



Commonwealth Council on Aging

2024 Annual Report with 2025 Legislative Recommendations

Commonwealth of Virginia
Richmond
September 30, 2024



September 30, 2024

Dear Governor Glenn Youngkin,
Members of the General Assembly, and
Members of the Public:

Commonwealth Council on Aging

Members:

- Carla Hesseltine, Chair*
- Tresserlyn L. Kelly, Vice-Chair*
- Andrea Buck, MD, JD*
- Jo-Ann Chase*
- Amy Duncan*
- Tracey Gendron, MS, PhD*
- Hon. Christopher T. Head*
- Hon. Patrick A. Hope*
- Cleopatra Kitt, PhD*
- Joshua L. Myers*
- Ellen M. Nau*
- Yolanda Stevens, PhD*
- Paige H. Wilson*
- Roland Winston*

Ex-Officio Members:

- Hon. Janet Vestal Kelly*
- Kathryn Hayfield*
- Tara Ragland*
- Courtney Richter, MSW*
- Ron D. Boyd*

*Virginia Department for Aging and
Rehabilitative Services*

Division for Aging Services

*1610 Forest Avenue
Suite 100
Henrico, Virginia 23229*

Phone: (804) 662-9333

Fax: (804) 662-7035

Email: dars@dars.virginia.gov

Pursuant to § 51.5-128 of the Code of Virginia, the Commonwealth Council on Aging (“Council”) submits its annual electronic report regarding the activities and recommendations of the Council.

The Council is charged with promoting an efficient, coordinated approach by state government to meet the needs of older Virginians. With approximately 1.9 million adults in Virginia who are over 60 years old, the Council commends the Department for Aging and Rehabilitative Services (DARS), the 25 local Area Agencies on Aging, and the array of public and private service providers, all of which provide crucial support to older Virginians and their caregivers.

I am happy to share that the Council had a busy and exciting year.

This summer, the Council was pleased to welcome several new members during the transition to a new structure that aligns with Chapter 583 of the 2023 Acts of Assembly. The Honorables Christopher T. Head and Patrick A. Hope were appointed to the Council by the Senate Committee on Rules and House Speaker, respectively. In addition, the Executive Director of the Virginia Center on Aging, currently Tracey Gendron, MS, Ph.D., and two at-large citizen members (Roland Winston for his second term and Yolanda Stevens, Ph.D. for her first term) also joined the Council.

DARS, in support of the Council and with funding provided in the 2024 Appropriation Act, hired the Council’s first Executive Director, Sara Stowe, in September. As Executive Director, Sara Stowe will provide expanded staff support to the Council and serve as the Council’s Secretary.

In 2023, the Council also received its first grant from the Virginia Center on Aging (VCOA) Geriatric Training and Education (GTE) Program and has been hard at work implementing this one-year project. Focused on increasing knowledge about food insecurity, malnutrition, and the programs available to them, the Council’s GTE grant created five microlearning videos on the topic. The grant implementation was very successful, with the videos having been collectively viewed 815 times. The Council and DARS obtained 114 evaluation surveys from individuals viewing the videos. Among these participants, 87% agreed that their understanding of malnutrition and food security among older adults increased, 89% agreed that their knowledge of available programs increased, and 90% responded that they were likely to refer older adults



Commonwealth Council on Aging

Members:

- Carla Hesselstine, Chair
- Tresserlyn L. Kelly, Vice-Chair
- Andrea Buck, MD, JD
- Jo-Ann Chase
- Amy Duncan
- Tracey Gendron, MS, PhD
- Hon. Christopher T. Head
- Hon. Patrick A. Hope
- Cleopatra Kitt, PhD
- Joshua L. Myers
- Ellen M. Nau
- Yolanda Stevens, PhD
- Paige H. Wilson
- Roland Winston

Ex-Officio Members:

- Hon. Janet Vestal Kelly
- Kathryn Hayfield
- Tara Ragland
- Courtney Richter, MSW
- Ron D. Boyd

Virginia Department for Aging and Rehabilitative Services

Division for Aging Services

1610 Forest Avenue
Suite 100
Henrico, Virginia 23229

Phone: (804) 662-9333

Fax: (804) 662-7035

Email: dars@dars.virginia.gov

to these programs. More information about the grant can be found in this report.

