

>> GOOD MORNING AND THANK YOU FOR JOINING US FOR THE COLLABORATIVE SOCIAL ISOLATION WEBINAR, THE THIRD ONE IN A SERIES FOCUSED ON COVID-19, WE ARE SO HUMBLE TO HAVE A GREAT GROUP OF PANELISTS TO DISCUSS ISOLATION IN THE WAKE OF COVID-19. FIRST DIVE INTO THE ISSUE OF SOCIAL ISOLATION AND LOOK AT STRATEGIES AIMED AT COMBATTING LONELINESS.

BEFORE WE START I LIKE TO PREFACE BY STAYING, MOST OF YOU ARE PIVOTING YOUR FOCUS TO THE BUDGET RELEASED YESTERDAY.

THERE WILL BE SOME TIME FOR Q AND A. AS ALWAYS IF WEBINARS ARE RECORDED AND MADE AVAILABLE ON THE WEBSITE. (ON SCREEN) IF YOU WOULD LIKE TO GO BACK AND LISTEN TO PAST WEBINARS OR HAVE COLLEAGUES THAT WERE NOT ABLE TO JOIN BUT WOULD BE INTERESTED IN THIS DISCUSSION, YOU ARE WELCOME TO SHARE THAT LINK, THIS IS OPEN TO EVERYBODY AND WELCOME YOU ALL.

>> ATHENA: THANK YOU FOR JOINING, AS SHE MENTIONED WE KNOW A LOT OF INTEREST IS ON THE BUDGET, WE ARE GOING TO DO A QUICK TOUCH BASE ON IT THIS MORNING AND HOPE TO HAVE A DEEPER DIVE IN A COUPLE OF WEEKS, AND HAVE MORE TIME TO DIGEST THE PIECES, AND EXCITED TO HAVE THE ASSEMBLY MEMBER HERE AGAIN TO GIVE AN OVER VIEW OF HOW THINGS ARE GOING WITH COVID-19 AND HOW THE BUDGET AND LEGISLATURE COMING BACK AND TAKING ACTION.

SO WE WILL GET THAT BRIEF UPDATE AND HEAR FROM SARA AND HAVE A GREAT PANEL TO GIVE US INSIGHT ABOUT SOCIAL ISOLATION AND HOW THINGS ARE CHANGING AND BEST PRACTICES I WOULD LIKE TO WELCOME ASSEMBLY MEMBER NAZARIAN.

>> THANK YOU SO MUCH, AND THANK YOU FOR THE CALIFORNIA COLLABORATIVE FOR DOING A WONDERFUL JOB OVER THE LAST 7 WEEKS, ORGANIZING AND BRINGING EVERYONE TOGETHER, AND TODAY OF COURSE TALKING ABOUT ONE OF THE CRITICAL ISSUES THAT HAS BEEN IMPACTING THE AGING COMMUNITY.

ISOLATION. I WANTED TO TAKE A MOMENT AND JUST REFLECT VERY BRIEFLY AND COMMENT ON YESTERDAY'S BUDGET THAT CAME OUT. BECAUSE I THINK THAT IS GOING TO TRUMP ANYTHING ELSE WE ARE TRYING TO THINK ABOUT. AND MY DAUGHTER IS MAKING HER WAY INTO THE KITCHEN SO YOU ARE GOING TO HEAR A LITTLE BIT OF NOISE IN THE BACKGROUND.

BUT IT IS CRITICAL, THAT WE, I WANT TO GIVE A BRIEF MESSAGE, AND SAY IT IS CRITICAL, AS WE MOVE FORWARD AND BECOME MORE AWARE OF THE CUTS AND BEING (CHILD) SORRY, GIVE ME A SECOND.

IT'S CRITICAL THAT WE FIGURE OUT HOW WE WORK TOGETHER, BY NOT CANNIBALIZING ONE ANOTHER. IT'S IMPORTANT THAT WE DON'T RETREAT IN (CHILD) (CHUCKLE). IMPORTANT THAT WE DON'T RETREAT INTO OUR SILOS. --HANG ON FOLKS.

>> LIFE DURING COVID-19, EVERYONE'S HOUSES THESE DAYS I AM SURE A LOT OF YOU CAN RELATE. (CHUCKLE), GIVE HIM A MINUTE, AS THOSE ARE AWARE, AND BEEN DIGESTING. THE BUDGET IS GOING TO TAKE THE FOCUS, VERY MUCH CHANGES AS A RESULT OF COVID-19, GOING FROM HUGE SWING PURR PLUS TO DEFICIT. HEAR MORE NOW HE IS BACK ABOUT HOW THE LEGISLATURE IS GOING TO HANDLE THAT TASK.

>> WELL THE LEGISLATURE IS GOING TO FIGURE HOW TO MOVE FORWARD WITH THIS, AND

TRY TO IN A COLLABORATIVE WAY, WORK WITH THE GOVERNOR, BUT AT THE SAME TIME, SOME CUTS HAVE BEEN MADE I THINK IT IS GOING TO BE CRITICAL FOR US TO FIGURE HOW WE ORGANIZE WITH ONE ANOTHER AND MAKE SURE WE ARE NOT RETREATING INTO SILOS
LOOKING AT ONLY PROTECTING OUR SPECIFIC PROGRAMS AND DOING IT AT THE EXPENSE OF ONE ANOTHER, THAT'S GOING TO BE CRITICAL. ONE TAKE AWAY IS HOW DO WE BECOME BETTER PREPARED AND ORGANIZING AND MAKING SURE WE CAN COLLABORATE TOGETHER, SO, WE ALL MOVE FORWARD. INCREMENT TALLY BUT NOT HAVE SEVERE LOSSES.
BECAUSE IF EVERYONE STICKS TO THEIR GUNS OF WHAT IT IS THEY WANT TO PROTECT, THEN IT IS GOING TO MAKE CHAOS AND EASIER TO DISCREDIT EVERYONE. SO I AM LOOKING FORWARD TO ORGANIZING STEPS WE ARE ALL GOING TO MAKE TOGETHER TO COLLABORATE AND FIGURE OUT HOW WE CAN ALL BE ABLE TO AT LEAST HAVE A MODICUM OF A WIN MOVING FORWARD IN THE DIRE TIMES.
WITH THAT THANK YOU AGAIN FOR PUTTING TOGETHER THIS PROGRAM AND ALSO COVERING A VERY IMPORTANT ASPECT OF ISOLATION, WHICH IN AREAS LIKE LA FOR EXAMPLE, IT'S SEVERELY IMPACTING US. AND HURTING OUR AGING POPULATION, THANK YOU VERY MUCH EVERYONE.

>> GREAT THANK YOU SO MUCH, WE WILL JUMP ON OVER TO SARA TO GIVE A QUICK UPDATE ON THE MAY REVISE AND SOME OF THE HOT TOPICS FOR THIS GROUP ON AGING ADULTS AND THOSE WITH DISABILITIES.

>> OKAY, THANK YOU SO MUCH, IT IS QUITE DISTRESSING TO BE WHERE WE ARE TODAY, AND AS YOU ALL KNOW, YESTERDAY, GOVERNOR NEW SOME, PRESENTED MAY REVISION, AND ACCOUNTS FOR CHANGES IN REVENUES AND PROPOSED CHANGES TO EXPENDITURES FROM THE JANUARY BUDGET.

I THINK IT IS UNBELIEVABLE TO THINK IN JANUARY THE STATE'S FISCAL OUT LOOK PROJECTED A \$6

BILLION SURPLUS.

WE HAVE TAKEN A DRASTIC TURN DUE TO THE COVID-19 CRISIS AS WE KNOW. FACING PROJECTED \$A 4 BILLION DEFICIT.

WE ARE HERE TODAY BECAUSE COVID-19 WAS A CLOSE IN THE STATE.

ASSOCIATED INCOME, SALES TAX, AND CORPORATE INCOME TAX. ALL THE WHILE WE HAVE ALL SEEN FIRSTHAND HOW JUST DEVASTATING THIS VIRUS HAS BEEN ON THE MOST VULNERABLE POPULATION AND THOSE WE CARE ABOUT, OLDER ADULTS AND PEOPLE WITH DISABILITIES AND CAREGIVERS.

SO TO ADDRESS THE DEFICIT, GOVERNOR IS RELYING ON A NUMBER OF DIFFERENT S, FIRST HE IS USING RESERVES WE HAVE. RAINY DAY FUND, SAFETY NET, AND PROP 98 FOR EDUCATION. AND THAT WILL ACCOUNT FOR 15% OF CLOSING THE BUDGET DEFICIT. NEXT THEY ARE USING MONEY FROM THE FEDERAL GOVERNMENT, AS WE ALL KNOW, THERE WAS FUNDING RECEIVED THROUGH THE FEDERAL CARES ACT. ALL TOTALLED THAT TOGETHER WILL ACCOUNT FOR 15% OF CLOSING THE \$54 BILLION DEFICIT. THIRD HE HAS PROPOSED ELIMINATING ANY AUGMENTATIONS OR NEW PROGRAMS PROPOSED IN JANUARY OF THIS YEAR. I WANT TO SAY, IT IS A MAJORITY OF THEM, NOT ALL. SO, THERE ARE THOSE THAT IN SOME DIFFERENT AREAS WERE PRO ED BUT BY AND LARGE PULLED BACK FUNDING FOR PROGRAMMED PROPOSED EARLIER THIS YEAR. HE IS BORROWING FROM SPECIAL FUNDS AND DEFERRALS TO NEW FISCAL YEARS, ACCOUNTS FOR 20%. AND UNFORTUNATELY, REDUCTIONS OR PROGRAM ELIMINATIONS WILL ACCOUNT FOR 26% OF CLOSING THE \$54 BILLION DEFICIT. HE OUT LINED REDUCTIONS WITH A CAVEAT. THESE ARE CUTS THAT CAN BE TRIGGERED AND ELIMINATED WITH FUNDING FROM THE FEDERAL GOVERNMENT. HE WAS CALLING ON CONGRESS AND THE PRESIDENT TO SUPPORT SPEAKER PELOSI'S HERO ACT, HE REALLY WANTS TO FEDERAL GOVERNMENT TO SOME OF THE RESPONSIBILITY FOR OUR BUDGET DEFICIT.

WE KNOW IT PAINTS A PICTURE OF THE STATE'S PRIORITIES, AND HE PRE ED THE REVISE

YESTERDAY, HE OUT LINES WHAT HE SEES THE PRIMARY VALUES THAT UNDERScore DECISIONS AND VALUES HE SEES AS HOLDING CONSTANT REGARDLESS OF FISCAL OUT LOOK. FIRST WAS EDUCATION AND INVESTING IN THE FUTURE AND CHILDREN. HE HAS TRIED TO DO A LOT TO PREVENT THE \$19 BILLION IN LOSSES FROM THE 98 FUND, THEY WILL FEEL A LITTLE CRUNCH THERE.

HE HAS DONE A LOT TO MINIMIZE THE IMPACT OF THAT, SECOND VALUE WAS COMMITMENT TO PUBLIC HEALTH, PROTECTING HEALTH AND SAFETY THROUGH COVID-19 RESPONSE AND MAINTAINING MEDI-CAL ELIGIBILITY.

THIRD VALUE WAS PUBLIC SAFETY, POLICE, FIRE, CORRECTIONS SYSTEM. AND FOURTH HE SAID HIS VALUE IS OUR PEOPLE, HE SPECIFICALLY CALLED OUT THOSE PEOPLE WHO ARE MOST VULNERABLE AND IMPACTED BY COVID-19, HE DISCUSSED FAMILIES WHO HAVE BEEN JUST DEVASTATED BY THIS.

