

**Friends Foundation for the Aging**  
**Year-end Report & Reapplication Proposal Form**  
(limit 3 pages)

**Date:** 03/13/2024

**Organization:** Jewish Family and Children's Service of Greater Philadelphia

**TIN & Formal name:** 23-1352026, Jewish Family and Children's Service of Greater Philadelphia

**Contact name, phone, email:** Courtney Owen, 267-838-1462, cowen@jfcspshilly.org

**Amount requested:** \$30,000

**Project title:** JFCS' Hoarding Support Program Expansion

**Please answer the following questions clearly and concisely:**

**1. What is the problem you identified? Has it changed?**

The Jewish Family and Children's Service of Greater Philadelphia's (JFCS) Hoarding Support Program was developed in 2015 in response to a need identified by care managers serving older adults. The Mayo Clinic reports that hoarding tendencies tend to worsen with age and that the disorder is more common among older adults. Recent research further found that rates and severity of Hoarding Disorder increased as a direct result of the pandemic due to isolation related to mandated lockdowns and perceptions of scarcity that lead to panic-buying (Fontenelle et. al., 2021). Furthermore, hoarding disorders are on the rise due to an aging population and a national shortage of mental health care professionals in the wake of the pandemic. As the most developed hoarding treatment program with the highest intake capacity in the Philadelphia region, JFCS' specialized interventions are designed to address these challenges.

Hoarding Disorder is a complex mental disorder describing people who experience distress around discarding possessions and excessively acquiring new possessions. The accumulation of clutter impairs their day-to-day functions and threatens their quality of life. From JFCS' experience, we know clutter can prevent necessary service providers (exterminators, first responders, home cleaners, home repairs) from doing their jobs effectively. Clutter can lead neighbors or building managers to report these community members, which can lead to fines, evictions, or other court actions that could result in displacement or homelessness. Beyond the physical challenges associated with Hoarding Disorder, there are also social and emotional impacts.

JFCS' role in the space is evolving; we are currently one of the only providers treating hoarding disorders utilizing a community-based approach in the Philadelphia region. In the past few years, JFCS has been working alongside the Philadelphia Hoarding Task Force (PHTF) to create a Medicaid reimbursable supplemental service through the Behavioral Health Managed Care Organization in Philadelphia County, Community Behavioral Health (CBH). This past summer, we were successful in our proposal being accepted; JFCS is now officially enrolled as a provider. In 2024, JFCS is in conversation with the Bernard and Etta Weinberg Family Fund and requested 50% of the FY2025 Hoarding Expansion budget to support these efforts. Today, JFCS's hoarding treatment and therapy program is the most developed in the Philadelphia region and has the highest intake capacity, serving 65 clients annually.

**2. What actions did you take to address the problem?**

Each year, JFCS' Hoarding Disorder program supports approximately 65 clients to help them reduce the negative impacts of hoarding behaviors and create stability in their home environments. JFCS care managers develop individual care plans, monitor client progress towards long-term goals and safety, and reduce recidivism of hoarding behaviors with added support provided by a certified peer with lived experience. Most services are provided in the individual's home, and visits will be scaled back when determined that the

home is safe and behaviors are under control. Hoarding Disorder clients will also have access to support groups using the evidence-based Buried In Treasure (BIT) curriculum, and positive psychology groups.

JFCS' Hoarding Support Program focuses on a 4-tiered approach to help individuals first obtain safety in their home, reduce acquiring, increase discarding, and then learn organizational tools and skills to prevent clutter from returning. The 4 tiers are outlined as such:

- Ensure clients' safety in accordance with Philadelphia fire safety and building codes
- Support clients in reverting rooms in their homes to their intended function
- Establish organizational systems with clients
- Provide clients with after-care and continued care coordination to prevent relapse

**3. What did you learn? Will you make any changes in the coming year?**

JFCS has always had more referrals for our program than our staff capacity, and becoming a member of CBH has increased those referrals and will therefore allow us to hire new staff in the near future. The need for increased Hoarding Disorder services is not limited to Philadelphia County. JFCS is also in conversation with Magellan Behavioral Health of Pennsylvania, a behavior health provider in the region, to potentially expand services to Bucks and Montgomery Counties in 2025.

We are not deterred by the increase in need; we welcome new clients and have identified the need to respond with more immediacy to begin building rapport and trust. Often, when a first responder, mobile crisis team, or other enforcement agency encounters someone who is hoarding, it can be a scary experience for the individual. The individual may not have received interventions or appropriate support in the past, leading to a lack of trust, shame, and fear of consequences.

In FY2025, JFCS proposes adding a community outreach worker to our team who could respond sooner and begin engaging individuals in services, working directly with the enforcement and mental health service providers as a warm handoff. Our goal is to increase trust, engagement, and rapport so those struggling with Hoarding Disorder are willing to participate in services that are appropriate and from a mental health lens. Providing timely care to clients with Hoarding Disorder is paramount to success, and this addition to our team will allow us to reach these clients with immediacy.

**4. How have you engaged any partners/collaborators in implementation or funding? Have you considered how to sustain the program?**

As previously mentioned, JFCS is an enrolled provider for CBH, and as the only provider for the supplemental Hoarding Support Program in Philadelphia, our services are Medicaid reimbursable as of this fiscal year. We are also engaging Magellan in order to establish the same reimbursement for program clients from Montgomery, Bucks, and Philadelphia counties.

We have partnered with those on the Philadelphia Hoarding Task Force (PHTF), including the Philadelphia Department of Behavioral Health; Area Agencies on Aging in all three counties listed above; local legal services; and, through our HUB partner, State Representative Solomon's office. We are currently working on a partnership with the Department of Licenses and Inspections and are part of the regional task force and Bucks County Task Force.

