

**MINUTES**  
**Utah Commission on Aging**  
**June 3, 2008**  
**12:00 – 2:00 pm**

**Commission Member Attendees:**

Norma Matheson  
Maureen Henry  
David Sundwall  
Cherie Brunner  
Councilwoman Suzanne Allen  
Rob Ence  
Mark Supiano  
Ryan Christiansen for Diana Kirk  
Helen Thatcher for Kristin Cox  
Shauna O’Neil  
Lynne Shaffer for Deborah Bayle  
Archie Archuleta  
Alan Ormsby for LM Church  
Kent Alderman

**Representing:**

Chair  
Executive Director  
Utah Department of Health  
Health Care  
St. George City Council  
Advocacy Organizations  
Higher Education  
Financial Institutions  
Workforce Services  
Salt Lake County Aging Services  
United Way  
Ethnic Minorities  
Utah Department of Human Services  
Legal Profession

**Other attendees:**

Debbie Headden  
Stephen Jardine  
Michael Deily

The meeting was called to order by Norma Matheson, Chair.

**1. Welcome, Introductions, and Lunch Served**

The minutes from February 6 and April 1 were approved.

**2. Review of Recent Activities**

- Financial Guide: In collaboration with United Way, USU and AARP, the Commission is following up with Utah Saves in the creation of a survey, pilot site selections and scheduling of presentations, with the goal of follow up assessment of the Guide. The process should take approximately five months.
- Tuition Forgiveness Bill: Mark Supiano discussed the Institute of Medicine’s April 2008 Report, summarizing the issues of aging, and offering recommendations for workforce and healthcare delivery. The Health Care Subcommittee is working to propose legislation for a tuition forgiveness program for physicians who would go into and remain in the field of geriatrics in the State of Utah. South Carolina has led the way with legislation and is currently effectively using a tuition forgiveness program. They currently have retained eight geriatricians, as well as being successful in recruiting into the geriatric fellowship training program. Mark and Maureen are working with various

**MINUTES**  
**Utah Commission on Aging**  
**June 3, 2008**  
**12:00 – 2:00 pm**

advocacy groups to garner support; they will also be asking for a letter of support from the Commission.

- Advance Directives: Education on the new Advance Directives is continuing in the professional and public areas. Maureen met with Dr. Taillac at the Department of Health, who works closely with the POLST regulations. There have been two systems working side by side in the Department of Health; the EMS side and the POLST. The law that was passed this year reconciled some potential legal conflicts with the POLST regulations. The DOH is now working on these regulations to ensure that they conform to the new law. Dr. Taillac has indicated that the approach will be to collapse the two systems together, with the hope that the whole system will become more user-friendly. There will be a period for public comment once the new legislation is drafted.

Health Care Decisions Day took place nationally April 16. Approximately 12-15 entities partnered together to make this a success within the State of Utah.

Maureen presented at the Utah Health Care Association and the Utah Association for Home Care and Hospice, both statewide conventions. Maureen also presented to health care professionals in Kanab. Maureen met with social workers in St. George at the hospital; they have asked us to come back in the fall for educational outreach to all the social workers in the community. Suzanne Allen and Maureen hope to hold some public meetings and work with the senior centers to get the word out about the new directive. The goal is to get other agencies to take over some of the training. The social workers seem to be taking the lead with the Advance Directives. Maureen created a one-page informational handout for the medical board at the U, as well as for other providers, to explain the minimum state requirements for the POLST and the advance directives. The hospitals and licensed health care facilities are obligated to provide the POLST in the same manner that they apply advance directives. IHC developed a web-based training for some of their health care providers as an option to the new advance directives.

Maureen will be working with the Utah Bar to educate on how to facilitate advance health care discussions. There will be another workshop through the Utah Bar; the curriculum is set. The Continuing Education course offered through the U of U did not work well; it was too expensive.

- Mental Health: The Mental Health Subcommittee is looking at the survey for health care facilities. The survey has been submitted to IRB. The Committee is continuing discussions on the surrogate decision-making pilot program.
- Public Safety: Sheriff Winder brought back over 200 surveys regarding law enforcement's view of elder abuse. Social Work is putting it through IRB in order to do a secondary data analysis. A PhD student has taken on the data set as the subject for his dissertation. He will be paid \$800 for the data entry. The

**MINUTES**  
**Utah Commission on Aging**  
**June 3, 2008**  
**12:00 – 2:00 pm**

Commission will have access to the data, for use in shaping policy regarding elder abuse and law enforcement.

Last month, there was a AARP-funded national office training sponsored by Utah Legal Services that looked at domestic violence in the elderly.

- Community-Based Care: The Committee is continuing to monitor the 211 system. There is no update on the progress.
- Health Care: A reception for geriatricians was held at Norma Matheson's home. Tony Morrison has agreed to take the administrative lead in creating a Utah affiliate of the American Geriatrics Society. It is hoped that this will become the public policy arm for the state, as well as bringing together those who are interested in aging across the health care spectrum. This affiliate would be a sister organization to the Utah Aging Alliance.

### **3. Seniors and Utah's Workforce**

The Commission is putting together a grant for the National Governor's Association for a technical assistance grant on workforce issues. The grant does not provide funding; it provides technical assistance. Six states will be chosen. The grant provides a visit from a consultant to develop a year-long plan. There is also a three-day workshop in DC. Five people will be chosen to attend with all expenses paid. This would allow Utah to become part of a national movement, and will help to bring attention to workforce issues at the highest level of state government. This grant runs from July 1, 2008 through June 30, 2009.

Maureen went through a PowerPoint presentation highlighting the labor participation rate, as well as factors for upward pressure on labor participation rates. Health care benefits seem to be to be a major factor in older workers' decision to continue to work.

Between the ages of 55-65, participation rates drop significantly. This is due to health care decline, caregiver responsibilities, and inability to find work of healthcare. While the rates of disability and chronic illness have decreased, obesity will be a relevant issue. Medicare is still solvent today because the disability rates have gone down.

Utah's workforce differs from the US labor force. The large band of workers in Utah who fall in the 20-35 age category today lack the experience base that the older workers possess. There is the potential for knowledge vacuums as older workers start to retire, especially in state government.

### **4. Sustainability of Commission on Aging**

**MINUTES**  
**Utah Commission on Aging**  
**June 3, 2008**  
**12:00 – 2:00 pm**

- Michael Foundation: The Commission has been awarded \$10,000 to provide outreach to ethnic and minority communities on Advance Directives. The Commission is hoping to reach out to these communities by working with folks involved with The Ethnic and Minority Senior Summit held in Ogden in May to develop an advisory committee for guidance on how to best spend the funds.
- Burton Foundation: Our application is pending.
- Robert Wood Foundation: The grant would provide \$350,000 over three years to support research on health-care decision making issues that the Advance Directives have inadvertently created a need to address.
- Atlantic Philanthropies Health and Aging Fellow Application: The grant would provide \$30,000 to look at developing a plan to rebalance the long term care system in the state.

The Commission could seek continuation as The Commission on Aging without state funding. This would improve the ability to obtain funding elsewhere, as well as the benefit to the State and to the University to have a formal relationship for the purpose of applying for federal grants. Many of the federal grants require strong links between researchers and the state. Two grant proposals currently underway are for a CDC Injury Prevention Center and a rural VA Center.

There is also the possibility of obtaining endowment funding for an Aging Policy Center through the Archstone Foundation. Maureen distributed a draft proposal for this new center. The Commission will continue to look at this closely.

The meeting adjourned at 2:00 p.m.