

FAIRFAX AREA COMMISSION ON AGING (COA)

FINAL MINUTES OF VIRTUAL – VIDEO/AUDIO MEETING

Zoom: <https://us06web.zoom.us/j/89074560529>

Password: COA-m1234!

Telephone: 888-270-9936 (US Toll Free) or 602-333-0032 Conference code: 231525

Wednesday, March 16, 2022, 1:00 – 3:00 p.m.

Commissioners Present: Cathy Cole (Chair/At Large), Cathy Muha (Vice Chair/Sully), Carolyn Sutterfield (Secretary/City of Fairfax), Tom Bash (Springfield), Martha Cooper (City of Falls Church), Sharron Dreyer (Lee), Joe Heastie (Providence), Kathy Hoyt (Mason), Kay Larmer (Dranesville), Phyllis Miller Palombi (Hunter Mill), Mike Perel (Braddock), Diane Watson (Mount Vernon)

County Staff Present: Tara Turner, Jacquie Woodruff, Beth Ann Margetta, Kristin Helfer Koester, Hilda Naranjo, Area Agency on Aging; Colin Brody, Fairfax County Health Department; Irma Mejia-Lewis, assistant to Supervisor Walkinshaw

Call to Order: Chair Cathy Cole called the meeting to order at 1:00 p.m.

Roll Call and Motions to Proceed with Electronic Meeting: Chair Cole called the roll and conducted the votes.

- Vice Chair Cathy Muha motioned that the Fairfax Area Commission on Aging had a quorum present via remote connection and that each member's voice could be adequately heard by all participating members. Diane seconded. Motion passed unanimously.
- Cathy Muha motioned that the State of Emergency caused by the COVID-19 pandemic made it unsafe for the Fairfax Area Commission on Aging and the public to physically assemble and that the Fairfax Area Commission on Aging was conducting the meeting electronically through the dedicated telephone line listed above. Sharron seconded. Motion passed unanimously.
- Cathy Muha motioned that all agenda matters would address the Emergency itself, were necessary for continuity in Fairfax County government, and/or were statutorily required or necessary to continue operations and the discharge of the Fairfax Area Commission on Aging's lawful purposes, duties, and responsibilities. Martha seconded. Motion passed unanimously.

Review of the agenda: Sharron motioned and Kay seconded that the agenda be approved. Motion passed unanimously.

Approval of the minutes: Cathy Cole made the motion to approve the minutes from February 16, 2022; Sharron seconded. Motion passed unanimously.

Public Comment: No public comment

AAA Director's Report: Tara Turner, Director, Fairfax Area Agency on Aging

- The Community Assessment Survey for Older Adults (known as CASOA) has been released into the community by Policy Confluence, Inc. (Polco). Postcards alerting recipients that the survey is coming were mailed March 2. The survey, with a letter from the Department of Family Services, was mailed March 9. Data collection closes on April 20; a reminder letter will go out before then. Polco's report is expected in late May.
- The recruitment process for the Assistant Program Manager of AAA Services is nearly done. Tara expects to issue a hiring announcement by the next COA meeting.
- The position of Supervisor, Caregiver and Support Services Unit, has been posted. This person will oversee the unit that encompasses Caregiver Programming, Assisted Transportation, Repair and Renovation, and CHORE services. The ad closes March 25.

Q & A: Mike asked how residents can sign up for CHORE. Tara clarified that because CHORE funding is limited, only clients receiving Adult & Aging case-management services are eligible.

Presentation: COVID-19 Update: *Colin Brody, Assistant Public Health Emergency Manager, Fairfax County Health Department*

Complete slides from Brody's presentation are available on the Fairfax County website at <https://www.fairfaxcounty.gov/familyservices/sites/familyservices/files/assets/boardsauthoritiescommissions/fairfax-area-commission-on-aging/2022/addendum%20covid-19%20update.pdf>

Key points:

- Virginia is at the tail end of the omicron surge from late 2021. As of March 16, there are 433 currently hospitalized COVID patients, 75 on ventilators. Numbers seeking ER care for COVID have dropped since January.
- Statewide, only 2.8% of fully vaccinated residents have developed COVID. Since January 17, the unvaccinated have been hospitalized at 4.1 times the rate of vaccinated.
- In the Fairfax area, nearly 2,900 homebound and long-term care facility residents were vaccinated by the Medically Fragile Task Force. In all, the Health Department has administered 2.2 million doses of vaccine to area residents.
- The Health Department continues to investigate outbreaks in communal living facilities and hopes to be able soon to vaccinate children aged 6 months to 4 years.

