

SALLY BEAUMONT, CHAIRPERSON
RUTH BEIDEMAN
JAMIE MAGEE
JAMES MOSELEY
PENNY ORNDORFF
SCOTT PHILLIPS



LARRY SAVAGE
FRANCINE SHOCKLEY
ANNA SHORT
FRAN SMITH
JOHN WILLIAMS

Advisory Committee on Aging & Adults with Physical Disabilities for Sussex County

Minutes of Meeting

Monday, March 18, 2013

A meeting of the Advisory Committee on Aging & Adults with Physical Disabilities for Sussex County was held on Monday, March 18, 2013, at 10:00 a.m. at the Laurel Senior Center, 113 North Central Avenue, Laurel, Delaware. The following members were present:

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|-------------------|----------------------|
| 1. Sally Beaumont | 7. Larry Savage |
| 2. Ruth Beideman | 8. Francine Shockley |
| 3. Jamie Magee | 9. Anna Short |
| 4. James Moseley | 10. Fran Smith |
| 5. Penny Orndorff | 11. John Williams |
| 6. Scott Phillips | |

Also in attendance were Penny Duncan, Executive Director, Laurel Senior Center, Inc.; Patsy Bennett Brown, Amputee Support Group of Delaware; Cheryl Hollis, Director of Professional Services, and Sandy Quillin, Outreach Education Coordinator, Delaware Division of Services for Aging and Adults with Physical Disabilities; Janae Aglio, Assistant Director, ELDERinfo, Delaware Department of Insurance; Doris Schonbrunner, Heritage at Milford, Genesis; Chantal Willis; and Ken Bock, Deputy Director, CHEER.

Call to Order

Sally Beaumont, Chairperson, called the meeting to order and thanked Penny Duncan, Executive Director of the Laurel Senior Center, Inc., for use of the Center in hosting the Advisory Committee's meeting. Ms. Duncan was asked to tell the Committee a little about the Laurel Senior Center, and she advised that the Center currently has over 500 members and has been in existence for more than 40 years. Transportation is one of the many services they provide, in addition to being the only center on the west side of the County with an Adult Day Care Program. Although they offer many of the same programs as CHEER, the Laurel Senior Center is independently operated, serving seniors from the Reliance-Seaford area south to the Delaware-Maryland line.

Approval of Minutes

A Motion was made by Ms. Short, seconded by Ms. Smith, to approve the minutes of January 28, 2013, as distributed. Motion Adopted by Voice Vote.

Guest Speaker

Ms. Short introduced Cheryl Hollis, Director of Professional Services, and Sandy Quillin, Outreach Education Coordinator, Delaware Division of Services for Aging and Adults with Physical Disabilities, who were invited to speak on the *Senior Medicare Patrol Program*.

Cheryl Hollis began their presentation by stating that everyone is interested in making sure that government funding, which is taxpayer money, is going where it should be going, and Medicare fraud is rampant today. This is a major concern because it results in higher health care costs for everyone.

The Delaware Senior Medicare Patrol Program works to provide public information to encourage people who have Medicare to carefully read their Medicare Summary Notice and ask questions if they do not think the information is correct. The program also trains people who are retired to help other Medicare beneficiaries get the information they need when they suspect fraud, waste, or abuse of the Medicare program.

Partnering with the Delaware Division of Services for Aging and Adults with Physical Disabilities is the Aging and Disability Resource Center (ADRC), which Sandy Quillin went on to discuss. She explained that the process of starting an ADRC in Delaware began approximately 2009 with the State receiving a grant from the Federal government for this purpose. This is a national project whereby every state has an ADRC so that seniors and people with disabilities can call one number and be directed to the right place for assistance, a “one-stop-shop” so to speak. The hotline number to remember in Delaware is **1-800-223-9074**. Individuals can call this number with any problem they may be having and they will be directed to the right place for assistance. The goal of the ADRC is to link individuals to programs and services that will allow them to remain in their own home and community. They have the ability to connect people with all sorts of entities—from Adult Protective Services for assisting those who are being abused or financially exploited to respite and adult day care in the home.

With the main focus of the ADRC to keep people in their homes, Ms. Hollis advised that the State partners with many agencies including nursing homes, hospitals, acute care settings, long-term care, etc., to achieve that end. For example, if a person is in a nursing home due to a fall and they need modifications to their home, there are one-time monies available in the State system to allow for ramps, changing stairs, fixing floors, those types of things. Everyone is encouraged to call the 800 number anytime they have a question.

ADRC offices are located in Newark and Milford, and the phone is manned 8:00 a.m. to 4:30 p.m., Monday through Friday, with an answering service provided for after-hour calls. When someone calls the 800 number, ADRC staff act as fact collectors and they are trained on what information to obtain to best serve the caller. All calls are recorded not only for quality management and customer service purposes, but to allow for retrieval if there is a question.

The State works with various agencies such as the FBI and Department of Justice on fraud prevention, but Ms. Hollis stated it is every person’s responsibility to 1) protect, 2) detect, and

3) report when it comes to Medicare fraud. While there are many types of fraud going on, durable medical equipment is considered one of the largest. Many seniors are sitting at home alone wanting to talk to someone, and scammers take advantage of these situations. Ms. Hollis also emphasized the importance of people reading their quarterly Medicare Summary Notices to make sure they are accurate. Reading the notices can help prevent instances of double-billing, paying for services not needed or never provided, and Medicare being billed for services that were supposed to be free.

Another huge problem which the Federal Trade Commission deals with is identity fraud. Ms. Hollis urged everyone to be cautious and aware of where they are using their Medicare card to prevent their number from being stolen. She noted that Medicare does not knock on your door and does not call, so seniors should be very careful about giving out their Medicare, Social Security, or bank routing number to anyone at the door or on the phone.

Ms. Hollis distributed hard copies and briefly reviewed the following PowerPoint presentation on Medicare Fraud:

What is Medicare Fraud?

Intentionally billing Medicare for services that were not received, or billing for a service at a higher rate than is actually justified.

