#### Northwest Senior Services Board July 23, 2024 1:00 pm – 3:30 pm Hybrid Meeting

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#### AGENDA

	Agenda Topic	Action Required	Time
1.	Call to Order Chair- Introduction of guests Roll call Review of May minutes Announcements Public Comment	Motion	1:00 pm – 1:05 pm
2.	NWSSB Meeting Schedule	Information	1:05 pm – 1:15 pm
3.	<ul> <li>Committee Discussion         <ul> <li>Social Isolation Committee Members Marshall Gartenlaub, Jen Lautenbach, Mike</li> <li>Save our 'selves' Committee Members Survey for San Juan Island -Domestic Servic Stephen Shubert, Carl Bender, Lucretia Dev</li> <li>Advocacy Committee Members</li> </ul> </li> </ul>	es	1:15 pm – 1:30 pm
4.	NWSSB Meeting Schedule	Information	1:30 pm – 1:55 pm
5.	Break		1:55 pm – 2:10 pm
6.	NWRC Outreach and info - all share	Information	2:10 pm – 2:30 pm
7.	<ul> <li>Executive Director Updates</li> <li>Agency Updates</li> <li>Review Governing Board Meeting</li> </ul>	Information	2:30 pm – 3:00 pm

• US Aging Population Reports

<ul> <li>Legislative Priorities</li> <li>8. WA Cares Update Initiative 2124</li> </ul>	Information	3:00 pm – 3:15 pm
9. State Council on Aging Update (SCOA)	Information	3:15 pm – 3:20 pm
10. Updates from our Communities	Information	3:20 pm – 3:30 pm
11. Adjourn	Motion	

#### \*\*The next meeting of the NWSSB will be held on September 10, 2024

Anyone needing special accommodations to participate in a meeting should contact NWRC at least 48 hours in advance of the scheduled meeting.

For more information, please contact the NWRC office at (360) 676-6749 600 Lakeway Drive, Bellingham, WA 98225

#### Northwest Senior Services Board Meeting Minutes

#### May 14, 2024

#### Members Present via Zoom or Telephonically:

George Edward, Georgiann Dustin, Jodi Sipes, Holly Robinson, Jen Lautenbach, Mary Kanter, Alberta Horn, Mike Shaw, Stephen Shubert, Carl Bender, Shirley Bennett, Marshall Gartenlaub, Jana Finkbonner

#### **Members Absent:**

Lucretia Devine, Tim Poe, Evan Perrollaz

Staff Present: Amanda McDade, Bethany Chamberlin, Darla Smith

Guest: None

#### Call to Order at 1:02 PM Chair-Georgiann Dustin

- Introduction of Board Members and Guests
- Announcements- No announcements made
- Public Comment

#### Review of March 12, 2024, Minutes:

Motion put forward by Georgiann Dustin to accept the minutes from the March 12, 2024, meeting. Motion made by Jen Lautenbach and seconded by Jodi Sipes. **Motion Passed Unanimously**.

#### Board Members Term Expiring in June of 2024:

Mary Kanter – voiced desire to renew term.

Stephen Schubert – voiced desire to renew term.

Georgiann Dustin - voiced desire to renew term.

Jen Lautenbach - voiced desire to renew term.

Alberta Horn – participating via Zoom on her phone. Bethany called participant who declined renewing term.

#### Board Members Committees (general discussion):

There was discussion that NWRC can help set up committee meetings, and they can be virtual or in person.

