In 2004, under the guise of the San Francisco Partnership for Community-Based Care and Support, the Services Connection Pilot Project (SCCP) emerged to develop a partnership with the San Francisco Housing Authority and other community partners to address the needs of seniors and adults with disabilities living independently in public housing. Service teams were formed, residents were surveyed in order to assess their needs, and establish connections to an extensive array of resources and services. The pilot program was funded by two grants and administered by the Department of Aging and Adult Services (DAAS) staff.

**Key Components**

Two sites were chosen for each phase of the pilot project. A needs assessment survey was developed, and service teams were formed, comprised of DAAS staff, interns, community partners, and members of the Resident’s Council from each site. The service teams received extensive training in interviewing techniques, cultural competency, availability of services, and most importantly, maintaining the dignity and respect of the residents. The SCPP survey was conducted in face-to-face interviews with building residents. After evaluating the results of the survey, follow-up was scheduled with each participant, resulting in establishing the service connections identified in the interview, and collaborating with other service providers to facilitate further communication, or augmenting available services by establishing new connections.

**Recommendation**

In 2005, Santa Clara County published an ambitious 10-year Strategic Plan designed to advance the well-being of older adults. Included in this plan is an objective to connect seniors to services which will meet their basic needs or improve their quality of life. With this plan as a framework, the recommendation is to narrow the focus of this goal to address the needs of low-income seniors in independent living environments.

This program is a natural outreach for DAAS, in which a steering team would identify seniors in need, apply for public and private grants, assemble a service team, provide training to service team members, conduct a survey, and provide the necessary follow-up. The program can be expanded depending upon funding and challenges encountered by the project’s administration.

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Services Connection Pilot Project:  
A Collaborative Partnership Between DAAS and the Housing Authority in San Francisco—Assessing Needs and Facilitating Service Delivery Connections for Seniors and the Disabled in Public Housing

Barbara Herlihy

Introduction

The Services Connection Pilot Program (SCCP) was developed in 2004 to identify the need for and facilitate the service connections for social services programs, and public and private benefits available to low-income seniors and adults with disabilities residing in public housing in San Francisco. The San Francisco Department of Aging and Adult services (DAAS) embarked upon a collaborative effort with the San Francisco Housing Authority (“Housing Authority”) to structure a program that would be funded by grants, supplemented by county resources, and staffed by DAAS personnel and private contractors. DAAS and the Housing Authority partnered with On Lok (a senior health plan), and several resource centers to implement this program. Under the pilot program, the focus would be on residents of four Housing Authority buildings. A comprehensive survey would be developed to assess needs, engage the residents in the process, and establish linkages/connections to ensure that the residents are able to avail themselves of the resources and services for which they are eligible.

The basic premises of the program includes involvement of residents and advocacy groups, the ability for residents to obtain services while maintaining their dignity, fostering independence (avoiding institutionalization), promoting community development, developing connections, adapting to service innovations, integrating team models, and implementing shared visions and goals, while being mindful of cultural and ethnic diversities and overcoming a myriad of physical, psychological and socio-economic barriers.

Background

San Francisco is a richly diverse, dynamic city noted for its liberal politics, social conscience, and colorful history. San Francisco has the unique distinction of being California’s only city and county (City & County), which presents its own set of challenges in terms of the political structures and climate, with functions of government concentrated in the Mayor and the Board of Supervisors.

From the outset it was recognized that seniors and the disabled in public housing projects are likely to be isolated, limited by barriers such as transportation, location (proximity to medical, cultural and social outlets), safety and security issues, language limitations, yet at the same time eligible for many no-cost or low-cost services and outlets (e.g. social, cultural, community centers).

San Francisco has ten Resource Centers for seniors and adults with disabilities located throughout the city. The goal of SCPP is to connect public housing residents with one of these centers and provide information to them about the various programs for which they might be eligible. The Resource Centers
provide information and assistance in 31 different areas, ranging from addictions/alcohol & drug abuse to volunteer opportunities.

Development of the Pilot Program

The San Francisco Partnership for Community-Based Care and Support is the umbrella organization which facilitates many programs for seniors and the disabled. This group coordinates a series of meetings involving public and private service providers from which a common goal emerged which highlighted the need to establish connections between the ultimate consumers (residents, recipients) and service providers.

SCPP was to be developed in phases/stages: The first phase would include 1) targeting several housing projects; 2) developing a services needs assessment survey; 3) forming service teams to be assigned to each building, and providing comprehensive training; 4) interviewing residents using the survey; 5) providing follow-up for identified needs, and 6) establishing linkages to connect residents with service providers. Funding was necessary to pay for program administration and cover the costs of providing training, staffing, and oversight for the program. DAAS contributed leadership, staff, administrative resources, meeting space, and other valuable resources.

