

Age-Friendly Status Check

LIFE AT HOME AND IN THE NEIGHBORHOOD

SEPTEMBER 2021



AGE-FRIENDLY MINNESOTA

Life at Home and in the Neighborhood

We will live in the homes and communities that we desire, and have access to the quality services and housing we need to do so—safely, comfortably, and affordably.

Background

This document is one of eight briefs that explore current approaches and impact of the Minnesota Board on Aging, Minnesota's aging network,¹ and Department of Human Services. A better understanding of the foundation provided by our existing work will guide us as we develop strategies for Age-Friendly Minnesota. We aim to stretch our thinking about what aging can and should mean for all Minnesotans—creating policies, communities, and services that see age in everything and empower us with what we need to live with dignity and autonomy at every stage.

The briefs are not exhaustive but aim to capture major ideas, prompt needed questions and discussions, and help us identify priority opportunities for greater impact and better outcomes. All briefs are available at the Age-Friendly Minnesota website.

Overview

Our homes and neighborhoods are always important, and they become even more so in older age. Does where we live—both our dwelling and our immediate community—enable us to live safely, comfortably, and affordably, and to remain connected to the people and things we care about?

Minnesota Board on Aging (MBA) and Department of Human Services (DHS) provide a wide range of services and supports that help older adults live with autonomy, dignity, and maximal independence. This support, continuously evolving to meet changing needs and test new strategies, includes an array of services that help people be safe and well in day-to-day life and remain living at home. Minnesota consistently ranks as one of the top states for providing services and supports to older adults and people with disabilities, according to a national scorecard by AARP and others.²

Minnesota's aging network, overseen by MBA, annually supports over 189,000 older Minnesotans and caregivers, providing services and supports to one in six older Minnesotans. As such, each year it provides funding to around 100 organizations and providers throughout the state who deliver a wide range of quality, affordable services—such as caregiver supports, respite, adult day, indoor and seasonal chore services, transportation, home modification, nutrition, and supports for people with vision loss.

¹ The Older Americans Act of 1965 established a national network of federal, state, and local agencies to plan and provide services that help older adults, including American Indian and Alaska Native elders, to live independently in their homes and communities. This interconnected structure of agencies is known as the aging network.

² [Long-Term Services & Supports Scorecard](#), developed by AARP, The Commonwealth Fund, and The Scan Foundation.

MBA, in partnership with Minnesota’s seven Area Agencies on Aging (AAAs), also operates the Senior LinkAge Line, a free statewide service that assists older Minnesotans and caregivers by connecting them to local services.

Since 2001 the Minnesota Legislature has committed funding to DHS focused on helping more people remain living at home rather than relocate to long-term care facilities. This funding, known as Live Well at Home® grants, is awarded to organizations that work to develop and provide services that help older adults live at home in their communities. Each year between \$6 million to \$8 million dollars is awarded to Live Well at Home® grantees throughout the state. Live Well at Home® includes a focus on developing capacity in communities to be able to provide needed services to older residents. This is especially critical in rural areas where fewer services are available.

The demographic shift to an older population will drive demand for even more services at home. Age-friendly communities should include the services people want at the time that they need them. Services must be affordable to those receiving them, and wages paid to those providing them must be enough to attract and keep workers in these jobs.

A major piece of this work involves not only age demographics, but demographic shifts related to race, ethnicity, and culture. Minnesota’s population, including older adults, is becoming more diverse in these ways and others, which has very significant implications for service planning and delivery. Rural residents also face scant options for housing, transportation, and services. Service access and equity are fundamentally important and must be at the center of this work.

For the purposes of this document, *Life at Home and in the Neighborhood* includes topics related to housing, transportation, community design features, and home- and community-based services (HCBS) in a broad sense. We understand “home” to mean where a person lives—whether it be the house where you raised your family, a condo or apartment, an assisted living community, care facility, or somewhere else.

While it is difficult to capture the scope of such services provided through MBA and the aging network, the following section highlights some of the key ways that we are building capacity in communities around the state.

Impact and Examples of Current Work

This section describes themes that emerged related to our impact in areas related to Life at Home and in the Neighborhood. Each theme is followed by examples of strategies, actions, and grants that help demonstrate how it is being carried out.³

We promote and provide an array of culturally-specific services to Minnesotans who are Black, Indigenous, and people of color.

Minnesota’s population is becoming more diverse—particularly in race, ethnicity, and culture, but also in terms of religious beliefs, sexual orientation, and physical and cognitive abilities, among other things. The aging network and DHS are working to better understand and develop capacity for providing services that

³ All Live Well at Home® grants referenced in this brief were awarded in State Fiscal Years 2019, 2020, or 2021.

meet the needs of various groups effectively and respectfully. An important part of this work is building capacity for culturally-specific providers to support older residents of their own communities, as they are usually best positioned to do.

