



Aging, Disability, and Veterans Services Division  
**Joint Advisory Council Session**  
 Tuesday, April 21, 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
<b>Attendees:</b> Members	Dave Daley, Barb. Rainish, Gail Skenandore, John Halfmoon, Scott Moore, Carol Snell, Anne Lindsay, Monique Torres (V), Jesse Guardipee, Kathleen Sullivan (V), Timothy Gage (V), Brandy Penner (V)	
ADVSD	Charmaine Kinney, Jason Normand, Julia Love, Kristin Riley, Sarah Feldman, Lars Fujisato, Deric Anderson, Jeremy Nguyen, Nicole Galport, Antonio V, Melanie Al, Jacob Mestman, Margretta Hansen, Katie Boldensmith, Hayden Farris	
Guests	Hope Asana, Robbie Noche, Maria Monroy-Mota	
10:00 (15 min)	Meeting open for sign on	All
	Agenda review – <i>call for public comment</i> Opening – Zoom review and accessibility Land acknowledgment Introductions – Please share your name and pronouns <i>Prompt - A quick 'This or That' question. Do you prefer Ocean Breeze or Mountain Air?</i>	Sarah
10:15 (45 min)	Nutrition Program Key Performance Indicators - A resource for advocacy <ul style="list-style-type: none"> <li>● Sarah shared “<i>Grounding us in the Purpose of Advisory Councils,</i>” which consist of the four aspects of advocacy. This model represents not being able to have one aspect without the other. The purpose for today was related to the Area Plan and improvement tasks. This is also part of the Baseline Project.</li> <li>● Jason shared the associated logic model handout and reviewed the project and purpose of the logic model.</li> <li>● Scott asked which department this applies to. He also asked if this is for a section of the Service Plan and if there are 9 more to come.</li> <li>● Jason said yes, and this is for ADVSD.</li> <li>● Charmaine said this does not include LTSS home</li> </ul>	Nicole and Jason, Margretta and Antonio

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	<p>delivered meals, which is a big hole in data.</p> <ul style="list-style-type: none"> <li>● Jason said LTSS will have their own model.</li> <li>● Nicole shared that the logic model is trying to capture data and information on one page, and each section of the model has its own slide. This program is funded by the OAA and general funds. We have contracted partners that screen and educate people, although we will not focus on that process. Culturally specific meals are also included in this information. We are focused on congregate meals, number of events, number of meals served, and number of meals provided. Short-term outcomes have different short-term outputs, such as increased cultural interactions, greater access to meals, awareness of services, and healthier diets. We hope this leads to long-term outcomes, such as greater mental health, decreased food insecurity, less healthcare usage, and decreased poor nutritional risk.</li> <li>● Anne said she has seen Urban League give out congregate meals, and asked how the short and long term meals are measured and what tools are used to evaluate if these outcomes are measured.</li> <li>● Nicole said they will show how things are measured by how many meals and people are served.</li> <li>● Jason added that Urban League is not a provider.</li> <li>● Margretta said they host, but Stone Soup provides the meal.</li> <li>● Kathleen said that she appreciates the unduplicated numbers. She also said the number of times the same person goes can be vital to see how important and meaningful the program is to people. This can be more important than new people. We should not downplay how important this program is to decrease isolation and to reduce loneliness.</li> <li>● Dave said he is concerned with fragmented data because we need to get the word out for services and replicate the awareness of availability.</li> <li>● Margretta said Stone Soup provides meals to other sites as well.</li> <li>● Nicole said they are trying to make sure there is consistency with partners.</li> <li>● Carol said there are folks who don't feel comfortable sitting with others and that can be good enough</li> </ul>		

