

| Community Supports & Health Services Domain | | | SMART Actions include: | | | | | | | |
|---|---|---|--|--|---|---|---|-------------|--|---|
| 1. | Care & services are accessible. | | | | | | | | | |
| 2. | A wide range of community & health services are available. | | | Specific: tangible next steps | | | | | | |
| 3. | There is a robust workforce & volunteer support. | | | Measurable: how will we determine success? | | | | | | |
| 4. | People are supported where they live. | | | Attainable: partners and/or resources required or available | | | | | | |
| 5. | Residential facilities are available for those unable to live at home. | | | Relevant: addresses a gap | | | | | | |
| 6. | Health & social services collaborate. | | | Time Bound: timeline; ensure both short and long time recommendations | | | | | | |
| 7. | Ensure efficient use of public resources, through active collaboration. | | | Short (6-12 months), Medium (1-2 years), Long 3+ years | | | | | | |
| Goal | Recommendation | Original Action | Edited Action | S | M | A | R | T | Project Type | Notes |
| 1 | A. Identify and develop recommendations that address discrimination experienced by residents within the emergency room and medical services. | Ableism and disability training for health care providers and caregivers. | Evaluate and expand ableism and disability training for 3-5 health care and caregiver organizations. | ✓ | | | ✓ | medium | Training | Status: training exists; Potential Partners: DAAS, MOD, SDA, FCA, TBD; Questions: what is a measurable outcome? What would sustainability look like? |
| | B. Develop an outreach campaign that focuses on increasing community awareness regarding key services, access to services, or information points. | | Develop a DAAS outreach campaign focused on services and information available for older adults and people with disabilities in San Francisco. | ✓ | ✓ | ✓ | | medium | Outreach & Marketing | Status: new; Potential Partners: DAAS |
| | C. Train first responders and urgent care clinicians to be dementia capable and implement dementia friendly practices. | | Develop & share training with 3-5 first responders and/or urgent care clinicians within first year. | ✓ | ✓ | ✓ | ✓ | medium-long | training | Status: framework exists, current funding to expand does not Potential Partners: DAAS, Alzheimer's Association, Optimizing Aging Collaborative, Dementia Workgroup, others? Next Steps: there was a pilot that did this 2010-2013, including curriculum & lessons learned exist. |
| 2 | C. Prioritize addressing the needs of unique populations. | Prioritize, develop, and support programs that prevent isolation for caregivers and people with dementia. | (1) Create a service map of existing services aimed at preventing isolation for caregivers and people with dementia; (2) identify any existing gaps, and (3) develop an advocacy strategy to meet remaining needs. | ✓ | | ✓ | ✓ | TBD | outreach; advocacy | Status: new; Potential Partners: Dementia workgroup; DAAS; Next Steps: task can be broken down into three parts/phases; focus on step 1 first. |
| | | Ensure that needs of younger adults with disabilities are addressed and considered, such as offering access points that are not housed within senior centers. | Identify unmet service needs of adults with disabilities and develop targeted programs to those meet needs. | ✓ | | ✓ | ✓ | TBD | Needs assessment; programs or services | Status: potentially new and expanding existing; Potential Partners: DAAS, Rec & Park, Tech Council, MOD, others? Next Steps: assess results of Dignity Fund Community Needs Assessment to identify unmet need |

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| 3 | A. Expand services and support for caregivers, to ensure that seniors and adults with disabilities are able to live as independently as long as possible. | Provide respite support and options for caregivers. | Identify unmet caregiver needs from 2018 Dignity Fund Community Needs Assessment and develop appropriate strategies to address. | ✓ | ✓ | ✓ | | Short | Needs assessment; programs or services | Status: in progress; Potential Partners: TBD; Next Steps: assess results of Dignity Fund Community Needs Assessment to identify unmet need |
| | | Implement a range of effective caregiver support strategies to better address the multiple needs of informal caregivers. | | | | | | | | |
| | | Strengthen the training and capacity of social service providers to recognize, engage, and provide family caregivers referrals to services within the community. | Develop and implement a whole person approach in social services. | | | | ✓ | long | Needs assessment; identify gaps; expand/develop services or programs | Status: New policy but builds off existing work and examples Potential Partners: DAAS, CBO's, TBD Next Steps: Action needs to be broken down to further steps to be manageable. |
| 4 | A. Ensure that there are community supports available for hospitalized persons transitioning home. Projects can include: | (1) Assessing and proposing specific support for people with cognitive impairment; (2) Ensuring that caregivers and family members that are supporting the patient and assisting with the care plan are included. | In order to assess existing and needed support for people with cognitive impairment, begin by convening hospitals to discuss transitional care support. | ✓ | | | ✓ | medium | Needs Assessment | Status: New and expansion of existing efforts; Potential Partners: DAAS, Dementia Workgroup, CBO's, TBD; Next Steps: convene hospitals to discuss transitional care support |
