



# WORKING WITH AGING TENANTS IN SUPPORTIVE HOUSING: CONNECTICUT PROVIDERS

**Connecticut is the 7th oldest state in the nation. Our population of 65+ is projected to grow by 64% from 2006 - 2030!**

~ CT Commission on Aging Fact Sheet, January 2012

## INTRODUCTION

It's a fact that none of us can escape, and all of us should embrace: we're getting older. In supportive housing, aging poses additional issues for tenants that go beyond those of the general population. As providers in the Connecticut supportive housing community address the needs of all tenants, they are beginning to ask for specific guidance around the needs of those tenants who are now aging. In response to these requests, this document was developed through a six-month learning collaborative of Connecticut supportive housing providers.

Through in-depth discussions and sharing of resources – and with the support of the Connecticut Department of Mental Health and Addiction Services, Housing Innovations, and CSH – the supportive housing community has developed this guidance document.

This document makes several references to Cultural Competence. These are only guidelines meant to heighten awareness of the importance of cultural sensitivity. Guiding principles for supportive housing staff include:

- Be mindful of cultural influences and how they may be present when relating to others
- Do not make generalizations related to culture; understand cultural practices may vary significantly within a population
- Understand not everyone identifies with their own native culture
- Be mindful of how acculturation is experienced by individual tenants

The following is a brief description of the attachments contained in this document:

- **Checklist: Agency Competencies for Working With Aging Tenants in Supportive Housing**  
*A list of skills, knowledge and practices that will enhance an agency's ability to provide relevant and effective services to tenants aging in supportive housing*
- **Resource Guide for Agencies Working With Aging Tenants in Supportive Housing**  
*A list of state agencies, and links to their online portals, providing regional and local services*
- **Resource Template for Agencies Working With Aging Tenants in Supportive Housing**  
*A replicable document that will facilitate an agency's development of a local resource guide which, if maintained electronically, can be easily updated*
- **Training Framework for Direct Care Staff Working With Aging Tenants in Supportive Housing**  
*A list of trainings based on the seven domains from the Agency Competencies attachment*
- **Checklist: When Someone Dies in DMHAS-funded Supportive Housing in Connecticut**  
*A checklist of tasks catalogued in real-time as a supportive housing provider moved through the tasks associated with a tenant death*
- **Job description for Direct Care Staff Working With Aging Tenants in Supportive Housing**  
*Agencies can use the Agency Competencies Check Sheet & Training Framework to develop their own job description for direct care staff that will specialize or work solely with aging or elderly tenants. It can also be used to develop a piece to be added to the general job description that defines work with aging or elderly tenants.*

## ATTACHMENT #1

### Checklist: Agency Competencies

#### **Domain #1 Physical Health**

##### *A. Medication/ medication management*

- ☐ 1) Understand Dept. of Social Services differences in coverage
  - ☐ Staff has familiarity with services offered through DSS
  - ☐ Agency offers training in house or through DSS
- ☐ 2) Staff has access to information on drug interactions
  - ☐ Agency provides information on drug interactions (list can be developed of currently or frequently used medications & start a binder of pharmacy printouts re: drug interactions)
  - ☐ Agency has a current list of pharmacies being used & contact information for the pharmacist
  - ☐ Agency has a PDR or Nursing reference re: medications
- ☐ 3) Reviewing medication lists with individual tenants – why taking/schedule
  - ☐ Agency has a template to review medications with tenant (tenant keeps a copy, copy to chart)
  - ☐ Agency has a mechanism in place to make sure individual lists are update with any changes
- ☐ 4) Access to agency providing medication management services if applicable for your agency
  - ☐ Agency provides contact information to all staff re: any medication management services
  - ☐ Agency trains all staff on medication ordering and delivery/receipt procedures
- ☐ 5) Understand how to manage spend downs [applies to all medical expenses]
  - ☐ Agency provides training on spend downs (written procedures and/or DSS trainer)

