Care for Aging Residents of Public Housing: Strategies for Rural and Urban Settings - Small Group Training

Session 1: Building Safe and Supportive Living Environments

NATIONAL NURSE-LED CARE CONSORTIUM
a PHMC affiliate

January 20th, 2026 | 3 pm EST

Zoom Orientation

1 Captions

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2 Questions

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3 Technical Issues

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4 Recording

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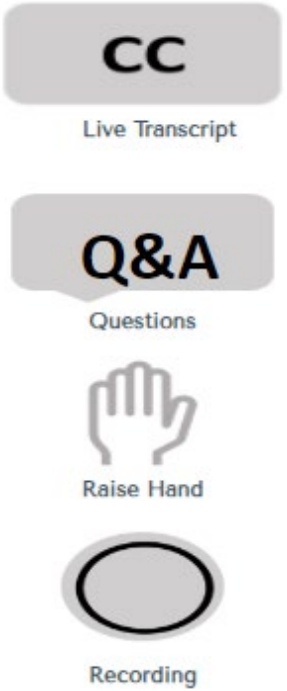

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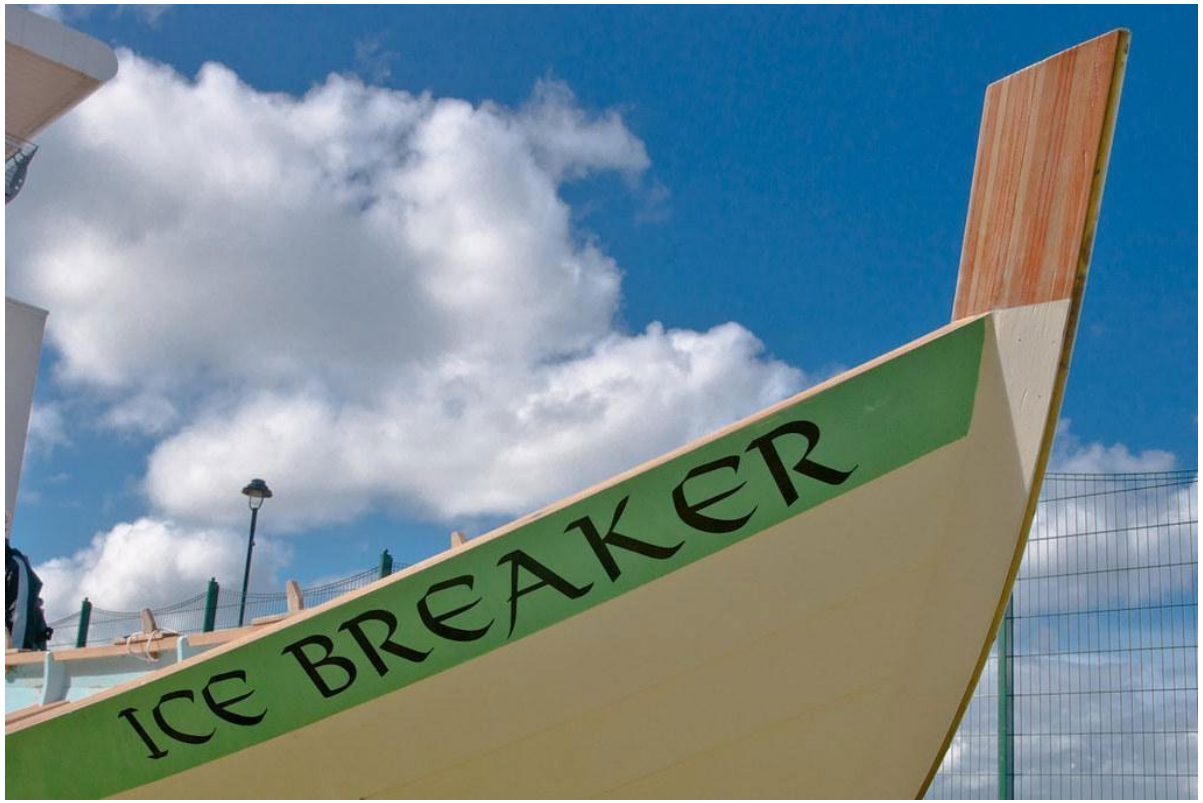

NATIONAL NURSE-LED CARE CONSORTIUM
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The National Nurse-Led Care Consortium (NNCC) is a nonprofit public health organization working to strengthen community health through quality, compassionate, and collaborative nurse-led care through:

-training and technical assistance
-public health programing
-consultation
-direct care

To learn more about NNCC, please visit our website at www.nurseledcare.org.

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Accreditation Statement

Accreditation Statement: The National Nurse-Led Care Consortium is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation.

Successful Completion Requirements: Nurses completing the entire activity and the evaluation tool may be awarded a maximum of **1.0 contact hour** of nursing continuing professional development (NCPD). To obtain nursing continuing professional development contact hours, you must participate in the entire activity and complete the evaluation following the session.

Relevant Financial Relationships: It is the policy of the National Nurse-Led Care Consortium to require nursing continuing professional development program faculty and planning committee members to disclose any financial relationship with companies providing funding or manufacturers of any commercial products discussed in the educational activity. The program faculty and the planning committee members report they do not have financial relationships with any manufacturer of any commercial products discussed in the activity.

NNCC National Training and Technical Assistance Partnership (NTTAP)

