Oregon Wellness Network

Oregon Association of Area Agencies on Aging & Disabilities (O4AD)
Oregon Cascade West Council of Governments (OCWCOG)

AAAs and OWN & Research Topics

Presented by: Lavinia Goto and Randi Moore

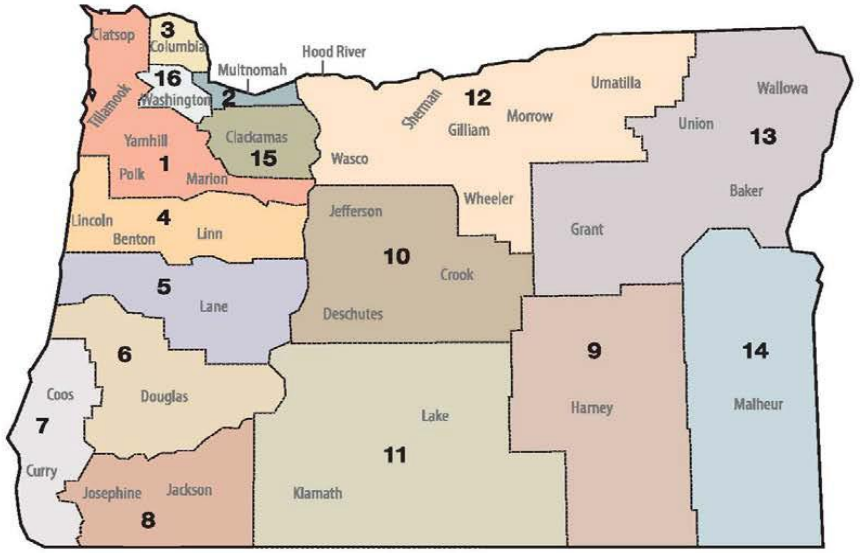
At: CHAR Fall 2024 Faculty Retreat

November 2024

What are AAAs? (Hint: not the American Automobile Assoc)

