

COMMUNITY OF CARE

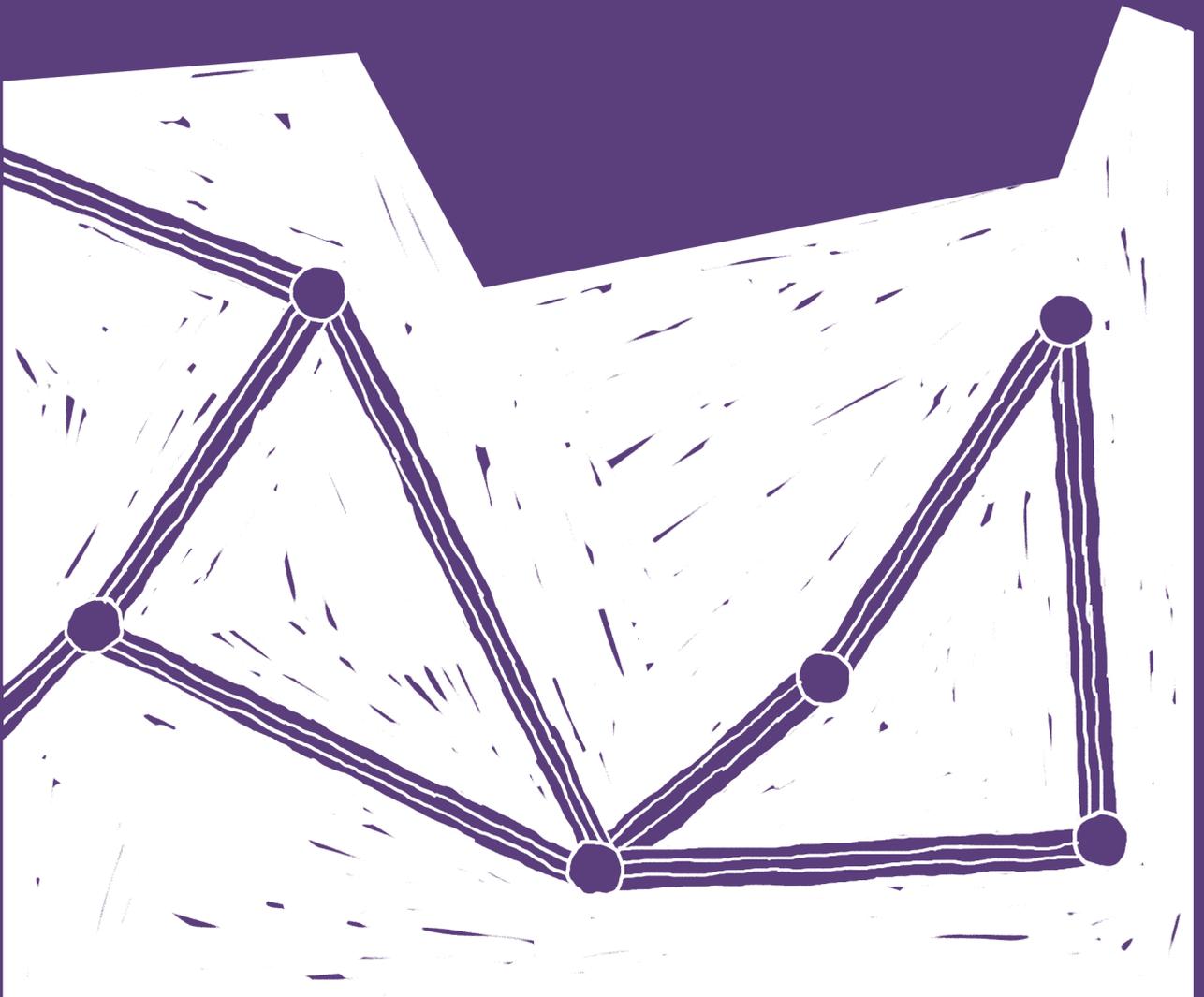


**INNOVATION
STORY
NO. 1**

**STORY
MORGAN
MERCER**

**LOCATION
ARTHUR &
CASSELTON,
ND**

Providing the services and resources so that rural, older residents can “age in place”—a practice that is more cost-effective than assisted living or long-term care facilities—has been at the heart of Community of Care’s work for the past decade. Today, Community of Care offers a one-stop service center to assist seniors, promote health and wellbeing, and reduce isolation for rural residents.





