

Minnesota River Area Agency on Aging[®], Inc.



2013

Annual Report

The Minnesota River Area Agency on Aging[®], Inc. is the gateway to resources for older adults, caregivers and service providers in the twenty-seven counties of southwest Minnesota.

LETTER FROM THE CHAIR AND EXECUTIVE DIRECTOR

It is with great pleasure that we present the Minnesota River Area Agency on Aging[®], Inc.'s (MNRAAA) 2013 annual report. It includes highlights of MNRAAA's three core areas (information and assistance, systems development, administration), a financial summary and information about staff hired during 2013.

Our annual report also illustrates some of the ways MNRAAA was a "gateway to resources for older adults, caregivers and service providers in the twenty-seven counties of southwest Minnesota". As you will read, 2013 was a year of growth and new opportunities.

On behalf of the Board of Directors, we would like to thank the volunteers, staff and numerous partners who have worked with us to make the Southwest Planning and Service Area a good place to grow up and grow old.

Respectfully yours,

DuWayne Underthun
Chair, Board of Directors



Linda Giersdorf
Executive Director



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INFORMATION AND ASSISTANCE HIGHLIGHTS

Pre-Admission Screening

During the 2013 legislative session, changes were made to the Long Term Care Consultation statute (Minnesota Statute, Section 256B.0911) and the Minnesota Board on Aging statute (Minnesota Statute, Section 256.975). These changes redesigned and refinanced the federally mandated Pre-Admission Screening (PAS) process.

PAS changes included shifting the role from the counties to the Senior LinkAge Line® as well as removing an exemption for individuals admitted to a nursing facility for less than 30 days. The changes also included moving this telephone and fax-based process to an online referral page which is located at www.mnaging.org.

On November 1, 2013 the Senior LinkAge Line® began processing PAS referrals. Area Agencies on Aging were unable to get new staff hired in time to begin this work. Therefore until new staff could be hired and trained, it was necessary for current staff to absorb the workload.

In December, MNRAAA hired and trained 2 full-time staff, Emily Roering and Denise Rahn, to conduct pre-admission screening for the 27 county service area. In addition, 2 full-time staff, Sherry Orth and Kaylee Kamm, was hired at the request of the Minnesota Board on Aging. Sherry and Kaylee have state-wide quality assurance responsibilities. MNRAAA also hired a part-time administrative assistant, Anne Huckaby, to help with data entry duties.

Seasonal Employees

The Senior LinkAge Line® continues to be instrumental in helping to provide comprehensive non-biased counseling to Medicare beneficiaries. This is particularly important each year during the Medicare Open Enrollment Period (October 15 – December 7). Last fall the Senior LinkAge Line® contact centers once again hired seasonal employees to handle Medicare-related calls during Open Enrollment.

MNRAAA hired five part-time temporary seasonal employees to work in the Mankato office. They received extensive training on both Medicare and Medical Assistance, the internet tools necessary for documentation, and the protocols for answering calls through the Senior LinkAge Line® system. They started on the Senior LinkAge Line® on October 1st and concluded their service during the third week of December.

The addition of the seasonal staff across the state was a successful means of being able to handle the increased call volume and helped to decrease the call wait time for consumers. Four of the MNRAAA seasonal staff will continue to stay on as volunteers. They have also expressed an interest in returning as seasonal staff during the 2015 Medicare Open Enrollment Period.

SYSTEM DEVELOPMENT HIGHLIGHTS

Evidence-Based Programs Have Positive Impact on Older Adults

On the first day of the Living Well with Chronic Conditions class, Arlene cautiously entered the room. Her head was down and she had a tight grasp on her walker as she moved slowly toward the table while carefully maneuvering her assistive device into the room. She “parked” her walker and then hesitantly shuffled to a chair.

