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Executive Summary

This proposal concentrates on the Corporation for National and Community Service Primary Focus Area of Healthy Futures. At least 334 RSVP volunteers will be supported, or recruited and actively serve in rural Carroll County, New Hampshire as noted in Opportunity # NH 02 listed in the NOFA for the 2015 RSVP competition.

North Conway Community Center (NCCC), sponsor of Carroll County RSVP, is submitting this application. The agency is a 501 C (3) established in July 1949. The NCCC philosophy is a non-profit organization committed to its partnership with the community. It seeks to provide a broad range of quality and progressive recreation opportunities for children and adults and to sponsor other community groups with like goals. The NCCC has sponsored the CCRSVP program since 1978, and will house the RSVP in their building on Main Street in North Conway; the NCCC is in the process of greatly enlarging their facilities.

The NCCC is requesting an annual amount of \$49,301.00 from the CNCS. Monies will be raised through local government, a regional grant from Carroll County, various grants such as Catholic Bishops Fund for \$5,000.00, Skrungloo Farm grant for \$2,000.00, Cogswell Benevolent Fund for \$10,000, Goldberg Foundation grant for \$4,000.00, New Hampshire Charitable Foundation grant for \$2,000.00, Granite United Way for \$3,500.00 and Memorial Hospital grant for \$500.00 plus in-kind and individual donations and fund raising events.

A. 30% of unduplicated RSVP volunteers will be placed in work plans in the Primary Focus Area of Healthy Futures. B. At least 70% or 234 volunteers will directly serve older adults and adults with disabilities to Age in Place. CCRSVP volunteers will provide emergency food security, Meals on Wheels deliveries, food pantries, medical transportation and companionship. These programs will assist qualified clients to remain in their homes with the same or improved quality of life for as long as possible as defined by CNCS in the NOFA. An emphasis will be made to serve more veterans as volunteers and clients. At the end of the three-year grant, the anticipated output for Aging in Place is that a minimum of 530 qualified clients is served. The anticipated outcome is that at least 155 clients will report having, as defined by CNCS, increased social ties with or perceived social support from CCRSVP volunteers offering effective help during times of need. Less than 30% or 100 RSVP volunteers will meet Community Priorities as defined by CNCS through approximately fifteen to twenty stations including two hospitals, four libraries, American Red Cross blood drives, Salvation Army, day care, nursing homes and Chambers of Commerce, etc.

This proposal supports RSVP volunteer service in alignment with CNCS strategic plan.

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Strengthening Communities

This project focuses on a cluster of strategies aligned with CNCS Primary Focus Area Healthy Futures: Aging in Place as established by the Service to America Act and incorporated into the CNCS Strategic Plan for 2012-2015. These strategies all depend on volunteers to deliver services that are geared to helping meet specific needs of older adults and adults with disabilities to age in place, as identified by the Older Americans Act, the National Council on Aging, and the New Hampshire State Plan on Aging 2012-2015. The plan states Goal 1: Enable seniors to remain in their own homes with high quality of life for as long as possible through the provision of home and community-based services, including supports from family care-givers. Objective 1 includes home-delivered meals and community dining, community elder support, transportation, family caregiver supports, and health promotion. For the purposes of this grant, our strategies are social integration and health promotion through group activities: RSVP Bone Builders exercise classes, Meals on Wheels, emergency food from local pantries, and Transportation. These are evidence-based approaches but the evidence focuses on direct, concrete outcomes access to health providers, increase in bone density, nutritional intake etc. However, the National Social Life, Health and Aging Project (NSHAP) to study the connections between social support and healthy aging are doing more work, for example. Previous research on the subject (2009 paper by Erin York Cornwell and Linda J. Waite, published by Oxford University on behalf of the Gerontology Society of America: K. Ollonqvist et al in a 2008 article in the International Journal of Mental Health Promotion, and many others) has shown definite links between social integration and physical health, and perceived isolation and mental health, as well as a relationship between the two. CNCS has identified transportation, home delivered meals, emergency food from food pantries, and companionship as strategies for RSVP to address.

Meals on Wheels and Medical Transportation are coordinated by Gibson Senior Center, RSVP and several other centers in out-lying parts of the county. The local emergency food pantries are located mostly in small churches of less than 200 people. Monthly meetings are held with the coordinators of the food pantries, and issues are discussed: the number of families assisted, the number of meals, the ages of the clients, number of clients served, etc. The RSVP director collects the data from each emergency food pantry and creates a data- base. Bone Builders is run by RSVP throughout our service area by trained volunteers. In fact, without the volunteers, these programs would not happen. For the purpose of this CNCS grant, RSVP will measure/report on CNCS identified outcome: the number of adults (age 65+) and adults with disabilities who report having increased social ties/perceived social support relationships with other people and/or the belief these people offer (or have offered) effective

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help during times of need.

Before providing details on the community needs and volunteer service activities, this writer would like to paint an overall picture of our rural service area in the Northeast, using United States Census 2000 and 2010 data sets (depending on most recent Census Bureau analysis available).

New Hampshire is the fifth-smallest state, and ninth least populated. The state covers a total of 9,304 square miles; our service area of Carroll County covers 992 square miles just over 10% of the states land mass. Much of Carroll County is in the White Mountain National Forest. With 221 towns and 13 small cities, New Hampshire's population is 1,323,459 people, averaging 147 people per square mile, 22.6% of whom are age 65 and up. 38% of New Hampshire residents live in non-metro counties compared to 16% nationally living in rural areas, which poses challenges to delivering services. The percentage of people aged 65+ is 14.7% for New Hampshire, while; that of people aged 65+ in Carroll County is 22.6%. The lack of racial or ethnic diversity is illustrated by the fact that 94.4% are white in New Hampshire. In Carroll County the percentage of white residents is 97.4%. There is a small population of Indians, Vietnamese and Chinese, who are basically small business owners. The majority of minorities in New Hampshire are young children living in two small cities, Manchester and Nashua, and those living in the Hanover/Lebanon areas which host an Ivy League college, Dartmouth, and a large medical center plus many technology businesses. The states median income is \$64,664, with 8.4% of elders living below the poverty level. The median household income in Carroll County is \$50,865 with 10.3% of those over 65 living below the poverty level.

