

## Section C-1: HEALTHY AGING

### Introduction

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*“Quality is never an accident; it is always the result of intelligent effort,”* John Ruskin

Most everyone’s goal is to live a quality life that is long and healthy. However, the United States is losing some ground in that arena due to COVID-19 and other causes in 2020 and 2021. The average life expectancy of Americans in 2021 is 76.1 years of age, per National Vital Statistics System – [Provisional Life Expectancy Estimates for 2021](#). A decrease of 0.9 years from 77 in 2020. COVID-19 deaths and other causes saw an overall decline of life expectancy between 2019-2021 of 2.7 years for the total U.S. population however, in comparable countries it fell an average of [0.2 years](#).

Life expectancy decline between 2020 and 2021 was due to increases in mortality due to COVID-19 at 50%; unintentional injuries 15.9%, heart disease 4.1%, chronic liver disease and cirrhosis 3%, and suicide 2.1%. [Of the 10 leading causes of death in 2021 in the U.S.](#), the top five are heart disease, cancer, COVID-19, unintentional injuries, and stroke. [In WA state, for 2021, the top five](#) are cancer, heart disease, COVID-19, accidents, and Alzheimer’s Disease.

The fastest growing demographic in the US is individuals aged 80 and over. Like our counterparts around the world, we are an aging demographic, which brings with it a lot of implications. Healthy aging is something that people can start at any age, and the sooner one starts, the more likely a positive outcome will occur.

Dan Buettner, in his role as an explorer, researcher and author for National Geographic and New York Times, started to notice some communities around the world with larger numbers of centenarians and older people in general who were living long and healthy lives. He saw a trend in these communities. He noted they have less chronic disease and live longer than average life spans. He started working with researchers to document what these communities had in common. They researched five such communities and he found multiple things in common. These findings came to be known as “Blue Zone” communities and he, along with the National Geographic, started to develop an approach to apply these same concepts to help transform communities around the world to mirror these Blue Zone communities. The five Blue Zone communities venerate older people, and they found that this attitude also assists with all generations within that community. The Blue Zone communities shared other things that lend themselves to longer, healthy aging communities.

These findings were:

- People are not isolated, including older adults. They have meaningful family and social networks within their communities. They are connected to their community and belong to other “healthy people,” described as “tribes.” These are generationally mixed communities. Those who practice physical in-person community connection tend to live healthier, happier lives.
- They have a meaningful life and have a sense of purpose, also known as, “the reason to wake up in the morning.”
- They have active spiritual beliefs with life activities around those beliefs.
- They eat a largely plant-based diet with moderate amounts of meat. They practice the “80% rule,” which means they stop eating when they feel 80% full. They have diets rich in vegetables, legumes, grains, nuts, and omega 3 fats. They tend to have lower calorie restrictions and may practice intermittent fasting. They drink only moderate levels of alcohol.
- Exercising is built into daily life. They don’t typically have purposeful exercise but had communities that emphasized natural movement such as gardening, walking, taking stairs, cooking without a lot of mechanized tools.

A culmination of these activities, within other settings, is to transform communities which help change individual behaviors. However, until communities embrace Blue Zone concepts, there are elements that individuals and planning organizations can utilize to help promote some of these same concepts within their communities.

**Current Goal:**

Southeast WA ALTC will promote disease prevention and health promotion throughout their region to ensure better health outcomes and higher quality of life for older adults and adults with disabilities and their family members.

**Issue: Age and Dementia Friendly Communities**

In 2021, [Dementia is the 5th leading cause of death](#) (age adjusted) in Washington State. Dementia is long in duration and one of the costliest chronic conditions in our society. The backbone of care is provided by unpaid family caregivers, often at the expense of their health and wellbeing and with significant financial strain. Early detection of the diagnosis is lacking, leading to missed opportunities to help those with the diagnosis. This lack of early diagnosis impacts the ability of unpaid family caregivers and individuals with dementia to prepare for the disease. We often help

unpaid family caregivers late in the diagnosis, when we have good service delivery options for both the person with the diagnosis and the unpaid family caregivers.

Southeast Washington Aging and Long-Term Care is trying to make an impact in this area through:

- Enhancing awareness of the disease, engaging the public and educating them.
- Helping build aging and dementia responsive communities.
- Provide comprehensive supports to unpaid family caregivers
- Ensure legal strategies are employed to help the decision making process as the disease progresses
- Encourage the medical community to emphasize early diagnosis for treatment interventions which should include referrals to Washington State's service delivery system for unpaid family caregivers
- Get upstream of the disease by promoting healthy aging and brain health.
- Working with individual clients to meet their LTSS needs to include temporary or permanent affordable housing options when displaced.
- Encourage the housing community to share the affordable & accessible housing options in the community.

**What ALTC has embarked and built upon:**

- ALTC has a robust family caregiver program that offers a breadth of services to all eight counties throughout our region.
- ALTC, in conjunction with Alzheimer's Association and community partners, has developed one or more Memory Cafés in Kittitas, Yakima, Benton, Walla Walla, and Asotin counties. A weekly connection group, Community Engagement, was developed because of the emergency proclamation and helped facilitate connection during this time.
- On-line physical fitness and other virtual engagement programs such as local virtual museum tours, music programs, and subject matter discussions took place from 2020 -2021.
- ALTC has a Dementia Navigator program contracted out to the Alzheimer's Association that provides routine community forums on brain health, trains first responders via education programs, in-person or via webinar, to help first responders identify when they may be working with someone with cognitive impairment and how to make referrals for services. Additionally, each year goals

are set to evolve our infrastructure and service delivery system to become more dementia capable.

