Aging Futures NEWS

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Creating Systems Change

By Thomas P. Hoke

Former Deputy County Executive for Human Services

The Aging Futures Partnership predicts that this collaborative initiative will continue to unite community organizations for decades.

Progress in addressing the challenging priorities that were identified by community planning would justify, in and of itself, the resources devoted to this broad-based effort. The immediate action areas include: Caregiver Support, Chronic Disease Management, Social Connections, and Community Awareness. Members of the partnership, however, are hoping that their collective activities will produce results rising to the level of "systems change."

Many public and private funders seek to produce "systems change" through their grant activities. Indeed, the chief funder of our partnership, The Robert Wood Johnson Foundation, requires grantees to measure "partnership development" along with outcomes in the identified, substantive initiatives. The Foundation believes that a strong partnership drives "systems change."

Traditionally we gauge the value of human service investments in terms of measurable programmatic results. "Systems change," however, requires attention to "how" a particular collaboration achieves these results. If a community can improve the underlying processes by which it achieves desirable outcomes, it will have established the infrastructure to produce more progressive changes in the future.

A coalition must establish a stable and flexible governance structure to manage the process of systems change. In my experience, systems-changing coalitions tend to possess common attributes that contribute to their success.

Attributes of a Systems-Changing Coalition

- **Includes members from important systems serving target populations—** Frequently coalitions form to address the needs of a particular population, such as seniors or preschool children. Most will include representatives from all of the principle service systems touching the population, such as health, housing and social services. Public, private not-for-profit and for-profit sectors should always be represented on a coalition. Bringing together multiple systems offers the potential for significant impact on the lives of the target population.
- **Achieves strong agreement on a vision and desired outcomes—** This is the glue that binds members of a coalition. Nothing can galvanize the action of a group better than a clear and shared focus on a desired future state. The process of achieving the vision can be as important as the vision itself.

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UHS Hospitals Undertake Hypertension Management Program with Aging Futures

United Health Services Hospitals, Inc. (UHS) was awarded an Aging Futures grant to educate seniors on hypertension and assist them in lowering their blood pressure to reduce their risk of stroke and heart attack. The program is a structured disease management program lasting for 18 months. UHS plans to enroll 80 seniors by December 31, 2004.

This project is part of the Aging Futures' Stroke Prevention Initiative, one of three special 2004-2005 projects. The disease management program includes weekly calls from a registered nurse for five weeks, then monthly calls for three months, followed by an additional call in three months. It includes education, counseling, and tracking of blood pressure readings and the provision of self-monitoring equipment.

Eligible persons must be age 75 or older with a diagnosis of hypertension, or seniors whose blood pressure is elevated according to American Heart Association criteria at a blood pressure screening. Persons over 60 years of age who meet the above criteria and have one limitation in their activities of daily living, such as bathing or dressing, also may be considered.

The screenings will be county-wide. To receive a screening schedule or to make a referral, call Diana L. Seyfferth, RN, CCRN at United Health Services Hospital Center for Community Health, (607) 763-5555.

From the Project Manager's Desk

Leaving a Legacy

In late September Kathy Bunnell, Chairperson for the Aging Futures (AF) Project, Joan Sprague, the new Project Assistant for AF, and I attended the annual Community Partnership for Older Adults (CPOA) training in Colorado. Representatives from the seven other communities receiving CPOA funding also attended the two day training entitled "Building Blocks for Sustaining Community Partnership."

Workshops on "Meaningful Evaluations" and "On-Camera Messaging" offered practical information to support our implementation strategies. Perhaps the most impact-filled remarks were offered by George Maddox, Ph.D., Director of the Duke University Long Term Care Resource Program. Dr. Maddox encouraged each of us to consider the legacy we wish to leave our community. What is it that Aging Futures would like to be remembered for? This question had a great impact for me, as I paused to consider Aging Futures' legacy.

In the busyness of releasing requests for proposals, offering trainings, managing subcontracts, documenting the work of committees and posting information to the CPOA extranet site, it is easy to lose sight of the fact that we are, indeed, creating the Aging Futures legacy. Yet, our daily efforts become the legacy.

Tom Hoke notes in his article on "Systems Change" the importance of coalitions to improve the process by which communities achieve outcomes. To achieve our outcomes, we engaged in an extensive data collection process and used our Strategic Plan to put forth critical senior issues our community must address. If this process for collectively working on strategies is meaningful, it will become part of our legacy and we will see progressive change for years to come.

Together we are serving seniors more effectively, efficiently and creatively. This is a legacy worth working towards.

