Northeast Michigan Regional Council on Aging Monday, May 23, 2016 NEMCSA Large Conference Room - Alpena

The meeting was called to order at 1:03 by Chairman E. Corpe.

Roll Call

M. Fox, S. Krey, D. Huff, S. Allor, G. Guenther, E. Corpe, K. Schreiner, J. Drozdowski, J. Johnston, C. Athan, C. Proulx, D. Burdine, E. Howell, D. Henig, E. Henig, M. Downs, D. Fay, C. Corwin

Excused: R. Lynch, A. Hepburn,

Unexcused:

AAA Staff: Laurie Sauer, Connie McQuarrie, Susan Bowen, Kelly Robinette, Yvette Smigelski,

Kara LaMarre and Sarah Socia

Guests: Dan Doezema – AASA and Sara Moe – Alpena Senior Center

Ouorum – Yes

Approval of Agenda

A motion was made by C. Athan with support from E. Henig to approve the agenda as presented. Motion carried.

Approval of Minutes

A motion was made by D. Fay with support from D. Huff to approve the minutes of March 25, 2016. Motion carried.

Nominating Committee Report

No report.

Directors Report

Older Michiganians Day – Laurie thanked all who attended. We had a total of 16 participants representing the counties of Alpena, Iosco, Crawford, and Roscommon. Laurie also received a thank you note from Rep. Lee Chatfield. Although they spoke with his aide, he was very appreciative of their time and grateful that people took the time to speak with legislators. A special thank you to Chuck Corwin for leading a group in Matter of Balance exercises that day.

State Budget – The Revenue Estimating Conference shows a state budget shortfall of \$109.7 million for 2016 in the general fund. The Silver Key Coalition is still pressing forward for a \$5 million increase to reach the 7,043 people on wait lists statewide. The 2017 budget is expected to be \$75.4 million below projections.

Guide to Benefits for Seniors – A copy was distributed. Billions of dollars in aid for low-income seniors goes unclaimed. This is a joint effort between the National Association of Area Agencies on Aging and the National Council on Aging to spread the word of available services and programs available for low-income seniors. This guide will also be attached to our newsletter this week. Please encourage your COA directors to make it available at your sites.

Poverty Conference – A handout was distributed. Ruby Payne is an educator and author best known for her book A Framework for Understanding Poverty and her work on the culture of poverty. She provided a conference in our region several years ago. The conference will be held on September 1, 2016 at the Grayling High School. Cost to attend is \$55 per person. This promises to be a very worthwhile conference.

Chronic Disease Coordinating Network – This is a new effort developing in northern Michigan in terms of chronic disease management. A network has been formed for Alpena, Antrim, Charlevoix, Cheboygan, Emmet, Montmorency, Otsego and Presque Isle counties. We were invited to participate in this network funded by Northern Health Plan and District Health Department of Northwest Michigan. The kick-off meeting was held on May 12th. The purpose is to engage community partners in preventing heart disease, cancer, stroke and diabetes across the tip of the mitt and begin a strategic planning process. We will continue to participate and keep you informed as we progress.

Public Act 269 – At the end of April, the state decided not to enforce PA 269 which would have prohibited groups from communicating on ballot proposals, including senior millages, so this is good news. Congratulations to those counties who were successful in their millage bids.

RSVP Monitoring Visit - Last week state and federal monitors were here. Our RSVP covers the counties of Crawford and Roscommon. The review went pretty well. Amy Fuller, our new RSVP Project Director was present with only two days on the job. We will have reports on the RSVP as well as Foster Grandparent and Senior Companion programs in the future. E. Corpe – Does Gaylord have a RSVP. Laurie – Yes, but they are operated by the Gaylord United Way.

Public Hearing – Just a reminder that we will be holding a second public hearing on Wednesday at the Roscommon COA in Houghton Lake at 1:30 pm.

NEMCSA Client Services - Bob Cain is retiring and will be replaced by Valerie Williams. She previously worked for Shelter Inc. and will be a good addition to the NEMCSA team.

Merger – This may be a sign of things to come. We recently learned that the Benzie County COA and their local home health care agency are merging together which is interesting. Dan - I don't know the reasoning behind the merge but Benzie County has had a non-profit home health agency for quite a while.

<u>Public Hearing</u> – Chairman Earl Corpe suspended the Council meeting and officially opened the public hearing at 1:40 pm.

