

Final Report
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Consumer Satisfaction with Aging & Disability Resource Connection of Oregon: Round 5

Part 4. Options Counseling

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Consumer Satisfaction with Aging & Disability Resource Connection (ADRC) Services: Round 5

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Part 4. Options Counseling

Interviews were completed with 138 Options Counseling (OC) consumers or their family members in 2015. 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. In Round 1 (2011/2012), the OC sample was quite small because the program was still new. As a result, the longer version of the survey was also administered to those who reported that they received a home visit. As in previous rounds, many people who were not OC consumers reported that they received a home visit (Table 1.4). In 2015, this included 56 Call Center consumers (30% of Call Center participants, or 17% of the entire sample). Because home visits are indicative of a high level of service need, the longer version of the survey continues to be administered to these individuals as well as OC consumers and family members. Few significant differences were found between participants who received home visits by Call Center and OC status. That is, except where noted, ratings were similar in areas related to needs, services used, outcomes reported, and general satisfaction regardless of whether the person receiving a home visit received OC services or not.

Home Visits

Participants were asked if anyone from the ADRC came to their home (Tables 1.4 and 4.1¹, Appendix B). Because a home visit is a preferred OC practice, it is not surprising that the majority of OC consumers (64%) 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 home visits for the Call Center consumers, and it is very possible that the home visits reported by Call Center consumers did not actually come from the ADRC.

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

Those who received home visits reported more needs than those who did not, an average of 5.63 reasons for contacting the ADRC compared to 4.34. (See Part 1 for a discussion of need and how it was measured). Similarly, those with home visits used significantly more services (2.90 compared to 1.28; Table 4.1). As stated above, responses about need were similar regardless of whether the person receiving the home visit was a participant through Options Counseling or the Call Center.

Participants who received home visits were asked to describe the timeliness of the visit. Response time for the home visit in 2015 was similar to Round 4, with 20% compared to 22% receiving a visit within two days of their contact with the ADRC (Table 4.2). This represents a decline from the 2013 survey, when 27% reported receiving a visit within the first two days of their contact with the ADRC. In 2015, as in most previous years, about one-third waited more than a week for someone to go to their home. In spite of the wait, however, participants were more positive about their ratings of the timeliness of the home visits; 40% reported the wait was short and timely compared to 31% in 2014 (Table 4.3). About half (52%) 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 9% in 2015.

Consumers were quite positive about their experiences with the home visit. Nearly three quarters (72%) reported the visit had been very helpful in addressing their concerns and another 18% said it had been somewhat helpful. These numbers are similar to previous rounds. Eighty-five percent reported they were very comfortable with the person who came to their home, representing an increase from 80% in 2014 (Tables 4.4 & 4.5).

Over half of the participants (57%) indicated that the person who came to their home identified additional types of help that could be needed (Table 4.6), and almost all participants (92%) agreed with that assessment (Table 4.7). About half (51%) said that family members or others had been involved in the discussion (Table 4.8). This is an increase over the past two years, but is similar to reports from rounds 1 and 2. Of those who had family or others involved in these home visits in 2015, 75% said that they agreed with family members on almost everything related to their circumstances, concerns, and help needed. This is a lower percentage than reported in previous years (Table 4.9). Overall, most of the 72 consumers who had family or others present when they met with the person from the ADRC, reported it had been very helpful (71%) while another 19% 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., 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 4.10, participants who received home visits were generally positive about assistance received in helping them **understand the service system**; about half (51%) of participants rated the ADRC person as excellent in this regard and another 35% rated them as good (Table 4.11). At the same time, 15% rated them as fair or poor. This unfavorable rating has declined somewhat over the years.

In spite of difficulties or uncertainties that some participants have related to understanding the service system, ratings about **understanding about available options** continued to improve. In 2015, 79% of participants indicated they had better understanding about various options after receiving Options Counseling and/or home visits (Table 4.12).

Improvements were also reported in ratings of the person from the ADRC in helping them to **explore choices**. The percentages of those giving the highest rating of “excellent” increased this year from 59% in 2014 to 64% in 2015 (Table 4.13). Similar to previous years, 12% assigned poor or fair ratings.

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); 89% gave ratings of good or excellent which was slightly higher in 2015 than in 2014. Family members had significantly higher ratings for this item than consumers. Consumers or family members who had concerns with confusion or memory loss also gave significantly higher ratings on this item.

