

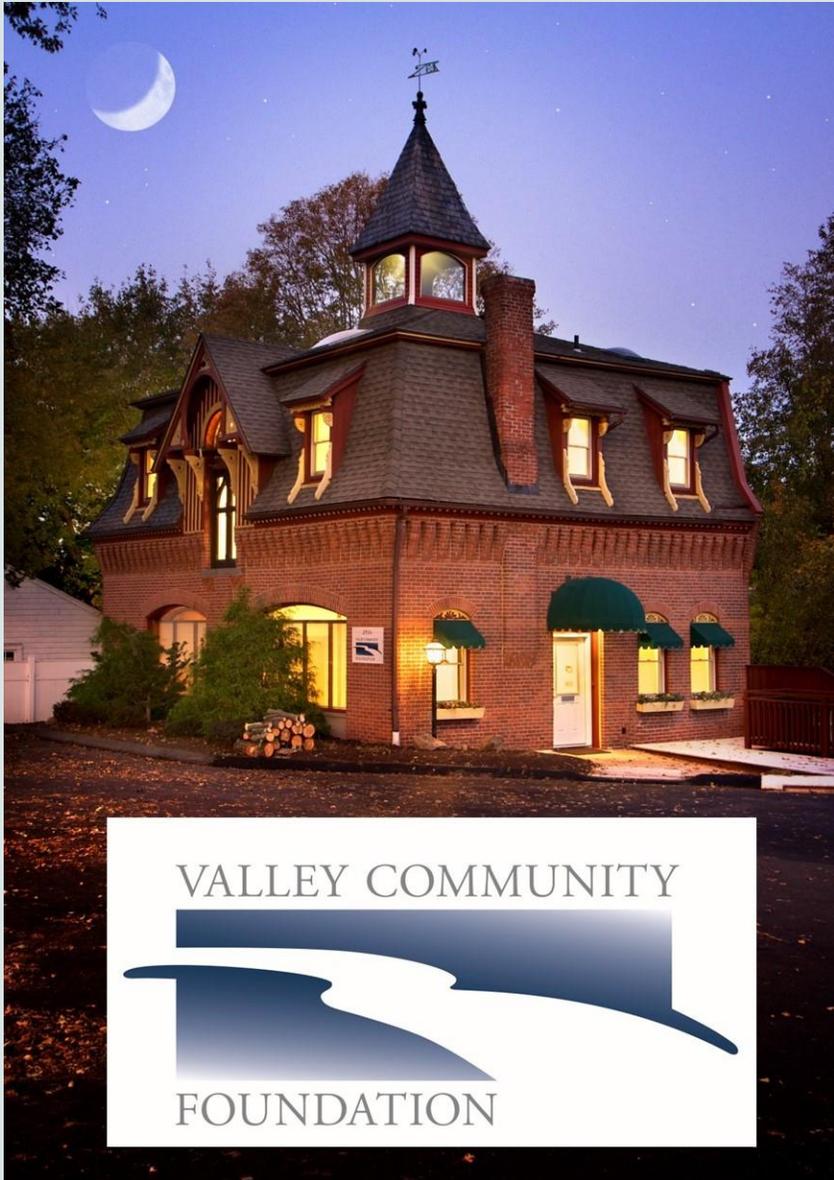
Aging in Place in the Valley

Challenges....

Barriers....

Opportunities....





A VALLEY COMMUNITY FOUNDATION
LEARNING SESSION.....

Current Challenges

Economic Challenges

Poor Long-Term Financial Planning

Lack of Community Connections

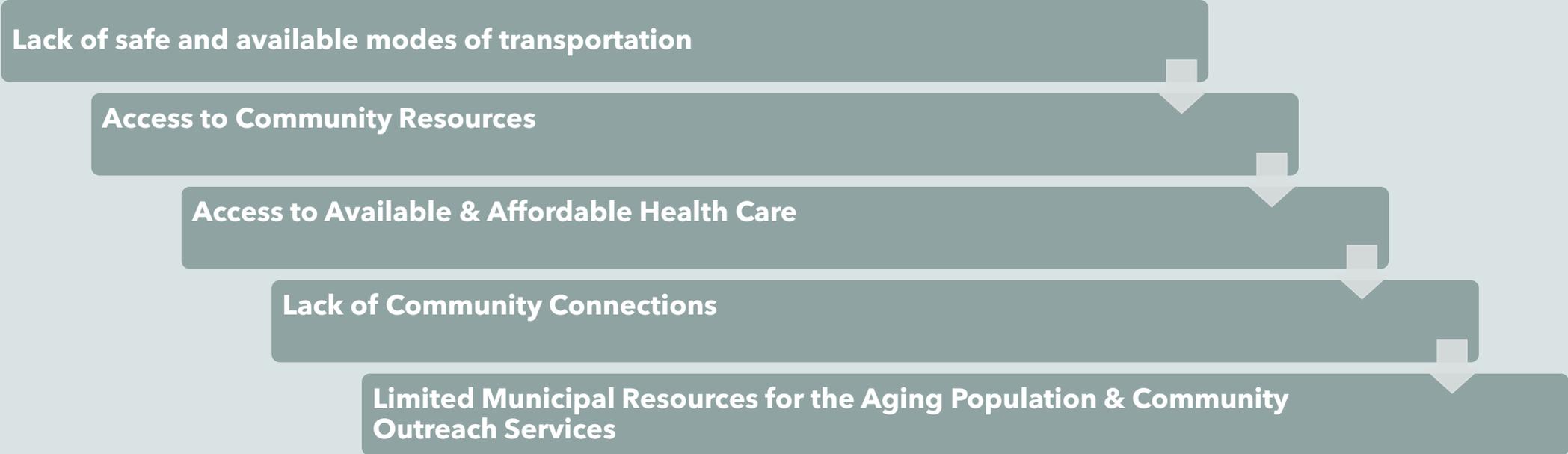
Lack of Community Outreach

Lack of Local Family Support



Barriers

Lack of safe and available modes of transportation



Access to Community Resources

Access to Available & Affordable Health Care

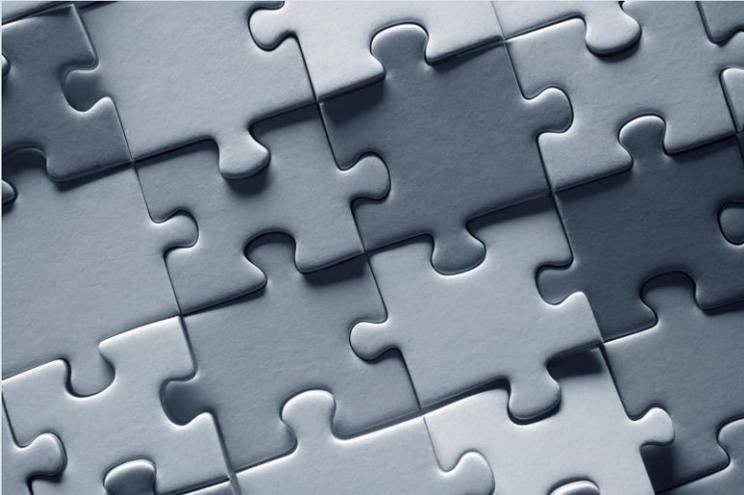
Lack of Community Connections

Limited Municipal Resources for the Aging Population & Community Outreach Services



**WHERE THERE ARE
CHALLENGES AND
BARRIERS ...THERE IS
OPPORTUNITY.....**

Please meet our Panel of experts
for tonight's community Learning
Session



**Mary McNelis, Director of
Community Services,
Seymour CT.**



**David Morgan, CEO &
President of TEAM Inc.**



**Jessica Kristy, Director of
Health & Lisa Trupp, Health
Educator, Naugatuck Valley
Health District**





AGING IN PLACE:

The Role of Senior Centers

Seymour Community Center
Mary McNelis
Director of Community Services





WHAT DOES “AGING IN PLACE” MEAN?

It is more than just housing:

Remaining safely and comfortably in one's home and community through:

- Purpose
- Social Connection
- Health supports
- Transportation

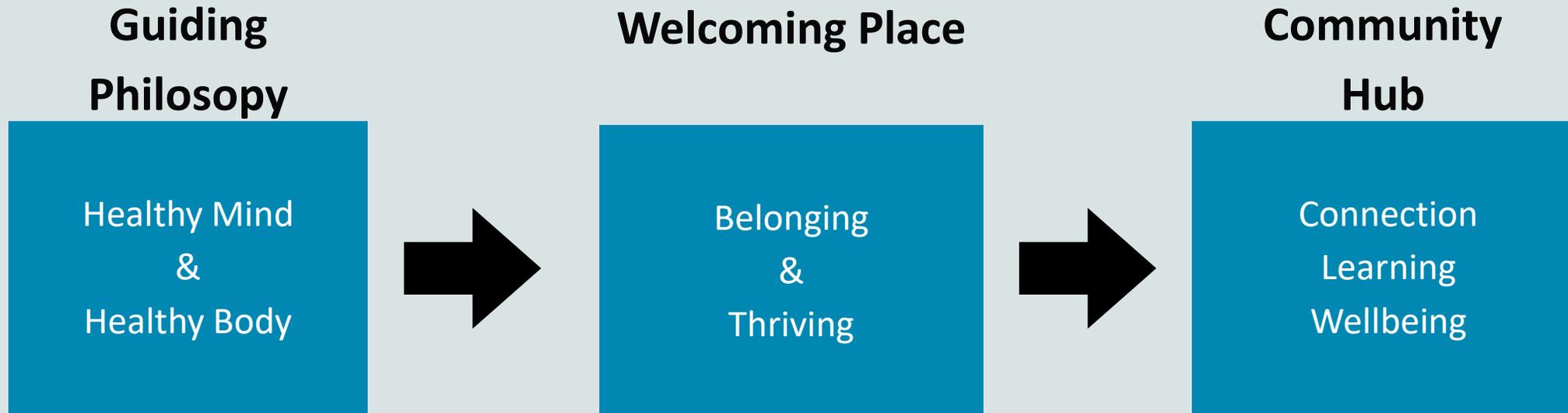




CREATING A PURPOSE

FOR OUR ACTIVE ADULTS/SENIORS

“THE COMMUNITY CENTER”



SOCIAL CONNECTION & BELONGING

Membership for 50+

Create a welcoming home away from home to combat isolation as core families relocate.



