

**ALAMEDA COUNTY  
ADVISORY COMMISSION ON AGING**

# **NOTICE**

## **COMMISSION CHAIR AND VICE-CHAIR ELECTIONS**

**SEPTEMBER 11, 2023**

**9:15 a.m.**

**(In-Person) Maxwell Park Conference Room  
6955 Foothill Blvd. Suite 137/143  
Oakland, California 94605**

**(Virtual/Telephone) [ZOOM](#)  
1-669-900-6833 US (San Jose)  
Meeting ID: 899 2454 4024  
Passcode: 839169**

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**Commission Chair Candidates:**

Barbara Price  
Bobby Grant  
Donna Griggs-Murphy  
Laura McMichael-Cady  
Linda Boykins

**Commission Vice-Chair Candidates:**

Barbara Price  
Bobby Grant  
Donna Griggs-Murphy  
Laura McMichael-Cady  
Linda Boykins

**Tentative Agenda:**

**Please see Posted Agenda**

[Advisory Commission on Aging \(alamedacountysocialservices.org\)](http://alamedacountysocialservices.org)



Andrea Ford, Agency Director

Faith M. Battles  
Assistant Agency Director

**Department of Adult & Aging Services**  
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## ADVISORY COMMISSION ON AGING

### General Session Agenda

Monday, September 11, 2023

9:15am – 11:45am

#### In-Person

Maxwell Park Conference Room  
6955 Foothill Blvd. Suite 137/143  
Oakland, California 94605

**TELECONFERENCING GUIDELINES:** FOR TELECONFERENCED COMMISSION MEETINGS, MEMBERS OF THE PUBLIC MAY OBSERVE AND PARTICIPATE IN MEETINGS BY FOLLOWING THIS LINK: [ZOOM LINK](#) DIALING IN: +1 669 900 6833 US (San Jose). Meeting ID: 899 2454 4024 | Passcode: 839169

Public participation at Commission meetings is encouraged. We request that individuals limit their comments on any single item on the agenda to two minutes. The chosen spokesperson for a group may speak for four minutes.

Agenda Item	Material Provided	Presenter	Time
Call to Order/Roll Call		Interim Chair	9:15–9:20
Approval of July 2023 ACA Meeting Minutes		Chair/Commission	9:20 – 9:25
Comments from the Public for Items not on the agenda		General Public	9:25 – 9:35
Comments from the ACA Chair <ul style="list-style-type: none"> <li>▪ Status of ACA</li> <li>▪ Recruitment</li> <li>▪ Attendance, etc.</li> </ul>		Interim Chair	9:35 – 9:45
Election of New Chair and New Vice-Chair		Interim Chair	9:45 – 9:55
2023-2024 Area Plan Update (APU) Vote		Commission	9:55 – 10:05
Area Agency on Aging Director Report		Jennifer Stephens-Pierre, SSA	10:05 – 10:15
Countywide Area Plan (CWAP) 2024-28 Progress Report		Kim Fogel, SSA	10:15–10:25
Bylaws Review		Commission	10:25–11:00

Commission Committee Reports <ul style="list-style-type: none"> <li>▪ Executive</li> <li>▪ Service Delivery</li> <li>▪ Public Relations</li> <li>▪ No Wrong Door (NWD)</li> <li>▪ Budget and Funding</li> </ul>	(5 min per report)	Committee Members	11:00—11:30
Oral Communications/Announcements		Commissioners, Staff,	11:30—11:45
		Public	
Adjourn		Commission	11:45

**Next ACA General Session Committee is scheduled for Monday, October 9, 2023, 9:15am—11:45pm**

Check website [Advisory Commission on Aging \(alamedacountysocialservices.org\)](http://alamedacountysocialservices.org) for update.

