

**Area Agency on Aging
Area Plan
2018-2021**



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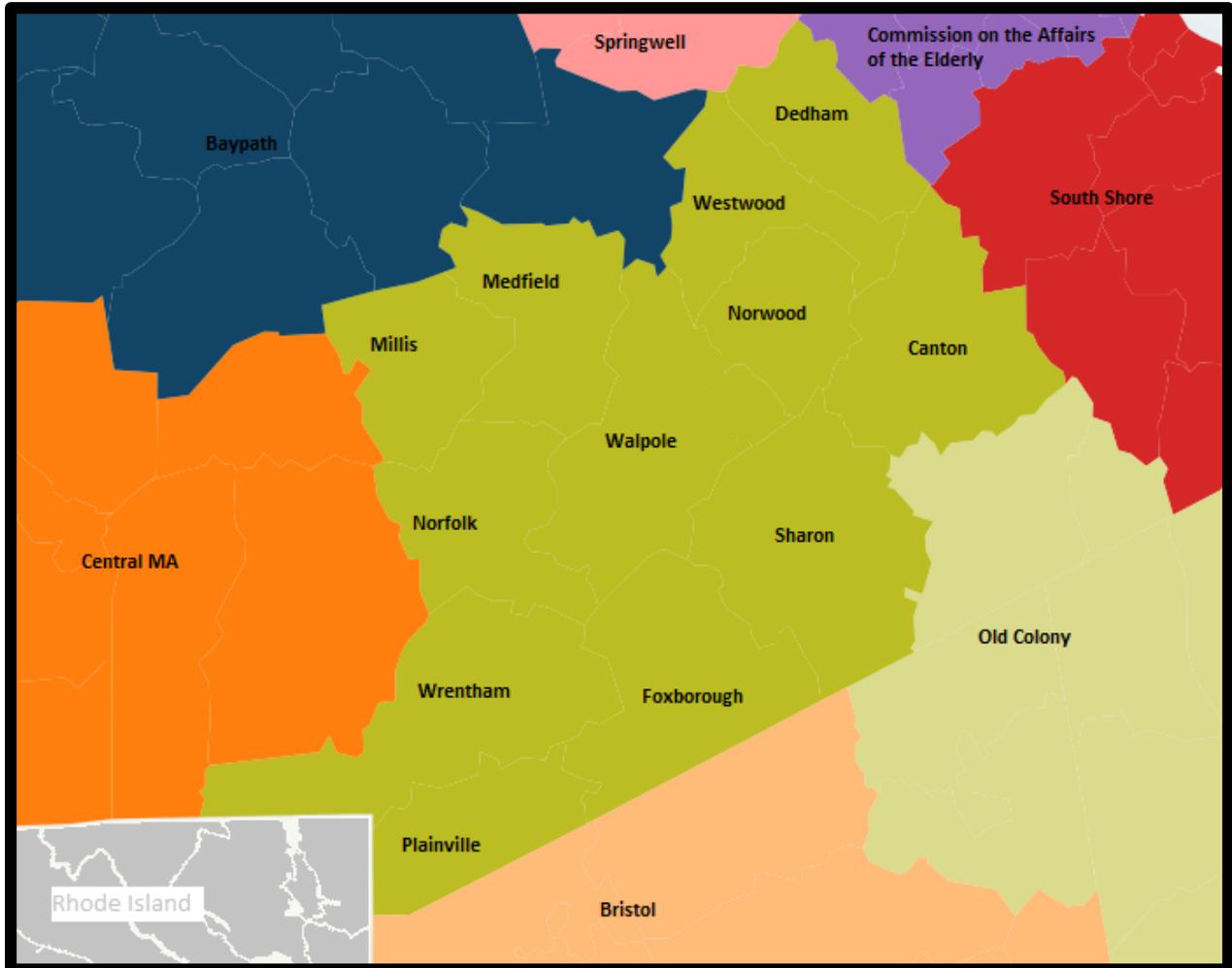
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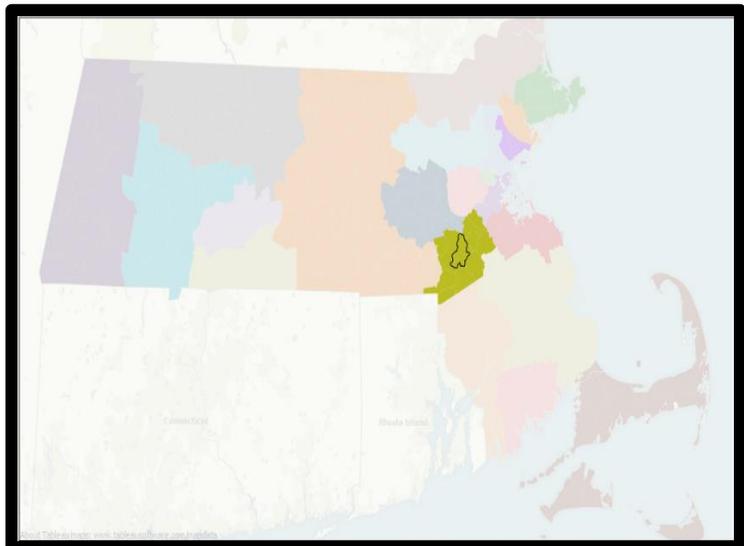
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HESSCO Planning and Service Area Map



Program Service Area Communities

- Canton
- Dedham
- Foxborough
- Medfield
- Millis
- Norfolk
- Norwood
- Plainville
- Sharon
- Walpole
- Westwood
- Wrentham



EXECUTIVE SUMMARY:

Introduction:

Since 1977, Health and Social Services Consortium, Inc. (HESSCO) has served the communities of South Norfolk County as the leader in aging services through designing and delivering a comprehensive system of services and supports to empower older adults, their families and caregivers. On a daily basis, older adults access care and support through HESSCO to maintain independence and age with dignity in the place of their choosing.

HESSCO has a program service area that encompasses twelve towns in South Norfolk County. The towns served are: Canton, Dedham, Foxborough, Medfield, Millis, Norfolk, Norwood, Plainville, Sharon, Walpole, Westwood and Wrentham. According to 2010 census data, collectively these towns are home to over 41,000 residents age 60 and over.

In 1965 the Older Americans Act enacted by Congress authorized many of the programs and services that continue to provide critical support to elders, especially those who are socially and economically isolated. This Act, reauthorized most recently in 2016, provides the foundation for the network of over 600 Area Agencies on Aging across the United States and territories. HESSCO is one of 22 Area Agencies on Aging in Massachusetts. HESSCO also serves as one of 26 Aging Services Access Points (ASAP) within Massachusetts. Nineteen of these ASAPs are co-located with the Area Agency on Aging as in the HESSCO model.

In its role as the Area Agency on Aging HESSCO plays a significant role in planning and community development. HESSCO leverages its expertise and resources to identify community needs, advocate for public policies and regulations that support positive aging, develop new programs to address emerging needs, build coalitions and engage stakeholders in addressing the needs of older adults.

In developing this Area Plan, HESSCO has actively sought information on local needs of older adults, researched trends and available data, and accessed state and federal guidance to ensure that this plan will provide a roadmap for HESSCO to achieve its mission of empowering older adults, their families and caregivers to live with dignity and in the manner and place of their choosing.

Federal, State and Local Initiatives

Federal guidance on the development of the Area Plan on Aging requires Area Agencies on Aging to ensure that the plan addresses focus topic areas that remain a priority for federal planning services and supports. These federal topic areas include:

- The Older Americans Act Core Programs, a set of services authorized and funded through legislation;
- Person-Centered Planning initiatives described as efforts to support services that offer elders and their family caregivers a degree of choice and control over the long-term services and supports they need to live at home;
- Elder justice efforts that support and enhance responses to elder abuse, neglect and exploitation involving adult protective services, Long Term Care Ombudsman programs,

legal assistance programs, law enforcement, health care professionals, financial institutions, and other essential partners.

