

**Commonwealth Council on Aging**  
**Fourth Quarter Meeting**  
**July 8, 2015**  
DARS/Virginia Division for the Aging  
1610 Forest Avenue, Suite 100, Henrico, VA 23229

**Meeting Minutes**

**Present**

Beth Barber, Chair  
Robert Blancato  
David Farnum  
Joni Goldwasser  
Carter Harrison  
Valerie L'Herrou  
Richard Lindsay, MD  
Shewling Moy  
Brenda Nelum  
Roberto Quinones  
Kathryn Reid  
Vernon Wildy  
Veronica Williams  
Bill Massey, Ex-Officio  
Lynne Williams, Ex-Officio

**Absent**

Kyle Allen, DO  
Mitchell Davis  
Arthur Giesen  
Valerie S. Price  
Sandra Williamson-Ashe  
Terry Smith, Ex-Officio

**Guests**

Luis F. Eljaiek, MD, FACEP, FAAEM, Medical Director, Senior Services Emergency  
Department, Bon Secours St. Mary Hospital  
Eric Lin, Virginia Asian Advisory Board

**Staff**

Robert H. Brink, Deputy Commissioner  
Amy Marschean, JD, Senior Policy Analyst  
Cecily Slasor, Administrative Support

**Welcome and Introductions**

Chair Barber called the meeting to order at 10:10 am and asked that members and guests introduce themselves. She passed around sign in sheets and a member listing for members to review and edit their contact information.

**Approval of Meeting Minutes**

Mr. Farnum asked if members had reviewed the April meeting minutes and if there

were any corrections. Bob Blancato moved to approve the minutes. Kathryn Reid seconded the motion. The minutes were accepted and approved.

### **Aging Division Report**

#### **Robert Brink, Deputy Commissioner**

Next week marks the 50<sup>th</sup> anniversary of the Older Americans Act (OAA). It was signed into law in 1965. There are several events that coincide with the anniversary: Dr. Watson of Senior Connections and Deputy Brink will be on the local CBS Channel 6 on the anniversary date July 14 talking about the OAA. Deputy Brink has an Op-Ed piece that will be appearing in the Roanoke paper. Finally, the White House Conference on Aging will be held on July 13. There are four goals: retirement security, long-term services and supports, Elder Justice, and healthy aging. The conference will be largely 'virtual' with all of the conference being streamed live.

Deputy Brink attended two of the Best Practices Award presentations on May 17 in Richmond and June 2 in Fairfax. He noted that the Virginia Governor's Conference on Aging will be held May 2, 2016. DARS anticipates the attendance of both the Governor and Secretary of Health and Human Resources.

The statewide Walks to End Alzheimers will be taking place soon. Deputy Brink hoped Council members will be able to participate. He plans to participate in the northern VA and Richmond area walks.

When he started at DARS a year ago, Deputy Brink made a commitment to visit all 25 of the AAAs. He just recently made his 25<sup>th</sup> visit ending with the Arlington AAA. It has been a wonderful experience to see the different programs around the state. The AAAs are doing a tremendous job and he witnessed the dedication everywhere he visited. He thanked all Council members for their participation and service to the aging network.

Ms. Marschean discussed holding a council meeting just prior to the Governor's conference on the Sunday afternoon. Since the Best Practices Awards are presented in May in conjunction with Older Virginians Month, the Council may wish to have the presentations at the conference.

### **Geriatric Emergency Department**

#### **Amy Marschean, JD, Senior Policy Analyst**

#### **Luis F. Eljaiek, JR., MD, FACEP, FAAEM**

- **April 20 Webinar**

Ms. Marschean noted that 92 persons were registered for the webinar. Dr. Allen introduced Dr. Biese who did an excellent presentation on the topic of Geriatric Emergency Departments. Jan Mangun of the Virginia Hospital and Healthcare Association was instrumental in making the webinar happen. It was very well-received.

