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Providing Election Services to People in Residential Care Facilities in California: Case Studies and a Pilot Project

Karin Mac Donald & Arshia Singh

(with assistance from Holly Chow, Maria Salamanca, Hannah Nichols,
Lauren Morowit and Bonnie Glaser)

Election Administration Research Center, University of California, Berkeley

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The Information Technology and Innovation Foundation
1101 K Street NW, Suite 610
Washington, DC 20005
(202) 449-1351

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Executive Summary

This paper details and summarizes a two part study conducted in California in 2013. The first part examines the access that people living in residential care facilities in six counties have to the electoral system. The second part describes an outreach program to residential care facilities that is in place in one county, and assesses the implementation of modified versions of that program by Local Election Officials in two other counties.

The data for part 1 of the study were collected through phone interviews with Election officials and a telephone survey with facility staff. We found that the Elections Departments for the most part do not conduct outreach to residential care facilities. Once the issue was raised in the interviews, however, some of the Elections staff became interested in providing such outreach. It seemed that generally speaking, people in these facilities are not on Election Departments' radar.

Making contact with the appropriate staff in the facilities turned out to be an amazing challenge. Once we did, we found evidence of gate-keeping by facility staff, and summary judgments being made about residents' ability to participate in the electoral system. Facilitating access to the election system is not a priority for facility staff, and of those that expressed interest in the topic at all, most stated that the best suited organization to provide assistance to their clients would be the Elections Department.

The research for part 2 of the study began with in-person interviews of the Election administrators in three counties, two of which were implementing the outreach program of the third. Facility interviews were conducted by phone in all three counties. Then, observations and participant observations of the facility visits were conducted. Both implementing counties hired temporary workers to assist with this project and this proved to be the first challenge due to the rather specific qualifications necessary to provide election services to potentially vulnerable populations.

The two county teams had different experiences due to the different types of facilities they visited. Both teams encountered challenging situations and had to adapt quickly to their environments. Facilities were often not prepared for the visits, residents were unavailable for various reasons, there were numerous questions about eligibility and at what point a resident should not vote anymore. Frequently, documents necessary for registration were unavailable, residents were unclear about whether they were registered already and if so, where, and many found it challenging to focus on the task at hand. Timely mail delivery to residents appears to be a persistent problem, whether mail arrives at the facility or their previous residence when a family member brings it. Many residents were unable to read the small print on the registration form or fill them out by hand. There is need for unbiased and timely access to election information.

Overall, the provision of outreach to residential care facilities is a much needed service that is best implemented by developing the necessary tools for Elections Departments to make access feasible without creating too high of a burden that carries too much expense.

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Introduction

The following report is based on a research project that collected data between February and December of 2013. The goal was to examine methods for assisting persons living in residential facilities, especially those with cognitive disabilities and in long-term care, in the voting process so that they have every opportunity to register and cast a ballot. In the explosion of election reform research since the Florida debacle in 2000, voters in residential facilities, especially nursing homes, have received relatively little attention and most of the research has occurred in the eastern part of the US.

This project began to study this problem in California's unique decentralized election administration system, by gathering information about voting by persons in group living facilities in 6 counties of different sizes. This component of the study is described in Part I of this paper. Part II describes the implementation of an outreach program to this voting population that is in place in one county, by two other counties. We conclude with qualitative case study evaluations of the outreach programs in those three counties.

Background and literature review

The Accessible Voting Technology Initiative (AVTI) has reviewed current challenges to voting by persons with various types of disabilities, broadly categorized as sensory, motor, and cognitive impairments,¹ examined through research and workshops currently available assistive technologies to overcome these challenges, and appealed to the public for innovative solutions to voting accessibility through the OpenIDEO Challenge. Most recently the AVTI has produced reports on increasing voting accessibility for injured veterans. This work has shown the importance of process and administrative changes alongside technology advances. Most of the

¹ McGrew, G. (2012). Assistive technology for the voting process. Washington, DC: Information Technology & Voting Foundation.

11 winners of the OpenIDEO challenge incorporate some form of process solution into a technology solution, such as coordinating existing community volunteers or improving polling place flow of traffic and feedback mechanisms.

The AVTI recommends administrative practices, such as supervised voting in nursing homes, along with technological assistance for injured veterans. For voters with cognitive disabilities in long-term care (LTC) or some type of residential care, process solutions are imperative, as there is a limit to the extent that technological devices can in isolation improve accessibility to voting for this vulnerable population. In particular, this population requires appropriate assistance from other human beings as well as access to assistive technologies.

The logical providers of assistance are local election officials (LEOs); however LEOs nationwide face numerous obstacles in making voting procedures fair, accessible, and accurate for the general voting public. Making voting accessible to citizens in residential facilities is only one of many challenges LEOs face. LEOs as well as the general public should be concerned with two key aspects of voting by Americans living in institutional settings: 1) ensuring that persons in residential facilities who have cognitive impairments but retain the ability to vote are not deemed unable to vote by facility staff, family, or other involved parties and 2) preventing political organizations from taking advantage of this group's opportunity to vote.

Early research

After the 2000 Florida voting controversy highlighted election administration problems in the US, Dr. Jason Karlawish, Richard Bonnie, Charles Sabatino and others began to examine the ethical, legal and social issues raised by voting by persons with dementia.² These scholars found that the current election system fails to promote voting by persons who live in LTC facilities,

² Karlawish J.H., Bonnie R.J., Appelbaum P.S., Lyketsos C., James B., Knopman D., Patusky C., Kane R.A, and Karlan R.S. (2004) Addressing the ethical, legal, and social issues raised by voting by persons with dementia. JAMA Vol. 292(11). pp.1345-50.

most of whom have both cognitive and physical impairments. The American Bar Association (ABA) Commission on Law and Aging conducted a state-by-state review of policies for voting in LTC settings and found that while twenty-three states mandate some absentee balloting outreach to nursing home residents, most states do not have adequate guidance on voting in LTC facilities.³

To better understand the nature and extent of voting challenges faced by residents of LTC, Dr. Karlawish and colleagues performed an empirical study of voting in LTC facilities in the City of Philadelphia's 2003 election.⁴ Bonnie and colleagues conducted a similar study in Virginia in 2007.⁵ Both studies found a) substantial variation in procedures used for registration and voting, b) procedural problems often prevented voting by residents who wanted to vote c) facility staff assessed residents' voting capacity with a variety of methods and in some cases may have prevented voting by residents who were actually competent to vote.

A working symposium called *Facilitating Voting As People Age: Implications of Cognitive Impairment* was held in March 2007.⁶ The symposium, involving national experts in law and aging, medicine, LTC, voting technology, and election administration, culminated with the adoption of seven multi-part recommendations intended to protect voting rights of people with legal capacity and provide necessary assistance in voting, while protecting the integrity of the voting process. Symposium participants concluded that more research was necessary to improve access to the polls by persons with cognitive or other brain disabilities and to expand the impact

³ Smith, A. and C. Sabatino. (2004). "Voting by Residents of Nursing Homes and Assisted Living Facilities: State Law Accommodations". Washington, D.C.: American Bar Association Commission on Law and Aging.

⁴ Karlawish J.H., Bonnie R.J., Appelbaum P.S., Lyketsos C, Karlan P., James B.D., Sabatino C., Lawrence T., Knopman D., and Kane R., Identifying the Barriers and Challenges to Voting by Residents in Nursing Homes and Assisted Living Settings, 20 J. AGING & SOC. POL'Y 65 (2008)

⁵ Richard J. Bonnie, Paul Freedman, and Thomas M. Guterbock. Election Law Journal: Rules, Politics, and Policy. September 2013, 12(3): 293-304. doi:10.1089/elj.2012.0187.

⁶ [Facilitating Voting As People Age: Implications of Cognitive Impairment](#)

of the symposium recommendations. The symposium recommended further research on ‘voting practices in long-term care facilities and other residential settings’ and urged election jurisdictions to implement ‘mobile polling’ for LTC recipients.

Why California?

At the end of 2004, approximately 6% of LTC residents in the US lived in California. California is important to studies of election administration because of its decentralized structure. The 58 California counties have a considerable degree of autonomy in shaping and operating their voting process, such as choosing voting equipment, locating and designing polling places, and training poll workers. Therefore, the voting process for those in institutional settings is likely conducted in 58 different ways. An exploration of these processes can reveal practices of great failure, great success, and many in-between.

Mobile Polling & California

Out of early research, the idea emerged that voting access would be better achieved if election officials, through ‘mobile polling,’ took responsibility for registration and filing of absentee ballot requests, ballot completion, and training of LTC facility staff on voters’ rights and reasonable accommodations. Rather than making a facility into an Election Day polling site or simply making absentee voting available to LTC facility residents, mobile polling requires an election official to bring the ballot to the voter and assist the voter as needed in casting the ballot. Mobile polling is equivalent to ‘supervised voting’ within a facility.

California election law is conducive to mobile polling because it allows no-excuse permanent vote-by-mail (formally ‘absentee’) voting as well as early voting. However, a full program of mobile polling would be difficult to implement in California’s highly decentralized election administration system without major changes in state law. Also, assistance to voters in residential facilities can become prohibitively expensive in a state in which the financial burden of providing services is shifted more and more to the counties. For these reasons, we explored an outreach program already in place in one California county. This existing outreach program is not equivalent to the mobile polling tested in Vermont, but does, through an active role of the

county election office, begin to address some of the problems that mobile polling aims to address.

Research team participation

The Election Administration Research Center (EARC) research team consisted of two senior researchers and five research assistants. One of the two senior researchers left the project during the beginning stages. This senior researcher had conducted interviews with the Election offices in the six counties in which no implementation was introduced. She had conceived of this research project and secured the participation of the two implementing counties. Upon her departure, the second senior researcher took over the project.

All of the county election offices were re-interviewed by the research assistants. In-person interviews were conducted with staff of each implementing county (Marin and Monterey) as well as with the model county (Santa Cruz) by the senior researcher and one research assistant. There were numerous follow-up phone calls and emails with all three counties, mostly by the senior researcher. With the model county this was mainly to verify information, request assistance if the implementation encountered challenges, or ask questions about procedures. With the two implementing counties, most interactions were about scheduling, specific components that were listed for implementation in the grant proposal but were irrelevant, check on progress and collect feedback and suggestions.

Four of the five research assistants compiled the lists of facilities in the six research counties and then conducted the interviews with the facilities. There were eight in-person observations conducted in facilities in one implementing county and seven in the other. The observations were conducted by the senior researcher (3 and 6) and two of the research assistants (5 and 1) respectively. The senior researcher was also a participant observer in both counties, with more hands-on participation in the second county because the permanent staff was not available to accompany the temporary worker and asked for research staff to accompany her. The senior researcher assisted facility residents with voter registration, reading of sample ballots and explaining of procedures.

PART I - Broad-Brush Profiles of Voting Processes in Residential Care Facilities in Six California Counties

This study was composed of two major parts. This first part describes research conducted in six counties to ascertain the state of voting processes available to persons living in residential care facilities. The counties ranged from large to small, were located in different regions of California and were demographically different from each other. For each county, interviews were conducted with residential care facilities and the local Elections Departments.

Methods

Most election offices do not have an outreach program to residential care facilities in place, and due to this, most also do not maintain a list of facilities or contacts. Thus, the Election Administration Research Center (EARC) team had to conduct research to obtain facility lists from which samples were drawn for each county. Each county has its own resources for seniors; some have an Ombudsman who compiles information and advocates for seniors while others have entire departments dedicated to the aging population. In other counties there are non-profit groups or county agencies that have information about facilities that may cater to a wider range of persons with specific needs. As a result, each county's sample was obtained by different means, as explained below. Original lists are footnoted in each county's section on sample selection. The original lists were supplemented with other facilities that were found using internet searches with key terms such as: 'long term care facility' and 'independent living,' as appropriate. The sample selection section below includes information about all nine counties in the study because facilities had to be located for all of them. Only facilities with more than 10 residents were added to the sample. An incredible effort over a four month period of time was made to contact the facilities in the sample. For each county, at least 50% of the facilities in the sample were successfully contacted and completed interviews with the research team or declined to participate for various reasons.