1. Social Connection

Marshall provided an overview on the impact's isolation. People who are socially connected have a 50% increase in longevity by being active and connected. Many organizations help by connecting people and reducing isolation. Marshall voiced concern about organizations that state they connect people in the community, and that he has found their information difficult to use their resources, and some of the organizations are for profit. Marshall would like to use the Social Connection Committee

to focus interactive activities that connect people for our area in person. There was conversation about how to find people that are isolated to try to help them be more connected. Committee Members – Marshall Gartenlaub, Jen Lautenbach, Mike Shaw, Mary Kanter

2. Save our 'selves'

Stephen Shubert spoke about the national crisis and desire for seniors to age in place and the barriers including increasing costs of institutional care, access, lack of caregivers. Some of the challenges to recruiting more caregivers to work in the field are wages and training. Stephen would like to advocate for using Older American's Act Funding to help address these issues. Amanda McDade suggested connecting to Kate White Tudor as our next step. Guest, Evan Perrollaz, spoke about San Juan County and how the San Juan County Public Hospital District #1 is starting to address some of these issues including opening a small home care agency, CNA training, potential housing for healthcare workers. Committee Members – Stephen Shubert, Carl Bender, Lucretia Devine, Mary Kanter.

3. Advocacy No discussion

Contact Bethany Chamberlin or Georgiann Dustin to sign up for a committee.

#### **Caregiver Outreach Program**

Mariah Davis spoke to the group about the caregiver outreach program including types of interactions, outreach activities, referrals, referral sources, and supporting NWRC teams. She is looking for ways to engage and recruit a younger population, and finding ways to recruit people who are open to working with new clients they are not currently connected to. She provided a general overview of common challenges and system improvements of CDWA. Stephen requested a copy of the presentation.

#### New Business (add on):

Georgiann Dustin requested to add New Business to the agenda.

Carl Bender represents Lopez Island and stated they are having a large influx of population. He has had multiple requests about what the AAA's are and has a difficult time finding the best way to explain it. Carl made a request to have staff come to the NWSB meetings to explain their program with some real-life examples as he believes it would be helpful. Amanda McDade, Executive Director agreed and will continue planning on brining different staff to the meetings to provide overviews of their programs.

#### **Executive Director Updates**

Amanda McDade

• Agency Updates

Compass Health has closed some Skagit and Whatcom programs. We have been able to hire a number of those staff who bring their clients with them. The agency has also hired the last open BH clinician position. The agency hired a Care Coordinator who will be embedded at the jail. The agency is doing a lot of diversity, equity, and inclusion work. There was discussion focusing on how to increase medical accessibility, including doctors' offices. In addition, how do we help caregivers be aware of accessibility needs. A good resource for Caregivers would be SEIU.

• Legislative Priorities

The legislative priorities include:

• Nutrition: the 2024 approved funding was one time, so we need to continue to advocate for this resource.

• Case Management: was not funded in 2024. We are collaboratively working with the State to communicate the need for more support for people without caregivers.

Georgiann requested our state representative attend the July meeting.

#### <u>Break</u>

#### State Council on Aging Update (SCOA)

none

#### **Communities**

#### Lynden:

Jen Latuenbach stated the Lynden Senior Center is working with NWRC on getting an embedded counselor one time a month on a 3-month trial period at the Center. In addition, Lynden Senior Center is going to be a place for Powerful Tools for Caregivers. Jen is working with WCOA on additional funding for senior centers in Whatcom County.

#### Adjourn:

The next meeting, July 9<sup>th</sup> will be a hybrid meeting.

Marshall asked about meeting schedule and how many times the NWSSB should meet. This item will be on the next meeting agenda.

A motion was put forth to adjourn by Georgiann Dustin. Motion passed.

#### The meeting adjourned at 3:21 pm

Darla Smith, Administrative Manager

Reviewed and approved by the Northwest Senior Services Board at the July 9, 2024, meeting.

Georgiann Dustin, NWSSB, Chair

## Survey Questions – Demand for In-Home Domestic Services San Juan Island June 23, 2024

There have been many persons who have requested in-home domestic services on San Juan Island. There have been two barriers to providing those services: Lack of domestic care workers due to wages significantly below a living wage. And the financial inability of seniors to afford the cost of services. To address these two issues, this survey seeks to determine the feasibility of developing funding, based in part on fees charged on a sliding fee scale and private and public fundraising to make up the difference.

