



Enabling Aging in Place Promising Practices: Better at Home



United Way helping seniors remain independent.

The following promising practice was prepared following interviews with the United Way BC Better at Home Program team in 2024. Healthcare Excellence Canada (HEC) would like to formally acknowledge the generosity of the Better at Home team in sharing their skills, knowledge, expertise and experiences to form this promising practice.

About Healthcare Excellence Canada

Healthcare Excellence Canada (HEC) works with partners to spread innovation, build capability and catalyze policy change so that everyone in Canada has safe and high-quality healthcare. Through collaboration with patients, caregivers and people working in healthcare, we turn proven innovations into lasting improvements in all dimensions of healthcare excellence.

HEC focuses on improving care of older adults, bringing care closer to home and supporting the retention of the health workforce – with quality and safety embedded across all our efforts. We are committed to fostering inclusive, culturally safe and equitable care through engagement with different groups, including patients and caregivers, First Nations, Métis and Inuit, healthcare workers and more.

Launched in 2021, HEC brings together the Canadian Patient Safety Institute and Canadian Foundation for Healthcare Improvement. HEC is an independent, not-for-profit charity funded primarily by Health Canada. The views expressed herein do not necessarily represent the views of Health Canada.

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Model description

The Better at Home program was initiated in response to the increasing number of older adults who require assistance with non-medical daily tasks to remain independent and engaged in their communities. The model originated from a successful pilot program: the Community Action for Seniors Independence (CASI) initiative. United Way British Columbia (United Way BC), in partnership with the Province of BC, implemented the pilot in five communities from 2010 to 2012. Following the positive results of the CASI pilot project, the Better at Home program was launched in 2012 with funding from the Province of BC. The program emerged from a recognition that, while medical care is essential, many seniors also need support with everyday activities that enable them to stay in their own homes and participate in community life.

Better at Home originally offered a specific set of seven core non-medical services designed to address common needs among seniors. These services included friendly visiting, transportation to appointments, light yard work, minor home repairs, light housekeeping, grocery shopping and snow shoveling. Over time, the program has expanded to include a broader range of person-centered services that are tailored to individual needs (e.g. group activities, prescription pickup, meal delivery). This evolution reflects a shift from a one-size-fits-all approach to a more flexible and responsive model that adapts to the specific requirements of each senior and community.

The primary beneficiaries of Better at Home are older adults living in participating communities across BC. These seniors benefit from the range of services mentioned above, which support their ability to live independently and remain engaged in their communities. The program also benefits local non-profit organizations that deliver these services, as well as the volunteers and paid staff who contribute to its operations. By providing essential non-medical support, Better at Home enhances seniors' quality of life and helps foster a more inclusive and vibrant community.

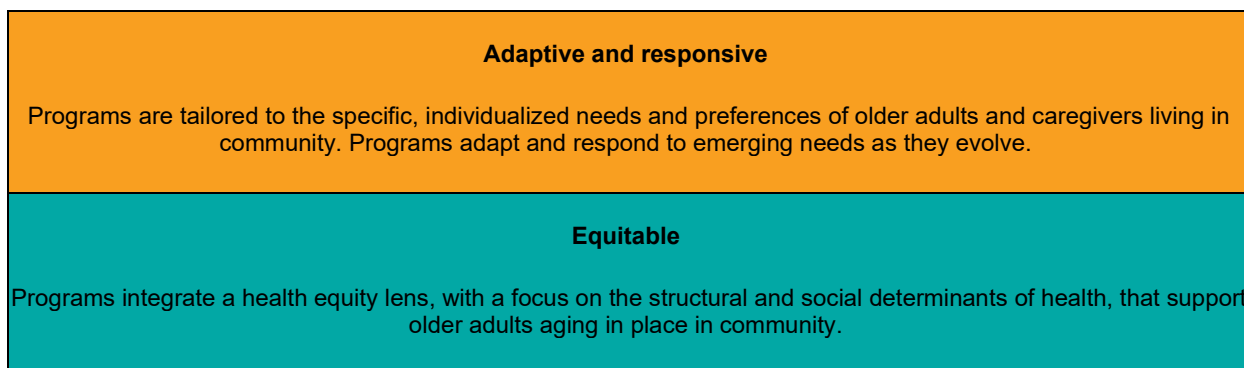
United Way BC has developed the Better at Home model in collaboration with the community-based seniors services (CBSS) sector, which includes non-profit organizations and municipal agencies that offer various programs for seniors. At the strategic planning level, United Way BC's work is guided by community through mechanisms such as the CBSS Leadership Council (a provincially representative body of older persons and leaders working in the CBSS sector) and regional and provincial consultations. At the local community level, the adaptable Better at Home model features a seniors-planning-for-seniors approach, involving older adults and community in the planning, implementation and evaluation of local programs. This ensures that services are tailored to seniors' needs, enhancing their engagement and connection with the community.

The Better at Home model varies by community, depending on available resources, local capacity and community needs, but always complements existing services and addresses seniors' specific needs. Each program is guided by a local advisory committee of seniors and submits regular performance reports to the provincial office. Program coordinators also engage in a community of practice to share best practices and participate in collective learning, ensuring that the program remains community-focused and responsive.