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**Notes**



Andrea Ford, Agency Director

**ADVISORY COMMISSION ON AGING (ACA)  
 Commission Meeting Minutes  
 Monday, July 10<sup>th</sup>, 2023 | 9:15am to 11:45am  
 Maxwell Park Room, Eastmont Mall, Ste 143**

<p><b><u>ACA Commissioners Present</u></b>          Laura McMichael-Cady (Chair)          Kester Watters (Vice-Chair)          Dr. Linda Boykins          Florence Raskin          Barbara Price          Gursewak Singh Dhaliwal (Virtual)  <i>*in person unless otherwise noted</i></p> <p><b><u>Commissioners Absent</u></b>          Donna Griggs-Murphy          Bobby Grant          Sukvinder Waraich</p>	<p><b><u>County of Alameda Staff Present</u></b>          Faith M. Battles (Assistant Agency Director)          Sonya Frost (Division Director)          Jennifer Stephens-Pierre          Diarra Piggue          Esperanza Contreras          Mariana Austin          Charles Jones          Marlisa Davis          Kim Fogel          Deborah Cooper</p>
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Item	Discussion / Recommendations
A. CALL TO ORDER Welcome & Introductions Adopt agenda	Meeting Chaired by Commissioner Watters called to order at 9:20am. Roll Call of Commissioners Quorum achieved.
B. REVIEW AGENDA.	Agenda reviewed and approved as read.
C. APPROVE MINUTES	Motion to accept meeting minutes from 06/12/2023: (M) Kirsch (S) McMichael-Cady Approved.
D. COMMENTS FROM THE PUBLIC	<ul style="list-style-type: none"> <li>Faith M Battles: AAS will wait for the CWAP agenda item to share updates regarding the APU / CWAP process.</li> </ul>
E. COMMENTS FROM THE CHAIR	<ul style="list-style-type: none"> <li>Please see attached presentation at the end of the minutes for the comments from Chair Watters.</li> </ul>



Andrea Ford, Agency Director

<p>F. CWAP UPDATE</p>	<ul style="list-style-type: none"> <li>• Faith M Battles spoke with Nakia Thierry, EdD, MSG and Victoria Wu and received feedback that Jeremy Avila and Brandi Devall from CDA informed Victoria Wu that the ACA Commission does not need to approve the updates in the Countywide Area Plan for it to move forward as the Commission is advisory in nature.</li> <li>• See attached presentation for more information.</li> </ul>
<p>G. AAA DIRECTOR'S REPORT        (J. Stephens-Pierre)</p>	<ul style="list-style-type: none"> <li>• AAA is still working on the launch of the Countywide Area Survey</li> <li>• AAA Director is going to attend the USA Aging Conference later in the week and will work on getting information from other AAAs on how they are enhancing productivity and innovating their practices to best deliver services.</li> <li>• AAA will meet with the Nutrition Program providers as they are the most impacted by the resume to in person services required by the CDA.</li> <li>• New Area Plan budget was just released; they are scheduled to meet with the BOS on September 18<sup>th</sup> to have it approved.</li> <li>• AAA has received additional funding from the State through the Older Californians Act.</li> <li>• APU: Please see attached presentation at the end of the document.</li> </ul>
<p>H. COMMITTEE REPORTS</p>	<ul style="list-style-type: none"> <li>• <b>Executive Committee</b> (K. Watters)           <ul style="list-style-type: none"> <li>○ The commissioners agree that they can invite non-commissioners to participate in the committee, but they will not have any voting powers.</li> <li>○ The commission would like more information on the life cycle of grants. The Commission is particularly interested in finding out what the outcomes of the programs are, in terms other than raw data.</li> </ul> </li> <li>• <b>Service Delivery</b> (G. Dhaliwal) – No report.</li> <li>• <b>Public Relations &amp; Senior Update</b> (L. McMichael-Cady)           <ul style="list-style-type: none"> <li>○ Working on the newsletter and would like to move the deadline as AAA will be participating in the Health Living Festival.</li> </ul> </li> <li>• <b>No Wrong Door</b> (K. Watters)           <ul style="list-style-type: none"> <li>○ The committee met and discussed the ADRC. The committee would like more details regarding the trainings for the ADRC.</li> </ul> </li> <li>• <b>MPA/ CWAP</b> (H. Kirsch) – No report.</li> <li>• <b>Budget &amp; Funding</b>– No report.</li> </ul>



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**Andrea Ford, Agency Director**

I. ORAL COMMUNICATIONS AND ANNOUNCEMENTS	<ul style="list-style-type: none"><li>• None</li></ul>
J. OTHER ITEMS	<ul style="list-style-type: none"><li>• <b>Next Meetings:</b> Executive Committee: Monday, May 22, 2023, at 9:00AM ACA Commission Meeting: Monday, June 12, 2023 at 9:15AM</li></ul>
K. ADJOURNMENT	Meeting adjourned at 11:46am

