

*This information comes from GrantBriefs, RRF's bi-monthly internal newsletter. Much of the information is taken directly from grantees' reports and is presented in their own words. We thank grantees and others for their contribution to Grant Briefs.*

## **Rush University Medical Center Develops On-line Training for Physicians to Assess Decisional Capacity of Older Adults**

With a two-year \$294,891 RRF grant, Rush University Medical Center has created a training program for physicians on the clinical and legal aspects of decisional capacity for older adults. The project was a collaboration between Rush and the American Bar Association's Commission on Law and Aging.

Physicians without specialized training in capacity assessment are routinely required to make judgments about the ability of older patients to make decisions for themselves. For example, physicians are often asked by families and the legal system whether elders have the capacity to provide informed consent for medical treatment or to participate in research. Families seek expert opinion on whether an elder should still drive and live independently. Physicians find themselves with no strict definition of decisional capacity and no assessment tools for evaluating a patient's decision-making ability. Clinical assessment of capacity requires taking many factors into consideration, e.g., diet, disorientation, depression, and drug use.

The issue of capacity determination is especially important in judicial guardianship proceedings. Often, health care professionals are called upon to provide evidence to the court on an elder's condition and functional and cognitive abilities. The health care professional's statement is typically the key element in the judge's determination and instrumental in how the guardianship order is fashioned. Misguided assessments of capacity have been found to lead to over- or under-treatment and have resulted in inappropriate loss of rights. Based on research and experience, Rush determined a training program was needed to assist physicians assess decisional capacity of older adults. After considering a variety of training strategies, an on-line training program was deemed to be the best format.

Rush undertook several activities in developing the on-line training program. Rush conducted an environmental scan to identify existing resources on capacity assessment. A multi-disciplinary team drafted a curriculum with a downloadable handbook and a laminated pocket guide for fingertip reference. Rush recruited an expert panel to review the curriculum. The training program was tested with 55 physicians with different specialties who practice in different settings. Following an on-line evaluation of the curriculum, the project team conducted in-depth interviews with selected pilot participants. Following curriculum revisions, the training program was adapted and available on the Rush website. Rush arranged for the availability of on-line

continuing medical education credit. It has begun working with collaborating organizations to disseminate information about the availability of the course and will present at national conferences.

The six-module on-line training program will be available within the next month. RRF staff has previewed the training program and considers it to be first-rate. The information is very extensive. Participants taking the course for continuing education credits can start and stop the course at any point, based on their schedule. The content is engaging with video clips and interactive pre- and post-tests. There are well organized course outlines, resources pages, and glossaries. There is also a laminated pocket reference card that physicians can have readily available for quick tips. The training program will be useful both in a continuing education setting and in a front-line clinical setting as an easily accessible reference tool.

The dissemination plan is well under way. At least eight health care institutions and professional member organizations have agreed to provide links from their websites to the training program. They include the American Medical Association, American College of Physicians, Gerontological Society of America, American Society on Aging, and Harvard Medical Center. Other health care professionals, notably nurses and social workers, have inquired about access to the course. In response, Rush has applied for continuing education credits for these disciplines, which should provide added incentive for trainees from other professions. The American College of Physicians has shown considerable interest in promoting the program. Not only has it agreed to link the course from its website, but it will also run it in a cybercafé at its annual conference and promote it in its newsletter. Rush is considering mandating the course for its medical students and has scheduled grand rounds on the topic next month.

## **State Advocates Assure Appropriate Use of Civil Monetary Penalty Funds for Quality Care in Nursing Homes**

The Long Term Care Community Coalition (LTCCC) received a one-year \$34,925 RRF grant to assist advocates in four states assure appropriate use of civil monetary penalty funds for improving quality of care in nursing homes. LTCCC is a coalition of 24 consumer, professional, and civic organizations that advocate on behalf of long-term care consumers residing in nursing homes to ensure better care and protect resident rights. Civil monetary penalty funds are collected by federal and state government officials each time a nursing home is fined for non-compliance with Medicare or Medicaid regulations. These fines amount to hundreds of thousands of dollars per state each year. While the law requires that civil monetary penalties be used to improve care for nursing home residents, there are documented cases of failure to record and properly use these funds.

