



Aging, Disability, and Veterans Services Division
Disability Services Advisory Council (DSAC)
 Wednesday, May 20, 2026, 10:00 am – 12:00 pm
 Five Oak Building, 209 SW 4th Ave, Portland, OR 97204
Oak Room, 1st floor

Zoom link: <https://multco-us.zoom.us/j/94294725561?pwd=8ZEEiVfu9sCg74q4yUeayQEF5HVkI2.1>

Meeting ID: 942 9472 5561 – Passcode: Sac.2025

Time	Agenda Item	Lead
Attendees:	Jesse Guardipee, Gail Skenandore, Barb. Rainish, Alena Guggemos (V), T.J Anderson (V), Timothy Gage (V), Carol Snell (V)	
Members		
ADVSD	Cheri Becerra, Sarah Feldman, Deric Anderson, Irma Jimenez, Charmaine Kinney, Julia Love, Jeremy Nguyen, Pam Saepharn, Tatyana Gannotskiy	
Guests		
10:00	Meeting open for sign on	All
(15 min)	Agenda review – <i>call for public comment</i> Opening – Zoom review and accessibility Land acknowledgment Introductions – Please share your name and pronouns <i>Prompt: What is your favorite way to spend a sunny summer day?</i>	
10:15 am (45 min)	Homecare Worker Program <ul style="list-style-type: none"> - Pam presented on the ADVSD Homecare Worker program, which is located out of the East County location. She provided an overview of the program and topics. OAR 411-031 is the rule that covers homecare workers and includes the rules they follow. The consumer is the employer and the homecare worker is the employee. The Oregon Homecare Commission defines qualifications, provides a statewide registry, provides training opportunities, and serves as the employer of record. The customer relations website provides many of their resources. - Sarah asked about the Homecare Commission and their recruitment. - Pam said they work on a lot of recruitment. - Barb. asked if homecare workers are independent contractors and if they receive a 1099. - Pam said they get a W2 as DCHS is the place of work. 	Pamela Saepharn

She also shared that as of May 2026, they have over 6,000 approved workers. In 2025, they had an average of 236 applications a month and 2,812 renewed applications last year. They receive over 700 contacts (phone/emails) a month.

- Sarah asked about physical requirements and the average age of homecare workers.
- Pam said the needs vary depending on the needs of the consumer. They do not screen for physical readiness, as long as they complete the application and training, although workers need to be at least 18 years old.
- Barb. asked since the relationship is between the worker and consumer - does the consumer get to hire the worker and is it their decision. Is there help with the worker replacement if needed.
- Pam said the employer resource connection can help with managing the worker and consumer relationship.
- Barb. asked if homecare workers start the application process all over again when they need to renew their license.
- Pam said they need to submit a new application, although the training is not required if it's within six months. Renewal applicants also need to complete continuing education.
- Jesse said he knows someone who is not certified, but has experience and knows this application process. He said the work can be hard.
- Pam said the HCW unit receives renewals, conducts background checks, and updates information as needed. They also work with incident reports and rule violations. The voucher team is a separate team that approves payments, handles time entry issues, and issues check replacements.
- Barb. asked if the process of signing up is through the voucher team.
- Pam said there is enrollment, but the voucher team handles payments.
- Tatyana said the term "voucher" is outdated. The team processes time and payment authorization.
- Barb. recommended that statewide, they do without that since the client has likely gone through the section eight process. She asked if it is done through Laserfiche.
- Pam said laserfiche is for holding documents, although

	<p>payments are issued through the state database.</p> <ul style="list-style-type: none"> - Timothy asked about data collection and background checks for equity. Timothy also asked about tracking data for intersex and what the protocol is for tracking Homeworkers and clients in regards to intersexuality. - Pam said they don't collect that information on the application, but it is optional for them to provide. She also shared the application process through the navigator tool, the application, and agreement document. The application can be translated and applicants must provide proper documentation. The I-9 form, booklet, and W-4 form are also part of the process. While the application is processing, applicants should go through orientation. Orientation is an in person class and can be translated. Applicants must also pass an assessment and background check process. After all the steps have been completed and approved, applicants will receive an approval letter and a provider number. They have a required training through the Carewell website that must be completed within 60 days. - Barb. asked if tracking at the end of each junction is being done to see the number of applications closing out. - Pam said they track the number they close, but not at each junction. - Barb. said she is sure that they close many applications because the process is long and complex. She also asked what is involved in the new worker training. - Pam said the new worker training is a webinar and courses 1 & 2 are self-paced. - Barb. asked if there is a competency assessment at the end of those. - Pam said yes. 	
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Next Steps and Action Items

