



U.S. Department of Housing and Urban Development
Office of Policy Development and Research



Evaluation of the Service Coordinator Program

Volume II: Case Studies

Evaluation of the Service Coordinator Program

Volume II: Case Studies

Prepared for:
U.S. Department of Housing and Urban Development
Office of Policy Development and Research

Contract H-5954

Prepared by:
KRA Corporation
Silver Spring, Maryland

August 1996

The contents of this report are the views of the contractor and do not necessarily reflect the views or policies of the U.S. Department of Housing and Urban Development or the U.S. Government.

ACKNOWLEDGEMENTS

The KRA Corporation Evaluation of the Service Coordinator Program project team would like to thank the service coordinators, property managers, and residents who willingly and generously gave of their time and offered their opinions during our site visits in the summer of 1995. We would also like to thank the U.S. Department of Housing and Urban Development's Government Technical Representative, Jean Lin Pao, in the Office of Policy Development and Research, and her colleagues in the Office of Housing, Jerold Nachison, Carissa Janis, and Otelia Hebert, for their invaluable input and support during the conduct of this study. The KRA project team included Cynthia Holmes Morgan, Project Director; Suzanne Loux; Juanita Lucas-McLean; Mary Kay Sistik; Michael Svilar; Robin Koralek; Isaac Henderson; Julian Luke; Lisa Harris; and Jenifer Elmas.

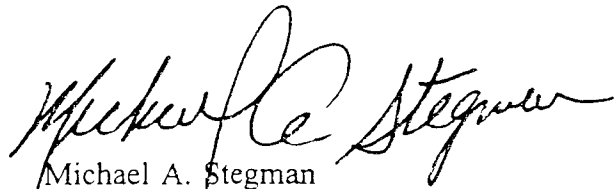
Foreword

Older residents of federally assisted housing are among those with the fewest resources to age in place successfully. A large and growing number of frail elderly residents are at-risk of premature or unnecessary institutionalization because supportive services may not be available due to problems of coordination and delivery of available services. Supportive services also promote the option of independent living for nonelderly persons with disabilities in federally assisted housing. To enable residents to age in place and live independently, Congress established the Service Coordinator Program (SCP) in 1990.

Through the program, a service coordinator's primary role is to coordinate the provision of supportive services to the elderly and persons with disabilities living in HUD-assisted projects constructed with Section 202, Section 8, Section 221(d), and Section 236 support. This evaluation report describes early implementation experiences of SCPs; ongoing program operations; and resident satisfaction with the program.

Evaluation findings show the program is working effectively in meeting the supportive service needs of the elderly and persons with disabilities. Residents are very satisfied with the program and the service coordinators. Property managers and service coordinators believe that the program has prevented early institutionalization of some residents. The program reduced the involvement of property managers in service coordination, an activity for which they are not qualified and which they lack the resources to perform. Service coordinators who were more effective in coordinating services and bringing them to the housing developments tend to be located in urban areas where services are both plentiful and accessible. For those in more rural and isolated areas, the service coordinators' ability to perform their responsibilities were severely limited. Furthermore, their ability to obtain the required training was hampered by their geographic location.

Although future funding for the Service Coordinator program is uncertain, service coordination is an eligible activity under HUD's reinvented programs. The experiences and findings presented in this evaluation should greatly inform service coordinators, housing managers, and service providers in coordinating assistance for the frail, low-income elderly and persons with disabilities.



Michael A. Stegman
Assistant Secretary for Policy
Development and Research

Table of Contents

	Page Number
Overview of Case Studies	1
Established Service Coordinator Program Case Studies	
A.1	A.1-1
A.2	A.2-1
A.3	A.3-1
A.4	A.4-1
A.5	A.5-1
A.6	A.6-1
A.7	A.7-1
A.8	A.8-1
A.9	A.9-1
New Service Coordinator Program Case Studies	
B.1	B.1-1
B.2	B.2-1
B.3	B.3-1
B.4	B.4-1
B.5	B.5-1
B.6	B.6-1
B.7	B.7-1
B.8	B.8-1
B.9	B.9-1
Appendix A: Case Study Methodology	

Overview of Case Studies

This is the companion report on the evaluation of the Service Coordinator Program (SCP) conducted by KRA Corporation for the U.S. Department of Housing and Urban Development (HUD). The reader should refer to the *Evaluation of the Service Coordinator Program; Volume 1: Study Findings* for the analysis of evaluation findings. The case studies simply record the on-site interviews conducted by KRA with service coordinators, property managers, residents, and project managers, if applicable.

The focus of this study was on 18 SCPs. These SCPs were selected from the universe of SCPs funded by HUD in the first three years of the program 1992, 1993, and 1994. Two groups of nine projects were studied. One group of SCPs, funded in 1992, had been in operation for at least 2 years. The other group included projects that were funded in 1993 and 1994 and were, therefore, in the early stages of implementing their SCPs. By studying the two groups, the range of SCP implementation and operational issues are examined.

KRA Corporation staff visited each SCP for 2 days during a 3-month period from May 1995 through July 1995. During each visit, the service coordinator and property manager were interviewed. If the service coordinator was supervised by an individual other than the property manager, that individual was also interviewed, usually by telephone. Focus groups with an average of 12 residents were held at each project. Across projects, a total of 209 residents participated in focus group discussions. Ten randomly selected resident case records were reviewed at each SCP. A total of 178 resident case records were reviewed.

Projects were selected from the universe of 645 funded projects¹, after the projects were sorted into two groups, with the projects receiving funding in 1992 in one group (established SCPs) and projects receiving funding in 1993 or 1994 in another group (new SCPs). Nine projects were selected from each group. Factors that were considered when selecting projects included the size of project, geographic area, affiliation with a national or parent housing management organization, whether the service coordinator served more than one HUD project, and the project type (Section 202 and Section 8).

The 18 SCPs that were visited had the following characteristics:

- Ten projects shared service coordinators with other projects;
- Three projects were affiliated with a national housing management organization;
- Projects were evenly distributed in terms of size, including small projects (less than 50 units), medium projects (50 to 99 units), and large projects (100 units or more);
- Projects were relatively evenly distributed across geographic regions (Northeast, South, Midwest, or West);
- Most projects were Section 202/Section 8 projects; and
- SCPs had been in operation a minimum of 6 months prior to the visit.

¹ The study examined 645 SCPs funded during the first three years of the program for which applications were received by KRA from the HUD field offices.

The projects visited as part of this study were located in the following states: California, Colorado, Florida, Georgia, Illinois, Maine, Nebraska New York, Oklahoma, Ohio, Oregon, Pennsylvania, Rhode Island, South Carolina, and Wisconsin.

Because of the small number of respondents at each project and the importance of keeping responses confidential, projects are not identified by name. The first nine case studies presented are established SCPs. They are from the first group of SCPs funded by HUD. Their descriptions are ordered as "A" projects in the pages that will follow.

The second nine project descriptions are new SCPs. These projects received SCP funds in the latter rounds of funding (1993 and 1994). The new SCPs had only been in operation a minimum of 6 months. These projects are ordered as "B" projects in the pages following.

The following are terms that are commonly referred to throughout the case studies. They are briefly defined below for the reader.

Activities of Daily Living (ADL)---Indicators which help determine an individual's health status and abilities. "Frail" is defined as deficient in at least three of six activities of daily living (ADLs), which include eating, dressing, bathing, grooming, transferring, and home management activities; "at risk" is defined as deficiencies in one or two ADLs.

Area Agency on Aging (AAA)---the local agency through which State funds for services to the elderly flow. AAAs plan, develop, coordinate, and arrange for services in their designated service areas; therefore, they are valuable resources for obtaining information on what services are available locally. The extent of AAA involvement with the SCPs ranged from referrals only to having a close working relationship with the service coordinator

Assessment---An assessment can be either a formal ADL assessment or an informal determination of ADLs through casual observation. Service coordinators were more likely to use informal procedures.

Property Manager---Property managers are responsible for the day-to-day management of the housing development. Management activities include ensuring that apartment vacancies are filled and that units are well-maintained, conducting annual recertifications to determine residents' rents, and determining that residents are able to continue living independently. Given their administrative duties, property managers generally do not have the time or skills to provide case management to residents or to link residents to needed services.

Service Coordinator---The service coordinator is charged with determining the service needs of eligible residents, identifying appropriate services available in the community, linking residents with the needed services, monitoring and evaluating the effectiveness of the supportive services, and performing other functions to enable frail elderly and persons with disabilities of federally-assisted housing to live with dignity and independence.

Vial of Life Program---Vial of Life program provides medical and contact information that can be used in the event of an emergency.

Case Study Report

A-1

Introduction

A two-person team from KRA Corporation conducted a visit to this established Service Coordinator Program (SCP) in May 1995. During the visit, interviews were conducted with the service coordinator and property manager. In addition, 3 focus group discussions were held with 11 residents, and 10 case records were reviewed.

I. Description of Residents and Project

Development characteristics

The building is 13 years old and is owned by a national housing management corporation. The complex is a 3-story high-rise of 150 units and 156 residents. Plans are underway for a new 40-unit building. Although the building is located on the edge of a small town, it is not isolated; it is in close proximity to downtown. There is a restaurant located within walking distance of the building, but no other shops or stores are accessible by foot. There are no bus stops near the project, however, many of the residents have their own transportation.

The building has many common areas, including two large conference rooms on the first floor. In addition, there is a sitting area on each floor where residents can meet outside of their apartments. Within the building there is a tenant-run gift shop, flea market, library, and a game room. The residents, service coordinator, and property manager all indicated that the large amount of common space allows for a great deal of community interaction and activities. For example, some of the space is used for an exercise class and a dining room.

Both the service coordinator's and property manager's offices are located on the first floor. Initially, the service coordinator's office was next to the property manager's office, which meant that residents who wanted to speak with the service coordinator had to walk through the property manager's office. The service coordinator and the property manager agreed that the original location of the service coordinator's office initially made resident contact with the service coordinator difficult. Consequently, new office space, with a separate entrance, was constructed. It appears that residents now feel much more comfortable approaching the service coordinator in her office.

Security for the building is maintained by use of a locked entrance security door. The building is surrounded by a large field; outside there are shuffleboard courts, benches, and gardens. The surrounding community appears safe, and no one reported any problems with crime.

Resident characteristics

Of the building's 156 residents, more than 85 percent are over 62 years old; 45 percent of the residents are 75 years old or older. More than 66 percent of the residents are female. The majority of the residents are white (99 percent). Most residents are classified as well elderly. Eighty-three percent of resident households have annual incomes of less than \$10,000.

Previously available services

Prior to the arrival of the service coordinator, there were few services available to the residents. The property manager made some referrals and offered a little counseling to the residents, but felt she was not qualified in this area. The local aging agency was the primary contact point for the residents to learn about services. Outside of this agency, many of the residents had to learn about services on their own.

Before the service coordinator was hired, the property manager conducted informal activities of daily living (ADL) assessments for the SCP grant application. She stated that the ADL assessment was a difficult task to complete. She relied on information received from the residents or their family and sometimes had to guess based on the information provided.

II. Description of Program Operations

Organizational context of the Service Coordinator Program

Both the service coordinator and property manager are employed by a national housing management organization. Primary responsibility for the SCP lies with the coordinator for service programs for the national housing management organization. The service coordinator is not directly supervised by the property manager. She is supervised by the coordinator for service programs at the national organization and works closely with the management organization.

The service coordinator feels that, overall, she functions independently; however, the management organization requires that she complete paperwork which creates a closely supervised environment. The coordinator for service programs has developed forms for the service coordinator to detail her activities. The service coordinator is in contact with her supervisor almost weekly and feels her supervisor is a good source for advice.

The property manager and service coordinator meet daily, 5 to 6 hours weekly, to discuss program activities and how things are going.

The property manager has little input into the implementation of the SCP and feels that she is not qualified to run the program. The property manager wants the service coordinator to be the primary person in charge. The service coordinator has primary responsibility for procedures for contacting and recruiting residents, deciding which service providers to contact, selecting community activities to promote, and setting program priorities.

The property manager is very supportive of the service coordinator. Having the SCP at the complex has allowed the property manager to devote greater time to the building's management activities. The service coordinator and the property manager agree that they have a good relationship.

External linkages

The service coordinator works closely with Project Care, a local aging program. Project Care is a service to the residents and a resource provider. The aging office is very involved in the

complex, and the service coordinator feels they are a valuable outside resource. They have organized programs for the service coordinator to choose from, including the Great Brown Bag Review (medication review) and Blood Pressure Review.

The service coordinator has referred residents to outside professionals for assessments of their physical/mental needs. The assessments are completed by outside organizations, including a public health nurse and various mental health organizations.

Program objectives and program implementation

The initial objective of the program was to provide the best quality and most cost-effective services available to residents. The objective has remained the same.

The service coordinator felt that, during the first year, it was very difficult to evaluate what needed to be accomplished and how to get it done. For the first year, the national housing management organization established a timetable/schedule for the service coordinator to use for starting up the program. The service coordinator appreciated the involvement of the national housing management organization in the initial start-up and felt its involvement made the start-up easier.

Program size

The service coordinator serves 156 residents; 106 of whom are nondisabled elderly. The service coordinator has completed informal assessments for almost 90 percent of the residents.

Service coordinator qualifications and duties

The service coordinator has a bachelor's degree in social work and has received her accreditation from the National Association of Social Workers. Prior to working at the housing complex, she worked for 7 years as a social worker at a nearby hospital. In this capacity, she conducted discharge planning and targeted individuals over 65 years old for emergency crisis. She also worked briefly (1 month) in the hospital's nursing home.

The service coordinator's primary responsibilities are improving the quality of life for the residents, stressing to the residents their need to be independent, and monitoring their need for and use of services. In addition, she attempts to locate transportation resources for residents. Most of the service coordinator's time is spent counseling residents and completing paperwork describing her activities. Although her activities have not changed since the program was initiated, completing the paperwork has become more time-consuming. The program is voluntary, and the service coordinator often has to convince the residents that they need her assistance. The property manager believes that among the service coordinator's strengths are: her ability to be a good listener; her understanding of human behavior; and her caring and compassionate personality.

Service coordinator status

The service coordinator is employed as a full-time employee and works 35 hours per week. She has worked in this position for just over 2 years. She does not work at any other buildings. In addition to the service coordinator and property manager, the building staff consists of four other members: three maintenance personnel and an assistant manager. All staff are encouraged to be involved in the SCP, and monthly staff meetings are held. The staff have a positive attitude and make informal referrals to the service coordinator about residents they encounter. The service coordinator has held workshops with the staff on how to deal with an elderly population, and staff understand the aging process.

Service coordinator training needs

The service coordinator attended many training sessions since she started working at the project. In addition to training courses provided locally, by HUD, and the national housing management organization, she also attends a network meeting, sponsored by the aging agency, which brings together other social workers and service providers in the area. Both the service coordinator and the property manager are aware of HUD's requirement that the service coordinator receive training. The service coordinator plans to attend additional training sessions in the future. She would like to receive training on how to deal with residents who have difficult personalities.

Resident interactions

The service coordinator uses different approaches to deal with the elderly and the non-elderly persons with disabilities. The non-elderly persons with disabilities are more likely to decline services offered to them and have a strong desire to remain independent. The service coordinator, therefore, must spend more time convincing this group that they could benefit from her help. Overall, however, the service coordinator's approach is tailored to individual needs. The elderly are more willing to accept services made available by the service coordinator.

It is difficult for the service coordinator to estimate the number of residents she is currently meeting with, but feels she has met with almost all (90 percent) of the residents. She estimates that she meets with 25 residents a week. The service coordinator indicated that many of the residents were already receiving services; therefore, it is difficult to estimate how many she has linked to services.

The service coordinator has implemented a very formal voluntary assessment system. Every resident is asked if he or she would be willing to be assessed. For those residents who decline to be assessed, the service coordinator completes a written agreement stating that they have declined this service. For those residents who consent, a formal ADL assessment is completed and then it is updated monthly. The service coordinator then sets up a monitoring plan with each resident and meets with them on a regular basis.

The service coordinator does not aggressively pursue the residents. She casually checks up on all of the frail and at-risk residents once a month and observes them with other residents in social settings. The service coordinator prefers that residents approach her first and generally waits until they do so. When this approach does not work, she sends out memos and reminders and visits the resident to see how they are doing. The service coordinator also produces a

monthly newsletter that updates the residents on new services and upcoming activities. A bulletin board lists new services and community activities.

The service coordinator has developed a resident profile for each resident who agrees to meet with her. This profile details the resident's service needs, medical history, and includes an overall assessment conducted by the service coordinator. The profile also includes a case management plan section. She then schedules regular meetings with these residents either in her office or in their apartment.

The service coordinator conducts floor and community forums. She goes to each floor in the building and asks for the resident's suggestions on how to improve the program. The service coordinator also conducted a survey when she first started but found it difficult to get feedback. However, she hopes to do another one in the future.

A number of residents have refused to take advantage of the services that are offered. Both the residents and the service coordinator reported that residents who decline services do so because of their strong will to remain independent and their wish not to be bothered. Some residents have family in the area and rely on their help rather than the service coordinator. If the service coordinator feels that a service being refused is needed, she will ask the property manager to get involved. The service coordinator stated that she is a bit more aggressive in her outreach to resistant residents and tends to talk with them more often.

The residents reported that they are very satisfied with the service coordinator. Although they are very aware that she is there, they respect that she does not actively pursue them. They understand that the service coordinator's role is to help them get services and solve difficult problems. Residents reported that they are confident that the service coordinator could help them in the future with any problems that might arise. Those residents who have already been helped by the service coordinator are very pleased with the services they have received.

Service provider interactions

No one community agency has been critical to the success of the SCP. Residents have been referred to several agencies including the Mental Health Office, Office for Aging, Public Health Office, and Adult Protective Services. Although they have all been helpful, they require monitoring.

Services and equipment

The service coordinator has initiated a few activities to encourage resident involvement in the community. A daily exercise class is run by the residents and includes people from the community. The service coordinator has organized shopping trips and has brought in high school students to help the residents with their shopping. All of these activities are open to all building residents. In addition, residents operate a gift shop which is open to the outside community.

Since the service coordinator started, she has initiated the following home-based and project-based services: insurance counseling, blood pressure clinic, outside speakers, Vial of Life medication information, and the Great Brown Bag review. The service coordinator has also been able to provide the residents with medical equipment, including wheelchairs and hearing

aides. She has not been able to facilitate the development or use of any community-based services.

Access to funds for Service Coordinator Program activities

The service coordinator has not yet had occasion to access additional funds for program activities. A budget for office supplies, telephone, and travel is available to the service coordinator. Funds for resident activities appear to be available, if the service coordinator obtains approval from her supervisor at the national housing management organization. This approval would need to occur prior to accessing any funds. The service coordinator estimated that she could obtain up to \$300, if needed, for resident activities. However, the service coordinator gave no indication of the types of expenses that could be included.

III. Description of Case Records

All ten case records reviewed included ADL information. The service coordinator uses the resident profile form developed by the national housing management corporation. This form includes demographic information, medical information, a behavioral checklist, and an ADL checklist. In addition, the records included documentation of all contacts with the residents. Monitoring forms were found in those records where it was determined that the resident required regular monitoring.

IV. Quality of Service and Resident Satisfaction

The residents, service coordinator, and property manager are very satisfied with the SCP and are glad that it is available. The property manager believes that the program has been more successful than expected, and residents appreciate having a service coordinator on-site. The service coordinator is very positive about the program and believes residents like having her there.

The service coordinator feels the residents have benefitted from the contacts and services she has coordinated; residents shared the same opinion. They reported that they have received services they had not previously received. One resident said the service coordinator "is right on the ball, if I need a service I can either go to her or she will come to me. [She] has been very helpful."

Having the SCP has allowed the property manager to focus more on the details of her job and manage the building more efficiently than before the program. Both the property manager and service coordinator agreed that the biggest benefit of the SCP is for the residents who are now much more aware of what services are available and how to access these services. The service coordinator has enjoyed the flexibility of the job, the diverse people, the diversity of their problems, and being able to help people.

The consensus among residents is that the SCP has enabled them to live more independently. The property manager estimated that if it were not for the SCP, 25 to 30 residents would have to give up living in independent housing.

V. Roadblocks to Program Operations

Both the service coordinator and the property manager believe that the workload is manageable. The service coordinator thinks that the amount of paperwork required has taken valuable time that could be better spent with the residents.

The service coordinator and the property manager have a good relationship. At times, the property manager becomes involved in certain situations, but tends not to interfere with the service coordinator's responsibilities.

The relationship between the service coordinator and outside organizations, on the whole, is good. The service coordinator has had to be more persistent with some organizations than others. Adult Protective Services has been difficult to work with, and the service coordinator has had to work closely with them to ensure that residents' needs are being met.

VI. Recommended Changes and Future Plans

The service coordinator would like to provide more transportation resources to those residents who do not have cars or family members to take them to surrounding services. This need is supported by both the property manager and residents. The residents reported that taxis are too expensive, and they would like to have a van for their use. Both the service coordinator and residents also would like more freedom for the service coordinator to plan social activities. The HUD guidelines do not allow social activities and the service coordinator feels this prevents her from spending more time with the residents. The service coordinator also would like to decrease the amount of time spent on paperwork.

Case Study Report A-2

Introduction

The visit to this established Service Coordinator Program (SCP) was conducted in May 1995 by a two-person team from KRA Corporation. During the visit, interviews were held with the service coordinator, property manager, and coordinator of service programs for the national housing management subsidiary that owns and manages the property. The visit included 3 focus group discussions with 12 residents, and 10 resident case records were reviewed.

I. Description of Residents and Project

Development characteristics

This 7-story high-rise complex has 109 one-bedroom units occupied by 117 residents. The building sits on a quiet, tree-lined side street, one block from a main corridor. The neighborhood, in the suburbs of a large urban area, appears well-kept and safe. The building is owned and managed by a national nonprofit organization.

The building is located across a shared parking lot from another high-rise building that is owned by the same organization. The entrance to both complexes is secured by wrought iron entrance gates that remained open during the time of the visit. The common grounds are well-maintained with several lanterns surrounding the complex and the parking lot. There is ample parking for both buildings. An in-ground swimming pool is located in the rear of the building, along with several patio table and chair sets, a small stream, and benches for additional seating.

The outside entrance to the building has a small sitting area for residents. There is a bus stop outside the building's entrance. Within walking distance are several small stores and eateries.

The service coordinator's office is centrally located off the entrance lobby to the building. It is small, but private, and easily accessible to residents who must pass her office to get to the elevators. In addition, the service coordinator's office was in close proximity to the property manager's office, which is also located adjacent to the lobby.

The lobby area of the building is spacious and furnished with several sofas and chairs. During our visit, residents were frequently observed sitting in the lobby or outside socializing. There is a bulletin board off the lobby area with announcements and cards. Also located on the first level of the building is a commercial kitchen, a small dining room, a multipurpose room with tables and chairs, and a laundry room.

Resident characteristics

Of the 117 building residents, 76 percent are female. Eighty percent of the residents are white, 9 percent are African American, and less than 1 percent are Asian. Seven percent are Hispanic. The average age of the residents is 77 years. Sixty-six percent of the residents are well elderly, 17 percent are frail, 15 percent are at-risk, and less than 2 percent are non-elderly persons with

disabilities. The majority (62 percent) of resident households have an income of less than \$10,000.

Previously available services

Prior to the implementation of the SCP, residents had access to many of the services they are currently receiving. The services were primarily the public benefits services available including Medicaid/Medicare; Supplemental Security Income (SSI); food stamps; health resources; home-based services, such as home-health aides, housekeeping, and meals; and limited transportation resources. Project-based services included an English as a Second Language program, arts and crafts, greeting cards recycling and card shop, bingo, and special events activities to celebrate birthdays and holidays.

The property manager reported that having a service coordinator at the project has enabled her to devote more time to property management and building issues and less time on resident issues. Prior to the service coordinator, she spent a lot of time dealing with the service needs of the residents and listening to their concerns and problems. The service coordinator has decreased the amount of time that she spends dealing with resident issues. The property manager noted that even with the service coordinator, she sometimes still gets involved in some of the personal problems of residents.

The property management company assumed responsibility for estimating resident activities of daily living (ADLs) prior to applying for HUD funds.

II. Description of Program Operations

Organizational context of the Service Coordinator Program

The SCP is operated by a national housing management subsidiary of a national organization, an advocacy group for the elderly. The service coordinator for the project, as well as all other building staff, were hired by the corporation. The housing management corporation also manages 23 other properties that are served by 18 service coordinators.

The organizational structure within which the service coordinator operates is as follows:

- The housing management corporation is a subsidiary of a national organization.
- The service coordinator is supervised directly by the coordinator of service programs of the housing management subsidiary.
- The property manager is supervised by a regional property manager for the housing management corporation.

The coordinator of service programs for the national housing corporation provides direct supervision for all service coordinators hired. The service coordinator and her supervisor at the corporate level agreed that the service coordinator functions independently. She is supervised through weekly telephone conversations with her supervisor, whose office is located in another

part of the State. Both parties agreed that this arrangement has worked well. The service coordinator's supervisor reported that she does not have ongoing contact with building staff, although she calls the property manager as needed.

The property manager is supervised by a regional property manager for the national housing corporation. Supervision is provided primarily by telephone. The national housing management corporation is not involved in service delivery and coordination decision-making. According to the service coordinator, having the involvement of a national management corporation does not appear to impede the service coordinator's activities in any way.

The housing management corporation advertised and recruited for the service coordinator's position. The coordinator of service programs worked closely with the property manager during the hiring process, involving her directly in the interview process and the hiring decision. The housing management corporation required the property manager to participate in the interview process and to approve of the candidate before it extended an offer of employment. The housing management corporation wanted the property manager to feel comfortable with the service coordinator hired, even though the property manager does not provide direct supervision.

The service coordinator and the property manager appear to have a good working relationship and rapport. They both agreed that they work well together, and there are no communication issues. The property manager appeared to be very supportive of the service coordinator's role. Similarly, the coordinator of service programs and the service coordinator seemed to communicate well.

The housing management corporation sought four basic qualifications for the service coordinator. The qualifications included: a bachelor's degree in psychology or social work, experience working with the elderly, experience networking, and, more importantly, "a big heart."

The property manager, the former mayor, is very well connected and committed to advocating for the needs of the residents. When the building was built in 1979, HUD guidelines prohibited using funds to build a pool. According to the property manager, having a pool in this geographic area is not considered a luxury, but it is "a way of life." Recognizing this, she advocated for the residents and was able to raise the funds needed to install an in-ground pool which the building shares with an adjacent building.

From the service coordinator's perspective, the property manager is very supportive of her role as service coordinator. Similarly, the property manager expressed support for the work that the service coordinator does. She spends as much time as needed meeting with the service coordinator to discuss whatever issues need her attention.

The property manager is neither involved in planning program services and activities nor in day-to-day program operations. The building has a very active tenant association that is responsible for planning programs and social events.

External linkages

There is a local aging agency that the service coordinator frequently contacts concerning benefits assistance for residents. The service coordinator relies on the local social services agency to

refer residents for services. She frequently calls them concerning Medicaid and SSI problems or to obtain housekeeping services for residents. The service coordinator has referred residents to a psychologist for mental health assessment.

Program objectives and program implementation

Overall, the objective of the SCP is to improve the residents' quality of life by linking them to affordable community services and facilitating short-term temporary services for residents until more permanent arrangements could be made. From the property manager's perspective, the program's priority is for the service coordinator to handle those residents who need the care, which has not changed.

Among the first activities undertaken by the service coordinator were to create a directory of service providers and to work with the most needy residents at the property. In conjunction with these efforts, the service coordinator began an assessment of the entire resident population. Outcome goals included the development of a plan for each resident who wanted linkage to area services or to services within the building. The property manager reported that implementation of the SCP has been a gradual process and that the transition has been good.

Program size

At the time of our visit, the service coordinator served 112 residents, only one of whom was nonelderly persons with disabilities. All of the residents benefit from the services of the service coordinator. The service coordinator reported that she meets with approximately 20 to 25 residents per week. Since hired, she has met with all residents. Presently, the service coordinator was trying to link 10 residents to services; she had already successfully linked approximately 80 residents to services.

Service coordinator qualifications and duties

The service coordinator has a bachelor's degree in sociology and psychology, some course work at the master's level, and many years' work experience with a family social service agency. Prior to taking the job of service coordinator, she worked with families providing assistance with food stamps and medical benefits.

Her duties as service coordinator include offering emotional support, assisting with medical insurance and bills, providing benefits assistance by obtaining community and government services (for example, house cleaning, home health aides, and food stamps), and acquiring equipment and devices. She spends most of her time counseling residents concerning their problems and dealing with the problem of elderly loneliness. Her duties have not changed since she was hired.

The property manager commented that among the service coordinator's strengths are her ability to deal with residents everyday and her soft-spoken manner. The service coordinator's supervisor views the service coordinator's role as a ferret, brokering as many services for residents from as many agencies as needed.

Service coordinator status

The service coordinator works part-time, approximately 28 hours per week. The part-time arrangement has not presented any problems. The service coordinator does not serve any other buildings, and there are no other staff, interns, or volunteers assisting her.

The service coordinator believes that the maintenance staff do not seem to understand the aging process and could benefit from some training in that area. She recommended that they receive some group instruction on understanding the elderly. Maintenance staff report directly to the property manager who would be responsible for setting up and coordinating any training.

Access to funds for Service Coordinator Program activities

The service coordinator can purchase any supplies and equipment under \$50 for the SCP. Equipment costing more than \$50 requires obtaining three written bids. The service coordinator recently requested a typewriter and after securing the required bids got the equipment needed. The service coordinator also has a telephone budget that can be used to call service coordinators at other locations throughout the United States. The national housing management corporation encourages service coordinators to confer and share ideas.

Service coordinator training needs

The service coordinator attended a 4-day workshop sponsored by the national housing management corporation last spring. The training, which all service coordinators and property managers attended, focused on supportive counseling and the Older Americans Act (Title III- and IV-related issues among others) and provided the opportunity to meet with other service coordinators from around the country. The service coordinator is comfortable with her role and does not feel that she needs additional training or assistance to do her job effectively. No additional training is planned.

Resident interactions

The service coordinator's office is located directly off the lobby and has a glass entry door so residents can see when she is in. Both factors contribute to frequent internal interactions with residents. The location of her office facilitates multiple informal interactions with residents and some private space for one-on-one meetings. In addition, she regularly telephones and visits the residents for whom she is currently coordinating services. On average, residents see the service coordinator twice monthly. She either calls the resident or visits the resident in their apartment. The service coordinator has told all residents to let her know if they need her for any reason. If she doesn't hear from a resident for an extended period of time, she always calls them.

The service coordinator does not have regularly scheduled contacts with residents. Interactions occur informally and on an as-needed basis. Contacts are initiated both by the resident and the service coordinator. This approach appears to be working for the service coordinator. She has very good interpersonal skills and knows all the residents personally.

During the past 2 years, only 3 residents have declined services. There also have been a few residents who chose not to meet with the service coordinator. The service coordinator's

impression is that residents who decline to meet with her are self-sufficient and prefer privacy. The service coordinator reported that her strategy for getting residents to meet with her has been to not be pushy. In fact, the program's policy is not to require residents to participate in the SCP. The service coordinator gave an example of a resident who wasn't interested in meeting with her, but when the resident needed a service, the resident sought her out. Her approach has been to inform residents that she is there to assist them in any possible way. Using this approach, she has been very successful helping residents. There has not been a need to take any action to encourage residents to use services or participate in program activities.

The service coordinator does not attend tenant association meetings because the national housing management corporation has a written policy restricting service coordinators from attending these meetings unless they are invited. The service coordinator's resident outreach strategies include putting up informational materials; writing articles for the tenant newsletter, which is published every 3 months; and establishing daily contacts with residents. She also initiates contact with new residents as soon as they move in to inform them of the SCP and of her role.

The property manager will introduce the service coordinator to new residents in a letter being prepared by the coordinator of service programs. When the service coordinator was first hired, the coordinator of service programs sent letters to all residents informing them that a service coordinator had been hired as well as described her role.

Service provider interactions

The service coordinator interacts with local service providers to initiate service or to follow up if a resident has questions or is dissatisfied. She keeps a comprehensive directory of all local service providers and interacts with them as necessary to meet residents' needs. Among the local service providers with whom the service coordinator has established contacts are the local aging agency, and the food stamp and social security offices.

Services and equipment

Limited services are provided within the building. The service coordinator has arranged in-home meal delivery for some residents and has linked other residents to housekeeping assistance and personal and in-home health care. Residents reported that the service coordinator has worked with them to facilitate provision of Medicare/Medicaid, food stamps, SSI, as well as to receive transportation services. Other residents reported receiving a variety of equipment and devices through the efforts of the service coordinator.

III. Description of Case Records

The service coordinator kept extremely detailed case record information on all residents. She also uses a case management form that includes a section on ADL characteristics. This form was not consistently found in all of the records reviewed. Only six of the ten records reviewed by the study team included a completed form that recorded all ADL deficiencies. The record also included a resident profile form that the service coordinator completed on each resident. This form contains a social and medical history for the resident, as well as, the name and telephone numbers for physicians and immediate family members.

No monitoring or case management plans are developed. The service coordinator records every contact with the client, the nature of the contact, problem identified, service provided, and follow-up activities conducted.

IV. Quality of Service and Resident Satisfaction

All 15 participants in the focus group expressed overwhelming satisfaction with the service coordinator and the assistance she has provided them. One participant had been incorrectly billed by the hospital, and the service coordinator was successful in correcting the error for her. Documentation in the case record showed that the process took approximately 1 year. The resident said she was grateful for the service coordinator's persistence in resolving her problem, which took many phone calls and letters. Other residents had been successfully linked to services due to interventions on their behalf by the service coordinator.

It was apparent throughout each of the discussion groups that all participants had a friendly relationship with the service coordinator and were comfortable going to her for help. They felt the service coordinator regularly monitored their progress and she always stopped to talk to them and asked how they were doing.

The participants perceived the quality of services available to them to be better since the building had hired the service coordinator. They maintained that the service coordinator had linked them with the very best services available in their community. Although some noted that they were dissatisfied with the actual service provided, they were quick to point out that it was not the service coordinator's fault. The participants unanimously agreed that the service coordinator provided the highest quality services possible and that she does all she can do with the resources available. One resident gave her an "A+" and said that "she could do no better than she is already."

