

HUBS

Housing Upgrades to Benefit Seniors

Program Successes and Challenges Towards Smart Growth & Sustainable Financing

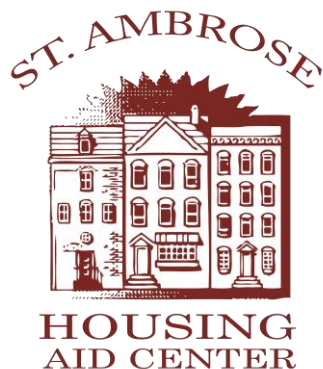
Brooke Paluzzi
HUBS Manager
Civic Works
bpaluzzi@civicworks.com



Civic Works

Lauren Averella
Director of Elder Services
Civic Works
laverella@civicworks.com

HUBS Partners & Funders



The Issues



- Over the next decade, Maryland will experience a 40% increase in the number of residents 65 years and older.
- Baltimore City is home to 38 percent of the state's low-income minority population of people 60 years and over
- Older adults in Baltimore tend to be older, more disabled, and have lower income than older adults in other Maryland jurisdictions
- Services for older adults in Baltimore have been historically siloed
- The housing stock in Baltimore is aging and the "row home" design with 3 levels and bathrooms on the 2nd floor is making aging in community more difficult

Background & Structure



- In 2014 ABAG (now MPN) convened funders, NPOs, & Gov. Stake Holders in Aging + Housing
- The Stulman Foundation – develop a better & coordinated system
- HUBS was born
 - Centralized intake & administration provided by CW
 - 4 Leadership Team Members, Civic Works, GHHI, RTB, NHS
 - 5 HUBS Sites + 1 Floating Case Manager (currently Banner Neighborhoods, CHAI/Sinai, Keswick, MOW, St. Ambrose & Civic Works)
- Originally an Application Assistance Program
 - Backlog across Senior Home Repair Providers
 - The need outweighed the resources
 - HUBS needed to control it's own capital and provide grants for clients, especially those ineligible for deferred or forgivable loans

Structure pt. 2



- 2017 - HUBS Collaborative coordinated application to the Weinberg Foundation for capital funds
 - HUBS continues to coordinate applications to City & State resources
 - Now facilitates home repairs by providing contracting services directly through HUBS controlled grant dollars
- Coordination between Baltimore City DHCD loan + grant programs expands
 - New HUBS Database!

Results & Success



- Since 2017 over 2,700 homeowners have received some form of housing repair or upgrade
 - 2454 accessibility or safety modifications
 - 554 roof repairs or replacements
 - 301 furnace repairs or replacements
- Provided 3,232 wrap-around services
 - 516 applications for bill-pay assistance (OHEP, Fuel Fund, etc)
 - 352 clients received homeowners' insurance
 - 260 clients received food assistance (SNAP, MOW, Produce delivery, etc)
 - 305 clients received legal services (Project Household, Estate planning, etc)
- Testimonials
 - *"Doing the roof was a miracle. Over the years, my roof has gotten repairs, but they [HUBS] didn't repair they gave me a new roof. They took three pounds of rotten tar and [gave me] a new roof." - HUBS Client*
 - *"Those types of things that were done for me--the maintenance for the roof, the handrails, and all those type of things--they definitely help me to stay right where I am. I'm able to maintain my health and my strength to help take care of everything, so yes, it helped me a lot." - HUBS Client*

New Challenges



- Diversification of funding streams
 - Less universal client qualifications (different income requirements, neighborhood/zip code requirements, depending on funder)
 - Stringent and diverse reporting requirements (City, State, & Federal grant guidelines require strict adherence)
 - Large comprehensive work scopes braiding several funding sources with cross organizational client tracking
- COVID19 Challenges
 - 600% increase in client applications
 - Slow down in service delivery
 - Backlog from shut down
 - Longer intake wait times (3-6 months depending on catchment area)
 - Increased material costs
 - Subcontractor delays

The Future



- HUBS has secured operational funding through 2024
- Sustainable Financing
 - Exploring ways Healthcare can invest in HUBS
 - Data Analysis
 - Identifying partners
- The Health & Well-being Argument
 - 2018 Impaq Study results: for every HUBS \$1 spent, \$1.80 in benefits potentially realized
 - 36% estimate decrease in falls post HUBS intervention*
 - Reduced risk of nursing home placement
 - Reduced risk of respiratory illnesses including asthma
 - Improvement of depressive symptoms

**Cummings et al. (1999) describes use of a Randomized Control Trial to estimate that a home modifications intervention reduced the incidence of falls for individuals with prior falls history. 37*

Contact



- Brooke Paluzzi
HUBS Manager
410-826-5955 X105
bpaluzzi@civicworks.com