| 5 | A. Address the discrimination LGBT seniors face in residential care facilities. | Through trainings, incentives, and education. | Identify incentives and provide training and education to residential care facilities about being inclusive and supportive of LGBT residents. | ✓ | ✓ | | ✓ | Short-medium | Outreach; education | Status: in progress; Potential Partners: DAAS, Ombudsman, TBD; Next Steps: develop handbook to educate and inform residential care facilities about the requirements under SB 219: Long-term care facilities: rights of residents |

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| 6 | A. Promote and support choice for end of life care. Actions may include: | Develop a resource directory, educational opportunities, and outreach strategies that focus on palliative care services. | Develop and disseminate a Palliative Care resource directory specifically for palliative care issues, services, and resources. | ✓ | ✓ | ✓ | ✓ | short-medium | Outreach | Status: in progress; Potential Partners: Palliative Care workgroup; Next Steps: determine directory format and ensuring ongoing sustainability of effort |
| | | Raise awareness for the need and support around end of life discussions through education, outreach, and events. | Identify and support community efforts to share resources and information on end of life discussions and planning. | ✓ | | ✓ | ✓ | short | Outreach | Status: in progress; Potential Partners: Palliative Care workgroup, IDEO, and the End of Life Collaborative; Next Steps: currently planning a spring event, (Re)Imagine |
| 7 | B. Support innovation and integration of senior center and community centers. | Develop and implement intergenerational programming similar to community center models. | Pilot innovative community service centers and activity models. | ✓ | ✓ | ✓ | ✓ | medium | Programs & services | Status: new, expands existing efforts; Potential Partners: senior centers, MOD, DAAS, TBD; Next Steps: assess results of Dignity Fund Community Needs Assessment |
| | | Inclusion of wellness and social programs for younger adults with disabilities. | Develop wellness and social programs specifically targeted to younger adults with disabilities. | ✓ | | | ✓ | | | Status: new, expands existing efforts; Potential Partners: senior centers, Rec & Park, CBO's, DAAS, TBD; Next Steps: assess results of Dignity Fund Community Needs Assessment to identify gaps |
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| Engagement & Inclusion | | | | | | | | | | |
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| SMART Actions include: | | | | | | | | | | |
| 1. Seniors & people with disabilities have opportunities for civic participation & volunteering. | | | | | | | | | | |
| 2. Public & private policies & programs are inclusive & accessible. | | | | | | | | | | |
| 3. Programs exist that reduce & address isolation. | | | | | | | | | | |
| 4. Efforts are made to integrate generations & cultures. | | | | | | | | | | |
| 5. Ableism & ageism are addressed through public & private efforts. | | | | | | | | | | |
| 6. Localized community networks that provide engagement & support for seniors, people with disabilities, & caregivers. | | | | | | | | | | |
| Short (6-12 months), Medium (1-2 years), Long 3+ years | | | | | | | | | | |
| Goal | Recommendation | Original Action | Edited Action | S | M | A | R | T | Project Type | Notes |
| 1 | A. Create and offer trainings that promote participation of seniors and people with disabilities on commissions, boards, and other existing civic participation opportunities. | Develop a focused effort specifically with regards to ensuring participation by people with disabilities on government related bodies and commissions. | Create trainings within 18 months of findings from joint commission. | ✓ | ✓ | ✓ | ✓ | Medium | Trainings | Status: Potential Partners: Dept. on the Status of Women; Human Rights Commission (may have good templates and how they've worked with other commissions) Next Steps: Training based on the results and findings of 2A, convening a joint commission. |
| | C. Create a disability center that is culturally inclusive and builds community among people with disabilities, as well as the greater community. | | Develop a plan for a disability center including: possible locations, services and programming, potential funding sources, and project champions. | ✓ | ✓ | ✓ | ✓ | Medium | Planning | Status: new; Potential Partners: DAAS, MOD, TBD; |
| | D. Assess and increase participation for people with disabilities to vote. | Identify and implement strategies that aim to increase voting among people with disabilities, which may include increasing capacity for mail-in ballots and assessing the accessibility of voting equipment and locations. | Identify gaps and implement strategies that aim to increase voting among people with disabilities. | | | ✓ | ✓ | TBD | Policy | Status: in progress; Potential Partners: VAAC, DAAS, MOD, TBD; Next Steps: work with VAAC with regards to identified gaps/barriers to voting |
| 2 | A. Advocate for policies that empower and offer opportunities for people with disabilities and seniors to engage within efforts that impact their lives and communities. | Educate, train, and support civic bodies or volunteer organizations that want to become more accessible and inclusive. | Request and convene a joint commission that will specifically focus on barriers and develop recommendations with regards to ensuring SF Commissions are accessible and inclusive. | ✓ | ✓ | | ✓ | Medium | policy | Status: new but similar models exist; Potential Partners: Dept. on Status of Women; Human Rights Commission; Dept. of Aging and Adult Services Commission; Mayors Office on Disability Commission; Next Steps: Use DOSW findings to determine which commissions have low numbers of people with disabilities. and/or older adults. |

