UCOA Meeting Agenda
August 10, 2017
12:00-1:30 PM
Bateman Horne Education Center
24 South 1100 East #205
(Free parking west and east of office building)

Lunch Provided by Mission Health Services – Gary Kelso

12:00 Noon   Lunch

12:10 Welcome and May 4 Comments   Andrew Jackson, UCOA Chair

12:15 Commission Member Status   Andrew Jackson, UCOA Chair
       Thank you to Betty Vierra and Mike Cupello
       Input for new recruitment
       Other renewals in process w Heather Podolan

12: 20 Executive Director Report   Rob Ence

12:30 Selected Community Conversations (5-7 min ea.)
1. Gardner Policy Institute – Mike Hollingshaus
2. Falls Prevention – Tom McKay
3. Utah WINGS – Karolina Abuzyarova
4. Children's Service Society - Emily Redd, Bacall Hincks
5. SLCo AAA – Foster Grandparents – Joey McNamee
6. Utah Nursing Consortium - Teresa Garrett
7. Utah Geriatric Education Center (UGEC) – Linda Edelman
8. Emergency Prep/VOAD – Linda Milne

01:15 Partner and Public Input

       Next Meeting – November 9, 2017 – Thursday, 12:00 – 1:30 PM
            Location TBD – Annual Planning Session
       Committee conference calls as needed

01:30 Meeting Adjourned

(Public and partner comment and input welcomed throughout)

UCOA Executive Director Report
August 10, 2017

1. 2016-17 Year in Review - Highlights
   a. Secured renewal
   b. Statutory adjustments
   c. Funding foundation secured
   d. Strategic framework re-envisioned
   e. Committee structure established
   f. Partnerships renewed and newly engaged
   g. Public speaking engagements
   h. Community partner affiliations
   i. Research partner alliances

2. 2017-18 Current Projects
   a. Communications
      i. Revised Annual Report
      ii. UCOA branding and identity
      iii. Revamped website and community calendar
      iv. UCOA blog
      v. UCOA podcasts
      vi. Social media presence
   b. Research and Academia
      i. Kem Gardner Institute research partnerhsip
      ii. National resources
      iii. Provider shortages – Nursing Consortium, etc.
   c. Public Policy
      i. Committee meetings
      ii. Association of County Governments
      iii. Legislative priorities
   d. Practice: Community Services and Education
      i. Health
         1. Arts and Aging (reframing Music & Memory coalition)
         2. Alzheimers Council – funding and education
         3. Falls prevention coalition
         4. Advanced Care Planning (End of Life Training, POLST, Advanced Directives)
         5. Caregiving
      ii. Financial Security
         1. BankSafe training and consultation
         2. Elder abuse and financial exploitation
      iii. Community
         1. Community readiness for emergencies (VOAD – Voluntary Organizations Active in Disaster)
         2. Salt Lake County Aging Initiative
         3. Resilient communities

Partner Update Briefings

1. **<u>Alzheimer's Coalition – Lynn Meinor</u>**

    Dementia Dialogues Train the Trainer will be held August 10-11 at the Utah Department of Health. 30 new trainers will be trained by Dr. Macie Smith from the University of South Carolina. A total of 52 trainers will be teaching Dementia Dialogues statewide.

    Two conferences will be held on October 6th in conjunction with Senior Expo at South Town Exposition Center. Health Care Professional and Caregiver Tracts will be held simultaneously from 8:30-4:00.

    Two Caregiver Conferences will be held in St. George, November 9th in Sun River and November 10th at the Veteran's Home in Ivins.

    Alzheimer's and Related Dementias Coordinating Council next meeting- September 21st from 10-12:00. Judy Seegmiller author of "Life with Big Al, A Caregiver's Diary" will be guest speaker.

    A 5-year contract with HealthInsight has been implemented to develop training curriculum for physician offices on cognitive assessments during Medicare Annual Wellness Visits.

2. **<u>Foster Grandparents</u>**

    Salt Lake County Aging & Adult Services is looking for 20 new Foster Grandparents to tutor at-risk children in preschools and elementary schools. Eligible volunteers are age 55+, earn less than $2000 (to qualify for an hourly volunteer stipend), can pass a background check, and want to make a difference in children's lives. Call 385.468.3260 to learn more.

