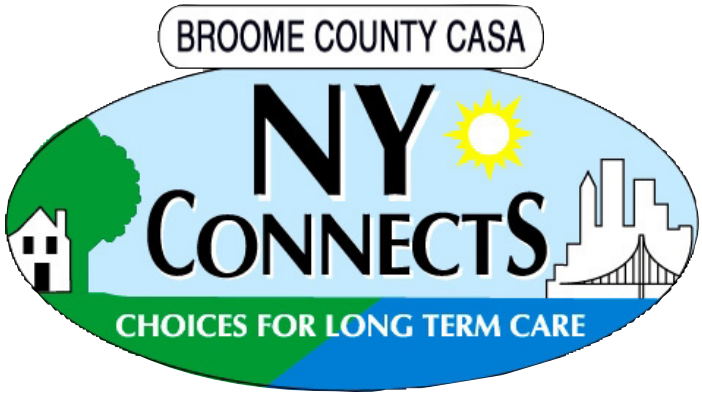
Broome County CASA



Annual Report 2012

Table of Contents

CASA Program Coordinator's Message 1

In Memoriam – Bonnie Quarella 3

Volunteer Recognition – Ann Langevin 4

Mission Statement and Description of Services 5

Budget and Staffing 7

CASA Programs and Partnerships 8

CASA Programs

1. Personal Care Program 9
2. Long Term Home Health Care Program 9
3. Assisted Living Program 10
4. Medical Day Care 10
5. Private Duty Nursing 10
6. Care at Home 10

CASA Partnerships

1. Family Homes for the Elderly 11
2. Nursing Home Placement 11
3. Nursing Home to Community 11
4. In-Home Mental Health Program 11
5. Partnership with Tioga County 11
6. Partnership with Southern Tier Independence Center 11

2012 Highlights

1. NY Connects 12
2. Nursing Home to Community 12

TABLES

Comparison of Ages of Clients 13
Major Program & Performance Measures 14
2012 DMS-1 Scores by Program 15
Primary Diagnosis of Clients 16
Referral Statistics 17
Nursing Home to Community Program 18
In-Home Mental Health Care Program 18
Client Demographics 19
2012 CASA Advisory Board Members 20

CASA PROGRAM COORDINATOR'S MESSAGE

TO: County Executive Debra Preston

On behalf of the staff of Broome County CASA and the residents of Broome County we serve, it is my pleasure to present the 2012 Annual Report.

CASA has had another year of changes. We had four Nurses and a Keyboard Secretary leave throughout the year, only one nurse was replaced. The loss of staff has caused many staff work load changes. All staff has been cross trained to cover the work of the staff that left. We developed an on call system to help provide coverage for intake as we went from two full time intake nurses to one full time intake nurse. All of our clinical staff signs up to cover intake one to two times per month. I extend a heartfelt thank you to all the CASA staff. We have been successful due to their dedication and hard work.

CASA completed our first full year under grant status. 100% of our funding comes from the Medicaid Technologies Enhancement Program Grant which is administrated through the Department of Social Services.

In 2012 CASA became 1 of 37 agencies statewide to be part of the Uniform Assessment System-NY (UAS-NY) beta test. The UAS-NY is a Medicaid Redesign Team (MRT) initiative. Four CASA staff members were the beta testers. The UAS-NY collects uniform data on all Medicaid clients receiving Medicaid Homecare Services throughout New York and is transmitted via the internet while the nurse is in the patient's home. The tool allows NYS Department of Health staff to obtain aggregate statistics to assist the state in examining current programs, costs and possibly assist in developing new Medicaid programs. Agency managers will be able to obtain reports to gather statistics on diagnosis, acuity levels, and medications of their agency clients and be able to compare them to other counties in NYS.

More and more Medicaid eligible individuals were transitioned from fee for service Medicaid coverage to Managed Care Medicaid coverage. In January 2012 Personal Emergency Response Systems (PERS) became a benefit under the Managed Medicaid Organizations (MCOs). A PERS is an emergency button system which allows clients to call for help by pressing a button. Some PERS recipients were required to change providers.

In November 2012 Consumer Directed Personal Assistant Program (CDPAP) and the Assisted Living Program (ALP) were transitioned to Managed Medicaid coverage.

Our total case count was down by 63 cases from 2011-2012. Our total referrals have actually increased for the year. CASA completed 6,700 total visits in 2012.