For your consideration and as you look ahead to the upcoming General Assembly Session, the Council has prepared its 2025 Legislative Recommendations, which focus on three primary areas:

- A. Home and Community-Based Services (HCBS) –
 - 1. Increase Funding for HCBS Through Area Agencies on Aging
 - 2. State funds for Virginia Lifespan Respite Voucher Program
 - 3. Conduct a Study on the Feasibility of a Multisector Plan on Aging
- B. Long-Term Care Services –
 - 4. Replicating the RAFT Program in Other Areas of the Commonwealth
 - 5. Support Nursing Home Inspection and Enforcement Process
 - 6. Increase Nursing Home Personal Needs Allowance and/or Create a State-Based Tax Deduction or Credit for Donations of Personal Needs Items to For-Profit Nursing Homes
 - 7. Strengthen Nursing Home Transparency, Data, and Oversight
- C. Dementia Services –
 - 8. Expand Dementia Care Management to Underserved Areas of Virginia
 - 9. Provide State General Funds for the Ongoing Operations of the Virginia Memory Project

More information about the 2025 Legislative Recommendations can be found in this report.

Lastly, the Council was also pleased to celebrate its 2024 Best Practices Awards winners. With financial support from Dominion Energy and AARP Virginia, the Best Practices Awards honor model programs that improve the lives of older Virginians and support caregivers. This year’s winners highlight the importance of community connections and how arts and culture can create a sense of community and purpose. In addition to onsite recognition ceremonies, the Council partnered with DARS and the Virginia Association of Area Agencies on Aging (V4A) to showcase the winners via a live (and recorded) webinar on August 27, 2024.

The Council looks forward to partnering with policymakers in advocating for and supporting older Virginians. I have no doubt that the Council’s impact on the Commonwealth of Virginia will continue to grow with the support of the Executive Director and our new Council members. Together, we can make Virginia a great place for everyone to grow old.

Sincerely,

Carla Hesselstine, Chair

COMMONWEALTH COUNCIL ON AGING 2024 BEST PRACTICES AWARDS

Established in 2006, the Best Practices Awards recognize and encourage the replication of model programs, particularly those that foster aging in place, livable communities and home and community-based services. Sponsored by Dominion Energy since 2012, and with additional funding from AARP Virginia since 2023, the Council encourages the development of these innovative programs.

FIRST PLACE (\$5,500): The Opening Minds through Art Center at The Cultural Arts Center at Glen Allen

Developed through research at the Scripp's Gerontology Center at Miami University and reproduced across the country, Opening Minds through Art (OMA) is an award-winning, evidence-based, intergenerational art-making program for people with Alzheimer's disease and other dementias (PWD). The failure-free program provides opportunities for creative self-expression and social engagement for PWD, while providing volunteers with opportunities to improve their attitudes toward aging through weekly interaction with OMA participants. Originally designed to take place in care facilities, The Cultural Arts Center at Glen Allen (CACGA) has implemented a center-based program that also includes caregivers. CACGA's OMA Center is offered in 8-week sessions during which "Elder Artists" are paired with specially-trained volunteers who assist the Elder Artist in art-making projects that feature the OMA methodology and key principles. Through CACGA, this program is open to any family dealing with a dementia diagnosis and is offered free-of-charge to participants. Since starting the program in 2022, CACGA has trained over 125 volunteers and has had about 50 participants complete the program.

For more information about The OMA Center at CACGA, contact: Cindy Rinker, Education Coordinator, The Cultural Arts Center at Glen Allen, 2880 Mountain Rd., Glen Allen, VA 23060, Phone: 804-261-6205, Email Address: education@artsglenallen.com, and Website: www.artsglenallen.com.

SECOND PLACE AWARD (\$3,500): The Art, Leisure, and Recreation Program through Richmond Aging and Engaging

Richmond Aging and Engaging (RAE) provides intergenerational arts, leisure, and recreation activities to support the health, wellness, and quality of life of older adults living independently in low-income senior apartment buildings. Programming is provided on a weekly basis in the buildings where participants live. The programming is flexible and adaptable to meet the unique interests and needs of residents in each building served and is guided by feedback from participant advisory committees. Activities may include physical games (e.g., balloon pickleball, cornhole, bowling), crafting (e.g., crochet, weaving, clay sculpting, card-making), and social/cognitive games (e.g., charades, family feud, bingo, board games, cards). Additionally, the award-winning and evidence-based Opening Minds through Art (OMA) is implemented yearly at each site and concludes with a community art exhibition, with previous work even featured in statewide art exhibits. Local college students assist in leading the activities and engaging with participants. These intergenerational experiences foster social connectedness and promote a more vibrant and inclusive society. In a year, Richmond Aging and Engaging has served 46 residents across three buildings with the support of 49 college student volunteers. Richmond Aging and Engaging aims to expand to more buildings in 2024.

For more information about Richmond Aging and Engaging, contact: Jodi Winship, Executive Director, Richmond Aging and Engaging, Phone Number: (804) 482-1103, Email Address: jodi@agingandengaging.org, and Website: www.agingandengaging.org.

