



Strategic Action Planning Group on Aging

Meeting Minutes – June 10, 2019

Participants: Christian Itin, Maureen McDonald, John Zabawa, Sarah Elliott, Steve Child, Jim Collins, Chris Lee, Karin Stewart, Jim Riesberg, Karen Brown, Hayley Gleason, John Emerson, Dave Norman, Jean Nofles, Kathleen Hall, Gabriel Kaplan, Josh Laipply, and Coral Cosway

Not in Attendance: Jayla Sanchez Warren, Mindy Gates, and Tony Tapia

Public Participants: Janice Blanchard (Governor's Office), Ed Leary (Osher Lifelong Learning Institute), Ashley Taeckens (Knoebel Institute of Health Aging), Abby Mercier (HCPF Intern), Rena Soller (Colorado School of Public Health), Rich Mauro (DRCOG), Bob Brocker (Colorado Senior Lobby), Ed Shackelford (Colorado Senior Lobby), and Kelley Horton (Dementia Connections Coalition)

Action Items:

- Representatives from Strategic Action Planning Group on Aging and Colorado Commission on Aging Executive Committees to meet on July 19
 - o Karin Stewart is interested in participating in this joint SAPGA/CCOA meeting
- Executive Committee and Education & Engagement Committee to explore partnering with CCOA on statewide meetings
- Jarett Hughes to learn more about Project ECHO

Meeting Notes

Welcome, Roll Call, and Approval of Minutes

- Meeting called order at 12:10 pm
- June minutes approved with a motion by Jim Riesberg and second from Sarah Elliott
 - o Jarett Hughes to add mentioned of SEIU and Washington state legislation
- June agenda approved

Public Comment

John Emerson, in his role with Aging 2.0 Denver, will be giving a talk about the implications of changing Telehealth Reimbursement rules by Medicaid and Medicaid.

Update from Janice Blanchard, Senior Advisor on Aging

Blanchard reported that there seems to be foundation support for funding age-friendly planning and implementation. They are working on securing a fiscal sponsor for potential funding related to Lifelong Colorado.

She also brought up the topic of reauthorizing the Strategic Action Planning Group on Aging (SAPGA). SAPGA is up for sunset review in 2022 – at that point the General Assembly will either extend the lifetime of the group or view the work as complete, and SAPGA will sunset in 2022.

The Aging Summit planning committee has been meeting and is working to establish a target date and focus. The conference schedule for the remainder for 2019 is busy and Spring or Summer of 2020 are being viewed as potential target dates. The focus for the Summit has revolved around sharing best-practices from around the state and generating ideas/momentum for age-friendly planning and implementation.



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The Governor's Office will be having their planning retreat at the end of June and Blanchard hopes to discuss multigenerational policies and applying an aging perspective to the Governor's top priorities. Blanchard also encouraged the group to mark August 23 in their calendars for an Elder Justice Day event.

CCI Summer Conference Update

Sarah Elliott, Steve Child, and Jarett Hughes offered a brief update on the aging panel from the CCI Summer Conference. Attendance was strong for an end of conference panel – there were about 50 attendees. Hughes reported handing out nearly 70 Action Plan updates.

Collaboration with the Colorado Commission on Aging

Jane Barnes from the Colorado Commission on Aging (CCOA) and Benefits in Action was involved in a discussion focused on how best SAPGA and CCOA can work together. There is a sense from CCOA members that they would like to become more engaged and involved with aspects of SAPGA's work and addressing aging issues in Colorado. From the perspective of some, there are questions as to whether or not CCOA and SAPGA both need to exist. However, because CCOA is funded and outlined in federal statute, any flexibility or organization shifts may be complicated.

As the Advisory Council to the Department of Human Services and the State Unit on Aging, CCOA meets 6 times a year across the state. The SAPGA and CCOA Executive Committees are planning to meet on July 19 after the CCOA meetings in Parker, CO. Karin Stewart indicated an interest in participating in this joint CCOA-SAPGA meeting. The goal is to continue this conversation and better understand how we can improve outreach efforts, impact change, and engage better with our communities together and collaboratively. As SAPGA looks to begin regional meetings again, there is a hope that CCOA will be a partner in these efforts. Creating a larger "public presence" is something that seems important to both bodies.

Jane Barnes also announced to the group that CCOA is seeking representation for the following Congressional Districts with the corresponding political party affiliation:

- CD-4 Republican or Democrat
- CD-6 Republican or Unaffiliated

Alzheimer's Disease and Other Dementia's

Coral Cosway and Danelle Hubbard, both from the Alzheimer's Association to talk about living with dementia. Slides and the Alzheimer's/Dementia Fact Sheet is available via the SAPGA website.

Cosway and Hubbard made it clear that improved coordination with health systems and better integration of programs and services is critical. As SAPGA works to address aging issues, there is an important delineation between focusing on "healthy aging" versus "aging with cognitive impairment". They brought up the importance of cognitive assessments but when and where is most appropriate to administer them? However, they did not support the idea of annual cognitive assessments at physicals/check-ups for certain age demographics.

In general, direct care worker (DCW) shortages are common across the aging space. This is especially the case when it comes to those trained specifically to work with adults living with cognitive impairment. There is a



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demand for formal and informal caregiver education, and improved workforce training to support capable and effective providers. The Alzheimer's Association receives a lot of calls from caregivers seeking respite care.

Project ECHO, was mentioned as an important tool that is helping bridge the training gap of primary care clinicians. Project ECHO – Extension for Community Healthcare Outcomes – is a movement to demonopolize knowledge and increase the capacity to provide best practice care for underserved people all over the world. The ECHO model makes specialized medical knowledge accessible by putting local clinicians together with specialist teams at academic medical centers in weekly virtual clinics. Improved training for first responders (e.g. EMT, police, firefighters) was also mentioned as an important piece to addressing gaps related to individual outcomes for adults with dementia.

Cosway and Hubbard highlighted the increasing numbers of adults with dementia outliving their caregivers and diagnoses of dementia among individuals living with intellectual and/or development disabilities. They noted that adults tend to be self-reporting earlier than in the past – acknowledging memory loss or concerns related to isolated episodes of confusion.

There are still gaps in awareness of where to turn and seek support. Provider education and training is important as is comprehensive care planning by physicians and interdisciplinary care teams. Also, there seems to be an underutilization of the billing code which reimburses for cognitive assessments – the routine Medicare assessment is not currently adequate.

Small Group Work Related to Dementia Report Back

Phone Group: Early intervention; call backs/follow-up assessments with caregivers and persons with dementia or mild cognitive impairment; locally oriented and focused caregiver conferences; more research and data to share annually

Group One: Improve education for caregivers, persons living with dementia, direct care workers, and other profession; do not focus solely on memory loss; incentivize and train primary care physicians and geriatricians in dementia and emergent practices and research; must address Medicaid rules that disqualify an individual from services after a dementia diagnoses; increase access to respite care

Group Two: Increase primary care conversations related to cognitive impairment; help people understand the next steps and trajectory after a diagnosis; public awareness campaign to reduce stigma; support family caregivers and increase access to respite; develop and support direct care workers trained in dementia care; expand dementia training to in work places; create a home care worker dementia certification with higher reimbursement; create a “Conversation Project” for dementia

Group Three: increase financing for respite care; explore the NY Medicaid waiver for respite; where does respite need to go to be most effective; engage insurance companies about feasibility of early assessments; dementia care navigators; what do caregivers know and what do they need to know

Group Four: Increase access to HCBS; increase awareness of and access to respite care; improve and support caregiver training; address reimbursement issues

Meeting Adjourned at 3:00 pm



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