



Older Adult Services Advisory Committee Meeting

Date: August 8, 2005

Location: James R. Thompson Center, Chicago, Illinois

IN ATTENDANCE:

Committee Members:

- Stephanie Altman – Health and Disability Advocates
- Mark Heany for Darby Anderson – Addus HeathCare
- Paul Bennett – Central West Case Management Unit
- Dennis Bozzi – Life Services Network
- Pat Comstock - Illinois Health Care Association
- Ann M. Cooper – Illinois Association of Nutrition Programs
- Thomas Cornwell, MD – HomeCare Physicians
- Donna Ginther – AARP
- Terrence Sullivan for Myrtle Klauer – Illinois Council on Long Term Care
- Jonathan Lavin – Suburban Area Agency on Aging
- Nancy Nelson for Linda Leone – Prairieland Home Care
- David Lindeman – Mather LifeWays Institute on Aging
- Joyce Lony – Eden United Church of Christ
- Jean McCain – Livingston Manor
- Phyllis Mitzen – citizen member over 60
- Katie Russell-Sullivan for Harriet O'Connor – Illinois Hospice and Palliative Care Organization
- Steven K. Rothschild – Rush University Medical Center
- Brian Schwarberg – Alzheimer's Association
- Cathy Weightman-Moore – Catholic Charities Long Term Care Ombudsman Program

Committee Members not in attendance:

- Sydney Bild – Metro Seniors in Action
- James R. Donelan – The Township Officials of Illinois
- Larry Frang – Illinois Municipal League
- Marion Hanks-Bell – registered nurse
- Flora Johnson – family caregiver and SEIU Local 880
- Patricia O'Dea-Evans – B A Place for Mom
- Ruth Rankin – Sarah Bush Lincoln Health System
- Karen Anne Rose – Institute of Physical Medicine and Rehabilitation

- Tim Thomas – SEIU Local #4
- Carmen Velasquez – Alivio Medical Center
- Cheryl Woodson – Woodson Center for Adult HealthCare
- Cynthia Worsley – Association of Illinois Senior Centers

Ex-officio – non voting Committee Members in attendance:

- Charles D. Johnson – Illinois Department on Aging
- Kelly Cunningham for Ann Marie Murphy – Illinois Department of Public Aid
- Naomi Dunn for Enrique Unanue – Illinois Department of Public Health
- Sally Petrone – Illinois Department on Aging, Long Term Care Ombudsman
- Jennifer Novak – Illinois Housing Development Authority
- Laura Garcia for Sinead Rice-Madigan – Illinois Department of Financial and Professional Regulation, Division of Insurance

Ex-officio – non voting Committee Members not in attendance:

- Gwen Diehl – Illinois Department of Veterans Affairs
- John Eckert – Illinois Department of Human Services
- Jared Thornley – Office of the Governor
- Bert Gisi – Illinois Finance Authority

OBSERVERS:

- Evelyn Gooden – AARP
- Chloe Froonickx – AARP
- Frank Daigh – AARP
- J. Violet Gannon – Health and Medicine Policy Research Group
- Scott Musser – AARP
- Alice Weber – SEIU-880
- Debbie Witt – Illinois Home Care Council
- Carolyn A Guthman – AARP
- Eleanor DiAngelo – Chicago Department on Aging (consultant)
- Marsha Johnson – CCSI
- Mary Geis – Plows Council on Aging
- Courtney Snyder – AARP
- Martha Holstein – Health and Medicine Policy Research Group
- Susan Real – East Central Illinois Area Agency on Aging
- Karen Schainker – Association of Illinois Senior Centers
- Amy Paschclog – AARP
- Alan Factor – University of Illinois at Chicago
- Heather O'Donnell – Center for Tax and Budget Accountability

STATE AGENCY REPRESENTATIVES:

- Joe Hylack-Reinhotlz – Illinois Department of Healthcare and Family Services
- Ashley Pennock – Illinois Department of Human Services
- Greg Diephouse – Illinois Department of Human Services
- Michele Piel – Illinois Department on Aging
- Molly Spengler – Illinois Department on Aging

- Joseph Lugo – Illinois Department on Aging
- Dave Vinkler – Illinois Department on Aging
- Leann Dolan – Illinois Department on Aging
- Sherolyn Shaw – Illinois Department on Aging

SUMMARY

Welcome and Introductory Remarks:

The meeting was opened by Director Johnson who welcomed the participants and thanked everyone for their hard work. Deputy Chief of Staff – Social Services, Louanner Peters was unable to attend but Director Johnson will continue to keep her apprised of the OASAC's activities.