As the session began, co-leaders (Julie Hoeft, Physical Therapist at the Madelia Community Hospital and Clinic and Gail Gilman-Waldner, MNRAAA Program Developer) explained that at the end of the day’s class and each of the following five weeks, class participants would identify and work on an Action Plan between classes. When it was Arlene’s chance to share her Action Plan she dejectedly explained that she didn’t think she had the ability to complete an Action Plan because of her multiple chronic health conditions. The co-leaders asked Arlene what was the one thing she wished she could do. Without hesitation Arlene exclaimed, “The stairs! I so wish I could do the stairs!” Arlene was given lots of encouragement by the co-leaders and participants to try to step up just one stair as her Action Plan for the week. Arlene hesitantly said, “I’ll try.”

When the group met for the second class, Arlene was one of the first to arrive. The class began with participants giving an update on their Action Plan from the past week. Arlene quickly volunteered to be the first to share her plan. She bashfully explained that she didn’t think she could do any stairs but with a big smile on her face Arlene said, “In fact, I was able to do TWO stairs this past week.” Each week after that Arlene decided to work on walking more stairs as her Action Plan. And every week after that she excitedly reported 4, 5, 6, 7 and then 8 stairs on the sixth week of class. One of the participants noted Arlene’s accomplishment and asked her why she didn’t do more than eight stairs to which Arlene replied, “Because I had made it to the top so all I could do was walk down the steps and then up again!” This is just one great example of the many successes shown by the participants this past year.

MNRAAA sponsors the Stanford Chronic Disease Self-Management Program (CDSMP) – Living Well with Chronic Conditions and Maine’s The Matter of Balance (MOB) Program. Both programs are evidence-based. CDSMP helps people with chronic conditions (such as diabetes, arthritis, heart disease, chronic pain, anxiety) take charge of their life. The program consists of a two-and-one-half hour class held once per week for six weeks. The classes are led by two trained leaders.

MOB helps people reduce their fear of falling; increase self-management skills in preventing falls, including goal setting and problem solving; and increasing balance, flexibility and lower body strength. This program consists of a two hour class held once per week for eight weeks. MOB is also led by two trained leaders.

MNRAAA has four staff trained as CDSMP Master Trainers and two staff trained as MOB Master Trainers. MNRAAA staff conducted:

- 4 CDSMP Update Leader Trainings (8 hours) for 14 current leaders;
- 1 CDSMP Leader Training (4, 8 hour days) for 10 new leaders; and
- 1 MOB Leader Training (12 hours) for 4 new leaders.

MNRAAA staff and its trained Leaders conducted:

- 3 CDSMP Community Classes, completed by 23 participants; and
- 8 MOB Community Classes, completed by 75 participants.

The value of CDSMP and MOB classes is significant. Classes have been shown to prevent costly falls and to equip older adults with skills to live safely and independently.

Veterans Directed Home and Community Based Services

In August 2010, MNRAAA launched the Veterans Directed Home and Community Based Services program (VD-HCBS) in a collaborative partnership with the Sioux Falls VA Health Care System. VD-HCBS provides veterans of all ages the opportunity to receive home and community based services in a consumer-directed fashion. This enables them to avoid nursing home placement and to continue to live in their own homes and communities. Under the VD-HCBS program, the veteran and their family caregiver manage a flexible budget; decide for themselves what mix of services will best meet their personal care needs; hire their own personal care aides, including family or neighbors; and purchase items or services to live independently in the community.

Over the past three-and-one-half years, MNRAAA has served 25 veterans between the ages of 59 and 94. It continues to maintain the allowable client base of 15 clients per year. The first veteran who entered the program in 2010 was diagnosed with Amyotrophic Lateral Sclerosis, otherwise known as Lou Gehrig's disease. He is now 71 years old and credits VD-HCBS with his ability to continue living independently in his own home. VD-HCBS is currently available in 11 Minnesota counties served by the Sioux Falls VA Health Care System. Those counties include Cottonwood, Jackson, Lac qui Parle, Lincoln, Lyon, Martin, Murray, Nobles, Pipestone, Rock and Yellow Medicine. MNRAAA continues to seek opportunities to work with the VA Healthcare Systems in Minnesota in order to make these services available to all eligible veterans throughout MNRAAA's service area.

