





## Yuba-Sutter Aging and Disabilities Plan Data Packet 3: Healthcare and Caregiving

The chart on the following pages summarizes key themes, identified needs, and potential solutions from the three data sources listed below, focusing on one of the five approved goals of the Yuba-Sutter Aging and Disabilities Plan. It provides a comprehensive understanding of the challenges faced by older adults, individuals with disabilities, and caregivers in Yuba and Sutter Counties, offering a solid foundation for community stakeholders to develop data-driven solutions that effectively address these needs.

- Data Map: A comprehensive review of local and state data aligned with the California Master Plan for Aging's five bold goals for 2030. Local sources include Adventist Health and Rideout's Community Health Needs Assessment, the Ombudsman Program, Regional Housing Authority, and Sutter Yuba Homeless Consortium. State and national sources, such as the California Department of Aging, UCLA Elder Index, U.S. Census Bureau, and Centers for Medicare & Medicaid Services.
- Community Surveys: Input was gathered from 297 respondents, including older adults, individuals with disabilities, and caregivers, through a culturally relevant, multilingual survey available in English, Hmong, Punjabi, and Spanish. The survey explored key topics, including housing and community, emergency preparedness, transportation, healthcare and related services, social participation and inclusion, and communication. Responses captured perspectives across diverse geographic and demographic groups.
- 3. Focus Groups: Insights from 75 participants across eight diverse focus groups, including older adults, women, LGBTQ+ individuals, racial and ethnic minorities, individuals with disabilities, veterans, caregivers, and low-income residents— communities historically under-resourced and under-served in the Yuba-Sutter area. Discussions explored housing, emergency preparedness, transportation, community accessibility, healthcare, nutrition, and social engagement.

## GOAL 3: EXPAND ACCESS TO HEALTHCARE AND CAREGIVER SUPPORT

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Key Themes	Data Findings (Needs/Challenges)	Insights (Possible Solutions)
Healthcare		
Access to Primary Care	<ul> <li>Only 32% of respondents rated primary care access as "good," while 16% rated it "poor," highlighting limited availability of primary care services. (Community Survey)</li> <li>Proximity to healthcare is a concern, with 27% rating proximity within 15 minutes as "poor." (Community Survey)</li> <li>Rural residents face significant difficulty accessing regular primary care due to long travel distances and provider shortages. (Focus Groups)</li> </ul>	<ul> <li>Incentivize providers to serve rural communities through grants or loan forgiveness.</li> <li>Establish satellite clinics or mobile units in underserved areas.</li> <li>Partner with transportation services to assist residents in accessing primary care.</li> </ul>
Specialty Care Access	<ul> <li>Specialty care is inaccessible to many, with 28% rating it "poor," reflecting insufficient availability of specialists, especially for geriatric and mental health care. (Community Survey)</li> <li>Long wait times for specialty appointments are common, particularly in rural areas where geographic disparities exacerbate challenges. (Focus Groups)</li> </ul>	<ul> <li>Recruit specialists to underserved areas through incentive programs.</li> <li>Expand telehealth services to provide specialty consultations without requiring travel.</li> <li>Develop specialty care hubs in centralized locations.</li> </ul>

Key Themes	Data Findings (Needs/Challenges)	Insights (Possible Solutions)
Pharmacy and Medication Access	Pharmacy services received low ratings, with only 34% rating them "Good" and 23% "Very Good" (Community Survey).	Increase the number of pharmacies in underserved areas, particularly rural locations.
	<ul> <li>CVS provides medication delivery services, but Medi-Cal recipients are excluded, creating a barrier for low-income individuals who rely on Medi-Cal. (Focus Groups)</li> <li>Oroville Care Pharmacy offers daily medication delivery, but similar services are not widely available in other areas, leaving gaps in accessibility. (Focus Groups)</li> </ul>	Develop affordable delivery programs for medications to reach older adults, individuals with disabilities, and those with mobility or transportation challenges.
Preventative Health	Preventative health services are poorly rated, with only 21% in Yuba and 40% in Sutter describing them as good or excellent. (Data Map)	Expand community-based preventative care programs, including mobile health clinics.
	Limited outreach and availability of preventative services, such as screenings and vaccinations, leave residents underserved, especially in rural areas. (Focus Groups)	<ul> <li>Conduct outreach campaigns to raise awareness of the importance of preventative health.</li> </ul>
	<ul> <li>Low awareness of preventative health programs prevents many from utilizing available services. (Community Survey, Focus Groups)</li> </ul>	Expand preventative care services to reduce reliance on ED visits, focusing on chronic disease management and wellness checks.