Time	Agenda Item	Purpose	Lead
	<p>regardless if they are sitting with others. Maybe there can be a one question survey for those people and compile the data.</p> <ul style="list-style-type: none"> <li>● Lawrence said they do meals at NAYA and now that Covid is over, they don't have the same funding and are trying to figure out costs for the remainder of the year. With rising costs, they may not be able to feed as many people as they could.</li> <li>● Scott said he is curious how the logic model moves from ADVSD to the partners. He likes the outcomes and is wondering how we are measuring the outputs. Do partners need to measure these as well - are they self reported.</li> <li>● Sarah said this is not new, but we are trying to unify them.</li> <li>● Nicole said there are home delivered meals and safety is included in the outcomes. This is also a wellness check and increases independence.</li> <li>● Jason said the wellness check can be the only interaction some people have. Outputs include (last FY): Number of meals served: 458,059 with 9% being culturally specific, 4,981 people served, and 23% of participants served by culturally specific providers. This is an average of 92 meals per person, although there is a large range. There is a greater percentage of home delivered meals and MOWP provides the largest number of meals. There are items in the outcomes column that we do not track or have data on. This is because it is in the hands of the providers, however, this is a proven model and we are assuming the information closely relates.</li> <li>● Scott asked with the plans for AAA's and OAA - how does ADVSD make adjustments to these plans to help with unmet needs?</li> <li>● Jacob said that in terms of funding, every provider said it's not enough money and they may have to close sites. The County is in a reduction, although we don't have a reduction with nutrition, we still have those unmet needs.</li> <li>● Carol said program providers could have surveys and folks could mail in their response and be asked about unmet needs.</li> <li>● Jason said he appreciated the feedback.</li> </ul>		

Time	Agenda Item	Purpose	Lead
	<ul style="list-style-type: none"> <li>● Jesse said there should be more people out there doing work for Natives to increase the number of people served. Natives are isolated and they don't know about these services, but they want to know they are accepted.</li> <li>● Charmaine said she wants to support what Jesse said. There was a call out in the community survey and it took going out there to get those responses. They want connection with people serving them - this is community engagement.</li> <li>● Carol said she supports what Charmaine said. She had a positive experience at PSU with building connection with Natives and building trust with community engagement.</li> </ul>		

**Next Steps and Action Items**

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<b>11:00</b>	<b>BREAK</b>
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11:15 (20 min)	<p>Age Friendly Business Certification: Overview and Logo design</p> <ul style="list-style-type: none"> <li>● Jeremy provided an overview of the Age Friendly Business Certification program that will launch to the community. The city had this going in previous years, and we would like to continue the program. This will benefit the whole community and support everyone.</li> <li>● Melaine said that businesses can apply for this certification and after approval, they will receive a physical and digital sticker to show they are certified. We will use the fist to five consensus for voting and everyone who is present can vote.</li> <li>● Anne shared that she does not like the check mark on the graphics and asked why on option 3 the circle is not complete. She also said the people do not seem diverse. The people also do not convey what age friendly is.</li> <li>● Scott also shared that he does not like the check mark.</li> <li>● Kathleen does not like the check mark. She likes the first one the most, but said it may not work with older eyes. She added that age friendly is not just for older adults, but for everyone including kids, and feels option three does not show that.</li> </ul>	Jeremy and Melanie
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Time	Agenda Item	Purpose	Lead
	<ul style="list-style-type: none"> <li>● Barb. said that she does not like the check mark and does not like the font.</li> <li>● Votes are as followed: option 1: 3,3,5,0,5,2,0,2,5 option 2: 0,1,2,0,5,5,0,5,0,4 option 3: 0,3,0,0,0,0,0,5,0,3</li> <li>● Barb. shared that this is not the official consensus model.</li> </ul>		
<b>Next Steps and Action Items</b> <ul style="list-style-type: none"> <li>●</li> </ul>			