#### Questions:

- 1. Do you need domestic services to age in place in your current residence?
- 2. What domestic services do you require, such as food preparation, house cleaning, laundry, running errands or?
- 3. What personal services could you utilize, such as bathing, getting out of bed, dressing?
- 4. What is your age, or age of person(s) who need services?
- 5. If services were available, how much could you pay per hour?
- 6. How many hours per week do you think would be required to help you stay in your home?
- 7. What is your annual Income?
- 8. Would you be willing to contribute to the cost of care via a subscription or pay based on hours of service used?

#### NOTES:

- 1. Federal Income guidelines could be used for formulating the sliding fee scale.
- 2. Mullis Community Senior Center has the mailing lists that could be utilized for survey purposes. The longer-term role of the Mullis Center would need to be determined.
- 3. Any implementation plan would require a willing non-profit to administer the program. I do not think fundraising from individuals, foundations or governmental agencies will work without a 501(c)3 corporate administrator (which provides tax deductions for donations). A willing agency should be recruited. Village at Home, or a local non-profit, such as Mullis Senior Center are logical candidates. Core administrative funds would be sought to cover administrative costs. An experienced grant writer(s) should be identified.
- 4. The number of wealthy individuals who may be interested in funding an island program is unknown.
- 5. The questions presented need to be reformatted, modified, and/or new questions poised.
- 6. State general funds or Older American Act funds are potential sources of governmental funding, if the program structure could result in cost-saving for their funded programs, such as Medicaid. The PACE program, a Medicare funded program, designed to allow seniors to age in place, has too many barriers to function in rural settings, but exists because it saves Medicare institutional care costs, as well as mitigates the number of days Medicare reimburses institutional care.

7. The financial structure of the PACE program and the Medicaid program focused on senior care needs to be analyzed. Could the state Medicaid program be modified to fit rural realities?

#### Comments:



# Aging and Longevity

## A MULTISECTOR PLAN FOR AGING IN WASHINGTON STATE

## Coming Together Towards a Multisector Plan for Aging in Washington

Early/mid-2024

- Socialize concept and raise awareness with partners.
- Establish Age- and Dementia-Friendly State Designation.
- Hold Age & Longevity Summit.
- Explore funding mechanisms to initiate work on MPA.

Later 2024

- Convene Aging & Longevity Interagency work group to inform next steps.
- Increase understanding of and buy-in for an MPA among key state and agency leaders and community partners.
- Gain momentum and support for MPA.

• Convene 2025 Summit.

2025-2026

 Engage administrative and/or legislative support for MPA.

- Involve sector champions in plan development.
- Identify priority goals and strategies across sectors.
- Draft Washington State MPA.

### A Call to Action

A Multisector Plan for Aging acts as a blueprint for action to create a Washington that promotes health, well-being, and inclusion across the lifespan for years to come. We ask that you support the development of an MPA in Washington state.

The following organizations have been part of the Center for Health Care Strategies (CHCS) Multisector Plan for Aging (MPA) Learning Collaborative and are working together to develop a pathway to an MPA.

Washington State Department of Social & Health Services

Transforming lives





Health Care Authority

Washington State

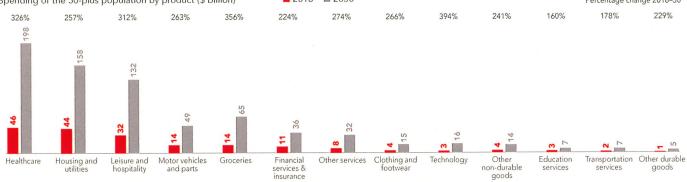


HEAL

ashington State Department of

## Washington

As a major source of Washington's consumer spending, 50-plus households will drive economic growth across sectors Spending of the 50-plus population by product (\$ billion) 2018 2018 2050 Percentage change 2018-50



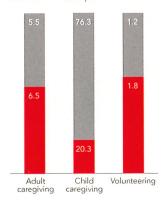
Please see Appendix 4 at https://doi.org/10.26419/int.00042.003 for a complete description of each consumption product category. Note: Education services include spending on education across all members living in the same household (consumption expenditures are recorded at the household level)

#### **Unpaid contributions**

Beyond their economic contributions, the 50-plus cohort also spends time engaging in vital activities like volunteering and caregiving for children and adults. The 50-plus population in Washington contributed \$1.8 billion in volunteering activities and \$26.8 billion in unpaid caregiving in 2018, with the average person spending 33 hours on volunteering and over 720 hours on caregiving over the entire year.

