National Association of Area Agencies on Aging

Innovations & Achievement AWARDS

2016

Recognizing INNOVATIVE PROGRAMS and SUCCESSFUL PRACTICES of Area Agencies on Aging and Title VI Native American Aging Programs
About n4a

The National Association of Area Agencies on Aging (n4a) is the leading voice on aging issues for the 622 Area Agencies on Aging (AAAs) across the country and a champion in the nation's capital for the 256 Title VI Native American aging programs. n4a's primary mission is to build the capacity of our members so they can help older adults and people with disabilities live with dignity and choices in their homes and communities for as long as possible.

For more information about n4a, AAAs or Title VI programs, visit www.n4a.org.

n4a’s Aging Innovations and Achievement Awards staff:

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About CST

Critical Signal Technologies is a Health Services Company committed to offering innovative, cost-effective patient monitoring strategies for homes, hospitals and senior independent facilities in the U.S. and abroad. CST your Link to Life programs dramatically reduce unnecessary hospital admissions and allow individuals to live independently longer without compromising their dignity by providing real patient centered care. www.criticalsignaltechnologies.com.

CST-LTL Leadership:

Jeffery S. Prough, President and CEO
Heather Sellar, Vice President of Managed Care and Independent Living
Every year, the National Association of Area Agencies on Aging (n4a) proudly recognizes the innovative programs and best practices of our members through the n4a Aging Innovations and Achievement (AIA) Awards program.

It is thanks to our ongoing partnership with Critical Signal Technologies—your Link to Life (CST-LTL)—long-time sponsors of the AIA awards program—that we have this opportunity to honor and showcase the initiatives of Area Agencies on Aging (AAAs) and Title VI Native American aging programs across the country.

We salute all those who have enhanced the prestige of this awards program by sharing their initiatives with their peers in the Aging Network. This sharing of cutting-edge concepts and best practices helps inspire others, seed replication and ultimately, boost the capacity and success of all agencies.

In fact, n4a recognizes all our members for their tireless efforts to creatively use limited resources to develop vital services and supports for older adults, their caregivers and people with disabilities in communities nationwide. We hope this book supports your agencies’ program development efforts and builds connections with your colleagues.

The awards highlight successful programs that demonstrate sound management practices that are replicable by others in the Aging Network. They exemplify both traditional and new strategies in a range of categories.

Aging Innovations Awards honor the most innovative programs among all nominations received, and Aging Achievement Awards recognize programs that meet all of the award eligibility criteria as a contemporary, effective and replicable program.

Annually, the awards are presented at the n4a Conference & Tradeshow. This year at a luncheon in San Diego, CA, 16 programs were honored with engraved Aging Innovations Awards and 30 received Aging Achievement Awards with a certificate of recognition. In addition, through the generous support of CST, the top-ranking programs received monetary awards.
To qualify for an award, programs must be between one to five years in operation, receive minimal assistance from outside experts and demonstrate effective approaches in either offering new services or improving existing services. Award criteria include demonstration of measurable results, e.g., cost savings, improved client service and enhanced staff productivity. The AIA awards are open to n4a members only.

Highlights of all past Aging Innovations Award recipients are available in the n4a member-only clearinghouse of best practices at www.n4a.org/bestpractices.

We hope that these awarding-winning programs will inspire your efforts as you address current challenges, seize opportunities and implement solutions in your community. And remember, plan to share your innovations with us next year!

“CST is a long-time supporter of n4a and a company committed to this association. That can be measured not only by significant sponsorship investment we have made consistently for the past nine years, but by also by helping shape the n4a Aging Innovations and Achievement Awards program. The program was developed to inspire the many talented people who comprise n4a’s membership. While doing all this we have encouraged the members of n4a to give us the opportunity to share the many innovative ways we can help you… especially as you travel into the teeth of reform. I cannot thank enough the members who have allowed us to share your ideas and serve you as partners. The entire CST team is here to help and we look forward to speaking to the all n4a members in the future.”

Jeffery S. Prough
President and CEO
CST-LTL
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Aging Innovations Awards

2016

Aging Innovations Awards
After MetroWest Health Foundation identified the need for a single online access point for caregiving information, it provided planning and implementation grants to support BayPath’s efforts to make the site a reality.

CareGivingMetroWest.org provides family caregivers in 25 MetroWest Boston communities real-time information and interaction, including a clickable map that allows users to view location-specific resource listings, an interactive glossary of caregiving terms, a blog, an assessment tool and a “Wellness Wall” offering tips and advice.

**Budget:**
BayPath hired a program manager to create, maintain, expand and promote the site. This work is supported through a series of grants from the MetroWest Health Foundation, in-kind contributions from BayPath Elder Services, Inc. and corporate sponsorships. A planning grant of $60,000, implementation grant of $160,000, and continuation grants of $60,000 and $45,000 have supported the project.

**Accomplishments:**
In the web portal’s first two years, 23,573 unique users have registered 86,214 page views. The users average 3.05 pages viewed per session with an average stay of 2 minutes, 44 seconds per visit. The site launched with more than 100 pages of content and resources and has increased continuously since then. The accompanying Facebook page has 1,446 followers and the monthly e-newsletter is sent to nearly 1,000 contacts.

**Replicability:**
CaregivingMetroWest.org is replicable in a variety of scales for other geographical areas or target audiences. BayPath used foundation funding to create the website; however, if such funds aren’t available, features such as resource lists, a Wellness Wall, and other elements can be added to an existing agency website or Facebook page. BayPath is willing to provide technical assistance.
Volunteer Caregiver Respite Program
Area Office on Aging of Northwestern Ohio, Inc.

The Volunteer Caregiver Respite Program helps family members caring for frail, aging loved ones alleviate stress by providing them a temporary break. Each week, a Retired Senior Volunteer Program member visits with the aging loved one at home for two to four hours so the caregiver has some time off. The new relationships formed benefit the volunteer and care recipient at the same time that the caregiver gets a much-needed break.

The Volunteer Caregiver Respite Program merges two existing programs—the National Family Caregiver Support Program (NFCSP) and the Retired Senior Volunteer Program (RSVP)—to provide evidence-based training through Respite Education and Support Tools (REST) and coordination for caregivers.

Budget:
Costs and overhead are low, as the program involves a small extension of tasks already being performed by staff. Training for volunteers is subsidized by grant funding. Operating costs are provided by current funding sources. RSVP funds cover supplies, recruitment and training material printing, telephone and computer costs, and volunteer expenses (travel and meal reimbursement, recognition and uniforms). Older Americans Act Title III E funds cover assessment and caregiver/volunteer coordination.

Accomplishments:
Since the program began, 26 volunteers have been trained and placed with care recipients. All volunteers report feeling satisfaction at gaining a friend and helping a caregiver. Caregivers report reduced feelings of stress, better relationships with their care patients and greater satisfaction in their roles as caregivers.

Replicability:
Replication can occur with collaboration between volunteer and caregiver support programs. The volunteer program works to identify volunteers and recommend them for training, while the caregiver support program assesses the caregiver and care recipient and matches them with volunteers. Grants for training available through respite coalitions minimize costs.
COMMUNITY PLANNING & LIVABLE COMMUNITIES

DRCOG’s Boomer Bond
Denver Regional Council of Governments

For the past decade, Denver Regional Council of Governments (DRCOG) has advocated for systemic change in the ways communities plan for and address the needs of the region’s rapidly aging population. In 2011, DRCOG launched Boomer Bond to arm local governments with an assessment tool and resource directory to help older adults remain in their communities and homes longer.

