

# **SOCIAL SERVICE NEEDS IN PUBLIC HOUSING HI-RISES**

**A REPORT BY THE PUBLIC HOUSING AGENCY OF THE CITY OF SAINT PAUL**



**May, 1988**

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January, 1992

To Whom It May Concern:

The existence of a mature, community-based network of supportive services for the residents of Saint Paul's public housing hi-rises is one of the best working examples of the "public-private partnership" phrase we hear so much of in Minnesota. Over 30 organizations from non-profits, to governmental agencies, to private corporations, participate in this community response. Many have served the hi-rise population since 1959, the year the first hi-rise was completed in Saint Paul. (The PHA was cited in a housing study as being among the top eight percent of PHAs in the nation that "possess" such a comprehensive array of supportive services.)

However, because the PHA is funded by the federal government (U.S. Department of Housing and Urban Development) as a shelter provider only, the existence of this non-PHA service network has also become a necessity if we hope to plan for the entire well-being of the residents. Also, it is a shared view among our staff and the service providers that, in terms of age, functioning ability, and other measurable criteria, today's hi-rise population is less homogeneous than the hi-rise population of five to ten years ago, and, significantly, some of the "newer" hi-rise populations are underserved or unserved by the existing social service network.

It is in this context that the PHA undertook to re-evaluate the 1988 survey of the Social Service Needs in Public Housing Hi-Rises. While certainly not an exhaustive review of the issue, we think the study continues to provide a useful point of reference for reviewing the needs, recognizing the providers, identifying gaps in services, and offering recommendations for change where appropriate. I am confident that our staff and the community will continue to respond positively to the challenges referenced in this report.

I would like to thank Dorothy Davey, PHA Director of Resident Services, Elaine Anderson, Program Services Manager, and all other members of the Resident Services Department who contributed to this study.

Sincerely,


  
Jon M. Gutzmann  
Executive Director

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## FOREWARD

The Public Housing Agency of the City of St. Paul (PHA) released a report in May, 1988, entitled Social Service Needs in Public Housing Hi-Rises. The report evaluated the social service needs of the residents, identified resources, gaps and barriers and presented recommendations to address those needs. During the fall of 1991, PHA staff updated this document.

The report is organized into two sections. Section One updates the information provided in the 1988 report. The second section outlines a social service plan for each of the 16 PHA hi-rises.

One of the means to accomplish this involved meetings with individual residents and resident groups who provided information about the current needs of residents in the hi-rises. Another was consultation with on-site social service agency representatives who shared their opinions regarding the needs of hi-rise residents.

Resident feedback was provided through a series of meetings held by PHA staff with the Resident Councils, Floor Counselors, Tenant Orientors, elected officers and other individuals and groups.

Input was provided by representatives from a number of social service organizations including Family Service of Greater St. Paul, Senior Chemical Dependency Program, Accessible Space Inc., Ramsey County Nursing Services, Vietnamese Social Services of Minnesota, Wilder Foundation, St. Paul Community Education, Ramsey Action Program Senior Dining, U.S. West, and Women's Association for Hmong and Lao Inc.

PHA staff involved in this update included Managers, Assistant Managers, Interpreters, Human Service Coordinators, Caretakers, CHSP staff, the Assistant to Resident Services Director, Word Processing staff, the Assistant Information Systems Manager and the Communication Specialist.

### OVERVIEW OF CHANGES SINCE 1988

#### COMPARISON OF DEMOGRAPHICS BETWEEN 1988 and 1991

- More residents today are under 62 years of age than in 1988  
The current ratio of elderly to non-elderly is 2.5 to 1 compared to 4 to 1 in 1988.
- The average elderly resident is older today than in 1988  
The average age of the 62 and over population has increased from 75 to 77 years.
- Resident incomes have not kept pace with inflation.  
Annual resident incomes have decreased from 24% to 22% of the median income.

## SUMMARY OF COMMUNITY ACCOMPLISHMENTS SINCE 1988

Achievements in the social service arena are discussed in more detail throughout the report. The following accomplishments are highlighted to provide an overview of progress that has been made by our community in the past six years.

1. Ramsey County Community Human Services made two important modifications in the delivery system for the provision of housekeeping/homemaker services. First the county raised the ceiling for assets for low-income persons, making more residents eligible for services. Secondly, a quality standards and a monitoring system for vendors providing housekeeping/homemaker services was implemented by the county.
2. The Medicare Medical Assistance Program (MMAP), a program that utilizes volunteers to assist older persons with paperwork related to government programs was implemented at Seal Hi-rise.
3. A number of new mini-clinics have opened in hi-rises where clinics had been terminated.
4. The Minnesota Mental Health Act passed, making limited funds available for case management services.
5. Hi-rises participating in the Adopt-a-Hi-Rise program have increased from five to fourteen.
6. Four new programs have initiated services for residents in the hi-rises since the completion of the 1988 report:
  - Accessible Space, Inc. operates programs at four hi-rises.
  - Safe Alternatives provides services to residents in various hi-rises.
  - STAR Program, funded with Community Resource Funds, operates at 10 W. Exchange and Wabasha Hi-rises. This is a joint venture with Westminster Corp.
  - The North End Block Nurse/Living at Home Program operates out of Front Hi-Rise.

As the report illustrates, many beneficial services are currently provided by the social service community to meet needs of the residents living in public housing hi-rises. The PHA acknowledges the value of these important services. We extend our thanks to the social service agencies, residents and staff who contributed their expertise and effort to develop this updated report. PHA staff looks forward to working in partnership with the community as we embark on a plan to solve problems and implement programs to serve public housing residents in the future.

SOCIAL SERVICE NEEDS  
IN  
PUBLIC HOUSING HI-RISES

## INTRODUCTION

It is the purpose of this paper to update the information provided in the May, 1988 Social Service Needs in Public Housing Hi-Rises report and set forth the current needs of the persons who live in elderly public housing. A new section has been added to the original report which outlines individual social service plans for public housing hi-rises.

The Public Housing Agency of the City of Saint Paul (PHA) is an independent agency created through action of the Minnesota State Legislature in accordance with the United States Housing Act of 1937. It is governed by a seven member Board of Commissioners (two of whom must, by law, be PHA residents) appointed by the Mayor with City Council concurrence. The Board of Commissioners sets PHA policy and oversees its operations in accordance with federal regulations promulgated by the United States Department of Housing and Urban Development (HUD).

The PHA receives its income from rents paid by residents (56%), other income (1%) and federal subsidy received from HUD (43%). The PHA receives no City, County, State or other public funds.

The PHA owns and operates dwelling units which house approximately 10,000 people. It also administers the Section 8 Existing Housing Assistance Payments Program which subsidizes the rent of 2,788 households. The PHA operates sixteen hi-rises located throughout the City of Saint Paul in which approximately 2700 elderly and/or disabled/handicapped residents are housed.

The mission of the PHA is to provide to as many eligible low-income families as possible the opportunity to live in safe, decent, sanitary housing and to provide such housing in an efficient and effective manner.

Public housing is not "housing of last resort". The PHA is expected to make a thorough evaluation of applicants to determine whether their admission to a hi-rise would be reasonably expected to have a detrimental effect on other residents or on the housing environment. All applicants must be evaluated to determine if they meet the following admissions criteria:

1. The head of household or spouse:
  - a. is at least 62 years of age, or
  - b. is disabled, or
  - c. is handicapped, or
  - d. qualifies as a single person for certain apartments in certain hi-rises, or
  - e. qualifies as a non-elderly family with no minor dependents for certain hi-rises, and
2. whose annual income does not exceed the maximum income limits in effect at the time of admission, and
3. whose members each have a Social Security number or can document and certify that they do not have Social Security numbers.

4. who meet other non-economic qualifications which include:
  - a. a satisfactory rent and utility record
  - b. no record of disturbances of neighbors
  - c. no record of destruction of property
  - d. a satisfactory housekeeping record
  - e. no history of criminal acts which may adversely affect the health, safety or welfare of other PHA residents
  - f. the ability to comply with the Dwelling Lease.

HUD regulations mandate that the PHA admit only applicants who meet essential performance based standards for the occupancy of a PHA unit and comply with the Dwelling Lease. To determine this, the PHA conducts a thorough assessment of an applicant's ability and willingness to meet the PHA's admission standards. In making such an assessment, the PHA considers, in addition to other factors, the applicant's social service needs and the availability of services to meet those needs. Before admission is granted, the PHA may require that an agreement be executed by a social service agency to provide support services to applicants who need special help in order to meet the PHA's admission criteria and establish tenancy.

Persons admitted to public housing may later be found to no longer possess the ability to maintain their apartments in the manner expected of them. Without services which help residents to meet essential, performance based standards, residents may be forced to seek other, more costly assisted living arrangements. Some of the factors which make hi-rise residents eligible to live in public housing (low-income, age, handicap, or disability) may contribute to their need for services. To a great extent, residents are expected to locate and coordinate services for themselves but many do not know how or are not capable of doing so.

The PHA does not have the funds or the staff available to provide direct social services needed by hi-rise residents. We are all too aware of the debilitating effect that budget cuts at all levels of government have had on agencies trying to provide needed services in the community. We too are trying to do more with less. Only three PHA Human Services Coordinators are available to help assess the needs of the residents and assist them in locating and receiving appropriate services. They also perform crisis intervention and follow through with outside agencies. One Manager, one Associate Manager and three Assistant Managers perform all the management functions for 14 hi-rise buildings. (Mt. Airy and Dunedin are served by the on-site staff.)

Managers often learn of residents' needs through routine housekeeping inspections, contractor reports, complaints from other residents, special or annual income reviews or rent delinquencies. Problems concerning social service needs are generally referred to one of the PHA Human Services Coordinators.

The Human Services Coordinators receive the majority of their referrals from the Managers, Caretakers, families and neighbors. They also receive referrals from outside agencies involved with residents (i.e. a nurse from the "Mini Clinic"). In addition, residents contact the Human Services Coordinator directly for assistance. Coordination meetings attended by representatives of organizations that serve hi-rise residents and PHA staff assigned to the buildings are held on a monthly or sometimes bi-monthly basis at each hi-rise.

The meetings provide the opportunity for providers to discuss cases, make referrals and determine areas of responsibility.

A Resident Caretaker whose primary job is maintaining the physical structure and preparing vacant units for re-rental is assigned to each building. Caretakers learn of problems through day to day contact with residents while performing routine maintenance tasks and responding to emergency calls (i.e. when a resident pulls the call cord in the bathroom or fails to display an OK card). Caretakers refer, as appropriate, cases to the Managers and Human Services Coordinators for assistance.

In the following pages, we intend to describe the present hi-rise population, to identify their social service needs and to point out areas where those needs are and are not being met. We have also set forth recommendations for consideration and discussion in the months ahead. It should be understood that our recommendations are for the long term and we are fully aware that because of lack of resources in the community they may not be achieved in the near future.

As background to a discussion about the PHA hi-rise resident service needs and responses to those needs, some general demographic information may be useful.

The following statistics have been compiled by PHA staff from the PHA's computerized Public Housing Applicant System, Tenant Accounting System, Applicant and Tenant Files and Hi-rise Waiting List, as well as from census data and material provided by some of the community agencies providing services to hi-rise residents. The data are by no means exhaustive. PHA data collection and retrieval capabilities are not geared to research requirements. Nevertheless, what is provided may lend perspective to the issues.

TABLE 1  
**HI-RISE RESIDENT DEMOGRAPHICS**  
**JUNE 30, 1991**

	<u>NUMBER</u>	<u>PERCENTAGE</u>
HI-RISE RESIDENT POPULATION (See Note 1)	2,551	100.0
RESIDENTS BY AGE		
Under 62 (Note 2)	756	29.6
Near Elderly (55 to 61)	228	8.9
62 and Older	1,795	70.4
Young Elderly (62 to 69)	435	17.1
Mid Elderly (70 to 79)	696	27.3
Old Elderly (80+)	664	26.0
AVERAGE AGE OF ELDERLY RESIDENTS: (Note 3)	77	
"SINGLE PERSONS" (Note 4)	68	2.7
AVERAGE ANNUAL INCOME OF RESIDENTS:	\$7,367 which is approximately 22 percent of the median income for the Twin Cities SMSA.	