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| 3 | A. Create and support programs that specifically target populations (also “different communities”) at risk of isolation. | Expand on the community services and programing for people with disabilities, especially younger adults. | Develop community services site or activities specifically for adults with disabilities under age 60. | ✓ | ✓ | ✓ | ✓ | medium | programs | Status: new and/or expand existing programs; Potential Partners: Rec & Park, MOD, DAAS |
| 4 | A. Increase opportunities for intergenerational interactions. | Support and incentivize opportunities for seniors and people with disabilities to engage with youth, possibly targeting the following areas or populations: Schools, after-school & youth programs; Community centers and focused classes or programs; and Collaborating with existing arts or music focused programs or organizations. | Pilot intergenerational programming | ✓ | | | ✓ | TBD | Programs | Status: New & expands existing efforts/programs; Potential Partners: DCYF, DAAS, SFPL, Rec & Park, MOD |
| | A. Increase public awareness of dementia through education and training for those experiencing memory loss, caregivers, service providers, and health care professionals. | Increase awareness of available services and resources. | Develop a resource guide, site or tool that will be available for a wide range of users. | ✓ | ✓ | | ✓ | TBD | Resource | Status: Potential Partners: Dementia Workgroup Questions: what format for the directory and how to ensure the ongoing sustainability of the effort. |
| 5 | B. Develop and implement an Age and Disability Friendly Business program, which may include: | Develop a recognition program that acknowledges age and disability friendly businesses and encourages continued participation. | Develop a recognition program that acknowledges age and disability friendly small businesses. | ✓ | ✓ | | ✓ | Medium | Outreach & ongoing effort | Status: new to SF but other existing models (in SF and other Age-Friendly efforts); Potential Partners: Dept. of Small Businesses, MOD, TBD; Next Steps: develop framework for what constitutes an age and disability friendly business |
| | C. Create a citywide campaign that highlights ableism and ageism. | A public marketing strategy that uses positive images and narrative to counter assumptions about seniors and people with disabilities. | | ✓ | ✓ | | ✓ | TBD | Outreach & marketing | Status: new, but existing models are available; Potential Partners: DAAS, Reframing Aging, MOD, various CBO's |

| Communication, Information & Technology | | | | | | | | | | |
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| SMART Actions include: | | | | | | | | | | |
| 1. Improve the availability of information through a variety of means. | | | | | | | | | | |
| 2. Ensure that information & data is available through open data sources & is available for planning & advocacy efforts. | | | | | | | | | | |
| 3. Prioritize programs & policies that allow for accessible & inclusive technology. | | | | | | | | | | |
| 4. Increase efforts that empower seniors & adults with disabilities to identify & avoid fraud. | | | | | | | | | | |
| Specific: tangible next steps | | | | | | | | | | |
| Measurable: how will we determine success? | | | | | | | | | | |
| Attainable: partners and/or resources required or available | | | | | | | | | | |
| Realistic/Relevant: addresses a gap | | | | | | | | | | |
| Time Bound: timeline; ensure both short and long time recommendations | | | | | | | | | | |
| Short (6-12 months), Medium (1-2 years), Long 3+ years | | | | | | | | | | |
| Goal | Recommendation | Original Action | Edited Action | S | M | A | R | T | Project Type | Notes |
| 1 | A. Increase information sharing and outreach, specifically focusing on existing services that are available for residents and their caregivers. | Assessing and improving the opportunities, coordination, and available information among San Francisco's various information hubs, such as: DAAS Intake, United Way's 211, the City's 311, SF Resource Connect, the SF Public Library, and others. | Improve coordination among San Francisco's information hubs by exploring formal collaboration and systems around information sharing. | ✓ | | ✓ | ✓ | med-long | policy; collaboration | Status: New, builds off existing resources; Potential Partners: DAAS Intake, United Way, 311, SF Resource Connect, SFPL, TBD Questions: develop measurable |
| | | Ensure that public and private information venues understand and implement accessibility best practices. | Develop and disseminate a "best practices" guide to accessibility in information sharing for both public and private agencies. | ✓ | ✓ | ✓ | ✓ | short | Policy; Resource | Status: new, aspects may currently exist Potential Partners: MOD Next Steps: identify what currently exists |
| | B. Efforts are made to ensure that City websites and other public information communication avenues are accessible and easy to use. | Coordinating, compiling and sharing accessibility best practices widely. | Develop and disseminate a "best practices" guide to accessibility in information sharing for both public and private agencies. | ✓ | | ✓ | ✓ | short | Resource | Status: new, aspects may currently exist Potential Partners: MOD, TBD; Next Steps: identify what currently exists |