What is Medicare Abuse?

Providers supply services or products that are not medically necessary or that do not meet professional standards.

Examples of Fraud & Abuse

- ✓ Billing for services, supplies or equipment that were not provided
- ✓ Billing for excessive medical supplies
- ✓ Obtaining a Medicare number for “free” services
- ✓ Improper coding to obtain a higher payment
- ✓ Unneeded or excessive x-rays and lab tests
- ✓ Claims for services that are not medically necessary
- ✓ Using another person’s Medicare card to obtain medical care, supplies, or equipment

Medicare Fraud, Abuse, and Errors Affect...

Everyone

- Billions of dollars lost to improper claims

Beneficiaries

- Health care services affected

Taxpayers

- Billions of taxpayer dollars wasted
- Medicare trust fund at risk

Three Steps to Prevent Health Care Fraud

- 1) Protect, 2) Detect, 3) Report

Step 1: Protect Yourself from Medicare Fraud and Abuse

- ✓ Do treat your Medicare card and number like your credit cards.
- ✓ Do watch out for identity theft.
- ✓ Do be aware that Medicare doesn't call or visit to sell you anything.
- ✓ Don't give out your Medicare number except to your doctor or other Medicare provider.
- ✓ Don't carry your Medicare card unless you will need it.

Step 2: Detect Medicare Fraud & Abuse

- ✓ Use your Personal Health Care Journal
- ✓ Review Medicare Summary Notices (MSNs) and other statements:
 1. Services you didn't get
 2. Double-billing
 3. Services not ordered by your doctor
- ✓ Access your Medicare information at www.MyMedicare.gov

["Personal Health Care Journals" were provided for everybody to record appointments, reason for the visit, family history and health problems/conditions, medications, medical equipment and supplies, past surgeries, physician/care provider, etc., as well as an envelope to hold the journal, receipts, and quarterly statements which could be helpful in assisting individuals to detect fraud or abuse.]

Step 3: Report Suspected Medicare Fraud and Abuse

- ✓ Call the provider.
- ✓ Gather information and documentation.
- ✓ Contact your SMP. This is a free and confidential service.

SMP (Senior Medicare Patrol) Volunteers

Would you like to:

- Help other Medicare beneficiaries protect, detect, and report
- Give presentations
- Provide one-on-one counseling
- Perform administrative work

Ms. Hollis concluded by stating that the Senior Medicare Patrol Program is in need of volunteers, as that is how their program is run. Sussex County is the largest growing county in Delaware, many of which are senior citizens, and volunteers are needed in all areas—to give presentations, hand out information at health fairs, or drop off information to pharmacies, senior centers, and libraries. Anyone interested in volunteering should call the Senior Medicare Patrol Program at 1-800-223-9074.

Also in partnership with the Senior Medicare Patrol Program is the ELDERinfo Program under the auspices of the Delaware Department of Insurance, known as the Delaware State Health Insurance Assistance Program (SHIP). Janae Aglio is Assistant Director and was introduced to talk about the ELDERinfo Program. Ms. Aglio advised that there is a SHIP office in every state across the country because there are no local Medicare offices. To that end, a grant is applied for

each year for the ELDERinfo Program to be the Medicare experts in the State. March, June, and September are known as “Welcome to Medicare” months for people turning 65, with presentations given throughout the State to help people understand what Medicare is all about. ELDERinfo also assists with Medicare billing, claims issues, and drug plans. Open enrollment is October 15 through December 7, and that is the time when individuals can select a drug plan for the upcoming year at the lowest cost to meet their needs. Efforts are being concentrated in Sussex County to identify individuals that qualify for assistance either to pay their Medicare cost or help them with their prescription drugs, and they are not receiving it. All calls to the ELDERinfo office are screened for assistance, and they have volunteers available all over the State to meet with seniors one-on-one at local senior centers, libraries, etc., to discuss and assist with the Medicare process.

Ms. Aglio reminded everyone that Medicare is not just for persons 65 and older—Medicare serves people with disabilities as well. She explained that when someone under the age of 65 becomes disabled and applies for Medicare, Medicare pays 80 percent and the individual is responsible for paying the other 20 percent of their health care costs. When a senior turns 65, they have guaranteed issue rights for six months, during which they may purchase supplemental insurance to help pay that 20 percent cost. However, a disabled individual under the age of 65 does not have those same guaranteed issue rights. Insurance companies can hold pre-existing conditions against these individuals, making it very difficult and expensive for them to obtain a policy. Since Delaware does not currently have guaranteed issue rights for the disabled under 65, Ms. Aglio encouraged everybody to contact their legislators and make known their concerns about this policy being unfair because that 20 percent can be very costly. The only other option they have is a Medicare Advantage Plan, the problem with that being that Sussex County has only one company which many of the doctors do not accept.

In closing, Ms. Aglio reiterated that SHIP services are free and urged anyone with questions regarding Medicare to feel free to contact the Delaware SHIP office at 1-800-336-9500.

On behalf of the Advisory Committee, Ms. Beaumont thanked Cheryl Hollis, Sandy Quillin, and Janae Aglio for the excellent information they provided.

Public Comment

Ms. Beaumont deviated from the agenda to allow for public comment prior to discussing Old Business. Members of the audience were recognized as follows:

- Ken Bock, Deputy Director, CHEER, brought along copies of their monthly newspaper for March to distribute to anyone interested in receiving a copy. Mr. Bock also announced that CHEER is opening a new Adult Day Program next month at their Community Center on Sand Hill Road in Georgetown and had brochures available with additional information.
- Doris Schonbrunner, Administrator, Heritage at Milford

- Patsy Brown, Amputee Support Group of Delaware, advised that she is also Co-Chair this year of the Governor’s Advisory Council on Services for Aging and Adults with Physical Disabilities.
- Chantal Willis

Old Business

- New Coalition Interest Survey

Ms. Beaumont called upon Mr. Phillips for a report on the results of the new coalition interest survey which was sent out in January to approximately 100 individuals (90 by e-mail and another ten or so by U.S. mail) to determine the degree of interest in joining such a group and the level of commitment they might make toward its success. Individuals were sent a link to this Google survey they could click on and it would automatically take them to the Internet page to answer the questions. People were given a choice of either completing the survey on-line or by printing it out and returning it. A total of 42 responses were received.