- ALTCs Executive Director is a Governor appointed member on the Dementia Action Collaborative and brings information to PSA 09 that helps ensure direct services staff and contractors are aware of resources available and help advance our services to become more dementia capable.
- Additionally, Star C, Powerful Tools, and Early State Memory Loss classes, went to a virtual/remote platform due to the pandemic and now have a hybrid option available. These are routinely provided via our contract with the Alzheimer's Association.
- ALTC has partnered with Dementia Friends and has Dementia Friend throughout ALTCs 8 county area.
- ALTC has continued the MAC/TSOA program and has increased services to more unpaid family caregivers getting upstream. WA State continues the Medicaid waiver, referred to as the Medicaid Transformation Project (MTP) with the renewal MTP 2.0 for five more years, beginning July 2023.
- ALTC has partnered with community coalition's/groups, Safe and Healthy Aging Coalition for Benton and Franklin Counties and Health Aging Consortium for Walla Walla County. The groups convene and coordinate to provide support and promote opportunities for healthy aging and well-being for aging residents in their communities.
- ALTC has trained volunteers to be Dementia Champions and has entered a partnership with University of Washington's Dementia Friends. This is a new program in SE WA ALTC's PSA that started in Spring of 2023.

#### **Some of ALTC's Challenges and Barriers:**

- The challenge of participants connecting to on-line classes or webinars due to limited internet connection or access in their rural communities.
- The challenge to increase attendance in the Early-Stage Memory Loss (ESML) 4 weekly 90-minute discussion sessions. Participants who sign-up cancel last minute, do not complete the sessions, or don't show up.
- We still need our communities to transform to dementia friendly communities, with communities responding to the growing epidemic.

#### **Issue: Addressing Social Isolation**

Social isolation is defined as the lack of social contact. Social isolation affects nearly 1 in 5 older adults prior to the pandemic. A [2023 University of Michigan National Poll on Health Aging](#) (NPHA) found that 1 in 3 adults age 50 – 80 (34%) reported feeling isolated from others in the past year. As the number of older adults increases the

number of those who are socially isolated continues to rise, statistics show 17% of adults aged 65 and older are isolated and 46% of women aged 75 and older live alone and are at risk for being socially isolated. People that are of lower income and people that are marginalized are at higher risk to be socially isolated.

Older adults are at higher risk for social isolation due to changes in health and social connections that come with growing older (hearing, visions and memory loss, disability, trouble getting around and/ or the loss of family and friends). Social isolation among older adults is associated with an estimated [\\$6.7 billion additional Medicare spending annually](#). People who are socially isolated are more likely to be admitted to nursing homes and emergency rooms. Socially isolated older adults are more likely to suffer from the following health disorders: High blood pressure, heart disease, depression, cognitive decline, obesity, dementia, including Alzheimer's disease, weakened immune functioning, anxiety, and death. People who are socially isolated may get too little exercise, drink too much, smoke and don't have healthy sleep habits. Social isolation has been compared to being as bad as smoking 15 cigarettes a day.

**Southeast Washington Aging and Long-Term Care is trying to make an impact in this area through:**

- Enhance and engage public awareness of social isolation through education.
- Create responsive communities for seniors experiencing social isolation.
- Provide comprehensive supports for those who are socially isolated.
- Provide early interventions for identified individuals who are at risk for social isolation.
- Create comprehensive social connection programs to target socially isolated older adults.

**What we've accomplished but need to further saturate our service area with more (a work in progress):**

- Identifying the need for additional programs serving individuals in rural communities using various platforms (zoom, home visits, and provided social settings)
- Actively promoting Furry Friends program across all counties. A program to provide artificial intelligent pets to those who are socially isolated.
- Contracted with the Yakima Neighborhood Health Services to support Programs to Encourage Active Rewarding Lives (PEARLS). Supporting older adults who suffer from depression by creating socially activating goals.

- Growth of Area Agency on Aging (AAA) Family Practice Resident practicum, educating providers about the community services and identification of older adults who can benefit from AAA resources.
- Grow our State Family Caregiver Program with additional people to serve those at risk of social isolation.
- Developed Dementia and Alzheimer friendly Memory Cafés in Kittitas, Yakima, Benton, Columbia, and Asotin counties connecting socially isolated persons affected by these diseases.
- Adult Day Services supporting those at risk or who are socially isolated.
- Connecting clients with contracted vendors for home delivered and congregate meals services, promoting social interactions among older adults.

SE WA ALTC clients were not able to attend their regular in-person programs such as Adult Day Services, Star C, Powerful Tools and Staying Healthy, Staying Connected. In addressing this concern, ALTC was able to lease twenty-seven GrandPads to various clients. The GrandPads were used primarily by Adult Day Services contractors to allow their clients to participate virtually to help avoid social isolation and to continue with services. Clients were also then able to use the GrandPads for personal use, connecting with family and friends. The Adult Day Services program now operates with in-person services. In comparison to pre-COVID to post-COVID, attendance at the two remaining ADS programs has gone up significantly.

