

HEALTHY AGING IN RURAL TOWNS

STRATEGIES, PROGRAMS, MODELS AND PROJECTS

Housing

Alternative Housing Models

Two very useful documents from the AARP that helped with constructing this section of the list are: [6 Creative Housing Options](#) by Melissa Stanton and [Aging in Place- A Toolkit for Local Governments](#)

1. Village model

Villages are a membership-driven model in which members form a community non-profit through which they coordinate access to vetted services, and provide volunteer services and discounts to members. These organizations are usually run by volunteers and paid staff, and have the end goal to help members age successfully in their home.

Example: [Sharing Active Independent Lives](#), a village operating in the greater Madison, WI area

Additional information:

- [Impact of the Village Model: Results of a National Survey](#)
- [Village to Village Network](#)

2. NORCs

Naturally occurring retirement communities (NORCs) are communities that were not originally designed as retirement communities, but have a high concentration of older adults. The high concentration of older adults allows for community support and economies of scale for delivery of services and programs. In some NORCs, private and public services are provided on-site (NORC supportive services programs).

Additional information:

- Information on [Community-Centered Solutions for Aging at Home](#) from the U.S. Department of Housing and Urban Development

3. Co-housing

The cohousing model refers to neighborhoods in which each resident or family owns their individual residence, but the homes in the community share a common space that can be used for gatherings, events, meals, etc. Cohousing models are not always geared toward seniors, but several cohousing neighborhoods for seniors have been built, and provide access to services to assist with aging-in-place.

Example: [Oakcreek Community](#), a senior co-housing community in Stillwater, OK.

Additional information:

- [What is Co-Housing?](#) (AARP)
- [The Cohousing Association of the United States](#)

4. House Sharing

House sharing refers to a variety of arrangements in which an older adult may have a friend, family member, or other adult as a housemate. The housemate may help in with expenses, chores, or transportation. Housemates can share rent or own a residence together. In other situations, a younger adult may live with an older adult and provide some caregiving assistance in exchange for affordable housing.

Additional information:

- [House Sharing for Boomer Women](#)– an AARP article
- [National Shared Housing Resource Center](#)

5. Co-ops

Resident-owned and governed communities who make arrangements to share services.

Example: [The Home of the Future](#), a Time magazine article on Sleepy Hollow, a Florida-based senior-owned mobile home community

Additional information:

- [Senior Cooperative Housing](#)

Home Safety & Modifications**6. Home safety assessments**

Home safety assessments can be done by occupational therapists, home health nurses, volunteers, or homeowners themselves to identify potential modifications they can make to reduce risk of falls and maximize functionality within a home.

Example: [SAFE at Home](#), a United Way of Dane County and SSM Health partnership to prevent falls and injuries at home. Volunteers conduct in-home safety assessments, and the program provides a medication review by a pharmacist, safety aids like night lights, home safety recommendations, information about community resources, and 6 months of follow up by a social worker.

Additional information:

- [Aging in Place: Tips on Making Home Safe and Accessible](#) from the National Institute on Aging
- [CDC's Checklist for Home Fall Prevention](#)
- [Safe at Home Suggestions for Homeowners](#)
- [Safe at Home Suggestions for Homeowners- Rebuilding Greater Milwaukee version](#)

7. Universal and “lifelong” design

Various organizations have outlined design principles for new construction and modification checklists for existing constructions to homes, environments and products accessible to everyone (universal design).

Lifelong design is a similar concept but is applied to make homes and the environment accessible to individuals across the lifespan.

Examples:

- [AARP HomeFit](#) – A homeowner’s toolkit to assess their home for “lifelong” modifications.
- Certified Aging-in-Place Specialist ([CAPS](#))- A designation from the National Association of Home Builders for remodelers and builders certifying completion of training on universal design and aging-in-place remodeling.

Additional information:

- [Universal Design Creates a Seamless Aging-in-Place Experience Universal Design / Aging-In-Place Slides](#)

8. Home modification assistance programs

Home modifications that require a professional contractor can range from a few hundred dollars to several thousand dollars. Various programs and non-profits can help older adults identify which home modifications are needed and provide those services at a low-cost to increase access to home repairs.

Examples:

- *Community Aging in Place-Advancing Better Living for Elders* ([CAPABLE program](#))- A team consisting of a nurse, occupational therapist & handyman/contractor work together with low-income older adults in their homes to improve function and adapt the home environment to facilitate aging-in-place. This program was developed at Johns Hopkins School of Nursing, they offer training for other organizations to deliver the CAPABLE program.
- *Home Modification Education for States* ([Homes](#)) Program- Pilot program of an online education program on home modification from the USC Leonard Davis School of Gerontology. A Wisconsin program is anticipated for 2019. This educational program targets individuals representing the elderly and those with disabilities, occupational therapists, policy makers, remodelers and contractors.
- [Project Home](#) - A non-profit operating in Dane and Green Counties in WI with a mission to improve the quality and affordability of housing for low income residents. Services provided include home repairs, accessibility modifications, energy improvements and home maintenance classes.

Additional Info:

- [National Directory of Home Modification Experts and Resources](#)

Local Government Policies and Community Design

9. Zoning bylaws and building codes

Zoning rules and bylaws can help communities create “age friendly” community design and housing stock. Changes at the policy level can allow for the construction of affordable housing, encourage mixed use of land, include of accessibility standards for new construction, and infrastructure to make a community walkable.

Examples:

- Some [builders specialize](#) in Accessory Dwelling Units.

- The [Atlanta Regional Commission](#) held a charrette with multiple community stakeholders and design experts to develop conceptual master plans for five Atlanta-area communities; and identify [“lifelong” community standards](#), zoning codes & development principles.

Additional info:

- [Aging Success Stories](#) from the Canada Mortgage and Housing Corporation
- Information on [Accessory Apartments](#) from the University of Missouri Extension

10. Property tax codes

Policies related to property taxes can be modified at county levels to allow for tax postponements, tax assistance, limiting assessed values and homestead exemptions to promote housing affordability.

Additional info:

- [Aging in Place- A Toolkit for Local Governments](#)

Transportation

Two resources that were helpful in compiling this list are the Rural Information Hub (RHIhub) and Grantmakers in Aging (GIA). The RHIhub website has a great Rural Transportation Toolkit available online, which includes a list of transportation models and exemplars. GIA released a report targeting funders on Mobility & Aging in Rural America. This document summarizes some information available through these websites, but we encourage further exploration and will help you narrow down resources if any of these models or programs are of interest to you.

