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DEPARTMENT OF HEALTH AND HUMAN SERVICES



Dena Schmidt
Administrator

AGING AND DISABILITY SERVICES DIVISION
Helping people. It's who we are and what we do.

MEETING MINUTES

Name of Organization: Nevada Lifespan Respite Care Coalition (NLRCC)

Date and Time of Meeting: Monday, November 7, 2022
9:00AM

Place of Meeting: Location #1
Aging and Disability Services Division
Las Vegas

Location #2
Aging and Disability Services Division
Reno

Location #3
Microsoft Teams meeting

NOTE:

Minutes of this meeting will be produced in summary format. Please provide the Commission administrative support with electronic or written copies of testimony and visual presentations if you wish to have complete versions included as exhibits with the minutes.

1. Roll Call & Welcome:

- Members Attending: Rachel Jelenic, Sharifa Wahab, Cory Lutz, Rommel Timbal, Molly Walt, Kathleen Doyle, Amy Dewitt-Smith, Deidre Hillyard-Manley, Dr. Deborah Howell, Allie Blum, David Nichols (partial), Justin Lester (partial)
- Staff: Cheryl Dinnell, Annemarie Culp, Yazmin Orozco, Lisa Torres, Carole Hanley, Deanna Smith, Ashley Martin
- Guests: Kathryn McKay, Sara Dombrowski, Linda Anderson, Barbara Westcott

2. Public Comment:

- No public comment

3. Review and Approve Draft Minutes from August 15, 2022, Nevada Lifespan Respite Care Coalition (NLRCC) meeting (For Possible Action):

- Kathleen Doyle motioned to approve the minutes
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- Cory Lutz second the motion
- All approved

4. Nevada Lifespan Respite Care Coalition Directors Report:

- NLRCC has two websites: ADSD.nv.gov, nvcaregivingrelief.org, and a Facebook and YouTube channel that is used for outreach purposes.
- NLRCC can have up to 15 board members. It currently has vacancies pertaining to organizations that serve children & minors. NLRCC also needs people who do direct services.
- Community for Respite meetings is an opportunity for stakeholders to meet and share information.
- The NLRCC donation fund administered by Healthy Communities Coalition has a total of \$388.30.
- Cheryl attended the ARCH conference and was able to do valuable networking.
- The next Legislative session starts in February 2023. NLRCC hopes to work with Legislators who pick up NLRCC recommendation as a bill draft and assist with language.

5. Discuss/Authorized Use of NLRCC Donations (For Possible Action):

- Funding can be used as the Coalition sees fit.
- Cory Lutz moved to approve that the funds be used to reimburse Cheryl Dinnell for lunches and supplies purchased for the 11.7.22 meeting.
- Kathleen Doyle second the motion
- All approved

6. Consensus Building Activity #1 (Respite Availability & Quality):

- What is the quality of Nevada's respite and family caregiver supports?
 - Strengths
 - Great job engaging providers of respite
 - Communication & Communication outlets
 - Positive communications with board members
 - Raising awareness about gaps in services
 - Building a foundation for access to various resources
 - Alzheimer's Association provides respite vouchers
 - NLRCC does a great job developing materials to educate the legislature on the importance of respite.
 - Moving toward Culturally Competent Care
 - Great in collaborating and identifying and assessing caregivers needs, especially with community for respite.
 - Respite vouchers for services
 - Medicaid has the COPE program and a Homemaker program
 - Veterans Administration (VA) has a great homemaker program.
 - Helping Hands of Las Vegas Valley, Clark County Medicaid, Community Healthcare Workers and Nevada Job Connect have good programs as well.
 - The Nevada Medicaid Home Community Based Waiver program has two programs, for frail elderly and for physical disabilities.
 - Weaknesses
 - Mental health not able to promote health solutions/address problems
 - Communication with the VA is difficult/ short staffed
 - VA is not accepting requests from outside doctors
 - The VA only has one contractor for home care services
 - Not supporting organizations in recruiting respite workers
 - Not recruiting and supporting respite workers/ rural Nevada
 - Not all board members attend regularly
 - Lack of general awareness of caregiving/respite in the community

