

Final Report  
2019

# Consumer Satisfaction with Aging & Disability Resource Connection of Oregon: Round 6

## Part 4. Options Counseling

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# Consumer Satisfaction with Aging & Disability Resource Connection (ADRC) Services: Round 6

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## Part 4. Options Counseling

Interviews were completed with 80 Options Counseling (OC) consumers or their family members in 2019. Because of the specialized nature of the service, these participants were asked additional questions addressing practices related to OC standards (e.g., home visits, decision support, and follow up) and perceived outcomes. As in previous rounds, many people who were not OC consumers reported that they received a home visit (Table 1.5). In 2019, this included 78 Call Center consumers (20% of Call Center participants, or 24% of the entire sample). Because home visits are indicative of a high level of service need, the longer version of the survey was also administered to these individuals as well as OC consumers and family members. Differences are noted when results vary by Call Center and OC status.

### Home Visits

Participants were asked if anyone from the ADRC came to their home (Tables 1.5 and 4.1<sup>1</sup>, Appendix B). Because a home visit is a preferred OC practice, it is not surprising that the majority of OC consumers (n=59; 74%) had a visit. It is most likely that this visit came from an Options Counselor, although participants were not asked to identify who it was that made the home visit. Similarly, it is not known who provided the 78 home visits for the Call Center participants; it is very possible that the home visits reported by Call Center consumers came from a

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<sup>1</sup> Tables 4.1 – 4.28 are at the end of the Part 4 report; all tables are presented in Appendix B.

different organization than the ADRC, such as a Medicaid case managers or home health agencies. One-third of Call Center participants reported a home visit.

Those who received home visits reported more needs than those who did not, an average of 7.39 reasons for contacting the ADRC compared to 5.33 (See Part 1 for a discussion of need and how it was measured). Similarly, those with home visits used significantly more services (3.16 compared to 1.33; Table 4.1). It is interesting to note that among those who received home visits, the Call Center participants reported receiving significantly more services (average=3.73) than Options Counseling participants (average=2.18). Although OC participants received more personal care services, Call Center participants received more housekeeping, home modification, and assistance receiving benefits. The Call Center participants also reported more needs than OC participants, though differences were not significant. Call Center participants who received home visits reporting needs for medical equipment, help moving into Assisted Living, food stamps, and help with Medicaid.

Participants who received home visits were asked to describe the timeliness of the visit. Response time for the home visit in 2019 was somewhat slower than in recent years. Eighteen percent received a home visit within two days after talking with someone from the ADRC and it took longer than a week for over one-third of the callers. (Table 4.2). In spite of the wait, however, participants were gave positive ratings about the timeliness of the home visits, similar to 2015 rates: 39% reported the wait was short and timely. Over half (53%) reported wait times to be reasonable. Similarly, the proportion of those reporting the wait time to be much too long declined from a high of 13% in Round 4, to 8% in 2019 (Table 4.3).

Consumers were quite positive about their experiences with the home visit. Nearly two-thirds (63%) reported the visit had been very helpful in addressing their concerns and another 28% said it had been somewhat helpful. Although the

percentage of those who found it somewhat or very helpful was similar to previous years, the percentage of those reporting very helpful was much lower compared to 2015 (Table 4.4). Eighty percent reported they were very comfortable with the person who came to their home, representing a slight decrease from 85% in 2015. Those reporting being a little or very uncomfortable remained the same (4.5).

Over half of the participants (59%) indicated that the person who came to their home identified additional types of help that could be needed (Table 4.6) and 85% of participants agreed with that assessment. This is lower than the 92% reporting agreement in 2015 (Table 4.7). About half (52%) said that family members or others had been present for the home visit (Table 4.8). Of those who had family or others involved in these home visits, 80% indicated that there was agreement on almost everything regarding concerns and types of help needed. This is higher than in 2015, but a lower percentage than in most previous years (Table 4.9). Overall, most of the 69 consumers who had family or others present when they met with the person from the ADRC reported it had been very helpful (72%), while another 20% reported it to be somewhat helpful (Table 4.10).