Public & Alternative Forms of Transportation

1. Public transportation

According to the Rural Information Hub, the principle form of public transportation are fixed-route buses. In rural areas, systems may have additional modifications and services to complement buses, such as demand-response transportation or connector services.

Demand-response transportation involves flexible routes and schedules based on rider needs. Hailing a ride would be an example of demand-response transportation. Connector services are transportation services to connect transit systems to a final destination that may be out of their service area. Several of the examples and models listed throughout this document use these types of transportation systems.

Example: [Marble Valley Regional Transit District](#) – Operates a non-urban public transport system. It offers fixed route buses with pre-arranged stops and flag-down stops at which drivers only stop if the circumstances are safe to do so. It also offers on-demand transport services to medical, hearing and social service appointments for Medicaid recipients.

Additional info & examples: [RHIhub](#)

2. Volunteer programs

Some communities rely on volunteer driver programs. Volunteers may drive their own vehicles or vehicles belonging to an organization. They may provide door-to-door assistance/drop-off, waiting with individuals during appointments, and assistance during the trip if needed (such as help grocery shopping). Some transportation programs provide medical flight transport. Volunteers may or may not be reimbursed with money or other incentives. One challenge with volunteer programs is recruiting enough volunteers to meet demand of services.

Examples:

- [Vernon County](#) here in Wisconsin provides demand-response volunteer rides within a 100 mile radius of the county seat, Viroqua. Co-payment for a ride depends on mileage.
- The [TRIP model](#) was designed to help with recruitment of volunteer drivers and to empower older adults to recruit their own volunteer drivers. The main components of the model are: managing organizations identify riders in needs; riders identify their own volunteer drivers; riders and the volunteer drivers arrange the rides independently; riders then provide documentation of transportation to the managing organization; and reimbursement is given to riders to give back to the volunteer drivers.

Additional information:

- [RHIHub](#)
- [National Volunteer Transportation Center](#) – Link to a [map of volunteer driver programs](#) across the U.S.

3. Voucher programs

In voucher programs, riders are provided with coupons or vouchers to provide transportation providers reimbursement. Organizations managing the voucher program determine who is eligible to receive vouchers, and if vouchers are provided for free or for a reduced cost to riders. Transportation providers may be existing businesses or volunteer services. Vouchers serve as an incentive for drivers to continue to provide transportation services.

Example: Wyoming Independent Living – Provides reimbursement of mileage to transportation providers who provide rides to eligible individuals with disabilities.

Additional information:

- Additional examples on [RHIhub](#)
- [Michigan Developmental Disabilities Council's Transportation Voucher Replication Handbook](#)

4. Coordinated Services Programs

In this model, different community service programs share resources and responsibilities to increase availability and access to transport, essentially creating economies of scale. These programs require planning and cooperation on a large scale, and involve stakeholders from non-profits, government, and technical support.

Examples:

- [RYDE Transit](#) (Reach Your Destination Easily) Public Transportation – This program, operated out of Kearney, NE, provides low-cost public transportation in 7 counties to medical appointments, shopping, congregate dinners, and social activities. RYDE operates 12-passenger, lift-equipped buses for riders who call and schedule pickup times 24 hour in advance. The program started in the year 2000 after 4 years of planning by the Buffalo County Community Health Partners Transportation Goal Work Group, which included stakeholders from over 20 local government and service organizations.
- [Hancock County, Maine](#) – Downeast Transportation and Island Explorer is a partnership between a non-profit agency, public agencies, and private businesses. This service provides fixed route services connecting several towns on the coast of Maine, including routes to employers, and the seasonal shuttles to Acadia National Park. This results in a system that serves work commuters, tourists and visitors, and local residents.

Additional info:

- [RHIHub](#)
- [More outstanding rural transit agencies serving their communities during COVID-19](#) from the Federal Transit Administration
- [Federal Grant Opportunities](#) from the Federal Transit Administration

5. Mobility on Demand

The basis of this model is the integration of pre-existing transportation infrastructure and services, and connecting individuals to the forms of transportation that suit them best. A central organization coordinates transportation and schedules for individual people and organizations.

Example: [Ride Connection](#) – A non-profit based out of Portland, OR, this organization provides information and referrals for transportation options over the phone, public transit travel training, door to door rides, and community connector, which provides deviated- route service in rural counties. Riders can schedule an off-route pick up or drop off within a half mile of the route for free.

Additional information and examples:

- [RHIhub](#)
- [Federal Transit Administration](#)

6. Ride Sharing

In this model individuals or organizations share a mode of transportation to maximize the number of people using the same vehicle. This could look like multiple organizations or individuals sharing the same vehicle and using it during different time periods, individuals carpooling or vanpooling to the same destination, or real-time ridesharing smartphone or digital applications.

Examples:

- [Dakota Area Resource and Transportation Services Vehicle Sharing](#)– This program involves vehicle sharing between the city, senior center and local churches, as well as vehicle maintenance service for the fleet. [DARTS](#) (Official website for this service) also offers personal rides with one-on-one,

wheelchair accessible service, a fixed route transportation service with schedules and deviated stops close to assigned/scheduled stops, and driver trainings for vehicle sharing. Services provided by this organization do come with trip/mileage fees.

- [Wisconsin State Employee and Madison Commuters Van Pool](#)– The Wisconsin Department of Administration provides a van to groups of at least 5 individuals who commute to work together.

Additional information:

- [RHIHub](#) with other transportation assistance from Medicaid or Veteran’s benefits do not qualify under this program.
- [Travel Training](#) – A Milwaukee County Transit (MCTS) program that includes training sessions to help individuals learn about the bus system, as well as individual mobility management.

7. Mobility Management

Programs that teach riders how to use various transportation systems and connect them to services that are the best fit for them. This model often involves a mobility manager, who helps individuals navigate the transportation resources available and develops programs within their community.

Examples: [HealthTran](#) – A program piloted by the Missouri Rural Health Association, this mobility management program receives referrals from member health-related organizations (e.g. clinics, hospitals, etc.) that have identified individuals with transportation barriers. A HealthTran mobility coordinator then assists with planning the most efficient transportation for these individuals through a single technology platform.

