

Joint SSAC-DSAC Meeting
MEETING MINUTES
Thursday, November 1, 2016

SSAC Members Present: Bob Daley, Chair; Mark McNabb, Suzanne Lazaro, Doris Lamb, Lee Strandberg, Curtis Miller, Anne Brett and Dani Marlow.

DSAC Members Present: Jan Molnar-Fitzgerald, Chair; Mike Volpe, Vice Chair; Lee Lazaro, Jann Glenn, Rusty Burton and Pete Rickey.

ADRC Members Present: Sandy Potter, Jasper Smith and Suanne Jackson.

Guests: Mitzi Naucler, Jessie Grow Hodges, Cecelia DeAnda, Victoria Short, Cathy Savage, Pat Shirley, Teri Jefferson, Danielle Bean and Robynn Pease.

Members Absent: Bill Hall, Commissioner; Catherine Skiens, Vice Chair; Suzette Boydston, Saleem Noorani, Janet Shinner, Carolyn Mendez-Luck, Bill Turner, Suzanne Brean and Edythe James.

Staff: Dave Toler, Lisa Bennett, Mary Kay Fitzmorris, Helen Beaman and Terri Sharpe.

1. Welcome, Introductions, Additions to the Agenda (Bob Daley, SSAC Chair):

Bob Daley called the meeting to order at 12:03 pm.
Introductions were made including guests.

2. Approval of the September 29, 2016 Joint Meeting Minutes:

ACTION: Motion to approve the September 29, 2016 SSAC/DSAC Joint meeting minutes as written made by Suzanne Lazaro, seconded by Pete Rickey. Motion passed unanimously.

3. Approval of Joint Meeting Schedule for 2017:

ACTION: Motion to approve the Joint SSAC/DSAC Meeting Schedule for 2017 made by Rusty Burton, seconded by Lee Lazaro. Motion passed unanimously.
Janet Shinner offered to host the meetings at her facility in Lincoln City on April 4, 2017. Rusty noted he would need more than a week's notice if the location of the meetings were changed in order to make arrangements.

4. Old Business: ADRC Follow-up (Dave Toler, SDS Director):

At the September 29, 2016 Joint SSAC/DSAC meeting the issue of whether the ADRC is open during the lunch hour was brought up. Dave found out that when people called

the ADRC during the lunch hour the phone is answered by the Senior and Disability Services receptionist who informs the caller to call back at 1:00. The staff is now in training to forward all calls to the ADRC. They still may not get a live voice if the ADRC staff member is on another line but SDS does staff during the lunch hour. Suzanne Lazaro questioned the 8:00 – 9:00 am hour and during staff meetings. Dave said the call is still forwarded to the ADRC with the message that no one is available but they can leave a message. Bob asked for confirmation that it is okay, when referring people, to say ADRC staff is available during business hours. Dave said they will be physically moving the ADRC call center in the near future and does not think there will be any interruption of services.

5. Social Determinants of Health (Dave Toler, SDS Director):

Dave would like input from the Councils on whether they see Social Determinants of Health (SDH) as an issue that needs to be addressed. When talking about SDH they are talking about the connection between a factor and an outcome. The definition of SDH is varying but Dave laid out six categories that the determinants fall under: Economic Stability, Neighborhood and Physical Environment, Education, Food, Community and Social Context, and Health Care System. The big determinants across the State of Oregon include Income, Housing and Transportation. Dave stressed that when it comes to Health Care Reform and Transformation one can't just look at the symptoms to find the solutions but rather you have to look outside of that to see what the social determinants are.

The State has submitted their Waiver Proposal to the Federal Government to get the waiver for Health Care Transformation renewed. One element of the Waiver would allow more spending on SDH with emphasis on housing. The one determinant Dave feels is missing, that has a strong impact on seniors and people with disabilities, is isolation. Research shows that isolation can have a direct and strong impact on certain health and social outcomes for individuals. Isolation is an objective, measureable phenomenon where loneliness is a more subjective measureable phenomenon, with isolation having a direct correlation to loneliness. Dave asked the Councils if they had any desire to move the social determinant, loneliness, up in profile for our region.

Rusty feels income is the strong determinant and without it everything else evaporates. Dave agreed however, SDS's programs are limited in terms of increasing people's income where they can do something about isolation.

