



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF AGING
555 Walnut Street, 5th Floor
HARRISBURG, PENNSYLVANIA
17101-1919

SECRETARY OF AGING

(717) 783-1550

May 23, 2007

To All Pennsylvanians

For the first time, Pennsylvania has a compilation of information about the Commonwealth's senior community centers. Previously much of this information was only anecdotal. Seventy-eight percent or 408 of 520 centers completed the survey which provided the statistics for the Pennsylvania Senior Community Center Capacity Survey Report.

The results of this survey document the activities and profiles of the senior centers. As you review the document you will see the strengths of the senior centers, such as the abundance of senior centers available to older Pennsylvanians throughout the Commonwealth and their ability to adapt to serving varied and diversified communities. Senior Centers provide an array of services which includes opportunities for socialization and personal development, nutritious meals, exercise programs, health information and promotional activities to formal classes which have enriched the lives of the participants of the center. Senior Centers have successfully diversified funding sources for the operation of the centers. The survey results also provide information that will allow senior centers to compare and contrast their services, as well as analyze and anticipate future needs of the older population.

The following highlights are just a few of the statistics from the senior community center survey that have been reported by the participating senior community centers:

Center location:

- 51% indicated that they are located in rural communities, 27% are in urban areas and 22% are in suburban areas.
- 60% of senior community centers are in rented facilities.
- 60% of centers are subcontractors of AAAs.
- Centers are able to prosper in a variety of settings, with the most frequently noted type of facility being as a free standing senior center.

Attendance:

- 67% of centers reported a daily attendance within 1-50 people.

- 63% of centers responding reported that men accounted for up to 25% of the daily attendance.
- 55% of the centers reported that up to half of their participants are between the ages of 70-79.
- African American center participation was reported at up to 25% for about 40% of the centers.
- Hispanic participation was reported as up to 25% in 28% of the centers.
- 29% of the centers reported up to 25% of their attendees as members of other ethnic minority groups.
- About half of the centers reported an increase in participation over the last few years with 13% reporting no change.

Budget:

- 37% of the centers reported budgets between \$19,001 and \$52,000.

Funding:

- 53% of the centers reported that 75% to 100% of their funding comes from the Aging Services Block Grant.

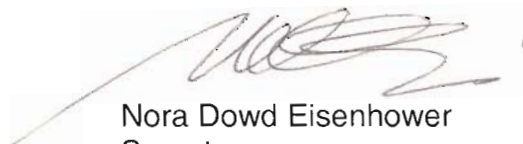
Senior Community Center hours, activities and staff:

- 54% of centers open between the hours of 6-10a.m. and close between 3:30 and 5p.m.
- The activity reported most frequently, in 96% of the centers, was educational speakers or classes.
- 76% of the centers reported having one or no full time staff employed at the center.
- Senior center managers reportedly work about 30 hours per week, have been in the position 8 years and have an average yearly salary of just under \$19,000.

This report is the culmination of efforts by representatives from the Pennsylvania Association of Area Agencies on Aging (PAAAA) and the Pennsylvania Association of Senior Centers (PASC) in partnership with the Pennsylvania Department of Aging. The senior community centers that responded to this survey must also be commended.

Senior community centers are undoubtedly a vital resource in addressing the needs of older Pennsylvanians. The information contained within the report is theirs to use as they address the future needs of their participants.

Sincerely,



Nora Dowd Eisenhower
Secretary

The Pennsylvania Senior Community Center Capacity Survey

A product of the Pennsylvania Department of Aging and
The Joint Committee on Senior Centers

The mission of the Pennsylvania Department of Aging is to enhance the quality of life of all older Pennsylvanians by empowering diverse communities, the family and the individual. In partnership with 52 local Area Agencies on Aging, the Department provides a variety of programs, services and opportunities for older Pennsylvanians to continue to prosper and grow as they age.

Edward G. Rendell
Governor

Nora Dowd Eisenhower
Secretary of Aging

The Department can be reached at:

555 Walnut Street, 5th Floor
Harrisburg, Pennsylvania 17101-1919
Phone: (717) 783-1550
Fax: (717) 783-6842
Web address: <http://www.aging.state.pa.us>
Email: aging@state.pa.us



The Joint Committee on Senior Centers is comprised of members of the Pennsylvania Association of Area Agencies on Aging (PAAAA) and the Pennsylvania Association of Senior Centers (PASC) in partnership with the Pennsylvania Department of Aging

Through the generosity of the Pennsylvania Department of Aging, a web site has been developed for the senior center staff and participants of the centers in the Commonwealth. The site can be viewed at <http://www.paseniorcenters.org>

The greatest strength of our senior center is its ability to offer a wide variety of programming that offers mature adults opportunities to learn, grow, stay active and contribute back to the community.

-Amy Cummings-Leight, Executive Director, The Peak Center, Lansdale, PA

Behind only Florida and West Virginia, Pennsylvania has the third largest percentage of older persons, ages 65 and older, in the country. The Commonwealth provides a multitude of programs and services for its large population of older adults, including free transportation, the nations most comprehensive, low cost prescription drug program for older adults,,52 Area Agencies on Aging serving all 67 counties, and approximately 520 senior community centers and an additional 130 satellite, or meal only, sites throughout those counties.

Why Create a Profile?

One of the best things about senior community centers are the stories of how participating in centers have kept people active, given them the opportunity to make new friends, meet their future spouse and even been the reason for some people to get up and get moving every day.

Anecdotal tales about the need for, and success of centers are an important part of the story. But to effectively serve the growing population of older adults in Pennsylvania, we need to learn more about the centers and the role they play. What happens at the center, how many older adults are participating, does it really make a difference and what does it all cost?

To answer these questions and provide a useful product for advocating and increasing the visibility of senior community centers, an up-to-date profile of the centers as they exist now, and how they should be equipped to face the future, needs to be created.

In 2003-04 the process began when the Department funded an award winning research project to study the impact of Senior Community Center participation called, "Understanding the Impact of Senior Community Center Participation on Elders' Health and Well-Being."

Data was reviewed on senior center participants from two of the state's Area Agencies on Aging. Although the study was limited in scope and time, it did begin to provide evidence to the benefits of participation at senior centers and also included an extensive literature review of existing senior center research.

<http://www.aging.state.pa.us/aging/lib/aging/SeniorCenterstudy.pdf>.

The 2007 Capacity Survey is the first attempt by the Department of Aging to collect statewide information about all the senior community centers in Pennsylvania on a detailed basis.

How was it done?

The method to gather the necessary data concerning senior community centers was facilitated by reviewing a similar survey used by the North Carolina Division of Aging to produce their capacity report in 2002. Once the survey was edited to make it applicable

to Pennsylvania, The Department and the Joint Committee on Senior Centers agreed to its content and data collection began in November of 2005.

The resource for completion of the survey was the 520 senior community centers receiving Older Americans Act money as well as state and local funding through the Pennsylvania Department of Aging via the 52 Area Agencies on Aging. Although the Department also funds satellite sites, which are primarily meal only sites, it was decided that only senior centers meeting the definition in the senior center Aging Program Directive would be targeted for this survey (see definitions in Appendix B). Furthermore, the Department recognizes that other locations in the state may serve as gathering places for seniors, but if they do not receive Department funds, they were excluded from the survey.

The survey tool was placed on the Department's website for easy access by all senior centers and Area Agencies on Aging. A hard copy of the survey was also mailed or emailed to each Area Agency on Aging and the PA Association of Senior Centers provided additional publicity. All Area Agencies on Aging were asked to complete the surveys on behalf of their funded centers or to encourage the centers to complete their own survey. Participation in the survey was voluntary.

Respondents were asked to provide answers to the best of their abilities based on the questions asked. No one contacted them for clarification of those answers, with the exception of trying to collect missing budget information from a small number of centers. At the end of the survey period, 408 centers (of 520) had completed the survey. This was an outstanding 78% response rate. PAAAA and PASC along with the Joint Committee on Senior Centers are to be commended for their efforts to obtain such a high response rate. A special thanks goes to the senior centers for their time and effort in completing this survey and providing this valuable information.

Use of the web based format aided in the data collection. Data was electronically collected and downloaded into an Access database for analysis. Kathy Salsman, a candidate pursuing her Master's Degree in Gerontology at Shippensburg University of Pennsylvania, was invited to conduct her internship with the Department by providing an analysis of the data. The Department acknowledges and thanks Ms. Salsman for her fine work in compiling the results of this survey.

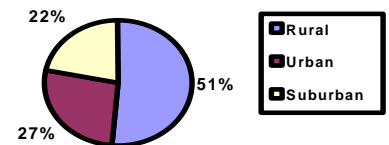
Profile of the Centers

The following report provides a profile of senior community centers based on the information collected during the survey process. Although every effort was made to write the questions as clearly as possible, acknowledgement is given that some questions may have been interpreted in different ways and thus would yield different results. Additionally, the respondents were asked to reply to several questions based on the answer that best reflected their opinion (e.g. Is the center in a rural, urban or suburban community?). Unless otherwise noted, data reported is based on 408 responses.

Senior Centers: The Facilities, The Locations

It is important to look first at the facilities and locations of the senior community centers in the state. Perhaps one of the best aspects that can be said of Pennsylvania's senior community centers is that they are community based organizations located in a variety of places—in free standing buildings, in community centers, in churches and in firehouses. One of the real challenges that Pennsylvania faces is the reach of its transportation system. Some form of transportation is provided to older Pennsylvanians in all counties of the Commonwealth. This includes rides to senior community centers but such rides can sometimes be long in many of the rural areas, and may not be convenient in the urban and suburban areas.

When asked to choose the one category that best describes the type of community their center services, slightly over half, 51% indicated they served a rural community. Urban and suburban were rather close by comparison, with 22% indicating suburban and 27% reporting urban areas. Pittsburgh in Allegheny County and Philadelphia in Philadelphia County are home to a large number of centers in the urban areas.