State guidance on developing the Area Plan deepens the requirement to include all opportunities that the Area Agency on Aging will employ to address the following priorities:

- Support aging in communities;
- Prepare for evolving demographic trends;
- Empower healthy aging;
- Prevent injury, violence and exploitation;
- Strengthen a “no wrong door” approach; and
- Ensure quality, value and person-centered care.

The state guidance provides a format for each Area Agency on Aging to conduct a needs assessment within its program service area and incorporate into the Area Plan any local needs identified. HESSCO completed the Needs Assessment Project between September 1, 2016 and December 31, 2016. HESSCO completed an in-depth review of the community health assessments completed by the hospital and the three Community Health Network Areas (CHNA) regions that cover the program service area. HESSCO completed a review of the trends of all Information and Referral calls that came into the agency throughout Calendar Year 2016. A combination of these analyses have led to the following five assessment statements regarding local needs.

- HESSCO area consumers are interested in services that will allow them to age in-place in their current homes. They want to better understand the services available and have ease of access to these services.
- HESSCO area consumers want improved transportation options for both medical and non-medical needs. Transportation that crosses town borders is important.
- Chronic Disease (e.g., Diabetes), mental health and substance misuse should be health priorities in the HESSCO program service area based on reported rates of incidence, community identification of needs and interest expressed by HESSCO area consumers for programs that focus on healthy aging and physical wellness.
- HESSCO area consumers are interested in improving housing options within their communities. They want to better understand their housing options, have options that are safe and welcoming to all older adults and meet their needs to age within their community.
- HESSCO area consumers are interested in programs that will help them understand their health insurance and/or access the right health insurance, manage medical expenses, and understand financial benefits available.

Further analysis of local needs included a thorough review of data from the U.S. Census Bureau including the 2010 Demographic Profile Data and the 2011-2015 American Community Survey 5 Year Estimates. HESSCO also reviewed data from the University of Massachusetts’ Donohue Institute Population Estimates Program. From this information, HESSCO is preparing for

projected population growth in all twelve HESSCO-area communities in every age category from 60 to 85+. In addition, the HESSCO service area is currently experiencing a population growth in individuals of all ages identifying as a racial/ethnic minority based on a comparison of 2010 U.S. Census Data and the 2011-2015 American Community Survey 5 Year Estimates.

HESSCO Area Plan Goals

The HESSCO Area Plan outlines overarching goals of the Area Agency on Aging and then specifically identifies agency programs and processes that HESSCO will utilize to achieve the goals. The overarching goals identified within the plan are:

- Provide consumers with the information about available services and supports in a manner that allows consumers to make informed decisions about care and services that will best meet his or her needs;
- Improve access and availability of transportation options across the program service area ensuring that consumers can get to the destinations that are important to them;
- Ensure that consumers have access to a full complement of services to meet their care needs and support individual preferences;
- Offer evidence-based healthy aging programs that support disease prevention and health promotion and support age-friendly community initiatives across the program service area;
- Ensure that all programs supported through HESSCO maintain a person-centered approach and adopt principles of participant-direction and decision-support;
- Prevent, detect, assess, intervene and/or investigate elder abuse, neglect and financial exploitation;
- Protect the rights of seniors, people with disabilities, and caregivers across the program service area and provide equal access to the justice system.

Within these seven overarching goals, the HESSCO Area Plan provides a roadmap to a comprehensive system of services and supports for older adults and their caregivers across the program service area. Some of these programs and processes will involve furthering commitments already established while others involve innovations to address emerging needs or new methods of approach. For example, in serving as the Area Agency on Aging for forty years, HESSCO has long-since maintained its commitment to have a strong and well-resourced Information and Referral Department. This Area Plan continues to identify this as an important strategy for achieving agency goals. However, new approaches will include changes in language translation priorities as our population changes, and assessment of cultural appropriateness in how we reach consumers. Other areas of innovation include new approaches to transportation, community empowerment for health and wellness, and opportunities to support elders' rights related to housing and community safety.

Throughout the 2018-2021 timeframe of this HESSCO Area Plan, HESSCO will continue to strengthen and support the programs that have become the cornerstone of care for older adults in South Norfolk County. HESSCO will continue to adapt to the changing needs of area older

adults by analyzing available data and will maintain its focus on empowering older adults to live their life with dignity, in the place and manner of their choosing.

HESSCO AREA PLAN ON AGING

CONTEXT

HESSCO is one of 22 Area Agencies on Aging in Massachusetts and one of 26 Aging Services Access Points (ASAP) within Massachusetts. Nineteen of these ASAPs are co-located with the Area Agency on Aging as in the HESSCO model. HESSCO has served in the capacity of the Area Agency on Aging since 1977 and plays a significant role in planning and community development. HESSCO leverages its expertise and resources to identify community needs, advocate for public policies and regulations that support positive aging, develop new programs to address emerging needs, build coalitions and engage stakeholders in addressing the needs of older adults.

HESSCO developed this Area Plan on Aging building on guidance from three main sources: federal focus areas developed by the U.S. Administration for Community Living, state direction on priority areas within Massachusetts identified by the Executive Office of Elder Affairs, and local needs and priorities specific to the Program Service Area (PSA) identified through a needs assessment process undertaken by HESSCO.

Federal Focus Areas:

The U.S. Administration for Community Living identified the following three topic areas for states to include in the State Plan on Aging and thus must be incorporated into all local Area Plans on Aging.

- The Older Americans Act Core Programs are a set of services authorized and funded through this legislation. They are grouped under broad categories that include the following.
 - Title III-B: Supportive services that provide access to services, in-home services and legal services.
 - Title III-C1: Congregate meals that are located within community dining sites that offer nutritious meals, socialization and various programs of interest to participants.
 - Title III-C2: Home delivered meals that provide a nutritious noon meal and a daily check-in for homebound elders.
 - Title III-D: Evidence-based health education that focuses on disease prevention and health promotion.
 - Title III-E: Family Caregiver Support Program that provides one-on-one counseling and information to caregivers as well as education programs.
 - Long Term Care Ombudsman Program that provides advocacy for residents of long term care facilities.
- Person-Centered Planning initiatives described as efforts to support services that offer elders and their family caregivers a degree of choice and control over the long-term services and supports they need to live at home.

- Elder justice efforts that support and enhance responses to elder abuse, neglect and exploitation involving adult protective services, Long Term Care Ombudsman programs, legal assistance programs, law enforcement, health care professionals, financial institutions, and other essential partners.

The Older Americans Act, the landmark legislation that developed the system of services and supports delivered by Area Agencies on Aging (AAA), also identifies three services that should remain a priority of every AAA across the United States. These service priorities include Access Services (supporting older adults and caregivers in gaining the services they require), In-Home Services (services that support older adults in their community dwelling), and Legal Services (services that provide equal access to legal representation for older adults).

State Priority Areas:

State guidance on developing the Area Plan on Aging includes the identification of several priority areas from the Massachusetts Executive Office of Elder Affairs. By ensuring that each local Plan incorporates strategies for achieving goals related to these priorities, the state assures that the State Plan on Aging will be both comprehensive and strategic in its approach to empowering older adults across service areas. The state priority areas are:

- Support aging in communities;
- Prepare for evolving demographic trends;
- Empower healthy aging;
- Prevent injury, violence and exploitation;
- Strengthen a “no wrong door” approach; and
- Ensure quality, value and person-centered care.

