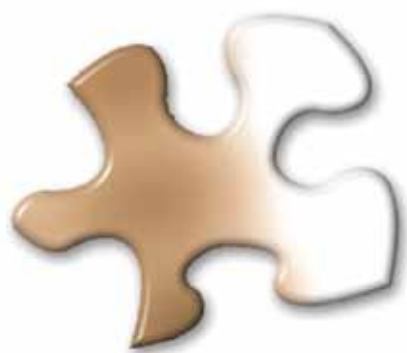


# Front Porch partnership

identifies needs,  
fosters collaborations and  
deploys technologies for  
older adults



**Strategic partnerships with organizations, universities and forward-thinking vendors enable this nonprofit to create, test and provide products and services to help older adults live ‘more independent and fulfilling lives’**

*by Marilyn Larkin, MA*

“Where fresh thinking thrives” is the phrase that the Front Porch Center for Technology, Innovation and Wellbeing (FPCTIW) uses to describe itself on

its website. That phrase also applies to the organization’s approach to partnerships—whether with other organizations or vendors—because creative partnerships are key to its successful deployment of technologies to help older adults.

“Partnerships are in our DNA,” affirms Kari Olson, chief innovation and technology officer of Front Porch and FPCTIW president. Headquartered in California, Front Porch is a family of nonprofit organizations that includes

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## Front Porch partnership identifies needs, fosters collaborations and deploys technologies for older adults *Continued from page 62*



*Resident Gary Groot uses the CyberCycle at Front Porch's Carlsbad By The Sea Retirement Community in Carlsbad, California*

the FPCTIW, Front Porch Communities and Services, Front Porch Management Services, Front Porch Development Company, and CARING Housing Ministries.

Front Porch itself was created as a result of partnerships. In 1999, board members of California Lutheran Homes and Community Services, Pacific Homes Corporation, and FACT Retirement Services realized that by merging support operations such as finance, information technology and human resources, they could create a system that would strengthen the missions of all three organizations. In 2006, Sunny View Retirement Community in Cupertino, California, joined the group. The partners created four foundations that raise money to support programs and services ranging from resident assistance and affordable housing to life enrichment programs, faith-based services and capital projects.

The FPCTIW was formed in 2009, also as a result of a partnership—in this case, a collaboration between Front Porch and a vendor, Dakim BrainFitness, Inc. According to Olson, in 2007 Dakim founder Dan Michel showed Front Porch CEO Gary Wheeler an early prototype of its cognitive fitness program. Wheeler was excited about the program, and the FPCTIW eventually was formed in part to help Front Porch residents and staff test early versions of the software.

“What surprised us was how eagerly everyone engaged in the emerging program,” Olson says. “We were a bit concerned that people would be intimidated by the technology, especially in the alpha-beta testing stage. But we found a huge appetite and enthusiasm for doing just that. A lot of feedback generated from this pilot went into Dakim product development—and we continue to do similar testing today.”

While continuing its relationship with Dakim, the FPCTIW has developed relationships with other carefully selected vendors who can work in a collaborative setting that includes multiple partners. “From our perspective, successful vendor relationships are best described as true partnerships, where the vendor partner doesn’t just deliver a product, but is engaged in the full spectrum of what it takes to make a program successful,” Olson states. “This includes helping in an ongoing way to integrate the product into our culture, and doing training, handholding and whatever else it takes to accomplish our mutual goals.”

Colin Milner, founder and CEO of the International Council on Active Aging® (ICAA), observes that “the concept of vendor as partner is critically important for the active-aging industry. Vendors who understand the industry’s needs and strive to meet them—often by making significant changes or modifications to their product lines based on our members’ feedback—are the ones we want to be working with on an ongoing basis,” he stresses. “In recognition of vendors who go above and beyond in supporting ICAA and its member organizations, we renamed our ‘Preferred Vendor Program’ to the ‘Preferred Business Partner Program.’ This nomenclature reflects the way we all can best work together to meet the needs of our constituencies. And, of course, partnerships among organizations, and between organizations and funding sources, are important for expanding the breadth and scope of services the industry has to offer.”