In 2012 CASA obtained a grant from NY Connects to replace 10 desktop computers and purchase two laptops and two MiFi devices. We also purchased an additional six laptops in anticipation of the transition to the UAS-NY. New York State did not provide funding for the purchase of laptops or MiFi devices. This was yet another change for our agency as our nurses had never used laptops in the home setting.

The Centers for Medicare and Medicaid (CMS) has not yet signed off on the transition of dual eligible (Medicare, Medicaid or private insurance and Medicaid) clients to Managed Medicaid. The plan is to move most of these clients to a Managed Long Term Care Program (MLTC). There needs to be two MLTC plans for the Medicaid clients to have a choice. Currently Broome County only has 1 MLTC (Fidelis). Many of these transitions have been happening downstate as they have more providers and a larger number of clients.

Medicaid transportation which had been managed by DSS was transitioned to Medical Answering Services, LLC in Syracuse. Initially, this was not a smooth transition. There were many complaints by consumers, agencies, hospitals, physicians, taxi and Medivan Companies. DSS staff, local agency staff, NYS DOH staff and the call center managers met to discuss the concerns and improvements were made.

CASA staff continues to save tax payer dollars by doing cost effective care plans and case management. CASA has a statewide reputation for providing long term care service delivery at the most economical cost to our tax payers. We strive to keep clients as independent as possible and to live with as much dignity as possible wherever they call home.

Sincerely,

Barbara M. Travis

IN MEMORIAM – BONNIE QUARELLA

In January 2012, Bonnie Quarella, our beloved keyboard specialist of 14 years, passed from our lives.

Bonnie was a very private person who seldom spoke of her personal problems. She was fiercely loyal to her family and spent many of her last years working full time and caring for her ill mother, husband and son. Those of us who knew and worked with Bonnie and counted her as a friend knew how much she gave to others. Her hopeful attitude and her optimism fueled her ability to get through each day.

In 2004 Bonnie decided to fulfill her longtime dream of becoming a nurse. She enrolled part time in BCC's nursing program while continuing to work full time. Bonnie completed her first year of nursing curriculum but had to withdraw in 2006 due to the illnesses of her husband and son.

Bonnie was a dedicated employee who worked until her own health problems forced her to retire in October 2011.

Bonnie's supervisor stated that Bonnie was a strong and proud person who had a happy soul and she misses hearing Bonnie's laughter as it brightened her day.

Bonnie, we all miss you and can only imagine what you and Michelle Berry are conspiring to do in heaven.

VOLUNTEER RECOGNITION – ANN LANGEVIN

Ann Langevin has been our volunteer for the past seven years. She works two mornings per week performing various tasks such as scanning, making new client charts and preparing packets of required paperwork for any clinical staff member who requests it. Ann is a very friendly, dedicated person who always has a smile on her face. We appreciate everything Ann does for CASA. Thank you, Ann!

MISSION STATEMENT and DESCRIPTION OF SERVICES

MISSION STATEMENT

CASA serves as a central access point for providing long term care needs assessments for chronically impaired individuals and their families in order to promote maximum independence in a fiscally responsible manner by utilizing all applicable community resources. CASA nurses and case workers provide comprehensive assessments of individuals of all ages regardless of income. CASA staff develops care plans and provides case management services based on client condition and need, with respect and consideration for the personal wishes of clients and their families. CASA staff assists individuals to live as independently as possible. CASA staff informs the consumer and their families of available resources and coordinates an individualized plan of care in partnership with the consumer, their family and the provider community to help
meet their needs.

As a central access point for long term care needs, CASA seeks to provide:

- Improved quality of life for the chronically impaired and their informal supports based on informed choices of all community resources.

- Efficient, cost-effective long term care system that advocates for individual's independence while recognizing constraints and avoiding unjustified or duplication of expenditures or services.

- Effective and cooperative coordination among service providers to meet the needs and challenges of serving people with chronic conditions and disabilities by recognizing the value and benefits of each type of service and their contribution to the quality of consumer care.