Pete asked if loneliness would go under mental health screenings or are they looking at it as a separate issue in that these people aren't seeking help therefore this problem is

bigger than what mental health is dealing with currently. Dave said loneliness will play in a mental health service should it present mental health issues. As a social determinant, he is not sure how much mental health programs are investing in preventing the loneliness from the isolation from the beginning. Pete said the Veterans Centers down in Eugene take an active role with their veterans in regards to isolation. He suggested looking at their model, which has been successful for decades, and integrate it into our system for helping the isolated and lonely elderly in our community. By looking at their model we could piggyback on that and expand from there and perhaps get more funding from the Federal Government. *Pete will put Dave in touch with the Director of the Veteran Center in Eugene.*

Pat Shirley said that Mental Health can't cure isolation for it has bigger barriers such as transportation. She feels it is more a barrier to health than a mental health issue. Pete agreed and noted the different agencies don't use each other as they should. He's in housing but he rarely gets asked about the concerns of housing. He thinks it's because they don't want to face homelessness. Pete pointed out Linn Benton Housing is available and is a resource that is much underused.

Sandy Potter reminded everyone that Volunteer Caregivers provide friendly visiting for people. There are a lot of recommendations and referrals from health services so there is awareness of this problem.

Robynn Pease commented that raising isolation up in SDH is so important for this agency because not only does it create a barrier to health and health outcomes but this is a way to expand the reasons and the importance of area agency services in our community. Through outreach we can raise the awareness of the need to reduce isolation through multiple opportunities, not just one.

Suzanne L feels this comes back to the Gatekeeper concept with awareness of this in the community. She thinks there is a need for more places for people to go.

Jann Glenn, in regards to Pete's statement of interagency rarely contacting each other, suggested calling them and making relationships. By networking they will then think to call instead of trying to solve issues on their own.

Mike stressed it is important for both seniors and people with disabilities to put a high priority on community contacts, professional and volunteer, and also casual contacts.

Rusty said agencies need to talk to each other and share information. Pete said they do talk with each other but there are HIPPA guidelines that need to be followed as well.

Bob asked Dave what he needs from the Councils to give greater impact on the SDH of isolation and loneliness. Dave said he brought it to the Councils, in the hopes that if they do recognize this as an issue, they could work together in figuring out how to bring it to a higher profile. Dave suggested bringing InterCommunity Health Network Coordinated Care Organization (IHN CCO) to the COG for a discussion to talk about SDH, what determinants they are focusing on and the determinants the Councils are focused on. Pete suggested that if they did meet with them they should also have a follow-up meeting for feedback.

Anne Brett questioned how Dave would identify the problem. Would the social determinant be identified as isolation which is measurable and quantifiable or would it be identified as the problem, loneliness. Anne stressed how we identify the problem impacts whether or not there is going to be a significant social change and a significant transformation in the individual's life.

Lee Strandberg suggested the next SSAC/DSAC meeting take place at the CCO's office in Corvallis on Walnut Blvd. This would provide the Councils and IHN CCO staff to sit down face to face and discuss SDH issues and problems. Lee feels it's a way to move the agenda forward to address these issues and solve these problems. Lisa Bennett will look into scheduling a SSAC/DSAC meeting at IHN CCO if Lincoln County agrees to join them at the Corvallis location since videoconferencing will not be available. Dave thinks this is a great concept, however, he feels the senior population is not a high priority for IHN because Medicare is their primary payer, thus decreasing the incentive for IHN. Seniors also have the choice to enroll in the CCO and many of our seniors elect not to. Lee S feels Samaritan has a vested financial interest in making all this work because of a lower total health care cost. Dave said reframing this as Samaritan Health Care Plans will help broaden the discussion with the CCO. *Dave agreed to a meeting with Samaritan Health Care Plans at their facility to talk about social determinants, particularly isolation.*

Mike would like to investigate any pilot projects IHN may already have and if there is one that is about social determinants then possibly build on that.

Lisa clarified to everyone, IHN CCO stands for InterCommunity Health Network Coordinated Care Organization which in Linn, Benton, and Lincoln Counties is Samaritan Health Plans. In the past they have had a representative from IHN CCO, Jenna Bates, who has given a presentation on pilot programs.

Bob reminded everyone of the COG's PEARLS Program that help people in their homes with symptoms of depression. There are also volunteer programs that will go to people in their homes for those with transportation issues.

6. Issues and Advocacy Committee Update (Bob Daley and Mike Volpe):

Mike gave an update of the Issues and Advocacy meeting to the Councils. Measure 97 was discussed along with the huge impact it would have on the 1.5 billion dollar budget deficit. If the Measure passed it would charge a 2.5% tax on all corporations with sales over 25 million in Oregon. As with every Measure, there are pros and cons.

Also discussed at the meeting was the 10% Priority Reduction List for APD. Every organization that receives funding from DHS goes through this exercise every two years. Dave stressed that in the last two Legislative sessions, the 10% Priority Reduction List has been an academic exercise. However, this year he feels if Measure 97 goes down it they will be looking more at a 12% cut across the board.

Mike said that the COG cannot take a stand on any Measure but as individuals it is important for them to make sure seniors and people with disabilities are represented at the Capitol.