ADRC staff receive high marks (58% excellent, 30% good) in **supporting consumer decisions** (Table 4.15). Similarly, only 5% participants felt staff was trying to **talk the consumer into things that they did not want** (Table 4.16). All of the participants who gave these negative ratings were consumers (not family members), and some (but not all) had concerns with confusion and memory loss. Almost all of these individuals were receiving OC services.

The percentage of participants (50%) reporting they had **total control of making decisions** about what to do next was similar to Round 4, but lower than in Rounds 1 and 2 (Table 4.17). Consistent with all years of the survey, 20% reported they had little or no control over decisions. A higher proportion of consumers reported total control (56%) compared to family members (38%). Similarly, ratings of control were significantly higher for consumers compared to family members. Not surprisingly, ratings of consumer control were significantly lower when there was an issue with confusion or memory loss.

Action Plans & Follow Up

Assisting consumers in developing actions 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 5, over half (57%) of the participants reported receiving this service, down slightly from 2014, but higher than the three 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 continue 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 at 55% of participants indicated they had received a follow up call. This is higher than the previous two years (Table 4.19). The consumer-based ADRC standards and expectations set by the Advisory Committee included a requirement that 90% of consumers identified as needing follow up by the ADRC, receive a follow up. As reported in previous years, this standard encompasses Options Counseling as well as Call Center consumers. It is beyond the scope of this survey to determine the extent to which these ADRC standards were met; we do not know who was identified as needing a follow up call by Call Center staff. However, 50% of participants reported that they had contacted the ADRC again, higher than reports in every year except Round 2 (Table 4.20).

Outcomes (OC consumers & those with Home Visits)

Several indicators of positive outcomes are included in the survey (Tables 4.21-4.27). Overall, these measures indicate that the ADRC is meeting its goals of supporting people in the least restrictive environment.

- ***The services or information have allowed me [my family member] to live in the place I [he/she] most desire.*** In 2015, 38% strongly agreed and 45% agreed with this statement. The percentage strongly agreeing increased over the five years (Table 4.21).
- ***I am [my family member is] receiving enough support to meet my needs and preferences.*** In 2015, 29% strongly agreed and 42% agreed with this statement, indicating that about 30% were not getting enough support.
- ***I believe that I am [I believe that my family member is] more independent as a result of the information and services I received.*** Those strongly agreeing with the statement

(29%) has increased over the past two years, though is similar to ratings in Rounds 1 and 2 (Table 4.23). Forty-seven percent agreed with the statement.

- ***I believe I am [I believe that my family member is] safer in my home as a result of the information and services I received.*** 34% strongly agreed and 42% agreed with this statement. (Table 4.24).
- ***The services or information received has allowed me [my family member] to expand or maintain activities outside of my [her/his] home.*** As in prior surveys, participants were likely to agree (40%) or strongly agree (23%) with this statement (Table 4.25), a potential indicator of quality of life.
- ***The services or information received have helped make the most of personal money and resources.*** A major goal of the ADRC program is to help consumers **preserve their resources** to prevent or delay enrollment in Medicaid. Although the majority strongly agreed (18%) or agreed (48%) with the statement, about one-third disagreed or strongly disagreed. (Table 4.26). Family members gave significantly more positive ratings than consumers.
- ***I was eventually able to find help that I could afford [My family member was eventually able to find help that she/he could afford].*** 24% strongly agreeing, and 43% agreeing with the statement. About one-third disagreed or strongly disagreed with that statement (Table 4.27), indicating significant unmet need at the time of the interviews.

The open-ended responses to questions are helpful in understanding the nature and severity of issues these consumers face. When asked what their circumstances would have been without the ADRC, the majority thought their circumstances would have been worse (Table 4.28). Descriptions of how participants' lives would have been worse varied. Some (8%) made general statements that without the ADRC, they would not have needed information or would have needed to explore services on their own. Others made general statements that indicated that things would have been a lot worse without the ADRC (7%).

Most participants gave specific examples and many comments are similar to those made in past survey years. Some described being worse off financially (16%), facing greater expenses or inability to buy groceries, and afford health insurance, medical supplies, and medications. The following comments indicate what they would be experiencing without ADRC support.

