

## Grant Outcomes Report

### **A Health Care Collaborative: Grassroots Caring Communities Connecting with Health Providers**

#### **The Problem:**

In 2011, the first of America's 80 million baby boomers (people born between 1946 and 1964) turned 65. A report from the U.S. Census Bureau<sup>1</sup> projects that nearly one in five U.S. residents will be the age of 65 or older in 2030. The number of people the age of 85 or older is projected to grow from 5.8 million in 2010 to 8.7 million in 2030, and will reach 19 million by 2050.

Many people want to live independently, in their homes, as they age. They dislike asking for help and may ignore emerging health problems. Informal communities, such as churches and membership groups, are available to help with housekeeping, shopping, and taking people to appointments. These forms of help, however, are too often ad hoc and circumstantial.

As the population ages, the country faces a dwindling supply of professional caregivers; weakened family ties; and an increasingly fragmented health care system that undermines availability, access to, and quality of care. Community and voluntary associations, with their shared space, common interests, values, and traditions, are an overlooked resource. Strengthening these communities to better assist their own constituents is consistent with a national interest in service and community building, innovation, and more efficient delivery of health care.

#### **Grant Activities and Outcomes:**

In December 2007, the New York State Health Foundation (NYSHealth) awarded The Transition Network (TTN) \$144,325 to: build a Caring Collaborative, which is a model that teaches TTN members how

#### KEY INFORMATION:

**GRANTEE**

The Transition Network

**GRANT TITLE**

A Health Care Collaborative: Grassroots Caring Communities Connecting with Health Providers

**DATES**

December 31, 2007 - April 23, 2010

**GRANT AMOUNT**

\$144,304

**FUNDING**

Special Opportunity Grants

<sup>1</sup> "The Next Four Decades: The Older Population in the United States, 2010 to 2050," U.S. Census Bureau Administration on Aging, May 2010, Also available at: [http://www.aoa.gov/AoARoot/Aging\\_Statistics/future\\_growth/DOCS/p25-1138.pdf](http://www.aoa.gov/AoARoot/Aging_Statistics/future_growth/DOCS/p25-1138.pdf)

to: train a service corps organized around time banking; create a health exchange program allowing members to confidentially share information with one another; design a model to turn high-rise buildings into caring communities; and prepare a manual to help navigate hospital admissions.

TTN created the multifaceted Caring Collaborative to achieve all four goals. It wrote how-to manuals to help others interested in these models. The Caring Collaborative features six components:

- **The Volunteer Service Corps:** a cadre of volunteers who provide services to others in the Caring Collaborative community when illness or injury leads to temporary disability.
- **Member Information Exchange:** a system in which members share information about medical conditions or procedures, health care providers, and medical devices. Exchanges take place through an administrator who matches requesting members with volunteers who have the necessary information or services available. Exchanges about medical conditions are kept in confidence.
- **Health Services Time Bank:** a database that manages service and information exchanges. The time bank records credits for services given and debits for services used.
- **Education:** a health strategies seminar series; neighborhood groups, which provide a venue to discuss issues in an intimate setting; a newsletter; and a Caring Collaborative website<sup>2</sup>.
- **The Health and Wellness Directory:** a resource of information and contacts related to the health issues that most affect the Caring Collaborative cohort, including physician reference sites; food delivery services; transportation options; sources for aids and devices; and tips on choosing rehab services.
- **Bonus Manuals:** strategies for offering programs in high-rise buildings, developing more caring collaboratives, and helping members deal with hospital and emergency room discharges.

By the end of the project, 220 of the TTN New York City chapter's 550 members participated in the Caring Collaborative in some way:

- The most frequently requested service—help getting to or from a doctor or dental appointment—accounted for 80.5 hours out of 237 hours spent on all services.
- Approximately 125 Caring Collaborative members joined Caring Collaborative neighborhood groups. These groups—in the Upper West Side, Upper East Side, and downtown area of Manhattan—arose out of the Volunteer Service Corps. Neighborhood groups meet informally, and each meeting

<sup>2</sup> <http://www.thetransitionnetwork.org/connect/connect-caring-collaborative/>

focuses on a specific health issue. One unexpected benefit of the groups was the willingness of participants to talk about health concerns in group settings.

- Ninety to 120 members attended at least one of four Caring Collaborative-sponsored health strategy seminars: "Home Care 101," "Put Your Best Foot Forward; "Care and Couture for Aging Feet," and "Your Life in the Balance." Speakers from the Visiting Nurse Service of New York facilitated the first seminars, and members facilitate current seminars.

Vertical Village is a strategy for turning high-rise buildings into caring communities, by organizing and mobilizing residents, staff, and building management to build a safety-net and assist those in need. TTN piloted vertical village projects in three multigenerational buildings where residents ranged from young parents to people in their 90s who still live on their own. As a part of this strategy, TTN:

- Developed a model and guidelines for organizing vertical villages.
- Implemented variations of the model in the three buildings. Components included: a database of contact and emergency information, training for building staff, a buddy system among residents, and creation of "go bags," bags containing items residents may need in an emergency.
- Wrote a how-to manual about creating vertical villages in a high-rise building.

The Transition Network also prepared a "Guide to Improving Your Hospital Discharge Experience" to help patients make the transition from hospital to home. The guide provides information about discharge planning, having solid information upon discharge, taking medications, making follow-up appointments, and coordinating care.

## The Future:

The Caring Collaborative Committee, advisors, and others created an operating budget to continue the Caring Collaborative, but were unable to secure funds. In 2010, it instituted a \$50 fee for TNN members to join the Caring Collaborative. Approximately 118 participants initially paid the fee to retain their membership. The number has now grown to 175 participants and continues to increase monthly.

The Caring Collaborative External Expansion Group is exploring opportunities to build alliances with universities, foundations, city agencies, and private companies that have a vested interest in the health and well-being of older adults.

## BACKGROUND INFORMATION:

### ABOUT THE GRANTEE

The Transition Network is a national nonprofit organization designed to help women over the age of 50 explore their next steps, using community to support each other as they move forward. It is a groundbreaking organization for woman as they face challenges such as health, finances, family and friendship bonds, and second careers—all issues that arise once women consider alternatives in professional and other aspects of their lives. Living and aging in a community is a priority of The Transition Network.

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