AREA PLAN ON AGING
2018 – 2021

Submitted to:
COMMONWEALTH OF MASSACHUSETTS
EXECUTIVE OFFICE OF ELDER AFFAIRS

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Executive Summary

Since the creation of the Administration for Community Living in 2012, the message to Area Agencies on Aging has been clear and consistent:

• Building strong collaborative networks across the aging and disabilities services domains is both a social and economic imperative;

• Consolidating and integrating services to create economies of scale on a broader regional basis can and should facilitate both best practice and cost effective delivery strategies for meeting the increasing numbers and increasingly complex needs of elders and people living with disabilities;

• Traditional funding sources are shrinking at the same time that new and often for-profit entities are defining a marketplace in which Area Agencies on Aging must compete for resources in ways that are unfamiliar to them and which, unfortunately, may place them at a disadvantage. Therefore, Area Agencies on Aging must swiftly acquire business acumen and retool to become viable social enterprises;

• Technological advances in communications, telemedicine, and smart home capacities unfold at break neck speed. Area Agencies on Aging must harness those technologies that make them stronger but that do not overwhelm the core capacities of relational supports.

Greater Lynn Senior Services (GLSS) has listened carefully to this message and found it resonated fully with our commitment to inclusion and best practices, our culture and tradition of innovation, conclusions from our own discovery efforts, and our ongoing efforts to forge and support partnerships that promote community livability for all, especially the most vulnerable among us.

Consequently, GLSS focused significant time and resources to help build the Greater North Shore LINK (formerly known as the Aging and Disability Resource Consortium of the Greater North Shore, Inc.) into an organization representing thoughtful and operational integration of the aging and disability network philosophies and service delivery capacities across a broader regional territory. Examples of such efforts in which GLSS has played a principal role range from:

• the development of significant trainings on Disability Awareness and 508 Compliance;

• to the development of a more comprehensive and more person-driven care coordination model that integrates key elements of both the independent living paradigm and the Aging Services Access Points’ strong brokering capacities, incorporates cross-disabilities and behavioral health training, utilizes a wider array of community resources and is both operationalized and evaluated through the LINK’s One Care contract; and
● to special educational forums on critical topics including Mass Health Reform and findings from an in-depth look at the impact and future of Options Counseling on the North Shore.

GLSS has developed co-sponsorship arrangements with its LINK partners to site Kiosks for Living Well – an innovative program for promoting health self-management and problem solving around social determinants of health – throughout the North Shore. Additionally, the Kiosks are mobile and can travel around the community by appointment supporting consumer engagement, providing health monitoring, and connecting consumers to the wide range of programs that LINK partners can offer.

As a further example of true aging and disability network integration and regional consolidation, the LINK recently submitted an application to become an LTSS Community Partner as part of the MASS Health Reform process. The application, formally submitted by the LINK last May, identified GLSS, Bridgewell, and Northeast Arc as the partner entities that will jointly implement the Community Partnership, should it be awarded. The proposed Community Partnership framework is based on the cross-training principles, the care coordination model, and the rigorous evaluation frameworks which inform the LINK’s collaborative efforts as described above. It also includes the consumer engagement and health monitoring capacities of the Kiosk for Living Well, centralized community resource inventories, and a comprehensive electronic health record system for ensuring meaningful information exchange across all clinical and community organizational boundaries.

In 2015, the LINK was selected as one of only eleven partner networks to participate in the second round of the ACL Business Acumen Learning Collaborative. GLSS staff, along with the LINK’s Executive Director, represented the LINK throughout the project’s eighteen months. The key learning from this experience was the imperative to develop entrepreneurial capacities that were competitive within both private and public sectors. This required developing mechanisms for effectively branding, pricing, customizing services, delivering on timely outcomes, and assuring quality in ways that attracted corporate or government customers who would choose to pay for the community programs we provide.

The ACL Learning Collaborative coincided with the GLSS Strategic Planning Process wherein GSS Senior staff launched the organization’s re-design as a social enterprise that could generate revenue in the marketplace while emphasizing a consumer-centric focus on promoting “good fit” between the individual and the environment. The “good fit” approach to community livability seeks to strengthen the consumer’s abilities to integrate within the social and physical environment as he or she desires while simultaneously reducing the barriers that may make that difficult. Consequently, “good fit” requires both a micro- as well as macro-level capacity to promote meaningful change. As part of the GLSS Strategic Plan, all community programs will be assessed to determine the degree to which they promote “good fit” and the ways in which they can be strengthened or revamped to provide stronger consumer outcomes. New programs, such as the Memory Café, the Kiosks
for Living Well, and the Dementia Friendly Campaign, are designed to foster the “Good Fit” approach.

In the coming months, GLSS will launch “Silver Otter Strategies” – a management services organization – as an independent non-profit but wholly owned subsidiary which will focus on the design, development, and marketing of GLSS’ “good fit” products to a broader range of potential payers. The organization’s name, Silver Otter, comes from a folk tale in which woodland animals, led by a curious silver otter, must swiftly learn to work together in order to avoid decimation during a period of “Great Disruption.” In our own time of “Great Disruption,” the new Silver Otter Strategies will seek to support the aging and disability networks by strengthening their capacities to deliver the diversity and quality of services that will create demand across broader populations and business sectors.

Technology will play a huge role in the ability of Area Agencies on Aging and/or Aging Disability Resource Centers to compete in the marketplace of ideas and services. As a pioneer in many areas, GLSS has always sought to find technology partners who shared its core beliefs in consumer choice and community livability. One such partner, It’s Never 2 Late (iN2L), offers a virtual platform and user-friendly touch screen for delivering multiple programs that promote consumer engagement around a wide variety of health and social issues. Consequently, we have incorporated this technology into our Kiosks for Living Well. An important piece of this partnership, however, is GLSS’ ability to use the iN2L platform to launch its new eTools for Health.

GLSS is also partnering with Thrasys/Syntranet to establish an interoperable electronic health record and care management database system that will work with SAMS and other existing systems to strengthen clinical-community linkages, integrate social determinant of health data with clinical indicators, provide predictive analytics that can preclude health crises, and function as a universal population health management tool. Syntranet is a highly sophisticated system with great management potential. At the same time, GLSS is also developing simpler technologies, such as its Caregiver App, which downloads to personal devices and provides meaningful and timely support for caregivers of people with dementia. Similarly, GLSS is readying its Tablet Pilot wherein consumers experiencing depression and anxiety are provided tablets with evidence-based stress management applications and communications options designed to reduce escalation and preclude crises.

Technology advances, however, do not take the place of the in-person relational strengths of our various programs, from Mobile Mental Health and Elder Abuse Prevention, to care coordination, to the Kiosks for Living Well. Rather, we anticipate technology will strengthen the integration of resources across programs, supporting the goal of “good fit” and promoting real and sustained community livability for all residents. This includes those who often otherwise remain hidden, such as members of minority immigrants, and LGTBQIA communities as well as individuals who find themselves isolated and alone.
In summary, as we move into this next four year Area Plan cycle, we believe we have heard – and are implementing to the best of our ability – the lessons and objectives set forth by ACL. We are moving to meet the new demands while protecting those elements that make us who we are as an Area Agency on Aging. It will be an exciting period as we deliver both proven and innovative new programming to increasing numbers of consumers to ensure they have meaningful choices about how and where they will live in the community.

