

The Community Preparedness Webinar Series Presents...

Preparedness Considerations for Aging Americans

Recorded September 20, 2011

>>Thank you for joining us and bearing with us to the technical difficulties. I am Shawna and I currently work your at FEMA as part of the national awareness team. We are posting today's webinar on preparedness considerations for aging Americans in honor of national preparedness month. I will be able to talk about this national preparedness effort later in the presentation.

Today you will hear from Cindy about the US administration on aging. Did he is the principal a deputy assistant -- secretary. You also hear from Heather about her experience with disaster response it in West Virginia senior spirit she is the state coordinator for the -- and were some of the volunteer West Virginia, two states community --. I will wrap up today's -- and economic sure you, your organization and community are prepared.

With that, I would like to introduce our first speaker, Cindy.

>> Good afternoon everyone. I want to thank you for joining us. I want to thank FEMA for hosting this webinar. I do not think any of us can be too prepared. It is nice to know that when we are prepared, our federal government, state governments and local government are working together. As Shawna said, my name is Cindy, and the principal deputy secretary for the administration of aging. I am mostly responsible for our regional correlation, health disparities in minority services as well as emergency preparedness response and recovery.

I am also a former state rector for the state of New Mexico. Although New Mexico has not had to meeting match -- national disasters, thankfully we do have experience in fires and other emergencies where we need to respond to the needs of our citizens.

What I want to do is give you a quick overview of the Department of Health and Human Services. Talk a little bit about how we work together and then how we work together in disaster preparedness, response and recovery.

The Department of Health and Human Services includes the administration on aging, or AoA. We have operating divisions, Levin operating divisions including administration for children and families, Center for disease control and prevention, centers for Medicare Medicaid the substance abuse and mental health -- to name a few. You can see the full it lists on your screen and we definitely work with all of these are the -- operating divisions.

We also work with staff offices or staff divisions. As you can see, the assistant secretary for planning preparedness and response, is our lead agency for coordination of disaster response and recovery.

The assistant secretary, for preparedness and response. To give you an overview, want to go back a little bit to the administration on aging. I give you brief history lesson here.

In 1965, three major programs were enacted in the United States. Medicare, Medicaid and the older Americans act. Each of these programs work these lines for security, independence and to help seniors have a choice in their services and programs that were available to them throughout the country.

The old Americans act is a legislation that is really our primary -- legislation, as the ministration on aging. The older Americans act, I lamented, really is a unique piece of legislation. It is really designed for older Americans. It is to provide adequate income and retirement to really look at physical and mental health, having long-term care services and support, -- culture and recreation opportunities or civil engagement and really look at a continuum of care at the national federal and most importantly at the local level.

The key provisions of the older Americans act are really organized in seven titles. I'm going to highlight those. Title I, is objectives, title II creates the administration on aging, and title III, are the grants to state and community programs. This is a program that are administered at the state and local levels. We have federal funding, state funding which is a required match, as well as local funding to really provide supportive services and support senior centers.

Most of our programs over the majority of our programs are funding our nutrition services, both card -- target Mills as home delivered nutrition programs.

We also provide technical assistance and some grant funding for disease prevention and health promotion.

National family caregiver support program, as we talk about -- response recovery, we have to look at, especially when we look at older Americans and people disabilities, we need to look at the entire community, the family and specifically their caregivers.

Title IV is training research and -- program to help supports, -- the danger at the state level. Senior community employment will be partner with the Department of labor with this program.

Title VI provides grants that is similar to title III, but for American Indians, Alaska native and native Hawaiians.

Title seven, focuses on older life protection and are alarmed -- long-term care in this program.

I want to just outlined quickly the mission of the administration on aging and as I have been discussing previously, this is really to develop a comprehensive coordinator and cost effective system of home and community-based services that helps elderly individuals maintain their health and independence in their homes and in their communities.

We know that people who are in the -- what is it homes as long as possible. This supports that we provide our state area agencies on aging and local providers, we really do help achieve this mission and are really focused on the older person themselves, their caregiver and their community.

I cannot talk about administration on aging and how we operate unless I give you a really good picture of the aging network. This is how the aging network helps to keep and serve a Levin million seniors and their caregivers to help them remain at their home through community-based services. As I have mentioned, the administration on aging is a part of the Department of health and human services and we are actually the smallest agency of HHS.

