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Marketing Services Which Can Provide Help for Frail Elderly Residents Living Within the City of Saint Louis, Missouri

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MARKETING SERVICES WHICH CAN PROVIDE HELP FOR THE FRAIL
ELDERLY RESIDENTS LIVING WITHIN THE CITY OF SAINT LOUIS,
MISSOURI

A Culminating Project Submitted to
The Lindenwood Colleges
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Bachelor of Science Degree

BY

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I appreciate the time given to me by the people I interviewed and the valuable information about the facilities available within the City of Saint Louis which they shared with me.

Individuals affiliated with organizations dedicated to helping the elderly, located throughout the country, were very helpful and described the methods they were using to contact the frail elderly within their communities.

I am indebted Fr. Lucius F. Cervantes for giving me the opportunity to put my theoretical plans to a practical test.

And, as always, my last thanks go to my husband, whose belief in and patience with me made this paper possible.

MHD

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CHAPTER I

INTRODUCTION

The theme of my culminating project is: Marketing Services Which Can Provide Help For the Frail Elderly Residents Living Within the City of Saint Louis, Missouri.

For a long time I have had an abiding concern for the elderly citizens of this country who are not benefiting from services being provided by existing agencies dedicated to the care of the aging and aged.

At one time I had visions of establishing an agency dedicated to serving the elderly. Before developing a plan, I investigated many of the existing agencies located within the community. I was pleasantly surprised to discover that a large number of agencies are already actively helping many of the elderly in need of assistance. Most of the agencies are not, at this time, offering all of the services which would be valuable to their clients, but they are cognizant of these needs and plan to initiate these services when there is available funding. It is also gratifying to know that funding for these services may become available to these agencies because, at this time, October 1979, a bill which will provide additional funds to help the elderly is being presented in the United States Senate.¹

A new agency, especially designed to provide help for the hard-to-reach elderly, is a very tempting concept, in theory; but, in this real world, the project would be fraught with problems.

Marketing a new agency would be a major undertaking. The initial outlay of money would, of necessity, be large to provide physical resources, hire a competent staff, publicize the available services, etc. This approach to the problem would be expensive and should be considered only if it is the one way possible to accomplish the goal.

Within all large cities, including Saint Louis, Missouri, there are many types of service-oriented agencies organized to provide help to various segments of the population. In general their primary concerns are not directed toward the elderly. Enlarging one of these agencies to include service for the frail elderly could be considered. This would be important if the agencies dedicated to serving the elderly were nonexistent or ineffectual. The financial outlay would be considerably less than the formation of a new agency. Methods of marketing the new service could be incorporated within the existing marketing methods. Office space might be available and the staff could offer suggestions about recruiting personnel who are cognizant of the problems of the elderly.

In Saint Louis, this approach, although feasible, does not appear to be sensible because, as I mentioned previously, there are active agencies which are structured to care for the needs of the sixty-plus residents. Initiating or enlarging a program to care for the frail elderly portion of the sixty-plus population within one of these agencies is the expedient method to consider. Therefore, I am limiting this discussion to marketing a special project within a parent agency, such as the Saint Louis Area Agency on Aging (SLAAA).

The problems are to devise methods of marketing programs already in existence and new programs as they are developed, to reach the elderly and to encourage the individuals who need supportive services to apply for them.

Before embarking upon the process of marketing a service-oriented project, it is necessary to establish that there is a need for the product (service) to be marketed. Is there a need for services to provide help for the elderly residents living in Saint Louis? The answer to this question is, "YES". The situation exists throughout America, but I am limiting the scope of my project to the City of Saint Louis. I shall, however, cite examples of methods used in other communities to approach problems similar to those which exist in Saint Louis.

Mr. Bert Kruger Smith, the author of Aging in America, established the need poignantly in the prologue of his book. In Mr. Smith's words:

An Old Woman Speaks

What is it to be a human being? Am I but a reflection cast into the lives of other persons? The schizophrenic child often fears the mirror because he is not sure his likeness will be there. Perhaps the older person withdraws from the picture he knows he reflects in others.

Does a tree falling in a forest make a sound if there are no ears to hear it? Is a person human when he has shrunk into the basic core of self and others have moved away like loose-hanging folds of skin?

What is the sound I make when I am old? Shuffling for sustenance, napping for strength, dressing for no one, waiting for one special visitor. I am a diminished me.

No capital I. No self to fling free, a
bird sailing skyward. There is only a
small i, shriveled within the layers of years.

The evening hours fall suddenly, shutting
out the slanting light which livens the
corners of my home. The evening hours are
a door slammed shut against both friends and
laughter.

Somewhere in the early sleepless morning,
when daylight brings a flicker of promise,
I lie young on my scarcely wrinkled bed
and am warmed by the feeling of my husband's
hand caressing me knowingly or of the child-
fingers on my face or of friend-touch on my
hands. But these moments pass. Daylight
brings no warmth, and at last I rise be-
cause I have always risen and go to prepare
myself for a day which stays too shortly
and a night which comes too soon.

I am an island surrounded by the waters
of my life, my own shores drought-pounded,
desiccated. Only echoes skim the waters of
my island-world --- whispers and words,
songs and laughter, carried by satellite
of memory into my solitude.

Hands lie heavy on my lap --- vein-ridged,
spotted. Once they were like birds in
graceful flight over pots of food, gentl-
ing a crying child. Agile, useful, they
were never still. Now they too are done
with reaching out. They are folded inward.

Memory teases me, evanescent, transforms
me in a breath of time into a bride hold-
ing fear and hope inside my white voile
wedding dress. I am breathless with ex-
citement...No, i am old and breathless
with fatigue.

"I know, I know" they say. "There are
problems with being old." But they do
not know. Everyone has been a child.
All can understand through muffled mem-
ory how childhood was. But none have been
old except those who are there now.

Who can speak for the old? And who speaks
for us? Once, when I was very ill, I lay
unmoving on a bed. The doctor-voices, nurse-
rustles all came to me, barely sounding
through the layers of pain which separated

us from one another. They were talking about me then as if I were not a feeling, hearing, human being, They talked above me and around me as they prepared needles and moved limbs. It was as if I had left my body there to be tended.

And now it is the same. No one looks at me, into my eyes, into the core of me. It is "as if" I am like all who have lived too long, a being to be tolerated, bypassed or humored.

Can no one see that within my soul I exist? The person who loved and grieved and was? I too have hungered, been tormented by passion, known the knife-thrust of pain. Stir the ashes of my being, blow tenderly to bring the flames to light.

Yesterday has fled into the night-time of the past. The imprint remains, like dew on the fall grasses -- the life-smell of sun on a golden rose or of fall grass in the hair of a little boy. The telescope of the mind reverses. What was very close is now remote in the filled mind of memory.

Once I too walked through the hills in the near-rain. The trees were etched clear green, while new-wet brush in the distance seemed filtered like an unfocused picture into vague designs.

So is youth with age. For you who are young, life is close, free-form, clear-colored, significant. For us who are old, the distance of the years turns images into misty shapes, unclear and indistinguishable from one another.

In the daytime, life moves to the cadence of activity. Voices sound down the street, in the house, through the radio. Music plays everywhere. Cars cough; lawnmowers grumble. The teapot whistles.

But at night, the sounds are muffled under a pillow of darkness. The people-noises disappear, and things become animated. A window shade taps on and off in the breeze; a tree whispers against a window pane. A floor board squeaks and a furnace growls.

The night is still and very lonely. The autumn sun cannot warm my bones. Yet this day is mine, lying newborn like a shivering duckling in my hands. Can I create of it a memory to note with others in the autumn of my life? Will I live it or endure it? I make my choice, knowing that life is not a picture postcard, caught forever at a moment of romantic beauty. Venice with its gondolas and singing boatmen is also Venice with problems of pollution and unemployment. Only memory, or love, or will can pin the butterfly wings of the moment onto the board of time.