Limits of Authority:

CASA authorizes payment for Medicaid personal care and long term care programs in regard to the following programs: Assisted Living Program (ALP), Adult Medical Day Care (AMDC), Care At Home 1 & 2 (CAH) Program for Children, Consumer Directed Personal Assistance Program (CDPAP), Family Homes for the Elderly (FHE), Long Term Home Health Care Programs (LTHHCP), Nursing Home Respite, Personal Emergency Response System (PERS), Personal Care Aide (PCA), Private Duty Nursing Program (PDN), and Shared Aide (SA). CASA is directly responsible for approximately $10,000,000 in Medicaid community care expenditures. Additionally, CASA develops an individualized client budget to maintain costs of service for the LTHHCP under the Department of Health (DOH) guidelines. CASA completes a PRI and Screen (NYSDOH paperwork) for Nursing Home Placement (NHP) which determines the reimbursement rate.

DESCRIPTION OF SERVICES

CASA assumes all responsibilities pursuant to NYS Social Services Regulation 18 NYCRR 505.14 (Personal Care Services – Scope and Procedures), except that Social Services retains authority to monitor CASA's performance. CASA assumes responsibility, in conjunction with the relevant provider agencies, for the coordination and implementation of the Long Term Home Health Care Program in Broome County in conformance with guidelines and limitations set under Department of Social Services regulations. CASA, as the central entry point into the long term care system, provides case management, assessment, care planning, and evaluation of long term care needs of the elderly and chronically ill of all ages, encouraging families to remain involved in their care, and seeking placement at the appropriate level of community resource. CASA was first established in 1983 by Resolution No. 65 and is designed to contain the growth in Medicaid expenditures for long term care.

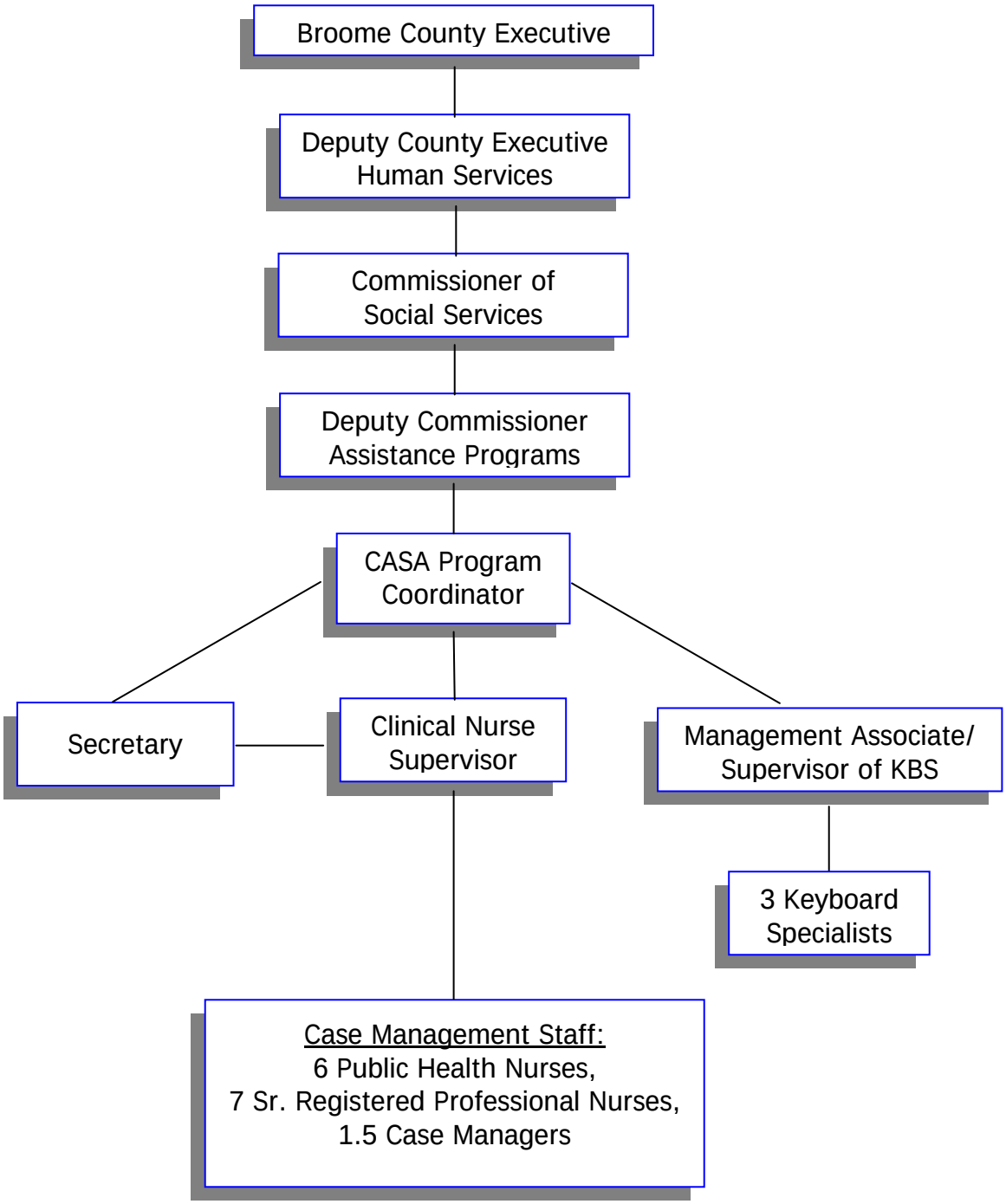
CASA's primary focus is on assessing clients of all ages to ensure appropriate utilization of long term care services.

