APPENDIX B

Age-Friendly Maple Grove Report on Community Assessment Findings

OCTOBER 2017

Overview

This report presents the findings of an assessment of the needs and wishes of older adults in Maple Grove. Conducted between June 2016 and January 2017, the assessment was an early phase of the Age-Friendly Maple Grove initiative, which is working to support the rapidly aging population and make the community a better place to grow older. The findings of the community assessment will be used to develop a three-year action plan that identifies priorities and strategies for how public and private sector actors and other community partners can work—separately and together—to ensure that Maple Grove is inclusive of the needs of all ages.

By a large margin, transportation emerged as the top concern of older adults. Housing is another key issue, along with navigating the healthcare system, social isolation, and many others detailed in the report.

These findings help illuminate what older adults appreciate about living in Maple Grove as well as what they need to live better, more independently, and as vital members of the community. Age-Friendly Cities: What and Why?

In an age-friendly community, policies, services and structures related to the physical and social environment are designed to support and enable older people to "age actively" – that is, to live in security, enjoy good health and continue to participate fully in society.

Age-friendly service providers, public officials, community leaders, faith leaders and business people:

- Recognize the great diversity among older persons,
- Promote their inclusion and contribution in all areas of community life,
- Respect their decisions and lifestyle choices, and
- Anticipate and respond flexibly to aging-related needs and preferences.

—World Health Organization Age-Friendly Cities Program

Background

Age-Friendly Maple Grove (AF MG) is community-driven and city-supported initiative to make Maple Grove a better place for its residents to grow older. Like the rest of Minnesota, the nation and the world, Maple Grove is aging quickly. A quarter of its residents are already 55 or older.

Older people were once younger people.

The World Health Organization's "active ageing" policy framework—which underpins its age-friendly cities program includes the following fundamental points:

- It takes into account "the biological, psychological, behavioural, economic, social and environmental factors that operate over the course of a person's life to determine health and well-being in later years."
- It acknowledges that gender, earlier life experiences and culture help determine how people age.¹

In short, age-friendly cities aren't just for or about older people. However, steps to make cities better places for older people tend to benefit residents of all ages, thereby promoting healthy aging across the lifespan. Many communities will need to shift gears and take thoughtful steps to ensure that they are supporting the changing needs of their residents. It is also an opportunity to take advantage of the many social and economic contributions older adults make in a community.

In summer 2016 Maple Grove applied and was accepted to the AARP Network of Age-Friendly Communities. (AARP is the U.S. affiliate of the World Health Organization's Global Network of Age-Friendly Cities and Communities program.) As a member of the age-friendly network, Maple Grove—with a commitment from the mayor and elected leadership—is taking steps to become age-friendlier using a four-phase, five-year framework. The community assessment is an early phase of this process.

Maple Grove's work started with the urging of a single citizen just a few years ago. When she initiated conversations with the city about taking action to become more livable for residents of all ages, it triggered a series of events leading to the launch of Age-Friendly Maple Grove in 2016.

AF MG is led by a city-staffed committee of around 15 community volunteers and representatives from the local hospital and clinics, places of worship, senior housing communities, and senior service providers, among others. The initiative also benefited from grant funding—from the Metropolitan Area Agency on Aging's Lifetime Communities program—for a consultant who could provide structure, momentum and expertise.

Community Assessment: Methods

The community assessment took place over about six months, from June 2016-January 2017. It was guided by the WHO's eight domains of age-friendliness—aspects of community life that are mostly likely to influence an older adult's quality of life (see box on next page).

The AF MG committee developed a fivepronged strategy in order to try to hear from a broad swath of older adults as well as from community service providers who have insight into the needs of older people in the community. This is in keeping with the WHO's recognition that the "lived" experiences of older people should be the basis for this work and that older adults must be closely engaged at all stages. The five-part strategy included:

1. **Informal Input**: This involved informal conversations, usually with one or two people at a time, at community events such as Maple Grove Days or the Maple Grove Farmers Market. AF MG committee members asked open-ended questions such as "What would make Maple Grove a better place to live as you get older?"

