



Housing and Services Resource Center

Addressing Housing Accessibility Through Cross-Sector Partnerships: A Closer Look at Home Modification Collaborations at Work

HSRC Webinar | June 9, 2022 | Transcript

SHERRI CLARK: Hello! Welcome to the Housing and Services Resource Center webinar for today. Today our focus is on Addressing Housing Accessibility through Cross Sector Partnerships: a closer look at Home Modification Collaborations at Work.

You are going to learn a lot from this session today, and I'm so glad that you are able to join us! Next slide please.

My name is Sherri Clark, and I am an Aging and Services Program Specialist within the Administration for Community Living, which is a division within the US Department of Health and Human Services. I will serve as your facilitator for today's webinar. We are so thrilled!

I keep watching the numbers growing and growing of people coming to the webinars, so I'm excited. We're so thrilled to have so many of you here today. And we know you're going to have a wonderful engaging hour.

Because as many of you have learned over the last couple of years about Zoom and many of these other platforms, there are always housekeeping items. So, this meeting is being recorded.

By staying to participate, you are consenting to the recording. Also, all attendees have been placed on mute to ensure that we have good audio quality. But please know, that does not mean that we don't want to hear from you, because we do!

Please frequently use the chat feature to make comments and use the Q&A feature in the Zoom app dashboard to ask questions. Or if you prefer, you can always send a question or comment to the Housing and Services Resource Center mailbox at hsrc@acl.hhs.gov.

You can also use the chat or email feature if you are having technical issues, or if you have a comment for another attendee. Sometimes people have found the chat feature to be distracting. If that is the case for you, just close the chat screen. Next slide please.

We wanted to start up today to learn a little bit about who is joining us today. The work at the Housing and Services Resource Center is designed to serve professionals from a variety of sectors. We would like to get an idea of who is joining us today! The poll displaying on the screen shows what sector your organization is in. Are you in housing or homelessness services? Aging and disability networks, healthcare or public health policy? Community

development or civic organization, association research or advocacy organization? A consumer looking to find information for yourself, or other? So if you'll take a moment to complete that poll, that would be great.

While we are responding to the poll, I'd like to tell you a little bit about the Housing and Services Resource Center, or HSRC, I will get used to saying both, which stems from the partnership of the Administration for Community Living and other communities within HHS, and the US Department of Housing and Urban Development. We know that in every state and community around the country -- there are programs working to access housing, or support people with supportive services.

But we also recognize that the Housing and Services systems are often siloed and may not work together a lot of times. Sometimes this hinders the ability to better serve the people. Stronger collaboration between the systems would enable more older adults, people with disabilities, and people experiencing homelessness to achieve housing stability and to live with dignity and independence in their community. And to avoid homelessness and needless and costly institutional care.

So adults and older adults with disabilities can stay housed. The Housing and Services Resource Center provides technical assistance across federal agencies to cultivate cross-sector partnerships that bring together housing, homeless services, aging and disability services, and an array of health services like physical, behavioral, and mental health.

After the webinar, I hope that you will look at the Housing and Services Resource Center website, which is at [ACL.gov/HousingandServices](https://acl.gov/HousingandServices). At the end of the webinar, we will share our email, so that way you can be sent updates when new additions are added to our website.

Now I would like to take a look at our poll results. Wow! We have a wide sector of people joining us today, I'm so excited to see that! We have a good amount in the housing and services networks, but we also have people from a variety of sectors. It's so wonderful to know that there is a variety of people joining us today to bring different perspectives as we tackle this very important topic.

Today's webinar has been organized by the Housing and Services Resource Center, and we are making it available to you, one of ACL's longtime partners, University of Southern California Leonard Davis School of Gerontology. We will shift to a wonderful panel focusing on state partnerships. USC will lead the panel discussion and the Q&A portion of the webinar.

I would first like to introduce Dr. Jon Pynoos. Planning at the University of Southern California's Leonard Davis School of Gerontology. Jon Pynoos has spent his career advising the private sector on how to improve housing for long-term care and older adults. He has written and edited six books, has been awarded the John Simon Guggenheim and Fulbright scholarships, and he was the delegate to three White House conferences. He will be joined by Emily Nabors, program manager of the Fall Prevention Center of Excellence at the University of Southern California Leonard Davis School of Gerontology.