Ensuring a “no wrong door” approach means that the state has a system of educating consumers on the available long term services and supports and entry points into services are streamlined and coordinated at both a local and state-wide level.

Local Needs Assessment:

The state guidance provides a format for each AAA to conduct a needs assessment within its PSA and incorporate into the Area Plan on Aging any local needs identified. HESSCO completed the Needs Assessment Project between September 1, 2016 and December 31, 2016. During this process, HESSCO conducted 14 different activities across the service area that combined meeting with consumers face-to-face, collecting surveys from consumers and engaging stakeholders in discussion. In all the HESSCO team engaged 212 consumers in face-to-face discussion, analyzed 98 surveys from consumers, received 33 stakeholder surveys and engaged 35 additional stakeholders in discussion. Throughout this process, HESSCO ensured that within the consumers engaged, there was representation across racial and ethnic populations, from low-income elders and from socially isolated elder populations. A full review of the methodology and results of the 2016 Needs Assessment Project are outlined in Attachment A.

Adding to these activities, HESSCO has completed an in-depth review of the community health assessments completed by the three Community Health Network Areas (CHNA 7, CHNA 18 and CHNA 20) that cover the HESSCO program service area and the community health needs assessment completed by Norwood Hospital, the only full-service hospital within the HESSCO program service area. HESSCO also completed a review of the trends of all Information and Referral calls that came into the agency throughout calendar year 2016. Through a combination of these analyses HESSCO has established the following five primary assessment statements regarding local needs.

- HESSCO area consumers are interested in services that will allow them to age in-place in their current homes. They want to better understand the services available and have ease of access to these services.
- HESSCO area consumers want improved transportation options for both medical and non-medical needs. Transportation that crosses town borders is important.
- Chronic Disease (e.g., Diabetes), mental health and substance misuse should be health priorities in the HESSCO program service area based on reported rates of incidence, community identification of needs and interest expressed by HESSCO area consumers for programs that focus on healthy aging and physical wellness.
- HESSCO area consumers are interested in improving housing options within their communities. They want to better understand their housing options, have options that are safe and welcoming to all older adults and meet their needs to age within their community.
- HESSCO area consumers are interested in programs that will help them understand their health insurance and/or access the right health insurance, manage medical expenses, and understand financial benefits available.

In addition to these five needs assessment statements, the process elicited four additional statements of need. However, these statements did not reach the same level of urgency in both quantitative survey results and qualitative discussion as the above five statements. These areas of need include seeing communities become more age-friendly or dementia friendly; providing equal access to the justice system by offering seniors legal counsel and prevention of elder abuse, neglect and exploitation; assisting older adults experiencing depression, anxiety, alcohol or drug use; having job opportunities or social activities.

Local Changing Demographic Analysis

According to U.S. Census Data, all 12 towns within the HESSCO Program Service Area (PSA) have seen population growth between the 2010 Census and the 2011-2015 American Community Survey 5-Year Estimates. When looking at population projections for older adults within specific age categories, every age category from 60 to 85+ in our twelve towns is projected to grow between 2010 and 2020. Several of our towns, will double their population in some categories. One town, Norfolk, is projected to double its population growth in the 65 – 74, 75-84 and 85+ age categories by 2020.

In addition to a changing age demographic, the HESSCO PSA has seen growth in individuals identifying as a racial/ethnic minority. When comparing the 2010 U.S. Census and the 2015 American Community Survey 5-Year Estimates, 11 HESSCO-area towns have seen growth in at least one racial/ethnic minority community (Table 2). Nine towns had increases in the Asian population. Nine towns had increases in their Hispanic population, with this population more than doubling in two HESSCO communities. Four of HESSCO’s larger towns experienced growth in the Black or African American community.

Planning services and supports for this burgeoning population of elders and the increasing diversity within HESSCO’s service area is central to the 2018-2021 HESSCO Area Plan. Programs and services will strengthen and support the HESSCO mission to provide South Norfolk County elders, caregivers, and individuals with disabilities the opportunity to live life with dignity, independence, and self-determination, and to achieve the highest possible quality of life.

Table 1: Projected Change in Population by Age Between 2010-2020				
Town (Total Population in 2010 Age 60-85+)	Projected Change: Age 60-64 Between 2010-2020	Projected Change: Age 65-74 Between 2010-2020	Projected Change: Age 75-84 Between 2010-2020	Projected Change: Age 85+ Between 2010-2020
Canton (4,937)	+25%	+54%	+19%	+31%
Dedham (5,973)	+39%	+45%	+11%	+74%
Foxborough (3,228)	+41%	+45%	+37%	+40%
Medfield (2,010)	+45%	+67%	+32%	+60%
Millis (1,459)	+32%	+99%	+38%	+89%
Norfolk (1,629)	+53%	+116%	+100%	+123%
Norwood (6,542)	+35%	+46%	+7%	+21%
Plainville (1,556)	+54%	+53%	+50%	+19%
Sharon (3,401)	+30%	+85%	+41%	+31%
Walpole (4,960)	+46%	+59%	+20%	+38%
Westwood (3,438)	+39%	+45%	+17%	+14%
Wrentham (2,053)	+55%	+117%	+34%	+45%
Data Source: UMASS Donohue Institute: Population Estimates Program http://pep.donahue-institute.org ; accessed March 2017 Analysis completed by HESSCO March 2017				

Table 2: Change in Minority Population in HESSCO Program Service Area 2010-2015 (Total Population – Not Age Specific)

Town	Black or African American	American Indian and Alaska Native	Asian	Native Hawaiian and Other Pacific Islander	Hispanic or Latino
Canton	-6%	-58%	+28%	+44%	+55%
Dedham	+24%	-22%	+56%	-33%	+25%
Foxborough	+36%	-98%	+4%	-100%	+53%
Medfield	-40%	-3%	+30%	-100%	+150%
Millis	-84%	-100%	+8%	-100%	+156%
Norfolk	-3%	+79%	-33%	+/- 0	-15%
Norwood	-24%	-78%	+18%	+55%	+27%
Plainville	-48%	+125%	-0.3%	+/- 0	-86%
Sharon	+20%	+131%	+27%	-100%	+40%
Walpole	+40%	+79%	+47%	-100%	+4%
Westwood	-67%	-100%	+42%	+1500%	+56%
Wrentham	-15%	-45%	-72%	-100%	-3%

Data Sources: U.S. Census Bureau: 2010 Demographic Profile Data and U.S. Census Bureau: 2011-2015 American Community Survey 5-Year Estimates; Category of Race alone or in combination with one or more other races <https://www.census.gov/quickfacts/MA> and https://factfinder.census.gov/faces/nav/jsf/pages/community_facts.xhtml; accessed March 2017.
Analysis completed by HESSCO March 2017

AREA PLAN GOALS AND STRATEGIES

Goal 1:

Provide consumers with the information about available services and supports in a manner that allows consumers to make informed decisions about care and services that will best meet his or her needs.

Rationale for Goal	
Local Need Identified:	Services that allow aging in-place; Understanding services and improved access to services
State Priority Identified:	Support Aging in Communities; Support “no wrong door” services; Prepare for evolving demographic trends
Federal Focus Area:	Older American’s Act Core Program; Title III-B; Access Services Priority

Strategies for Goal 1:

Information and Referral

To accomplish this goal HESSCO will continue to dedicate resources and support for a strong Information and Referral Department. This Department will be staffed and trained to manage over 3,180 calls, representing a 10% increase in the number of calls in Calendar Year (CY) 2016. Staffing needs for this Department will be assessed on an ongoing basis as determined by call trends reports and the needs of the consumers seeking this service. Ongoing training for this Department will continue to include principles of customer service and will also focus on the topic areas derived from the CY 2016 Call Trends reports and the Needs Assessment Project conducted by HESSCO from September 1- December 31, 2016. This training will include but will not be limited to: Aging Services Access Point services, nutrition services, financial services and supports, cultural competency and transportation services. HESSCO will continue its membership in the Alliance of Information and Referral Systems (AIRS) and will ensure that all Information and Referral staff will achieve the AIRS certification and access the training and online resources.