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11:00	BREAK
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11:15 (10 min)	<p>Homecare Worker Program (continued)</p> <ul style="list-style-type: none"> - Pam shared that the application links are online, but applicants need to go in-person for their cards. Carewell 	Pamela Saepharn
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provides the new worker training, continuing education training, medication benefits, paid time off, and the Carina registry. Orientation is six hours long and covers specific topics such as ADLs, rules, regulations, how to receive pay, safety and benefits, etc. The HCW background checks are started by staff and last two years, although can be requested at any time and must be done within 21 days. The background check unit conducts the background checks and it can take roughly a month. Not receiving a background check will result in denial. Payments are done through the Provider Time Capture (PTC) system and HCWs must enter all the necessary information. This database can also keep track of provider information and renewals, and is maintained by the PTC team. Renewals happen every two years and contain the renewal packet, background check, and continuing education. 12 hours of continuing education is required every two years and includes CPR and first aid. Additional training can increase hourly wages. The Provider Navigator Program helps with the enrollment process and provides 1:1 support including translation.

- Jesse asked how often homes are regulated.
- Pam said case managers go out once a year. Case managers also check in via phone.
- Jesse said sometimes things slip and it would be great if homes were checked more often.
- Pam said the consumer is the employer and can let the case manager go if they would like.
- Gail asked if this program is through Multnomah County.
- Pam said they work in ADVSD and provided an overview of the organization and program's structure.
- Tatyana said the union and Carewell is a separate organization.
- Gail asked if consumers need medical proof for services.
- Tatyana said a case manager will do an assessment.
- Pam said the consumer has a different application than the homecare worker.
- Sarah asked if this process is for an agency or for independent workers.
- Pam said they should go through the agency for this program and for independent workers.
- Barb. asked if a personal support worker who wants to work for an agency should go through this process.

	<ul style="list-style-type: none"> - Pam said they should go through that agency, and if the HCW wants to work with a different consumer they can be matched with someone else. - Barb. asked if someone goes to a different agency, do they get a different provider number. - Pam said they won't have one through a different agency. The Agency with Choice provider is GTI. GTI can also work through this process and background checks will be linked. They can be a Direct Support Worker (DSW) and HCW at the same time. The State of Oregon selected GTI Independence through a competitive procurement process as the statewide contracted agency to provide the Agency with Choice (AwC) service model. 	
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Next Steps and Action Items
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<p>11:25 (10 min)</p>	<p>Update: Age Friendly Business Certification</p> <ul style="list-style-type: none"> - Sarah provided an update on the final vote for the Age Friendly Business Certification decal. - Barb. asked how many people responded to the vote. - Sarah said 6 out of the 8 responses were for the winning design. - Barb. expressed concern about ASAC/DSAC approval voting. - Sarah said we were looking for feedback and not approval through voting. We will hear feedback from the program this summer. 	<p>Melanie</p>
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Next Steps and Action Items
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<p>11:35 (5 min)</p>	<p>Presentation Feedback: Logic Models</p> <ul style="list-style-type: none"> - Sarah said we are looking for feedback on the logic model process. This model documents program information. In a previous meeting, we discussed congregate meals and home delivered meals. We would like feedback for upcoming logic model presentations and the next one will be VDC. - Barb. asked if they can provide feedback during the VDC presentation. 	<p>Sarah</p>
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Next Steps and Action Items

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11:40 (5 min)	State of Oregon Aging and People with Disabilities (APD) office: State Plan on Aging feedback period is open <ul style="list-style-type: none"> - Public comment is open and this is connected to our Area Plan. 	Sarah
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Next Steps and Action Items

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11:45 (5 min)	Upcoming June Events and DSAC in June <ul style="list-style-type: none"> - Sarah said DSAC bylaws and term limits have not been updated and would like to align them with ASAC. - Barb. said ASAC added a chair and co chair, which is a big change. - Sarah said ASAC will be having elections, which will start in the fall. This will align with their new bylaws and chair and co chair implementation. She also said we need to track volunteer hours and we need to track attendance. - June 15th, Elder Abuse Awareness Day - June 19th, Juneteenth - June 19th-21st, Delta Park Powwow - June 27th, Community for Positive Aging Block Party - June 27th-28th, Good in the Hood 	
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Next Steps and Action Items