Context

Since its incorporation 40 years ago, Greater Lynn Senior Services has responded to the changing needs of older adults, providing a continuum of community health and social services to help people maintain their independence, safely and with dignity, and live in the community settings of their choice. When the Administration for Community Living (ACL) formed in 2012, GLSS was ready and waiting to welcome adults with disabilities into the fold.

GLSS provides access to services through information and referral; home care services; nutrition programs; transportation; mobility management; housing supports; clinical and protective services; programs designed to promote consumer engagement, better health, and stronger well-being; and a number of new initiatives aimed at creating stronger, more livable communities for all. These activities all support the mission of both the ACL and the Massachusetts Executive Office of Elder Affairs (EOEA): to promote the independence, empowerment, and well-being of older adults, individuals living with disabilities, and their caregivers.

Throughout its 40 year history, GLSS has been a leader, innovator, and pioneer. We have actively pursued new partnerships, provided staff with training and supports to integrate more fully with the disabilities community and become more effective in supporting person-driven programming. For example, GLSS is a founder and principal leader of the Greater North Shore LINK. The LINK, as it is generally known, is one of the first ADRCs to incorporate and has served as a best practice approach to bridging the gap between the aging and disability networks. Through ongoing cross-training and collaborative implementation of key programs, the LINK has helped identify new and effective approaches for delivering truly person-
centered programming with measurable impact.

Similarly, GLSS’ role in the multi-year Prevention and Wellness Trust Fund Initiative has strengthened its capacities to serve more consumers more effectively. It is accomplished both through bi-directional referrals with key partners – such as the Lynn Community Health Center and the Lynn Housing and Neighborhood Development Corporation – and through its expanded capacities to provide health monitoring and supports in the community through the Healthy Hearts and MoveSafe programs delivered through the GLSS Kiosk for Living Well.

Our mission is to build healthy and more livable communities, where critical home and community-based services and supports are fully accessible to older adults, people living with disabilities, and their caregivers. As a social enterprise promoting consumer engagement, GLSS is driven by the principles of intentional design, harnessing innovation, sharing best practices, and expanding collaboration across the health and human services sector. Through collaboration, we can foster far greater resource coordination, much more effective consumer access, and more sustainable program outcomes.

Programs and supports offered through GLSS and its partners are developed to serve the needs of our consumers while also following the requirements of our funders. We have successfully won a number of innovative grants that allow us to create meaningful and cutting-edge programs.

This Area Plan on Aging is informed by area demographics, our needs assessment process, CY2016 I&RS Summary Trend Data report, and requirements of the ACL and EOEA. Additional information is gathered through the review of program outcomes and statistics gleaned through quality assurance activities within the agency, and keeping abreast of trends in the industry and our work with partner organizations.

**Area Demographics**

The GLSS Planning Service Area (PSA) comprises the communities of Lynn, Lynnfield, Nahant, Saugus and Swampscott Massachusetts – a region that is diverse and complex. Of the 149,006 PSA residents, 19% are now 60 years or older, reflecting a 5% increase over levels identified in the 2000 Census. Since that time, the PSA region has recorded significant growth in the numbers of minority residents who, while counted as 24% of the total PSA population in the 2000 Census, and 36% in the 2010 Census, are now recorded as representing 40% of the area’s residents. Hispanics constitute 23% of PSA residents in general and 36% of those living in Lynn. African-Americans, identified in the 2000 Census as less than 7% of the PSA population, now make up 9% of the region as a whole – according to 2011-2015 American Community Survey reports – and constitute 13% of Lynn’s
residents. The numbers of area Asian residents similarly continue to increase and are currently recorded as representing more than 6% of the total PSA population. ¹

Overall, 62% of area residents live in the city of Lynn wherein social indicators such as employment, income, and educational achievement are consistently lowest among the five GLSS PSA communities and generally lower than for the Commonwealth as a whole. For example, the proportion of individuals over 65 living in poverty in Lynn is 19% while the statewide rate for this cohort is 9.2%. ² As verified in our needs assessment process, these factors create barriers to housing options and transportation, and increase social isolation. According to federal standards, 20% of Lynn, 56% of Swampscott, 77% of Saugus, and 100% of Lynnfield and Nahant, are federally designated as “limited food access” areas ³, meaning residents are required to travel longer distances to food markets compared to their counterparts living in similarly dense but non-low income census tracts. Sixty-six percent of Lynn’s population (and 41% of the PSA) also meets the federal Health Resources and Services Administration thresholds for designation as “medically underserved” due to an insufficiency of accessible primary health care providers combined with high rates of infant mortality, poverty, and/or higher concentrations of elder residents. ⁴ In addition, 95% of Lynn residents and 62% of all PSA residents reside in a “Primary Care Health Professional Shortage Area”. ⁵ With Union Hospital scheduled to close in 2019, Lynn will be the second largest city in New England without a hospital.

Throughout the GLSS PSA, 40% of households over 65 live alone ⁶. This is a consumer group that tends to be poorer, more isolated and frequently faces considerably higher housing cost burdens than their counterparts living with others. The challenge of higher housing cost burdens for consumers, especially those living alone, is great even in relatively more affluent communities in the PSA. From variety of the GLSS 2017 Needs Assessment activities, for example, the issue of “house rich, cash poor” seniors struggling to maintain their housing while also meeting daily costs of living -- including medical costs -- consistently emerged as a critical one.

Further, demographic analyses show elderly individuals and people with disabilities are dispersed throughout the PSA. Currently, 11% of adults 18-64 report a disability. The rate among adults over 65 is 40%. ⁷ People in these groups are often less able than the rest of the population to use traditional transportation services. The need for individualized

¹ U.S. Census Bureau, 2011-2015 American Community Survey 5-Year Estimates
² U.S. Census Bureau, 2011-2015 American Community Survey 5-Year Estimates- reported in last twelve months
⁵ ibid.
⁶ U.S. Census Bureau, 2011-2015 American Community Survey 5-Year Estimates
⁷ ibid.
services increases as more and more elders are aging in place and key skills and capacities, including general mobility and safe driving in particular, decline in concert with increased physiological changes. All of the needs assessment focus groups identified transportation as major challenge. The persistent lack of reliable and affordable transportation can be a primary obstacle to social engagement and inclusion; consumers and caregivers both identified the need for mobility options that would consistently support meaningful social connections.

Understanding that people living with disabilities is the fastest growing minority group in the nation, GLSS is committed to providing person-driven supports to consumers across multiple life dimensions.

The results of our root cause analysis process around the causes of preventable health care crises among older adults on the North Shore, which GLSS spearheaded several years ago, revealed higher age-specific rates of hospitalizations among adults over 50 in the region than for the Commonwealth in general, and within PSA areas such as Lynn and Saugus in particular. According to the Massachusetts Healthy Aging Data Report’s 2015 update, estimates of adults 65 and older in the PSA reflect higher rates of obesity, smoking, depression, dementia related diseases, diabetes, COPD, and hypertension than their peers in the Commonwealth; as is the rate of those reporting four or more chronic conditions. In 2016, the PSA’s incidence rate of opioid-related overdose deaths was 58.33% higher than that of the Commonwealth.8

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**GLSS 2017 Needs Assessment**

The GLSS needs assessment process built upon ongoing evaluations and socio-demographic analyses by capturing consumer and partner voices from multiple corners and dimensions of our communities, particularly those voices that are most often not heard. Our assessment activities included mail and online surveys, listening sessions, and a literature review of research and findings relative to age-friendly communities. The target assessment audience comprised GLSS home care consumers; Advisory Council members; Latino and Khmer minority elders; caregivers; LGBTQ elders; as well as community members, officials, and business representatives.

