



Contributor:

David Dring Executive Director, Selfhelp Innovations



The LeadingAge Center for Aging Services Technologies (CAST) is focused on accelerating the development, evaluation and adoption of emerging technologies that will transform the aging experience. As an international coalition of more than 400 technology companies, aging-services organizations, businesses, research universities and government representatives, CAST works under the auspices of LeadingAge, an association of 6,000 not-for-profit organizations dedicated to expanding the world of possibilities for aging.

For more information contact:

Zohra Sirat, Project Manager, CAST zsirat@LeadingAge.org (202) 508-9438 LeadingAge.org/CAST



Reducing Social Isolation and Improving Health Status through Group Video Chat Activities

Categories

Reduce Social Isolation Reduce Feelings of Loneliness Reduce Depression Increased Resident Engagement and Satisfaction Increased Social Networks Increased Quality of Life Increased Staff Efficiencies Increased Revenue

Organization Name

Selfhelp Community Services, Inc.

Organization Type

Multiservice: Adult day care, care transitions, case management, community guardianship, geriatric care coordination, housing with services, naturally occurring retirement communities, NY Connects, senior centers, specialized case management for Holocaust Survivors, and safety net programs.

Organization Description

Selfhelp Community Services was founded in 1936 to help those fleeing Nazi Germany settle here and rebuild their lives. We started by providing resources for counseling, financial assistance, training and jobs. As this population grew older and expanded, we grew with them and added more services such as affordable housing and senior centers. Based on this expertise, we broadened our mission and expanded our work to other populations.

Today, Selfhelp is a large not-for-profit human service agency with 27 sites located throughout Manhattan, Brooklyn, Queens, the Bronx, Nassau County and Westchester. We continue to provide home and community based services to more than 20,000 frail, vulnerable older New Yorkers each year. We remain the largest provider of comprehensive services to Holocaust survivors in North America. Our network of home care and community-based services has a goal of helping people live independently, safely and with dignity in the community and to avoid institutionalization.

Project Description

Selfhelp Community Services launched the Virtual Senior Center (VSC) in 2010 as a research project to see if a technological intervention could engage older adults to adopt the technology and, through the use of the service, reduce their loneliness and increase their social network. Evaluation of the project and its subsequent expansion found that using this intervention made a tremendous positive impact on the social isolation and loneliness of its users. Today, the service is used throughout New York City and across the country, and is available in four languages other than English (Korean, Mandarin, Russian and soon in Spanish). The service is aligned with the Selfhelp Innovations Programs and Senior Communities departments.

Socialization Modality

Selfhelp's Virtual Senior Center is a web-based service providing an easy to use interface designed specifically for older adults to socially engage in online activities. These activities include attending virtual classes enabled by a group video-chat service that allows each participant to see, hear and talk with each other, including the facilitator, in real-time. Participants have said that it makes them feel like they are in the same room with the other participants.

There are typically 35-45 classes each week that touch upon a wide variety of topics, including arts discussions, computer skills, current events, exercise programs, history lessons, museum tours, spirituality, and classes on learning skills and practices to self-manage chronic conditions. Additionally, participants can have one-onone video-chats with each other outside the classroom or Skype with family and friends. They can also browse individualized Internet links or online games, including a social game that Selfhelp created where participants play cards while they can see, hear and talk with the other players as if they were all in a living room together. Photos from family and friends can be shared with the participants via APIs from Facebook and Flickr.

The interface includes a calendar that provides the details on upcoming classes and chats, which can also serve as a reminder service for taking medications, personal events, or medical appointments. A caregiver interface links to the senior participant's account and allows the caregiver to manage the content on the participant's account, send them notes, add reminders to their calendar and manage daily tasks through a checklist.

System Embodiment

Selfhelp's Virtual Senior Center is available on All-in-One computers, tablets (android and iOS), desktops and laptops (Mac and Windows OS). Certain features (home page, calendar, news, links, and caregiver interface) can be accessible via smart phones (Android and iOS).