Our proposed goals for this new grant are: 70% or 234 of the volunteers to be engaged in outcome-based activities in Healthy Futures: Aging in Place, with no more than 30% or 100 of the other volunteers involved in Community Priorities. Following are the descriptions of the five service activities leading to national service measures, with the associated statement of community need and service activity. Afterwards is an explanation of the outputs and outcomes plus the details of how data will be tracked, collected, and managed.

COMMUNITY NEED:

The first service activity to be discussed is food delivery.

States that have invested in their community-based service networks, particularly home-delivered meals programs, have proportionally fewer low-care nursing home residents (based on 2009 data). In New Hampshire, if the proportion of people aged 65+ receiving meals was increased by one per cent equal to about 564 meals per day, about eleven people would not be in a nursing home, resulting

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in an estimated \$1,950 savings in Medicaid reimbursement per day, based on 2009 Medicaid per diem rate of \$195. For every \$25 a state spends on home-delivered meals programs per year for people over age 65, the population of low-care nursing home residents goes down a percentage point. (Thomas K. S. and Mor. V. 2012) The relationship between Older Americans Act title III State Expenditures and Prevalence of Low-Care Nursing Home Residents. Health Services Research.doi:10.1111/1475-6773.12015. The Older Americans Act defines Home delivered meals as meals for those unable to physically or financially prepare meals for themselves or to attend congregate meals. Without home delivered meals, elders could quickly fall into a state of self-neglect. Note: In Carroll County, the Meals on Wheels programs have no paid staff available to serve or deliver the meals unless it is an emergency. Neither congregate nor Meals on Wheels could be provided without the help of volunteers. DATA: The University of New Hampshire Carsey Institutes 2010 Issue Brief #21 Whats for Dinner? reports that 33% of the states households are food insecure in 2009. The Household Food Security report of 2006, conducted by the USDA's Economic Research Service cites the national average for low and very low food security among elders living alone to be 6%. The National Meals on Wheels Association's report "Senior Hunger in America" based on data from 2001-2007 shows a rate of insecurity for people over the age of 60 to be 1.5% for North Dakota and 12.3% for Mississippi as compared to 3.01% for New Hampshire. Yet, the University of New Hampshire's Carsey Institute has found that there are pockets of serious poverty throughout the state. Rural or low-density population towns are even more widespread. (Household food insecurity in the United States in 2012, Alisha Coleman-Jensen, Mark Nord, and Anita Singh). A minority of American households experience food insecurity at times during the year, meaning that their access to adequate food is limited by a lack of money and other resources. Food and nutrition assistance programs of the United States Department of Agriculture (USDA) increase food security by providing low-income households access to food, healthy diet, and nutritional education.

Meals on Wheels SERVICE ACTIVITY and IMPUTS: Screened and trained Meals on Wheels volunteers will get their assignments from the senior center/station staff. Meals on Wheels volunteers often serve in teams with a runner and a driver; many are spouses or friends who intentionally sought out a volunteer opportunity they could perform together. The volunteers use their own vehicles and are eligible to receive mileage assistance through the Gibson Center for the travel involved in making food eligible to receive mileage assistance through the Gibson Center for travel involved in making food deliveries. RSVP assists volunteers with mileage to and from their sites. Volunteers perform

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there according to certain food safety standards, and safety procedures should clients not answer the door.

COMMUNITY NEED: Food Distribution

For the purpose of this CNCS grant, RSVP will measure/report on the CNCS identified outcome: the number of adults (age 65+) and adults with disabilities who report food insecurities in their households. The emergency food assistance is not meant to designate routine help in meeting a family's needs. The family may experience the emergency personally, such as loss of income, needed repairs to their home, etc. Each senior should only be counted the first time they are served. The dosage of emergency meals will be based on two weeks meals times three meals a day or 42 meals.

DATA: USDA also monitors the extent and severity of food insecurity in the United States households through an annual, nationally representative survey sponsored by USDA's Economic Research Service. Reliable monitoring of food security contributes to the effective operations of the Federal programs as well as private food assistance programs aimed at reducing food insecurity. In 2012 the study found that 85.5% of U.S. households were food secure throughout the year. The remaining 14.5% were food insecure in the severe rate- described as very low food security. In the more severe range of food insecurity, the food intake of some households' members was reduced and normal eating patterns were disrupted at times during the year due to limited resources. Rates of food insecurity were substantially higher than the national average for households with incomes near or below the Federal poverty line. Food insecurity was more common in large cities and rural areas than in suburban areas and exurban areas around large cities. Typically, households classified as having very low food security experienced the condition in seven months of the year, for a few days in each of those months. The data for the Economic Research Service food security reports come from an annual survey conducted by the United States Census Bureau. The Carsey Institute of the University of New Hampshire states that 22.6% of the population was 65 or older in 2011 in Carroll County, while in the State of New Hampshire it was 14.7% and 13.3% in the United States. Carroll County has 10.3% of persons below poverty level, while the state of New Hampshire is 8.4%. In Carroll County 31.1% of people aged 65+ are dealing with a disability.

COMMUNITY NEED:

Medical transportation is one of the specific needs of older adults and adults with disabilities to age in

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place, as identified by the Older Americans Act and the National Council on Aging, and locally the New Hampshire State Plan of Aging 2012-2015. Screened and trained volunteers will get their assignments normally by telephone, from RSVP. SERVICE ACTIVITY and INPUTS: The station requesting assistance for the client, or the client him/herself will call RSVP and request a ride to a doctor's appointment or a physical therapy session, and the RSVP receptionist will then check the list of volunteer drivers to see who might be available to transport the client. The driver is called, asked if they are available that day, and then the client is called back giving the details of who the driver will be and what arrangement will be made to fulfill the necessary trip. The drivers will use their own vehicles to transport clients to the destination according to RSVP's rules and procedures, with a focus on customer safety and service, maintaining documentation, etc. Mileage assistance will be available through Department of Transportation, Disabled American Veterans or CCRSVP. The remainder of the Healthy Futures volunteers will serve through the signature program that our RSVP project runs Bone Builders exercise programs.

