The Aging Initiative: Developing a Framework for Change

No Hungry Senior: A Collaborative Approach

Community-based Eye Care for Older Memphians
A Holistic Approach to Improving Vision Health Outcomes

Aging in Place Program
Improving Quality of Life for Older Adults
The Aging Initiative
Developing a Framework for Change

Katie Midgley
Director of Research + Evaluation
Plough Foundation Aging Initiative

*Stages of Development*

**Stage 1 – Demographic Assessment**

- Shelby County: 112,777 adults 65+ in 2023, 58% growth to 178,248 in 2030, 17% of all county residents will be 65+.

**Stage 2 - Internal Scan**

- Foundations past funding documents reviewed to identify trends & patterns.

**Step 3: External Scan**

- Social Services
- Philanthropy
- Government
- Faith-based Institutions
- Academia
- Healthcare
But something is still missing…?
How do we capture the voice of the older adults themselves?
The Aging Initiative: *Capturing the Voice of our Older Adults*

**AdvantAge Survey: Project Process**

1. Refined survey w/partners
2. Survey implemented locally
3. Data analytics reports provided
4. Expert facilitates group conversation
5. Report generated + disseminated

<table>
<thead>
<tr>
<th></th>
<th>Income under $20,000</th>
<th>Income $20,000 or more</th>
<th>DK/Refused Income (to be imputed)</th>
<th>Total</th>
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</thead>
<tbody>
<tr>
<td>Memphis</td>
<td>100</td>
<td>156</td>
<td>58</td>
<td>314</td>
</tr>
<tr>
<td>Other Shelby County</td>
<td>51</td>
<td>156</td>
<td>30</td>
<td>237</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>151</strong></td>
<td><strong>312</strong></td>
<td><strong>88</strong></td>
<td><strong>551</strong></td>
</tr>
</tbody>
</table>

**Process of Developing Response**

- Plough releases RFP for first time (ever)
- Hosts 3 plenary sessions on key aging issues
- Develops scoring matrix for RFP & Plough Vision to evaluate response submissions
- Letters of intent discussed in staff sessions
- Aging Initiative - $12 million in grants
The Aging Initiative

Overview on Three-Year Funding

- Coordinated Response to Elder Abuse
  - Southern College of Optometry
  - West TN Home-builders
  - No Hungry Senior
  - WKNO
  - Aging in Place
  - Elder Crisis Hotline
  - Aging Mastery Program

Funding amounts:
- $3.45 MM
- $180,000
- $106,000
- $3.9 MM
- $200,000 (4 awards)
- $3.9 MM
- $34,000
- $375,000
No Hungry Senior

A Collaborative Approach to Addressing Senior Hunger

Sally Heinz
President & CEO
No Hungry Senior Partners

- Plough Foundation, *funding agency*
- MIFA (Metropolitan Inter-Faith Association), *lead agency*
- Aging Commission of the Mid-South
- Baptist Memorial Healthcare
- Catholic Charities of West Tennessee
- CoactionNet
- Memphis Jewish Federation
- Methodist Healthcare
- Mid-South Food Bank
- University of Memphis School of Public Health
No Hungry Senior Overview

Goals
- Reduce the number of food-insecure seniors in Shelby County
- Improve/maintain seniors’ overall health
- Reduce hospitalizations and ER utilization

Eligibility
- Shelby County resident
- Age 60 and older
- Non-institutionalized
- Not currently accessing other meal/nutrition services
- No feeding restrictions (e.g., tube feeding)
- Assessment confirms need
Goals & Eligibility

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No Hungry Senior Workflow

Referrals from Aging Commission
Screening Survey (13+ points)

Referrals from hospitals
Screening Survey (8+ points)

In-home client assessments
Conducted by MIFA staff to determine service type

Hot meals
Delivered daily by MIFA (Weekdays)

Shelf-stable box
7 meals/7 snacks
Delivered weekly (Monday – Saturday)

Grocery box
22lb box delivered by Catholic Charities (Monthly)
No Hungry Senior Volunteers

55% Of meal deliveries

96% Client satisfaction
Overview

Outcomes

- **1,757** seniors
  - High-risk population
  - Client satisfaction
- Served more than **648,000** meals
- Improved client health outcomes
  - Methodist Research Partnership
- Cost-efficient service

The cost to serve a client is less than $7 per day.
Client Demographics

**Health**
- Hypertensive (82%)
- Diabetic (44%)

**Identity**
- African American (76%)
- Female (61%)

**Social**
- In Poverty (51%)
- Live Alone (40%)
- Widowed (33%)
### No Hungry Senior Client-Reported Outcomes

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Baseline</th>
<th>Follow-up</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health score</td>
<td>9.2</td>
<td>8.4</td>
</tr>
<tr>
<td>Sense of loneliness score</td>
<td>4.8</td>
<td>4.3</td>
</tr>
<tr>
<td>ER visits in past 12 months</td>
<td>60%</td>
<td>51%</td>
</tr>
<tr>
<td>Hospitalization in past 12 months</td>
<td>49%</td>
<td>38%</td>
</tr>
<tr>
<td>Fell in past 12 months</td>
<td>49%</td>
<td>41%</td>
</tr>
<tr>
<td>Eat less than two meals per day</td>
<td>63%</td>
<td>10%</td>
</tr>
</tbody>
</table>