Informal input also included a number of conversations and short questionnaires that committee members used to gather input from neighbors and acquaintances. Those interactions were guided by questions related to the WHO's eight domains of livability.

2. **Service Providers:** This prong of the assessment included two groups, 1) senior service providers, and 2) police and fire departments and paramedics.

Senior Service Providers

The committee spoke with the owner and president of Comfort Keepers in the northwest Twin Cities. Comfort Keepers

WHO/AARP Eight Domains of Livability

- 1. **Outdoor Spaces and Buildings**: Availability of safe and accessible streets, sidewalks, parks and other outdoor spaces as well as accessible public buildings and businesses.
- 2. **Transportation**: Safe and affordable modes of public and private transportation.
- 3. **Housing**: A wide range of housing options for older residents; the ability to age in place; and other home modification programs.
- 4. **Social Participation**: Access to leisure and cultural activities; opportunities for older residents to participate in social and civic engagement with their peers and younger people.
- 5. **Respect and Social Inclusion**: Programs to promote ethnic and cultural diversity as well as multigenerational interaction and dialogue.
- 6. **Civic Participation and Employment**: The promotion of paid work and volunteer activities for older residents and opportunities to engage in formulation of policies relevant to their lives.
- 7. **Communication and Information**: The promotion of and access to technology to keep older residents connected to their community and friends and family.
- 8. **Community and Health Services**: Access to homecare services, clinics, and programs to promote wellness and active aging.

provides a variety of home services to older adults and their caregivers.

Police Department, Fire Department, and Community Paramedics

As service providers and responders who observe first-hand the myriad of issues affecting the community as part of their work, AF MG committee members met with representatives of each group in order to learn more about: 1) how each department/ program interfaces with older adults; 2) issues and trends they observe among older adults; and 3) possible opportunities for AF MG to support or collaborate with each group concerning older adults.

<u>Maple Grove Fire Department</u>: Four members of the AF MG committee met with seven members of the Maple Grove Fire Department.

<u>Maple Grove Police Department</u>: Maple Grove's senior center coordinator spoke with the MG police department's crisis intervention team supervisor.

<u>Community Paramedic Program, North Memorial Hospital</u>: Three members of the AF MG committee met with two members of North Memorial Hospital's Community Paramedic program.

Full details from each meeting are available upon request.

- 3. **Focus Groups**: Six focus groups with older residents were held between July and December 2016:
 - 1) Woodland Mounds Senior Apartments: 16 participants (July 25)
 - 2) Arbor Lakes Senior Living: 24 participants (July 27)
 - 3) City-hosted community conversations: 25 participants (August 2, 2016; September 27, 2017)
 - 4) Maple Grove Lutheran Church: 12 participants (August 3)
 - 5) Arbor Lakes Commons Russian-speaking: 4 participants (Dec. 15)
 - 6) Arbor Lakes Commons English-speaking: 11 participants (Dec. 28)

Most focus groups were led by the initiative's consultant with support from committee members. Four of the six were held with residents of senior housing communities (two were affordable housing). There were a total of 69 participants. They ranged in age from 56 to 93, with a median age of 80.

Questions were organized around the WHO's eight domains of livability and also included broader questions such as, "What message would you want us to pass on to city leaders or elected officials about how Maple Grove could be a better place for older people?"

4. City Department Self-Assessments

Self-assessments allow each city department to apply an age-friendly lens to its work to identify issues and opportunities related to older adults. AF MG co-chairs and the initiative's consultant met with nearly all city departments (including police and fire-rescue as discussed earlier): community development; parks and recreation; public

works and engineering; information technology; human resources; finance; and the Economic Development Authority.

This process helped reveal many ways the city already supports its older residents, and also uncovered opportunities to strengthen or expand those efforts. Results of this process will be incorporated into the action plan, and AF MG will support this work in a variety of ways.

5. AARP Survey: Nearly 500 older residents (aged 50+) of Maple Grove responded to an AARP-sponsored phone survey designed to assess the age-friendliness of the city. Maple Grove was one of 14 communities in the US in 2016 where the national office of AARP conducted this survey. The survey instrument was developed by AARP and was uniform across all communities. Maple Grove was among the smallest cities to be surveyed. AARP's goal was to collect 500 respondents in each community. Given Maple Grove's relatively small population size, this became a challenge, though AARP was ultimately able to gather 473 respondents (which included a handful of people from Osseo).