NOTES TO TABLE 1, HI-RISE RESIDENT DEMOGRAPHICS

1. The hi-rise resident population figure includes all residents who are eligible by income, age, handicap or disability. Residents who are eligible under the PHA's Single Persons Program are also counted. (See Note 4., below). Resident Caretakers, their household members and non-elderly, non-handicapped/disabled members of households headed by program-eligible persons are not included in the adjusted total.
  
2. The age of 62 is significant because it is the age at which a person is deemed to be "Elderly" by HUD's definition. (HUD also places handicapped and disabled persons in the "Elderly" category. Throughout this paper however, we use "Elderly" to describe only persons who are 62 or older).
  
3. At or about the age of 75 many people may experience the onset of frailty, according to Department of Health, Education and Welfare Publication #OHDS-79-20959, "Public Policy and the Frail Elderly". In the publication, frailty is defined as "... the reduction of physical and emotional capabilities and loss of a social support system to the extent that the individual becomes unable to maintain a household or social contacts without assistance from others".  
  
1,010 hi-rise residents are 75 years old or older.
  
4. The PHA is restricted to housing no more than 90 Single Persons at any given time. Single Person residents are low-income, but do not meet age or handicap/disability eligibility criteria. Single Persons are housed, generally, in efficiency apartments (no separate bedroom) because the PHA has difficulty in renting these apartments to the Elderly, Handicapped or Disabled.

TABLE 2  
 HI-RISE WAITING LIST DEMOGRAPHICS  
 JUNE 30, 1991

	<u>NUMBER</u>	<u>PERCENTAGE</u>
APPLICANTS ON WAITING LIST (Note 1)	321	100.0
APPLICANTS BY AGE		
Under 62 (Note 2)	192	59.8
Near Elderly (55 to 61)	44	13.7
62 and Older (Note 2)	129	40.2
Young Elderly (62 to 69)	55	17.1
Mid Elderly (70 to 79)	49	15.3
Old Elderly (80+)	25	7.8
AVERAGE AGE OF ELDERLY APPLICANTS	73	
AVERAGE ANNUAL INCOME OF APPLICANTS (Note 5)	\$5,899 which is approximately 17.5 percent of the median income for the Twin Cities SMSA.	

NOTES TO TABLE 2, HI-RISE WAITING LIST DEMOGRAPHICS

1. The total number of Applicants on the Waiting List represents those people who have applied and have been determined to be eligible by income only. When an Applicant's name nears the top of the waiting list, the process of assessing the Applicant's eligibility according to the PHA's non-economic eligibility criteria is completed. Depending on the outcome of the assessment, the Applicant may or may not be admitted.  
  
 Single Person Applicants are not included in the Waiting List Total. As of July 19, 1991 there were a total of 294 Single Person Applicants.
2. While the ratio of Elderly residents compared to Non-elderly residents in the hi-rises is about 2.5 to 1, the ratio of Elderly Applicants compared to Non-elderly Applicants is closer to .67 to 1. This indicates the need to increase services to the younger disabled population.
3. It is important to point out that the average annual income of applicants (\$5,899) and residents (\$7,367) is extremely low especially when compared with the HUD's/PHA's Annual Income Limit. For one person is \$26,600, which represents 80% of the median income for the Twin Cities Metropolitan Area. (The income limits usually are adjusted annually, upon notification from HUD.) The federally defined "poverty line" for a one-person household is \$5,520 (2-20-90 Federal Register).

TABLE 3  
CURRENT HI-RISE RESIDENT DEMOGRAPHICS  
COMPARED TO 1988

	1991		1988	
	<u>NUMBER</u>	<u>PERCENTAGE</u>	<u>NUMBER</u>	<u>PERCENTAGE</u>
HI-RISE RESIDENT POPULATION RESIDENTS BY AGE	2,551	100.0	2,650	100.0
Under 62	756	29.6	548	20.7
62 and Older	1,795	70.4	2,102	79.3
AVERAGE AGE OF ELDERLY RESIDENTS:	77		75	
AVERAGE ANNUAL INCOME OF RESIDENTS:	\$7,367 (approximately 22 percent of the median income).		\$6,411 (approximately 24 percent of the median income).	

TABLE 4  
CURRENT HI-RISE WAITING LIST DEMOGRAPHICS  
COMPARED TO 1988

	1991		1988	
	<u>NUMBER</u>	<u>PERCENTAGE</u>	<u>NUMBER</u>	<u>PERCENTAGE</u>
APPLICANTS ON WAITING LIST	321	100.0	210	100.0
APPLICANTS BY AGE				
Under 62	192	59.8	85	40.5
62 and Older	129	40.2	125	59.5
AVERAGE AGE OF ELDERLY APPLICANTS:	73		72	
AVERAGE ANNUAL INCOME OF APPLICANTS:	\$5,899 (approximately 17.5 percent of the median income).		\$6,651 (approximately 25 percent of the median income).	

## LANGUAGE AND CULTURAL DIVERSITY

A wide variety of languages and cultures are represented in the hi-rise population. The residents in these groups have a language other than English as their primary language, or, in the case of some, do not speak English at all. PHA staff generally has had little difficulty in obtaining interpreter/translator services when necessary. Resources in this area include the International Institute, Jewish Family Service and the various cultural associations found in the Twin Cities and the PHA's own interpreters for Spanish and some Southeast Asian languages.

Groups represented include:

Russian	Vietnamese
Spanish	Laotian
Lebanese	Cambodian
Ethiopian	Iranian
Hmong	Filipino
Chinese	Egyptian
Korean	European Immigrants
Hearing Impaired persons using American Sign Language	

SOCIAL SERVICES IN HI-RISES

I. INFORMATION AND REFERRAL, CASE MANAGEMENT AND COUNSELING

A. NEED:

Some older frail residents and younger disabled residents are at risk of losing their apartments because multiple chronic problems make it difficult for them to meet the requirements of their lease. Functional and cognitive impairments often prevent residents from seeking, negotiating and utilizing a complicated social service system. Frequently these impairments translate into the inability to handle finances, maintain apartments or respond to health and social needs appropriately. The availability of PHA staff and staff from other agencies to help residents make the connections with appropriate social services has decreased in the last few years while service needs have increased. Linkage with suitable community resources can often prevent small problems from becoming large and overwhelming.

Case management can circumvent the need for institutional placement for an estimated 5-10% of the hi-rise population. With fragmented community services from multiple providers utilizing complex payment functions, coupled with inadequate resources, the residents' needs are frequently unmet. Case management encompasses screening, assessment, care planning, monitoring and advocacy. It is critically needed. Successful intervention with residents who have fluctuating physical and mental health conditions can be dependent upon regular monitoring so that corresponding modifications of services can be made.

Counseling is necessary for a number of residents who are unable to resolve or to cope with stresses such as loss of loved ones, adversary relationships or financial problems.

B. PROVIDERS:

1. First Call for Help
2. Family Service of Greater St. Paul (on-site)
3. Catholic Charities (on-site)
4. Jewish Family Service (on-site)
5. Ramsey County Adult Services (on-site)
6. Services To Assisted Residents (STAR) (on-site)
7. Ramsey County Mental Health (on and off-site)
8. Wilder Adult Day Care (on and off-site)
9. Case Management Services (on and off-site)
10. Mental Health Resources (on and off-site)
11. Outreach Counseling Services (on and off-site)
12. Safe Alternatives (on and off-site)

The coordinating team, consisting of PHA staff and key community providers, meets on a regular basis to identify client needs and develop service plans.

C. GAPS:

1. In spite of the fact that Ramsey County has implemented the Mental Health Act, inadequate funding means that case management services for residents with mental impairments is still extremely limited. In many cases, a continuum of care is unavailable or does not exist to the extent that it is needed.
2. Staff experiences difficulty in securing case management/social services for hi-rise residents under 62 years of age. Agencies such as Family Service of Greater St. Paul, provide on-site case management to the elderly but are not funded to serve younger residents.
3. Many agencies have restrictive eligibility requirements and/or long waiting lists and cannot serve residents when services are needed. Current waiting lists for Family Service is four to six weeks for routine referrals and two to three weeks for emergency referrals. Because of funding limitations, Family Service has had to decrease services to residents, eliminate the monitoring component and decrease participation at hi-rise coordination meetings.
4. An increasing number of residents are frail at the time they move into public housing and require case management immediately upon entering the hi-rises to access needed social services.
5. On-site assistance to help residents with the paper work related to programs such as Food Stamps, Medical Assistance, Supplemental Security Income, Veterans Administration benefits and housekeeping services is extremely limited or unavailable. The Medicare Medical Assistance Project (MMA) serves residents at Seal Hi-Rise and makes limited home visits to other hi-rises; however, it is a program staffed entirely by volunteers. The program is unable to meet the volume of needs of public housing residents.

D. RECOMMENDATIONS:

1. That Ramsey County receive the necessary funding to provide a comprehensive continuum of care to residents with mental impairments through the Minnesota Mental Health Act.
2. That on-site case management and counseling services be made more readily available to residents under 60 years of age.
3. That case management services, including case monitoring be made available to more residents of all ages.
4. That on-site assistance be made available to residents to complete forms for various services including Medical Assistance, Veterans Administration benefits and Supplemental Security Income.

II. HOMEMAKER/CHORE SERVICES

DEFINITIONS:

Chore service: Periodic inside heavy duty cleaning including wall and window washing, painting, carpet shampooing, etc.

Housekeeping services: Regularly scheduled housekeeping maintenance.

Homemaker services: Household management activities such as nutritional care, personal care, social and emotional support, home safety practices and housekeeping needs.

A. NEED:

The PHA is required by HUD to inspect apartments annually to ensure that they meet minimum housekeeping standards. This requirement helps to ensure a safe, sanitary and decent housing environment.

Many of our residents, for reasons which may include frailty, and/or physical or mental disability, are not able to meet the housekeeping standards. Residents who are unable to adequately maintain their apartments are not able to remain in public housing.

While some residents needing assistance receive help from their families or friends, many do not have this assistance available and rely on community services to meet their need.

B. PROVIDERS:

The Ramsey County Community Human Services Purchase of Service Unit provides housekeeping/homemaker services through contracted vendors at no cost to eligible clients.

The Ramsey County Community Human Services Alternative Care Program provides homemaker services through contracted vendors at no cost or on a sliding fee basis depending on client eligibility.

Two private non-profit agencies, the Amherst H. Wilder Foundation and Sisters Care, provide chore/homemaker services with fees based on income only or income and assets.

For-profit agencies offer services at market rate.

United Jewish Fund Grant provides a subsidy for housekeeping for older Jewish persons.

RAP Chore Coordination Project contracts with neighborhood community organizations responsible for coordinating local resources to provide limited indoor and outdoor home maintenance. Service availability is based on worker pools and geographical location.

The Minnesota AIDS Project and the Archdiocesan AIDS Ministry provides service for clients.

C. GAPS:

1. There is a lack of sliding fee resources for hi-rise residents who are not eligible for Title XX housekeeping and home making services because their assets exceed a \$3,000 asset ceiling.

2. The Wilder Foundation restricts Home Care services to elderly living within their geographical service area. Elderly residing in hi-rises outside those boundaries (Dunedin, Cleveland, Montreal, Seal and Iowa Hi-rises) are not eligible for Wilder's Home Care services. Waiting lists sometimes delay initiation of service.
3. Sister's Care Program, funded with Title III Funds, does not maintain a waiting list, making it difficult for new clients to secure services. Services through this vendor are limited to selected clients in selected areas.
4. The non-profit agencies that offer sliding fee scales provide services only to hi-rises in specific geographic areas of the city.
5. Service through for-profit agencies is expensive and only a few residents can afford it.
6. Most vendors contracting with Ramsey County Community Human Services limit the services to "light housekeeping". These vendors fail to provide the heavier cleaning which, if not done, jeopardizes residents' eligibility for continued occupancy in public housing (wall washing, washing windows, and thorough cleaning of appliances).
7. Communication among case managers, Public Health Nurses and PHA staff and the housekeeping providers is hampered by the fact that many different Title XX vendors may be serving clients in any one building.
8. The quality of some cleaning services is sometimes unsatisfactory. In some cases, workers do not show up for their assignments and clients go for a long time without service. The high turnover of workers employed by housekeeping vendors decreases the quality and consistency of service for residents.
9. Ramsey County Community Human Services raised the Title XX ceiling for Purchase of Service Housekeeping from \$1,500 to \$3,000, making many more residents eligible for housekeeping services through the county. However, in 1991 the county experienced funding limitations that made it necessary for the Purchase of Service Division to freeze home care services. While those services are again available to county-eligible clients, the threat of another funding crisis is being discussed. Such freezes create a hardship for clients requiring these services.