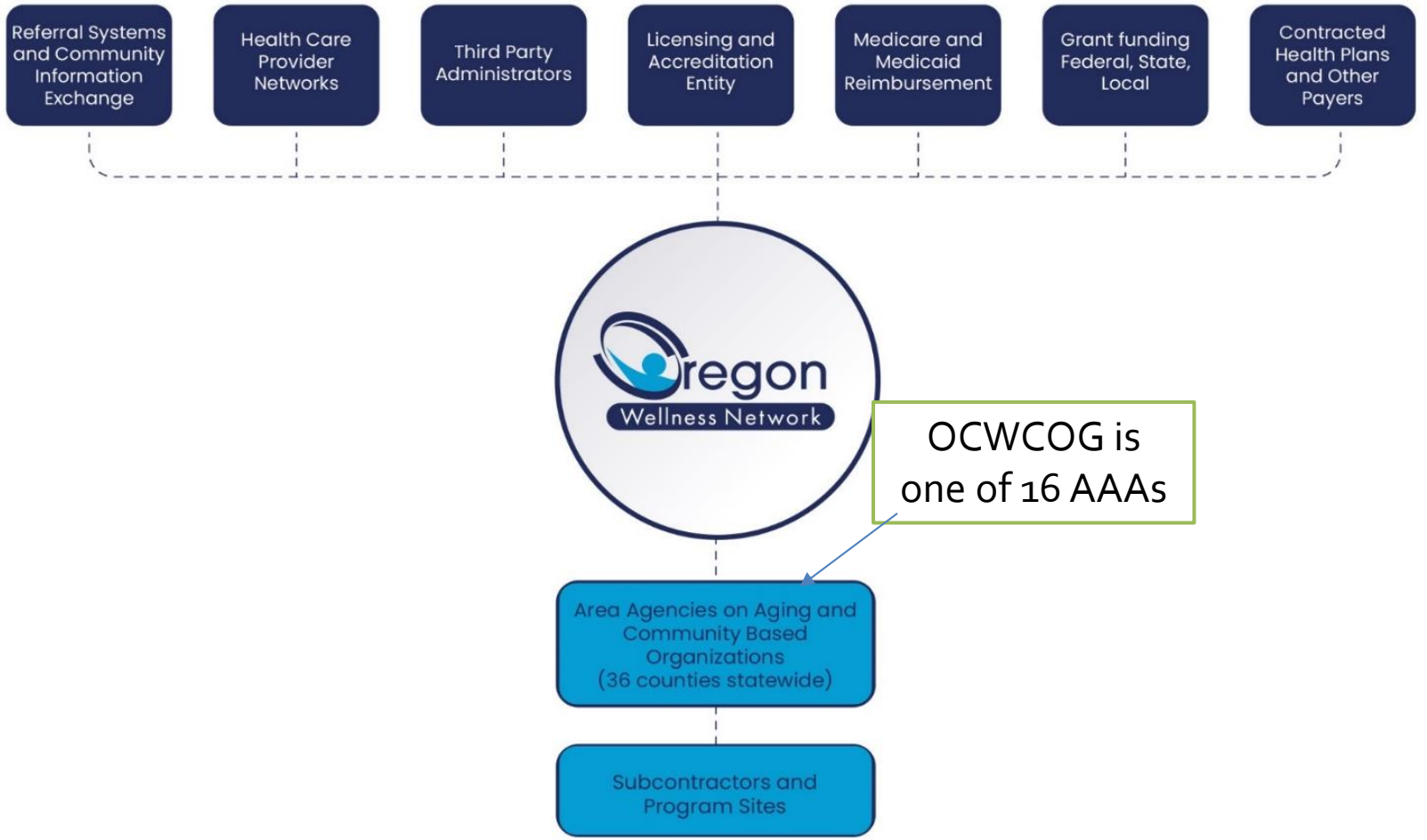
- Public or private nonprofit agency designated by a state to address the needs and concerns of all older persons at the regional and local levels.
- General Term, the actual name of the agency may vary, e.g. OCWCOG
- Assigned a geographic area (PSA); there are 16 in Oregon covering all 36 counties (see attached map)
- AAAs coordinate or offer services that help older adults remain in their homes, if that is their preference, aided by services such as home-delivered meals, homemaker assistance, and other services designed to make independent living a viable option, e.g. Options Counseling
- AAAs also provide evidence-based health promotion, wellness, and fall prevention programs; some of which Medicare & Medicaid pay for under their medical benefits.

Oregon Area Agencies on Aging Planning and Service Areas



1. **NWSDS** - *(Type B Transfer)* Northwest Senior & Disability Services
2. **MCADVS** - *(Type B Transfer)* Multnomah County Aging, Disability & Veterans Services
3. **CAT** - *(Type A)* Columbia Action Team
4. **OCWCOG** - *(Type B Transfer)* Oregon Cascades West Council of Governments
5. **LCOG** - *(Type B Transfer)* Lane Council of Governments
6. **DCSS** - *(Type B Contract)* Douglas County Senior Services
7. **SCBEC** - *(Type A)* South Coast Business Employment Corp.
8. **RVCOG** - *(Type B Contract)* Rogue Valley Council of Governments
9. **HCSCS** - *(Type A)* Harney County Senior & Community Services Center
10. **COACO** - *(Type A)* Council on Aging of Central Oregon
11. **KLCCOA** - *(Type A)* Klamath & Lake Counties Council on Aging
12. **CAPECO** - *(Type A)* Community Action Program of East Central Oregon
13. **CCNO** - *(Type A)* Community Connection of NE Oregon
14. **MCOACS** - *(Type A)* Malheur Council on Aging and Community Services
15. **CCSS** - *(Type A)* Clackamas County Social Services
16. **WCDAVS** - *(Type A)* Washington County Disability Aging & Veteran Services

Oregon Wellness Network: a *Community Care Hub*



OWN is a Community Care Hub that provides a number of administrative services for its provider partners; the 16 AAAs and Community-Based Organizations (CBOs)

These services include: centralized contracting and billing, centralized referral hub, statewide training, and umbrella licensing & accreditation

