Co-Chair: Pamela Nadash, *University of Massachusetts Boston*, *Boston*, *Massachusetts*, *United States*Discussant: Alisha Sanders, *Leading Age*, *Washington*, *D.C.*, *United States*

Older people living in congregate environments are obvious beneficiaries of supportive services. The potential for prevention is clear, particularly among low-income elders living in subsidized housing; it is this group that is at high risk for significant healthcare and other costs, and it is this group that suffers considerably from a fragmented healthcare system. Policymakers have long seen the advantages of reaching this population, but most existing housing with services programs have focused more on social than health-related supports. The Right Care, Right Place, Right Time initiative (R3) was launched in July 2017 to demonstrate the value of supportive services to seniors living independently in affordable housing in the Greater Boston area, while reducing health care costs. The R3 program consists of two on-site wellness teams, including a wellness nurse and wellness coordinator. Each team is responsible for about 200 participants across two housing sites. The R3 evaluation included both quantitative and qualitative components. The quantitative component entails pre/post comparison as well as a control group analysis, focusing on various health and health utilization outcomes. The qualitative component includes key informant interviews examining program development and implementation and focus groups capturing the resident experience. The purpose of this symposium is for evaluation team members to report on the experiences of program participants, administrators/staff, housing managers/staff, and community partners with the R3 program, and to assess program impact. Edward Miller and Pamela Nadash will serve as chair and co-chair, respectively; Alisha Sanders as the discussant.

LESSONS FROM THE RESIDENT EXPERIENCE WITH THE R3 PROGRAM

Edward A. Miller, Pamela Nadash, Elizabeth Simpson, Natalie Shellito, and Marc Cohen, 1. University of Massachusetts Boston, Boston, Massachusetts, United States

Understanding the resident experience is a critical step to creating a sustainable and replicable model of affordable resident-centered housing with supportive services programs. This study thus draws lessons from focus groups with participants in the R3 program for designing and implementing such initiatives in affordable senior housing. Findings indicate that the R3 program brings value to residents: they benefit from reliable information on healthrelated issues, as well as emotional support and assistance with accessing appropriate care. By focusing on prevention and ensuring timely access to services, findings suggest how the intervention could promote seniors living independently longer and lower health system costs. Results also suggest ways to improve the effectiveness of housing with services programs, including providing clarity regarding the purpose of the program, its components and staffing, building trust between program staff and residents, addressing concerns about privacy and confidentiality, and implementing a multipronged marketing and promotion strategy.

R3 PROGRAM MANAGEMENT AND WELLNESS TEAM VIEWS ON BARRIERS AND FACILITATORS TO IMPLEMENTING THE R3 PROGRAM

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Implementing programs such as R3, which adds healthfocused supportive services into senior housing sites, can be complicated. This study aimed to understand program management and wellness team views on barriers and facilitators to implementation. Semi-structured interviews were conducted with managers, social workers, and wellness nurses who implemented the R3 program. Facilitating factors included monthly phone calls between wellness team members and program participants, which strengthened relationships and provided valuable information; top-level management support, which was critical in building community partnerships; and daily ambulance reports from local emergency responders, which provided actionable information about participants. Barriers included the need for more wellness team time at individual intervention sites, challenges connecting R3 staff with participants' hospitals and insurance companies, and refining the technological approach used to facilitate work flow and information exchange. Although obstacles were encountered during implementation, the findings provide support for the beneficial effects of enhanced services within senior housing.

THE ROLE OF HOUSING MANAGEMENT AND STAFF IN ADMINISTERING THE R3 PROGRAM

Elizabeth Simpson, ¹ Edward Miller, ¹ Pamela Nadash, ¹ Taylor Jansen, ¹ Yan Lin, ¹ and Marc Cohen ¹, 1. *University of Massachusetts Boston, Boston, Massachusetts, United States*

Existing staff and management are central players in integrating enhanced services into affordable senior housing. This study describes the experience of housing providers in the implementation and operations of the R3 program. Semistructured interviews were conducted with executives and direct service staff across the four intervention sites. Results indicate that staff served an important role in facilitating resident recruitment by operating as trusted sources of information about the R3 program. Top-level support for R3, acculturating R3 staff to the housing site, developing communication and data systems, and integrating new and existing staff were seen as crucial to the success of the program. Benefits noted by housing staff included freedom to redirect one's energies/focus, production of actionable data/insights, reductions in resident turnover, and the addition of a nurse to the onsite services team. Housing management/staff experience with R3 can serve as a guide to moving to an enhanced services model.

COLLABORATION WITH FIRST RESPONDERS IN R3: THE CRITICAL ROLE OF COMMUNITY PARTNERS IN HOUSING WITH SERVICES

Pamela Nadash,¹ Edward Miller,¹ Elizabeth Simpson,¹ and Natalie Shellito¹, 1. *University of Massachusetts Boston, Boston, Massachusetts, United States*

Because seniors represent a rising proportion of Emergency Medical Services (EMS) provider activity, there is a growing focus on determining how EMS providers can better serve