    Aging & Adult Services needs Foster Grandparent volunteers for the 2017-2018 school year! Foster Grandparent volunteers mentor, support, and tutor at-risk children at elementary schools and preschools throughout Salt Lake County.

    Volunteers receive a $2.65 per hour stipend as well as travel reimbursement to support their volunteer efforts. The stipend and reimbursement are non-taxable and do **not** count as income when determining eligibility for benefits such as food stamps and housing.

Foster Grandparents:

- Are age 55+
- Meet income requirements (about $2000 per month for one person)
- Can pass a background check
- Volunteer at least 20 hours per week

Aging & Adult Services needs 20 people to join our dedicated team of volunteers who are helping children learn and grow.

Interested volunteers should call 385.468.3260 to learn more!

3. **Utah WINGS:**

A Court-community partnership WINGS (Working Interdisciplinary Network of Guardianship Stakeholders) is working on Elder Justice Innovation grant ($30,000) from the Administration on Community Living administered by the American Bar Association and National Center for State Courts. WINGS is working on guardianship reform and funds will be used to educate judges on less restrictive alternatives to guardianship, limited guardianship and inter-agency coordination in cases of abuse, neglect and exploitation of vulnerable adults.

Another grant ($40,000) is through the Office of Rehabilitation, Utah Department of Workforce Services under the umbrella of U.S. Department of Education. The funding is utilized to provide life planning options and alternatives to guardianship and guardianship procedures to ASPIRE families with children with disabilities on SSI. ASPIRE stands for Achieving Success by Promoting Readiness for Education and Employment.

Leftover grant funds from FY2017 ($5,000) from the Utah State University, Center for Persons with Disabilities will be utilized to conduct a roundtable discussion in early November 2017 on interrelation of involuntary commitment, guardian's authority and essential treatment.

4. **The Utah Nursing Consortium**

Introduction

The Utah Nursing Consortium is a collaboration of 10 publicly funded and nonprofit nursing education programs, health care industry partners and concerned community members. These 10 schools educate over 2/3 of Utah's nursing workforce, graduating over 1200 of the 1600 registered nurses educated annually. The mission of the Consortium is to increase the number of new RNs licensed in Utah each year to meet market demands and continue Utah's legacy of high quality, cost effective health care.

Problem

Utah's population is growing, aging and become more chronically ill. Our need for nurses is particularly acute because we have the fasted growing elderly population, the youngest population, and the lowest death rate in the country (1). Behavioral health is an area where future nurses will be in high demand. Utah has one of the highest age-adjusted suicide rates in the U.S. and has the seventh-highest rate of alcohol poisoning deaths, according to the Centers for Disease Control and Prevention. This is a perfect storm to drive demand for nursing care.

Background

According to the Utah Medical Education Council, Utah's health care employers report over 1200 vacancies for RN positions and the capacity to expand their workforces by 8-21%. The greatest future demand for nursing is anticipated in home care, hospice and skilled nursing facility/long-term care organizations. Finally, Utah's nurses are also aging – 48% of the workforce is over the age of 45. (2, 3)

Nurses have a major positive impact on the health of the general population. A recent study documented that counties with higher RN to population ratios are healthier, with lower reports of poor health, higher mammography screening rates and lower teen pregnancy rates. Utah's current nurse-to-population rank is 47. The nursing workforce would need to grow by 20% to rank in the top 25%. (4)

Utah cannot 'recruit' its way out of this workforce issue. The Bureau of Labor Statistics estimates that there will be 1.2 million unfilled nursing positions nationwide by 2022. Several surrounding intermountain states are already being impacted by these shortages (5).

Nursing is a valued and trusted profession. Each year, over 1000 qualified applicants are turned away from a nursing education and career because of limited class size. The median annual income for an RN is $67,000. (2)

The Utah State Legislature has not made a significant investment in the nursing workforce since 2005, when $2M was provided over 3 years to expand class size in the eight public institutions by about 200. While class size has slowly increased in a few institutions, uniform growth has not been demonstrated across the state since this investment.

Solution

Increase class size by 17% across the 10 Utah Nursing Consortium institutions, producing an additional 200 registered nurses entering the workforce each year.

Provide ongoing funding for the additional nursing faculty needed to accommodate this growth.

