

OT in the House:

A Role for Occupational Therapy in Habitat for Humanity of Orange County

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Executive Summary

This report was prepared by masters' students of occupational therapy at the University of North Carolina at Chapel Hill with mentorship from their instructor, Dr. Ryan Lavalley and in collaboration with members of Habitat for Humanity of Orange County (Habitat) and the Orange County Department on Aging (OCDOA). Since 1984, Habitat has helped over 500 low income homeowners secure affordable and reliable housing. Since then, as homeowners have aged (52% of Habitat homeowners were 65+ in 2018 (Habitat for Humanity International, n.d.)), Habitat increasingly finds itself assisting homeowners with needs related to aging-in-place. Habitat's Home Services Program (HSP) is currently managing an ever-expanding breadth of social services, including home preservation/repairs, home modifications, financial management, social isolation, and education.

The purpose of this plan is to assess and articulate the potential benefits and role of an occupational therapist in supporting the mission and vision of Habitat for Humanity as the needs of its homeowner population change. The following implementation plan consists of three stages, designed to incrementally make use of the skills of an occupational therapist (OT) to address aging-in-place barriers, while taking into account financial and organizational limitations. Stage 1 incorporates an OT into Habitat's HSP on a consultative basis with the intention of trialing OT participation, developing an understanding of Habitat's current aging-in-place state of affairs, and beginning home-safety inspections. In collaboration with the HSP, the OT will track inputs, outputs, and outcome measures based on previously defined categories, making rigorous evaluation an embedded feature of standard work. Stage 1 requires smaller financial obligations upfront, with an OT working an average of 8 hours/week.

Stage 2 sees an OT join Habitat as a part-time employee, further developing relationships between the OT and homeowners, as well as focusing more on direct intervention with older homeowners. An OT will be able to more comprehensively track information, creating objective measures to evaluate progress and efficiency. Costs associated with Stage 2 include a part-time salary, assessments and screens, and costs commensurate with a part-time employee.

Stage 3 imagines a future period in which Habitat fully embraces an OT as a full-time collaborator. In this final stage, the OT's focus continues to establish projects from Stage 2 with added community-level initiatives. These will develop systemic sustainability, community-level workshops, internal support structures that reduce external referrals, and further expansion of external financial and organizational partnerships. As the final stage suggests payment of a full-time, salaried position, this report offers potential funding sources that have precedent in the broader Habitat International community and could viably reduce the financial burden on this local Habitat affiliate.

Overall, this plan proposes leveraging community strengths to further propel Habitat as a leader in supporting older adults by facilitating further access to services, specifically community occupational therapy, to support seniors living longer and healthier lives among their communities.

Literature Review

Habitat for Humanity of Orange County (Habitat) has been investing in Orange County for the past 40 years. The Home Services Program (HSP), a key organizational entity, is highly devoted to homeowners. Many of these homeowners are older adults or soon will be. The primary challenge facing the HSP is sustainably and effectively attending to older adult homeowner needs. Partnerships with OT have been beneficial in other Habitat affiliates in serving these needs.

One example is the Community Aging in Place - Advancing Better Lives for Elders (CAPABLE) program. This program supported Habitat's aging-in-place homeowners through a collaboration among nursing, occupational therapy, and handy workers (Habitat for Humanity, 2018). As part of CAPABLE, aging homeowners have access to six occupational therapy visits. In this approach, occupational therapy sessions followed a traditional healthcare model, each 60-90 minutes and occurring over the course of five months. Interventions focused on challenges with activities of daily living (ADLs), including falls risks and recovery education, home safety assessment, consultation with handy workers for adaptive modifications, identification and development of client-driven action plans, assistive device training, and collaboration to generalize solutions for the future (Szanton, Cannon, Rinaldo & Altman, 2018). The developers of this program stressed that, "the main goal of the CAPABLE program is to promote self-efficacy, with the client acting as the driver of change" (p. 10). Occupational therapy played a key role in promoting client-driven aging-in-place. The CAPABLE program reduced the number of challenging ADLs for 75%, improved IADL for 65%, and reduced depressive symptoms for 53% of participants (p. 13). It is being replicated in Greensboro, NC, and therefore that nearby project may be a resource for Habitat of Orange in implementing similar programs.