Home visits are beneficial in multiple ways. When comparing those who received home visits, whether through OC or some other source, with those who did not (i.e., OC or Call Center consumers with no home visits), those with home visits reported more needs, were significantly more likely to get all of the information they needed, used significantly more services, and rated outcomes more positively.

## Decision Support

The ability to make informed decisions is contingent on understanding the service system and available choices. Furthermore, decision support includes assistance in exploring those choices and receiving support for the choices made

by the consumer once the options have been considered. As indicated in Table 4.11, OC participants and those who received home visits were generally positive about assistance received in helping them **understand the service system**; 43% of participants rated the ADRC person as excellent in this regard, though this is down from 51% in 2015. Another 36% rated them as good, similar to 2015 (Table 4.11). However, 21% rated them as fair or poor, reversing a more positive trend in recent years.

Ratings of **understanding about available options** follow the same pattern, with lower “better understanding ratings” and higher “more confused” ratings. (Table 4.12). Declines in ratings of the person from the ADRC helping them to **explore choices** also were noted, with score ratings of excellent declining from 64% to 49%. Ratings of “good” and “fair” increased with ratings of 32% and 14% respectively.

The majority of participants indicated that the ADRC is doing a good or excellent job of **considering their opinions, likes and dislikes** before recommending services (Table 4.14); 84% gave ratings of good or excellent which was slightly lower than in 2015. Notable again is the decline in the percentage who provided top ratings, though participants continue to report overall positive assessments.

Similar patterns are seen with ratings of **supporting consumer decisions** (Table 4.15); 47% assigned ratings of excellent and 37% good. Virtually no one reported that the person from the ADRC tried to talk them into things not wanted; only 3% participants responded yes to this question (Table 4.16).

The percentage of participants reporting they had **total control of making decisions** about what to do next declined from 50% in 2015 to 38% in 2019. At the same time, the percentage of those reporting they had most of the control increased from 29% to 35%. Consumers were significantly more likely to report

having total control than family members which reflects the different populations; family members were more likely calling on behalf of those with more need and with greater cognitive impairment. Twenty-seven percent reported they had little or no control over decisions, the highest in all years of data collection.

## Action Plans & Follow Up

Assisting consumers in developing action plans is one of the professional standards for Options Counselors. Those identified as OC consumers (or their family members) as well as those who reported receiving a home visit were asked whether the person they worked with the most helped them to develop a plan. In Round 6, over half (54%) of the participants reported receiving this service, similar to previous years (Table 4.18). More information is needed to determine whether action plans are being developed for all of those who could benefit from or desire to have this service. It is likely that not all Options Counseling consumers or consumers who received home visits were ready or interested in developing these plans. Similarly, many people may be too early in the process to have had plans developed. Still, it is important that the ADRC continues to focus on developing person-centered action plans whenever possible.

Another professional OC standard is that OCs routinely make follow up calls to the consumer. This standard has not been met in any year of the survey, although 54% of participants indicated they had received a follow up call, similar to 2015. The consumer-based ADRC standards and expectations set by the Advisory Committee early in development of the ADRC included a requirement that 90% of consumers identified as needing follow up by the ADRC, receive a follow up. Just over half (52%) of participants reported that they had contacted the ADRC again, similar to 2015 (Table 4.20).

## Outcomes (OC consumers & those with Home Visits)

Several indicators of positive outcomes are included in the survey (Tables 4.21 - 4.28) as a way of learning how the ADRC has affected participants' everyday lives. Over half of participants agreed or strongly agreed with statements about these outcomes. As in past years, most participants agreed or strongly agreed that the ADRC has enabled them to achieve their desired living situation (75%), and maintain independence (69%) and safety in their homes (77%). Consistent with these responses, 65% agree or strongly agree with the new statement that they are less likely to move into a nursing home as a result of the ADRC (one of the new questions added for Round 6). About two-thirds agreed or strongly agreed that they are receiving enough support to meet their needs and preferences.

