

National League for Nursing Develops Training for Licensed Practical Nurses in Long-Term Care Facilities

In 2015, RRF awarded a two-year, \$129,885 grant to the National League for Nursing (the League) to design and implement a training program to improve the knowledge and skills of Licensed Practical Nurses (LPNs) caring for older adults in long-term care facilities. The training program targeted professionals and faculty who teach students enrolled in LPN academic programs.

Within the nursing workforce, LPNs play a significant role in meeting the needs of older people, especially in long-term care facilities where they provide an estimated 70% of the licensed care. In addition, LPNs often have other administrative responsibilities in such settings. On any given shift within a nursing home, LPNs may be the highest-level nursing presence onsite. LPNs need preparation to provide high-quality geriatric care as well as non-clinical support for the team of front-line staff with whom they are working (e.g., delegating tasks, managing staff, conflict resolution among team members, patients, families, etc.). Traditional educational courses for LPNs, however, generally do not address these realities.

The League collaborated with the Paraprofessional Healthcare Institute (PHI) to design the new training program, entitled *Integrating Geriatrics and Leadership Skills into Practical Nurse Programs*. Two previously developed training models served as the foundation for the program: 1) the League's *Advancing Care Excellence for Seniors* (ACES) program, funded by The John A. Hartford Foundation, which primarily trained educators of RNs and Nurse Practitioners; and 2) *Core Skills for Coaching-Supervision*, a PHI program that trains supervisors of direct care workers on the introductory management and interpersonal skills they will need to solve problems and improve work performance. The new training program emphasized techniques educators can use to address LPN students appropriately, given that many are adult learners and have lower levels of education than other nursing professionals.

The League conducted six full-day, in-person workshops for LPN faculty members in five states or regions. The areas included: California (north and south); New York/New Jersey; Florida; Texas; and Washington DC. The League held an additional workshop at a national conference in Atlanta, drawing LPN faculty from regions across the country. More than 550 LPN faculty members were trained. Two follow-up webinars were held to reinforce key aspects of the training.

The League administered an online survey immediately following the in-person workshops. By self-report, 96% of participants indicated their knowledge of gerontology and management skills increased. Nearly all participants indicated they intended to use the workshop resources with their LPN students, both in the classroom and during

clinical practice. The League administered a follow-up survey six months after each workshop. By self-report, 72% of participants indicated they were using the resources in the classroom and during clinical practice. The League estimated that more than 1,000 LPN students directly benefited from working with the trained educators and were applying geriatric knowledge and management skills in their work.

Terra Nova Promotes Re-imagining of Aging

In 2016, RRF awarded a one-year, \$84,500 grant to Terra Nova Films to redefine and reframe individual and societal perceptions of aging. The project, the *Re-Imaging of Aging*, was a collaboration between Terra Nova, the American Library Association, FrameWorks Institute, and Vital Pictures, which had recently released the film, *Coming of Age in Aging America*. The project's objectives were to facilitate a broad social dialogue about what it will mean to live and age in a society where one-third of the population is 65 or older; educate the public about the new realities of people living healthier and longer lives and what this may mean with regard to services and public policies; promote civic engagement and the importance of exchanging ideas and sharing viewpoints about how to navigate the new aging landscape; and influence social change with regard to ageism and outdated, stereotypical images of older people.

Partnering with the American Library Association, Terra Nova selected six public libraries to develop a public square-like meeting in their community to explore the changing face of aging. The selected libraries were located in Princeton (New Jersey); Miami; Brooklyn; St. Louis; Denver; and Los Angeles. Planning occurred during a nine-month period, with each culminating event held in May, 2018 to coincide with Older Americans Month. The PBS documentary, *Coming of Age in Aging America*, served as the cornerstone for each event. A discussion followed in which ideas were exchanged between a panel of experts and a gathering of everyday library users, in some cases consisting of multi-generational audiences. Each library was given a comprehensive "toolkit," developed by Terra Nova, to guide the creation of the events. The librarians exchanged ideas via a communication network, facilitated by Terra Nova. Each library received a stipend to help cover costs of promotion, speakers' fees, and refreshments.

The participating libraries took the project much further than expected, finding creative ways to reach their communities. Princeton Public Library held two lead-up events, including an interactive workshop focused on staying active through volunteerism and second careers and a Ted Talk on ending ageism. Princeton's main event attracted 125 people, filling the room to capacity. To meet demand, a re-screening of the film was held for an additional 70 people.

