

Q1 Please provide your contact information below.

Name	David Dring
Title and Organization	Executive Director, Selfhelp Innovations
Address	Selfhelp Community Services, Inc.
Address 2	520 Eighth Avenue
City/Town	New York
State/Province	NY
ZIP/Postal Code	10018
Email Address	ddring@selfhelp.net
Phone Number	212.971.7708

Q2 Please describe your company or organizations overall goals and mission.

Founded in 1936 by refugees from Western Europe, Selfhelp Community Services, Inc. (Selfhelp) is now one of New York City's largest and most respected providers of services to older adults, with more than 20,000 clients served annually through 27 locations in four boroughs and Long Island.

Selfhelp blends social services, health care, and innovative technologies to provide a comprehensive network of community-based support for older adults. Programs include home care, in-home therapeutic care, skilled nursing, case management, comprehensive services for Holocaust survivors, affordable housing with services, chronic disease self-management and many other specialized programs that address economic stability, food, health supports, and community/social context. The organization's overall goal is to provide older adults, and other vulnerable New Yorkers, with the necessary supports to remain in the community as they age.

Selfhelp's mission: Selfhelp is a not-for-profit organization dedicated to maintaining the independence and dignity of seniors and at-risk populations through a spectrum of housing, home health care, and social services and will lead in applying new methods and technologies to address changing needs of its community. Selfhelp will continue to serve as the 'last surviving relative' to its historic constituency, victims of Nazi persecution.

Q3 Please indicate which category your organization falls under.

**Technology Solutions,
Community Based
Organization**

Q4 Innovation Executive Summary. Please describe the innovation, and how it addresses the social determinants of health. Please identify how the innovation addresses the 6 innovation criteria (i.e. ROI, scalability, feasibility, evidence based support for innovation, relevance to the Medicaid population and speed to market).

With early support from Microsoft Corporation, Selfhelp has been developing and implementing the Virtual Senior Center (VSC) – a unique, transformational program that engages homebound seniors into the larger community by using technology to connect them with other participants in a range of activities. A cornerstone activity of the program is its interactive, real-time classes where participants can hear, see and talk with each other in an interactive session. Between 35 and 40 classes are offered each week, each attended by 25 to 50 seniors. This groundbreaking program effectively reduces social isolation by creating social networks for otherwise shut-in seniors, connecting them to each other and to the outside world.

The Selfhelp Virtual Senior Center addresses several social determinants of health. We provide language and literacy assistance to non-English speaking seniors through English language classes conducted online. We foster a strong sense of social cohesion among seniors who have been socially isolated. Selfhelp is a major provider of affordable housing for seniors in New York City and Nassau County, and we continue to build more developments. About 20% of the current VSC participants are residents in one of our buildings. The VSC connects them to social workers who help them apply for affordable housing and other public and private benefits for which they may qualify. In this way, the VSC also helps people become less financially insecure.

We are proposing a VSC intervention called Being Well, a continuous series of weekly live interactive workshops for homebound seniors that Selfhelp piloted and evaluated in 2013 with Barrie Raik MD and Veerawat Phongtankuel MD of the Weill Cornell Medical College, and which has been offered ever since through the Selfhelp Virtual Senior Center. Being Well is a modified version of the Stanford University Chronic Disease Self-Management Program (CDSMP), a 6- weekly group workshop that was found effective, in a series of randomized controlled trials, in preventing disability, delaying the onset of disease, and in reducing health care utilization costs among older adults (Lorig et al., 1999; Lorig, Hurwicz, Sobel, Hobbs, & Ritter, 2005; Gordon & Galloway, 2008).

A comprehensive evaluation of a similar online version of the CDSMP, conducted four weeks post intervention by Namkee G. Choi et al at the University of Texas at Austen, found that there was a 50% reduction in the number of participating seniors who rated their health fair or poor. There was a 50% increase in the number of people who rated their health good or very good. The severity scores of fatigue and pain decreased by more than 30%; health distress score decreased by 60%; and the self-efficacy (confidence) score increased by more than 30%.

The project has already been piloted as described above, and evaluated. Selfhelp has designed all of the hardware and software needed for the project, and we have specially trained technicians who visit the homes of participants to set up the system, and provide in-person (as well as by phone) coaching. With additional partnerships across the city and state, and additional funding, we would be able to expand this project fairly quickly.

Both Selfhelp's internal evaluation and outside academic research has provided evidence that the majority of seniors are able to learn, and effectively utilize, the technology. We also have evidence that self-reported health outcomes significantly improve, and that this results in fewer trips to the emergency room. We also have a fruitful partnership with Weill Cornell Medical College that will enable us to attract highly trained facilitators and continue to refine the intervention.

As a non-profit, community-based, social service agency, Selfhelp is in the process of developing a "go to market" strategy for the VSC. The service has been in operation for four years as a research project, so we have proven its feasibility (older adults willing and able to use it, the impact on participants is transformational and the Selfhelp has the capacity of Selfhelp to operationalize it). There are currently 400 people using the VSC, but the service has the capacity to grow exponentially. Based upon philanthropic support and interest from Managed Long Term Care (MLTC) companies, Selfhelp believes it can make VSC available to older adults with a 1 to 2.3 ROI (\$1 invested in VSC results in a \$2.33 return in savings). As MLTC companies are now measured with the MLTC Quality Incentive Score Card, including a metric on loneliness, the VSC can be an important vehicle to sustainably address this social determinant of health.

The VSC program has become a lifeline for over 400 seniors throughout New York City, Long Island, Baltimore, Chicago, , and San Diego. Participants enjoy taking part in intriguing live classes facilitated by dozens of instructors, chatting with friends, enjoying yoga,

learning wellness tips and discussing politics, surfing the Internet and playing games all from the comfort of their own homes. To serve a broader community, the VSC is now available in multiple languages including Spanish, Chinese, English, Korean, and Russian. We are in the process of developing an exclusive trauma informed menu of offerings designed for survivors of the Holocaust, of which there are about 45,000 still living in New York today. The program has been shown to break down barriers of digital literacy, reduce social isolation by up to 80%, improve participants' quality of life by 97%, and increase participants' self-reported health status by 51%

Dr. Raik and Dr. Phongtankuel's evaluation of the pilot, which was conducted with 45 VSC participants, showed that participants overwhelmingly improved their ability to manage their health care with their providers. As a result of their participation, over 60% of pilot participants said that they now prepare a list of questions for their doctor, which they had not done before; about half of participants reported improvements in their ability to ask questions of the doctor about their medical care; and almost 70% said the workshops had helped to improve their ability to discuss personal problems with their doctor that are related to their health. This pilot project demonstrated that homebound older adults, with technical coaching, are able to participate in a video chat interactive program designed to help with health and that they improved their confidence in self-management.

We are proposing to expand this program in order to serve socially isolated seniors across the city and state, to help medical providers provide education, adherence support, and follow-up. We also plan to continue working with geriatric fellows from Weill Cornell Medical College as workshop co-facilitators.

Q5 Was your innovation implemented? If so, please explain when, the number of people impacted, and the results.

Yes (please specify when and the estimated number of people impacted):

Currently 400 unduplicated users of the VSC.

Q6 Please identify the SDH Domain that your innovation addresses. (Select all that apply.)

Education,
Social and Community Context ,
Health and Health Care ,
Neighborhood and Environment ,
Economic Stability

Q7 I give the Department of Health the right to share the information submitted in this application publicly (for example: on the DOH website). I understand that there is no monetary reward/reimbursement for my submission or for attending the summit should my innovation be selected.

I consent to have my innovation shared