Jillian Bird, MS, RN
Director of Training and Technical Assistance

Matt Beierschmitt, MPP
Assistant Director of Training and Technical Assistance

Fatima Smith, MPH, CHES
Project Manager

Regina Brecker, MPH, CHES
Project Coordinator

Lucy Lunay
Program Intern

Anna Fry, MPH, BSN, RN
Clinical Nurse Educator

Today’s Agenda

5 min - Welcome

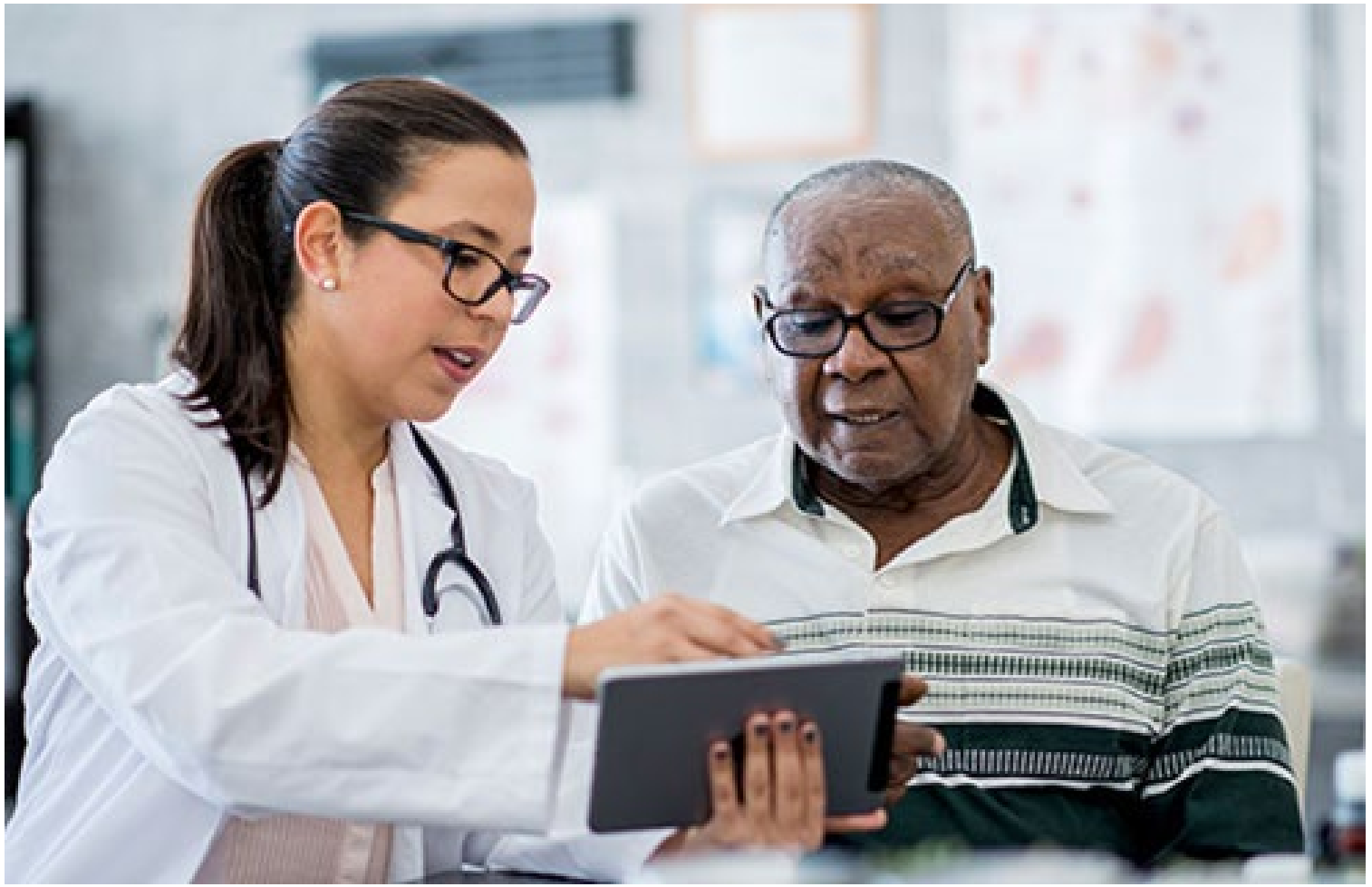
20 min - Partnering with Housing Authorities

- NNCC presenting on reduction of environmental hazards, collaborations between health centers and housing agencies, and policies protecting older adults

25 min- Jane Carmody

- Age Friendly Health Systems Initiatives program overview, important partnerships, and overcoming barriers

10 min - Questions & Wrap-Up



Partnering with Housing Authorities

Home modifications, hazard reduction, safety initiatives

- Home modifications help mitigate the danger and difficulty in the home caused by aging and disabilities
  - Lowered sinks, cabinets, and countertops.
  - Stairway elevators and wheelchair ramps.
  - Widened doorways and railings.
- City of Philadelphia offers a Senior Housing Assistance Repair Program (SHARP) that makes minor repairs and modifications in homes owned by those age 60 or older.

Reducing Environmental Hazards

- Housing Authorities typically have lead testing and removal programs.
- Other programs include mold removal and pest control.
  - These hazards are riskier for aging populations who are likely to have developed respiratory and other health conditions.

Partnering with Housing Authorities

Protective Policy

- Housing Authority-operated senior centers provide resources and connection for aging populations
- Connecting residents with resources to access Section 8 or Section 202 supportive housing for the elderly.
- Housing Authority can help monitor and ensure fair housing policy is being implemented and followed in public housing.

Strategies to Strengthen Collaboration

- Health centers can partner with Housing Authority to enroll public housing residents into health insurance when they came in for rent payments, at laundromats, and community events.
  - This can be tailored to aging populations at senior centers, senior living facilities, and other events
- Health centers can evaluate health and individual needs of residents in need of relocation, helping Housing Authority understand their needs.
- Health centers can provide senior health education through housing authority sites.

The John A. Hartford Foundation

National Nurse-Led Care Consortium

Care for Aging Residents of Public Housing: Strategies for Rural and Urban Settings

January 20, 2026

Jane Carmody, DNP, MBA, RN, FAAN

Senior Program Officer

The John A. Hartford Foundation

The John A. Hartford Foundation

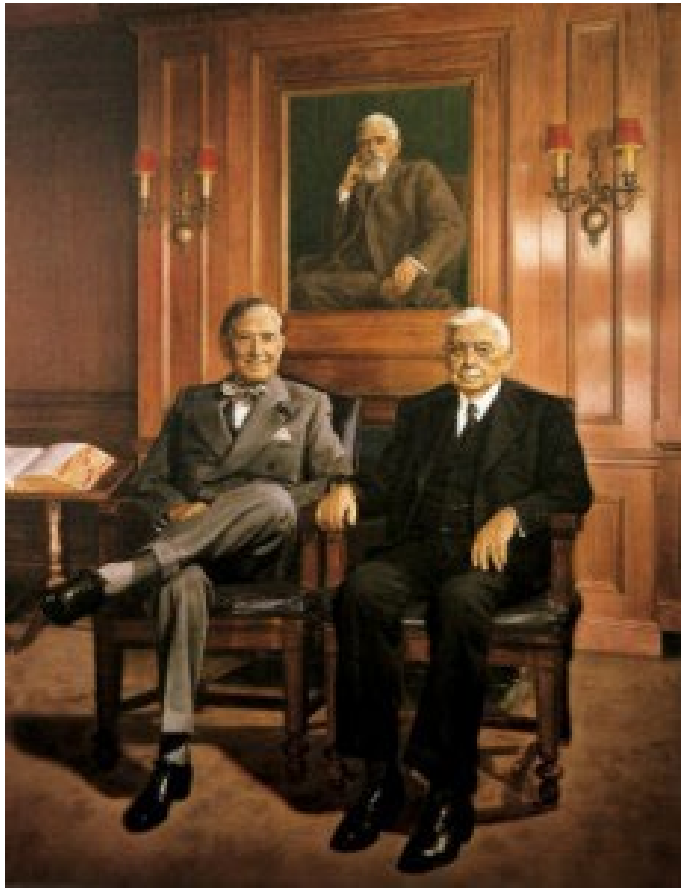
A private philanthropy based in New York City, established by family owners of the A&P grocery chain in 1929

Founders

The John A. Hartford Foundation

"It is necessary to carve from the whole vast spectrum of human needs one small band that the heart and mind together tell you is the area in which you can make your best contribution."