GrandPads were also used to help SE WA ALTC Advisory Board Members attend and participate in virtual meetings during this time. The use of this device kept the seniors from being completely disconnected from their programs and stay connected with family and friends thereby avoiding complete isolation. For seniors who are not savvy with technology, the GrandPad company is able to provide technical assistance. The adult day services provider and ALTC also helped when requested. The guidance allowed seniors to use the GrandPad with more confidence. Eleven seniors are currently using GrandPads.

We are also working to bring “Furry Friend – Carefree Companion Pets” to our communities. These are robotic companions, dogs, or cats, designed with soft fur that feel real with sensors that respond to motion, touch, and sound allowing them to interact with their pet owner. These pets have been successful with seniors and those with dementia.

### **Some of ALTC's Challenges and Barriers in addressing Social Isolation and providing education on COVID-19 vaccines:**

- ALTC recognizes the need to address social isolation among older adults and people with disabilities, the barriers are how to serve rural communities with limited support services.
- Bridging the gap between medical providers and social service networks who serve those socially secluded.
- SE WA ALTC faces challenges on how to effectively educate communities about the growing health concerns among older adults impacted by social isolation.

### **Issue: Evidence Based and Health Promotion Services**

The number of older individuals in the population is increasing with each decade and, as a result, chronic diseases and falls have increased to where they are now the leading causes of death and disability among older adults, according to the National Council on Aging. However, both chronic disease and falls are highly preventable. Evidence-based programs can help turn the tide and lift the quality of life for older adults, along with improving health, functional status, and overall well-being.

**Evidence-based programs (EBP)** offer proven ways to promote health and prevent disease among older adults. They are based on research and provide documented health benefits, allowing confidence in their outcomes. EBPs are based on rigorous study of the effects or outcomes of specific interventions or model programs. They demonstrate reliable and consistently positive changes in important health-related and functional measures. EBPs are programs that can be modeled and carried out with multiple populations in a variety of settings, making them more likely to produce positive changes and outcomes. EBPs offered by ALTC meet the threshold established by the Administration for Community Living/Administration on Aging criteria for evidence-based program funding. The biggest benefit of EBPs is that they work!

Benefits of EBPs include:

- More efficient use of available resources.
- Facilitation of partnerships between community and clinical entities.
- Improved health outcomes and a more positive health care experience.
- Fewer hospital and doctor visits and lower or decreased health care costs.
- Ease of replicating and spreading programs.
- Greater opportunity for varied funding sources, as programs get proven results.

Older adults who participate in EBPs can lower their risk of chronic diseases and falls or improve long-term effects of chronic diseases or falls. Specific benefits of EBPs for Older Adults include:

- Improved quality of life.
- Increased self-efficacy in managing one's health.
- Increased or maintained independence, positive health behaviors, or mobility.
- Reduced disability (fewer falls, later onset, or fewer years of disability, etc.)
- Reduced pain
- Improved mental health (including delays in loss of cognitive function and positive effects on depressive symptoms).

Based on the benefits listed above and ALTC's commitment to Healthy Aging, we partner with local entities to offer the following EBPs for our communities.

**Care Transitions** – The hospital experience is taxing and confusing for patients and their families. ALTCs partnership with Multi Care/Signal Health, Kadlec Regional Medical Center, Trios Health, St. Mary Medical Center, and TriState Health addresses the complexity that often leads to patient disengagement, poor adherence to the plan of care, and high readmission rates. Care Transitions is a person-centered social work-based, interdisciplinary transitional care intervention that addresses these challenges as it helps adults safely transition from the hospital back to their homes and communities. Empowering the client to develop skills and a more active role in their health. The key components—patient engagement and self-efficacy, primary care integration, appropriate use of community resources, and coordinated care that is woven throughout effective clinical case management.

**Health Home Program** – A Health Home is not a place. It is a set of services to support people with serious chronic conditions and more than one medical or social service need. Health Home clients are assigned a Care Coordinator to address the individual needs of each client. Health Home services can make things go more smoothly between medical and social service supports. This can help reduce visits to hospitals and emergency rooms as well as support overall well-being and self-care.

**Program to Encourage Active, Rewarding Lives (PEARLS)** – ALTC has partnered with the University of Washington to expand an evidence-based program in Yakima County. PEARLS, the Program to Encourage Active, Rewarding Lives educates older adults about what depression is (and is not) and helps them develop the skills they need



for self-sufficiency and lead more active lives. The program takes place in an incremental period over the course of four to five months in the older adult's home or community-based setting that is more accessible and comfortable for the older adult who does not see other mental health programs as a good fit for them. PEARLS allows for coordination with their health care providers when and where appropriate.

ALTC contracted with Yakima Neighborhood Health Services in 2022 to provide this service to Yakima County residents. The PEARLS Coaches have made an impact on clients lives by assisting in the education and active health promotion.

**Powerful Tools for Caregivers** – Powerful Tools for Caregivers is an evidence-based class series over six weeks designed to help caregivers take better care of themselves while caring for a family member or friend. The series is facilitated by the Alzheimer's Association and can be provided in-person and as a hybrid to meet the needs of the community.

Topics include:

- Identifying and reducing personal stress
- Communicating feelings, needs, and concerns
- Communicating in challenging situations
- Taking care of you
- Problem solving and goal setting
- Mastering tough caregiving decisions

**Star-C Program** – STAR-C is a program designed to help caregivers who are caring for and living with someone with dementia. Field tested by the University of Washington, this six-week program has been shown to reduce depression in caregivers and decrease unwanted behaviors in the person with dementia. With the ending of the emergency proclamation, this service is offered in-person and has the flexibility of being done virtually if requested.