Full results of the survey are available upon request.

Gaps and Challenges in the Assessment

The AF MG committee led the assessment with help from a consultant who led strategy development and implementation. This is an active and engaged committee, which benefited from the services of a consultant, but the assessment was conducted, necessarily, within limitations of time, funding and other key resources. Primary gaps and challenges the committee encountered are noted below.

Vulnerable or isolated older adults living at home are underrepresented.

Circumstances made it easy to organize focus groups with residents of senior housing facilities and, to a lesser extent, older residents who are active, mobile, and living in the community. We reached few people who are living in their own homes in the community but who have limited mobility, greater needs and are more likely to be isolated. Input and insights from senior service providers, the police and fire departments, and the community paramedic program were important to helping us better understand the needs of these residents, but we will continue to find ways to engage and support them.

We had trouble reaching racial and ethnic minorities.

With the help and connections of committee members, we were able to hold a focus group with Russian-speaking residents at Arbor Lakes Commons senior apartments. For various reasons our attempts to connect with Hispanic, East Indian, and Muslim residents were unsuccessful. Similar community assessments have faced similar challenges engaging ethnically and culturally diverse residents.

We will continue to pursue engaging older residents from diverse backgrounds, including efforts to better understand and respond to varying cultural norms around aging.

Findings

Overview

Overall, older people like living in Maple Grove. They note its beauty, friendly and helpful people, walking trails, parks, and locally available healthcare services. People feel safe in Maple Grove and like that everything is local—many people find you can get everything you need within the community.

The community's two **biggest challenge are transportation and housing**. For both, people need more and better options. We heard this repeatedly.

Transportation: It makes sense: so much of life depends on the ability to get where you need and want to go. Moreover, the ability to get around, on your own terms, is fundamental to a person's independence and dignity.

Many communities struggle with a shortage of transit options, especially for older adults and others who either don't drive or drive on a limited basis (e.g., only during the day, only to a few destinations, or only in optimal weather or traffic conditions). Several transportation services for older adults, such as Dial-a-Ride, do exist, but all have significant limitations.

Housing: Here, affordability is key, including affordable housing options that could include services. Many residents are priced out of more costly senior housing communities, and many would prefer "non-vertical" living. The desire for small, single-level dwellings was registered often. However, residents of market-rate senior housing seemed happy with their care.

The assessment revealed a number of steps that businesses could take to better serve older customers. Many older adults also could benefit from greater "health literacy"—an ability to navigate the often complex healthcare system—and from greater coordination of care.

Below are the detailed findings organized by the WHO/AARP domains of livability. The forthcoming action plan will be developed in response to these findings.

Detailed Findings Across the Eight Domains of Livability

1) Outdoor Spaces and Buildings

Buildings:

- Doors are too heavy for older people to open. More businesses should have automatic doors or handicap-accessible doors.
- A number of people leave the community to shop:

- They dislike the setup at Arbor Lakes (parking can be too far from the business; there are too few curb-cuts; curb-cuts are too far from parking spaces as well as from desired businesses).
- There is too much traffic in Maple Grove; people like to use Highway 610 to drive to Riverdale (shopping center) in Coon Rapids or to other stores in Champlin.
- The different commercial districts of Maple Grove are difficult to locate and navigate.
- In large stores (e.g., Cub or Wal-Mart) it would be helpful to have seating *within* the store to rest. It can amount to a lot of walking for some older people.
- In some large stores (e.g., Lowe's) the entrances and exits are far away from each other and in some cases from even handicapped parking (handicapped parking might put you near the entrance but then far from the exit).
- There was some preference for smaller stores (e.g., Cub in Champlin) because they are easier to navigate.
- More curb cuts are needed in long stretches of sidewalk to accommodate walkers and wheelchairs.

Parks and Public Space:

- Central Park is beautiful but can be too sprawling for some older people.
- Some parks in older neighborhoods don't get a lot of active use anymore and could be adapted for quieter use with more benches, tables and flowers.
- There is a need for an indoor space to walk during winter months (e.g., older adults in other communities will go to places like Northtown and Rosedale).