The Boomer Bond Assessment Tool is a comprehensive toolkit through which communities identify local successes in and challenges to supporting healthy and successful aging. The Boomer Bond Resource Directory, which features hundreds of best practices from around the region and country, equips local governments with an online database of age-friendly policies, strategies and tools they can adapt.

Budget:
DRCOG has invested approximately $150,000 in the program since 2011. More than 80 percent of program expenditures occurred during the first two years. The majority of current operating costs (less than $10,000 in 2015) are for personnel and associated overhead.

Accomplishments:
Through a 2015 program evaluation, DRCOG learned that each community using the Assessment Tool was successful in efforts to initiate strategic livable community conversations. Some of the many early outcomes identified include new and revised ordinances, a new older adult community resource center, a redesign of a local government website and increased awareness of older adult issues among law enforcement.

Replicability:
DRCOG has helped other Colorado organizations replicate Boomer Bond and has shared key program elements with regional planning organizations and Area Agencies on Aging from across the country. The resource directory is available online. The assessment tool was specifically designed for the Denver region, but it could be revised for another location with minimal effort.

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ELDER ABUSE PREVENTION

Don’t Get Hooked Scam Prevention Campaign
County of San Diego, Aging & Independence Services

The “Don’t Get Hooked” campaign warns elders of the growing threat of elder financial abuse at a time when half of the cases investigated by Adult Protective Services in the San Diego area have some element of financial abuse. The District Attorney’s Office, Aging & Independence Services and the County Board of Supervisors teamed up to develop prevention materials to educate older adults and their adult children about such scams.

The campaign includes two 30-second educational media spots featuring two victims telling their stories; free “Don’t Get Hooked” scam prevention events hosted by a variety of stakeholders; and educational presentations about the “Don’t Get Hooked” toolkit. The toolkit, which is designed to engage and educate seniors, outlines why older adults are targeted, the most common scams, resources available to prevent scams and where elders should turn if they believe they are scam victims.

Budget:
Campaign costs include media consultation ($33,000), media buys for the commercials ($34,500) and toolkit printing (15,000 copies for $12,500). Costs for staff time to develop materials are not calculated.

Accomplishments:
Since the campaign began, more than 780 seniors have participated in educational presentations. One man learned about the “Don’t Get Hooked” campaign the same day he was told he would receive a $3 million Publisher’s Clearinghouse check as soon as he sent several thousand dollars to pay taxes on his winnings. After confirming with Publisher’s Clearinghouse he wasn’t a winner, he called Aging & Independence Services to say the campaign saved him from financial ruin.

Replicability:
Although this campaign is based on local victim scenarios, it is applicable to other areas. The toolkit is easily replicable.

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PROTECT: A Model Program for Helping Depressed Elder Abuse Victims
New York City Department for the Aging

Providing Options to Elderly Clients Together (PROTECT) seeks to identify and treat depressed elder abuse victims in the New York City area. The New York City Department for the Aging (DFTA) partnered with Cornell Weill Medical College to develop the evidence-based program, which features staff training and education on mental health, screening of clients for depression and anxiety and treatment of depressed abuse victims by a mental health professional.

When elder abuse workers identify a client suffering from major depression or anxiety, they suggest a meeting with “a colleague who can help you.” Clients who agree then receive standard elder abuse services and a brief psychotherapist intervention that focuses on understanding how depression and anxiety can affect their well-being. They also learn problem-solving strategies to resolve their abuse situation.

Budget:
The program receives $206,000 in grant funding annually to cover training and support for a mental health professional from Cornell Weill Medical School, a part-time data coordinator and a research assistant. Other in-kind resources are provided by DFTA.

Accomplishments:
Use of standardized depression screening tools has become accepted practice. Workers feel more comfortable talking about depression, suicide and anxiety with clients. As a result of the program, victims are more likely to take advantage of offered therapy, report higher rates of satisfaction and report that their victimization is lessening. Clients who have participated in the program have seen significant decreases in depression and anxiety.

Replicability:
DFTA encourages replication. PROTECT recently expanded into the community and is ensuring sustainability through linkage with a licensed, third-party mental health provider who will bill for services.
REDFlag Elder Abuse Awareness Toolkit
Central Plains Area Agency on Aging

To raise awareness of elder abuse in an innovative, attention-grabbing way, Central Plains Area Agency on Aging (CPAAA) developed a traveling elder abuse awareness toolkit for use by aging service providers working with seniors in Sedgwick County, Kansas. REDFlag (which stands for Recognizing Elders in Danger) promotes awareness of the red flags of elder abuse and recognition of elders in danger of abuse, neglect and exploitation.

From March to August 2014, three toolkits were available for use by professionals and representatives of locations where seniors gather. Each toolkit included posters, sample communications materials, the “When Help Was There: Four Stories of Elder Abuse” DVD, six activity ideas, brochures, flyers and resource cards. In addition, the graphic poster images were used to develop a television PSA. The local Medical Society also shared the poster images, PSA and REDFlag flyer electronically with 1,000 physicians.

**Budget:**
The $4,729 cost of the toolkits (funded through a Prevention of Elder Abuse Neglect and Exploitation grant and a small amount of agency funding) included 40 hours of staff time ($1,378), printing ($400), poster design and production ($1,600), and supplies for the displays and DVDs ($1,351).

**Accomplishments:**
Participants reported being able to recognize the signs and symptoms of elder abuse and knowing how to report abuse. The project also resulted in notable partnerships between CPAAA, the Medical Society and FOX TV, as well as expanded visibility of elder abuse awareness in the community.

**Replicability:**
Most AAAs have access to research/statistics related to elder abuse. Required funds needed for this project are low and some options to pursue funding from State Units on Aging or health foundations may be available.

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Senior Whole Health (SWH), a managed care program for older adults in Massachusetts, recognized that members with multiple chronic conditions could benefit from self-management programs to reduce readmissions and overall medical costs. SWH “bought it rather than built it” by partnering with the Elder Services of the Merrimack Valley’s Healthy Living Center of Excellence (HLCE), which has a centralized statewide infrastructure for program delivery.

This statewide contract is the first of its kind. SWH reimburses HLCE for every participant who enrolls and completes an evidence-based program such as Chronic Disease Self-Management or Matter of Balance.

**Budget:**
Using existing HLCE infrastructure, the SWH program costs $50,000 per year, which includes implementation, management, materials, personnel and administration for 100 program participants. SWH reimburses HLCE an established rate per participant, which covers program costs, outreach and transportation.

**Accomplishments:**
To successfully reach goals for member participation and completion, the referral process includes personalized outreach via letters and phone calls. Members who miss workshops are contacted to assess barriers to ongoing attendance. The completion rate has exceeded the national standard by almost 10 percent.

**Replicability:**
HLCE is currently replicating this model with additional managed care plans in Massachusetts and is providing technical assistance to other Area Agencies on Aging to assist with replication. It is critical to create a centralized hub for referrals and to start with evidence-based programs that are readily available in the Aging Network. To maximize participation, hold workshops in areas where most members live. The unit rate should be inclusive of the upfront work required to get members into programs.
You Can, Live Well Virginia! Adapted Chronic Disease Self-Management for Elder Prisoners
Senior Connections, The Capital Area Agency on Aging

Senior Connections has taken Stanford University’s renowned evidence-based Chronic Disease Self-Management Program (CDSMP) behind prison walls in the Greater Richmond region to address the needs of Virginia’s rapidly increasing aging population. This is the first time CDSMP has been implemented inside a prison, offering the opportunity for Virginia inmates to pursue a healthier lifestyle even while incarcerated.