Q&A:

- Mike: People come to the hospital for other reasons and discover they have COVID. How is that counted? Brody: Our data includes anyone who tests positive in the hospital.
- Mike: Are second boosters now available to people over 65 who are not immunocompromised? Brody: We expect that authorization within a few weeks.
- Cathy M: You mentioned analyzing wastewater systems to track infections. Will Virginia be doing that? Brody: There is limited funding for that. Northern Virginia sewer systems could provide the data, but our area has low incidence of infection.
- Cathy C: If we test positive at home, how is that included in the stats? Brody: CDC recognizes there is an undercount and adjusts for that. Because infections with omicron have been milder, the focus for community levels has been on hospitalizations rather than general infection.

- Diane: What about testing in nursing homes and living facilities? Brody: Long term care facilities fall under special health guidance. They are high priority and must report other diseases besides COVID. If rates go up, we intervene to stop an outbreak before it grows.
- Cathy C: What about when kids are sick? Brody: School policies require parents to keep sick kids home, but we know that's aspirational. We have a process for public and private schools to isolate any student who feels ill. It's mandatory for parents to pick those students up.
- Cathy M: There's a new variant of omicron in the U.K. Brody: The BA.2 variant is now 24% in U.S. and on the rise. There is not enough data yet. If there is a major increase, we will go back to mask requirements and hopefully have more testing.
- Joe: What is happening with home tests? Brody: The postal service has been delivering rapid antigen tests. Households can now request four more. Libraries may resume distributing tests.

OLD BUSINESS

● COA Interim Workplan: Strengths, Weaknesses, Opportunities, Threats (SWOT) Analysis to Support SHAPE the Future of Aging Plan Development

1. State of Housing

Following last month's discussion of past affordable housing efforts and possible panelists for a COA session, commissioners suggested possible questions to be addressed to those panelists:

- Ask Karen Hannigan of ACDR to share her research on housing options for older adults.
- In an age-limited setting, what recourse is there when nothing gets fixed and residents are afraid to complain to the property manager, who could ask them to leave?
- What kind of advocacy from COA could increase the amount of housing? Moving away from single-family zoning requires change of thinking in the community. Many residents feel strongly about this, and developers have their own agendas (weakness and threats).
- What are some communities that have done better with affordable housing? How have they managed it? Did it involve legislation?
- Housing for middle income can be more challenging than for low income because no developer is aiming at that population. How can we fill the gaps?
- How many area residents are currently aging in place? What is the county doing to assist them?
- What is the planning commission doing to ensure affordability and accessibility in housing for older adults and those with disabilities?
- Can we pair the data we received about where older adults and people with disabilities are living with the Vulnerability Index map to identify locations for new housing?

We discussed possibly inviting Sharon Cannor of Reston for a Lifetime to speak about housing issues in her village. More questions may arise from the survey data.

2. State of Mental Health: Cathy Muha and Phyllis Palombi Miller

Cathy M.: Isolation and loneliness are a major determinants of mental health issues. The COA could tackle the topic in several ways:

- through intake staff, to determine types of mental health issues the county is seeing;
- through long term care, to determine what types of behavioral and mental health issues LTC facilities are seeing;
- through the Ombudsman program, to find out what issues are complaints are being filed;
- through the directors of senior centers, to learn if they are seeing behavioral or mental health issues in congregate settings.

Phyllis: We should also talk to internal medicine providers and gather some data on what they're seeing. Several have said they would like to talk to us about issues like depression. COA members like Diane, who sees these issues in her work, could ask questions.

Q&A:

- Diane: I see this in the communities—depression, anxiety. Getting a peer support group going, one older person to another, might help identify who needs a practitioner. In the villages, people want to go out but sometimes adult children are concerned about that.
- Phyllis: Perhaps we can send a survey to the villages?
- Jacquie: Best to wait until the current survey is completed. It would be OK to invite someone who has existing data to speak to the COA.
- Mike: Community Services Board may have data from their mental health first aid class.
- Cathy M: County intake people might also have data.
- Cathy C: So who would be on this panel? Ombudsman rep, CSB, someone from the senior centers, a couple of physicians. We don't need a full report; we're looking for areas that could be improved.
- Phyllis: Is there a county program where people are assigned a "friend" on the basis of staff-assessed need? Tara replied that there is a social visiting program that matches an older adult with a volunteer. There is also a mealtime visitor program, but not all MOW clients want to share meals.
- Sharron: We're trying to get a broader picture than anyone else has done. What do the mental health professionals see as gaps?

Jacquie and Tara reminded commissioners that before COVID, when the BOS approved the plan for SHAPE in 2019, they identified mental health as a focus group topic, with participation by medical professionals. The CASOA is just one part of the process. Strengths and weaknesses are important. The COA and the AAA can't solve everything. Everything leads up to a final product.