Facilities were contacted via phone by a researcher who asked to speak to someone in charge of resident activities. The research team had tremendous difficulties getting in touch with someone in the facility who was able and willing to answer research questions. Facility staff were typically unaware about voter registration or outreach activities to residents, but either the activities Coordinator/Director as the staff member who most closely works with residents on non-medical care related issues, generally knew whether any outreach was conducted at their facility. Facility interviews ranged in length and the information collected depended on how much time the respondent had.

Most Activities Directors spend little time in their office and most of it with residents. Thus, being able to reach one at all, and then for longer than a few minutes, became a tremendous challenge that necessitated multiple call-backs and messages being left. Generally, if a facility had been contacted a minimum of three times and messages had been left but none were returned and no contact was made at all, the facility was logged as non-responsive. Many facilities were contacted more than five times and messages were left for staff. Some facilities were contacted more frequently because an initial contact was made and the responding party asked for a call back at a specific time to conduct the interview. That person was often not available at the scheduled time or changed the time for the call.

There were numerous incidents in which researchers continued to try and reach staff members that ultimately did not respond. Once the appropriate person was reached, researchers attempted to interview that respondent immediately because it was so difficult to reach anyone at all. If the respondent did not have time at that point, a time was scheduled for the interview. This resulted sometimes in many more call-backs and messages before the person was reached, and sometimes no contact was made again.

Every respondent was also offered a written questionnaire but none requested one. The questionnaire is available in Appendix 1. In some facilities, researchers were told that the administration would have to give permission for the staff person to be able to participate, and upon call-back researchers were informed that they were not granted that permission. Some facilities declined to participate by informing researchers that "nobody here can vote" and

hanging up the phone. Participating in a study about elections services for their residents was generally not a priority for the large majority of those contacted.

Six County Sample Selection, Demographics, and Elections Departments

Sample County 1: El Dorado

I. Sample Selection⁷

The list of facilities was compiled by the Long-Term Care Ombudsman of El Dorado County's government. According to their website, "The Long-Term Care (LTC) Ombudsman advocates for quality of care and quality of life for all residents of Skilled Nursing Facilities (SNF) and Residential Care Facilities for the Elderly (RCFE). This local program provides assistance with resources, referral for those needing assistance in selecting a Long Term Care Facility and guidance with ongoing issues. The LTC Ombudsman Program relies on community volunteers trained by the county Ombudsman and certified by the California State Long-Term Care Ombudsman Program."⁸

II. Demographic Information

Per the 2010 Census, the population of El Dorado County was 181,058 people and is estimated to have reduced to 180,561 by 2012. The American Community Survey (2007-2011) estimates that within this population, 21.6% are under 18 years and 16.4% are 65 years and older. The county's racial and ethnic breakdown is as follows: 79.6% are White, not of Latino origin, 0.9% are Black, 3.8% Asian, 12.2% are of Latino origin, 3.4% reporting two or more races, and 79.6% white alone, not Hispanic or Latino. Approximately 8.8% of the population is foreign born.

⁷ [County of El Dorado: Long-term Care Ombudsman](#)

⁸ [County of El Dorado: Long-term Care Ombudsman](#)

The per capita money income in the past 12 months (for the years 2008 to 2012, in 2012 dollars) is \$34,571 with a median household income of \$70,117 (above the \$61,400 California state average median household income). An estimated 8.1% of the population is reported to live below the poverty line, compared with an average of 15.3% for the state of California.⁹

III. Registrar of Voters

El Dorado does not have a voter participation program for long-term care facilities, though interviews revealed that there are two staff members in the Registrar of Voters office who deal with general voter outreach. One is the lead and also deals with other jobs like managing poll workers. The other primarily works on GIS and re-precincting but also supports outreach efforts by delivering registration cards and ballots in addition to visiting voters to provide assistance. They do not pro-actively go out and visit the residential facilities, but the facilities do call regularly and ask for registration forms which are sent to them or brought to them. Elections staff are very concerned about the voters in residential facilities getting registered and getting help with their mail-ballot without being influenced by others. They have found that there is a lack of knowledge among the residents and the facility staff about voting procedures, and there is the potential for people to take advantage of this. They are interested in developing a program to combat and prevent this.

Sample County 2: Orange County

I. Sample Selection¹⁰

The Orange County Office on Aging compiles a list of facilities for the elderly and EARC used a list that referred specifically to assisted living facilities with 25-400 beds. Knowledgeable staff

⁹ [El Dorado County QuickFacts from the US Census Bureau.](#)

¹⁰ [OC Office on Aging: Residential Care Facilities \(Assisted Care 25-400 beds\)](#)

at the Orange county elections office explained that a combination of online searching, the yellow pages, and communication with local communities is used to maintain the list.

The Orange County Office on Aging describes its mission as follows: “Orange County’s Office on Aging serves as the lead advocate for 400,000 older adults residing in the county, with a specific focus on low-income ethnic minorities. As an advocate, the Office on Aging is responsible for understanding the needs of Orange County’s older adults and utilizing the federal funding and programs available to meet those requirements.”¹¹

II. Demographic Information

Per the 2010 Census, the total population of Orange County was 3,010,232 people, which is estimated to have increased to 3,090,132 people by 2012. In comparison to other counties by population, it is a large-sized county. The American Community Survey (2008-2012) estimates that within this population, 23.8% are under 18 years and 12.3% are 65 years and older. The county’s racial and ethnic breakdown is as follows: 43.1% are White, not of Latino origin, 2.0% are Black, 18.9% are Asian, and 34.1% are of Latino origin, Approximately 30.5% of the population is foreign born.

The per capita money income in the past 12 months (for the years 2008 to 2012, in 2012 dollars) is \$34,233 with a median household income of \$75,566 (above the \$61,400 California state average median household income). An estimated 11.7% of the population lived below the poverty line, compared with an average of 15.3% for the state of California.¹²

III. Registrar of Voters

Orange County Elections has a broad voter outreach program generally, and specifically to certain populations. This includes residential care facilities, but to a small extent only, to which

¹¹ [About: Orange County Office on Aging](#)

¹² [Orange County QuickFacts from the US Census Bureau.](#)

staff at the County Elections Office conducts outreach upon request, typically about registration issues. One of the major services they provide is an emergency ballot 6 days prior to the elections. The residential care facility will typically send someone out to the registrar to pick up the ballots and will drop them off after they have been filled out by residents. However, in case a facility is unable to pick them up, the elections office will send someone to the facility with the ballots and they will wait until the residents have finished filling them out. This happens quite often, and typically anyone who is free at the moment at their office will do it. Because of this service, they do not provide transportation to polling places.

They send a packet out to facilities with registration information and pamphlets about voting 50 days before each major election. To determine which facilities to contact they use a combination of senior healthcare agency resources/contacts, phonebooks, and Google to compile a list. It has been updated this year with new facilities. About one-quarter of the facilities will respond to their mailing. Currently, their main focus remains on outreach to second language populations in the county and visiting areas where there are high concentrations of potential voters with language access needs. The office will host community talks in 4 different areas of Orange County and may include residential care facilities.

The Elections office works with an umbrella disability rights organization located in Los Angeles (Disability Rights California) which helps train their staff and assists them in providing services to people with disabilities. In outreach sessions the Elections office will typically bring bilingual staff and have multiple presentations going on at the same time at a facility. If the groups are small enough they are able to provide individual assistance with registration, but work is generally with groups. The presentation is primarily registration-focused with a history of voting, and county and municipal voting statistics. Typically they will tailor their presentations based on requests made by the facility or organization.

Of all the time spent on outreach (10% of their work in elections years), a very small percentage is for long-term care facilities. The department conducts outreach sessions upon request from the facility or from another county department (for example, they are required to be at the county fair where they will spend all their working hours, usually 10 am to midnight, for a week or

however long the fair lasts). Language-specific events and residential care facilities comprise 30-50% of their outreach, and departmental requests account for the remainder.

Sample County 3: Riverside County

I. Sample Selection¹³

The California Department of Aging in partnership with the Alameda County Department of Aging and Adult Services originally sponsored the Network of Care to “improve and better coordinate long-term care services.”¹⁴ The website soon became a comprehensive directory and resource for the elderly on everything from health issues and assistive devices, to legislative concerns and nationwide news concerning the elderly and people with disabilities. Facilities can add or correct information such as bed number or address by submitting a form to the website.

II. Demographic Information

Per the 2010 Census, the total population of Riverside County was 2,189,641 people, which is estimated to have grown to 2,268,783 people by 2012. Compared to other California counties in population, it is large-sized. The American Community Survey (2008-2012) estimates that within this population, 27.4% are under 18 years and 12.4% are 65 years and older. The county’s racial and ethnic breakdown is as follows: 38.5% are White, not of Latino origin, 7.0% are Black, 6.6% are Asian, and 46.5% are of Latino origin. Approximately 22.0% of the population is foreign born.

The per capita money income in the past 12 months (for the years 2008 to 2012, in 2012 dollars) is \$23,863 with a median household income of \$57,096 (below the \$61,400 California state

¹³ [Riverside County Seniors and People with Disabilities: Board and Care](#)

¹⁴ [About: Riverside County Network of Care](#)

average median household income). An estimated 15.6% of the population is reported to live below the poverty line, compared with an average of 15.3% for the state of California.¹⁵

III. Registrar of Voters

Riverside does not have a voter participation program for residential care facilities. Other than the use of some facilities as polling places during the election, the only other form of outreach conducted was through the use of letters, sent to both hospitals and care facilities without 15 days before each election. It includes ballot applications and registration forms and instructions on how to fill them out and submit them. In-person outreach is currently only conducted in jails, though staff at the Elections Department expressed an interest in conducting hospital and long-term care facility outreach if they had the resources to do so.

Sample County 4: San Joaquin

I. Sample Selection¹⁶

This list was compiled by the Aging and Community Services Department of San Joaquin County's Human Services Agency. The Human Services Agency of San Joaquin has state and federally mandated social services programs to serve a diverse community of children, the elderly, people with disabilities, and the under-employed. EARC used their list of residential care facilities to sample for this study.

II. Demographic Information

Per the 2010 Census, the total population of San Joaquin County was 685,308 people, which is estimated to have grown to 702,612 people by 2012. Compared to other California counties based on population, it is medium-sized. The American Community Survey (2008-2012)

¹⁵ [Riverside County QuickFacts from the US Census Bureau.](#)

¹⁶ [Residential Care Facilities for the Elderly, San Joaquin County](#)

estimates that within this population, 28.6% are under 18 years and 11.0% are 65 years and older. The county's racial and ethnic breakdown is as follows: 35.0% are White, not of Latino origin, 8.2% are Black, 15.7% are Asian, and 39.7% are of Latino origin. Approximately 23.1% of the population is foreign born.

The per capita money income in the past 12 months (for the years 2008 to 2012, in 2012 dollars) is \$22,696 with a median household income of \$53,895 (below the \$61,400 California state average median household income). An estimated 17.5% of the population is reported to live below the poverty line, compared with an average of 15.3% for the state of California.¹⁷

III. Registrar of Voters

San Joaquin does not have a voter participation program for long-term care facilities. No outreach was conducted to this population in San Joaquin, other than the use of some facilities as polling places during the election. The San Joaquin Elections office usually does not provide on-site assistance to voters, but they might consider it if they had a request for it. Their first approach prior to providing on-site services, however, would be to offer training to staff of the facility so that the staff would be able to assist voters with registration and their ballots. Currently, they only mail registration forms to one disability service organization and one facility that serves children and adults with developmental disabilities.

Sample County 5: Santa Barbara

I. Sample Selection¹⁸

The initial list used was compiled by Senior Connection which is a program of the Central Coast Commission for Senior Citizens. It is funded by the Older Americans Act. The Central Coast Commission for Senior Citizens is a non-profit organization which is responsible for the

¹⁷ [San Joaquin County QuickFacts from the US Census Bureau.](#)

¹⁸ [Residential Care Facilities in Santa Barbara County](#)

allocation of both federal and state dollars to agencies for senior services. Among other work, they have supported projects which provide meals, employment, legal assistance, health promotion, and information for seniors. Through the Older Americans Act, passed in 1965 to create more community social services for the elderly, they have coordinated, monitored, and assessed existing services for the elderly.