To create that moment is to be open, a cup to be filled from the sweet essence of experience. To lie in the heart of life, to feel the pain of a stranger or the joy of a friend, is to be alive -- fully alive at any age.

Bring me to the soft fire that I may still₂ give warmth to others...

An aged and very dear aunt of mine once said in reference to growing old, "Our minds are the prisoners of our bodies." In essence she said in one sentence what Mr. Smith stated so eloquently in the prologue of his book.

Need? Yes, there is a need. The following statistics provide reasonable proof that there is a sizable number of "the frail elderly"³ who are in need of assistance and are not using the services which are available to help them. We know that these individuals exist, but we do not know who they are or where they live. We do not know why they do not seek assistance or what specific needs they have.

Census figures and statistics made available through government agencies such as the Social Security Department provide us with knowledge of the number of people, sixty-five years and older, who are living in this country at this time. Using the

total figure of the elderly, information from the Veteran's Administration, available medical data, etc., The Federal Council on the Aging arrived at the following figure. "Thirty-nine percent of persons 65 years of age or older have limitation in major activities due to chronic disease or impairment."⁴

A staff study titled Public Policy and the Frail Elderly, published by the Federal Council on the Aging makes the following statement.

Statistics provide reasonable evidence that frailty is an accomplishment, however unwelcome, of encreasing age. By frailty is meant reduction of physical and emotional capacities and loss of a social-support system to the extent that the elderly individual becomes unable to maintain a household or other social contacts without continuing assistance from others. ⁵

We also know that many of the frail elderly (39% of persons 65 years of age and older) are receiving assistance from members of their family, their church and/or facilities which are provided for them within their communities. But, in addition, there are elderly people who live alone and have no family or friends concerned about their welfare. They do not seek needed medical care and are malnourished, due to limited finances and/or the physical inability to shop for adequate food.

The Saint Louis Area Agency on aging, under the direction of Fr. Lucius Cervantes, composed a Preliminary Draft, dated June, 1979, titled, The Federal Council on Aging, Frail Elderly Model, Applied to Saint Louis, Missouri⁶, which identifies the fact that there are a significant number of the frail elderly living in Saint Louis.

The first word of the title of this paper is "Marketing". But what is marketing? To quote Philip Kotler, "Marketing is the effective management by an organization of its exchange relations with its various markets and publics."⁷ Marketing, as used within this paper, refers to methods an agency can use to acquaint the frail elderly with the available services which will be beneficial to them.

I shall develop my subject, "Marketing Services Which Can Provide Help for the Frail Elderly Living Within the City of Saint Louis, Missouri", following the three rules Mr. Kotler established in his explanation of the need for marketing in a nonprofit organization.

The basic reason a nonprofit organization should be interested in formal marketing principles is that they enable the organization to be more effective in achieving its objectives. Organizations, in a free society, depend upon voluntary exchanges to accomplish their objectives.

- 1) Resources must be attracted.
- 2) Employees (volunteers) must be stimulated.
- 3) Customers (clients) must be found.⁸

1) Resources must be attracted. The question, "What resources are needed by agencies dedicated to the care of the elderly?", will be discussed in the second chapter of this paper. Physical, financial and human resources will be considered. This information must be obtained before planning a suitable marketing project. Suggestions for successful methods of marketing will be considered.

2) Employees (volunteers) must be stimulated. This section of the paper could have been included under the heading of "Human Resources". I prefer, as Mr. Kotler did, to consider it in a separate section because the most important resource of any agency dealing with the elderly is the staff, paid and voluntary, which is trained, dedicated and cognizant of the needs of their clients.

3) Customers (clients) must be found. Statistics prove that there are clients in the area who would benefit from one or more of the services offered by agencies designed to aid the elderly. The third portion of this paper will investigate possible ways of acquainting the frail elderly with the existing services, using various facets of marketing.

All conclusions reached within this paper will be theoretical in nature, unless one, or more, of the procedures discussed has been tested within the target area. At this time, November 1979, I am volunteering at the Saint Louis Area Agency on Aging (SLAAA) and I hope to have the opportunity of testing some of the theoretical procedures. Information I acquire will be presented in Appendix I, page 30.

There are a number of successful programs established in Saint Louis and in other parts of the country. It is logical to assume that programs which have been successful in one location will be successful in other areas. A resume of interviews and correspondence is included in Appendix II, page 34.

CHAPTER II

ATTRACTING RESOURCES

Resources can be divided into three categories: 1) Physical Resources, 2) Financial Resources, and 3) Human Resources.

Physical Resources

Many agencies providing aid to the elderly exist in Saint Louis. The buildings housing these agencies and the equipment they possess are classified as physical resources. Vans owned or leased by the agencies which are used to transport clients, utensils used in the nutrition sites, and all equipment loaned to clients, etc., are classified as physical resources.

Marketing procedures become important when the agency needs to expand and obtain additional space and/or more equipment. As an example, when a volunteer contacts the director and states, "A number of the clients are interested in learning how to knit and I do not have adequate equipment for the project", the volunteer must sell (market) the idea to the director before he will requisition money for the project. To carry this one step farther, the director must have used marketing techniques to obtain the funding to have the money available for projects.

The Board of Directors and/or the Executive Director must convey the needs of the agency to departments of government, such as the Department of Health, Education and Welfare (HEW), members of the community or a foundation and convince the prospective donor that the agency is useful to the community

and that new equipment, additional space and/or staff is vital to the provision of services the agency supplies. Whatever the director may call fund raising campaigns, they can be classified as "Marketing the Services of the Agency".

Within the scope of this paper, the description of the need for adequate physical facilities for a service-oriented agency dedicated to serving the elderly, provides the marketer with a goal, the acquisition of funds necessary to maintain an agency which is important to the well-being of the community served.

In Appendix III, page 33, I have described the physical resources of some of the local agencies dedicated to the care of the elderly.

Financial Resources

Although I arbitrarily divided "resources" into three components, in reality the three are interdependent. Without adequate financial resources, it would be impossible to have suitable physical resources or enthusiastic and talented personnel within the agency. Therefore, we must consider the problem of obtaining adequate financial backing for the provision of facilities before seeking clients. For this reason, methods of funding agencies dedicated to the support of the elderly must be discovered.

I) Government Funding

a) The Social Security Act - The federal government has for many years furnished some financial assistance to the needy elderly. In 1933 the Congress of the United States

passed the Social Security Act, which is administered by the Social Service Administration, a division of the Department of Health, Education and Welfare. From then until now, more and more money has been distributed to provide care for the segments of society needing assistance.

In the case of the elderly, the needs have always exceeded the available funds because of the ever increasing number of people who are 65 years of age or older. (See Appendix IV, page 42) However, within recent years the ratio of money available in relationship to the medical needs of the elderly has improved considerably, due to the passage of Title XVIII (Medicare) and Title XIX (Medicaid). All of the "Titles" mentioned in this paragraph are incorporated within the Social Security Act. At the present time there is legislation pending which is of vital concern to the frail elderly. One bill presents an amendment to Title VII which includes funding for home delivered meals. The other bill, which is included under Title XX, specifies funding to provide ancillary help for the frail elderly. Forms of assistance, such as chore workers and transportation, are included within this bill.