Business Model

There are two approaches Selfhelp currently pursues to sustain and grow the service. The first is a direct to consumer model, where older adults or their families pay a per month tuition fee. The second model is integrating the VSC to enhance or enable specific services. For example, Selfhelp is pursuing the use of the VSC to support its work in providing chronic care management services in partnership with physician groups. With the addition of the VSC, chronic care management services are enhanced, because those patients receive the benefits of the VSC's socialization services, plus it provides a HIPAA secure video-based environment to conduct virtual check-ins by nurses and social workers to not only better assess the patient's progress with their care plan, but also enhances the ability to provide health literacy education, specific to their current treatment of their chronic condition. With the new reimbursement payments, there is income for both the physicians and Selfhelp to cover staff costs as well as the VSC tuition fees.

Implementation Approach

Referrals to the program are evaluated to confirm the prospective participant's appropriateness; specifically, do they consider themselves lonely, interested in making new friends and if the person has never used a computer before would they be willing to try. If the person has their own computer, an account is set up for them and a remote access training session is held to teach them how to access, navigate the interface and join a class. If the participant doesn't have a computer, then the team will configure one for them (either an All-in-One or tablet), and set up their account. Training will be provided through either a home visit or remote session, depending upon their location. Ongoing VSC classes provide additional training on how to use the service and build other computer skills.

Participant activity on the service is monitored. If participation in services or activities declines, then an engagement coordinator contacts the participant to discuss their use of the service and learn if any service could be provided to increase their participation. This enables Selfhelp to constantly improve the system. In some cases, participation has declined due to a health condition that we are able to help address, or because of travel.

Outcomes

Independent <u>evaluation</u> conducted with study and control groups found that Selfhelp's Virtual Senior Center made a significant impact on the study group. It **reduced loneliness by 80%, increased connectedness by 60%, and improved self-reported health status (wellbeing) by 51%, while 97% of participants agreed that Selfhelp's Virtual Senior Center improved the quality of their life.**

Other research conducted on staff effectiveness and efficiency found that case managed clients who were on Selfhelp's Virtual Senior Center were more likely to meet their goals and to do so more quickly. Additionally, the video-based interactions by social workers were more beneficial than typical telephone calls, because videobased interactions allowed staff to discover issues that they couldn't have identified through a telephone call. Ongoing research, to be completed at the end of 2018, is looking at whether Selfhelp's Virtual Senior Center impacts healthcare utilization.

And in the words of some participants:

- "It's an opportunity to belong. I was alone, friends passed away and moved. I get to meet, mingle, and learn from my new friends."
- Ms. B stated that she feels like a different person before VSC she wanted to die. Her daughter said she saw a difference in her after only 2 days in the program. Ms. B feels like she has a new family.
- "My whole life's changed. I'm not shut out anymore. I'm part of something."
- "I'm amazed at the technology. It has totally changed my life."
- "It's fantastic, like the others are visiting in my home ... brings life back to you."

Challenges and Pitfalls to Avoid

Selfhelp's Virtual Senior Center is a complementary tool that is used to engage socially isolated older adults in socializing activities that enrich the quality of their lives. As with any tool, it is not appropriate for every situation. Identifying who would benefit from the service the most is still an ongoing process. While there are many participants who have never used any technology before and are active within the program, there are still some older adults who are too afraid of technology to even try the service. Sometimes this can be overcome with coaching, and then they discover that using the service is very valuable. But that is a labor-intensive process.

As Selfhelp seeks to scale the program more broadly, it is working through each aspect of the experience to find ways to streamline and automate the processes involved while also ensuring that there is a human available to support anyone who needs it. This is a delicate balance that we're still working out.

Selfhelp works with its existing participants to get ideas for new functionality to be included within the VSC as well as confirm the need for improvements recommended by the team. Select participants are also asked to test out new functionality to confirm its ease of use, appropriateness and relevance to participants, which has helped with the adoption of the new services.

Lessons Learned/Advice to Share with Others

Select the target population of participants carefully to ensure that they would be willing to use the technology, engage, and benefit from the programs offered.

Leverage your participants to improve, refine, and add functionalities to the technology and the services offered.

You may be able to leverage a technology initially intended for social connectedness, like Selfhelp's VSC, to provide services that would generate revenue, like chronic disease management in partnership with others.