| | A. Identify and increase opportunities that increase access to, and support for, frequent use of technology. | Provide accessible and affordable devices. | Identify opportunities to expand affordable internet access. Explore opportunities to provide low-cost/free equipment to low-income residents. | ✓ | ✓ | ✓ | ✓ | Medium - Long | Policy; Program | Status: in progress; Potential Partners: Tech Council; |

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| 3 | B. Identify and prioritize areas where communication-based technology (computers, cell phones, etc.) may improve the quality of life for seniors and people with disabilities | including the following possible areas: first responders and medical care; accessing transportation; frequently using government sites; banking, bill paying, and financial management; and searching for employment or community engagement opportunities. | Identify key areas where seniors and people with disabilities can utilize communication-based technology. | ✓ | | ✓ | ✓ | TBD | needs assessment; program development/expansion | Status: in progress; Potential Partners: Tech Council; Next Steps: first identifying available data re: seniors & people with disabilities (#2A), with the goal of identifying what types of activities people want to go online for. |
| | C. Increase digital literacy for seniors & people with disabilities | Offer abundant training programs that are culturally specific and tailored to participant needs | | ✓ | | ✓ | ✓ | Short | Programs | Status: expand existing Potential Partners: Tech Council, SF Connected and DAAS; Questions: identify possible measurable |
| | | Assessing the possibility of developing training and support for homebound seniors and adults with disabilities | Develop and evaluate technology at home program for seniors and adults with disabilities | ✓ | | ✓ | ✓ | medium | funding; program development | Status: assess recent pilot projects; Potential Partners: Tech Council, partner CBO's, DAAS Questions: |
| | | Ensuring that ongoing support is available, such as intermediary level courses or technical support. | Developing a tech support and repair program pilot including partners, needs, and funding. | ✓ | | ✓ | ✓ | medium | needs assessment; pilot program | Status: in progress; Potential Partners: Tech Council; Next Steps: group working on next steps |
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| Employment & Economic Security | | | | | | | | | | |
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| SMART Actions include: | | | | | | | | | | |
| 1. Ensuring employment policies & priorities exist to meet the needs of elders, people with disabilities, & caregivers. | | | | | | | | | | |
| 2. There are efforts to address ableism & ageism within the employment process. | | | | | | | | | | |
| 3. Prioritize efforts that support economic security for elders, people with disabilities, and caregivers. | | | | | | | | | | |
| Specific: tangible next steps | | | | | | | | | | |
| Measurable: how will we determine success? | | | | | | | | | | |
| Attainable: partners and/or resources required or available | | | | | | | | | | |
| Realistic/Relevant: addresses a gap | | | | | | | | | | |
| Time Bound: timeline; ensure both short and long time recommendations | | | | | | | | | | |
| Short (6-12 months), Medium (1-2 years), Long 3+ years | | | | | | | | | | |
| Goal | Recommendation | Original Action | Edited Action | S | M | A | R | T | Project Type | Notes |
| 1 | A. Support and develop individualized and diverse employment efforts. | Support and expand programs that capitalize on the skills and strengths of older adults and people with disabilities. | Promote and support employment programs for older adults and people with disabilities (city, non-profit, and for-profit). | ✓ | | ✓ | ✓ | | Outreach; programs | Status: expand existing programs and services; Potential Partners: SF IHSS-PA, Homebridge, DAAS, IHSS Task Force, OEWD Questions: how to measure success |
| | B. Recognizing the silo nature of employment and job training programs, identify areas for increased collaboration and partnership among organizations and departments. | Leverage existing efforts when considering expanding programs or services. | Advocate for existing job support programs to partner with senior- and disability-focused agencies to expand service population. Collaborate on strategies for supporting these populations to find meaningful employment. | ✓ | | ✓ | ✓ | med-long | programs, expand existing | Status: Potential Partners: DAAS, DHS, OEWD |
| 2 | A. Ableism and ageism are consistently highlighted as the greatest barrier to employment. Increased efforts must be made to address this discrimination, through all stages of the employment process. | Advocacy for a workforce that better represents the diversity of San Francisco's demographics, particularly with regards to people with disabilities and seniors. | | | | ✓ | ✓ | long | Needs assessment; workforce training (employers and employees) | Status: New Potential Partners: OEWD, DAAS, MOD, CBO's; Next Steps: need to break down task into manageable projects |