Mr. Phillips reviewed a memo he submitted to Sally Beaumont, Chairperson, dated March 12, 2013 (copy attached), giving a detailed report on the survey results. Following are the top responses received on the questionnaire:

1. **Are you interested in being a part of this coalition?**
74 percent responded “Yes”
2. **How often do you think that the coalition should meet?**
55 percent responded “Quarterly”
3. **What day and time would be best to hold the meetings?**
26 percent responded “Monday – AM”
4. **Where should the coalition meetings be held?**
63 percent responded “Fixed Location, a place in central Sussex”
5. **Would you be able to volunteer for the coalition?**
50 percent responded “Yes”
6. **If yes above, how much estimated time could you volunteer?**
53 percent of respondents indicated 1-5 hours/month
7. **What would you want from the coalition?**
Two options garnered more than 70 percent of the responses:
 - Identify issues and desired outcomes on relevant issues
 - Offer thoughtful solutions to decision-makers on complicated issues

8. What can you and/or your organization bring to the coalition?

82 percent responded “Commitment and dedication”

9. Would you be willing to serve on a coalition committee?

38 percent responded “Perhaps, depending on nature of committee”

10. Would you be willing to serve on the planning committee for the annual conference?

33 percent responded “Yes, definitely”

11. Do you have anything to add, e.g. suggestions, ideas, problem areas that should have priority, etc.?

Twelve responses were received denoting health care and transportation issues in the County, health care reform and how it affects the senior population, coordination of resources, noting that the State Office of Volunteerism has started an Inclusion Team, and that a coalition is something Sussex County really needs to better address the social, health care, and mental health needs of the aging and disabled adults.

Mr. Phillips stated that the 40 percent response rate was encouraging, and there were a number of positive-type responses of people willing to participate in the coalition and component committees. Although the survey has been closed, Mr. Phillips indicated that it could be reopened if others would like to participate.

It was agreed that the next step in this coalition process would be to set a date for a planning session to discuss organizing a conference in October. Ms. Beaumont suggested that a planning group meeting be held in April. Notice of the meeting will be posted to meet FOIA requirements and sent to the Committee’s current resource list, as well as included on the County’s website. The date selected for the meeting is Wednesday, April 17, 2013, at 10:00 a.m. at the Sussex County West Administrative Complex in Georgetown, if available. Other venues suggested were Easter Seals in Georgetown or Delaware Hospice in Milford if the West Complex is already booked for that date.

Ms. Beaumont once again thanked Mr. Phillips for all of his efforts in regard to the survey which showed overwhelmingly that people are interested in receiving information and actively participating in a coalition.

▪ Status of Community Meetings

Ms. Beaumont reported that she contacted County Administrator Todd Lawson in reference to the community meetings the Advisory Committee is contemplating holding in each of the five councilmanic districts to establish and/or corroborate the unique needs of each community. Mr. Lawson recommended that Ms. Beaumont communicate directly with the individual County Council members in regard to the proposed meetings, which she subsequently did both in writing and by phone, but the only response received confirming the date was from Councilman Vance Phillips.

Ms. Short suggested in lieu of holding meetings in each of the five councilmanic districts, that the May meeting of the Advisory Committee be dedicated to discussion of the community needs assessments for all of Sussex County. It was also proposed that the Committee may want to consider being placed on a future agenda of the County Council to present their needs assessment findings and explain the Committee's path forward.

After some discussion, it was the consensus of the Advisory Committee that the May meeting will be held at the Sussex County West Administrative Complex, with the agenda to be devoted to the community needs assessments. It was also agreed that prior to the May meeting, Ms. Beaumont will request a time for the Advisory Committee to be placed on the County Council agenda to talk about the objectives of the Committee and to invite Council members to the May meeting.

New Business

Ms. Beaumont announced that election of officers for the Advisory Committee will take place at the May meeting. According to the Advisory Committee's bylaws, officers are elected for two-year terms and may be re-elected for a second term of two years. The last election of officers was held in March 2011. Officers include the Chairperson, Vice Chairperson, and Secretary. The Vice Chairperson fills in for the Chairperson in their absence, and the Secretary is responsible for reviewing the minutes, arranging for speakers, and working with the County's Communications Director on the press release and flyer for each meeting. Ms. Beaumont urged members to be thinking about who they would like to fill these positions.

Additional Business

❖ Ms. Magee distributed flyers regarding the following upcoming events:

1. The Alzheimer's Association, in cooperation with Delaware Hospice and CHEER, will be presenting Memory Café beginning Monday, March 25, 2013, with monthly sessions to follow on the fourth Monday of each month. The sessions will be held from 10:30 a.m. until noon at the CHEER Coastal Leisure Center in Ocean View. Memory Café is a safe environment where people with memory loss and their care partners can laugh, learn, and engage with others traveling the same path.
2. The Alzheimer's Association is partnering with several other organizations to present "Stages of Senior Care, Your Step-by-Step Guide to Making the Best Decisions," on Saturday, April 6, 2013, from 10:00 a.m. to 12:00 p.m. at the First Southern Baptist Church, 761 South Little Creek Road, Dover.
3. Laurel Public Library is hosting "The Basics...Memory Loss, Dementia and Alzheimer's Disease," an education program by the Alzheimer's Association, on Tuesday, April 9, 2013, from 6:30 to 8:00 p.m.
4. Easter Seals 4th Annual Caregiver & Respite Conference will be held on Friday, April 26,

2013, from 8:30 a.m. to 4:00 p.m. at the Easter Seals Conference Center, 61 Corporate Circle, New Castle, Delaware, with the conference being broadcast this year to Georgetown Easter Seals. Keynote speaker is John Schall, CEO of the Caregiver Action Network.