Willmar ACT on Alzheimer's Group

In 2009, a small group of Willmar area providers realized there was a need for community awareness, education, and support related to dementia and Alzheimer's disease. They took action, forming the West Central Dementia Awareness Network (WCDAN). Since then, they have held educational events and been a model for other communities.

As a pilot community for the ACT on Alzheimer's® Dementia Capable Toolkit, the WCDAN was excited to collaborate in creating a toolkit that could be replicated in other communities. Team members include representatives who work in long-term care, specialized memory care, medical clinics, assisted living facilities and non-medical home care as well as Lutheran Social Service, the Minnesota River Agency on Aging®, Inc., faith communities, Living At Home Block Nurse Program, adult day services, law enforcement and retail.

Latest happenings

Since forming, the team has hosted six educational events and assisted the Alzheimer's Association in providing a series of five awareness opportunities. They have synthesized their toolkit assessment results and will determine the next action steps. In 2013, the Willmar Area ACT on Alzheimer's® group applied for Pilot Project funding to implement the ACT on Alzheimer's® Toolkit in 2014.

The excitement of ACTing!

In recognizing their work since 2009, the team has been empowered by their learning opportunities and their common desire to impact the community by ensuring that families and caregivers do not have to take this journey alone. The team is proud that, in Willmar, a small group of people is providing the necessary spark to make a difference and impact an entire community.

Source: ACT on Alzheimer's Website <http://actonalz.org>

Virtual Dementia Tours Offered in Southwest Minnesota

When a loved one is diagnosed with dementia, it affects everyone in the family, friends and the community. The Alzheimer's Association states that Alzheimer's is being diagnosed every 69 seconds in the U.S. alone, and 7 out of 10 Alzheimer's patients live at home where family and friends provide most of the care. Yet studies show that these caregivers are not formally trained to provide the support needed for those living with dementia. The purpose of the Virtual Dementia Tour® (VDT) for Individuals is to help families better identify with their loved one's day-to-day struggles, thereby improving their ability to provide care. Learning to create a positive environment for those with Dementia can only come from attempting to walk in their shoes. Created by P. K. Beville, a specialist in Geriatrics, this valuable, easy to follow experiential kit is designed to instill hope in individual and family caregivers, providing them with a tool to identify with and better understand loved one's behaviors and needs.

MNRAAA has collaborated with many organizations to bring this educational tool to southwest Minnesota. MNRAAA works with other organizations who have VDT kits so that more people can be served. For each VDT kit, approximately 8-12 people can be served in a one hour period. There is a curriculum and training video for those assisting with implementation. There are a number of professionals as well as volunteers trained in southwest Minnesota, and several Dementia Awareness Networks are involved in offering VDT tours. MNRAAA staff are typically asked to provide informational materials to participants on Senior LinkAge Line®, MinnesotaHelp Network, memory loss, driving issues, etc.

If you have questions, please contact a program development staff member.

ADMINISTRATION HIGHLIGHTS

Fund Distribution

MNRAAA distributes federal and state resources to fund core services for older adults and family caregivers.

Title III-B/Supportive Services: \$190,703

Provider / Project	Service Area
Southern Minnesota Regional Legal Services Legal Advocacy for Older Americans Project	27 Counties of MNRAAA
Meeker Council on Aging Volunteer Driver Program	Meeker County
Western Mental Health Center One to One Program	Lyon, Murray, Redwood Counties
RSVP of Southwest Minnesota RSVP Chore Services	Cottonwood County
Kandiyohi Area Transit K.A.T. Senior Transportation Program	Kandiyohi County
Interfaith Caregivers – FIA in Faribault County Homemaker/Chore Program	Faribault County
City of Montevideo Montevideo Chore Service	Chippewa County
Yellow Medicine East Community Education Granite Falls Intergenerational Chore Service	Chippewa, Yellow Medicine Counties
VINE Faith in Action Caring Connection	Blue Earth, Nicollet Counties
Shetek Home Care Shetek Home Care Homemaker Program	Cottonwood, Lyon, Murray, Redwood Counties
RSVP of Southwest Minnesota RSVP Telephone Reassurance	Cottonwood, Lincoln, Murray, Nobles, Redwood, Rock Counties

