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[00:00:06] All right, I will call this meeting of the Board of Supervisors Older Adults Committee meeting to order. We have one item, really, on the agenda, even though it's broken out into two. But before then, this is going to be an interesting overview of how technology is being used to facilitate a public purpose.

[00:00:30] And also, it's really, I think today we're going to see a lot of focus on how to help caregivers and how technology can be used that way. So, Bethann, I'll turn it over to you. Thank you, Supervisor Alcorn.

[00:00:46] Good afternoon. It is nice to see all of you today. My name is Bethann Morgetta, and I'm an assistant program manager with the Fairfax Area Agency on Aging, and I'm delighted to be here with all of you today. When last we met in May of this year, we provided an overview of the initiatives developed during the first year of the implementation of the Shape the Future of Aging Plan.

[00:01:09] As you'll recall, the goal of the Shape the Future of Aging Plan is to act as a North Star, not only internally as we evaluate the needs of our older adult population and their caregivers, but also to inform and support the work of community-based organizations that serve and support the same population.

[00:01:27] We'll use our time together today to highlight and focus in on one of those initiatives that was developed out of the services, SHAPE Committee, the Exploring the Dimensions of Aging Through Virtual Reality Embodied Labs Pilot. This AAA-led initiative ties into the SHAPE recommendation to increase

support and guidance for family caregivers and seeks to build empathy and understanding for lay and professional caregivers in their roles.

[00:01:54] Today, the ANOVA ElderLink team, who has piloted the initiative in the Fairfax community, will demonstrate one of the labs here for a firsthand experience for you all. We'll have time for questions at the end of the presentation. So thank you again, and now I'll invite Kristen Martin to kick us off and move the presentation forward.

[00:02:13] Thank you. Thank you, Beth Ann. Good afternoon, everyone. My name is Kristen Martin, and I'm the manager of case management on the ANOVA ElderLink team. And I'm joined this afternoon by my teammates, Lauren Elsesser, the director of ElderLink, as well as Kathy Akin-Demowo and Demi Warner, who's sitting in the back over there, who are social worker case managers on our team.

[00:02:38] ElderLink is a 30-year-plus nonprofit partnership between the Fairfax Area Agency on Aging and ANOVA that was originally created to address a gap need in services for people whose income fell between making too much to qualify for means-tested services and too little to be able to pay privately for services. ElderLink contracts with the Fairfax Area Agency on Aging to offer affordable case management, sliding fee in-home care services that help people remain independent

[00:03:13] in their homes, free health and wellness workshops, and a variety of free caregiver support services. Through American Rescue Plan Act funding, the Fairfax Area Agency on Aging was able to procure licenses to pilot an Embodied Labs program and contract with ElderLink to implement a new pilot program, the Exploring Dimensions of Aging Through Virtual Reality, which offers web-based training to caregivers of older adults through the Caregiver Support Services umbrella of the contract.

[00:03:46] We are grateful to have this time on your agenda this afternoon to share about this innovative pilot project. Today's presentation will provide an overview of the pilot project, and then Kathy and Demi will present an abbreviated demo of the DEMA lab, which focuses on the effects of Lewy body dementia and Parkinson's disease in older adults.

[00:04:11] Lauren will then highlight the program's impact and participant outcomes thus far through data, and we will then allow time for discussion and Q&A, and then Beth Ann will close us out. Thank you. ElderLink launched Exploring the Dimensions of Aging Through Virtual Reality in early 2024. This project was initiated as a SHAPE the Future of Aging initiative and is specifically tied to the S, or Services for Older Adults and Family Caregivers section

[00:04:46] of SHAPE, as this project increases educational supports and services for those who care for older adults. The mission of this pilot is to help caregivers, professionals, community members, those with a vested interest in the well-being of older adults, to better understand how older adults experience dementia, social isolation, and other challenges to their well-being.

[00:05:12] As a result of the increased understanding and insight gained, participants are empowered to build increased empathy and develop new tools and interventions that they can apply to caring for or interacting with older adults, whether that is through a professional lens or personally based.

[00:05:33] The pilot project helps bridge the gap that may exist between experience and knowledge by providing the opportunity for participants to engage in a more active type of learning experience through the use of an immersive training platform called Embodied Labs. During the lab experience, you are embodying a person who is experiencing a particular challenge to their well-being.

[00:05:57] So everything that you see, everything that you hear on the screen, is through the perspective of that person who's experienced a challenge, thus allowing the participants to take on or embody the featured older adult. Although Embodied Labs offers virtual reality headsets to their customers, they built a web-based immersive platform that allowed for a wider audience to be impacted and ensured a more accessible option for those we serve.