Similar to past years, a majority agreed or strongly agreed that they have benefited in other ways that are important in providing person-centered services that address quality of life. This includes 56% who find that they have been able to expand or maintain activities outside of their home or who were eventually able to find help they could afford; 54% who found help making the most of their personal money and resources. At the same time, a similar pattern for other Round 6 findings emerged, a lower percentage of participants strongly agreed with the outcome statements.

Participants showed similar levels of agreement with other new outcome indicators added in Round 6: 57% felt they were less likely to fall (though very few attended classes), and 59% indicated they were at less risk for abuse or neglect. This last finding is interesting because many more people agreed with the statement than had indicated they had a concern with abuse or neglect.

For the last several surveys, we have asked an open-ended question: *What do you think your circumstances would be now if you had not received information*

*and services through the ADRC?* Analysis of these responses has shown consistent types of responses. For Round 6, in addition to the open-ended question, we asked about 12 specific types of circumstances that had emerged from prior surveys and whether these situations applied to the participant. The results are presented in Table 4.29.

About two-thirds indicated that without the ADRC they would not have the needed information to get help, they would be stressed about not knowing what to do, and would not have received the help they needed.

*I think that my emotional state would not be as balanced. I think that having the resource to come in every week and have someone to help me with my task is very reassuring. It helps me be more motivated to do things on my own, because I know if I get stuck I have someone to help me so I get more done outside the services I receive.*

Between 42% and 50% indicated that they had received significant benefits in terms of financial support, reduced isolation, having basic needs met, and addressing their medical conditions.



*I don't think I could afford all of the things that are happening on my income. I'm much better off than I would be without them.*

*I'd be eating a little less without food stamps.*

*I think it would be a lot more difficult because I would have not the financial help (heating, medical help, energy bills).*

*She'd be broke. Somebody had her debit card number.*

*It helped me to focus on some areas of my care that I was not paying attention to, like diabetes.*

Finally, a smaller group, but nearly one in five indicated that without the ADRC they would have been homeless or dead. One in six reported they would have been in a nursing home.

*I would be on the street with a cardboard box in Portland.*

*I would be in assisted living area and in physical rehabilitation. I probably would not be at home if ADRC did not help.*

*My mom probably would have died and my brother would have been evicted and homeless without the assistance of Medicaid.*

In spite of the benefits described by most participants, nearly half indicated that their circumstances would have been the same without the ADRC. Perhaps these individuals feel they would have found what they needed or could have done without the ADRC. A few were unhappy with their experiences and feel they would be better off. It is likely that these individuals had not received the information or services they needed or felt that the system had been unresponsive to their needs.

*I never received any information from them regarding falls and memory loss and how to maintain my finances that I know of.*

*Haven't received anything so circumstances would be the same.*

*I feel that they haven't don't anything to help me, what I need is on a waiting list.*

## Conclusions and Recommendations

The ADRC Options Counseling program is clearly providing important and valued services. Home visits are important in identifying service needs and are helpful to participants. Decision support services receive high ratings, generally meeting or exceeding consumer-based standards and expectations established following Round 1 of the survey. ADRC staff who provide these services are given positive ratings by the vast majority of consumers. OC services related to action planning and follow-up calls, however, continue to fall short of program goals.

At the same time, ADRCs are clearly making a difference in supporting consumers to remain safe, independent and in settings where they most desire to live. ADRCs are also contributing to make the most of personal resources and finding affordable services. ADRCs, however, must continue to strive to continue improvement with respect to these outcomes. Ratings generally have not met the

consumer-based standard of 80% of participants agreeing or disagreeing with these statements.

Although overall ratings continue to be quite high, it is troubling that fewer participants in Round 6 provide the highest ratings of “excellence” or indicate strong agreement with statements related to desired outcomes. These changes may be due to random fluctuations from one sample to the next, reflect a more critical cohort, or reflect less strong satisfaction overall. The ADRC program and its partners may want to explore factors that might be contributing to these declines in ratings.

