



Commonwealth Council on Aging

2014 Annual Report

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To the Honorable R. Terence McAuliffe and Members of the General Assembly,

Pursuant to Virginia Code § 51.5-127, the Council is charged with promoting an efficient, coordinated approach by state government to meeting the needs of older Virginians. There are approximately 1.5 million adults in Virginia over the age of 60, and this population will expand to more than 2 million adults by 2030, when one in every four Virginians will be over 60 years old.

The Council commends the work of the Department for Aging and Rehabilitative Services (DARS), the 25 local Area Agencies on Aging (AAAs), and public and private providers of services to older Virginians who are preparing for this coming "Age Wave" of older Virginians. This network of providers supports older Virginians and their caregivers through services that are critical for their independence and well-being.

The Council calls for increased statewide planning and funding for Virginia's aging network to support wellness and supportive services such as public guardianships, home and community-based services, and elder abuse prevention. The Council applauds the Governor's Conference on Aging being planned for fall 2015, which will provide a comprehensive picture of where we are now as a state and where we need to go to effectively meet the needs and leverage the human resources of Virginia's rapidly aging population.

The Council presents its Best Practices Awards, Community Conversations on Aging, other activities, and policy recommendations in this report. The Best Practices Awards honor model aging programs that improve the lives of older Virginians, and this year we again thank Dominion Resources for their generous support of our awards. The Community Conversations on Aging are Council-led listening sessions that serve to inform the Council's policy recommendations.

Policy recommendations of the Council include promoting Geriatric Emergency Departments and safe and effective hospital discharges, monitoring and training programs for all guardians of older adults in the Commonwealth, seeking innovative models to "de-institutionalize" the nursing home environment, fostering an appropriately trained health care workforce for the aging population, and providing access for older adults to health insurance and the ballot box. Finally, the Council recommends monitoring Commonwealth Coordinated Care, the dual eligible integration demonstration project, being implemented by the Department of Medical Assistance Services.

The Council is grateful for the opportunity to submit this report to you for your review and consideration.

Sincerely,



Beth Barber

Chair, Commonwealth Council on Aging

Best Practices Awards

The Best Practices Awards, established in 2006, recognize and encourage the replication of model programs, particularly those that foster Livable Communities and Home and Community-Based Supports. By recognizing such programs, the Council encourages the development of supports that assist older adults to age in place and delay or even avoid unwanted institutionalization. We again thank Dominion Resources for its generous contribution, which allows us to recognize these organizations for their dedication and work in advancing services for older adults.



First Place (\$5,000) to the F.R.E.E. Foundation Equipment Reuse/Recycling and Gifting Program in Roanoke.

F.R.E.E. helps Virginians achieve independence through mobility when they have no other way to attain their independence. Many adults cannot obtain the equipment they need. F.R.E.E. helps these Virginians regain their mobility and, with it, their independence by giving them needed rehabilitation mobility equipment. The majority of those served by F.R.E.E. are older Virginians.

Second Place (\$3,000) to the Retired and Senior Volunteer Programs (RSVP) of Montgomery and Pulaski Counties and the City of Radford's Supplies for Seniors .

The goal for Supplies For Seniors is to enhance quality of life by providing basic necessities to homebound seniors during winter months. During the past six years, the RSVPs of Montgomery and Pulaski Counties and the City of Radford have held a "Supplies for Seniors" drive to collect basic household and personal care items for older adults who receive home delivered meals through the New River Valley Agency on Aging and Radford/Fairlawn Daily Bread. Each January, RSVP volunteers sort and bag the donated supplies, then deliver them to an average of 250 homebound older adults residing in the five localities of the New River Valley.

Third Place (\$2,000) to the Alzheimer's Association of Central and Western Virginia (CWVA) Chapter's Arts Fusion.

Arts Fusion offers creative and cultural opportunities for those affected by memory loss in the Alzheimer's Association CWVA Chapter area. Arts Fusion's mission is to employ the arts as a vehicle for promoting creative expression and quality of life experiences for persons with dementia and their caregivers. For those diagnosed with younger onset and early stage dementia who are living at home with a family caregiver, Arts Fusion offers art museum and gallery visits, nature walks, and opportunities to attend symphony and dramatic arts rehearsals.

