

AGENDA
ADVISORY COMMITTEE ON AGING
FRIDAY, AUGUST 21, 2020
11:00 p.m. – 1:00 p.m.
Via Webinar

- 1 11:00 Call to Order and Introductions
- 2 11:05 Public Comment
Up to 45 minutes is allocated now for public comment and each speaker will be limited to 3 minutes. If there are additional requests from the public to address the Committee, time will be allocated at the end of the meeting to complete public comment.
- 3 11:20 Report of the Chair
- 4 11:30 Report of the AAA Director

CONSENT AGENDA

- 5 11:45 Move to Approve Consent Agenda
 - Minutes of June 12, 2020
(Attachment A)

INFORMATIONAL BRIEFINGS

- 6 12:00 Briefing on Ombudsman Program
(Attachment B)
- 7 12:20 Briefing on the Funding Work Group
(Attachment C and D)
- 8 12:35 Update on Census
(Attachment E)
- 9 12:45 County Reports

Persons in need of auxiliary aids or services, such as interpretation services or assisted listening devices, are asked to contact DRCOG at least 48 hours in advance of the meeting by calling (303) 480-6701.



ADMINISTRATIVE ITEMS

10 **Next Meeting – September 18, 2020**

11 Other Matters by Members

12 1:00 Adjourn



AAA Acronym Quick List

ACL/AOA Administration for Community Living/Administration on Aging
ACO Accountable Care Organization
ADA Americans with Disabilities Act
ADL Activities of Daily Living
ADRC Aging and Disability Resource Center
AHC Accountable Health Communities
CAC Citizens Advisory Committee
CASOA Community Assessment Survey for Older Adults
CCT Colorado Choice Transitions
CMS Centers for Medicare and Medicaid Services
COA Council on Aging
DCOA Denver Commission on Aging
DORA Department of Regulatory Agencies
DOLA Department of Local Affairs
DRMAC Denver Regional Mobility and Access Council
ETS Extended Transitions Services
F&B Finance and Budget Committee
GIS Geographic Information System
HB House Bill
HCPF Health Care Policy and Financing
HIPAA Health Insurance Portability and Accountability Act
I & A Information and Assistance
JBC Joint Budget Committee
LTC Long Term Care
MIPPA Medicare Improvement for Patient and Providers Act
MOU Memorandum of Understanding
NASUAD National Association of States United for Aging and Disabilities
OAA Older Americans Act
PACE Program of All-Inclusive Care for the Elderly
PHI Personal Health Information
RFP Request for Proposal
RFQ Request for Qualifications
ROD Record of Decision
RTC Regional Transitions Committee (Aging)
RTC Regional Transportation Committee*(Transportation)
SAPGA Strategic Action Planning Group on Aging
SHIP State Health Insurance Assistance Program
SMP Senior Medicare Patrol
SRC Seniors' Resource Center
SUA State Unit on Aging
VDC Veterans Directed Care
VOA Volunteers of America

ATTACH A

**ADVISORY COMMITTEE ON AGING
MEETING SUMMARY
Friday, June 12, 2020**

Members Present

Ada Anderson	Douglas County
Barbara Boyer	At Large Arapahoe County
Bob Bocker	At Large Denver
Bob Davis	City and County of Broomfield
Cary Johnson	Jefferson County
Cathy Noon	At Large Arapahoe County
Connie Ward	At Large Jefferson County
Dawn Perez	Adams County
Donna Mullins	Jefferson County
Houston "Tex" Elam	At Large Arapahoe County
Karie Erickson	Douglas County
Larry Strock	DRCOG Board
Phil Cernanec	At Large Arapahoe County
Sean Wood	Clear Creek

Guests Present

Frank Bruno, Via Mobility Service, Bill Patterson, Via Mobility Service, Chris Lynn, Seniors' Resource Center, Dan Dias, Audio Information Network, Paulette St. James, Colorado Commission on Aging, Kristine Burrows, Director of Older Adult Services at Easterseals, Valerie Robson, Douglas County

Others Present

Adriana Francis, Intake Case Manager, AJ Diamontopoulos, AHC Program Manager, Amy Pulley ADRC Program Manager, Cindy Grainger, Administrative Assistant, Douglas Rex, Executive Director, Heather Kamper, Veterans and Transitions Program Manager, Jayla Sanchez-Warren, AAA Division Director, Lisa Houde, Public Engagement Specialist, Liv Bergman, Community Resource Specialist, Matthew Helfant, Senior Transportation Planner, Mindy Patton, AAA Division Assistant, Rich Mauro, Senior Policy and Legislative Analyst, Ron Papsdorf, Transportation Director, Shannon Gimbel, Ombudsman Program Manager, Sharon Day, Program Manager, AAA Business Operations, Travis Noon, Senior Program Specialist, Zack Gibbons, Senior Fiscal Specialist

Phil Cernanec, Committee Chair – Called the meeting to order at 1:02 p.m. with a quorum present.

Public Comment Period (Non-ACA Members)

There was no Public Comment

Report of the Chair

- Phil mentioned Adrian Miller author and chef wrote a column suggesting conversations we should have regarding race and turmoil.
- Phil is taking seniors on rickshaw rides as part of his group Seniors Without Age he spoke of the joy and freedom seniors had to be able to take ride
- Phil heard from Integrated Services mentioned their services have gone up 16-fold they have become a federal distribution center for food and meals.

- Nourish Meals on Wheels service has increased 4 to 5 times in this time of COVID

Report of the AAA Director

- AHC - Program still going strong with hospital navigation and work groups.
- ADRC- Has been having a lot of calls for, food delivery, housing and people moving out of the state, others moving in to have their elders closer.
- Veterans – The staff went out and did drive by social distancing visits to connect and see how clients were doing.
- SHIP - Busy with people trying to get insurance and services, there is a lot of fraud happening.
- Ombudsman
 - Shannon Gimbel said there were 115 facilities with COVID, most have been resolved
 - Hard to advocate when they can't see people and communicate especially with those who have dementia
 - The work group and CDPHE sent a letter to the Governor asking to ease up on the restrictions in facilities and recommendations for ombudsman to be able to go into facilities, although it is not the Governor's decision for this to happen, ultimately it will be the State Ombudsman.
 - Isolation is not good for their health both mentally and physically.
Phil asked if there was a specific timeframe for going back into the facilities. Shannon said there was not a timeframe but more of looking at what going back will look like and types of PPE needed. There is a worry of transmission from facility to facility.
- Contractors are providing more services they will be going to twice a month for provider calls.
- People are missing the socialization trying to see if there can be congregate meal sites that are held outside
- Another provider is looking at outside Bingo

Karie Erickson mentioned the creative ideas such as delivery of kindness and smile kits.

- Jayla has been on several state and federal calls to discuss PPE, virtual calls on isolation prevent.

Karie asked about virtual wellness and if anyone has started doing this within the area?

