



**Jewish Family and Children's Service of Greater Philadelphia (JFCS)
2021 Grant Request to the Friends Foundation for the Aging (FFA)**

Executive Summary (95/100 words)

JFCS requests a \$30,000 grant from FFA for our Hoarding Support Program in the coming year, April 2021-March 2022.

With your support, our impactful individual support services, suite of support groups, and community trainings will help the Philadelphia region's older adults struggling with Hoarding Disorder to reduce the negative impacts and safety risks of hoarding behaviors. We will help clients access a community of support, and ultimately improve their physical, social, emotional quality of life. Grant funds will help us sustain virtual services, and safely launch in-home and in-person supports when safe to do so.

Organization History and Competence (97/100 words)

Established in 1855, JFCS grew out of a merger between two Philadelphia-area agencies which had provided basic needs and cared for indigent and destitute Jewish children, respectively. Today, JFCS is a trusted, comprehensive safety net provider that annually serves 29,050 individuals of all racial and ethnic backgrounds across the five-county Philadelphia region.

In response to community needs identified by JFCS care managers serving older adults ages 65+, JFCS launched the Hoarding Support Program in February 2015. This continues to be the most developed hoarding treatment and therapy program, with the highest intake capacity, in the Philadelphia region.

Project Details (5/5 Pages)

1. Problem Addressed: Evidence of Need, Demographics, and Population Served.

JFCS' Hoarding Support Program provides support services and community awareness around Hoarding Disorder, which is formally defined in the *Diagnostic and Statistical Manual of Mental Disorders* as "persistent difficulty discarding or parting with possessions, regardless of their actual value." While the disorder can impact individuals as early as their teenage years, the Mayo Clinic reports that hoarding tendencies tend to worsen with age, and that the disorder is more common among older adults. JFCS' program is open to anyone struggling with Hoarding Disorder in the five-county Philadelphia region; with a focus on older adults. Of current clients for whom demographic information is available, 85% are ages 65+, 77% live alone, 95% are low-income (at or below 250% of the federal poverty line), and 14% are disabled. We do not currently require support group participants to identify their racial/ethnic identity and, as such, do not have an accurate estimate for this breakdown. We are working on better strategies to collect this information moving forward.

Individuals experiencing Hoarding Disorder are at a heightened risk for a variety of physical health and safety risks that negatively impact their quality of life. Limited and unsanitary living spaces present heightened risks for falls, fire, mold, dust, infestation, and unseen structural damage. They can restrict individuals' ability to complete daily activities such as cooking and cleaning, and can even lead to fines or evictions that result in displacement or homelessness. Because many older adults already experience declining mobility and physical health due to aging, hoarding can make their ability to live safely and independently nearly impossible. In addition, other mental health issues are associated with the disorder: nearly half of those suffering from Hoarding Disorder also suffer from depression, and over 30% have an anxiety disorder, according to Carol Mathews, author of "*Recognizing and Treating Hoarding Disorder: How Much is Too Much?*".

Finally, as previously shared with FFA, Hoarding Disorder has a direct impact on the entire community. Frustrated friends and family members may be unable or unwilling to visit or assist their loved ones, resulting in lost social connections and worsened feelings of isolation. The disorder also puts neighbors at risk and strains community resources, such as first responders. Alarming, a 2009 study in Australia found that hoarding-related fires occurring between 1999 and 2009 were responsible for 24% of all preventable residential fires, and posed both increased risks and costs to first responders and the overall community (Lucini, Monk, & Szlatenyi, 2009).

2. Actions Involved.

Individual Support Services: In the grant period, JFCS will offer one-on-one support services to 45 clients ages 65 and older, to help them reduce the negative impacts of hoarding behaviors and create stability in their home environments. As in prior years, JFCS' therapeutic model will follow four tiers of safety interventions and support services, delivered by JFCS care managers for 1-2 hours each week. Care managers will develop individual care plans and monitor client progress towards long-term individual goals, safety goals, and reduced recidivism of hoarding behaviors. This year, we will continue to operate services virtually and by phone, until it is safe to resume in-home, in-person care. Virtual support is largely therapeutic, focusing on establishing trust and addressing each client's reasons for hoarding and the feelings, fears, emotions, and behaviors associated with this disorder. To promote clients' buy-in and empowerment around their care plans, JFCS plans to continue to allow clients to choose to continue some sessions by phone or virtually even when in-person care resumes.