The findings from our needs assessment substantiate the need to address key social determinants of health including: more affordable housing, access to better and more affordable transportation, affordable health care and caregiver supports. The findings also emphasized the ongoing need for 1) strong social connections, 2) services and supports for elders with language barriers, 3) “prevention” programs and supports that effectively help consumers to maintain wellness and independence; 4) programs and other resources that

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help with navigating the aging process and support meaningful person-driven long-range planning; 5) and, more and clearer information around choices across a spectrum of life dimensions.

The chart below summarizes the Area Plan needs assessment “events” while the subsequent focus areas of this report weave the results from these events into the broader context of our framework for operations.

<table>
<thead>
<tr>
<th>Assessment Activity</th>
<th>Activity/Event</th>
<th>Location</th>
<th>No.</th>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Listening Session</td>
<td>Advisory Council</td>
<td>GLSS</td>
<td>6</td>
<td>Advisory Council members</td>
</tr>
<tr>
<td>Listening Session</td>
<td>Khmer Elders</td>
<td>Family &amp; Children’s Services of Greater Lynn</td>
<td>9</td>
<td>Consumers, 60 + elders from the PSA</td>
</tr>
<tr>
<td>Listening Session</td>
<td>Latino Elders</td>
<td>GLSS</td>
<td>8</td>
<td>Consumers, 60 + elders from the PSA</td>
</tr>
<tr>
<td>Listening Session</td>
<td>Caregiver Support Group</td>
<td>Lynnfield COA</td>
<td>4</td>
<td>Caregivers</td>
</tr>
<tr>
<td>Listening Session</td>
<td>Caregiver Support Group</td>
<td>Saugus COA</td>
<td>4</td>
<td>Caregivers</td>
</tr>
<tr>
<td>Listening Session</td>
<td>60+ Women’s Social Group</td>
<td>Saugus COA</td>
<td>11</td>
<td>Consumers, 60 + elders from the PSA</td>
</tr>
<tr>
<td>Survey</td>
<td>LGBTQ</td>
<td>Online</td>
<td>25</td>
<td>Elders 60+ who identified as LGBTQ</td>
</tr>
<tr>
<td>Survey</td>
<td>GLSS Consumer Quality of Life Outcomes Survey</td>
<td>Mailed</td>
<td>433</td>
<td>Consumers</td>
</tr>
<tr>
<td>Survey</td>
<td>Dementia-friendly Saugus</td>
<td>Paper</td>
<td>10</td>
<td>Caregivers, Government officials, Business representatives, Consumers, 60 + elders from the PSA, General Public</td>
</tr>
<tr>
<td>Literature Review</td>
<td>Age-Friendly Cities and Communities</td>
<td>Literature Review</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td>510</td>
<td></td>
</tr>
</tbody>
</table>

For the two caregiver specific listening sessions, we incorporated questions regarding caregiver stress, overall health, and stress relief. Caregivers expressed feelings of stress, depression, and sleeplessness; they also discussed feelings of the loss of their independence and a loss of respect. These groups expressed the need for respite services, support groups, help with choosing products and services, information and awareness about organization, programs, and civic services about dementia and related illnesses.

Listening sessions were also held with the two largest minority populations in the GLSS PSA. From the Khmer and Latino listening sessions, we heard the need for social centers and activities to combat depression and social isolation. Some elders were experiencing homelessness while others expressed the need to live in safe and clean affordable senior housing. These elders also asked for translation assistance with filling out forms and documents, ESL classes, and sensitivity training for providers.
CY2016 I&R Summary Trend Data Report

An analysis of the EOEA disseminated Summary Trend Data report on GLSS’ Information and Referral services (I&R) for the last six months of CY16 (July 1-December 31, 2016) reveals that of the 5,364 callers, 25% were calling directly on their own behalf while 13% were daughters or sons calling on behalf of their parents. More than 75% of callers had previously contacted GLSS I&R Specialists. GLSS I&R Specialists provided assistance to more than 300 walk-ins due to its shared location with the Lynn Senior Center, a service most other AAAs are not able to easily provide.

More than 36% of callers sought information regarding state ASAP programs, followed by 48% seeking information regarding nutrition programs, in-home services, such as companion, homemaking and personal care, and protective services. In addition, 754 calls were on the topic of public benefits, of which 518 calls were for SHINE counseling services.

Goals and Objectives of Three ACL Focus Areas

1. Older Americans Act Core Programs

Goal:

Greater Lynn Senior Services will offer older persons and adults living with disabilities, and their caregivers programs and supports that can assist in maintaining their well-being and dignity.

Objective:

Offer effective and accessible programming that promotes and supports the consumer’s ability to maintain health and independence in their home and communities.

Strategies:

1.1 GLSS will ensure the bi-annual RFP process addresses consumer needs, program gaps, and priorities identified through ACL, EOEA, and the GLSS needs assessments

1.2 GLSS will convene regular intra-departmental staff meetings that will identify and access diverse agency expertise in the provision of quality programs that meet consumer needs not met through the RFP process

1.3 GLSS will continue to offer health screening and education and evidence-based programs

1.4 GLSS will maintain its strong tradition of advocacy, emphasizing elder abuse protection and nursing home ombudsmanship
1.5 GLSS will continue to provide a full array of money management and legal assistance supports

1.6 Enhanced Information & Referral and Community Programs staff will continue to provide a wide array of information about programs and services available to elders, people living with disabilities, and their caregivers through GLSS, as well as other community resources

1.7 GLSS will ensure nutritionally sound meals are available and accessible to eligible seniors and people with disabilities, promoting independent living and better health through nutrition education and counseling, and reducing isolation and food insecurity

1.8 GLSS Family Caregiver program will expand the availability of supportive services to persons with Alzheimer's disease, dementia and related disorders, and their caregivers by:

1.8.1 delivering assistive technologies and training through the GLSS Caregiver’s Matter app and Web site, and the Alzheimer’s Disease Supportive Services Program (ADSSP) grant funding for Echo Dots (a hands-free, voice-controlled device that uses Alexa to access the Caregiver’s Matter app, play music, make calls, send and receive reminder messages, read the news, set alarms, read audiobooks) and video monitoring capabilities;

1.8.2 spreading Memory Café outreach; and implementation planning for dementia-friendly community initiatives

1.9 GLSS will strengthen outreach and recruitment mechanisms to reach minority and under-served communities by:

1.9.1 ESL teacher on staff to design and implement direct ESL instruction

1.9.2 Developing LGBTQIA outreach, marketing projects, and educational programming including sensitivity trainings

1.9.3 Collaborating with partners, such as Councils on Aging, the Greater North Shore LINK members, housing coalitions, community health, One Care and Senior Care Options (SCO) providers to expand outreach to potential new consumers. Collaboration will include cross training and dissemination of specifically designed materials

1.9.4 Offering training to community agencies in Disability Awareness and 508 compliance and pre-audit preparation

In FFY 2017 GLSS solicited community providers through a request for proposal process targeting priority services identified through our Area Plan needs assessment and ongoing...
evaluation efforts. All contracts are for one year with renewal for a second year contingent upon satisfactorily meeting the stated objectives of the individual proposal. Community providers contracted for FFY2018-2019 will provide legal, companion, transportation, emergency short term care, cultural support groups for Khmer elders (a minority and underserved population), adult day health, and other supportive services.

