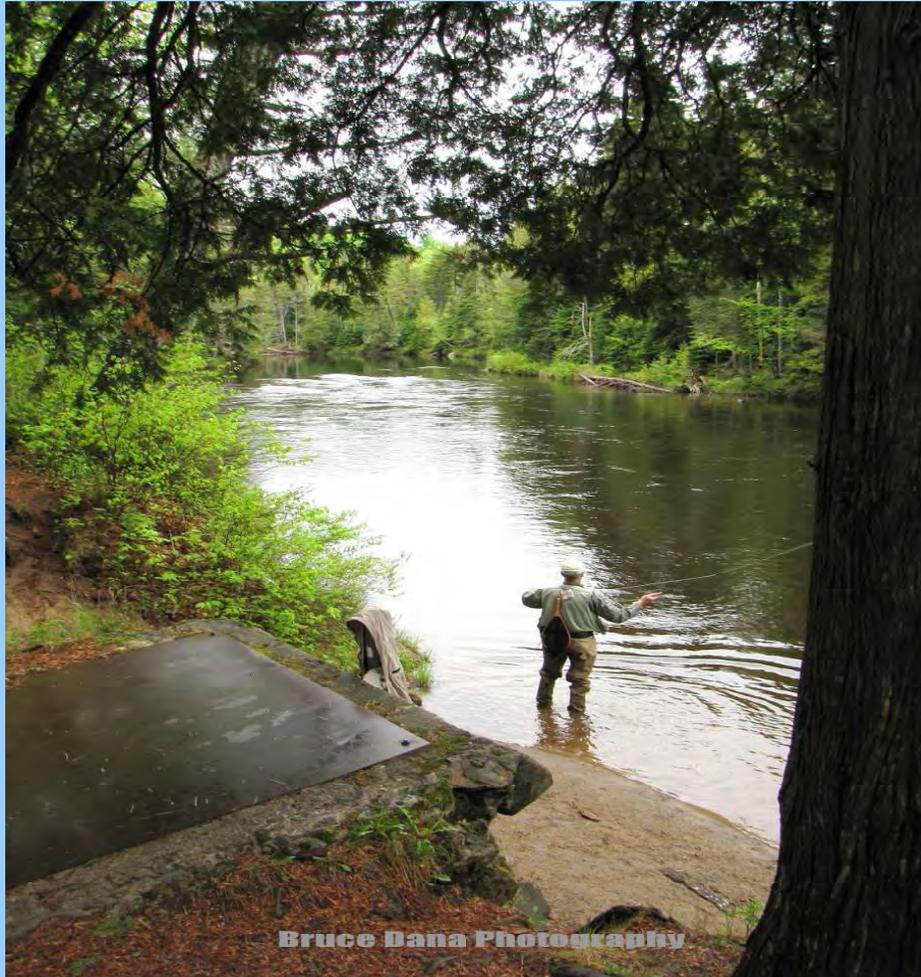


Aging in Place in the Tri-Lakes Region of the Adirondacks Community Empowerment Action Plan



A Plan of Engagement and Collaboration

August 2010



Mercy Care for the Adirondacks

Center for Inclusive Design and
Environmental Access
SUNY/Buffalo



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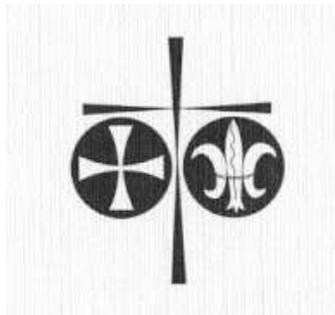
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Thank you for your extraordinary work!

Mercy Care for the Adirondacks

Mercy Care for the Adirondacks is a mission sponsored by the Sisters of Mercy to enhance in every dimension the fullness of life of elders living in their community independently. Mercy Care is a renewed mission of the Sisters of Mercy who first came to the Adirondacks in 1895 to establish Sanitorium Gabriels to treat tubercular patients. Its work is carried out through a Friendship Volunteer Program, a Faith Community Nurse Program, and an Education and Advocacy Program. Mercy Care offers its services to any older adult in need.



Acknowledgement

Mercy Care is deeply grateful to Susan Hunter, Ph.D. and the IDEA Center at SUNY Buffalo for the partnership and technical assistance they have provided to this unique Aging in Place Community Empowerment Planning Project in the rural Adirondack Mountain communities of Lake Placid, Saranac Lake, and Tupper Lake in Upstate New York. The IDEA Center has nationally recognized expertise in community planning, universal design, and Aging in Place communities.



Foreword

Since its founding in 2007, Mercy Care for the Adirondacks has been responding to the unprecedented demand in the Adirondack's Tri-Lakes Region for elder care needed in a wide variety of settings, especially in elders' own homes. Public policies now encourage elders to stay in their own homes for as long as possible to delay or prevent nursing home placement. ***But to do this, the community needs to develop the vision, plans, and services that will support them to "Age in Place."***

With support from the New York State Office for the Aging, Mercy Care for the Adirondacks initiated a planning process for Aging in Place in the Tri-Lakes in September 2009. Mercy Care served as a catalyst and facilitator for community committees and partners to organize planning activities to assess the need for services, develop networks to foster community support to respond to the insufficient supply of non-institutional health care and social service alternatives, and develop a plan for residents in one of the most under-served and demographically oldest areas of the State, the Tri-Lakes Region of the Adirondack Park.

While Mercy Care is a relatively new organization, it is the evolution and renewal of a 100-year-old mission of the Sisters of Mercy who first came to the Adirondacks in 1895 to establish Sanitorium Gabriels to treat tubercular patients.

This planning project supports Mercy Care's mission to enhance in every dimension the fullness of life of elders living in their community independently. Mercy Care offers companionship and friendship to relieve isolation and loneliness; extends advice, referral, and assistance to elders and to their caregivers; advocates for the development of elder-friendly communities which encourage the participation and civic engagement of older adults; and promotes through education and advocacy a fullness of life for older adults in the communities of the Adirondacks. ***Mercy Care offers its services to any older adult in need.*** Its work is supported solely through charitable donations and grants.

Aging in Place Community Empowerment Planning Principles

Adopted by Tri-Lakes Community Committees

- Each person has an immeasurable value and innate dignity that is not diminished by age.
- The life of each person is cherished and considered worthy of our love and caring.
- Respect for the dignity of each person includes respect for each person's freedom to manage and control his or her own life, especially in matters of individual conscience, personal philosophy or religious belief.
- The human dignity of each elder and each person who may be caring for them is respected.
- The human person is essentially social; isolation and loneliness severely impacts the quality of life. Priority will be given to the establishment and strengthening of meaningful social relationships with family, friends and volunteers, to the encouragement of the participation by elders in the life of their communities, and to the promotion of elder-friendly communities.
- The values of kindness, compassion and concern for the well-being of each person, especially the poor, lonely or infirm, are fundamental to a successful Aging in Place Action Plan.
- The Aging in Place Action Plan recognizes that since a person is one unique, integrated being, any assistance provided must be holistic, addressing the physical, social, intellectual, emotional and spiritual needs of each person in the context of his or her family and community situation.

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I. Introduction

New York State Office for the Aging Director, Michael Burgess, announced in September 2009 that a competitive state grant was awarded to Mercy Care for the Adirondacks. Mercy Care was among fifteen not-for-profit organizations and local governments to share in Community Empowerment grants to do exploratory work on critical issues for communities who want to plan for aging in place.



Patty Bashaw, Director of the Essex County Office for the Aging, updates the committees on aging demographics in the Tri-Lakes

This Action Plan is the outcome of nine months of steady work by over 30 Community Committee Volunteers who met at least monthly and gave of their time conducting interviews and focus groups, informing policymakers and community leaders, studying a service inventory, designing and reviewing a survey, and discussing development of plans to identify the most important priority actions needed to create livable communities for aging in place in the Tri-Lakes region of the Adirondacks in New York State.



The Saranac Lake Task Force discusses a planning approach to engage the community

The Community Committee Volunteers have developed this objective plan of action for each town, as well as a commonalities section to address issues identified and relevant to all three communities. To develop the plan, the Community Committee Volunteers actively engaged elders, other residents, service organizations, aging services providers, local officials, educators, and the business community to create this

draft plan for aging in place.

Mercy Care's strategic objective was to develop a model for Aging in Place in the Adirondacks, which might be helpful to other rural communities. While Mercy Care helped organize the groups and carry out the work plan, this effort to plan for Aging in Place in the Tri-Lakes is the result of leadership by each Community Committee, the involvement of elders, a community survey, and community-wide interest and deliberations.

The planning effort was supported by Susan Hunter, Ph.D., Senior Research Associate at the IDEA Center, School of Architecture and Planning, SUNY/Buffalo, who provided her technical assistance as an in-kind contribution from the Center. The IDEA Center has nationally recognized expertise in community planning, universal design, and Aging in Place communities, but has focused on major metropolitan areas. Working with Mercy Care represented an opportunity to broaden and sharpen their expertise in rural community development.

II. Purpose of the Plan

Development of this draft *Action Plan for Aging in Place in the Adirondacks Tri-Lakes Region* is only a first step in creating the conditions that make the Tri-Lakes region a good place to grow up and grow older. For this reason, the plan has broader objectives, and the implementation of the actions represented here is seen as a long-term, on-going process of assessment, engagement, collaboration, and improvement.

Objectives for the Tri-Lakes Region

- To develop an objective plan of action for each town and identification of commonalities relevant to all three communities.
- To develop concrete plans and outcomes in the community, building design and services;
- To stimulate the development of priority services that will aid older residents to remain in their homes as long as they desire and are able to do so;
- To encourage increasing awareness on the part of local leaders of the advantage of developing a broader range of development responses that accommodate all community members no matter what their age;
- To foster intergenerational interactions and an attitude of inclusion;
- To educate the community as a whole in the concepts of inclusion, aging in place and livability.

Objectives for the Adirondacks and Beyond

- To disseminate the results of this planning process so it becomes a model for other towns and villages in the Adirondacks
- To disseminate the results of this planning process across New York State and to other rural areas of the country so they are stimulated to begin planning for aging in place;

III. Developing the Plan

A. Process. Each community group spent eight months studying the forces at work in the region affecting the lives of aging residents and the livability of their communities. Their work has included review of previous aging in place planning efforts around the country to guide development of plans for livable communities for aging in place. The Committees conducted research through interviews, focus groups, community meetings, a community survey, and a service analysis to assess the challenges facing Tri-Lakes residents and solutions that will improve the lives by creating communities that are good places to grow up and grow older.

Using community-based planning Community Committees is better than using a paid consultant because it gets members of the community involved in the planning process. The grass-roots, inclusive process:



Jamie Whidden, Chair of the Mercy Care Community Council Steering Committee, discusses the planning process

- Improves knowledge transfer and enhances sustainability of the effort;
- Raises awareness;
- Creates ownership;
- Makes community leaders aware that community members are concerned, that there is a constituency for aging in place, and more responsive to the needs of elders.

The interview, focus group, and survey process engaged service providers from different specialties and community leaders in thinking about aging in place, creating cross fertilization and the need for each town to plan for aging in place as a whole. It also educates local leaders about aging in place approaches and service components. In the process of their work, the Community Committees have already seen the interest and concern of area leaders and residents:



Tupper Lake Aging in Place Discussion
March 2, 2010

- Members were able to share knowledge and information with the development of the Tri-Lakes Housing Study raising aging in place concerns;
- Local government officials were engaged
- Aging in Place Subcommittee created as part of the Tupper Lake Revitalization Committee
- Tri-Lakes Center for Independent Living has applied for grant funds to provide door-to-door transportation for elders in the Tri-Lakes.
- The Community Committee makes the issue visible in the community and invites residents to become engaged, educating the community as a whole.
- Saranac Lake Adult Center established Wellness Center Exercise Room

B. Timetable. New York State Office for the Aging grant funding for development of the Action Plan began in September, 2009. The Plan was completed in August 2010. The project was introduced in the Tri-Lakes by Mercy Care for the Adirondacks in the pre-grant period through a June 2009 educational forum hosted by Paul Smith's College presented by Susan Hunter, Ph.D., Senior Research Associate at the IDEA Center, School of Architecture and Planning, SUNY/Buffalo. Upon request, an executive summary of the ***Aging In Place in the Adirondacks*** educational forum is available from Mercy Care for the Adirondacks.

September 2009

- Steering Committee Formed
- Community Committees comprising over 30 individuals in Lake Placid, Saranac Lake, and Tupper Lake established and oriented to the Project in their first meeting.

October – December, 2009

- Focus groups, interviews, presentations to community groups, discussion with local officials, data gathering on service delivery inventory

January – March, 2010

- Community survey prepared, distributed, tabulated

March, 2010

- Action Plan first draft

April, 2010

- Draft Action Plan reviewed and revised by Community Committees

May, 2010

- Draft Action Plan presented to community

June, 2010

- Action Plan revised to reflect community comments

July - August 2010

- Implementation plan developed
- Action Plan printed and distributed

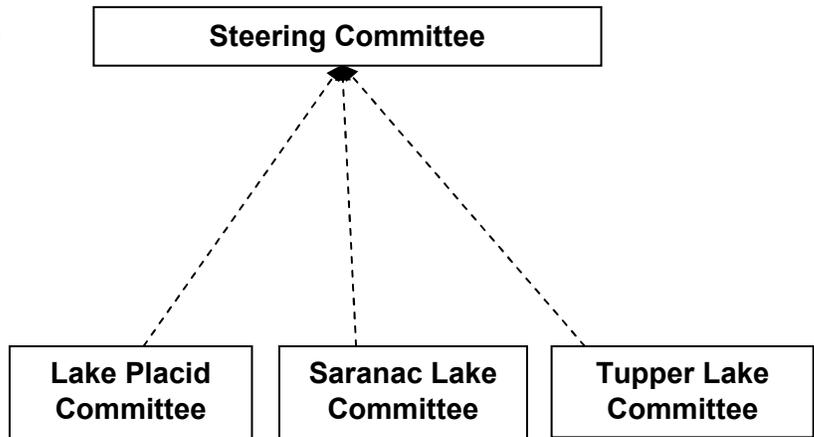
C. Project Organization

Regional Level: Steering Committee

- Compilation of Community Assessments and Action Plans
- Identification of Regional Challenges and Opportunities
- Regional Plan

Community Level

- Community Assessment
- Service Inventory
- Community Action Plan



Project Steering Committee

Responsibilities

- Supervise grant activity at the central (three community service area) level
- Encourage individual community committees, recruit members where possible
- Coordinate assessments
- Compare and manage processes among communities
- Make suggestions
- Provide expertise
- Assure similar formats among communities
- Participate in project evaluation
- Bi-monthly meetings
- Attend educational sessions for community committees
- Review of project materials and technical information

Community Committees

Responsibilities

- Community assessment in their community (Lake Placid, Saranac Lake, Tupper Lake)
- Conduct interviews with community leaders
- Host discussion groups with sample of older adults
- Conduct community surveys
- Compile community services inventory
- Appraise community opportunities and challenges
- Select planning priorities for each community
- Develop community action plan
- Participate in project evaluation
- Monthly meetings
- Attend educational sessions for community committees



Jamie Whidden, discusses the Draft Action Plan for Saranac Lake at the Saranac Lake Community meeting May 17.

IV. Livable Communities for Aging in Place: The Concept

A. Livable Communities for Aging in Place

Far more than architecture, Livable Communities for Aging in Place is a broad advocacy perspective that guides the way communities acknowledge and plan for services and facilities for members of all ages. Over the next 20 years, as the American Baby Boomer Generation ages, communities across the country face growing burdens of care and unmet need for services unless they begin planning for changes that will make their communities enabling environments for lifelong growth.

The movement for livable communities for aging in place is a paradigm shift in public policy that responds to the shifting realities of U.S. demographics. Livable communities should not just accommodate aging adults, but they foster the health and well being of older community members and their integration into the social life of the community. Livable communities should promote what is known as “successful aging,” or the ability to stay healthy, active, and fully participating as long as possible.

Key Terms

Successful Aging. The ability to maintain three key behaviors or characteristics: low risk of disease and disease-related disability; high mental and physical function; and active engagement with life (Rowe and Kahn, 1998).

Aging in Place: The ability to age successfully, to grow up, mature and grow old as a viable member of a community in a residential setting of choice.

Livable Communities (for Aging in Place): A livable community is one that has affordable and appropriate housing supportive community features and service, and adequate mobility options, which together facilitate personal independence and the engagement of residents in civic and social life.

NORC: Naturally occurring retirement community; groups of residences in urban or rural areas that organize themselves to deliver services.

Key Precepts of Aging in Place

- Aging is not just a health care issue, but a question of quality of life and livability
- Age should not be a barrier to safety and enjoyment
- Aging is a transaction between the individual and the community
- Universal design encourages an “ageless” community
- Universal/inclusive zoning and housing design are critical to livable communities

B. Rural Aging in Place

The typical person will spend most of their older years *not* disabled. Only 5% of Americans over 65 live in institutions, and those who are aging now want to remain in their own homes and communities. Today’s problems arise not because more people are aging but because our built environment lags behind this demographic fact. Making homes and communities adaptive across the lifespan is humane and affordable for the individual and society. The adjustment of the built environment and product design will be easier if designers understand the realities, not the myths, of aging:

- Those who are aging now have substantially different expectations, aspirations, attitudes, means and abilities than the current over 65 population;
- Social attitudes about aging and appropriate services are shifting and will continue to do so, reflecting changes in health, education, and economic status of older and aging Americans;
- Key challenges for service delivery and design include the availability of affordable housing and transportation options and reduction of isolation.



Photo courtesy of Bruce Dana Photography

These trends vary by country and region, but the biggest variation within the U.S. is between rural and urban settings. Policymakers and funders have focused on developing urban models although 21 percent of the U.S. population is rural (Ithaca College Gerontology Institute, 2007). Rural counties have experienced a net in-migration of people 60 and over during three of the last five decades, especially in the 1970s – when rural and small town areas grew faster than urban and suburban America – and 1990s. Although rural areas are aging in the context of a society that is aging as a whole, they

typically have a higher proportion of older residents (15% compared to 12% overall) and a more constricted set of options.

Many rural areas receiving older in-migrants from urban areas are enjoying a renaissance as retirement destinations (Brown, D. and N. Glasgow, 2008; USDOA, 2006). Most are in the South and West, another one-quarter in the Midwest, and the remainder scattered in the Northeast. Rural destination communities can maximize their opportunities and reduce the costs of older in-migration by expanding their vision from a “pensions and care” perspective to a thoughtful review of challenges and opportunities as part of planning for aging in place. As more Baby Boomers age and retire to rural destinations, the demographic profile of older rural populations will diversify and change, increasing the complexity of community planning. Major urban/rural differences are:

Rural/Urban Differences for Livable Community Planning

Dimension	Rural Characteristics
Demographic and settlement patterns	<ul style="list-style-type: none"> • Low density population and housing • Higher proportion of older residents • Older population is healthier and more able than urban areas • Lower education levels than in urban areas • Lower incomes than in urban areas • Fewer children • Out-migration of 18 to 34-year-olds • In-migration of older adults
Services	<ul style="list-style-type: none"> • Greater distances to services and amenities • Higher population homogeneity - less social mixing • Fewer affordable housing options • Bulk of affordable housing stock is old and needs modifications • Few contractors available for home modification • Limited public transportation
Social patterns	<ul style="list-style-type: none"> • Higher dependency on smaller group of people • Communities more closed to outside influences • Greater opportunity for outdoor contact • Resistance to change may be higher • Income and education opportunities are lower
Volunteer burn out	<ul style="list-style-type: none"> • Like other resources, volunteers are in shorter supply in rural areas with smaller populations • Fewer incentives from policymakers and service providers to help them keep going • Multigenerational solutions may be an important outcome because of the lack of older volunteers • Community spirit better because older are not separated from younger generations
Program administration	<ul style="list-style-type: none"> • Greater attention to environmental conservation in technical planning and settlement layout • Sustainability may be more important in natural resource areas
Service delivery	<ul style="list-style-type: none"> • Smaller range of types of services available • Cost for service delivery higher • Fewer young people to provide services • More need to share services • Regional planning needed • More need for technical and remote innovations in delivery of health services • Critical gaps in housing and transportation important
Policy development	<ul style="list-style-type: none"> • Historically, less concern by policymakers for rural aging in place issues • Fewer studies of rural areas and needs • Less implementation, less funding for models • Focus on provision of health services

Dimension	Rural Characteristics
	<ul style="list-style-type: none"> • Zoning regulations that prohibit higher density housing are changing • Policy makers need to factor in higher cost/time for delivery of services • Policy needs to encourage regionalized sharing
Funding	<ul style="list-style-type: none"> • Lower budget allocations from State and Federal sources • Major foundations have less interest due to lower population size • Assumption that urban models can be easily adapted

Compiled by Susan Hunter, Ph.D., IDEA Center, School of Architecture and Planning, SUNY/Buffalo

C. The Need in the Tri-Lakes Region

Need for planning livable communities for aging in place is particularly acute in the Adirondack’s Tri-Lakes Communities, where almost 17% of residents are age 65 or older, compared to a 2000 national average of 12.4% and a New York State average of 12.9%. The total population and other demographics of the region, according to the 2000 U.S. Census Bureau, are as follows:

Characteristics	Lake Placid	Saranac Lake	Tupper Lake	Total/Average
Total Population	2,638	5,041	3,935	11,614
Population age 65+	439	754	673	1,866
% of population age 65+	16.6%	15%	17.1%	16.1%
Median Household Income	\$28,239	\$29,754	\$31,654	\$29,882
% of population age 65+ NY State	--	--	--	12.9%
% of population age 65+ National	--	--	--	12.4%
Median Household Income National	--	--	--	\$41,994

The region’s communities are not only older than national and state averages, but have fewer personal resources to cope with aging. The average median household income is \$29,882, about 71% of the national average. Although the population of Essex County is expected to grow by less than 4% by 2015, it is clearly going to be aging, with a 25% increase in those over age 60, and a 32% increase in those over age 85. Similar trends exist for Franklin County. Mercy Care serves the Tri-Lakes communities of Lake Placid, Saranac Lake, and Tupper Lake and surrounding areas

D. Components of Ageless Communities

The Tri-Lakes communities of the Adirondacks are among the first rural communities in New York State and the country to take a long look at community needs and plan for a

Core Components of Ageless Communities
1. Community friendly to people of all ages
2. Health and human services
3. Transportation and mobility
4. Public safety
5. Housing
6. Financial services
7. Workforce development
8. Civic engagement and volunteer opportunities
9. Culture and lifelong learning
10. Public policy and zoning
11. Good place to grow up and grow old

better future for elders. Although national models have been developed in densely populated urban areas using these components to guide assessment and action, there are few widely disseminated rural success stories, and most are works in progress. Aging in place advocates believe that it is important to emphasize positive qualities and inventory community resources, including the valuable qualities and talents of older residents.

One of the tasks of the community committees in the Tri-Lakes was to look at national models and adapt them to local circumstances. The Tri-Lakes Aging in Place community planning committees decided to evaluate their communities using eleven core components, adapted from Partners for Livable Communities (2007) show in the table at right.

