

**Northeast Michigan Regional Council on Aging**  
**Monday, July 26, 2021 at 1:00 pm**  
**Virtual Zoom Meeting**

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**AAA Director Evaluation** – In accordance with the Michigan Aging and Adult Services Agency Operating Standards for Area Agencies on Aging, an annual evaluation is required for the AAA Director by their Board. The evaluation was sent previously for completion or members can click on the link in today's PowerPoint presentation and complete it now. There are five areas to evaluate: Multi-year and Annual Implementation Plans, Program Goals and Quality of Service, Ensure Compliance of Contracts with Federal, State and Local Entities, Community Relations, Advocacy, and Communications.

The meeting was called to order by Chair D. Fay at 1:08 pm.

**Roll Call**

Mike Maturen, Cindy Sabin, Lorelei King, Carol Wilder, Cindy Fleming, Terry Dutcher, Julie Kendrick, David Burdine, Eileen Howell, Mitzi Downs, Dennis Fay

Excused: Jerry Broad, Darlene Huff, Connie Messina, Roberta Matelski, Mitzi Downs

Unexcused: Eileen Howell

Guests: Lacey Charboneau, Tom Pettit,

AAA Staff: Yvette Smigelski, Vicki Goodburne, Kitty Glomski, Connie McQuarrie, Maija Aikens, Brooke Mainville

A quorum was present.

**Approval of Agenda** – A motion was made by L. King with support from T. Dutcher to approve the agenda as presented. Motion carried.

**Approval of Minutes** – A motion was made by T. Dutcher with support from L. King to approve the minutes of 5-24-21. Motion carried.

**Nominating Committee**

C. Sabin reported Corky Proulx resigned her position as Montmorency Member-at-Large. A motion was made by T. Dutcher with support from M. Maturen to accept her resignation and send a letter of appreciation. Motion carried.

Appointments – Corky's resignation leaves a vacancy on the Legal Services Board and the Nominating Committee. We also need at least two more members on the By Law Review Committee. T. Dutcher and L. King are interested in the Legal Services Board. Meeting information will be sent to them for review before a decision is made. T Dutcher volunteered to be on the Nominating Committee. A motion was made by M. Maturen with support from C. Wilder to accept his appointment. Motion carried. C. Sabin and C. Wilder volunteered to be on the By Law Review Committee. A motion was made by M. Maturen with support from T. Dutcher to accept their appointments. Motion carried.

**Speaker – Mike Maturin, Substance Abuse Prevention Specialist at Catholic Human Services**

Mike gave a PowerPoint presentation. Mike is a Certified Prevention Specialist with Up North Prevention which is an initiative of Catholic Human Services. He is a drug and alcohol educator working in schools and serving on several boards and committees in the community. He is the president of the Alcona COA board.

Trends – Illicit drug use typically declines after young adulthood however, nearly 1 million adults aged 65 and older live with a substance use disorder. From 2000 to 2012, hospital admissions for older adults increased from 3.4% to 7%.

How are the elderly impacted by drugs? Older adults metabolize substances more slowly and their brains can be more sensitive to drugs. Older adults may be more likely to experience mood disorders, lung and heart problems, anxiety, or memory issues. Drugs can worsen these conditions. The effects of some drugs, like impaired judgement, coordination, or reaction time can result in accidents such as falls and car accidents. These sorts of injuries can pose a greater risk than in younger adults.

There are several classes of drugs and various ways they are being used and misused. Prescription Medications – Because of an increase in chronic health conditions, older adults are often prescribed more medications than other age groups, leading to a higher rate of exposure to potentially addictive medications. Risks include accidental misuse of prescription drugs and possible worsening of existing mental health issues. A 2019 study of patients over the age of 50 noted that more than 25% who misuse prescription opioids or benzodiazepines, anti-anxiety medications, expressed suicidal ideation compared to 2% who do not use them.

Opioid Pain Medications – Persistent pain may be more complicated in older adults. Between 4-9% of adults aged 65 and older use prescription opioid medications for pain relief. Between 2013 and 2015 the proportion of adults over the age of 55 seeking treatment for opioid use disorder increased nearly 54% and the proportion using heroin more than doubled in part because some people misusing prescription opioids switch to this cheaper drug. Heroin is about \$10 on the street.

Marijuana – 9% of adults aged 50-64 reported past year marijuana use between 2015 and 2016, but there are no statistics available since the legalization of marijuana in Michigan. Nearly 25% of older adults say a doctor recommended marijuana in the past year. The FDA has not approved the plant as a medicine; therefore, any potential benefits of marijuana must be weighed against its risk. Regular use has been linked to chronic respiratory conditions, depression, impaired memory, adverse cardiovascular functions and altered judgement and motor skills. Marijuana can interact with a number of prescription drugs.