LEADER
MYRNA HANSON

BUDGET
\$100,000–\$249,999

GEOGRAPHY
NORTH DAKOTA,
NATIVE NATIONS

YEARS ACTIVE
FOUNDED IN 2003

COMMUNITY OF CARE PROVIDES SERVICES FOR RURAL RESIDENTS IN ORDER TO KEEP THEM IN THEIR HOMES AND COMMUNITIES AS LONG AS SAFELY POSSIBLE.

BREAKTHROUGH

In 2009, Community of Care was strapped for cash and unsure if it could keep its doors open. Through an ongoing relationship with the Department of Human Services and the North Dakota legislature, the nonprofit developed a public/private funding partnership. Community of Care so successfully demonstrated its value that the state government plans to explore how to expand the nonprofit's model beyond Cass County.

UNLIKELY ALLIES

To identify its niche, Community of Care teamed up with a surprising cast of characters that cut across geography and industry, and even included the organization's most direct competitors. Together, this eclectic group of people mapped out the gaps Community of Care needed to fill and how it could work harmoniously with similar providers.

VOLUNTEERS DELIVER ON HOPE

When funds get squeezed, Community of Care turns to a resource plentiful in small towns across North Dakota: neighborly hospitality. With the help of volunteers, Community of Care stretches its dollars further and keeps aging adults social, active and mobile.

LISTENS ACTIVELY



COMMITTS TO COMMUNITY



BUILDS RELATIONSHIPS



THE COMFORTS OF HOME

A letter sat open on Noel's table requesting her to do one of two things: either show up for jury duty, or submit a detailed explanation of why she couldn't serve.

"When they send out forms they write it in such awful language," the 71-year-old says. "There's no plain English. I just couldn't understand the questions."

Noel didn't know what to do, so she picked up the phone and dialed Community of Care to find answers. She made an appointment with the group's care coordinator who helped her fill out the questionnaire she got in the mail, get a note from her doctor and write a letter explaining why she couldn't serve for jury duty, all before the deadline to respond.

That was just the start of the support Noel got from Community of Care. When her husband passed away in 2009, she moved from the couple's farm outside Arthur, North Dakota, to an apartment in town. Noel and her husband didn't have children, and without the support of family, Noel felt lost.

"I needed a little guidance," she says. "There are just some things you need help with when you become a senior citizen."

Image: Community of Care
Stakeholders

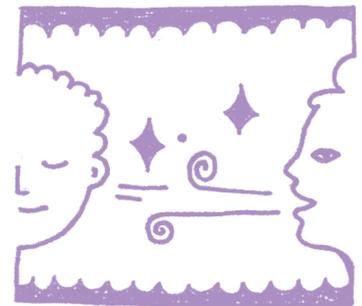


Today, Community of Care volunteers drive her to the doctor when she needs the comfort of a familiar face before a procedure, and they check in to make sure everything is working smoothly in her apartment. Finding that kind of assistance proves difficult in rural areas like Arthur where few services exist to help adults stay in their homes as they age. With more than 150 volunteers giving back more than 1,800 hours a year, Community of Care built up a network of support around nearly 400 individuals like Noel so they can continue to live independently in their homes instead of moving into long-term care facilities.

Everything is free, too. By removing financial barriers, Community of Care eliminated the stress and hesitation that often prevents people from asking for help. That kind of accessibility allows all aging adults to feel like Community of Care's support is an option for them.

“IF SOMEONE COMES IN OUR OFFICE, WE TAKE THE TIME TO LISTEN TO THEM, LISTEN TO THEIR CONCERNS AND GET TO KNOW THEM AS AN INDIVIDUAL.”