She provides home training and modification to prevent falls and provide support for aging in place [...] facilitates national home safety and home modification workgroup, with the National Council on Aging. A key aspect of her work is building and maintaining key partnerships. It is my pleasure now to turn the floor over to Dr. Jon Pynoos; thank you.

JON PYNOOS: Thank you, Sherri! We've enjoyed working with you and working with ACL on a variety of projects. I'm going to provide a brief overview and context on what is happening in the field and why it is so important.

We are happy that so many people have joined us for this webinar! We all know that more people are living in the community with disabilities.

And more people are aging into disabilities in the community. 20% of households have at least one person who has difficulty using some element of the home. This could be climbing stairs -- 28%, this could be using the bathtub, cooking, getting outside, a whole range of problems that the environment can present for older people. Taking a bath or a shower are among the most difficult for some people. This is partly because of the environment itself.

So, I refer to a lot of the housing that we have as "Peter Pan" Housing. It was not designed for people who are going to grow up, and particularly grow old. Only 10% of our housing units have step-free entries, a first-floor bedroom or bathroom, and at least one bathroom accessibility feature.

If you look at the house in the picture, you can see that it has a lot of stairs, no other way to get into the house. If you look very closely, you can see that the stairs are not marked in any manner. It does have a light over the front door, which is helpful.

But we are building housing, and especially older housing, where a lot of older people live that do not have the features that they need to carry out activities safely and easily. And in some ways that hampers people from carrying out activities at all.

These are especially problems for low-income people and the very old.

Home modification is changing the home itself to make changes that work for people. There are a lot of strategies we could think of. One is to remove fall hazards, for example.

If you go into a lot of homes, you can see throw rugs. Which are comfortable, you know? But they are risky because they slide underneath you. Clutter is also a problem. Furniture can be a hazard if you cannot see parts of it. There have been very few homes I've seen with antiskid strips on stairs, so some behavioral things can be changed.

Often needing help from a relative, or an outside person, such as a case manager; for some we can add supports to homes. Many homes are poorly lit; we can add supports to homes. For the lights, some of this is due to conserving energy. Some people do not want their bills to be higher.

We can add grab bars and handrails to homes. A shower seat or bench can help. And we can try to change behavior. For example, moving items that people often have on higher shelves to lower shelves where they can reach them.

Getting people to sit rather than stand while preparing food if they do not have a lot of energy will help, and there are a lot of benefits to making these changes. One is to make daily activities easier.

To support caregivers, and to make it easier for someone who is living with an older person, or someone who comes in. We know from recent studies these kinds of changes can be cost-effective and save money! Which is all important to make in a case for them to be paid for by the government.

Types of home modifications, are there many? Some are major, some call for major changes in the home. Some are minor and people can make them themselves, such as putting in a nightlight.

Sometimes we need repairs in order to make changes. Assistive technology can often help, in in homes where people are frail, there is durable medical equipment as well.

So if you look at the page on the right, I put these in when my father came to live with us. He was very frail, I put in a hand-held shower, a grab bar, and nonslip tile. And for all of the years that he lived with us, he never fell in this place that obviously could be very dangerous.

You could change several things, such as adding a grab bar to a toilet. You can put in Lazy Susan type devices on shelves for people to easily access them. And you think that these are all commonplace! But often, people do not know where to turn for help. They do not know what kind of changes are possible or what the alternatives are, and they may not have access to people who can come in and give advice for choices on what changes to make.

Well so I think we skipped one. Back one. Back another.

I would say in summary, home modifications are important. We need more modification in homes for older adults and caregivers. We need more reimbursement, and as we will talk about along the way, we need partnerships to make this work.

So with that, I will turn it over to my colleague now, Emily, who is going to describe some other aspects.

EMILY NABORS: Thank you, Jon!

I'm going to focus on why partnerships are important in home modifications! And while I'm talking, it would be great if you can use our chat feature to tell us why partnerships are important in home modifications in your community or state. We would love to hear that!

Next slide. One big reason why partnerships are so critical in home modifications is because of the complexity of funding sources, and the diversity of these funding sources.

