and/or other health plans. (There are approximately 61,826 residents in Charlotte County that are ages 65 and older, and would therefore qualify for Medicare.)

Medicaid is also an option for seniors who have limited income. As noted earlier in this document, 4,858 Charlotte County residents ages 60 and over are eligible for Medicaid based on limited resources, and 4,431 are considered Dual Eligible (both Medicaid and Medicare).

In the most recently published BRFSS report (2013), residents were asked about healthcare access and coverage. As noted in the chart below, the vast majority of those 65 and older have health insurance coverage as well as a personal doctor. Only 3% of that same population indicated that they had not seen a doctor in the past year due to cost.

While this same data was not available for dental care in 2013, the question was asked in 2007. Of those surveyed, 7.6% of seniors indicated that they could not see a dentist in the past year because of cost. This was lower than the State rate for seniors that same year (9.8%).

With regards to transportation as a possible barrier to accessing healthcare, the 2013-2016 Florida State Plan on Aging noted that 7% of Charlotte County’s population ages 60 and older live in rural areas. This amounts to approximately 5,100 seniors in Charlotte County.

Residents living in rural areas often have more difficult than those living in urban areas related to accessing need healthcare, primarily due to lack of transportation.

<table>
<thead>
<tr>
<th>Health Care Access &amp; Coverage, 2013 (unless otherwise noted)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adults with any type of health care insurance coverage</td>
<td>97.3%</td>
</tr>
<tr>
<td>Adults who have a personal doctor</td>
<td>92.3%</td>
</tr>
<tr>
<td>Adults who could not see a doctor in the past year due to cost</td>
<td>3.0%</td>
</tr>
<tr>
<td>Adults who could not see a dentist in the past year because of cost*</td>
<td>7.6%</td>
</tr>
</tbody>
</table>

*Data is from 2007; question was not asked in 2013

Data Source: Behavioral Risk Factor Surveillance System (BRFSS)
Community Input - Focus Groups

Overview

On behalf of Healthy Charlotte County, the Florida Department of Health in Charlotte County conducted five focus groups in April and May of 2017. Members of the Positive Aging subcommittee of Healthy Charlotte County assisted in identifying locations for the focus groups that spanned across the county to allow access to a variety of residents. Individuals were recruited to attend the focus groups to discuss issues like access to healthcare, barriers to receiving healthcare and the most pressing health issues of residents.

A focus group facilitator and a note taker conducted focus groups in Englewood at Tringali Recreation Center; in Port Charlotte at the Cultural Center, Villa San Carlos, and Bayfront Health Port Charlotte; and in Punta Gorda at The Verandas. Each session lasted between one and two hours.

Thirty-five individuals attended the focus groups, and gave insight into their impressions of healthcare in Charlotte County. This insight is compiled below as qualitative information that can reveal factors affecting the views and sentiments regarding healthcare services in Charlotte County. This summary of their responses is reported without judging the veracity of their comments. Focus group questions were compiled by the Florida Department of Health in Charlotte County and approved by the Positive Aging subcommittee. Flyers were distributed throughout the county to recruit participants.

Focus group participants were asked to fill out a brief demographic survey prior to the start of the focus group. While the focus groups were aimed at Charlotte County residents, a few participants lived just over the county line but primarily utilize Charlotte County services. Three had North Port addresses (Sarasota County), and one had a Lake Suzy address (DeSoto County). Other participants lived in the 33952 zip code (15 participants), 33950 (6 participants), and 33980, 33948, 34224, and 33983.

Eight participants identified as being between the ages of 60 and 69; sixteen participants were 70-79, and eleven were age 80 or older. Seven participants were male; twenty-eight were female. Two participants identified themselves as Hispanic or Latino. Twenty-nine were white, four were black or African American, one was Asian, and two identified as some other race. Individuals could select more than one race. Eight participants indicated that they are currently married, 16 were widowed, seven were divorced, and three had never married. One participant indicated that he or she is responsible for a grandchild or grandchildren.

When asked to describe their living situation, 14 indicated that they lived in a home that they own, 15 indicated that they were in an apartment or home that they rent, one was living with a relative in their home, and five were living in an independent living unit, other than senior housing or an age-restricted community.
Community Input - Focus Groups

It should be noted that the demographics of the focus group participants do not entirely reflect the demographics of the elder population in Charlotte County. (e.g. focus group participants included a higher percentage of seniors ages 80 and over than in the general senior population, a higher percentage of seniors who identified as black or African American than in the general senior population, and a lower percentage of males than in the general senior population)

After an introduction and explanation of the meeting format, 15 questions were sequentially presented to participants for discussion. The same format and questions were used at all five sessions. The Moderator’s Guide for the focus groups, including the introduction and all the questions, is available in the Appendix of this report.

As an icebreaker, the participants were asked to give their name and state how long they have lived in Charlotte County. Answers ranged from three months to 56 years. The average (mean) answer was 18 years, with 15 years being the most common response. One participant identified as a seasonal resident.

Key Findings

General Perceptions

Focus group participants were first asked to share their general thoughts on healthcare resources for older adults in Charlotte County. Participants spoke broadly about the resources that are available. Several residents stated that they had difficulty finding local healthcare services that accept Medicaid. Others stated that the expense for some services, particularly dental care, was unaffordable on their limited incomes. One resident stated, “On our income, it’s a balance between groceries or do whatever for my health.” Two residents stated that they have considered taking out bank loans for dental work.

One resident stressed the importance of seeking out resources, for those who are internet-savvy, stating, “I find that you have to be your own advocate.” Another stated that, “They have a lot of resources in Charlotte County.” One resident stated, “Millennium is very active in this area, and they do a good job. They offer a lot of services.” Another resident stated that there are, “a hundred and ten different hearing aid places.” While many residents felt that there are ample doctors in the county, one resident noted that doctors do not stay in the county for long, noting, “just the minute you get attached to one, they leave town.”

Other participants felt differently. Of local healthcare resources, one resident stated, “I think they are very limited for the elderly.” Another stated, “They’re terrible. For seniors, we have no teeth, we have no hearing aids. It’s a Medicaid issue, I suppose.” One resident expressed frustration in locating a nearby specialist who works on pacemakers, explaining that transportation to an out-of-county specialist was an issue. Other residents expressed similar issues with transportation. One resident noted that calling Charlotte County Transit was frustrating, as it often takes a long time to get through to anyone to schedule an appointment, and sometimes no one ever
Community Input - Focus Groups

picks up the call.

Remaining Healthy in Charlotte County

When asked if Charlotte County is a good place to live if you want to remain healthy, residents had mixed opinions. Many residents stated that there are many opportunities in the area to get out and be active; physically and mentally. One resident stated, “There’s a lot of gyms here to keep healthy. There’s a lot of senior activities.” Another resident stated, “There’s so many opportunities to meet people and join clubs.” Another stated, “There are a lot of churches in town.” Churches were identified as good places to find people you can talk to and people who can help you find resources. One focus group participant added, “The Cultural Center is at the top of the list in helping people in this county.”

“There’s so many opportunities to meet people and join clubs.”

The small-town feel of Charlotte County was cited as a less stressful place to live. One resident stated, “From an overall health standpoint, Charlotte County is pretty good.” And another added, “This is a good place to live. People are friendly and accommodating.”

