



**Senior Resources Advisory Board
Agenda
September 7, 2022**

Chair John E. Brown
Vice Chair Sandra Varnell
Member Susan Sloan
Member Ella Thomas
Member Vida May Waters

City Manager Mike DaRoza

The City Commission will conduct a
Senior Resources Advisory Board
At 5:00 PM
to address the item(s) below.

Meeting Date: September 7, 2022

Meeting Location: James A Lewis Commission Chambers

15100 NW 142 Ter.

Notice given pursuant to Section 286.0105, Florida Statutes. In order to appeal any decision made at this meeting, you will need a verbatim record of the proceedings. It will be your responsibility to ensure such a record is made.

SENIOR RESOURCES ADVISORY BOARD MEETING AGENDA

CALL TO ORDER

INVOCATION

PLEDGE TO THE FLAG

APPROVAL OF THE AGENDA

I. OLD BUSINESS

A. Survey of Senior Community

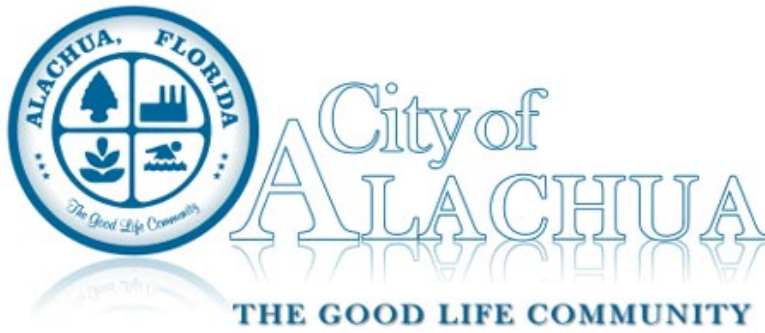
II. NEW BUSINESS

B. June 15, 2022, Senior Resources Advisory Board Minutes

III. BOARD COMMENTS/DISCUSSION

IV. CITIZENS COMMENTS

ADJOURN



Board/Committee Agenda Item

MEETING DATE: 9/7/2022

SUBJECT: Survey of Senior Community

PREPARED BY: LeAnne Williams, Deputy City Clerk

RECOMMENDED ACTION:

Receive the update.

Summary

City Manager Mike DaRoza will present an update on the distribution and results of the survey.

ATTACHMENTS:

Description

- ▢ 2022 Alachua Senior Community Survey

We would like to find out more about our senior community and what you'll need as you get older to make our community an even more great place to live. Your input is very important and we would greatly appreciate your participation in this survey.

How long have you lived in our community?

- Less than 5 years
- 5 years but less than 15 years
- 15 years but less than 25 years
- 25 years but less than 35 years
- 35 years but less than 45 years
- 45 years or more

How long have you lived in your current residence?

- Less than 5 years
- 5 years but less than 15 years
- 15 years but less than 25 years
- 25 years but less than 35 years
- 35 years but less than 45 years
- 45 years or more

How would you rate your current community as a place for people to live as they age?

- Excellent
- Very good
- Good
- Fair
- Poor

Some people find that they need or want to move out of their community as they get older. If you were to consider moving out of your current community, would the following be a major factor, a minor factor, or not a factor at all in your decision to move?

	Major factor	Minor factor	Not a factor	Not sure
a. Your personal safety or security concerns...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Wanting to move to an area that has better health care facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Wanting to be closer to family.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Needing more access to public transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Wanting to live in a different climate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Wanting to live in an area that has a lower cost of living	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Wanting to live in an area with better opportunities for social interaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How important is it for you to remain in your current community for as long as possible?

- Extremely important
- Very important
- Somewhat important
- Not very important
- Not at all important

Which of the following types of homes best describes where you currently live?
[CHECK ONLY ONE]

- Single family house
- Two family house that has two separate living units
- Townhouse or row house
- Apartment
- Condominium or coop
- Mobile home
- Senior housing or assisted living facility
- Some other type of living arrangement

Do you own or rent your primary home or do you have some other type of living arrangement like living with a family member or friend?

- Own
- Rent
- Neither own nor rent but live with adult child or others

How important is it for you to be able to live independently in your own home as you age?

- Extremely important
- Very important
- Somewhat important
- Not very important
- Not at all important

Some people find that they need to make modifications to their residence to enable them to stay there for as long as possible. Does your current residence need any major repairs, modifications, or changes to enable you to stay there for as long as possible?

- Yes
- No
- Not sure

Would you rate your community as excellent, very good, good, fair, or poor on having the following?

