Introduction

When the Ursuline Sisters of the Central Province entered the National Religious Retirement Office’s (NRRO’s) Planning and Implementation Assistance program in 2013, their skilled-care cost was $20,000 above the NRRO’s reported national average. Without a drastic change in expenses, their savings and investments were projected to be depleted by 2022. The Ursulines knew they had to act. “We were open to all possibilities, whether that meant restructuring our own facility, collaborating with another congregation, or even relocating our sisters,” explained Provincial Leader Sister Rita Ann Bregenhorn.

Part of the Roman Union of Ursuline Sisters, the congregation first came to the United States in 1727 and currently has three provinces across the country. The Central Province has 114 members and includes sisters and ministries in Illinois, Louisiana, Maine, Massachusetts, Minnesota, Missouri, and Texas.

At one time, the community operated two infirmaries, one in Texas and one in Alton, Illinois. In 1992, the Texas facility was closed and consolidated with Alton, a three-story, forty-bed unit. Over time, the census in the Alton infirmary declined, so that by 2012, only eighteen sisters were being cared for there. Underutilized space and staffing requirements resulted in a skilled-care cost of $93,000 per sister. The building joining the infirmary, known as Alton Convent, was home to an additional sixteen sisters who were able to live independently yet benefitted from basic services, such as meal preparation. Because neither location was licensed, the community was not eligible for government benefits and covered all costs of care.
A Community Decision
In April 2012, members were surveyed regarding their greatest areas of concerns for the future. One-third of the replies related to eldercare. In response, the Ursulines created a focus group to study the issue and research possible solutions. The focus group contacted the NRRO and applied for participation in Planning and Implementation Assistance.

“Before we entered Planning and Implementation Assistance, we had no idea of all the financial and consultative help that was available to us through the NRRO.”

Sister Chabanel Mathison, a member of the focus group and part of the team that worked with NRRO

After their initial planning workshop in 2013, the Ursulines received an NRRO-sponsored eldercare evaluation. This feedback, as well as their own investigations, quickly led the focus group to conclude that relocating their sisters to facilities with available Medicaid beds was the most viable option. At a November 2013 meeting, the rest of the community concurred and voted to close the Alton facility. Now the goal was to identify care options where the sisters could continue to live in community—where they would be close to one another, have access to daily Eucharist, and have space to gather for prayer and activities.

Finding an appropriate setting and the necessary number of Medicaid beds proved to be a tall order. In the St. Louis area alone, the community contacted more than forty facilities with no success. However, in late 2013 and after many dead ends, the solutions to their care challenges came in quick succession.

Saint Clare’s Villa: A New Option for Assistance
The Ursulines discovered space was available at Saint Clare’s Villa. Located just minutes from the Alton Convent, Saint Clare’s is a ministry of the Sisters of St. Francis of the Martyr St. George and is designated as a supportive care facility by the State of Illinois. As such, it is eligible for Medicaid reimbursements through the state’s Supportive Living program, which is designed for seniors who can live independently with some assistance. As a Catholic institution, it has a chapel with daily Mass,

Sister Nancy Fearon, 83, relaxes in her efficiency apartment, which includes a small kitchenette and an accessible bathroom.

The Ursulines living at Saint Clare’s gather each afternoon for prayer in the chapel. Daily Eucharist is offered each morning.
ample opportunities for prayer and community, and is home to religious from other congregations as well as lay residents. Eleven sisters formerly living at the Alton Convent now reside there in efficiencies or small, one-bedroom apartments and receive basic services, including meals and housekeeping.