Other programs have found similar results. A community-based occupational therapy intervention called "Aging in Place" included an in-home assessment with standardized measures (e.g. *SAFER-HOME* assessment, Functional Independence Measure, Short Falls Efficacy Scale, Health-Related Quality of Life). Additionally, the program offered client-family collaboration, training of assistive device use, design and implementation of home modifications, and education of adaptive and compensatory strategies to increase functional independence and safety. Funding for this research program was provided by both Howard County, Maryland as well as through Medicare reimbursement. The intervention successfully increased functional independence, home safety, and self-reported quality of life while reducing subjective fear of falling (Sheffield, Smith, & Becker, 2013).

These examples inform this plan's vision for the role of an OT at Habitat: conducting in-home assessments, establishing rapport with aging homeowners, making home modifications, and providing education to the client and caregivers, especially in the first 2 stages. Stage 3 expands this vision to integrate these strategies and their benefits into broader systems and relationships, fostering sustainability and community vitality across Habitat homeowners and their communities for the long-term.

Capacity & Needs Assessment

Pulling from interviews, observations, and research, we identify strengths and needs within Habitat's context that are most relevant in this plan's development and implementation. The strengths identified emerge from the capacities of organizations, partnerships, and communities across Habitat's relationships and connections, while needs are derived from stakeholder feedback within Habitat and our professional lens as occupational therapists.

Resources & Strengths

- **Habitat International**

- Habitat International has created an organization-wide initiative to develop aging-in-place strategies. The mission is to foster safe, livable homes and communities to improve the quality of life for older adults.
 - This initiative is further supported by a grant from the AARP Foundation. As Habitat for Humanity of Orange County (Habitat) takes on this aging-in-place initiative, there is precedent for support from Habitat International.
- Other Habitat affiliate organizations implement similar aging-in-place support services as mentioned in the above literature review. Habitat can reach out and learn from these other initiatives as they continue to build their own program.

- **Habitat Orange County (Habitat)**

- Dedicated and talented Homeowner Services Program (HSP) Staff:
 - Kevin Giff: Community Development Manager
 - Steve Drake: Vice President of Homeowner Services
 - Sarah Wessell: Homeowner Services Manager
 - The HSP team embody the mission of supporting Habitat families well after they have moved into a home. They are well-poised to address aging-in-place concerns.
- Habitat has been recognized as a certified Aging-in-Place affiliate by Habitat International based on their completion of the six requirements set forth by Habitat International (Habitat for Humanity Knowledge Center, 2020).
- Habitat of Orange County is a national leader in aging-in-place, as can be seen through their newest senior living site: Crescent Magnolia. This was the first senior housing community using an ownership model run by Habitat in the United States. The unique aim of this community is to provide senior homeowners with an ADA-compliant housing, active community, and strong environmental resources. Through the Crescent Magnolia efforts, Habitat is already distinguishing itself as a forerunner in this issue.
- Habitat has strong relationships and history with local OT practitioners. Crescent Magnolia was designed with consultation from three local community-based OTs and

consists of 24 ADA-accessible one-story townhomes built with longevity, safety, and community engagement in mind.

- Habitat is a member of the Orange County Home Preservation Coalition which is composed of home preservation and rehabilitation organizations who serve Orange County (including Rebuilding Together of the Triangle, Orange County Housing and Community Development, and Central Piedmont Community Action, among more). The coalition seeks to improve accessibility and affordability of home repairs and preservation to Orange County residents.
- **UNC Division of Occupational Therapy**
 - Habitat has already established a relationship with faculty and students within the UNC program, utilizing class projects to explore the value of occupational therapy in the HSP's mission, capture oral histories of Crescent Magnolia residents, gather research on older adults experiences in Habitat homes, and more.
- **Orange County Department on Aging (OCDOA)**
 - The OCDOA has its own home preservation program managed by a community-based OT to help Orange County older adults maintain their homes and age-in-place. It is also a member of the larger Orange County Home Preservation Coalition.
- **Large Volunteer Base**
 - Dedicated volunteerism is one of Habitat's most noteworthy strengths. In partnership with OT, Habitat could leverage this resource by training and empowering volunteers to support homeowners in the various areas that present barriers to aging-in-place. The HSP could integrate volunteer's personal strengths/experience into the larger aging-in-place initiative.
- **Long-standing relationships with the homeowner community**
 - Since 1984, Habitat has placed a large focus on maintaining relationships with their homeowners. This network of 500+ homeowners (52% of whom were 65+ in 2018) creates a community in which Habitat is highly intertwined. Habitat maintains many roles within this community (home construction and repair entity, advocate, financier, bridge to community resources, educator, etc.).