	Excellent	Very good	Good	Fair	Poor
a. Sidewalks that are in good condition, safe for pedestrians, and accessible for wheelchairs or other assistive mobility devices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Well-lit, accessible, safe streets and intersections for all users	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Audio and visual pedestrian crossings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Separate pathways for bicyclists and pedestrians	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Well-maintained streets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Easy to read traffic signs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Enforced speed limits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Would you rate your community as excellent, very good, good, fair, or poor on having the following

	Excellent	Very good	Good	Fair	Poor
a. Well-maintained homes and properties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Affordable housing options for adults of varying income levels such as older active adult communities, assisted living and communities with shared facilities and outdoor spaces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Homes that are built with things like a no step entrance, wider doorways, and first floor bedrooms and bathrooms.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Well-maintained, safe low-income housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Well-maintained parks.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Safe parks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Public buildings and spaces including restrooms that are accessible to people of different physical abilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Enough benches for resting in public areas like parks, along sidewalks, and around public buildings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Conveniently located emergency care centers.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How do you usually get around your community for things like shopping, visiting the doctor, running errands, or other things?

	Yes	No
a. Walk	<input type="checkbox"/>	<input type="checkbox"/>
b. Drive yourself	<input type="checkbox"/>	<input type="checkbox"/>
c. Have others drive you	<input type="checkbox"/>	<input type="checkbox"/>
d. Take a taxi.....	<input type="checkbox"/>	<input type="checkbox"/>
e. Use a ride source company such as Uber or Lyft	<input type="checkbox"/>	<input type="checkbox"/>
f. Use a special transportation service, such as one for seniors or persons with disabilities	<input type="checkbox"/>	<input type="checkbox"/>
g. Use public transportation	<input type="checkbox"/>	<input type="checkbox"/>
h. Ride a bike	<input type="checkbox"/>	<input type="checkbox"/>
i. Some other way.....	<input type="checkbox"/>	<input type="checkbox"/>
j. I do not get out of the house	<input type="checkbox"/>	<input type="checkbox"/>

How often do you have contact with family, friends, or neighbors who do not livewith you?

- Everyday
- Several times a week, but not everyday
- Once a week
- Once every 2 or 3 weeks
- Once a month
- Less than monthly
- Never

How often you feel the following?

	Often	Sometimes	Rarely	Never
a. I lack companionship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I feel left out.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. I feel isolated from others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you were in trouble, do you have friends or family who can help you at any timeof the day or night?

- Yes
- No

Do you use the following sources for continuing education or self-improvement classes or workshops in your community?

	Yes	No
a. Department of Recreation and Culture	<input type="checkbox"/>	<input type="checkbox"/>
b. Faith community	<input type="checkbox"/>	<input type="checkbox"/>
c. Local organizations or businesses.....	<input type="checkbox"/>	<input type="checkbox"/>
d. Community center.....	<input type="checkbox"/>	<input type="checkbox"/>
e. Senior center	<input type="checkbox"/>	<input type="checkbox"/>
f. Offerings through my work	<input type="checkbox"/>	<input type="checkbox"/>
g. Online programs.....	<input type="checkbox"/>	<input type="checkbox"/>
h. Some other source.....	<input type="checkbox"/>	<input type="checkbox"/>
i. I do NOT participate in any continuing education/self-improvement classes	<input type="checkbox"/>	<input type="checkbox"/>

Would you rate your community as excellent, very good, good, fair, or poor onhaving the following?

	Excellent	Very good	Good	Fair	Poor
a. Conveniently located entertainment venues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- b. Activities geared specifically toward older adults.....
- c. Activities that offer senior discounts.....
- d. Activities that are affordable to all residents
- e. Activities that involve both younger and older people
- f. A variety of cultural activities for diverse populations
- g. Local schools that involve older adults in events and activities.....
- h. Continuing education classes or social clubs to pursue new interests, hobbies or passions.....
- i. Driver education or refresher courses

Would you rate your community as excellent, very good, good, fair, or poor on having the following?

	Excellent	Very good	Good	Fair	Poor
a. A range of volunteer activities to choose from	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Volunteer training opportunities to help people perform better in their volunteer roles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Opportunities for older adults to participate in decision making bodies such as community councils or committees.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Easy to find information on available local volunteer opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Transportation to and from volunteer activities for those who need it.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Would you turn to the following resources if you, a family member or friend needed information about services for older adults such as caregiving services, home delivered meals, home repair, medical transport, or social activities?

	Yes	No	Not sure
a. Local Senior Centers.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Office of Healthy Aging (formerly Dept. of Elderly Affairs).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Family or friends.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Local nonprofit organizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. AARP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Faith-based organizations like churches or synagogues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Phone book.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Your doctor or other health care professional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Local government offices like the Health Department.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Library.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Some other source.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Would you rate your community as excellent, very good, good, fair, or poor on having the following?