One does not always think of the passage of bills within the legislature as an aspect of marketing. However, the powerful lobbyists have an enormous influence in Congress. In reality, lobbyists are marketers of the first magnitude. "The Gray Panthers" and "The Silver-Haired Legislators" support lobbyists at the state and federal level. More information about pending legislation can be found in

Appendix V, page 44.

b) Federal Grants - When Congress passes a bill, rules for the disbursement of the funds are included. Executive directors of large nonprofit organizations, frequently with the aid of their Finance Committees, keep their hands on the "pulse" of federal legislation. They know when and where to apply for government grants and are expert in composing applications requesting funding. These directors, who are frequently able to secure government grants, are expert marketers. This one talent is, in all probability, the reason why "large" is included in the description of their agencies. Grantsmanship is important enough to deserve a paper devoted solely to this one subject. Suffice it to say, it is a very important aspect of marketing.

c) State Support - Title XIX (Medicaid) stipulated that the federal government will match, dollar for dollar, money which the state allocates to the medicaid fund. Unfortunately the State of Missouri does not avail itself of this potential source of income as much as many states do. For example when a patient eligible for medicaid assistance is a resident of the State of Illinois and admitted to a hospital within Missouri, the home state of the patient (Illinois) reimburses the hospital for approximately 109% of the actual cost of the care for the patient. Missouri, in contrast, reimburses the hospital for approximately 80% of the total cost of care for patients eligible for medicaid assistance. Until recently the percentage was much lower and, at this time, it is doubtful that enough money will be appropriated to pay the designated

80%. Obviously the program has not been adequately marketed in the Missouri State Legislature.

d) Other Forms of Financial Assistance Provided by the Federal, State or Local Government -

1) The expense of printing brochures explaining the various services offered by public agencies is absorbed by the government agencies and provided to clients without charge.

2) Funding for pilot projects is available from time to time. Descriptions of a few pilot projects are included in Appendix VI, page 46. Obtaining the funding for pilot projects signifies the ability of the administrator to "sell" his agency to the government. Selling is marketing.

II) Funding From Private Sources

a) Large Foundations - The philanthropy of foundations, such as Ford, Robert Wood Johnson, Danforth and Rockefeller, is well known. These foundations fund public, as well as private nonprofit, agencies. It is not difficult to imagine the competition which occurs among agencies, as each one vies for funding. The services of a marketer, professional or amateur, who has the knowledge of the particular interests of the various foundations and the ability to write accurate, precise and attractive grant proposals is invaluable when an agency applies for funding.

b) Small Foundations - Located throughout America are hundreds of thousands of small foundations. There are more than two hundred within the Saint Louis area. One method of evaluating a marketer is to discover how many of these foundations he is familiar with and the number of those with some

interest in his field of endeavor he has contacted.

c) Individual Donations - Donations from individuals vary from pennies collected by children to very large donations, in the six figure numbers. All donations are important. The children appeal to the media and the publicity has a positive effect on the agency's image within the community. A million dollar donation can provide a monument to the donor. The Queeny Tower, a building within the Barnes Hospital Complex, is a good example. Mr. Edgar Montsanto Queeny, during his lifetime, donated millions of dollars and hundreds of volunteer hours to the hospital.

The most impressive fund raising campaign I ever witnessed occurred in the city of Melbourne, Australia. The entire city was involved in raising money for the children's hospital of Melbourne. Details of this fund raising drive are included in Appendix VII, page 47.

d) Religious Organizations - The Judeo-Christian doctrine states that the older members of society should be revered. The twelfth paragraph of the twentieth chapter of Exodus in The Bible states "Honor thy mother and father, that your days may be long in the land which the Lord thy God has given you". Churches and synagogues throughout America sponsor programs designed to aid the elderly. The services provided by religious organizations are usually financed by private donations and a portion of the church budget. As in any organization, the appeals made by individual churches depend upon marketing techniques, to be successful.

Churches do more than supply financial assistance to agencies interested in helping the frail elderly. The church is able to be a valuable provider of human resources. Many church members are active volunteers, striving to help the elderly. As an example some churches have "adopted" a nursing home and members of the congregation visit the residents of the home as "friendly visitors".

However, to my surprise and sorrow, I discovered, when I visited certain churches, that they were depending upon the public supported service-oriented agencies to take over the responsibility of visiting their home-bound parishioners. It has been my hope that neighborhood churches would become "good Samaritians" and aid individuals within their area who have no church affiliations as well as their own "flock". It will be a test of my marketing ability to try to convince churches to broaden their horizons, and care for the frail elderly in their neighborhoods, regardless of their religious beliefs.

A number of "crepe hangers" have informed me that the youth of America do not want to volunteer and/or that the "senior citizens" no longer wish to do volunteer work. Of course there are young people who do not want to volunteer and retired people who spend their free time pursuing recreational activities, but agencies such as "Project Ezra" in New York City which is manned by student volunteers and "The Shepherd's Center" in Kansas City which was started and is maintained by people of retirement age, furnish proof that volunteers come from all age groups. It is my hope to interest all members

of the church "family" in volunteering, regardless of age. Appendix I, page 30 describes "Project Ezra" and "The Shepherd's Center" along with other successful programs which "employee" volunteers of all ages.

c) Client Payments - The government regulations state that a client must pay the first sixty dollars of medical care before they are eligible for Medicare money. When the client is unable to pay for a portion or all of this sum, the client may obtain help from Medicaid.

Some of the service-oriented programs, such as "Meals-On-Wheels" sponsored by "Church Women United", require the client to pay for the service if it is financially possible. Usually a graduated scale of payment is requested, depending upon the client's income.

Frequently a client is requested to give a token payment for services if they are able to do so. Many of the clients appreciate the feeling that they can contribute to the program; that they are not receiving "Charity".

Human Resources

Placing "Human Resources" as a separate unit within the section "Resources" is an arbitrary decision, because the development of any organization is dependent upon the ability and enthusiasm of its personnel. Individuals make the decisions concerning the physical resources needed. The ability of the personnel to obtain funding (financial resources) will determine the success or failure of a nonprofit organization.

One important means of motivating the human resources in

a profit-making agency, financial benefits such as large salaries and expense accounts, is a relatively unimportant method of motivation within a service-oriented nonprofit agency. The members of the staff require adequate salaries to meet their needs, but one does not seek to obtain a position in a service-oriented agency to "make money". Mr. Kotler mentions attracting human resources. It is my belief that most individuals are attracted to agencies of this type for one of two reasons. They are people who wish to be associated with these agencies because of the goal(s) of the agencies and/or the prestige of being affiliated with altruistic agencies.

Frequently individuals have stated to me that it will become increasingly difficult to recruit volunteers because the traditional source of volunteers, the non-working wife, is diminishing because more and more women are gainfully employed and no longer have the time to volunteer.

I can not challenge the above statement with facts and figures because it's indeed true that more and more women are joining the work force of America. However, I know, from personal experience, that there still are potential sources of volunteers. Numerous times, when I have mentioned that I am volunteering in the Saint Louis Area Agency Aging, the person I am speaking with volunteers to volunteer. The range of age of these individuals is from twenty to seventy-plus. Many people in this country are concerned about the care of the elderly but they do not know how to help. When they obtain

information about programs dedicated to this service they are anxious to become involved. They do not need to be recruited, they recruit themselves.

Although I have limited knowledge about recruiting volunteers for other types of service-oriented agencies, I believe that volunteers will become available, once the needs of the organizations are known.

Manser and Cass in their book Voluntarism at the Crossroads express my sentiments in the following statement.

We believe deeply in voluntarism and in the best of the traditional values it represents; in the intrinsic capacity of voluntarism today to offer individuals an opportunity to participate in projects for the community good and to exercise a forceful voice in decisions affecting their own lives; in the ability of voluntary effort and action to contribute to the solution of societal problems; and in voluntarism as a primary force which can make our democratic society function more effectively, in terms of choice among long-range goals, and with a view toward improvement of the quality of life for all. 9

An exception to the above statement exists within agencies supported by public money, such as SLAAA. In a sense they serve as employment agencies. There are a number of positions available, which are designed to provide employment for elderly and handicapped people. Individuals who fall into this category need supplementary money to increase their limited income. They are employed as assistants in the kitchen of nutrition centers, typists, stock room workers, drivers, etc., depending upon their training and physical ability.