The COMMUNITY NEED:

Addressing social integration through group activities focused on discussion and exercise currently through RSVP Bone Builders.

DATA:

Eleven percent of elders aged 65+ in New Hampshire, with 28% aged 65+ in Carroll County, live alone. Social isolation is a risk factor among older adults, especially women. Isolation often contributes to problem behaviors, issues with alcohol, depression, poor health, and increased use of health services, abuse or neglect by others, or self-neglect, and may even accelerate the aging process. (Interventions to reduce social isolation amongst older people, R. Findaly Aging & Society. 2003) Three elements identified as basic to diminishing feeling of loneliness: opportunities to compare their own past with other people's; sense of control over some aspect of their environment; and someone to confide in. (Chronic Illness: Impact & Intervention. Chapter 5 Social Isolation, Luskin and Nicholson. 2006)

The COMMUNITY NEED:

RSVP project runs Bone Builder addressing social integration through group activities focused on

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discussion and exercise currently through RSVP Bone Builders. Note that participants have expressed interest in having other kinds of classes. These types of classes may center on exercise but also have the important function of bringing together older adults on a regularly scheduled and ongoing basis, at no cost to them, to meet around a shared interest. In this case maintaining or increasing their bone density, balance, information, and confidence in order to decrease falls and fractures. Rationale: Over the three years that RSVP has run this program in Carroll County, participants mention time and again in response to the open-ended question in our annual client survey: What do you like most about the class? making new friends, camaraderie, socializing, the group, doing something good for my health while having fun, the support of the class leaders etc. Additionally, falls and fractures reduce an elder's quality of life, and result in billions of dollars of health care and expenditures.

Data: According to the National Osteoporosis Foundation Bone Health and Osteoporosis reported by the Surgeon General, 2004, plus other statistics on their website: approximately 58% of New Hampshire adults (including 100,500 in Congressional District 2 which includes Carroll County) over fifty years of age have osteoporosis or low bone mass. One in three women over the age of 65, and one in two over the age of 75, will fracture her hip during her lifetime. Osteoporosis is the main cause of all fractures in older adults, and can be prevented and improved through adequate and appropriate weight-bearing exercises. The Center for Disease Control and Prevention (CDC) report: Complications associated with hip fractures result in about 300,000 hospitalizations, and 50,000 deaths a year in the United States. 20% of individuals with a hip fracture end up in a nursing home within the first year. The annual cost of treating the disease, including extended nursing home care in advanced cases, is estimated at \$18 billion. In 2007, the Center for Disease Control reports 81% of fall deaths were among people aged 65 and older.

Fear of injury and falling often contributes to elders, and especially people with osteoporosis, becoming inactive or housebound, resulting in isolation from friends and family, a loss of independence, and increased morbidity. (British Medical Journal and Royal Center for Late Life Function at Boston University). In our county, the state reimburses the county nursing home an average of \$6,000 per month for Medicare clients. If even 1 % of the participants who attend Bone Builders at least twelve times per quarter, are prevented from breaking a bone, requiring one month of nursing home care, there is a cost savings of approximately \$22,500. Both of our Bone Builders sites are donated, one in a town hall, and one in a local church, which donate the space in-kind.

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BONE BUILDERS SERVICE ACTIVITIES and INPUTS: Screened and trained volunteers use a structured, professionally designed curriculum and co-lead classes twice a week. Class sites have been developed by RSVP in collaboration with the host site (with whom we sign a Memorandum of Understanding) and other community partners. RSVP provides the weights, which are funded with grants. Volunteer class leaders also have the opportunity to attend annual refreshers.

How are outputs and outcomes measured? Collected? Managed? All our Healthy Futures: Aging in Place outputs and outcomes will be measured, collected, and managed as follows based on our current systems and improvement to be made with this grant: a) stations collect client data that tracks unduplicated clients and their contact information, ages, dates and units of service using logs. This information is shared with RSVP either as data already analyzed or data sets requested by RSVP and processed by the station using specific queries, or in the case of RSVP's signature program, Bone Builders raw data from the logs, entered into our custom-designed client and volunteer databases. RSVP staff designs queries to generate data sets for reports for CNCS, Carroll County, and other funders. For the purpose of this grant, the output we will be measuring is the number of older adults (defined by CNCS as aged 65+, though the Older Americans Act defines it as age (60) receiving the "minimum dosage" of volunteer services as defined in this narrative and the related work plans.

This writer could find no research to guide on developing a "minimum dosage" as required by CNCS; therefore, we have developed our own. Meals on Wheels 30 meals: Medical Transportation: 5 rides one person might have rides to physical therapy twice or three times a week, or dialysis for six visits while family is on vacation. Yet, both people may feel an increase in social support. For exercise classes: an average of twice a week over ten weeks the minimum for someone to increase balance. Emergency Food Pantry 75 is the number of emergency meals to be provided. FYI: some funders require us to report on units of service. These units are defined as follows: Meals on Wheels number of meals. Medical Transportation: number of rides. Bone Builders number of times a participant attends class. Food Pantry number of meals. Annually, we send confidential surveys to clients, with a self-addressed envelope. The surveys are used to collect information regarding customer service as well as self-reporting regarding various outcomes. Traditionally, in keeping with the National Meals on Wheels Association, the National Council on Aging, and the New Hampshire State Coalition of Senior Services, the Meals on Wheels program measures the daily nutritional intake of the client on the days they received services. Traditionally, the Medical Transportation surveys ask clients if the rides helped them to maintain or increase their access to community services doctors appointments,

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physical therapy, etc.

