



Latino Health Council

July 19, 2018 | Meeting Minutes

Agrace Grief Support Center

2906 Marketplace Drive, Fitchburg

Present: Shiva Bidar-Sielaff, Co-Chair, Elena Espana-Regan, Juan Aguirre, Brenda Gonzalez, Maggie Gritt, Aide, Staphanie Mondloch, Virginia Lopez, Arely Tinoco, William Parke-Sutherland, Dale Marie Barrett, Rodrigo Valdivia, Nina Gregerson, Natalia Hildmen, Jaime Sathisvam, Anne-Louise Plesh, Carmin Valderi, Dianne Maglaque, Kristi Jones, Judith Rasmussen, Lauren Cnare, Jeff Golden, Jessie, Sarah

Call to Order

- Shiva Bidar-Sielaff called the meeting to order.

Minutes (approval/corrections)

- The June meeting minutes were approved by unanimous consent without corrections.

Announcements/check-in

- Agrace Hospice has one new position as a grief counselor, which includes an added preferred qualification that they be bilingual (Spanish).
- The LHC welcomed Lauren Cnare, from St. Vincent de Paul as a new member.
- Membership committee reported on options for adding dental representation to the council. Familia Dental, Total Dental, and More Smiles WI were discussed. Shiva noted that she feels more comfortable reaching out to Jeff Okazak, from More Smiles WI. He has attended prior meetings. Shiva will connect membership committee to More Smiles WI for follow up.
- ABC for Health has hired Juan Aguirre as a health benefits assistant. ABC staff met Juan during an event sponsored by the Latino Health Council.
- Centro Hispano community wellness workers (Promotoras de Salud) have started providing in-home visits. Program also offers Postpartum support groups on the second Monday of the month and more and more participants are coming to their programs, so it's expanding.
 - LHC was asked to partner with Centro's community wellness program and apply for a WPP grant to advance projects around health, Cross-sector leadership. The council did apply as a co-applicant with Centro. This presents a good opportunity to deepen the partnership.
- The Benevolent Special Project Free Clinic's annual fundraiser is coming up soon. 60% of clientele are Latino, This is the only clinic in the area that provides free specialty care services.

Old business:

- The Council sent fundraising letters via email through the listserv this year, asking for people to please forward on to the appropriate person in your organization and to consider supporting or increasing your support of the council. Some members were having difficulty getting information through the listserv.
 - Shiva asked everyone who did not receive the letter to share their current email and Fernando will follow up with them.
- Fernando provided a brief update about the website. He's hired someone who will begin updating the website shortly. Members were asked to please visit the website, review your information, and follow up with Fernando as necessary. He will then contact our web consultant who will make changes.
- Shiva updated the council about the Latino Consortium for Action, which meets monthly Saturday mornings. She indicated that this is the place to take political advocacy issues, funding opportunities, participation in marches or actions, and other political asks. They also discuss and debrief emergent issues, such as the current state of immigration and family separation. There is also an immigration legal coalition working to address individual and system advocacy needs. The coalition has received local funding to support legal immigration assistance for those in need. If you have people dealing with legal immigration issues, please ask them to contact Fabiola Hamdan and she will help with referrals and support. The county also offers wrap-around funding to provide additional support for families. Shiva will distribute more information through the listserv.
 - Fabiola Hamdan can be contacted by email or phone at Hamdan@countyofdane.com (608) 242-6260
- Shiva asked that people please consider contributing to the legal fund if they want to support local families and local efforts. A lot of what is happening impacts local families, including families who live in the Madison area being separated and facing deportation.

New business:

- **Jessie Shiveler, grief support center staff,**
- Agrace Hospice gave a tour of their grief support center and presented information on that as well as their hospice programs and services. See facility picture attached to the minutes.
- They provide grief support to families as well as offer adult only groups. They offer special groups for partner/spouse loss, and will work with businesses, schools, and other groups who've experienced collective loss.
 - Bridges (an adult support group) allows walk-ins, so people do not have to pre-register like they do for the family support program.
 - This fall Agrace will be piloting an LGBTQ group co-facilitated with Outreach
- Agrace Grief Support Center is the only one of its kind in the county.
- The space is designed to meet grieving children's needs. The building dedicates 75 percent of its space specifically for kids ages 5-18.

