Aging in Place: City of North Saint Paul

Multidisciplinary Perspectives on Aging
Resilient Communities Project

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Table of Contents

Executive Summary

Aging in place can be defined as the ability to live in one's own home and community safely, independently, and comfortably, regardless of age, income, or ability level. Aging in place is more than just housing, it encompasses all services and social relationships required to help individuals remain in their community. Some of the reasons older adults leave their communities as they age include: their health needs are changing and they require more skilled nursing care, the services they need are not offered in their community, and caregivers are experiencing excessive strain and burnout.

To determine the needs of older residents of North St. Paul a discussion group event was conducted with community members. Thirteen community members participated in this event. Participants discussed three open-ended questions about North St. Paul. The main concerns of the residents were identified. The students conducted a literature review using both the key themes and their perspective disciplines to formulate aging in place recommendations to the City of North Saint Paul, summarized here.

1) Transportation. Community members need to be able to drive safely. When they are no longer able to drive safely, there needs to be transportation services available that meet the needs of residents. Residents do not feel the current bus system and Metro Transit are meeting their needs. One potential solution to this problem is a volunteer driver program.

2) Volunteer/Chore service. Community members expressed a desire to have volunteers available to help them with small chores, such as moving furniture, mowing lawns, shoveling sidewalks, etc. Additionally, residents expressed a need for handymen who can help them make changes to their homes that will allow them to live in them safely, with risk of falling.

3) Opportunities for Community Engagement. Community members described a desire for more opportunities for community engagement, such as learning and community activities. They want a variety of activities that are fun, educational, and low cost. Community engagement will help older community members maintain their physical and cognitive functioning, enabling them to remain healthier and in their homes and communities longer. These actions also promote the maintenance of cognitive functioning, which is another key part of aging in place.

The city of North Saint Paul should take a comprehensive and collaborative stance on developing programs and policies designed to allow its community members to remain living in their community as they continue to age. Suggestions and resources are offered here to assist the city of North Saint Paul in developing its own aging in place policies and initiatives.

Introduction

What Is Aging in Place?

Aging in place initiatives are becoming more common in the United States as promising means of adapting care to the increased needs of the rapidly aging population. Aging-in-place has multiple meanings because it is a relatively new public health concept, but is most commonly used to denote the public health policy ideal about an aging person's ability to remain in their current setting as they age (Cutchin, 2003; Pastalan, 1990). The Centers for Disease Control and Prevention (CDC) has defined aging in place as, "the ability to live in one's own home and community safely, independently, and comfortably, regardless of age, income, or ability level (2013)." This concept is relevant to aging today, as evidenced by a recent AARP survey on aging in place, which found that nearly all adults age 65 and older want to remain in their current home as they age (Bayer & Harper, 2000). However, it is not just the structural home that is important to aging in place. Older adults have identified that home, community, and personal relationships are all important components of aging in place. Together, these three components provide older adults with security and autonomy, which are fundamental aspects of successful aging in place. (Feingold & Werby, 1990; Lawton, 1982; Wiles, Leibing, Guberman, Reeve, & Allen, 2012).

An Aging Population

The population of the United States is aging. In 2012 there were 43.1 million people (13.7% of the U.S. population) over the age of 65, and this number is estimated to rise to 79.7 million by the year 2040 (Administration on Aging, 2013). It is predicted that the population of Minnesotans aged 65 and older will increase from 12.1% (600,000) to 24% (1.2 million) of the

total population between 2000 and 2030—by 2030 about one in every four residents of

Minnesota will be 65 years of age or older (Minnesota Department of Health, 2005).

According to 2010 U. S. Census data, over 13% of residents of the city of North Saint

Paul are age 65 or older, ahead of the Minnesota average. Nearly one-quarter of all North Saint

Paul households include one or more individuals aged 65 years or older (U. S. Census Bureau,

2010). This portion of the population will be joined in coming years by the over 20% of North

Saint Paul residents who are currently between the ages of 50 and 64 years (U. S. Census

Bureau, 2010).