# APU Responses

## (Questions submitted by Commissioners Kirsch and Raskin)

- 1. Page 2, checklist: why is Annual budget not checked/not included?**

The annual budget is not submitted to CDA with the Area Plan. The annual budget is developed and approved through the AAA Fiscal Officer and AAA Director and submitted to the CDA Fiscal Team. The Area Plan is submitted to the CDA Planning Team.
- 2. Page 3, State demographics: why is there such a large difference in the number of 'low income' 60+ residents and the number Medi-Cal eligible 60+ residents (40,000 vs 82,000)?**

Not all low-income seniors are eligible for Medi-cal. There are some cases where an older adult may border eligibility or if qualified their share of cost is a large portion of their income, so the program is not a viable option for them.
- 3. Page 4, Public Hearings: having only one public hearing on the APU seems completely insufficient; also, no alternate language access is provided, and no input from any institutional residents is available**
- 4. Pages 4-5: Why is there no information on comments from the public at the hearing? Is this going to be added after the May 2 hearing?**

Yes, the feedback from the May 25 Public Hearing was summarized in the Area Plan Update.
- 5. Pages 6-7: Why are there no details in the Update column? "Continue" is not a sufficient response. For example, what new/different actions will be taken in working with the Age Friendly Council this year? And has a staff resource been assigned to work on WHO/AARP activities? Who is it, and how much of an FTE has been assigned?**

The APU was updated to include actual updates on each objective, if available. The AAAD holds a seat on the AFC and participates on several subcommittees, Embracing Aging and Digital Divide.
- 6. Page 8: The AAA will engage in meetings and workgroups with Age-Friendly Council, including non-OAA funded agencies, and Health Care Services Agency to develop strategies and plan approaches to achieve full cooperation and engagement of all county departments involved in the delivery of services to older adults. The anticipated outcome is 100 percent inclusion of all County Agencies in the partnership.**

**What has been accomplished? What actions are planned for 2023-2024?**

As aforementioned, the AAAD holds a seat on AFC and participate in several subcommittees. The AAAD executed MOUs with Public Health for Vaccination Outreach to Older Adults, Behavioral Health for Intergenerational Activities/Nutrition Education, and Emergency Medical Services for Senior Injury and Prevention planning. In addition, AAA will carry over our efforts to stand up the HCP program and re-establishing Older American Act Programs that ended in the last recession.
- 7. The AAA will work in partnership with the Age-Friendly Council, Healthcare Services Agency, Community Development Agency and other public and nonprofit organizations to facilitate a Leadership Team to monitor progress and results of the County-Wide Plan for older adults.**

**Has such a team been created? What actions are planned for 2023-2024? Are members of the ACA going to participate in this Leadership Team?**

# APU Responses

## (Questions submitted by Commissioners Kirsch and Raskin)

As aforementioned, the AAAD is a member of the AFC which is comprised of HCSA, CDA, and public and non-profit organizations. The AFC holds annual strategic planning meetings and routine executive meetings to plan and draft an annual action plan to monitor and assist with executing the goals/results of the CWAP. The actions for '23-'24 include continued advocacy for addressing the digital divide, legislative advocacy for older adult programs, training for older adult providers, advocacy and program building for dementia/ALZ services. There are commissioners on the ACA that are members of the AFC.

8. **Page 8, 2.3: Has such a report been created/distributed? Is there a planned date to do this in FY 23-24?**

**2.3 – The AAA will support the development of an annual unified report that includes data on the number of older adults and services provided across County Departments, including services provided through community partners.**

Several AAA staff participate on SSA's performance metrics team. Their goals are to refine/develop reports that accurately capture data for services provided through community providers. The AAA data is shared with other County departments for their reporting purposes such as Measure A. AAA data is also captured in the County's Maintenance of Effort report.