II. Demographic Information

Per the 2010 Census, the total population of Santa Barbara County was 423,895 people, which is estimated to have increased to 431,249 people by 2012. Compared to other California counties by population, it is medium-sized. The American Community Survey (2008-2012) estimates that within this population, 22.6% are under 18 years and 13.3% are 65 years and older. The county's ethnic and racial breakdown is as follows: 46.9% are White, not of Latino origin, 2.4% are Black, 5.5% are Asian, and 43.8% are of Latino origin. Approximately 23.5% of the population is foreign born.

The per capita money income in the past 12 months (for the years 2008 to 2012, in 2012 dollars) is \$30,114 with a median household income of \$62,723 (above the \$61,400 California state average median household income). An estimated 15.3% of the population is reported to live below the poverty line, compared with 15.3% for the state of California.¹⁹

III. Registrar of Voters

Santa Barbara does not have a voter participation program for long-term care facilities. Other than the use of some facilities as polling places during the election, outreach in Santa Barbara consists of phone calls and letters to hospitals and care facilities. They call each of the 27 facilities on their list to confirm their contact information before mailing out the letters. The letter is sent 60 days before each election and includes information on important dates and

¹⁹ [Santa Barbara County QuickFacts from the US Census Bureau.](#)

deadlines for registration and voting. It also has some vote-by-mail application forms and an emergency contact form for an application period for 6 days before the election which allows hospital staff to deliver ballots. The facility or hospital staff comes into the office to get ballots and brings them back. They stated that they don't have enough funding to conduct in-person outreach.

Sample County 6: Shasta County

I. Sample Selection²⁰

The Federal Department of Health and Human Services has a program called the Community Health Data Initiative. This resource was utilized by the Network of Care (the same service which compiled a list of facilities for Riverside) with Shasta County Human and Health Services to compile a list of nursing facilities and home health services. The nursing facilities portion was the starting point of the EARC sample.

II. Demographic Information

Per the 2010 Census, the total population of Shasta County was 177,223 people, which is estimated to have increased to 178,586 people by 2012. Compared to other California counties in population, it is small-sized. The American Community Survey (2008-2012) estimates that within this population, 21.8% are under 18 years and 18.1% are 65 years and older. The county's racial and ethnic breakdown is as follows: 81.8% are White, not of Latino origin, 1.0% are Black, 2.7% are Asian, and 8.9% are of Latino origin. Approximately 5.2% of the population is foreign born.

The per capita money income in the past 12 months (for the years 2008 to 2012, in 2012 dollars) is \$23,639 with a median household income of \$44,396 (below the \$61,400 California state

²⁰ [Shasta County Health and Human Services: Nursing Homes](#)

average median household income). An estimated 17.6% of the population is reported to live below the poverty line, compared with an average of 15.3% for the state of California.²¹

III. Registrar of Voters

Shasta does not have a voter participation program for long-term care facilities. No direct outreach was conducted to this population in Shasta, other than the use of some facilities as polling places during the election. The ROV mentioned that 3 of their staff members had been deputized as Deputy Registrars and had mentioned visiting residential care facilities for voter registration. When individuals or organizations contact them about registration questions they ask those individuals to come into this office to watch a PowerPoint that explains the voter registration process and their responsibilities. After this training they can be sworn in as a Deputy Registrar and have a series of voter registration cards issued to them. If facilities call to ask about getting vote-by-mail ballots to residents, the office directs them to their website which has a PDF application where they can request them electronically.

Survey Results and Findings

Following are the results from the survey of facilities administered in the 6 counties.

- The average number of residents across the facilities was 79, ranging from 56 in El Dorado and San Joaquin to 104 in Orange County.
- On average, across all six counties facility representatives estimated that just under half (45.5%) of their residents were registered to vote. This ranged from 25% in El Dorado to 60% in Orange County.
- Across the board, facilities reported that residents' voter registration was most often handled by the residents themselves and/or their families, and they played no role. The

²¹ [Shasta County QuickFacts from the US Census Bureau.](#)

second most common answer was that registration was a service offered upon admittance by facility staff.

- Every county but San Joaquin had a majority of facilities with some residents who vote at the polls. Still, although there were some residents going to the polls, the majority of residents across facilities chose to vote-by-mail. This is most likely a result of mobility and transportation issues.
- Overall, residential facilities interviewed were not used as polling places, with zero facilities in either Shasta or El Dorado. However, about one-third (10 facilities) in Orange County were polling places, likely due to the larger populations and higher number of facilities found in the area.
- Fewer than ten facilities in all the counties interviewed encouraged their residents to fill out their vote-by-mail ballots, the majority of facilities leaving it up to the residents. However, a majority in every county but El Dorado said they would provide assistance to residents who needed help with their ballots if they asked.
- Most counties had a majority of facilities with an in-house mailing system through which residents could submit their ballots. The only exceptions were Orange County where residents more often had to find a way to mail the ballot on their own, and San Joaquin where half the facilities had a mailing system and half required residents to mail the ballots on their own.
- When asked if their facility communicated with people at their Local Elections Office (LEO), answers varied across counties. In El Dorado, Orange, Santa Barbara and Shasta counties a majority of facilities said they didn't communicate with the LEO at all. In Riverside, San Joaquin, Santa Barbara, and Shasta the majority of facilities who said they did contact the office did so to request registration or change of address forms. The next most common answer in Riverside and Shasta was that facility staff contacted the LEO to

relay resident questions. In Orange County the main reason facilities communicated, if at all, with the LEO was because they were a polling place.

- When asked what the ideal procedure would be to ensure all eligible and capable residents who wish to vote would be able to do so, facilities responded differently in different counties. Overall, most said that what is currently being done is enough and that they wished to maintain the status quo. The next most common answer was that the LEO could provide residents with measure and ballot explanations. After that, facilities hoped for more help with the registration process.
- Overall, facilities were either unaware whether the Registrar of Voters provided their residents with technology assistance, or knew that they didn't. Only seven facilities responded that the Registrar of Voters provided their residents with these technologies.
- Lastly, most facilities were unwilling to disclose information about whether most of their residents were eligible or under Medicare or Medi-Cal. Of those who did answer, the majority of facilities stated that none of their residents were eligible.

Conclusion

Overall, facilities were reluctant to say that they could or should be doing more to help enable their residents to participate in the electoral process more easily. Generally, they placed responsibility on the Registrar of Voters to conduct outreach and help with voting and registration and do not initiate any contact with the County Elections Office. The facility representatives we spoke with knew little about how many of their residents were registered to vote or voted actively. One major issue was that facilities often determined that their own residents were unable to vote because of memory or other disability issues, though no court had yet declared these residents unfit to vote or act independently. Another issue raised by many of these representatives was that their resident population was quite insulated and unaware of issues going on both locally and nationally – this is the reason that many felt measure and ballot explanations would be especially useful.

In comparison to a Virginia study on voting in long-term care facilities (Bonnie, Freedman, and Guterbock) that was recently published and conducted during the 2006 midterm elections, our study had a number of methodological differences. Both studies made use of a large sample, though ours was focused on a county-by-county basis rather than the whole state. Additionally, both studies used telephone surveys as the main method of contact with these facilities, most often speaking to Activities Directors or administrative staff. One major difference was the Virginia study's differentiation of assisted-living facilities compared to nursing homes, between which they found nursing homes had far more initiative in getting residents registered and encouraging them to vote. Their measure of turnout was a facility estimation of registration and active voting, something we also measured, though both research teams admit that this is a crude measure of reality. The Virginia study found that increased facility involvement correlates to increased turnout among residents. While this study does not refute that conclusion, it appears from our findings that facilities are unlikely and unwilling to take more responsibility when it comes to their residents and voting, relying on their local Registrar of Voters to both initiate contact and maintain it.²²

²² [Voting By Senior Citizens in Long-Term Care Facilities](#)

PART II - Case Studies and Implementation of the Project

Santa Cruz County – Introduction and Case Study

Santa Cruz County is located in northern California. The highly experienced elected County Clerk heads the Elections Department. Santa Cruz elections has had an outreach program in place to voters with specific needs for many years. Originally, the County Clerk performed the outreach duties herself and later she delegated to staff. Because this County has many years of experience with outreach to residential care facilities, it was selected as a 'model' county for study. Based on its program, two other counties in northern California implemented a similar outreach project to residential care facilities.

I. Sample Selection²³

The sample used for Santa Cruz came from a list compiled by Advocacy, Inc. an organization composed of a Long-Term Care Ombudsman Program and a Patients' Rights Advocate Program, servicing Santa Cruz and San Benito Counties. The Ombudsman Program is mandated by the state and federal governments to advocate for seniors and people with disabilities who live in residential or skilled nursing facilities. Their list was last revised in September 2011.

II. Demographic Information

Per the 2010 Census, the total population of Santa Cruz County was 262,382 people, which is estimated to have increased to 266,776 people by 2012. Compared to other California counties in population, it is small-sized. The American Community survey (2007 - 2011) estimates that within this population, 20.6% are under 18 years of age and 12.2% are 65 years and older. The county's racial and ethnic breakdown is as follows: 58.9% are White, not of Latino origin, 1.4%

²³ [Advocacy Inc. Long-term Care Ombudsman Program: Santa Cruz and San Benito Counties](#)

are Black, 4.8% are Asian, and 32.7% are of Latino origin. Approximately 18.4% of the population is foreign born.²⁴

The per capita money income in the past 12 months (for the years 2008 to 2012, in 2012 dollars) is \$32,846, with a median household income of \$66,571 (above the \$61,400 California state average median household income). An estimated 14.4% of the population is reported to live below the poverty line, compared with an average of 15.3% for the state of California.

III. Registrar of Voters

Santa Cruz County's voter participation program for long-term care facilities is part of a broader outreach program that Santa Cruz Elections (SCE) implemented in an attempt to reach a larger pool of potential voters, including sub-populations such as the elderly and voters with disabilities, new citizens and students. The outreach initiatives and resources also extend to any individuals receiving hospice care who wish to participate in the voting process. There are five people in the Elections Department that assisted with this program during the election cycle of 2012, including temporary staff and staff whose primary duties include tasks other than outreach, for example, voter registration.

There is one primary staff member assigned to this program. She compiled a list of facilities in the county which started with a list received from an advocacy organization²⁵ for the elderly and those with mental health issues that is active in the county. The initial contact with this organization led to referrals to other groups that provided her with additional facility lists and contacts. The facilities include residential care facilities, skilled nursing facilities, and social rehabilitation programs. Elections staff adds to this list as they become aware of new facilities, and updates it during every election cycle as they attempt to contact facilities and find that staff

²⁴ [U.S. Census Bureau, Santa Cruz County Quick Facts Table, Census 2010](#)

²⁵ [The group is called Advocacy Inc, formerly named Ombudsman/Advocacy Inc.](#)

has moved on or there is a new contact. Record keeping and updating is done in their DIMS election management system via the EIMS module.

The initial contact attempt with a facility is via a letter the Elections Department sends²⁶ to make staff aware of the outreach program is available to help their clients with voter registration and the voting process to ensure they have an equal opportunity to vote. The letter explains that the Election department staff is available to visit the facility to register voters and share information regarding the election process. In June of 2012, the Election department mailed letters to twenty facilities. However, Election department staff reports that the letters are mostly ignored and that follow up phone calls are necessary. Frequently, the Election department staff needs to call facilities repeatedly before a contact is made with a facility staff member who is willing to facilitate access to the residents. This is mostly the ‘Activities Director’ in the larger facilities. In smaller facilities that may not have someone with those job duties it can be more difficult to find a staff person who is willing to help. During the 2012 election cycle the Election department’s efforts resulted in seven individuals and three facilities requesting voter outreach and assistance.