Direct services provided by GLSS will include Long Term Care Ombudsman, Wellness Pathways (evidence based programs), Enhanced Information and Referral, Money Management, Congregate and Home Delivered Meals, Lucy Booth (health screening and education), and Family Caregiver.

The table below provides a brief description of the GLSS Older Americans Act Core programs and priority services funded by Title III during FFY2018-2019 and the populations they serve.

### Older Americans Act Core Programs

<table>
<thead>
<tr>
<th>Provider/Name of Program</th>
<th>Title III Funding Source</th>
<th>Brief Description</th>
<th>Population Served</th>
</tr>
</thead>
<tbody>
<tr>
<td>Northeast Legal Aid, Lynn, MA</td>
<td>Title III B</td>
<td>Free civil legal services to elders, focusing services on elders in the greatest social and economic need, in the following issue areas: subsistence income, maintenance, public benefits, health care access and costs, loss of housing, and protective services.</td>
<td>Isolated elders, adults with disabilities, low income elders, minority elders, socially isolated elders</td>
</tr>
<tr>
<td><em>Elder Law Project</em></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bring Care Home, Topsfield, MA and North Shore Community Action Programs, Peabody, MA</td>
<td>Title III B</td>
<td>Provides temporary live-in nursing or home health assistance for elders recently discharged from the hospital until a care plan is established. Also provides assistance as needed if a caregiver is unexpectedly unavailable so that the consumer may be able to remain in their home.</td>
<td>Elders and adults with disabilities, isolated elders, low income elders, minority elders, socially isolated elders, caregivers</td>
</tr>
<tr>
<td><em>Emergency Short Term Care</em></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Catholic Charities North, Lynn, MA</td>
<td>Title III B</td>
<td>Provides free home visitation companions program to assist isolated elders. Trained volunteers also facilitate elders access to other needed services, acting as an important advocate and watching out for the elder’s well being. By providing a personal and caring presence, the volunteer companion helps reduce the isolation and loneliness often felt by elders living alone and caregivers have reduced stress from caregiving because of the presence of a companion in the home.</td>
<td>Elders, isolated elders, low income elders, minority elders, socially isolated elders, caregivers</td>
</tr>
<tr>
<td><em>Companions to the Aging</em></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provider/Name of Program</td>
<td>Title III Funding Source</td>
<td>Brief Description</td>
<td>Population Served</td>
</tr>
<tr>
<td>--------------------------</td>
<td>-------------------------</td>
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<td>-------------------</td>
</tr>
</tbody>
</table>
| Lynnfield Senior Center, Lynnfield, MA  
**Substitute Van Driver** | Title III B | Transportation to and from Lynnfield Senior Center for meals and daily activities, lunch bunch rides, mall and shopping rides, outings, etc. | Elders and adults living with disabilities, isolated elders, low income elders, socially isolated |
| Lynn Economic Opportunity, Lynn, MA  
**Elderly Fuel Assistance Outreach** | Title III B | Expand the new client fuel assistance application intake into the GLSS catchment area at multiple popular locations where elders live and gather. Encourage elderly clients who may be in need of financial subsidies and discounts on home heating costs to apply for LIHEAP, Low Income Heating and Energy Assistance Program. | Elders and adults living with disabilities, low income elders, minority elders |
| North Shore Caribbean American Organization, Inc., Lynn, MA  
**Love Inspired Senior Enrichment Program** | Title III B | Provides referral assistance, advocacy, socialization, meals, and educational events to frail, low-income and/or minority elders in the GLSS catchment area. | Elders and adults living with disabilities, isolated elders, low income elders, minority elders, socially isolated elders, caregivers |
| Family & Children’s Service of Greater Lynn, Lynn, MA  
**Cambodian Elder Social Engagement & Support Program** | Title III B | A monthly group that offers education, information, recreation, and socialization to Cambodian elders. In addition to the monthly support group, the program offers advocacy and referral services, telephone reassurance, and financial assistance as needed. | Elders and adults living with disabilities, isolated elders, low income elders, minority elders, socially isolated elders, caregivers |
| Pondview Adult Day Health Program, Lynn, MA  
**Briarcliff Lodge Scholarship** | Title III B | The Briarcliff Lodge Scholarship provides for the attendance and transportation fees to provide emergency adult day health services to those who would otherwise be unable to receive immediate care. The scholarship supports people who require increased program attendance during a family caregiver medical emergency or vacation, program participation to support a member during the MassHealth application period or an additional day of attendance for a person who does not qualify for other financial support and cannot afford the additional services. | Elders and adults living with disabilities, isolated elders, low income elders, minority elders, socially isolated elders, caregivers |
<table>
<thead>
<tr>
<th>Provider/Name of Program</th>
<th>Title III Funding Source</th>
<th>Brief Description</th>
<th>Population Served</th>
</tr>
</thead>
<tbody>
<tr>
<td>SpeakOut Boston, Boston, MA North Shore LGBT Elder Community Outreach</td>
<td>Title III B</td>
<td>SpeakOUT’s outreach programs offer a space for LGBT elders to feel visible and can help to make these environments more open and accepting of LGBT people. Their program serves all interested elders who identify as LGBT or are interested in becoming more informed about the community. The outreach programs are also open to those who work with LGBT elders and may want more information about how to be supportive advocates and caregivers.</td>
<td>Elders and adults living with disabilities, isolated elders, low income elders, minority elders—especially LGBTQIA elders, socially isolated elders, caregivers</td>
</tr>
<tr>
<td>GLSS \nMoney Management Program</td>
<td>Title III B</td>
<td>Assists eligible elders and adults with disabilities with the task of monthly bill paying and other needed assistance that enables them to maintain financial independence. Clients are matched with trained volunteers who meet for help to pay their bills, budget their money, write checks, balance checkbooks and other assistance that would enable them to maintain financial independence.</td>
<td>Isolated elders, low income elders, minority elders, socially isolated elders</td>
</tr>
<tr>
<td>GLSS \nEnhanced Information and Referral</td>
<td>Title III B</td>
<td>Provides information (via phone, email or walk-in) to elders, adults living with disabilities, their families and caregivers so that they will be able to make informed decisions about their lives. Assists consumers to identify and access the wide range of available resources – both through GLSS and other community providers – that can reduce a great many risks to consumer health and well-being, simplify daily routines, and generally enhance overall quality of life. This service is free and available to everyone.</td>
<td>Elders and adults living with disabilities and their caregivers, isolated elders, low income elders, minority elders, socially isolated elders</td>
</tr>
<tr>
<td>GLSS \nLucy Booth</td>
<td>Title III B</td>
<td>Provides health screening and education services to elders at the Lynn Senior Center.</td>
<td>Elders and adults living with disabilities, low income elders, minority elders, socially isolated elders</td>
</tr>
<tr>
<td>GLSS \nCongregate Meals</td>
<td>Title III C1</td>
<td>Offers hot, nutritious meals at several community café sites located in the GLSS PSA.</td>
<td>Isolated elders, low income elders, minority elders, socially isolated elders</td>
</tr>
<tr>
<td>GLSS \nHome Delivered Meals</td>
<td>Title III C2</td>
<td>Delivers nutritious meals to people over 60 who are homebound and unable to prepare meals.</td>
<td>Isolated elders, low income elders, minority elders, socially isolated elders</td>
</tr>
<tr>
<td>Provider/Name of Program</td>
<td>Title III Funding Source</td>
<td>Brief Description</td>
<td>Population Served</td>
</tr>
<tr>
<td>-------------------------</td>
<td>-------------------------</td>
<td>-------------------</td>
<td>-------------------</td>
</tr>
<tr>
<td>GLSS Wellness Pathways (formally known as Healthy Living Programs)</td>
<td>Title III D with supplemental funding from Title III B</td>
<td>Incorporates evidence-based disease and disability prevention programs to empower adults to self-manage for quality of life. Wellness Pathways staff are committed to building a culture of wellness, where individuals are engaged, educated and empowered to achieve total health.</td>
<td>Elders and adults living with disabilities, low income elders, minority elders, socially isolated elders</td>
</tr>
<tr>
<td>GLSS Family Caregiver Support Program</td>
<td>Title III E</td>
<td>Provides support to caregivers through in-home assessments, information and referral, counseling and support groups, education and training (including evidence-based training), and respite care.</td>
<td>Caregivers of elders and adults living with disabilities, isolated elders, low income elders, minority elders, socially isolated elders</td>
</tr>
<tr>
<td>GLSS Long-Term Care Ombudsman</td>
<td>Title VII with supplemental funding from Title III B</td>
<td>Certified by the State Ombudsman, trained staff and volunteers of the GLSS Long Term Care Ombudsmen program regularly visit the nursing and rest homes in the GLSS catchment area to meet with residents and staff, helping to identify and resolve any issues or concerns the residents may have. The GLSS Ombudsmen act as resident advocates to make sure the residents’ rights are fully exercised and respected.</td>
<td>Elders and adults living with disabilities, low income elders, minority elders, socially isolated elders</td>
</tr>
<tr>
<td>GLSS Protective Services</td>
<td>Title VII</td>
<td>Provides services designed to protect seniors from physical, sexual and emotional abuse; caregiver neglect or abandonment; self-neglect; and financial exploitation. Protective Services workers investigate allegations of abuse or neglect and offer choices in services and supports designed to alleviate or end the abuse or neglect. Services include: counseling, safety planning, family intervention, legal assistance, medical care, housing, transportation, and homecare services.</td>
<td>Elders, isolated elders, low income elders, minority elders, socially isolated elders</td>
</tr>
</tbody>
</table>

