



Volunteer Stories Brief

Insights from
ACL Programs

Abbreviations and Acronyms

ACL	Administration for Community Living
ADPI	Alzheimer’s Disease Program Initiative
LTCOP	Long-Term Care Ombudsman Program
NWD	No Wrong Door system
OAA	Older Americans Act
SHIP	State Health Insurance Assistance Program

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What Is the Purpose of This Brief?

This brief was created as part of the Administration for Community Living (ACL) Volunteerism Study project, sponsored by ACL's Office of Performance and Evaluation.¹ Its purpose is to tell the story of volunteerism in ACL programs in the words of ACL program stakeholders: staff, grantees, and volunteers. Based on the insights shared in interviews with 38 stakeholders,² this brief highlights the role and importance of volunteers³ for delivering ACL program services to older adults and people with disabilities, the benefits of volunteering to recipients and volunteers, and the experiences of volunteers contributing to ACL-funded programs.

What Are Some of the ACL Programs That Rely on Volunteers?

As Americans age, many may think about how they can remain independent in their homes for as long as possible and whether they will be able to access services that help them maintain their health and well-being. Federally funded programs like the State Health Insurance Assistance Program (SHIP), the Older Americans Act (OAA) programs, the No Wrong Door (NWD) System, and the Alzheimer's Disease Program Initiative (ADPI) were created to address these needs. Comprehensive local networks (e.g., aging and disability network) have been created to deliver these programs to communities, individuals and their family members. However, the

delivery of the services also depends on the efforts of unpaid volunteers. For example, in 2019, volunteers contributed about 28.2% of the total annual labor for the SHIP, 56% of the total annual labor for OAA Title III area agencies on aging, and about 15.9% of the total certified ombudsmen annual labor for the LTCOP. Because funding is limited, without volunteers, many, tribal, state, and local services providers would not be able to provide nearly as many services nor reach as many individuals in the community as they currently do. The information below provides a brief description of some of the ACL programs that rely on volunteers.

¹ ACL Volunteerism Study was conducted by New Editions Consulting, Inc., under ACL/Office of Performance and Evaluation Analytic Support Contract HHSP23337002T.

² Details about the study methods and additional findings can be found the Final Study Report and Effective Volunteer Practices Guide, posted on the ACL website: <https://acl.gov/programs/program-evaluations-and-reports>

³ For the purpose of this study, volunteer work refers to unpaid noncompulsory work—that is, time individuals give without pay to activities performed through an organization outside their own household (International Labour Office, 2011).

STATE HEALTH INSURANCE ASSISTANCE PROGRAM

The SHIP was created to assist Medicare-eligible individuals in obtaining coverage through Original Medicare (Parts A & B), Medicare Advantage (Part C), Medicare Prescription Drug Coverage (Part D), and Medicare Supplement (Medigap). SHIP also assists beneficiaries with limited income to apply for programs such as Medicaid, or the Medicare Savings Program and Extra Help/Low Income Subsidy, which help to reduce out-of-pocket payments for healthcare services (ACL, n.d.-a).

OLDER AMERICAN ACT PROGRAMS

The OAA funds programs that provide essential services to older adults (i.e., generally those age 60 and older), targeting those with the greatest unmet needs, particularly older adults who live in low-income households, have limited English proficiency, or who live in rural areas. The OAA also targets American Indians and minority older individuals. Services funded by OAA programs include home-delivered and congregate meals; family caregiver support; in-home assistance; health promotion and disease prevention; transportation; job training; and legal services and promotion and protection of the health safety, welfare, and rights of long-term care facility residents (ACL, n.d.-b).

NO WRONG DOOR SYSTEM

The NWD System represents a collaborative effort of ACL, the Centers for Medicare & Medicaid Services, and the Veterans Health Administration to support state efforts to streamline access to long-term services and supports for individuals and their families. In a “No Wrong Door” system, multiple agencies retain responsibility for their respective services while coordinating with each other to integrate access to those services through a single, standardized process that is administered and overseen by a state-led coordinating entity. The NWD system serves as a network of community-based organizations and state agencies streamlining access functions for all populations through governance, coordination of key referral sources, person-centered counseling, and streamlined eligibility, including those funded under Medicaid, the OAA, the Veterans Health Administration, and state revenue programs (ACL, n.d.-c)

ALZHEIMER’S DISEASE PROGRAM INITIATIVE

The ADPI was created to help develop and expand the availability of dementia-capable supports and services for persons with Alzheimer’s disease and related dementias, their families, and their caregivers. Funded programs bring dementia capability to the communities they serve through expansion of existing home and community-based service systems. ADPI programs include dementia-capable direct services and supports, translation and implementation of evidence-based interventions designed to improve the lives of persons with dementia and their caregivers, as well as dementia-specific training for formal and informal caregivers.

