

## Aging, Disability, and Veterans Services Division Aging Services Advisory Council (ASAC) In Person Meeting / Zoom optional

Tuesday, June 18 2024, 11:00 am - 1:00 pm 209 SW 4th Ave, Portland, OR 97204 Pine Room

## **Zoom Info:**

https://multco-us.zoom.us/s/96157906854?pwd=eWNOclg4aDU3MkN4NHJvQUNLRTc4Zz09#success

Meeting ID: 961 5790 6854 Passcode: ASAC2024!

Time	Agenda Item	Purp	ose	Lead	
11:00 am	<ul> <li>Meeting Room Open</li> <li>Coffee</li> <li>Policies and Procedures Review and Acknowledgments</li> </ul>		Fellowship, Connection, and Community building	AII	
11:10	Zoom Meeting Open - Accessibility, Connect and Connection Check!	ivity	Meeting access	ADVSD Staff	
Attendees: (In Person)Irma Jimenez, Marina Khalina, Raquel Barajas, Lauren Moran, Brandy Penner, Scott Moore, Dave Daley, Anne Lindsay, Kristin Riley, Jason Normand, James Shamrell (Burnside Bridge) (Virtual) Lisa Strader (PBOT), Barb Rainish (DSAC), Ryan Rucker (Burnside Bridge) Beth Britell (Burnside Bridge)					
11:10 5 min	Welcome		Meeting access and shared understanding	Marina Khalina, Sr. Manager - Community Services	
11:15 5 mins	Land and labor acknowledgements		Honoring community and addressing ongoing systems of oppression	Marina	
11:20 5 mins	Meeting Goals and Agenda Review  • Anything Missing?		Agree on how to spend this time together	Marina	
11:25 30 mins	Multnomah County and the Earthquake Read Burnside Bridge Project  • We would like to update the groups of the bridge cross section and connection	n	To request participation from the advisory council	Cassie Davies and Burnside Bridge Project Team	

Time	Agenda Item	Purpose		Lead
	from the bridge to nearby t facilities and get their feedl routes during construction.	oack on detour	in the project and offer feedback	

Contact: BurnsideBridge@multco.us

· ·	Break - Get Lunch, Take a Break, Stretch, Connect!	Rest and Refresh	All
12:15 pm (35 Minutes)	Area Plan - Priority Populations (Please see attached list)	Feedback from Members and ranking	Marina / All

**Brandy P. - Supports I&R and Health Promotion** 

Scott M. - Mentions about the budget, and the prioritization helping to inform where the budget is allocated?

Dave D. - Could we consider the funding that providers have appart/outside from the County provided funding?

Anne L. - Map and population map distribution, and where are the County provider populations and other organizations overlap with these.

Dave D. - Income related (financial), health related, and community underserved based on cultural factors.

Marina - Prioritization for Focus Areas, and are we missing anything on the priority populations

Scott - Populations of color instead of communities of color

12:50 pm (10 Minutes)	Public Testimony Closing  How did the meeting go? Thank you for your time and advocacy		Marina
1:00 pm	Adjourn!	Al	I

**Upcoming Meetings:** 

Time Agenda Item Purpose Lead

Common acronyms used in ASAC Meetings - While we strive to avoid acronyms and jargon here are some you may hear in ASAC meetings

- ADVSD Aging, Disability and Veterans Services Division a division of Multnomah County Department of Human Services
- APD Aging and People with Disabilities a work unit of the Oregon Department of Human Services
- BIPOC Black, Indigenous, and other People of Color
- DCHS Department of County Human Services
- DSAC Disability Services Advisory Council
- LTSS Long Term Services and Supports
- NEMT Non-Emergent Medical Transportation
- O4AD Oregon Association of Area Agencies on Aging and Disabilities
- ODHS Oregon Department of Human Services (also called DHS)
- OPI and OPI-M Oregon Project Independence and Oregoin Project Independence -Medicaid

Prioritization and is anything missing?

## Focus Areas for service related goals:

\*Required Focus Areas from Area Plan instructions

- \*Information and Referral (ADRC)
- \*Nutrition
- \*Health Promotion
- \*Family/Unpaid Caregiver Support
- \*Legal Assistance and Elder Rights Protection
- \*Older Native Americans
- Transportation

## Priority populations\* of older adults:

\*Populations/groups/identities/experiences that may cause people to have greater need and/or additional barriers to access, utilize, and benefit from services due to past and/or current policies and practices of systemic exclusion and institutional repression.

- Native Americans
- Low-income
- Communities of Color
- Multilingual with limited English proficiency
- At risk for placement in a nursing facility (due to a restricted ability to perform normal/routine daily tasks and/or threatened ability to live independently)
- LGBTQIA2S+ (Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual, and Two-spirit)

Time Agenda Item Purpose Lead

- Immigrant communities
- Physical & mental disabilities
- Chronic health conditions (including people living with HIV and AIDS) HIV status & chronic conditions
- Housing instability
- Food insecurity
- Veterans