We have a very broad reach to working with our state units, which we have 56 state units and territories. 629 area agencies on aging and we also work directly with 246 tribal organizations. Our federal dollars go to the state programs and the states then find the area agencies on aging and then we also provide funding to the tribal organizations that we directly from the tribe.

They have to, these organizations in order to receive these federal dollars, they have to have a state plan. As part of that's the plan it includes emergency preparedness and response. The local area agencies on aging seen -- aging were so service providers. I need to highlight the number of volunteers and their reliance on volunteers. We know we cannot do these programs without our volunteers.

Parts of our administrative structure includes regional offices. The Department of Health and human services has 10 regional offices and under the first bullet, we actually have five regional administrators that work directly with us in Washington but they are located in the New York office, Dallas area, Chicago area, Denver and San Francisco. We have regional offices and we will talk a little bit more about the role of the regional support centers and their emergency preparedness response and recovery in just a few minutes.

Our regional offices definitely provide a key local presence for the programs of the administration on aging.

As I have mentioned, you can see the last bullet where it says serves as a conduit between the state unit on aging and the central office in time of disaster. What I want to do is let you know little bit how that actually works.

When there is a disaster or an emergency were to occur, our regional offices are in constant contact with the state. They get information about the status and the situation of the services that are provided to seniors and people living with disabilities. They report that back up to us and we coordinate that with the emergency operation center for the Department of Health and human resources Secretary. We coordinate a major sponsor with the entire department .

We also provide a report to our assistant secretary, and we follow up with disaster grants if it in emergency declaration is made and an application is made by a state or a tribe.

As I have mentioned, in responding to emergency declaration of disaster, there is a lot of coordination that needs to take place. The administration on aging is definitely a part of that. Here we have listing the federal court nation that we stay in contact with. The FEMA, Federal emergency management administration, Health and Human Services, Veterans Affairs, American Red Cross, Department of Defense as well as many others.

And internal to Department of Health and human read services reaches, these particular regions provide human services and social services and support. We actually have a very strong court nation with them. The administration for children and families, NASS, substance abuse and mental health services demonstration, CMS, and others.

As I have mentioned, we at the regional office stay in touch with the state unit on aging. We get situational reports from the state unit, they tell us what is going on, what the situation is, and where their needs are. We're really looking for a needs assessment.

A get their information from their state emergency preparedness office or their local area agency on aging or local service provider. It is definitely a local information. We get it from the ground up, the grassroots level, they tells what is going on and we feed that information all the way up into the secretary operation center so we get a really big picture of what is going on.

What do you do? What are some the things that you could do? I know we will talk little bit more about that as well, but I want to highlight our website which is www.oao.gov a specifically there is -- a guide. It covers a gamut of things that you can do as an individual, as an area agent agency, as a community, as a interested party, nonprofit organization. What can you do in your community to get involved or prepared and especially in response to a disaster. This emergency assistance guide is actually very good tool for you.

Another resource that we have is the eldercare locator. The eldercare locator is a public service of NASS. It really is a first step in finding resources both in any community throughout the country. Again we have our website to their add eldercare.gov. Is actually great resource not just in time of any mergers you response or recovery but it is definitely a good resource for you just looking for particular services and reports that you may know someone that needs, or you might need, as a caregiver. You're looking for something or some particular type of service in your community, the eldercare locator is therefore you as a resource.

I wanted to just again, highlight what the administration on aging rule is, who we are. I think it is very important for us to start, who is the administration on aging, what do we do, how do we work with your states and in your community and also to let you know that in times of emergency response, we are definitely monitoring what is going on in your state and in your community and we work very closely with all of the other federal agencies and definitely within the department of health and human services.

Thank you again for joining us today and I will be available later on for questions and answers. Thank you.

>> Thank you Cindy. Now you will hear from Heather.

>> Hello everyone, I am Heather I am the state coordinator for the citizen corps in West Virginia. I work at a volunteer West Virginia which is the state commission for national community service. I was asked

to talk today about a few examples of local experiences relative to serving senior populations and disaster.

One of the things that we have in West Virginia is a rapidly aging population especially in the southern coal field area. A lot of younger residents are leaving for work opportunities and more population centers. We're left with retirees and a lot of older citizens in the southern Colville switches these other per the state most known to flooding.

Many of the seniors in the southern part of the state are isolated by geography and poverty. A lot of times when the floodwaters rise, the roads are washed out and so it is very difficult to actually get to people's homes and reach them.

