

Executive Director Report 10.22

ASA: 1 in 4 older adults depends on Social Security for 90% of their income, yet the real value of that benefit has declined by 34% since 2000.

Activities

- I sent a sympathy card to John Cooley's family.
- Spent time on record disposal with Iron Mountain. Confirmed that 46 boxes were destroyed.
- Working on audit with Marylee-should have draft for October meeting.
- Attended Smith Family Foundation program in Trenton; ASA program on purpose; Friends Lifecare on Cognitive Stimulation science; Ziegler Care Academy.
- We received a second Ziegler payout (\$22,500).
- The second [Quaker Convening on Aging](#) was held Sept 29. The energy was high, and conversations have been going on since the first meeting. There is great interest in collaborating and sharing resources. Very excited about the opportunities created by BYM's Tender Time... book. Demand will be high. Pendle Hill is launching its first podcast and NYYM has a Spark article on end of life of meetings, as well as revising their popular end of life planning workbook and offering new time-limited groups on various topics.

My take on the **grant proposals** (most of this month has been spent in conversations with grantee partners):

Letters of Intent

Declined: [The Tender](#)-small program, no transportation, not reaching community, sustainability

[Nazarene](#)- nothing new or innovative, no sustainability plan

[GEMS](#)- operates in wealthy communities, not clear how needy would find assistance

[KACS](#)-wealthy community, several other sources of funding locally, should work with County

[NJAAW](#)- no history of being resource, how will people know, not aware of other resources, redundant

[RWJB-Hamilton](#)- no transportation, not reaching high risk populations, hospital should support.

[EBFitness](#)- Discretionary \$1000 to for fitness program in Trenton senior centers. I think there is a misfit between the equipment he plans to purchase and the population to be served.

[Friends Home & Village](#)- able to continue Senior Planet on their own, Linda Heinemann joining team. Want to do 2 staff trainings: de-escalating conflict and SAGE training. Cost estimate for each is about \$1100. Probably 1 this year, 1 next. I think these would be valuable and will approve as discretionary grant when formal request submitted.

There was so little feedback on the LOIs I need to ask again if you want to read through them as LOIs or you want me to do that screening and just bring you the proposals. There were also few questions, which I have included below (maybe I am succeeding in clarifying before they get to you?) The more clarity I have on what you want to fund, the easier this will be for me. My feeling after deliberating on the LOIs and proposals was to support projects that propose an innovative approach or the potential to

make an impact on a major problem identified in the field. Or maybe a small organization that is proposing something that will have a strong positive impact in their community. Projects that wanted funding to continue what they are already doing and didn't have a sustainability plan were not favored, even if Quaker. In my view, it is also time to spin off some of the long-funded programs (as we did with JFCS by giving 50% funding with lots of warning over the past 2 years and they have a sustainability strategy). Need to discuss.

Your Q&A

Interfaith Caregivers: how do you handle risk management- auto insurance, background checks, training? Are recipients and volunteers from the same church? *They sent many details on background checks, references, driving record. Also required volunteer training and workshops through the year. Care receivers are also screened and taught the limits of the program. There are 4 insurances covering volunteers. Matches are made by location, need, and other factors.*

Brightside Manor PALS: please describe the services offered in plain English. *PALS provides in-home care for seniors living in subsidized housing. Care management includes help with personal care (bathing, dressing, using the restroom, grooming, etc.), coordination of healthcare appointments, medication administration and management, recreational activities, laundry, housekeeping, meal preparation, accessing transportation, and most importantly, social work services (connecting PALS clients to social services). PALS also includes weekly blood pressure clinics, nursing services, and ongoing health monitoring, including bringing doctors and specialists on-site to PALS locations to make healthcare more accessible. We work with a lot of healthcare providers, but mainly physicians, psychologists, podiatrists, physical and occupational therapists, speech therapists, and nutritionists. The on-staff social worker coordinates a large portion of this care and keeps in contact with PALS clients' families to report back on health and wellness status.*

Kendal at Home: What are the * in the budget? How will you run the program when the income is so much less than the budget, even if you get all the grants? How will you sustain the program in future years?

1. *While the Registered Nurse and Occupational Therapist can assess needs and make referrals, as can the Director of Clinical Services, this isn't a care management program intended for the long term. Johns Hopkins developed CAPABLE as a short-term intervention to remove some of the barriers to seniors staying safely at home, including medication management and home repairs as needed.*
2. *Lynne is actually starting to meet now with managed care organizations in preparation for developing those reimbursement relationships, so we would definitely expect some revenue from reimbursements to drive the program financially in its first year. The "professional fees" category includes a consultant to help advance those relationships and develop contracts. That fee won't be in the program budget after year one.*
3. *The licensing fee listed in the program budget is actually for three years, so will not be included in the program budgets in 2024 and 2025. After that time, it will be included at the lower annual rate noted in the budget.*

Returning

NYYM-ARCH- Feels well established, though more “flowery” in definition than most of our grants, good continuous refinement of model, accessible to other YMs. Intergenerational. Expanding to NEYM. Seemed appropriate to raise issue of inflation when the grant has been held level for 4-5 years. I support.