Approval of Minutes:

David Lindeman motioned to approve the minutes from the May 9th meeting. Stephanie Altman seconded the motion.

Executive Committee

David Lindeman reported for the Executive Committee. Representatives Julie Hamos and Sarah Feigenholtz recently convened a meeting with Deputy Gelder, chairs of OASAC workgroups and several other OASAC members. The representatives indicated that there is an opportunity for the OASAC to put forth initiatives for consideration during the Spring legislative session. The goal is to have recommendations by the end of September. The executive committee determined each workgroup would put together several top priorities. Both long term and immediate projects should be considered. Workgroups should also identify those that could be acted on in the immediate legislative session. The next meeting of the OASAC will be on September 26. At that time, initiatives will be selected and finalized.

The Executive Committee discussed the formation of new subcommittees. It was determined that a new subcommittee, "Nursing Home Conversion" would be formed. Enrique Unanue, Department of Public Health has agreed to serve as the Chair. There was discussion regarding the establishment of two additional subcommittees: 1) Quality; and, 2) Housing. It was suggested, and the Executive Committee agreed, to defer until next year until the current subcommittees could more fully develop these issues. However, in an effort to maintain the momentum currently underway related to housing, IDOA will ensure that housing issues are fully integrated into the OASAC discussions.

Jennifer Novak of the Illinois Housing Development Authority (IHDA) explained the Disability Services Advisory Committee (DSAC) is moving ahead on the housing issue. OASAC will be involved and the subject of housing won't be forgotten.

The Executive Committee also discussed the MAPP consultants. Retaining the MAPP consultants has been temporarily deferred.

Pat Comstock explained the work on nursing home conversion had already begun as a subcommittee of the services workgroup. Who the group reports to is the only thing that will change.

Michele Piel, Department on Aging, encouraged all OASAC members to join a workgroup.

Workgroup Reports and Presentations on Top Priorities for FY 07 Consideration:

Workforce and Caregivers

David Lindeman reported for the Workforce and Caregivers workgroup. Two handouts were provided; a survey and draft recommendations. A survey has been taken to make sure both professionals and consumers' needs are taken into consideration. The workgroup believes that the most immediate need is to improve benefits for direct care workers. Career ladder/lattice models and training also received high scores on the survey.

A question was asked if increased wages would provide as much incentive as providing insurance. Increasing wages would have a great impact but may take long to accomplish. The results of the workgroups survey suggest that wages are the most important thing to workers but health insurance was close behind. Federal funding could also help with costs of providing insurance and this also helps with recruitment and retention of workers.

A question was asked regarding elder abuse and regulations for in home care. Donna Ginther responded that Senate Bill 159 addresses this issue and states agencies providing home services that are not under contract with the Illinois Department on Aging will have to be licensed by the Illinois Department of Public Health. Those that are under a contract with the Illinois Department on Aging will not be licensed. Separate legislation has been introduced regarding national background checking. Nursing homes are included in that legislation. It was suggested that the Quality subgroup look into this issue.

Alicia Weber of the Workforce/Caregiver workgroup elaborated on the workgroup's proposed priority item of providing health insurance to workers. The workgroup is evaluating different models such as expanding existing programs, a jointly administered health fund, and use of an existing state plan. The workgroup will continue to look at this topic.

The workgroup is also concerned about health insurance for nursing facility workers. For those nursing facilities that already provide insurance, an additional add on rate could be given to make premiums more affordable. The workgroup would like to explore different providers within the aging network (e.g., home delivered meals, adult day service, etc) to see if and how they get insurance now and what would be a feasible way to provide affordable health insurance.