Title III-C 1 & 2/Nutrition Services: \$2,131,961 (Includes NSIP and State funds)

Provider / Project	Service Area
Lutheran Social Service of Minnesota LSS Congregate and Home Delivered Meals Programs	Blue Earth, Brown, Cottonwood, Faribault, Jackson, Kandiyohi, Le Sueur, Lincoln, Lyon, Martin, McLeod, Meeker, Murray, Nicollet, Nobles, Pipestone, Redwood, Renville, Rock, Sibley, Waseca, Watonwan Counties
Prairie Five CAC, Inc. Prairie Five Congregate and Home Delivered Meals Programs	Big Stone, Chippewa, Lac qui Parle, Swift, Yellow Medicine Counties

Title III-D/Health Promotion and Disease Prevention Services: \$24,650

Provider / Project	Service Area
VINE Faith in Action VINE Medication Management in Region 9	Blue Earth, Brown, Faribault, Le Sueur, Martin, Nicollet, Sibley, Waseca, Watonwan Counties
RSVP of Southwest Minnesota CDSMP Co-Leader Training	Cottonwood, Lincoln, Murray, Nobles, Redwood, Rock Counties

Title III-E/National Family Caregiver Support Services: \$184,991

Provider / Project	Service Area
RSVP of Southwest Minnesota RSVP Respite and Counseling	Cottonwood, Lincoln, Murray, Nobles, Redwood, Rock Counties
Lutheran Social Service of Minnesota LSS Caregiver Support and Respite	Kandiyohi, McLeod, Meeker, Renville Counties
Prairie Five CAC, Inc. CARE: Caregiver and Resource Education	Big Stone, Chippewa, Lac qui Parle, Swift, Yellow Medicine Counties
Interfaith Caregivers – FIA in Faribault County Caregiver Support and Respite Program	Faribault, Martin Counties
Chippewa County – Montevideo Hospital CCMH Dementia Support	Chippewa, Yellow Medicine Counties
Western Mental Health Center One to One Transition Program	Lyon County
Wellspring Faith in Action Family Caregiver Project	Watonwan County
Consumer Directions, Inc. Title III Self-Directed Services	Kandiyohi, McLeod, Meeker, Renville Counties