—MYRNA HANSON, COMMUNITY OF CARE



LISTENS ACTIVELY

Annually, Community of Care sends out six surveys to clients and volunteers. A year ago, 100 percent of transportation clients agreed or strongly agreed that free rides help keep them in their homes. Collecting data like this reaffirms to staff, volunteers and board members that Community of Care's work is valuable to continue. It aids in recruiting new volunteers, and even helps the organization secure funding. When Community of Care applied for a grant from the Otto Bremer Trust, it originally intended to ask for \$20,000. In a meeting, the program officer recognized the 38 percent increase in the number of miles Community of Care drove clients, the increased request for services and the need for additional staff time to meet demand. He encouraged the nonprofit to apply for more money. Survey data convinced him the group deserved it.

UNLIKELY ALLIES

A farmer, a pastor and a banker
all walk into a room together.

No, this isn't the start to a bad joke, but rather a sampling of the individuals Community of Care brought together to help shape the direction of the nonprofit when it launched as a pilot program in 2004.



To create a successful new model of care for aging residents in rural areas, Community of Care needed to discover the gaps local residents wanted the organization to fill in the community. Jane Strommen, the executive director at the time, envisioned a steering committee made up of individuals who cut across various geographic communities and represented the five major sectors of society: education, government, healthcare, business and faith. To recruit committee members for a brand-new program, Jane knew it required a personal phone call, so she started dialing.

“We wanted to make sure we looked at the whole community. People in those five sectors all saw something unique because of what they did and who they were,” says Jane, who served in her role until 2010. “We needed to understand the needs they saw in their community and how they could be a part of the solution.”

Jane also made an extra effort to reach out to key providers in the area that offered similar assistance to what Community of Care hoped to provide, like Valley Senior Services and Cass County Social Services. She included them on the steering committee, too.

“We wanted to make sure we extended their reach in areas they felt were challenging for them to meet needs,” Jane says. “Sometimes a person needs help from many different areas to be able to stay in their home. Working together was really important.”

Community of Care collaborated with these partners to develop shared referral and authorization forms. This allowed the once separate organizations to streamline communication and share information with one another to better assist clients.



COMMITTS TO COMMUNITY

Fostering trust and community buy-in can make or break a new organization serving people in small, rural communities. To build that, Community of Care makes sure its staff stays visible. They attend community events, visit senior centers and put up displays about the organization around town. Community of Care even picked a strategic office location in the Arthur Mall. The building is like an indoor main street where community members can buy groceries, get their mail, go to the bank, pay their water bill and even grab a bite to eat. In that building, Community of Care is just another easy errand for people to run, and a visible reminder of the work the organization does in town.

Image: Executive Director Myrna Hanson

“WE OPENED OUR EYES FROM THE BEGINNING TO ASK, ‘WHAT ARE THE WAYS WE CAN ENGAGE OTHER PEOPLE TO DO THIS MISSION IN RURAL AREAS?’”

—MYRNA HANSON, COMMUNITY OF CARE

VOLUNTEERS DELIVER ON HOPE

For adults who live alone or in rural areas, depression

and isolation can take a toll on their physical and mental well-being, making it hard for them to stay in their homes.

When it got tough to find enough funds to connect residents across more than 26 communities, the organization tapped into other resources to fill the void: small-town spirit and helpful neighbors. Over the years, the nonprofit built up a network of nearly 170 volunteers who chip in their time and talents to make aging adults feel less lonely.

“We couldn’t begin to do the work we do without our volunteers,” says Myrna Hanson, Community of Care’s current executive director. “They become the hands and feet of the organization.”

Think of all the places you might walk to or drive to in a week: the grocery store, the post office, the doctor’s office, a friend’s house. Now imagine you couldn’t find a way to get there as you got older. You’re left with three options: pay for a ride, stay home or ask a family member or friend to take off work or make time in their schedule to drive you. Community of Care decided Cass County residents needed a fourth option: free rides from willing volunteers.