It would be considerably more difficult to go through the medical portion and harder to pay the energy bill plus the food stamps are helping a lot.

I would not be able to do my grocery shopping or keep doctor appointments.

I would be forced to quit my job. I was desperate, and was needing care.

We would be struggling more not having the respite time to ourselves and struggling financially.

With respect to health, 17% of participants reported that that they would be sicker, would be hospitalized, or would have died. Some would face mental health issues or would have felt more distressed and insecure (10%) The comments below are examples of the types of issues that were resolved with ADRC support.

We would not have gotten help and he would be in pain.

I would not be out of the hospital or in my own home taking care of myself.

My mother would be back in the hospital and I would be so frustrated...

I would be in a mental institution.

It would be crazy because I would not know where to turn for help and I do not trust people.

I would be more depressed and living in a filthy place. I think I would have a harder time not wanting to commit suicide.

Others would not have been able to remain in their homes. As in past years, some said they would be homeless.

I would be in a lot worse shape or homeless.

I would not have healthcare or be able to afford to live where I am living, I would have had to move from here.

I would be living in a back room at my sister's house.

Still others (18%) reported that they would have had difficulty meeting their basic needs without the help in their homes with housekeeping and personal care.

I would be in a lot of pain especially doing the laundry.

I would be in a whole lot of hurt. I would have trouble getting meals.

My dad was worn out providing care for my mom, and it made him feel better about life after receiving services.

I do not think he would be as independent as he is.

Many consumers found that the information they received about available resources enabled them to better understand the service system and obtain the help they needed.

I was in the dark about services, once received information to explore. I was surprised about what services were available. I gained knowledge and referred a friend.

[The respondent avoided] A lot more confusion and on the wrong path to services.

The lady really gave me an understanding of what was going on with social security and disability.

I would be flopping around like a fish out of water, not knowing where to get help, since I had never gotten assistance before.

Fewer 2015 participants (5%) reported that their circumstances did not improve as a result of their contact with the ADRC. As in past years, the most common reason reported was that they had not received the information or services they needed.

[I would be] the same without contacting them at all because they were no help.

I think the situation would be the same, the information they gave me was good but they did not tell anything that was useful or was applicable.

I would be better off, at this point, they are not helpful. It is not their fault, it is the county, their income standards. My bank account is almost overdrawn already, and I have to pay more money out than I am earning...

Conclusions and Recommendations

The ADRC Options Counseling program is clearly providing important and valued services. Home visits are important in identifying services 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. 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.

Qualitative responses strongly support the value of the ADRC for participants. The majority of ADRC consumers and their family members say their circumstances would have been worse without the ADRC. This includes having more difficulty meeting basic health and ADL needs, being worse off financially, and being more distressed emotionally.

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.

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)
Yes	27%	41%	40%	53%	44%
Percent of OC consumers receiving a home visit	73%	80%	71%	80%	64%
Percent of ADRC call center consumers receiving a home visit	24%	28%	23%	37%	30%

Note: Those who received home visits in 2015 reported significantly more ($p < .001$) needs (5.63 compared to 4.34) and used more services (2.90 compared to 1.98). They also had more favorable outcomes ratings overall (2.60 compared to 2.35; $p = .04$) than those who did not receive a home visit. No differences were found between ratings of those who were OC participants and those who were Call Center participants.

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)
2 days or less	24%	23%	27%	22%	20%
3 to 7 days	40%	50%	42%	44%	48%
More than a week	35%	27%	32%	34%	32%

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)
Short and timely	45%	36%	48%	31%	40%
Some wait, but reasonable	45%	57%	51%	56%	52%
Much too long	9%	7%	6%	13%	9%

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)
Not at all helpful	9%	6%	7%	6%	6%
Not too helpful	6%	4%	3%	4%	4%
Somewhat helpful	21%	19%	22%	24%	18%
Very helpful	64%	71%	68%	66%	72%

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)
Very uncomfortable	4%	1%	1%	2%	2%
A little uncomfortable	2%	3%	3%	3%	2%
Somewhat comfortable	12%	10%	6%	15%	11%
Very comfortable	82%	86%	90%	80%	85%