Additional Info:

- [RHIhub](#)
- [National Center for Mobility Management](#) – Which has a list of external [grant opportunities](#)
- [Wisconsin Association of Mobility Managers](#) – List of mobility managers by county

Road Safety, infrastructure & design

8. Road Safety Models

Community planning and infrastructure can improve road safety for motor and non-motor transportation, as well as increase physical activity. This type of community planning is meant to highlight safety, and make sure motor vehicles, bikers, and pedestrians all have access to safe infrastructure to move in.

Examples:

- [Traffic Calming](#) – Roadside design features meant to enhance safety & mobility in communities by reducing motor vehicle speeds and volume. Examples of design features include medians, on-street parking, raised intersections, and others.
- [High Friction Surface Treatments](#) – By adding an aggregate to pavement, road surfaces have a higher friction that gives motorists better control in wet driving conditions. This has been shown to decrease crashes, injuries and deaths. It is currently used in [Wisconsin](#) in some bridges, curves, downgrades and intersections.

- [Complete Streets](#) – The National Complete Street Coalition provides information and technical support for communities seeking to implement “Complete Street” principles in their road design. The design principles are meant to make roads safe and accessible to pedestrians, motor-vehicles and non-motor vehicles.

More information: [RHIhub](#)

9. Non-motor vehicle transportation

The RHIhub uses the term “Active transportation” to describe any mode of transportation that does not involve a motor vehicle, such as biking or walking. Infrastructure and intentional design such as Complete Streets, can encourage biking or walking by providing a safe area to do so.

Examples:

- [Rails to Trails Conservancy](#), a non-profit which provides support and information on transforming abandoned railway lines into multi-use trails for community use across the country.
- Sheboygan County, Wisconsin, was one of the recipients of federal funding to pilot the [Nonmotorized Transportation program](#). This funding was used to construct sidewalks, bike lanes, paved shoulders, and multi-use pathways, and to increase public awareness through community outreach. It now has a Bicycle Friendly Community designation from the League of American Bicyclists.

Additional information:

- Report from Rails to Trails Conservancy on [Active Transportation Beyond Urban Centers](#)
- [RHIhub](#)

10. Safety courses for mature drivers

There are several training programs for mature drivers to promote driving safety. Evidence supporting these programs is mixed. Some insurance carriers give discounts for completion of driver safety courses.

Examples:

- AARP’s [Smart Driver](#) and [Car Fit](#) programs. AARP Safe Driver classes are given in a classroom or online. Some companies provide insurance discounts to drivers that complete the program. During Car Fit events, a technician evaluates a drivers’ positioning and “fit” in their car to promote safety.
- [AAA DriveSharp Program](#)– Focuses on cognitive and brain training to improve visual processing skills to support safe driving.

Additional information:

- Wisconsin Department of Transportation- [Older driver safety](#)
- Licensing requirements & medical reporting [procedures](#)
- [Clearinghouse for Older Road User Safety](#)

Family Caregiving

The following websites list resources available in the state of Wisconsin for caregivers, including caregivers of older adults and adults caring for minors. These may be helpful if your HeART Coalition is gathering information on existing resources:

Greater Wisconsin Agency on Aging Resources – [Family Caregiver Support](#)

1. Department of Health Services – [Wisconsin Family Caregiver Support Programs](#) Education & support groups

Examples:

- [Share the Care](#) is a nonprofit organization which promotes a model of sharing caregiving duties among a network of individuals and organizations in order to support both the care and the primary caregiver. Share the Care (STC) offers resources on their website for corporations, faith communities, health professionals, and caregivers. This organization offers training so that caregiver coordinators can train others on how to implement the model. For more information, visit the GWAAR [Family Caregiver Support](#) website.
- The Wisconsin Institute for Healthy Aging ([WIHA](#)) features information on three evidence-based programs to provide caregivers with support: Resources for Enhancing Alzheimer’s Caregiver Health, Powerful Tools for Caregivers and New York University Caregiver Intervention. These programs improve self-care, reduce caregiver burden, and delay institutionalization of the care recipient. WIHA does not administer all of the programs, and some of these programs may be already available in your community.
- The project Caregiver Alternatives to Running on Empty ([CARE](#)) provided dementia-specific support for family caregivers in rural North Carolina. Services provided included counseling, education, care consultation, caregiver assessments, action plans, home safety inspections, social support networking and respite care vouchers.
- Some organizations form online groups to provide support to individuals who cannot attend in-person meetings or would prefer not to. The [Family Caregiver Alliance](#) lists two online support groups for caregivers, with one individually tailored to the needs of LGBT Caregivers.

2. Respite Care

Respite care provides a temporary “break” or relief to caregivers while the care recipient continues to receive support from an alternate caregiver. Respite care can be provided at home, in healthcare or residential facilities, and adult day centers. Challenges to obtaining respite care are financial costs and a shortage in respite care workers.

To help address the shortage in respite care workers, the [Respite Care Association of Wisconsin](#) (RCAW) offers online training to become a respite caregiver, and a [respite care registry](#) for families to search for services and respite care workers available in their county. In addition, RCAW is offering a **mini-grant opportunity** to provide outreach, education and training assistance to grantees through a one-day on-site event. The goal of the mini-grant is to expand the pool of trained respite care workers, educate family caregivers, and bring together local agencies that support caregivers.

3. Monitoring for Wandering

[Project Lifesaver](#)– This program in Sauk County, Wisconsin, provides Lifesaver bracelets to residents who may have a condition that may cause them to wander away from their home (e.g. Autism, dementia, etc.). The bracelet enables local authorities to quickly track the at-risk individual and return them home if they wander away or become lost. For up-to-date details, visit the [Project Lifesaver](#) web site.

4. Learning practical skills

Caregivers sometimes need additional support in learning practical skills to care for their loved one. This may include medical tasks such as medication administration or wound care, or may be routine activities such as transferring someone from a bed to a chair. Organizations like the Home Alone Alliance have created video resources to show caregivers practical skills. While the following examples are not exactly strategies, they are resources to stimulate thinking about how to help caregivers at home and may be resources your organization can share with caregivers.

Resources:

- Students at the School of Art & Design in Nottingham Trent University, England, created a series of videos that demonstrate the use of some adaptive equipment to help older people living at home. You can view the videos [here](#).
- The [Home Alone Alliance](#) includes the AARP, the Betty Irene Moore School of Nursing at UC Davis, the Family Caregiver Alliance and other organizations. They have created a series of videos and documents to help caregivers with practical skills and tasks such as wound care.

5. Planning for the future

The following two examples are of programs that can be used by older adults with or without family members to plan for the future.