North Saint Paul has worked with the nonprofit Metropolitan Area Agency on Aging in

the past to identify the needs of the city's senior population and available resources. However,

the city still has no comprehensive strategy to assist older community members to age in place.

North Saint Paul's goals in working with the Resilient Communities Project (RCP) and the class

GERO 5105: Multidisciplinary Perspectives on Aging, taught by Lisa Edstrom, was to learn how

to best assist their residents so they are able to age in place within their own community, either in

their own homes or other available housing. More specifically, this course was asked to: (1)

identify North Saint Paul's specific barriers to aging in place, (2) based on resident input,

discover what residents would need in order to age in place, and (3) provide recommendations

for programs/policies that can be used to address these barriers and support aging in place within

North Saint Paul's community (#RCP 2013-15c).

The Multidisciplinary Perspectives on Aging course provided students with an overview

of aging and the issues that affect older adults in America. The course focused on approaches

and recommendations to help older adults live more full lives. In particular, the class discussed

our interdisciplinary perspectives and multi-disciplinary approaches for contemporary services.

There were seven students in the class who participated in the RCP project, and had a variety of disciplinary focuses. Students were to use their learned knowledge from the course with their applied knowledge from their perspective disciplines to address the City of North Saint Paul's goals. Four students gave permission for their research and recommendations to be used in this report.

Project Design & Results

The students in the Multidisciplinary Perspectives on Aging course participated in two community events related to the Resilient Communities Project. First, the students hosted a table at the Resilient Communities Project 2013 Open House, held at the North Saint Paul Community Center at 2290 1st St. N. on Thursday, October 17th, 2013. The purpose of participating in this event was to learn community members' opinions and viewpoints on aging in place, and to gauge their interest in participating in further activities exploring aging in place in North Saint Paul. This was done through the use of a short written survey that was filled out by residents, as well as conversations directly with some of the community members. Notes were taken during conversations with community members on a large sheet of paper on the table. Residents were welcomed to write comments on the paper as well. After the event, the results of the surveys as well as the notes and comments written on the large sheet of paper were typed and sorted into categories to discern the main concerns of the residents about aging in place in North Saint Paul. These preliminary conversations revealed many areas community members would like to improve and that a further event exploring this issue would be beneficial and welcomed by community members.

The second planned event was held on November 18, 2014 from 6:00 p.m. until 7:30

p.m. at the North Saint Paul City Hall at 2400 Margaret St N. This event followed a previously

established methodology for hosting large group dialogue called The World Cafe Method (World

Café Method," n.d.). This methodology was chosen because it can be easily adapted to fit

unique events and locations, and because it would accommodate the size group the students were

aiming for at the event. The agenda for the event can be found in Appendix A.

       Thirteen residents of North Saint Paul participated in the event. The group was divided

into three smaller groups, and each separate group was given a question to discuss for 20

minutes. At the end of twenty minutes, the participants rotated to a different table to discuss

another question. Each group was given the opportunity to discuss each question. Each table

had two student hosts, who introduced the new members to the questions and helped lead the

discussion. Notes at each table were taken by the table hosts and community members, if they so

wished, on large sheets of paper that covered the tables. The three questions discussed were:

1) What do you see as the strengths in North St. Paul community for being able to age in place? Likewise, what are the weaknesses?
2) In what ways do you wish the North St. Paul community could be improved to better address your needs and desires?
3) What will be the greatest needs for the senior community in North St. Paul in the next 10 years? How could the community attempt to address these concerns?