9. **Page 9, 2.5: Why are there no measurable actions described?**

**2.5 – The AAA will strengthen its collaboration with groups serving veterans and will focus attention on assisting veterans that are older adults with accessing benefits. The AAA will engage in countywide outreach through the CVSO, VAC, ACA, Age-Friendly Council, including non-OAA funded agencies, and Health Care Services Agency to identify and engage groups providing services to older adult veterans. *The AAA will continue our partnership with Swords to Plowshare, advocating and establishing coordinated services for older adults who are Veterans.* The anticipated outcome is the development of a broader coalition of community partners targeting attention, assistance, and access to older adult veterans in need of benefits.**

As mentioned, the AAA will continue our partnership with STP. In the '22-'26 RFP cycle, AAA contracted with STP to provide transportation and information and assistance services to older adults. The AAAD is also the CVSO Program Manager, in her dual role she has coordinated partnerships with STP with Veteran Treatment Court, MHSA, Fremont Resource Center, ADRC services, and BOS events. These efforts will continue in '23-'24 to include a joint outreach event.

10. **Page 9, 2.6: One meeting is probably not sufficient. What other actions can be taken?**

**2.6 - The AAA will identify and work in partnership with local and regional governmental and non-profit agencies, including non-OAA funded agencies, that are actively involved in disaster planning and response. The AAA will participate in a minimum of one meeting annually with these organizations to ensure the needs of the older adult and physically impaired adult populations are considered, included, and integrated in the disaster planning process and response efforts.**

All County employees are designated disaster workers and are subject to deployment to OES if needed. Marlisa Davis is the AAA Disaster Response Coordinator and her role is to monitor emergency or disaster events and communicate directly with CDA and providers on the impact of service provisions. In the past, the ACA Health & Safety subcommittee led community engagement in this area with activities such as the Whistle Project. This is Coordination, so activities must include non-AAA Contractors.



# APU Responses

## (Questions submitted by Commissioners Kirsch and Raskin)

**10. Page 10, 2.7: Why aren't there specific numbers of trainings planned? This could be very valuable in improving services to seniors.**

**2.7** – The AAA, in partnership with the Age-Friendly Council, non-profit agencies, municipalities, training departments and community stakeholders, will work through the Embracing Aging initiative to provide training to County and CBO providers to increase their knowledge and skills to address the unique needs of older adults, including behavioral health, dementia and other issues that affect older populations. **The AAA Director continues to serve on the Embracing Aging Committee of Age Friendly Council. The committee recently developed a training series targeting staff in In-Home Supportive Services, Adult Protective Services, Public Guardian/Conservators office, and Veterans Services titled the “Alameda Geriatric Workforce Enhancement Program”. The series includes training curriculums on issues impacting older adults and workers such as mental and substance abuse disorders, fall prevention, compassion fatigue, and serving adults with disabilities.** The partnership will engage in meetings and workgroups with SSA TACT to develop a training curriculum and make it available to County and CBO Providers. Non-OAA funded entities comprise the overwhelming majority of the collaborating partners. OAA-funded providers are primarily cities, that provide vital input to help ensure the development of a relevant training curriculum for those serving older adult populations. The anticipated outcome is the development and **continued** implementation of the Embracing Aging Training for County and CBO Providers.

The GWEP was a 5-part training series that took offered to program staff from February 2023 through June 2023. The training schedule is attached.

**11. Pages 11-13: Whole section has no measurable outcomes (aside from number of newsletters and achievement of ADRC status). Why are there no actions to be taken in 23-24?**

Pages 11-14 contain Goal 4 & Objectives:

Objective 4.2 is for Health Promotion services and the planned service units are included in Section 10 Item 3 Title IIID/ Disease Prevention and Health Promotion on page 18.

Objective 4.12 is for the Long-Term Care (LTC) Ombudsman Program and includes planning goals for Certified LTC Volunteers. The full scope of planned targets and service units is included in Section 10, following Item 3.

The TITLE IIIB and Title VIIA: LONG-TERM CARE (LTC) OMBUDSMAN PROGRAM OUTCOMES are on pages 19-25.

Objective 4.13 is for Elder Abuse Prevention services and includes planning goals for Community Education. The full scope of planned service targets is included in Section 10, following the TITLE IIIB and Title VIIA: LONG-TERM CARE (LTC) OMBUDSMAN PROGRAM OUTCOMES.

The TITLE VIIA ELDER ABUSE PREVENTION SERVICE UNIT PLAN OBJECTIVES are on pages 26-29.

**12. Pages 14-17: Almost all these items have no measurable outcomes (aside from effort to select and train 8 ombudsman volunteers). What actions can be taken in 23-24?**

Pages 14-17 contain the SECTION 10 - SERVICE UNIT PLAN (SUP) OBJECTIVES. The projected service units for each individual service for the planning year are included in this section.