- Clubs
- Socials & Lunches
- Trips
- Volunteer Opportunities
- Peer Support & Friendships that improve mental health



HEALTH & WELLNESS

Sports & Fitness

- Strength & Balance
- Yoga/Flexibility/Mobility
- Pickleball
- Dance & Movement

Wellness Workshops

- Healthy Heart
- Memory Screening
- Hearing loss & Dementia
- Flu Clinic

Activities

- Arts & Crafts
- Bingo
- Billiards
- Movies



LIFELONG LEARNING

Purpose Fuels Mental Health & Self-Worth

Guest Speakers, Classes, Volunteering Rolls

Technology Education & Assistance

Arts & Crafts & Creative Workshops



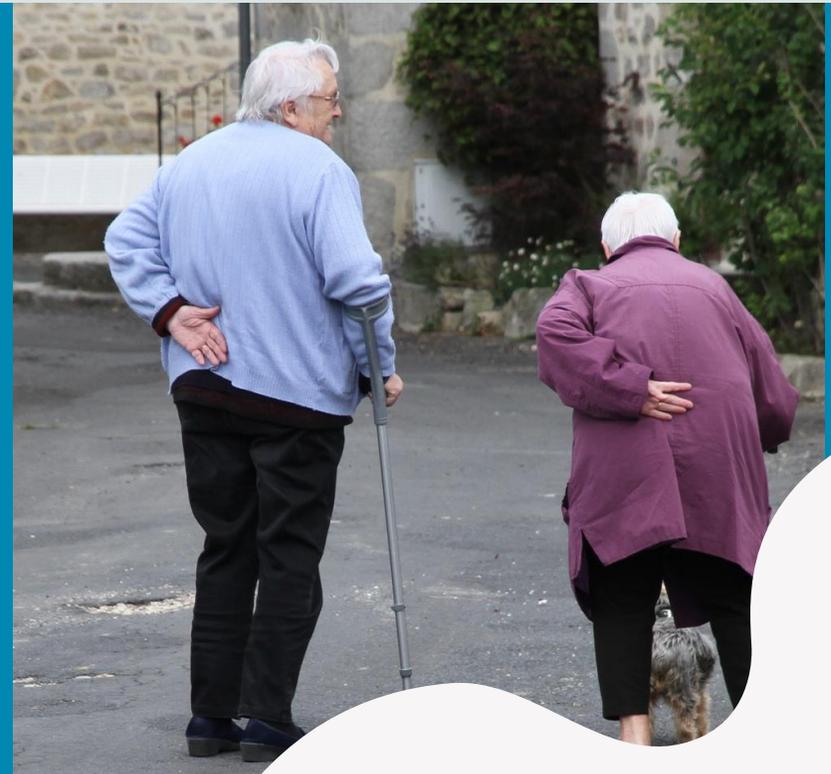
TRANSPORTATION & ACCESSIBILITY



Essential for Active Adults that are no longer driving

- Community Center
- Medical appointments
- Errands

Increases participation, reduces missed appointments and maintains independence





Social Services

Elderly Support for Independence

- Renters Rebate
- Fuel Assistance
- Medicare/Medicaid
- Social Security
- SNAP & Farmers Market

MUNICIPAL AGENTS



PARTNERSHIPS & COMMUNITY COLLABORATION



Local health providers, commissions, schools, and nonprofits

Intergenerational programs build mutual understanding

Shared resources extend our program reach and sustainability



CHALLENGES TO OUR CENTERS

CHALLENGES

- Funding
- Limited Programming Space
- Transportation gaps
- Diversity of Population

OPPORTUNITIES

- Collaboration with Community Organizations
- Increased Partnership with local schools
- Reaching those who can't reach us
- Nurturing positive relationships



AGING IN PLACE — A COMMUNITY EFFORT

- Aging in place isn't just about staying at home — it's about staying part of a community
- Senior centers provide connection, health, transportation, and purpose
- Support from community partners, volunteers, and funders keeps these services going

THANK YOU

Programs & Services



Self-Sufficiency; Individual & Family Support and Empowerment Services

Basic Needs & Empowerment; Services & Referrals

- Emergency Assistance & Crisis Intervention / Case Management
- Home Heating & Utilities Assistance
- Housing Assistance (rent/other)
- Food Security including SNAP Outreach/Assistance & Project MANNA
- Childcare Access & Supports (including Diaper Need)
- Community Health (Workers & Initiatives) / Case Management
- Health Insurance & Other Supports
- Limited English Proficiency (LEP)
- Elderly Support Services including Incontinence Supplies
- Holiday Toys/Giving - Toys4Kids!

Capacity Building for Income & Asset Accumulation

- Education/Training & Gainful Employment (GAIN)
- Financial Literacy & Income Tax Assistance (VITA)

Older Adults & Elderly Services

Meals on Wheels & Elderly Nutrition Programs

Medical Transportation

Homemaking & Volunteer Caregivers

Elder-Care & Comprehensive Care Management

Child Care; Head Start & Early Childhood

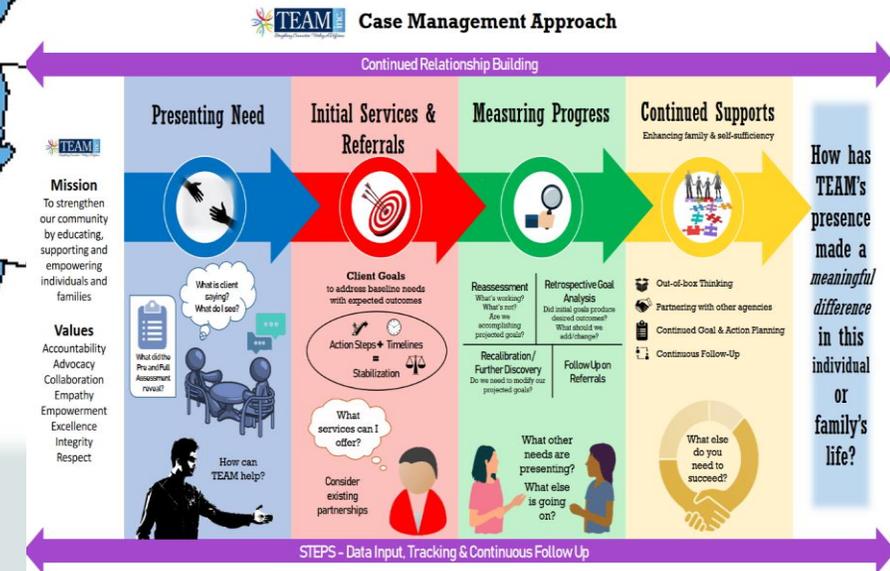
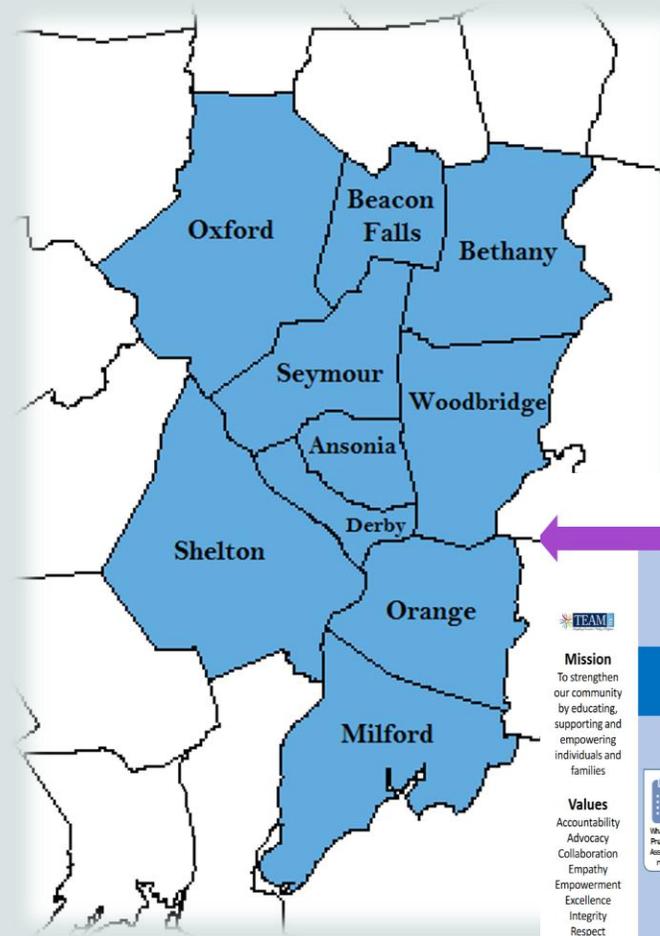
Prenatal - Age 5; Maternal Health; Multi-Generational Approach

Behavioral Health; Physical Health & Wellbeing

Food Security and Child Nutrition; Nutrition Education

Diaper Bank & Family Resources

Other Child & Family Development Initiatives (Legal Aid; Children w/Disabilities; Family Wellbeing)





Programs & Services



- 5,086 homes avoided crisis via home-heating assistance supports
- 104,451 meals served to 412 older adults through Meals on Wheels
- 11,196 meals served to 328 older adults through community meal programs
- 33,954 incontinence products provided to 145 older adults
- 7,121 medical transportation rides provided to 201 older adults
- 75 older adults received elderly care management to ensure independence and overall well-being
- 2,612 hours of services provided to 137 older adults - including homemaking & volunteer services such as shopping, chores, outdoor work, telephone reassurance, transportation, and friendly visits
- 143,833 meals (more than 172,000 pounds of healthy foods) distributed to food pantries through Project MANNA
- 269,790 diapers provided to 640 children & families
- 189 homes received emergency assistance to maintain or obtain safe, affordable housing
- 1,313 children improved their nutrition via healthy meals & snacks and Family Child Care partnerships
- 45 individuals provided employment services and enrolled in education & training toward gainful employment
- 402 Family Child Care providers strengthened their business management operations & quality child care access
- 627 young children accessed childcare, developed school readiness skills, and obtained medical & dental care - and working families had dependable & affordable year-round child care access
- 109 young children diagnosed with special needs & provided critical services to ensure school readiness & success
- 142 child referrals & supports made possible as a result of preventative health screenings
- 185 homes & 488 individuals received more than \$1.2