- **Bon Secours St. Mary's Hospital-Richmond**

Dr. Eljaiek works at St. Mary's Hospital in Richmond. He is the medical director of their Senior Services Emergency Department (ED) since August 2013 and works with a Nurse Practitioner, a Physical Therapist, a Pharmacist, a Case Manager, and a Social

Worker.

The US healthcare system is gearing up to serve the increasing number of Baby Boomers. Boomers have different attitudes and perceptions and also more chronic conditions. But many are remaining active and do not consider themselves 'old'. With the consumerism of healthcare today, boomers are advocating for themselves to a great extent.

The availability of telehealth is going to increase in the future to meet the demand of the "Silver Tsunami." The new focus is to age in place in one's own home. With many looking to retire in Virginia, existing housing stock in Virginia is not equipped with non-slip floors, wider doorways, and handrails in the bathroom. The gero-psychiatric component is missing in nursing homes and that is a huge problem. Advance directives, powers of attorney, and other planning needs to be done. The shortage of geriatric doctors is a serious issue. Dr. Eljaiek stated "We are training the wrong kind of troops for the battle that we have." Hospitals seek a competitive advantage, and they need better dashboards and better data metrics and reporting.

Dr. Eljaiek stated that when one arrives at the Senior Services Emergency Department at St. Mary's, both the patient and caregiver are taken back for evaluation and consult. Using the pediatric model as a guide, he developed the ED by adding to the trauma system model a patient-centered care model that addresses transportation, cost of care, access to care, medications, navigating the complex health system, and the caregiver. Many emergency room visits are due to medication issues or falls. Comprehensive senior care needs to be safe, effective, patient-centered, timely, efficient and equitable. The ED team at St. Mary's is available 8am-5pm, five days a week mostly because the referral consult can only occur at those times. The team meets monthly. The exam rooms in the ED have been redesigned for geriatric patients and contain special features, including natural light and nonslip floors. The team members work in unison and not through a separate sequential care model. The pharmacist, for example, does not do just medication reconciliation, but toxicology screens to determine what is causing the fall or mental status change. There are 50-100 geriatric EDs in the country. St. Mary's is the first in VA. Outreach and education needs to be done. In terms of measuring success, so far the patient evaluations are very time consuming and it is imperative to do parallel v. sequential care with geriatric patients. A success story involved evaluating a patient who came in frequently with liver failure and ammonia levels going up and it was determined that the patient was taking only a teaspoon v. a tablespoon three times a day. This was discovered by the Nurse Practitioner.

Dr. Lindsay commented that the lack of geriatric training is the real issue and problem here. As hospitals become more business-oriented they need to change the system to be able to serve the geriatric population better so that there is geriatric urology, neurology, ophthalmology and cardiology. The ER of today will not be the ER of the future. They will have to change the reimbursement model to meet the needs of the increased number of older Virginians by creating a primary care medical home. Mr. Massey asked what volume of patients was required to justify establishing a geriatric ED in the Bon

Secours system and Dr. Eljaiek responded that they have about 25% senior volume currently.

### **Nominating Committee**

#### **Action: Adopt Committee Slate**

##### **Carter Harrison, Chair**

The committee met to discuss a slate for nominations for Chair and Vice Chair. The committee unanimously nominated the current officers: Beth Barber as Chair and Valerie Price as Vice-Chair. Council members adopted the slate of officers by acclamation.

### **Washington DC Update**

#### **Robert Blancato**

Mr. Blancato stated that President Obama will address the White House Conference on Aging on the morning on July 13. Mr. Blancato looks forward to attending and will report back to the Council. He will share his Twitter account with council members so they can follow him during the conference. Mr. Blancato said the conferences in the past were authorized by Congress under the Older Americans Act (OAA) and delegates were chosen from each of the states to attend. This year is different because Congress has not reauthorized the OAA so there are no delegates and, instead, the conference will be virtual with "watch parties."

If Congress fails to act on a budget, sequestration will resume on October 1. The Council adopted a motion prompted by Bob Blancato's report on the federal budget impasse made by Ms. Moy with a second from Ms. L'Herrou to write a letter to Congress (Virginia's delegation and House and Senate majority and minority leaders) to prevent the resumption of sequestration on October 1.