**GLSS Transportation**

While not specifically funded by Title III of Older Americans Act funding, GLSS will provide eligible elders and persons living with disabilities access to a myriad of services through its transportation department. With over 25 years of experience, a fleet of vans and chair car vehicles, and over 300 drivers, GLSS is one of the region’s largest paratransit providers. GLSS provides over 800,000 rides per year and is the longest serving MBTA “The Ride” contractor. As the “The Ride” service provider for the North Area, GLSS also offers transportation to eligible consumers in 27 cities and towns along the North Shore and greater Boston areas.
Additionally, GLSS also provides door-to-door transportation to medical appointments during the week to consumers in our five town service area and provides transportation for consumers attending Adult Day Health programs in the area.

GLSS also provides transportation counseling through its Mobility Links program which identifies mobility options and strategies that consumers can use to navigate within and across communities. Using a centralized inventory of mobility resources, mobility counselors trained in Options Counseling techniques, assist consumers – either in person or through a special 800 line – to identify and access available mobility choices.

**Home Care**

GLSS is also an EOEA designated ASAP providing Home Care services to more than 3,600 elders and people living with disabilities, including:

- Adult Day Health programs
- Alzheimer’s/ Dementia Coaching
- Case Management
- Chore and Home Modifications
- Companions
- Grocery shopping and Laundry
- Homemaking
- Personal care
- Personal Emergency Response Systems and Medication Dispensing Systems
- Supportive Home Health Aides, Nurses, OT, PT, and Speech Therapy
- Transportation

GLSS will continue to provide these ASAP services which complement the supportive services offered by GLSS as an AAA since they, too, are person-centered and designed to assist elders and adults living with disabilities to remain independent and age in place.

State and federal funded programs will include Enhanced Community Options Program (ECOP), Community Choices, Elder Home Care and Community Based Waiver Program, Senior Care Options, Group Adult Foster Care, and Personal Care Attendant. All of these services and programs are designed to be available to low income, socially isolated, and marginalized consumers.

Bi-cultural staff and translation capacities will continue to be offered for a broad range of languages and cultures. GLSS maintains Russian, Spanish, and Khmer speaking care management staff to ensure culturally sensitive and competent care to meet the needs of our largest ethnic minorities. GLSS Community Programs will continue with its broad-based Latino Outreach Program which provides programs and events as well as partnerships within the community to increase socialization, transportation options, and assistance navigating the complexities of public benefits and immigration services.
2. Participant-Directed/Person Centered Planning

Goal:
Greater Lynn Senior Services will partner with elders and people living with disabilities, their families and caregivers to facilitate real choices for individuals as they seek to remain healthy and independent.

Objective:
Employ and develop useful tools for participant-directed/person centered planning that will assist consumers in determining the right choices to support their individual needs.

Strategies:

2.1 GLSS will provide appropriate staff training modules, opportunities for discussion, and ongoing supports around disability awareness, person-directed planning, and decision support frameworks and methods

2.2 GLSS will research grant opportunities to fund the broader framework for health self-management operations

2.3 GLSS will promote the use of health self-management tools and routines as part of an ongoing coaching approach to interactions with consumers and track the impact of this approach

2.4 GLSS will ensure that all consumers can identify at least one health goal and a strategy they are willing to pursue for attaining it

2.5 GLSS will provide consumers with critical community linkages for pursuing health self-management

2.6 GLSS will continue to provide problem-solving supports to consumers around a full range of the social determinants of health at each of its PSA Kiosks for Living Well

2.7 GLSS will work closely with the LINK partners to pool resources and develop coordinated schedules and programs around health self-management choices for consumers

2.8 GLSS, who delivers the LTSS supports for One Care on behalf of the LINK in partnership with Commonwealth Care Alliance, will continue to implement and evaluate its model for effective consumer engagement and improved health-related outcomes, and will integrate the successful elements into its overall approach to delivering person-driven planning and care coordination
GLSS believes that planning for the long-term health and care needs of consumers must be a consumer-centered process that includes meaningful choices and the requisite supports for identifying, accessing, implementing and evaluating those choices. Because GLSS focuses on a “good fit” approach, these choices must include those which enhance consumer capacities to engage and maintain independent living routines as well as those which reduce environmental barriers to overall community livability. Combining this micro- and macro- focus into the process of decision supports increases both the likelihood of capturing “hidden” resources as well as overall consumer satisfaction, control, and well-being.