Once care managers are able to safely return to client homes, JFCS expects to conduct thorough in-person assessments for all clients – including new clients, clients who joined our program since spring 2020 whose homes we have never entered, and long-term clients – to make sure we fully understand the current needs and living situations of each individual. We expect to see more severe physical hazards or needs among some existing clients than what had been shared through client self-reporting and virtual communications. For example, COVID-19 has meant that many clients have gone without visitors for months or a year's time, including home health aides. Without the ongoing maintenance/cleaning that

outside professionals or home health aides provide, we expect there to be an increased accumulation of items and some associated safety-related concerns, such as unseen or hidden structural damage, for some clients. As such, JFCS' combination of cleaning, organizational skill-building, and continued care coordination will be critical. We will assess what other services clients need, and connect them with JFCS and external resources to help maintain or improve their physical health, mental health, and quality of life. These include extermination services, JFCS' in-home mental health counseling, resumed or start of home health aide support, and low-cost home repair services as part of JFCS' newly-acquired NORC at JFCS volunteer-based program. NORC at JFCS also retrofits homes, installing basic safety and adaptive equipment such as grab bars, railings, walkway lights, smoke/carbon monoxide alarms, and more.

Support Groups: JFCS will continue our suite of support groups available to individuals with Hoarding Disorder and their families. These are cost-efficient service models for JFCS that, as reflected in the outcome results provided in our grant report, make a real impact on client skill-building and quality of life. This year, we will continue virtual support groups, and resume some in-person session options when possible. We will encourage group participation among clients receiving individual support services, as we have historically seen noticeable improvements among those who participate in these services concurrently. We will also encourage group engagement for new clients, as we have also found support group participation as a valuable precursor to individual supports – as these groups help clients learn “the basics” of terminology and support techniques relating to the disorder prior to working one-on-one with a care manager. In addition, we will encourage clients to deepen their engagement in these groups, such as by repeating topics that they can continue to learn and benefit from, and/or participate in multiple groups over their program experience.

- Buried in Treasures (BIT): Sixteen-week sessions following this evidence-based curriculum will help clients deepen their understanding of clutter and their personal journey, find a supportive community of like-minded individuals, and learn tools to address behaviors that impact their daily functions. Sessions will be co-led by a JFCS staff member/intern and a trained peer facilitator, thereby helping clients see role models in their own community. JFCS is currently able to offer two concurrent sessions due to high demand. We expect to offer both in-person and virtual sessions once in-person programming returns.
- The Art of Letting Go: JFCS' licensed Art Therapist, Debora King, will once again offer the eight-week virtual art therapy sessions that connect creative-minded participants with therapeutic tools such as art journaling as ways to learn new coping skills, as well as respond, express, and process what it means to let go – both physically and emotionally.
- Mindfulness: Beginning in April, JFCS' eight-week sessions will focus on integrating mindfulness and meditation practices into everyday life, which can help clients refocus attention away from anxiety relating to clutter and other stressors around the home.
- Supporting Your Loved Ones with Hoarding Disorder: Using curriculum from The Hoarding Project, this family support group will help participants better understand Hoarding Disorder, and learn how to better support their loved ones experiencing the disorder as well as themselves. Participants will build tools for communications and self-care, learn about how Hoarding Disorder relates to trauma and loss, discover treatment options and resources, share their struggles, and learn from others in similar situations. We expect to keep this a virtual-only offering, to reduce transportation and time barriers, as we know many family members participate on lunch breaks or while balancing otherwise full schedules. This also opens our service to family members who may be outside of the Philadelphia region but are looking for localized support and information for their loved ones who live here.

3. Partner Organizations.

A broad overview of ways in which this program collaborates with partner agencies, with sample agencies in each category, is below:

- **Program Referrals:** Partners refer older adult clients who they expect to be experiencing Hoarding Disorder to JFCS’ program. These partners include: Abramson Senior Care, ElderNet, PATH, Legal Clinic for the Disabled, Department of Behavioral Health, Philadelphia Corporation for the Aging, Penn Center House, 2100 Cooperative, and Habitat for Humanity. We are also developing relationships with Inglis House, Senior Law Center, and CARIE (Center for Advocacy for the Rights & Interests of the Elderly).
- **Outside Service Referrals:** For clients experiencing additional needs or challenges, JFCS’ care managers refer clients to outside services. Oftentimes, these may be other JFCS internal services, such as mental health counseling or minor home repairs and modifications. Other times, services may fall outside of JFCS’ purview, such as more intensive home clean-outs, extermination services, legal services, and more. Examples of these partners include: Community Legal Services, Senior Law Center, CARIE, and the Philadelphia Housing Development Corporation (PHDC)’s Basic System Repair Program. Legal service partners are especially important, as hoarding-related evictions can pose a real, imminent threat to the stability of those with Hoarding Disorder. JFCS care managers help advocate on our clients’ behalf on housing-related issues with their landlords and property managers; however, some situations require more advanced legal expertise. Notably, COVID-19-related eviction moratoriums only prevent evictions due to rental non-payments, meaning individuals can still be evicted for hoarding.
- **Educational Trainings:** In conjunction with and independent of the Philadelphia Hoarding Task Force, JFCS will deliver educational trainings to community members and professionals who engage with older adult clients, to teach them about Hoarding Disorder as well as how to identify, support, and link individuals with hoarding tendencies to needed assistance. We are excited to resume community trainings to previous and new individual partner agencies or groups of agencies, as such requests were largely absent in the past year due to COVID-19. We expect our trainings to engage landlords, property managers, social workers, first responders, and health service providers, including those from previous partners including AmeriHealth Caritas MCO, CHOP Community Asthma Prevention Program, Department of Licenses & Inspections, Penn Medicine, and others.