Outreach

The Needs Assessment Project completed by HESSCO indicated that consumers and caregivers have a strong need to understand who to call when services are needed and how to access the available services. To meet this need, HESSCO will engage in a comprehensive outreach initiative. This initiative will encompass vulnerable elders from ethnic and racial minorities, elders who are socially isolated, and elders who are low-income. HESSCO currently has outreach materials translated into Russian and Mandarin. HESSCO will assess the need and then translate documents into other languages based on need and demographic data gathered through the U.S. Census and our collaborative work with community organizations. HESSCO will continue to provide outreach to the Lesbian, Gay, Bisexual, and Transgender (LGBT)

community through a local consumer network developed by HESSCO’s Lakeside Café program, an LGBT focused meal-program.

HESSCO will support an outreach goal of providing Options Counseling through local focal points such as the Senior Centers in our area. Our Options Counseling staff will hold monthly office hours at these focal points in order to increase our reach into the community. In addition, HESSCO will offer Options Counseling to local primary care physician offices during the 2018-2021 Area Plan timeframe.

HESSCO will review its outreach documents for literacy standards, ensure that it is culturally appropriate and accessible in multiple formats. HESSCO will also conduct outreach with area faith communities to reach their constituents in a format that best meets their needs.

Goal 2:

Improve access and availability of transportation options across the program service area ensuring that consumers can get to the destinations that are important to them.

Rationale for Goal	
Local Need Identified:	Improved transportation options for both medical and non-medical needs; transportation that crosses town borders
State Priority Identified:	Support aging in communities; Ensure quality, value and person-centered care.
Federal Focus Area:	Older Americans Act core programs Title III-B; Person-Centered Planning; Access Services Priority

Strategies for Goal 2:

Transportation Services

HESSCO will build on its previous work to improve access and availability of transportation. In previous years, HESSCO has had limited and at times no organizations bid on Title III B funds to provide transportation to area seniors. With input from its Advisory Council and the area Councils on Aging, HESSCO retained the funds and developed a process for the Councils on Aging to determine local transportation needs for individual consumers and with HESSCO’s support, arrange fulfillment of those rides with contracted providers. As transportation continued to be a primary area of need identified by consumers during the Needs Assessment project, HESSCO, with approval of its Advisory Council, will continue to meet transportation needs using this same format.

Access Information

There are two Regional Transit Authorities that serve HESSCO’s PSA. In addition there are twelve Councils on Aging that provide varying levels of transportation locally. Several towns have additional volunteer transit programs and/or have private funds to access for transportation assistance. HESSCO will continue to maintain information on all available resources for transportation so that consumers can be informed quickly and accurately as to their

transportation options. This will also allow HESSCO to ensure that Title III-B funds are used after all other sources of transportation are exhausted.

Innovation/ New Approach

In order to innovate and develop new transportation options, HESSCO is co-chairing the Neponset Valley Regional Coordinating Council which encompasses all of HESSCO’s PSA. As a leader on this committee, HESSCO is exploring how Councils on Aging may pool their resources to better meet the increasing demand for transportation in a fiscally responsible manner. HESSCO is also exploring the opportunity to develop public-private partnerships that may expand capacity to meet the transportation needs of area consumers. HESSCO is also implementing a plan with area providers to work collaboratively with Massachusetts Ride Match, a consumer-facing searchable database of transportation options. In addition, HESSCO will act as a conduit for the transit authorities operating travel training programs and educational outreach on para-transit options. Partnership with the Regional Transit Authorities will be a centerpiece of the HESSCO Area Plan 2018-2021.

Goal 3:

Ensure that consumers have access to a full complement of services to meet their care needs and support individual preferences

Rationale for Goal	
Local Need Identified:	Services that allow aging in-place; Understanding services and improved access to services; Chronic disease, mental health and substance misuse
State Priority Identified:	Support aging in communities; Prepare for evolving demographic trends; Empower healthy aging; Prevent injury, violence and exploitation; Ensure quality, value and person-centered care
Federal Focus Area:	Older Americans Act Core Programs Title III-C1,C2,E, Long Term Care Ombudsman; Person-Centered Planning; Elder justice; In-Home Services Priority

Strategies for Goal 3:

Home and Community Based Services

HESSCO will continue to provide a strong focus on assessing eligibility for home and community based services. HESSCO will also continue to provide service planning and/or care management for consumers who choose to develop a care plan that meets their individual needs. As a provider of state-funded Home Care Program services, HESSCO will offer eligible consumers the opportunity to develop a service package that may include but not limited to the following types of services: homemaker services, adult day health, laundry services, personal care or home health services, personal emergency response systems, adaptive equipment, companion services, medication dispensing, home delivered meals, transportation, grocery shopping, chore services, vision rehabilitation, respite care, and habilitation therapy.

Within the assessment for home and community based services, HESSCO will ensure a seamless referral to additional services needed for advocacy and more specialized support such as the Ombudsman Program or Adult Protective Services. Ensuring that vulnerable elders or elders who may be victims of abuse or neglect receive the services and supports they need will continue to be a high priority for HESSCO. The annual trainings for all Home Care Program staff will include an Adult Protective Services training in how to recognize and report abuse, neglect and financial exploitation as well as the role of the Ombudsman for consumers currently residing in nursing facilities.

Innovation/New Approach

In addition, HESSCO will develop new service options either through the State Home Care program or private contracts/grant programs. HESSCO is participating in a pilot program to implement a telebehavioral health program which is designed to expand access to behavioral health services for those consumers who are homebound or may otherwise be unable to access services in-person. This project, funded through the Health Policy Commission and in partnership with Riverside Community Care, Mystic Valley Elder Services and Springwell will pave the way for new methods to provide care and support for services that are historically difficult to deliver to the elder population. HESSCO will continue to look for ways to meet the rising demand of behavioral health/substance use concerns in the PSA.

In an effort to provide coordinated care and support to consumers living with Alzheimer's disease and dementia, HESSCO has formed a multi-disciplinary Dementia Team. The team is comprised of HESSCO staff who have received specialized training and is available for consultation for situations or circumstances that make it more difficult to provide care and support. The team is available for consultations for any HESSCO staff member, regardless of program or department as well as available for community professionals who may be providing services and supports in partnership with HESSCO.

Transitions in Care

HESSCO strives to improve transitions in care for individual consumers within the PSA through ongoing outreach and coordination with other service providers across the care continuum. HESSCO will offer the services of a Community Transitions Specialist for any consumers currently residing in a care facility that seek discharge to a less restrictive community-based setting. HESSCO's Care Managers and Home Care Program Nurses will provide ongoing coordination and discharge support for all current HESSCO consumers who may require short-term admission to a care facility thus ensuring that a return to home is successful. In addition, HESSCO's Comprehensive Screening and Services Model (CSSM) Nurses will identify all possible community living options for MassHealth consumers prior to issuing an approval for long-term care in a facility.

HESSCO staff will also provide annual educational programs to area providers of acute care and post-acute care on identifying consumers who are appropriate for discharge to a community-based setting and working collaboratively with community-based providers. HESSCO will

continue to participate on a Post-Acute Care provider committee coordinated by Norwood Hospital to support all of these care transitions efforts.