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11:50 (10 min)	Public comment – if time was requested during agenda review. Closing and check out <ul style="list-style-type: none"> - Carol asked if DHS will be at the Powwow. - Sarah said yes. - TJ said the West Multnomah Soil & Water Conservation District is looking for council members. - Barb. said DSAC bylaws need to align with the state and O4AD. Kim and Joseph have a template. - Sarah said we also need to align with the OAA and three 	
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	year term limits.	
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Next Steps and Action Items

- [West Multnomah Soil & Water Conservation District](#)

12:00 pm	Adjourn!
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Upcoming Meetings:

- DSAC: Wednesday, June 17, 2026
- ASAC: Tuesday, June 16, 2026

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

- AAA - Area Agency on Aging
- ADRC - Aging, Disability Resource Connection (Center)
- ADVSD - Aging, Disability and Veterans Services Division, DCHS
- APD - Aging and People with Disabilities, Oregon Department of Human Services
- APS - Adult Protective Services
- ASAC - Aging Services Advisory Council
- BIPOC - Black, Indigenous, and other People of Color
- DCHS - Department of County Human Services (Multnomah)
- DSAC - Disability Services Advisory Council
- HST - Housing Stability Team
- LTSS - Long Term Services and Supports
- NEMT - Non-Emergency Medical Transportation
- O4AD - Oregon Association of Area Agencies on Aging and Disabilities
- OAA - Older Americans Act
- ODHS - Oregon Department of Human Services (also called DHS)
- OPI and OPI-M - Oregon Project Independence (- Medicaid)
- YFS - Youth and Family Services



Disability Services Advisory Council (DSAC)

May 20, 2026

Aging, Disability, and Veterans
Services Division

Department of County Human Services

Please silence your cell phones

**PLEASE SILENCE
YOUR DEVICES**



Meeting goals

- Welcome and agenda
- Zoom, microphone use and accessibility statement
- Land acknowledgement
- Introductions and grounding in the purpose of advisory councils
- Item 1
- Item 2
- Break
- Item 3
- Public testimony
- Future meeting



Main features of using Zoom on a computer.

Zoom application features in the works, as requested.