[00:06:27] Additionally, utilizing headsets can be disorienting to some community members, particularly those experiencing cognitive impairment or who have balance concerns. And the web-based platform minimizes this barrier while remaining inclusive.

[00:06:43] Through this pilot project, ElderLink facilitated learning sessions that focus on three topics. The DEMA Lab on Parkinson's Disease and Lewy Body's Dementia. the Elder Safety and Well-Being Lab that focuses on caregiver burnout, intervention and de-escalation techniques for older adults experiencing cognitive decline, and trauma-informed care with a focus on caring for older adults who have been diagnosed with PTSD, and finally the Frank Lab, which focuses on social isolation.

[00:07:16] Each of the virtual sessions is 75 minutes in length and are offered at no charge. The cost of a licensing contract with Embodied Labs was $23,100, which provides us licenses and full access to the Embodied Labs Online Learning Center, as well as access to any new modules that become available.

[00:07:38] While ElderLink focused the pilot on the three mentioned labs, individuals who attend a session facilitated by ElderLink are provisioned a license to engage in on-demand, self-paced learning opportunities. Six additional learning labs are available on the Embodied Labs platform, focusing on the following topics.

[00:08:02] Trans health and LGBT aging, Alzheimer's disease, home health assessments, customer service, macular degeneration and high-frequency hearing loss, and end-of-life conversations. Oxford Languages defines a caregiver as, quote, a family member or paid helper who regularly looks after a child or a sick, elderly, or disabled person, end quote. We recognize that this definition, as well as many others, may contribute to the difficulties that caregivers face at

[00:08:41] identifying within this population. Caregiver training services provided by the Fairfax Area Agency on Aging intend to serve the family caregiver with great appreciation for the fact that neighbors, friends, families, and professionals all provide care for older adults and adults with disabilities, helping people remain in their communities and avoid unnecessary or premature institutionalization. To ensure this pilot program meets the need of Fairfax County community members, we have cast a wide net, informing the community that we intend to support

[00:09:21] family and professional caregivers, neighbors helping neighbors, friends helping friends, as well as those who have a vested interest in the needs of older adults and adults with disabilities. Our program is available to all caregivers residing in or helping to care for someone who lives in Fairfax County or the cities of Falls Church in Fairfax. Participants can register for our sessions online through the county's e-registration system or by calling our ElderLink intake line. Through the DEMA lab, ElderLink has had the opportunity to train human

[00:09:58] service workers, family caregivers, medical professionals, and community members with a vested interest in the needs and well-being of older adults. To help get the word out about this training opportunity, we have the fortune to pull upon various advertising channels in Fairfax County to include

the Golden Gazette, in which the DEMA lab was featured in the June 2024 edition, The Caregiver Newsletter and Text Alert Notification System, the Neighborhood and Community Services

[00:10:32] Common Grounds Newsletter, and then community groups such as Insight Memory Care Center and the Long-Term Care Ombudsman Program. We will now transition into the demonstration portion of today's presentation, where Kathy and Demi will provide you with a preview of the experience that community caregivers receive during our virtual sessions.

[00:10:58] Thank you, Kristen. Again, my name is Kathy. In the back, I have my partner, Demi, presenting the DEMA Lab today. So we're going to be doing Module 1, A Changing Brain and Body, How Symptoms and Wee Body Dementia Affect Daily Life.

[00:11:15] And so before we begin any of our sessions, there's always this, that their hearing and vision may be impacted, and this is going to be intentional. The content may be sensitive or emotional. Reactions might be anticipated. So usually we tell people to take a moment if they need to take a break for self-care during some of these modules.

[00:11:35] We're going to be utilizing the mouse on our end to move everyone's point of view around. You may notice changes in the vision and hearing as you watch this module. Okay. So for module one, early signs of Lewy body dementia.

[00:11:51] In this module, we're going to experience visual disturbances and change in motor functioning. Visualize the changes of the brain that cause Parkinsonian symptoms. Today, we're going to embody Dima. Dima is a Lebanese-American woman who immigrated to America with her husband as a young adult and operated a bakery together for several decades.

[00:12:14] She now lives with her oldest son, his wife, and her two grandchildren. We'll go ahead and get started. And it usually takes twice before it gets started. So, here we go. Dita, I'm making a cut for Mommy.

[00:12:35] See, we're all coming home to open presents for IED. This is my new bike. Can you write, I love you mama and Christmas, on your paper, if I can copy it?

[00:12:57] Get the kid to write it for me. Teta, what's wrong? Aren't you going to write it? Mama, I'll make you a car for you.

[00:13:20] I asked Teta to help, but she's just sitting there. Oh, let's go and see Teta. Mom, how's everything? How are the kids today? Uh, what's spilled here? Is this your juice, Layla? I want to get a little mop, Layla.