AFSC- Exciting to see the program success and expansion but small proportion are seniors (16). Impact may be greater from collaborations and training. Success in obtaining additional funding and partnerships, seems on very solid ground. Time to begin to step back?

FSA, Kendal & Barclay Friends – This proposal seems to still be in concept form, but that they expect support from FFA. The details are vague but they want to keep a promising candidate. It addresses the need for top level staff, rather than direct service to residents. The model includes visits to other PA member communities, does not require service following the training (as they are not sure a position will be available) and hopefully may be replicable in future years. It is an opportunity to partner with FSA and Kendal, with Barclay as the fiscal agent and host.

Friends Home Kennett—I was surprised that this “wellness” perspective is new to them, and not already baked in to basic care, especially with the Montessori philosophy. I take this to indicate that they are struggling and need funding for an activity person. The music program (as adapted for covid) seems to be working, using instruments purchased and now built in to operating budget. I am ambivalent.

Kendal at Home—Good to see them reaching out to low income area residents, as NE Ohio is an impoverished area. Tested model but unclear how they will make the budget. I recommend supporting this project short term to help them try. **No report received.**

YSOP – They seem to have developed a virtual option since our mid-year conversation, but not particularly innovative. They served a surprising # of people. Not clear how they connected students in PA or seniors at Medford Leas, and disappointed they still haven’t connected with Chandler Hall and Friends Village. It still doesn’t fully make sense to me—rather that it adds an unnecessary middle-person between provider and recipient organizations. I recommend not funding or only doing one more year.

CiP- last grant was for LGBTQ center which has launched and has active steering committee, will continue under operating budget. Now want to continue their in-home support services although lost state funding. We know Ralston My Way is no longer there and have expressed concern for the at-home population. I support.

Trinitas- We have funded for 10 years. I think it is time to back away and for RWJB to pick up the costs of the community health workers. We let this go while they were going through the merger. There continues to be a substantial surplus from last year which can be factored in. Sorry they did not feel they needed a student this year and have not followed up on learning about PAAD (which would pick up medication costs). I recommend half for this year as transition then \$0 so we can support new ideas and they get more invested in advocating for their program internally.

ARTS Phila- Problem and objective statements could be stronger. It seems that efforts have been scattered and they have not succeeded with some of the ideas initiated in the past two years, which has drawn resources from the original objective. Both the mural and workbook should be done this year. May be time for new focus. If you would like to see their outside evaluator's report, let me know. When is it time to spin off?

New

Baltimore YM- I love this one, available to all Quakers providing a missing resource. The draft I've seen adds a spiritual lens and discussion queries which is missing in much of the current literature. From the Quaker Convening group, I would add more \$ for a larger print run. I support.

Bright Side Manor- great candidate to implement model program for supportive housing for people living in subsidized housing; potential to be replicated in NJ and then other states, sustainable through Medicaid waiver program. Well respected. Rutgers partnership for outcomes. I support.

JCHC- We deferred this one last cycle as they had not gotten any of the approvals and wanted furniture. They are making progress with the approvals and are now asking for staffing. This group and Bright Side are the leaders in this new approach to supporting aging in place for lower income residents in subsidized housing. Funding both organizations demonstrates FFA leadership in an innovative approach. Do we fund now or continue to wait for licensure?

JFS Atlantic- high risk population, addressing homelessness. I support.

Interfaith Caregivers Mercer Co. – basic operating, very old model-nothing new, make good use of volunteers, through churches (but struggling to connect in some communities). No sustainability plan. Risk management of volunteers? I am luke-warm.

SOWN- seems to provide connection for isolated aging adults throughout Philadelphia. May meet needs of a population not served by other organizations.

Midyear conversations:

Lutheran Social Ministries: I attended the official opening and blessing of the gardens in Pennsauken NJ.

Camden Coalition: I visited the administrative office and met staff, later had Zoom call with Matt, Jeremy Esq, Dayna RN. Grant has allowed them to do more-# served, outcomes, new partners. Program going well. 30% are 60+. Advocating with Medicaid to cover legal services. Cooper paying for some of work there. Several referral sources, CORE taking longer to launch, but allowed time to figure out how to document legal contact in case record and decide what to measure in evaluation. Creating template for replication.

Vonzella's Crown: Nikki+ Tara. Intergenerational Art in Trenton. Ran into several challenges with space, loss of coordinator, but back on track. Did resting station at Trenton Juneteenth event. Have served 125 seniors since May- 75 African American, 20 Latino. Did survey of participants for what they want: men want role, in-person, mid-day. Will continue with satisfaction surveys. Many grandparents are raising grandchildren or other family. One participant brings her 5 special-needs grandchildren and says this is her respite.