Following are three examples of how the FPCTIW leverages partnerships—particularly with vendors—to meet its mission of “explor[ing] innovative uses of technology to empower individuals to live well, especially in their later years.” (For more information on industry partnerships, see the article in the

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March/April 2013 issue of the *Journal on Active Aging*®.)

## eHealth community for older Koreans

In 2011, the FPCTIW was among 15 community groups that received a two-year California Broadband Adoption Model eHealth Communities award. As the only group addressing the needs of vulnerable older adults, the FPCTIW was tasked with creating a Model eHealth Community for Aging (MeHCA), with a focus on the Koreatown neighborhood in Los Angeles. The goal of the two-year project is to use broadband-enabled technology to proactively support the health and wellness of this underserved, low-income population, and improve access to care. At the end, the FPCTIW's research partner, University of California–San Francisco, will compile outcomes data and publish the results, according to FPCTIW executive director, Davis Park.

Although MeHCA has expanded to two senior service centers in the Los Angeles region, the project originally targeted a pair of affordable-housing developments in Koreatown with a total of about 450 residents ages 77–85, most of whom speak only Korean. This community also has a large group of residents who are hearing impaired. “We looked at these populations and noticed a high incidence of diabetes and high blood pressure, and so we decided to start by tackling those issues,” Park says. “We learned that although some of the local social service, seniors and adult day centers offered workshops on these topics in Korean, English and/or American Sign Language, the workshops were not provided on a regular basis. In addition, it was difficult for many residents to participate.”

Therefore, the FPCTIW sought to “empower as many Koreatown residents as possible with health information,” says Park, with a multipronged, technology-



*A Korean elder is trained on using remote patient-monitoring equipment in Los Angeles, California*

driven approach, delivered through various partnerships. Programs were developed in four key areas:

**Computer literacy/self-health knowledge.** The MeHCA grant covered the provision of eHealth equipment and implementation support valued at approximately US\$307,000. The FPCTIW used some of that equipment to run computer classes in the community, focusing on giving residents rapid access to reliable health-information sites. Examples include the Alzheimer's Association and Medline Plus sites, which provide information in multiple languages, including Korean. The program depends largely on volunteers, who are key partners in the FPCTIW's work, Park notes.

**“Big-screen” health.** To provide even greater access to health information, the FPCTIW is conducting a pilot program to deliver health-information workshops to Koreatown residents via videoconferencing. “We approached agencies that were already offering health-information workshops, and offered to partner with them around the technol-

ogy,” Park explains. Working with the Korean Health Education Information and Research Center (KHEIR), for example, the FPCTIW facilitates a live interactive broadcast in Korean between the primary site, where the instructor is located, and the two affordable-housing communities as well as the senior service center in Koreatown.

**Teleconsultation/remote patient monitoring.** For the teleconsultation part of the project, the FPCTIW partnered with Central City Community Health Center in Los Angeles, which provides podiatry consultations for people with foot problems. “We have a medical technician from the health center at our end, and patients lining up in the community at the other end,” Park explains. “The patients are excited to have someone actually look at their feet and provide recommendations, and the health center is providing the service pro bono because they want to see and understand how it all works.”

For the remote patient-monitoring component, the FPCTIW provides tablet

computers connected to peripherals that include a blood pressure cuff, weight scale, glucometer and oximeter (which measure the amount of sugar and oxygen in the blood, respectively). “Patients check into this device at least once a week,” says Park. “The data is monitored by a bank of nurses at yet another partner, Advantage Home Telehealth in Buffalo, New York.”

**Electronic health records.** To help partner community clinics in Koreatown move from paper to electronic health records, the FPCTIW has deployed volunteers to support the planning and implementation process.

Although the partner organizations willingly participated in the pilot programs, the FPCTIW faced a number of challenges in setting up and delivering them, Park acknowledges. “Every one of these programs had technical issues, and dealing with them took most of the first year of our grant,” he says. “First, we had to get all the equipment set up and in working order. That was huge. With respect to the videoconferencing and basic computer literacy instructions, for example, it’s difficult to control activity at two sites when dealing with beginner users. We had to rely a lot on our volunteers to help people who had questions.