In 2015, volunteers hit the road with clients on more than 300 rides, racking up nearly 17,000 miles. Volunteers like Dale and Bonnie help Community of Care reach more people. After Dale got sick, the couple started making regular trips from Hunter, North Dakota, to the doctor in Fargo, and offered up the empty seat in their car to an extra passenger. Nearly twice a week the couple now makes a pit stop in Page, North Dakota, to pick up a woman on her way to shoulder therapy.

“We’re not wealthy and we can’t donate a lot, but we can drive,” says 68-year-old Dale.

Without them, Community of Care would have to buy a van, hire a driver and charge clients for rides—limiting the number of people it could serve. By spreading the demand for transportation between 55 volunteer drivers,



BUILDS RELATIONSHIPS

To keep a strong contingent of team members, Community of Care’s volunteer coordinator keeps detailed records to best match clients’ needs with volunteers’ schedules or personalities. Even though the organization doesn’t reimburse volunteers for gas, it makes sure to say thank you and recognize them in other ways. Throughout the year, Community of Care mails out gift certificates, gas cards and anniversary or birthday cards to let volunteers know how much the nonprofit values their contributions.

though, Community of Care stepped up its rides by 38 percent in 2015, and is on track to increase its mileage yet again in 2016.

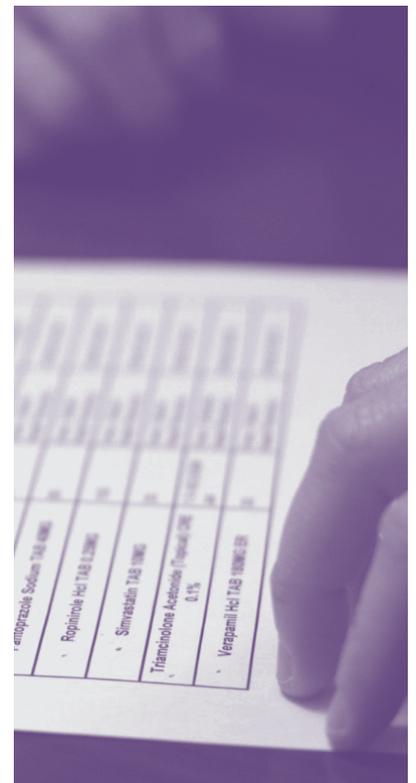
When they're not driving, Dale and Bonnie lead a Bone Builders exercise class through Community of Care that sets attendance records. Two days a week, Dale's booming voice instructs older adults in Hunter to keep moving for 45 minutes to strengthen their bones and combat osteoporosis. At 85 years old, Bessie never imagined herself going to group exercise classes, but when her husband passed away more than a year ago, she knew she couldn't just sit at home alone. Instead, she got out her red, three-wheeled bike and rode to a Bone Builder class.

"It's exercises for your whole body," says Bessie, who attends the class in Casselton, North Dakota. "I get out of the house. I get fresh air. I meet new people. I probably wouldn't be out riding that bicycle if I didn't get all my parts working."