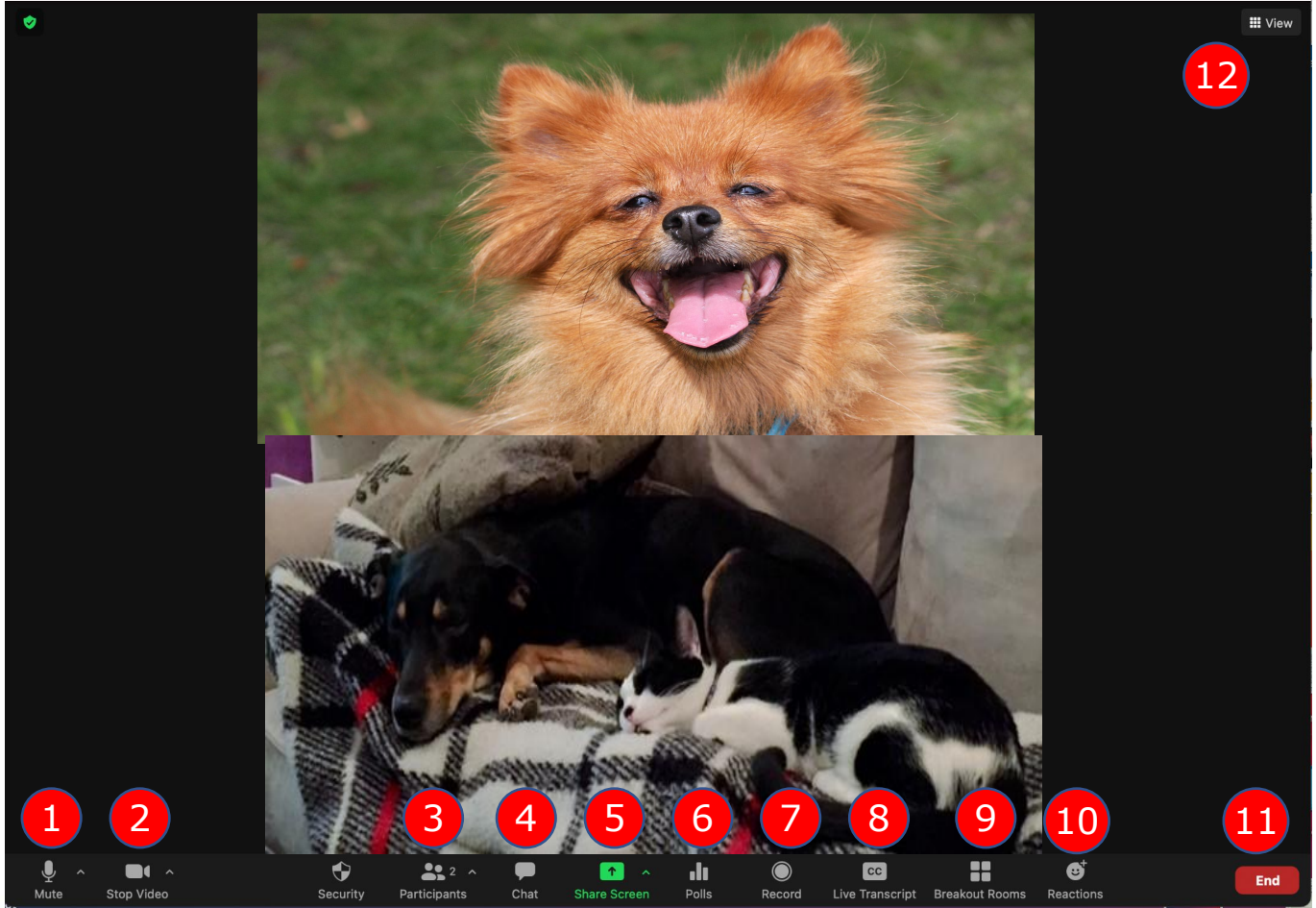
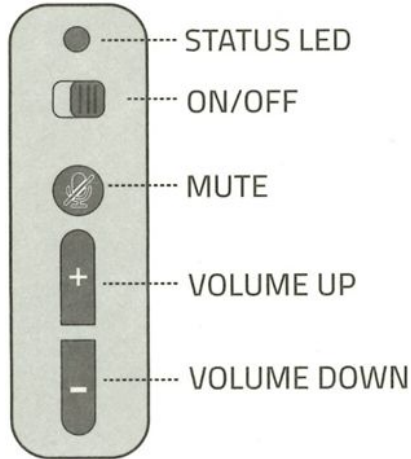


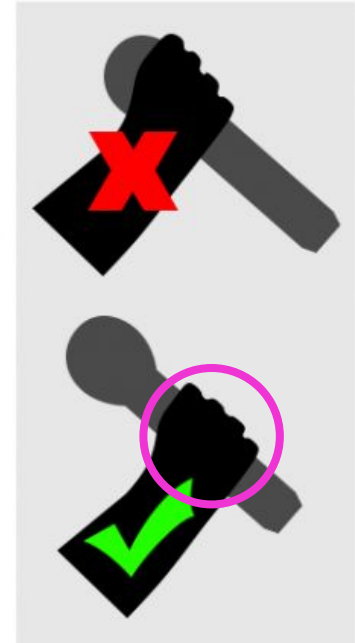
Image of a Zoom platform screen with two dogs in the participant boxes and red circles with white numbers above each of the Zoom button icons.

Using the microphone

Green solid – mic on
Green blinking – standby



Hold the mic about 5cm/2" from your mouth...



and don't cup it!
(unless you're rapping)



Accessibility statement

We will (imperfectly!) model accessible presentation techniques such as:

- Using a minimum of 20 point font on slides.
- Limiting reliance on words and images.
- Orally describe visual presentation elements.
- Taking time on slides.
- Ask ahead of time if anyone needs accommodations.



Accessibility statement, continued

- Use a virtual platform with auto-generated closed captioning.
- Include alternate text or image descriptions.
- Accommodations were requested and met.
- In use—voice amplification.
- Not in use—ASL interpretation, CART services.



Land acknowledgement

We are located in Portland, Oregon, Multnomah county.

Today, we honor the Indigenous people whose traditional and ancestral homelands we stand on—the Multnomah, Kathlamet, Clackamas, Tumwater, Watlala bands of the Chinook, the Tualatin Kalapuya and many other Indigenous nations of the Columbia River.

It is important we acknowledge the ancestors of this place and to recognize that we are here because of the sacrifices forced upon them.

In remembering these communities, we honor their legacy, their lives, and their descendants.