Key Themes	Data Findings (Needs/Challenges)	Insights (Possible Solutions)
Chronic Health Management	<ul> <li>Chronic health issues affect a majority of older adults, with 62% in Yuba and 72% in Sutter reporting significant physical health concerns. (Data Map)</li> <li>Lack of coordinated follow-up care for chronic conditions results in recurring emergencies. (Focus Groups)</li> </ul>	<ul> <li>Develop chronic disease management programs targeting conditions like diabetes and heart disease.</li> <li>Improve coordination between primary care providers and specialists to ensure consistent care.</li> <li>Implement regular check-ins for chronic illness patients to reduce reliance on EDs.</li> </ul>
Emergency and Urgent Care	<ul> <li>66,888 ED visits in 2022 and a 32.79% Medicare readmission rate highlight gaps in preventative care, discharge planning, and follow-up care (<i>Data Map</i>).</li> <li>Hospital and urgent care services received mixed ratings, with 29% rating access as poor and 13% rating it as very good. (<i>Community Survey</i>)</li> <li>29% of respondents rated hospital and urgent care access as "Poor," while only 13% rated it as "Very Good," indicating dissatisfaction with emergency and urgent care services (<i>Community Survey</i>).</li> </ul>	<ul> <li>Develop robust discharge protocols and ensure follow-up care for Medicare patients to reduce readmission rates.</li> <li>Expand urgent care facilities in underserved areas and provide transportation support for patients needing urgent services.</li> </ul>

Key Themes	Data Findings (Needs/Challenges)	Insights (Possible Solutions)
Cognitive Decline and Dementia	<ul> <li>Only 37% of older adults statewide discuss memory loss or cognitive concerns with their healthcare providers, reflecting low awareness. (<i>Data Map</i>)</li> <li>Rising dementia-related deaths highlight a lack of support programs for cognitive health. (<i>Data Map, Focus Groups</i>)</li> </ul>	<ul> <li>Cognitive screenings are required for routine primary care for older adults.</li> <li>Develop community-based dementia support programs, including caregiver training and respite care.</li> </ul>
Mental Health	<ul> <li>50% of older adults experience psychological distress, yet only 31% rate mental health services as adequate, highlighting insufficient mental health care availability. (Data Map, Community Survey)</li> <li>Mental health services are insufficient, particularly for conditions such as OCD and schizophrenia. Patients need more varied therapeutic options, culturally aligned providers, and support for managing stress and anxiety-related symptoms. (Focus Groups)</li> <li>Stigma around mental health prevents some from seeking help. (Focus Groups)</li> </ul>	<ul> <li>Expand counseling and therapy services targeted to older adults.</li> <li>Provide community education campaigns to reduce stigma and raise awareness of mental health resources.</li> </ul>
Hearing and Vision Services	<ul> <li>32% of respondents were unsure about hearing services, indicating limited awareness. (<i>Community Survey</i>)</li> </ul>	Increase community-based hearing and vision screenings, especially in rural and underserved areas.