So on this slide, we are presenting a number of federal agencies that play a role in home modifications. This includes HUD, the Centers for Medicare & Medicaid Services, Administration on Aging, the VA, U.S. Department of Agriculture, and the Department of Energy.

In addition to the variety of funding sources, each program comes with its own funding eligibility requirements. These have to do with the certain characteristics of each person; so are you a homeowner, a renter? Or a veteran, for example. There are also levels of income, your age, disability, or even your geographic location can come into play in terms of whether or not an individual is eligible for home modifications.

Next slide. Also, there is complexity in home modification service delivery. I'm showing here a diagram of the home modification process, and there are a number of steps. It is not just installation. There is intake, determining if someone is eligible, assessment, identifying an individual's home modification needs. Set priorities, with what is most appropriate now and

what would be more prewritten in the future. Secure funding is also a big aspect, is still in the work, and finally follow-up is critical to make sure that the home modifications are meeting the needs of the individual.

Also, I would say different professionals are involved in each one of these steps. Next slide.

This is an overview of the many different types of professionals that can play a role in home modifications. As you can see it is quite a list here! I am aware that everybody is going to have access to these slides, so I will not go into each item here individually, but it is just to show how many different types of practitioners should be at the table or could be at the table.

We wanted to provide a more targeted diagram here, of partners that you all could consider in your community or your state, to expand the impact of services you are already providing. Or to help connect individuals in programs that you have.

That may not include modification or home assessment, working with these types of professionals to connect individuals to home assessments and home modifications.

Next slide please. Thank you. I would now like to introduce our home modification partnership panel. These are all individuals from Iowa who are doing excellent work in home modification.

We are going to hear from them and get some specifics on how partnerships can play a role in home modification.

Kent Ohms is the Community Living Director at the Iowa Department on Aging. He oversees the care transition initiative Iowa Return to Community, and he works in strategies to strengthen and expand home modification services in the state.

We will also be hearing from Brendalyn Shird. She has been active with Habitat for Humanity's work for more than two decades, and currently serves as the Director of Global Engagement. She is a Project Leader at Greater Des Moines Habitat for Humanity.

We are hearing also from Tracy Keninger. She is at Iowa AT Program Director at Easterseals Iowa.

And finally we will hear from Sherrie McDonald. She has worked in geriatrics for the past 30+ years. I'm really excited to pass the presentation over to Kent Ohms from Iowa Department on Aging.

He will start by giving us a lay of the land of the projects in Iowa, and what role partnerships play in the Iowa Department on Aging, or IDA's home modification service delivery.

KENT OHMS: Thank you, Emily! Yeah, partnerships play a big role. As Emily kind of highlighted, it is a very fragmented service delivery with lots of distinct professionals involved.

And I will comment it is much like any other state in the nation. Financial assistance kind of varies depending on where you live. For housing-related programs and for factors such as, do you own or rent? What programs that you are eligible for may vary depending on requirements for older adults versus people with disabilities.

If you are on Medicaid or not. Contractors are very difficult to find in the state right now, you know? As a result of the kind of COVID-19 measures, you know, remodeling and the building boom, we were competing with that.

There is the 2020 derecho and other storm recovery projects to compete with the people who are trying to purchase. Prices of lumber and materials for large contractors, you know? Only looking for larger projects, and that kind of set the stage for the partnerships that we are looking for and brought together.

So one of the first projects we are going to highlight today is the Community Aging in Place – Advancing Better Living for Elders (CAPABLE) pilot that we have. We have two pilots going on in the state. One is in Western Iowa, with Connections AAA. They have hired people to serve as the registered nurse, and then they have contracted with their local Habitat for Humanity.

We have Happy at Home Consulting services in central Iowa, and we are braiding in their Rock the Block funding initiative. So we cover those services. We are also contracting with other private contractors to deliver those modification services.

Also, some of the work we have been doing, we have worked with Easterseals on some assistive technology and durable equipment initiatives. We've had some funding through the Coronavirus Relief Funds to accomplish this, and we also had grants for similar purposes. Consumers were able to access Easterseals directly, and referrals came from six Area Agencies on Aging. They were able to serve 90 consumers with 359 assistive devices and durable medical equipment items. They had about six weeks for this contracting work, and they did all that.