[00:13:37] Mom, you must be tired. Why don't you take a break, and I'll help Yusuf with the card. Yusuf, let's do the card. My hands kept freezing like this many more times.

[00:14:05] Something wasn't right. We went to our family doctor to find out what was wrong, but she couldn't say for certain. She told us to monitor my symptoms and come back if anything changed or got worse.

[00:14:24] Normally, the brain sends electrical communication signals between neurons to make muscles move and contract. For me, it was like there was a short circuit in my brain, sending faulty signals to the rest of my body.

[00:14:40] That's why my mind and my hands struggle to coordinate all the steps it takes to complete simple tasks, like eating with a spoon, zipping up a jacket, or writing with a pen.

[00:15:01] The few times my hands do listen, it's always such a relief to get back control. Unfortunately, movement isn't the only thing bothering me lately. Where's the manager?

[00:15:21] Because I need some action taken, and I need it taken right now. What am I supposed to do? I've got seven days coming to my home. Two hours. Because I need some action taken, and I need it taken right now. This is what I call an informational box that pops up throughout the module, so I'll read this one for you.

[00:15:41] Sleepiness is common in early-stage way by dementia. Lack of sleep can contribute to anxiety, disorientation, and increase the risk of falling.

[00:16:12] - I've got seven weeks coming to my home in two hours. - You know what I'm supposed to do? I've got seven weeks coming to my home in two hours. - I've been helping somebody to be back. Let me help you, okay? I'm going to get them all out of you. You and me together. - I've got seven weeks coming to my home in two hours.

[00:16:48] her to keep you company okay how are you mama i'm gonna sit here with you for a little bit okay

[00:17:16] i'm right here mommy why are you in here i don't know i slept through salat what time is it 8 30 we're late okay it's time to start getting ready for school everybody out start getting dressed i'll be there in a minute come on leila mom i need to get yusuf ready for school don't try to get up on

[00:17:50] your own okay i'll be right back to help you salam we all just woke up i fell asleep on the chair Mom looks exhausted.

[00:18:07] I'm sure she was awake most of the night. She's still sitting on the edge of the bed. I really don't think it's a good idea to leave Layla here alone with her. She's not going to be able to handle her all day. No, no, I'm not asking you to come home.

[00:18:24] I'm just, I'm going to take you to the school and come right back. I know you need me there, but I don't think you understand what's going on here, Bassam.

[00:18:45] Salaam. Mama, how are you feeling? Music is an excellent way to reduce anxiety and is often used as a self-regulation tool to prevent overstimulation.

[00:19:03] You were up again last night with those rascally bugs. Hope you were able to get some rest. Well, everybody loves the new Zatar mix you made. We completely ran out of it today. I was thinking maybe we could expand the herb garden back here.

[00:19:22] Maybe to the left of the yard. So you can help us keep up with the demand. What is that dog doing here? What do you see, mom? Common visual hallucinations and Lewy body dementia include small furry animals and little people and our children.

[00:19:42] A dog? Well, we definitely don't have a dog. Mama, what do you think about the idea of Isabel taking a break from work to help you with things at home?

[00:20:01] The kids are demanding more, and some days you are really exhausted. Mama, I know you like me to ask before offering help, but I really think it's important that someone is here with you if you ever

need a hand getting things done or standing up like you did this morning.

[00:20:17] And don't worry, the guys at the shop definitely won't mind picking up a few more hours while Isabel takes some time off. Not a problem at all. Here, let's eat. Okay, so that is the end of module one. The first thing we'll see on this slide are reflection questions. They're great questions for you to reflect on while watching the module, but due to time constraints, we'll go ahead and move forward. And the next slide has early signs of

[00:20:52] Lewy body dementia and signs that Dima demonstrated through module one. We'll go ahead and move forward. Okay, we'll go ahead and move forward to module two with Demi. Thank you, Kathy. So we are going to move into module two, which is progression of Lewy body dementia. In this module, we will experience visual and auditory hallucinations as we embody Dima. We will learn coping skills that preserve her dignity and reduce anxiety and attend a doctor's appointment with her family. We will

[00:21:31] continue to embody Dima and follow her family as they try to handle symptoms from her diagnosis of Lewy body dementia. We'll continue moving the mouse around on our end. Why are we stopping mommy?