Lisa pointed out that there is an Issues and Advocacy Meeting calendar included in the agenda packet. The next meeting will take place on Friday, November 18th from 10:00 – 11:00 am. Mike Volpe and Suzanne Lazaro will be Co-Chairs for the meetings.

7. Advising the Director - Veterans Outreach (Dave Toler, SDS Director):

Dave informed the Councils that the proposal for a Medicaid fund match for the Veteran's Program in Benton County has been approved. This will allow them to expand staff time. Dave presented to the Councils an idea Benton County's Commissioner Anne Schuster suggested, which is having social service workers work from the library, making a more community connection. This has been working well for the communities in Bend and Portland. They had a telephone conference with the lead person in Bend and she is looking for partners. With the Medicaid match Dave thinks we may be able to do this, reaching out to more of our Veterans. Dave asked for opinions and advice from the Councils. Pete asked if Dave was talking about social workers or VA Counselors who are two very distinct entities. Dave said that hasn't been determined yet and he uses the phrase social worker because he would also like to get the veterans and their families into other programs as well as the VA. Dave said it would be like the ADRC coming to them. Pete said, talking as a veteran, veterans tend to do better with others that have served rather than civilian to veteran so it would be more beneficial to have a VSO

there. Dave said he had been thinking about training a VSO staff person with the ADRC knowledge. Pete feels this would be an ideal fit for the veterans.

Sandy Potter said the Corvallis Daytime Drop-In Center has a counselor on staff and when filling out the form they indicate whether they are a veteran and will be connected that way.

Helen Beaman mentioned the Health Navigators who have integrated into the Samaritan Health Services are also community health workers. They're meant to be a peer and have lots of experience with all the different agencies in the community. There is a new position at Samaritan, who is a veteran. If they use the Health Navigators they would screen the people at the library and those that come up as veterans would be transitioned over to the Samaritan Veteran Representative. The Health Navigators are paid individuals who go through extensive training and come from the community they serve.

Jann Glenn said there is a counseling organization in Newport that originally was to serve veterans but now have opened the door to serve the community. They want to work with veterans but will work with any group. They have openings now and are located at Reconnections Counseling, 644 SW Coast Highway, Suite J, Newport. They are under review and if they don't get more clientele by the end of November they will be closed. They do not have to be from Lincoln County.

Jessie Grow-Hodges questioned Dave's report that mentions billing for the PEARLS Program services. She worked with PEARLS in Umatilla, Oregon where they did not charge. Dave said he would like to be able to bill Medicare or Medicaid for the Pearls Program which would expand it to more individuals. As of now there is a small amount of general funds from the State which limits the number of people who can utilize it. This is about working with other AAA's and becoming a Medicare provider so they could bill Medicare rather than Medicaid, which would open up the gate to another whole other population that miss out on these programs. Dave said other states are doing this and we are now advocating for this in Oregon.

Bob would like this marked as Old Business for a future meeting.

8. Announcements:

Lisa announced that the O4AD Conference is taking place on Tuesday, November 15th, from 9:30 – 4:30. Anyone wanting to attend needs to let Lisa know today.

Lisa announced that she provided a handout from Saleem Noorani, SSAC member, of his testimony to a Legislative Committee. She encouraged everyone to read it.

Bob reminded everyone of the annual Caregiver Appreciation Day is being held on November 9th. If anyone is working with any caregivers to let them know and if they need help with transportation they can contact Bob or any of the sponsors. The flyer is in the agenda packet. Jann Molar-Fitzgerald said there is one in Newport on November 15th and in Lincoln City on the 17th as well. Those are in the packets of Lincoln County members.

Lee Lazaro announced that in relation to the 10% deduction in DHS services, ODOT gave them advance notice that there will be potentially a 15% – 17% deduction in transportation for seniors and people with disabilities.

Pete shared HUD is facing an 18% cut will be looking at working off of 83% of what they had last year.

Jann Glenn shared Project Homeless Connect for Newport has been designated to take place on January 26, 2017. There will also be one held in Lincoln City this year in the first week of January, if it can be put together in time. The Dignity Drive will begin on December 1st and there is a drop box at the COG in Toledo. They are being specific in items to be donated which include: socks, underwear, gloves and hats. The majority of their clients are men. They have many sanitary packages leftover from last year and will be distributing clothing from the Salvation Army. They will also be distributing the tarps tents and sleeping bags at the Salvation Army so these items will not be available at Project Homeless Connect. There will be two dental vans available. Jann will give more details at the December SSAC/DSAC meeting.

9. Adjournment:

Meeting was adjourned at 1:35 pm.

The Meeting Minutes were recorded by Terri Sharpe.

The next meeting will be on Tuesday, December 6, 2016.