



Spotsylvania County
 Partner Agency Application for Funding FY 2015
FACE SHEET

Agency Name:	Mental Health America of Fredericksburg – Senior Visitors Program				
<i>Has Spotsylvania County Funded This Agency in Previous Years?</i>					X Yes <input type="checkbox"/> No
Physical Address:	2217 Princess Anne St. Suite 104-1				
Mailing Address/PO Box:	same				
City:	Fredericksburg	State:	VA	Zip:	22401
Telephone Number:	540-371-2704	Fax Number:	540-372-3709		
Federal Tax ID #:	54-0678704				
Web Address:	www.mhafred.org				
General Email Address:	mhafred@mhafred.org				
Agency Main Contact:	Lynn DelaMer	Title:	Executive Director		
Telephone Number:	540-371-2704				
E-Mail Address:	mhafdir@mhafred.org				

Agency General Information

Agency Mission:	MHAF provides education, advocacy and service to all people with mental health needs. We educate to promote mental health awareness and understanding. We solve problems by advocating policies and by working with individuals and agencies in the community to respond to mental health problems and to meet needs. We identify gaps unmet by public and private mental health providers and insurers, and we create and incubate programs and funding to meet those needs. The Senior Visitors program meets a gap in supportive services for seniors.
Number of years agency has been in operation:	58 years (founded in February 1955)
Localities Served:	City of Fredericksburg, and counties of Caroline, King George, Spotsylvania, and Stafford

Agency Financial Information

List Programs	Personnel Expenses	Benefits	Operating Expenses	Total Program Budget	Requested from Spotsylvania
1. Senior Visitors	67,841	7,900	14,251	89,992	23,750
2. MHAF Programs	58,595	6,900	14,897	80,392	
3.					
4.					
5.					
Agency Administration:			11,945	11,945	
Capital Outlay:					
Total Agency Budget:	126,436	14,800	41,093	182,329	

If your application includes funding increases for personnel (to include new positions or merit / COLA increases), please check here and explain in detail the need for this type of increase under each program budget.

Attachment Checklist: (include <u>ONE</u> copy of each)	<input type="checkbox"/> IRS 501(c)(3) Letter	<input type="checkbox"/> Audit Report (with Audit Management Letter)	<input type="checkbox"/> Current Financial statement	<input type="checkbox"/> IRS 990
<input type="checkbox"/> Accountant Contact Information	<input type="checkbox"/> Organizational Chart	<input type="checkbox"/> Current Board Roster (with contact information)	<input type="checkbox"/> Agency's Current Strategic Plan	
Agency Director's Signature:	, V. Lynn DelaMer		Date:	October 11, 2013

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Fredericksburg – Senior Visitors

If your agency is requesting an increase or decrease in funding as shown on the Agency Financial Information Chart included on the Face Sheet, please describe, in detail, the reasons for these changes, in each category below for the Agency as a whole. Program specific increases can be given under the program descriptions in the next section. (The individual descriptions should not exceed 20 lines of text.)

Agency Administrative Expenses (to include funding increases for personnel (new positions, merit and/or COLA increases):

MHAF served a record number of individuals, families and older adults in FY13 who experienced outstanding outcomes without significantly increasing our total agency budget. Fixed expenses rose by 5%; staff did not receive merit or COLA increases in FY13. MHAF experienced significant accomplishments recently: notification of approval as a Neighborhood Assistance Program (NAP) effective July 1, 2013 and joining the Chamber of Commerce – MHAF Board strategies to provide leverage as we solicit donations in order to expand programs to serve those who request our help. This was accomplished by employing successful strategies:

- 1) Use of volunteers who fill critical voids in community infrastructure at a time of fiscal constraint, serving the most vulnerable while requiring few or no additional resources – nearly 5400 hours (\$136,510 volunteer value) in FY13.
- 2) MHAF Board members and staff increased its fundraising capacity by over 40% (FY12 & 13) – generating revenues of nearly \$60,000 (over 1/3 agency total budget) to support the agency's free programs and services through a successful donor campaign and 6th annual Walk for Mental Wellness. A signature event is being planned for FY14.
- 3) Revised strategic plan to include outreach to federal, state & local government campaigns for designated gifts.