I would be remiss if I did not include the things we have going on in the state, that our state AAAs provide this, through our state elderly fund—funds for supper, we have a smart home pilot project going on, with “aging” in tall text. They’re saying the usefulness and impact of home modifications or older adults staying in their homes.

We have a AAA that partnered with the city of Waterloo, and the Iowa Habitat for Humanity; they are using the block grant funds for the city, and doing home modifications there. Also, there are two spots in the state that got older adult home modification grants that were new, including the Dubuque area. There is also the HUD Healthy Homes Program, and there are a variety of entities working there to help with those funds.

And finally, we have an [affordable?] homes coalition in the state that meets on kind of a quarterly basis throughout most of the year. There are many partners here today that [...], and many more out there that represent consumer groups and advocacy organizations, business groups related to this area and state agencies.

And you know, this helps to facilitate introductions and partnerships, and they have been advocating for a statewide program at the Iowa General Assembly as well. So I will turn it over to Emily.

EMILY NABORS: Great! Thank you so much for that context, Kent. Now I will post some questions to our panelists. Tracy, I will start with you.

Can you tell us about Easterseals Iowa collaboration with the Iowa Department on Aging, related to home modification and assistive technology and how that collaboration started?

TRACY KENINGER: Absolutely! To meet the needs of Iowans, really our partnership and connection started way before that time. I think as many of you noted, as the State Assistive Technology Program, we recognize these huge needs of which we literally did just that? We clearly just did not have the capacity, nor did we have the resources.

And quite frankly we did not have the expertise as well. So really, we started talking with Kent and his colleagues, they also shared the concern, and we started the brainstorming process on how together we can start to address some of these home modification and system technology needs in Iowa.

We went with a three-pronged approach, like Kent mentioned, looking at sustainable homes and a home coalition. We looked at what we could look at for sustainability and policy change. And also, we really looked at colleagues with the AAA's, recognizing that we cannot do it all as a state AT program, but can we assist their [...] equipped their staff with [...] that can enhance usage and their populations of people they are already serving?

And the third area really is, we are all now sitting on each other's advisory councils and committees, and constantly looking for opportunities to coordinate and collaborate. And to not feel that we are doing this alone, but to have a true partnership.

EMILY NABORS: Excellent, thank you! I will move to Brendalyn, because you also partner with [...]. Can you talk about your work, and how your partnership started?

BRENDALYN SHIRD: Even though we are known at Habitat for Humanity for affordable homeownership, we actually serve hundreds of families a year through affordable home repairs.

Even though we do that, as the program has grown, nearly 4 in 10 of the people that we serve, or nearly 4 in 10 of the households among the people that we serve, have someone 65 years old or older.

Many of these households have someone who self identifies as disabled as well. While we can do home modifications and ramps, we started to ask ourselves, "Could we do more? More of these modifications?" And also, where are the things that we may be missing because we do not have the right partners at the table?

So we started exploring partnerships, and we thought that more intentional collaboration with health and human services providers would help us reach even more seniors and do it in a deeper way.

We had a partnership that was getting started in Dallas County to launch a little CAPABLE pilot. And we happened to mention it to the Iowa Department of Aging as we were networking, and they asked us to sign onto a grant application with them, and we are still working with them.

EMILY NABORS: Great; thank you! We have some Centers for Independent Living on the call. Could you describe how Connections Area Agency on Aging has worked with CILs?

SHERRIE MCDONALD: We have an excellent partnership with the CILs in our regions. We first initially started by try to train our staff on partner providers in the region. So we had them come in and tell us how they make referrals, what was appropriate referrals, what was not, and turned around and did the same thing for their staff.

As we met together, we start to think, "We are working with the same clientele with the same needs being identified in both their clientele and ours." So that is where we started, and from there we have added different programs to see how each of us can meet the need.

Sometimes we get a request for something that we cannot fund or help with because they are under 60, so we turn to them and they can provide it. They have a great loan closet and so we utilize that for our individuals as well as the people that they serve.

So it has been a good partnership for us.

EMILY NABORS: That is great. Can you identify how people enter your services? Or how they identify needing your services and make those rural connections?