**COMMONWEALTH COUNCIL ON AGING
2024 BEST PRACTICES AWARDS (continued)**

THIRD PLACE AWARD (\$2,500): The Audio Accessibility and Inclusion Program through Virginia Voice, Inc.

Virginia Voice's Audio Accessibility and Inclusion Program focuses on providing access and inclusion for those with blindness and low vision to the same everyday community engagements their sighted peers enjoy. The Radio Reading Service features volunteer-led readings of print materials, such as local newspapers, national media, and topical programming on subjects such as pet care and gardening, via radio, smart speaker, and online streaming 24 hours per day, 7 days per week. The Live Audio Description (LAD) of events provide real-time audio descriptions of visual aspects that are key to the enjoyment and understanding of local arts performances, such as the theatre and ballet, as well as for community events. Through LAD, Virginia Voice partners with area museums to record audio descriptions of current exhibitions and with local businesses that need to provide audio described information for their employees and customers. Virginia Voice supports a community of 11,000 Central Virginians with blindness and low vision, 80% of whom are adults 65 and older with medical diagnoses that impact their vision who often experience isolation. Nearly 73% of our listeners say that Virginia Voice's services make them feel more connected to the Richmond metro community, and 81% say Virginia Voice helps to alleviate their social isolation.

For more information about Virginia Voice, contact: Yvonne Mastromano, Chief Executive Officer, Virginia Voice, Inc., Address: PO Box 15546, Richmond, VA 2322, Phone: 804.266.2477, Email Address: ymastromano@virginiavoice.org, and Website: <https://www.virginiavoice.org>.

The Council gave Honorable Mentions to the following organizations:

- **Arlington Neighborhood Village**
- **The AAA Rhythm Makers** (from Loudoun County Area Agency on Aging/Department of Parks, Recreation and Community Services)
- **Volunteer Driver Program** (from Southern Area Agency on Aging)

Webinar: 2024 Best Practices Awards: Advancing Innovation in Aging Programs

The Council, DARS, the Virginia Association of Area Agencies on Aging (V4A), Dominion Energy, and AARP Virginia joined together to celebrate the Council's 2024 Best Practices Award Winners. Held on August 27, 2024 from 1:00 pm to 2:00 pm, the webinar highlighted this year's amazing winners. Webinar attendees learned more about these award-winning programs, how the programs can be replicated, and how programs can be nominated for the Council's 2025 Best Practices Awards.

Real-time captioning was provided.

To view the recorded webinar, please visit: <https://www.youtube.com/watch?v=vAbwNRD7HN8>.

For more information on the Council or the 2024 Best Practices Award Winning Programs and Honorable Mention Programs, please visit: <https://vda.virginia.gov/boardsandcouncils.htm>.

COMMONWEALTH COUNCIL ON AGING 2025 LEGISLATIVE RECOMMENDATIONS

1. Increase Funding for Home and Community-Based Services Through Area Agencies on Aging

Background: The 25 Area Agencies on Aging (AAAs) in Virginia have been designated by the Commonwealth to provide services that help adults aged 60 and older to live safely and independently in their communities. AAAs provide services such as: information and assistance; home-delivered and congregate nutrition; homemaker and personal care; transportation; legal assistance; caregiver support; respite service; money management; Medicare counseling; hospital-to-community transition services; and a long-term care ombudsman program.

Virginia's AAAs are requesting additional funding to provide these services to an expanding population in need. Waiting lists are growing for these services, as Virginia's AAAs do not have the resources to help all those in need. In the 2024 session, the Virginia Association of Area Agencies on Aging (V4A) sought \$5 million for increased funding to AAAs.

Investing in these services now will pay great dividends in the future, reducing health care utilization and long-term care needs. For example, a recent study showed that home delivered meals alone resulted in 50% fewer hospital readmissions, 37% shorter lengths of stay, and 31% total reduction in health care costs.¹ As directed by the OAA, AAAs also develop partnerships and foster coordinated and comprehensive systems of services that provide an effective alternative to long term care at greatly reduced costs. Some AAAs work closely with senior Villages, which are neighborhood-based nonprofit membership organizations supported by volunteers that provide services that help older Americans stay in their homes.

This is a budget request. This is also a priority for the Northern Virginia Aging Network (NVAN), Virginia Association of Area Agencies on Aging (V4A), and Senior Services of Southeastern Virginia.

2. State funds for Virginia Lifespan Respite Voucher Program

Background: For caregivers of older adults, individuals with disabilities, and people living with dementia, respite is often a high priority request, reflecting the prolonged and demanding experience of caregiving. However, paying for respite services, whether in home or out of home, poses an additional financial burden that many families struggle to meet. Typical costs for adult day programs are \$80 per day or \$40-50 per half day, while in-home companion care typically costs \$25-30 per hour. The Virginia Lifespan Respite Voucher Program helps households with up to \$595 per year for reimbursement towards the cost of respite services. Historically, this program has been funded entirely by federal grants, and demand for services is beginning to outstrip available funding.