Nutrition and Meal Support

HESSCO has always placed significant value in the Title III-C1,C2 meal support programs funded through the Older American's Act. The meals offered through the congregate program will remain a focused growth area for HESSCO. HESSCO will re-brand its congregate meal programs as Friendship Cafés to highlight the important social value they bring to the community in addition to the nutrition support for consumers. These café programs forge an opportunity for HESSCO to provide support to some of the most vulnerable elders within our PSA. HESSCO will maintain a focus on providing monthly meal support for the Lesbian Gay Bisexual Transgender (LGBT) community through its Lakeside Café program. In addition, HESSCO will continue to offer monthly ethnic meal programs through our Chinese Meal Program and our Indian Meal Program. These programs provide an opportunity for vulnerable or isolated elders to both offer and receive social support, receive nutrition support from HESSCO and provide an avenue for HESSCO to reach consumers in need of additional services. As the population evolves over the next four years, HESSCO will review no less than annually the need for additional congregate meals programs for vulnerable populations.

Along with its congregate meals program, HESSCO continues to place high value on its home delivered meals program. This program promotes good nutrition and assists vulnerable, homebound elders maintain nutritional health. HESSCO will continue to consider this a priority program. HESSCO currently offers a hot noon-time meal delivered to homebound elders in each town within the PSA. For those consumers who need additional meal support, HESSCO has available a frozen weekend meal and/or a cold evening meal. In addition, it is of great importance that HESSCO ensures the meal program meets both the health and cultural needs of individual consumers. Thus HESSCO offers therapeutic meals such as renal-diet appropriate meals, ground or pureed meals as well as Kosher and vegetarian meals. This allows HESSCO to provide nutrition support in a manner that meets an individual's needs and preferences. In addition, HESSCO will continue to offer emergency shelf-stable meals to mitigate the risk to our consumers who cannot receive a home delivered meal during a weather-related emergency and will seek outside private financial support when needed for this program.

The HESSCO nutrition program will continue its longstanding commitment to the use and provision of fresh and local fruits and vegetables. HESSCO will distribute farmer's market coupons in each town and deliver fresh food items to home delivered meal consumers.

Caregiver Support

As elders face challenges when needing care and support services, so do family caregivers. HESSCO will continue to support the Massachusetts Family Caregiver Support Program. Through this program, HESSCO will offer caregivers the opportunity for individualized support and care planning with a strong emphasis on self-care for the caregiver. HESSCO will also provide education opportunities, and linkages to services and supports. In addition, HESSCO

will continue to innovate ways to assist caregivers of vulnerable elders such as the distribution of Alzheimer’s Care and Safety Kits and Activity Kits for caregivers.

HESSCO is formulating a response to potential for growth in the PSA of grandparents raising grandchildren. While this information is not yet born out in the data, HESSCO is learning from its community partners that due to the opioid crisis experienced locally, statewide and nationally there are more grandparents with primary care responsibilities for young children. HESSCO is reaching out to one school system within the PSA to develop an outreach model for these grandparents for caregiver support and once developed, will spread this outreach across the PSA.

HESSCO will also conduct caregiver education and outreach for caregivers within the LGBT community which is often a socially isolated population of caregivers. To accomplish this, HESSCO will meet with consumers attending the Lakeside Café, a monthly LGBT congregational meal program within the PSA and will collaborate with the LGBT Aging Project.

Goal 4:

Offer evidence-based healthy aging programs that support disease prevention and health promotion and support age-friendly community initiatives across the PSA

Rationale for Goal	
Local Need Identified:	Chronic disease, mental health and substance misuse
State Priority Identified:	Support aging in communities; Empower healthy aging; Prevent injury, violence and exploitation
Federal Focus Area:	Older Americans Act core programs Title III-C1,D

Strategies for Goal 4:

Evidence-Based Programming

HESSCO will continue to support evidence-based healthy aging programs through its Title III-D programs and Title III-C Nutrition programs. HESSCO has established a plan with partner Baypath Elder Services to access the services of a Chronic Disease Self-Management Coordinator to assist HESSCO with the management of local evidence-based programs. HESSCO will leverage current relationships with local partners such as the Hockomock YMCA, local Housing Authorities and Councils on Aging as potential hosts for these programs. The Hockomock YMCA is one of few YMCA’s across the nation that is approved to provide an evidence-based Diabetes Prevention Program for Medicare beneficiaries. HESSCO will coordinate with the Hockomock YMCA to support their efforts in providing this program within the PSA. Healthy aging and health promotion will be incorporated into HESSCO’s comprehensive outreach plan. HESSCO will support the provision of evidence-based programs across its PSA including but not limited to: My Life, My Health, Matter of Balance, Diabetes Self-Management, Chronic Pain Management, Savvy Caregiver, Diabetes Prevention Program, and Healthy Eating for Successful Living.

Age-Friendly Communities

Within the HESSCO PSA, one community, Dedham, has a fully developed Age-Friendly initiative which has included a community-wide survey, and two community forums and grant funding to hire a staff member. HESSCO will continue to meet at least quarterly with this community action committee, Livable Dedham, to facilitate contact with other Age-Friendly communities, to provide technical assistance and community organizing support throughout Dedham's transformation process. Over the course of this Area Plan 2018-2021, HESSCO will collect information on best practices and offer this technical assistance and community organizing support to other municipalities within the PSA that may want to initiate this effort.

Community Health Initiatives

HESSCO will continue to play an active role in Norwood Hospital's Community Benefits Committee. This committee assesses the health needs of the community and responds with programming opportunities. In addition, HESSCO will continue to have a leadership role within the Community Health Network Area (CHNA 7) that serves seven towns within the HESSCO PSA. Through the CHNA, HESSCO will support community health educational programming by facilitating senior-focused general meetings as well as seek funding opportunities for health and wellness programming. HESSCO has also committed to serving on a joint committee of two CHNA regions (7 & 20) serving the HESSCO Program Service Area. This committee will provide guidance on use of the Determination of Need funding via Norwood Hospital. In addition, HESSCO will support the mental health screening initiative of the CHNA 7 by encouraging area seniors, adults living with disability and caregivers to access the mental health screening tools made available in multiple formats by the CHNA 7. HESSCO will provide links to this screening tool online as well as opportunities to develop a mental health screening kiosk within the HESSCO PSA.

HESSCO will remain an active member on a Health Innovations Collaborative with the Hockomock YMCA, and area health care facilities. HESSCO will continue to be a part of this collaboration as an agent of change for health and wellness across the PSA.

Oral Health

HESSCO places high value on assisting seniors in accessing oral care for their overall health and wellness. HESSCO will continue to participate in the Elder Dental Programs facilitated by the Community Visiting Nurses Association and held within the HESSCO PSA. HESSCO will continue to be an active participant in these programs by providing nutritional counseling, health insurance counseling and outreach to consumers.

Goal 5:

Ensure that all programs supported through HESSCO maintain a person-centered approach and adopt principles of participant-direction and decision-support

Rationale for Goal	
Local Need Identified:	Services that allow aging in-place; Understanding services and improved access to services; Programs to understand health insurance and financial benefits
State Priority Identified:	Support aging in communities; Empower Health Aging; Ensure quality, value and person-centered care; Strengthen a no wrong door approach
Federal Focus Area:	Person-Centered Planning; Older Americans Act core programs - Long Term Care Ombudsman.

Strategies for Goal 5:

Staff Development

HESSCO will ensure that the appropriate program staff understand and recognize the principles of person-centered planning. This will be accomplished by HESSCO’s commitment to provide training in Motivational Interviewing, Strengths-Based Social Work Principles, and Shared Decision-Making. These principles are incorporated into all programmatic work at HESSCO. In addition, all HESSCO staff, regardless of department or role, receive training and support around advance care planning using the Honoring Choices model. With staff empowered to plan for their own future health care needs, HESSCO is prepared to empower others.