D. RECOMMENDATIONS:

1. That the County provide adequate funds for the Purchase of Services Housekeeping Program to meet the needs of low income persons requiring supportive services.
2. That the Ramsey County Community Human Services Title XX clients receive the heavy duty cleaning help needed to meet the PHA's housekeeping standards.

3. That the community support Ramsey County Community Human Service's measures developed in 1989 to monitor Title XX vendor services.
4. That chore/homemaker vendors expand service boundaries to meet the needs of residents in hi-rises in all areas of the city.
5. That funding sources such as United Way expand funding to non-profit agencies for the provision of services on a sliding fee scale basis.

### III. NUTRITION

#### A. NEED:

Good nutrition is a vital component of physical and mental well-being. Our experience has shown that when nutritional needs are not met, physical and mental deterioration frequently follow. Many PHA residents are unable or unmotivated to prepare adequate meals for themselves. This may be due to frailty, physical disability, mental disability, depression or appetite loss. The need for assistance with meals may be long or short-term.

#### B. PROVIDERS:

Several home delivered meals programs provide hot noon meals Mondays through Fridays.

The Ramsey Action Program (RAP) Senior Dining Program operates the Senior Dining program at eight PHA Hi-rises. The program provides nutritionally balanced meals and an opportunity for socialization. In addition, RAP provides two meals a day, seven days a week for the Congregate Housing Services Program at Ravoux and Valley Hi-Rise and for the Assisted Living Program participants at Ravoux and Dunedin Hi-rise.

The Union Gospel Mission, Little Brothers of the Elderly and the Salvation Army provide festive on-site and off-site holiday meals and parties for residents in many hi-rises. Meals are well attended and appreciated by the residents. Transportation is provided for residents who sign up to attend off-site parties.

#### C. GAPS:

1. The home delivered meals programs do not deliver meals on weekends and holidays. The Senior Dining Program provides a brown bag lunch for holidays but not for weekends.
2. The Senior Dining Program is not available in eight PHA Hi-rises.

#### D. RECOMMENDATIONS:

1. That the RAP Senior Dining Program provide meals on weekends.
2. That the home delivered meals programs be available on weekends and holidays.
3. That the Senior Dining Program be expanded to serve more PHA hi-rises.

IV. MEDICAL/HOME HEALTH AID/PUBLIC HEALTH

A. NEED:

Many of the PHA's residents are frail, or have physical or mental disabilities. They need health services such as assessments, health supervision, health education, assistance with managing long-term illness (both physical and mental), post-hospital care, monitoring of medications and foot care. Many PHA residents are unable to go off-site to receive these services. In addition, some of our more frail or disabled residents require assistance with personal care, such as bathing and hair care.

B. PROVIDERS:

Ramsey County Public Health Nursing Service provides all the above services for a sliding fee. Medicare, Medical Assistance (Medicaid), Alternative Care funds and health insurance may cover some services. Block Nurse programs operate in three PHA hi-rises: Seal, Front and Cleveland.

Private home health care agencies, such as Upjohn Health Care Services and Integrated Home Care, also provide the above services, usually after a resident is discharged from a hospital. They charge full fee for service but Medicare, Medical Assistance (Medicaid) or Alternative Care funds may be used to cover all or part of the cost.

"Mini-Clinics" are currently located in 12 of the 16 hi-rises.

<u>Hi-Rises</u>	<u>Clinic</u>	<u>Frequency</u>
Neill	Model Cities (Blood pressure)	Once per month
Montreal	Lexington Health Care (Blood pressure and education)	Twice per month
Hamline	Lexington Health Care (Blood pressure and education)	Twice per month
Exchange	Wilder Senior Clinic (Blood pressure and education)	Once per month
Ravoux	Wilder Senior Clinic (Blood pressure and education)	Once per month
Front	Block Nurse Program (Blood pressure and education)	Twice per month
Cleveland	Block Nurse Program (Blood pressure)	Once per month
Iowa	Volunteer Nurse (Blood pressure)	Once per month
Wilson	Dayton's Bluff Health Care Center (Blood pressure)	Twice per month

Seal	University of Minnesota Hospital: Blood pressure medication review, health promotion, referrals, nurse home visits on request	Weekly
Dunedin	West Side Clinic physician and nurse provide: blood pressure checks, physical exams, weight checks, flu shots. Other clinic services include lab for PAP smears, blood and urine. Home visits on clinic days also provided.	Weekly
Edgerton	Family Physicians Health Center Clinic. Two physicians and nurse provide examinations, EKGs, PAP smears and flu shots. Lab provided for blood and urine. Residents see physicians by appointments or walk-ins.	Three half days weekly

C. GAPS:

1. Private home health care agencies usually find it necessary to discontinue services when Medicare benefits stop. Frequently, clients requiring essential assistance are not referred to other on-going services or referring agency that can make such a referral on the client's behalf.
2. Most hi-rise clinics are not able to offer health assessment, home visits, physician referrals and follow-up, medication reviews, and flu shots. Clinic hours are limited.
3. The Block Nurse programs are restricted to serving residents 65 years of age or older and are currently limited to providing services in three PHA hi-rise neighborhoods.
4. Some clinic nurses do not attend monthly coordinating meetings at which time cases are discussed and reviewed and appropriate referrals are made.
5. Many residents who belong to health care plans such as MEDICA have been denied needed services that are available to elderly in other plans, such as Ramsey Care, Group Health, Seniors Plus and the MOD (Outpatient) Clinic at United Hospital.
6. Blood pressure clinics are not offered in Wabasha, Valley, Mt. Airy and Central Hi-Rises.

D. RECOMMENDATIONS:

1. That private home health care agencies inform PHA staff when they discontinue services to PHA residents.

2. That health maintenance organizations provide optional coverage for home health care services that are not reimbursable by Medicare.
3. That hi-rise clinics increase the frequency and scope of their services. That more private clinics provide on-site clinical services using the Edgerton, Seal or Dunedin clinics as models.
4. That the Block Nurse programs be funded to expand their program to additional PHA hi-rise neighborhoods.
5. That health care plans, such as MEDICA, provide the same services to their clients that other seniors on Medicare or Medical Assistance (Medicaid) can obtain.
6. That community agencies or health care organizations provide nurses clinics and other outreach in buildings that are currently without clinics: Central, Valley, Mt. Airy and Wabasha Hi-Rises.

V. CRISIS INTERVENTION

A. NEED:

Because of the population the PHA serves, crises occur frequently.

Types of crises include:

- Medical
- Chemical Dependency
- Psychotic episodes
- Suicides
- Physical, emotional, sexual abuse
- Neglect
- Disturbances

Because these crises occur on PHA property and often involve other residents, PHA staff is on the scene early to assess the need and attempt to get community resources to assist the resident(s). At times these services are not readily available on-site.

B. PROVIDERS:

Ramsey County Community Human Services contracts with mental health organizations that provide crisis intervention for their clients. Other organizations providing crisis intervention include: Ramsey County Public Health Nursing Services, Senior Chemical Dependency Program, Police, Paramedics, Family Service of Greater St. Paul, Catholic Charities, Jewish Family Services, Safe Alternatives and YES/NEON.

C. GAPS:

1. Agencies that provide case management are often unavailable to intervene quickly in their client's crisis.
2. Generally speaking, agencies do not want to take on a new client in a crisis.
3. Because of Diagnostic Review Guidelines (DRGs), most hospitals are discharging patients more quickly and necessary follow-up services may not have been arranged.
4. Some home health care agencies stop serving clients when Medicare funds run out. These clients may not be referred for other appropriate services. This can result in medical emergencies.
5. Staff in most agencies are not available after regular daytime working hours.

D. RECOMMENDATIONS:

1. That agencies provide on-site crisis intervention for their current clients.
2. That agencies, such as Mental Health Resources, provide on-site crisis intervention services for former clients and do follow-up if appropriate.
3. That agencies with expertise in working with clients with mental disabilities take on new clients in crisis.
4. That Ramsey County fund a model like YES/NEON to serve PHA populations that have diagnosis such as MR, Developmental Disabilities, Chemical Dependency and other frailties.

VI. CHEMICAL DEPENDENCY

A. NEED:

Residents who misuse alcohol or other chemicals often have problems complying with their dwelling lease. These problems may include neighbor disturbances, jeopardizing the safety of themselves or others, property damage and/or poor housekeeping. The chemically dependent person often does not recognize the problem. Therefore, on-site intervention is necessary.

B. PROVIDERS:

The Senior Chemical Dependency Program and Catholic Charities provide on-site intervention and counseling for public housing residents and transportation to AA meetings. AA meetings are held weekly at Dunedin, Edgerton and Exchange Hi-Rises.

C. GAPS:

1. There is very limited on-site intervention and counseling for the younger handicapped and disabled residents.
2. Senior Chemical Dependency's office located in Maplewood makes staff less accessible to residents due to travel time. Some hi-rises have a higher population of residents requiring on-site chemical dependency intervention.

D. RECOMMENDATIONS:

1. That agencies in addition to Senior Chemical Dependency Program and Catholic Charities which have chemical dependency programs provide on-site interventions with their clients.
2. That agencies with chemical dependency programs accept referrals for younger handicapped and disabled residents that need immediate on-site intervention or ongoing support services.
3. That PHA provide office space for the Senior Chemical Dependency Program in the hi-rises to increase availability of on-site monitoring and support services for chemically dependent residents.
4. That AA groups be expanded to more hi-rises as needed.

## VII. OTHER SERVICES

There are a number of other services, that while not so basic as those discussed above, are essential to the quality of life for hi-rise residents. These services, which include Transportation, Legal, Recreation and Safety/Security will be discussed on the following pages.

### 1. TRANSPORTATION:

#### A. NEED:

Many hi-rise residents, for reasons including frailty and physical and/or mental disability, are unable to ride buses. Most cannot afford cab fare. Family and friends provide necessary transportation to medical appointments and shopping for some residents. Others must rely on community services.

#### B. PROVIDERS:

A variety of organizations provide transportation for seniors and/or the handicapped to medical appointments for a donation or a reasonable fee. These organizations include the Red Cross, Amherst H. Wilder Foundation, Ramsey Action Programs, Spanish Speaking Seniors, Ramsey County Community Human Services, the Trinity Foundation and Metro Mobility. A variety of grocery stores provide free bus transportation for shopping. K-Mart now offers bus service to their stores to a number of hi-rises on a monthly basis. The Red Cross offers coordinated transportation services.

#### C. GAPS:

There are few transportation services available for recreational activities. There are limited resources for transportation for shopping other than grocery shopping. Transportation is generally not available with less than a 24 hour request to the transportation providers.

#### D. RECOMMENDATIONS:

1. That more stores and shopping malls provide buses to and from the hi-rises. That transportation on short notice be made available for acute non-emergency medical situations.
2. That PHA staff continue to be involved on the Ramsey County Transportation Advisory Board to ensure that PHA residents have knowledge of services and eligibility requirements.

### 2. LEGAL:

#### A. NEED:

Occasionally, residents need advice and/or representation in non-criminal legal matters, such as wills and government benefits. Most of the residents are unable to afford the services of an attorney. Many are unable to seek out legal resources. They need on-site legal advice and information available on a regular basis.

#### B. PROVIDERS:

Senior Law Project - provides free advice and representation for persons over 60.

Southern Minnesota Regional Legal Services - provides free advice and representation for low-income persons.