These individuals reap the benefits of many services offered by the agency, as well as financial remuneration. With a few exceptions they enjoy being affiliated with an agency dedicated to helping others.

Because the staff and volunteer workers are proud of "their" agency, they serve as marketers by telling their friends about the agency and encourage them to use the services provided. They also inform the agency about neighbors they are acquainted with, who are home-bound and in need of assistance.

Most of the individuals affiliated with a service-oriented agency possess one thing in common, an abiding faith in the usefulness of the organization. In all other aspects, members of the agency display a variety of characteristics. Members of the staff and volunteer workers provide different services, depending upon their training, native abilities and particular interests. It is, for this reason, possible to compose job descriptions which designate the various duties of the personnel of the agency. Job descriptions of different positions designate the human resources necessary to maintain any given agency.

The first two words of the title of this paper are "Marketing Services". In my opinion, a service agency can sell itself. Individuals who are concerned about the plight of the elderly, and the elderly themselves, seek out agencies which are structured to serve this segment of society. The major role marketing plays in attracting human resources to these agencies is to publicize the fact that these agencies exist and that there is a need for additional help.

CHAPTER III

MOTIVATION OF EMPLOYEES AND VOLUNTEERS

There is an intrinsic motivation, or to use Mr. Kotler's word, "stimulation", existant among individuals affiliated with service-oriented organizations. Human beings enjoy the feeling of being able to help the less fortunate members of society. Helping one another is a basic part of the Judeo-Christian doctrine. However this motivation will dwindle unless it is reinforced with positive stimulus. Herzberg, Mausner and Snyder state:

The factors that lead to positive job attitudes (the motivators) do so because they satisfy the individual's need for self-activation in his work... Man tends to actualize himself in every area of his life, and his job is one of his important areas...

It should be understood that both kinds of factors meet the needs of the employee (also the volunteer); but it is primarily the "motivators" (achievement, recognition, the work itself, responsibility, advancement) that serve to bring about the kind of job satisfaction and...the kind of improvement in performance the industry is seeking 10 from its work force,

Herzberg et al are, obviously, referring to profit-making organizations. However, the statements can also apply to employees and volunteers of nonprofit organizations.

A simplified version of the concept written above which applies to the personnel of a nonprofit agency is as follows: Individuals wish to know, and have it known to others, when

their efforts have actually helped another person.

Some methods of recognizing accomplishments of employees and volunteers associated with service-oriented agencies are described in Appendix VIII, page 49.

The agency method... should be tailored to meet the individual's needs. The... it is necessary to... before planning the... for providing the available services to the client. The... of a number of reasons why the client... for the help they need. They may... and the... they need is available... and... elderly, but they do not seek the assistance for a number of reasons.

- "It is charity and I do not want to be so welfare."
- "I do not want to be with a lot of strangers."
- "I don't want strangers coming into my home."
- "I have no money for transportation."
- "Someone coming to my house and/or living arrangements will make me feel like a nursing home."
- "I can not pay for services."
- "I am home-bound, who can help me?"

The first step to take, before referring a client to an agency, is to involve her family and persuade her that the agency... is help her remain within her own home as long as possible. Naturally the client must be physically and mentally able to take care of herself with the aid of voluntary help before...

CHAPTER IV

MARKETING THE AGENCY TO THE CLIENT

There are various methods of persuading prospective clients to reach out for (seek) the help which is available to them. The specific method used should be tailored to suit the individual client. Therefore, it is necessary to know why a client has not sought help, before planning the strategy for marketing the available services to the client.

We know of a number of reasons why the frail elderly do not ask for the help they need. They may be unaware that the service(s) they need is available, or they are aware that there are Senior Citizen Centers and other services available for the elderly, but they do not ask for assistance for a number of reasons.

Some of their reasons are:

1. "It is charity and I do not want to be on welfare."
2. "I do not want to be with a lot of strangers."
3. "I don't want strangers coming into my home."
4. "I have no means of transportation "
5. "Someone seeing my physical and/or living conditions will place me in a nursing home."
6. "I can not pay for services."
7. "I am home-bound, who can help me?"

The first step to take, before referring a client to an agency, is to resolve her fears and persuade her that the agency is designed to help her remain within her own home as long as possible. Naturally the client must be physically and mentally able to care for herself with the aid of ancillary help before

suggesting the availability of part-time assistance.

The individual who has personal contact with a frail elderly person is the one who must "sell" (market) the agency to the prospective client. Unless the client wants to have assistance, the agency is unable to help her. Therefore, the first step must be to have contact with the prospective client, then one can suggest the names of agencies which are able to assist her.

Locating The Client

How does an agency, designed to provide support to the aging and aged, obtain their clients? The Senior Citizen Centers within the community are filled with elderly people who have been located. One answer to the question is that clients have been referred to the centers by an agency or an individual. The referral method is mentioned first because it is not only the most successful method, it is the easiest. The most common vehicles of referral are:

1. Home health care organizations.
2. Religious organizations.
3. Service organizations, such as Meals-On-Wheels.
4. Individuals (relatives and/or neighbors) call an agency and express concern.
5. Social service departments in organizations such as hospitals, the Division of Family Services and the Division on Aging.
6. Human Development Corporation.
7. Department of Housing and Urban Development.

The reason why the aforementioned methods of bring the client and the available resources together is apt to be successful, is obvious. The client is acquainted with, and usually trusts, the individual who does the referring.

The client may, or may not, follow the advice given to her and request assistance. At least, she knows that help is available and we know that she is living within the community. The task is to make the services provided by the community attractive and to encourage her to use the services she needs to maintain herself in her own home environment.

A far more difficult problem exists. We know, statistically, that there are some frail elderly people living in the community who have no contact with any agency which could provide them with assistance.

The following methods of reaching these "hidden" elderly have been used in different parts of the country with varying degrees of success. The results depend upon the target area and the tenacity of the person or agency searching for the isolated elderly people.

1. Canvassing Neighborhoods - This method is useful, only if the canvasser is known within the community and has proper identification. (At this time, no one is inclined to admit strangers into one's home, especially the elderly.) The success of the canvassing method depends upon the neighborhood being canvassed and the canvasser.
2. Contacting Managers of Hotels Catering to Clients Who Live in Single Rooms Within the Hotel - Within the field of Social Service, these clients are classified as "single room

occupants", (SRO'S). This segment of the elderly are frequently in need of assistance. They do not seek help for the reasons presented earlier in this paper. The manager, if he is willing to cooperate, is valuable because he can, by introducing the client to the service worker, be the bridge which links the client and the service agency.

3. Private Organizations such as "Contact" and the "KMOX Action Line" - These organizations, and others of the same nature, receive many calls from the frail elderly who are afraid to contact public service agencies, or do not know how to go about requesting assistance. Volunteers, in private organizations of this type, have knowledge about the available facilities in the area and can direct the caller to the proper agency. The volunteers protect the individual's identity and they follow through with return calls to ascertain if the client is able to obtain the desired assistance. The volunteers in these agencies are dedicated workers. They keep in touch with the client until she receives help, if the client really wishes to have assistance. The work "if" is significant. Unfortunately many of the frail elderly do not want to receive the help available because they do not want to reveal their identity to the community agencies.

4. Publicity from the Media - Publicity is important in locating and helping the elderly for a number of reasons. Information about agencies received through radio and television stations establishes the agency's creditability. Knowledge of programs of the community organizations disseminated through the media reach isolated elderly and alert them to

the possibility of obtaining needed assistance. The various forms of the media can communicate with individuals who are illiterate or have visual or auditory handicaps.

5. Pamphlets - Printed information, furnished by the federal, state and local governments, describes the services which are available to the elderly. Pamphlets of this type are available for distribution by individuals, such as the home health care personnel, who enter the client's home. In addition, pamphlets should be supplied to churches, neighborhood stores and community organizations.