The \$10,000 grant from Mary Washington Hospital Foundation (MWHF) expired in September 2012 that afforded expansion of the Senior Visitors program to meet the increasing needs of homebound, isolated older adults by hiring an 8-hour per week program assistant as well as increasing the hours of the program director. This revenue was directly offset by personnel expenses as restricted by the grant. Unfortunately, the majority of grantors want to fund new programs rather than supporting established successful programs. We are fortunate that MWHF provided a \$5000 mini grant that afforded the additional staff hours to continue through June 2013. A funding increase of 5% from each locality was requested for the FY14 funding cycle; however, Stafford County was the only locality to increase its annual financial support. Therefore, a funding increase of 5% from each locality and United Way is requested for FY15 to sustain the staff hours that have resulted in more seniors being served.

With the region exceeding the national growth in those 65 and older, appropriation of increased funds will ensure these valuable services continue for *Spotsylvania seniors*. MHAF Board is committed to this program and will explore funding streams at its strategic planning retreat in November 2013 to sustain the additional staff hours that have resulted in more seniors being served and more services being provided to impact their lives. Cost-effective services provided by the Senior Visitors Program takes the burden off the safety net (DSS) for local jurisdictions. MHAF receives no state or federal funding; no fees are charged to anyone and no services are billed for reimbursement. With increased fundraising efforts and active involvement of dedicated Board members and agency volunteers, MHAF continues to positively impact the mental health and human needs of individuals, families and seniors in our community while maintaining a strong, healthy organization.

Capital Outlay:

None

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Historical Budget Information

Please complete the following chart with the financial information for the agency as a whole. In each area include the revenue specifically allocated to your agency from each locality/entity listed below.

	FY 2013 Actual	FY 2014 Budgeted	FY 2015 Projected
Caroline			3,000
Fredericksburg	12,215	12,215	12,826
King George			4,000
Spotsylvania	22,618	22,618	23,750
Stafford	10,230	11,253	11,816
United Way	42,400	45,900	49,500
Grants	15,850	17,000	18,000
Client Fees	0	0	0
Fundraising	58,926	58,977	59,437
Other (explain below)			
Total Agency Revenue	162,239	167,963	182,329

Detail below what revenue is included in the category 'Other':

None

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 Mental Health America of
 Fredericksburg – Senior Visitors

Application Checklist		
Items to be completed		Comments:
<input type="checkbox"/>	Face Sheet	Only expenses related to the Senior Visitors Program, not the agency, are reflected as the funding request is specific to program support.
<input type="checkbox"/>	Program Name	
<input type="checkbox"/>	Program Purpose/Description	
<input type="checkbox"/>	Justification of Need	
<input type="checkbox"/>	Target Audience	
<input type="checkbox"/>	Service Area	
<input type="checkbox"/>	Service Delivery	
<input type="checkbox"/>	Client Fees	
<input type="checkbox"/>	Budget Information	
<input type="checkbox"/>	Goals and Objectives	
<input type="checkbox"/>	Program Goal	
<input type="checkbox"/>	Most Recent Data Chart	The Logic Model for Senior Visitors was submitted for FY2013 United Way cycle. Program data based on the logic model is reported for FY2013.

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Program Name:

Senior Visitors Program

Each agency submitting a funding request must fill out the following pages for each program serving Spotsylvania County Citizens and for which funding is requested. Any incomplete applications or programs that do not have a full application will not be considered for funding. PLEASE do not include any unrequested information. Spotsylvania County reserves the right to request additional information once the application has been submitted.

Program Name:	Senior Visitors Program	<i>Is this a new program?</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Program Contact:	Lynn DelaMer	Title:	Executive Director
Telephone Number:	540-371-2704		
E-Mail Address:	mhafdir@mhafred.org		

1. Program Purpose/Description: *(the following description should not exceed 10 lines of text)*

Senior Visitors (SV), the **only free** supportive service program in our community for older adults, provides in-home, community-based individualized assistance and care management services to improve social, emotional and mental wellness of homebound, isolated seniors by alleviating loneliness and social isolation – known predictors of depression and risk of suicide. In fact, 20% of all deaths by suicide are by persons aged 65 and older. Most live alone on fixed incomes, have health and mobility impairments, cannot drive and have lost connection with their community. SV matches trained, screened volunteers with seniors referred by DSS, RAAA, health care providers, churches, friends, or self-referral. Referral sources use SV as a continuum of care after hospital discharge, exhausted home health visits and to connect seniors on waiting lists of community agencies until resources are available. With support from volunteers and connection with community resources, the unmet needs and unresolved problems of many seniors are addressed. Thus, seniors experience slower declines in functional status, improved health, mental health and a better quality of life.