The Commonwealth Council on Aging recommends allocating \$500,000 annually to the Virginia Lifespan Respite Voucher Program to supplement the federal grant funds, support additional capacity building, and direct additional resources to respite services for unpaid caregivers. This aligns with the current Virginia State Plan for Aging Services and the Virginia Dementia State Plan.

This is a budget request. This is also a priority for the Virginia Alzheimer's Disease and Related Disorders Commission and the Alzheimer's Association.

¹ Gurvey et al, (2013, June). Examining Health Care Costs Among MANNA Clients and a Comparison Group, Journal of Primary Care and Community Health, DOI: 10.1177/2150131913490737.

COMMONWEALTH COUNCIL ON AGING 2025 LEGISLATIVE RECOMMENDATIONS (continued)

3. Conduct a Study on the Feasibility of a Multisector Plan on Aging

Background: Virginia is growing older. Today, nearly 1.9 million Virginians are aged 60 or older, and that number is expected to increase to 2.2 million in 2030.² Virginians contribute much to their communities; yet many older Virginians need additional support, including aging and home and community-based services, housing, transportation, health care, nutrition, income security, mental health services, employment, legal services, and access to information.

Virginia could benefit from a comprehensive blueprint for aging well. Such a blueprint, formerly referred to as Age-Friendly Plans and now more often referred to as Master Plans on Aging or Multisector Plans for Aging (MPAs) can unify fragmented efforts to serve the needs of older Americans and reduce unnecessary duplication of services. “A Multisector Plan allows states and local communities to directly address what matters most to people as they age.”³ Beginning with California in 2017, Governors in 11 states made a commitment for high-level, statewide assessment and planning for livable or age-friendly states.⁴ Additionally, the American Society on Aging (ASA) indicates that more than a dozen states have MPAs, which “guide the restructuring of state and local policy and programs while connecting the public, private, and independent sectors in modernizing creating systems-based solutions.”⁵

Over the past several years, Virginia has examined ways to elevate aging services and strengthen partnerships. These efforts resulted in the establishment of a new Division for Aging Services which is led by a new Deputy Commissioner for Aging Services in DARS. The Virginia Department for Aging and Rehabilitative Services (DARS) produces a State Plan for Aging Services every four years which is tailored to meet federal requirements as established in the Older Americans Act (OAA). Despite these valuable efforts, Virginia does not have an overall umbrella plan that would connect the various public as well as private agencies at a gubernatorial level. Legislation, with corresponding funding of \$150,000, should direct to the Virginia Center on Aging at Virginia Commonwealth University to conduct a study on the feasibility of both developing and implementing a MPA within the Governor’s Office in Virginia.

This is a legislative request with potential budget implications.

4. Replicating the RAFT Program in Other Areas of the Commonwealth

Background: Many persons living with Alzheimer’s disease or a related dementia are likely to experience behavioral challenges as their disease progresses. The inability of unpaid caregivers to cope with these challenges is often the proximate cause for placement of the individual in a long-term care (LTC) facility, like an assisted living facility (ALF) or nursing home, often at great financial and emotional cost to those involved.

(Continued on the next page.)

² Virginia Department for Aging and Rehabilitative Services, *Virginia State Plan for Aging Services 2023 – 2027*, <https://www.vda.virginia.gov/downloads/State%20Plan%20for%20Aging%20Services%20FINAL%20ACCESSIBLE-Reduced.pdf>.

³ American Society on Aging, “Join the Movement: Every State Should Have a Multisector Plan for Aging,” <https://generations.asaging.org/multisector-plans-aging-must>.

⁴ AARP, “State Members of the Age-Friendly Network,” in “AARP Network of Age-Friendly states and Communities,” <https://www.aarp.org/livable-communities/network-age-friendly-communities/info-2019/state-members.html>.

⁵ American Society on Aging (2023, January 11). Every state should have a multisector plan for aging, <https://generations.asaging.org/multisector-plans-aging-must>.

COMMONWEALTH COUNCIL ON AGING 2025 LEGISLATIVE RECOMMENDATIONS (continued)

The Regional Older Adults Facility Team (RAFT) has been operating in the five counties of Northern Virginia since 2008 to support older adults with mental illness and dementia to achieve and maintain successful LTC facilities and community-based placements. Team members train and support staff in LTC facilities to enable them to better care for people experiencing behavioral challenges because of their dementia or related conditions.