Meals on Wheels

- Eating a meal that meets nutritional standards
- Providing daily social contact & light tasks support
- Safety check (individual as well as home safety/security)
- Care Coordination including Healthcare Providers

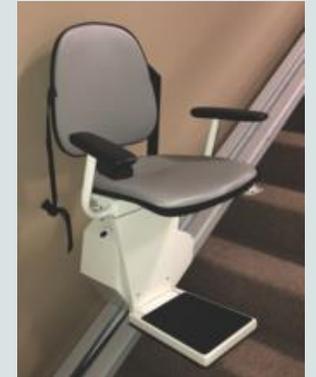
Allows older adults (60+) to age in place within their home & community (where 90% want to be and delays or prevents the need for more costly institutional services. Meals on Wheels has helped deter medical complications - TEAM has multiple occasions where our staff/driver has arrived to find that they have needed immediate medical assistance (examples include broken hip, stroke)





Meals on Wheels

- **412 older adults** served in the last year **104,451 meals**
- 67% of participants are low-income (100FPL) & near poor (150FPL - 45%)
- 72% live in isolation
18% severely disabled
- 5% Alzheimer's & Related Disorders
- 64% at-risk institutionalization & hospitalization
- Almost 1 in 5 (19%) are 90 years of age or older





Community Meals



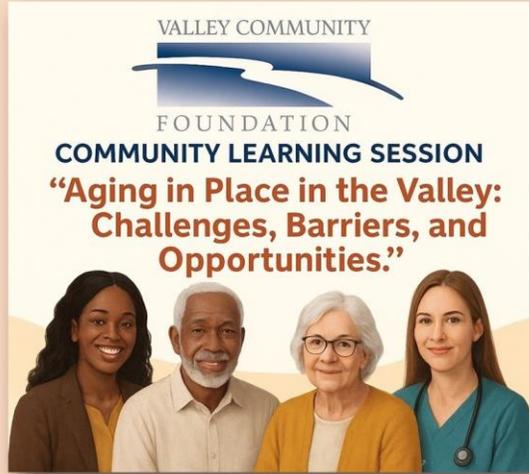
Fighting Isolation through
Nutrition & Community



11,196 meals served to 328 older
adults through community meal



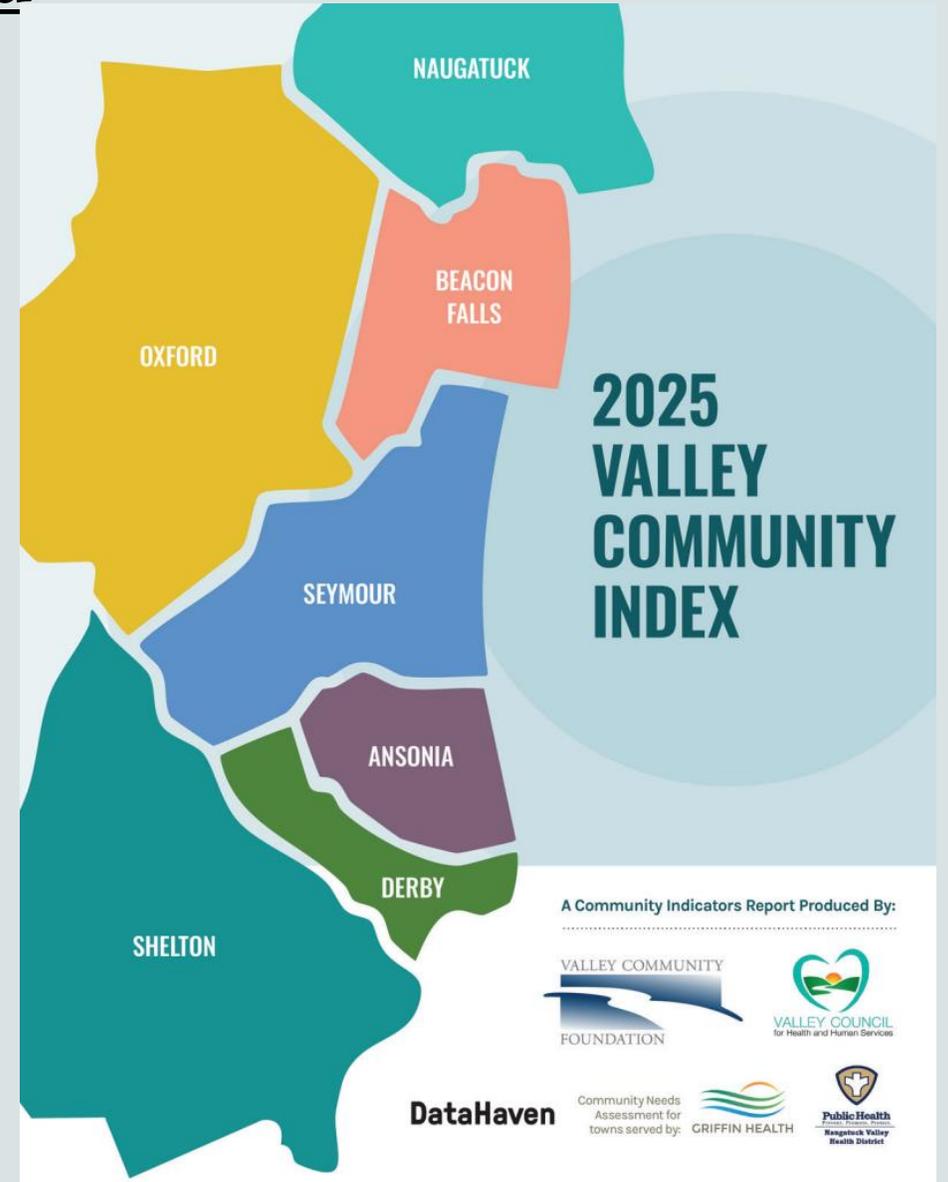
Thank You



Wednesday, November 19, 2025
4:30pm-6:30pm
Seymour Community Center
20 Pine Street - Seymour



#	TEAM Inc - Prioritized Issues & Gaps
1	Older Adults/Seniors - Health & Social Well-being
2	Affordable Housing
3	Food Security
4	Employment & Training Opportunities
5	Child Care / Early Childhood Education





Public Health
Prevent. Promote. Protect.

Naugatuck Valley Health District



Aging in Place

NOVEMBER 19, 2025

SEYMOUR COMMUNITY CENTER

Social Drivers of Health

We use the social drivers of health categories from the County Health Rankings' Model of Health as a way to ensure that our efforts include the full range of factors that influence health.



Clinical Care is anything relating to the direct medical treatment of people. Easy access to affordable, quality health care that treats you with dignity can prevent disease and lead to earlier disease detection. This social driver includes both the quality of the care people are getting and the ease of their access to care.



Health Behaviors are health-related practices, such as diet and exercise, that can improve or damage the health of people. Choices individuals make about health behaviors depend on the options, opportunities, and support available to them.



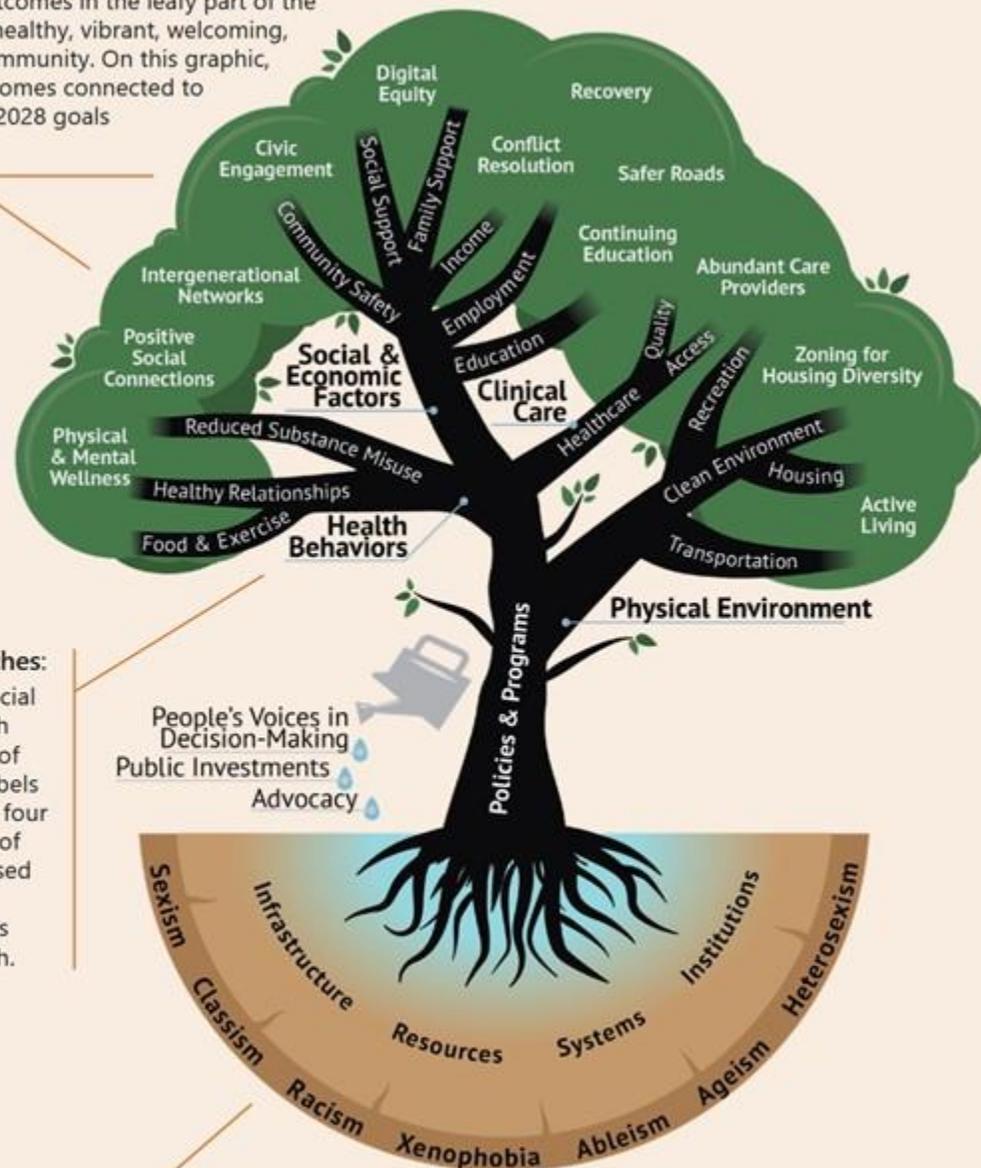
Physical Environment is about the attributes of the places where people live, learn, work, and play. This social driver includes air and water quality, food systems, housing, transportation, and access to nature, recreation, and technology.