E. Developing a Community Assessment

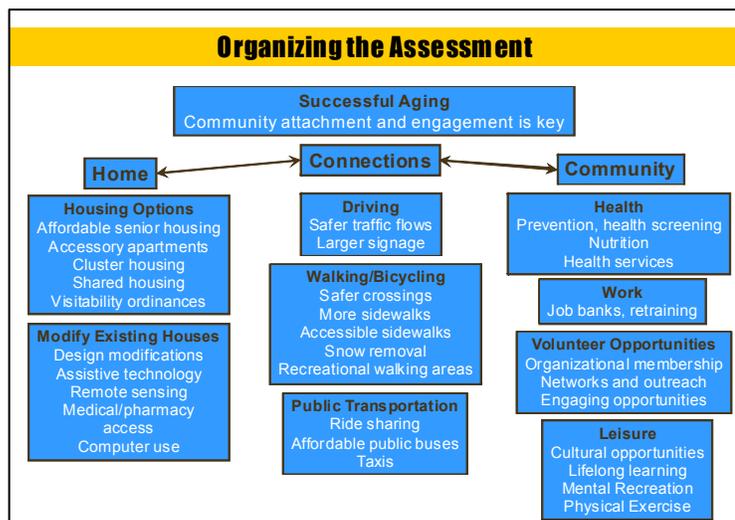
A community assessment can mobilize public opinion, educate volunteers, and help the community see the range of possible solutions. Community committees in the Tri-Lakes region used the following process:

1. Form a community committee or task force;
2. Investigate the compendia of best practices for community assessments and solutions (AARP, 2005; Partners, 2007; Partners with the National Association of Area Agencies on Aging, 2007; Center for Home Care Policy and Research, 2003);
3. Review guidelines for specific components like walkability and pedestrian safety;
4. Conduct interviews with policymakers and community members;
5. Conduct focus groups with various stakeholders;
6. Survey the public. The survey developed for this project by the community committees;
7. Compile the results and determine priority needs, and formulate an action plan;
8. Share the findings and draft plan with the community and revise as needed.

F. Organizing the Community Assessment

Organizing a community assessment for Aging in Place that includes all eleven components of a livable community is a challenge. One way to organize an assessment is to place the factors within a model that shows their relative importance in successful aging and sustained quality of life. In this way, the community assessment can focus on factors that have the largest impact and are of most importance to successful aging.

The most important predictor of successful aging is community attachment (AARP 2005). Older adults who report that they are “strongly attached” to their communities are more likely to say they are



satisfied with life and have a strong sense of self-control and quality of life. Attachment is stronger for home owners than renters and increases with time. It correlates with staying healthy and active, with working and volunteering, organizational memberships, civic participation, attendance at community events, and, for some, religious involvement. The satisfaction of successful aging is also determined by how well home and community are linked through mobility options, including driving, accessible transportation, and walking and bicycling facilitated by provision of safe streets and sidewalks.

The study also found that levels of community attachment and engagement are strongly affected by home and community features. Homes that are accessible in their original design or through modification improve satisfaction, and community stability can be enhanced through the availability of affordable housing options. Residents are not forced to move out of their homes or out of the community. It is up to the community to ensure options for working, volunteering, and participating, to enhance safety and inclusiveness, and encourage healthy living and activity through supportive services. In addition, research has found that:

- At the heart of livable communities is inclusiveness and adaptable or universal design. Creating livable communities for aging in place promotes adaptation to the changing needs of a community's members.
- Successful planning for aging in place is most successful when it is framed as a positive, appreciative inquiry driven by, involving, and engaging older adults. Over one-third of people over 65 continue working, and the same proportion contributes to their communities as volunteers. The process in the Tri-Lakes involved many service providers, volunteer and religious organizations, and aging residents.
- In the Tri-Lakes, 31% of people responding to Aging in Place Survey are still working full time or part time and 56.5% are volunteering.

V. Community Research and Action Plan Development

A. Selection of Initial Priorities

At their first meeting, each Tri-Lakes community committee reviewed the questions guiding assessment of the eleven components following a detailed set of questions (Appendix 1). Each community committee prioritized these components for their community, and discussed potential solutions. The findings are summarized in the tables in each community's section in this plan.

Since most of the committee members were experts in areas of adult and senior services or elders themselves, the initial prioritization reflected a good deal of experience. The process of setting priorities helped the committees share information and focus on the most important issues in their communities. The committees then set out to collect additional data to determine if their preliminary assessments were correct and reflected priorities in the wider community.

B. Development of Assessment Information

Each community committee completed the following tasks as part of their assessment process:

- Interviews with the town leaders and residents;
- Focus groups with aging and elder residents;

- A mail and on-line survey of area residents;
- An inventory of residential and community services;
- Review of the data

Findings for each town are reported in detail in the Appendices (Lake Placid – Appendix 3; Saranac Lake – Appendix 4; Tupper Lake – Appendix 5).

Following collection and analysis of the data, each community committee reprioritized their initial components and specified initial action plans, reported in sections 10 to 14 below. The steering committee also reviewed responses to generate a regional action plan which specifies areas on which the three towns could collaborate (section 8 of this report).

Given that the survey results represented the views of a representative sample of residents in each community, they were weighted most heavily to determine the highest priority issues to be addressed in the action plans. When developing the action steps, all three research tools were used including the survey results, key interviews, and focus group results in each community.

C. Community Partner Activity Report

September 15, 2009	Community Aging in Place Orientation Meeting/St. Luke's Parish Hall Saranac Lake
September 30, 2009	Saranac Lake Community Committee Meeting/ Saranac Lake Adult Center
October 6, 2009	Lake Placid Community Committee Meeting/ AMC-Uihlein
October 19, 2009	Tupper Lake Village Board Meeting-Aging in Place Presentation
October 27, 2009	Lake Placid Community Committee Mtg./ AMC-Uihlein
October 28, 2009	Saranac Lake Community Committee Mtg./ SL Adult Center
October 28, 2009	Presentation to Tupper Lake Rotary Club
November 10, 2009	Tri Lakes Aging in Place Community Meeting/ St. Luke's Parish Hall S.L.
November 23, 2009	Lake Placid Community Committee Mtg.
December 10, 2009	S.L. Community Committee Mtg.
December 11, 2009	Hudson Headwaters Health Network

January 5, 2010	L.P. Community Committee Mtg.
January 19, 2010	Aging in Place Presentation to L.P. Village Board
January 27, 2010	Interview with Tupper Lake Mayor and Town Supervisor
February 4, 2010	Presentation to Lake Placid Rotary
February 9, 2010	Meeting with Darlene LaFave at Tupper Lake Adult Center
February 23, 2010	LP Aging in Place Community Meeting
March 2, 2010	TL Aging in Place Community Meeting
March 4, 2010	SL Aging in Place Community Meeting
April 28, 2010	SL Aging in Place Community Meeting
April 29, 2010	LP Aging in Place Community Meeting
May 3, 2010	Meeting with SL Mayor and Village Manager
May 17, 2010	SL Community Meeting to review draft action plan
May 18, 2010	LP Community meeting to review draft action plan
May 24, 2010	TL Community meeting to review draft action plan
June 22, 2010	John Mills, Ph.D., President Paul Smith's College-SL Action Plan

The survey results, reported in the following section

VI. Key Findings of the Tri-Lakes Aging in Place Survey

A. Overview of Survey Results

A survey of area residents concerning their needs and priorities for making their communities more livable for aging in place was completed as part of the planning process in February and March, 2010. The survey was distributed by mail, hand-delivered to senior housing facilities, adult centers, Office for the Aging nutrition sites, and churches. Combined results for the three Tri-Lakes communities -- Lake Placid, Saranac Lake, and Tupper Lake – are reported below. Survey results by town are reported below in the sections related to the town plans.

B. Profile of Respondents

Two hundred survey responses were received from Tri-Lakes residents age 55 and older. The following tables give a quick profile of respondents:

Age of Respondents

Age Group	Number of Respondents	Percent of Total
55 – 64	41	20%
65 – 74	65	32%
75 – 84	57	28%
85+	40	20%
Total	203	100%

Community of Residence

Community	Number of Respondents	Percent of Total
Lake Placid	63	31%
Saranac Lake	71	35%
Tupper Lake	45	22%
Neighboring communities	24	12%
Total	203	100%

Length of Residence in Tri-Lakes Region

Years of Residence	Number of Respondents	Percent of Total
40 years or more	90	44%
20-39 years	48	23%
10-19 years	38	19%
5 – 9 years	13	7%
1 – 4 years	14	7%
Total	203	100%

Year Round/Seasonal Residence in Tri-Lakes Region

Tenure	Number of Respondents	Percent of Total
Year round	195	96%
Seasonal	8	4%
Total	203	100%

Living Arrangement

Living Situation	Number of Respondents	Percent of Total
Live alone	101	51%
Live with spouse or partner	81	40%
Live with son or daughter	10	4%
Live with grandchild	1	1%
Live with other relative or friend	10	4%
Total	203	100%

C. Residents Feel They Live in Elder Friendly Communities

The vast majority of older residents of the Tri-Lakes region has lived in their communities for more than 10 years and finds them to be good places to live. Some 90 % of the respondents stated that they found their community to be a friendly and supportive place for older people, and 88% of the respondents said they have a strong sense of belonging to the community. As noted in section 4 of this report, those feelings are critical to successful aging and to remaining healthy and independent in later years.

Some respondents, still active, extolled the “mountains, rivers, uncomplicated community, friendliness, gorgeous scenery, and attitude in general” and outdoor activities as important reasons for remaining in the region. Other respondents cited as reasons the

- “good people”
- “good medical help and hospital
- ” friendship of the community”
- “slower pace of living”
- “mutual support of one another and wide variety of mental and physically stimulating activities available for everyone”
- “People tend to look out for one another. In a pinch, you can almost always find someone to help - if they know they are needed”

One respondent, however, noted that despite the “small town, close community, village people are warm yet I have found elders often not included in greater scale of community.” Others mentioned that winter travel difficulties were a major obstacle to aging in place, and cited difficulties with adequate housing choices and shopping alternatives. All of these and other issues are explored in more depth below according to their priority to survey respondents.

D. Priorities for Aging in Place

Respondents ranked the following components as “very important” (the highest ranking) to them to age in place successfully:

- | | |
|---------------------------------|-----|
| 1. Adequate Housing | 81% |
| 2. Health and Human Services | 80% |
| 3. Friendship and Companionship | 74% |
| 4. Transportation | 69% |
| 5. Having Family Nearby | 60% |
| 6. Involvement in the Community | 47% |

While having family nearby is an important factor to successful aging for Tri-Lakes residents, it is not an issue that can be addressed in a community plan. However, the remaining five components are examined more fully below and were reviewed by the community committees before they formulated the final priorities of their action plans.

1. Housing

- 68% of respondents live in a single family house; 3% live in a multi-family house, and 23% an apartment, and 6% in other living situations. 20% of respondents rent their home. These numbers track with national statistics for the aging population.
- 94% of stated they would definitely or probably like to live in their present home for as long as possible.
- 36% said their home will need modification or repairs in order for them to continue to live there comfortably as they grow older.
- 50% of respondents stated they are concerned or somewhat concerned that they may not be able to afford to stay in their own homes as they grow older.
- 60% said they know what they would want to do if they are unable to continue living in their own home.

2. Health and Human Services

- 51% of respondents said that if they needed some information about health or human services for themselves, friends or family members, such as home health aides, medical equipment, long-term care, health insurance, home modification, meals on wheels, nursing home, or assisting living, they know how to get the information. Another 35% said they know how to get information for some of these services but not all.
- When asked if they preferred to fill out only one application and have the information shared if needed to obtain Social Services, Public Health Nursing Services, Offices for the Aging, and other services, 68% answered yes; 32% answered they would prefer to fill out separate applications for each service which may not be shared.

3. Friendship and Companionship

- 28% of respondents stated they strongly agree or agree with the statement, “In my present living situation I sometimes feel rather lonely,” but almost three-quarters (71%) disagreed.
- 41% of respondents said they would like more opportunities to socialize and do things with other elders, and 21% that they would like opportunities to do things with children and younger people and to assist them as may be needed with other particular needs. Another 27% said they might like such an opportunity, but weren’t sure.
- 30% of respondents indicated they would like or might like a Mercy Care Friendship Volunteer to visit them to provide friendship and companionship and do things with them in the community
- 56% of respondents stated they use a computer and the internet to communicate with family, friends or for news and entertainment, and 50% of respondents said they would or might be interested in learning together with other older persons how to better use the computer.

4. Civic Engagement/Involvement in the Community

- Almost a third (32%) still works full or part time, and more than half (56%) volunteer full or part time while another 4% would like to.
- 46% of respondents stated they have knowledge or abilities which they would like to use more to benefit their community. Another 27% were unsure.

5. Transportation

Community Walkability

- 70% frequently or sometimes use sidewalks in town to get to where they need to go.
- 30% of respondents said that the town sidewalks were generally satisfactory; but another 55% said that improvements were needed in maintenance.

Transportation

- 80% of respondents said they drive a car themselves or someone in their household drives them when they need to get somewhere in the community. Perhaps because they are still using automobiles, 80% of respondents stated that transportation within the community or the Tri-Lakes is not a serious problem. However, if 20% of those over age 65 in the Tri-Lakes do not drive, 373 individuals have significant transportation needs.
- 10% said that they or their driver are experiencing difficulty finding convenient parking; another 38% said they sometimes cannot find convenient parking.
- 8% said a large proportion of their transportation needs are being met by the senior bus; 1% by the trolley, 1% by the county bus; and 2% by taxi; 7% said that some of their transportation needs are being met by the trolley; 9% by the senior bus, 4% by the county bus, and 10% by taxi.
- Of those that use the trolley, 2% said they are not satisfied with the service; of those that use the senior bus, 1% is not satisfied with the service; of those that use the county bus, 1% is not satisfied, and 2% of those using a taxi are not satisfied.
- When asked for what they might need some transportation assistance, 51% answered for medical appointments; 24% for shopping, 11% for attending church, and 12% for attending events.
- When asked if available, would they now or in the future use “Dial-a-Ride,” door to door, service, 36% answered yes and another 48% answered they don’t know. 16% answered no.

VII. Tri-Lakes Commonalities Action Plan

The Action Plan Items listed below are the priorities identified in all three Tri-Lakes Communities and should be addressed collaboratively and cooperatively.

Regional Action Plan

Priorities Identified	Action Plan
Housing Alternatives	
Assisted Living Facility unavailable in the Tri-Lakes	<ul style="list-style-type: none"> ▪ Engage with Adirondack Medical Center, Offices for the Aging, and NYS Health Department and other relevant agencies to establish an

Priorities Identified	Action Plan
	assisted living facility in the Tri-Lakes
36% of elders' homes will need modification or repairs in order for them to continue to live there comfortably as they grow older	<ul style="list-style-type: none"> ▪ Advocate for means-tested home modification funding stream; consider partnering with NYS Office for the Aging, Adirondack Community Housing Trust, Housing Assistance Program of Essex County, Tri-Lakes Housing Study principals, and local banks to establish a home modification revolving, low-interest or no-interest loan fund available to all older adults ▪ Partner with experts to develop and provide training for builders and contractors in universal design principles ▪ Partner with the NYS Office for the Aging and other appropriate agencies and other partners to develop a demonstration project in the Tri-Lakes to build or remodel a home using universal design principles (or develop a design to scale model for education purposes)
Health and Human Services	
Adult Day Care	<ul style="list-style-type: none"> ▪ Engage with Adirondack Medical Center, Offices for the Aging, and other relevant agencies to establish an affordable, intergenerational Day Care Center in the Tri-Lakes.
Friendship and Companionship	
Need for more opportunities for older adults to socialize and do things with other elders	<ul style="list-style-type: none"> ▪ Engage Adult Centers to develop new socialization and engagement opportunities, programs and activities to meet the evolving and changing needs of older adults; survey adults age 55+ for interests.
Health and Human Services	<ul style="list-style-type: none"> ▪ Work with NYS Office for the Aging and other agencies and partners to develop a means-tested non-Medicaid eligible pilot compensated family or community based caregiver program to help elders avoid or delay nursing home placement
Transportation	
Inadequate Medical Transportation	<ul style="list-style-type: none"> ▪ Engage the three Tri-Lakes communities, Adirondack Medical Center, volunteer organizations, and Offices for the Aging to develop and offer to all elders a coordinated medical transportation system to include out-of-area medical transportation for medical services unavailable locally
Inadequate transportation services for those elders who no longer drive a car	<ul style="list-style-type: none"> ▪ Establish a door to door transportation service offered to all elders in the Tri-Lakes
Need for older persons to learn together how to better use the computer	<ul style="list-style-type: none"> ▪ Engage with North Country Community College and/or Paul Smith's College to offer affordable or subsidized computer training classes to older adults

VIII. Lake Placid Survey Results

Age of Respondents

Age Group	Number of Respondents	Percent of Total
55-64	12	19%
65-74	26	41%
75-84	18	29%
85+	7	11%

Total	63	100%
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Length of Residence in Tri-Lakes Region

Years of Residence	Number of Respondents	Percent of Total
40 years or more	24	38%
20-39 years	15	24%
10-19 years	15	24%
5-9 years	5	8%
1-4 years	4	6%
Total	63	100%

Year Round/Seasonal Residence in Tri-Lakes Region

Tenure	Number of Respondents	Percent of Total
Year round	55	90%
Seasonal	6	10%
Total	61	100%

Living Arrangements

Living Situation	Number of Respondents	Percent of Total
Live alone	22	34%
Live with spouse or partner	35	55%
Live with son or daughter	1	1%
Live with grandchild	1	1%
Live with other relative or friend	6	9%
total	63	100%

Elder Friendly Community:

88% of respondents said they strongly agree or agree that Lake Placid is a friendly and supportive place for older people.

Intergenerational Interaction:

25 % of respondents said they would like more opportunities to do things with children and young people.

Socialization:

35% of respondents said they would like more opportunities to socialize and do things with other elders.

Community Engagement:

24% of respondents said they have knowledge or abilities which they would like to use more to benefit the community; another 56% said they might or probably have knowledge which they would like to use more to benefit the community.

26% strongly agree and another 65% agree that they have a strong sense of belonging to the community.

Isolation and Loneliness:

25% of respondents answered they sometimes feel rather lonely living in their present living situation.

27% responded they would or might like a Mercy Care Friendship Volunteer to provide them or someone they know with friendship and companionship, to do things together in the community, and to assist them as may be needed with other particular needs.

Technology:

66% of respondents use a computer and the internet most every day to communicate with family, friends or for news and entertainment.

43% of respondents said they would or might be interested in learning together with other older persons how to better use the computer.

Health and Human Services:

51% of respondents said they would know how to get health and human services information for home health aides, medical equipment, long-term care, health insurance, home modification, meals on wheels, nursing home, assisted living, etc. Another 34% answered yes for some; no for others. 15% responded they would generally not know how to get the information.

73% of respondents said they would prefer to fill out only one application and have the information shared to obtain health and human services; 27% said they would prefer to fill out separate applications, which may not be shared, for each service.

Housing:

68% of respondents said they would like to live in their present home as long as possible as they grow older. Another 24% said they probably would like to live in their present home.

39% of respondents said their home will require modification or repairs for them to continue to live there comfortably as they grow older.

35% of respondents live alone; 55% live with a spouse or partner.

7% are very concerned that they may not be able to afford to stay in their own home as they grow older. Another 41% are a little concerned. 52% are not concerned.

56% of respondents said they would know what they want to do if they are no longer able to manage in their present housing. 44% don't know what they would want to do.

Walkability:

46% of respondents frequently use sidewalks in town to get to where they need to go. Another 37% sometimes use them.

47% of respondents find the sidewalks in town that they use to be generally satisfactory. 41% answered some yes and some no. 12% said they were not satisfactory.

Transportation:

86% of respondents almost always drive a car themselves or have someone in their household drive them when they need to get somewhere in the community.

13% of respondents are experiencing difficulty finding convenient parking; another 43% have some difficulty; and 43% do not usually experience difficulty finding convenient parking. Written comments to this question are as follows:

- For Main Street, Lake Placid
- New meters are confusing—cost more than necessary—I go to Saranac Lake for many things
- Not very often an issue—only during big events
- The village/town are concentrating in bringing more tourists into the village. There is not sufficient parking now—it will get worse if something isn't done soon.
- Don't know how to use the new meters
- In Lake Placid in summer especially, I never go into the village
- Downtown parking is inconvenient or impossible
- I usually park at one end or the other (just down from Victor Herbert Rd., or below the Community Church, and walk to wherever I need to go. Parking in the downtown area is no fun. Walking from either end is.
- On busy days on Main Street

4% of respondents are using the trolley for a large proportion of their transportation needs; 6% are using the senior bus, and 4% use a taxi for a large proportion of their transportation needs.

22% of respondents said that transportation within the community or the Tri-Lakes is sometimes a problem for them; 4% said it is a major problem, and 74% said it is not a serious problem. Written comments are as follows:

- Weather
- Traffic is slow due to too many cars trying to get through the business district. Our church parking is often taken over by tourists.
- Waiting for the bus in winter is too uncomfortable to make it usable
- Not stable schedule times
- If I couldn't drive—this would be a huge problem. Mercy Care is already addressing.
- When I want to travel out of town to attend a play in Westport or go to the Adirondack Museum or Wild Center.
- For those over the age of 85, 20% of respondents indicated transportation is a major problem and 40% said it is sometimes a problem.

50% of respondents said they might need some transportation assistance for medical appointments; another 43% said they might need some transportation assistance for shopping, and 7% said they might need transportation assistance to attend events.

32% said if available, they would now or in the future use “Dial-a-Ride,” door to door, service. 50% said they don’t know if they would use it, and 18% said they would not use it.

Prioritization of Needs:

77% of respondents said that friendship and companionship is a very important need to satisfy to make it possible for them to age in place in the Tri-lakes; 77% said that health and human services is a very important need to satisfy.

74% of respondents said that adequate housing is a very important need to satisfy to age in place.

66% of respondents said that having family nearby is a very important need to satisfy to age in place.

59% of respondents said that transportation is a very important need to satisfy to age in place.

51% of respondents said that involvement in the community is a very important need to satisfy.