Key Themes	Data Findings (Needs/Challenges)	Insights (Possible Solutions)
	Vision services were rated "Good" by only 25%, indicating limited access. (Community Survey)	<ul> <li>Launch educational campaigns to improve awareness of available hearing and vision services.</li> <li>Collaborate with local optometrists and audiologists to offer low-cost or mobile services.</li> </ul>
Oral Health	<ul> <li>Access to dental care is limited, with 58% of Yuba and 51% of Sutter older adults reporting difficulties. (Data Map)</li> <li>Dental services received a "Poor" rating from 31% of respondents. (Community Survey)</li> <li>32% of respondents indicated that they often go without dental care. (Community Survey)</li> </ul>	<ul> <li>Establish mobile dental clinics or community dental services to increase accessibility.</li> <li>Integrate dental care into routine primary care visits.</li> </ul>
	Few affordable dental care options exist, and many providers do not accept Medi-Cal. (Focus Groups)	
Health and Wellness Classes	28% of respondents rated health/wellness classes as "Poor," pointing to a lack of age- and disability-specific wellness programs ( <i>Community Survey</i> ).	Develop wellness classes that address the unique needs of older adults and individuals with disabilities.

Key Themes	Data Findings (Needs/Challenges)	<ul> <li>Insights         <ul> <li>(Possible Solutions)</li> </ul> </li> <li>Use community centers and online platforms to provide accessible wellness classes.</li> </ul>
Fragmented Healthcare Services	<ul> <li>Healthcare services are fragmented, particularly for rural Medi-Cal recipients, creating inefficiencies and gaps in care delivery. (<i>Focus Groups</i>)</li> <li>There is a lack of integrated healthcare units in underserved areas, such as Sutter County and the foothills, which makes accessing comprehensive care more difficult. (<i>Focus Groups</i>)</li> </ul>	<ul> <li>Develop integrated healthcare units in underserved and rural areas to centralize services, such as primary care, mental health, specialty care, and social services.</li> <li>Simplify healthcare navigation for Medi-Cal recipients by implementing case management programs to connect patients with necessary services.</li> <li>Develop digital tools or resource directories to help rural residents locate providers that accept Medi- Cal.</li> </ul>
Demand for Home Health Services and Community-Based Healthcare Hubs	Rural and isolated communities, particularly foothill residents and those with mobility challenges, face significant barriers in accessing healthcare. (Focus Groups)	Fund and expand home health programs to support individuals who cannot easily access healthcare facilities.

Key Themes	Data Findings (Needs/Challenges)	Insights (Possible Solutions)
	There is a pressing need for home health services and community healthcare hubs to reduce these barriers and improve care accessibility. (Focus Groups)	<ul> <li>Train and certify additional home health aides to address staffing shortages in rural areas.</li> <li>Partner with community organizations and nonprofits to co- locate services and maximize outreach efforts.</li> </ul>
Affordability	<ul> <li>42% of older adults face difficulty affording healthcare and medications, with high out-of-pocket costs being a significant barrier. (<i>Data Map, Community Survey</i>)</li> <li>Financial constraints disproportionately affect low-income and older adult residents, restricting access to necessary care. (<i>Focus Groups</i>)</li> <li>Many rely on emergency rooms for routine care due to the high costs of both primary and specialized medical services. (<i>Focus Groups</i>)</li> </ul>	<ul> <li>Provide financial subsidies or sliding-scale fees for low-income individuals.</li> <li>Expand prescription assistance programs to help older adults and individuals with disabilities afford medications.</li> </ul>
Insurance Barriers	Medicare Advantage enrollment is exceptionally low, with only 11.45% in Yuba and 6.09% in Sutter enrolled, compared to the statewide average of 56.22%. (Data Map)	<ul> <li>Simplify enrollment processes for Medicare and Medi-Cal programs.</li> <li>Conduct targeted outreach to educate residents about insurance options and enrollment processes.</li> </ul>