Social and Economic Factors include income, education, employment, community safety, belonging, and family and social support. Social and economic opportunities help people live longer and healthier lives.

Leaves:

The positive outcomes in the leafy part of the tree indicate a healthy, vibrant, welcoming, and resilient community. On this graphic, we feature outcomes connected to the CHIP 2024-2028 goals and objectives.



Trunk & Branches:

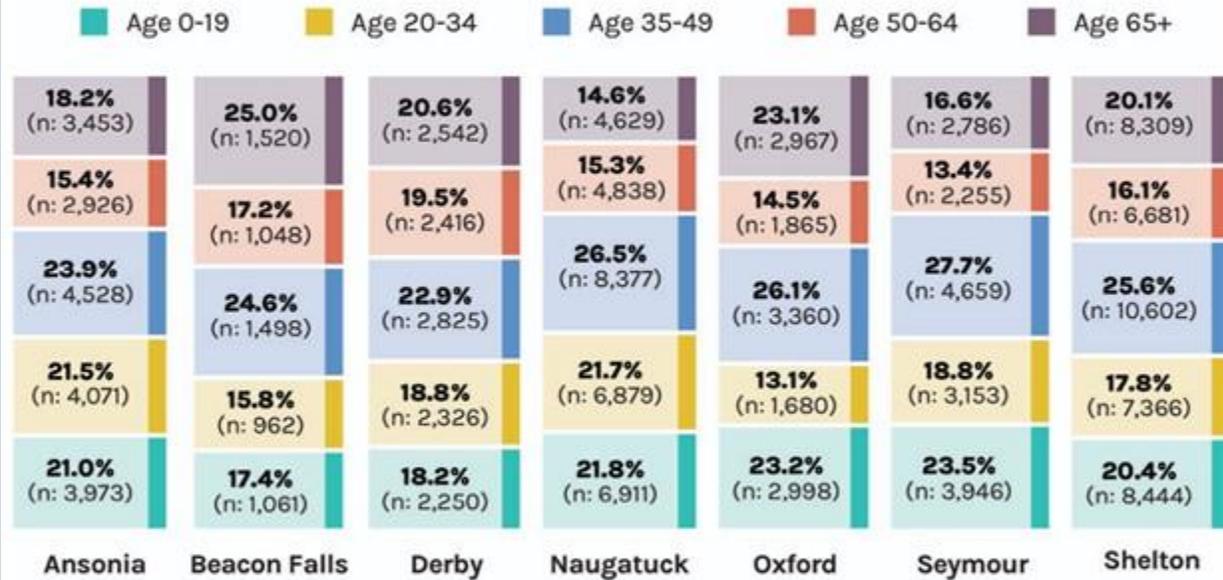
Systems and social drivers of health form the trunk of the tree. The labels pointing to the four main branches of our tree are based on the County Health Rankings Model of Health.

Soil and Groundwater:

Infrastructure, resources, systems, and institutions are the soil that supports the tree in our Model of Health. Negative forces that permeate the environment and impact our health are represented as infiltrating the soil. The watering can represents our ability to improve these conditions.

Percent of the Valley Population Aged 65+

5.01 Population by Age Group



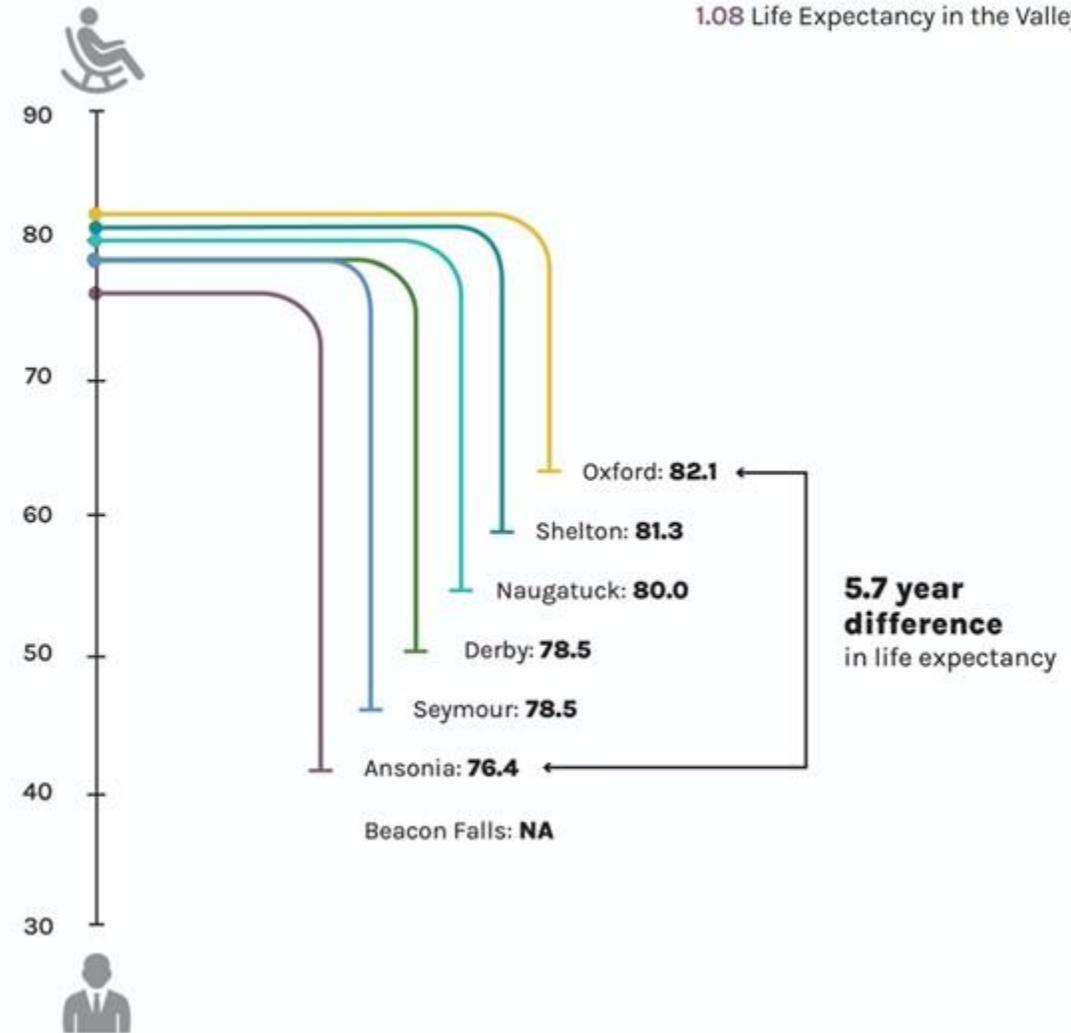
Beacon Falls	25.0%
Oxford	23.1%
Derby	20.6%
Shelton	20.1%
Ansonia	18.2%
Seymour	16.6%
Naugatuck	14.6%

*U.S. Census Bureau. (n.d.). Population by age group, 2021–2023 American Community Survey 3-Year Estimates. U.S. Department of Commerce.

Life Expectancy

These differences often reflect broader social drivers of health, including healthcare access, economic opportunity, and neighborhood conditions.

1.08 Life Expectancy in the Valley



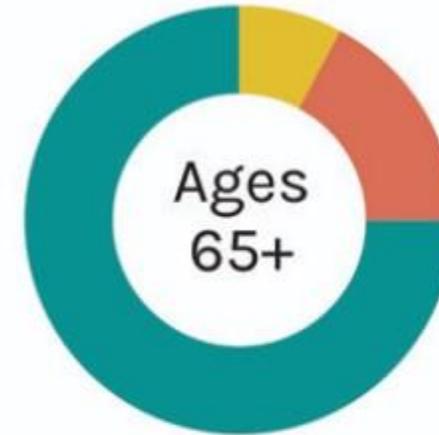
“Seniors need **affordable places to live** and be **connected.**”

- Community Member²²

“I am 68 and am still **working full-time in order to stay in my home.**”

