

2009

# LLMHS Elderly Services Outreach Program: Lincoln, Lyon & Murray Human Services

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## Recommended Citation

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## Sponsoring Agency

Lincoln, Lyon & Murray Human Services (LLMHS) is a tri-county social service agency in Southwest Minnesota. LLMHS provides services to individuals

of all ages, one of the populations is the elderly. Those over 65 are entitled to a long term care consultation in their home by a long term care social worker from the agency. The worker will assess their level of need and their financial situation to determine eligibility for programs to help pay for home and community based services. If eligible, elderly can continue with case management as well as receive their needed services. If ineligible, the worker will make recommendations, give resources and answer questions. The overall goal of the LLMHS worker is to help the elderly individual remain safe and aging in their home as long as possible.



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## Project Purpose

Right now there is a lack of professional and community knowledge regarding the services LLMHS provides to those over age 65. Thus, there are elderly who are in need of help who are not getting connected to a county long term care social worker. The elderly may need help to simply get connected to resources, have questions answered, correct misconceptions about long term care, get recommendations, or assistance paying for home and community based services. There are also many providers and professionals with questions about what LLMHS does and does not do as well as what the assistance programs can provide. Since professionals, elderly, families of elderly, and the general community lack knowledge of what LLMHS can offer and how they can get connected to the county, there is a social problem that exists in this area. Currently there is no program through the county which addresses that lack of cohesiveness between providers, elderly, and LLMHS. By creating an evidence-based educational outreach program, LLMHS will receive more referrals and will receive the referrals sooner.

## Project Description

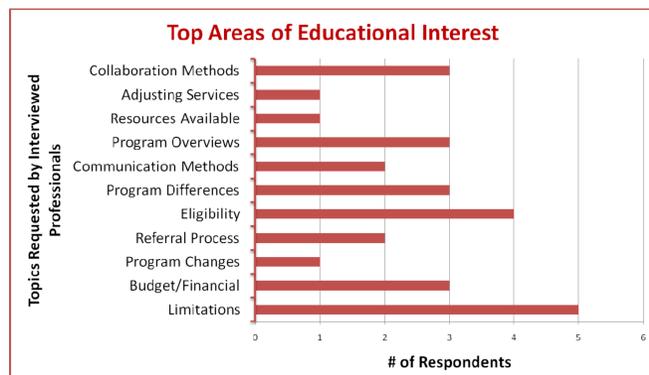
In order to correct this problem, a program was created to address the lack of connectivity and spread knowledge on the county programs and role of LLMHS. The program created was the LLMHS Elderly Services Outreach Program. The LLMHS Elderly Services Outreach Program is an educational outreach project that brings cohesiveness and fluidity to the process of reaching and helping those over age sixty-five. The program educates the public that are most frequently involved with the over 65 population. The program includes:

- what services are available through the county for seniors
- the referral process
- key signs to make a referral

It focuses on spreading information so that more seniors can get long term care consultations. The ultimate goal is to promote healthy, happy, and safe living in the home and community for our tri-county seniors. This capstone project was to develop this program based on research so it can be implemented.

## Methodology

1. Found social problems/areas of need within practicum agency which were of interest to me
2. Narrowed project ideas to one then got support of my advisor, MSW supervisor, and the agency
3. Developed capstone proposal and submitted to academic advisor, gave copy to supervisor and agency
4. Developed capstone timeline for project implementation into my practicum
5. Conducted literature review of best presentation methods, outreach methods, and elderly service programs
6. Completed IRB process due to need for professional input into project development
7. Developed a consent form for professionals partaking in the informal interviews and focus group
8. Filled out an IRB application and submitted IRB application with consent form to IRB board  
 ~IRB Approval # 3542, May 14, 2009 by MSU, M IRB Review Board
9. Got consent and conducted interviews/focus groups with medical, social work, and other professionals
10. Graphed the results of the interviews to show the areas of educational interest local professionals have
11. Created the power point, as suggested by the literature review, based on the interest areas as well as Department of Human Services literature on elderly services provided through LLMHS
12. Created a brochure, as suggested by literature, which outlines need for outreach as well as program and referral information
13. Created a sign up sheet for people to request more information following the presentations
14. Critiqued all materials with MSW supervisor and revised
15. Received approval from LLMHS supervisor on all materials
16. Created Capstone Presentation Poster
17. Started scheduling presentations



# LLMHS Elderly Services Outreach Program Lincoln, Lyon & Murray Human Services Jamie Lynn Olson

## Literature Review

In order to create and implement this program I needed to research what has been successful and unsuccessful in developing similar programs. By searching the Minnesota State University, Mankato library databases I was able to find numerous scholarly articles in journals such as the *Journal of Gerontological Social Work* and *Gerontology and Geriatrics Education*. Some of the articles I found are studies while other are just descriptive of their program. Connell, Holmes, Voelkl, and Bakalar (2002) point out that few of the elderly outreach programs, especially in the rural areas, have been systematically evaluated and even less have been published. This did make a literature review more difficult as I wanted to have a lot of resources to help me in planning this program. I also found multiple articles that are outdated and many are related to mental health services and the elderly. I also noticed many articles and programs such as the one described by Yang, Garis, and McClure (2005) are outreach programs that involve using the community but their primary focus is on outreach directly to the clients.

Common themes to the way the programs are set up, administered, and evaluated are:

- to rely heavily on expertise of community professionals when planning, implementing, and evaluating
- to have a focus/work group formed and conduct interviews or brainstorm when planning the program
- to have the professionals monitor the program and evaluate it themselves
- to have participants evaluate their learning using questionnaires
- to comparing data from before and after the program's implementation

It was helpful to do this literature review because it serves as a basis for the creation of this program. I too am using professional knowledge and using interdisciplinary brainstorming to come up with the most pertinent information to be taught. I hope that my educational outreach program is similar to those that I read about in this literature review, as their program results were positive.