Examples:

[Planyourlifespan.org](#) is an interactive, online tool developed by Northwestern University to assist seniors and their families with understanding and planning for future home and health-related needs. This tool has been shown to increase planning behavior and communicating options for the future. [Here](#) is a study published by the researchers who created the tool.

6. Employer support

About one in six employed adults provides care to an older or disabled adult. These caregivers have to balance the demands of the workplace with those at home. The tension between responsibilities affects the caregiver and the employer through stress, missed workdays and decreased productivity. Employers can help create a work environment that supports caregivers. Models to support caregivers include providing flexibility in scheduling or leave, providing information about resources available and FMLA, and financial support through benefits like flexible spending accounts.

Resources:

- UW Extension has created an [employed caregiver survey](#). Employers arrange distribution of the survey to their employees. Once employees have anonymously completed the survey, the information is

collected, and an aggregate report is sent back to the employer. The report can be shared with employees and used in discussions about how best to address the needs of employees who are caregivers.

- The [Center on Aging & Work](#) at Boston College has information on the different models to create a caregiver-friendly work environment, with specific strategies listed.

7. Support for Grandparents Raising Grandchildren

Support for older adults raising children can come from a variety of public or private organizations. Some programs may offer programming, respite care, parenting classes, case management, tutoring, counseling, financial assistance, peer support for children, or additional support to obtain services, housing or employment.

Resources:

- The Grantmakers in [Aging Grandparents Raising Grandchildren](#) website features examples of programs serving older adults raising children.
- [grandfamilies.org](#) offers a [Wisconsin fact sheet](#) on grandparents raising grandchildren, and lists existing programs offered in the state. <http://www.grandfamilies.org/State-Fact-Sheets>
- The UW Extension [Grandparenting Today](#) website offers information on local agencies and publications to support grandparents on topics such as discipline, holidays, self-care, etc.

8. Dementia Friendly Communities

There are several Dementia-Friendly Community initiatives that offer different definitions and resources for communities. Generally, dementia-friendly communities have initiated efforts to make their area one in which people with dementia can live independently as long as possible. Principles of these programs include combating stigma, increasing awareness, and improving the service, care, and social inclusion of individuals with dementia. There is some overlap between dementia-friendly communities and age-friendly communities. The following are resources or initiatives for dementia-friendly communities:

Resources:

- The Center for Aging Research and Education (CARE) at the UW-Madison School of Nursing has developed a Dementia-Friendly toolkit to build communication and advocacy skills to respectfully engage people living with dementia. The toolkit consists of [training materials](#) that can be used with students, healthcare staff, family caregivers, community groups or businesses.
- The [Wisconsin Alzheimer's Institute](#) (WAI) web site offers [educational sessions and materials](#) for implementing dementia friendly programs.
- Purple Angel Initiative: More information from the [Alzheimer's & Dementia Alliance of Wisconsin](#) and the global [Purple Angel Dementia Awareness](#) website.
- [ACT on Alzheimer's](#)
- [Alzheimer's Disease International](#)
- [Wisconsin Department of Health Services](#)

Community Connectedness

Respect, Social Inclusion, & Intergenerational Collaboration

Community programming, classes and events can encourage intergenerational interactions and social interaction. Programs and events are varied; examples include community programming, technology training, intergenerational housing, creative use of public school spaces, and outreach to homebound adults.

1. Intergenerational housing

Local governments and community organizations can create programs and housing arrangements to encourage intergenerational collaboration and support. Programs may look like low-income housing with shared community spaces and activities, college students living with older adults and providing companionship in exchange for housing.

Examples:

- [Humanitas retirement home](#) in Deventer, Netherlands: College-aged students receive free housing in small apartments at the Humanitas retirement home in the Netherlands. In exchange, the student is required to spend 30 hours per month as a “good neighbor” to older residents. As a good neighbor, the student may watch sports, eat meals, and provide general companionship to residents.
- Housing for young mothers and seniors in Beekmos, The Netherlands: In this project, young mothers and teen girls who are no longer able to live with their families live in “assisted living” type apartments. The same facility also reserves a number of apartments for older adults who serve as coaches for the younger residents. In this case, the coaches are the “good neighbors.” They may assist the younger residents with babysitting, emotional support, etc. There is also programming for social activities to include all residents. Additional info on p. 28 of this [report](#).
- [Bridge Meadows](#): An [inter-generational housing](#) development that offers housing for families adopting children from foster homes. The community also offers reduced rent apartments for adults age 55 and over in exchange for their time volunteering with families in community activities.

2. Phone outreach programs

Isolated or homebound adults can be checked on through a weekly scheduled phone call. This has been facilitated in other communities through the 211 service.

Example:

The [Helpline Center’s](#) Outreach Support Program in South Dakota: The Helpline Center manages the [Outreach Support Program](#). This program provides support and assistance through a weekly scheduled phone call to homebound adults. Program enrollees can dial 211 at any time if they require additional support.

3. Volunteer Companion programs

Programs like these are similar to the Senior Companion program (see previous section), in which volunteers are matched with homebound adults to provide companionship and support with at-home visits.

Examples:

- [Better Together](#): This program trains and screens volunteers in South Dakota, and matches them with people aged 65 and older living, with the end goal of promoting companionship and social activities. Volunteers have a minimum commitment of four hours per month for at least one year. More info [here](#).
- [Maine Center on Aging's Senior Companion Program](#): This program is a Senior Corps program (a federally sponsored network of volunteer programs). Please see the Wisconsin Department of Health Services Programs section to view Wisconsin's Senior Companion program. In Senior Companions, active volunteers aged 55 and older provide home visits and companionship to homebound older adults. In Maine, this program provides services to 350 adults annually. This [article](#) highlights the benefits for clients and volunteers.

4. Senior Centers & Space for Programming

Senior Centers provide a gathering space for older adults to access activities, programming, learning and services. Senior Centers offer similar services to ADRCs in some aspects, but usually have larger areas for recreational use and programming. Sometimes Senior Centers will share space with other community organizations or rent out the facility for events.

Example of a traditional senior center:

[Summit County Colorado](#): The Community & Senior Center offers activities and services including free 10-minute appointments with a lawyer, care navigation, a caregiver support group, a phone tree providing check-in calls to seniors who live alone, quilting group, mahjong and bridge groups, and outdoor activities.

Shared-spaces senior centers:

[AARP](#) has a wonderful list of examples of innovative ways communities have developed shared spaces that include senior centers.