What Roles Do Volunteers Fill in Delivering ACL Program Services?

As noted, volunteers play an essential role in delivering services for these ACL programs. To learn more about what volunteers do to support these programs, we asked stakeholders to talk about the roles of

volunteers in the programs they manage or the programs to which they contribute. Stakeholders provided the following examples of what volunteers do:

SHIP volunteers ...

- conduct outreach to Medicare beneficiaries to provide education, answer questions, troubleshoot, and assist with enrollment.
- provide one-to-one assistance to assess client health services needs and match them with health plans.
- give public presentations at education or training events.
- recruit and train new team members.

ADPI volunteers ...

- act as conduits to the community to help identify individuals with dementia and encourage them to get diagnosed.
- support activities in libraries, such as setting up music or memory programs.
- train home-delivered meal drivers to recognize individuals experiencing cognitive decline.
- run support groups and educational workshops.
- provide respite relief and emotional support to caregivers.
- provide one-to-one engagement and socialization to help reduce isolation and loneliness.
- provide excursions for people with dementia and their caregivers.

OAA program volunteers ...

- deliver meals to individuals' homes and serve food at congregate meal sites.
- teach health promotion and disease prevention classes.
- organize activities in senior centers.
- support family caregivers.
- provide transportation assistance.
- provide legal assistance.
- assist tribal members with transportation, meals, socializing, and home repairs.
- visit long-term care facility to help meet residents' needs, educate residents about their rights, and help solve problems to address resident complaints.

NWD volunteers ...

- may serve on leadership teams, representing consumer stakeholders and making sure that the consumer voice is included
- coordinate information referrals, including conducting outreach and answering information referral calls
- support person-centered counseling, including one to one engagement with individuals and families.
- support activities to prevent social isolation, such as writing letters and cards, conducting outreach calls, and providing support and connecting clients to services.

How Important Are Volunteers for ACL's Programs?

Based on the volunteer roles listed above, we know that volunteers are critical for ACL programs. But how essential are volunteers, and could the programs

succeed without them? When asked these questions, ACL staff shared the following insights:

Volunteers are basically the building block all OAA programs operate on. I just know that volunteers are essential workers to the network. They make a difference, and we couldn't survive without volunteers as a national aging network at this time.

—ACL Regional Administrator

Tribes rely on volunteers to fill in the gaps when programs do not have adequate staff. Title VI funds may not be enough to support our programs without volunteer help. We literally couldn't get along without them.

—ACL Director of the Office for American Indian, Alaskan Native and Native Hawaiian Programs

In some states or local jurisdictions, volunteers are running their nutrition program. All the stuff you would expect a paid staff to do, the volunteers are doing.

—ACL Director of the Office of Nutrition and Health Promotion Programs

Senior centers are so reliant on volunteers, and they're so important to the aging network. And a lot of the congregate meals happen in these centers, and they're relying on the volunteers to help with those. The home-delivered meals also wouldn't be delivered without the large number of volunteers that are involved. Even transportation: you've got volunteers helping to provide transportation, and that's so important for older adults.

—ACL Regional Administrator



Volunteers play a huge role in our programs. Many of our grantees actually use their volunteers as part of their match for their funding. Programs that are utilizing volunteers, for them it's a method of sustaining a lot of the work that we fund. So, it's a very important component.

—Lead for ACL's Alzheimer's and Dementia Initiative



There may be one or two paid staff, but the rest are volunteers who give their time [for senior centers or in adult day programs]. The entertainment that comes in, the singing groups, and arts and crafts—a lot of that is largely volunteer and really allows a program to offer a range of opportunities and activities that wouldn't be possible if you had to pay somebody to have on staff. So when we say that the aging services network is heavily volunteer based, that's absolutely true, but in turn those volunteers and the volunteer hours are used by programs as in-kind match, so there is a dollar value to them.