There are also not a lot of community resources available to you -- to serve the populations. Residents really have to depend upon themselves for support and a few of the local emergency managers and first responders in the area and sometimes that can create a challenge.

One of the challenges that I wanted to mention is that those residents are often victims of flooding over and over again because of their houses are located in the floodplain and they have often lived in these homes their entire lives. They at either cannot, or unable to move or are unwilling to move. Sometimes during the mitigation phase of disaster, there have been some challenges in getting people to actually move their homes to a safer location.

Another challenge that I wanted to mention especially in West Virginia is that people's homes are often built in mountain valleys like in callers. Usually there is a stream or channel of water running up and down the hall or so there is a roadway and then there's personal robbery. People have purchased to get from the road to their home and the bridges are actually there personal, on their personal property.

The bridges during flooding often get washed out and we work a lot with the volunteer agencies, but there are very few agencies that we are aware of in West Virginia that can have the capability every building does personal property bridges. This has become a huge issue with seniors another boulder roll residents because it is impossible to get them from their house, evacuated to a shelter and it also is impossible to reach them over the broken bridge.

Actually, the picture of you all see it on the screen, you cannot really tell what it is, but that sort of railing there is the top of one of those bridges. You can see how the water just came right across and it really isolates anyone that may have a critical need.

Another concern for seniors here in West Virginia is versatile safety. Sometimes during the recovery phase of the disaster, FEMA or state employees or other people might be going door-to-door to conduct damage assessments. Some of you are flavors is that because most of these people are coming in from out of the local area, they are strangers. The seniors, because they are are ready in a folder full situation they are hesitant to open the door and answer questions.

Is that hard to get information.

And one of the more northern areas of our stay, there was an agency that actually issued cards to seniors and people disabilities that would be special during an evacuation and those cards, they were asked to put them in the window to say am I need extra help, I have evacuated so that would indicate to the responder what they needed to do.

This was a huge concern in the disability community and a senior centers because that then left those people who are are a folder will open to opportunists and the community to cause more harm.

This illusion that we find to that is really the network within the community where the seniors are relocated with. This is why senior centers and other service agencies are so important to be connected with. As an emergency planner, it is important to rather than going to the individuals, to go to the agencies and the community that the individuals are you fill go with.

We have also used volunteers from the community to be liaisons, to help seniors to fill more comparable. Of course church groups really have their hands on who in their community needs extra assistance. Church groups can be utilized to help with checking on them if something happens.

In the winter of last year, much of the eastern seaboard was buried with snow. Volunteers were mobilized to partner with Meals on Wheels and go to the homes of the most vulnerable residents they dig those people out because they did not have the capability of digging themselves out on the snowstorm. While into his were mobilized in Maryland, DC and these are parts of West Virginia.

When considering how to -- a senior partnership is where he critical person other examples we have of that, in the Valley, we have a lot of -- the retired and Senior row grahams parted with Meals on Wheels to deliver our prepare does and shelter in place kids and trained those homebound seniors in how to shelter in place in case of a chemical emergency peer

We have also had citizen corps and certain members partner with senior centers to conduct first aid and CPR training. We have done a lot of work with the Foster grandparent and Senior Corps programs that are offered in our state the cut is a lot of those can provide peer to peer networks and support for homebound and folder both operations.

We also have several organizations in the state that are actually networks of faith-based communities, with the churches. The church members have taken training on first aid, CPR, ASIC preparedness and then they actually sort of take charge of their own population at the church and go out to visit congregants and make sure they are prepared and that they can take care of themselves.

During a disaster, they will call them, or they cannot get them on the phone, they would go out to check on them.

The last thing that I wanted to point out is that I am encouraging older Americans to be involved in services in the community especially in disaster service. Recent preparedness from the research office the people who are involving disaster -- armed more likely to be prepared. There are more opportunities out there for all ages and all ability levels.

I wanted to thank you for asking me to be here today and thank everyone for calling in and listening to this information. I think it is very important.

>> Thank you Heather and it is always great to hear from others about the importance with partnership the consumer to see responses hopefully after this call will be able to motivate people to work together in preparedness as well.

At this time we also have Peter's joining us to talk to you about the current emergency management efforts in New York state. It's includes the coverage of hurricane Irene in the New York State area as well as recovery activities really going on in New York. Peter works within your state office for the aging. Peter is an aging supervisor was responsible for administration at 59 area agencies on aging throughout New York State including New York City.