11:35 (15 min)	USAgging Policy Briefing update O4AD Spring quarterly retreat share out <ul style="list-style-type: none"> <li>● Sarah said Irma traveled to DC with other AAA leaders and discussed the USAgging policy priorities. These are the national priorities and Oregon's come from O4AD. Sarah shared questions for the O4AD spring retreat and appreciated seeing Irma and others there. Many people support them and our services, but funding is the hard part.</li> <li>● Barb. said some of the AAAs are making a book of their members and sharing their experiences. Multnomah County won't let us use the program that was shared. She shared the website (<a href="https://www.peergalaxy.com/">https://www.peergalaxy.com/</a>) that the speaker recommended that is free or has scholarships and is a peer support resource.</li> <li>● Scott said the Federal administration put out a budget, which removes LIHEAP and other services for older adults. The senator is the only place that can help, and it would be harmful in Multnomah County if these cuts happen.</li> <li>● Carol asked on page 32, what does bolstering look like.</li> <li>● Sarah said grandfamilies is a program that needs more support.</li> </ul>	Sarah
<b>Next Steps and Action Items</b> <ul style="list-style-type: none"> <li>●</li> </ul>		

11:50	Public Comment or Testimony	Sarah
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Time	Agenda Item	Purpose	Lead
(10 min)	<ul style="list-style-type: none"> <li>• Dave presented on STF/STIF funding. Oregon used to only have STF, but the funds have been shrinking and now the STIF has increased. Both funds are supposed to merge, but that has not happened yet. TriMet's fund has been shrunk and we can't meet needs. The transportation bill was not funded and TriMet has reduced \$4 million of their funds from STF/STIF. Multnomah County gets funds from them and we have partners that work with TriMet that will be affected. We have time until the next biennium to advocate. The public funds the governor, but everyone else is appointed, and we need to involve more elected officials. Commissioner Jones Dixon is on the committee. On their website, you can see represented legislators and you can contact them. This reduction affects roads and transportation, but also older adults and people with disabilities. This hurts funding because people don't want to fund roads and transportation. The governor is creating a task force to help solve this issue. Make sure the Governor's Office knows how we feel about this. Multnomah County needs to get more serious like Washington and Clackamas County. There was a survey and transportation was in the top 3 areas of concern in the state.</li> </ul>		
<b>Next Steps and Action Items</b> <ul style="list-style-type: none"> <li>•</li> </ul>			
12:00 pm	Wrap up and Adjourn <ul style="list-style-type: none"> <li>- AARP will have a fraud fighters forum on April 28th.</li> <li>- Older Americans month proclamation is on May 4th.</li> <li>- Public comment for the State plan on aging.</li> <li>- It's national volunteer appreciation week.</li> </ul>		
<b>Next Steps and Action Items</b> <ul style="list-style-type: none"> <li>•</li> </ul>			

**Upcoming Meetings:**

- ASAC: Tuesday, May 19, 2026 from 10:00 am - 12:00 pm

Time	Agenda Item	Purpose	Lead
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- DSAC: Wednesday, May 20, 2026 from 10:00 am - 12:00 pm

**Common acronyms used in ASAC 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 Division



# **Joint Advisory Councils (ASAC/DSAC)**

**April 21, 2026**

Aging, Disability, and Veterans  
Services Division

Department of County Human Services

# Welcome and agenda

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- Welcome and agenda
- Zoom and accessibility
- Land and acknowledgement
- Introductions
- Nutrition Program - A resource for advocacy
- Break
- Age Friendly Business Certification - Logo voting
- USAging policy priorities
- O4AD - Share out from Spring retreat
- Public testimony, comments or announcements



Main features of using Zoom on a computer.

Zoom application features in the works, as requested.