– John A. Hartford

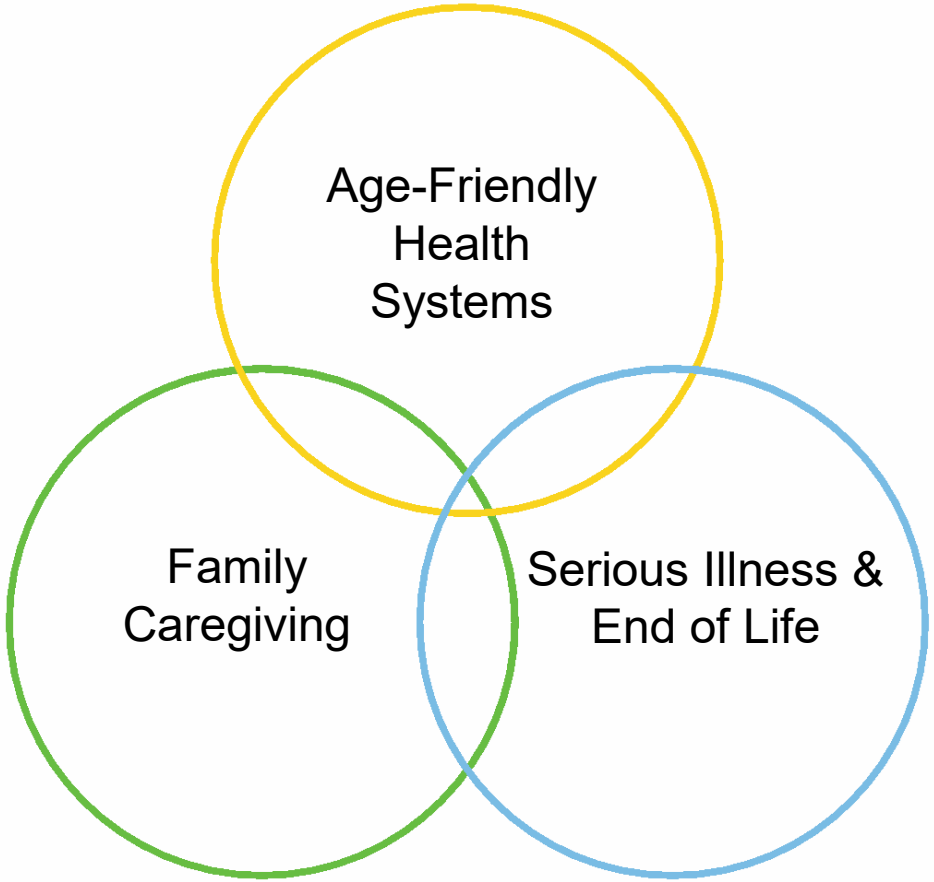


John A. and George L. Hartford

Mission & Priorities

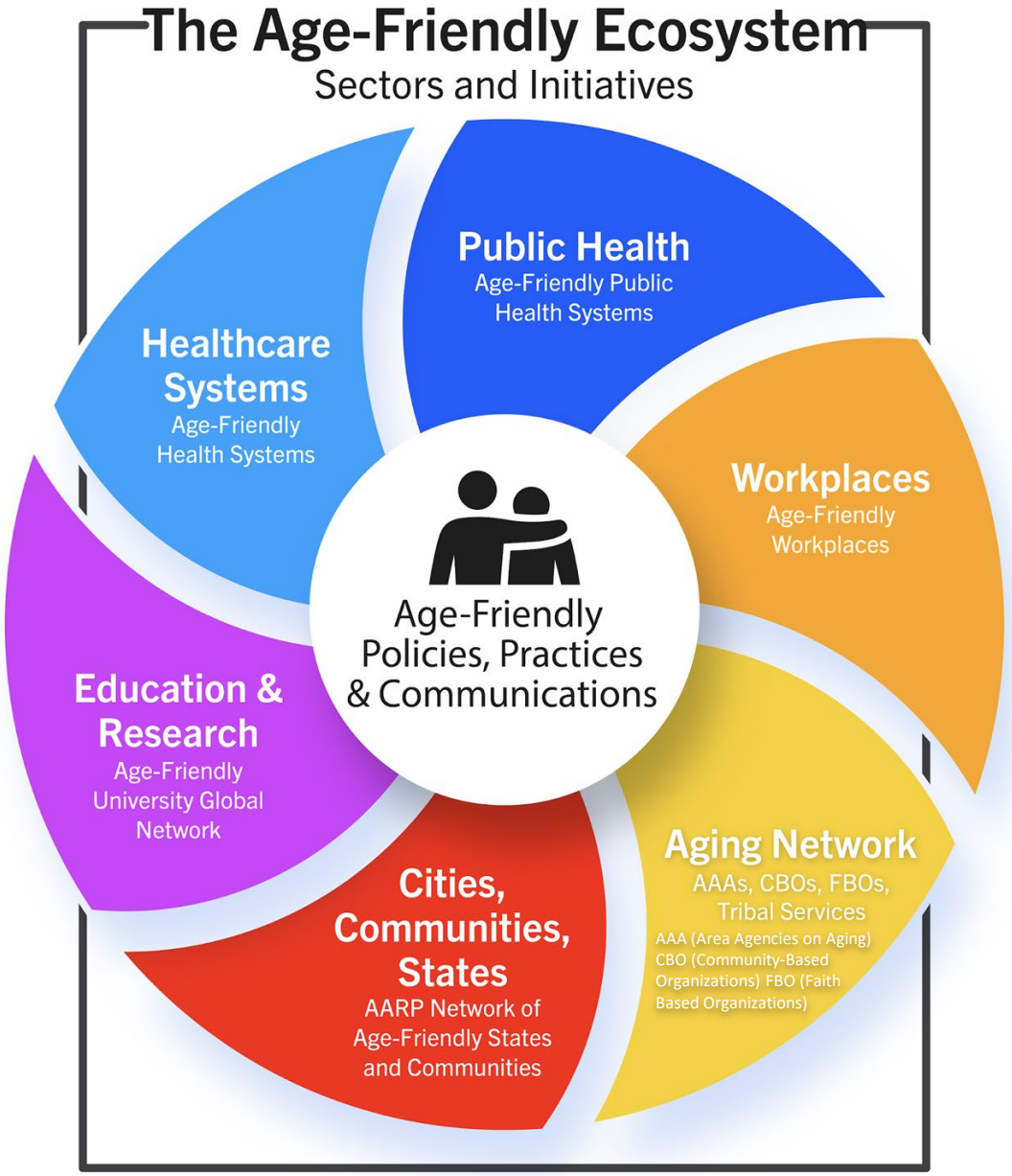
DEDICATED TO IMPROVING CARE OF ALL OLDER ADULTS

PRIORITY AREAS



Longevity Success and Age-Friendly Society

- Longevity is the greatest success story of the last century
- As we age, we can make vital contributions and power up communities – with social and economic support
- We should strive to make all sectors **age-friendly**



Why Age-Friendly Health Care?

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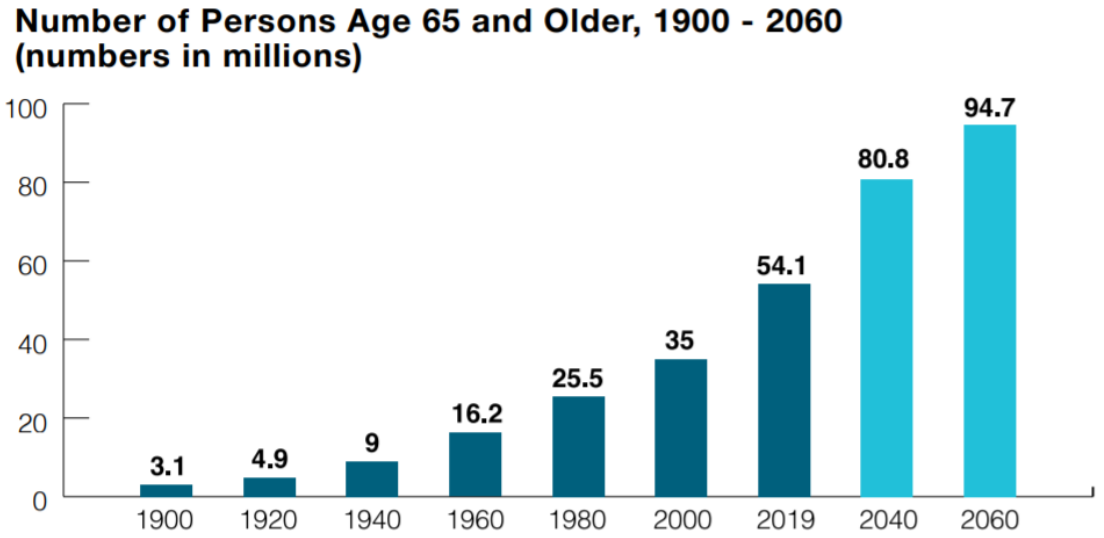
- **Demography**: Number of older adults rapidly growing
- **Complexity**: multiple chronic conditions, dementia, disability, isolation, health-related needs
- **Disproportionate Harm**: higher rates of health care-related harm, discoordination, poor preparation for disasters



Note: Increments in years are uneven. Lighter bars (2040 and 2060) indicate projections.

