ED update 12.23

Linda Sterthouse is retiring from Barclay Friends.

The Kendal Board of Directors has selected the next CEO of The Kendal Corporation. Vassar Byrd, formerly the CEO of Rose Villa Senior Living in Portland, Oregon, will begin in her new role effective January 9, 2024.

Conversation with Lynette Killen, CEO of Ralston Fdn. on what conferences we are attending, what organizations we both fund... Ben Hoyle will be next President of their board. News release on their innovation grants: <u>https://sarahralstonfoundation.org/2023/11/21/innovative-project-support-grantees/</u>

I sent a gratitude email to all of our current grantee partners, thanking them for the work they do, as we could not fulfill our mission of improving the lives of older adults without their efforts.

I received notification that my proposal to offer a workshop at FGC was approved! Topic: Aging and Spirituality.

Attended: CNJG annual meeting and lunch-program on collaborations. Take aways: intersection with TBP, who defines community, where is the power, look at all efforts through an equity lens, do you have a culture of learning and unlearning? Also: Doing Good Better – roll out of this campaign to reform philanthropy in NJ- <u>https://www.cnjg.org/doing-good-better--</u> informed by TBP. I recommend reading it.

PEAK Small Funders Affinity Group and GIA End of Life Collaborative-no take-aways.

Visits:

Broadmead to see what it looks like and to hear how DEI program going. They have had 2 DEI directors and are now reconsidering the position. Still hope to do a Nurse in Training program, following the AIT model.

Baltimore YM. Expect to publish the book soon. Pendle Hill will help disseminate it. No new funding requests at this time. Some interest in finding ways to address memory loss in vital members and caregiver support.

Friends House Retirement Community. New buildings look great. Interesting model of range of incomes. Montessori model has had bumps but still hope to implement under the oversight of the new Nursing Home Administrator. An example: a requirement of Montessori lifestyle is to have a shadow box outside each person's room which represents them in some way. Most of the frames on the halls we walked down had generic statements about FHRR and the Mission, not the resident. The few that were resident-oriented were small and easy to overlook. The resident committee volunteers entrusted to implement the program have discontinued Montessori and rolled their efforts into the Personal Care committee, stating that the principles are the same. It seems that success requires an internal champion (DON, NHA or Program director) and some flexibility from Montessori. I suspect the communities may get the Gold certification and then do it more their own way. I hope a peer group can help them stay true to the principles.

Chandler Hall Met with CEO John Whitman. Listened to him tell of his lifetime accomplishments in the field, including years of consulting and a stint at Jeanes Hospital (where he told me he got approval for his initiative by calling a special meeting when the two board members who were opposed were away).

He wants to introduce robots for dementia to reduce loneliness and monitor high risk admissions. When asked to focus on Chandler Hall, he described reopening the café, closing adult day care, hospice pavilion, the pool, and the Wellness Center, and dealing with a flood in Kane (unoccupied). His main complaint is workforce. He wants to expand the number of SNF beds, affiliate with St Mary's and Capital health ACOs for referrals, and start a program Independence+ to provide services to medically isolated people in the community so they move in (he and his wife started this business). I asked if they considered themselves a Quaker organization and he replied that they start meetings with a moment of silence. 4 of 8 board members are Friends. I suggested he look for the FSA videos. He rents space to Salute to Service, a group that works with vets, and a group called Worthwhile Wear that works with women who have been trafficked, and he'd like to explore having them work at CH (some may have arrest records, but there are ways around that). He is especially proud of a collaboration with a local high school, Amazing Stories Being Told pairing students with residents to tell their story. I noted that we had funded several projects at CH in the past, many of which did not fulfill their vision, but said he should reach out if he had ideas that could hold promise. No tour.

Montco SAAC Lisa & I met with Mark, the new ED, and got a tour of the Ambler site. It is in an old school (leased from County \$1) and looks like a traditional senior center for an older cohort of white and Black participants—lunch, bingo, a few people doing arts. They do MOW for 100-150 people. Advisory groups. Talked about attracting younger people, but no plan. Want to be the "front door" to services. Interest in portable medical unit that care managers can use- Sequino software, used at Ann's Heart. Held listening session with neighbors. Questions about collaboration with Aclamo (Spanish speaking)-they will soon have their own site. Jaisohn-also has own center, having hard time serving all Asian communities as each want own. Questions about caregiver support were not answered. Mark's background is in community policing in AZ then got a job in Malvern.

Center for Hope Hospice Jim & I visited the Elizabeth hospice home. We were impressed by the dedication of all the staff we met, and the amount of charity care provided. The palliative care program adds significant value to simply getting care from one's physician as it provides case management and 24/7 on-call nurses who can do home visits. They bill Medicare for the health services provided. The program has grown from 5 participants 2 years ago to 157 today and a goal of 500 and they get many referrals from Trinitas and local providers. It is anticipated that the program will be self-sustaining with a large enough population. Assessment includes feedback from participants, families and area referral professionals. We recommend approving the proposal.

JCHC- They were in the Fall cycle, but they didn't get the funds until December so are more on a calendar year. Newest ALP. The visit was cancelled, but we met on Zoom a week later. It took a long time to get state licensing for the program. They then got a Medicaid license but are still working on approval from the 5 MTLSS providers. They have 8 participants with 2 in the pipeline. No hospitalizations or ER visits since inception. Staff include a director/NHA, RN, Medication aide, C-NA. Social work services are provided by JFS when needed. Focus is on education and marketing. People fear stigma and losing their doctors, that the residences will become nursing homes. Other funders: Healthcare Foundation, Grotta. Requested a 1 page report by year-end.

Meals on Wheels Mercer- donor appreciation event to introduce new director.