CHAPTER V

CONCLUSION

It was established at the onset of this paper that the frail elderly of the community need help, of one kind or another, to remain within their own home environment. In addition it was verified that agencies, dedicated to providing service to the elderly, are present in the community.

The problem faced was to discover methods of marketing which will persuade the fragile elderly to seek help from the agencies which supply the services they need. A number of methods of accomplishing this goal have been discussed in the narrative and examples of methods used in various areas of the country are described in the Appendices.

The unfortunate truth is that there are, still, fragile elderly people who are not receiving the help they need. There is no one answer to the problem. Realistically we know that we will never be able to help all of the elderly who need our assistance, but, to prevent discouragement, we should be grateful for our successes and continue to believe that some day, somehow, we can provide help for all of the frail elderly people living in our community.

Locating and helping is a continuing process. If one method does not succeed, try another method. If all existent methods fail, devise a new method.

FOOTNOTES

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6. The Federal Council on Aging, Frail Elderly Model, Applied to Saint Louis, Missouri., Preliminary Draft., St. Louis., St. Louis Area Agency on Aging., June 1979., p. 1.
7. Kotler, Philip., Marketing for Nonprofit Organizations., Englewood, N.J., Prentice-Hall, Inc., 1975., Preface X.
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10. Herzberg, Frederick, Bernard Mausner and Barbara B. Snyderman., The Motivation of Work: Second Edition., New York, N.Y., John Wiley & Sons., 1959., pp. 113-114.
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12. Bureau of Census, Current Population Reports., Series P.23., No 59., May 1976. *

* In APPENDIX IV

APPENDIX I

Project A

Instigate a pilot program designed to devise methods of contacting the frail elderly people, living within one ward of Saint, Louis, Missouri, who are not known to the service-oriented agencies within the area.

Step 1. In the middle of October, 1979, I contacted the Alderman of the "pilot" ward. I explained my goal and requested the names of the Committee man and woman affiliated with the ward. It was my belief that the Committee Men could furnish me with a list of names of the Precinct Captains, who, in turn, would be acquainted with many of the individuals living in the area.

I contacted the Committee Man. He stated that Precinct Captains came and went and that he did not have a list available. He suggested that I contact the churches in the area. (Contacting churches was to be the second step in my project.) His lack of concern for the frail elderly was, in my opinion, very evident.

The Committee Woman I called was cordial and stated that she would compile a list of Precinct Captains and mail the list to me within one week. During the following six week period I called her three times and then wrote a letter to her because I had not received the promised list. I did receive the list one week later. I am grateful to her for sending me the list; however, the time lapse between my initial request and the day I received the information

suggests to me that her concern for the frail elderly was minimal.

In mid December I wrote to all of the Precinct Captains on the list. To date, January 4, 1980, I have not received any responses from my letters.

Step 2. I obtained an interview with a pastor of one of the churches in the area. I was grateful that he was kind enough to fit me into his busy schedule. He, with the aid of some women connected with his parish, gave me a list of seven elderly people who had ceased to come to church.

With the cooperation of the two Senior Citizen Centers located in the area, I was able to ascertain that six of the seven people were aware of and receiving services provided by the community. The seventh person was not interested in obtaining information and/or help from strangers.

I informed the pastor of the results of the investigation and suggested that a member of his parish might be more successful in communicating with the seventh person.

Step 3. I made repeated efforts to call all of the churches located within the "pilot" ward. I was unable to contact, using the telephone, two-thirds of the churches. I have written to all of the churches in the area, explaining my desire to locate and aid the frail elderly people, regardless of their church affiliation and requested their help. I enclosed brochures describing the services available in Saint Louis. Not enough time has elapsed to evaluate this procedure.

Conclusion (To date - January 4, 1980)

I have discovered that, contrary to my belief, churches do not always provide needed assistance to the frail elderly members of their congregations. In the case of the one church I visited, the pastor expected the public service-oriented agencies to provide services for the elderly. Prior to obtaining this information I had assumed that the majority of the "hidden" elderly would have no church affiliation. Admittedly, this conclusion was reached by an experience limited to one church. I have, however, called other churches in Saint Louis and have discovered that a significant number of them do not make scheduled visits to the elderly members of their church.

Project B

Participate in a program called "The Carrier Watch Program". This program is being planned under the auspices of the United Way of Greater Saint Louis. Endorsement has been obtained from the Postal Service and the Letter Carrier's Union. The United Way will coordinate the project with the Saint Louis Area Agency and the Mideast Area on Aging.

Carrier Watch Programs operate, successfully, in a number of American cities, but the concept is new to Saint Louis. The essence of the program is as follows:

1. Frail-Elderly residents of the area, who desire to have the service, will be furnished with a form of identification, such as a red dot inside the mail box.
2. Mail carriers, when delivering mail to the identified

boxes will inform the designated service agency if the mail delivered the previous day has not been collected.

3. The service agency will attempt to contact the client whose mail has not been collected. If the service agency is unable to contact the client, by telephoning and/or visiting the home and is unable to obtain information from neighbors or relatives concerning the client's well-being, the agency will inform the police.

4. If necessary, the police will enter the house to ascertain if the client is ill or has been injured from a fall, etc.

5. The client must cover the identification mark if she is going to be away from her home and unable to collect the mail.

This program is just beginning. The pilot project will include one zip code area in the city and one in the county.

The schedule to be followed is:

1. January 3, 1980 - Information kits delivered to the Area Agencies on Aging.
2. January 7, 1980 (week of) - Training for Letter Carriers.
3. January 10, 1980 - Joint press release.
4. January 14, 1980 - Registration begins.

It is anticipated that this project will be as successful in Saint Louis City and County as it is in other areas. If the pilot program is a success, the service will be extended to include all of the city and county.

APPENDIX II

Successful Methods of Reaching the "Hidden" Elderly in

Saint Louis

Saint Louis Area Agency on Aging - (SLAAA)
560 Convention Plaza
Saint, Louis, Mo., 63101

Sister Ann Roddy - Supervisor of Information and Referral

1. Calls received requesting medical assistance.
 - a) Calls referred to the Cardinal Ritter Institute (CRI).
 - b) CRI will send a nurse to assess the case.
 - c) The nurse will recommend that a doctor visit the client if there is a need to initiate medical care.
 - d) A doctor, provided by the city, will visit the client and order home health care services if needed.
2. Immediate referral to Protective Services if the client is in dire need of assistance.

Senior Citizen Centers located throughout the city

1. Outreach program - Managers attempt to make contact with prospective clients. Names are usually suggested by individuals who are familiar with the services offered by the centers. Managers or Outreach Chairperson contact individuals who no longer visit the center.

Successful Methods of Reaching the "Hidden" Elderly in

Saint Louis County

County Older Resident Program (CORP)

Ms. Jane Vickery - Director of Program

1. Word of mouth - one senior citizen tells another about the available services.
2. Discount service provided by many merchants in the county attract the elderly to the centers to register for this service.
3. Canvassing from door to door - useful if the individual calling is known to the person visited.
4. Information dispersed by individuals who work in the community and are trusted. Ex. Field staff of the Visiting Nurse Association.

5. Use of the media to inform prospective clients about the validity of the program.
6. All age groups participate in reaching the isolated elderly.
7. Pamphlets describing the programs sponsored by the agency are available in churches, stores which participate in the discount program and community organizations.

University City Senior Service Program

Ms. Connor - Outreach Chairperson

1. Clients of senior Center mention the facilities to friends.
2. Transportation is provided for the elderly to take them to the center, a doctor, shopping, etc.
3. Ms. Connor visits individuals whose names have been referred to her from various sources.
4. News Letter describing the services provided by the Senior Service Program is distributed to 1500 people.