5. Teach SD Tech Connection

This program was created by South Dakota State University Extension. This program pairs tech-savvy volunteers with adults who want to learn how to use new devices, apps and programs. Although volunteers between the ages of 14 and 24 are targeted, volunteers of all ages are welcome. [SDSU Extension](#) has created a toolkit for this program. Search for "[Toolkit to Help Teach Older Adults New Technology Skills](#)."

6. Music and Memory [Student Volunteer Program](#)

This program was piloted in 2016. This program connected high school and college students with volunteer opportunities in local nursing homes with [Music & Memory](#) certifications. The Music and Memory program is a separate nursing home-based program to provide engagement for residents through music. The student volunteers received some training with a brain health mini-unit on mental health, the brain, and the benefits of music for patients. They then are partnered with nursing home residents and patients with Alzheimer's to create personalized playlists for the residents and their families. This program aims to increase younger generations' awareness of brain health and dementia, increase intergenerational collaboration, increase socialization for nursing home residents, and improve quality of life.

7. [Fishing for Everyone](#)

Fishing Has No Boundaries is a non-profit with multiple chapters throughout the country, including chapters in Madison, Milwaukee and Hayward County. This organization provides recreational fishing opportunities for people with disabilities, and offers information on adaptive fishing equipment. [The Chippewa Valley Chapter](#) holds an annual two-day fishing event in Holcombe, Wisconsin.

8. Senior Cooking Classes

Classes focusing on how to prepare meals is an opportunity to socialize, learn about nutrition, and increase self-sufficiency.

Examples:

- [Pots & Plans](#): Run by Washington state non-profit Lifelong, their nutrition programs focus on people with chronic conditions and homebound seniors.
- [Senior Chef](#): This eight-session cooking and nutrition class is led by Age Concern, a charitable organization in Otago, New Zealand. The free course includes tips on nutritious and economical meal planning, and participants get to eat what they prepare.

9. Brain health classes

Brain health classes usually focus on maintaining cognitive function through brain teasers and critical thinking exercises. Evidence for these types of programs is mixed, so programs are often “evidence-informed.”

Examples:

- Brown County’s ADRC implemented [BE! Brain Enrichment Course](#). They offered four ten-week courses to approximately 80 participants. Two facilitators, one of which was an intern, were recruited. This program is not evidence-based.
- Barron, Rusk & Washburn Counties’ ADRC implemented Breakfast for your Brain. This was a 20-month pilot with monthly meetings limited to 20 participants. The ADRC made all necessary copies and took registrations. The program included brain teasers and exercises, provided healthy snack samples and recipes for people to take home.

10. Healthy Aging Lecture Series

Lectures or seminars can be a way for older adults to continue learning about healthy aging, common medical issues and resources available in the community. Seminars and lectures are typically held in locations where older adults live or congregate.

Examples:

- Wisconsin Alumni Association’s [Healthy Aging Series](#): This lecture series is free and open to the public, and is held at the Capitol Lakes Retirement Community in Madison, Wisconsin. It features the expertise and research of UW-Madison faculty, researchers and alumni to provide content on healthy aging.
- [Independent Living Seminars](#): Age Concern, a charitable organization in Otago, New Zealand, delivers this program in conjunction with older adults, community services and support agencies. The seminars offer information, resources, and expert speakers on how to remain connected to activities, friends

and community, how to live safely at home and maintain a healthy mind and body. Sessions are two-hours long, and free lunch is provided to attendees.

- [Aging Mastery Program](#) (AMP): Navigating Longer Lives, Exercise, Sleep, Healthy Eating & Hydration, Financial Fitness, Advanced Planning, Healthy Relationships, Medication Management, Community Engagement, Falls Prevention, and Caregiving (optional). These classes address topics such as patient/physician communication, memory, home safety, malnutrition, and bucket lists. Aging Mastery is a comprehensive approach for modest lifestyle changes to empower and cultivate health and longevity. Over the course of the program, participants set goals for positive actions in many aspects of their lives such as exercise, nutrition, finances, advance care planning, community engagement, and healthy relationships. Program results have shown that older adults in the program participants significantly increased their: social connectedness, physical activity levels, healthy eating habits, use of advanced planning, participation in evidence-based programs, and adoption of several other healthy behaviors. The Aging Mastery Program is offered in a number of counties across Wisconsin, as well as offered virtually.

11. Learning and living with technology

Training and access to technology can help older adults remain connected. Technology allows individuals to manage and control aspects of daily life like medical information, ordering goods, and networking. Tech trainings for older adults can be found in programs offered by University Extensions and by community or technical colleges.

12. Volunteer time banks

Volunteer time banks are networks of individuals who exchange services. An individual “banks” the time they spend providing volunteer services to others, and can then redeem that time to receive services from other individuals in the network.

Example:

Onion River Exchange: The Reach Rural Elder Assistance for Care and Health (REACH) project was done in rural Vermont with goals very similar to HeART. REACH joined with an existing time bank in the Montpelier, Vermont area, the [Onion River Exchange](#), to provide a supplemental program to address the needs of older and disabled adults. In their model, all members’ hours and talents are valued equally. For example, one hour of mowing a lawn could be cashed in for an hour-long cooking class.

13. Mentoring of children and adolescents

These types of programs involve adult volunteers mentoring children and teens, often in school settings.

Example:

[Experience Corps](#): This program involves the placement of volunteers aged 60 and over in public schools in Baltimore, Maryland. Volunteers receive training and are placed as tutors for grades K–3. This program has been in place for 20 years, and has shown an increase in children’s testing scores on reading, as well as decreasing office referrals for behavioral issues. The program has grown to other urban areas throughout the U.S.

14. Workplace Policies to Support Older Workers

Workplace policies can support the retention of older workers and prevent early retirement. The City of Stoke-on-Trent in England piloted an employment program to engage with older employees and increase retention. [AARP](#) published an article on this pilot on their website. This project was part of a larger [study](#) in the European Union about workplace innovation and policy to support and retain older workers.

15. Wisconsin Department of Health Services Programs

Americorps Seniors has three programs designed to engage adults age 55 in volunteer activities in their community. [Americorps Seniors](#) is part of the Corporation for National and Community Service, the federal agency that leads volunteer and related grant-making efforts in the United States. At a local level, the Wisconsin Department of Health Services runs Senior Corps programs. The three Senior Corps programs available in some counties in Wisconsin are Foster Grandparents, Senior Companion Program, and Retired and Senior Volunteer Program. Not all of these programs are available in all Wisconsin counties, so there may be potential for expansion of these programs or similar services in your area. Grant information is available through [Serve Wisconsin](#).