Rise: Nikki & Beth+ Monica & Leslie. AFUN food and nutrition education-Hightstown NJ. Grant gave them confidence and opportunity beyond expectation. Appreciate flexibility. Have gotten good feedback from participants which also improves connection. "somebody cares, I've rediscovered veggis, I lost 15#" 38 not 50 participants, most continued into 2nd year, all food pantry participants age 60+. Will keep open for present participants. Rise serves 400 families/month thru the pantry. Builds trust, linkage to other services, this group feels special. Have diversified menu-new veggis, proteins, spices. Have begun inroads into St James housing, seeking Chinese interpreter. Several partners; Door Dash volunteering to deliver boxes. Big effort for Thanksgiving. Hope to grow program, can redistribute existing resources.

Friends House Retirement Community (Anne, Phil, Bill+ Susan) Monarch partners say they are on track for Silver level Montessori Lifestyle despite Phil (CEO) having quad bypass, Covid lockdowns and several leadership changes (Nursing Home Admin, Director of Nursing, social worker, activities). NHA eventually brought over her team, working well. Want to get to train-the-trainers model and bake the model into onboarding. It's a culture change to resident-driven, not always compatible with traditional health center training and resident expectation. Volunteer leadership from Judy, an IL resident; want to increase size of committee. Focus on improving dining services. IL residents engaging in 60 committees and meet & greets. Example: reviving use of shadow boxes by AL residents—for those who chose to participate it gave personalization and purpose to volunteer helpers.

JFCS Hoarding program- Susan, Lisa + Courtney. Program is solid, creative pivots due to Covid led to virtual groups and training. Using more volunteers to facilitate groups. Onboarding a new art therapist. Moving ahead with Medicare and Medicaid reimbursement. Got Community Care Coordination grant and support of CBH (Phila mental health). Requested to do more training state-wide. Seeking consultation with Christiana Bradista (writer on hoarding) for where to go from here. Challenges with task force with partners focusing on Covid, change of personnel. Need more treatment providers. Will be ok after this year, can apply for other programs, let me know if support from CBH fails.

Example: using blue tape to mark areas to keep clear of clutter; reviewing a virtual shopping cart to identify what is a want vs need.

The Hickman Montessori Lifestyle Rita Brower-Ancher, Monica Neary, CJ/Crystal Jones, Stacey Farrell + Susan, Beth. Stacey and CJ are the program staff in Darlington—very enthusiastic. Seamless connection with Quaker values, it's the person not the disease; dignity, respect, choices. CJ has been there 16 years, Stacey is Quaker. Gary Johnson and Pastor Bryan are coaches from CARD, many good ideas and tools, supportive. First time working with a CODA. Areas include gardening, rides and hopefully a men's group. White boards with information and signage have been very successful. Engaged departments include food, housekeeping and facilities. Say started out nearly at Bronze level. They hope to achieve gold then become a demonstration site in 18-24 months, on target.

Example: J is a personal care resident who has become the front desk greeter when staff are not there. Rita said they had also applied for a Chester Co grant which required a focus on individuals, so they feel they are well aligned. Staff and residents are more engaged in planning. Montessori champions help with orientation of both. They are participating in a PA healthcare mentorship program (HAEP) which rewards both mentor and mentee toward retaining staff.

Pendle Hill Frances+ Jim & Susan. 50% new staff this year. Frances reviewed current online programs: daily worship, visual stories, art... Can find several programs on youtube channel, including podcasts, Monday lectures and more. Over 80% of participants online are age 55+ (65% >65). Increased

accessibility. Challenges include planning virtual/in person and varying attendance. Have hired their former QVS fellow to do alumni engagement and outreach-rebuild relationships with communities, MMs and YMs. Also opened AFSC speaker series for adult young Friends for intergenerational interaction. Have also collaborated with Woodbrooke on programs. Creating more study guides for lectures and pamphlets. Hope to do a pamphlet based on BYM book. There are resources on Spirituality & Aging. Convening has been very helpful—met people, ideas.

[Witness to Innocence](#) Cara + Randall with Susan. Major change with executive transition; Herman started Oct 1. He too is an exoneree. He started out seeking feedback from all participants which is providing good feedback on social work and peer specialist. Hope to add family peer specialist by year-end. Now 10-11 partners have social workers though most short-term; some sharing. Able to help all staff and participants in FL through hurricane; a partner org checked on them, all but 1 back in homes. Major funder making changes, need to figure out how to fill gap; looking at re-entry and justice programs, Federal funding. Does not impact social work program. Feels very stable.

[Ujima](#) has not responded. [Barclay](#) will report in March after the bus is delivered and [NEYM](#) in November when the coordinator has been hired. [Meals on Wheels](#) next week when ED returns.