##### *B. Preventative Care including diet, exercise, injuries, fragility/physical vulnerability*

- ☐ 1) Promote the importance of engagement and education re: preventative services
  - ☐ Agency respects that in some tenants' cultures there is an aversion to Western medicine and in such cases will assist the tenant in accessing culturally sensitive healthcare
  - ☐ Agency responds to how a tenant's cultural gender norms may affect engagement with medical personnel (and case managers)
  - ☐ Agency provides internal training on how positive engagement may influence a tenants likelihood of participating in wellness checks and other preventative services (outside trainers could be an option, MI training, DMHAS trainings)
  - ☐ Agency provides internal training on how educating tenants around chronological benchmarks for health screenings may influence a tenants likelihood of participating in these screenings (outside trainers could be an option, MI training, DMHAS trainings)
  - ☐ Agency encourages these conversations and documents in progress notes and/or service plans
- ☐ 2) Understand and address any unique dietary needs related to aging
  - ☐ Agency provides internal training on how the aging process (and chronic health conditions related to aging) may require dietary changes and/or restrictions [outside trainer could be utilized]

- ☐ Agency has a resource (dietician) available to counsel tenants if needed and staff is aware of this resource and referral procedures
- ☐ Agency encourages all staff to develop cultural awareness around dietary customs and practices of individual tenants.
- ☐ Agency has a mechanism for screening/identifying tenants dietary needs (could utilize a service plan goal which would require documentation of status/progress)
- ☐ 3) Awareness of increased physical fragility
  - ☐ Agency provides information to staff regarding resources for maintaining or increasing physical mobility of tenant (i.e. Knowledge of low mobility exercises on a continuum to higher mobility such as Yoga to outdoor activity) as recommended by a medical provider after assessment
  - ☐ Agency provides internal training on how the aging process can increase physical fragility

## **Domain #2 Behavioral Health**

- ☐ 1) Vulnerability Issues (victimization, stigma, isolation & lack of social network, increasing loss of independence)
  - ☐ Knowledge of individual's Social Network (healthy socialization vs unhealthy)
  - ☐ Knowledge of stigma re: aging & resources to address through advocacy
  - ☐ Knowledge of resources to keep people connected through technology
  - ☐ Knowledge of how aging can affect independence
- ☐ 2) Mental Illness & Behavioral health services
  - ☐ Appropriate knowledge of mental health issues & how they may be affected by the aging process
  - ☐ Develop a list of state/regional resources – to include any resources that specialize in elder care and/or provide staff & tenant access to these resources online
  - ☐ Developed a list of local resources– to include any resources that specialize in elder care [could happen through CoC or Community Care Team]
- ☐ 3) Substance use
  - ☐ Promote education & engagement with tenants around: accepting referrals, dangers of self-medicating, importance of following a medication schedule
  - ☐ Access list of state/regional resources (attached) and develop a local resource list (template attached)
- ☐ 4) Caregivers
  - ☐ Agency is in contact with family or other natural supports (if these resources exist for the tenant) to promote collaboration for the benefit of the tenant
  - ☐ All Release of Information forms are consistently updated
  - ☐ There is a standard practice of involving appropriate family members in the care of a tenant especially in relation to any cultural considerations or language barriers

## **Domain #3 Activities of Independence and Daily Living**

- ☐ 1) Skills promoting independence for tenants (meal prep, status of physical mobility, organizational skills, transportation, technology)

- ☐ Agency addresses tenants' ability to prepare meals in each assessment and reassessment every 6 months conducted with tenants
  - ☐ Agency has partnerships/MOUs with Meals on Wheels and/or other meal providers to assist qualified tenant
  - ☐ Staff has been trained to teach tenants to compensate for declining abilities; this should include self-awareness and how to reach out for assistance.
  - ☐ Agency conducts bi-annual inspection of apartment to ensure that there are no barriers to impede mobility inside or outside the unit
  - ☐ Agency provides local bus and train schedules for tenants as well as information on any other transportation options.
  - ☐ Agency provides basic computer skills training or connects tenants to partner organization for training.
- ☐ 2) Hoarding
- ☐ All staff members have been trained within the past two years on how to address hoarding
  - ☐ At 6-month intervals programs observe and document apartment conditions related to health and safety

#### **Domain #4 Housing**

- ☐ 1) Housing Barriers
- ☐ Agency staff has adequate knowledge of housing laws that may affect elderly tenants so as to become advocates for tenants
  - ☐ Agency promotes tenant access to the process of criminal record expungement (information and training can be accessed through the Connecticut Pardon Team, at [www.connecticutpardonnteam.org](http://www.connecticutpardonnteam.org))
  - ☐ The agency provides resources and encourages tenants to begin application process to senior housing/services – as early as warranted
- ☐ 2) Special Accommodations
- ☐ Agency staff are provided with information and training on the Adults with Disabilities Act (ADA) compliance and reasonable accommodation laws
  - ☐ Agency staff are making observations and documenting the individual tenant's ability to remain safe in unit, at admission and at appropriate intervals (at least every 6 months)