The program, called “You Can, Live Well Virginia!” was proposed by Senior Connections and embraced by Virginia Department of Corrections (DOC) officials beginning in 2013. Pilot inmates adapted to it so well that Virginia’s DOC insisted on continuing the effort in other prisons after the pilot prison site closed permanently. The program teaches inmates chronic disease self-management strategies and emphasizes weight management, healthy eating, physical activity, rational decision-making, relaxation and more.

**Budget:**
Program expenses for programs at two prisons include salary ($22,000), travel ($1,000), equipment ($100) and participant supplies ($1,000). The program receives budgetary support from the Virginia Aging and Rehabilitation Services Department, small donations and grants, and in-kind contributions. Statewide, the CDSMP will be maintained via a formally adopted program sustainability plan.

**Accomplishments:**
The program has positive effects for the 100 enrollees who have been diagnosed with chronic illness as well as for DOC, taxpayers, the medical system and Virginia communities receiving released inmates. Noticeable positive impacts on attitudes, behaviors and the outlook of program participants have been observed.

**Replicability:**
The federal Administration for Community Living and the National Association of Area Agencies on Aging are conducting a national survey to determine other states’ interest in the program and identify potential federal funding. Program replicators should work with prison staff to identify special inmate constraints and adapt the program delivery modules.
The EZ Fix Program helps seniors and adults with disabilities remain safely in their homes by providing minor home repair, housekeeping, and in-home technology training and services throughout rural Eastern Maine. Initially, Eastern Area Agency on Aging (EAAA) recognized that low-income seniors were struggling to keep their homes repaired and established a volunteer-based program to address these needs. When it became apparent that seniors also faced challenges keeping their homes clean, housekeeping volunteers were recruited. Most recently, the Home Technology Service Program, which offers assistance with computers, phones and other home technologies, was added in response to client requests.

To fund the program beyond the Bangor area, EAAA started a fee-for-service version of the program to assist over-income clients who previously could not participate. This revenue is put back into the program to fund low-income services across more than 13,000 square miles of rural Maine.

**Budget:**
Total annual operating costs of $84,039 include payroll for three coordinators and a number of per diem employees ($61,000), plus mileage, occupancy, materials, communication and administration. Revenue comes from client fees ($15,000), private grants ($62,000), fundraising ($5,000) and in-kind donations ($2,000).

**Accomplishments:**
In the last two years, 1,277 seniors and adults with disabilities have been able to remain in their homes. More than 500 home safety audits have identified and remedied numerous fall hazards. Housekeeping services have reduced incidence of filth-related illnesses. As a result of performance, the program has attracted more than $245,000 in private grant funding.

**Replicability:**
This scalable program is easily replicable by organizations with a strong volunteer base and someone to coordinate activities. However, volunteer recruitment in rural areas can be challenging.
To attract younger seniors to meal programs and address the lack of affordable space for congregate meal sites, San Francisco Department of Aging and Adults Services (DAAS) created Choosing Healthy and Appetizing Meal Plan Solutions for Seniors (CHAMPSS). The congregate meal program model attracts younger seniors by providing meals in a restaurant and offering flexible dining times and a menu of meal options.

DAAS worked with Self-Help for the Elderly to pilot CHAMPSS with a local restaurant interested in serving seniors. This approach eliminates the stigma of eating at a senior center and provides greater access to meal services at times that work for seniors. After enrolling in the program, seniors are issued a CHAMPSS card that staff at the restaurant can swipe to record the meal served and debit the donation. Because they are dining at a restaurant, seniors often invite friends or family to join them, which increases social connection and reduces isolation.

**Budget:**
DAAS cost for CHAMPSS is about $8 per meal, including tax and tip, which is about $1.50 higher than traditional congregate meal program costs.

**Accomplishments:**
CHAMPSS currently operates at two sites that serve an average of about 200 meals per day. To date, 3,500 seniors are enrolled—an increase of more than 170 percent in the second year. Participant demographics show that the program successfully attracts younger seniors, many of whom are participating for the first time.

**Replicability:**
DAAS is willing to share experiences and resources including information on the software vendor used, the template for the restaurant agreement and checklists used by CHAMPSS restaurants. The key to success is finding a restaurant that is accessible and welcoming to seniors.
Ventura County Area Agency on Aging (VCAAA) created Senior Nutrition Program placemats as an educational tool to boost awareness of healthy and affordable food options for low-income older adults. The placemats, which are available in English and Spanish and change monthly, aid seniors at congregate meal sites or who receive home-delivered meals by educating them on affordable, healthy food options.

The placemats feature a recipe approved by VCAAA’s registered dietitian using ingredients purchased at the “99 Cent Store.” Additionally, the placemats showcase YOUR PLATE, which displays the percentage of fruits, grains, vegetables and protein that a senior should consume per meal. The back includes the phone number of a registered dietitian seniors can contact with questions or to set up one-on-one nutritional counseling, as well as tips related to optimal aging, exercise, healthy living, senior scams and community resources.

Budget:
Minimal costs include initial setup and design of the template, a few hours of staff time each month to research recipes and develop content, and placemat printing.

Accomplishments:
VCAAA has experienced a 300 percent increase in seniors wanting one-on-one nutrition counseling, a 10 percent increase in congregate meals provided and a 50 percent increase in requests for nutritional education sessions. Because of increased demand, VCAAA is now offering two unique placemats each month.

Replicability:
Once a template is created, it is easy for staff to create a new placemat. It is particularly important to develop a placemat that reflects the community, its diversity and its needs. Sponsorships could be obtained to offset the cost.
Many older patients leave the hospital malnourished, which can increase the risk of readmission. Simply Delivered to ME was created to test the effect of home-delivered meals on the 30-day rate of readmission at Maine Medical Center (MMC). Upon hospital discharge, participants in the Southern Maine Agency on Aging Community-Based Care Transitions Program (CCTP) and their caregivers were eligible to receive seven meals.

The frozen meals were delivered to patients’ homes within a few days of discharge, and all recipients received a follow-up call near the end of the week to determine if the meals were helpful and to offer the home-delivered meals program to eligible patients.

**Budget:**
Each meal cost $10, including food and additional staff time for delivery and program management. The Agency raised a total of $120,000 in private funds from foundations and a physician health organization to support the project for two and a half years.

**Accomplishments:**
Of the 1,058 MMC patients who received Simply Delivered meals during a 24-month period, the readmission rate was 10.4 percent, which is lower than MMC’s CCTP 30-day readmission rate of 12.3 percent and an improvement over MMC’s baseline (pre-CCTP) 30-day rate of all-cause readmission of 16.6 percent. Follow-up comments indicate that patient and caregiver satisfaction with the meals was high and that the meals contributed to patients’ recovery.

**Replicability:**
This program requires a close relationship with the hospital to ensure meals are offered before a patient is discharged and that meal delivery occurs within a short period of time after discharge.

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Simply Delivered to ME
Southern Maine Agency on Aging
The SNAP-Ed for Seniors Community Engagement Program seeks to improve the likelihood that low-income individuals, including those eligible for the Supplemental Nutrition Assistance Program (SNAP), make healthy food choices and choose physically active lifestyles. County of San Diego, Aging & Independence Services (AIS) combined direct nutrition education with its own policy, system and environment (PSE) intervention. The 14-session curriculum is designed to help seniors identify barriers to accessing healthy food or physical activity and select a project aimed at reducing those barriers.