### **Some of ALTC's Challenges and Barriers to providing EBPs:**

- These programs are not sustainable without additional and stable funding sources. EBPs do present some unique challenges, such as keeping to a fidelity model and retaining instructors. Often the costliest portion of an EBP is initial training, oversight of instructors, and acquiring a site for the class. Training is provided either on-line or in-person.

- Recruitment and commitment of participants to attend EBPs, especially during limited grant funded windows, can be a challenge as often the limited marketing we are able to do does not fully demonstrate their benefits and success.
- With the ending of the emergency proclamation, most all of the EBPs has gone back to in-person service and some now have a hybrid option, virtual or in-person.

### **Issue: Falls Prevention**

According to the [Department of Health](#), in Washington State, the 60+ population accounted close to half of all injury-related deaths at 49% due to unintentional falls in 2020. Between 2021-2022, there were an average of 7,810 EMS fall-related calls each month for person 65+; and 29,140 emergency department visits for persons 60+.

While many factors increase the risk of falls for older adults, falls are not a normal part of the aging process, and most falls can be prevented. Solutions for preventing falls are complex, requiring collaboration with older adults, their families, and with many types of elder care and health care providers. Improving the health of older adults includes helping with safety and mobility.

Washington State has a variety of evidence-based falls prevention programs. As of September 2023, four counties in our PSA have evidence-based fall prevention programs. Those counties are Benton, Columbia, Walla Walla, and Yakima counties.

The Department of Health partnered with ALTC in the fall of 2018 to address this gap in falls prevention services. Through the three-year duration of the grant, and with the support of Department of Health, ALTC implemented the EnhanceFitness and SAIL evidence-based falls prevention program. Since the end of the grant ALTC has committed to continue the exercise programs within our PSA.

**Stay Active and Independent for Life (SAIL)** – SAIL is a strength, balance, and fitness program for adults 60 and older. Performing exercises that improve strength, balance and fitness is the single most important activity adults can do to stay active and reduce their chances of falling. The activities in the SAIL Program can help improve strength and balance, if done regularly. One class is offered in Garfield County.

**EnhanceFitness (EF)** – This is an evidence-based group exercise class designed by Sound Generations, Group Health, and University of Washington. The class improves balance, flexibility, bone density, endurance, coordination, and mental sharpness and

decreases the risk of falling. The classes are for one hour, three times per week. The focus is on dynamic cardiovascular exercise, strength training, balance, and flexibility. Data is collected at the start of the program and again after 4 months of participation. Improvement is tracked in upper and lower body strength, stamina, and balance. The key components older adults need to maintain health and function as they age.

**What ALTC has embarked and built upon:**

- Participated in the creation process of the Washington State Action Plan for Older Adults Falls Prevention and continues to participate in WA State Department of Health Falls Prevention Coalition (FPC) and Injury and Violence Prevention (IVP) TAC meetings.
- Partnered with the Department of Health on a grant to bring evidence-based falls prevention classes to Yakima, Benton, Columbia, Garfield, and Walla Walla Counties
- Implemented classes of Enhance Fitness with a few classes not continuing post COVID-19. Currently Benton County has 1 in-person and 1 remote class for participants wanting to exercise from their own space, Columbia 1, Walla Walla 3, Yakima 3 with one of those classes bi-lingual. ALTC brought on two new instructors in Yakima replacing instructors who resigned during the emergency proclamation. There is one SAIL class in Garfield County.
- Local direct services offices at ALTC have had training on information regarding Falls Prevention and have a check off list for falls risks to review with clients.
- Some of ALTC's direct service offices have developed a working relationship with local Fire Departments to make referrals to the ADRC for the at-risk older adults they encounter. This process is being expanded to include all fire departments in ALTCs PSA. ALTC's First Responder Education Programs offer a hybrid, virtual/remote platform since the emergency proclamation ended.

**Some of ALTC's Challenges and Barriers to providing falls prevention services:**

- We need to build strong and effective community relationships between collaborating agencies such as community resources for falls prevention and primary care screening.
- There is a need to educate older adults to help increase motivation to participate in falls prevention classes.
- Then lastly, there is a need for falls prevention classes, which cannot take place without partnerships for host locations, instructors, and a commitment to finding sustainable funding.

## **ISSUE: Linking Primary Care with Community Resources in the Aging Services Network**

The Affordable Care Act (ACA) was built around the idea that the right service, at the right time, in the right place would help deliver better and less expensive health outcomes. The ACA acknowledges that the Social Determinants of Health model indicates that health outcomes are not based exclusively on healthcare but are more highly influenced by social determinants of health. The World Health Organization defines social determinants of health as “the conditions in which people are born, grow, live and age.” These conditions are not equal, and the complexity of these social factors become the determinants to health, good or poor.

Studies indicate that the larger the inequities in social determinants the higher incidence in poor health. Social determinants are the underlying cause of many major health issues such as obesity, diabetes, heart disease and mental health issues. Without resolving some of these inequities, good health outcomes are hard to achieve.