OWN's Mission & PURPOSE/ services our partners provide

- Build and sustain the capacity of our AAA and CBO partners to help adults and people with disabilities living with ongoing conditions to live and thrive in the homes and communities of their choice. This is done by providing evidence-based community services designed to empower consumers to better manage their chronic conditions.
- These services include but are not limited to:
  - National Diabetes Prevention Program (DPP) and Diabetes Self Management Services (DSMES)*
  - Health Related Social Needs (HRSN) and Social Determinants of Health (SDOH) Screening and Referral
  - Health Education and Lifestyle Management
  - Fall Prevention Programs (e.g. Tai Chi: Moving for Better Balance, Otago, Walk with Ease)
  - Behavioral Health Services (e.g. PEARLS, OPAL, Peer Mentoring)
  - Care Coordination e.g. Care Transition, Chronic Care Management
  - Nutrition Services and home delivered meals
  - Caregiver Support Services

Community Care Hub

Bridging the Gap & Making Social Care Happen

What is a Community Care Hub (CCH)?

A CCH is a community-centered entity that organizes and supports a network of CBOs providing services to address health-related social needs.

A CCH centralizes administrative functions and operational infrastructure, including, but not limited to, contracting with healthcare organizations, payment operations, management of referrals, service delivery fidelity and compliance, technology, information security, data collection, and reporting.

A CCH has trusted relationships with and understands the capacities of local community-based and healthcare organizations and fosters cross-sector collaborations that practice community governance with authentic local voices.

Community Integrated Network of Oregon

Three Things You Need to Know

Key Partners

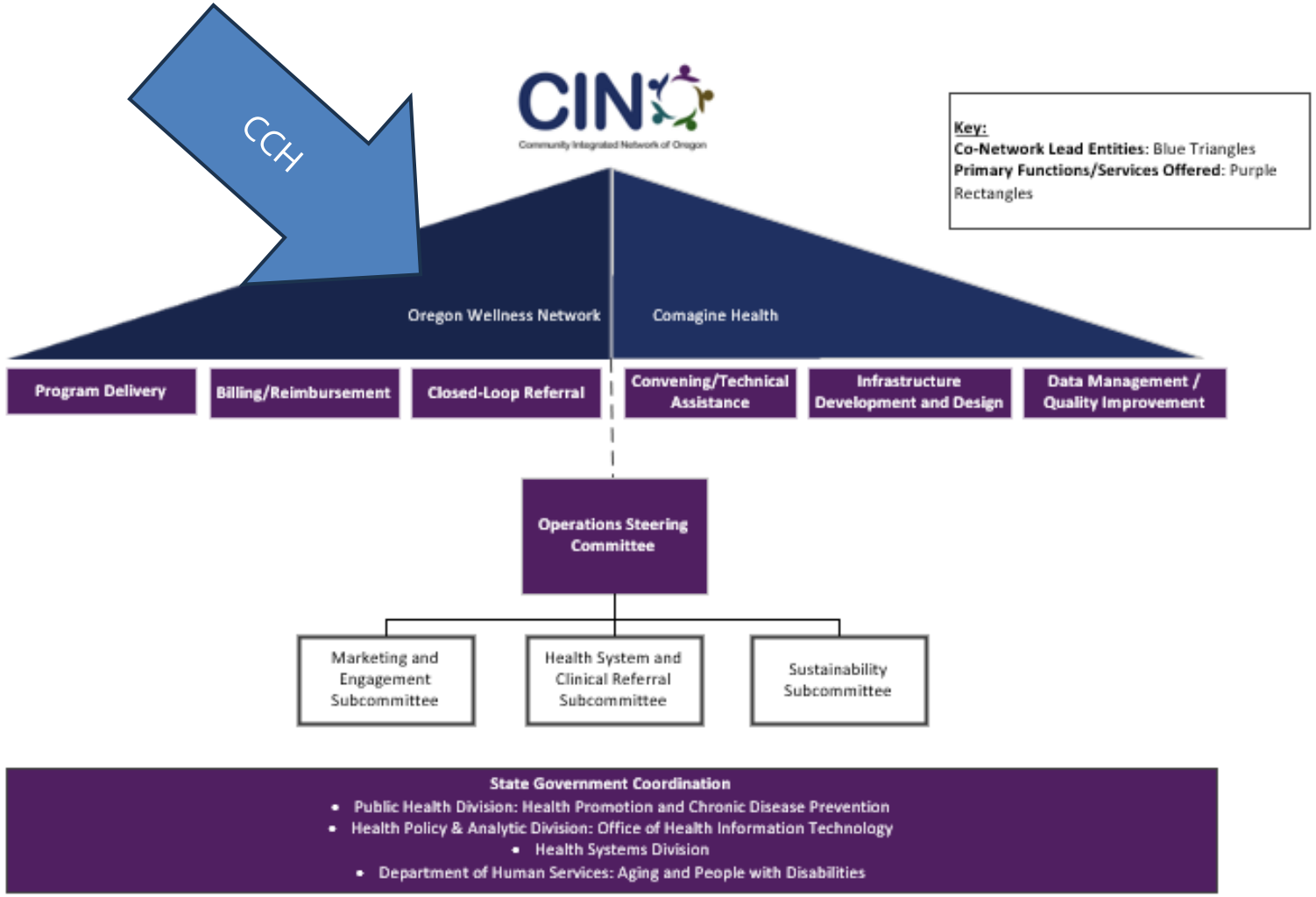
- Oregon Wellness Network
- CINO Network partners
- Oregon Health Authority