[00:21:58] mommy's feeling a little sick i'm just gonna get out of the car for a minute don't make too much noise mom i become extremely agitated when i don't understand what is going on unexpected moments can overwhelm the signals that travel throughout my brain getting harder for me to process too

[00:22:34] many things at once or adjust to new stressful situations it's especially hard when someone changes my routine repeating familiar patterns like taking the same route to the bakery helps a lot it's much easier for me to focus when everything is calm and predictable we're still gonna go to the bakery i'm just stopping for a minute to get some air okay here's my phone find

[00:23:08] a game mom would you like your earplugs people with Lewy body dementia often thrive on routine and predictability unfamiliar environments may cause distress self-regulation strategies like earplugs or soothing music support well-being take a moment to breathe after i get some air

[00:23:42] i promise we will go directly to the bakery just like we planned get that this is over i'm gonna

[00:24:05] turn it okay you have minutes not give it back yusuf i need you to be patient with your sister and be a big boy right now come on what's going on what's the problem i placed this order three

[00:24:41] weeks ago and you have a record of it anywhere what am i supposed to do i've got 70 guests It's coming to my home in less than two hours. Where's the manager? I need someone to take some action right now. He didn't let me touch any blocks. Sam, yes. He just let me have these blocks.

[00:24:58] This is the last time I'm going to talk to you. I can't believe it. The first time I'm going to talk to you. I put them aside, and I am going to follow through. But he has all of them, and I just have left. Do you think you can give us a lot of take-off? But I'm using business. I'll try.

[00:25:14] You understand my perspective, right? Look, I mean, it's not my fault that my sister didn't drop me. I'm going to share one car with the car. I have all of them. She's in the head and I'm late to work. How is that my problem? I put up signs. I'm going to get down to here. I don't know who you are.

[00:25:31] Get out of this house. Now.

[00:25:41] Yusuf, get away from there. Both of you, get away from the sharp pieces. Up to 80% of people with blue-browdy dementia will experience visual hallucination. When perceived as threats, the person may react verbally or physically.

[00:25:57] With reduced ability to understand the sensory environment, chaos and overstimulation often trigger anxiety and agitation. Sit this under more control and say I don't know who you are. She doesn't remember everything all the time, Yusuf.

[00:26:12] I need you to both, both of you go to your rooms. Mom, it's me, Isabel. I think I did something wrong. Salaam, please come home.

[00:26:29] Mom is having an episode and I need your help. She just tried to attack us. I can't remember when, but Dr. Hilton said this might happen.

[00:26:48] that my hallucinations, concentration, and movement would get worse. She called it Lewy body dementia, a degenerative brain disease where Lewy bodies form inside neurons and cause them to die.

[00:27:05] The location of the affected neurons impacts the symptoms we see. Lewy body dementia exhibits these symptoms based on four main location clusters. The behavioral cluster, which results in delusions and hallucinations.

[00:27:24] The cognitive cluster, which leads to difficulty with planning, problem-solving, and interpreting information. The autonomic cluster, which causes incontinence, dizziness, and fainting.

[00:27:41] And the motor cluster, which affects a person's balance and ability to move. Movement disorders, like stiffness or tremors and Lewy body dementia, are sometimes confused with Parkinson's disease, because both involve Lewy body formations.

[00:28:02] Usually, the location of Lewy bodies in Parkinson's begins in the motor regions and spreads outward over the course of many years. While the Lewy bodies in Lewy body dementia may begin in the behavioral or cognitive areas and eventually spread to the motor and autonomic areas where Parkinsonian symptoms combined with dizziness and fainting put someone like me at a high risk of falling.

[00:28:34] Mama? Mama, are you okay? What happened?

[00:28:50] Isabel? Mama? Mama, where are you? Where's Mama? Massam! Oh my god. Get up! What happened? I don't know. I was trying to give her some space after I called you.

[00:29:06] She must have tried to walk out here on her own and tripped over the court. When I found her, she was like this. Mama, you're gonna be okay. We're taking you to the hospital. Try not to move. Yes, my mother has fallen. We need an ambulance.

[00:29:22] Get up, I can hold your hand. Everyone. Dr. Helton, so great to see you again. How's everyone doing this week? Great, great.

[00:29:39] Dima, it is so nice to see you up and alert. I just wanted to follow up a little bit about what's been going on at home before Dima heads into her physical therapy session. Okay. I was just reviewing my notes from our last visit, and it appears your mother's physical function has worsened, as evidenced from her fall and hip fracture two weeks ago.

[00:30:01] You also mentioned her delusions and hallucinations have become more frequent. All of this points to increased inflammation in the brain. It would be a good time to think about the months ahead. Have you had a chance to research options?

[00:30:18] Options? Bissam, Dima really needs 24-hour care at this point. The Lewy body dementia has gotten progressively worse. Do you, Isabel, have any reservations or concerns about caring for both a newborn and your mother at the same time?

[00:30:35] Oh, I'm not worried about it. My new sign-up has been helping this past month for a few hours a day. Have you considered long-term care? Long-term care? No way. My mother sacrificed her entire life providing for her children.