       During the event the conversations were very lively and patterns emerged as the students

began hearing similar trends in conversation topics. Following the World Cafe event, the notes

and comments of the topics discussed were transcribed (Appendix B). This data was analyzed

for themes, and these themes were transformed into a word cloud (Appendix C). Word clouds

are visual representations of text in which the size of each word indicates its frequency or

importance ("Word cloud," n.d.). This method was chosen as it provided a visually pleasing way

to discern and present the main concerns of the community members about barriers to aging in

place. Here is a summary of the three main concerns identified in the word cloud:

1) <u>Transportation.</u> Residents need to be able to drive safely. When they are no longer able to drive safely, there needs to be transportation services available that meet the needs of residents. Residents do not feel the current bus system and Metro Transit are meeting their needs.
2) <u>Volunteer/Chore service.</u> Residents expressed a desire to have volunteers available to help them with small chores, such as moving furniture, mowing lawns, shoveling sidewalks, etc. Additionally, residents expressed a need for handymen who can help them make changes to their homes that will allow them to live in them safely, with risk of falling.
3) <u>Community Events/Engagement:</u> Community members described a desire for more opportunities for community engagement, such as learning and community activities. They want a variety of activities that are fun, educational, and low cost. They also stressed that all seniors to not have the same interests, just like young people.
4) <u>Neighborhood stores/café.</u> Residents described needing a grocery store that is closer to their homes. Grocery delivery services do not appeal to most of the participants, as they want to be able to pick out their own produce and other groceries. Also, residents say the community lacks a restaurant or café that is appropriate for families.

Each student used the word cloud and applied the main themes into their own disciplines.

The students conducted a literature review using both the key themes and their perspective

disciplines to formulate aging in place recommendations for the City of North Saint Paul. The

following section shares these literature reviews and recommendations, divided by discipline.

Multidisciplinary Perspectives

Public Health

Chiara Benham, Masters of Public Healthcare Administration and Policy student,

Concentration in Policy and Minor in Gerontology

Supports and services for those aging-in-place and their caregivers are beginning to gain

policy attention within the United States. An aging in place assessment conducted on those

adults who wish to remain living in their homes and communities is significant to public health.

Individualized assessments will assist individuals in understanding the services they need to

continue living in their homes. A core tenant of public health is to assure that all populations

have access to appropriate cost-effective care. Public policies are designed to help solve health

problems and ensure access, but in order to do so the need must first be identified and individuals

must be made aware of available resources. Public health aims to improve the duration and

quality of life of entire populations through health promotion, educational programs, policies,

and services. These populations vary in size, including communities, neighborhoods, counties,

states, nations, and worldwide (Lawson, 1991). Public health concentrations include a wide

variety of topics, including aging. This literature review will examine the main public health

topics highlighted in the word cloud that will assist seniors in North Saint Paul to age in place.

Transportation:

North Saint Paul community members have identified transportation deficiencies as one

key barrier to remaining in their homes. Lack of transportation can leave older adults feeling

isolated, and can prevent them from obtaining the resources, such as food, that they require in

order to remain in their homes. According to the World Health Organization (2007), access to

transportation determines older adults' access to community and health services, as well as their

social and civic participation. It is entirely plausible that the lack of effective and accessible

public transportation can diminish individuals' autonomy, as they become dependent on the good

will of others.

In Minnesota in 2012, 656,000 drivers were over the age of 65 and 80,000 were over the

age of 85 (Minnesota Department of Public Safety [MDPS], 2012). Nearly 17% of all drivers in

Minnesota are over the age of 65 (MDPS, 2012). Unfortunately this small percentage of drivers

represents over 8% of all crash fatalities. These numbers may increase as the amount of people

living in Minnesota continues to age. In 2020 the amount of people over the age of 65 is

expected to grow by 33% (MDPS, 2012). When comparing older drivers with all others, but not

including the youngest group of drivers, they are at an increased crash per mile driven

(McKenzie & Peck, 1998; National Highway Traffic Safety Administration [NHTSA], 2000).

By 2025, it is predicted that over 40% of all crashes that end with fatalities will be associated

with age related frailties (Staplin, Lococo, Gish, & Decina, 2003). It has been found that it is not

age, per se, that is the leading cause of all of these crash fatalities, but that health problems and

medications associated with aging are to blame (Dobbs & Carr, 2005).

Recommendations:

It is important for aging adults within the city of North Saint Paul to be provided the

proper transportation services. These services should assist the senior population in their ability

to drive safely. Older adults who have the capabilities to drive safely should continue to do so.