Source: U.S. Census Bureau, Population Estimates and Projections

Aging in America: Survive or Thrive Film – Based on Robert Butler's Pulitzer Prize-Winning book *Why Survive?: Being Old in America* (1975)

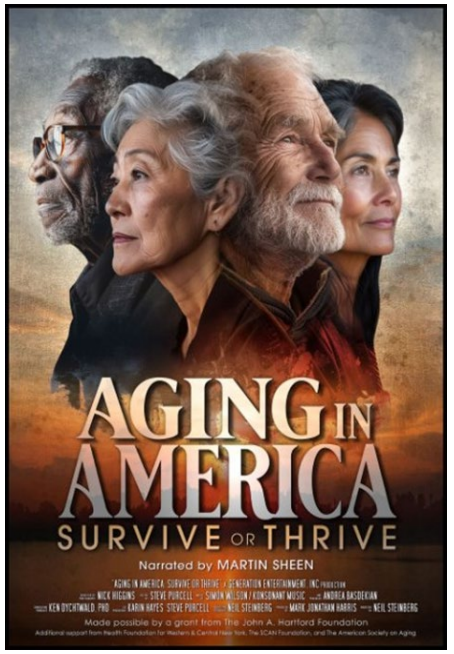
The John A. Hartford Foundation

Over the Last 50 Years:

- Advances in analysis, medications, surgery, palliative care, choices
- NIH (National Institute of Health) and NIA (National Institute on Aging)
- Gained 9 years in life expectancy
- The Aging Network defined, funded
- Age-Friendly Care/4Ms spread
- Public Health focus on aging

However…

- Our systems are not yet systems
- Incentives are at odds
- Competing agendas
- Culmination of differences
- We work in silos
- Federal action concerns
- Ageism



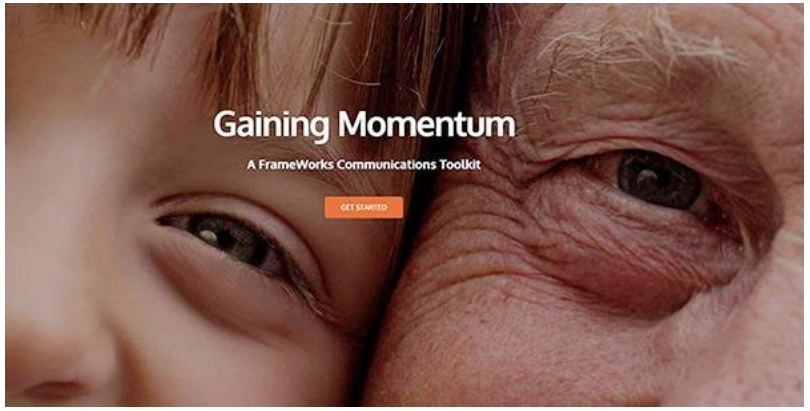
Watch the film on PBS. Use QR code to request a free screening. Discussion guides for public and professional audiences available

AgingInAmericaSurviveOrThrive.com

Eliminate Ageism

The John A. Hartford Foundation

- Ageism has a negative impact on health
- We all need to redefine aging - for example by recognizing that:
  - "We" are ALL aging (not "they" and "them")
  - Aging is the accumulation of experience and knowledge
  - Aging is a natural progression through life, not something to be fixed
- Tell a different story
- Resources available at the National Center to Reframe Aging!



Reframing Aging

A Social Change Endeavor designed to improve the public's understanding of aging

reframingaging.org

Health considerations as We Age

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- Multiple chronic conditions, mental health, depression, dementia, disability, social isolation
- Higher rates of health care-related harm, discoordination, polypharmacy, poor preparation for disasters
- Health and economic differences do not improve with age

The Age-Friendly Health Systems Movement

The John A. Hartford Foundation

An initiative of
The John A. Hartford Foundation
and the
Institute for Healthcare Improvement in
partnership with the
American Hospital Association and
Catholic Health Association of the U.S.

IHI.org/agefriendly

Age-Friendly Health Systems

The Need for Age-Friendly Health Care

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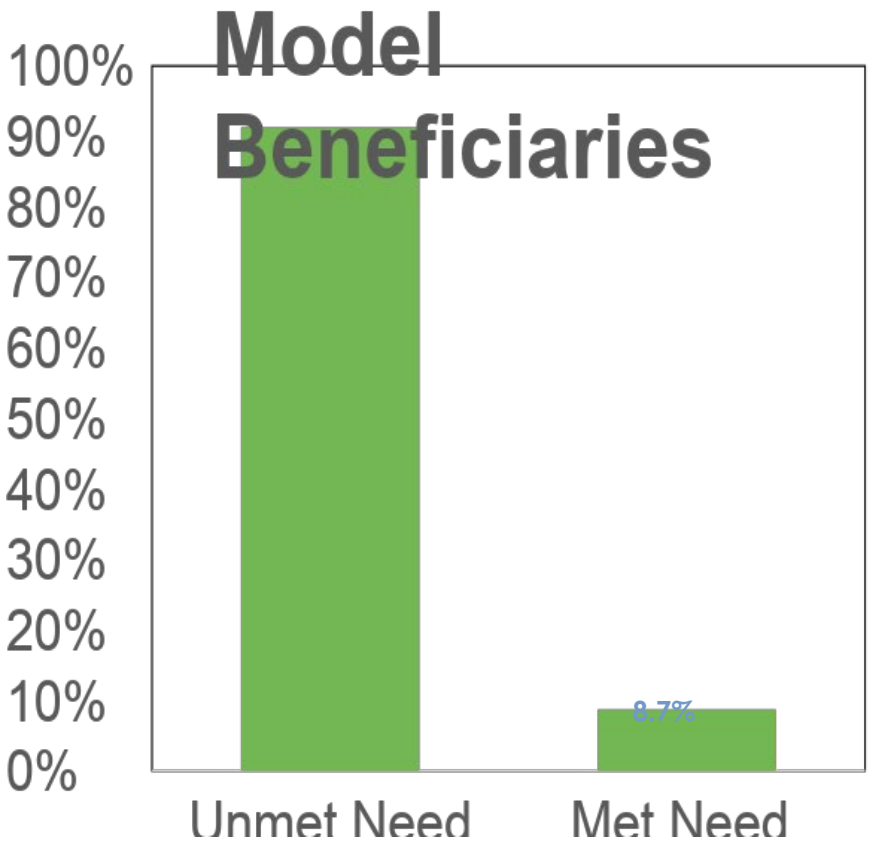
Data-Based Care Not Reliably Applied

- We have many data-based geriatric-care models that have proven very effective
- Yet, most reach only a portion of those who could benefit
  - Difficult to disseminate and scale
  - Difficult to reproduce in settings with less resources
  - May not translate across care settings



IHI (Institute for Healthcare Improvement) Analysis of Model Beneficiaries 2016
Met Need – 8.7%
Unmet Need – 91.3%

Age-Friendly: Review of Data Resulted in the 4Ms

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Methods: Reviewed care models with data of positive impact

