Interview Guide for Resident Wellness Directors (IWISH)

Items in italics are instructions for the interviewer, not to be read aloud. Information to be filled in ahead of the interview is highlighted in yellow.

Introduction

Thank you very much for taking the time to speak with me. Abt Associates and its subcontractor L&M Policy Research has been contracted by HUD to conduct an evaluation of the IWISH program and your input is an important component of this process. We spoke to you [OR PREDECESSOR] in 2018 and 2019 about your role and how the IWISH program works at your property. This is our final interview for the evaluation and an opportunity for you to provide input on your overall experience in IWISH.

Your participation in this interview is voluntary and you are free to skip any questions you do not wish to answer. The questions in the interview have been reviewed by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995. Public reporting burden for this information collection is estimated at up to 90 minutes, including preparation and follow-up. The OMB control number is XXXX-XXXX, expiring XX-XXXXX.

We will be taking notes during our discussion but will not be recording the discussion. At the end of the study, after we complete our interviews, we will provide the interview notes to HUD with individuals' names, property names, and location names removed. We will also provide summaries of what we learn through the interviews to HUD but will not use your name or the name of the property in those summaries or in our other reports. The information that we collect will be used for research purposes only.

There may be some questions you may not be able to answer. If you are unable to answer a question or would prefer not to answer, just let me know. Your participation in this interview is purely voluntary and you are free to skip any questions you do not wish to answer.

Do you have any questions about the evaluation or today's discussion before we begin?

Background and Prior Experience – for new RWDs only

These questions will only be asked of RWDs that started after the 2019 interview.

- 1. When did you start as the RWD for this property?
- 2. Before starting as RWD, did you have any prior work experience as a service coordinator, or related experience? How many years of experience?
- 3. What interested you about the RWD position?

Effects of COVID-19 (Coronavirus)

I imagine the past few months have been a very challenging time for you. I'd like to hear about how COVID-19 affected your work with residents.

- 4. Did you work with residents all remotely, partly remotely, or were you still coming to the office? Did that change over time?
- 5. Did the focus on what you were working with residents on change? If so, how?
- 6. What about programming? Did all group programming stop? Did some programs stop and others continue?
- 7. Has going through the pandemic highlighted anything for you about the strengths and weaknesses of the IWISH program to support residents' health and wellness?

IWISH Activities

Let's talk about the specific elements of IWISH and the value of each. (*Interviewers will be prepared to define each term if the respondent is confused*.)

- 8. Let's start with the <u>person-centered interview</u>. If IWISH were to continue, would you recommend that the PCI be a required part of the program? It could be either the way it is now, with some changes, or not at all? If you recommend any changes, what are they?
- 9. What about the <u>health and wellness assessment</u>? If IWISH were to continue, should the health and wellness assessment be a required component, either the way it is now, with some changes, or not at all? If you recommend any changes, what are they?
- 10. What about the <u>IHAP</u>? If IWISH were to continue, should the IHAP be a required component, either the way it is now, with some changes, or not at all? If you recommend any changes, what are they?
- 11. What about the <u>community healthy aging plan (CHAP)</u>? If IWISH were to continue, do you think that the CHAP should be a part of it, either the way it is now or revised?
 - a. Have you updated or continued to use the CHAP for the property?
- 12. Let's talk about PHL. Has working with PHL gotten easier over time?
 - a. Are there parts of how you work with residents that are not well represented in PHL? (*If needed*, *add*: For example, activities that you do with residents that you don't enter into *PHL*, *either because there isn't a spot for it or because it's too time consuming to enter the data*?)
 - b. If IWISH were to continue, do you think PHL, or a revised version of PHL should be a part of it? Why or why not?

Supporting Residents' Health and Wellness

Now I would like to ask a few questions about how you work with residents.