BUDGET AND STAFFING

Broome County CASA's approved operating budget for 2012 was $2,102,612.

One hundred percent of the CASA operating budget is reimbursed by Federal and State Medicaid administrative dollars.

CASA currently has 21.5 staff members.



CASA PROGRAMS AND PARTNERSHIPS

- ✓ NY Connects
- ✓ Personal Care Aide
- ✓ Shared Aide
- ✓ Consumer Directed Personal Assistant Program
- ✓ Long Term Home Health Care Programs
- ✓ Nursing Home to Community
- ✓ Nursing Home Placement
- ✓ Private Duty Nursing
- ✓ Family Homes for the Elderly
- ✓ Medical Day Care
- ✓ Assisted Living Programs
- ✓ Care At Home
- ✓ Home Community Based Waiver
- ✓ In-Home Mental Health Program
- ✓ Partnership with Tioga County DSS
- ✓ Personal Emergency Response Systems
- ✓ Nursing Home Transition and Diversion Waiver
- ✓ Traumatic Brain Injury Waiver

CASA PROGRAMS

CASA operates AND/OR authorizes Medicaid payment for the following programs, which are MANDATED by the state of New York. Most of the clients in Personal Care assessed and authorized by CASA are the dual eligible clients. They have both Medicare and Medicaid. Most Medicaid only clients are now in Managed Medicaid and their service is authorized by Managed Medicaid or their contractor.

1. PERSONAL CARE PROGRAM

This program operates under three models: traditional **Personal Care, Consumer Directed Personal Assistance Program, and Shared Aide**. Between these three models, Personal Care serves 500 clients on a monthly average.

- The Personal Care Program represents the largest Medicaid home care program in the state, as well as in the United States.
- In New York State, personal care is a billion-dollar program.
- CASA assesses every person receiving personal care on a bi-annual basis.
- CASA develops a care plan for every person in the program on a bi-annual basis.
- CASA authorizes the Medicaid payment and coordinates the care with the assistance of five contracted licensed nursing agencies and the Southern Tier Independence Center (STIC).
- 45% of the people receiving this service on a monthly basis are less than 60 years old.
- Beginning in the early 1990's, the Personal Care Program became available to developmentally disabled children and adults via the Home and Community Based Waiver programs and the Traumatic Brain Injury program.

2. LONG TERM HOME HEALTH CARE PROGRAM

This program is referred to as the "Nursing Home Without Walls Program." It provides a higher level of nursing case management and assessment than the Personal Care Program. There are two providers in Broome County that service approximately 203 clients on a monthly basis. CASA assesses and authorizes the Medicaid services for these clients and is the number one referral source for both programs.

3. ***ASSISTED LIVING PROGRAM***

There are four ALP providers in Broome County: Good Shepherd Fairview, Hilltop, Ideal, and St. Louise. There are a total of 105 ALP beds of which approximately one-third are Medicaid recipients. CASA assesses all clients, private pay or Medicaid, for initial assessment and completion of a PRI and Screen on clients wanting to access the ALP level. CASA authorizes payment for the Medicaid clients. Assisted Living supports seniors in need of long term care, but who are not in need of skilled nursing home care.