- Need to educate the VA on Medicare services
- Respite care and family caregiving for children
- More hands-on services are needed
- Very few options for respite care
- Workforce limitations that affect wages, insurance, benefits, et cetera
- Applicants don't understand the rules of what respite entails
- Diversification of respite models, specifications, and vouchers is needed
- Need respite workers who are trained on caring with someone with significant health issues, including medication administration and mental health support
- Expand the definitions of who is eligible - to help more families
- Personal Care Assistant (PCA) contracts do not pay enough
- A lack of collaboration among providers
- Misunderstanding of what a self-directed respite is
- Not enough education or staff positioned to teach families how to use the self-directed model
- Need outreach to caregivers across diagnosis and needs
- Physical functions/mechanics of being a respite provider needs to be funded appropriately
- Cost/reimbursement rate differential unsustainable -
 - If Medicaid is paying \$17.00 an hour, the PCA agencies can only pay \$13.00 to workers.
 - Arizona pays \$20.00 an hour where Nevada pays \$17.00 for caregiver services.

7. Consensus Building Activity #2 (Priorities & Recommendations):

- Top 3 priorities
 - Collaboration – Increase collaboration among agencies – outreach/ triage cases
 - A way for agencies like the VA to get information from outside providers (like Medicaid) to share with clients and provide greater assistance
 - Address gaps in communication/ miscommunication at various levels
 - Address lack of coordination of care within the healthcare system (Case management, Medicaid)
 - Encourage discussions between decision makers and those who are working in the field when policies are made
 - Utilize partners like, but not limited to, Accessible Space Inc., the Department of Employment, Training and Rehabilitation (DETR) program, Job Connect, and Help of Southern Nevada.
 - Funding – Difference in Medicaid pay / PCA pay
 - Look at system change in policies/ grant specifications
 - How grants can be used, expand on definitions of services and income eligibility, on a sliding fee scale
 - Utilize resources like the Hospice agencies, Health Insurance companies, the Elizabeth Dole Foundation and potentially flex spending cards
 - Outreach – More providers for the VA and outreach/awareness across diagnosis
 - A need for Housing Resources for seniors and the disabled
 - Accessible materials to agencies and communities
 - Understand agency needs through community assessments
 - Speak with the City Council Senior Advisory Board
 - Utilize the VA Homemaker program Freedom Care and the Patriot Angels
 - Community awareness activities and/ or resource fairs

- Strategy and Plans
 - Strategy #1 - Collaboration
 - Ongoing plans/ updates & shared newsletter shared by all providers
 - Care Plans/Services shared between agencies/clients makes communication better
 - Identify key players within organizations such as the VA
 - Collaborate instead of competing for funds
 - Resource list for caregivers
 - VA liaison
 - Presentations, invites to promote current ideas
 - Better meeting arrangements
 - Quarterly subcommittee meetings with providers in attendance
 - Blend vouchers across programs
 - Create a Task Force to assemble meetings, work on goals
 - Work closely with those who provide funding
 - Identify providers who can provide office space and materials
 - Health providers connect with hospitals to help bridge the gaps – family practitioners, social workers, brochure dissemination, and website of all providers
 - Cross application – respite worker portal
 - Strategy #2 - Funding
 - Grant planning regionally not statewide
 - Sliding income fee scale eligibility for respite
 - Older American Act grants are maxed out
 - Streamline fundraising for community events/ joint grant proposals
 - Collaboration thru competitors' applications, streamlining care plan process
 - Share medical care plans with case managers and respite programs
 - Person-Centered Care
 - Identify a need/ distribute information (hospitals & doctors)
 - Central hub for patients to sign formal document to help eliminate redundancy
 - Provide resource handouts with tips and education resources
 - Request grant specification changes to allow flexibility/ sliding income scale
 - Tribal Clinics
 - Work with Health Insurance companies/ bring cross referrals
 - Triage cases with United Us platform
 - Improve Nevada Care Connection
 - Strategy #3 - Outreach
 - Resource list not specific to insurance providers or age groups
 - Support groups and mentors
 - Road maps for diagnosis to step by step and respite along the way
 - Vegas Healthcare (Facebook) & Northern Nevada Healthcare
 - Presentations on programs part of Coalition or not
 - Work with the Tribal Liaison to discover tribal needs
 - Write a proposal to present to Aging and Disability Services (ADSD)
 - Community Newsletter not just for providers
 - Children's fundraising for children's organization
 - Potential collaboration agreement to streamline services