#### **Domain #5 End of Life Issues**

- ☐ 1) Advanced directives and wills
- ☐ Agency includes topics of advanced directives and wills in assessment and revisits for updates during the reassessment process every 6 months,
  - ☐ Agency provides linkage to legal counseling on advanced directives and wills
  - ☐ Agency includes documentation on wills and advanced directives in charts (when applicable)
  - ☐ Case managers have attended a DMHAS training on death and dying
- ☐ 2) End of life
- ☐ Agency is aware and respectful of all tenants' cultural practices
  - ☐ Agency staff is provided on-going education on issues of death & dying and are able to address these in supervision

- ☐ Agency utilizes the Checklist 'When Someone Dies in Supportive Housing' checklist when a tenant passes away (attached)
- ☐ Agency has policies and procedures in place on what to do when a tenant passes away including the DMHAS Critical Incident reporting procedures
- ☐ Agency documents and updates information on dependents, family members, and emergency contacts in tenant charts

## **Domain #6 Coordination w/ Other Systems**

- ☐ 1) Navigation (multiple systems to navigate including mainstream benefits, home care or extended care systems, hospitals)
  - ☐ Agency educates tenants about services available and not available in supportive housing and promotes tenants' ability to advocate for themselves
- ☐ 2) Return to community
  - ☐ Established contact with a point person who oversees discharge planning at area facilities such as hospitals, long term care, or rehabilitative care facilities
  - ☐ Established agency process for tenant return home to the community. If the tenant needs assistance with the transition back to the community, arrangements are in place
- ☐ 3) Resources
  - ☐ Agency staff is aware of a variety of state and local resources or information portals that provide services targeted for elderly persons
  - ☐ Agency provides education and assistance to tenants regarding the eligibility criteria and process to apply for needed services

## **Domain #7 Income and Benefits**

- ☐ 1) Medicare; Social Security Income/Social Security Disability Income (SSI/SSDI)
  - ☐ Agency has staff expert in assisting tenants with applications and redetermination process or has MOU with another agency with these resources.
- ☐ 2) Employment
  - ☐ Agency assesses tenant employment at intake and reassessment every 6 months
  - ☐ Agency has awareness of local/regional statewide resources for employment services and these connections are accessible to staff
  - ☐ Agency has employment services available in-house or has an MOU with local agency to provide employment services
  - ☐ Staff completes the DMHAS employment training offered in the Supportive Housing Training Catalog
- ☐ 3) Lack of Income & Information
  - ☐ Agency assesses income at intake and at reassessment every 6 months
  - ☐ Agency has written resources distributed to all tenants on how to access needed goods and services in the community
  - ☐ Agency provides budgeting assistance or referrals to such assistance
  - ☐ Agency provides written materials on how to access a wide variety of social, assistance, medical, educational and employment resources

☐ 4) Medical Expenses

☐ Agency has staff expert in managing healthcare-related expenses (ex. Access Health CT, Life Alert alarms, managing spend downs) or has MOU with an another agency with these resources

## ATTACHMENT #2

### Resource Guide for Agencies Working With Aging Tenants in Supportive Housing

**FROM the CT State Department on Aging:**

<http://www.cga.ct.gov/coa/default.asp>

**Aging and Disability Resource Centers in CT**

<http://www.ct.gov/agingservices/cwp/view.asp?a=2510&q=385896%20>

*Connecticut's Aging & Disability Resource Centers are known as "Community Choices."*



#### **Who we are**

Community Choices is a powerful information hub linking older adults, persons living with disabilities, and caregivers in Connecticut to the services and supports they seek. Our dedicated staff can connect you to everything from a name and phone number to more detailed information regarding community services through activities such as benefit screening, options counseling, and care transitions.

#### **Who we can support**

- Older adults
- Persons aged 18 & over living with disabilities
- Caregivers
- Persons who want help communicating their needs
- Persons planning for future long term care needs
- Persons who want help navigating a complex system of federal, state, and local programs.

#### **How we can support**

Our dedicated staff and information specialists have experience in a number of different areas. Community Choices offers:

- Options Counseling
- Short Term Care Management
- Care Transitions
- Application Assistance
- Decision Support
- Follow-up
- Long Term Care Planning
- Benefits Screening
- Information & Assistance

We can also connect you with services such as:

- Adult Day Care
- Disability Services
- Elder Abuse Prevention
- Employment, Financial, Housing and Equipment assistance
- In-home Services
- Legal Services



- Mental Health / Substance Abuse Services
- Transportation
- Nutrition

Ask us about these services to learn more! Find the path you need to what you want with Community Choices.