Skilled Care: A Two-Pronged Solution
A community member living in the New Orleans area learned that Our Lady of Wisdom (OLW) Healthcare Center had seven Medicaid beds available in a newly renovated wing. Although the Ursulines of the Central Province were one of the original sponsors of the facility, only one of their sisters had ever received care there. Several sisters in the infirmary had ministered in the New Orleans area, so moving to OLW was like coming home for them. At OLW, the sisters’ rooms are adjacent to one another in their own “neighborhood.” Seven sisters relocated to OLW in the spring of 2014, and, as founding members, the Ursulines will continue to receive priority placement for their sisters as needed. Continues on page 4

Pastoral Care: A Priority
In addition to managing the financial and administrative aspects of the relocation, the Ursulines were also focused on meeting the affected sisters’ pastoral needs. A first step was to apply for an NRRO Management and Continuing Education Assistance award to enable them to engage the services of the Franciscan Sisters of Mary in Bridgeton, Missouri. The Franciscans had recently relocated their own senior members, so they understood the challenges involved. They facilitated a process to help the Ursulines living in the infirmary and Alton Convent cope with their anxieties about relocation.

Moving took place in three phases and was not without heartache. “There were a lot of tears,” said Sister Rita Ann, “and a lot of assurances that we would be with them every step of the way.” Although it was not easy, the community was blessed to have an exceptional lay staff and pastoral presence to support each sister through the transition.

Pastoral care remains a priority as the sisters strive to embrace community life in their new environments. They continue traditions such as “Ursuline Share,” a gathering between the local prioress and community members where sisters receive updates on province news and then reflect on and discuss specific topics. Activities and social events also keep the sisters connected, but their primary link is a shared prayer life.

Sister Susan Kienzler (standing), prioress of the Alton community, meets with senior members living at Saint Clare’s Villa. “This has been a year of learning how we are going to be a community residing in different locations,” she says. “My ministry is to facilitate this new style of community living.”
The final piece of the puzzle came together when the sisters were informed of available Medicaid beds at Price Memorial in nearby Eureka, Missouri. The skilled care facility was a ministry of the Franciscan Missionary Brothers of the Sacred Heart of Jesus. With only five Franciscans left in the community, the brothers felt it was time to give up the center, but they wanted to retain its Catholic identity. So a solution was created whereby the brothers donated the property to a new, nonprofit corporation. The Ursulines provide canonical sponsorship but have no operational or fiscal responsibility for the facility, which was renamed St. Andrew’s at Francis Place. The center is overseen by St. Andrew’s Resources for Seniors System, a senior-services company experienced in working with religious communities.

At thirty-five years old, the facility needed some remodeling. Renovations are estimated to cost $2 million, and the Ursulines have committed $1 million, $500,000 of which came from an NRRO Implementation Assistance award. Enhancements include updates to the dining areas, shower facilities, and entranceway as well as the addition of on-site laundry facilities.

Seven sisters formerly residing in the Ursuline infirmary now live at Francis Place. They continue in community life by living close to one another, attending Mass and sharing meals together, and engaging in other activities as they are able. Right: Sister Mary Ann Luth, 94, prays in the chapel at Francis Place.
The sisters residing at Francis Place are all located on one wing of the building, and each has a private bedroom. Daily Mass is offered, and the sisters have numerous opportunities to gather as a community. Prioress Sister Susan Kienzler and Sister Deana Walker visit Francis Place on alternating days and weekends to ensure the sisters’ physical and pastoral needs are met.

“We’re so grateful for the assistance we received from the NRRO. We would not be where we are today without them. They have walked this journey with other religious, and they were there for us every step of the way.”

Provincial Leader Sister Rita Ann Bregenhorn

The Road Ahead
By taking advantage of Medicaid funding and closing their underutilized facility, the Ursulines are projected to save $20 million over the next ten years. Additionally, the community is working to sell the Alton property, along with other congregational holdings. These changes should stabilize their retirement savings.

Sister Susan Kienzler and Sister Deana Walker visit Francis Place on alternating days to ensure the well being of the Ursulines living there. Top, from left: Sister Mary Ellen Garvey, 92, and Sister Susan. Bottom, from left: Sister Deana and Sister Wilma Wittman, 90.
Five Things to Know About the Relocation Process

Is relocating senior members to a non-congregational facility under consideration at your community? Below are some tips and insights from religious institutes that have completed the process.