The Council supports replicating RAFT to improve training, and support and promote more informed, compassionate, person-centered care for individuals in LTC facilities and community-based settings whose health condition, disability, disorder, or neurocognitive challenges may destabilize the individual's care. Potential outcomes of expanding these services would be a reduction in inappropriate psychiatric admissions, improved caregiver resilience and coping skills, and an improvement in the quality of life of people living with dementia and/or in long-term care facilities.

The RAFT Dementia Support Program launched in 2023 to support people living with dementia who are being cared for in their homes. In 2023, the program supported 73 individuals, none of whom experienced a psychiatric admission while receiving services. Additionally, validated measures noted a reduction in caregiver distress related to behavioral challenges of the person living with dementia. An additional investment of \$750,000 annually would support the expansion of the RAFT Dementia Support Program to another area with a team and three respite beds at local ALFs.

This is a budgetary request. This is also a priority for the Virginia Alzheimer's Disease and Related Disorders Commission, the Alzheimer's Association, and the State Long-Term Care Ombudsman.

5. Support Nursing Home Inspection and Enforcement Process

Background: To ensure compliance with federal standards and to maintain certification from the Centers for Medicare and Medicaid Services (CMS), Virginia nursing homes must regularly undergo periodic inspection surveys from Virginia Department of Health's (VDH) Office of Licensure and Certification (OLC). OLC must also investigate and respond to complaints about nursing homes.

All except eight of Virginia's 289 nursing homes are certified for Medicare/Medicaid reimbursement. Nursing homes must be inspected every two years under state licensure, and certified facilities must be surveyed every 12 months on average to maintain Medicare/Medicaid certification.⁶ Such surveys protect the health, safety, and welfare of residents, and identify problems concerning staffing, effective staff supervision, enforcement of resident rights, and the quality of care and quality of life of nursing home residents. Without timely surveys, nursing home failures are unchecked, and residents are put at serious risk.

The OLC needs additional staffing and resources to effectively enforce federal and state requirements. Federal CMS data shows that of the 289 nursing homes in Virginia, 129 (or 42%) have not had an

(Continued on the next page.)

⁶ Virginia Department of Health, Office of Licensure and Certification, <https://www.vdh.virginia.gov/licensure-and-certification/division-of-long-term-care-services/>

COMMONWEALTH COUNCIL ON AGING 2025 LEGISLATIVE RECOMMENDATIONS (continued)

inspection survey since 2022, and 34 were last inspected in 2021.⁷ Additional funding would enable OLC to hire more surveyors, enhance surveyor training, reduce the backlog of nursing homes that have not had timely inspections, and better enforce compliance with state and federal regulations.

This is a budget request. It is also a priority of the State Long-Term Care Ombudsman.

6. Increase Nursing Home Personal Needs Allowance and/or Create a State-Based Tax Deduction or Credit for Donations of Personal Needs Items to For-Profit Nursing Homes

Background: The personal needs allowance (PNA) is the monthly sum that nursing home residents who receive Medicaid may retain from their personal income for miscellaneous personal needs. Any income above the allowance is applied to the cost of care. The allowance is intended for the resident's discretionary use to buy non-Medicaid-covered items such as clothing, shoes, cards, vitamins, haircuts, personal toiletries not provided by the facility, vending machine snacks, reading materials, hobby materials, and stamps. It cannot be used toward items or services paid for by Medicaid.

Federal law requires the PNA to be at least \$30 per month, but states may supplement this amount up to a maximum of \$200 per month, which many states do.⁸ The Virginia PNA amount has been \$40 per month since 2007, yet the cost of personal items has risen steeply since then.⁹ The PNA is particularly important for residents who do not have the support of family or friends to help with personal needs. The amount should be raised to at least \$60 per month to keep pace with changing prices.

Another option, which could be implemented in conjunction with a PNA increase or as a standalone option, would be to create a state-based tax deduction or credit for Virginians who donate PNA-type products (e.g., clothing, toiletries, shoes, stamps) to for-profit nursing facilities to support increased access to those products among nursing home residents.

This is a budget request.

7. Strengthen Nursing Home Transparency, Data, and Oversight

Background: Requiring the disclosure of ownership, cost and quality reporting data from nursing homes is essential to ensuring that older Americans receive high quality, cost-effective care in these settings. It is needed by consumers making decisions about their short and long-term rehabilitative needs, and by licensure and oversight officials who are responsible for screening out or properly monitoring nursing home providers with a history of substandard care that places residents at risk and squanders stretched taxpayer dollars.

(Continued on the next page.)