Navigation:

• There is a need for a simple map with common destinations in the different key areas of town and of other senior housing developments. Numerous people mentioned the city can be difficult to navigate or that it is hard to locate the shops and services you need; some leave the community because it's easier to find things at Ridgedale, for example, than locally.

2) Transportation

Transit Options:

- Existing transit services—themselves limited—are limited in their geography and in their schedules (e.g., no weekend service, service ends in late afternoon or early evening). Dial-a-Ride, for example, requires several days' advance notice, which is inconvenient, and Metro Mobility requires a doctor's authorization.
- Many residents expressed an interest in transit that would allow them to go to downtown Minneapolis, but the only services available are designed strictly around traditional commuter schedules.
- Numerous people wished there were a shuttle or circulator bus that would make regular stops at businesses, community institutions, medical facilities, and other key destinations.

- People need better general knowledge of transportation options. This includes ridesharing services like Lyft and Uber.
- Protected seating to wait for transportation is important.

Walkability

- Many people from senior housing developments near Main Street and Lakeview Drive N/82nd Avenue N (just east of the library) spoke of how dangerous that intersection is for pedestrians, despite it being a four-way stop and having painted crosswalk stripes. They noted that drivers frequently speed and do not stop. This is a key intersection as it is a gateway to the library, community center, walking paths, and other important institutions and businesses.
- Residents of Woodland Mounds noted that many drivers don't stop at the stop sign in front of their building.
- There was a general desire for safer crosswalks with features like longer crossing times.
- People who were able to walk and to access walking paths appreciated and enjoyed the paths.
- Sidewalks are uneven and not consistently available.
- There is a need for more benches along walking trails and sidewalks.
- There is general distrust of drivers as a pedestrian; people on foot don't feel confident that cars will stop, even for a stop sign or red light.
- It would nice for older/disabled people to be able to rent scooters.
- Is a bike share program possible?

Driving and Parking:

- More handicapped parking is needed all over the community, including at stores, restaurants and the community center. This is especially important in the winter with snow and ice. A service provider wondered if it would be possible to add parking reserved for older adults that is not officially handicapped parking—the equivalent of parking for expectant mothers or parents with young children. Also, even older adults who might qualify for handicapped parking may prefer not to be labeled or identified as such.
- Driver education is needed when new traffic features like roundabouts and blinking yellow turn arrows are introduced.
- Traffic/street signs are difficult to read, especially at night. Many are too small and hard to find or see.
- There is too much traffic in Maple Grove, especially on the weekends, and drivers can be discourteous, distracted and aggressive.

3) Housing

The need for more and affordable housing options is a high priority. Many people can't afford senior housing that provides a spectrum of services, and many also wish there were options beyond high-rise buildings. Maple Grove is getting more expensive, making housing even more costly. Many older residents prefer to continue to live in their current homes but need assistance to make it possible.

- There are gaps in residents' housing options.
- People desire more options beyond "vertical living" meaning both multi-level homes and high-rise senior housing. Tiny houses were suggested as one idea.
- Single-level living is hard to find, and places that exist are too large and expensive.
- Housing that includes services is too expensive for many people. There is need for affordable assisted living
- It would be helpful to have a comprehensive housing resource that listed all senior housing in Maple Grove (and surrounding area), both affordable and market-rate housing and other options and information.
- People wished for a go-to person/phone number to call with any questions pertaining to senior housing or services in Maple Grove.
- Affordable housing should be dispersed throughout market-rate neighborhoods rather than clumped together.
- People need support making home modifications that would allow them to continue to live safely and comfortably at home as long as possible or as long as they desire. Types of support might include: evaluating a person's current and future needs; providing education about the types of modifications available; providing information about available financial assistance; and zoning/policy support from the city.
- Some residents wished there were short-term housing for snowbirds.