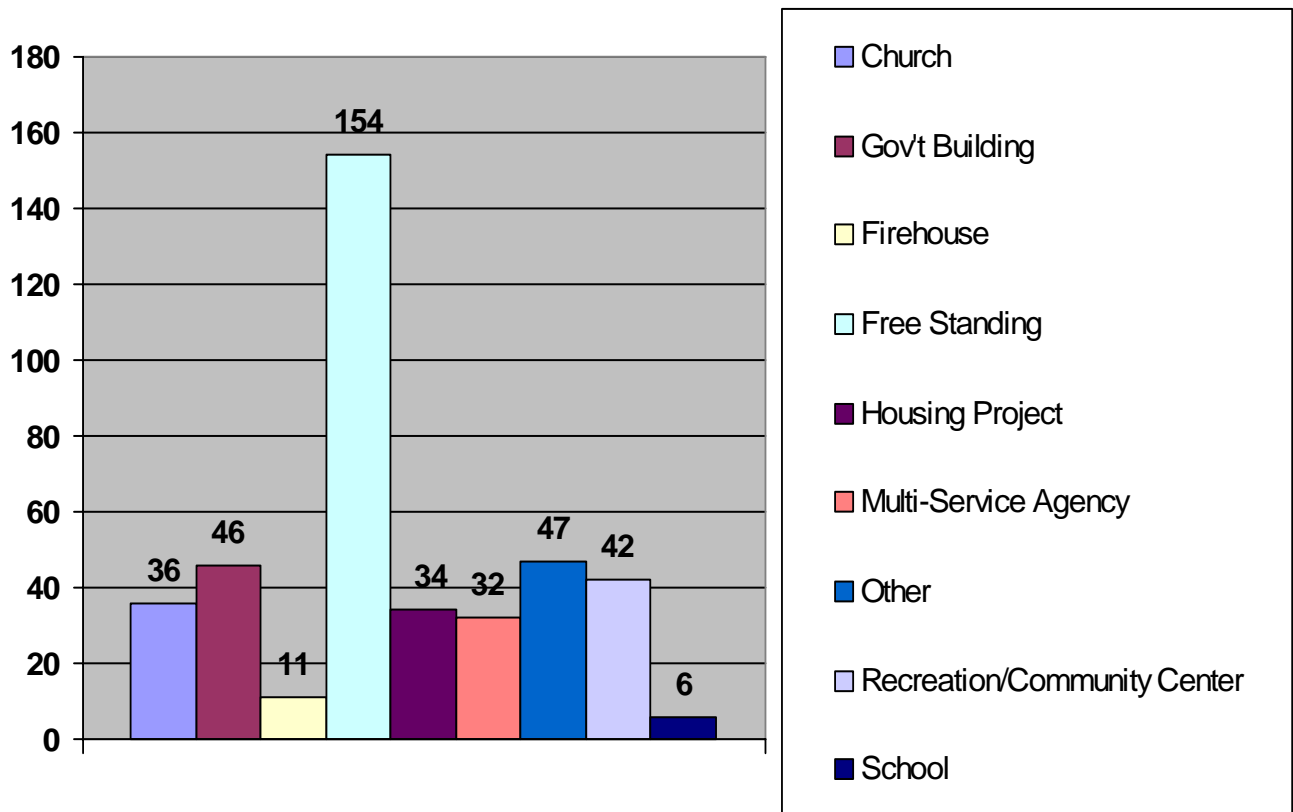


Locating and keeping space for a center can sometimes be a challenge. In many communities, adequate space that is suitable for the needs of seniors may not be available, and the need to assure compliance with the Americans with Disabilities Act provides an added qualification that can potentially disqualify many locations. On a positive note, most requests to move centers stem from the need to have more space to accommodate a growing number of programs and participants. The majority of centers (60%) are renting the facilities in which their senior centers operate. Renting of the facility is the most prevalent for rural and suburban community type while in urban areas, a slight majority indicate that they own their facilities.

Some mention of the agencies that operate senior centers must also be made. Those Area Agencies on Aging under the auspices of the Pennsylvania county government system are often not able to acquire and thus own buildings in which they operate. This

may account for the majority of center facilities being rented, but again, no additional comments were collected regarding this question. It could also be interpreted that more funding is available in urban areas, and a bigger pool of possible outside contributors could be harnessed to acquire the funding necessary to buy a facility.

Respondents were asked to choose one best answer that describes the location of their senior center. Centers may fit multiple categories, but this survey did not capture those circumstances. The table below indicates that centers are able to use and prosper in a variety of settings:



In all types of communities, a significant number of respondents indicate that they operate in free standing facilities. County/local government buildings, recreation or community centers and buildings falling into the ‘other’ category are all fairly common in rural areas. Churches and county/local government buildings are frequently used in the suburban areas. Multi-service agency buildings and recreation/community centers frequently house senior centers in the urban areas.

To gauge the size of the senior community centers, a question was asked about the square footage of the center itself as well as how much of that square footage is used for programs, activities and the meal program (i.e. not office space). Pennsylvania does not define the minimum square footage necessary in which to operate senior centers. This allows the flexibility of finding space to suit the local programs offered and the numbers served.

The average space reported was 4,257 square feet.

- 50% of centers reported 0-2,800 square feet.
- 45% of centers reported 2,801-12,000 square feet.
- 5% of centers reported 12,001 square feet and over.

It appears that the amount of space devoted to office space is quite small compared to the square footage devoted to programs and activities

Participants and Attendance:

Respondents were asked to estimate how many unduplicated eligible individuals visited their centers on an average day for any activity, service or program provided or to take part in a congregate meal. Although the number of participants visiting a senior center does not tell all there is to know about a center, for many, participation rates are often seen as the measure of worth of an organization. Well over half of respondents (67%) indicated that their average daily attendance was anywhere from 1 to 50 people (respondents chose either the 1-25 category or the 26-50 category). Due to limitations in the choice of reporting category and the fact that no additional comments about participation rates were collected, it is acknowledged that the reported number is only an average and there are more than likely days of the week that are better attended than others.

As can be seen in the table below, attendance in rural, suburban and urban areas varies:

Estimated Unduplicated Individuals by Community Type

<u># of Unduplicated Individuals</u>		<u># of Centers by Community Type</u>			<u>Total</u>
		<u>Rural</u>	<u>Suburban</u>	<u>Urban</u>	
<u>Range of # of Individuals</u>					
	1-25	105	21	18	144
	26-50	73	27	31	131
	51-70	19	17	21	57
	71-100	6	15	24	45
	101-150	2	5	13	20
	151+	1	5	5	11
Total		206	90	112	408

Most rural centers reported participation rates in the 1 to 50 range, while the suburban and urban reporting numbers were more evenly distributed.

Satellite Centers:

As defined in Appendix A, satellite centers are primarily meal sites with a minimum amount of programming on site. However, all satellite sites are affiliated with a senior community center thereby providing opportunities for programs, activities and services that would not normally be found at a satellite site. The days of operation vary greatly within the satellite centers. One satellite may be open once a week, another only once a month depending on the location of the center as well as the needs and wants of the senior population it serves. Satellites are a great way to create a connection with a senior population that may otherwise go unserved.

Eighty-six percent (352) of the senior centers responding noted that they do not have any satellite centers affiliated with them. Six percent (26) have one satellite center and 5 percent (21) have two satellites. Other responses indicated a range from three to 17 satellite centers, but only two percent (9) senior centers reported within this range.

Of the 68 reported satellite centers affiliated with senior centers, 30 reported a range of one to 25 total unduplicated eligible individuals visiting the satellite centers, when open, followed by 18 centers reporting 26 to 50 visitors. The remaining 20 satellites report attendance at over 50 on the days that they are open.

Participant Demographics:

The next set of questions asked of the senior centers concerned demographics. . Centers were asked to report on the number of men attending their centers, members of ethnic/minority groups, age ranges of participants and whether individuals had mobility or health related issues.

Gender:

As is probably the norm across the country when discussing senior center participation, women far outnumber male attendees. Pennsylvania is no different. A majority of respondents, 63% or 258 centers, indicated that men only account for up to a quarter of their average number of attendees at the center on a given day. The remaining 146 centers reporting indicated that men make over 26% of the attendance with 33% (136) indicating men compose 26% to 50 % of the attendance at the center. 2 centers reported that male attendance was 76% to 100%.

Ethnic/Minority Group attendance:

A majority of centers have reported that they have no participants at the center who are African American, Hispanic, or of other ethnic minority groups. This is not very

surprising in viewing the overall demographic minority composition of the state. Some interesting statistics to consider, however, are the following:

- 40% of centers report that between 1 and 25% of their attendees are African American.
- 28% of centers report that between 1 and 25% of their attendees are Hispanic.
- 29% of centers report that between 1 and 25% of their attendees are members of other ethnic minority groups.

Age Ranges:

Senior centers reported the following about the age ranges of their participants. Respondents were to answer each category independently and so there is some overlap of responses that bring the total to more than 100%. Standards for senior center eligibility specify ages 60 and older based on funding from the Older Americans Act. Some centers do utilize outside funding that would allow service to younger population groups.

Based on the reports, centers are serving a population that is predominantly above the age of 70. Fifty-five percent (227) of the centers report that up to half of their number of participants fall into the 70 to 79 years of age range. About 52% (210) of the centers reported that their participants in the 80 to 89 years of age range compose 26% to 50% of their visitors. Those in the range of 60 to 69 years of age only represent up to a quarter of participants for about 72% (292) centers. On the other end of the age scale (90 + years of age) almost 83% (336) of centers report that up to quarter of their participants fall into this range. On a promising note, too, 61% (247) of the respondents indicated that they are seeing up to a quarter of their participants falling into the youngest age ranges on the survey of 55 to 59 years of age. (Once again it must be noted that due to the broad categories for this survey, one person in a category could be counted the same as several)

Mobility and Health Related Issues:

Senior centers in Pennsylvania should be as inclusive as possible and consideration should be given to those older consumers residing in rural areas and those with disabilities. That being said, access to services should not be determined solely by a person's physical or mental capability. Because the number of staff varies across senior centers and the types of buildings where the centers are located differ, ongoing consideration must be given to making senior centers as accessible and accommodating as possible for all consumers.

Respondents to the survey were asked to qualify the average number of participants who fall into the four categories of need: those needing assistance to get around, those

who have some form of dementia, participants with mental retardation and participants with mental health issues.

Despite the focus on more healthy and mobile seniors, an overwhelming majority of centers, (87%), report that up to a quarter (1-25%)* of their participants need assistance in getting around. Assistance could mean using a walker, using a wheelchair or needing to be helped by another person.

An equally overwhelming majority of centers (75%) report that up to a quarter (1-25%)* of their participants have some form of dementia. While this may be a significant statistic, there is no scientific basis for this qualification and it must be remembered that this number is reported based on best estimates and assumptions.

The number of centers reporting participants with mental health issues is slightly larger than reporting of those with mental retardation. 63% of centers report that up to a quarter of participants have mental health issues. 51% of centers report that up to a quarter (1-25%)* of participants have mental retardation.

* Please note that up to a quarter (1-25%) is a broad range and that one individual reported in this category would result in this category being selected. Future surveys will need to be more precise.

Changes in Participation:

The change in participation rates of any program or service can have a multitude of impacts on its future. If participation rates increase, the program is often viewed as being successful. If rates fall, however, it is automatically assumed the program is unsuccessful. Senior centers continually have challenges to their participation rates. The likes and dislikes of seniors may change and the center meets or does not meet the challenge. New senior housing may bring in a new population to serve, or the lack of housing may cause seniors to leave. Seniors who 'built the center and its programs and services from the bottom up' no longer participate, and no seniors are there to replace them. New or updated facilities attract more people.

On a positive note for the centers in Pennsylvania, about half (202) of the senior centers responded that their participation rates have increased over the past five years. Only 38% (153) indicated that attendance had decreased during this timeframe, with 13% (53) reporting no change in the total number of participants. There is growth in the number of men participating, the number of those in ethnic or minority groups and those in the 55-59 years of age range. As would be expected with an ever aging population, the number of frail participants is increasing. It is also noted that those who are 90 years of age or older continue to attend senior centers and stay active, as an increase has been noted over the last 5 years. (See age ranges on page 9.)

