Maine Council on Aging
Municipal Data Across Sectors for Health (M-DASH) Project
South Portland Task Force on Healthy Aging
Developing a Dashboard of Unmet Needs of Older Adults
May 8, 1-3 pm, Zoom
Meeting Notes

In Attendance: Chad MacLeod ,Sue Henderson, Maxine Beecher, Scott Morelli, Chief Timothy Sheehan, Justin Barker, Patti League, Ann Tucker, Rien Finch, Theresa Goodman, Jon Schleder, Katlyn Blackstone, Susan Lavigne, Dwayne Hopkins, Jo Morrissey, James Moorhead. Jess Maurer, Patricia Oh, Ted Rooney, Amber Wilson

Agenda	Discussion	Action
1. Welcome, introductions	Jess Maurer from MCOA provided a brief overview of the objectives and shared how things are pivoting due to COVID-19. The project is on the same pathway and in fact, may be more important than before given the impact of COVID-19. This is a challenging and concerning time for aging service providers. The current crisis provides us the opportunity to use this project to understand what we've learned around what data has been useful and which data we wish we had.	
2. Overall approach/ DASH Grant	Project started in 2018 by making a blueprint for health aging in Maine with the goal of bringing municipalities into the conversation in order to help people connect to services within their community. After the blueprint was made, a task force of municipal leaders was formed in February 2019. Questions that were asked of municipalities: What kinds of data they use to meet needs? How to understand what an unmet need is? How to meet that need? A decision to make a model of a dashboard, build it out and test it was made. This project has a target of 6 months and is grant funded. It is considered short term-intensive, and a stepping stone or building block. More funding for three yr. pilot project for 6 communities (6 more in second yr.) has been applied for. Overall Goals: • Developing municipal data dashboard. • Developing a process for local multi-stakeholder involvement in developing and using a	Continue dialogue

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	municipal dashboard • Understand how partners use data in response to COVID-19 and the needs of older residents. • What data a community may need to build resilience for a longer response. Keys: • Statewide data and people who care about older adults within their segment come together at one table. Let's look at the data we have, is it useful to you? If not, what data is relevant? Do we have it? If not, how do we get it? • Identifying alignment and resources opportunities in order to work towards shared goals and collaboration. We all want to see people healthy across the board. • "Focus on data to develop collaborative opportunities."	
3. Current response/perspectives with Covid a. Review of S. Portland Age Friendly b. Partners (3 min each) i. Deeper Introductions ii. Responding to Covid-19	Sue Henderson- Review of Report and Data collected from South Portland Age Friendly Task Force. 2 yrs. ago a report was made identifying what kinds of assistance was needed for older adults in S. Portland. A questionnaire was sent out to 4k residents, 1k were returned. They also had 4 focus groups of 8-10 providers who serve seniors 65+. Report can be viewed on city website under boards & committees https://www.southportland.org/our-city/board-and-committees/senior-citizen-advisory-committee/ Findings: It was found that people need help with basic needs- snow shoveling, home repairs, affording rent/housing/taxes, transportation (bus stops are hard to get to) walking safely (lighting/sidewalks/cross the street during traffic). It was also noted that they receive their communication primarily from printed news and TV. Overall, the 1k people reported feeling safe & respected. A recommendation for proactive advocates to help seniors navigate the health care system was made. Focus group concluded that people need access to what is available and help navigating a daunting system as well as transitions (leaving hospital). Care coordination is a problem, care is good but it is not coordinated or holistic. There is an implementation committee in its second year. Although slower than hoped, they are augmenting what the city is already doing. Helping with check-ins, etc. Focus on COVID-19 response and the reframe that needs to happen. Health leaders expect a couple	Patricia and Ted will reach out to individuals/ organizations on data.