⁷ Data.CMS.gov, Centers for Medicare and Medicaid Services, <https://data.cms.gov/provider-data/dataset/svdt-c123> (2024). Note that similar backlogs in Maryland prompted a lawsuit against the Department of Health and the Health Secretary in May 2024; see Shepherd, K., "Nursing Home Residents Sue in Md," The Washington Post, B1 (May 20, 2024).

⁸ American Council on Aging, "How Much Monthly Income Can Be Kept When Residing in a Medicaid-Funded Nursing Home?" (February 2023), <https://www.medicaidplanningassistance.org/personal-needs-allowance/>.

⁹ American Council on Aging, <https://www.medicaidplanningassistance.org/personal-needs-allowance/>.

COMMONWEALTH COUNCIL ON AGING 2025 LEGISLATIVE RECOMMENDATIONS (continued)

This is a particularly critical need in the Commonwealth of Virginia. Findings released in July of 2022 by the Office of the Assistant Secretary for Planning and Evaluation (within the federal Department of Health and Human Services) revealed that from 2016 to 2021, Virginia had the 4th highest percentage of nursing home ownership changes in the nation, with 35% of the state's facilities changing ownership during that 5-year period. In 2021, Virginia had the highest percentage of ownership changes.¹⁰ Each year nursing homes funnel billions of dollars through related party companies (companies they also own) with little to no oversight at the federal or state level. Without requirements that nursing homes provide more transparent (i.e., clear, accurate, and understandable) cost reports that fully disclose ownership and financing structures, revenues, and expenditures, there can be no true accountability for the billions of taxpayer dollars awarded annually to such operators.

The Commonwealth Council on Aging proposes the following actions:

- Requiring disclosures to the oversight agency (Virginia Department of Health) of ownership, cost reporting, and quality metrics at the time of a nursing home's initial application for licensure to operate; annually, through clear annual cost reporting; and at any point at which the owner/operator seeks to change the terms of licensure (e.g., change in ownership or company restructuring or with the addition or reduction in the number of licensed beds).
- Using these disclosures to strengthen criteria and approval processes for licensure of nursing homes. This should include improving notice to, and input by, the public and other interested stakeholders; establishing clear screening mechanisms to determine an applicant's capacity to provide quality care; and defining clear criteria to deny licenses to operators with a history of providing poor care.

This is a legislative request. It is also a priority of the State Long-Term Care Ombudsman.

8. Expand Dementia Care Management to Underserved Areas of Virginia

Background: Using evidence-based or evidence-informed interventions, dementia care management (DCM) or dementia care navigation has been shown to reduce unplanned hospitalizations and emergency room visits and reduce depression and anxiety while improving quality of life. Informal caregivers receiving care management and education are better able to cope with challenging dementia-related behaviors. This reduces the risk of involuntary psychiatric admissions and the burden on private and public psychiatric hospitals. Care coordination can increase the length of time that people living with dementia are able to remain safely in their homes, delaying the need for facility-based long-term care.

In 2019, the General Assembly approved funding to provide 88 individuals per year with DCM at the University of Virginia's Memory Disorders Clinic in Charlottesville in partnership with the Alzheimer's Association. Additional funding was appropriated by the General Assembly in 2024 to provide dementia care management (DCM) for 100 families at Riverside Health Services' Martha W. Goodson Center in

(Continued on the next page.)

¹⁰ Office of the Assistant Secretary of Planning and Evaluation. (2022, July 7). Changes in ownership of skilled nursing facilities from 2016 to 2021: Variations by geographic location and quality. <https://aspe.hhs.gov/sites/default/files/documents/78aae3d6d528e77a729288746ccc2e84/changes-ownership-snf.pdf>.

COMMONWEALTH COUNCIL ON AGING 2025 LEGISLATIVE RECOMMENDATIONS (continued)

Williamsburg in partnership with the Peninsula Agency on Aging. However, capacity constraints mean that most people living with dementia will never interact with a dedicated memory clinic or other health provider offering clinical DCM services. The Commonwealth Council on Aging recommends using \$1 million in state funds to deliver a large-scale pilot of DCM-based services in at least eight underserved areas of the state (suggested areas include Eastern Shore, Southwest Virginia, Shenandoah Valley, Fredericksburg, New River Valley, Western Tidewater, and Southside). This sum would support hiring eight full-time dementia care navigators and costs for program development and implementation. In addition to providing care navigation services for several hundred families, the dementia care navigators would provide dementia-capability training to Area Agency on Aging (AAA) and other aging services staff, offer community education and screening, and provide support for local dementia-friendly initiatives. This proposal aligns with the Virginia Dementia State Plan 2024-2027.

This is a legislative request with budgetary implications. It is also a priority of the Alzheimer's Disease and Related Disorders Commission and the Alzheimer's Association.