Better at Home is a central component of United Way BC’s broader Healthy Aging portfolio, which aims to support older adults to stay active, connected and engaged in their communities. This portfolio encompasses various programs and services designed to address the diverse needs of seniors (e.g. Better at Home, Social Prescribing, Therapeutic Activation Program for Seniors, Family & Friend Caregiver Supports, etc.). United Way BC’s new Healthy Aging model now requires Healthy Aging-funded programs to form local Healthy Aging Community Collaboratives to strengthen partnerships within and among communities. Agencies are expected to work collaboratively together to support seniors in their communities through improved referrals and coordination within and among other sectors, particularly health partners and local government.

Enabling aging in place principles

Person-centredness is a core philosophy of HEC’s Enabling Aging in Place program. All the principles must be implemented in a person-centred way and reflect a deep understanding of community assets and the needs of older adults and their care partners.



High value

Programs optimize resources used on health and social services relative to outcomes that matter to older adults and care partners over the course of their care journey.

The following reflects how the Better at Home program fulfils HEC's Enabling Aging in Place program principles:

Access to specialized healthcare services – While Better at Home does not provide specialized healthcare services directly, it plays a crucial role in supporting seniors' access to these services by helping them manage non-medical needs that could influence access to healthcare services. For example, transportation to medical appointments might be provided.

Access to social and community support – The program directly supports social and community engagement by offering services such as friendly visiting and transportation to community events. These services help reduce social isolation, a common issue among older adults, and promote active participation in community life.

Access to system navigation support – Better at Home assists seniors in navigating the broader system of care by connecting them to a range of community resources and services. Through its network of local providers, the program helps seniors access additional support and services that can enhance their overall wellbeing.

Adaptive and responsive – The program's adaptive nature is evident in its ability to respond to the evolving needs of seniors. By regularly assessing community needs, the program is able to continuously adjust its service offerings. Additionally, soliciting feedback from participants enables Better at Home to meet the specific requirements of each individual.

Equitable – Better at Home promotes equity by prioritizing equity-deserving groups among its target population of community-dwelling seniors in BC. Service delivery is prioritized to seniors who are experiencing two or more of the following criteria: low or modest income, socially isolated or loneliness, low to moderate frailty, or belonging to underserved groups, including immigrant and ethnocultural minority seniors, Indigenous elders, caregivers, 2SLGBTQIA+ seniors and persons living with disabilities. The program provides some free services as well as some services that are on an income-based sliding scale. This approach helps to ensure that all eligible seniors have access to the services they need, regardless of their financial situation. Any fees for services collected are fed back into the local program to serve more seniors.

High value – The program delivers high value by addressing the essential needs of seniors. By leveraging community resources, volunteers and existing community assets, Better at Home maximizes its impact and ensures that resources are used efficiently. This high value is reflected in the program's ability to provide meaningful support to a large number of seniors across BC.

Funding

Better at Home is funded by the Province of BC through the Ministry of Health. This funding is managed by United Way BC Healthy Aging, which oversees the distribution of financial resources to local non-profit organizations operating in over 260 communities across the province. The program's funding model ensures a consistent and reliable source of financial support, which is crucial for sustaining operations and delivering services effectively.

The governance structure of Better at Home includes oversight from United Way BC and input from the provincial leadership council. This committee provides guidance on program implementation, advocates for community needs and supports the integration of Better at Home into local contexts. Regular reporting to the provincial office ensures accountability and allows for monitoring of performance and progress.

Implementation

Assessing needs and assets: The implementation of Better at Home begins with a thorough assessment of community needs and resources. This process involves collaboration with regional experts, such as seniors' organizations and health authorities, to identify areas with high numbers of vulnerable older adults who would benefit from the program. The assessment helps to determine the specific services required and ensures the program is tailored to meet local needs.

The Better at Home program team: The program coordinators are the backbone of local Better at Home programs and are responsible for tasks such as assessing seniors' needs, arranging services and overseeing program budgets. Services are delivered by a mix of paid staff, contractors and volunteers. Better at Home programs also work closely with other Healthy Aging-funded program staff, such as the community connectors from social prescribing programs who play a vital role in linking seniors to appropriate services and resources. Teams work collaboratively to deliver high-quality services and support to participants.

Target population: The target population for Better at Home is community-dwelling older adults who need assistance with non-medical tasks to maintain their independence and stay connected to their communities. The program aims to reach a broad range of seniors, including those with varying levels of need, different socio-economic backgrounds and different geographical contexts. In particular, older adults experiencing vulnerabilities are a priority (e.g. low-income, isolated, from equity-deserving groups, etc.).

Enrollment: Seniors interested in accessing Better at Home services can be referred to the program or can directly contact their local Better at Home agency (a directory of Better at Home agencies can be found here: <https://betterathome.ca/bah-listing/>). The enrollment process involves an assessment by the program coordinator to determine eligibility and the most appropriate services based on individual needs and circumstances. Program coordinators work closely with seniors to ensure they receive the support that best meets their needs.