Mike suggested that, rather than inviting seven or eight people to speak to the COA directly, we send an email asking them answer a question or two in writing about the biggest needs. We could then ask a couple of them to meet with us virtually. Cathy M. and Phyllis will confer about that.

Jacquie reminded commissioners that the process established by the BOS calls for the randomly distributed community survey, followed by a community input phase that will include forums where the COA can invite the kind of people we have been talking about. She cautioned that the

COA and AAA can't do everything. But Tara added that it is important to discuss anything pertaining to older adults, not just survey results. The work the COA is doing now is important.

Sharron stressed the need to see the whole picture. She suggested a panel of six to eight people from the public and private sectors to address what they see as the shortfalls in mental health services for older adults. Kay added that the faith-based community should be part of such a panel. Cathy C. asked Cathy M. and Phyllis to work on that before the next meeting.

NEW BUSINESS

● FY 2023 Advertised Budget: Budget Hearing and Human Services Council (HSC) Input

Jacque reported that the new budget contains no recommendations that would adversely affect services for older adults. It does include realignment of some services. To focus more on public health, the Health Department is relinquishing some functions. Four public health nurses and an administrative assistant will move to Adult & Aging's Long Term Care unit, and the Long Term Care Coordinating Council (LTCCC) and Adult Day Health Care Centers will now be affiliated with Neighborhood & Community Services. Adult Day Health Care Centers will be part of the continuum that supports older adult needs in the community, from attending the Senior Centers, to addressing various levels of health needs along the way, to ultimately having the option for Adult Day Health Care. The LTCCC covers a broad range of topics and supports partners across the spectrum.

One item the county executive and his team look at in preparing the annual budget is the Health and Human Services Resource Plan. Some items in this year's plan are included in the FY 2023 advertised budget. But a number of requests from Adult & Aging remain unfunded. These include two positions in Adult Protective Services; a Social Services position in Adult Services; a registered dietician and a case manager in Nutrition; and three positions in an Adult & Aging training unit for the division. In previous years, the COA has testified on behalf of the growing older adult population and promoted areas of concern for the 50+ Action Plans. Many of the same concerns are addressed in the SHAPE the Future of Aging categories approved by the Board of Supervisors.

In addition, the police department's Financial Crimes unit is being disbanded. In previous budget testimonies, the COA had voiced its support for that unit's request for more personnel. The Silver Shield and Financial Exploitation Prevention Task Force is requesting that the COA oppose disbandment of the unit, or at least request that one detective in each region have specific training in engaging with older adults and people with disabilities or mental health issues, as well as an understanding of financial crimes targeting those individuals.

After some discussion of the reasons behind moving Adult Day Health Care, Carolyn motioned that Cathy Cole, in her FY 2023 budget testimony on behalf of the COA on April 13, will address the four unfunded areas that we have identified as important to older adults—staffing for Adult & Aging's Adult Protective Services, Social Services, and Nutrition units, as well as the Financial Crimes Unit. Mike seconded. Motion passed unanimously.

● **Commissioner Updates**

- NVAN (Mike): At the March meeting, Jacquie reviewed what happened with NVAN priority legislation in this year’s General Assembly. Cathy C. requested that Jacquie send her summary report to COA members.
- Dementia Friendly Fairfax (Diane Watson): Dementia Friendly Fairfax conducted two informational sessions in March, training a total of 17 Dementia Friends. The Parkinson’s Association has asked to speak at a future Dementia Friendly Task Force meeting.
- Cinema Club (Mike and Phyllis): Mike thanked Kristin Roman of ServiceSource for their assistance in setting up the Zoom technology. Phyllis and Dr. Hilburn will participate in an encore discussion about “Still Alice” planned by the Jewish Community Center.

● **Announcements:** Cinema Club meets next on Wednesday, March 23, at 7 pm to discuss “The Intern,” a comedy featuring Robert De Niro and Anne Hathaway. A virtual Scam Jam will be held on April 22.

● **Adjournment:** Martha motioned that the meeting be adjourned. Diane seconded. The meeting was adjourned at 3:02 pm.

Minutes prepared by Carolyn Sutterfield, COA Secretary.

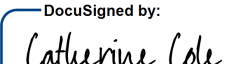
Approved: April 20, 2022

DocuSigned by:


Carolyn Sutterfield, COA Secretary

04/29/2022 | 4:40 PM EDT

Date

DocuSigned by:


Catherine Cole, COA Chair

05/04/2022 | 3:16 PM EDT

Date