The reported changes noted in the chart below indicate that rural centers marked the highest number of centers decreasing in participants. Of the 206 rural centers

reporting; 88 noted a decrease. Suburban and urban centers noted that more than half of those reporting marked an increase in participation.

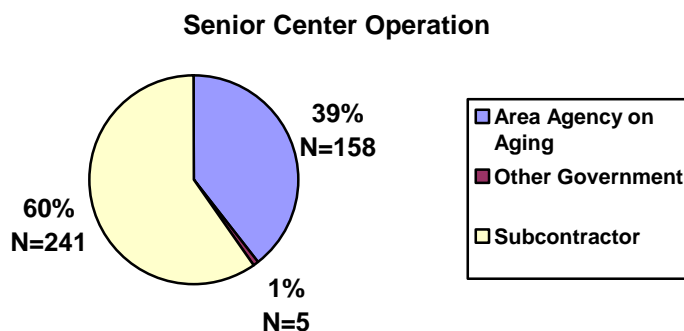
Total Participants Changes by Community Type

Participant Changes	# of Centers by Community Type			Total
	Rural	Suburban	Urban	
Decreased	88	28	37	153
Increased	82	54	66	202
Same	36	8	9	53
Total	206	90	112	408

Administration:

The Pennsylvania Department of Aging provides minimum operating standards for senior community centers operated with its funding. Funding is provided to each of the 52 Area Agencies on Aging (AAAs) through an Aging Services Block Grant process that allocates funding based on an allocation formula. The AAAs determine, to a large extent, how much of any given service is available in their local areas, and this includes senior centers. Some AAAs do operate senior centers directly, i.e. center managers are AAA staff. Other AAAs have contracts with outside providers who operate centers. In some cases, AAAs will do both.

When respondents were asked which ONE statement best describes the operation of their senior center, i.e., which entity they are operated by, 404 replied the following:



The majority of centers, 66%, (268) have indicated that the center holds a not for profit tax status. Four percent (15) have indicated they are of private for profit status and the remaining 30% (121) consider themselves public. (Total responses for this question were 404.)

The following table reflects the relationship between tax status and type of operation:

Tax Status by Type of Operation

Tax Status	Operated By				Total
	AAA	Government	Subcontract	Not Reported	
Not Reported	0	0	0	4	4
Private, for profit	0	0	15	0	15*
Private, not for profit	79	0	189	0	268
Public	79	5	37	0	121
Total	158	5	241	4	408

*Further research needs to be done to determine if centers are actually profit making or if this is a reporting error.

Policy Making and Senior Center Councils:

Although neither a Senior Center Council/Advisory Boards nor a policy making board like a Board of Directors is a requirement of the minimum operating standards of centers, a large number of centers have either one or both boards to direct them in providing senior center services.

Almost half (48 %) of centers have indicated they have a policy making board such as a Board of Directors. Although the majority of these boards have between three and nine members, 9% have a board comprised of 20 to 32 members. Of those using a policy making board, all but 1% have individuals over the age of 60 serving as members and in 36% of boards, over half of the members are ages 60 and older. On those same boards, all but 27% have a representative who is a senior center participant serving on them, and on 37% of the boards, over half of the members are senior center participants.

Collaboration:

Senior community centers serve members of the community where they are located. By collaborating with other organizations and agencies, whether to provide individual assistance/information to their participants or to take advantage of programs and activities offered, centers draw strength from working with other organizations. The benefits to those involved in the collaboration extend both ways. When asked to provide information about with whom they collaborate/do not collaborate and the extent to which they collaborate with them, senior center respondents provided the following as the top ten in each category:

Have Ongoing Cooperation/Collaboration:

- Area Agencies on Aging
- Schools
- County Social Service Agencies

- Farmers' Markets (Farmers' Market Nutrition Program)
- Health Departments (local or state)
- Hospitals
- Community Food Banks
- Libraries
- Faith Based Community Organizations
- Home Care Agencies

In addition, centers noted collaborating most often with the following organizations on an "As Needed" basis:

- Health Departments (local or state)
- Hospitals
- Home Care Agencies
- Faith Based Community Organizations
- Mental Health Services
- Nursing Homes
- Libraries
- Assisted Living Facilities
- Parks and Recreation
- Farmers' Markets (Farmers' Market Nutrition Program)

This list notes those organizations that most centers commonly reported having "Little or No Contact":

- Art or Humanities Councils (local or state)
- Adult Day Care Providers
- United Way
- YMCA/YWCA
- Parks and Recreation
- Family Resource Centers
- Community Colleges
- Nursing Homes
- Libraries
- Community Food Banks

As would be assumed, not every agency/organization will be available in every area. Respondents were asked to indicate a "Not Applicable" (N/A) response if no such organization existed in their area. The following list indicates the organizations noted most often in response to this question:

- Adult Day Care Providers
- Arts and Humanities Councils (state or local)
- Community Colleges
- Family Resource Centers
- YMCA/YWCA

- United Way
- Parks and Recreation

Budget:

Please note that the question as posed, 'What is your total senior center budget for SFY 2004-05?' is open to interpretation by the individual completing the survey. This interpretation became apparent when answers were provided that indicated there were identical budgets for a number of centers operating in the same county, even though other factors between those centers were dissimilar. As with other questions from the survey, no attempts to discern clarification on the inputted information were made.

As reported, the range of total senior center budgets for SFY 2004-05 reflected a low of \$57 (excluding those with a zero response) and a high of \$2,700,000. The mean average budget amount was \$163,380.

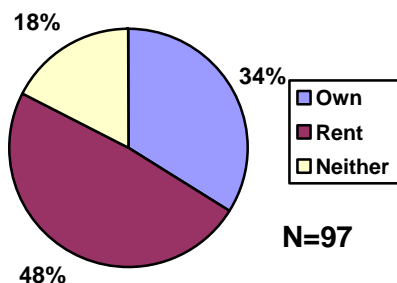
- 97 centers reported a budget between \$0-\$19,000
- 106 centers reported a budget between \$19,001-\$52,000
- 102 centers reported a budget between \$52,001-\$136,000
- 103 centers reported a budget between \$136,001-\$2,700,000

The size of the reported total budget was compared with the type of facility in which the center operates, the nature of the community in which it operates (rural, suburban or urban) and its tax status. The results are displayed below.

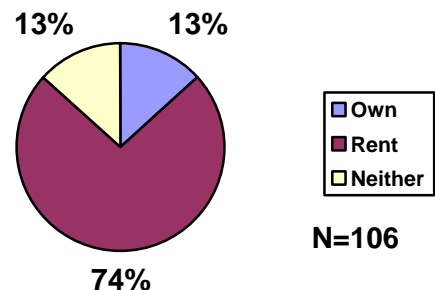
Owning, renting or neither

In all budget categories listed below, renting space is the majority option for facilities.

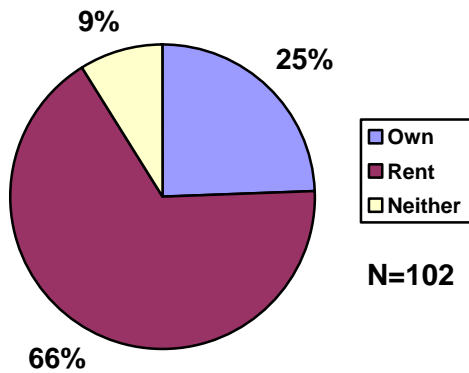
Reported Budget of \$0 to \$19,000:



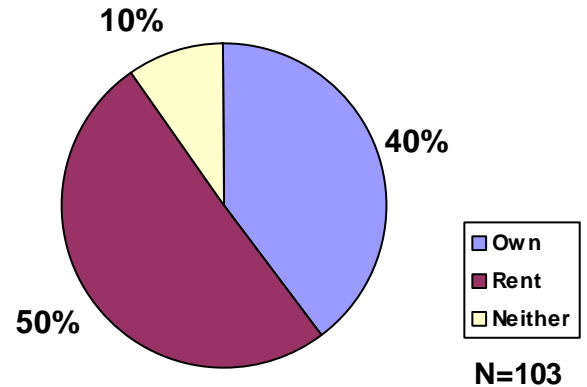
Reported Budget of \$19,001 to \$52,000



Reported Budget of \$52,001 to \$136,000



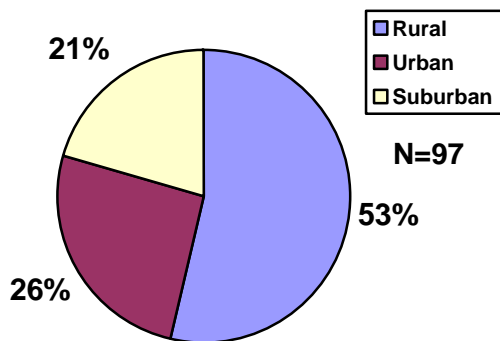
Reported Budget of \$136,000 to \$2,700,000



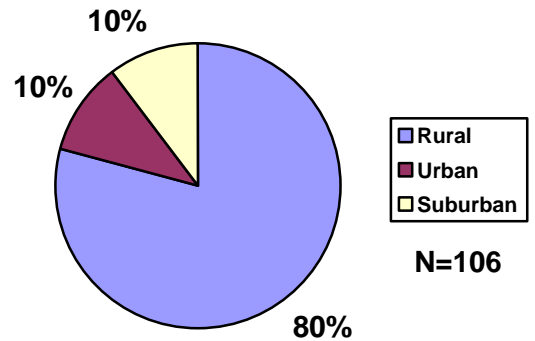
Rural, urban, or suburban:

In those same budget categories, comparisons of budgets within rural, urban and suburban locations are shown. The greatest numbers of senior centers with large budgets (more than \$136,000) are located in urban or suburban areas.