The Brooklyn library mounted a multi-faceted promotional campaign with a strong social media component. Its event attracted 200 participants. Several of the other libraries also used social media effectively. The St. Louis County Library reached more than 30,000 followers through Facebook, Instagram, Twitter, and Tumbler. It also used digital displays on its website and promoted the event on public radio. In Denver, a month-long series of events involving more than 20 community partners explored various dynamics of aging--from financial concerns to aging in community. An

estimated 300 people attended the screening, which was the culminating event of the series. Miami's Public Library focused on reaching intergenerational audiences.

FrameWorks Institute evaluated the project and analyzed pre- and post-screening responses. The responses showed a positive aggregate change in attitudes toward aging, awareness of aging-related issues, and optimism for solving the challenges posed by an aging population. Respondents rated the film-and-discussion events as overwhelmingly positive. A large majority indicated they were more likely to discuss aging-related issues with others in the future as a result of their participation.

Recognizing the value of involving libraries as neutral host sites and vibrant public squares, Terra Nova has begun working toward its goal of creating a national conversation. It is working on future events with libraries in Florida, Michigan, Colorado, and Illinois.

FrameWorks Institute said, "A public conversation is essential...Unless the field of advocates who care about aging issues cultivates a more visible, more informed conversation on older people, it will remain difficult to advance the systemic changes needed to adjust to a society with increased and increasing longevity." Terra Nova's project effectively demonstrated that libraries can serve as important partners in fostering this conversation.

Older People Become Social Security "Story Warriors"

From 2015 to 2017, RRF awarded three grants totaling \$240,000 to the Social Security Works Education Fund (SSWEF) to train and organize older people to use their personal stories to advocate for a secure retirement. SSWEF is one of the nation's leading organizations that informs policymakers and the media about retirement security for older people. It developed a skills-building training program that helps participants become confident spokespeople and advocates for their peers. During the three-year grant period, SSWEF trained more than 3,000 older people to become "story warriors." The program prepared the participants to use their stories and train others on how they can use their own experiences to communicate the importance of the Social Security system to members of Congress, the media, and the general public.

SSWEF's training combines policy education with effective communication strategies to share compelling messages. This helps older people sense their own power and build confidence to take action and have their voices heard. The interactive training sessions covered the power of narrative (how participants can put their stories into a narrative structure and how effective stories are tangible, relatable, immersive, memorable, and emotional); the power of framing; media and storytelling techniques; television-appearance media training for in-studio and stand-up appearances for local and national media; and effective messaging about retirement security.

During the first two years, SSWEF focused on training members of the Alliance for Retired Americans. Training was conducted at Alliance conventions in several states. More than 2,100 Alliance members were trained. As a result more than 200 stories were published in state and national publications. SSWEF administered pre-

and post-training surveys and found an overall increase in participants' confidence to engage with the media and speak publicly.

In the third year, SSWEF partnered with People Demanding Action and the Service Employees International Union to achieve greater geographic, ethnic, and economic diversity among the older people it trained. SSWEF also broadened the focus of its training to include information about Medicare and other related topics because of the increased level of discussions about healthcare by policymakers and the media.

SSWEF engaged its trainees in grassroots actions that provided opportunities for them to put their new skills into action. Working with its partners, SSWEF identified and pitched potential spokespeople to the media and featured them in press releases, disseminated through a media database called Cison. The database comprises more than 1.6 million journalists and bloggers.

By the end of the grant period, SSWEF had trained 952 older people and advocates. SSWEF estimates that at least 20% of trainees will stay up-to-date on current retirement security issues and continue their advocacy.

SSWEF has created a sustainable infrastructure for training and organizing older people on media skills and the use of narrative. Its creation of an open source digital training module will enhance SSWEF's ability to continue training older people across the country. This project could contribute significantly to the political involvement of older people who are more knowledgeable about Social Security and Medicare, the two most critical retirement security programs and the ones likely to be under increased scrutiny in the near future.

Five RRF Grantees Receive Hurricane Irma Relief Funds

On September 10, 2017, Hurricane Irma struck Florida, causing significant damage from high winds and flooding in several parts of the state. RRF investigated grantmaking opportunities that could provide immediate relief for older people whose ability to meet basic needs was at risk as a result of the storm. While several U.S. states and territories had been devastated by storms, RRF decided to focus its grantmaking on Florida because it is a targeted state in which RRF makes direct service grants.