—Director, ACL Office of Supportive and Caregiver Services

The use of volunteers for our programs is essential. Across the board with our programs, there just isn't enough funding to go around to support the work that needs to be done. If we did not have volunteers, we would be reaching only half of what we're currently reaching. Volunteers are committed individuals that are able to provide services to, in my case, Medicare beneficiaries at the local level, in their own communities. They are able to bring the local perspective of what's happening in their communities.

—ACL Director of the Office of Health Information Counseling

How Do the Programs, Communities, and Clients Benefit From Volunteers?

As the quotes from ACL staff members illustrate, volunteers have the potential to provide real tangible benefits to programs and clients. Some of these benefits might be lost if programs relied exclusively on paid staff.

When asked about the specific benefits of volunteers to programs, communities, and clients, stakeholders highlighted the following key themes:

Volunteers ...

- enhance programs' capacity to serve clients and respond to the needs of the community (e.g., increased service offerings, expanded hours of operation, faster response times, shorter wait times).
- know their communities and the clients, and are able to contribute local knowledge and better identify and respond to community needs.
- may be better able to connect with hard-to-reach individuals or groups (e.g., rural populations, tribal elders, non-English-speaking individuals, persons living in long-term care facilities).
- bring diverse skill sets, including language skills, professional expertise, and avocations such as playing musical instruments, dancing, painting, woodworking, and other crafts.
- are able to spend more time with clients and can identify mental and physical health risks which can be addressed by ACL programs. They can be highly present when interacting with individual clients. This provides an opportunity for clients to have meaningful social interaction and to feel seen and heard; volunteers likely have less time pressure and other work-related pressures than paid staff.
- are peers (rather than professionals) with whom clients may be able to better identify and connect, which may enhance clients' willingness to participate and engage.

Volunteers may be retired professionals with background in medicine or law, for example. I could never hire a this type of expert, who donates their time to provide their expertise in training and technical assistance. We don't have those kind of resources financially to pay them.

—Executive Director, LTCOP of San Luis Obispo County, California

What volunteers bring are skill sets. They bring different things that they can educate each other on, and they can educate other people.

—SHIP Volunteer



Essentially, we're force multipliers or we're extenders: we're additional people, eyes, hands, hearts that can go out and connect with a resident during times that Ombudsman program staff is occupied. With maybe more serious cases, like financial or physical abuse, but at the same time, there are hundreds of residents in other facilities who, just because they don't have a dire need, don't get on the radar. So, having volunteers available to go out—even if it's just a walkthrough and say, you know, “hi, how you doing”—is valuable.

—OAA LTCOP Volunteer

Those local volunteers have an understanding of what pharmacies are available. Through their work with beneficiaries, volunteers may know if a particular pharmacy is difficult or good to work with and are able to provide more complex, in-depth assistance to beneficiaries trying to navigate something like a pharmacy network. The 1-800-Medicare national level call center would never be able to do that. They don't have the time to do that, nor would they have the knowledge or skills. And so, that's a real key piece of my mind, the value of the volunteers and the local network of volunteers. They really know the folks in their community and the local issues that are going on that may impact the decisions or how they're able to access the benefits.

—ACL Director of the Office of Health Information Counseling

They help build our program, because they come in, and they say, “Hey, I've got this thing I want to do. I've got this skill I want to offer.” So, it's not just them filling vacancies or slots. They come in and say, “Hey, could we do this, this new activity?” or “I'd like to teach this class.” That's the thing that we really love. And so, we're open to those kinds of things. And our volunteers bring that up.

—Executive Director, Senior Center

What Is the Benefit of Volunteering to Volunteers?

In addition to providing benefits to programs, communities, and clients, volunteers themselves report experiencing benefits from volunteering.

When asked about benefits to volunteers, stakeholders highlighted the following key themes:

Volunteering ...

- provides a social activity for volunteers that allows them to be active and engaged, build relationships, and connect with others.
- gives volunteers a sense of purpose, meaning and gratification, and an opportunity to give back.
- contributes to volunteers' health, quality of life, and well-being.
- helps mitigate social isolation and loneliness, especially for older adult volunteers.

It makes me feel good about myself to be able to help people. It breaks my heart when I see people that are struggling to either buy insulin or pay for their food. And that's real. It keeps my perspective real on what's really going on, gives meaning to my life.