Social determinants of health (SDOH) are grouped into 5 domains identified as economic stability, education access and quality, health care access and quality, neighborhood and built environment, social and community context<sup>1</sup>. SDOH examples are safe housing, transportation, and neighborhoods; racism, discrimination, and violence; education, job opportunities, and income; access to nutritious foods and physical activity opportunities; polluted air and water; and language and literacy skills.

The University of Washington Medical School’s arm called the “Northwest Geriatric Workforce Enhancement Center,” (GWEC) embarked on a project to help bridge the gap between the medical providers and the social and health service delivery community. A partnership between these two communities will heighten the awareness of and the continuity between the social and health worlds of patients/clients with a focus on geriatrics. This is an approach to better address the social determinants of health of older adults. In conjunction with this, GWEC is attempting to enhance the primary care practitioner’s geriatric medicine expertise.

With the growing age wave, there is a shortage of geriatric physicians. Geriatric medicine is a medical specialty that requires one to two years more of additional training (residency) than a generalist in medicine. It is the lowest ranking specialty in part because even with the specialty and additional training, a geriatrician is paid on average \$20,000 less per year than a general practitioner. (The New York Times, “As Population Ages, Where Are the Geriatricians,” January 25<sup>th</sup>, 2016).

## **What ALTC has embarked and built upon:**

### **Geriatric Workforce Enhancement Center**

- ALTCs continued partnership with the NW GWEC in Yakima, Benton, and Franklin counties. This partnership entails a full time Primary Care Liaison (PCL), who will be embedded in ALTC and work with GWEC to engage and train primary care providers, those studying in the health care field, patients, families, caregivers, and social services to enhance their knowledge of geriatric medicine and care for persons with Alzheimer's disease and related dementias. The PCL will be responsible for facilitating primary care awareness of the aging services networks, enhancing communication and referrals of older adults and caregivers with primary care clinics within the service delivery region.
- In the fall of 2021, in partnership with Area Agency on Aging and Disabilities of Southwest Washington, SE WA ALTC created digitized material to support Primary Care Trainees to receive introduction to Area Agencies on Aging and community-based service opportunities via a web platform. The completion of this platform has enhanced the training of future primary care provider training and increased the awareness of a AAA and local resources.
- ALTC will focus on developing additional MOUs with Residency Programs who will benefit by this resource.
- ALTC has developed MOUs with two Residency Programs who will benefit by this resource. There are programs for 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>, and 4<sup>th</sup> year resident physicians that includes reviewing the web platform on services and shadowing opportunities in the field.
- ALTCs Primary Care Liaison has created some partnerships with Primary Care creating protocols for referral.

### **Some of ALTC's Challenges and Barriers:**

- Our society has a medical bias, with medicine being viewed as the singular solve. The expertise and credibility of social services and their workforce are not nearly as highly valued. Moving this bias for both the client/patient, as well as the medical and social service community will be a challenge.
- Bringing a multi-pronged solution will entail getting the attention of a medical community that is already resource-stressed and having them carve out time and resources to learn about and make referrals to social services. This will be a barrier to overcome.

- Bringing a liaison with a social service background into the medical world where they are outranked in terms of societal value and obtaining credibility will take time, persistence, and courage.
- In addition, marketing the UW Medical School's geriatric seminar to the medical community who have so many demands on their time will be a steep goal to achieve but a worthy endeavor that will help bridge the educational gap many primary care practitioners may have in the field of geriatrics.

COVID-19 made it difficult to perform on-site clinic visits or for residents to do rotations with ALTC CMs. Post COVID-19, many medical offices have maintained the no representative rule thus making it difficult to speak to providers about the AAA resources. Alternative information sharing has been added to the PCL role.

The reintroduction of resident experiential visits has made the value of the Resident Practicum even greater. The resident now has the ability to experience the work of a case manager at the ADRC and visit with clients who receive AAA services and resources.

### **Issue: Nutrition Services**

The Congregate Meal Program successfully targets seniors who are older, low income, and more likely to live alone, live in rural areas, be minorities and be medically vulnerable. The meal programs are offered in community centers, churches, and sites such as Grange Halls. Congregate nutrition services improve the health of participants and prevent more costly interventions. The congregate meal programs also provide older people with positive social contacts at the group meal sites and at some sites evidence based exercise classes, or physical activity programs.

Home-delivered nutrition services enable older adults to avoid or delay costly institutionalization, enabling them to stay in their homes and communities. Recipients of home-delivered meals are typically older persons living alone, have annual incomes below 100% of the Federal Poverty Level and have multiple chronic health conditions.

Adequate nutrition is essential for healthy aging and the prevention or delay of chronic disease and disease-related disabilities. The cost of a one-year supply of home-delivered meals equals about the cost of one day in the hospital.

In 2022, the Older Americans Act (OAA) nutrition program served 4% of the entire senior population in Southeast Washington. HD and congregate meals are an important part of the weekly nutrition for seniors in our PSA.

The need for adequate food and nutrition services by at-risk older adults currently exceeds the resources of the existing programs. Funding has yet to keep up with the demand of the growing senior population.

As well, national funding sources have not kept pace as food, transportation, and labor costs continue to rise. Currently, several of our nutrition contractors are faced with dilemma of finding ways to best serve our aging population with less funding.

ALTC's PSA has high poverty levels, large populations of limited English-speaking persons and individuals with less than a 12<sup>th</sup> grade education. To adequately serve these populations, there must be adequate education about nutrition. This information needs to be disseminated in multiple languages and through multiple media.

