

**FAIRFAX AREA LONG TERM CARE COORDINATING COUNCIL (LTCCC)**

**MEETING INFORMATION:**

<b>Committee Name:</b>	<b>COVID-19 Impact &amp; Response Committee</b>
<b>Meeting Location:</b>	Held Virtually, due to the COVID-19 Pandemic
<b>Date &amp; Time:</b>	Tuesday, March 16, 2021, 4:00 p.m.
<b>Note Taker:</b>	Ozun Dalaran-McClary and Patricia Rohrer

**ATTENDEES:**

Carolyn Cukierman, Committee Chair; Doug Birnie, Jan Buchanan, Orlene Grant, Linda Hernandez-Giblin, Nadia Hoonan, Allegra Joffe Fahringer, Heisung Lee, Anita Light, Steve Morrison, Patricia Rohrer, Chuck Thornton, and Diane Watson.

**AGENDA ITEMS ADDRESSED:**

<b>Agenda Item</b>	<b>Discussion</b>	<b>Outcome/Action Steps</b>
<b>Call to Order</b>	The meeting was called to order at 4:02 p.m. by Carolyn Cukierman, Committee Chair.	
<b>Motions to Proceed with Electronic Meeting</b>	<p>The COVID-19 Impact and Response Committee of the LTCCC conducted a wholly electronic meeting because the COVID-19 pandemic made it unsafe to physically assemble a quorum in one location or to have the public present. The meeting was held via video and audio using Zoom for computer access and a toll-free telephone number for access via telephone.</p> <p>To assure public access, Carolyn (Committee Chair) asked committee members to state their names and where they were joining the meeting from. The Committee Chair passed the virtual gavel to Chuck Thornton, to conduct confirmation of the following motions. The Chair moved that each member's voice was adequately heard by each other committee member, and specifically that each voice was clear, audible, and at an appropriate volume for all other members. The motion was seconded by Dianne Watson.</p> <p>Next, the Chair moved that the State of Emergency caused by the COVID-19 pandemic makes it unsafe for this committee to physically assemble and unsafe for the public to physically attend any such meeting, and that as such, Freedom of Information Act (FOIA's) usual procedures, which require the physical assembly of the COVID-19 Impact and Response Committee of the LTCCC and the physical presence of the public, cannot be implemented safely or practically. I further move that this committee may conduct this meeting electronically through</p>	<p>The motion carried.</p> <p>The motion carried.</p>

	<p>a dedicated video and audio-conferencing line. The motion was seconded by Doug Birnie.</p> <p>Next, the Chair made a motion that it is required that the matters addressed on today's agenda are statutorily required or necessary to continue operations and the discharge of the LTCCC's lawful purposes, duties, and responsibilities. The motion was seconded by Allegra Joffe-Fahringer.</p> <p>Chuck Thornton passed the virtual gavel back to the Committee Chair.</p>	The motion carried.
<b>Approval of Summary Notes from March 2, 2021 Meeting</b>	The summary notes from the March 2, 2021 meeting were reviewed.	The summary notes from the March 2, 2021 meeting were approved as written.
<b>Update: COVID-19 High Risk Community Task Force (HRCTF)</b>	<p>Patricia Rohrer provided an update from the Health Department's COVID-9 High Risk Community Task Force (HRCTF) regarding older adults and adults with disabilities and asked if committee members had new suggestions to take to the task force.</p> <p>The Johnson and Johnson vaccine has been approved. The State is distributing to partners for large mass vaccination sites. Fairfax County's weekly doses of vaccine is expected to soon increase from the State. The current weekly allotment is approximately 15,380 doses, and this is expected to raise to as much as 40,000 – 50,000 per week. Based on information from the Virginia Department of Health, by the end of May, there will be enough vaccine to vaccinate 75% of Virginia's population and 100% by the end of June. Much of the vaccine will be administered by community partners, pharmacies and through mass vaccination entities. As a result, local health departments will function to ensure vaccination of communities hardest hit and ensure equity in vaccine provision. The governor has added two more groups from CDC's occupation list in group 1b: clergy/faith leaders and janitorial/cleaning staff. Fifty percent of those over age 65 in Fairfax County have been vaccinated. Ninety-three percent of all vaccinated in Fairfax County received their second vaccination. Data collected shows, by zip code, the percentage of people over age 65 who have been vaccinated or are registered to receive a vaccine. Outreach is increasing in zip codes with lower percentages which includes identifying barriers, working with local leaders, establishing local vaccination sites, and providing transportation to the nearest vaccination locations. Fairfax County continues to implement its Vaccine Equity Strategy that was presented to the Board of Supervisors:</p>	<p>Committee members should continue to bring recommendations for the HRCTF, related to older adults and adults with disabilities, to committee meetings and Patricia will relay back to the HRCTF.</p> <p>For general questions or specific scenarios about vaccinations or the pandemic, email Patricia.</p>