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| 3 | B. Encourage and support nonprofits that may be able to address economic security issues “up-stream”. | Identify and support financial fitness programs that are “more upstream” in supporting economic security. Examples can be educational programs or matched savings programs. | Identify programs and opportunities to support financial planning education and resources, particularly geared towards non-profit community partners. | ✓ | ✓ | | ✓ | medium | Needs Assessment; possibly outreach | Status: expand existing efforts; identify gaps; Potential Partners: TBD; Next Steps: evaluate existing financial "fitness" programs; identify any gaps in programs/services; develop an advocacy effort to address those gaps |
| | C. Assess the current demand for benefits counseling, particularly for people with disabilities and based on results, support that service appropriately. | | Evaluate/expand impact of DAAS Eligibility counseling that counsels Medi-Cal clients on most beneficial Medi-Cal program (e.g., working disabled program, opportunities to reduce share of cost, etc.). | ✓ | ✓ | ✓ | | medium | Outreach | Status: New; Potential Partners: DAAS Intake Next Steps: Evaluate after grant cycle ends |
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| Housing | | | | | | | | | | |
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| | | | | | | | | | | SMART Actions include: |
| 1. A range of affordable housing options is available for seniors & people with disabilities. | | | | | | | | | | |
| 2. There are policies & resources to support seniors & people with disabilities aging in place, within the community of their choice. | | | | | | | | | | Specific: tangible next steps |
| 3. Support is available for seniors & people with disabilities at risk or currently experiencing homelessness. | | | | | | | | | | Measurable: how will we determine success? |
| | | | | | | | | | | Attainable: partners and/or resources required or available |
| | | | | | | | | | | Relevant: addresses a gap |
| | | | | | | | | | | Time Bound: timeline; ensure both short and long time recommendations |
| | | | | | | | | | | Short (6-12 months), Medium (1-2 years), Long 3+ years |
| Goal | Recommendation | Original Action | Edited Action | S | M | A | R | T | Project Type | Notes |
| | B. Advocate for and support programs that ensure the preservation of existing affordable housing | Working with community partners, establish and share best practices on how community organizations, neighbors, and others can support proposed affordable housing developments, particularly those proposed for seniors and people with disabilities | Develop best practices and strategies to advocate and support proposed developments that benefit seniors, people with disabilities, and caregivers. | ✓ | | ✓ | ✓ | | Advocacy | Status: some existing efforts, New with regards to population focus Potential Partners: Housing Workgroup; Next Steps: identify current efforts or organizations, support existing efforts, and identify the gap that this group could specifically serve |
| | | Identify existing community input process on proposed developments and, working with local housing agencies and advocates, develop recommendations for seniors and people with disabilities to increase engagement. | | | | | | | | |
| | C. Identify the challenges faced by residential care facilities (RCFE's) and develop recommendations that will support and expand their capacity. | Research opportunities to increase residential care facilities (or bed numbers), such as connecting RCFE's to existing small business resources and sustainable business models. | Provide resources and support to existing residential care facilities that may help with sustainability, such as trainings and small business resources. | ✓ | ✓ | ✓ | ✓ | short-med | Training; Resources | Status: New Potential Partners: Office of Small Business, Housing Workgroup, 6 bed.org; |

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| 1 | D. Ensure that the housing needs of seniors, people with disabilities and their caregivers are recognized and prioritized. | Work with the Planning Department to develop best practices for building age & disability friendly housing. | | ✓ | ✓ | | | short | Policy; Resource | Status: New, models exist elsewhere; Potential Partners: AIA, DP |
| | | Ensure that the housing needs and priorities of seniors and people with disabilities are included in the Housing Element update, San Francisco's General Plan. | | ✓ | ✓ | ✓ | ✓ | long | policy | Status: New Potential Partners: Dept. of Planning; Next Steps: identify the time window to include language |
| | | Identify opportunities to create incentives for ensuring implementation standards of accessibility modifications and upgrade practices with older existing multifamily buildings | (1) Explore the barriers for implementing accessibility modifications within older existing multifamily buildings. (2) Explore possible opportunities to incentivize or minimize barriers for implementing accessibility modifications. | ✓ | ✓ | | | short - long | Policy; Program | Status: New; Potential Partners: TBD; Questions: What would the impact of this effort be (ie, how many units? Rental vs homeowners? Legal considerations? How would we determine success?) |
| | | Identify and actively engage in local housing policy efforts such as CASA | Identify and actively engage in local housing policy efforts. | | | ✓ | ✓ | short | Advocacy | Status: existing efforts; Potential Partners: Housing Workgroup; Next Steps: identify measurable outcomes and advocacy goals. |