PSE projects were completed with Hispanic, Guamanian, Filipino and white seniors at each of four low-income congregate meal sites. At the Sons and Daughters of Guam Club, a cookbook with healthy versions of Guamanian recipes was created, published and distributed. At the George Waters National City Nutrition Center site, a new set of rules was adopted for the meal line. At the Elder Multicultural Access and Support Services location, one project involved creating a video-interviewing site to conduct intake for public benefits programs, and another project established a partnership with Feeding America to increase access to healthy food.

**Budget:**
The PSE community engagement project was part of a larger U.S. Department of Agriculture–funded SNAP program. This component cost approximately $60,000 to conduct with four cohorts ($15,000 for each cohort). County general funds covered the cost of production of the Guamanian cookbooks and other supplies.

**Accomplishments:**
The SNAP-Ed program was implemented successfully in 2014-15 with four cohorts of low-income seniors. It continues with a new cohort in 2016.

**Replicability:**
The “PSE for Seniors” manual and 14-session community engagement curriculum is available for use and has been requested by other California counties.
Falls Prevention in Transportation
Mountain Empire Older Citizens

Recognizing the need for the transportation industry to address an increasing population of senior clients, Mountain Empire Older Citizens (MEOC) began a series of trainings in its service areas.

MEOC’s participation in a falls prevention class, which was offered through a partnership with Virginia Commonwealth University (VCU), allowed staff to focus on educating drivers and personal care aides on falls prevention and its impact on service and liability. VCU faculty led six 2.5-hour workshops for 21 MEOC staff members. The sessions included discussion of risk factors, teamwork, interventions, care planning and implementation. The Virginia Geriatric Education Center (VGEC) provided MEOC staff with 24 hours of training on an evidence-based prevention and management of falls program. MEOC now has the ability to implement the program with all employees.

Budget:
The partnership with VCU was cost effective. The cost of preparing and adding this component to existing training materials was minimal. The initial training, a collaboration between MEOC departments and VGEC, was offered to MEOC staff free of charge as part of a federally funded evidence-based falls prevention program.

Accomplishments:
After implementation of this program, falls in MEOC facilities and on buses were reduced 24 percent for the third quarter of 2015 and 40 percent for the fourth quarter. In addition, MEOC worked closely with the National Association of Area Agencies on Aging’s National Center on Senior Transportation to contribute to a falls prevention and transportation safety brochure and webinar program.

Replicability:
This training template can be reproduced and incorporated into existing training programs and adapted for training employees, caregivers and volunteers.

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Choice offers creative solutions to the ongoing challenge of attracting older adults to senior centers by bringing programs, services and increased meal options to five community locations where older adults naturally congregate. Representatives from community-based organizations offer presentations on topics including exercise, nutrition, safety and health insurance.

The Mid-East Area Agency on Aging (MEAAA) worked with a local café and Panera Bread, a national restaurant chain, as catered meal providers. Using a custom website developed by MEAAA, participants can register in advance to attend upcoming programs and select their meal from a menu of healthy options.

**Budget:**
The annual operating cost for five Choice sites is $75,160, which includes the cost for a .25 FTE program coordinator ($10,400), a .10 FTE clerical staff person ($2,600), a .15 FTE program staff person for each site ($24,960), travel ($3,250), meals and delivery ($33,150) and newsletters ($800). Startup costs include $15,000 for software development.

**Accomplishments:**
Since September 2014, 1,000 people have participated in at least one of more than 200 Choice programs. Of those participants, 85 percent are new to MEAAA. A total of 3,189 meals have been served, with an average contribution three times what is collected at senior centers. Surveys reveal that as a result of Choice, 81 percent of participants are more aware of community resources, 43 percent have used new resources, 65 percent are “living a healthier life” and 50 percent are socializing more.

**Replicability:**
Building partnerships and sharing resources with other community-based organizations that serve and reach older adults is essential for replication. MEAAA is currently developing a Choice toolkit to offer guidance and share lessons with AAAs interested in replication.
COVER to COVER: Connecting Older Veterans (Especially Rural) to Community or Veteran Resources

Bear River Area Agency on Aging

Bear River Area Agency on Aging (AAA) led the development of Utah AAAs’ project, COVER to COVER: Connecting Older Veterans (Especially Rural) to Community or Veteran Resources, in which Utah AAAs partnered with the Veterans Health Administration (VHA) Office of Rural Health to train a staff member from each AAA to become experts in VA benefits. Now veterans and their families have a new access point in local communities to learn about and get connected to VA benefits and programs.

Bear River AAA contributed to the project by developing a train-the-trainer program, providing peer mentorship to other veterans specialists and outreach to community partners, and creating training materials and resource guides. Protocols are now in place to screen all agency callers for eligibility for VA resources and assist veterans in applying for benefits. In addition, a grassroots outreach effort identifies older, rural veterans and offers assistance with VA benefits applications.

Budget:
Participating AAAs were funded by the Veterans Health Administration (VHA) Office of Rural Health. Total operating costs for Bear River AAA including staff expenses and travel is $120,000.

Accomplishments:
VHA Office of Rural Health selected the Bear River project as the #1 Promising Practice. To date, Bear River AAA has served 230 unduplicated veterans, 57 percent of whom are 80 years old or older. Of the veterans served, 78 percent reported they were not already connected to the VA. Veterans in Bear River report receiving more than $185,000 in annual VA benefits to purchase health care and other services.

Replicability:
Program replication can be achieved by establishing partnerships and allocating a minimum of one FTE to the project. Currently five Utah AAAs are participating in the program, with dissemination pending to Nevada and Colorado.

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Aging Achievement Awards

2016
CARE TRANSITIONS

HomeMeds (Medication Management) for Homebound Clients
Area Agency on Aging of Tarrant County

In a partnership with the Area Agency on Aging of Tarrant County, Meals on Wheels, Inc. of Tarrant County (MOW) case managers collect medication information in clients’ homes. After inputting this information into the HomeMeds system, Certified Pharmacy Technicians consult with pharmacists and educate clients about potential medication errors, duplications or potential side effects, as well as provide clients with medication lists they can take to medical appointments to reduce preventable hospitalization and emergency room visits.

Budget:
The program’s total annual budget of $136,000 includes software licensing ($2.50 to $3.00 per person); consultant pharmacist fees ($10,900); operations ($112,298); and office expenses ($4,300). Approximate cost per person is $42.50.

Accomplishments:
This program currently serves more than 3,000 homebound individuals each year. In 2015, 90 percent of clients reported using their medication list at doctor’s visits and 92.2 percent had an improvement in the number of days they felt physically or mentally better.

Replicability:
Initial costs are minimal. Adequate timing, proper training and solid partnerships and referral systems are necessary for implementation.

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The Southern Ohio Community Care Transitions Project
Buckeye Hills Area Agency on Aging 8

This Medicare-funded Community-Based Care Transitions Program (CCTP) is a collaborative project involving three Ohio-based Area Agencies on Aging (AAAs) serving a large rural area: Buckeye Hills AAA8, Central Ohio AAA6 and AAA7 in Rio Grande. The program strives to reduce avoidable hospital readmissions and Medicare costs while empowering patients to be engaged in their care.