[Foster Grandparent Program](#)

Nearly 500 Wisconsin residents are serving as Foster Grandparents today. We are always looking for additional eligible volunteers.

Foster grandparents serve as mentors, tutors and caregivers for children and youth with special needs. They provide 5-40 hours of weekly volunteer service through community organizations such as schools, hospitals, child care centers, Head Start programs and residential programs. Foster Grandparents delight in having a purpose to each day. They have the chance to join other community members in worthwhile activities that improve the lives of children. In so doing, they discover opportunities for friendship, education and satisfaction.

Foster grandparents receive a modest tax-free stipend, reimbursement for transportation, meals during service, annual physical examinations, and accident and liability insurance while on duty. They must meet income eligibility standards and be at least 55 years of age. People volunteering as foster grandparents receive careful orientation training to help them develop skills needed to serve children with special needs. They also receive periodic refresher training in monthly in-service group meetings.

[Retired and Senior Volunteer Program \(RSVP\)](#)

This program helps adults over the age of 55 find service opportunities in their community based on their personal interests and skills. Projects may be in schools, police stations, hospitals, recreation centers, etc.

[Senior Companion Program](#)

This program arranges for adults age 60 and over to provide assistance and companionship to homebound adults. This program aims to increase social contact for homebound adults; helps keep adults in their home by providing assistance with chores, shopping, transportation, etc.; and provides respite for live-in caretakers.

Leadership

The process of building a community coalition is an exercise in leadership unto itself. Coalitions like HeART communities work to advocate for older adults. Older adults should be included in advocacy work and strategy decisions in order to influence and improve their communities.

Other communities have sustained the work they are doing by maintaining their coalition networks, such as [Silos-to-Circles/Collective Action Lab](#) in Minnesota.

Some organizations or local governments join the AARPs [Network of Age-Friendly Communities](#). Membership in this network requires documentation of support from a city's or county's highest elected official. Membership does not mean that a community has certain attributes or amenities, but that it has committed to making changes to support a healthy environment for people of all ages.

Community Healthcare Services

Two resources that may be helpful to explore strategies to improve health and community services are County Health Rankings & Roadmaps: [What works for Rural Health?](#) and the [Rural Health Information Hub](#).

Case Finding & Management

1. The Gatekeeper model

The gatekeeper model is a case-finding strategy involving “non-traditional” referral sources such as pharmacists, utility meter readers, mail carriers, community businesses, etc. The non-traditional referral sources are trained to identify at-risk older adults and refer them to care management or mental health services. This could be used in context of older adults needing a little extra help to remain at home, elder abuse or neglect, or suicide prevention. This model has been shown to reduce social isolation, depression and emotional disturbances and improve functioning and optimism.

Examples:

- [Washington County, Oregon](#)
- [State of Oregon Dept. Of Human Services](#)
 - Has training materials & replication guide
- [Senior Reach](#)
 - Focused on isolated older adults
 - Covered a 5 county area including rural areas
 - Trained non-traditional referral sources and professional service providers like primary care providers
 - The [Implement](#) Senior Reach website includes licensing and pricing information for technical support offered by the Jefferson Center for Mental Health, Seniors' Resource Center, and Mental Health Partners.

2. Navigator Services

The [Silos to Circles](#) project involved four rural communities in Minnesota. These communities will implement a “people–paper–digital” strategy to guide older adults and caregivers to the services they need.

- Digital: A shared “hub” website for people to navigate to specific local resources.
- People: A paid or volunteer navigator whose job is to get people to the right services in the community.
- Paper: Marketing-communications activities to support awareness and connectivity that support independence and healthy aging.

3. Screening of at-risk older adults in healthcare settings for community service referrals

Older adults have higher usage rates of emergency departments (ED), are more likely to be hospitalized during an ED visit, and are more likely to have a decrease in functioning or nursing home placement after discharge. To address these disparities, some hospitals and clinics have developed programs to screen at-risk older adults and/or coordinate follow-up after discharge. However, these programs face barriers of time constraints on ED staff and communication issues. So some EDs have in-house, trained specialized nurses or teams that:

- may assist older adults with discharge planning or finding community services after discharge,
- refer patients to external services, and/or
- incorporate follow-up visits or phone calls after discharge.

Some of these programs have demonstrated reductions in emergency room visits, especially in clinic and home health settings. However, overall evidence of whether these programs reduce emergency room usage or nursing home placement is mixed.

Healthcare & Wellness Services

4. Nutrition and Wellness Classes

The [Wisconsin Institute for Healthy Aging](#) lists several evidence-based health promotion programs related to alcohol and substance abuse, caregiving, chronic conditions, falls prevention, medication management, mental health, nutrition, and physical activity. Health and wellness classes and programs also encourage social engagement.

5. Planning for future health needs

[Planyourlifespan.org](#) is an interactive, online tool developed by Northwestern University to assist seniors and their families with understanding and planning for future home and health-related needs. This tool has been shown to increase planning behavior and communicating options for the future. [Here](#) is a study published by the researchers who created the tool. These researchers have also created a [toolkit](#) to disseminate the website in communities.

6. Facilitating Transportation

A list of more transportation strategy ideas is available through the [HeART website](#). One example of a transportation-related strategy that increases access to care is HealthTran.

[Health Tran](#) is a membership model piloted by the Missouri Rural Health Association in which health care organizations and providers pay a fee to prefund rides for patients. Using HealthTran software, medical office staff schedule appointments when transportation is most available, and a HealthTran mobility coordinator helps patients plan trips with local transportation providers or volunteers. This case study is also available on the [Rural Health Information Hub](#).

7. Community Paramedic Programs

The Rural Health Information Hub has information on Community Paramedic programs and exemplars. In community paramedic programs, paramedics and EMTs provide non-emergency services to community members such as primary care, education, hospital visit follow-up visits, or connecting community members with healthcare providers. Some programs have been shown to reduce emergency 9-1-1 call use for non-emergency reasons.