“Developing the curriculum for the ‘self-health knowledge’ component also was difficult, because although it’s relatively easy to find low-literacy health information online, it’s not so easy to find that information in a different language,” Park continues. “And because much of what we found was outdated or too detailed, we still had to create our own supplementary materials and translate them.” In addition, although Dakim’s brain fitness program is offered as part of the curriculum, the program is available only in English and is not accessible to people who are hearing impaired. “So while community members who happen to speak English can use it,” Park says,

“it’s missing a lot of people. We’re taking our lessons about language access to Dakim, and advocating for non-English content.”

Do the benefits outweigh the difficulties in setting up these programs? “Absolutely,” Park declares. “We see evidence of the impact in every video conference workshop we hold, every computer health class we teach. We know the programs are hugely popular because they’re being provided in the older adults’ native language. Participants clap at the end of every class because they’re so happy to have this available to them. But,” he adds, “we also hope to demonstrate that these activities have a quantifiable health impact as well. We’ve tracked all participants in our classes with surveys, and our research partner at the University of California–San Francisco has just begun to analyze the data.”

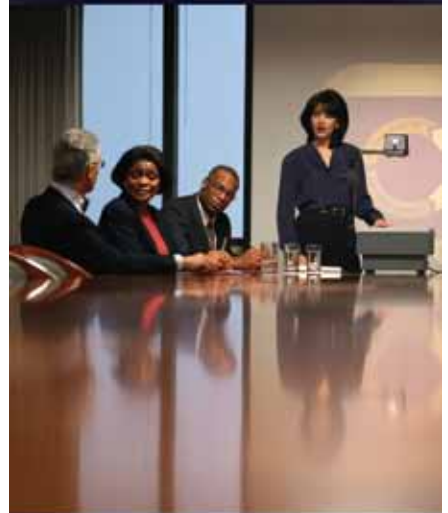
As the end of the grant approaches, how will these Koreatown programs become sustainable? “We had this question in mind at the outset, and the key is in our partner selection process,” Park states. “We chose organizations such as KHEIR that are already involved in the community and doing workshops, as we anticipated that they would integrate the equipment and knowledge we provided to continue the videoconferencing program, for example. We also hope that our partners will talk to each other to figure out ways to keep some of these projects going. That said, after the grant is over, the FPCTIW is still going to play a coordinating role,” he comments. “We’re invested enough to know that these are long-term projects, and we’ll find the resources through additional partners to help them continue.”

### **Storytelling technology**

The FPCTIW leverages vendor partnerships on a smaller scale as well. One example is its partnership with LifeBio,

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# Front Porch partnership identifies needs, fosters collaborations and deploys technologies for older adults *Continued from page 67*



*A woman uses the Dakim BrainFitness System. The Front Porch Center for Technology, Innovation and Wellbeing partners with this company to provide the technology to constituents*

a producer of biographical and autobiographical tools in digital and nondigital formats. Several years ago, Bonnie Stover, Front Porch director of volunteers, was looking for a way to bring together new independent-living residents in Walnut Village, a Front Porch continuing care retirement community in Anaheim. “I wanted a technology tool to help residents moving into the community get to know each other in a relatively short period of time,” Stover explains. She interviewed several vendors of reminiscence programs, but found them “too linear and left-brain. I wanted a program that was more interactive, and would encourage social interaction.” She selected LifeBio “because the program itself encouraged interaction and because the owner seemed like she would be a flexible, available partner.” Indeed, that was the case.

LifeBio classes were conceived to run for eight weeks, with eight to 10 participants. Participants respond online or in a handwritten journal to specific ques-

tions posed by the leader—for example, “Who helped you set your values?”—and bring responses with them to the class. Stover decided to lead the initial program herself, she says, “because I wanted to have a firsthand understanding of whether and how it would work, plus be in a position to give feedback to our vendor partner along the way.” The early feedback was that the class rapidly fell behind on the curriculum. “One person’s story would trigger another’s, and some people found out that they had lived in the same neighborhood or gone to the same school as children. This triggered additional stories and interactions.”

Instead of forcing the agenda, Stover extended that first class for two extra weeks. She then looked at some of the other materials the vendor had sent—for example, projects to capture stories around special days such as Veterans Day or Valentine’s Day. “I quickly realized we would be limiting ourselves if we ran groups with new residents only,” Stover

states. “Much of the program could work in different levels of care, not just with independent residents, especially if we could simplify and focus the questions,” she explains. “I saw a way to use questions to help our caregivers learn more about individual residents and engage with them differently.”

