Goals, Activities and Accomplishments of the On-site Service Coordination Projects:

A Report to the Minnesota Legislature

2000 Minn. Laws Chap. 488
Art. 9 Sec. 14 Subd. 8

Minn. Stat. 256.9731

Initiative 444 Lafayette Road North, St. Paul, MN 55155-3844 651-296-2738

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Minnesota Department of Human Services
Aging Initiative

January 1, 2002

This information is available in other forms to people with disabilities by calling 651-296-2544 (voice), toll free at 1-800-333-5433, or 1-800-627-3529 (TTY).

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I. Cost to Prepare the Report

Minnesota Statutes, Chapter 3.197 requires that the cost of preparing a report to legislature be reported at its beginning. Approximately $320 in staff salaries was spent to prepare this report.

II. Introduction

This report is required by Minnesota Statute 256.9731, Subdivision 8:

Report. *The commissioner shall collect data on a quarterly basis on the number of persons served and other factors relating to the goals, activities, and accomplishments of the projects. The commissioner shall provide this data in summary form to the legislature in annual reports, due January 1, 2001, and each January 1 thereafter. The annual reports must also include recommendations based on project findings.*

III. Background

Since 1991, the Legislature has appropriated funds for on-site coordination services for congregate housing projects, to help low-income older persons who live in subsidized housing receive services they need to maintain maximum independence. The role of the on-site coordinator is to monitor the changing needs and capabilities of aging residents of the building, and to identify existing community services of supports to maximize their independence. Coordinators follow up, support and advocate as necessary. These coordination services were initially only available to residents of congregate, subsidized settings with common areas for activities and meals. This limited the number of low-income older persons who could be helped.

In 1999, the Department of Human Services convened a Housing Innovations Work Group to look at new and more efficient ways of serving the growing population of older persons in their communities and towns. This work group consisted of representatives of counties, Seniors' Agenda for Independent Living (SAIL) projects, private nonprofit organizations, and the various state agencies and boards involved in housing, health, and human services. The group worked together to identify regulatory and other barriers to expanding and developing new, affordable ways to link support services to larger numbers of at-risk seniors in the community. The group identified the location limits in the congregate housing service coordination program as one of these barriers.

The Housing Innovations Work Group proposed the development of cost effective "virtual" assisted living projects. "Virtual" assisted living delivers up to 24-hour supervision and oversight, and direct links to supportive services, individualized home care aide, and home management tasks in an older person's own home, from a "base" in the community that may be a nursing facility, an existing housing with services site, or a community center. "Virtual" assisted living may be provided in a single apartment building, several apartment buildings, single family residences, and/or any cost effective combination of settings. Assisted living

services have traditionally been tied to market-rate, multi-unit senior housing developments, created expressly for this purpose.

In the 2000 legislative session, the Legislature expanded the scope of the on-site coordination services program to permit coordinators to also provide services to older persons who *live in apartments, both subsidized and market rate, and single-family residences in neighborhoods with existing senior housing or high percentages of older persons*. This change increased the number of older persons who could be supported in the community, allowing them to remain independent and to delay or prevent placement in a nursing facility. This was seen as having two benefits: older persons remain in their own homes, which is their preference and preservation of affordable housing. The Legislature appropriates $60,000 annually for on-site coordination services.

Most recently, in 2001 the Long-Term Care Task Force developed policy directions focused on expanding home- and community-based options. The on-site coordination is a part of that effort and pivotal to developing supportive housing.

IV. Report

In fiscal years 2001 and 2002 the on-site coordination services project grant funds, $60,000 for each year of the biennium, are being used in coordination with a Bush Foundation grant of approximately $1,000,000 to demonstrate new, affordable housing with supportive services models. The Bush Foundation grant was awarded to the Department of Human Services in July 2000. Seven demonstration projects located in both rural and urban areas were funded in spring 2001. The projects are community collaborations with other volunteer supported services funded by Title III of the Older Americans Act, the county or counties the projects serve, and other collaborative efforts such as Seniors' Agenda for Independent Living (SAIL) projects in their area. The Aging and Adult Services Division of the Department of Human Services provides contract management and technical assistance in collaboration with the Minnesota Department of Health and the Minnesota Housing Finance Agency.

