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Sent: Tuesday, July 25, 2017 7:53 AM
To: Guilbert, Kellie
Cc: OLRResponses; Proto, Jennifer; Sen. McCrory, Douglas
Subject: Senior Center Laws in Other States



eResponse

Kellie -

On behalf of Sen. McCrory, you asked for examples of other states' laws regarding senior centers.

Like many states, Connecticut does not have statutes that specifically address senior centers. We attached a 2011 profile of Connecticut's senior centers conducted by the Connecticut Association of Senior Center Personnel. Additionally, below we provide examples of other states' senior center laws.

Alaska

The Alaska legislature found that there was a need for nonprofit corporations to establish multipurpose senior centers in certain areas of the state (AK ST §§ 47.60.010 and 47.60.020). The law defines a "multipurpose senior center" as a facility where people ages 60 and older are provided with services and activities suited to their particular needs, including health examinations; legal assistance; educational, recreational, and social programs; telephone reassurance programs; nutrition classes and low-cost meals; shut-in programs; and protective services (AK ST § 47.60.030).

Under the law, nonprofit corporations operating such multipurpose senior centers may operate in more than one municipality, issue bonds or other obligations to develop and operate the centers, and perform other necessary functions (AK ST § 47.60.040). Additionally, the law permits the state's Department of Health and Social Services to lease property to a nonprofit corporation to develop and operate senior centers (AK ST § 47.60.060).

Florida

Florida law defines a "multiservice senior center" as a community facility that organizes and provides a range of services for independent seniors, including nutritional meals; health, mental health social wellness, respite care, and education services; and recreational activities. Additionally, it provides opportunities to enable participants to stay connected to their communities and support networks, and offers activities and services that may divert seniors from more extensive in-home services and help prevent or delay institutionalization (F.S.A. § 430.901).

Under the law, a senior center (1) provides services to functionally impaired seniors, if practicable and (2) if feasible, is centrally located and easily accessible to public transportation. A center must be easily accessible to seniors with varying levels of physical abilities. The law encourages senior centers to obtain

national accreditation from the National Institute of Senior Centers. It also encourages senior centers to have a functioning automated external defibrillator on the premises at all times. If the center has such a device, it must ensure that the center's personnel are trained in how to use it (F.S.A. § 430.901).

Maryland

Maryland law defines a "senior citizen activities center" as a community or neighborhood facility that organizes and provides a broad spectrum of services to seniors and their spouses, including health, social, nutritional, educational, and recreational services (MD Code, Human Services, § 10-513).

State regulations require all senior centers that receive state grants to operate at least six hours per day. The regulations distinguish between urban and rural senior centers. The former serves a population of at least 10,000 seniors and is required to operate at least 250 days per year. The latter serves a population of at least 2,000 seniors and must operate at least 150 days per year. Additionally, the regulations prohibit a proposed senior center from being located within three miles of an existing center, unless the centers are under different local government jurisdiction (COMAR § 32.03.01.04).

Ohio

Ohio law requires senior centers to provide services to people ages 60 and older who reside in the area the center services, unless legal funding requirements specify other age limits. Senior centers may encourage service recipients to make voluntary contributions, but cannot refuse to provide services to people unable to make such a contribution.

By law, services provided within senior centers may include:

1. preventive medical services, diagnostic and treatment services, emergency health services, and health counseling, which must be provided on a regular basis by a licensed physician, registered nurse, or other qualified health professional;
2. a program to locate full- or part-time employment opportunities;
3. information and counseling by professional or other specially trained or qualified people to enable seniors to make decisions on personal matters, such as income, health, housing, transportation, and social relationships;
4. a list of available community services for seniors to help them identify needed services, connect them to appropriate services, and determine whether services have been received and identified needs met;
5. legal advice and assistance by an attorney or a supervised legal assistant; and
6. recreation, social, and educational activities.

Services provided outside the facility may include:

1. in-home, routine health services provided by licensed physicians, registered nurses, or other qualified health service personnel;

2. household services, such as laundry, meal preparation, light housekeeping, personal and grocery shopping, check cashing and bill paying, friendly visiting, minor household repairs, and yard chores that are necessary to help functionally impaired seniors meet the normal demands of daily living;
3. home meal delivery; and
4. transportation services.

If resources are available, senior centers may provide other social and recreational services within or outside the facility (O.R.C. § 173.12).

The law permits the state's Department of Aging or senior center operator to contract for any of the above listed services. The aging department must provide necessary personal liability insurance coverage for all senior center volunteers when they are acting within the scope of their volunteer assignments (O.R.C. § 173.12).

Background on Senior Centers

According to the National Council on Aging (NCOA), there are approximately 11,400 senior centers nationwide that serve more than one million seniors daily. Senior centers are local facilities that are often designated as the focal point for delivering aging services in a community. They provide a range of information, activities, and services, such as meal and nutrition services; health, fitness, and wellness programs; transportation services; employment assistance; and social and recreational activities.

Senior centers are funded through a variety of sources, including federal, state, and local government funds; public and private grants; donations; and participant contributions. Many centers use federal Older Americans Act (OAA) funding to administer certain services to adults ages 60 and older, such as congregate meals, transportation, information and referral, health promotion, employment training, and caregiver support services. OAA Title III-B funds are also available to public and nonprofit service providers to establish new multipurpose senior centers and fund existing centers. A state's aging disability resource center (in Connecticut, the State Department on Aging) and area agencies on aging determine how OAA funds are administered locally.

I hope this information is helpful. Please let us know if you have any questions or need additional information.

Best,

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