Neighborhood-Based Senior Care National Initiative, a collaboration between Catholic Charities agencies and Catholic healthcare organizations in four cities, has been awarded a major grant by The Retirement Research Foundation in Chicago. The initiative will serve as a model for collaborations among health systems and communities seeking to address the needs of at-risk and chronically ill older adults in economically disadvantaged neighborhoods and help them remain in their communities.

**GRANT RECIPIENTS**
The $156,700 grant for the initiative goes to collaborative efforts in Wilkes-Barre, PA; New Orleans; Houston; and Oakland, CA. These four efforts emphasize the prevention and identification of healthcare problems and the improvement of access to care and services by linking health and social service professionals with neighborhood volunteers.

- In Wilkes-Barre, Catholic Social Services of the Diocese of Scranton and Mercy Health System will focus on developing a senior support network of volunteer visitors to elderly people at risk of institutionalization because of health problems. Drawing on their combined 150 years of experience in providing services, the two organizations will establish consistent contact with at-risk seniors, primarily white, in order to detect and treat problems at an early stage. The network will be supported by a neighborhood advisory board and case management services, as well as medical and social services.

- In New Orleans, Catholic Charities and Daughters of Charity National Health System have begun a collaborative effort to pinpoint the most effective ways to identify at-risk aging persons in the predominantly African-American neighborhood of Carrollton/Gert Town. To do this, they will develop a volunteer outreach program. Catholic Charities operates 60 social services in New Orleans, and the Daughters of Charity have provided health services in the city for 167 years.

- The Houston collaboration will bring together current efforts of Associated Catholic Charities with the Sisters of Charity Health System (St. Joseph Hospital Family Practice Clinic and Project CAPABLE). Their goal is to identify and prioritize health and social service needs and coordinate services for a primarily Hispanic and black population in a 42-square mile area of inner-city Houston.

- In Oakland, Catholic Charities of the East Bay and Catholic Healthcare West’s Mercy Retirement and Care Center will work with leaders from the Fruitvale district, an ethnically diverse area, to develop a seniors-helping-seniors program. An integrated network of services will support trained senior volunteers in identifying needs in their neighborhoods and finding solutions. Catholic Charities has served the area since 1934 and currently reaches 1,700 low-income elderly annually; Mercy has served the community since 1906.

**GOALS OF THE PROGRAM**
The Retirement Research Foundation, which is committed to supporting programs that improve the quality of life for older Americans, is particularly interested in innovative projects that develop new approaches to the problems of older adults and have the potential for regional or national impact. The ethnic diversity of these four sites will help provide a broad model for other communities, as will the aspects they all share: a large population of people over 65, low income, and limited or inaccessible healthcare in the community.

Furthermore, although the sites have different histories of collaborating with the community and using volunteers, each incorporates the key component of this national project: improved planning and coordination of community services to increase efficiency and access, and reduce inconsistency and duplication.

Neighborhood-Based Senior Care National Initiative was developed by the Aging Committee of Catholic Charities USA and the Systems Directors of Aging Services network of CHA, which have been meeting for three years to plan ways to enhance the Catholic ministry through collaboration and the establishment of community outreach programs. CHA and CCUSA encourage collaboration among their members, and a basic model that addresses the specific issues targeted by this initiative will help other organizations establish efficient collaborations of their own. CCUSA and CHA will also disseminate model information to their members.

Pulling the initiative together will be a project manager, who will oversee the project tasks and maintain communication between the sites, advisors, and the grant administrator, CHA. CHA will distribute the grant funds, track expenditures, and report to the funding agency.

Three problems are emerging from today’s changing dynamics of healthcare delivery: the difficulty of access to healthcare by a growing number of at-risk, low-income older adults; the high cost of institutionally based methods of treating the elderly; and the ineffectiveness of interventions, caused by social, cultural, and economic barriers. The challenge is to supplement the formal systems with community resources and networks that will help keep people in their homes. Neighborhood-Based Senior Care National Initiative hopes to meet that challenge.