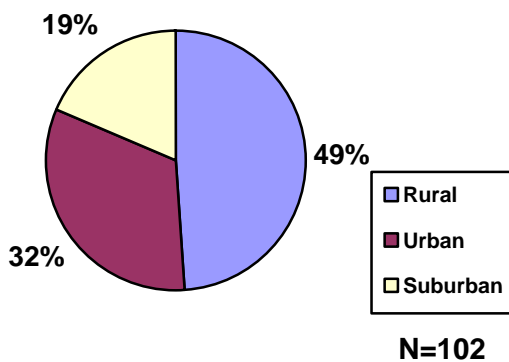
Reported Budget of \$0 to \$19,000



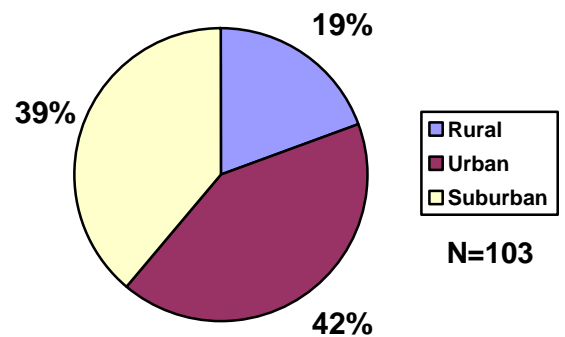
Reported Budget of \$19,001 to \$52,000



Reported Budget of \$52,001 to \$136,000



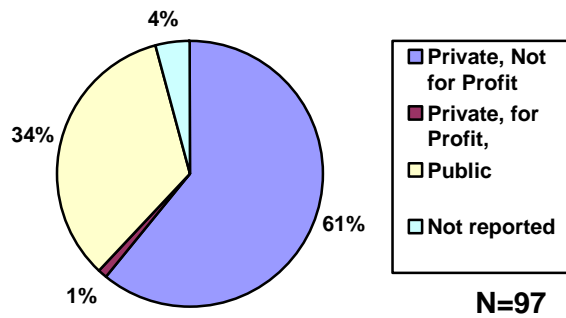
Reported Budget of \$136,001 to 2,700,000



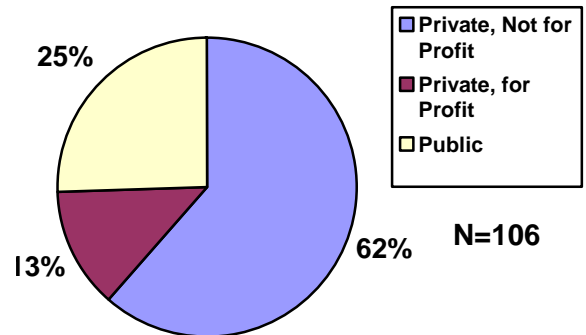
Tax status:

The same budget categories were used to determine the following charts regarding tax status of centers. As would be expected, the overwhelming majority of centers are either private not for profit or public entities.

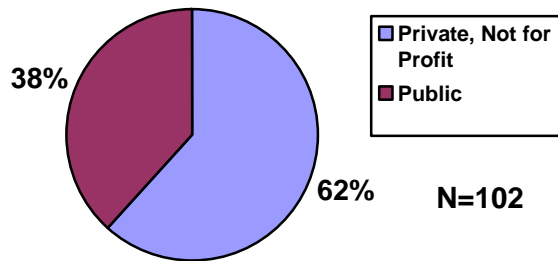
Reported budget of \$0 to \$19,000



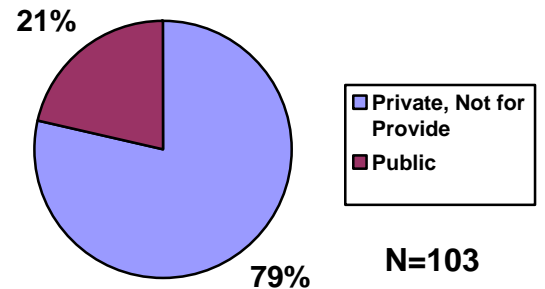
Reported Budget of \$19,001 to \$52,000



Reported Budget of \$52,001 to \$136,000



Reported Budget of \$136,001 to \$2,700,000



Funding Sources:

Where centers locate and secure funding is very important. As indicated earlier in this report, the centers participating in this survey receive funding from the Pennsylvania Department of Aging via the network of area agencies on aging through the Aging Services Block Grant. It is recognized, however, that centers are not likely to be fully funded from this source. The minimum operating standards of the centers indicates that senior centers are to develop a resource diversification plan to devise strategies for center personnel to seek/provide additional funding for center operations. As is seen in the survey results, funding comes from a variety of sources.

- Fifty-three percent of the centers reported that a majority of their funding (75 to 100%) is from the aging services block grant via the area agency on aging that oversees them. The majority of centers in this category have budgets falling in the \$19,001 to \$52,000 range.

- Fourteen percent indicate that between 50 and 75% of their funding is from that same source.
- Fifteen percent indicate that they receive 25 to 50% of their funding through the block grant.
- In addition to the block grant, the following sources of funding were reported:
 1. Local governments:
 - Provide up to a quarter of the budget for 39% of the centers.
 - 53% of centers receive no funding from this source.
 2. Participant contributions:
 - Provide up to a quarter of the budget for 74% of the centers.
 - 21% of centers report receiving no funds from this source.
 3. United Way:
 - Provides up to a quarter of the budget for 19% of the centers.
 - 79% of centers report receiving no funds from this source.
 4. Donations and fundraising:
 - Provide up to a quarter of the budget for 71% of the centers.
 - 16% of centers report receiving no funds from this source.
 5. Fees for activities and/or programs:
 - Provide up to a quarter of the budget for 27% of the centers.
 - 70% of centers report receiving no funds from that source.
 6. Grants
 - Provide up to a quarter of the budget for 39% of the centers.
 - 58% of centers report receiving no funds from that source.

Methods for Gathering Participant Input:

Survey respondents were asked about the methods they use to gather program and activity input from participants on a regular basis. It is always a challenge to meet the needs and wants of a group of people, gathering input from participants helps strengthen the choices made and gives the participants a feeling of belonging and ownership for their center activities.

Shown in the table below, the most used method of gathering input is having informal discussions with participants. Written questionnaires and gathering input via the senior center councils or advisory boards also are frequently used. (Please note that a 1 percent “not reported” percentage existed for each evaluation method.)

Participant Input Method Usage

<u>Method</u>	<u>Used</u>	<u>Not Used</u>
Written questionnaires	75%	24%
After program evaluations	68%	31%
Focus groups	26%	73%
Informal discussions	93%	6%
Program planning committee	48%	52%
Internet questionnaires	2%	97%
Community survey	33%	66%
Survey of non-participants	19%	80%
Via the senior center council or advisory board	70%	29%

Hours of Operation:

A number of factors combine to determine the hours of operation that a senior center may operate within—available transportation, available space, funding, participant desires to attend and others. The hours of operation, therefore, are varied. The most frequent patterns for hours of operation are those that open between 6 and 10 AM and stay open until late afternoon from 3:30 to 5:00PM (54%) and those that open in the morning between 6 and 10AM and close between 12 and 3 (46%). A total of 391 centers answered this question (N=391).

As is shown in the table below, those centers that own their facility do have a tendency to stay open longer than those that are renting.

In a similar respect, those centers with the highest budgets (\$136,000 to \$2,700,000) have a tendency to stay open longer hours.

Hours of Operation by Housing

Hours	Own	Rent	Neither	Total
Morning (6-10) until early afternoon (12-3)	33.3% (37 centers)	50.6% (121 centers)	50.0% (21 centers)	45.7% (179 centers)
Morning (6-10) until late afternoon (3:30-5)	65.8% (73 centers)	49.4% (118 centers)	50.0% (21 centers)	54.1% (212 centers)
Total	100% (110 centers)	100% (239 centers)	100% (42 centers)	100% (391 centers)

Hours of Operation by Budget

Hours of Operation			Budget				Total
			low (\$0-\$19,000)	med/low (\$19,001-\$52,000)	med/high (\$52,001-\$136,000)	high (\$136,001-\$2,700,000)	
	Morning (6-10) until early afternoon (12-3)	# of centers	39	58	52	30	179
		% by budget range	44.8%	56.3%	51.5%	29.7%	45.7%
	Morning (6-10) until late afternoon (3:30-5)	# of centers	48	45	48	71	212
		% by budget range	55.2%	43.7%	47.5%	70.3%	54.1%
Total		# of centers	87	103	100	101	391
Total %		% by budget range	100.0%	100.0%	100.0%	100.0%	100.0%

The following reflects the days of operation of centers on given days of the week (note that six responses--1.5 percent-- fell into a "not reported" category).

Day of the Week	Open
Monday	92%
Tuesday	95%
Wednesday	95%
Thursday	95%
Friday	92%

While evening or weekend hours are not the norm within senior center operations, 32 percent did indicate that they have evening or weekend programs. It was reported that the category of "special events" was the main reason for these additional hours.

Activities/Equipment Availability:

As with most things concerning senior centers, the activities and equipment available at the centers varies. Here is a top ten list of those reported as being offered regularly at centers: (note a 1.5 percent "not reported" factor is included):

Activities	Percentage
Educational Speakers or Classes	96%
Card Playing	95%
Health Screening	95%
TV/Video/DVD	95%
Bingo	94%
Fitness/Wellness	90%
Nutrition Education Classes	89%
Trips Outside Area	87%
Craft Classes	81%
Computers for Personal Use	73%

It is encouraging to note that 65% of centers report having an email address and that 28% have a center web site.

Availability of Activities at Centers	Have N=408	Don't Have N=408
Art classes	40%	58%
Billiards	36%	63%
Bingo	94%	5%
Card playing	95%	4%
Center email	65%	34%
Center website	28%	71%
Computer classes	43%	56%
Computers for personal use	73%	26%
Craft classes	81%	18%
Craft facilities	51%	47%
Dancing	48%	51%
Educational Speakers or classes	96%	3%
Exercise equipment	66%	32%
Fitness/wellness classes	90%	9%
Health screenings	95%	3%
Nutrition Education classes	89%	10%
Outdoor recreation	23%	76%
Outdoor sitting area	53%	46%
Pool access or swimming classes	21%	77%
Trips outside of area	87%	12%
TV/Video/DVD	95%	3%
Walking path	36%	63%

Activity Times:

To gain a better understanding of the activity schedules of centers, respondents were asked to indicate the number of regularly scheduled activities that take place during an average week in each of five time slots. The time slots were weekday mornings (before 11:00 am), weekdays mid-day (11:00am - 1:00pm), weekdays early afternoon (1:00pm - 4:00pm), weekdays after 4:00pm and weekends (any/all hours). Meals were to be counted as an activity, and if no activity took place during a time slot or if the center was not open during that time, a zero was to be reported.

As would be expected, a majority of reported activities took place during the day time hours, with the fewest reported numbers of activities taking place during evening and/or weekend hours.

During the weekday morning time slot (before 11:00 am):

- The minimum number of activities reported was zero (19 centers)
- The maximum number of activities reported was 196* (1 center)
- Just about half of the centers (49.5%) indicated that their centers have 9 or fewer activities during this time period

During the weekday's mid-day time slot (11:00am-1:00pm), based on reports from 407 centers:

- The minimum number of activities reported was zero (7 centers)
- The maximum number of activities reported was 60* (one center)
- Just about half of the centers (48.9%) indicated that their centers have 9 or fewer activities during this time period.

During the weekdays early afternoon time slot (1:00pm.-4:00pm):

- The minimum number of activities reported was zero (63 centers)
- The maximum number of activities reported was 60* (one center)
- Just about half of the centers (48%) indicated that their centers have four or fewer activities during this time period.

* These numbers were not verified and seem to be very high.