Key Themes	Data Findings	Insights (Bossible Solutions)
	<ul> <li>(Needs/Challenges)</li> <li>Eligibility restrictions and complexity in navigating insurance programs leave many older adults without adequate coverage. (Focus Groups)</li> <li>Insurance often provides insufficient coverage, including limited dental coverage under Medi-Cal, a lack of coverage for life-sustaining medications, and restricted access to durable medical equipment. (Focus Groups)</li> <li>Many individuals struggle to find providers who accept their insurance, particularly in rural areas, which may require traveling long distances. (Focus Groups)</li> </ul>	<ul> <li>(Possible Solutions)</li> <li>Collaborate with policymakers to reduce eligibility restrictions and simplify the approval process for accessing insurance benefits.</li> <li>Advocate for expanded Medi-Cal coverage to include essential services like dental care, durable medical equipment, and life- sustaining medications.</li> <li>Partner with nonprofits and local organizations to provide free or reduced-cost dental services, medical equipment, and medication support programs.</li> <li>Create financial incentives (e.g., grants, bonuses) for providers to accept Medicare, Medi-Cal, and other insurance programs, particularly in rural areas.</li> <li>Establish centralized resource hubs to assist with insurance enrollment, help individuals locate covered providers, and offer</li> </ul>

## DATA PACKET #3: HEALTHCARE AND CAREGIVING

Key Themes	Data Findings (Needs/Challenges)	Insights (Possible Solutions)
		financial support for uncovered services.
Transportation Barriers to Healthcare	<ul> <li>29% rated healthcare proximity within 15 minutes as "Good," while 27% rated it "Poor." (<i>Community Survey</i>)</li> <li>Distance to healthcare providers is a key concern, particularly for rural residents. (<i>Community Survey</i>)</li> <li>High costs, unreliable public transit, and long-distance travel limit access to medical appointments. (<i>Focus Groups</i>)</li> <li>Existing programs like Medi-Cal transportation are often unreliable. (<i>Focus Groups</i>)</li> </ul>	<ul> <li>Invest in reliable, affordable public transit and specialized medical transport services.</li> <li>Develop healthcare hubs in rural areas to reduce travel distances.</li> <li>Launch volunteer driver programs to help patients reach appointments.</li> </ul>
Healthcare Communication, Language, and Cultural Barriers	<ul> <li>Only 31% rated healthcare providers' cultural understanding as "Good," and 32% were unsure about access for disabilities. (<i>Community Survey</i>)</li> <li>Language barriers, reliance on word-of-mouth, and lack of appointment access impede efficient healthcare. (<i>Focus Groups</i>)</li> </ul>	<ul> <li>Train healthcare providers in cultural sensitivity and linguistic responsiveness to address diverse population needs.</li> <li>Recruit healthcare workers fluent in local languages, including Hmong and Japanese.</li> <li>Provide multilingual educational materials and interpretation services at healthcare facilities.</li> </ul>

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Key Themes	Data Findings (Needs/Challenges)	Insights (Possible Solutions)
Caregiving		
Challenges with Daily Activities	<ul> <li>Many older adults report difficulty with daily activities, with 39% in Yuba and 45% in Sutter indicating these issues. (<i>Data Map</i>)</li> <li>In-Home Support Services (IHSS) clients in both counties face challenges performing activities of daily living (ADLs) independently, often requiring additional support. (<i>Data Map</i>)</li> <li>A significant percentage of older adults rely on family members or friends to assist with daily activities, which creates strain on informal caregivers, particularly in households with limited resources. (<i>Community Survey, Focus Groups</i>)</li> <li>Some older adults find it emotionally challenging to seek caregiving assistance after a lifetime of independence, leading to reluctance in asking for help (<i>Focus Groups</i>).</li> </ul>	<ul> <li>Expand IHSS-authorized hours to ensure clients receive adequate support for ADLs.</li> <li>Provide enhanced caregiver training to address specific challenges faced by clients.</li> <li>Develop community-based programs to assist older adults with daily activities outside of formal IHSS structures.</li> <li>Launch awareness campaigns or support groups to address the stigma around seeking caregiving assistance.</li> </ul>
Caregiver Workforce Shortages	<ul> <li>Yuba City has only 1,460 Home Health Aides and 6,680 Personal Care Aides, far below state averages. (Data Map)</li> <li>IHSS caregivers are underpaid, earning \$16.40-\$16.65 compared to the state average of \$17.46. (Data Map)</li> </ul>	<ul> <li>Increase wages and benefits for caregivers to attract more workers.</li> <li>Expand caregiver training and certification programs to grow the workforce.</li> </ul>