8. Presentation/Reports on ADSD Lifespan Respite Grants:

- The Lifespan Respite program was awarded a 5-year grant to address gaps in services for children with dual diagnosis of SED/mental health and Developmental Disability/IDD.
- This project is in the preliminary stages of structuring a steering committee.
- The Caregiving in Nevada report can be found on the ADSD website. [Reports \(nv.gov\)](https://www.adsd.nv.gov/Reports)
- The Lifespan Respite Emergency funds started at \$44,973.03. Continued outreach efforts have reached 121 family caregivers who have applied for emergency funds. Of those, 70 families have received funds.
- The North has a balance of \$8,162.43 the South has a balance of \$3,433.43.
- Work to increase respite education availability continues with the Nevada Lifespan Respite Enhancement grant. An internship program is being structured to promote respite awareness and direct care.
- Continued effort to promote online respite education and training available to all.
- Efforts to expand the utilization of the Caregiver satisfaction survey has been expanded to state and community partners.

9. Consensus Building Activity #3 (Caregiver Assessment):

- Measuring Success
 - Conduct annual survey and goals.
 - Self-evaluations as a Coalition and from board member.
 - Outside perspective, Stakeholders/participating organizations.
 - Increase in members of different age groups and diagnosis.
 - Measure the number of materials that are being distributed throughout the community and various activities being performed.
 - How may provider contact have been added?
 - Use the Caregiver assessments and expand it be used with other grants and programs.
 - Have innovative programs & gap fillers.
 - Support groups.
 - Newsletters with testimonials sharing success stories. Be 100% transparent and don't hide the truth.
 - Expand Social Media presents, more videos, caregiver and partner highlights, campaigns, and engagements.
 - How many people were helped/ problems solved.
- Caregiver Assets
 - How many hours of support needed?
 - Do you save up your hours or are you on a consistent schedule?
 - What is your story\ what kind of support system do you have?
 - What is your relationship with the patient?
 - What task do you perform?
 - What type of assistance is needed? In an emergency do you have anyone to step in for you?
 - What is your location? Where is the respite needed?

10. Discuss/ Approve Board Elections & Subcommittee Assignments: (For Possible Action)

- Amy Dewitt-Smith moved to extend the officer positions to the end of June 2023
 - Rommel Timbal second the motion
 - All approved
 - Molly Walt moved to approve elections be moved to the last meeting before the end of the fiscal year.
 - Cory Lutz second the motion
 - All approved
 - Subcommittee assignments were tabled until January's meeting
11. Discuss/ Approve 2023 Meeting Schedule (For Possible Action):
- Amy Dewitt-Smith moved to approve meeting dates on the third week of every other month starting in January 2023 at 10:00am. The meeting in January will be held on Tuesday the 17th because of a holiday.
 - Allie Blum seconded the motion
 - All approved
12. Member Spotlights:
- New members introduced and birthday acknowledgments
13. Public Comment:
- Thank you to Cheryl Dinnell and Annemarie Culp for organizing and facilitating the meeting
14. Adjournment: 2:45pm

Accommodation Requests and Meeting Materials:

Note:

Notice of this meeting was posted at the following Aging and Disability Services Office at 3208 Goni Road, Building I Suite 181, Carson City, NV. 89706. Notice of this meeting was posted on the Internet through the Nevada Aging and Disability Services Division website at adsd.nv.gov. and Nevada Public Notices website at <https://notice.nv.gov>. Supporting public material provided to Commission members for this meeting may be requested from Carole Hanley, Commission Administrative Support, ADSD at (702)486-9765 and is/will be available at the meeting locations and ADSD website at adsd.nv.gov.