The service coordinator stated that what she likes best about the SCP is that it fills an important need for residents and improves their quality of life. The property manager stated that the SCP has helped her by giving her more time to carry out building management tasks. It has helped residents by giving them more time with someone who can focus on their needs, time that she could not give them consistently.

The greatest benefit to residents from the service coordinator's perspective has been that the SCP improves their quality of life. While the property manager saw no difference in the benefit to the development, the service coordinator believes that the SCP has allowed the property manager to function more effectively. She no longer has to deal with some of the residents' problems.

The majority of the participants found that having the service coordinator in the building has improved their living environment and ability to obtain services at the property and in the community. For example, many stated that they now have services such as house cleaning and home meal delivery that previously were difficult to obtain and too expensive. They reported that the service coordinator has filled the gap in linking residents to services than previously existed because the office staff were too busy with office work to assist everyone.

Participants who had little or no contact with the service coordinator were the only ones who did not report any perceived improvements.

V. Roadblocks to Program Operations

There were no roadblocks to program implementation and operation identified. The service coordinator reported that prior to being hired, the coordinator of service programs of the national organization made an effort to establish a relationship with her. Another factor which helped her transition into the role of service coordinator was that the property manager was involved in the hiring decision and was very comfortable with having the service coordinator in the building. The service coordinator believes that her current caseload size is manageable.

VI. Recommended Changes and Future Plans

The service coordinator would like HUD to increase funding for the SCP to provide funds for temporary short-term supportive services when there is a waiting list at local service providers for more permanent services. The property manager felt the SCP runs smoothly and did not offer any recommendations for changes.

Participants could not think of anything they would change. They unanimously agreed that the service coordinator does everything humanly possible for them and for the other residents. The only suggestion was to get another service coordinator just like her because she does so much with so little time.

Case Study Report A-3

Introduction

A two-person team from KRA Corporation visited an established Service Coordinator Program (SCP) in May 1995. The team interviewed the service coordinator and property manager, conducted 3 focus groups with 13 residents, and reviewed 15 resident case records.

I. Description of Residents and Project

Development characteristics

The complex is a 144-unit, six-story high-rise apartment building located in a small, industrialized urban area. All apartments are handicapped accessible and equipped with pull-cords for emergencies. The building is 12 years old. A 67-unit addition is planned for next year.

The building is owned by a foundation associated with a large labor union. It is managed by a national housing management subsidiary of a national organization. All management services, including the property manager and service coordinator positions, are contracted out to the management corporation.

The complex is located in a residential neighborhood across the street from a large mall. A senior center, also owned by the foundation, is located directly behind the building. The property manager indicated that the building had established good relationships with the neighborhood. For example, neighbors donate fresh produce from their gardens to residents.

The front door is always locked and has a security camera and buzzer system so that residents can let visitors in without coming downstairs. All visitors must sign in at the secretary's office when they enter the building. Residents can watch the front door (via the security camera) from their televisions in their apartments.

The first floor of the building has several lounge areas, a kitchen and dining room with cafeteria-style tables, and mailboxes. However, residents are discouraged from congregating on the first floor. The property manager and secretary each have an office located by the front door of the building. The service coordinator uses an area partitioned at the back of the common area on the first floor, adjacent to the dining room. Each floor also has a lobby, with chairs and tables, where residents can gather. Calendars and bulletin boards with notices of building and community activities are posted throughout the building, including in the lobby and the laundry room. Several services are provided in the building, such as a library, and a food delivery that includes baked goods, milk, eggs, and frozen food.

The property manager lives in the building and is available for emergency assistance almost 24-hours a day. The building has implemented a system of hall monitors and "on-call" residents for nighttime emergencies. The residents hang "I'm ok" signs on their doors each morning to indicate to hall monitors that they are up and about for the day. The service coordinator is

currently trying to implement a Vial of Life program. The Vial of Life program provides medical and contact information that can be used in the event of an emergency.

There are benches by the front door and on the patio in the back of the building for residents to use. There is ample parking for residents' vehicles.

A public bus stop is located at the end of the driveway and offers regular bus service. In addition, a bus stops at the front door twice a week to take residents shopping.

The property manager indicated that the service coordinator has no private space for her office and that this has caused problems in implementing the SCP. The service coordinator sits in a partitioned area in a common space shared by others. The property manager mentioned that, otherwise, the layout of the complex is beneficial to the SCP—all apartments are very accessible and staff can get to any resident within minutes.

The service coordinator mentioned the lack of privacy. Because of her office arrangements, there is always somebody around the corner. She does not feel that this hinders residents; they often come back to talk to her at another time or the service coordinator will go to their apartments. In addition, the service coordinator mentioned that there is no common area in which to hold SCP activities. They often have to use the dining room, which can create a schedule conflict with the meal service.

Resident characteristics

Of the 146 residents, 92 percent are female and 97 percent are elderly. Only three households are non-elderly disabled. The residents are predominantly non-Hispanic (94 percent) and white (95 percent). Forty-one percent of all residents are at risk and 41 percent are frail. Fifty-seven percent of the households have annual incomes of less than \$10,000.

Previously available services

Several residents in the focus groups indicated that there were no services available prior to the SCP and that they had to ask their children for help or go to the hospital for assistance. Others indicated that they were able to go to the property manager or secretary for assistance, such as transportation, but both were very busy and did not have as much time to help as the service coordinator does. One resident said that the property manager brought in guest speakers and produced a newsletter and calendar that were posted on the bulletin board. Another resident mentioned that the public bus came to the complex twice a week and took residents to the mall or grocery store.

II. Description of Program Operations

Organizational context of the Service Coordinator Program

The SCP is operated by a national housing management subsidiary of a national organization. The service coordinator for the project, as well as all other building staff, was hired by the corporation. The housing management corporation also manages 23 other properties that are served by 18 service coordinators.

The organizational structure within which the service coordinator operates is as follows:

- The housing management corporation is a subsidiary of a national organization.
- The service coordinator is supervised directly by the coordinator of service programs of the housing management subsidiary.
- The property manager is supervised by a regional property manager for the housing management corporation.

The coordinator of service programs for the national housing management corporation provides direct supervision for all service coordinators hired. The service coordinator and her supervisor at the corporate level agreed that the service coordinator functions independently. She is supervised through weekly telephone conversations with her supervisor, whose office is located in another State. The service coordinator's supervisor reported that she does not have ongoing contact with building staff, although she calls the property manager as needed. The property manager is supervised by a regional property manager for the national housing corporation. The involvement of a national management corporation does not appear to impede the service coordinator's activities in any way.

The service coordinator functions independently from the property manager but spends 4 to 5 hours per week working with the service coordinator. They usually have short, informal meetings on an as-needed basis. Although the manager is very supportive of the program, she has little knowledge of what the service coordinator does and has little involvement in the day-to-day operations of the SCP. It appeared that the property manager thought the service coordinator spent much of her time completing HUD housing unit recertifications. According to the property manager, the service coordinator helped residents complete forms and provide verification needed to complete the recertification process. This may involve completing inspections and arranging services to ensure apartment unit meets housing quality standards.

The current property manager has been at the complex for 1.5 years. The previous property manager was not supportive of the SCP, and the housing management corporation asked that manager to leave.

The service coordinator has the primary responsibility for contacting and recruiting residents, although the property manager assists the service coordinator, because the manager is in the complex more often and has more contact with residents' family members. The service coordinator is also responsible for setting program priorities and deciding which service providers to contact based on resident input. The property manager stated that the service coordinator has primary responsibility for all SCP activities, but added that she is involved in contacting and recruiting residents and in setting program priorities.

The service coordinator tries not to get involved in planning and implementing social activities. She noted that HUD regulations prevent the service coordinator from organizing social activities. She will, however, organize educational activities, such as guest speakers. The residents have a club that plans most of their social activities.

Program objectives and program implementation

The service coordinator and property manager agreed that the goals of the SCP were:

- meet the needs of the residents;
- help the residents complete the HUD housing unit recertification process;
- assist the residents with their paperwork (including completing insurance forms, balancing checkbooks, and applying for benefits assistance); and
- "Chit-chat" with individual residents and sit down with their families.

The service coordinator did not think that the original program objectives have changed but mentioned that the SCP was still being defined. The property manager did not know whether objectives had changed because she was not at the complex when the SCP was established. The property manager thought that SCP activities were initiated as quickly as she had expected.

Service coordinator qualifications and duties

The national housing management corporation sought four basic qualifications for the service coordinator. These included a bachelor's degree in psychology or social work, experience working with the elderly, experience networking, and, more importantly, "a big heart."

The service coordinator has been at the complex for nearly 2 years. Prior to this, she was in college, where she earned a bachelor's degree in gerontology and nursing home administration. She is a licensed nursing home administrator. The property manager was unaware of the service coordinator's background and qualifications but believed that the service coordinator was very good at obtaining help for residents. The property manager also thought that the service coordinator reacted immediately to requests for assistance.

The service coordinator's primary responsibilities include coordinating services, evaluating residents and completing resident profiles, and establishing linkages with service providers. When referring and linking residents to services, she will often give residents the phone numbers to call rather than arranging the services herself.

The service coordinator's responsibilities have not changed, but residents have become more comfortable with her and thus are more demanding of her time. The service coordinator felt that it took about a year to develop trust with the residents.

Service coordinator status

The service coordinator works directly for the corporation that manages the complex. The service coordinator works full-time (32 hours per week) at this complex and has no other staff support.

The secretary, property manager, and Meals on Wheels staff alert the service coordinator to problems with residents. The service coordinator has limited contact with the maintenance staff.

Access to funds for Service Coordinator Program activities

The SCP budget is handled by the management corporation. If a program cost is under \$50, the service coordinator does not need to call her supervisor for approval—she sends the management corporation the bill for reimbursement. The service coordinator also has a telephone budget that can be used to call other service coordinators at other locations throughout the United States. The management corporation encourages service coordinators to confer and share ideas.

Service coordinator training needs

The service coordinator attended a 1-week training session sponsored by the housing management corporation that included all of the property managers and service coordinators from the company's SCPs. She also attended a statewide conference for service coordinators. A group of approximately 20 service coordinators from the area will continue to meet every 2 months. The service coordinator commented that the HUD representatives at the conference were not very knowledgeable about the SCP.

The service coordinator feels she would benefit from additional workshops and mentioned that HUD requires 12 hours of continuing education units (CEUs). She would like more training from HUD, especially concerning how the paperwork and forms should be completed.

The property manager feels that the service coordinator does not need any additional training. She mentioned that the service coordinator has the experience to teach others.

Resident interactions

The service coordinator does not use different approaches for working with the elderly and the non-elderly persons with disabilities. She noted that the four nonelderly persons with disabilities in the complex are approximately 60 years old and, therefore, are not readily distinguished from elderly residents.

The service coordinator has met with more than 50 percent of the 146 residents. She is currently working with 15 residents and meets with approximately 20 residents each week. The service coordinator has already made 100 linkages to services. She meets with residents as needed—approximately once or twice a month, unless they are frail or at risk.

The service coordinator checks the building sign-in sheets to see which providers have been coming to the building and which residents they have gone to see. She also checks with residents to see if the services were provided after she made a referral.

Meetings are initiated by both the service coordinator and residents. In general, she has not had problems getting residents to meet with her. She will go to a resident's apartment to meet the resident; if there is no response, she sends a letter to the resident.

The service coordinator distributes a monthly newsletter and calendar with birthdays, recipes, and activities, as well as other written notices, as a form of outreach to residents.

When first meeting with a resident, the service coordinator discusses her role, talks about herself, and then talks about the resident, and completes the resident profile and formal assessment. Intake, or the profile and assessment, is always done in the resident's apartment. She observes residents performing various activities when completing the emotional and physical checklist. The service coordinator develops a plan, including contacts, for each resident that she meets with; however, the plan is not always in written form. The service coordinator may make a mental note or not keep formal records. For subsequent visits, the service coordinator will meet in a resident's apartment, if the resident does not feel comfortable coming to her office.

The service coordinator does periodic reassessments of residents' needs. Outside service providers do their own reassessments for their service provision. The service coordinator does not formally monitor service delivery.

The service coordinator feels that residents speak up with their suggestions for the SCP. She does not attend tenant meetings because she does not want to establish a visible link to the property manager. The property manager also mentioned a questionnaire that the service coordinator distributed to solicit resident input.

All residents in the focus groups had met the service coordinator. Many said that they speak to her briefly when they see her in the building, but do not need any regular assistance. Residents mentioned that the service coordinator is willing to come to their apartments, if needed.

Approximately five residents have refused housekeeping services, according to the service coordinator. She feels this may be due to low educational levels and residents thinking that the condition of their apartments is normal. The most successful approach for dealing with residents who declined services has been to discuss the problem with them and let them know that everybody needs help at some point. According to the service coordinator, it is very important to know the individual's personality in order to better interact with the residents and to understand and be sensitive to their needs for independence. The property manager feels that residents may decline services because they don't think they need them. The property manager may call the resident's family, if they decline needed services.

Only one resident in the focus groups mentioned that she had declined a service because her children were able to help with meals and housekeeping. Another resident commented that most people in the complex are proud and that residents keep an eye on their neighbors and help each other whenever possible. According to the service coordinator, residents decline services for a number of reasons: they are too proud to ask for assistance; they like to assert their independence; and they would rather obtain help from a neighbor.

Service provider interactions

The service coordinator frequently works with the Department of Family Services, the aging agency, and other community agencies. The aging agency coordinates an assortment of services including personal care, transportation, and housekeeping. Staff from the aging agency will come to the complex to conduct resident assessments and determine eligibility for their

programs. Meals on Wheels also comes to the apartment building and uses the kitchen in the complex to prepare meals for residents and for distribution in the community.

Services and equipment

The community often includes the apartment complex in activities. Different organizations will contact the service coordinator to set up activities for residents. They have had dinners and other activities at schools and churches in the area. Merrill Lynch, the investment banking firm, gives residents one hour of free phone calls once a year at their offices.

Services available within the building include a monthly home-health day with a podiatrist, hearing screening, eye screening, and blood pressure checks; a post office truck that sells stamps; an in-house library; and food delivery, including baked goods, eggs, dairy products, and frozen food. There are many community agencies that provide services within the building, such as home-health aides, meals, and housekeeping.

The service coordinator is responsible for bringing these new services to residents. New services offered within the building include assistance with budgeting and money management, assistance with Medicare/Medicaid, and educational programs. The service coordinator also arranged for a beautician to come to the building twice a week. The service coordinator commented that the residents aren't being offered many new services but have an increased awareness of and access to services.

The residents mentioned that their club handles most of their social outings. They also mentioned having speakers, dinner at a school in the fall, and an "adopted grandchild" program. Residents were not sure if these activities had been initiated prior to the SCP. Residents mentioned that the following services were received by themselves or other residents: an on-site hairdresser, assistance with bills, assistance with cleaning, a pharmacist, blood pressure checks, eye glass repairs, assistance with Family Services, and Meals on Wheels. Residents were careful to stress their independence.

The service coordinator has helped residents obtain needed equipment in two ways: by calling the equipment supplier directly and by working with residents' doctors to obtain needed signatures for insurance reimbursement.

III. Description of Case Records

Fifteen resident case records were reviewed. Five of these records contained completed ADL assessment information. The service coordinator used the "Activities of Daily Living and Other Services" form as well as a "Resident Intake Form" that were developed by the housing management corporation. The service coordinator had very little in the way of case notes and little information about follow-ups in the resident case records. We found that many of the records were empty which required us to select additional records to review. The service coordinator said that she only completed assessment and intake forms on residents she was working with. Most of the service coordinator's contact with residents is for assessment purposes and benefits assistance.

IV. Quality of Service and Resident Satisfaction

The service coordinator felt that residents had a positive reaction to the SCP. They are now very receptive to the program because they understand the service coordinator's role. The service coordinator had to establish a level of trust with residents after the previous property manager left the complex. The previous manager was not supportive of the SCP and told residents not to trust the service coordinator.

Residents in the focus group were very satisfied with the service coordinator. They appreciate that she is available if they need her and find this to be reassuring. One resident stated "she's adequate for whatever need we have." Another commented that not every young person can work with the elderly. All agreed that no matter how small the problem, the service coordinator is willing to help. She "makes it sound as if it's going to be okay." Staff and residents felt that the SCP has been very effective in providing services to residents who need them.

The service coordinator thinks one of the best things about the SCP is that the service coordinator reduces the stress and pressure of Medicare bills and other mail because she can serve as an advocate for the residents. Residents know that they can come to the service coordinator for help getting services. In addition, the hospitals have learned about the SCP and will call the service coordinator about residents who are hospitalized to discuss their medications and need for services.

One of the greatest benefits to residents has been getting services that they were not aware of or did not know how to access. The complex has benefitted from the SCP in that the workload of the office staff was decreased. The property manager felt that the SCP was helpful in getting residents HUD certified on time and in keeping the apartments in shape. She mentioned that the SCP has given the complex a better name in the community.

The property manager believes 25 residents have been able to remain in independent living because of the SCP and the assistance they receive in keeping their apartments clean and maintaining their personal hygiene.

V. Roadblocks to Program Operations

The service coordinator felt that her workload was a little heavy and that it would be more manageable if she worked 40 hours a week instead of 32 hours a week. The property manager agrees, commenting that the service coordinator's workload increased in the last year. As residents become more comfortable with the service coordinator, the more demanding they are of her time.

The service coordinator has no private office space. Both the service coordinator and the property manager perceive this lack of privacy as a problem because residents sitting in the lounge area can overhear the conversations in the service coordinator's office.

Earlier, the previous property manager undermined the SCP. The former property manager told residents that the service coordinator was a "spy" and would not give her a desk or a key to the building. This property manager was replaced by the management corporation after 3 months. There are no problems between the current property manager and the service coordinator.

The service coordinator reported that there are no problems working with outside service agencies other than occasional conflicts with individual staff members at some agencies.

VI. Recommended Changes and Future Plans

No new services are in the planning stages other than to bring in speakers on various topics. Staff feel that transportation is still a critical need and would promote resident participation in activities and use of services.

The service coordinator offered some suggestions for HUD. According to the service coordinator, the paperwork varies by project and does not give HUD a realistic impression of the services provided. She also said that the program is too vaguely defined and service coordinator activities are difficult to categorize according to the terms used in the annual report form.

The property manager suggested that it would be more efficient, for management purposes, if all staff in the complex reported to the property manager rather than to different supervisors at the management corporation's home offices.

Case Study Report A-4

Introduction

A two-person team from KRA Corporation visited this established Service Coordinator Program (SCP) in May 1995. During the visit, the service coordinator and the property manager were interviewed. In addition, a telephone interview was conducted with a representative of the service coordinator's contract employer. Three focus group discussions with 13 residents were held, and 10 resident case files were reviewed.

I. Descriptions of Residents and Project

Development characteristics

The housing development for the elderly consists of three high-rise buildings (as high as 15 stories), two of which were the focus for the study of the SCP. The property manager and the service coordinator have private offices located within the same building. The offices are situated fairly close to each other. The service coordinator's office is housed in a resident apartment on one of the residential halls near the main entrance to the building; the property manager's office is next to the building's main entrance.

The building is managed by a local management corporation. The original building accepted its first residents in 1963. Subsequent additions to the building created a complex that offers 499 residential units, including efficiencies, studios, one-bedroom, and two-bedroom units. The complex was developed by local community residents, with the assistance of a local men's service organization. The men's service organization continues to remain a sponsor of the complex.

Located in one of the buildings is a large community activities (or senior) center that is used by residents of the building as well as elderly residents from within the community. The activities center contains multiple activity areas, including an auditorium, a dining room and lounge, a rotunda and greenhouse, an arts and crafts area, a wood working shop, and several other areas for use by the neighborhood elderly. In many of the common areas, bulletin boards contained information on the activity center's activities, resident meetings, and other information relevant to residents.

The project is located in a suburban community with grocery stores, banks, shops, and restaurants, all within walking distance. The complex is surrounded by a residential neighborhood where most of the housing consists of single family homes. A community hospital also is located in the vicinity of the complex. The community has a large elderly population, and multiple services geared to the elderly. In addition, the local aging agency provided a social worker to work with residents prior to the implementation of the SCP.

Several outdoor areas are provided for residents. In the rear of the complex, plots are provided for gardening. There is also an area near the rotunda (a central area connecting two of the buildings) where there are seats and a flower garden.

Residents could only enter the front of the building through the use of a key or by being buzzed in by the receptionist. There were also side entrances that were not locked during the day.

Resident characteristics

There is a total of 338 residents in 320 units all of whom are elderly. About 76 percent of the residents are female, and 99 percent of the residents are white. All residents are 62 years old or older with about 60 percent of the residents over the age of 76. Approximately 39 percent of the residents are considered at-risk; 35 percent are frail elderly; and the remainder are considered well elderly. There are no nonelderly persons with disabilities residing in the complex.

Previously available services

Before the establishment of the SCP, residents received services through the area agency on aging (AAA). These services included visits made by a local social worker. The service coordinator previously worked for the AAA in this capacity, and the complex was within her community jurisdiction. As a community social worker, she was responsible for linking elderly residents throughout the area to local service providers, similar to her role as a service coordinator. Residents also were linked to different service providers through the activity center or by referrals made by the property manager and other staff members.

Because the AAA was active in the community and worked with many of the residents in the building, the property manager was able to ask agency staff how many of the complex's residents had been or were currently being served by the agency. This helped in estimating the number of residents with Activities of Daily Living (ADL) deficiencies when preparing the SCP grant application.

II. Description of Program Operations

Organizational context of the Service Coordinator Program

The service coordinator works full-time at the building as a contract employee of the AAA. This agency provides contract service coordinators to other HUD-funded programs. They do not provide contract employees of other types or to other programs.

Initially, there was confusion and tension as to who was the service coordinator's supervisor. The AAA felt they were responsible for the service coordinator's supervision, while the property manager felt that the service coordinator was under her supervision. Currently, a division of supervisory responsibilities is in place. The AAA provides clinical supervision of the service coordinator and the property manager is responsible for her day-to-day administrative supervision. This seems to be satisfactory to all parties involved.

The property manager is very supportive of the service coordinator's activities allowing the service coordinator the primary responsibility of planning program services and activities. Many of the interactions between the service coordinator and the property manager occur when the property manager observes a resident that might be in need of services and whom she then refers to the service coordinator. In this capacity, the property manager and the service coordinator

spend about 2 hours a week working with each other. The property manager now has more time to manage the complex and has decreased the overall time she devotes to issues concerning resident services. The property manager estimated that she spent about 1 hour a day coordinating services to residents prior to the SCP.

External linkages

Because the service coordinator is an employee of the AAA, all services provided by the agency are available to the SCP.

Program objectives and program implementation

The original objectives of the program were to link residents with the services they needed to continue living in the complex independently. The objectives have not changed since the inception of the program.

The property manager reported that the funding process took a long time and the entire process of implementing the SCP was slower than anticipated. Despite these delays, the SCP at this complex was the first in the region to be implemented.

Program size

The service coordinator is a full-time employee (40 hours per week) and splits her time between the 2 adjacent buildings (a total of 338 residents). Another service coordinator serves the remaining 131 residents in the third apartment building.

Service coordinator qualifications and duties

The service coordinator has a master's degree in social work and has been working with the elderly as a social worker since 1988. While a social worker with the AAA, the service coordinator was responsible for providing the same services to the surrounding community that she now provides the residents of the complex. Her current major responsibilities are meeting with the residents and monitoring them to keep in touch with their needs. She accomplishes this by visiting residents in their apartments, visiting them in the hospital, and through casual conversation in the halls. Residents also feel comfortable dropping by her office.

The property manager knew the service coordinator prior to her working at the complex and knew she worked well with the residents. She thought the service coordinator's strengths were her knowledge of the services available and her ability to access them easily. She also thought the service coordinator possessed good "people skills" that permitted her to interact with the residents effectively.

The service coordinator feels her current responsibilities are similar to the responsibilities she had as a community social worker. However, as the service coordinator, she now spends more time than before documenting her resident contacts, assessments, and referrals to meet HUD reporting requirements.

Service coordinator status

The service coordinator is a full-time contract employee from the local aging agency. She splits her time between two buildings in the complex.

The service coordinator spends about three hours every two weeks meeting with her employer and about one hour of this time is spent on clinical supervision. The remaining time is spent discussing social work staffing, meeting with the other two coordinators under the AAA's employ and discussing program advocacy with the head of the agency.

The service coordinator receives performance evaluations from her social work coordinator at the AAA. The property manager does not provide any formal evaluations of the service coordinator's performance. Although she is evaluated, the HUD contract only provides a 5 percent inflation adjustment each year and does not provide the service coordinator with performance bonuses or raises. Despite the HUD funding limitations, the service coordinator was given a two percent increase last year, which was provided by the AAA.

The service coordinator receives assistance from the office staff and the building maintenance staff. They help with tasks like placing notices under doors, posting notices on the bulletin boards, typing, and other administrative tasks. The service coordinator also works with the activity center staff (six members) in planning group activities like health fairs. All staff also alert her when they notice changes in residents' behavior and will help her deal with residents not receptive to her offers of help. A volunteer service is provided through one of the programs offered by the activities center. Residents volunteer to provide transportation, work in the cafeteria, and preside over activity center activities, such as the pottery and woodworking classes.

The service coordinator offered in-service training to building staff where she teaches staff about aging issues, including Alzheimer's disease and dealing with delusional people, and about staying alert to behavioral and physical changes among the elderly residents. Both the property manager and the service coordinator reported that these sessions have helped staff to better understand the aging process and services for elderly persons. In particular, the in-service sessions were helpful to maintenance staff. The service coordinator specifically mentioned that she provided staff with an in-service on Alzheimer's Disease.

Access to funds for Service Coordinator Program activities

There is no fund set up that the service coordinator can use for program supplies or activities. The supplies the service coordinator uses are included in the project's budget. Occasionally, the service coordinator conducts activities where she needs refreshments; money for this comes out of petty cash. Most resident activities, however, are funded through the activity center.

Service coordinator training needs

The service coordinator has received, and continues to receive, training in the following forms: participating in seminars, conferences, workshops, and completing in-house training for building staff. The service coordinator has had in-house training on policies and guidelines on parking for persons with disabilities. She has also attended conferences with other service coordinators

within the State to discuss pertinent issues specific to service coordinators. Additionally, she has taken classes and training at the university and at the hospital on memory loss, dementia, domestic violence, and mental health. The property manager didn't think the service coordinator needed any additional training to be more effective, but the service coordinator indicated that she wanted to receive more training and specifically mentioned receiving training on dealing with alcoholism.

Resident interactions

The complex consists of only elderly residents. In the month of April, the service coordinator saw about 49 residents. While she is not linking all these residents with services, she is monitoring some residents. She estimated that she had seen about 200 residents since she became service coordinator. She doesn't keep a formal count but estimates the number of residents she sees in a week is between 12 and 15. Residents are seen by the service coordinator on an as-needed basis. About 50 percent of these contacts are initiated by the resident, the other half are initiated by the service coordinator.

The service coordinator checks to make sure a resident is receiving a service she has referred them to by making a follow-up call. Sometimes the residents call her once they have begun receiving a service.

The service coordinator interacts with the residents in several different ways. Visiting apartments, making phone calls, and talking with residents when she sees them throughout the building are all methods she uses to keep in contact with the residents. When she meets with a resident for the first time, she uses her review form as a framework to record the resident's needs (she, however, does not take the form with her on this initial meeting so as not to frighten the resident). She also uses the Vial of Life program--a vial that contains important information about the resident, including emergency contact information, health problems, and medications--that is used in the event of an emergency. The service coordinator found this to be a non-threatening way she could enter residents' homes, obtain additional information on their needs, and observe their living conditions. Residents also come to her when they have a problem and need help. In addition, the service coordinator, property manager, and residents constantly monitor their neighbors for any problems.

The service coordinator sees residents on an as-needed basis. If a resident contacts her or she sees a problem, a review is done. If it is determined that the resident is in need of services, a care plan is developed. She uses the care plan form provided by the AAA for this. However, if no services are needed, then no plan is developed. The service coordinator said that she performs re-assessments on an as-needed basis. If the resident is not currently receiving any services, an informal assessment is done; a more formal re-assessment is done if they are currently receiving services. Formal re-assessments are done every 6 months. The service coordinator had assessed a total of 182 residents at the time of visit.

Professional Assessment Committees are occasionally used by the service coordinator to formally assess residents' physical abilities. Assessments are also made at a doctor's request for some residents. General assessments are made at the outpatient level at the community hospital and at the local health clinic. Based on these assessments, residents are then linked to the services

they need. The service coordinator said the services provided by these outside assessment centers have been excellent.

The service coordinator tries to provide outreach regularly to keep in contact with all the residents. This is done by attending resident meetings and talking with them there, using written notices to publicize special events, promoting activities organized with the activity center, posting notices on bulletin boards, and continually talking with residents when she sees them throughout the building. In addition, the activity center puts out a monthly newsletter that contains information on upcoming activities occurring at the senior center as well as activities being promoted by the service coordinator. Residents complained that they didn't like being charged for the newsletter when they previously had received it for free. In an attempt to recruit and reach more residents the service coordinator also listens to suggestions from residents who individually tell her about additional services or activities they would like to have.

The service coordinator mentioned that occasionally she encounters a resident who refuses to meet with her or has chosen not to take advantage of a service she has offered. She said some refuse simply because it's the only control they feel they have left. She handles these situations by letting the resident know that they are in charge, and it is their right to refuse a service, but she attempts to persuade them by suggesting they give the recommended service a try. Sometimes, this method is effective. If they continue to refuse a service crucial to their continuing to live in the complex, the service coordinator advises them that they are in violation of their lease or reports them to protective services.

When residents were queried about what the service coordinator's specific duties were, most thought she was there to help them whenever they had a problem; many said she was a social worker. Residents thought she was helpful but were interested in getting a job description telling residents exactly what she could help them with. Prior to her role as the building's service coordinator, she was a social worker for the AAA and had worked with some of the residents. Residents in the focus group stated that they did not know how this service coordinator position was different from what she did previously for the AAA.

Residents reported meeting with the service coordinator every day for a period of several weeks, to seeing her once every two months. They said these meetings were in the form of in-person visits and telephone contacts.

Some residents turned down services because they didn't want them. Those that had not yet turned down services indicated they did not feel they had to accept the services.

Service provider interactions

The service coordinator works with hospitals, physicians, AAA, transportation companies, emergency alert system, and meals on wheels. The AAA is the primary resource the service coordinator uses to obtain information about service vendors in the area. There have been no community service providers or organizations that have refused to work with the service coordinator.

The service coordinator ensures that service providers are providing quality services by constantly monitoring them. To follow-up on a service, she calls the agency or resident and also

receives a print-out of the AAA services that residents used. Because of this monitoring, when something is not handled or done incorrectly, she can intervene to make sure residents receive the help they need.

Services and equipment

Residents are now able to receive services that they were not receiving in the past primarily because they are now aware of what services are available from within the community. As a service coordinator she is a full-time employee; whereas, when she was a AAA social worker, she was at the apartment complex only part-time. Services that have been of critical importance to the program are transportation to medical appointments and area hospitals; the lifeline system, an emergency device located in residents' apartments that alerts security when they activate it; and meals on wheels.

Because this area already had an abundant source of community-based service providers, there are few new services the residents need. However, the service coordinator indicated there is a great need for housekeeping. The service coordinator is trying to arrange for someone to provide these services and has contacted private housekeeping companies but found them to be too expensive. She also tried to arrange for a person to come to the building and provide the service for around \$8.00 an hour through the community job posting service but, as of yet, she has not found anyone. Residents have also expressed a need for transportation that is not currently provided by the buses or the van so they can visit the local malls and discount stores in the area.

The health fair, promoted jointly with the co-located community activities center, is one activity that the service coordinator has developed that is targeted to all residents. The property manager said residents who had not been out in years participated in the fairs. Residents were provided with blood pressure monitoring, cholesterol screening, and other health services.

Another new service that the service coordinator established is a grief counseling group for residents who have lost their children. In addition, the service coordinator encourages residents to volunteer with the AAA, within the building, and at the nearby hospital.

The service coordinator obtains equipment that she keeps in her office. Walkers, canes, and toilet seat adapters are available to residents who need them.

III. Description of Case Records

The case records contain information recorded on a detailed client intake form. This form includes sections on resident demographics, the services a resident receives, health status, home environment, community supports, personal functioning, and functional skills. The form is designed so that each section is summarized with a simple checklist on the right side of each page, enabling the service coordinator to see at-a-glance critical information about each resident.

The case records also include a care plan and case notes. The forms are those used by the local AAA. Case notes documented the types of services residents received and noted when the service coordinator followed up to determine if a resident had received a service.

IV. Quality of Services and Resident Satisfaction

Residents are extremely satisfied with the SCP. Those residents who worked more closely with the service coordinator thought she was very helpful and were satisfied with all the help she has provided them.

Residents are also satisfied with the availability of the service coordinator. Most residents said they see the service coordinator almost everyday in the halls. Residents also said that, if they needed help, they felt comfortable initiating contact with the service coordinator. The service coordinator also attends monthly resident meetings, and residents often approach her there when they need help.

Additional suggestions from residents for improving resident interaction with the service coordinator included having more resident meetings in the auditorium, providing residents with a job description so they know what the service coordinator is able to help them with, and providing residents with free copies of the newsletter published by the on-site activities center.

Residents who had received some type of service, through area service providers, were generally happy with the services they received. Both the property manager and the service coordinator also felt the program was very effective in providing services to residents who needed them. The property manager said the biggest benefit the residents received from the program was being more informed about what services were available to them.

Both the service coordinator and the property manager were very happy with the improvements made since the SCP was instituted. Specifically, the service coordinator felt the biggest benefit to residents was having someone in the building they could count on when they needed help. The service coordinator's ability to work confidentially with residents has allowed her to form trusting relationships with them. The property manager related similar comments. She liked the program because residents now receive the services they need which allows them to stay longer in their apartments. Overall, she feels the program gives the residents a sense of security, improves their well-being, and allows them to live more independently.

The service coordinator thought the flexibility in setting up the program is one of its best features. Because of this flexibility, she can adapt the program according to the needs of the residents. Service providers also customize the program to meet the needs of the residents living in this complex. Because needs vary in different areas, a flexible program is required. In addition, the property manager said the activities center is helpful because it provides services to the residents that link or support what the service coordinator is doing.