Peter?

>> Hello. Good afternoon everyone. Prior to the hurricane arriving, the hurricane was very much anticipated in New York State. The weather center had the hurricane are rising in downtown Manhattan on Sunday morning 28 August. It would also impact Long Island in the lower Hudson Valley. In anticipation of this, we were in very much involved in the preparation activities with the local offices for the aging.

The governor state of New York issued a proclamation on August 26 stating is that of emergency. We were working with our local office to ensure that in the first part of this, that there were be stable mills and that preparedness activities engaged for the weekend of August 27 and 28th.

In anticipation of the hurricane arriving, Dierks State office for the aging is a member of the New York State emergency management network. As a result, we were called to participate at the state emergency operations center on Saturday, August 27. We were providing 24 hour a day, seven day week coverage at the emergency operations center and shoring that area agencies had first off, secured lists other folder will elderly, which each of them had. The vulnerable elderly as we described them, they are the people on the home delivered meals over them or the Congo get mail program as well as the case management clients.

In case of an emergency, these are the folks would want to turn to first to make sure that they are taken care of. We also contacted each of the area agency on Saturday the 27th two issue that they had been involved in their local emergency operation officials and many of them were other local emergency operation centers at that time.

On the 28th, the storm hit, the lower Hudson Valley, it was not as bad as it had been anticipated but the storm continued up the Hudson Valley and the storm deposited a fantastic amount of rain in the lower Hudson Valley as well as all the way up the Hudson Valley into the Albany area and into the Adirondacks and eventually into Vermont.

This extreme weather created devastating flooding in the Catskill mountain areas. Many towns were decimated by the flooding that occurred. The flooding occurred over a three-day period wiping out homes, businesses, livelihoods, and Senior services, etc.

During that period of time, the state of emergency operation center was open, we were there to ensure that aging services were going to be provided for the most oval verbal.

For example, in as the County New York, flooding, severe flooding closed the mill center for argument little delivered meals for the seniors up there. We were working with the local emergency officials as well as the state officials to ensure that food would be delivered if necessary to the town, to be distributed to the seniors and residents up in that area.

On Wednesday, the 31st, a presidential declaration was declared and at that 70 disaster relief centers would be established within the state. At that point, we were going to shift our response activities to a recovery activities. We were then, in that instance working with our local offices for the aging to staff disaster relief centers.

There were seven in the state originally, and over a period of time, currently there are 20 open in New York State. To give an example of the magnitude of the storm, within New York State, we had 59 area agencies on aging, 24 of them were affected by the weather events. It affected a grand large area within New York State.

We also were using in terms of emergency preparedness, we have a list of all of our area agency contractors in terms of directors and second, if you will, for emergency notifications. We have cell numbers were we can contact people off hours so that we are able to get services established on a Saturday or Sunday which came in very handy on the 27th and 28.

Overall, at this point we were working early on in the first weekend. The last week in August, the first week in September with the storm that was going to be ending fairly soon. Unfortunately, tropical storm lee came to New York State and deposited 13 inches of rain and then some in an area known as the Southern tier of New York State.

The flooding was probably in terms of income person about a 500 year flood. Area agencies on aging in that area which is the Binghamton area, Tyco the County area, those offices were closed. They were flooded on the services were just opted, they were working with their local emergency officials to make sure that the people who needed to be rescued were rescued, the people that it'd to be evacuated were evacuated and the use their emergency list to help with that process.

At this time in New York State, we are in the process of having 20 operational disaster relief centers. These centers are out and buy FEMA. At each of these centers the office for the aging is represented by local officials as well as supplemented by staff from the state office for the aging.

Since August 27, until today, and even today we are ready to dispatch staff to the Tioga County area to help with recovery and disaster assistance activities.

We have been very busy for a small agency. There are only 110 of us that work for this office of the aging and many staff, probably 20% of the staff have been directly involved in recovery and response activities.

>> Thank you Peter. Thank you also to Cindy and Heather for joining us for this webinar that we have been doing in honor of national preparedness month. Before the two questions and answers, what like to talk to you for a second about our national preparedness effort.

As each of you may know, each year the president designates the entire month of September as national preparedness month. This year, we really had a unique opportunity to educate and engage the public. A couple of things have gone on recently.