Quick introductions

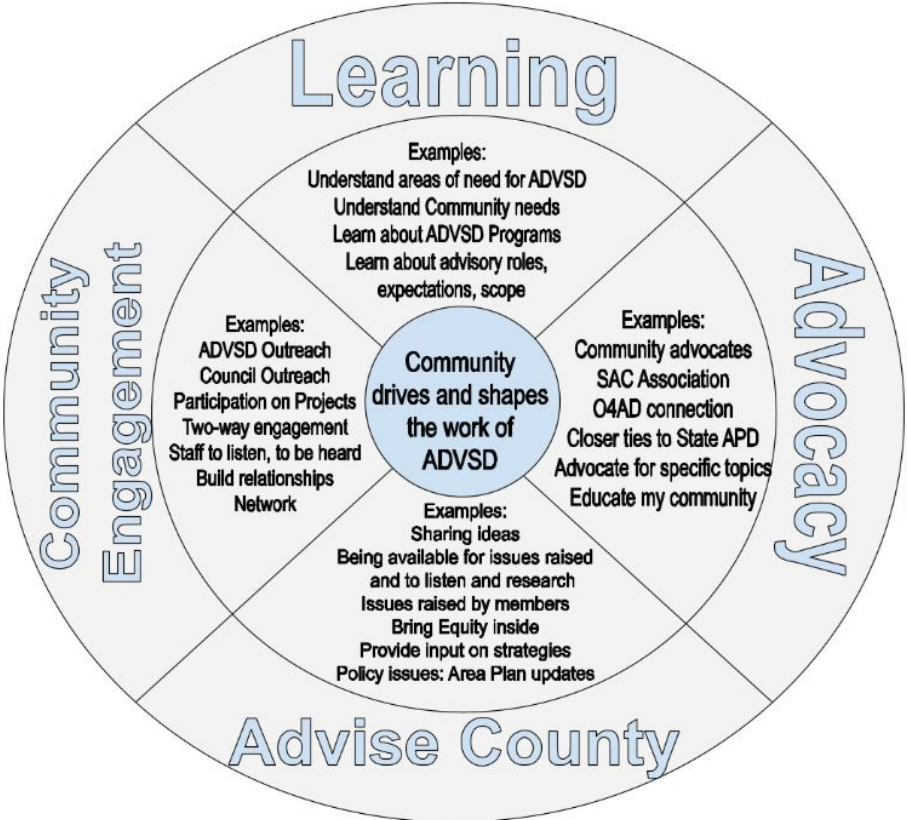
Please share:

- Your name
- Pronouns
- *Prompt*

What? Is your favorite way to spend a sunny summer day?




Grounding us in the Purpose of Advisory Councils







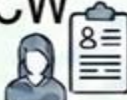
HEMOCARE WORKER PROGRAM


Topics


- Oregon HomeCare Commission (OHCC) 


- HCW Statistics 

- HCW Unit, Branch QEDs & Voucher Team 


- How to Become an HCW 

- Carewell/SEIU 503 Orientation 

- Background Check Unit 

- OR Provider Time Capture (PTC) DCI 

- How to Renew HCW Credentials  

- Provider Navigator Program 

OAR 411-031

Establishes standards, procedures and payment services for HCWs who work for consumers of Medicaid and Oregon Project Independence (OPI).



Client-Employed Provider (CEP) Program

Consumer = employer

HomeCare Worker = employee

Oregon HomeCare Commission



Defines qualifications of HomeCare Workers and Personal Support Workers



Provides a statewide Registry (Carina Registry)



Provides training opportunities (Certification Programs)



Serves as the “employer of record” for purposes of collective bargaining



Customer Relations Website

<https://www.oregon.gov/odhs/providers-partners/homecare-workforce/pages/default.aspx>

HCW Statistics

6093 Approved HCWs in
Multnomah County
(as of May 2026)



In 2025 -



Applications:
2837

Monthly average: 236
(50%+ applicants with no consumers)



Renewals received:
2222

Due to renew: 2812
(79% received - 185/month average)



Phone/Email Contacts: 700+ monthly

HCW Unit, Branch QEDs & Voucher Team



HCW Unit

- Credential Approval
- New Applications
- Renewals (2 yr)
- W-4 updates
- Info changes
- Background Checks (BGC) for IHS, OPI & ICP
- HCW Incident Reports

☎ 503-988-7575
✉ HCW.unit@multco.us



Branch QEDs

- Accept, review and send complete applications and renewals to HCW Unit for processing
- Reach out to applicants to ensure an application is complete
- Update W-4s, HCW Info Changes
- Upload HCW documents into Laserfische