Addressing the Disproportionate Impacts of COVID-19 on Marginalized Communities in Fairfax County

As part of the equity strategy, specific vaccination sites for affected neighborhoods are being set up.

Next, Patricia reported on follow-up from past Items taken to the HRCTF from the committee. Regarding prominent display of the vaccination phone number, this will be done during the week of March 22, 2021. Regarding phone messages sent to people who do not respond to emails to schedule vaccinations, if there is a special circumstance like needing to get people in for their second dose or if an issue is noticed with an email, calls are being made to the person. In addition, emails are sent several times.

Patricia asked for any new Issues or suggestions for her to take back to the HRCTF. Via email, Doris Ray, raised an issue with Inova partnering with the Health Department to vaccinate those on the Fairfax County registration list. The issue she raised is that Inova requires registering on their *My Chart* database to schedule a vaccine appointment; and that it is not fully accessible. Others have complained to the BOS about difficulty completing *My Chart*. As a result, Inova added a phone number to call for assistance with completing *My Chart* and to schedule their vaccine appointment. She added that this is only for those for whom the County has partnered with Inova to vaccinate from the County's registration list.

Chuck Thornton noted that Inova does not send email reminders for second appointments and that people need to independently sign into *My Chart* to set up this appointment. Chuck asked that an email notification also be sent.

Carolyn said that some people with compromised conditions, who qualify, do not know if they are eligible. She suggested that healthcare providers be notified because they can inform their patients.

Allegra Joffe Fahringer pointed out there is a four-hour window to cancel vaccine appointments electronically; and that for some older people, a four-hour window is not sufficient if they feel sick on the day of the vaccination. To accommodate, she requested that people be permitted to cancel appointments electronically in less than four hours before their appointment. Otherwise, they need to wait on the phone for long periods of time to cancel when they are not feeling well.

	<p>A few general questions were asked. Carolyn asked if guidance has changed for in-person public meetings, and the answer provided was not yet. Doug Birnie asked if the website shows new categories being added of those eligible to receive vaccinations and the answer provided was yes. He further asked that if someone was unclear if they fit into a category, can they call the county and the answer provided was yes to call the vaccine call center 703-324-7404.</p>	
<p><b>Presentation: 50+ Community Ambassador Program</b></p>	<p>Linda Hernandez-Giblin, Program Coordinator for the Fairfax Area Agency on Aging's (AAA) 50+ Ambassador program provided an overview of the program. The 50+ Community Ambassadors program originated from the Board of Supervisors (BOS) 50+ Community Action Plan. It was determined by 50+ Plan focus groups that additional information avenues about services provided by the Fairfax Area Agency on Aging (AAA) was needed beyond the <i>Golden Gazette</i> newsletter. There are approximately eighty 50+ Community Ambassadors representing non-profits, social workers, neighborhood leaders, faith communities and association leaders who take information to their respective groups. 50+ Ambassadors attend an orientation and quarterly meetings. They convey information received from quarterly meetings and from emails to their respective groups. Doug Birnie mentioned that the Federation of Citizens Associations recently launched a Neighborhood Navigators Program to reach out to neighbors regarding vaccination information and that he would like to connect them to the 50+ Community Ambassador Program. Orlene Grant asked whether the 50+ Ambassadors are doing things to recognize signs of isolation? Linda said that they had a guest speaker present on this topic and that they would like to do more in this area. Linda thanked the committee for being able to present at this meeting and stated that the linkage between LTCCC and social isolation is an area to explore. Jan Buchanan shared that the <i>Golden Gazette</i> is not always timely in its arrival in the mail. She asked if the <i>Golden Gazette</i> is automatically sent to the County's older adult population and the answer was that individuals need to subscribe.</p>	<p>Doug Birnie to connect the new COVID-19 Neighborhood Navigators Program, sponsored by the Federation of Citizens Associations, to the 50+ Community Ambassadors Program.</p>