Congress is taking action on some appropriations of interest to the aging network, including the OAA nutritional programs, Elder Justice Act, and NIH funding for Alzheimer's Disease. The OAA is pending in both the House and Senate and the pressure is to keep the bill moving in the Senate. Further, Senator Warner's bill on advance planning has traction. The Council will take up resolutions in support of the OAA and Senator Warner's advance directive legislation at their next meeting.

Ms. Goldwasser asked Mr. Blancato about observation status. Mr. Blancato has new CMS guidance that he can share with council members. Ms. L. Williams thanked Mr. Blancato and looks forward to reading anything he sends out. She also referenced a new law passed by the 2015 General Assembly on observation status.

### **Best Practices Committee**

#### **Richard Lindsay, MD**

Dr. Lindsay reported that the Best Practices Committee closed out another very successful year of Best Practices Awards. He commented on the ceremonies that were held on May 17 in Richmond and on June 2 and 17 in Fairfax for Senior Connections, the Central Senior Center, and Volunteer Solutions.

## **Virginia Asian Advisory Board (VAAB)**

### **Eric Lin**

Eric Lin, current chair of the Virginia Asian Advisory Board, discussed the cultural and linguistic competency needs for the aging Asian population, a focus of the VAAB's draft annual report. The core focus of the report is economic development and small business, but aging issues and Asian Muslims are also being addressed. There are .5 million Asians in Virginia representing 6.1% of the total population. Of that number, 15% are over the age of 55. The five largest Asian communities are Indian, Korean, Chinese, Philippino, and Vietnamese. Asians are the fastest growing minority in this state. In 2010, Dr. Peter Nguyen, a professor of Social Work from VCU, looked at issues faced by older Asians in Central Virginia. Language can be one challenge, particularly as a person ages. There are cultural issues in that the Asian community tries to keep things within the family and they often don't know how to navigate outside their culture. There are transportation issues, nutritional issues (carbohydrate-heavy, rich western diet can be problematic for older Asian persons in long-term care facilities (LTCF)), medicines are different, and there is a basic lack of good data to identify what the true issues actually are. The natural choice for Asian persons is to remain in the home so it is important to have in-home care resources available that are culturally and linguistically competent. Finding LTCF that have the language, cultural, and nutrition supports is very difficult. Broad recommendations for cultural competence for an aging Asian population:

- Need to be more culturally sensitive
- Transportation
- Outreach (needs to be multi-generational)
- Data collection and management of that data
- Awareness and outreach is the main way of accessing the Asian-American population ( churches, grassroots groups, informal support, refugee resettlement)

There are 12-13 Asian Friendship Cafes statewide and most of them are Korean.

Ms. Moy commented that she hopes more minority groups will apply for Best Practices awards in the future and that the successful programs like the Korean Senior Center will be replicated. Mr. Quinones commented that in the prior administration, there were three ethnic boards in VA: the Latino Advisory Board, the Israeli Advisory Board and the Asian Advisory Board and they had a focus on economic development.

Governor McAuliffe has sent both the Latino Board and the Asian Board a letter with goals for the boards, but Mr. Lin stated the VAAB has broadened the scope to address non-business issues.

## **Legislative Committee (Handout)**

### **Action: Adopt Recommendations**

#### **Brenda K. Nelum**

Ms. Marschean provided copies of the draft Commonwealth Council on Aging 2015 recommendations to the Governor and General Assembly. Council members will need to adopt the recommendations. New Council legislative recommendations include:

- Support monitoring and training programs for all guardians by partnering with the Virginia Supreme Court to develop a uniform process for data collection, training and monitoring.
- Improve nutritional health, alleviate hunger, and prevent malnutrition for older adults.
- Monitor safety of frail elderly in senior care facilities and ensure safe placements of all individuals receiving services in the community.
- Eliminate barriers to aging in place including, but not limited to, having the acute care screening team provide a DMAS 96 and UAI, upon request, if the patient or caregiver expresses a concern about the ability to return home in the future with home and community-based supports.