4. ***MEDICAL DAY CARE***

Susquehanna Nursing Center operates the only Medical Day Care Program in Broome County. CASA assesses and authorizes the care for all Medicaid clients served by the program.

5. ***PRIVATE DUTY NURSING***

On behalf of the state, CASA assesses all Medicaid private duty nursing cases in Broome County for an average of 20 clients per month. People in receipt of this care are mainly children with high tech nursing and intense nursing management needs.

6. ***CARE AT HOME***

CASA provides nursing assessment for the Care At Home Program which serves children who require long term care. CASA also assesses for personal care, consumer directed or private duty nursing in combination with the Care At Home Program. If children are appropriate for these additional programs, CASA authorizes Medicaid payment.

The goal of every CASA assessment is to develop the best care plan, at the least cost for all payers, whether private pay or Medicaid.

Combined with the referrals we receive on a monthly basis, CASA staff manages approximately 1,000 clients per month.

CASA PARTNERSHIPS

During CASA's existence, we have worked with many community agencies to implement new programs in an effort to better manage long term care Medicaid expenditures. Programs that have resulted in these partnerships are as follows:

1. FAMILY HOMES FOR THE ELDERLY

One provider coordinates approximately 23 private homes and serves an average of 55 clients on a monthly basis. CASA determines eligibility and authorizes the Medicaid payment for clients served in this program. The program is operated by Family & Children's Society and is the most successful program of its kind in New York State. It is one of only two such programs in New York State.

2. NURSING HOME PLACEMENT

CASA assesses residents in the community who are in need of nursing home care and assists the families in accessing care.

3. NURSING HOME TO COMMUNITY

This effort is a model program for the state and nation. Since 1996, Broome County CASA has assisted over 5,000 people achieve nursing home discharge.

4. IN-HOME MENTAL HEALTH PROGRAM

Broome County CASA recognized the need for greater management of psychotropic drugs in home care. Community Mental Health Reinvestment money was obtained by Family & Children's Society to assist people in their homes stay on their medication regime. There are no Medicaid dollars involved in the delivery of this service, yet it has the potential to save Medicaid dollars by assisting clients in managing their care. Fifteen to seventeen clients are served on average. As clients improve, they "graduate" from the program which allows other clients to then be served.

5. PARTNERSHIP WITH TIOGA COUNTY

Broome County CASA entered into a partnership with Tioga County DSS in 1998 to review their residents for post-hospital or nursing home care who are served by Broome County hospitals and nursing homes.

6. PARTNERSHIP WITH SOUTHERN TIER INDEPENDENCE CENTER

Broome County CASA assesses clients for the Traumatic Brain Injury Program and the Nursing Home Transition and Diversion Waiver Program. CASA nurses complete a PRI and Screen initially and yearly for these programs.

2012 HIGHLIGHTS

1. NY CONNECTS

In October of 2006 the NYS Departments of Aging and Health provided financial assistance to counties across New York State to create or support long term care points of entry or NY Connects. CASA, in partnership with the Broome County Departments of Aging and Social Services, is one of the designated NY Connects partners in Broome County. CASA has been functioning as a point of entry for long term care in Broome County for over 20 years. The support provided by the state for NY Connects has allowed us to enhance our information and referral services and educate both the public and provider community on the benefits of having one place to call for information on long term care.

The contract year (September 2011 – August 2012) represented the fifth full year of operation under the NY Connects "banner." At the end of the fourth year of operations it was not clear if the state would continue to fund the project. However, entering into 2012 the state did restore money for NY Connects.

NY Connects has provided CASA with grant funds to purchase ten desktop and two laptop computers to assist in providing NY Connects long term care information to the residents of Broome County.

2. NURSING HOME TO COMMUNITY

Nursing Home to Community remains a touchstone for Broome County CASA. In learning more about other areas of the nation where similar programs have developed, it must be noted that CASA developed this program in 1996 by reorganizing existing resources. We did not receive any grant dollars as have other agencies, or any additional operating dollars. We recognized the need in our community for this activity in the early 1990's and by 1996 began by servicing two out of nine skilled nursing facilities. Today we serve all ten skilled nursing facilities in Broome County and in 2012 we received 348 referrals and assisted in coordinating discharges for 233.