However, others felt that Charlotte County was not necessarily the best place to live if you are focused on your health. It was discussed in one focus group that Charlotte County seems to have fewer resources than other, larger, counties because there is a smaller overall population. One participant stated that the ability to remain healthy in Charlotte County, “depends on your health insurance plan.”

Availability of Healthcare Services

Participants were asked where they go to receive regular healthcare. All focus group participants stated that they have a primary or family doctor. Many indicated that they see a primary care doctor at Millennium Physician Group. Others mentioned seeing a private doctor or Family Health Centers of Southwest Florida for their healthcare needs. None of the participants indicated the use of walk-in clinics or local Emergency Departments for their regular healthcare needs.

When asked how well current services meet their needs, participants offered a range of opinions. Some stated the services are adequate and are meeting the needs of area residents. One focus group participant stated, “Anything you need is available.” Others stated that they have had difficulty in finding a doctor that will accept their insurance, and that healthcare in general “is just cost-prohibitive.” One participant added, “We need more affordable dentists.”

Participants were asked if they ever go outside the county to receive healthcare. One individual stated that leaving the county is unnecessary as, “There’s a big concentration of doctors in this area.” While many participants stated that they had never gone outside Charlotte County for healthcare services, a few participants indicated that they had. One individual stated, “We have (gone outside the county) for dental. It’s an expensive thing. We try to go where we can afford dental care.” One participant stated that he utilized the services of a recommended surgeon in Fort Myers to have a tumor removed. Another participant stated
Community Input - Focus Groups

that she chose to see a recommended heart doctor in Venice. It was stated that there is better orthopedic care in Lee County, and that specialty services related to urology and oncology were more available in Sarasota County. One ‘snowbird’ (seasonal resident) stated that she chooses to get her annual check-up in Charlotte County before traveling back up north each year.

Health Resources and Barriers

In order to identify resources that were felt to be useful by older adults in Charlotte County, participants were asked to name things that have helped improve or maintain their health. Things that promote physical activity were noted by many, specifically the YMCA, local parks, and classes such as Tai Chi and Zumba. Others stated that having friends, keeping a positive attitude, and having regular checkups with a primary care doctor were helpful in maintaining health. One participant stated that Virginia B. Andes Volunteer Community Clinic was helpful in providing prescription drugs while waiting for Medicare to kick in. Another participant stated that the gym by the Cultural Center is helpful. One individual stated that Silver Sneakers has been beneficial.

Barriers to maintaining or improving health were discussed. The most mentioned barrier was transportation. One participant stated that, “Public transportation is a problem.” Another individual stated, “If you do not drive and you do not call Dial-A-Ride at least a day or two before, you’re walking.” It was noted at one focus group that although the Cultural Center offers limited transportation assistance as well, they cannot accommodate individuals in wheelchairs. One participant added that there is a need for more sidewalks and more lights on the street for the instances when someone intends to walk.

As transportation was discussed in more detail, it was noted that scheduling an appointment for Charlotte County Transit is often a barrier in itself. One participant noted, “I have to plan ahead, and a lot of times life does not let you.” Another individual stated that even when scheduling an appointment ahead of time, “you’re on the phone forever.” Another participant suggested that when there are same-day transportation needs, the best option is to call a taxi.

“Public transportation is a problem.”

One participant stated that the Companion program has been helpful. Another stated that SCAT crossing the county line will be helpful for some residents. One participant stated that Sunshine Medicaid offers transportation assistance. One individual suggested that a fixed route system would make an impact on transportation needs for seniors.

Multiple participants noted that locating doctors and dentists who will accept their Medicaid has become a barrier to accessing healthcare, as well as finding ways to pay for the costs that insurance doesn’t cover. One individual stated, “I don’t like co-payments.”

Participants were asked what they need in order to improve their health. Responses to this question varied greatly. Health education was suggested by one participant, and assistance with understanding health insurance was suggested by another. Multiple participants stated that assistance to help pay for medical costs, perhaps through
government funding, would be helpful. One individual stated that, “pharmaceuticals are very expensive.” A couple participants stated that they needed help accessing healthy food and understanding how to eat healthy. Multiple participants suggested that individuals are primarily in charge of how healthy they are. One participant suggested it is helpful to have, “positive thinking.” Another stated, “I think it’s all a personal thing. You have to be in charge of your own health.” Another added, “There’s all kinds of free things; you just have to seek them out.”

Other problems and barriers discussed included issues related to seniors living alone. One individual noted that there is an issue with seniors falling and not having someone to check on them and assist when it happens. One participant stated, “A lot of us don’t even know our neighbors.”

Aging in Place

Focus group participants were asked if it is possible to grow old in Charlotte County and stay in their own homes. Several participants stated that Charlotte County is an ideal place for seniors wanting to stay in their own homes. One participant noted that real estate taxes are affordable in Charlotte County. Another stated that housing costs are reasonable. One participant stated, “Charlotte County is as affordable or more-so than other areas.” Another stated, “Charlotte County is a diamond in the rough.”

Others noted that as many Charlotte County residents have moved here from other parts of the country, there are often issues related to a lack of family support. One participant stated, “You don’t have that support system intact.” One individual stated that while the family support system is not here, friendships have filled that gap. It was suggested by another participant that there need to be more opportunities for people to come together to connect.

Pressing Healthcare Needs

Each focus group was asked to list the most pressing healthcare needs for seniors in Charlotte County. The most noted responses were transportation, lack of information on health, healthcare, and other related resources, dental care, paying their bills (including rising rent prices), hearing aids, and affordable healthcare. Other responses included vision care, heart disease, immobility, cancer, Emergency Department care, access to affordable healthy foods, companionship, doctors that accept insurance, and understaffed nursing homes.

After identifying what each group felt to be the most pressing healthcare needs, participants were then asked for suggestions on working on these needs. Suggestions related to transportation included working with faith-based groups and volunteers to organize transportation, better staffing the Dial-A-Ride scheduling system so that caller can speak to someone more promptly, and offering a fixed route system, or offering separate call-in centers for different transportation needs (e.g. one call center for medical appointments; separate call center for shopping outings, etc.). One participant noted that Charlotte County Transit would be great if it were more available.

Lack of information was identified as a pressing issue for seniors in Charlotte County.
Community Input - Focus Groups

County. Focus group participants offered the following suggestions on that topic: creation of newsletter on health and healthcare updates in the County, more health fairs that offer health screenings and resources, partner with Publix and other grocery stores to promote health fairs, increase participation in Senior Circle at Bayfront Health, create a hotline number for seniors to call with a live person they can ask questions to, and create a website with information for seniors that is easy to navigate.

Other suggestions included bringing a concierge model to Charlotte County, hiring more healthcare personnel, and providing more training to the existing healthcare personnel.

Focus group participants were asked to identify what roles people in the community play in improving the overall health of older adults in Charlotte County. Volunteering and “looking out for each other” were the most common responses. One individual noted that, “Volunteers support so many things in this community.” Another individual stated, “You need for neighbors to be aware of people not leaving their house.” Advocacy was another suggestion for citizens. One person offered the suggestion to, “Complain a lot,” and another said it was important to put pressure on legislators.

