

Utah Commission on Aging
STRATEGIC PLANNING MEETING MINUTES

Thursday, December 6, 2012 from 1:30-3:30 p.m.

University of Utah Health Science Education Building Seminar Room 5100C. Address: 26 South 2000 East.

ATTENDING	REPRESENTING
Kamron Dalton	Governor's Office (non-voting)
Teresa Garrett (proxy for David Patton)	Utah Department of Health
Danny Harris (proxy for Alan Ormsby, AARP)	Aging Advocacy Organizations
Nels Holmgren (proxy for Palmer DePaulis)	Department of Human Services
Becky Kapp (chair)	Health Care Provider Industry
Gary Kelso	Long-Term Care
Dale Ownby (proxy for Jon Pierpont)	Utah Department of Workforce Services
Mark Supiano	Higher Education
Frances (Fran) Wilby	Charitable Organizations
Winston Wilkinson (proxy for Spencer Eccles)	Governor's Office of Economic Development
Michael Cupello	Guest – applied for the Public Safety seat
Katarina Felsted	Guest – Director, U of U Gerontology Program
Kaye Mickelson	Guest – Salt Lake City Mayor's Office
Christie North	Guest – HealthInsight and Chair, Leaving Well
Elizabeth (Bette) Vierra	Guest – applied for the General Public seat

Staff:

Anne Peterson, Interim Executive Director
 Jennifer Morgan, ADRC Program Manager
 Ginger Bair, Program Assistant

1. Welcome and Introductions – Anne Peterson
 - Anne called the meeting to order at 1:34
 - Anne introduced herself and the chair, Becky Kapp
 - Attendees introduced themselves

2. Approval of October Commission on Aging Meeting Minutes – Becky Kapp
 - Becky called for motion to approve
 - Gary Kelso so moved
 - Fran Wilby seconded the motion

Watched an excerpt from the 'Aging Game' video from KUER

3. Commission Mission and Vision – Becky Kapp

a. Mission

- Becky shared statistics from the Building Communities for All Ages meeting AARP and Governing magazine organized in Utah. She cited the Milliken study report which showed Utah has the best city for seniors looking to grow old comfortably. Rankings were for large and small cities.
 - Provo is number one among large metros
 - Salt Lake City is number six
 - Ogden/Clearfield was 50 out of 359 metro cities
 - Logan was 40 out of 259 mid-sized cities
- Asked attendees to look at the Commission’s purpose as stated in the Annual Report and also read examples of other States’ Commissions’ Missions.
- Asked attendees to brainstorm a Mission from this purpose:
 - Kamron Dalton – Do we have a centralized forum for public participation
 - Fran Wilby – More education. We’ve done lots of policy – was this our Mission before?
 - Kaye Mickelson – Coordinating center for aging services
 - Gary Kelso (?) – Advocate for aging community
 - Dale Ownby – Quality of life and independence
- **PROPOSED MISSION: Advocate for and Promote Optimal Quality of Life Opportunities for Utah’s Aging Population**
 - Fran Wilby said does not like phrase Aging Utahns – doesn’t this include everyone? I prefer Older Adults.
 - Mark Supiano – I disagree. Similar to obesity epidemic in our state. Healthy aging starts at childhood as the video described.
 - Teresa Garret – ‘Advocate’ implies policy. Does ‘Promote’ imply education?
 - Gary Kelso – That can be included in a purpose – more detailed and specific.

b. Gap Analysis conducted by Commission Members – Anne Peterson

- Prior scope – broad with long-term plans and short-term with projects.
- Continue coordinating with local and state government, public, and private or move to a long-term multi-year goal?
- ADRC has become a major focus of the Commission. Now the ADRC is functioning this ‘work’ has been delegated.
- ISSUES
 - Expired Members – there are enough empty seats we may not have a quorum.
 - Anne asked attendees what are the other issues facing the Commission?
 - Fran Wilby – updated on Medicaid and Medicare and Health Reform Issues
 - Dale Ownby – Forum where Commission members can present their long-term goals
 - Nels Holmgren – As a division of state government for aging when we advocate for seniors in the legislature we are viewed as self-serving. What we appreciate about the Commission is the neutrality and credibility of the Commission
 - Becky Kapp– weakness – lack of visibility and public awareness we exist.
 - Mark Supiano – small budget – hard to accomplish goals.
 - Teresa Garret – Quality of Life / Aging in Place policies. Proactive and watching for opportunities.

- Becky Kapp – Navigation of health care is more complex. Keeping our older population safe.
 - Gary Kelso – Providers’ side – Obama care. Access to and regulatory
 - Kaye Mickelson – is home-based care/practice coming to Utah?
 - Anne shared a comment from a member who could not attend – the Commission is a high-level place to come and hear and network but we are not actively involved and doing anything. How does the group feel about this?
 - Kaye Mickelson – lack of visibility is an issue
 - Teresa Garret – are there any left-over issues we don’t want to let go of like fraud and financial risk?
 - Dale Ownby – anecdotal issue of technology for seniors.
 - Danny Harris – Pocketbook issues – cost of living.
 - Becky Kapp – Homebuilding safety, unrelated co-habitants, and support services to age in place
 - Bette Vierra – what does aging in place mean?
- c. Focusing our efforts – Anne Peterson/Becky Kapp
- Reinstating the workforce bill
 - Contract with VA to connect veterans with ADRC
 - Recreating Commission sub-committees
 - Retentions and placement of older workers
 - Promotion of Utah as a place to retire
 - Opportunities for older adults to be involved in public education – Daybreak example
 - Anne asked attendees to brainstorm actions for the Commission.
 - How does the group feel about the Take Charge of Your Future booklet?
 - Kamron Dalton – this goes back to the visibility issue and partnering with organizations that can help us.
 - Christie North – is any group in the state already coordinating what’s available? If so, can the Commission be an advisory role?
 - Kamron Dalton – could this be a sub-committee – a group to know what’s available in Utah for seniors?
 - Anne asked attendees what are our gaps?
 - Fran Wilby – not sure this group can address the basic needs of the community other than advocating at the policy level?
 - Kamron Dalton – take the anecdotes and quantify and then focus on helping the entities that exists be visible and educate the community they exist.
 - Nels Holmgren – connecting the dots from services to the actual effect and outcomes.
 - Anne – proposes a Building Healthy Communities for Active Aging Working Group
- d. Operational Assessment – Anne Peterson
- Meeting scheduling – see proposed dates below. Standardizing dates and times? Do Wednesdays work? Vary mornings and afternoons or keep one set time?
 - Method of communication and notification of meetings – attendees said this has been fine.

