HUMAN SERVICES GRANTS PROGRAM (HSGP)

FY 2021-22 PROGRAM STATUS REPORT

**Agency: WISE & Healthy Aging**

**Program: Adult Day Service Center (ADSC)**

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| **SELECT** |
|  |
| **X** |

###### FY 2021-22 SUBMISSION CALENDAR

**SECTION I: PROGRAM ACCOMPLISHMENTS, CHALLENGES, AND CHANGES**

**Provide a brief summary of your program accomplishments, challenges, and changes that occurred during the reporting period. Please also provide information or observations related to population or service trends.**

Accomplishments:

* WISE & Healthy Aging’s Adult Day Service Center (ADSC), working closely with California Department of Social Services, Community Care Licensing (CCL), the regulatory division over adult day care centers, successfully completed the approval process to begin phasing back full in-person programming on June 7, 2021, at its location in Santa Monica. Working within an approved COVID-19 Mitigation Plan that included extensive training of staff around infection control and procedures, as well as regular random COVID testing of staff who are all fully vaccinated. The ADSC updated the COVID mitigation plan in June and continues to create a safe environment for clients to receive on-site in-person services.
* The ADSC served 90 participants during this reporting period with 40 who are Santa Monica residents. With a portion of the year being hybrid of in-person and virtual.
* WISE concluded virtual programming at the end of May 2022 as the demand dwindled with the ADSC offering in-person programming and being able to maintain a higher capacity due to COVID restrictions starting to lift for ADSC’s.
* The Somos Amigos group has benefitted dramatically from the resumption of on-site, in-person programing. Most participants have resumed participation and two new participants have joined the group. In addition, one long-time group member increased her participation to 5 days/week and has maintained this schedule for much of the program period.
* WISE & Healthy Aging successfully competed for an Alzheimer’s Foundation of America grant to partially fund Somos Amigo, offered on-site two days each week. During the program period, this grant partially subsidized the participation of 5 Santa Monica residents.

Challenges:

* During the COVID-19 lockdown and the suspension of on-site ADSC services, many long-time clients passed away or were placed in long-term care facilities. The WISE & Healthy Aging ADSC continues to rebuild participation. Participation ebbs and flow with spikes in COVID variants in the community. With some families holding clients back from day services when there is a spike and having them return when they feel more comfortable to do so.
* Staffing has been challenging during the second half of the year within this reporting period. The ADSC Director resigned from the position to pursue other interests in April. A new director was hired with an August 1st start date. Leaving the ADSC without a director for several months. Staff and volunteers have been helping to bridge this gap and have done so with little interruptions to operations. The director is the primary person who conducts outreach for new client enrollments so that aspect of the business has been impacted. Hiring activity leaders (position that provides direct client care and monitoring) has been challenging due to the high demand for healthcare workers and the increase in compensation industrywide. In response the WISE has increased the hourly wage considerably to meet the demands of the market and attract and retain high quality staff.
* COVID-19 remains the single largest challenge, particularly coping with the Omicron and the changing variants. The ADSC remains vigilant regarding COVID-1 safety measures (masking, social distance, hand sanitation and building entry screenings). At the same time, the Center serves a population that constantly needs to be reminded of these necessary procedures, and often clients are not able to consistently follow them, which is understood given that the clients have memory impairment. Some families continue to be cautious about sending their loved ones to group settings. However, they need the respite assistance, in many cases to fulfill their own work obligations.

###### SECTION II: ASSESSMENT, EVALUATION AND PARTICIPANT INVOLVEMENT

**Briefly describe or list any program assessment or evaluation efforts during the reporting period and summarize the results achieved. Specifically highlight any program participant involvement in these efforts**.

ADSC clients are assessed every six months using the Dementia Quality of Life Scale, the Mini Mental Status Exam (MMSE) or Montreal Cognitive Assessment (MoCa) and a Functional Assessment. Any unusual changes in assessment results are reported to the client’s family.