Comparison of intake assessment and one-year follow-up. Lower numbers indicate improvement. All changes were statistically significant.
<table>
<thead>
<tr>
<th>Outcome</th>
<th>1 year pre</th>
<th>1 year post</th>
<th>% change</th>
</tr>
</thead>
<tbody>
<tr>
<td>ED use</td>
<td>326</td>
<td>274</td>
<td>-16%</td>
</tr>
<tr>
<td>Inpatient admissions</td>
<td>487</td>
<td>323</td>
<td>-34%</td>
</tr>
<tr>
<td>Outpatient visits</td>
<td>334</td>
<td>308</td>
<td>-8%</td>
</tr>
<tr>
<td>Observation</td>
<td>117</td>
<td>85</td>
<td>-27%</td>
</tr>
<tr>
<td>Other encounters</td>
<td>105</td>
<td>86</td>
<td>-18%</td>
</tr>
<tr>
<td><strong>Total encounters</strong></td>
<td><strong>1369</strong></td>
<td><strong>1076</strong></td>
<td><strong>-21%</strong></td>
</tr>
</tbody>
</table>

Comparison of pre-enrollment vs. post-enrollment utilization. N=229 patients.
Overall Healthcare Utilization by Months in Program
Impact on Cost of Care – Inpatient Only

Month 1: $292,349
Month 2: $336,718
Month 3: $179,847
Month 4: $162,688
Month 5: $176,390
Month 6: $63,662
Month 7: $102,219
Month 8: $63,097
Month 9: $68,964
Month 10: $60,799
Month 11: $29,365
Month 12: $68,964
Client Impact

“I hadn’t had a good hot meal in years. I went to my doctor last week, and I gained six pounds.

I can also walk to my mailbox and back, which I have not been able to do for months!”

- Mrs. M.
Community-Based Eye Care for Older Memphians Program
Who We Are

- Consistently high academic ranking
- Largest optometric clinical facility in nation
- 3 clinics + 1 mobile unit, + community-based care & education
- Many patients seen yearly
  - **50,000** - clinics
  - **20,000** - community-based settings
The Catalyst

What inspired us to do this work?

Data on Baby Boomers + Aging in Place

Nursing Home & Assisted Living Program Expansion

AdvantAge Survey

Good relationship with Plough Foundation
The Catalyst

What inspired us to do this work?

Data on Baby Boomers + Aging in Place

Eye Disease & Visual Impairment

Prevalence
3x increase (per decade)

40+ years

60+ years

Falls
7x more likely (#1 injury related cause of death)
The Catalyst

What inspired us to do this work?

AdvantAge Survey

- Prevalence of Medical Conditions associated with eye disease & visual impairment
- Infrequency of eye exams among adults with lower income

Eye Disease (25%)
Diabetes (33%)
Hypertension (66%)
Location of Care Events

Locations:
- Lewis Senior Center
- True Light Baptist Church
- Divine Faith Church
- Lucille McWherter Senior Center
- Memphis-Jewish Senior Housing Development
- Promised Land Baptist Church
- Frayser Raleigh Senior Citizen
- Bickford Senior Center
- SMA, Inc.
- Boulevard Church of Christ
- Greater Faith Tabernacle
- St Jude Baptist Church
- St Patrick Catholic Church
- St Mary’s Episcopal Cathedral
- North Memphis Library
- Cornelia Crenshaw Library
- Orange Mound Senior Center
- Greater Adelaide Ministries
- Christ Missionary Baptist Church
- Hollywood Park
- Bartlett Senior Center
- Church of Christ at White Station

Memphis South Library
# The Pilot Program

## What did we do?

<table>
<thead>
<tr>
<th>Eye exams &amp; glasses</th>
<th>Continuing care</th>
<th>Care events</th>
</tr>
</thead>
<tbody>
<tr>
<td>• 542 seniors</td>
<td>• Transportation provided</td>
<td>• 26 events over 15 months</td>
</tr>
<tr>
<td>• Cost-free</td>
<td>• 2 years (1 original + 1 grant)</td>
<td>• 12 ZIP codes</td>
</tr>
</tbody>
</table>
Free Eye Care for Seniors
Shelby County residents only, ID required

December 8
Eye exams will begin at 8:30 am
Memphis Public Library, South Branch
1929 South Third St.
Memphis, Tennessee

- Shelby County residents only, age 60 and above
- Must show I.D.
- Limited exams available; first come, first served
- Free eye exam and glasses*
- Insurance not required

*In exchange for a free exam and eye wear, patients will be asked to complete an anonymous survey.
The Impact

What did we learn?