Obstacles to Aging in Place in Lake Placid:

- a. Limited public transportation when driving no longer possible; existing transportation services would be of little help for those who live on hills or distance from bus route.
- b. Transportation—I live out of town.
- c. Limited travel options. I do not drive. Must take train to airport in Albany or NYC. Takes two days to reach destination.
- d. Long winters making snow removal and trash removal problematic; driveway plow outs by service people; village filling in driveway with snow after we have just paid to have it plowed.
- e. Need more activities for active, educated elders.
- f. Inadequate road shoulders on main thoroughfares to ride and walk safely (Old Military Road).
- g. Unclear options for alternative housing
- h. Lack of financial security for a large part of the population; cost of living; high taxes (not fairly apportioned).
- i. Cost of living, high taxes, affordable health insurance, coverage for medications limited; dental & vision care limited or non-existent depending on plan one can afford.
- j. Icy sidewalks; inadequate snow removal.
- k. Distances to medical care
- l. Cultural and artistic events are unaffordable
- m. Shopping
- n. Lack of support

Qualities that tend to make Lake Placid a good place to age in place:

- a. Neighborly people
- b. Office for the Aging Services
- c. Mercy Care for the Adirondacks and others
- d. Good restaurants, CMDA, cross-country skiing; SPCA, Pendragon
- e. Lively community with activities including the arts
- f. Easy access to healthcare, dental, shopping, exercise facilities, entertainment—everything within a 5-10 mile radius

- g. Greenwood apartments, senior citizens groups, bus dinners at town hall
- h. Roads are well taken care of in winter
- i. Geographically beautiful, rural
- j. Many kind friends
- k. Mountain weather—summer and fall a blessing
- l. Small friendly town with good supportive services (roads, utilities)
- m. Church is active in supplying activities for everyone, all ages, genders
- n. Small community, more persons of all ages.
- o. A happy town and a beautiful place to live
- p. Little or no crime—safe
- q. Nearby healthcare
- r. Olympics history and efforts to bring in visitors
- s. Opportunities for involvement
- t. Healthy place to live and a beautiful place to die
- u. Air, woods, the small town atmosphere, the beauty
- v. Availability of needed facilities such as doctor, shopping, church, hospital
- w. Weather affects elders’ mobility—both pedestrian and auto

IX. Lake Placid Aging in Place Action Plan

Findings from the Community Survey, interviews with key leaders, focus groups, and feedback from community presentations of the Draft Aging in Place Action Plan resulted in the Lake Placid Aging in Place Action Plan.

Lake Placid Community Committee Volunteers

Patty Bashaw, Director Essex County Office for the Aging	Betty Eldridge
Patricia Beneshan, Parish Nurse	Nancy Gordon
Michele Byno, Chief Long Term Care Officer, AMC Uihlein	Wayne Johnston
Adele Connors	Emily Kilburn, Adirondack Housing Trust
Greg Dennin	Jason Leon, Village Trustee
Nancy Dougal, Essex County Department of Transportation	David Messner, Lake Placid Middle/High School Principal
Penny Dieffenbach	Frank Lescinsky
Rev. Mark Demers, Adirondack Community Church	Sr. M. Camillus O’Keefe
	Phil Thayer

Priorities Identified in Survey in Order of Priority

Lake Placid	Saranac Lake	Tupper Lake
Friendship & Companionship	Adequate Housing	Health & Human Services
Health & Human Services	Health & Human Services	Friendship & Companionship
Adequate Housing	Transportation	Adequate Housing
Transportation	Friendship & Companionship	Transportation

Lake Placid Aging in Place Action Plan

Priority Identified	Action Plan
Housing	
	<ul style="list-style-type: none"> ▪ Engage housing organizations and developers to develop accommodating housing located as close as possible to services.
	<ul style="list-style-type: none"> ▪ Engage zoning boards and building code officers to promote universal design principals for new and home modification projects.
	<ul style="list-style-type: none"> ▪ Promote Tri-Lakes Center for Independent Living free home assessment services to evaluate home modification or renovation needs.
	<ul style="list-style-type: none"> ▪ Develop public education campaign to promote universal design
	<ul style="list-style-type: none"> ▪ Engage with contractors to assess their interest and inventory their services to respond to elders with home modification needs.
	<ul style="list-style-type: none"> ▪ Engage with appropriate partners to establish an experienced volunteer central “clearing house” for elders to call when they have home modification or home repair needs.
Health & Human Service	
	<ul style="list-style-type: none"> ▪ Develop a model to engage Mercy Care Parish Nurses and Offices for the Aging to help guide elders in the development of their own personal independence plans
	<ul style="list-style-type: none"> ▪ Engage Mercy Care Volunteer Parish nurses, Public Health Nursing offices, and Offices for the Aging to offer information and assistance for elders to develop individualized advance directives
Friendship & Companionship	
	<ul style="list-style-type: none"> ▪ Strengthen and expand Mercy Care Friendship Volunteer Program
	<ul style="list-style-type: none"> ▪ Engage with appropriate partners to create a coordinated Lake Placid clearing house to address elders’ needs (snow shoveling, lawn mowing, etc.); public education campaign to promote the clearing house
	<ul style="list-style-type: none"> ▪ Work with service organizations and local government to undertake a walkability-mobility accessibility audit
	<ul style="list-style-type: none"> ▪ Engage appropriate partners to provide benches or other suitable seating in shopping areas

	<ul style="list-style-type: none"> Engage appropriate partners to provide public restrooms
	<ul style="list-style-type: none"> Engage local government, schools, cultural, arts, and service organization to each develop a plan to enhance social and civic participation among elders in their work and programs
Transportation	
	<ul style="list-style-type: none"> Engage local government and county agencies to undertake a needs and assessment study to maximize LP transportation efficiencies and services; analyze public transportation access from residence and service to see if public transit specifically benefits elders, among others
	<ul style="list-style-type: none"> Identify obstacles and develop remedies to deploying transportation assistance.

X. Saranac Lake Survey Findings

Age of Respondents

Age Group	Number of Respondents	Percent of Total
55-64	15	21%
65-74	12	17%
75-84	21	30%
85+	23	32%
Total	71	100%

Length of Residence in Tri-Lakes Region

Years of Residence	Number of Respondents	Percent of Total
40 years or more	30	42%
20-39 years	19	27%
10-19 years	14	20%
5-9 years	2	3%
1-4 years	6	8%
Total	71	100%

Year Round/Seasonal Residence in Tri-Lakes Region

Tenure	Number of Respondents	Percent of Total
Year round	70	99%
Seasonal	1	1%
Total	71	100%

Living Arrangements

Living Situation	Number of Respondents	Percent of Total
Live alone	45	63%
Live with spouse or partner	22	30%
Live with son or daughter	1	1%
Live with grandchild	0	0%
Live with other relative or friend	5	6%
Total	71	100%

Elder Friendly Community:

87% of respondents said they strongly agree or agree that Saranac Lake is a friendly and supportive place for older people.

Intergenerational Interaction:

19 % of respondents said they would like more opportunities to do things with children and young people.

Socialization:

37% of respondents said they would like more opportunities to socialize and do things with other elders.

Community Engagement:

27% of respondents said they have knowledge or abilities which they would like to use more to benefit the community; another 41% said they might or probably have knowledge which they would like to use more to benefit the community.

19% strongly agree and another 65% agree that they have a strong sense of belonging to the community.

Isolation and Loneliness:

37% of respondents answered they sometimes feel rather lonely living in their present living situation.

31% responded they would or might like a friendship volunteer to provide them or someone they know with friendship and companionship, to do things together in the community, and to assist them as may be needed with other particular needs.

Technology:

49% of respondents use a computer and the internet most every day to communicate with family, friends or for news and entertainment.

55% of respondents said they would or might be interested in learning together with other older persons how to better use the computer.

Health and Human Services:

48% of respondents said they would know how to get health and human services information for home health aides, medical equipment, long-term care, health insurance, home modification, meals on wheels, nursing home, assisted living, etc. Another 45% answered yes for some; no for others. 7% responded they would generally not know how to get the information.

69% of respondents said they would prefer to fill out only one application and have the information shared to obtain health and human services; 31% said they would prefer to fill out separate applications, which may not be shared, for each service.

Housing:

73% of respondents said they would like to live in their present home as long as possible as they grow older. Another 21% said they probably would like to live in their present home.

38% of respondents said their home will require modification or repairs for them to continue to live there comfortably as they grow older.

63% of respondents live alone; 31% live with a spouse or partner.

13% are very concerned that they may not be able to afford to stay in their own home as they grow older. Another 46% are a little concerned. 41% are not concerned.

56% of respondents said they would know what they want to do if they are no longer able to manage in their present housing. 44% don't know what they would want to do.

Walkability:

32% of respondents frequently use sidewalks in town to get to where they need to go. Another 37% sometimes use them.

22% of respondents find the sidewalks in town that they use to be generally satisfactory. 62% answered some yes and some no. 17% said they were not satisfactory.

Transportation:

67% of respondents almost always drive a car themselves or have someone in their household drive them when they need to get somewhere in the community.

14 of respondents are experiencing difficulty finding convenient parking; another 45% have some difficulty; and 42% do not usually experience difficulty finding convenient parking.

16% of respondents are using the senior bus to meet a large proportion of their transportation needs; 2% are using the county bus.

15% of respondents said that transportation within the community or the Tri-Lakes is sometimes a problem for them; 5% said it is a major problem, and 80% said it is not a serious problem. For those over the age of 85, 5% said it is a major problem and 15% said it is sometimes a problem.

49% of respondents said they might need some transportation assistance for medical appointments; another 14% said they might need some transportation assistance for shopping; 17% said to attend church, and 20% said they might need transportation assistance to attend events.

36% said if available, they would now or in the future use “Dial-a-Ride,” door to door, service. 51% said they don’t know if they would use it, and 13% said they would not use it.

Prioritization of Needs:

84% of respondents said that adequate housing is a very important need to satisfy to make it possible for them to age in place in the Tri-Lakes.

74% of respondents said that health and human services is a very important need to satisfy to make it possible for them to age in place in the Tri-Lakes.

70% of respondents said that transportation is a very important need to satisfy to make it possible for them to age in place in the Tri-Lakes.

69% of respondents said that friendship and companionship is a very important need to satisfy to make it possible for them to age in place in the Tri-Lakes.

54% of respondents said that having family nearby is a very important need to satisfy to make it possible for them to age in place in the Tri-lakes.

Obstacles to Aging in Place in Saranac Lake:

- a. Difficulty in finding handyman to make house repairs
- b. Transportation, snow shoveling, yard work, home repairs—finding people to hire. Lack a list of those who want customers.
- c. Cost of medical care, home heating, uncertainty of economy, few job opportunities
- d. No shopping, no theatre, not many restaurants, need more grocery stores
- e. Lack of shopping opportunities—no place to shop at reasonable prices for groceries and other home necessities; no mall shopping; Lack of an adequate array of consumer goods—food selection, socks, underwear, mattress covers.
- f. High cost of living—rentals, real estate, food, fuel, long costly winters—boots, coats, sweaters
- g. Lack of help with physical chores, shoveling, mowing
- h. Lack of financial advice
- i. Cost of home heating, property tax
- j. No assisted living
- k. The need to drive to get around
- l. Intellectual, social and professional isolation
- m. Lack of affordable housing
- n. Expensive house maintenance and utilities

- o. Lack of public transportation—getting to shopping and medical appointments
- p. Lack of part-time jobs for seniors to supplement fixed incomes
- q. Lack of well-equipped medical services—limited options compared to urban areas; somewhat limited medical facilities
- r. No transportation to Plattsburgh and Burlington for specialist medical care; need either free or reasonably priced transport to medical care in Burlington, Albany, and Plattsburgh, as may be needed for specialty care not available locally.
- s. Sidewalks are snow covered; snow in streets making it difficult to get into stores safely.
- t. Lack of affordable independent living units such as town houses for the income level that would like to downsize yet continue to live independently.
- u. Lack of housing development like Partridge Knoll in Canton—lovely 1-2 bedroom one-story apartments—real independent living, but with many services. Middle income facility rental—you do not have to buy in or surrender all your assets.
- v. With no car and little public transportation, you're grounded
- w. Lack of reasonably priced, attractive apartments
- x. Ever increasing property taxes
- y. Weather as it relates to safe walking, and/or driving; exterior maintenance (shoveling and plowing)

Qualities that tend to make Saranac Lake a good place to age in place:

- a. Opportunities to volunteer; needed services are accessible
- b. Peaceful, scenically beautiful, friendly, childhood memories, family
- c. Small, rather safe
- d. The Adult Center and Community Lunch Box
- e. Good church family and great libraries
- f. Friendly, caring, close-knit community with less than average crime.
- g. Outdoor activities, good restaurants, and other indoor activities
- h. Many youth programs for children
- i. Small—medical services—you don't need to rush. No hurry.
- j. Availability of health and human services
- k. Stores close by; obliging stores
- l. Good healthcare, a fine hospital; good medical facilities; close proximity of doctors, dentist, the hospital, and other services. Transportation availability is also real good here.
- m. Excellent library and cultural events
- n. Tries to address senior needs; people willing to help
- o. Good church community
- p. High Rise availability, county services available, and public transportation availability
- q. Respect for the aged
- r. Franklin County programs for seniors, home health care availability, senior housing availability
- s. Beautiful environment with opportunities to socialize and enjoy cultural and educational events.
- t. Saranac Village at Will Rogers; Presence of Will Rogers very important; places like Will Rogers; Saranac Village at Will Rogers provides an excellent place to age in place
- u. Small, friendly, accommodating retailers

XI. Saranac Lake Aging in Place Action Plan

Finding from the Community Survey, interviews with key leaders, focus groups, and feedback from community presentations of the Draft Aging in Place Action Plan resulted in the Saranac lake Aging in Place Action Plan.

Saranac Lake Community Committee Volunteers

David Aldrich, Director Harrietstown Housing Authority	Mary Ellen Keith
James Brophy	Elizabeth Kochar, Adult Center Director
Marilyn Clement	Lauren LeFebvre, Director, Tri-Lakes Center for Independent Living
Dolores Commo	Gail Metz
Nathan Cox, Accessibility Consultant, Tri-Lakes Center for Independent Living	Ann Merkel
Jeremy Evans, Community Development Director	Barbara Rottier
Vincine Fallica, Association of Franklin County Senior Citizens	Irene Snyder, Harrietstown Housing Authority
Kay Foster, DeChantel Apts.	Nonie Webb
Barbara Hofrichter, High Peaks Hospice & Palliative Care	Jamie Whidden, Director Saranac Village at Will Rogers
Alyse Holstein	

Priorities Identified in Survey in Order of Priority

Lake Placid	Saranac Lake	Tupper Lake
Friendship & Companionship	Adequate Housing	Health & Human Services
Health & Human Services	Health & Human Services	Friendship & Companionship
Adequate Housing	Transportation	Adequate Housing
Transportation	Friendship & Companionship	Transportation

Saranac Lake Aging in Place Action Plan

Priority Identified	Action Plan
Housing	
	<ul style="list-style-type: none"> Engage Housing agencies and local government to develop mixed use housing— 50% of units designated for those who need home health aides.
	<ul style="list-style-type: none"> Work with Housing agencies and planners to develop and promote shared housing options
	<ul style="list-style-type: none"> Develop a third party, impartial referral service well known to elders to help people meet their needs from the many existing services (lawn

	mowing, shoveling, minor repairs, etc.)
	<ul style="list-style-type: none"> Engage zoning board and building code officers to promote universal design principles for new and home modification projects.
	<ul style="list-style-type: none"> Promote Tri-Lakes Center for Independent Living free home assessment services to evaluate home modification or renovation needs.
	<ul style="list-style-type: none"> Working with Hospice, health care providers, housing agencies, State Agencies including Department of Health, local government, explore feasibility of developing a rural model Hospice House.
Health & Human Services	
	<ul style="list-style-type: none"> Work with Tri-Lakes Center for Independent Living to educate the community about the NYS Nursing Home Medicaid Waiver Program
	<ul style="list-style-type: none"> Work with County Offices for the Aging to engage all agencies serving elders to streamline and maximize efficiencies in the referral process.
	<ul style="list-style-type: none"> Engage with Literacy Volunteers to provide assistance to visually impaired
	<ul style="list-style-type: none"> Raise awareness about opportunities for home Dr. visits
Transportation	
	<ul style="list-style-type: none"> Engage with local government, county, and Offices for the Aging to analyze efficiencies of public transit in Saranac Lake to benefit elders and others
	<ul style="list-style-type: none"> Work with partners to develop alternatives where needed
	<ul style="list-style-type: none"> Engage partners to develop an outreach campaign to elders educating them about Saranac Lake transportation options if they no longer drive
Friendship & Companionship	
	<ul style="list-style-type: none"> Expand Mercy Care’s Friendship Volunteer Program
	<ul style="list-style-type: none"> Work with partners to establish a “Saranac Lake Clearing House Help for Elders,” a place where elders can call locally to connect to needed services
	<ul style="list-style-type: none"> Engage local governments, schools, cultural, arts, outing clubs, and service organizations to each develop a plan to enhance social and civic participation among elders in their work and programs
	<ul style="list-style-type: none"> Engage with Saranac Lake Planners and local government to create pedestrian friendly

	shopping and service access areas for elders among others
	<ul style="list-style-type: none"> Work with appropriate partners to undertake walkability/accessibility audits
	<ul style="list-style-type: none"> Work with local governments, businesses, and community organizations to provide seating areas in shopping areas—benches, resting places
	<ul style="list-style-type: none"> Engage appropriate partners such as Saranac lake Chamber of Commerce to undertake a senior citizen parking availability inventory/study

XII. Tupper Lake Survey Findings

Age of Respondents

Age Group	Number of Respondents	Percent of Total
55-64	9	20%
65-74	17	38%
75-84	13	29%
85+	6	13%
Total	45	100%

Length of Residence in Tri-Lakes Region

Years of Residence	Number of Respondents	Percent of Total
40 years or more	27	61%
20-39 years	8	18%
10-19 years	4	9%
5-9 years	3	7%
1-4 years	2	5%
Total	44	100%

Year Round/Seasonal Residence in Tri-Lakes Region

Tenure	Number of Respondents	Percent of Total
Year round	43	98%
Seasonal	1	2%
Total	44	100%

Living Arrangements

Living Situation	Number of Respondents	Percent of Total
Live alone	24	54%
Live with spouse or partner	14	31%
Live with son or daughter	7	15%
Live with grandchild	0	0%
Live with other relative or friend	0	0%
Total	44	100%

Elder Friendly Community:

97% of respondents said they strongly agree or agree that Tupper Lake is a friendly and supportive place for older people.

Intergenerational Interaction:

13 % of respondents said they would like more opportunities to do things with children and young people.

Socialization:

53% of respondents said they would like more opportunities to socialize and do things with other elders.

Community Engagement:

28% of respondents said they have knowledge or abilities which they would like to use more to benefit the community; another 46% said they might or probably have knowledge which they would like to use more to benefit the community.

18% strongly agree and another 70% agree that they have a strong sense of belonging to the community.

Isolation and Loneliness:

25% of respondents answered they sometimes feel rather lonely living in their present living situation.

40% responded they would or might like a Mercy Care friendship volunteer to provide them or someone they know with friendship and companionship, to do things together in the community, and to assist them as may be needed with other particular needs.

Technology:

53% of respondents use a computer and the internet most every day to communicate with family, friends or for news and entertainment.

46% of respondents said they would or might be interested in learning together with other older persons how to better use the computer.

Health and Human Services:

50% of respondents said they would know how to get health and human services information for home health aides, medical equipment, long-term care, health insurance, home modification, meals on wheels, nursing home, assisted living, etc. Another 32% answered yes for some; no for others. 7% responded they would generally not know how to get the information.

57% of respondents said they would prefer to fill out only one application and have the information shared to obtain health and human services; 43% said they would prefer to fill out separate applications, which may not be shared, for each service.

Housing:

71% of respondents said they would like to live in their present home as long as possible as they grow older. Another 26% said they probably would like to live in their present home.

28% of respondents said their home will require modification or repairs for them to continue to live there comfortably as they grow older.

55% of respondents live alone; 33% live with a spouse or partner.

13% are very concerned that they may not be able to afford to stay in their own home as they grow older. Another 28% are a little concerned. 59% are not concerned.

54% of respondents said they would know what they want to do if they are no longer able to manage in their present housing. 46% don't know what they would want to do.

Walkability:

39% of respondents frequently use sidewalks in town to get to where they need to go. Another 46% sometimes use them.

13% of respondents find the sidewalks in town that they use to be generally satisfactory. 71% answered some yes and some no. 16% said they were not satisfactory.

Transportation:

84% of respondents almost always drive a car themselves or have someone in their household drive them when they need to get somewhere in the community.

0% of respondents are experiencing difficulty finding convenient parking almost always; 26% have some difficulty; and 74% do not usually experience difficulty finding convenient parking.

3% of respondents are using the senior bus to meet a large proportion of their transportation needs; 3% are using the county bus, and 3% use a taxi for a large portion of their transportation needs.

9% of respondents said that transportation within the community or the Tri-Lakes is sometimes a problem for them; 3% said it is a major problem, and 88% said it is not a serious problem. 0% of respondents over the age of 85 said that transportation is a major problem. Written comments are as follows:

- Maintaining auto is very expensive
- Winter weather is a big factor for driving out of town and poor night vision
- My children's work schedules make it difficult to provide transportation so I depend on friends and taxi.

54% of respondents said they might need some transportation assistance for medical appointments; another 31% said they might need some transportation assistance for shopping; 15% said to attend church, and 0% said they might need transportation assistance to attend events.

36% said if available, they would now or in the future use "Dial-a-Ride," door to door, service. 44% said they don't know if they would use it, and 21% said they would not use it.

Prioritization of Needs:

87% of respondents said that health and human services is a very important need to satisfy to make it possible for them to age in place in the Tri-Lakes.

82% of respondents said that friendship and companionship is a very important need to satisfy to make it possible for them to age in place in the Tri-Lakes.

80% of respondents said that adequate housing is a very important need to satisfy to make it possible for them to age in place in the Tri-Lakes.

74% of respondents said that transportation is a very important need to satisfy to make it possible for them to age in place in the Tri-Lakes.

71% of respondents said having family nearby is a very important need to satisfy to make it possible for them to age in place in the Tri-Lakes.

47% of respondents said that having involvement in the community is a very important need to satisfy to make it possible for them to age in place in the Tri-Lakes.

Obstacles to Aging in Place in Tupper Lake:

- a. Snow concerns, shoveling; safety when walking or driving in winter; snow and ice—absence of railings
- b. Sidewalks—bad condition of sidewalks and streets—poor snow removal
- c. House needs and repairs—small jobs that need attention which are considered too small for a contractor to respond to
- d. Accessible health care—Plattsburgh nearest specialists for some procedures and treatments—cataracts; medical care, eye care, dental care. Need to travel for medical care.