GLSS will continue established person-centered programming such as:

**Home Care and Senior Care Options: Consumer Directed Care and ECOP-IP**

Through our Home Care and Senior Care Options (SCO) Departments, GLSS offers a robust Consumer Directed Care (CDC) program with very active consumer participation. Consumer Directed Care is a service delivery model which empowers eligible consumers to exert greater control over the provision of homemaking and personal assistance services. CDC offers eligible consumers greater choice and control of their care because they have the option to hire, manage, and dismiss their own personal care workers.

The Independence Plus Program is also offered by GLSS’s Home Care department as part of the Enhanced Community Options Program and has good consumer participation. The ECOP-IP program allows frail consumers to use their purchase of service dollars for needed personal items and that added flexibility helps them remain safe and independent at home.

**Options Counseling**

GLSS, in partnership with the Greater North Shore LINK, was chosen to launch the Options Counseling program in our region because of our networking capabilities and specific experiences, including our hospital nurse liaison program.

Options Counseling helps consumers identify and understand their needs and to assist them in making informed decisions about appropriate long-term service and support choices in the context of their personal needs, preferences, values and individual circumstances. Options Counseling is a free short-term counseling service for elders, persons living with disabilities, and their families, that provides consumers with information about long-term support services as well as consumer directed decision support to evaluate all available options.

The Options Counseling model, based on decision support and consumer activation, is uniquely equipped to support consumers in assuming a greater role in their health management and planning for their long-term care.
Passport to Health

The Passport to Health is a unique GLSS-created small booklet that is stored in a magnetized sleeve which consumers generally keep on their refrigerator. It functions as an “advanced directive” in case of emergencies and details information that is important to the consumer, such as current diagnosed conditions and medications, who should be notified, what to do about pets, how to care for the home, whether the individual is a caregiver for someone else and how to provide substitute care in emergencies, etc.

Passports are distributed at the Kiosk for Living Well and by the Care Transitions Coach; each passport is tracked for follow-up by GLSS staff.

Wellness Pathways

Wellness Pathways (formerly Healthy Living) at GLSS is dedicated to building a culture of wellness, where consumers are engaged, educated and empowered to achieve their health goals through evidence-based programs. Wellness Pathways will continue to offer these workshops, classes, and coaching services:

- Care Transitions Intervention Coaching
- Chronic Disease Self-Management: My Life, My Health
- Tomando Control de su Salud
- Matter of Balance (English and Spanish)
- Healthy Eating For Successful Living
- Diabetes Self-Management (English and Spanish)

The Wellness team is staffed with a Team Leader, Senior Case Manager, Nurse, Coordinator, and Care Transitions Specialist. Wellness Pathways programs actively participate in the Healthy Living Center for Excellence and share the common goal of supporting consumers in effectively managing their own health conditions, advocating for their needs, and preventing unnecessary hospitalizations and falls.

The Wellness team is currently exploring new interventions to address the chronic health self-management needs of consumers such as educational programs, activity groups, coaching, and other proven ways to promote health and prevent disease among older adults. This will expand the kinds of tools and opportunities available to help consumers achieve their health goals.
Our endeavor to empower elders and people living with disabilities to make successful decisions also includes the creation of a number of innovative and collaborative programs:

**Disability Awareness and Support Trainings**

GLSS has taken a lead role in the LINK to begin a series of trainings for organizations to build awareness and sensitivity toward people living with disabilities whether they are consumers, employees, potential employees or members of the general public. Beginning with the simple truth that people living with disabilities constitute the single fastest growing minority group in the U.S., GLSS through its partnership with the LINK has developed a “Disability Awareness Training” (DAT). DAT takes a unique and holistic approach to the discussion of “disabilities,” offers a compelling overview of how our society has historically defined and addressed the issue of disabilities and how all of that has shaped critical public policy and why that matters to us in our professional and private lives. The training introduces key elements of the disabilities rights movement, the subsequent legislative responses, and the continuing social policy gaps. Moving from the broader social sweep of this review, the training also specifically addresses the role of language and changing social norms in promoting inclusion, consumer choice, and community livability in the full range of every-day activities.

GLSS’s Quality Assurance and 508 Compliance Manager is certified in Information Accessibility Design and Policy from the University of Illinois and will offer trainings on designing and building accessible Web sites and digital materials (such as accessible Word, PowerPoint, and pdf documents). The on-site trainings will be offered one-on-one, or in small or large groups to introduce best practices for basic design principles as they relate to people living with visual, audio, manual, cognitive, or other disabilities. Participants will discover what makes a Web site or document accessible, why it’s important, and how to create content and navigation that follows legal standards and best practices.

**Embedded Social Worker with Lynn Community Health Center**

Through GLSS’s Prevention and Wellness Trust fund effort, we currently embed a social worker at the Lynn Community Health Center (LCHC) who works as part of the population management team there, and receives and tracks referrals from LCHC primary care teams. The embedded social worker is a key element in strengthening the clinical-community linkages that further the no wrong door approach by making health care more accessible to our most vulnerable populations. The embedded social worker facilitates consumer access and participation in community health monitoring and self-management supports for individuals whose primary care teams deem them “at-risk.” At the same time, the GLSS embedded social worker ensures that critical monitoring information is recorded in the consumer’s health record. Finally, the embedded social worker can help the Kiosk team connect consumers who need primary care with the Lynn Community Health Center.
Enhanced Long Term Supports Services (LTSC) Coordination Program

Through the Commonwealth’s dual eligible demonstration (One Care), GLSS has assumed a lead role within the LINK in creating a unique Enhanced Long Term Supports Services Coordinator function (LTSC). The Enhanced LTSC function reflects intensive cross-disability and aging-related training, expertise and experience in decision support methodologies, and deep capacities around identifying and integrating diverse area resources. This role, unique in its comprehensive capacities and problem-solving approach, reflects the “no wrong door” philosophy, emphasis on person-driven services, and the ongoing interweaving of member services and resources that defines the Greater North Shore LINK’s Enhanced LTSC Program.

eTools for Health

GLSS has begun developing “eTools for Health” (eTools) for the It’s Never 2 Late touch screen that will provide consumers with a variety of health self-management interactive supports, including lively videos, interactive quizzes/games, and printable tip sheets (all in multiple languages) which address specific health questions and issues. The existing library of eTools now includes a series on heart health, COPD, diabetes, falls prevention, driver decision making, preparing for doctors' visits, preparing for a health emergency, safely navigating in the community, and more. Driven by consumer needs, modules planned for 2017-18 include health and wellness topics (stress and anxiety, arthritis, musculo-skeletal issues, tobacco cessation), accessing community resources (social services guide, workforce development) and GLSS programming (Memory Cafés). While current eTools are primarily sited on the iN2L platform, they can easily be transferred to tablets, smartphones, and other hosting environments and are designed so that much of the content is deliverable even when connectivity is unreliable or non-existent.

Kiosk for Living Well

Kiosks for Living Well are vibrantly appointed and movable physical spaces that currently operate at nine key community pulse-points in the region, including Senior Centers and housing complexes. The “roving kiosk” travels to different sites, including libraries, town halls, and other “cross-road” junctures on a regular basis. Each Kiosk features the following:

- It’s Never 2 Late technology platform which offers a large touch screen and a very large range of applications including: cognitive and memory assessments and “games”; virtual exercise and travel; skype and other communications options; hand-eye coordination applications; art and music therapy programs; karaoke; travel planning and “Google Earth”; language translation; driving assessment and strengthening; and many more

- Kiosk Advisor staff, trained in decision support methodologies, who work with consumers to resolve critical social determinant of health issues and can offer
ongoing information, problem-solving supports, and referrals around a broad spectrum of issues including housing, mobility, benefits planning, money management, employment, etc.