BUT I DO NOTE IN REMARKS YESTERDAY, HE DID NOT CALL OUT OLDER ADULTS OR PEOPLE WITH DISABILITIES, WE ALL KNOW ARE THOSE HARDEST HIT BY THIS CRISIS.

FOLLOWING IS A HIGH LEVEL SUMMARY OF WHAT'S IN THE MAY REVISE, I DO WANT TO NOTE THAT I GOT MOST OF THIS INFORMATION FROM THE BUDGET SUMMARY THAT WAS RELEASED YESTERDAY, BUT SINCE THAT TIME, THE BUDGET DETAIL HAS ALSO BEEN RELEASED AND I GOT A BIT MORE INFORMATION IN DETAILS. I AM SURE OTHERS WILL HAVE MORE TO ADD, BUT THERE IS 3 BUCKETS OF PROPOSALS, FIRST ARE THOSE THAT REVERSE THE EARLIER PROPOSALS, OR BUDGET AUGMENTATIONS, I WANT TO CALL OUT THE ELIMINATION OF THE AUGMENTATION FOR CAREGIVER RESOURCE CENTERS, WHICH PROVIDE CRITICAL SUPPORT TO CALIFORNIA'S UNPAID FAMILY CAREGIVERS, LAST YEAR THE CAREGIVER RESOURCE CENTERS WERE GIVEN \$30 MILLION OVER A 3 YEAR PERIOD AND THIS BUDGET ELIMINATES THAT.

HE HAS WITH DRAWN PROPOSAL TO PROVIDE FULL SCOPE MEDI-CAL TO UNDOCUMENTED OLDER ADULTS, PROPOSED IN JANUARY AND NOW RESCINDED, IT IS IMPORTANT TO NOTE IN THE MAY

REVISE, THEY ARE MAINTAINING MEDI-CAL ELIGIBILITY FOR UNDOCUMENTED CHILDREN AND YOUNG ADULTS.

THIS IS IN ORDER TO HELP STATE'S LOW INCOME RESIDENTS RESPOND TO COVID-19. I THINK IT IS IMPORTANT TO NOTE WE KNOW THOSE SAME INDIVIDUALS OVER THE AGE OF 65 WILL ALSO HAVE TO RESPOND, SO IF FOR SOME REASON THEY ARE NOT EXTENDING TO OLDER ADULTS BUT THEY ARE TO THE YOUNGER POPULATION.

NEXT ELIMINATION WAS ELIMINATION OF EXPANSION OF MEDI-CAL TO AGED BLIND AND DISABLED INDIVIDUALS WHO ARE BETWEEN 123-138% OF THE FEDERAL POVERTY LEVEL, AGAIN SOMETHING PROPOSED EARLIER, THAT WAS INCLUDED IN THE BUDGET ACT OF LAST YEAR, BUT SINCE BEEN RESCINDED.

THEY HAVE PUT ON HOLD THEY PROPOSAL TO IMPLEMENT THE CAL AIM PROGRAM OR WHAT IS KNOWN AS THE CALIFORNIA ADVANCING AND INNOVATING MEDI-CAL. ESSENTIALLY THIS INITIATIVE THOUGHT TO IMPROVE THE DELIVERY OF OUR SYSTEM BY ADOPTING A MORE PERSON APPROACH TO CARE, RECOGNIZED THE SOCIAL DETERMINE NANCY OF HEALTH AND SOUGHT INTEGRATE SERVICES AND MAKE A EFFECTIVE SYSTEM.

ON HOLD FOR NOW, WE DON'T KNOW WHEN EXACTLY OR WHAT IT WILL LOOK LIKE WHEN THEY DECIDE TO MOVE FORWARD WITH IT.

THERE ALSO WERE A NUMBER OF REDUCTIONS TO THE DEVELOPMENTAL SERVICES PROGRAMS.

PROVIDER RATE REDUCTIONS THAT HAD BEEN AUGMENTS I BELIEVE IN THE LAST YEAR OR TWO OF

THE BUDGET. ADDITIONALLY, CUTS TO, THIS IS WHAT I SINCE HEARD THAT WAS NOT INCLUDED IN

THE BUDGET SUMMARY ON THE WEBSITE, GOVERNOR'S WEBSITE, CUTS TO NEW OF \$8.5, LONG

TERM CARE OMBUDSMAN OF \$2 MILLION, AGES DISABILITY RESOURCE CONNECTIONS PROGRAMS,

WHICH WERE GIVEN \$5 MILLION LAST YEAR.

WHICH WAS TREMENDOUS, UNFORTUNATELY THEY ARE PULLING BACK \$3 MILLION OF THOSE FUNDS.

NOW I WANT TO TALK ABOUT THE NUMBER OF CUTS AND PROGRAM ELIMINATIONS THAT THE

GOVERNOR HAS SAID WILL BE RESTORED IF THE FEDERAL GOVERNMENT PROVIDES SUFFICIENT FUNDING, SO, AGAIN, IN A WAY YOU CAN SAY THESE PROGRAMS WITH BEING HELD AS YOU KNOW, AS A WAY FOR, TO ENCOURAGE THE FEDERAL GOVERNMENT TO PROVIDE FUNDING TO THE STATE. SO, IF WE DO GET THE FUNDING THESE CUTS WOULD BE RESTORED.

HE HAS PROPOSED TO ELIMINATE COMMUNITY BASED ADULT SERVICES PROGRAM. AS WE KNOW PROVIDES REALLY IMPORTANT HEALTH AND THERAPEUTIC AND SOCIAL SERVICES IN THE COMMUNITY AND IN A SETTING TO ADULTS.

PROPOSED TO ELIMINATE THE MULTISENIOR SERVICES PROGRAM. ANOTHER CORNER STONE OF THE PROGRAM, THAT PROVIDES CASE MANAGEMENT, CARE COORDINATION AND PURCHASE OF SERVICES TO THE MOST VULNERABLE OLDER ADULTS AT RISK AND DEEMED ELIGIBLE FOR INSTITUTIONALIZATION IN A NURSING HOME.

HE HAS ELIMINATED FROM THE MEDI-CAL AL BENEFITS, AUDIOLOGY, INCONTINUE NANCY WASHES, SPEECH THERAPY, OP , PODIATRY, OCCUPATIONAL THERAPY, OTHERS.

REALLY SIGNIFICANTLY WE HAVE NOW GONE BACK TO THE PLACE WE ARE FACING A 7% REDUCTION IN NUMBER OF HOURS FOR IN HOME SUPPORTIVE SERVICES PROGRAM. A CUT WE HAVE SEEN IN YEARS PAST, THAT ADVOCATES FOUGHT HARD TO RESTORE, AGAIN, ACROSS THE BOARD REDUCTION OF 7% OF THE HOURS THAT PEOPLE RECEIVE UNDER THE IN HOME SUPPORTIVE SERVICES PROGRAM. AND THEN ALSO, A FREEZE TO THE IHSS COUNTY ADMINISTRATION FUNDING.

AT THE 2019-2020 LEVEL. THERE WERE SOME OTHER CUTS THAT ARE CATEGORIZED A LITTLE BIT DIFFERENTLY, ONE IS FOR THE PROVISIONS REGARDING MEDI-CAL ESTATE RECOVERY, A LITTLE COMPLICATED BUT BASICALLY THE MAY REVISION WANTS TO REINSTATE THE STATE'S FORMER APPROACH TO STATE RECOVERY, SEN LY, STATE HAS BEEN COLLECTING ON INSTITUTIONAL PROGRAMS ONCE THE BENEFICIARY DIES.

NOW THEY ARE GOING TO INCREASE THE AMOUNT THAT CAN BE RECOVERED IN A PERSON'S ESTATE TO BE EQUAL TO ALL OF THEIR MEDICARE EXPENSIONS UNDER THE MEDI-CAL PROGRAM.

BASICALLY FOR THE SURVIVING SPOUSE, THEY WILL HAVE TO BE RESPONSIBLE FOR GIVING BACK TO THE STATE A MUCH GREATER PORTION OF RESOURCES THAN THEY ARE PREVIOUSLY--THAN THEY ARE DOING RIGHT NOW.

THE SSI, SSP GRANTS, WE HAVE ALL KNOWN THERE IS A NEED TO INCREASE OUR GRANTS TO THIS POPULATION. BUT, THEY ARE ESSENTIALLY FREEZING THE AMOUNT THAT INDIVIDUALS GET TO BE EQUIVALENT TO WHAT THEY RECEIVED IN THE PRIOR YEAR.

SO IT IS ESSENTIALLY REDUCING THE STATE'S PORTION OF THE GRANT, WHAT WOULD HAVE BEEN A COST OF LIVING ADJUSTMENT IN THAT, FINALLY I WANT TO NOTE THAT WE KNOW THAT SKILLED NURSING FACILITIES IN THE COVID-19 CRISIS HAVE BEEN UNDERGOING A TREMENDOUS AMOUNT OF DIFFICULTY.

THEY HAVE BECOME A HOT SPOT FOR THE COVID-19 CRISIS, AND THE STATE IN RESPONSE HAS GIVEN A 10% RATE INCREASE FOR 4 MONTHS TO SKILLED NURSING FACILITIES TO ACCOUNT FOR THE COVID-19 CRISIS.

IN FINAL CLOSING I WANT TO NOTE THAT IN A BUDGET CALL YESTERDAY THE CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY CONFIRMED THEY REMAIN COMMITTED TO THE MASTER PLAN FOR AGING, DOESN'T OUT LINE--MAY REVISE DOESN'T OUT LINE CHANGES TO THAT EFFORT BUT I THINK IMPORTANT FOR EVERYBODY ON THE CALL TO THINK--REALLY GIVE A LOT OF CONSIDERATION TO WHAT THE REDUCTIONS MEAN FOR FUTURE PLANNING EFFORTS. GIVEN THAT WE STILL HAVE SIGNIFICANT SYSTEM ISSUES.

AND THESE PROPOSED REDUCTIONS AND ELIMINATIONS WILL DRASTICALLY DAMAGE THE HOME AND COMMUNITY BASED SYSTEM AND SYSTEM AND SERVICES AND SUPPORTS THAT PEOPLE RELY ONTO REMAIN IN THE COMMUNITY AND AVOID INSTITUTIONALIZATION. I THINK THE CONVERSATION ON MAY 28 WITH THE SEC STAIR AS PART OF THE MASTER PLAN MEETING WILL BE IMPORTANT AND I ENCOURAGE YOU TO LISTEN TO THAT, THAT IS IT SORRY IF I WENT LONG, UNFORTUNATELY THERE IS A LOT TO COVER.

>> THANK YOU, I KNOW WE ARE GETTING A FEW QUESTIONS TYPED IN I THINK WE HAVE EXPLAINED THIS BEFORE, BUT TOUCH ON IT AGAIN, WE DISABLED THE CHAT FEATURE, BECAUSE OF ZOOM BOMBERS, SOME OF YOU MAY HAVE EXPERIENCED DURING THE FIRST WEBINAR, IF YOU HAVE A QUESTION, YOU CAN TYPE IT INTO THE Q AND A BOX, AND WE WILL READ THEM OFF. ONES I SEE COMING IN RIGHT NOW, SORT OF MORE INFORMATION ABOUT ARE THERE OTHER WAYS YOU ENVISION TO RAISE REVENUE, ESPECIALLY IF THE TRIGGER CUTS HAPPEN. WE DON'T GET THE ACT MONEY THAT THE DEFICIT IS RELYING ON, THOUGHTS ON THAT?

