

## **RECOMMENDATIONS FOR NORTH CAROLINA AND ITS AGING POPULATION— ADDITIONAL VIEWS FOR GOVERNOR’S 2010 CONFERENCE ON AGING**

In preparation for the 2010 Governor’s Conference on Aging, the NC Department of Health and Human Services and its Division of Aging and Adult Services shared the results of the Regional Roundtables with more than 120 opinion leaders/key informants/content experts and asked that they share their views to the following questions via a web-based survey.

- What are the top three issues facing NC and our aging population, and what do you recommend as the best approaches for these issues?
- What existing policies and programs affecting older adults should be considered as top priorities over the next five years?
- What are NC’s most promising policies and programs affecting older adults that should receive greater support?
- What are the most important immediate actions that NC could take to strengthen our response to senior needs that would not require new/additional resources?
- What longer-range actions relevant to our aging population must NC take now that require more time but not new or additional resources?
- What are the most effective actions that NC should take to make best use of the resources and experience offered by our older citizens?
- What are the most promising ways in which the state of NC can strengthen its collaboration with the private sector to meet the challenges and opportunities of our aging population?
- What would be your top three targets relevant to our aging population when additional public resources become available?

More than 40 individuals responded, and their responses form the basis for what follows. Staff of the Division of Aging and Adult Services (DAAS) organized and categorized the responses into the six topical areas, with an emphasis on actions the State could take. The italicized preface for each area also represents views expressed by these respondents. While DAAS staff paraphrased some of the input, they made a concerted effort to present the views accurately. Unless it was explicit from the respondent, DAAS staff used their judgment to denote for each suggested strategy what it would take to achieve it [i.e., *protect, act, invest*]—oftentimes requiring more than one approach. In reviewing this input, conference participants are encouraged to consider the following:

1. To what extent do you agree with these recommendations? What would strengthen them?
2. What other recommendations are not reflected in these responses that you believe are important?
3. Do you agree with what has been indicated as needed to achieve them [i.e., *protect, act, invest*]?
4. What other specific information would help clarify/reinforce the recommendations that you want to put forward [e.g., would it require federal or local as well as state action; what about private sector involvement; what other partners need to get engaged; would it take some other action(s) for this to occur; what are the more important steps that should be undertaken]?

Here is how we are interpreting these terms:

*Protect*—essential programs/activities that must be maintained/protected during these difficult economic/budget times

*Act*—changes that can be made to improve the way we assist older persons and prepare for the aging population (e.g., systems or rules change, realignment of resources), and will not require additional/new resources

*Invest*—actions that will require an investment of additional/new resources

We wish to thank all who contributed their informed views in providing further input for the Governor’s Conference on Aging. Some of the contributors included:

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## Recommendations for NC’s Aging Population—Access and Choice

*The top issue in independence—seniors want to remain independent and in their home....An ‘age-old’ issue involves coordination of and linkages to services....There is a need for better procedures when discharged from hospital...Many in our aging population do not have a support system in place to allow them to continue living independently....Continue and enhance programs to assist the aging population today in their homes—it is a huge savings to keep individuals independent....NC Project C.A.R.E. is a great example of a public/private partnership with positive effects on local economies....There’s a growing number of individuals whose monthly income is a bit too high to qualify for Medicaid and Special Assistance yet they don’t have the personal income to afford long-term care options—they often end up in settings that are not appropriate and are more costly....Need to ramp up our long-term care capacity in NC—there is a tsunami on the way!!!....We have to get ahead of these issues by looking at them earlier in life rather than waiting for a crisis when our choices will be quite limited.*

Recommendations	Protect	Act	Invest
1. Make it easier for people to navigate the service system—not just relying on “going online.”		X	X
2. Maintain and expand support for family caregiving.	X		X
a. Expand the Dependent Tax Credit.	X		X
b. Allow payment of family members for needed in-home care.		X	X
c. Maintain and expand Project C.A.R.E. (Caregiver Alternatives to Running on Empty).	X	X	X
d. Add respite Family Support for caregivers to the services offered by Medicaid.		X	X
e. Identify and promote best practices for peer support among seniors and caregivers.		X	
3. Maintain and expand services to help seniors stay at home as long as possible, including those of the Home and Community Care Block Grant.	X		X
4. Support transportation services, especially in rural areas.	X		X
5. Promote flexibility in use of available funding.		X	
6. Strengthen volunteerism, especially for transportation and home-delivered meals.		X	
7. Encourage and support the nonprofit sector in developing and operating group-based community eldercare services (e.g., adult day services, the Charles House Eldercare Home).	X	X	
a. Allow flexibility in the number of residents (beyond the current restriction of 6) to encourage communities to develop their own alternative care settings.		X	
b. Review fire sprinkler requirement in State Building Code as required for new adult day service programs which creates a barrier for providing these needed services.		X	
c. Increase the Special Assistance reimbursement for nonprofit providers.		X	X