- Healthy Hearts Team, comprised of nurses and community health workers, who monitor blood pressures and weights, offer 1:1 and small group education around hypertension reduction techniques including smoking cessation, diet, exercise and aspirin intake; make home visits as appropriate as well as “field trips” around shopping for and preparing “heart healthy” meals

- New expansion of the Healthy Hearts Team to the “Healthy 4 Life” Team that adds COPD, Diabetes, and Pre-Tuberculosis education and supports to the Kiosks’ capacities

- Move-Safe Counselor (supported by a certified community health worker) who is clinically trained to assess falls risk, develop individualized exercise plans for strengthening coordination and mobility, assess home environments where appropriate to determine falls risks and offer guidance for reducing these; provide travel training using public transportation as well as travel counseling to specific destinations using all available options through the GLSS Mobility Links Database

- Visiting specialists, including Employment Counselors, Caregiver Specialists, and more

**Move Safe/Mobility Links/Travel Counseling**

Move Safe/Mobility Links (MS/ML) is a consumer-centered project that integrates multiple evidence-based practices designed to improve the confidence and capacities of elders and people with disabilities in our North Shore region to effectively use community transportation options, including public transportation. Sponsored by the Regional Coordinating Council (RCC) of the North Shore (which GLSS now co-chairs), the project reflects both critical needs and creative solutions identified by a wide range of partnering organizations and includes these key components:

- an updated comprehensive inventory of mobility options in each community catalogued according to multiple characteristics;

- travel counseling supports to assist consumers in trip planning, coordinating mobility resources, accessing and using transportation;

- travel training to help consumers improve mobility and successfully use travel options, particularly public transportation;

- falls prevention related to transportation, including reduction in fear of falls and actual falls risk through individualized and group supports. Supports are provided by a trained kinesiologist certified in multiple evidence-based elder falls prevention
programs, in collaboration with a nurse and community health worker (who are funded through another source); and

- driver cessation programming that includes safety enhancements as well as action plans promoting alternative transportation use.

MS/ML serves consumers through a 1-800 telephone line, the nine Kiosks for Living Well now sited across the North Shore, the roving kiosks that travel on a regular basis to additional community pulse points, as well as home visits when appropriate.

**Tablet Program**

This pilot program, scheduled to launch in late 2017, employs the use of mobile technology applications to help people self-manage their conditions on their own, and in the comfort of their own homes. It features stress management applications (“apps”) to assist home-bound consumers who struggle with chronic physical and/or mental health conditions, such as stress, depression, anxiety, and sleeplessness. Based on established research principally undertaken in Australia and the United Kingdom, consumers with access to appropriate stress management software – including meditation, “caring for virtual pets,” and journaling – were able to reduce symptoms sufficiently to reduce ER visits and hospitalizations as well as misuse of medications.

### 3. Elder Justice

**Goal:**

Greater Lynn Senior Services seeks to support the protection of fundamental social and legal rights of elders, especially those who are most vulnerable.

**Objective:**

Greater Lynn Senior Services Clinical and Protective Services and other advocacy programs will meet the needs of older adults by allocating resources, expanding outreach and educational opportunities, increasing community collaborations, and supporting multidisciplinary responses to the many forms of elder abuse.

**Strategies:**

3.1. GLSS will partner with the Elder Law Project of Northeast Legal Aid, Inc. (NLA) to address legal issues that affect elders in greatest social and economic need. This program will provide 1300 hours of legal services for 90 consumers during each federal fiscal year.
3.2. NLA will conduct staff trainings, outreach presentations and community and professional education events to increase awareness of their services and resources

3.3. GLSS Mobile Mental Health staff will continue to respond to referrals for in-home counseling

3.4. GLSS Hoarding program will continue to offer services to high-risk elders challenged by hoarding issues

3.5. Women’s and Family Abuse Programs (formerly known as the Older Battered Women’s Program) will provide supports and resources to ongoing and new consumers each year at-risk of domestic abuse

3.6. GLSS Protective Service, Mobile Mental Health, Hoarding, and Women’s and Family Abuse program staff will deliver appropriate in-service training within GLSS, to area providers, Councils on Aging, associations, emergency responders (police, fire, Board of Health, etc.) and/or to the LINK members on an annual basis

The following programs are specifically designed to enhance access to – and promote enhanced community choices for – consumers who are at-risk of abuse, experiencing mental health symptoms that undermine their independence and capacity to remain in the community, or considering alternatives to nursing home placement.

**GLSS Protective Services Program**

GLSS’s Title VII Protective Services program provides services 24 hours daily to protect elders from physical, sexual and emotional abuse; caregiver neglect or abandonment; self-neglect; and financial exploitation. Protective Services workers investigate allegations of abuse or neglect and offer choices in services and supports designed to alleviate or end the abuse or neglect. Services include: counseling, safety planning, family intervention, legal assistance, medical care, housing, transportation, and home care services. The Protective Services team strives to provide the least restrictive, appropriate intervention. Elder rights and wishes are always respected. Freedom is more important than safety; that is, the person can choose to live in harm or even self-destructively, provided that the elder is competent to choose, does not harm others, and commits no crimes.

GLSS’s Protective Services staff members have exceptional expertise in working with abused, neglected, and exploited elders, in particular those with mental health, substance abuse, and domestic violence issues.

**Conversations**

*Conversations* is a community engagement and education program designed to affirm and support the vital area network of care serving older persons, Veterans, adults living with disabilities, and their families. *Conversations* are free educational presentations offered in
Beverly, Danvers, Lynn, and Chelsea for professionals and volunteers to raise awareness about difficult, and at times sensitive, “conversations” the community of care need to have. And, as an additional support to area providers the program offers Social Work, Nursing, LADC (Licensed Alcohol and Drug Counseling) continuing education credits at no cost. The program is provided by GLSS in collaboration with community hosting partners—such as the Soldiers’ Home in Chelsea. Those who attend Conversations presentations represent a broad cross-section of regional providers: social workers, nurses, case managers, housing and shelter staff, mental health counselors, and addiction treatment staff. Presenters are qualified specialists in their subject matter.

GLSS’s Conversations program will continue to reach into the community to address issues having to do with a myriad of ways older adults are vulnerable to abuse and ways community members can be aware of and respond to the needs of at-risk elders.

**Elder Law Project**

Elders in need of legal services are referred to Northeast Legal Aid (NLA) in Lynn, which has developed a specialized Elder Law Project. This Title III funded program focuses on elders 60 years and older in the greatest social and economic need and advocates for them in variety of matters. Some examples include nursing home residents’ rights, MassHealth, Social Security, consumer and Veterans benefits issues, housing matters, and elder abuse and exploitation cases. NLA will continue to play a leadership role in many advocacy efforts on behalf of elders in the Commonwealth through leadership positions in the Massachusetts Guardianship Association (MGA) and the Massachusetts Chapter of the National Academy of Elder Law Attorneys (NAELA). The MGA has an ambitious agenda of reforms to the laws and procedures by which guardians are appointed and function in the Commonwealth.