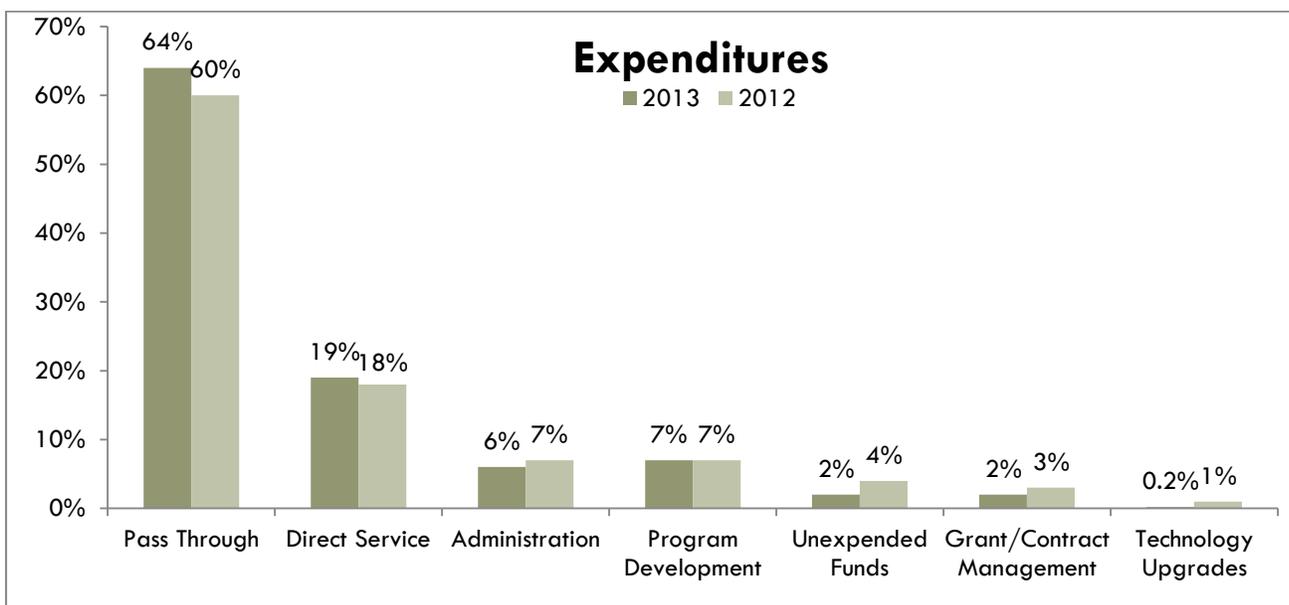
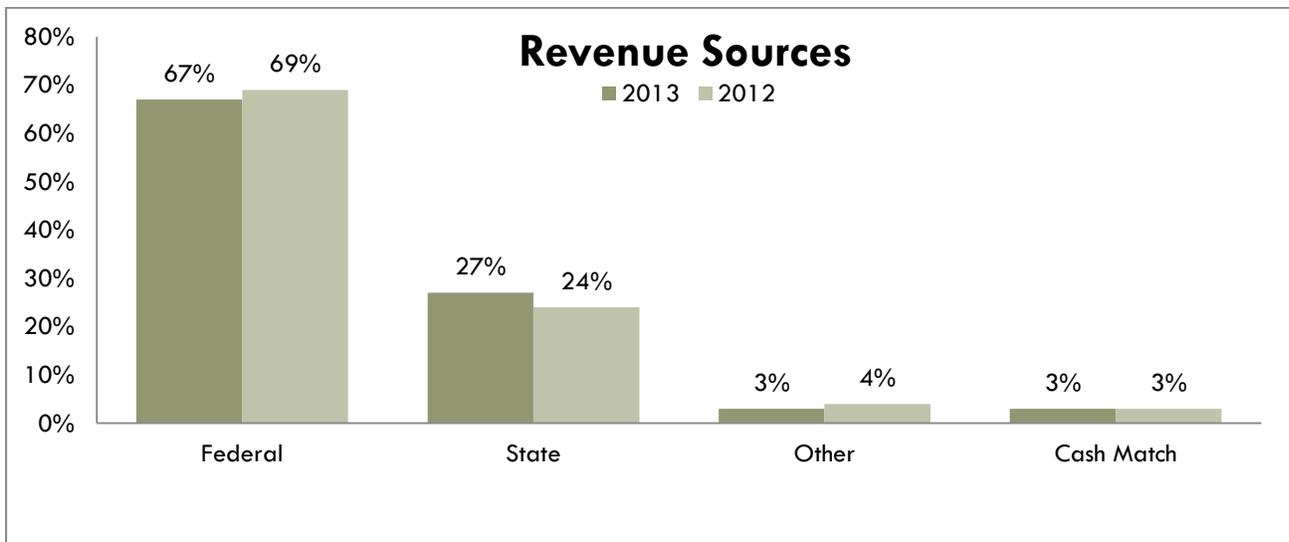
Revenues and Expenditures

MNRAAA saw an increase in State revenues and direct service expenditures largely due to the implementation of Pre-Admission Screening, highlighted on page 2 of this report.