Residents feel they are able to live independently because of the service coordinator. The property manager estimated that without the SCP, between 15 and 20 residents would have given up living in the complex.

V. Roadblocks to Program Operations

The SCP has experienced few problems in terms of program operations. The service coordinator felt her workload was manageable; working arrangements with local service

organizations were good; residents were receptive to the program; and the working relationship between the service coordinator and property manager was good.

The only exception was, early on, the service coordinator and property manager encountered difficulties determining who was responsible for supervising the service coordinator. Because the service coordinator is a contract employee, both the property manager and the contract employer thought they were the service coordinator's supervisor. This has since been resolved, resulting in the property manager supervising the service coordinator on a day-to-day basis with the contract employer serving as the clinical supervisor.

VI. Recommended Changes and Future Plans

The service coordinator would like to locate someone to provide housekeeping services to residents. She would also like to provide additional opportunities for residents to receive transportation to local malls and discount stores.

Residents would like to have nursing staff available to them and to obtain a directory of services, (although newer residents indicated they were given a list of services). Some residents did not think the service coordinator's job could be improved; others felt that monthly meetings, a position description, and a poster listing program information would be helpful to them.

The property manager and the service coordinator both feel continued training is crucial to the success of the program and stated that HUD should provide more money for it.

Case Study Report

A-5

Introduction

A visit to an established Service Coordinator Program (SCP) was made in May 1995 by a two-person team from KRA Corporation. Also in attendance was a program representative from HUD. During the visit, the service coordinator and property manager were interviewed. Three focus groups with 10 residents were held, and 10 resident case records were reviewed.

I. Description of Residents and Project

Development characteristics

The housing complex is in a very rural setting with no public transportation. Thus, residents have difficulty accessing social services that are located in a neighboring major city. Moreover, residents are culturally isolated due to their remote location. One hundred two residents live in this 88-unit scattered housing development for the elderly. The complex is owned and managed by a private non-profit corporation. There is a community building that houses the property manager, service coordinator, a senior nutrition worker, and a secretary. In addition, this building includes a laundry room, dining room, crafts room, and a large common area with a TV, sofas, and chairs. The service coordinator has a private office.

There is a medical complex across the street of the housing development that includes a clinic, pharmacy, and nursing home. A grocery store, as well as a few other stores, are about a quarter of a mile away. However, most residents are unable to walk to the grocery store. In addition, the prices at the store are high, so residents prefer to shop in a nearby city where prices are lower.

Many residents gathered in the community building around lunch time because lunch is served for those residents who wish to participate in the lunch program. There were only a few residents in the community building at other times. There was a bulletin board, but very little was on it. It did not include any notices of neighborhood activities. However, many residents cannot read, and verbal communication appears to be a more effective means of communication in this complex.

There were no outdoor community areas. At one point, the project started working on a small park on the property, but it was not maintained. All residents have small outdoor areas as a part of their residences.

There is no obvious security and no locked doors. The team was told that there are security people who patrol the grounds at night. The neighborhood appears safe, but very isolated. The property manager, who lives on the premises, told us that she has a license to carry a gun and keeps one in her apartment.

Resident characteristics

The complex houses 102 residents, including both elderly and non-elderly persons with disabilities. About 45 percent of the households consists of non-elderly persons with disabilities. The residents at the complex are primarily female (70 percent) and African American (60 percent), with no Hispanics. Eighty-four percent of the households have an annual income of less than \$10,000.

Previously available services

The service coordinator and the property manager have difficulty in remembering what services were available before and after the implementation of the SCP because they worked together prior to the program's establishment. The service coordinator had worked for the parent corporation as a social worker at the nursing home across the street, prior to filling the service coordinator's position, over two years ago.

Prior to the SCP, the property manager was involved in helping the residents obtain services and arranging resident activities. Coordinating services and activities for residents took about 40 percent of her time. Basically, the same type of services and activities were available prior to the SCP. However, the service coordinator now has more time to concentrate on the actual needs of the individual residents.

Most of the residents said that the services were the same before and after the service coordinator came. However, before the SCP, they went to the property manager if they needed help with services.

II. Description of Program Operations

Organizational context of the Service Coordinator Program

Both the service coordinator and the property manager work for a corporation, which owns and manages the complex. They were both associated with the parent corporation before the project was developed. They were influential in justifying the need for housing the elderly and persons with disabilities in the area. The property manager has been at the project since it opened, about 15 years ago. The service coordinator had been employed as the social worker at the parent corporation's nursing home, until the service coordinator position which she now occupies became available.

The service coordinator's supervisor is the president of the parent corporation. The service coordinator does not feel she is closely supervised; she functions independently. The property manager is not involved in the SCP but is very supportive of the service coordinator and the activities she conducts.

The service coordinator has the primary responsibility for the program. She is responsible for contacting and recruiting residents specifically for service coordinator services and for deciding what service providers to contact, although the property manager sometimes contributes to these decisions. The service coordinator also decides what community activities to promote which are

limited because of the lack of transportation for residents. The service coordinator also sets program priorities.

The property manager's responsibilities and ability to carry out management tasks have changed tremendously due to having the service coordinator at the complex. The property manager no longer has to interrupt her other responsibilities to provide the services the service coordinator now provides. Unless she is needed, the property manager does not spend a lot of time with the service coordinator. When the service coordinator first came to the complex, the property manager worked with her closely. Now, the project manager primarily refers the residents to the service coordinator, as needed. They meet about once a month to prepare for the tenant meeting.

External linkages

The service coordinator works with the local area agency on aging. This agency provides the senior nutrition program and several other programs. Residents are not referred to any outside professionals for assessment of their physical abilities. If a resident is referred for home health services, the home health agency conducts its own assessment.

Program objectives and program implementation

The objective of the SCP was to provide and connect residents with services from other agencies. The original objective remained about the same. The service coordinator started the SCP by completing the Client Information Form for each resident and then concentrating on the services needed. The program activities were completed as quickly and as effectively as expected.

Program size

At the time of the visit, the service coordinator was working with 50 to 60 residents. She was trying to link these residents to needed services. She had met with all residents and had already linked about 80 of them to services. The service coordinator meets with about 15 to 25 residents each week.

Service coordinator qualifications and duties

The service coordinator has been in her position for 2 years. She has a bachelor's degree in behavioral science. Her primary responsibilities are to assess the needs of the residents and try to resolve their related problems. She assists the residents with their bills in completing the forms necessary to apply for services administered through Social Services and the Social Security Administration. In addition, she arranges transportation (and on occasion shops or actually provides transportation) for the residents because public transportation does not exist in the community. Her responsibilities have not changed over time, but they vary based on the needs of the individual residents.

The property manager was not involved in hiring the service coordinator; therefore, she was not aware of the service coordinator's specific qualifications. She did know that the service coordinator had a great deal of experience with the elderly and had worked with the corporation

for years. The service coordinator's strengths are that she is very knowledgeable about outside service providers and about the community in general.

Service coordinator status

The service coordinator works full-time (40 hours per week). She has some assistance with the program. For example, the housing complex has a contract with the senior citizens center which offers a Senior Companion Program. The program sends someone to the complex for 4 hours a day to help with housekeeping, bathing, and similar types of services. This position was vacant, but staff were trying to fill it. There are two churches that provide volunteers on weekends to talk with the residents in their apartments. Also, the property manager's secretary helps by typing and distributing notices to the residents. Maintenance staff will let the service coordinator know if there is an obvious problem, but for the most part, maintenance staff do not get involved with the residents.

The service coordinator believes that other building staff understand the aging process and the services needed by older people and persons with disabilities. According to the property manager, the SCP has not changed staff attitude or behavior toward the elderly or persons with disabilities. They have always treated the residents with respect.

Access to funds for Service Coordinator Program activities

There is no separate budget for SCP activities. The funds for service coordinator sponsored activities are paid from a supply budget; only the president of the parent corporation has the authority to allocate funds.

Service coordinator training needs

The service coordinator has attended an elderly abuse workshop and several other training sessions. She found these sessions very helpful. She has money in her budget to attend conferences and seminars. The service coordinator was not very familiar with HUD training regulations. She could not think of any other training or assistance that she needed.

The property manager knew that the service coordinator attended training, but she didn't know the content of the training or whether any other training was planned. She felt that the service coordinator took advantage of all available training.

Resident interactions

Generally, the service coordinator brings services to the housing complex based on the individual needs of the residents. Sometimes, the service coordinator makes home visits to check on residents. Other times, the resident's family lets the service coordinator know when there is a problem she can help with. The service coordinator sees each resident as needed and at least quarterly. Contacts are made by phone or through a home visit. In addition, meetings with the service coordinator are initiated by the resident.

The service coordinator has not had any problems getting residents to meet with her. Many come to talk with her, even if they don't need services. She finds that having refreshments at

meetings or sessions related to monetary issues, such as obtaining food stamps or assistance with medical bills, increases the number of residents who attend.

To ensure that residents are receiving the services to which they have been referred, the service coordinator makes follow-up contacts as needed. She either contacts the resident or the agency providing the service, depending on the referral. There is continued outreach to the residents through home visits, notices about special events, and the monthly tenant meeting. The service coordinator conducts a reassessment of the residents' needs at least once a year or as needed.

Some residents who needed services have not wanted to meet with the service coordinator (or they declined to take advantage of the program services available to them). The service coordinator was unable to estimate the exact number of these residents. She believes that the residents are very independent and want to do things on their own. In order to help these residents, she makes sure they know she is available and keeps in contact with them, but she does not push herself on them. The property manager indicated that there was only one resident who resisted dealing with the service coordinator. The property manager talked with this person and convinced her that the service coordinator was there to help her. The service coordinator expressed a concern that some residents never come to the community building. She would like to find a way to get residents out of their apartments more often.

When the service coordinator meets with the resident for the first time, she completes a Client Information Form that includes demographic information, socio-economic information, health information, an assessment of ADLs, a summary of client problems, and service status and referral information. A form is completed for each person in the household who may need services. She follows the same assessment procedures for both elderly and nonelderly persons with disabilities. A plan is then developed for each resident as part of the Client Information form. It includes medical and transportation needs as well as other services.

The service coordinator sees the residents in their own apartment, some of the time. She also observes the residents out walking around and doing their laundry.

There is a tenant meeting held on a monthly basis that the service coordinator attends. During this meeting, she attempts to find out residents' needs. The service coordinator also meets individually with residents and asks about their needs. A notice to residents is sent out every month reminding them of the tenant meeting.

The property manager believes that there are quite a few residents who would have had to give up living independently if the SCP did not exist. The most effective services in maintaining residents' independence are housekeeping and shopping.

Service provider interactions

Home Health Services is the community agency that is particularly critical to the success of the SCP. There were no agencies that chose not to participate in the SCP.

Services and equipment

Several new services have been implemented since the service coordinator arrived including:

- The nutrition program, provided through the Cooperative Extension Service, teaches residents how to cook meals appropriate for their dietary needs.
- A variety of speakers were invited to the monthly tenant meeting. Speakers include:
 - the Food Stamp office representative to talk about how to apply for food stamps and how to use the Electronic Benefit Transfer (EBT) card;
 - a lawyer to talk about property heirs;
 - an insurance company representative to talk about burial insurance;
 - a consumer counselor to talk about how to manage money; and
 - nurses to talk about various health needs.
- The residents are able to cash checks at the local grocery store without a charge.

The service coordinator works with a medical equipment provider and the nearby clinic to help residents obtain special equipment and devices, such as eyeglasses and hearing aids. In addition, the service coordinator continues to make referrals to the medical clinic to provide home health care. All services are identified and provided based on the needs of the residents. All activities that are initiated are available to all residents of the complex.

The major service still needed is transportation. The residents would like to be able to do their grocery shopping at other, less expensive grocery stores, and be able to go to other public places. There is no local bus or taxi service. The social services and Social Security office are on the opposite side of the closest major city. The service coordinator plans to arrange for transportation to local parks, movie theaters, and shopping centers.

There are very few community-based services because of the transportation problem. However, the service coordinator has helped involve residents in some community activities. For example, the local electric company provides a 1-day outing, once a year. Some of the residents have met other residents at the tenant meetings or at holiday parties. Whereas, other residents stay to themselves and don't attend events.

In the focus groups, we learned that all residents knew the service coordinator. Some residents could not remember when they first learned she was there; others said they learned she was there at a tenant meeting. Other residents said she came and introduced herself. Some residents said she completed a form when they first met with her; others didn't remember. Some residents had met with her multiple times, and others had not.

Many of the residents consider the service coordinator to be a social worker. Some remembered

her from the nursing home across the street. Others said her job was to help people get the help they needed. Current services offered, according to the residents, include:

- helping to complete important papers;
- helping to obtain and/or understand medicine;
- providing training on how to eat right;
- providing someone to help with house cleaning;
- identifying agencies the residents normally wouldn't know about
- arranging transportation;
- identifying a lawyer;
- coordinating an annual event with the local electric company; and
- coordinating the distribution of food commodities.

III. Description of Case Records

The property manager did not complete reviews of activities of daily living (ADLs) for the grant application. Since the residents had to be able to take care of themselves in order to move into the complex, she didn't think it was necessary to conduct such assessments, nor did she have the time to do so.

All case records reviewed included a Client Information Form used to record information about the resident and to conduct the initial assessment. In addition to the section used for the ADL assessment, the form includes information regarding: demographics, socio-economic status, living arrangements, and health. It also includes a section to record the status of referrals. There were no other forms in the records, but the records did include running notes regarding contact with the resident.

It appears that ADL assessments are completed for all residents. It also appears that a quarterly monitoring review was completed for all residents.

IV. Quality of Service and Resident Satisfaction

Both the service coordinator and property manager agree that the residents are positive about the SCP and happy the service coordinator is there. At first, the residents were hesitant to work with the service coordinator because they had worked with the property manager for so many years. It took the residents 3 to 6 months to become comfortable with the service coordinator.

The service coordinator believes that contacts with providers help improve the quality of service the residents receive. This is particularly true with home health services because many of the residents are not assertive enough to require that caretakers provide quality services. The

property manager believes the program has been very effective in providing services to the residents who need them. The residents indicated that while some residents have not needed the service coordinator's services, they know she is there if they need her. She has been able to help with anything that was needed, and has an open-door policy. The residents are very satisfied with the services that are available.

Having a service coordinator on site has provided the extra time needed to explain services and activities to the residents that the property manager did not have time to do previously, although she tried. The residents know the service coordinator is available when needed. The service coordinator believes the program has helped the mental health patients (there is a counselor who comes in to work with them), and has also helped all residents apply for food stamps.

V. Roadblocks to Program Operations

Both the service coordinator and the property manager believe the service coordinator's workload is manageable. Sometimes, the service coordinator feels she needs help, but in those instances she relies on the assistance of other staff (the property manager or the senior nutrition staff member).

Transportation and isolation are the major issues for this complex. There is no bus service, and even though there is a grocery store not far from the complex, it is too far for the residents to walk. In addition, the prices are high because it is the only grocery store in the community.

VI. Recommended Changes and Future Plans

The major additional service needed is access to transportation. The residents also need a way to call for help in an emergency. The apartment buzzer system no longer functions.

Case Study Report A-6

Introduction

A visit to an established Service Coordinator Program (SCP) was conducted in June 1995 by a two-person team from KRA Corporation. During this visit, the service coordinator and property manager were interviewed. In addition, 3 focus group discussions with 11 residents were held, and 10 case records were reviewed.

I. Description of Residents and Project

Development characteristics

The complex is a 53-unit, 3-story high-rise that is connected to 2 separate high-rise buildings. The three complexes share a service coordinator. The building has several large, well-lit common rooms on each floor that are furnished with books and comfortable furniture. In addition, the building has two large meeting areas on the first floor. The residents' apartments are spacious and modern. The complex has a large library and sitting room for residents to meet and socialize. The complex also houses its own convenience store, gift shop, greenhouse, and beauty salon. The building appears secure, and the doors are locked at night.

The service coordinator's office is centrally located and easily accessible to the residents. Located on the first floor across from the elevators, the office is private and large enough for three people to meet. The office has a door that remains open, unless the service coordinator is meeting privately with a resident.

The building is situated in a rural, residential community located on a quiet road where the local bus stops on its way to town. The town is not accessible by foot for most residents. The majority of residents, however, have family members with cars, or own one themselves, so they are not isolated from the local town or from the nearby city.

The building is surrounded by a large field, and there are benches and places for the residents to sit and socialize. Many of the residents are able to maintain gardens outside of their apartments.

Resident characteristics

The 53 units are occupied by 57 residents, the majority of whom are female (90 percent) and white (89 percent). The complex houses both elderly and non-elderly persons with disabilities, but the majority of the residents are well elderly (67 percent). Sixty percent of the residents are between 72 and 75 years of age, and 38 percent of the residents are over 76 years of age. Close to half of the resident households have annual incomes of less than \$10,000.

Previously available services

The current property manager was hired after the service coordinator started and, therefore, was unable to discuss the available services prior to the start of the SCP. The residents, however, indicated that prior to the SCP a number of services organized by outside agencies existed including a visiting nurse, shopping assistance, help with taxes, rent rebate, and meals on wheels. The complex also provided each resident with a book listing the types of services available at the building, and the property manager informed residents of any new services at tenant meetings.

II. Description of the Program Operations

Organizational context of the Service Coordinator Program

The service coordinator is an employee of a housing management corporation and is supervised by the property manager. The service coordinator has been at the project for over 2 years, and the property manager has been at the project for 1.5 years. The property manager and the service coordinator appear to have a good relationship. The property manager is very supportive of the SCP and allows the service coordinator to function independently. The property manager is very comfortable with letting the service coordinator do her job and believes she adds a lot to the community. The property manager feels "it is important to separate administration from support. It is nice to have someone on staff who they [the residents] can feel much more comfortable with and not have to come to me." The service coordinator and property manager meet on a weekly basis to check in and, if necessary, to discuss any resident problems.

Prior to the SCP, the property manager was responsible for dealing with the residents' problems and for trying to do the work now carried out by the service coordinator. The property manager is no longer involved in the day-to-day operation of the program. At the time of the visit, the service coordinator was responsible for contacting and recruiting residents, deciding which service providers to contact, deciding which community activities to promote, and setting program priorities.

Three separate buildings comprise the complex. The service coordinator divides her time among the three buildings. She tended to view the SCP across buildings and found it difficult limit her discussions to only one building.

External linkages

The local service agencies have been involved with the complex since its inception. The local aging agency is very involved with the complex and its residents. The agency has provided meals on wheels support and has conducted assessments of the residents. The local visiting nurse agency and Adult Services also provide services and assessment support.

Program objectives and program implementation

The objective of the program, according to the property manager, is to provide support services that allow residents to live more independently. This objective has not changed since the program's inception.

The program had some difficulty getting started after receiving funding. The service coordinator found it difficult getting to know the residents in order to determine their initial needs. The service coordinator felt she had little guidance and this made the initial start-up difficult. At the time of the visit, the service coordinator had overcome many of the initial problems and felt the program was working well.

Program size

The service coordinator has met with almost all residents. She had a difficult time estimating the number of residents she was working with in each building, but believed that she was working with almost all residents in the building the team visited. She indicated she was trying to link 15 of the building's residents to services.

Service coordinator qualifications and duties

The service coordinator had a bachelor's degree in social work and worked at the local senior center for over 8 years prior to taking the service coordinator position. The service coordinator's strengths, according to the property manager, are her ability to relate and establish trust with the elderly, that she is caring, and that she takes initiative.

The service coordinator's duties include dealing with Social Security issues; paying bills; referring residents to outside services such as PACE (a program that helps residents qualify for low-cost medical benefits) and rent rebates; helping residents understand existing benefit services like food stamps; providing emotional support; and providing transportation information. The majority of her time is spent helping with applications and making sure residents receive food stamps if they need them.

Service coordinator status

The service coordinator divides her time among three buildings. All three buildings are part of the same complex. She is a part-time employee who works 5 hours a week at the building visited and a total of 27.5 hours at the three buildings (entire complex). The service coordinator does not have any other staff working with her, but the maintenance staff perform informal referrals and tell the service coordinator when they feel a resident is in need of a service. The service coordinator feels staff understand the aging process and have used her experience as a resource for dealing with the residents.

Access to funds for Service Coordinator Program activities

The service coordinator was not familiar with the dollar amount she could access for SCP activities. She must obtain approval to access these funds. To date, she had only used these funds to purchase office supplies.

Service coordinator training needs

The service coordinator belongs to the local Social Worker Network group that brings social workers from around the area together to exchange ideas and inform each other of services. The service coordinator attended a local conference on aging that focused on aging-related issues.

She had not attended any HUD-funded training sessions. The service coordinator did not have any immediate plans for future training and did not feel that any other training would be helpful for the job.

Resident interactions

The service coordinator had met at least socially with the majority of the residents and met with close to 10 percent of the residents on a weekly basis. She was able to link over 50 percent of the residents to services. When the service coordinator meets with the residents, she prefers the meetings to be one-on-one and on an as-needed basis. The service coordinator spends time each week outside of her office, in a centrally located place, to make sure she is well known and familiar to the residents. The service coordinator also attends the monthly resident's association meeting where the residents share their ideas with her and provide input into the program. The residents appreciate her service and understand that her role is to "help [them] with any problems they are unable to solve."

The service coordinator does not have any formal assessment procedures. When she meets with a resident for the first time, she does a casual assessment of their needs by listening and talking to them. No formal assessment plan or schedule is developed for the residents. The service coordinator tailors her approach to the needs of each individual.

Some residents have a strong desire to remain independent and will decline a needed service. In such cases, the service coordinator increases her outreach efforts and attempts to inform the resident of the benefits of the suggested service.

After referring a resident to a service, the service coordinator makes sure she remains involved with both the resident and the outside service provider to ensure that the resident is taken care of.

The service coordinator has no formal monitoring system in place. The service coordinator prefers to work with each resident on a case-by-case basis. The service coordinator likes to look at what has been done, and what needs to be done for the resident to live more independently.

Service provider interactions

According to both the service coordinator and residents, the surrounding service providers are helpful numerous. No one community agency has been more helpful than another with the SCP, but the service coordinator and residents feel confident of agency capabilities and are not afraid to use these resources.

Services and equipment

Through outside service providers, the SCP residents are currently receiving the following project- and home-based services: meals on wheels, in-home nursing services, insurance counseling, rent rebate advice, tax advice, food stamps, exercise class, general counseling, PACE program, shopping services, and alternative transportation advice. The service coordinator has been able to work with the local medical supply stores to secure medical equipment for residents when they need it. The service coordinator plans to offer more

community-based services designed to increase activities with the surrounding community. For example, she would like to bring speakers in from the community as well as identify additional transportation resources for residents.

III. Description of Case Records

The case records were sparse and not detailed. No case plan was included, nor was there any formalized activities of daily living (ADL) assessment in the file. The case records detailed the service coordinator's interactions with the residents. The case records indicate that the majority of the service coordinator's time spent with residents is to help them with insurance forms, fill out rent rebate forms, and provide personal counseling on how they can better handle the aging process. Many residents visit the service coordinator just to talk and to have a person who will listen to them.

IV. Quality of Service and Resident Satisfaction

In general, the residents are very positive about the service coordinator and are happy to have someone act as an advocate for them to the service providers. One resident indicated that the service coordinator "is very helpful. [She] is doing a great job, and is very willing to help." The residents understand the service coordinator's role, feel comfortable approaching her, and would use the service coordinator for advice in the future.

The service coordinator, property manager, and residents all feel the SCP has been effective in providing services to the residents. The service coordinator feels that having one person in frequent contact with the outside service providers increases the quality of services the residents receive. The more contact the outside agencies have with the service coordinator, the more familiar they become with her and the population she serves.

The service coordinator and residents feel that the complex has benefitted by having the SCP. The service coordinator enjoys talking with the residents and finding out their needs. She feels it is important that the elderly have an advocate who takes them seriously. The complex now has someone who can deal with the bureaucracy of the outside service providers and give the residents valuable services they were previously unable to receive. The residents also now have someone who separates administration from support. Prior to the SCP, residents were reluctant to get support from administrative staff because they were uncomfortable with the building manager knowing their problems. The residents feel that they will be able to live independently longer as a result of the SCP.

V. Roadblocks to Program Operations

The service coordinator feels her workload is right, but would like to be able to work full-time. She believes that if she worked full-time, she could establish more linkages with the outside community and organize more social activities designed to get residents more involved with the SCP.

The SCP has not encountered any barriers to success. The service coordinator and property manager appear to have a good working relationship and feel comfortable working together. The property manager allows the service coordinator to work independently and only becomes

involved if the service coordinator approaches her first. The surrounding social service organizations are very helpful and the service coordinator enjoys working closely with them.

VI. Recommended Changes and Future Plans

The service coordinator would like to have the residents more involved in community activities and services. The service coordinator believes outside service providers would be helpful in this regard and hopes to use them for this in the future. Both the service coordinator and the property manager also feel the SCP would benefit if the HUD guidelines were more specific, allowed a greater amount of flexibility to organize social activities, and permitted meetings about future activities and outside services to be held.

The residents feel the program would benefit if the service coordinator was able to organize social functions and spend more informal time with them without management. The residents would also like to be more involved with the community, and be provided with alternative, less expensive transportation options.

Case Study Report A-7

Introduction

A two-person team from KRA Corporation visited an established Service Coordinator Program (SCP) in June 1995. During the visit, the service coordinator, property manager, and housing operations manager were interviewed. In addition, 3 focus group discussions with 13 residents were held, and 10 resident case records were reviewed.

I. Description of Residents and Project

Development characteristics

The complex is owned and managed by a not-for-profit corporation located in a neighboring city. The corporation owns a large continuing care retirement community and six smaller HUD-funded facilities throughout the State.

This high-rise building has 10 studio apartments and 30 one-bedroom apartments housing 40 residents. There is very low turnover among residents. Several residents have small pets. The first floor of the building has an office for the property manager; an office for the service coordinator; laundry facilities; and a large, comfortable community room with a kitchen, TV, sofas, tables, and a small library. Residents organized fund-raising events to purchase a stereo system for the community room. The complex is situated on well-landscaped grounds with sidewalks circling the building and garden plots for the residents. Off the community room is a covered patio with a grill. Residents are encouraged to use the community room and grill area. A resident potluck dinner was scheduled to be held during the time of the team's visit.

The building is located adjacent to a YMCA in a medium-sized town. There are several restaurants, a grocery store, and a drug store within walking distance of the building. A college is nearby. There is a bus stop at the end of the street with service to the center of town, a few miles away. Approximately 15 residents have cars and can park close to the front door. Staff had different opinions on whether there is adequate parking for residents. The neighborhood in which the complex is located appeared safe but commercial in nature. The only evidence of security is a locked front door.

Resident characteristics

The complex has 40 residents, 95 percent of whom are elderly and 5 percent of whom are nonelderly persons with disabilities. The residents at the complex are primarily white (98 percent) and non-Hispanic (98 percent). Twenty-five percent of the residents are at-risk and 18 percent are frail. Eighty-five percent of the residents are over the age of 71 years old; slightly over half of the residents are over the age of 76 years old. Eighty percent of the households have annual incomes of less than \$10,000.

Previously available services

Prior to the SCP, the property manager was involved in helping residents obtain needed services. She was able to assist residents with Medicare and other bills and refer them to services, such as Meals on Wheels or Senior Services. The property manager had little direct contact with the service providers but gave residents phone numbers so that they could contact the agencies themselves. She spent 5 to 10 hours per week on these activities.

Residents in the focus groups said that the property manager helped them with medical bills prior to the SCP. They mentioned that the Senior Center provides resource information, but that it is not the same as having somebody in your building who can assist you.

For SCP grant application purposes, the property manager informally assessed resident activities of daily living (ADLs) based on her day-to-day contact with them. As residents' ability to live without assistance weakened, they would come to her for assistance more frequently. In addition, she could identify medical issues when assisting them with their medical bills.

II. Description of Program Operations

Organizational context of the Service Coordinator Program

Both the service coordinator and the property manager work for the corporation that owns the building. They are both supervised by the housing operations manager, who oversees staff at six complexes. The housing operations manager was the service coordinator at the complex for 1.5 years, prior to the current service coordinator. The housing operations manager, because of her previous involvement in the SCP, has a good understanding of the program and the residents. She developed the "Resident Services Coordinator Policies and Procedures Manual," which includes sections on resident relations, file management, interactions with the community and management, office management, and time tracking. The housing operations manager also developed a set of forms to be used for resident files.

Since the SCP began, the complex has had three service coordinators. The first SC was promoted to a supervisory position within the management company; the second coordinator left the position due to personal reasons. The current service coordinator has been in her position 6 months.

The service coordinator functions independently of the property manager, who is very supportive of the SCP. The service coordinator is directly supervised by the housing operations manager, who is available for assistance when needed. The service coordinator indicated that she has the most say in deciding on SCP program activities. However, the property manager mentioned that the housing operations manager (her supervisor) has the primary responsibility for the program. The service coordinator felt that the property manager had the most say in developing procedures for contacting and recruiting residents for the SCP because she knew the residents better. The property manager also has a major role in deciding what community activities to promote because she is at the complex more frequently than the service coordinator.

Having the service coordinator at the complex gives the property manager more time for management work, including HUD paperwork. It also has relieved her from having to deal with

issues that she is not comfortable or familiar with. The time she devotes to issues of resident services has remained the same since the SCP was implemented. She will provide the names of residents whom she thinks would benefit from the SCP to the service coordinator or suggest community contacts. The property manager tries not to get too involved in the SCP but admits that it is hard to let go of some of her former responsibilities.

The property manager and the service coordinator maintain close contact. The wall between their offices has a window, which they leave open except when they need privacy. They meet at least once a week to discuss program activities and coordinate events. The property manager distributes a monthly newsletter that includes a section that the service coordinator develops.

External linkages

The service coordinator works with Senior Services and also with Senior and Disabled Services. Both agencies provide numerous services in the community. The service coordinator attends quarterly Senior Services meetings that are attended by the Senior Services case managers and other community service providers. Residents are not generally referred to outside agencies for assessments, except in the case of an emergency.

Program objectives and program implementation

The original program objectives have not changed but have become more focused. For example, the SCP has become more proactive in its efforts to provide education for the residents. The objectives were solidified when the system of policies and procedures was developed by the current housing operations manager. The housing operations manager commented that the objectives of the SCP need to be tailored to the individual facility and its population. The property manager felt that the priorities had not changed from helping residents maintain their independence.

The current housing operations manager developed her own timetable for the SCP when she was the service coordinator. One of the top priorities was to become known and accepted within the service provider community.

The property manager does not feel that SCP activities were initiated as quickly as expected. In part, this has been due to the turnover in service coordinators (there have been three to date). It takes time for residents to accept a new person or position; there is a need for continuity.

Program size

The service coordinator is currently working with 15 residents and has met with 25 residents during her first 6 months at the complex. She is trying to link 5 to 7 residents with services and has already made at least 20 linkages. She meets with approximately 5 residents each week at this complex.

Service coordinator qualifications and duties

The service coordinator has a bachelor's degree in health promotion and fitness management with a minor in communication. She previously served as the recreation and fitness coordinator

for 1.5 years at the continuing care retirement community owned by the management corporation. She has been the service coordinator at the complex for 6 months. The property manager thought that the service coordinator's strength is her listening skills—the residents love to talk.

The service coordinator's primary responsibilities include assisting residents with their benefits and Medicare/Medicaid billing. Residents had a good understanding of the service coordinator's role and responsibilities and viewed her role as one that kept them in touch with services for seniors. The service coordinator follows the Policies and Procedures Manual for guidance.

Service coordinator status

The service coordinator works at this complex 2 days a week (14 hours) and 2 days at a similar complex in the neighboring city. Both buildings are owned and operated by the same corporation. She did not mention any problems with serving more than one complex other than that she occasionally has to stop something that she is working on and come back to it 2 days later when she is back at that complex. The phone number for the other complex is posted on her door and residents know that they can call her there for assistance or to set up an appointment. In addition, she has a pager.

The service coordinator does not have other staff who assist her. She used interns from the local college to run an exercise program for residents. She hopes to continue this program when school is back in session. The maintenance manager and property manager alert the service coordinator to problems with residents. The maintenance manager reports housekeeping problems that he notices when he is in a resident's apartment. The service coordinator has found building staff to be educated about aging issues.

Access to funds for Service Coordinator Program activities

The complex has one fund from which the service coordinator obtains the money she needs for SCP activities, such as refreshments, newsletters, and guest speakers. She brings her receipts to the property manager for reimbursement. Large expenses need approval from the housing operations manager. The property manager has petty cash and must work within a budget set by the management corporation. Most speakers that are brought in are volunteers, and the residents have craft sales and other activities to raise money for activities.

Service coordinator training needs

The service coordinator has attended several seminars on Senior Health Insurance Benefits Assistance (SHIBA), state certification to help with Medicaid/Medicare. The previous service coordinator attended several training sessions, and in her role as housing operations manager, she is encouraging the service coordinator to receive additional training. The service coordinator just received a letter from the local HUD office telling her that she needs 20 hours of training as part of the SCP. She called the HUD office for information on available training, but they did not know of any. The service coordinator would like additional training on working with senior citizens.

Resident interactions

The service coordinator uses different approaches when working with the elderly and the nonelderly persons with disabilities. The nonelderly persons with disabilities have different needs and she tries to meet their needs. For example, one resident has multiple sclerosis and needs more individual contact.

The service coordinator meets with approximately 5 residents each week. The service coordinator linked residents to taxi coupons, a health plan, food stamps, and supplemental insurance. She will identify several sources of services, such as housekeeping, and try to list the prices. Residents can choose among the options she provides.

The service coordinator calls residents to see if they are receiving the services to which they were referred. Sometimes, she will call residents' caseworkers if there has been a problem.

Meetings are initiated by both the service coordinator and by residents. Some residents are hard to reach and want to be left alone. The service coordinator has found that residents in this complex are less social and active than residents at the other complex she serves. The service coordinator has used letters and flyers to encourage residents to meet with her. Because her office is by the front door, it is easy for her to introduce herself to new residents as they walk by. The service coordinator feels that casual conversations or interactions will make residents feel more comfortable around her so that they will come to her with personal issues.

When meeting a new resident, the service coordinator completes an intake form unless the resident signs a release. The intake form includes questions about resident activities and needs. The service coordinator completes an ADL assessment, using a Disability Rating Scale, for each resident unless she completes a release form. A case narrative is also completed. The resident's family members are invited to attend this initial meeting.