Some of the projects have focused on developing affordable housing with services programs in existing senior housing. At least eleven senior apartment buildings across the state now have service coordination available. Other projects are developing new service models for rural, immigrant, minority and American Indian communities.

The projects will document their experiences so that their successes can be replicated. They will participate in a conference on affordable housing with services at the end of the grant period.

The projects report on their progress and the number of persons they serve quarterly. Robert and Rosalie Kane of the University of Minnesota will evaluate the projects at the end of the first and second grant years.

Two of the seven Bush Foundation projects are using the State of Minnesota on-site coordination funds. The Emmanuel Community in Detroit Lakes received on-site coordinations funds in the amount of $28,932 for state fiscal year (FY) 2001 and $41,457 in

FY 2002. Good Samaritan Home Health Care in Windom received on-site coordination funds in the amount of $31,068 in FY 2001 and $18,543 in FY 2002. The total combined Bush Foundation and state on-site coordination funds for these two projects are $202,914 for FY 2001 and 2002.

Emmanuel Community Supportive Living
1415 Madison Avenue
Detroit Lakes, MN 56501

The Emmanuel Community Supportive Living Project provides care coordination and assisted living services to low- and moderate-income residents of Lamplighter Manor, a 65-unit HUD subsidized apartment building attached to Emmanuel Nursing Home. As a result of the on-site coordination and Bush Foundation funding the project began on April 30, 2001 to expand its assisted living and on-site coordination services to seniors in Pleasant View, Park Manor, Marigold and Silver Birch Apartments (208 apartments total). These buildings provide seniors with low- and moderate-income housing in the Detroit Lakes area. Emmanuel Community Supportive Services is working with Becker County social services staff to identify additional residents in these buildings who would benefit from services that would allow them to age in place and not need to be admitted to a nursing facility. A total of 75 individuals received care coordination from July 1, 2001 to September 30, 2001.

Good Samaritan Home Health Care
710 Fuller Drive, #3
Windom, MN 56101

Using the combined on-site coordination and Bush Foundation funding, Good Samaritan Home Health Care provides assisted living services and on-site coordination services at six locations. These locations are Hillside Manor, a HUD apartment complex in Windom; Jackson Pines, an assisted living facility in Jackson; and Prairie View Apartments in St. James. They also coordinate services, as needed, for the 20 to 100 persons for whom they provide home care. The number varies weekly. The home health care aide refers persons to the visiting RN for care coordination. A total of fifty-one individuals received on-site coordination services from July 1, 2001 to September 30, 2001.

In a complimentary project also fund by the joint grant, Good Samaritan Home Health Care has joined with a technology provider to enable "virtual" visits and other services to persons in their own homes in more isolated parts of the rural area. The program purchased hardware that allows "visits" conducted using a camera and TV monitor connected to a regular telephone line. A home health nurse goes to each home once each week to set up medications and deliver a week's supply of meals. Generalist workers, who call on a daily basis, are trained to monitor medications and other health needs of each person. The generalist worker is also available to provide assistance with activities of daily living (ADLs) such as bathing, homemaking and other care-related services that can't be provided through "virtual" visits. This model of care addresses issues that include: medication compliance, social interaction, early intervention to delay physical deterioration, and client education. Five people are currently receiving "virtual" visits and care coordination. Good Samaritan is working with the Windom Area Hospital to evaluate tele-home care.

Good Samaritan is also using Bush Foundation funds to develop a Rural Education/Quality Assurance model, an accessible and flexible system that uses generalist workers to address staff turnover and quality of service. The Rural Education/Quality Assurance model is developing a video series for medication training, and a distance learning network that will provide current information and training opportunities with less staff time away from the persons served. The goal is to develop a system that provides the efficiencies needed to have adequate numbers of qualified staff to provide affordable housing with services for older persons.

The original designated on-site coordination service area was Cottonwood County. It will be expanded to include Jackson and Watonwan Counties pending action by those county boards

V. Recommendations

The commissioner recommends continued funding to demonstrate these new models of service coordination. The on-site coordination services funding awards were coordinated with the Bush Foundation awards in spring 2001. The projects have developed innovative and collaborative approaches. The projects are just maturing and beginning to report concrete results. They will assist the state in finding ways to provide coordination services for the frail elderly in a wide variety of settings and maintain those people in their own homes, which is their preference, more cost effectively than in nursing facilities.