Legal Advocates For the Blind - provides legal representation for blind or visually handicapped persons whose legal problems are related to their visual handicap.

Minnesota Civil Liberties Union - provides free legal counsel for cases that involve claims of civil liberties violations.

Centro-Legal - provides legal services on a sliding fee basis to low-income bilingual (Spanish/English) persons.

Minnesota Mental Health Law Project - provides advice and representation for the mentally ill.

Minnesota AIDS Project Legal Project - provides legal assistance to persons who are HIV+ or have ARC/AIDS.

C. GAPS:

There are no on-site legal services available on a regular basis.

D. RECOMMENDATIONS:

That providers make a legal professional available to hold regular office hours in each hi-rise on a periodic basis.

3. RECREATION:

A. NEED:

Socialization is important in maintaining one's health. Recreation encourages socialization, which can reduce isolation and depression. It is important to have recreational activities on-site, as it helps build a sense of community. Many residents are unable to participate in recreational activities located outside the hi-rise.

B. PROVIDERS:

Most recreational activities in the hi-rises are organized by the Resident Councils.

There are off-site community recreational activities available, through local community programs such as senior centers, St. Paul Special Programs section of the St. Paul Division of Parks and Recreation and St. Paul Schools Community Education.

Adopt-a-Hi-Rise programs provide periodic social events for residents in 13 hi-rises. These programs have had a positive impact in the buildings and activities are well attended.

St. Paul Schools Community Education Program provides intergenerational programs at Edgerton and Valley Hi-Rises.

C. GAPS:

Some hi-rises have very active Resident Councils and others do not. For those hi-rises which do not or cannot organize activities for themselves, there are few resources available to develop and coordinate recreation programs.

D. RECOMMENDATIONS

That the Adopt-a-Hi-Rise Program be expanded to include all PHA hi-rises. That local community organizations provide more outreach and/or direct recreational activities in the hi-rises as needed. That the possibility of locating a multi-purpose senior center in or adjacent to a hi-rise be considered.

That the St. Paul Schools, St. Paul Parks and Recreation and St. Paul Community Centers play a greater role in providing recreational activities in the hi-rises.

That St. Paul Community Centers and the hi-rises develop a closer connection. That staff from the Community Centers attend Resident Council meetings to inform residents of upcoming activities and to plan activities with the residents. That PHA residents be encouraged to participate on Community Center Boards and committees.

That a downtown Senior Center be opened for residents to meet and interact with each other.

That the Adopt-a-Hi-Rise Programs form partnerships with Girl/Boy Scout troops and other youth groups to provide intergenerational opportunities for the youth and the hi-rise residents. It would be particularly beneficial if the Scout troops or groups include children residing in the public housing developments.

4. SAFETY/SECURITY ISSUES IN THE HI-RISES:

A. NEED:

Residents are concerned about personal safety and security issues within their buildings as well as in their immediate neighborhoods. They are also very concerned about vandalism in their parking lots. Vandalism to their automobiles causes great financial and psychological burdens to them.

B. PROVIDERS:

St. Paul Police, Neighborhood Crime Watch Clubs, District Councils.

C. GAPS:

Police are not able to respond to calls regarding evening break-ins in time to catch vandals.

Some hi-rise parking lots are more accessible to thieves and vandals.

In many cases, hi-rise councils and neighborhood communities are not communicating and collaborating to solve these problems.

D. RECOMMENDATIONS:

1. That police officers make frequent stops at hi-rise offices and parking lots to make their presence visible to the public.
2. That residents be encouraged to actively coordinate with neighborhood efforts to address crime problems. That residents form block clubs in the hi-rises and become active on District Councils.
3. That District Councils focus on hi-rise issues and regularly attend council meetings.

VIII. SPECIAL HOUSING/SUPPORTIVE SERVICES PROGRAMS IN THE HI-RISES

The profile of the hi-rise resident population appears to have changed over the past ten years from one which was predominantly age 62 and over to one where a significant portion of the population is made up of younger handicapped and disabled persons. In addition, the senior citizen population is apparently older and more frail than previously.

It appears that these trends will continue in the foreseeable future. As noted earlier in this report, the average age of persons age 62 and over on the PHA waiting list for hi-rises is 73. In addition, 59.8% of the waiting list is comprised of younger, handicapped/disabled individuals. If these people are to be admitted to the hi-rises and are to successfully remain in occupancy, increased services will be needed.

In recent years, the following special programs have been developed to assist persons who require supportive services in order to live successfully in the hi-rises.

- A. The Congregate Housing Services Program (CHSP), funded by Title IV of the Housing and Community Development Act of 1978, is administered by the PHA. The program provides service for up to 46 residents at any given time, and has served 259 participants throughout the past nine years. The program offers two daily meals, housekeeping, personal care assistance and case management services to eligible residents at the Ravoux and Valley Hi-rises. The goal of the program is to delay or prevent unnecessary institutionalization of participants by provision of an on-site package of services tailored to meet individual needs. Participants pay for services on a sliding fee scale. The program is made possible through the pooling of a number of resources including HUD CHSP subsidies, Title III-B Ramsey Action Program Senior Nutrition dollars and Ramsey County Community Human Service Title XX and Alternative Care funds. Program guidance is provided by a Professional Assessment Committee comprised of members from public and private agencies, along with PHA resident input.
- B. The Assisted Living Program (ALP), administered by the Amherst H. Wilder Foundation, offers three daily meals, monitoring of the self administration of medications, 24 hour emergency response assistance, housekeeping, personal care assistance, case management and adult day care services for up to 35 elderly participants at Ravoux and Dunedin Hi-Rises. The program is open to older people who require assistance to live in an apartment, but don't need 24 hour nursing care.  
  
The Assisted Living Program, a collaborative effort between the PHA, the Wilder Foundation and Ramsey County Community Human Services, was designed by a community wide committee to fill a gap that existed between the level of services available in the CHSP and nursing care centers. The ALP also utilizes the Professional Assessment Committee to assess program applicants.
- C. The Supportive Apartment Living Treatment (SALT) Program, administered by the Saint Paul Ramsey Medical Center Commission at Central Hi-rise provides direct support services for up to 17 hearing impaired individuals who also experience mental or emotional disabilities.

A full time project director and two part-time case workers provide the services which permit the participants to live successfully in their own apartments.

- D. The Accessible Space Program (ASI) administers New Beginnings for Brain Injured (NBBI) programs for 32 clients at Montreal, Mt. Airy and Neill Hi-Rises. ASI also operates a Mobility Impaired program for six persons at Hamline Hi-Rise. A program will soon be implemented by ASI at Valley Hi-Rise in collaboration with the Diabetes House for eight clients with diabetes related impairments.
- E. The Safe Alternatives Program is operated by the Safe House Program through the Department of Psychiatry, Ramsey Clinic Associates. Safe Alternatives staff serves adults with a diagnosis of chronic mental illness. Services include comprehensive case management and crises response. Safe Alternatives serves residents in various hi-rises.
- F. The Services to Assisted Residents (STAR) Program located at 10 W. Exchange and 545 Wabasha received Community Resource Program funding appropriated through the 1991 Legislature. The PHA collaborated with the Westminster Corp. to apply for these funds. Staff, supervised by Westminster Corp., provides case management to residents under 62 years of age in 10 W. Exchange and Wabasha Hi-rises.

These programs, of course, affect a relatively small number of the hi-rise residents but the PHA considers them significant. We hope that other innovative programs will be implemented in the future and that the established programs will expand to serve residents' needs at other sites.

#### CONCLUSION

The St. Paul community has a long standing tradition of working cooperatively to meet the needs to residents of the community, as is attested to by the many valuable services currently being provided to public housing residents by St. Paul and Ramsey County service agencies. The staff of the Public Housing Agency of the City of Saint Paul salute the agencies and organizations within the City and County who provide these valuable services to PHA residents. It is our hope that the community planners and the social service providers will endeavor to fulfill the service needs identified in this paper. The PHA can and will continue to provide decent housing for low income individuals and families, but it requires the professional skills of many other agencies to help those residents who require assistance.

IX. INDIVIDUAL HI-RISE SOCIAL SERVICE PLANS

LIST OF RECOMMENDATIONS COMMON TO ALL 16 HI-RISES

1. That senior dining sites be expanded to more hi-rises. Eight hi-rises are currently being served.  
RESOURCE: RAMSEY ACTION PROGRAM SENIOR DINING
2. That mini-clinics be developed in all buildings. Currently clinics operate in 12 of the 16 hi-rises. Clinics are needed in Mt. Airy, Valley, Central and Wabasha.  
RESOURCE: HEALTH AGENCIES AND ORGANIZATIONS
3. That educational programs be offered in hi-rises on subjects such as acceptance of differences, disabilities, personal safety/security issues, medications, alcohol and drug abuse.  
RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION PROGRAM, HEALTH AGENCIES, ST. PAUL POLICE DEPARTMENT, DEFENSIVE PERSONAL SAFETY PROGRAMS, SENIOR CHEMICAL DEPENDENCY PROGRAM
4. That intergenerational activities and programs be offered in the hi-rises.  
RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL COMMUNITY CENTERS, ST. PAUL PARKS AND RECREATION, RESIDENT COUNCILS, PHA FAMILIES, PHA EMPLOYEES
5. That more on-site case management be provided for the increasing frail elderly population.  
RESOURCE: RAMSEY COUNTY COMMUNITY HUMAN SERVICES, UNITED WAY AGENCIES, FAMILY SERVICES OF GREATER ST. PAUL
6. That more on-site case management be provided for the younger residents with disabilities.  
RESOURCE: RAMSEY COUNTY COMMUNITY HUMAN SERVICES, UNITED WAY AGENCIES
7. That beauty/barber services be available in all of the buildings.  
RESOURCE: PRIVATE VENDORS, RESIDENT COUNCILS
8. That craft programs facilitated by non-resident volunteers be provided.  
RESOURCE: ST. PAUL PARKS AND RECREATION, ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL COMMUNITY CENTERS
9. That CHSP programs are developed in additional hi-rises.  
RESOURCE: PHA, HUD, STATE, COUNTY

10. That Library Bookmobiles visit all buildings. That large-print books are more accessible. That residents are made more aware of library services.

RESOURCE: ST. PAUL LIBRARY

11. That mini-stores be developed in hi-rises. That fresh produce be delivered to the hi-rises at least monthly.

RESOURCE: PRIVATE VENDORS, FARMERS MARKET

12. That resident councils develop regularly published newsletters.

RESOURCE: RESIDENT COUNCILS, PHA, ADOPT A HI-RISE

13. That support groups be developed for younger residents.

RESOURCE: AGENCIES PROVIDING SERVICES FOR MENTALLY ILL RESIDENTS

14. That staff trained in chemical dependency be provided on site.

RESOURCE: SENIOR CHEMICAL DEPENDENCY PROGRAM, PHA

15. That security be addressed in all hi-rises. That phones be available in lobbies with direct lines to police. That counseling be available to help residents deal with fears and intimidation.

RESOURCE: RESIDENT COUNCILS, PHA, ST. PAUL POLICE, CRIME VICTIMS CENTER

SOCIAL SERVICES PLAN  
MT. AIRY, 200 E. ARCH STREET

I. BUILDING DEMOGRAPHICS

NUMBER OF UNITS - 169

NUMBER OF RESIDENTS ACCORDING TO AGE GROUPS

0-61	62-70	71-75	76-80	81-85	86+
79	44	24	26	13	7

II. CURRENT SERVICES AVAILABLE	PROVIDER	FREQUENCY
Case management	Family Services	By referral
Grocery bus	Private vendor	Weekly
Milk delivery	Private vendor	Weekly
Commodities distribution	RAP	Quarterly
Adopt-a-Hi-Rise	U.S. West	Periodically
Religious services	Local churches	Weekly
Parcel delivery/Postal Van	Post Office	Daily/Weekly
Food Stamp Recertification	Ramsey County	Monthly
Accessible Space Program	ASI	Ongoing
Flea market	Private vendor	Monthly
Bookmobile	St. Paul Library	Monthly
Shopping bus	K-Mart	Monthly

III. IDENTIFIED SERVICE GAPS

Beauty/barber shop  
 English-as-a-Second-Language (ESL)  
 Mini-clinic  
 Chemical dependency programs, 12-Step groups  
 Vietnamese, Cambodian, and Hmong women's support group  
 Entertainment  
 Safety/security, phone in lobby  
 Senior Dining Program  
 Crafts  
 Outdoor recreation, benches, picnic tables  
 Transportation  
 Furniture in community room

IV. RECOMMENDATIONS

1. That a beautician/barber shop operate in the building.

RESOURCE: RESIDENT COUNCIL, PRIVATE VENDOR

2. That ESL classes be made available to S. E. Asian residents and other cultural groups as needed.

RESOURCE: WAHL, ST. PAUL SCHOOLS ADULT EDUCATION, LAO FAMILY

3. That a mini-clinic be offered on a regular basis.

RESOURCE: HEALTH ORGANIZATIONS

4. That chemical dependency staff hold regular office hours in Mt. Airy. That chemical dependency workshops be offered on subjects such as medications and alcohol. That a 12-step program be initiated in the hi-rise.