**Senior Farmers Market Nutrition Program (SFMNP):**

**SFMNP** provides resources in the form of fresh, nutritious, unprepared, locally grown fruits, vegetables, herbs and locally produced honey from authorized farmers' markets, farm stores and Certified Sellers to low-income seniors. SFMNP also provides nutrition related educational materials including recipes, nutrient values, food preparation and storage information to increase the effectiveness of the program and improve the health of the participant. In our PSA seniors purchase produce from the above mentioned markets through the newly developed benefit card which is received from ALTC's contracted senior nutrition providers. Homebound seniors are offered the same benefit card and are able to send a proxy for the purchases. There is no cost to the senior to participate in this program.

Seniors who may participate in this program are defined as individuals who are at least 60 years old, and who have household incomes of not more than 185% of the federal poverty income guidelines (published each year by the Department of Health and Human Services). For 2023, this amount was \$2,248 for a single person and \$3,040 for a married couple. In 2022, 2,904 seniors, in our PSA, received vouchers for a total of over \$178,892 in produce purchased.

In 2022 Yakima County had the highest SFMNP voucher redemption rate of 85.9% in WA State. During the pandemic the redemption rate from 2020 to 2021 was down. With the emergency proclamation ending, redemption rates have since recovered and

SFMNP contractors continue with safety measures while signing up participants. Some seniors have proxies to pick up their fruits and vegetables.

**Some of ALTC’s Challenges and Barriers to providing nutrition services:**

With the OAA re-authorized and enacted in March 2020, ALTC has the opportunity to continue serving the senior population. However, our PSA has had challenges with increased food, fuel, and transportation costs. With much of our region being rural (38%), ensuring equal access to our services has been expensive. A forum participant remarked, “Our rural areas have few transportation options, volunteer drivers are needed to take home delivered meals or fill the transportation gap and offer a ride to a meal site.”

Southeast Washington is rich in diversity. This challenges providers to integrate seniors of ethnic backgrounds with meals sites that have not historically been ethnically diverse. There is the challenge of meal planning to accommodate all tastes and textures and overcoming social barriers that are further complicated by the inability for different language groups to communicate fluently with one another.

Often, these challenges have been addressed by serving ethnic meals at each site and having ethnic meal sites.

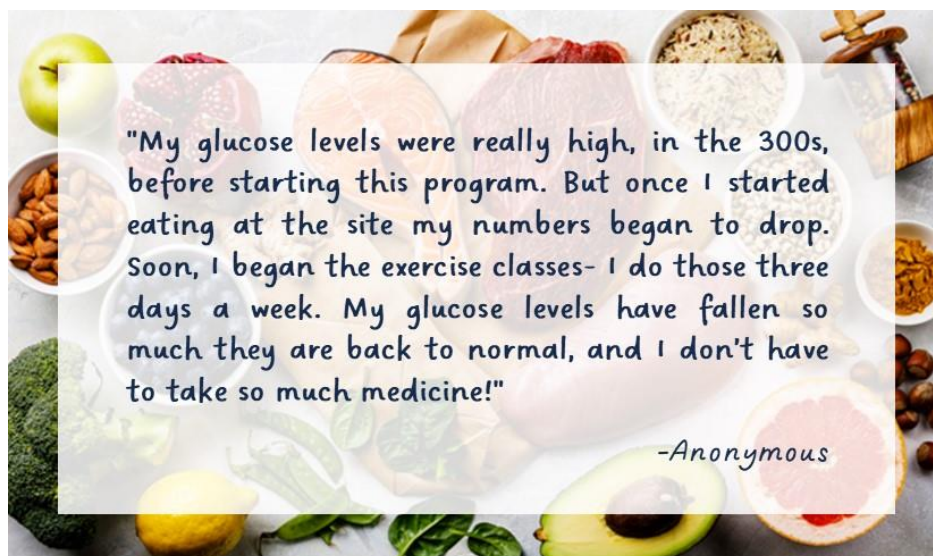
While federal pandemic relief funds were plentiful from 2020 – 2022, funding is expected to return to normal levels in 2024 and 2025. This places a greater need on senior nutrition providers to fundraise, grant-write, and find alternative funding sources. As of mid-2023, home-delivered meals are being served at slightly higher rates than pre-pandemic, while congregate meals are being served at slightly lower rates than pre-pandemic.

As HD meals serves the most vulnerable population, ALTC has made this a priority. The delivery of HD meals is much more costly than congregate meals due to transportation costs and the limited numbers of volunteers to deliver meals. Providers indicate that individuals receiving home delivered meals donate at a much lower rate than for Congregate Meals, thereby reducing the number of meals that may be served. Along with the additional funding received via the federal Coronavirus Aid, Relief, and Economic Security (CARES), and American Rescue Plan (ARP) Acts, the Washington State legislature provided \$6 million in Hunger Relief funds for the AAAs nutrition service programs in the last three months of state fiscal year 2023. This however is not long term funding. ALTC continues utilizing Medicaid Alternative Care (MAC) and



Tailored Supports for Older Adults (TSOA) funds to serve HD meals to newly eligible persons throughout our PSA.

