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## AGING SERVICES COLLABORATIVE

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### RETREAT SUMMARY REPORT

AUGUST 2008

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AUGUST 15, 2008

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LIFECOURSE STRATEGIES

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## **Aging Services Collaborative Retreat Summary Report**

Members of the Aging Services Collaborative met for a half-day planning retreat at the First Five Community Room, San Jose, California on August 8, 2008. Three outcome goals framed the planning session: (1) A refined Aging Services Collaborative Mission; (2) A proposed structure that builds capacity (leadership & operations) to support the newly refined Mission; and (3) A plan and timeline for the development of an Aging Services Collaborative Work Plan and annual focus that aligns with current resources. To accomplish these goals, retreat participants were encouraged to share their thoughts and ideas openly. The group was able to achieve these outcomes and identify critical next steps for moving the collaborative forward, toward a more fully developed strategic foundation with refined priority issue areas. The following summary provides an overview of the Retreat process.

### **I. Introduction**

#### ***A. Participant Introductions and Retreat Overview***

Lori Andersen, Director of Healthy Aging, The Health Trust, opened the Aging Services Collaborative (ASC) Retreat. After welcoming everyone, Ms. Andersen introduced the session's facilitator, Monique Parrish, who provided an overview of the retreat agenda and then invited participants to introduce themselves and share with one another their responses to two questions: (1) What brings me to this work [aging field/Collaborative]? And, (2) what do I bring to this work? The following responses to the first question resonated with a number of participants:

- Advocacy opportunities to promote services for older adults.
- Interest in advancing the home and community-based service system.
- Promoting quality of life for older adults and their caregivers.
- Giving older adults the societal attention and resources they deserve.

For the second question, a multitude of responses captured what brought retreat members to *this work*:

- Enthusiasm – excitement
- Commitment
- Passion
- Expertise
- Respect for the full spectrum of life (all of its stages and phases)
- Creativity
- Persistence
- Vision
- Problem solving skills

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## II. Aging Services Collaborative Review

### A. Aging Services Collaborative Background

Todd Hansen, Acting CEO, The Health Trust, provided a brief historical review of the development and implementation of the ASC, beginning with the completion and public release of the *Community For A Lifetime* (CFAL) *10 Year Strategic Plan* to advance the well-being of older adults in Santa Clara County. Mr. Hansen outlined the steps taken by aging services executives, who met from August 2006 to June 2007, to address the Plan's *Call to Action*. The creation of the ASC in June 2007 was the conclusion of the group's dedicated effort. Mr. Hansen subsequently described how the ASC took shape and became operational with a diverse membership, organizational structure, work groups, and scheduled meetings. He further detailed developments over the past year by the ASC to sharpen its focus: ASC members participated in an Empowerment Evaluation process in November 2007 and later, in May 2008, a survey to evaluate progress on ASC communication, implementation, leadership, governance, participation, and support. Based on the outcomes of both, the Executive Committee and Action Team agreed the ASC would benefit from a focused half-day planning and development retreat.

Aimee Ready, Vice-President of Assessment, Planning, and Evaluation, The Health Trust, reviewed ASC's current Mission and Vision statements with the participants:

#### **Mission Statement**

The Aging Services Collaborative is a consortium of organizations working together to advance the well-being of older adults and their caregivers in Santa Clara County by:

- Increasing knowledge about and access to a well-coordinated system of information and health and social services that meet the needs of older adults;
- Advocating for policies and influencing funding priorities to enhance the quality of life of the older population; and
- Building community-wide capacity to support and promote the well-being of an aging population.

#### **Vision Statement**

In Santa Clara County:

- Older adults of all ages and diverse cultures are valued members of their community;
- Older adults of all ages are actively engaged in their community; and
- Older adults have a range of options that meet their diverse needs as they age in place.

Lori Andersen, Director of Healthy Aging, The Health Trust, reviewed the current organizational structure of the ASC which includes an Executive Committee, Policy Team, Action Team, and seven workgroups – Caregiver Support, Long-Term Care (not currently active), Transportation, Housing, Health & Wellness, Senior Centers, and Information (see Table 1 below).

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**Table 1: ASC Current Governance Structure.**

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decompressor  
are needed to see this picture.

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Ms. Andersen also highlighted the central focus of several of the workgroups and concluded her review with a brief summary of the May 2008 survey findings. Overall, the findings highlighted the need for a more refined ASC.

## **Survey Feedback: Common Themes**

- Who is leading ASC?
- Need clear governance structure.
- No clear decision-making process.
- Not all critical organizations represented in the ASC.
- What are the “top priorities?”
- What is the plan beyond CFAL for the Collaborative?
- What is ASC’s focus?