RESOURCE: SENIOR CHEMICAL DEPENDENCY PROGRAM

5. That support groups be established for the Vietnamese, Cambodian and Hmong elderly living in the building.

RESOURCE: WOMEN'S ASSOCIATION OF HMONG AND LAO, WILDER SOCIAL ADJUSTMENT PROGRAM, VIETNAMESE SOCIAL SERVICES OF MINNESOTA

6. That increased activities/entertainment/recreational opportunities be provided for residents including horseshoe, pot-luck dinners.

RESOURCE: ST. PAUL PARKS AND RECREATION, ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL COMMUNITY CENTERS, RESIDENT COUNCIL

7. That residents get involved in safety/security issues. That a phone be located in the hi-rise lobby.

RESOURCE: DISTRICT COUNCIL, ST. PAUL POLICE, RESIDENT COUNCIL, PHA

8. That a RAP Senior Dining Program be located at the hi-rise.

RESOURCE: RAP SENIOR DINING PROGRAM, RESIDENT COUNCIL

9. That a permanent craft room be designated and that craft classes be offered on a regular basis.

RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, WOMEN'S ASSOCIATION OF HMONG AND LAO, PHA

10. That benches and picnic tables be provided. That outdoor activities be provided.

RESOURCE: PHA, RESIDENT COUNCIL, U.S. WEST

11. That buses transport residents to grocery and department stores.

RESOURCE: PRIVATE VENDORS/K-MART, TARGET

12. That furniture in community spaces be provided that is easier for residents to get out of.

RESOURCE: PHA

SOCIAL SERVICES PLAN  
CENTRAL HI-RISE, 554 CENTRAL AVENUE

I. BUILDING DEMOGRAPHICS

NUMBER OF UNITS - 139

NUMBER OF RESIDENTS ACCORDING TO AGE GROUPS

0-61	62-70	71-75	76-80	81-85	86+
83	16	11	8	3	7

II. CURRENT SERVICES AVAILABLE	PROVIDER	FREQUENCY
Case management	Family Services	By referral
Grocery bus	Private vendor	Weekly
Milk delivery	Private vendor	Weekly
Commodities distribution	RAP	Quarterly
Supportive Apartment Living	Ramsey Hospital	Ongoing
Religious services	Local churches	Weekly
Parcel delivery/Postal van	Post Office	Daily/Weekly
Food Stamp Recertification	Ramsey County	Monthly
SALT Program	Ramsey Medical Cntr	Ongoing
Flea market	Private Vendor	Monthly
Senior Center Accessible	Martin Luther King	Ongoing
Watkins	Private Vendor	Bi-monthly
Adopt-a-Hi-Rise	Miller-Schroeder Financial, Inc.	Periodically

III. IDENTIFIED SERVICE GAPS

Beauty/barber shop  
Educational programs  
Mini-clinic  
Social participation plan  
Craft classes  
Security, community involvement, lobby desk  
Library Bookmobile  
Support groups  
Chemical dependency staff  
Transportation to shopping  
Mini-gardens

IV. RECOMMENDATIONS

1. That a mini-clinic be provided on a regular basis.

RESOURCE: MODEL CITIES, HEALTH CARE AGENCIES

2. That a plan for residents' participation in social activities be developed for the hi-rise.

RESOURCE: RESIDENT COUNCIL

3. That craft classes be provided on a regular basis.  
RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL PARKS AND RECREATION, VOLUNTEERS, CHURCHES, ST. PAUL COMMUNITY CENTERS
4. That mini-gardens be developed.  
RESOURCE: PHA, RESIDENT COUNCIL
5. That transportation be provided for shopping.  
RESOURCE: TARGET, K-MART, PRIVATE FOUNDATIONS
6. That security/vandalism issues be addressed. That a lobby desk be installed for security.  
RESOURCE: RESIDENT COUNCIL, VOLUNTEERS, ST. PAUL POLICE, DISTRICT COUNCIL, PHA
7. That the library Bookmobile provide services on a regular basis.  
RESOURCE: ST. PAUL LIBRARY, RESIDENT COUNCIL
8. That support groups be provided to address residents' needs.  
RESOURCE: SOCIAL SERVICE AGENCIES, CHURCHES
9. That chemical-dependency staff provide services in on-site office space.  
RESOURCE: PHA, SENIOR CHEMICAL DEPENDENCY PROGRAM
10. That a beauty/barber salon be provided.  
RESOURCE: RESIDENT COUNCIL, PRIVATE VENDOR

SOCIAL SERVICES PLAN  
VALLEY HI-RISE, 216 E. UNIVERSITY AVENUE

I. BUILDING DEMOGRAPHICS

NUMBER OF UNITS - 130

NUMBER OF RESIDENTS ACCORDING TO AGE GROUPS

0-61	62-70	71-75	76-80	81-85	86+
37	27	20	20	14	14

II. CURRENT SERVICES AVAILABLE	PROVIDER	FREQUENCY
Case management	Family Service	By referral
Senior Dining	RAP	Lunch M-F
Grocery bus	Private vendor	Weekly
Milk delivery	Private vendor	Weekly
Congregate Housing Services	PHA	Daily
Religious services	Local churches	Weekly
Food Stamp Recertification	Ramsey County	Monthly
Podiatry services	Private physician	Bi-monthly
Flea market	Private vendor	Monthly
Bookmobile	St. Paul Library	Bi-Monthly
Produce man, grocery, dairy	Private vendor	Weekly
Beauty/barber salon	Private vendor	Weekly
Parcel delivery/Postal van	Post Office	Daily/Weekly
Commodities distribution	RAP	Quarterly

III. IDENTIFIED SERVICE GAPS

Health education groups: depression, grief, arthritis  
Mini-clinic  
Craft group  
Adopt-a-Hi-Rise  
Exercise groups

IV. RECOMMENDATIONS

1. That the hi-rise be adopted by an organization in the Adopt-a-Hi-Rise Program.

RESOURCE: PHA/LOCAL ORGANIZATIONS

2. That a craft group/class be offered regularly.

RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL PARKS AND RECREATION, ST. PAUL COMMUNITY CENTERS, CHURCHES, VOLUNTEERS

3. That exercise programs led by a professional be provided.

RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL PARKS AND RECREATION, ST. PAUL COMMUNITY CENTERS, CHURCHES, VOLUNTEERS, HEALTH ORGANIZATIONS

4. That health education be provided to address grief, depression, and common gerontologically related diseases and symptoms.

RESOURCE: HEALTH ORGANIZATIONS

5. That a downtown Senior Center be developed.

RESOURCE: CITY OF ST. PAUL, DOWNTOWN COUNCIL

6. That a mini-clinic be initiated.

RESOURCE: HEALTH CARE ORGANIZATIONS

SOCIAL SERVICES PLAN  
NEILL HI-RISE, 325 LAUREL AVENUE

I. BUILDING DEMOGRAPHICS

NUMBER OF UNITS - 102

NUMBER OF RESIDENTS ACCORDING TO AGE GROUPS

0-61	62-70	71-75	76-80	81-85	86+
30	20	6	10	7	2

II. CURRENT SERVICES AVAILABLE	PROVIDER	FREQUENCY
Beauty/barber services	Private vendor	Weekly
Bookmobile	St. Paul Library	Weekly
Grocery bus	Private vendor	Weekly
Health care clinic	Model Cities	Monthly
Bus to Cathedral	Cathedral	Sundays
Shopping bus	K-Mart	Weekly
Milk delivery	Private vendor	Weekly
Commodities distribution	RAP	Quarterly
Religious services	Local churches	Weekly
Postal Van	Post Office	Weekly
Food Stamp Recertification	Ramsey County	Monthly
Podiatry service	Private physician	Bi-monthly
Flea market	Private vendor	Weekly
Senior Center Accessible Watkins	Martin Luther King	Ongoing
Accessible Space Program	Private vendor	Weekly
Adopt-a-Hi-Rise	ASI	Ongoing
	Digital Equipment Corp.	Periodically

III. IDENTIFIED SERVICE GAPS

Craft classes  
Support groups  
Social activity coordinator  
Books for Community Room Library  
Outreach from Martin Luther King Center  
Crime Watch Program  
Cards/bingo games  
FRIENDS Program  
Health Outreach program

IV. RECOMMENDATIONS

1. That craft classes/groups be offered.

RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL PARKS AND RECREATION, VOLUNTEERS, CHURCHES, ST. PAUL COMMUNITY CENTERS

2. That a social activity coordinator be provided for the hi-rise.

RESOURCE: COMMUNITY CENTER, PRIVATE FOUNDATION

3. That the residents develop support groups organized on topics relevant to the residents.

RESOURCE: SOCIAL SERVICE AGENCIES, CHURCHES, VOLUNTEERS

4. That a Crime Watch Program be developed in the hi-rise.

RESOURCE: ST. PAUL POLICE DEPARTMENT, DISTRICT COUNCIL

5. That card and bingo games be initiated.

RESOURCE: RESIDENT COUNCIL

6. That the FRIENDS program be offered to eligible residents.

RESOURCE: MENTAL HEALTH RESOURCES

7. That a Health Outreach program be provided in the building.

RESOURCE: HEALTH ORGANIZATIONS, MODEL CITIES

8. That a fitness/exercise group be initiated.

RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL PARKS AND RECREATION, HEALTH ORGANIZATIONS

9. That books be provided for the Community Room library.

RESOURCE: RESIDENT COUNCIL, ST. PAUL LIBRARY, VOLUNTEER ORGANIZATIONS, PHA EMPLOYEES

SOCIAL SERVICES PLAN  
DUNEDIN HI-RISE, 469 ADA STREET

I. BUILDING DEMOGRAPHICS

NUMBER OF UNITS - 142

NUMBER OF RESIDENTS ACCORDING TO AGE GROUPS

0-61	62-70	71-75	76-80	81-85	86+
41	25	16	24	21	13

II. CURRENT SERVICES AVAILABLE	PROVIDER	FREQUENCY
Case management	Family Service	By referral
Adopt-a-Hi-Rise	Norwest (W.St.Paul)	Periodically
Senior Dining	RAP	Lunch M-F
Assisted Living Program	Wilder Foundation	Ongoing
Beauty shop	Private vendor	Weekly
Mini-clinic	West Side Clinic	Weekly
Bookmobile	St. Paul Library	Weekly
Grocery bus	Private vendor	Weekly
12 Step Program	Senior Chem.Depend.	Weekly
Community center nearby	Neighborhood House	Ongoing
Religious services	Local churches	Weekly
Parcel delivery/Postal van	Post Office	Daily/Weekly
Food Stamp Recertification	Ramsey County	Monthly
Podiatry service	Private physician	Bi-monthly
Commodities distribution	RAP	Quarterly

III. IDENTIFIED SERVICE GAPS

Craft leader for classes  
Fitness/exercise groups  
Hearing screening  
ESL classes  
Transportation  
Entertainment opportunities