Nutrition providers are making efforts to educate seniors on nutritional health and physical activity, through means such as monthly newsletters, information and videos posted on social media, individualized nutrition counseling as needed, and more. Most senior centers hosting congregate meals offer some kind of physical activity session once or twice a week. At a Yakima meal site, the nutrition provider not only offers congregate meals to participants, but also has an evidence-based exercise class, EnhanceFitness (EF) at the same site. They have higher meal attendance on EF class days with an average of 20 attendees at the meal site and 10-15 persons participating in the EF exercise class. The participants have enjoyed the class with one sharing his experience:



With the ending of the emergency proclamation, nutrition services have returned to congregate services. As of mid-2023, all contractors again offer congregate dining, with only Benton and Franklin Counties offering pick-up meals at some sites. Seniors have been relatively slow to return to in-person meal services. While some Congregate sites have done well, many have struggled since reopening. Congregate meal service is vital to reducing senior isolation. Nutrition programs cannot provide adequate service without a robust volunteer system. It has been difficult to recruit and retain volunteers to assist with delivering HDMs.

Nutrition contractors have served meals with no gaps during post COVID-19.

## **Issue: Transportation Services**

The eight counties in ALTC's PSA are for the most part vast and rural. ALTC contracts for transportation services in their PSA communities that have limited or no public transportation available. Services are provided for seniors sixty years of age and older, who have no car, are unable to drive, cannot afford to drive and public transportation is not available or accessible. Persons with disabilities access the same service via other funding sources.

Transportation is a critical part of accessing services that maintain health and wellbeing. Seniors, especially those who are rurally isolated, need rides to buy groceries, clothing, attend medical appointments, meal sites or simply go to a social gathering.

What may seem like simple tasks of daily living to the able person can become major challenges when seniors have lost their ability to maneuver a vehicle safely in urban and rural areas where distance, weather and traffic are factors.

Benton, Franklin, Walla Walla, and Asotin counties are four of the eight counties that enjoy a Public Transportation Benefit Area (PTBA). Garfield County Transportation Authority is a countywide transportation system. Most community residents are opposed to a public transportation system because of the additional local taxes needed to fund such a service. The city of Yakima has a transit system that operates within the city limits and also serves the Selah area. Columbia County Public Transportation serves the communities of Dayton, Waitsburg, and Dixie with rides into Walla Walla.

Lack of awareness of and support for public transportation hinders the development of a service needed for the increasing number of seniors who remain in their communities without adequate transportation.

### **Contracted Transportation Services:**

The provision of contracted transportation service is provided by HopeSource in Kittitas County, People For People in Yakima County, and InterLink in Asotin County.

In 2022, collectively the transportation contractors operated with buses/vans at an average of 11,770 boards per month and they served a total of 410 unduplicated persons. Of those served, 33.7% were low-income, 55.1% were over the age of 75, and 44.2% were living alone.

The contractors transport seniors to meal sites, medical facilities, grocery stores, senior centers and other facilities that provide services to seniors. Some of these other services available to seniors are falls prevention exercise programs such as EnhanceFitness and SAILS, hospital-based programs for Diabetes Self-Management, and Life Transitions Intensive Outpatient Program intended for older adults that focuses on restoring daily functioning and improving quality of life. The contractors make efforts to continue the service via applications for state, federal and county funds.

- ALTC will continue to support contractor efforts to have a volunteer fair to find volunteers and other individuals to help with the Senior Transportation Program.
- Support community education of the transportation contractor's ability to provide services to community evidence-based programs and services that provide for healthy aging to include Memory Cafés and exercise classes.

ALTC transportation services have limited funding and therefore cannot meet all of the needs. These providers do their best to coordinate transportation services and augment budgets with other transportation dollars beyond ALTC funds. Additional funding has been requested and obtained for Rural & Special Needs Public Transportation Programs through Federal Transit Administration (FTA) 5310 Elderly & Disabled Transportation, FTA 5311 Rural Public Transportation, State Rural Mobility and State Para transit/Special Needs Grants.

With the lack of a PTBA in Kittitas, Yakima, and Garfield counties ALTC provides significant funding for transportation as compared to the AAAs in urban areas where public transportation options are more readily available.

Requests for Transportation to non-medical services are on the rise for seniors who demand to keep "in touch" with their communities. Non-medical services include transportation to religious services, exercise sessions and social activities to avoid isolation. Rural towns in ALTC's service area have limited or no transportation options due to lack of funding. Pahto Public Passage provides transportation services to all persons living on the Yakama Reservation. The system coordinates with People For People Community Connector to connect folks with a ride from and to the Yakama Reservation.

With the limited funding resources in Washington State, agencies are continuing to experience funding shortfalls. Volunteers are a major resource for transporting seniors

who are unable to utilize existing transportation or where no transportation services are available.

With that thought in mind, Yakima has formed a Mobility Public Access to Countywide Transportation (MPACT) coalition whose goal is to coordinate transportation services and develop intercity routes in the community. The transportation virtual meetings take place periodically in Yakima.

ALTC partnered with People for People (PFP) Valley Shuttle Steering Committee which worked towards improving transportation in the rural areas of lower Yakima County, specifically Sunnyside, Grandview, and Mabton. These areas historically had limited transportation services and the steering committee worked with PFP to maximize transportation benefits in this area. These transportation services now benefit all people in this rural area that includes a high population of low-income minority individuals, limited English speaking people, older adults, and people under age 60 with disabilities. It is now referred to as the Mid-Valley Shuttle and is running as designed with ridership close to pre-pandemic levels.