>> I DON'T IN PARTICULAR, BUT I KNOW THAT IS SOMETHING THAT THE LEGISLATURE IS GOING TO BE LOOKING AT NOW, I MEAN THIS IS SUCH AN IMPORTANT TIME RIGHT NOW, I KNOW THE LEGISLATURE IS ENGAGED, AS ASSEMBLY MEMBER SAID, THIS IS WHEN THEY HAVE THE OPPORTUNITY TO WEIGH IN AND I THINK THEY ARE CERTAINLY GOING TO BE LOOKING AT ANY OPTIONS THAT ARE AVAILABLE. SO STARTING ON MONDAY THE LEGISLATURE WILL BE REVIEWING ALL THESE PROPOSALS I ENCOURAGE EVERYBODY TO PARTICIPATE REMOTELY HOWEVER YOU CAN. YES, GREAT, AND THEN NINA, YOU MUTE YOURSELF YOU ARE A PRESENTER AND YOU HAVE A QUESTION, GO AHEAD

>> YES, HI, THANK YOU, I AM GOING TO TAKE AWAY FROM MY OWN TIME WITH MY QUESTION. I WAS TRYING TO UNDERSTAND YOUR PRESENTATION CORRECT ME IF I AM WRONG. SOUNDED LIKE THE TRIGGER CUTS INCLUDE REALLY THESE OPTIONAL MEDI-CAL BENEFITS SO TO SPEAK, MSP, C BASS OR MEDI-CAL ALSO A TRIGGER CUT OR HAPPENING NO MATTER WHAT?

>> YES, THANK YOU FOR THE CLARIFICATION, FIRST BE CAREFUL HOW YOU USE THE WORD

TRIGGER, HE SAID IT IS THE OPPOSITE. THESE CUTS ARE CUTS, NO MATTER, RIGHT NOW THEY ARE PROPOSED CUTS OR ELIMINATIONS, IF THE FEDERAL GOVERNMENT COMES TO THE STATE WITH MORE MONEY, THAT WILL TRIGGER A RESTORATION, IN THE PAST WE USE TRIGGER TO MEAN CUTS. NOW WE USE TRIGGER TO MEAN RESTORATION OF FUNDING, MEDI-CAL ESTATE RECOVERY PROVISION IS NOT TIED TO THAT FEDERAL GOVERNMENT ACTION. THE ONES THAT ARE TIED TO THE FEDERAL GOVERNMENT ACTION, ARE THE C BASS AND MSSP ELIMINATIONS, IHSS 7% REDUCTION. THE REDUCTION IN ADULT DENTAL BENEFITS AND ELIMINATION OF AUDIOLOGY. ALL THOSE MEDI-CAL OPTIONAL SERVICES. INCLUDING OCCUPATIONAL AND PHYSICAL THERAPY, ACUPUNCTURE, SPEECH THERAPY, ET CETERA. DOES THAT ANSWER YOUR QUESTION?

>> ABSOLUTELY, THANK YOU SO MUCH.

>> GREAT I DON'T SEE ANY OPEN QUESTIONS BUT I HAVE SOME YOU KNOW THOUGHTS AND MAYBE THINGS TO REFLECT ON ABOUT YOU KNOW THE DIFFERENCE HERE AND KIND OF TOUCHED ON THIS. AND OF COURSE EVERYBODY IS TAKING A HIT RIGHT, BECAUSE IT IS SO DRASTIC, AND THAT IT IS DIFFERENT THAN HAVING YOU KNOW, SORT OF A FIGHT OVER PRIORITIES. BECAUSE YOU ARE GOING TO SPEND TAX DOLLARS ON THIS VERSUS THIS SO MUCH AS A BROAD BASED WE ARE MAKING HARD CHOICES WE DON'T WANT TO MAKE. THOSE ABLE TO LISTEN YESTERDAY AND HEAR A LITTLE BIT MORE ABOUT HIM, NOT THEY ARE THINGS THEY ENVISION HAVING TO DO OR WANT TO DO HOW THAT SHIFTS THE ADVOCACY AROUND THESE CONVERSATIONS I DON'T KNOW IF YOU HAVE THOUGHTS ON THAT?

>> YEA, THANK YOU FOR THAT I THINK IT IS A REALLY IMPORTANT POINT I WILL SAY THEY MADE VERY CLEAR DECISIONS IN PROGRAM AREAS TO PROTECT CERTAIN POPULATIONS. I AM NOT SAYING THAT OUR STATE WANTS TO GO AND HURT OLD PEOPLE, BUT I DO THINK WE HAVE

TO BE VERY CAREFUL, WE SEE TIME AND TIME AGAIN WITH THESE BUDGET CRISIS THAT WE FACE, THESE PROGRAMS AND SERVICES THAT SERVE THE MOST VULNERABLE POPULATION, WHICH FRANKLY IN COMPARISON TO A LOT OF INVESTMENTS WE MAKE IN OTHER PARTS OF THE SYSTEM ARE MINOR. NOT MINOR I MEAN THEY COST MONEY, BUT WHEN YOU TALK ABOUT ELIMINATING \$3 MILLION INCREASE TO ADRC OR \$2 MILLION FROM BUDS MEN, OR \$8 MILLION FROM NUTRITION. THAT IS DUST COMPARED TO THE OTHER DOLLARS, I AM ALL FOR EDUCATION, I HAVE KIDS BUT I THINK I AM REALLY CONCERNED WITH HOW HARD THIS BUDGET HITS OLDER ADULTS AND PEOPLE WITH DISABILITIES.

GIVEN THE PARTICULARLY CRISIS WE ARE IN WITH COVID-19. THAT SAID I AGREE WITH IN TERMS OF ADVOCACY WE HAVE TO FIGURE OUT A WAY TO HAVE A VOICE THAT IS VERY STRONG AND CALLS ATTENTION TO ISSUES OF AGEISM AND ABLISM, BECAUSE I THINK THERE IS SIGNIFICANT CONCERN ABOUT THE MESSAGE WE ARE SENDING.

>> THANK YOU FOR THAT, WE DO HAVE ONE QUESTION HERE, ASKING FOR SOME CLARIFICATION, HOW YOU CAN USE CARES ACT FUNDING TO BACK THE CUTS WHEN THEY ARE EARMARKED SPECIFICALLY FOR COVID-19 ISSUE

>> GOOD QUESTION, THANK YOU, I SEE THAT, OKAY, SO, I WAS HAVING THE SAME QUESTION, MY UNDERSTANDING AND I AM SURE BUDGET FOLKS COULD EXPAND ON THIS, BUT MY UNDERSTANDING IS THE CARES ACT PROVIDED A NUMBER OF EARMARKED PLACES THAT THE STATE HAD TO INVEST, WE HAD IN OUR SERVICE AREAS A NUMBER OF SPECIFIC DOLLARS DISTRIBUTED TO THE STATE FOR NUTRITION AND OTHER SERVICES AND SUPPORTS. BUT THE STATE DID HAVE SOME FLEXIBILITY IN SOME OF THE DOLLARS IN HOW THEY SPENT THEIR CARES ACT DOLLARS. ONE EXAMPLE IS GOVERNOR NOTED IN HIS ADDRESS YESTERDAY THAT 4.4 BILLION OF CARES ACT DOLLARS THAT WERE DISCRETIONARY THAT COULD HAVE GONE TO THE GENERAL FUND HE CHOSE TO

PUT INTO PROP 98, THAT IS DISCRETIONARY, SO, THERE IS A LITTLE BIT OF FLEXIBILITY THERE, THEY DID HAVE TO PUT ABOUT 2 BILLION ALREADY INTO EDUCATION, BUT HE INCREASED IT BY 4.4, AGAIN I DON'T WANT IT TO BE A GENERATIONAL WAR, OLDER VERSUS YOUNGER IT IS IMPORTANT TO NOTE SOME DEGREE OF FLEXIBILITY IN DISCRETION THE STATE HAS

>> THANK YOU, GOOD CLARIFICATION, AND CHRISTINA FROM CFILC WANTS TO SHARE WITH FOLKS THERE IS ALSO PROPOSED 2.1 MILLION CUT FROM DEPARTMENT OF REHABILITATION BUDGET. ONE MORE TO ADD TO OUR LIST THAT MAYBE WAS NOT AS CLEAR IN THE BUDGET CUTS,

>> CAN YOU CLARIFY THAT CUT IS THAT TO INDEPENDENT LIVING SERVICES OR DOR?

>> SPECIFIC TO INDEPENDENT LIVING CENTER.

>> OKAY, THANK YOU FOR THE INFORMATION.

>> WELL, ANYBODY ELSE, LAST QUESTIONS BEFORE WE MOVE ONTO OUR PANEL? OKAY, AS I MENTIONED WE ARE LOOKING FORWARD TO HAVING A MORE IN DEPTH BUDGET DISCUSSION IN TWO WEEKS ON THE NEXT WEBINAR, HOPEFULLY HAVE MORE DETAILS, AND WILL BE ACTION BY THE LEGISLATURE AND DISCUSSIONS, MORE TO REPORT OUT, SO, PLEASE DO REACH OUT IF YOU HAVE SPECIFIC THINGS YOU WOULD LIKE TO SEE COVERED IN THE WEBINAR AND ALSO DO A SURVEY AT THE END ABOUT FUTURE WEBINAR TOPICS, THANK YOU SO MUCH, HAPPY TO HAVE YOU BOTH HERE. WITH ALL YOUR EXPERTISE, AND WE WILL MOVE ON NOW TO OUR PANEL.

I AM VERY EXCITED ABOUT.

WE HAVE QUITE A ROBUST PANEL, GOING TO COVER ASPECTS OF ISOLATION, GOING TO KICK IT OFF. (ON SCREEN) LOTS OF DIFFERENT PERSPECTIVES, WORKING HARD TO ADDRESS

SOCIAL ISOLATION, DURING THESE STRANGE UNPRECEDENTS TIMES.

**GOING TO SHARE WITH YOU SOME OF THEIR BEST PRACTICES FOR WHAT IS HAPPENING. I WILL
HAND IT OFF TO YOU TO GET US STARTED**

**>> NINA: GOOD MORNING EVERYBODY. I AM GOING TO DIVE RIGHT IN, BECAUSE I KNOW
WE DON'T HAVE A TON OF TIME. I AM NINA WITH AARP CALIFORNIA, I AM ASSOCIATE STATE
DIRECTOR OF THE COMMUNITY. IT IS A MEMBERSHIP ADVOCACY AND EDUCATION ORGANIZATION.
WE REPRESENT 3.3 MEMBERS IN CALIFORNIA. AND OUR POPULATION, OR MEMBERSHIP--SORRY,
POPULATION COVERS FOLKS 50 AND OVER.**

**SO I AM REALLY GLAD TO HAVE THIS OPPORTUNITY TO SPEAK TO YOU ALL ABOUT A SUBJECT THAT IS
SO BADLY IN NEED OF IN DEPTH EXPLORATION, INSIGHTS, THIS IS A SERIOUS PROBLEM, SOCIAL
ISOLATION AND LONELINESS AMONG OLDER ADULTS AND I AM REALLY GRATEFUL WE ARE HAVING
THAT CONVERSATION TODAY.**

**AARP'S GENERAL POLICY IS THAT PUBLIC HEALTH OFFICIALS AND POLICYMAKERS SHOULD
RECOGNIZE SOCIAL ISOLATION AS AN IMPORTANT HEALTH ISSUE AND SOCIAL DETERMINANT OF
HEALTH AND DEVELOP EVIDENCE BASED STRATEGIES TO IDENTIFY ADDRESS AND TRACK THE
PROBLEM ON A PERSONAL LEVEL.**

**FIRST THING I AM GOING TO SHARE WITH YOU ARE THE FOUNDATIONS LONELINESS AND SOCIAL
CONNECTIONS STUDY CONDUCTED IN 2018. TO BE REALLY CLEAR THE STUDY FOCUSED ON A
NATIONAL STUDY, A LITTLE STATE DATA I WILL GET TO, FOCUSED ON FOLKS 45 AND OLDER, DID NOT
FOCUS ON ADULTS WITH DISABILITIES, SO WE WOULD LOVE TO BE ABLE TO INFORM OUR POLICY
MAKES BY SEE DATA THERE MIGHT BE OUT ON THAT. SO AS YOU KNOW, SOCIAL ISOLATION AND
LONELINESS SHARE SIMILARITIES AND OFTEN OCCUR TOGETHER BUT THEY CAN BE DISTINCT AND
OCCUR INDEPENDENT FROM EACH OTHER, FOR EXAMPLE YOU ARE LIVE WITH SOMEONE AND FEEL
LONELY. VERY OBJECTIVE AND HAS MEASURABLE FACTORS, SUCH AS THE SIZE OF ONE'S SOCIAL**

NETWORK, FREQUENCY OF CONTACT, AVAILABLE TRANSPORTATION, ACCESS TO TECHNOLOGY AND OTHER RESOURCES.