<b>Recommendations for Access and Choice</b>	<b>Protect</b>	<b>Act</b>	<b>Invest</b>
8. Address factors that ‘drive’ people to long-term care facilities (e.g., falls, medication mishaps, lack of transportation, need for meals and chore services).	X	X	X
9. Begin planning for effective implementation of CLASS (the Community Living Assistance Services and Supports Program), which is part of the federal Patient Protection and Affordable Care Act.		X	
10. Support emerging Community Resource Connections for Aging and Disabilities (CRCs), which are known nationally as Aging and Disability Resource Centers (ADRCs).	X	X	
a. Accelerate access to timely case management and referral for health needs.		X	X
11. Grow the number of communities that have programs—like Senior PharmAssist—which offer medication therapy management, tailored community referral, help to access meds, and SHIP services to ensure appropriate medical coverage.	X	X	
a. Increase availability/awareness of information on medications being prescribed with the goal of reducing the need for and amount of such meds to the absolute minimum.		X	
b. Increase awareness of the prescription drug plan that is available to each county.	X	X	
12. Expand meals-on-wheels programs to cover all areas of counties.		X	X
13. Strengthen existing adult day services programs and promote their quality.	X	X	X
14. Support the Older Blind Program and Independent Living Services program offered by the State Division of Services for the Blind.	X		X
15. Maintain and expand access to the Senior Farmers’ Market Nutrition program.	X	X	
16. Examine effect of and build on Continuing Care Retirement Community (CCRC) without Walls legislation.		X	
17. Improve community services for persons with mental illness.	X	X	X
a. Maintain and expand access to long-term mental health facilities with special programs for persons with dementia requiring stabilization.	X		X
18. Secure the Adult Care Home 1915 (I) Waiver program to allow the assisted living level of care to continue serving those on Special Assistance and Medicaid.		X	X
19. Hold a focus group with some current local providers/communities known as exemplary in their coordination/collaboration and use lessons learned to develop model for others in the state to replicate.		X	
20. Revamp the Community Alternatives Program for Disabled Adults (CAP-DA) waiver.		X	
a. Add Adult Day Services to the Medicaid CAP program (now just Adult Day Health).		X	
b. Expand waiver slots.		X	X

<b>Recommendations for Access and Choice</b>	<b>Protect</b>	<b>Act</b>	<b>Invest</b>
21. Develop clear examples for individuals to use in finding the help they need (simple pathways that can be used for educating older adults online and in person and through publicity).		X	
22. Assure that NCcareLINK and United Way's 2-1-1 are well integrated and well publicized as information resources about health and human services.	X	X	
23. Strengthen continuity of care/care transitions/discharge planning.		X	X
24. Maintain and strengthen access to assistive technology.	X	X	X
25. Examine and strengthen the involvement and capacity of Community Action Agencies in helping address the needs of the aging population.	X	X	

## Recommendations for NC’s Aging Population—*Economics of Aging*

*Most people have their retirement funds invested—those funds have failed and the aging are finding themselves unable to retire or remain in retirement....Many seniors, or soon to be seniors, do not have adequate resources to retire or to sustain themselves throughout retirement....There is an inadequate quantity, quality and diversity of the workforce to meet the needs of older adults....It is important to frame the future growth of aging population as both an opportunity and a challenge—and the positive impact that it could have economically on our state if we plan it well.... Support family caregivers so that they don’t become destitute, have to put their loved ones in a facility, or have to quit their jobs....Many seniors still want to work—many can work part-time and different hours, using flexible work schedules—but some need transportation to their job.*