Recent Live Well at Home® grants have helped both urban and rural providers develop and deliver culturally-appropriate services for Minnesotans from a range of backgrounds:

- African Community Senior Services in Minneapolis is developing, expanding, and sustaining services to African older adults. This work includes assessing the needs of and eligibility for supports/services of 1,000 people, providing community support referrals to 500 people, and providing transportation services to 200 people.
- Lutheran Social Service of Minnesota in Kandiyohi County is partnering with immigrant communities to identify community ambassadors; holding focus groups on community needs and culturally appropriate service delivery; developing culturally appropriate caregiver and companion programming and training; developing culturally appropriate Friends in the Kitchen events; and expanding culturally specific offerings of LSS meals for distribution.
- SEWA-AIFW, Inc. which assists South Asian older adults in the Minneapolis-St. Paul metro area, is helping provide in-home respite (including a pilot of technology-based remote respite), develop a group respite program, engage older adults in activities that reduce isolation and support management of chronic disease, buy an accessible van, and develop a South Asian food pantry.
- CAPI USA, which provides community-based services to help low-income Hmong elders in Northwest Hennepin County, is providing case management, adult caregiver support services, benefits enrollment assistance, transportation, and companionship with the help of volunteers.
- Vietnamese Social Services (VSS) is helping Vietnamese and Karen immigrants in the Twin Cities metro fight depression and isolation, challenges that are particularly pronounced for refugees and immigrants.

Additionally, one AAA has held conversations with two community advocates for Hispanic/Latino families to increase access to HCBS by encouraging providers to recruit bilingual workers and/or translate materials into Spanish.

We support older adult independence, safety, and community living through home modifications.

Many homes—especially houses and buildings constructed during particular eras—offer few if any design features that accommodate mobility challenges. Home modifications targeted to a person’s needs can make it possible for them to remain living safely in their home, and can be a relatively inexpensive way to overcome a significant housing barrier.

Some AAAs are addressing this issue by partnering with their regional Habitat for Humanity organizations. In one region, the AAA helped Habitat for Humanity develop its Age in Place program. In another, the AAA connected contractors who were willing to volunteer their services with Twin Cities Habitat for Humanity and Sustainable Resources, Inc. in order to reduce wait times for people who needed modifications to their homes.

Live Well at Home® grants also support this work. Two examples include:

- Rebuilding Together Twin Cities increased capacity to modify low-income older adults' houses within the seven-county Twin Cities metro area by enhancing accessibility, fully deploying a second ramp team, strengthening the financial stability of the program, and continuing to partner with St. Catherine University.
- Northwest Community Action in Badger is providing home modification services for older adults and volunteer management in Roseau, Kittson, Lake of the Woods, and Marshall counties.

We educate stakeholders and advocate for affordable housing and lifecycle housing.

Housing is increasingly expensive, and most homes still are not constructed with a full lifespan in mind. However, few things in life are as fundamental as housing. Our work in housing includes efforts to educate and encourage leaders and key decision-makers about the importance of affordable and lifecycle housing.

AAAs are working on this issue across sectors. One leveraged its relationship with a regional planning body to disseminate information on life cycle housing, planning, and development to representatives of cities, townships, counties, and tribal governments. Another participated in planning with a city's Housing and Redevelopment Authority (HRA) Board related to affordable senior housing. A third partnered with AARP to coordinate a training on lifelong homes by a Certified Aging in Place Specialist (CAPS) and architect with expertise in Universal Design.

We help create new transportation options and alternatives to driving.

Our automobile-focused culture makes getting around a challenge for those who do not or cannot drive. We all need convenient, affordable, appropriate transportation for everything from medical appointments to errands, to social gatherings and community events—to simply be who we are and do the things that matter to us. As we think about an older society, lack of transportation options is a major barrier to connected, autonomous living in later life.

Numerous providers in the aging network offer transportation assistance among their available services. However, the below examples highlight two notable transportation-specific efforts funded by recent Live Well at Home® grants.

- Newtrax is expanding current service of circulator bus loops for older adults in five Ramsey County communities, and launch loops in additional locations. This includes providing connections to affordable food options.
- SmartLink, the coordinator of non-emergency medical transportation for Scott and Carver counties, is creating an innovative transportation option for rural residents. The project includes education for residents about all available transportation options via a Travel Trainer and the addition of three accessible passenger vans that are available via a kiosk using enhanced technology for requesting, scheduling, providing, tracking and billing rides.