LONELINESS HOWEVER IS MORE PERSONAL AND SUBJECT AS, HOWEVER BOTH ARE PUBLIC HEALTH ISSUES, I AM GOING TO HIT TOP LINES FROM THE STUDY AND I KNOW THAT THEY WILL SEND YOU A LINK TO EVERYTHING I AM GOING TO MENTION. ACCORDING TO THE FOUNDATION'S RESEARCH ABOUT 1/3 OF U.S. ADULTS AGE 45 AND OLDER REPORT FEELING LONELY AND THIS NUMBER IS GROWING. WE SEE IMPACTS ON INDIVIDUAL THAT ARE LOW INCOME, THOSE WHO ARE LOW INCOME ARE ESPECIALLY VULNERABLE, NEARLY HALF OF MIDLIFE AND OLDER ADULTS. WITH ANNUAL INCOMES OF LESS THAN 25 THOUSAND REPORT BEING LONELY.

FULL 10 MILLION OVER THE AGE OF 50 LIVE IN POVERTY IN THE UNITED STATES. AND I AM SAD TO SAY THAT IS GOING TO INCREASE SIGNIFICANTLY.

IN TERMS OF RACE AND ETHNICITY, OUR STUDY, THIS IS TO FOCUS ON LONELINESS, INDICATES LONELINESS HAS SAME INCIDENTS ACROSS RACE AND ETHNICITY, WE WOULD LOVE TO SEE OTHER DATA SOURCES SHOWING OTHER WISE.

WE ALSO LOOK TO ADD LONELINESS AMONG THE LGBTQ COMMUNITIES, AND FOUNDATION FOUND THAT MIDLIFE AND OLDER A S WHO A , ARE MORE LIKELY TO BE LONELY.

LET ME JUMP INTO HEALTH EFFECTS, I THINK MANY OF US HEARD THIS ALREADY, LONG TERM EFFECTS OF SOCIAL ISOLATION ARE VERY REAL, OVER PROLONGS PERIOD, IMPACT OF SOCIAL ISOLATION IS HARMFUL AS SMOKING 15 CIGARETTES A DAY. IN FACT IT HAS BEEN FOUND THAT ISOLATION IS MORE DANGEROUS TO ONE'S HEALTH THAT OBESITY AND LINKED TO GREATER LIKELIHOOD OF EARLY DEATH. COGNITIVE DECLINE, AND OVER ALL HEALTH.

ALSO TELLS US NOT SURPRISINGLY THIS HAS IMPACT ON MEDICARE, BY EXAMINING THE DATA STUDY SHOWED LACK OF SOCIAL CONTACT, IS ASSOCIATED WITH ESTIMATED 6.7 BILLION ANNUAL SPENDING, NATIONAL NUMBERS, STUDY IT DOWN TO INDICATE IT IS ABOUT 608 PER YEAR MORE PER PATIENT.

I WANT TO JUMP A BIT INTO A BIT OF WHAT CAN HELP AND WHAT MAY OR MAY NOT HELP. SO, WHAT CAN HELP OF COURSE IS GETTING TO KNOW ONE'S NEIGHBORS, THAT CAN REDUCE LONELINESS, AND IN FACT 33% OF MIDLIFE AND OLDER ADULTS WHO SPOKE TO THEIR NEIGHBORS ARE NOT LONELY. WE ALSO HEAR A LOT OF THE BENEFITS OF CHURCH, AND VOLUNTEERING AND OTHER MEANS OF REACHING OUT AND BEING INVOLVED IN YOUR COMMUNITY.

I WANT TO TOUCH A BIT ON WHAT IS CALLED THE DIGITAL DIVIDE, ACCORDING TO OUR WORK. MIDLIFE AND OLDER ADULTS HAVE MORE THAN TRIPLED SINCE 2010, NOW HEAR 42% REPORT IN SOCIAL MEDIA. IT HAS POSITIVES AND NEGATIVES, IT DOESN'T CURVE SOCIAL ISOLATION. THAT BRINGS US TO DIGITAL DIVIDE. TECHNOLOGY HAS BOTH POSITIVE AND NEGATIVE EFFECT LONELINESS.

WHILE IT CAN HELP WITH FEELING CONNECTED AND LESS LONELY, MAYBE ATTENDING FOR EXAMPLE VIRTUAL CHURCH SERVICES, SOME REPORT FEELING MORE LONELY. THROUGH SOCIAL MEDIA, ACCORDING TO THE SURVEY. AND IN FACT, UNFORTUNATELY, WHEN ONE GOES ONLINE, IT CAN ACTUALLY IMPACT YOUR RELATIONSHIPS.

I THINK WE HEAR THIS FROM A LOT OF FOLKINGS, TECHNOLOGY TENDS TO AMPLIFY PREEXISTING ATTITUDES AND COULD BE ENHANCING POLARIZATION IN OUR SOCIETY. ANOTHER THING IS CHRONICALLY LONELY ADULTS ARE MORE LIKELY TO TURN TO ISOLATING ACTIVITIES TO COPE. THAT INCLUDES EATING--A LOT OF WHAT IS GOING ON RIGHT NOW, WATCHING TV, SERVING THE INTERNET, MESSING AROUND ON TWITTER. PEOPLE NOT CHRONICALLY LONELY WALK WITH A FRIEND OR GO OUT, OR TAKE A WALK WITH A LOVED ONE OR SOMEBODY THAT DOESN'T LIVE WITH YOU.

I HAD ALREADY MENTIONED SOME OF THE MANNERS THAT CAN HELP. ONE FINAL DATA POINT BEFORE I JUMP INTO SOME WORK GOING ON IN THE STATE. YOU WILL FIND THIS IN THE SURVEY I BELIEVE IS LINKED FROM THE AMERICAN COMMUNITY SURVEY. IN CALIFORNIA OVER 2 MILLION PEOPLE OVER THE AGE OF 50 LIVE ALONE OR IN A HIGHER RISK OF SOCIAL ISOLATION, WHICH OF

COURSE IS NOW MAGNIFIED BY SOCIAL DISTANCING REQUIREMENTS ACROSS THE STATE. AS WE KNOW, SOCIAL DISTANCING OR PHYSICAL DISTANCING AS MANY PREFER. HAD LED TO US SCALING BACK DOESN'T MEAN YOU HAVE TO BE ALONE, TECHNOLOGY IF YOU HAVE ACCESS TO IT CAN OFFER WAYS TO KEEP IN TOUCH WITH FAMILY AND FRIENDS AND NEIGHBORS AND LOVED ONES AND FACE TIMING AND VIRTUAL VISITS WITH LOVED ONES AND NURSING HOMES AND SO FORTH. UNFORTUNATELY WE HAVE TO HAVE VIRTUAL MEMORIALS RIGHT NOW BUT A WAY TO CONNECT WITH LOVED ONE. SO, AARP, I WANT TO GO INTO TOOLS, TRYING TO GO QUICKLY HERE, SOME TOOLS THEY HAVE TO HELP OLDER CALIFORNIANS STAY CONNECTED WE DO HAVE A SITE AT OUR FOUNDATIONS, CONNECT TO EFFECT. PROVIDES A LIST OF COMMUNITY ASSISTANCE PROGRAMS FOR MEDICARE FOOD AND JOB TRAINING. ALSO DURING COVID-19 AARP LAUNCHED A COMMUNITY CONNECTIONS TOOL, AVAILABLE IN SPANISH, AND ALLOW YOU TO PLUG INTO A NUMBER OF GROUPS AND ORGANIZE VOLUNTEERING, FOR EXAMPLE, PICK UP PRESCRIPTION, AS NOTED, MANY ACTIVITIES ARE OFFERED OFFERED ONLINE I HAVE DONE ONLINE FITNESS THROUGH MY GYM FOR EXAM. . BOOK CLUBS AND SO FORTH. MANY WAYS FOR PEOPLE TO CONNECT IN DIFFICULT TIMES, VOLUNTEERISM. AND THIS REALLY DOES CONNECT TO SOME OF THE WORK THAT THE STATE IS DOING, IDENTIFYING VULNERABLE ADULT INS YOUR NEIGHBORHOOD AND MAKE A PLAN TO MAKE SURE SOMEONE REACHES OUT TO THEM ON A REGULAR BASIS, BY PHONE TEXT E-MAIL OR VIRTUAL CHAT. OR GO OLD SCHOOL AND REACH OUT TO A FAMILY MEMBER OR FRIEND BY SENDING A LETTER OR POSTCARD. ENCLOSE A LETTER OR TWO TO SPARK A FOND MEMORY. LET ME JUMP INTO SOME OF THE WORK WE HAVE DONE AND ALL THESE TIPS AND TOOLS YOU FIND ON FOUNDATION AND VARIOUS THINGS YOU GET FROM THEM. DURING COVID-19 AARP WORKED WITH THE ER'S OFFICE ON THE CALIFORNIA FOR ALL RESOURCE CARD, WHICH SOME OF YOU MAY HAVE RECEIVED IN THE MAIL, IT IS A ONE STOP INFORMATION GUIDE ON COVID-19 FOR ALL CALIFORNIANS, DIRECTED TO OLDER

ADULTS AND PART OF THE CAMPAIGN TO STAY AT HOME SAVE LIVES CHECK IN.

THERE ARE TIPS AND TOOLS ON HOW TO COMBAT SOCIAL ISOLATION, AND FOOD INSECURITY.

UNFORTUNATELY THE TWO ARE LINKED. THE CARD IS AVAILABLE DIGITALLY, IN ENGLISH SPANISH OR CHINESE, AND JUST PING ME IF YOU HAVE QUESTIONS ABOUT THIS RESOURCE CARD. THIS HAS BEEN A REALLY GREAT TOOL I GOT ONE AT HOME MYSELF. UMM, AND WE HAVE ALSO SHARED AND I DID SEND AN EXAMPLE OF THE DIGITAL PRINT VERSION TO YOU A WHILE BACK. NOT SURE IF YOU SAW THAT. WHILE WE DID COMPILE A LONG LIST OF LOCAL GOVERNMENTS AND BUSINESSES ACROSS THE STATE. AND DID DISTRIBUTE ELECTRONICALLY, I ALREADY MENTIONED COMMUNITY CONNECTIONS I WILL SKIP THAT.

WE ARE CONTINUING TO CONNECT THROUGH FACEBOOK BUT ALSO HAVE TOWN HALLS EVERY THURSDAY, YOU CAN SIGN UP FOR, ON A VARIETY OF TOP I THINKS, RELATED TO COVID-19.