2. Justification of Need: *(Please state clearly why this service should be provided to the citizens of Spotsylvania County and why the Board of Supervisors should consider this funding request. If this is a new program, be sure to include the benefit to the County for funding a new request. The following should not exceed 10 lines of text, and should include the most recent data available.)*

Services for seniors ranked in the top 10 issues identified in the 2011 Healthy Communities Partnership assessment. The 2010 census reports **Spotsylvania residents aged 65 and older rose by 61% - growth at 3 times the national average.** Yet there are few services for older adults in our community, and even fewer that are FREE. The program's services allow low income seniors to spend their limited funds to meet their basic needs – food, shelter, and medicine. The program provides weekly, in-home services to over 120 homebound, isolated older adults. Volunteers provide a powerful economic and social benefit to our community. During FY13 they served 5367 hours/contacts valued at \$136,510 (FY12 VEC volunteer rate \$24.29); staff responded to 1114 care management needs. The program approach is preventative helping to ensure seniors served don't require more costly institutionalized care – a tax saving for all of us. No other human service provider in our area offers these unique, individualized services to seniors. Without this program, many senior needs would go unmet and Spotsylvania's safety net burden would increase.

3. Target Audience: *(The following should describe the specific population targeted by the program and should not exceed 5 lines of text.)*

Older adults aged 60 years and older who are homebound, isolated, socially disadvantaged, have physical and mental health impairments limiting their mobility and connection with community are potential program beneficiaries. SV collaborates with community agencies in the public, private and nonprofit sectors who refer clients that benefit from the program's free individualized in-home services; thus maximizing service delivery and minimizing duplication of services. The Program meets a significant gap in services for seniors, oftentimes delaying their need for local government assistance.

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Program Name:
 Senior Visitors Program

4. Service Area: (Please describe the program's intended geographic service area. This may include entire regions, localities, or specific schools, neighborhoods, etc.)

Any older adult, 60 years or older, residing in the City of Fredericksburg or counties of Caroline, King George, Spotsylvania and Stafford who is homebound and isolated from their community due to immobility and/or health impairments is eligible to receive the free services offered by the program. We know there are many lonely, isolated elderly citizens in our community who could benefit from a special friend and in-home support services provided by caring volunteers who become a senior's special friend. Our goal is to reach as many as possible to enhance their quality of life

5. Service Delivery: (Please state the geographic location of the service, the duration and frequency offered to the clients.)

Volunteers make weekly visits to senior's homes who reside in the City of Fredericksburg or counties of Caroline, King George, Spotsylvania and Stafford. Visit times are determined by volunteers and senior clients to accommodate schedules of both individuals. Senior Visitors staff members are available during the week to provide assistance and care management services for seniors as well as respond to volunteer needs. Volunteers commit to at least one hour per week for a six-month period; however, the majority of the volunteers far exceed this commitment as evidenced by the nearly 5400 hours and contacts delivered during FY13.

6. Client Fees: (Please describe the fees clients must pay for the services provided in this program, and how those fees are determined.)

MHAF receives no state or federal funding to support this program; no fees are charged to program recipients and no services are billed for third party reimbursement. The program is provided as a FREE service to area seniors. Sixty-seven seniors enrolled in our program were the grateful recipients of gifts in December 2012 collected by Home Instead Senior Care, sponsor of the annual "Be a Santa to a Senior" holiday program. Through partnerships with youth, church, nonprofit groups, and RUW's Day of Caring, many seniors are fortunate to have home repairs and yard work done at no charge.

7. Budget Information: (Please complete the following chart with the financial information for this program. In each area include the dollars specifically allocated/requested for this program.)