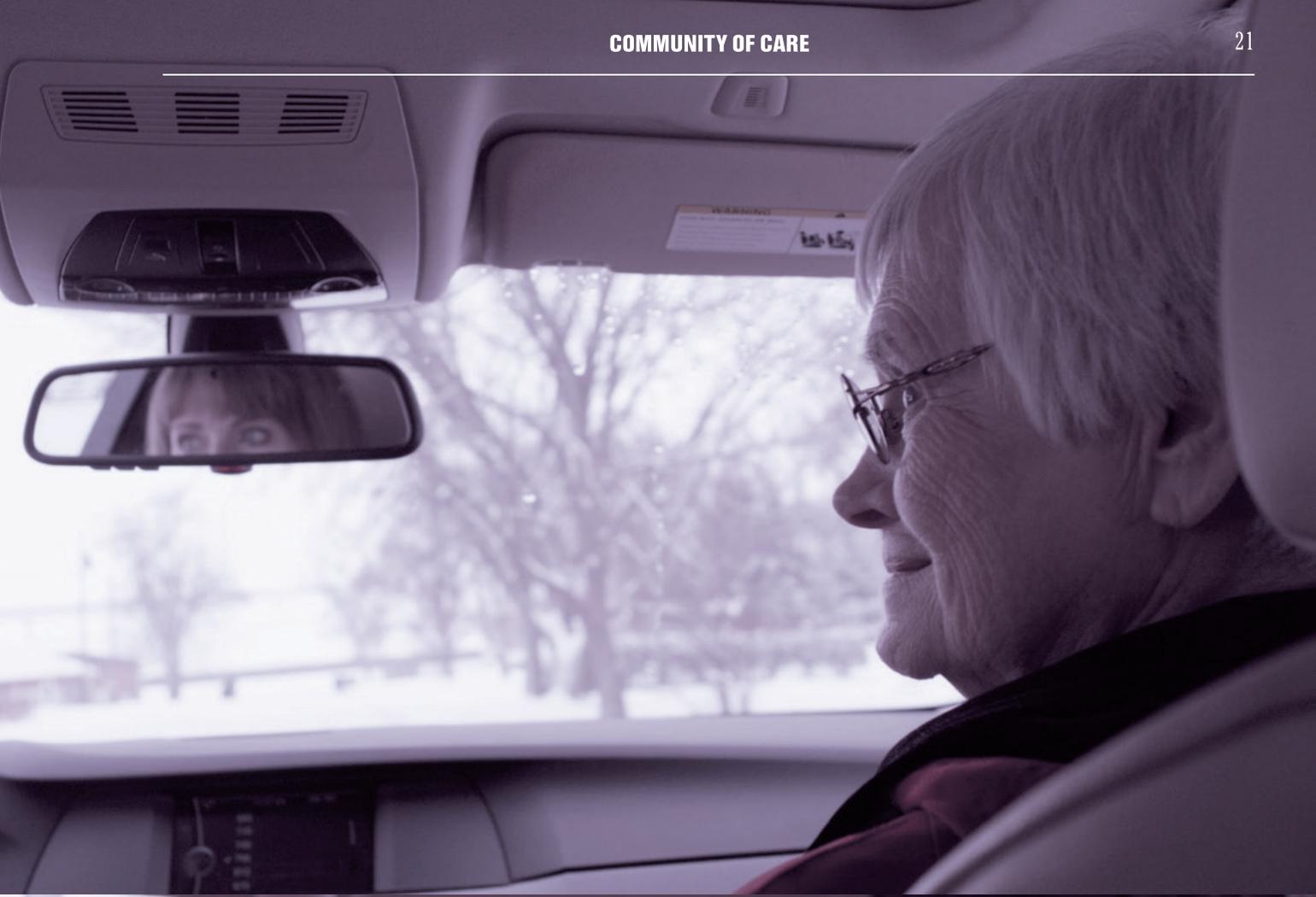
Under the Faith Community Nurse program (FCN), a partnership Community of Care launched with six churches, volunteers lead exercise classes in four different communities. Beyond stretching and lifting light weights, these classes turn socialization into a preventative healthcare tool. Each week, the class in Hunter kicks off with a time to share announcements and stories from the weekend. It's an opportunity to laugh and talk with each other, and a chance for participants to hear another voice in a day that might otherwise go silent.

For the nurse running the FCN program, the exercise classes keep her in step with what happens during the week, like if someone unexpectedly checks into the hospital or is struggling with a new diagnosis. This information lets Community of Care go on the offensive and reach out to people to ask if they'd like a nurse visit, help with a new medication or even assistance setting up a Life Line system in their home.

As long as she can, Bessie will keep pushing herself to get out on her bike. She likes to ride to meet up with friends to play pinochle and another card game called Spite and Malice. At the end of the day, though, there's nowhere she'd rather bike back to than the place she's called home for more than 30 years. Without Community of Care, her kids might push her to move to Fargo, but Bessie likes the tiny town of Casselton. She's lived there for 60 years, and it's where she plans to stay.







Images: Community of Care Stakeholders