#### The 50-plus population provides \$29 billion in unpaid contributions

Value of unpaid activities, 2018 (\$ billion) (Values may not sum due to rounding) Under-50 **5**0-plus



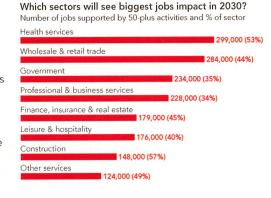
50-plus households accounted for 55 cents of every dollar spent in Washington in 2018—this will grow to 61 cents (61%) by 2050



#### The market activities of Washington's 50-plus population create jobs, wages, and salaries

In 2030, the 50-plus population's activities will support 2 million jobs in Washington, driving employment growth across all age groups and industries. Most of these jobs will be created in health services; wholesale and retail trade; government; and professional and business services (see chart on right).

Labor force: People age 50-plus will continue to play a significant role as part of Washington's workforce: by 2030, 50-plus workers in the state are projected to number 1.3 million, representing 32% of the state's total labor force.



**Methodology**: This state profile details the contribution of the 50-plus population, both in-state and through interstate commerce, to Washington's economy. The overall impact includes the direct effects of their spending, work contributions, and taxes paid. It also includes the ripple effects this generates—via business supply chains and through the wages and spending of other workers. All forecasts account for the effects of COVID-19 on U.S. demographic and economic projections. These forecasts were informed by data from the Centers for Disease Control and Prevention, the Bureau of Economic Analysis, Bureau of Labor Statistics, and The Economist Intelligence Unit's macroeconomic forecasts. For further details see: http://www.aarp.org/longevity.

Sources: Economic impact and forecasts (EIU, Regional Economic Models, Inc. (REMI)); Population by age (REMI, U.S. Census Bureau); 50-plus population share by county (U.S. Census Bureau 2018); Spending (EIU, Bureau of Labor Statistics, Bureau of Economic Analysis, REMI); Jobs impact by sector (EIU, REMI); Unpaid contributions (EIU, American Time Use Survey, AARP's Valuing the Invaluable: 2019 Update, Bureau of Labor Statistics).



For more information about the Longevity Economy download our free report. It offers as a roadmap for companies to tap into this growing market.

http://www.aarp.org/longevity https://doi.org/10.26419/int.00044.048



Economist INTELLIGENCE



Washington State's aging population is in the middle of a significant demographic shift that will affect our entire state. In 2020, 17% of Washington's population was 65 and older. By 2050, 23% of the state's total population will be older adults.

With more than 865,000 members in Washington State, AARP works tirelessly to fulfill the vision of a society in which all people live with dignity and purpose and achieve their goals and dreams. We protect safety net services that help people combat isolation and age in place and address the abuse, neglect, and financial exploitation of the most vulnerable.

Community, government, and private sector leaders must address these challenges with policy changes and new innovative approaches to ensure our longevity years are the best they can be.

AARP is committed to advocating for policy changes and promoting programs that address the needs of our aging population.

**Caring for the Caregivers**: Every day, 820,000 Washingtonians perform a tremendous labor of love: caring for older parents, spouses, and other loved ones so they can remain at home—where they want to be. We are advocating for more support, community-based or home-based services, and caregiver training. Our state is a leader in providing care and supportive services so people can age in their homes and communities. AARP will continue to advocate for policies to support families. To learn more about our Caring for Caregivers effort, visit aarp.org/caregiverswa

**Support Financial Resiliency:** Today, a secure retirement is out of reach for thousands of Washingtonians. Half of all households are at risk of not affording everyday expenses in retirement. The average Social Security benefits for a 65+ family is only about \$18,000 a year, while older American families, on average, spend \$20,000 a year on food, utilities and health care alone. While Social Security is a critical piece of the puzzle, it is not enough to ensure people can live independently as they age. AARP policy priorities focus on helping people save for retirement (WA Saves), plan for long-term care (WA Cares), stop the financial exploitation of seniors, provide tax preparation assistance through AARP Tax Aide and reduce property taxes so older adults can age in place.