Successful Projects in Other Cities

Project Ezra - New York City

Project Ezra is a nonprofit agency serving the Jewish elderly living on the Lower East Side of New York. It is operated by a small part-time staff and a slightly older, but still youthful Board of Directors.

The agency recruits volunteers to visit the elderly on a weekly basis. Volunteers are recruited from nearly every college campus in New York and from the Hebrew high schools. Approximately 200 young people volunteered last year. 125 visited, on a weekly basis, one or more clients. In addition to the home visiting they maintained a center for social activities, planned outings such as picnics and theater "parties", cleaned and repaired synagogues in the area which were in a state of deterioration.

Methods Used to Reach the Isolated Elderly

1. They canvassed low income housing projects.
2. They notified potential sources of referrals, such as social service agencies, shuls, hospitals and stores, about the services rendered by the agency.

San Francisco Senior Center

Finding the Isolated Older Person:

1. Use social service agencies as case finders.
2. Use other professionals as case finders.
 - a) Doctors.
 - b) Ministers.
3. Use hotel managers as case finders.

Catholic Youth Organization - Under the auspices of the Archdiocesan Commission on Aging - Los Angeles

Steps to Take in Organizing a Search for the Elderly Are:

1. Visit the pastor of the local church to get his cooperation in such a project.
2. Ask permission to put a notice in the parish bulletin for volunteers to make door to door calls in search for elderly citizens.
3. Arrange for a contact number so that prospective volunteers can offer their services.
4. Stress the need for volunteers of any age; teenagers have been very helpful; the local or church senior citizen clubs can be very helpful.
5. Indicate that the main qualification for these volunteers is their interest in talking with elderly people and listening to what they have to say.
6. All volunteers should be trained and equipped with identification cards signed by their pastors.
7. All volunteers should have a list of available services and be ready to report the need for special services.

Creed of this organization:

"There are lonely elderly persons living in Senior Citizen's Hotels, in residences for seniors in Public Housing Projects, and many are living alone in their own homes or apartments, which may be drab one-room places with little cheer.

Elderly Citizens need to know that their loneliness is a concern of the entire nation and that there are people interested in knowing them and helping them."

The Shepherd's Center - Kansas City, Missouri

"This center was started in 1972 as five people helping seven people. Today there are more than 300 older volunteers helping some 5,000 persons a year."

At the present time it is affiliated with 22 churches and synagogues.

The overall mission of the center is to provide an alternative to institutional care. It offers thirteen services such as "The Friendly Visitor", "Meals-On-Wheels", etc. One of the suggestions given to volunteers is to "Be alert to those on the edge of survival".

The organization sponsors a training center to provide information about organizing similar programs in other areas.

APPENDIX III

Physical Resources of Some of the Local Agencies Dedicated to the Care of The Elderly

Program of Alternative Care for the Elderly (PACE)

The following description is quoted from a brochure describing the project called PACE.

The City of Saint Louis, through the Mayor's Office has determined that many older persons would benefit from supervised care outside their own homes which would keep them from full-time institutionalization. Hence, the Day Care Treatment Center Concept was born. The goals will be; 1. To Rehabilitate the participant to the maximum functional extent possible through a variety of therapeutic services; 2. To Maintain the participant by providing the needed medical monitoring and supportive nutritional and social services to promote his/her independent living in the community; 3. To Prevent the participant from premature decline and inevitable institutionalization by providing health education and stimulation in a socially-supportive and therapeutic environment.

Criteria for Admission

The potential participant must show evidence of needing at least two of the five major services.

The five major services are:

1. Occupational Therapy
 - a) Increasing the person's independence in everyday activities through instruction, home evaluation and adaptive equipment.
 - b) Providing individualized and group activities that will develop the entire person to become more functional.

2. Physical Therapy
 - a) Assistance in ambulation abilities.
 - b) Providing rehabilitative services that enable the participant to gain maximal use of extremities.
3. Speech
 - a) Assessment or evaluation of existing speech conditions.
 - b) Therapy with existing problems.
4. Medical
 - a) Education and/or monitoring with perscribed medications.
 - b) Ongoing observation of medical condition and appropriate treatment as early as changes occur.
5. Social Services
 - a) Assessment of mental Health status.
 - b) Individual and group counseling on appropriate subjects (i.e. loneliness, grief, etc.)
 - c) Appropriate community planning and referral with participant and family involved.

Other Services Provided:

1. Transportation to and from center.
2. One complete meal and two snacks.
3. The PACE team will be available for consultation and liaison with each participant's physician.
4. Social Activities
 - a) Increased awareness of relationships.
 - b) Recreational activities geared to the promotion of leisure time skills.
 - c) Socialization to provide pleasure for the participants.

Admission Process:

1. Referral (by self, family, social worker, physician, etc.)
2. Evaluation by staff outside the center.
3. Team assessment for admission based on criteria established. Final decision made by Medical Doctor, Adult Nurse Practitioner and Director.
4. Pre-placement in Center by participant for part of a day.
5. Physical examination by physician of choice.
6. Admission date established.
7. Individualized daily activity program designed for each participant.

8. Monthly assessment of activity program and the participant's progress in the Center.

Eligibility:

Any City of Saint Louis resident over the age of 60 may be referred and will be evaluated for the appropriateness of placement.

Cost:

The cost of participation by each enrollee is based on his/her ability to pay - a budget plan will be established at intake.

Staff:

Director - Social Worker
Medical Director - one-fourth time
Adult Nurse Practitioner - one-half time
Occupational Therapist
Physical Therapist
Recreational Therapist
Graduate Licensed Practical Nurse
2 Hospital Attendants
Typist Clerk
Custodian

Note: The resources of this Day Treatment are excellent. This program could be a model for other Day Care Treatment Centers throughout the country. This Center opened in the fall of 1979. Prior to opening it had applications far in excess of the capacity of the number of the number of individuals the Center was equipped to handle. The Center is limited to 25 persons a day and a maximum of 40 persons if all participants do not come on a daily basis. One can only surmise how many centers of this sort would be necessary to serve all of the eligible people living in Saint Louis.

II Information obtained from a telephone conversation with Dr. Virginia L. Larsen, Medical Director of Truman Center.

Needs of the Elderly People Residing in Saint Louis.

1. Adequate housing for the aging and the aged.
 - a) Special equipment such as ramps, bath room fixtures with hand rails, lowered cabinets and other equipment, such as stoves and refrigerators, adapted to accommodate clients in wheel chairs, etc.
2. Adequate available transportation designed to accommodate wheel chairs, etc.

Services available:

1. Truman Restorative Hospital
2. Program of Alternative Care for the Elderly (PACE)
3. Koch Hospital - Intermediate Care Center. (Some domiciliary type services.)
4. Veteran's Administration.
 - a) Foster Care Plan for the Elderly.
 - b) Family can bring client to Veteran's Administration Hospital for check-up.
 - c) Visiting staff goes to home of client.

III Information received from an interview with Elaine Wornick, Director of one of the Senior Citizen Centers in University City, Mo. Some of the services provided are:

1. Nutrition Centers, and Meals-On-Wheels Program.
2. News Letter distributed to 1500 people.
3. Transportation provided. (At the time of the interview a two-way radio system was being installed in the bus to provide prompt care for clients needing transportation.)
4. Outreach Program - A member of the staff visited all of the prospective clients referred to the Center.
5. Discussion groups have been formed and are continuing to meet, providing friendship and intellectual growth.