## **III. Refining Aging Services Collaborative Direction**

### ***A. Refining ASC’s Mission***

With ASC’s background reviewed, the retreat facilitator invited participants to discuss ASC’s mission, encouraging the group to consider the purpose of the Collaborative and what it could realistically achieve. A full discussion ensued. Participants first identified a desire to clarify the following with respect to the Collaborative: leadership, accountability, and the capacity to build on small wins to move closer toward ASC’s vision. After reviewing these elements, the group examined the current Mission Statement and decided the central purpose of the ASC is to build community capacity to advance the well-being of older adults and their caregivers in Santa Clara County. Participants unanimously agreed that advocacy to support policies and funding priorities, as well as increasing information about and access to services for older adults, was implied in building community-capacity. The group also decided to fold *leadership* [by ASC] into the statement along with the word *maintain*, the latter signaling the importance of maintaining as well as supporting and promoting quality of life for older adults, and, by extension, available community services. Four drafts were proffered; the final (#4) was unanimously selected as the current working strawman Mission Statement.

### ***ASC Mission Statement Option #1***

**The ASC is a consortium of organizations working together to provide leadership in Santa Clara County by building community-wide capacity in a coordinated effort to maintain and support the well being of older adults and their caregivers by advocating for policies, priority initiatives, and funding that meet the needs of older adults and their caregivers.**

### ***ASC Mission Statement Option #2***

**The ASC is a consortium of organizations working together to build community-wide capacity to support, maintain, and promote the well-being of older adults and their caregivers in Santa Clara County.**

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## ASC Mission Statement Option #3

The ASC is a consortium of organizations working together to provide leadership and build community-wide capacity through the promotion of initiative and funding priorities to support, maintain, and promote the well-being of older adults and their caregivers in Santa Clara County.

## ASC Mission Statement Option #4 – Unanimous Strawman

The ASC is a consortium of organizations working together to provide leadership and build community-wide capacity to support, maintain, and promote the well-being of older adults and their caregivers in Santa Clara County.

### ***B. Refining Aging Services Collaborative Structure***

To identify a proposed structure that would build ASC's capacity to support the newly refined mission, participants were encouraged to discuss the strengths and weaknesses of ASC's current structure. Several themes surfaced during this discussion, most notably the absence of a formal decision making body for the ASC. Other comments included:

- *Policy Team - there is confusion with respect to the roles, responsibilities, and leadership of the Policy Team and its interaction with the Action Team.*
- *Action Team – we need to delineate the roles and responsibilities of members of the Action Team; right now, the workgroups tend to work on their own.*
- *Executive Committee – there appears to be redundancy in the roles and responsibilities of the Policy Team and the Executive Committee.*
- *Overall commitment and passion is high among Collaborative members, but little progress has been made toward achieving specific outcomes – there is “no pot at the end of the rainbow.”*
- *Form follows function – we need to establish an effective organizational structure, consolidated leadership, and criteria for priorities and projects.*

Participants thoughtfully addressed these comments and after proposing various iterative structural changes to ASC's organizational chart, elected to propose establishing the following:

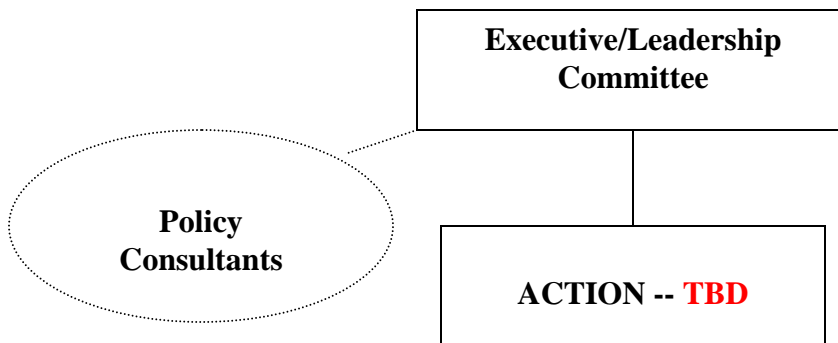
1. Executive/Leadership Committee – with responsibility for overall ASC leadership, decision-making, and deployment of resources. The Committee will be comprised of the following:
  - a. Co-Chairs – to assume the leadership role with specific functions to be determined.

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- b. Core Standing Members – organizations that have played a seminal role in the development, funding, and ongoing support of the ASC would be granted standing representation on the Executive/Leadership Committee – organizations to be determined.
  - c. Chairs of designated action team priorities – these chairs will be determined following the selection of ASC action team priorities.
- 2. Policy Advisors (Resource Team) – a group of individuals representing policy, funding and government professions or cross-cutting organizations will serve as a resource to the ASC with consultation, guidance and assistance on matters related to policy, advocacy and funding. The ASC will also be a resource for these individuals in their work around older adults issues.
  - 3. Action – the specific priorities areas and composition and structure of the Action Team was not determined. Participants recommended discussing this critical area with the full ASC Collaborative.