- Jayla mentioned that the Weekly Activity Report updates will be going from every week to every 2 weeks since there is a slowdown in activity.

Move to approve consent agenda

Phil asked for approval of the consent agenda. There was a motion from Barbara Boyer and second from Tex Elam consent agenda passed unanimously.

Items on the consent agenda included: Summary of the May 15, 2020 meeting

Action Items

Discussion of funding for Via Mobility Service

- Travis Noon reminded the group of SRCs departure from transportation beginning July 1st and provided background on the meetings and participants that assisted in the transitioning of services to Via.
- DRCOG is asking approval to recommend a contract with Via for 6 months beginning July 1, 2020 through December 31st, 2020. Contract amount is 1.2 M. DRCOG will be assisting with the transition through the 6 months.
- The transition costs will include normal operating costs, a 350K one-time transition cost for keeping key SRC staff onboard, rewrapping of vehicles and software. This will keep the service location at SRC, using same staff and vehicles for the next 6 months until Via works on physical transition.
- Frank Bruno introduced Via to the members with a slide presentation.
 - Via has been in business for 41 years.
 - Frank was on the board for 7 years before going to work for Via. And has been CEO for 4 years.
 - Via provides door through door service.
 - Because they are a nonprofit organization profits from their earned income transportation are used to subsidize their para transportation program.
 - They will be looking at software that will optimize their trips to be more efficient and cost saving.

Phil asked Frank to explain the reduction and optimization of the current rides he mentioned and how this will affect the expansion. Frank clarified that the reduction of trips and optimization would be in Boulder County as their interest is in optimization to reduce costs. He explained that Via's Board of Directors is committed to finding revenue streams to address more para transit and are interested in the continued growth of Via.

Cathy Noon worked with them on their Centennial transit project when she was mayor and said she could attest that they were very committed and could think out of the box and were flexible to change.

Dan Dias asked if there was an app for a smartphone. Frank said they are working on one.

Ron Papsdorf thanked Chris Lynn and SRC staff, along with Frank and Bill Patterson and Via staff on their approach and assistance working with DRCOG to make the transition go as smoothly as possible. He commented that there was still a lot of work ahead for long-term service. He also thanked Travis Noon and Matthew Helfant for their work to get all the details worked out and their work with all partners including RTD and CDOT.

A motion to fund Via Mobility Services was made by Cathy Noon and 2nd by Tex Elam.

Motion passed with quorum.

Discussion of proposed contractors for AAA voucher service

- Sharon Day gave an overview of the transportation program providers.
 - HopSkipDrive is still providing rides through COVID and DRCOG would like to continue contracting with them.
 - Currently there are contracts pending with Lyft and Uber as another alternative to HopSkipDrive, Travis is working on contract details.
- Home maker services
 - Colorado Visiting Nurse Association (CVNA) is getting out of paraprofessional care program they have approximately 280 clients.
 - Recently contracted with FirstLight for home services and would like to continue contracting with them for the next year.
 - Alpine Homecare serves a large Medicaid population and has agreed to take on CVNAs clients.
 - A recommendation for approval to add both FirstLight Denver and Boulder along with Alpine Homecare to the voucher program is being requested.
- DRCOG is setting aside the Cares Act funds for the increased voucher program 450K for transportation and 400K for in home care.

A motion to approve adding FirstLight Denver and Boulder along with Alpine Homecare to the voucher program was made by Bob Davis and 2nd by Barbra Boyer.

The motion passed with quorum.

Election of ACA Officers

- Jayla asked for nominations for a new Chair, the Chair and Vice Chair are elected annually serving a term beginning July 1, 2020 through June 30, 2021 and are allowed to serve for 2 terms if affirmed by the committee.
 - Tex Elam nominated Cathy Noon and was endorsed by Bob Davis.
 - There were no other Chair nominations.

Barbara Boyer motioned to approve Cathy Noon as the next ACA Chair, Phil Cernanec 2nd the motion

Cathy was unanimously approved as the next ACA Chair

- Jayla asked for nominations for Vice Chair.
 - Cathy Noon nominated Karie Erickson, Phil Cernanec 2nd the nomination.
 - There were no other Chair nominations.

Tex Elam motioned to approve Karie Erickson as the next ACA Vice Chair and was 2nd by Barbara Boyer.

- Karie Erickson was unanimously approved as the next ACA Vice Chair.

Informational Briefings

Update on Legislative Budget Approvals

- Long Bill
 - The COVID-19 virus shutdown of the state and the economy in mid-March resulted in a \$3.3 BILLION reduction in available revenue compared to the budget the governor submitted in November 2019.
 - The Joint Budget Committee (JBC) met during the month of May and went through multiple stages of budget balancing
 - State Funding for Senior Services, which funds the Area Agencies on Aging (including DRCOG), was not cut, but the JBC did approve the transfer of \$18 million from the balance in the Older Coloradans Cash Fund into the general fund.
 - JBC did acknowledged the need to identify long term, stable, sustainable funding for the AAAs.
 - There is an opportunity to have future discussions regarding stable funding and grow with the need for AAAs.

Jayla acknowledged the work that Rich has put into organizing the AAAs and lobbying at the capital to preserve as much funding as they could.

There was discussion about making legislators aware of AAA services and how quickly they can readjust services to accommodate the needs such as with the COVID pandemic.
 - JBC was able to balance the budget without doing away with suspending the Senior Property Tax exemption.
- Legislation supported by DRCOG in regard to affordable housing in the area of renters:
 - HB 20-1009 (requiring a court to suppress court eviction records if the eviction is not granted.
 - HB 20-1196 - amendments to the Mobile Home Park Act.
 - HB 20-1201 - providing an opportunity for mobile homeowners to purchase a mobile home park passed.
 - HB 20-1141 - restrictions on fees landlords can charge was postponed indefinitely.
 - SB 20-200 - providing for the creation of a state-facilitated automatic enrollment individual retirement account program for workplaces that do not offer a retirement plan passed both chambers and is expected to be signed by the Governor.

County Reports

Jefferson County – Donna Mullins

- Jefferson County had their second Zoom meeting with 25 people in attendance. Connie Ward commented on how well the meeting went and that they are making headway.
- They are going to continue with their annual Senior Heroes Event doing it virtually Sept 9.

- Discussed transportation during their meeting and are hoping Frank from Via will visit them in the future.
- The AARP Life Long community initiative effort is continuing to make progress.

Arapahoe County – Barbara Boyer

- The Arapahoe County meeting went well as a virtual meeting, there seemed to be more attending then when the meeting is in person.
- They will be doing an education program for their county committee in regard to conducting virtual meetings and the use of equipment.
- The next meeting would be in Byers but will now be held virtually, the hope is that more of the Byers people will be able to attend the virtual meeting.
- Because they are not physically meeting, they are sending checks to the food bank in Byers and collecting food cards for King Soopers.