9. Provide State General Funds for the Ongoing Operations of the Virginia Memory Project

Background: The Virginia Memory Project (VMP) is a statewide data registry specifically focused on quantifying the impact of brain health and neurodegenerative disorders in the Commonwealth. Housed within the Virginia Center on Aging at Virginia Commonwealth University and operated in close partnership with the Virginia Department of Health, the VMP collects and cultivates data about caregiving, neurodegenerative disorders, therapeutics, and conditions associated with brain health. In addition to the data collection, the VMP has a secure resource and education hub, which links enrollees with appropriate regional support. The VMP has been identified as vital to a dementia-capable Virginia because it provides essential, accessible, and cost-free information and education that can be used to inform data-driven policy and support equitable, effective resource allocation.

During the 2024 General Assembly session, the VMP was codified by HB 1455 (see [§ 23.1-2311.1](#) of the Code of Virginia). However, current funding for the VMP is provided through time-limited grants; ongoing, reliable funding totaling \$150,000 is needed to support the VMP in continuing its important work in Virginia.

This is a budget request. It is also a priority of Alzheimer's Association and has the support of the Alzheimer's Disease and Related Disorders Commission. Additional information about the VMP may be found [here](#).

The Commonwealth Council on Aging would like to thank Erica Wood, Esq. for her many years of dedication, leadership, and guidance to the Council's Legislative Committee.

COMMONWEALTH COUNCIL ON AGING GERIATRIC TRAINING AND EDUCATION GRANT IMPLEMENTATION

This year, as permitted in § 51.5-128 of the Code of Virginia, the Council received and implemented a grant from the Virginia Center on Aging Geriatric Training and Education (GTE) Initiative. The General Assembly appropriates funding to the GTE Initiative for the purpose of developing the skills and capacities of the gerontological and geriatric workforce.

The Council's GTE grant proposal:

1. Created five visually-engaging microlearning training and education videos for the Virginia geriatric and gerontological workforce to increase awareness of malnutrition and food insecurity, and the key programs and resources available to older Virginians.
2. Partnered with organizations to disseminate and promote the videos among the Virginia geriatric and gerontological workforce, and older adults and caregivers.

The microlearning video topics included:

1. Overview of Malnutrition and Food Insecurity
2. Congregate and Home Delivered Meal Programs through Area Agencies on Aging (AAAs)
3. Supplemental Nutrition Assistance Program (SNAP)/Food Banks/Food Pantries
4. Farm Market Fresh & Virginia Fresh Match Programs
5. Disease Prevention Self-Management Programs

The videos were produced in two versions: one with English captions and one with Spanish captions.

The Council and DARS partnered with the Virginia Association of Area Agencies on Aging (V4A) to officially launch the microlearning videos during a webinar on March 26, 2024, as part of the Virginia Governor's Conference on Aging Monthly Webinar Series. During the webinar, attendees watched the videos, learned more about the highlighted programs and resources, and learned about how they could access the videos for future use. Webinar attendees, which totaled 198, included representatives from Medicaid managed care organizations, local departments of social services, and AAAs, among others. A total of 497 individuals registered for the webinar, all of whom received a follow-up email with the link to the recorded webinar and more information about the programs. The webinar recording has been viewed an additional 105 times.



The Council collaborated with No Wrong Door Virginia, a DARS led initiative, to house the microlearning videos on Virginia Easy Access website. The Virginia Easy Access [website](#) connects older adults, adults with disabilities, veterans, and families to information about a wide range of public programs and supports in a way that is accessible and easy to navigate.

COMMONWEALTH COUNCIL ON AGING GRANT IMPLEMENTATION (continued)

From the main website of Virginia Easy Access, a dedicated [webpage](#) was created to educate visitors about the importance of regular access to nutritious food. As of mid-September, this webpage has been viewed 1,981 times and visitors have clicked on links or engaged with content on the webpage 5,796 times. The videos have collectively been viewed 815 times.

Additionally, the microlearning videos were added to the [No Wrong Door Training Platform](#). The No Wrong Door Training platform houses training for No Wrong Door certified community partners, which

include AAAs, Centers for Independent Living, and many other home-and community-based service providers. As of mid-September, 20 users have registered for the training and 13 have completed the training using the No Wrong Door Training Platform.

Lastly, a companion postcard was developed by No Wrong Door Virginia, printed, and disseminated to help drive visitors to the Virginia Easy Access food webpage and microlearning videos. (See the corresponding images for the postcard design.) Webinar attendees and other stakeholder organizations were invited to request hard-copy postcards for dissemination, and DARS staff have further distributed them at recent in-person events.