Activity Fees:

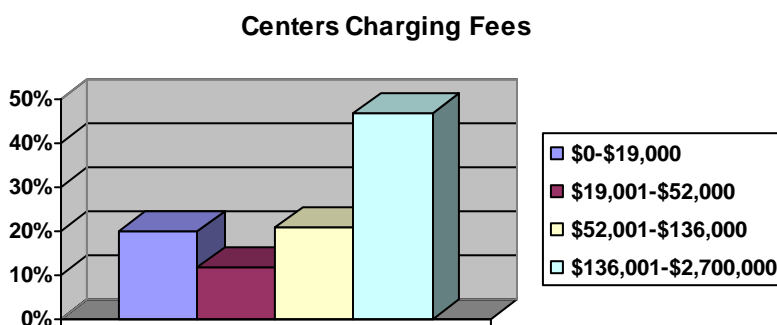
Although senior center standards do not allow centers to charge fees for participants to attend centers, various activity and program fees may be charged, particularly if an instructor needs to be hired or if there are additional costs associated with the program. While it is not mandatory, it is good practice to provide a scholarship or waive the fee for those who are unable to pay the fee. Respondents were asked if they charged a fee for any of their senior center activities/programs and, if they charged fees, whether or not they had scholarships or other ways to finance participants who could not afford the fee.

Only a slight majority of centers responding to this question have indicated that they do not charge a fee (56% or 229 centers). The rest of the centers responding do have some type of program or activity fee, 173 centers. Of those who charge, 95 centers (23 percent) have scholarships or other ways to finance participants who cannot afford the fee and 88 centers (22 percent) do not have alternatives to the activity fee. **Please Note:** the total of 183 centers responding to the scholarship question is higher than the 173 total responses indicating an activity fee was charged in the previous survey question.

The charging/not charging of activity fees was also examined in relation to the center's budget. As seen in the chart below:

- 20% of centers reporting a fee fell within the \$0-\$19,000 budget range.
- 12% of centers reporting a fee fell within the \$19,001-\$52,001 budget range.
- 21% of centers reporting a fee fell within the \$52,001-\$136,000 budget range.
- 47% of centers reporting a fee fell within the \$136,000 to \$2,700,000 budget range.

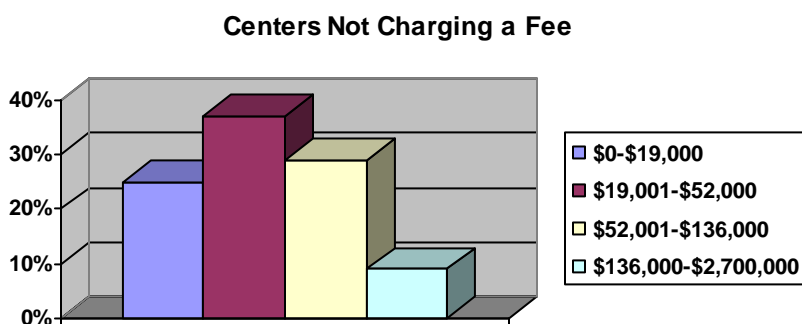
(Whether the fact that they charge fees has helped create such a large budget or whether the large budget necessitates the need to raise additional revenue through charging of fees is not known as no follow up questions were asked regarding this question.)



The chart below displays those centers not charging an activity fee (229 centers). There is no clear majority in terms of budget categories. Again, speculation about the reasons behind such a pattern—perhaps these centers are in lower income areas where individuals cannot afford to be charged a fee, or perhaps they are able to secure more free programs and activities and thus not have to charge a fee—will be just speculation as no follow up questions were asked regarding this question.

The chart below shows the percentages of centers not charging fees by budget category:

- 25% of centers that do not charge fees fell within the \$0-\$19,000 budget range.
- 37% of centers that do not charge fees fell within the \$19,001-\$52,000 budget range.
- 29% of centers that do not charge fees fell within the \$52,001-\$136,000 budget range.
- 9% of centers that do not charge fees fell within the \$136,001-\$2,700,000 budget range.



Congregate and Home Delivered Meals:

In most cases, congregate meal service has been the backbone of senior centers in this country. The earliest centers were built around the meals program as a way of ensuring the provision of healthy meals to socially and economically disadvantaged seniors. The socialization and education benefits gained were sidebars to the provision of healthy food. Through the years, the center network, in Pennsylvania and across the country, has continued to grow and expand to become more than just a meals program for the needy. The growth has not always been easy and those early years still color many people's perceptions of centers as they view them as not much more than a 'soup kitchen' for older people.

Sixty four percent (262) of the senior centers responded that 76 to 100 percent of their unduplicated eligible visitors on an average day participate in the congregate meal program. Of those 262 centers, 57 % are located in rural areas. When comparing meal participation rates to the type of community the center serves, just over half (51%) of meal participants are participating in rural centers with 27% in urban areas and 22% in suburban areas.

Forty-five percent of centers reported a decrease of congregate meal participants in the last five years. Although this is in line with reported anecdotal trends on the national level, it is still encouraging to learn that 33% of centers are seeing an increase in meal participation and 21% are indicating that their numbers are holding steady.

Respondents were asked whether home delivered meals were delivered from their centers. A slight majority (55%) answered that they do deliver meals from their center. Centers in rural areas were more likely to report delivering meals (63%) than those in urban or suburban areas.

Transportation:

Often times, finding transportation to the center can be a barrier to participation. Pennsylvania certainly benefits from a Lottery funded transportation system that offers free transportation in many areas and reduced fare rides (Shared Ride) in every county of the Commonwealth. Respondents were asked to indicate which methods of transportation are utilized by older adults to attend the center and were asked to choose all that applied; therefore each center could provide multiple answers.

Types of Transportation by Community Type

	RURAL CENTERS	PERCENT OF TOTAL	SUBURBAN CENTERS	PERCENT OF TOTAL	URBAN CENTERS	PERCENT OF TOTAL	TOTAL	PERCENT OF TOTAL
Van Service Provided by the Center	19	3%	12	4%	12	3%	43	3%
Car Pool arranged at or by the Center	56	8%	11	3%	19	5%	86	6%
Individuals drive themselves	205	31%	89	28%	101	24%	395	28%
Individuals walk to the Center	156	24%	74	23%	100	24%	330	24%
Shared-Ride Service/County Van	176	27%	80	25%	97	23%	353	25%
Public Transit that stops at or near the Center	49	7%	52	16%	86	21%	187	13%
Total	661	100%	318	100%	415	100%	1394	100%

The highest number of valid responses came from centers classified as rural with 661 selections made. The type of transportation selected the most often by centers classified as rural was individuals driving themselves. This mode was selected 205 times out of 661 or 31% of the responses for rural centers. In fact this mode is ranked

the highest selected mode for all center community types with 395 or 28% of all 1,394 selections. It was selected for 28% of the responses for suburban centers. This mode was tied for the highest ranking at 24% with walking to the center for the urban centers.

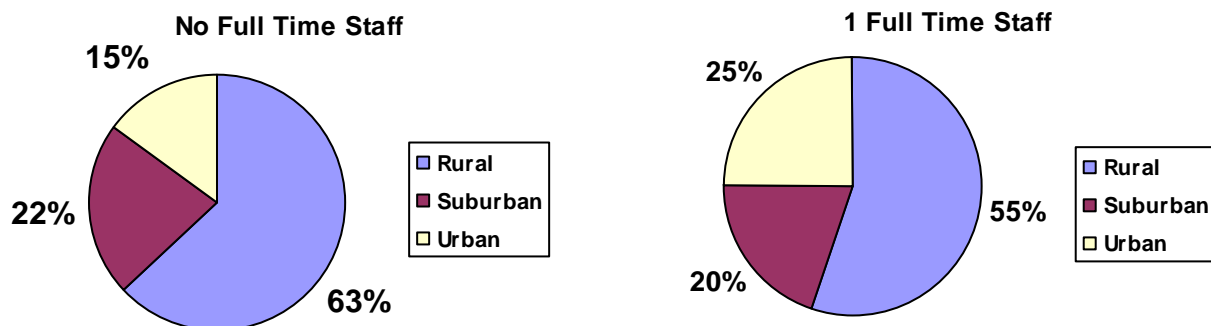
Using the Lottery funded shared ride/county van was the second highest ranked type of transportation selected for all three community types. (It was ranked second for the urban areas but as noted behind walking and driving themselves which were tied.) Walking to the centers was ranked the third highest for suburban and surprisingly rural centers as well.

It should be noted that these three modes of transportation are very close together in terms of the proportion of responses selected by each community type. It should also be noted that selection of these modes does not indicate intensity of use, only that it is one option that is used.

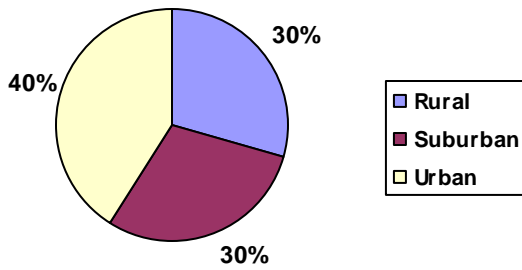
Full Time Staff:

Respondents were asked how many “full time staff” their center employed. It is important to note at this time that “full time staff” was not defined within the survey tool. As such, it is almost certain that different interpretations were made of what constitutes a “full time staff person”, i.e. just the time when the center is open, 40 hours a week, only those with benefits, etc. Clarification of this definition was not provided to respondents nor was follow-up conducted to check for understanding.

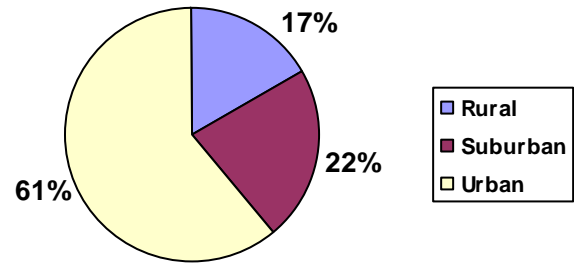
Responses to this question ranged from reports of no full time staff in 168 centers to one center employing 50 full time staff persons (N=408). The vast majority, (76% or 310 centers), report having one or less full time staff persons. As shown in the charts below, rural centers tend to have fewer full time staff (one or none) and urban centers tend to have two or more full time staff.