IV. RECOMMENDATIONS

1. That hearing screening be provided periodically.

RESOURCE: WEST SIDE CLINIC, OTHER HEALTH CARE ORGANIZATIONS

2. That ESL classes be provided for Spanish speaking residents and for other cultural groups as needed.

RESOURCE: LITERACY COUNCIL, VOLUNTEERS

3. That craft classes/groups be offered.

RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, NEIGHBORHOOD HOUSE, RESIDENT COUNCIL, VOLUNTEERS

4. That exercise classes be provided to residents.

RESOURCE: RESIDENT COUNCIL, NEIGHBORHOOD HOUSE, NORWEST BANKS,  
HEALTH CARE ORGANIZATIONS

5. That transportation services be made available to a grocery store and shopping malls.

RESOURCE: RESIDENT COUNCIL, K-MART, TARGET, GROCERY STORE

6. That entertainment opportunities be provided for such things as tickets to events and travelogues.

RESOURCE: NORWEST BANKS, VOLUNTEERS, NEIGHBORHOOD HOUSE

SOCIAL SERVICES PLAN  
CLEVELAND HI-RISE, 899 S. CLEVELAND AVENUE

I. BUILDING DEMOGRAPHICS

NUMBER OF UNITS - 143

NUMBER OF RESIDENTS ACCORDING TO AGE GROUPS

0-61	62-70	71-75	76-80	81-85	86+
25	26	27	22	21	28

II. CURRENT SERVICES AVAILABLE	PROVIDER	FREQUENCY
Case management	Jewish Fam. Service	Weekly
Adopt-a-Hi-Rise	Ford Motor Co.	Periodically
Beauty services	Private vendor	Weekly
Mini-clinic	Block Nurse Program	Weekly
Bookmobile	St. Paul Library	Bi-weekly
Grocery bus	Private vendor	Weekly
Religious services	Local churches	Weekly
Parcel delivery/Postal van	Post Office	Daily/Weekly
Food Stamp Recertification	Ramsey County	Monthly
Podiatry service	Private physician	Bi-monthly
Milk delivery	Private	Weekly
Block Nurses	Block Nurse Program	As requested
Flea market	Private vendor	Monthly
Commodities distribution	RAP	Quarterly
Exercise group	Volunteer	Weekly

III. IDENTIFIED SERVICE GAPS

Craft classes  
 Transportation to shopping  
 Podiatrist service more frequently  
 Educational classes on health issues  
 Security in parking lot  
 Social activities, such as cards  
 Space/environment issues: conversation areas  
 Mini-garden

IV. RECOMMENDATIONS

1. That podiatry services be offered on a monthly basis.

RESOURCE: RESIDENT COUNCIL, PODIATRIST

2. That educational programs on health topics be provided.

RESOURCE: RESIDENT COUNCIL, HEALTH CARE ORGANIZATIONS

3. That craft classes be offered.

RESOURCE: ST. PAUL SCHOOLS, VOLUNTEERS, ST. PAUL PARKS AND RECREATION

4. That a Crime Watch club be initiated and education be provided on safety issues.

RESOURCE: RESIDENT COUNCIL, DISTRICT COUNCIL, ST. PAUL POLICE

5. That additional social activities, such as cards, be provided.

RESOURCE: RESIDENT COUNCIL, FORD MOTOR CO., ST. PAUL COMMUNITY CENTERS, ST. PAUL SCHOOLS COMMUNITY EDUCATION

6. That department stores provide transportation for shopping.

RESOURCE: TARGET, K-MART

7. That conversational areas be added in community space.

RESOURCE: PHA

8. That a mini-garden be developed for residents.

RESOURCE: PHA, RESIDENT COUNCIL

SOCIAL SERVICES PLAN  
IOWA HI-RISE, 1743 E. IOWA AVENUE

I. BUILDING DEMOGRAPHICS

NUMBER OF UNITS - 147

NUMBER OF RESIDENTS ACCORDING TO AGE GROUPS

0-61	62-70	71-75	76-80	81-85	86+
27	24	20	27	32	21

II. CURRENT SERVICES AVAILABLE	PROVIDER	FREQUENCY
Case management	Family Services	On referral
Beauty services	Private vendor	Weekly
Mini-clinic	Volunteer	Monthly
Religious services	Local churches	Weekly
Parcel delivery/Postal van	Post Office	Daily/Weekly
Food Stamp Recertification	Ramsey County	Monthly
Podiatry service	Private physician	Bi-monthly
Milk delivery	Private vendor	Weekly
Flea market	Private vendor	Monthly
Commodities distribution	RAP	Quarterly

III. IDENTIFIED SERVICE GAPS

Adopt-a-Hi-Rise  
 Craft classes  
 Mini-garden  
 Fitness/exercise programs  
 Organizational assistance for the resident council  
 Mini-clinic (more service)

IV. RECOMMENDATIONS

1. That the hi-rise be adopted by an organization in the Adopt-a-Hi-Rise Program.

RESOURCE: LOCAL CORPORATIONS

2. That increased mini-clinic services be provided.

RESOURCE: HEALTH AGENCIES, BLOCK NURSE PROGRAM

3. That a mini-garden be developed.

RESOURCE: RESIDENT COUNCIL, PHA

4. That community organization/technical assistance be provided to residents to strengthen the resident council.

RESOURCE: VOLUNTEERS, PHA, COMMUNITY CENTERS, DISTRICT COUNCIL

5. That craft programs be offered to residents.

RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL PARKS AND RECREATION

6. That fitness/exercise programs be offered on a regular basis.

RESOURCE: RESIDENT COUNCIL, HEALTH ORGANIZATIONS, ST. PAUL COMMUNITY CENTERS, ST. PAUL SCHOOLS COMMUNITY EDUCATION, HOSPITALS

SOCIAL SERVICES PLAN  
WILSON HI-RISE, 1300 WILSON AVENUE

I. BUILDING DEMOGRAPHICS

NUMBER OF UNITS - 186

NUMBER OF RESIDENTS ACCORDING TO AGE GROUPS

0-61	62-70	71-75	76-80	81-85	86+
23	40	32	38	28	33

II. CURRENT SERVICES AVAILABLE	PROVIDER	FREQUENCY
Adopt-a-Hi-Rise	St. Paul Companies	Periodically
Beauty services	Private vendor	Weekly
Mini-clinic	Dayton's Bluff	Monthly
Religious services	Local churches	Weekly
Parcel delivery/Postal van	Post Office	Daily/Weekly
Food Stamp Recertification	Ramsey County	Monthly
Podiatry service	Private physician	Bi-monthly
Milk delivery	Private vendor	Weekly
Flea market	Private vendor	Monthly
Commodities distribution	RAP	Quarterly
Shopping bus	K-Mart	Monthly
Grocery bus	Private vendor	Weekly
Bookmobile	St. Paul Library	Bi-monthly
Exercise group	Volunteer	Weekly

III. IDENTIFIED SERVICE GAPS

Craft instructor/craft room  
Fitness/exercise programs  
CHSP mini-program  
Senior Dining  
Additional case management  
Lobby phone  
Increased security

IV. RECOMMENDATIONS

1. That a CHSP program be implemented for residents requiring additional support.

RESOURCE: PHA, HUD, STATE

2. That a RAP Senior Dining Program be located at the hi-rise (or transportation be provided to nearest dining site).

RESOURCE: RAMSEY ACTION PROGRAM SENIOR DINING, TRANSPORTATION PROGRAMS

3. That a craft program be offered to residents.

RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL PARKS AND RECREATION, VOLUNTEERS, CHURCHES, ST. PAUL COMMUNITY CENTERS

4. That fitness/exercise programs be offered on a regular basis.

RESOURCE: RESIDENT COUNCIL, HEALTH CLUBS, ST. PAUL COMMUNITY  
CENTERS, ST. PAUL SCHOOLS COMMUNITY EDUCATION, HOSPITALS

5. That a lobby phone be installed for resident emergencies.

RESOURCE: PHA, RESIDENT COUNCIL

6. That a Crime Watch Club be formed and security issues addressed.

RESOURCE: ST. PAUL POLICE, RESIDENT COUNCIL, PHA

SOCIAL SERVICES PLAN  
FRONT HI-RISE, 727 FRONT AVENUE

I. BUILDING DEMOGRAPHICS

NUMBER OF UNITS - 150

NUMBER OF RESIDENTS ACCORDING TO AGE GROUPS

0-61	62-70	71-75	76-80	81-85	86+
34	41	26	19	15	17

II. CURRENT SERVICES AVAILABLE

	PROVIDER	FREQUENCY
Adopt-a-Hi-Rise	Unisys	Periodically
Beauty services	Private vendor	Weekly
Mini-clinic	Block Nurse Program	Every other week
Religious services	Local churches	Weekly
Parcel delivery/Postal van	Post Office	Daily/Weekly
Food Stamp Recertification	Ramsey County	Monthly
Podiatry service	Private physician	Bi-monthly
Milk delivery	Private vendor	Weekly
Flea market	Private vendor	Monthly
Commodities distribution	RAP	Quarterly
Shopping bus	K-Mart	Monthly
Grocery bus	Private vendor	Weekly
Bookmobile	St. Paul Library	Bi-monthly
Block Nurse Program	Block Nurse	As needed
Watkins	Private vendor	Monthly
Craft group	Volunteers	Every other week
Senior Dining	RAP	Lunch M-F

III. IDENTIFIED SERVICE GAPS

- Craft group
- Fitness/exercise program (by professional)
- CHSP/ALP
- Support groups, 12-step group
- Educational programs
- Community involvement (schools, District Council)
- Accessible Senior Center
- Protestant religious service
- Mini-gardens
- Volunteers from outside for activities
- Lobby area enlarged
- Newsletter

IV. RECOMMENDATIONS

1. That fitness/exercise programs be offered on a regular basis.

RESOURCE: HEALTH CLUBS, ST. PAUL SCHOOLS, COMMUNITY EDUCATION, ST. PAUL PARKS AND RECREATION

2. That Congregate Housing Services Program and/or an Assisted Living Program be implemented for residents requiring support services.  
RESOURCE: PHA, HUD, STATE, COUNTY
3. That support and 12-Step groups be provided.  
RESOURCE: SENIOR CHEMICAL DEPENDENCY PROGRAM, SOCIAL SERVICE AGENCIES, CHURCHES, VOLUNTEERS
4. That opportunities for increased community involvement be provided.  
RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, DISTRICT COUNCILS, COMMUNITY CENTERS
5. That an accessible Senior Center be provided in the downtown area.  
RESOURCE: CITY OF ST. PAUL, DISTRICT COUNCILS
6. That Protestant religious services be offered.  
RESOURCE: LOCAL CHURCHES
7. That a mini-garden be developed.  
RESOURCE: PHA, RESIDENT COUNCIL
8. That volunteers be recruited from the community to lead and participate in activities with residents.  
RESOURCE: CHURCHES, LOCAL CLUBS
9. That the lobby area be enlarged and modified.  
RESOURCE: PHA
10. That a newsletter be published on a regular basis.  
RESOURCE: RESIDENT COUNCIL, PHA, UNISYS
11. That craft classes and groups be initiated.  
RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL PARKS AND RECREATION, VOLUNTEERS, ST. PAUL COMMUNITY CENTERS

SOCIAL SERVICES PLAN  
RAVOUX HI-RISE, 280 RAVOUX

I. BUILDING DEMOGRAPHICS

NUMBER OF UNITS - 216

NUMBER OF RESIDENTS ACCORDING TO AGE GROUPS

0-61	62-70	71-75	76-80	81-85	86+
71	43	20	25	40	23

II. CURRENT SERVICES AVAILABLE

CURRENT SERVICES AVAILABLE	PROVIDER	FREQUENCY
Adopt-a-Hi-Rise	First Banks	Periodically
Beauty services	Private vendor	Weekly
Religious services	Local churches	Weekly
Parcel delivery/Postal van	Post Office	Daily/Weekly
Food Stamp Recertification	Ramsey County	Monthly
Podiatry service	Private physician	Bi-monthly
Milk delivery	Private vendor	Weekly
Flea market	Private vendor	Monthly
Commodities distribution	RAP	Quarterly
Shopping bus	K-Mart	Monthly
Grocery bus	Private vendor	Weekly
Bookmobile	St. Paul Library	Bi-monthly
Watkins	Private vendor	Monthly
Senior Dining	RAP	Lunch M-F
CHSP	PHA	Daily
ALP	Wilder/PHA	Daily
Senior Day Care	Wilder	Daily
Exercise group	Wilder	Daily
Case management	Family Services	By referral
Produce service	Private vendor	Weekly
Mini-clinic	Health East/Wilder	Monthly