It is important that seniors who are found unfit to drive safely be offered options to help them

improve. If a senior is still unable to drive safely, then they should be provided alternative

mobility solutions (Molnar, Eby, & Dobbs, 2005). Transportation services can assist aging

adults in having access to health care, employment, stores and entertainment, civic and social

activities, and family and friends. Mobility prevents isolation and promotes independence.

One potential solution to this issue is a volunteer driver program. The Beverly

Foundation website offers resources (and funding) for communities to start their own volunteer

driver programs. More information can be found at http://beverlyfoundation.org/.

Volunteers to assist with Home Maintenance:

Seniors may encounter declines in the perceptual, physical, mobility, and cognitive

ability that negatively impact their capability to maintain their home environment (Marsiske et

al., 1999). A survey conducted in 2011 that targeted independently living seniors found that

70% of seniors studied had experienced home maintenance difficulties related to cleaning or

outdoor tasks (Fausset, Kelly, Rogers, & Fisk, 2011). The cleaning difficulties included tidying,

vacuuming, washing dishes, laundry, taking out the garbage and other general cleaning tasks.

The outdoor tasks that were mentioned included lawn care, cleaning gutters, and painting the

outside of the home. It is believed that if older adults are experiencing difficulties in maintaining

their homes, both indoor and outdoor, then their goal of remaining living in their own homes is

threatened (Fausset, 2011). Falling poses a significant risk to the health of many community-

dwelling older adults. The risk of falling increases concurrently with the number of risk factors

present in the home (Tinetti, 1994; Stevens, 2005). Assistance with the smaller maintenance

tasks, like better lighting and picking up tripping hazards, can greatly reduce the fall hazards

around the home, and therefore prevent falls and subsequent injury.

Recommendations:

There is a strong need in the city of North Saint Paul for older adult supportive services

that assist seniors in performing functions they are no longer able to perform. Although the

Metropolitan Area Agency on Aging is located within the city of North Saint Paul, the seniors

were unaware of the senior linkage line. Many people are unaware of available services for

seniors. Therefore, there should be greater dissemination of information so seniors can learn

about the services available to them to age in place (Fausset, 2011). Residents suggested that the

city should partner with neighboring schools or youth programs to begin a volunteer network for

seniors. Residents also suggested that there be an available website to share information with

each other about services. Residents who are able are willing to pay for these services.

Cognitive Health

Cheng Qiu, *PhD(c) in Psychology*

Literature Review

Cognitive health is a major factor in ensuring quality of life. Age is an important risk factor for cognitive decline; thus, cognitive health in an aging population is drawing more and more attention. The absence of disease is not the whole story of cognitive health (Hendrie & Wagster, 2006). Based on the definition given by the Healthy Brain Initiative, healthy cognitive functioning includes all nine aspects in cognition: language, thought, memory, executive function (the ability to plan and carry out tasks), judgment, attention, perception, remembered skills (e.g.: driving), and the ability to live a purposeful life (CDC, 2007). Cognitive function could strongly influence whether a person is able to live independently or not. Usually, declines in cognitive function predict functional declines in aging (Zahodne, Manly, MacKay-Brandt, & Stern, 2013).

Scientists have demonstrated that even in an aging brain, new synapses can be formed and nerve cells can be regenerated (Dinse, 2006). This means that there is the potential to maintain lifelong cognitive health, if we train our brains right. The adult brain could undergo cortical reorganization even with advancing age, which means the brain itself could perhaps compensate for its declining function (Caserta, et al., 2009). Scientific research has also identified risk factors in cognitive decline including cardiovascular risk, depression and anxiety, psychosocial factors, physical activity and genetic factors (Hendrie & Wagster, 2006). Overall, keeping physically and mentally active could be numerously beneficial for maintaining cognitive health. In addition, reports from several organizations showed great social/environmental

demands on promoting cognitive health. Over 90% of people believed that it is possible to improve cognitive fitness; about 60% thought a routine cognitive health checkup is necessary, just like a regular physical checkup; more than 80% were willing to involve in activities that are associated with improving cognitive health (ASA-MetLife-Foundation, 2006; CDC, 2007).