The workgroup will share with the committee the priorities they have been focusing on and circulate more detailed recommendations so the committee can review it in depth. The workgroup is looking for input from experts and other interested parties outside of our group to continue working on these priorities.

The workgroup has also looked at family caregiver goals which focus on access to affordable, readily available, high quality respite care, the needs of working caregivers and individualized training for caregivers.

It was suggested that the workgroup look at existing programs and make them more flexible and family friendly. For example, look at Adult Day Care as a respite service.

Services

Donna Ginther reported for the services workgroup and provided a handout. The workgroup has basic goals: quality, inventory of services and service expansion. The workgroup is looking at the current available services and if they will meet the needs of the population to come.

The workgroup provided an additional handout focusing on what can be acted on in the short term. Those items are the issue of a comprehensive assessment tool and comprehensive case management; the information and assistance structure which includes upgrading the Illinois Department on Aging's HelpLine number and getting the Elder Abuse call through quickly as well as having enough people to answer those calls; the home delivered meals waiting list and the issue of being able to provide meals two times a day, 365 days/yr; transportation and; eliminate the barriers to aging in place. For example, if a person in an Assisted Living Facility needs total assistance with two or more activities of daily living (ADLs) they have to move. This may be something the nursing home conversion workgroup needs to take into account. The workgroup's handout focuses on three dot points: the expansion of senior and community services, worker wage parity and health benefits, and eliminating the barrier to aging in place in residential settings.

Comprehensive case management was explained and discussed. When a client calls inquiring about services, a case manager goes to the home and does a comprehensive case management assessment. The case manager reviews all programs the client may need, helps them get those services by doing referrals and follows up. The comprehensive tool builds off of the DON. The services workgroup has spent half of their time on different assessment tools to learn how they mesh together as a person transitions between services.

The workgroup meets again August 29.

Nursing Home Conversion

Terrence Sullivan spoke for the nursing home conversion workgroup which was established at the July 25th meeting of the executive committee. This workgroup has met once. The workgroup's action template is still being written.

The overall goal is to develop methodology for effective conversion of current service models in order to provide multiple options and resources for senior housing and home and community services. The workgroup feels the biggest problem with senior housing is fragmentation. The workgroup wants housing that is more integrated. The goal is to have housing where the senior can age in place. Ideally, the senior would remain in the same location and the license would change to allow the senior to receive the necessary services. The "license follows the person". The workgroup has a vision for senior housing that is creative and integrative and allows seniors to age in place.

Another idea is a collaboration of senior services that would utilize existing resources in collaboration with other agencies so services not being provided can be offered. For example, nursing facilities make three meals per day, including those for special diet. Agencies could network with them to make extra meals for other services such as home delivered meals.

The workgroup has developed four strategic objectives; 1) identify barriers to converting service options, 2) establish a conversion program with regulations and an application process, 3) locate funding for the conversion program, 4) reduce and convert nursing home beds consistent with the service needs of the area.

The workgroup's priority service goals for 2006 are funding for a bonding program and low interest loans. These would not be funded by GRF and therefore can be established separately. The workgroup feels this is probably the most realistic way of getting funding for conversion at this point.

The nursing home bed conversion program allows for whatever is needed in a particular area. There are 14,000 unused beds in IL. The legislation states beds must be converted, and banked for 15 years. This would allow a nursing facility to reopen the beds without going to the Illinois Health Facilities Planning Board. The law states this would be done based on the needs of each individual community. The conversion program would not be involved with the development of new properties.

The conversion group's next meeting will be August 23rd.

Finance

Pat Comstock reported for the finance workgroup. A handout was provided. The workgroup anticipates and expects working with other workgroups. The workgroup has developed three goals, 1) map out existing programs, 2) quantify what is actually being spent on those programs and, 3) make recommendations to the OASAC to address long term care funding needs.