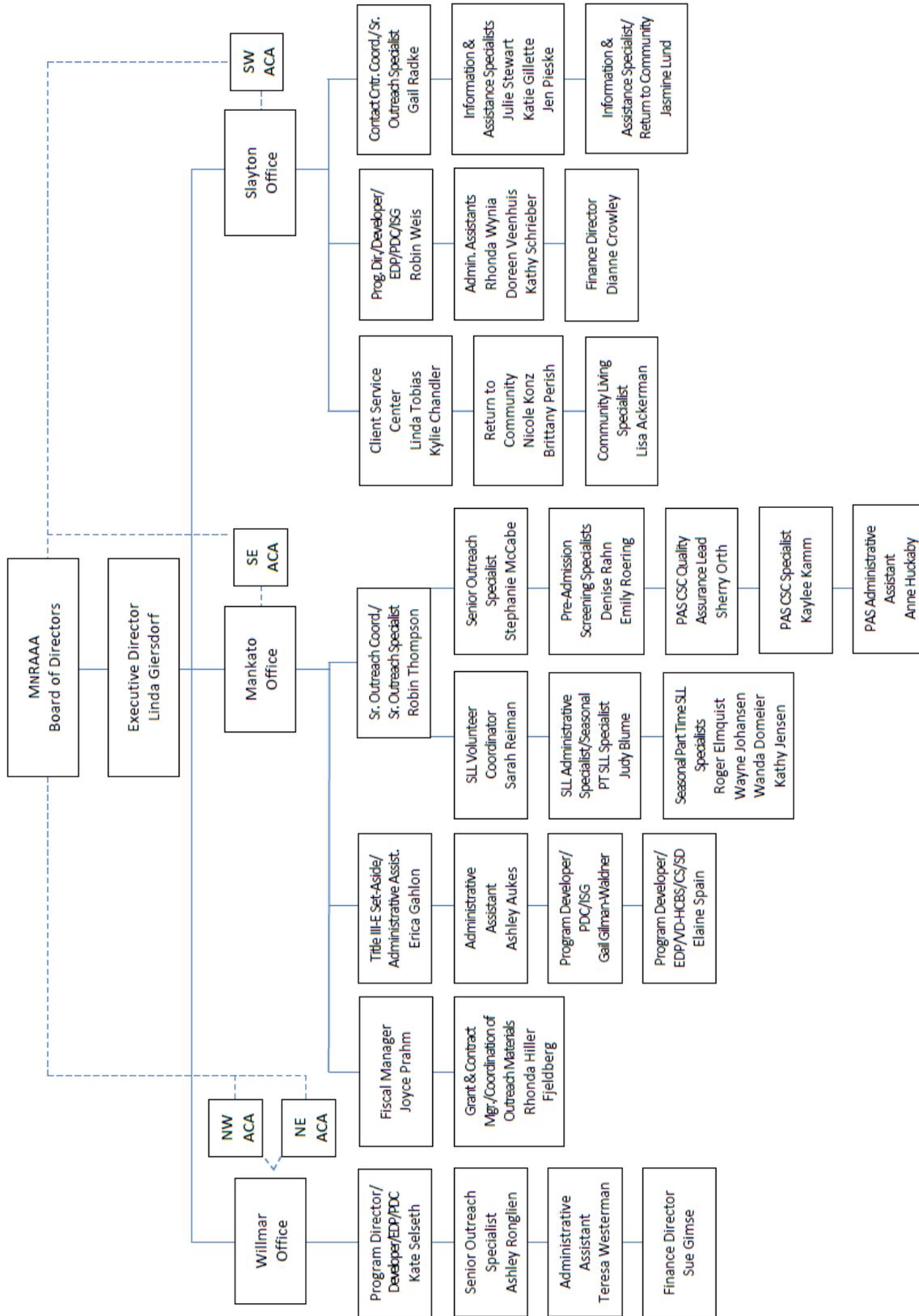
Due to sequestration, MNRAAA saw a reduction of over \$153,000 in federal funds.

Increased activities in the Veterans Transportation and Community Living Initiative, Community Service/Services Development grant and grant management programs contributed to increased pass through expenditures.

