

Maryland Commission on Aging
Teleconference
April 1, 2020 Minutes
Revised May 26, 2020

Members Present:

Rose Maria Li, Chair
John Haaga
Joy Hatchette
Barry Liden Jay
Magaziner
George Rebok
Carmel Roques Sharon
Saunders Allen Tien

Members Absent: Hon.

Benjamin Kramer David
Roth
Hon. Kathy Szeliga

Staff:

Rona E. Kramer, Secretary of the Maryland Department of Aging
Lisa O'Connor, Staff to Commission

Guests:

Rebecca Lazeration, Associate, Rose Li and Associates, Inc.

Greetings:

Dr. Li took roll call and welcomed members. The minutes from the February 19 meeting will be approved via email after the call. [The minutes were approved with corrections on April 8, 2020.]

Secretary Remarks:

Secretary Kramer thanked the members for their flexibility for meeting via teleconference so she could brief the members on developments at the

Department of Aging during the COVID-19 pandemic. The Department is working to both maintain the regular work of the department and address the challenges that have arisen due to the pandemic.

The Senior Call Check program had been struggling with accrual, but participation increased rapidly after Governor Hogan announced the program during a press conference. The day of his announcement, sign-ups increased by 243 from 200 participants. There are around 1,000 participants enrolled now. The vendor has handled the increase in volume of participants well.

In addition, Secretary Kramer has been recording numerous public service announcements (PSAs) on topics such as the Senior Call Check program and about 25 different videos related to COVID-19 that discuss the need to sanitize the grips of canes, walkers, and roll aids, as well as car steering wheels, every time they wash their hands. In addition to the PSAs, Secretary Kramer has filmed two 7-minute videos that have been running on closed circuit televisions in Leisure World, retirement care communities, hospital waiting rooms, nursing homes, and assisted living centers about staying healthy during the pandemic. It is estimated that these efforts are reaching around 90,000 older adults.

The Secretary thanked George Rebok for rallying a group of volunteers that work with the Community for Life Program to help make calls for the Senior Call Check program. These one-on-one (warm touch) calls that check on the wellbeing of the recipient also provide an opportunity to connect program members to additional services in their area. The goal is to continue these calls once-a-week. The Department has also started a series of audio messages that can be sent to those signed up for Senior Call Check, giving tips and updates on what is happening with COVID-19. The Department has done a great deal in outreach and welcomed ideas for expanding upon this work.

Secretary Kramer then provided an update on the closure of senior centers throughout Maryland. Since closing the senior centers, meals have been provided via home delivery. Currently the Department has helped to deliver approximately 30,000 meals a week in addition to mobile deliveries made prior to shutting the senior centers. The Area Agencies on Aging (AAA's) did a tremendous job in making this transition.

As part of this effort, the Department of Aging is part of the Governor's core team that has the responsibility of feeding clients and constituents. The team includes human services and the school systems. The Department of Aging has been coordinating with other agencies to ensure the process is run efficiently.

Secretary Kramer also noted that the Department of Aging has increased support for the Maryland Caregiver Corps. With the Covid-19 pandemic comes an increased need to provide support to nursing homes and assisted living facilities which are handled by the Department of Health and the Ombudsman Program. Over the past 10 years, the Department of Aging has sought to keep older adults out of nursing homes by working with acute patients through family caregiving. This has left the Department with a responsibility to continue to provide services if the family caregiver gets sick.

This is complicated by the lack of data on number of family caregivers in the state of Maryland. The federal report estimates 40,000 family caregivers in 2019 who were in some way involved with the AAAs. A majority of caregivers never make contact with the AAAs, suggesting that there could be hundreds of thousands of family caregivers potentially impacted by the pandemic. Currently, if a family caregiver gets sick and an older adult requires assistance, they are most likely to call 9-1-1 which often leads to the individual being taken to the hospital. This not only puts the older adult at risk of exposure, but also places an undue burden on an already overwhelmed hospital staff.