5. An interactive workshop entitled “Know the 10 Signs...Early Detection Matters” will be presented by the Alzheimer’s Association on May 15, 2013, from 3:30 to 5:00 p.m., hosted by Cadbury at Lewes, 17028 Cadbury Circle, Lewes.
 6. The Alzheimer’s Association will be presenting a Caregiver Educational Workshop on Wednesday, May 22, 2013, from 8:30 a.m. to 4:30 p.m. at Lofland Park Center at Genesis, 715 King Street, Seaford. This free educational program is presented in partnership with Lofland Park Center at Genesis and is designed to help caregivers and family members of individuals with Alzheimer’s and related dementia cope with the care needs of their impaired loved one.
- ❖ Patsy Brown announced that the Amputee Support Group meets at Easter Seals the fourth Tuesday of every month from 1:00 to 3:00 p.m. She noted if anyone is facing amputation and would like someone to talk to, peer support is available to go into nursing homes or hospitals.

Next Meeting

The next meeting of the Advisory Committee will be held on May 20, 2013, at 10:00 a.m. at the Sussex County West Administrative Complex, 22215 North DuPont Boulevard, Georgetown, Delaware.

Adjournment

A Motion was made by Ms. Smith, seconded by Ms. Magee, to adjourn at 11:30 a.m. Motion Adopted by Voice Vote.

Respectfully submitted,

Anna Short, Secretary
Advisory Committee on Aging & Adults
with Physical Disabilities for Sussex County

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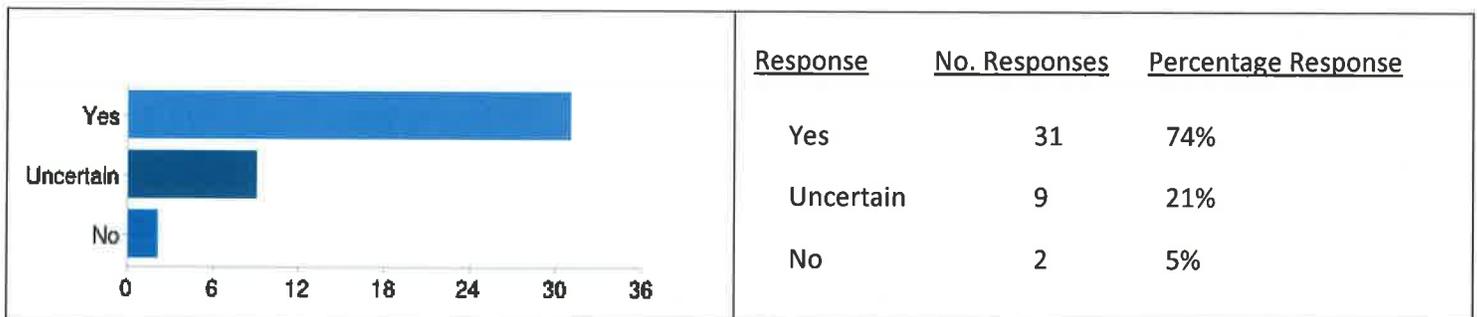
Advisory Committee on Aging & Adults with Physical Disabilities for Sussex County

To: Sally Beaumont, Chairperson
 From: Scott D. Phillips, Advisory Committee Member
 Date: March 12, 2013
 RE: Survey Results on Interest in a Coalition

The Sussex County Council’s Advisory Committee on Aging & Adults with Physical Disabilities has identified as one of its Strategic Plan goals to, “Develop a consortium of advocate groups for the elderly and disabled populations in Sussex County to validate the needs and identify potential solutions.” One of the initial action steps in meeting this objective was to sent out a survey to affiliated organizations and groups to determine their degree of interest in joining such a group and the level of commitment they might make towards its success. In January 2013, this questionnaire went out by e-mail to approximately 90 people who had e-mail addresses. Another ten individuals, for whom no such address was on hand, were sent the questionnaire by US Mail. People were given a choice of either completing the survey on-line, or by printing it out and returning it. A total of 42 responses were received. The results, question-by-question, are as follows:

1.) Are you interested in being a part of this coalition?

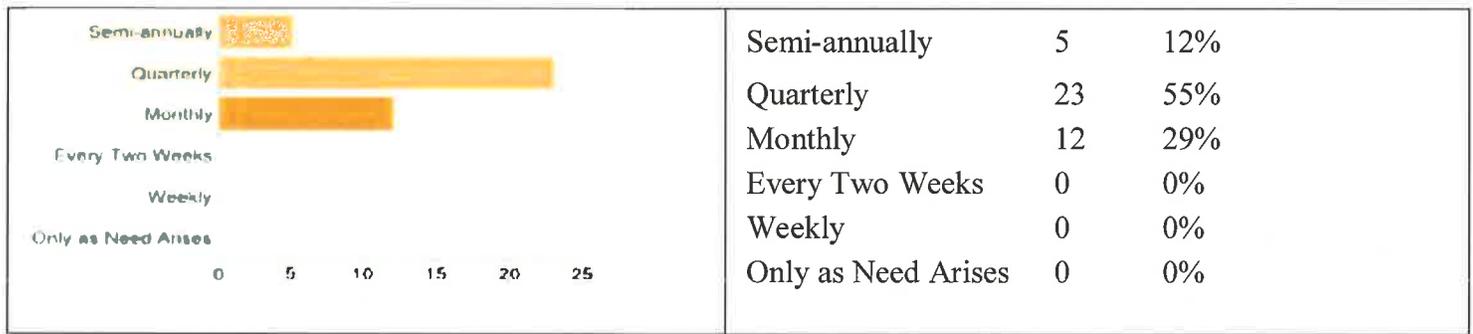
As shown in the table and chart below, nearly three-quarters of the respondents, i.e. 31 people, replied that they were interested in joining this proposed coalition. Another one-fifth (9) were uncertain but open to the idea. Only two people denied any interest.



