

Joint Legislative Executive Committee on Aging Disability

Summary of Suggested "Recommendations" from Panelists

GAP			Legislation		Budget Item	
Group	Recommendation to the JLEC on Aging/Disability	Needed	Optional	Needed	Optional	
1	Client Safety	DSHS...6 Adult Protective Services (APS) FTE...high-level expertise in financial exploitation		X	X	
2	Client Safety	DSHS...3 APS FTE...facilitation of protective orders or guardianships		X	X	
3	Client Safety	DSHS...Residential Care Services (RCS) investments...quality assurance program		X	X	
4	Client Safety	DSHS...amend definition of vulnerable adults	X			X
5	Client Safety	DSHS...Supported living...legislation granting authority to impose immediate sanctions	X			X
6	Client Safety	DSHS...Supported living...legislation calling for a quality assurance assessment	X			X
7	Client Safety	Stakeholder...review role of guardians in WA (both formal and informal)		X		X
8	Client Safety	Utilizing "Health Professions Account" for client safety initiatives		X	X	
9	Client Safety	King Co. Prosecutor...modifying the definition of abuse/neglect...change the reckless standard	X			X
10	Client Safety	LeadingAge...better use of navigators...nurse navigators, community health navigators...isolate where things fall apart		X		X
11	Financial Security	DRS...increase the availability of deferred comp program, as well as the utilization of deferred comp		X		X
12	Financial Security	Stakeholder...continue supporting a defined benefit pension to attract and retain employees...and allow for secure retirement		X		X
13	Financial Security	Stakeholder...encourage private retirement accounts...through START, or another program		X		X
14	Financial Security	Genworth...prioritize consumer education programs...such as "Own Your Own Future"		X		X
15	Training	WSRCC...better clarity about training expectations and training requirements		X		X
16	Training	LeadingAge...encouraging and developing an apprentice model for LTC workers		X		X
17	Training	LeadingAge...continuing to develop specialty training...dementia, CCM, specific skills		X		X
18	Training	LeadingAge...training budget...how is money being spent...could it be spent more effectively		X	X	
19	Training	WHCA...facilities provide joint training sessions...NH provides to AP staff, etc.		X		X
20	Training	DSHS...training for family caregivers...including "unpaid" caregivers		X		X
21	Training	WTECB...pipeline of nurses...program availability in higher education		X	X	
22	training	Multiple...modification of LTC training requirements...limited supervision, nurse delegation	X			X
23	Training	WHCA...licensure = automatic qualification as trainer (orientation & safety)	X			X
24	Insurance	RTI...review public insurance programs (other countries and Hawaii)...consider a public insurance program in WA	X		X	
25	Training	DSHS/HCA...expand consumer education and advertising of LTC Partnership in WA		X		X
26	Insurance	OIC...consider premium caps for private LTC insurance	X			X
27	Insurance	Genworth...favorable tax treatment of distributions to fund private LTC insurance	X			X
28	Insurance	Genworth...consider a public/private option for LTC insurance...both private company and government share risk	X			X
29	Insurance	Genworth...tax incentives that encourage purchasing of private LTC insurance	X			X
30	System Change	Multiple...identify "variables" that could be changed to create a different LTC system in the future		X		X
31	System Change	DSHS...implementation of the state Alzheimer's plan	X		X	
32	System Change	LeadingAge...modifying the scope of care...encouraging and implementing a geriatric model of care		X		X

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33	System Change	LeadingAge...training staff to understand connection between charting and reimbursement and care planning		X		X
34	System Change	AAA...targeted support = rural areas...assistance to build sustainable programs and full programs		X	X	
35	System Change	DOH...integrated mental health and chemical dependency screening and interventions		X		X
36	System Change	CCS...better link between home care and primary care		X		X
37	System Change	LeadingAge...continued effort for healthcare payment reform		X		X
38	System Change	DSHS/HCA...consider offering LTC Partnership as an optional program for state employees	X			X
39	System Change	Clark County...various initiatives...such as "Shared Housing", "Universal Green Design", "Timebanking", "Weatherization", "Land Use & Zoning", "Volunteer Sidewalk", and "Accessible Transportation Coalition", "Telehealth", "Speakers Bureau"	X		X	
40	Wellness	DOH...expanded support = wellness and prevention...such as the "Complete Streets" concept		X	X	
41	Wellness	CCS...focus on wellness...not just disease management		X		X
42	Housing	WSRCC...address barriers to new provider openings...AFH or other		X		X
43	Housing	Stakeholder...explore alternate ways of aging-in-place...using existing community providers within independent housing		X		X
44	Housing	WHCA...more clarity about survey requirements		X		X
45	Caregiver Support	DSHS and stakeholders...Family Caregiver Support Program...further expansion		X	X	
46	IT	LeadingAge...IT investment...motion sensor, exercise review		X		X
47	Existing Models	AAA...continued support = Health Homes, Care Transitions, Chronic Disease Self Management, Chronic Pain Self Management		X		X
48	Existing Models	CCS...PEARLS model in King Co...better utilize existing models		X		X
49	Info/Assistance	AAA...expanded effort = Information & Assistance...Options Counseling...lower staff ratios in AAAs and HCS Field		X	X	
50	Vendor Rates	Multiple...vendor rate increases for providers (AFH, Assisted Living, Nursing Home)		X	X	
51	Population	Stakeholder...establish clear picture of older adults in WA (both current and projected)		X		X
52	Continue JLEC	Multiple...continue JLEC...either as a standing committee, or just for another year (or two)		X		X