The workgroup will be moving to face to face meetings and has scheduled a full day work session scheduled for August 23 and welcomes any new members.

Coordinated Point of Entry

Jonathan Lavin spoke for the group. The workgroup is working on a flowchart to look at multiple access points. Access points could be a book store, the library or local diner. A person could get information through walk-ins, website, phone, public locations and agencies providing home and community based care.

There will be a range of media to help (e.g., Internet access, counselors/facilitators that can do an assessment and a mini assessment to look at needs of the client and ability and willingness to pay). The CPOE would work to identify and assist in identifying services either paid by the government or other sources and come up with consumer action plan (CAP), follow up with the consumer and assess consumer satisfaction and feedback.

There are a number of characteristics that are important to a CPOE such as a phone system that can transfer to appropriate agencies, a resource directory and a receptionist. A draft document will be sent to the full OASAC that has all of the characteristics of a CPOE.

The workgroup has developed priorities for immediate funding. These priorities include:

- o Comprehensive Assessment/Case Management
- o Management Information System/Web Page for Consumers (System that can identify gaps within the system)
- o The Creation of Additional Demonstration Sites
- o Public Information/Branding Campaign {If anyone has a suggestion, they can send it to the Point of Entry workgroup.}

The next meeting will be September 9.

State Agency Reports:

Illinois Department on Aging

Michele Piel spoke for the Illinois Department on Aging and gave an update on current demonstration projects. The Department is about to launch the federal grant to do the inventory. The Department is planning to complete the inventory in two years instead of three.

The Enhanced Transition (ET) demonstration project, which the Department received \$2 million from the Illinois Department of Healthcare and Family Services (HFS), formerly the Illinois Department of Public Aid, recently started. Two individuals have come out of nursing facilities to date.

The Department also has an initiative on emergency home response and has \$1.8 million to begin this in the fourth quarter of FY 06. The method to select a vendor is currently being finalized. This program is under the Medicaid waiver. Clients must be Community Care Program (CCP) eligible to participate.

Cash and Counseling sites will be determined soon.

Illinois Department of Public Health

Reporting for Enrique Unanue was Naomi Dunn. The Department of Public Health is licensed to regulate health care agencies. IDPH feels it needs to take a back seat in the development of some of the ideas being discussed. As the committee comes up with planning and strategies, IDPH will be involved.

A question was asked regarding IDPH's responsibilities as indicated by SB 2880. Public Act 093-1031, section 30, describes IDPH's specific responsibilities which include establishment of a nursing home conversion program.

IDPH has been involved with the services workgroup and has assisted with the discussions on conversion and regulatory issues.

Illinois Department of Healthcare and Family Services

Kelly Cunningham reported for Ann Marie Murphy. HFS feels the work of this committee is important and will be playing a larger role in workgroups including the nursing home conversion workgroup. HFS has been reviewing the legislation and is looking at ways to assist the other state agencies involved.

Action Items

The committee discussed the meeting with the legislators and what was agreed upon at that meeting. For the next meeting of the OASAC on September 26 in Springfield, each workgroup should bring back a one page information sheet that can be given to legislators. It should include the top priorities that the committee wants to put forward that could be accomplished by 2006.

There are similar themes between the workgroup's top priorities. The workgroups agreed to send their top priorities to the Department by September 19. The Department will consolidate similar items and the information will be sent out before the September 26 meeting where it will then be voted on. The workgroups are asked to send in the detailed action plan as well as a one page information sheet.

The 2880 Work Plan was handed out but there was not time for discussion. The committee is asked to review the Work Plan and send comments to the Department by September 19.

Other Business

Donna Ginther described an AARP project that attempts to allow seniors to have a say in what they would like to see in a reconstructed system. They were given a five page questionnaire that includes scenarios. The questionnaire asks about services currently offered or what services they think should be offered. All of the questionnaires will be back in September. Donna will e mail this out information out to the committee. This is still a work in progress and she welcomes any questions or suggestions.

The meeting was adjourned at 4 pm.

(These minutes were approved by the committee on September 26, 2005.)