	Excellent	Very good	Good	Fair	Poor
a. Access to community information in one central source.....	<input type="checkbox"/> ₅	<input type="checkbox"/> ₄	<input type="checkbox"/> ₃	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁
b. Clearly displayed printed community information with large lettering.....	<input type="checkbox"/> ₅	<input type="checkbox"/> ₄	<input type="checkbox"/> ₃	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁
c. Free access to computers and the Internet in public places such as the library, senior centers or government buildings	<input type="checkbox"/> ₅	<input type="checkbox"/> ₄	<input type="checkbox"/> ₃	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁
d. Community information that is delivered in person to people who may have difficulty or may not be able to leave their home	<input type="checkbox"/> ₅	<input type="checkbox"/> ₄	<input type="checkbox"/> ₃	<input type="checkbox"/> ₂	<input type="checkbox"/> ₁

Are you male or female?

- ₁ Male
- ₂ Female

What is your age as of your last birthday? [AGE IN YEARS]

What is your current marital status?

- ₁ Married
- ₂ Not married, living with partner
- ₃ Separated
- ₄ Divorced
- ₅ Widowed
- ₆ Never married

Are you or your spouse or partner currently a member of AARP?

- ₁ Yes
- ₂ No
- ₀ Not sure

Besides you, do you have any of the following people living in your household?

- | | Yes | No |
|--|---------------------------------------|---------------------------------------|
| a. Child/children under 18 | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ |
| b. Child/children 18 or older..... | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ |
| c. Child/children away at college | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ |
| d. Parents..... | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ |
| e. Other adult relative or friend 18 or older .. | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ |

In general how would you rate your health?

- ₅ Excellent
- ₄ Very good
- ₃ Good
- ₂ Fair
- ₁ Poor

D7. Does any disability, handicap, or chronic disease keep you or your spouse or partner from participating fully in work, school, housework, or other activities? [**CHECK ONLY ONE**]

- ₁ Yes, myself
- ₂ Yes, my spouse or partner
- ₃ Yes, both me and my spouse or partner
- ₄ No

What is your race? [**CHECK ALL THAT APPLY**]

- ₁ Black or African American
- ₂ White or Caucasian
- ₃ Asian
- ₄ American Indian or Alaska Native
- ₅ Native Hawaiian or other Pacific Islander
- ₆ Other, please specify: _____

Thinking about your state and local elections in the last 10 years, how often would you say you vote?

- ₅ Always
- ₄ Most of the time
- ₃ About half of the time
- ₂ Seldom
- ₁ Never

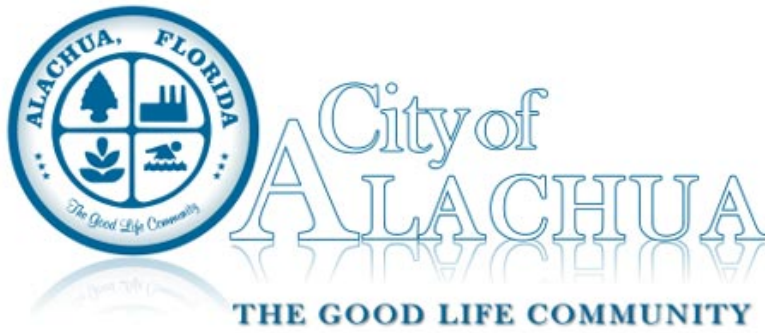
Do you consider yourself to be a Democrat, a Republican, an Independent, or something else?

- ₁ Democrat
- ₂ Republican
- ₃ Independent
- ₄ Something else

What was your annual household income before taxes in 2020?

- ₁ Less than \$10,000
- ₂ \$10,000 to \$19,999
- ₃ \$20,000 to \$29,999
- ₄ \$30,000 to \$49,999
- ₅ \$50,000 to \$74,999
- ₆ \$75,000 to \$99,999
- ₇ \$100,000 to \$149,999
- ₈ \$150,000 or more

**Thank you very much for completing this survey.
Your assistance in providing this information is very much appreciated.**



Board/Committee Agenda Item

MEETING DATE: 9/7/2022

SUBJECT: June 15, 2022, Senior Resources Advisory Board Minutes

PREPARED BY: LeAnne Williams, Deputy City Clerk

RECOMMENDED ACTION:
Approve the minutes.