## Comparable Programs

Program Goal:	Initial planning process:	Input from:	Program planning done through:	Evaluation methods:
Create aging prepared community (Bronstein, McCallion, & Kramer, 2006)	18 m planning period, create implementation goals, >600 planning participants	Service providers, elderly and their families, state/local gov. reps, foundations, health networks, insurers, caregivers, faith communities	Interviews with aging consumers and key decision-makers/opinion shapers, focus groups, community forums, database review, current service examination, barrier identification, expert meetings, implementation plan development	Project guided by stakeholder committee, documentation of development and outcomes, gather data through existing databases and measure consumer knowledge and satisfaction, daily process notes, minutes of meetings, focus groups, individual interviews
Show effectiveness of interprofessional collaboration in discharge planning (Atwal & Caldwell, 2002)	Formed study hypothesis, research design chosen to provide framework to understanding organizational change and best practices	Multidisciplinary team, action research group	Video recording and analyzing multidisciplinary team meetings, health care professional interviews, Delphi survey to form the interprofessional model	Pre and post implementation stakeholder interviews, pre and post implementation interprofessional audit including case note analysis, analysis of the variances from the integrated care pathway
Demonstrate effectiveness/feasibility of needs-based education on improving elderly assessment practices (Brymer, Cormack & Szozwka, 1998)	Review of existing literature done, work group formed, needs assessment created	A working group of representatives from an established geriatric program, representatives from health care agencies	Needs assessments by representatives to develop content/format of program, used previously developed needs assessment tool (self administered questionnaire) that was modified and piloted prior to study to show good test-retest reliability	Pre-test and post-test questions of training participants and a satisfaction questionnaire
Disseminate information on dementia to rural healthcare professionals (Connell, Holmes, Voelkl, & Bakalar, 2002)	Create DE-TTTP to do the project, decide on the trainer program model versus other educational models	Planning committee plus three outside professionals that came in to assist in curriculum development	Planning committee is multidisciplinary, plus outside specialists, key informant interviews to define educational needs	Workshop to go over pre-identified concerns by participants after initial training, focus group interviews, evaluation form completed post training by participants, quarterly conference calls between planning committee and trainers, trainers do evaluations upon program completion, outside health educator did interviews upon program completion
Improve end-of-life care for families (Townsend, Ishler, Vargo, Shapiro, Pitorak, & Matthews, 2007)	Development of the end of life support coalition, review of existing caregiver strain assessment tools, create new tool, literature review	Research team, home care and hospice social workers, caregivers themselves, PhD student	Data collection from caregivers prior to program implementation, professional input from research team and home care/hospice social workers	Data collection on participants, pre and post tests on caregiver strain, 8 pretest interviews with caregivers, caregivers critique the interview tool, monthly research team meetings, telephone conferences, focus groups

## Results

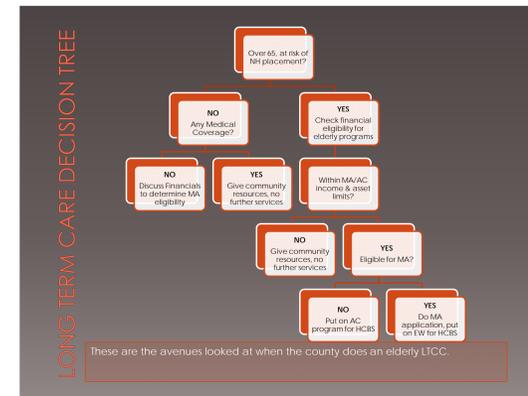
Based on the literature review and informal interviews the program was created consisting of educational sessions and brochures which include visual, oral, and written education techniques. Specifically:

- a verbal in-person presentation by a long term care social worker from LLMHS
- 17 succinct power point slides including intake phone number, referral process, and descriptions of the programs for elderly
- a question answer session at the end of each presentation
- a brochure explaining the purpose of the outreach program and what happens when a referral is made

The goal is to get the referral and program information to as many people in the counties as possible. The educational sessions will be conducted in a variety of settings, including:

- collaborative meetings held within the counties
- medical facilities
- home care offices
- assisted living facilities
- other elderly service providers

A majority of the educational sessions will be done initially, within the first 6 months to a year of the program implementation, then as needed. The worker will also be available by phone, email, or face to face contact to answer questions regarding referrals and services on behalf of the county.



## Next Steps

1. Develop evaluation methods
  - ~Monitor number of referrals prior to and following the presentations
  - ~Post-test survey by program participants self-rating knowledge gain
  - ~Continued focus group check-ins with coworkers/professionals to monitor program success
2. Present to coworkers and supervisor at unit meeting
3. Present to director and human services board members
4. Present to public/professionals
5. Review program evaluation results, make program modifications if needed
6. Write and publish program development process and evaluation results in a scholarly journal

## Acknowledgements

Thank you to the following:

- Robin Wingo, my academic advisor who helped me get IRB approval and followed my progress
- David Beimers, for helping with project dialogue groups and capstone poster development
- Jenifer Klein, for her supervision of my work while at LLMHS
- Julie Kautz, for her MSW supervision for my practicum and guidance through the steps of this project
- LLMHS for supporting my education including my internship and the creation of my capstone project
- MSU Mankato's IRB Board for their approval of my capstone research proposal
- The professionals who allowed me to do the interviews on which this project is built and for their dedication to our elderly population