4. Expected Outputs and 5. Expected Outcomes.

Service	Outputs	Outcomes
Individual Support Services	45 total clients (15-18 new clients).	- 85% of clients at risk of eviction due to hoarding behaviors will maintain housing and avoid eviction. - 85% will improve or maintain the state of clutter in their homes. - 85% will improve or maintain the level of squalor in their homes. - 85% will improve or maintain their Activities of Daily Living (ADLs) due to hoarding within the first year.
Buried in Treasures Support Group	20 total clients, three or four 16-week sessions.	- 85% of clients will improve or maintain their ADLs due to hoarding. - 85% will improve or maintain scores on the Hoarding Rating Scale. - 85% will improve or maintain scores on the Savings Cognition Inventory. - 50% will improve or maintain scores in the Adult State Hope Scale.
Mindfulness Support Group	10 total clients, four or five eight-week sessions.	- 80% of clients will learn about mindfulness and meditation techniques to reduce stress/anxiety relating to hoarding tendencies. - 80% will report satisfaction with the group.

Family Support Group	8-12 total participants, three eight-week sessions.	- 85% of participants will learn about topics such as effective communications, where to access support, and self-care. - 80% will report satisfaction with the group.
Art Therapy Support Group	15 total clients, three or four eight-week sessions.	- 80% of clients will experience reduced feelings of emotional distress, measured by improved scores on PROMIS pre- and post-assessments. - 80% will report satisfaction with the group.
Educational Trainings	350 individuals trained in 8-10 trainings.	- 85% of participants will report satisfaction with the training. - 85% will report learning something about Hoarding Disorder.

6. Measuring Outputs and Outcomes.

JFCS tracks all client and program data – including program attendance, output numbers, evaluation survey results, and client progress towards outcomes – in Credible, our agency-wide electronic health record system. Individual support service outcomes are measured via the following evidence-based, nationally-recognized assessment tools:

- Clutter Image Rating: Measures the amount of hoarding based on comparative pictures of each room (quarterly assessments).
- ADL-H Assessments: Determines the degree to which a client’s daily living activities such as cooking, bathing, and dressing are impacted by their hoarding environment (quarterly assessments).
- Home Environment Index: Assesses squalor in the home; used to assess sanitary concerns in a hoarding home (quarterly assessments).
- HOMES Multi-Disciplinary Hoarding Risk Assessment Tool: Determines level and/or type of services needed upon initial assessment (during initial assessment and discharge).
- Hoarding Initial Assessment Tool: Developed internally by JFCS, this bio-psycho-social tool helps to understand symptomology and client attachment to hoarded items (initial assessment, to help develop client treatment plans).

JFCS measures support group progress via attendance records and anonymous participant self-reporting surveys. As mentioned in our 2020 grant report, JFCS uses evidence-assessment tools provided in the Buried in Treasures curriculum to evaluate participant progress. For other support groups, we also now have survey forms that feature a five-point Likert scale to measure respondents’ levels of agreement to statements about skills, comfort level, and knowledge gained around topics relevant to each group. JFCS administers post-event surveys to all participants of our community trainings.

7. Project Sustainability.

JFCS will continue our work to diversify program funding sources. As in prior years, support groups will be offered on a sliding-scale fee. While low-income participants will still be able to access services at no cost, others will pay dramatically reduced rates ranging from \$2-\$10 per session. And, as long as JFCS operates the Philadelphia Task Force’s virtual conferences and other virtual learning opportunities, we will bring in all ticket and sponsorship-related revenue of these events. We are pleased to report that conversations with the Philadelphia Community Behavioral Health agency are moving forward, regarding JFCS’ waiver requesting to add hoarding support services to the Long-Term Support Services Benefit Package, and the associated staff criteria/qualifications needed to bill Medicaid for home-based support services delivered to qualifying clients. All JFCS program staff would meet these proposed qualifications. Most recently, we discussed the status of this proposal during a meeting on March 12, 2021.