4) Social Participation

- Many residents deeply value the senior center—the staff as well as the programming.
- Transportation is a barrier to social participation. Non-driving residents cannot attend Sunday worship services, for example, because the few transportation services that do exist don't operate on Sundays.
- It was suggested that there be a space available for pursuing hobbies such as woodworking and stained glass.
- Residents of developments like Arbor Lakes Senior Living (private development offering continuum of care from independent living to assisted living to memory care) tend to have many social needs met within the facility. There are many programs and activities.
 - Could some be made available to nonresidents?
 - There is desire for full worship services at places like Arbor Lakes, especially in the winter when driving to places of worship is harder.
- People would like to be able to attend events or visit destinations in Minneapolis and Saint Paul but have no way of getting there.
- Some cultural events are too costly for people on a budget.
- The senior men's hockey team is appreciated.

5) Respect and Social Inclusion

- People generally felt they were respected and included, although lack of transportation excluded them.
- Community events like Maple Grove Days are supportive and inclusive. (One resident noted that it's the only day where a bus shows up right in front of the building for transportation!)

- It was suggested that businesses like Caribou Coffee, McDonald's and Byerly's hold senior-specific events.
- It can be difficult for newcomers to connect socially, especially if you are living in the community and not in a senior housing development.

6) Civic Participation and Employment

- The community could think more strategically about how it could use volunteers. There is opportunity to better utilize people's time and talents.
- Generally, adults on the older end of the spectrum had less interest in volunteering; younger older adults were interested in more volunteer opportunities. Those who did volunteer did so through their churches and organizations like Loaves and Fishes.
- Some residents wished for more part-time job opportunities.
- Some wondered whether there was adequate older adult representation on the city council or bodies like the citizens advisory committee

7) Communication and Information

- The city does a good job communicating. Many people value and get information from city publications, such as newsletters.
- Many people rely on printed materials like area newspapers and Maple Grove Magazine. Some use the computer/internet for news and entertainment, while many others do not.
- Scams targeting older adults are pervasive. This is a concern.
- Non-English speakers struggle to use transit services because drivers can't understand questions or provide answers or information.

8) Community and Health Services

Community Services

- There is a reported lack of services available for yard work and light household chores—changing high light bulbs, minor repairs, etc. There is a need for affordable "handy man" type services or other ways to help older adults living in their own homes. There is desire for neighbor-to-neighbor support, but people also need more information about trustworthy, affordable service providers who could help with such tasks.
- Residents want more and better delivery services:
 - From grocery stores, restaurants, etc. In some cases existing services have limitations (e.g., Cub will only deliver store-brand items and usually not things that are on sale).
 - A pharmacy service that delivers and sets up medications.
- Specific ideas included:
 - A Bone Builders group (an evidence-based exercise program for older women).
 - More in-store services or assistance, such as Byerly's packing your groceries.
 - More older adult deals or discounts (e.g., cheaper movie tickets on certain days).
- The police department is exploring starting a TRIAD program, which connects law enforcement, older adults and community organizations to reduce victimization of older adults and improve service delivery to older people.

- The fire department offers a free public service of installing smoke detectors in people's homes. Firefighters observe older adults living alone who have no one to help them with relatively minor tasks. Some individuals ask the firefighters to assist them with these tasks while they are in the home to install the smoke alarms.
- Russian-speaking residents regularly leave the community to gather with others of Soviet descent at adult day centers in other suburbs. Those centers help participants run errands, and they provide translation services and other assistance.
- Restaurants should offer smaller portions available for older adults as well as for children; this would make dining out more affordable as well as be more suitable portion sizes for many older people.