91%
Prescription vision correction
99% - got glasses

32%
Referred for continuing care
73% - kept appointment
The Impact

What did we learn?

Challenges

• Lack of insurance (37%)
• High co-pays (24%)
• Transportation issues (18%)

Location Preferences

• Community or senior center (88%)
• Church or other place of worship (69%)
• In own home (45%)
Patient Feedback

• “I hadn't had an eye exam in over 12 years before this exam. I’m ready to take my wife the next time! I think this is a needed program and good for the community.”
  - Fred, Age 74

• "Good idea to bring this service to my church! I couldn't afford eye glasses otherwise.”
  - Glynnis, Age 80

• "It was truly a blessing.“
  - Susan, Age 66
What’s Next?
Dwayne Spencer
President & CEO
dspencer@memphishabitat.com

We build strength, stability and self-reliance through shelter.
Habitat for Humanity of Greater Memphis’ Aging in Place Program (AIP)
Habitat’s Vision

A world where EVERYONE has a decent place to live.

In Memphis, we work every day to help new homebuyers and existing homeowners live in safe, decent, accessible homes they can afford.
Did you know?

> 26.2%

$827

88

> 50%
Progress

490+

400+

101+
Need in Memphis/Shelby County

- 112,000 seniors in Shelby
- 10,989 in poverty
- 7,900 need AIP help
- 500
- 350

• Neighborhood Revitalization + addressing AIP

• $3.9 million from Plough, plus leveraged dollars from other sources
PLOUGH FOUNDATION
funding, oversight, 3rd party inspection of select sample, collaboration with larger initiative

HABITAT as LEAD AGENCY
- outreach & publicity
- procedure & document creation
- partnership management
- approval of scopes of work
- tracking progress of all homes in program
- procuring lumber & volunteers
- surveys & evaluations
- case management & referral services
- reporting to Plough

SOS
- intake & application processing
- home assessment & drafting scope
- oversee & inspect construction
- close out client's case

MLGW
- initial inspections & energy recommendations
- final inspections & energy training
- building ramps (clients identified by Habitat/SOS)

Habitat as Service Provider
- same as SOS
Without the AIP Program

• “Just deal with it”, no other options!
• Choosing between repairs & basic needs
• Prior workmanship/victimization = more repairs
• Loss of homeowner’s insurance
• Increased health care costs
• Forced to move out of home (multiple causes)
• Community impact
Lessons Learned

• Collaborating with partners
• No idea how their homes “work” or the costs
• Age related problems with memory
• Seniors fearful of new people/things & being taken advantage of
• Variety of problems other than repairs/mods = hoarding, exploitation, isolation
• High level of intensive management & communication with seniors
• Working “through” adult children
Evaluation – Overview

- Anthropologists on staff to assess client perceptions

<table>
<thead>
<tr>
<th>Evaluation Measure Category</th>
<th>Client Reported Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Customer service</td>
<td>Good</td>
</tr>
<tr>
<td>Sense of safety &amp; health (in home)</td>
<td>Improved</td>
</tr>
<tr>
<td>Utility &amp; health costs</td>
<td>Improved</td>
</tr>
<tr>
<td>Impact on length of stay (in home)</td>
<td>Improved</td>
</tr>
<tr>
<td>Socialization</td>
<td>Improved</td>
</tr>
<tr>
<td>Community satisfaction</td>
<td>Improved</td>
</tr>
</tbody>
</table>
Improved Utility Savings

Percent of Respondents with amount in utility savings

- 48% $120 / year
- 27% $480 / year
- 9% $720 / year
- 16% $1,092 / year
“I’m warmer, which means my arthritis doesn't bother me anymore. I don’t fall anymore in this bathroom. My floors were dangerous in the bathroom and that has been eliminated since the repairs!”
Truly Aging in Place

42% very likely to move to nursing homes within 1 year without Aging In Place

<table>
<thead>
<tr>
<th>Reasons for Moving</th>
</tr>
</thead>
<tbody>
<tr>
<td>Major repair problems</td>
</tr>
<tr>
<td>Major accessibility problems</td>
</tr>
<tr>
<td>Lack of homeowner’s insurance</td>
</tr>
<tr>
<td>Hopelessness</td>
</tr>
<tr>
<td>Lack of small devices</td>
</tr>
</tbody>
</table>

Testimonial

“In the summer I would burn up and in the winter I would freeze, but not anymore. It is not raining on me anymore, and I don't have to be scared when it storms because of the new roof.”
AIP Case Study: Mary

AIP helped Mary by...

• Repairing plumbing
• Replacing toilet
• Fixing shower & floor
• Installing new roof, window AC unit, front door, etc.
• Sterilizing floor & furniture
• And more!

BEFORE AIP

AFTER AIP
What’s Next for Memphis Habitat?

• Aging in Place – Statewide expansion
• CAPABLE
Panel Speaker Contact Information

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