**Contact Community Choices by calling 1-800-994-9422 or visiting a local Community Choices office.**

**South Central Community Choices:** Community Choices of South Central CT serves the following towns: Ansonia, Bethany, Branford, Derby, East Haven, Guilford, Hamden, Madison, Meriden, Milford, New Haven, North Haven, North Branford, Orange, Oxford, Seymour, Shelton, Wallingford, West Haven and Woodbridge.

- Agency on Aging of South Central CT - 1 Long Wharf Dr., New Haven  
(203)785-8533 [www.aopartnerships.org](http://www.aopartnerships.org)
- Center for Disability Rights - 764 Campbell Ave., West Haven  
(203)934-7077 [www.cdr-ct.org](http://www.cdr-ct.org)

**Western Community Choices:** The Western CT Community Choices serves the following towns: Barkhamsted, Beacon Falls, Bethel, Bethlehem, Bridgewater, Brookfield, Canaan, Cheshire, Colebrook, Cornwall, Danbury, Goshen, Harwinton, Kent, Litchfield, Middlebury, Morris, Naugatuck, New Fairfield, New Hartford, New Milford, Newtown, Norfolk, North Canaan, Prospect, Redding, Ridgefield, Roxbury, Salisbury, Sharon, Sherman, Southbury, Thomaston, Torrington, Warren, Washington, Waterbury, Watertown, Winsted, Wolcott and Woodbury

- Independence Northwest - 1183 New Haven Rd. #200, Naugatuck  
(203)729-3299 [www.independencenorthwest.org](http://www.independencenorthwest.org)
- Western CT Area Agency on Aging - 84 Progress Lane, Waterbury  
(203)757-5449 [www.wcaaa.org](http://www.wcaaa.org)

**North Central Community Choices:** The North Central Community Choices serves the following towns: Andover, Avon, Berlin, Bloomfield, Bolton, Bristol, Burlington, Canton, East Granby, East Hartford, East Windsor, Ellington, Enfield, Farmington, Glastonbury, Granby, Hartford, Hebron, Manchester, Marlborough, New Britain, Newington, Plainville, Rocky Hill, Simsbury, Somers, South Windsor, Southington, Stafford, Suffield, Tolland, Vernon, West Hartford, Wethersfield, Windsor, and Windsor Locks.

- Independence Unlimited - 151 New Park Ave., Hartford  
(860)523-5021 [www.independenceunlimited.org](http://www.independenceunlimited.org)
- North Central CT Area Agency on Aging - 151 New Park Ave., Hartford  
(860)724-6443 [www.ncaaact.org](http://www.ncaaact.org)
- Connecticut Community Care, Inc. - 100 Great Meadow Rd. Wethersfield  
(860)257-1503 x4369 [www.ctcommunitycare.org](http://www.ctcommunitycare.org)

**Southwestern Community Choices:** The Southwestern Community Choices serves the following towns: Bridgeport, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, Norwalk, Stamford, Stratford, Trumbull, Weston, Westport, Wilton.

- Southwestern Connecticut Agency on Aging - 10 Middle Street, Bridgeport  
(203)333-9288 [www.swcaa.org](http://www.swcaa.org)
- Disability Resource Center of Fairfield County - 80 Ferry Blvd. #210, Stratford  
(203)378-6977 [www.drfcf.org](http://www.drfcf.org)

**Eastern Community Choices:** The Eastern Community Choices serves towns in New London, Middlesex, Tolland, and Windham counties.

- Senior Resources - 19 Ohio Ave., Norwich  
(860)887-3561 [www.seniorresourcesec.org](http://www.seniorresourcesec.org)
- Disabilities Network of Eastern Connecticut - 19 Ohio Ave., Norwich  
(860)823-1898 [www.dnec.org](http://www.dnec.org)
- Connecticut Community Care, Inc. - 108 New Park Ave., Franklin  
(860)885-2960 [www.ctcommunitycare.org](http://www.ctcommunitycare.org)

#### Area Agencies on Aging

<http://www.ct.gov/agingservices/cwp/view.asp?a=2509&q=312998&agingservicesNav=1>

Area Agencies on Aging are private, nonprofit planning agencies, each guided by its own Board of Directors and Advisory Council. Through funding provided by the State Department on Aging, each AAA receives Federal Older Americans Act (Title III) funds and State funds that are allocated to elderly service providers through a request for proposal process. AAAs fund the following services:

1. Social Services
2. Nutritional Services
3. Disease Prevention & Health Promotion Services
4. Family Caregivers Support Services
5. Adult Day Care Aide Positions (to provide day care services to victims of Alzheimer's Disease and related dementia).