**13. Page 17, Adult Day Health: how will the large increase in ADH services occur? (over 100% increase)**

# APU Responses

## (Questions submitted by Commissioners Kirsch and Raskin)

Increase in County funding and transition to a multi-year funding process.

- 14. Page 17: Case Management: how will the large increase in Case Mgmt services occur? (50% increase)**  
Increase in Contractors through the RFP in conjunction with an increase in County funding and transition to a multi-year funding process.
- 15. Page 18: Congregate Meals: why is this service projected to shrink in 2023-2024?**  
Decrease in Contractors through the RFP in conjunction with a decrease in demand and increase in service delivery costs and challenges.
- 16. Page 18: Transportation: why is the volume of trips so small?**  
Only 1 Respondent bid and was awarded a contract through the RFP.
- 17. Page 19: Information and Assistance: How is the volume of services going to double this year?**  
Increase in Contractors through the RFP in conjunction with an increase in County funding and transition to a multi-year funding process.
- 18. Page 20: all the “other” services are planned to increase significantly other than the newsletter. How will this be accomplished?**  
Increase in Contractors through the RFP in conjunction with an increase in County funding and transition to a multi-year funding process.
- 19. Page 20: How will the number of participants be increased in the exercise programs, and how can we measure the impact of this increase?**  
Increase in Contractors through the RFP in conjunction with an increase in County funding and transition to a multi-year funding process. Contractors perform surveys, collect class evaluations, and solicit direct feedback from participants.
- 20. Page 23: Why has the target for attending Resident Council meetings (for the LTC Ombudsman program) been dropped to 2? This seems like an important source of feedback from seniors living in SNF/RCFE settings.**  
Agreed, AAA has brought this concern to Empowered Aging attention and were working with them on expanding their service provision in the County. One of their primary issues that impact their ability to attend resident council meetings is the decrease in their primary workforce “volunteers” and low staffing. The AAA is working directly with EA to address these issues.
- 21. Page 23, similar question re: Family Councils – why is the target so low?**  
Same issue as stated in my response above.
- 22. Page 26: CNA training program is an excellent goal. This work needs a timeline for completion and a project plan. Can these be provided to the Commission on Aging?**  
The timeline was provided for implementation was provided.
- 23. Pages 26 and 27: Visits to SNFs and RCFEs not in response to complaints are very low and dropping. What can be done to increase these visits, and what happens during the visits? Is there a routine**

# APU Responses

## (Questions submitted by Commissioners Kirsch and Raskin)

inspection; what tool is used; what is the focus of the visits? Also I note the number of RCFEs in total seems to be dropping, is this a concern?

This is very much a concern and is a result of the same issues as stated above. The AAA is holding monthly meetings with EA to address these concerns.

**24. Pages 27 and 28: Why are the numbers of staff and volunteers for the LTC Ombudsman program dropping? These people are critical to be able to advocate for quality care in SNFs/RCFEs.**

Ombudsman services rely heavily on older adults volunteers to perform their services. During COVID, Ombudsman volunteers drastically decreased statewide because most were ordered to SIP. EA is having a difficult time recovering from the loss of volunteers and as mentioned we're working directly with them to develop a volunteer and staff recruitment plan.

**25. Page 33: Why has the number of respite hours (under Family Caregiver Support) had such a major decrease? Can this be restored to prior levels?**

The AAA is constantly assessing the landscape of FCSP services and ways to maintain or increase service levels. In FY '23-'24, FCSP will receive additional funding through ARPA and HCBS.

**26. Page 40: How to connect with vulnerable seniors during/after a disaster needs much more detail and a timeline for progress to be made/measured. How many vulnerable seniors need to be contacted? What methods will be used to contact them, and how will that contact information be maintained/updated?**

The AAA works directly with our providers to enhance their efforts in connecting with seniors during an emergency/disaster. The disaster coordinator communicates resources and updates that are made available locally and statewide. Most providers have phone trees that are utilized to identify and contact their consumers in emergency. Phone trees are updated and maintained by providers. In FY '22-23 and '23-'24, providers were allocated additional funds and were strongly encouraged to use the funds to strengthened their infrastructure, enhancing their ability to maintain service levels during an emergency or disaster.

