2024 Older Adult Community Transportation RFP

	Theory of Change Term	Definition & Action
Population Accountability	Population HSD Population Priority Population	All people aged 60+ living in King County, with special focus on the populations defined by the Older Americans Act: • Residing in rural areas; • With greatest economic need; • With greatest social need; • With severe disabilities; • With limited English proficiency; • With Alzheimer's disease and related disorders; • At risk for institutional placement.
	Desired Result	Promote Healthy Aging: • All older adults experience stable health and are able to age in place. • All older adults are able to get to and from destinations to meet their basic needs.
	Indicators HSD Indicators Additional Indicators	• % of older adults (65+) reporting excellent or good health. • % of older adults (60+) experiencing chronic health conditions. • % of older adults (60+) experiencing poverty.

Racial Equity Population Accountability		
	Racial Disparity Indicator Data	Percent of *older* adults (65+) reporting excellent or good health in King County[1]: • 55% of American Indian/Alaska Native People^. • 81% of Asian People. • 65% of Black/African American People. • 78% of Hispanic/Latinx People. • *Percent of Native Hawaiian/Pacific Islander People is unknown^^.* • 70% of People who identify as Two or More Races. • 82% White People. Percent of *older* adults (60+) experiencing chronic health conditions in King County[2]: • 83% of American Indian/Alaska Native People^. • 50% of Asian People. • 76% of Black/African American People. • 72% of Hispanic/Latinx People. • 37% of Native Hawaiian/Pacific Islander People^. • 76% of People who identify as Two or More Races. • 64% White People. Percent of *older* adults (60+) experiencing poverty in King County[3]: • 44% of American Indian/Alaska Native People. • 24% of Asian People. • 33% of Black/African American People. • 26% of Hispanic/Latinx People. • *Percent of Native Hawaiian/Pacific Islander People is unknown^^.* • 29% of People who identify as Two or More Races. • 16% White People.
	Focus Population	American Indian/Alaska Native, Black/African American, and Hispanic/Latinx People.

[1] Data produced by Public Health — Seattle & King County, Assessment, Policy Development & Evaluation, 6/30/2023. Original data source: Behavioral Health Risk Factor Surveillance System (BRFSS) (average: 2017-2021).
^ Interpret data with caution: sample size is very small, so data is imprecise.
^^ Data is suppressed due to small sample size and to protect confidentiality.
[2] Data produced by Public Health — Seattle & King County, Assessment, Policy Development & Evaluation. Original data source: Behavioral Health Risk Factor Surveillance System (BRFSS) (average: 2016-2020).
^ Interpret data with caution: sample size is very small, so data is imprecise.
[3] U.S. Census Bureau American Community Survey (ACS), Public Use Microdata Sample, "Income < 200% of Federal Poverty Level, King County (average: 2017-2021)". Produced by: Public Health - Seattle & King County, APDE, 5/31/2023.
^^ Data is suppressed due to small sample size and to protect confidentiality.

	Population-Level Racial Equity Goal(s)	• % of older (65+) American Indian/Alaska Native, Black/African American, or Hispanic/Latinx adults reporting excellent or good health. • % of older (60+) American Indian/Alaska Native, Black/African American, or Hispanic/Latinx adults experiencing chronic health conditions. • % of older (60+) American Indian/Alaska Native, Black/African American, or Hispanic/Latinx adults experiencing poverty.
Program Accountability	Strategies	Ensure focus populations can access transportation to meet their health needs, including medical appointments and food and nutrition programs, by addressing gaps left by other public transit options, which might include the need for more specialized mobility access, off-peak hour rides, and destinations not robustly served.
	Performance Measure	Quantity: • # of unduplicated clients served (collected in GetCare). • # of one-way rides provided (collected in GetCare). Quality: • % of clients indicating satisfaction with the service (collected via survey). • Demographics of clients to ensure focus populations are being served (collected in GetCare). Impact: • # and % of clients with improved access to health services and/or healthy food as a result of the service (collected in GetCare and via a survey).
	Racial Equity Performance Measures	Quantity: • # of unduplicated focus population clients served (collected in GetCare). • # of one-way rides provided to focus population clients (collected in GetCare). Quality: • % of focus population clients indicate satisfaction with the service (collected via survey). • Agency's level of effort to reach out to older adults in the focus population and create culturally inclusive, language-accessible programming (collected via monitoring process through conversations between ADS and contracted agencies). Impact: • # and % of focus population clients with improved access to health services and/or healthy food resulting from the service (collected in GetCare and via survey).