Table 2 depicts the proposed revised ASC structure:

**Table 2: Proposed ASC Structure**



## IV. Summary Conclusion

### A. Development of ASC Work Plan

Retreat participants discussed the process for completing a new ASC work plan for 2008-2010. Building on the progress of the retreat and the proposed revisions, the following strategic foundation elements remain to be completed:

- 1. A finalized organizational structure, to include:
  - a. Defined roles and responsibilities for members participating on the Executive/Leadership, Policy Consultants, and Action Team groups.

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- b. Defined ASC membership - organizations/individual participants
- c. Defined priority areas
- d. Venue for communication

## ***B. Next Steps***

To achieve the goal of moving forward with a refined strategic platform, participants agreed that a summary of the outcomes from the retreat would be presented before the full Collaborative on September 10, 2008. Additionally, a process recommendation, for finishing the identified elements to a revised ASC strategic foundation, would be discussed with the Collaborative at that time. Retreat participants acknowledged the importance of articulating for members, at the meeting, the half-day retreat process and proposed changes to the ASC. A subgroup of retreat participants volunteered to assist Lori Andersen with preparing the September 10<sup>th</sup> presentation.

Throughout the day, participants offered important feedback, insights, and thoughts about both the strengths and challenges of the enormously important work of the Collaborative. At the conclusion of the day, members acknowledged the value of healthy discussion, debate, and, most important, consensus building (***Forming, Storming, Norming, Performing***). The retreat process also reminded participants that the *collective* skills and talents of individual members were the key ingredients of an effective and robust Collaborative.

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## APPENDIX A: RETREAT AGENDA

### Aging Services Collaborative Retreat

Friday, August 15, 2008

8:30 AM – 1:00 PM

First 5 Community Room, 4000 Moorpark Ave., San Jose, CA

- 8:00 – 8:30 AM**                      *Continental Breakfast*
- 8:30 – 8:45 AM**                      *Introductions and Retreat Overview* – Monique Parrish
- 8:45 – 9:15 AM**                      *Part I: Aging Services Collaborative (ASC) Review*
- *Background/History* – Todd Hansen
  - *Mission Statement & Vision* – Aimee Reedy
  - *Structure – Governance; Role of Executive Committee, Action Team, Policy Team, Work Groups* – Lori Andersen
  - *Current Priority Areas of Focus* – Lori Andersen
- 9:15 – 10:30 AM**                      *Part II: Refining ASC Direction*
- *Mission Statement* – What is the purpose of the Collaborative? What can it realistically achieve?
  - *Structure* – What needs to change for the Collaborative to progress & meet vision?
    - *Leadership & Governance* (Who leads? For how long? To do what? What is the decision making process for the collaborative?)
    - *Committee/Teams/Work Group* (Role, function, purpose?)
  - *Operational Issues* (staffing, fiscal agent, meetings, communications, financing etc.)
- 10:30 – 10:45 AM**                      *Break*
- 10:45 – 12:00 Noon**                      *Part III: Development of ASC Work Plan: 2008-2010*
- *Aligning Structure with Focus* (How do we further develop a Blueprint – priorities for the ASC? How does this align with the proposed structure? Define a process and timeline that will be used to get us there)
- 12:00 noon – 12:30 PM**                      *Lunch*
- 12:30 – 1:00 PM**                      *Part IV: Summary/Conclusion – Next Steps*
- *Recommendations To Collaborative for Feedback* (Summary of retreat recommendations to ASC; how will they be presented on September 10)

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## APPENDIX B: RETREAT PARTICIPANT LIST

**Beverly Aabjerg**

Director, Marketing and Outreach  
On Lok, Inc.

**Lori Andersen**

Director of Healthy Aging  
The Health Trust

**Marilou Cristina**

Director, Older Adult Services  
Catholic Charities

**Sandi Douglas**

Community Services Manager  
Housing Authority of Santa Clara County

**Megan Doyle**

Policy Aide  
Office of Supervisor Ken Yeager, District 4

**Todd Hansen**

Chief Operating Officer  
The Health Trust

**Lisa Hendrickson**

CEO  
Avenidas

**Anne Im**

Director, Community Programs and  
Advocacy  
Asian Americans for Community  
Involvement, (AACI)

**Christina Irving**

Family Consultant  
Family Caregiver Alliance

**Diane Lindberg**

Acting Recreation Superintendent  
Office on Aging, City of San Jose

**Aimee Ready**

Vice President, Assessment, Planning, &  
Evaluation  
The Health Trust

**Meghan Revolinsky**

Council Assistant  
Councilmember Pete Constant, City of San  
Jose

**Stephen Schmoll**

Executive Director  
Council on Aging Silicon Valley

**Roland Velasco**

Board Aide  
Office of Supervisor Don Gage, District 1

**Scott Vu**

Program Coordinator  
The Health Trust

**Maureen Wadiak**

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