Approximately twenty-nine days prior to Election Day two Elections Department staff members (generally one permanent staff person and one temporary staff person) visit residential care facilities to assist residents who wish to register to vote and to provide other election information. California is a no-excuse absentee voting state and many residents elect to become mail-ballot voters. The staff has voter registration forms and absentee ballot request forms available at this visit, and they schedule a return visit for early voting, assistance with voting and/or ballot pick-up. During the second visit to facilities to which the devices are brought, the Elections staff demonstrates how to operate the accessible touch screen units.²⁷ For some elections they also provide audio recordings of local and state measures (including podcasts of

²⁶ See Appendix ? for a copy of the initial contact letter

²⁷ See [the California Secretary of State's page on how to operate this Voting System](#)

these measures made available on their website) and assist voters in marking their ballots when requested. In 2012, there were four employees in addition to the project manager working on voter registration and outreach, with only a small amount of time being dedicated to residential care facilities due to budget limitations. This team added over twenty thousand voters registering for the election to the rolls between September and October 2012, but very few of those were voters in residential care facilities.

This county Elections office has a high level of personal dedication to serving voters with disabilities. The team leader as well as the County Clerk pick up and deliver ballots to 'shut-in' voters that are not in facilities and may otherwise not be able to participate, and they provide as much assistance generally as time permits. For home visits, they always go in pairs to have a witness who can vouch that no voter coercion took place. The office also provides services outside of regular business hours, including on the weekends.

This county also has a program that takes voters to the polls. They contract with a private transportation service to pick up voters that notify the office that they need the service. Voters are brought to their polling place and then returned to their homes.

The project leader explained that there are a number of proposed outreach improvements that the Elections Department hopes to implement in the near future to make voting more accessible to residents in care facilities. First, a series of events called "Our Community Votes" would take place during the evenings and/or on Saturdays to educate local residents about elections and registration in a non-partisan discussion, and also instruct them how to use new touch screen voting technology. Staff would also notify the locality and media in advance to encourage attendance and would hold these events all over the county, especially in areas with traditionally low registration and voter turnout. Moreover, the Elections Department plans for the program to be further enhanced by more research on local facilities and agencies that work with people who have special needs. This would allow them to network and increase their efforts to reach more eligible voters than in the past. Lastly, the project leader suggested the creation of a local committee on voter outreach that would meet biannually and include people from special needs communities.

IV. Facility Interviews

In an effort to describe the Santa Cruz outreach project from the perspective of facility staff that care for residents in long-term care, researchers surveyed staff in eight long-term care facilities in Santa Cruz County. The interviews were conducted via phone during the months of March, April, and May 2013.

A list of facilities provided by Elections staff includes a total of 41 residential care facilities in Santa Cruz County. An annual RAND study indicated that in 2011 only nine facilities in Santa Cruz had over eleven beds.²⁸

Comparing the lists, it appears that there is some fluctuation in the capacity of the facilities, and also that different methods of data collection return different results. From the list of facilities provided by Santa Cruz county, ten facilities with more than 10 beds were selected based on location with four from Santa Cruz City, two from Capitola, three from Watsonville, and one from Aptos. In this manner, researchers could ensure that interviews would be conducted from varying socioeconomic areas. Of the ten facilities selected, eight facility interviews were completed successfully and two facilities did not participate. The information collected in these interviews varies greatly due to how much time respondents had, and due to how much information they were able to provide.

V. Summaries of Facility Interviews and Findings

Facility 1:

This is a skilled nursing facility. About 20% of the 80 residents vote. The staff receives the mail and delivers it to the residents. Either the residents' families offer the support the residents need to vote or they delegate to the staff. No ballots come in the mail. Elections staff brings ballots

²⁸ [RAND California Long Term Care Statistics](#)

and registration cards. The Elections Department staff person sets up in the dining room and helps the residents one by one at different tables with any part of the process they need help with. Facility staff explains that it would help if the Elections Department initiated the visits rather than waiting for them to ask for help. Facility staff would like to have an informative program in which someone like the League of Women Voters would explain the issues to the residents so that they could make educated choices.

Facility 2:

This is a skilled nursing facility. 2-3 of the 20 patients vote. Facility staff explained that most of the residents deal with bipolar disorder, schizophrenia, and dementia and nearly no one knows much about voting in general or about the candidates. The residents do watch the news and this is the only way they would receive elections information. If residents would like information about voting or need assistance, they must approach the staff, but none of the residents do. Elections access or information is not provided at this facility without a request. Staff would like an outside organization to come in to help eligible voters participate. In particular the Elections Department, but the staff believe that the County only provides outreach and assistance to larger facilities.

Facility 3:

This is a large independent living facility with 226 residents living in apartments. If residents need help with registration and absentee ballot applications they ask the facility staff person who is in charge of community relations, or their relatives. Most residents are registered to vote, and if there is an issue with residents being unsure of their registration status then the facility contacts the Elections Department and lets them speak to Elections staff directly. Residents have their own mailboxes and retrieve their mail themselves. Most of them vote by mail but 1 or 2 voters are taken to the polling place by facility staff so they can cast their ballot there. Most find absentee ballots more convenient. Staff go door-to-door to ask if anyone needs assistance reading ballot information or filling out forms. They spend a fair amount of time providing one-on-one assistance to make sure eligible voters can participate. Previously, the League of Women

Voters visited to inform residents about issues on the ballot. They had been contacted by a resident whose relative is a member of the League. Facility staff is confident that all residents "able minded but not physically able" (sic) and wanted to vote were able to do so, and received the assistance they needed.

This facility would like assistance from the county to provide one-on-one help with the voting process for their residents. They believe that the Elections Department is best suited to provide assistance to the residents and helping them complete their ballots.

Facility 4:

This is a 99-bed facility that provides both long and short term care. Two thirds of the residents receive long-term care. Staff estimates that about 30% of the long-term residents vote but a complete estimate for all residents is not possible because not all ballots come to the facility and not every voter is assisted by staff or the Elections team. Voter registration is part of the first-week moving in process for new residents. If residents are unsure about whether they are registered or if they want to change their address then facility staff assist them with new registration forms. Before each election, the Activities Director visits all rooms to notify those that are registered, to let them know that the Elections team will be visiting, and registration forms for those that may need one. This is done to make sure that the residents have time to prepare themselves for the visit.

The Elections Department has been providing outreach services to this facility for about five years, and generally does so with two or three staff members. Elections staff ask everyone whether they are registered to vote, interested in it and/or whether they need assistance. Outreach is conducted room-to-room as necessary. Most long-term care residents receive their ballots at the facility, and the short-term care residents remain registered at their residence address. For short-term residents, elections materials are delivered by friends or family who pick up their mail. If short-term residents need assistance with voting, it is mostly provided by family members, for long term residents, it is more frequently provided by Elections staff. The Activities Director collects the ballots that arrive in the mail, and holds them until the elections

team visits, then distributes them to residents and elections staff take over from there. Some residents are only able to vote because the Elections team provides assistance to voters that need considerable time and help to be able to participate. Facility staff report that they do not have the resources to provide the type of service that Elections is able to provide, and that most residents prefer an outside party to assist them rather than facility staff or family.

Some residents vote at the near-by polling place or drop off their mail-ballots there on Election Day. Staff at this facility reports that one-on-one sessions by Elections staff with residents work better than group sessions as the latter can be quite overwhelming.

Facility 5:

This is a small senior facility with 14 rooms that provides a full range of assisted living and skilled nursing services in addition to hospice care. Facility staff are unaware of any election mail that comes directly to the facility. There may be some vote-by-mail ballots that are voted by residents but those would be handled by family members not staff. One resident votes at the polling place and is taken there by a family member. Most residents suffer from Alzheimer's and dementia and do not seem to want to vote or show any interest in the topic.

Facility 6:

This is a small, 40-bed facility that provides skilled nursing care. Most residents are here for long-term care and deal with severe cognitive impairments and mental health disorders. The facility has compiled a list of those that are eligible to vote and staff reach out to those residents prior to each election. About 3 of the 40 residents vote, and those that do vote by-mail.

Staff recalled that once, someone came to assist residents with registration or voting, but could not recall whether it was the Elections Department.

Facility 7:

This is a convalescent and rehabilitation center that provides short and long term care. The facility has 59 beds. Voter registration is part of the move-in week process. Staff provides assistance with changing voters' addresses. The Election department provides outreach services

to this facility and assists with any needs the residents may have. Usually, there is a group meeting prior to each major election in which every individual is asked whether they want to vote. Residents receive information about the election by watching TV news every morning, and an event covering the upcoming election is also scheduled. Access to information in this facility is good and local elected officials hold town hall meetings here. About 10 of the residents vote regularly, but whether they do depends on their level of alertness. All voters vote mail-ballots but about half drop the ballots off at the polling place behind the facility on Election Day.

Facility 8:

This is a skilled nursing facility that has ~170 beds of which about 100 are occupied. The resident population is very diverse, with an average age of 60, and many are relatively active and still drive. About 80% of the eligible population in this facility is registered and roughly 30 - 40 voters cast ballots. Facility staff asks new residents to change their address on their voter registration form when they first move in. They also reach out to residents in general to ask whether they want to vote, and at times residents will reach out to them to request assistance. The facility organizes several election information events prior to presidential elections and up to 70 residents attend typically. Many residents are interested in politics and politically involved. The Elections Department provides outreach services to this facility and provides information, explanations about measures on the ballot and assists with ballots as requested.

Marin County Case Study

Marin County is one of the two counties in which a version of the Santa Cruz outreach program was implemented.

I. Sample Selection²⁹

This facility list was compiled by the Marin County Division of Aging and Adult Services with the Network of Care (described under Riverside County) and is updated yearly, last in December of 2012.

II. Demographic Information

Per the 2010 Census, the total population of Marin County was 252,409 people, and is estimated to have increased to 256,069 by 2012. Compared to other counties in population, Marin is a small-sized county. The American Community Survey (2007-2011) estimates that within this population, 20.7% are under 18 years and 21.2% are 65 years and older. The county's racial and ethnic breakdown is as follows: 72.8% are White, not of Latino origin, 2.8% are Black, 0.6% are Asian, and 15.5% are of Latino origin. Approximately 18.5% of the population is foreign born.

The per capita money income in the past 12 months (for the years 2007 to 2011, in 2011 dollars) is \$54,605, with a median household income of \$89,605 (above the \$61,632 California state average median household income). An estimated 7.2% of is reported to live below the poverty line, compared with an average of 14.4% for the state of California.³⁰

III. Registrar of Voters

Marin did not previously have a voter participation program for residential care facilities. Outreach was conducted to this population in Marin during the implementation of this study.

²⁹ [Marin County Aging and Adult Services: Choices for Living 2012](#) (Note: This list, which we used, has since been taken down and replaced with [Choices for Living 2013](#).)

³⁰ [U.S. Census Bureau, Marin County Quick Facts Table, Census 2010](#)

IV. Facility Interviews

Below are the key findings and data from the facility interviews. These interviews were conducted prior to the implementation of the outreach program.

- Out of Marin's residential care facilities, 96% were eligible to participate, 36% completed interviews and 16% declined to participate.
- Marin's residential care facilities contained an average of 177 residents, ranging from 23 in the smallest facility in the sample to 300 in the largest.
- An average of 39% of residents in residential care facilities were registered voters.
- An average 32% of residents continue to be active voters.
- When asked how residents become registered to vote, the most common answer among the facilities was "it is up to the resident and the family members" (67%), followed by "at admittance by facility" (22%), and "before elections through facility efforts" (11%)
- When asked if any residents vote at the polls, 75% of facilities responded yes and 22% of the facilities responded no.
- There was an equal amount of facilities stating that residents voted mostly by vote-by-mail ballots (50%) and residents that go to the polls (50%).
- A majority of facilities (56%) stated that there was a polling place at their facility on Election day compared to those who did not have a polling place (44%).
- When asked how residents submit their voted ballots, a majority said the facility collects/has mailing system in place (75%) followed by the residents being responsible for mailing ballots themselves (25%).
- When asked whether the facility communicates with the County Elections Office, a majority of facilities answered "Yes" (63%) (50% as a result of being a polling place and the remainder for other unspecified reasons). However, 38% of facilities said they didn't have any contact with the County Elections Office.
- Facility representatives were asked what they believe the ideal procedure to ensure that all capable residents who wish to vote can do so. 50% said they wished to maintain the status-

quo, 38% stated they could use more help with registration, 13% expressed interest in ballot and measure explanations and 13% said they could use more voting assistance in general.