Susan Bowen gave a PowerPoint presentation on the 2017-2019 Multi-Year Plan. A copy of the presentation as well as a copy of the draft plan were distributed and reviewed. The Region 9 AAA is required every three years to write a multi-year plan. The plan is submitted to the Aging and Adult Services Agency of the Department of Health and Human Services and is approved by the Michigan Commission on Aging. The 2017-2019 Multi Year Plan highlights our accomplishments, program priorities, planned services, program development objectives, advocacy, leveraged services, focal points and budgets. This document outlines our direction for the next three years regarding goals, projects, and funding. As a part of this process, we conducted a Needs Assessment Survey. 394 surveys were completed. 57% were age 60-79, 26% were 80 years of age or older, 69% were women, 31% men, 44% live alone, 43% live with a spouse, and one person declared themselves to be homeless. 41% said they were not familiar

with the AAA. In home services considered high priority were home delivered meals, personal care, home management, respite, Personal Emergency Response Systems, and medication management. Low priority was given to chore services and home repair/injury control. High priority for supportive services include congregate meals, outreach, information and assistance, benefits counseling, case coordination, adult day services, senior center services, Disease Prevention/Health Education, affordable housing, and medical transportation. Low priority was given to friendly visitor, telephone reassurance, non-medical transportation, nutrition education, and legal assistance. Other aging services considered high priority include elder abuse prevention services, Long Term Care Ombudsman, caregiver assistance, caregiver counseling/support groups/training, and caregiver supplemental services. Other services considered a low priority were grandparents raising grandkids which includes information and assistance, counseling, support groups, training and supplemental services. 92% said they did not participate in Creating Confident Caregivers. We also asked if survey participants were interested in or thought about volunteering. 72% have not thought about it and 75% said they were not interested in volunteering. Susan also reviewed the core functions of the AAA, funding considerations, the planning and service area, focal points, leveraged services, the six state goals, our regional goals, the direct services provided by the AAA, regional priorities, purchase of service, the budget and advocacy strategy. The following questions were addressed:

- S. Moe What were the high and low priority based on? Susan When participants completed the survey, there were three answers to choose from; high priority, low priority, or no opinion.
- C. Corwin Was living alone or living with a spouse the only option? Many seniors are partnered but not married. Susan There were several choices when answering that question.
- C. Proulx You indicate 84% received the services they sought. Was there any follow-up on the ones that did not? Also, it's odd that medical transportation was a high priority but regular transportation was not. Susan That was a question that followed, we asked if they sought other resources.
- S. Krey The same goes for respite which is a high priority but a friendly visitor is low. Susan The percentages were based on the majority. They were given three options to choose; high, low, or no opinion. Laurie Respite is a break for the caregiver which is somewhat different than a friendly visit.
- D. Fay You really had to think about what services were important when completing the survey. Of course, you want to put all the services as a high priority.
- C. Proulx Do you have a definition for Community for a Lifetime? Dan This is an aging assessment conducted with your community as an improvement planning process that helps to make your community more aging friendly now and in the future. It is submitted to the state who reviews it and makes a decision for designation. Alpena and Otsego counties have already received the designated.
- C. Proulx Are the survey results available on your website? Susan No, but I can compile the results and get you that information.
- S. Krey Does the planned budget include your administrative costs? Is there a way of getting that portion? Susan Yes, that information is on the budget page included in your copy of the draft multi-year plan.

- S. Moe Do we have a number of potential seniors between the 12 counties that should have filled out the survey? Susan We identified 65,000 seniors in our region and of those, 394 completed the survey.
- J. Johnston How was the survey distributed? Susan We utilized our website, all local media, the COAs, the NEMCSA board and this board.
- S. Moe How many were under 60? Susan I don't know that number off hand but I will include it in the information sheet I will develop and get to all of you.

Dan – This was a good comprehensive survey with interesting results.

There were no further questions. Deadline for written and/or electronic testimony is June 6, 2016. Chairman Earl Corpe closed the public hearing at 2:00 pm and the Regional Council on Aging meeting resumed.

Program Reports

Legal Services Board – Jim Mathis reported they will meet in June.

Region 9 Directors Report – Suzan Krey reported the COA Directors met on May 5th the biggest discussion was cost per unit. All the counties are in agreement that it is a confusing process. We all do it differently. We compared costs for in home services and found that we were all over \$20 per unit and agreed that this is the amount we will use as our cost per unit. We're all over the board when it comes to the unit cost for nutrition because we include different items in identifying cost. We want direction and a standardized process for developing a cost per unit. Also, our costs are getting hard to control, we all rely on millage. Is there any way we could get a larger portion of the funds, perhaps more of your administrative funds? Laurie – As you may recall, the last few times we received cuts in funding, we absorbed as much of the hit as possible with our admin. The same goes when we receive increases in funding, we put as much out as we possibly can. We do a lot with the little bit of administrative funds we keep such as technical assistance, monitoring, etc. As much as possible is being put out to the field. The cost per unit has been a struggle. We can't dictate how you run your business but we do need to come to an agreement on what is appropriate to determine cost.