Recommendations	Protect	Act	Invest
1. Allow families to receive financial and medical assistance to house disabled/high-maintenance older family members at home instead of long-term care facilities.	X	X	
a. Allow payment of immediate family members for needed in-home care.		X	X
2. Promote careers in aging and offer incentives to enter relevant fields.		X	X
a. Engage public schools in career development/planning for an aging society.		X	
b. Increase community college training programs in health care and wellness to increase those with skills to enter the public and private job markets.		X	X
c. Promote career ladders for direct care providers.		X	X
3. Develop corps of volunteers from the business community to assist in financial planning.		X	
4. Promote the education of youth—connecting with parents and grandparents about its importance.		X	
5. Allow illegal immigrants to become legal after one year of crime-free residency thereby allowing them to enter home health care/transportation employment and increase NC’s tax base.		X	
6. Promote an appreciation of and reduce stigma associated with lower wage-earners serving the needs of older adults.		X	
7. Explore how the presence of major pharmaceutical companies in the Research Triangle could be tapped to help make medications more affordable to our citizens.		X	
8. Develop and promote meaningful work and volunteer civic engagement programs with built-in training and incentives—like Experience Corps (an award-winning national program, which engages people over 55 in meeting their communities' greatest challenges).		X	X

<b>Recommendations for Economics of Aging</b>	<b>Protect</b>	<b>Act</b>	<b>Invest</b>
9. Promote flexible work options to extend paid employment beyond traditional retirement. a. Showcase companies/employers that effectively use and accommodate senior workers.		X	
10. Explore if the State can require employers that eliminate retiree/health benefits to help fund the Seniors' Health Insurance Information Program (SHIIP), as many seniors/older workers turn to it for assistance in these situations.		X	

## Recommendations for NC’s Aging Population—*Health and Aging*

*Limited resources for an ever-expanded population of persons 55 and better, resulting in an ‘us vs. them’ dichotomy among exceptionally important programs and services, whether they are for the frail elderly or for health promotion....The aging population has a greater need for more highly skilled medical care than ever before. With our technology advancing at a rapid pace, we sometimes overlook the obvious. What does this patient need—what does your Mom or Dad need?—Access to evidence-based health promotion programs is limited due to lack of funding and the infrastructure for program delivery—need to open access to health-focused care as opposed to medication-selling health care.....Need for better coordination and collaboration—public and private!....Minorities carry the burden of chronic disease and impairment in our state—addressing disparities in access to care, care utilization and in uptake of health promotion will require structural change (e.g., providing transportation, building, facilities that are easy to get to and are culturally acceptable)....Much of what we can do is about shifting funds from the high-end \$\$ care (hospitalization, skilled nursing) to the low-cost, prevention end—we need the political WILL and LEADERSHIP to shift some funds around—making sure all stakeholders are involved with the decision-making....We are facing an ‘epidemic’ of chronic conditions—research is suggesting that boomers as they age may actually have more chronic care needs than the current cohort of older adults.*

<b>Recommendations</b>	<b>Protect</b>	<b>Act</b>	<b>Invest</b>
1. Build on the Community Care of NC (CCNC) model of local groups developing local solutions with statewide mandates, including making maximum use of the Medicare 646 waiver.	X	X	X
a. Identify and apply existing models that effectively link individuals, their health care providers, and the community to create a more integrated approach to health (e.g., the Chronic Care Model).		X	
2. Maintain and expand Programs of All-Inclusive Care of the Elderly (PACE), as an effective public-private partnership	X	X	X
3. Maintain and build on evidence-based public health approaches, such as the Chronic Disease Self-Management Program ( <i>Living Healthy</i> ).	X	X	X
a. Increase the State requirement for evidence-based health promotion programming under the Older Americans Act Title III-D funds from the current 35% to most or all of 100%.		X	

<b>Recommendations for Health and Aging</b>	<b>Protect</b>	<b>Act</b>	<b>Invest</b>
4. Strengthen frontline and geriatric specialty trained workforce.	X	X	
a. Require geriatrics education in all State-funded health professional training programs.		X	X
b. Maintain and increase health care training programs at community colleges, with an emphasis on younger students.	X	X	X
c. Work with licensing bodies to ensure adequate certification in aging and transition of their workforce to focus more on aging issues.		X	
5. Strengthen continuity of care/care transitions/discharge planning.		X	X
6. Take a “life-course” perspective/approach to healthy aging that “it’s never too early to begin and always too soon to quit.”		X	
a. Expand access to health education and promotion programs beginning in mid-life.		X	
7. Maintain and expand NC’s acclaimed Win-a-Step Up program and its New Organizational Vision Award (NC NOVA) to improve direct care jobs, reduce turnover and improve quality of care.	X	X	X
8. Expand insurance coverage of holistic/integrated/alternative/preventative medicine.		X	X
9. Make available to workers (public and private) time and equipment for health and fitness activities during the workday.	X	X	
a. NC State Government could serve as a health/fitness model for the state.	X	X	
10. Promote free access for seniors to fitness centers/training and therapy.		X	X
11. Encourage and support workplace ergonomics (e.g., standing desks, suitable chairs, going outdoors, ventilation, etc.).	X	X	X
12. Assure that NC effectively responds to opportunities presented by the federal healthcare reform to improve care for Medicare beneficiaries and others.		X	X
13. Examine the current health status of aging boomers and get university researchers to forecast their long-range needs and the implications for public policy.		X	
14. Identify nonprofit organizations (including faith-based organizations) to collaborate with community health centers/local agencies on aging to help serve unmet needs.		X	
15. Increase awareness and use of Federally Qualified Health Centers (FQHCs) by Medicare beneficiaries.		X	