COMPARISON OF AGES OF CLIENTS

Age Range	Total Referrals in 2012	Total Unduplicated Count (PCA)* in 2012	Total Unduplicated Count (LTHHCP) in 2012
Unknown	2	0	0
21 & under	27	71	0
22 – 24	8	17	0
25 – 29	11	21	1
30 – 34	13	13	2
35 – 39	20	10	6
40 – 44	29	20	5
45 – 49	41	19	11
50 – 54	94	53	16
55 – 59	99	37	24
60 – 64	125	32	21
65 – 69	138	66	34
70 – 74	184	42	29
75 – 79	271	49	26
80 – 84	364	50	27
85 & over	810	74	50
TOTALS	**2,236**	**574**	**252**

Note the following:

- 15% of total referrals are less than 60 years old.
- 53% of total referrals are 80 and over.

- 45% of active PCA recipients are less than 60 years old.
- 22% of active PCA recipients are 80 and over.

- 26% of LTHHCP clients are less than 60 years old.
- 31% of LTHHCP clients are 80 and over.

*PCA includes: Traditional Personal Care, Shared Aide, and Consumer Directed Personal Assistance, and Home & Community Based Waiver.

MAJOR PROGRAM & PERFORMANCE MEASURES

PROGRAMS	2010	2011	2012
PCA Hours Billable to Medicaid	184,600	184,272	191,897
Shared Aide Sites	18	15	15
Client Referrals (Total)	2,307	2,176	2,236
AVERAGE CASES MANAGED / MONTH			
Personal Care:			
• Traditional	164	143	111
• Shared Aide	158	142	119
• Consumer Directed Personal Assistance Program	180	171	177
SUBTOTALS	502	456	407
Long Term Home Health Care Program	204	203	186
Nursing Home Placement	49	53	48
Family Homes for the Elderly	38	39	34
Assisted Living Program	52	57	46
Care At Home	9	9	14
Home & Community Based Waiver	53	57	57
Nursing Home to Community	124	151	118
Golden Days	29	31	31
Private Duty Nursing	23	20	18
Case Management Only	356	329	371
Traumatic Brain Injury	10	8	7
TOTALS	1,449	1,413	1,337
Personal Emergency Response System	228	198	178
PRIs Completed/Reviewed	520	518	531
UNDUPLICATED COUNT			
Personal Care Programs	702	644	574
Long Term Home Health Care Programs	281	279	252

2012 DMS-1 SCORES BY PROGRAM

DMS-1 Score	CASA Case Management		Traditional PCA		Shared Aide Program		Lourdes LTHHCP		Ideal LTHHCP		CDPAP		PDN		TOTALS	
0 – 59	81	*44%*	82	*51%*	120	*63%*	16	*29%*	25	*35%*	68	*25%*	0	*0%*	392	*41%*
60 – 179	66	*36%*	52	*33%*	57	*30%*	25	*45%*	27	*37%*	84	*31%*	0	*0%*	311	*33%*
180 +	37	*20%*	25	*16%*	13	*7%*	14	*26%*	20	*28%*	119	*44%*	21	*100%*	249	*26%*
Totals	184	*100%*	159	*100%*	190	*100%*	55	*100%*	72	*100%*	271	*100%*	21	*100%*	952	*100%*

0 – 59 Indicates a need for a minimal amount of service, much of it related to housekeeping and chores.

60 – 179 Referred to as the Health Related level of care and at this level people begin to need personal care assistance.

180 + Referred to as the Skilled Nursing level of care and often indicates a high level of physical disability or related inability to care for oneself due to dementia.

As the Uniform Assessment System-New York (UAS-NY) is implemented in 2013, it will replace the DMS-1 form.

