2018
YEAR IN REVIEW

We are pleased to present Metropolitan Area Agency on Aging’s annual report for 2018. It was a year of building connections, strengthening relationships, and weaving diverse perspectives in order to better serve older adults and caregivers.

We saw an increase in Senior LinkAge Line® calls over 2017 and completed 59 percent more in-person Medicare counseling sessions as we prepared for significant changes in Medicare options for 2019. We added new staff to the Return to Community team as we expanded to help more people live at home, even following complex transitions.

Our Programs and Advocacy staff became more efficient while deepening and expanding their reach with organizations that serve older adults, especially those with a focus on people of color, Native Americans, and people with low income.

Establishing a Community Advisory Committee and a Public Programs Advisory Committee was an important achievement and sets the stage for a more comprehensive and integrated approach to addressing aging in the metro area.

Thank you for your support in 2018 and we look forward to our continued partnerships.

Randy Maluchnik
President

Dawn Simonson
Executive Director

Engaging key voices

We formed two new committees in 2018 to advise and shape our work. As conduits for two-way communications, these committees help us learn about what’s needed, what works, and what might be on the horizon for the aging population.

Community Advisory Committee
Thirteen community members with varied experience and representing diverse perspectives serve on this committee. The committee developed recommendations for the MAAA board including the guiding principle that all stakeholders need to be part of the decision-making process from the beginning to ensure that solutions meet the needs of the community. Central to the work of the committee is the understanding that we must embrace change and measured risk-taking to achieve a healthy and vibrant aging society.

Public Programs Advisory Committee
Counties perform important roles related to services that support older adults. With funding from federal, state, and local sources, county staff engage in Elderly Waiver, Alternative Care, Adult Protective Services, and other programs, as well as lead planning initiatives. Members of the Public Programs Advisory Committee help to ensure that county services and MAAA services are aligned and coordinated to best meet the needs of residents in our communities. Staff leaders from each of the seven metro counties participate on the committee.

During 2018, these committees focused on forming relationships and creating a foundation of shared information. By the end of the year, they were in position to set priorities and take action in 2019.
Expert information and assistance at your fingertips and in the community

Metropolitan Area Agency on Aging provides Senior LinkAge Line® services in the seven-county metro area.

Services are provided by a dedicated staff of social workers, nurses, and other professionals. They work diligently to understand each person's unique situation and to find straightforward solutions to often complex problems.

**OUR IMPACT BY THE NUMBERS**

- **7,724** Hours contributed by volunteers
- **517** Outreach presentations and events
- **21,308** People reached at presentations and events
- **2,960** In-person and phone support for living at home
- **37,498** Preadmission Screenings
- **113,421** Senior LinkAge Line® contacts*
- **1,734** Medicare counseling sessions at community sites
- **52** Trained volunteers provided Medicare information
- **1,370** Follow-up calls to people home from nursing facilities

*Includes contacts for all Senior LinkAge Line services, including calls handled from outside the metro area.
Home and community-based services that address social determinants of health

Access to home-delivered meals, the ability to get to doctor appointments, and help with cleaning and heavy chores can go a long way in helping people reduce stress and stay healthy.

In 2018, Metropolitan Area Agency on Aging distributed $7,386,472 in Title III Older Americans Act funds to local providers that deliver direct services to older adults and caregivers.

The funding went to 35 organizations and served approximately 13,900 individuals.

Our partners provide meals, assisted transportation, homemaker and outdoor chore services, legal assistance and education, health promotion, and service coordination for minority elders.

They support caregivers through individual and family consultation, support groups, education, and in or out-of-home respite care.

**COMMUNITY-BASED PARTNER ORGANIZATIONS**

AMHERST H. WILDER FOUNDATION | ANOKA COUNTY COMMUNITY ACTION PROGRAM
ANOKA COUNTY HUMAN SERVICES | BHUTANESE COMMUNITY ORGANIZATION OF MN
CENTRO TYRONE GUZMAN | CLUES | COMMONBOND COMMUNITIES | CONSUMER DIRECTIONS
DARTS | DIVISION OF INDIAN WORK | EAST SIDE NEIGHBORHOOD SERVICES, INC.
ESR, INC | FAMILYMEANS | HELP AT YOUR DOOR | JEWISH COMMUNITY CENTER OF ST. PAUL
JEWISH FAMILY & CHILDREN’S SERVICE OF MINNEAPOLIS | KOREAN SERVICE CENTER
LAO ADVANCEMENT ORGANIZATION OF AMERICA | LIVING AT HOME NETWORK
LUTHERAN SOCIAL SERVICE OF MN | LYNGBLOMSTEN SERVICES | MID-MINNESOTA LEGAL AID
MINNEAPOLIS AMERICAN INDIAN CENTER | NORMANDALE CENTER FOR HEALING AND WHOLENESS
NORTHEAST YOUTH & FAMILY SERVICES | PILLSBURY UNITED COMMUNITIES - BRIAN COYLE COMMUNITY CENTER
PRESBYTERIAN HOMES & SERVICES - OPTAGE | ROSEVILLE AREA SENIOR PROGRAM
SCOTT-CARVER-DAKOTA CAP AGENCY | SENIOR COMMUNITY SERVICES | SOUTHERN MN REGIONAL LEGAL SERVICES
UNITED CAMBODIAN ASSOCIATION OF MN | VIETNAMESE SOCIAL SERVICES OF MN
VOLUNTEERS OF AMERICA MN & WI | WELLSHARE INTERNATIONAL
When community living specialists from Return to Community (RTC), a joint program of the Minnesota Board on Aging and Minnesota’s Area Agencies on Aging, started showing up at nursing homes, the local staff were often skeptical. The specialists came with a referral from the state in hand and said, “I’m here to help.”