FINALLY, MASTER PLAN FOR AGING. SO, EVEN THOUGH THE MASTER PLAN FOR AGING HAS BEEN ON PAUSE, IT HAS BEEN WORK GOING ON BEHIND THE SCENES, SO THE STAKEHOLDER ADVISORY COMMITTEE. LED BY JUSTICE AND AGING.

DEVELOPED A LIST OF QUICK ACTION ITEMS AND HAVE FIVE MONTHLY MEETINGS WITH THE SECRETARY ON THESE QUICK ACTION ITEMS, AND I CAN SHARE THIS WITH EVERYBODY FOR PUBLIC DISTRIBUTION, BUT AMONG SOME RECOMMENDATIONS WERE QUICK ACTION ITEMS THAT THE STATE COULD IMPLEMENT IN ORDER TO REDUCE ISOLATION NEGLECT AND ABUSE, INCLUDING DEVELOPING AND EXPANDING LOCAL PLANS, CHECK IN, CAMPAIGN, LEVERAGE HEALTH PLANS TO ENSURE THEY ARE ACTIVELY ENGAGING MEDI-CAL TO ENSURE THEY ARE RECEIVING CARE AND SUPPORT.

PUBLIC HEALTH OUT REACH TO ALZHEIMER'S POPULATION, DETAILED IN THE LIST YOU WILL SEE, AND ALSO WORKING WITH COUNTIES AS DESIGNATED LOCAL PARTNER, STATE SHOULD DEVELOP A COORDINATED AND SHARED STATEWIDE PLATFORM THAT MAPS HOT SPOTS AND EMERGING NEEDS IN REALTIME. THIS WOULD BE USEFUL FOR MANY THINGS NOT JUST THOSE AT RISK OF ISOLATION OR POCKETS OF ISOLATION. BUT, WOULD ALSO HELP US DURING FIRE SEASON. AS WELL AS REALLY

IDENTIFYING AREAS WHERE FOOD INSECURITY IS ACUTE. I BELIEVE THAT IS WHAT I HAVE FOR YOU NOW.

I AM TRYING TO GO QUICKLY BUT I WILL PAUSE HERE.

>> GREAT THANK YOU SO MUCH, THANK YOU FOR THAT BROAD OVER VIEW AND SOME OF THOSE INTERESTING FACTS, I KNOW YOU KNOW AARP FOCUSES ON OLDER ADULLS AS YOU IMAGINE, SOME OF THE SAME IMPACTS EFFECT OTHERS WITH DISABILITIES AND OTHERS FEELING SOCIAL ISOLATION, THANK YOU FOR THAT AND THE RESOURCES. I WANT TO REMIND THOSE TO NOT RAISE YOUR HAND IF YOU HAVE A QUESTION, WE WILL GET TO THE Q AND A AND RUN THROUGH THEM, AS YOU HAVE QUESTIONS TYPE IN AND WHEN WE ARE DONE WE WILL RUN THROUGH THE QUESTIONS. I THINK WE HAVE A QUICK ANNOUNCEMENT AND MOVE ONTO THE NEXT PANEL.

>> THANK YOU, I JUST RESPONDING TO YOUR QUESTIONS AND COMMENTS ABOUT THE HANDOUTS I WANT TO REMIND FOLKS THAT HANDOUTS ARE AVAILABLE ON THE COLLABORATIVE WEBSITE. CCLTSS. FOR THIS PARTICULAR WEBINAR YOU DON'T HAVE TO DIG FAR, RIGHT ON THE HOME PAGE, SHE DID MENTION A LIST OF ADDITIONAL RESOURCES WE WILL BE POSTING THAT LATER TODAY, IN ADDITION NEXT WEEK WE WILL SEND OUT OUR SORT OF STANDARD ONGOING FOLLOW UP E-MAIL WITH A LINK TO THE RECORDING, AND AGAIN A LINK TO THE MATERIALS, BUT IF YOU HAVE A HARD TIME FINDING THEM OR YOU JUST WANT A QUICK RESPONSE E-MAIL ME AND I AM HAPPY TO REDIRECT YOU.

>> JANET: THANK YOU VERY MUCH, HOPE YOU CAN HEAR ME CLEARLY. I AM THE CEO OF METTA FUND AND BEEN HERE SINCE ABOUT 2017, A PRIVATE FOUNDATION IN SAN FRANCISCO, AND WE ARE DEDICATED TO HEALTH AND EQUITY AND AGING. WE PARTNER WITH NONPROFITS.

WHERE THERE IS COMMUNITY NEEDS AND WHERE WE CAN MAKE SYSTEMATIC CHANGE TO ADDRESS HEALTH INEQUITY.

IN 2017 WHEN I ARRIVED WE MADE A 10 YEAR COMMIT TO ADDRESS SOCIAL ISOLATION AND LONELY AMONG OLDER ADULTS.

HEALTH EQUITY IS REALLY WHERE WE ARE FOCUSED, LENS WE USE FOR GRANT MAKING AND PARTNERSHIP WORK. WE HAVE TAKEN ON THIS WICKED PROBLEM, MUST SAY I AM HAPPY PEOPLE ARE FOCUSSING ON IT NOW, SINCE WE STARTED IN 2016. IT PROPORTIONATELY EFFECTS THOSE WITH LOW INCOME AS YOU HEARD. AND THERE IS TRULY A LACK OF FUNDING REGARDING THE BUDGET AND REGARDING PROGRAMS AND INTERVENTIONS. AND I HAVE NO IDEA--ONE MOMENT PLEASE.

THANK YOU SORRY ABOUT THAT, NOT A CHILD BUT A PHONE THAT KEEPS BEEPING (CHUCKLE). SO AT METTA FUND WE ARE FOCUSED ON SOCIAL HEALTH. ABOUT A DE ABOUT TO THINK ABOUT IT OPPOSED TO HEALTH CARE SYSTEM. AS YOU KNOW WE ARE MOST AT RISK, AND THOSE MOST AT RISK ARE REALLY WOMEN, PEOPLE OF COLOR, IM S, LGBTQ, OLDER ADULTS, INDIVIDUALS WHO LIVE ALONE, AND FOLKS EXPERIENCING MENTAL HEALTH CHALLENGES. I WOULD MOVE FORWARD AND TELL YOU A STORY ABOUT THE FRIEND OF MINE, BUT IN INTEREST OF TIME I WILL MOVE ON AND TALK ABOUT HOW WE--OR WHAT WE BREVE HOW WE LOOK AT THE COMMUNITY DRIVEN SOLUTION.

WE BELIEVE THAT THE COMMUNITIES DRIVE THE BEST SOLUTIONS FOR US TO MOVE FORWARD. THEY ARE SOPHISTICATED IN UNDERSTANDING WHERE THE CHALLENGES ARE THEY FACE, AND THE SOLUTIONS THAT WILL ALLEVIATE THESE CHALLENGES FOR THE INDIVIDUALS LIVING IN THE COMMUNITY. WE ALSO BELIEVE THAT THE ORGANIZATIONS, WHICH, THAT HAVE MARGIN ED GROUPS ARE BEST SUITED TO LEAD THEIR WAY OUT AND KNOW WHAT THE WORKING IN THEIR PARTICULAR COMMUNITY.

SO, SOMETHING THAT MIGHT WORK IN THE LGBTQ COMMUNITY MAY NOT WORK THE SAME IN A

COMMUNITY THAT IS PREDOMINANTLY LATINX FOR EXAMPLE.

WE HAVE TO LOOK AT THE COMMUNITY TO GIVE US DIRECTION ON WE SHOULD DO, SO WE FOCUS ON SEVERAL SPECIFIC COMMUNITIES HERE IN SAN FRANCISCO. AFRICAN AMERICAN, LGBTQ, LATINX CHINESE

ONE IS MINIMIZE TECHNOLOGY S FOR OLDER ADULTS, AND SUPPORT COORDINATED AND COLLABORATIVE PROGRAMS BETWEEN HEALTH CARE AND SOCIAL SERVICES. AND SAFETY NET SERVICES AND. ALSO OPPORTUNITIES FOR OLDER ADULTS TO BE VIBRANT AND ACTIVE IN HOME THEIR HOME AND COMMUNITY.

EXAMPLE OF WHAT WE DID, WE DID RAPID RESPONSE GRANT MAKING TO DEEP CONNECTED COMMUNITY PARTNERS, ONE IS COMMUNITY TECH NETWORK HERE. THEY WORK IN A COMPETENT WAY CONTRACTING WITH CHINESE LANGUAGE TEACHER AND PARTNER WITH OTHER CPO IN SON FRANCISCO, NEWER ORGANIZATION AND BRIDGING THE DIVIDE IN ADVANCING DIGITAL LITERACY FOR OLD ADULTS

AS YOU HEARD THIS IS A METHOD OR OPPORTUNITY FOR HAVING BETTER OUT COMES AND RESULTS IN THAT WAY. THEY MADE A QUICK WITH OUR RAPID RESPONSE GRANT MAKING THEY MADE A VERY QUICK TO ADVANCE THESE PROGRAMS, UMM AND ADAPT TO BRINGING THESE AND PRIORITIZING DEVICES AND INTERNET AND VIRTUAL TRAINING FOR OLDER ADULTS WHO WERE UNABLE TO MAYBE GO TO A SITE THEY WERE GOING TO BEFORE BUT ACTUALLY THINGING THAT ON AND HOME.

THEIR NEWEST PROGRAM IS CALLED HOME CONNECT AND PROVIDES REMOTE TRAINING AND INCLUDES TRAINING FOR OLDER ADULTS BOTTOM LINE AND KNOW HUMAN CONNECTION IMPROVES HEALTH AND WELL BEING, AND THAT IS BENEFIT TO ALL OF US, I WANT TO STAY WITHIN THE TIME FRAME A LOTTED AAPPRECIATE THE OPPORTUNITY TO PEAK ABOUT WHAT IS GOING ON WITH OUR ORGANIZATIONS, I WILL TAKE QUESTIONS NOW OR LATER HOWEVER THE MODERATOR WOULD LIKE

TO GO FORWARD

>> YEA THANK YOU, SAVE QUESTIONS FOR THE END, PROBABLY QUESTIONS ALL OF YOU CAN ANSWER PIECES OF, THANK YOU SO MUCH, THAT IS GREAT.

MOVE RIGHT ALONG, NEXT WE HAVE DOCTOR GREENE OF THE UNIVERSITY OF CALIFORNIA SAN FRANCISCO, WITH INTERESTING PERSPECTIVE ON WORK WITH HIV AND AIDS PATIENTS AND OLDER ADULTS, I WILL PASS OFF THE MIC NOW.

>> THANK YOU AND THANK YOU TO ALL OF THE PANELISTS TODAY. SO JUST A QUICK ON MY BACKGROUND, ASSISTANT PROFESSOR IN THE DIVISION OF GERIATRICS AT THE UNIVERSITY OF CALIFORNIA SAN FRANCISCO AND A HIV SPECIALIST, I HAVE WORKED ON HOUSE CALL PROGRAM FOR NUMBER OF YEARS MAKING VISITS TO HOME BOUND ADULTS AND PEOPLE WITH DISABILITIES, AND CURRENTLY I AM FOCUSED ON PROVIDING CONSULTATIONS TO THE HIV CLINICS. I THINK JUST TO HIGHLIGHT WHAT THEY HAVE ALREADY MENTIONED IS THERE ARE REALLY SIGNIFICANT HEALTH ISSUES AND CONSEQUENCES ASSOCIATED WITH LONELINESS, AND ISOLATION, AND YOU KNOW, THIS IS SOMETHING WE TAKE VERY SERIOUSLY IN GERIATRICS AND ESPECIALLY CONCERNED IN THIS TIME.