- **13**. The data that I have indicates that you have about [X] residents enrolled in IWISH. Does that sound right to you?
- 14. Of the people enrolled in IWISH, can you estimate how many meet with you once a week, every few weeks, or less frequently? [*Send the table to the RWD in advance for them to complete.*]

How frequently the RWD meets with residents	Estimated # of residents	OR: Estimated % of residents
Once a week or more often		%
Every few weeks or monthly		%
Every few months		%
Less than every 6 months		%
Have not seen them since they signed up		%
TOTAL		100%

- 15. How focused are you on residents' health and wellness when you work with residents, as opposed to helping them with their benefits, transportation, or other types of needs? Would you say very focused, somewhat focused, not very focused, or not at all focused?
- 16. What have you learned about the best ways to support residents' health and wellness in your role as a Resident Wellness Director?
 - a. What do you see as the most valuable services you provide?
 - b. What more would you like to be doing? What stands in the way?
- 17. Overall, what have you learned about what works best for getting residents to work with you? What gets them motivated to take advantage of your help?
- **18.** What are the main barriers for residents taking advantage of what you and the nurse have to offer?
- 19. Have you changed any of your procedures for how you work with residents returning from a hospital or nursing home stay or how you handle sentinel events? [*Review prior interview notes*.]
- 20. Have you made any changes in how you work with healthcare providers such as hospitals and primary care physicians? [*Review prior interview notes*.] If so, how?
 - a. Do any of your interactions with healthcare providers go beyond dealing with specific residents? For example, have you worked with any providers to develop procedures or programs for the residents as a whole?
- 21. Has the way you work with the Wellness Nurse changed at all? Do you feel you work together more closely, less closely, or about the same? Describe any changes. [If new RWD, ask how do they work with the WN. If the WN position is vacant, ask how that has impacted their work.]

- 22. Are you satisfied with the level of support you receive from property management?
 - a. Can you provide an example of how property management supports your work?
 - b. What could property management could better support your work?

Programs and Partnerships

Now let's talk about programs and partnerships that support residents' health and wellness.

- 23. *Send ahead printout of the information we have collected on programs.* Have you made any changes to your programs or partnerships since we last spoke? (Adding new programs or partners?)
- 24. Which programs are most popular with residents?
- 25. Which programs do you feel have the most impact on residents' health and wellness?
- 26. Were there programs or services that you wanted to offer under IWISH but couldn't? Why couldn't you?
- 27. *Send ahead printout of the information we have collected on partnerships.* Have you developed any new partnerships that are not on this list?
 - a. If so, please describe the purpose of the partnership, who the partner organization is, and how you work together.
- 28. Were there partnerships that you wanted to develop under IWISH but couldn't? Why couldn't you?

Effects and Benefits of IWISH for Residents

Let's talk now again about the effects and benefits of IWISH for residents.

- 29. What do you see as the main benefits of IWISH for residents?
- 30. Do you think residents that did not enroll in IWISH have benefitted from the program? Describe.

31. Send the table in advance for the RWD to complete. They can complete it on their own or collaborate with the RWD. Review the information on the call or ask about such changes if not completed in advance.

Type of Change That Could Result from IWISH	Have you observed this type of change in your residents? (Yes/No)	Please provide a brief written example, if you have one.
Changes in how often or how		
residents use primary or specialty		
health care		
Evidence of previous unmet		
medical needs that are now being		
met		
Residents better connected to		
public benefits (such as		
Medicaid, SNAP, cash		
assistance)		
Residents managing their		
medications better		
Residents having more successful		
transitions back from hospitals or		
nursing homes		
Residents avoiding an		
unnecessary 911 call or trip to the		
ER		
Residents avoiding premature		
transition to a nursing home		
Residents avoiding a potential		
eviction		

Experience of Being a Resident Wellness Director

Now I just have a few questions about your experience being a Resident Wellness Director.

- 32. What has been your favorite part of being a RWD?
- 33. What has been your least favorite part of being a RWD?
- 34. Did you ever feel limited in what you could do in your support for residents? Why?
- 35. How would you grade the technical assistance, training, and support you received from the Lewin Group? (*If needed: A, B, C, etc.*)
- 36. What was most helpful in that training and what was least helpful?
- 37. What other training or support would have been helpful to you as an RWD? Please describe.

- 38. In your opinion, what parts of the IWISH model were most impactful for residents in helping them age in place?
- 39. What would you say are the biggest weaknesses of the IWISH model?
- 40. Is there anything about <u>this</u> particular property or community that made it easier or harder for a program like IWISH to be successful?
- 41. If you could redesign IWISH, what would you change?
- 42. Is there anything I have missed asking about your experiences?

Thank you very much for your time and for all of your valuable input into the IWISH evaluation. Thank you also for all that you do for your residents.