## Recommendations for NC’s Aging Population—*Homes & Neighborhoods*

*Transportation is such a key issue—and the extent to which we can support people to continue to be mobile in their communities, they will more independent and able to contribute to the life of the community—it is necessary that we plan for the larger senior population of baby boomers so they can remain in their jobs and in their homes....Finding a place that is affordable and allows for pets AND is safe and moderately clean is very, very difficult.... Make communication and communities more accessible for people with disabilities—we will all be people with disabilities if we live long enough....Need incentives for creating a range of ‘aging-in-community’ models....Our ability to renovate and repair homes is directly tied to having the funding for materials—manpower (well intentioned and ready volunteers) is not a problem...Building more apartments/homes as accessible in the first place will benefit everyone in the long run and won’t be excessive in additional cost if done at the time of the initial build.*

Recommendations	Protect	Act	Invest
1. Articulate and emphasize a clear <i>integrated</i> policy for housing, transportation, neighborhood and community design, environmental protection, and health.	X		
a. Increase awareness about universal design and the relationship between housing and neighborhood design and support voluntary universal design standards.		X	
b. Promote inclusive home design requirements among private developers.		X	
c. Change policies of the NC Housing Finance Agency so that all or most of the homes it builds or funds meet universal design standards.		X	
d. Offer incentives (e.g. tax breaks) to the private sector for a limited time (e.g., 5 years) to experiment with universal design to demonstrate efficacy, help the industry work through technical problems, and help increase consumer demand.			X
2. Reshape and promote communities such that assistance, services and products are available within walking distance.		X	X
a. Help communities retrofit existing developed areas into ones with better housing, higher densities, mixed uses, walking opportunities, more transportation options.		X	X
3. Allow older adults to have a no-increase in property taxes if they own their own home.		X	X
4. Maintain and strengthen resources for free or low-cost home repair for seniors.	X	X	X
a. Work with corporate sector on ways to provide free- or low-cost materials to support home repairs/renovations.		X	
5. Expand support of subsidized congregate living and other housing subsidy programs benefiting seniors.			X

<b>Recommendations for Housing and Neighborhoods</b>	<b>Protect</b>	<b>Act</b>	<b>Invest</b>
6. Develop a comprehensive plan for providing community-based housing choices for adults with mental illness.		X	X
7. Increase availability of rail service and expand bus routes.			X
8. Promote leveraging of resources with corporate entities (e.g., corporations could sponsor or purchase buses, for example, or contribute to its maintenance with signage on buses recognizing its support).		X	
9. Make sure all communities have a livable and senior-friendly community building.		X	X
10. Develop a model set of standards/guidelines for landlords to use when renting to seniors that supports affordable, safe and person-centered housing (e.g., many apartments will not allow dogs and many older adults use them for protection and companionship).		X	
11. Examine how best to support the emerging Naturally Occurring Retirement Communities (NORCs), the Village models, etc.		X	
12. Identify and promote best models for multi-generational/communal housing to encourage trade-offs among the generations.		X	
13. Identify ways to support multi-generational homes that aid the caregiver and senior, and identify and address any public barriers to these living and caregiving arrangements.		X	
14. Promote the concept that it is a 'community responsibility' to become prepared for an ever-increasing aging population.		X	
15. Encourage and incentivize nursing homes and other facilities to become more 'home-like' in physical structure/environment, staffing and person-centeredness.		X	X
16. Expand access to free- or affordable chore-type service arrangements for seniors unable to safely do such tasks as lawn mowing, leaf raking, etc.		X	
17. Get older individuals who are homeless and near-homeless into affordable and safe housing.		X	X