III. IDENTIFIED SERVICE GAPS

- Craft group
- Fitness/exercise program/walking group
- Dental screening
- K-Mart/Target bus with lift
- Educational programs on safety, fire, chemical dependency and diversity
- Community involvement
- Entertainment opportunities/social outings
- Crime Watch
- Trained chemical dependency counselor on site
- Mealtime social activity plan
- Lobby phone
- Newsletter
- Medical equipment repair service
- Mini-gardens

IV. RECOMMENDATIONS

1. That a mobility equipment repair service deliver services to the building.  
RESOURCE: HEALTH EAST, PRIVATE VENDOR, RESIDENT COUNCIL
2. That dental screening be provided to residents.  
RESOURCE: U OF MINN DENTISTRY, PRIVATE, HEALTH EAST, ST. PAUL RAMSEY HOSPITAL, WILDER SENIOR CLINIC
3. That craft classes be offered regularly.  
RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL PARKS AND RECREATION, VOLUNTEERS, CHURCHES, ST. PAUL COMMUNITY CENTERS, ADOPT-A-HI-RISE
4. That educational programming be offered on topics such as diversity, safety and fire, chemical dependency.  
RESOURCE: SOCIAL SERVICE AGENCIES, ST. PAUL SCHOOLS COMMUNITY EDUCATION, POLICE AND FIRE DEPARTMENTS, SENIOR CHEMICAL DEPENDENCY PROGRAM, NSP, SCORE
5. That K-Mart/Target buses be provided with lifts for residents in wheelchairs.  
RESOURCE: DEPARTMENT STORES
6. That a mini-garden be developed.  
RESOURCE: PHA, RESIDENT COUNCIL
7. That residents be provided opportunities for community involvement.  
RESOURCE: AURORA-ST. ANTHONY BLOCK CLUB, DISTRICT COUNCIL, POLICE, PARKS AND RECREATION, MARTIN LUTHER KING CENTER
8. That expanded fitness/exercise/walking programs be offered regularly to residents.  
RESOURCE: RESIDENT COUNCIL, WILDER ASSISTED LIVING PROGRAM, HEALTH ORGANIZATIONS
9. That social outings and entertainment be increased.  
RESOURCE: ADOPT-A-HI-RISE, RESIDENT COUNCIL, VOLUNTEERS
10. That a newsletter be published on a regular basis.  
RESOURCE: RESIDENT COUNCIL, VOLUNTEERS, PHA
11. That a Crime Watch Block Club be implemented and security increased.  
RESOURCE: RESIDENT COUNCIL, ST. PAUL POLICE, DISTRICT COUNCIL

SOCIAL SERVICES PLAN  
WABASHA HI-RISE, 545 N. WABASHA

I. BUILDING DEMOGRAPHICS

NUMBER OF UNITS - 74

NUMBER OF RESIDENTS ACCORDING TO AGE GROUPS

0-61	62-70	71-75	76-80	81-85	86+
33	18	6	6	2	7

II. CURRENT SERVICES AVAILABLE	PROVIDER	FREQUENCY
Adopt-a-Hi-Rise	Ins. of Real Estate	Periodically
Parcel delivery/Postal van	Post Office	Daily/Weekly
Food Stamp Recertification	Ramsey County	Monthly
Commodities distribution	RAP	Quarterly
Grocery bus	Private vendor	Weekly
Bookmobile	St. Paul Library	Bi-monthly
Case management	Family Services	By referral
Produce service	Private Vendor	Weekly
Senior Dining	RAP	Lunch M-F
STAR Program	CRP Funds	Daily

III. IDENTIFIED SERVICE GAPS

- Craft group
- Fitness group
- Educational programs
- Trained chemical dependency counselor on site
- Social activities
- Lobby desk/security/Crime Watch
- Continuation of STAR program
- Increased case management
- Barber/beauty services
- Support groups
- Mini-clinic

IV. RECOMMENDATIONS

1. That a regularly scheduled mini-clinic be provided.

RESOURCE: HEALTH ORGANIZATIONS

2. That educational programming be offered on topics of interest to residents.

RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, SOCIAL SERVICE AGENCIES

3. That beauty/barber shop be provided on-site.

RESOURCE: PRIVATE VENDOR, RESIDENT COUNCIL

4. That craft activities and classes be offered.  
RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, VOLUNTEERS, ST. PAUL COMMUNITY CENTERS
5. That a fitness/exercise program be initiated.  
RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL PARKS AND RECREATION, VOLUNTEERS, ST. PAUL COMMUNITY CENTERS, HEALTH ORGANIZATIONS
6. That support sessions be offered on topics of interest to residents.  
RESOURCE: SOCIAL SERVICE AGENCIES, VOLUNTEERS, CHURCHES
7. That the Senior Chemical Dependency staff hold office hours in the hi-rise.  
RESOURCE: SENIOR CHEMICAL DEPENDENCY PROGRAM, PHA
8. That security issues continue to be addressed and the feasibility of a lobby desk be explored.  
RESOURCE: PHA, RESIDENT COUNCIL, STAR, DISTRICT COUNCIL, ST. PAUL POLICE
9. That social activities be increased.  
RESOURCE: COMMUNITY CENTER OUTREACH, ADOPT-A-HI-RISE, ST. PAUL PARKS AND RECREATION
10. That volunteers take responsibility for the Community Room library.  
RESOURCE: RESIDENT COUNCIL, ADOPT-A-HI-RISE

SOCIAL SERVICES PLAN  
MONTREAL HI-RISE, 1085 MONTREAL

I. BUILDING DEMOGRAPHICS

NUMBER OF UNITS - 184

NUMBER OF RESIDENTS ACCORDING TO AGE GROUPS

0-61	62-70	71-75	76-80	81-85	86+
72	35	17	19	16	31

II. CURRENT SERVICES AVAILABLE	PROVIDER	FREQUENCY
Adopt-a-Hi-Rise	U.S. West	Periodically
Parcel delivery/Postal van	Post Office	Daily/Weekly
Food Stamp Recertification	Ramsey County	Monthly
Commodities distribution	RAP	Quarterly
Grocery bus	Private vendor	Weekly
Milk delivery	Private vendor	Weekly
Barber/beauty salon	Private vendor	Bi-weekly
Accessible Space	ASI	Ongoing
Religious services	Protestant	Weekly
Mini-clinic	Lexington Health	Bi-weekly
Watkins	Private vendor	Monthly
Flea market	Private vendor	Monthly
Podiatry	Private vendor	As arranged

III. IDENTIFIED SERVICE GAPS

Senior Dining Program  
 Health care education programs (medication, nutrition, exercise, self-esteem, intergenerational issues, chemical dependency)  
 Health screening (hearing, vision)  
 Case management  
 Mini-gardens  
 Craft classes  
 Exercise class led by professional  
 Congregate Housing Services Program  
 Crime education  
 Better connection with West Seventh Community Center

IV. RECOMMENDATIONS

1. That a RAP Senior Dining Program be located at the hi-rise.

RESOURCE: RAMSEY ACTION PROGRAM SENIOR DINING, RESIDENT COUNCIL

2. That craft classes be offered on a regular basis.

RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL PARKS AND RECREATION, VOLUNTEERS, CHURCHES, ST. PAUL COMMUNITY CENTERS

3. That exercise classes led by a professional be provided regularly.

RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL PARKS AND RECREATION, ST. PAUL COMMUNITY CENTERS, HEALTH ORGANIZATIONS

4. That health care education programs and health screening be provided.

RESOURCE: SOCIAL SERVICE AGENCIES, HEALTH AGENCIES

5. That mini-gardens be developed.

RESOURCE: PHA, MINNESOTA HORTICULTURAL SERVICE, RESIDENT COUNCIL

6. That a Congregate Housing Service Program be implemented on-site.

RESOURCE: PHA, STATE, HUD, COUNTY

7. That a strong relationship be formed with the West Seventh Community Center.

RESOURCE: RESIDENT COUNCIL, WEST SEVENTH COMMUNITY CENTER

SOCIAL SERVICES PLAN  
EXCHANGE HI-RISE, 10 W. EXCHANGE

I. BUILDING DEMOGRAPHICS

NUMBER OF UNITS - 190

NUMBER OF RESIDENTS ACCORDING TO AGE GROUPS

0-61	62-70	71-75	76-80	81-85	86+
72	42	19	24	19	17

II. CURRENT SERVICES AVAILABLE	PROVIDER	FREQUENCY
STAR Program	Westminster	Daily
Religious services	Catholic	Weekly
Parcel delivery/Postal van	Post Office	Daily/Weekly
Grocery bus	Private vendor	Weekly
Case management	Family Service	By referral
Senior Dining	RAP	Lunch M-F
12-Step group	Sr. Chem. Dep.	Weekly
Adopt-a-Hi-Rise	Farm Credit Service	Periodically
Bookmobile	St. Paul Library	Bi-weekly
Podiatry service	Private	Bi-monthly
Food Stamp Recertification	Ramsey County	Monthly
Milk delivery	Private	Weekly
Mini Clinic	Health East/Wilder	Bi-Weekly
Commodities distribution	RAP	Quarterly

III. IDENTIFIED SERVICE GAPS

Exercise class  
Community interaction, advocacy, neighborhood security  
Education on mental disabilities, diversity  
Mini-gardens  
On-site chemical dependency staff  
Well-lit craft area  
Mini-lobbies - each floor  
Screened porch area  
Radio/TV for Community Room  
Support groups  
CHSP  
Beauty/barber services  
Senior center  
Continued funding of STAR  
Walking club for skyways  
Shopping bus  
Security desk

IV. RECOMMENDATIONS

1. That safety and community involvement programs be made available to residents.

RESOURCE: RESIDENT COUNCIL, STAR, DISTRICT COUNCIL

2. That a Senior Center be developed in downtown St. Paul.  
RESOURCE: CITY OF ST. PAUL, ST. PAUL PARKS AND RECREATION, DISTRICT COUNCIL, PRIVATE ORGANIZATIONS AND FOUNDATIONS
3. That walking clubs be initiated in the skyways.  
RESOURCE: RESIDENT COUNCIL, DISTRICT COUNCIL, CENTRAL TOWERS  
RESIDENT COUNCIL
4. That fitness/exercise programs be offered regularly to residents.  
RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, COMMUNITY CENTERS,  
ST. PAUL PARKS AND RECREATION, YMCA, HEALTH ORGANIZATIONS
5. That transportation be provided to various shopping malls.  
RESOURCE: PRIVATE STORES, RESIDENT COUNCIL
6. That security and safety issues be addressed and that a security desk in the lobby be considered.  
RESOURCE: ST. PAUL POLICE, STAR, DISTRICT COUNCIL
7. That chemical dependency staff provide services in on-site office space.  
RESOURCE: SENIOR CHEMICAL DEPENDENCY PROGRAM, PHA
8. That better lighting be installed in craft area.  
RESOURCE: PHA
9. That a television and radio be installed in the Community Room.  
RESOURCE: RESIDENT COUNCIL, ADOPT-A-HI-RISE
10. That a CHSP be developed to serve that portion of the 36 persons over 80 years of age requiring supportive services.  
RESOURCE: PHA, HUD, STATE, COUNTY
11. That a beautician/barber shop operate in the building.  
RESOURCE: RESIDENT COUNCIL, PRIVATE VENDOR