Needs & Challenges

- **Homeowner Housing Issues**

- Home Rehab: Numerous Habitat homeowners require critical repair (e.g. roofs/HVAC systems etc.), interior (e.g. handrails) and exterior work (e.g. porch or deck, painting, patching, etc.).
- Home Modifications: Aging homeowners are experiencing mobility changes and need homes redesigned to match their needs (e.g. a homeowner newly using a wheelchair needs grab bars in their home). However, Habitat often does not learn about this need until they engage with the homeowner for another purpose.
- Many older adults in Habitat communities lived on fixed low-incomes and cannot afford home repairs or modifications, let alone unexpected expenses (property tax exemptions)
- Shifting Ability to Maintain Home
 - Older adult homeowners often struggle to maintain and/or complete smaller projects around the home. It would benefit Habitat and homeowners to define boundaries around who can assist with such projects.
 - Homeowners often do not notify Habitat or another agency until housing issues worsen. Habitat needs to identify these homeowner needs earlier to prevent larger issues.
 - Habitat completes critical, interior and exterior repairs for homeowners who meet certain criteria. However, their method of referring out to other community partners – who may be better suited to complete certain projects – lacks consistency and defined parameters. This calls into question the HSP's sustainability if it continues with currently undefined boundaries.
- Hoarding Situations
 - Potential need for an occupational therapist and social worker team to address issues of hoarding.

- **Social & Community Issues**

- Homeowner Household Transitions: Habitat homeowners are experiencing many inevitable life transitions that tend to come with aging, such as children moving away, spouses passing away, and social networks weakening.
- Feelings of disconnection and isolation from community are particularly relevant for Habitat's more rural homeowners such as the Rogers Road Community.
- Connecting Homeowners to Supportive Services
 - For aging homeowners, assistance from the OCDOA Aging Transitions Team could be of great help for this situation.
 - Although the Seymour Center is a beneficial community resource for older adults, some of Habitat's older adult homeowners do not want to attend its

programs, and Habitat is unsure of the reasoning. Focus groups could be facilitated to better understand and address this issue.

- Social tension appears to exist between individuals who live in the Crescent Magnolia community and older homeowners who have received Habitat homes in the past.

- **Boundaries & Defining Program Scope and Limits**

- Kevin Giff and Steve Drake currently take the bulk of phone calls from Habitat families who have extremely wide parameters of needs. Kevin and Steve have devoted themselves to supporting individuals/families that desire to age-in-place but are also aware that the scope of this mandate may be too large for just the two of them to accomplish moving forward.
- A challenge that needs to be overcome involves determining which areas of need Habitat are best situated to support homeowners and which areas would be better supported by external agents in the community.

The Role of Occupational Therapy

Complexities consistently arise between Habitat and aging homeowners, including financial instability, housing accessibility, and social/community connectedness; Habitat currently requires more structure around addressing these needs. A system, organizational flow, and increased capacity to manage and direct these needs would be beneficial. The proposed emergent role of an OT will contribute to resolving these needs by addressing housing-related needs, specifically home modifications, improving ability to maintain homes, and connecting homeowners to social support services. This proposal includes models for incorporating an OT into Habitat Orange County on a consultant, part-time, and full-time basis. The goal will be to actively assist with addressing these concerns to better support aging Habitat homeowners using an occupational perspective.

As Habitat seeks to optimize aging in place outcomes for their homeowners, there is potential mismatch between their *desire* and *ability* to effectively and sustainably respond to their homeowners' complex needs. Therefore, the goal is to develop and provide effective connections to resources and services for homeowners without overtaxing staff. Occupational therapy is well-equipped to meet this goal.

OT practitioners are uniquely trained to affirm and address the interconnectedness among an individual, their environment, and their daily activities or "occupations". For example, while many times we focus on the changes in mobility for older adult homeowners and their direct impacts on functional abilities, these changes also influence an older adult's sense of comfort, stability, social connectedness, and empowerment in their everyday life. *Where* one lives is inextricably linked to *how* one lives, and vice versa. OTs are uniquely trained to attend to these integrated and enfolded relationships, leveraging skills, assets, and community capital inherent to the community to foster positive change (McKnight & Kretzmann, 2012). Anchored by capacity

building models like this, OT is inherently focused on identifying and building upon existing strengths to work toward progress in effective and integrated ways.