Recommendations to maintain positive service outcomes and address areas of weakness include:

- Continue to make home visits a priority.
- Continue to decrease the wait time for OC home visits. It is likely that consumers receiving OC services have support needs that are more urgent.
- Options counselors are doing an excellent job in providing decision support. Continue to provide and expand person-centered support to consumers in exploring choices, considering their opinions, likes and dislikes, and supporting consumer decisions.
- Approximately one-third of those receiving OC services reported not having an action plan. Identify reasons for this (e.g., timing of the interviews, consumer decision) and strengthen this aspect of the program.
- Increase follow-up calls with consumers to determine whether additional information and support are needed.
- Although well over two-thirds of consumers indicate that they a) have support to meet their needs and preferences, b) are more independent, c) are safer, and d) have preserved their resources, this doesn't achieve many of the higher standards set during Year 2 of the ADRC program. Whenever possible, increase the number of consumers who are receiving enough support so that they are able to live more independently and safely in their homes.

- A significant number of consumers are unable to locate affordable services. Increase efforts (e.g., increase access, expand eligibility, create more public/private partnerships) to assist these individuals in finding services that fit their budgets.
- Continue to assist consumers who are eligible for services by answering questions, completing paperwork, and navigating the complex social insurance and social service system.

## Part 4. Options Counseling

### Home visits

**Table 4.1. Did someone from the ADRC come to your home?**

	2011-2012 (n=244)	2012 (n=297)	2013 (n=292)	2014 (n=300)	2015 (n=326)	2019 (n=343)
Yes	27%	41%	40%	53%	44%	40%
Percent of OC consumers receiving a home visit	73%	80%	71%	80%	64%	74%
Percent of ADRC call center consumers receiving a home visit	24%	28%	23%	37%	30%	33%

Note: Those who received home visits in 2019 were significantly older ( $p < .05$ , reported significantly more needs (7.40 compared to 5.34;  $p < .001$ ) and used more services (3.17 compared to 2.03;  $p < .001$ ). They also had more favorable outcomes ratings overall, and rated staff and the overall helpfulness of the ADRC higher than those who did not receive a home visit ( $p < .05$ ).

**Table 4.2. How long did it take from the time you talked to someone from the ADRC to the time someone visited your home?**

	2011-2012 (n=62)	2012 (n=109)	2013 (n=108)	2014 (n=144)	2015 (n=126)	2019 (n=126)
2 days or less	24%	23%	27%	22%	20%	18%
3 to 7 days	40%	50%	42%	44%	48%	45%
More than a week	35%	27%	32%	34%	32%	37%

**Table 4.3 Considering the time you had to wait for the appointment to occur, do you think that the wait time was...**

	2011-2012 (n=64)	2012 (n=113)	2013 (n=117)	2014 (n=146)	2015 (n=134)	2019 (n=129)
Short and timely	45%	36%	48%	31%	40%	39%
Some wait, but reasonable	45%	57%	51%	56%	52%	53%
Much too long	9%	7%	6%	13%	9%	8%

**Table 4.4 How helpful was the visit to your home in addressing your concerns?**

	2011-2012 (n=66)	2012 (n=119)	2013 (n=117)	2014 (n=155)	2015 (n=142)	2019 (n=133)
Not at all helpful	9%	6%	7%	6%	6%	4%
Not too helpful	6%	4%	3%	4%	4%	4%
Somewhat helpful	21%	19%	22%	24%	18%	29%
Very helpful	64%	71%	68%	66%	72%	63%

**Table 4.5 How comfortable did you feel with the person who came to your home?**

	2011-2012 (n=66)	2012 (n=121)	2013 (n=115)	2014 (n=151)	2015 (n=142)	2019 (n=133)
Very uncomfortable	4%	1%	1%	2%	2%	2%
A little uncomfortable	2%	3%	3%	3%	2%	2%
Somewhat comfortable	12%	10%	6%	15%	11%	16%
Very comfortable	82%	86%	90%	80%	85%	80%