Douglas County – Valerie Robison

- Douglas County had a very successful virtual town hall meeting with about 4,000 in attendance. They will be doing another one with an expanded length of time.

Phil asked what some of the concerns were during the town hall. Valerie said they asked about what precautions Douglas County had in place for a reopening timeframe, Dr. Douglas from Tri-County answered questions, Karie Erickson provided resources and support. The next town hall will also include someone from family services.

- Their providers continue to work with grocery deliveries, food banks. They have developed a First Friday program which gives updates the first Friday of the month.
- Talking about rolling out virtual access meetings.
- Planning a parking lot Bingo and outdoor movies.

Clear Creek – Sean Wood

- Clear Creek has limited senior housing with no nursing homes and has helped them avoid any major out breaks (16 cases).
- The SRC suspension of their transportation program has affected the community. Sean would like to meet up to discuss creative alternatives like what Centennial has done previously. Their SRC transportation ran between Georgetown and Idaho Springs.

Next meeting – **July 17, 2020 (cancelled)**

Other matters by members

There were no other matters by members

Adjournment

The meeting adjourned at 1:03 p.m.

ATTACH B

To: Chair and Members of the Advisory Committee on Aging

From: Shannon Gimbel, Ombudsman Manager 303-480-5621,
sgimbel@drcog.org.

Meeting Date	Agenda Category	Agenda Item #
August 21, 2020	Informational Briefing	6

SUBJECT

COVID-19 impacts to DRCOG's Ombudsman program

PROPOSED ACTION/RECOMMENDATIONS
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N/A

ACTION BY OTHERS

N/A

SUMMARY

DRCOG Long Term Care/PACE (Program of All-inclusive Care for the Elderly) Ombudsman Programs have been working to advocate on behalf of nursing home and assisting living facility residents, participants, and families for over 40 years.

DRCOG's Ombudsman programs have received numerous calls since COVID-19 as facilities and PACE centers have been put on strict lock-down leaving residents, participants, and families with many concerns about care and quality of life. Staff will provide information on the trends and patterns the Ombudsman program is seeing, as well as what work is being done with the State Ombudsman's office and Colorado Department of Public Health and Environment/Health Care Policy and Finance.

PREVIOUS DISCUSSIONS/ACTIONS

N/A

PROPOSED MOTION

N/A

ATTACHMENT

N/A

ADDITIONAL INFORMATION

If you need additional information, please contact Jayla Sanchez-Warren, AAA Director, at jswarren@drcog.org or (303) 480-6735; Shannon Gimbel, Ombudsman Manager, at 303-480-5621 or sgimbel@drcog.org.

ATTACH C

To: Chair and Members of the Advisory Committee on Aging

From: Rich Mauro, 303-480-6778 or rmauro@drcog.org

Meeting Date	Agenda Category	Agenda Item #
August 21, 2020	Informational Briefing	7

SUBJECT

AAA Long Term Funding Work Group

PROPOSED ACTION/RECOMMENDATIONS

N/A

ACTION BY OTHERS

N/A

SUMMARY

Obtaining long term, stable, sustainable funding for Older Americans Act/Older Coloradans Act services provided by Colorado's AAAs has long been a goal of the Aging Network. The economic downturn brought on by the COVID-19 pandemic and the resulting budget challenges have focused the attention of state policymakers on this issue more than at any other time. During Long Bill discussions, JBC members and staff expressed concern with capacity building for Area Agencies on Aging and offered to engage in a forward-looking analysis of the effects of changing demographics and how funding can be tied to the expected increases in demand. DRCOG took the initiative to create the work group to offer long term funding recommendations to the JBC and the governor. Rich Mauro is facilitating the meetings; Jayla Sanchez Warren, Cathy Noon, Ada Anderson, Dawn Perez, and Karie Erickson serve on the work group.

PREVIOUS DISCUSSIONS/ACTIONS

The work group held its first meeting July 29.

PROPOSED MOTION

N/A

ATTACHMENT

AAA Long Term Funding Work Group Description
Minutes of July 29 meeting

ADDITIONAL INFORMATION

ATTACH D

MEETING SUMMARY
Working Group on Older Adult Program Funding
July 29, 2019

Overview of State Funding for Senior Services

Rich Mauro gave an overview of the history of state funding for Colorado's AAA programs beginning in 1999 and leading up to the present. This included descriptions of appropriations to the "State Funding for Senior Services" (SFSS) line item in the budget and the creation and funding levels for the Older Coloradans Cash Fund (OCCF). There also was discussion of the statute that resulted in nearly \$31 million in unspent Senior Property Tax Funds being transferred to the OCCF over the last two years. It was noted that only \$6 million of this money has been allocated to the AAAs, as intended by the statute. \$18 million was used to help balance the budget this year. Leaving just a \$7 million balance in the fund.

During the ensuing discussion, Ed Bowditch, DRCOG Lobbyist pointed out the \$7 million is one-time funding meaning SFSS faces a \$6 million funding cliff next year. Adding to the unreliability of current funding, there will not be any spillover revenue in the future, as the spillover statute was repealed last session. Janice Blanchard, the Governor's Senior Policy Adviser on Aging, asked for a timeline of state funding for Colorado's AAA programs.

Statement of the Problem: Need for Long Term, Stable, Sustainable Funding

Rich Mauro reviewed the handout "Colorado Aging Demographics, Funding and Program Costs". Demographic trends of a rapidly aging state (we currently have fourth fastest aging population of 65+) indicate growing demand for AAA services for older adults. While the Older Americans Act services assist American who are 60 or older, Jayla Sanchez Warren, DRCOG AAA Director pointed out we see the most demand for AAA services in the 75 and above cohort, which is the fastest growing cohort of older adults in Colorado.

It was pointed out that while most people will need some services or support as they age, the larger older adult population also contributes to the state's economy – as they comprise a growing (though still relatively small) share of the labor force and increasingly provide significant unpaid work as well. And the jobs associated with those services or supports are growing.

Along with the aging of the population, we are seeing persistent unmet need. One indicator of unmet need is the department estimate that \$4.8 million dollars would be needed to eliminate the current AAA waitlists. It was noted some people are on a waiting list for several months up to two years. Another indicator is that during its last funding cycle, DRCOG received requests totaling \$3.5 million more than the available

funding. Finally, given the growth in the older population and inflation, funding for the AAAs will have to increase annually just to maintain existing levels of service.

It was also pointed out that in comparison with Medicaid long term care programs, the AAAs serve significantly more individuals than all those programs combined at a significantly lower per capita cost.