Additional Comments

At the conclusion of each focus group, participants were invited to provide any additional feedback they had on health and healthcare for older adults in Charlotte County. This feedback included the following:

- Come out with better ideas for promotional / themed health fairs
- Activities such as drama/acting, or karaoke can draw people out for fun while benefitting their health
- Not everyone reads the newspaper, services aren’t always known
- Dissatisfied with hospital care
- Would like access to water aerobics in the Punta Gorda area
- Could use more education on the signs of Alzheimer’s
- Heard there is an issue with drug abuse among seniors
- Affordable housing is an issue across the nation
- Glad to read in the newspaper that Charlotte County has eliminated the homeless Veterans problem
- Alzheimer’s care is expensive, leading many to try to deal with it in their own homes. Spouse becomes caregiver. If both end up in a nursing home, but potentially in different units, how do you separate a couple who has been together 60 years? And how do you afford it?
Community Input - Surveys

Overview

Members of the Positive Aging subcommittee of Healthy Charlotte County collaborated together in the development of a community survey to help identify health-related gaps in the community and suggest possible solutions. Questions included what health problems each respondent has dealt with in the past year, what are the most important health concerns for Charlotte County’s senior population, and what is needed in the community to improve the health of senior residents. The full survey questionnaire can be found in the Appendices of this document.

Subcommittee members distributed the survey throughout the community, including at congregate meal sites hosted by Friendship Centers, as well as having surveys mailed by Charlotte County Human Services to a sampling of area residents. A link to an online version of the survey was sent out broadly in the community via email distribution lists, as well as on the Healthy Charlotte County Facebook page. However, all of the surveys completed were done on paper and none were completed online.

One hundred and thirty-two surveys were completed. Not all respondents answered every question, which results in some questions not having the full 132 responses. Most questions allowed respondents to select more than one answer.

Just over 80% of respondents were female and 19% were male. The majority of respondents identified as age 80 or older, with just under 20% in the 70 to 79 age range, and 30% identifying as 60 to 69.

The input from these surveys is compiled below.

Key Findings

Health Issues

Over the last 12 months, have you had a problem with any of the following?

Survey respondents were asked to identify any problems they have had over the past 12 months. They were given the option to identify each problem area as either a Major Problem, a Minor Problem, or No Problem. Does not apply was also an option.

Physical health, fear of falling, loss of balance or strength, and transportation were selected most frequently as Major Problems (31 to 39 respondents each).

Physical health, loss of balance or strength, financial problems, and fear of falling
Community Input - Surveys

Over the last 12 months, have you had a problem with any of the following?

- Your Physical Health
- Fall or Fear of Falling
- Loss of Balance or Strength
- Having Adequate Transportation
- Performing Everyday Activities such as Walking or Bathing
- Having Financial Problems
- Feeling Lonely, Sad, or Isolated
- Providing Care for Another Person
- Having Too Few Activities or Feeling Bored
- Affording the Medication That You Need
- Getting the Health Care That You Need
- Nutritional Needs
- Affording Your Utilities
- Housing that Meets Your Needs
- Dealing with Legal Issues
- Being a Victim of Crime

Respondents were asked to identify what they feel to be the five most important health concerns for older adults, making it the most selected response for this survey question.

Dental Problems was selected by 41.7% of survey respondents, and Access to In-Home Services was selected by 40.9%.

The graph on the next page shows a breakdown of the most selected responses. Other options not listed included:
- Access to Specialty Care (22.8%)
- Mental Health / Depression (22.8%)
- Access to Primary Care (22.0%)
- Cancer (19.7%)
- Flu / Pneumonia (10.2%)
- Grandparents Raising Grandchildren (7.1%)
- Substance Abuse (3.1%)

Survey respondents were also given the
Community Input - Surveys

Five Most Important Health Concerns for Older Adults in Charlotte County

- Affordable Prescriptions: 47.2%
- Dental Problems: 41.7%
- Access to In-Home Services: 40.9%
- Affordable Housing: 39.4%
- Alzheimer’s/Dementia: 34.6%
- Diabetes: 34.6%
- Arthritis: 32.3%
- Hearing/Vision Loss: 30.7%
- Heart Disease/Stroke: 30.7%
- Nutrition/Food: 26.0%
- Isolation/Loneliness: 23.6%

choice to select “Other”. Six respondents made this selection, and wrote in the following comments:

- activity programs
- Sjogren’s syndrome support
- desperate for more help at home with Alzheimer’s- for husband
- getting/prescribing needed pain meds for elder with chronic pain. not many doctors will just do meds
- kidney problems
- Transportation for those in too much pain or sick to take the regular bus. The regular bus can pick you up up to 1 1/2 hrs before your appt. then you wait for your appt and return pickup.

If you have ever had to leave the county for health services, what type of services did you need? (Please select all that apply.)

Respondents were asked to identify situations when they sought health services outside of Charlotte County. Of those who responded to this question, 74.5% indicated that they had never used out-of-county health services.

The remaining respondents indicated that...
Community Input - Surveys

they had left the county for services such as Surgery (18.4%), Vision / Eye Care (17.3%), and Dental Care (9.2%).

Survey respondents were also given the choice to select “Other”. Eleven respondents made this selection, and wrote in the following comments:

- cancer treatment at the VA
- Lee county VA clinic
- because I have Prestige as my “medicaid” and there are only a few doctors that take prestige
- implants- sjogren’s syndrome support services
- cancer care follow-up
- Care givers
- heart MRI
- children and families North Port
- spinal surgery
- cardiac who accepted my insurance
- VA Services at Cape Coral
Community Input - Surveys

Health-Related Services

Survey respondents were asked to indicate their perception of the availability of services or opportunities in Charlotte County that might improve the health of local seniors. A list of 13 items was given, with the options of Agree, Neither Agree or Disagree, Disagree, and Don’t Know.

Topping the list for services or opportunities that survey respondents felt are available in the county included Cultural Opportunities (71.6%), Availability of Affordable Quality Health Care (59.1%), Availability of Information About Resources for Older Adults (57.6%), Recreation and Fitness Opportunities (56.4%), and Volunteer Opportunities (56.4%).

Overall, there were significantly fewer items identified by survey respondents as not being available in Charlotte County. However, the top services or opportunities where survey respondents “disagreed” on their availability were User Friendly Public Transportation (21.3%), Employment Opportunities (20.5%), Affordable Quality Housing (18.3%), and Availability of Affordable Quality Health Care (14.8%).
Survey respondents were asked to rank a list of services on the likelihood that they would use them, if available. Nearly 60% of respondents stated that they would be Likely to use a telephone helpline for information or referrals (2.4% stated that they Currently Use This Service). Fifty-two percent of respondents stated that they would be Likely to use a service that offered help with chores around the house, such as light housekeeping or cleaning (25.6% stated that they Currently Use This Service).

When it came to financial planning and counseling, 42.6% of respondents stated that they were Unlikely to use this type of service. Slightly fewer (40.8%) stated that they were Unlikely to use mental health counseling services or an adult day care program (39.8%).
Community Input - Surveys

Community Suggestions

The survey also offered survey respondents the opportunity to provide suggestions on how the community could work to improve health and healthcare for seniors in Charlotte County.

One question on the survey included specific options for survey respondents to choose from, while other questions were designed to be open-ended, allowing respondents to freely articulate their thoughts and opinions on how best the health of older adults in Charlotte County could be improved.

Several options were provided on the survey for improving the health of older adults in Charlotte County.