Home and Community Based Services

HESSCO adopts the principles of person-centered care planning throughout all of its service planning activities. When a consumer is eligible for the state-funded Home Care Program, a Care Manager actively listens to the consumer’s area of need and identifies for the consumer the services that may meet those needs that are available through the program as well as services that may not be included in the Home Care Program. The consumer is then able to develop a plan of care with the Care Manager.

HESSCO will also continue to commit dedicated staff for the state-funded Consumer-Directed Care Program. With this program, the Care Manager acts more as a facilitator for the plan of care developed by the consumer. In addition, HESSCO will work with Personal Care Attendant Programs within the HESSCO PSA to ensure that consumers have access to this program that provides consumer choice and control over their service providers. Both of these programs support the principles of participant-directed care and person-centered planning, allowing consumers to determine the mix of personal assistance supports and services that work best for them.

Caregiver Support

HESSCO’s model for caregiver support allows the caregiver participant to direct the assessment and service planning to the areas of highest need as identified by the caregiver. This allows the Caregiver Specialist to ensure that the entire process is participant-directed and the service plan developed is both person-centered and strengths-based. The HESSCO program will focus

heavily on the opportunity for the caregiver, with support from the Caregiver Specialist, to develop a self-care plan to assist the caregiver in building resiliency and alleviating stress.

Options Counseling

The Options Counseling program at HESSCO will continue to embrace a participant-directed, decision-support model. In this model, a consumer identifies their greatest areas of need and the HESSCO Options Counselor responds with information on the various programs and services available to meet those needs. Once informed of all options, the consumer can then make an informed choice as to where and how to access care and support, determining the mix of personal assistance supports and services that work best for them. Through this program, HESSCO also facilitates access to the array of long term services and supports available across the care continuum and across provider types, thus fostering the “no wrong door” approach.

Serving Health Insurance Needs of Everyone (SHINE)

The SHINE program at HESSCO will continue to fully support a participant-directed model of support. When in need of advocacy or health insurance benefits review, a consumer works with a SHINE counselor to identify their needs, a SHINE counselor will research all options and then inform the consumer of the full slate of possibilities. This empowers the consumer to make an informed decision, and the SHINE counselor can then offer advocacy services and access information to ensure that the consumer has all the possible tools to implement their plan. HESSCO will continue to look for community partners that can host SHINE counselors, including acute care settings and community-based settings such as senior housing complexes that will further extend the reach of the program.

Ombudsman Program

The HESSCO Ombudsman Program places the highest value on participant-direction in all of its activities and services. The Program requires that the participant is central to the process of accessing support, is informed of all rights, and has the opportunity to express needs, concerns or rights violations. When verbal expression is not possible, the Ombudsman will work with the consumer to identify non-verbal expression, as well as with families, caregivers, and guardians to ensure that the individual’s needs and rights remain at the center of all efforts. This program will continue to maintain this standard of participant-direction and person-centered planning.

Empowering the Community

HESSCO will continue efforts to empower seniors and caregivers residing in the community to consider their needs and wishes around care and to make their wishes known to family, friends, advocates and healthcare providers. HESSCO will hold at least one event annually open to the community to empower consumers to develop a healthcare focused advance care plan. To do this, HESSCO has aligned with Honoring Choices Massachusetts and will inform consumers of the five planning documents that are accepted in Massachusetts and use the Honoring Choices model of Explore, Plan, Connect. HESSCO will also embark to empower its 600 volunteers and its office staff to formulate their own advance care plan.

Goal 6:

Prevent, detect, assess, intervene and/or investigate elder abuse, neglect, and financial exploitation.

Rationale for Goal	
Local Need Identified:	Providing equal access to the justice system by offering seniors legal counsel and prevention of elder abuse, neglect and exploitation
State Priority Identified:	Prevent injury, violence and exploitation; Support aging in communities
Federal Focus Area:	Elder justice; Person-centered planning

Strategies for Goal 6:

Adult Protective Services

HESSCO will maintain its full support of the Adult Protective Services unit with staff dedicated to investigate reports of physical abuse, sexual abuse, caregiver neglect, self-neglect and financial exploitation. This unit will connect at-risk community members to services and supports using person-centered service planning principles. HESSCO will provide training for the Adult Protective Services staff on trauma-sensitive practices, domestic violence and financial exploitation.

HESSCO will maintain key relationships with financial institutions, medical professionals, and law enforcement that support a broad-based community response to elder abuse and financial exploitation. HESSCO will support local taskforces that involve municipalities and service providers that work together to resolve difficult situations emerging within the community.

Elder Abuse and Financial Exploitation Prevention

HESSCO will conduct an education campaign to educate the public and key informants regarding the issues of elder abuse and financial exploitation. The topics of this campaign will include but not be limited to: raising awareness on all forms of elder abuse, recognizing signs of elder abuse, neglect, and exploitation, how to make a report of elder abuse, how to work with HESSCO as a key informant, and recognizing scams. HESSCO will complete nine education programs annually with the target audience of the general public, service provider groups, and first responders across HESSCO’s PSA.

HESSCO will remain committed to implementing a Money Management program for at-risk elders who wish to remain as independent as possible with bill-paying tasks and preserve their financial decision-making. This program will continue to operate across the HESSCO PSA and will use volunteers trained and supervised by HESSCO staff.

Goal 7:

Protect the rights of seniors, people with disabilities, and caregivers across the PSA and provide equal access to the justice system

Rationale for Goal	
Local Need Identified:	Providing equal access to the justice system by offering seniors legal counsel and prevention of elder abuse, neglect and exploitation; Understand health insurance and financial benefits; Better understand housing and have housing that is safe and meets needs; Chronic disease, mental health and substance misuse.
State Priority Identified:	Prevent injury, violence and exploitation; Support aging in communities; Strengthen “no wrong door” policy
Federal Focus Area:	Elder justice; Person-centered planning; Older Americans Act Core Programs – Title III-B, D; Legal Services and In-Home Priorities

Strategies for Goal 7:

Legal Services

HESSCO will continue to commit Title III-B funds each year to provide Legal Services across the PSA. HESSCO works collaboratively with its sub-grantee to ensure that seniors have access to legal support and representation regardless of ability to pay. The primary focus areas for this work will be providing legal representation for seniors experiencing concerns related to housing, family/guardianship, estate/life planning, financial issues, access to public benefits or income maintenance. The program will prioritize legal services for those consumers who are at or below poverty level or who could otherwise not afford legal representation. HESSCO will remain committed to funding the program above the requirements outlined in the Older Americans Act.

HESSCO will also work to expand access to legal services by referring consumers to the Massachusetts Senior Legal Helpline. This Helpline program will provide free legal information and referral services and facilitate access to legal support. HESSCO will ensure that information about this program is included in its comprehensive outreach program.

Ombudsman Program

HESSCO will continue to operate a state-designated Ombudsman Program across the PSA. Through this program, HESSCO will advocate for the rights of nursing and rest home residents and work to resolve problems and improve care and quality of life. This program will assist residents in accessing the supports and services to return to their homes and communities if this is identified as a goal through the participant-directed process.

HESSCO will expand capacity of this program by recruiting, training and supervising volunteer Ombudsman who are assigned to local facilities. HESSCO will also coordinate with the Department of Public Health on issues related to patient safety and facility compliance.

HESSCO will train facility personnel in long term care facilities and stakeholders on the rights of residents, the functions of the Ombudsman Program, and how to prevent, detect and report cases of abuse or neglect. In addition the HESSCO Ombudsman Program will support the development of resident and family councils and empower residents and family members to be active advocates.