Voices of AAAs on Serving Their Community

Jayla Sanchez Warren & Christine Vogel, Boulder AAA Director and Vice-President C4A, discussed how the AAAs are helping more people than ever due to the ongoing COVID-19 pandemic. There is now a heightened and increased awareness for AAA services all across the state. More people are needing help and become aware of the AAA for the first time. Many of these individuals did not even know about our AAA services before the pandemic. The biggest demand has been in our nutritional services and essential services. The people calling in are resistant to the idea of living in nursing homes and want to remain in their homes for as long as possible. It was a big challenge but the AAAs learned to transition their service delivery models quickly in response to the pandemic, including stay at home and distancing orders.

Discussion

The working group spent some time offering perspectives on these short term and long-term funding issues. Suggestions included evaluating the consequences of AAAs not being able to keep up with the demand for services; taking into account how the nature of aging is changing with the Baby Boomers and subsequent generations; recognizing that AAAs also often support people who are on Medicaid too and have the ability to adapt to the needs in their region; focusing on health-related social needs as an area where AAAs can be especially helpful; and making it clear that Older Coloradans are still assets to their communities and it is an important goal to enable them to contribute to society as long as possible.

Discussion of funding options for further investigation was laid over to the next meeting.

Task Force Work Plan, Future Meeting Dates and Agendas

There was a brief discussion of issues to consider in upcoming meetings. Suggestions included focusing on the coming funding cliff and the cost to the state if we don't address this situation. The group also considered how often it should meet and when to issue its recommendations. It was generally agreed the group should try to meet about every three weeks and finish its work by the end of October to have something in time for the beginning of the budget process. The group also decided to have the next meeting decided by Doodle poll.

ATTACHE

To: Chair and Members of the Advisory Committee on Aging

From: Kelly Blair Roberts, 303-480-6787 kroberts@drco.org and Lisa Houde, 303-480-5658, lhode@drco.org

Meeting Date	Agenda Category	Agenda Item #
August 21, 2020	Informational Briefing	8

SUBJECT

2020 Census update

PROPOSED ACTION/RECOMMENDATIONS
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N/A

ACTION BY OTHERS

N/A

SUMMARY

DRCOG received a grant from the Colorado Department of Local Affairs to conduct outreach and promote the census to older adults in the region. Main activities included the creation of an outreach toolkit for use by organizations throughout the region, convening a regional workgroup, a significant amount of print, radio, and digital advertising, and direct census outreach through our Area Agency on Aging staff. The grant period ended on June 30 and the attached final report details the work that DRCOG did over the last several months to ensure an accurate count of older adults in our region.

The census count has faced numerous challenges throughout its implementation due to the COVID-19 pandemic. Staff will share information about the revised census timeline and the current response rates in the region.

PREVIOUS DISCUSSIONS/ACTIONS

N/A

PROPOSED MOTION

N/A

ATTACHMENT

2020 Census Outreach Grant Final Report

ADDITIONAL INFORMATION

N/A

2020 Census Outreach Grant Final Report

Denver Regional Council of Governments

Census Outreach Details - Final Report Form

1: Detail the hard-to-count population(s) your organization focused its 2020 census outreach on using grant money.

Our organization focused our census outreach on the older adult population of the Denver metro area. This included the region's over 480,000 people 60 years or older in the DRCOG Area Agency on Aging: Adams, Arapahoe, Broomfield, Clear Creek, Denver, Douglas, Gilpin, and Jefferson counties. The area includes 47 percent of the state's older adult population, encompasses over 4,000 square miles, and is a unique blend of urban, suburban and rural communities that many nationalities and ethnic groups call home. In addition to older populations being considered hard-to-count in Colorado, many of our region's older adults are also part of other historically under-counted groups, including minorities, limited English proficiency, Spanish speaking, low income, and/or rural residents.

While our outreach focused generally on the older adult population, we also targeted census materials to older adults who also are a part of other hard-to-count populations. For example, the toolkit detailed in the project summary included materials specifically designed for Latinx, veterans, rural, Native Americans, and older adults with visual challenges. In addition, our Area Agency on Aging providers provide an array of services to different subsets of the older adult population in the region and helped widen our reach throughout the metro area.

As the results for response rates became available, we also began targeting our census advertising to specific areas of the region with high populations of older adults and lower response rates. We used our census outreach map (described below in the project summary) to identify these areas, and then were able to target our digital advertising in the last month of the grant to these areas.

2: The number of people hired with grant money and the geographic locations served by those people

None; no people were specially hired with grant funds to perform census outreach and promotion. Grant activities were completed by existing staff members of DRCOG and its contracted service providers.

3: The amount of grant money used for payroll expenses and the average wage paid per person through the grant program.

Approximately \$118,000 (\$74K DRCOG staff, \$44K contractor staff) of the \$270,000 grant was used for payroll expense. As mentioned previously, no people were hired with grant money, as only existing staff of DRCOG and contractors were utilized to complete grant activities. Staff were therefore paid at their normal rates associated with their positions. The majority conducting census outreach were staff of DRCOG's Area Agency on Aging

division. These included community resource specialists, options counselors, Medicare benefits counselors, case managers, and long-term care ombudsman. Similarly, DRCOG contractors, who are service providers for older adults in the region, utilized their existing staff as well, many of whom are direct care workers. Though a portion of the contractors received small sub-grants, many others were non-compensated for their census outreach activities. Most of the remaining payroll costs paid for under the grant were for DRCOG staff involved in the census communications and marketing strategy. These included staff in DRCOG's communication and marketing and regional planning divisions. A variety of positions were included such as communications manager, public engagement specialist, web and social media specialist, graphic designer, GIS analyst (for census mapping), etc.

Over the seven-month grant, the average amount paid per employee was approximately \$700/month. The highest total amount any individual was paid during the grant term was approximately \$6100, which was well below the maximum allowable limit under the grant. As mentioned in the budget notes, the project budget did not attempt to quantify leveraged outreach activities as they rely on a vast network of both internal staff and external partners funded through myriad sources. Staff timesheet allocations under the grant were conservatively budgeted. Also, many contractors did not receive compensation from the grant for their census outreach efforts.

4: If sub-awards were made, include the amount of grant money used for administrative costs in making those additional grants.

Nine sub-awards were made of approximately \$63,000 total. The amount of grant money used for administrative costs was approximately \$3,400, or 1% of funds expended, and reflected staff costs from DRCOG's administrative and finance division for grants and contracts management. As mentioned in the budget notes, administrative costs that were budgeted also included costs for project management of the communications/marketing strategy. These costs were approximately \$9553, for total administrative costs of \$12,953, or 5% of funds expended.

5: Lessons learned from 2020 census outreach.

Many of the lessons we learned from our 2020 census outreach relate to the challenges of completing outreach during the COVID-19 pandemic, as well as more general lessons.

Virtual meetings

We had to transition the final two of our regional workgroup meetings from in-person to virtual and noticed that we had significantly lower attendance at the virtual meetings. It was also difficult to focus on the outreach plans of the various organizations involved in the workgroup as everyone was constantly shifting and adapting due to the changing census operations schedules throughout the grant period. Through this, we learned some new skills for running virtual meetings to increase participation, such as using online polling tools to maintain attendee interest.