ACROSS ALL OF OUR CLINICAL PROGRAMS WE HAVE ACTUALLY BEEN TRYING TO PROACTIVELY OUT REACH TO OLDER ADULTS WE SERVE AND THERE HAS BEEN EFFORTS TO TRY TO QUANTIFY HOW COVID-19 IS SPECIFICALLY INCREASING ISOLATION AND LONELINESS, AND I WOULD ENCOURAGE ANYONE WHO IS INTERESTED, IF YOU GO TO DIVISION OF GERIATRICS WEBSITE YOU CAN SIGN UP FOR THE LIST SERVE TO RECEIVE COMMUNICATIONS, INCLUDING IN TWO WEEKS WHERE SOME OF THE IS PRESENTED. BUT I DID REALLY WANT TO TAKE SOME OF THE TIME I HAVE TO

HIGHLIGHT SOME OF THE UNIQUE CHALLENGES FACING COMMUNITIES AFFECTED BY HIV/AIDS

I THINK THE FIRST POINT IS TO RECOGNIZE AND ACKNOWLEDGE THERE ARE PEOPLE WHO HAVE ALREADY SURVIVED A PANDEMIC, THE HIV/AIDS PANDEMIC. FOR WHICH ACTUALLY THERE IS STILL NO CURE FOR HIV AND I THINK JUST TO ACKNOWLEDGE THAT FOR SOME PEOPLE DURING THIS TIME, THERE HAVE BEEN THOUGHTS, IT IS RETRIGGERING AND RETRAUMATIZING TO A CERTAIN DEGREE. I THINK ALSO FOR OTHERS IT HAS BEEN TIME OF REFLECTION AND THINK OF LESSONS WE CAN LEARN FROM THE HIV EPIDEMIC, WHILE IT IS NOT THE SAME AS COVID-19, THEY ARE TWO DIFFERENT PROCESSES AND EXPERIENCES, I THINK THERE ARE SOME LESSONS, THAT, HAVE BEEN LEARNED INCLUDING SOME THINGS THAT HAVE COME UP AROUND HEALTH INEQUALITIES. THAT WE ARE SEEING NOT ONLY WITH COVID-19 BUT CERTAINLY BEEN A GLOBAL IMPACT OF HIV COMMUNITIES. I THINK TO HER POINT REALLY NEEDING TO INVOLVE COMMUNITY MEMBERS IN THE RESPONSE TO EPIDEMICS. AND RESPONSE TO WHAT WE TRY TO DO AS A HEALTH CARE SYSTEM. AND I THINK IN ORDER TO ENABLE BEHAVIOR CHANGE WE NEED TO WORK WITH WHAT IS AVAILABLE, FOR EXAMPLE IF YOU DON'T HAVE ACCESS TO RUNNING WATER IT IS REALLY HARD TO WASH YOUR HANDS, THINGS WE SAW FROM THE HIV EPIDEMIC WE ARE SEEING PLAY OUT AGAIN. BEFORE COVID-19 THEY MENTIONED THE IMPACT ON THE LGBTQ COMMUNITY, CERTAINLY OLDER ADULTS WITH HIV MAY ALSO IDENTIFY WITH THE COMMUNITY, STUDIES IN SAN FRANCISCO AND OTHERS, SUGGEST THAT OLDER ADULTS WITH HIV MAY HAVE HIGHER RATES OF ISOLATION THAN THE GENERAL POPULATION, SOME IN PART PROBABLY RELATED TO THE LOSS OF SOCIAL NETWORKS MANY EXPERIENCED IN THE 80'S, AND 90'S, SOME PEOPLE LOST THEIR ENTIRE SOCIAL NETWORK TO THE HIV/AIDS EPIDEMIC, SOMETHING WE WERE ALREADY AWARE OF BEFORE, FOR EXAMPLE, WE DEVELOPED A PROGRAM CALLED GOLDEN COMPASS, SPECIFICALLY DESIGNED TO HELP OLDER ADULTS WITH HIV NAVIGATE GOLDEN YEARS, MANY PEOPLE WERE NOT EXPECTING TO SURVIVE AND LIVE INTO OLDER AGES, THROUGH THAT WE ARE TRYING TO FOSTER SOCIAL CONNECTIONS, ALL OUR CLASSES, EXERCISE, SUPPORT GROUP, OTHER EDUCATIONAL CLASSES PUT

ON HOLD WHEN WE HAD TO MOVE SHELTER IN PLACE AND PHYSICALLY DISTANCE. AND NOW WE ARE BRINGING BACK SOME OF THE PROGRAMS, OVER THE PHONE OR ONLINE. CONTINUE TO DO OUT REACH CALLS TO ADDRESS FOOD INSECURITY, MEDICATION, CARE GIVING AND ASSESS MENTAL HEALTH. AND ISOLATION PEOPLE MAY BE EXPERIENCING AND I THINK TO END MY COMMENT, I WOULD SAY REFLECTING ON THE OTHERS, INCREASINGLY INSPIRED AND STRUCK BY RESILIENCE OF THE OLDER ADULTS I WORK WITH EVERY DAY. I THINK WAYS OF COME TOGETHER, A GREAT EXAMPLE OF THAT HOW IN SAN FRANCISCO, THE DEPARTMENT OF ADULT, AND DISABILITY SERVICES HAS PARTNERS WITH SHANTI ONE OF THE ORIGINAL COMMUNITY BASED ORGANIZATIONS THAT RESPONDED TO THE AIDS EPIDEMIC, HAD THAT TRADITION OF MOBILIZING VOLUNTEERS AND NOW PARTNERING TO SERVE OLDER ADULTS AND PEOPLE WITH DISABILITIES, SO THANK YOU.

>> THAT IS GREAT, THANK YOU SO MUCH. INTERESTING SOME OF THE SIMILARITIES OF HISTORY REPEATS ITSELF DOESN'T IT. (CHUCKLE) OKAY, MOVING ONTO THE NEXT PANELIST, INSTITUTE ON AGING, GOING TO GIVE UPDATES ON THE FRIENDSHIP LINE AND OTHER ACTIVITIES THAT THE INSTITUTE ON AGING DOES AROUND OLDER ADULTS FACING SOCIAL ISOLATION. I WILL HAND OFF TO YOU.

>> THANK YOU SO MUCH, I AM VICE PRESIDENT OF STRATEGIC PARTNERSHIPS OF THE INSTITUTE ON AGING BASED IN SAN FRANCISCO. MOSTLY TALK ABOUT THE FRIENDSHIP LINE I KNOW HAS BEEN REFERENCED ON THIS CALL IN PRIOR SESSIONS. SOME OF YOU KNOW, THE PHONE LINE THAT'S BEEN AROUND SINCE 1973. WE HAVE A FOCUS ON PROVIDING SERVICES BY TELEPHONE. AND ADDRESS SOCIAL ISOLATION, FEELINGS OF LONELINESS, ANXIETY AND ANY OTHER RELATED TOPICS THAT INDIVIDUALS MAY BE FEELING AND HAVE A NEED TO CONNECT WITH A PERSON

SO, WE TYPICALLY OPERATE ON IN BOUND CALL MODELS, WHERE THOSE CAN DIAL DURING THE DAY AND NIGHT, WE HAVE SERVICES AS WELL. AND REACH A INDIVIDUAL WHO IS FRIENDLY AND WELL TRAINED AND WILLING AND INTERESTED IN HAVING A FRIENDLY CONVERSATION WITH THE INDIVIDUAL ABOUT WHATEVER TOPIC IS OF CONCERN TO THEM, BUT OF COURSE ALSO BE PREPARED TO ADDRESS SERIOUS CONCERNS, OR MORE CRITICAL CRISIS RESPONSES MAY BE NECESSARY.

I THINK THE CRITICAL PIECE TODAY IS WE ARE EXCITED TO LAUNCH IN APRIL FRIENDSHIP LINE CALIFORNIA IN PARTNERSHIP WITH CDA, AND WE ARE THANKFUL TO THE TEAM FOR WORKING VERY QUICKLY WITH US TO DEPLOY THIS PROGRAM IN A TIME OF CRISIS HERE, AS WE FEEL CAN BE EFFECTIVE TO ADDRESS CONCERNS ABOUT COVID-19 IN PARTICULAR FOR OLDER FOLKS AND THOSE WITH DISABILITIES.

I SHOULD SAY THAT PROGRAM, WE HAVE A FOR THAT IN THE PACKAGE OF MATERIALS REFERENCED EARLIER, BUT THE PHONE NUMBER FOR THAT IS 888-670-1360.

ANYONE CAN CALL THAT LINE, WHO, YOU KNOW IS OLDER OR WITH DISABILITY OR THOSE WHO SUPPORT INDIVIDUALS IN THE CATEGORIES.

WE ARE AVAILABLE 24/7, AND ALSO MAKING SURE THAT WE ARE AVAILABLE AT ALL HOURS OF THE DAY. WE HAVE PARTNERSHIPS IN PLACE WITH LOCAL COUNTIES TO SPECIFICALLY ADDRESS NEEDS IN THOSE AREAS, SOME INCLUDE OUT BOUND CALLING, ALSO AN ELEMENT OF THE PROGRAM, REFERRALS FOR THOSE WHO HAVE A POTENTIAL NEED AND GOOD MATCH FOR BEING REACHED OUT TO BY PHONE.

WE DO THAT, THAT CAN OFTEN AS YOU IMAGINE, RESULT IN PERSONALIZED EXPERIENCE AS WE GET TO KNOW THEM AND ESTABLISH RELATIONSHIP THROUGH THE CALLS.

I WANT TO THANK THE TEAM AT METTA THEY HAVE ALSO BEEN LONG TIME PARTNERS OF THE LINE AND HELPING US DELIVER THE SERVICE TO THE REGION. IN TERMS OF WHAT WE ARE SEEING WITH THE FRIENDSHIP LINE SINCE THE COVID-19 CRISIS BEGAN AND REALLY IN OUR RESPONSE TO IT, WE HAVE SEEN A GROWTH IN CALL VOLUME, MORE OF THOSE REACHING OUT, BECAUSE OF THE

FRIENDSHIP LINE, BUT ALSO INCREASE NEED WE SEE FOR SERVICES THAT ADDRESS FEELINGS OF ISOLATION.

SO THAT HAS BEEN ABOUT A 30-50%, DEPENDS ON THE TIME YOU LOOK AT, INCREASE IN OVER ALL CALLS, WE HAVE SEEN A GROWTH IN SOUTHERN CALIFORNIA AND AREAS WE HAVE NOT BEEN AS PROMINENT IN THE PAST, BUT THANK YOU TO FRIENDSHIP LINE PARTNERSHIP WE HAVE SEEN GROWTH AND MANY OF THE CALL HAVE BEEN RELATED TO ANXIETY OR OTHER FEELING BROUGHT UP BY THE COVID-19 CRISIS, AND FOLKS WHO ARE FACING AN ARRAY OF NEW CHALLENGES IN LIFE AS A RESULT OF IT. THEY NEED SOMEONE TO TALK

ONE OF THE FINAL ASPECTS I WILL SHARE IS WE ARE ALSO USING THIS OPPORTUNITY TO ENGAGE WITH THE CALLERS TO PARTNER WITH THE DOCTOR AT UCSF RELATED ON HOW OLDER ADULTS NAVIGATE THESE FEELINGS. (INAUDIBLE), WE ARE HOPING TO BE ABLE TO TAKE INFORMATION AND DATA GATHERED FROM THE CALLS AND SURVEYS TO MAKE INSTRUCTIVE INFORMATION ON HOW THOSE ARE REACTING AND RESPONDING TO THIS, IF YOU HAVE QUESTIONS, FEEL FREE TO SHARE LATER AND IF YOU WOULD LIKE TO MAKE REFERRALS, REACH OUT TO ME, BUT ALSO PROVIDE THAT PHONE NUMBER THAT IS ON THE , YOU HAVE ACCESS TO

THANK YOU P.