## Recommendations for NC's Aging Population—*Lifelong Engagement & Contributions*

*Harness the gray volunteers....There is no greater resource waiting to be tapped than asking our healthy, successful retirees to reach out into their communities across North Carolina and help each other—how many opportunities are out there waiting for a little organized effort?....One key element of a long, happy, and healthy life is doing for others....We have a lot of smart retired folks who want to help with the public health of the state—gather some of these retirees and really look at utilizing this resource—we must show our older adults that we value them and their wisdom and experience....RSVP volunteers in the mountains are solving environmental problems—just one example!*

Recommendations	Protect	Act	Invest
1. Identify and promote ways that older adults can further participate in the community		X	
2. Keep seniors active through volunteerism and participation in classes at senior centers, community colleges, etc.	X	X	
a. Strengthen ways by which older adults can learn of opportunities for volunteering and learning.		X	
3. Assure the strategic involvement of older adults in policy/decision-making activities.		X	
4. Initiate a Call-to-Action for all retirees—a North Carolina Silver Corps—to help each other and the larger community, in their own way (e.g., an ‘AmeriCorps’ for seniors).		X	X
a. Work on plans to develop a network of volunteers and/or paid people who can meet the needs of older persons by assisting with their independence (e.g., transportation and shopping needs).		X	X
b. Strengthen ways to target volunteer programs to the interests and experience of the individual.		X	
c. Explore the pro’s and con’s of offering a small financial incentive for older volunteers (e.g., tax break, gas stipend).		X	X
d. Identify and promote best examples of how older volunteers are making a difference in their communities.		X	
5. Expand use of older adults to mentor younger adults in public schools and colleges, and increase opportunities for youth to help in community programs for seniors.		X	X
6. Maintain support of congregate nutrition sites as a way for seniors to stay in contact with others and make new friends, learn about scams and other information important to their health and well-being.	X		
a. Increase medical screening and educational programs at these sites.		X	X

<b>Recommendations for Lifelong Engagement and Contributions</b>	<b>Protect</b>	<b>Act</b>	<b>Invest</b>
7. Maintain and expand support of Senior Centers and their programs.	X		X
8. Expand use of libraries and community centers.		X	
9. Identify and promote best examples of how older volunteers are making a difference in their communities.		X	
10. Explore with the military retiree organizations how to further engage this committed and skilled resource.		X	
11. Strengthen opportunities for civic engagement.		X	
a. Expand and apply concepts of volunteer senior leadership corps into a variety of areas—identifying and using best models, including those of AARP.		X	
12. Strengthen the role and capacity of existing advisory and advocacy groups in planning for the future of an aging NC.	X	X	
13. Promote lay health advisory/worker models where seniors are trained to educate and advocate for other seniors.		X	X
a. Create a more targeted and systematic effort to train older adults for coordinating and delivering health promotion programming to help augment the state’s limited workforce, keep costs contained, and be a win-win for the volunteers and program participants.		X	X
14. Encourage and acknowledge employers that sponsor and/or encourage volunteerism among their employees (e.g., paid community service leave).		X	
a. Provide employers with a model program for use with retiring employees about the value of and opportunities for service/volunteerism.		X	
b. Explore recreating the State P.R.E.P.A.R.E. program as a means of educating retiring local and state government employees about lifelong learning, community service/volunteer opportunities, etc.		X	X
15. Build on the strength of the NC arts communities to encourage intergenerational mutuality, reciprocity and meaningful roles throughout the lifespan.	X	X	X

### **Recommendations for NC’s Aging Population—Safe Communities**

*Mixed populations in long-term care settings is an exceptionally difficult issue, particularly with mental health reform...The volunteer base for fire and EMS in rural areas is dwindling and we need them for emergency care of the aging (and all others!)....We must take great care not to ignore the grassroots research efforts that have been ongoing for many years in favor of ‘pre-packaged’ programs that bear the stamp of Federal agencies.*

<b>Recommendations</b>	<b>Protect</b>	<b>Act</b>	<b>Invest</b>
1. Address issues involving the co-location of different populations in long-term care settings through training, sensitivity, and enforcement of existing rules.		X	
2. Strengthen Adult Protective Services.	X	X	X
3. Support reform of Guardianship.			X
4. In the event that at-risk/frail older persons have their services reduced or eliminated, have a backup plan for monitoring their status (e.g., use of friendly calls from volunteers).		X	
5. Increase outreach to and support local jurisdictions in their efforts to recruit volunteers for fire and emergency medical services as this directly affects our aging population, especially in rural areas.		X	
6. Promote and support automated facility disaster plans for nursing homes, assisted living, etc.		X	
7. Put a moratorium on driving during certain time periods within communities to encourage cycling, walking, and other non-motorized transit (similar to what happens on interstate roads for repairs).		X	
8. NC Department of Transportation should turn off test signs on interstates unless there is an announcement as this is an intense distraction and wasteful.		X	
9. Promote development and use of community accessibility plans to assure that public accommodations are fully accessible.		X	X
10. Assure adequate oversight and protection of residents in long-term care settings.	X		X

