

Home Care and Assisted Living Program Advisory Council Meeting Notes – Tuesday, June 21, 2022

Attendees

Council members: Sue Boyd, Mariclaire England, Genevieve Gaboriault, Nancy Haugen, Susan Morgan, and Jarrod Peterson

Minnesota Department of Health (MDH): Lindsey Krueger and Daphne Ponds

Public: Many attendees via conference call

Guests: Robert Freeman, Nicole Mattson, Mollie O'Brien, and Heidi Simpson

Agenda

- Welcome
- Alzheimer's Association Proposal
- Finalize Social Isolation Grant
- RFP Process
- Next Steps

Welcome

Lindsey Krueger welcomed the Council Members. Council Members were unmuted and encouraged to speak freely while public attendees were muted to reduce distractions but were encouraged to place any comments or questions in the chat feature.

Lindsey is the current chair to the Advisory Council but Daphne Ponds, the new Executive Regional Operations Manager for State Operations, will slowly work to transition over to fill Lindsey's position. Lindsey reviewed the agenda – please see coinciding PowerPoint presentation. Lindsey greeted our guests from the Alzheimer's Association who were back to present on their proposal to the Advisory Council. Lindsey also reminded the group about HRD's ALL Together bi-monthly newsletter and provided a link for anyone interested in subscribing.

Dementia Care Training Grants Proposal

Dementia Care Training Team:

- Doug Beardsley – Care Providers
- Robert Freeman – Alzheimer Association
- Nicole Mattson – Care Providers
- Mollie O'Brien – Alzheimer Association
- Jill Schewe – Care Providers
- Heidi Simpson – Leading Age

Please see coinciding PowerPoint presentation. Issue is that people need to be trained. We need a workforce that is dementia capable. We need to find ways to make sure everyone has access by reducing or eliminating barriers.

Q & A

- Nancy: Fines should go to improved care. Dementia Care training is for educating the educators. How do we know the trainers are training the direct care staff?
 - Lindsey: Per 4659.0190 - A facility with an assisted living facility with dementia care license is responsible for ensuring and maintaining documentation that individuals providing or overseeing staff training relating to dementia and dementia care have the work experience and training required under Minnesota Statutes, section [144G.83, subdivision 3](#), and have successfully passed a skills competency or knowledge test required by the commissioner before the individual provides or oversees staff training.
 - Nicole: Folks trained in dementia care will be an asset to their organization, they will be more accessible to problem solve, accessible to troubleshoot, and talk through issues, etc.
 - Robert: Training is portable, so you are spreading knowledge throughout the ecosystem of long term care in MN.
- Susan: What is the Curriculum Review frequency?
 - Mollie: This is something I will have to reach out to find the answer. This is done at a national level vs. a chapter level where I work at.
 - Heidi: Larger organizations tend to apply for curriculum review.
- Heidi: Found that the preference on the type of training varies depending on the situation. Live is great but not always equally accessible to everyone. Needs to be convenient.
- Jarrod: Does the EssentiALZ test close the loop? Wants the group to investigate this further. Does the test need to be the EssentiALZ test? Can providers use a test that's not the Alzheimer's test? Do vendors know this?
- Nancy: Comfortable saying yes to individuals applying for grants but more difficult envisioning grants to larger organizations. Not sure why companies who are very large cannot pay the \$1900 for curriculum review. Also, how much of the funds are we willing to put into this?
- Sue: The people who probably need this the most are the smaller providers.
- Jarrod: Since the training is portable, we have the potential to serve multiple communities in the outer state area.
- Sue: Would the Alzheimer's Association be willing to give deal to the grant recipients?
 - Mollie: I can certainly ask.
- Mariclaire: If MDH were to purchase the tests in bulk at the discounted rates, that could be how we could control costs.
- Susan: Purchase the training and then assign the slots.
 - Jarrod: I like this – we could manage it better. We could distribute them out until they were gone.
 - Lindsey: Due to the cost, I need to determine if there needs to be an RFP for this.
- Mariclaire: I recommend spending \$200,000-\$250,000.
- Susan: Doesn't support grants for curriculum review process either.

MEETING NOTES: HOME CARE ADVISORY COUNCIL

- Jarrod agrees and prefers that the advisory council goes wider vs. deeper with its support.
- Genevieve: Would prefer to develop the RFP process first before approving the Alzheimer's Associations request.
- Advisory Council: All in favor of moving forward depending on what Mollie comes back with for any additional discounts.
- Lindsey: How does the advisory council see this working? How will they manage accordingly?
 - Mollie: Let me verify the process that we used with the National Guard and how that worked.
 - Susan: Would the organizations be requesting on behalf of their staff?
 - Nicole: The provider would like to be involved and approve who is getting the training.
- Jarrod: Send me your wish list by Friday.

Social Isolation Grant Revision Ideas

- Broaden to include both Home Care and Assisted Living. Prior to 8/1 the funds came from one pot, after 8/1 the funds are from two separate pots.
- Change name to "Social Connection" grant to sound more positive.
- Add a minimum dollar amount due to the amount of work. Although it was also suggested if someone requested a low dollar amount that would benefit residents the advisory council would still want to approve it.
- Up to \$5000 per individual grant.
- Mentioned that a lot of applicants fell short last time and didn't complete the process so not all the allotted funds were claimed.
- Potential for an electronic format (vs. paper).
- Provide proof they are a current vendor with MMB.
- Rolling process allows the advisory council to move on to the next facility if another provider fails to provide needed information.

Next Meeting

Tuesday, July 26 from 1:00 to 3:00 p.m.

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