Budget:
Fiscal year expenses of $1,279,480 included salary, fringe benefits, indirect costs, mileage reimbursements, space, supplies, cell phone and wifi charges, background checks and telephone conferences. Costs do not include support staff time or start-up expenses.

Accomplishments:
Since May 2012, the program has transitioned more than 10,000 patients back into the community. Surveys of participants from enrollment to the end of the program show a significant increase in understanding of their role in and responsibility for their health care. The program currently has a 100 percent patient satisfaction rate.

Replicability:
The project management team is developing a marketable and replicable business model and has begun efforts to create a standardized program for statewide implementation through the Ohio Association of Area Agencies on Aging.

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The Take Charge Program
Elder Options

UF Health Shands Hospital identified 64 patients considered “super utilizers,” who had complex health and social challenges and represented a disproportionate share of hospital readmissions. These patients were enrolled in the Take Charge Program, which provided an intensive Care Transition Intervention with multiple home visits; meals; transportation; assistance accessing community resources, benefits and education programs; and a closer coordinated care model between Elder Options and UF Health Shands Homecare.

**Budget:**
Total funding of $198,600 for six months included $119,040 for enhanced care transition services ($310 per month per patient for 64 patients), $55,080 for meals ($180 per month per patient for 51 patients) and $24,480 for trips ($80 a month for two trips per patient for 51 patients).

**Accomplishments:**
The Take Charge Program reduced readmissions for the first group of super utilizer patients by 31 percent.

**Replicability:**
Replication requires building strong relationships with acute and post-acute care organizations and finding a champion at a local safety net hospital serving medically vulnerable populations.

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The Savvy Caregiver Web Learning Portal offers nearly 40 short videos addressing the concerns of dementia caregivers, plus links to additional resources and information on the Safe Caregiver Training Program. The videos are created for caregivers who cannot leave their homes for programs or support groups. A new video is added each month, with upcoming videos featuring Community Outreach classes such as Tai Chi, interviews with Elder Options partners and personal stories of featured caregivers.

**Budget:**
Annual costs include about 100 hours of staff time for writing and production; $1,000 for studio, production and web technology provided by New Horizons/ITV-Pro (an online computer education firm); minimal advertising and promotional costs; and $42 for the website domain name lease.

**Accomplishments:**
Traffic to the site and video views have increased with the addition of more videos and partner interviews.

**Replicability:**
To save money, a similar project could be implemented using a makeshift studio and YouTube channel. Video production requires staff time, specialized editing software and technical expertise. Marketing the videos to the target audience requires additional time and creativity.

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**CIVIC ENGAGEMENT**

**Loudoun County Community Ambassador Program**
Loudoun County Area Agency on Aging

The Community Ambassador Program trains volunteers on local wellness and safety programs available to seniors so they can increase awareness about services available to seniors. Ambassadors also act as “confidants” to community members, who may be more likely to tell a peer about abuse, neglect or financial exploitation.

**Budget:**
Program costs of $12 per ambassador include training materials, business cards and badges. The Loudoun County Area Agency on Aging provides a healthy lunch during orientation, which costs $16 per person.

**Accomplishments:**
The program has helped the Loudoun County AAA reach an additional 1,800 seniors and has increased the agency’s volunteer base, particularly among male volunteers who have retired from leadership positions. In addition, the program has increased information sharing and communication among agencies throughout the county and has strengthened community relationships.

**Replicability:**
The program is simple and inexpensive to replicate by developing partnerships with local organizations, holding an orientation for volunteers and identifying places where seniors gather.

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**Neighbors for Seniors**
Southern Alabama Regional Council on Aging

Neighbors for Seniors assists older adults and individuals with disabilities who are on a low fixed income with home safety improvements and health-critical home repairs. Southern Alabama Regional Council on Aging (SARCOA) connects clients with groups and individuals who donate time, skills and money to complete the needed home projects.

**Budget:**
All costs for this grassroots program are covered through donations of time and money. Last year, donated funds totaling $9,800 were spent on projects. SARCOA covers staff time required for implementing and overseeing the project.

**Accomplishments:**
In 2015, 35 projects were completed. Projects included installing exterior handrails and shower grab bars, repairing basic plumbing problems, replacing rotting wood and installing wheelchair ramps.

**Replicability:**
This program can be replicated by a staff person willing to organize and promote the program and develop partnerships with local churches, civic organizations, business and individuals.

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Vet to Vet  
Southern Maine Agency on Aging

To help meet the need for companionship among older veterans and veterans with disabilities, the Vet to Vet peer program trains veteran volunteers and matches them with veterans with similar interests and histories. The volunteers visit their fellow veterans at least twice a month, provide needed companionship, and link their fellow veterans to services and benefits.

Budget:
The annual budget of $41,439 includes a half-time staff person ($20,566), travel ($1,200), three trainings ($3,375), volunteer background checks (32 cost $1,040), recruitment materials and postage ($1,500), supplies ($750), volunteer recognition ($675) and indirect costs ($12,333).

Accomplishments:
Since May 2014, 48 volunteers have served 1,863 hours and visited 54 older veterans and veterans with disabilities. With help from volunteers, at least seven veterans obtained VA services/benefits; four received Meals on Wheels; three attend SMAA’s day centers; and seven were referred to SMAA’s respite program and Medicare counseling. Additionally, one volunteer helped launch an investigation into a possible veterans’ scam and one provided rides for fellow veterans.

Replicability:
A Vets to Vets program manual is available. Three potential sites across the country have already requested the manual.

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BRIDGES—Bringing Resources Including Dementia Education to Guide and Educate Stakeholders  
Anne Arundel County Department of Aging and Disabilities

The BRIDGES program provides basic dementia education to a variety of stakeholders, including medical staff, emergency response teams, local businesses and organizations, high school students, police departments, crisis intervention teams and more. The program offers training specific to each target audience.

Accomplishments:
More than 500 family and community members have received Communicating Through Behaviors dementia training and nearly 200 high school students and 100 emergency response staff have received dementia education specific to their needs. Plans are underway to train all 700+ officers in the Anne Arundel County Police Department.

Budget:
Staff costs, including a $14,000 salary for the Special Projects Coordinator, are currently being supported by various programs as in-kind support. Costs for printing and copying materials are covered by sponsorships from local businesses.

Replicability:
Success hinges on creating relationships with agencies and organizations that work with older adult and caregiver populations. Educational materials and discussions should be tailored to meet the specific needs of each group.

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The Kent County Elder Abuse Coalition (KCEAC) is comprised of 75 members, including law enforcement officials, county prosecutors, elder law attorneys, employees from Adult Protective Services, senior services agencies, hospitals and financial institutions. The Coalition meets monthly to identify, advocate for, educate and seek justice for vulnerable older adults in West Michigan who are victims of elder abuse.

**Budget:**
Capital (one-time) costs include website development ($3,000), printing ($300) and a presentation board ($600). Annual operating costs of $14,500 include monthly meeting lunches ($2,700), speaker fees for trainings ($2,000), printing ($300), and personnel and overhead expenses ($9,500).

**Accomplishments:**
In fiscal year 2015, the coalition’s speakers’ bureau made 26 presentations, and the coalition secured grant funding for emergency housing and counseling for victims of elder abuse.

**Replicability:**
Establishing an elder abuse coalition takes six to nine months and requires securing funding, identifying key stakeholders, holding a kickoff event, defining the coalition’s purpose and mission, developing a speaker’s bureau and outreach strategy, setting up regular meetings and creating a website.