Of these options, the most selected response was transportation (79.8%), followed by safe places to walk/play (45.4%), healthier food choices (41.2%), and additional health services (38.7%).
Survey respondents were also given the choice to select “Other”. Eight respondents made this selection, and wrote in the following comments:

- recreational activities for social action and information available more
- help to maintain outside ex: wash windows, clean and cut shrubs and flowers, etc
- weekend home health aide, nobody gives showers on weekends or holidays
- funding
- to expand the mealsite programs to include some activity programs beside playing bingo and card games. I personally have invited many friends who visit only once saying there is no activity. They want places that go out on day trips and do other things stimulating
- They need to be able to supply more in home care for Alzheimer’s people
- more doctors that take our insurance
- more doctors that take my insurance card
Community Input - Surveys

Survey respondents were given the opportunity to provide specific suggestions for improving the health of older adults in the community. Seventy-six responses were collected, covering a range of issue areas. Some responses included more than one issue area.

Specific comments regarding transportation included the following:

- provide reliable, safe transportation at reasonable cost
- improve available public transportation
- mobility is a problem as we grow older. we need a transit system that meets a variety of needs, that do not require long waits, that increase, maybe by establishing special locality busses- availability in areas not adequately covered, that make the streets safer for pedestrians
- more flexible transportation that is affordable

After Transportation, In-Home Services was the next highest area of responses (10). Comments regarding In-Home Services included the following:

- make in home services more affordable
- require home health agencies with the county contracts to provide weekend care. home inspections to detect remediate black mold. help repair leaky faucets, toilets that contribute to mold. help with hvac air filters, laundry, and grass which are tripping hazards, basically keeping a senior in their own home as long as possible
- In home screening services, and added home support for healthy issue on arthritis

The areas of Affordable Housing / Affordable Living and More doctors / More appointments both received 9 responses each. Comments included the following:

- quality and affordable home help
- a nursing home for those of us who can not afford one without losing everything we have
- Need more low-income housing for all elderly people in Charlotte, and not fill them up with snowbirds seniors
- more doctors that specialize in elder care
- more doctors that take medicare
- stop the doctors from over booking
- Give more doctors that have time to listen to your problems. More time than 15 minutes

A full listing of all responses to this question is available in the Appendices.
Community Input - Surveys

What is the most beneficial improvement Charlotte County could make to improve the health of older adults over the next 5-10 years?

- Transportation, 26
- In-Home Services, 10
- Affordable Housing / Living, 9
- More doctors / More appointments, 9
- Food / Nutrition, 6
- Other*, 5
- General Help for Seniors, 4
- Affordable Healthcare, 4
- Health Education/Classes, 3
- Recreation, 3
- Prescription, 3
- Dental / Vision, 2
- Isolation, 2
- Information on Resources, 2
- Hospital Care, 1
Community Input - Surveys

The survey concluded with the option for each survey respondent to provide additional comments regarding healthcare needs for older adults in Charlotte County. While not all survey respondents chose to offer up additional comments, those who did had a lot to say.

Thirty-one respondents provided the following comments:

- need for affordable assisted living - state to support subsidize insurance costs to cover medicare gaps
- Charlotte Co. is blessed with fine doctors and hospitals. However, cost is a major factor. Affordable supplemental insurance to fill Medicare gaps is a crucial need
- transportation to and from doctor appointments is crucial. assistance with medicare gap insurance
- more nutrition facts so good food not drugs are the road to good health
- more attention and concerns
- transportation
- keep up the good work
- There are still homebound elders in Charlotte County on long wait lists. are there regulations that keep them on wait lists that could be modified?
- public transportation to go to the Dr. appointment
- meal preparation in home, assistance with chores.
- The most worry, for those adults, didn’t get healthcare. I hope the government will improve it
- affordable health and living
- too many persons driving, bicycling, walking, just don’t care, the people just don’t CARE, drive careless (phones), ride bikes all over everywhere and don’t walk against traffic.
- illness and life support
- county charges too much for water use. too hard to pay bills
- provide nutritious meals x2 per week
- more choices of healthcare personnel, health care agencies
- more awareness of available benefits
- senior healthcare needs to be prioritized over the sheriff’s shiny new helicopter which Charlotte County doesn’t need
Community Input - Surveys

- some of the home health care aides they don’t respect the need of the patient they need more education

- very happy to have Charlotte County Transit as is only way to go to doctors appointments

- recently I had to have a tooth pulled and went to the health department (Loveland) and had dental ins., but was put through “financial screen’. The clerk wouldn’t believe my most recent statement from the SSA so I had to give her copy of my bank statements. No wonder that there was nobody (1 or 2) in the waiting room! It’s embarrassing enough to admit you not ‘well off’.

- foot care

- in home medical alert for adults that live a home or home alone most of the time

- more access to in home health care

- Access for more mobility devices like chairs, walkers, and bathroom aids

- I have good health care

- Need health insurance they can afford - most senior not looking for hand-out just afford insurance

- Healthcare is lacking for the poor and the elderly.

- more dental facilities

- more doctors
Community Input - Key Leader Interviews

Members of the Positive Aging subcommittee conducted twelve key leader interviews between May and September of 2017 to gain the perspective of those who work in the health and healthcare field on the most pressing health needs of older adults in Charlotte County. The Positive Aging subcommittee developed an interview tool (available in Appendix D of this document) which was used consistently across each interview. The subcommittee identified key leaders that live and/or work in Charlotte County from across the healthcare community. Responses to questions were made anonymously, but the full list of interviewees is available in Appendix E.

The insight gained from these interviews is summarized below.

The leaders interviewed were asked how long they have lived and/or worked in Charlotte County. Answers ranged from two and half years to more than 40 years. The average length of time that a key leader has lived or worked in Charlotte County is 27 years.

Interviewees were asked to comment broadly on healthcare for older adults in Charlotte County. Eight interviewees felt that healthcare services are available for the aging population in Charlotte County. One comment was, “There are an appropriate number of providers available.” Another interviewee noted that Charlotte County offers four large hospitals with specialty care for the aging population, along with rehabilitation and physical therapy. One interviewee stated, “Services are available. I think that seniors have more of a difficult time navigating their insurances.”

Others, however, were less positive in their perception of healthcare availability for seniors. One interviewee noted, “Although there seems to be a lot of healthcare services available in Charlotte County, a portion of the population is underserved either because of noncompliance, finances, family support or other factors.” One interviewee stated, “There’s not enough. There’s not enough understanding of the unique healthcare needs of older adults, especially the old-old.”

Please comment on your overall perspective on the general health of older adults in Charlotte County.

Another interviewee felt that currently the healthcare services that are available in Charlotte County are meeting the needs for older adults, however, it was noted that “we need to prepare for the increase in population.” Interviewees were then asked to comment on their thoughts on the general health of the older adult population in Charlotte County. The overwhelming consensus among the interviewees was that there are,
Community Input - Key Leader Interviews

“many older adults in Charlotte County in great physical health.” One interviewee noted that many seniors in the community are very active and engaged in outdoor activities. Another stated, “I think that Florida lifestyle and increased activity in general have a positive influence on the health of our population. Those seniors who tend to stay more active and involved seem to do better than their counterparts up north.”