SHERRIE MCDONALD: Certainly! All they have to do is call one of the agencies that we partner with. They can call into Connections. We do an intake for our agency and we look at what their service needs are. We assign an options counselor who will go out and meet with them, if they are open to that, to do an assessment on their needs.

As we assess needs, we look at what we cannot meet or who we need to partner with, then we make contact with the CIL and go from there. So we always encourage the consumer to be a part of this, but sometimes they are overwhelmed, and sometimes it takes someone else making a phone call to a provider for them to get the assistance.

EMILY NABORS: Thank you. Tracy, what would you recommend as a first step, to form partnerships to increase service delivery and access to home modification services for people with disabilities and for older adults? What would be critical first steps? How do we even get started on this?

TRACY KENINGER: As you may think, I suggest you reach out to your State Assistive Technology Program, right? That is a great place to start! I remember countless conversations that Kent and his colleagues had, we did not really have a solution. We did not know really where we were going, we just knew there was a need.

And we kept our focus on the needs of Iowans and trying to figure out the solution. Not who is going to find it, not who will do what, but really focusing on the needs of Iowans.

EMILY NABORS: Thank you; excellent. Brendalyn, are there any critical things to keep in mind when starting or working in partnerships?

BRENDALYN SHIRD: I think the biggest thing is to keep communicating! To always be honest, and to work together on solutions. Because when you try something new, it does not always work like you envision it, but if you collaborate and still have the same goal in mind, you will find a way to make things happen.

EMILY NABORS: Kent, do you have anything to add?

KENT OHMS: I had the same exact thought. Just keep trying. You may not get the exact grant that you are considering partners for, but something else may come around, and you can work with other people and bring previous ones along and create something new.

Always remember to reach out!

EMILY NABORS: Sherri, any additional ingredients for success as far as building partnerships?

SHERRIE MCDONALD: I would say to reach out to each other. To be aware of what is available in the community for each other, as that has been the biggest success for us.

EMILY NABORS: Really briefly, I'd like to ask each one of you, I can start with you Sherrie—what accomplishments have partnerships allowed your organization to achieve that you would not have been able to do otherwise?

SHERRIE MCDONALD: Probably, the one that comes to mind is our first CAPABLE client. It was an older person, he had just turned 60, he had a stroke a year prior, and he got a referral to be put on our CAPABLE program. We had to look at funds, this gentleman had a farmhouse that he and his wife lived in. The garage was on a hill, the home was further down, there was no bathroom on the main floor.

And so this guy had for a year, following his stroke doing therapy and everything else, he was unable to use the bathroom. He had to use a commode. He had not been upstairs in his home. His wife who had been experiencing health issues had to push them up a hill in a wheelchair.

We were able to tap into a healthcare program to provide assistance for devices for his wife to help things improve. We did a grant for the USDA for his stairlift, so he can actually go upstairs go to the bathroom and use the shower.

We put a slab of cement down, and a means for his wife to get the car down closer to the house so they could get in and out much easier for weather.

So it is just partnering and looking for everything that is out there in order to meet a need.

EMILY NABORS: Thank you! And in the remaining minute, Brendalyn, can you also describe the components that partnerships have enabled your group to do?

BRENDALYN SHIRD: I think in general, besides the things that Habitat can do and does well, is connecting seniors to those of their services that they need to make it real! And also, having a nurse and an OT in the home, working with the family.

They are going to [...] things to family. Because someone may tell ourselves that they are great, like hey [...] is great. But then it is the OT that can make sure that you are using it correctly. Because we can do home modifications, but it takes other people's expertise. That way, people know how to use them and are living a better life because of them.

EMILY NABORS: Tracy, I will end with you.

TRACY KENINGER: We received an email yesterday, from an individual with complex needs and unique circumstances. In this case, the OT sent out an email to all of us, and we all came on brainstorming. When we have contacts, we can all move faster and better based on people's needs.

Everyone was on board to help for a very complex situation.

EMILY NABORS: Thank you all so much for this information! We're going to open it up to Q&A now, for questions from our participants. My partner, Molly French from USAging, has

been scouring our chat feature in the Q&A box. So Molly, let's open it up to questions for our panelists please.

