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 projectbased 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.

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 dayto-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 24hours 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 feit 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.
Introduction

A visit to an established Service Coordinator Program (SCP) was made in May 1995 by a twoperson 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 manger 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 surside 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.

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.

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.

li. 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.

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 nonelderly persons with disabilities. The majority (67 percent) of the residents are female. Thirtyone 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 parttime 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-toobservation 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 the 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.