We contribute to more inclusive design of outdoor spaces and the built environment.

When we step out our front doors into our neighborhoods and communities, the design of those spaces can determine how well we can safely and comfortably move around and participate in our communities.

AAAs are working to bring a lifespan approach to how outdoor spaces and buildings are being planned and designed. One AAA participates in a regional collaborative bike-friendly planning initiative. Another has partnered with a regional foundation to advise on age-friendly grants to improve basic infrastructure in several small communities—such as the addition of a sidewalk outside a local swimming pool, and the installation of handicap accessible doors and bathrooms at community centers.

Live Well at Home® grants have also supported improvements to the built environment. A recent grant to the Lao Advancement Organization of America in Minneapolis supported the resurfacing of the parking lot of the Lao Cultural Center, an important institution in the Lao community, and the creation of a safe and welcoming presence in the neighborhood through landscaping and outreach.

We provide opportunities to innovate.

Seed-type funding usually is needed to give promising ideas a real shot. The aging network helps provide this funding to test new approaches to meet changing needs. Below are two such examples from recent Live Well at Home® grants.

- Prairie Five Community Action Agency in Montevideo purchased and outfitted a vehicle to serve as a Mobile Senior Center that can bring community-based services to residents in more than 30 rural communities. Services offered include blood pressure and blood sugar checks, foot clinics, mobile food shelf, application and information assistance, support groups, access to a computer, and welcome to Medicare classes.
- Episcopal Home Care and Services in St. Paul piloted an innovative home care delivery model—which uses a team rather than a single caregiver—to serve racially and economically diverse elders.

We expand promising models.

New approaches that are both effective *and* cost-effective will be needed to help us thrive in an older Minnesota. Our work includes investing in models that show promise for addressing complex issues.

One AAA is exploring Mobility Management software that has the capability to process payments, schedule rides and coordinate services. This innovative model would help meet transportation needs in rural communities.

A Live Well at Home® grant to Mobility 4 All has allowed this organization to adapt its Twin Cities personalized ride service program to meet the unique needs of two cities outside the metro, beginning with Rochester, then Winona. Mobility 4 All is extending ride service to low-income, older adults in single-family homes by collaborating with senior centers, veterans' organizations and home care providers. It also will develop an online "CareDriver Portal" for recruiting, vetting, training and coaching of Mobility 4 All CareDrivers and volunteer drivers.

Rebuilding Together Twin Cities' recent Live Well at Home® grant will allow the organization to expand services to rural southwestern Minnesota, specifically in Jackson, Cottonwood, and Nobles counties. This includes accessibility modifications for 25 homeowners; expanding existing partnerships; and developing new partnerships with strategic organizations that work on aging-in-place issues. The project also includes hiring a program manager for southwestern Minnesota.

We help prevent homelessness among older adults.

Homelessness among older people is rising faster than other age groups. Wilder Research's 2018 Minnesota homeless study⁴ found homelessness among people ages 55-plus increased by 25% from 2015 to 2018, while homelessness overall grew by 10% during the same period. Lack of affordable housing was cited as the primary reason.

AAAs work to prevent and address homelessness in a variety of ways. Homelessness resources are included in MNHelp.info so that Senior LinkAge Link staff can refer to them, and Senior LinkAge Line staff receive training and education related to helping people who are homeless or at risk of homelessness. Some AAAs partner with other organizations to train homelessness service providers on issues specific to older adults, including cognitive decline. AAAs also work with other partners like police departments and emergency management staff to make them aware of how Senior LinkAge Line can assist people who are homeless or at risk of homelessness.

Staff and volunteers from several AAAs participated in Heading Home Together training, which helped them identify people at risk of homelessness. This new knowledge has helped staff connect older adults in danger of becoming homeless with the supports and services they needed.

Live Well at Home® grants also address homelessness. One example includes a grant to Mahube-Otwa Community Action Partnership, Inc., in Park Rapids, which is helping older adults who are homeless, or at risk of becoming homeless, find and keep safe rental housing in Becker, Hubbard, Mahnomon, Otter Tail and Wadena counties.

We advocate for practices and policies that support home care workers.

In an older society, more home care workers will be needed to provide services. These critical jobs, which thousands of older Minnesotans rely on to help them stay at home and out of care facilities, are among the fastest-growing occupations in Minnesota.⁵ However, they also pay little and often don't include benefits or opportunities for full-time work.

AAAs are working to cultivate a strong workforce able to provide high-quality services and earn better wages. One AAA is supporting a regional service provider to work with a consultant on multiple issues related to staffing: improving staff retention rates; developing a more positive work culture; attracting talent of all ages (including older adults); and communicating more effectively with staff.