SOCIAL SERVICES PLAN  
EDGERTON HI-RISE, 1000 EDGERTON

I. BUILDING DEMOGRAPHICS

NUMBER OF UNITS - 219

NUMBER OF RESIDENTS ACCORDING TO AGE GROUPS

0-61	62-70	71-75	76-80	81-85	86+
44	53	37	38	41	18

II. CURRENT SERVICES AVAILABLE	PROVIDER	FREQUENCY
Adopt-a-Hi-Rise	St. Paul Assoc. of Realtors	Periodically
Religious services	Area Churches	Weekly
Parcel delivery/Postal van	Post Office	Daily/Weekly
Food Stamp Recertification	Ramsey County	Monthly
Milk delivery	Private vendor	Weekly
Grocery bus	Private vendor	Weekly
Case management	Family Services	By referral
Dining	Prepared by Residents	3X-Weekly
12-Step group	Sr. Chem. Dep.	Weekly
Barber/beauty shop	Private vendor	3X-weekly
Shopping bus	K-Mart	Monthly
Flea Market	Private vendor	Monthly
Commodities distribution	RAP	Quarterly
Clinic	Ramsey Hospital	Twice Weekly
Bookmobile	St. Paul Library	Bi-weekly

III. IDENTIFIED SERVICE GAPS

Educational programs  
Increased case management  
Support groups  
CHSP  
Fare Share  
Senior Dining Program  
Craft room and instructor  
Increased library service  
Merrick Community Center Outreach  
Interior environment improvements

IV. RECOMMENDATIONS

1. That Edgerton be designated as a Fare Share drop-off site.  
RESOURCE: RESIDENT COUNCIL, RAMSEY ACTION PROGRAM
2. That a RAP Senior Dining Program be located at the hi-rise.  
RESOURCE: RAP SENIOR DINING PROGRAM, RESIDENT COUNCIL

3. That a craft room be designated and that a craft instructor provide regularly scheduled craft classes.

RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL PARKS AND RECREATION, VOLUNTEERS, CHURCHES, MERRICK COMMUNITY CENTER

4. That a CHSP program be developed in the hi-rise.

RESOURCE: PHA, STATE, COUNTY, HUD

5. That library services be increased.

RESOURCE: ST. PAUL/RAMSEY COUNTY LIBRARIES

6. That support groups be initiated.

RESOURCE: SOCIAL SERVICE AGENCIES

7. That Merrick Community Center provide outreach to hi-rise residents.

RESOURCE: MERRICK COMMUNITY CENTER

8. That interior environmental improvements be made.

RESOURCE: PHA, RESIDENT COUNCIL

SOCIAL SERVICES PLAN  
HAMLINE HI-RISE, 777 N. HAMLINE

I. BUILDING DEMOGRAPHICS

NUMBER OF UNITS - 185

NUMBER OF RESIDENTS ACCORDING TO AGE GROUPS

0-61	62-70	71-75	76-80	81-85	86+
30	22	24	43	35	32

II. CURRENT SERVICES AVAILABLE	PROVIDER	FREQUENCY
Religious services	Area Churches	Weekly
Parcel delivery/Postal van	Post office	Daily/Weekly
Food Stamp Recertification	Ramsey County	Monthly
Grocery bus	Private vendor	Weekly
Case management	Family Service	By referral
Senior Dining	RAP	Lunch M-F
Podiatry service	Private	Bi-monthly
Shopping bus	K-Mart	Monthly
Commodities distribution	RAP	Quarterly
Mini-clinic	Lexington Health	Bi-weekly
Accessible Space	ASI	Ongoing
Barber/beauty shop	Private vendor	Weekly
Adopt-a-Hi-Rise	American Bank	Periodically
Bookmobile	St. Paul Library	Bi-weekly
Newsletter	Resident Council	Monthly

III. IDENTIFIED SERVICE GAPS

Educational programs on diversity and safety  
Support groups  
CHSP  
Craft instructor  
Walking group/Fitness program  
Intergenerational programs  
Exercise instructor, fitness programs

IV. RECOMMENDATIONS

1. That educational programs are provided to meet residents' needs in the areas of diversity, safety and health.  
  
RESOURCE: ST. PAUL SCHOOLS, POLICE, FIRE DEPARTMENTS, HEALTH CARE ORGANIZATIONS
2. That craft classes be offered on a regular basis.  
  
RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL PARKS AND RECREATION, VOLUNTEERS, CHURCHES, PRIVATE ORGANIZATIONS
3. That exercise classes, fitness programs and a walking group be offered to residents on a regular basis.

RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL PARKS AND RECREATION, HEALTH CLUBS

4. That support groups be provided on topics concerning residents.

RESOURCE: SOCIAL SERVICE AGENCIES

5. That a CHSP program be implemented for residents requiring additional support.

RESOURCE: PHA, HUD, STATE

6. That intergenerational activities and programs be implemented.

RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION

SOCIAL SERVICES PLAN  
SEAL HI-RISE, 825 SEAL STREET

I. BUILDING DEMOGRAPHICS

NUMBER OF UNITS - 143

NUMBER OF RESIDENTS ACCORDING TO AGE GROUPS

0-61	62-70	71-75	76-80	81-85	86+
52	26	19	21	20	21

II. CURRENT SERVICES AVAILABLE	PROVIDER	FREQUENCY
Adopt-a-Hi-Rise	H.B. Fuller	Periodically
Religious services	Area Churches	Weekly
Parcel delivery/Postal van	Post Office	Weekly
Food Stamp Recertification	Ramsey County	Monthly
Milk delivery	Private vendor	Weekly
Grocery bus	Private vendor	Weekly
Case management	Family Services	By referral
Senior Dining	RAP	Lunch M-F
Podiatry service	Private vendor	Bi-monthly
Bookmobile	St. Paul Library	Bi-weekly
Produce man	Private vendor	Weekly
K-Mart bus	K-Mart	Monthly
Mini-clinic	U of M Hospital	Weekly
Beauty salon	Private vendor	Twice weekly
Senior Center	Merriam Park	Ongoing
Block Nurse Program	St. Anthony BNP	By referral
Flea Market	Private vendor	Monthly
Commodities distribution	RAP	Quarterly
Fare Share	Volunteers	Monthly

III. IDENTIFIED SERVICE GAPS

- Exercise class
- Mini-gardens
- Education on crime, depression, health, nutrition, communication
- Case management
- Intergenerational programs
- Craft classes
- More entertainment
- Furniture update
- Downtown senior center
- Support groups

IV. RECOMMENDATIONS

1. That intergenerational activities and programs be implemented.

RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, CHURCHES

2. That exercise classes be offered on a regular basis.

RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL PARKS AND RECREATION, VOLUNTEERS, CHURCHES, ST. PAUL COMMUNITY CENTERS, HEALTH ORGANIZATIONS, HOSPITALS

3. That classes on pottery and clay jewelry be provided; that craft classes be provided on a regular basis.

RESOURCE: NORTHERN CLAY CENTER, ST. PAUL SCHOOLS COMMUNITY EDUCATION, ST. PAUL PARKS AND RECREATION, VOLUNTEERS

4. That educational programs be provided.

RESOURCE: ST. PAUL SCHOOLS COMMUNITY EDUCATION, POLICE, FIRE DEPARTMENTS, HEALTH CARE ORGANIZATIONS, DISTRICT COUNCILS

5. That mini-gardens be developed.

RESOURCE: RESIDENT COUNCIL, PHA

6. That entertainment be increased.

RESOURCE: RESIDENT COUNCIL, ADOPT-A-HI-RISE, COMMUNITY CENTERS

7. That furniture be replaced in community spaces.

RESOURCE: PHA

8. That a downtown Senior Center be developed.

RESOURCE: CITY OF SAINT PAUL, DISTRICT COUNCILS

9. That support groups be provided on topics concerning residents.

RESOURCE: SOCIAL SERVICE ORGANIZATIONS

APPENDIX

ON-SITE HI-RISE RESOURCES

HI-RISE LOCATION	PROJECT # OF UNITS	Accessible Space	Adopt-A-Hi-Rise	Assisted Living Prgm.	Barber/Beauty Salon	Block Nurse Program	Bookmobile	Congregate Housing Services Program	Craft Group	Exercise Group	Flea Market	Grocery Bus	Monthly K-Mart Bus	Milk Delivery	"Mini-Clinic"	Podiatry Service	Produce Person	Religious Service	Senior Center Within Walking Distance	Senior Dining	TDD/TTY at front door	12-Step Group	Watkins Sales
200 E. Arch St.	1-3 169	X	X				X			X	X	X	X	X	X	X	X	X	X	X	X		
554 W. Central Ave.	1-5 139	X								X	X	X		X		X		X	4		X	X	X
261 E. University Ave.	1-6 130				X		X	X		X	X	X	X	X	X	X	X	X	X	X			X
325 Laurel Ave.	1-7 73	X			X		X			X	X	X	X	X	X	X	X	X	X	X			X
469 Ada St.	1-9 142	X	X		X		X	X		X	X	X		X	X	X	X	X	X	X			X
899 S. Cleveland Ave.	1-11 143	X			X	X	X			X	X	X	X	X	X	X	X	X	X	X			
1743 E. Iowa Ave.	1-13 147				X		X			X	3	X	X	X	X	X	X	X	X	X			
1300 Wilson Ave.	1-14 186	X			X		X			X	X	X	X	X	X	X	X	X	X	X			
727 Front Ave.	1-15 150	X			X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X			X
280 Ravoux St.	1-16 216	X	X		X		X	X		X	X	X	X	X	X	X	X	X	X	X			X
545 N. Wabasha St.	1-17 74	X					X			X	X	X	X	X	X	X	X	X	X	5			X
1085 Montreal Ave.	1-18 184	X			X		X			X	X	X	X	X	X	X	X	X	X	X			X
10 W. Exchange St.	1-19 190	X					X			X	X	X	X	X	X	X	X	X	X	5			X
1000 Edgerton St.	1-24 219	X			X		X			X	X	X	X	X	X	X	X	X	X	X	2X		X
777 N. Hamline Ave.	1-26 185	X			X		X			X	X	X	X	X	X	X	X	X	X	X			X
825 Seal St.	1-27 143	X			X		X			X	X	X	X	X	X	X	X	X	X	X			X

Programs or Services Available in all Hi-Rises:

1. OK Card System
2. Parcel Delivery
3. Food Stamp Recertification
4. Commodities
5. Resident Councils
6. Newspaper Delivery
7. FareSHARE-Delivery or pick up to all hi-rises
8. Social worker/case manager by referral

- One of a Kind Program:  
 1. (STAR)-Services to Assisted Residents  
 10 W. Exchange

2. (SALT)-Supportive Apartment Living Teaching Program  
 Central Hi-Rise

- Footnotes:  
 1. Transportation is provided to Valley Hi-Rise for Senior Dining.

2. No Senior Dining but the Resident Council cooks a meal three times a week for the entire Hi-Rise.

3. Supermarket one block away.

4. Martin Luther King Center provides transportation to their center.

5. Church one block away.

APPENDIX B  
THE ADOPT-A-HI-RISE ORGANIZATIONS

<u>Hi-Rise Location</u>	<u>Name of Organization</u>
Mt. Airy Hi-rise 200 E. Arch St.	U.S. West, Community Service Team
Central Hi-rise 554 W. Central Ave.	Miller-Schroeder Financial, Inc.
Neill Hi-rise 325 Laurel Ave.	Digital Equipment Corporation
Dunedin Hi-rise 469 Ada St.	Norwest, W. St. Paul Branch
Cleveland Hi-rise 899 S. Cleveland Ave.	Ford Motor Company
Wilson Hi-rise 1300 Wilson Ave.	St. Paul Companies
Front Hi-rise 727 Front Ave.	Unisys
Ravoux Hi-rise 280 Ravoux St.	First Banks
Wabasha Hi-rise 545 N. Wabasha St.	Institute of Real Estate Management (IREM)
Montreal Hi-rise 1085 Montreal Ave.	U.S. West-Telephone Pioneers
Exchange Hi-rise 10 W. Exchange	Farm Credit Services
Edgerton Hi-rise 1000 Edgerton St.	St. Paul Area Assn. of Realtors
Hamline Hi-rise 777 N. Hamline Ave.	American Bank
Seal Hi-rise 825 Seal St.	H.B. Fuller Company
Two Hi-rises still look forward to being adopted. These are Valley Hi-rise, 261 E. University Ave. and Iowa Hi-rise, 1743 E. Iowa St.	