Adapting our strategy

Much of our planned outreach strategy, especially with our Area Agency on Aging providers, had originally leaned heavily on in-person assistance. This proved to be a significant challenge in the pandemic, and particularly because we were focused on working with older adults who are particularly at risk of COVID-19. Although a pandemic is of course completely unprecedented, the lesson we learned from this is that it is important to have an outreach plan that includes a broad, multi-faceted range of outreach strategies. It is also important to be flexible and adaptable to changes.

Our organization ended up doing a lot of outreach over the phone which was not originally planned for, but we adapted quickly. The interruption in providing face to face services led to an activity dubbed “reassurance calls.” These calls by staff and contractors to check in with clients provided opportunities to talk about the census. In addition, having electronic versions of our outreach materials enabled our staff and contractors to share those documents with clients when the coronavirus put a halt to face to face interactions.

Another adaptation we made due to COVID-19 was the creation of an interactive map that allowed us to identify areas of overlap where response rates were low and there was a high percentage of older adult residents. This proved very successful and useful for both our organization and our partners. Our lesson learned through this was that the interactive map could have been created sooner in the grant period so we could have used it earlier on to target specific geographic areas of outreach.

We also discovered a unique opportunity to make the case for the value of the census with specific services related to the pandemic. In June, we produced a flyer with the message that people were receiving food deliveries and hot meals because of state funding allocated to Colorado through the census.

Census Bureau partnerships

We also learned how important the partnership with the US Census Bureau was in making our outreach as helpful and efficient as possible. Numerous times throughout the grant period we tapped US Census Bureau representatives for information and guidance. They kept us up to date on changes to US Census Bureau operations and answered questions about our role as a community partner.

Weekly calls hosted by Together We Count

We participated in weekly meetings about the census convened by Together We Count. The exchange with other agency representatives informed changes we made in operations and materials. For instance, we learned that other organizations had been imprinting disposable face masks, and decided to purchase 1,500 masks that our staff distributed to older adults in small assisted living and senior housing residences.

Social media

From our social media and advertising, we learned that the posts that had more general messaging appeared to receive more impressions and reactions on all of our accounts. Additionally, linking to news articles or other pages seemed to receive more interactions. Digital advertising was quite successful, as well.

Project Summary

Regional workgroup

With our grant funding, we were able to leverage our extensive networks of organizations throughout the region that work with older adults and convene a regional workgroup of agencies focused on increasing the self-response rate of older adults and the accuracy of the 2020 Census. Our workgroup met three times during the course of the grant: first in-person in January, then virtually in late March and mid-June.

This workgroup was informed by a survey completed prior to the grant. In advance of applying for the DOLA grant, DRCOG had distributed a survey to organizations throughout our region to gauge their interest in assisting with census outreach. Surveys were sent to the Bemis Library in Littleton and the Denver and Arapahoe library districts, local senior commissions, senior centers, county councils on aging, Boomers Leading Change, the Denver Indian Center, the Center-Sage, and all the organizations that are contracted by DRCOG's Area Agency on Agency to provide community-based services. The survey served a dual purpose of paving the way to collaborative efforts for census outreach with information about the outreach activities DRCOG would propose in the grant and a request to respond to get detailed information about the activities they were interested in assisting with for the census.

In January, the first meeting of the workgroup allowed organizations working on census outreach, education and promotion to share their plans for reaching hard-to-count communities, find areas of overlap and identify opportunities to make their efforts more efficient. Representatives from the Senior Hub, Jewish Family Services, the US Census Bureau, Colorado Library Consortium, Audio Information Network of Colorado, Lutheran Family Services, Mile High Health Alliance, Southwest Improvement Council, Together We Count, Adams County, Arapahoe County, Clear Creek County, City of Wheat Ridge, and the City & County of Denver joined us at DRCOG's offices for the meeting.

In late March, the second workgroup meeting was held virtually rather than in-person due to the pandemic and included some of the participants from the first meeting as well as representatives of Morgan County, Fort Morgan, and the African Chamber of Commerce. Originally intended to be focused on checking in on progress as the census was released, the purpose of the meeting morphed a bit to talk more about plans to adapt outreach strategies to the changing conditions due to the pandemic, and a good discussion of successful tools to reach people without being in person.

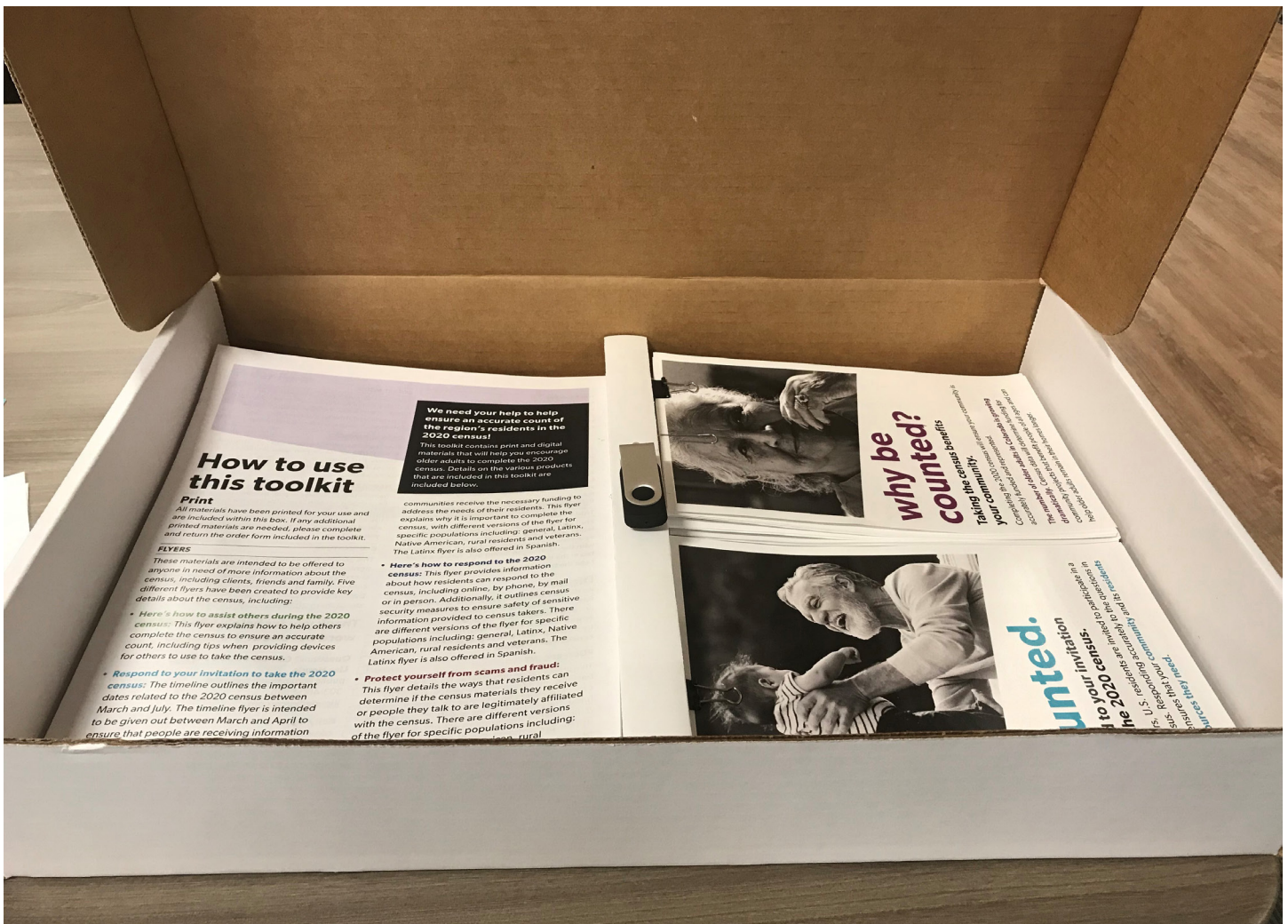
The final meeting in June was also held virtually and included representatives from many of the same organizations, as well as the Colorado Gerontological Society and Senior Support Services. All organizations provided a debrief of their outreach efforts over the last few months, discussed challenges and successes, and set the stage for continued collaboration as census outreach continues through late October.