During the program year, the ADSC assessed program satisfaction in two ways. First, **caregiver satisfaction** surveys were collected to gather feedback on programing. Of the 40 SM program participants, six were without family caregivers. Of the 34 caregivers, 22 completed the caregiver survey. Caregivers were asked to respond to the following questions in the second survey administered during June:

STRONGLY STRONGLY

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | AGREE | AGREE | DISAGREE | DISAGREE |
| 1. I feel my loved one benefits from the program | 100% |  |  |  |
| 2. My loved one finds the program engaging and therapeutic. | 90% | 10% |  |  |
| 3. The program engages my loved one **cognitively** | 90% | 10% |  |  |
| 4. The program engages my loved one **socially** | 80% | 20% |  |  |
| 5. The program engages my loved one **physically** | 60% | 40% |  |  |
| 6. Participating in the program helps my loved one feel less socially isolated | 90% | 10% |  |  |

Caregivers were asked to rate the following:

ABOVE VERY

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | AVERAGE | AVERAGE | NEUTRAL | POOR | POOR | N/A |
| 7. Ongoing Staff Interaction | 100% |  |  |  |  |  |
| 8. Personal care provided to client | 100% |  |  |  |  |  |
| 9. Enrichment Activities | 90% | 10% |  |  |  |  |

Finally, during the mid-year caregivers were asked to rate their stress level before the onsite program reopened and their current level of stress.

10. Please rate **your** stress level **before the onsite program reopened:**

**50%** Very high **42%** High  **8%** Neutral **0%** Low **0%** Very Low

11. Please rate **your** stress level **now:**

**9%** Very high **18%** High **36%** Neutral **27%** Low **9%** Very Low

WISE & Healthy Aging is pleased to report that while caregivers’ stress levels were high before ADSC onsite programing was reopened (92% stated their stress level was high or very high), their current stress levels are much lower (27% stated their current stress levels are high or very high). During the second half of this year the survey was not replicated since these two questions were specific to reopening and were not relevant at the year end.

**Program participants** in the early-stage memory loss program (WISE Minds onsite classes) were also surveyed once this year. Thirteen program participants were Santa Monica residents and we received responsesfrom 12 individuals**.** They were asked general questions about the program, as follows:

ALWAYS SOMETIMES RARELY

|  |  |  |  |
| --- | --- | --- | --- |
| 1. I look forward to participating in the classes | 100% |  |  |
| 2. I find the activities fun and engaging | 82% | 18% |  |
| 3. I feel like these classes help my memory | 75% | 25% |  |
| 4. These classes help me feel less alone | 92% |  | 8% |

Participants were also queried about which activities they liked the best and least. Information gathered from a series of open-ended questions suggested that participants especially enjoyed the opportunity for social interaction. Several participants mentioned that music is a favorite and a few clients mentioned that the brain games were sometimes difficult, and they would like more lecture mixed in with the brain game activities. The most common sentiment was that it was great to belong somewhere and to have people with whom to interact.

**Please highlight any new efforts to collaborate with other service providers and/or leverage services. Please include the agency name(s) and service(s) provided.**

Because of COVID-19, WISE & Healthy Aging has been very selective about allowing other service providers into the ADSC. However, WISE & Healthy Aging has renewed the relationship with Loyola Marymount University (College of Communications and Fine Arts) and has secured a master’s level Marriage and Family Therapy/Art Therapy intern through May 2022. This intern provides programming to the Early-Stage Memory Loss program as well as the general ADSC. In addition, she carried a small caseload of individuals with the goal of increasing communication and socialization and decreasing anxiety and distress.

The ADSC had two half-time interns through the Geriatric Social Work Education Consortium (GSWEC) through May 2022. These individuals are master’s in social work candidates in their last year of school, with special interest and training in gerontology. One intern was bilingual (Spanish/English) with a special interest in caregiver issues. The other intern was specifically interested in dementia and clinical skill development. Students provided assessments for clients, group programming, carried a small caseload of clients/caregivers, and conducted a 6-week mindfulness group for the WISE Minds early memory loss group. Both students were hired to stay on in the ADSC and Care Management programs.

