

Meeting Minutes
Isolated Seniors Subcommittee for
The Rhode Island Governor's Commission on Aging

Date: February 16, 2016

Time: 9-10 AM

Attendants: Brian Ott, Barry Zeltzer

Excused: William Flynn, Karen Enright

Bill Flynn forwarded an outline of two specific charges for the subcommittee:

Charge #1: "Why don't providers who submit reports of potential self-neglect or abuse to DEA receive any feedback on the results of DEA's investigation?"

Bill Flynn forwarded research he completed regarding confidentiality issues between DEA and referring health care providers, including relevant state of Rhode Island statutes. These will be distributed at the next Commission meeting.

Charge #2 (Larger question): "What service or regulatory gaps exist among state services and programs for assisting elders living alone with competency and health and safety issues?"

Barry Zeltzer reviewed gaps and barriers that he could identify after discussions with the Lifespan social work department.

- 1) DEA response time
- 2) DEA is not viewed as an emergency agency
- 3) Not sufficient affordable housing in state
- 4) Not sufficient number of state investigators
- 5) Not sufficient funding
- 6) HIPAA laws and understanding them
- 7) Different sets of criteria for determining an emergency
- 8) Historically, DEA had sufficient funding to find arespite placement for the at-risk elder, while the investigation was pending.

- 9) Transportation providers (missed appointments; cancellations; scheduling conflicts)
- 10) Communication between providers and agencies
- 11) Finding affordable housing for elders with dementia (special care programs are usually not reimbursable)
- 12) Communication, Legal, and Service issues

These gaps and barriers will be presented in summary form at the next Commission meeting; however, the subcommittee is still actively collecting more information from knowledgeable and experienced sources. At this point it was agreed that we need to solicit advice from the DEA on what are the most important aspects of this research, so that our efforts can be more focused and productive of the most constructive and feasible solutions going forward. Also, we need direction on what staff resources could potentially be used to assist us with this work.

The March subcommittee will be cancelled while information gathering continues.

Next subcommittee meeting: April 19th, 2016 at 9 AM
APC 7 Conference Room
Rhode Island Hospital

Submitted by: Brian R. Ott, MD

3/2/2016