Voucher Team

- Voucher Issuance
- Payment Approval
- Time entry issues
- Check replacements

How to Become a HCW



1. Application

- Current ID & Employment Authorization Document (Fingerprints required if not an Oregon ID/DL)
- Provider Enrollment Application & Agreement
- I-9 Form
- HCW Guide Acknowledgement Form
- W-4 forms



2. Orientation

- 6 hours in person (or webinar in different languages)
- 30 min. competency assessment online (3 attempts to pass)



3. Background Check

- Consent/Disclosures w/in **7 days**
- Fingerprint Requests w/in **21 days** of request
- Additional Information Requests w/in **21 days** of request



4. New Worker Training

- (w/in 120 days of approval)
- Core 1 & 2 Classes

Online Applications for Home Care Workers

HCW Application



<https://bit.ly/3R0vZGT>

Apply
Now
→

HCW Renewal



<https://bit.ly/4dUaZXS>

Renew
Now
→

(only for active HCWs)



Carewell
SEIU503

- New Worker Training
- Continuing Education Training
- Medical Benefits
- Paid Time Off
- Carina Registry - <https://carina.org/>

Website: <https://www.carewellseiu503.org>

Email: carewellSEIU503benefits@risepartnership.com

Phone: 1-844-503-SEIU (7348)

Orientation



Attending in-person (English and Spanish only)



or via Webinar (six languages)

Topics



Consumer rights and confidentiality



Providing in-scope services



Rules, regulations, and how to receive pay



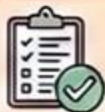
Medication management



Mandatory reporting and preventing abuse










Safety & Benefits








Required online Assessment (3 attempts to pass or repeat class)

HCW Unit & Background Check Unit

HCW Unit

-  BGC Instructions
-  Initiates BGCs
-  Upload Documents
-  Forward Fingerprint Letters to SIs
-  "Reason to Believe" Immediate BGC Needed
-  Look up BGC Status
-  Process Approvals/Denials




Background Check Unit (BCU)

-  Process BGCs
-  Requests Fingerprints, Add'l Info
-  Review & makes a Determination
-  Sends BGC Denials directly to SI's (Denial vs Ineligible)
-  Responds to BGC Appeals




Provider Time Capture (PTC)

The Oregon Provider Time Capture Direct Care Innovations (OR PTC DCI) meets federal mandates to electronically capture required information when personal care services are provided.

Electronic Visit Verification (EVV) requirements:

-  Consumer receiving the service
-  Provider giving the service
-  Date, Location, and Time the service starts and ends

OR PTC DCI options:

-  Mobile App
-  Landline (consumer's landline)
-  FOB (kept at consumer's home)

HCW Unit & OR PTC DCI

HCW Unit



Update HCW Info



Add Notes



Request Deactivations

PTC



Set up HCW Profiles



Link & Unlink HCW & Consumer



FOB Requests



DCI Helpdesk

1-855-565-0155 (24/7)



Email: ORPTCSupport@dcisoftware.com



Website: PTC.Oregon.gov

-Resources & Tips in utilizing OR PTC DCI

-OR PTC DCI Provider Guide

(in multiple languages)

How to Renew HCW Credentials

Renewal Packet



- Provider Enrollment Application & Agreement
- HCW Guide Acknowledgement Form
- Current ID/DL (FP's Required if not Oregon ID/DL)

Background Check



- Consent/Disclosures w/in 7 days
- Fingerprint Requests w/in 21 days of request
- Additional Information Requests w/in 21 days of request
- Two submissions, unless contacted by HCW

Continuing Education



- Beginning March 2026
- 12 hours every two years
- Exempt for providers with an OHCC training certification

Provider Navigator Program



Navigators assist with enrollment and training issues



Program provides one-on-one support to HCWs



This resource supports new and renewing applicants






HomeCare Worker Program

East Area Aging & Disability Services Office # 3518


 600 NE 8th St, Room 100, Gresham, Oregon 97030-5648


 Phone (503) 988-7575

 FAX (503) 988-5676

 HCW.unit@multco.us

Pamela Saepharn

 HCW Program Coordinator

 pamela.saepharn@multco.us





**I'M TAKING
A BREAK**

15-minute break

Update: Age Friendly Business Certification (AFBC)



Logic Models: Presentation Feedback

Nutrition Program Review

We recently explored the Nutrition Program Logic Model, including key data and indicators.