The vendor worked with Stover to make this happen. “She came to the community and spent time with our residents and caregivers to get a good sense of what our needs were,” the Front Porch volunteers director says. “Since we saw the need for customization, she was flexible enough to let us pay to license her materials and change them around as needed, rather than saying we had to purchase and use everything as is.”

Partly as a result of the vendor’s flexibility, the program has been expanded to other Front Porch communities, with each one customizing it based on their unique requirements. “Our Sunny View community in Cupertino is using a really modified approach,” Stover continues. “When a resident first moves in, he or she is interviewed using a specific set of questions selected by the staff. Responses are posted in a decorative notebook in the lobby of the building, so everybody has a chance to get to know something about the new residents.” Front Porch’s Claremont community had a similar need, but also some differences. “The vendor was willing to come in, talk with the caregivers at both locations, and make suggestions.”

Stover also needed a specific type of questionnaire for Front Porch’s Summer House memory care units. “We wanted to be able to use the program as a tool for caregivers to engage in a personal way with the residents, and so we needed basic questions,” she states, “like the types of foods the person likes or doesn’t like.” Stover explained the need to the vendor, who developed sets of questions for the residents as well as family mem-

bers. “She modifies her products, she’s readily available via phone or email and she holds a quarterly webinar for our program participants. This kind of buy-in and follow-through makes it an ideal vendor partnership for us.”

### **Cycling for group health**

Even building a program around a couple of pieces of equipment requires a responsive vendor, according to Kari Olson. “We are in the process of wrapping up a pilot that is a wonderful start-to-finish example of identifying a partner and embarking on a program,” she says. “It began when I was speaking about our work at a large healthcare conference. I said, ‘Never underestimate the power of fun, especially when it comes to older adults. If your program emphasizes fun and well-being rather than health per se, it will be adopted much more easily and you’ll achieve sustained use much more quickly.’ Immediately afterward, the CEO of Interactive

Fitness contacted me and asked how we might partner and work together.”

Interactive Fitness manufactures the CyberCycle, a recumbent bicycle specifically adapted for older adults that also features a virtual reality screen to engage cyclists mentally as well as physically.

Olson talked with the vendor and said she wasn’t interested in simply providing a bike in a Front Porch community. “I wanted to develop a whole ecosystem around it—see how we could motivate people to ride it and engage them in a group health activity.” The vendor agreed and two bikes were piloted, one at Walnut Village and one at Front Porch’s Carlsbad By The Sea in Carlsbad, California.

The FPCTIW involved the residents by setting up a competition between the communities to see which community team put in the most miles. “We got

some wonderful outcomes in terms of health, and we also got wonderful engagement,” Olson says. “People who hadn’t exercised in many years said they felt like the bike was an easy way for them to get started again. On the other end of the spectrum, we had active exercisers who set challenging goals for themselves. But,” she adds, “one of the things that also happened is that the cyclists and staff did what they naturally always do: They started coming up with ideas about how the bike could be improved.”

So the FPCTIW engaged the vendor in a weekly call during which the project team provided feedback about the pilot and what might be improved. An example is the bike seat, which residents thought could be made more comfortable. The vendor “took our feedback very seriously and is using it to inform its product roadmap,” she says.

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## **Key learnings**

Since most programs run under the umbrella of the Front Porch Center for Technology, Innovation and Well-being (FPCTIW) involve partnerships with other organizations and/or vendors, Front Porch Chief Innovation and Technology Officer and FPCTIW President Kari Olson has extensive experience in this arena. She shares below some of her key learnings in initiating and navigating the partnership process:

**Pursue nontraditional partner opportunities.** “As senior living providers, we tend to be locked into our own industry and the people with whom we regularly network,” Olson says—a tendency seen in other fields as well. “We’ve learned it’s very important to expand to the university setting, for

example, and to business settings that may not be currently serving our industry but are interested in it,” she states. “Look for opportunities to present at, or at least participate in, conferences you might not normally consider going to.”