Housing Rights

During the 2016 HESSCO Needs Assessment Project, participants identified the need to protect the rights of residents of senior housing complexes. Participants identified several areas of concern, including the need to protect LGBT residents from bullying and emotional abuse perpetrated by other residents, as well as the need for Housing Authorities to recognize the power and capacity of Resident Councils. HESSCO will conduct a survey of area Housing Authorities to assess need for education and sensitivity training for residents within housing complexes and will then work collaboratively to coordinate the training within the PSA. In addition, HESSCO will coordinate with local Housing Authorities to address staff training needs regarding cultural competency for LGBT issues and effective empowerment models for Resident Councils.

In addition, HESSCO will work with the Housing Authorities in the PSA to support additional programming needs. One housing authority has approached HESSCO to map out a plan for FFY 2018 to review already-available funding such as Title III-D evidence-based programs to support health education needs of its residents. Additionally, HESSCO will schedule Options Counseling and SHINE support opportunities for these residents.

As several efforts and initiatives evolve over the four year Area Plan, HESSCO will participate in regional housing focused groups such as those that develop from the age-friendly municipal efforts, or those focused on developing village-style or naturally occurring retirement communities within the PSA.

Mental Health First Aid

In Calendar Year 2017, HESSCO received grant funding from CHNA 7 to provide four sessions of Mental Health First Aid, an eight hour training course that educates community members and professionals in the appropriate response for someone experiencing an urgent or emergent mental health or substance use concern. In providing first aid to someone experiencing a mental health concern, the responder is encouraged to connect the individual to resources and supports.

Attendees receive proof of their mental health first aid certification provided by Mental Health First Aid USA. The completion of this grant cycle occurs in the first quarter of this HESSCO Area Plan 2018-2021. Due to the early success of this program, HESSCO will collaborate with funders to offer this training at least annually at within the PSA. With more individuals within

the PSA armed with education on how to respond to emergent mental health issues before a crisis occurs, HESSCO will reduce the burden on emergency services providers and improve the quality of life for those living with mental illness.

Additional HESSCO Planning Priorities

Quality Assurance and Quality Improvement

Quality Assurance (QA) is a core HESSCO value and quality management is an integral component of our agency function. HESSCO remains committed to operating a program of continuous quality improvement. HESSCO has a Quality Assurance Manager who provides oversight, direction and coordination of all quality assurance and improvement efforts. HESSCO develops a Quality Assurance plan each year that defines success for HESSCO programs and implements a measurement plan to assess achievement towards program goals. The Quality Assurance Committee at HESSCO is comprised of representatives from each of the HESSCO Departments: Home Care, Nutrition, Planning, and Fiscal. The QA Committee prioritizes primary quality objectives, sets goals for improvement and each Department works to plan, implement, measure and analyze the quality improvement goals.

Civic Engagement

As the Area Agency on Aging, HESSCO recognizes the important role it plays in the civic engagement of older adults across the PSA. HESSCO employs a Community Relations Manager and Volunteer Coordinator to lead the engagement of its active volunteer force of over 600 individuals and to recruit new volunteers. HESSCO offers older adult volunteers the opportunity for meaningful engagement within each of its twelve towns and will continue these efforts over the course of this Area Plan. Volunteers are currently engaged in all of the core Older Americans Act programs, Title III B, C1, C2, D, E and Long Term Care Ombudsman programs. In addition, the SHINE program operates with minimal paid staff and the extensive use of volunteers. The engagement of these volunteers, most of whom are older adults remains a cornerstone of this agency's commitment to its community and to the Older Americans Act.

Attachment A: HESSCO Needs Assessment Project Results

Methodology

The Director of Planning and Community Development completed a series of fourteen public activities across the Program Service Area (PSA) in order to garner information on the needs of the community. These activities were a combination of large public gatherings (>15), small public gatherings, face-to-face discussion, and survey distribution. The result is a combination of qualitative and quantitative data on the needs of the older adult population and their caregivers. With a majority of the activities that included a face-to-face discussion, the attendees were also given a survey to provide an additional opportunity to supply information for the project.

A comprehensive review was completed of the community health assessments conducted by the Community Health Network Areas (CHNA). Three CHNAs serve the HESSCO PSA: CHNA 7, CHNA 18 and CHNA 20. HESSCO completed a review of the Community Health Needs Assessment completed in 2015 by Norwood Hospital, the only full-service hospital within the HESSCO PSA. HESSCO also analyzed a report of the call topics of all calls received by the HESSCO Information and Referral Department in Calendar Year 2016.

Table 1: HESSCO Needs Assessment Project Activities

Activity	Consumers/Stakeholders	Type of Analysis
Public Gatherings with face-to-face discussion and interviews	212 Consumers	Qualitative Discussion
Survey of Consumers (Distributed at Public Gatherings)	98 Consumers	Quantitative Analysis
Survey of Stakeholders	33 Stakeholders	Quantitative Analysis
Stakeholder Focus Group	35 Stakeholders	Qualitative Discussion
Community Health Needs Assessment Reviews		Qualitative Review of Publicly Reported Data (both qualitative and quantitative in nature)
Information and Referral Call Topics Review from Calendar Year 2016		Qualitative Review of data collected on all calls received by HESSCO Information and Referral

State Guidelines

The Executive Office of Elder Affairs (EOEA) required that at least 8 activities be completed with an emphasis on reaching consumers directly as much as possible. At least two of these activities needed to reach a specific target population as defined by EOEA. Activities had to occur between September 1, 2016 and December 30, 2016. All results were required to be submitted to EOEA in a designated online format by December 30, 2016. HESSCO met or exceeded all guidelines determined by the state.

Data

Table 2: Qualitative Results of Face to Face Discussions and Interviews

Face to Face Discussions and Interviews	
Activity Location or Event Type	Key Qualitative Points or Topics of Discussion as Determined by Attendees
Veteran’s Coffee Hour	<ul style="list-style-type: none"> • Gaps in Veteran’s Services • Health insurance information needs • Need for Veteran-specific social and educational programming
Tenant Meeting Canton Housing Authority (Building 1)	<ul style="list-style-type: none"> • Health and wellness classes (e.g., How to get the most out of your MD in 5 minutes) • Transportation – The RIDE is limited, transportation for non-medical needs such as going to the movies • Access to in-home services
Tenant Meeting Canton Housing Authority (Building 2)	<ul style="list-style-type: none"> • Continued focus on in-home services, meal supports • Healthy living classes • Understanding who to call and when to call for services
Tenant Meeting Canton Housing Authority (Building 3)	<ul style="list-style-type: none"> • Continued focus on in-home services • Safety within housing complexes • Transportation for more than medical appointments
LGBT Meal Program	<ul style="list-style-type: none"> • Access to insurance information and medical care • Need for LGBT-specific support groups and resources • Need for education and support for residents within housing developments (e.g., LGBT sensitivity training, managing bullying, empowering the resident councils) • Access to in-home supports and services
Friends of Foxboro Meeting	<ul style="list-style-type: none"> • Addressing transportation concerns – understanding what is available and developing new options • Continued focus on in-home supports and meals programs • Life planning and having a voice in how to live healthy and happy • Creative solutions to manage concerns (e.g., Fire Department keeping lockboxes to safely access homes)
Age Well Conference	<ul style="list-style-type: none"> • Prevention ideas and healthy aging for caregivers and others • Knowing who to call and when – having the right information put out to the public, using visually appealing marketing • SHINE program support • Access to help with medication expenses
Chinese Luncheon Program	<ul style="list-style-type: none"> • Understanding the kinds of services available • Easily accessible transportation • Access to healthy aging classes • Easy access to medical care (e.g., blood sugar checks at Council on Aging)