## Recommendations for NC’s Aging Population—General/Overarching

*Needs are vast, programs are under-staffed and most folks are truly doing the best they can....One in four baby boomers will have a vision problem....A lot of what we need to do is NOT rocket science or access to high-tech ‘stuff’ but rather tailored help that keeps individuals as engaged as possible in their homes....From an advocacy standpoint, we need to be demonstrating the impact of programs and services in every single county, every single community, and every single neighborhood—this is best done at the local level—like it or not, age-ism is still rampant in society—advocacy groups and the media must be engaged in the process.*

Recommendations	Protect	Act	Invest
1. Promote citizen education about planning for aging as knowledge is power. a. Educate the public about aging issues through media, conferences, etc.	X	X	X
		X	
2. Require all government agencies to align their policies with relevant aging goals. a. Assure aging representation on advisory and decision-making bodies across organizations.		X	
		X	
3. Enhance partnerships among agencies, the media and faith-based groups.			
4. Think “outside the box—outside of programmatic/administrative and funding silos” to build collaborative, interdisciplinary, public/private approaches. a. Promote greater collaboration among funding agencies to maximize resources and reduce fragmentation.		X	
		X	
5. Empower local communities, local aging agencies and most importantly, older adults themselves in determining their priorities. a. Organize efforts to see what older persons/consumers think are the most immediate needs and also invite their ideas on solutions—use of focus groups is one way. b. Make sure older adults are ‘at the table’ whenever and wherever there are decisions about issues that pertain to them. c. Reach out to solicit views of seniors and caregivers in senior centers, doctors’ offices, meal sites, etc.	X	X	
		X	
		X	
		X	
6. Promote ‘green initiatives’ in aging field whenever possible.		X	
7. Maintain and expand State support of efforts to build an aging workforce and future leaders in aging through training offered by the university/college system.	X	X	X

<b>General/Overarching Recommendations</b>	<b>Protect</b>	<b>Act</b>	<b>Invest</b>
8. Establish through the Governor an Aging Solutions Work Group or Commission composed of leaders in the corporate/private sector, government, and volunteer organizations to create synergistic solutions to the major opportunities and challenges facing an aging NC.		X	
9. Identify, develop and promote technological innovations and their effective application for an aging population.	X	X	X
a. Provide financial support for enhancing technology/computer capacity of Aging Network.		X	X
10. Encourage and support ongoing advocacy to demonstrate the importance of aging-related programs and services.	X	X	
a. Continue to support the efforts of the Senior Tar Heel Legislature.	X	X	
b. Develop a collection/campaign of stories from seniors and caregivers about how the aging services have made a difference in their lives.		X	
11. Fund NC's Livable and Senior-Friendly Community initiative to encourage and support initiatives.			X
12. Develop and publicize State-of-the-State information about NC's older population and how we compare to other states (e.g., major health and economic indicators).		X	
13. Work to raise awareness among the general population about the increasing numbers of older adults and their needs.		X	
14. Educate and advocate with county government to expand services for the aging population.		X	
15. Carry through with assessment of local readiness for an aging population as identified in the Governor's Executive Order No. 54.		X	
16. Organize efforts to increase the number of volunteers to support senior needs.		X	
17. Reassess use of computers—not everything has to be online, automated, available 24/7.		X	
18. Create and promote a Seniors' Hotline for soliciting ideas that can inform policy and programs statewide.		X	
19. Work with the private sector to identify new programs/new ways of doing business that might work in the public sector and/or would benefit from a public/private partnership.		X	

<b>General/Overarching Recommendations</b>	<b>Protect</b>	<b>Act</b>	<b>Invest</b>
20. Strengthen statistical analysis and increase support of strategic planning for our growing aging population, and in particular, the number who will have some form of dementia.	X	X	X
21. Strengthen efforts to measure the outcomes of all programs to demonstrate their effectiveness and discuss their importance with funding entities and the general public.		X	X
22. Promote greater cultural sensitivity in the design and offering of programs and build greater capacity within minority communities.		X	X
a. Develop curricula that promote the understanding of cultural diversity.		X	
23. Maintain and increase services in rural NC.	X		X
24. Monitor programs more closely for compliance—eliminate waste and duplicity.		X	