2 Full Time Staff



3 or More Full Time Staff



Full Time Staff Totals

Staff #	Frequency	Percent
0	168	41.2
1	142	34.8
2	44	10.8
3	17	4.2
4	8	2.0
5	10	2.5
6	6	1.5
7	3	.7
8	1	.2
9	1	.2
10	2	.5
11	1	.2
13	1	.2
15	1	.2
22	1	.2
26	1	.2
50	1	.2
Total	408	100.0

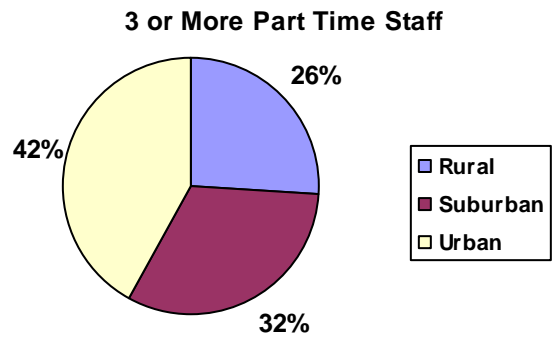
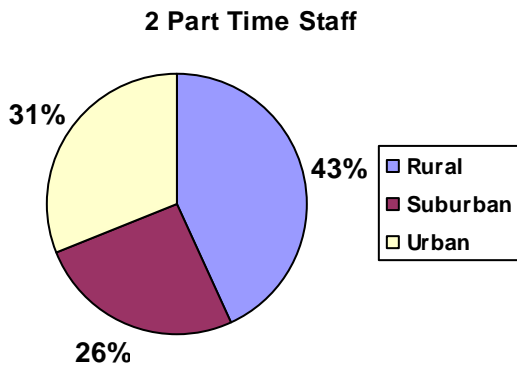
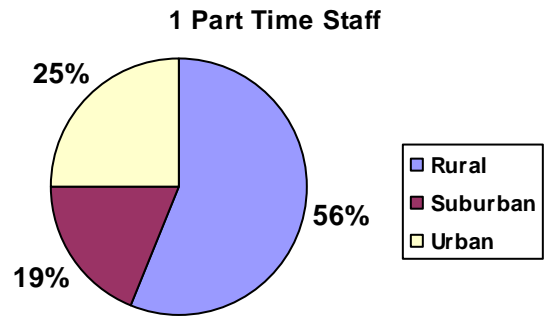
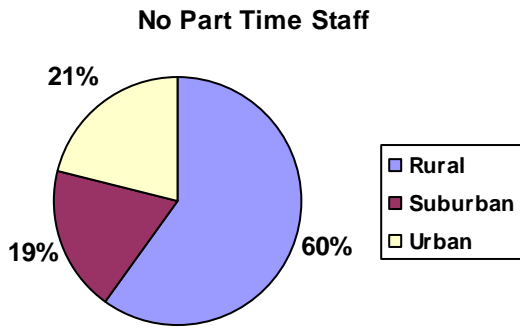
Fifty-three percent or 216 of the centers indicated that they pay health benefits to full time staff members and 17% or 69 do not. A response of “Not Applicable” was received by 29% or 118 of the centers.

Part Time Staff:

Respondents were asked how many “part time staff” their center employed. It is important to note at this time that “part time staff” was not defined within the survey tool. As such, it is likely that different interpretations were made of what constitutes a “part time staff” person. Clarification of this definition was not provided to respondents nor

was follow-up conducted to check for understanding. Responses to this question ranged from reports of “No” part time staff in 114 centers to one center employing 32 part time staff persons (N=408). The vast majority, 70% or 286, of centers report having one or less part time staff persons. As shown in the charts below, rural centers tend to have fewer part time staff (2 or fewer) and urban centers tend to have 3 or more part time staff.

N=408



Part Time Staff Totals

	Frequency	Percent
Staff # 0	114	27.9
1	170	41.7
2	62	15.2
3	26	6.4
4	13	3.2
5	8	2.0
6	7	1.7
7	1	.2
8	3	.7
9	2	.5
14	1	.2
32	1	.2
Total	408	100.0

Fifteen percent or 61 of the centers pay health benefits to part time staff members and 63% or 257 do not. A response of not applicable was received by 22% or 90 of the centers.

Volunteer Staff:

It is recognized that due to organizational, budgetary or other constraints, the oversight of daily operation of the senior center may fall on volunteers. This type of structure is in a definite minority in terms of the centers responding to this survey. Only 6% of the centers (24 of 408) indicated they operated on an entirely volunteer staff basis.

Director/Manager and Position Profile:

A profile of the 'average' director/manager/position at a senior center in Pennsylvania:

Average number of weekly hours worked: 30

Average number of years currently employed in the position: 8

Minimum educational requirements in a majority of positions: High School Diploma/GED
(Minimum requirement in 59% of centers, N=401)

Highest level of education received in a majority of positions: High School Diploma/GED
(Highest level reported in 59% of centers, N=401)

Minimum years of experience in a majority of positions: 0
(40% of centers do not require a minimum number of years)

Average yearly starting salary for the position of Director/Manager \$16,148

Starting salary ranged from \$5.50-\$9.75 an hour for those centers that reported an hourly wage.

Starting salary ranged from \$4000-\$100,000 for those centers reporting an annual salary.

Average yearly salary for current Directors/Managers \$18,989

Current yearly salary ranged from \$6.00-\$11.00 for those centers that reported an hourly wage.

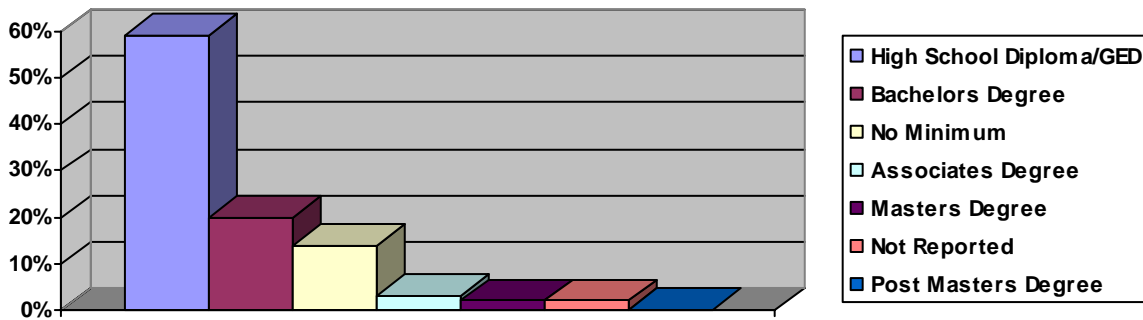
Current yearly salary ranged from \$1,991.60-\$109,000 for those centers reporting an annual salary.

The following provides more details about the data collected regarding the position of director/manager:

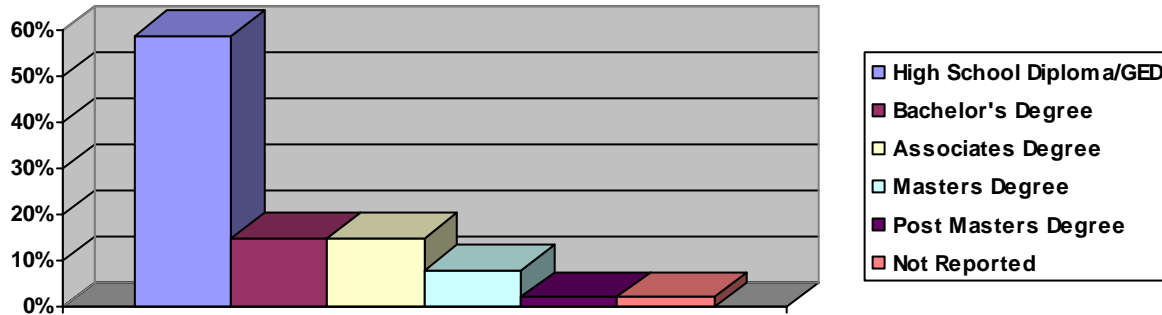
In addition to the average weekly number of hours worked by the Director/Manager, the number of reported hours ranged from 0 to 80 hours. Ninety eight centers (24 percent) reported 37.5 weekly hours, and 53 centers (13 percent) indicated 40 hours were worked.

The number of years of employment for persons currently serving as Director/Manager ranges from 0 to 35 years. The most common response given by 14 percent (56) of the centers was one year of service followed by 11 percent (43) noting two years.

The table below reflects the minimum educational requirement for the Director/Manager.



The table below highlights the highest level of education of the current person in the position:



Director (Minimum Educational Requirement)

Education	Frequency	Percent
Associates Degree	14	3.4
Bachelors Degree	82	20.1
HS Diploma/GED	240	58.8
Masters Degree	9	2.2
No Minimum	55	13.5
Not Reported	7	1.7
Post Masters Degree	1	.2
Total	408	100.0

Director (Current Education)

Education	Frequency	Percent
Associates Degree	60	14.7
Bachelors Degree	62	15.2
HS Diploma/GED	240	58.8
Masters Degree	33	8.1
Not Reported	7	1.7
Post Masters Degree	6	1.5
Total	408	100.0

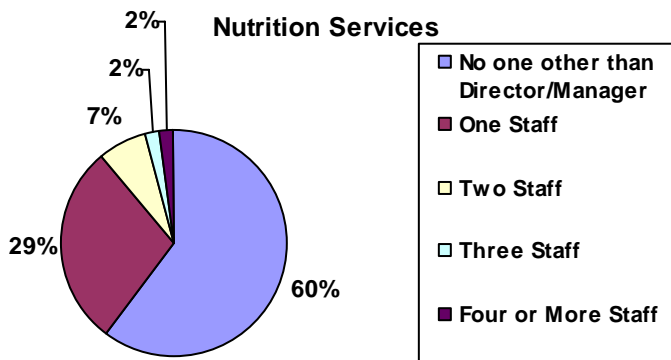
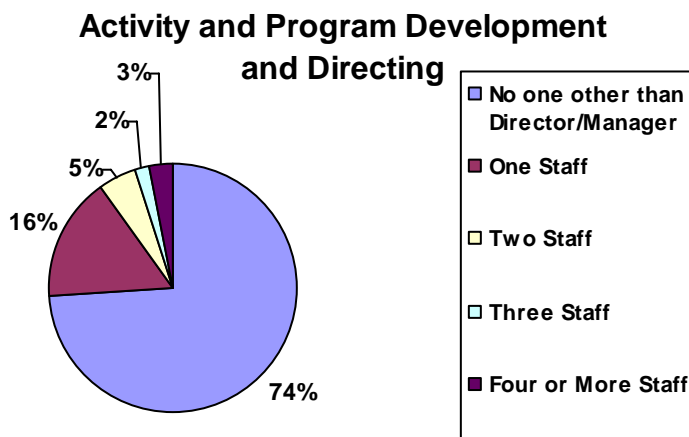
It is interesting, however, that 8% or 33 centers reporting currently have a Director/Manager with a Masters Degree even though only just over 2% or 9 centers responded that this level of education or higher was the minimum required for the position.

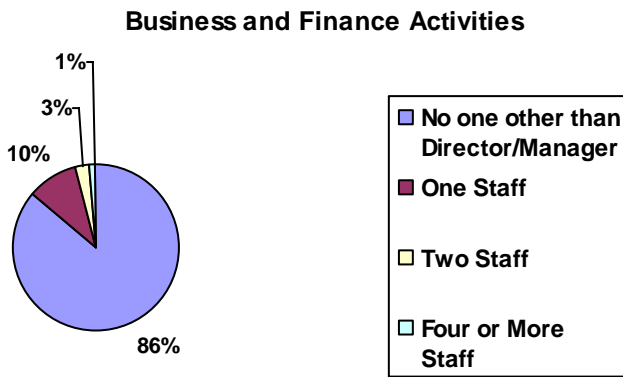
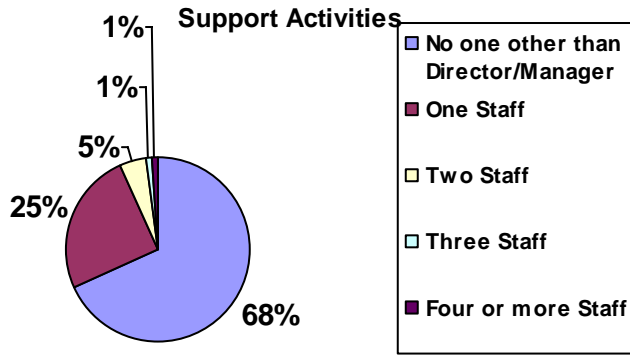
Forty percent (165) of the centers indicated that they do not require a minimum number of years of experience for the Director/Manager position. Forty eight (12 percent) answered with one year of experience and 137 centers (34 percent) noted two years.