We aim to support Habitat by using an occupational lens to address their challenges in serving older adult homeowners. This lens will help us create a scalable plan for incorporating an OT into the staff infrastructure of Habitat in three distinct phases: consultant, part-time, and full-time. In doing so, our goals are to 1) offer insight that exemplifies how an OT might think about the unique strengths and challenges of this particular organization and 2) create a structure to more sustainably address the needs of older adult homeowners served by Habitat.

Program Implementation and Evaluation Plan

Unpacking Community OT

Occupational therapy in community practice has fundamentally unique features that warrant unpacking. For example, though the proposed OT will be utilizing skilled therapeutic approaches inherent to the discipline, we refrain from utilizing the term “therapy.” This choice is meant to avoid conjuring a traditional healthcare system approach – nearly always a 1-to-1 client/clinician model. In community practice, the role of the OT expands well beyond a 1-to-1 biomedical model and therefore can magnify the OT’s potential benefits and activities with Habitat. With a foundation in a community practice model, this plan proposes a breadth of activities that utilize OT’s professional knowledge in strengths-based change, activity analysis, and people-environment fit to target individuals, families, and/or communities.

Why a Staged Model?

Introducing the role of an occupational therapist to Habitat via stages will build a strong and sustainable foundation for both Habitat and the practitioner, allowing for flexibility and adaptation as the role develops:

Therefore we envision an OT will:

Stage 1 (Consultation): Utilize an occupational lens to evaluate and consult on needs of homeowners identified by staff, building familiarity and knowledge among the OT and staff.

Stage 2 (Part-Time): Develop more consistent ongoing relationships with homeowners on a part-time basis with home visits, assessments, and at-the-ready consultation for both prevention and response. This will foster collaboration in determining goals, measuring functional progress, and building sustainable change.

Stage 3 (Full-Time): Expand services beyond direct services to include community-level evaluation, intervention, and consultation, developing systems and programs for aging in place – and potentially other initiatives – in collaboration with local community members and Habitat.

Staged Timeline

<u>Stage & Objective:</u>	<u>Specifics of Plan</u>	<u>Timeline</u>
Pre 1: Guided Data Gathering	This does not yet involve direct input of an OT (beyond that provided through this report) and rather serves to further substantiate, clarify and quantify the need for OT going forward.	Completed by end of fiscal year 2020 by Habitat employee Kevin and intern
1: Consultative OT at Habitat	This OT will continue assessing capacities and needs of Habitat staff members, compiling and analyzing data relative to homeowner inquiries/needs, and building relationships with community partners to build out a more robust referral network.	Over the course of FY2021
2: Part-time OT at Habitat	The OT will begin part-time work at Habitat to further develop relationships with homeowners by conducting home visits, administering assessments/screens, developing goals and intervention plans with homeowners, and partnering with Habitat’s construction division for building and maintenance of adaptive equipment (AE) and durable medical equipment (DME). Support could be provided by the UNC OT program.	FY2022-FY2024
3: Full- time OT at Habitat	The OT will be a full-time employee at Habitat. While continuing to develop the OT process outlined in Stage 2, the OT will also create group work sessions. Stage 3 will be modeled after the CAPABLE program.	FY2025+

Stages of the Program Implementation Plan

Pre-Stage 1

“Pre-stage 1” involves Habitat gathering metrics on their own (before the official involvement of OT) to further illustrate the need for an OT in subsequent stages. This stage, though short, serves as an opportunity to powerfully illustrate the challenges faced currently by the Homeowner Services Program (HSP) team and substantiates their desire for an OT’s input and assistance. This stage includes tasks that the HSP is currently completing, such as unifying the database where homeowner data is stored and accessed. Salesforce is the platform being used for this and, at present, Kevin and an intern are diligently working to ensure files and information from multiple print and electronic sources become unified therein. Though Habitat has made notable strides in terms of aging-in-place, the data gathered during Pre-Stage 1 will demonstrate their long-term commitment to supporting both Crescent Magnolia’s new homeowners and homeowners who are continuing to age-in-place in existing Habitat homes.

Stage 1: Consultative OT at Habitat Orange County

Stage 1 entails employing the skills of an OT on a consultative basis. This requires minimal use of resources from Habitat, while setting the stage for a larger role for OT in the future. This consultative model could utilize the flexibility of OTs employed by other community/governmental organizations that have overlapping scopes (e.g. Orange County Department on Aging, Rebuilding Together, etc.)