APPENDIX IV

Increase in Numbers of the Oldest

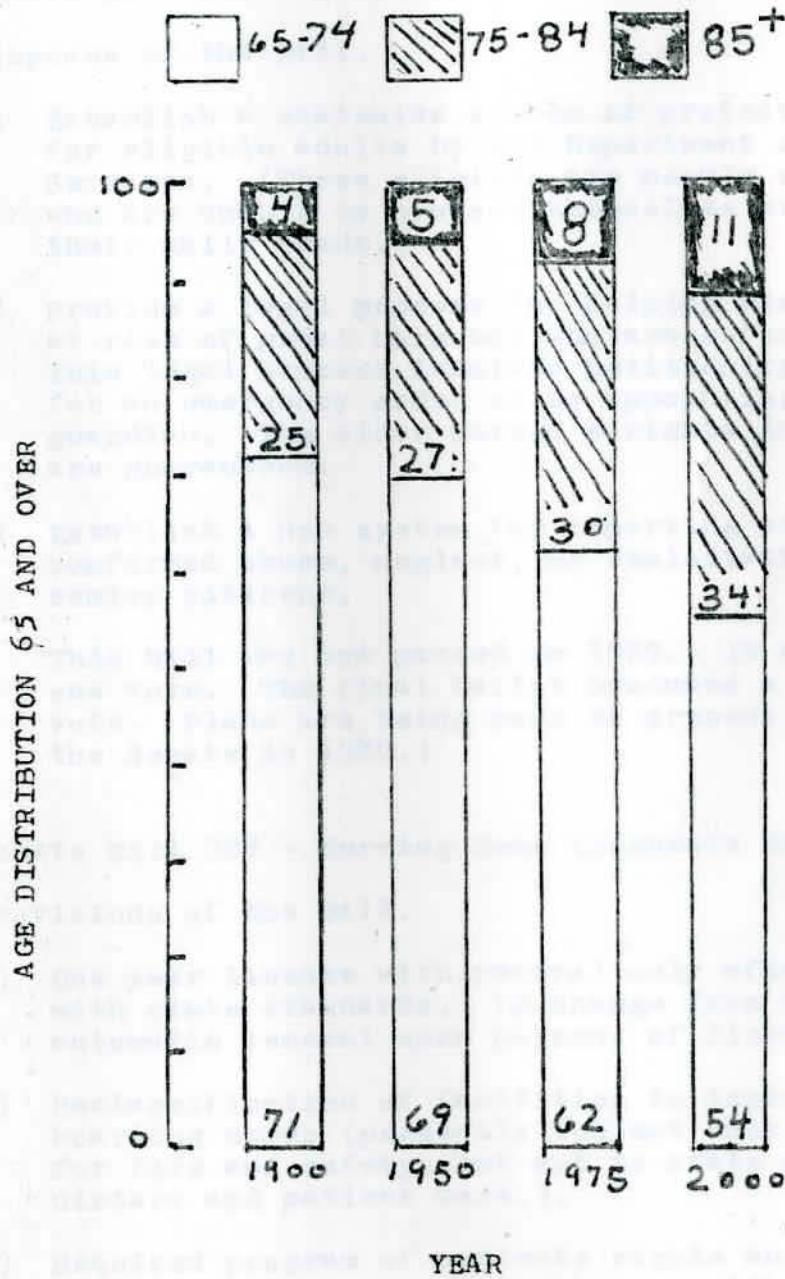
Between 1977 and 2035, the total population in the United states is projected to grow by about 40%, from 217 million to 304 million persons. The elderly population is projected to more than double in size during this same period from 33 to 71 million persons. The segments of the elderly population that will be growing most rapidly will be the oldest of the old, women and persons of races other than white -- the same groups that have suffered more from such common problems of the elderly as poor health, social isolation and poverty.

The population 75 years and older has experienced a ten-fold increase since 1900 and the age group 85+ has grown about seventeen times while the size of the 60-and-older population has increased by nearly seven times. Currently, about nearly 40% of the elderly population is 75 and older, and this proportion is expected to increase to 45% by the year 2000. The 85+ group now constitutes one of every sixteen elderly persons; by 2000 they will represent one in every eleven. 11

The Percentage of the Very Old Among
the Elderly is increasing.

(See Graph on Page 43)

The Percentage of the Very Old Among the Elderly is increasing



Note: Figure rounded to nearest total percentage

APPENDIX V

State of Missouri Bills presented in the Missouri Senate in 1979 which dealt with problems of the elderly.

1. Senate Bill 335 - Adult Protective Services Bill.

Purposes of the Bill.

- a) Establish a statewide system of protective services for eligible adults by the Department of Social Services. (Those eligible are people over 60 years who are unable to protect themselves or to care for their daily needs.)
- b) Provide a legal process for helping elderly people at risk of great harm but who are refusing help. This legal process involves petitioning the court for an emergency order or by appointing a temporary guardian. The older person's rights in this process are guaranteed.
- c) Establish a new system for reporting suspected and confirmed abuse, neglect, or exploitation of frail senior citizens.

Note: This bill was not passed in 1979. It was defeated by one vote. The final ballot produced a 16 - 16 tie vote. Plans are being made to present the bill to the Senate in 1980.)

2. Senate Bill 328 - Nursing Home Licensure Bill.

Provisions of the Bill.

- a) One year license with renewal only after compliance with state standards. (A change from the current automatic renewal upon payment of license fee.)
- b) Reclassification of facilities to include coverage of boarding homes (presently subject only to local codes for fire and safety, but not to state standards for dietary and patient care.).
- c) Required program of patients rights and grievance procedures for all nursing homes, with penalties for violations.
- d) Mandated reporting of suspected abuse and neglect by all professionals and employees in facilities, followed by prompt investigation by the Department of Social Services.

Note: This Bill was passed in 1979.

The above information was obtained from correspondence from Senator Harriett Woods, Chairman of the Senate State Health Care Committee and/or her office and from bulletins issued by the Missouri Association for the Prevention of Adult Abuse (MAPAA), The Silver Haired Legislature and The Gray Panthers and from conversations with members of the above organizations.

Federal Bills pending in The Congress of the United States of America which deal with problems of the Elderly.

1. Senate Bill 489 - The Medicare Bill.

Provisions of the Bill.

- a) Medicare coverage extended to include primary purpose occupational therapy administered in the home.
- b) Cancellation of the requirement that a person must be hospitalized for three consecutive days before he can claim any health care benefits.
- c) Remove the 100 day a year limit on home health care benefits.

Note: This Bill is "out of committee" and will be presented in the Senate after the Senate reconvenes on January 22, 1980.

2. House Bill 934.

This is a private Bill, some of the provisions of this Bill are similar to those listed in Senate Bill 489.

Note: When and if the Senate Bill 489 is passed and sent to The House of Representatives, the Medicare portion of House Bill 934 will be incorporated within Senate Bill 489.

The above information was obtained from the Saint Louis office of Senator Thomas F. Eagleton.

APPENDIX VI

The federal government is sponsoring a program in five cities in the country. The City of Saint Louis is one of the five cities.

This is a pilot program to ascertain if more of the frail elderly will apply for medical aid if they are not obliged to pay for the first 60 dollars of the cost of care before being eligible to receive Medicare benefits.

The two target areas within Saint Louis are health care clinics, sponsored by the City.

This pilot is in progress, at this time, but definitive results have not been determined.

Another "Pilot Program" is described in Appendix I. It is titled "Carrier Watch Program" and the "kickoff" date for this project in January, 1980.

APPENDIX VII

The Annual Fund Raising Drive of The Royal Children's Hospital
Research Foundation, Melbourne, Victoria, Australia.

The Royal Children's Hospital and Research Foundation is the only institute in the State of Victoria solely devoted to research into the diseases of infants and children. For this reason the fund drive is a state wide project.

Description of the Drive:

The entire city of Melbourne participates in the annual drive which always occurs on Good Friday. The day is a legal holiday and schools and business establishments are closed. The daily newspaper is not printed and the entire building which houses the newspaper is turned over to the fund raising drive. The local radio and television stations devote the entire day and evening to coverage of the drive. Television stars, from all of Australia, come to Melbourne and donate their time to the project. An entire room is filled with volunteers who man the phones as donations are called in. The names of the donors are broadcast. An enormous area, usually used to house the trucks and loading platforms of the newspaper, is filled with a continuing stream of children as they bring in their donations. A clown accepts the donations, thanks and calls each child by name. The procession of children is frequently scanned by the television camera.