**Make Communities Age-Friendly**: AARP is helping cities, towns, counties and states become great places for people of all ages to live, work and play through improved housing choices, transportation, public spaces and more. Washington state and several cities, including Seattle, Tacoma, Puyallup, Renton and White Salmon, have already joined more than 650 communities nationwide in the AARP Network of Age-Friendly States and Communities. More than 20 local community improvement projects in the state have been funded through AARP Community Challenge grants. Learn more at www.aarp.org/livable and see these on our map at www.aarp.org/livablemap.

**Fight Fraud**: Fraud activity has reached an all-time high in the U.S. According to the Federal Trade Commission, American consumers reported losing more than \$5.8 billion to fraud in 2021. AARP knows that older victims are targeted for scams. Here in Washington State, AARP operates one of two Fraud Watch Network call centers and has trained speakers to give presentations on how to avoid the latest scams. Our fraud program provides a range of services, including scam alerts, fraud prevention tips, and assistance for victims. Visit www.aarp.org/fraudwatchnetwork to learn how to spot and avoid the latest scams. Call the AARP Fraud Watch Network Helpline at 877-908-3360 to report a scam or find help for you or a loved one.

Washington State Office Contacts:

Marguerite Ro, State Director | Tel: (206) 517-2306 Email: mro@aarp.org Cathy MacCaul, Advocacy Director | Tel: (206) 218-5915 Email: cmaccaul@aarp.org

# DON'T TAKE AWAY WASHINGTON'S LONG-TERM CARE BENEFIT



## I-2124: Impacts on Washingtonians

I-2124 will take away long-term care benefits from 85% of working Washingtonians.

While political interests claim this is about giving people a choice, the truth is I-2124 will:

- Harm people with **pre-existing conditions**, like cancer or diabetes, by taking away the only long-term care benefit available to them - since they can't get private long-term care insurance;
- Take \$8.1 billion from our long-term care benefits program, forcing premium hikes, and quickly bankrupting the program for everyone;
- Leave us at the **mercy of for-profit insurance companies** who jack up premiums and deny benefits by 50%, 100%, or even 300% without warning;
- Force us to **pay out of pocket** for homecare, wheelchairs, ramps, and other long-term care expenses, or make us drain our savings, or sign over our homes, to qualify for Medicaid.

## Don't Let I-2124 Take Away Washington's Long-Term Care Benefit

The need for long-term care is a scary event we all hope to avoid, but the fact is 70% of us will need help with daily living activities as a result of a serious injury, illness, disease or other challenge that can happen at any age. Washington's long-term care benefit is a safety net, like Social Security or Medicare, set up to allow seniors, and disabled or severely ill adults, to live with dignity and stability.

Lawmakers have steadily strengthened Washington's long term care benefit-first making near-retirees eligible, even if they work part-time. Thanks to new changes, Washingtonians who have paid into the program can keep their benefits even if they move out of state for work, family, or retirement.

The vast majority of us do not have a way to pay for long-term care expenses, which are not covered by traditional health insurance or Medicare.

Today, Washingtonians have an affordable, guaranteed benefit we can tap to help cover the costs of longterm care: it's called the WA Cares Fund. Benefits start at \$36,500 in 2026 (growing to as much as \$60,000 in 20 years, indexed to inflation). Benefits cover: home care aide so you can stay in your own home; family member's time caring for you; wheelchairs, hospital beds, lifts, and other equipment; ramps, grab bars, and other home modifications; and residential care.

## **Endorse No On 2124: Protect Long-Term Care Benefits for Washingtonians**

NoOn2124.org/who-opposes-i-2124









WASHINGTON PHYSICIANS FOR SOCIAL RESPONSIBILITY



of Area Agencies on Aging