Recommendations:

The city of North Saint Paul should encourage residents in keeping their brains active every day. To achieve this goal, especially, in an aging population, individual, family and community efforts are all critical.

Individual/family-based action:

Keep a daily schedule: A major difference before and after retirement reflects on people's schedule; they start to have more free time and face an almost empty schedule. Try to fill the daily schedule with chore, gardening and social activities. Keeping busy could be the best way to preserve cognitive functions.

Mental exercises: Research has indeed shown that multi-task video game training could enhance cognitive control in older adults (Anguera, et al., 2013). Chess training could maintain players' ability in critical thinking, problem solving, decision-making, planning and even being creative (Bart, 2013). Therefore, participation in mental exercises could possibly help to preserve cognitive health.

Self/family-assessment: Early detection of cognitive impairment of self or family members is beneficial for avoiding risks. Be aware of early signs of abnormal cognitive decline, and be in control of your cognitive health.

Community-based action:

The community of North Saint Paul could play an important role in engaging residents

into various activities, which can manage many risk factors, such as social involvement and physical activity, in cognitive decline. For example, creating volunteer programs and lifelong learning/sharing programs can well serve this purpose, and potentially assist other aspects of aging in place. North Saint Paul can also promote those individual and family based activities presented above.

Volunteer program: A volunteer program could unite the community in an efficient way. It can keep people active and at the same time serve multiple needs through the community – such as transportation, chore services, adult day care and social involvement.

Lifelong learning/sharing program: Continued curiousness and learning are important for staying sharp. Building a community-based lifelong learning environment could be essential for promoting cognitive health among North Saint Paul community members. Various formats could be used: small group discussion, invited speaker seminars, intergenerational activities, reading groups, etc.

Public education: Facing challenges brought by an aging population is a matter concerning not only older adults and their families, but society as a whole. A public education program on how to manage cognitive dysfunction for younger generations is also important.

Nursing

Carina M. Lindberg, Doctorate of Nursing Practice student, Adult Health/Gerontological Nurse Practitioner program

Kjerstie Wiltzen, PhD in Nursing student, Minor in Gerontology

Literature Review

Frailty, which is characterized by declining physical and physiologic function, is a strong

predictor of institutionalization, disability, dependency, and the need for community and

informal support services (Fried, Walston, van Rossum, de Witte, & van den Heuval, 2010). It is

also known that failure to receive adequate home health care nearly doubles the chance of

institutionalization (Morely, 2012).   Many older adults move into assisted living and nursing

home settings when their needs are no longer being met in their homes and communities. Many

times, informal caregivers initiate this process because the older adult needs more skilled care,

because of dementia-related behaviors of the older adult, because the older adult has

incontinence or other difficulties toileting, or because of their own health deterioration (Buhr,

Kuchibhatla, & Clipp, 2006; Nuotio, Tammela, Luukkaala, & Jylha, 2003). Studies have shown

aging in place initiatives to be successful in improving and maintaining physical and mental

health in participants, which should ease the burden on informal caregivers and slow nursing

home placement of older adults, given the reasons for admission stated above (Marek, et al.,

2005; Marek, Popejoy, Petroski, & Rantz, 2006).

Some older adults may desire to move into assisted living or senior housing facilities

within their community. This requires that these facilities be present in their community, or else

these older adults will have to leave their communities for another with the services they require.

Others may not be able to afford assisted living, or may simply want to remain in their homes as

long as possible. Without the proper services in place, this may not be possible.

Nursing home care is also very expensive. Older adults who cannot pay the portion of

the costs that Medicare does not cover are required to "spend down" their assets before they

qualify for Medicaid, creating poverty in the older adult population (Moody & Sasser, 2012).

Proponents of aging in place posit that the innovative new approach will save costs to both

consumers and the health care system (Rantz, Marek, & Zwygart-Stauffacher, 2000).

Furthermore, the aging population may soon outgrow the limited availability of spaces in nursing homes and other long-term care facilities, and society will be forced to find other resources to provide services to the individuals who need them. Aging in place initiatives are one such approach.