The intake is completed in the service coordinator's office unless the resident feels more comfortable in her apartment. The service coordinator does not formally observe residents performing activities, but she goes to their apartments to talk to them so that she can observe the apartments. The service coordinator completes a computerized chart and puts a copy of the chart in each resident's record each time they meet. The chart includes information about what was discussed and what approach will be taken.

A meeting, or "Coffee Connection," is held every month to ensure resident input into the SCP. In addition, residents are encouraged to discuss building operations. A bulletin board, by the offices and community room, lists SCP activities and has activities and flyers from different community organizations, such as the Senior Center and the YMCA, posted. Few residents were seen in the community room or the gardens. Staff said that residents of this complex are not very social.

Residents in the focus groups said that they meet with the service coordinator as needed. They usually meet in her office, but she has stopped by their apartments. Residents said they feel comfortable going to her office when they need assistance. They understand her role to be "to coordinate social services" and to find programs that will benefit their lifestyle.

A few residents declined services that the service coordinator felt were needed. Often, it was because the resident had family members in the area who could help or because the resident felt he or she was better off than they actually were. Successful approaches for dealing with this have been to bring up the benefits of the service over time in a casual manner. Another approach is to address all of the residents together with educational material or a guest speaker.

The property manager mentioned that residents' independence was often the reason for declining needed services. The property manager may get involved when a resident declines services. She mentioned the importance of knowing when to back off. An effective approach has been to address the issue in the building newsletter. Residents in the focus groups believed that if they didn't want a service they didn't have to accept it. They have refused services because they didn't feel they needed them or because they were getting assistance from Senior Services.

Reassessments of residents are not conducted on a regular basis. The current service coordinator conducted reassessments of every resident as a way to meet them (the previous service coordinator had conducted an assessment of each resident). There is no monitoring plan in the resident records.

Service provider interactions

Senior Services and the city's Senior Program have been useful to the SCP. In addition, the YMCA has been very accommodating and offers many opportunities for resident interaction. There are no agencies that have refused to participate in the program.

Services and equipment

The service coordinator has encouraged residents to participate in several community activities, including the local elder hostel, senior activities at the YMCA, and activities at the Senior Center. She posts flyers from several community organizations.

The service coordinator also initiated several activities within the complex. These include exercise classes, bingo, and a reminiscence project. She has encouraged the continuation of building activities, including pot-luck dinners, community theater rehearsals, and the senior olympics. In addition, residents have been encouraged to organize their own social activities, such as movie night and "armchair travelers," a program that includes a video and other educational materials on a new travel destination each time.

Several outside speakers have been brought in for residents. Many have focused on the changes in the State insurance system. Residents are frequently surveyed for their ideas about new activities and services.

Residents in the focus groups said they participate in many of the activities and mentioned that residents in the complex receive services, including Meals on Wheels, housekeeping, taxi vouchers, and assistance with their insurance and benefits. One resident said the service coordinator helped arrange aftercare services following her heart attack. Another mentioned service coordinator assistance in finding a dentist. The service coordinator suggested to one resident that she get a walker instead of using a shopping cart—the resident arranged for the

walker herself. Residents seemed familiar with (and used) services offered by the local aging agency.

III. Description of Case Records

The SCP resident case records are kept separate from the manager's files. The resident case records were well organized and divided into several sections. Several forms, including a fact sheet, intake forms, and consent for release forms, are in the records. In addition, there is a case narrative for most residents. This includes the service coordinator's case notes. Most service coordinator contacts recorded in the case records were for assessment, benefits assistance, and follow up after the HUD apartment inspection.

IV. Quality of Service and Resident Satisfaction

The residents have had a mixed reaction to the SCP. In general, the residents are reserved and many are highly independent. Residents were hesitant about using the SCP and interest in the program was not that great. The service coordinator said that those she does interact with are highly cooperative. Residents in the focus groups indicated that they are very satisfied with the SCP and like the service coordinator—"she's ideal in her personality and approach." They also said that services they had received through the SCP had been above average and that there had been no guesswork on the part of the service coordinator.

The service coordinator likes the freedom to make the SCP into the type of program she wants. She enjoys helping the residents and promoting social interaction through guest speakers and other activities. The biggest benefit to residents has been making them aware of services and activities in the community. The biggest benefit to the complex has been increased interaction among residents and the friendships that have ensued.

The SCP uses a good system of record forms and has access to a comprehensive policies and procedures manual that was developed by the previous service coordinator. The service coordinator uses a laptop computer so that she has information on all of the residents even when she is at the other complex she serves.

The property manager feels that the SCP relieves her of many duties that she could not handle. The service coordinator position also provides her with another staff person that she can confide in. The SCP has made the property manager more aware of helping agencies and services available to seniors in the community. The property manager is satisfied with the program and commented that it takes time to establish an SCP. The property manager believes that three or four residents were able to remain in independent living situations because of the SCP and the services that were provided, such as housekeeping and caretaking. Residents in the focus groups said there were no additional services they needed to continue living independently.

V. Roadblocks to Program Operations

The service coordinator's workload is manageable. The property manager thinks the residents could utilize the SCP more, but residents don't feel the need. Additional efforts in the areas of recruitment and outreach could be performed if time allowed.

VI. Recommended Changes and Future Plans

The service coordinator is currently working with the local college to arrange for residents to attend the elder hostel, which is a national program offered at the local college that provides educational opportunities to the elderly. Several residents are eligible for scholarships.

The service coordinator would like to see more money available for the SCP -- she would like to take residents to activities in a different environment, such as a concert in a local park. She would also like to see the SCP regulations modified so that she could become involved in more social activities. For this building, social activities would be a good way to establish a comfortable relationship with the residents.

Case Study Report

A-8

Introduction

A two-person team from KRA Corporation visited this established Service Coordinator Program (SCP) in June 1995. During the visit, the service coordinator and the property manager were interviewed. In addition, an interview was held with the area manager from the management agency. Three focus groups were held with 11 residents, and 10 case records were reviewed.

I. Description of Residents and Project

Development characteristics

The complex is a small high-rise apartment with 55 units, owned by a private corporation consisting of local businessmen. This corporation purchased the property and built the apartment complex to provide housing for the elderly in their neighborhood. The management of the building is handled by a local religiously-affiliated aging agency. This aging agency manages the building and provides supervision for both the property manager and the service coordinator. The property manager lives in the building.

The complex is located on a residential street in a well-known area of a major city. The yard in front of the brick building was well kept, much like the other yards in the neighborhood. Despite the lack of seating areas outside, the residents appeared to enjoy waiting for their rides outside, near the door, as opposed to in the air-conditioned lobby.

The location of the service coordinator and property manager offices on the first floor allows them close proximity to the building's entrance, as well as the residents' kitchen, laundry, and activity rooms. There are sitting areas in the activity room, and chairs are positioned in the lobby just inside the front entrance. This enables residents to chat with one another or wait for transportation and visitors. The building's entrance was locked at all times.

The service coordinator noted several physical attributes of the building that contribute to her ability to meet residents' needs: the public address (PA) system; the privacy of her office and the property manager's office; and the security of the building. The building's PA system aids in promoting attendance at meetings and special seminars with group speakers. The private offices allow residents to voice personal concerns as well as any problems with other residents or the management. The importance of privacy in this particular program is underscored by the fact that the service coordinator reports spending most of her time on informal counseling.

Resident characteristics

The building has 55 units with a total of 58 residents. Eighty-three percent of the residents are female. The residents are predominantly white, non-Hispanic. Eighty-three percent of residents are elderly. Of those, 60 percent are considered well elderly, 17 percent are frail

elderly, and 5 percent are at-risk elderly. The remaining 17 percent of residents are nonelderly persons with disabilities. Sixty-nine percent of all households had annual incomes of less than \$10,000 a year. Sixty-nine percent of residents are over the age of 71 years.

Previously available services

The area manager for the management aging agency and the residents indicated that prior to the implementation of the SCP, a few of the residents went to the property manager if they were in need of some type of service. Others relied on relatives. All of the services provided by the Department of Aging, such as home health care, transportation, and counseling, were available, but often the residents were not aware that these services existed.

During the resident discussion groups, most of the residents indicated that there were neither activities available to them at the project prior to the SCP, nor was there anyone to help facilitate the use of outside services. The residents indicated that there was no one to help them with completing complicated forms or make them aware of services or equipment that would help them. Essentially, the residents said that anyone who was in a crisis situation found the necessary services, but other residents were not aware that there were services that may have helped to make their lives easier.

The property manager did not complete assessments of activities of daily living (ADLs) for program application purposes. The service coordinator reviews ADLs for all residents when they move into the building. A form specifically designed for this purpose was created by the service coordinator when she first started working at the project.

ii. Description of Program Operations

Organizational context of the Service Coordinator Program

The area manager from the management aging agency supervises both the property manager and the service coordinator. Under her direction, the property manager oversees the day-to-day operations of the facility, while the service coordinator plays multiple roles in providing programming and linking services for the residents.

The service coordinator has full responsibility for all aspects of the SCP. She works independently, but the area manager from the management aging agency is always available when needed. The property manager talks with the service coordinator at least daily either by phone or in person and is very supportive of the service coordinator. They work very well as a team. The property manager was hired after the service coordinator.

External linkages

All services to the elderly are coordinated through the Department on Aging. The service coordinator contacts this agency to determine the various service providers within the community. The service coordinator works with the local senior center and the government agencies responsible for providing transportation to eligible residents.

There are no Professional Assessment Committees (PACs) in the community that the service coordinator can use for assessment purposes. However, the Department of Aging will conduct

a formal assessment if a resident is referred to them. The Department of Aging also provides home health care and housekeeping services to residents who need them.

Program objectives and program implementation

The objective of the SCP was to meet the needs of the residents by helping them with whatever services or assistance they needed. This original objective has not changed over the course of the SCP's operation.

The service coordinator initiated the SCP by completing an informal assessment of each resident using the Resident Assessment/Intake Tool. She then concentrated on helping the residents obtain any services needed. The initial review and identification of appropriate services were completed as quickly and effectively as expected.

Service coordinator qualifications and duties

The service coordinator previously worked for an agency that provided services to the elderly. The management aging agency hired the service coordinator because of her experience with the elderly services network and educational background in the social sciences. The service coordinator has a bachelor's degree in elementary and special education. The property manager felt the service coordinator's strengths were her knowledge of the services available and her ability to get the residents to use the services they need.

The service coordinator believes her primary responsibility is to meet the needs of the residents, whatever they may be. She spends most of her time providing informal counseling. In addition, she is responsible for deciding what service providers to contact, arranging for speakers, and helping the residents read and understand their mail.

Service coordinator status

The service coordinator works part-time at the complex (usually 16 hours per week). In addition, she works at a second project. Typically, she works two days a week at the complex and three days a week at the second project. The property manager also divides her time between the same two projects. As a general rule, when the service coordinator is at one project, the property manager is at the other. Both the service coordinator and the property manager wear beepers, and they make frequent calls to each other. They spend approximately two hours together each week.

The service coordinator is a contract employee of the management aging agency. She meets with her employer monthly but works independently.

Although the service coordinator does not have other staff who work with her, maintenance staff inform the service coordinator when they identify a problem or observe anything unusual in the building. The service coordinator felt that other building staff understood the aging process and worked well with the residents.

Access to funds for Service Coordinator Program activities

Petty cash is used for minor SCP activity expenses, such as refreshments. For events that incur larger costs, the service coordinator is very imaginative in finding resources. She reported that on occasion she asked local merchants to provide food or other products for project activities.

On other occasions, the service coordinator worked directly with the area manager, who sometimes obtained funds through the management agency's board.

Service coordinator training needs

The service coordinator attends monthly training sessions sponsored by the management agency. Training sessions included a combination of supervisory management meetings and training on specific subjects, such as the aging eye, developing a personal financial plan, and dealing with the death of a resident. In addition, she has attended many other training sessions on a variety of subjects. She was aware of HUD's training requirements and felt that training was essential to being aware of all the services available and being able to provide the best service to the residents.

Resident interactions

The service coordinator does not use different approaches with the elderly and the non-elderly persons with disabilities. The approach for both is based on the individual's need. The service coordinator tries to plan evening activities for the non-elderly because most work during the day.

At the time of the visit, the service coordinator was actively working with about 12 of the residents. Services she provided for these residents included helping with insurance benefit application terms, coordinating outside help of home care, and general counseling. She had met with and completed an initial assessment of all residents. She was not trying to link any residents to services because either they did not need services or had already been linked to services. The service coordinator kept a record on each resident. This file included a record of every interaction with the resident and annual assessments. She monitored the residents' services by conducting follow-up assessments and by observing the service providers when they visit the residents in the building.

The service coordinator reassesses the residents' needs once a year or more often if necessary. In addition, she is constantly interacting with most of the residents. The maintenance staff and the property manager also keep the service coordinator informed of any issues or problems they may observe.

The service coordinator meets with approximately 10 residents each week. She meets with the residents as needed, rather than on a fixed schedule. Some meetings are initiated by the resident, others are initiated by the service coordinator. To encourage residents' ideas on the SCP, the service coordinator has tried to convey a general attitude of "I'm here to help you, what would you like me to do?" The service coordinator does not have difficulty getting the residents to meet with her and practices an "open door policy". There is continuing outreach to the residents through newsletters, bulletin boards, and speakers.

When the service coordinator meets with the resident for the first time, she completes a review form. She generally uses the same approach with the elderly and nonelderly persons with

disabilities in reviewing their abilities. The only difference is in the case of a non-elderly persons with disabilities where the service coordinator contacts a family member or caseworker. Usually the resident and the service coordinator meet in the resident's apartment so that the service coordinator can observe the resident in comfortable surroundings. However, most subsequent visits are held in the service coordinator's office. There is a plan developed for each resident who needs one.

There have been residents who have declined services, primarily because they didn't think they needed them. When this happens, the service coordinator talks with the resident and the resident's family. She has been successful in convincing resistant residents to obtain needed services. On occasion, the property manager needs to get involved because the property manager has the authority to make sure the residents do not become a threat to themselves.

During the discussion groups, we learned that all residents knew the service coordinator. Some could not remember when they first learned she was there; some said they learned she was there at a tenant meeting; and others said she came and introduced herself. All of the residents felt the SCP had enhanced their ability to live independently and viewed the service coordinator's role as that of a social worker. Others said her job was to help people get the services they needed.

Service provider interactions

The Department of Aging is the agency within the community that is responsible for providing the majority of services to elderly residents. This agency subcontracts with other agencies to actually provide services such as transportation and home health care.

Services and equipment

The service coordinator has been influential in making residents aware of services and linking those residents who need the services to the appropriate provider. These services include: home health care, transportation, financial assistance counselors, and shopping assistance. In addition, she has arranged for a variety of speakers, helped residents complete benefit applications, and has been available to counsel residents, as needed. She also has organized some social activities, such as a boat trip and special dinners. All activities initiated by the service coordinator have been made available to all residents. The service coordinator has made some efforts to get the residents more involved in the community. She has talked to the residents about volunteering. In addition, she arranged for the middle school students to come in and provide spring cleaning for the residents. The service coordinator has also helped some residents obtain special equipment, such as grab bars and hearing aids, by referring the residents to the organizations that provide this equipment.

According to the residents, some of the services the service coordinator helped arrange for includes: housekeeping, laundry, transportation, escort/shopping, completing forms, nurse visitation, meals on wheels, senior center admission, senior companions, financial management, and someone to talk to when things got difficult.

III. Description of Case Records

The assessment form found in the records also contains information regarding demographics, emergency contacts, insurance, income, benefits, medical problems, and other background information. This form was found in each of the ten case records reviewed. In addition, the case records included, when appropriate, a case management plan, a quarterly service summary, incident reports, case notes, and authorization to release information forms.

IV. Quality of Service and Resident Satisfaction

According to both the service coordinator and the property manager, the residents are very positive about the program. The residents themselves said that they were very satisfied with the service coordinator and were glad that she was there. They also indicated that they would like for her to be there full-time. Many residents reported that she helped in a variety of ways, and one resident indicated that it "would be a sad day if she left."

The service coordinator believes that contacts with providers helped improve the quality of service the residents receive. This is particularly true with home health services. The property manager believes the program has been very effective in providing services to the residents who need them. The residents said that while some residents have not needed the service coordinator's help, they know she is there if they need her.

The service coordinator believes that the SCP has helped the residents obtain the services they need and feel better about themselves. More importantly, the residents have someone available when they need help obtaining a service or just need a person to talk to. The program is also beneficial to the housing development, itself, in that it allows the property manager to concentrate on managing the complex. The property manager agreed that the program has been influential in linking residents to the services that they really need. The property manager estimated that 12 people may have had to move to a nursing/assisted care facility had it not been for the meals-on-wheels, housekeeping, and transportation services arranged by the service coordinator.

V. Roadblocks to Program Operations

Both the service coordinator and the property manager consider the service coordinator's workload to be manageable. The property manager often helps with functions that require a lot of organizing or when there is a need for an authority figure. All parties expressed satisfaction with the services offered by the service coordinator and with her ability to provide whatever support residents needed, including emotional support and morale building.

There were no problems with cooperation from outside organizations. All agencies have cooperated with the service coordinator.

VI. Recommended Changes and Future Plans

The service coordinator recommended that there be more feedback from the HUD area office regarding the program goals and requirements for the annual report. The service coordinator meets with the HUD representative every other month.

Case Study Report

A-9

Introduction

A visit to this established Service Coordinator Program (SCP) was made by a two-person team in June 1995. During the visit, the service coordinator, the property manager, and a director for the property management corporation were interviewed. In addition, three focus group discussions with 12 residents and two individual interviews were held, and 10 resident case records were reviewed.

I. Description of Residents and Project

Development characteristics

The complex consists of 46 one-bedroom units located in a 5-level high rise building. The building is owned by a small for-profit corporation and managed by its non-profit property management subsidiary. The property manager has managed the complex for 18 months.

The building is located on the corner of a busy inner-city street. The mixed use layout of the neighborhood has resulted in a steady stream of pedestrian and vehicle traffic during day and evening hours. The neighborhood consists of residential housing and commercial businesses. For example, a restaurant/nightclub and a liquor store are located directly across the street from the complex. These businesses, as well as others nearby, contribute to the high volume of pedestrian traffic observed. Although loiterers were observed across the street from the complex, the neighborhood did not appear unsafe for residents during the day.

The grounds of the building are well-maintained and secure. The grounds are landscaped, and residents have access to a common patio area adjacent to the first-floor activity room. The patio area has tables and chairs that promote socializing among the residents. The building is surrounded by a brick and wrought iron fence used to separate the boundaries of the property. In order to enter the building, visitors must use an intercom system to announce their arrival. Security is maintained by use of a locked entrance, which is monitored by a closed-circuit television. The property manager relies on this system to observe the traffic flow in and out of the building. The front door can also be monitored from the activity room.

The building's entrance area is small and does not have a formal lobby. There is a soda machine and newspaper stand immediately inside of the entrance as well as resident mailboxes. There is a small unfenced parking lot behind the building for residents and staff. There are two public bus stops located directly across the street from the building.

The activity room is located on the main level. The room is large and well-furnished with many plastic-covered comfortable sofas and chairs, a large table for dining and games, and a piano that was locked. There were many recent copies of magazines displayed on the room's coffee table for use by residents. A bulletin board was located in the activity room; however, it did not contain any posted notices of upcoming resident activities. An activity was planned for that week but was not posted. There also was a well-equipped kitchen adjoining the activity room.

During the visit, no resident social activities or interactions were observed, and it appeared that the activity room was not regularly used.

According to the service coordinator, the layout of the building and of her office has helped in the planning and implementation of the Service Coordinator Program (SCP). The offices of the service coordinator, property manager, and the director of the housing management corporation are located on the basement level. The property manager reported that the basement level is the "pulse" of the building because this is where residents pay their rent, do laundry, and frequent the vending machines. Being located on the basement level across from the laundry room has facilitated the service coordinator's ongoing contact with residents.

The service coordinator's office is private, very spacious, and comfortably furnished. In addition to her desk, chair, and files, there are two sofas, a conference table, and a television. The location of the service coordinator's office is removed from the heavy traffic associated with the first floor entrance. The space used by the service coordinator is not used by residents if the service coordinator is not there because the space is restricted for meetings and activities of the parent corporation.

Resident characteristics

Of the building's 45 residents, 87 percent of the residents are elderly, and 13 percent are non-elderly persons with disabilities. The majority (67 percent) of the residents are female. Thirty-one percent of the elderly population are classified as "at-risk"; 18 percent of the residents are frail; and 46 percent are the well elderly. Almost all (98 percent) of the residents are African American. Thirty-seven percent of the residents are 76 years old or older. None of the resident households had incomes over \$15,000; and the majority of households, 84 percent, had incomes of less than \$10,000.

Previously available services

Limited services were available to residents prior to the SCP. The property manager reported that she was not involved in helping residents obtain special equipment, supportive or health services, or in organizing group services or activities prior to implementation of the SCP. The previous property manager was involved in initiating group social activities, such as dinners, parties, and Sunday school but was not involved in linking residents with any social services. The former property manager estimated resident activities of daily living (ADL) deficiencies when developing the SCP grant application.

Before the SCP was implemented, residents reported that they did not have anyone to assist them with their problems or to link them with needed services. Transportation services were available but had to be requested well in advance of need. Most focus group participants reported receiving public benefits, such as Social Security, Supplemental Security Income (SSI), Medicare and Medicaid. They had no outside assistance in obtaining these services.

The property manager felt that prior to the SCP, residents' greatest service needs were for visiting nurses and a social worker.

II. Description of Program Operations

Organizational context of the Service Coordinator Program

The SCP is operated by a small for-profit corporation. The non-profit property management subsidiary of this corporation manages the property as well as another housing complex. The service coordinator works at both housing complexes. All staff, including the service coordinator, were hired by the management corporation. The service coordinator was involved in writing the SCP grant application and was told that, if funding were awarded, she would fill the position of service coordinator.

Both the service coordinator and the property manager report to the director of the management corporation whose office is located in the complex. The director meets jointly with the service coordinator and the property manager every Monday morning to discuss issues related to the operation of the program. The maintenance person, who resides in the building, is also included in this meeting.

At least three times a week, the service coordinator and the property manager talk about issues related to residents' needs. They agreed that there are always issues to discuss. The maintenance person has a strong working relationship with the service coordinator and the property manager. Many referrals come directly from the maintenance person. Although the management corporation and the property manager are involved in the SCP, the service coordinator believes that she functions independently.

The property manager's responsibilities or abilities to carry out management tasks have not changed since the SCP because she previously had little involvement with the social service needs of residents. The property manager feels confident that when a resident is referred to the service coordinator, the resident's needs will be taken care of. Since the SCP began, the property manager has observed that residents have social services coming into the building that were previously unattainable. This change has not affected the amount of time the property manager spends dealing with the supportive service needs of residents because she previously devoted little time to this area.

The service coordinator and the property manager appear to have a good working relationship. The service coordinator reported that the property manager is supportive of her activities. When the service coordinator is gone in the afternoons, the property manager attends to details. Lines of communication among staff appeared to be very open.

The service coordinator has primary responsibility for the SCP (the property manager is not involved in the program's day-to-day operations). The service coordinator is responsible for procedures for contacting and recruiting residents, deciding which service providers to contact, and setting program priorities. Decisions concerning what community activities to promote are made collaboratively by the property manager, the director of the housing management corporation, and the service coordinator.

External linkages

The service coordinator reported that the local agency on aging serves as a resource for the SCP. Other resources available to the service coordinator include the local nursing service agencies and physicians. Although no Professional Assessment Committees (PACs) have been used, residents have been referred for assessment to outside professionals, including local physicians, area hospitals, and nursing services, such as the visiting nurses association. When professional assessments are needed, the service coordinator contacts one of the local service providers.

The service coordinator's work with local community groups has allowed her to call upon these groups to sponsor an activity or to provide transportation for residents.

Program objectives and program implementation

The service coordinator and the property manager concurred that the original objectives or priorities of the SCP have not changed since the program was implemented. Even though a schedule was not established, the property manager believes that SCP activities were initiated in a timely manner and have met her expectations. The director of the management company agreed that the SCP was implemented well within the time that she expected.

Program size

The ratio of residents to service coordinator is 45 to 1. The service coordinator's caseload at this complex is composed roughly of one-half frail and at-risk elderly and the remainder well elderly. Only 1 of the 6 non-elderly residents is part of the service coordinator's caseload.

Service coordinator qualifications and duties

The service coordinator has extensive experience in counseling and is a retired counselor from the local public school system. She has a Master's degree in counseling and throughout her career worked with a variety of populations as a teacher and social worker. She views the service coordinator role as that of an "enabler" who facilitates the residents' service needs. This role has not changed since inception of the SCP. The property manager also views the service coordinator's role as that of facilitator; she praised the service coordinator's ability to counsel residents and find a positive side to many of their situations. The property manager believes that one of the service coordinator's strengths is her ability to communicate with people and to accept the observations and the recommendations of others who interact with residents under different circumstances, such as the maintenance staff person and outside service providers.

Service coordinator status

The service coordinator works for the SCP part-time (20 hours per week at the project and part-time at another project). She works 4 hours each morning at the project we visited and 4 hours in the afternoon at the shared project. The service coordinator reported that there were no problems in serving more than one complex.

The service coordinator arranges social activities for residents, and the property manager is involved in preparing for some of them. The property manager develops the memos announcing

the activities, makes copies, and collects money from residents. The property manager reported spending at least two to three hours per week discussing program activities with the service coordinator.

The service coordinator uses input for the SCP from other building staff. For example, the maintenance person is directly involved in providing referrals to the SCP. He seems to enjoy working with the residents, and the residents enjoy the attention that he gives them. The maintenance person shows the residents a lot of respect because of their age. Once a week, the maintenance person provides an overview of problems encountered by residents during the weekend. The property manager reported that the maintenance person functions more in the role of an assistant property manager. The service coordinator believes that building staff understand the aging process.

Access to funds for Service Coordinator Program activities

The service coordinator does not have access to any discretionary funds for program activities.

Service coordinator training needs

The service coordinator has received training in the area of geriatrics and relationships since she was hired. Both the service coordinator and property manager agreed that no additional training is needed at this time. The service coordinator stated that she tries to keep current with what is going on in the field. The property manager was aware that the service coordinator had received training but was uncertain about the type of training received.

Resident interactions

The service coordinator targets her services primarily to those residents who have been identified as needing intervention. She determines which clients she will carry as part of her caseload through referrals from the property manager or building maintenance staff for any resident whom they believe needs to be seen. These residents become part of the service coordinator's caseload, and only they receive an ADL assessment and have a case record.

The service coordinator also assists other residents with their problems and has linked many of them to services. She reported that she has met with all 45 residents and is currently working with all of them. Unlike residents who are part of her caseload, a case record is not maintained on non-caseload residents and their contacts are not documented. The service coordinator is currently trying to link 6 residents to services and already has linked approximately 26 residents to services. She meets with approximately 20 residents each week.

Residents reported that when the service coordinator first came to the complex, she told them that she had been sent by the government to help them. Other residents viewed the service coordinator's role as that of social worker who helps them obtain services.

The service coordinator determines whether or not residents are receiving the services to which they have been referred by talking with them and by talking with service providers. The service coordinator conducts monthly follow-up assessments for all residents who are part of her caseload. The needs of residents who are not carried in her caseload occur through day-to-

observation or reports from the maintenance staff. The service coordinator has numerous interactions with residents, both individually and in groups. These interactions provide the service coordinator with opportunities to assess whether a particular resident should be part of her caseload.

The service coordinator sees the typical resident, as needed, and is usually the person who initiates the meetings. Residents who were part of the service coordinator's caseload reported that they regularly meet with her. Most residents had met with the service coordinator at least once and were visited in their apartments at some point. The service coordinator reported that, overall, she has not had any problems getting the residents to meet with her. When necessary, the strategy she most often uses to get residents to meet with her is to go to them.

The service coordinator routinely visits residents with disabilities and has continuing outreach to all residents. She always sends a written notice first, followed by a personal contact. She reported that she continuously knocks on residents' doors and has information put in their mailboxes. The service coordinator uses the same approach when working with the elderly and nonelderly residents with disabilities.

According to the service coordinator, there has been only one resident whom she thought needed services but did not want to meet with her. The service coordinator believes that the main reason the resident resisted was that the resident didn't want to reveal herself. Further, culturally, the resident believes that people should solve their own problems. For those residents who do not want a service that the service coordinator thought would help them, the most successful approach to overcoming their resistance has been to offer general programs at the complex that are free, such as flu shots, health screening, and birthday parties. The property manager reported that she does not get involved with residents who decline a service and was unaware if this had occurred. Only one focus group participant reported that she had declined a service that had been offered.

The service coordinator does not conduct an ADL assessment for all residents. Informal assessments are only completed for those residents who are part of her caseload. We reviewed ten records that were randomly selected from the service coordinator's "caseload", and all included an ADL review. As part of the ADL review, the service coordinator observes and assesses the resident's ability to perform various activities during her initial visit with the resident. The first meeting with the resident is usually held in the resident's apartment so that the service coordinator can observe the resident performing various activities. The service coordinator completes a Screening Questionnaire, which includes a functional status checklist. In addition to this tool, she relies on information provided by the resident to determine functional status.

A plan is developed for each resident, which includes the goals and objectives to be reached. The service coordinator tries to develop a plan that will ensure that the resident's quality of life is the best that it can be. The service coordinator conducts ongoing assessments of residents' needs. Of the records reviewed, about 50 percent also included monitoring plans. The service coordinator stated that continuous monitoring works best, given the nature of the residents' needs. She does not usually record informal monitoring observations unless information is obtained that suggests that more formal, regular assessment is needed.

The service coordinator reported that her primary responsibilities are as an enabler, a broker, and a resource person. These responsibilities have not changed since the program's inception. She continues to plan and refer residents to services and agencies based on her assessment and day-to-day observations of their needs.

The tenant council meeting is the primary tool used to ensure resident input into the SCP. The tenant council president wants to keep the organization separate from management and believes that the service coordinator should only attend when invited.

Service provider interactions

The service coordinator reported that several community agencies have been critical to the success of the SCP. These agencies included transportation providers, emergency response, a local ambulance service, the YMCA, and a local advocacy group that brings in resources to residents, such as arts and crafts, drama, and dance.

Services and equipment

The service coordinator has assisted residents in securing additional benefits, interpreting letters that they received, and providing counseling. Project-based activities that she initiated included free eye exams, blood pressure screening, flu shots, podiatry services, and mammograms.

Focus group participants reported that the service coordinator has not assisted any of them in getting equipment, although she did offer a resident the use of a wheelchair after the resident's knee surgery. The resident declined the equipment because "I like to do things myself." The resident further stated that if she really felt she needed it, she would have accepted the wheelchair.

The service coordinator also initiated several activities to get residents more involved in the community. For example, she increased the frequency of shopping trips that were already in place from once a month to once a week, planned three luncheons in the community, and assisted one resident with her enrollment in college courses. Although only two residents attend the local senior center, most residents reported that they would like to have more activities.

Since implementation of the SCP, residents are now able to receive services that they had not previously received, such as additional benefits for which they were entitled, transportation to doctors' appointments, commodities, increased insurance, food stamps, rent rebates, and housekeeping assistance.

III. Description of Case Records

The service coordinator maintains detailed case records on all residents who are part of her "caseload". She defines caseload as those residents for whom she provides ongoing services and follow-up. There are no files maintained on other residents for whom she has provided counseling, made linkages to services, or made other contacts. It was apparent that the service coordinator had contacts with many more of the residents than her case files indicated. During the focus groups, many residents reported that the service coordinator had visited them in their apartments, assisted them with obtaining needed services, or had some other contact with them.

None of these services or contacts were documented by the service coordinator if the resident was not part of her caseload.

The resident case records that were maintained were extremely detailed and included a social history, demographics, health information, a case management plan, monitoring plan, and an ADL assessment. The assessment tool was part of a screening questionnaire and included a functional status checklist of ADL impairments.

IV. Quality of Service and Resident Satisfaction

Residents were overwhelmingly satisfied with the service coordinator and very satisfied with the services to which they were linked. Residents who were part of the service coordinator's caseload were satisfied with the quality of the services they received and some stated that the services received had helped them to maintain their independence. Those residents who have not needed services were satisfied with the knowledge that services were available should they need them in the future. Some of the residents who were not part of the service coordinator's caseload were confused about the role of the service coordinator. They knew that she was there to help them and had seen her advising others but were not sure how she could help them.

The service coordinator maintains ongoing contact with residents to determine if they are satisfied with the services they are receiving. She stated that these contacts "keep me on my toes." Residents who were not part of the caseload were satisfied with the activities provided through the service coordinator, such as recreation equipment, scheduled outings, and any other assistance they had received, some of which had been provided by the previous property manager.

The service coordinator reported that the benefits of the SCP to residents have been that they view her as a relief to them; they know that they can have immediate access to her; that she is reliable; and that she is there to help them solve their problems. Many residents view her as part of their extended family. In addition, many of the activities organized by the service coordinator, such as holiday dinners, transportation to dinners, and monthly movie nights, add a needed social dimension to residents' lives. The property manager agreed that the social activities enabled residents to get out more and become more involved in community activities. The property manager believes that the addition of housekeeping and the daily nurse visits are major improvements that enabled 7 or 8 residents to continue living independently. Having someone to handle the personal issues of the residents has been an aid to the property manager. The property manager believes that, overall, the SCP has been very effective in providing services to the residents who need them.

The greatest benefit to the development, according to the service coordinator, has been her ability to affect change by bringing in new medical services to the building. The social activities also have been a benefit. The property manager believes that having the service coordinator, who has taken on the responsibility of helping residents, is the biggest benefit to the development.

The service coordinator stated that the personal satisfaction received from helping people who need services is what she likes best about the SCP. Getting commodities to residents and arranging for them to attend community-sponsored lunches are the services that have worked

particularly well from the service coordinator's perspective. The property manager reported that what she likes best is that she does not have to be involved in residents' problems. She manages two complexes and is very busy.

V. Roadblocks to Program Operations

The service coordinator and the property manager did not identify any barriers or roadblocks to operating the SCP. The service coordinator reported that her workload is "about right." The property manager believes the service coordinator is excellent at managing her caseload and that she could take on more responsibilities. She believes that the service coordinator knows how to schedule and knows what's happening with her caseload. Routinely, when the property manager processes the paperwork for new residents or for a recertification, she refers them to the service coordinator if she suspects that they may need services.