4. Committee Updates

- a. Aging and Disability Resource Connection – Jen Morgan
 - i. See her handout (appended below)
 - ii. Fran asked how close are you in having someone hired as a Medicaid coordinator? Steering Committee is meeting again next week to make this decision. (It is anticipated that by February's meeting the process of contracting for this individual will be underway).
- b. Leaving Well Coalition, outgrowth of the End of Life Partnership – Christie North, HealthInsight
 - i. Beacon cooperative agreement for Salt Lake MSA and a small portion of this is for creating an E-POLST form. Input electronically by providers and can be accessed electronically by EMS. Utah would be the first state with this.
 1. Kaye Mickelson – asked how will EMS retrieve and how will EMS know to look it up?
 2. Bette Vierra asked if linked with CHIE – yes.
 3. Fran Wilby asked what do the people do that have the paper POLST?
 - ii. Coalition taking charge of finding funding for E-POLST.
 1. Kaye Mickelson asked how many have been filled out? Since paper, do not know. When electronic will know.
 2. Mark Supiano said from his experience percentage is low. Skilled nursing facility population is higher.
 - a. Christie – getting the form done is one thing – making sure it reflects the person's wished is another.

5. Legislative Initiative: Utah Health Care Workforce Financial Assistance – Anne Peterson

- Bette Vierra contacted AUCH and Becky contacted UHA will now support.
- Waiting on Senator Ralph Okerlund to decide whether to take to executive committee.
- Kamron Dalton asked how can we make it more appealing.
- No legislation, just appropriation.
 - Teresa Garret said I think you should try new legislation – change three words – but if you can get it before the entire body stand a better chance.
 - Anne – this has been discussed. Senator Ralph Okerlund cannot carry another bill.

6. Scheduling 2013 Meetings – Proposed dates and time: Wednesdays from 1:00-3:00 pm:

- February 13th at the Alta Club – **move time to Noon-1:30.**
- April 10th at the Bennett Group
- June 12th at the AARP offices, Midvale
- August 14th location TBD
- October 9th location TBD
- December 4th location TBD

7. Other Business – All

- In 2005-2006 each member was assigned to a working group. Would like to see this work process resume.
- Anne asked attendees what else they would like to see on future meeting agendas:

- Fran – Identifying sub-committees – need one for transportation.
- Becky – TeleHealth --(not sure who said this)
- Kaye Mickelson – Access to healthcare
- Adjournment. Please note February 13 is



ADRC Expansion Goals 2012-2013

Medicaid

- Contract with Department of Workforce Services for Dedicated Medicaid Eligibility Worker for all sites to aid in resolving issues with clients when complicated cases arise
- Discuss options for MDS 3.0 Section Q with UDOH, DHS, State Ombudsmen – Can ADRC’s and Options Counseling improve the current system?

Minimum Data Set (MDS) 3.0, Section Q: The MDS is administered to all residents upon admission, quarterly, yearly, and whenever there is a significant change in an individual’s condition. Section Q is the part of the MDS designed to explore meaningful opportunities for nursing facility residents to return to community settings. The MDS 3.0 Section Q allows individuals to express interest in learning more about possibilities for living outside of the nursing facility.

Veteran’s Directed Home and Community Based Services (VD-HCBS)

- Scott McBeth, Director of Mountainland AAA, is currently preparing readiness assessment
- ADRC Program office is connecting with a VA Benefits Specialist to provide in-depth training to all sites to improve knowledge and enhance Options Counseling to Veterans.

This is a package of services that the VA purchases from AAAs and/or SUAs on behalf of eligible Veterans. The VDHCBS program will provide veterans the opportunity to self-direct their long-term supports and services that enable them to avoid institutionalization and continue to live independently at home. The AAA provides facilitated assessment and care/service planning, arranges fiscal management services, and provides ongoing Options Counseling and support to Veterans.

Community-based Care Transitions Program (CCTP)

- Mountainland and Salt Lake County Aging Services have been piloting this program and submitted an application – award announcements due November 30, 2012 (No results yet)

CCTP launched in 2011, created by Section 3026 of the Affordable Care Act, tests models for improving care transitions from the hospital to other settings and reducing readmissions for high-risk Medicare beneficiaries. The goals of the CCTP are to improve transitions of beneficiaries from the inpatient hospital setting to other care settings, to improve quality of care, to reduce readmissions for high risk beneficiaries, and to document measurable savings to the Medicare program.

Statewide Expansion - 2 Potential ADRC sites

Target date - Begin training with Five County Spring 2013

- Five County AOG – serves Beaver, Garfield, Iron, Kane and Washington County
- Davis County Health and Aging Services – serves Davis county