Member Schools

Brigham Young University	University of Utah
Dixie State University	Utah State University
Salt Lake Community College	Utah Valley University
Snow College	Weber State University
Southern Utah University	Westminster College

References

(1) http://www.utahfoundation.org/reports/snapshot-2050-analysis-projected-change-utah/
(2) Utah Medical Education Council (2016). Supply of Nurses in Utah: The 2016 Survey Utah's Registered Nurses. Salt Lake City, Utah.
(3) Utah Medical Education Council (2015). Demand for Nurses in Utah: The 2015 Survey of Utah's Nurse Employers. Salt Lake City, Utah.
(4) Bigbee, J.L., Evans, S., Lind, B., Perez, S., Jacobo, L. & Geraghty, E.M. (2014). RN-to-Population ratio and population health: A multifactorial study. Journal of Nursing Regulation, 5(1), 11-17.
(5) https://www.bls.gov/ooh/healthcare/registered-nurses.htm

5. **Advanced Care Planning – POLST**

The ePOLST work in Utah is ready to move to the next level, assuming funding is immediately available through a Medicaid Infrastructure Grant. The Utah Health Information Network (UHIN) reports they are ready for the patient's Physician-Ordered Life-Sustaining Treatment-(POLST) to be shared among care providers. This is a continuation of the Beacon Grant work that many know. The Beacon grant tested a data entry collection system that digitized paper POLST forms and stored them in a centralized repository at the Utah Department of Health. Since 2015, Avalon and UHIN have been testing sharing the POLST through the cHIE. The completed POLSTs are uploaded into the cHIE for access through query or portal. The current access to the POLSTs follow HIPAA rules.

The next steps include developing an electronic form that can be filled, signed electronically, saved online, and queried instantly. UHIN's system will include 24/7 support and seamless interaction with the patient's Electronic Health Record.

Grant forms were submitted in late July, and it is the general experience that they are awarded around 60 days after submission. The next meeting of the ePOLST work group is anticipated after the MIG grant is awarded or rejected. If awarded, work will begin very quickly. If rejected, it will be back to the drawing board for an income source.

6. **Falls Prevention**

Falls are the leading cause of injury-related death and hospitalizations in adults aged 65 and older. In Utah, EMS responds to 11,000 emergency calls per year for older adult falls; approximately 75% require transport to Emergency Departments. Analysis of Salt Lake City call data has identified the highest 911 call volume at several senior housing complexes. To reduce emergency calls and assist residents in staying as active and independent as possible, the Utah Falls Prevention Coalition is piloting a multi-faceted fall prevention program at Friendship Manor, one of the identified apartment complexes. Partners include Salt Lake County Health Department, Utah Department of Health, Salt Lake City Fire Department, Lighten Home Health and Hospice, and housing center staff. The program aims to reduce falls by evaluating and addressing fall risk factors in individuals who have experienced a fall or are at risk for future falls. The interventions include: a home safety check by an EMT, participation in the Otago Exercise Program (a 1-on-1 strength and balance program provided by a physical therapist), medication review by a pharmacist, group exercise classes, a yearly 7-week Stepping On fall prevention workshop for interested residents, and general resident

education about fall risk through bi-monthly newsletter articles and periodic presentations.

The program started in April and has been slowly ramping up. The residents like Otago and the home safety checks. There are currently 12 residents that have, or are, participating in Otago. No one in the program has had a fall, called 911, or been hospitalized. Challenges include engaging residents to participate in programs, especially the educational presentations and group exercise, data sharing and tracking between agencies, and the extra time spent determining insurance eligibility for Otago.

7. **Health Insight**

HealthInsight is collaborating with Dr. Anna Beck to provide Serious Illness Conversation Guide Training using the virtual ECHO mechanism to providers in Utah, Nevada, New Mexico, and Oregon. This training session will be held in October and providers will receive 3.0 CMEs. HealthInsight staff is coordinating with Emmie Gardner to present on advance care planning at the Utah Health Care Association.