Outreach toolkit

One of the key aspects of our census outreach strategy was the creation of our outreach toolkit. A number of promotional materials were created that were tailored to make the case to older adults about the importance of responding to the census, provide information about how to take the census, or how to help others take it.

Physical toolkits were assembled with hundreds of copies of each of these materials and sent to DRCOG's over 30 providers that work with older adults in the region so that they could distribute these materials when conducting outreach and assistance within the communities that they serve. A webinar training was also provided to the contractors to instruct them on how to use all of the materials and major topics related to the census.

An online version of the toolkit was available on Dropbox, promoted through an email blast, and was featured on the drcog.org website throughout March – June. In addition, many of these materials were also printed and distributed by DRCOG's Area Agency on Aging staff throughout March – June. In total, about 20,000 copies of these promotional materials were printed and distributed.



The outreach toolkits were mailed to all of our Area on Aging providers in early March and included many copies of each of the products, as well as a digital copy of everything on a flashdrive.

The online version of the toolkit is [available here](#) and included the promotional materials listed below. Some examples are shown on this page and subsequent pages.

- Digital banners for use on websites
- An email signature graphic
- Flyers focused on the following messages, with different design variants for some subgroups, such as Latinx, Native American, rural, veterans, and Spanish speakers. All flyers were also screen-reader adaptable for visually impaired seniors.
 - » Census timeline
 - » Why take the census?
 - » Fraud prevention
 - » How to respond to the census
 - » How families and professionals can help others with the census
- Boilerplate text for newsletters
- Posters
- Powerpoint presentation
- A social media plan with draft text, a schedule, and images sized for three major platforms
- Table tents

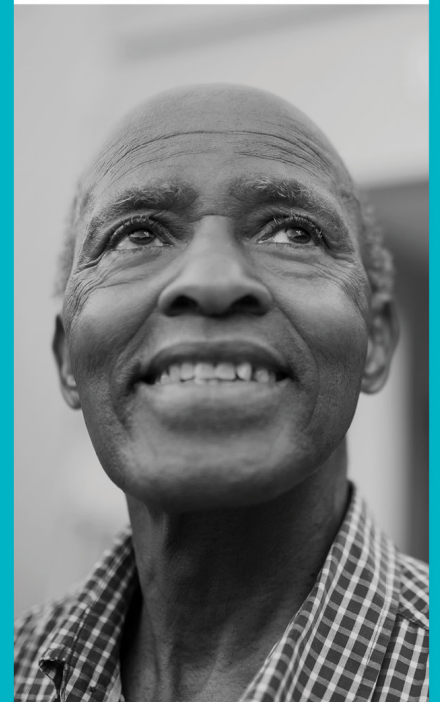
In addition, due to changes in census timeline and approach because of the pandemic, we created two supplemental promotional materials in June that were added to the digital toolkit: a flyer focused on making the connection between accurate census count and food/nutrition programs, and an updated flyer with the new timeline set forth by the Census Bureau.



This e-signature graphic was distributed through the toolkit, and was also used on all DRCOG email accounts in March.

**Help your
community
get the
resources it
needs.**

**Be counted. Take
the 2020 census.**



**United States®
Census
2020**

Digital banners like this one were available for organizations to download in the outreach toolkit.



COMPLETE EL CENSO DEL 2020.

Su familia está **más feliz** debido a usted.

Nuestro país es **más fuerte** debido a usted.

Siga mejorando el país, juntos.
Complete el Censo.

Compartir información sobre su vivienda
garantiza que su comunidad obtenga lo
que necesita para **prosperar.**

sea contado.

Para sus seres queridos, su comunidad, su país.



CENSUS-PO-BE COUNTED SPANISH-Version D

United States®
**Census
2020**

All print materials in the outreach toolkit, such as this poster, were available in both Spanish and English.



why be counted?

The number of older adults in Colorado is growing dramatically. Census data will determine funding for community projects that benefit people of all ages and can help older adults remain in their homes longer.

Taking the census affects how more than \$675 billion in federal funds are distributed to communities. In Colorado, this is more than \$13 billion or \$2,300 per person per year. Funds allocated based on census counts support:

- first responders
- transportation
- health and human services
- Medicare Part B
- libraries and community centers
- Supportive Housing for the Elderly Program
- Supplemental Nutrition Assistance Program



CENSUS-FL-WHYTAKE-20-02-25-V5-GE

Taking the census benefits your community.

Completing the 2020 census will ensure your community is accurately funded and represented.

The U.S. Constitution mandates that everyone in the country be counted every 10 years. It determines each state's number of seats in the U.S. House of Representatives. After each census, state officials redraw the boundaries of the congressional and state legislative districts to account for population shifts.

The census is an opportunity to shape a **better future** for our communities and **future generations**. By participating in the 2020 census, we help provide an accurate count of the people who live in our community. An accurate count helps determine our **community's needs** for services and funds transportation, meal and in-home services that help all older adults stay **healthy** and **thrive**.

United States®
Census
2020

This example of a flyer from the outreach toolkit highlighted the importance of the census to older Coloradans in particular.



be counted.

Protect yourself from scams and fraud.

When you get an invitation to take the census, here's how to know it's legitimate, safe and confidential.

The legitimate 2020 census form will never ask you for:

- your social security number
- money or donations
- your bank or credit card information
- your political views or affiliations

If a census taker comes to your door:

- They will have a copy of the census letter you received.
- Legitimate census takers will have an ID badge with their photo, a Department of Commerce watermark and an expiration date.