Monterey Case Study

Monterey is the second one of the two counties in which a version of the Santa Cruz outreach program was implemented.

I. Sample Selection³¹

The Registrar of Voters provided us with an Ombudsman's list from the Alliance on Aging, a non-profit group driven mostly by volunteers who serve as senior advocates. However, the list only contained 30 facilities so we supplemented it with additional information from a Monterey County website. Upon inspection, the website appears to provide general information on Monterey County from tourist destinations to schools in the county. There was no information on how this list was compiled or who maintains this website, but any additional facilities not previously mentioned on the Ombudsman's list were added to our list of facilities to contact.

II. Demographic Information

Per the 2010 Census, the total population of Monterey County was 415,057 people, which is estimated to have increased to 426,762 people by 2012. Compared to other California counties in population, it is medium-sized. The American Community survey (2007 - 2011) estimates that within this population, 26.7% are under 18 years of age and 11.2% are 65 years and older. The county's racial and ethnic breakdown is as follows: 32% are White, not of Latino origin, 3.7% are Black, 6.9% are Asian, and 56.4% are of Latino origin. Approximately 30.3% of the population is foreign born.³²

³¹ [Monterey County Senior Services](#)

³² [U.S. Census Bureau, Monterey County Quick Facts Table, Census 2010](#)

The per capita money income in the past 12 months (for the years 2007 to 2011, in 2011 dollars) is \$25,508, with a median household income of \$59,737 (below the \$61,632 California state average median household income). An estimated 14.4% of the population is reported to live below the poverty line, compared with an average of 15.3% for the state of California.¹

III. Registrar of Voters

Monterey did not previously have a voter participation program for residential care facilities. No outreach was conducted to this population in Monterey, other than the use of some facilities as polling places in elections.

IV. Facility Interviews

Below are the key findings and data from the facility interviews. These interviews were conducted prior to the implementation of the outreach program.

- 36% of Monterey's residential care facilities were considered eligible for the study, and of these 48% completed interviews and 4% declined to participate.
 - There was an average of 68 residents per facility and the number of residents ranged from 28 in the smallest facility in the sample to 149 in the largest.
 - An average 52% of residents were registered to vote while an average 43% of residents were active voters.
 - When asked how residents become registered to vote, the most common answer among the facilities was "at admittance by facility" (54.5%), followed by "it is up to the resident and the family members" (18%). 36% didn't respond to the question.
 - When asked if any residents vote at the polls, 33% of facilities responded "yes" and 66% of the facilities responded "no."
-

- When facilities were asked if most residents vote at the polls or by mail the facilities stated that residents vote mostly by mail ballot (90%) and less frequently at the polls (10%).
- A majority of facilities (81%) said that there was no polling place at their facility on Election Day. The remainder of the facilities declined to respond (18%)
- When asked if the facility encouraged residents to fill out vote-by-mail ballots, 55% stated no, 18% stated yes, and 27% declined to respond.
- 81% of facilities said they assisted residents with the ballot if needed, 9% said they do not offer assistance, and 9% declined to respond.
- When asked how residents submit their voted ballots, a majority said the facility collects them and/or has a mailing system in place (81%).
- When asked whether the facility communicates with the County Elections Office, a majority of facilities answered “No” (72.7%) and of those who said “Yes” (18%) the main reasons were to request registration or change of address forms (9%), or as a response to residents' questions (9%).
- Of the facilities that responded to this question (36%) stated either "No" or "Do Not Know" when asked "Does the Registrar of Voters provide residents with technical assistance if needed?" (63% did not respond to the question).
- When asked how many residents were eligible for Medicare or Medi-Cal, 45% said a majority of their residents are, 9% said none, and 9% said some.
- About 38% of facilities believe the ideal procedure to encourage voting is maintaining the status-quo, 38% stated they could use more help with registration, 25% expressed interest in ballot and measure explanations and 25% said they could use more voting assistance in general.

Observations and Findings of the 2 County Implementation

The pilot studies in the two northern California counties were modeled on another county in the same region. The goal was to implement the model-county's program as closely as possible and to observe the process with its challenges, successes and failures. There were three major components to the project:

1. identifying facilities, then contacting them to offer visits by elections staff; setting up appointments
2. first visits to the facilities to register voters
3. second visits to the facilities to provide assistance to voters that requested it; picking up ballots

Temporary Workers

This project envisioned that temporary workers would be hired on an hourly basis and that they would be the main implementing agents for all three components. One of the two counties listed the job components as follows:

Summary of essential job functions

- Contact Long Term Care Facilities to arrange a site visit
- Give bilingual oral presentations (English and Spanish)
- Assist voters with specific needs in completing their ballots and/or registration forms
- Perform outreach and site visits
- Prepare outreach material tailored to the group to visit (bilingual material)
- Create a report on daily activities and outcomes from the visits

- Interview residents in Long Term Care Facilities to determine eligibility to register to vote
- Scheduling and administrating Long Term Care Facilities visits
- Other duties as assigned

Reality, however, proved to be more complicated for a myriad of reasons.

Recruitment, Selection and Hiring of temporary workers

One, finding qualified temporary workers that are available during a roughly four month period of time and are basically on call to work whenever needed for very few hours altogether is most certainly a tall task to begin with. First, what does 'qualified' mean in this context? According to Elections staff in the model county, based on the population that is being served, the temporary worker would possess certain skills, such as a background in working with vulnerable populations, perhaps experience in mental health care or social work.

Second, the temporary worker should have patience, empathy and, as one county put it, possess the "Ability to have positive interactions with people who have communication and physical impairments" along with a " High level of comfort in these situations." [sic] The temporary worker should be able to clearly communicate with people that may live with a wide variety of issues, from cognitive to physical disabilities, and that have a wide range of demographic characteristics. Third, the temporary worker should have some background knowledge of elections, including registering voters or perhaps having worked as a poll worker and having provided assistance to voters in that capacity. Finally, the suggested pay for individuals with this rather broad set of qualifications is \$20 per hour. A sample list of qualifications from one implementing county is below:

Minimum requirements

- Minimum two years experience in marketing or community outreach
- Ability to train, individuals and/or groups

- Effective public speaking and communication skills
- Ability to review registration forms for accuracy
- Strong organizational skills and attention to detail
- High level of integrity, diplomacy and initiative
- Proficiency with Microsoft applications, especially Word, Excel and Power Point
- Possess a valid class C California driver's license, or provide suitable transportation that is approved by the appointing authority by the time of appointment.
- Must have driving record in Good Standing.
- Excellent written and oral communication skills English and Spanish

Counties have different hiring procedures for temporary workers. Some counties collect applications for all departments for a particular job classification and those that have an open job chose from all applicants. In others, the Elections Department can post jobs directly. The 'model' county and the two implementing counties all used different pathways to hire assistants for this project. Monterey sent a job description with the desired qualifications to the temp agency that they usually use to hire staff for elections and Marin reached out to the League of Women Voters to ask whether someone from their organization would be interested in the job. The Registrar of Marin explained that temporary workers are difficult to find in her county and she was quite worried about not being able to find anyone to assist with the task. Monterey hired two temporary workers and Marin one.

In both counties, there was one permanent staff member who served as the lead person on the project. In Monterey, that person is usually in charge of bi-lingual outreach services and in Marin, the employee manages Voter Registration. Both Elections Departments are similarly small and employees often perform other work as well. For both counties, this project presented the departments and in particular these employees with additional work as neither had provided

outreach to residential care facilities previously and the additional work was not factored into their usual work schedules and demands.

Training of the temporary workers

Once the temporary workers were hired, they were trained by the two staff members in charge. Training consisted of teaching the temps how to register voters and how to conduct themselves generally as a representative of the Elections Department. There are many dos and don'ts when dealing with voters and both departments were worried about sending temporary workers out into the field when they did not have much time to vet them prior to having them in contact with voters or potential voters. In particular since the populations that were planned to be served by this project would fall into the 'vulnerable population' category, the departments were concerned that any assistance would be provided within the sometimes blurred parameters of too much versus too little.

The temporary workers in one county were also trained with the available modules used to instruct poll workers on how to interact with populations with disabilities, how to provide assistance and they were made aware of the definitions of voter intimidation. Additionally, they were trained on voting procedures. Training took place over one day and a half and consisted of PowerPoint presentations and practice among themselves.

The other county approached and then hired a temporary worker who is a member of the League of Women Voters and had been involved with that group for many years. She had previously participated in voter registration drives and voter outreach activities. This person also sits on that county's Election Advisory Committee and is thus familiar with many election related issues. She reported having much experience with the elderly and persons with disabilities, having been engaged in volunteer work with those populations for many years. Due to her background, she received less formalized training.

Identifying and contacting facilities

The first task after hiring and training temporary workers was to identify and contact facilities to offer them site visits. In one county, one module in its elections management system had a list of residential care facilities that was initially used by them to initiate contact. The second county did not have a list of contacts and used the list that had been compiled by the EARC research team. The first county also supplemented their list with the EARC info.

First, a contact letter was sent to all facilities. One county sent the letters during the week of August 5, 2013 and the other county sent them after their project lead returned from disability leave on September 23, 2013. The first county reported not having much success with the letter, thus follow-up phone calls were made to secure facilities for participation. The second county received enough interest based on the letter that they did not have to make many follow-up phone calls to facilities.

Both counties reported that it was difficult to get through to the appropriate person in the respective facility, and at times what looked like the ‘appropriate person’ turned out not to be the correct contact. Generally speaking, the larger facilities have Activities Directors that coordinate events and get-togethers such as a Bingo, a music recital or movie time. The Activities Directors seemed to spend little time at their desks and most of their time with the residents. Taking phone calls and communicating with a group offering services that they were not familiar with was not their priority.

It took a considerable amount of time and energy to get in touch with the Activities Directors, and multiple messages (often more than five) over multiple days were left in almost every instance. When calls to the Activities Director did not result in contact being made, the temporary worker in one county would call the facility director. This approach generally resulted in a message being sent to the Activities Director, and perhaps even an appointment being set up, however, the information the Activities Director received that way was sometimes confusing. In at least one of these cases, the Elections team encountered difficulties performing registrations when they arrived because the facility was not prepared to accommodate them.

In other facilities, there is one general number and a caller can choose from different mailboxes to leave messages. Frequently, the temporary worker would leave messages but the mailboxes were either not monitored or the message would be picked up by a staff person who had nothing to do with setting up activities or facilitating client contact. Those messages were often not routed to the correct person. In other facilities, the voicemail box is shared by all staff and the message would not get to the appropriate person. It is very clear that a tremendous amount of time was spent simply getting in touch with someone at the facilities. We assume that for the facilities that were visited as part of this project, future contact will be much easier and it will be less time consuming to set up appointments because staff are now familiar with the Elections teams and their work.

Scheduling appointments

Once the ROV (Registrar of Voters) teams were able to make contact at a facility, they had to explain the nature of the project and what services they were able to offer to the residents. Some facilities dropped out of the project at that point. For example, the ROV caller was given messages like: “Everyone here has Alzheimer’s” with no additional information being provided, or “Nobody here can vote.” This was the same experience that EARC researchers had when they contacted facilities in the different counties. There was no opportunity to ascertain whether these facilities made the judgment that their residents are unable to participate in the electoral process based on the residents' having been declared incompetent by a court of law, whether they made a summary judgment about all clients rather than assessing their individual situations, or whether they were simply not interested in the services offered.

Facilities staff that expressed interest generally engaged in a conversation with ROV staff to understand the services that were offered, and to explain the conditions and abilities of their clients and the facility set-up. In facilities where the majority of the residents are fairly active, we found more events scheduled, and at times it was difficult to find a time slot when the ROV team could get an appointment to meet with residents. More than one facility of this nature had back-to-back events scheduled over one month in advance. There were few timeslots in which a

voter registration even could be scheduled. The facilities also have strict meal schedules and many clients have medical services appointments. Depending on the level of care that is provided by the facility, it can be difficult to gather all clients that may want to participate in a voter registration event at the same time.