PRIMARY DIAGNOSIS OF CLIENTS

Ages 22 – 59		*60 Years & Over*		*Combined Age Groups*	
Nervous System Disorders	104	Mental Health Disorders	182	Mental Health Disorders	208
Mental Health Disorders	26	Arthritis	101	Nervous System Disorders	162
Musculoskeletal Problems & Injuries	26	Cardiovascular Disorders	89	Cardiovascular Disease	111
Cardiovascular Disorders	22	Respiratory/Pulmonary Disease	85	Arthritis	111
Respiratory/Pulmonary Disease	22	Diabetes	78	Respiratory/Pulmonary Disease	107
Diabetes	20	Musculoskeletal Problems & Injuries	71	Diabetes	98
Congenital	10	Nervous System Disorders	58	Musculoskeletal Problems & Injuries	97
Arthritis	10	Hypertension	43	Genitourinary System Disorders	50
Genitourinary System Disorders	9	Genitourinary System Disorders	41	Hypertension	48
Heart Disease	6	Heart Disease	30	Heart Disease	36
Skin Disease	5	Cancer	24	Cancer	28
Hypertension	5	Sensory	14	Skin Disease	17
Infectious Immune Disorders	4	Skin Disease	12	Sensory	17
Cancer	4	Digestive System Disorders	8	Digestive System Disorders	11
Digestive System Disorders	3	Obesity	6	Congenital	11
Sensory	3	Miscellaneous	4	Obesity	7
Miscellaneous	3	Infectious Immune Disorders	2	Miscellaneous	7
Obesity	1	Congenital	1	Infectious Immune Disorders	6

REFERRAL STATISTICS

TOTAL NUMBER OF REFERRALS

	2009	2010	2011	2012
Community	1,574	1,621	1,479	1,500
Hospital	812	686	697	736
TOTALS	2,386	2,307	2,176	2,236

REFERRALS BY PAYOR SOURCE

	MEDICAID				NON-MEDICAID			
	2009	2010	2011	2012	2009	2010	2011	2012
Community	519	560	486	509	1,055	1,061	993	991
Hospital	207	199	188	187	605	487	509	549
TOTALS	726	759	674	696	1,660	1,548	1,502	1,540

HOSPITAL REFERRALS

	MEDICAID				NON-MEDICAID			
	2009	2010	2011	2012	2009	2010	2011	2012
Greater Bing. Health Center	1	4	2	1	0	2	0	0
General	61	40	37	35	99	56	41	57
Lourdes	51	48	59	38	192	156	130	88
Wilson	92	105	88	111	313	273	337	404
Other	2	2	2	2	1	0	1	0
TOTALS	207	199	188	187	605	487	509	549

COMMUNITY REFERRALS

	MEDICAID				NON-MEDICAID			
	2009	2010	2011	2012	2009	2010	2011	2012
Neighbor/Friend	11	10	9	7	27	12	19	23
Self/Family	151	174	136	173	554	572	518	489
Community Agencies	162	160	167	159	134	95	124	131
CHHA	53	53	49	35	56	67	63	66
ACF	21	36	15	12	49	54	56	64
LTHHCP	3	4	3	2	0	3	1	0
PCA Providers	16	20	13	34	4	6	8	4
Physicians	29	22	28	31	58	64	74	91
RHCF	73	81	66	56	173	188	130	123
TOTALS	519	560	486	509	1,055	1,061	993	991

NURSING HOME TO COMMUNITY PROGRAM

	Nursing Home Residents Assessed by CASA						Nursing Home Residents Discharged with CASA Involvement				
Year	Age 0-59	%	Age 60+	%	Totals		Age 0-59	%	Age 60+	%	Totals
2008	31	*5%*	648	*95%*	**679**		23	*5%*	452	*95%*	**475**
2009	47	*7%*	617	*93%*	**664**		29	*7%*	377	*93%*	**406**
2010	39	*9%*	397	*91%*	**436**		25	*13%*	172	*87%*	**197**
2011	28	*6%*	412	*94%*	**440**		14	*7%*	191	*93%*	**205**
2012	30	*9%*	318	*91%*	**348**		16	*7%*	217	*93%*	**233**

In 2012 CASA continued to experience staff shortages due to extended health related absences, retirements and vacated positions. Previously we had two CASA nurses covering all the nursing homes, but we changed this approach and all nurses were given a case load and were also assigned a nursing home in an effort to cover all the programs. Although the number of referrals for this program did have a slight increase in 2012, we have not reached the number of clients assessed to the levels in previous years. The flood of 2011 continues to affect Broome County residents who require Nursing Home Placement. Vestal Park Rehabilitation is still located within Willow Point and Greater Binghamton Health Care Center so there are fewer nursing home beds available. We continue to see residents who are being sent out of the county for rehabilitation or long term stays. Some residents go as far away as Cortland or Montrose, Pennsylvania.

