

COUNTY OF



ALLEGHENY

RICH FITZGERALD
COUNTY EXECUTIVE

US Senate Special Committee on Aging
Senator Robert Casey Field Hearing

Monday, June 30, 2014

Testimony of Mildred Morrison, Administrator of the Allegheny County Area Agency on Aging

Senator Casey:

The Allegheny County Department of Human Services espouses a vision *to create an accessible, culturally competent, integrated and comprehensive human services system that ensures individually tailored, seamless and holistic services to Allegheny County residents, in particular, the county's vulnerable populations.* Annually, our Area Agency on Aging serves 8,000+ older adults with social work services, developing plans of care and delivering hands on direct care in partnership with family members and friends who provide essential care at home. While we serve an additional 35,000 seniors with a variety of senior center, advocacy, transportation, and informational services, I wish to take this opportunity to address the growing challenges of Caregivers that assist the 8,000+ older adults in the home. As the Administrator of an urban AAA with one of the country's highest densities of seniors, let me begin by thanking you for holding this Field Hearing to share with the Special Committee on Aging my deeply felt concerns and some of the solutions we have found. I must also voice our great appreciation for the Older Americans Act and other federal funds which combined with considerable state resources that make providing any service possible.

With the growing number of seniors, especially the rising rate of those living to advanced years, experiencing dementia and complex life-limiting medical conditions, we have seen a 24% increase over ten years in the number of families we have assisted in caring for a frail elder. This is a complete reversal of circumstances from fifty years ago when an adult woman in her 40-50s provided at home care for usually the last two years of a parent's life. Typically, she was a married, full time homemaker whose children were grown and she was assisted by her siblings. Today her life in southwestern Pennsylvania is radically changed – her full time work is essential to the household, and her children were born later and far more likely to be at home and/or require child care for their own children while they are at work. Further, those beloved parents are older and frailer with multiple health issues but wishing to remain in their own homes. This caregiving family is the sandwich generation if not the double-decker that is also caring for grandchildren.

National studies¹ indicate that 20% of adults continue to provide more than 75% of the care for dependent elders that allow this frail population to remain at home. It is essential that public services enhance families' capacity to maintain this commitment as it is unimaginable that

MARC CHERNA, DIRECTOR

DEPARTMENT OF HUMAN SERVICES – AREA AGENCY ON AGING

BIRMINGHAM TOWERS • 2100 WHARTON STREET • SECOND FLOOR • PITTSBURGH, PA 15203
PHONE (412) 350-4234 • TDD (412) 350-2727 • FAX (412) 350-4330 • TOLL FREE (800) 344-4319

government services should or could assume such a responsibility. But many of those caregivers are caught trying to understand the medical and cognitive changes, accessing resources, maneuvering in an unfamiliar but complex long term care system, as well as coping emotionally, physically and financially.

The normal scenarios we witness, often at a point of crisis as the family can no longer manage on their own and reach out for assistance, are:

- living with modest household incomes or through difficult economic times re no overtime, low wages, or job loss,
- saving for retirement,
- educating young adult children,
- major health or home repair event.

And the strain is even greater when it is a single parent household. In the past few years, we have witnessed situations of four generations of family members that were being cared for by adults who were raising grandchildren and caring for elderly relatives. These situations were a result of drug abuse and incarceration, but also travel out of the area to find work or to serve in the military.

When the call comes to us the ask is for help with bathing a parent, respite or oversight so the caregiver can handle personal business, go to work, attend to family matters, etc. Other requests are for meals, house cleaning, transportation and escort to medical appointments, and sometimes an electric stair glide or expansion of a bathroom doorway. We have found that whether the circumstance are best met by a Medicaid funded service or a program using federal and state dollars, there is almost always a need for additional support and a creative response. So this AAA and many of our peers have implemented services to help address the financial pressures of caregivers taking care of their parents. For example, we:

1. Reimburse low-moderate income households for direct costs to care for elders through the Family Caregiver Support Program
2. Provide ability for elder to hire a relative to provide care so elder can have person trusted and allowing provider to maintain employment
3. Support benefits counseling that provides and links elders to supplemental resources like LIHEAP utility assistance, re VA disability for those who served in combat, SNAP, free or very low cost used medical equipment, social-nutritional services of senior centers, subsidized apartments and access to para-transit especially for frequent dialysis or chemotherapy treatments, etc.
4. Provide advice that is sometimes lower cost, enhances the older person's safety and thus the caregiver's piece of mind. Such as:
 - Encourage out of town relatives to pay for the sneakers/shoes with a built in GPS device so if the senior with dementia wanders away, they can be more easily tracked
 - Build adult day care into the plan as cheaper to spend \$70 per day for 10 hours of care than to have someone come into the home at double or triple the cost. And the elder is with trained staff who are able to feed, toilet and, if needed, shower the person while providing activities, meals, nurse oversight and engagement to send them home to sleep through the night.

- Replace the fixed shower head with a hand held device so bathing someone is quicker, is more agile, and thus engenders dignity with compassion.

What the AAA cannot do is: have families consider purchasing long term care insurance (if it were affordable), help them claim an income tax deduction for caring for an elder who resides at a separate locale, or create the massive awareness campaigns that would help many families ask for help. Be it measures great or small, as a country we must face the often labeled “aging tsunami” so that family caregivers do not suffer financial hardship along with the other burdens of caring for loved ones.

¹ [The MetLife Study of Caregiving Costs to Working Caregivers – Double Jeopardy for Baby Boomers Caring for Their Parents – Full Report \(2011\)](#)