**Look for like-mindedness.** Talk informally with potential partners to ensure that you’re “compatible in how you see the world, that you’re both excited about the same things and that you see the benefits of collaboration in much the same way,” Olson advises.

**Clarify commitments.** Once you decide to move forward, “make sure the commitments are clear and that there’s organizational buy-in on the partnership at every level,” Olson says. “We use memorandums of understanding to de-

fine partner roles and responsibilities from the outset.”

**Set formal plans and processes.** For instance, after the memorandum of understanding is in place, the FPCTIW creates formal project plans with its partners, according to Olson. These include weekly calls or emails to ensure everyone is informed about the status of projects.

**Identify and resolve problems.** “This is a key part of our work, and so we speak up when we uncover problems,” Olson comments. “Dealing with technology makes it especially likely that problems will arise, and when they do, we collect feedback on them, then sit down and talk with everyone involved about what we can each do to make it better.”

# Front Porch partnership identifies needs, fosters collaborations and deploys technologies for older adults *Continued from page 69*



*Older adults listen to a video conference workshop on diabetes at an affordable housing community in Los Angeles, California*

“This responsiveness tells us these are people that listen and show a commitment above and beyond just servicing a bike and training people on how to use it,” Olson states. “These are people we want to work with—and it’s a partnership that will be sustainable for the long term.”

## Looking ahead

The FPCTIW has other projects in the works with various partners, reveals Davis Park. One recently launched project is a pilot with CaringBridge.org (a free social networking site) that aims to connect residents with their families via tablet computers. For another pilot, the FPCTIW is partnering with a nonprofit organization that gives free tai chi classes in the community and is interested in engaging older adults; together, they will work to provide tai chi classes via videoconferencing. Also being explored is a partnership with USC Telehealth to provide telepsychology services in Korean and in American Sign Language. Further, the FPCTIW is starting to build relationships with organizations in Michigan, New York and other states to provide content in Korean for its health-information classes.

“These kinds of partnerships are win-win relationships for organizations and their constituents and for vendors who become valued business partners,” states ICAA’s Colin Milner. “We know that older adults benefit from many technology-based initiatives. But business partners reap benefits, too. They often gain goodwill in an organization or community, and many also engage in conversations that yield feedback, providing the opportunity to significantly improve their product lines. For active-aging organizations, the end result is more effective products and services—and an enhanced capability to support older clients in living well.”

*Marilynn Larkin, MA, is an award-winning medical writer and editor, as well as an ACE-certified personal trainer, group fitness instructor and originator of Posture-cize. She is also ICAA’s Communications Director and a regular contributor to the Journal on Active Aging®.*

**Images courtesy of the Front Porch Center for Technology, Innovation and Wellbeing**

## Resources

### Internet

**Advantage Home Telehealth**  
[www.advtelehealth.com](http://www.advtelehealth.com)

**Alzheimer’s Association (Korean)**  
[www.alz.org/asian/overview.asp?nL=KO&dL=KO](http://www.alz.org/asian/overview.asp?nL=KO&dL=KO)

**California Broadband Adoption Model eHealth Communities Awards**  
[www.ucdmc.ucdavis.edu/welcome/features/2011-2012/08/20110824\\_community\\_ehealth.html](http://www.ucdmc.ucdavis.edu/welcome/features/2011-2012/08/20110824_community_ehealth.html)

**Central City Community Health Center**  
[www.centralcityhealth.org](http://www.centralcityhealth.org)

**Dakim BrainFitness, Inc.**  
[www.dakim.com](http://www.dakim.com)

**Front Porch**  
[www.frontporch.net](http://www.frontporch.net)

**Front Porch Center for Technology, Innovation and Wellbeing**  
[www.fpctiw.org](http://www.fpctiw.org)

**Interactive Fitness Holdings: CyberCycle**  
<http://cybercycle.ifholdings.com>

**Korean Health Education Information and Research Center**  
[www.lakheir.org](http://www.lakheir.org)

**LifeBio**  
[www.lifebio.com](http://www.lifebio.com)

**Medline Plus (Korean)**  
[www.nlm.nih.gov/medlineplus/languages/korean.html](http://www.nlm.nih.gov/medlineplus/languages/korean.html)