The grant enabled LTCCC to provide technical assistance to advocates in four states (Georgia, Massachusetts, California, and Pennsylvania) to ensure proper use of civil monetary penalty funds. LTCCC's plan was to replicate work that had been successful in New York with advocates in the four targeted states. Advocates learned

about the legal requirements related to civil monetary penalty funds; were taught how to obtain information about current dollar levels and recent usage of civil monetary penalty funds; and successfully advocated for appropriate state and federal action to assure proper use of these funds.

LTCCC developed an advocacy guide on civil monetary penalty funds and shared it via teleconference with advocates in the four states. It helped each state develop a set of goals and a work plan. LTCCC provided technical assistance to advocates as needed. It distributed contact information regarding federal authorities, drafted letters with the correct language to get freedom of information requests accepted and acted upon, and held conference calls every six weeks to assess progress and enable advocates to share lessons across states. LTCCC produced a final report that was widely distributed to advocacy groups, presented at national conferences, and shared with federal agency and congressional staff members.

The state advocates working with LTCCC experienced important victories. Georgia prevented its state Medicaid agency from sweeping civil monetary penalty monies into its general revenues to help close the state's funding gap. Instead, these funds were set aside to save the state's Long Term Care Ombudsman Program. The funds saved were in excess of \$500,000.

In Massachusetts, advocates were able to get language included in the state rules governing civil monetary penalty fund usage that encourage applications for funds to be spent on culture change projects. The language also now requires any application for the use of funds to be signed by family and resident councils.

Pennsylvania advocates successfully obtained information on the level of civil monetary penalty funds received and spent by the state. Advocates had tried unsuccessfully to get this information for several years.

In California, advocates got their state legislature to order an accounting and audit of civil monetary penalty accounts and published findings of the audit. The advocates obtained information that helped them with a campaign to publicize nursing home penalties and bring pressures on facilities to improve.

Perhaps the most promising development that has occurred is a mandate included in the Affordable Care Act requiring that civil monetary penalty funds be used to improve quality of life for older adults in long-term care. The language is much more specific than previous law. LTCCC was in frequent contact with officials from the Centers for Medicare and Medicaid Services about the civil monetary penalty fund issues as the language was being developed.

The expertise provided by LTCCC was vital to the success of the advocates. However, protecting the use of civil monetary penalty funds is likely to be a long drawn out battle, requiring constant vigilance on the part of advocates. LTCCC will be keeping the Foundation informed about ongoing advocacy efforts on this issue.

## **Terra Nova Films Presents Family Caregiving Information through Internet Video Streaming**

RRF made a two-year \$225,000 grant to Terra Nova Films, the largest and leading producer and distributor of videos on aging, to create information for family caregivers using a technique of video streaming on the Internet. Terra Nova worked on the project in partnership with CJE SeniorLife. The project resulted in the production of documentary-style videos, using real people in real-life caregiving situations, coping with loved ones with Alzheimer's disease. Caregivers can access the videos on demand, at any hour of the day.

Terra Nova produced 22 tightly edited video modules on topics such as recognizing trouble ahead with driving and dealing with the emotions of no longer being able to drive. The modules cover several different aspects of a spouse's/parent's downward spiral with Alzheimer's disease and the emotional effects on different family members.

The videos are meant for broad use. Terra Nova launched its own website, [www.videocaregiving.org](http://www.videocaregiving.org). It also created a special link on Terra Nova's main website for use by other caregiver sites such as the National Family Caregivers Association. Input from an advisory board helped make the site as user-friendly as possible. A professional media consultant, experienced in working with caregiver organizations, helped Terra Nova disseminate information about the videos.

Terra Nova has shared feedback on the website. One e-mailer called it "the best site on the internet for caregivers." *Chicago Tribune* health writer Judith Graham called the site "a noteworthy effort with more than enough here to give a viewer a sense of depth of the subject and the emotion surrounding it. Best of all, people spoke in their own words and you could see them struggling with their circumstances."

## **University of Massachusetts Medical School Studies Employer-Sponsored Eldercare Programs**

With a two-year \$215,462 RRF grant, the University of Massachusetts Medical School Center of Health Policy and Research undertook research on the use of employer-sponsored eldercare programs and their effects on workers, employers, and workers' families. There has been a proliferation of services offered by employers to help their employees reduce absenteeism and minimize missing time from work because of caregiving responsibilities, but this is the first systematic study of such programs.

