To better serve the needs of the low-income older adult population in their community, Providence Tarzana Medical Center and ONEgeneration developed a partnership to create a unified system of communication and support services for this underserved, vulnerable population. As a health care entity and a community-based organization, the two partners are working to define a stronger, connected relationship. They serve the community through health promotion, prevention and wellness offerings, such as education seminars on disease prevention, meal delivery, mental health support and integrated discharge planning, all intended to positively impact health outcomes.

RESULTS

- Within the first year, the partnership served 750 individuals.
- Improved continuity of care with greater emphasis on wellness and health promotion.
- Improved relationships between partners, opening the door to future opportunities.

INSPIRATION

In 2016, Providence Tarzana conducted their Community Health Needs Assessment (CHNA), required as a nonprofit health system, and identified five primary needs for the community: food insecurity, access to health care and resources, senior care resources, prevention and management of chronic disease, and mental health services. They realized that the most effective way to address these areas of need was by developing partnerships with community-based organizations deeply rooted in the community and already providing essential services and resources for older adults.

ORGANIZATIONS INVOLVED

The primary partners in the model are Providence Tarzana Medical Center and ONEgeneration, one of the largest community-based organizations in the area serving over 70,000 older adults annually.

The partnership also receives support from numerous organizations in the community. For example, the Los Angeles Department of Aging provides funding for a significant portion of the delivered meals. A local farmers market also plays a critical role in donating fresh produce to be provided to older adults served by the program.

PARTNERSHIP STRUCTURE

The partnership is a collaborative relationship, with no formal agreement between the two organizations. The partners work together to determine which services and supports will best serve the community and address their needs. To do this, leadership of the two organizations and their staff communicate regularly.

MODEL DESIGN

The partnership involves three primary components. Food insecurity was the first component tackled through the partnership, which has been addressed through expanding meal delivery services to older adults in need. With the partnership, ONEgeneration has been able to expand on serving 100 older adults with a meal five days a week to also
serve weekend meals to the 25 most vulnerable older adults. Expansion also includes providing a bag of non-perishable groceries, along with fresh produce, each week to those identified as most vulnerable. Wellness observations are conducted as part of the delivery, and, if needed, ONEgeneration care managers follow up.

The second component addressed in the partnership is prevention and wellness. This involves quarterly seminars taught by Providence Tarzana clinicians at ONEgeneration’s Senior Center that educate the community on key topics. Additional health care resources and screenings are provided at the Senior Center by Providence Tarzana staff. For example, application assistants are available at the center to assist eligible older adults in applying for nutrition assistance through the state’s CalFresh program. Mental health services are provided by Providence Tarzana staff at the Senior Center or within individuals’ homes.

Third, during care transitions from hospital to home, hospital discharge planners and ONEgeneration’s care management team work collaboratively to ensure that the medical, social, and behavioral needs of individuals are supported.

**FUNDING MECHANISM**

The partnership is primarily supported by Providence Tarzana through their community benefit funds. Additional funding comes from external sources, actively sought by both partners. For example, the hospital secured funding through the state that allows them to place an application assistant in the clinic to help individuals enroll in the CalFresh program.

**LESSONS LEARNED**

- Collecting and using data to show the outcomes of the partnership has been an opportunity to not only strengthen the two groups’ bond by building confidence and unifying efforts, but also to strengthen the business case. This may be valuable when receiving support from individual funders, who are often more interested in social impact projects rather than physical facilities and resources.
- Approaching the partnership with intentionality allowed for defining goals, roles, and responsibilities which have been critical for success.

**FUTURE**

The partners continue to further develop the program, including through the expansion of service offerings and the number of people served. E.g., they are expanding their current meal delivery services beyond older adults to serve families that are experiencing food insecurity. They are also exploring the potential of expanding their service area.

To ensure success and sustainability, the partners are working to improve their model, such as identifying gaps in the coordination between the organizations’ staff at the time of hospital discharge and transition, and noting additional funding sources and relationships that will help expand the program.

**PROVIDENCE TARZANA:**

“This partnership leads the way toward becoming a progressive change agent in developing a natural communication between health services and community-based organizations with the intent to better serve our low-income, vulnerable, and underserved older adult population.”