90 care features identified in pre-work

Redundant concepts removed

13 discrete features found by IHI team

Expert Meeting led to the selection of the "vital few": **the 4Ms**

Age-Friendly Health Systems

Mate, K., Fulmer, T., Pelton, L., Berman, A., Bonner, A., Huang, W., & Zhang, J. (2021). Evidence for the 4Ms: Interactions and Outcomes across the Care Continuum. Journal of Aging and Health, 33(7-8), 469-481. https://doi.org/10.1177/0898264321991658

Age-Friendly Health Systems: Aim

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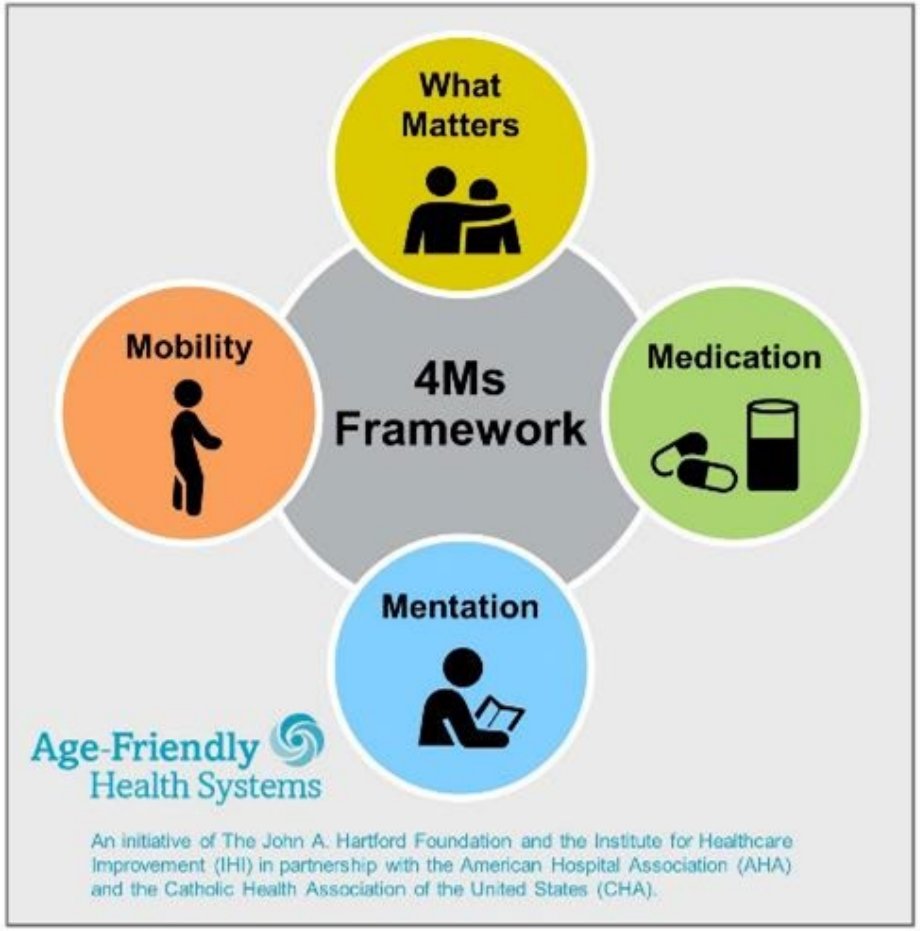
Build a movement so ***all care*** with older adults is attainable and **age-friendly**:

- Guided by an essential set of data-based practices (4Ms)
- Causes no harm
- Is consistent with *What Matters* to the older adult and their family



www.ihi.org/agefriendly

Fulmer, T., Mate, K. S., & Berman, A. (2018). The age-friendly health system imperative. *Journal of the American Geriatrics Society*, *66*(1), 22-24.

Why the 4Ms?

- Represents core health issues for older adults
- Builds on strong data base
- Simplifies and reduces implementation and measurement burden on systems while increasing effect
- Components are synergistic and reinforce one another

Age-Friendly Health Systems

IHI.org/agefriendly

CMS Age-Friendly Hospital Measure

- FY2025 Hospital Inpatient Quality Reporting Program (pay-for-reporting)
- Hospitals required to report on all elements within 5 domains:
  - **Elicit Patient Healthcare Goals (what Matters)**
  - **Manage Medication (Medication)**
  - **Implement Frailty Screening (Mentation & Mobility)**
  - **Assess Patient Vulnerability: s/CBOs/FBOs**
  - **Designate Age-Friendly Care Leaders: Champions**
- Data collected will be publicly available on Medicare Care Compare.
- ACS (American College of Surgeons) ACEP (American College of Emergency Physicians) and IHI (Institute for Healthcare Improvement) supporting hospitals meet measure.

bit.ly/CMS_AFMeasure

Other Age-Friendly Clinical Programs and Resources – Emergency and Surgery Care

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Geriatric ED Collaborative – training and educational resources, join as a member gedcollaborative.com

GEDC THE GERIATRIC EMERGENCY DEPARTMENT COLLABORATIVE
EDUCATE IMPLEMENT EVALUATE

Geriatric ED Accreditation – meet standards and receive recognition from American College of Emergency Physicians in 3 levels acep.org/geda

ACEP Geriatric Emergency Department Accreditation

Geriatric Surgery Verification – meet standards and be verified by American College of Surgeons facs.org/quality-programs/geriatric-surgery

Geriatric Surgery Verification
QUALITY IMPROVEMENT PROGRAM

Age-Friendly Health Care at Home

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Hospital at Home – join Users Group to help you adopt model hahusersgroup.org

Hospital AT Home USERS GROUP

Home-Based Primary Care – get training from Home Centered Care Institute (hccinstitute.org), improve QI in National Learning Network (improvehousecalls.org), join American Academy of Home Care Medicine provider directory (aahcm.org)