After investigating several funding intermediaries, RRF chose AARP Foundation because of its extensive experience with relief efforts specifically targeting older people following several disasters. AARP Foundation agreed to match RRF funds dollar for dollar. Funds would be directed to basic needs such as food, housing, legal aid, and income security. Preference would be given to funding smaller organizations with on-the-ground experience that could provide immediate, direct emergency relief. Flexibility would be given to grantees to use the funds to support repair of damages to their own facilities, provide essential disaster services, and offer direct aid to meet older people's needs for food, temporary shelter, cleanup, repairs, etc. An expedited, easy application process would be put into place, with quick turn-around.

RRF awarded a \$100,000 grant to AARP Foundation. In turn, AARP Foundation matched RRF's grant with \$120,000, \$20,000 more than anticipated, bringing the total to \$220,000. AARP awarded \$220,000 in grants to five RRF grantees: \$50,000 to Jewish Family & Community Services of Southwest Florida (now the Naples Senior Center); \$45,000 to Council of Aging of Martin County; \$45,000 to Legal Aid Society of Palm Beach County; \$40,000 to Lutheran Social Services of NE Florida; and \$40,000 to Nassau County Council on Aging.

In addition to five RRF grantees, AARP Foundation provided support to an additional 22 organizations in Florida, Puerto Rico, and the U.S. Virgin Islands. In total, AARP Foundation raised \$1.7 million for the Irma Relief Fund. In addition to RRF's grant, the Miami Dolphins contributed \$250,000; online and direct mail raised \$800,000; and AARP and AARP Foundation added \$600,000.

The five RRF grantees that received the funds served older people in Collier, Duval, Martin, Nassau, Lee, Southern Lee, Palm Beach, and St. Lucie counties. Lutheran Social Services of NE Florida provided 7,740 thirty-pound bags of food to 1,290 unduplicated older people living in nine HUD Section 202 Supportive Housing facilities. The Council on Aging of Martin County, Jewish Family & Community Service of Southwest Florida, and Nassau County Council on Aging assisted older people with mold remediation, debris removal, and home repairs, and provided food and appliances such as water heaters. They arranged hotel stays, transportation, and direct financial assistance in the form of gift cards and rent/security deposits. Legal Aid Society of Palm Beach County provided comprehensive legal services to 54 individuals, including assistance with FEMA and insurance claims, mortgage foreclosures, storage facility damage claims, and landlord tenant law issues.

Jewish Family and Community Services of Southwest Florida (JFCS) provided a case example. An NBC TV reporter contacted JFCS about an older woman, Mrs. S., whom she had interviewed about the impact of the storm. A recent widow in her eighties, Mrs. S. was living in a condemned trailer with no roof, not even a tarp, and massive holes in the walls due to hurricane damage. She had set up a bed in the living room because her bedroom had become the coldest part of her house. Her situation deteriorated further when the Naples area experienced unusually low, near-freezing temperatures. Living on a limited, fixed income with no savings or insurance after Irma, Mrs. S. could not afford to fix her bedroom, nor could she fix her cooling and heating unit or her hot-water heater. Since Irma, Mrs. S. had been reduced to taking cold showers, despite having developed both the flu and pneumonia. The JFCS case manager immediately put Mrs. S in a hotel to get her out of the cold. Since then, JFCS has been working with Mrs. S. to find a long-term housing solution.

Northwestern Tests Resistance Exercise to Reduce Frailty

In 2016, RRF awarded a two-year, \$146,090 grant to Northwestern University Department of Physical Therapy and Human Movement to develop and test an intervention that can reduce frailty in older people and, thus, facilitate their ability to remain independent in the community. The long-term objective is to develop a package of interventions that can be administered within the existing Medicaid Home-and

Community-Based Services Waiver programs (in Illinois, this program is known as the Community Care Program).

The rationale for the project was that the frailty syndrome contributes to functional limitations and increased risk of nursing home placement. Muscle strength deficits are one component of frailty. Although resistance exercise has been shown to be effective in improving strength and functioning of older people, its impact on the frailty syndrome has not been clear. Further, it is difficult for older people who are frail to participate in resistance exercises, which are usually geared toward community-dwelling, healthy older adults.