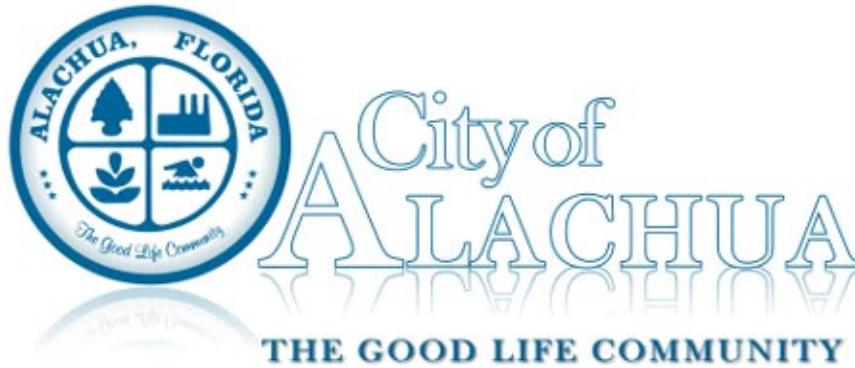
Summary

June 15, 2022, Senior Resources Advisory Board Minutes

ATTACHMENTS:

Description

☐ Minutes



**Senior Resources Advisory Board
Minutes
June 15, 2022**

Chair John E. Brown

City Manager Mike DaRoza

Vice Chair Sandra Varnell

Member Susan Sloan

Member Ella Thomas

Member Vida May Waters

**Senior Resources Advisory Board
At 5:00 PM**

Meeting Date: June 15, 2022

Meeting Location: James A Lewis Commission Chambers

15100 NW 142 Ave.

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SENIOR RESOURCES ADVISORY BOARD MEETING AGENDA

CALL TO ORDER

Led by Chair John E. Brown.

INVOCATION

Led by Staff Liaison Mike DaRoza.

PLEDGE TO THE FLAG

Led by Chair Brown, with Member Susan Sloan and Sandra Varnell absent.

APPROVAL OF THE AGENDA

Chair Brown asked Members to review the agenda and make recommendations.

Member Vida May Waters moved to approve the agenda; seconded by Member Ella Thomas.

Passed by unanimous consent.

I. OLD BUSINESS

Staff Liaison DaRoza provided an update on the Seniors' Survey. He stated all the recommended corrections and updates from the SRAB were made to the survey, and it had already been placed in some locations throughout the city.

Chair Brown stated he would like to pass out the surveys at Turkey Creek.

II. NEW BUSINESS

A. March 15, 2022, Senior Resources Advisory Board Minutes

Chair Brown asked Members to review the minutes and make recommendations.

Member Waters moved to approve the March 15, 2022, Senior Resources Advisory Board minutes; seconded by Member Thomas.

Passed by unanimous consent.

Member Sloan joined the meeting.

B. Nursing Students Health and Wellness Project

Chair Brown stated he met with the Nursing Students a few weeks before the meeting to help provide input with the project, and welcomed them to the podium.

Chanyoung Yun and Whitney Wilson, Nursing Students from the University of Florida, presented the item and stated falling was the biggest concern for seniors by the Fire Department. Ms. Yun stated they would like to focus on educating seniors about fall prevention by way of a checklist: removing clutter, having brighter lighting in the daytime, a nightlight in the evening, etc. She suggested showing videos for exercises to strengthen muscles to prevent falls. She also suggested they could come to any scheduled event to make their fall safety presentation, as it would only take approximately 20 minutes.

Discussion between the students and the Board ensued concerning the project details and making sure the deadline of July 15, 2022, was met.

C. Art Class for Seniors

Deputy City Clerk LeAnne Williams introduced the item, and informed the Board the class had been cancelled.

Chair Brown asked when the class was to start.

Deputy City Clerk Williams stated Good News Art had reached out to Recreation and Culture Director Elliot Harris to collaborate in working with the Senior's, and Recreation and Culture Director Harris stated it was cancelled due to lack of interest.

Staff Liaison DaRoza stated he would confer with Recreation and Culture Director Harris for more details.

Discussion ensued regarding communicating to the citizens events happening at the City.

Suggestions: community posting boards, Closed Circuit TV for the City, Utility Billing, on-line, news ads, radio community calendars, William Thomas Funeral Home. media PSA, billboards, signs, handing out fliers, Legacy Park flier station, Hathcock Center, doctors' offices, and the Post Office.

III. BOARD COMMENTS/DISCUSSION

Chair Brown opened the floor for comments.

There were no comments.

IV. CITIZENS COMMENTS

Ms. Yun asked if there was going to be Bingo on July 4th, as mentioned in the last minutes.

Staff Liaison DaRoza stated it had been suspended due to COVID, and City Staff was working on possibly getting it back into the programming for 2023.

Chair Brown stated he volunteers for Faith in Florida, and they would be doing a Juneteenth event on June 18, 2022, at Paradise Outreach Community Center. and all citizens were invited.

ADJOURN

Member Sloan moved to adjourn; seconded by Member Thomas.

Passed by unanimous consent.

ATTEST:

SENIOR RESOURCES ADVISORY BOARD
OF THE CITY OF ALACHUA, FLORIDA

Presiding Officer

Staff Liaison