HCCI HOME CENTERED CARE INSTITUTE

National Home-Based Primary Care Learning Network

AAHCM AMERICAN ACADEMY OF HOME CARE MEDICINE

Guiding an Improved Dementia Experience (GUIDE) Model

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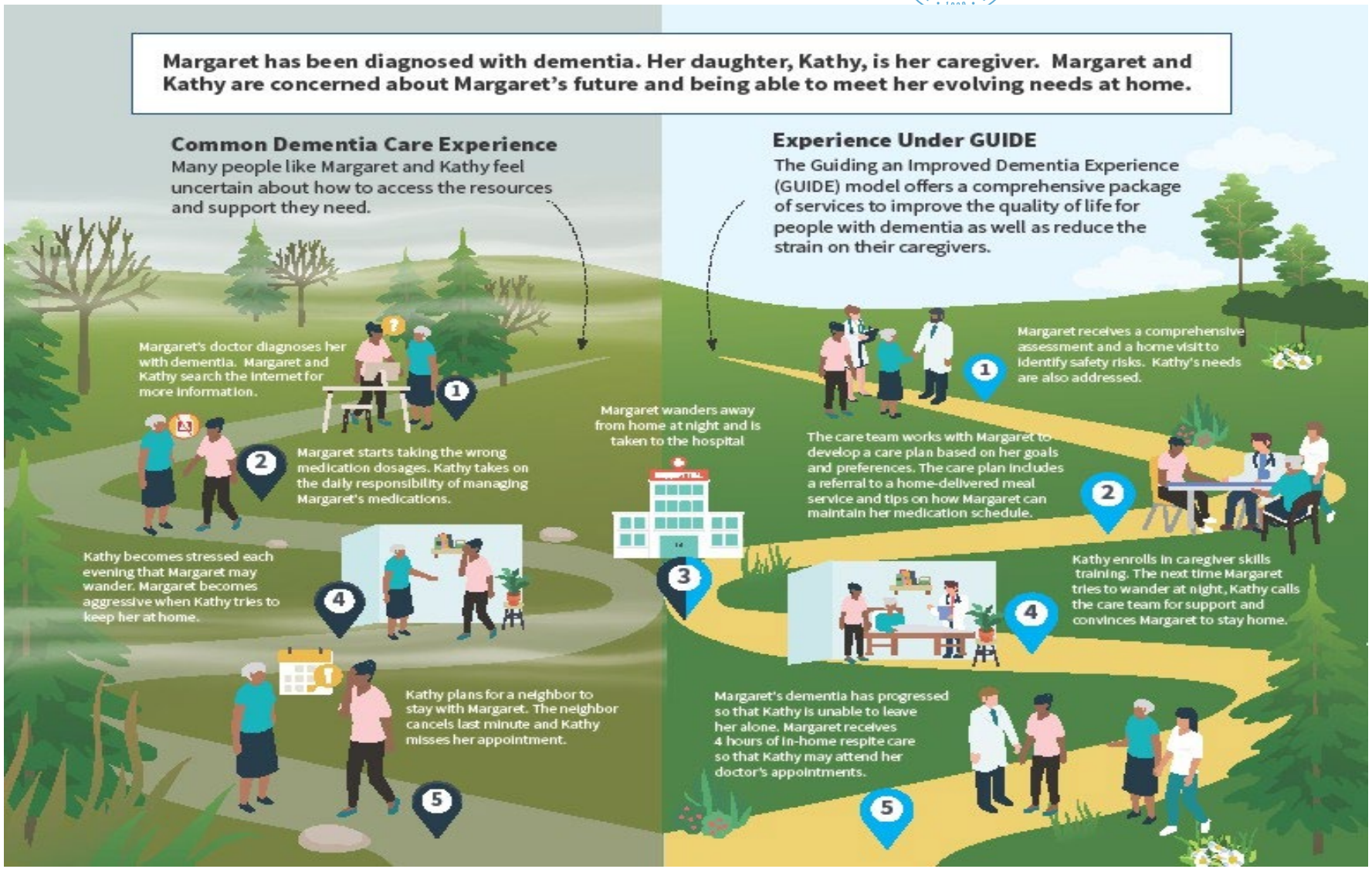
National Dementia Care Collaborative:

ndcc.edc.org/



The National Academies of Sciences, Engineering, and Medicine Report on Nursing Home Quality

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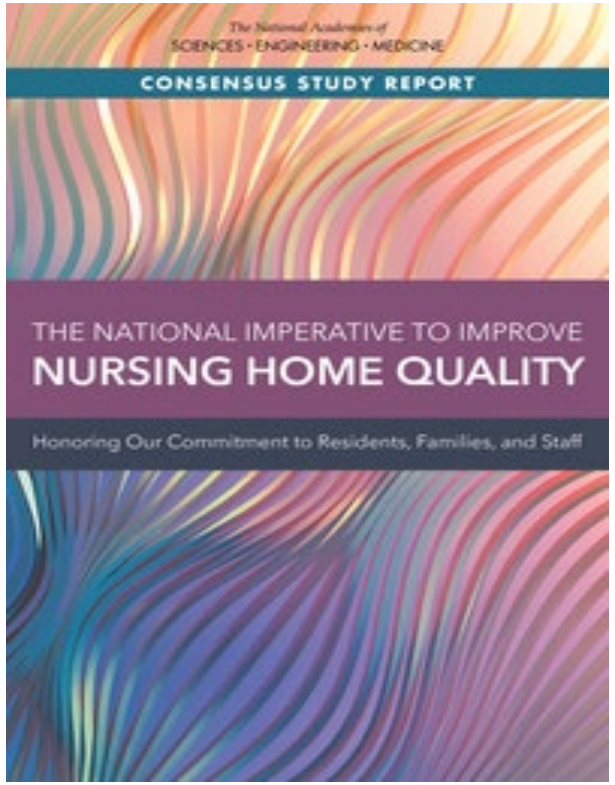

"The way the US finances, delivers, and regulates care in nursing home settings is ineffective, inefficient, fragmented, and unsustainable."

– NASEM Report, April 2022

Moving Forward Nursing Home Quality Coalition

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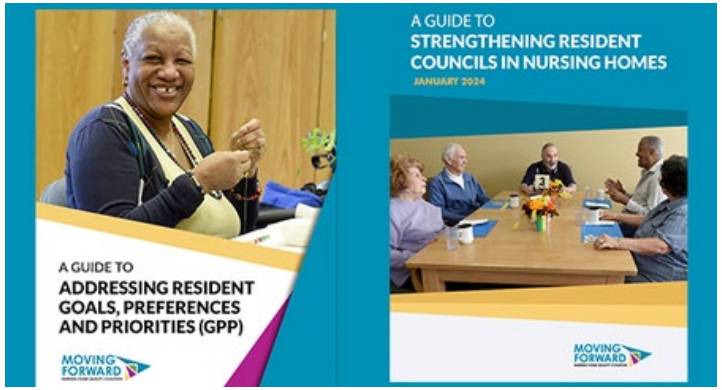
A collaborative network of individuals and organizations advancing nursing home quality.

MOVING FORWARD
NURSING HOME QUALITY COALITION

- 2100 volunteers
- Key action plans to improve quality:
  - What matters/person-directed care
  - Workforce, certified nursing assistants/associates
  - Resident-centered care thru resident councils



movingforwardcoalition.org/

975+ nursing homes are recognized as Age-Friendly

Age-Friendly Public Health Systems

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Trust for America's Health & JAHF partnered to create **Age-Friendly Public Health Systems**:

- Working with state and local health departments
- 6Cs Framework for healthy aging
- Recognition Program
- Free trainings

Age-Friendly PUBLIC HEALTH SYSTEMS

aphs.org

Social Services and Supports

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80% of health results are driven by social factors

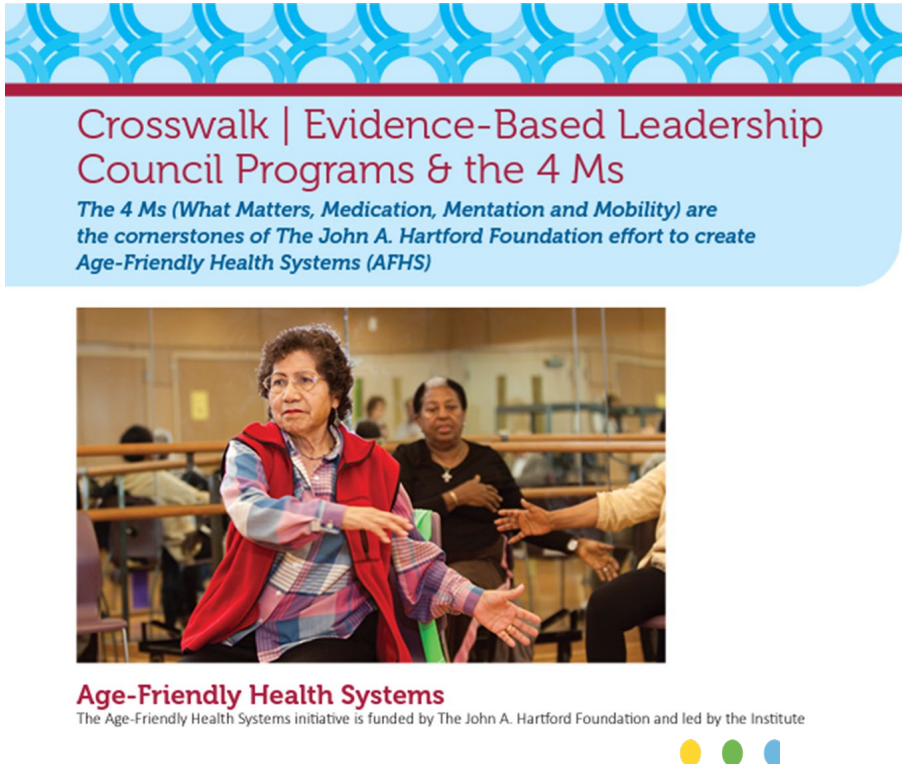
Advancing/supporting community-based services is critical