OT Action Steps:

- Use data collected through Habitat’s software (e.g. Salesforce) to assess frequency and nature of referrals.
- Attend meetings of community partners (e.g. Orange County Home Preservation Coalition) to gain understanding of what each linked organization does and how its services could benefit Habitat homeowners. This would help Habitat create and develop community partnerships with organizations doing work on the ground right now.
- Conduct home visits to older Habitat homeowners to evaluate aging-in-place needs, including home modifications, durable medical equipment, and activity modifications. An example report from a home visit such as this conducted by a community OT from the OCDOA can be found attached (“De-identified Occupational Therapy Consultation Report”).
 - While the OT will still be able to help solve short-term problems, in Stage 1, emphasis will be placed upon exploration and investigation. After identifying needs, the OT will most often consider referrals to other community resources and health providers based on evaluations. Longer-term relationship building and consistency with homeowners will develop over time in later stages.

- Develop a system for tracking outputs/productivity. Keeping track of all activities associated with a newly positioned OT at Habitat will help determine the value of this position. During Stage 1, tracking will focus on how an OT may or may not be contributing to reducing the workload/financial burden currently at Habitat. Important metrics to track include:
 - Number and nature of communication points with homeowners (phone calls, emails, in-person, etc.)
 - Home visit assessment data (see attached document: “De-identified Occupational Therapy Consultation Report”)
 - Referrals: Who were they referred to and when? How long did it take to receive followup care?

Specific Partnerships to Investigate/Develop:

- Focused Community Strategies (FCS) is a 501c3 community development organization based in Atlanta, GA. Their focus is on neighborhood engagement, mixed-income housing, and economic development. They offer training and consultative services to other nonprofits. This may be a powerful resource for Habitat.
- The Orange County Home Preservation Coalition (OCHPC) is developing an education program to assist older adults with home maintenance and repair. OCHPC’s goal is to streamline services that older adult homeowners regularly engage with, making home visits from various agencies and organizations more efficient. As part of the OCHPC, Habitat’s active involvement facilitated by an OT would support Habitat homeowners ability to better maintain their homes and complete smaller projects.
- NCCARE 360 is the result of a public-private partnership between the NC Department of Health and Human Services and the Foundation for Health Leadership and Innovation (FHLI). Their mission, to be a “statewide coordinated care network that better connects individuals to local services and resources,” aligns well with Habitat’s mission. If Habitat becomes an NCCARE 360 community partner, they would receive access to such resources as a robust statewide directory and call center, data repository, community engagement team, etc.

Evaluation: How is Success Measured?

- **Database:** Habitat’s database, which now includes OT tracking information, will allow Habitat employees to objectively evaluate outcome measures before and after OT contribution. Metrics tracked in this database must always monitor problems Habitat is trying to solve (e.g. inefficiency in communication with homeowners, redundancy in home repairs/modifications, managing referrals to outside services, etc.).
- **Surveys and/or Interviews:** Discussion and feedback from key members of the HSP will help to reveal whether or not OT supported addressing Habitat’s current needs. More

specifically, how much more time they are able to allocate to tasks that fall within their job description as opposed to being overextended.

- This data will be collected through a pre and post survey of self-report data that HSP employees fill out offering a picture of their weekly time divided into percentages allocated to various responsibilities. This survey will be administered prior to Stage 1 and one year into the implementation of Stage 1 to gain a clear picture of exactly how the consulting OT has or has not been most helpful.
- Survey question examples:
 - “What percentage of your work-week do you devote to...”
 - Fielding calls from homeowners/case management
 - Conducting home visits
 - Locating resources for homeowners
 - Internal troubleshooting among staff
 - Of the tasks above, which adjustment in time allocation has had the most impact on your productivity/satisfaction/ability to fulfill your job description? Why?

Resource/Financial Considerations:

- \$35/hour is a typical PRN (as needed) OT wage for community work of this kind. This was the starting rate for similar positions at the Orange County Department on Aging (OCDOA).
- Average of 8 hours/week (1 working day/week).

Stage 2: Part-Time OT at Habitat Orange County

In Stage 2, the focus of the OT shifts to ongoing therapeutic relationships between the OT and current homeowners. The OT focuses more on direct, somewhat consistent, interventions. A strength of Habitat is its close proximity to and relationship with UNC’s OT program; OT students and/or faculty could provide support to the part-time OT at this stage through consultation and student projects, especially in relation to capturing evaluation and outcomes of OT’s contribution.