- e. Distance from healthcare facilities—weekends and holidays
- f. Lack of emergency room for medical care—20 miles is too far sometimes
- g. High taxes, cost of living
- h. Not enough grocery stores; no clothing stores—prices too high
- i. Lack of stores to purchase clothing, shoes, and household items at reasonable costs—driving 60-70 miles to get to a store is wrong.
- j. Helping folks to see the value in asking for help
- k. Lack of transportation—if you don't drive, transportation is an issue for Dr. visits, hospital tests, shopping. Questions user-friendly nature of bus schedule.
- l. Someone to help those with dementia—calling for rides, etc.
- m. No adult daycare center
- n. Need more affordable apartments for seniors—not everyone adapts to public housing. Many places do not allow pets.
- o. One stop shopping center—expensive to call taxi several times for drop off and pick up because stores are spread out so much.
- p. Winter medical appointments.
- q. Elders live on fixed incomes and can't afford some of the extra programs being offered. Elders pay their bills first. (Thank you Mercy Care for the Adirondacks from the bottom of my heart.)
- r. Isolation—I just moved here, know very few people, hardly ever get out, don't know area; everything is shut down in the winter except for church
- s. Trying to live on social security

Qualities that tend to make Tupper Lake a good place to age in place:

- a. Wonderful Adult Center-friendly, tries to serve everyone, very active
- b. Bus transportation
- c. People are always ready and willing to help someone in need
- d. Friends, churches, Hospice
- e. Extended family, friends, neighbors—sense of community in my church
- f. Dr.'s medical building
- g. Meals on Wheels, busing
- h. Safe community—minimal fears regarding crime
- i. Many church goers
- j. Dollar stores carry many items helpful to people on limited incomes
- k. Friendly neighbors
- l. Mercy Care volunteers
- m. Loving and caring people in Tupper Lake
- n. Excellent rescue, fire protection, and police services
- o. Excellent maintenance of roads in all weather
- p. Community support system in an emergency
- q. Groceries and prescriptions delivered to home if needed
- r. Beauty, slow pace
- s. Peace and friendship

XIII. Tupper Lake Aging in Place Action Plan

Findings from the Community Survey, interviews with key leaders, focus groups, and feedback from community presentations of the Draft Aging in Place Action Plan resulted in the Tupper Lake Aging in Place Action Plan

Tupper Lake Community Committee Volunteers

Rev. William Cooper, St. Thomas Episcopal Church	Betty Maus
Cathy Fleury, Franklin County C.A.R.E.S/NY CONNECTS	Kathleen McPhillips
Jeremiah Hayes	Ben Peets
Lorraine LaValley	Rev. Rick Wilburn, Baptist Chapel
Janice Marlow, Director Franklin County C.A.R.E.S/NY CONNECTS	

Priorities Identified in Survey in Order of Priority

Lake Placid	Saranac Lake	Tupper Lake
Friendship & Companionship	Adequate Housing	Health & Human Services
Health & Human Services	Health & Human Services	Friendship & Companionship
Adequate Housing	Transportation	Adequate Housing
Transportation	Friendship & Companionship	Transportation

Tupper Lake Aging in Place Action Plan

Priority Identified	Action Plan
Health & Human Services	
	<ul style="list-style-type: none"> ▪ Work with other Tri-Lakes communities and AMC to explore feasibility of establishing Assisted Living Facility in the Tri-Lakes ▪ Work with other Tri-Lakes communities and AMC to develop Intergenerational Adult Day Care Center
Friendship & Companionship	
	<ul style="list-style-type: none"> ▪ Expand Mercy Care Friendship and Parish Nurse Volunteer Program in Tupper Lake ▪ Build on successful Adult Center Programs; Survey TL senior citizens to explore expanded programs and interest; identify obstacles to participation and develop remedies ▪ Offer computer training program to older adults through the Adult Center—49 % of

	<ul style="list-style-type: none"> survey respondents said they would or might be interested.
	<ul style="list-style-type: none"> Work with Adult Center to inventory volunteer needs in the community.
	<ul style="list-style-type: none"> Coordinate and integrate youth and older adults in volunteer projects. Identify an organization to recruit, coordinate, and network volunteer programs and foster intergenerational opportunities in TL
	<ul style="list-style-type: none"> Engage local governments, schools, cultural, arts, outing clubs, and service organizations to each develop a plan to enhance social and civic participation among elders in their work and programs
	<ul style="list-style-type: none"> Foster stronger relationship between Wild Center Museum and Adult Center—explore opportunities for engagement
Housing	
	<ul style="list-style-type: none"> Engage appropriate partners to establish a central clearing house in TL for seniors to call when they have needs for home maintenance assistance
	<ul style="list-style-type: none"> Identify and engage appropriate partners to survey and inventory TL contractors’ interest and service to undertake small projects for seniors
	<ul style="list-style-type: none"> Identify and engage partners to develop “vendor” list of businesses who will respond to seniors’ needs
	<ul style="list-style-type: none"> Local governments to review local public policies to identify senior discount opportunities
	<ul style="list-style-type: none"> Raise awareness about free home modification assessments by the Tri—Lakes Center for Independent Living
	<ul style="list-style-type: none"> Raise awareness with zoning board and building codes officer on principles of universal design for new home or modification construction
	<ul style="list-style-type: none"> Engage appropriate partners to establish a volunteer corps to assist elders who do not qualify for county assistance but have home modification needs they cannot afford
Transportation	
	<ul style="list-style-type: none"> Work with other Tri—Lakes Communities to establish a medical transportation system available to all elders to include transportation for specialist care out of the area when not available locally
	<ul style="list-style-type: none"> Work with other Tri—Lakes Communities to

	develop door to door options for elders who are no longer able to drive and for out of town shopping access for items not available locally
Mobility/Accessibility—Snow concerns, shoveling, safety when walking or driving in winter, conditions of sidewalks, shopping access	<ul style="list-style-type: none"> Engage with local government, service organizations, youth volunteer groups, and business community to improve mobility/accessibility for TL elders

XIV. Implementation

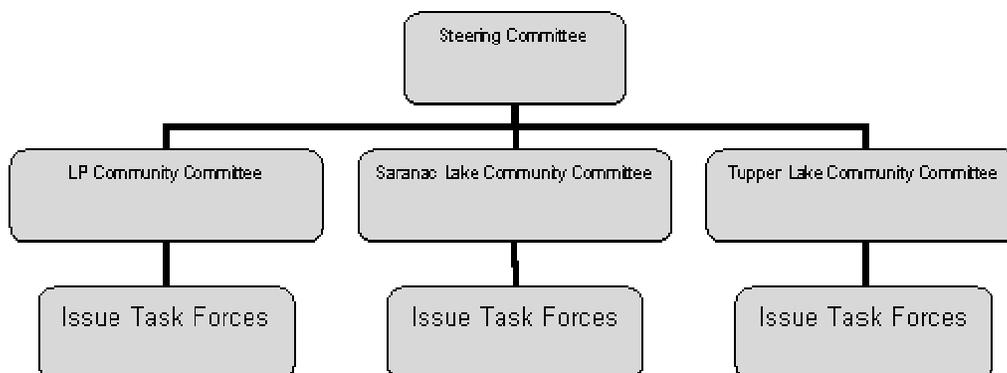
Implementation Plan

1. Rationale

The assessment process and development of the Aging in Place Action Plan in 2009-2010 revealed that four needs had top priority for aging in place in all three Tri-Lakes communities:

- Adequate housing, home maintenance, and housing alternatives;
- Safe and reliable transportation;
- Health and human services;
- Friendship and companionship.

Development of the Aging in Place Action Plan used a community-based planning process with committees formed in each of the Tri-Lakes towns—Lake Placid, Saranac Lake, and Tupper Lake. Since the same needs emerged as top priorities for all three communities, the community planning committees agreed that each community committee should form a task force to implement the actions in the plan in each of the four priority areas identified: Housing, Transportation, Friendship & Companionship, and Health & Human Services. The three community committees will meet periodically together to share ideas, compare progress, and learn from each other. The three-community meetings will also serve as learning sessions on topics of interest to all.



2. Task services:

As shown in the figure above, three community committees will be organized beginning in September 2010. Four task forces will be formed by each community committee to implement the actions in the priority areas which include Housing, Friendship & Companionship, Transportation, and Health & Human Services. They will meet at least on a quarterly basis and report to an implementation steering committee which will provide oversight and coordination for their efforts. Through the evaluation of the 2009-2010 planning process, many of the original community planning committee members have volunteered to participate in one or more of the task forces. In addition to members of the original community committees which completed the assessments and development of the Aging in Place Action Plan, these task forces will seek additional members knowledgeable about their area of responsibility.

For example, the task force dealing with housing issues might include a county housing official and town planner with responsibilities in this area. As the diagram demonstrates, community committees will work to implement the actions they identified specific to their community in the Aging in Place Action Planning Process in 2009-2010.

Task Force Responsibilities

Topic Task Forces

One task force for each priority area in each community
Report to Community Committee

Responsibilities:

- Review action items developed in the 2009-2010 Community Empowerment Aging in Place Action Plan
- Recruit additional members with expertise in the topic area
- Appraise community opportunities and challenges
- Assess and develop implementation priorities
- Research additional information, as needed, for each action item to be implemented; seek ideas and best practices from other communities
- Conduct site visits as needed to other communities
- Develop work plan and time table to implement action items
- Meet with officials, organizations, and decision makers as needed to advocate for implementation of the action items defined in the Aging in Place Action Plan
- Participate in evaluation
- Attend meetings

Steering Committee

Responsibilities:

- Support Community Committees
- Recruit task force members where possible
- Coordinate plan implementation using the Aging in Place Action Plans developed for all three community committees
- Compare and manage processes among community committees
- Make suggestions

- Provide expertise in technical areas
- Assure similar formats among community committees
- Participate in evaluation
- Attend meetings
- Attend three-community committee meetings and educational sessions for task forces

XV. Evaluation

A survey of the Aging in Place Community Committee members and Steering Committee members was conducted in June 2010. The survey results are reported below.

Community Committee Survey Responses

A. Profile of Respondents

Fourteen out of thirty- three survey responses were received from the Aging in Place Community Committee members. The following tables give a quick profile of respondents:

Gender of Respondents

Gender	Number of Respondents	Percent of Total
Female	8	57%
Male	6	43%
Totals	14	100%

Age of Respondents

Age Group	Number of Respondents	Percent of Total
25-35	1	7%
36-44	3	21%
45-54	3	21%
55-64	0	0%
65-74	4	30%
75+	3	21%
Total	14	100%

Community of Residence

Community	Number of Respondents	Percent of Total
Lake Placid	8	62%
Saranac Lake	3	23%
Tupper Lake	2	15%
Skipped question	1	
Total	14	100%

B. Community Committee Meetings

Of the respondents to the Aging in Place Community Committee Members Survey 86% responded that they attended all or most of the community meetings, with 100% stating that their time was well spent. Community members described the Community Committee Meetings as being informative, interesting, productive and collaborative. Some 93% of the respondents stated that the meetings were well managed.

C. Aging in Place Action Plan Project

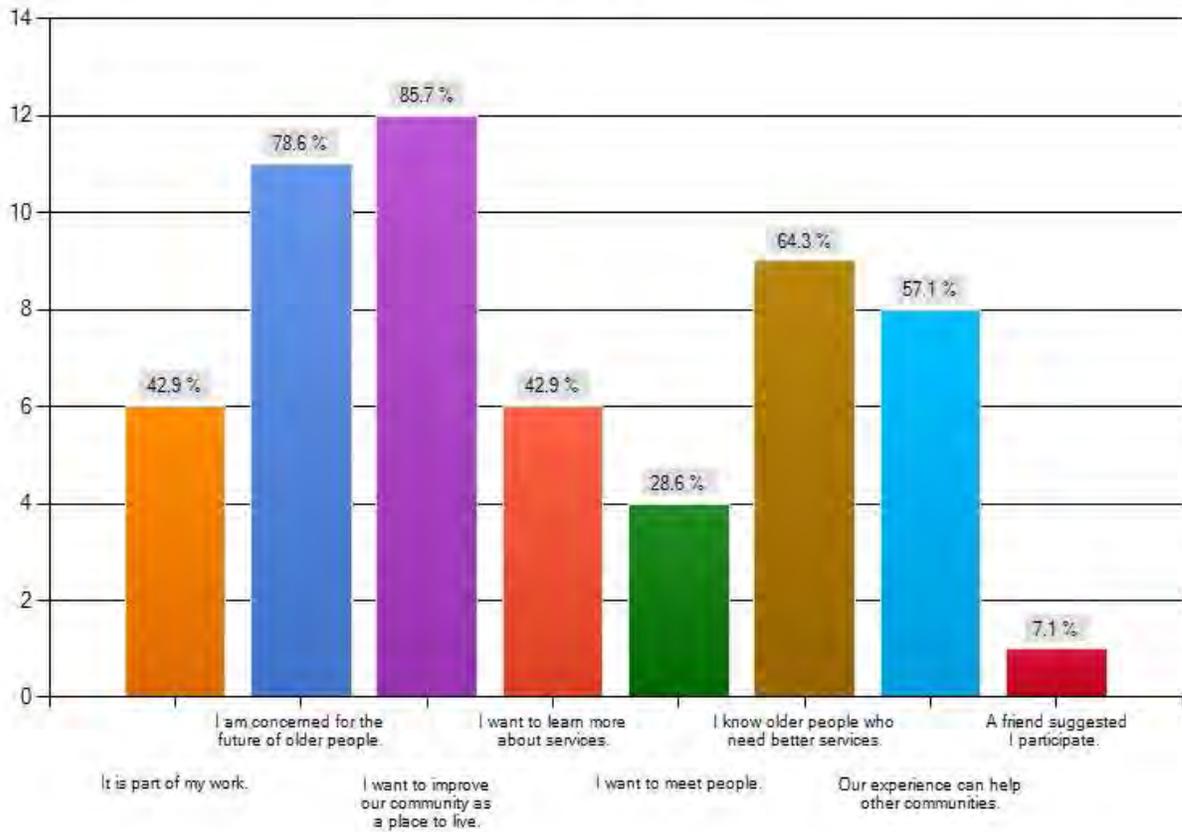
Respondents ranked the following objectives and how successfully they think they met its stated objectives.

1. Identify commonalities in all three communities	93%
2. Encourage awareness by local leaders	85%
3. Develop an objective plan of action for each town	83%
4. Foster Community inclusion of older adults	58%
5. Encourage development responses	50%
6. Educate the community about aging in place	50%
7. Stimulate the development of priority services for elders to remain living in their homes.	46%
8. Develop concrete plans and outcomes in the community	33%

93% of the community committee respondents believe the Tri-Lakes Aging in Place Action Plan will result in positive change so that elders will be able to age in place more successfully in our communities. Some 72% of the respondents are satisfied with their level of interaction with the community committee. If the opportunity arose, 78% of the committee members would be willing to share their Committee experience with other communities in the State or Nation working to develop an Aging in Place Action Plan. Overall, 78% described their experience working in the Aging in Place Action Planning Project as satisfying.

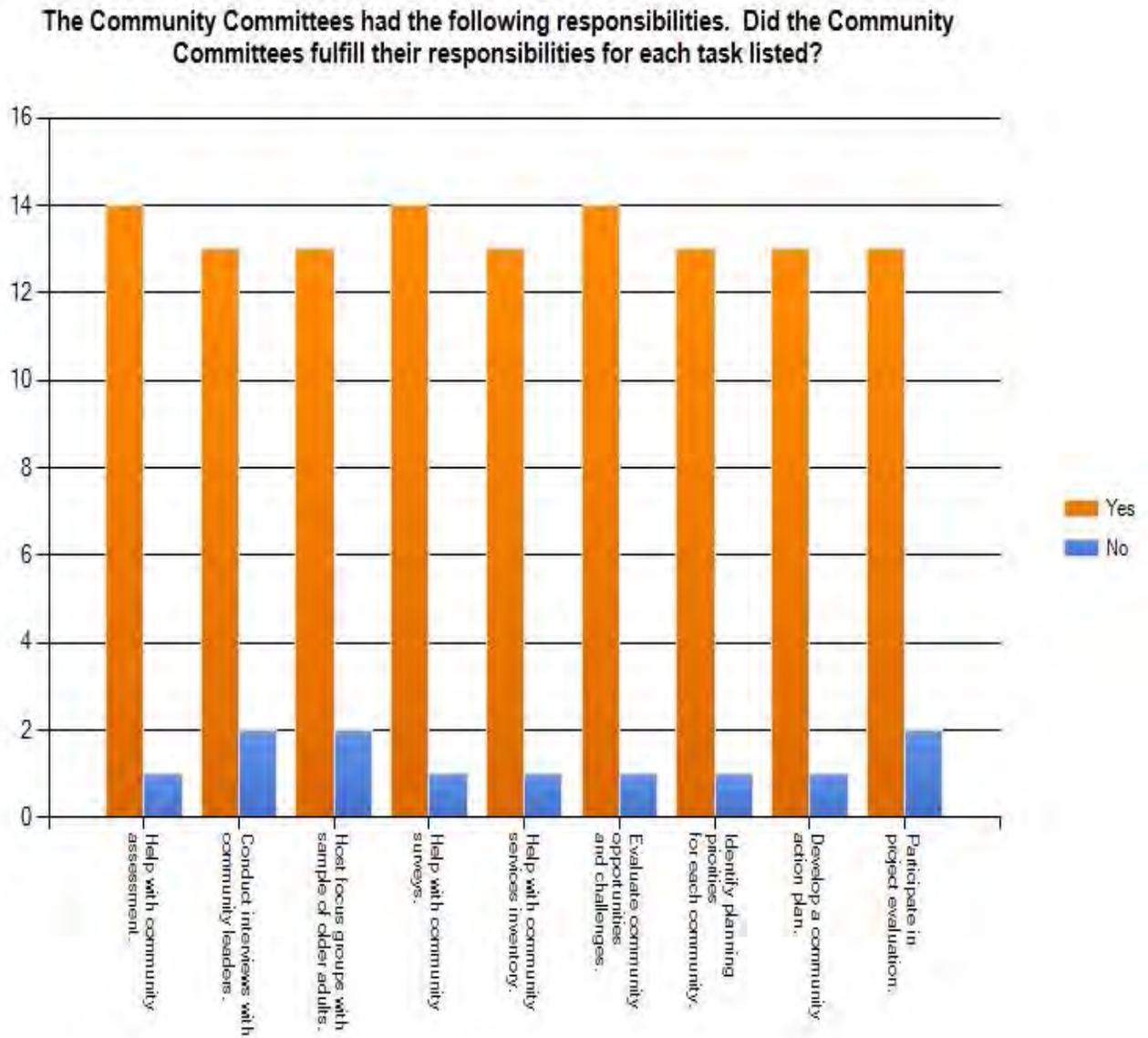
D. Motivation to participate

My motivation to participate as a member of the Planning Committee is: (Check all that apply.)



85% of respondents state they were motivated to participate in order to improve our community as a place to live.

E. Responsibilities

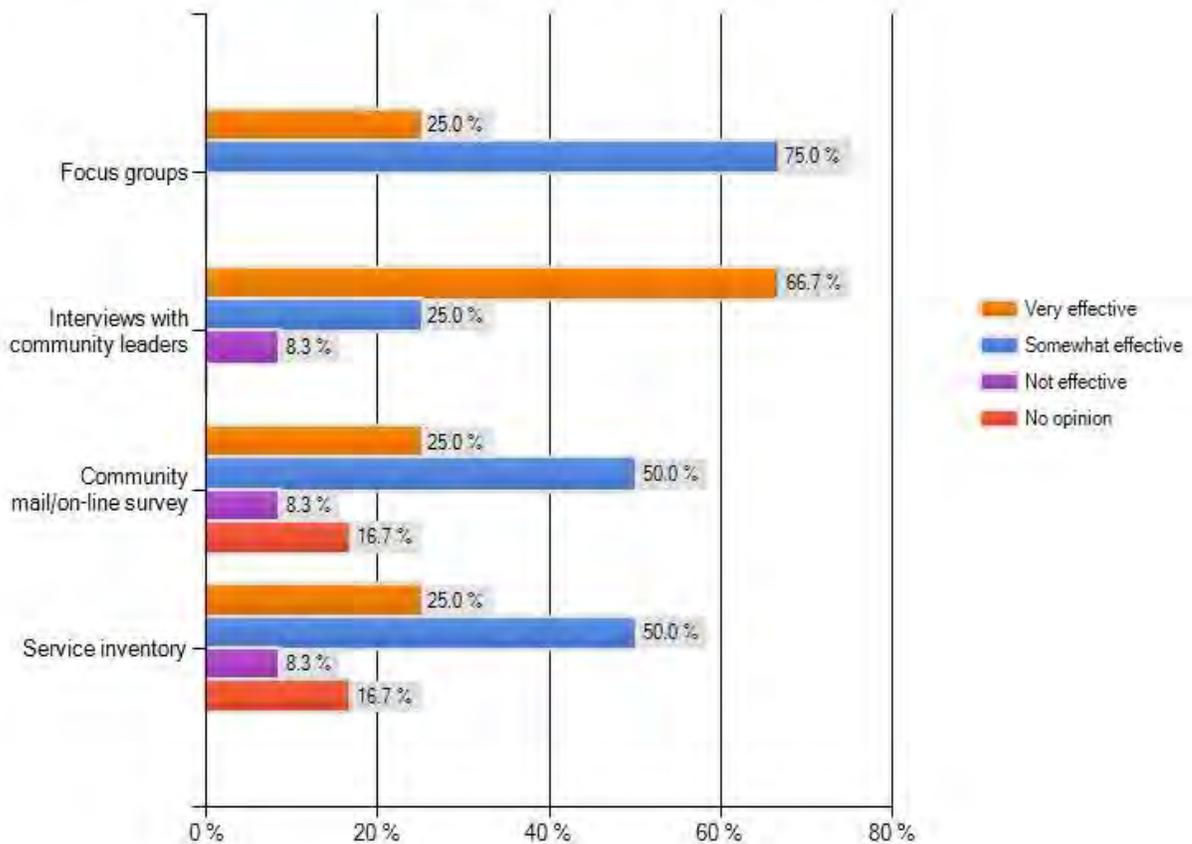


93% of respondents said the Community Committee fulfilled their responsibilities for each task listed. Two respondents commented that it was difficult to engage their community, which is unfortunate.

F. Information

Community committee members used a variety of means to gather information. 67% felt interviews with community leaders to be the most effective means to gather information and 75% stated that focus groups were somewhat effective.