| A. Expand policies and programs that support people to live independently and age in place. | Assess current home modifications programs, particularly identifying any gaps or opportunities to expand program capacity. | Assess current home modifications programs, identify any gaps or opportunities to expand program capacity and support outreach efforts. | ✓ | ✓ | ✓ | ✓ | medium | Needs assessment; program | Status: New, possibly expanding existing efforts; Potential Partners: Housing Workgroup, Rebuilding Together SF, Habitat for Humanity, DAAS, MOH; Next Steps: identifying the gaps in home modification services | |

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| 2 | B. Identifying and supporting efforts to increase the development of accessory dwelling units (ADU's). | Streamlining the accessory dwelling unit (ADU's) process to be more user friendly. | Identify barriers and challenges that seniors and people with disabilities face when considering ADU's and streamline the accessory dwelling unit (ADU's) process to be more user friendly. | ✓ | | ✓ | | short-medium | Policy | Status: supports existing efforts; Potential Partners: Dept of Planning, DAAS, Housing Workgroup; Questions: Do we know there's interest in developing ADU's? How will we measure success? |
| Assess the potential and develop recommendations around underutilized spaces in existing homes for new units (internal ADU's) | | | | | | | | | | |
| 3 | A. Connect seniors and people with disabilities at risk for homelessness to existing services and resources | Identify effective strategies to reach residents at risk, by engaging our partner organizations such as senior centers, adult day programs, and food pantry or delivery services. | | ✓ | | | ✓ | short | Outreach | Status: existing efforts; Potential Partners: CBO's, LTCCC, DSH; Questions: How could this action support existing efforts? How would we determine success? |
| | | Support programs that enable people to remain in their homes, such as in-home supportive services. | | | | ✓ | ✓ | | Advocacy | Status: Efforts exist; Potential Partners: LTCCC, IHSS Task Force, CBO's; Questions: What type of support, how would we define success, and recognition that this would involve advocacy at the State and Federal level. |

| Transportation | | SMART Actions include: | | | | | | | | | |
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| | 1. Ensure that public transportation is affordable, accessible & equitable for residents of all ages & abilities. | | | | | | | | | | |
| | 2. Residents have the information & tools they need to make informed travel choices. | | | | | | | | | | |
| | 3. Active transportation (bicycling and walking) is encourage and supported, through policies, design, and programs. | | | | | | | | | | |
| | 4. Private transportation policies or programs should ensure accessibility & equity. | | | | | | | | | | |
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| Goal | Recommendation | Original Action | Edited Action | S | M | A | R | T | Project Type | Notes | |
| 1 | A. Support efforts to improve the accessibility and safety of public transit. | Provide redundant elevators in all Muni Metro underground stations, or more than one elevator in each station, for every possible elevator trip (such as the platform, mezzanine, and sidewalk elevators). | Support efforts to provide redundant elevators in all MUNI and BART underground stations. | ✓ | ✓ | ✓ | ✓ | TBD | infrastructure | Status: in progress; Potential Partners: MTA, BART; Next Steps: Identify any barriers and develop a timeline when all SF elevators will be redundant. | |
| | B. Incorporate accessibility treatments during the design process and prioritize when providing all street or transit improvements. | Continue to improve and implement the City's Guidelines for Accessible Building Blocks for Bicycle Facilities document which provides guidelines for separated bikeways to improve connectivity and safety, while also ensuring that the public realm is accessible for people with disabilities. | continue to improve and implement the City's Guidelines for Accessible Building Blocks for Bicycle Facilities document. | ✓ | ✓ | ✓ | ✓ | medium | Policy; infrastructure | Status: in process Potential Partners: MTA, MOD, VZ Pedestrian workgroup Next Steps: hosting a design charrette to ensure that bike lane designs are accessible and safe for all abilities. | |
| | | Assess the feasibility of a system wide policy or approach that identifies "best practices for intersections" that engages both the experiences of residents as well as transportation needs in prioritizing intersection safety treatments. | Identify and develop a best practices guide for intersections. | Identify and develop a best practices guide for intersections. | ✓ | ✓ | | ✓ | long | Policy; infrastructure | Status: New Potential Partners: TBD Next Steps: would need to assess feasibility with MTA's Livable Streets department, identify other potential partners |
| | | New design concepts, services, policies, and infrastructure should include an assessment of impact on current services, particularly for people with disabilities and seniors. | Develop a metric for bus stop removal that takes into account the needs and impact of seniors and people with disabilities when proposing bus stop changes. | Develop a metric for bus stop removal that takes into account the needs and impact of seniors and people with disabilities when proposing bus stop changes. | ✓ | ✓ | ✓ | ✓ | TBD | Policy; infrastructure | Status: in progress; Potential Partners: SDA, MTA, Next Steps: identify ways to support existing effort |