The five AAAs may also provide direct services in the areas of community education, advocacy, case management, information and assistance, benefits counseling and training.

**FOLLOW THE LINK ABOVE TO FIND RESOURCES IN YOUR TOWN**

**FROM the CT State Department of Social Services (DSS):**

<http://www.ct.gov/dss/site/default.asp>

**Programs for Elders**

These programs are benefits and services offered by the Department of Social Services that you may be eligible for as an elderly individual. Further information about cash assistance, medical coverage, food assistance and other programs is available. Please note, a number of programs related to caregiving, employment services and Long Term Care Ombudsman Program that were administered by the Department of Social Services have moved to the State Department on Aging. Click here to visit the [State Department on Aging](#) website.

All Housing related programs that were previously administered by the Department of Social Services have moved to the Connecticut Department of Housing. Click here to visit the [Connecticut Department of Housing](#) website.

**Financial Assistance**

- [Temporary Assistance to Needy Families and Temporary Family Assistance](#)
- [State Supplement](#)

**Food Assistance**

- [SNAP \(Formerly known as Food Stamps\)](#)
  - [Nutritional Assistance Programs](#)
- Food Banks
  - [Nutritional Assistance Programs](#)

**Medical**

- ConnTrans - Connecticut Organ Transplant Program
  - [Brochures: ConnTRANS - Connecticut Program for Organ Transplant Recipients](#)
- CHCPE - Connecticut Home Care for Elders
  - [Alternate Care Unit](#)
- Medicaid (Title XIX)
  - [Community Medicaid](#)
  - [Money Follows the Person](#)
- Medicare
  - [Medicare Savings Programs](#)

**Social Work Services**

- [Prevention Services](#)
- [Protective Services for the Elderly](#)

**Winter Heating Aid**

- [Connecticut Energy Assistance Program](#)

**FROM the CT State Department of Housing:**

<http://www.ct.gov/doh/site/default.asp>

## **Rental Housing for Elderly Persons Program** *(Revised 10/2013)*

### **Description:**

The Housing for Elderly Persons program provides assistance to non-profit housing developers and public housing authorities to develop housing for elderly persons. The Department of Housing (DOH) issues grants and loans to develop such housing. The Connecticut Housing Finance Authority (CHFA) provides administrative oversight of the established programs. Rental Housing for the Elderly Programs provides eligible older adults and persons with disabilities with affordable housing. Residents pay the greater of the following two amounts for rent:

- ☐ A base rent, which is the minimum rent each community can charge residents and still meet its operating expenses, or
- ☐ A percentage of their adjusted gross income, minus a utility allowance.

The utility allowance is each housing community's estimate of residents' average monthly utility costs. These estimates only include those utilities that are paid directly by residents; consequently, if all utilities are included in the rent, no utility allowance is offered. Although the communities are age restricted, younger persons with disabilities may also reside in them. Ten percent of the units in these communities must be designed to be accessible to persons with physical disabilities, regardless of age.

### **Eligibility Requirements, Service Areas and Program Year:**

#### **Eligibility Requirements:**

- ☐ Must be at least 62 years of age or be certified as totally disabled by a federal board or agency. The Social Security Board can issue this certification under the federal Social Security Act; any other federal board or agency can also make the certification.
- ☐ Must have incomes no greater than 80 percent of their area's median income, which is adjusted for household size. Refer to the **Department of Housing and Urban Development (HUD)** Income Limits and Median Family Incomes.
- ☐ Applicants can be denied admission if they currently use illegal drugs, or currently abuse alcohol and have a recent history of disruptive or dangerous behavior and whose tenancy constitutes a direct threat to the health or safety of another individual or results in substantial damage to the property of others, or have been convicted of illegally selling or possessing a controlled substance as defined in Section 21a-240 of the general statutes within a prior 24-month period.
- ☐ There are no asset limitations for this program.
- ☐ Some communities participate in DOH's Elderly Rental Assistance Payments program, which provides a rental subsidy to eligible residents.