The Community Committees used a variety of means to gather information on community needs and preferences. Please rate each of the following methods:



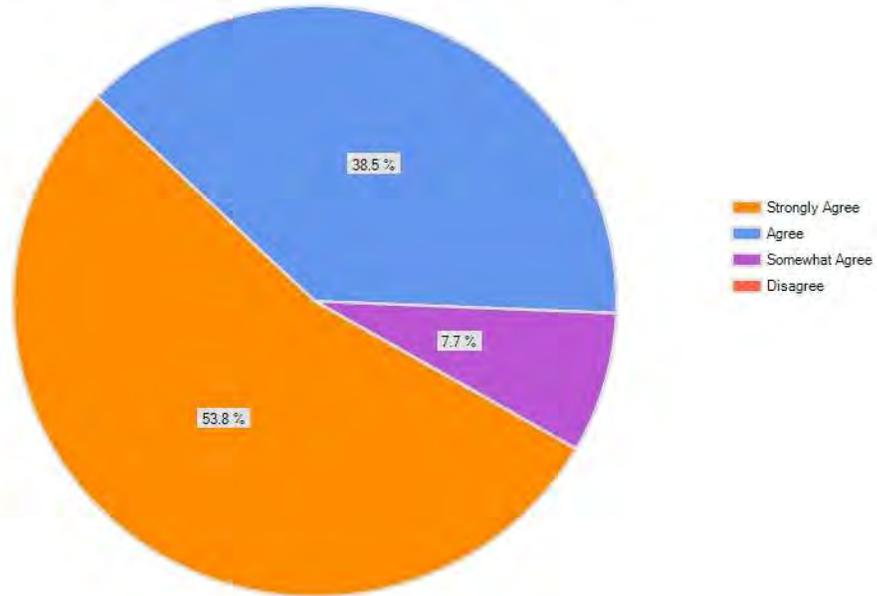
Respondents reported some of their favorite things about working on this project to be:

- ❖ Extra knowledge gained at a time it is most helpful with my mother.
- ❖ Learning more about our community and feeling that our work will make a difference
- ❖ Meeting and hearing great ideas, great ideas come from brainstorming
- ❖ New insight regarding assistance for our elderly
- ❖ Getting to know others in the community who share interest in working on this project
- ❖ I enjoyed the academic part
- ❖ Interaction, building of ideas, creative approaches emerging

G. Creating Task Forces to Implement the Aging in Place Action Plan

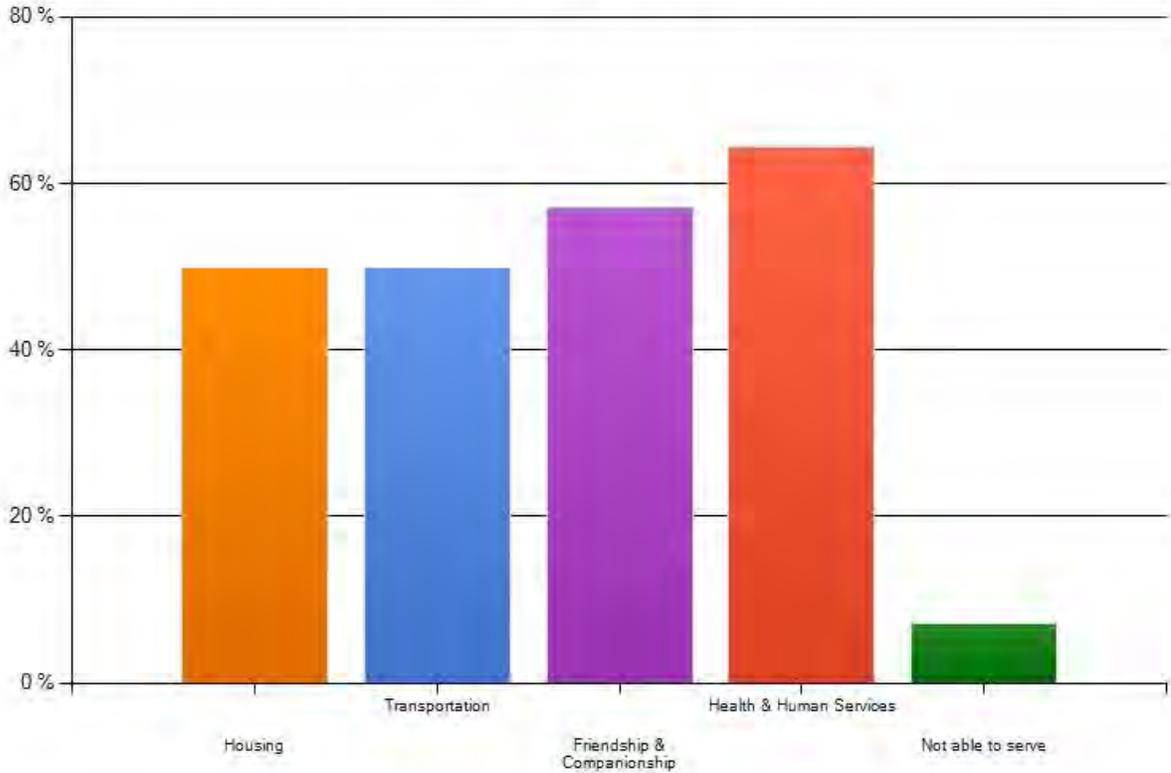
93% of community committee members agree that creating task forces is an effective strategy to begin implementation of the Aging in Place Action Plan.

Creating task forces to focus on the 4 priority issues identified in the Community Survey (Housing, Transportation, Friendship & Companionship, and Health & Human Services) is an effective strategy to begin implementing the Aging in Place Action Plan.



All but 7% of respondents are willing to serve on one or more of the task forces created to implement the Aging in Place Action Plan.

Beginning in the Fall, I am willing to use the knowledge and experience I gained working on this project to serve on one or more of the following task forces created to implement the Aging in Place Action Plan. (Check all that apply)



Steering Committee Responses

A. Profile of Respondents

Eleven out of nineteen Steering Committee Members responded to the June 2010 survey. The following tables give a quick profile of respondents:

Gender of Respondents

Gender	Number of Respondents	Percent of Total
Female	5	50%
Male	5	50%
Skipped Question	1	
Totals	11	100%

Age of Respondents

Age Group	Number of Respondents	Percent of Total
36-44	1	9%
45-54	1	9%
55-64	2	18%
64-74	4	37%
75+	3	27%
Totals	11	100%

B. Aging in Place Steering Committee Meetings

Of the respondents 82% reported that they attended some or most of the meetings and 100% responded that their time was well spent. 100% of those attending the Community Committee Meetings found them to be productive, informative, interesting and well managed.

C. Action Plan

100% of the respondents believe the Tri-Lakes Aging in Place Action Plan will result in positive change so that elders will be able to age in place more successfully in our communities. 83% feel that creating task forces to focus on the four priority issues identified in the Aging in Place Action Plans for each town is an effective strategy to begin implementing the Aging in Place Action Plan.

80% of the Steering Committee Members are willing to serve on one or more of the four implementation task forces.

- ❖ Housing
- ❖ Transportation
- ❖ Friendship & Companionship
- ❖ Health & Human Services

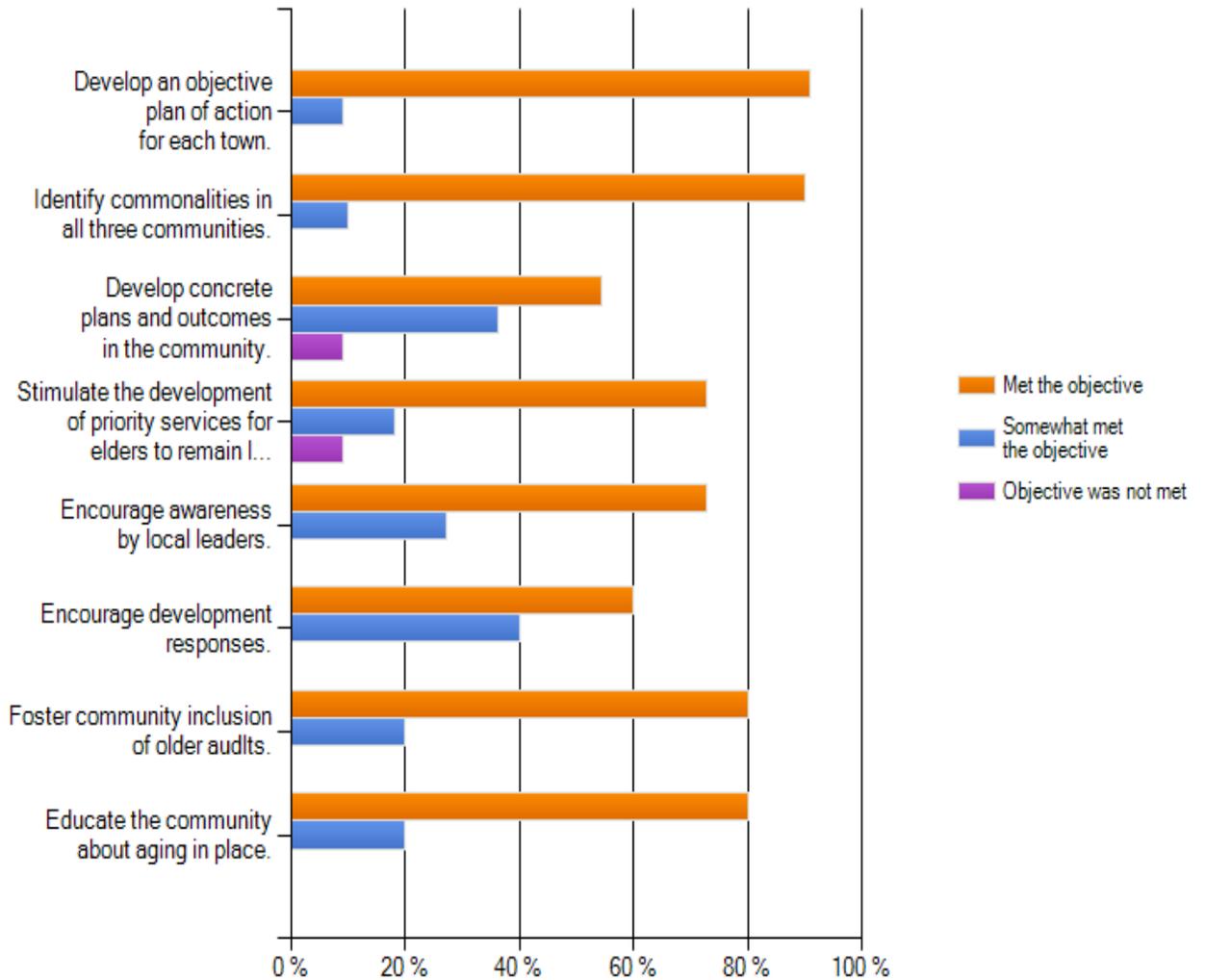
D. Steering Committee Responsibilities

Over 90% of the Steering Committee respondents agreed they had fulfilled their responsibilities for each of the following tasks.

- ✓ Supervise grant activity at the central level
- ✓ Encourage individual community committees
- ✓ Recruit community committee members
- ✓ Coordinate assessments
- ✓ Compare and manage processes among communities
- ✓ Make suggestions
- ✓ Provide expertise
- ✓ Assure similar formats among communities
- ✓ Participate in project evaluation
- ✓ Review of project materials and technical information

E. Objectives

The Aging in Place Action Planning Project had the following objectives.
How well do you think the project met its stated objectives?



References

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Appendices

1. Components of a Livable Community for Aging in Place

According to Partners for Livable Communities, there are ten core components of ageless communities: health and human services, transportation and mobility, public safety, housing, financial services, workforce development, civic engagement and volunteer opportunities, culture and lifelong learning, public policy and zoning, and factors that contribute to making communities good places to grow up and grow old.¹ For each of these components, Partners recommends a series of criteria by which livability can be measured and also identifies common challenges and action steps to address them: These criteria are not exhaustive or mutually exclusive, and the categories may be combined depending on a community's needs. The Tri-Lakes planning groups added an additional component, "community is friendly to people of all ages," which it placed first and for which it developed six criteria.

1. Community is friendly to people of all ages

A. Elders are able to enjoy a fullness of life, living independently in residential settings of their choice, for as long as possible

- Recognition that each person has an immeasurable value and innate dignity that is not diminished by socio-economic factors, mental or physical deficiency, or by age
- Holistic care that addresses the intellectual, physical, social, emotional and spiritual needs is available to each person
- Compassionate and empathetic interest and concern for elders is expressed through companionship, friendship, counsel and assistance as needed

B. Elders are integrated into the life of the community

- Elders and infirm living independently are connected with their community through active supportive relationships with family, friends or friendship volunteers, and are able to participate in and maintain a sense of belonging to the community.
- Organizations provide programs for elders and all organizations make special efforts to include elders in their activities and to foster intergenerational programs that benefit from the interests and talents of elders
- Housing, public and commercial facilities, as well as transportation and services are designed to accommodate the needs of elders.

Common Challenges	Action Steps
A number of elders experience isolation and loneliness	<ul style="list-style-type: none"> • Friendship Volunteers program to reach out to older adults living independently
In the Adirondacks, long distances from services, cold and severe winters and lack of public transportation isolate elders living in their own homes	<ul style="list-style-type: none"> • Improved public transportation and volunteer drivers to events in which elders participate
There is not sufficient coordination of all local services for elders	<ul style="list-style-type: none"> • Establish a coordinated pattern of programs and services

¹ These components are discussed in two Partners' publications: *Blueprint for Action* and *Aging in Place Technical Assistance Guide*. Several additional items were added to their housing category and many items have been edited to make them more concise.

Common Challenges	Action Steps
Insufficient understanding of the needs of elders in the community and how they might best be met	<ul style="list-style-type: none"> Conduct educational forums and a community-based planning project

2. Health and Human Services

A. Coordination and ease of access

- A single entry point or one-stop-shop for resources and services with easily accessible information about health and wellness programs
- Coordination of projects by local government, Area Agency on Aging, other organizations
- Access to a variety of health care options and adequate primary care services (1 primary care physician/1,000 residents of all ages);
- Inexpensive transportation services offered to and from health care facilities

B. Support for independent living through home delivered services

- Home care
- Other support services
- Meals on wheels

C. Prevention and health maintenance

- Preventive screenings (blood pressure, mammograms)
- Exercise and wellness programs (programs for health concerns such as heart disease; local parks and other exercise venues are accessible through several modes of mobility)
- Nutrition programs (nutrition classes geared to specific health and financial needs;
- Communal meals at a recreation/senior center

Common Challenges	Action Steps
Information about community services is not centralized	<ul style="list-style-type: none"> Raise Awareness about NY Connects, a single point of entry for information about services in each county
Home-based services are provided piecemeal rather than coordinated	<ul style="list-style-type: none"> Strengthen collaboration among home-based services
Poor diets and physical inactivity increase health risks for many older adults	<ul style="list-style-type: none"> Support farmers' markets Raise awareness about exercise and active living programs in the Tri-Lakes tailored to older adults' preferences; identify new opportunities Provide vaccinations and preventive screenings
Lack of transportation to hospitals and doctors' offices affects access to care	<ul style="list-style-type: none"> Inventory available services and improve coordination and access to medical transportation

3. Transportation and Mobility

A. Accessibility and ease of use

- Varied types of community transportation options
- Public transportation for senior centers, adult day services, grocery stores, faith communities, cultural events
- Bus stops are enclosed, have seating, and post timetables
- Programs to increase public transit ridership by older adults (travel training, route and service adjustments, low-floor buses, discounted fares)

B. Pedestrian safety, walkability

- Sidewalks and street crossings safe and accessible (bump-outs, crosswalk countdown, island in middle of street)
- Sidewalks link housing and essential services for walking residents
- Streets have larger signage, left turn lanes, and clear road markings
- Residents walk or use public transportation for grocery store, doctor's office, pharmacy
- Community audits its walkability and improves pedestrian and bicycle access accordingly
- Comprehensive land use plans coordinated with transportation planning

Common Challenges	Action Steps
Road design makes walking difficult	<ul style="list-style-type: none"> • Use walkability audits to identify and prioritize pedestrian improvements
Many older drivers experience specific difficulties related to the driving environment	<ul style="list-style-type: none"> • Improve roadway design and signage • Provide safety programs and refresher courses for Older drivers
Customer-oriented community transportation options are lacking for older adults	<ul style="list-style-type: none"> • Make transit services more flexible and customer responsive • Support volunteer driver programs

4. Public Safety

A. Safety programs

- Older adults say they feel safe
- Neighborhood Watch programs
- Specialized training for frail elderly
- Plans for evacuation of older adults in a natural disaster or homeland security emergency
- GIS layout/ knowledge of older adult residences in case of severe weather or other situations that prevent residents from leaving their home

B. Abuse prevention

- Elder abuse/neglect identification and prevention
- Police and fire departments actively focus on preventing injuries and threats to older adults
- Law enforcement and fire department employees receive training on how to be sensitive to the changing needs of adults as they age

Common Challenges	Action Steps
Older adults commonly voice concern about the safety of their neighborhoods	<ul style="list-style-type: none"> • Encourage Neighborhood Watch programs • Create mail carrier alert programs
Elder abuse is an increasingly recognized problem	<ul style="list-style-type: none"> • Train law enforcement officials to detect and report elder abuse.

5. Housing

A. Housing options

- Subsidized housing facilities
- Zoning allows for accessory apartments
- Most housing is accessible or visitable and accommodates the needs of aging adults
- Housing codes that meet the needs of an aging community
- Assisted living options available and affordable

B. Home modification and repair services

- Skilled, reasonably priced home modification services available to residents
- Home maintenance and repair assistance available

C. Public services

- Service modification for older adults (snow shoveling, backyard trash collection)
- Impact on local property taxes of high percentage of fixed income citizens addressed

Common Challenges	Action Steps
Affordable housing options are limited ²	<ul style="list-style-type: none"> • Institute property tax relief programs for older homeowners
Home and building design is tailored to a narrow range of physical abilities	<ul style="list-style-type: none"> • Institute home modification and repair programs • Encourage universal design and visitability in new housing construction
Housing and services are not coordinated	<ul style="list-style-type: none"> • Build partnerships between housing and service provide

6. Financial Services

- Tax relief for older adults with limited incomes
- Education and information about financial fraud and predatory lending
- Discount options for transportation
- Discount options for other public services

Common Challenges	Action Steps
Older adults need to manage their resources wisely	<ul style="list-style-type: none"> • Tax relief • Discounts on transportation and public services
Older adults may need protection from predatory lending and financial fraud	<ul style="list-style-type: none"> • Train older adults • Provide centralized information on abusive practices

7. Workforce Development

- Job retraining opportunities
- Flexible job opportunities
- Job banks for older adults
- Discounts for older adults who want to take classes at local colleges/universities
- Bi-lingual classes for non-English speaking older adults

Common Challenges	Action Steps
Older adults may need to update their skills and may need more flexible work opportunities	<ul style="list-style-type: none"> • Job retraining • Educational discounts • Flexible hiring and work schedules • Job banks

² The proportion of households headed by seniors paying over 30 % of their annual income on housing is one measure of accessibility. In many Adirondack communities, housing consumes 28 to 31% of total income in all age groups. Residents report that availability of affordable duplexes, apartments and subsidized housing is limited.²

8. Civic Engagement and Volunteer Opportunities

- Central clearinghouse for volunteer opportunities
- Local community organizations provide volunteer opportunities suited to older adults
- Older adults are surveyed about their volunteer interests
- Intergenerational volunteer opportunities
- Volunteer opportunities for older adults to serve as mentors or share their expertise
- Cultural opportunities reflect ethnic and demographic differences
- Older adults on government advisory boards and other committees

Common Challenges	Action Steps
Older adults are looking for a broader array of civic engagement options than most communities currently provide	<ul style="list-style-type: none"> • Workshops and job fairs • Support groups for older volunteers
Many NGOs and businesses undervalue the skills, capacities, and resources of older adults	<ul style="list-style-type: none"> • Workshops and job fairs • Data base for skill matching
Older adults are a valuable resource in community development	<ul style="list-style-type: none"> • Establish Asset Mapping of elder capacities • Start Senior Academies
Engagement with older adults can provide intergenerational enrichment	<ul style="list-style-type: none"> • Support intergenerational learning programs

9. Culture and Lifelong Learning

- Community library delivers books to people in their homes
- Community centers offer programs on topics of interest to older adults
- Community provides opportunities for lifelong learning
- Low-cost programs in computer skills available and marketed to older adults
- Residents of all ages, backgrounds, and cultural interests can actively participate in the civic and cultural life of the community

Common Challenges	Action Steps
Relatively few community-based arts, culture, and enrichment programs target older adults	<ul style="list-style-type: none"> • Provide a robust range of programs to enable older adults to contribute to the cultural life of the community
Arts and culture programs often neither appeal to nor engage the talents of the increasingly diverse older adult population	<ul style="list-style-type: none"> • Provide opportunities for intergenerational learning around arts and cultural production
Older adults frequently do not have opportunities to stay up-to-date with advances in technology	<ul style="list-style-type: none"> • Increase technology training opportunities for older adults

10. Public Policy and Zoning

A. Support for housing options in zoning requirements and building codes

- Active older adult communities
- Development of assisted living facilities
- Senior housing options (flexible housing arrangements, shared housing, accessory apartments)

B. Needs of older population met

- Plans to ensure all land use patterns, transportation routes and community facilities meet the needs of an aging society
- Zoning allows mixed-use and pedestrian-friendly development in appropriate areas such as town centers
- Comprehensive plan allows needed adjustments in land use to accommodate aging population
- Residents can safely and conveniently get needed goods and services without having to drive

C. Transparency of planning process

- Most residents understand the way local development decisions are made
- Most residents consider the process fair and predictable

Common Challenges	Action Steps
New community design that supports aging in place lacks broad public support	<ul style="list-style-type: none"> • Engage older adults in the planning process
Zoning regulations discourage a broad range of age-appropriate housing options	<ul style="list-style-type: none"> • Incorporate accessory dwelling units and senior-friendly housing in the zoning code

11. A Good Place to Grow Up and Grow Old

- Local leadership strives to promote interaction between all generations
- City understands that universal design concepts not only aid a specific demographic, but society as a whole
- Local government acts as an advocate and catalyst for developing partnerships, new programs and systems to aid and engage their older adult constituents
- Cities and counties are harnessing the talent, wisdom and experience of older adults to contribute to the community at large.