WISE continued its partnership with UCLA’s Dementia Care Program that offers vouchers for their patients to attend a limited number of sessions at the ADSC. This can provide a family a short period of respite or help them explore, at no cost to them, if ongoing participation is the right fit for the client and their families. After the voucher period has concluded the agency determines if the client will be fee for service, if they qualify for veterans benefits to pay for ADCS services, or to determine if they qualify for a scholarship, including the duration of the scholarship.

###### SECTION III: BOARD INVOLVEMENT

**Please indicate:**

* **Number of Board meetings conducted during the reporting period**: 2
* **Average number of members of Board in attendance at Board meetings**: 16
* **Board development activities conducted during the reporting period:** None
* **Significant policy directions or actions taken by the Board during the reporting period:** The Board approved a new operating budget for FY2021-22 (July 1 – June 30); approval of proof of COVID vaccination as a condition of employment beginning Sept. 1, 2021, including proof of vaccination of clients for in-person services; approved updates to the Employee Handbook effective January 1, 2022 (per required legal updates); elected new Board Directors for 2022 (Joe Justin and Laura Mosqueda) and re-election of those Board Directors naturally completing their terms; approved new Board officers– Chair Paul Watkins, First Vice Chair Iao Katagiri, Second Vice Chair Paul Kanan, Treasurer Kathy Fergen, and Secretary Michelle Meisels. Grace Cheng Braun, President, and CEO for WISE & Healthy Aging for the last 17 years, voluntarily completed her work with the agency on June 30, 2022. The board identified and executed a three-year contract with Molly Davies for the President and CEO position effective July 1, 2022.
* **Number of board members who reside and/or work in Santa Monica:** 8
* **Board vacancies and plans to fill those vacancies, if applicable:** The First Vice Chair position on the board is vacant and will be filled in the new calendar year.

###### SECTION IV: STAFFING PATTERN

**Have there been any staffing changes during the reporting period (i.e., staff vacancies, staff recruitment, changes in FTE)? Please describe. If staff vacancies exist, please provide an anticipated hiring date and explain how caseloads and work have been distributed to ensure service levels are maintained.**

Currently, the ADSC is fully staffed to deliver on-site programing. There is an ADSC and Nutrition Services Supervisor (supervises activity leaders and handles meal service and volunteer management). There are four activity leaders one of whom was hired in July 2022. There is a ADSC Supervisor who supervises the enrichment specialists, assists with client and family management, programming, and maintains data. A full-time Enrichment Specialist (MSW) was hired in the Spring, to assume curriculum development, program delivery, and to conduct client assessments. A full-time Master Teacher (MA in Gerontology) also develops program curriculum and delivers early-stage memory loss programing. Aside from the two new hires and two activity leaders hired in 2019, each staff person has worked in the ADSC for at least 5 years and the ADSC Supervisor is in her 29th year. As noted, an ADSC Director was hired with an August 1st start date. She has a PsyD., holds a Residential Care Facility for the Elderly (RCFE) administrator license. With extensive experience running assisted living facilities.

**Please indicate how volunteers or paid or unpaid interns were used during the reporting period. Provide the total number of volunteers or interns and hours provided. If interns were used, please indicate their program level (e.g. undergraduate, masters).**

During the program period, the ADSC utilized **8 volunteers for a total of 1,380 hours**. Three volunteers assisted in the ADSC kitchen. Two volunteers are the MSW interns discussed under “collaboration.” One volunteer is bilingual (Spanish/English) and assisted with the Spanish language programing. One volunteer, a retired nurse, assisted with the daily building entry screening and delivered early -stage memory loss programing. One community volunteer entertained ADSC participants (musical performance) on six occasions. Two volunteers provided general assistance in the main activity room. Volunteer participation has been consistent.