Key Themes	Data Findings (Needs/Challenges)	Insights (Possible Solutions)
	A shortage of in-home caregivers, particularly through IHSS, limits available support for those in need. (Focus Groups)	Launch campaigns to promote caregiving as a rewarding career.
Barriers to Accessing IHSS Services and Private Care	<ul> <li>The eligibility process for IHSS is perceived as complicated and slow, preventing individuals from receiving necessary care. (Focus Groups)</li> <li>Those who do not qualify for IHSS often cannot afford private caregiving services, leaving their caregiving needs unmet. (Focus Groups)</li> </ul>	<ul> <li>Streamline IHSS eligibility and application procedures to make them more accessible and easier to navigate.</li> <li>Provide application assistance through community organizations or dedicated navigators.</li> <li>Offer subsidies or financial aid programs for individuals ineligible for IHSS to help them afford private care services.</li> <li>Develop low-cost or sliding-scale private caregiving options for those with limited resources.</li> </ul>
Gaps in Elder Care Programs and Services	Yuba and Sutter Counties lack critical elder care programs, including Adult Day Health Care and Programs for All-Inclusive Care for the Elderly (PACE), which are essential for supporting older adults with complex care needs. ( <i>Data Map</i> )	<ul> <li>Develop and implement Adult Day Health Care and PACE programs to provide comprehensive elder care services.</li> <li>Increase investments in skilled nursing facilities, especially in</li> </ul>

Key Themes	Data Findings (Needs/Challenges)	Insights (Possible Solutions)
	<ul> <li>Yuba County faces a shortage of skilled nursing facilities, with 10,270 older adults per facility compared to 3,774 in Sutter. (<i>Data Map</i>)</li> <li>The lack of accessible, comprehensive elder care services limits the ability of older adults to age in place and receive the support they need. (<i>Focus Groups</i>)</li> </ul>	<ul> <li>underserved areas like Yuba County.</li> <li>Strengthen partnerships with local organizations to fill gaps in elder care services.</li> </ul>
Residential Care Accessibility	<ul> <li>Access to Residential Care Facilities for the Elderly (RCFEs) remains insufficient, with Sutter County having 2,156 older adults per facility and Yuba County having 2,568, both of which fall short of meeting the demand. (<i>Data Map</i>)</li> <li>Only 14% of older adults in both counties rated long-term care services as good or excellent, indicating widespread dissatisfaction with available options. (<i>Data Map</i>)</li> </ul>	<ul> <li>Increase the number of RCFEs in both counties to meet growing demand.</li> <li>Improve the quality of care through enhanced caregiver training and additional resources for facilities.</li> <li>Conduct a regional assessment to align RCFE capacity and offerings with community needs.</li> </ul>
Low Ratings for Long- Term and Daytime Care	Long-term care services are poorly rated by older adults, with daytime care services receiving particularly low marks: only 4% in Yuba and 6% in Sutter rated them as good compared to the regional average of 22%. (Data Map)	Develop and promote high-quality daytime care services, including transportation options for those in rural areas.