**27. Here are some of my questions regarding the CWAP Update. The highlighted sentences are from the CDA guide.**

The age of 60 is used as a reference in planning, yet we are planning to do a survey starting at age 50. Is 50 a senior?

Older Americans Act funded services are for adults age 60 and over with exceptions for a few programs such as Senior Employment and Family Caregiver Support.

The minimum target age for the survey is lower than the minimum service age because the Needs Assessment seeks input from those who are aging into the services to incorporate a forward-thinking perspective in the planning and development of services and strategies to address the identified needs.

**28. Annual public meeting. How does the meeting set for May 8th accomplish the requirements below?**

The Public Hearing is a public meeting and solicits comments from the community on the Area Plan. The Plan includes outreach efforts and incorporates comments received at the Public Hearing into the Plan.

**Area Plan Guidance Update**

# APU Responses

## (Questions submitted by Commissioners Kirsch and Raskin)

The purpose of the public hearing is to solicit comments from the community on the Area Plan and present the AAA's methods for developing the Area Plan. The AAA must conduct at least one public hearing during each year of the four- year planning cycle.

For the Area Plan, the public hearing section must describe:

- Outreach efforts used to seek input from institutionalized adults, homebound adults, and adults with disabilities.
- Comments received at the public hearings.

### 29. Outcomes from the last update, or from the plan in general. I only see Output. Anticipated Outcomes are not outcomes. How can we know if the objectives are being met?

The APU has been updated to include more detail to explain how outcomes are measured by AAA. The majority of programs administered by AAA require consumers to meet eligibility criteria based on socioeconomic status and being a member of a disadvantaged or marginalized group. Most consumers seek our services based on need and our outcomes are measured by meeting the needs of those who seek our services.

Multi-year PD & C projects must include annual revisions of the objective in the yearly Area Plan **Updates to reflect accomplishments and progress made from the previous year. Updates should include any measurable outcomes or outputs (if applicable) and must clearly identify any further action items that remain outstanding to complete the objective. Requirements for Program Development and Coordination Objectives**

1. **Output**—What is being measured? An output is usually a quantity or a number of something.
  - o Example: 10 participants attended 5 training classes.
  - o Output: The number of people and the number of trainings are considered outputs, not outcomes.**Outcome**—An outcome is the effect or result of something.
  - o Example: Participants learned how to read Nutrition Facts labels and better health was gained.
  - o Outcome: What was learned and how their lives changed is an outcome, not an output.

### 30. I do not see the demographic information for Commissioners. There is a possible misunderstanding in saying that 10 commissioners are over 60. One might misconstrue that the other 11 commissioners might be under 60, when in fact there are only ten commissioners.

This instruction to include vacancies is stated for Total Council Membership but is not stated for the Number of Members over age 60, so it was not applied to Members over 60. There are no other 11 Commissioners to even consider, there are only 10 Commissioners listed.

### 31. Include the name, title, term of office, and demographic information for each Advisory Council member on the form provided in Part II:

Demographic information for Commissioners is included under the Race/Ethnic Composition section.

### 32. Errors

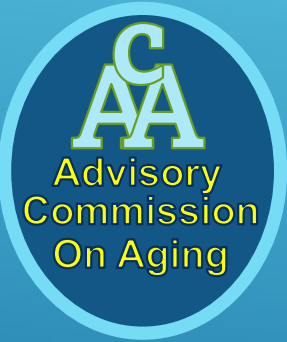
- Date for Public Hearing 5/8/2022 should be 2023. Corrected
- Howard Kirsch term expires July 2026 Corrected
- Sukhvinder Waraich was excluded from the list of commissioners. There should be 10 Commissioners. Corrected



# Better Relationship



July 2023



# Better Relationship



Everyone here works hard. County staff is energetic and helpful. Commissioners give of their time voluntarily.

We all have the same mission: help the seniors of Alameda County. But we can do better.

July 2023



# Better Relationship



At the June meeting the ACA was asked to suggest some ways in which we can be more of a team.

We here propose some rules and protocols.

We suggest that if we can agree, remember, and abide by rules and protocols our interactions will go smoother.