First, with the ten-year anniversary of 9/11, that has been coupled with many recent disasters throughout the US, such as the tornadoes and Joplin, Tuscaloosa, recent flooding, or hurricane Irene and even an earthquake in Virginia. The public is really motivated like never before to take action.

They are thinking, holy cow, something could really happen to me and what could I do to help. Am I prepared? The answer that we really want to push out is that they need to be prepared and how to take those steps to be prepared. This is what national preparedness month in our effort is all about.

We have been working to make this year's national preparedness month different. To really turn that awareness that everyone should have a plan into action and help them take those necessary steps towards emergency preparedness.

Now, is a perfect time to pledge to their preferred initiatives or launch a preparedness effort for later in the year. For example, do you and all of those that you serve know about your emergency evacuation plan? Have you practiced it recently? Are all of your contacts up to date? For organizations such as senior living facilities have you shared your emergency plan with your local fire department or emergency response team? What about your medication, should an emergency happen to you, where is this information saved that you will be able to access it?

E-mail so consider reaching out to the president community to make sure that they have included a preparedness consideration for aging Americans in their own emergency plans.

You can learn more about the necessary steps you should take and the steps you should encourage your entire community to take @ ready.gov.

We hope that each of you on today's webinar will take two minutes to sign up a community.FEMA.gov this is our national preparedness month coalition. As a coalition member you will have access to free information and messaging, a calendar where you can promote your preparedness events and also see what is going on in your community and around the country. You also have access to connect with almost 8000 other community -- coalition members across the country about preparedness.

I realize that many of you may be thinking, that September is almost over. While September is our big push about preparedness, preparedness happens throughout the year and you will have access to this site and all that it has to offer throughout the year as well.

We asked that today, you take the first up in joining our national preparedness effort by signing up as a coalition member at community that today, you take the first up in joining our national preparedness effort by signing up as a coalition member@community.FEMA.gov. It will take less than two minutes.

I would also like to highlight a few resources that are available to you. We have links to the US administration on aging, community.FEMA.gov which is our national preparedness month coalition member peer

Ready.gov where you will have resources such as checklists and additional preparedness information specifically for aging Americans.

The public health emergency and medical emergency website as well. The American red sauce has readied reading.com which is a program helps programs take the necessary steps to become prepared to respond to and successfully withstand a disaster and other emergencies.

Also September is the perfect time to remind everyone about FEMA's national preparedness directorate. We offer national training and education which includes free trainings and three webinars. You can learn more at training.FEMA training and education which includes free trainings and three webinars. You can learn more@training.FEMA.gov.

We will now move to a question-and-answer session where you can type your answers in and one of our speakers will respond to you over the phone. Please bear with us as there is sometimes a slight to lay as we receive questions. Please also note that today's webinar will be recorded and posted so that others who are not able to join today will are able to do the webinar at later dates. With that, we will start taking questions and Sean will help moderate.

>> Thank you. There will be a chat box in the middle of the screen. You can type in your questions and we will see them and answer them as we can. Thank you.

>> Susan has a question. Why are there not requirements for senior public housing for emergency management plans?

>> I guess the question would be are there requirements?

>> Cindy, which you happen to know the answer?

>> I am start, have my phone on mute. You know, we do not. We work with the Housing and Urban Development and I can tell you what I can do, if you e-mail me, I can find that question out for you and talk about what those emergency requirements would be if they are required and then how they are actually monitored for compliance because I doesn't think only look at public housing, it is definitely afford to have a plan and I would imagine that they are required to have an emergency management

plan but I can certainly find out for you. My e-mail, you can write us at you can write us@AOA.gov. My e-mail is cindy.padilla@aoa.hhs.gov. good question. Thank you.

>> Okay, we have another question. How do you get past the concerns of safety with the pre-registered seniors? Apparently they have been having a lot of pushback from their local senior community.

>> By the way, I have posted Cindy's e-mail address.

>> Would that be another one for Cindy?

>> I'm sorry but my phone on mute. I would really look in working with your, I'm not sure who you work with, if you're a provider. I think that really having a conversation and sitting down either individually with the senior who has the biggest concerns for the safety or as a group. If you can work with your local senior center area agency on aging and having a meeting with them and educate them about the importance of getting preregistered. Also why that is important to them to be registered why it is important for them to be prepared in case of an emergent see so that they know that this is really about safety. It actually can even go beyond an emergency or a disaster if you have a preregistered senior or someone at a senior center who perhaps may have an accident or is home alone at some point. If they need a response from 911, they have registration, they can look and get that registration and have all of the health information about that senior so I would communicated to them as something that is really a part of their healthcare and keeping them safe.