MOLLY FRENCH: Thank you, Emily! And what a wonderful panel. One of the questions that came in, I'm hoping maybe a couple of the panelists could address, is many see many seniors in the homeless population, we are wondering if there is a way to create partnerships to extend these [...] partnerships to homeless service providers? So that is the question.

KENT OHMS: I will jump in there, that is probably an area that we can expand and improve a bit. We are engaged as a department on our State Homelessness Council. I am not the person that is from our department. But you know, we are represented there and engaging. We are working with delivering the wraparound operations counseling services, and getting them connected to address their care needs, but that is a great idea!

EMILY NABORS: Any other panelists?

SHERRIE MCDONALD: You have done a little bit in terms of loaning equipment. So a homeless shelter may contact us, and we do work with agencies that deal with a lot of homelessness in our region, so they do call us when there is a need for incontinent products or a shower bench because they have someone in a shelter needs that.

EMILY NABORS: Thank you. Molly, are there other questions?

MOLLY FRENCH: Sure, there were just a lot of questions about funding. So I thought that we would start first with Kent. There is a question asking if there is a single resource that you accessed to launch all of this work. What were kind of the core sources, if you could recount that?

KENT OHMS: Absolutely, with my prior background of a fiscal analyst. There were many funding sources. We used the ACL Falls Prevention Grant for Empowering Communities to launch CAPABLE. Brendalyn from Habitat for Humanity brought in their Rock the Block funding to braid with the project overall in matching funds.

We use the Coronavirus Relief Funds, that was in the first round of funds for states to use in discretionary ways for helping to address that.

The Community Development Block Grant has two different prongs of funding streams. There are entitlement cities, which are cities that are larger, usually about \$50,000. A lot of cities have programs that will prepare houses for people at certain income levels, and usually those repairers will address eligibility factors as well. So if you need a ramp or other adjustments to the house that may help the person live there and stay there, it is usually a great resource.

Within that same Community Development Block Grant, there are not entitlement cities, which are usually smaller cities across the state. But usually, one singular state agency they have, they might have a program that cities would be eligible for. So you know, you would have to work with AAA to identify consumers, to build the relationship with the city, to apply to the state.

It is out there and it is possible. Local housing initiatives to work with lower income, so that is kind of the top of the line for some.

EMILY NABORS: Excellent. Any of the other panelists would like to speak to that?

SHERRIE MCDONALD: It is really scrounging any resource that you can. We have a resource, the hospital, that helps to fund things when we cannot fund things. We do use a lot of block grants for home repairs and ramps as well and several of our counties.

So it is looking for anything and everything out there.

TRACY KENINGER: it is funny, Sherrie, that is what I was going to say as an example, is an individual we were serving who was older who had assistive technology needs. We were able to provide [...] refurbished shower lift, and shower transfer benches to make the money go further. Habitat for Humanity was able to come in and do some of the home modification work.

So by combining our resources, it made the money go further, and we were able to make a substantial impact on that person's life.

EMILY NABORS: Perfect, thank you. Molly, another question?

MOLLY FRENCH: Yes. One of the questions that came in was "How did the pandemic change the approach in Iowa to home modifications? Whether it was a change in the short-term, or maybe it is a longer change that you did during the pandemic and that has evolved and may be sustained?"

BRENDALYN SHIRD: I would like to speak to that a little bit. The pandemic made it hard, I will say. Because there are people who need services, but it is hard to service a home if someone does not want anyone in their home, you know? Because of COVID.

But between masking up and getting out there, we were able to continue serving, just not as quickly as possible. There have been a lot of supply shortages, and also cost increases which make budgeting very difficult for our project.

But again, sometimes it is about adapting. If this project that we normally use is not in, is there another kind of project that would work? Things like that.

And, it also made, at least at Habitat, it also made us think about what parts of the process that we could do more to automate. Slowing down in some areas allowed us to put money and resources into automating some of our projects.

We are still working on this, but I think COVID gave us the kick to do even more and make it even easier.

EMILY NABORS: Any other panelists? We have time for one more question.

MOLLY FRENCH: There is one question that is better perhaps maybe for USC? Which is, the person is looking for any type of studies or evaluations that have looked at the return on investment in terms of home modifications?