For healthcare providers to successfully assist a community-dwelling older adult to remain living in their community, early recognition of functional decline and frailty is key (Morely, 2012). According to Ko (2011), exercise interventions and geriatric interdisciplinary assessment and treatment models can improve clinical outcomes and quality of life of frail community-dwelling older adults. Age-related muscle loss can be improved by regular exercise that improves muscle strength, aerobic capacity and mobility to reduce falls in older adults. Comprehensive geriatric assessments by interdisciplinary teams involving objectives including improving physical and psychological function, reducing hospitalizations and long term care placement, improve quality of life, and decrease early mortality in older adults is also shown to reduce institutionalization. An interdisciplinary assessment team usually consists of a geriatrician or nurse practitioner, a nurse, a social worker, and an occupational or physical therapist (Ko, 2011).

Recommendations:

Research has shown that interdisciplinary aging in place initiatives that include a nursing component are successful in improving daily function and well-being of older adults in the community (Marek, Popejoy, Petroski, & Rantz, 2006; Szanton, et al., 2011). One such aging in place initiative and model of comprehensive care that has been shown to be effective in preventing adverse outcomes among the frail elderly is the Program for All-inclusive Care for the Elderly (PACE) (National PACE Association, 2002). Through collaboration with a geriatric

interdisciplinary team, the PACE program targets nursing home eligible members in the

community and provides them with the continuum of care services they need in order to remain

in the community. More information on this program can be found at www.npaonline.org.

For the elderly who want to remain in their home, diligence through primary prevention

with their provider and general wellness recommendations for the aging adult will help prevent

the further decline associated with frailty and concurrent institutionalization. Community

measures to promote exercise and social engagement should enable community members to

remain in their homes longer. Additionally, city officials should consider working with area

health care agencies to identify resources available to the community, should community

members need specialized health care services in order to remain in their homes.

Conclusion

Successful aging in place occurs when individuals have access to the services they

require to meet all of their needs so they can live in their "home and community safely,

independently, and comfortably (CDC, 2013). Individuals' perceived access to these services is

directly related to their sense of well-being and autonomy (Gilleard, Hyde, & Higgs, 2007).

Because of this, the city of North Saint Paul should take a comprehensive and collaborative

stance on developing programs and policies designed to allow community members to age in

place.

If properly implemented, aging in place initiatives in North Saint Paul have the potential

to help the community adapt to better meet the needs and to preserve the health of their aging

population. City representatives have identified environmental modifications to many of the

communities aging homes as vital to promoting autonomy and healthy aging of older community

members. Important as this is, it is only one area in which the city needs to implement changes.

Other areas for attention are on the community's poorly accessible public transportation and

access to health care and supportive services.

Many successful aging-in-place programs have been implemented throughout the United

States. It was beyond the scope of this project to create an aging in place initiative for the city of

North Saint Paul. However, here are some resources that the city officials can use to begin

designing and implementing their aging in place policies:

General/Comprehensive Aging-in-Place Resources:
- *Aging in Place: A State Survey of Livability Policies and Practices.* (National Conference of State Legislatures & the AARP Public Policy Institute, 2011). Available at http://www.ncsl.org/documents/transportation/aging-in-place-2011.pdf
- *Aging in Place: A Toolkit for Local Governments.* (Ball, M. S., n.d.). Available at http://www.aarp.org/content/dam/aarp/livable-communities/plan/planning/aging-in-place-a-toolkit-for-local-governments-aarp.pdf
- *Building a Collaborative Community Response to Aging in Place: A Guide to Creating an Age Friendly Maine, One Community at a Time.* (Maine Area Agencies on Aging, Maine AARP, & Ideactive Solutions, 2013). Available at http://maine4a.org/image_upload/FINALREPORT.pdf
- *The Cleveland Foundation Successful Aging Initiative Final Evaluation Report.* (Community Research Partners, 2006). Available at http://www.communityresearchpartners.org/wp-content/uploads/Reports/strategic-aging-initiative/tcf_aging_report.pdf
- *The National Association of Area Agencies on Aging* (includes funding resources) – www.n4a.org
- *Livable Community Indicators for Sustainable Aging in Place*. (Stanford Center of Longevity and MetLife Mature Market Institute, 2013). Available at https://www.metlife.com/assets/cao/mmi/publications/studies/2013/mmi-livable-communities-study.pdf
- *Program for All-inclusive Care for the Elderly (PACE)* – www.npaonline.org
- *Resource List: Sustainable Planning for Aging in Place.* (International City/County Management Association, n.d.). Available at http://www.michigan.gov/documents/osa/ICMA_SResourceList_419343_7.pdf