>> Here is another question. This should be a quick one. What is the definition of aging American?

>> I love that question. This is Cindy and I think we are all aging Americans so I really love that question. I think that right now, the older Americans act services through your see -- senior centers and all of your agencies on aging is age 60. The services that we provide are really starting at age 60. It could be an individual with a disability who need a little extra help and they could be under 60. It could be anything 7275 two 280 -- 70, 75 or 80.

>> The other question is how can a mobile seniors get personally involved? Or the local coordinator's list on the Internet?

>> Again think you for wanting to get personally involved but I would direct you directly to AOA.gov and look at our local coordinator's list. It should be on the Internet. We have a list of all of our emergency coordinators in our regional offices, we have our regional administrators, our regional offices, our regional administrators and our state coordinators on the Internet so you would be able to contact any of those people at HHS. What they will most likely do is visit with you and then direct you to your local area agency on aging or senior center who is most active in emergency preparedness so that is really closer to your backyard and not necessarily at our regional office.

>> Here is a question. Is your organization working with the national medical reserve Corps in a cooperative way?

>> I do not know if our regional offices are working with the national medical reserve Corps but certainly in this time of collaboration and partnership, I will look up that particular core and make sure that we make connections at the federal, national level as well the regional level. Thank you for directing us in that direction.

>> Another question, is there a separate program for disabled seniors or is a part of the senior program?

>> It is for the most part, it is going to be part of the senior program. I think they're going to be looking at this comprehensively. That being said, as I mentioned earlier in my presentation, the older American act and the programs that we offer really are vied for a lot of local flexibility. There may be in your local program, it may have a separate program for disabled seniors apart from their regular senior program. You would have to look and find out locally if it is separate or if it is a part of the bigger program.

>> Okay, most of these questions are program questions. I think, we're going to do one more. Unfortunately, there were not any questions about the local efforts. I think the next question is, if there are separate program for, I am sorry, if there are seniors within the community who are unaware of this agency/service what can we do to get that information out to the community?

>> Again this is the the, I would first suggest and I understand every time I direct people to a website am a I cringe a little bit myself because I certainly know that the web availability varies throughout the country in wool and frontier parts of the country. I certainly know that that varies. I'm going to give you the website again at the eldercare locator the eldercare locator@AOA.gov. We have an 800 number that was part of our slide presentation. It is 800 677 800-6771 one 800-677-1116.

>> I also just saw a question come through that says, if there are seniors within the community who are unaware of this agency and service, what can we do to get that information out to the rest of the community? That is a great question and I think that anything and everything that you do will help to spread this message. Maybe do seeing what existing events are in your community, that is always well we recommend to start with. In September, there is normally local fairs and any local event that is already planned. It is typically needs a way to ask a prepared -- if the purpose can be included in that.

>> From there, you can always reach out to local organizations and businesses and ask them to include preparedness information into their existing communications. Those are two great ways to start. If you need additional information or ideas, you can e-mail -- that is really what this is all about. To help people like you spread the word, give you details with that.

>> Okay, I guess that is this for -- that is it for questions on a sunny the presenters have any last words. I think we'll wrap it up.

>> Hello Sean, if there are additional questions that were not answered during this call for some reason or if they think of some after, I would just like to encourage you to send your question to either mpm@fema.gov or you have the AoA website as well.

>> This is Cindy, and I would like to say as well that there are a lot of questions, and a lot of the questions are going to be local and program, and so we can certainly direct you to individuals in your

state and in your communities that will have those local answers for you, how you can get involved, how you can find out more information. I think as we have heard from Shawna, is very important that when we ourselves are prepared, the more information that we have about the services that are available to less, -- available to us in addition to our own plan and aware what we will do, who can we contact, who is available in our communities that can help us provide these services which are very important. Please feel free to contact myself, contact us at AoA so we can follow up with you.

>> Great. Thank you. This concludes today's webinar. We would also like to ask you as a participant to take a moment and provide us with feedback. You will see a few questions and pulls on your screen. Also just a reminder that this webinar has been recorded and will later be posted to our web for late -- posted to our web for others to view.

Thanks again for everybody -- thanks again to everybody for joining.