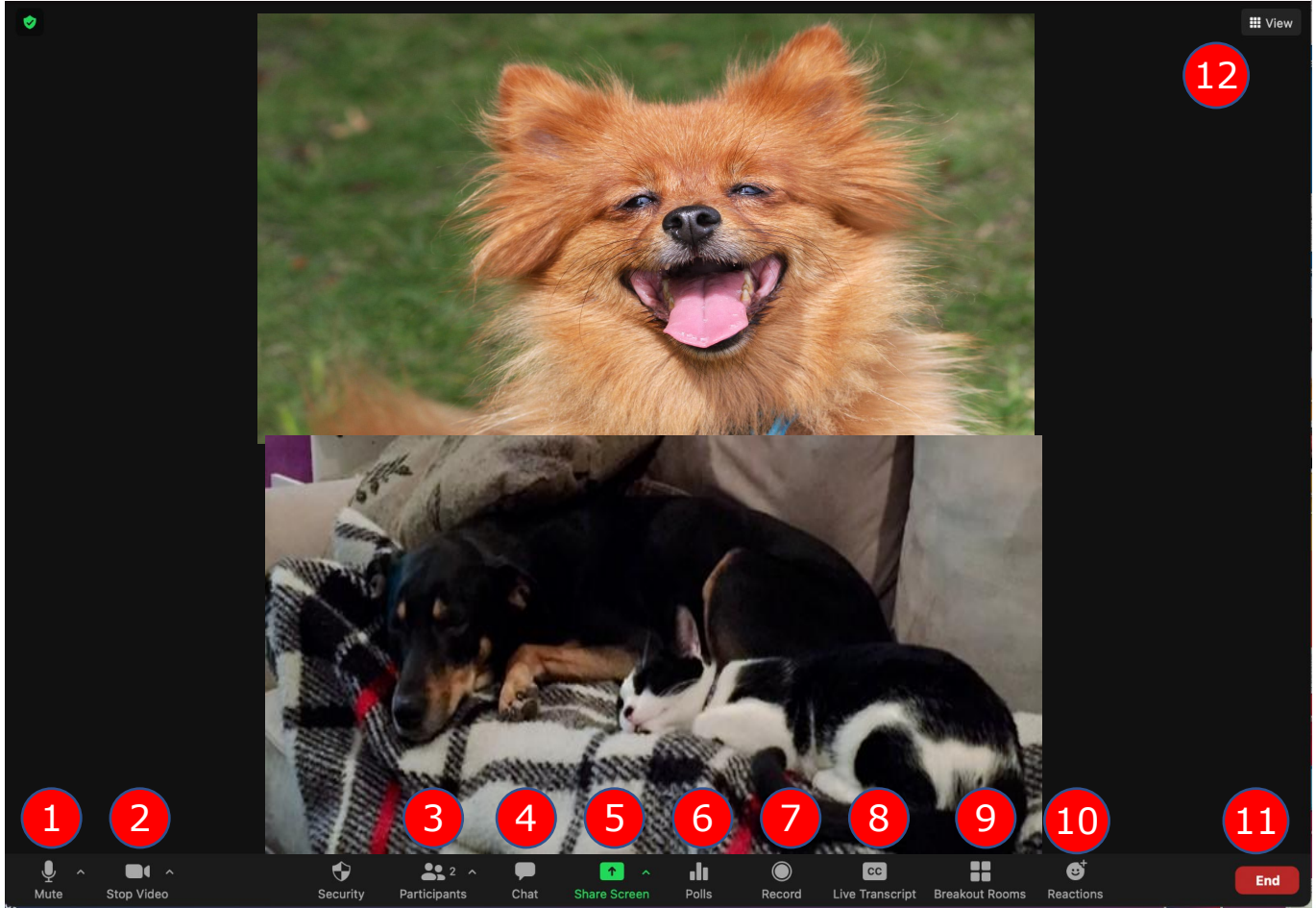
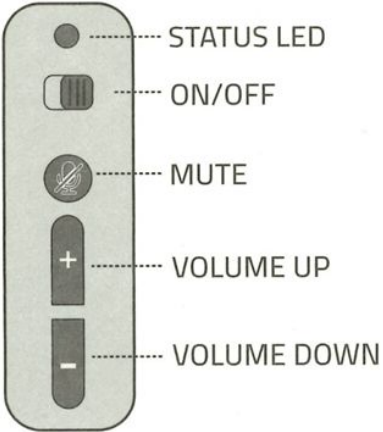
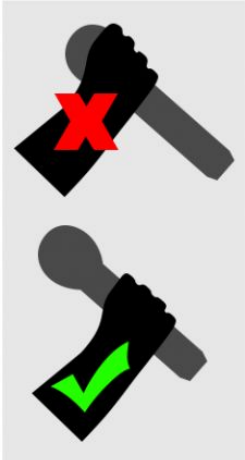


Image of a Zoom platform screen with two dogs in the participant boxes and red circles with white numbers above each of the Zoom button icons.