July 2023



# Better Relationship



There are five areas that we address:

- Programs and Projects
- Meetings
- Committees
- Getting Information
- Efficiency

July 2023





# Better Relationship Programs and Projects



Maintain a log of all programs and projects under way.  
Update this log as often as necessary.



July 2023



# Better Relationship Detail for Each Program and Project



## Well Defined

Purpose, goals and objectives.

## Staffing

Primary responsibility. Size of team.

## Measurable

Progress should be quantifiable. The impact on seniors should be demonstrated.





# Better Relationship Detail for Each Program and Project



## Budget

When possible: funds allocated, their source, targeted expenditure. Should be a living document updated as necessary.

## Plans

Enough detail to track progress and determine ACA involvement. Identify dates and specific output or result at milestones. Should be a living document updated as necessary.





# Better Relationship Meetings



- Stay focused on specific agenda item or question.
- The ACA chair is responsible for maintaining order and keeping the meeting on the agenda.
- A speaker must be recognized by the chair before speaking.
- A dialog between two participants will be honored without further need for recognition.
- No one may interrupt a speaker except the chair to stay on the agenda.
- Any speaker who is interrupted by the chair must respect the request.

July 2023



# Better Relationship Committees



- Committees should reduce the time commitment for all concerned.
- There is no redundancy of information.
- Committees get detail, ACA gets summary.
- Anyone interested in detail may attend the committee meetings.

July 2023



# Better Relationship Committees



- ACA Committees are independent of, and have different goals than, AAA working committees.
- Keeping committees involved at whatever level of detail they deem appropriate will provide the opportunity to take advantage of advice and suggestions.
- The ACA General Meeting should only get summary information unless a commissioner has questions.
- The majority of the General Meeting should be taken up by committee reports.
- The ACA Executive Committee only deals with meeting agenda and administration.

July 2023



# Better Relationship Getting Information



We need to change from  
"Here's what we have done" to  
"Here's what we are doing".

July 2023



# Better Relationship Getting Information



- The commission must have information.
- The commission requests information as text whenever possible. Verbal elaboration is difficult to absorb and evaluate
- Listen carefully to get the intent behind a question.
- Items for Director's and Chair's reports should be part of meeting materials.
- Having access to such material will eliminate many question during meetings

July 2023





# Better Relationship Getting Information



- Understanding comes through dialog.
- Dialog involves questions, discussion, more questions, and more discussion until the information needed is understood.
- Only the person seeking information can decide if they get what they seek.
- Providing information is the duty of the staff.
- Offering advice is the duty of commissioners. It does not imply disrespect for the work.

July 2023



# Better Relationship Efficiency



SSA/AAA staff have more work and not enough time. They need to find ways to increase their productivity. We owe it to them to make the most of the time they are available.

Commissioners are volunteers. Their time is limited. We owe them the respect of keeping meetings effective, making the most of the time we have.

July 2023



# Efficient Use of Time a Goal for Commissioners



- Commission Meeting 2 hours  
Required for all
- Executive Committee Meeting 1 hour  
Required for all Committee Chairs **Commissioners: 4 hours**  
**Committee Chairs 5 hours**
- Committee Meeting 1 hour  
Required for all Committee Members
- Independent Research and Review 1 hour  
Required for all Committee Members
- Field Work, Webinars, Documentation...be Generous  
Volunteer



July 2023



# Better Relationship Efficiency



## Focus

Stay focused on the question or subject.

## Clarity

Clearly state information.

## Set Standards

Routine and standards eliminate trying to organize from scratch

## Organize Information

Information should not be buried in emails or chat but organized in a searchable library.

July 2023



# Better Relationship Efficiency



## Active Commissioners

Research, attend webinars, write opinions, do field work, ask questions.

## Continuity

Each meeting builds on the previous one. Commitments are followed up.

## Transparency

The more information is shared the fewer questions are required for understanding.



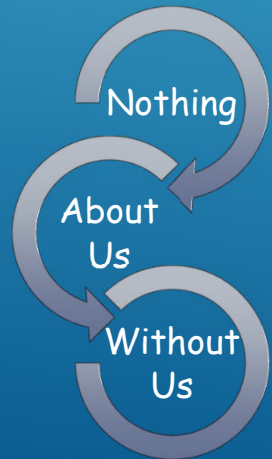
July 2023



# Thank You



Comments,  
suggestions,  
concerns will be  
gratefully  
considered



July 2023