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	of things: That the needs will grow for people who have been isolating for months. Due to fear of catching COVID-19, older people will not engage in systems they used to once the economy is open again. Long term needs will increase until there is some sense of reliability to engage in normal life once more. These people will need attention over a much longer period of time. There is a valid fear about the resiliency of smaller nonprofits & social services agencies due to current and possibly sustained increased demand. Will these nonprofits dry up quickly despite federal funds? How can this project be used to support this long-term resiliency? 3 Questions were posed to participants in today's meeting: 1) How is your organization currently responding to residents in S. Portland due to COVID- 19? 2) How are you capturing learnings/experience, e.g. data? 3) What new partnerships <u>Rien Finch- Community Health Options</u> Broad response to COVID-19 covers S. Portland. Informing high risk population on alternatives to care. Following up with anyone who had a COVID test regardless of +/-, to make sure care was managed. Tracking this information in reports and dashboards in various applications. Outreach to expand partnerships with Area Agencies on Aging for things like home food delivery. The State of Maine has reached out to see if they can help with contact tracing for COVID-19 positive cases. Enhanced partnership with telehealth platform to support managing care beyond COVID-19. <u>Ann Tucker- Greater Portland Health Community</u> Pivoted how care was provided; now providing primarily telehealth. Triage with acute needs first connect via telehealth. Still having some face to face visits, walk up testing at 2 sites, and a homeless site for testing. S. Portland site is a 'well site', infectious people go to other locations. Electronic health record, tracking COVID-19 information to report to the federal government weekly. <u>Chad MacLeod- Health Info Net</u> They are a health information exchange in Maine. They have 790+ connections with providers in ME. Building electronic records based on data connection sites. Currently figuring out how they can best support both the CDC and DHHS in their data needs. Giving info such as number of ICU beds available, etc. Offering expertise and data to assist. <u>Dwayne Hopkins- South Portland Food Cupboard</u>	

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	Has had to readjust the whole process due to COVID-19. Currently open Thurs 8:30-11a, and one Wed night a month. People leave with 15-17 bags of groceries. Recipients normally come in and shop but now a drive through process is being used. Two major populations aren't showing up-immigrants and seniors. This is out of fear of catching COVID-19. One new partnership with the S. Portland Housing Authority. They send menus out to seniors in S. Portland Housing Authorities that would otherwise come via bus. Current three-way partnership that was put together through Facebook. Senior adults select food, the group from Facebook delivers the food to their residence on the 3rd & 4th Wed of the month, which has worked great. Hesitantly allowing people to proxy shop for family members and friends. Loosened guidelines to allow people to deliver food, must bring in a note. Computer data system for each family, which he is willing to share as appropriate. <u>Tim Sheehan- Chief of Police S. Portland</u> They are a data driven organization. With most calls for service, data is collected. Has been conducting business the same as normal, with precautions in place. Still have medical drop boxes, providing masks and gloves at the station, very cognizant to the risk of older populations so trying to respect their health. Documenting people who are not adhering to state guidelines. Trying to educate people and get them to cooperate with the rules. <u>James Morehead- Aging Services Manager, OADS</u> Past month and a half processing relief packages that are coming through. Making sure they help older adults with their needs. Caregiver support has been a focus. <u>Jo Morrissey- Maine Share Needs Assessment</u> Community Health Needs Assessment organization. Made up with the 4 major health systems in Maine, in collaboration with Maine CDC, who provides the data for the datasets. Maine CHNA is also reviewing data sets. To see the tool being used visit https://www.maine.gov/dhhs/mecdc/phdata/MaineCHNA/ . The tool asks for some older adult health indicators. What indicators need to be added? <u>Kat Blackstone- Southern Maine Agency on Aging</u> Continuing to deliver core programs in different and creative ways. Serve 100 clients from S. Portland with meals, this has increased due to COVID-19. Guidelines have loosened so more people are receiving meals via Meals on Wheels. Recipients currently have 3 wks of meals. Resource specialists who are taking calls report that there is an increased sense of isolation and fear. Phone Pal programs up and running, helping people stay connected to a human voice via phone and zoom. They capture data through a statewide system and a dashboard of their own in order to look at towns, services, and contacts. New partnership with the city of S.	