VI. Recommended Changes and Future Plans

The service coordinator would like to see the SCP secure a van to aid in transportation to planned outside activities. She is currently looking into this. She also thinks the program would benefit from additional space for recreational equipment, such as a pool table that has been requested by residents. Residents reported that in addition to having more project-based activities, they would like to have new self-cleaning ovens. Many residents have health problems that make cleaning the stove and oven problematic. In addition, they would like to have resident monitors or some indication on the door to indicate daily that the resident is all right.

The property manager thought the SCP needed a discretionary fund to help residents whose eligibility for financial resources are borderline. Currently, these residents have difficulty participating in activities in which they are required to pay a fee.

Case Study Report

B-1

Introduction

A two-person team from KRA Corporation visited a newly established Service Coordinator Program (SCP) in June 1995. During the visit, the service coordinator and the property manager were interviewed. In addition, four focus group discussions were held with 18 residents, and 10 resident case records were reviewed.

I. Description of Residents and Project

Development characteristics

The 157-unit facility is one of several owned by a not-for-profit religious organization. The four-story building is located in a quiet, residential area on the outskirts of a small city. A bus stop is located across the street from the building. Each floor has a lounge or a day room area. The building is not locked, although residents have requested a security guard, and a needs assessment was in progress during the time of our visit to determine whether a security guard was needed.

The apartment building adjoins a nursing home, and the buildings are connected by an underground tunnel. Some residents reported they specifically moved to the apartment building to be near a spouse who was in the nursing home.

A unique feature of the building is a cafeteria and a kitchen where residents receive their meals. The kitchen prepares meals for both the apartment complex and the nursing home facility. Only 32 apartment units have kitchenettes; thus, almost all residents eat their meals in the central dining area. Residents may have coffee and tea in the dining room during the day. Residents tended to congregate in the day room to wait for meals.

The complex has very little administrative office space. Currently, the property manager and the service coordinator share a small office and a single computer and telephone.

Resident characteristics

A total of 149 residents reside in the building. Residents are primarily white, with a few Native Americans. Sixty-seven percent are female. Sixty-six percent of all residents are over the age of 76. Seven percent are nonelderly persons with disabilities.

Previously available services

The property manager estimated that prior to the SCP she spent roughly 30 percent of her time assisting residents in obtaining services and equipment. Services available prior to the service coordinator were minimal—little was available within the building, other than meals in the cafeteria. The property manager had contact with hospitals, health care agencies, an equipment center at the senior center, a local social service agency, a home-health care agency, and the adjacent nursing home. Other services that the residents used at the inception of the SCP

included the on-site home health care agency, transportation services (care van), and a few aging services. Services most needed by residents prior to the SCP were referrals, someone to work with the resident's family members, and social services. Shortly after starting her job, the service coordinator developed an inventory of services that were available to residents.

Residents reported they did not have "much of anything" in the way of services and emphasized that there were no recreational activities available to them before the service coordinator started in her position. A few residents mentioned a few activities and services available: bingo one night a week; a private cleaning service; and an on-site home health service. They reported that the activities they had were sporadic.

II. Description of Program Implementation

Organizational context of the Service Coordinator Program

The service coordinator reports directly to the property manager. The property manager reports to the director of housing in the parent (not-for-profit religious) organization.

Overall, the property manager is fairly involved in the SCP and is viewed as having the primary responsibility for the program. The property manager now sets program priorities but hopes the service coordinator will be able to assume this responsibility later. The property manager reported that she now has more time to be involved in strategic planning, overall staff management, and other responsibilities that were not possible prior to the SCP. The service coordinator has the most say in determining the procedures for contacting and recruiting residents, deciding which service providers to contact, and deciding which community activities to promote. The service coordinator works jointly with the property manager and tenant services coordinator to plan program activities. Because the property manager and the service coordinator share an office, they have daily contact. They meet twice a month to discuss short- and long-term goals of the SCP. According to the service coordinator, they meet daily to discuss the program. The property manager closely supervises the service coordinator, in part because the office, computer, and telephone, are shared. Sometimes the two individuals find it hard not to step on each other's toes. The service coordinator "has been great" and helped a "tremendous amount."

External linkages

Any resident assessments that are needed are referred to the on-site home health care agency. The working relationship with this agency was characterized as very good. The local mental health program is involved with residents because the population of persons with disabilities in the facility has mental health problems.

Application process

The religious organization submitted an SCP application primarily because of need. Staff from the parent religious organization (the grant writer and the director of housing) had the most involvement with the application process. They did not conduct an actual assessment of residents but "observed" to determine the number of frail and at-risk residents. The property manager was only minimally involved with the grant application.

The SCP was planned by the property manager who relied on an outline/job description from HUD and a job description provided by the director of housing from the parent organization. The service coordinator was given direction by the property manager, and she also was asked to develop the program. Once the service coordinator was hired, she contacted the adjacent nursing home and local human service agency for assistance with developing the program.

Implementation date

The application was approved in December 1994. The service coordinator began work in January 1995 and had been with the housing development for six months.

Initial activities

Early activities included developing the job description. The board of directors of the parent organization was involved with this task. The first activities initiated by the service coordinator included developing a calendar of events for residents, starting an exercise class, and establishing a library for residents. The service coordinator commented that it was difficult getting the program started.

Service coordinator qualifications and duties

HUD guidelines recommended that the service coordinator have a degree in gerontology, social work, or counseling; experience in a related field also was acceptable. A detailed job description was developed for the project that included the same responsibilities listed in the HUD program announcement.

The service coordinator is a recent college graduate with a bachelor's degree in social work, and she completed an internship with the adjacent nursing home. The service coordinator is very outgoing and personable. Residents who participated in the discussion groups supported this impression.

The service coordinator feels she is responsible for the tenants themselves and for addressing their needs. Because it is a new program, the service coordinator has little to go on and is creating the program.

Service coordinator status

The service coordinator has been working in the building for 6 months. The service coordinator works full-time (40 hours a week) and only works at the one building. She applied for the position when she heard about it from a friend. The service coordinator is assisted by a staff member, the tenant services coordinator. The tenant services coordinator assists the service coordinator from time-to-time (e.g., setup for activities) and fills in as needed. The tenant services coordinator's primary role is to help tenants with rent and to conduct new resident interviews. The service coordinator also reported working closely with dietary staff.

The service coordinator met with dietary staff to explain her role. Some staff in the building understand the aging process while others do not. There were no problems getting other staff involved in the SCP.

Access to funds for Service Coordinator Program activities

Both the service coordinator and the property manager reported there was very little money available for the SCP. The service coordinator brainstorms with other community agency staff, such as the aging agency, to develop ideas of how to work around budget limitations. Many things are donated, and volunteers provide some activities. The property manager can spend up to \$500 without authorization from the parent organization.

Service coordinator training needs

The property manager was not aware of HUD's training requirements, although she reported that training activities were "in the planning stage." Seminars and conferences through the local university were under consideration. The service coordinator also reported she was unaware of HUD's training requirement. The service coordinator has explored possible training courses through local universities but found little was being offered during the summer. Session topics that the service coordinator would find useful include management of older adults, behavioral problems, and services/resources available.

Resident recruitment

A tenant meeting was held to introduce the service coordinator to the residents. The service coordinator also tried to go informally to each apartment to introduce herself and to get to know the tenants. Residents reported meeting the service coordinator at a meeting held in the cafeteria. They also indicated that the service coordinator came by their apartments to introduce herself.

There were no problems getting residents interested in the program, although some residents did not know who the service coordinator was or what she did. Continuing efforts are made to inform the residents about the program, including mentioning the program at each tenant meeting, posting written notices on the activity board and at the information center, and sending a letter to each resident and one of their family members.

Resident assessments

During the service coordinator's initial meeting with the resident, she obtains a medical background and spends time observing the resident's behaviors and activities. This meeting is usually held in the resident's apartment because the service coordinator does not have a private office. Residents who attend building activities conducted by the service coordinator are observed in this setting. Residents needing assessments are referred to the on-site home-health agency for an assessment.

Resident interactions

The service coordinator reported that she is currently working with 57 residents and that she had met with almost all residents (149). The service coordinator had already linked 50 residents with services and is trying to link 10 more. The service coordinator might meet with as many as 20 residents a day, but this number varies and includes many informal contacts.

Residents report that they see the service coordinator "daily" in the cafeteria. Some residents indicated the service coordinator would come by their apartment to check up on them if they were sick or the service coordinator had not seen them at meals, or if they asked her to come by. They also report they are satisfied with the services they have received and that the service coordinator does her job "100 percent."

Approximately 12 residents who needed services declined to meet with the service coordinator or declined to take advantage of services. The service coordinator thought this might be because of income limitations (they are unable to pay for services), families that did not want to participate, or a belief that it required too much of a commitment on the part of the resident. The approach that appears most successful for dealing with residents who decline a service is to continue to follow up and look for progress.

The property manager reported that approximately 10 percent of the residents have declined services offered to them. The property manager also felt that 20 percent of the residents do not need any help and that some are too independent to take advantage of services. The property manager reported that she will get involved with residents who decline a service that would help them but only as a last resort. She encourages residents to use the service and asks them where they would go if the facility could not meet their needs. Residents participating in the focus groups did not report declining any services.

The service coordinator uses a suggestion box and individual questionnaires to encourage resident input into the program. In addition, the service coordinator's presence at social activities provides opportunities for residents to approach the service coordinator. The resident council and management meetings also are used as vehicles to encourage resident input.

Residents were not clear about the exact role of the service coordinator but generally understood her responsibilities. Some thought she was a social worker, while others indicated she was a social or activities director. They viewed the service coordinator as improving their quality of life and as someone who could be used for any need they might have.

The service coordinator does not use different approaches in working with persons with disabilities and the elderly, although the service coordinator indicated they represent different age groups and different issues. The service coordinator does not "talk down" to either group.

Services and equipment

The property manager reported that no new services had been made available to the residents since the SCP began—it was more of the same with much better follow-through.

III. Description of Case Records

The notes in the case records were well-documented and detailed. Follow-up steps were listed and detailed; however, an overall plan or approach was not found. There is very little basic demographic information in the records. No informed consent or release forms or assessment information was found.

All case records contained documentation about contacts. Most contacts were initiated by the service coordinator, although some notations did not specify who initiated the contact. Service coordinator contacts covered a wide range of subjects including: behavioral problems (acting out) by the resident; social activity, illness, and tenant council responsibilities; mental problems and keeping clothes clean; hospitalization and follow up with medications and assessment; personal hygiene, assessment and nursing home placement; not bathing, eating, or cleaning apartment; transfer to hospital and nursing home; delivery of meal trays; and resident struck by a visiting nursing home patient. In most files, the service coordinator documented contact with the family for each situation. One record documented a resident "incident" (resident fell in parking lot).

IV. Roadblocks to Program Implementation

Both the service coordinator and the property manager felt the service coordinator's workload was about right. Both mentioned that the service coordinator had not started working with all residents who had needs and that potentially the workload could be "overwhelming." The property manager also indicated the service coordinator needed to pace herself so as not to overextend herself with work commitments.

The property manager reported that although there have been no problems with agencies, staff shortages at local agencies—in particular the social service agency—have meant fewer resources available to provide services. The service coordinator mentioned that she encountered no problems dealing with agencies.

V. Perceived Improvements and Resident Satisfaction

Perceived improvements to the facility since the service coordinator began include: early intervention and follow-through, including better contact with the families; more personal involvement with residents; an overall impression that the presence of the program improves the building as a whole; mental and physical needs of residents are being met better than before; and with this service, the project's image in the community is more positive, which helps market the facility. Also mentioned were the increase in activities; knowing the service coordinator is available; and having someone available to talk to the residents.

Residents indicated the service coordinator was a good "morale booster;" helped them obtain a library on the second floor of the building; helps with Medicare bills; "checks up on people that need medications;" helped with services (but declined to identify what the service was); goes with residents on luncheon outings once a month; and that the service coordinator is aware of resources in their community as well as another nearby community.

VI. Recommended Changes and Future Plans

Strategies to increase participation

The service coordinator uses one-on-one reminders to encourage participation in activities and to ensure that residents do not forget that activities will occur. The service coordinator also put a questionnaire on each resident's door to ask what activities and services might be needed. An additional strategy is to try to establish an American Association of Retired Persons (AARP) chapter at the building. A chapter existed previously but one has not been in existence for approximately 2 years.

Recommended changes

Recommended program changes suggested include wanting additional guidelines that specify in more detail what the service coordinator can and cannot do; having more direct contact with HUD; obtaining free services from the on-site home-health nursing company; having a budget to work with; developing a newsletter for the residents; setting up support groups; and having an office for the service coordinator.

Planned activities include establishing a men's group and a support group, using the quarterly inspections as a way of talking with residents, conducting full assessments, and obtaining social histories. The property manager is not sure this latter type of activity is within the scope of the service coordinator's responsibilities.

Residents had only a few suggestions for new services or improvements in the program. Suggestions included having a guest speaker demonstrate and teach residents how to use their canes and walkers properly; obtaining an office for the service coordinator; having more involvement with the library; and starting a newsletter about the residents.

Case Study Report B-2

Introduction

A two-person team from KRA Corporation visited a newly established Service Coordinator Program (SCP) in June 1995. Interviews were conducted with the property manager and the service coordinator. In addition, three focus group discussions were held with 11 residents, and 10 resident case records were reviewed.

I. Descriptions of Residents and Project

Development characteristics

The complex is composed of two high-rise buildings—the only high-rise buildings in the area—and a single-story activities center. This complex is owned and managed by a private local corporation. Only one of the residential buildings was included in the study.

The complex is located in a small city. The area surrounding the complex consists of schools, restaurants, hotels, gas stations and several small stores all within walking distance of the complex. There is also a medical facility directly in front of the complex. Two parking lots are located near the project; one is used primarily by the residents who own cars, and the other, located between the two buildings, is for visitors.

The project is set back away from the street (about 300 yards), and there is very little pedestrian traffic around the building. An outdoor seating area facing a marsh is available for residents. This area is located in front of the activities center which is situated in between the two buildings. Additionally, a grill for cookouts is located in this area. This was the only outside common area where residents could congregate.

The building seemed to be fairly secure. Although there was not a lock on the entrances, the entrance areas were staffed by volunteer residents. All visitors were required to sign in upon entering and sign out when leaving the building. During the evening and early morning hours, the doors are manned by security guards. There are three security guards who have apartments in the building. One guard is always on call to handle emergency situations. The neighborhood appeared safe.

The activities center is used for various resident activities, including morning exercise classes, church services, and watching television. Residents are informed of activities center events by notices posted on bulletin boards located throughout the building. A kitchen also is available for resident use. Directly outside the activities center is a beauty shop that is staffed by a beautician two days a week.

The service coordinator and the property manager both have offices in the same building, on the same floor and relatively close to each other. However, the service coordinator's office is connected to another building employee's office. To obtain access to the other employee's office, one must walk through the service coordinator's office. The service coordinator can meet privately with residents by closing her front door and the door between the two offices.

The property manager's office provides more privacy because she does not share it with other building staff members.

The lobby, which is directly outside the service coordinator's office, has an area with chairs and a couch. Throughout the day, residents were seen here talking with one another. Additional furnished common areas are located on each floor directly in front of the elevators. Residents were also seen interacting with each other in the activities center and the beauty shop.

Resident characteristics

The project is a 70-unit complex with a total of 71 residents. The complex consists of both the elderly and the nonelderly persons with disabilities. However, the overwhelming majority of resident households are classified as elderly (99 percent). Of this group, about 73 percent are classified as well elderly. The residents at the complex are primarily female (86 percent) and white (97 percent). All resident households had incomes between \$5,000 and \$14,999 with the majority of households (76 percent) in the less than \$10,000 range.

Previously available services

The service coordinator said that before she began working at the complex, the local aging agency was the primary resource for community-based service providers in the area. The service coordinator did not feel there was a problem in the availability of services (with the exception of transportation) but said that those services were not used more often because residents were not aware of what was available. Services that were used by the residents prior to the SCP included home health care, counseling, transportation, and adult protective services. The residents indicated that available services did not change after the SCP began.

Prior to the service coordinator's placement, the property manager spent more of her time handling resident's service needs (she could not indicate how much more time). This help was usually in the form of crisis- or health-related services that were needed by residents during recuperation after stays in the hospital. If non-emergency services were needed by a resident, they had to arrange for them or ask another resident for help.

II. Description of Program Implementation

Organizational context of the Service Coordinator Program

The property manager has been employed by the corporation that owns the building for about 7 ½ years. The service coordinator, who is employed by the same corporation, has been in her position for about 6 months. The service coordinator splits her time between this project and the other building. The property manager is responsible for the management of all the project's staff including the service coordinator. The property manager was responsible for preparing the grant application and for selecting the service coordinator from among those who applied for the job.

Now that the SCP is in place, the property manager is able to concentrate on management duties. She spends very little time coordinating services for the residents. The service coordinator has the primary responsibility for planing and developing activities. The property

manager allows the service coordinator to work independently with service providers and residents, but she meets with the service coordinator on a daily basis for about 30 minutes a day to discuss resident issues and to keep track of what the service coordinator is doing.

The service coordinator feels that she is allowed to function independently and that the property manager has been very supportive of her efforts to run the program.

External linkages

The service coordinator uses the local aging agency primarily as a referral source for service providers in the area. The agency has provided her with a handbook she uses for these purposes. The service coordinator has made an attempt to get more involved with this agency by asking them to notify her when they have meetings.

Although the service coordinator has not conducted any resident needs assessments, she has used the community-based, county-funded assessment provider to make assessments of residents' physical abilities.

Application process

The property manager primarily was responsible for planning and applying for the service coordinator funding. She decided to apply for funding because it was available and because she needed the help. The building management corporation's board of directors were responsible for approving the service coordinator application before it was filed with HUD. The property manager also was responsible for reviewing the service coordinator applications and hiring the service coordinator (with the board's approval).

No formal assessment was made by the property manager to determine the estimated number of residents deficient in Activities of Daily Living (ADLs). Residents were observed by the property manager and other staff members to make this assessment.

Implementation date

The project received approval for the SCP in August 1994 and the service coordinator began working in October 1994.

Initial activities

Among the service coordinator's first activities was contacting the local aging agency to find out what services were already available within the community. Because there already was a listing of service providers in the area, there was no need for the service coordinator to make an inventory of what was available. The service coordinator also had an informal discussion with the property manager to identify general areas of concern. The service coordinator does not think her duties include planning activities for the residents and therefore she has not done this. However, the service coordinator is interested in coordinating additional services that are currently not being provided. These include recruiting volunteers from area churches, providing transportation, and providing house cleaning services. The residents think the service coordinator is responsible for helping them with whatever problems they may have.

The property manager noted that the service coordinator's initial activities included meeting with the residents to announce her presence and finding out what service providers were available within the community.

The service coordinator does not make formal ADL assessments. She is not trained in this area and has no forms to assist in this process.

Service coordinator qualifications and duties

The service coordinator's education and training background consists of a bachelor's degree in finance. Her previous work experience includes managing a gift shop and working as a branch manager of a savings and loan. The service coordinator feels the networking skills she acquired in previous jobs can be used to interact with service providers and link residents to the services they need.

The service coordinator's strengths, as identified by the property manager, include her ability to work well with people, her tenacity, her genuine calling to serve and help people, and her skill and ability to network with outside service providers.

The service coordinator feels her primary responsibility is to keep residents living independently for as long as possible. She feels she can achieve this goal by establishing linkages with service providers and by educating residents on services that are available. The service coordinator spends most of her time helping residents arrange for transportation, working through home finance management issues, and arranging for meals.

Service coordinator status

The service coordinator works full-time, dividing her time between the two buildings in the complex. The service coordinator works approximately 19 hours a week at the building and 21 hours at the other building. The service coordinator does not have trouble splitting her time between the two buildings. According to the property manager, sharing the service coordinator between two buildings made it easier to find a qualified, full-time service coordinator rather than a part-time employee. There were not enough at-risk residents in one building to warrant a full-time service coordinator in each building.

The service coordinator does not have staff or volunteers that work exclusively with her, but she does receive assistance from the property manager, staff members, and residents in identifying residents who may need help. She feels that all the building staff have a genuine concern for the well-being of the residents and are knowledgeable about the aging process and the needs of older people.

Access to funds for Service Coordinator Program activities

The service coordinator does not have separate funds available solely to her for carrying out program activities. If additional funds are needed, the property manager is the only person with the authority to allocate them. However, because the service coordinator does not conduct any activities in which she needs additional funds, all of the SCP services are provided through established community-based programs that are funded through other sources. Administrative

costs for the service coordinator come from the overall administrative budget for the complex. The property manager has a separate fund available for other SCP costs, such as travel expenses.

Service coordinator training needs

The only training attended by the service coordinator was the service coordinator conference co-sponsored by HUD and the Administration on Aging, held in Baltimore, Maryland. She was aware of the HUD training requirements and plans to participate in additional training programs, including a conference with other service coordinators from within the State and a training session for service coordinators that will educate them on the HUD guidelines. The service coordinator also expressed a need for more training in the social worker aspects and medical (what the nurses do) components of the job. The property manager would like the service coordinator to receive training in the aging process and in communicating with the elderly.

Resident recruitment

Residents were first informed of the service coordinator's presence through the monthly newsletter. The service coordinator introduced herself by initiating one-on-one contacts with residents and also was introduced to residents at a general resident meeting. Now the service coordinator works with residents on an as-needed basis. She relies on them to approach her if they need any help. Another approach the service coordinator plans to use is creating her own section of the newsletter to notify residents of services available to them.

The service coordinator and the property manager said there were no problems getting the residents interested in the program. The residents mentioned that the service coordinator made her presence known by circulating fliers throughout the building. Other residents knew who the service coordinator was through her previous volunteer work within the complex. Residents said they felt comfortable approaching the service coordinator if they had a problem.

Resident assessments

The service coordinator has not completed any resident needs assessments. The service coordinator relies almost solely on residents contacting her when they have a problem. Although she does not feel comfortable pushing services on residents who have not requested them, she will observe the residents conducting their daily activities to see if residents are having any problems that could be alleviated through some available service. The administrative and maintenance staff also observe residents and inform the service coordinator of residents who are having problems.

Resident interactions

The service coordinator has met with nearly all the residents of the complex. She has already linked about 21 to 28 percent of the residents to services and is currently trying to link about 5 or 6 residents with services. She works with between 10 and 12 residents each week and feels that her workload is manageable. The service coordinator has not yet initiated any special activities to ensure resident input into the SCP.

The service coordinator has had a problem with only one resident not wanting a service that she has suggested. She handled this situation by speaking with the individual as a friend to gain the resident's trust. She continually offered the services to the individual until she agreed to try them. The residents were not aware of anyone who had declined services recommended by the service coordinator.

Services and equipment

Services that the service coordinator has initiated since starting her job at the complex include providing transportation, housekeeping services, food services, religious services, and implementing a prescription drug program with local drugstores to buy medicine at a quantity discount. All services and activities are aimed at all residents; however, she has found that the high-risk, elderly residents consume most of her time. The service coordinator plans to recruit a group of volunteers to provide transportation and housekeeping services as needed.

Residents mentioned the service coordinator helped them receive such services as housekeeping and home-delivered meals and arranged for them to receive eyeglasses through the Lions Club.

III. Description of Case Records

Resident case records consist of a single page that lists the resident's name and address; whether they need assistance of any type; services they are currently receiving; and the name of a contact person. Case records include brief notes concerning residents and service coordinator contact with service providers. No ADL assessments or monitoring plans are included in the residents' case records.

IV. Roadblocks to Program Implementation

The service coordinator is working with about half the residents (35) in some capacity and feels that her workload is manageable.

The service coordinator has had very few problems with the residents or with management in the implementation of the program. However, on a few occasions the property manager has approached the service coordinator when she thought a resident was becoming too dependent on the service coordinator.

The service coordinator has not had a problem with getting service providers to participate in the program, although she has had problems with some of them not providing the services in a timely manner. She has also had some difficulty determining the role of the local aging agency in the program. Specifically, she has tried to contact them a few times to attend some of their meetings but has not received any feedback from them.

V. Perceived Improvements and Resident Satisfaction

The service coordinator is satisfied with the help she has been able to provide to residents in solving their problems. She is particularly satisfied with the independence she is given in helping the residents. She likes the fact that she is solely responsible to the residents.

The property manager thinks the program has been very effective in coordinating services for residents who need them. She feels the relationships the service coordinator has developed with the residents have been beneficial to the residents. Specifically, she feels residents benefit mostly by knowing that there is someone available to them when they need any kind of help. Additionally, the program has eased her responsibility for the resident's well-being; therefore, she can concentrate on the management of the property.

Overall, residents have been very pleased with the SCP. Most residents indicated that they rarely meet with the service coordinator. However, residents said it was reassuring to know the service coordinator was there to help them or to just talk with them. They also think the program is helping them to live in the housing complex longer and more independently.

VI. Recommended Changes and Future Plans

Strategies to increase participation

No activities are currently planned to increase resident participation. The service coordinator is concerned about approaching residents and suggesting services. To allow residents to keep their sense of independence, she leaves it up to them to approach her if they have a problem. She feels all she should do is let residents know that she is available if they need help.

The residents could not think of any additional services that were needed. They were satisfied with the fact that the service coordinator is available when needed, and confident that she will link them with all necessary services.

Recommended changes

The service coordinator mentioned that there needed to be consistent guidelines regarding the responsibilities of the service coordinator. Specifically, the service coordinator noted receiving different messages from different groups at the Baltimore convention. The HUD representatives said the service coordinator was just responsible for linking residents to needed services. However, at the same conference, a group of experienced service coordinators said service coordinators should be more proactive in the way they run the program. To alleviate this problem, the service coordinator suggested HUD provide service coordinators with a model program to serve as a guide.

The property manager felt the program could be improved if HUD were more specific on how to fulfill the training requirements. The property manager also mentioned the need for more social work training for the service coordinator, and the need to build a network with other service coordinators throughout the country.

Case Study Report B-3

Introduction

A two-person team from KRA Corporation visited a newly established Service Coordinator Program (SCP) in June 1995. During the visit, interviews were held with the service coordinator, the property manager, and the service coordinator's supervisor. Three focus group discussions were held with 12 residents, and 10 resident case records were reviewed.

I. Description of Residents and Project

Development characteristics

Situated on 17 acres, this project includes 14 buildings. The two-story buildings have two units on the patio level and two units on the second level. The grounds are beautifully landscaped and the apartment buildings, which are situated in clusters, give the appearance of a townhouse complex. The project is hilly and scenic, winding around a main driveway that leads into various sections of the complex. There is designated parking for the residents and ample lighting within each section. The buildings include both one-bedroom studio units and two-bedroom units that have either a patio or a small porch area. The service coordinator's office is located in an activity building located in the center of the complex. This two-story building is centrally located within the complex and is accessible to all units. Also located in the building are the property manager's office, the residents' mailboxes, an activity room with tables and chairs and adjacent kitchen, and a meeting room. There is another meeting room on the lower-level that is accessible both from the inside and through patio doors from the common grounds. The lower level patio has several tables and chairs for sitting and a fountain facing the patio.

During the visit, the local Jaycees club, to which some residents belong, was hosting a meeting in the activity building. The meeting was well attended by both men and women, and members provided refreshments. From this group activity, it was apparent that some residents interact with the elderly from the local community.

The service coordinator's office is located on the second level of the building. The office is private, bright, and comfortable. To access the office, residents must climb a short flight of stairs. The service coordinator was aware that the location of the office poses access problems for some residents and compensated for this problem by meeting with residents on the main level and by visiting them in their apartments. For those residents who do not have physical handicaps or mobility problems, the office location is satisfactory.

The property manager and the service coordinator agreed that finding space for the service coordinator's office was the only planning problem that the complex posed. The space designated for the service coordinator was originally the property manager's office. When the SCP was funded, the property manager's office was moved to the entry level; the service coordinator took the second level office, which provided more privacy.

The service coordinator stated that the physical arrangement of the buildings helps to get the residents out of their apartments. They must leave their buildings to access their mailboxes, which are located in the central building. In addition, the extensive grounds on which the buildings are located make it necessary that residents move around the complex to get to the central building. Many residents have taken advantage of the large grassy area on the complex to plant gardens.

The property manager believes that the SCP is located at a unique complex whose residents are young, able, and feisty. They tend to aggressively pursue issues and challenges and are open to new ideas. They have initiated many of their own activities, including forming an artist's colony that has a water color group and drama group.

Public transportation is easily accessible to all residents because city buses makes four stops within the complex. This transportation is essential because the complex is located in a rural residential area with no stores nearby.

Resident characteristics

The complex houses 141 residents; residents in 10 of the units pay market rate. Residents are predominantly white (99 percent), elderly (92 percent), and female (77 percent). Eight percent are nonelderly persons with disabilities. Slightly over half (54 percent) of the elderly are well elderly, one quarter are at-risk, and 21 percent are frail elderly. The average age of the residents is 74 years old. Fifty-seven percent of resident households have incomes of less than \$10,000.

Previously available services

There were a limited number of project-based services available to residents of the building before the service coordinator was hired. These services included social and recreational activities sponsored by the tenant council and supportive services such as Meals on Wheels; Friendly Visitors; home health care; housekeeping services; and Volunteer Wheels, a local transportation service for health related appointments. A local senior center provided hearing aids, blood pressure checks, and services to some residents. Residents received public benefits that include food stamps, Medicaid/Medicare, and Supplemental Security Income (SSI).

According to the property manager, the services most needed by residents were in-home supportive services. The elderly residents also needed someone to explain things to and advocate for them; someone to attend to their emotional needs; and someone to assist them deal with loneliness.

The property manager, who has managed the building for 2 years, reported that she had not been involved in helping residents to obtain special equipment, supportive or health services, or organizing group services or activities. There was a part-time social worker from another complex, managed by the same housing management company, who maintained a resource file of available services. This resource file was shared with the service coordinator. The social worker, however, was hired under a separate contract and did not provide services to the residents at this complex.

II. Description of Program Operations

Organizational context of the Service Coordinator Program

The SCP is operated under the auspices of a local housing organization. Two churches formed a housing corporation and contracted with a local group to serve as the managing agent. The local housing corporation, which is located approximately 60 miles away, manages 26 properties. Of the 26 properties, 16 have HUD grants for service coordinators. The service coordinator for this project is shared with one of those 26 properties.

All employees are hired directly by the housing corporation. The management corporation is headed by a chief operating officer to whom the director of social services and the property managers for each property report. The service coordinator reports directly to the director of social services, although the day-to-day supervision is shared with the property manager. The property manager spends approximately one hour per week with the service coordinator. The director of social services supervises the service coordinator on clinical issues, while the property manager, who is on site daily, provides the general supervision.

The service coordinator functions independently, and both the director of social services and the property manager seem to be very supportive of her role. The property manager has referred residents to the service coordinator when intervention was needed. They both agreed that they work well together and "double team" when there is a problem. The property manager is an asset to the team because she also has a background in social work.

The service coordinator shares her ideas for SCP activities with the property manager, and they appear to have good rapport and to work as a team. The property manager reported that she does not get involved with the day-to-day program operations nor is she directly involved in planning SCP services and activities.

According to the property manager, having a service coordinator has decreased the amount of time she devotes to issues of resident services. The property manager noted that the service coordinator stepped in and took on some very hard problems. For example, some residents needed nursing home placement, requiring her to work with both local agencies and the families to reach difficult decisions.

External linkages

The service coordinator has used the services of the Older Adults Services for assistance with mental health assessments to confirm her own observations. There are no organized Professional Assessment Committees at this location. The Property Manager is on the board of the local Advisory Council on Aging, which has been involved in the program.

Application process

The primary purpose for applying for SCP funds was the large number of frail and borderline frail residents. Further, the complex had seen a turnover of residents who had aged in place and now required additional supportive services. The director of social services was the principal author of the grant application. The primary tool used to estimate ADLs was observations made by the property manager.

The chief operating officer, members of the board of directors, and the director of social services for the local housing management corporation were involved in planning the SCP. The local aging agency was involved in making salary estimates for the position and served as initial advisor for the SCP.

Implementation date

The application was approved in October 1994, and the service coordinator started work in December of that year.

Initial activities

The property manager was involved in the planning phase for the SCP. She determined the kinds of referrals appropriate for the program and educated residents about the SCP.

The service coordinator's initial activity was to begin outreach activities to the residents. Her outreach was coordinated with informing residents that the building was being converted to an individual meter system. This provided an ideal opportunity for the service coordinator to contact residents to explain what was to occur and, at the same time, meet with the residents in their home to informally discuss how they were doing.

Other start-up activities included reviewing several referrals from building staff concerning residents they believed needed her attention. She reviewed files, determined who was new, put an article in the newsletter, and attended a meeting of the social committee. The timing of her hire, in December, was especially convenient for meeting residents because several holiday parties were taking place. These events were very conducive to casual conversations with the residents. The service coordinator was able to meet many residents during the first month of her employment.

Service coordinator qualifications and duties

The service coordinator was hired after the position was advertised by the housing management corporation. The interviews were conducted by the director of social services and the property manager. Questions asked during the interview process concerned the interviewees' previous experiences directly related to the job responsibilities, experience working with the elderly, ideas about getting to know residents, establishing rapport and gaining their trust, experience with documentation and client assessments, and familiarity with community social services and senior resources.

The service coordinator had previously worked for a group home corporation, providing social services to persons with disabilities who were severely handicapped and developmentally disabled. She has a master's degree in counseling with some emphasis on working with persons with disabilities. She also has seven years of experience as a behavior specialist providing rehabilitation counseling and social work services.

The primary responsibilities of the service coordinator are to provide residents with social services that they need through referrals to the appropriate agencies. The service coordinator provides case management services as well as brokers for services. She commented that she will

either do this directly for the resident or provide them with the information for them to request services on their own. She spends approximately 60 percent of her time establishing linkages with service providers and 40 percent conducting assessments. The property manager stated that the service coordinator's strength lies in her ability to get residents to open up and talk.

Service coordinator status

The service coordinator has worked at the complex for 6 months. She works full-time (35 hours per week), spending 25 hours at this complex and 10 hours at another building.