Since 2011 when the RSVP Bone Builders project began running, we have tracked and measured and reported the following as outcomes in our RSVP grant, using the aforementioned annual surveys and client self-reporting: in the last year, have you had a fall or a fracture? Our outcomes were based on the percentage of respondents answering Bone Builders in the negative. We also ask many other questions including whether the client has learned of new services? Saved money? Felt an improvement in their balance? In the participant's well being? Emergency Food Pantries - The number of emergency meals provided to assist the senior or disabled person with nutrition food products. The annual survey is conducted to collect data regarding customer service and to determine if the client met with satisfaction from the food pantry. With the new grant, we will be working with colleagues from other RSVPs to develop a survey tool, with input from professionals as well as using CNCS developed resources. We will be measuring the outcome CNCS has identified: the number of clients who report having increased social ties/perceived social support relationships with other people and/or the belief these people will offer (or have offered) effective help during times of need.

VETERANS: For the purposes of this grant, we will be more deliberate in designing our processes and forms to better track the numbers of older veterans and those with disabilities who we serve as clients meeting the definitions of clients for Aging in Place. Carroll County RSVP will continue to provide medical transportation to veterans, taking them to Manchester, New Hampshire or White River Jct., Vermont to Veterans Hospitals, also the local clinic in the Conway area. We will work with the Wounded Warrior program, and offer assistance through Meals on Wheels. We will also be doing more research for our signature programs to reach veterans who need help, have limited mobility in the community, or are otherwise isolated. RSVP staff and volunteers will be reaching out more deliberately to clients who are veterans, as well as Bone Builders participants who may have veterans in their families, to see if folks are interested in the other Aging in Place services provided by RSVP volunteers.

Recruitment and Development

Our project focuses on recruiting, placing and supporting volunteers meeting needs under the Corporation for National and Community Service's (CNCS) Primary Focus Area of Healthy Futures/Aging in Place. The four service activities are: food delivery, transportation, emergency food and companionship. Food delivery is through Meals on Wheels, and Emergency Food Pantries, Medical Transportation is provided through various stations, senior centers in Carroll County, area

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churches, and our RSVP office in North Conway. Companionship is provided by RSVP Bone Builders classes provided at various locations in the county. All these services are provided for no fee, for adults aged 65 and over or adults with disabilities, in accordance with the Older Americans Act rules.

All our Aging in Place volunteer service activities have aspects in common making them HIGH QUALITY VOLUNTEER ASSIGNMENTS: a) they are based on community needs identified by CNCS, as well as the State of New Hampshire, and other grantors' assessments, b) they are replicated from other long-standing local, regional, or national evidence based MODELS THAT HAVE BENEFITTED FROM CONTINUOUS IMPROVEMENT OVER TIME; c) the volunteers have positive opportunities to share their experience, abilities, and skills. We have two Bone Builders classes with ten leaders who have taken the class training. In addition to addressing social connectedness and isolation to improve physical and mental health, these activities also help IMPROVE COMMUNITIES by helping elders and adults with disabilities to remain in their own towns, homes, and networks, as well as continue to be part of their local economy. Meals on Wheels volunteers help to decrease their clients' social isolation and improve their nutritional intake often 75% to 100% of their daily intake per the client surveys. The volunteers also provide a safety check since many of their clients live alone and may not see anyone else for days at a time. The volunteers who serve at the seven area emergency food pantries: Bartlett/Jackson, Freedom, Vaughan Community Service, Conway Brown Church, Madison Church, the White Mountain Community Health Center and the Community Food Center help to insure that families and individuals receive the nutritious foodstuffs they need to maintain good health. Many of their clients are seniors or people with disabilities.

Twenty- six volunteer drivers in our Medical Transportation Program serve a vital role in helping 522 seniors and adults with disabilities to receive the medical treatments they need in order to remain self-sufficient and independent. The medical drivers drove 38,397 miles to take clients to doctors' appointments, outpatient surgeries, physical therapy treatments, etc. from here in Carroll County to Laconia, Dover, Dartmouth/Hitchcock, Manchester, New Hampshire, to Boston, Massachusetts, to Portland, Westbrook and Scarborough, Maine, to White River Junction in Vermont, and beyond. Bone Builders exercise classes not only help increase bone density and balance with the goal of decreasing falls and fractures, but also provide free, regular scheduled opportunities and space for social integration through people coming together around a common issue.

In helping others to age in place there are many opportunities for VOLUNTEERS TO IMPROVE

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THEMSELVES THROUGH VOLUNTEERING through coordination and leadership roles (as well as our recognition and retention activities described later in this narrative). Through our signature program, Bone Builders, volunteers also have opportunities to participate in volunteer meetings to give feedback and input, reflection, recognition; plus enhancing their own lives. RSVP also shares the outcomes-based work plans, results, and annual surveys with the volunteers. With the new grant we plan to include volunteers in program evaluation and continuous improvement regarding serving volunteers and clients, as well as recommending and providing in service training. RSVP volunteers also improve their own lives in other ways. According to research quoted in Richard Russell's 2004 article in The Journal of Men's Studies, Social Networks Among Elderly Men Caregivers' retired men continue to value the types of social roles they had at work, and depending on the type of work they did, find activities that accomplish visible, concrete results. Meals on Wheels volunteers often serve in teams, many times spouses or friends, providing them an opportunity to build on their own personal relationships through service. The Emergency Food Pantries also have many retired men in their service crews, following the same line of thinking I can work with friends or spouses and make a difference in my community at the same time. Bone Builders volunteers benefit from the exercises they lead as much as the clients do; plus, they also benefit from social integration and the information/education discussions they conduct/facilitate for the group. Medical Transportation volunteers have told us that helping others in poor health or other challenging circumstances helps them get their minds off their own problems for awhile, and makes them feel good that they can help others in a needed way.