The investigation of the use and effectiveness of eldercare service programs included three phases. The first phase involved obtaining descriptive information on the specific types of eldercare services offered by large employers across the U.S. Information was gathered on eldercare service program features and costs as well as employer management perspectives on program benefits, use, and effects on corporate performance. Senior human resource officials at Fortune 500 companies were

surveyed. Of 464 companies that could be contacted, 115 submitted completed surveys (a 24.3 percent response rate).

The investigation found senior human resource officials view flexible work scheduling and leave programs as the most beneficial strategies for employee retention and recruitment. A majority of employers reported eldercare services help decrease absenteeism, manage employee stress, and boost productivity. However, lack of employee awareness about services and employers' concerns about program costs contribute to low use of eldercare services.

The second phase of the research involved a survey of employees of 108 participating employers to determine user experience with eldercare services and perceptions of service effectiveness. A total of 447 out of 3,892 delivered surveys were at least partially completed (an 11.5% response rate). Employees were those who had requested eldercare services from their employer's eldercare service provider organization. Five major service vendor organizations agreed to collaborate on this part of the project and sent out surveys to employees using their services. Results of employee surveys found that employees ranked flexible scheduling as the most important eldercare service.

In phase three, the project used the above surveys to identify three large employers with the best eldercare services ratings from their employees. Site visits were made to examine characteristics of these companies' eldercare benefits programs and organizational characteristics associated with successful programs, as perceived by the employees using them. The survey results and on-site assessments were used to develop a set of case studies featuring policy recommendations and best practices. Common corporate best practices identified by surveyed employees included: employee-friendly corporate cultures; effective communication about benefits; and employers' consistent search for better eldercare employee benefits.

The research resulted in new insights on how employer-sponsored eldercare services affect productivity in the workplace and employees' perceived work/life balance. Results of the first phase of the research were published in the *Journal of Workplace Behavioral Health*. Findings from the second and third phases of the research will be published in the *Human Resource Management Journal* and the *Journal of Gerontology: Social Sciences*. Other dissemination plans include working with human resource and work/life organizations such as World at Work, the Society of Human Resources Management, and the Sloan Work and Family Research Network, to publicize results of the project.

## **Reconstructionist Rabbinical College Enhances Seminary Training in Aging**

In 2006, RRF made a three-year \$189,668 grant to the Reconstructionist Rabbinical College (RRC) for a multi-faceted initiative to infuse aging content throughout the seminary experience. RRC is a graduate rabbinical school that has approximately 85 students training to be rabbis, cantors, and educators of Jewish

studies. In 2003, RRC established Hiddur, its Center for Aging and Judaism. This is the only systematic training program in aging offered at any rabbinical seminary.

The goal of the RRF-funded project was to enrich Hiddur's curriculum through a variety of activities involving students and faculty. The plan was to increase exposure to elders and aging issues for students, reduce unintentional ageism, and build awareness and skill among the entire student body in responding to older adults. The goal was to shift the way elders and aging are perceived by rabbis-in-training, from a burden or a population to be served, to a resource--a diverse and vital constituency to be engaged in study, worship, and community service.

The project fundamentally changed Hiddur's curriculum and approach to aging. All students encountered practical rabbinical experience with elders as volunteer leaders of Sabbath services in a retirement community. Forty percent of the resident student body took a course on aging issues or participated in an internship to gain increased sensitivity to, and interest in, aging. A new seminar, "Shades of Gray," was offered to deepen the understanding of the spiritual dimensions of aging through encounters with Jewish literature. Several opportunities for students to learn from elders were instituted, including workshops and dialogs between generations and other forms of intergenerational programming.

The project leader held discussion groups with faculty to assess their attitudes and openness to incorporating aging content in their courses. She conducted faculty seminars to introduce them to the realities of aging, explore traditional Jewish perspectives, and consider the impact of aging on rabbinic work. The project leader also met individually with the faculty to raise their awareness of these issues. As a result, all faculty members included aging-related material in their regular courses. Units on aging issues were included in practical rabbinic classes (e.g., medical ethics and pastoral counseling). Aging-related illustrations were also included in practical applications of text and theology.

RRC retained an external evaluator, Vector Group Consulting, to do a post-assessment of the initiative. At the beginning of the initiative, baseline measures were taken on student and faculty experiences and perceptions of aging. Measures included: attitudes toward aging populations; knowledge of older populations and rabbinical work with them; interest in working with aging populations; and potential barriers to implementing aging-focused programming at RRC.