[00:30:52] She's raised and cared for me since I was a child. How can I turn my back on her in her time of need? I'm not leaving her with strangers, doc. As your mother's medical doctor, I would recommend you carefully consider the changes that are taking place. Isabel will be having a baby in just a few weeks. You're both doing the best you can as family caregivers, but caregivers need help too. In fact, I would suggest reaching out to a home care agency in your area and soliciting the services of a professional caregiver while you're trying to figure out what's best for your mother

[00:31:28] in the long term. Lassam, they took care of you because they had the means and the ability to. We can't afford to give her that level of care at home on our own anymore, can we? What if she attacks one of the children again? Or wanders off down the street? Or falls in the middle of the night? There's no shame or blame. You can still give her good care. It may just mean hiring someone. We're finding a really good care community that can meet her needs 24 hours a day.

[00:32:04] I can't talk about this right now. All right, that was the end of Module 2. Just like Module 1, we have reflection questions, but we will move forward due to time. This slide here details tips for supporting people living with anxiety from Lewy body dementia, as well as signs that

[00:32:38] it may be time to be considered either in-home paid care or seeking long-term care. We'll move on to module three, which Kathy will give us an overview on. Thank you. So for module three, we won't be able to watch it today. But in this module, we continue to embody DEMA moving into a long-term care facility while adjusting to a conjugate living environment. She's going to receive care and support from facility staff. And that's just, we're going to skip this module. But

[00:33:17] overall DEMA moves to a long-term care facility is positive for both DEMA and her family and hopefully you were able to see some of our presentation even though it was brief and experience what it was embodying DEMA so we'll go ahead and pass it over to Lauren to conclude thank you thank you Kathy and Demi for leading us through the DEMA lab we hope this offered you with a taste of what our participants experience through this work My name is Lauren Elsesser. I'm the director of the ANOVA ElderLink program. I'm delighted to

[00:33:51] continue today's presentation with a review of program outcomes. As of September 2024, 193 people in our area have been engaged with the Exploring the Dimensions of Aging pilot project, both through facilitated community sessions, as well as pilot demonstrations that have been offered with groups such as the ones that you see above. Connections Corner with Volunteer Solutions, the Coordinating Council on Aging and Adults with Disabilities, or CAD, the Fairfax Area Commission on Aging, the Fairfax 50-plus Community Ambassadors, as well as a unique opportunity that

[00:34:31] we recently had to provide a demonstration for the new Deputy Commissioner with the Virginia Department of Aging and Rehabilitative Services, Kirsten Ware. From April 2024 through September 2024, as mentioned, a total of 193 participants have been served through this pilot. Of those served, 66% of that population represents the general public and caregivers. It is also important that this pilot equips public safety workers and other pillars of our community, educational

[00:35:06] opportunities to build understanding and empathy towards the challenges older adults commonly face so they can most effectively serve those who call on them for support. To that end, we've also taken steps to engage with fire and rescue and the police department to offer training sessions and opportunities for self-paced learning for their teams. We recognize and appreciate the importance of making these training opportunities available to our first responders in an effort to support greater understanding and empathy towards some of the challenges that older adults experience.

[00:35:41] We look forward to offering facilitated sessions to these groups and provisioning them with licenses to engage in self-paced on-demand learning available through the Embodied Labs platform, which I will share more about in a moment. Now I'd like to turn our attention to some program data to further expand on our outcomes. Each trainee is asked to complete both a pre- and post-survey. This includes those who attended facilitated sessions as well as those who engage in the self-paced learning opportunities with embodied labs, following their participation

[00:36:15] with an ElderLink facilitated session. Feedback from participants is critical to measuring the effectiveness of any intervention. As this is a pilot program, we have been intentional with the questions posed via pre- and post-surveys to collect both qualitative and quantitative feedback from our trainees. The following participant outcomes have been identified. Participants experiencing the DEMA lab have reported, have experienced a 38 percent increase in their confidence at managing challenging behaviors related to Parkinson's disease and Lewy body

[00:36:51] dementia and a 31 percent increase in their confidence at being able to positively impact the quality of life of someone experiencing late stage Parkinson's disease and Lewy body dementia. Additionally, 100% of trainees who experience the DEMA lab are likely or very likely to recommend this program to others based on their experience. I am especially delighted to share that in fact 100% of the population served through this pilot program in every area across all of the labs that we facilitate on would recommend this program to others based on their experience with

[00:37:30] We've also identified patterns where several caregivers have attended sessions multiple times. We attribute this to the insight trainees gain as they engage in the facilitated debrief following each of the three modules and the sessions that we facilitate.

[00:37:47] Each session is truly unique because of the fresh perspectives shared by the caregivers who join us each time. From April 2024 to September 2024, 110 participants have completed a pre-survey prior to attending an ElderLink facilitated session, and 43 have completed both pre- and post-assessment surveys.