Suzan – We need a standard process of what to include and what you will accept. Laurie – That's what we've been promoting for a long time. We are trying to get to a common understanding of the process.

C. Proulx – I don't understand what the problem is? Suzan – We all need to come to an agreement on what we count in determining cost. For example I have hired staff to deliver meals and figure that into my meal cost, others use volunteers and don't have that to figure in. Laurie – You also have to remember that the funding is a competitive process. S. Moe – It's our choice what to include when determining our unit cost.

D. Fay – We've discussed this at our meetings. We were wondering what is included in the unit cost and how to budget that.

Dan – Uniformity is difficult to get. Usually what other AAAs try to do is say these are the things you can include. It may vary per county. Laurie – That's exactly what we've been working toward, but it's been difficult to get all in agreement.

- J. Johnston When you say cost, that's expenses which you use to determine your unit cost. It will be different between COAs. Laurie There are different opinions even within categories on such things as salaries. Some include holidays, etc. others do not.
- C. Corwin The proposal is \$20 for in home services, what do we currently reimburse? Yvette Cost per units currently range from \$14.25 to \$18. Actual costs is a wider range up to \$30.
- S. Moe Donations make a difference also. That too varies per COA and even annually with each COA.

Long Term Care Ombudsman – Sara Socia reported on the Best Practices Conference held last Friday, about 90 registered. She will report more next month and include the feedback from the evaluations. The speakers were well liked and the laughter therapy was very well received. Sara is continuing work on the Prevent Grant and hopes to start teaching in in the nursing homes possibly in June. She recently helped transition a woman from the nursing home back to her own home which was wonderful. The work of the ombudsman is resident driven so any time you can get the resident to contact her she is able to respond to the request right away.

C. Proulx – When you do the class on bullying will it be set up for all staff or by invite? Sara – Our goal is to make it a mandatory in-service training for all staff, but we will let the nursing home choose who to send. Laurie – We will test it out at a few facilities and tweak it as necessary. Sara – I will start with three homes and get feedback. My goal is to eventually have a kit for their use to train their staff annually.

MMAP Program Report – Susan Bowen reported she is excited about the new reporting system that went into effect on April 1st. She is now able to pull various reports by county, counselor, topics, etc. They went from a federally run system to a state run database. The transition was seamless and the system is very easy to use.

Special Projects Coordinator – Kara met her targets for the Matter of Balance grant and continues to push the Diabetes PATH. Participants of recent Diabetes PATH classes had some impressive decreases in blood sugar levels and changes in their eating habits. We are getting more involvement from local health centers. We have a 4-day Pain PATH leader training coming up with a 2-day cross training for regular PATH. We are the only AAA in the state offering a Pain PATH training. Kara has one person interested in the Creating Confident Caregivers class who will be trained in July. CCC is not set up for group training. If you or anyone you know is interested in CCC, let Kara know.

Advocacy Reports

MSAC – Karl Schreiner reported they will meet this Wednesday so he will report next month.

State Advisory Council – Chuck Corwin reported the Commission on Services to the Aging gave their final approval for the State Advisory Committee report on direct care workers. The report will be sent to the Governor, legislature, and the aging network among others. A new charge for the State Advisory Council has been approved by the Commission and will be announced in June.

Dan – I attended the Commission on Aging meeting and there was a lot of discussion on creative aging. I think that will be a primary direction. Seven or eight other suggestions were discussed. This is also a busy time of year for reviewing multi-year plans and conducting AAA assessments.

Local Updates From Council Members

- J. Drozdowski Last year it was suggested that we include a postage paid envelope to the homebound clients for donations. He brought the green envelope the Iosco COA developed. This makes it easy for seniors to donate. As of April it has increased our donations by \$2,380 over last fiscal year. It has more than paid for itself.
- G. Guenther You only pay for the ones that are mailed? Jozef Yes, it's all done at a print shop.

Action Items:

Endorsement of the MYP – A motion was made by D. Henig with support from K. Schreiner to endorse the 2017-2019 Multi-Year plan. Motion passed unanimously. It will move on to the NEMCSA board for their endorsement on June 3rd.

Questions or Concerns

None

Adjourn

A motion was made by D. Huff with support from C. Athan to adjourn the meeting. The meeting was ended at 2:39 pm by Chairman Corpe.