	FY 2013 Actual	FY 2014 Budgeted	FY 2015 Projected
Caroline			3,000
Fredericksburg	11,630	12,215	12,826
King George			4,000
Spotsylvania	21,541	22,618	23,750
Stafford	10,976	10,230	11,253
United Way	14,000	16,500	17,325
Grants	8,000	7,500	5,000
Client Fees	0	0	0
Fundraising	5,509	8,584	12,838
Other			
Total Program Budget	71,656	77,647	89,992

Please indicate, in detail, reasons for increases or decreases in the amounts requested for FY 2015. Include whether these changes come from increases in personnel, benefits, or operating expenses. If an increase is being requested, please describe the impact not receiving an increase would have on the program. In particular, please note if any increase is sought for new positions or personnel, please explain in detail.

With the increased FY14 funding from Stafford County, the program has been able to provide more social events, more published newsletters and experienced a growth in the number of volunteer service hours to seniors valued at \$136,510 (VEC FY12 rate of \$24.29). The program also experienced an average 5% increase in fixed expenses (rent, postage, printing, supplies) during FY13. The MHAF Board has increased its fundraising capacity by over 40%. Therefore, a funding increase of 5% from each locality is requested to supplement increased program expenses and sustain the Program Assistant position funded by a one-year grant that expired in September 2012. This minimal increase in funding will afford additional hours to recruit and match volunteers with seniors on the wait list, provide services for an expected 50+ new client referrals in FY15, as well as meet the rising care management needs of all program beneficiaries at no cost to them. Our ability to respond to seniors' needs depends on adequate funding. MHAF receives no state or federal funding to support its free programs; no services are billed for reimbursement – all services are provided free to seniors who need help but cannot afford to purchase it. Without program support, it is likely that seniors would require institutional care or local government services (staff positions and administrative support) at a higher cost than the funding appropriated by **Spotsylvania County** to the program. The program reaches seniors not currently receiving any services as well as providing an adjunct to those served by agencies such as DSS or RAAA, thus complementing, augmenting and expanding services to many seniors who live on fixed incomes at a significant cost savings to **Spotsylvania County**, rather than duplicating or overlapping services.

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Program Name:

Senior Visitors Program

8. Goals, Objectives, & Evaluation: (Please provide the following information regarding the goals and objectives for your program. Space has been provided for two goals, with two objectives per goal. If your agency is funded by the United Way, please include a copy of your Logic Model for this program as a supplemental attachment. Individual descriptions should not exceed 5 lines of text.)

Program Goal 1:

Homebound seniors will feel less lonely and isolated as a result of enrollment and participation in the program, thus reducing their risk of depressive symptoms

Objectives:

1a.	Provide weekly, supportive visits to homebound older adults by trained volunteers to alleviate loneliness, despair and social isolation.
1b.	Provide socialization opportunities for homebound older adults to encourage "life outside their four walls": <ul style="list-style-type: none">◆ outings in the community◆ annual holiday social in December and summer picnic◆ monthly newsletter, cards remembrance program and reassurance calls to seniors

Program Goal 2:

Homebound seniors will be connected to needed community resources as a result of enrollment in the program, thus reducing their unmet needs and unresolved problems

Objectives:

2a.	Provide care management services through communication with client, volunteer and referral sources to link older adults with needed resources (physicians, healthcare providers, agencies serving older adults, family members)
2b.	Cultivate and maintain effective working relationships that ensure referrals to and from needed community resources providing services to older adults (local government and human service agencies, healthcare providers, civic organizations, faith and business communities)

Evaluation Method: *(Please describe the method used to measure the above goals/objectives. Please do not exceed 10 lines of text.)*

The Program Director conducts a free in-home client assessment on the initial visit once the referral is received and completes a form that includes demographic and individual health and safety information. A logic model outcome measurement tool was developed and is used to collect client and program data (FY13 copy attached). Currently, volunteers complete and submit monthly client visit forms that are reviewed by the program staff to monitor client status, identify any needs that require care management services, and ensure client-volunteer match success. A daily phone and/or email log provides tracking data to document connection with resources. Currently, client satisfaction questions related to alleviation of loneliness and social isolation are included on the monthly visit form to provide a clearer picture of the program's value and benefit to seniors' enhanced quality of life, needs met/problem resolution and connection with community. *100% of seniors enrolled in the program reported less social isolation and loneliness, and 100% of seniors requesting care management reported satisfaction as a result of services provided by the program.*

9. Outcome Data: *(Please give the most recent outcome data for the objectives above. Indicate below what time period the data covers.)*

Data Collection Period:	July 1, 2012 – June 30, 2013 (See attached logic model with outcome results)
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Objective 1a.