Funding

- *Aging in Place…With a Little Help from Our Friends: An Overview for Grantmakers about Aging in the Community.* (Grantmakers in Aging, 2010). Available at http://www.philanthropicgroup.com/giaaip050409v2.pdf

Housing

- *Housing Policy Solutions to Support Aging in Place.* (AARP Public Policy Institute, n.d.). Available at http://www.nhc.org/media/documents/fs172-aging-in-place.pdf.

Transportation

- The Beverly Foundation – www.beverlyfoundation.org

Appendix A

World Cafe Event - November 18th, 2013

6:00PM - 7:30PM, North St. Paul City Hall

Supplies: 3 round tables, chairs for all participants, large sheets of paper, markers, name tags, beverages, snacks

Roles: (1) café host/photographer (6) table hosts

_____

6:00PM/6:10PM - Welcome Address and Introduction

Introduction: Good evening and welcome to the "Aging Café". We are all students in a graduate level course at the University of Minnesota titled Multidisciplinary Perspectives on Aging . Our goal for today is to stimulate discussion with you to come up with ideas about how to age well here in North St. Paul. The information you share with us tonight will be presented to the North St. Paul City Council.

*Introduction of each host and specialty field

You will find there are three different tables. Each table has a host(s) who will ask you to discuss a discussion question. Each table focuses on a different question. At the end of the 20 minutes you will rotate to a different table. By the end of the evening you will have participated in a discussion at each table. We ask that you follow these ground rules:

1. Focus on what matters
2. Contribute your thinking
3. Speak your mind and heart
4. Listen to understand
5. Link and connect ideas when you move to each table
6. Listen together for insights and deeper questions
7. Play, Doodle, Draw – writing on the paper on the table is encouraged
8. Have Fun!

6:20PM - Small Groups: Question #1

1.) What do you see as the strengths in North St. Paul community for being able to age in place? Likewise, what are the weaknesses?

6:40PM - Small Groups: Question #2

2.) In what ways do you wish the North St. Paul community could be improved to better address your needs and desires?

7:00PM - Small Groups: Question #3

3.) What will be the greatest needs for the senior community in North St. Paul in the next 10 years? How could the community attempt to address these concerns?

7:20PM - Wrap Up and Thank You

Appendix B

World Café Discussion Comments

1. What do you see as the strengths in the North Saint Paul community for being able to age in place? Likewise, what are the weaknesses?

- Seniors are cool!
- Very satisfied with ER services
- Love and trust North Saint Paul
- Good food shelf that the city and volunteers support
- Food shelf
- Holiday food drive
- Many seniors help at the food shelf
- Park-n-ride
- Will always stay in North Saint Paul
- Good doctors
- ER services are good
- Polar ridge high-rise
- North Saint Paul is in a good location
- Sense of safety
- Small town feel
- Food shelf
- Active adults
- Lake
- Have store-to-door food programs
- Lots of walking trails
- Great cooperation between churches
- Great neighborhood
- Hard to drive

- Need volunteer
- Volunteers could be from churches
- Volunteers could help with transportation
- Need available handyman or maid
- Lack of services causes people to stay at home (isolation)
- Improve transportation
- Volunteers will help the interaction with young people
- Need a volunteer to come into the house and do favors like changing light bulbs
- Both the school district and the seniors are at the community center
- Need to have people come and get older citizens out of their homes to socialize
- If a person is alone at home when they age they will be vulnerable
- Lost the community center to the school district