### **Contact Information:**

For general questions and information on unit availability call the Housing Authority in the town in which the housing community is located or the housing community directly.

For information about the administration of the program, to file a complaint about a housing community or to obtain a list of Rental Housing for the Elderly communities call:

Connecticut Housing Finance Authority

999 West Street

Rocky Hill, CT 06067

Telephone: 860-571-4376

## FROM CT's Legislative Commission on Aging:

<http://www.ct.gov/agingservices/site/default.asp>

### Connecticut's Legislative Commission on Aging Mission

The mission of the State Department on Aging is to empower older adults to live full independent lives, and to provide leadership on aging issues on behalf of older adults, families, caregivers, and advocates. This agency employs four key strategies to accomplish the mission. They are:

- **Knowledge** – keeping older adults, families, and caregivers well-informed about available resources.
- **Advocacy** – Empowering older adults, families and caregivers to be educated self-advocates alongside a community of compassionate aging-professionals who advocate on behalf of those who cannot.
- **Respect** – Helping to develop a community of older adults who are valued in our communities and treated with deference and compassion.
- **Collaboration** - Helping to develop a collaborative network of service providers who work together to use resources for the maximum benefit of older adults.

These ‘Helpful Links’ can be accessed here, or online by connecting to:

[http://www.cga.ct.gov/coa/links\\_main.asp](http://www.cga.ct.gov/coa/links_main.asp)

State Offices	Federal Offices
<a href="#">State Department on Aging</a> <a href="#">-Long-Term Care Ombudsman</a> <a href="#">Department of Rehabilitation Services</a> <a href="#">-Connect-Ability</a> <a href="#">-Bureau of Education and Services for the Blind</a> <a href="#">-Deaf and Hard of Hearing Services</a> <a href="#">Commission on Human Rights and Opportunities</a> <a href="#">Connecticut Partnership for Long Term Care</a> <a href="#">Department of Developmental Services</a> <a href="#">Department of Mental Health and Addiction Services</a> <a href="#">Department of Public Health</a> <a href="#">Department of Social Services</a> <a href="#">-Regional Offices</a> <a href="#">-Money Follows the Person</a> <a href="#">-Alternate Care Unit</a> <a href="#">Office of Protection and Advocacy</a> <a href="#">Department of Transportation</a>	<a href="#">Social Security Offices</a> <a href="#">Medicare Website</a> <a href="#">U.S. Centers for Medicare and Medicaid Services (CMS)</a> <a href="#">U.S. Administration for Community Living</a> <a href="#">U.S. Department of Health and Human Services</a>
OTHER RESOURCES	
<a href="#">MyPlaceCT</a> <a href="#">Benefits CheckUp</a> <a href="#">AARP - CT</a> <a href="#">Alzheimer's Association</a> <a href="#">Area Agencies on Aging</a> <a href="#">Centers for Independent Living</a> <a href="#">Center for Medicare Advocacy</a>	<a href="#">CHOICES</a> <a href="#">CT ElderLaw</a> <a href="#">CT Transit</a> <a href="#">Probate Courts</a> <a href="#">CT Network of Care for Behavioral Health</a> <a href="#">Statewide Legal Services</a> <a href="#">Good50 (low vision search engine)</a>

### **Other Useful Links**

University of CT Health Center – UConn Center on Aging

<http://www.uconn-aging.uchc.edu/>

American Association of Retired Persons (AARP) Connecticut

<http://states.aarp.org/region/connecticut/>

## ATTACHMENT #3

### Training Framework for Direct Care Staff

*The suggested training elements in each domain can be short, separate trainings or subjects could be combined*

#### Domain #1 Physical Health

##### **A. General physical health**

- 1) A general training on physical health specific to chronic health conditions, dementia, and similar physical health concerns in older adults that might require attention
- 2) Staff should receive instruction on how to assess the physical layout of a unit for safety; incorporate documentation practice
- 3) Motivational Interviewing - how to engage people to talk about their health & the importance of routine, preventative care
- 4) Geriatric nutrition
- 5) Cultural Competence
- 6) Resources for low-cost or free food/meals
- 7) Awareness of increasing physical fragility & range of motion or low-mobility exercise

##### **B. Medication**

- 1) Staff receives general training on medication, but also specific training on issues facing aging/elderly tenants. Issues addressed should include but not be limited to: training on common side-effects; medication interactions; effects of skipped dosage; reasons elderly tenants might be susceptible to using pain meds/ alcohol to self-medicate; dangers of someone weaning off of pain meds vs. suddenly stopping, awareness of a tenant being overmedicated