Client satisfaction surveys reveal that seniors receive significant benefits from individualized assistance and support from their volunteer friends, including alleviation of loneliness and social isolation. Through their free, weekly in-home services, many seniors are able to remain in their own homes with dignity and independence maximized, rather than face premature institutional placement. Volunteers provide various support services – companionship, caregiver respite relief, transportation to medical appointments, and running errands (grocery shopping, picking up medications). Previously unmet needs are identified resulting in connection with needed resources (phone amplification, blinking smoke alarms, home repairs). Many who have no or few family members living in the area appreciate being “adopted” by their volunteer and enjoying holidays with a family. For homebound older adults, “life outside their four walls” enhances their quality of life. Of the newly-enrolled FY2013 program recipients, **40% are Spotsylvania residents**. Nearly 400 volunteers have been trained who provide compassionate support to seniors.

Objective 1b.

Seniors report on the client satisfaction survey and through phone calls and notes to program staff that the socialization opportunities offered by the Senior Visitors program brighten their lives immensely. They enjoy the weekly outings with their volunteer – grocery shopping, doctor's appointments, or just enjoying a cup of tea together – and being part of their community again. The annual summer picnic and holiday social had the most people attend in the program's 13 year history. Seniors look forward to the newsletter arriving in their mailbox, and are especially thrilled to receive comforting cards when they are not feeling well or in remembrance of their birthday or a special occasion. Reassurance calls from program staff and volunteers let them know someone is thinking about them and genuinely cares.

Objective 2a.

Seniors enrolled in the program are presenting with extensive care management needs requiring more staff time to connect them with needed resources – mental and physical health services, devices to improve hearing, blinking smoke alarms for those with hearing impairments as well as home repairs. Client care management calls totaling 1114 were responded to during FY13. Oftentimes, a client's need requires several phone calls to find an appropriate service that responds to their specific need as well as contact with referring partner agencies and family members. Seniors report to their volunteers and program director how grateful they are to have their unmet needs heard and problems resolved through connection with appropriate community resources and services.

Objective 2b.

The Program Director and Assistant continue to cultivate relationships with newly-identified eldercare providers while maintaining effective working relationships with established providers in order to ensure referrals to and from needed community resources providing services to older adults (local government and human service agencies, healthcare providers, civic organizations, faith and business communities). The Program Director provides training for agency staff members to foster closer coordination of services, makes presentations to civic and community agencies to strengthen the referral network, and is an active member of Partners in Aging, an education and advocacy coalition promoting eldercare issues. She also provides education to increase awareness of eldercare issues. During FY13, 2289 people were educated at 43 educational outreach events to increase awareness and understanding of issues facing older adults and their caregivers.

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Program Name:

Senior Visitors Program

10. Program Goal Updates: (Please provide a brief description of the current status of your program goal(s), given your outcome data. For example, if reported data was well below the stated outcome measure, please indicate why you feel that is the case. Also, include how your outcome data will influence or modify the program for the upcoming fiscal year. These descriptions should not exceed 20 lines of text.)

Program Goal 1:

100% of matched seniors report they feel less lonely and isolated as a result of individualized support services provided by their Senior Visitor volunteer, thus reducing their risk of depressive symptoms and risk of suicide. The Program has become a vital resource for seniors, caregivers, agencies serving the elderly, and our community. The weekly supportive services allow many seniors to remain in their own homes and live independently with minimal assistance from their special friend. Volunteers, who serve as watchful "eyes and ears," identify concerns whereby intervention keeps seniors safe and healthy. Seniors enjoy the outings and socialization opportunities that afford reconnection with their community; caregivers are delighted with respite relief. Additionally, seniors are connected with other needed services provided by local agencies – Department of Social Services, RAAA, and Food Bank as needed. Partnerships with youth, church and nonprofit groups have resulted in additional free services for seniors – raking leaves, trimming shrubs, painting, and minor home repairs.