[00:38:11] This represents an overall response rate of 39%. Throughout this project, we have done the following to adjust our internal workflow to improve our attendance and survey completion rates. We have removed maximum registration caps to ensure that everyone who intends to attend or intends to attend a session with us is able to.

[00:38:33] This has improved the number of participants who join each of the sessions we offer each month. Additionally, we've begun asking participants to complete pre- and post-surveys both during the first five minutes of the session and during the last five minutes of the session so that we can ensure that there's earmarked time to receive their feedback.

[00:38:52] our review of the program's outcomes and impact, the following qualitative feedback regarding how the DEMA lab has made a positive impact on our participants includes literally seeing the problems through the eyes of the person experiencing symptoms was highly effective. I learned more about Lewy body dementia and how to care for elders, and I experienced what the person with dementia would have experienced and became more understanding about their behavior. These participants' feedback regarding their experience with the DEMA lab suggests that the virtual reality experience, educational content, and engaging debrief discussions offer a highly

[00:39:31] effective training environment for caregivers to connect, learn, grow their toolkits as they navigate their caregiving journey. The Fairfax Area Agency on Aging has received excellent feedback from the community regarding this program, and I'm pleased to share that we will continue to offer this program through the next program year through the use of grant funding that's specifically allocated for caregiver support. As mentioned, ElderLink facilitates three community sessions each month. On your screen, you'll see that there's a snapshot of the sessions that we have on the schedule for October. In addition, ElderLink welcomes inquiries

[00:40:10] from community groups and are glad to coordinate closed sessions for organizations. As we come to a close, I'd like to conclude with a couple of action items we've requested the board's support with. We seek the board's guidance regarding community members and groups who will benefit from this program, and we request that you include this information in your newsletters so that we can further expand on our community outreach efforts and impact many more caregivers

[00:40:42] through this work. I want to say thank you to the ElderLink team for this excellent presentation this afternoon, this work is truly critical to supporting lay and professional caregivers in their roles in developing insight and empathy for those who support and continues to help us build an excellent community where everyone can age well.

[00:41:08] I'd also like to thank both Supervisor Elkhorn as Chair of the Older Adults Committee and Supervisor Palchuk as Vice Chair, and a special thank you to our Commission on Aging for being here and for their work on the Shape the Plan, excuse me, Shape the Future of Aging Plan. So we look forward to meeting with you again in June to provide our next annual report out on the Shape the Future of Aging Plan.

[00:41:31] And thank you again for your time today. We welcome your discussion and questions. Thank you very much, Bethann. Thank you also to the team. That was a really interesting, thorough demonstration. I think it definitely provided insights into how empathy and understanding is built for caregivers, but frankly for all of us who watch that.

[00:41:54] So thank you for sharing that with us. And I think it really does just show kind of the beginning of how technology is advancing in the training area and how this can be used in the future in all sorts of fields and applications.

[00:42:13] So – and thank you for mentioning the – this was really just one little piece of the Shape the Future of Aging plan and initiative. This is – we got briefed on that at the last Older Adults Committee meeting, but this shows how these recommendations and these actions are moving out into the community on many different levels.

[00:42:38] So thank you very much. And thank you for recognizing the Commission on Aging. Kathy Holt is chair. Cole is here as the chair. And thank you for bringing other commissioners with you today. We appreciate all the work you have done on the range of SHAPE activities.

[00:42:58] This is a great example of where this is – it's becoming real now. So thank you. Ah, of course. Of course. All right. Well, thank you all for being here as well.

[00:43:13] Turn it over to the chairman for any comments, questions. I don't have anything to add. I think this has been a good presentation, I guess. I am going to the link that's on here, and I see what's coming up. I'm just trying to walk through someone, if we're going to share this information, what they're going to see.

[00:43:32] And when I go to the online registration, it has a whole mountain of things to register for. So I'm just curious to use this simulation that you just mentioned. Do you have to register to go through one of these time sessions that's on here?

[00:43:51] Or can this be done on your own, on your own time, and not be part of one of these registrations? Yes, thank you for that question. So these sessions do require, the facilitated sessions that we were talking about and gave you a taste for today, They do require prior registration, and the reason for that is that we're meeting virtually.

[00:44:14] We have to know who we need to distribute the link to, and so those are available for registration on the county's e-registration website. On there, you'll note that there are many services and other workshops that ElderLink facilitates.

[00:44:31] However, we do have the running list at a specific link for all of the different Embodied Labs workshops that are coming up. And as a matter of fact, we have everything listed between now through the end of this calendar year that's already posted and available for the community to register for. As far as self-paced on-demand learning, there is certainly a huge value to that and component of that to this work.