<p><b>Action Plan: Presentations About Existing Social Isolation Programs by LTCCC Member Organizations</b></p>	<p>On the Committee Action Plan, the second item is Social Isolation. The first action step in this item is to: Leverage LTCCC organizations already doing social isolation activities to partner with other LTCCC organizations to expand and increase the impact. To advance this action item, presentations are made by LTCCC members whose organizations have initiated activities to address social isolation during the pandemic. One presentation was made at this meeting. The presentations will encourage collaboration, expansion of services, partnering, and information sharing. A chart detailing each organization's presentation was provided to the committee and it included today's presentation.</p> <p><u>The Korean Center Senior Center</u> – Heisung Lee presented. The mission is to provide services to older adults in the DC Metropolitan area to maintain their spiritual, physical, and emotional health and safety to improve quality of life and to help them live independently as long as possible in the community. The program originated from the Korean Central Presbyterian Church. The Center serves adults aged 55 and older. Older adults come from Korea to follow their adult children and do not have a place for activities. During the pandemic, virtual activities are held two days a week on Tuesdays and Fridays with a focus on nutrition programs, physical activities, art, and music. Each activity is attended by 350 to 600 people throughout the week. The Zoom platform is used with assistance from volunteer instructors providing technology training. In addition, telephone chat groups are run by volunteers. Members are called individually as well. Plans are underway to continue virtual programming alongside in-person activities following the pandemic. When they switched to online classes, 20 - 30 older adults did not have email/internet connectivity. Some joined by phone and for others, assistance was provided for using zoom so that they could participate. They are trying to reach people who had to socially isolate, due to technological challenges, by contacting their children and asking them to help to connect them to the center's virtual activities. The center is seeking partnerships with entities that can provide laptops, smart phones, and internet access for those without and who cannot afford them. Used devices are welcome. Questions were asked. How did you increase participation? The church hosted a question and answer session about the program, and they advertise in Korean publications. Is there a fee to participate? They charge \$20.00 for four different classes a week. Are you part of the church or separate? It is now a separate non-profit that partners with the church. Will there be consideration for a phone-pal program? They would like to add this, however, they lack sufficient staff or volunteers.</p>	<p>More LTCCC organizations will be invited to share their social isolation programs (during COVID-19) with the goal of expanding capacity through collaborations. Patricia will be working with Carolyn to schedule these.</p>
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	<p>Orlene asked how the organizations that present social isolation programs can connect to each other. Allegra suggested that the committee keep track of collaborations. Orlene then suggested that outcomes of collaborations be tracked. After some discussion, it was agreed that a tracking sheet be created, and that Patricia be notified of all collaborations.</p>	<p>Carolyn agreed to draft a social isolation collaboration and outcome tracking sheet.</p> <p>An email will be sent to the LTCCC membership ‘advertising’ collaboration and volunteer opportunities. LTCCC members to notify Patricia and she will facilitate connections.</p>
<p><b>Committee Action Plan: Think Tank Challenge</b></p>	<p>The Fairfax Area Think Tank Challenge <a href="#">2021 Fairfax Area “Think Tank” COVID-19 Challenge   Family Services (fairfaxcounty.gov)</a> rules and guidance was read by Carolyn. Challenge #1: Design a strategy or program that will help address social isolation for older adults and people with disabilities who have little or no technology. Challenge #2: Create a technical assistance toolkit addressing older adult social isolation during COVID-19. The toolkit should be developed as a resource for community organizations or neighborhoods that seek to assist older adults who feel socially isolated.</p> <p>The projects will be judged on these merits.:</p> <ol style="list-style-type: none"> <li>1- Maximizes independent use by the older adult and/or the person with disabilities, minimizes the need for coaching.</li> <li>2- Simplicity of design and use.</li> <li>3- Specifically addresses the Challenge selected.</li> <li>4- Demonstrates an understanding of the challenges faced by older adults and/or people with disabilities in avoiding isolation during the pandemic.</li> </ol> <p>Committee members were asked to share their suggestions for a committee submission to the Think Tank Challenge</p> <p>Diane Watson shared her idea, “Information for Everybody.” Challenge #1: Create and distribute grip cards with phone numbers such as police department, non-emergency 911, number for services for older adults and adults with disabilities 703-324-7948, etc. She said that it be simple and be put on a key chain or a refrigerator magnet and that it be distributed to every Fairfax County household.</p>	<p>The following committee members agreed to draft sections of the Think Tank Challenge application and will email drafts to Patricia by noon on Monday, March 29: Chuck Thornton, Jan Buchanan, Allegra Joffe Fahringer, Orlene Grant, Anita Light. Carolyn will review and edit drafts before the next meeting.</p> <p>The next committee meeting will be spent completing the Think Tank Challenge Form.</p>

Language issues would need to be addressed. People in neighborhoods without technology should be identified and assisted to receive.