Access to funds for Service Coordinator Program activities

The service coordinator has access to a fund for needed supplies. She has spent approximately \$100 for a telephone and answering machine for her office. There is a separate fund for training and transportation. The director of social services prepares the budget for the SCP and requests for funds must be submitted to her. The budget includes a line item for supplies but not for activities, which are disallowed by the HUD grant.

Service coordinator training needs

Since her hire, the service coordinator has received training on working with paranoid persons. According to the service coordinator, the housing management corporation provides a considerable amount of training and materials. Among the training tools used was a "Training Package for Administrators to Establish Procedures for Supervising and Working with a Service Coordinator." The material included information on the purpose of the service coordinator, supervising a service coordinator, annual HUD requirements, and other related issues. A manual also was provided to the service coordinator that contained information on available services and resources. In addition, service coordinators attend the housing corporation administrators' meetings.

Resident recruitment

Residents were first informed of the SCP by a written notice and through introductions at a complex meeting. From the service coordinator's perspective, there were initially some problems in getting residents interested in the SCP. Residents were suspicious. However, the service coordinator successfully combated this initial resistance by being open, honest, and friendly. She chose her wording carefully when talking with residents; instead of saying she was there to help with problems, she used the word "concerns." In addition, she made it clear that she was separate from the building management staff. In general, the service coordinator believes that residents are grateful to have someone to assist them.

The property manager felt there were no problems in getting the residents interested in the program and that the residents' reactions have been very positive. She thought the personal visits to residents which were coordinated with discussions of the changeover to individual electrical meters helped that process.

The service coordinator has continued outreach to the residents about the SCP. She visited residents and left her card on their doorstep. She also has written articles for the newsletter on

the availability of a food pantry at local churches and the need for volunteers for the transportation service.

The property manager stated that she informs new residents of the availability of the service coordinator when they sign their lease. At least one new resident interviewed stated that she had not received this information, although she met with the service coordinator shortly after moving in.

Resident assessments

To perform resident assessments, the service coordinator sees residents in their own apartments and observes them performing various activities. For those residents requesting services, she looks at all aspects of the residents' life during the in-home assessment.

Resident interactions

The service coordinator has met with 52 residents and is currently working with 50 residents. Of those residents, she is currently trying to link 14 residents to services and has already linked approximately 40 to services. Typically, the service coordinator meets with 1 to 15 residents per week.

To ensure resident input into the SCP, the service coordinator has been listening to each resident individually about their needs. She asks residents what they would like the service coordinator to do. The service coordinator obtains input this way because her supervisor requested that she not attend the residents' council meetings.

When a resident declines a service that the service coordinator thinks would help them, she tries to use humor. The service coordinator doesn't lecture them or tell them what to do because she knows that approach will not work. Her most successful approach has been to use social and casual contacts which are less threatening. She also gives residents the option of being referred to an outside professional.

The service coordinator uses different approaches in working with the elderly and the non-elderly persons with disabilities. For example, when working with a 40 year-old stroke victim, she communicates by introducing one idea at a time. She also writes down things for this resident and makes sure what she tells her is clear and simple.

In general, residents' reaction to the service coordinator has been positive. Those who have met with her are telling other residents about the program. The service coordinator successfully used contacts to discuss community services and utility applications for rebates. There only have been two or three residents who, from the property manager's perspective, appear to need services who have not wanted to meet with the service coordinator. She thought their resistance had to do with their mental health problems.

During focus groups and interviews, residents reported that they first met the service coordinator in a variety of ways. Methods included word of mouth, the resident newspaper, the property manager, personal introductions during meetings, or by being visited in their apartment.

Services and equipment

The services currently available, as reported by residents, include: housekeeping, referrals for medical services, transportation resources, Medicare, Medicaid, Social Security, assistance with billing errors, and a senior citizens center. Many residents were receiving these services prior to the establishment of the SCP. Nonetheless, the service coordinator has been very helpful in linking residents to services they needed and in helping them to solve their problems. She has been there to advocate for them when they could not handle a problem without assistance. Her involvement has also helped the property manager to focus more time on her management responsibilities.

The service coordinator is planning to work with residents in the area of dealing with grief. The complex had a resident die suddenly, which upset many residents. To help them deal with their loss, the service coordinator organized a memorial service. She is also in the process of working with a mental health agency in a nearby town to link residents to a mental health program. The program will provide transportation.

III. Description of Case Records

Each of the resident case records included an intake form which the service coordinator completes on each resident during their initial meeting. The form was used to record basic demographic information about the resident and to assess resident needs. The intake form includes a comment section where the coordinator included written notes on the extent to which a resident was impaired. For example, in several of the records reviewed, the service coordinator had written that a limited assessment of the resident was completed and the resident had no problem with ADLs. No formal ADL assessment form was included in the case records.

IV. Roadblocks to Program Implementation

The service coordinator reported that her work load is manageable but that she could always use more time to assist residents. The property manager concurred that the service coordinator's workload is about right.

There were no internal barriers which affected the implementation of the SCP. The service coordinator works in an environment where she has support from her supervisor and the property manager. The property manager was involved in the hiring decision and has a background in social work, so she understands the needs of the residents and the role of the service coordinator. She feels good about having the service coordinator, and they appear to have a good relationship. The property manager feels that there is a need for more networking between the service coordinator and the local service providers. Overall, the property manager is very satisfied with the service coordinator who has had to deal with some rather tough resident problems.

The only problem that has occurred has been with reduced funding for programs. There have been State cuts resulting in county cuts that have affected the amount of services available to residents. Adult Protective Services in the county now has only two workers; consequently, the

service coordinator must beg to get services. There have been times when, due to budget cuts, workers have said they would not come to the project.

V. Perceived Improvements and Resident Satisfaction

The service coordinator stated that what she likes best about the SCP is the contact she has with residents, particularly the individual problem-solving. Another aspect of the program that she values is having a private office. The privacy is helpful in getting residents to talk to her confidentially. She also likes being there for the residents.

Being able to work a few hours each day provides continuity for residents. This schedule enables the service coordinator to educate the community about her role and the living environment of the elderly residents.

The greatest benefit to residents has been having access to information and having an advocate for getting needed services. The service coordinator has been able to facilitate the residents' access to services and has been someone who can listen to them. Residents feel that they are cared about. It is helpful that residents have an individual to serve as a buffer between them and the service provider. The service coordinator is teaching residents to advocate for themselves.

The housing management corporation is trying to create a network within each of its projects so that the social work and case management skills of each service coordinator can be maximized at all projects. The goal is to have projects share their skills among facilities.

VI. Recommended Changes and Future Plans

Strategies to increase participation

The service coordinator uses the newsletter to inform residents about new services and to remind them of her services. In addition, she plans on going to the senior center to encourage resident participation.

Recommended changes

The service coordinator feels that there should be more flexibility in HUD regulations that would allow service coordinators to plan social events because they are important in supporting the elderly. Being able to plan and arrange activities outside the complex would help those residents who don't get out much.

Although some residents were completely satisfied with the SCP, one resident thought that the service coordinator's office should be more accessible. The stairs which residents encounter to get to her office present an access barrier for some residents. Another suggestion was that notices informing new residents of the availability of the service coordinator, along with her telephone number, should be routinely distributed.

Another issue is that HUD requires management and monitoring plans "as appropriate" without defining the term. This project has found that these plans are useful only on long-term, extensive cases. Such a plan is helpful with residents that have multiple problems as a means

to review the overall picture several times per year. Other or more detailed review and documentation would be repetitive and cumbersome. Staff also mentioned that the HUD State Office staff are not aware of the SCP.

Case Study Report B-4

Introduction

A two-person team from KRA Corporation visited a newly established Service Coordinator Program (SCP) in June 1995. Also in attendance was a HUD staff member. During the visit, the service coordinator and the property manager were interviewed. In addition, a separate interview was conducted with representatives from both the national organization that owns the complex and the corporation that employs the service coordinator. Three focus groups were held with 13 residents, and 10 resident case records were reviewed.

I. Description of Residents and Project

Development characteristics

The project is a small, high-rise building with 60 units. It is located in an older residential community, consisting mostly of single-family homes, in a large city. The surrounding area is somewhat neglected and dilapidated. Within half a mile of the project are commercial establishments, such as fast-food restaurants and a grocery store. The building is relatively new and is in much better shape than the houses that surround it. There is a parking lot for residents and employees of the project. The parking lot and the back portion of the building are surrounded by an iron security fence. The contained back yard is rather small and has seats available for residents to use. The project grounds (the lawn and surrounding shrubbery) are kept in very good condition and look somewhat out of place when compared to the surrounding area. The front door to the project is locked and is watched by either part-time resident staff members during the day or security guards at night. Throughout the building, residents were seen mingling in common areas including community rooms that are used for various resident activities.

Resident characteristics

There are a total of 64 residents in the complex. Fifty-two percent of the residents are female. The project contains both elderly and non-elderly persons with disabilities with 58 of the 60 households classified as elderly and the remaining two households being occupied by non-elderly persons with disabilities. The racial makeup of the complex is 100 percent African-American, which reflects the racial makeup of the surrounding residential area. The majority of the residents are 62 years old or over (89 percent). Sixteen percent of the residents are 76 years old or older. The physical abilities of the residents suggest that about 69 percent of the residents are classified as well elderly, 9 percent are considered at-risk, and about 17 percent are considered to be frail elderly. The remaining 5 percent are considered to be non-elderly persons with disabilities. A large majority of the households have annual income levels below \$10,000 (85 percent).

Previously available services

Because the service coordinator previously worked as a case manager for an affiliated division of the managing national organization, she knew all the services available to residents from various service providers in the community. Home-based services, such as homemaker services (light housekeeping and laundry assistance), home delivered meals, and the community care program (a department of aging program designed to prevent premature placement of older adults in nursing homes through homemaker, adult day care, and senior companion services), were available to residents before the SCP was implemented. The service coordinator mentioned that public transportation was available but not widely used. When she first came to the complex, the service coordinator thought the greatest unmet service need within the complex was homemaker services.

Residents indicated that prior to the implementation of the SCP they would talk to the property manager if they needed some type of assistance. They also indicated that the property manager did not always have the time to help them. Prior to the implementation of the program, the property manager spent about 20 to 25 hours a week performing service coordinator-type duties for the residents. This assistance was primarily in the form of coordinating transportation and help filling out forms for medical programs such as Medicare. The property manager mentioned private transportation as a service that was needed but was not available to the residents.

II. Description of Program Implementation

Organizational context of the Service Coordinator Program

The property manager, who has been at the project since November 1993, is employed by a national organization. The service coordinator, who is a contract employee, employed by a management corporation affiliated with the national organization, has been at the project since August 1994. The service coordinator is directly supervised by the program director of the affiliated national organization and does not report directly to the property manager.

The property manager was not very involved in the implementation or establishment of the SCP. The service coordinator, on occasion, discusses resident issues with the property manager but making referrals and linking residents with services is strictly left to the service coordinator.

Now that the service coordinator is in place, the property manager has more time to spend addressing her management tasks. However, because the service coordinator is part-time, the property manager still spends a portion of her time helping residents but only about a fourth of the time she previously spent on service coordinator type tasks. The property manager spends about 10 hours a week in consultation with the service coordinator (primarily discussing the residents and suggesting ideas), but the sole responsibility of the service coordinator program and the day-to-day activities of the program are left in the hands of the service coordinator.

The service coordinator finds the property manager very supportive of her activities and enjoys the level of freedom and trust she has to run the program the way she thinks is best.

External linkages

The service coordinator works with the local Department on Aging in a structured system that links residents to needed services. The service coordinator does not contact service provider vendors herself. Instead, she first notifies the Department on Aging, who then contacts a non-profit social service organization, who performs an assessment on the resident. Once an assessment is made, the proper service provider vendor is notified.

On occasion, the service coordinator uses other outside professionals to perform assessments of residents' physical abilities. These assessments are usually conducted at the request of residents' doctors. The service coordinator also has available a separate specialist who conducts Alzheimer's disease assessments.

Application process

The property manager was not involved in the planning and implementation of the program. The contract manager at the national organization worked with the board of directors in filling out and submitting the application to HUD. The major reason for applying for the service coordinator position was to reduce the amount of time the property manager spent coordinating services so she could concentrate on her property manager responsibilities. Activities of daily living (ADL) assessments were not conducted as part of the application process.

Implementation date

Approval of the project's application was received in June, 1994. The service coordinator began working at the project in September 1994.

Initial activities

The service coordinator did not set a formal timetable but did prepare an informal schedule as to when certain tasks should be accomplished. The most time consuming task in setting up the program was informally conducting individual needs assessments of all residents. However, before observations were made, the service coordinator spent a lot of time putting together forms (recording sheets) that followed HUD guidelines.

Both the Department on Aging and the management corporation were involved in getting the program started. Because the service coordinator had to go through the Department on Aging for all community-based help, the agency was instrumental in the establishment of the program. The management corporation also had information and services that were essential in getting the program started.

Residents primarily became aware of the service coordinator's presence and were informed of initial program activities through either the service coordinator's personal assessment sessions or at a resident group meeting. The residents saw the service coordinator as a social worker and thought that her job was to help those who needed help.

Service coordinator qualifications and duties

The service coordinator's educational background includes a master's degree in social services and health sciences. She has practical social work experience from her job as a social service director for two nursing homes. The service coordinator also worked as a social worker/caseworker for a non-profit social service organization a year prior to her becoming the service coordinator.

The management corporation said that in addition to having the educational background needed, the service coordinator's experience with senior citizens and her willingness to help others made her suitable for the position.

The service coordinator feels that her primary duty is to keep residents living independently in their apartment for as long as possible. She feels she does this best by educating residents on service availability and establishing the necessary linkages with service providers in the area.

Service coordinator status

The service coordinator is a part-time contract employee. She divides her time between this project and another area project, working 17 ½ hours a week at this project and another 20 hours a week at the other project.

The service coordinator receives some support from other project staff members such as senior aides (residents who work in the building), other part-time staff members, and security staff. They advise her of any residents they have noticed who are having problems. However, she doesn't think most of the staff understand the aging process well because they are quick to say a resident has Alzheimer's disease when they notice a problem. To rectify this, the service coordinator is trying to get the local hospital to provide a workshop on this topic for staff and residents.

Access to funds for Service Coordinator Program activities

According to the property manager, both she and the service coordinator have the authority to allocate funds for program activities such as birthday parties. The service coordinator has access to the property manager's petty cash fund when money is needed. She is allowed to use up to \$300 from this fund. However, not much money has been spent on program activities. Supplies used by the service coordinator are included in her program budget.

Service coordinator training needs

The service coordinator has participated in training sponsored by her contracting employer. She has received training in the form of classes, speakers, and films dealing with topics such as making resident assessments, dealing with death, working with the terminally ill, and Alzheimer's disease. The service coordinator plans to attend a workshop on the aging process. She is aware of the HUD guidelines that require service coordinators to receive training within one year of being hired.

There are other training programs the service coordinator would like to attend but can't because she is restricted by her budget. Most of this additional training would involve transportation costs and training fees that she cannot afford.

The property manager was aware of training received by the service coordinator in dementia and Alzheimer's disease. She was also aware that the service coordinator required additional training in these areas.

Resident recruitment

Residents were first introduced to the service coordinator at a resident meeting. Subsequently, the service coordinator met individually with all residents to review their ADLs. The service coordinator feels all residents are aware of her presence, and there has been no need to conduct further outreach.

Resident assessments

The informal assessments of resident needs were done on a one-on-one basis in the resident's apartment. The residents are also observed during their daily activities to determine if there is a problem or if services are needed. During the service coordinator's initial assessments, she asked residents a series of questions and determined from their responses whether or not the resident was in need of some available service.

Resident interactions

The service coordinator estimates that she is currently working in some capacity with about 70 percent of the residents. There is a core group of about 6 or 7 residents that she works with on a constant basis. She has also linked about 75 percent of the residents with the MAC (Mothers' and Children's Commodities) program and another 36 percent to home-based services like homemakers and meals on wheels. On a typical day, the service coordinator meets with between 10 and 15 residents.

Most residents see the service coordinator on an as-needed basis. They receive assistance with such tasks as filling out medical insurance and circuit breaker (an energy assistance program) paperwork. Residents also felt she was of benefit to them because she is available to talk with them whenever they have a problem.

To encourage resident input, the service coordinator attends monthly resident meetings and initiates casual conversation with residents she meets in the halls.

Because this complex houses both elderly and non-elderly persons with disabilities, the service coordinator uses different approaches to address their distinct needs. The primary difference between the two types of residents is in the services they require. For example, the non-elderly persons with disabilities are more interested in job training services. The elderly are more interested in health-related services.

Overall, the residents' reactions to the service coordinator have been favorable. The residents are particularly impressed with the MAC program, which now includes seniors, instituted by the

service coordinator. With this program, residents receive grocery items, such as sugar, flour, and canned goods on a monthly basis.

There have been three or four occasions in which the service coordinator has suggested services that residents declined to take advantage of. In one particular case, she suggested homemaker and meals on wheels services to a resident who flatly refused. The service coordinator thinks residents decline because they don't realize they need a service or are confused. When this happens, she tries to encourage them to participate by suggesting they just try the service out for a little while. She is usually able to get them to comply by using this tactic.

Services and equipment

The MAC program implemented by the service coordinator was mentioned by residents as being a much needed and very beneficial program. Originally designed to provide mothers and children with grocery items, the program is now available to senior citizens. The service coordinator helped residents apply for this service by helping them fill out the application forms. About 75 percent of the residents are currently participating in this program. Additionally, the service coordinator spends a lot of time helping residents fill out forms for services such as public aid, social security, energy assistance, and QMB (Quality Medical Benefits), which is a medical program affiliated with a Health Maintenance Organization (HMO). Other services that have been made available to residents since the start of the SCP include meals on wheels, homemaker services, monthly group blood pressure screenings, transportation services, and medical supplies.

III. Description of Case Records

All resident case records include a resident assessment form. This form includes demographic information, emergency information, medical information, and three pages of questions and check lists used to estimate the residents' ADLs and other needs. All case records include notes which recorded contacts with the residents. However, there are no case management or monitoring plans.

IV. Roadblocks to Program Implementation

The service coordinator feels her work load is manageable; however, she has found it difficult splitting her time between two buildings. She feels she would be able to keep busy if she worked full-time only at the one complex.

Residents mentioned a few incidents where services were suggested to a resident who chose not to receive them. Residents said this happens occasionally because some of the residents are ashamed to admit that they need help. Initially, residents felt this way about the MAC program saying they did not want to participate. However, once a few residents began receiving food through the program, other residents felt more comfortable participating.

The service coordinator has not had difficulty getting service providers to participate in the program; however, she is frustrated by the length of time it takes for some providers to address residents' needs. Since the city's case workers have such large case loads, they don't react as quickly as other organizations at which the service coordinator served as a case worker. This

problem is partially due to the fact that she does not contact service provider vendors directly when a resident needs a service. Instead, the city requires that she first contact the Department on Aging, which then goes to a non-profit organization to do an assessment, which then contacts the required service provider vendor based on this assessment.

V. Perceived Improvements and Resident Satisfaction

The service coordinator feels her ability to help residents resolve problems, as well as linking them to needed services, are the most beneficial aspects of the program. The property manager feels there has been an improvement in the residents' well-being because they are now assessed individually, and problems are addressed before they become a crisis. Before the program, residents were seen only on an as-needed basis and usually only after a problem had become serious.

Residents appreciated the service coordinator anticipating their needs and identifying services before they asked for them.

VI. Recommended Changes and Future Plans

Future plans include following up on individual assessments to determine whether any changes have occurred in the residents' needs.

Strategies to increase participation

Because most residents are healthy and therefore relatively independent, the service coordinator has found it difficult to get many residents interested in group activities. The service coordinator has planned activities like bingo and cookouts, but attendance has not been significant. Usually about a quarter of the residents participate in these activities. To increase participation, the service coordinator plans to distribute surveys to determine what additional services or activities the residents would like.

There is an activity coordinator at the building that comes every Friday and alternate Thursdays. She is responsible for planning birthday parties and other resident activities. Other group activities the activity coordinator has planned, such as trips to talk shows, have had similar low attendance patterns.

Recommended changes

The service coordinator would like HUD to develop suggested forms for assessment and resident contact. The service coordinator spent a lot of time developing the forms she is using to meet HUD guidelines.

Case Study Report

B-5

Introduction

A two-person team from KRA Corporation visited a newly established Service Coordinator Program (SCP) in June 1995. During the visit, interviews were held with the service coordinator and the property manager. Three focus group discussions were held with 12 residents, and 10 resident case records were reviewed.

I. Description of Residents and Project

Development characteristics

The complex consists of several single-story buildings, with a total of 40 apartments. Ten apartments are efficiencies, the other 30 are one-bedroom units. Only four units are handicapped accessible. Each apartment opens to a small front lawn and the parking lot and has a small patio in the back that leads to a grassy common area. In addition, there is a building housing the club room, mailboxes, the laundry facility, and the manager's office. The property manager and the service coordinator share an office with one desk and one phone line. They both work part-time so they are not often in the office at the same time. Both staff members interviewed indicated that sharing an office hindered program activities. They also noted that because the office is located across from the mailboxes and laundry facilities, the service coordinator has daily contact with residents. The club room is used for bingo, devotions, and other activities. It has a television, tables and chairs, a small library, and bulletin boards with notices for the residents. This building also has a large screened-in porch overlooking an area with picnic tables. While at the complex, we observed little resident interaction other than residents checking their mail and playing bingo.

The complex is in a small and somewhat isolated town. There is no bus stop nearby. The town built a sidewalk leading from the complex to the closest shopping area which provided residents direct access from the complex. The shopping area consists of a Walmart, a grocery store, and a fast food restaurant. Residents mentioned that it is a long walk for them, especially in the summer. Across the driveway is a day care center. However, according to the service coordinator, there is no interaction between residents and the children at the day care center. The neighborhood appears very safe. There are no evident security measures at the complex.

The property is owned by the county council on aging (CCA). The property is managed by a private management corporation, which is responsible for the maintenance of the property. The property manager works for the management corporation and is on-site 25 hours a week. She has been at the complex for almost two years. The service coordinator works directly for the CCA and is on-site 20 hours a week.

Resident characteristics

Of the 42 residents, 88 percent are female. The majority of the residents are white (88 percent) and 12 percent are African-American. All residents are elderly, and 71 percent are at-risk or frail. Eighty-six percent of households have incomes less than \$10,000.

Previously available services

Prior to the implementation of the SCP, the property manager spent close to half of her 25 hour work week making referrals and linking residents to service providers in the community. At that time, home health care, community long-term care, county sponsored transportation, and meals on wheels were available to residents. Adult day care was available to residents in the community.

The greatest unmet needs, prior to the SCP, were one-on-one contact with residents, general companionship, and monitoring of residents' general welfare. The service coordinator noted that many residents cannot read and need assistance with forms, including those for Medicare/Medicaid, and needed assistance making doctor appointments.

ii. Description of Program Implementation

Organizational context of the Service Coordinator Program

The SCP is operated by the owner of the complex, the CCA, which is located about 15 miles away. The CCA contracts out for the management and maintenance of the complex. The property manager reports directly to the management corporation. The service coordinator is supervised by the executive director of the CCA who is located in the CCA offices. The CCA supervisor shows considerable interest in the SCP. The funds for project management and the SCP are kept separate.

The service coordinator has primary responsibility for all SCP activities, although she and the property manager often plan program activities together. The property manager refers all service-oriented issues to the service coordinator who implements activities, such as fire safety demonstrations, discussions of Medicaid eligibility, and social dinners. This allows the property manager considerably more time to carry out project management tasks. The property manager is very supportive of the program and remains actively involved with the residents. She continues to implement all social activities, including bingo, devotions, and the monthly calendar.

External linkages

The CCA, in addition to owning the complex and providing the service coordinator, has a community senior center (approximately 15 miles away) and provides home-delivered meals and ombudsman services. As an employee of the CCA, the service coordinator is closely linked to the local social service community and is aware of the services available to the elderly in the community.

Application process

The executive director of the CCA and another staff member were responsible for applying for SCP funding; the service coordinator was not involved. The property manager provided input on the needs of the residents, based on her knowledge of residents, and where program emphasis should be placed. The property manager relied on observation to estimate the number of frail and at-risk elderly. In addition, she identifies any physical problems that might cause residents to need assistance.

Implementation date

Staff were not aware of the date that the complex received HUD approval for the SCP. The service coordinator began work in December 1994.

Initial activities

The service coordinator established and followed a schedule for planning and implementing the SCP. The property manager sent an introductory letter to residents about the SCP. The service coordinator held a tea in the club room to introduce herself to the residents; 18 residents attended. The service coordinator personally visited the apartments of each resident who did not attend the tea to introduce herself as service coordinator and explain her role. Much of the service coordinator's time has been spent getting to know residents and establishing rapport with them. Initial service delivery activities included completing resident assessments, arranging for home-delivered meals, placing residents on the community long-term care waiting list, and assisting residents with Medicaid paperwork. The Medicaid supervisor was helpful in initial program activities, much of which included Medicaid eligibility. The service coordinator has also arranged for speakers at the complex. Topics have included Medicaid and fire prevention.

All of the residents in the focus groups indicated that they were aware of the service coordinator. Several mentioned the introductory letter that was distributed. Some of the residents said they were introduced to the service coordinator at the tea; others met her in their apartments. One new resident said that the service coordinator visited her in her apartment shortly after she moved in.

Service coordinator qualifications and duties

The service coordinator has a bachelor's degree in social work and is a licensed social worker. She has completed two graduate-level courses in counseling and development. She spent some time working at a nursing home before working for 3 years as a child abuse and neglect investigator for the county department of social services.

The property manager was not involved in the selection process and was not aware of the service coordinator's qualifications. She noted that the service coordinator's strengths are that she is personable and caring; she has excellent communication skills; and she often does things that are outside the scope of her job.

The service coordinator's primary duties include conducting risk assessments, monitoring those at-risk, providing companionship to residents, linking residents with home-delivered meals, and

speaking to families not fulfilling their responsibilities to their parent(s). Due to transportation service limitations in the area, the service coordinator also assists residents in grocery shopping, picking up prescriptions, and other errands. Every resident in the focus groups mentioned that the service coordinator picked up and delivered the commodities given out by the county. Without this assistance, some residents would be unable, or would find it extremely difficult, to obtain the commodities.

Service coordinator status

The service coordinator is an employee of the CCA, the owner of the complex, and works 20 hours per week at the complex and part-time at the local senior center. A similar complex is being built in another town, about 15 miles away, where she will also serve as a service coordinator once it is completed.

Access to funds for Service Coordinator Program activities

The service coordinator does not have access to a petty cash fund for SCP activities. The service coordinator requests all program funds from the CCA.

Service coordinator training needs

The service coordinator attended a workshop on depression among the elderly that was sponsored by a local mental health agency. She expressed a need for training on issues related to the elderly, especially elderly socialization. In order to maintain her social work license, the service coordinator is required to receive 20 accredited hours of training or course work per year. The property manager knew that the service coordinator had attended a training session but did not know the content or whether additional training was planned.

Resident recruitment

The service coordinator, who has only been at the complex for a few months, has met with all 42 residents. The program is too new for her to have initiated any additional recruitment strategies. The service coordinator indicated that there are no problems in getting residents interested in the SCP, although the property manager mentioned a hesitancy on the part of residents. She thinks that older people tend to question new things.

Resident assessments

The service coordinator assesses residents in their own apartments and observes them performing various activities. Residents are not referred to outside professionals for an assessment. The service coordinator uses a combination of forms to complete resident assessments. Although not very detailed, the "priority assessment" form uses a numerical scale to rank the individual as high, medium, or low priority for services.

Resident interactions

The service coordinator has ongoing daily contact with many of the residents. She meets with 10 to 12 residents each week. Her office is located across from the mail boxes, allowing for frequent, informal interactions with the residents. She meets with residents in their apartments when she needs privacy.

Residents reported that they met with the service coordinator frequently. Some residents meet with her daily because she is also at the senior center, while others see her at least once a month. Most residents reported that the service coordinator checks on how they are doing every week or as needed. In addition, she calls homebound residents if she does not have time to visit.

The service coordinator has linked 12 residents to services and is currently trying to link an additional 4 residents to services. Approximately five residents have declined recommended services according to the service coordinator. She feels it is because they do not want to give up their independence. The property manager mentioned that one resident refused services because she was moved into the complex against her will and is very resentful.

The service coordinator found that continued positive encouragement and accentuating the positive are successful approaches to dealing with residents who decline needed services. When dealing with one resident, she found suggesting mental health services or Alcoholics Anonymous to be unsuccessful.

The property manager gets involved when residents decline needed services. She found the most successful approach to be a show of concern regarding their decisions. She does not force services on residents and feels that it is important to let residents make their own decisions.

Based on case record reviews, many of the service coordinator contacts with residents have been for benefits assistance or assessments. The service coordinator has also provided counseling and made several service referrals including cleaning, meals on wheels, community long-term care, and transportation.

Services and equipment

The service coordinator is planning to establish a residents' council in the complex. In addition, she is trying to become more involved in discharge planning for hospitalized residents by requesting that hospital social workers notify her when a resident is about to be discharged. She welcomes suggestions from the residents and has followed up on several of them, including bringing in a speaker to discuss fire safety.

III. Description of Case Records

The service coordinator keeps a case record on each resident. The records include a socioeconomic form, a priority assessment form, and records of contacts with residents. There is no case management plan or monitoring plan in the records.

IV. Roadblocks to Program Implementation

The service coordinator did not indicate any problems with her workload. The property manager feels that the service coordinator could handle more responsibilities if her hours were increased.

Program barriers

The property manager and the service coordinator work well together. However, the service coordinator does not have her own office or her own telephone line.

There is limited transportation in the community—there is only one taxi that serves the town and there is no bus service. Residents mentioned that county-sponsored transportation needs to be arranged far in advance and often will not take them to their doctors' offices because they are outside the service area. The service coordinator mentioned that many residents cannot afford needed housekeeping services.

The service coordinator has not encountered any problems working with local service providers.

V. Perceived Improvements and Resident Satisfaction

Staff and residents mentioned the rapport that has been established between the service coordinator and residents. The property manager and the service coordinator feel the complex has benefited from the amount of time the property manager can now spend on other activities. The property manager said the SCP makes the complex more effective and complete in meeting residents' needs.

Residents have a positive reaction to the SCP. One resident said the service coordinator "does everything for us that she can." Another said, "I don't know what we would do without her." Although aware of the service coordinator, several residents in the focus groups indicated that they had not received many services themselves but knew of other residents who had. Many residents mentioned the service coordinator picking up their commodities, providing assistance with medical bills and other paperwork, and arranging for transportation and Meals on Wheels.

VI. Recommended Changes and Future Plans

Strategies to increase participation

It is too early in the implementation of the SCP to identify strategies to increase participation. At this time, resident participation does not appear to be an issue. The service coordinator plans to continue visiting and encouraging residents to use available supportive services and also to attend socialization activities such as outings and speakers' presentations. Residents who had not yet needed the services of the service coordinator reported that they would go to her if they needed assistance in the future.

Recommended changes

The service coordinator needs a private office to meet with residents and complete her paperwork. The program would benefit from standardized intake and assessment forms. Some residents suggested that with more hours, the service coordinator could visit more residents, spend more time with them, and conduct follow-up activities. Residents need improved access to transportation.

Case Study Report B-6

Introduction

A staff member from KRA Corporation visited a newly established Service Coordinator Program (SCP) in July 1995. During the visit, interviews were held with the service coordinator and the property manager. Three focus group discussions were held with 15 residents, and 10 resident case records were reviewed.

I. Description of Residents and Project

Development characteristics

The complex consists of 80 units located in a three-level, high-rise building. There are 74 one-bedroom and 6 two-bedroom apartments. The building is owned by a private corporation and is managed by a local property management company. The property manager has managed the complex for 2 years.

The building is located in a residential neighborhood that appears to be safe. The grounds surrounding the building are landscaped, and there are benches in front. There is a parking lot adjacent to the building which appeared to be well lit. The front entrance to the building is locked, and there is a surveillance camera monitoring the front-door. There is a buzzer and intercom system in the small main entrance foyer that visitors must use to call residents. The mail boxes and elevators are located just off the foyer. Bulletin boards with a monthly calendar of events were posted on each floor. There were no notices of neighborhood activities posted.

There is an activity room with tables and chairs on each floor of the building. The first floor activity room has a television and access to a patio area. Also located on the first floor is a large laundry room with washers, dryers, and a large table with chairs. During the visit, very little resident activity or social interaction were observed.

The service coordinator's office is located just off the main lobby and is clearly visible through a glass door. The office is private and is adjacent to the property manager's office. For additional privacy when meeting with residents, the service coordinator can close the doors that adjoin the two offices. Both the service coordinator and the property manager have answering machines to record messages when they are out of the office.

The building is located off a commercial strip of mixed-use buildings and residential homes in a small city. There are no grocery or variety stores within walking distance of the building. Also, there is no convenient access to public transportation. In order to reach the nearest bus stop, building residents must walk up a steep hill to the main street. Residents continuously have requested that the Department of Transportation install a bus stop nearer to the building's entrance; however, the requests have been consistently denied. Appeals to the mayor's office have also been unsuccessful.

Both the service coordinator and the property manager agreed that there was nothing about the building that caused problems in planning and implementing the SCP. The service coordinator believes that the building's small size enabled her to establish better contact with residents. She also noted that there is less resident turnover in a smaller building than in larger buildings.

Resident characteristics

Of the building's 80 residents for whom information was available, there are 58 female and 22 male residents. All of the residents are white, non-Hispanic. The project's residents are primarily elderly (98 percent); the others are non-elderly persons with disabilities. The elderly residents are 62 percent well elderly, 21 percent at-risk elderly, and 16 percent frail. Forty-seven percent of the residents are between 71 and 75 years of age and 39 percent are between 75 and 84 years of age. Six percent of resident households had an annual income of less than \$5,000; 67 percent had incomes less than \$10,000.

Previously available services

The property manager, service coordinator, and residents concurred that, except for having regularly scheduled speakers, many of the services available to residents were available prior to the service coordinator's hire. The service coordinator reported that she conducted an inventory of services when she first came to the building and determined that the following services were being provided: case management services from local providers, community center activities, day care for the elderly, friendly visiting, presentations by the Department of Elder Affairs on health services, home health care, home-delivered meals, weekly rosary reading with clergy from a local church, and a monthly mass service. Among the public benefits they received were food stamps, Medicaid, Social Security, and Supplemental Security Income (SSI). Transportation resources were available to residents for health appointments, and group rides were arranged by the resident association to various outings, including biweekly trips to the local grocery store. Residents confirmed that they were receiving many services arranged or provided outside of the building before the service coordinator was hired.