MNRAAA continues to closely monitor activities at the State and Federal level and advocate on behalf of the older adults and caregivers we serve.



ORGANIZATION CHART



December 31, 2013

NEW STAFF

Anne Huckaby joined MNRAAA in December as a part time Administrative Assistant for the Pre-Admission Screening staff. Originally from Coburg Germany, Anne moved to the United States in 1991. Anne is married and has three wonderful children, two adult sons and a daughter. In 2012 Anne came to Mankato to join her husband (an officer with the US Military) at his new duty station. Anne loves to spend time with her family and the great outdoors.

Ashley Aukes joined MNRAAA in April as an Administrative Assistant. She assists in the daily functions of the office, as well as promoting social media. Prior to joining MNRAAA she worked in the medical and photography fields. In her free time Ashley enjoys spending time with family, hunting, and photography.

Brittany Perish joined MNRAAA in April as a MinnesotaHelp® Network Return to Community Specialist. She conducts 90-day assessments for individuals who have been discharged to the community from a nursing home. With the individual's consent, she provides phone-based follow-up for up to five years, including phone-based long-term care options counseling and resource information to empower the consumer to remain as independent as possible. She works with individuals throughout Minnesota.

Denise Rahn joined MNRAAA in December as a Senior LinkAge Line® Pre-Admission Screening and Resident Review Specialist. She has a Bachelor of Science degree in Allied Health Science with emphasis in the areas of Psychology and Alcohol and Drug Studies. She has experience in working as a Social Worker serving populations ranging from children to elderly individuals, and specializing in services to those with mental illness and other disabilities. She is responsible for conducting Pre-Admission Screenings, including OBRA Level I, Medical Assistance level of care and follow-up for short-term nursing home stays. Denise lives in Fairmont with her husband and 2 children.

Emily Roering joined MNRAAA in December as a Senior LinkAge Line® Pre-Admission Screening and Resident Review Specialist. She conducts Pre-Admission Screenings, including OBRA Level I, Medical Assistance level of care and follow up for short term nursing home stays. Emily is a graduate of the College of St. Benedict with a degree in Social Work. Emily lives in Mankato with her husband and 4 children.

Kaylee Kamm joined MNRAAA in December as a Senior LinkAge Line® First Contact Client Service Center Specialist. She graduated from Minnesota State University, Mankato with a Bachelor of Science degree in Social Work. On a statewide basis, she is responsible for ensuring that the coordination of Pre-Admission Screening functions are conducted in an accurate and timely manner according to both state and federal regulations.

Sherry Orth joined MNRAAA in November as the Senior LinkAge Line® (SLL) Pre-Admission Screening (PAS) Quality Assurance Lead. She is a Registered Nurse and is available to provide information, clarification and support on a statewide basis. She provides consultation to PAS Specialists related to diagnosis coding, case-mix classification and MMIS entry. She provides the final approval for OBRA Level II screening referrals. As set forth by the Minnesota Board on Aging, she provides guidance to promote adherence to the quality of statewide protocols and standards mandated by state and federal regulations.

OFFICE LOCATIONS

2401 Broadway Avenue, Suite 2
Slayton, MN 56172
p: 507.836.8547
e: srlinkage@swrdc.org

10 Civic Center Plaza, Suite 3
Mankato, MN 56001
p: 507.387.5643
e: lindag@rnc.org

333 SW Sixth Street, Suite 2
Willmar, MN 56201
p: 320.235.8504
e: mmrdc@mmrdc.org

www.mnraaa.org



Service Area

Big Stone, Blue Earth, Brown, Chippewa, Cottonwood, Faribault, Jackson, Kandiyohi, Lac qui Parle, Le Sueur, Lincoln, Lyon, Martin, McLeod, Meeker, Murray, Nicollet, Nobles, Pipestone, Redwood, Renville, Rock, Sibley, Swift, Waseca, Watonwan and Yellow Medicine