# Using the microphone



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



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



# Please silence your cell phones

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**PLEASE SILENCE  
YOUR DEVICES**



# Accessibility statement

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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.



# Land acknowledgement

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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

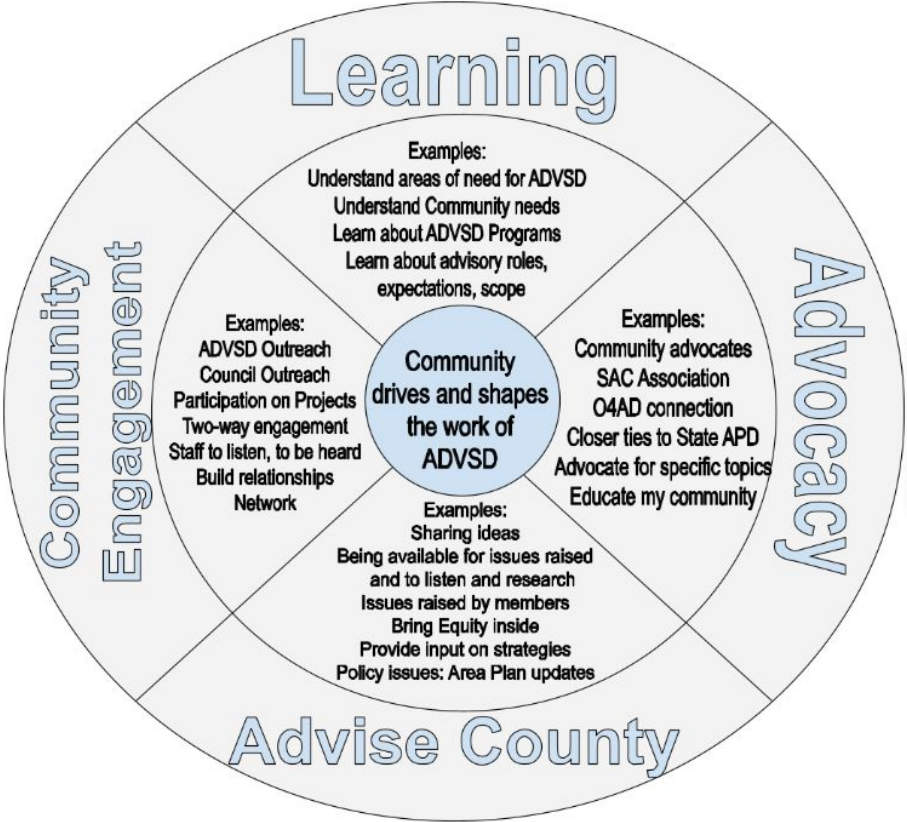
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Please share:

- Your name
- Pronouns
- Prompt — *A quick 'This or That' question. Do you prefer Ocean Breeze or Mountain Air?*



# Grounding us in the Purpose of Advisory Councils



# Nutrition Program Key Performance Indicators

## - A resource for advocacy

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- **Purpose for today:** Learning and Advocacy for the Nutrition Program - Area Plan task, be informed about the Nutrition program and related data for advocacy
- **Baseline Project goal:** All programs are clearly defined; have benchmark data points



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



# Logic Model (handout)

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



# Inputs & Resources

- Funding for Nutrition program
  - Older Americans Act and County General Funds
- Providers/Partners
  - Contract through partners to provide meals (congregate and home delivered), nutrition screenings, and some education
  - Culturally-Responsive and Culturally-Specific partners/meals