Formal Structure

The San Francisco Partnership for Community-Based Care & Support (“the Partnership”), which was formed in 2004, has 70 member agencies, plus resource centers and county agencies. Each agency commits to the Partnership’s objective to become an integral part of a “no wrong door” model of access to supportive services in San Francisco. The partnership has a tri-fold purpose: 1) enhance collaboration, cooperation, and communication between member agencies in the delivery of services; 2) promote the services provided by member agencies via a multifaceted media campaign; and 3) be an increasingly visible and powerful voice in service organization and coordination.

Within this structure, there are four workgroups (community partnerships, case management, homecare workforce recruitment and retention and public relations and marketing). Under the Community Partnerships Workgroup, there are four subgroups and six partnership initiatives, including: 1) Improving access to services in elders in racial & ethnic communities (an initiative of African American Community Partnership); 2) LGBT (collaboration with open house Senior Community); 3) Services Connection Pilot Project (collaboration with San Francisco Housing Authority; 4) Case Management Connect Pilot Project (collaboration with San Francisco Department of Public Health); 5) Home Alone PR Campaign (collaboration of Mainstream Media & Ethnic/Cultural Media; and 6) Community Living Fund (collaboration with Mayor and Board of Supervisors).

Obviously there are overlapping issues among these different initiatives and workgroups, which only serve to strengthen the community ties and forge more solid bonds between DAAS, the Housing Authority, and community advocates. The partnership is coordinated by a project director, and the SCPP is managed by a project manager.

Initial Funding

Initially, the program was funded by a grant from the Robert Wood Johnson Foundation. DAAS contributed staff time, project oversight, and resources. In 2008, DAAS and the Housing Authority, in conjunction with the Northern California Presbyterian Homes and Services, applied for and received a ROSS grant through the Department of Housing and Urban Development (HUD) (for the second phase of the project, to hire service coordinators for a total of four buildings. The initial grant is for $375,000, to fund the service coordinator positions at the four pilot program sites. An additional $600,000 will be available over the next three years.

Implementation of SCPP

The vision for this project emerged in 2004, and planning for implementation took place between
The Pilot Program was divided into several stages, the first one involving 350 and 666 Ellis Street, which were selected to begin the project because of their location in the Tenderloin District of San Francisco, close proximity to one another and to services and resource centers. These buildings also presented the most challenges to the Housing Authority in terms of administration.

The second phase involves two additional buildings: Clementina Towers and Rosa Parks, which were also selected because of their locations and proximity to services, but primarily because of the high number of seniors and disabled persons who reside in those complexes.

Service Teams were assembled, mandatory training developed and scheduled, as well as follow-up protocols and evaluation criteria established. After the first phase (March–May 2007 in the first two buildings), the program was evaluated, challenges recognized, successes identified, and data collected for further evaluation.

**Establishing Community Connections**

The Partnership is connected to approximately 70 public and private agencies. Service team members have access to a directory of these agencies and their mission statements and contact information.

**Surveying and Assessing Needs**

After a four week training period, the service teams are assigned to regular visits at each site. A comprehensive survey was developed to elicit vital information and identify service gaps for residents’ basic needs, as well as to establish service areas which would improve one’s quality of life. The survey consists of a series of questions about the following: composition of the individual’s household; going out to community/supportive services (identifying barriers, such as safety or transportation), determining one’s level of isolation, responses about specific types of services (e.g., meal programs, medical services, adult day programs, other community services, and information and referral services. An additional section entitled “Demographics” is optional.

From these responses and follow-up with service connections, a team member can determine whether or not such needs are being met and may be prompted to ask additional questions. The surveys are conducted in six languages in addition to English.

**Service Teams**

A fundamental goal in setting up service teams is to establish trust with the residents of each building. This is accomplished by a combination of factors, including: language capabilities, cultural competencies, interviewing skills, etc. Each service team should have between 6 and 9 members, comprised of DAAS staff, On Lok staff with language capabilities, graduate student interns, and residents from each building. The training takes place in four sessions, and the last session involves a walking tour of the neighborhood for team members to familiarize themselves with local culture and the availability of services.

**Challenges and Limitations**

After the first stage, a number of challenges emerged. There is no consistent social worker presence and security is an issue (but SCPP was instrumental in having security guards hired for all projects through the Housing Authority). The lack of transportation options, particularly to obtain taxi scripts, is a significant barrier to residents being able to visit resource centers and service providers. Translation services are being used more often to provide peace of mind to the residents rather than to provide information. Resident involvement varies from one building to the next. Obviously, the more engaged the residents, the more successful the program.