— *DeeDee Camp*, Aging Futures Project Manager

Chronic Diseases Are Costly

Research done for the Aging Futures Project showed that in Broome County, 62% of seniors age 65 and older will manage two or more chronic diseases. This can be debilitating and expensive. Chronic diseases and conditions, including heart disease, consume more than 75% of our nation's health care dollars.

A Portrait of the Chronically Ill in America, 2001, cited in a report from The Robert Wood Johnson Foundation Strategic Indicators Surveys.

Professional Education Committee Establishes Goals

The goal of the Professional Education Committee is to bring about systems change through an open exchange of ideas and information among service providers in Broome County. The first initiative organized by this committee was the well-attended November 30th workshop, "Effective Social Marketing to Older Adults."

The committee will coordinate three workshops in 2005. These workshops are designed to assist senior service providers to learn from one another what services are available and how to make appropriate referrals. The three program areas for the workshops are mental health, transportation and housing services. Agencies interested in presenting their program information should contact Aging Futures at 778-2064.

Another goal supported by these workshops is the collaboration between agencies that results in mutual benefits. This is how systems change occurs.

In the meantime, the Professional Education Committee will team up with the Evaluation and Data Workgroup to offer guidance on the partnership development process. Now that's partnership!

Joan Sprague Joins Partnership Staff

Aging Futures welcomes Joan Sprague, Project Assistant, who joined staff in September, just in time to attend the Community Partnerships for Older Adults training in Denver. Joan comes to us directly from the Department of Social Services Medicaid Unit.

Joan has an interesting history here in Broome County. In the 1970's she worked as Director of the Voluntary Action Center for United Way of Broome County. During that time you may have purchased Girl Scout cookies from her Cadette GS troop. In the 1980's she moved away only to return again in 1991. Joan can be seen in the community volunteering for Girl Scouts, Southern Tier Celebrates! on the First Night volunteer committee, and for PAST (Preservation Association of the Southern Tier).

Joan is assigned to the Professional Education and Social Connections workgroups. She can be reached at 778-6145 at the Broome County Office for Aging.

Creating Systems Change

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- **Establishes and manages goal-directed initiatives—** This requires the management of numerous, complex tasks designed to move the community toward the vision created by the coalition. The coalition, which operates beyond the authority of any established organization, must establish its own operating principles and accountability structure by consensus. Developing and completing complex initiatives orchestrated to produce a systemic impact within a culture of consensus often poses the greatest challenge to a developing coalition.
- **Speaks directly to the service constituency through a public information campaign—**Collaborations can increase their impact upon a service population through social marketing. Sophisticated tools of public information can carry positive messages directly to a target population. Broad-based prevention strategies such as improving cardiovascular health among seniors can be achieved through use of the media. Coalitions should consider developing a "brand" identity to enhance the impact of their media messages.
- **Develops a mechanism for sharing funds**– Sharing in a common pool of funding helps partner agencies build alliances and creates service linkages that frequently last beyond the funding period. "Blending" or "braiding" existing or new funding streams helps to bring agencies together for greater efficiency and focused service delivery.
- **Manages the tension between collaboration and competition—** Health and social services agencies are forced to compete for a shrinking supply of dollars. Those who have participated in collaborations, however, know that leaders of these agencies often seek to be part of a larger initiative with a potential impact that is greater than that of any single agency. The dynamics that create competition are unlikely to be completely eliminated, but strong collaborations can ameliorate their effects.
- **Balances the need to develop a universal approach with that of serving "at risk" populations—** Human service systems are cluttered with targeted programs. The categorical approach can lead to fragmentation and programs that target "at risk" or low income individuals. Collaborations, however, have the potential to bundle categorical and open ended programs into a package labeled with a "brand" designed for mainstream appeal.
- **Establishes high-level, "dash board" indicators that will track the progress of systems change—** Collaborations frequently seek to concentrate significant resources upon a social or health problem and are thus expected to have a systemic effect. In order to determine whether the strategy is having the desired impact, macro level indicators are required. Progress on such a scale can take years to materialize and expectations should be realistic.

Being mindful of these attributes, we hope some systems change will occur, but at the very least, we have formed an effective Partnership.

Systems Change. . .an example

A nation-wide example of a systems change has occurred in diabetic care over the last decade. Through the collaborative efforts of hospitals, health educators, and the public we have shifted from the view of a disease primarily managed by the physician to one of self management.

Two Requests for Proposals Released

Aging Futures released two requests for proposals: the Return to Home Caregiver Education Program and the Hypertension Quality Assurance Initiative.

Proposals for Return to Home were due December 1. Aging Futures has budgeted $51,000 over three years to pilot this effort.

Proposals for the Hypertension Quality Assurance Initiative were due December 7. This project will assist in standardizing care for seniors with hypertension to prevent stroke and long term disability. Proposals may range from $16,994 to $25,000.