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)
Yes	56%	61%	61%	64%	57%

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)
Yes	91%	91%	92%	85%	92%

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)
Yes	58%	53%	43%	43%	51%

Trends were maintained from 2013 to 2014

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)
We agreed on almost everything	78%	84%	84%	87%	75%
We agreed more than we disagreed	11%	14%	8%	13%	18%
We disagreed more than we agreed	5%	2%	8%	-	3%

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)
Not at all helpful	14%	3%	8%	-	6%
Not too helpful	3%	--	2%	6%	4%
Somewhat helpful	25%	22%	12%	15%	19%
Very helpful	58%	75%	78%	79%	71%

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)
Poor	10%	8%	6%	4%	7%
Fair	9%	9%	11%	12%	8%
Good	33%	40%	29%	30%	35%
Excellent	48%	43%	53%	53%	51%

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)
More confused and understand less	6%	9%	11%	9%	8%
Understanding is about the same	16%	22%	19%	15%	13%
Better understanding	78%	69%	69%	75%	79%

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)
Poor	9%	6%	3%	3%	5%
Fair	7%	10%	12%	14%5	7%
Good	25%	23%	21%	23%	24%
Excellent	56%	61%	64%	59%	64%

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)
Poor	11%	6%	4%	2%	4%
Fair	6%	6%	8%	14%	6%
Good	29%	32%	30%	29%	34%
Excellent	54%	56%	59%	54%	55%

Note: Standard is 90% report that the Options Counselor listened to their opinions and understood their specific circumstances. Family members had significantly higher ratings (3.60) for this item than consumers (3.33) in 2015 ($p<.05$) and those with concerns about confusion or memory loss also gave higher ratings than those without (3.54 compared to 3.28; $p<.05$)

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)
Poor	6%	6%	4%	2%	5%
Fair	13%	8%	11%	11%	7%
Good	31%	30%	33%	30%	30%
Excellent	50%	56%	52%	57%	58%

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)
No	94%	95%	99%	93%	95%
Yes	6%	5%	1%	7%	5%

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)
No control	5%	7%	4%	8%	8%
A little control	10%	15%	15%	15%	12%
Most of the control	27%	20%	35%	30%	29%
Total control	59%	58%	46%	48%	50%

Note: 56% of consumers reported total control (38% family members). Consumer average rating (3.36) significantly higher than family members (average 2.91; $p<.01$). 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)
No	53%	46%	49%	40%	43%
Yes	47%	54%	51%	60%	57%

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)
No	54%	38%	49%	51%	45%
Yes	46%	62%	51%	49%	55%

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)
Yes	48%	60%	42%	45%	50%

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)
Strongly disagree	5%	3%	4%	6%	6%
Disagree	14%	14%	15%	11%	12%
Agree	46%	47%	51%	48%	45%
Strongly agree	34%	36%	31%	34%	38%

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.

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

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.

	2011-2012 (n=59)	2012 (n=123)	2013 (n=134)	2014 (n=157)	2015 (n=170)
Strongly disagree	8%	4%	7%	8%	7%
Disagree	20%	26%	20%	20%	16%
Agree	42%	42%	50%	50%	47%
Strongly agree	29%	28%	23%	22%	29%

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.

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

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.

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

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

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

Note: Standard is that 70% of participants report making the most of their personal money and resources. Family members gave significantly higher ratings (2.98) than consumers (2.62; p<.05).

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

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

Note: not asked in 2011

Table 4.28 What do you think your circumstances would be now if you had not received information or services through the ADRC? (N=225)

<p>A little Worse (n=28)</p> <ul style="list-style-type: none"> • Not as much information; uninformed • Would have to be exploring services on their own. <p>Worse emotionally (n=31)</p> <ul style="list-style-type: none"> • Stressed • Distressed, in a Panic • Insecure • Uncomfortable <p>More difficulty with basic needs (n=55)</p> <ul style="list-style-type: none"> • Wouldn't have help (e.g., through church) • Wouldn't be in own home • Wouldn't have found services needed <p>Worse physically (n=26)</p> <ul style="list-style-type: none"> • Dead, wouldn't be here • Wouldn't have recovered (rehab) • Worse medical condition <p>Worse financially (n=52)</p> <ul style="list-style-type: none"> • Uninsured • Funds for daughter to visit • Wouldn't have food to eat • Got money back (from insurance, Part B) • Hospital bills • Transportation <p>A lot worse: general (n=24), would be homeless (n=9)</p>
