Expanding Our Vision

ARCHSTONE FOUNDATION

2014-2015 BIENNIAL REPORT
Archstone Foundation is a private grantmaking organization whose mission is to contribute towards the preparation of society in meeting the needs of an aging population.
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The 2014-2015 Biennial Report, “Expanding Our Vision,” is a reflection of Archstone Foundation’s commitment to its mission of preparing society to meet the needs of an aging population. The report highlights the Foundation’s new priority areas and their expansion. It also pays tribute to Archstone Foundation’s legacy work in preventing falls in older adults, preventing elder abuse and neglect, and addressing end-of-life issues, including the support of spirituality within palliative care.

This report narrates the past two years of the Foundation’s work in addressing emerging and unmet needs in the field of aging. It highlights grantees and their projects, innovative models, best practices, lessons learned, and the older adults they serve.

Our mission would not be fulfilled without the hard work and dedication of our partners in social and health care services and academic institutions. With these partners, the Foundation seeks to meet the needs of older adults and to promote community-based solutions and statewide improvements.
California, and the nation, continue to be challenged by changing demographics, health care reform, workforce needs, the desire of older adults to remain in their homes, depression in late-life, and the caregiving needs of older adults. The Foundation will continue to expand upon our commitment to innovations and solutions that address these uncertainties and positively impact the lives of older adults.

On behalf of the Board of Directors,

Robert C. Maxson, EdD  
Chairman

Joseph F. Prevratil, JD  
President and CEO
While Archstone Foundation has formally concluded its initiatives in fall prevention, elder abuse and neglect, and palliative care at the end-of-life, it recognizes that these continue to be key public health issues for older adults, and there is much work still to be done.

Fall Prevention
Archstone Foundation began its work in fall prevention in the mid-1990’s when it supported six projects, all of which had a reduction of falls included in their intended outcomes. Years later, the Foundation launched its Fall Prevention Initiative and funded the formation of the Fall Prevention Center of Excellence at the University of Southern California, a nationally recognized consortium of academic and public sector partners in California. In 2014, the Foundation continued its support of the Fall Prevention Center of Excellence to provide leadership, create new knowledge, improve practice, and develop sustainable fall prevention programs.

Elder Abuse & Neglect
Since 1991, Archstone Foundation awarded grants to support elder abuse and neglect programs, build multidisciplinary teams, provide training, raise awareness, support national conferences, and deliver...
direct victim assessments and interventions. When the Foundation launched its *Elder Abuse & Neglect Initiative*, it was the first significant coordinated effort to strategically advance the response to elder abuse and neglect in California. In 2014, Archstone Foundation funded the National Elder Abuse Training Initiative to create a central online repository for existing curricula and training materials, with the goal of increasing the number of professionals and caregivers who receive high-quality training on elder abuse.

**End-of-Life Care**
Archstone Foundation provided funding beginning in 1988, to improve advance care planning; increase access to hospice care and services; educate and train professionals; and support direct services that improve quality of life and offer dignity to dying patients. The *End-of-Life Initiative* was launched to: improve the quality of care in hospitals and long-term care facilities through training and education in palliative care for health care professionals; increase the number and quality of palliative care services within hospitals in Southern California; and improve the quality of spiritual care within palliative care programs. In 2014, the Foundation funded the COMFORT Project to educate and train interdisciplinary professionals in end-of-life care communication, and the Palliative Care Quality Network to improve the quality of palliative care services provided to patients and their families through a continuous learning collaborative.
In the years to come, Archstone Foundation will continue its focus on grantmaking in four main priority areas:

**Aging in Community** – to enable older adults to remain in their homes and communities, with a focus on exploring innovations and models that promote quality of life and influence health;

**Depression in Late-Life** – to improve the quality of life for older adults suffering from depression through family and community collaborations;

**Family Caregiving** – to develop and implement innovative responses to the family caregiving needs of older adults; and

**Workforce Development** – to expand the workforce needed to care for and serve California’s rapidly growing aging population.

Responsive Grantmaking remains Archstone Foundation’s strategy to address the emerging and unmet needs of California’s diverse aging population, and those who serve them. It provides an important platform for the Foundation to offer direct service support, important local services, and to address
developing programmatic and policy-related issues. Responsive Grantmaking provides the Foundation the opportunity to incubate, contemplate, and raise awareness of important issues in the field of aging, while engaging partners who might also support these issues.

Although there is much work to be done to improve the lives of older adults and those who care for them, the future holds much promise for engaging new stakeholders, developing innovative approaches, and collaborating across disciplines to best serve older adults and their families.
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Aging in Community

The percentage of California’s older adult population is growing faster than the rest of the country, with individuals 65 and older making up nearly 4.1 million, or 11.2% of the total population. Not surprisingly, studies show that nearly nine of 10 older adults prefer to age at home, and in their communities.

Nearly 90% of people over age 65 want to remain in their homes and communities.

Archstone Foundation funded innovative models, programs, and services designed to enable older adults to age independently in their community. These include Villages, shared housing, Program of All-Inclusive Care for the Elderly (PACE), and other wrap-around programs that serve older adults. More recently, the Foundation expanded its Aging in Community support to include important domains such as nutrition, transportation, and health and wellness, all of which promote quality of life and influence health.