**Table 4.6 Did the person identify any other types of help that might be needed?**

	2011-2012 (n=61)	2012 (n=115)	2013 (n=112)	2014 (n=147)	2015 (n=142)	2019 (n=71)
Yes	56%	61%	61%	64%	57%	59%

**Table 4.7 Did you agree with them that you had additional needs?**

	2011-2012 (n=33)	2012 (n=67)	2013 (n=65)	2014 (n=91)	2015 (n=71)	2019 (n=57)
Yes	91%	91%	92%	85%	92%	85%

**Table 4.8 Were family members or others involved with the discussion when the person from the ADRC came to your home?**

	2011-2012 (n=64)	2012 (n=121)	2013 (n=118)	2014 (n=158)	2015 (n=142)	2019 (n=133)
Yes	58%	53%	43%	43%	51%	52%

**Table 4.9 How closely did everyone involved agree about your circumstances, such as having the same concerns and looking for the same kinds of help?**

	2011-2012 (n=37)	2012 (n=67)	2013 (n=51)	2014 (n=67)	2015 (n=71)	2019 (n=68)
We agreed on almost everything	78%	84%	84%	87%	75%	80%
We agreed more than we disagreed	11%	14%	8%	13%	18%	13%
We disagreed more than we agreed	5%	2%	8%	--	3%	6%
We disagreed on almost everything	-	-	-	-	-	1%

**Table 4.10 How helpful was meeting together with the person from the ADRC?**

	2011-2012 (n=36)	2012 (n=63)	2013 (n=51)	2014 (n=67)	2015 (n=72)	2019 (n=69)
Not at all helpful	14%	3%	8%	--	6%	4%
Not too helpful	3%	--	2%	6%	4%	3%
Somewhat helpful	25%	22%	12%	15%	19%	20%
Very helpful	58%	75%	78%	79%	71%	72%

## Decision Support

**Table 4.11 How would you rate this person on helping you understand the service system?**

	2011-2012 (n= 67)	2012 (n=129)	2013 (n=143)	2014 (n=176)	2015 (n=187)	2019 (n=157)
Poor	10%	8%	6%	4%	7%	6%
Fair	9%	9%	11%	12%	8%	15%
Good	33%	40%	29%	30%	35%	36%
Excellent	48%	43%	53%	53%	51%	43%

Note: Standard is 80% will report that the ADRC staff was good or excellent in helping to understand the service system. Standard met.

**Table 4.12 Compared to your understanding about available options before you contacted the ADRC, what is your understanding now?**

	2011-2012 (n=68)	2012 (n=134)	2013 (n=143)	2014 (n=171)	2015 (n=189)	2019 (n=158)
More confused and understand less	6%	9%	11%	9%	8%	12%
Understanding is about the same	16%	22%	19%	15%	13%	17%
Better understanding	78%	69%	69%	75%	79%	71%

Note: Standard is 75% of consumers report they have better understanding about their options after working with the options counselor.

**Table 4.13 How would you rate this person in helping you explore choices available to you?**

	2011-2012 (n=68)	2012 (n=135)	2013 (n=146)	2014 (n=176)	2015 (n=186)	2019 (n=162)
Poor	9%	6%	3%	3%	5%	3%
Fair	7%	10%	12%	14%5	7%	14%
Good	25%	23%	21%	23%	24%	32%
Excellent	56%	61%	64%	59%	64%	49%

Note: Standard is 80% of consumers report the options counselor helped them explore the choice available to them and their family members.

**Table 4.14 How good of a job did this person do considering your opinions, likes and dislikes before recommending services?**

	2011-2012 (n=65)	2012 (n=133)	2013 (n=142)	2014 (n=172)	2015 (n=184)	2019 (n=156)
Poor	11%	6%	4%	2%	4%	3%
Fair	6%	6%	8%	14%	6%	12%
Good	29%	32%	30%	29%	34%	37%
Excellent	54%	56%	59%	54%	55%	47%

Note: Standard is 90% report that the Options Counselor listened to their opinions and understood their specific circumstances.