EMILY NABORS: That is a great question! There are many different outcomes that have been looked at in the research for home modifications. In terms of reduced hospital readmissions, reduced skilled nursing admissions, cost to Medicare, I would say a great example—there are a number of articles of the CAPABLE program out of the John Hopkins

University that demonstrates financial cost savings, saving healthcare dollars including excellent outcomes for the individuals in the program.

I would be happy to go more in depth, but a lot of outcomes include reducing falls, reducing dollars, increasing function, supporting caregivers, a little less common in the literature but is there.

I recommend looking up the CAPABLE program; they have a lot of great articles about return on investment.

Thank you so much, Molly, for navigating the chat and Q&A.

We're going to share some resources that hopefully will answer some questions that we did not get to.

We have worked very hard at the Leonard Davis School of Gerontology to create what we call the Home Modification Information Network. It is on our website and includes listings of home modification programs, providers, and funding sources by state.

So it is organized by state. There is a lot of information on it, and we work hard to keep it updated. I encourage you to visit that page!

Our website, homemods.org, has a lot of other information for consumers and professionals. We also have the ACL Housing and Services Resource Center web address up here for the intersections on health and housing.

You have heard a lot about partnerships with Assistive Technology Programs, State Assistive Technology Programs, and Centers for Independent Living. Here are links for you to look up your State AT Programs and Centers for Independent Living within your state.

You can find your State Unit on Aging and local Area Agencies on Aging through the Eldercare Locator website, which is operated by USAging. Also, you can find Title VI grantee programs. These are programs that provide aging services for older adults in Tribal communities, and they are funded by the Older Americans Act. And we have a website for this.

And here are all of the email addresses of our presenters, if you would like to follow up with any individually.

I will go ahead and pass the presentation on to Sherri for some more important information before we close out. Thank you!

SHERRI CLARK: Well, I'm just excited. As Emily and Dr. Pynoos know, home modification is such an important topic to me! Because I have seen the value of home modifications work in my own life, to allow a loved one to remain in their home, by making simple modifications that we are able to do with a thousand dollars.

Those minor changes have allowed me to continue to have a loved one in my home, and that meant so much. I would like to thank Emily and Jon for presenting on the importance of home modifications and for finding a cutting-edge collaboration. The Iowa folks have just been fabulous today!

I'd like to express my deep appreciation for the Iowa Home Modifications Collaborative. Kent, Brendalyn, Tracy, and Sherrie, I have been just so moved by the way that you all work together. Also by the way that you each use various programs to bring things together to ensure that an individual is served, and that is really what this is all about.

Before I close, I would like to remind everyone that in the coming days we will post a recording of this webinar and the slides to the Housing and Services Resource Center website.

In the meantime, please keep using the website which staff is providing in the chat.

But we are not finished! We want you to save the date. We recognize and appreciate that this topic is critical and so important. The Housing and Services Resource Center team is excited to continue to partner with our colleagues at USC to offer a follow-up to today's webinar.

We will be offering an office hour on July 6. Once again, we will feature successful home modification collaborations and best practices, in a format that enables participants to ask more questions and share their own innovations!

Because I saw in our chat there are innovations going on around the country. If you registered for today's webinar, you will receive a notification for the office hour.

I'd like to ask each of you now, to please take a minute or two to complete our short feedback form. You see the link on screen, and staff is putting the link in the chat. There are just five questions that ask you to write on different aspects of the work that we do.

If you have comments, you can provide them. Please know that we read them. And today's webinar incorporated some points that were made to us after the last webinar, so feedback is important to us and we are paying attention!

Next slide. The Housing and Services Resource Center is for you. It is to ensure that at the federal level, that we are providing you what you need at the state and local level to make a difference in someone's life. So please email us at hsrc@acl.hhs.gov for suggestions, or you can tell us about partnerships that we can better share with the community.

And I can tell you, none of this would happen unless there were these incredible people behind the scenes making this happen. I'd like to thank USAging, I'd like to thank Melissa who has been wonderful! Thank you as our interpreter. And Serena, our CART specialist and their roles in producing today's webinar.

We have talked about partnership; the Housing and Services Resource Center is about partnership! We are especially grateful for everyone who joined us today. Thank you and have a great rest of your afternoon. Thank you so much.

Acknowledgment

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