Staff (other than Director/Manager):

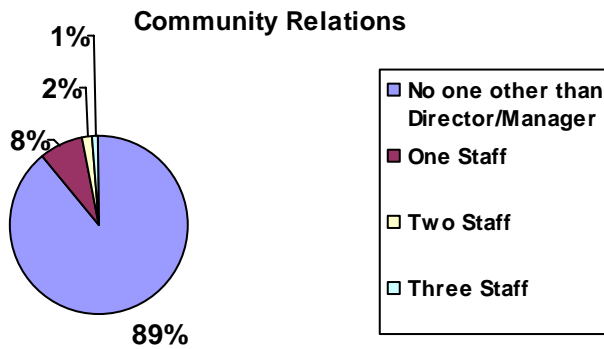
Six questions asked respondents for the number of staff employed by a senior center who spent more than half (51 percent) work time within general work areas: activity and program development and directing, nutrition services, support activities, business and finance activities, community relations and maintenance. The survey requested that a zero response be given to the category to indicate no staff in those positions separate from the Director/Manager. (N=404)

The following tables and charts indicate the percentage of staff, by number of centers responding, spending the majority of their work time in each of the center related activities:

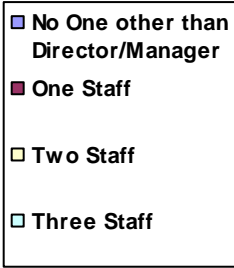
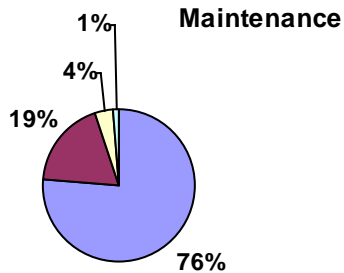




No one reported 3 staff for the Business and Finance Activity category



The figure for Four or More Staff in the Community Relations category is less than 1% (0.04%)



The figure for Four or More Staff in the Maintenance category is less than 1% (0.02%)

Director/Manager only completing tasks

	No. of Centers	Percentage
Activity and Program Development and Directing	301	74%
Nutrition Services	243	60%
Support Activities	278	68%
Business and Finance Activities	353	87%
Community Relations	363	89%
Maintenance	309	76%

Staff other than Director/Manager completing tasks

	Number of Staff		
	<u>One</u>	<u>Two</u>	<u>Three</u>
Activity and Program Development and Directing	66	22	8
Nutrition Services	119	29	10
Support Activities	101	22	3
Business and Finance Activities	39	12	0
Community Relations	31	9	3
Maintenance	76	17	5

As is evident when looking at each table, the Director/Manager is the primary person who completes work within all areas noted.

Volunteers:

It is very important to collect information about the volunteers who assist in center activities and services. Volunteers are essential to keeping centers operating smoothly

and enhance the experiences of all participants. A total of 408 centers provided responses to this question (N=408).

There was quite a range of answers to the question regarding the number of individuals who volunteered in or through the center on a regular basis. One center reported 533 individuals volunteered and this was the highest number reported. Center respondents indicate that the average number of individuals who volunteer on a regular basis is 39. Centers reported a total of 15,861 regular basis volunteers.

The next three questions asked for further clarification of those individuals that do volunteer. Of the 15,000 plus volunteers, the vast majority, (88%), are reported to be 60 years of age and older. In addition, 30% of volunteers help in the operation of the center in such areas as teaching classes, answering phones or working on newsletters or websites. 30% volunteer outside of the center with such tasks as delivering home delivered meals to others or help mentoring children through opportunities arranged by center staff.

The ranges of volunteer counts for each of the four questions in the last part of the survey were quite broad but averages for each question are shown below:

Average Number of Volunteers by Category	
Category	Average Number
Total Volunteers	39
Age 60+	34
Operation Help	12
Outside Help	10

Respondents were asked how participation from volunteers has changed over the past five years-increased, decreased or stayed the same. Although there was no overwhelming majority of any answer, 39% or 159 centers indicated that participation from volunteers has increased in comparison with 29% or 120 centers that indicated a decrease. Thirty percent or 122 centers are indicated no change and 2% or 7 centers did not respond.

52% of centers in urban areas reported an increase in volunteer participation, but 23% indicated a decrease. Suburban centers were split evenly between increases and decreases (30% of respondents reporting increases, 30% reporting decreases). Reports from centers in rural areas were similar to the split in suburban reports, as 34% rural centers reported an increase in volunteer participation but also 31% of rural respondents reported a decrease.

Senior Community Services Employment Program:

Respondents were asked to provide the number of Senior Community Service Employment Program (SCSEP or Title V) people or slots available at their center. A total of 238 or 58% of centers reported that they do not have SCSEP or Title V people

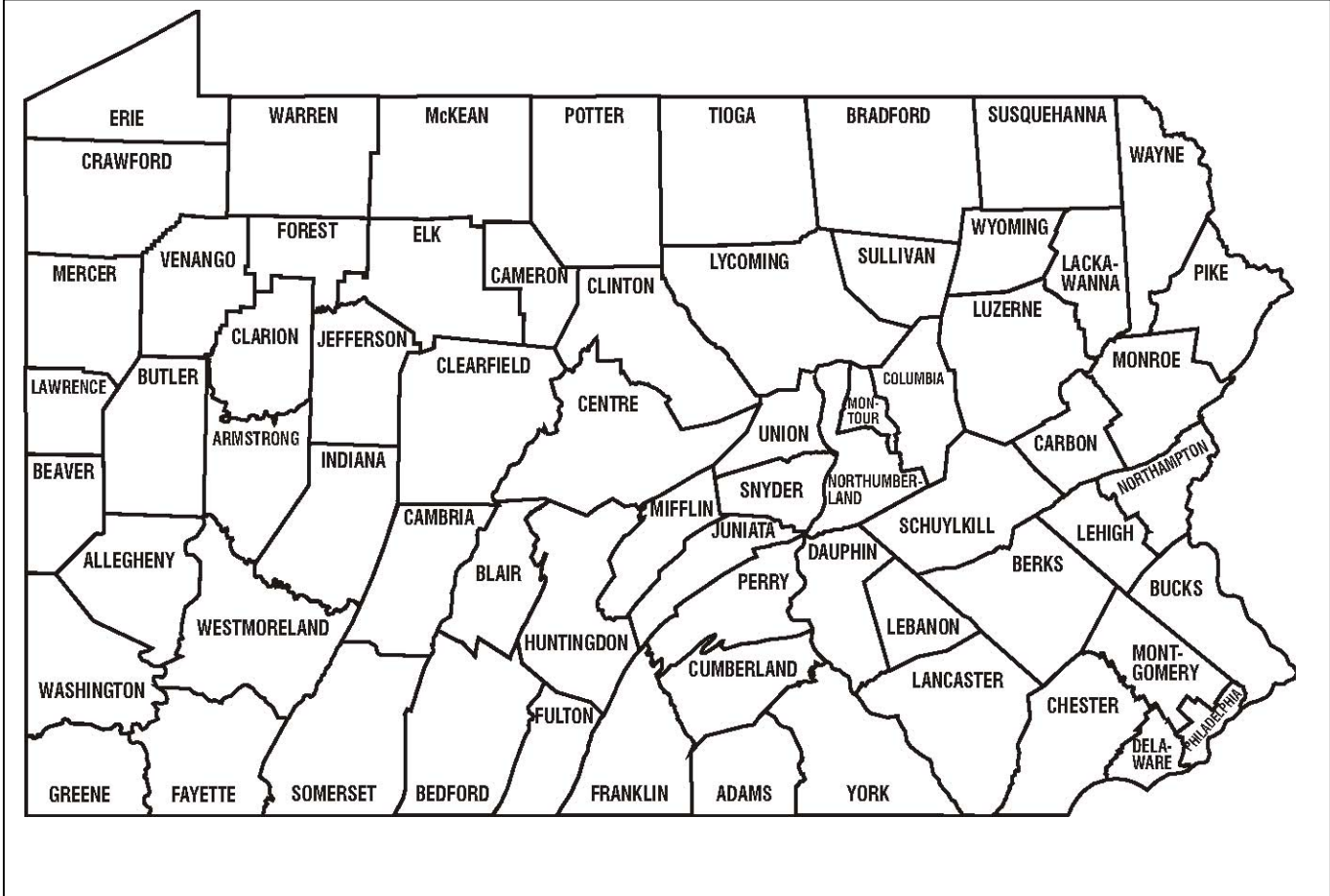
or slots available at their centers. An additional 36 percent of the centers have one, two or three people or slots available for utilization of these sites. The remaining 4% have indicated they have greater than 4 people or slots, with one center reporting the highest number of people or slots at 18.

Number of SCSEP or Title V Slots or Enrollees

Number of Slots or enrollees	Frequency	Percent
0	238	58.3
1	92	22.5
2	34	8.3
3	20	4.9
4	9	2.2
5	4	1.0
6	6	1.5
7	3	.7
9	1	.2
18	1	.2
Total	408	100.0

Slots are concentrated more in urban areas (61%) than in suburban (47%) and rural areas (29%).

Appendix A



Appendix B

Definitions

From Aging Program Directive #96-04-01

Senior Community Center

A community facility in which people 60 years of age and over and their spouses regardless of age can meet with one another to access a wide array of services and to fulfill many of their social, physical, emotional, and intellectual needs. If designated by the AAA (Area Agency on Aging), a center may also serve as a focal point. Center programs and activities can help older persons enhance their dignity, support their independence, and encourage their involvement in and with the community. Senior community centers should also provide an opportunity for people to socialize.

Purpose of the Senior Community Center

The purpose of the senior community center program in Pennsylvania is to facilitate the social, emotional and physical well-being of older Pennsylvanians as part of a comprehensive and coordinated system of services by the establishment and support of community-based services and activities. Senior community centers provide access to community resources as well as providing services and activities that maintain independence and wellness. Individuals of all generations interact and interrelate in many kinds of senior community center programs. These individuals form a community of mutual interests in which all concerned benefit from a balanced, meaningful, and enjoyable program of individual and group services.

Satellite Center

A community facility where people 60 years and older and their spouses regardless of age can meet and where the primary service provided is congregate meal service. A satellite center must be affiliated with a designated senior community center for the purpose of allowing consumers to have access to a wide array of services. Satellite centers should also provide an opportunity for people to socialize and interact.