1. Communicate! Communicate! Communicate!
Communication should start when the community first begins to consider alternative care options and continue after the last member has transitioned to the new facility. Develop a strategy for how information will be distributed and feedback gathered. Recognize that the terminology and information will be new for many and may require multiple explanations. Be sure to keep lay staff updated and try to frame discussion and decision making in the context of prayer.

2. It takes a village.
Relocation is a huge undertaking! Consider establishing a committee dedicated to researching options, creating a timeline, and presenting recommendations to the community. Alternatively, hire a consultant or eldercare professional to guide the process. Not only can this person handle much of the legwork, but his or her expertise can help avoid costly mistakes and shortsighted planning.

3. Get help! Professional legal and financial guidance are a necessity.
Closing a facility is an extremely complicated process. Strategies for severance packages and the reduction of staff must be created and plans established to reuse, repurpose, or donate equipment, furnishings, and supplies. Consider contacting other area healthcare facilities for information and advice.

4. Establish a team to handle the practical and pastoral details of the relocation.
If the staff and administrative team of your congregational facility have been with your community for a long time, they may want to see members through the transition. Otherwise, it is wise to establish a small committee or group to oversee the move and coordinate the multitude of details involved with packing, transportation, and settling in at the new facility. Devote special attention to pastoral care—a process that should begin long before moving day, continue through the transition period, and provide for ongoing connection with the community.

5. Move frailest members first and schedule moves carefully.
As the census in your congregational facility drops, so will the number of available staff. Move frailest members first to ensure they have access to the care they need. Wherever possible, try to relocate at least two members at a time and consider creating some type of good-bye ritual or gathering for the day before the move. Finally, it may not be possible to relocate all members at the same time. Recognize the anxiety this may produce for those left “waiting” and be prepared to address their concerns.

If your community is considering a move and has questions or needs advice, please contact the NRRO.

Stay Connected
Please send changes in address, phone, e-mail, or congregational leadership to the NRRO, c/o Tiffany Lezama (tlezama@usccb.org), so that we may keep our records and mailing lists updated.
"We take care of our own." This is a sentiment I often hear expressed in my conversations with religious communities. The not-so-subtle subtext is, “We take care of our own in our own buildings.”

As our feature story demonstrates, caring for one’s own need not be synonymous with providing all levels of care in congregational houses or facilities. The Ursulines’ choice to find new alternatives for delivering care and sustaining community is one that a growing number of religious institutes are making. Buildings unsuited for the current population pose significant challenges to the delivery of quality eldercare. In addition, furnishing assisted and/or skilled care for a relatively small number of persons is extremely expensive and risks undermining the financial stability of the community.

The Ursulines and other institutes that have chosen to alter the way they “care for their own” have done so only after prayer and careful deliberation. And while the decision to partner with another entity in providing care is surely difficult, such changes often lead to improved quality of life for elder members. New settings furnish opportunities for ministry that give many seniors a renewed sense of purpose and energy. Sister Rita Ann shares that when the determination was made to close their infirmary, one of their senior sisters remarked, “Well, Pope Francis says that we are supposed to go out and evangelize. Maybe this is our way to do that.”

As the costs and complexities of eldercare delivery grow, so too does the need for collaboration. For many years, religious institutes have partnered both with other communities and with lay organizations in external ministries, and this has been a positive experience. More recently, collaborating in the ministry of “caring for our own” is proving to be a fruitful alliance. The staff of the NRRO stands ready to assist communities in exploring these critical issues. We encourage you to avail yourself of our Planning and Implementation Assistance process and/or the other services available through our office.

May our gracious God pour abundant blessings upon you as you continue to “care for your own.”

Sister Janice Bader, CPPS
The National Religious Retirement Office coordinates the national collection for the Retirement Fund for Religious and distributes these funds to eligible religious institutes for their retirement needs. Our mission is to support, educate, and assist religious institutes in the U.S. to embrace their current retirement realities and to plan for the future.

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