Overall, the post-assessment found that the initiative achieved its goals and was highly successful. The program successfully engaged different audiences, was respectful of students' schedules, and allowed for time for intimate reflection on the topics of aging, older adults, and spirituality. The students and faculty were found to demonstrate broader and deeper awareness of the aging experiences and enthusiasm about the prospect of working with elders as a rabbi. The students revealed an appreciation for both opportunities and burdens experienced by those growing older. While only about a third of students in the pre-assessment imagined working with elders, 100 percent in the post-assessment expressed strong interest in this aspect of rabbinical work. Instrumental to the success of this project was the leadership of the project director, Rabbi Dayle Friedman. She had the vision and the organizational skills

to design and implement a very creative and multi-faceted program. The “Embracing Aging” model will be disseminated in a special issue of *The Journal of Religion, Spirituality and Aging*, focused on clergy training.

### **Three Houses of Worship Improve Accessibility**

During the past two months, three Accessible Faith grantees completed their projects. The first, St. Luke Church of God in Christ, is a 2,000-member, low- to low-moderate income African-American congregation on the near north side of Chicago. Seniors represent approximately 25 percent of the congregation’s membership. In addition to serving its own congregation, the church is the headquarters for the 5<sup>th</sup> Jurisdiction of Illinois-East, consisting of 40 Church of God in Christ congregations.

The elevator in the church had become unusable, and there was limited access to the lower level and multi-purpose room. With a \$26,000 Accessible Faith grant, the church was able to get the elevator repaired. However, the repair turned out to be more extensive and costly than anticipated. Originally, the church was told by contractors that only the leaking hydraulic cylinder would need to be repaired. As repairs began, the hydraulic car was found to be damaged. The scope of the project expanded and ended up costing more than originally budgeted. However, the congregation was able to raise additional funds and arrange financing to complete the work.

The elevator is now operable and used extensively. Seniors meet in the fellowship hall for many activities, including Benefits CheckUp. The church hosts many multi-congregational functions and intergenerational programs. There are plans to establish a senior adult day service now that the lower level is accessible.

The second Accessible Faith grantee, St. Mark United Church of Christ, is a small, 68-member, low-income congregation in Chicago Heights. The congregation is primarily composed of seniors. This very low-budget church has a real commitment to accessibility. With a previous Accessible Faith grant, it replaced an unsafe walkway. The first grant sensitized the congregation to the importance of accessibility. On their own, they raised additional funds from the congregation to renovate entrances and restrooms. Two other congregations meet at St. Mark UCC and benefit by these improvements.

RRF more recently awarded St. Mark a \$13,000 Accessible Faith grant to repave the parking lot. It was unsafe due to an uneven surface. The project involved removing the existing surface, resurfacing the lot, and designating four accessible parking spaces close to the church entrance. The project was completed early and, fortunately, escaped a heavy machinists’ strike by one day.

The third Accessible Faith grantee, Ingleside Whitfield United Methodist Church, is a 127-member, African-American low-income congregation located in Chicago’s South Shore community. More than half of the congregation is elderly. Ingleside Whitfield also hosts a second congregation that does not own a facility. Prior to the Accessible Faith grant, the church had no accessible restrooms on the first floor. Its second floor had no restrooms at all. There was also no accessible route between

levels. An old chairlift to the second floor had become unusable. RRF made a \$30,000 Accessible Faith grant to address these problems.

Plans called for constructing a unisex restroom on the second level, accessible men's and women's restrooms on the first floor, and installation of a portable ramp to provide access between levels. The project went through several changes due to logistical and construction issues. The City repaved the sidewalks around the church and created curb cuts that allowed an accessible path of travel from the street to a different entrance from the one generally used. The church decided it would be better to install a portable lift at the closer entrance and place at least one accessible restroom in a location convenient to the new entry.

A new accessible women's restroom was successfully constructed. The church also completed plans for construction of a lower-level men's restroom and expects to begin this work soon. Costs for the portable ramp and women's restroom exceeded the project budget, but the congregation was able to raise additional funds to complete most of the project. Due to budget constraints, however, the remaining unisex restroom will have to be postponed for the future.