Example:

- ThedaCare Community Paramedicine Pilot Program
 - ThedaCare, a health system operating in eastern Wisconsin, implemented a community paramedicine program in 2015 in order to reduce overutilization of hospital and ED services. The program integrated paramedics into the ambulatory care management team to provide services such as medication reviews for patients with complex regimens, education and support for self-management, and connecting patients with social services. This program was intentional in design and patient eligibility in order to avoid duplication of home health services. More information about this program can be found at the [Center for Healthcare Strategies](#).

8. Mobile health clinics and services

Mobile clinics and services have been used to bring low-cost healthcare to underserved areas. Services delivered include primary care and screenings, MRI imaging, dental care, education and pharmacist services. Here is a link to [the Rural Health Information Hub's case studies](#).

9. Home visiting programs

Home visiting programs involve physicians or trained “practice extender” teams of nurses, lay health workers, or other healthcare professionals to bring healthcare services to patients at home. Services can include mental health counseling, chronic disease management, care coordination, and environmental assessments, among others.

Examples:

- Program to Encourage Active, Rewarding Lives ([PEARLS](#))
 - In this evidence-based program, participants were given training to provide counseling and behavioral techniques to older adults with depression in community settings and clients' homes. The program has been shown to improve quality of life and reduce depression. The University of Washington offers training and a toolkit through the PEARLS website to disseminate the program.

- Community Aging in Place-Advancing Better Living for Elders ([CAPABLE program](#)):
 - A team consisting of a nurse, occupational therapist & handyman/contractor work together with low-income older adults in their homes to improve function and adapt the home environment to facilitate aging-in-place. This program was developed at Johns Hopkins School of Nursing; they offer training for other organizations to deliver the CAPABLE program. This program is also posted in the Housing list on the [HeART web site](#).
- Doctors Assisting Seniors at Home (DASH)
 - This project is no longer active, but was a [Medicare innovation project](#) that resulted in a decrease in Medicare expenditures through decreased emergency room use. In this subscription-based service for Medicare fee-for-service patients in California, a team of healthcare providers would be dispatched to do home visits for patients who had fallen ill to triage them and provide care at home if possible. Here is a link to a local [web article](#) on DASH.
- [Sutter Health's](#) Advanced Illness Management (AIM)
 - AIM is another [Medicare innovation project](#) that has resulted in cost savings and reduced hospitalizations for patients in the late-stages of illness. The program serves as a bridge between hospice and the hospital for patients that do not qualify for Medicare Skilled Home Health. In this program, a multi-disciplinary team would provide referrals, caregiver education and engagement, advanced care planning, medication reconciliation and navigation services to patients and their family members at home.

Recruitment and Retention of Healthcare Workers

The [Rural Health Information Hub](#) website contains information and examples of strategies to develop rural healthcare workforce. Strategies include community health workers, education and training, paramedicine programs, J-1 visa waivers and financial incentives for providers.

The County Health Rankings & Roadmaps report on [What Works for Rural Health?](#) Includes a section on evidence-based strategies to improve access to care.

Opioid Epidemic

A resource for information is the [Grantmakers in Aging report](#) on rural communities, older adults and opioid use. [Dose of Reality](#), a Wisconsin Department of Justice initiative, also provides information on the opioid epidemic and community education materials. This [video](#) is a presentation on the opioid epidemic in Wisconsin given by Dr. Paul Krupski, Director of Opioid Initiatives, at the Wisconsin Institute for Healthy Aging Summit held in June 2018.

10. Academic detailing

This strategy involves outreach education for healthcare professionals, and usually involves collaboration between local health departments and local health systems. Outreach educators meet with providers at their practice locations to review specific topics, which can include safe prescribing and management of opioids.

Staff at the Wisconsin Department of Health Services' Prescription & Non-Prescription Opioid Harm Prevention Program can provide further information if you are interested in this strategy.

11. Medication Security and Disposal programs

- [Prescription Drug Drop Boxes](#)
- [Drug Take Back events](#)
- Prescription Drug Lock Boxes/Bags
- [Mail-back programs](#)

Assistance with miscellaneous home needs

12. Home delivery of goods and services

Some service agencies and non-profit organizations deliver goods and services (including meals) for homebound adults to help them remain at home.

Examples:

- Friends of Aroostook: Providing Fresh Produce and Firewood in Rural Maine
 - This project involved collaboration between a farm cooperative, volunteer workers, the local Sheriff's office and the Maine Department of Corrections in order to provide food to local seniors in need. This organization also provides firewood to disadvantaged individuals. Here is a description from the [Grantmakers in Aging](#) case study on this program: "...nonprofit farm cooperative that connects local resources with local needs, with volunteers coming from up to 100 miles away to harvest and pick up crops for seniors in their area. The produce is distributed to Meals on Wheels (Aroostook and Eastern Area Agencies on Aging)... and Danforth food pantry. Through a partnership with the Aroostook County Sheriff's office and the Maine Department of Corrections, carefully screened, minimum security inmates plant, maintain, and harvest crops. The inmates learn farming skills, gain meaningful work, and connect and contribute to the community. Volunteer workers and donations keep the farm in operation. FOA also operates Operation Wood Heat, a program that provides free processed firewood to disadvantaged individuals and families. The Salvation Army screens applicants to determine need."
- Heart of the Valley, [Services for Seniors, Inc.](#) in Santa Clara Valley County, CA
 - This non-profit organization was founded through a simple Google search to find different service programs around the country. Santa Clara Valley is a mostly urban county in California that includes the cities of San Jose, Cupertino and Palo Alto. The organization is run by volunteers, and has a goal of helping seniors remain at home. They offer services such as passing along donated assistive devices to seniors without a cost, drug disposal, handyman services and light housework. They also offer their "In-A-Pinch" program, in which volunteers provide services within 24-48 hours for unforeseen needs that are not emergencies, but still are immediate and important such as sick pets, battery or light bulb replacements, safety issues, etc.

Public Safety and Emergency Preparedness

The Centers for Disease Control and Prevention (CDC) has several resources available for individuals, caregivers, and emergency response professionals related to emergency preparedness. One of their reports, *Identifying Vulnerable Older Adults and Legal Options for Increasing Their Protection during All-Hazards Emergencies: A Cross-Sector Guide for States and Communities*, contains information on four strategies to identify vulnerable older adults and their needs in preparation for emergency situations. The [report](#) also contains examples of these strategies across the U.S., in rural and urban areas. The four strategies are:

1. Characterizing the population: By using epidemiologic and demographic data, counties can plan for the delivery of services, medications, medical equipment and other materials needed to support older adults during emergencies.
2. Geographic information systems (GIS): GIS technology facilitates the creation of maps on local population, potential hazards, and community resources. This allows officials and emergency responders to plan for the needs of older adults during emergencies.
3. Building registries: Registries can be developed to identify and keep track of resources needed during emergencies (e.g. medical equipment). Registries can also be used to identify older adults that may require additional assistance during an emergency (e.g. special needs, individuals who lack transportation).
4. Shelter intake procedures: The fourth strategy involves developing shelter intake procedures to identify vulnerable older adults in the community and their needs, so their needs can be met in emergency shelters and upon “discharge” or transitioning back into the community after the emergency is over.