[00:44:59] So after a community caregiver attends one of our facilitated sessions, they will be offered the opportunity to go on to Embodied Labs and actually register for their own account. And that's a very easy process that just requires them creating a password.

[00:45:19] We utilize the email that they used in their registration as their login, and they have the ability very easily to create an account at which point that unlocks not only the content for the three labs that we facilitate on each month, but the other six labs with the content that Kristen had shared earlier today. So there's great opportunity for on-demand self-paced learning, and that's a critical component to this pilot project.

[00:45:47] But just so I'm clear, you have to register for one of them, get in the system, and is that because of the licensing agreement to use the product? So the reason why we have structured it that way is because there is a consent of sorts that's being provided to us to engage with us with Embodied Labs and through this pilot program.

[00:46:12] So allowing individuals from their own volition to voluntarily go on, sign up to engage with us in this way, attend this session, then segues into our ability to further engage them by offering them the opportunity to create that license and engage in that ongoing learning. Okay, I appreciate that. I didn't want to belabor that, but I think, you know, making this as easy as possible obviously is critical for people to be able to use it, and I do know that there would be a lot, probably a lot more people who could take this if it wasn't a program schedule. I get the benefit of the

[00:46:47] facilitation piece of it and going through the facilitated process, but I can think a lot of people who would get value just from viewing what we just did on their own and walking themselves through on their own time to do that, especially given all the demands that some of the people listed here as our target audience have. And so I appreciate that explanation and that that can still happen. Yeah, absolutely. And we would also welcome inquiries from the community if it's a barrier to attend a virtual session with us, or if that's not something that is comfortable for our community caregivers, please do feel free to reach out to us through our intake

[00:47:26] line, our ElderLink intake line. The contact information is listed here in the presentation for how to reach us. With that consent, we would be delighted to assign a license and allow that that individual to benefit from this content without having to um come to a facilitated session with us okay great thank you thank you all right very good thank you uh mr chairman supervisor paul check then supervisor jimenez thank you mr chairman uh thank you so much for the presentation i think i have a couple of beginner questions on this one um number one

[00:48:02] is, does this also, because I think it's stated as being virtual reality, is it the kind that also goes like with a virtual reality headset, thank you, or is it only on a computer? So there are virtual reality headsets that Embodied Labs offers through their packages. However, that is a, we at the Fairfax Area Agency on Aging made the decision to forego the virtual reality headsets in favor for the web-based immersive training platform with the idea that it would ensure

[00:48:39] a wider reach to audience and accessibility, as well as for the considerations that exist with potential disorientation that could be experienced when actually wearing a headset. So while- It's not an option at all. It's not an option through the work that we're doing, although it is an option available through Embodied Labs.

[00:49:02] Thank you. My other question is on the outreach. I saw a lot of newsletters and the outcomes listed at some agencies. I didn't see our senior centers or our neighborhood community services listed on here. I understand you're working with DFS, but we had a meeting earlier about doing more of that targeted outreach.

[00:49:17] Has that already happened, or is that in the works? We definitely have opportunities in this next year. We're really excited that we have the opportunity to carry this pilot work forward in the upcoming year. And I think that those recommendations are exactly what we're seeking to ensure that we are appropriately engaging with Fairfax County departments as well as community organizations.

[00:49:44] There's definitely great impact with senior centers and adult day health care centers for engagement and for the caregivers that they support through their work to benefit from this program. Thank you. Thank you. All right. Supervisor Jimenez, then Supervisor Lask.

[00:50:00] Thank you, Mr. Chair. And thank you for the presentation. Obviously, a really critical, important issue that hopefully none of us have to deal with, but eventually probably will know someone in our family or in our friend's family who has to deal with this issue.

[00:50:18] Really good tools. My concern, I think, and I'm wondering how you're thinking through it, is you don't really think about these things until it happens to you, right? So how can we get more of the public to actually watch some of these learn about some of these materials and resources beforehand right because by the time it happens you've already entered that period of being scared and frightened and worried sad all those emotions that come of this it's kind of like and then you think back oh these tools would have been great to have beforehand right so it's kind of how can we place this in the hands of folks before

[00:50:53] this this happens and you know you mentioned that 100 there are 193 uh participants so far Obviously, it's a good start, but I think that number could be much, much higher. And so maybe if we start thinking of different avenues or ways we can approach giving this information out or having folks watch this, perhaps going to senior senators, perhaps libraries, like having events at libraries, having events after faith-based events.