TO BE HIGHLY EFFECTIVE IN ADDRESSING COMMUNITY NEEDS: all outcomes based volunteers are; 1) interviewed, 2) enrolled, 3) screened, 4) placed, 5) oriented, 6) trained; then they are 7) supervised and supported, 8) recognized and retained on an on-going basis to build their rapport with staff, encourage good risk management behaviors, build their identification with RSVP, and to increase retention. RSVP staff interview each prospective volunteer individually, spending 1 ½ to two hours in person discussing the individual's skills, schedules, interests, transportation, and motivations in an attempt to make the very best match possible for the volunteer and station. All enrollments are done in person. No enrollments are done by mail. Afterward, before referring/placing the volunteer, RSVP staff research all possible matches relevant to the volunteer, and work with the person to choose the best fit for her/himself and the station. We avoid placing volunteers into assignments because "staff needs the help." We place volunteers in activities through eligible stations at which we have a current Memoranda of Understanding -not-for-profits, proprietary healthcare organizations, and our

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own signature programs, Bone Builders and Medical Transportation, all in accordance with the RSVP Operations Handbook. The focus is always on making the best fit for the volunteer and the station. If the volunteer is not a good fit for our CNCS outcomes-based or community priority work plans, we will not enroll them but will give them suggestions of other possibilities they can pursue on their own. We require volunteers serving through our signature programs (Medical Transportation and RSVP Bone Builders) to be screened by having a criminal record check through the state's elder abuse and sex offender registries, because the volunteers are working with vulnerable populations, without direct on-site supervision. All our volunteer drivers have a Department of Motor Vehicles record check and a Criminal Record Release from the State of New Hampshire as part of good risk management in regards to "mission creep" because sometimes volunteers 'unofficially' expand their activities and transport clients.

All Aging in Place volunteers work both autonomously in the community, and as part of a larger team. As part of their one-to-one two - hour program orientation with RSVP or station staff- the volunteers review their service descriptions and confidentiality statements, in order to clarify everyone's expectations and as part of good risk management. They also review program procedures, agency policies regarding gifts, confidentiality, reporting of abuse and neglect, etc. Real life situations, strategies, and lessons learned are also discussed. For example, what to do if clients insist on repeatedly calling volunteer drivers at home, rather than calling our office; what if a Meals on Wheels client does not answer the door; or what if a chemo client vomits in the car while being transported by a volunteer. Bone Builders volunteers are required to attend a six-hour training prior to leading classes. The training focuses on utilizing the professionally designed, evidence-based curriculum, as well as agency policies and program procedures. A Master Trainer volunteer led the following trainings (she is a Grafton and Sullivan Counties volunteer): on April 6, 2014 we held training in Conway for 12 new class leader volunteers; on March 5, 2013 we co-hosted a joint RSVP Bone Builders training for 18 of our project's new volunteer class leaders, plus 10 new volunteer class leaders from RSVP projects serving Coos County, New Hampshire. In 2012, two Bone Builders leaders attended a refresher course with the Grafton and Sullivan Counties volunteers. The first training was held at the North Conway Community Center on August 5, 2011, with five volunteers in attendance. Volunteers are provided ongoing support from station staff and RSVP coordinators via phone, e-mail, face-to-face contact, plus meetings that include staff and peers.

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COMMUNITY SERVED: Recruitment runs the gamut, including word-of-mouth by satisfied volunteers, press releases, public presentations to groups (churches, fraternal, retiree associations, etc.). If we attract people under the RSVP target of age 55, we give them tips and refer them to agencies without enrolling them. Currently, a total of 86, or 26% of our active volunteers are Boomers, born between 1946 and 1958. If one were to solely look for critical mass of diversity by race or ethnic groups in our programs, one would find it lacking. Diversity is always a challenge for our state, as it is a very rural and predominately white population. There are several volunteers who have either physical or cognitive disabilities who are CCRSVP volunteers. Several clients of Northern Human Services agency for the developmentally disabled are volunteers at the Dinner Bell congregate meals site each week. Others can be found at the Gibson Senior Center and other sites. One factor is that the comparatively small numbers (approximately 2%) of different ethnic backgrounds are small business owners, and they are busy operating their businesses and are not volunteering. We are successful in involving men (76 male volunteers) in our Meals on Wheels, and Medical Transportation program, as well as at the area Emergency Food Pantries. This past year or so, we have increased our outreach to veterans organizations in our area.

CCRSVP has always had an active Advisory Council. The members are recruited throughout Carroll County in the following locations: Center Conway, Center Ossipee, Conway, Effingham, Freedom, Jackson, North Conway and Tamworth.

The Advisory Council meets nine times a year. They provide assistance in expanding existing Advisory Council membership and add new ones as needs warrant. They are key to help planning and implementing recognition events. The members assist in procuring sponsorship and raffle prizes for the annual recognition and fund-raising events. The public relations committee creates articles of interest regarding RSVP activities. The Advisory Council members review and support the mission of the program. They act as Ambassadors for CCRSVP, make us aware of events that are happening in the community, suggest ways the program can gain increased visibility and recognition. At this year's annual recognition four long-term advisory council members were honored, as they were retiring from the council. Currently there are thirteen members on the council, and the plan is to recruit three or four new community people for the advisory council. On the current council there are four veterans and five spouses of veterans.

Our efforts regarding volunteer RECOGNITION AND RETENTION include endeavoring to maintain a culture of positive customer service focusing on the personal relationships between staff and volunteers. Contact is in person, by telephone and e-mail follow up. Day-to day recognition

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includes small things: verbal acknowledgement-simple thank you's, remembering/addressing people by name, calling and asking how their volunteering is going, and inviting folks to write an article for our newsletter.

In 2013 all Bone Builders projects in the State of New Hampshire were recognized with the Governor's Council on Health & Fitness Award. We also successfully nominate volunteers for local, statewide, and national awards. The Vaughan Award for Community Volunteers (State of New Hampshire Award) is given annually and often it is an RSVP volunteer who is the recipient from Carroll County-the list is impressive: the following are/have been CCRSVP volunteers: 1996 Jane Garland, 1997 William & Carolyn Brown, 1999 Rose Patchin, 2001 Helen Carroll, 2002 Roger Thurrell, 2003 Barbara & Henry Anderson, 2004 Ellie & Emery Stokes, 2005 Dennis & Joan Pidherny, 2006 Dr. Miles Waltz, 2007 Beverly Person, 2008 Ed & Carol Westervelt, 2009 Barbara Hoyt, 2010 Margrit Dutta, 2011 Bob Therrien & Carolyn Brown, and in 2012 Stanley Solomon.