It took time to build trust and to demonstrate the value the community living specialists bring to people wanting to return to their homes and get on with their lives. The specialists dug in, creating customized support plans, providing resources and information and helping to solve complex problems.

It quickly became clear to the facility social workers that the community living specialists were experts at hearing the concerns of individuals and their caregivers and targeting the right solutions to meet their needs. They could see that patients who had the extra support of a community living specialist thrived and were able to live safely at home.

Now many of those social workers are RTC’s biggest supporters. They are the eyes and ears in the field and are able to recognize people who would benefit from RTC services and make a referral. RTC specialists have coached facility social workers to identify people with hearing loss, mild cognition issues, or complex needs. “When people don’t have a support network, they are at such a disadvantage,” said Katelyn Kuechenmeister, RTC community living specialist. “We want to know about them early on so we can help.”

As a result, community living specialists are able to get ahead of problems and more effectively support a successful transition home. That’s good for the individual and saves private and public resources.

“Return to Community specialists are invaluable. They know what services are available in the community and how to tap into them.”

—Heidi Halvorson, Nurse Transition Coordinator, Benedictine Health Center at Innsbruck

“We work with the individual, their support team, and facility staff to create a customized action plan. It’s a detailed plan with contact information, schedules, and costs for each service they’ve selected. It becomes their blueprint for a safe transition home.”

—Katelyn Kuechenmeister, Return to Community, community living specialist

Heidi Halvorson (left) and Katelyn Kuechenmeister
Overcoming barriers to improving mental health

Nearly one in five adults experiences mental illness, with depression and anxiety disorders being the most common among older adults. But mental illness is not a part of aging, and most mental illnesses can be treated successfully.

Biases and misconceptions about both mental illness and aging make it particularly hard for older adults to overcome stigma and get help for anxiety, depression, bi-polar disorder, and other mental illnesses.

MAAA is committed to working with community partners to reduce barriers for older adults to access mental health services. In 2015, MAAA convened leaders from 30 organizations to form the Mental Health and Older Adult Services Roundtable. The group identified three main challenges:

- The workforce serving older adults lacks expertise and training to address the mental health needs of this population.
- There is a lack of coordinated effort between key stakeholders serving older adults with mental illness.
- Access to mental health services is limited by provider capacity, distance, and reimbursement.

In 2018, Juniper completed a first round of grant funding that allowed us to establish a robust statewide network for delivering nine evidence-based health promotion classes. By the end of 2018, 16,018 participants had taken classes offered by 133 organizations and 661 leaders.

Late in 2018, Innovations for Aging (MAAA’s nonprofit subsidiary), signed an agreement with Blue Cross Blue Shield to provide Juniper classes to their members who are dually eligible for Medicare and Medical Assistance. This contract is a first step in what we hope will be strong partnerships with health plans, making Juniper classes available to more people.

Visit yourjuniper.org to find and register for classes.
In 2018, members of the Roundtable brought their depth of knowledge, diverse perspectives and new insights to two projects. These initiatives will significantly improve the mental health training available to those that serve older adults.

**CareChoice Cooperative**

CareChoice Cooperative is an association of nursing and continuum of care facilities. They were interested in developing a learning curriculum around mental health for people working in long-term care, and wanted to develop a grant request. Roundtable members worked intensively with CareChoice to design the elements of the training and define topics and key messages. CareChoice received funding and is implementing the trainings in their member communities in 2019.

**Older Adult Mental Health Videos**

Roundtable members also worked with Stratis Health to create a series of training videos for people who work with older adults. The resulting videos and supportive materials provide a good base of knowledge and are suitable for a broad range of people who serve older adults, including people who work in health clinics, community centers, housing complexes, home care, and transportation.

The videos are available to view online at Stratis Health’s Lake Superior Quality Innovation Network. Visit bit.ly/lsqinMentalHealth.

“If you could feel relief from the grip of depression, who wouldn’t want that? We need to instill that in people—treatment works and it’s worth doing at any age.”

—Kay King, Older Adult Program Coordinator for NAMI Minnesota, and a member of the Roundtable.

---

**Financials**

**REVENUES**

- Contributions $85,469
- Grants & Contracts $19,157,375
- Other $195,814
- Total $19,438,658

**EXPENSES**

- Information & Assistance $4,967,474
- Nutrition $4,458,334
- Supportive Services $1,634,675
- Admin & Program Development $1,461,983
- Data Management MinnesotaHelp.info® $1,360,588
- Health Promotion $1,257,154
- Pension Consultation $216,214
- Caregiver Support $905,351
- Other $533,546
- Total $16,795,319

Visit yourjuniper.org to find and register for classes.
2018 BOARD OF DIRECTORS

Randy Maluchnik, President, Carver County Commissioner
Kris Orluck, Vice President and Secretary, Senior Coordinator, Maple Grove Parks and Recreation Board
Barb Blumer, Treasurer, Attorney at Law, Barb Blumer Law, P. A.
Iris Freeman, Adjunct Professor, Elder Justice Externship, Mitchell Hamline School of Law
Kendall Johnson, Director, Quality Improvement and New Initiatives, Behavioral Health, Park Nicollet and Health Partners
John Selstad, Retired Gerontologist and Dementia Services Developer

Becky Stibbe, Partner Relation Officer, Saint Paul & Minnesota Foundations
Lucy Swift, Former VP, MN Productions and Partnerships at Twin Cities PBS
Sarah Urtel, Executive Director, Strategy and Organizational Effectiveness, Ridgeview Medical Center & Clinics
David Van Sant, Product Manager, UnitedHealthcare
Mary Youle, Retired VP of Housing and Community Services, Leading Age MN
Fang Yu, Associate Professor, University of Minnesota, School of Nursing

651.641.8612 | metroaging.org