## **Wheat Ridge Ministries Promotes Houses of Worship as Community Assets**

A \$3,000 RRF grant was awarded to Wheat Ridge Ministries to build public awareness of the value of local houses of worship as community assets and to increase the interest of foundations in supporting congregational work. Wheat Ridge Ministries is a service and grantmaking organization of the Lutheran Church-Missouri Synod. It makes grants to Lutheran churches to promote new health and human service ministries.

Wheat Ridge Ministries launched its "Faith and Activism" project last November with a public event featuring guest speaker Robert Putnam, a Harvard University Professor of Public Policy. Dr. Putnam is author of a new book entitled, *American Grace: How Religion Divides and Unites Us*. Following Dr. Putnam's presentation, an interfaith panel of religious and lay leaders discussed congregational life and the role of philanthropy in supporting houses of worship. The panel included Reverend Al Sharp of Protestants for the Common Good, Jane Ramsey of the Jewish Council on Urban Affairs, Reverend John Canary of the Archdiocese of Chicago, Zaher Sahloul of the Council of Islamic Organizations of Greater Chicago, and Sunny Fischer of the Driehaus Foundation.

Approximately 250 people attended the event, including lay and clergy from Roman Catholic, Muslim, Episcopal, Methodist, Lutheran, Jewish, and Presbyterian denominations. A few attendees expressed interest in following up to discuss how to encourage the philanthropic community to support the work of houses of worship. Those who expressed interest included representatives from the Chicago Council of Religious Leaders, Partners for Sacred Places, the Jewish Council on Urban Affairs, and the Driehaus Foundation.

Historically, foundations have demonstrated limited appreciation and support for the important service and advocacy roles that houses of worship play in their communities. Wheat Ridge Ministries' staff has conferred with RRF about ways to connect to other foundations and hopes to convene grantmakers to promote greater philanthropic support for the important work of houses of worship.

## **Illinois People's Action Advocates for Housing Reforms**

In 2009, RRF made a one-year \$35,000 grant to Illinois People's Action (formerly known as the Central Illinois Organizing Project) to continue its project focused on older adult predatory lending. This followed a two-year \$100,000 RRF grant for the project. The objectives were to: 1) achieve reform of federal foreclosure prevention measures to improve modification of home loans by lenders and loan services; 2) organize and empower older adults to advocate for reform of systemic financial abuse; and 3) increase the capacity of Illinois People's Action to become a state-wide community organization.

Although the tide of foreclosures has not been stemmed, Illinois People's Action (IPA) worked relentlessly and creatively to empower seniors to take leadership on the issue and engage policymakers in serious dialog about banking and housing system reforms.

In an attempt to reform federal foreclosure prevention measures, IPA worked with its national umbrella group (National People's Action) and PICO (another collaborative of community organizations) to hold 10 community meetings across the country with the U.S. Treasury. IPA's meeting was the largest, with a turnout of 300 community leaders. More than half of the leaders were seniors. The advocacy efforts led to some modifications to HAMP (the Home Affordable Modification Program), but the program is voluntary and has little enforceability. Two important achievements to which IPA contributed were the establishment of the national Consumer Financial Protection Bureau and the inclusion of age in Home Mortgage Disclosure Act data. This latter achievement is very important because the data will help determine the extent to which lenders are, indeed, preying on seniors.

IPA took the lead in organizing other affiliates of National People's Action to get the Community Reinvestment Act ratings for Bank of America and Wells Fargo lowered. These banks are two of the biggest offenders in the foreclosure arena. IPA formally filed charges with the Office of the Comptroller of the Currency (OCC) and the Federal Reserve. Lower CRA ratings would have implications for these banks' access to federal funds. This action is pending.

IPA was very successful in meeting its objective of empowering older adults to advocate for reform. The project began with a core group of 20 leaders. The group of leaders grew to more than 60 by the end of the grant period. During the third year of the project seniors made presentations to 79 groups, including religious congregations and senior and community groups. In total, over 1,000 IPA members met with legislators, the media, and bank officials during the last year; 75 percent of the IPA members were seniors. They became very knowledgeable about foreclosure and

predatory lending schemes. They advocated for individuals who were in foreclosure. One retired lawyer made the project a cause célèbre. He has dedicated himself to providing at-risk seniors with assistance on legal and banking issues.