Mileage reimbursement is currently available to RSVP volunteers in both the Medical Transportation and Meals on Wheels programs. Last year, we assisted 47 RSVP volunteers traveling 52,441 miles to and from their homes for Meals on Wheels deliveries, and our Medical Transportation volunteers completed 1,020 trips driving 38,397 miles taking clients to doctors appointments, physical therapy sessions, out-patient surgeries, and a host of other medical-related appointments. The volunteers are reimbursed at .35 cents per mile and we have a cap on the amount or number of miles 200 per month.

Our program holds a yearly recognition day at Camp Calumet in Freedom, New Hampshire. Recognition is provided through corsages, and certificates presented by our District One Executive Councilor Joseph Kenney. Advisory Council member David Holt, a professional photographer, captured group photos and individual photos of those who wished to have them taken. A delicious turkey dinner was served and live music was offered. This year's theme was "Proud to be an American"; our veterans led the Pledge of Allegiance and spoke of their service, and Advisory Council member Cecilia Crapser spoke about serving in the WAVES from 1942-1945.

Twelve Bone Builders volunteers attended the April 16, 2014 refresher including training, recognition, a shared meal, and an opportunity to share challenges and best practices, plus giving RSVP staff input and feedback, and networking. We worked in collaboration with Grafton County RSVP, which provided a Master Trainer for the session.

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Program Management

WE DEVELOP AND OVERSEE VOLUNTEER STATIONS TO ENSURE COMPLIANCE WITH RSVP REGULATIONS. With the announcement of the Serve America Act in 2009, and the new requirement for RSVP Competition, our RSVP has narrowed its focus primarily to volunteer activities in alignment with CNCS's Primary Focus Area of Healthy Futures: Aging in Place. Additionally, our efforts center on activities that wouldn't happen without us. That is to say, our signature programs Medical Transportation and Bone Builders. We will also focus more on recruiting volunteer medical drivers, including veterans, to assign to local senior centers and other service providers, as well as recruiting and supporting more Meals on Wheels volunteers to serve our very rural area. These services rely heavily on RSVP volunteers, as well as staff coordination, to help elders and adults with disabilities stay independent in their communities for as long as possible.

TO MANAGE VOLUNTEER STATIONS TO ASSURE COMPLIANCE with RSVP regulations, all of our MEMORANDA OF UNDERSTANDING (MOU) are updated every three years or sooner if there is a change in the RSVP contact or the station contact. If we are awarded the grant in February, we will update all of our MOUs in order to explain the new RSVP and among other things, discuss and clarify our new expectations and remind them of old expectations that may have fallen by the wayside handicapped accessibility and safety issues, for example. We will also be more deliberate about assuring compliance with RSVP regulations through the MOU process and in making yearly visits observing the volunteers as well as meeting with their supervisors. Additionally, we will be diligent about discussing prohibited activities with volunteers during their initial interview so that we do not enroll folks who are not a good fit with these restrictions. With our signature programs, we already review compliance issues that relate to volunteers, the activities they can and cannot do including religious proselytizing, lobbying and other political activities during their official RSVP assignments. We will be updating the volunteer service descriptions, to include this issue, and encourage our stations to do so as well or at least cover them during a volunteer's orientation, as we do. Currently, we communicate with our volunteer stations through site visits, phone and e-mail contact, plus similar follow-up with volunteers. We also work with our Advisory Council to identify and implement new strategies in station management.

In the past two years, we have only developed one new station "Ending 68 Hours of Hunger". This is a program that was originally established in the southern part of New Hampshire by someone who was concerned about children from families who might not have sufficient nutritious food to feed

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their children over the weekend. The children received breakfast and lunch at school every day, but what happens between dismissal on Friday and the Monday morning breakfast program? The program is being run at the Conway Elementary School and services children at Conway Elementary and Pine Tree Elementary. Backpacks are filled with nutritious food, peanut butter, cereal, packaged drinks, granola bars, etc. that the children can use themselves over the weekend if there isn't sufficient nutritious food available at home. Volunteers organize the foodstuffs, collect the backpacks at the school, fill them, and return them to the schools Friday afternoon for distribution before the children go home for the weekend. The backpacks are then collected again on Monday from the children and the process is repeated. A local businessman has offered his warehouse for the project free of charge. We will only add new stations that will allow us to expand volunteer opportunities that provide services aligned with our work plans in the Primary Focus Area of Healthy Futures: Aging in Place. Because we have been positioning our volunteer activities for RSVP competition since 2009, we will need to "Graduate" several stations whose volunteer activities no longer meet the requirements of Aging in Place: the Material Girls quilting group which makes quilts for the Wounded Warrior project, nursing homes, domestic violence shelter, veterans home, Camp Sunshine for terminally ill children and their families and the Linus Project; the Ladies Guild of the Freedom Church which makes baby quilts for all new-born babies at Memorial Hospital; the Carriage Shoppe, which is a thrift store that is a fundraising effort for the Gibson Center for Senior Services; the local Humane Society branch-helping to care for dogs and cats; the Greater Ossipee Chamber of Commerce Information Booth which gives information and materials to tourists visiting the area; Angels and Elves which is a charitable organization which has donors and sponsors who buy, wrap and distribute Christmas gifts to needy children in the area. All of these groups will most assuredly continue their efforts without us. Currently, the director is identifying other groups to see what options there might be. Should this grant be awarded to our project in February, we will use the rest of our current grant cycle to present options to the volunteers. We will continue to offer a variety of volunteer opportunities through activities in the Community Priorities work plan that will include day care, nursing homes, libraries, etc. Volunteers will have the option to also serve in two rural hospitals and senior centers, doing administrative support as well as direct service with the clients. If the volunteer is not a good fit for these activities or those under Aging in Place, we have been referring them elsewhere without enrolling them in our project.