Common Challenges	Action Steps
Local leaders do not understand the positive aspects of aging in place and the potential contributions of older adults to community growth	<ul style="list-style-type: none"> • Leadership is educated and informed about Aging in Place initiatives in other localities
Local leaders have not created avenues and ways to harness the capacities of older adults	<ul style="list-style-type: none"> • Older adults are viewed as assets to community growth
Local leaders do not understand that design for aging in place benefits all community members and can be used as a drawing card for visitors	<ul style="list-style-type: none"> • Examples of ways in which aging in place and universal design benefit all community members are provided to local leaders • Projects that benefit all community members are initiated first so the benefits of aging in place are realized by all

2. **According to *Meeting Transportation needs in an Aging-Friendly Community***” Excerpts from ***Generations***, a journal of the American Society on Aging Summer 2009 by Sandra Rosenbloom, there are some surprising findings:

- Many assume that older people who face mobility problems or must cease driving will be served by public transit and by special demand-responsive transportation services. Yet all indications are that neither traditional public transit services nor special demand services will come anywhere near meeting the mobility needs of the country’s aging population.
- Today only 1.3 percent of all trips taken by people over age 65 are made using any form of public transit.
- Traditional public transit services as currently funded and delivered are not responsive to the needs of older travelers.
- Studies consistently show that older travelers have a variety of safety, personal, security, flexibility, reliability, and comfort concerns about public transit.
- Elders often do not find the actual routes and hours of services to match their desired travel patterns.
- Many community transportation systems limit their services, for example, to medical appointments. But older people don’t make more than 5 percent of their trips for any kind of medical purpose...elders have a number of other unmet trip needs—from social and recreational activities to grocery shopping.
- Today those ages 65 to 84 take roughly 90% of all their trips by car, most often as the driver.
- Even those 85 and older take 80% of their trips by car, driving half the time.
- The car is also a significant mode for those who do not drive; in 2001, non-drivers over 65 made almost as high a percentage of their trips in a car as did drivers that age.
- Clearly, older people who do not drive are very dependent on others for rides, often on other older drivers.
- At age 85, drivers made more than twice as many trips as those who do not drive.
- Older people are far more at risk as pedestrians than as car passengers or drivers. Some experts believe that older people are at least 15 times more likely to be injured or killed as pedestrians than as car drivers, on an exposure basis.
- Even increasing and improving traditional public transit services is unlikely to meet the needs of older people unable to drive.
- At the other end of the spectrum are community transport providers who do not operate systems but find ways to match volunteer drivers to older travelers with mobility needs. Their costs tend to be substantially less than more formal systems.
- Since so many older people are and will be drivers until very late in their lives, the most promising mobility option is to modify the components of the auto-based infrastructure so that older people can drive safely longer. Options:
 - Improved street lighting
 - Additional signage
 - New lane-marking and sign systems responsive to diminishing eyesight and contrast sensitivity
 - Enhanced intersection signalization
 - Reserved lanes and signal priority for left turns

3. Lake Placid Reports

Initial Prioritization of Livable Communities Components

Lake Placid Common Challenges	Lake Placid Action Steps
<p>A Good Place to Grow Up and Grow Old</p>	<ol style="list-style-type: none"> 1. Raise awareness to understand the positive aspects of aging in place and the potential contributions of older adults to community growth. 2. Work with Parish Nurses to help individuals develop their own individual “Independence Plan” 3. Engage local government and school leadership to promote intergenerational connectedness <ul style="list-style-type: none"> • Involve older adults in after school programs • Explore Adult Day Care/Children’s Day Care at same location • Engage Adirondack Community Action program to explore potential connectedness between its Head Start programs and Meals on Wheels Programs • Work with St. Agnes Church & the Greenwood to explore an intergenerational program/project 4. Analyze “grey gold” opportunities for Lake Placid <ul style="list-style-type: none"> • Engage community leaders to develop a marketing plan to keep young people in Lake Placid, keep the over-60 population from out-migration, and attract 55+ in-migration population
<p>Housing</p> <ul style="list-style-type: none"> • Housing stock does not meet the needs of aging adults • Determine need for assisted living facility • Significant numbers of homes need modifications to accommodate elders to age in place successfully • Service modifications are necessary for older adults (snow shoveling, snow plowing, trash removal) 	<ol style="list-style-type: none"> 1. Develop promotional package for developers/builders related to universal design, needs of the community, and needs of future demographic changes. 2. Engage the land use committee to raise awareness about community design as relates to the needs of older adults 3. Create educational materials and training related to development decisions process <ul style="list-style-type: none"> • Develop universal design training programs for building contractors/developers/building code officers 4. Engage and coordinate private and public high school student volunteers to assist elders with snow shoveling, etc. 5. Engage Mercy Care to create a “Specialized Volunteer” corps to assist elders with small household projects
<p>Transportation/Mobility</p> <ul style="list-style-type: none"> • Medical transportation • Social transportation—groceries visits, events, civic 	<ol style="list-style-type: none"> 1. Engage with local government leaders to develop a public education and outreach campaign to raise awareness about public transportation services <ul style="list-style-type: none"> • Evaluate, modify, and develop services to better meet the transportation needs of aging

Lake Placid Common Challenges	Lake Placid Action Steps
<ul style="list-style-type: none"> • Need for adequate logistics and transportation information—availability, schedules, etc. • Outlying areas are not served by public transportation 	<ul style="list-style-type: none"> • persons • Assess purpose, need, and usage of current public transportation services; develop alternatives if necessary • Expand volunteer capacity to provide transportation to elders
Civic Engagement/Volunteer Opportunities	
<ul style="list-style-type: none"> • Better coordination of volunteer services and opportunities within the community are needed 	<ul style="list-style-type: none"> • Expand Mercy Care Volunteer Programs • Develop intergenerational support systems • Develop low-cost computer skills training classes for older adults • Connect older adults to cultural events and community organizations

Lake Placid Summary of Key Findings of Focus Groups -

(6 elders - 11/23/09)

Issues Discussed	Potential Solutions
Elder Friendly Community	
	<p>Neighbor helping neighbor. Youth groups helping elders. The Coordinating role to facilitate these activities is important.</p> <ul style="list-style-type: none"> • Coordinator necessary—need an umbrella organization to manage (could be paid—perhaps MC) • LP School has volunteer groups such as Key Club, Builder’s Club, National Honor Society; Math group—regular student volunteer assignments or regular jobs are preferable over ad hoc assignments. • Effectiveness of youth volunteer contributions to elders will depend on Coordination Role. • Enlist Paul Smith’s College and North Country Community College Student Volunteers. • Develop a Select Vendor List willing to undertake projects for older adults in the Community
Women often live alone. It is a good thing to help people stay in their homes for as long as possible because they want to very much. They want to die at home.	
There is a need for education. “I have a friend with terminal cancer. He wants to die in his home. We need education to prevent invasive tests when approaching end of life.”	All agreed that education about these issues is needed.
There are elders living with family in the community but cannot be left	Adult day care services might empower the elder to remain living at home with the

Issues Discussed	Potential Solutions
alone during the day while family members are at work.	support of adult day care services.
Accessibility/Walkability	
It is very difficult to get around in Lake Placid if one needs to use a walker, wheel chair, or motorized chair. The bricks on the sidewalk are very nice but they are very bumpy.	
My husband cannot walk on the bricks. Tourists as well as residents are starting to age.	
Accessibility is a real problem in Lake Placid. One cannot get in to the post office if disabled. The doors are very heavy. The stores do have good access. At the post office, the doors open out. Can't use motorized chair. Then there is a second inner door in the foyer. Ray Brook post office is much better. Need a system to accommodate people with limited mobility in the Lake Placid post office.	
I have a bad back. There is no place to sit and rest my back when I am shopping.	
Transportation	
Lake Placid does not have Transportation availability for older persons. Elders cannot afford cabs. Trolley is not acceptable to be dependable. Lake Placid needs inexpensive transportation that is dependable.	<ul style="list-style-type: none"> • Engage decision-makers about clarifying the purpose of the trolley—is its main purpose to transport tourists to ease Main St. traffic/parking? • Call for a needs and assessment study to maximize transportation efficiencies/services • Test assumptions—is LP maximizing its investment and utility in its transportation assistance; identify obstacles to deploying transportation assistance in different ways. • Engage transportation people to improve transportation assistance to elders • Survey taxi owners as to how to better assist older adults; (consider subsidized taxi service as opposed to running an empty bus); Consider vouchers for elders. • Engage high school to transport older adults to basketball games and other sports and culture events at the school. • Promote cultural engagement of older adults in organization newsletters— offer them transportation to cultural events. • Encourage organizations to promote special discounts and privileges to older adults by offering certain performances at special rates; coordinate and provide transportation.
Transportation is a real problem. There are always transportation problems with patients being discharged from the hospital. They need transportation to dialysis.	

Issues Discussed	Potential Solutions
<p>People need to get to dialysis treatment. It is a matter of life and death.</p>	<ul style="list-style-type: none"> • Look for people who might volunteer with Office for the Aging to serve as medical transportation drivers. Many people do not have funds for transportation. Volunteers driving people to medical appointments must be able to make a commitment. • Pool driving of people who need dialysis treatment.
<p>To promote aging in place so that elders can stay in their own homes, the needs are more than transportation. They need somebody to help them buy food. They can't get out and take the trolley.</p>	<p>Some residents at Greenwood hire people to buy their food for them and deliver it to them. But this is available only to those who can afford it. Tap volunteer energy to make a robust volunteer program. A lot of hands and a lot of communication are needed.</p>
<p>Civic Engagement and Volunteer Opportunities</p>	
<p>So much of ongoing vitality in our community is provided by older adults who have the maturity, experience, and time. There is a lot of appreciation for those very visible and active persons. A lot of the elderly population is invisible—what are the reasons? Why are they not high profile?</p>	<p>The solution is to engage all of the energy that is available from the “semi-invisible.” How do you engage the people who are not engaged? The community understands and appreciates those making visible contributions—but so many people are lonely or isolated.</p>
<p>There is an obvious lack of communication. Need to connect seniors to coordinating needs and what is available. Work within churches.</p>	<ul style="list-style-type: none"> • Whole lot of potential between schools and older persons. Need a central clearing house organization—a coordinator of volunteers. Mercy Care might be able to extend its volunteer coordinating role to other needs elders have in the community. • Essex County OFA once published a volunteer booklet listing all of the volunteer opportunities.
<p>Health and Human Services</p>	
<p>There are regulatory barriers that must be streamlined—several agencies are often serving an elder.</p>	<p>Essex County OFA and others have worked together to streamline some of the regulatory hurdles.</p>
<p>Intergenerational Interaction</p>	
<p>It seems so obvious that it would be beneficial to tap the knowledge of older adults in the community. It is a tragedy that the school does not provide these opportunities. The school would likely be open to intergenerational opportunities if there was coordination.</p>	<p>There is an underlying theme emerging related to all of the top priority issues to aging in place—the need for coordination of all of these community connections. Kids can help older adults learn computer skills. The intergenerational programs should be promoted as mutually beneficial. Intergenerational relationships can foster the understanding that life is precious. It helps children understand they are not immortal. If someone is coordinating it, it would happen.</p> <ul style="list-style-type: none"> • Engage with art groups to get older people to participate • Be inclusive with all generations • On MC's web site, consider featuring an organization with contact information to connect older adults with arts organizations

Issues Discussed	Potential Solutions
	<ul style="list-style-type: none"> • Engage with the Center for the Arts and other organizations to encourage them to sponsor a special night to include older adults—rotate e-mail blasts—host a reception with drinks/snacks/ signage
Housing	
<p>Applications at Greenwood are now from people in their 20s and 30s. They qualify for HUD housing because they meet health or income criteria. There are fewer applications to the Greenwood from people who are older. Elders are staying in their own homes for as long as possible. People are surviving by cutting back—just hanging on with Social Security income or a small pension. Jobs are not available.</p>	<ul style="list-style-type: none"> • Engage building code officers to promote universal design principles. • Explore partnering opportunities related to housing—Housing coordination—Housing Assistance program, MC, and OFA—coordinate to assist elders with making home modifications
<p>We desperately need assisted living in this area. Spouse needs assisted living and is now residing in one in Malone. I used to visit more frequently but my own health issues make it difficult to visit.</p>	<p>Combining campuses in Lake Placid is being explored by AMC. AMC Uihlein will respond to community needs and will explore independent, assisted living, skilled nursing, and retirement housing in its market demand analysis.</p> <ul style="list-style-type: none"> • Increase density in Lake Placid near downtown • Developments more centered in town • Provide shuttles from one dense area to another dense areas • With a shuttle, UMC Uihlein assisted living could be easily serviced, is more livable and can provide connectivity to Main Street.
<p>We need housing where three or four families live in connected housing. One of the four families could be younger.</p>	<ul style="list-style-type: none"> • Engage with Housing Needs Study in the Tri-Lakes—the point of the study is to attract developers. Incorporate older adult housing needs in study.
<p>There is a need for assisted living. We also need housing for young families. Finances are a problem for assisted living. Medicaid does not cover initially. Half of my retirement income goes to support my wife’s care in assisted living facility.</p>	<p>We find that because there is no assisted living, if an elder person who could otherwise live at home needs supervision, they often come to live at AMC Uihlein—there is no other place available. But with support and assistance, they could remain at home, if supervision was available.</p>
<p>No one is available to do home modifications. Lake Placid does not have this capacity. People have to wait a long time to get projects done. No one wants to take on smaller projects. People don’t know where to turn or are being taken advantage of. Income levels are not high.</p>	<ul style="list-style-type: none"> • Start by talking with contractors. Mercy Care Program Committee will be exploring development of a network of organizations and businesses that would be elder-friendly. • One elder said he has used a vendor called “Trouble-shooters,” an existing service who performs small jobs. If a person wants to stay in their home and they are in a wheel chair, they often can’t because they can’t find contractors available to do home modifications. • The ideal is to have one or more knowledgeable people coordinating the needs elders have for home modifications with contractors. Perhaps MC might have a volunteer to serve in such a coordinating role. An organization might develop a list of contractors who would take on these projects. The list would

Issues Discussed	Potential Solutions
	<p>contain vendors who have proof of insurance; workmen’s comp, and have reputations who do not “scam” elders. It would take a volunteer overseeing the project who had some experience in building/real estate, etc. Implementation funding to assist elders who could not afford to make home modifications would be made part of the aging in place action plan.</p> <ul style="list-style-type: none"> • This could relate to a larger scale, state-wide level. There needs to be an education process working with building departments. This might be part of a state-wide housing agenda to promote universal design standard. It was suggested that a demonstration project could be called for in the action plan similar to “This Old House.” The demonstration project would feature before and after photos and demonstrate the benefits of using universal design standards.
<p>Commented that he contracts with someone who lives at the Greenwood where he resides to clean off his car when it snows. This option is only available to people who can afford it.</p>	<p>Need to put people together. Need to have “Command Central.” Volunteer coordinators for certain services could be developed. Volunteer coordinators need support and infrastructure in which to operate.</p>

Key Findings of Lake Placid Interviews

Interviewees	Issues Discussed	Solutions and Ideas Proposed
AMC Uihlein	<ul style="list-style-type: none"> • They have hired Health Dimensions Group, consultants who will conduct a market demand analysis. • AMC Uihlein’s rehab unit has been very successful. They work to help people return to live in the community 	<p>There is a dream to develop intergenerational day services using one of the units at Uihlein. Three clusters would be used in a unit. One cluster would be developed for infant/children day care services, one cluster would be developed for adult day care services, and the cluster in the middle would be used to join together child and adult day care intergenerational activities.</p>
LP Police Department	<ul style="list-style-type: none"> • Primary tools used during the interview were from Transportation and Mobility plus Public Safety sections of Aging in Place score card. • Elder driving safety • In regard to <u>safety issues</u>, the police do visit Greenwood and walk through it on a regular basis. Help is available for anyone, usually transients who need shelter and/or food. 	<p>Recommendation- while side streets were well marked Main Street could use better markings and clearer signs</p> <p>Recommendation Awareness through education would be of value in respect to existing Emergency/Disaster Plans.</p> <p>Consider program modeled after Colonie, NY. Train an officer.</p>
St. Agnes Church	<ul style="list-style-type: none"> • Promote intergenerational connectedness became the focus of our discussion. • Concern was raised regarding the highly regulated State requirements for the establishment of adult day care and child care programs. 	<ul style="list-style-type: none"> • Fr. Morgan saw the intergenerational approach a very positive and attainable goal. • Space at St. Agnes could be made available for joint activities (example- lunch time shared by seniors and students on special occasions.) • About 10 of St. Agnes students have an after school program at the present time. Elders could participate. Background checks may be necessary. • The concept of Greenwood and St. Agnes developing a shared program should be further explored.
Child Care Worker--Head Start Program/St. Eustace Day Care program	<ul style="list-style-type: none"> • Lack of good day care. Day care that was seen as adequate had to leave the LP area as they could not find space to continue when their lease was not renewed. • St Eustace closed their pre school program due to declining enrolment The private or church sponsored pre school programs charge all students the full 	<p>I spoke with the administrative assistant to the superintendent of schools re: universal day care. Although the program has been delayed, the committee will be reconvened shortly to discuss the implementation of this program.</p>

Interviewees	Issues Discussed	Solutions and Ideas Proposed
	<p>rate. There is no sliding scale. Declining enrollment may be tied to less children, but also to the notion that there may be more working mothers who can't arrange for their children to get to preschool from their babysitter's.</p> <ul style="list-style-type: none"> • Head start in LP currently serves 13 children with a three hour program a day. • Currently, they are exploring renovation in their small housing so that they can provide a full day program. Head start also was a victim of not having their lease renewed and only found this small space at the 11th hour. • There is no "chicken soup" program in LP so mothers must send their sick children to be with healthy children or stay home from work and lose wages. 	
St. Eustace Day Care Program	<ul style="list-style-type: none"> • Members of the St. Eustace parish are having on-going conversations about the future of the Day Care program. • The St. Eustace Day Care program had been in existence for over 30 years. • There has been a problem with affording the tuition (especially in the past couple of years). This indicates economic hard times for the customer base. • There appear to be fewer children in the school system at large. • Most of the parents/customers in recent years appear to be working parents. There was a higher proportion of full time moms in the past. • St. Agnes and St. Eustace programs need further exploration. 	
Housing Developer	<p>Discussed a new LP housing development, with single and multi-family units. Developers have long expressed interest in developing a portion of the multi-family units to be utilized as senior housing. They are aware of the lack of this type of housing in the Lake Placid area and believe there is a strong demand for these units.</p> <p>They would be building these to the universal design standards for handicap accessibility. Their vision is to have the units available and accessible to both handicap individuals and seniors.</p> <p>Currently they are in the process of preparing to start on the single family market rate units. Once these are complete and sold they hope to have working capital to move on to the senior dwellings.</p>	

4. Saranac Lake Reports

Saranac Lake Initial Prioritization of Livable Communities Components

Saranac Lake Common Challenges	Saranac Lake Action Steps
1. Health and Human Services	
	<ul style="list-style-type: none"> • Engage with NY Connects to Improve Single Point of Entry – streamline assessment process • Develop better coordination of medical care and social care • Advocate for consolidation of software systems between agencies • Engage with Senior Centers to develop new programming to attract baby boomers—create programs for elders, children, and wellness.
2. Civic Engagement/Volunteer Opportunities	
<ul style="list-style-type: none"> • Elders need to feel needed • Elders are often isolated by winter weather • Regulatory requirements of schools 	<ul style="list-style-type: none"> • Engage with schools to develop and promote intergenerational projects and initiatives • Develop better communication methodologies and strategies to reach out to elders • Foster engagement between elders and students; reach creative transportation solutions using school buses, involve elders in school life—assemblies, concerts, plays, sports events
3. Housing	
<ul style="list-style-type: none"> • Most elders wish to stay at home for as long as possible • Inadequate housing and supports often forces elders into nursing home care • Older homes • Need for transitional housing—from hospital to home or home to hospital—develop alternatives to nursing homes • Regulatory requirements often unintentionally prevent care for elders 	<ul style="list-style-type: none"> • Engage with building code officers and zoning board to encourage Universal Design practices when renovations or new building in the community is undertaken. • Develop transitional housing in the community—Hospice House? • Work with Center for Independent Living to educate people about the NYS Nursing Home Medicaid Waiver Program; combine Medicaid waiver program and services and home modification services provided by Friends of the North Country. Advocate for means-tested home modification funding stream. • Develop mixed use housing facility where ½ of apartments will be designated for those who need home health aides and ½ of apartments are for those living independently. • Promote shared housing opportunities • Work with NYS Office for the Aging to develop a compensated family caregiver program to help elders avoid or delay nursing home placements. • Develop an education and advocacy program to : <ul style="list-style-type: none"> ➤ Ease regulatory requirements and insurance requirements for shared housing ➤ Require building codes to include Universal Design ➤ Engage with NYS Office for the Aging to develop “means-tested” funding strategies to modify existing homes
4. Transportation	
	<ul style="list-style-type: none"> • Engage with Saranac Lake Adult Center, Franklin County, and the Village of Saranac Lake to develop a

Saranac Lake Common Challenges	Saranac Lake Action Steps
<ul style="list-style-type: none"> Inadequate transportation options for elders who do not drive or have someone else to drive them 	<ul style="list-style-type: none"> public education campaign about public transportation resources Engage with Village, Town, and County to assess public transportation options and develop alternatives where needed Establish a “Clearing House Help for Elders” in the Tri-Lakes—a local place to coordinate needs of elders with NY Connects services and others.

Saranac Lake Summary of Focus Groups - Key Findings
(8 Elders – 1/21/10)

Issues Discussed	Solutions Proposed
Transportation	
I have come home on the bus from the hospital.	
There are no taxis available for patients being discharged from the hospital at night. They have to stay until someone picks them up. Cabs unreliable—had to wait for 2 hours one time for a cab to arrive.	Subsidized taxi service for elders.
Difficulty was noted with the bus transportation from Saranac Lake to CVPH in Plattsburgh for those needing and receiving radiation treatments. Elders or others must find their way to Stewart’s in Saranac Lake to catch the bus. Vermontville, for example is 10 – 12 miles from the Center of town. The elder must therefore find transportation to Stewart’s on a daily basis to be able to get the bus to Plattsburgh to get their radiation treatments. One of the elders commented that “if there is not door-to-door service, the bus might as well not be there.”	
Elders in the meeting noted the irony that if a senior riding the senior bus needs help with a wheelchair, they can receive assistance from the driver. But if they are walking on to the bus, the driver can’t give an arm to help get them up on the steps.	Potential action item to be included in the Aging in Place Action Plan that volunteers should be available to ride the senior bus and escort elders on and off, carry packages, etc
There is a terrible problem for many when medical care beyond the Tri-lakes is needed for specialized eye care or other treatments in Plattsburgh or Burlington. There are no transportation options unless one is being driven by a family member or friend, which is very difficult to find sometimes. There is also a problem for people in the Tri-Lakes to get to PT. Tupper Lake residents now have to come to Saranac Lake for Dialysis treatment, although Dialysis treatment is planned for TL. It was pointed out that dialysis is debilitating—the ride is very different—often patients are nauseous. Sometimes people have to use an ambulette—but it is a truck and a rough ride. There are no vouchers for taxi or ambulette service for Chemo and Radiation Treatments. These public transportation needs are very different and are not adequate.	
Housing	
Good apartments are scarce. I would consider shared housing if compatible with the other person(s) in the house.	

Issues Discussed	Solutions Proposed
<p>People in their own homes in Vermontville are often forced to move out of their homes—can't afford the taxes. Things like plowing the driveway and shoveling the roof become problems. Some have tried a barter system to arrange snow plowing or lawn work. The elder let the young man who helped her with chores to use an empty garage to store his vehicle. I also allowed him to store things in my basement. Sometimes you can work out an arrangement.</p>	
<p>I had a recommendation from someone in the community when I needed some repairs done. There needs to be a way to ensure someone is competent. I had a bad experience—I hired someone who wasn't o.k.</p>	<p>Nathan Cox responded that TLCIL contracts with Friends of the North Country to make home renovations/modification. However, this is for low income people only. TLCIL will do an assessment of someone's home to recommend modifications or renovations for anyone for free. It was noted that the weatherization program is out of funds.</p>
<p>Housing affordability is a real issue. It may force some into senior complexes. "A friend of mine needed a new roof and some new plumbing. A septic system was going to cost \$8,000. She had to sell the house. Any large expenditure can cause someone to have to move.</p>	
Civic Engagement and Volunteering	
<p>I volunteer with Hospice and I sing in the choir at St. Bernard's 3 or 4 times a week. This is an important part of my life. There would be a void in my life if I couldn't volunteer. I would have no companionship.</p>	
<p>I volunteer once a week at the adult center. I enjoy it very much. I look forward to it. I am amazed how much it means to me—the senior center is my home away from home.</p>	
Emergency Services	
<p>There is a real challenge with ambulance service. I had a cardiac episode at 9:00 p.m. I needed to go to the ER. I called the ambulance. They could not find my house. The ambulance driver had to go to the Post master and wake him up to find out where I lived. This all happened after the 911 address changes. In Rainbow Lake a man died because the ambulance couldn't find him. The conversion of old addresses to new addresses was never finished—not in Franklin and Essex Counties. There also was a death in Essex County this summer. The dispatcher sent the Lake Placid ambulance to Keene instead of Keene Valley. The irony is that the man lived across the street from the Keene Valley Ambulance squad. Dispatching errors are a problem. It was noted that Volunteer EMTs are not available.</p>	
Elder-Friendly Community	
<p>My husband and I moved to Saranac Lake 25 years ago. We moved here from outside the area. What drew us to Saranac Lake</p>	

Issues Discussed	Solutions Proposed
was the good hospital, a good library, two colleges in the area, a nice clothing store, 2 different supermarkets, and a more vital downtown than there is now. There are no incentives now to go downtown.	