- Community Member²²

5.07 Financial Status Age 65+

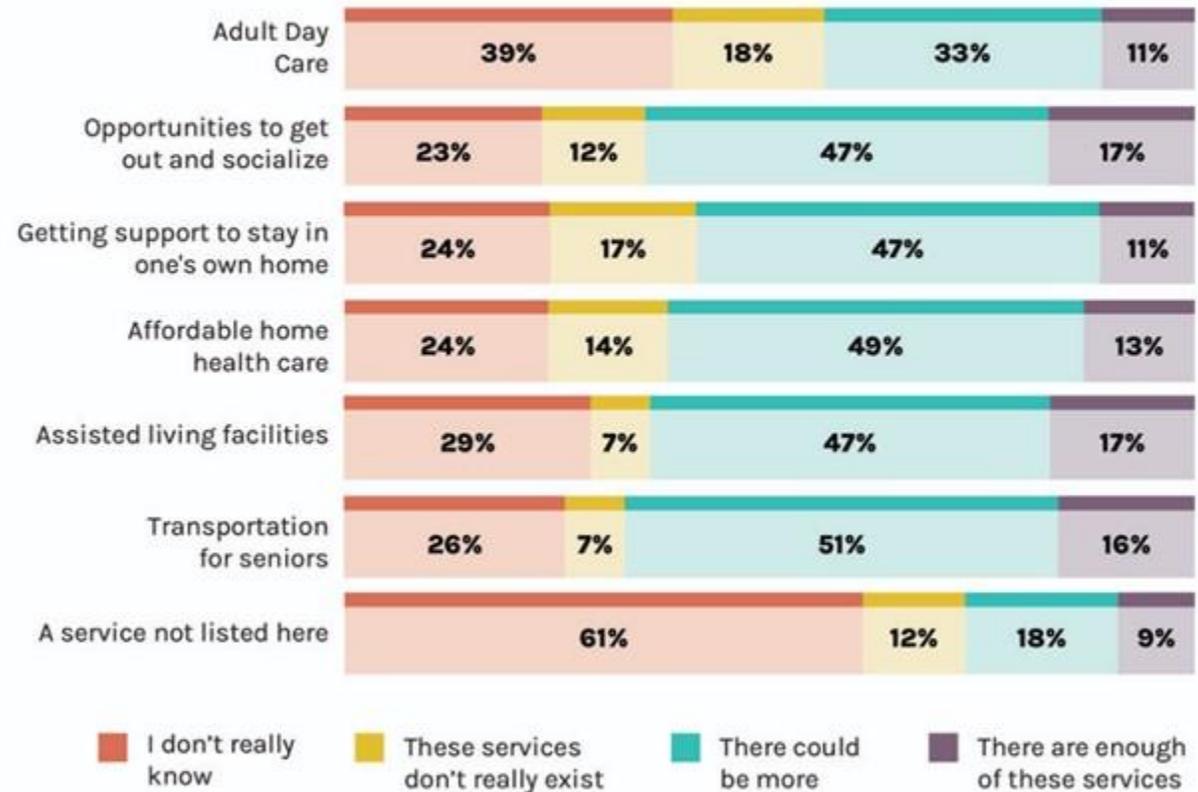


Living Comfortably / Doing Alright 75%

Just Getting By 17%

Finding It Difficult / Very Difficult 8%

5.08 Senior Services

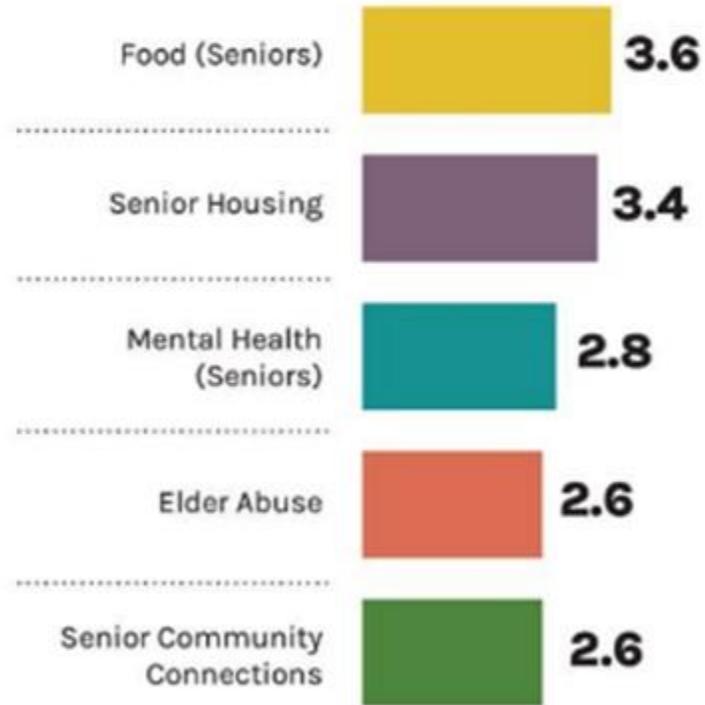


“Seniors need assistance to be able to stay in their home and have home care that is affordable. Being able to provide home health care would avoid costly inpatient rehab and improve the quality of life for the elderly in the community.”

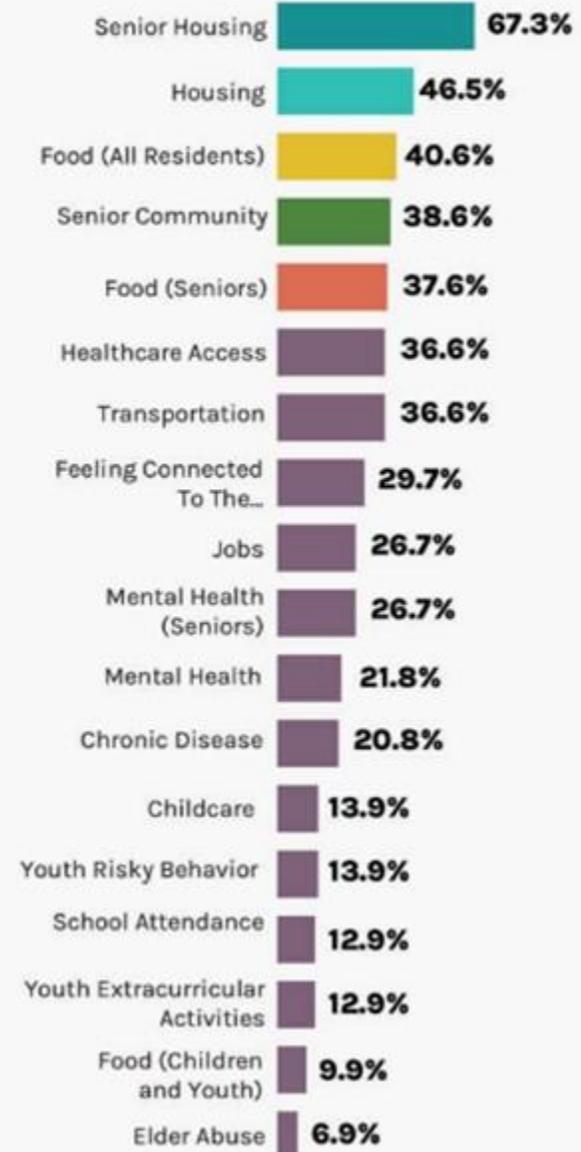
- Community Member²²

Senior Sentiment

5.02 Seniors & Aging: Please rank these issues from most important to least important



5.03 Age 65+: What are the top 5 challenges in our community?



1.20 Food Pantry Utilization, Average Number of People Served Per Month

	Total 2023	Total 2024	Increase 2023-2024	Jan-April 2025
Age 0-17	820	1,243	51.7%	1,577
Age 18-59	1,382	1,788	29.4%	2,258
Age 60+	428	563	31.4%	754
Total	2,630	3,594	36.7%	4,589

Includes 10 pantries in the Valley. See Below:

- | | | |
|-----------------------------------|---|---|
| 1. Spooner House | 5. Neighbor to Neighbor Pantry - Oxford | 9. CT Partnership for Children, school-based pantry |
| 2. Blessing Pantry | 6. Seymour-Oxford Food Bank | 10. Naugatuck Ecumenical Food Bank |
| 3. Christ Episcopal Church | 7. St. Vincent De Paul | |
| 4. Little Free Pantry on Skokorat | 8. The Salvation Army - Greater Valley CT | |

1.27 2024 Indicators Breakdown By Category

Valley By Age	Food Insecurity	Repeatedly Food Insecure	Housing Insecurity
18-34	27%	19%	20%
35-49	24%	18%	16%
50-64	19%	12%	13%
65+	5%	4%	12%

5.06 Meals On Wheels

Meals on Wheels for Seniors	Unduplicated Individuals Served Time Period: 10/1/22 - 4/21/25
Age 60 +	629
Age 65+	572

Note: Includes only TEAM Meals on Wheels program

Senior (Elderly) Nutrition Program

“Studies show that a good diet in your later years reduces your risk of osteoporosis, high blood pressure, heart disease and certain cancers. As you age, you might need less energy. But you still need just as many of the nutrients in food.” *(National Institute on Aging)*

- Serves nutritionally balanced congregate meals to individuals 60 years of age and older and an accompanying spouse.
- Also available to:
 - People with disabilities living in housing facilities that are congregate meal sites (Elderly Nutrition Providers)
 - Person with a disability under 60 years, who lives with an older adult

Senior Community Cafés –Valley

TEAM, Inc. provides hot lunchtime meals at several locations throughout the Valley for individuals 60 and older. Community Cafés is a nutrition program that serves healthy, balanced, and tasty meals in a friendly atmosphere.

A contribution is suggested, but not required - \$4/meal at Griffin and a contribution of \$3/meal at all other locations.

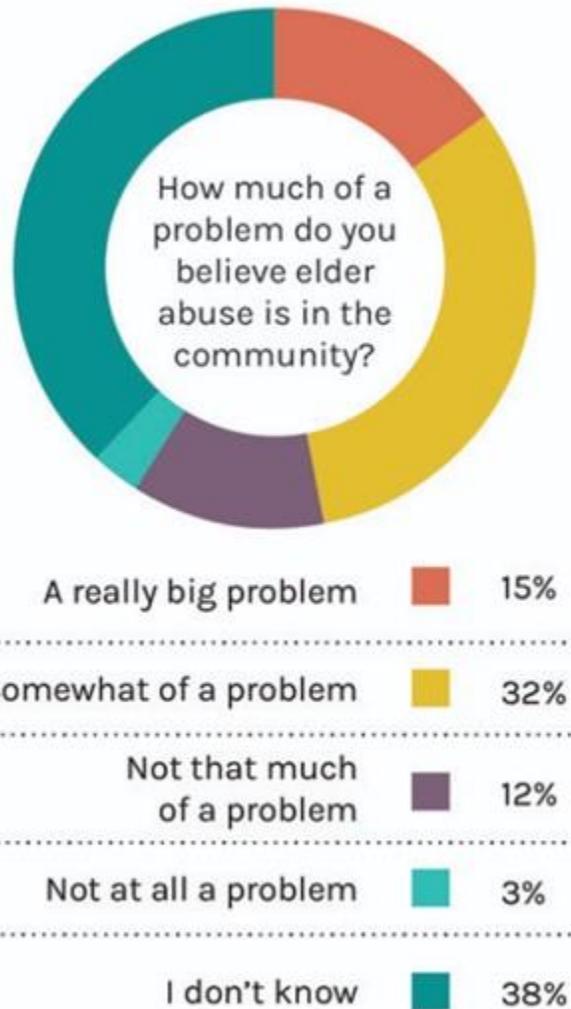
Derby Senior Center	293 Main Street	Tuesdays and Thursdays, 11:30 a.m.
Seymour - Callahan House	32 Smith Street	Monday through Friday, 11:30 a.m.
Oxford Senior Center	10 Church Road	2 days per month, 12 noon
Griffin Hospital Dining Center – Senior Meals Choice Program	130 Division Street	Tuesday, Wednesdays, and Thursdays, 4:30 – 6:00 p.m.

