

Environmental Scan of SAPGA Members Related to Health and Wellness

Hayley Gleason: Strategic planning for Medicaid and long-term services and supports specifically with older Coloradans in mind. Goal is to keep people healthier and delay Medicaid services by focusing on social determinants of health and improved behavioral and physical health.

Chris Lee: Visiting Nurse Association's wellness clinic places a high priority of addressing foot care for older Coloradans, especially those living with diabetes. Colorado VNA is also the first community-based organization in the US to pilot CAPABLE (Community Aging in Place – Advancing Better Living for Elders). Through in-home visits, clients identify self-care goals that increase independence and safety.

Sarah Elliott: Vivage operates 31 skilled-nursing homes that are Medicaid reimbursable. They are working on advancing palliative care options and advance care planning. Vivage also has an entrepreneurship in residency program through a partnership with Aging 2.0. This allows new innovations and technologies that may be applicable to older adults or care settings to be evaluated and assessed, with the hope of improving the care setting for providers and consumers.

John Zabawa: In former role with Seniors' Resource Center, work efforts focused on providing assistance and support prior "crisis". A Perfect Homecoming program between SRC and Luthern Medical Center provides care management, transportation, in-home care, minor home modification, and meals to older adults transitioning from the hospital to the home. John was also interested in how Medicaid planning may adjust its eligibility process.

Jim Riesberg: The Retired and Senior Volunteer Program (RSVP) provides adults 55+ the opportunity to serve and volunteer in their local communities. Weld County RSVP budget will be cut without new support leaving older volunteers seeking opportunities for value-driven engagement. The United Way of Weld County has transitioned to a collective impact model which allows community partners to work with the organization to prioritize funding. Areas of focus have been improved health through nutrition and exercise. Northern Colorado Health Sector Partnership is a group of 30+ northern Colorado health care entities and 10 public partners working to address issues within the health care industry, workforce development being a key focus area.

Karin Stewart: Aging Well in Jefferson County is a strategic planning project focused on developing and implementing strategies to create livable communities and integrate services. Efforts have revolved around behavioral health, value-driven engagement, and even hoarding.

Jim Collins: Encourages improved engagement with local leaders and hopes to support age-friendly efforts for southern Colorado. Also interested in creating an "aging advisor" at the county level to coordinate efforts to address aging issues.

Mindy Gates: State Unit on Aging and Area Agency on Aging services are aimed at preventing and mitigating crises while providing support to those in the community. Hopes to continue and expand collaboration with HCPF and their older adult policy advisor. DHS just started the CAPS Check which screens potential new hires who will be working in care settings with older adults. The goal is prevent mistreatment and neglect through informed hiring practices.



Tony Tapia: Latino Age Wave work is focused in the Montbello community in northeast Denver. They seek to address social determinants of health within the community context by addressing isolation, access to care, health service provider training, and the built environment.

Jayla Sanchez Warren: Lots of projects going on with DRCOG: Accountable Health Communities (AHC) model, voucher program for shared transportation services, Veterans Transportation and Community Living Initiative (VTCLI), and the Transportation Improvement Program (TIP).

Josh Laipply: TIP funding comes from federal government, passes through CDOT to DRCOG for planning and implementation. A new focus on pedestrian safety and continued work on multimodal transit.

Maureen McDonald: Work with Seniors' Resource Center (SRC) has shed light on concerns related to minimum wage increases. SRC has trouble finding enough drivers to run their transportation fleet at 100% capacity. Work through the Aging Mastery program has focused on social isolation, gratitude, mindfulness, behavioral health, and ageism. Also very interested in how SAPGA can work with Colorado Coalition for Aging Research and Education.

Karen Brown: Innovations and technologies that can better support caregivers and consumers. Many are working on their "proof of concept" with the hope of becoming reimbursable through state Medicaid or the Centers for Medicare and Medicaid (CMS). Addressing social determinants will support improved health.

Dave Norman: Northwest Colorado Area Agency on Aging has been working to improve nutrition services. They are also working to more effectively integrate the Aging and Disability Resource Center (ADRC) with 221 to support access to services on the Western Slope.

Jean Nofles: AARP is focusing on health promotion through a focus on social engagement and social determinants of health. Lifelong Colorado and the promise of age-friendly planning and strategies is a primary focus.

Steve Child: Majority of legislative and organizational efforts have revolved around addressing the rising health care costs in the mountain regions. This has been a major issue for county commissioners in the region. Follow-up on the western and rural Colorado health care initiative.

Kathleen Hall: With grant funding through the NextFifty Initiative, is working on a frailty index pilot project that will score older adults along a frailty spectrum to inform care planning and inform appropriate interventions. Has been used in hospitals in the past but this model is home and community based. Also, is seeking funding to provide medically tailored meals for cancer patients. Currently, using community kitchens through Grand Junction Housing Authority and is working with Senior Planet/OATS.

Gabriel Kaplan: Operates on grants through the CDC and older adults are focus area because they tend to be high-risk for the onset of chronic diseases. Working on building awareness of aging as a public health issues and working an age-friendly public health model.

Small Group Work – What did we not hear or what are the gaps?



Strategic Action Planning Group on Aging

Group 1: Engage with local leaders using CML and CCI. Both groups meet with June of 2010 – coordinate and attend meeting. Go to city council meetings. More trips are needed to meet transportation needs. Nutrition, access to grocery stores, and food security are critical social determinants. Dental care plays a big role in nutrition as well. Not much mention of hospice, palliative care, and advance care planning. Significant medical expenses occur in last 6 months of life. Advancements in billing models and payment. Vision, dental, and hearing.

Group 2: Gaps in transportation services – not enough drivers. How do we capitalize on ride sharing for older adult transportation needs? Research the effectiveness of various programs to determine best practices. Nutrition counseling and food security are important issues to address.

Group 3: Important to rely on statute to inform direction and scope of work. Other issues were homelessness, complex care cases, housing issues, and we need more private sector involvement. Insurance providers can provide data and information on billing and reimbursement issues. Tiered rates for assisted living may be worth looking in to. Discuss telemedicine and telehealth.