During the COVID-19 pandemic and closures of businesses, transportation contractors were unable to transport participants to evidence-based exercise programs, Memory Cafés and other needed services. Contracted transportation service in Yakima & Asotin County shifted to delivering groceries and essential medications to seniors in need. Upon request, transportation contractors provided rides for seniors to vaccination sites. However, bus ridership was reduced by 50% for social distancing.

Now that pandemic measures and the Public Health Emergency have ended, contractors have fully reopened transportation for seniors to needed services. Contractors are no longer delivering groceries and essential medications. Overall ridership levels have been slow to rebound but matched pre-pandemic levels for the first time in early 2023.

## **ISSUE: Legal Services**

The legal assistance service program targets seniors who are 60 years of age and older, low income, and more likely to live alone, be minorities and be limited or non-English speaking. Seniors are served by providers who have multi-cultural, bilingual staff who can meet with the seniors either in their homes or at accessible office locations. Legal service providers publicize the program. They explain the program to other service providers and how referrals can be made.

The program intent is to foster cost-effective high quality service that is integrated in the aging services network, is accessible throughout the planning service area, and develops and maximizes the use of other resources.

Coordinated Legal Education, Advice and Referral for Senior's (CLEAR \*Sr) is the primary gateway for seniors seeking legal help. It is available, toll-free, throughout the state. Northwest Justice Project also has access to regional volunteer lawyers and Pro Bono programs operated by county Bar Associations to assist with cases.

- ALTC will continue to support NJP to provide community presentations on elder legal issues.

**Contracted Legal Services:**

ALTC contracts with Northwest Justice Project (NJP) for legal services in ALTC's eight county area. In our PSA, NJP's main office is located in Yakima with satellite offices in Kennewick and Walla Walla.

Legal assistance services provide access to the system of justice by offering representation by the legal service provider who acts as an advocate for the socially and economically needy older individual experiencing legal problems. Issues are prioritized to reflect local needs. As resources are limited, clients with problems in the following areas receive services: income maintenance, health care, long term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse & neglect, age discrimination, and other related matters.

Post-Covid, NJP opened its doors to the public in late February 2023 and is also providing services via telephone to accommodate clients as needed. If clients prefer phone intakes/consults, etc., NJP can accommodate that. They provide informational presentations in person and/or online depending on the preference.

Having this legal aid available to assist our AAA's vulnerable senior population is critical for seniors calling for help when they are in imminent risk of losing their homes, are victims of fraud, or have been treated unjustly.

NJP continues to provide the civil legal services previously provided pre-COVID in the areas of public benefits, family law, consumer law and housing law. From the end of 2021 to mid-2023, NJP had a COVID team consisting of two outreach workers and an attorney whose exclusive focus was serving clients who had legal issues related directly to hospitalizations or deaths due to COVID. They no longer have that specialized focus

due to funding running out. However, folks with COVID-related legal issues can still receive legal assistance by contacting the general CLEAR line.

**SE WA ALTC will continue to:**

- Support nutrition contractors to effectively operate and serve home-delivered and congregate meals without losing capacity.
- Support contractor efforts to have a volunteer fair to find volunteers and other individuals to help with the Senior Nutrition home delivered meals and Senior Transportation Program.
- Support community education of the transportation contractor's ability to provide services to community evidence-based programs and services that provide for healthy aging to include Memory Cafés.
- Support the Senior Legal Services Provider to provide community presentations on elder legal issues.

**What we've accomplished:**

- ALTC has supported Nutrition, Transportation and Legal contractors in maintaining services through letters of reference.
- ALTC has been able to fund an expansion of Home-Delivered Meal service to underserved populations through one-time state proviso funding for state fiscal year 2023.
- ALTC continues to participate in the MPACT (Mobility Public Access to Countywide Transportation) group in Yakima County which works towards improving transportation for all people in Yakima County.
- ALTC participated in the South Yakima County Steering Committee with PFP to enhance transportation in the Grandview, Sunnyside and Mabton areas of Yakima County where transportation has historically been limited. This transportation service is the Mid-Valley Shuttle and is running as designed.
- ALTC staff and Advisory Council members attend the Washington State Senior Lobby Legislative Day to advocate for senior programs.

**Challenges/Barriers:**

- Since the Covid pandemic, seniors have been relatively slow to return to in-person meal services. While some Congregate sites have done well, many have struggled since reopening. Congregate meal service is vital to reducing senior isolation.

- Nutrition programs cannot provide adequate service without a robust volunteer system. Volunteers to assist with delivering HDM are difficult to recruit and retain.
- Transportation between cities and counties is minimal and limits the ability of persons to get to medical appointments and other services which may not be available in a rural setting.
- Legal Aid has limited funding and there are often long wait times to access legal services.
- The American Rescue Act Funds (ARPA) will be expended out in 2023 for SE WA ALTC, leaving funding levels short in 2024 and beyond. This in conjunction with inflation that has been significant for goods and services, coupled with labor shortages that have driven the cost of wages and benefits higher, is a trifecta of challenges for the historic Older American's Act core services. The Older American Act funds have been relatively stagnant neither keeping pace with the growing aging population nor inflationary costs.

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<sup>i</sup> Healthy People 2030, U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. Retrieved [date graphic was accessed], from <https://health.gov/healthypeople/objectives-and-data/social-determinants-health>