2.) How often to you think that the coalition should meet?

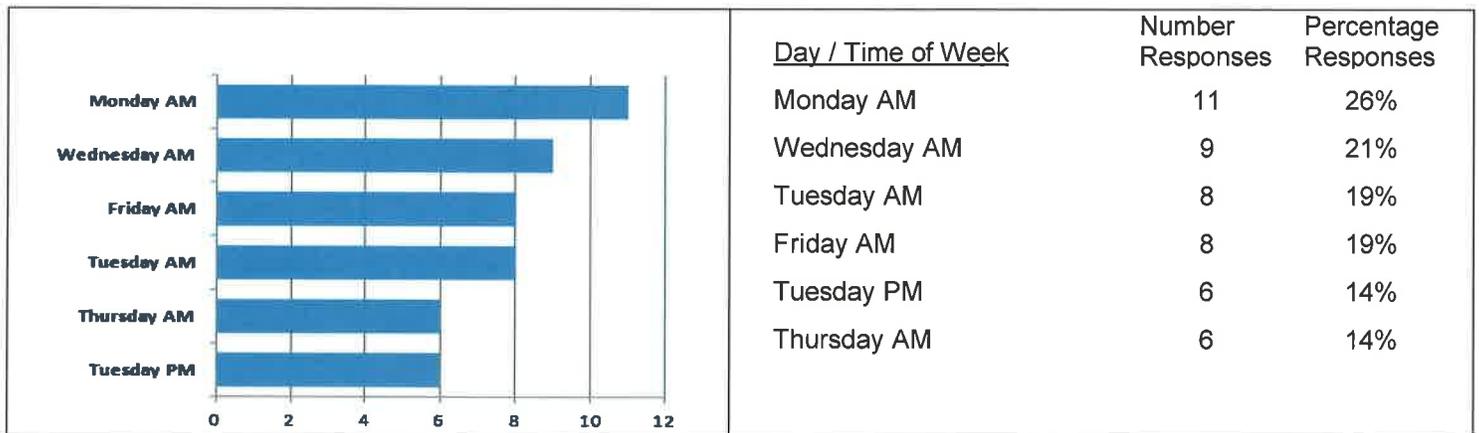
In an effort to be responsive to potential coalition members and not over-burden them with too frequent meetings, parties were asked at what frequency they thought the group should meet. Respondents were given six options ranging in frequency from as often as weekly to as infrequently as semi-annually or only

as needed. As shown below, the most frequent response was “Quarterly”, made by 55% of respondents (23 people). Next was “Monthly” made by 29%, with no one thinking meetings were needed more often.



3.) What day and time would be best to hold the meetings? (Top Answers Below)

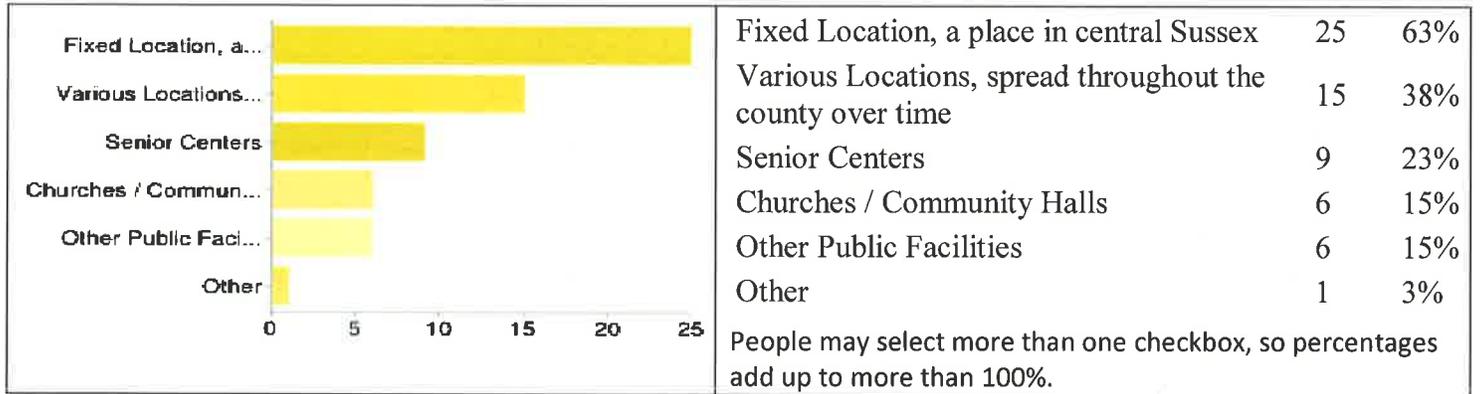
The majority of the recipients of this survey are professional people and leaders of their organizations. This next question was asked to determine when they could best fit coalition meetings into their busy schedules. The top answers are shown in the chart / table below. Holding meetings in the morning was the time most favored, with Monday, then Wednesday slightly more popular than the other three weekdays. There was essentially no one who chose to meet on weekends.



4.) Where should the coalition meetings to be held?