**Table 4.15 How would you rate this person in supporting your decisions?**

	2011-2012 (n=68)	2012 (n=130)	2013 (n=142)	2014 (n=173)	2015 (n=185)	2019 (n=155)
Poor	6%	6%	4%	2%	5%	5%
Fair	13%	8%	11%	11%	7%	10%
Good	31%	30%	33%	30%	30%	37%
Excellent	50%	56%	52%	57%	58%	47%

Note: Standard is 80% of consumers rate the options counselor as good or excellent in supporting them in their decisions.

**Table 4.16 Did you ever feel that this person was trying to talk you into things you did not want?**

	2011-2012 (n=69)	2012 (n=133)	2013 (n=146)	2014 (n=175)	2015 (n=194)	2019 (n=159)
No	94%	95%	99%	93%	95%	97%
Yes	6%	5%	1%	7%	5%	3%

Note: Consumers were the only participants who answered yes to this question; most were receiving OC services.

**Table 4.17 How much control did you have in making decisions about what you would do next?**

	2011-2012 (n=63)	2012 (n=133)	2013 (n=143)	2014 (n=173)	2015 (n=188)	2019 (n=146)
No control	5%	7%	4%	8%	8%	7%
A little control	10%	15%	15%	15%	12%	20%
Most of the control	27%	20%	35%	30%	29%	35%
Total control	59%	58%	46%	48%	50%	38%

Note: 56% of consumers reported total control (38% family members). Consumer average rating (3.22) significantly higher than family members (average 2.621;  $p < .001$ ). Those with concerns about confusion or memory loss indicated significantly less control ( $p < .001$ ).

## Action Plans and Follow up

**Table 4.18 Did this person work with you to develop a plan listing your goals and next steps?**

	2011-2012 (n=68)	2012 (n=129)	2013 (n=143)	2014 (n=169)	2015 (n=182)	2019 (n=153)
No	53%	46%	49%	40%	43%	46%
Yes	47%	54%	51%	60%	57%	54%

**Table 4.19 Has the person you worked with at the ADRC called you to see how you are doing?**

	2011-2012 (n=67)	2012 (n=128)	2013 (n=144)	2014 (n=170)	2015 (n=188)	2019 (n=144)
No	54%	38%	49%	51%	45%	46%
Yes	46%	62%	51%	49%	55%	54%

Note: Standard is that 90% of all consumers identified by ADRC staff as needing follow up by the ADRC received a follow up by ADRC staff. The number and persons identified by ADRC staff as needing follow up is unknown. The OC professional standard is that all OC consumers receive a follow up

**Table 4.20. Since your first contact with the ADRC, have you contacted them again?**

	2011-2012 (n=68)	2012 (n=134)	2013 (n=147)	2014 (n=173)	2015 (n=192)	2019 (n=78)
Yes	48%	60%	42%	45%	50%	52%

## Outcomes

**Table 4.21 The services or information have allowed me to live in the place I most desire.**

	2011-2012 (n=59)	2012 (n=118)	2013 (n=136)	2014 (n=163)	2015 (n=173)	2019 (n=143)
Strongly disagree	5%	3%	4%	6%	6%	7%
Disagree	14%	14%	15%	11%	12%	18%
Agree	46%	47%	51%	48%	45%	46%
Strongly agree	34%	36%	31%	34%	38%	29%

Note: Standard is that 70% of consumers will report living in a place they most desire.

**Table 4.22 I am receiving enough support to meet my needs and preferences.**

	<b>2011-2012 (n=59)</b>	<b>2012 (n=128)</b>	<b>2013 (n=133)</b>	<b>2014 (n=167)</b>	<b>2015 (n=179)</b>	<b>2019 (n=147)</b>
Strongly disagree	6%	8%	5%	8%	8%	10%
Disagree	19%	16%	23%	21%	20%	22%
Agree	48%	52%	46%	48%	42%	50%
Strongly agree	27%	24%	26%	22%	29%	17%

Note: Standard is that 80% will report receiving enough support to meet consumer needs and preferences.