For more information and to apply, contact TEAM Elderly Services Department at 203-736-5420 extension 4225.

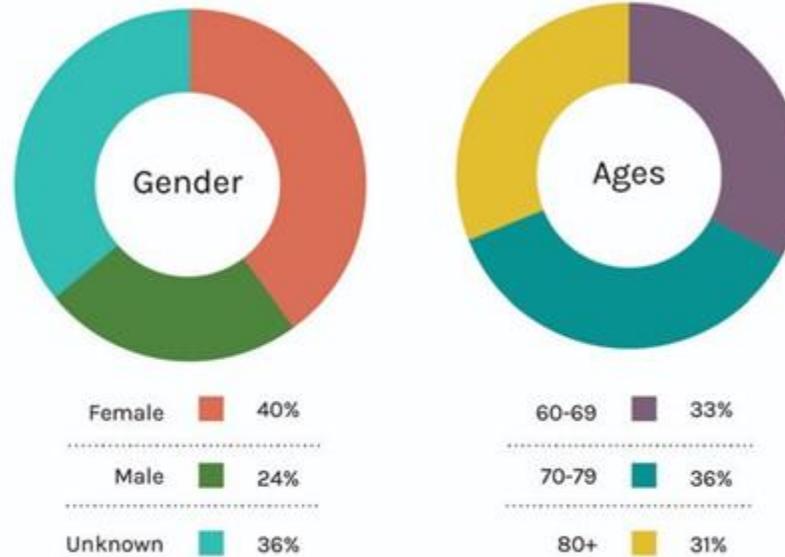


These Cafés are funded through federal Older American Act funding granted to TEAM, Inc. by the Agency on Aging of South Central Connecticut.

5.12 Seniors-Elder Abuse



5.13 Elder Abuse



According to 2024 data from the Connecticut Department of Social Services Elderly Protective Services, seniors suffering from elder abuse tend to be female and are across all senior age categories. The most commonly reported allegations as categorized by the Connecticut state Department of Social Services and reported across the Valley included:⁴³

- Exploitation - 86 cases
- Self-Neglect - 74 cases
- Neglect by others - 46 cases
- Emotional abuse - 44 cases
- Physical abuse - 19 cases
- Sexual abuse - 0 cases reported
- Abandonment - Fewer than 5 cases reported

Report Elder Abuse

Anyone can (and should) report elder maltreatment. In Connecticut, however, there are professionals who are required by State law to report suspected maltreatment of elders.

If you suspect that a person who is age 60 or older is being abused, neglected, exploited or abandoned, make a report to the Protective Services for the Elderly Program.

There are 3 different ways to report cases of suspected abuse, neglect, exploitation, or abandonment: by phone, by form and online.

By Phone: Toll-free line: **1-888-385-4225.**

Staff are available to receive calls between 8:00am and 4:30pm Monday through Friday.

- After business hours or on weekends or state holidays: call the Infoline at **2-1-1.**
- Outside of Connecticut: call the Infoline 24/7 at **1-800-203-1234.**

By Form: Complete the [Report Form \(W-675\)](#)

- Email to PSEReferrals.DSS@ct.gov.
- Fax to 860-424-5091
- Mail to DSS/PSE, 55 Farmington Avenue, Hartford, CT 06105

Online: Complete an [online referral](#) ***NEW***
[Tutorial Video on Making an Online Referral](#)

Clinics are held at various locations throughout the community, such as, senior centers, local businesses and at NVHD by appointment. NVHD offers homebound flu shots to those who are medically unable to leave their homes or lack transportation.

The following insurances are accepted with no copay:

- Aetna
- Anthem
- Cigna
- Connecticare
- Medicare Part B
- United Healthcare

Cost with no insurance:

- \$40 – Trivalent Vaccine (ages 3 and up)
- **\$80 – High Dose Vaccine (ages 65 and older)**
- FREE for eligible children through the VFC program

Flu Vaccines

CALL NURSE KRISTIE TO SCHEDULE AN APPOINTMENT
203-881-3255 X 107

Volunteer Opportunities



Public Health

Prevent. Promote. Protect.

Naugatuck Valley Health District



GRIFFIN HEALTH

2025-2028

CHIP

NAUGATUCK VALLEY



Naugatuck Valley

medical
reserve
corps



Data Supported Evidence-Based Programs

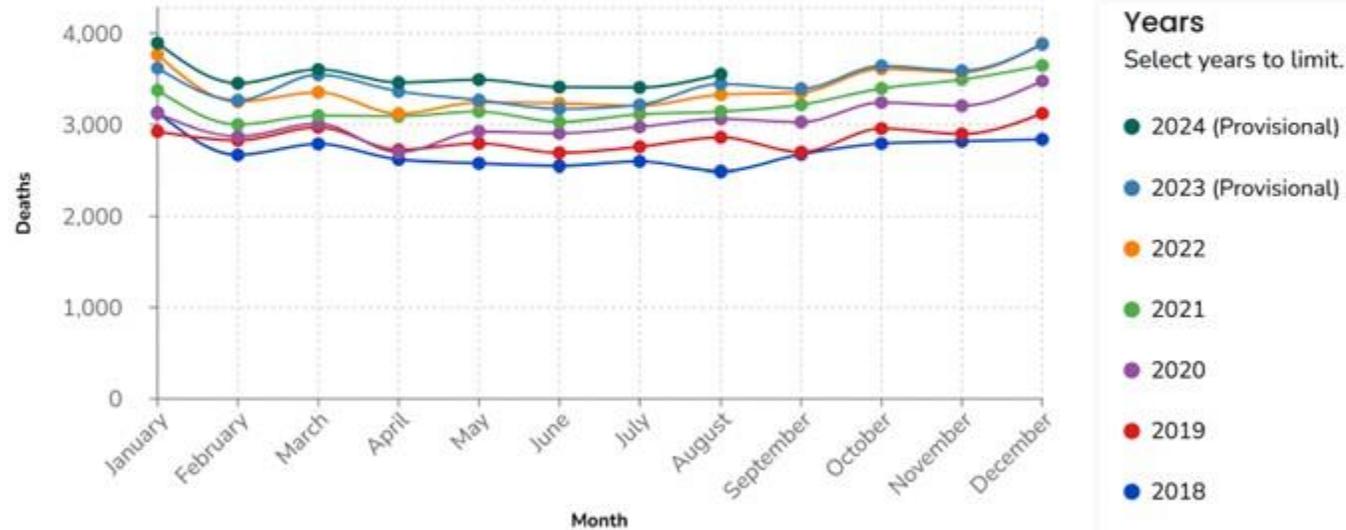
CURRENTLY OFFERED BY THE HEALTH DISTRICT

Falls are the leading cause of injury for adults ages 65 years and older.

Provisional and Final Fatal Injury Data by Month, United States

Select Injury Type

Unintentional Older Adults Falls (Age 65 and Older)

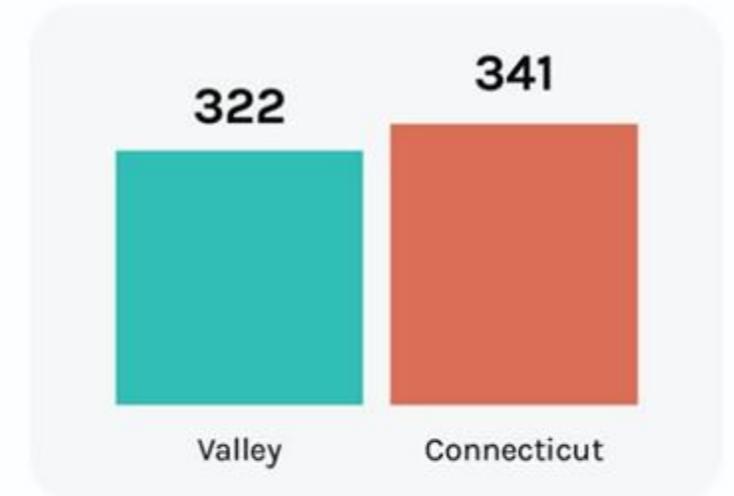


Older adult (age 65 and older) fall death ICD-10 codes: W00-W19 ICD-10-CM codes for slipping, tripping, stumbling, and falls

More falls in winter months

<https://wisqars.cdc.gov/fatal-injury-trends/>

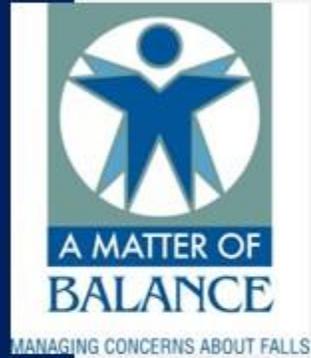
3.19 Falls, Rate per 10,000



Town	Rate (per 10,000)
Ansonia	385
Beacon Falls	243
Derby	380
Naugatuck	263
Oxford	291
Seymour	320
Shelton	326

A Matter of Balance

A Matter of Balance is the most widely implemented falls prevention program across the country. An evidence-based, field-tested program, A Matter of Balance has been shown to be highly effective in reducing the fear of falling and increasing activity levels among older adults. It is an easy to implement, inexpensive, and well-accepted turnkey educational program that can be employed within many community organizations and groups.