Both ROV teams asked for the residents to be gathered in a group if possible, so that one presentation could be made to everyone interested. Generally, 2 hours were allotted for the first visits, which were voter registration events.

Facility Set-ups

While the ROV teams suggested to the facility contact that groups of residents might be brought together for the initial outreach event, this was not always possible, mainly due to the type of facility being visited. Facility visit set-ups varied greatly and there was no way to anticipate what the ROV teams would encounter on their first visit to any of the facilities.

In facilities that mainly provided assisted living care, the residents are frequently highly mobile and have their own schedules. In one facility visited, the residents were running errands, had appointments and were shopping at the local farmer's market. Partially, this was due to the fact that the ROV team arrived a half hour later than scheduled and many did not want to wait. In other facilities that offer assisted living, the same pattern was observed, in particular in a facility that is located walking-distance to a shopping mall. There seemed to be little opportunity to catch everyone at the same time outside of the meal times.

In facilities with less active residents, groups were usually gathered in the lunch area, or in an activity room if there was a separate room for that, at the agreed upon time. The project leader for County 2 would give a prepared presentation in English using PowerPoint, and translating into Spanish for those that required that service. The presentation covered the services the ROV would be able to provide and explained voter's rights. This county is covered by Section 203 of

the Voting Rights Act for Spanish and has to provide bi-lingual assistance in voting related matters³³. The project leader for the ROV is a native Spanish speaker who was able translate as needed. County 1 was less formal and took the go-with-the-flow approach by asking residents what they needed or what would be helpful and then figuring out on the spot how to provide that. This could mean anything from helping change addresses to reading the sample ballot. County 2 encountered roughly the same range of questions and dealt with them after the presentation and while attendees were filling out Voter Registration forms. The group events had anywhere from three to twenty participants.

In facilities that have more bed-confined clients, the group events were smaller and the teams were told to also go door-to-door to meet with residents. Most rooms are quite small and not set up to accommodate visitors easily among trays and various equipment being in place. It was at times difficult to communicate and assist bed-ridden individuals in their private rooms while still maintaining some level of personal space or privacy. In some facilities, there were no group events scheduled and all contact was in the individual rooms with the residents. In other facilities yet, the residents were occupied and sitting at tables, watching television or reading or playing card games, and the teams were asked to approach each table to ask whether anyone wanted to register to vote or needed any elections related assistance.

Another type of set-up was in the lobby of a (usually large) facility where residents could stop by and inquire if they needed election help or information, and finally, similar to the lobby set-up, the ROV teams would be directed to set up in a specific room and residents could visit there with inquiries and election needs. For most of the set ups, in particular the latter two, a flier or message on an events board or calendar had been posted in advance in the respective facility to inform residents that the team would be available.

³³ [Section 203 brochure from Department of Justice](#) ; [Language determinations in Federal Register](#)

Providing election services

Both participating counties worked in teams. It was clear from the very beginning that the temporary workers could not be sent out on their own into an environment that was unknown to the ROV staff, and where nobody in the office knew what would be expected of them.

For county 1, the first facility visit was conducted by the Registrar of Voters along with the project lead, who is usually responsible for registration. The next set of visits was conducted by the project lead along with the temporary worker, and finally the temporary worker would conduct facility visits with EARC research team members, in particular when the project lead was busy and unable to leave her regular duties.

For county 2, the project lead attended all visits, normally with at least one temporary worker, sometimes two, and at least once also with the ROV staff member responsible for voter registration. For one visit, she attended with EARC research staff to provide assistance as the second person.

A major reason for not visiting facilities alone is to have a witness who can observe that no undue influence or voter coercion occurred. Both counties were highly aware of the fact that this could potentially be an issue when dealing with vulnerable populations. Another reason was simply that additional help may be needed, and this turned out to be a reasonable assumption. Both county teams encountered a wide variety of situations, including the examples below:

Reaching residents during scheduled visiting times

Scheduling to provide election services frequently conflicted with other activities that the facilities had on their agendas. As mentioned previously, some facilities provide back-to-back activities that are scheduled months in advance. In order to accommodate the ROV teams, facilities would schedule them for appointments during the most convenient times, but still overlapping with other activities. In more than one case, the county teams reported that they arrived for their appointment only to find that residents were playing BINGO, which was observed to be a highly desirable activity and players were not interested in being disturbed for

any reason. The teams then had to wait until individual residents had finished playing and would seek out their assistance. This resulted in multiple residents approaching the teams at the same time and having to wait until the previous resident was done. It also caused the visit to be longer than anticipated.

Another situation encountered was that residents were watching a movie in the break room and had great difficulty focusing on both, the movie and the specific elections related tasks like filling out their registration forms.

When the County 1 team arrived in one facility, some residents had left to appointments or were running errands. This was partially due to the fact that Elections staff arrived a half hour later than scheduled and most residents did not want to wait. The lateness of the event then conflicted with the lunch service, and voter registration finally took place in the lunch room while some residents were eating. Some residents were not too happy about having their regular space taken up by the ROV team.

Finally, in some facilities the teams encountered that residents that had asked to meet with the ROV team were unavailable due to being in medical appointments and rehab sessions, or being heavily sedated and unable to focus. Some residents expressed regret about not being able to accept the assistance the teams were offering, and said that had they known about the time of the visit, they would have delayed taking their medications. Other residents were asleep when the teams arrived or said that they did not feel well enough to meet that day.

Impatient residents having to wait for services

In most facility group visits, there was some waiting time for residents to have individual time with a member of the outreach teams, and some residents were quite bothered by this. For example, after the initial presentation to a group of residents, registration forms would be passed out. However, almost none of the residents was able to read the very small print on the form and needed to either get their glasses or required the use of a magnifying glass that was provided by the ROV team, or both. Once the legibility issue was solved, which often involved calling in facility staff to retrieve glasses from rooms because many residents were unable to move about

without their assistance, most attendees needed assistance filling out the form or had questions. This situation created a bottle-neck because it can take a significant amount of time to watch someone who has trouble writing, as many residents do, and who wants to make sure that they are properly completing each item, fill out a rather lengthy form. Also, many residents were unable to hold a magnifying glass in one hand and write with the other. One of the team members was generally assisting with the simple task of holding the magnifying glass or holding the registration form and reading it to the resident and/or explaining what information was necessary to complete it.

Many elderly residents do not have a driver's license or ID card and also cannot remember their Social Security numbers. Resolving this issue could require either a facility staff member going to their room to fetch a wallet that may have the number in it, or calling a relative who has the information. Finally, both teams looked over the forms to make sure they were properly filled out and signed prior to accepting them, which again meant that residents had to wait until a team member was available.

Facility residents being unsure about their registration and ballots

Both teams encountered many situations in which residents said they were registered at some point, but at their previous address. Many residents, even in long-term care, expect to return to their home in the future and want to maintain their primary residence status there. Some had mail forwarding to the facility but election mail does not forward thus the resident did not receive a ballot. If a mail-ballot gets returned to a registrar of voters office because a person has moved, depending on the county of residence, an address verification postcard may be sent out, but none of those we spoke to remembered having received one. The ROV teams were unable to look up registration status while at the facility, even within the county, because they had no way to access the internet. In these situations, residents were encouraged to re-register with the facility address. Others have relatives bring their mail when they visit, but this can cause a significant delay and we heard that some received their ballots after the election. More than one resident reported that their relatives either did not want them to vote and thus did not bring a ballot, or that the relative in question throws the ballot away. One resident explained that this

was due to her having different political beliefs than her relative. The ROV teams went through great lengths to explain that the residents could maintain their mailing procedures but would be able to just register to vote at the facility so that their election mail only would be delivered there, but all other mail would still go the former residence. Some residents re-registered at the facility once this was explained.

Both ROV teams were also told that frequently, relatives did not want residents to change their address, even for voter registration, to the facility for various reasons, one was that it would be "too confusing" if only elections related mail would be routed directly to the resident. Most residents simply went along with the wishes of their relatives and it was observed that there was a great reluctance to challenge them.

Many facilities have their own challenges when it comes to getting mail to the proper recipient, which can cause elections materials to be delayed considerably. There is, however, not one way in which mail should be addressed. Some facilities requested that the residents put their room numbers on the registration form so that mail could be directed to them more expeditiously. Others asked for only the general address to be put on the form. They explained that residents sometimes move rooms and that a wrong room number can cause the mail to get delayed significantly. Either way, it was clear that in most facilities, distributing mail is not necessarily a priority and that judgments were made by staff about when to get mail to the residents. This fact again caused confusion because many residents did not receive their sample ballots, which may have prompted them to also ask for a ballot, and some were confused about whether they were still registered due to this fact.

Both ROV teams began to print out registered voter lists for each facility prior to visiting there, so that they could provide information on the spot about registration status for the respective address. This would also indicate whether a ballot had been sent to the facility.

Who is eligible to register to vote?

An ongoing issue, more in one county than the other (most likely due to the different types of facilities visited), was whether certain residents *should* be registered to vote or *could* be

registered to vote. During one visit to a facility that has long-term and short-term residents with a wide variety of cognitive functionality, this issue came to a head. The ROV team, that day consisting of two permanent staff members and two temporary workers, plus one EARC researcher, had made an appointment with the Activities Director, who welcomed everyone and suggested they split up into two teams and to go door-to-door to ask the residents whether they would like to register to vote. Some of the residents that were approached did not react at all, others reacted slowly, and others again were fully cognizant and asked specifically for what they needed, including assistance reading the small print on the form. After about one hour, the facility's executive director rounded up the teams, asked them to step into the lobby and then asked everyone to immediately cease their activities and leave. He also asked for all completed voter registration forms to be surrendered to him. After much prompting, he explained that some residents had lost their power of attorney and could not legally sign a voter registration form. When the team asked whether they could simply visit with those that were eligible to participate, he explained that he was legally unable to provide that information because he needed to preserve the privacy of those that were not eligible. After much discussion that included making it clear to him that the deadline to register to vote was only a few days away, the team left after he promised to invite them back shortly once this issue was sorted out. The team did return and was provided with a list of residents per room that 'may want elections services.'

The eligibility issue arose in other facilities when staff members would say things like: "She really should not vote," or "You don't have to ask those guys over there." In one instance, a family member was present in the 2-person room when the ROV team arrived and she opined "Most of the people here should not vote." She later complained to the facility director about the ROV team being present, which led to them being asked to leave.

Frequently, facility staff would ask advice about eligibility, for example: "Is a person with just a little amnesia eligible to vote?" While both ROV teams were well aware that only a court can

decide that a person is not competent to participate in the electoral system³⁴, they were also torn about what to do when being confronted with the mental or physical conditions that some residents were in. Some were barely cognizant and clearly had memory issues. Others were heavily medicated and would nod off in the middle of a conversation. Many residents seemed unable or reluctant to make independent decisions. In each of these challenging situations, the team members had to decide how much time to spend with a resident and how much to encourage or 'push' them to register or continue to complete a form, or whether to simply move on.

In some facilities, staff takes a very hands-off approach to this situation, in others, they seem more opinionated about their clients' ability to participate and fall into gate-keeper roles. In one facility visit, the temporary worker was told by the facility director that “This person really shouldn't be voting.” Even though the temporary worker had observed the person to be lucid and communicative, and the person had filled out the registration form, the temporary worker took the facility director's advice and gave her the registration form.

One of the county teams encountered eligibility questions so frequently, and found it so difficult to deal with them that they are considering only offering assistance to already registered voters in the future. This team mentioned that there is a real need for a brochure or training materials for registrar and facility staff that explains this issue clearly and provides guidance about how to deal with these complicated situations.

³⁴ [California Elections Code Section 2008 \(a\)](#)

Providing information about the election and "I don't know these candidates, should I vote?"