Nicotine and Nicotine Vaping – The CDC reports that in 2017, about 8 in every 100 adults aged 65 and older smoked cigarettes, increasing their risk for heart disease and cancer. Research shows older people who smoke have an increased risk of becoming frail. The FDA has not approved e-cigarettes as a smoking cessation aid. Nicotine is almost as addictive as heroin.

Alcohol – Is the most used drug among older adults with about 65% of people 65 and older reporting high risk drinking defined as exceeding daily guidelines at least weekly. Of particular concern is more than 10% of adults over the age of 65 binge drink, which is defined as drinking five or more drinks on the same occasion, four for women. Research in 2020 shows that increases in alcohol consumption in recent years have been greater for people

age 50 and older compared to younger age groups. Alcohol use disorder can put older people at greater risk for a range of health problems.

Resources for Help - Wellness Response Team 1-800-356-5755. This is a free service for suicide or treatment help 24 hours. Catholic Human Services 989-356-6385. NMRE Hotline 1-800-834-3393 offers help to get someone into treatment, and Prime for Life are free classes discussing high and low risk behaviors.

### **Director's Report**

Laurie is on vacation this week, Yvette reported on the following:

RAC Vacancies – Our membership has been lagging and we could use some help with recruiting new members. While we do have a few counties with no representation (Otsego, Arenac, Oscoda), we could instead fill those spots with a Veteran's Administration representative, medical or Social Services staff member, person from the LGBTQ or minority communities. If you know of anyone that would fit within these categories that might be willing to serve on the board, please let us know.

AAA Annual Assessment – We just wrapped up our annual assessment with AASA. While we do not have the official results, we are hoping everything will turn out in compliance. There is still an ongoing issue with providers having staff members that do not meet full compliance. We are diligently working with them to ensure compliance by restricting their work duties to those things that do not require them to interact or have access to older adults or their information. In regard to the Roscommon COA specifically, they have laid off their executive director and are recruiting a replacement.

Criminal History Checks – In regard to the criminal history checks required for individuals working with older adults, the legislature passed, and the Governor signed Public Act 28, which requires the criminal background checks and includes mandatory exclusions no matter how long ago they incurred. There are three required checks: Michigan State Police-iChat; Michigan Sex Offender Registry; and the National Sex Offender Registry. It is critically important that all entities contracting with the AAA pay attention to positive findings and to ensure compliance with the law. This is no longer just an AASA requirement; it is the law.

State Commission on Services to the Aging – The Commission held their monthly meeting and public hearing in Gaylord on July 16. This was their first in person meeting since Covid hit and it was surprisingly well attended. The Otsego COA had a number of their direct care workers address the Commission explaining their work during the pandemic, their connections with the people they serve, and they also thanked the Commission for their support related to the premium pay rates they have been receiving. Their testimonies were very touching and emotional. Brooke Mainville and Heidi Powers (along with two volunteers) also testified on behalf of the AAA and the Senior Volunteer Programs. It was a very good meeting.

Diversity, Equity, and Inclusion – Coming up next week, the AAA will begin its foray into Diversity, Equity and Inclusion training. We have a scheduled meeting the SAGE Detroit presenting to AAA staff and COA partners about the history of their organization in working with the LGBTQ community. Because northeast Michigan has such a low minority population, it seemed more appropriate to start our training in the area of diversity. There will be a follow up session later in the month. AAA staff will also be participating in DEI training sponsored by

the state. DEI training is now a requirement in our contracts with the state and we, thus, will have to require it of our contractors as well.

NEMCSA New Main Office – There will soon be a new address for the NEMCSA Main Office. The agency has terminated its lease with the Alpena Public Schools on Gordon Rd. and will be condensing operations to the Annex building yet this summer. We are currently in the midst of a major renovation to accommodate the additional staff. Many employees will remain working remotely or have a hybrid status of some office and remote work.

Covid Update – The emergency orders are being lifted throughout the state, which allows for in person meetings once again. We will consider bringing everyone together for our next meeting. How does everyone feel about that? L. King - My concern is if we have hot spots in our region of the variant. Also, if the restrictions are lifted and we do a hybrid meeting, can we still vote if we call into the meeting? Yvette – I will have to look into it. We will also need to do a review of our by-laws to ensure everything is still applicable to how the RAC is currently operating. D. Fay – I'm ok with in person meetings.

Staff Retirement – Lastly, we recently received notice of Susan Bowen's impending retirement today. Many of you will remember Susan and her work with our MMAP program and as planner in our division. Susan did a great job for us, and we applauded her promotion to RSVP Project Director; however, due to some health issues, she found it necessary to retire. We wish her well.

### **Program Reports**

**Legal Services Board** – No report.

**Region 9 Directors Report** – No report.

**Long Term Care Ombudsman Report** – Our new Ombudsman, Maija Aikens introduced herself. Getting back into homes and meeting with residents.