However, there remains a small population of older adults who lack the resources and/or education to maintain that same level of great physical health. One interviewee noted that retirees in Charlotte County who are lower income and can access Medicare and Medicaid are in the worst health, as well as those who are part of the working poor who are uninsured or underinsured. It was stated that these individuals, “only react to bigger health issues and don’t often seek out wellness care. Because of Virginia B. Andes Clinic, some of these people actually have access to some healthcare. However, this group in general is in poorer health.”

Two interviewees noted that isolation is a concern for the general health of older adults in Charlotte County. Ninety-five percent of the clients seen by one individual are single women whose husbands have passed. It was stated that these clients are, “very frail.” Another interviewee expressed concern for older adults who live alone and have no family nearby to check on them to identify small issues or symptoms before they become, “chronic, debilitating, and progressive.”

It was suggested by three interviewees that more education and outreach aimed at providing health information to this population would be beneficial.

Where do you think the older adults in Charlotte County go to get needed health information?

Interviewees were asked to identify avenues that older adults use to obtain health information. Most interviewees felt that a large percentage of the older population in Charlotte County is accessing health information fairly well from a variety of sources: the internet, primary care physicians, specialists, newspapers and magazines, friends/family, and even social media. One interviewee noted that, “primary care physicians have commented that older patients understand illness issues better than ever before.” Another interviewee noted that, “some of our seniors are very internet-savvy.”

A couple of interviewees felt that some of the older population is not necessarily getting the most reliable information through some of these channels, and don’t obtain reliable information, “except through doctors of clinics, often through emergency rooms.” Another interviewee noted that health fairs are not an effective method for disseminating health information to this population.

What do you think are the most pressing healthcare needs in Charlotte County for older adults?

Five interviewees stated that transportation
Community Input - Key Leader Interviews

is the most pressing need associated with good healthcare for older adults. One interviewee stated, “There are two populations, mobile and not mobile. The most pressing need for the non-mobile is getting to healthcare providers.”

Four interviewees stated that access to affordable medications is a pressing need. Three interviewees stated that access to basic health information and the importance of follow-up care, medication management, and maintenance of a healthy lifestyle are all pressing needs.

Dementia and Alzheimer’s care were mentioned by two interviewees as a pressing need. Another two interviewees stated that affordable healthcare was a pressing need.

Other needs mentioned included affordable adult daycare, home healthcare, stroke education, fall prevention, affordable health insurance, diabetes management, isolation, mental health care, activity centers to keep seniors active, Hepatitis C treatment, and assistance with activities of daily living (light housekeeping, grocery shopping, laundry, personal care, etc.).

What do you think are the essential components of a quality healthcare system for a community like Charlotte County, that has a high population of older adults? Are these components currently in Charlotte County?

The most frequently mentioned components of a quality healthcare system included coordination of care, public transportation, affordable housing, mental and behavioral health services, and nurse navigators to assist in coordination of care.

Several interviewees stated that they felt coordination of care was a strength in Charlotte County. One interviewee stated that having “connected hospitals” helps, and that being a small county is beneficial as well because “everybody knows each other, which helps to coordinate care.” One interviewee felt that coordination is not currently at the level it should be. The interviewee stated that there are delays between primary care physicians and specialists, and that lab work does not always get to the right place due to a lack of coordination.

"There’s a great lack of gerontologists."

Other components of a quality healthcare system mentioned included more senior activity centers, diabetes treatment, coronary heart disease treatment, access to emergency care, Geriatric certified physicians, volunteer networks, education, resource specifically for the homeless, and assistance with activities of daily living. Most of these components were felt to be limited in Charlotte County. One interviewee noted, “There’s a great lack of gerontologists.”

An additional sentiment from two interviewees was that many older adults would benefit from some extra time from their primary care physicians, indicating that a ten-minute doctor visits is insufficient. One interviewee stated that many seniors, “need some TLC from their healthcare providers.”

For each of the following types of services share any impressions you have about them, particularly anything you know about how these services are available to all older adults in Charlotte County.
Community Input - Key Leader Interviews

County and whether there are any obstacles to receiving these types of services:

Primary Care

Most interviewees stated that they felt primary care to be readily available in Charlotte County. Two interviewees stated that access to these services was sometimes difficult for seniors who are uninsured or underinsured. Two interviewees stated that transportation can make this difficult to access for some older adults. Three interviewees noted that while primary care services are available, it can take some time to get in. One interviewee stated, “Timely access is often an issue as many providers are booked well in advance with limited same-day availability.”

Dental Care

Most interviewees stated that they felt that options for receiving dental care to be readily available in Charlotte County. It was noted, however, that the cost for dental services is a prohibitive factor for many older adults in the county. One interviewee noted that, “Medicare doesn’t cover that.” Another interviewee stated, “The obstacle there is money. Dental insurance for older adults is expensive.” One interviewee explained that many low-income seniors travel to Fort Myers to utilize their clinic for dental services. Another interviewee stated that many go without treatment because they cannot afford it.

“Dental insurance for older adults is expensive.”

Specialty Care

Most interviewees stated that they felt a wide variety of specialty care providers are available in Charlotte County. One interviewee stated that, “We’ve got all kinds of specialty care services here in Charlotte County.” Another interviewee stated similarly, “Charlotte County has some good specialty care.”

However, two interviewees noted that older adults enrolled in Medicare Advantage plans have fewer options available to them. One interviewee mentioned hearing that some individuals have had to travel out of county for specialty care.

Mental Health Care

Most interviewees felt that the need for mental health services exceeds the available services in Charlotte County for older adults. One interviewee stated, “Unless you’re in crisis, there’s a waiting list.” Another interviewee noted that there is a need for, “more outpatient mental health access for seniors.” Two interviewees noted that the stigma associated with mental health issues is very strong in the older population, and may decrease their willingness to seek out these services.

Of services that are currently available, one interviewee stated that Charlotte Behavioral Health Care offers “top-notch” services.
Community Input - Key Leader Interviews

Substance Abuse Treatment
Interviewees were divided on whether or not substance abuse treatment is fully available to older adults in Charlotte County. One interviewee stated, “I know that Charlotte Behavioral Health Care does amazing things, but I think the need is stripping the resources.” Another interviewee noted that, “substance abuse treatment is limited for the entire population of Charlotte County.”

Emergency Care
Most interviewees felt that emergency care is readily available for older adults in Charlotte County. One interviewee stated, “The hospital EDs do a great job at what they do, to provide emergency, acute care.” It was noted that both Emergency Medical Services and Emergency Departments do not refuse treatment to anyone. One interviewee noted, “Everybody is treated with the best care.”

One interviewee, however, stated that although there are several Emergency Departments in the area, “they are often overcrowded and lack bed space for the patients needing to be seen.”

Hospital Care
Responses were mixed when it came to discussing the availability and quality of hospital care. One interviewee felt that there is, “good quality care at the hospitals.” Another interviewee expressed a desire for upgraded hospital facilities, but overall felt that, “the care is good.” Another interviewee noted that although hospital care is available for all seniors, the facilities, “are restrained by providing anything past the acute needs of the patient.”

Those who felt that hospital care in Charlotte County for older adults is currently insufficient noted that there is more need than availability. One interviewee stated, “We need another hospital.” Another interviewee noted, “there seems to be a perpetual shortage of bed space and nursing staff. Patients are often placed in holding areas, hallways, and other non-patient room settings.”