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	Portland, two resources specialists who are connecting people to services and resources. Theresa Goodman - UnitedHealth Medicare advantage- includes coverage for seniors. Comprehensive response to COVID-19. Expanded benefits across the board and still working on this due to people being uncomfortable leaving their homes. Direct outreach for those at high risk via connecting them to resources. Connecting with primary care/hospitals to help. Shifted payment methodologies, processing claims faster, and providing financial support for these places to stay open so there are no disruptions in health care delivery now or in the future. Waiving copays for testing, diagnosing, and treatment. Waiving costs to members. Instructed providers that they are getting paid for full rate, including phone calls for those who can't access telehealth. For the larger community- expanded telehealth benefits and encouraging people to use it. Early RX refills, connecting to mail-order pharmacies. Toll-free 24/7 support line available to all. 400 members in S. Portland. Patti League- Maine Health Trying to support people getting PPE, surveillance rehab/nursing home testing and reporting. Working with DHHS with older adults living across the state. Partners are working with Maine Health, collecting data, and via telehealth. Susan Lavigne- Senior Companion Foster Grandparent Program/ Opportunity Alliance Continues all programs remotely. 300 staff, telehealth, some face-to-face. People who used to help with transportation are now making calls to make sure people are safe. Operate 211. COVID-19 related calls spiked at 1800/day. Currently managing 250-300 calls/day. Front Line, Warm Line for first responders. Capture data via major platforms that boils down to ages/cities. Scott Morelli – City of S. Portland Adopted restriction on visitors going to residential facilities of 55+. Only essential people, medical staff etc. are allowed. Not being followed religiously, but overall has been successful. Provide funding via general assistance for rent/food/essentials. They were busy before, but it has increased due to job loss, this includes the older adult population. Helpline in S. Portland and website with listed resources for all. Track different names of older adults in databases who had used programs in the past and had employees make phone calls and reach out to see if they wanted a regular check in and connect them to resources. Not many had needs, only a handful needed the service. They were very thankful.	

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	Justin Barker- City of S. Portland Taking these experiences and shifts in services and collecting usable data to help inform policies and programs that can support the aging population in relation to health care, housing, and transportation. Looking on a broader level. Maxine Beecher- Age Friendly Task Force S. Portland Recognizing that seniors are not computer savvy, they made a commitment to submit articles in the Century. I.e. Sand buckets for seniors to prevent falling. They expected 40-60 calls, there were 300 calls asking for a bucket of sand. People don't know what is happening or where to look for help. People/businesses are willing to help, but they don't know what the needs are. Sue Henderson- Age Friendly Task Force S. Portland Add phone numbers on the resources page at the bottom of articles in the Century. Info is being shared on S. Portland TV. Use S. Portland TV as a way of combating social isolation (i.e. exercise programs). Seeing a familiar face/name and talking about things related to the town may be reassuring. Zoom programs in order to interact. Jess- brought up that this is a data source. Do they have info on viewer numbers?	
4. Review of Municipal Task Force 2019 Report	Ted Rooney shared some slides about the 2019 Task Force, data needs, and sample data reports. Goal of the data dashboard is to marry a story with data. Come up with a way to talk about data. How can we make data meaningful to municipalities so they can take action from it? Taking statistics and transforming them to actual people with actual needs. Statistical data combined with stories equals action. There are needs and programs, how do we connect the two? Can we braid together funds and efforts in order to help people and reduce costs? What actually helps? How can we use this to combine efforts in the community?	
5. Review of sample dashboard	Patricia Oh- Brief overview of the application specifically to S. Portland, see shared PowerPoint. People aren't leaving S. Portland, the population is aging, 33% of the population over 65 lives alone. This creates things such as isolation, increased risk of falling, and more. Initiatives that encourage social connectedness are going to be even more important due to COVID-19. Shared highlights showing the reality of budgets for aging adults, the housing struggles, and disabilities of those living in S. Portland. Also shared the data template that she and Ted will be using in reaching out to other organizations to	Patricia and Ted will reach out to individuals/ organizations on participation and data.

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	see how to best compile data on the needs of older adults so it is useful to South Portland and its partners.	
6. How do we move forward together?	Question on privacy. Ted emphasized it can feel like "big brother" but it is not. How do we find out what people need, and encourage and persuade them to seek help, in a way that they are very comfortable with? The help is there and they deserve it. Doing this with privacy, respect, and dignity. Focusing on quality of life. Jess- It's hard for anyone to ask for help, and we are looking through the lens of need at older Mainers, but we will always encourage actions and solutions that work for everyone so we are building a stronger community fabric across the board.	
7. Closing Comments	Take a look at the data that Patricia has put together. Start asking is this the right data? Is it relevant to S. Portland? What other data should we be thinking about that hasn't been captured? We will take a deep dive in the data sources that are available. Break out in groups around specific issues (food, transportation, etc.). How do we get the data? What kind of stories do we want to tell with the data? If you have data that will help, please reach out and let Ted (trooney@healthandwork.com) and/or Patricia (build.afc@gmail.com) in order to enrich the discussion of what is still needed. Contact information from this call will be shared with those with stakes in this conversation. We would love feedback. Good ideas, questions, and direction- we are creating this specifically for the needs of your community!	Please follow up with Jess, Patricia, or Ted at any time for questions, suggestions, need for further information, etc.