- Along with the help of volunteers, children are provided with a variety of spaces and mediums to express their grief. Support and conversations are very kid-driven.
 - The building includes specific rooms geared toward kids of all ages: art room, teen room, high energy room, play room, and hospital room.
 - The rooms, toys, art, and space offers grieving children opportunities for therapeutic play.
 - No childcare is available for families with children under the age of 5.
- Family support groups run from Sept-May and meet during the evenings from 5:30-7 with a meal provided at no additional cost. People can end their sessions earlier than May if they so choose.
 - Each session costs \$20 for participants, but no one is turned away due to lack of resources, and many do not pay anything or pay a discounted rate.
 - Any families who have experienced a loss are eligible to register for family support programs. Cohorts average about 6-10 kids with their parents.
- Agrace does not require social security, insurance, or immigration status verification in order to register for and receive their services.
- Agrace offers adult and family support groups during the weekday evenings. All grief support group programs happen in this building. One-on-one support can be offered at other locations as needed.
- Volunteer qualifications – Agrace staff vet and train volunteers on how to support grieving children. Volunteers provide support to children throughout the program. Volunteers receive about eight hours of training.
- **Sarah, an Agrace social worker discussed the hospice programs more generally**
- Currently, Agrace serves nearly 900 patients, either through home hospice or at their facility.
 - Most receive in-home hospice. Currently only 36 of 50 beds in the facility are utilized. They also have the capacity to take emergent care patients.
- Agrace tries to meet everyone where they're at. Haven't had someone from the Latino community stay long-term at Agrace, although they have in-home hospice patients who are Latino. Sarah suggested Latino communities tend to take care of their families and less likely to use LTC/nursing home/hospice services.
- Anyone with a dr's prognosis of six months or less to live who is not pursuing active curative treatment is eligible
 - Despite eligibility requirements, length of stay varies greatly. Patients sometimes receive hospice care for one year or more and some only stay for a few hours. Transferring patients to hospice even if they are likely to pass in a few hours offers many benefits to the patients and family members.
 - The ultimate goal of hospice is for comfort at end of life not for prolonging life, but some treatments that may extend life can be allowed.
- Agrace does not require patients have a DNR order (do not resuscitate) in order to participate in hospice services, but hospice care is generally not for prolonging life.

- Hospice team usually includes a nurse and social worker who are in the home to manage transition within one day of being transferred to hospice.
 - Initial assessments also take the primary caregiver into account – in order to assess their well-being. The social worker’s role is often more directed toward a caregiver. Nursing staff tends to be patient-focused. Overall, the interdisciplinary team pays attention to both patient and family caregiver/s.
 - In home hospice services continues work with PCP for orders, med changes, etc
 - Nursing visits required once per 15 days, but generally 1/week
 - Social workers check in with patients and families about 1/mo
 - CNA comes to the home 2-3 times per week
 - Can provide 24 hr care in extreme circumstances of home hospice
- Medicare and private insurance generally pay for services. Hospice is full service so they have or can provide many items, devices, equipment, services that people need.
 - Ideally face-to-face intake process within 1-2 days after referral/contact.
 - Patients with insurance need a referral for services.
 - For uninsured patients, Agrace does not send a bill to patients or families.
- LHC members expressed their strong support for Agrace from their past experiences with loved ones.
 - Shiva shared that she’s heard feedback from members of the Latino community have used hospice (mostly in home) and had a very positive experience.
 - Agrace has been helpful to staff of other HC organizations
- Agrace also offers palliative care and a new Age-at-Home program (private pay only, provides care mostly for activities of daily living.
- Sarah also mentioned that Agrace has a Family Care Giver council that operates in an advisory capacity.

Shiva adjourned the meeting at 11:25.