OUR ORGANIZATION TRACK RECORD REGARDING AGING IN PLACE is illustrated through

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several points. While longevity should never be the only fact to build a case, it is relevant. Our RSVP project was one of the original eleven pilot projects in 1971; North Country RSVP was the only rural project. Today, our RSVP covers all of Carroll County. Meals on Wheels and Medical Transportation provided by volunteers have been long-standing activities through RSVP. We have been running our signature programs since the late 1980's. We initiated RSVP Bone Builders in our project, with mentoring and assistance from the RSVP serving Grafton and Sullivan counties. In turn, we have supported other RSVP directors in New Hampshire to start RSVP Bone Builders groups. Since the Government Performance Results Act (GPRA) of 1994, when CNCS initiated Programming for Impact (PFI), our project has developed and used work plans not only to apply to CNCS, but also for other grants. We use the work plans as indicated to identify what we will do, how and why, plus inform us on successes, challenges, and opportunities for continuous improvement.

Since 2011 we have annually surveyed RSVP Bone Builders participants using a confidential, written survey mailed to clients. The surveys are focused not only on customer service issues, but also on gathering statistical and anecdotal information used to improve our services and demonstrate the impact on clients, and, thereby, communities. Last year's OUTPUTS and OUTCOMES/SURVEY RESULTS; RSVP Bone Builders: 53 people attended class a total of 180 sessions. 71.5% reported having a terrific overall Bone Builders experience; 23.5% reported above average experience. None of the respondents reported falling. If awarded the RSVP Competition grant in February we will proceed to survey all volunteers and all remaining stations, using instruments adapted from the Corporations Knowledge Network and replicated from successful projects run by our peers. The surveys will not only seek feedback on the support received from RSVP, but also solicit ideas on how to recruit new volunteers and do outreach to potential clients including veterans, in both cases to improve our alignment with our chosen National Performance Measure: Aging in Place.

When enrolling RSVP volunteers, our initial conversation, before even making an appointment, includes information about RSVP's focus on mobilizing volunteers aged 55 and better. Our form also includes birth date for this reason along with data tracking reasons to eliminate confusion between multiple Jane and John Smiths, so to speak. We also check ID's on all volunteers we enroll, for the purpose of background checks. Compliance with RSVP federal regulations as outlined in the RSVP Operations Handbook as well as the Office of Management & Budget (OMB) is assured through various processes and systems: our Advisory Council, in addition to oversight by the RSVP Program

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Director who also reviews these points, as well as throughout the year if issues arise. Our program director also works closely with peers in our state, and throughout the northeast, to identify and solve issues around compliance, plus programming. Our longevity has also given us hands-on-experience: with the advent of CNCS's Programming for Impact measures in 1994, the RSVP coordinator/office manager is involved with working with our computer consultant. The consultant knows the software, the coordinator/office manager knows the data; consequently, the coordinator/office manager has been trained in creating queries to get specific results, and how to identify new types of data tracking needed and work with the consultant to tweak the database. Like many RSVPs, we use Volunteer Reporter. Staff enters the data from the paper originals of volunteer enrollments, MOUs, volunteer hours, volunteer mileage request, and RSVP Bone Builders attendance. All the aforementioned originals are kept in locked file cabinets. The RSVP project director and staff use the database to gather data for a variety of grant proposals and reports, including Carroll County and various grant proposals. We, also make conscientious efforts to collect anecdotal information directly from volunteers, agency staff, and community participants in order to tell the rest of the story to our sponsor's board and our Advisory Council as well as the public and potential clients and volunteers through our newsletter, press releases, and presentation to various groups.

Organizational Capability

NORTH CONWAY COMMUNITY CENTER has sponsored RSVP since 1978. For 36 years, NCCC, a 501© 3, has promoted, reinforced and provided programs which support and enhance the health, well-being, self-esteem, dignity and independence of older adults and adults with disabilities throughout Carroll County. Our RSVP offers educational forums, congregate and Meals on Wheels delivery, transportation, links with Service Link, and more. The 2010 census determined that Carroll County has a population of 47,567 22.6% of whom are aged 65 and up, and 10.3 % of whom live below poverty level. Last year, the agency served almost half of all older county residents, from several senior center locations and RSVP. These services are provided in accordance with the Older Americans Act rules; there are no fees charged, including no membership fees. Over \$ 27,000 was expended to administer and provide these services. A sampling of CCRSVP's contractual commitments: Corporation for National & Community Service (CNCS); New Hampshire Department of Transportation; Carroll County Commission; a local hospital; United Way. As examples of successful grant applications to support CCRSVP in 2013: NH Catholic Bishop's Fund- we requested \$5,000 to help with mileage reimbursements for our volunteer drivers for our Medical Transportation and Meals On Wheels programs- we received the whole amount requested; in 2012-2013 we requested \$5,000

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from the Cogswell Benevolent Trust to support our signature Medical Transportation program, and received the entire amount. Other grants were received from Skrungloo Farm for \$2,000, The Goldberg Foundation for \$4,000, New Hampshire Charitable Foundation for \$2,000. The Granite United Way funded us for 2013/14 for \$3,500 for volunteer mileage reimbursement to and from stations. These grants are necessary as Carroll County is a very rural county, and the volunteers are more than happy to donate their time, but find it difficult to pay for the petrol needed. Note: New Hampshire Bureau of Elderly & Adult Services eliminated State Funding for all the RSVPs for 2012.

Payroll administration services are contracted with Anchor Payroll through North Conway Community Center. Debit One Bookkeeping of Conway oversees purchase orders, banking, benefits management; accounts payable and receivable are managed through that office using Quick Books software. The RSVP director submits purchase orders to bookkeeping, which generates checks and maintains documentation, and then an authorized member signs checks. Donations to RSVP are logged by RSVP staff, and deposited in the agency account. The RSVP program director receives financial reports monthly and reviews them with staff and the Advisory Council at monthly meetings. The RSVP director does the CNCS grant drawdowns. Debit One submits Federal Financial Reports (FFR's) in the DHHS Payment Management System.