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| 2 | A. Prioritize effective communication and updates with regards to system changes, delays, and proposals | Ensure that when elevators/escalators are out of service: that a shuttle service is provided, that information is up to date and shared widely, and that the next closest station is operating, offering an alternate option for those who need it. | Assess current protocol for when elevators/escalators are out of order and ensure that supplemental services are adequate and accessible. | ✓ | | | ✓ | medium | Policy | Status: TBD; Potential Partners: TBD; Next Steps: identify existing protocols and existing efforts to address; based on that, recommend solutions or policies that address the gaps |
| | B. Transportation info should be available in a variety of accessible ways | Utilizing and building capacity with existing transportation tools such as the Next Bus application, Paratransit at the DAAS Benefits and Resource Hub, and existing travel training programs. Opportunities that raise awareness among users about the range of transportation options that are available. | Support MTA's Mobility Management efforts, including collaborating on innovative approaches to increase outreach and utilization of existing transportation tools, services and resources. Develop a user friendly directory for all transit options. | ✓ | ✓ | ✓ | ✓ | Short-Med | Outreach; programs and services | Status: New, in progress; Potential Partners: MTA, DAAS, MOD, TBD Next Steps: Identify innovative and collaborative outreach opportunities. |
| 3 | A. Pedestrians are prioritized through policies and improvements that focus on street calming measures and address critical safety issues. | Increase crosswalk time at key intersections, including high-injury corners, within specific distance of senior and accessible housing, day programs, and senior centers. | Assess feasibility of increasing crosswalk time at key intersections. | ✓ | ✓ | ✓ | ✓ | medium | Research; policy | Status: in progress Potential Partners: SDA, VZ Pedestrian workgroup, DPH Next Steps: |
| | | Support and collaborate with the City's Vision Zero effort. | | ✓ | | ✓ | ✓ | ongoing | Policy | Status: in progress; Potential Partners: Vision Zero team and associated workgroups; Questions: |
| 4 | B. Address the impact of transportation network companies (TNC's) on seniors & people with disabilities through policy or practice. | | Explore new opportunities and support existing efforts to increase accessible transportation with regards to TNC's. | | | ✓ | ✓ | long | Policy | Status: New, although various depts./orgs are intereted in this topic; Potential Partners: TBD Next Steps: identify existing efforts |
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| Resiliency & Emergency Preparedness | | SMART Actions include: | | | | | | | | |
|--|--|---|---|---|---|---|---|--------------|---------------------------|---|
| 1. Individuals, families & caregivers have the support & training to prepare for disasters. | | | | | | | | | | |
| 2. Resiliency efforts at the community level are supported & include seniors & people with disabilities. | | Specific: tangible next steps | | | | | | | | |
| 3. Emergency response efforts include the unique needs of seniors & people with disabilities. | | Measurable: how will we determine success? | | | | | | | | |
| | | Attainable: partners and/or resources required or available | | | | | | | | |
| | | Relevant: addresses a gap | | | | | | | | |
| | | Time Bound: timeline; ensure both short and long time recommendations | | | | | | | | |
| | | Short (6-12 months), Medium (1-2 years), Long 3+ years | | | | | | | | |
| Goal | Recommendation | Original Action | Edited Action | S | M | A | R | T | Project Type | Notes |
| 1 | A. Ensure that there is support and training to geared towards seniors, people with disabilities, and their caregivers are prepared. | Develop a multi-lingual, fear-free public awareness campaign that highlights existing resources (including various alerts) and how residents can best be prepared and/or respond in the case of an emergency. | Develop a proposal for a collaborative and focused public awareness campaign. | ✓ | | ✓ | ✓ | Short-Medium | Public Awareness Campaign | Status: models exist, could expand on existing preparedness campaigns; Potential Partners: DPH, DEM, HSA, NEN Next Steps: identify model campaigns (such as LA's "Know your Neighbor") or focus areas that impact most San Franciscan's (such as heat or earthquakes). |
| | | Identify opportunities to reach vulnerable residents that are not connected to social service networks. | Assess how to best reach vulnerable residents that are not connected to social service networks. | | | ✓ | ✓ | tba | Outreach | Status: In Progress Potential Partners: DEM Access & Functional Needs Workgroup |
| | | Ensuring that residents are registered with AlertSF (San Francisco's citywide communication system). | Develop outreach campaign to encourage registration with AlertSF. Provide outreach through CBO partners to encourage registration with AlertSF. | | | | | | | |

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| 2 | A. Support and expand existing community-based approaches recognized to effectively mitigate the impact of disasters and emergencies. | Partnering with efforts that work closely with isolated and/or vulnerable populations. | Support and partner with community and neighborhood based preparedness organizations, focusing on target population. | ✓ | | ✓ | ✓ | short-long | Collaboration | Status: Potential Partners: NEN, NERT, Community Living Campaign Next Steps: Identify measurables |