[00:51:26] But, you know, great information. love to see those numbers go higher and obviously we all want to make sure that this goes into the right hands and it's more of a preventative kind of let's give this information out beforehand until before it happens and before you go through all those emotions but thank you and really really good stuff for doing thank you thank you so much for uh that that feedback and your your input i think early engagement is is a is a critical critical component to working with older adults um that's far and wide and um that we're very well aware is a challenge um nobody really wants

[00:52:01] to face um end of life um nobody wants to think of their older loved one getting to a place where they're requiring um so much assistance um from others um and so we we definitely are are aware and i think one of the of those um those barriers that inherently exist um in our own minds uh even And one of the unique opportunities with this pilot project, one of the things that I was most excited about when we were initially building the pilot project is the fact that this offers us the opportunity to train professionals.

[00:52:34] So it's not only a tool for neighbors, for people who care about older adults' needs and would just be interested in the educational content and family caregivers, but professional caregivers are professionals in the industry as well.

[00:52:52] And as you all are so well aware, word of mouth and having community champions that can advocate and help to spread the word about this work is a critical component to impacting the community. And so that's something that we really look forward to capitalizing on more in this upcoming year to make sure that our impact continues to be significant and even more significant in the upcoming year.

[00:53:18] Yeah, and thank you for that. And I think that's really for all of us, you know, on this board, that's where our appointees become so important. I know Irv's here from Mason District, and having, you know, other folks also be part of that conversation and champion these kind of initiatives is really helpful.

[00:53:34] So thank you to the commission, Irv, and again, thank you to all of you. All right, Supervisor Lusk and Supervisor Stewart. Thank you, Mr. Chairman. I'll just say that as a person who's had this happen

in their family and to not have this tool, And I'll be frank in saying that when it happens and you're not aware, it's a little bit of stumbling and really trying to figure out what's happening.

[00:53:59] And I think this exercise today would be extraordinarily helpful for so many people to be able to, as Supervisor Alcorn said, be more empathetic and really understanding of the situation that our relatives and loved ones find themselves in.

[00:54:20] And so I want to do everything I can to help promote this. I want to make sure that we do that through my office. I'm sure my colleagues are definitely there as well. I guess the question I have, kind of piggybacking on what Supervisor Jimenez has said, is how do we kind of package it in a way that would encourage people to look at it sooner?

[00:54:43] So maybe there's a way that we can promote this information and these materials and that it might require us to, how do I say this, make it engaging in some way. And I think social media and then electronic versions, but I think the information and the imagery that we use is going to be so important in getting folks to sign up and watch. And I think it's going to be very impactful and powerful for those to know in advance. But then for those that are in the

[00:55:19] situation. It's going to give them an opportunity to better understand the situation that their loved one is in as well. So I just wanted to say I'm delighted that you guys have put this together. I'm delighted that you brought this forward today and want to do whatever I can to help promote it. So thank you. Okay, Supervisor Stewart. Thank you, Mr. Chairman. And it's obviously experiencing what most of us don't really have any sense of is always helpful to our empathy and to our understanding and maybe more importantly even our ability to respond

[00:55:58] when to cues that aren't obvious you know somebody can't speak well or can't even motion well but you can read their face or body language and respond I mean those are all I think powerful opportunities that this can help folks too and the core issue is how do we get more folks to connect with it i think it's it'll be difficult because our time is our most valuable piece of this and how do we have people at least step into this realm and and see how they can benefit from it so i'm looking for ways to snippets or something else that i can put in our newsletter

[00:56:37] that somebody might click on that would within a matter of a few minutes because that's probably all i have right is two or three minutes for them to get a sense of this and this side i want to i to see it and look at it further. So I'm looking for some way of packaging to use a survival loss expression to get folks to see and connect with how this could be helpful to them and in their lives. The other part of this is it really is so much more than family and friends. It's also

[00:57:12] the professionals. It's the people in our community, our neighbors. And I think of the House of Worship are maybe a major source of folks who can help spread this word and even connect to their communities and, frankly, can include as part of their own connection presentations with their communities.

[00:57:37] So anything more you can do along those lines, I'm looking for. I think the power of this education and information to help people realize that even folks who have challenges can have happy, fulfilled lives, but need a little bit more help, a little bit more understanding to get there. And I think, again, seeing it through somebody else's eyes and developing more empathy and understanding is a key part of that. So let us know. I'm looking forward to something more that we can do with that. And if we

need to contact our houses of worship, I know Mount Vernon Home is one of the groups in our area. I don't know how much, how the outreach is occurring, but looking really

[00:58:16] for all those kind of things and happy to be part of that process. Thank you. Thank you. All right. very good. Well, thank you again for the presentation. Thank you for taking the feedback. You know, we want to thank my colleagues for their feedback and suggestions. You know, if you show this board something like that, you're going to hear how it could be made better. I mean, so it's definitely, you know, something I think that's good for everybody. So I appreciate, you know, anything you can do along the line suggested. And if there's no other business before the committee. We are adjourned.