8. **Utah Geriatric Education Center (UGEC)**

The Utah Geriatric Education Center (UGEC) will enhance healthcare provider workforce capacity, as well as patient and family engagement, to improve primary care and geriatric outcomes in long term services and supports (LTSS) in urban and rural environments. Driven by a need to improve the quality of care provided in Utah's LTSS programs, educational activities are targeted to the inter-professional healthcare workforce that provides care in nursing facilities in Utah for long term residents who receive primary care through a system comprised of physicians, nursing home staff, and family caregivers. The bidirectional integration of primary and geriatric care in LTSS will be evaluated for many Health People 2020 outcomes and achieving primary care and long-term care quality indicators. Additionally, community outreach educational activities in Alzheimer's disease and related dementias (ADRD) are targeted to the general population including patients and their caregivers, as well as to healthcare providers. The four measurable project objectives are to: 1) Integrate geriatrics and primary care into the delivery systems in 21 nursing facilities and transform the learning environment for academic trainees and career development; 2) Develop health professionals and direct care workers with competencies in inter-professional collaboration who can assess and address the needs of older adults and their families/caregivers at the individual, community, and population levels; 3) Develop and

deliver programs for inter-professional teams of providers and direct care workers, patients, families and caregivers focused on communication skills and transitions of care in the long term care setting that will promote a shared understanding of health information and goals of care, reducing unnecessary emergency department transfers and hospital readmissions; and 4) Improve the care of older adults with ADRD through academic, career development, and community outreach education for direct care workers, families, and health professionals. Guided by a Governing Board, comprised of community partners and University collaborators, the project director and five co-directors will lead an inter-professional team of 16 University of Utah faculty members. Curricular content will be developed in five strands – care transitions, caregiver support, advance care planning, dementia care, and communication and health literacy – to support physician, nursing, and interdisciplinary and community programs. The educational programs delivered to the 21 facilities using established distance learning platforms will emphasize integration of primary and geriatric care delivery for chronically ill older adults in LTSS; inter-professional collaboration of the primary care workforce; collaboration with community partners to address healthcare gaps; and partnering with community outreach resources to address patient/family and caregiver learning needs.

9. **Center on Aging**

The 11th annual Retreat was held on April 27-28, 2017; more than 220 guests attended the retreat. The poster session included 28 poster presentations. The theme for the retreat to coincide with the TEP consensus conference was "Resilient Places for an Aging Society: Adaptive Capacity Promotion for Healthy Living." (also see http://www.cap.utah.edu/resilient-places/) We were pleased to welcome four distinguished Keynote speakers Drs. Scott Hummel, MD (University of Michigan) "Promoting Resiliency and Successful Outcomes in Heart Failure: What if the Failure's Not All in the Heart?"; Susanne Iwarsson, PhD (University of Lund) "Transdisciplinary Perspectives on Home, Health and Disability Along the Process of Aging"; James Sallis, PhD (UC-San Diego) "Active Cities: Meeting Many Needs of Older Adults" and Amanda Lehning, PhD (University of Maryland) "Implementation and Evaluation of Aging-Friendly Communities: Conceptual and Empirical Challenges". There were three Symposia sessions led by University of Utah faculty – Andrew Merryweather, Alexandra Terrill, Neal Patwari and Heather Sobko.

Transformative Excellence Program

Dr. Supiano partnered with the Dean of the College of Architecture + Planning and Center member, Dr. Keith Diaz Moore, to revise a Transformative Excellence Program (TEP) proposal Dr. Diaz-Moore had submitted to incorporate aging. From this, the *Co-Laboratory on Resilient Places (CRP): Adaptive Capacity Promotion for Healthy Aging* was submitted and ultimately was selected for funding. The geriatric syndrome of heart failure was chosen as the disease condition to target, and faculty recruitment for an investigator – cardiologist or geriatrician – focused on the functional needs of heart failure patients will be supported.

The TEP launched this Spring with a consensus conference convened as a strategic planning event to assist in developing the position descriptions for the four new faculty "cluster" hires in the School of Medicine, College of Health, College of Social Work and College of Architecture + Planning. Four external experts in aging and resiliency accepted our invitation to participate in this consensus conference, and provided keynote presentations for the CoA annual research retreat (see below). A white paper based on the conference output summarized in four "storyboards" developed by a graphic reporter (see http://www.cap.utah.edu/resilient-places/#storyboards) is in preparation. This white paper and the consensus process will inform the creation of the four new faculty position descriptions. The recruitment process for these positions will be occurring during the coming 17-18 academic year with a target to have the new positions filled by Fall 2018.