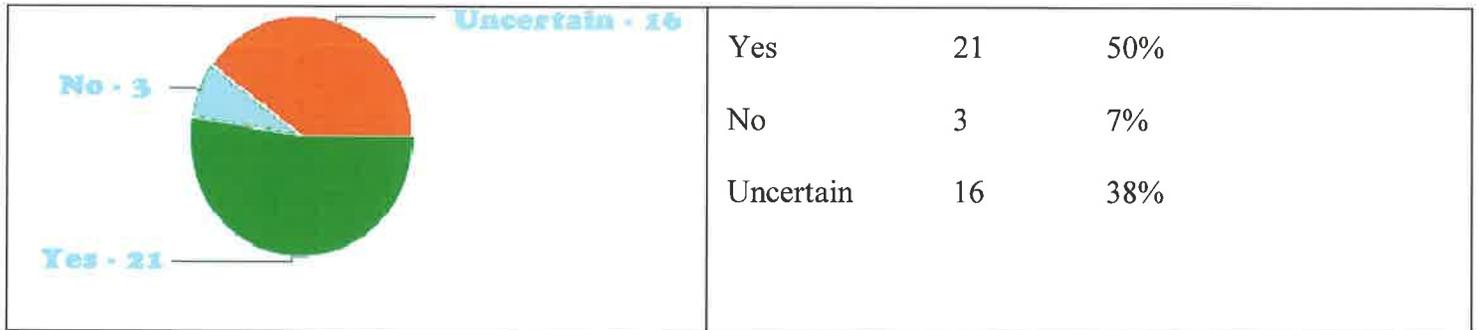
Respondents were asked where they thought meetings would best be held in a further attempt to facilitate their attendance. Like what is faced by the Advisory Committee in scheduling its own meetings, this question asked whether people thought one, fixed location was best, or whether meeting locations should vary. In addition, the type of facility people thought would accommodate groups of 50+ people was also asked.

Results on the next page show that nearly two-thirds of respondents thought a fixed location in central Sussex would be most convenient. As to the type of potential meeting place, “Senior Centers” was the most popular answer.



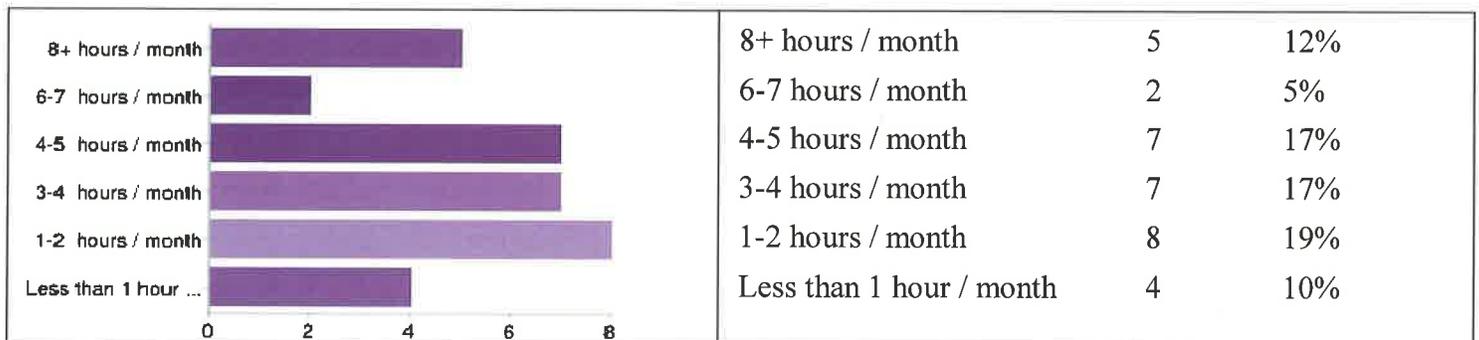
5.) Would you be able to volunteer for the coalition?

Respondents were asked whether they could do any volunteer work helping the coalition. Such type work was not defined but sought to ascertain who might offer their services beyond simply attending the main Coalition group's meetings. Exactly half the people said they could volunteer, another 38% replied that they were "uncertain" but didn't rule out the possibility.



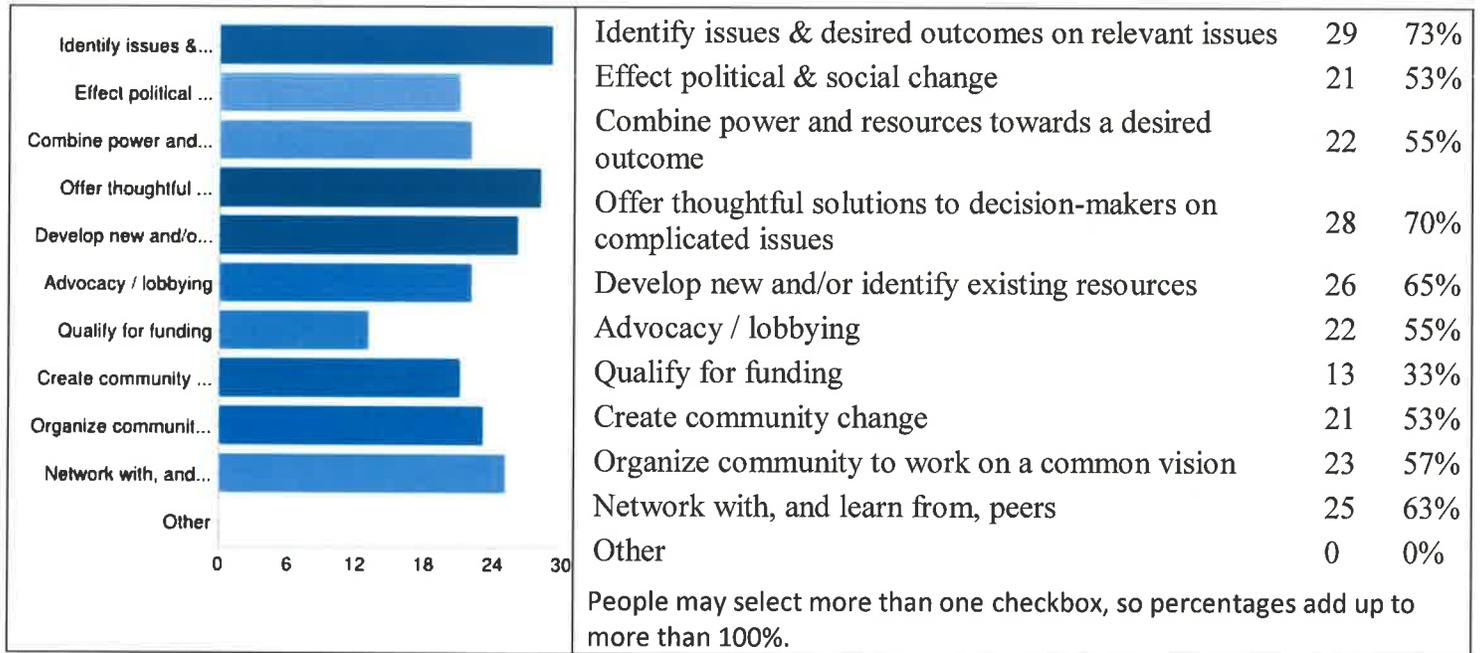
6.) If yes above, how much estimated time could you volunteer?

