# Bridging Gaps: Senior Companions Supporting Transportation to Outpatient Procedures for Older Adults

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# Agenda

Who we are as the Senior Companion Program.

Our transportation program.

What we have learned.

What similar research has found.

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# AmeriCorps Seniors



RSVP- Retired Senior Volunteer Program- Sponsored by Catholic Charities

SCP- Senior Companion Program- Sponsored by Catholic Charities

FGP- Foster Grandparent Program

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# AmeriCorps Seniors Requirements

- 55 or older
- Income requirements for SCP and FGP
- · Commit to 5 hours a week
- · Background check required

Senior Companions Provide:

Companionship

Respite for family members

Assistance with transportation when possible

Outings outside of the home

# Outpatient transportation

Companions receive:

8 hours of stipend pay

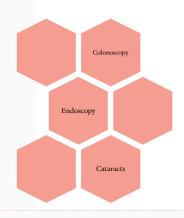
Milage reimbursement

- Requirements to utilize our transportation program:
  - · Reside in Marion County
  - Be 55 and older
  - Need assistance with one of the procedures we offer

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# **Outpatient Procedures**

Procedures we can assist with



- The Process:
- Referral received
- Contact companion and client
- · Client Agreement
- Procedure
- Follow up

"He was right there waiting for me when I got out. I could have cried I was so thankful."

-Former colonoscopy client

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# Our program a year later

We average 4 outpatient procedures a month

4 companions currently assist with outpatient procedures with several more interested

We currently receive most referrals from 3 major hospitals in Indianapolis (IU, Eskenazi, and Community)

# Current barriers we see for transportation

Limited family available to help

Unreliable transportation services

No medical companionship provided

High cost or unable to cover the cost of other transportation services

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### How barriers affect health

Patients with transportation barriers carry a greater burden of disease which may, in part, reflect the relationship between poverty and transportation availability (1)



Routine medical procedures are delayed



Rescheduled and delayed procedures from the procedure center



Hospitalization or extended hospitalization

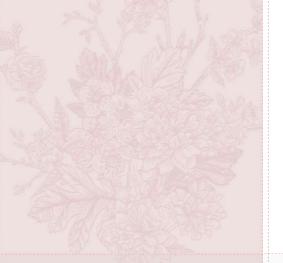
In total, 135 participants did not use healthcare services (i.e., family doctor or medical specialist); 55 used family doctor services, and 54 used medical specialist services; 10.6% reported cancelling medical appointments due to the lack or cost of transportation. (2)

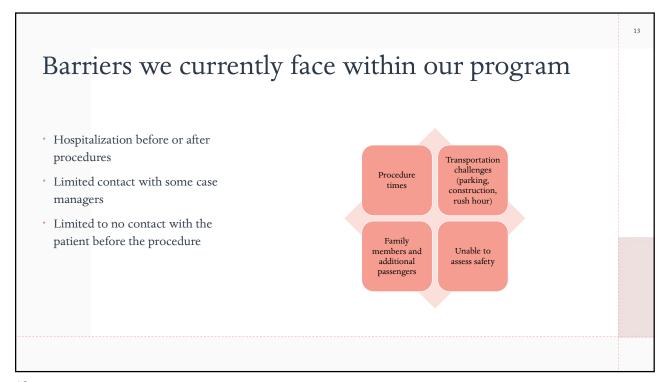
244 older adults living in rural areas and small communities participated in this study.

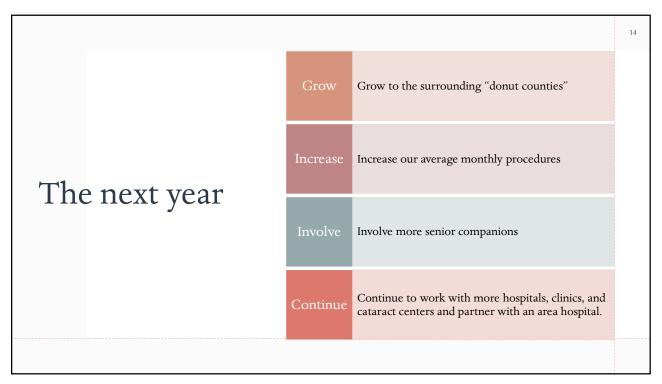
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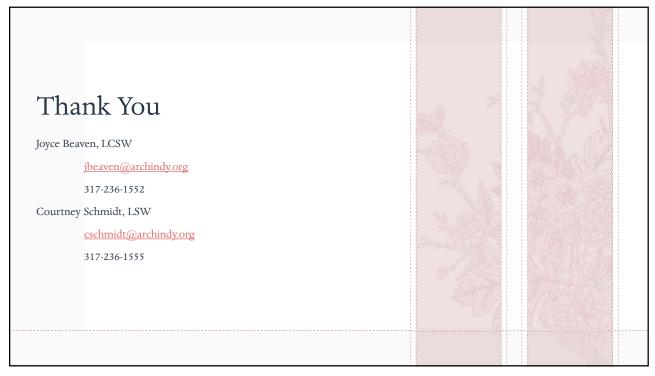
Transportation barriers and residential segregation are also associated with late-stage presentation of certain medical conditions (e.g., breast cancer). (3)











Sources

- (1) Wallace R, Hughes-Cromwick P, Mull H, Khasnabis S. Access to health care and nonemergency medical transportation: Two missing links. Transportation Research Record: Journal of the Transportation Research Board. 2005;1924:76–84.
- (2) Sarah Krasniuk, Alexander M. Crizzle,Impact of health and transportation on accessing healthcare in older adults living in rural regions, Transportation Research Interdisciplinary Perspectives
- (3) Dai, D. (2010). Black residential segregation, disparities in spatial access to health care facilities, and late-stage breast cancer diagnosis in metropolitan Detroit. Health & Place, 16(5), 1038–1052.