USAging
Leaders in Aging Well at Home

Aging and Disability BUSINESS INSTITUTE
Connecting Communities and Health Care

JAHF and USAging partnership to strengthen community services

www.aginganddisabilitybusinessinstitute.org



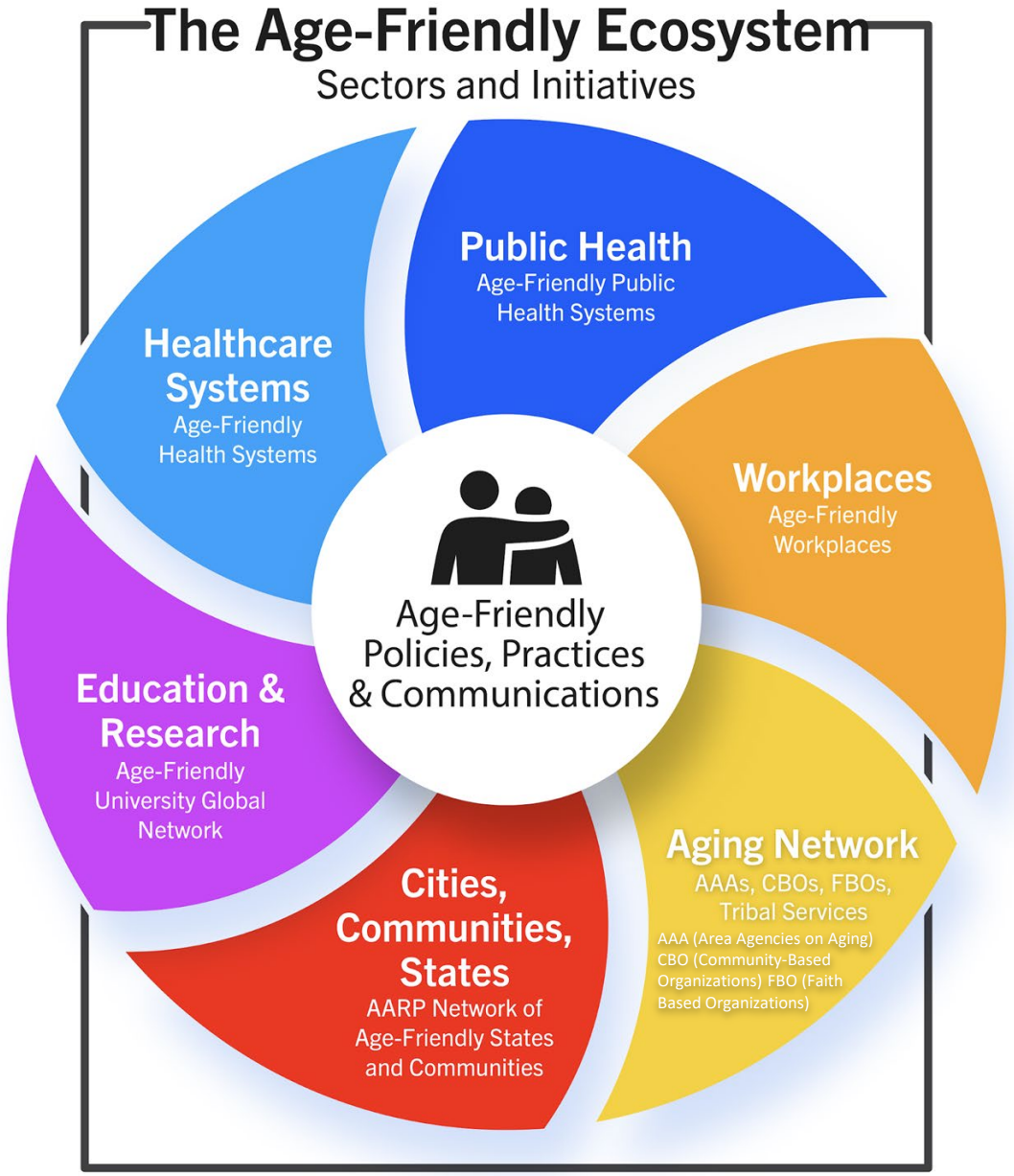
By the Numbers

- **2,100** members of the Moving Forward Nursing Home Quality Coalition
- **5+ million** older adults received age-friendly care
- **7+ million** received age-friendly emergency care
- **10+ million** touched by age-friendly public health
- **11+ million/per year** served by sites and tribal aging services

The Promise of the Age-Friendly Ecosystem

Society requires us to make all sectors **age-friendly**

Call to Action:
An aging lens in all local, state, and federal plans and actions, across all sectors



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- Age-friendly health systems
- Family caregiving
- Serious illness & end-of-life care

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Thank You!

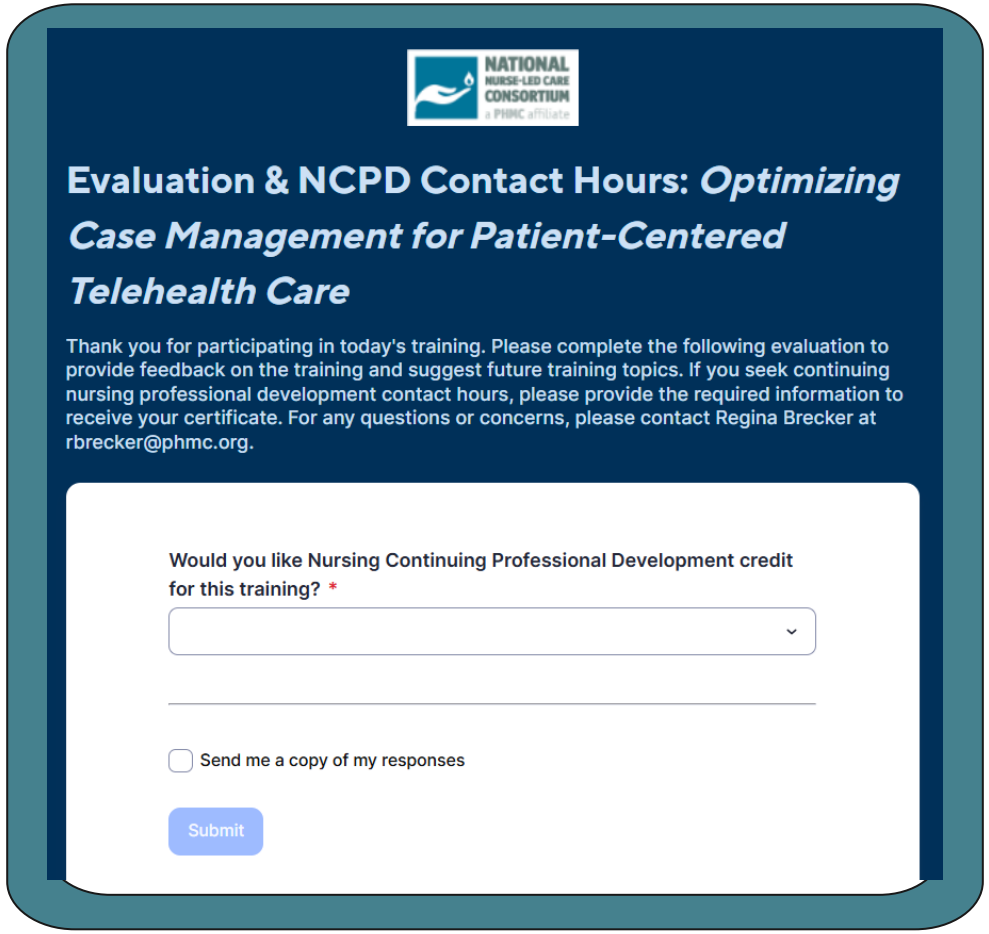
Jane.Carmody@johnahartford.org

WWW.JOHNAHARTFORD.ORG

Questions?

