



Community

Partnerships between Catholic Charities and Catholic Health Care Organizations

Like other health care organizations in the United States, Catholic health care facilities are developing new relationships with a wide array of partners to extend their ministry and to improve efficiency, coordination, and quality of care.

In forming these partnerships, Catholic-sponsored organizations may have an advantage over others. Through Catholic Charities and other social service programs, the Catholic Church in the United States is the largest provider of human services. In addition, the church's network of almost 20,000 parishes enables health care organizations to reach into communities where little infrastructure exists. The current movement toward integration of community-based health and social services creates opportunities for church-sponsored organizations to work together as never before.

Health Progress publishes an ongoing series of case studies of such partnerships, hoping they might serve as models for those creating integrated systems of care. These case studies of Catholic Charities agencies and Catholic health organizations were prepared by the Catholic Health Association as part of *New Covenant*, an initiative designed to promote collaborative efforts of the Catholic health ministry at the national and regional levels.

Here is another case study. *Health Progress* will present others in future issues.

If your health care organization is collaborating with a Catholic Charities agency in your area, we would like to know about it. Please contact Julie Trocchio by phone at 202-296-3993 or by e-mail at jtrocch@chausa.org.

Networks

Community Hospice House

Merrimack, NH

Organizational Structure

The program is operated by Home Health and Hospice Care of Nashua, NH, a private, not-for-profit agency that contracts with New Hampshire Catholic Charities for facilities management.

Goals of Affiliation

The goal is to provide physical, emotional, and spiritual comfort to people who are terminally ill.

The Project

New Hampshire had long needed a second hospice house. The project to form it brought together Home Health and Hospice Care of Nashua (HHHCN) and New Hampshire Catholic Charities.

HHHCN is a 115-year-old, not-for-profit provider of home care and nursing services. Catholic Charities, which owns and operates seven nursing homes and has agreements with two religious communities for the management of their long-term care centers, has extensive expertise in facilities management.

HHHCN surveys and assessments had shown that, although many hospice patients wished to die at home, they were prevented from doing so by the lack of a family caregiver. Family members, physicians, and insurers agreed that a hospice house would meet the needs of the terminally ill and their families. The agency launched a yearlong campaign that brought in more than \$3 million in pledges for the construction of a house and an endowment for patients in need.

Community Hospice House opened in December 2000. Its 10 rooms have had nearly 100 percent occupancy from the start. The house's services, provided by HHHCN, include palliative or comfort care, hospice nursing, personal care, bereavement support, nutritional counseling, family counseling, and spiritual support—all intended to protect the dignity of the

patient and his or her family members. Catholic Charities provides the facilities management.

The two partners recently had their contract reviewed by the National Catholic Bioethics Center, Boston, to ensure that it met the requirements of the *Ethical and Religious Directives for Catholic Health Care Services*.

Governance Structure

The hospice house is governed by HHHCN's board of directors, of which the Catholic Charities' diocesan director is a member.

Staff

Residents are cared for by an interdisciplinary team consisting of the medical director, hospice house manager, patient coordinator, chaplain, cook, nurses, certified nurse aides, social workers, homemakers, and volunteers. Volunteers are required to complete 30 hours of in-depth training.

Budget

Care provided at the house is covered by Medicare, Medicaid, and private insurance policies; however, fees for room and board are not covered. HHHCN established a Community Hospice House Endowment Fund to cover the costs of end-of-life care for those in need.

Effect on Community

Community response has been overwhelmingly positive. Patients' family members have especially praised the comprehensive nature of the hospice house's services.

Contact:

Raymond Mailloux
Diocesan Director
New Hampshire
Catholic Charities
Manchester, NH
603-669-3030



Practical Advice

Don't be afraid to take risks. Utilizing the experience of our two very different organizations has proven effective in bringing services for the dying to a higher, more inclusive level.

JOURNAL OF THE CATHOLIC HEALTH ASSOCIATION OF THE UNITED STATES

www.chausa.org

HEALTH PROGRESS®

Reprinted from *Health Progress*, September-October 2001
Copyright © 2001 by The Catholic Health Association of the United States