Key Themes	Data Findings (Needs/Challenges)	Insights (Possible Solutions)
	A lack of affordable and accessible daytime care options creates significant challenges for older adults and caregivers. ( <i>Focus Groups</i> )	<ul> <li>Expand funding and incentives to establish or improve long-term and daytime care facilities.</li> <li>Partner with community organizations to offer affordable, localized solutions for daytime care.</li> </ul>
Informal Caregiving	<ul> <li>A significant percentage of adults provide unpaid caregiving: 33.8% in Yuba County and 23.3% in Sutter County, reflecting a high reliance on informal caregiving networks (<i>Data Map</i>).</li> <li>25% sometimes help care for a disabled family member or neighbor, and 24% never provide care, reflecting varied caregiving involvement. (<i>Community Survey</i>)</li> <li>The caregiving landscape in Yuba County shows stronger community-oriented support, but it places a considerable demand on informal caregivers to meet the needs of older adults (<i>Focus Groups</i>).</li> <li>Informal caregiving often involves assisting with daily activities, emotional support, and navigating healthcare systems, which can strain family dynamics and personal resources (<i>Focus Groups</i>).</li> </ul>	<ul> <li>Develop neighborhood caregiving support programs to provide informal caregivers with resources and shared assistance opportunities.</li> <li>Offer financial incentives, such as tax credits or stipends, to informal caregivers to alleviate financial burdens.</li> <li>Provide training for family caregivers on navigating healthcare systems, managing stress, and delivering essential care to older adults.</li> </ul>

Key Themes	Data Findings (Needs/Challenges)	Insights (Possible Solutions)
<b>Caregiver Burdens</b>	<ul> <li>Emotional burdens are significant, with 21% of caregivers in Yuba County and 37% in Sutter County reporting stress related to caregiving responsibilities (<i>Community Survey</i>).</li> <li>Financial strain affects 23% of caregivers in Yuba and 28% in Sutter, highlighting the economic challenges of caregiving (<i>Community Survey</i>).</li> <li>Many caregivers experience social isolation and burnout due to the intense demands of caregiving, particularly when balancing work and family commitments (<i>Focus Groups</i>).</li> <li>Limited access to respite care further compounds caregiver stress, leaving caregivers without opportunities for breaks or self-care (<i>Focus Groups</i>).</li> </ul>	<ul> <li>Expand respite care services to reduce caregiver burnout.</li> <li>Create peer support groups and provide counseling services to help caregivers manage stress and emotional burdens.</li> <li>Offer grants, subsidies, or financial aid programs to reduce caregiving-related expenses.</li> <li>Encourage local employers to provide flexible work arrangements for employees who are also caregivers.</li> </ul>
Caregiving Cultural and Linguistic Challenges	Lack of culturally aligned caregiving services for Hmong and Japanese older adults leaves a gap in care. (Focus Groups)	<ul> <li>Recruit and train bilingual caregivers to meet linguistic and cultural needs.</li> <li>Incorporate cultural competency training into caregiver education programs.</li> </ul>

Key Themes	Data Findings (Needs/Challenges)	Insights (Possible Solutions)
Telehealth and Technology Barriers	<ul> <li>The lack of data on telehealth usage among older adults suggests underutilization and unaddressed barriers to healthcare access (<i>Data Map</i>).</li> <li>32% of respondents were unsure about telehealth options. (<i>Community Survey</i>)</li> <li>Gaps in telehealth infrastructure, including internet connectivity and availability of telehealth-ready providers, hinder access to virtual healthcare services (<i>Focus Groups, Data Map</i>).</li> <li>Broadband limitations in rural areas prevent reliable telehealth adoption, particularly in underserved regions (<i>Focus Groups</i>).</li> <li>Many older adults lack the digital literacy or necessary devices to access telehealth services, highlighting a need for technology training and affordable equipment (<i>Focus Groups</i>).</li> </ul>	<ul> <li>Collaborate with local healthcare agencies to create telehealth expansion strategies.</li> <li>Expand broadband infrastructure in rural areas to improve internet access.</li> <li>Provide training programs for older adults to improve digital literacy and telehealth adoption.</li> <li>Provide low-cost or free telehealth-ready devices, such as tablets or smartphones, to older adults and individuals with disabilities who lack access to necessary equipment.</li> </ul>