This presentation is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling $550,000 with 0 percent financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by, HRSA, HHS, or the U.S. Government.

Evaluation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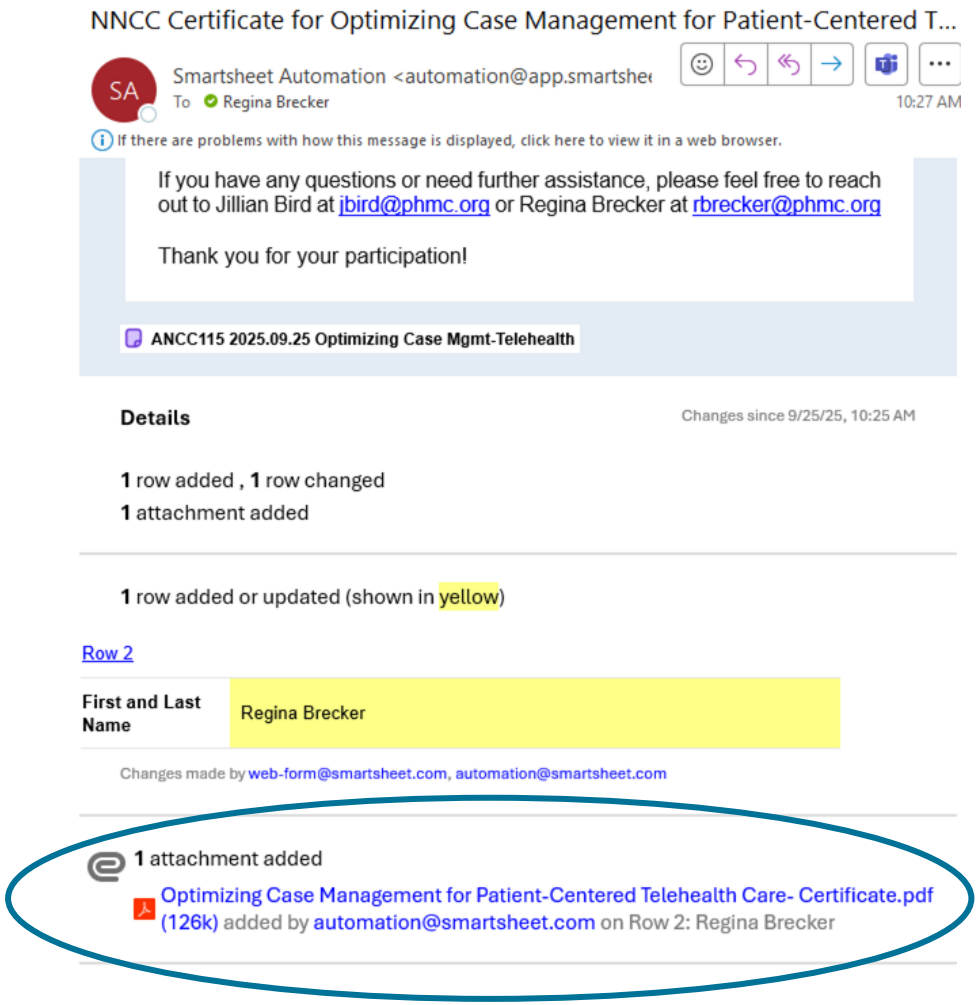
Evaluation & NCPD Contact Hours: Optimizing Case Management for Patient-Centered Telehealth Care
Thank you for participating in today's training. Please complete the following evaluation to provide feedback on the training and suggest future training topics. If you seek continuing nursing professional development contact hours, please provide the required information to receive your certificate. For any questions or concerns, please contact Regina Brecker at rbrecker@phmc.org.
Would you like Nursing Continuing Professional Development credit for this training? *
Send me a copy of my responses
Submit

Certificate

Once you submit the evaluation, please wait approximately **20 minutes** for your certificate to arrive. It will come from “Smartsheet Automation,” and be linked at the **very bottom of the email** (as seen below). You will not need to request access.


NNCC Certificate for Optimizing Case Management for Patient-Centered T...

SA Smartsheet Automation <automation@app.smartshee

To Regina Brecker 10:27 AM

If there are problems with how this message is displayed, click here to view it in a web browser.

If you have any questions or need further assistance, please feel free to reach out to Jillian Bird at jbird@phmc.org or Regina Brecker at rbrecker@phmc.org

Thank you for your participation!

ANCC115 2025.09.25 Optimizing Case Mgmt-Telehealth

Details Changes since 9/25/25, 10:25 AM

1 row added , **1** row changed
1 attachment added

1 row added or updated (shown in yellow)

Row 2

First and Last Name	Regina Brecker

Changes made by web-form@smartsheet.com, automation@smartsheet.com

1 attachment added

Optimizing Case Management for Patient-Centered Telehealth Care- Certificate.pdf (126k) added by automation@smartsheet.com on Row 2: Regina Brecker

Access Health Center Resources

NNCC Resource Library

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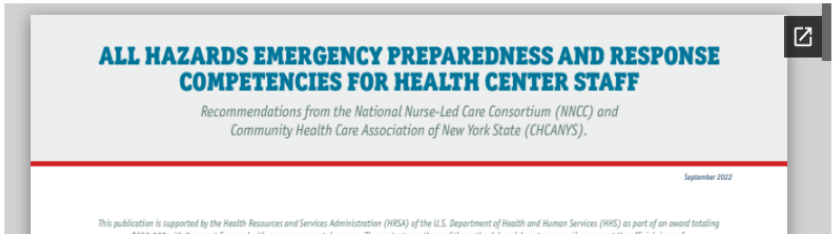
All Hazards Emergency Preparedness and Response Competencies for Health Center Staff

To successfully perform their assigned emergency/disaster roles, health center staff must understand how their organization will respond to hazards, including the use of altered management structures and modified operations. The National Nurse-Led Care Consortium (NNCC) and the Community Health Care Association of New York State (CHCANYS) created a set of competencies to improve the emergency and disaster preparedness of all health center staff. This publication provides a comprehensive overview of those competencies and sub-competencies, as well as a description of their development process. The competencies are intended to form the foundation of health center staff education and preparedness for all-hazards emergency and disaster response and will allow health centers to direct their limited training time and resources to cover the most essential preparedness aspects.



Upcoming Trainings

January 22 , 2026 – 3pm EST

- Session 1: Optimizing CHWs and Patient Navigators in PHPCs
- *Registration: https://us02web.zoom.us/webinar/register/WN_6AVbSMORSWugIBJm7zl_3w*

January 27th, 2026 – 3 pm EST

- Session 2: Care for Aging Residents of Public Housing: Strategies for Rural and Urban Settings: Sustaining Impact and Measuring Outcomes
- *Registration: https://us02web.zoom.us/webinar/register/WN_zlaUEZ0JQ1mt5Q0ItA0v5g*

Thank You!

If you have any further questions
or concerns please reach out to
Regina Brecker at rbrecker@phmc.org

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