Next Step: Veterans Directed Care

This will be our next Logic Model presentation.

We would like your feedback and input on the presentation format before we proceed.



Logic Model (handout)

Planned Work: What your program does... ➤		Intended Results: What your program expects to achieve from what it does...			
Inputs ➤	Activities ➤	Outputs ➤	Short-term Outcomes ➤	Long-term Outcomes ➤	Impacts
What resources and investments does your program use? <ul style="list-style-type: none"> • ADVSD staff <ul style="list-style-type: none"> ○ Registered Dietitian ○ Contract Liaison ○ Program Technicians ○ Data Quality & Training Coordinator ○ Budget staff ○ Program management • Providers/Partners <ul style="list-style-type: none"> ○ Congregate Meals: AHSC, EPHC, IRCO, MOWP, NAYA, Stone Soup ○ Home Delivered Meals: EMO, MOWP ○ Subcontracted meal providers ○ Partner volunteers & nutrition educators • Funding <ul style="list-style-type: none"> ○ OAA ○ County General 	What action/work is your program/staff doing for participants? <ul style="list-style-type: none"> • ADVSD staff <ul style="list-style-type: none"> • Review meal menus • Conduct nutrition education at congregate meals • Conduct contract management functions • Providers/Partners <ul style="list-style-type: none"> • Conduct nutrition education • Provide congregate (group) meals • Provide home delivered meals & resources • Conduct nutrition screening, assessment & identify nutrition risk 	What did activities produce for participants? How much work was done by the program? <ul style="list-style-type: none"> • Education & Counseling <ul style="list-style-type: none"> ○ # of education contacts ○ # of congregate sessions ○ # of HDM sessions ○ # of attendees • Contract Management <ul style="list-style-type: none"> ○ # of contracts administered ○ # of partners • Congregate Meals <ul style="list-style-type: none"> ○ # of opportunities (meal events offered) ○ # of meals provided ○ # of individuals served • Home Delivered Meals <ul style="list-style-type: none"> ○ # of meals provided ○ # of individuals served • Nutrition Screening/Assessment <ul style="list-style-type: none"> ○ # of screenings/assessments ○ # of individuals identified as high nutrition risk 	What immediate/short-term changes are expected for participants from activities? <ul style="list-style-type: none"> • Increased awareness of other services (e.g. OAA, Medicaid, SNAP) • Increased social & cultural interactions • Increased knowledge of good nutrition & healthy eating • Increased access to meals & healthy food options • Healthier diets (e.g. improved nutrient intake, overall diet quality) • Improved safety (e.g. wellness checks) 	What long-term changes are expected for participants from activities or prior outcomes? <ul style="list-style-type: none"> • Improved social connectedness & mental health (e.g. reduced loneliness, isolation, & depression) • Reduced poor nutrition risk (e.g. reduction in nutrition risk scores) • Reduced food insecurity • Increased independence (e.g. ability to live in home; less likely to be admitted to a nursing facility) • Reduced healthcare utilization & expenditure (e.g. emergency department visits, hospital admissions) • Increased health (e.g. better management of chronic health conditions) 	What changes are expected in the community, beyond the participant? <ul style="list-style-type: none"> • Increased intergenerational social connectedness • A more connected & accessible service system • Increased support for family & community members • Reduced healthcare system utilization & expenditure (e.g. medical system, institutions, medicare spending) • Supported local economies (e.g. partners, food purchases, employment, alternative spending)



Logic Model (handout)