Other resources for emergency-planning:

- CDC website for [Emergency Preparedness for Older Adults, including COVID-19](#) – This website is a gateway to other resources and documents for individuals and family caregivers to prepare for emergencies. It contains links to checklists and documents that can be provided to older adults.
- CDC website for [planners and responders](#) – This website contains training, planning, and response tools and resources for emergency planners and responders as well as individuals, businesses and the broader community.
- CDC’s [Public Health Workbook](#) to Define, Locate, and Reach Special, Vulnerable, and At Risk Populations in an Emergency– This document provides more in-depth information about how to implement some of the strategies above to identify older adults who may require special assistance during emergencies.
- [Rural Caregivers & Emergency Preparedness](#) – This is another gateway to resources and information on emergency planning.

Gun Safety

There is very little evidence and community programming targeting gun safety and older adults. Gun safety programs tend to promote safe storage of guns to prevent pediatric injuries, with mixed evidence.

1. Promoting safe gun storage

King County, Washington used a publicity campaign to promote safe gun storage and provide discount coupons for lock boxes/gun safes in the late 1990s. A case study on this campaign did not find that the publicity campaign and discount coupons increase storage of guns in locked boxes and safes. Another program in rural Alaska provided free gun safes and trigger locks to 240 households. This program did increase gun safe usage, but not trigger lock usage.

2. Family agreements

The greatest risk associated with fire arm ownership in older age is suicide. Individuals with dementia who own guns can potentially place at risk caregivers and family members. There is no research yet on the best way to approach gun ownership in individuals with dementia. One proposed approach is the use of family agreements. These are non-legally binding agreements between family members to establish a plan to retire or give up control of firearms in the future. This strategy has not been formally tested or evaluated.

Additional Information:

- [New York Times](#) article on gun safety and dementia
- [Annals of Internal Medicine](#) article on family firearms agreements which includes a sample

Elder Abuse

The types of programs to prevent elder abuse and assist victims include education for providers and community members on identifying abuse and reporting it. However, evidence on what types of programs are effective is extremely limited. Studies suggest that the following types of programs may be helpful for preventing elder abuse or assisting victims.

1. Services to support caregivers such as housekeeping, respite care, support groups, meal preparation, etc. Providing this type of support specifically to abusive caregivers may prevent future abuse.
2. Money Management Programs to help vulnerable older adults pay bills, make deposits, and pay home care assistants may help prevent financial abuse.
3. Anonymous hotlines or helplines can help callers (including victims of elder abuse) call for support and information on their options.
4. Emergency shelters should be equipped to work with older adults, and adults with <https://ncea.acl.gov/> medical illnesses, disabilities or health issues. Some shelters may not provide assistance to men, which restricts the access of older men who may require assistance.
5. Multi-disciplinary teams can help bridge the gap between an older adult's legal, emotional, and health needs and supports.

The [National Center on Elder Abuse](#) offers online publications on elder abuse and prevention. Several of their [resources](#) address protecting older adults in assisted living, nursing homes, and long-term care.

Community Partnerships & Relationship Building

1. Community policing

Community policing is the concept of law enforcement strategies to use community partnerships and problem-solving techniques to address public safety issues like crime or fear. Community policing has a basis on relationships and collaboration between law enforcement, community organizations and community members.

The U.S. Department of Justice Office of Community Oriented Policing Services ([COPS Office](#)) offers information and technical assistance for local law enforcement agencies on implementing community policing and building [community partnerships](#).

2. Change your Clocks, Change your Batteries

One strategy that has garnered enthusiasm is the City of Waupun's use of the [Change your Clocks, Change your Batteries](#) program. During this event, residents who order pizzas from a regional pizza chain have the option to have the pizza delivered by the fire department in a fire engine. Fire fighters not only deliver the pizza to homes, but also replace smoke detector batteries for free while they are there. This program is a way for community members and emergency responders to interact, build relationships, and learn about fire safety.

Connecting Older Adults to Services

3. Northeast Wisconsin Regional Trauma Advisory Council (NEWRTAC) Fall Prevention App

Several emergency responders affiliated with [NEWRTAC](#) have implemented a mobile application to connect older adults at-risk for falls to county services. EMTs use this application when responding to calls related to falls. EMTs use the application to place a referral to county services such as the Aging and Disability Resource Center (ADRC). The ADRC can then contact the person the referral was placed for to provide fall prevention education. For informational videos about this new service, click [here](#).

Searchable Websites

The following is a list of searchable websites that HeART Staff have found helpful to locate examples of projects and models implemented in other communities.

1. [Rural Health Information Hub](#)

The Rural Health Information Hub contains case studies, models and toolkits on a wide array of issues. A benefit of this website is their focus on rural areas.

2. [Community Innovations for Aging in Place \(CIAIP\)](#)

The CIAIP initiative provided assistance to 14 community partners to implement demonstration projects to support older adults in their communities to age in place. This project was funded federally from 2009-2012. Their website contains an overall report on the approach CIAIP communities took, case reports from demonstration projects, and additional resources.

3. [Grantmakers in Aging](#)

This website is a collaboration between several funders of aging-related programs. Their website contains resources on age-friendly communities, engaging the community, team building, and reports on aging in rural America. In addition, their [Age Friendly America Database](#) contains brief descriptions and contact information for age-friendly projects in other communities. The database is searchable by state, issues, or aging network.

4. [Programs and Services for Older Adults in Wisconsin](#) – Wisconsin Department of Health Services

The Wisconsin Department of Health Services provides information on state programs available to support older adults and caregivers. This website may be useful when determining which services are currently available.

5. [Programs for the Elderly](#)

This website collects information on programs that directly impact seniors. While this website is not affiliated with a major academic or government institution, it has a user-friendly format for searching for programs in specific categories such as health, aging awareness, safety, in-home care, etc.