The project's objectives were to: 1) develop an intervention, using a stakeholder panel of physical therapists, home care aides (HCAs), and older clients of the Illinois Community Care Program; 2) evaluate the intervention's feasibility by assessing satisfaction and fidelity; 3) determine adherence to the intervention by assessing participation and completion rates; and 4) measure the effect on clients' physical performance by evaluating pre- to post-test changes in frailty classification, self-reported health, and strength.

A stakeholder panel of physical therapists, HCAs, and Community Care Program clients convened and developed the intervention. The panel recommended that the term "exercise" be avoided because it would make the intervention sound too difficult. Instead, it was called an "activity" program. The intervention, which involved progressive resistance training, based on Strong for Life and the National Institute on Aging Go 4 Life exercise programs, was successfully developed.

The project recruited 126 HCA/client dyads. Half were assigned to the intervention group and the other to the control group (usual care only). Using a train-the-trainer model, a team of physical therapists trained the HCAs in the intervention group to deliver the resistance training safely to their older clients, twice a week over a six-month period, in addition to usual care. The HCAs received a tablet with a pre-loaded exercise mobile application on which to access the exercise intervention. Following a half-day training for the intervention group, a satisfaction questionnaire was administered to the HCAs. Of the 150 HCAs who committed to attending the training, 87% participated (20 did not show up). All who attended a training session rated it very good to excellent. At six months, 96% reported that the training prepared them to lead their clients in the exercise.

Although the project was completed, the results were mixed. The research team hypothesized that HCAs and clients would show greater than 90% fidelity with the training manual. The team developed a text message survey to evaluate fidelity. At weeks 2, 4, 8, 12, and 16, all HCAs received a texted survey. To avoid drift (gradual deviation from the intervention), the research team used a mobile app that provided videos in addition to written instructions for each exercise. Results showed that pain, fatigue, and medical status changes were barriers for some clients in completing the program. All HCAs reported confidence in leading client activities, but client refusals limited adherence.

It was expected that more than 75% of the six-month exercise sessions would be completed. However, this was not the case. Clients completed a range of 1 to 34 exercise sessions out of a possible 52; thus adherence rates ranged from 2% to 65%. Clients completed an average of 8.79 sessions out of 52. The length of an exercise session ranged from 5 to 123 minutes, with a mean of 23.7 minutes. Out of the eight exercises and one warm-up, participants completed, an average of 7.4 out of 9.

In comparison to the control group, clients in the intervention group were expected to show a reduction in frailty as measured by the SHARE-FI, improved self-reported overall health on the PROMIS-global health measure, and improved quadriceps strength. However, the only statistically significant difference was in the improved mental health of HCAs in the intervention group. On average across all participants, mood improved by 0.4 points after an exercise session, while pain decreased 0.19 points.

The project experienced some challenges. There was a higher attrition rate among the HCAs. At three months, there was a 23% attrition rate for the HCAs and 15% for the clients. At six months, the attrition rate was 54% for the HCAs and 25% for the clients. While high, the HCA attrition rate mirrors the 52% turnover rate nationwide.

Although the project lacked significant study outcomes, there was clear value for participants and the organizations that were involved. Trends were in the positive direction. Physical performance measures moved toward improved functioning on the Timed Up and Go measure and fall risk, compared to the control group. Clients indicated that the program helped them have better balance, move more, gain arm strength, and have better range of motion. The HCAs valued being trained on an exercise program, learning new skills, and expanding their job responsibilities.

The research team presented the project at the Illinois Department on Aging Navigating Change Symposium. The team also developed a relationship with SASI, a nonprofit home care agency (an RRF grantee) and revised a training curriculum for the agency's home care aides. The team also connected with AgeOptions to discuss expanding the project and is in the process of writing several manuscripts for submission to journals, including *The Gerontologist* and *Geriatrics*.

International Institute of Metro St. Louis Launches Container Gardening Program for Older Refugees

In 2016, RRF awarded a one-year, \$10,385 grant to the International Institute of Metropolitan St. Louis to create a container gardening program for older refugees. The program was designed to provide new and expanded opportunities for elderly refugees to engage in healthy and meaningful activities.

For nearly a decade, the Institute has operated a Global Farms program that teaches clients how to grow organic and sustainable food in a climate very different from their countries of origin. The program teaches valuable skills and provides a ready source of fresh produce for the participants and their families. However, few elder

refugees were participating in the program. The Institute surveyed its older clients and learned that nearly all were interested in gardening, but they indicated that it would be physically challenging for them to work on the farm. All were enthusiastic about participating in a container gardening program and the prospect of growing plants and vegetables in their own homes. They also liked the idea of being able to help their families by growing healthy food.