Primary Funding Streams

- ACL and CDC Grants
- State Funding
- Medicaid and Medicare Claims

Evidence-based programs

- National DPP
- Diabetes Self-Management Education
- Falls Prevention Programs



Research Done in the Past

- H.O.P.E. Senior Peer Mentor Program. In 2015, a study* was to done to evaluate the feasibility, acceptability, and potential efficacy of a low intensity, peer-supported, cognitive-behavioral intervention for mild to moderate depression and/or anxiety delivered by NWSDS.

*Seeley, J. R., Manitsas, T., & Gau, J. M. (2016). Feasibility study of a peer-facilitated low intensity cognitive-behavioral intervention for mild to moderate depression and anxiety in older adults. *Aging & Mental Health*, *21*(9), 968–974. https://doi.org/10.1080/13607863.2016.1186152

- Otago Home-Exercise Program (OEP). In 2016, a study* was conducted by University of North Carolina (UNC) in collaboration with NWSDS of a new delivery model for an established evidence-based fall prevention program using a COTA and personal trainers verses a Physical Therapist, a registered nurse, or a Physical Therapist Assistant (PTA). Program results were compared against national findings.

*Shubert TE, Goto LS, Smith ML, Jiang L, Rudman H, Ory MG. The Otago Exercise Program: Innovative Delivery Models to Maximize Sustained Outcomes for High Risk, Homebound Older Adults. Front Public Health. 2017 Mar 23;5:54. doi: 10.3389/fpubh.2017.00054. PMID: 28386536; PMCID: PMC5362608.

Current Research

- OWN/NWSDS & OHSU Nursing Research are planning to conduct a single-arm quasi-experimental trial among patients living in the community with high fall risk. Our goal is to apply effective behavior change approaches to promote the uptake of best practices, such as the Otago home exercise program. These interventions include fall prevention education, Motivational Interviewing sessions with health coach delivering the Otago program, and the delivery of the Otago exercise program. This program is going through IRB at this time. We hope to get approval and start by the end of November.

Future Research Opportunities

- Evaluative Research that looks at Evidence-Informed programs (not Evidence-Based) and determines if they have similar efficacy as their evidence-based counterparts, e.g. OPAL (based on PEARLS)
- Long-standing information and navigation services that AAAs have provided for years called Options Counseling. Counselors offer information about services to meet needs now and into the future. For older adults, adults with disabilities, families, friends and caregivers. Offered as a free service but in recent months, codes have become available to bill Medicare for this service (e.g. CHI and PIN). There is a need to determine just how effective these services are.
- SDOH screening is now required by many federal regulators (e.g. JCAHO). AAAs have been doing this since inception, we need a way to show that our outcomes are the same if not better than SDOH screen done in a clinic or hospital setting

Questions?

Contact Information

Lavinia Goto

Lavinia.goto@nwsds.org

503-602-8384

Randi Moore

RMoore@ocwcog.org

541-924-8438