

Statement to the U.S. House Education and Labor Committee

By Shireen McSpadden, Executive Director, San Francisco Department of Disability and Aging Services, California

May 18, 2020 Committee Briefing

Intro and Thank You

Thank you to the leadership and members of the Education and Labor Committee for the opportunity to talk with you today regarding the Aging Network's response to the COVID19 pandemic. My name is Shireen McSpadden. I am the Executive Director of the San Francisco Department of Disability and Aging Services. My Department is the designated Area Agency on Aging for San Francisco and also part of the county's welfare agency. Each year, my Department serves almost 70,000 seniors, adults with disabilities, and caregivers, directly and through partnerships with community providers. I also serve as the president of the California Association of Area Agencies on Aging.

AAA Role and Response to COVID19

Area Agencies on Aging are tasked by the Older Americans Act with planning for the needs of older adults within a local community. We are responsible for developing a coordinated service system that supports older people to reside safely at home, instead of institutional settings. We promote health and safety, and provide opportunities for people to connect and remain engaged in their communities. Our community-based services work in tandem with county programs, like Adult Protective Services, as well as healthcare systems.

These responsibilities have become all the more important during the COVID19 pandemic. In recent weeks, we have worked quickly and in close partnership with our community providers to adjust our service models in

order to sustain and expand resources that support seniors to safely shelter in place. I would like to highlight some of these efforts for you:

- Our Community Service programs have gone virtual, offering exercise classes, choir rehearsals, and art classes that are usually held at senior centers as online hangouts via Zoom. We have developed new ways to check in on people and make sure they are doing okay, since we don't get to see them each day.
- We are still providing critical services at home, such as Adult Protective Services, Occupational Therapy, and In-Home Care.
- California has a robust in-home care waiver program for Medicaid recipients who would otherwise need institutional care. Half of all COVID-19 deaths in California to date have occurred in nursing homes; this community-based system of care will be even more vital in the coming 18-24 months as administrators work to ensure safe distancing of their residents. In San Francisco, we have instituted a system to triage needs and we have enhanced the resources available for when people's home care workers are unavailable due to illness or their own status as an at-risk population
- However, the number one need that we are seeing statewide is food support. We know that older adults already faced food insecurity at higher rates, and COVID19 has only exacerbated these needs. For example, in San Francisco, we typically serve 250,000 senior and disability meals per month; since the pandemic began, we are now serving an additional 100,000 meals each month—meaning we had to accommodate a 40 percent increase in service delivery almost overnight.
- Our Congregate Meal programs across the state have transitioned to new approaches that incorporate social distancing precautions. These communal dining services have become meals-to-go and home-delivery. Where possible, we are distributing multi-day packs of meals instead of single meals, to minimize contact and exposure.
- We have expanded our traditional Home-Delivered Meal program and are implementing new models to bring food to people. California Governor Gavin Newsom has established Great Plates Delivered, a short-term program through which local administrators can partner with restaurants to provide up to three meals daily to at-risk seniors. I'm proud to say San Francisco is launching this program today.

Congressional Actions Thus Far

Our ability to make these changes is tied to Congressional actions. The Aging Network is very appreciative of the support that Congress has provided thus far, including...

- Support of older adults' safety and independence through the reauthorization of the Older Americans Act (OAA) in March, the emergency funding for nutrition services provided via the Families First and CARES Acts, and funding for additional supportive services, family caregiver supports, and ombudsman and elder justice activities included in the CARES Act. In particular, I want to note that the increased flexibility that allows us to move Older Americans Act funding between service areas during the pandemic has been vital in allowing us to act in the ways I've described.
- We also appreciate the HEROES Act includes additional funding for the Aging Network, to deliver a wide range of services and we are committed to working with the Members of Congress to ensure that Congress continues to respond to critical needs during this crisis.

Remaining Need, Opportunities for Action

We are at a pivotal moment in aging services. COVID19 has brought to light strengths and gaps in a new way. We face significant challenges in the months ahead. In addition to food insecurity, social isolation will be a prevalent issue. Prior to COVID19, we strove to bring people out of their homes to congregate and socialize. However, even as the country opens back up, older adults will likely be asked to stay home as much as possible to minimize their risk. That means we have to reimagine our entire service delivery system. We will have to find new and efficient ways to deliver services and build partnerships.

We will look to Congress for continued support so that we can achieve this. There are three key areas I want to highlight:

- Fundamentally, we know that state and local revenues that help sustain our services will be significantly impacted. We need to make sure that older adults, and the Aging Network that supports them to safely live in the community and age with dignity, is adequately prioritized in federal discussions and future COVID-relief packages.

- One specific area that we must prioritize is leveraging technology to address and mitigate social isolation. Social isolation has been identified as a public health issue; among older adults, social isolation is connected to higher rates of abuse, risky health behavior, depression, and entering institutional care. Targeted funding for the Aging Network to purchase and disseminate technology, such as tablets and assistive devices, would allow low-income older adults to stay connected to loved ones, doctors, and community resources, and to participate in health and wellness activities online.
- Another critical area is the Aging Network workforce and its access to personal protective equipment and scarce resources. While we recognize that healthcare systems must have prioritized access to PPE, many Aging Network professionals are on the front lines of providing personal care and direct in-home services. This workforce should be recognized as an essential workforce that needs equipment and resources.

Closing

In closing, I want to reflect that within this turbulent time, there are also opportunities. The Aging Network is stepping outside of the box to try new things and develop creative and innovative services to meet the needs of our aging community members. And we are seeing people think about their older neighbors and ask questions about resources and service systems in ways that they were not before. People want to get involved and they want to help. It's so encouraging as a professional with 30 years of experience in aging and disability services to see this interest and commitment. With their partnership and coordination across federal, state, and local government, I am confident that we will rise to the challenges we face.