A motion was made by Veronica Williams to accept the draft recommendations, as amended above, and the motion was seconded by Roberto Quinones. Council members voted unanimously to approve the handout with edits to be incorporated into the annual report.

## **Virginia's State Plan for Aging Services 2015-2019**

### **Amy Marschean (Handout)**

Ms. Marschean reviewed the process for the formulation of the State Plan that included the Council holding a statewide public hearing at WWRC in Fishersville on February 13 with four other DARS sites joining in – Abingdon, Roanoke, Norfolk and Fairfax. The State Plan collapses a state and federal planning process into one. The state statute requires a survey of all state agencies to report on the impact of aging services on their agency. The state agency surveys and the valuable input of the Workgroup that included both Ms. Barber and Dr. Lindsay, especially on Virginia's 5 services goals, were the foundation for the State Plan. The State Plan is due October 1 to the state, yet the federal State Plan is due July 1. There is a 30-page narrative and the 5 goals of the plan are:

1. Assess and facilitate statewide community readiness for an aging population, recognizing both the untapped resources and the unmet needs of this population;
2. Empower older adults and their families to make person-centered and informed decisions about personal health and well-being, long-term services and supports, and end-of-life care options;
3. Enable people to live in the community as appropriate through the availability of

formal and informal high-quality long-term services and supports, including supports for families and caregivers;

4. Strengthen statewide systems that protect the rights and prevent the abuse, neglect, or exploitation of older adults; and
5. Enhance effective and responsive management of programs serving older adults to ensure the fiscal and programmatic accountability of those programs.

Ms. Marschean reported she presented on the State Plan at the annual VA Coalition for the Prevention of Elder Abuse (VCPEA) conference at the end of May.

### **Public Guardian & Conservator Advisory Board Alzheimer's Disease & Related Disorders Commission Update Veronica Williams**

Ms. Williams reported on the last meeting of the Public Guardian and Conservator Advisory Board. She talked about the inspiring presentation by Dr. Paul Aravich that included the display of a preserved heart and brain for members to observe. Dr. Aravich commented that while intelligence is important, passion and a "fire in the belly" is so much more important in his students. He spoke about looking for greatness in people and the largest minority is persons with disabilities. He suggested resiliency training for public guardian program directors and family caregivers as is done in the military. Dr. Aravich suggested that the advisory board members be able to lobby. Janet James presented to the board that there are 986 people on the waiting list. The increase in funding will serve 15 persons from that waiting list and a total of 100 persons will be served with the new money appropriated by the 2015 General Assembly. The board will be recommending partnering with Paul DeLosh of the VA Supreme Court to improve statewide guardianship data, training and monitoring.

### **V4A Update Bill Massey**

Mr. Massey stated V4A is an active partner in the planning for the Governor's Conference on Aging and also provided input for the State Plan. The V4A meeting will be held in Fredericksburg on July 23-24. Mr. Massey will share the Council recommendations with V4A. N4A will be in Philadelphia and during the WHCOA on July 13. He noted a new member to the PAA Board of Directors is a Commonwealth's Attorney who has an interest in adult abuse prevention.

### **Planning & Development Committee Robert Blancato**

No report

### **Future Meeting Dates Beth Barber**

The next meeting will be held on September 30, 2015, rather than September 23 due to the international bike race being held in Richmond.

**New Business****Dr. Richard Lindsay**

Lindsay Caregiver Institute Hackathon was held in Richmond on March 21-22, 2015 for 18 ½ hours. Teams of college students from seven major schools in VA participated. A family caregiver was assigned to each team to help illustrate the issues faced by caregivers. The thrust of the contest was to come up with an idea, tool, or program that would help family caregivers. Experts were available for consults. The winner was a program developed by the VA Tech team called Care Food that assists persons to develop the diet. The next Caregiver Hackathon will take place March 18-20, 2016. Dr. Lindsay showed some new technology that can be used at home by patients and family caregivers.

**Public Comment Period**

There were no public comments.

**Meeting Adjournment**

Chair Barber adjourned the meeting at 2:15 p.m.