Who should attend?

The program is designed to benefit older adults who:

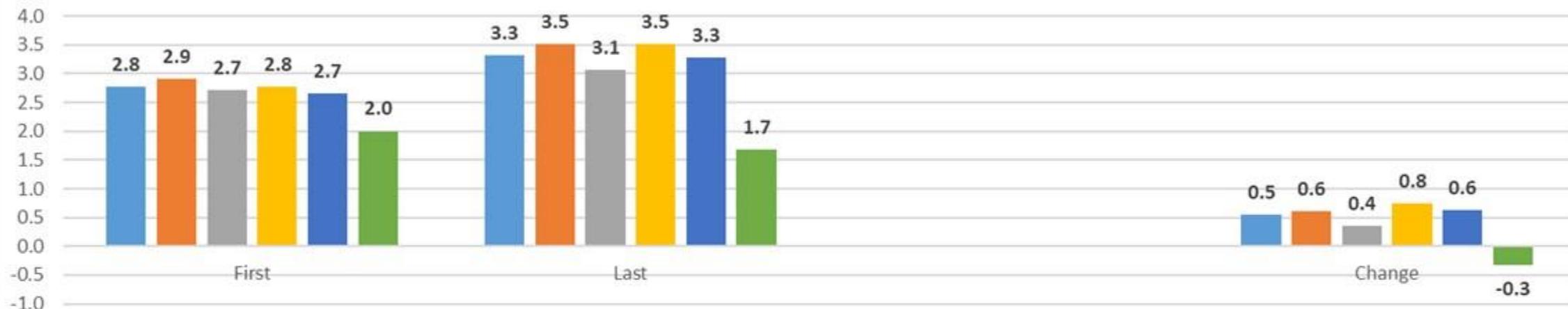
- Are concerned about falls
- Have sustained falls in the past
- Restrict activities because of concern about falling
- Are interested in improving flexibility, balance, and strength
- Are aged 60 or older, community-dwelling and able to problem solve

What do participants learn?

The program enables participants to gain confidence by learning:

- View falls as controllable
- Set goals for increasing activity levels
- Make changes to reduce fall risks at home
- Exercise to increase strength and balance

Matter of Balance Functional Improvement Scores FY 24-25

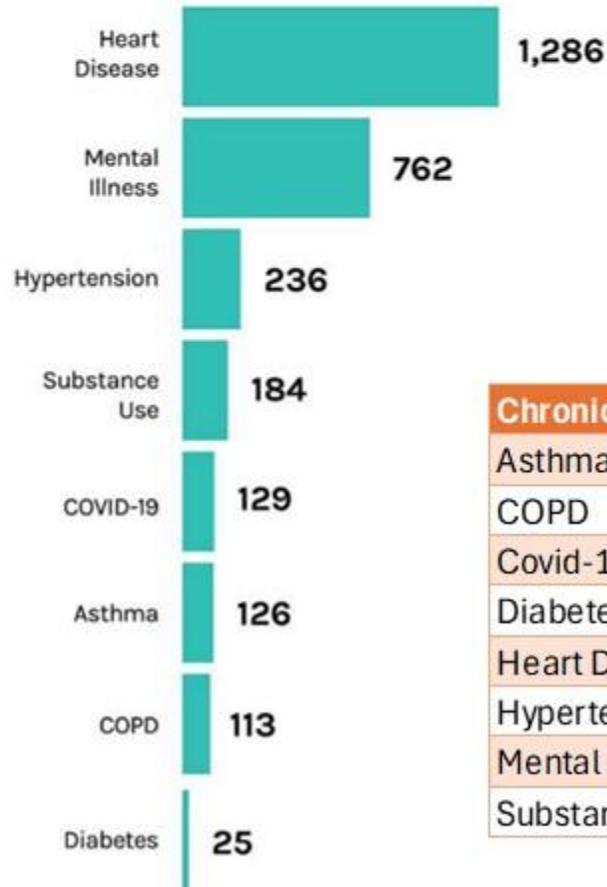


- How sure are you that you can get up from a fall?
- How sure are you that you can find a way to reduce falls?
- How sure are you that you can protect yourself if you fall?
- How sure are you that you can increase your physical strength?
- How sure are you that you can become more steady on your feet?
- During the last 4 weeks, to what extent has your concern about falling interfered with your normal social activities with family, friends, neighbors or groups?

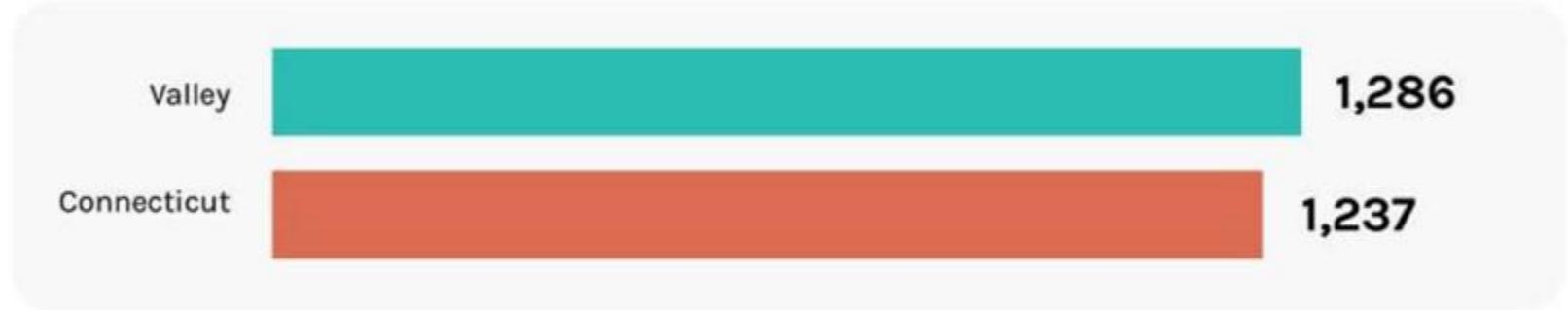
Matter of Balance Results in the Naugatuck Valley

Chronic Conditions

3.14 Naugatuck Valley Chronic Condition Encounters, FY24 Ranked By Rates per 10,000



3.15 Heart Disease Hospital Encounter Rates per 10,000



Chronic Condition	Ansonia	Beacon Falls	Derby	Naugatuck	Oxford	Seymour	Shelton
Asthma	219	118	193	115	63	111	99
COPD	145	106	171	76	82	130	106
Covid-19	211	77	201	102	68	114	123
Diabetes	43	26	28	20	18	28	19
Heart Disease	1309	1328	1430	1198	1442	1289	1245
Hypertension	271	295	303	159	216	218	263
Mental Illness	1171	690	1059	678	588	796	605
Substance Use	293	164	261	160	123	202	146



What did you like about this program?



“practical information, the speakers all have knowledgeable information”



“Everything!!”



“The book is very very, very, good. Class discussions. Actually, I liked everything”



“Very informative in a relaxing atmosphere”

Participant Testimonies

NVHD Chronic Disease Program Participants

Mental & Behavioral Health

Isolation is a leading cause of depression for seniors.

For residents 65 and older, over the In the past six months there were:

465 hospital encounters with a mental health component

62 hospital encounters for alcohol related issues

19 hospital encounters for suspected opioid overdoses

KEY TAKEAWAYS

Social isolation and loneliness, despite being different, are connected and can deeply impact quality of life for older adults.

The physical, emotional, and mental health of older adults are directly impacted by social connection.

There are proactive steps older adults can take to reduce the harmful effects related to isolation and loneliness.

1.31 Mental Wellbeing & Support of Valley Community Members

<i>"How often do you get the social and emotional support you need?"</i>	All	Age 18-34	Age 35-49	Age 50-64	Age 65+
Always	33%	18%	38%	30%	48%
Usually	34%	42%	26%	37%	31%
Sometimes	18%	15%	21%	22%	13%
Rarely	9%	21%	6%	6%	2%
Never	4%	3%	7%	3%	4%
DK/Refused	1%	0%	2%	3%	1%

<i>"Over the past 2 weeks, how often have you felt down, depressed, or hopeless?"</i>	All	Age 18-34	Age 35-49	Age 50-64	Age 65+
Nearly every day	5%	6%	7%	3%	4%
More than half the days	6%	8%	6%	9%	1%
Several days	18%	28%	19%	18%	7%
Not at all	67%	53%	68%	66%	85%
DK/Refused	3%	4%	0%	4%	3%

Mental & Behavioral Health Programs



Attend any of our free virtual, or in-person health education programs offered at sites in and around the Naugatuck Valley!



QPR

Question, Persuade,
Refer Suicide
Prevention

Tailored to seniors and their caregivers



Mental Health First Aid

Longer program

How to support others in a mental health challenge or crisis

Learn how to recognize, understand and respond to signs of mental health or substance use challenges — and offer the first level of support



Mental Health
FIRST AID

from NATIONAL COUNCIL FOR
MENTAL WELLBEING



N.O.P.E. PROGRAM

NAUGATUCK VALLEY OVERDOSE PREVENTION & EDUCATION



Voluntary NonOpioid Directive

Office of Injury Prevention • July 2018

Use of the Form under the Act

A "voluntary nonopioid directive form" (the "Form"), as established under and defined in section 4 of Public Act 17-131, an act Preventing Opioid Diversion and Abuse (the "Act"), available at: <https://www.cga.ct.gov/2017/ACT/pa/2017PA-00131-R00HB-07052-PA.htm>, enables an individual to voluntarily request that prescribing practitioners not prescribe opioid drugs and not issue a medication order for opioid drugs for such individual. This form is also known as an "opioid opt-out form."

A person who does not wish to be issued a prescription or medication order for an opioid drug may file this Form with a prescribing practitioner. Upon receipt of the Form from the patient, a prescribing practitioner shall document receipt of the Form in the patient's medical record. The patient and the patient's duly authorized guardian or health care proxy or representative may revoke the directive contained in said Form, orally or in writing, for any reason, at any time.

