**SENIOR WELLNESS SUPPORTED BY TECHNOLOGY ACCESS**

As Seattle continues to increase connectivity, provide skills training, and enable greater access to devices for its residents, it creates opportunities for the effective use of internet technology to deliver needed services and information. *One such significant opportunity is the delivery of wellness information and services to Seattle senior residents that may have minimal or no current access.* The 2018 Technology and Internet Access Study found that 9% of seniors lack internet access and 25% of those living in poverty lack access. Is lack of access affecting Seniors access to health and wellness?

This first opportunity is for the effective use of internet technology to deliver needed services and information pertaining to the current COVID-19 health event.  Complying with “personal space quarantine” (maintain separation between individuals by at least 6 feet), healthcare providers have turned to telehealth tools. Others suggest turning to remote doctors. (“*Showing coronavirus symptoms and can’t get to a doctor?* [*Try a virtual visit*](https://www.king5.com/article/news/health/coronavirus/showing-coronavirus-symptoms-and-cant-get-to-a-doctor-try-a-virtual-visit/281-8d6f15ee-04de-4532-b164-f922da8f417e)”).

**PROJECT GOAL**

The goal is to determine how underserved seniors within the City of Seattle use health and wellness online services through health providers. How can seniors get 1:1 personal/personalized health and wellness information and*support* for their specific needs, without having to leave their homes.

**PROPOSED**

1. CTAB authorize the Digital Inclusion committee to conduct a study investigating how the lack of access for SHA and supportive housing residents impacts quick and efficient healthcare
2. CTAB authorize the Digital Inclusion committee to survey providers to identify resources.
3. Digital Inclusion Committee should then use this information to make recommendations to CTAB, Seattle IDT, the City.
4. CTAB make an appeal to telecommunications corporations for added bandwidth and data plans during the COVID-19 response period for SHA residents

**THE NEED & OPPORTUNITY**

Providers and insurers of health care, in great part due to the COVID-19 crisis, are trending toward the use of communication technology (telemedicine-telehealth) to address PREVENTION in order to avoid critical health events, control chronic conditions as well as maintaining personal vitality.

**PHASE 1 - SURVEY OF HOUSING COMMUNITIES**

Contact with management from the selected senior housing communities (non-profit and for-profit); senior centers to define their description of what types of access, wellness information and services would be useful for their residents and users. Arrange a telephone focus group to define the attitudes of the management on the use of technology for residents to receive wellness-health information and services

During Phase 1, focus groups will be held with selected participants in the survey in order to:

* *Identify access – device, connectivity, characteristics of the senior residents’ service*
* *identify what wellness and health related information and services are presently provided to those residing or present in these settings*
* *define the resources of staff, physical facility, current and additional programs*
* *explore risks, privacy*

**PHASE 2 - SURVEY OF RESOURCE OPPORTUNITIES**

Contact and meeting with primary and integrative care providers to define what, how and for whom they are using communication technology together with barriers and issues they are encountering that affect the level of participation and effectiveness. In Phase 2, the selection, contact and meetings will be held with those primary care providers such as UW Medicine, Virginia Mason, Kaiser Permanente, CHI Franciscan and Providence Medical Centers, Sea Mar, IHS ICHS, the VA, The Advisory Board and Cambria Grove, or others identified in Phase 1 to understand their offerings.

Survey providers to:

* *determine how such providers use internet technology to deliver information and services*
* *identify the primary areas of focus and participants for such information and services (chronic conditions, follow-up for health events and wellness etc.)*
* identify requirements for end user’s basic technology skills levels, connection speeds and device options (tablet, Chromebook, laptop/desktop)
	+ Are the new speeds from Comcast (up from 15 to 25Mbps) and Wave (up from 10 to 18 Mbps) adequate?
* Do they provide learning resources for seniors on how to use the connection platforms available on their site or at a referral site?
* *examine whether the providers reach underserved populations and provide targeted programs for historically underserved populations*
* *define the services and information provided together with intended and actual outcomes*
* *describe barriers to broader applications, including technology system upgrades, reimbursement and billing limitations, seniors’ awareness, limited access to internet or equipment*
* *determining efficacy with evidence*
* *suggest steps to address these barriers*
* *address risks, privacy*

**PHASE 3 - Pilot**

Phase 3 would concentrate on the description of approaches that could be taken to apply the resources to help improve on the status quo:

* *describe and test how the resources within senior housing communities could be applied to enable the provision of wellness and health information and services utilizing communication technologies*
* *define and test specific courses of action that could be developed to take effective advantage from these resources.*
* *To identify alternative roles and functions that could be undertaken by the City, to monitor and oversee the delivery of such wellness programs*