**Planning for Sustainability**

The funding for the pilot program under the ROSS Grant is projected out over the next three years for a total of $975,000. The service teams are self-sustaining in the sense that members should be able to move between the different teams and can be members of more than one team. The training plans currently in place will continue to build through regularly sched-
uled in-services. With additional funding, this program could be expanded to include more sites.

Implications and Applicability to Santa Clara County

This type of program can be easily adapted to Santa Clara County, with some modifications. The framework for a project of this nature was established in a strategic plan published in 2005. This plan was produced by the County of Santa Clara, the City of San Jose, and a significant number of community partners, and is entitled, “Community For A Lifetime, a Ten Year Strategic Plan to Advance the Well-Being of Older Adults in Santa Clara County (“Community Plan”).” This plan is an ambitious, comprehensive plan, the focus of which is to identify needs and connect older adults with service providers and available resources. Narrowing the focus to seniors in public housing would enable these services and resources to be targeted towards those persons least likely to be reached by a large scale plan such as the Community Plan. Managing a program like SCPP in Santa Clara County would seem to be a natural outreach for DAAS. The Community Plan was developed with a forty member advisory board and 1,100 community members.

Recommendations to Santa Clara County

Santa Clara County should implement a more narrowly-focused plan, either as a pilot project or fully operational program under the leadership of DAAS and in partnership with the City of San Jose. It is recommended that a number of assessment tools be developed to inform homebound seniors and disabled adults of what is available to them. Examples would include newsletters (printed and e-mailed) mini-senior fairs, media advertisements, development of service teams which would actually visit seniors in their homes to make assessments and interview seniors about the types of benefits and services for which they may be eligible and those services which may improve their quality of life (wellness centers, social outlets, cultural community groups, etc.). Service teams should be formed, comprised of representatives from the senior housing project or a senior peer advocacy group, DAAS staff (social workers), a coordinator, trainers and administrative staff. Language capabilities should also be factored into assembling the teams. Once the scope of this program is finalized, costs could be estimated and funding sources explored.

Demographics

In 2005, the Community Plan reported that there were 220,600 older adults in Santa Clara County. This figure is expected to double by 2020 when seniors will be 23.3% of the population. Language capabilities are a factor in this type of program. The Community Plan identified Spanish, Mandarin, Vietnamese, and Tagalog as the languages needed for this plan to succeed. In its survey of representatives of the senior community, 24% of the senior respondents reported that they are also caregivers, which is an interesting phenomenon. The senior population is racially and ethnically diverse: a) White—64%; b) Asian—21%; c) Hispanic—12.5%; d) African American—1.7%; e) Other—1.4%.

Elements for Success

Coordinate with service providers to identify those persons receiving services through Service Teams’ interventions. Success can also be measured by completing the interview process, even if the interviewee does not appear to have any unmet needs. The fact that the contact took place constitutes a connection in itself.

Next Steps

1. Form a Steering Committee (DAAS & City of San Jose staff; community partners)
2. Formulate a plan to be used as a grant proposal
3. Identify public and private service providers
4. Identify seniors to be connected with services and engage them in the process
5. Conduct needs assessment surveys (use S.F. model)
6. Form Service Teams; schedule them for training on-site
7. Establish service connections to address resident’s particular needs
Follow up on survey results and service connections and collect data

Document successes and challenges

Integrate this new plan into the continuum of services.

**Conclusion**

Since the framework is already in place, implementing this plan will connect seniors to much-needed services. Using the San Francisco model will facilitate some of the administrative barriers presented by this type of endeavor. Coordination with the City of San Jose and other municipalities will ensure that there is little or no duplication of service connections and may result in the streamlining of existing services. There is no down-side to making these connections.

**Acknowledgements**

I would like to express my sincere gratitude to the following persons and acknowledge their skill, compassion, commitment, and successes in SCPP:

Bill Haskell, Project Director with DAAS, coordinator of the San Francisco Partnership for Community-Based Care & Support and Marcia Peterzell, Project Manager for Services Connection Pilot Project.

I would also like to thank:

Betty F. Malks, Director of the Santa Clara County Department of Aging & Adult Services (DAAS), and member of the Project Management Team of Community for a Lifetime Strategic Plan.

Frank Motta, Santa Clara County BASSC Coordinator, Social Services Agency; and John Murray, Senior Analyst, Human Services Agency, San Francisco.