The Department seeks to divert older adults in need of homecare by recruiting two sets of volunteers: individuals to run a call center and individuals who are capable of providing homecare. The system will permit EMS operators to appropriately divert 9-1-1 calls to volunteers at a call center who can gather the necessary information to match individuals to potential caregivers from a registry of volunteers. These volunteer caregivers, who will be recruited in part from the Maryland Medical Reserve Corps, will be subject to liability coverage, background checks, and specific training for the in-home care of older adults. This care may be temporary while family members travel from out-of-state to provide homecare, or it may be longer-term while the main caregiver is ill and unable to work. The program may even be able to provide training to family members to prepare them for homecare of older adults. This program is currently still being developed and is set to launch in the next 1-2 weeks.

Secretary Kramer noted that the volunteers and government officials have all done a fantastic job being flexible during this crisis. For example, she noted that the meal delivery program for seniors affected by the closure of senior centers was unable to meet the exact nutritional standards previously set by the Department of Health. The officials were able to provide a waiver for these requirements in order to provide meal delivery quicker. The volunteer corps have also been required to make adjustments, as the volunteers for the program outlined above may not be licensed for typical home health aides, but to provide the emergency care required will be recruited and potentially called upon nonetheless.

Dr. Kramer reminded the group that the information discussed on the call is confidential and not to be discussed outside of the teleconference. She noted that Governor Hogan and his team have been making astounding efforts during this pandemic to flatten the curve. She reported that the state is standing up 6,000 hospital beds, opening up formerly closed hospitals, using the Convention Center in Baltimore and associated hotels for transitioning people to quarantine as needed. She added that the Governor has been very transparent during his press conferences about the information available regarding Covid-19 and assured commissioners that updates will continue to be released as they are available.

Dr. Tien offered help with providing a data measurement platform to track the matching of needs to providers and assessing the impact of the programs. Secretary Kramer expressed interest in following up on this suggestion, perhaps incorporating CRISP data, to try to measure how many have been averted from the hospital system.

Dr. Rebok suggested reaching out to Quincy Samus, Ph.D., John Hopkins, Director, Translational Aging Services Core, Associate Professor of Psychiatry and Behavioral Sciences who has experience sending respite help into homes, efforts that might complement the current efforts of the Department. He also suggested Rhea Mehta, an MPH student who is in California but would potentially be interested in helping efforts remotely. Dr. Magaziner added that Charlene Quinn and Jessica Brown have been working with CRISP and the Department of Aging and may be of assistance for these efforts as well. Secretary Kramer will collect the contact information for these individuals after the teleconference.

Dr. Saunders suggested connecting with Deans at universities to recruit healthcare students for the warm touch calls for the Senior Call Check program. Secretary Kramer noted that Jennifer Baker, an MPH student at Johns Hopkins University, has been in touch with some universities and while they have been wary of providing service credit for the work they may be willing to assist in communicating the opportunity to their students. In addition, nursing and medical school students are already being tapped for the Medical Reserve Corps. There is hope to expand this to the schools of physical therapy, social work, integrated medicine, and psychology as well.

Secretary Kramer noted that there is particular concern about care for dementia patients. Dr. Haaga noted that the Alzheimer's Association has a large network of resources and volunteers who may be able to assist. Secretary Kramer encouraged him to reach out to determine whether they would be able to assist, noting that currently there are around 400 Medical Reserve Corps volunteers and estimates show that there may be a need at some point for up to 5,000 volunteers and caregivers.

Dr. Li noted that high school students who are otherwise dismissed from normal classes might have time to reach out to assist with social media outreach. Additionally some businesses that are at less than full capacity may be willing to perform pro bono work to help with the new programs. Secretary Kramer noted that the unemployed or underemployed would be a great resource for making calls for the Senior Call Center program. Dr. Li offered to reach out to connect with the Chambers of Commerce.

Commissioners congratulated Secretary Kramer on the phenomenal job that the Department is doing.

Future Meetings:

The next scheduled meeting is set for June 2020. Given the nature of the current environment, the call may need to be held via teleconference as well. Secretary Kramer suggested a potential interim conference call in May to update the Commission on the Department's work.

Adjournment:

The meeting was adjourned at 11:00 AM