Southeast Asian Luncheon Program	<ul style="list-style-type: none"> • Transportation that crosses town borders • Access to health insurance information – SHINE • Understanding scams • Understand housing options and housing information
Plainville Day Community Event	<ul style="list-style-type: none"> • Having social and health wellness classes • Improved transportation at reasonable cost • Financial planning, information on how to afford care • Continued support of current meals program
Elder Dental Clinic	<ul style="list-style-type: none"> • Continued focus on in-home supports and services • Have age-friendly communities (e.g., having all stores be walkable) • Understanding financial benefits such as SNAP (Senior Nutrition Assistance Program) • Access to healthy aging classes and active engagement in other types of learning such as computer classes or exercise • Improved bus transportation, non-medical transportation • Advocacy around healthcare options
Stakeholder Focus Group	<ul style="list-style-type: none"> • Continued focus on home and community based services with emphasis on dementia supports, home-safety, addressing diverse nutrition needs. • Education of consumers and caregivers around issues related to safety and risk. Reach consumers and caregivers through different methods such as social media. • Increasing concerns around polypharmacy among older adults • Need for workforce development to support individuals working with older adults who have high level of needs

Table 3: Quantitative Results of Professional Stakeholder Survey

Question/Responses	Frequency Selected by Respondents
How should HESSCO support age-friendly and dementia capable communities? (Select all that apply)	
Provide information and training to local community organizers	84.8 %
Convene municipal groups focused on age-friendly and/or dementia capable activities	54.5%
Other	6.1%
How should HESSCO empower healthy aging? (Select all that apply)	
Support evidence-based healthy aging programs such as Chronic Disease Self-Management, Matter of Balance, Diabetes Self-Management	84.8%
Provide educational opportunities on the topic of Healthy Aging such as the Age Well Conference	69.7%

Other	6.1%
How should HESSCO help to prevent Injury, violence, and exploitation of older adults? (Select all that apply)	
Provide trainings to area providers and stakeholders on elder abuse, and financial exploitation	84.8%
Provide educational programming on elder abuse, financial exploitation, to community and consumer groups	87.9%
Other	3.0%

Table 4: Quantitative Results of Consumer Survey

Consumer Survey Note: Respondents were asked to check off their “top five” priorities from a list of 12 options. The opportunity to comment was also provided. Some consumers checked more than five priorities.

Priority as Indicated on Survey	Frequency of Selection
Help my community become more Age-Friendly or Dementia-Capable	38%
Provide classes and programs on healthy aging and physical wellness	53%
Ensure that seniors know who to call when services are needed, make it easier to understand how to get services	77%
Address the financial needs of seniors (money management, retirement planning, paying for basic needs such as food, winter heating, paying for medications, medical co-pays)	38%
Developing housing options for seniors	39%
Provide access for seniors to legal services (legal counsel for eviction, protecting rights)	35%
Improve transportation services (public transportation, rides to medical appointments)	59%
Improve the availability of services to help seniors in their homes	55%
Develop job opportunities or social activities for seniors	23%
Help seniors with depression, anxiety, or alcohol/drug use	32%
Preventing elder abuse, neglect and exploitation	33%
Other	10%

Table 5: Review of Community Health Needs Assessments

Qualitative Statement	Rationale
Chronic disease, mental health and substance misuse is a health priority in the HESSCO Program Service Area	<ul style="list-style-type: none"> • Identification of “Mental Health Issues” as the highest ranking health concern impacting individual survey respondents/families in the MetroWest Region • Identification of “Drugs/Alcohol Abuse as the highest ranking health concern impacting residential communities in the MetroWest Region • Higher than state average mental health discharge rates for Norwood, Dedham, and Wrentham • Higher than state rates for Age-Adjusted Death Rate due to Diabetes in Canton, Norwood, and Sharon • Higher than state rates for Age-Adjusted hospitalization rate due to Coronary Heart Disease in Canton and Norwood • Higher than state rates for Age-Adjusted Death Rate due to Mental Disorders in Canton, Norwood and Sharon • Community identification of chronic disease as a major health issue with the Norwood Hospital service area. • Community identification of substance abuse as the number one health issue within the Norwood Hospital service area

Community Health Needs Assessment Data Sources:

- MetroWest Region, Massachusetts: 2016 Community Health Assessment, October 3, 2016; a resource document used by CHNA 7 serving the HESSCO towns of Foxborough, Medfield, Millis, Norfolk, Plainville, Walpole, Wrentham. Available at <http://www.CHNA7metrowest.org>.
- South Shore Health System: Community Health Needs Assessment, March 2016; a resource document used by CHNA 20 serving the HESSCO towns of Canton, Norwood, and Sharon. Available at <http://www.bluehillscha.org>.
- West Suburban Community Health Network Area 18 Community Health Assessment; a resource document used by CHNA 18 serving the HESSCO towns of Dedham and Westwood. Available at <http://www.chna18.org>.
- Norwood Hospital: Community Health Needs Assessment 2015; serving the entire HESSCO Program Service Area. <https://www.norwood-hospital.org>.

Table 6: HESSCO Call Topics Report (Information and Referral Calls)

Call Topic Category	Call Topics with greater than 50 callers
Aging Services Access Point Services	Aging and Disability Resource Consortium (ADRC)
	State Subsidized Home Care Program
	Homemaker
	Nutrition
	Personal Care
	Transportation
Health/In-Home Services	Private Paid Service
Nutrition	Home Delivered Meals
	General
Transportation	Medical

Results

The need for more coordinated and comprehensive transportation was a theme in many of the face-to-face discussions. Consumers emphasized that they need transportation for both medical and non-medical needs. The face-to-face discussion also revealed that many did not know what options for all types of care (transportation, in-home services etc.) were already available. Additionally, knowing who to call when assistance is needed in all categories of need was highlighted as important. Consumers also emphasized that they want to live in their home setting and wanted to preserve in-home services and supports. Having access to healthy aging or wellness classes and information was also highlighted as important. Upon final analyses of all data collected and reviewed HESSCO has ranked the following statements of need based on quantitative data on frequency of topic arising and qualitative data based on the urgency with which the consumers identified the needs during the HESSCO Needs Assessment Project.

Statement of Need 1:

- HESSCO area consumers are interested in services that will allow them to age in-place in their current homes. They want to better understand the services available and have ease of access to these services.

Statement of Need 2:

- HESSCO area consumers want improved transportation options for both medical and non-medical needs. Transportation that crosses town borders is important.

Statement of Need 3:

- Chronic Disease (e.g., Diabetes), mental health and substance misuse should be health priorities in the HESSCO program service area based on reported rates of incidence, community identification of needs and interest expressed by HESSCO area consumers for programs that focus on healthy aging and physical wellness.

Statement of Need 4:

- HESSCO area consumers are interested in improving housing options within their communities. They want to better understand their housing options, have options that are safe and welcoming to all older adults and meet their needs to age within their community.

Statement of Need 5

- HESSCO area consumers are interested in programs that will help them understand their health insurance and/or access the right health insurance, manage medical expenses, and understand financial benefits available.

Statement of Need 6

- HESSCO-area consumers would like to see their communities become more age-friendly or dementia friendly

Statement of Need 7

- Provide equal access to the elder justice system by offering seniors access to legal services such as legal counsel for eviction, and/or to protect rights. Prevention of elder abuse, neglect and exploitation and efforts to keep older adults safe.

Statement of Need 8

- HESSCO-area consumers believe it is important to assist older adults experiencing depression, anxiety, alcohol or drug use.

Statement of Need 9

- Older adults in the HESSCO area would like to have job opportunities or social activities for older adults.

As outlined, these Statements of Need represent the qualitative and quantitative data review process undertaken by HESSCO. As HESSCO develops the Area Plan on Aging, HESSCO will ensure that all of these needs are addressed through the goals and strategies identified.