In response, the Institute formed the Refugee Elders Agricultural Group program. The objectives were to provide new opportunities for their older clients to engage in goal-driven activities, increase their feelings of inter-connectivity with their families and the broader community; and provide ways for isolated elders to socialize with their peers.

The Institute selected 22 older people to participate in the program. Participants were primarily ethnically Nepali (originating from Bhutan), but also included Arabic-, Swahili-, and Spanish-speaking elders. Assisted by trained interpreters, the Institute's staff administered a mobility-frailty survey to assess the participants' needs. Clients were provided with materials necessary to establish their own container gardens, including potting soil, organic fertilizers, containers, seeds, and gardening tools. Bus passes were given to assist with transportation.

The program consisted of three workshops and four field trips focused on container gardening. A fourth field trip was added due to the enthusiasm and expressed interest of the participants. Local experts from the University of Illinois, St. Louis Science Center, a local gardening society, and a farm volunteered to lead workshops and host field trips.

Each participant received three home visits. During these visits, the Institute's staff assisted the clients with their container gardening, reinforced information, and identified additional issues such as safety and heating concerns. The Institute subsequently addressed these issues. Additional interests also surfaced during the individual visits, e.g., how to preserve harvests and pickle foods, which were incorporated into the workshops.

All of the participants demonstrated success in establishing container gardens. They used available space both inside their apartments or homes and outside, lining porches and patios with dozens of containers. Participants showed resourcefulness, finding additional seeds and containers. They sourced seed for plants common to their traditional diets, such as shiso/perilla peppers, bottle gourd, bitter melon and achocha.

After each event, the Institute surveyed the participants. They expressed high levels of satisfaction for socialization events, particularly field trips. Workshop evaluation results were more mixed, although they were positive overall. The combination of tangible products and opportunities to visit different areas in the community appeared to be the most highly valued components of the program.

The Institute also solicited feedback from participants' family members. They appreciated the socialization opportunities for their older loved ones and the savings from the harvests that were produced. They also enjoyed working with older family

members in planting and expanding the gardens. Most of the participants have continued their gardens, using saved seeds and containers. Participants and their families also reported that they shared saved seeds and extra produce with neighbors, which increased their engagement with the community.

HANA Center Prepares Korean-Americans to Care for Loved Ones with Dementia

In 2016, RRF awarded a second-year, \$40,000 grant to the HANA Center (a merger of Korean American Community Services and Korean American Resource and Cultural Center) for the Korean-American Alzheimer's Research and Education project (KARE). The project's goal was to equip the Korean-American community to best care for its elders who are living with Alzheimer's disease and other dementias. The project was conducted in partnership with Northwestern University's Cognitive Neurology and Alzheimer's Disease Center. The grant followed a first-year \$40,000 grant, which was very successful.

During the first year, KARE focused on providing educational workshops on overall brain health for older Koreans in the Chicagoland community. KARE used a standardized curriculum, *Brain Health as You Age*, to frame the topic in the context of cognitive health overall instead of dementia exclusively. Six workshops were held with a total of 240 Korean elders. Based on lessons learned, KARE used a three-pronged approach in the second year, including workshops for younger Korean elders (65 to 75); small group discussions for older Koreans (age 76+), and an intensive caregiver training program for Koreans of all ages caring for an older loved one with dementia.

KARE held five lecture-style workshops for Korean elders (age 65 to 75) at local churches. The workshops included more in-depth content on Alzheimer's disease and related dementias than had been provided during the previous year. A total of 234 younger elders participated, exceeding the projected 150. Pre-post test results showed an average increase of 20% in knowledge gains about dementia.

Small group discussion-style workshops were held in senior buildings. The workshops engaged 50 older Koreans (age 76+), exceeding the target of 40. The focus was on how to communicate and interact effectively with someone suffering from dementia. In response to a survey, 86% reported that they were "very satisfied" with the program.

In partnership with CLESE (Coalition of Limited English Speaking Elderly, an RRF grantee), KARE conducted two cycles of Savvy Caregiver. This is an evidence-based caregiver training and support program involving a two-hour session, held once a week for six weeks. Monthly support groups for "graduates" of Savvy Caregiver were held to reinforce the lessons and support gained during the intensive program. Through surveys, 96% of the participants reported high satisfaction with the training and 92% reported improved levels of confidence in caregiving.