Key Findings of Saranac Lake Interviews

Interviewees	Issues Discussed	Solutions & Ideas Proposed
Arts Organizations	<p>Adirondack Green Circle (website adkgreencircle.org). The organization’s goal is to create a sustainable community.</p> <p>The Winter Carnival is an annual community event enjoyed by all ages.</p> <p>First Night is a recent annual event in Saranac Lake that offers a non-traditional (non-alcoholic) alternative to the celebration of New Year’s Eve. Last year there were 1500 people in attendance</p>	Engage arts and cultural organizations to reach out to seniors to integrate them into their existing programs.
Public Health	<ul style="list-style-type: none"> • Many senior citizens are left without healthcare because <u>Medicare</u> only provides for short term care for acute problems. If the individual qualifies for <u>Medicaid</u>, the care goes on forever. As a result, many seniors “fall through the cracks.” There is a shortage of Home Health Aides. More RNs will be needed as the population in the two counties ages. Recruiting is extremely difficult due to the low wages. Similarly, there is and will be a need for increasing therapy staffing—OT (Occupational Therapy), PT (Physical Therapy). • There is a shortage of primary care physicians in the two counties due to low pay from Medicare, Medicaid, and other insurers. 	<p><u>Office for the Aging</u> agencies provide outreach workers to provide assistance to seniors in their homes, if necessary. Adult Centers provide space for vaccinations, blood pressure clinics, and other services. <u>Meals on Wheels</u> provides food to home-bound seniors, Mercy Care for the Adirondacks provides their Parish Nurse Program and trained volunteers who visit the home, transport seniors for shopping, doctor visits, and many other activities.</p>
Saranac Lake Community Development	<ul style="list-style-type: none"> • There is a real property tax exemption available for seniors. This is in addition to Star. The new comprehensive plan is focusing on accessibility and walkability. This includes a bike and pedestrian master plan. There is a parks and recreation advisory board to the Healthy Infrastructure board. Marilyn Clement is the alternate. A senior is an alternate on this board. The Village recently created a healthy infrastructure advisory board that is charged with making recommendations improving Village walkability and accessibility. • A regional housing assessment is currently underway for the Tri-Lakes. 	<ul style="list-style-type: none"> • Come together collectively to the village with the results of this whole aging in place process and bring an established plan, which will be of value to the Village. • The Village Destination Tourism Plan just came out and a focal point for Saranac Lake is accessibility of tourism including seniors who need accessibility. This plan can be viewed on the Saranac Lake Chamber of Commerce’s web site and focuses on walkability and baby boomer incentives.

Interviewees	Issues Discussed	Solutions & Ideas Proposed
	<ul style="list-style-type: none"> The Counties provide transportation but the Village is starting to look at enhancing public transportation options. 	
Tri-Lakes Center for Independent Living	<ul style="list-style-type: none"> TLCIL provides services to individuals with disabilities in the Tri-Lakes area, including elders. Services provided include, but are not limited to: Advocacy, Information & Referral Services, Peer Counseling, Architectural Barrier (Accessibility) Consultations, Independent Living Skills Training, Benefits Advisement (for Medicare and/or Medicaid), and assistance with finding affordable and/or accessible housing. A lack of affordable and accessible housing, as well as adequate home health care services is among the major gaps in services for elders in the community. Approximately 20 elders utilized our architectural barrier consultation services. Many local businesses and restaurants are not accessible to people with disabilities, thus making the integration of elder individuals into the community more difficult. 	<ul style="list-style-type: none"> Affordable and <i>accessible</i> housing would make it easier for these residents to age in place. Many people, particularly renters, find themselves unable to remain in their homes and/or apartments when their physical health begins to decline and their mobility is impaired. Accessible housing would eliminate this barrier to aging in place. TLCIL provides services to individuals with disabilities regardless of income/assets.
Saranac Village at Will Rogers	<ul style="list-style-type: none"> Will Rogers offers 71 independent living retirement community apartments with: three daily meals, weekly housekeeping and laundry, scheduled transportation to errands, outings, religious services and medical appointments, activities and entertainment and 24-hour staff, snow removal from cars and an emergency response system activated by buttons on the bathroom walls and pendants residents can wear. Will Rogers is not a health care facility, but residents who live here can privately contract with aides from a private agency. Will Rogers offers permanent housing and short-term and seasonal housing. Will Rogers offers many “open to the public” programs that are free or have a donation only cost for seniors. Will Rogers offers a daytime meal and activity program for elders who have full mental clarity with home pick up and drop off and all of our regular services. The program is open for new participants Monday through Friday. 	<ul style="list-style-type: none"> We offer discounted rates for seniors who make under a limit and we reserve 20% of our apartments for people under the income limit. Residents who qualify can also receive other monetary assistance so their total monthly fee is under \$600 per month. Many people don’t understand how low it can cost to live here if you financially qualify. Shopping opportunities for items that people have to go to Plattsburgh to purchase. Because we allow people to hire private services, people can stay here in their home longer with the increasing support they may need. Develop a third party, impartial referral service that was well known to seniors--could help people fill their needs from the many services that already exist. Many people don’t get the services they need because they don’t know where to turn to find solutions to their problems.

5. Tupper Lake Reports

Initial Prioritization of Livable Community Components - Tupper Lake Community Committee

Tupper Lake Common Challenges	Tupper Lake Action Steps
<p>1. <u>A good place to grow up and grow older</u></p> <ul style="list-style-type: none"> • Opportunity for more participation by elders in Adult Center Programs • Declining younger population—less opportunity for intergenerational interaction 	<ul style="list-style-type: none"> • Promote Adult Center Programs to wider audience • Survey senior citizens to explore expanded programs and interests • Identify obstacles to participation • Inventory volunteer needs in community organizations and projects; coordinate and integrate youth and older adults in volunteer projects.
<p>2. <u>Housing</u></p> <ul style="list-style-type: none"> • Maintenance is an obstacle—snow removal, mowing, changing light bulbs, etc. • Contracts take too long to get to the smaller projects • There is no assisted living facility • Affordability • Home modification—county assistance is available for lower income seniors only; many seniors don't know how or where to ask for help 	<ul style="list-style-type: none"> • Establish central clearing house in TL for senior to call when they have needs for maintenance assistance • Develop a coordinated program with the school to seek student community service volunteers to assist seniors • Coordinate with Mercy Care volunteers • Inventory TL contractors. Survey contractor interest to undertake smaller projects for seniors. Develop “vendor” list of businesses who will respond to seniors' needs • Engage with other Tri-Lakes Communities and health care providers to determine feasibility of establishing assisted living facility in the Tri-Lakes • Local Governments to review local public policies to identify senior discount opportunities • Raise awareness about assistance programs through NY CONNECTS—heating assistance and home modification programs. • Raise awareness about fee home modification assessments by Tri-lakes Center for Independent Living; • Establish a volunteer corps to assist elders who do not qualify for county assistance but have home modification needs they cannot afford

Tupper Lake Summary of Key Findings from Focus Groups

(19 elders -, March 2, 2010)

Components Discussed	Key Findings	Ideas/Solutions
A good place to grow up and grow older	<ul style="list-style-type: none"> • Great adult center, opportunities if people want to take advantage • Most businesses are handicap accessible with railings and ramps • Youth in community are following lead of older generations in volunteering—Ski Center Project—intergenerational interaction strong • People leave and come back—hunger for youth and grandchildren 	<ul style="list-style-type: none"> • Promote Adult Center Programs to wider audience; survey senior citizens to explore expanded programs and interests; identify obstacles to participation • Inventory volunteer needs in community organizations and projects; coordinate and integrate youth and older adults in volunteer projects • Promote community-wide intergenerational activities among older adults and youth; raise awareness among existing organizations and institutions to tap knowledge and experience of older adults in the community.
Housing	<ul style="list-style-type: none"> • Maintenance is an obstacle—snow removal, mowing, changing light bulbs • Contractors take too long to get to the smaller projects • Independent senior housing apartments available—no assisted living facility • Affordability is an obstacle—high fuel bills, taxes • Home modification—county assistance is available for lower income seniors only; many seniors don't know how or where to ask for help • Income-based senior discount for sewer tax 	<ul style="list-style-type: none"> • Establish central clearing house in TL for seniors to call when they have needs for maintenance assistance—Develop a coordinated program with the school to seek student community service volunteers to assist seniors; Coordinate with Mercy Care volunteers. • Inventory TL contractors. Survey contractor interests to undertake smaller projects for seniors. Develop “vendor” list of businesses who will respond to seniors’ needs • Engage with other Tri-Lakes Communities and health care providers to determine feasibility of establishing assisted living facility in the Tri-Lakes • Raise awareness about assistance programs through NY Connects—heating assistance programs, etc. • Raise awareness about free home modification assessments by Tri-Lakes Center for Independent Living; establish a volunteer corps to assist elders who do not qualify for county assistance but have home modification needs they cannot afford • Review local public policies to identify senior discount opportunities
Civic Engagement/Volunteering	<ul style="list-style-type: none"> • The Wild Center Museum is a great place to volunteer and for intergenerational activities • Great foster grandparent program provides volunteer opportunities • People will help if asked 	<ul style="list-style-type: none"> • Foster relationship between Wild Center Museum and Adult Center—explore opportunities for engagement • Identify and coordinate volunteers

Components Discussed	Key Findings	Ideas/Solutions
Community is friendly to people of all ages	<ul style="list-style-type: none"> • People connected; friendships are easy; • Shopping is a problem—no stores • Snow, long winters, isolation and loneliness for some • Pride—people want to maintain their independence—hesitate to ask for assistance • Sidewalks are in need of repair in some areas—walking is difficult in places 	<ul style="list-style-type: none"> • Explore opportunities for grocery home delivery to seniors with local grocery store; Adult Center to develop expanded shopping opportunities for items not available in Tupper Lake • Mercy Care Friendship volunteers—keep elders connected to their community • Establish a “senior” weekly or monthly column in the local newspaper—feature businesses, organizations, and agencies who provide assistance to seniors. Work with local newspaper to increase knowledge among seniors about what help is available, who will provide it, and a central clearing house to coordinate services to their needs. • Undertake a community-wide walkability audit
Health and Human Services	Skilled Nursing Facility at AMC Mercy; new health center opening	

Key Findings Tupper Lake Interviews

Persons Interviewed	Issues Discussed	Solutions/Ideas Proposed
Town and Village Officials	There is a sewer discount rate exemption for income qualified older adults over age 65 making under \$15,000. There are elders who qualify who do not apply for the exemption.	
	Tupper Lake has a Foster Grandparent program with the schools. The Village contributes \$5,000 to help fund the Foster Grandparent program.	
	The Adult Center is a huge asset in town. The town owns the Adult Center. They have a calendar of events. There is a lot of participation.	
	There is a food pantry in Tupper Lake which is staffed by volunteers. The space for the food pantry is donated by the Town.	
	TL has senior citizen housing: Don Smith apartments, Ivy Terrace and the Woodlands. There is only outdoor parking at the senior citizen residences—no covered parking. There is a building manager in each building.	
	There are no assisted living facilities in TL.	There is a need for assisted living.
	Transportation—there is a County Bus which will pick up a senior at their home and take them to the adult center. The driver will escort the senior citizen to the bus and escort them back into their home, as well. The bus runs Monday – Friday. There is a Franklin County bus which goes to Malone, Saranac Lake, and Lake Placid.	

	Seniors use it to go shopping.	
	There may be elders in the community who need help to deal with ongoing isolation and loneliness but may be unknown to officials.	Special weekly column featuring senior citizen issues in the Tupper Lake Free Press
	The Village maintains the sidewalks to keep them clear from snow in high pedestrian areas (post office, library, main sidewalks).	If a report of a sidewalk near a senior citizen's home is in need of repair, the Village responds and makes the repair.
	TL is losing families—there is declining school enrollment. There is a higher percentage of older adults. Elders are living longer. There are few jobs for young people.	
	The Park in TL near the lake has an improved walkway to the Park—more accessible, it is nice and level, benches and rest rooms are provided. There is a problem with an over population of geese and is an annoyance to people in the Park playground and elsewhere. Garbage is strewn around the park from sea gulls.	Daily garbage pick up is planned. Various remedies have been proposed and the most acceptable consideration thus far is for a border collie dog to accompany the park warden while he is on duty. There are picnic tables and gazebos.
	Tupper Lake is the recipient of a \$100,000 Smart Growth grant and a \$200,000 Town and Village grant.	
	There are wonderful volunteers in TL. The Ski Slope project enjoyed volunteers of all ages.	
TL Adult Center	Thankful for Mercy Care Friendship Volunteers who assist elders in Tupper Lake.	
	Adult Center assists seniors with paperwork (bills, etc), HEAP applications, Insurance forms, etc.	
	The Adult Center provides home delivered meals, congregate meals at the Adult Center, public transportations, conducts assessments of homebound elders, and provides other services and activities.	
	<p>The Center sponsors:</p> <ul style="list-style-type: none"> • Monthly Bridge Club • Art Group every Wednesday • Exercise group 3 x weekly • Knitting Club • Outings • Holiday events at the Center • Game Night (approximately 30 people attend—participation includes younger seniors 60s – 70s). Just purchased a Wii game. • Movie and popcorn night • Pot luck dinner once per month <p>Arthritic Swim Program—Partnership with Sunmount to use their heated swimming</p>	

	<p>pool. About 25 people participate. For seniors, it costs \$2 per month. (The Adult Center pays for life guards to get them certified). The swim program is conducted every Monday, Wednesday, and Friday. Seniors come from Saranac Lake, Lake Clear and surrounding areas. Pool is beautiful.</p>	
	<p>Transportation—Tupper Lake appears to be meeting many of the transportation needs of its seniors. The bus provides door to door escort service for seniors. It runs five days a week until 3:00 p.m. with the exception of Tuesday and Thursdays when there is no afternoon bus. Adult Center has its own van. Take seniors on outings. Van travels to Farmer’s Market in the summer. Office for the Aging offers \$20 coupons for Farmer’s Market.</p>	
	<p>Changed lunch menu to accommodate younger senior’s desire for more health conscious foods. \$2 donation is requested from those over 60 who eat lunch at the Adult Center. \$6 charge for those under 60.</p>	

6. Aging in Place in the Tri-Lakes - Inventory - March 2010

Section 1 – Franklin County

Franklin County – Tupper Lake and parts of Saranac Lake

Health & Human Services

1. Franklin County C.A.R.E.S. Unit
NY CONNECTS FRANKLIN COUNTY
355 West Main Street (Mailing address)
Malone, NY 12953
Located at: 125 Catherine Street
Malone, NY 12953
518-481-1660, 518-481-1569 or 1-877-410-5753

Point of entry for long term care information and services

- Provides information on long term care services
- Screens, accepts, and makes referrals for services
- Provides follow-up and coordination of services
- Arranges and facilitates case conferences
- Providing information on adult homes, family type home and long term care facilities and the process for admission

Any Franklin County resident of any age is eligible. Referrals accepted from any individual, agency, hospital, physician, family member of friend.

2. Franklin County Office for the Aging
355 West Main Street, Suite 447 (mailing address)
Located at: 125 Catherine Street
Malone, NY 12953-1826
518-481-1526
 - Information and referral
 - Individual assistance in applying for benefits and obtaining services
 - Caregiver support services
 - In-home care
 - Lifeline
 - Nutrition services
 - Transportation, escort, shopping assistance—**Public Transportation systems, designed to meet the needs of elderly and general public with scheduled and demand-response service at Adirondack Adult Center in Tupper Lake and Saranac Adult Center in Saranac Lake. Call 518-483-9004 for transportation for these centers.**
 - Recreation and health promotion
 - Legal services
 - Social security assistance
 - Outreach and Friendly Visiting
 - Health insurance assistance
 - Fuel Assistance (HEAP)
 - Weatherization and home repair

- Senior employment program
- Long term care insurance information
- Expanded in-home services for the Elderly Program (EISEP)
- Family Caregiver Support Program (in-home respite care) – 518-481-1523

3. Franklin County Department of Social Services
 355 West Main Street
 Malone, NY 12953
 518-481-1808 or 1-800-397-8686, ext. 808

Main services affecting older adults:

- Adult Protective Services – 518-481-1833
 - Identifying adults who need assistance or who have no one willing and able to assist them responsibly
 - Providing prompt response and investigation of adults at risk
 - Arranging for appropriate alternative living arrangements as determined necessary
 - Assisting in the local of social services, medical care and other resources in the community
 - Arranging for guardianship, conservatorship, commitment, or protective placement as needed
 - Providing advocacy and assistance in arranging for legal service
 - Providing homemaker and housekeeper/chore service as determined necessary
 - Supervision of all residential services (family-type homes)
- Food stamps – 518-481-1805
- Home Energy Assistance Program (HEAP)
 - Office for the Aging for elder applicants: 481-1527
- Medicaid – 518-481-1799 or 481-1779
- Personal care services (in-home) – 518-481-1856

4. Franklin County Public Health Services
 3 Main Street
 Saranac Lake, NY 12983
 518-891-4471
 or
 355 West Main Street (mailing address)
 Located at 125 Catherine Street
 Malone, NY 12953
 518-481-1710

- Health teaching and preventive care
- Nursing, physical therapy, speech therapy and home health aide services
- Long-term home health care program
- Control of communicable disease
- Health education

5. Adirondack Medical Center
 Lake Colby Drive
 Saranac Lake, NY 12983
 518-891-4141
 Acute care hospital; physician practices, skilled nursing facilities
 Areas served Franklin, Essex, Clinton, St. Lawrence, & Hamilton Counties

6. Adirondack Medical Center – Mercy
114 Wawbeek Avenue
Tupper Lake, NY 12983
518-359-3355

- 24-hour nursing care
- Social services
- Physician
- Activity Programs
- Rehabilitation services
- Dietitian/nutritional services
- Religious services
- Dental, radiology, lab services
- Beauty/barber shop
- Resident pet program

7. Adirondack Medical Center - Uihlein
185 Old Military Road
Lake Placid, NY 12946
518-523-2464

- 24 hour nursing care
- Social services
- Physician
- Dietitian/Nutrition services
- Physical Therapy, Occupational Therapy
- Activities program
- Religious services
- Dental, Podiatry
- Beauty/barber shop
- 1 short-term care bed for respite (30 day maximum, 42 days per year)
- Those in need of 24 hour skilled nursing care

8. High Peaks Hospice & Palliative Care, Inc.
309 County Route 47, Ste. 3
PO Box 840
Saranac Lake, NY 12983-0840
518-891-0606 or 1-877-324-1686

- Home-based health care for patients and families facing a life threatening illness.
- Nursing care
- Medications
- Social work
- Home health aides
- Short-term hospitalization
- Follow-up bereavement counseling
- Equipment/supplies
- Counselors
- Chaplains

9. North Country Home Services

- 25 Church Street
Saranac Lake, NY 12983
518-891-2641

- 36 High Street
Tupper Lake, NY 12983
518-359-3336

- Home health aide personnel
- Housekeeping aides
- Personal care aides
- Skilled nursing
- Night-time companions (10-12 hours)
- 24 hour answering service
- 24 hour on-call staff
- Life-line services—personal response service that insures that older adults living at home can get quick emergency assistance whenever it is needed—24 hours a day, 365 days a year.

10. Saranac Lake Voluntary Health Association, Inc.

75 Main Street, 2nd Floor
Saranac Lake, NY 12983
518-891-0910

- Visiting Nurse Service: Medication administration, tub baths, blood pressure checks, foot care, general home health care, nursing assessment
- Sickroom equipment loan service: Wheelchairs, walkers, quad canes, canes, crutches
- Dental Program through School
- Financial Assistance with hearing aide purchase

Service Area: Village of Saranac Lake and outlying areas.

11. North Star Behavioral Health Services

- 17 Main Street
Saranac Lake, NY 12983
518-891-2467

- Mercy Health Care Building
1st Floor, Wawbeek Avenue
Tupper Lake, NY 12986
518-359-1001 (Monday only)

- Psychiatric evaluation and treatment for adults/children. Individual, group, couple, and family therapy.

12. St. Joseph's Rehabilitation Center

159 Glenwood Drive
PO Box 470
Saranac Lake, NY 12983
518-891-3950

- Quality inpatient/outpatient/residential and related alcohol & substance abuse treatment services.

13. Pathfinders Counseling and Psychological Service
 40 Rockland Street
 Malone, NY 12953
 518-483-0958
14. The Healing Woods Counseling Center
 Adirondack Social Work Services, PC
 206 Coreys Road
 Tupper Lake, NY 12986
 518-359-2623
 Family, individual and couple counseling; alcohol and drug services
15. North Country Association for the Visually Impaired
 PO Box 1338
 2693 Main Street, 3rd Floor
 Lake Placid, NY 12946-1710
 518-523-1950
- Low vision aides & services
 - Vocational training
 - Orientation and mobility instruction
 - Rehabilitation services for the elderly
 - Social services
 - Rehabilitation teaching
 - Provides services to legally blind residents (all ages) in Franklin and Essex Counties.
16. NYS Office of Children and Family Services Commission for the Blind
 PO Box 33
 Saranac Lake, NY 12983
 518-891-7518 or 866-871-3000
- Assistance for individuals with age-related blindness
 - Assistance with adjustment to blindness
 - Low vision services (evaluation for magnifiers)
 - Independent homemaker skill training and adaptive equipment
 - Funding for medical diagnostic
 - Vocational guidance and counseling
 - Orientation and mobility training
 - Employment assistance
17. Alzheimer's Disease Assistance Center (Approximately one hour travel time from Tri-Lakes)
 State University of New York, College at Plattsburgh
 101 Broad Street, Sibley Hall, Room 227
 Plattsburgh, NY 12901
 518-564 3377
 Areas served: Franklin, Essex, Clinton, Hamilton & Warren Counties
18. Tri-Lakes Home Medical Equipment
 69 Broadway
 Saranac Lake, NY 12983
 518-891-1777 or 1-800-333-9488

19. Sunmount Developmental Center
2445 State Route 30
Tupper lake, NY 12986
518-359-4125

- Three small supervised residences for developmentally disabled seniors are located in Tupper Lake. A special seniors Day Habilitation Service is associated with this residential program. Must have a qualifying developmental disability.
- Senior Companion Program—assists professional staff in carrying out special training programs designed to teach disabled individuals important skills, which will help them become more self-sufficient. Senior companions participate in the program on an average of 20 hours a week. They receive a tax-free stipend, paid vacation and other leave benefits.