CCRSVP'S TRACK RECORD IN SUCCESSFULLY MANAGING VOLUNTEER PROGRAMS.
CCRSVP has managed its own corps of volunteers since 1971. Adults, and older people, including RSVP volunteers, serve through the RSVP office itself and through the Gibson Center for Senior Services, Moultonborough-Sandwich Senior Center, Ossipee Concerned Citizens, and others in Carroll County, New Hampshire. Volunteers help with meal preparation, congregate and Meals on Wheels, medical transportation, six food pantries, two Bone Builders classes, two hospitals, libraries, etc. Services to over 14,183 elders last year could not be provided without volunteers. CCRSVP quantifies client-related outcomes using annual anonymous mail surveys of clients; results are provided as part of the annual grant reporting process to the United Way, and the RSVP Advisory Council, and also the Corporation for National and Community Service, as well as used for continuous improvement.

ADEQUATE FACILITIES FOR RSVP: The main office is at present in Intervale, N.H. When the North Conway Community Center builds its new facility in North Conway, RSVP will have offices in their original building- this will give us more visibility in town since we will then be on the Main Street in downtown North Conway. Currently our office staff has high-speed Internet access through

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computers running Windows XP and Windows 7. Files are backed up daily and weekly.

For training the RSVP program director has attended the National Conference on Volunteerism several times since 1997, but not in the last two years, given state and federal funding cuts. RSVP coordinators attend the New Hampshire Governor's Conference on Volunteerism every other year, as well as relevant local workshops. RSVP staff attends the Tri-State Conferences when they are held. We all avail ourselves of the Corporation's technical assistance providers, National Service Knowledge Network, other online resources, and books. All staff attends the agency's Volunteer Recognition Day every year. The Advisory Council sets procedures. New RSVP employees receive and sign off on the personnel handbook when hired, with all employees receiving and signing off on updates. The director, with the staff, holds annual evaluations yearly, and a yearly evaluation is done with the director and the North Conway Community Center Executive Director.

KEY STAFF: The Program Director, Bernadine Jesseman (who started as the coordinator in 1993 and has been the director since 1998), has an extensive background in social services, prior to and including working with CCRSVP. She is responsible for the day-to-day management, as well as fund-raising projects, working as a community liaison, and interaction with those at both the state and federal levels in governance of RSVP affiliates. CCRSVP is a member of the New England Council of RSVPs. The director researches and writes numerous grants throughout the year for the program necessitated by the recent cuts in both state and federal funding of RSVP programs. The director and the coordinator attend CNCS training sessions to gain new insight into the running of the program. The director speaks at service organizations and is on the Advisory Council of Blue Loon Transportation and the Regional Coordination Council. She works in collaboration with other non-profits and attends the Emergency Food and Shelter Program for the county.

The Coordinator: Doris Dreyer (a former bank employee, hired in 1998) is responsible for: interviewing and placing new volunteers, data input in the computer for all hours and stations on a monthly basis, contacting stations when hours are not in on a timely manner; balancing hours and mileage from intake sheets to computer. She records mileage each month for those requesting mileage reimbursement, then forwards to the bookkeeper on a quarterly basis for payments; creates the list of payables each week and faxes the list to the bookkeeper; orders supplies, makes posters, flyers, and bookmarks for special fundraisers, tickets for the quilt raffle. She assists with the quarterly newsletters and tracks newsletter advertising; she also assists with various fund-raising activities and promotions. This is a full time position of 40 hours per week.

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The Receptionist: Ellen Hayes (has been employed by RSVP for the past 18 years) has an office/business background, and is responsible for coordinating the rides in the Medical Transportation Program. It is her job to match the client's needs with the available volunteer drivers. She prepares detailed records from the time sheets, and creates a transportation log on a monthly basis. Her job entails answering the telephone, seeking volunteers for the Red Cross Blood collection and other stations. This is a part time position of 20 hours per week.

The Office Clerk: Joan Kenney, (an English teacher for 37 years) was hired seven years ago, and is responsible for creating and writing the quarterly newsletters, sponsorship letters, and many other office communications. She tracks donations from the annual appeal, is the secretary for the Advisory Council meetings, and works on all fund-raising projects= Mud Bowl, Annual Fund Appeal, the Quilt Raffle, Gibson Craft Fairs and the Masons Breakfast. This is a part time position of 10 hours per week.

Every staff member has a copy of his or her job descriptions and personnel policies. A yearly evaluation is conducted with all staff.

Bookkeeping Duties:

Weekly Bookkeeping to include:

1. Accounts Payable

a. Post invoices to A/P ledger

Receive payout schedule from RSVP office

Record approved payments in QuickBooks file

b. Create payments and print checks

Print the checks

Get them signed

Return printed check to RSVP office with the invoice

2. Accounts Receivable

Post deposits to checkbook

Receive a listing of deposits made by the RSVP office staff

Record each deposit in QuickBooks file by posting to correct income account

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Monthly Bookkeeping to include:

1. Bank Reconciliations
 - a. After receiving the bank statement reconcile the QuickBooks file to the bank
 - b. Any errors/discrepancies are reported to the ED
 - c. Any items outstanding for more than 1 month are discussed with the ED
2. Review General Ledger

Each month the GL is reviewed for any discrepancies

3. Financial Reports the following are prepared and reviewed
 - a. Statement of Activities by class (operating & fund-raising) for the prior month and YTD
 - b. Statement of Position for the prior month and prior year

Year-End Bookkeeping to include:

1. 1099 reporting
 - a. As subcontractors are used they are asked for a W-9
 - b. All subcontractors paid more than \$600 are issued a 1099
2. Work paper Preparation for CPA to prepare Form 990

All documents needed by CPA are compiled and delivered to CPA along with a backup of the QuickBooks file

Other

Please note:

The computer would not let me put in the dates on the work plans. They are 7-1-2015 thru 6-30-2016.

On the budget item Criminal Checks, it does not allow us to explain how the funds will be spent. For this budget 8 criminal background checks will be performed at the cost of \$40.00 each = \$320.00.

PNS Amendment (if applicable)

N/A