Because of the involvement and visibility of so many seniors, IPA was able to gain meetings with many influential policymakers. Federal Reserve Chair Ben Bernanke met twice with IPA's leaders. Others included Illinois Attorney General Lisa Madigan, Consumer Finance Protection Board Director Elizabeth Warren, Treasury Secretary Timothy Geithner, and U.S. Senator Dick Durbin. IPA was very effective in its use of the media. Its work was covered by the *New York Times*, the *Nation*, *Financial Times*, *Huffington Post*, all Central Illinois local papers, radio, and TV stations, and CBS national radio.

IPA made gains in extending its reach beyond Central Illinois as it worked toward becoming a statewide community organization. It established an outpost and hired an organizer for East St. Louis and recruited 20 senior leaders from religious congregations in the area. In Chicago, IPA collaborated with four neighborhood organizations.

IPA has committed to continuing to achieve financial reform. IPA now has a very strong corps of senior leaders to help organize consumers on the issues. Even if the outcomes may sometimes seem beyond reach, the process of organizing seniors and giving them the tools to advocate on behalf of themselves and others is an important achievement in its own right.

## **Guild for Blind Expands Services for Elders with Low Vision**

With a one-year \$18,000 RRF grant, the Guild for the Blind was able to expand services for low-vision elderly. The Guild proposed to expand four program offerings: 1) New Visions workshops; 2) Next Steps workshops; 3) adjustment counseling; and 4) training on adaptive technology.

The Guild achieved its first objective by offering 18 to 20 New Vision workshops in partnership with community organizations in metropolitan Chicago. These workshops include a series of three sessions to introduce tools to help seniors with recent vision loss remain independent. The Guild conducted 17 workshops involving 204 older adults. Ninety percent of participating seniors reported a greater understanding of available products and services and where to obtain them. Seventy percent reported greater confidence in their ability to remain independent. In a six-week follow-up survey, 41 percent indicated interest in attending additional vision rehabilitation workshops on subjects such as kitchen skills, personal appearance, travel, and crafts.

The Guild successfully met its second objective by providing 24 to 28 Next Steps workshops. Next Steps consists of four training classes (each lasting six hours). They teach specific skills such as dining in a group setting, managing medication, using the kitchen, basic sewing, and independent travel using public transportation. The Guild provided 26 Next Step series. Ninety-five percent of the participants completed the training and met acceptable competency in the skills that were taught.

The third objective was to provide adjustment counseling by a licensed counselor at four sites in three-week group sessions. This objective proved more challenging than anticipated. The Guild had difficulty finding community sites that would commit space for the required time allocation. The Guild thus revised its approach and replaced it with a workshop, entitled "Savvy Socializing." The workshop focused on techniques for those with low-vision to use in social settings such as how to introduce oneself and talking about vision loss and how to interact when faces are not clearly seen. Fifty seniors participated. The Guild also added a counseling intern with a focus on gerontology. As a result of the interest by participants, the Guild is now developing a counseling workshop, using reminiscing therapy, which it will test in the future.

The fourth objective was to offer a 14-week adaptive technology training program at three community sites, involving a total of 24 older adults. The program would teach computer skills such as basic word processing, sending emails, and searching the Internet. As it turned out, community sites were reluctant to load adaptive technology software onto their equipment and did not have dedicated computer labs. However, the Guild resolved the problems by purchasing laptop computers with a grant from the Illinois Department of Rehabilitation Services. It offered the training program at three sites (in Wheeling, Oak Park, and Chicago Heights). A total of 20 seniors participated. While participants learned to use the technology, only half were able to master it at the expected level. Many did not have computers at home to practice on, and some of the participants missed sessions. The Guild learned that 14 weeks was too long of a commitment for most of the participants.

The Guild then offered nine shorter workshops on adaptive technology at community partner sites. The workshops attracted 21 seniors. Topics included: how to make your computer accessible using high contrast, changing pointer size, and color; how to use Windows Magnifier; and how to use simple keyboard commands to perform many common tasks in Word. Seventy-five percent of the participants reported they will use the new skills at home, and all reported increased confidence in their ability to complete computer tasks independently. Seventy-five percent said they would be interested in additional training. The Guild will continue with its successful programs and adjust others like the one on adaptive technology to make them even more effective.