In-home companionship, respite relief and supportive services provided by trained volunteers results in a significant savings to individuals, families, local government and our community. However, the most important achievement is the smiles returned to faces of many lonely seniors in our community. Without the help of SV volunteers, many older adults may not be able to continue living at home and might need more expensive, less personal care. Volunteers are providing caring and compassionate services every week by offering seniors contact with the world outside of their home, thus enhancing their quality of life and making their lives less lonely. Seniors report that the program is successfully meeting program goals of enhanced quality of life, independence and dignity. The weekly services promoting senior wellness are alleviating loneliness, decreasing the risk of depression, and reducing the incidence of preventable illnesses through care coordination and early intervention services. Many senior clients report that their volunteer has become their "extended family" providing companionship and true friendship. Client Joan wrote on a note to the program director: "Thanks for giving me Liz. She makes my life worth living."

Program Goal 2:

100% of seniors referred to community resources reported satisfaction and feeling better as a result of being connected with needed help. Outcome data reflects that the program is serving more people who have greater needs – 1114 care management calls in FY13, thus more staff hours are required to provide effective care management services to address the unmet needs and unresolved problems of older adults and the 50+ expected new referrals in FY15. Nearly 100 calls were received and responded to each month during FY13 from seniors, family members, volunteers and referral sources requesting identification of and connection with community resources. The safety and health of **Spotsylvania seniors** is promoted through free care management services that provide early intervention services and continuity of care when concerns arise to keep seniors healthy and safe in their own homes. With minimal support from trained volunteers and connection with needed community resources, the unmet needs and unresolved problems of many older adults are addressed. Seniors can remain in their own homes as tax-paying citizens within their existing neighborhoods rather than moving to institutional settings. Enhanced quality of life and connection with their community is provided through weekly outings with volunteer friends, program-sponsored social events, bi-monthly newsletter, cards remembrance program, and reassurance calls to seniors to let them know we care. The SV Program provides a lifeline to seniors who have worked and been a vital part of our community, but now need a little assistance to enjoy their golden years. Perhaps a story will convey the value of this program to **Spotsylvania seniors**. A volunteer writes:

"I think this is a day that showed how wonderful this program is. About an hour before I was to pick Sylvia up, I got some scary news about my husband's health. I was quite upset and almost cancelled our lunch. I decided to go as she really looks forward to my visits and getting out. When I got there, she could tell I was upset and offered to cancel, but I told her we needed to go. Sylvia picked a restaurant with "comfort food". We talked a long time about both my husband and her health. After a while, I realized she enjoyed the role of being my friend. In short, I think she felt needed instead of being needy. We all need to be needed. I think our friendship really grew."

Our 58 year old agency values fiscal responsibility during recovering economic times, yet the fact is that service to more seniors with more needs requires more funding. An appropriation by Spotsylvania County of less than \$25,000 will reduce the locality's safety net burden while ensuring continuation and expansion of these unique free services to homebound, isolated seniors like Sylvia who need help to live independently and safely in their own homes. On behalf of seniors served by the Senior Visitors program and their families, thank you for your leadership and support to ensure these valuable services continue.

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Program Name:
 Senior Visitors Program

Program Service Data:			Service Period: July 1, 2012 to June 30, 2013									
Locality Served	Total Served			Gender		Race						
	FY 2013	FY 2015*	Male	Female	Caucasian	African American	Asian	Hispanic	American Indian	Other		
Fredericksburg	18	20										
Caroline	13	13										
King George	4	4										
Spotsylvania	57	58										
Stafford	25	27										
Other	3	3										
Total	120	125	19	101	98	17	0	1	0	4		

*Please include the projected number to be served in each locality for the upcoming fiscal year.

Locality Served	Age Groups							Income Levels					
	0-4	5-10	11-13	14-18	18-25	25-40	40-60	60 +	Under \$10,000	\$10,000 - \$19,000	\$20,000 - \$39,000	\$40,000 - \$59,000	Over \$60,000
Fredericksburg													
Caroline													
King George													
Spotsylvania													
Stafford													
Other													
Total							12	108					**

If any of the above information is not available, please indicate why:

The number of seniors served might change daily as new clients are enrolled and unfortunately due to the age of the population served, some pass away; however, an average of 120 clients are actively served at any given time.

** Eligibility as a Senior Visitors program beneficiary is not based on income. Those visibly meeting "near poverty" guidelines during the initial in-home assessment by the program director are referred to DSS, RAAA, Food Bank, and other human service organizations to determine financial status and program eligibility for services provided by those agencies.