Both teams encountered situations in which they were asked to provide information about the measures or candidates on the ballot. Most frequently, the residents had not received their sample ballot and were completely unaware about what they were going to vote on. In some instances, the sample ballots were found with facility staff who had not distributed them. In other instances, facility staff would greet the ROV teams, a stack of sample ballots in hand, which they had saved until the teams got there. It is unclear whether they would have been delivered to the residents had the teams not been scheduled to visit. There were also some cases in which a resident had received a ballot that was brought with the mail delivered to the previous residence, but there was no sample ballot accompanying it. When the previous residence is not in the same county as the facility, the ROV team will not have the appropriate sample ballot available with the candidates and contests from the respective precinct, and finding information would require a computer with internet access. The teams would direct the resident to use the facility computers to look up the information.

In one visit, the team was asked to read the sample ballot to a group of residents, who then debated the issues. In multiple other visits, both ROV teams were asked to read at least some of the sample ballot or the team members would decide to do it after being asked by voters what or whom they should vote for. Some voters were confused by the candidates on the ballot, making remarks like: "I don't know that person," or "I don't even know what he looks like." Many expressed dismay about not being in their original residence and explained that the issues there were different and more familiar to them than those around the facility, and that they did not know much about the area in which they were living now. They would frequently ask questions like "Do you think I should vote on this [issue]," or "What do you think I should do?" Both ROV teams were extremely careful to not suggest that a resident make a specific choice, and also explained frequently that residents had the right to not vote on any topic or candidate and that they could skip some contests if they choose to. The teams also took great care to continuously refer voters back to the sample ballot and to avoid interpreting issues.

In one facility, the EARC team observed an extreme version of providing information about the issues on the ballot by an Activities Director who “interpreted” and “analyzed” the news to the residents in highly partisan manner during the “coffee chat” activity.

For smaller and special elections, there is generally less information available than for general elections. There is also a lesser chance that a candidate or good-government group might reach out to a facility to inform or register voters. Because there is increasingly less coverage of local affairs in newspapers, and smaller contests are also rarely covered in the local television news, residents have to frequently solely rely on the sample ballots for information. Very few residents use the internet.

Filling out forms and marking ballots

Registration forms have very small print and the questions are frequently misinterpreted by those attempting to fill them out. Most residents were unable to read the forms without their glasses, or magnifying glasses and even with those devices it was difficult for them to focus on the many boxes on the form and figure out the information necessary. Filling out the small boxes was also a challenging task for many. The teams were frequently told by those they were assisting that they had not written anything by hand in a long time. Both teams used roughly the same approach to residents struggling to write and first gave them the opportunity to fill out forms themselves while letting them know that they would be available to help. When asked to assist, they would read the form to the resident and fill in what the resident told them. Many had difficulty signing the form and at times just marked it with an 'X.'

Both teams had pens with a larger diameter grip or with foam grips available and those seemed to work well for some residents. Neither team had any other assistive devices that might have helped. The temporary worker for County 1 explained that she had considered bringing a tablet or a laptop on which the voter registration could be filled out online, but due to the unavailability of wireless internet access in the facilities, she dismissed the idea.

Assisting a resident with filling out a registration form can take a considerable amount of time and both teams seemed to take care to let residents decide whether to request their help with

writing, even though that process could greatly prolong the appointment period. As mentioned above, many residents also do not remember or have access to information that is required to complete registration forms. Many do not recall the last 4 digits of their social security number, for example, and only some facilities have access to that information. Others have to contact the residents' family members to ask for the information. One county team dealt with the non-availability of critical pieces of information in a very pragmatic way: they requested unique identification codes from the Secretary of State to be able to register these voters.

Both teams had more appointments in facilities for registration events than to assist with the ballot. Some of this was due to the fact that some of the new registrations and the subsequent arrival of the ballots for new registrants were fairly close together, and there were scheduling difficulties due to this. The last day to register for any election in California is 15 days before Election Day and it takes the county some time to process last minute voter registrations, assign them to a ballot group and get a ballot into the mail. Both county teams tried to schedule most return visits in the days immediately before the election to make sure that the ballots had in fact arrived.

Most facilities preferred to schedule the ROV times either in the late morning or in the early afternoon, which narrowed the number of facilities that could be visited by one ROV team per county. Another difficulty was presented by Halloween, the Thursday before the Election, when most facilities have special events scheduled and that day was not available for visits. Neither county team offered visits on the weekends, though one of the temps contemplated this briefly when prompted by a researcher.

In some facilities, the staff prepared the residents for the ROV visit by making sure that those that had received a mail ballot had it readily available. In other facilities, the residents frequently could not recall whether they had received a ballot, and if so, how long ago. In many cases, residents had misplaced their ballot and had to go find it, which sometimes took fairly long. In one case, a resident had received two ballots and graciously offered to pass one on to another resident. The ROV team did not take him up on this offer.

For the follow-up visits, the County 2 team brought along privacy booths so that residents could vote without being observed. In situations in which residents were voting in their rooms, the team would wait at the door until they were done and/or needed additional assistance. County 1 did not bring any additional equipment and residents just found a place to fill out their ballot. Most did not seem to care whether or not they were observed. For the Elections teams, the return visits consisted of explaining how to mark the ballot and then assisting with inserting the ballot into the envelop and properly signing it. During the return visits, registration forms were also collected from those who did not turn one in previously.

Both ROV teams adapted to the problem of residents not knowing whether they had received a ballot by printing out lists of the registered voters and their VBM status in each facility. They could not ascertain whether a resident who was not registered at that address had been mailed a ballot because the lists only contained voters registered at the facility address. In a couple of instances observed, the team leader called the elections office to ask a colleague to look up a voter's status. In both counties there were instances in which someone from the ROV's office delivered replacement ballots to residents that could not locate theirs by the scheduled visit.

Neither team had accessible tabulating or non-tabulating ballot marking devices available for voting such as the AutoMARK or the Hart eSLATE³⁵. One of the team leaders explained that she simply ran out of time due to starting this project relatively late, and the device used in her county could not have been set up in time for this election. She is considering whether this can be deployed in the future. The other team leader explained that bringing their accessible device would have meant that the residents were 'early voting' and that this is not permitted in California.

All the residents in the facilities were voting mail ballots and many of them were picked up by the ROV teams, even after the appointment days, if residents had not been able to complete their

³⁵ [see the California Secretary of State's page of Voting Systems and accessible devices used by counties](#)

ballots that day and it was too late to mail them. In other cases, the ROV team told facility staff where the nearest polling place was located and instructed them to drop off ballots there on Election Day.

SUMMARY AND CONCLUSION

The implementation of the model outreach project evolved slightly differently in each of the two counties as they adapted to the challenges they encountered. The first county, for example, received only one response to the original letter that was sent out to facilities, and instructed the temporary worker (with prompting from EARC research staff) to make follow up phone calls. The second county received ten responses to their letter, with eight facilities expressing interest in being visited and two advising that their residents were “not mentally cognitive.” Because those eight facilities were sufficient for this pilot project, they did not contact additional ones.

The two county teams encountered very different facilities in terms of the care the residents require. The County 1 team visited nineteen facilities total and five received a return visit to assist residents with their ballots. Most facilities were large, with eight of them having well over one-hundred residents, and many were also part of a corporate chain of residential facilities. Most of the facilities visited were designed for the elderly and offered assisted living, though some had residents receiving advanced care. One facility had short term residents undergoing rehabilitation, and longer term residents with cognitive disabilities. The temporary worker estimates that she spent almost a quarter of her total work time trying to contact facilities and scheduling visits. She spent over twenty-six hours on site and estimates that she spoke to over four hundred people. In total, there were eighty-four voters registered through this effort, though not all by the temporary worker herself and not all during visits. Some facilities appear to have registered voters after being contacted about this project even though no in-person outreach was conducted. There are no data available about how many of these registrants cast a ballot, how many of them were new registrants or simply changed their addresses.

The County 2 team visited five facilities total and each was visited at least twice. The difference in the number of facilities visited as compared to the other county is due to the fact that this county got a later start and because of time constraints was not able to schedule more visits. The project leader, i.e. the permanent ROV staff, did not just supervise the outreach but took the leading role in it, as compared to County 1 where the temporary staff had a more active role.

Because career staff has other responsibilities, she had to juggle this additional project within her regular work load. The facilities visited in this county were quite different from those visited in County 1 in that most of them catered to people with disabilities that required a high level of care and assistance. The visits were overall more involved, longer and generally more difficult due to the wide range of situations encountered. Twenty-three voters were registered during the visits, but many more changed their addresses and received information about the process. Registration forms were also left for those that were unavailable during the visits and some of them likely filled them out and mailed them.

This ROV team received a lot of questions regarding eligibility and ability to vote about specific residents and many inquiries were quite esoteric. There is no training program that can adequately prepare a temporary worker in a short amount of time to handle this variety of questions and situations that sometimes left even career staff struggling for answers. For example, in one facility, a young, recently disabled quadriplegic person had just turned eighteen and was excited to register and vote for the first time. This person was unable to sign or mark the registration form and the county team was at a loss about what to do, in particular since the resident had not yet received a signature stamp. After consulting with colleagues in the county and the Secretary of State's office, they were unable to find a solution to this problem and the resident was not able to participate in this election. The California Elections Code does not address this issue specifically,³⁶ however, researchers discovered later after being told about this incident that the Federal National Voter Registration Form which is accepted in all states, includes a provision for those that are unable to sign. The directions explain that "If the applicant is unable to sign, put in Box D the name, address and telephone number (optional) of the person who helped the applicant."³⁷ It is clear that there is a learning curve, and both ROV

³⁶ [California Elections Code Section 354.5](#)

³⁷ See here for the [National Mail Voter Registration Form](#)

teams became more comfortable, better prepared and better informed as the project progressed and they had a better idea of what to expect during visits.

The original proposal had envisioned that temporary workers would carry out a majority of the work so that the career staff would not be unduly taxed by the implementation of this project. In one county, the temporary worker seemed to have carried more of the burden of the outreach than in the other, though there were only few processes she could complete on her own and without assistance by Elections office staff. In that county, the assistance that was requested and provided seemed more basic which is why the temporary staffing may have worked better. In the other county, when the project leader was asked whether the temporary workers were helpful at all, she replied that they were most helpful with passing out registration forms and picking them up, and assisting people generally with filling them out. Because there were many non-routine situations, the temporary workers here were less helpful outside of providing basic tasks.

Combining both, the interviews from all nine counties and the observations conducted in residential care facilities by the research team as well as those reported to us by the ROV teams, below is a summary of findings regarding facilities:

- At most facilities it is up to the Activities Coordinator to reach out to the residents and to plan an event regarding voting
- Facilities that had a polling place in the facility on Election Day were less likely to help residents with other elections tasks such as asking if they needed accommodations, change of address or registration forms, etc. These facilities tended to respond, “We have a polling place here” to most of our questions about accommodation and outreach
- Some Activities Directors did not take an active role in election activities; they felt it was the families' duty and left it to them to get the ballots and assist the residents
- If the facility had a large percent of patients with dementia or Alzheimer's – the Activities Director would usually say the facility does not help residents because they

were not capable of voting – in these cases, facility staff were deciding that an entire facility population was not fit to vote

- When asked how they determined who was fit to vote, very few responded they had received a list from the ROV (presumably meaning that the list included registered voters) or a court
- Many facilities did not actively ask residents if they were interested in voting or registering, the residents had to ask themselves
- Activities Directors who took an active role often wished they received more information from ROV and found packets with registration forms and information to be helpful
- Many facilities wished the Elections Office would help and inform them more about deadlines and forms needed
- Resident Morale:
 - Some Activities Directors pointed out that many of the residents were no longer interested in voting because they were indifferent to the candidates or the issues or had grown disillusioned by the process
 - The facilities that had energetic Activities Directors and/or active residents said election time was very exciting and some residents would even call to outside organizations come and speak about the issues – additionally the “I Voted” sticker is extremely important and has a strong positive significance for this population
- Many Activities Directors said that families have a strong influence over residents and would at times take the ballots and fill them as they said they believe their family member would have
- It can be physically difficult to transport and move residents to a polling place.

- Facility staff have minimal knowledge of technologies used for accommodations
- Some staff members explained that facility outreach programs were exceptionally helpful in terms of increasing both registration and voter participation; however, more ROV staff would improve the efficiency of any outreach initiatives.
- Almost every facility contact that research staff interviewed after the ROV visits had concluded expressed gratitude for the visits, and many commented on how excited their residents were about receiving elections information and assistance.