The project taught several lessons about cultural competency in addressing dementia with the Korean-American community. Caring for, and living with, a family member with cognitive impairment is often considered a source of shame in the Korean culture. Shame deterred many participants from telling their extended families or community members about their dementia diagnosis. Participants requested additional workshops on how to talk with family and friends about their diagnosis.

Another lesson centered around religious beliefs. Participants who attended the workshops in churches were upset by the notion that Alzheimer's disease is not treatable or reversible. They felt that this reflects a lack of belief in God's ability to fully heal any and all diseases. Participants were upset about discussing life expectancy and symptoms within each stage of dementia because they felt such changes were purely in God's hands. In response, the KARE team refrained from using words that elicited strong emotions or hindered participants' engagement. Instead of terms like "irreversible" and "deteriorate," the team began using more neutral language such as "the person may require more assistance with personal care." The project provided a good example of an organization's ability to take lessons into consideration in shaping and refining a program to be more responsive to its community's needs.

The Village Chicago Improves Marketing and Communications

In 2017, RRF awarded a one-year, \$36,987 organizational capacity building grant to The Village Chicago to improve its communications and marketing. At the time of the request, The Village's Board had approved a recommendation to change the name of the organization from Lincoln Park Village to The Village Chicago to reflect its growth and broader geographic reach. The Board recognized that the organization needed a formal marketing/communications plan to guide it in the roll out of its new brand.

The Village Chicago created a strong committee and retained consultants to develop a three-year marketing plan. It launched its new name and logo, created new communication materials, and expanded its social media capacity. Members of the Board, staff, and volunteers were trained to better understand and communicate the organization's new brand. The Village Chicago also conducted a series of programs focusing on different aspects of longevity to help launch its marketing efforts.

RRF funds primarily covered the cost of the project's two consultants who designed marketing materials and assisted with messaging and social media. FrameWorks Institute conducted a "FrameCheck" to ensure that the Village's language was not ageist. The organization also obtained *pro bono* support for other aspects of its marketing and communications work, including contribution of a public relations video.

The Village Chicago implemented additional marketing and communication strategies during the grant period. It established the Trailblazer Award to honor people who inspire others to "navigate the new longevity." The first awardee was Loyola

University's Sister Jean. She was honored at a Village Chicago event that attracted local media and highlighted the organization's work.

A Board of Young Leaders was also established during this time. It is attracting young professionals interested in making meaningful connections between generations. Several are now serving as Village ambassadors, spreading the word and enhancing the organization's fundraising capacity.

Encore Illinois Benefits from RRF's OCB Flex Fund

In 2017, RRF awarded a \$5,000 Organizational Capacity Building Flexible Fund grant to Encore Illinois. Flex Funds help organizations identify their capacity building priorities through readiness assessments or obtain short-term targeted consultation. Encore Illinois is one of seven affiliates of Encore Creativity Corporation, the nation's largest and fastest growing choral organization for adults age 55 and older. Encore provides excellent and accessible artistic environments for older people who seek arts education and performance opportunities under a professional artist.

Although only two years old, Encore IL is growing at a rapid pace. The organization involves more than 500 adults; 95% are age 65 or older. It offers chorale programs in seven different locations across Chicago and the suburbs. Its newest program is a choir for Alzheimer's patients and their caregivers.

The Flex Fund grant enabled Encore IL to engage in an assessment process to identify and establish priorities for potential areas of growth. It recognized that it had a number of capacity building needs, including handling the Board's growth and development, fundraising, volunteer cultivation, and marketing. It needed help to decide what should be done first. Following standard practice for these grants, Encore IL retained a consultant to assess where the organization is today, identify and prioritize current capacity building needs, and provide guidance on the next steps in its organizational development.

The consultant conducted interviews with Encore IL's Board, staff, and leading volunteers and produced a report summarizing the findings, observations, and recommendations. After a review, Encore IL identified three priorities as its next steps: 1) clarify staff roles to show where functional gaps exist and engage in cross-training; 2) create a more collaborative process in selecting the repertoire; and developing its Board (including training and setting terms). In a de-briefing with Encore IL, RRF staff learned that the organization had begun implementing the consultant's recommendations in areas of leadership development, financial controls, and fundraising. Within a few months, a special appeal and three house party events were held, resulting in \$93,000 for a new program offering--a major accomplishment for this small, relatively young organization.