#### Domain #2 Behavioral Health

##### **A. Issues Regarding Isolation**

- 1) Internal training on a) promoting healthy social networks, b) “how to” for tenants on staying connected through technology, c) addressing root causes and issues
- 2) Importance of connections with family and/or other support networks aside from the services provider

##### **B. Engagement**

- 1) Internal training on: a) education and engagement increasing the tenant’s likelihood of follow through on referrals/appointments, b) advocating for tenants by assisting them in educating behavioral health providers about services they do & do not receive in supportive housing (Motivational Interviewing training is strongly suggested)

##### **C. Mental Health**

- 1) DMHAS Supportive Housing Training Catalog course on basic mental health issues & symptoms
- 2) Awareness of how symptoms may be affected by the aging process and how they may present in older adults
- 3) Internal training on using 211 & the DMHAS website to locate elder services and where to access the agency’s Local Resource Guide (template included in this packet)
- 4) DMHAS Supportive Housing Training Catalog course on mental illness

#### Domain #3 Activities of Independence and Daily Living

- 1) Internal training should enhance direct care staff skills in teaching individuals to compensate for declining abilities - this should include self-awareness and how to reach out for assistance.

Level of engagement will greatly affect the staff's ability to help the tenant address needs here, and should be emphasized

2) DMHAS Supportive Housing Training Catalog course addressing hoarding

#### **Domain #4 Housing**

- 1) Awareness of the housing rights of seniors – Connecticut Legal Rights Project (CLRP) may be a resource
- 2) Criminal record expungement – advantages & process for removing eligible items from criminal records can expand housing [and employment] options (information and training can be accessed through the *Connecticut Pardon Team*, at [www.connecticutpardonnteam.org](http://www.connecticutpardonnteam.org))
- 3) Awareness of eligibility requirements for senior housing/services (state/regional/local)
- 4) ADA compliance issues & reasonable accommodations - CLRP & DMHAS can be resources
- 5) Components of an assessment for unit safety; appropriate involvement of other service providers in overall assessment (i.e. other provider that may have unique input to facilitate a comprehensive assessment)

#### **Domain #5 End of Life Issues**

- 1) Internal training should provide education to staff members on: a) access to counseling resources [for tenants and for staff]; b) legal issues surrounding the death of a tenant; c) guidelines for interacting with friends and family of a tenant who has passed away; d) steps to take following the death of a tenant [agency responsibilities for notifying and, if required, providing documentation to outside agencies]
- 2) Advanced directives – Please use this link <http://www.ct.gov/dmhas/cwp/view.asp?a=2902&q=564288> to the DMHAS website to access the Advanced Directives Workbook. Certified Facilitators who work at DMHAS funded programs statewide have been trained by CLRP to assist with completing this workbook. CLRP can be reached at 1-877-402-2299 or go to CLRP's website at [www.clrp.org](http://www.clrp.org)
- 3) Provide access to DMHAS training on Death & Dying
- 4) Provide staff with the agency's version of the checklist '*When Someone Dies in Supportive Housing*'

#### **Domain #6 Coordination with Other Systems**

- 1) During the first six months of employment it is recommended that staff participate in an internal training that provides them with knowledge of the various resources and programs that would benefit aging and elderly tenants along with access to the information portals that provide information on eligibility and process to apply. This would include such resources as 211, the DSS website, and the DMHAS website, state Dept. on Aging website.
- 2) As part of an internal training on physical health, educate staff on the agency's guidelines or policies regarding a tenant's return home from a community placement [most commonly a physical or behavioral healthcare facility]. This should include but not be limited to: a) Timing of discharge [transport, staff or other resource availability for checking in, restocking tenant's basic need items, follow-up on discharge referrals, etc.]; b) Making connections, or assisting the individual in making connections with family, friends, other resources that could be helpful during any challenging transitions.
- 3) Staff will understand the services that all tenant's in supportive housing receive versus services that are provided in the community. Staff will receive guidance on how to help tenant's self-advocate for themselves.