Logic Model – With Results

Program/Project: Senior Visitors Program
Agency: Mental Health America of Fredericksburg

Phone: 540-371-2704

Contact Name:
Email:

Lynn DelaMer
 mhaflr@mhafred.org

Target population served by program: Homebound, isolated older adults 60 years of age or older, oftentimes with physical and mental health impairments, who are lonely and have lost connection with their community who reside in the City of Fredericksburg, and counties of Caroline, King George, Spotsylvania, and Stafford.

Specific need addressed by program: Loneliness and social isolation are known predictors of depression and risk of suicide among homebound older adults. In fact, 20% of all deaths by suicide are by persons aged 65 and older. Depression poses as significant a risk of mortality as heart disease and diabetes (American Journal of Geriatric Psychiatry, Sept 2005). Health and mobility impairments also increase the likelihood of depressive symptoms in the elderly. The program has become the "home" agency for many homebound, isolated and lonely older adults in our community, providing enhanced access to care and coordinated service delivery to a vulnerable population. Thus, seniors experience slower declines in functional status and enjoy a better quality of life; thus improving their mental health and wellness.

Inputs (\$'s, staff, volunteers, materials & other resources required)	Activities (what the program does with the inputs to achieve its outcomes)	Outputs (the direct products of program activities)	Projected Outcomes (Effects on knowledge, attitudes, skills, behavior, condition, or status during or after the program or project)		
			Short term Outcomes	Intermediate Outcomes	Long term Outcomes
Funding for salaries: .5FTE clinical director .15 program assistant .15 admin director Clients Volunteers Training materials Meeting space Office space Computer Telephone Program/data forms Educational literature Marketing literature Office supplies Referral relationships - clients and volunteers	Client referrals In-home assessment Match clients Monitor client status Care management Newsletter Cards remembrance Food for Life Senior Santa Community service projects for seniors Recruit volunteers Train volunteers Provide vol. support Monitor hours/status Volunteer visits Program socials Community education-program & elder issues	# clients referred # clients assessed # matched clients # care mgmt calls # newsletters # cards, correspond. # food boxes # gifts to seniors # seniors receiving community service # presentations-PR and educational # volunteers recruited # volunteers trained # volunteer hours # volunteer contacts	Clients are matched with program volunteers and increase their knowledge of program opportunities Clients, volunteers and/or program director will identify potential need for additional assistance from community resources	Clients participate in visitation & bond with volunteer Clients gain confidence in identifying appropriate opportunities for socialization Clients seeking or needing care management services will be informed and/or referred to appropriate community resources	Homebound seniors will be less isolated and better connected to community resources

Measurement Plan & Results Report Form
 Results Reported for the Period of: July 1, 2012 to June 30, 2013



Outcome (s) (From the logic model, the benefits or changes for individuals during or after participating in program)	Indicator (s) (The observable, measurable characteristic or change that shows achievement of the outcome.)	Relevant Client	Data Source	Method (The method for collecting information to determine level of achievement of outcome.)	Target (Level of achievement the program expects to reach.)	Outputs (Actual outputs for the time period)	Result (Actual level of achievement outcome.)
Homebound seniors will be less isolated and better connected to community resources	# / % of clients who enjoy regular visits with their matched volunteer	All actively matched seniors enrolled in program	Volunteer monthly visit sheet, phone call and/or email log, correspondence & observation	Client visits are logged on monthly volunteer visit sheet that are submitted to program director who reviews and enters data on a monthly basis.	75%	Of the 120 active clients served during FY2013: 40 new clients referred 34 new clients assessed 34 new matched clients 1114 care mgmt calls 748 newsletters 157 card/correspondence 6 food boxes 67 gifts to seniors 4 seniors receiving community service	100% of seniors enjoy regular visits with their volunteer friend, thus seniors feel less isolated
	# / % of clients informed and/or referred to community resources	All seniors enrolled in program identified with a care management need	Client assessment, volunteer monthly visit sheet, phone call and/or email log, correspondence & observation	Director completes initial client assessment, volunteers submit monthly visit sheets, director logs phone calls, emails, correspondence and observations	75%	43 presentations-PR and educational 2289 people at above 23 new volunteers recruited 22 new volunteers trained 3267 volunteer hours 2100 volunteer contacts	100% of seniors referred to community resources report satisfaction, thus they are better connected