During COVID-19, another AAA connected with the Legislature in support of temporary pay increases for personal care assistants (PCAs), who were leaving their jobs in order to collect unemployment insurance that had been increased during the pandemic and now exceeded their wages.

⁴ "[Older Adults Experiencing Homelessness in Minnesota](#)," Minnesota Homeless Study 2018. Wilder Research.

⁵ "[Growing Demand for Caregivers](#)," MN Department of Employment and Economic Development, 2016.

Gaps and Opportunities to Consider

The following items present key points related to addressing Life at Home and in the Neighborhood as part of Age-Friendly Minnesota. This list is not comprehensive, but an important starting point on which more will be built.

American Rescue Plan Act: Federal funding creates new opportunities

As part of the American Rescue Plan Act of 2021, a coronavirus relief bill, MBA received funds via the Administration for Community Living that can be used to invest in Title III⁶ program areas, including those that fall into this category. MBA will be working with AAAs to determine how these one-time funds can be most impactfully invested; the work must be implemented over the funding period, which runs through September 2024.

Inclusive and equitable services

- Broadly speaking, there is a fair distance to travel concerning diversity and equity. While Minnesota is among the very top states in the long-term services and supports it provides for older residents, we know that people of color and other groups fare significantly worse in our current system.
- DHS has been leading a multi-year effort to understand and help close racial and ethnic disparities in home and community-based services. The project, a partnership with the University of Minnesota Center on Healthy Aging and the MN Diverse Elders Coalition, runs from late 2019 through 2022 and has been identified by the Blue Ribbon Commission⁷ as a key strategy to advance equity in state services for Minnesota's older adults and individuals living with disabilities. While not focused exclusively on older adults, people ages 65 and older are a major piece of the work. Age-Friendly Minnesota has been somewhat connected to this effort and should remain so. Findings and recommendations that emerge from the research should be coordinated with and integrated into Age-Friendly Minnesota's planning and strategies.
- A recent report undertaken for Trellis (formerly Metropolitan Area Agency on Aging) includes important insights and recommendations related to barriers that influence the ability of older adults of color to access and benefit from Title III services. [*Equity Assessment on Access to Title III Services for Native Americans and Minority Older Adult Populations*](#) presents a community-centered view on racial equity and aging in the Twin Cities, with a special focus on both the common and unique needs of older adults in the Black, Latinx, and American Indian communities.⁸
- Progress has been made and continues to be. Concentrated efforts of time, resources, and planning are being committed across the board—from Senior LinkAge Line to AAAs to Adult Protective Services—to better understand the specific gaps and inequities and determine ways to evolve in order

⁶ Title III of the Older Americans Act—Grants for States and Community Programs on Aging—funds supportive services (of numerous types), nutrition programs, health promotion and disease prevention services, and caregiver support.

⁷ The Blue Ribbon Commission on Health and Human Services was created by the Minnesota Legislature and Governor Tim Walz in 2019 to develop an action plan “to advise and assist the legislature and governor in transforming the health and human services system to build greater efficiencies, savings, and better outcomes for Minnesotans.”

⁸ [*Equity Assessment on Access to Title III Services for Native Americans and Minority Older Adult Populations*](#), SDK Communications + Consulting, June 2021.

to meet those needs. This will require continued dedication, humility, and openness to finding and undertaking new ways of working.

Rural challenges

- Gaps and disparities exist in rural communities, including tribal communities. Rural hospitals and clinics are closing, making it difficult for those residents to access care, particularly given a shortage of transportation options. Rural residents also often have few available HCBS. There may be an opportunity to identify critical HCBS to ensure that all communities have access to the most-needed services that allow people to remain living safely at home as independently as possible and delaying or preventing the need to move to a care facility. This approach would be similar to Critical Access Hospitals, a federal designation given to eligible rural hospitals in order to help keep essential services in rural areas.

Greater attention to the built environment

- Given the importance of the design and availability of green and outdoor spaces to all ages, the Governor's Council on an Age-Friendly Minnesota should consider adding a representative from the MN Department of Natural Resources to the Council. Active participation from the Department of Transportation, already represented on the Council, will be critical to sustain.

A missing layer?

- A gap was noted between Senior LinkAge Line and case management. While Senior LinkAge Line provides a wealth of information, some individuals need more in-depth help navigating services, resources, and personal situations. This level of support currently isn't available, although Caregiver Counseling, a service provided by MBA, offers something similar in the context of caregiving. Consider whether this type of service is important and feasible to develop and provide.

Thank you to Minnesota's seven Area Agencies on Aging and Live Well at Home® grantees for the examples of work highlighted in this brief.