In promoting the microlearning videos, Virginia Easy Access webpage, and the printed postcards, the Council and DARS engaged with over 70 organizations and associations representing home care agencies, community health workers, Community Action Agencies, county and city governments, in-home workers, faith-based organizations, lifelong learning institutes, food banks, and more. Many of the associations and peer state agencies also highlighted the microlearning videos and accompanying resources in e-newsletters for their members or community partners.

The Council and DARS obtained 114 evaluation surveys from individuals viewing the videos. Among these participants:

- 87% agreed that their understanding of malnutrition and food security among older adults increased
- 89% agreed that their knowledge of available programs increased
- 90% responded that they were likely to refer older adults to these programs

The initiative was further highlighted by the national Nutrition and Aging Resource Center, which seeks to build the capacity of senior nutrition programs funded by the Older Americans Act. NARC linked to three of the five microlearning videos on its website. To date, the CCOA and DARS have also provided 1,400 postcards to various organizations.



COMMONWEALTH COUNCIL ON AGING 2024 MEETINGS, PRESENTATIONS, AND ACTIVITIES

During this reporting period, the Commonwealth Council on Aging met in-person on January 17, April 17, and July 17 and virtually on September 30, 2024. Council meetings featured presentations on:

Services for Older Adults through the Department for the Blind and Vision Impaired (DBVI)	Services for Older Adults through the Department for the Deaf and Hard of Hearing (VDDHH)	Senior Legal Helpline through a partnership with the Virginia Poverty Law Center
Virginia Insurance Counseling and Assistance Program (VICAP)	Virginia Lifespan Respite Voucher Program	Overview of the Virginia Center on Aging

On July 17, 2024, the Council approved revised bylaws that continue to keep the Council's membership structure in alignment with Chapter 583 of the 2023 Acts of Assembly (SB 1218, Mason). Changes to the bylaws also updated the Council's standing committees, responsibilities of the Executive Director position, and the meeting schedule. The bylaws further reflected an enhanced partnership with the Virginia Center on Aging for the Council's upcoming 2025 Best Practices Awards and beyond.

On July 17, 2024, the Council also approved a revised Electronic Participation and Meeting Policy, which conformed the permissions and limitations for electronic participation for in-person meetings, meetings held during states of emergency, and all-virtual meetings to recent changes to the Virginia Freedom of Information Act (FOIA). The Council will plan to adopt such a policy annually as required by FOIA.

Looking ahead, the Commonwealth Council on Aging will meet on:

- Tuesday, January 7, 2025
- Wednesday, March 12, 2025
- Wednesday, June 18, 2025
- Wednesday, September 10, 2025

**COMMONWEALTH COUNCIL ON AGING
MEMBERSHIP**

The purpose of the Commonwealth Council on Aging shall be to promote an efficient, coordinated approach by state government to meeting the needs of older Virginians. (Code of Virginia § 51.5-127)

Council Members	
Andrea Buck, MD, JD Gubernatorial Appointee Term ends 6/30/2026	Tresserlyn L. Kelly, <u>Vice-Chair</u> Gubernatorial Appointee Term ends 6/30/25
Jo-Ann Chase Gubernatorial Appointee Term ends 6/30/2026	Cleopatra Kitt, PhD Gubernatorial Appointee Term ends 6/30/2025
Amy Duncan Gubernatorial Appointee Term ends 6/30/2025	Joshua L. Myers House Speaker Appointee Term ends 6/30/2026
Tracey Gendron, MS, PhD Executive Director of the Virginia Center on Aging Term N/A	Ellen M. Nau Gubernatorial Appointee Term ends 6/30/2026
The Honorable Christopher T. Head Senator, Senate Rules Committee Appointee Term ends 6/30/2028	Yolanda Stevens, PhD House Speaker Appointee Term ends 6/30/2028
The Honorable Patrick A. Hope Delegate, House Speaker Appointee Term ends 1/13/2026	Paige H. Wilson Gubernatorial Appointee Term ends 6/30/2026
Carla Hesseltine, <u>Chair</u> Gubernatorial Appointee Term ends 6/30/26	Roland Winston Senate Rules Committee Appointee Term ends 6/30/2028

Ex Officio Members
The Honorable Janet Vestal Kelly Secretary of Health and Human Resources
Kathryn Hayfield, Commissioner Virginia Department for Aging and Rehabilitative Services
Tara Davis-Ragland Virginia Department of Social Services
Ron D. Boyd Representative, Virginia Association of Area Agencies on Aging
Courtney Richter, MSW Department of Medical Assistance Services

Council Staff
Sara Stowe, MS Council Executive Director sara.stowe@dars.virginia.gov



1610 Forest Avenue, Suite 100
Henrico, Virginia 23229
PHONE (804) 662-9333
FAX: (804) 662-9354
dars@dars.virginia.gov