The results of the proposal reviews will be announced in late December. Following contract negotiations, the Broome County Legislature is expected to authorize these awards in January.

Upcoming Aging Futures' Meetings

Partnership . . . at Council of Churches

Jan. 18, 2005 ..... 2-4 PM
Mar. 15, 2005 ..... 9-11 AM
May 17, 2005 ..... 2-4 PM

Core Management . . . at BC Office for Aging

Feb. 8, 2005 ..... 1:30 PM
Apr. 12, 2005 ..... 1:30 PM
June 14, 2005 ..... 1:30 PM

Workgroups:

Social Connections. . . at United Way

Jan. 17, 2005 ..... 3 PM
Feb. 28, 2005 ..... 3 PM

Professional Education . . . at Catholic Charities

Jan. 13, 2005 ..... 10:00 AM

Data and Evaluation . . . at BC Office for Aging

Jan. 11, 2005 ..... 10:00 AM

Chronic Disease Management. . . at Stay Healthy

Jan. 20, 2005 ..... 1:00 PM
Feb. 17, 2005 ..... 1:00 PM

Communications . . . at BC Health Department

Jan. 12, 2005 ..... 9:00 AM
Feb. 9, 2005 ..... 9:00 AM

Mapping the Elderly

Although it is late 2004, the most complete and easily available data set on the elderly population of Broome County is still the 2000 U.S. Census. The Census contains a great many variables that are tabulated for the population age 65 and older. Examples include living alone, income, poverty status, household size and type, educational attainment, and more.

While these data can be easily downloaded from the Census website, they become more interesting and useful if displayed on a map. The geographic distribution of a particular group is often extremely important to understanding that group and effectively providing services to them. The Binghamton University Geography Department has been working with the Aging Futures Data Committee to produce a set of these maps for use by any member agency. These maps can be used for public presentations, agency program planning and grant proposal writing. For further information, call Aging Futures at 778-2064.

Workgroup Action Encourages Seniors to Stay Connected with Friends & Community

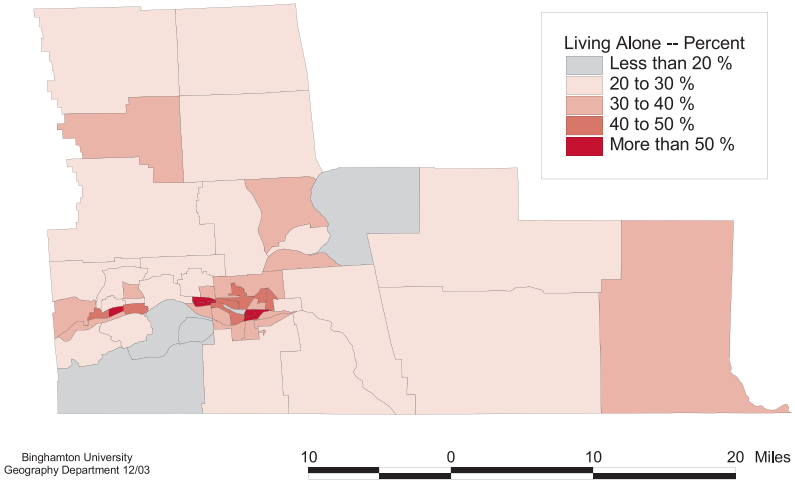
The Social Connections Workgroup is exploring methods to reach isolated seniors and promote the importance of a social network. Their goal is to encourage seniors to stay connected with community and friends. The effects of social isolation in the elderly have been well studied. A lack of social contact and support has been correlated with an increased risk of physical illness, depression and substance abuse.

To encourage social connections, the January issue of *Senior News*, the monthly newspaper of the Broome County Office for Aging, will be expanded to include excerpts from Dr. Christine Himes' book, *Aging in Stride*, and will feature articles and activities related to social connections for readers to consider. A widespread distribution is planned and the workgroup will use the insert in future endeavors.

Senior News now reaches more people as a result of Partnership efforts: RSVP volunteers deliver the paper to the Giant Markets and selected pharmacies for their patrons; more copies are available to CASA staff for distribution during visits to the homebound; and issues were placed in holiday food baskets to the homebound.

Living Alone

The map below shows where the percentages of persons age 65 and older reside in Broome County who live alone. The highest concentration is in the urban core, with significant concentrations existing in the Towns of Binghamton, Kirkwood, Conklin, Windsor, and Maine.



Of people age 60 and older, 28% live in one-person households. At age 75 and older it increases dramatically to 59.6%. Assisting this group to remain socially connected is an Aging Futures priority for 2005.

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