—SHIP Volunteer

It makes me feel good. And the reason I volunteer at all is because I feel like I've been so incredibly blessed that I want to pay it forward. And this is part of doing that. And I enjoy working with my wife because I feel closest to her when we're doing stuff like this. It is just a win win, win win, win.

—OAA Home-Delivered Meals Volunteer (volunteers with his wife)

This may be the most worthwhile work I've ever done.

—OAA LTCOP Volunteer

In addition to the assistance provided to the program, volunteering has been shown to be good for a person's health to help someone with socializing and remain active in the community, and that's something that you can't quantify.

—ACL Regional Administrator

It's fun. We get the opportunity to help other people, to make a contact with them to help make sure they're safe. They're good, friendly people, and we build a relationship, a connection with them.

—OAA Home-Delivered Meals Volunteer

What Do Volunteers Say About Their Experience?

As part of the interviews, we talked with six volunteers⁴ who shared information about their roles and experiences. All volunteers were older adults who had volunteered with their program for several years. Most importantly, all volunteers reported being very happy with their volunteer experience and feeling a great sense of satisfaction from volunteer work. The excerpts below highlight some of the experiences the volunteers shared in their own words.

OAA LTCOP volunteer (62 years old) who had been volunteering with the program for 7 years and currently serves as temporary part-time LTCOP employee.

What is the volunteer role you previously had with the program?

Our role is to go out at least once a week to see each facility. As requested, we also participate in scheduled care conferences where the resident or the resident representative and the staff get together and try to identify the best way of meeting the resident's needs. When we go visit, we're looking at a variety of things. One, in general, how do the residents look? Are they clean? Are they comfortable, are they able to interact, how do they think things are going? We ask open-ended questions that are intended to identify issues from their perspective. And of course, what we do initially is introduce ourselves as advocates for the residents and ask them if there is anything we can help them with. We also take a general look at the facility itself. Are the fire exits clear?

⁴ Two volunteers from an OAA home-delivered meals program, two volunteers from local LTCOPs, and two volunteers from a SHIP program.

Is the temperature reasonable? When it gets hot in the summer, is their AC system working effectively? So, we serve a number of roles, and we try to find solutions in by working with staff while we're in the facility, but for things that we can't resolve, those go back to our program director.

OAA LTCOP volunteer (74 years old) who has been volunteering with the program for 8 years.

What are some of the reasons that you have stayed with the program for so long?

I can't say enough positive about my level of admiration for our director and what she does. She's been very inspirational for me. Actually, part of the reason that I continue to do what I do is that I get acknowledgement from her; I get support. And also, she inspires me to want to continue to act in this capacity. And I guess the small victories: just feeling like I'm making a difference in somebody's life, even if it's not like they talk about. I feel like it has been a good fit for me. I feel like I've been able to make a contribution, and I look forward to continuing that.

OAA home-delivered meals volunteer couple (60 and 67 years old) who have been volunteering for 5 years.

If you were to rate your volunteer experience on a scale from one to five, with one being extremely dissatisfied and five being really happy with it, how would you rate it?

Five, definitely. [The program director and volunteer coordinator] are so well organized, so efficient. They are just on top of everything and

work well together. They gave us information to show us how the home-delivered meal clients are selected, the processes the nutrition program goes through to prepare the meals, and what information they gather. They really give us a lot of information. If we do [have] concerns, we share them with the program for further follow-up. For example, at the hospital, where the meals are prepared, there was a little bit of trouble with the meals leaking out of the kind of container they had them in, and they fixed that. So, they follow through when you do let them know what's wrong. They do what they need to do to get it fixed so that people get good hot or cold meals.

SHIP volunteer (75 years old) who has been volunteering with the program for 14 years.

Do you feel your contribution is appreciated?

Yes, I do. I don't think I would do it if I didn't. But, you know, part of that comes from the clients, too, because they do appreciate us. And our program liaison is so appreciative of us. If anyone is ill, she sends cards; she's always there. You know, I feel so supported. She lives a long way from where I live, but I was in the hospital in 2019, and she came to visit me in the hospital. And it was a long wait, on a Saturday, so, it wasn't a workday for her. So, I think that she does show her care. The whole agency cares for us. And they know that without the volunteers, they can't do it all.

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