Anita Light shared her idea, “Social Isolation Toolkit”: Challenge #2: Provide a toolkit for many entities to use to engage their own target population, ultimately reaching more people. She added that LTCCC members voiced concerns about their constituents needing ongoing support and engagement because of the pandemic. She suggests that a subcommittee be formed to address these concerns, and that a survey be conducted to identify issues, and an action plan be created to address issues. Presentations could be made to community organizations highlighting successful strategies and opportunities for reducing isolation, including public access TV, radio, and person-to-person outreach.

Chuck Thornton shared his idea, “Friend Mobile”: Challenge #2: Lack of transportation creates dual challenges for adults with disabilities and older adults. To meet this challenge and complement the network of fixed senior centers already in place, he recommends creation of a mobile “Friend Mobile” to meet those who by reason of mental and/or physical challenges cannot get out of their homes and/or do not have access to transportation to and from present senior centers. It will be a repurposed bus that goes on a rotating schedule. There can be games, exercise opportunities, and it can host gatherings and stage performances under an awning that pops-out. Nadia Hoonan suggested exploring whether the County’s new “CareVan” could be utilized for this purpose. [CareVan | Health and Human Services \(fairfaxcounty.gov\)](https://www.fairfaxcounty.gov/health-human-services)

Orlene Grant shared her idea for Challenge #2: She suggested developing a toolkit that could be utilized by a wide spectrum of residents. For example, the Mental Health Challenge is still in process with Virginia’s No Wrong Door Program, and that AARP and an IT company are working on the same issue for a national rollout.

Allegra Joffe shared her idea, “Help Your Neighbors”: Challenge #2 She suggested an overarching strategy be established to continue to spread the work of the Fairfax Area Agency on Aging (AAA) and create an information campaign. Outreach would be targeted to all ages and education groups and be about information and services for older adults and adults with disabilities. For example, use the *Golden Gazette*, billboards, social media, and public transit to promote and spread the information. It can be an intergenerational outreach

	<p>because people use the information for their grandparents and parents. It would include having an informational grip card in every possible venue and business and could include mass mailings. It would also advocate to expand the hours of the AAA's Aging, Disability and Caregiver Resource. Jan Buchanan mentioned something like compelling stop smoking ads can be used while addressing social isolation since it is as crucial. Anita Light suggested an option to include public private partnerships (Fairfax County Department of Economic Initiatives) to help develop a campaign and that health entities and faith-based groups be included.</p> <p>After some discussion, Carolyn proposed that all the ideas be rolled into one proposal for an Information Campaign proposal. See the outcomes/actions column for assignments.</p>	
<b>Funding Opportunities for LTCCC Member Organizations</b>	<p>Chuck Thornton created a list of COVID-19 related funding opportunities for LTCCC Member organizations. Carolyn acknowledged and thanked Chuck for doing this work that addresses funding issues raised in the LTCCC member survey created by this committee. Some of the funding opportunities have short deadlines and must be relayed as soon as possible to the LTCCC membership.</p>	<p>Patricia to email this information to the LTCCC membership.</p>
<b>Future Committee Work</b>	<p>See Outcome/Action Column for specific actions and assignments for committee work. 1) Complete the Think Tank Application at the next committee meeting. 2) Create a social isolation program collaboration and outcome tracking sheet. 3) Review LTCCC member survey results to determine if results warrant more additions to the Committee Action Plan. 4) Continue to implement the Committee Action Plan and identify new actions.</p>	
<b>Change in Future Meeting Schedule</b>	<p>The Committee will begin meeting every three weeks.</p>	<p>Patricia to send out the revised meeting schedule via email.</p>
<b>Adjournment</b>	<p>The meeting was adjourned at 6:09 p.m.</p>	

**Next Committee Meeting Date:** Tuesday, April 6, 2021, 4:00 – 6:00 p.m., to be held virtually due to the COVID-19 pandemic.