Planned Work: What your program does...		Intended Results: What your program expects to achieve from what it does...			
Inputs	Activities	Outputs	Short-term Outcomes	Long-term Outcomes	Impacts
<p>What resources and investments does your program use?</p> <ul style="list-style-type: none"> • ADVSD staff <ul style="list-style-type: none"> ○ Registered Dietitian ○ Contract Liaison ○ Program Technicians ○ Data Quality & Training Coordinator ○ Budget staff ○ Program management • Providers/Partners <ul style="list-style-type: none"> ○ Congregate Meals: AHSC, EPHC, IRCO, MOWP, NAYA, Stone Soup ○ Home Delivered Meals: EMO, MOWP ○ Subcontracted meal providers ○ Partner volunteers & nutrition educators • Funding <ul style="list-style-type: none"> ○ OAA ○ County General 	<p>What action/work is your program/staff doing for participants?</p> <ul style="list-style-type: none"> • ADVSD staff <ul style="list-style-type: none"> • Review meal menus • Conduct nutrition education at congregate meals • Conduct contract management functions • Providers/Partners <ul style="list-style-type: none"> • Conduct nutrition education • Provide congregate (group) meals • Provide home delivered meals & resources • Conduct nutrition screening, assessment & identify nutrition risk 	<p>What did activities produce for participants? How much work was done by the program?</p> <ul style="list-style-type: none"> • Education & Counseling <ul style="list-style-type: none"> ○ # of education contacts ○ # of congregate sessions ○ # of HDM sessions ○ # of attendees • Contract Management <ul style="list-style-type: none"> ○ # of contracts administered ○ # of partners • Congregate Meals <ul style="list-style-type: none"> ○ # of opportunities (meal events offered) ○ # of meals provided ○ # of individuals served • Home Delivered Meals <ul style="list-style-type: none"> ○ # of meals provided ○ # of individuals served • Nutrition Screening/Assessment <ul style="list-style-type: none"> ○ # of screenings/assessments ○ # of individuals identified as high nutrition risk 	<p>What immediate/short-term changes are expected for participants from activities?</p> <ul style="list-style-type: none"> • Increased awareness of other services (e.g. OAA, Medicaid, SNAP) • Increased social & cultural interactions • Increased knowledge of good nutrition & healthy eating • Increased access to meals & healthy food options • Healthier diets (e.g. improved nutrient intake, overall diet quality) • Improved safety (e.g. wellness checks) 	<p>What long-term changes are expected for participants from activities or prior outcomes?</p> <ul style="list-style-type: none"> • Improved social connectedness & mental health (e.g. reduced loneliness, isolation, & depression) • Reduced poor nutrition risk (e.g. reduction in nutrition risk scores) • Reduced food insecurity • Increased independence (e.g. ability to live in home; less likely to be admitted to a nursing facility) • Reduced healthcare utilization & expenditure (e.g. emergency department visits, hospital admissions) • Increased health (e.g. better management of chronic health conditions) 	<p>What changes are expected in the community, beyond the participant?</p> <ul style="list-style-type: none"> • Increased intergenerational social connectedness • A more connected & accessible service system • Increased support for family & community members • Reduced healthcare system utilization & expenditure (e.g. medical system, institutions, medicare spending) • Supported local economies (e.g. partners, food purchases, employment, alternative spending)



Oregon State Plan on Aging - Public Comment Open

Aging and People with Disabilities Community Engagement

The Office of Aging and People with Disabilities (**APD**) is committed to engaging with the people we serve, their families, advocates, providers and community partners. We encourage you to connect with us to share feedback, join in discussions and receive updates.

 Legislative session updates

 Senate Bill 739 implementation

 Updating the State Plan on Aging

 Advocacy Award

 Current initiatives

 APD Rules Advisory Committees



Oregon State Plan on Aging - Public Comment Open

The public comment period for the draft 2026-2030 State Plan on Aging is open through **June 12, 2026**.

- Email comments to sua.email@odhsoha.oregon.gov
- Mail comments to: ODHS Office of Aging and People with Disabilities
Attn: Debbie McCuin
500 Summer St., NE, E-12
Salem, OR 97301
- Attend the public hearing scheduled for **Wednesday, June 10, 2026**, at 10:00 a.m. The meeting will be hosted online via Zoom.
- <https://www.oregon.gov/odhs/engagement/pages/apd-engagement.aspx>



Updates and reminders

- DSAC Bylaws update
- Share Agenda items, ideas, questions
- Remember to let us know if you will not be able to attend - we need to track attendance for reasons such as the Area Plan, stipends, volunteer hours.
-



June Events

- Monday, June 15 Elder Abuse Awareness Day
- Friday, June 19 Juneteenth
- Friday, June 19-21 Delta Park Powwow
- Saturday, June 27 Community for Positive Aging Block Party
- Saturday, June 27-28 Good in the Hood 2026: Lillis-Albina Park, North Portland



Public testimony and council updates

- Please feel free to provide comments.



Looking ahead to DSAC June meeting

- Veterans Directed Care (VDC) Program will be presented by Sheila Balbin and Lisa Dessen-Ocana
- Followed by the VDC Logic Model presentation with ADVSD Research and Evaluation, Nicole Galport and Jason Normand



Wrap-up

- Thanks for attending!
- Next meeting
 - DSAC: Wednesday, June 17, 2026
 - ASAC: Tuesday, June 16, 2026