Honorable Mention:

- **Wills for Seniors coordinated by the Jefferson Area Board for Aging (JABA)**
- **The Nest Egg Thrift Store coordinated by Rappahanock Rapidan Community Services**
- **Greater Augusta Coalition Against Adult Abuse**
- **Northern Virginia Aging Network (NVAN)**

Community Conversations on Aging

In 2010, the Council began a series of listening sessions, called Community Conversations on Aging. This year, the Council held a conversation with approximately 65 participants in coordination with Senior Connections on January 9, 2014, in Richmond. Marie Gerardo, a Nurse Practitioner with the VCU House Calls program, discussed ways to age in place and Sara Link, MS, Director of the Greater Richmond Age Wave Readiness Coalition, discussed Virginia's statewide and regional initiatives to address the age wave. The Greater Richmond Area Age Wave website is www.agewellva.com. Topics at the listening session ranged from healthy lifestyles through chronic disease management and exercise to preventing social isolation and abuse of the elderly. The conversations heightened awareness about the work of the Department for Aging and Rehabilitative Services, Area Agencies on Aging, Centers for Independent Living, and the Council.

Examining the Needs of Older Virginians

Geriatric ED [Emergency Department] patients represent 43% of admissions, including 48% admitted to the intensive care unit. On average the geriatric patient had an ED length of stay that is 20% longer and they use 50% more lab/imaging services than younger populations. In addition, Geriatric ED patients are 400% more likely to require social services. Geriatric Emergency Department Guidelines, American College of Emergency Physicians, The American Geriatrics Society, Emergency Nurses Association, and the Society for Academic Emergency Medicine (2013), p. 3.

The Council is working with the Virginia Hospital & Healthcare Association (VHHA) to provide educational webinars for the Commonwealth's hospitals on the subject of Geriatric EDs. The VHHA will do a survey of its members in fall 2014 to determine if hospitals are shifting to the Geriatric ED physical design and model of care. The ED visit rate for older patients exceeds that of all age groups other than infants. These older patients can have complex clinical presentations and care is generally more costly. Geriatric EDs began appearing in the United States in 2008 and are becoming increasingly more common because they create the opportunity for care in an environment that is both cost effective and has positive outcomes. The special care needs of an increasingly older adult population may not be aligned with the priorities for how ED physical design and care is currently provided. The recently released guidelines cited above cover staffing and workforce education; follow-up care; quality improvement; equipment and supplies; policies, procedures, and protocols; the use of urinary catheters; medication management; fall assessment; delirium and dementia; and palliative care. Structural enhancements include thicker mattresses, noise reduction rooms, hearing and visual assist devices, special lighting, reduced-glare floors, ambulation-assist hand rails along the walls and blanket warmers. Similar programs designed for other age groups (pediatrics) and specific diseases (heart attack, stroke, and trauma) have resulted in less costly care and better outcomes.

Almost half (46%) of family caregivers perform medical or nursing tasks for their loved ones with multiple chronic physical and cognitive conditions. Three out of four (78%) who provide [these] medical or nursing tasks manage medications, including administering intravenous fluids and injections. "Home Alone: Family Caregivers Provide Complex Chronic Care," AARP, 2012, p. 1. <http://www.aarp.org/home-family/caregiving/info-10-2012/home-alone-family-caregivers-providing-complex-chronic-care.html>.

The Council met with VHHA and AARP staff to discuss safe and effective hospital discharges by working with family caregivers to ensure they provide competent post-hospital care to their family and other loved ones. AARP is promoting The Caregiver Advise, Record, Enable (CARE) Act to better support family caregivers as they safely help older adults stay at home. The legislation features three important provisions:

- The name of the family caregiver is recorded when a loved one is admitted to a hospital or rehabilitation facility.
- The family caregiver is notified if the loved one is to be discharged to another facility or back home; and
- The facility must provide an explanation and live instruction of the medical tasks that the family caregiver will perform at home.