## **Domain #7 Income and Benefits**

### **A. General**

1) Case managers are provided with a basic list of resources from which they can assist tenants in locating and accessing a wide variety of social, assistance, medical, nutritional, educational and employment resources

### **B. Health insurance**

1) Training from or a review of current information from DSS regarding: a) different types of coverage and benefits for which tenants may be eligible – including Life Alert alarms; b) guidance on the process of resolving a medical spend down; c) how to prepare for the redetermination process, including a system of consistent record management

ATTACHMENT #4

Resource Template for Agencies Working With  
Aging Tenants in Supportive Housing

Domain #1 Physical Health				
Name of resource/agency	Point person	Address	Phone	Email/website
Other pertinent info:				

**Domain #2 Behavioral Health**

<b>Name of resource/agency</b>	<b>Point person</b>	<b>Address</b>	<b>Phone</b>	<b>Email/website</b>

Other pertinent info:

**Domain #3 Activities of Independence and Daily Living**

<b>Name of resource/agency</b>	<b>Point person</b>	<b>Address</b>	<b>Phone</b>	<b>Email/website</b>

**Other pertinent info:**

**Domain #4 Housing**

<b>Name of resource/agency</b>	<b>Point person</b>	<b>Address</b>	<b>Phone</b>	<b>Email/website</b>

Other pertinent info:

**Domain #5 End of Life Issues**

<b>Name of resource/agency</b>	<b>Point person</b>	<b>Address</b>	<b>Phone</b>	<b>Email/website</b>

**Other pertinent info:**

**Domain #6 Coordination w/ Other Systems**

<b>Name of resource/agency</b>	<b>Point person</b>	<b>Address</b>	<b>Phone</b>	<b>Email/website</b>

Other pertinent info:

**Domain #7 Income and Benefits**

<b>Name of resource/agency</b>	<b>Point person</b>	<b>Address</b>	<b>Phone</b>	<b>Email/website</b>

Other pertinent info:



**OTHER RESOURCES**

<b>Name of resource/agency</b>	<b>Point person</b>	<b>Address</b>	<b>Phone</b>	<b>Email/website</b>

Other pertinent info:

## ATTACHMENT #5

### Checklist: When Someone Dies in DMHAS-funded Supportive Housing in Connecticut

This list was compiled in vivo for a single-site supportive housing tenant who died in early 2013. This person had been estranged from his family for years and had an upcoming court date (he was complainant in an assault, possibly a hate crime, hearing). The supportive service agency was his rep payee for Social Security benefits. He also owned a dog (therapeutic animal for which reasonable accommodation had been made in this no-pet building).

√	Date completed (time if needed)	Task	Any follow up needed? If 'yes' please list	Responsible person
		1) Notify Regional Hotline (if after hours or weekend/holiday)		
		2) Verbally notify LMHA		
		3) Complete DMHAS External Provider- Critical Incident report		
		3a) Fax/Deliver completed DMHAS External Provider- Critical Incident report to LMHA		
		4) Notify property manager		
		5) Disposition of pet		
		6) Complete HMIS Housing Exit form and send to internal Quality Assurance		
		7) Complete internal Critical Incident report (if your agency follows this process)		
		7a) Internal report completed with supervisor approval & needed follow up actions – send to internal Quality Assurance		
		8) Complete internal Client Event Data form re: death, client discharge. Send to internal Quality Assurance (if your agency follows this process)		

	9) Informal internal Quality Assurance & review by parties discharged from program does not occur until ancillary tasks complete.		
	10) Complete DDaP discharge form		
	11) Complete DMHAS Supportive Housing Assessment form		
	12) Look at previous months progress notes to get a snapshot of what was happening in this person's life in the prior month to death occurring		
	13) Redeposit cash withdrawn (this person had not received his monthly cash benefit as he died prior to distribution date)		
	14) Draft and send a letter to the bank re: tenant death		
	15) Contact Social Security by phone & send letter if requested (no letter was requested)		
	16) Contact CT Dept. of Social Services by phone & send letter if requested (no letter was requested)		
	17) Contact Meals on Wheels to discontinue (this was done in person, no letter was requested)		
	18) Debriefing meeting with property manager/management team; discuss disposition of belongings & contacting family		
	19) Contact LMHA for grief counseling if needed		
	20) Plan and hold memorial event (this was for other tenants in the building & staff [internal & external] that worked with this individual)		
	21) Internal review and debriefing with appropriate agency staff		
	22) Pay any outstanding bills (utilities, cable)		

	23) Meet with property manager to see if they want to assume electric service or have it disconnected		
	24) Notify cable company to discontinue service – return cable box (provide letter if needed)		
	25) Notify court of individual’s death re: upcoming court date		
	26) Obtain death certificate and provide to LMHA (as required)		