# Congregate Meals

## Outputs

- # of events
- # of meals provided
- # of people served

## Short-Term Outcomes

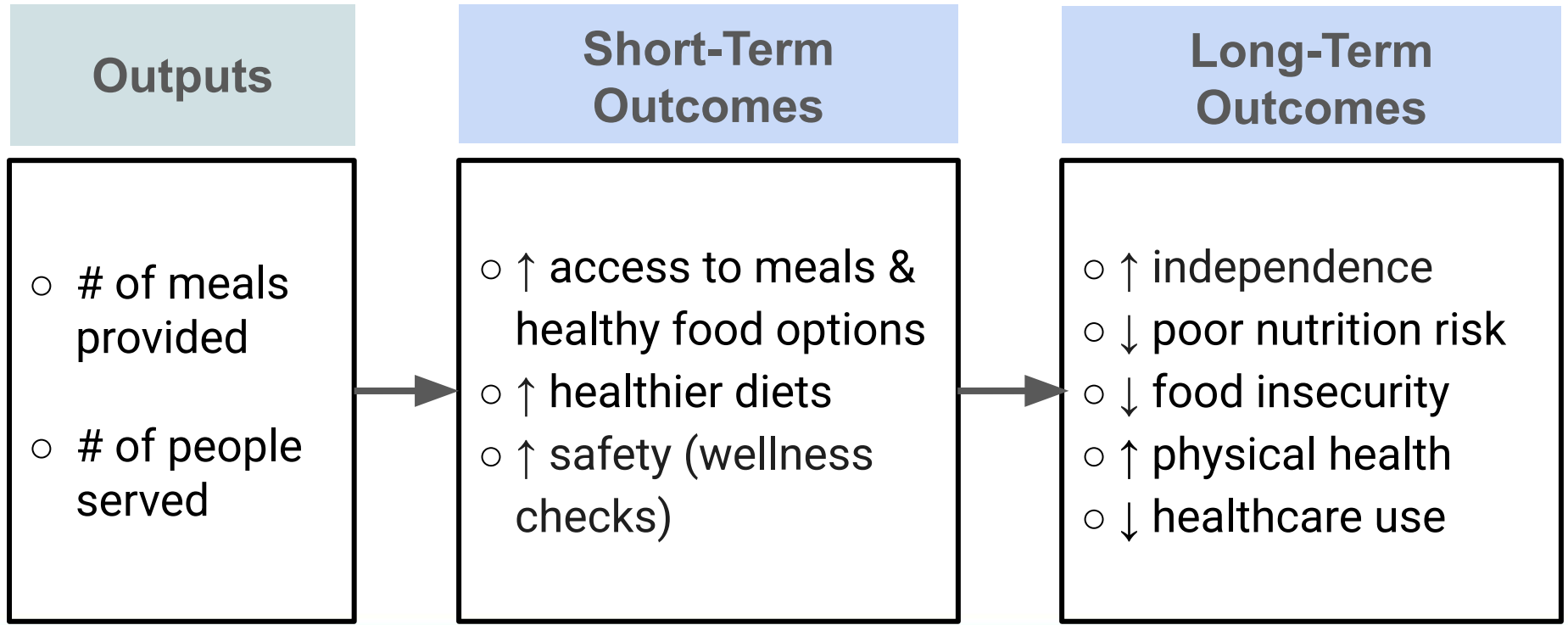
- ↑ social cultural interactions
- ↑ access to meals & healthy food options
- ↑ awareness of other services
- ↑ healthier diets

## Long-Term Outcomes

- ↑ social connectedness & mental health
- ↓ poor nutrition risk
- ↓ food insecurity
- ↑ physical health
- ↓ healthcare use



# Home-Delivered Meals



# Output data (July 1, 2024 - June 30, 2025)

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**# of Meals Served**  
**458,059**