Of the people who replied they were able to do volunteer work for the coalition, this question asked how much time they thought they could offer. There were 33 responses, 29 which involved estimates of one or more hours per month. Of note is that this number is well above the 21 who were certain they could volunteer in Question #5 above. The largest number of responses fell in the three categories encompassing 1-5 hours of volunteer hours per month and totaled 22 people, or 53% of respondents.



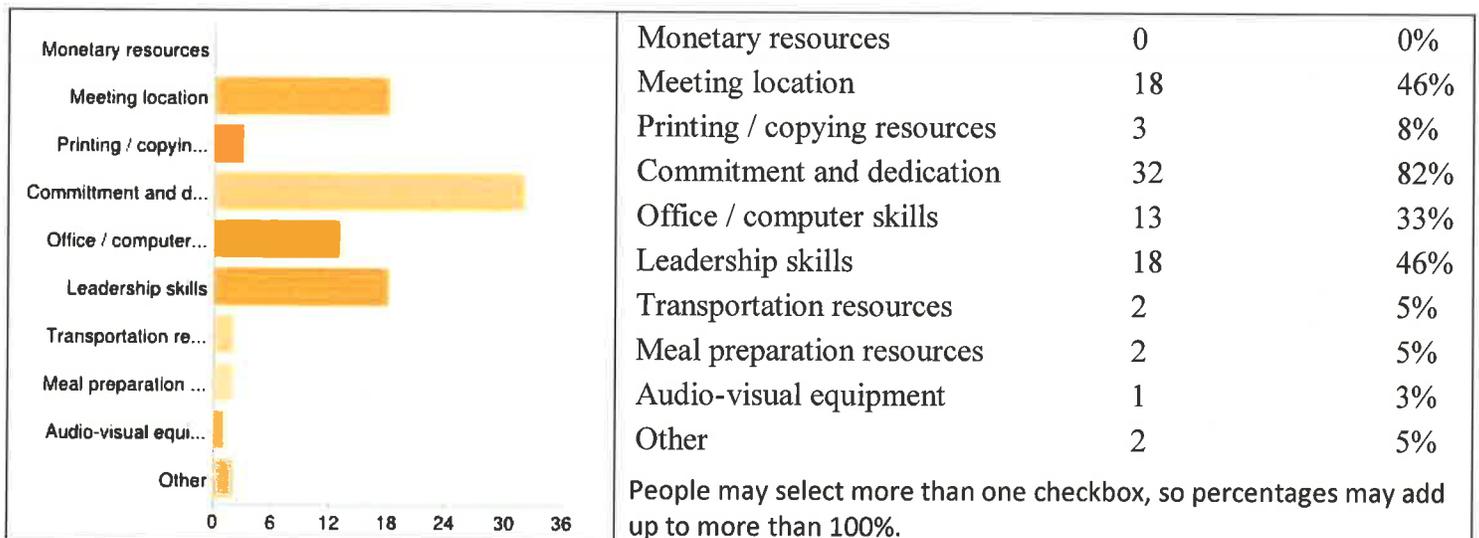
7.) What would you want from the coalition?

This question, seeking to determine what individuals might seek to gain or effect from such a coalition, gave a list of possible outcomes from which respondents could choose any number of goals they felt relevant. Two of the options garnered more than 70% of the responses – that of “identifying relevant issues and desired outcomes”, and that of “offering solutions to decision-makers”. Close behind these two in popularity were identifying or developing new resources, and networking with peers.



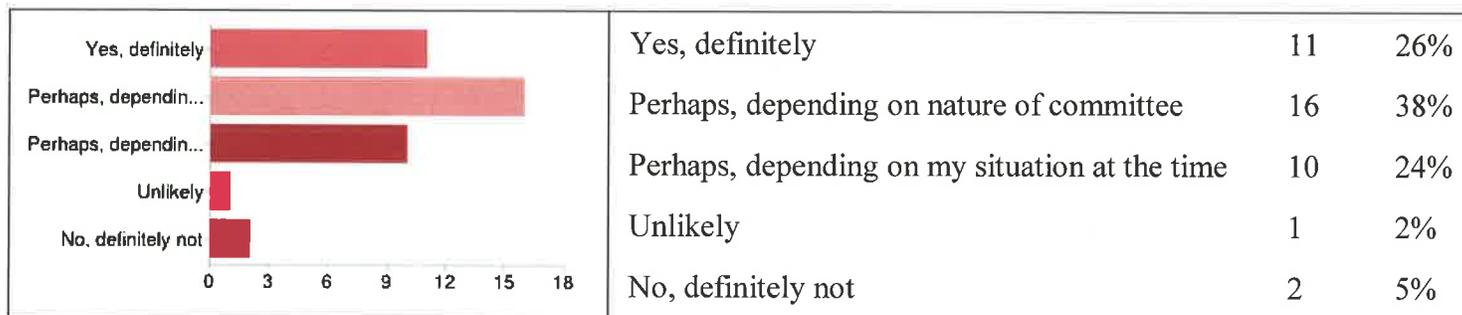
8.) What can you and/or your organization bring to the coalition?

Given the variety of organizations that were surveyed, and the fact that such a coalition will need to be largely self-sufficient, respondents were asked what resources they could bring to the group. Encouraging results found “commitment and dedication” to be the overwhelming top choice. Next, but still noted by nearly half, were “leadership skills” and “meeting location”. Monetary and other tangible resources scored lower, if at all.