Interviews with the ROV teams resulted in the following recommendations for the future:

- The initial letter to the facilities should include detailed information on who is eligible to vote. Add a definition of how the Election Code or law defines a person being cognitive and able to vote.
- Start the outreach at least five months before the next election to allow for better scheduling and more appointments.
- To streamline the process, request that the presentations in facilities are in group format, or if they will be room by room, have a list of eligible residents that will be visited and their room numbers, in advance.
- Organize an extra visit with the facility Director and Activities Coordinator prior to scheduling an event to explain the project, answer their questions on procedures, who can vote, how to vote and how the event will flow. At the same time, provide registration training to the facility staff in order for them to help future residents.
- Allow time between the first visit and the second visit to allow extra time for the vote by mail ballots to arrive to the voter due to facility's internal mail management.

- Have a video recorded with information about how to vote by mail and the provision of special needs services. A copy could be provided to the facilities for their use during elections seasons.
- Have an audio version of the sample ballot available for each election, for each measure and candidate.
- Schedule more time than estimated to be able to serve all clients and to not rush those that write slowly or have difficulties comprehending information quickly
- Have a flashlight available; many rooms are dimly lit and there is not enough light to read the registration forms. Also bring extra sample ballots.
- Bring a list of who is registered to vote at the facility address; perhaps provide this list in advance to the facility staff so they can alert residents that are not registered to attend the event.

When this project started, one of the implementation counties was somewhat reluctant about participating and the potential success of this project. This county has a very high voter registration rate and generally does not do much hands-on voter outreach or registration. This project was a complete departure from how they usually view their work but rather quickly, this county ROV team realized that this was this a very important program to implement, and that there was a real need being addressed. The project leader and the temporary worker both thoroughly enjoyed providing outreach services to this population, which in their case predominantly included the elderly, frequently in assisted living facilities. This county received some very good feedback from the facilities and reported that they will try to find funding to keep this outreach program going.

The second county entered with more enthusiasm but was left with many questions about whether and how to continue to provide the best possible services to this population. It was clear here also that there is a vulnerable population group that is at risk of becoming or essentially remaining disenfranchised due to lack of access to the electoral system. This team was

confronted with family members that opined that facility residents should not vote, and staff who questioned the services they could or should provide to this population. They were even asked to leave one facility once after a family member complained to the facility director that election outreach services should not be offered at this facility. While this team's work was also highly appreciated by the residents and most of the facility staff, the environments in which they worked were more stressful, the visits took longer and the questions were more difficult.

It was disheartening for the researchers to observe the push-back this team dealt with. Gate-keeping is very much present in many facilities. We believe that if outreach teams are fully trained and are certain about the laws of eligibility and access, it will be easier for them to deflect this behavior and they will be able to better serve these populations.

For outreach teams that go into facilities with people that have more severe types of disabilities, there is a real need to develop and provide training materials, perhaps videos, about how to assess and deal with questions about eligibility. What should also be addressed is how to deal with voters that are eligible but not able, perhaps just temporarily, to participate. Those materials should also be shared with facility staff. There is also a need for training procedures for temporary staff about, for example, how to respond to facility staff asking for completed registration forms because that staff does not believe the residents should vote.

More generally, it was interesting to note that even without scheduling registration events and visiting facilities, the simple act of contacting facilities about providing election services seemed to have resulted in facility staff asking for information, registration forms and beginning a dialogue with the county teams. Some voters seemed to have become registered just because that contact was made. The sample ballot in the model county also included a note that: "outreach is available". This note alone has encouraged voters to engage with the ROV office on behalf of those that needed assistance. Just alerting caregivers to the issue of elections for their populations seems to have a positive effect on increasing services.

If there is a desire to offer election services to persons living in residential care facilities, then an effort must be made to provide the Elections offices who consider making such services

available with the necessary tools to implement these projects without having to design them from scratch. Every elections office in the United States makes decisions about what services to provide to which populations. Because resources are scarce, there will always be some populations that are left out. Lowering the bar and making it easier to get started on an outreach program to people in residential care facilities will make it more likely that it may be implemented.

Appendix 1

Interview Questionnaire For Facilities

1. How many residents does your facility have? Do you have any sense of how many of your residents are registered to vote? How many actually vote?
2. How do residents get registered at your facilities? At admittance? Before elections? Does the county/family/friends/staff help? Is assistance individual or in groups?
3. Do any of your residents vote at a polling place? Mostly VBM? Is there a polling place at facility?
4. For those who receive VBM ballots, do you encourage them to fill the ballot? Or is it up to family/friends or county office to follow up?
5. Can residents get assistance with ballot if they need it?
6. How are your residents' VBM ballots submitted? Are they collected by your facility, does the elections office collect them, or do residents mail it themselves or go to a polling place?
7. Does your facility communicate with the people at the county elections office? If so, what for? (questions, assistance, every election, for events, or to request candidate visits, etc)
8. What would be the ideal procedure to ensure that all eligible and capable residents who wish to vote can do so? (More assistance, assistive technologies, training of staff, county elections cooperation, polling place at facility)
9. Does the ROV provide your residents with technology assistance if needed? Do residents have to ask first? Are machines or translations available? (Refer to county machines)
10. Do you have an idea of how many of your residents are eligible or under Medicare/Medi-Cal?

Appendix 2

Table 1: Interview Data in the 6 Counties Surveyed

INTERVIEW STATUS	EL DORADO	ORANGE	RIVERSIDE	SAN JOAQUIN	SANTA BARBARA	SHASTA
ELIGIBLE	75%	85%	74%	95%	100%	100%
OF ELIGIBLE, COMPLETED INTERVIEWS	22%	37%	41%	61%	35%	63%
OF ELIGIBLE, DECLINED TO PARTICIPATE	33%	12%	14%	14%	22%	13%
AVERAGE # OF RESIDENTS	56	104	77	56	87	92
response rate	2/2	30/32	16/17	19/22	8/8	5/5
AVERAGE % OF REGISTERED RESIDENTS	25%	60%	59%	49%	54%	26%
response rate	1/2	16/32	7/17	15/22	4/8	3/5
AVERAGE % OF RESIDENTS WHO VOTE	3%	42%	44%	44%	38%	20%
response rate	1/2	23/32	12/17	16/22	3/8	5/5
HOW DO RESIDENTS GET REGISTERED?	EL DORADO	ORANGE	RIVERSIDE	SAN JOAQUIN	SANTA BARBARA	SHASTA
1) # Up to them & families	1	14	11	11	3	2
2) # at admittance by facility	1	11	4	5	0	2
3) # before elections by facility	0	3	2	2	2	1
4) # at admittance by LEO	0	1	0	0	0	0
5) # before elections by LEO	0	4	3	0	1	0
response rate	2/2	30/32	17/17	17/22	6/8	4/5
Most common answer	answers 1, 2	answer 1	answer 1	answer 1	answer 1	answers 1, 2
DO ANY RESIDENTS VOTE AT POLLS?	EL DORADO	ORANGE	RIVERSIDE	SAN JOAQUIN	SANTA BARBARA	SHASTA
# yes	1	24	12	8	3	2
# no	1	4	5	10	1	1
^ response rate	2/2	28/32	17/17	18/22	4/8	3/5
Most common answer	NA	yes	yes	no	yes	yes

DO MOST VBM OR GO TO POLLS?	EL DORADO	ORANGE	RIVERSIDE	SAN JOAQUIN	SANTA BARBARA	SHASTA
# most VBM	1	15	14	14	4	4
# most go to polls	0	9	3	4	1	1
^ response rate	1/2	24/32	17/17	18/22	5/8	5/5
Most common answer	VBM	VBM	VBM	VBM	VBM	VBM
IS THERE A POLLING PLACE AT FACILITY?	EL DORADO	ORANGE	RIVERSIDE	SAN JOAQUIN	SANTA BARBARA	SHASTA
# yes	0	10	3	3	1	0
# no	2	21	14	16	5	5
^ response rate	2/2	31/32	17/17	19/22	6/8	5/5
Most common answer	no	no	no	no	no	no
DOES FACILITY ENCOURAGE VOTERS TO FILL OUT BALLOT?	EL DORADO	ORANGE	RIVERSIDE	SAN JOAQUIN	SANTA BARBARA	SHASTA
# yes	0	7	0	1	1	0
# no	0	23	10	2	5	1
^ response rate	0/2	30/32	10/17	3/22	6/8	1/5
Most common answer	NA	no	no	no	no	no
CAN RESIDENTS GET ASSISTANCE WITH THEIR BALLOTS IF THEY NEED IT?	EL DORADO	ORANGE	RIVERSIDE	SAN JOAQUIN	SANTA BARBARA	SHASTA
# yes	1	25	17	15	5	5
# no	1	4	0	3	1	0
^ response rate	2/2	29/32	17/17	18/22	6/8	5/5
Most common answer	NA	yes	yes	yes	yes	yes
HOW ARE BALLOTS SUBMITTED?	EL DORADO	ORANGE	RIVERSIDE	SAN JOAQUIN	SANTA BARBARA	SHASTA
# mailed by residents	0	18	8	8	1	0
# facility collects/has mailing system	1	11	9	8	5	2
^ response rate	1/2	29/32	17/17	16/22	6/8	2/5
Most common answer	facility	selves	facility	NA	facility	facility
DOES YOUR FACILITY COMMUNICATE WITH PEOPLE AT THE LEO?	EL DORADO	ORANGE	RIVERSIDE	SAN JOAQUIN	SANTA BARBARA	SHASTA
1) # Yes, because they are a polling place	0	7	3	2	0	0
2) # Yes, to request an outreach	0	2	1	0	0	0

session						
3) # Yes, to request registration or change of address forms	0	2	6	6	1	1
4) # Yes, with resident questions	0	3	4	4	1	0
5) # Yes, for other unspecified reason	0	1	0	0	0	1
6) # No	1	16	5	7	5	2
7) # Total Yes	0	15	14	12	2	2
^response rate	1/2	30/32	17/17	16/22	6/8	3/5
Most common answer	no	no	yes	yes	no	no
Of those who said yes, most common answer	NA	1	3	3	3,4	3,5
IDEAL PROCEDURE FOR RESIDENT VOTING	EL DORADO	ORANGE	RIVERSIDE	SAN JOAQUIN	SANTA BARBARA	SHASTA
1) # Nothing/what is currently being done	0	12	9	9	3	1
2) # LEO: Have a polling place at facility	0	3	2	0	0	0
3) # LEO: More registration help	0	5	0	1	1	1
4) # LEO: Measure and ballot explanation	0	12	5	1	1	1
5) # LEO: More voting assistance	0	7	3	0	1	1
6) # Candidate visits	0	4	0	1	0	0
7) # LEO: More assistive technologies	1	1	1	0	0	0
8) # Facility: More encouragement/reminders	0	2	3	0	0	0
9) # other	1	0	3	1	0	1
^ response rate	1/2	31/32	15/17	12/22	6/8	3/5
Most common answer	7,9	1,4	1	1	1	1,3,4,5,9
DOES THE ROV PROVIDE RESIDENTS WITH TECH ASSISTANCE IF NEEDED?	EL DORADO	ORANGE	RIVERSIDE	SAN JOAQUIN	SANTA BARBARA	SHASTA
# yes	0	4	1	0	2	0
# no	0	13	1	0	1	0
# unknown	0	13	6	3	2	1
^ response rate	0/2	30/32	8/17	3/22	5/8	1/5
Most common answer	NA	no/unknown	unknown	unknown	yes/unknown	unknown

HOW MANY RESIDENTS ELIGIBLE/UNDER MEDICARE OR MEDI-CAL?	EL DORADO	ORANGE	RIVERSIDE	SAN JOAQUIN	SANTA BARBARA	SHASTA
# none	0	10	9	2	2	0
# some	0	3	0	0	0	0
# majority	0	4	0	1	2	1
^ response rate	0/2	17/32	9/17	3/17	4/8	1/5
Most common answer	NA	none	none	none	none/majority	majority