**% of Meals Served by Culturally Specific Providers**  
**9%**



**# of Participants Served**  
**4,981**

**% of Participants Served by Culturally Specific Providers**  
**23%**



# Output data (July 1, 2024 - June 30, 2025)

## # of Meals Served by Meal Type

Congregate Meals	Congregate Meals	38,486
	Ethnic Cong Breakfast	1,061
	Ethnic Congregate Meals	28,722
Home Delivered ..	Home Delivered Meals	385,379
	OPI Exp Home Delivered Meals	4,411
<b>Grand Total</b>		<b>458,059</b>



# Output data (July 1, 2024 - June 30, 2025)

## # of Meals Served by Provider

Culturally Responsive	MOWP	410,626
	Stone Soup	6,450
Culturally Specific	AHSC	13,350
	EMO	7,824
	EPHC	3,376
	IRCO (EE)	14,036
	NAYA	2,397
<b>Grand Total</b>		<b>458,059</b>



# Output data (July 1, 2024 - June 30, 2025)

## # of Participants Served by Meal Type

Congregate Meals	Congregate Meals	1,866
	Ethnic Cong Breakfast	38
	Ethnic Congregate Meals	1,066
Home Delivered ..	Home Delivered Meals	2,285
	OPI Exp Home Delivered Meals	14
<b>Grand Total</b>		<b>4,981</b>



# Output data (July 1, 2024 - June 30, 2025)

## # of Participants Served by Provider

Culturally Responsive	MOWP	3,529
	Stone Soup	593
Culturally Specific	AHSC	733
	EMO	37
	EPHC	64
	IRCO (EE)	289
	NAYA	44
<b>Grand Total</b>		<b>4,981</b>



# Nutrition Program advocacy

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- **Revisiting the purpose for today:** Learning and advocacy for the Nutrition Program
- OAA Nutrition Program is a public-private partnership where AAAs use federal/private funds to administer nutrition services primarily through contracts with nonprofit community-based organizations.
- The network of local community-based nutrition providers have a profound impact on seniors each year.
- See the Program Summary (handout) for more information and to help with advocacy





**I'M TAKING  
A BREAK**

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15-minute break



# Age-Friendly Business Certification Program

Overview

Jeremy Nguyen (he/him)  
Quality Improvement Coordinator  
ADVSD Director's Office