Recommendations to the Governor and General Assembly

The Council offers the following recommendations about the needs identified by older Virginians and family caregivers to support their independence and well-being.

- **Support additional public guardianship funding** to address unmet demand (961 documented on the Public Guardian Program waiting list as of March 2014) and **monitoring and training programs for all guardians.**
- **Provide funding for services and supports that enable older Virginians and those with disabilities to remain in or return home.** These services and supports are provided by the Department for Aging and Rehabilitative Services and its network of Area Agencies on Aging, Centers for Independent Living, local departments of social services, and the Department of Medical Assistance Services. These services provide assistance for Virginia's most vulnerable older adults, including those with Alzheimer's Disease and related dementias, and enhance opportunities for home and community-based living. Examples include: Consumer-Directed Personal Care; Program of All-Inclusive Care for the Elderly (PACE); Chronic Disease Self-Management Program (CDSMP); Respite Care; Companion Services; Adult Day Health Care and related transportation, all of which avoid or delay institutionalization and prolong valuable support provided by family caregivers.
- **Provide funding for Elder Abuse Prevention** that moves the state toward a "proactive model" from a "reactive model" for prevention and management of elder abuse. More education about self neglect is needed since self neglect constitutes approximately 55% of Adult Protective Services reports.
- **Promote Senior Friendly Hospitals and Emergency Departments, as well as elder safe home care.** The Commonwealth should encourage evidence-informed quality improvements for hospitals and home care providers to assure safety and the best outcomes for older patients.
- **Promote safe and effective hospital discharges by working with family caregivers** to ensure they provide competent post-hospital care to their family and other loved ones in conformity with the Joint Commission's Discharge Planning and Accreditation Standards and federal CMS regulations.
- **Monitor Commonwealth Coordinated Care** for quality, safety, and effectiveness and assure that the aging network is integrated with the insurers for service delivery to the dual eligible population.
- **Promote innovative models to "de-institutionalize" the nursing home environment** and work towards more supports and integration to allow older adults to age in place. Encourage movement from the institutional model to the Greenhouse or Household Model of long-term care homes of 14-20 residents.
- **Promote an appropriately trained health care workforce for the aging population.**
- **Provide access to health care insurance for an additional 400,000 low income uninsured persons in Virginia.**
- **Ensure voting access for seniors.**



CERTIFICATE of RECOGNITION

By virtue of the authority vested by the Constitution of Virginia in the Governor of the Commonwealth of Virginia, there is hereby officially recognized:

OLDER VIRGINIANS MONTH

WHEREAS, there are approximately 1.5 million adults in the Commonwealth who are over 60 years old, and this population will expand to more than 2 million by 2030, when one in every four Virginians will be over 60 years old; and

WHEREAS, the month of May has been designated by the U.S. Administration for Community Living as the time for communities across America to honor its older citizens by celebrating their contributions and achievements; and

WHEREAS, this year's theme for May is "Safe Today, Healthy Tomorrow," which emphasizes the value of injury prevention and safety awareness in helping older adults remain healthy and active; and

WHEREAS, Virginia is committed to helping all individuals live longer, healthier lives; and

WHEREAS, the Virginia Area Agencies on Aging and Senior Centers, integral parts of Virginia's aging network for wellness and support services, welcome this year's theme and will provide opportunities to enrich the lives of individuals young and old by:

- Providing information on fire, fall, and scam prevention methods in coordination with local fire departments, law enforcement agencies and home health service providers
- Participating in regional TRIAD crime prevention programs for seniors
- Partnering with the business community to inform older adults on how to "safety proof" their homes
- Organizing walkathons and other health-focused events; and

WHEREAS, the State Adult Services and Adult Protective Services Program has joined the Virginia Department for Aging and Rehabilitative Services to streamline services that will make communities safer for older Virginians;

NOW, THEREFORE, I, Terence R. McAuliffe, do hereby recognize May 2014 as **OLDER VIRGINIANS MONTH** in our **COMMONWEALTH OF VIRGINIA**, and I call this observance to the attention of all our citizens.