- Lost the NEST program, dial a ride $2
- Need transportation services
- Lost independence when NEST went away
- No community involvement from MAAA
- Would like to have handyman available
- Need for caregiving support
- Community center moving to Maplewood
- Need handymen
- Need better transportation services
- Want a public service volunteer coordinator that could be paid
- Need a volunteer base that is a stable part of the community
- Difficult to get volunteers to be able to continually commit
- MAAA is not active in the community
- No available healthy food

2. In what ways do you wish the North Saint Paul community could be improved to better address your needs and desires?

- Get the churches to work together
- Create forums with speakers about the community
- Increase neighborhood interaction
- Have better restaurants on main street
- North Saint Paul is a better place to live than to have a business
- Have better managed housing
- Some areas have better neighborhood watch than others
- Hard to entice business to come into the community
- Too many big box stores
- North Saint Paul History (book) by Paul Anderson
- Good security
- Create a community garden
- Safety
- Neighborhood stores to buy milk, etc.
- Empowering
- There was a grocery store but it closed

- Not enough people or money in the community
- More older people moving to the city for convenience
- No retail store known
- Maplewood has a program in the schools
- Offer different activities for different aged seniors
- Need better street lighting because blocks are too long
- Mix the young and old together in one area
- Taxis are too expensive
- Too long of a distance from the city to the suburbs
- Many buildings are old and do not have a good elevator
- Need safe, affordable community housing
- Good medical, fire department, police, library, concerts in the park, festivals, car shows
- No place for seniors to socialize because the

- community center went to the school district
- Not enough senior housing (senior housing does not stay only for seniors after 30 years)
- NEST bus – was here but now gone (curb to curb transportation)
- Can't walk to the bus stop
- Lion's mobile in White Bear Lake, safer with liability vs. volunteer transportation
- Gladstone program in Maplewood is not on the bus line
- Need a grocery store that is accessible to get to
- There is a bus line that stops in town
- The buildings are too old and have poor elevators
- Call/volunteer for medical service? NO/ have to fill out pages
- Cub foods has store to door, but don't get to pick your own produce

3. What will be the greatest needs for the senior community in North Saint Paul in the next 10 years? How could the community attempt to address these concerns?

- Cognitive skill classes
- Need more small stores/coffee shops/grocery stores
- Gladstone 55+
- School district community center
- NEST – each city contributed based on the population
- Circle of security
- Growing smaller without transportation
- Need to learn about new organizations
- Need younger members in the city
- Food shelf
- Metro mobility
- Handyman
- Drivers are unsafe
- Need to offer more classes at the community center
- NEST – Maplewood, N. St. Paul, Oakdale
- Need more volunteers
- Need access to handyman
- Need more transportation services
- Likes that the city sends out surveys every year
- Shoveling steps

- Transportation
- Sidewalks
- Volunteer/payment could be good
- Like to stay in own home
- Need help with lawn, snow, and house care
- Need people to help and will pay (not a lot of pay, cheap)
- Have a volunteer program for teens to help seniors in their homes
- Volunteers
- Cab: "door to door"
- Rainbow and Cub: call to order food and they will bring it to you
- Schnerrel's Goldens – off of 36/Central – busy intersections
- Need to have a good grocery store close to home
- Want to have a Mississippi Market type of store
- Need to support local people
- Have a corner coffee shop
- People 60-80 have different interests

- (can't lump them all into one group)
- $6/ride to break everywhere (transportation)
- $2/ride the NEST program. Dial a ride. Met council got rid of it
- Honor Society students should do community service
- Angies list for N. St. Paul?
- Need restaurants near senior housing
- Need places that we can walk to
- Too many bars, no family restaurants
- Want to have groups where they can be heard (in the community)
- Community center programs are too spendy
- Christmas support
- Better sidewalks
- Church community
- Volunteering reading teacher, century college – class teacher

Key Terms from the World Café Event

Larger words occurred more frequently during discussion

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