Before the service coordinator was hired, the property manager was involved with helping residents to the extent that her time permitted—typically less than 10 hours per week. She was not able to assist residents with completing paperwork for benefits or assist in arranging other services. However, she had a telephone number for emergency services and had arranged for flu-shots to be given at the building.

The property manager thought the services most needed by residents before the program started were: assistance with filling out forms, referrals to appropriate services, and follow-up to determine if the appropriate services had been received. The service coordinator conducted a brief survey of residents and determined that the greatest unmet service need was that they wanted on-site blood pressure screening, and that they were extremely dissatisfied with the State prescription assistance program for the elderly that pays 60 percent of the cost. There was widespread dissatisfaction with this program because it offers no coverage for arthritis, ulcers, or depression.

II. Description of Program Implementation

Organizational context of the Service Coordinator Program

The SCP is operated by a private for-profit corporation that has a property management subsidiary that manages the building. The property management company employs a director of social services to whom the service coordinator reports. The director of social services meets weekly with the service coordinator and service coordinators for three other properties managed by the corporation to review cases, network, and share information. The service coordinator believes that she is allowed to function independently in her role.

The property manager has limited involvement in planning program services and activities. There is a tenant association within the building that assumes this responsibility. There are floor captains on each floor who work closely with the association. Responsibility for day-to-day SCP operations falls upon the service coordinator who in turn confers with her immediate supervisor, the director of social services. When the property manager feels that intervention on behalf of a resident is needed, she refers the resident to the service coordinator.

According to the property manager, having a service coordinator at the complex has taken a "load off her shoulders." She feels confident that the service coordinator can handle the social service end, while she devotes her time to management duties. Typically, she spends approximately one hour per week talking with the service coordinator when she has questions about residents. Now that there is a service coordinator on board, the property manager has experienced a decrease in the amount of time she devotes to resident issues. The property manager spends approximately 1 day a month discussing program activities with the service coordinator and does not get involved in planning SCP services and activities. The property manager coordinates scheduling with the service coordinator if she is planning a presentation for building residents. For example, four times a year the property manager brings in a security program for residents.

The property manager believes that the service coordinator has the most say in deciding on which procedures to use for contacting and recruiting residents for the SCP and which service providers to contact. They coordinate on setting program priorities, and she and the tenant association collaborate on what community activities to promote. The property manager clearly supports the SCP and is definitely pleased that the services of the service coordinator are available for residents.

External linkages

Based on input from the service coordinator, many community agencies have been very responsive to her request for presenters or information. The local aging agency is very involved with the SCP, providing speakers, taking self-abuse and elder abuse reports, and responding to any requests that the service coordinator presents. In addition, the SCP has relied on the services of outside professionals to conduct on-site geriatric assessments. Staff from two local hospitals have been very responsive to all telephone requests made by the service coordinator. After conducting the assessment, they provide the service coordinator with a written report on their findings.

Application process

The complex decided to apply for service coordinator funding because there was a definite need to have someone at the complex on a regular basis to assist the residents. The residents were so proud, they tended to stay in their apartments and not ask for help even when they needed it.

The former Director of Social Services for the property management company, who left shortly after the service coordinator was hired for this project, was involved in writing the grant application. Neither the service coordinator nor the property manager were involved during the application and planning phase for the SCP grant. They were certain, however, that neither the local aging agency or outside professionals were involved in the planning and that there were no problems encountered in working with community service providers or organizations. The property manager's role was limited to providing information on the number of elderly and persons with disabilities and the extent to which they needed assistance with activities of daily living.

The property manager relied heavily on observation and her general knowledge of residents who requested regular care-giver services to determine the number of frail and at-risk elderly. Telephone calls from relatives who were concerned about a particular resident also assisted in resident assessments.

At the time the SCP application was being prepared, the service coordinator was already functioning as service coordinator for three other projects not funded by HUD. The service coordinator agreed to take on this project for an additional eight hours per week. The service coordinator developed the SCP based on her experience as service coordinator for other projects.

Implementation date

HUD approved the project's SCP application in December 1994. The service coordinator started work in January 1995.

Initial activities

The first SCP activity undertaken was a coffee hour to informally introduce residents to the service coordinator; 35 residents attended. The property manager introduced the service coordinator who then told residents about the SCP and her role.

The service coordinator contacted local community providers including the Department of Elder Affairs, the local senior citizens center, and staff responsible for residents receiving Social Security Income (SSI). The SSI contact person was particularly helpful by providing the service coordinator with the names of residents who were her clients. The service coordinator contacted those residents first to determine if they needed other services.

The property manager recalled that one of the service coordinator's first activities was to schedule a series of programs focused on issues of health and safety. The service coordinator found that these programs allowed her to meet many residents and talk with them informally.

Service coordinator qualifications and duties

The service coordinator was hired 6 years ago by the management company as a service coordinator for three State-funded housing projects for the elderly. This project included in this study is her only HUD-funded project. Prior to joining this company, she worked at a senior center for five years as an outreach worker. She does not have a college degree but has taken courses in gerontology at the State college.

The service coordinator's primary responsibilities are to establish linkages with service providers, develop a directory of services, and educate residents on service availability. She stated that she is available to respond to any needs of the elderly; arrange long-term care, if needed; and assist residents in applying for benefits such as food stamps.

Service coordinator status

The service coordinator, who works part-time (eight hours per week) at the project, also serves as service coordinator at two other projects, that are not funded by HUD. In her role as service coordinator for the past six months, she has worked with building staff and some elderly resident volunteers. They have assisted her by distributing newsletters and flyers, as well as setting up the activity room for presentations by outside speakers. She works with the property manager and the maintenance person who is very aware of how residents are doing. For example, if the maintenance person observes a resident's trash building up, he alerts the service coordinator so that she can check up on them. The property manager concurred that maintenance staff have been very helpful to the service coordinator because of their contact with all residents.

The property manager did not feel that having a part-time service coordinator had caused problems for the program. She has found that the service coordinator's main strengths are that she is very thorough in checking out residents' needs and shows a high level of compassion for residents. Another strength she brings is her knowledge of services available for residents.

The majority of the residents who participated in the focus groups knew who the service coordinator was, and most first met her at the coffee hour. All residents were very clear about why the service coordinator was at the building even if they had not been assisted by her. Residents stated that the service coordinator's role was to assist those residents who needed help by linking them to available services as well as to give them someone to talk to about their problems.

The service coordinator feels that other building staff understand the aging process, services for older persons and people with disabilities, and her role.

Access to funds for Service Coordinator Program activities

When the service coordinator needs funds to carry out program activities, she goes to the property manager who maintains a petty cash fund of \$100. The service coordinator can spend up to that amount for supplies or activity-related expenses without authorization.

Service coordinator training needs

The service coordinator reported that she has received training since she was hired for the SCP. The management corporation holds a monthly meeting where speakers are brought in. She also attended a local mental health seminar and conferences sponsored by a local hospital and the Department of Elder Affairs and attended the HUD service coordinator conference in Baltimore, Maryland. The service coordinator reported needing computer training.

Resident recruitment

Both the service coordinator and the property manager agreed that there were no problems in getting the residents interested in the SCP. Several methods were used to announce the SCP, including an article in the tenant association newsletter, posting notices on each floor and in the laundry room, word-of-mouth, and hosting a coffee hour. Residents mentioned each of these methods during focus group discussions. The coffee hour was highly effective in introducing the SCP and the service coordinator to residents.

Since the initial recruitment activities, the service coordinator has not had to re-notify residents about the program. The service coordinator has found residents very receptive to her; in fact, they now come to her freely. There are perhaps one or two residents who may need services who have not asked for them. She believes they are not interested in the SCP primarily because they want their families to continue to do what is needed for them. Other reasons may be that they are trying to maintain their independence or that their pride keeps them from expressing an interest in receiving services. The property manager shares this opinion and also thought that residents fear they may be evicted from their apartments because they are in need of supportive services.

Resident assessments

The service coordinator does not conduct a formal assessment of a resident's need for services. She primarily relies upon her observations of and conversations with residents. She sees residents both in her office and in their apartments where she casually observes them performing various activities. The service coordinator reported that when meeting with a resident for the first time, she sits and talks with them. Generally, during the course of the conversation, she finds out what she needs to know in order to assess their needs. When limitations are observed, she notes that information on a file card which she maintains on each resident.

Resident interactions

The service coordinator is currently working with approximately 45 residents and has met with approximately 45 residents (almost 50 percent). At the time of the visit, she was not trying to link any residents to services; however, she has linked approximately 22 residents (23 percent) to services. She could not estimate how many residents she meets with each week because that number varies from week to week.

A majority of the focus group participants had not met with the service coordinator because they did not have any issues that needed attention. One resident meets with the service coordinator

at least once a week, another had met with her two to three times for services. Nine of the residents reported that the service coordinator had visited them in their apartments.

When a resident declines a service that the service coordinator thinks would help them, she simply explains that she is available to them. This has been her only approach, with both the elderly and the non-elderly persons with disabilities, which has been successful. The property manager has not gotten involved with residents who decline a service she thinks would help them.

No formal activities have been initiated by the property manager to ensure resident input into the SCP. She receives regular input from the officers in the resident association and feels confident that any resident issue would be conveyed to her by the officers. The service coordinator and the property manager concurred that, overall, residents' reactions to the SCP have been positive. The service coordinator believes they see her as somebody they can vent to rather than having to talk to management directly.

Services and equipment

The service coordinator planned numerous activities directed at all of the residents. In response to residents' requests, she arranged to bring a grocer to the building once a week because there is not a variety store within walking distance of the complex. She also arranged to have the postman bring stamps to sell once a month. The residents praised the service coordinator for arranging these conveniences for them. Other additional services they reported receiving include blood pressure, depression, and glaucoma screenings; memory testing; speakers on issues such as diabetes and other health areas; safety; and preparation of living wills. In addition, residents have been assisted in applying for public benefits such as Medicaid and food stamps; obtaining in-home services such as meals-on-wheels and homemaker services; and receiving assistance with recertification for benefits. The service coordinator is planning a presentation on the Medicaid Fraud Program, 55 Alive, and changes in the state prescription program.

III. Description of Case Records

The service coordinator maintains an index card system to record information about cases. This system is used by the property management corporation. The information on the cards includes demographic information and has separate sections for recording information about family composition, sources of income, disability/medical information, and emergency contact information. Other information included the nature of the service activity and comments concerning observations and follow-up activities. Contacts noted in the case records were initiated by both parties and included referrals for services, follow-up visits, reminder visits about services, and benefits application assistance. All contacts are recorded by date on these cards.

There is no assessment form used. The service coordinator notes on the index card when a resident is frail or has physical limitations.

IV. Roadblocks to Program Implementation

The service coordinator and the property manager feel that the service coordinator's present workload is manageable. The property manager noted that the service coordinator works above the call of duty to accomplish everything that needs to be done.

Program barriers

Implementation of the SCP has been smooth. There have not been any tensions or "turf problems" with the property manager, and residents have been very receptive to the service coordinator. The property manager is very satisfied with the progress the service coordinator has made in implementing the SCP and appears to be very supportive of her work. Residents also expressed a high level of satisfaction.

No external barriers were identified. Service providers have been very helpful by serving as a resource to the SCP and as providers and presenters. The service coordinator reported that she has established a primary contact person at all of the departments she works with. The Department of Elder Affairs and the local Senior Center have been particularly active in the SCP.

The absence of a bus stop near the complex poses an access problem for residents that has not been resolved. This may be a problem that cannot be resolved easily. To get around this barrier, the service coordinator has brought grocery shopping and postal services on-site at least once a week.

V. Perceived Improvements and Resident Satisfaction

The service coordinator stated that what she likes best about the SCP is the interaction with residents and that residents in need have confidence that the service coordinator can help. The property manager likes sharing responsibility for the residents' needs and indicated that the service coordinator has an ability to "figure things out" and a skill in helping residents in need.

The service coordinator noted that bringing in speakers who have increased resident awareness about specific services or issues has been a particularly successful feature of the SCP. Having films with actors that they recognize, who are functioning well with medical conditions, has been beneficial to residents. The property manager feels that having someone to complete forms that residents do not understand has been particularly useful. The SCP's greatest benefit to residents, according to the service coordinator, has been having a liaison between residents and management. Further, she has relieved the property manager of having to deal with residents' problems. The property manager described the largest benefit to residents as having someone to talk to, whatever their needs may be.

Focus group participants did not think anything about the SCP needed to be improved. The service coordinator has brought them services they previously did not have, such as on-site speakers; additional health screening opportunities, particularly blood pressure; assistance with filling out forms and recertification; and the convenience of being able to shop for food and other items at the complex.

VI. Recommended Changes and Future Plans

Strategies to increase participation

There have not been problems with resident participation. Meetings with outside speakers were well attended by residents. Activities that have encouraged more community involvement have included coordinating transportation services to any senior center they chose to go to for lunch, and having transportation to doctor's appointments.

Recommended changes

All residents stated that the service coordinator's job is very necessary. If they have problems, they have someone on-site to go to. Even though some residents have not needed her services, they are glad she is there, should they need her. They believe she is able to address any of their problems. Three residents stated that they planned to meet with the service coordinator in the future about arranging services.

There were no changes in HUD's requirements or the way the program operates that either the service coordinator or the property manager would like to make. The service coordinator would like to see a city bus come into the complex although this cannot be arranged. There should also be increased transportation services available to residents.

Case Study Report B-7

Introduction

A study team member from KRA Corporation visited a newly established Service Coordinator Program (SCP) in July 1995. During the visit, the service coordinator and the property manager were interviewed. In addition, three focus group discussions with 14 residents were held, and 10 resident case files were reviewed.

I. Description of Residents and Project

Development characteristics

The high-rise building is located in a retirement "village" owned by a not-for-profit, religious organization. It is a self-contained retirement community incorporating religious, health, and social functions. The village includes 437 apartments, 16 duplexes, 2 nursing homes, a theater, library, health center, exercise center, beauty parlor, snack shop, senior center, and day care/preschool center for employees' children. The building has 104 apartments—38 two-bedroom apartments and 66 one-bedroom apartments. Only 25 percent of the village apartments are HUD-subsidized. The remainder are market-rate senior apartments. The apartment building visited for the SCP study is subsidized by HUD, as are several of the garden apartments. There do not appear to be any problems related to having subsidized and non-subsidized residents within the same village.

The village is on 138 acres of land with well laid out streets and sidewalks. Several residents use golf carts to get around the village. There are picnic benches throughout the village and several by the pond that is across the street from the building. Transportation is available to the mall and grocery stores. The bus comes to the front door of the building. A noon-time meal is available in the dining room. It is prepared and delivered by the County Area Agency on Aging. The front door is locked at night, and there is 24-hour security available through the village switchboard.

The service coordinator mentioned that the apartments are small with little storage space. This has been problematic because there is nowhere for residents to store medical supplies. Although the apartments were not designed to be handicapped accessible, the service coordinator said that there are two wheelchair-bound residents who do not have trouble maneuvering in their apartments. There is a continuum of care available, ranging from independent living to nursing home care. The village is currently in the process of becoming licensed for in-home health care.

The property manager has worked for the village for 17 years and has been the building manager for 9 years. Previously, she was the secretary for the village maintenance department. This SCP is very different from other SCPs in the evaluation. It is a medical nursing model. Also, the SCP operates much like any professional "fee for service" operation. The service coordinator bills the residents for the time provided. The building reimburses the service coordinator for the time spent coordinating services.

Resident characteristics

There are 119 residents in the building, 76 percent of whom are women. Nearly all of the households are white and non-Hispanic. All households are elderly and about three quarters are over 76 years old; 41 percent are at-risk and 29 percent are frail. Thirty five percent of the households have annual incomes between \$5,000 and \$10,000.

Previously available services

The village has a health center, staffed by one full-time nurse and two part-time nurses, that provides health services, including blood pressure screens and routine health care, to the entire village. In addition, the village senior center provides numerous activities and services. Other services available to residents prior to the SCP included housekeeping, congregate meals, meals on wheels, and care giver services. An inventory of available services was completed prior to implementing the SCP. The service coordinator continues to update this list of available services and providers. The property manager spent approximately 10 hours per week on resident services. Prior to the SCP, residents were most in need of transportation and meal services.

II. Description of Program Implementation

Organizational context of the Service Coordinator Program

The village's department of apartment services administers the SCP. The SCP is staffed by the lead service coordinator and two part-time nurses. The director of the department is the lead service coordinator, and both she and the property manager report directly to the village executive director. The service coordinator's offices are located in the health center of the administrative building; the property manager's offices are in the apartment building. The service coordinator bills the building for the units of service provided. Fees collected go toward the department of apartment services' operating budget.

The service coordinator and property manager hold formal weekly meetings and are in frequent contact by telephone. They also meet monthly as part of the Professional Assessment Committee (PAC). The property manager spends approximately 10 hours per week working with the service coordinator.

So far, the SCP has not changed the property manager's resident responsibilities. She remains responsible for planning and implementing social activities, such as bingo and movies, and for checking on residents daily. Many residents continue to contact the property manager with their needs. As the SCP evolves, the property manager envisions having more time to carry out management tasks. The service coordinator has primary responsibility for the SCP, but the property manager has considerable input. The property manager remains actively involved with residents and will recommend services or refer residents to the SCP and will call the service coordinator if a resident needs assistance. Both the service coordinator and property manager are involved in planning activities, depending on who identifies a need. The service coordinator functions independently and has a weekly meeting with the executive director to keep her updated. The property manager is very supportive of the SCP activities.

External linkages

SCP staff have good relationships with several service agencies. The service coordinator serves on several boards and committees in the community. The village (through the service coordinator) has established a PAC. Members include the service coordinator, the two part-time nurses, the property manager, and the village pastor. The PAC meets monthly to go over assessments completed by SCP staff. The County Agency on Aging provides services such as meals and caretakers to building residents. Residents are referred to local agencies for physical assessments as part of the process for applying for services.

Application process

The service coordinator was the natural choice for this job because of her position within the village (i.e., director of apartment services) and her knowledge of residents and the community. The property manager wrote the grant application and was responsible for the initial planning stages. She received input from the service coordinator regarding residents' needs. The service coordinator wrote the SCP policies and procedures based on HUD regulations. She also designed the billing system for the SCP.

The primary impetus for applying for funding was the aging-in-place that the building's residents were experiencing. In addition, building staff were seeing more and more residents who wanted to stay in their apartments rather than go to a nursing home.

Implementation date

The building received HUD notice of approval in September 1994 and implemented the SCP in October 1994.

Initial activities

The service coordinator did not establish a schedule for implementing the SCP. Initial activities included educating residents about the SCP and the new roles of the village nurses. The nurses initiated assessments on frail residents. The county department of senior services was helpful with initial activities and service provision.

Service coordinator qualifications and duties

The service coordinator has been at the village for 12 years. As director of apartment services, she has been responsible for coordinating services and providing case management services throughout the village. Previously, she was a nurse at one of the village nursing homes. The service coordinator is a registered nurse with a bachelor's degree in nursing and has taken several gerontology courses also. The other SCP staff are also registered nurses. The service coordinator's strength is her ability to make residents feel at ease.

The service coordinator's primary responsibilities include monitoring other nurses' paperwork, preparing internal billing, conducting resident visits, supervising employees, and completing case plans.

Service coordinator status

The service coordinator works full-time at the village, but only part-time on the SCP. The SCP operates like a contracting entity and bills accordingly. The SCP staff may bill the building up to 80 hours per month for services and activities provided. If necessary, the department of apartment services will donate the cost of providing additional SCP services. The service coordinator also provides case management services to residents in the garden apartments.

Two part-time nurses do the majority of the hands-on work with residents, including assessments, medical charting, and monitoring. The nurses are usually the initial contact for the SCP with residents. They try to keep the same residents on their caseloads to maintain continuity. Attempts are made to match the nurses to residents based on personality. If a nurse meets resistance with a resident, the service coordinator may step in. Occasionally, a change in personality or approach will influence residents.

The building staff (maintenance person, housekeeper, and property manager) work indirectly with the service coordinator by providing input based on their observations and contact with residents. Building staff appear to have a good understanding of the aging process.

Access to funds for Service Coordinator Program activities

The SCP bills the building for assessments, home visits, and support group activities on a monthly basis. First year start-up costs are \$1,000. Funding for the project comes from the general budget. The property manager has a budget for the building but seeks approval from the executive director for most purchases.

Service coordinator training needs

In June, the service coordinator attended a HUD-sponsored service coordinator training session in Iowa that was attended by a representative from HUD Headquarters. She has also attended training on geriatrics and several in-house training on resident abuse, safety, and other topics. The service coordinator is aware of HUD's training requirements and would like additional training on HUD requirements and suggested policies and procedures.

Resident recruitment

The service coordinator encountered no problems getting the residents interested in the SCP because they were already familiar with the village nurses, and the property manager is very supportive of the program. Residents were informed of the SCP through a residents' council meeting, monthly floor meetings, and written notices. Additionally, staff have been discussing the SCP one-on-one with residents. Frequently, staff will use routine blood pressure screens as a means of establishing contact with residents and familiarizing them with the service coordination concept. However, residents in focus groups did not appear aware of the SCP and spoke only of the health functions of SCP staff. Residents perceive the SCP staff as health care providers since they are trained nurses. Residents may still view the service coordinator in her previous roles and not understand the difference in the service coordinator role. Staff said they would continue to work on making this distinction clearer to residents. Residents said they would go to the property manager when they needed assistance.

Resident assessments

Residents are seen in their own apartments by the SCP staff and residents are observed performing various activities. The PAC Assessment Guide (developed by the service coordinator) is used to assess residents' physical and mental functioning. The assessment is made with any resident that staff feel are in need of services. The assessments are repeated on a quarterly basis, or more frequently if deemed necessary. The assessments are reviewed by the PAC monthly.

Resident interactions

The SCP currently serves 30 residents, and the service coordinator had met with 44 residents. The SCP staff are trying to link 15-18 residents to services but first must complete a formal assessment with them. Thirty residents have already been linked to services. Approximately 15 residents are seen by SCP staff each week. Contact with residents is typically in their apartment and, usually, includes a blood pressure screen. Many residents are monitored on a weekly or monthly basis for health and/or general welfare reasons.

The SCP staff solicit suggestions from residents when they meet with them one-on-one. The village administration has conducted resident focus groups to solicit input. The service coordinator is planning to attend residents' council meetings and might distribute a questionnaire to enlist additional input from residents. The property manager attends the monthly resident council meetings and the monthly floor meetings.

Residents have reacted positively to the SCP, according to staff. There have not been many complaints about services received. Residents have benefitted from the additional one-on-one contact. Many residents have been surprised to learn of all the services available in the community. The SCP has been responsible for making residents more aware of available services rather than creating new services.

Residents in focus groups had positive reactions to the village nurses, but were not clear about the existence of and their satisfaction with the SCP.

The most successful approaches to dealing with residents who decline needed services have been to suggest another service that will alleviate the problem or to get the family involved. Most residents who have declined services have done so out of a need for independence and a fear of moving one step closer to a nursing home.

Services and equipment

New activities that have been initiated by the service coordinator for residents include a diabetic support group, a visually impaired support group, a lifeline program, and monthly educational notices in residents' mailboxes. The service coordinator is considering implementing resident coffee hours to educate residents on the SCP and available services. The service coordinator broadcasts health education programs on the village TV station.

III. Description of Case Records

Case records are maintained for all residents having contact with SCP staff. These are primarily medical in nature. All contacts with residents are recorded. The case records include basic demographic information, emergency contacts, health problems, medications, confidential emergency information, progress notes, and PAC assessments. Monitoring plans for all residents are kept on a master calendar. Linkages to social services and other providers are not well documented. There are no information release consent forms in the records because a new one must be signed each time the provider exchanges information with an outside agency. The standardized forms and procedures used for the SCP are used for all village residents.

IV. Roadblocks to Program Implementation

The service coordinator does not feel that her workload is manageable. She is considering expanding her department and hiring additional staff. The establishment of the PAC expanded her workload considerably. She now has to spend additional time attending meetings, developing forms and procedures, and conducting informal assessments of residents. The property manager noted that as residents become more familiar with the SCP, their need for services appears to be increasing.

Program barriers

There are no internal "turf" issues. The service coordinator and the property manager have a good working relationship. The property manager is very satisfied with the implementation of the SCP. There have been no problems working with community service providers. The service coordinator sits on many local boards and is familiar with most community service providers. She tries to keep in contact with other providers and goes out of her way to help them so that they will "owe" her when she needs their help. The service coordinator noted that there are not enough personal care givers in the community.

V. Perceived Improvements and Resident Satisfaction

The service coordinator thinks the program is good because it provides a support network to residents and has been able to set up services for residents as increased aging-in-place occurs. Residents are not threatened by the SCP because there is no new staff involved. The greatest benefits to residents have been the increased awareness about available services and their ability to stay in their apartments longer. The greatest benefit to the development has been the alleviation of pressure that several residents have felt because they have been providing assistance to their neighbors. An innovation in this SCP is the constant coverage that is provided by having three SCP staff members—there is no gap in service coordination if somebody takes vacation or sick leave. The property manager mentioned the peace of mind that residents experience in knowing that there is somebody to call if they need help. Previously, according to the property manager, residents were scared that they would have to go to a nursing home if they asked for help. The property manager commented that the building is very friendly and good at making residents feel that this is their home and not an institution. Residents are very satisfied with services they have received.

VI. Recommended Changes and Future Plans

Strategies to increase participation

The service coordinator is planning on attending monthly residents' council meetings and holding resident coffee hours to increase resident participation. Residents are very involved in community volunteer activities, so the service coordinator does not feel a need to focus on this area.

Recommended changes

The service coordinator would like more start-up information from HUD, including information on HUD requirements, policies, and procedures. She suggested the creation and distribution of an initial start-up packet. The property manager had no suggestions for SCP improvement. There is a need for additional care-givers for residents, but there is a shortage in the community. Residents would like increased meal service on weekends and assistance with figuring out their bills.

Case Study Report B-8

Introduction

A staff member from KRA Corporation visited a newly established Service Coordinator Program (SCP) in July 1995. During the visit, interviews were held with the service coordinator and a representative from the service coordinator program management company in lieu of the property manager (this position was vacant). The management company representative also is a service coordinator and serves as the service coordinator's supervisor. In addition, two focus groups were held with a total of eight residents, and eight resident case records were reviewed.

I. Description of Residents and Project

Development characteristics

The project, located in a small town, is situated across the street from the senior center and meal site. The project is roughly one block from one of the main streets that runs through town. Grocery stores and restaurants are available nearby. There is no taxi or bus service in the community.

The complex is composed of 21 efficiency and one-bedroom units in 3 single-story buildings. One building contains a laundry facility and an office shared by the service coordinator and the property manager when they are at the project. There are no community rooms or designated outdoor areas available to the residents for social activities. There is a large parking lot for residents at the project. An undeveloped, vacant tree-lined lot is next to the parking area.

Resident characteristics

Of the twenty residents who reside at the complex, 16 of them are female. Seventeen are white and three are Native American/Alaskan Native; none are Hispanic. Half of the residents are between the ages of 66 and 70 years old; only four residents are 76 years old or older. Most elderly residents are considered well elderly. All but one household have incomes less than \$10,000.

Previously available services

Few services were available to residents prior to the SCP. Some residents used the senior center and senior meal site (located across the street from the project) and a few used in-home or transportation services. The greatest needs residents have are for sliding scale dental and eye care services.

II. Description of Program Implementation

Organizational context of the Service Coordinator Program

The complex is owned by a large organization, but day-to-day operations of the complex are handled by a management company. For this project, the management company employs a part-time property manager and the service coordinator. The head of the management company works as a staff member for the organization that owns the complex.

Given that the complex is small, both the service coordinator and the property manager are part-time and are at the project on different days. At the time of the visit, the complex did not have a property manager. Senior management company staff, such as the service coordinator's supervisor and the management company director, were very involved with the SCP. The service coordinator reports directly to the director of the management company.

Interviews with management company staff and the service coordinator indicated that the previous property manager had little to no interaction with the service coordinator and did not plan any SCP activities or services. The property manager was primarily responsible for collecting rents and did not discuss residents' service needs.

The service coordinator reports to the director of the management company but works more closely with another service coordinator on the management company staff. The supervisory service coordinator has the primary responsibility for the program and makes most of the program decisions. The supervisor spends about 8 hours a week supervising the service coordinator. Both the supervisor and the management company director make decisions about the SCP.

According to the supervisor, the service coordinator has the most say in deciding procedures for contacting and recruiting residents for service coordinator services; deciding which service providers to contact; and deciding what community activities to promote or setting program priorities.

The service coordinator felt that the management company director had the most say in planning the program activities. The service coordinator also believed that for some program decisions the supervisor needed approval from the management company director. The director is viewed as being very involved with the program. The service coordinator believes her supervisor is supportive of the activities she is conducting.

External linkages

The Area Agency on Aging (AAA) was indirectly involved with planning the SCP. A representative of the AAA is a member of the board of directors of the complex. The board of directors and management company planned the program. There is no formal relationship with the AAA program or disabilities council at the present time.

Facilitating access to services is a priority of the service coordinator. She visits with local agencies and leaves a business card. Relationships to date with local agencies have been good, and the service coordinator has not encountered any agencies that were difficult to work with.

Application process

The management company staff planned and applied for service coordinator funding. The director of the management company was the primary player involved in initiating the service coordinator application process and program. HUD area office staff encouraged the management company to apply for funding. The management company then contacted the property manager to ask about the number of residents that were frail or at-risk. The manager based her estimate on general observations of the residents. No outside agencies such as AAA or agencies serving persons with disabilities were involved during the application process.

Implementation date

The project received notification of funding in April 1994. They did not receive signed documents from HUD until November 1994. Staff at the management company elected not to implement the program until the Housing Assistance Payment agreement was signed. The service coordinator began working in mid-January 1995.

Initial activities

The service coordinator's first activities were to develop a letter introducing herself and explaining what a service coordinator does. A list of services that residents might need was also developed. Then, she went to each unit, handed out the letter and list of services, and introduced herself to the residents.

Service coordinator qualifications and duties

The service coordinator previously worked as the property manager for two other buildings managed by the management company. The service coordinator was viewed as having good "people skills" and seemed a "natural" for the role. Her management experience was viewed as important.

The service coordinator has had one year of college. Her additional qualifications come from the hands-on experience she gained as a property manager. The service coordinator reported that she was involved with providing information and referral to residents as a property manager. The service coordinator's strengths are her ability to deal with people, talk with them, and work with tenants, including those who do not get along with others.

The service coordinator views her primary duties as establishing linkages with service providers and learning about available services. She also reported she spent time setting up an office in her home. She could use the property manager's office at the housing development but chooses not to because residents would then perceive her as management and, thus, not discuss their service needs. The service coordinator provides residents with phone numbers and information about services and agencies; they are expected to make contacts themselves. The service coordinator tries to arrange for providers who are willing to serve the residents, such as locating providers who offer low-cost eye care.

Service coordinator status

The service coordinator has been at the complex for 6 months. The service coordinator does not have any other staff who work with her at the complex. The service coordinator works with one other service coordinator, who functions as her supervisor.

The service coordinator works about 12 hours a week and is available at the project one day a week. The service coordinator works at two other projects that are in different communities.

Access to funds for Service Coordinator Program activities

Staff from the management company indicated there were no funds available for program activities.

Service coordinator training needs

The service coordinator and the management company staff were aware of HUD training requirements, but they reported that it was difficult to find appropriate training. They were concerned that they would not be able to meet them within the one-year time period specified by HUD. They contacted a local aging agency to see if that agency could assist them with training.

The service coordinator has received informal training from her supervisor and has received training on issues such as how to deal with tenants, determine needs, how to work with the impaired, deafness, the aging process, and an "up and running" workshop. Additional training topics that would be useful are those related to the HUD requirements and core topics. Training that focused on other programs, such as Medicaid, and legal issues associated with the SCP, were mentioned specifically.

Resident recruitment

Residents reported that they first met the service coordinator at a tenant meeting when the management company staff introduced the service coordinator to them. They also reported that the service coordinator came by each person's apartment to talk to them following the meeting. The management company held a resident meeting where they introduced the new service coordinator approximately two months after the service coordinator started.

The service coordinator tries to visit each resident once a week, but she cannot always do this. The service coordinator reported that she has focused more on learning about available services because she is not as familiar with the services in this community as with others that she serves.

Resident assessments

The service coordinator meets with each resident in the resident's apartment. Sometimes residents are engaged in an activity that allows the service coordinator to observe them; in most cases the service coordinator and the resident "sit and talk." Although all residents were contacted, the service coordinator has not set up a file for each resident. Therefore, ADL deficiencies or assessments are not documented for all residents. Should the resident require a

formal assessment, the service coordinator would provide information about organizations that conduct assessments to the resident. The resident would then contact one of the organizations.

Resident interactions

The service coordinator reported that she currently is working with eight residents and that she has met with 21 of them. The service coordinator has linked eight residents to services and is trying to link five more to services. However, because the types of services they needed were determined as "insignificant" by the service coordinator, she did not complete the paperwork on these activities. The service coordinator indicated she meets with approximately 10 residents each week. According to residents, she coordinated such services as home maintenance, eye doctor and dentist appointments, and a nutrition program.

Residents reported they met with the service coordinator "every time she is there" or once a week. They also said the service coordinator was good about letting them know when she would and would not be at the project. They felt free to call her when she wasn't there and knew they could call her "collect" since the service coordinator's home office was outside the local telephone calling area. None of the residents in the focus group reported declining services that the service coordinator offered. The residents indicated that the service coordinator was there to help get them services and to check out things they need, physically and medically. One resident said the service coordinator's job was to act as a go-between for residents and service providers.

The management company staff have not developed nor do they use any specific approaches to ensure resident input into the program. The service coordinator, through her regular visits, tries to determine resident reactions and suggestions.

The management company representative indicated that three or four residents had declined services or had not wanted to meet with the service coordinator. The reasons given for not using services was that the residents didn't follow through or that they were uncomfortable with the services offered. Management staff and the service coordinator do not intervene when residents refuse a service. They believe residents have the right to refuse a service and that they should not pressure them to use a service.