JFCS also provides regional leadership on hoarding issues through regular training and community education programs. As a founding member of PHTF, a coalition of over 25 Philadelphia area agencies committed to improving outcomes on hoarding issues, we train more than 400 community-based providers annually.

We plan to grow the program, with the long-term goal of making this program model replicable, and additional support will allow us to expand our reach.

**5. How do you know your actions had an impact? Please describe those who participated, outputs and outcomes. Stories or photos are welcome.**

JFCS understands the importance of data collection and analysis. We regularly evaluate client progress using internal and external measurement tools and client satisfaction surveys. We set clear program and individual goals and outcome targets and use Credible, a cloud-based behavioral health software, to collect, track, analyze, and report client and program data, activities, and impact. Specifically, JFCS uses the following assessment tools for our individual and group therapy services:

- Clutter Image Rating Scale (CIR), a tool used to gauge level of clutter; a score of four or higher would indicate Hoarding Disorder
- Activities of Daily Living – Hoarding (ADL-H), a tool to assess how daily functioning is impacted by clutter; a score of 1.5 or higher would indicate the need for increased support.
- Home Environment Index (HEI), a tool to assess for squalor in the home. This tool alone would not indicate hoarding but does assess for sanitary concerns in a hoarded home.
- Participants in the BIT curriculum support groups will complete pre- and post-program assessment tools to solicit feedback and evaluate progress on the Hoarding Rating Scale.
- Professionals and community members participating in group education/training will also receive post-training evaluations, including questions regarding whether they will use the information provided in their professional lives.

Over the course of the program, JFCS has achieved the following:

- 75.7% of clients showed improvement on the CIR
- 63.8% showed improvement on the ADL-H
- 68.6 showed improvement on the HEI
- 73.3% showed improvement on the BIT Hoarding Rating Scale

Approximately 2-6% of the population is struggling with hoarding disorder based on recent, albeit limited, research. Further demographics of those currently served through JFCS' program are: 5% are under age 50, 23% ages 50 to 64, 52% ages 65 to 79, 20% aged 80+, and 90% living at or below the Federal Poverty Level.

**6. Is there anything else you would like FFA to know about this project?**

Each year, we will serve 55 individuals in our home-based care management services, and the Outreach Coordinator will connect with 35 clients referred from partners and 50 individuals through support groups, including BIT and Positive Psychology groups. Individuals served will be tracked through our electronic health record system.

70% of Individual Support Clients will demonstrate improvement in their home living conditions, as measured by the CIR Scale – assessed at intake, quarterly, and discharge.

70% of Individual Support Clients will demonstrate improvement in their ability to manage daily tasks, as measured by the ADL-H Scale --individual support clients will demonstrate improvement in their ability to manage daily tasks, as measured by the ADL-H Scale, which is assessed at intake, quarterly, and discharge.

70% of BIT group clients will maintain or improve their scores on various hoarding rating scales provided before and after participation in the 16-week group.

**7. Feedback on your interaction with FFA would be helpful. Are there ways we can help beyond the grant?**

JFCS is looking to leverage existing relationships with funding partners to cultivate new relationships with local funders for the Hoarding Support Program. We welcome introductions to funders as well as a letter of support and/or introduction from Friends Foundation for the Aging to members of the Philanthropy Network Greater Philadelphia regarding JFCS' growing programming and services.

**Include a simple program budget/actual with income and expenses (eg. staff, program supplies, travel, etc) for both last year and next.** Please see attached.

**Has your 501c3 status changed?** No.

**JFCS Hoarding Support Program**  
**Proposed Program Expansion Budget**  
**4/1/2024 - 3/31/2025**

<b>Revenue</b>	<b>Program Budget</b>	<b>FFA Grant Use</b>
Education & Group fees	3,500.00	
Insurance	115,000.00	
Friends Foundation for the Aging	30,000.00	\$30,000
Contributions	70,685.00	
<b>Total</b>	<b>219,185.00</b>	<b>\$30,000</b>
Program Director (5%)	\$ 5,785	\$ -
Hoarding Coordinator (50%)	\$ 27,694	\$ 2,005
Social Worker (100%)	\$ 54,700	\$ -
Outreach Worker (100%)	\$ 54,700	\$ 17,072
Benefits (30%)	\$ 42,864	\$ 5,723
Occupancy	\$ 2,728	\$ 1,000
Insurance	\$ 6,492	\$ 1,000
Communication	\$ 545	
Training	\$ 309	
Mileage	\$ 1,442	
Client Expenses	\$ 2,000	\$ 500
Overhead	\$ 19,926	\$ 2,700
<b>Total</b>	<b>\$ 219,185</b>	<b>\$ 30,000</b>
Net	0.1	-0.1

**JFCS Hoarding Support Program**  
**Proposed Program Expansion Budget**  
**FY2023 Actuals**

<b>Revenue</b>	<b>Program Budget</b>	<b>Actuals</b>
Education & Group fees		\$ 11,290.00
Insurance		\$ 1,050.00
Friends Foundation for the Aging		\$ -
Contributions		\$ 129,381.00
<b>Total</b>	<b>-</b>	<b>\$ 141,721.00</b>
Staff Salaries		\$ 79,806.00
Benefits (30%)		\$ 23,942.00
Occupancy		\$ 2,021.00
Insurance		\$ 5,021.00
Communication		\$ 117.00
Printing/Marketing		\$ -
Training		\$ 180.00
Consultants		\$ 16,615.00
Transportation		\$ 1,199.00
Mileage		\$ -
Client Expenses		\$ 2,442.00
Overhead		\$ 13,134.00
<b>Total</b>	<b>-</b>	<b>\$ 144,477.08</b>

Net	-	\$ (2,756.08)
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