

Blueprint for Aging: Community Volunteers Pilot Project
Executive Summary Evaluation Report: Preliminary
January 7, 2008

Purpose of the Report

This report was written to provide the Pilot Projects Work Group, other Blueprint for Aging of Washtenaw County stakeholders, key community leaders and providers committed to senior well-being, and the community-at-large with preliminary results of the Community Volunteers Pilot Project

Overview of the Program

The Community Volunteers Pilot Project is one component of the Aging in Place Blueprint for Aging Initiative. The pilot was designed to improve the community's understanding of the implementation process and the effectiveness of a neighborhood-based model of connecting at-risk seniors with needed services and resources. At the end of the Pilot Project, Community Volunteers were expected to increase their own knowledge of available support services, perceive themselves as community leaders and be recognized in their respective neighborhoods as accessible resources. From the Community Volunteers, participants were expected to receive accurate and timely information and the assistance needed to link to available services.

Statement of Need

The pilot was designed to address the following issues:

- Seniors and caregivers report a poor understanding of available resources and they are unclear about how to access community-based services and resources.
- Seniors need increased access to services that will, in turn, increase their capacity to age in place. Seniors wanting access to available services and resources must know what they need, what is available, and how to make contact with the source.
- There are low levels of trust between seniors and social service systems of care. Seniors may be more likely to approach or receive help from someone who is trusted and familiar or is viewed as being an insider.
- Neighborhoods are potential networks through which at-risk seniors could be reached using methods varying by area and types of existing bonds.

Design, Key Evaluation Questions

A single group descriptive implementation and immediate outcome evaluation was employed.

Key evaluation questions included:

- What are the characteristics of a Community Volunteer?
- Which outreach and recruitment strategies were most effective for which community?
- How did utilization of the Community Volunteers vary by community?
- To what degree did Community Volunteers attain the expected outcomes at the end of the pilot project?

Methodology, Analysis

Data collection methods capturing both qualitative and quantitative information are presented next, along with lessons learned about documentation. Due to the low number of community volunteers and participants, both quantitative and qualitative data was analyzed manually for themes.

Program Implementation

- *CV Outreach Log* was completed to document outreach and recruitment activities by the CV.
- *CV Initial Contact Surveys* were completed by the community member to document their need, knowledge of agencies that could help meet the need, previous use of services, and satisfaction with services.
- *Participant Requesting Information/Referral Forms* were completed by CVs to document the CV effort, and need for follow-up.
- *CV Diaries* were introduced mid-way through the pilot as a less formal method for recording thoughts, feelings, ideas, and contacts.

Support for Community Volunteers

- *CV Quarterly Meeting Questionnaire* was completed by CVs at the June 2007 meeting. The 3-question survey gathered CV assessment of value of quarterly meeting and the value of being a CV.
- *Minutes* from quarterly CV update meetings were used to document training topics and implementation issues.

Outcomes

- *CV Brief Confidential Survey* was developed and administered to Community Volunteers in September, 2007 to capture reasons for volunteering and immediate outcomes.
- *Brief interviews* face-to-face (20 minutes) with CVs were conducted by a BFA Intern to capture their CV experiences and interest in the program.

Lessons Learned/Themes

Documentation

CVs' completion of program forms to document their work (e.g. outreach, contacts, referral activities) was sporadic and incomplete. The diary/journal was suggested as a less formal method of documentation. However, the completion of the diaries was inconsistent across Community Volunteers and not as informative as hoped.

Recruitment of Community

At the project's onset, neighborhood associations and some of the ethnic-defined communities were contacted for participation and did not respond or declined participation. Communities of faith and membership may be amenable to the service. The project community recruitment strategy must include a partnership with a member of the community. The community's interest in the service and the ownership of the project is critical for successful implementation. The CV Program will work best when the community can tailor the program to best meet the needs of their members.

Community Volunteer Outreach Services

Outreach activities were a major part of the CV work effort and involved use of flyers, presentations to neighborhood meetings, conversations with community leaders (pastors), informal word-of-mouth, door-to-door contact, CV contact cards, surveys, walking club, radio, and website communication. Each CV developed an outreach plan specific to their community.

Community Volunteer Services to Individuals

Documentation and interviews identified the following common types of CV services provided: transportation, referrals and distribution of brochures for services, personal home-based follow-up visits due to health or mental health issues, and informal social support to caregivers of those in need of services. On average, CV spent approximately 1-2 hours volunteering each week. Most of the CVs reported that they were successful in linking seniors to the available resources. Providing CV services as a team was seen as more effective than working alone.

Community Volunteer Factors that Build Capacity for Program

- Clear understanding of the dynamics of the community and community members (due to connection or length of time in the community)
- Interpersonal skills
- Interest in civic engagement
- Interest in increasing their own personal connections to the community
- Compassion for supporting those in need
- Establishing trust between the CV and the community
- Respecting community members' need to age in place and ask for help when needed.
- Understanding the importance of supporting caregivers to support their family members without displacing the role of the caregiver

Community Factors that Maximize Community Volunteer Service

The faith-based community seemed to maximize and benefit most from the CV program model. This community had a previously established structure for communication, a clear hub (i.e. physical location of church, resources area, community garden, calendar of events) that was common and used by all, trust between members due to common faith and membership in church, and a sense of cohesion among membership.

Size of the community may be a factor. Communities/neighborhoods with clear geographic boundaries or membership (i.e. neighborhood associations) may be more manageable. CV implementation with larger diffuse communities may be more difficult due to area of coverage, community awareness of the CV service, and trust issues among members.

BFA Supports for Community Volunteers

The following BFA supports were put in place to build program capacity through the Community Volunteers: CV Orientation, CV update meetings (quarterly), development of Resource Manuals, community visits by BFA staff, and implementation guidance from FANG (Friendly Aging Neighborhoods Group). Community Volunteers reported that they did value and make use of these program supports and resources.

- CVs (8/8) strongly agreed or agreed that attending the quarterly meeting helped them come up with new ideas to reach seniors in their neighborhood.
- CVs (8/8) strongly agreed or agreed that attending the meeting gave them a stronger sense of purpose.
- CVs (7/8) strongly agree or agreed that they felt they were providing something valuable to their neighborhood by being a CV.

Recommendations

- Disseminate findings of Community Volunteers Pilot to relevant BFA work groups and partners
- With input from Community Volunteers, expand existing program Orientation Manual to include:
 - Types of neighborhoods that might respond best to model
 - Characteristics of Community Volunteers
 - Practical tips for effective outreach
 - Additional Community Resources
 - Additional information on building relationships and supporting seniors aging in place
- Provide manuals to area Village Model neighborhoods and collect feedback
- Distribute manuals to interested community groups, churches, senior centers, etc.