**Telewellness Project**

**[SAMPLE PROJECT PLAN]**

1. **Project Summary**

The Telewellness Project is a unique collaboration of senior-serving organizations to use technology-based tools to support the mental health and wellbeing needs of residents of affordable housing communities. The Project’s objectives are two-fold: 1) to provide mental wellness education and outreach to [DESCRIPTION OF YOUR COMMUNITY], and 2) to provide mental health support to residents by enrolling them in telemental health services.

The partner collaborators include:

* **[YOUR COMMUNITY NAME]**
* **[SOCIAL SERVICES GROUP PROVIDING SERVICES]**
* **[OTHER IMPORTANT STAKEHOLDERS]**

The success of this project will be measured using a few ways:

1. [SURVEYS YOU DECIDE TO USE]
2. Data and information about the resident will be collected by [SOCIAL SERVICES PROVIDER] during one-on-one session that will later be deidentified, organized, and shared in a final report
3. An outside researcher may also collect some data and information for formal program evaluation.
4. **Project Plan**

There are three main components of this project: equipment, mental health education series, and personal therapy sessions.

1. **Equipment**

* [TECH EQUIPMENT YOU DECIDE TO USE]

1. **Mental health education series**

* An important objective of this program is mental health awareness. Allowing residents to learn about different topics of mental health, we create a baseline foundation of education and awareness. We’ve created resources to allow for residents to learn about mental health topics while allowing you to promote and signup residents for personal therapy sessions.
* Depending on social distancing guidelines and COVID circumstances, we will be hosting Zoom webinars on certain mental health topics.
  + Topics will be announced about [TIME PERIOD] prior to the webinar via flyers. Handouts will also be part of the marketing campaign to allow for those that do not feel comfortable joining in to still get the education.
* [ANY OTHER PERTINENT INFORMATION NEEDED FOR/ ABOUT YOUR COMMUNITY]

1. **Personal mental health therapy sessions**

* Goal: Refer at least [# OF RESIDENTS] resident per month
* Language availability: [LIST OF LANGUAGES AVAILABLE DEPENDING ON SOCIAL SERVICES PROVIDER]
* Sessions can be held over FaceTime, Google Duo, and/ or Zoom
  + [SOCIAL SERVICES PROVIDER NAME] clinician manages which program to use for sessions based on resident preference and comfort level
* Paperwork to be filled out and sent to [SOCIAL SERVICES PROVIDER NAME] checklist:

☐ “TeleMH\_Referral Form”

☐ “PHQ-9”

☐ “Telemental Health Confidentiality Policy”

☐ “Telemental Health PHI 2018”

1. **Project Roles and Responsibilities**

* [COMMUNITY]
  + General project management
    - Keep track of goals/ metrics
    - Schedule check-in calls
  + Create and present education series, handouts, and flyers for communities
  + Create surveys for community
* [STAFF DIRECTLY HANDLING RESIDENTS]
  + Hand out and/ or post flyers about education series/ project
  + House tech equipment
  + Hand out and collect surveys from residents
  + Recruit residents for personal therapy sessions
    - Fill out any initial paperwork
  + Make sure residents are attending their scheduled sessions and are happy with the service
* [SOCIAL SERVICES PROVIDER NAME]
  + Train [COMMUNITY STAFF NAME] and other necessary community staff on identifying mental health needs and supporting the referral process
  + Provides mental health clinicians
  + Schedules sessions with residents after handoff from community

1. **Timeline**

Possible webinar dates and topics (can move around depending on need)

* 1. [DATE] – “Health, Wellness, and Wholeness”
  2. [DATE] – “Preserving Your Memory”
  3. [DATE] – “Grief and Loss”
  4. [DATE] – “Depression and Anxiety”
  5. [DATE] – “Hoarding”
  6. [DATE] – “Bullying