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To address elder financial exploitation, the Philadelphia Corporation for Aging (PCA) created a protocol that informs banks of the legalities of reporting elder abuse and sharing customer records. The protocol was developed and disseminated by a national steering committee comprised of National Adult Protective Services Association (NAPSA) Elder Financial Exploitation Advisory Board members and Adult Protective Services (APS) representatives from several states.

**Budget:**
The $25,000 used to develop and implement the program included personnel ($11,000), travel (approximately $5,000), supplies and printing costs ($3,000) and a contract with NAPSA for assistance in developing the protocol ($6,000).

**Accomplishments:**
The protocol was disseminated and remains available on the NAPSA website. It has been promoted at local and national events, via the websites and newsletters of many banks and national organizations, and in a January 2016 webinar with more than 100 participants.

**Replicability:**
State and local APS programs are encouraged to promote the protocol to their local banks. The protocol likely will serve as a template for similar law enforcement protocols in the future.

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In recognition of World Elder Abuse Awareness Day (WEAAD) on June 15, the Area Agency on Aging in Phoenix has implemented a widespread annual elder abuse awareness campaign featuring promotional materials and events including health fairs, workshops and community presentations. The 2016 theme is “Financial Exploitation Usually Isn’t Obvious.”

**Budget:**
Printing posters and educational materials costs about $1,500 per year.

**Accomplishments:**
The 2015 “Respect Prevents Abuse” campaign for the tenth anniversary of WEAAD reached an estimated 19,222 individuals. Ten events were held at different locations, and more than 2,000 pieces of literature were distributed. In addition, an estimated 18,000 moviegoers saw WEAAD slides at Harkins Theatres in the month prior to June 15.

**Replicability:**
Over the past three years, other AAAs have used the annual WEAAD theme and posters for their events. Once the theme and promotional materials are obtained or created, they should be distributed to the local Aging Network.

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When Lutheran Services of Iowa (LSI) needed space to support refugees in the community over age 60 who were transitioning to life in the United States, it partnered with Aging Resources of Central Iowa and Polk County Senior Services to provide monthly bus passes so older adult refugees could use the programs and services at a local senior center. Now the older adults, primarily from Burma, Bhutan, Eritrea, Iraq and Liberia, regularly visit the senior center for meals, activities and connections to various community resources.

**Budget:**
The 50 reduced-fare monthly bus passes cost a total of $14,400 per year. All other costs are part of regular programming for each agency involved.

**Accomplishments:**
In fiscal year 2016, this program provided transportation services to 59 low-income, limited English–speaking, minority individuals. The program has increased use of senior center facilities and the congregate meal program.

**Replicability:**
Collaboration with a social service agency that assists refugees is necessary to determine how the services and facilities available can best be used by the senior refugee population.

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**ETHNIC & CULTURAL DIVERSITY**

**Improving Quality of Life & Care for LGBTQ Elders**
Area Agency on Aging IIIA

To assist LGBTQ elders and their caregivers, Area Agency on Aging IIIA partnered with the Kalamazoo Gay Lesbian Resource Center to develop the “Greater Kalamazoo Area Guide to Long-Term Care Planning, Resources, and Services for the LGBTQ Community” and offer free trainings to Aging Network service providers to promote understanding of LGBTQ elders and their unique care considerations. The Resource Guide and training opportunities were unveiled at a 2013 event featuring the award-winning documentary “Gen Silent.”

**Budget:**
The initial cost of $6,000 included producing the Resource Guide, purchasing the film and training curriculum and holding the kick-off event. The second edition of the guide cost $2,500 for 1,000 copies, plus editing fees. The cost to copy the training manual is $8.50 per person.

**Accomplishments:**
To date, 1,500 copies of the Resource Guide have been distributed. In addition, 100 staff from Aging Network service providers have been trained.

**Replicability:**
Other organizations are welcome to use the Resource Guide and scoring tool for identifying LGBTQ-friendly businesses as a model for their own. The documentary film and training package can be purchased.

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**“The Roadshow”: A Creative and Effective Way to Outreach to the Diverse Aging Population in San Francisco**
San Francisco Department of Aging and Adult Services

The San Francisco Department of Aging and Adult Services funded the development of The Roadshow to introduce residents in neighborhoods with high African-American senior populations to meals programs, senior center activities and more. The Roadshow is conducted by Bayview Hunter’s Point Multi-Purpose Senior Services, Inc.

**Budget:**
Total outreach costs of $8,400 include printing materials, food and other supplies, plus a portion of the outreach coordinator’s time.

**Accomplishments:**
In less than two years, the agency has reached more than 100 seniors and people living with disabilities. Increases in membership at meal sites, community service participation and participation in computer lab classes have all been recorded. The three senior centers in the Western Addition and Bayview Hunter’s Point districts saw a six percent increase in senior participation and a 45 percent increase in participation in nutrition and community services from adults with disabilities.

**Replicability:**
Planned and targeted outreach is vital for replication. The strategy for implementing the Road Show soon will be posted on the SF Connected website (www.sfconnected.org).

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**Chautauqua Health Connects**  
**Chautauqua County Office for the Aging**

Based on the concept of the “medical neighborhood,” Chautauqua Health Connects (CHC) brings together health, social and support services in a cohesive service delivery system designed to improve patient outcomes and support the Patient Centered Medical Home (PCMH). “Neighbors” include hospitals, skilled nursing facilities, primary care, home health, hospice and community-based organizations.

**Budget:**  
The Covisant Provider-Link system used for referrals cost $48,000 per year. Wages and fringe benefits for one Aging & Disability Resource Center (ADRC) staff member cost $25,000. Other costs included Care Transitions Intervention (CTI) coaches trainings.

**Accomplishments:**  
Among the 26 organizations that were connected, more than 15,000 transactions were logged. Referrals to the ADRC and the Chronic Disease Self-Management Program increased 72 percent and 221 percent, respectively. Hospital involvement resulted in improved primary care physician follow-up. CTI was provided to 500 Medicare beneficiaries, decreasing admission rates by 5.5 percent initially.

**Replicability:**  
This program can be replicated by connecting client data systems to local and regional health information exchanges. Associations can begin by partnering with one PCMH and growing connections over time.

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**Diabetes Peer Mentor Program**  
**Kentuckiana Regional Planning and Development Agency**

The Peer Mentor Program pairs experienced members of the community who successfully manage their Type 2 diabetes (the mentors) with older adults who are learning how to manage their Type 2 diabetes (the mentees). Mentors assist mentees in setting and reaching goals, teaching healthy eating and exercise habits, and providing support through visits, phone calls, co-exercise and activities.

**Budget:**  
Costs per participant range from $1,000 to $1,500 depending on use of peer mentor support and exercise physiologist components. Overhead costs include program manager and support staff time, peer mentors, a Diabetes Self-Management Program facilitator and an exercise physiologist. Fitness facility use is donated.

**Accomplishments:**  
After the pilot programs, all mentees reported a physician-verified decrease in their A1C levels. Five out of six reported a better health status from pre-to post-program and increased fruit and vegetable consumption. All reported significant increases in empowerment in taking care of their diabetes.

**Replicability:**  
Replication with limited funding is possible if a volunteer model is used to recruit mentors. The Peer Mentor Program team is developing a formalized mentor training manual and program booklet for mentees.