>> GREAT THANK YOU SO MUCH. I HAVE ONE COMMENT, THANK YOU FOR NOTING THE FRIENDSHIP LINE IS OPEN TO PEOPLE WITH DISABILITIES AND THAT HAS NOT BEEN CLEARLY PUBLICIZED, HAPPY TO HEAR THAT AND GIVE YOU FEEDBACK. WE WILL CONTINUE ON, THANK YOU SO MUCH, MOVE ONTO YOUTH MOVEMENT AGAINST ALZHEIMER'S, TALK ABOUT CONNECTING YOUNGER FOLKS WITH OLDER ADULTS TO MAKE INTERESTING WAYS TO ADDRESS SOCIAL ISOLATION.

>> THANK YOU, HELLO EVERYBODY, I HOPE YOU ARE DOING WELL I AM DIRECTOR. HERE AT WYA. WE MAKE A SENSE OF TRUST, AND MOSTLY BRING AWARENESS TO ISSUES EFFECTING OLDER

ADULTS AND FAMILY CAREGIVERS,

SUCH AS ALZHEIMER'S, DEMENTIA AND SOCIAL ISOLATION, DUE TO COVID-19 WE HAD TO SUSPEND YOUTH CARE, WE DEVELOPED A NEW PROGRAM CALLED MEALS TOGETHER AS A RAPID RESPONSE TO ADDRESS SOCIAL ISOLATION, MEALS TOGETHER IS AN INTERGENERATIONAL WEB BASED PLATFORM. IN WHICH WE SET UP VIRTUAL LUNCH AND DINNER MEETINGS, THROUGH ZOOM SO THOSE AFFECTED BY SOCIAL ISOLATION AT THIS TIME, CAN CONNECT WITH OTHERS.

THROUGH A VIRTUAL MEAL TOGETHER BASED ON THEIR COMMON INTERESTS AND AVAILABILITY, IT IS A VERY SIMPLE PLATFORM TO USE, YOU HAVE TO SIGN UP AT THE WEBSITE. MEALS TOGETHER TAKES ABOUT 5-10 MINUTES TO COMPLETE THE SIGN UP FORM AND THEN YOU UNDERGO A VERIFICATION PROCESS, THAT MEANS YOU WILL RECEIVE A PHONE CALL FROM ONE OF THE TEAM MEMBERS AND BASED ON YOUR GENERATION WE ASK YOU QUESTIONS SURROUNDING YOUR EXPERIENCE WITH OLDER ADULTS, WHY YOU SIGNED UP, IF YOU HAVE ANY KNOWLEDGE ABOUT ALZHEIMER'S OR DEMENTIA, AND WE ALSO GO OVER GENERAL RULES OF THUMB.

IF YOU AN OLDER ADULT SIGNING UP THE QUESTIONS ARE DIFFERENT, WE ASK YOU SIGNED UP OR NOT IF YOU NEED HELP. THIS VERIFICATION PROCESS HELPS US GAUGE WHETHER OR NOT THE PERSON IS A GOOD FIT. BECAUSE WE DON'T WANT ANY OR EVERYONE TO SIGN UP AND PARTICIPATE, BECAUSE WE UNDERSTAND THE VULNERABILITY OF THE POPULATION WE ARE SERVING. SO, AFTER THE PERSON SIGNED UP AND THEY ARE APPROVED THEY ARE THEN MATCHED WITH SOMEONE FROM A DIFFERENT GENERATION AND THEY WILL RECEIVE A E-MAIL OR TEXT MESSAGE BASED ON THEIR COMMUNICATION PREFERENCE AND THIS WILL BE ABOUT THE NEXT STEPS TO COOK AND HAVE A MEAL READY OR HAVE A CUP OF COFFEE OR DRINK READY FOR THEIR ZOOM MEETING WITH THEIR FOOD FRIEND

OUR STAFF IS AVAILABLE THROUGH PHONE SUPPORT FOR TECH QUESTIONS TO HELP OLDER ADULTS FOR THE SIGN UP PROCESS, WE ALSO HAVE VIDEO TUTORIALS ON THE PROGRAM WEBSITE. SO FAR WE RECEIVED GREAT FEEDBACK FROM USER ON THE PLATFORM SINCE WE LAUNCHED OUR PROGRAM

ABOUT A MONTH AGO.

AND WE ARE CURRENTLY PARTNERING WITH NONPROFIT AGENCIES AND ASSISTED LIVING FACILITIES TO GET THE WORD ABOUT ABOUT MEALS TOGETHER TO SERVE AS MANY AS POSSIBLE. WE URGE YOU TO PLEASE SPREAD THE WORD.

HELP YOUR GRANDPARENTS OR PARENTS SIGN UP, AND OF COURSE, OFFER THIS RESOURCE TO YOUR CLIENTS, IT IS A GRANT FUNDED PROGRAM. AND, IT IS AVAILABLE TO ANYONE WHO IS LIVING IN THE U.S. AND JUST AS A SIDE NOTE, MANY OF THE USERS WHO VOLUNTEER THEIR TIME TO SHARE A MEAL TOGETHER, ARE COLLEGE STUDENTS FROM DIFFERENT UNIVERSITIES AROUND THE U.S. WHO ARE ALREADY PARTICIPATING IN YMA PROGRAMS. THAT IS A REALLY COOL FACT. IF YOU HAVE ANY QUESTIONS YOU CAN VISIT OUR SITE. MEALS TOGETHER. THAT IS SPECIFICALLY ABOUT THE PROGRAM, IF YO HAVE QUESTIONS ABOUT WHO WE ARE AS AN ORGANIZATION, YOU WITH VISIT OUR WEBSITE, THE YOUTH MOVEMENT. AND YOU CAN ALSO REACH US THROUGH PHONE.

562-285-7060.

IF YOU HAVE ANY QUESTIONS I AM AVAILABLE FOR THE PANEL LATER THAT IS ALL I HAVE THANK YOU.

>> THANK YOU SO MUCH, INTERESTING CONCEPT AND GREAT WAY TO DO RESOURCES DURING THIS TIME, THANK YOU FOR THAT, ENCOURAGE ANYONE SHARING THESE RESOURCES SEND THEM TO US TO MAKE SURE TO SHARE WITH THE GROUP FOLLOWING THIS TO GET INFORMATION TO SHARE, GREAT STUFF HAPPENING. MOVE ON, LAST BUT NOT LEAST. LISA TO SHARE. LISA HAND IT OFF TO YOU

>> LISA: THANK YOU VERY MUCH, I AM PRESENTING ON BEHALF OF TEN AGENCIES, WE HAVE ORGANIZE ED A SHORT TERM PROJECT TO ASSIST OLDER ADULTS WHO A ISOLATED DURING

THIS TIME. SO, AND WE HAVE TWO ABOUTTIVES WITH THIS PROJECT.

ONE PROJECT IS REALLY TO FIND OLD ADULTS TO NEED HELP. GIVEN THE STAY AT HOME ORDER. AND THEN THE OTHER OBJECTIVE IS TO STAY IN CONTACT WITH THOSE OLDER ADULTS AFTER THIS CRISIS.

AND AS WE MOVE OUT OF THE STAY AT HOME ORDER, SO WE CAN CONTINUE TO PROVIDE ASSISTANCE AS NEEDED. SO THIS IS VERY MUCH A GRASS ROOTS EFFORT, WE HAVE 6 COMMUNITIES THAT WE ARE ORGANIZING WITHIN, AND WHAT WE HAVE DONE IS WE HAVE ESTABLISHED LEAD AGENCIES IN EACH OF THE COMMUNITIES, AGENCIES THAT PEOPLE IN THE COUNTY TRUST. WE KNOW THE ISSUE WITH SCAMS, AND OLD ADULTS.

THERE IS A LOT OF FEAR RIGHT NOW, WANT TO MAKE SURE THEY COULD BE RECOGNIZED BY LOCAL COMMUNITY MEMBERS. WHAT WE HAVE BEEN DOING, WE HAVE, THIS IS ONLY ONE MONTH OLD, STARTED APRIL 15, AIM GOING TO SHARE WITH YOU WHAT WE HAVE DONE AND LEARNED IN THE PROCESS. WE HAVE CONDUCTED A LOT OF OUT REACH SO PEOPLE KNOW ADDITIONAL ASSISTANCE IS AVAILABLE. WE HAVE DESIGNED POSTERS AND DOOR HANGERS WE HAVE RADIO AND TV PSA, AND LARGE SPANISH SPEAKING PAP YOU LEGISLATION.

WE HAVE ALSO CARRIED OUT PRINT MEDIA, SOCIAL MEDIA, CONDUCTED A NUMBER OF E-MAILS. PROVIDING INFORMATION ON FOOD DELIVERIES, EVERYTHING WE CAN ANY OF TO GET THE WORD OUT ABOUT ADDITIONAL ASSISTANCE AVAILABLE FOR THOSE OF US WHO ARE ISOLATED WE HAVE ACTUALLY SET UP A PHONE NUMBER IN EACH OF THE COMMUNITIES SO IT IS A LOCAL TOUCH.

WHEN WE ARE CONTACTED BY A NEIGHBOR OR FAMILY MEMBER OR OLDER ADULT OR CAREGIVER, WHAT WE FIRST DO A QUICK CHECKLIST OF NEEDS, WE DEVELOP A CHECKLIST EVERYBODY IS USING AS THEIR GUIDE. CHECKLIST COVERS THINGS LIKE NUTRITION.

HYGIENE. INCLUDING ACCESS TO SUPPLIES LIKE PAPER PRODUCTS, CLEANING SUPPLIES, ET CETERA.

WELLNESS, PHYSICAL EMOTIONAL AND SOCIAL, FINANCE, LEGAL AND ALSO TALKING ABOUT

COMPLETING THE CENSUS. ALSO IMPORTANT DURING THIS CRISIS.

ONCE WE DO A QUICK ASSESSMENT OF NEEDS, WHAT WE DO IS WE ARE CONNECTING PEOPLE WITH EXISTING RESOURCES, BECAUSE OBVIOUSLY THERE ARE A LOT OF RESOURCES ALREADY OUT THERE, AND THEN WE ARE ONLY OURSELVES PROVIDING THE ADDITIONAL ASSISTANCE THAT MIGHT BE NEEDED. SO EXISTING RESOURCES MIGHT BE THINGS LIKE HOME DELIVERED MEALS.

OR FROM FOOD BANK FOR FOOD, EXISTING RESOURCES INCLUDE THINGS LIKE TELEPHONE REASSURANCE AND MENTAL HEALTH COUNSELING.

SO WE CONNECT PEOPLE WITH EXISTING RESOURCES MANY OF THESE FOLKS PROVIDING EXISTING RESOURCES ARE PART OF THE AGENCIES, WE ALSO ARE HELPING A LOT WITH PRESCRIPTION DELIVERLY,

IN SOME CASES IT IS EASY BECAUSE LOCAL PHARMACIES ARE DELIVERING. OTHERS IT IS NOT EASY, WE HAVE RURAL COMMUNITIES.

IT TAKES A DRIVE. AND THEN IN ADDITION TO CONNECTING PEOPLE WITH ADDITIONAL RESOURCES WE HAVE ACCESS TO ADDITIONAL FUNDING FROM PRIVATE FOUNDATIONS AND DONORS, PAYING FOR STAFF TIME AND APPLIES. SUPPLIES LIKE PAPER PRODUCTS CLEANING SUPPLIES, FOOD TO AUGMENT THE HOME DELIVERED MEALS OR BANK DELIVERY, WE ARE TAKING UPON OURSELVES TO ORGANIZE WHAT EACH PERSON NEEDS AND MAKING THAT DELIVERY TO THEM SO THEY HAVE ALL OF THE SUPPLIES THEY NEED.