**SECTION V: SPECIAL FUNDING CONDITIONS**

***Provide a status report on how the agency is meeting its funding conditions listed in Exhibit A of your Grant Agreement, clearly addressing each individual funding condition in bullet point format.***

1. *Participate in the City’s efforts to develop an outcomes measurement system to better track human services program demographics and outcomes. Participation may include, but is not limited to: meeting with City staff, consultants, and; providing information regarding current data systems, technology infrastructure, policies and procedures, needs, opportunities, and concerns; incorporating the City into existing consent for release of information forms; signing and adhering to the City’s data management Agency Agreement; and contributing data to a centralized data management system. Aggregated or de-identified information may be requested for the purposes of analyzing data being collected.*

WISE & Healthy Aging has and continues to participate as needed with this effort.

1. *Detail steps taken to provide services in adherence to the safety protocols related to the COVID-19 pandemic, including modifications to service delivery, physical infrastructure and safety equipment and protocols to protect participants and staff.*

WISE & Healthy Aging follows local and state public health and CDC guidelines on proper safety measures, e.g., wearing of face covering/shields, wearing of gloves when needed, maintaining of distancing of at least 6 ft, and promoting hand washing as often as possible. Public health poster and flyers are up throughout the building, including the elevators, noting masks are always required while in the building, as well as proof of vaccination. Additional wall-mounted air purification machines have been strategically installed throughout the workplace, as well as installation of sanitizing wipes (dispensers) and self-dispensing sanitizing liquid dispensers. Restrooms have been designated for use by specific staff. Regular office workspace cleaning continues. The Ken Edwards Center re-opened to the public, with phasing in of adult day care clients on the second floor in June 2021. Per a Mitigation Plan that was approved Community Care Licensing, temperature checks are taken of clients, volunteers, staff and visitors. All staff and volunteers in the ADSC are fully vaccinated and continue to do regular random testing. Masks are available for clients, volunteers, and staff.

1. *Agency will assist eligible participants in submitting applications to applicable Santa Monica Housing programs, including but not limited to: Section 8 and Below Market Housing (BMH) Waitlists, Preserving Our Diversity (POD), and Continuum of Care (CoC) programs.*

Those seniors who may be eligible are screened through the Care Management Program. And if eligible, assistance is provided in completion and submission of applications.

**SECTION VI: SERVICE NEEDS AND REFERRALS**

***The following tables track data on program participant needs and the inter-agency relationships utilized to address them. Please provide this information as completely and accurately as possible for participants entering your program.***

|  |  |  |
| --- | --- | --- |
| **ASSESSMENT OF ADDITIONAL SERVICE NEEDS**  **(Santa Monica Participants)** | **FY 2021-22**  **Number Responding “Yes”**  **at Mid-year** | **FY 2021-22**  **Number Responding “Yes”**  **at Year-end** |
| 1. “Do you or anyone in your household have unmet employment needs?” | 0 | 0 |
| 1. ”Have you missed or been late on a home rental or mortgage payment within the last 12 months?” | 0 | 0 |
| 1. “Do you or anyone in your household have an unmet childcare/afterschool need?” | 0 | 0 |

|  |  |  |
| --- | --- | --- |
| **INCOMING PARTICIPANT REFERRALS**  **(Santa Monica Participants)** | **FY 2021-22**  **Number**  **at Mid-year** | **FY 2021-22**  **Number**  **at Year-end** |
| Participants referred by another agency | 17 | 18 |
| **Please list the top 3 referring agencies** |  |  |
| * 1. UCLA Dementia Care Program | 12 | 13 |
| * 1. VA | 3 | 3 |
| * 1. OPICA | 2 | 2 |