## **Northern IL Food Bank Serves More Low-Income Seniors**

In 2008 and 2009, RRF made grants totaling \$65,000 to the Northern Illinois Food Bank (NIFB) to establish a new food distribution program for low-income seniors in DuPage and Lake Counties. NIFB became aware of the increase in numbers of older persons who were food insecure as a result of several calls it received from social workers helping senior residents of public housing. The social workers informed NIFB that, while seniors were able to cook for themselves, they lacked the financial means to procure food and the physical means to travel to a food pantry.

In response, NIFB formed a partnership with Lifelink, a social service organization that owns or operates HUD-subsidized housing. In the first year of the grant, NIFB delivered monthly food boxes to residents of four Lifelink facilities (located

in Elmhurst, Bensenville, and two in Downers Grove). In the second year, NIFB added two more low-income buildings in Waukegan. Each food box contains enough food for approximately 15 to 25 meals. It contains staple food items and information about nutrition and healthy menus.

During the two-year period, more than 3,100 food boxes were delivered to 250 low-income seniors. NIFB learned about the special dietary constraints of the elderly who are receiving home-delivered food products by hiring a licensed dietician nutritionist to design and implement a survey of 100 seniors. Findings from the survey revealed a high percentage of food box recipients with health conditions are directly affected by dietary intake. Many have chronic health conditions such as hypertension and diabetes. The survey also provided information about participants' concerns and food preferences.

As a result of the survey, NIFB began making immediate changes in its program. Food items are now evaluated for sodium, fiber, and added sugar content. NIFB will conduct focus groups in the future to determine if food box changes are meeting participants' expectations.

NIFB was able to secure more funding than anticipated, perhaps because the issue of hunger has become prominent during the economic downturn. Also, food costs were lower than expected. NIFB has been able to continue the monthly food box delivery program beyond the grant period.

In February 2010, Feeding America released its most recent study of hunger in the U.S. NIFB, a member of Feeding America, was a contributor to the study. NIFB was also honored by Feeding America as the 2010 Food Bank of the Year.

## **Catholic Charities of Madison Expands Respite Care**

In partnership with Oakwood Lutheran Services, Catholic Charities recruits and trains volunteer teams from faith congregations to provide respite care for informal caregivers of frail older adults. Working in pairs, the teams provided nearly 9,000 hours of service. Each caregiver receives four hours of service weekly from the same volunteer caregiver team. The team allows the family members of frail older adults to get a break from caregiver duties and provides additional non-medical supportive services such as meal preparation or light housekeeping, minor repairs, and transportation assistance. The service targets the oldest of the old and those who cannot afford costly for-profit in-home supportive services. There is no charge for the services.

In 2009, Catholic Charities, Diocese of Madison, Wisconsin received a one-year \$67,285 RRF grant to expand this Respite Care Team Ministry program. The goal was to recruit 10 additional Respite Care Teams (to be added to the current 17 teams), serve 150 more individuals, and provide additional training to the volunteers. The grant enabled Catholic Charities to hire a new staff member devoted to the program's expansion and coordination.

After contact was made with 30 congregations, six new teams of volunteers were established. Two more teams were being formed as the grant ended, and three more congregations expressed interest in establishing teams in 2011. The new teams represent a mix of urban and rural congregations. The program recruited its first team from a predominantly African-American congregation.

The six new teams include 134 new volunteers. A total of 334 older adults and their caregivers were served by the new and original teams, representing an addition of 146 new families. The number is just shy of the goal of 150 new families. The new and old teams provided a total of 12,467 hours of volunteer service, compared to 8,971 hours of service in the previous year.

More in-service training was provided to the teams than in past years. Mental health and aging was a particular focus of the training during the grant period. Topics included: *Understanding Mental Health in Older Adults*, *How to Communicate with Someone who has Alzheimer's Disease*, *Moving through Change and Loss*, and *Understanding Depression in Older Adults*. The training manual was updated. Attendance at monthly team meetings improved.

Catholic Charities found it took longer to get new teams up and functioning than anticipated. The project's experience underscored the fact that even well-established volunteer-based programs need paid staff behind them for coordination and expansion.

As a result of its volunteer training on fall prevention, Catholic Charities has been tapped by United Way to participate in a community-wide fall prevent program for 2011. This deeper relationship with United Way will hopefully lead to renewed or enhanced funding for the Respite Care Team Ministry program next year and enable the recruitment of even more volunteer Teams. The project demonstrated that, with appropriate staff support, this congregational volunteer program can be a cost-effective model of respite care for low-income caregivers.