

Testimony before the United States Senate Special Committee on Aging

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Senator Scott, Senator Casey, Members of the Senate Special Committee on Aging:

Thank you for the opportunity to speak with you this morning. It has been a pleasure serving in the South Carolina Aging Network for the past twenty-five years at the local service provider level and at the Area Agency on Aging level. Trident Area Agency on Aging (TAAA) is a private, not for Profit Corporation designated by the South Carolina Department on Aging as the Area Agency on Aging for Berkeley, Charleston and Dorchester counties.

Since the organization was formed in 1991, we have worked within the public and private sectors to develop a cost-effective approach to long-term care services. We serve as the resource connection for seniors, adults with disabilities, family caregivers, and professionals. I lead fifteen (15) staff who have daily contact with seniors and their families. Our office directly provides Assessment, Family Caregiver Support, Information and Referral Assistance, Long Term Care Ombudsman, Insurance Counseling and Senior Medicare Patrol. It is my responsibility to work within budgets, adhere to regulations, and to develop and implement Policies and Procedures; but at the end of the day, it's about making budgets, regulations, and policies and procedures connect with the lives of real people who need our assistance. Annually, our staff and volunteers serve over 12,000 seniors and 1,500 family caregivers.

Since 1965, the Older Americans Act has been the solid foundation for aging services throughout the country. My years of experience in the field have taught me how to cobble together funding from federal, state, and private resources to

meet the needs of a growing and diverse aging population. It is not an easy task to make regulations and criteria match the needs of people in the community. The various subtitles or funding streams within the Older Americans Act make it a challenge to offer and provide individualized services for seniors. With accountability, we need for State Units on Aging and for Area Agencies on Aging to be able to determine how to best spend the limited resources. States, regions and counties all have different needs. It is a waste of resources to collect needs assessment data year after year and not be able to make real changes or offer other services that will keep seniors out of hospitals and delay long-term care placement. The people who we serve are from various socio-economic and ethnic backgrounds. They are elders trying to live their lives with independence and dignity, and younger people who are honoring their older family members with care and support. For this reason, we need to increase flexibility in the Older Americans Act and allow larger percentages of transfers between subtitles.

In 2001, we implemented the National Family Caregiver Support Program in our region. We have seen first-hand the many challenges that family caregivers face, particularly the working family caregiver. On a daily basis, our Family Caregiver Advocate and Resource Coordinators receive calls from stressed out family caregivers who are balancing fulltime employment, their family, and their caregiving responsibilities for aging parents and grandparents. Through the Family Caregiver Support Program, we are able to provide information, access to services, training, counseling, supplemental services grants and respite. The respite that we provide gives caregivers a temporary break from caregiving responsibilities. In South Carolina, the average respite voucher assistance is valued at approximately \$2,000 annually, thus providing a break of around ninety (90) hours per year per

family caregiver. This respite break is helpful to many caregivers; however, it does not begin to meet the needs of working family caregivers. Therefore, we need to expand the Family Caregiver Support Program services to include assistance for working caregivers beyond respite.

The lack of workforce in the home care industry continues to be a barrier in providing respite for family caregivers and home care services. We rely heavily on trained, professional direct care workers to perform personal care, light housekeeping and meal preparation for seniors who are at risk for long-term care placement. We are experiencing a workforce issue in hiring and retaining direct care workers. In our region, the pay for a direct worker ranges from \$10 per hour to \$17 per hour, depending on years of experience, certifications and the level of care they provide. We need to increase compensation for direct care workers and enhance the reimbursement rates for home and community-based service providers who employ these direct care workers.

In 2014, I served on the Steering Committee of the South Carolina Institute of Medicine and Public Health (IMPH) Long-Term Care Taskforce. The Taskforce released a report in June 2015 that became a statewide tool used to raise awareness about various components of the long-term care system in South Carolina. The Steering Committee was comprised of governmental agencies, as well as stakeholders representing the long-term care industry, such as the Alzheimer's Association and AARP. We worked in four sub-committees: Access to Care, Financing and Affordability, Providers and Workforce and Service Delivery. Through regular meetings, we were able to identify duplication and knowledge gaps that exist between government programs like Medicaid and state and private organizations. We developed thirty (30) recommendations and the real work

began when we had to prioritize those recommendations and begin working on solutions to improve long-term care in South Carolina. We need to require agencies that provide long-term care services on the federal, state and local levels to better collaborate in planning and in program development.

TAAA would not be able to meet the needs of seniors and family caregivers without our community partners, such as the Alzheimer's Association, the Medical University of South Carolina Center on Aging, the City of Charleston Mayor's Office on Aging, and the Lowcountry Food Bank. These are just a few of the many organizations that partner with us to strengthen the long-term care system in our region and throughout Palmetto State. Thank you for the opportunity to testify before this committee and allowing me to share my experience in serving older Americans and family caregivers.