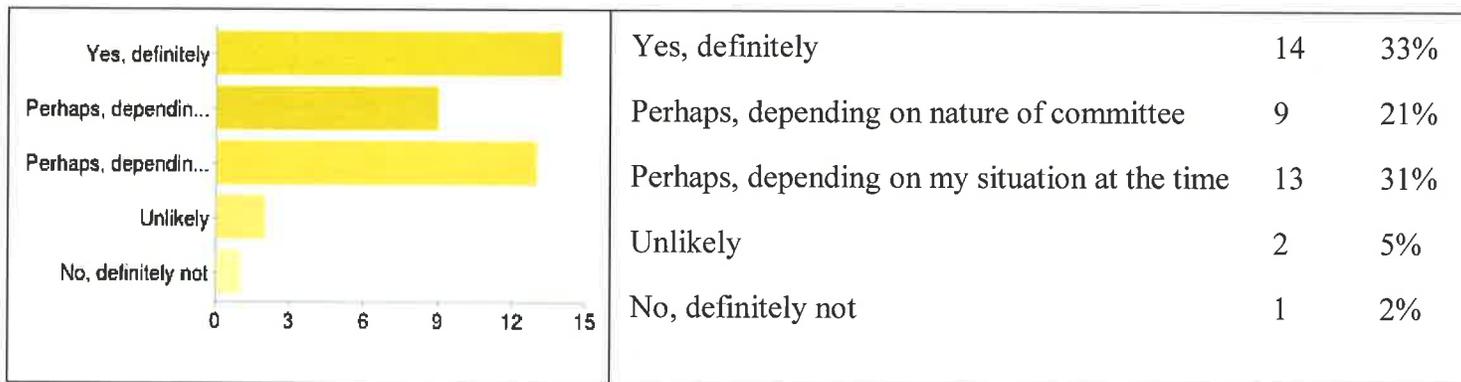
9.) Would you be willing to serve on a coalition committee?

While a large coalition has many benefits, much of the work and direction of a group is provided by smaller committees assigned specific tasks and areas of responsibility. Respondents were asked their interest in getting further involved in a coalition by their willingness to serve on one of these hypothetical groups. One-quarter responded “definitely”, while nearly two-thirds said “perhaps” depending on either the nature of the committee or their own situation at the time.



10.) Would you be willing to serve on the **planning** committee for the annual conference?

One of the concluding objectives under this Strategic Plan goal is for the Coalition to hold an annual county advocacy conference for the aged and physically disabled. This last survey question asked respondents if they were willing to serve on a planning committee relative this annual conference. Volunteer enthusiasm increased to the point where one-third of respondents said they were definitely interested in serving.



11.) Do you have anything to add, e.g. suggestions, ideas, problem areas that should have priority, etc.

Finally, respondents were asked if they had any other feedback or ideas. Twelve individuals made the following comments:

Scott, you did a great job with this survey
I am a Veterans Advocate and serve now as such. Health care has become a issue in Sussex county. Transportation is another issue.
Looking forward to the outcome of all of us working together for the good of the seniors and those with disabilities.
Health Care Reform and how it effects our Senior Population.
Easter Seals holds an annual Caregiver and Respite Conference in the Spring. This year we are broadcasting it live to Easter Seals Georgetown office. It would be great to collaborate on this conference in the future rather than starting from scratch to develop a new conference.

transportation is such an issue in Sussex County, coordinating resources so that everyone knows- lessens time spent trying to assist
This has been needed so everybody will know what is going on with the county to benefit the aging of Sussex County and the Disability Issues.
I hold a Masters in Aging Systems from University of Maryland and have access to regional and national scholars for programs.
Since I serve on the Advisory Committee, I want to help in any way that I can to make this a real success.
The State Office of Volunteerism has started an Inclusion Team
I am very interested in participating in this coalition but not sure how much time I could devote to it as I work full time as Social Services Director at Renaissance and am a full time single parent. I think this is something Sussex County really needs to better address the social, healthcare and mental health needs of our aging and disabled adults. Please keep me informed and I will try to participate as much as my schedule and other responsibilities will permit.
I see our organization as a member of this Coalition rather than just myself as the one who completed the questionnaire. Who would attend meetings and provide Committee support would depend on the current needs of the Committee and availability of GLCV board/Staff members.
We are just getting started ourselves, but I have worked at state and National levels in end of life -hospice issues but would like my support to stay close to home now- n Lewes.

Conclusion:

The approximate 40% response rate to this survey was encouraging. This rate, plus the majority of positive-type responses of people willing to participate in the coalition and component committees indicates a desire for such a group to be established. With this enthusiasm among professionals in such a diverse group of agencies, the coalition would seem likely to start off with a high level of participation and motivation. Establishment of such a coalition would seem a good beginning towards the Advocacy Council's goal of improving the lives of seniors and people with physical disabilities in Sussex County.

Organizations Responding to Survey:

Nanticoke Memorial Hospital	Del Comm of Veterans Affairs	Laurel Senior Center
Amputee Support Group of Delaware	Beebe Medical Center/Gull House	DSAMH
Alzheimer's Assn. Delaware Valley Chapter	Nanticoke Senior Center	Multiple Sclerosis
SCAC member	Delaware Hospice	Easter Seals
CHEER	Grace U.M. Church	Union United Methodist Church
Delaware Technical Community College	Lewes Senior Center	Amputee Support Group of Delaware-Sussex County Chapter
ContactLifeline, Inc	Milford Senior Center	Delaware Hospice
Delaware Hospice	Brandywine Senior Living	Harbor HealthCare And Rehabilitation
BHHA	Milford Senior Center	Serving Hearts
Cadbury at Lewes	Sussex Co. Parkinson Education and Support Group	SHECHINAH EMPOWERMENT CENTER
Nanticoke Memorial Hospital	Atlantic Shores	Sussex RSVP
Greater Lewes Community Village (GLCV)	Heritage at Milford Assisted Living Community	Indian River Senior Center, Inc.
Lofland Park Center @ Genesis HealthCare	Cadia Rehab Renaissance	