SteppingStone continued and enhanced the care we provide during the first six months of this year, a time of uncertainty because of the COVID pandemic. Our priority remains unchanged: helping the hundreds of frail elders and adults with disabilities that we serve maintain their health and stay connected to their community.

At our four Centers we continue to provide care both on-site and remotely, using telephonic and online tools. Most participants receive both types of care (hybrid services). Some clients remain reluctant to return to their Centers, so they attend only occasionally or not at all. We are encouraging all participants to resume getting all care at their Centers and rejoin their friends and community there. Isolation and loneliness are serious health threats to seniors, which the congregate nature of adult day health care (ADHC) can effectively address.

As of June, we are providing approximately two-thirds of client care days in-Center and one third remotely. State authorization to provide remote adult day health care services is planned to end on September 30 of this year. By that deadline we hope to have nearly all participants fully returned to in-Center care.

Core care activities remain unchanged. Each participant is evaluated by their Center’s Multi-Disciplinary Team (MDT) and an individualized care program is created. (The MDT consists of the Center’s nurse, social worker, physical therapist, occupational therapist, and activities coordinator.) This care plan is then implemented by each clinician, who monitor closely the participant’s health in coordination with all Center staff. This includes a daily staff huddle to share concerns about individual clients and address emerging issues. Every six months the formal evaluation by the MDT occurs again and the care plan is adjusted as needed. These core functions keep participants healthy and have remained in place throughout the pandemic, including the last six months.

Social and recreation activities have increased as more clients return to Centers and COVID restrictions lessened. Group activities have increased, ranging from games and walks to physical therapy and yoga. Participants have more opportunities to socialize with each other and make friends. This will be boosted significantly by the return in July of a full lunch service, augmenting the snacks that are already being provided.

SteppingStone continues to enroll new participants and has added dozens of new clients over the last year. We expect this trend to accelerate as the pandemic settles into a steadier state and our care Centers fully resume standard ADHC operations.

The uncertainties caused by the pandemic, with changing health guidance and regulations has been challenging for SteppingStone and our clients. We are aggressive in our safety measures including testing, masking, and social distancing. We are fortunate to be fully staffed but have had to address limitations from some contractors that are having difficulty returning to pre-pandemic levels of service. This includes our past meal provider, who ceased operations during the pandemic and has now been replaced. (Good tasting, nutritious hot lunches are a key element of our program.) The Program Directors at each center are all doing exceptional jobs handling these issues while continuing to provide high quality care for their participants.
First and foremost, I brought to this discussion the perspective of a frontline care provider, relaying what I was hearing from SteppingStone staff about the challenges they and our clients were facing. I pushed hard for clarity around public health guidance and regulations, which are essential to planning provision of services. CAADS also worked to secure funding from the state's large surplus for one-time support to help adult day service agencies recover from the impact of the pandemic. This was successful and the California Department of Aging will launch a new grant program to assist agencies like SteppingStone throughout California.

I also serve as the co-chair of the SF Coalition of Agencies Serving the Elderly (CASE). Over the last six months our priorities have been:

**Advocacy**

SteppingStone has long served on the board of directors of the statewide advocacy group - the California Association for Adult Day Services (CAADS) and in January I became chair of that board. In addition to the normal responsibilities of the chair of any board of directors, I have been deeply involved in the association's work in helping California craft the statewide response to COVID specific to adult day services.

**Enhancing Care**

SteppingStone is both continuing and enhancing the care programs we provide participants. Our partnerships with the Family Caregiver Alliance and Curry Senior Center, to provide additional support to caregivers and augmented mental health services, continue. Our contracts with the City of San Francisco for enhanced care agencywide and specifically for recently housed/formerly homeless residents, have been renewed. In the last six months we have added other programs to enhance care including:

- A new Alzheimer's Day Care Resource Center has begun operations providing care specifically to participants with moderate or severe dementia. (Approximately 50% of SteppingStone clients have some form of dementia.)
- The LGBTQ+ Project has been awarded a new five-year contact and will expand both care and outreach activities in coordination with SteppingStone's longtime partner, Curry Senior Center. This remains the only LGBTQ+ specific adult day health care program in California.
- After a long delay SteppingStone's Outreach Project is now underway. The project is designed to connect isolated seniors and adults with disabilities to services, particularly those living in SROs and homeless San Franciscans.
- We have deepened our longtime relationship with the UCSF School of Nursing. In addition to being a training location for RNs seeking advanced degrees we now have one of their instructors on site weekly to provide ongoing education and support to all SteppingStone nurses.
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I also serve as the co-chair of the SF Coalition of Agencies Serving the Elderly (CASE). Over the last six months our priorities have been:

- Communicating to government officials and elected representatives the incredible response to the pandemic by the San Francisco non-profit community in keeping older adults and people with disabilities engaged and connected to their communities through a series of organization profiles.
- Advocating for funding to close the Digital Divide for older adults and people with disabilities to help with internet connection, supplying devices, and providing education and technical support, thereby reducing social isolation and loneliness.
- Informing and supporting the Dignity Fund Community Needs Assessment process which occurs every four years with the Department of Disability and Aging Services (DAS). It is intended to identify gaps in service delivery for San Francisco’s older adult and marginalized populations.
- Provide the non-profit community an array of presentations and trainings monthly to increase awareness of programs, services, accessibility, and to highlight best practice in service deliveries, as well as creating awareness of legislative actions that impact the populations served by San Francisco non-profits.
It is now clear that COVID will be with us for the foreseeable future and SteppingStone will need to operate in that context. We will continue to provide robust care while seeking to innovate and enhance programming. This is done Center by Center by teams of dedicated clinicians who care deeply about their clients and work every day to keep them healthy and improve their quality of life. I, and the other administrative staff, do everything we can to support them, as does our board of directors. We will continue our advocacy at both the local and state levels to ensure that the needs of the people we serve are heard by those who have the power to help them.