Hospice Care
Most interviewees felt that hospice care is available for older adults in Charlotte County. One interviewee noted, “I think it’s available. The barrier is hesitancy to call on that care when it’s needed.” Another interviewee stated, “In season we have sufficient hospice volunteers.”

Another interviewee noted that, “This service is probably underutilized, as many patients/families are just not ready for end of life discussions. There also seems to be a hesitation on the part of the primary care physician to address this topic with patients/families.”

Are there other types of services that older adults in Charlotte County have difficulty accessing?
Of the services mentioned that older adults may have difficulty accessing, those most mentioned were companion programs, transportation, affordable home healthcare services, mental health services, and dental care.

Other services mentioned were respite care, hearing aids, glasses, and access to adequate nutrition. One interviewee stated, “Lack of transportation can lead to nutrition deficiencies.” Another interviewee noted, “It is not the difficulty in access that is the issue. It is the older adults’ lack of knowledge of services available to them.”

Are there services that older adults in Charlotte County must go outside of the county to receive?

Most interviewees felt that traveling out of the county for services is typically unnecessary. However, others felt that services such as dental care, oncology services, organ transplantation, and trauma services are more available outside Charlotte County. One interviewee told of multiple clients with Medicaid that had to travel to Naples for oncology services. Another interviewee stated, “It is also my understanding that some of the managed care providers require utilization of certain specialty providers that may or may not be in our area.”

Are there areas/neighborhoods in the County where older adults have a particularly difficult time accessing services?

When asked if there are areas in Charlotte County where older adults have a more difficult time accessing needed health services, the following areas were mentioned:

- Parkside
- Grove City
- Charlotte Harbor
- Englewood
- Paradise Mobile Home Park

Explanations for why these areas posed a problem for accessing healthcare were either that they are mostly inhabited by low-income individuals, or that they pose an issue for those with limited transportation options.

We often hear that transportation is an issue that impacts accessing needed health care. Is this something that you have seen in the community?

Although transportation came up when discussing specific services, interviewees were given the opportunity to discuss issues related to transportation more fully. One resident stated, “I think we need a bigger transportation system to handle the amount of residents we have.” Another interviewee stated, “Transportation is an issue, making it hard for seniors to get services that are available.”

Another interviewee noted, “Many patients utilize the Emergency Department for their non-emergent medical care needs because they do not have transportation, but utilize 911 for emergency transport.” Three interviewees stated that the current public transportation options in Charlotte County...
Community Input - Key Leader Interviews

are limiting to older adults as they require advance scheduling and often involve lengthy wait times, which can be difficult for frail and/or ill individuals.

One interviewee, expressing a more positive perception of the available transportation in Charlotte County, stated, “Those who depend on shuttle actually seem to enjoy the camaraderie experience with other riders.”

Of all the issues and services we have discussed, which do you think is the most important health care issue for older adults?

After discussing all of these areas of concern, each interviewee was asked to identify what he or she felt was the most important health issue for older adults in Charlotte County.

Four interviewees stated that access to healthcare is the most important issue. One interviewee stated more specifically that the issue is, “access to a doctor or specialist with minimum wait time.”

Two interviewees felt that affordable medications is the most important issue. Another two interviewees stated that mental health is the most important issue. Both of these individuals expressed a desire for more services related to general mental health issues (e.g. depression, grief), not necessarily more crisis services.

Other important issues mentioned included affordable healthcare, affordable home healthcare, nutrition, socialization/isolation, management of chronic conditions, and assistance in navigating the healthcare system.

What actions are necessary to address this issue? Who do you think should take responsibility for addressing this issue?

As the areas of concern identified by the interviewees were varied, so, too, were the suggestions for actions to take and the primary groups/agencies to take responsibility.

Below are some of the responses.

• “One group cannot do it. It’s got to be considered by the public to be a priority.”

• “Together Charlotte is doing the good work of focusing in on the who and how.”

• “More of a set bus route, similar to SCAT. Somebody running the bussing better; seems to need better communication.”

• “Community efforts to address helping older adults manage healthcare, hospital partnerships with community agencies, etc.” “Better inform residents on what is available affordably.”

• “Outreach. Training volunteer. Program access. The funding has to be there.”

• “Connecting them with a healthcare advocate, someone who can help them through this complicated and ever-changing healthcare maze.” Regarding who should take responsibility, this interviewee suggested it should be, “their primary care provider and/or pharmacist.”
Community Input - Key Leader Interviews

• “I think the problem is bigger than us to fix.”

• “It’s an overall community responsibility.”

• “Government, non-profits, etc. need to work together.”

Do you have any additional comments you would like to share about healthcare needs for older adults in Charlotte County?

At the conclusion of each interview, an opportunity was given for interviewees to provide additional feedback on healthcare topics that were discussed as well as any that were not already discussed.

Below are some of the responses.

• “There’s the whole hunger issue. It’s more prevalent than what anyone understands. Even wealthy seniors are going hungry.” This interviewee added that there is stigma attached to applying for food stamps.

• “Adult daycare is desperately needed here – affordable adult daycare.”

• “Abuse and neglect are also areas of concern. Many seniors are alone or at the mercy of caregivers who are burned out or who aren’t necessarily vested in the care and wellbeing of the senior.”

• “Isolation probably is another big one. As long as they still have a group, they do okay. But once they lose the group, they begin to deteriorate quickly.” This interviewee added that seniors who live alone fall more often and have health conditions that no one notices, which can then worsen more quickly.

• “It is wonderful that we continue to collect and analyze data which will improve healthcare for older adults.”

• “Older people have a lot to give, if the structure were there – opportunities to mentor younger people.”

• “Mental health and substance abuse are long overlooked and such a key to quality of life.”
Appendices

Appendix A  Positive Aging Members
Appendix B  Community Survey
Appendix C  Focus Group Moderator Guide
Appendix D  Key Leader Interview Guide
Appendix E  Community Leaders Interviewed
# Appendix A - Positive Aging Members

<table>
<thead>
<tr>
<th>Name</th>
<th>Organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Terry McGannon - Chair</td>
<td>Friendship Centers</td>
</tr>
<tr>
<td>Breeze Arb</td>
<td>Tidewell Hospice</td>
</tr>
<tr>
<td>Teri Ashley</td>
<td>Riverside Behavioral Center</td>
</tr>
<tr>
<td>Anna Callwood</td>
<td>Trabue Woods United Association</td>
</tr>
<tr>
<td>Tess Canja</td>
<td>TEAM Parkside / AARP</td>
</tr>
<tr>
<td>Stephen Carter</td>
<td>The Cultural Center</td>
</tr>
<tr>
<td>Mary Curtis</td>
<td>Lifelong Learning Institute</td>
</tr>
<tr>
<td>Deedra Dowling</td>
<td>Charlotte County Human Services</td>
</tr>
<tr>
<td>Gregory Holder</td>
<td>Florida Department of Health in Charlotte County</td>
</tr>
<tr>
<td>Linda Howard</td>
<td>Bayfront Health</td>
</tr>
<tr>
<td>Sandy Hoy</td>
<td>WellCare Health Plans</td>
</tr>
<tr>
<td>Bonnie Leroy</td>
<td>Lifelong Learning Institute</td>
</tr>
<tr>
<td>Marianne Lorini</td>
<td>Area Agency on Aging of Southwest Florida</td>
</tr>
<tr>
<td>Jacqueline Martin</td>
<td>Florida Department of Health in Charlotte County</td>
</tr>
<tr>
<td>Nancy Mason</td>
<td>First Alliance Church</td>
</tr>
<tr>
<td>Dianne Nugent</td>
<td>Florida Department of Health in Charlotte County</td>
</tr>
<tr>
<td>Tom Rice</td>
<td>Community-at-Large</td>
</tr>
<tr>
<td>Jennifer S. Sexton</td>
<td>Florida Department of Health in Charlotte County</td>
</tr>
<tr>
<td>Denis Wright</td>
<td>Florida SouthWestern State College</td>
</tr>
</tbody>
</table>
Appendix B - Community Survey

Healthy Charlotte County, which includes members from a variety of local organizations who are invested in improving the health of the county, would like to ask community members about their interests and needs for senior resources in Charlotte County.