# Program goals



**Identify & certify  
age-friendly  
businesses**

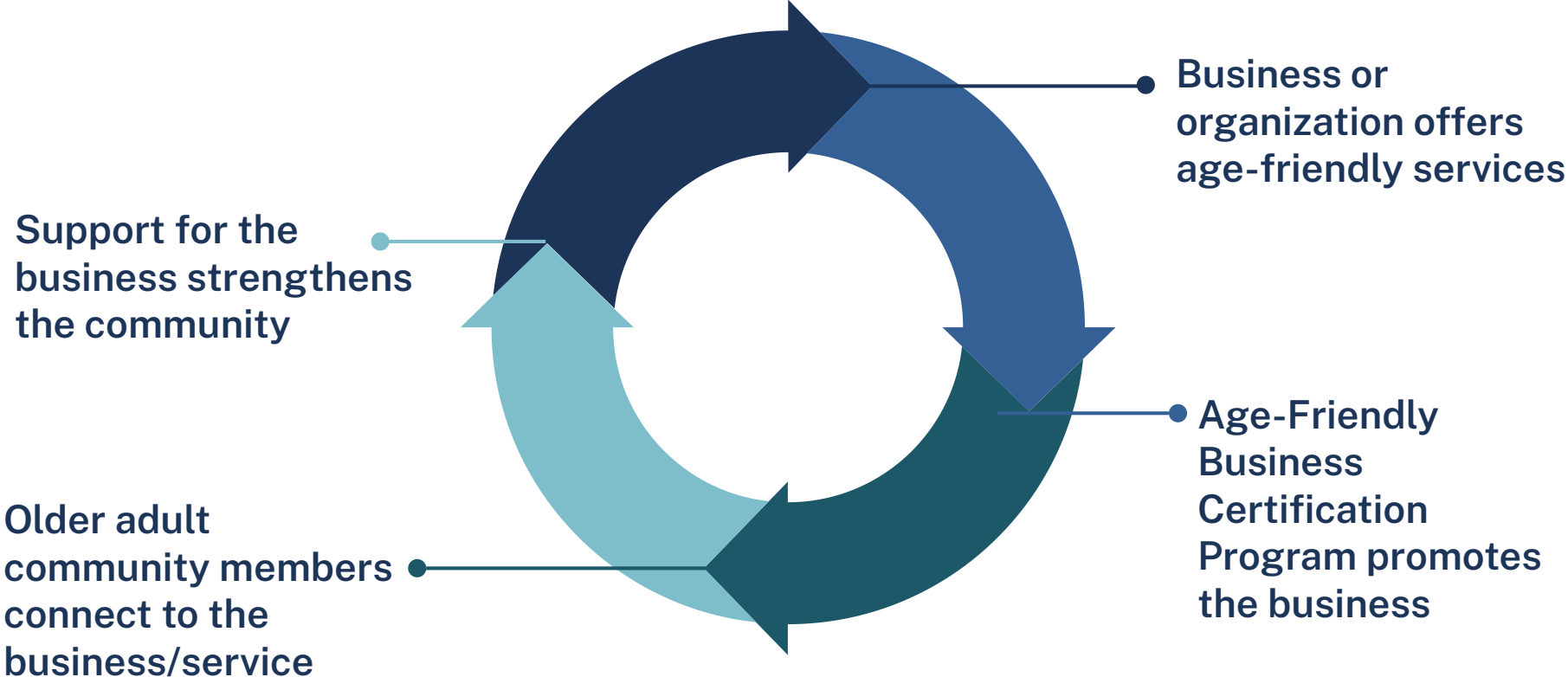


**Promote & connect  
age-friendly  
businesses in the  
community**



**Build investment in  
age-friendly business  
practices and foster  
inclusion**

# Community benefits





# Age-Friendly Business Certification Program

Window decal/sticker designs

Melanie Altaras (they/them)  
ADVSD Program Communications  
Coordinator

# Consensus process

Which best describes your level of agreement?



No way!



Hold on, we need to talk about this.



I have reservations, but I could be convinced.



I guess I am okay with it.



Sounds good.



Love it!

← More discussion

More consensus →

# Design Options



Option 1

# Design Options



Option 2

# Design Options



Option 3

# Design Options



Option 1



Option 2



Option 3

# USAgging Policy Priorities

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[Full link to the briefing can be found here.](#)

- Supporting Aging Well at Home Through OAA Programs and Services
- Bolster Family and Professional Caregivers to Meet Growing Demand
- Protect Cost-Effective Medicaid Home and Community-Based Services
- Connect Health Care and Aging Sectors to Lower Costs and Improve Outcomes



# O4AD Spring retreat share out & discussion

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Questions to get you thinking:

- What did you learn about Oregon OAA programs and services?
- What are other AAAs doing that we should be aware of or learn from?
- What's a topic that you heard about that made you want to know more?



# Public testimony

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- Dave Daley: Advocacy opportunity to protect Ride Connection funding, oppose cuts proposed by TriMet.



# Wrap-up

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## Upcoming Events:

- Tuesday, April 28th at OMSI, AARP Fraud Fighters Forum, 8:30 am - 12:00 pm; Advance registration is required at [events.aarp.org/PDXFraudFighter2026](https://events.aarp.org/PDXFraudFighter2026)
- Monday, May 4th Older Americans Month Proclamation 12:00pm, join us for a celebration at 1:00pm

## Upcoming Meetings:

- ASAC: Tuesday, May 19, 2026 from 10:00 am - 12:00 pm
- DSAC: Wednesday, May 20, 2026 from 10:00 am - 12:00 pm