IN-HOME MENTAL HEALTH CARE PROGRAM

18 Active Clients

GENDER	**Number of Clients**	***Percentage***
Male	5	*28%*
Female	13	*72%*
TOTALS	18	*100%*
AGE RANGES		
Less than 60 years old	7	*39%*
60 years old and over	11	*61%*
TOTALS	178	*100%*

CLIENT DEMOGRAPHICS

Profile of Personal Care Aide, Shared Aide, Consumer Directed Personal Assistance Program Long Term Home Health Care Program and Home & Community Based Waiver Active Clients

Gender	Clients	%
Male	145	29
Female	359	71
Total answering the question	504	100

Housing	Clients	%
Own	60	12
Rent/Public	117	23
Rent/Senior/Disabled	135	27
Rent Private	93	19
No Rent; Shared Residence	56	11
Life Use	24	5
Mobile Home	8	2
Single Room Occupancy	1	0
Other	4	1
Boarding Home	2	0
Skilled Nursing Facility	0	0
Total answering the question	500	100

Marital Status	Clients	%
Married	80	16
Widowed	141	28
Separated	24	5
Divorced	121	24
Never Married 18 and over	133	27
Total answering the question	499	100

With Whom Do You Live?	Clients	%
Alone	279	56
Spouse Only	56	11
Child/Children (Not Spouse)	59	12
Parent/Guardian	42	8
Family Member other than Spouse or Child	32	6
Lives with Spouse and Child	14	3
Non-relative	13	3
Significant Other	5	1
Total answering the question	500	100

Means of Transportation	Clients	%
Assisted Transportation	35	7
Bus	52	10
Drives Self	52	10
Escort Needed	62	12
Handivan	53	11
Medivan with Stretcher	11	2
Medivan with Wheelchair	121	24
Others Drive	368	73
Senior Van	8	2
Taxi	131	26
(Client may have more than one means of transportation)		

Source of Income	Clients	%
Social Security/General	215	43
Social Security/Disability	148	29
SSI	244	48
(Client may receive income from more than one source)		

Personal Hygiene	Clients	%
Totally Able	192	39
Needs Some Assistance/Supervision	216	43
Needs Maximum Assistance	92	18
Totally Unwilling to Perform	0	0
Total answering the question	500	100

Bathing	Clients	%
Totally Able	183	36
Needs Some Assistance/Supervision	224	45
Needs Maximum Assistance	95	19
Totally Unwilling to Perform	1	0
Total answering the question	503	100

Shopping	Clients	%
Totally Able	29	6
Needs Some Assistance/Supervision	208	41
Needs Maximum Assistance	265	53
Totally Unwilling to Perform	1	0
Total answering the question	503	100

Housekeeping	Clients	%
Totally Able	13	3
Needs Some Assistance/Supervision	223	44
Needs Maximum Assistance	265	53
Totally Unwilling to Perform	2	0
Total answering the question	503	100

2012 CASA ADVISORY BOARD MEMBERS

Lisanne P. Bobby Lourdes Hospital 169 Riverside Dr. Binghamton, NY 13905	Kathleen Burke GHS Federal Credit Union 910 Front St. Binghamton, NY 13905	Dr. Kathleen Colling Consultant 421 Castleman Rd. Vestal, NY 13850
Karen Conn Medicine Shoppe Pharmacy 1188 Vestal Ave. Binghamton, NY 13903	Shelli Cordisco Action for Older Persons 32 West State St. Binghamton, NY 13901	Jill Cunningham UHS Home Care 4401 Vestal Parkway East Vestal, NY 13850
Saraann Delafield 5602 Route 79 Port Crane, NY 13833	Diane Dirlam 39½ Morgan Rd. Binghamton, NY 13903	Candace Gregory First Call For Help P.O. Box 550 Binghamton, NY 13902
Mary Haupt Binghamton University P.O. Box 6000 Binghamton, NY 13902	Denise Johnson Vestal Nursing Center 860 Old Vestal Rd. Vestal, NY 13850	Rosemary Mahon Independent Advocate 37 Broome St. Binghamton, NY 13903
Rick McCarthy AVRE 174 Court St. Binghamton, NY 13901	Laura O'Hara STIC 135 E. Frederick St. Binghamton, NY 13904	Sharon Phipps Ideal LTHHC 508 High Ave. Endicott, NY 13760
Sandra Sanzo BC-DSS - Medical Services 36-38 Main St. Binghamton, NY 13901	Barbara Travis BC CASA Program Coordinator 60 Hawley St. Binghamton, NY 13901	