CT DPH encourages patients to complete the Form in consultation with their primary care providers or substance use disorder (SUD) treatment providers; however, such consultation is not required for the Form to be valid.

Liability under the Act

Pharmacists: An electronically transmitted prescription to a pharmacy shall be presumed to be valid. A pharmacist shall not be held in violation of the Act for dispensing a controlled substance in contradiction to a person's Form.

Prescribing Practitioners: A prescribing practitioner who willfully fails to comply with a patient's voluntary nonopioid directive form may be subject to disciplinary action pursuant to section 19a-17 of the general statutes. No prescribing practitioner acting with reasonable care shall be liable for damages in a civil action, subject to criminal prosecution or deemed to have violated the standard of care for such prescribing practitioner's profession for refusing to issue a prescription or medication order for an opioid pursuant to a person's Form.

Emergencies: No emergency department prescribing practitioner acting with reasonable care as the patient's practitioner or as the medical control officer for emergency medical services personnel, shall be liable for damages in a civil action, subject to criminal prosecution or deemed to have violated the standard of care for a prescribing practitioner's profession for issuing a prescription for or administering a controlled substance containing an opioid to a person who has a voluntary nonopioid directive form, when, in such prescribing practitioner's professional medical judgment, a controlled substance containing an opioid is necessary and such prescribing practitioner had no knowledge of the patient's voluntary nonopioid directive form at the time of issuance or administration.

Guardian or Health Care Proxy or Representative: No person acting in good faith as a patient's duly authorized guardian or health care proxy or representative shall be liable for damages in a civil action or subject to criminal prosecution for revoking or overriding a voluntary nonopioid directive form.

Resources

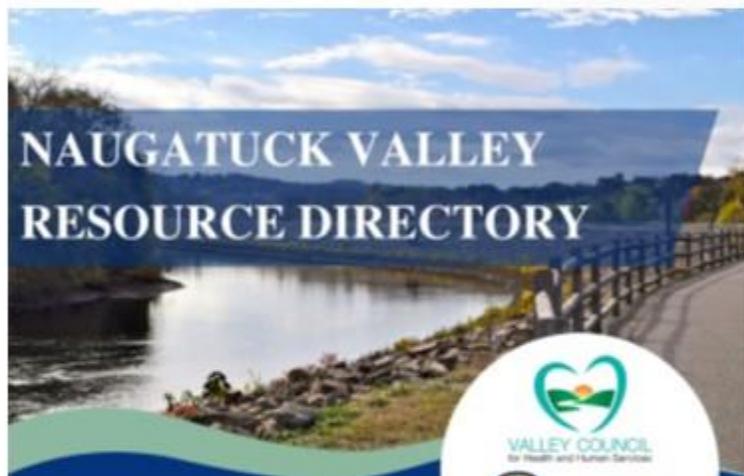
- CDC Guideline Information for Prescribers: <http://www.cdc.gov/drugoverdose/prescribing/providers.html>
- CDC Guideline for Prescribing Opioids for Chronic Pain: <https://www.cdc.gov/mmwr/volumes/65/rr/rr6501e1.htm>

Connecticut Department of Public Health

410 Capitol Avenue, Hartford, CT 06134

Office of Injury Prevention • 860-509-8251 • www.ct.gov/dph/injuryprevention

RESOURCES



NAUGATUCK VALLEY RESOURCE DIRECTORY

Purpose
The resource guide connects individuals to necessary services and provides details such as business hours, languages spoken, and specific site information.

Resources

- Primary care (Pediatric & Adult)
- Dental
- Eye Care
- Specialty Care
- Substance Abuse Services
- Behavioral Health Services
- Community Health Clinics
- Urgent Cares
- Long COVID Treatment
- Women's Health
- Food Banks/Pantries

MORE INFO
Call 2-1-1
Visit www.211ct.org



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2025 VALLEY COMMUNITY INDEX

A Community Indicators Report Produced By:

VALLEY COMMUNITY FOUNDATION

VALLEY COUNCIL for Health and Human Services

GRIFFIN HEALTH

Public Health

DataHaven

Community Needs Assessment for Implementation by

Public Health



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211 WHEN IT'S
HELPFUL

- H:** Health or human services
- E:** Energy/heat needs
- L:** Loss of income or insurance
- P:** Primary or mental healthcare

WHICH?

911 WHEN IT'S
VITAL

- V:** Violence to self or others
- I:** Illegal activity
- T:** Threat
- A:** Ambulance
Fire or Police
- L:** Lives are at risk

WHEN?



Town of
Stonington



United Way of Connecticut



- Employment
- Education
- Independent living
- Accessibility
- Advocacy

- Homecare: meal preparation, housekeeping, bathing, dressing, medication administration, nursing
- Meals on Wheels and home grocery delivery
- Transportation and medical chaperone
- Caregiver support
- Insurance counseling
- Financial benefits enrollment
- Chronic disease self-management
- Application assistance
- Socialization

Seniors and Aging

5.01	Population by Age Group	U.S. Census Bureau. (n.d.). <i>Population by age group, 2021–2023 American Community Survey 3-Year Estimates</i> . U.S. Department of Commerce.
5.02	Seniors and Aging: Ranked Issues by Importance	Valley Council for Health and Human Services. (2025). <i>2025 Valley Community Survey</i> .
5.03	Age 65+: What are the top 5 challenges in our community	Valley Council for Health and Human Services. (2025). <i>2025 Valley Community Survey</i> .
5.04	Seniors and Aging: What does the most important issue you picked mean to you?	Valley Council for Health and Human Services. (2025). <i>2025 Valley Community Survey</i> .
5.05	Food Pantry Utilization, Average Number of People Served by Month	TEAM Inc. (2025). <i>Food Hub: Basic Needs & Other Help</i> . https://teaminc.org/basic-needs-other-help/food-hub/ Connecticut Partnership for Children. (2025). <i>Children & Family Services</i> . https://ctpfc.org/
5.06	Meals on Wheels	TEAM Inc. (2025). <i>Meals on Wheels program overview: October 1, 2022–April 21, 2025</i> . TEAM Inc. https://teaminc.org/meals-on-wheels/
5.07	Financial Status Age 65+	DataHaven (2024). <i>DataHaven Community Wellbeing Survey Data (2018, 2021, and 2024) for the Lower Naugatuck Valley Region and Connecticut</i> .
5.08	Senior Services	TEAM, Inc. (2023). <i>2022–2023 Community Planning Survey</i> . TEAM, Inc.
5.09	Mental Wellbeing and Support of Valley Community Members	DataHaven (2024). <i>DataHaven Community Wellbeing Survey Data (2018, 2021, and 2024) for the Lower Naugatuck Valley Region and Connecticut</i> .
5.10	Seniors and Aging: Local Organizations	Valley Council for Health and Human Services. (2025). <i>2025 Valley Community Survey</i> .
5.11	Senior Center Accessibility	TEAM, Inc. (2023). <i>2022–2023 Community Planning Survey</i> . TEAM, Inc.
5.12	Seniors-Elder Abuse	TEAM, Inc. (2023). <i>2022–2023 Community Planning Survey</i> . TEAM, Inc.
5.13	Elder Abuse	Connecticut Department of Social Services. (2025). <i>Protective Services for the Elderly: Elder Abuse Data Report</i> . https://portal.ct.gov/dss/social-work-services/social-work-services/protective-services-for-the-elderly

1.08

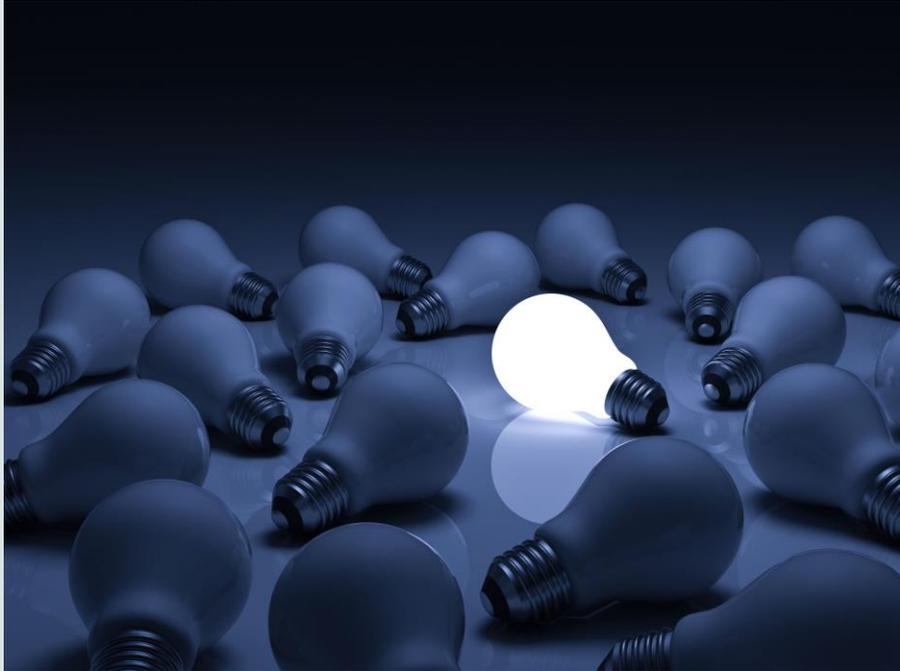
Life Expectancy in the Valley

DataHaven (2025). *Town Equity Reports*. August 2023 (2015 data).



QUESTIONS.....

OPPORTUNITIES



IN YOUR COMMUNITY

- ✓ *Be a voice in your community*
- ✓ *Advocate for services in your Town*
- ✓ *Write letters... Attend meetings...*

What we can do to preplan:

- ✓ *See an Elder Estate Attorney/ Financial Advisor for estate planning*
- ✓ *Assess your home... Is it Aging Friendly???*
- ✓ *Don't wait for an emergency.. Pre-Planning is the key to comfortable and safe aging on your terms... You hold the key to your future....*