Archstone Foundation supported shared infrastructures that enable a wider adoption of evidence-based programs, foster sustainability of community agencies as they partner with health care and governmental organizations, and seek to
Second Harvest Food Bank of Orange County

Senior Garden Program provides access to fresh fruits and vegetables through a self-sustainable gardening program. It seeks to improve the well-being of older adults by encouraging light gardening activities that yield fresh produce. The program addresses hunger and poor nutrition among older adults residing in low-income housing in Orange County.

improve care quality, reduce costs, increase efficiency, and reinforce evidence-based policy decisions. The Foundation challenges these projects to improve social, health, and financial outcomes for underserved and those who could be better served.

Archstone Foundation supported diverse and low-income communities through projects that provide basic needs, including rental and utility assistance, clothing, food, transportation, and service coordination. The Foundation funded projects to educate Hispanic and South Asian elders, and their families, about resources that help access and pay for needed medical care. Funded projects also targeted a particularly vulnerable population – older adults who are socially isolated, monolingual, and frail, or at-risk for becoming frail.
Depression among older adults is a serious health problem, often leading to unnecessary suffering, impaired functioning, increased mortality, and excessive use of health care resources. It is estimated that 20% of older adults in the community, and as many as 50% of older adults in nursing homes experience depression.

One in five older adults suffer from depression – community and family-based programs can help.

Despite recent advances, older adults suffering with depression often do not seek or receive effective treatment. Older adults at particularly high risk for not receiving effective depression care include minorities, older men, and those with multiple medical conditions, less formal education, and/or lower socioeconomic status.

One of the most promising approaches to improving the reach and effectiveness of late-life depression care is through the systematic involvement of community-based organizations, family, and primary care clinics that work with older adults. Community-engaged
Care Partners Consultant Team assisted in crafting a funding strategy by conducting an environmental scan, a literature review, and key informant interviews. Two opportunities were identified, engaging family members and peers to improve depression outcomes in primary care, and developing stronger linkages between health clinics and community agencies.

Partnerships have the potential to improve: 1) access to care; 2) engagement in treatment; 3) patient care experience; and 4) quality of care for depressed older adults.

Through its Depression in Late-Life Initiative, the Foundation seeks to improve the quality of life for adults, 65 and older, suffering from depression. The Care Partners: Bridging Families, Clinics, and Communities to Advance Late-Life Depression Care project is a partnership with the University of Washington and the University of California, Davis that supports seven innovative approaches to treating depression in older adults through community and family engaged partnerships.
Family Caregiving

Caregiving is an issue that touches almost every life in America. The National Alliance for Caregiving estimates that nearly 44 million adults in the United States are providing personal assistance for family members with disabilities or other care needs. Of those, more than 34 million care for frail elders. Archstone Foundation has a long history of supporting family caregiving by funding policy and program development, respite services, and training programs.

_Over 34 million Americans provide regular care for an older family member._

Family caregivers deliver extensive, ongoing help with daily activities to chronically ill and disabled older adults. They perform critical health-related tasks such as managing medications and arranging and coordinating health care and long-term services and supports.

Older adults who would have been placed in a nursing home years ago are now cared for at home, primarily by family caregivers, or are discharged earlier from hospitals, and other health care facilities, to home.
IOM Consensus Study on Family Caregiving for Older Adults seeks to examine and propose solutions on how family caregivers can be: helped to perform their tasks; protected from stress, physical, and financial effects; and informed about vital resources. It is the Foundation’s hope the study will provide a roadmap to better support family caregivers.

Family caregivers are expected to perform complex, medically-related functions previously provided by nurses and other trained personnel.

Despite its central role in the health, home, and community care of older adults, family caregiving has not been effectively addressed in public and private sector initiatives to improve care. Likewise, family caregiving is often left out of new delivery systems for health care and long-term services and supports. Given projections of a future gap between the number of needed family caregivers, and the number of available family caregivers, it is critical to address difficult caregiving-related issues facing society.
In 2014, Latinos surpassed Caucasians as the largest ethnic group in California, and by 2020, nearly 45% of California’s 65-plus population will be a minority. Archstone Foundation is supporting education and training programs that prepare tomorrow’s workforce to meet the needs of California’s large and culturally diverse population of older adults.

*Over the next 17 years, one in five Americans will be age 65 or older.*

In an effort to recognize and meet these growing demands, Archstone Foundation supported learning collaboratives, professional development, and training projects on topics of elder abuse and neglect, end-of-life issues, housing, and the mental health needs for older adults. In addition, the Foundation funded training projects that benefit California’s ethnically and linguistically diverse aging population.

Meeting the workforce demands will require an expansion of those trained in health care and social service professions, direct service, program
Geriatric Home Visit Program trains students to conduct home visits for low-income and underserved older adults. Students learn about obstacles in accessing care; addressing falls and chronic diseases; and advantages of home visits. First and fourth-year medical students benefit from new curricula that fosters respectful and empowering care.

development, and family caregiving, among other areas. It will also require system-level thinking and cultivating leadership in these important areas.

Looking ahead, the Foundation will continue to explore opportunities to ensure that tomorrow’s workforce has the knowledge and skills required to meet the needs of California’s aging population. It will consider opportunities to develop leadership, to train providers within the Foundation’s priority areas, and to ensure cultural competence. It will also consider innovations that promote and advance careers in the field of aging.