IN ADDITION TO MAKING SURE THEY HAVE PRESCRIPTIONS DELIVERED.

THAT MAY SOUND LIKE A SIMPLE THING TO DO, BUT IN ACTUALLY, IT HAS BEEN QUITE COMPLICATE AS YOU IMAGINE, BECAUSE EVERYONE HAS DIETARY NEEDS, WE WE HAVE LEARNED THAT SOME OF THE FOOD BANK ITEMS FOR EXAMPLE DON'T MEET NEEDS OF OLDER ADULTS

HAS BEEN A ORGANIZATIONAL FEAT ON THE PARTNERS TO ASSESS WHAT EACH PERSON NEEDS AND HOW OFTEN THEY NEED IT AND MAKE SURE THAT IS PURCHASED IN SOME WAY AND DELIVERED IN A WAY TO THEM THAT WORKS AND IS SAFE. SO FAR, WE HAVE ASSISTED ABOUT 4 HUNDRED OLD

ADULTS AND CAREGIVERS WE HAVE REALIZED THERE ARE TWO POPULATIONS WE ARE HELPING, ONE POPULATION IS THOSE WE WERE CONNECTED WITH BEFORE, ACTUALLY.

NOW THEY HAVE NEW NEEDS BECAUSE OF THE STAY AT HOME ORDER LACK OF ACCESS TO THEIR USUAL SOCIAL NETWORKS AND OTHERS OF HELP, THE OTHER POPULATION IS PEOPLE WE HAVE NOT BEEN CONNECTED WITH BEFORE, THAT MAY BE BECAUSE THEY SIMPLY DID NOT REACH OUT, THEY NEEDED HELP BUT DID NOT REACH OUT OR NOT KNOW WHERE TO REACH OUT OR MAYBE PEOPLE THAT DID NOT NEED IT BEFORE BUT NOW THEY DO

SO SOME THINGS WE ARE SEEING THEY NEED OR TELLING US THEY NEED, FOOD INSECURITY IS A HUGE ISSUE, THAT IS QUITE A LARGE ITEM, ALSO, ESSENTIAL THINGS, THEY USED TO BE ABLE TO SHOP FOR, OR FAMILY MEMBERS SHOPPED FOR THEM, PAPER PRODUCTS, CLEANING SUPPLIES, HYGIENE SUPPLIES, MASKS, AND GLOVES ARE A NEW NEED THAT PEOPLE ARE EXPERIENCING.

SOCIALIZATION IS A VERY BIG ISSUE, DON'T NEED TO TELL YOU ABOUT THAT, VERY WONDERFUL PRESENTATIONS ABOUT THAT,

EVEN THOUGH A LOT OF PEOPLE HAVE BEEN HOLDING OFF ON THEIR MEDICAL APPOINTMENTS WE STILL NEED TRANSPORTATION TO SOME APPOINTMENTS AND THAT WILL INCREASE AS THE THINGS START TO OPEN UP HERE.

SO A FEW THINGS WE ARE LEARNING INTO THIS PROCESS, YOU KNOW MOST OF THE PARTNERS, ALMOST ALL OF THEM ROUTINELY SERVE OLDER ADULTS, MANY OF THEM SERVE CAREGIVERS.

THESE ARE PEER EDUCATED PARTNERS WE HAVE ON THIS PROJECT. WE ARE LEARNING THAT THERE IS QUITE A LOT OF FEAR AROUND INABILITY TO ACCESS FOOD AND OTHER SENSITIVE ITEMS, PEOPLE FEELING VERY TRAPPED YOU MIGHT SAY IN THEIR HOMES.

WE ARE SEEING THERE ARE A LOT OF NEW PEOPLE THAT HAVE NOT NEEDED ASSISTANCE BEFORE, BUT THEY NEED IT NOW THAT THE SITUATION HAS CHANGED SO DRAMATICALLY. AND OBVIOUSLY WE ARE SEEING THAT SOCIAL ISOLATION IS A HUGE PROBLEM. ONE OF THE--WELL A COUPLE OF THE SERVICES BEING PROVIDED ARE OF COURSE TELEPHONE REASSURANCE AND MENTAL HEALTH

COUNSELING, WE ARE FINDING THAT OLDER ADULTS THEMSELVES ARE REALLY--YOU KNOW TELEPHONE IS WAY OF COMMUNICATING. NO PROBLEM, THEY ARE HAPPY TO TALK, HEALTH COUNSELING, NORMAL SESSION IS 50 MINUTES, BUT OLDER ADULTS WANT TO TALK LONGER THAN THAT AND WANT TO TALK FAIRLY FREQUENTLY, ON THE OTHER SIDE, CAREGIVER IS A DIFFERENT STORY, ALSO PROVIDE MENTAL HEALTH COUNSELING FOR CAREGIVERS AND THE ONES IN CONTACT WITH HERE DURING COVID-19 ARE FEELING VERY STRESSED. MANY OF THE USUAL SUPPORTS ARE NOT OPEN RIGHT NOW OR ACCESSIBLE RIGHT NOW. THEY ARE NOT GETTING OUT TO WORK IF THINK HAVE THAT SITUATION SET UP FOR THEMSELVES BEFORE. SO, SO THEY ARE NOT WANTING TO TALK SO MUCH, BECAUSE THEY ARE FEELING SO STRESSED AND THEY HAVE SO MUCH ON THEIR PLATE TO DEAL WITH, THAT IS ANOTHER AREA OF QUITE A LARGE AREA OF CONCERN. AND THEN, LASTLY, THE PEOPLE WE ARE CONNECTING WITH ARE TREMENDOUSLY GRATEFUL FOR THE HELP BEING PROVIDED AND WITH THAT I ACTUALLY WANT TO I KNOW A NUMBER OF PARTNERS ON THE LINE, THANK YOU VERY MUCH FOR YOUR HELP WITH THIS VERY QUICK SHORT TERM PROJECT THAT WE PUT TOGETHER THANK YOU.

>> GREAT THANK YOU SO MUCH, GREAT PANEL, LOTS OF GOOD INFORMATION AND RESOURCES AND REFLECTION ON HOW TO ADJUST DURING THESE TIMES, SO, WE NOW HAVE ABOUT TEN MINUTES FOR SOME QUESTIONS AND ANSWERS, SO WE WILL DO OUR BEST TO CONSOLIDATE THOSE QUESTIONS AND HAVE EVERYBODY WHO WANTS TO RESPOND. SO ONE OF THE FIRST QUESTIONS WAS ABOUT HOW DO COUNTIES AND CITIES SORT OF RESPOND DURING THIS TIME, LOOKING AT CUTS AND HOW WILL THEY DO OUT REACH MAYBE FEWER RESOURCES, BEST PRACTICES OR SUGGESTIONS FROM THE PANEL AROUND THAT?

>> I CAN TELL YOU IN A SMALL PROJECT, SURPRISING ONE OF THE WAYS OF OUT REACH,

WORKING WELL, LOW INCOME MOBILE HOME PARK IS DOOR HANGERS. SOME REASON THEY GET PEOPLE'S ATTENTION, NOT SURE WHY WE THOUGHT TO DO THEM, BUT THEY ACTUALLY ARE WORKING.

>> GREAT, ANYBODY ELSE HAVE SPECIFIC INTERACTIONS WITH CITIES OR COUNTIES? MIGHT BE HELPFUL.

>> THANK YOU FOR THAT. THERE IS A COMMENT REMINDING FOLKS DURING THIS TIME, UNFORTUNATELY PEOPLE WILL WORK TO ENGAGE IN FRAUD, AND TRY TO SCAM FOLKS, I KNOW IT IS MEMBERS SENT OUT WARNINGS, AND LOOKS LIKE THERE IS A NEW SORT OF SCAM HAPPENING, LOOKS LIKE IT IS FROM THE MEDICAL, YOU ARE ENCOURAGED TO CHECK IT OUT AND LOOK INTO THAT AND LET THEM KNOW THAT TO AVOID SENIORS AND THOSE VULNERABLE AND TAKING THOSE, AND CLICKING AND PROVIDING PERSONAL INFORMATION AND SEEING HEALTH ADVOCATE HAS INFORMATION ON THAT. JUST MORE OF A FYI.

WE HAVE HEARD INTERESTING PERSPECTIVE OF WHAT IS--I DON'T SEE QUESTIONS, UNLESS ANY OF THE PANELISTS HAVE ADDITIONAL THOUGHT THEY WOULD LIKE TO SHARE, WE WILL MOVE INTO TOPICS FOR UPCOMING AGENDAS, I WANT TO GIVE YOU ONE LAST CHANCE TO REFLECT ON ANYTHING YOU SHARE OR THOUGHTS YOU WANT TO LEAVE THE GROUP WITH.

>> I WOULD SAY, I WOULD LEAVE THE GROUP WITH, WE ARE IN A MARATHON, ALL WE ARE LEARNING WILL COME IN AND BE VALUABLE AS WE MOVE FORWARD, AND MOVE TO THE NEXT PHASE. AND WE SHOULD CONTINUE TO PARTNER AND BE COLLABORATIVE AS WE RAISE UP THE VOICES OF OLDER ADULTS AND THOSE WITH DISABILITIES AND KEEP THAT TOP OF MIND AS WE SERVE ONE

ANOTHER AND SERVE THE COMMUNITY.

>>

**>> THANK YOU FOR THAT, LOOKS LIKE WE HAVE A FEW MORE COMMENTS, PLEASE START TO
FILL THAT OUT.**

**>> ALSO LOOKING TO SEE IF YOU LIKE THE FREQUENCY OF THE MEETINGS OF NOT, COMMENT
ON THAT. LOOKS LIKE YOLO HEALTHY AGING ALLIANCE SENDS S FOR THE PHONE FRIEND
GREAT WAY TO GET FOOD DELIVERY AND MAKE SURE THOSE KNOW
ANOTHER STRATEGY TO USE IN THE NETWORK TO HELP GET INFORMATION TO THOSE. THANK YOU
FOR THAT. WANT TO MAKE A PLUG FOR UPCOMING. WE ARE DOING SOME WORK WITH THE
COLLABORATIVE MEMBERS THOSE WHO WANT TO HOST VARIOUS TOPIC SPECIFIC WEBINARS IN
COLLABORATION, WE ARE HELPING SUPPORT THAT AND HAVE OUR FIRST ONE COMING UP ON JUNE
FIFTH, VILLAGE MOVEMENT
WE ARE GOING TO GO OVER SOME WORK WITH THE VILLAGE MOVEMENT THAT HAS BEEN RELATED TO
COVID-19 AND STUDENTS THAT PRESENT THEMSELVES.
LEARNING TO DO THINGS IN NEW WAYS, OUT REACH, AND GENERATIONAL IMPROVE, AND OTHER
ONLINE PROGRAMS THEY ARE DOING TO ADJUST TO TIME.
JUNE 5. SEND OUT INFORMATION ABOUT THAT. BE SURE TO INCLUDE YOU ALL, THANK YOU TO
THE PANEL FOR THE GREAT INFORMATION, APPRECIATE IT.
SEND US RESOURCES TO SHARE THAT WITH THOSE. AND THEN OF COURSE THE BUDGET IS TOP OF
MIND, BE DROP IT FOR THE NEXT WEBINAR.**

WITH THAT ANY LAST QUESTIONS OR COMMENTS WE WILL CLOSE.

**OKAY, GREAT, WELL THANK YOU SO MUCH, WE WILL BE IN TOUCH. HAVE A GREAT WEEKEND AND
STAY SAFE.**