

Rhode Island Department of Elderly Affairs

Home and Community Care

Advisory Committee Meeting Minutes

September 26, 2006

Attendance:

Liz Morancy, Chair; Alzheimer's Association

Alan Tavares, Vice-Chair; RI Partnership for Home Care

Paulla Lipsey, DEA

Michelle Szylin, DEA

Donna M. Cone, Ph.D, DEA

Paula Parker, DEA

Maureen Margret, Office of Lt. Governor, LTCCC

Jean Anderson, VNS Newport and Bristol Counties

Kathleen Kelly, RIALA

Christian Stephens, NRI/ CRA Community Services

Dolores Dupre, Alternative Care

Arthur Plitt, Governor's Commission on Disabilities

Excused:

Maureen Glynn, Attorney General's Office

Frances Campbell, AARP

Helene Zuffoletti, Alliance Better LTC

Karen Beauchesne, VNA Care New England

Absent:

Marilyn Broussard, AARP

Jay Burdick, Diocese of Providence

Diane Kayala, DHS

Dottie Santagata, Cornerstone ADS

Gloria Williams, AARP

Richard Yacino, Department of Health

Meeting was called to order by Chair Liz Morancy at 9:15 am.

Review of Minutes of Last Meeting

Michelle Szylin offers apologies for not bringing the minutes to the meeting or forwarding by e-mail. Maureen Maigret moved to defer review until next meeting. Liz Morancy accepted the motion.

Legislative Update

Paula Parker- DEA

Ms. Parker discussed issues for the upcoming Legislative Year. The Department is again going to introduce Legislation to add self-neglect to the protective services statute. It got lost in the shuffle last year and received opposition from ACLU and Disability Law Center. Ms. Parker and DEA attorney Rhonda Schwartz have been working with them to find acceptable language.

Another issue being worked on is allowing the DEA to file for Guardianship in an emergency situation when all other avenues have

been exhausted. Mr. Stephens suggested contacting MHRH for some proposed legislation regarding guardianship and civil liberties issues.

Ms. Parker stated that there has been some discussion with them. Mrs. Maigret stated that the DEA did do some work back in 1993-94 on this issue as well and there may be some information left about it. Ms. Parker stated that she believes the information is there and she will look at it. Ms. Parker stated that one of the concerns is right to appeal. Ms. Morancy stated the policy office of the National Alzheimer's Association may have more information on this.

The Pharma Discount Prescription Bill for the uninsured will be reintroduced. The enrollment was low. A possible explanation is that there are too many competing programs. Chair Morancy stated that the Health Advocacy Forum are regular meetings for Pharma and may be a good place for information.

Maureen Maigret - Office of Lt. Governor, LTCCC

There was a resolution for Congress to review Medicare Part D.

Legislation passed for LTC facilities and elderly housing to be notified of violent history of residents. The national BCI check did not pass.

Assisted living licensing law passed which mandates training for direct care personnel and inspections to take place on an annual

basis. The increase in the personal needs allowance did not pass. Co-payments for prescriptions for SSI recipients are still in question.

The moratorium on nursing home expansion is continued for 3 years.

The Unified Medicaid and LTC budget passed.

The wrap around program for RIPAE did not pass; however, the medications for Multiple Sclerosis will now be included up to a maximum of \$36,000.

Student loans for nurses who work at least part time in RI will have a portion of their student loan forgiven.

Oral Care in nursing homes can now be done by dental assistants without the dentist being present.

Ms. Parker talked about the Independent Transportation Network. We are looking at the Portland Maine Program. A status report will be prepared in January as to where this will be going. In summary, several meetings have taken place and a business plan will now be developed. This is a volunteer program for drivers to donate time to take seniors anywhere they would like to go. There is a cost for the client. Seniors can donate their cars and receive rides in-kind or family members can purchase gift cards or barter their time as drivers to obtain rides for their elderly relatives. The biggest cost will be

insurance for the drivers.

Mr. Plitt stated that the public hearings held in July in recognition of anniversary of ADA will be reviewed. They are looking for volunteers to do this.