This survey will take approximately 15-20 minutes and will help identify where there are gaps in senior services and will also help guide the development of new health programs in the area. Completed surveys should be returned to the person/location where you received it.

Below is a list of various services or facilities for older adults that are available in some communities. For each one, please rank how likely you are to use these services or facilities now or when you retire.

<table>
<thead>
<tr>
<th>Service</th>
<th>Likely</th>
<th>Neither Likely or Unlikely</th>
<th>Unlikely</th>
<th>Currently Use this Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior Center</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Adult day care program</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Help with chores around the house, such as light housekeeping or cleaning</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Meals-on-wheels, home delivered meals, or other lunch program</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Telephone helpline for information or referrals</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Help with home repairs, like the roof or windows</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>A special door to door transportation program</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Support for caregivers, such as support groups or respite care</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Financial planning and counseling</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Help with personal care at home, such as help with bathing or dressing</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Mental health counseling</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Nutrition education</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Recreation and/or fitness center</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
Appendix B - Community Survey

Please indicate how much you agree or disagree with the availability of services or opportunities to meet the needs of adults of 60 years plus of age.

Charlotte County has...

<table>
<thead>
<tr>
<th></th>
<th>Agree</th>
<th>Neither Agree or Disagree</th>
<th>Disagree</th>
<th>Don't Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment opportunities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Volunteer opportunities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recreation and fitness opportunities (including sports, exercise classes, paths and trails, etc.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cultural opportunities (library services, arts, etc.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Affordable quality housing</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Availability of information about resources for older adults</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Availability of affordable quality health care</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>An openness and acceptance of the community towards older residents of diverse backgrounds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Availability of affordable quality mental health care</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>User friendly public transportation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adequate assisted living and nursing home facilities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Available services to help with personal care at home, such as bathing, dressing, etc.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Services and activities that are close to where I live</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix B - Community Survey

Over the last 12 months, have you had a problem with any of the following?

<table>
<thead>
<tr>
<th>Problem</th>
<th>Major Problem</th>
<th>Minor Problem</th>
<th>No Problem</th>
<th>Does Not Apply</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your physical health</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Housing that meets your needs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fall or fear of falling</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Getting the healthcare that you need</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Having adequate transportation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Feeling lonely, sad, or isolated</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Affording your utilities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nutritional needs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Affording the medication that you need</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Having financial problems</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Being a victim of crime</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dealing with legal issues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Performing everyday activities such as walking or bathing</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loss of balance or strength</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Having too few activities or feeling bored</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Providing care for another person</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you have ever had to leave the county for health services, what type of services did you need? (Please select all that apply.)

- Never used out-of-county health services
- Dental care
- Vision / Eye care
- Mental or Behavioral Health care
- Surgery
- Rehabilitative services
- Primary care
- Other ________________________________
Appendix B - Community Survey

Which of the following do you feel are the five most important health concerns for older adults such as yourself, and your family and friends, in Charlotte County? (Please select up to 5.)

- Access to in-home services
- Access to primary care (family doctor)
- Access to specialty care (doctors who provide care for one specific medical issue)
- Affordable housing
- Affordable prescriptions
- Alzheimer’s / Dementia
- Arthritis
- Cancer
- Dental problems
- Diabetes
- Flu / Pneumonia
- Grandparents raising grandchildren
- Hearing / Vision loss
- Heart disease and stroke
- Isolation / Loneliness
- Mental health / Depression
- Nutrition / food
- Substance abuse
- Other

What does Charlotte County need to improve the health of older adults in the community? (Please select all that apply)

- Additional health services
- Counseling & support
- Health education/wellness programs
- Healthier food choices
- More doctors
- Recreational facilities (parks, sports fields, etc.)
- Safe places to walk/play
- Specialty doctors
- Substance abuse treatment services
- Transportation
- Other

What is the most beneficial improvement Charlotte County could make to improve the health of older adults over the next 5-10 years?

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

Please share any additional comments you have about healthcare needs for older adults in Charlotte County.

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

Page 4 of 5
Appendix B - Community Survey

While your survey is completely anonymous, knowing a little bit about you will help us better understand the needs of the community. Please provide the following information about yourself:

**Age:**
- ☐ 50-59
- ☐ 70-79
- ☐ 80 or older

**Sex:**
- ☐ Male
- ☐ Female

**Race (select all that apply):**
- ☐ White
- ☐ Black / African American
- ☐ American Indian / Alaska Native
- ☐ Asian
- ☐ Native Hawaiian / Other Pacific Islander
- ☐ Some other race

**Ethnicity:**
- ☐ Hispanic or Latino
- ☐ Not Hispanic or Latino

**Marital Status:**
- ☐ Now married
- ☐ Widowed
- ☐ Divorced
- ☐ Separated
- ☐ Never married

**Responsible for grandchildren under 18 years:**
- ☐ Living with grandchild(ren)
- ☐ Responsible for grandchild(ren)
- ☐ Not applicable

**Which of the following best describes your living situation?**

**Do you live:**
- ☐ in a home that you own
- ☐ in an apartment or house that you rent
- ☐ with a relative in their home
- ☐ in a nursing home
- ☐ in an independent living unit, other than senior housing or an age-restricted community
- ☐ in an assisted living facility
- ☐ Other __________________________

If you would like someone to contact you regarding this survey, or you would like to receive the results of this survey, please provide your contact information:

NAME ___________________________ TELEPHONE or EMAIL ___________________________

ADDRESS ___________________________

If you have any questions about this survey, please contact Jennifer S. Sexton at the Florida Department of Health in Charlotte County at 941-624-7200, extension 7279.
Appendix C - Focus Group Moderator Guide

Charlotte County
Senior Needs Assessment - 2017
Focus Group Moderator Guide

Hello and welcome to our focus group. A focus group is a discussion among people who have something in common. Each of you is here today as a resident of Charlotte County and have unique perspectives on the health of your community. I’d like to thank you for agreeing to join our discussion group today where we will be talking about the health needs of individuals in our community.

My name is ________ and assisting me in this discussion is ________. We are both from the Florida Department of Health in Charlotte County. On behalf of Healthy Charlotte County, the Department of Health is conducting a county-wide health assessment. The goal of this assessment is to identify the most pressing health needs of residents of Charlotte County including issues like access to healthcare, barriers to receiving healthcare and the most pressing health issues of residents. We want to help the local policy makers and healthcare providers focus on the health needs that you feel are important. Your input is extremely important.