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Great At Any Age: Powered by Michigan’s Area Agencies on Aging
Area Agencies on Aging Association of Michigan

Although two evidence-based programs (A Matter of Balance and the Diabetes Self-Management Program) existed within Michigan, limited funding meant spotty coverage across the state, leaving many seniors without access. The AAA state association stepped in to change this dynamic, writing a two-year, $5 million grant to build the infrastructure necessary to make the two evidence-based programs accessible to seniors regardless of where they live in Michigan. The successful grant, entitled Great At Any Age, is innovative in its sustainability approach, pursuing donations, private pay, Medicare, Medicaid and private contracts with insurers.

Budget:
The $5 million grant supports a two-year budget with no agency match required. Most of the funding was allocated to the 16 Area Agencies on Aging (AAAs). Funding was also used for partner contracts with the Michigan Hospital Association and Michigan Association of Health Plans, AAAAM costs and a contract for outcome evaluation.

Accomplishments:
A year and a half into the project, the number of senior graduates per program has increased from 400-500 per year for each program to 1,500 the first year and 2,500 the second year.

Replicability:
Replication could occur with a federal government grant, state appropriation, foundation grant, corporate gift or private donation. The staffed AAAAM office was key in pulling together the statewide network.

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My Care, My Plan: Speak Up Sonoma County
Sonoma County Area Agency on Aging

My Care, My Plan: Speak Up Sonoma County (MCMP) is an Advance Care Planning Community Initiative that encourages older adults at greater risk of medical crises to create an advance health care directive. MCMP is guided by a steering committee of representatives from the private, public and nonprofit sectors, with staff support from Sonoma County Area Agency on Aging (SCAAA).

Budget:
First-year personnel costs of $125,000 included salary and benefits for a .75 FTE program manager and .25 FTE staff support. SCAAAs’s in-kind support totaled $25,000. Ongoing annual program support costs total $50,000.

Accomplishments:
In the first 18 months, MCMP reached more than 1,300 residents through 35 events. MCMP reached another 25,000 people through videos on the local PBS station. Since MCMP began working with West County Health Centers (WCHC) in November 2015, WCHC providers have had advance care planning conversations with more than 500 patients.

Replicability:
Resources available include slides and handouts from community education presentations and the “Adoption Guide” created by West County Health Centers (WCHC) for health care providers.

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Reaching Older New Yorkers with Evidence-Based Health Promotion
New York City Department for the Aging

To address the need for more evidence-based (EB) health promotion programming at New York City senior centers and provide an opportunity for professionals age 55+ to serve their communities, the New York City Department for the Aging (DFTA) collaborates with ReServe to train and certify older volunteers to lead EB programs throughout its senior center network.

Budget:
DFTA pays Quality Technical Assistance Center (QTAC) of Albany, an EB training partner, for the training and certification of ReServists. Training and certification costs since the program began in 2014 have totaled $11,400. Costs also include ReServist stipends ($13.50 per hour per person) and ReServe’s administration of the stipends.

Accomplishments:
To date, 27 EB-trained ReServists have been deployed to community sites to lead workshops, with more than 25,000 older people reached through 190 ReServist-led workshops.

Replicability:
Making EB programming more available to seniors requires engagement with older community volunteers who must be trained, certified and given a small stipend for their contributions.

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Senior Dental Day
Area Agency on Aging of Western Michigan

Through a collaboration with a local community college’s dental hygienist program, Area Agency on Aging of Western Michigan (AAAWM) hosts an annual event that provides comprehensive oral health services to low-income older adults who have not seen a dentist in more than two years.

Budget:
The main cost is lunch for 75 volunteers and a one-day insurance rider for the hygienists (about $1,000). Dentists and hygienists volunteer their time. Students receive class credit for participating. A local community college donates the facility and companies donate dental supplies and gifts.

Accomplishments:
The day is considered a success when clients receive a comprehensive oral assessment and dental education. If follow-up care is needed, appointments are scheduled. Clients are also reminded of the $10 cleanings available from the community college dental clinic.

Replicability:
The Senior Dental Day process is fully documented for replication. It works best with the participation of a local dental program. A collaborative Aging Network of providers is essential for recruiting clients, completing forms and providing reminders and transportation.

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HEALTHY AGING

Take Charge of Your Health: Diabetes Self-Management Education and Exercise Program
Central Plains Area Agency on Aging

A combination of Diabetes Self-Management Education/Training (DSME/T) and exercise classes allows Central Plains Area Agency on Aging (CPAAA) to increase clients’ long-term diabetes management and better serve their needs. An on-staff Registered Nurse/Certified Diabetic Educator serves as the Health and Wellness Coordinator for all classes, which are offered at five senior centers and two senior-focused U.S. Department of Housing and Urban Development properties.

Budget:
Total monthly costs include a salary for the Health and Wellness Coordinator ($29.13 per hour for approximately 12 hours a week) and monthly mileage of $332.

Accomplishments:
Participants have shown improvements in blood sugar control, decreases in weight, increases in strength and mobility, and quicker recovery from injuries and falls. Response from doctors has been positive.

Replicability:
For Area Agencies on Aging that oversee a DSME/T program, the exercise component can be replicated using OAA Title III D health promotion and disease prevention funds.

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HOME & COMMUNITY-BASED SERVICES

North Shore Center for Hoarding and Cluttering
North Shore Elder Services

The North Shore Center for Hoarding and Cluttering (NSCHC) is a clinically based program that helps address the growing challenge of hoarding disorder. Elders with severe hoarding problems learn skills and strategies for managing their behavior. This client-centered, multi-disciplinary approach helps reduce risk of eviction and homelessness often associated with hoarding cases.

Budget:
The fiscal year 2016 budget includes salary and related payroll ($73,750), training ($1,500), advertising ($1,500), travel and other reimbursements ($4,150), general and administrative expenses and occupancy ($24,200). Revenue from client fees, agency and landlord payments, and consulting and training fees totals $120,200.

Accomplishments:
Support groups at NSCHC have shown consistent increases in motivation to change based on a standard measurement tool. Groups have an 85 percent retention rate, and the Crisis Case Management system has successfully resolved nine out of the last 10 cases in which elders were at risk of eviction.

Replicability:
North Shore Elder Services is training the trainers to run support groups at other agencies. Many tools and resources have been adopted nationwide and in Australia and Canada.

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San Diego Veterans Independence Services at Any Age
County of San Diego, Aging & Independence Services

Through San Diego Veterans Independence Services at Any Age (SD-VISA), an options counselor assists veterans at risk of nursing home placement in managing a flexible budget to hire personal care aides and purchase items or services to allow them to live safely and independently at home, reducing health care costs and improving quality of life. The program also offers support for veterans who are hiring caregivers by completing background checks and assisting caregivers with timesheets and compensation.

Budget: The current estimated cost of the program is approximately $721,243, which includes the monthly spending plan for each veteran.

Accomplishments: Enrolled veterans collectively received 3,608 more hours of care monthly than prior to the program, and hospital readmissions have decreased 51 percent. Overall, 90 percent of participants are satisfied with the program.

Replicability: This program is a replicable purchased service in which local Veterans Affairs Medical Centers enter into provider arrangements with Area Agencies on Aging and/or Aging & Disability Resource Centers.

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Medicare Medical Nutrition Therapy
Area Agency on Aging 3

People with Medicare Part B who have diabetes or kidney disease or have had a kidney transplant in the past 36 months are eligible to participate in Medical Nutrition Therapy (MNT). During home visits, Registered Dietitians perform a comprehensive nutrition assessment and work with the patient to plan, implement and monitor a nutrition intervention to reduce high rates of obesity and diabetes.