Home and Community Care Update

Dr. Cone added that the bill for CNAs who work in Adult Day Centers and Assisted Living facilities to have licenses renewed every 2 years without having to be employed for a minimum of 8 hours by a health care facility did not pass. Instead, the Department of Health is doing this via regulation.

Dr. Cone informed the group of the progress being made in HCC. There has been more communication with the Protective Services Unit during the monthly meetings DEA has with CM Supervisors. This has been a forum to iron out communication issues that have been around for some time. Feed back has been very positive. ADC directors will also be attending these meetings quarterly to facilitate the sharing of information and problems that arise in their facilities.

Quality assurance and monitoring in HCC is progressing. This process was put into the DEA community waive; however, we will also use this process for co-pay. DEA staff members will be reviewing CM records and doing a home visit. The sample will be

small due to staffing constraints. This process will start in a month or so.

DEA is working with EDS and DHS to have the Community Waiver Assisted Living program paid on line.

DEA had a meeting with Social Security regarding the SSI Enhanced Benefit for assisted living. The process for applying will now be regionalized again. If there are any problems with this process, it should be quickly reported to HCC so we can address them in a timely manner. CM Supervisors have specific information about which offices will handle the zip codes in their respective catchment areas; and we encouraged them at the CM Supervisors meeting in September to contact the head of their regional offices for a "get acquainted" session.

DEA is working on drafting language in an agreement which sets forth explicitly what we require of Assisted Living facilities to participate in the DEA Community Waiver. Although the requirements have always been in the Standards used by HCC in reviewing Assisted Living facilities that request participation in the Waiver, recently there has been some question regarding the requirement that CNAs provide personal care to those people on the Waiver.

DEA has funded the Alzheimer's Association for a pilot program to

promote early detection and intervention to individuals who have recently been diagnosed with Alzheimer 's disease or related dementia. Chair Morancy added they have contracted with Gloria Turaz who will be assessing client needs and linking them to services. She will also be working with various agencies that deal with early onset Alzheimer's. Dr. Cone has met with the Alzheimer's Association to assist with design of the project and project monitoring and outcome procedures.

Dr. Cone reviewed in detail the Healthy Aging Project she has been involved with since December of 2004. The Project is managed by an interdepartmental Team comprising Dr. Cone as Team Leader; Ellen Mauro of DHS; Patricia Rajotte of DOH; Dr. Ed Martin of MHRH; Delia Rodriguez of DEA; and Dr. Susan Allen, Deputy Director of the Brown University Center on Gerontology and Health Care Research. Members of the Team received federal funding to attend a conference in Atlanta in February 2006 to learn about Evidence-Based Disease and Disability Prevention in Elders; and later, RI received funding to participate in a Learning Connection with five other states working in the program. RI selected the Stanford Chronic Disease Self-Management Program (CDSMP) as its evidenced-based intervention and we plan to implement this peer training model statewide within the next 3 to 5 years. Implementation of the CDSMP will involve building upon several proven interventions, including the Connect Care Program of DHS and the Diabetes Program of DOH, among others.

From October 16 – 20, there will be a 4.5 day Master Trainer training in the Stanford CDSMP. This week-long training for up to 26 participants will take place at EDS, 171 Service Road in Warwick and is being paid for by DHS. Certified Master Trainers will then conduct trainings using Stanford Materials. If DEA receives the federal grant for which we applied in August this grant will support the 3-year effort to implement the CDSMP statewide. In addition, the federal Health Promotion and Disease Prevention grant that DEA receives annually from AoA will be used to leverage Healthy Aging.

Priorities for 2007

Vice Chair Tavares will be chairing the group for the HCC awards ceremony traditionally held in May. Several people volunteered for this project. He asked that the list of advisory board members be mailed to him.

Chair Morancy stated that anything the DEA feels is important and needs to be addressed by this board may be brought to the table.

Mr. Stevens asked that the routine agenda leave room for advocacy issues. Chair Morancy feels this is appropriate under new business on the agenda.

There being no Old Business and no New Business, Mr. Stephens

moved to adjourn the meeting at 10:45 am and Vice Chair Tavares seconded.