Staff reported that some residents were confused by the program (because they did not understand the service coordinator's job) but that a core group of residents liked the program.

Services and equipment

The service coordinator is trying to find a clinic that will serve residents with eye problems; she also reported that some residents need equipment. Because of the lack of a community room, no activities at the project, or activities directed to all residents, are being planned.

III. Description of Case Records

The service coordinator has set up records for 8 of the 20 residents. Staff developed forms to correspond to the HUD reporting requirements. The forms contained in the files included an intake, screening, and referral form; formal case management plan form; informal service plan;

referral form; abuse/violation response form; monitoring and agency follow-up form; quarterly monitoring plan and follow-up form (long-term progress notes); case termination form; meeting notes; and calendar of events. The forms were adapted from a State Medicaid form. The records did not contain any demographic information. The records contain a brief activities of daily living (ADL) assessment that is designed to determine whether the resident needs assistance or has assistance with any ADLs.

Resident case record notes indicated that residents asked the service coordinator for assistance of various types, including help locating exercise equipment, a job for a teenaged child, housekeeping, eyeglasses, socialization/senior center activities, and companionship. The service coordinator typically researched various service providers and provided telephone numbers, agency information, or local resources that residents could contact. When the service coordinator followed up with residents, in many instances, they had not contacted the resources she had given them.

IV. Roadblocks to Program Implementation

The service coordinator and the management staff believe the service coordinator's workload is manageable. Although the service coordinator drives some distance to reach the three projects she serves, she considers the traveling to be part of the workload.

Program barriers

The service coordinator reported that the long drives between projects is a problem. Also, the simultaneous start-up of all three projects caused some initial problems. The supervisor felt it would take time to implement the SCP because it was new; however, the supervisor is very satisfied with the service coordinator's progress.

Project staff cited the lack of common areas as a barrier to program implementation.

V. Perceived Improvements and Resident Satisfaction

The residents felt the service coordinator was very easy to talk to, kept them in touch with services that were available, had a good personality, and that the service coordinator was "really nice and they really liked her." They also said she was a good listener, kept things confidential, was good for morale, and was good at getting them help. They felt they had better access to services and felt more secure. Services the residents mentioned the service coordinator had helped them with included nutrition programs, eye exams and glasses, dentists, and housekeeping. They appeared satisfied with the service coordinator's help and the services they received.

Staff liked the fact that the complex was small and that residents were able to develop a relationship with the service coordinator so readily and that the service helps the tenants. The fact that the service coordinator can provide assistance fairly quickly and provide things for them has worked well.

The greatest benefit to the development is that the SCP makes the complex attractive to residents even though other elderly housing developments have nicer physical facilities (but no similar service coordinator program).

The service coordinator said it would be helpful if she had a private office separate from the "management" office because residents associate the office with management issues. Residents often focus on management problems when they meet with the service coordinator in this office. Residents also reported that the service coordinator needs an office.

VI. Recommended Changes and Future Plans

Residents believe the service coordinator's job is necessary and that the service coordinator could help them obtain services in the future. They expect to meet with the service coordinator in the future and would use her for "anything" they needed.

Strategies to increase participation

The service coordinator has found that residents "open up" more when she visits them in their apartments, rather than having them come to the "management" office. The service coordinator has encouraged residents to take part in the meals and activities at the nearby senior center since several residents are seeking companionship and friendship. Unfortunately, residents have felt uncomfortable at the senior center because it is frequented by higher income retirees.

Recommended changes

The service coordinator and management staff had several suggestions as to how the SCP could be improved. Both mentioned the need for additional training courses, particularly those that focused on HUD requirements. Unmet needs mentioned included money for transportation, a community center where residents would feel comfortable, and low-cost eye and dental care.

Residents had two suggestions for improving the SCP. Providing the service coordinator with an office was mentioned most frequently. One resident suggested that having someone come to check blood pressure on a regular basis would be helpful.

Case Study Report B-9

Introduction

A study team member from KRA Corporation visited a newly established Service Coordinator Program (SCP) in July 1995. During the visit, interviews were held with the service coordinator and a senior staff member of the property management company. In addition, individual interviews were held with eight residents, and ten resident case records were reviewed.

I. Description of Residents and Project

Development characteristics

This 20-unit project is owned by a not-for-profit organization but managed by a property management company. The complex is located in a small rural community, about an hour's drive from the management company and from a small city.

Five single-story buildings containing four one-bedroom units comprise the project. The service coordinator has a small office in one of the apartment buildings. There are no common areas for residents, such as a community room or outdoor area. Notices are posted on a bulletin board next to resident mailboxes. The service coordinator and the property manager did not perceive the lack of common areas as a detriment to the SCP. The project is somewhat isolated and located at the top of a hill. Residents must rely on their own transportation or friends and family because public transportation is not available. A seniors' meal program is located 1/4 mile from the complex.

A resident is paid to serve as an on-site assistant property manager. She handles emergencies and keeps an eye on things for the management company. Although, there is no representative from the property management company at the project, there is an "off-site" property manager. A senior representative of the property management company oversees the building from the property management company headquarters which is located about an hour's drive away.

Resident characteristics

Twenty residents reside at the project. Seventy percent are female; all are white. Two residents are non-elderly persons with disabilities; about two-thirds of the residents are considered "well elderly" by project staff. Over half of the residents are 76 years old or older. All but two resident households have incomes less than \$10,000 per year.

Previously available services

When the service coordinator began working at the project, the residents' greatest unmet service needs were related to entitlement programs such as rent rebates, heating and energy assistance programs (HEAP), and Medicaid. Some residents received in-home services and taking meals at a meal site. The local aging agency scaled down services when their funds were cut, so some services that previously were available to residents were lost.

Residents interviewed received very few services prior to the SCP. One resident received homemaker and nursing services. Another commented that she received services from a community action agency. A few residents mentioned the nearby meal site.

The off-site property manager had not assisted residents with equipment or services; family members made these arrangements. The property manager only became involved if she noticed a problem during annual housing unit recertifications or inspections.

II. Description of Program Implementation

Organizational context of the Service Coordinator Program

Both the service coordinator and the property manager are employed by a management company, located in a community approximately one hour's drive from the complex. This company manages 24 different properties within the area.

The property manager is director of operations and handles all properties managed by the company. In this role, she is responsible for all issues associated with the properties, with the exception of tenant relations. Tenant relations issues are handled by the occupancy division. The property manager has been with the organization for 15 years. The service coordinator reports to the property manager.

The service coordinator and the property manager generally talk approximately three times a week but talk more frequently if the service coordinator has questions. The property manager estimates that she spends approximately two to three hours a month working directly with the service coordinator.

Management company staff, including the property manager and occupancy staff, report they now spend more time on resident issues than they did prior to the SCP. They indicated this is because they are putting more effort into working with the residents than they did previously.

The service coordinator is responsible for contacting and recruiting residents for services, deciding which service providers to contact, and setting program priorities. She has the most say in planning program activities. The property manager is involved, but to a lesser extent. For example, the management company sponsored a barbecue for all of the residents. The property manager was responsible for this activity; however, the service coordinator helped out with some of the coordination.

The property manager is very supportive of the service coordinator but has no involvement in the day-to-day operations of the program. The property manager is involved in deciding what development-wide activities to promote, such as the recent resident barbecue. The property manager also visits the project fairly often as part of her overall responsibilities; however, these visits are not part of the SCP. The property manager believes that with the addition of the SCP, residents now feel the company "cares about them" and that this attention has helped a great deal.

External linkages

The service coordinator and the property manager did not report working closely with either the local aging agency or the disabilities council. The service coordinator indicated that she coordinates meal site services with an individual from the aging agency. Agencies were contacted initially when the service coordinator collected information for the resource library. Staff were not aware of any difficulties working with any agencies.

Application process

The application process was handled by two people in the management company, the property manager and an individual in the occupancy division. The property manager was the most involved in planning the program, although she worked with the State housing authority in developing criteria for hiring a service coordinator.

Funds for a service coordinator were sought for two reasons. First, the property manager observed needs when she was conducting housing inspections and recertifications. Second, the management company staff saw the value in having a service coordinator because a staff member at another property managed by the company assisted residents with social services and found that the residents had many needs. In addition, another property managed by the company had a staff member who assisted residents with social service issues, and this staff member was very active working with the residents.

For purposes of the SCP application process, management staff reviewed resident recertification and move-in forms to determine if any residents had deficits.

Implementation date

The management company applied for funding in December 1993. They received notice of HUD approval for the program in June 1994. The paperwork, such as signing the Housing Assistance Payment agreement, was not in place until August 1994. The service coordinator began working in September 1994.

Initial activities

The property manager indicated that a schedule was developed for the implementation of the SCP which has been followed. The service coordinator, however, was not aware of the schedule.

The first activities initiated by the service coordinator were to develop reporting forms, collect information from local providers to create a resource library, and send letters to residents. Residents did not mention receiving an introductory letter from the service coordinator. The service coordinator collected reference materials, including information from various local agencies, to form a resource library that is housed at a different project. This library is used by the service coordinator.

Service coordinator qualifications and duties

The property manager wanted to find a service coordinator who was a licensed social worker and who had experience in both elderly and family housing. In addition, communication skills were important.

The service coordinator met these requirements. She has an associate's degree in social work and is a State-licensed social worker. She previously worked for a local housing authority conducting family self-sufficiency program activities. Prior to that time, she was a social worker with the local aging agency. The service coordinator is organized, caring, and well-liked by the residents. The service coordinator is good at keeping things confidential and does not get involved in management issues. She is knowledgeable about supportive services.

The service coordinator spends the most time conducting assessments and ensuring that residents obtain the services they need. In addition, she is responsible for filling out applications for services.

Residents saw the service coordinator as someone who could help them with benefits and as one who would coordinate program services for them. One resident said that the service coordinator was there to "see that the tenants are satisfied," while another perceived her as someone who could help residents learn from their problems or mistakes. One resident viewed the service coordinator as a "field worker," who went house to house to work with residents. A few did not know what the service coordinator's job was.

Service coordinator status

The service coordinator works part-time at the complex (6 hours a week) but is a full-time employee of the property management company. The service coordinator works at five different complexes; however, the HUD SCP grant only covers 20 hours for 3 complexes. The service coordinator works with both families and the elderly.

The service coordinator does not have aides, other staff, interns, or volunteers to help her. Maintenance and occupancy staff from the management company alert the service coordinator to problems with residents that may arise. The service coordinator can use management company office staff for clerical tasks. The service coordinator has found that management company staff she is in contact with understand the aging process.

Access to funds for Service Coordinator Program activities

The service coordinator reported that she believed there were no extra funds for program activities, but that she did not know for sure. She reported that the activities she pursues do not cost anything. The property manager is responsible for authorizing expenditures from a fund available for SCP activities.

Service coordinator training needs

Both the property manager and the service coordinator were aware of HUD's requirement for training. Additionally, the service coordinator must receive a set number of continuing education hours each year to maintain her social worker license. Because of this requirement, the service coordinator has attended multiple workshops and training sessions since her hire. The service coordinator indicated that she attended a training session for social workers, sponsored by the State housing authority. This training was for all social workers working in public and assisted housing within the State. The service coordinator found this training particularly useful because it allowed her to learn what other people do and how they handle issues. The service coordinator indicated she would like training on substance abuse and working with the people with disabilities. The property manager indicated that the service coordinator had received training in living wills, conflict resolution, and mediation.

Resident recruitment

A letter introducing the service coordinator was sent to residents. Later, the manager took the service coordinator to the complex to introduce her to the residents. There have been no further efforts made to notify residents about the program.

Residents recalled meeting the service coordinator. Some remember meeting the service coordinator in person while others said she "called" them. Their recollection as to what happened initially was very fuzzy.

There were some initial problems getting the residents interested in the program. Residents were hesitant to talk to a "stranger" about personal issues. The service coordinator reported that one resident refused to let her in to her apartment unit; however, this resident does not let anyone in.

Resident assessments

When the service coordinator meets with a resident for the first time, she conducts an informal health assessment and asks questions about and observes ADLs. Most of the time, the service coordinator meets with residents in their own apartment and observes the resident performing various activities.

Residents are referred to outside professionals for assessments of their physical disabilities if needed. Generally, they are referred to a home health (nursing) agency for these assessments.

Resident interactions

The service coordinator was working with 11 residents during the time of the visit. She had met with all the residents. At the time of the site visit, the service coordinator was trying to link 15 to 16 residents to services and had linked all 20 residents to services previously. She meets with an average of five residents each week. Residents varied in their reports of how frequently they met with the service coordinator. Some said they had only met with the service coordinator twice, another resident said "by chance," and one resident said "weekly" (although this was because the service coordinator would use the resident's bathroom while at the project).

Residents stated that the service coordinator checked with them as frequently as once a week. One resident reported that the service coordinator called her once a month. The residents report that they meet with the service coordinator in her office and in their apartments. They also said they speak with the service coordinator on the telephone. Service coordinator contacts noted in the records confirm these various types of contact.

Resident reactions to the SCP have been positive, although the service coordinator estimated that about 10 percent of the residents were hesitant because the residents did not feel they needed help. Residents reported that they were very satisfied with the SCP and the services they had received. They also reported that the service coordinator was a "big help." They felt the service coordinator was doing a good job and that she looked out for everyone.

The property manager was aware of one resident who had declined a service that was needed but did not know why the service was declined. Generally, the property manager does not get involved with residents who decline services; however, she gets involved with residents who decline a service if the service coordinator feels quite strongly that the resident needs the service. In such cases, she would contact the emergency contact person for the resident and, if needed, adult protective services. Residents are afraid they will be placed in a nursing home so they typically accept the service.

One resident reported that she turned down a service offered to her. She indicated she did not "need" the service. Another resident, who was very elderly, said she was often confused about the services but had not turned any services down. Most residents reported that they had not turned down or not wanted services that were offered to them.

The service coordinator ensures resident input into the program by requesting input from residents every 3 months. A newsletter also asks residents for ideas and suggestions, including any speakers they would like to have.

Services and equipment

Although the service coordinator indicated that a newsletter, which includes a listing of resources, was implemented since she started working as the service coordinator at the complex, she did not believe that any new services were implemented. The study team member observed that the service coordinator had signed the residents up for subscriptions to community action (energy assistance programs) and aging agency newsletters. Residents reported that they were always receiving this information in the mail. The service coordinator would like to develop a questionnaire that asks what residents liked or wanted in services.

Residents reported that the service coordinator had helped them obtain rent subsidies (offered by the state), complete and understand Medicaid and health insurance forms, work with social security, and negotiate with a utility company to arrange payment over time.

III. Description of Case Records

The service coordinator maintains a three-ring binder that contains the quarterly monitoring plan for each resident. This plan lists the resident, by service, with the assessment date and reassessment date. This notebook also includes a resource checklist, by resident. It lists possible services that a resident might receive. The service coordinator uses this list to count the number of contacts made and services provided each month.

The records contain a summary sheet that allows the service coordinator to determine, at a glance, the problems, goals, provider, and services that a resident receives. Also contained in the record are a referral and screening intake form, monitoring update sheet, a form for release of confidential information, a needs assessment form, and a form for narrative case notes.

Three forms used in the resident case records contain information on ADL assessments. The needs assessment form lists 10 ADLs and has a checklist as to whether or not the resident can perform these activities themselves or with support. The monitoring sheet updates bathing, eating, and housework ADLs. The referral and screening intake form also lists ADLs and has space where the service coordinator can check whether the resident performs them alone or supervised, or needs help with them.

The records contain detailed information and notes on each resident. The service coordinator documented all attempts to contact the resident, including times when the resident was not at home or did not answer the telephone. Most contacts documented in the record were to conduct the initial needs assessment and to follow up with residents and determine if their status had changed. In some cases, the service coordinator acted as a "go between" for the management company and the resident. Because there is no on-site property manager, the service coordinator often learned of problems with apartments from the residents and would convey this information to the management company. In a few records, it was documented that residents had illnesses or needed additional services. In the case records of residents with illnesses or who needed additional services, the service coordinator documented that she worked with other service providers and family members and monitored referrals and progress on a regular basis.

IV. Roadblocks to Program Implementation

Workload

The service coordinator only works 6 hours a week at the complex. Her remaining time is spent at other buildings managed by the property management company. The service coordinator felt her workload was manageable, while the property manager felt that initially the workload was heavy because the service coordinator had three programs to get up and running. There is room for the service coordinator to take on additional tasks at the facilities she serves.

Program barriers

The service coordinator and the property manager work well together. There are no turf issues and the manager supports the activities of the service coordinator. Residents did not report any opposition to the program or lack of interest.

The service coordinator has not experienced any problems working with service providers. The service coordinator is known to local agencies because she worked as a social worker for the local aging agency and the public housing agency. The service coordinator meets with local providers and has collected information on services and agencies as part of a resource library. The service coordinator reported that some services could be made available to residents at the project, such as blood pressure screenings, if money were available.

The service coordinator has a small office at the complex, but no toilet facilities. She must arrange to use a resident's bathroom while at the complex.

V. Improvements and Resident Satisfaction

Staff believe the SCP has promoted a sense of community among the residents and provided them an opportunity to "mingle" a little more. It has educated them about programs and resources available to them as well. Staff felt the residents had a more "positive attitude." Residents reported they were satisfied or very satisfied with the program and services and that they now understood the need for such a person. All residents felt the service coordinator's job was necessary, even those residents who had not yet used the service coordinator for assistance.

VI. Recommended Changes and Future Plans

Residents felt the service coordinator's job was necessary and a great help. One resident said, "Without the service coordinator we would've had nothing." They anticipate contacting her in the future as needs arise.

Strategies to increase participation

The service coordinator indicated that residents are mutually supportive and that there is good participation by the residents. Also, without a community room, it is difficult to plan services and activities for residents as a group. The service coordinator has not initiated any activities that are designed to get residents more involved in the surrounding community.

Recommended changes

The service coordinator believes that homemaking and transportation services are still needed. There is up to a one year waiting list for these services, and the transportation services available are not convenient (e.g., residents are required to wait all day for the return trip). One option the service coordinator has considered is using volunteers to provide these services. She has not explored this option and noted that volunteers were hard to obtain.

Suggested changes to the overall program included obtaining more communication from HUD; increasing funding to cover services for which residents do not qualify; allowing service coordinators to conduct some activities typically handled by an activities director; more funds for properties to implement SCPs; and creating emergency funds that could be used to cover temporary services needed by residents.

Appendix A

Case Study Methodology

Appendix A

Case Study Methodology

1.1 Selection of Sample Projects

The site visits were designed to generate comprehensive descriptive data from nine established Service Coordinator Programs (SCPs) and nine new SCPs. Resulting data allowed us to describe the projects, their implementation, and the perceptions of residents on the quality of service delivery. The established SCPs included Round One grantees, funded in fiscal year (FY) 1992. The new SCPs included Round Two and Round Three grantees, funded in FY 1993 and FY 1994.

We expected that the established SCPs would provide data on issues related to project administration and operation, service delivery, and reporting requirements, because these projects had been in operation between 1.5 and 2.5 years. New SCPs, in operation at least 6 months, were to provide information about program implementation issues.

1.1.1 Site Selection Process

Two independent samples were drawn: one for the established SCPs and another for the new SCPs. Although the two samples were drawn independently, the site selection process was similar. This process, described below, points out where the selection criteria and the site selection process differ for the two samples.

For the site selection process, the unit of selection was an application form that represented an SCP at a specific HUD project. In this discussion, we refer to the unit of selection as a project, an application, or an SCP. Ideally, we would have received one hard-copy application for each HUD project served by an SCP. However, in some cases, a single application was used for an SCP with one service coordinator who served multiple HUD projects. As part of the site selection process, we created "applications" to be used as units of selection to represent the individual HUD projects served by the same service coordinator. In these cases, we assumed that the projects were the same size for the site selection process; that is, we divided the total number of units served by the number of projects sharing the service coordinator.

1.1.1.1 Classification Process

The initial step in the selection process was to convert the final application database of SCPs into a statistical software dataset. The dataset enabled the projects to be classified by the following dimensions:

- **Size**—Small, medium, or large
- **Geographic Area**—Northeast, South, Midwest, or West

- **Affiliation**—Affiliation with a national housing management organization or no affiliation
- **Sharing Status**—Service coordinator serving more than one HUD project, or service coordinator serving only one HUD project
- **HUD Programs**—Section 202 or Section 8 (new SCPs only)

Each combination of size, geographic area, affiliation, and sharing status defined a selection cell for the established SCPs. For example, one selection cell for the established SCPs would consist of all applications from small Midwestern affiliated programs that do not share service coordinators. The total number of selection cells for established SCPs was 48. This number was calculated by multiplying the number of size criteria (3) times the number of geographic area criteria (4) times the number of affiliation criteria (2) times the sharing status criteria (2). The selection cells for new SCPs included the possible combinations for established SCPs plus those combinations with the HUD classification of Section 202 and Section 8. The number of possible selection cells for new SCPs was 96.

Size Classifications. We classified the projects by size according to the definitions provided by HUD. These definitions were small (50 units or less), medium (51 to 100 units), and large (more than 100 rental units).

Geographic Classifications. For the selection criteria and analysis, the projects were classified geographically as Northeast, South, Midwest, or West. These geographic areas are defined below:

- **Northeast**—HUD Geographic Areas I, II, and III
- **South**—HUD Geographic Areas IV and VI
- **Midwest**—HUD Geographic Areas V and VII
- **West**—HUD Geographic Areas VIII, IX, and X

Although these geographic definitions are arbitrary, we believe that they are consistent and logical.

Classification by Affiliation. A list of projects affiliated with a national housing management organization, supplied by HUD, was used to classify the projects in the dataset. The list of affiliated SCPs included the projects associated with the National Council of Senior Citizens and the National Church Residences.

Sharing Status Classification. Applications include data that indicate whether projects shared service coordinators with other projects. A service coordinator who works part time at one project and part time at another is considered "shared."

HUD Project Type. All established SCPs are at Section 202 projects. New SCPs may be at either Section 202 or Section 8 projects. New SCPs at Section 236 and 221(d) projects were excluded from the sample, following HUD's recommendation.

1.1.2 Site Selection Criteria

HUD established the following selection criteria that applied to both analytical groups:

- Each sample will contain nine projects.
- The percentage of SCPs selected from each of the four geographic areas will reflect the distribution of SCPs across geographic areas.
- The percentage of SCPs selected from each of the size groups will reflect the size distribution of SCPs across size groups.
- Three SCPs will have national affiliation, and six will be nonaffiliated programs.¹
- Four projects will represent Section 8 projects, and five will represent Section 202 projects (new SCPs only).
- Projects should include both those that share service coordinators and those that do not.
- New SCPs must have been in operation for at least 6 months.

More selection cells existed than projects to be selected. Therefore, the selection criteria were viewed as the number of projects that could not be exceeded for a specific classification. For example, for new SCPs, a maximum of three SCPs could have come from nationally affiliated programs and four from Section 8 projects.

1.2 Sampling Procedure

The site selection process was run separately for established SCPs and new SCPs. The logic of the site selection process, which was the same for both samples, is presented below. New SCPs differed from established SCPs in that they had an additional criterion for the number of Section 202 and Section 8 projects.

- **Step 1**—Establish the maximum number of projects that fulfilled each selection criterion.

¹ New SCPs did not have enough affiliated programs to select the numbers originally proposed by HUD. Only one affiliated project was originally selected, and it was replaced by a nonaffiliated project.

- **Step 2**—Assign the individual projects to the selection cells. Each cell was described as meeting one of each of the five criteria described above: that is, each cell meets a geographic criterion, a size criterion, an affiliation criterion, a sharing status criterion, and a HUD classification criterion.
- **Step 3**—Remove any selection cells that did not have any projects described by the selection cell. For example, if no projects were affiliated and nonsharing at small Section 8 projects in the Midwest, then the cell representing that classification was deleted.
- **Step 4**—Randomly select a selection cell from among the remaining selection cells. Each remaining selection cell had an equal probability of being selected. This probability was equal to one divided by the total number of remaining selection cells.
- **Step 5**—Randomly select a project from within the selection cell picked in Step 4. Each project had an equal probability of being selected. The probability of being selected was equal to one divided by the total number of projects within the selection cell. After the project was selected, it was removed from the list of projects in the cell.
- **Step 6**—Subtract one from the maximum number of the selection criteria met by picking the selection cell.
- **Step 7**—Determine whether any criterion had been fulfilled. A criterion was defined as fulfilled if the maximum number remaining was zero. If a criterion was fulfilled, then the selection cell described by that criterion was deleted from the list of remaining cells.
- **Step 8**—Determine whether nine projects within this analytic group had been selected. If the number was less than nine, we returned to Step 3. If the number of projects selected was nine, the selection process was complete.

1.3 Replacement Selection

Replacement projects were selected on an as-needed basis for projects that were originally selected and either refused to participate or had not been operating their SCP for at least 6 months. Replacements were selected from the sample selection cell containing the original SCP. For some new SCPs, it was necessary to select several replacements because the programs had not been operating for at least 6 months. For some selection cells, all of the SCPs in the cell either refused or did not meet the 6-month limit. After consulting with HUD, we then selected replacements from selection cells that had as many as possible selection criteria in common with the original selection cell. In addition, an effort was made to ensure that replacement cells were similar to the originally selected SCP in an urban/rural context.

Exhibit A-1 presents the original selection criteria for established SCPs and new SCPs. The selection criteria originally established were met by the final sample of projects for established SCPs. No established SCPs refused to participate. Five new SCPs in the original sample were unable to participate in the study. The original selection criteria were met for project type and region but not for size, national affiliation, or sharing status.

Exhibit B-1. Site Selection Criteria for Service Coordinator Programs

Selection Criteria	Established SCPs		New SCPs	
	Original Sample	Projects Visited	Original Sample	Projects Visited
Project Type				
Section 202/8	9	9	5	5
Section 8	0	0	4	4
Region				
Northeast	3	3	2	2
South	2	2	3	3
Midwest	2	2	3	3
West	2	2	1	1
Size				
Small	2	2	2	4
Medium	3	3	3	3
Large	4	4	4	2
Affiliation				
Yes	3	3	1	0
No	6	6	8	9
Share				
Yes	4	4	4	6
No	5	5	5	3

1.4 Comments on the Site Selection Process

Given the number of selection criteria used in the process and the number of projects selected, establishing a weighting procedure to reflect some "average" SCP was impossible. However, our selection process established an objective method of selecting projects.

We examined the possibility of collapsing the number of geographic areas to three in order to have nine basic selection cells—three geographic and three size classifications. When we examined this issue, it became apparent that any possible grouping of HUD geographic areas into other geographic configurations implied an unequal distribution of SCPs across the geographic areas. In addition, the geographic distribution of established SCPs and new SCPs differs. In order to have roughly an equal number of projects in each geographic area, the geographic areas would have to be defined differently for the two samples.

The sample selection process was completed with the assistance of the HUD study directors. A project's willingness to be visited and have records reviewed, as well as maintaining a diversity of projects, were key determinants to final sample selection.

1.5 Data Sources

Multiple data sources were used during the on-site data collection at the established SCPs and new SCPs. Prior to the visits, data were obtained from project applications. During the visit, the following data sources were used:

- Send-ahead questions
- In-person interviews with program staff
- Resident case records
- Resident focus groups
- Project observation guide

At each project visited, data were collected during in-person interviews with the service coordinator, property manager, and, as appropriate, contract employee supervisors and service coordinator employers. At one of the three affiliated projects visited, we interviewed the administrator from the national office. This person had supervisory responsibility for service coordinators at the three affiliated projects visited.

Other sources of data included a sample of resident case records, focus groups or in-person discussions with project residents, and a project observation guide. The procedures for conducting the on-site data collection are described in the following section.

1.6 On-Site Data Collection Procedures

The on-site data collection procedures were the same for both established SCPs and new SCPs. The procedures were pretested prior to their use in the full study.

The protocol for conducting the visits included the following steps:

- Mail letters from HUD to appropriate field offices and projects selected for visits.
- Conduct followup telephone calls to service coordinators to schedule visits.
- Mail confirmation letters to service coordinators.
- Obtain lists of residents and randomly select focus group participants.

- Randomly select case records for file review.
- Conduct interviews with the property manager, the service coordinator, and, if applicable, the service coordinator employer.
- Conduct focus groups.
- Complete case record abstractions.
- Mail thank-you letters to service coordinators, property managers, and residents.

The process used to schedule, arrange, and conduct these visits was the same for both established SCPs and new SCPs. A brief description of the process is given below.

Mail Letters to Projects Selected for Visits. HUD mailed letters to field offices and to each grantee at each of the projects selected to be visited. The purpose of the letter was to announce the study, describe its purpose, and inform projects that KRA Corporation (KRA) was conducting the study under contract with HUD. The letter also informed projects that they had been randomly selected as one of the nine projects to be visited, and that they should expect a telephone call from KRA with more information about the visit.

Conduct Followup Telephone Calls to Service Coordinators. One week after HUD mailed letters to the selected projects informing them that they were randomly selected to participate in this study, we telephoned the service coordinator to discuss the purpose of the visit and to schedule the visit. During this call, we discussed all the activities related to the visit and requested the service coordinator's assistance.

The following points were covered during the telephone call:

- Reviewed the purpose of the visit and the activities to be conducted during the visit
- Established tentative dates for the 2-day visit
- Discussed a preliminary agenda for the visit
- Scheduled time for the service coordinator and property manager interviews
- Obtained a list of residents
- Requested assistance in notifying residents selected for the focus group
- Obtained access to case records for review and abstraction
- Requested completion of the send-ahead questions

Mail Confirmation Letters to Service Coordinators. Immediately after the telephone call, we mailed a letter to each service coordinator confirming the scheduled visit. In addition to confirming the date of the visit, the letter outlined the activities to be completed by the service coordinator prior to the visit and described in detail the activities to be completed during the visit. The letters were tailored to project specifics. All letters were intended to accomplish the following functions:

- Thank the service coordinator for agreeing to participate in the evaluation.
- Confirm the dates, starting time, and initial meeting place for the visit.
- Name the site visitors and the person whom the service coordinator could contact if she had any questions.
- Provide a brief overview of the 2-day site visit schedule.
- Request that the service coordinator complete the send-ahead questions prior to the visit so that they could be picked up while visitors were on site.
- Request a list of residents from the service coordinator and include a tentative date that she would mail the list to KRA.
- Review case record procedures (e.g., how the records would be selected).
- Review the process for selecting residents for focus groups; we later called the service coordinator to review the list of residents and to determine those residents who were unable to participate in such a group.
- Request the service coordinator's assistance in providing information to the residents about the focus groups.

A sample 2-day site visit schedule and the data collection activities completed during the visit are shown in Exhibit A-2.

Obtain Lists of Residents and Randomly Select Focus Group Participants. The conduct of the focus groups required that preliminary activities be completed before the study team arrived on site. Each service coordinator was asked to send a list of all residents by the date mutually agreed upon during the confirmation telephone call. After we received this list, we randomly selected up to 24 residents for the focus groups.

A three-step random sampling method was used to select residents for participation in the focus groups. The first step was to randomly select a starting point on the list of residents. The second step was to select 24 residents at evenly spaced intervals from the starting point. The third step was to replace residents who were unable to participate in the focus groups.

We anticipated that 12 residents would participate in the focus groups. The other 12 residents were used as replacements for those who were unavailable or inappropriate for participation in a focus group. In all projects, we attempted to have at least nine focus group participants. If fewer than nine participants were suited for a group, we attempted to conduct individual in-person interviews.

Exhibit B-2. Two-Day Site Visit Schedule

	Senior Visitor	Midlevel Visitor
DAY 1: a.m.	Orientation to project (meet with property manager and service coordinator, discuss procedures, locate relevant files).	
	Interview property manager.	Review send-ahead questions for completion; pull 10 records for case record review; begin reviewing files.
DAY 1: p.m.	Complete review of resident case record data; finalize resident selection for focus groups.	
	Interview service coordinator.	Interview other related staff, such as employer.
DAY 2: a.m.	Two focus groups.	
DAY 2: p.m.	One focus group.	
	Brief meeting with property manager and service coordinator to thank them.	

After we selected the residents, we informed the service coordinator of those residents who had been selected as participants and of those residents who would serve as alternates. We conferred with the service coordinator to determine whether any of the selected residents was unable to participate in a focus group and needed to be interviewed in person.

Before going on site, we consulted with the service coordinator about the best time and place to hold the focus group. The site visit schedule was designed to be flexible enough to accommodate resident needs. Service coordinators were very helpful in arranging appropriate space for conducting interviews and focus groups. Service coordinators also distributed letters to both selected residents and alternates. Service coordinators were available to answer any immediate questions residents had about how they were selected.

Randomly Select Case Records. The list of residents provided by the service coordinator for the selection of the focus groups was also used to select records for abstraction. Standard random sampling techniques were used to select the records. The steps followed those used for selecting residents for focus groups. Records were selected after the study team arrived at the project. Replacements were made on site. If a resident's record was missing, we then took the first name on the replacement list to replace the missing record. If additional residents had missing records, we substituted residents listed on the replacement list.

Review of Resident Case Records. During the visit, the case records of 10 residents were reviewed using a data abstraction form developed for this study. The abstract form was used to obtain assessment information related to activities of daily living, service needs, and service referrals. The case records were randomly selected from the list of residents provided by service coordinators. The purpose of the case record review was to supplement interview data and to obtain additional information about how the SCP was operating.

Conduct Focus Groups. The focus group lasted no more than 1 hour. One study team member served as the group moderator. Another study team member served as the note taker. The moderator opened the group by making introductions and explaining the purpose of the group. If residents were confused about the terms used, site visitors referred to a list of SCP activities, services, and equipment that was developed for the study to clarify terms.

At the conclusion of the focus group, residents were thanked for their participation. Site visitors reviewed their notes and summarized findings and conclusions as soon as possible after the focus group.

Conduct Interviews With the Property Manager, the Service Coordinator, and, If Applicable, the Service Coordinator Employer. While at the project, site visitors interviewed the property manager and service coordinator. To ensure that interviewees understood all of the terms being used during the interviews, we referred to a list of service coordinator activities and/or services and equipment as needed.

If the service coordinator was a contract employee, we used the contract employer discussion guide to obtain information.

Mail Thank-You Letters to Projects. Immediately following the visits, thank-you letters were mailed to all site visit participants, including property managers, service coordinators, and residents.

* * * *