Support Groups

20. ADK Share (a cancer support group)
Adirondack Medical Center
Saranac Lake, NY 12983
518-891-2955

21. Al-Anon
(For relatives and friends of alcoholics)
518-891-5353 or 518-483-6566

22. Alcoholics Anonymous (AA)
518-891-5353 or 518-483-6566
1-800-281-1190

23. Alzheimers/Memory Impairment Support Groups
518-564-3377
1-800-388-0199

24. Crisis Center of Clinton, Essex, and Franklin County
Call for information – 518-483-8211
800-342-5767

25. LIFT
Widowed Support Group
518-891-4133

26. Women’s Support Group
(Adult females/past/present victims of domestic violence)
Saranac Lake, NY
518-891-2612

Transportation

Franklin County Public Transportation
355 Main Street
Malone, NY 12953
518-481-1598

Anyone can ride—advertises affordable rates.

County bus service is available for shopping, employment, medical, educational and miscellaneous needs.

In the southern part of the county bus services **(518-359-9070)** provided within **Tupper Lake, Saranac Lake, and Lake Placid** with three round trips a day, seven days a week. Shuttle service within the Tupper Lake community is available only Monday through Friday, 8:00 a.m. – 4:00 p.m. **For demand service, unscheduled rides within the service area, call 483-9000** (Monday – Friday 7:30 a.m. – 3:30 p.m. one business day prior to your ride to schedule this service.

Housing

1. Town of Harrietstown Housing Authority
Lake Flower Apartments
14 Kiwassa Road, Suite 1
Saranac Lake, NY 12983-2373
518-891-3050
 - Provide rental assistance to lower income families
 - Utilize existing housing units
 - Meet HUD’s Housing Quality Standards
 - Make available decent, safe, and sanitary living units
 - 80 units

2. Tri-Lakes Center for Independent Living
43 Broadway, Suite 1
Saranac Lake, NY 12983
518-891-5295
info@tlcil.org
 - Provides computer skills training, limited transportation, and referral and advocacy services to people of all ages who have a disability or are effected in some way by a disability.
 - Information and Referral
 - Advocacy
 - Peer Counseling
 - Independent Living Skills Training

3. Belmont Management
Woodlands Apts., 15 Woodlands Drive
Tupper Lake, NY
518-359-8434
Services/Units: 18 Units, chairlift available

4. Dechantel Apartments
60 Church Street
Saranac Lake, NY
518-891-4004
Services/Units: 90 Studio; 40 one bedroom

5. Don Smith Apartments
15 Church Street

Tupper Lake, NY
518-359-2500
Services/Units: 50 one bedroom apartments

6. Over Look Apartments
Bloomingdale, NY
518-891-2194
Services/Units: 30

7. Saranac Village at Will Rogers Retirement Community
78 Will Rogers Drive, Suite 400
Saranac Lake, NY 12983
518-891-7117
Services/Units: 75 – Studio, One-bedroom, Two bedroom, Suite

8. Tupper Lake Housing Authority
38 Boyer Avenue
Tupper Lake, NY
518-359-9220
Services/ Units: 32 – 1 bedroom; 32 – 2 bedrooms; 20 – 3 bedrooms; 6 – 4 bedrooms

9. National Grid Corporation- Serves: Franklin and Essex Counties

300 Erie Boulevard West
Syracuse, NY 13202
1-800-932-0301

- Bill paying programs & services
- Consumer publications
- Consumer advocate services
- Energy management information
- Consumer protections

10. New York State Electric & Gas - Services Franklin and Essex Counties

4125 Route 22
Plattsburgh, NY 12901-9546
1-800-438-6229, ext 356 or 1-800-356-4384

- Senior newsletter
- Balanced billing
- Third party notification
- Large print bills
- Power partner program
- Special payment arrangements
- Saving opportunities for Seniors
- Project Share – help w/emergency energy needs

11. Verizon
Community Affairs
158 State Street, Room 1000C
Albany, NY 12207

518-347-8057

- Reduced rate Telephone Services (800) 555-5500
- Products and services for people with disabilities (800) 974-6006—Voice & TTY
- Special protections for seniors – 800-555-5000

12. Village of Saranac Lake Office of Community Development
3 Main Street, Suite 5
Saranac Lake, NY 12983
518-891-0490

- Grants/deferred payment loans are provided to low/medium income households to assist in rehabilitation of residential and rental properties.
- Referrals provided to owners of residential properties seeking alternative financing for home repairs/improvements.
- Based on HUD specified income guidelines and target areas

13. Lakeside House, Inc.
33 Riverside Drive
Saranac Lake, NY 12983
518-891-0815

24-hour supervised community residence program for psychiatrically disabled adults. Psychiatric diagnosis, no severe physical problems, 18 years of age and older, capable of self-care.

Senior/Adult Services

1. Adult Centers:

- a. Congregate and home delivered meals
- b. Transportation
- c. Information & referral services
- d. Assistance in completing benefit applications
- e. Shopping assistance
- f. Case assistance
- g. Recreation
- h. Volunteer opportunities
- i. Outreach & friendly visiting
- j. Case management
- k. Health promotion services

a. Adirondack Adult Center
PO Box 1198
Tupper Lake, NY 12986
518-359-9070

b. Saranac Lake Adult Center
PO Box 864
136 Broadway
Saranac Lake, NY 12983
518-891-2980

2. Brighton Senior Citizens

c/o Ruth Hoyt
371 Keese's Mills Road
Paul Smiths, NY 12970
518-327-3274

3. Lake Clear Senior Citizens
c/o Noni Webb
80 County Rte. 46
Saranac Lake, NY 12983

4. Town of Franklin 55+ Club
c/o Roland LaPier
637 Goldsmith Road
Vermontville, NY 12989

5. Food pantries in Tupper Lake and Saranac Lake:

- Interfaith Food Pantry
 - 15 Bloomingdale Avenue
Saranac Lake, NY
518-891-0141
- Tupper Lake Food Pantry
179 Demars Blvd.
Tupper Lake, NY
518-359-3080 or 518-359-7911
- Vermontville Food Pantry
Town of Franklin Town Hall
518-891-1619

6. Association of Senior Citizens in Franklin County (Approximately one hour travel time from Tupper Lake and Saranac Lake)

PO Box 288
Malone, NY 12953
518-481-1524

Programs and Services:

- Subcontractor for Franklin County Office for the Aging to provide services to older persons at local area adult centers and in the homes of frail elderly
- Advocacy group for senior citizens
- Recreation and educational programs
- Membership – individual and supportive memberships
- Quarterly senior newspaper

7. Mercy Care for the Adirondacks

185 Old Military Road
Lake Placid, NY 12946
518-523-5580

Programs/Services:

- Sponsored by the Sisters of Mercy to relieve isolation and loneliness of elders living independently

- Friendly home visits
- Outings together
- Assistance with correspondence
- Transportation to appointments/events
- Recreational activities
- Assistance with shopping
- Spiritual Care
- Health education/counseling
- Advocacy

Services are offered to any older adult in need at no charge.

8. Clinton-Essex-Franklin Library System

33 Oak Street
 Plattsburgh, NY 12901-2810
 518-563-5190, Ext. 10

Areas served: Clinton, Essex, and Franklin Counties

Programs and Services:

- NYS Talking Book and Braille Library Service
- Radio receivers for blind
- Bookmobile service
- Interlibrary loan
- Bi-Folkal Kits (Multimedia kits for older Adults)
- Audio books
- Large print books
- Videos and DVDs

All services free to Franklin County residents

9. Literacy Volunteers

132 River Street
 Saranac Lake, NY 12983
 518-891-5567

Programs/Services:

- One-to-one tutoring for adults who wish to learn to read/write or improve their skills.

10. Catholic Charities of Franklin County

57 Rennie Street
 PO Box 896
 Malone, NY 12953
 518-483-1460

Programs and services for older adults:

- Counseling of individual couples, families, children
- Marriage counseling
- Foster Grandparent Program

Payment options: Payment on sliding fee scale

11. ComLinks/A Community Action Partnership

343 West Main Street

Malone, NY 12953
518-483-1261

- Community development
- Neighborhood revitalization
- Microenterprise program
- Family development
- Nutrition education
- Energy assistance services
- Weatherization
- Domestic violence
- Cooperative gleaning
- Emergency food pantry
- Extra helpings program

12. Cornell Cooperative Extension of Franklin County
355 West Main Street
Malone, NY 12953
518-483-7403

Programs and services of interest to older adults:

- Horticulture
- Natural resources
- Consumer energy programs
- Programs for small business and community development

Franklin County Veteran's Services

1. Franklin County Veteran's Service Agency
355 West Main Street
Malone, NY 12953
518-481-1540 or 1-800-397-8686

- Medical care at VA Medical Centers on both inpatient and outpatient basis
- Service-connected disability compensation
- Non-service connected disability pension
- Indemnity and dependency compensation for widows/children of honorably discharged vets
- Former prisoner of War Veterans special medical care at VA facilities
- Veterans real property tax exemptions
- Free access passes for federal and NYS parks for certain disabled vets
- Adaptive housing and personal conveyances for certain disabled vets
- VA Home Loan Guaranty Program
- Pharmacy service for eligible vets
- Assists veterans and their dependents in filling claims.

Employment Resources for Older Adults

1. Malone OneWorkSource
158 Finney Blvd.

Malone, NY 12953
518-481-5755

Programs/Services:

- Assessment & eligibility for a variety of employment & training programs
- Employment counseling
- Resume preparation and job seeking/job keeping skills
- Information on training programs for demand occupations
- Sponsors On-the-Job training
- Work experience and employability programs
- Job placement and supportive services
- Remedial education and life skills program

Serves Franklin County resident 55 years of age and older, U.S. citizen. **Staff members visit the southern end (Tupper Lake, Saranac Lake) regularly; or, when necessary, a scheduled, individual appointment can be arranged.**

CIVIC ENGAGEMENT/VOLUNTEERISM

1. Mercy Care for the Adirondacks, a mission sponsored by the Sisters of Mercy
185 Old Military Road
Lake Placid, NY 12946
518-523-5580

- Provides Friendship Volunteers and Parish Nurses to provide companionship, health education, a helping hand to lonely or isolated elders, serve as their advocates, and help them stay connected to their communities.
- Friendly home visits
- Outings together
- Assistance with correspondence
- Transportation to appointments/events
- Recreational activities
- Assistance with shopping
- Spiritual Care

2. Retired and Senior Volunteer Program (RSVP)
355 West Main Street
Located at 125 Catherine Street
Malone, NY 12953
518-481-1528 or 1-877-410-5753

- Respite
- Food pantries
- Historical Museum
- High Peaks Hospice
- Literacy Program
- Hospitals
- Interpretive Center
- Nursing Homes
- Adult Centers
- Wild Center
- Hospice of the North Country

- Meals on Wheels
- Medical Transportation
- Nutrition Program
- Chamber of Commerce
- Friendly Visiting

Action Plan Service Analysis - March 2010

Section 2 – Essex County

Essex County - Lake Placid and parts of Saranac Lake

Health & Human Services

1. NY Connects

NY Connects is a program available in Essex County to assist individuals with accessing long term care services. NY Connects supports the consumer's choice and independence, while also ensuring that they are accessing the most cost-effective service that can be provided.

NY Connects provides a single access point to all individuals, regardless of age, income, or payment source with assistance with exploring long term care options in our area. This program will ensure that clients, caregivers, or professionals are linked to the most appropriate service(s) for that individual.

In Essex County, our NY Connects program is based out of the Office for the Aging. To assist potential consumers and caregivers, NY Connects has updated its current resource directory of services. This directory can be accessed on-line at: <https://www.peerplace.com/nyportal/>. In addition, information and assistance can be provided by our NY Connects staff by calling 518-873-3815.

1. Adirondack Medical Center

Lake Colby Drive 2233 St. Route 86
Saranac Lake, NY 12983
Tel: 518-891-4141

2. Adirondack Medical Center – Uihlein

185 Old Military Road
Lake Placid, NY 12946
Tel: 518-523-2464
Tel: 518-523-8690

Adirondack Medical Center/Uihlein is a 156 Bed Skilled Nursing and Rehabilitation Center that provides both short and long term care. Our goal is to provide excellent health care close to home.

3. Adirondack Medical Center – Mercy

114 Wawbeek Avenue
Tupper Lake, NY 12986
Tel: 518-359-3355

Adirondack Medical Center - Mercy is a 60 bed skilled nursing and rehabilitation center and provides both short term and long term care. Our goal is to provide excellent healthcare close to home.

4. American Association of Retired Persons (AARP)

Health Insurance Information - 1-800-523-5800
Membership Information - 1-800-424-3410 or 888-687-2277
Programs designed for individuals 50 years or older.

5. Adirondack Community Action Program (ACAP) - Aging Services

7572 Court Street, P.O. Box 848
Elizabethtown, NY 12932
Tel: 518-873-3207 or 1-877-873-2979

Nutrition Program for the Elderly - Provides nutritious meals, social activities, and information and referral for seniors 60 and over at 12 sites throughout the county. Provides home delivered meals and a daily contact to homebound elderly.

6. Adult Protective Services

Essex County Department of Social Services
P.O. Box 217
Elizabethtown, NY 12932
Tel: 518-873-3553
Fax: 518-873-3794

Services for people 18+ with physical and/or mental impairments, unable to protect themselves or their resources, cannot provide for their basic needs and have no one willing and able to help in a responsible manner.

7. Alzheimer's Disease Assistance Center

227 Sibley Hall - SUNY Plattsburgh
Plattsburgh, NY 12901 Tel: 518-564-3377

Assessment and evaluation of Alzheimer's Disease and other dementia's; Caregiver Support Groups; Resource Center; Third Age Adult Day Care Center; Education and Training; Mood and Memory Clinic. Support Groups in Elizabethtown, Saranac Lake, and Ticonderoga

8. Behavioral Health Services North, Inc.

63 Broad Street
Plattsburgh, NY 12901
Tel: 518-561-8000 or 518-564-4625

Treatment programs for emotionally disturbed children and adults; Elder Care, Respite and Caregiver Support Services; Domestic Violence Services

9. Coordinated Care Unit

Essex County Department of Social Services
P.O. Box 217
Elizabethtown, NY 12901
Tel: 518-873-3550

Services to individuals with any home care related needs. Individuals must have Medicaid

10. Essex County Mental Health Services

7513 Court Street
Elizabethtown, NY 12932
Tel: 518-873-3670

Individual and group therapy sessions for adults, children, and adolescents experiencing mental health problems.

11. Essex County Nursing Service

Essex County Public Health Department
P.O. Box 217
Elizabethtown, NY 12932
Tel: 518-873-3500

Individual and family assessments; in-home nursing; physical, occupational therapy; home health aide. Referral must come from a physician.

12. Essex County Office for the Aging

132 Water Street
P.O. Box 217
Elizabethtown, NY 12932
Tel: 518-873-3695 or 1-877-464-1637

Resource Center; Nutrition information and referrals for a registered dietician; Home delivered meals; Health Insurance counseling; Long term care insurance education; Case Management; HEAP; Assistance with completing applications for Medicaid, Food Stamps, Social Security, etc.; Medical

Transportation; Caregiver Support; Home Repair; Volunteering opportunities; Employment; Friendly visiting, Income Tax Assistance; Ombudsmen; Telephone Discount Program; Telephone Reassurance Program.

13. Food Stamp Program/HEAP

P.O. Box 217
Elizabethtown, NY 12932
Tel: 518-873-3440

Food Stamps for income eligible individuals and families and assistance for households in need of heating assistance.

14. High Peaks Hospice & Palliative Care, Inc.

P.O. Box 840
Saranac Lake, NY 12983
Tel: 518-891-9631 or 800-639-8045

Nursing, spiritual, psychological, emotional, physical care for terminally ill individuals and their families. Durable medical equipment and medications that are related to the diagnosis are provided

15. Medicaid Program

Essex County Department of Social Services
P.O. Box 217
Elizabethtown, NY 12932
Tel: 518-873-3440

Assistance program for low-income individuals/families that are unable to pay for medical care

16. National Alliance on Mental Illness of Champlain Valley (NAMI)

14 Healey Avenue, Suite D
Plattsburgh, NY 12901
Tel: 518-561-2685

Support for individuals, family and friends with mental illness

17. North Country Association for the Visually Impaired

22 US Oval – Suite B-15
Plattsburgh, NY 12903
Tel: 518-563-2330

Free services available in Essex, Clinton, Franklin and St. Lawrence Counties

18. North Country Center for Independence

102 Sharron Avenue
Plattsburgh, NY 12901
Tel: 518-563-9058

Information & Referral, peer counseling, advocacy, independent living skills training, Radio Reading Service, accessibility consultation, assistive technology, benefits advisement, employment services, and long term care information.

19. North Country Home Services

25 Church Street
Saranac Lake, NY 12981
Tel: (800)-273-2641

18 Montcalm Street, Suite 1 Ticonderoga, NY 12883 Tel: (800)-639-1533

A home health care agency serving Northern NY. Services provided include home health care, lifeline, skilled nursing, and chore/companion services.

20. North Star Industries

Petrova Avenue
Saranac Lake, NY 12983
Tel: 518-891-2590

Work center programs, community residences and intermediate care facilities for developmentally disabled and handicapped adults over 18 years of age

21. Nutrition Program for the Elderly

Court Street
Elizabethtown, NY 12932
Tel: 518-873-3690

Home delivered meals; nutrition education, transportation to meal sites

Nutrition Sites:

Lake Placid – 518-523-2730
St. Armand – 518-891-3189
Wilmington – 518-946-2271
Greenwood – 518-523-2462

22. SUNY Plattsburgh Speech & Hearing Center

Rugar Street - Sibley Hall, Room 224
Plattsburgh, NY 12901
Tel: 518-564-2170

Hearing, Speech, voice and language evaluation, diagnosis and treatment services; hearing aide evaluation and dispensing

Housing

1. ACAP – Weatherization and Energy Services

7572 Court Street
P.O. Box 848
Elizabethtown, NY 12932
Tel: 518-873-3207

Weatherization Assistance Program

2. ACAP – Community Services Program

7572 Court Street
P.O. Box 848
Elizabethtown, NY 12932
Tel: 518-873-3207

Emergency Needs - Assists families in crisis/emergency situations to access services to meet their needs. Provides emergency food, utilities and homeless assistance when other funding is not available.

3. Home Energy Assistance Program (HEAP)

Department of Social Services
P.O. Box 217
Elizabethtown, NY 12932

Tel: 518-873-3440

Program for individuals or households in need of heating assistance that meet full income guidelines

4. Bonnie View Terrace Apartments

Bonnie View Terrace
Wilmington, NY 12997
Tel: 518-946-7966

5. De Chantel Apartments

60 Church Street
Saranac Lake, NY 12983
Tel: 518-891-4004

6. Greenwood

89 Greenwood Street
Lake Placid, NY 12946
Tel: 518-523-2462

Independent living apartments for seniors 62 or older or for people with disabilities

7. Housing Assistance Program of Essex County (HAPEC)

103 Hand Avenue - P.O. Box 157
Elizabethtown, NY 12932
Tel: 518-873-3691

Rent subsidy program; Home Repair; Home Buying Assistance

8. Lake Flower Apartments

14 Kiwassa Road – Suite 1
Saranac Lake, NY 12983
Tel: 518-891-3050
Senior Housing

9. The Overlook

45 Main Street
Bloomingdale, NY 12913
Tel: 518-891-0536 or 518-891-2194
Housing for Senior Citizen or handicapped person

10. Saranac Village at Will Rogers

78 Will Rogers Drive
Saranac Lake, NY 12983
Tel: 518-891-7117
The historic retirement community of the Adirondacks offering independent living for those 55 and older

11. USDA Rural Development

Greenwich, NY
Tel: 518-692-9940 ext. 4
Loans for home ownership, home repair.

Civic Engagement & Volunteerism

1. Mercy Care for the Adirondacks

185 Old Military Road
Lake Placid, NY 12946
Tel: 518-523-5580

Mercy Care for the Adirondacks is a renewed mission of the Sisters of Mercy in the Adirondacks. Its mission is to extend love, friendship, and assistance including spiritual care to elders and infirm persons living in their own homes or other communities for independent living. It serves elders through a Friendship Volunteer Program, a Parish Nurse Program, and an Education and Advocacy Program.

2. North Country Conflict Resolution Services

Town of North Elba Town Hall ,2693 Main Street, Suite 204
Lake Placid, NY 12946
Tel: 518-523-0102

Email- Sudi@rurallawcenter.org

Mediation, Conciliation, Arbitration, Conflict Resolution, and Workshops

3. Retired Senior Volunteer Program (RSVP)

38 Park Place – Suite 3
Port Henry, NY 12974
Tel: 518-546-3565

Volunteer Opportunities for people 55 years and older which benefits people of all ages in Essex County

4. Sunmount DDSO - Administrative Offices

2445 State Route 30
Tupper Lake, NY 12986
Tel: 518-359-3311

Part time jobs for low income seniors working with children with special needs

Transportation

1. Essex County Office for the Aging

P.O. Box 217
Elizabethtown, NY 12932
Tel: 518-873-3695
Tel: 1-877-464-1637

Transportation for those over 60 to and from medical-related appointments

2. Essex County CHAMP Bus

Essex County Planning Department
Tel: 518-873-3687
Tel: 518-873-3686
Tel: 518-873-3689

Bus transportation from Ticonderoga to Elizabethtown; Bus transportation from Keene to Plattsburgh every other Tuesday; Bus Transportation from Keene to Elizabethtown every Friday

3. Lavigne Taxi Service

Adirondack St. ,PO Box 24, Saranac Lake, NY 12983
Tel: 518-891-2444

4. Medicaid Transport – Essex County DSS

P.O. Box 217
Elizabethtown, NY 12932
Tel: 518-873-3411

Transportation or reimbursement for Medicaid covered health related appointments for Medicaid eligible persons who have no other means of transportation. All trips and reimbursement must be prior approved.

5. Mercy Care for the Adirondacks

185 Old Military Road
Lake Placid, NY 12932
Tel: 518-523-5580

Transportation provided by volunteers to elders living independently in the Tri-Lakes area.

Adult Centers – Senior Services

1. NYS Division of Veteran’s Affairs – Essex County Office

P.O. Box 217
Elizabethtown, NY 12932
Tel: 518-873-3488

Assistance to veterans and their families regarding benefits that they may be eligible for.

2. Veteran’s Administration Hospital

113 Holland Avenue
Albany, NY 12208
Tel: 518-626-5000
Tel: 1-888-838-7697

Comprehensive range of medical, surgical, psychiatric, geriatric and ambulatory care services to veterans

3. Veterans Clinic

Elizabethtown Community Hospital
Park Street
Elizabethtown, NY 12932
Tel: 518-873-3295

Outpatient health clinic

4. Social Security Administration

7942 Route 9
Plattsburgh, NY 12901
Tel: 518-562-5421
Tel: 1-800-772-1213

Retirement benefits to eligible candidates 62 years and older, or disabled