**Elder Mobile Mental Health (EMMH)**

The Elder Mobile Mental Health program conducts intensive relational outreach and counseling to elders who need it at home. Often unable to and/or fearful of accessing help, many of these seniors are at risk of self-neglect. They live with anxiety, depression, loss, and substance abuse that negatively affect life quality. GLSS mental health counselors connect consumers with pivotal home care supports to help stabilize them in the community while ensuring they receive appropriate mental health services and medical care. This program addresses barriers to outpatient treatment like lack of transportation, money or family support and provides services in a setting where the elder feels safe. A staff of five clinicians (including Hoarding and Addictions Specialists) provide a full spectrum of mental health services, especially one-on-one counseling, in the privacy of the elder’s home. Other services include substance abuse counseling, family counseling, supportive phone calls, and referrals to home care services and medical specialists. EMMH counselors are able to work long-term with clients in order to treat chronic illnesses and substance abuse.
The EMMH program was recognized with *The Deirdre Johnston Award for Excellence and Innovation in Geriatric Mental Health Outreach Services* from the American Association of Geriatric Psychiatry.

**Hoarding Outreach Program**

The Hoarding Outreach Program aims to help clients understand why they have these tendencies and how they can overcome them. The program provides one-on-one and family counseling in the homes of elders who clutter or for whom the need to collect possessions has taken over their lives. The Hoarding Outreach Specialist provides supportive advocacy and mediation with landlords, support groups, and referrals to services such as chore, home care, and Meals on Wheels, and other resources like personal organizers to help consumers take control of their possessions.

Clients are also provided with opportunities to learn and grow through cognitive change, developing insight, prioritizing, and problem-solving skills. The Hoarding Specialist offers De-Clutterers’ support groups that meet weekly for ten weeks. At the end of ten weeks, these members may participate in Peer Support groups with a trained facilitator.

The GLSS Hoarding Outreach Program will continue to navigate the delicate balance of maintaining the client’s right to self-determination and the ability to remain safely in their home.

**Homeless Elders Breakfast and Housing Advocacy Program**

GLSS offers a free hot breakfast to homeless elders from Monday through Friday at the Lynn Senior Center. Clinical Programs staff will continue to be available at the breakfast to help with housing placement and applications for benefits.

GLSS’ housing advocate helps relocate elders who have been displaced or are in jeopardy of losing their homes. The housing advocate works in close coordination with local health and human service organizations, local housing authorities and shelters, public safety officials, Northeast Legal Aid, building managers, and private landlords, as well as other GLSS departments – protective services, home care, and other housing programs – to identify housing options that best meet the elder’s needs. The advocate works with clients to fill out and file housing applications and help resolve housing barriers.

**Long-Term Care Ombudsman Program**

The GLSS Title VII Long Term Care Ombudsman program provides independent and skilled advocacy to protect the rights of all individuals, regardless of age, who live in long-term care facilities within the GLSS service area. Each week state-certified trained program staff and volunteers visit residents in the area’s eight nursing and rest homes. Talking with residents and their family members, Ombudsman help identify and resolve issues and ensure that residents’ rights are fully exercised and respected. The program also provides educational information to the public regarding long-term care options, as well as training.
to facility staff that focuses on a variety of critical topics including enhancing their appreciation of resident issues and strengthening protection of resident rights, and developing effective team approaches.

Money Management Program

The Title III funded GLSS Money Management Program will be managed by Clinical Programs staff, to promote independent living for low-income elders by assisting them with their routine financial needs. This is achieved through the dedicated support of screened and trained Money Management staff and volunteers. The Money Management program is available free of charge to adults age 60 and older or adults with disabilities that meet certain income guidelines. Clients in the program are often physically impaired, homebound, forgetful or anxious about their finances. Service is tailored to the specific needs of the client and may include “Bill payer” services such as help with check writing, developing a budget, monitoring income and expenses, balancing the check register, reading and sorting mail, and organizing financial paperwork. The elder maintains full control over her/his money and retains check-signing capacity at all times. “Representative payee” services in coordination with the Social Security Administration with the consent of a physician, are for individuals who are deemed incapable of managing their own government checks. GLSS staff and/or volunteers have legal authority to sign checks on behalf of the client.

These personal financial supports are offered to consumers in their homes, or if preferred, at a community center location. Learning money management skills and working with others to ensure they are performed properly protects elders from potential financial exploitation and loss.

Women’s and Family Abuse Programs

Funded in part through the federal Victims of Crime Act (VOCA) the Women’s and Family Abuse Programs (formerly the Older Battered Women’s Program) offers free and confidential individual counseling, group support, peer support, legal assistance, and critical social connections to older women who have been victimized by domestic violence. The program serves women over the age of 50 throughout the North Shore, Cape Ann, and Merrimack Valley.

The goals of the program are to ensure the physical and psychological well-being of clients and to increase client coping and problem-solving skills. Through a range of services, Domestic Violence (DV) Advocates promote independence, well-being, and a sense of dignity. These include individual and group counseling; personal advocacy; emergency legal intervention; interagency service coordination; legal consultations; transportation, and occasional emergency shelter. Critical to achieving success, staff meet with clients one-on-one in a place where the clients feels safe, often in the clients’ homes, but just as easily in a coffee shop or doctor’s office.
Because of its effectiveness, the program was recognized as a national model at a Chicago meeting organized by the Wisconsin Coalition Against Domestic Violence, the Office of Violence Against Women, and the National Clearinghouse on Abuse in Later Life. The program’s success has been based not only on widespread outreach, but on effectively building relationships within the community and extensive collaboration with interested parties, such as faith communities, senior centers, police departments and the District Attorney’s Office. The program also received an Achievement Award from the National Association of Area Agencies on Aging (n4a).

GLSS has expanded the program’s services along the North Shore and Merrimack Valley regions by developing relationships with the North Andover Senior Center, Jeannie Geiger Crisis Center and Elder Services of Merrimack Valley (ESMV) to reach more older victims of domestic violence in the area. With an office at ESMV, the DV Advocate is able to consult with the home care and protective services staff on cases involving domestic violence. She is also available to accompany staff on a joint home visit to explain about the free services the OBWP program provides. With the Jeannie Geiger Crisis Center the DV Advocate consults with staff when an older adult reaches out to them for support.

The Family Abuse Program is for men and women abused by adult children and/or grandchildren. Services include community outreach, individual and group counseling, legal services, housing, support groups, and referrals to service for older adults who have experienced familial abuse. This also includes, outreach to adult men experiencing intimate partner abuse.

**Conclusion**

Over the next four years the GLSS Area Agency on Aging will continue to develop, maintain and expand services to elders, their caregivers, and people living with disabilities; advocate for and promote services that nurture consumer independence; promote consumer rights; and manage programs effectively so as to maximize both impact and cost effectiveness. It will do all this with an emphasis on vigorously supporting consumer self-determination, sustained engagement in health self-management, and strengthened consumer mobility both throughout its PSA as well as across the North Shore with community partners. As our social and economic environments continue to shift, GLSS will use its expertise and partnerships to marshal available resources in order to optimally and comprehensively deliver on the mandates of the Older Americans Act.