Governor


Secretary of the Commonwealth



CERTIFICATE of RECOGNITION

By virtue of the authority vested by the Constitution of Virginia in the Governor of the Commonwealth of Virginia, there is hereby officially recognized:

ADULT ABUSE PREVENTION MONTH

WHEREAS, more than 1.5 million Virginians are currently over the age of 60 and the population of older Virginians will increase to more than 2 million, one quarter of Virginia's population, by 2030; and

WHEREAS, during fiscal year 2013, Virginia Adult Protective Services received over 20,000 reports of adult abuse, neglect, and exploitation; and

WHEREAS, older Virginians and Virginians with disabilities may be targets for abuse, which can occur in families and communities of all social, economic, racial and ethnic backgrounds; and

WHEREAS, in order to reduce the incidence of adult abuse in Virginia, there are a number of adult abuse prevention programs that provide vital services to older Virginians and Virginians with disabilities, including a 24-hour hotline, crisis intervention, emergency shelter, home-based and community services, public education, and legal advocacy; and

WHEREAS, Adult Abuse Prevention Month offers all Virginians the opportunity to participate in community efforts to improve the safety and well-being of people throughout the Commonwealth, to recognize the organizations and individuals who serve them, and to remember victims of adult abuse and their families; and

WHEREAS, in July 2013 the State Adult Services and Adult Protective Services Program joined the Virginia Department for Aging and Rehabilitative Services to integrate and streamline services for older Virginians and Virginians with disabilities;

NOW, THEREFORE, I, Terence R. McAuliffe, do hereby recognize May 2014 as ADULT ABUSE PREVENTION MONTH in our COMMONWEALTH OF VIRGINIA, and I call this observance to the attention of all of our citizens.




Governor


Secretary of the Commonwealth

Secretary of the Commonwealth

Commonwealth Council on Aging 2014

Beth Barber, Chair, of Charlottesville
Term ends 6/30/16

Valerie Price, Vice-Chair, 3rd Congressional District
Term ends 6/30/17

Kyle R. Allen, D.O, A.G.S.F., of Williamsburg
Term ends 6/30/16

Shewling Moy, 2nd Congressional District
Term ends 6/30/18

Robert B. Blancato, 8th Congressional District
Term ends 6/30/16

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Term ends 6/30/16

Mitchell Patrick Davis, 9th Congressional District
Term ends 6/30/17

Roberto Quinones, 10th Congressional District
Term ends 6/30/18

David M. Farnum, of Roanoke
Term ends 6/30/16

Stephen G. Reardon, Esq., of Richmond
Term ends 6/30/14

Arthur R. Giesen, of Waynesboro
Term ends 6/30/16

Kathryn B. Reid, 5th Congressional District
Term ends 6/30/17

Joni C. Goldwasser, 6th Congressional District
Term 6/30/17

Vernon Wildy, of Glen Allen
Term ends 6/30/16

Carter Harrison, of Cartersville
Term 6/30/17

Veronica Williams, 1st Congressional District
Term ends 6/30/18

Valerie L'Herrou, JD, 7th Congressional District
Term ends 6/30/18

Sandra Williamson-Ashe, Ed. D., 4th Congressional District
Term ends 6/30/18

Richard W. Lindsay, M.D., of Charlottesville
Term ends 6/30/16

Ex Officio Members

The Honorable William A. Hazel, Jr., MD
Secretary of Health and Human Resources

James A. Rothrock, Commissioner
Robert Brink, Deputy Commissioner
Virginia Department for Aging and Rehabilitative Services

Lynne Williams
Virginia Department of Social Services

Terry A. Smith
Director, Division of Long Term Care, Department of Medical Assistance Services

Courtney Tierney
Representative, Virginia Association of Area Agencies on Aging

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The purpose of the Council shall be to promote an efficient, coordinated approach by state government to meeting the needs of older Virginians. (Code of Virginia §51.5-127)

<http://www.vda.virginia.gov/council.asp>



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