OT Action Steps:

- Address homeowner needs through occupational lens to identify homeowner-driven outcomes.
- Assume more direct intervention responsibilities, rather than simply referring services outside of Habitat.
- Define OT schedule, including home assessments availability and increase Habitat homeowners’ awareness of service

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- Create a geriatric home assessment tool kit including screens, assessments, and educational handouts (e.g. Assessments mentioned in above literature review, Cougar Home Safety Assessment, HomeFast screening tool, other falls risk, recovery, and home safety tools).
- Determine short- and long-term functional goals with homeowners (e.g. developing more confidence in home mobility and accessibility, creating and maintaining financial plans, connecting more with their communities) and develop action plans for meeting these goals.
- Provide ongoing education to homeowners on the use of new or existing assistive devices and durable medical equipment.
- Measure homeowners' functional progress using standardized assessments (e.g. Falls Efficacy Scale, STEADI balance screens) and use quantitative/qualitative data to support the effectiveness of occupational therapy.
- Develop home modification work-orders in partnership with Habitat Construction Division.
- Collaborate with homeowners on the generalizability of their goals for future problem solving.

Specific Partnerships to Investigate/Develop:

- AARP Here to Stay Program is a bountiful resource on aging-in-place strategies. There is a strong potential for a partnership here as it shares a similar mission with Habitat.
 - In 2019, Habitat received a \$557,000 grant from AARP Foundation for this program, which is a home maintenance workshop series for low-income older adults.
 - Habitat International encourages this partnership.

Evaluation: How is Success Measured?

- Evaluation will be refined versions of Stage 1 methods.
- OT involvement will also be measured through standard documentation (e.g. session notes, plan of care, standardized assessments, etc.).
- Post-survey (similar to that of Stage 1) will need to be developed for Stage 2.

Resource/Financial Considerations:

- Part Time Employee for OT position at 20 hours/week, with limited PTE benefits package.
- Possible grant opportunities to supplement occupational therapy funding, which could be completed by Habitat's grant department.
 - AARP Foundation offers several grant opportunities, including AARP Direct Service grants that offer funding for \$150,000-\$350,000 for up to 3 years.
shorturl.at/eIT14

- Promoting Aging-in-Place - Administration for Community Living shorturl.at/pFKO2
- NC Commerce Community Housing Grants - shorturl.at/aglAO
- Costs of assessments and screens.
- Mileage reimbursement for home visits.
- OT will work with the Construction Department for home modifications and creation of durable medical equipment. OT will be able to reduce costs for assistive devices, durable medical equipment, and home modifications by having knowledge of local/community/governmental resources available.

Stage 3: Full-Time OT at Habitat Orange County

In Stage 3, focus is aimed at utilizing a full-time OT to systematically address sustainability and community building needs for aging-in-place homeowners, while continuing to develop the responsibilities outlined in Stage 2. Implementation of occupational therapy in this final stage is modeled on “The Community Aging in Place - Advancing Better Living for Elders” (CAPABLE) design. Orange County is well situated to implement a version of the CAPABLE program due to its robust network of community partners for aging-in-place (see Appendix A).

OT Action Steps:

- Full-time OT will support homeowners on an ongoing and consistent basis. The OT will continue to develop action steps listed in Stage 2 (evaluation, plan of care, intervention, and documentation process).
- OT will develop and conduct community workshops between aging members of the community (e.g. medication management, falls prevention, transportation accessibility, financial management skills, home modifications, etc.). The overarching goal of community workshops will be to foster stronger community networks between aging homeowners. Sustainability and autonomy will developed as homeowners reach out to their community and these resources for support and problem solving.
- While, the OT will address many of the aging homeowners’ needs directly and will develop a referral system to address additional needs, he or she will also be an especially valuable resource for bridging the gap between homeowners and medical system referrals when needed (e.g. connections with UNC Hospitals, UNC School of Medicine, Blue Cross Blue Shield of NC, etc.).
- Steps to developing a Community Aging in Place—Advancing Better Living for Elders (CAPABLE) program in Orange County:
 - Connect with Greensboro, NC project for consultation.
 - Contact and collaborate with UNC-CH Division of OT and School of Nursing, as well as, UNC Hospitals.
 - Develop grant proposals for funding resources.