Across JFCS’ entire Individual and Family Services Department (in which this program is housed), we are identifying and pursuing opportunities to grow fee-for-service revenue opportunities. For example, JFCS’ licensed Art Therapist and Mobile Therapist have recently submitted paperwork to be able to bill individual and group therapy services to Medicare. Once approved, we will be able to

immediately begin billing Medicare for the Art of Letting Go and mindfulness support groups as part of this program. And, while not limited to this program, JFCS recently signed a contract with a medical billing clearinghouse, to facilitate and streamline the insurance billing process. In the long-term, we hope this will serve as an expanded revenue source to sustain activities across the department.

8. Sharing and Replicating Results.

JFCS remains committed to sharing learnings and results from our program to inform other agencies and communities. Traditionally, the primary ways we have been able to do so are by way of JFCS' agency-wide communications channels (newsletters, etc.); through the Philadelphia Hoarding Task Force; and through community trainings and presentations. In prior years, we presented our work at regional and national conferences such as the Network of Jewish Human Services Agencies (NJHSA) national conference. We will look for opportunities to participate in virtual and in-person conferences as available.

Inspired by the overwhelming community interest in and success of our "From Challenge to Hope" web series hosted with the Philadelphia Hoarding Task Force, we expect to continue virtual trainings and learning opportunities beyond the COVID-19 pandemic. These events are more accessible to participants across and outside the Philadelphia region; and they are cost-effective for JFCS to operate, as they do not require in-person event expenses such as space rentals or refreshments. In addition to connecting participants with outside experts/professionals and Continuing Education Units, we will explore opportunities to incorporate more information about JFCS' own best practices, program results, and lessons learned into these opportunities. We believe our unique suite of support group topics, our introduction of a peer co-facilitator in Buried in Treasures support groups, and/or our virtual support service experience over the past year may be particularly interesting and timely topics to share with peer agencies interested in deepening their services for similar client populations.

9. Alignment with FFA Values.

Past applications to FFA have demonstrated how this program aligns with many of FFA's values including the engagement of direct care workers, employees, and participants; continuing engagement of FFA; and intergenerational learning. In the past year, JFCS has become particularly attuned to diversity, equity, and inclusion (DEI), as it relates to organizational leadership, the clients we serve, and the services we provide. Updates on JFCS' agency-wide DEI trainings were provided in our 2020 grant report.

Historically, the availability of some JFCS services has been limited to Jewish populations, due to restrictions and/or requirements set forth by program funders. For example, we have traditionally been able to refer clients in our Hoarding Support Program who are Jewish to JFCS' separate mental health counseling and emergency financial assistance services; however, these programs did not always have the capacity or funding availability to support referrals of non-Jewish clients. In line with a renewed commitment to more explicitly reach people of different racial and religious backgrounds, the agency has made a strategic focus to expand the availability of these and other services. We have successfully identified and secured additional philanthropic dollars from funders without population service restrictions, and we have also dedicated our own financial resources to add staff capacity focused on reaching more diverse populations. For example, we hired a new full-time staff position dedicated to providing one-on-one counseling and care management to low-income, non-Jewish adult and older adult clients. In the coming year, we are excited to build upon this work. In turn, we expect this will help enhance JFCS' holistic continuum of care to become available to more Hoarding Support Program clients, as they can access additional services to more holistically address needs beyond those pertaining to a Hoarding Disorder diagnosis.

10. Project Budget, Narrative, Timeline, and Funding Sources.

JFCS requests a \$30,000 program grant for the grant period of April 1, 2021–March 31, 2022. All activities detailed in this proposal will take place during this grant period. The attached program budget details total program costs, the proposed FFA grant funding use, and other anticipated funding sources.

JFCS Hoarding Support Program
Proposed Program Budget
4/1/2021-3/31/2022

Revenue	Program Budget		Proposed FFA Grant Use
Education & Group Fees	\$4,500		
Community HealthChoices	\$3,500		
Friends Foundation for the Aging	\$30,000		\$30,000
Contributions	\$32,000		
Total	\$70,000		\$30,000
Program Director 5%	\$4,774		\$2,005
Social Worker 30%	\$14,875		\$8,287
Social Worker 30%	\$17,570		\$8,785
Benefits 30%	\$11,166		\$5,723
Occupancy	\$1,558		
Insurance	\$1,780		
Communication	\$185		
Printing/Marketing	\$1,000		
Training	\$150		
Consultants	\$3,500		\$500
Transportation	\$3,400		\$1,000
Mileage	\$1,700		\$1,000
Client Expenses	\$2,000		
Overhead 10%	\$6,342		\$2,700
Total	\$70,000		\$30,000
Net	-	-	(0)