Health Services

- Residents appreciate the proximity and quality of health care services in Maple Grove.
- General concerns:
 - There is a need/desire for geriatricians or general practitioners with special interest/knowledge of older adults.
 - The costs of medications are very high and can be difficult to manage.
- *Health literacy*: People need help navigating all aspects of the healthcare system, which can be very complex.
 - There is some lack of understanding of the types of care available (and not) at Maple Grove Hospital because it is a community hospital and not a trauma center.
 - People want more preventative health care rather than just sick care.
 - The North Memorial community paramedic program is becoming a force in the realm of health literacy by helping people connect to the resources they actually need rather than calling on emergency services like 9-1-1 for help. For older adults, community paramedics can help facilitate solutions to problems like moving a washing machine from the basement to the main floor or connecting an older person to a disease-specific diet, which could help an individual remain in their home for several more years.
- Mental Health:
 - There is a concerning lack of mental health support or services.
 - The police department has observed a need for greater mental health services among older adults and has a new position specializing in this issue.
- *Transportation*: Access and availability to healthcare is good, but getting there is the challenge.
 - Transportation services are limited and have long wait times.
 - For those who doctor out of the community and do not drive, it can be especially difficult to travel to those appointments.
- *Dementia*: This is a growing public health issue that affects families and service providers and communities.
 - The police department and community paramedic program regularly help people living with dementia and are developing an expertise in helping those individuals transition between levels of service.
 - ACT on Alzheimer's is an initiative that helps communities become "dementia friendly" by working with businesses, churches, local government, service

providers and other sectors. Age-Friendly Maple Grove is interested in the possibility of pursuing this work.

- *Isolation* is a major issue with serious implications for a person's physical and emotional well-being. This also applies to caregivers. People need help maintaining meaningful community and social connections. (As noted earlier, this assessment struggled to reach isolated older adults. The importance of this issue was stressed by service providers who observe it.)
- *Nutrition*: Home care providers for older adults note that good nutrition is a challenge for older people. Their ability to cook healthy meals and prepare fresh food can be limited. There is a need for more affordable, healthy prepared meal solutions.
- *Falls*: The number of falls—and resulting emergency room visits—among older people is growing. Nationally, the number of fall-induced concussions and other brain injuries among older adults reached record levels in 2013. Falls are a frequent source of ER visits locally as well. There is a need for greater education about fall prevention among older adults and perhaps among medical professionals for thoroughly evaluating older people after falls.
- *Language barriers*: People who speak little or no English face extra challenges and frustrations. Translators are provided through insurance, but it can take 45-50 minutes to get an interpreter on the phone. Simply scheduling an appointment can take 90 minutes. There is also a need for interpretation of things like lab and test results. Significant gaps exist in this arena.
- Life Time Fitness has two Twin Cities' location offering medical services; would this model be something to consider for Life Time's Maple Grove location?

We're not alone. Similar research on community needs reinforces what we learned.

As demographics continue to trend older, issues and opportunities around healthy aging are getting more attention. In Maple Grove, the hospital and the city both conducted research last year to learn about the most pressing issues in the community, and the results of both lined up with findings from Age-Friendly Maple Grove's assessment.

Maple Grove Hospital's Community Health Needs Assessment named healthy aging and senior services one of three top priorities that the hospital will address for the 2017-2019 period as a result of its 2016 assessment. Mental health and substance abuse are the top two priorities and will be addressed separately and together. Both issues also affect older adults.

Findings from focus groups and key informant interviews (conducted by Wilder Research) included the following items relevant to older adults:

- *Community demographics are changing* on three fronts: aging, homeless adults and youth, and immigrants and refugees.
- *Lack of transportation was mentioned repeatedly as a barrier* to older adults' ability to access services, shopping and recreation.

- Older adults also are concerned about *chronic illness, availability of home health care services and caregiving support; the effects of falls; lack of affordable and accessible housing; and medication mismanagement;* among other issues.
- The *community needs more prevention and education services* around many things—for older adults, fall prevention is a priority.
- *Mental health care services* are in short supply but desperately needed.
- *People need help navigating the healthcare system,* and there is need for better care coordination and discharge planning.
- There is concern about *the use of prescription pain medication*.

Read more about the Maple Grove Hospital's <u>Community Health Needs Assessment</u> here.

Maple Grove's 2016 Citizens Survey—conducted every five years—reflects a sample of 449 residents' views on what it's like to live in Maple Grove. In line with AF MG's conclusions, residents love living in Maple Grove, but transportation is the number one concern.

Read a <u>summary</u> of survey findings; complete findings can be found <u>here</u>.

Closing

This process was an important step in building our knowledge and understanding of what older adults in Maple Grove want and need to thrive as they age. Maple Grove's community-level response to these findings will play a critical role in ensuring that as its residents grow older, they will remain and be regarded as valued and vital members of the community.