To help manage our discussion, I am going to briefly review some guidelines:

- I will be asking you all some questions over the next hour or so. I encourage each of you to share as much as you feel comfortable. All of your opinions are important to us and this project.
- Feel free to say whatever you like, there are not right or wrong answers to our questions.
- We ask you to respect what other people in the group say and for you avoid negative comments about other peoples’ thoughts or opinions.
- We ask that only one person talk at a time, we do not want to miss anything that anyone says, so it is important we do not talk over one another or break into separate conversations. If you think you might forget your ideas, please write them down. Then you can share them at the next opportunity in our conversation.
- Most importantly, what you say in here today will remain between us. We will not be using your name when we report the results of this study. We also ask that you not share what we talk about today in the group with others outside the group. It is important that we trust each other and that you are comfortable sharing your thoughts.
- We are taping today’s meeting. The tape will only be used by our staff to make sure that our written reports are accurate. We do not want to miss any of your comments. Once those reports are complete, we will destroy the tapes. (Only one of the focus groups was taped.)
- As you walked in we handed you a brief questionnaire. This will be used to help describe the discussion group. If you have not yet, please take a minute and complete these questions before we start. We will not be using this information to identify you in anyway.
- If you have a cell phone, please turn them off or put them on vibrate. If you must answer the phone, please do so outside and return as quickly as you can.

Are there any questions about what we’re doing today? If there are no additional questions, we’ll begin.

QUESTIONS
As a way of getting started and getting to know each other, I would like to go around the room one at a time. Please tell us your name and how long you have lived in Charlotte County.
Now that we have heard from each of you, I would like to ask some questions for anyone to answer.
Appendix C - Focus Group Moderator Guide

Please, I ask you to remember to talk one at a time because each one of you has important things to say and we want to make sure that we hear what you have to say. There are not right or wrong answers; we only want to get your input.

1. Considering your own experiences, what are your general thoughts on healthcare resources for older adults in Charlotte County?

2. Do you feel that Charlotte County is a good place to live if you want to remain healthy?

3. Do you have a primary/family doctor? Where do you go to get healthcare?

4. How well do current services in the county meet your or your household’s needs?

5. Do you ever go outside of the county to receive healthcare? (If so, for what services? Was it out of necessity or by choice?)

6. Considering your own experiences, what are some things that have helped improve or maintain the health of you or your family?

7. What are problems or barriers you see in older adults in Charlotte County maintaining or improving their health?

8. We often hear that transportation is an issue that impacts accessing needed healthcare. Is this something that impacts you?

9. To improve your health, what do you need?
10. Is it possible to grow old in Charlotte County and stay in your home? Is Charlotte County different than other places in Florida or the U.S. in that regard?

11. What do you think are the most pressing or most serious healthcare needs in Charlotte County for older adults?

12. Overall, what would you say is the most important health need we have just come up with? If each of you will tell what you think is most important, we will put a check mark by it.

13. What do you think can be done to work on these healthcare needs?

14. What role do people in the community, like you, play in improving the overall health of older adults in Charlotte County?

15. Do you have any additional comments you would like to share about health and healthcare for older adults in Charlotte County?

Our discussion today was to help us understand how the community feels on the health needs in Charlotte County. Have we missed anything?

Now, if there are no further comments, we would like to thank you all for your participation in this project, and please remember to keep everything you have heard today inside this room and among us.
Appendix D - Key Leader Interview Guide

Charlotte County
Senior Health Assessment - 2017
Key Leader Interview Tool

On behalf of Healthy Charlotte County, the Department of Health is conducting a county-wide health assessment. The goal of this assessment is to identify the most pressing health needs of older adults of Charlotte County including issues like access to healthcare, barriers to receiving healthcare and the most pressing health issues of residents. We want to help the local policy makers and healthcare providers focus on the health needs that you feel are important. Your input is extremely important.

As a part of this study, we are conducting a series of interviews with key individuals throughout the county who have knowledge of the health needs of individuals in Charlotte County. You have been identified by the project team as a key informant based on your knowledge of the health-related issues for Charlotte County residents. This interview will take approximately 45 minutes.

In the final report, the information you give will not be attributed to you by name. You will however be listed as a participant in the study. Are you ready to get started?

1. Could you briefly describe your position and how long you have lived and/or worked in Charlotte County?

2. Please comment on your overall perspective on healthcare for older adults in Charlotte County, including the services available to meet healthcare needs of Charlotte County residents.

3. Please comment on your overall perspective on the general health of older adults in Charlotte County.

4. Where do you think the older adults in Charlotte County go to get needed health information?

5. What do you think are the most pressing healthcare needs in Charlotte County for older adults?

6. What do you think are the essential components of a quality healthcare system for a community like Charlotte County, that has a high population of older adults? Are these components currently in Charlotte County?
Appendix D - Key Leader Interview Guide

7. I am going to name some specific types of services and ask you to share any impressions you have about them, particularly anything you know about how these services are available to all older adults in Charlotte County and whether there are any obstacles to receiving those types of services:
   a. Primary care
   b. Dental care
   c. Specialty care
   d. Mental Health care
   e. Substance Abuse treatment
   f. Emergency care
   g. Hospital care
   h. Hospice care

8. Are there other types of services that older adults in Charlotte County have difficulty accessing?

9. Are there services that older adults in Charlotte County must go outside of the county to receive?

10. Are there areas/neighborhoods in the County where older adults have a particularly difficult time accessing services?

11. We often hear that transportation is an issue that impacts accessing needed health care. Is this something that you have seen in the community?
Appendix D - Key Leader Interview Guide

12. Of all the issues and services we have discussed, which do you think is the most important health care issue for older adults?

13. What actions are necessary to address this issue? Who do you think should take responsibility for addressing this issue?

14. Do you have any additional comments you would like to share about health care needs for older adults in Charlotte County?

15. Please provide an email address where you can be contacted with the final results of this health assessment.
Appendix E - Community Leaders Interviewed

<table>
<thead>
<tr>
<th>Name</th>
<th>Organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jill Ayers</td>
<td>Charlotte County Fire/EMS</td>
</tr>
<tr>
<td>Deb Bragg</td>
<td>Friendship Center</td>
</tr>
<tr>
<td>Stephen Curtis</td>
<td>The Cultural Center</td>
</tr>
<tr>
<td>Ken Doherty</td>
<td>Board of County Commissioners</td>
</tr>
<tr>
<td>Deedra Dowling</td>
<td>Charlotte County Human Services</td>
</tr>
<tr>
<td>Marcy Fricina</td>
<td>Fawcett Memorial Hospital</td>
</tr>
<tr>
<td>Dee Hawkins-Garland</td>
<td>Charlotte County Fire/EMS</td>
</tr>
<tr>
<td>Gail Holton</td>
<td>Area Agency on Aging of Southwest Florida</td>
</tr>
<tr>
<td>MaryAnn Perez-Rose</td>
<td>Millennium Physician Group</td>
</tr>
<tr>
<td>Diane Parolisi</td>
<td>Brookdale</td>
</tr>
<tr>
<td>Kathy Silverberg</td>
<td>Herald Tribune, retired</td>
</tr>
<tr>
<td>Joseph Tiseo</td>
<td>Board of County Commissioners</td>
</tr>
</tbody>
</table>