**Planning and Volunteer Coordinator Report** – Kitty reported we have four candidates taking the MMAP Counselor Initial Training on July 26-27-28. Three are ready to take it now. 4 are in the application phase. On September 8-9-10: four more will be trained, one from Otsego and three from healthcare.

Virtual Meetings and Presentations – Monthly Region 9 MMAP Counselor Planning Meetings are held along with the New to Medicare monthly presentations on the second Wednesday of the month at 10:00 am. Participants can connect by internet or telephone. These have been very successful. Ongoing

A virtual MMAP awards ceremony is scheduled for August 18<sup>th</sup> with national speaker Jason Kotecki. First virtual. Thank your MMAP counselors if you see them. We have a fantastic MMAP team in our region.

Medicare.gov is implementing changes to the Plan Finder. Grateful it's happening now before October.

The CMS quarterly client savings audit going well. Two items addressed this quarter. conducted to look for files without uploaded proofs and savings. The audit is to justify the value of the MMAP data.

For MMAP information or questions contact: [glomskic@nemcsa.org](mailto:glomskic@nemcsa.org) or 989-358-4612.

Clients drug lists – recommend for those on pain meds that their plan pays for a medicine review with their pharmacist. Mike also does training on Narcan. \$75 can get without a prescription to help with opioid overdose.

**Special Projects Coordinator Report** – Brooke reported a Creating Confident Caregivers workshop will be held on October 19<sup>th</sup> from 1-3 pm. It runs for six weeks on Tuesdays. She has two more webinars scheduled for her Caregiver Series; August on Assistive Devices, and September on Preparing for the Future. Both will be held from 1-2 pm. Reviewed Caregiver series topics. The next two are Assistive Devices and Preparing for the Future. Go to Facebook to watch the previous ones.

**Services Coordinator Report** – Yvette reported on which COAs are open to the public for congregate meals and services.

**Alcona COA** – Open for congregate dining 7/7.  
**Alpena COA** – Open for congregate dining 7/6 lunch only. Cards and quilting starting 7-16. Other activities begin in August.  
**Arenac COA** – Open for congregate dining 7/7. Open for activities.  
**Cheboygan COA** – Open for congregate dining. From 10-2 limited activities. Tent outside for dining and activities. Wolverine open 8/2.  
**Crawford COA** - Open for congregate dining lunch only no dinner. Activities are limited.  
**Iosco COA** - Hale and Sand Lake open, Tawas on 7/13 and Oscoda opening pending. Activities at sites is limited.  
**Montmorency COA** – Atlanta, Hillman, and Lewiston all open.  
**Ogemaw COA** – Open for congregate as of 7/7. Open for activities.  
**Oscoda COA** – Open for congregate dining. Activities open.  
**Otsego COA** – Open for Congregate dining 7/7 M,W,F. They will continue with Holiday Meals curbside and Friday box lunches.  
**Presque Isle COA** – Onaway and Posen open for congregate dining. Open for activities  
**Roscommon COA** – All sites to open in early August.

All sites are offering curbside meals. D. Fay – We were advised we couldn't do curbside meals once we opened again. J. Kendrick – MCCOA has also discontinued their curbside meals. Yvette – I will get clarification on this.

### **Advocacy Reports**

**MSAC** – Pat Rondeau was not present - No report.

**State Advisory Council** – Brooke attended the N4A conference where the State Advisory Council reported on their released report on Social Isolation with Focus on Equity. The link was shared in the chat for anyone interested. The major points discussed in the report include:

- A person's health, well-being and lifespan are affected by social isolation.
- "Loneliness acts as a fertilizer for other diseases. The biology of loneliness can accelerate the buildup of plaque in arteries, help cancer cells grow and spread, and

promote inflammation in the brain leading to Alzheimer's disease. Loneliness promotes several different types of wear and tear on the body."

- "Social Determinants of Health (SDOH), namely social factors such as appropriate nutrition, housing, access to appropriate healthcare and social services, water supply, income, education, mental health services, jobs, environmental justice issues, overall neighborhood conditions, etc. influence 60-70% of the health and wellbeing of an individual and their surrounding community.
- Older adults in the Detroit service area are dying at twice the rate of those living elsewhere in Michigan.
- "In some areas it is over a 50-mile drive to the nearest hospital. Everything is dependent on owning a car and being able to drive. These remote areas present significant challenges to elders living in isolated areas. It is difficult to get to medical care and shopping. It is also difficult to stay in touch socially and that in itself contributes to social isolation."