If you suspect fraud, call the Census Bureau at 800-923-8282.



Source: AARP
CENSUS-FL-FRAUD-20-02-18-V5-NA



All legitimate census materials will arrive by mail with a return address from Jeffersonville, Indiana.



The Census Bureau will never send you an unsolicited email.



To respond online, be sure you're using **https://census.gov**.



Some scammers fake the number they're calling from. Don't always trust caller ID.



The majority of the flyers in the outreach toolkit were available in a variety of different designs meant to target specific subsets of the older adult population in the region, such as this flyer about fraud, intended to reach Native Americans.

Advertising

Another major effort was our advertising campaign. To bolster our outreach, we integrated radio, print, TV, and digital advertising from March through June 30.

In the initial round of advertising, radio ads were placed on KUVO Jazz, a station which reaches older adult and minority demographics, Entercom EZ1430, a station with strong older adult demographics, and Colorado Public Radio, another station with high older adult demographics. Print advertising was placed in Colorado Community Newspapers across the nine counties in the Denver metro area, and included in online and email blasts. Print advertising was also placed regionwide in PrimeTime News and 50+ Marketplace. Broadcast television ads were placed during a blended schedule on Rocky Mountain PBS focused on programming with highest older adult viewership. In addition, digital advertising was employed through Facebook, Instagram, and Google ads that were targeted at older adults regionwide. Finally, we coordinated with the City and County of Denver and other partners to secure advertising on RTD transit. This initial round of advertising had a total of 6.3 million impressions.

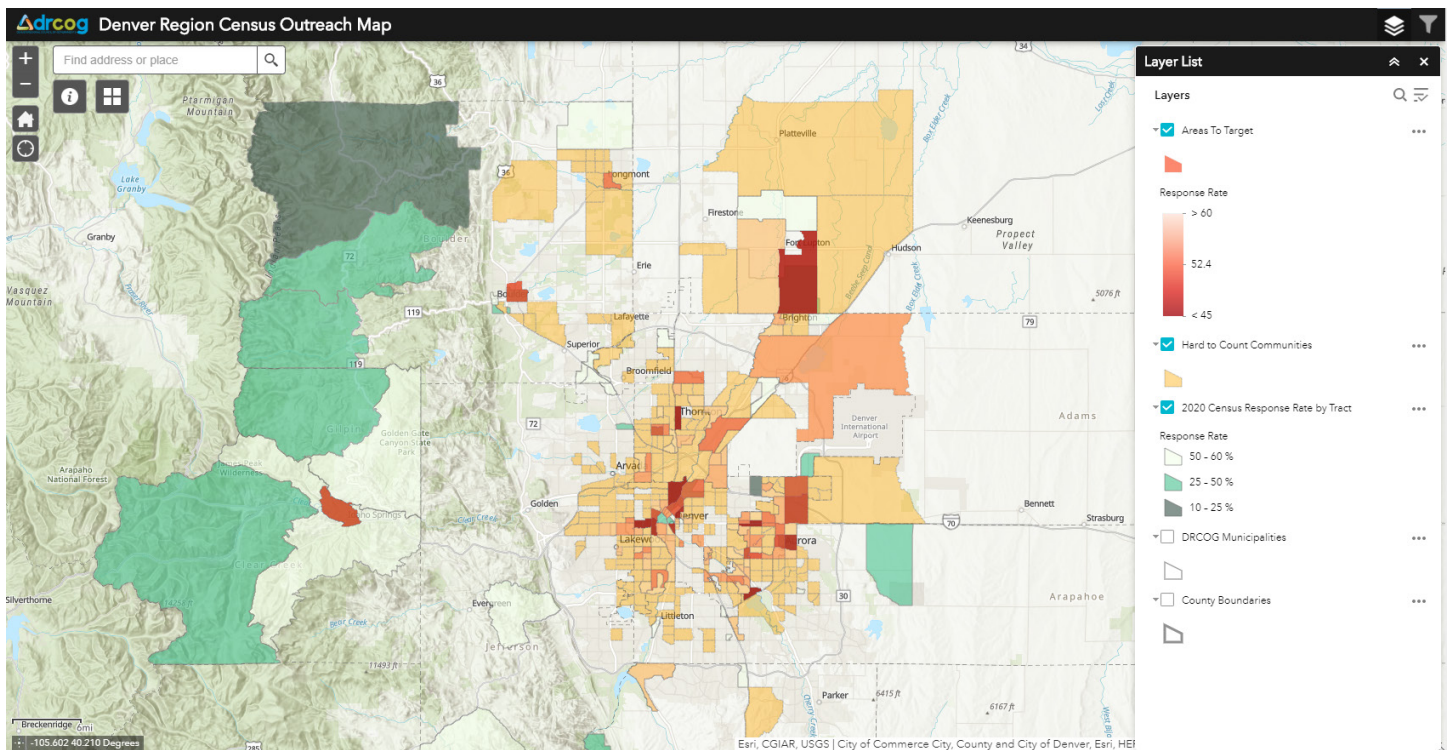
Advertising was increased through the month of June from what was originally anticipated due to the changes in our outreach strategies during the pandemic and inability to do the in-person outreach originally planned. The digital ads in June were hyper-targeted very closely on communities and neighborhoods where current response was low and where there is a higher percentage of older Coloradans. This included print advertising in Colorado Community Newspapers as well as radio advertising on Entercom EZ1430 and radio.net streaming service. In addition, ads were included during CBS4 programming with strong older adult audiences. Digital ads were also placed with CBS4 and these ads worked in concert with our “Aging Colorado” sponsored programming. This additional advertising had an additional reach of 2.9 million impressions.

Our digital advertising alone had a wide reach of about 120,000 people, with over 5.4 million total impressions between late March and end of June. The click-through rate, or the number of people who visited the census site after viewing the ad, was overall much higher (0.68% on Google and 0.56% on social platforms) than the typical benchmark rate of 0.12% for government-related digital advertising.



Interactive response rate/hard to count map

One additional work product that was created in the final month of the grant in response to the change in census operations was the creation of an interactive map that was shared with workgroup partners, and more widely through our email blasts, and weekly calls with other partners led by Together We Count. The map, updated weekly, allowed DRCOG and our partners to view hard to count communities as well as current census response rates in order to more efficiently target the final months of their outreach. This allowed a more tailored approach for partners trying to reach older adults and other hard to count communities and allowed them to see which particular neighborhoods in the region had lower response rates and were a high priority for additional outreach in the final month of the grant. The map is shown below and is available to explore in more detail [at this link](#).



We developed this interactive map that shows response rates and hard to count communities in order to assist us and our partners in identifying areas to target our outreach.