In addition to the entertainment provided, the activities, in process at the hospital, are televised. Fortunately for us, my husband, Dr. Philip R. Dodge, and I were in Melbourne on Good Friday in 1977. We were the guests of the Executive Director of the hospital and had "ring side seats" for all of the activities. My husband was one of the doctors who examined a child in front of a television camera. He examined a beautiful ten month old child who was recovering from a cerebral hemorrhage. I, and I assume most of the viewing audience, did not realize that children ever had this condition. This "story" had a happy ending because the child was making a complete recovery.

The event is also politically important. The Prime Minister, the Governor-General of Australia and the Governor of the State of Victoria were present, as well as many other officials of government.

Funds Raised from the Annual Drive:

The Royal Children's Hospital Research Foundation realizes approximately 300,000 dollars from this drive.

Possible use of this Type of Fund Raising Drive in America:

The population of the United States of America is so much larger than that of Australia and the facilities so numerous within one state that the same format would be most difficult to follow.

The Muscular Dystrophy Drive, hosted on a nation wide basis by Jerry Lewis, and the St. Jude Hospital Fund Raising Drive, sponsored by Danny Thomas, do obtain funding from the country as a whole. It is my belief that these drives do bring in large sums of money.

Unfortunately, in my opinion, the plight of the elderly is not as heart-rending as the condition of a handicapped child. The young and the old both need our support.

APPENDIX VIII

The following information was written by Vera Lake, Volunteer Services Consultant, Minnesota Department of Public Welfare. I am quoting directly from her paper, but not using the usual format for designating quoted material because I believe that this format is easier to read.

Continuously, but not always inclusively, the subject of recognition is discussed by directors and coordinators of volunteer programs. There is great agreement as to its importance but great diversity in its implementation.

Listed below are 101 possibilities gathered from hither and yon. The duplication at one and 101 is for emphasis. The blank at 102 is for the beginning of your own list.

I think it is important to remember that recognition is not so much something you do as it is something you are. It is a sensitivity to others as persons, not a strategy for discharging obligations.

1. Smile
2. Put up a volunteer suggestion box.
3. Treat to a soda.
4. Reimbursement for assignment related expenses.
5. Ask for a report.
6. Send a birthday card.
7. Arrange for discounts.
8. Give service stripes.
9. Maintain a coffee bar.

10. Plan annual ceremonial occasions.
11. Invite to a staff meeting.
12. Recognize personal needs and problems.
13. Accommodate personal needs and problems.
14. Be pleasant.
15. Use in an emergency situation.
16. Provide a baby sitter.
17. Post Honor Roll in reception center.
18. Respect their wishes.
19. Give informal teas.
20. Keep challenging them.
21. Send a Thanksgiving day card.
22. Provide a nursery.
23. Say "Good Morning".
24. Greet by name.
25. Provide good pre-service training.
26. Help develop self-confidence.
27. Take time to explain fully.
28. Award plaques to sponsoring group.
29. Be verbal.
30. Motivate agency VIP's to converse with them.
31. Hold rap sessions.
32. Afford participation in team planning.
33. Give additional responsibility.
34. Respect sensibilities.
35. Enable to grow on the job.
36. Enable to grow out of the job.
37. Send newsworthy information to the media.
38. Have wine and cheese tasting parties.
39. Ask client-patient to evaluate their work-service.
40. Say "Good Afternoon".
41. Honor their preferences.
42. Create pleasant surroundings.
43. Enlist to train other volunteers.
44. Welcome to staff coffee breaks.
45. Have a public reception.
46. Take time to talk.
47. Defend against hostile or negative staff.
48. Make good plans.
49. Commend to supervisory staff.
50. Send a valentine.
51. Make thorough prearrangements.
52. Persuade "personnel" to equate work experience with volunteer experience.
53. Admit to partnership with paid staff.

54. Recommend to prospective employer.
55. Provide scholarships to volunteer conferences or workshops.
56. Offer advocacy roles.
57. Utilize as consultants.
58. Write them thank you notes.
59. Invite participation in policy formulation.
60. Surprise with coffee and cake.
61. Celebrate outstanding projects and achievements.
62. Nominate for volunteer awards.
63. Have a "President Day" for new presidents of sponsoring groups.
64. Carefully match volunteer with job.
65. Praise them to their friends.
66. Provide substantive in-service training.
67. Provide useful tools in good working condition.
68. Say "Good Night".
69. Plan staff and volunteer social events.
70. Be a real person.
71. Rent billboard space for public laudation.
72. Accept their individuality.
73. Provide opportunities for conferences and evaluation.
74. Identify age groups.
75. Maintain meaningful files.
76. Send impromptu fun cards.
77. Plan occasional extravaganzas.
78. Instigate client planned surprises.
79. Utilize purchased newspaper space.
80. Promote a "Volunteer-of-the-Month Club".
81. Send letter of appreciation to employer.
82. Plan a "Recognition Edition" of the agency newspaper.
83. Color code name tag to indicate particular achievements (hours, years, unit, etc.)
84. Send commendatory letters to prominent public figures.
85. Say "We missed you".
86. Praise the sponsoring group or club.
87. Promote staff smiles.
88. Facilitate personal maturation.
89. Distinguish between groups and individuals in the group.
90. Maintain safe working conditions.
91. Adequately orient.
92. Award special citations for extraordinary achievements.

- 93. Adequately orient.
- 94. Send Christmas Cards.
- 95. Be familiar with the details of assignments.
- 96. Conduct community-wide, cooperative, inter-agency recognition events.
- 97. Plan a theater party.
- 98. Attend a sports event.
- 99. Have a picnic.
- 100. Say "Thank you".
- 101. Smile.
- 102. (Start your own list.)

* * * * *

The following information was obtained from a pamphlet furnished by the American Red Cross titled Sharing ----- Volunteer Recognition. I am following the format used in the original material rather than the traditional method of using quoted material.

GROWTH ON-THE-JOB

Green Thumb Treatment

Helping a volunteer to grow on-the-job can mean many things and is the most important form of recognition. If you forget all other types of recognition, remember this one!

It means:

- ... Giving time and privacy to conduct a meaningful initial interview. Concentrate on the talents and interests of the volunteer rather than "selling" a certain job.
- ... Placing the volunteer in the right job, the one which interests the volunteer and is natural for his capabilities.
- ... Orienting and training the volunteer to perform effectively.
- ... Training all staff members to accept the volunteer as a team member.

It means:

- ... Asking the volunteer to attend workshops and conferences to further the individual's knowledge and skills.
- ... Giving the volunteer an opportunity to express his ideas on a one-to-one basis or in a group to assure him a "voice" in the chapter's policies.
- ... Recognition of competency by means of promotion.
- ... Advancement to policy making roles.
- ... Providing an invitation to a staff meeting.
- ... Having an experienced volunteer help train new volunteers.
- ... Allowing the volunteer to work in different areas to gain knowledge of the total program.
- ... Inviting volunteers to a chapter board meeting.
- ... Suggesting a volunteer for area and national jobs, committees and boards, and for national conventions.
- ... Protecting the rights of a volunteer who chooses to provide service, and is task oriented, by evaluating the job description, the physical surroundings where the volunteer works and the staff who supervises him.
- ... Providing warmth and security by saying and having the staff say, "Thank you", "We missed you last week", "You are doing a good job", "Are you finding the work interesting?", and "How is your family?". These short phrases can be said in person, on the telephone, or in a letter. Try all these methods for good communication with your volunteer staff.

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