The full report can be found at:

[https://www.michigan.gov/documents/osa/SAC\\_Report\\_2020\\_-\\_Social\\_Isolation\\_with\\_Focus\\_on\\_Equity\\_-\\_FINAL\\_-\\_6\\_7\\_2021\\_727188\\_7.pdf](https://www.michigan.gov/documents/osa/SAC_Report_2020_-_Social_Isolation_with_Focus_on_Equity_-_FINAL_-_6_7_2021_727188_7.pdf)

L. King – I saw the report earlier today and it is really packed with information. It made me feel good that they identified rural areas such as up here in northern Michigan where people have to travel so far for healthcare. Brooke – The next charge that the State Advisory Council will work on is Aging in Place. The four specific areas of focus are: 1. Planning for Aging in Place – Before you Retire, 2. New Home Options, 3. First Five Years after Retirement, and 4. Transition: Having Care in the Home.

### **State Updates**

**Aging and Adult Services Agency (AASA)** – Lacey Charboneau reported she is a few months into her new assignment as our field representative. It is AAA assessment season and finalizing of the annual implementation plans. She will join Laurie next month to present our plan to the State Commission on Aging. Lacey comes from the Region 8 AAA and is familiar with how AAAs work. She was also a LTC Ombudsman in the past.

### **Local Updates From Council Members**

### **Action Items**

**Endorsement of the Fiscal Year 2022 Funding Recommendations** – A draft copy of the recommendations was distributed previously.

L. King – There are the two columns, funding requested and recommended funding, so once we approve that does it mean the recommended funding has been approved? Yvette gave a brief review of the RFP process. The process starts with a pre-bidder's meeting for agencies that submitted a letter of intent to apply for funds. At the meeting, Information is provided, and documents are reviewed. Then there is a timeframe for agencies to ask questions before submitting their proposals. All questions and answers are shared with all applicant agencies. There is a deadline to submit proposals. The proposals then go to a review

committee consisting of three individuals who review and score the proposals. All the scores are then combined. One proposal will have three different scores. We use the average of those scores. It is a 50-point scoring system. A score under 40 is not eligible for funding.

This may be why some are not funded, or they may not meet the required standards for the program applied for or meet the requirements.

A motion was made by L. King with support from Cindy Sabin to approve the recommendations for funding as presented. Motion carried, no opposed.

Merit Award #1 and #2 and State Caregiver Support Adult Day Services. A total of \$239,837 was requested. Recommended funding Alcona COA, Sunrise Side Senior Services, and the Otsego COA \$16,761 each and Cheboygan COA, DHD #4, Ogemaw COA and Roscommon COA \$16,760 each for a total of \$117,323 in funding.

Title IIID Evidence Based Disease Prevention Health Promotion – A total of \$30,590 in funding was requested with a total of \$24,000 available. Recommended funding Ogemaw COA \$2,000 for Matter of Balance, Oscoda COA \$1,200 for Matter of Balance, Otsego COA \$17,260 for Matter of Balance and Walk with Ease, and Roscommon COA \$3,540 for Matter of Balance.

Title VII Elder Abuse Prevention – A total of \$6,416 is available. Recommended funding Ogemaw COA \$600, Oscoda COA \$700, and Otsego COA \$5,116.

Title IIIE National Family Caregiver Support Program – Total funding is expected to be \$109,562. A total of \$127,925 was requested between 16 applications. Recommended funding Otsego COA \$3,080 for Creating Confident Caregivers, \$7,360 for Caregiver and Parkinson support groups, \$3,300 for Kinship and Kinship Support, and \$5,450 for Respite. The Alpena Senior Center \$4,500 for Kinship, \$10,000 for Respite, Crawford COA \$14,840 for Respite, Iosco COA \$2,500 for Respite, Oscoda COA \$1,200 for Kinship, Ogemaw COA \$6,000 for Respite, and the Roscommon COA for Respite for a total of \$87,080. This leaves \$4,420 in unallocated funds for CCC, \$7,500 Unallocated Funds for Evidence Based Disease Prevention from Ogemaw COA and \$10,562 in the Kinship Purchase of Service for a total of \$109,562.

### **Questions or Comments**

D. Fay – I know the variant is out there but its good to see people out and about enjoying the summer. Things are getting done in the community that were bypassed for a year due to Covid restrictions.

Tom Pettit from Roscommon County – I was wondering if it would be possible to have the funding information back up on the screen. Thank you. As you are all likely aware, I was the director of the Roscommon COA, and just for clarification, I would like to make the point that although I was laid off, I was in fact terminated. The agency has no intent on bringing me back. I would also like to bring up that for the past year Emil Bellenbaum and Johnna Ancil have been attending your meetings because they were so concerned about the seniors of Roscommon County. I'd like to bring up that if they were so concerned, perhaps they would still be attending your meetings. Lastly, I would like to congratulate Region 9 AAA

administration and the AASA administration for buying so wholeheartedly into their own personal agenda.

### **Adjourn**

M. Maturen so moved for adjournment. The meeting was adjourned at 2:15 pm by D. Fay.

Our next meeting is scheduled for Monday, September 27<sup>th</sup>.