Email and web communications

We also maintained a regular communications strategy that included monthly email newsletters to over 300 partners around the region working with older adults. In addition, the homepage of the DRCOG website included a large Census banner displayed throughout the grant period, viewed by the over 27,000 visits to the home page.

Social media

The DRCOG social media accounts also maintained a robust social media campaign throughout the grant period, posting a total of 77 times over four channels between February 1 and June 30: Facebook, Twitter, Instagram, and LinkedIn. In total, our social media posts received over 35,000 impressions and 643 interactions. By channel:

- Our 31 Facebook posts received over 3,700 impressions and 165 interactions.
- Our 34 Twitter posts had over 28,000 impressions with 379 interactions.
- On Instagram, we posted 9 times and received nearly 2,000 impressions and 70 interactions.
- We did 3 posts on LinkedIn, which got over 1,300 impressions and 29 interactions.

A few of the most successful (most impressions and interactions and highest engagement rate) posts are shown below.



Direct outreach

Area Agency on Aging staff outreach

Outreach through our Area Agency on Aging (AAA) staff was integral to our strategy. Our AAA staff are able to reach targeted populations including older adults that are of highest economic need (low income, low-income minority) and highest social need due to isolation and other factors (frail, language barriers, cognitively impaired). Materials in the toolkit described above were made available in hard copies and electronic versions to AAA staff, contractors, sub-recipients, and other stakeholders in our region. One of the flyers in the toolkit was produced in English and Spanish to explain how families and professionals could assist their relatives and staff and what not to do. Some examples of the work that AAA staff completed to spread the word about the census included:

- DRCOG's State Health Insurance Assistance Program (SHIP) staff distributed census flyers in an annual mailing to 3,914 Medicare beneficiaries and 82 other mailings.
- Census information was shared with 327 people who called the AAA's Aging and Disability Resource Center.
- AAA Case Managers distributed census information to 415 callers, at 31 home visits, and in 55 client waitlist letters.
- Census flyers from the toolkit were included with 865 annual client satisfaction surveys.
- AAA staff integrated census outreach into their daily contacts with callers and clients. Talking points about the census were shared with staff and contractors to ensure accuracy and consistency.
- Talking points about the changes in census operations and the timeline were produced for AAA staff and contractors.

Some of our original plans for distributing flyers and disseminating information about the census were impacted by the cancellation of community meetings, events, and resource fairs. In lieu of this, the following alternative ways of performing outreach were implemented:

- AAA staff and contractors determined the need for making reassurance calls to previous and current clients. These calls provided an opportunity for connecting with homebound older adults to provide reassurance and resources for meeting their needs. Feedback from staff and contractors indicates these calls really made a difference to people who were suffering from isolation. Most of these interactions were lengthy and deemed very valuable. Additionally, staff and contractors were able to make the case for the value of responding to the census to continuing funding for community-based services. AAA staff noted that some people hadn't received information from the census so the phone contact was a good reminder, some weren't aware of the importance of the census to community-based services, and some had heard misinformation about the census that was cleared up.

- DRCOG purchased 1,500 imprinted masks that were distributed to residents of small assisted living residences and senior housing units. Assisted living residents and administrators expressed gratitude for the masks and how much it meant for them to be counted.
- Given the high demand for food and nutrition during the coronavirus, DRCOG contractors (including Volunteers of America, Project Angel Heart, Southwest Improvement Council, Arapahoe County, Lutheran Family Services, and Jewish Family Services) have been delivering meals and providing food pantries and food boxes to thousands of households in the region, including several rural areas. DRCOG determined these types of contacts were an opportunity to reach people and connect the value of responding to the census to the funding of local services like the ones providing the food they were receiving. Flyers were produced with that message and distributed with 12,000 meals and food boxes.
- In June, DRCOG produced another flyer describing the revised census operations timeline. 10,000 of these flyers will be distributed by AAA staff and contractors over the summer and into the fall to continue our census outreach efforts.



In the final month of the grant, we also had masks printed with the census logo and our “be counted” messaging for distribution to our Area Agency on Aging staff and small assisted living facilities and senior housing units.



Taking the census helps people like you receive food.

A complete census count is important to our communities. Funding for local food and nutrition programs is based on the number of Coloradans who take the census.

Due to the COVID-19 pandemic, we created some additional outreach materials for use in June, specifically intended to be provided with meal delivery/pickup.

Area Agency on Aging provider outreach

Another key component of this project involved leveraging the capacity of DRCOG’s existing AAA contractor network of community-based services that are required to conduct outreach in their existing contracts. These community-based organizations provide a wide array of services such as transportation, congregate and home-delivered meals, handyman chore service, in-home care, respite for caregivers, adaptive aids for the visually impaired, and more. DRCOG provided the census materials in the toolkits to each contracted provider to distribute to their clients, as well as talking points to keep the contractors informed of the changes in operations and the timeline throughout the grant period.

Contractor activities included the distribution of materials, mailings, social media posts and phone calls. These activities reached at least 7,685 individuals. The pandemic significantly impacted the services provided by the contractors during the grant period. While several events were cancelled, many of these providers made adaptations to their census outreach strategy due to the pandemic. For example, the Center for People with Disabilities delivered virtual presentations to several assisted living residences, two community centers, and a peer support group in early March.

Grant sub-recipient outreach

A portion of our grant funds were sub-awarded to AAA contractors to provide additional outreach and assistance, beyond distributing toolkit resources. Community partners planned to offer safe spaces at their service locations that offer HIPAA-compliant computers and technical assistance for older adults to complete their Census forms, as well as undertake additional census outreach. These contractors included ones who are serving older adults who are visually challenged (A3, Colorado Center for the Blind); Latino, Native American and Asian Pacific elders (Southwest Improvement Council, Asian Pacific Development Center); refugees (Jewish Family Service); homeless (Senior Support Services) or live in rural areas (Volunteers of America, Seniors' Resource Center).

Sub-recipient activities to provide face to face technical assistance were severely impacted by the coronavirus. In February, the Denver Office on Aging was able to hold several events, but all the other contractors cancelled their plans for safe sites and events for providing technical assistance. For example, hardest hit was an organization called Senior Support Services that provides case management and day care services and food to older adults who are homeless. When their doors were closed due to the pandemic, they weren't able to assist their clients with responding to the census and will return all their grant funding. However, some of the other sub-recipients like the Colorado Gerontological Society were still able to do significant amounts of outreach through other outlets like newsletters, webinars, press releases and media interviews, and virtual events.

Our contractors who were sub-awarded consistently reported that mailings and phone calls were the most effective ways to reach people. As cited above, the reassurance calls they made to check in with people were conducive to asking people if they responded to the census and sharing information on how to respond.

Despite the challenges of the pandemic and cancellations of events and in-person assistance, sub-recipients estimated that in total they reached at least 1,323,678 people through outreach efforts such as mailings, newsletters, phone calls, emails, webinars, trainings, interviews, press releases, and social media posts.