Specific Partnerships to Investigate/Develop:

- The CAPABLE program is a team-oriented approach developed by John Hopkins School of Nursing. Its aim is to enable low-income seniors to safely age in place. The team is made up of an OT, a nurse, and a handy worker, combining their disciplines to assist in supporting older adults in their homes (Szanton, Cannon, Rinaldo & Altman, 2018). The main goal of the program is to promote self-efficacy, using motivational interviewing to support homeowners in setting their own goals. There are currently 28 CAPABLE sites across the United States.
 - Potential Orange County CAPABLE partnerships: UNC-CH Division of Occupational Therapy, UNC-CH School of Nursing, Habitat for Humanity Orange County
 - Online training modules from CAPABLE:
(https://nursing.jhu.edu/faculty_research/research/projects/capable/)
 - In North Carolina, the CAPABLE program is being replicated in the city of Greensboro.

Evaluation: How is Success Measured?

- Evaluation will be refined versions of Stage 2 methods.
- OT involvement will also be measured through standard documentation (e.g. session notes, plan of care, standardized assessments, etc.).
- Post-survey (similar to that of Stage 1) will need to be developed for Stage 3.

Resource/Financial Considerations

- Full Time Employee for OT position at 40 hours/week, with FTE benefits package.
- Office space at Habitat (including necessary computer, phone, and database access).
- Depending on financial limitations/needs of Habitat, the OT may deem it important to raise funds through external grant opportunities, in collaboration with Habitat's Development Team.
 - Research shows that the CAPABLE model significantly reduces costs (more than \$20,000) by preventing medical complications, as well as, improving homeowner function and motivation (Ruiz, Snyder, Rotondo, Cross-Barnet, Colligan, Giuriceo, 2017).
 - Grants for CAPABLE Funding:
 - The Harry and Jeanette Weinberg Foundation
 - Archstone Foundation
 - U.S. Department of Housing and Urban Development
 - AARP Foundation offers several grant opportunities, including AARP Direct Service grants that offer funding for \$150,000-\$350,000 for up to 3 years.
https://www.aarp.org/content/dam/aarp/aarp_foundation/pdf/2020/aarpfoundation_march_2020_direct_service_rfa.pdf

Estimated Plan Budget

Fiscal Year	FY20	FY21	FY22-FY24	FY25+
	Pre-Stage 1	Stage 1	Stage 2	Stage 3
Expenses	Pre-OT/Volunteer	OT @ ~8 hours/wk	OT @ 20 hours/wk	OT @ 40 hours/wk
OT PRN Wages (\$35/hour)	\$0.00	\$14,560.00	\$0.00	\$0.00
OT Salary	\$0.00	\$0.00	\$25,000.00	\$50,000.00
Employee Benefits	\$0.00	\$0.00	\$2,500.00	\$5,000.00
OT Assessments/Screens	\$0.00	\$0.00	\$300.00	\$300.00
Computer, mobile phone, office space	\$0.00	\$0.00	\$1,000.00	\$2,000.00
Reimbursable mileage (\$0.58/mile)	\$0.00	\$0.00	\$600.00	\$1,200.00
TOTAL EXPENSES	\$0.00	\$14,560.00	\$29,400.00	\$58,500.00
Revenue				
AARP Direct Service RFA Grant			\$150,000-\$350,000	\$150,000-\$350,000
Harry and Jeanette Weinberg Foundation Grant			Wide Range	Wide Range
Archstone Foundation Grant			Wide Range	Wide Range
US Housing and Urban Development Grant			Wide Range	Wide Range
TOTAL REVENUE			\$150,000	\$150,000

Conclusion

Habitat for Humanity of Orange County is at the forefront of senior housing, with a pioneering and enthusiastic team leading their charge to provide affordable and accessible homes for older adults. Leveraging commitment to their homeowners and their propensity for innovative action, Habitat is perfectly poised to invest further in Orange County residents by housing community occupational therapy practice. Both internally and externally, Habitat has strengths that can provide a firm and sustainable foundation on which to build a creative and responsive occupational therapy service, instigating long-lasting positive effects for all of their homeowners. This plan highlights a clear way forward in harnessing this powerful potential to contribute to community development that will support older adults living longer and healthier lives in their homes and communities.

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Appendices

Appendix A

The Aging-in-Place Network in Orange County



Appendix B

Habitat for Humanity of Orange County - Organization Chart