Budget: Startup costs of $1,541 included 40 hours of salary ($1,113), benefits ($115) and software support ($313). Costs in 2015 of $2,021 included salary ($1,674), benefits ($92) and software support ($255).

Accomplishments: The 2015 MNT outcomes survey showed that 95 percent of participants would not have seen a dietitian if the MNT Registered Dietitian had not gone to their home to see them, and 63 percent reported reduced hospital readmission.

Replicability: After assessing the nutrition needs of a community through the local health department, it is necessary to seek out funding streams, such as Medicare Part B.

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**Simple Servings**  
New York City Department for the Aging

The Simple Servings web-based menu application developed by the New York City Department for the Aging (DFTA) replaces a paper-based, time-consuming process for menu cycle planning, analysis, and approval for 270 senior centers and 23 home-delivered meals programs. Nutrition programs can select from a database of more than 1,000 pre-approved recipes, build their menus and submit their menus for electronic approval.

**Budget:**  
The application was built with an $80,000 grant and in-house contributions from DFTA’s IT and Nutrition staff, student interns and the City’s Human Resources Administration IT department. DFTA expects to spend an additional $164,000, plus in-house contributions, to expand Simple Servings.

**Accomplishments:**  
All nutrition service providers are using Simple Servings. DFTA is adding the capability to create menus addressing specific health needs (such as diabetes) and cultural preferences. Without Simple Servings, DFTA estimates that it would have had to hire at least 10 new nutrition staff to meet new city and state requirements for nutritional analysis of each menu submitted by providers.

**Replicability:**  
Replication potential is mainly for large Area Agencies on Aging (AAAs) that are organized similarly to DFTA, although other AAAs may find specific aspects of the application helpful.

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**Growing Old, Living Young: How a Technology Program Helps Rebuild Social Interactions Among Seniors**  
San Francisco Department of Aging and Adult Services

Tutoring offered in more than 55 computer labs at San Francisco Adult Day Centers helps isolated and at-risk seniors and people with disabilities learn how they can use technologies to support their psychosocial and communication needs. Clients receive one-on-one tutoring on accessible computers so they can use programs such as Skype and social media to connect with friends and family. They also have access to easy-to-use devices such as pointers, trackballs and large-type keyboards.

**Budget:**  
Total annual costs of $46,225 include the partial salary for the visions and hearing connector, travel and $7,000 for assistive devices.

**Accomplishments:**  
Since October 2013, 248 seniors and 34 adults with disabilities have received direct training and support from the program. Clients and Adult Day Service staff have received more than 3,300 hours of training and support.

**Replicability:**  
A motivated program lead is needed to connect different organizations or departments. Refurbished computers and peripherals reduce costs.

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**Transportation & Mobility**

**Alamo Call-A-Ride 4 Vets**
AACOG/Alamo and Bexar Area Agencies on Aging

Alamo Call-A-Ride 4 Vets provided on-demand transportation and information for veterans and their spouses in a 13-county area that covered rural and urban communities. Offered through a partnership with the regional Aging and Disability Resource Center (ADRC) and Texas Veterans’ Commission, the program was primarily used by senior veterans who otherwise would be isolated and unable to access health care and other benefits.

**Budget:**
A $300,000 grant covered 18 months of the program. Direct program costs included $192,079 for rides; $88,295 for temporary staffing; and $19,626 for agency overhead costs, duplication, event travel and technology.

**Accomplishments:**
During the program, 3,103 veterans and eligible spouses and family members were provided transportation. More than 5,000 one-way rides were provided. The program helped 12 clients at risk of suicide obtain needed mental health services.

**Replicability:**
Replication is possible by pooling grant resources and partnering with ADRCs, as well as other ride programs.

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**You Name It**

**Northeast Indiana Coalition for Advanced Care Planning**
Aging & In-Home Services of Northeast Indiana, Inc.

A packet created by the Northeast Indiana Coalition for Advance Care Planning offers providers the information necessary to help their patients/clients make informed choices about end-of-life care. The packet, which includes necessary documents and a guide to choices clients need to consider, helps clients establish clear goals and wishes regarding preferred care and treatment.

**Budget:**
A $20,000 local foundation grant covered the coordinator's salary to develop materials included in the packet (which coalition members print at their own cost) and training programs for providers to help them effectively present the packet to clients/patients.

**Accomplishments:**
As of December 2015, 560 providers have been trained and 300 clients/patients have received the packets.

**Replicability:**
This initiative can be combined with national movements such as Respecting Choices or Physician Orders for Life-Sustaining Treatment. Building a coalition that includes elder law attorneys, an ethics specialist, and representatives from area hospitals, emergency services, and home care and hospice organizations is important.

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Aging ACHIEVEMENT Awards
TEACH: Teaching Elders and Adolescents to Communicate in Harmony (Dementia Initiative)
Middle Alabama Area Agency on Aging

Middle Alabama Area Agency on Aging (M4A) piloted a new person-centered, evidence-based intervention that sought to enhance the quality of life of dementia patients while encouraging young people to enter the fields of public health, social work and gerontology. For the TEACH program, students from Southeastern High School were paired with assisted living residents at The Jacobs House to interact and participate in evidence-based activities, including FIT Kits and Music & Memory.

**Budget:**
Annual costs of $9,825 included salary for four staff members ($4,137), staff travel ($1,640), Music & Memory certification ($1,000), iTunes cards ($500), over-the-ear headphones ($200), iPod shuffles ($400), Fitkits ($500), student transportation ($1,248) and student supplies ($200).

**Accomplishments:**
Although there were no statistically significant changes in depression, cognitive ability and activities of daily living scales among older adults, there were observable positive mood changes. Among students, there were statistically significant increases in positive image of older adults. Both students and older adults stated they enjoyed the experience.

**Replicability:**
The TEACH program can be easily replicated by partnering with local high schools and assisted living centers.

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The Interns of Healthy Aging
Alliance for Aging, Inc.

The Interns of Healthy Aging program exposes students in social work, psychology and public health from local universities to the work of the Alliance for Aging’s Healthy Aging unit. Student interns benefit from applying academic theories to real-world settings; older adults benefit from engaging with a younger generation.

**Budget:**
The total operating cost for the most recent fiscal year is $2,400 for mileage reimbursement for students. There are no other costs associated with the program.

**Accomplishments:**
Since the internship program began in 2011, more than 30 interns have been placed. In 2015, student interns provided educational outreach presentations to more than 1,500 older adults, created public announcements that reached more than 55,000 individuals and delivered trainings to more than 200 staff. Interns also assisted more than 500 older adults transitioning from hospital to home and provided support to 22 veterans and their caregivers.

**Replicability:**
Area Agencies on Aging can replicate this program by establishing partnerships with universities. An organization staff person with appropriate academic credentials needs to direct the program.

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Our Product is Our Care Center!

- State-of-the-art Care Center staffed 24/7 with trained, experienced professionals with backgrounds in a wide variety of senior care services including social work
- Individualized Response Plans provide the right care at the right time
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- NOT just for emergencies – offers 24/7 personal assistance such as coordinating doctor’s appointments or transportation, and answering questions about medications or refills
- Customized reporting identifies trends in emergent and non-emergent service requests for earlier intervention
- Carenect is n4a’s member-only private pay program and CST is its Preferred Provider

Your Care Plan Solutions Partner
For more information about n4a, our members and older adults and their caregivers, contact us:

**National Association of Area Agencies on Aging**

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