Appendix C

Survey Instrument

September 2005

County:

Center Name:

General:

1. Approximately how many unduplicated eligible individuals visit the center on an average day for activities, services or to eat lunch? (Do not include those who only visit satellite centers.)

_____ 1-25 _____ 26-50 _____ 51-70 _____ 71-100 _____ 101-150 _____ 151

+

2. a. How many satellite centers do you have affiliated with your center? _____
 b. Approximately how many unduplicated eligible individuals visit the satellite(s) on the day(s) the site is open?

_____ 1-25 _____ 26-50 _____ 51-70 _____ 71-100 _____ 101-150 _____ 151

+

3. Approximately what percentage of the people who come to your center regularly fall into each of the following categories?

Category	None	1-25%	26-50%	51-75%	75-100%	Not Sure
Men						
Black or African American participants						
Hispanic participants						
Members of other ethnic minority group specify: _____						
Participants ages 55 to 59						
ages 60 to 69						
ages 70 to 79						
ages 80 to 89						
ages 90 and older						
Need assistance to get around (e.g. use a walker, wheelchair or need to be helped by a person)						
Have some form of dementia						
Participants with mental retardation						
Participants with mental health issues						

4. Please check one answer for each category below to indicate how participation from people in that category has changed in the past 5 years. (If your center has been open less than 5 years, answer for the time since the center opened.)

Category	Increased	Decreased	No Change
The total number of participants			
Men			
Members of ethnic minority groups			
Participants aged 55 to 59			
Participants aged 90+			
Frail participants			

5. Do you own or rent the facility for your senior center (choose one)?
 Own Rent Neither
6. a. In square feet, approximately how large is your senior center? (Do not include space used exclusively by a parent organization, i.e. the organization to which you report): _____ square feet
- b. How much of the center is used for programs, activities, congregate and home delivered meals (i.e., *not* used for office space)? _____ square feet
7. Choose the ONE which best describes the location of your senior center facility?
 A free standing senior center
 In a church
 In a school
 In a housing project
 In a county/local government building
 In a recreation/community center
 In a firehouse
 In a nursing home or assisted living facility
 In a multi-service agency
 Other
8. Choose the ONE which best describes the type of community your center serves:
 Rural
 Urban
 Suburban

Administration and Funding

9. Which ONE answer best describes your tax status?
 Public
 Private not for profit
 Private, for profit

10. Which ONE of these statements best describes the operation of your senior center?
- Operated directly by an Area Agency on Aging
 - Operated by a government agency other than an Area Agency on Aging
 - Operated as a subcontractor of an Area Agency on Aging
11. If your center has a policy making board such as a board of directors:
- a. How many people are on your policy making board?
 - b. How many are ages 60+?
 - c. How many are senior center participants?
12. If your center has a senior center council or advisory board:
- a. How many people are on your advisory board
 - b. How many are ages 60+?
 - c. How many are senior center participants?
13. For each of the following agencies or organizations, please check one box to indicate the degree of your collaboration with them in providing services, activities, and volunteer activities for the older adults you serve. Select N/A under either of 2 conditions: 1) if you are affiliated with the organization or 2) if there is no such organization in your area.

	N/A*	Little or no contact	Mostly through referrals	Work with them on "as needed" basis	Ongoing cooperation/ or collaboration
A. Adult Day Care Providers					
B. Art or Humanities Council (local or state)					
C. Assisted Living Facilities					
D. Community College					
E. Community Food Bank					
F. Area Agency On Aging					
G. County Level Social Services					
H. Faith Based Community Organizations					
I. Family Resource Center					
J. Farmers' Markets					
K. Health Department (local or state)					

L. Home Care Agencies					
M. Hospital					
N. Libraries					
O. Mental Health Services					
P. Nursing Homes					
Q. Parks And Recreation					
R. School(s)/Preschools					
S. YMCA/YWCA					
T. United Way					

14. What is your total senior center budget for SFY 2004-2005? (Do not include the budget of your parent organization, i.e. the organization to which you report)
\$_____

15. For each of the following potential funding sources, please check one box to indicate how much funding is received from each source or whether no funding is received.

	No Funding	1-25%	26-50%	51-75%	76-100%
A. Aging Services Block Grant					
B. Local government					
C. Participant contributions					
D. United Way					
E. Donations/fund raising					
F. Fees					
G. Grants					
H. Other					

16. Please indicate which of the following methods are used by the senior center staff to gather program and activity input from participants on a regular basis (check all that apply)

- Written Questionnaires
- After Program Evaluations
- Focus Groups
- Informal Discussions
- Program Planning Committee
- Internet Questionnaires
- Community Survey
- Survey of Non Participants
- Via the Senior Center Council or Advisory Board
- Other methods

No input gathered

Programs and Services

17. What are your center's regular weekday hours of operation? (If your hours are not the same each day of the week, please report the most usual hours. Describe evening and weekend hours in a subsequent question). _____

- a. Is your center open on Monday?
- b. Is your center open on Tuesdays?
- c. Is your center open on Wednesdays?
- d. Is your center open on Thursdays?
- e. Is your center open on Fridays?

18. a Does your center have any evening or weekend hours? Yes No

b. If yes, please list them here _____

19. For each of the following activities or types of equipment please check one box to indicate its status in your senior center.

	We have regularly	We do not have
A. Arts Classes		
B. Billiards		
C. Bingo		
D. Card Playing		
E. Center Email		
F. Center Website		
G. Computer Classes		
H. Computers for individual participant use		
I. Crafts classes		
J. Crafts facilities		
K. Dancing (line dancing, ballroom)		
L. Educational speakers or classes		
M. Exercise equipment		
N. Fitness/wellness classes		
O. Health Screenings (blood pressure, cholesterol, etc.)		
P. Nutrition Education classes		
Q. Outdoor recreational area (e.g. bocce ball, horseshoes, or shuffleboard)		
R. Outdoor sitting area (e.g. porch, patio, or picnic shelter)		
S. Pool Access or Swimming Classes		
T. Trips outside the local area		
U. TV/video or DVD equipment		

V. Walking path		
W. Other activities not listed		

20. For each of the following time slots, please write the number of regular, scheduled activities that take place during the time in an average week. Meals are to be counted as an activity. Please enter 0 if the center is not open during that time, or if there are no scheduled activities during that time. Weekdays are Mondays through Fridays. Enter as a number only, i.e. 15. (For example, if you have a health screening, serve lunch and offer aerobics each weekday during the 11 to 1 time slot, record the number of activities for that time slot as 15 (3 activities each day times 5 days)

Time Slot	Number of scheduled activities weekly
A. Weekdays Mornings (before 11:00am)	
B. Weekdays Mid-day (11:00 to 1:00)	
C. Weekdays Early afternoon (1:00 to 4:00)	
D. Weekdays after 4:00	
E. Weekends (any/all hours)	

21. a. Do you charge fees for any of your senior center activities/programs? (Do not include fees for services offered by your parent organization) Yes No

b. If you charge fees, do you have scholarships or other ways to finance participants who cannot afford the fee? Yes No Do not charge

22. What percentage of the unduplicated eligible individuals visiting the center on an average day are participating in the congregate meal program?

0-25% 26-50% 51-75% 76-100%

23. Please indicate how participation in the congregate meal program has changed in the past five years (If your center has been open less than 5 years, answer for the time since the center opened).

Increased Decreased No Change

24. Are home-delivered meals delivered from your center? Yes No

25. Please indicate which methods of transportation are utilized by older adults to attend the center. Check all that apply.

- Van Service provided by the center
- Car pool arranged at or by the center
- Individuals drive themselves
- Individuals walk to the center
- Shared ride service/County Van

- Public transit that stops at or near the center
- Other methods

Personnel and Volunteers

26. a. How many full time staff does your center employ?
b. Do full time staff have paid health benefits through the center? Yes No
c. How many part time staff does your center employ?
d. Do part time staff have paid health benefits through the center? Yes No
e. Does your center operate on an entirely volunteer staff? Yes No
27. Please answer the following seven questions regarding the position of Director/Manager (or equivalent) of your senior center (not your parent organization).
- a. How many hours is the Director/Manager scheduled to work during a normal week of work
- b. How many years has the person currently in the position of Director/Manager been employed in the position?
- c. What is the minimum educational requirement for the position of Director/Manager? (check only one):
 No minimum High School Diploma/GED Associates Degree Bachelors Degree Masters Degree Post Masters
- d. What is the highest level of education received by the person currently in the position of Director/Manager? (check one answer): High School Diploma/GED Associates Degree Bachelors Degree Masters Degree Post Masters
- e. What is the minimum years of experience required for the position of Director/Manager? (provide answer as number)
- f. What is the starting salary rate for the position of Director/Manager? (provide as yearly salary if possible)
- g. What is the salary of the individual currently serving as the Director/Manager? (provide as yearly salary if possible)
28. The following six questions concern staff employed by the senior center other than the Director/Manager. Since job titles and job descriptions will likely vary from center to center, the questions will ask for the number of staff spending a majority of their work time (51% or more) within general areas. Please count each staff in only one category. The questions will ask for the number of staff working in the following areas: , Activity and Program Development and Directing, Nutrition Services, Support Activities, Business and Finance Activities, Community Relations, Maintenance.
- a. Not counting the Director/Manager, how many staff, full and part time, are spending a majority of their work time (51% or more) developing and directing

programs and activities at the center? (enter 0 if there are no staff other than the Director/Manager)

b. Not counting the Director/Manager, how many staff, full and part time, spending a majority of their work time (51% or more) on nutrition service duties at the center? (enter 0 if there are no staff other than the Director/Manager)

c. Not counting the Director/Manager, how many staff, full and part time, are spending a majority of their work time (51% or more) in the role of support staff (ex. administrative assistants)? (enter 0 if there are no staff other than the Director/Manager)

d. Not counting the Director/Manager, how many staff, full and part time, are spending a majority of their work time (51% or more) in business and financial areas of the center operation (i.e. bookkeeping, grant writing, fundraising)? (enter 0 if there are no staff other than the Director/Manager)

e. Not counting the Director/Manager, how many staff, full and part time, are spending a majority of their work time (51% or more) providing public and community relations services for the center? (enter 0 if there are no staff other than the Director/Manager)

f. Not counting the Director/Manager, how many staff, full and part time, are spending a majority of their work time (51% or more) performing maintenance work for the center? (enter 0 if there are no other staff than the Director/Manager)

29. a. How many individuals volunteer in or through your center on a regular basis?

b. How many of the volunteers noted in the above question are ages 60 or older?

c. How many of the volunteers noted above these help in the operation of the center such as teaching classes, answering phones, or working on a newsletter or website?

d. How many of the volunteers noted above help outside of the center such as delivering home-delivered meals, or mentoring children?

e. Please check one answer to indicate how participation from volunteers has changed over the past 5 years? (if your center has been open less than 5 years, answer for the time since the center opened) Increased

Decreased No Charge

30. How many Senior Community Services Employment Program (SCSEP or Title V) people or slots are available at your center?

Many thanks are extended to the North Carolina Division of Aging who posted their survey tool on line and from which much of this survey is adapted.