Partnerships: Better at Home relies on partnerships with local non-profit organizations, community agencies and volunteers to deliver its services. These partnerships are critical to the program's ability to provide support to older adults and integrate the program into the community. The new Healthy Aging Community Collaboratives will serve to further strengthen these partnerships.

Resources and training: Program staff and volunteers benefit from ongoing training and support through a community of practice. Additionally, they have access to the Healthy Aging CORE (<https://bc.healthyagingcore.ca/groups>) platform, an online network for sharing best practices, participating in learning activities and attending training events. These resources help build the capacity of local programs and ensure that staff and volunteers are equipped to deliver high-quality services.

Adaptations over time:

Service evolution – Since its inception, Better at Home has evolved beyond the initial basket of non-medical services. This evolution reflects the program's commitment to addressing the diverse and changing needs of seniors. New services are added based on community feedback and emerging needs, ensuring the program remains relevant and effective. Promoting social connection also has emerged as a key priority for all services.

Model adaptations – The program model has also adapted to incorporate lessons learned and feedback from participants and community partners. This includes refining service delivery processes, enhancing coordination among stakeholders and expanding the scope of services offered. These adaptations ensure that Better at Home continues to meet the needs of seniors and remains a valuable resource for communities.

The 2022–2023 Evaluation of United Way BC's Better at Home Program Executive Summary identified 21 recommendations across six core action areas, which included the following:

- Increase the provision of non-medical supports.

- Further develop community-based collaborations.
- Transition to multi-year funding.
- Adjust program scope for low-income seniors.
- Expand and centralize supports.
- Address program risks and leverage successes.

Evaluation and impact¹

Better at Home is committed to continuous learning and evaluation. The most recent 2022–2023 evaluation involved extensive data collection via key informant interviews with caregivers, participants and United Way BC staff along with surveys and site visits to Better at Home program locations across BC. Key findings included the following:

Program relevance and continued need – Better at Home remains a crucial service, adapting to changing social, economic and environmental contexts in BC. With the rising number of low-income older adults, the need for accessible, subsidized non-medical supports to maintain independence is increasingly important.

General satisfaction and significance – Participants, caregivers and volunteers expressed high satisfaction with Better at Home, especially regarding subsidies and individualized services.

Achievements and impact – In 2022–2023, the 81 programs evaluated provided 275,014 services to 13,369 participants across BC. Of these participants, 5,142 were newly enrolled, highlighting the program's ongoing ability to reach and support seniors in need. Stakeholders reported positive impacts from their engagement with the program, including improved well-being, even during the challenges of the COVID-19 pandemic.

Progress towards outcomes and objectives – Better at Home is effectively achieving its goals, helping seniors manage daily non-medical activities, reducing social isolation and fostering community engagement among older adults.

Community integration – The program has strengthened its integration within local communities and the CBSS sector, enhancing its role in the continuum of care for older adults in BC.

¹ The evaluation and impact information shared is reflective of information that is currently available at the time of writing this promising practice. HEC would like to acknowledge that evaluation activities are an ongoing process for many promising practices and the type of data collected is influenced by program goals, the length of time the program has been implemented, and the level of resources available to support evaluation.

Responsiveness to diverse and complex needs – Better at Home has been responsive to the diverse and complex needs of participants, though there is potential to enhance its approach to consistently address these needs across the province.

Value of social connection – The program’s focus on social connection is impactful for participants who need it, helping to reduce isolation and support overall well-being.

Operational efficiency – In 2022–2023, 80% of Better at Home programs experienced waitlists, highlighting high demand alongside challenges in attracting and retaining service delivery personnel. While knowledge-sharing tools exist, there are opportunities to further support local coordinators to improve efficiency.

Sustainability and looking ahead – Better at Home has expanded its reach over the past five years but faces capacity challenges. Increased funding and collaboration with community partners are essential for sustaining and growing the program to meet the needs of BC’s aging population.

Keys to success

Community involvement: Engaging local organizations and community members in program design, implementation and evaluation is key to ensuring that Better at Home meets the specific needs of each community and remains relevant.

Flexible service model: The program’s ability to adapt services to changing needs and feedback from participants ensures its continued relevance and effectiveness.

Strong partnerships: Building and maintaining effective partnerships with non-profit organizations, volunteers and other community stakeholders enhances the program’s reach and impact. Most importantly, this is done through building trust via consistent communication and collaboration.

Ongoing training: Providing continuous training and support to staff and volunteers helps maintain high standards of service delivery and ensures that the program operates effectively.

Key challenges

Funding variability: Ensuring stable and long-term financial support is a challenge that requires ongoing attention and strategic planning, especially considering many senior clients are low-income and community agencies often have strained and precarious funding.

Service demand: Addressing increasing demand for services while maintaining equitable access for all eligible seniors is a key challenge that requires strategic management and overseeing of community assets and gaps, as well as recognition of the needs of vulnerable populations.

Coordination complexity: Navigating the complexities of coordinating services across multiple communities and stakeholders can be challenging, necessitating strong organizational and communication skills.

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