

# Elder Services of the Merrimack Valley

## Chronic Disease Self-Management Education Program Grantee



### Goals, Strategies, and Activities

The purposes of this three-year grant are to:

- Significantly increase the number of participants in evidence-based self-management education and support programs; and
- Implement innovative funding arrangements to support the proposed programs, while embedding the programs into an integrated, sustainable program network.

Elder Services of the Merrimack Valley (ESMV) and its partners will:

- Increase participation and capacity across all regions and programs;
- Increase leader retention rates; and
- Achieve further sustainability by securing contracts with health care providers.

### Proposed Interventions

- Chronic Disease Self-Management Program (CDSMP)
- Better Choices, Better Health® (BCBH, online version of CDSMP)
- EnhanceWellness (EW)
- Healthy IDEAS (HI)

### Partnerships

To achieve the goals of the grant, ESMV will collaborate with the following key partners:

- Area Agencies on Aging /ASAPs (25)
- Department of Public Health
- Edward M. Kennedy Community Health Center
- Enhance Asian Community on Health
- Executive Office of Elder Affairs
- Family Health Center
- Healthcentric (Quality Improvement Network/Quality Improvement Organization)
- Latino Health Insurance Project
- MA Councils on Aging
- Mass Home Care
- Northeast Independent Living Center
- Senior Whole Health
- Tufts Health Plan Foundation
- United Healthcare
- Yuil Medical Associates

### Anticipated Results

ESMV and its partners propose to achieve the following results:

- Increase participation, reaching 7,420 participants;

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- Increase capacity in underserved communities by offering CDSMP workshops resulting in no less than 360 participants;
- Increase from 0 to 1,200 the number of homebound older adults or those living in rural communities in BCBH or EW;
- Increase from 0 to 600 the number of adults identified as depressed participating in HI;
- Increase participation in all programs by minority populations by at least 50;
- Reach no less than 1,500 individuals with disabilities through the integration of programs within the disability network;

- Increase leader retention rate from 34% to 51%; and
- Achieve 3 contracts with health care providers.

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