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President, Johns Hopkins Medicine Howard County General Hospital

Howard County Local Health Improvement Coalition

LHIC Healthy Aging Work Group Meeting

9.19.2016 – 2:45-4:15 p.m.

HCHD in Barton B Conference Room

Minutes

Members Present:

Marsha Ansel, HC Mental Health Authority
Courtney Barkley, Office On Aging & Independence
Karen Basinger, University of Maryland Extension
Renee Bitner, HC Health Department
Manuel Evangelista, AAA Physical Therapy
Bruce Fulton, Neighbor Ride
Peggy Hoffman, Office On Aging & Independence
Mary McGraw, Village In Howard County

Elizabeth Menachery, HC Health Department
Andrew Monjan, Transition Howard County
Sheila Palmiotto, HC Health Department
Max Pettis, ALFA Pharmacy
Charles Smith, Dept. of Community Resources & Services
Sharonlee Vogel, HC Commission on Aging
Visesh Velagapudi (Intern), ALFA Pharmacy

Guests Present:

Staff Present:

Rhonda Jenkins, LHIC Program Coordinator
Amy Skaggs, LHIC Program Administrator
Kelly Kesler, LHIC Program Director

Introductions:

Courtney Barkley, Healthy Aging Workgroup Delegate and Health and Wellness Division Manager, Howard County Office of Aging and Independence called the meeting to order at 2:45 p.m. and group members introduced themselves.

Approval of Minutes and Announcements:

A motion for approval of the September 19, 2016 agenda was made by Sharonlee Vogel and second by Andrew Monjan.

A motion for approval of the August 22, 2016 minutes as distributed was made by Sharonlee Vogel and second by Andrew Monjan.

Discussion of Healthy Aging Workgroup Priorities Survey Results:

Courtney Barkley thanked workgroup members for submitting feedback on the Healthy Aging Workgroup Survey and indicated that the responses will allow the workgroup to identify an

action item to focus on for year 2016-2017. Courtney Barkley introduced Amy Skaggs and Rhonda Jenkins to facilitate the discussion on the feedback collected.

Amy Skaggs acknowledged Charles Smith who helped synthesize and compile feedback received from nine (9) respondents. A PowerPoint presentation titled Healthy Aging Workgroup Priorities Feedback Summary included a related statistic, summary of group's operational definition and feedback regarding suggested action items on each of the top ten (10) Healthy Aging priorities.

Generalized statistics, a summary of respondent's operational definition and feedback regarding suggested action items were discussed for the top 10 priorities that had previously been identified:

1. Medication management
2. Improving discharge information
3. Promoting existing community resources (e.g. loan closet)
4. Promoting increased socialization/engagement
5. Home modifications/rehabilitation
6. Case management
7. Home delivered meals
8. Promoting exercise opportunities
9. Promoting planning for future disability
10. Providing in-home services

In discussion of priorities 1-4 and 8, there was a consensus that there are existing community resources; however, many people are unaware of them, therefore, promoting resources is important. Charles Smith also indicated that proposed to combine socialization/engagement with awareness/promoting exercise opportunities as they are interrelated. Members indicated that consideration of where seniors look for information was necessary. Additionally, the group acknowledged there are many factors that contribute to why people don't exercise and suggested one opportunity for an action item for the work group could be developing and/or communicating programs, platforms or strategies that promote exercise and social engagement.

In discussion of home modification/rehabilitation, Elizabeth Menachery suggested that possible action items for the Work Group could be the identification of a home safety checklist and/or make a proposal to the appropriate groups to alleviate the complication when trying to make home modifications for aging populations. Other suggestions from the work group included: supporting a process to streamline permitting so individuals can make simple modifications and still receive tax credit and identifying reliable vendors that specialize in these specific types of home modifications.

In discussion of case management, it was noted that one area of opportunity for the Healthy Aging Work Group could be in providing case managers, social workers and other appropriate staff in hospitals and other care facilities with resources that they can connect patients to. Jillian Anderson shared that Howard County General Hospital (HCGH) is promoting resource connections through the Community Care Team and the Howard County Regional Partnership. It was noted that further discussion of the Howard County Regional Partnership will take place during the full LHIC meeting.

In discussion of home delivered meals it was agreed that further information about the utilization, need and types of meal services and supports needed was necessary.

In discussion of planning for future disability, that the discussion would be more appropriate as “planning for the future after retirement” or “promoting planning for future.” Further discussion included: future planning surrounding finance, type of care, caregiver education, and behavioral health. Possible action items for the work group discussed were creating a checklist for seniors to offer guidance in preparing for the future; supporting talks to inform seniors of pertinent topics; and targeted programs for caregivers.

Kelly Kesler noted that there are common themes that cut across the priorities. The themes highlighted were (1) awareness; (2) advocacy/policy; and (3) needs assessment.

Following the discussion of the feedback summary, Courtney Barkley explained that the group should focus on selecting one action item to work complete by June 30, 2017. The group was reminded that if there are several areas of interest, action groups can be formed to discuss specific areas of interest. The goal of the group is to focus on one action item then revisit others subject areas for 2018-2020.

Work Group members were asked to select priorities. Each member had the opportunity to select up to three priorities and/or weight their selection(s) based on their perceived importance. Results are listed below:

Priority Area	Number of Votes Received
Medication management	6
Improving discharge information	1
Promoting existing community resources (e.g. loan closet)	9
Promoting increased socialization/engagement	6
Home modifications/rehabilitation	1
Case management	2
Home delivered meals	0
Promoting exercise opportunities	2
Promoting planning for future disability	10
Providing in-home services	1

A motion was made to have the group select one item to move forward with for the current year. Sharonlee Vogel moved that Promoting Planning for the Future be the action item to promote and work on this year. The motion was seconded by Elizabeth Menachery and further discussed by the work group.

Next Steps:

- **Identify action items for the selected priority topic Promoting Planning for the Future.**
- **Identify Action Groups and invite groups/organizations that have a vested interest in supporting the action items and priorities discussed.**

The meeting adjourned at 4:15 p.m.

Future Meeting Dates:

Work Group

The next Work Group meeting will take place on October 24, 2016 2:45-4:15 p.m. HCHD in Barton B conference room.

FULL LHIC

January 26, 2017	8:30-10:30 am
April 27, 2017	8:30-10:30 am
June 22, 2017	8:30-10:30 am
September 21, 2017	8:30-10:30 am

* Work Group meetings will be held in December, March, May, and August

**Additional Work Group and/or Task Group meetings will be held as designated by each Workgroup in October, November, February, and July

***LHIC Community Forums will be held in October 2016 and April 2017

Respectfully submitted by
Rhonda Jenkins
LHIC Program Coordinator