



**COMMUNITY SERVICES CONFERENCE  
OLDER ADULTS IN THE COMMUNITY  
JUNE 13, 2018**

## TODAYS OBJECTIVES



- Describe program design
  - History and context
  - Costs and partner contributions
  - What is it?
- Provide program overview
  - Building profiles, staff roles & responsibilities
- Describe impact of program
  - Resident case studies
- Outline program goals
- Discuss challenges
- Q&A

## PROGRAM DESIGN: History and Context



- **Origins of current Connect to Wellness-2002**
  - Created as Senior HealthWISE by MGH, State Street Properties (Blackstone Apartments), and Boston Senior Home Care (one of 3 ASAPs in Boston)
  - Goals: reduce unnecessary duplication of services and improve residents quality of life
- **Redesign of Connect to Wellness -2015-2017**
  - Collaboration of MGH, Center for Community Health Improvement, BSHC, Preservation of Affordable Housing (Blackstone), Rogerson Communities (Beacon House) and Hallkeen Management (Amy Lowell)
  - Newly designed program nested in changes in healthcare, and housing policy
  - New partners updated/clarified goals and working to enhance service coordination & provide evidence based health and wellness programs for all residents

## **PROGRAM DESIGN : Costs and Partner Contributions**



- **MGH Center for Community Health Improvement**
  - Full cost of MGH and BSHC health and housing team and evidence based health and wellness programs
  
- **Other contributions**
  - POAH-build out of dedicated space for the MGH/BSHC team
  - All housing partners- time for participation or property staff in service planning and coordination
  - EOEA-support for direct home care/case management services provided to eligible building residents

## PROGRAM DESIGN: What is it?



- Health and housing collaboration between Mass General Hospital, Boston Senior Home Care and three property owners/managers
- Three member team (part time): RN, LICSW, Community Resource Specialist
- Serves 3 buildings in Boston's West End and Beacon Hill – one day per week in each building
- Healthcare team available to both MGH and NON MGH patients of all ages on-site at no cost to resident

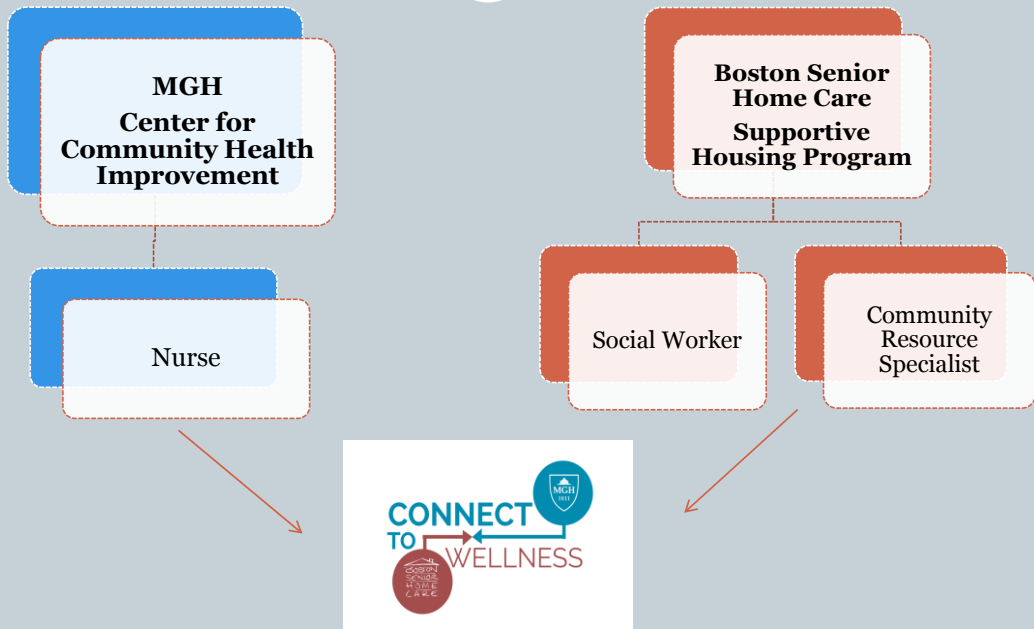
## PROGRAM OVERVIEW: Profile of Buildings



- **BEACON HOUSE**
  - ROGERSON COMMUNITIES
    - 117 units – elderly/disabled, market rate, MGH
    - 30% Chinese-speaking population
    - 42% MGH patients
- **AMY LOWELL APARTMENTS**
  - HALLKEEN MANAGEMENT
    - 152 units - elderly/disabled and market rate
    - 50% MGH patients
- **BLACKSTONE APARTMENTS**
  - PRESERVATION OF AFFORDABLE HOUSING (POAH)
    - 145 units - elderly and disabled
    - 30% Chinese-speaking population
    - 74% MGH patients



# PROGRAM OVERVIEW: Organizational Chart



## PROGRAM OVERVIEW: Staff Roles & Responsibilities



- **Nurse**

- Conducts office hours to check vitals, educate, and answer health-related questions
- Facilitates communication with providers
- \*\*\*No direct hands-on care or emergency services\*\*\*

- **LICSW**

- General counseling and advocacy to residents
- Provides guidance and support to building managers and BSHC case managers regarding resident issues

- **Resource Specialist**

- Provides information and linkages to community resources, services and programs
- Provides translation, as needed
- Co-leads evidence based health and wellness workshops

- **Programs**



## IMPACT: Resident Case Study#1



84 year old resident with history of serious mental illness

- At risk for losing housing due to non-payment of rent and unsanitary conditions in apartment
- Connect to Wellness coordinates communication between caregivers/providers
  - MGH Integrated Care Management Program LICSW
  - BSHC Case Manager
  - Protective Services
  - Building management and RSC
- Resident now has representative payee. Connect to Wellness continues to monitor and provide support to resident as well as earlier intervention.

## IMPACT: Resident Case Study#2



77 year old resident recently discharged from rehab hospital with skilled VNA services

- VNA services ended but more support is needed for personal care and homemaking
- Resident refuses BSHC home care services
- Connect to Wellness continues to build trusting relationship with resident over time and re-visit willingness to accept services. Also provides on-going wellness check-ins, emotional support, and communicates with providers

## PROGRAM GOALS



- Assist residents in maintaining independence
  - Identify social, housing and health related needs
  - Provide information and linkages to community resources/programs
- Act as resource to building managers
- Help residents preserve tenancy and avoid eviction
- Improve care management of MGH and BSHC high risk patients/consumers through provider communication and coordination

## CHALLENGES



- Difficult to engage residents
- Barriers in accessing residents' health care data impedes Connect to Wellness teams' ability to respond/intervene
- Lack of mental health resources to support residents
  - Residents willingness to accept and/or ability to navigate independently
- Difficult for Connect to Wellness to effectively coordinate with building staff and resident service coordinators due to part-time nature of the program

# Q&A