Blue River Provides Services to Southern Indiana Elders

From 2015 to 2017, RRF awarded two grants totaling \$50,169 to Blue River Services (BRS) to improve services for older people residing in affordable senior housing. The grant enabled BRS to hire a part-time service coordinator for Country Trace, a 44-unit housing facility for low-income seniors, located in Palmyra, Indiana. Many of the residents had previously owned family farms but found they could no longer manage them. The housing director recognized that the residents required help on a variety of issues but were often not familiar with resources or used to accessing services.

With RRF funding, BRS hired a service coordinator who completed specialized training on developing person-centered service plans and working with older people. The coordinator worked with each resident to develop an individualized service plan, which was updated at six months. She provided assistance with transportation, helped to complete applications for benefits, and gathered documents required for energy assistance, food vouchers, home-delivered meals, and other services.

During the first year, the service coordinator facilitated 18 educational presentations, based upon residents' interests and needs. Representatives from Harrison County Community Services, Medicaid, the Retired & Senior Volunteer Program, Purdue University, and First Harrison Bank were among the presenters. The presentations attracted an average of 10 residents.

During the second year, the service coordinator continued the six-month assessments, tweaked service plans as needed, and provided access to information and services. A community resource book was created and distributed to each resident. Additional educational sessions were held on topics such as home safety, nutrition, volunteer opportunities, and medication management. Monthly podiatric services were offered, as well as Bingocise and several social activities.

During the second-year grant period, BRS faced a challenge when three of its buildings, including Country Trace, experienced major flooding. One-third of the residents had to be evacuated, many for up to two months. The focus of the service coordinator shifted to providing immediate relief, including temporarily moving tenants to other BRS apartments, finding food, supplies and other basic necessities, and offering emotional support. BRS continued many of the services such as monthly podiatry visits and community resource directory updates continued. BRS also encouraged volunteers to lead programs such as Bingocize (a program that combines Bingo with exercise).

Oregon Leads Way in Advancing Use of POLST

In 2011, RRF awarded Oregon Health & Science University Foundation (OSHU) a three-year, \$597,765 grant for a Special Initiative to expand the use of forms known as Physicians Orders for Life-Sustaining Treatment (POLST), which enable patients who are approaching death to clarify their end-of-life care wishes. Their wishes are converted into a medical order that emergency personnel must honor. In 2014, RRF

followed up with an eighteen-month, \$139,920 grant to promote quality assurance in states' implementation of the POLST paradigm.

Recently, Susan Tolle, M.D., who served as PI on the Special Initiative, shared with RRF her published manuscript about changing trends in Oregon's use of POLST. OSHU paid for Open Access to ensure that the manuscript would be widely shared. Dr. Tolle stated, "The prior support of The Retirement Research Foundation played a pivotal role in positioning us to advance to the place where nearly half of those who died in 2015-16 had a POLST form in the Oregon POLST Registry at the time of death. Likely we have crossed the 50% mark in 2018 as many hospice programs were telling patients to call hospice and not 911 and completing POLST forms but not submitting them to the Registry in 2016. Many of these programs are now submitting to the Registry. We remain deeply grateful for your prior support."

Oregon, which began POLST nearly 30 years ago, leads the nation in its uptake. Comparing a database of Oregon POLST forms and state death certificates, OHSU researchers found that 45% of Oregonians who died between 2015 and 2016 had filled out a POLST Form, compared to 31% between 2010 and 2011. Research also found that the length of time between when people filled out the form and their time of death increased from an average of five weeks to 21 weeks. Increased utilization of POLST was found to be most prevalent in people age 85+.

All states are now involved in some way with the POLST movement, and all but one have some type of POLST form in place. However, most states do not have registries like Oregon does, and the rate of adoption varies considerably. The National POLST Paradigm Office, which promotes POLST adoption and provides technical assistance, is involved in a Technology Consensus Project to provide advice to states and share best practices on how to integrate POLST with technology (e.g., registries, Electronic Health Records, mobile technology, etc.). Although the spread of POLST varies, there is clearly an increase in its use, and more states want to be sure they are implementing forms and program elements in accordance with national standards.

Note: RRF staff takes much of the information for Grant Highlights directly from grantees' final reports. Staff often asks questions and holds discussions with grantees to get a more complete understanding of the results of grants and to understand challenges grantees faced.