**SECTION VII: PROGRAM SERVICES AND OUTCOMES**

*Provide a status report on the program activity levels and outcomes for Santa Monica program participants as indicated in Section VII of your Program Plan. Examples have been provided for your reference; please insert rows as needed to align with your Program Plan. For outcome achievement not documented in a report, please provide narrative explanation and/or documentation of how outcome data is captured.*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Service Category/ Program Goal** | **Activity Type** | **Activity Description** | **Annual Target\*** | **Documentation**  **Method** | **Mid-Year**  **Status Report** | **Year-End**  **Status Report** |
| 1 | **ADSC Client**  **Well-being**  **Quality of Life** | Output | Participant’s Quality of Life is assessed at admission and every 6 months thereafter | 45 SMPP | Standardized assessment, Brod Quality of Life-Dementia (DQoL), included in client file. | 23 SMPP received the Dementia Quality of Life Assessment (of the 27 SMPP, 2 are online clients only, 1 is currently out of area, and 1 was in process at end of 12/31/21). | 31 out of 40 SMPP received the DQoL assessment |
| Outcome | Participant will maintain or increase their quality of life from Time 1 (T1) measure to Time 2 (T2) | 50% of SMPP with 2 measures of QoL-D will maintain or increase their scores. | Comparison of T1 and T2 scores on standardized assessment. | 89 % of those individuals with 2 measurements (9 SMPP) maintained or increased their quality of life. | 79% had improved or maintained scores |
| 2 | **ADSC Client Ability to Perform Activities of Daily Living** | Output | ADSC clients’ functional skills are assessed by ADSC supervisor at admission and every 6 months thereafter | 45 SMPP | Direct observation and client case file | 25 SMPP functional skills were assessed. Two SMPP could not be observed because they attended online programing only. | 38 SMPP functional skills were assessed |
| Outcome | Participants maintain or increase their ability to perform Activities of Daily Living from Time 1 measure to Time 2. | 80% of SMPP with 2 measures of ADLs will maintain their functional ability and will not require family notification for an increased level of care. *Family notification will occur when one of four main ADL outcomes (grooming, toileting, transferring, eating)* *have declined from the prior assessment*. | Comparison of T1 and T2 scores on ADL assessment | 93% of the SMPPs with two measures maintained or increased their ability to perform ADLS from T1 to T2. | 35 SMPP participants or 88% maintained or improved ADLs |
| 3 | **Subsidy Assistance** | Output | Santa Monica ADSC clients receive subsidy to make ADSC accessible to lower-income families | 15 SMPP | Case File – electronic attendance records. | 9 Santa Monica ADSC clients received a subsidy to make ADSC accessible to them. | 21 |
| Outcome | Subsidized SM ADSC clients will increase their attendance from 2 days/week up to 5 days/week (by increments of 1 day based on assessed need). | 4 SMPP | Case File – electronic attendance records | 2 Santa Monica ADSC clients have increased their attendance (with the benefit of financial subsidy) based on assessed need. | 4 |

###### VARIANCE REPORT:

###### Mid-year: *Please identify specific outputs or outcomes not on track for being met by year-end. Provide an explanation of the barriers the program is experiencing and the steps the staff is taking to mitigate the situation.*

###### All outcome outputs and outcomes are on track for being met by year-end.

###### Year-end: *Please provide an explanation for each output or outcome for which achievement is above or below 10% of the projected target.*

The number of Santa Monica participants was 40 for the entire year. The target was 45. This target was missed due to having the position that handles outreach (director) being open for several months. In addition to COVID variants that kept some clients and families away from in-person services. Advertising in local papers had occurred daily in print. Advertising will be re-evaluated and with the new director on board consistent outreach will begin.

**SECTION VIII: PROPERTY MANAGEMENT**

***If this program has entered into a lease agreement with the City of Santa Monica, please provide a status report of facility improvements and routine maintenance performed during the reporting period.***

WISE & Healthy Aging and the City of Santa Monica finalized a new lease agreement for the Ken Edwards Center building effective July 1, 2022. Prior to that time during this reporting period the organization was under the prior month-to-month lease. Regular, daily cleaning (janitorial) is done by WISE & Healthy Aging. The City’s Public Works division had been providing the other regular building-related maintenance and repairs, including oversight of the public elevators and parking structure.

**By submitting this report to the Housing and Human Services Division, I certify that this report is true, complete and accurate to the best of my knowledge and that all disbursements have been made in compliance with the conditions of the Grantee Agreement and for the purposes indicated.**