**Table 4.23 I believe I am more independent as a result of the information and services I received.**

	<b>2011-2012 (n=59)</b>	<b>2012 (n=123)</b>	<b>2013 (n=134)</b>	<b>2014 (n=157)</b>	<b>2015 (n=170)</b>	<b>2019 (n=138)</b>
Strongly disagree	8%	4%	7%	8%	7%	5%
Disagree	20%	26%	20%	20%	16%	26%
Agree	42%	42%	50%	50%	47%	44%
Strongly agree	29%	28%	23%	22%	29%	25%

Note: Standard is that 80% will report they are more independent as a result of services received.

**Table 4.24 I believe I am safer in my home as a result of the information and services I received.**

	<b>2011-2012 (n=51)</b>	<b>2012 (n=116)</b>	<b>2013 (n=129)</b>	<b>2014 (n=161)</b>	<b>2015 (n=169)</b>	<b>2019 (n=138)</b>
Strongly disagree	4%	2%	8%	6%	5%	4%
Disagree	14%	22%	14%	15%	19%	18%
Agree	51%	48%	49%	55%	42%	52%
Strongly agree	31%	28%	30%	25%	34%	25%

Note: Standard is that 80% will report that they are safer.

**Table 4.25 The services or information received have allowed me to expand or maintain activities outside of my home.**

	<b>2011-2012 (n=50)</b>	<b>2012 (n=118)</b>	<b>2013 (n=130)</b>	<b>2014 (n=153)</b>	<b>2015 (n=163)</b>	<b>2019 (n=135)</b>
Strongly disagree	10%	8%	9%	10%	6%	8%
Disagree	44%	36%	33%	31%	31%	36%
Agree	28%	42%	41%	44%	40%	42%
Strongly agree	18%	14%	17%	15%	23%	14%

**Table 4.26 The services or information received have helped make the most of personal money and resources**

	<b>2011-2012 (n=51)</b>	<b>2012 (n=123)</b>	<b>2013 (n=156)</b>	<b>2014 (n=155)</b>	<b>2015 (n=164)</b>	<b>2019 (n=127)</b>
Strongly disagree	18%	7%	8%	6%	10%	14%
Disagree	18%	32%	30%	28%	24%	30%
Agree	47%	44%	44%	54%	48%	38%
Strongly agree	18%	17%	18%	13%	18%	17%

Note: Standard is that 70% of participants report making the most of their personal money and resources.

**Table 4.27 I was eventually able to find help that I could afford.**

	<b>2012 (n=113)</b>	<b>2013 (n=125)</b>	<b>2014 (n=155)</b>	<b>2015 (n=160)</b>	<b>2019 (n=127)</b>
Strongly disagree	4%	14%	3%	12%	12%
Disagree	31%	22%	34%	20%	32%
Agree	48%	46%	37%	43%	42%
Strongly agree	17%	17%	26%	24%	14%

Note: not asked in 2011

**Table 4.28 New outcome variables in 2019:**

	Number answering	Strongly Disagree	Disagree	Agree	Strongly agree
I am less likely to fall	130	10%	32%	38%	19%
I am less likely to move into a nursing home	132	8%	27%	42%	23%
I am at less risk of abuse or neglect <sup>a</sup>	142	5%	19%	44%	15%

<sup>a</sup>Includes 17% who indicated the question was not applicable.

**Table 4.29 Without the ADRC: I would:**

	Number answering	% yes
<b>Would be worse off</b>		
I would not have the information I needed to get help	312	69%
I would be stressed about not knowing what to do	317	69%
I would not have had the help I need	306	64%
I would be worse off financially	300	50%
I would be more isolated from the community	308	46%
I could not meet my basic needs	306	43%
My medical condition would be worse	304	42%
I would be dead	294	18%
I would be homeless	306	18%
I would be in a nursing home	300	17%
<b>Better or no worse off</b>		
It has made no difference, I would be the same	292	48%
I would be better off	295	7%