| | | Support and partner with: Neighborhood Emergency Response Team and the Neighborhood Empowerment Network. | | | | | | | | |
| | C. Ensure that institutional facilities and in-home caregivers are prepared to support seniors and people with disabilities in the case of a disaster or emergency. | Training of homecare agencies and homecare providers: How home health care providers can be personally prepared for a disaster; and How caregivers can support their clients in disaster preparedness, such as helping clients create disaster plans. This could include backup plans for transportation, health maintenance, and information related to evacuation and access to shelters in case their home health care provider cannot reach them in an emergency. | Explore ways to ensure that residential care facilities are prepared for disasters, that plans are up-to-date and that staff are trained. | ✓ | | | ✓ | medium-long | Policy | Status: New Potential Partners: DPH, Ombudsman, DAAS, TBD; Next Steps: identify licensing requirements, existing efforts, and therefore the potential gaps. |
| 3 | A. Implement policies and procedures that account for and are prepared to respond promptly to seniors and people with disabilities, prioritizing those who require additional support or are unable to shelter in place for 72 hours. | | Develop a plan for sheltering people who have medical needs. | ✓ | ✓ | ✓ | ✓ | short-medium | Policy; infrastructure | Status: in progress; Potential Partners: DPH, HSA |
| | | Ensure that there is a strategy in place for evacuating people with mobility challenges in multi-story buildings. | | ✓ | ✓ | ✓ | ✓ | | Policy; infrastructure | Status: New; Potential Partners: DEM workgroup, HSA, DPH, MOD Next Steps: identify existing efforts, either locally or with other cities |
| | | Ensure that first responders are trained to identify and support seniors and people with disabilities in a disaster, such as people with cognitive impairment. | Ensure that first responders are trained to identify and support seniors and people with disabilities when transporting to shelters and/or cooling centers. | ✓ | ✓ | ✓ | ✓ | | Training | Status: New; Potential Partners: DPH, DEM, HSA, Next Steps: identify existing training |

| Outdoor Spaces & Buildings | | | | | | | | | | |
|---|--|--|---|---|---|---|---|--------------|-------------------------------------|--|
| SMART Actions include: | | | | | | | | | | |
| 1. A diversity of accessible & clean outdoor public spaces. | | | | | | | | | | |
| 2. Buildings, both public & private, should be accessible & inclusive. | | | | | | | | | | |
| 3. Public right of ways, such as sidewalks, should be accessible & inclusive. | | | | | | | | | | |
| Specific: tangible next steps | | | | | | | | | | |
| Measurable: how will we determine success? | | | | | | | | | | |
| Attainable: partners and/or resources required or available | | | | | | | | | | |
| Relevant: addresses a gap | | | | | | | | | | |
| Time Bound: timeline; ensure both short and long time recommendations | | | | | | | | | | |
| Short (6-12 months), Medium (1-2 years), Long 3+ years | | | | | | | | | | |
| Goal | Recommendation | Original Action | Edited Action | S | M | A | R | T | Project Type | Notes |
| 1 | A. Assess and identify opportunities to increase access for underserved populations to green space. | Identify and establish aging and disability friendly park best practices as a policy initiative for developing and maintaining public parks. | | ✓ | ✓ | | ✓ | medium-long | Policy | Status: new for SF Potential Partners: DAAS, MOD, Rec & Park; Next Steps: Develop age and disability friendly park best practices |
| | B. Supporting and expanding age and disability friendly programming and events within existing public spaces. | Expanding sports and exercise opportunities for people with disabilities | (1) Increase awareness and outreach for existing programs and opportunities for people with disabilities. (2) Ensure there are adequate activity opportunities and capacity for people with different disabilities. | ✓ | ✓ | | ✓ | Short-medium | Needs assessment; program | Status: existing programs; Potential Partners: Rec & Park, DAAS, TBD; Next Steps: collaborate on outreach and identify gaps in existing programs. |
| | | Supporting and expanding Rec & Park programs for young adults with developmental disabilities | | | | | | | | |
| Ensure best practices exist that are supportive of people with cognitive impairment and caregivers. | | | | | | | | | | |
| 2 | B. Work with local interfaith organizations and private clubs to develop a strategy for these buildings to implement ADA accessibility improvements. | Prioritize facilities that are also used as neighborhood emergency locations. | | ✓ | ✓ | | ✓ | medium | outreach; resources; infrastructure | Status: New; Potential Partners: DEM Workgroup, NEN, MOD; |
| 3 | A. Identifying, developing and advocating for best practices to ensure that sidewalks are age and disability friendly. | Prioritize improving park connections by focus on paths of travel between parks, transit, and neighborhoods. | | | ✓ | ✓ | ✓ | short-long | Policy; infrastructure | Status: New, grassroots interest exists; Potential Partners: Parks, Rec, and Open Space Advisory Committee; |
| | | Sidewalks should be smooth, include accessible design (such as curb cuts), and be free of tripping hazards. | Install curb cuts in all major intersections. | | | | ✓ | ongoing | infrastructure | Status: in progress; Potential Partners: DPW Next Steps: program currently addresses this, identify what type of support this group/effort could contribute |