Creating a Collective Approach to Address an Aging NH

Stakeholder Meeting

June 25, 2015
Today’s Agenda

- Welcome and Introductions
- Review of what’s been done and what’s to come
- Presentation of the Environmental Scan
- Break into 6 Workgroups
- Optional lunch
Good Health and Realized Potential for All

New Hampshire's prosperity depends on healthy people, strong families and vibrant communities. We envision a culture that supports the physical, mental and social well-being of all people -- through every stage of life.
What is Collective Impact?

**Collective Impact** occurs when organizations from different sectors agree to solve a specific social problem using a common agenda, aligning their efforts, and using common measures of success.
## The Five Conditions of Collective Impact

<table>
<thead>
<tr>
<th>Condition</th>
<th>Description</th>
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<tbody>
<tr>
<td><strong>Common Agenda</strong></td>
<td>All participants have a <strong>shared vision for change</strong> including a common understanding of the problem and a joint approach to solving it through agreed upon actions</td>
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<td><strong>Shared Measurement</strong></td>
<td>Collecting data and measuring results <strong>consistently</strong> across all participants ensures efforts remain aligned and participants hold each other accountable</td>
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<td><strong>Mutually Reinforcing Activities</strong></td>
<td>Participant activities must be <strong>differentiated while still being coordinated</strong> through a mutually reinforcing plan of action</td>
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<td><strong>Continuous Communication</strong></td>
<td><strong>Consistent and open communication</strong> is needed across the many players to build trust, assure mutual objectives, and appreciate common motivation</td>
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<td><strong>Backbone Support</strong></td>
<td>Creating and managing collective impact requires a dedicated staff and a specific set of skills to <strong>serve as the backbone for the entire initiative and coordinate participating organizations and agencies</strong></td>
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Source: FSG, Tamarack Institute
Creating Alignment

Fragmented system

Integrated system

Adapted from: Paul Epstein, Results that Matter Team
Steps to Implement Collective Impact

- Develop a common understanding of challenges and opportunities
- Co-create an action plan for the next 2-3 years
- Establish a leadership structure
- Launch a Statewide Coalition
- EH to provide backbone support
Creating a Collective Impact Approach to Advance Healthy Aging in NH

Quarterly Coalition Meetings
Workgroup meetings in the 6 domains

Tri-State Learning Collaborative
Participant Committee

Environmental Scan of Resources for Older Adults
Done by CACL - UNH

Support of Frameworks “Reframing Aging” project

Research by NH Center for Public Policy Studies on Economics of Aging
Advisory Committee on Research

Advisory Committee on Research

Steering Committee
Core Advisors for Coalition

Endowment for Health Ongoing Activities to Support the Elder Health Coalition

June, 2015
Creating a Collective Approach to Address an Aging NH: A Shared Vision for Our Future

We envision communities where New Hampshire’s culture, policies, and services support our elders and their families, providing a wide range of choices that advance health, independence, and dignity.

Elder Friendly Community
- Fundamental needs are met
  - Food
  - Safety
  - Info about Services
  - Shelter/Warmth
  - Transportation
- A broad range of living arrangements are available
  - Planning & zoning
  - Resources available to support living at home
  - Affordable
  - Home modification options
- Advocates for elder issues are effective
  - Cultural view of elders is positive/realistic
  - Laws are elder friendly
  - Aging issues are a community wide priority
- Support provided to caregivers and families
  - Access to info on services and supports
  - Caregiver education and training programs
  - Flexible funding to meet the unique needs of caregivers
  - More consistent pay for formal, paid caregivers
  - Respite care
- Quality physical and mental wellbeing supports are in place
  - Access to preventative care
  - Access to medical, mental health and palliative care
  - Planning for end of life care
- Social and civic engagement options are plentiful
  - Meaningful connections with family, friends and neighbors
  - Paid and volunteer work opportunities
  - Active engagement in social life
  - Cultural, religious activities plentiful
- Equity
- Independence
- Choice
- Person-Centered
- Respect
- Dignity

Supported by ENDOWMENT for Health

Revised 4/2015
Environmental Scan

Presented by
The Center on Aging and Community Living, UNH
Environmental Scan
Elder Friendly Communities

June 25, 2015
ENSURING THE HEALTH AND DIGNITY
OF ELDERS
Overview

- Purpose of the report
- Findings by domain area
- What we hope to get from you today
- Small group discussions to organize work groups
Elder Health Domain Areas

- Summary of what the research tells us
- Overview of the landscape in NH
- Examples of best practices nationally
- Recommendations
Fundamental Needs are Met

Research tells us:

- 10% of individuals over 65 are living in poverty
- 50% of women over 65 are economically insecure
- Only half of American communities have thought about addressing needs of aging population
- Economic security gap for NH citizens is $7,842
- 50% of Manchester residents are at high risk for accidents, depression, and isolation
NH Landscape

- While poverty rates for older adults are lower than for other age groups, they increase dramatically for those over the age of 75
  - 15.5% poverty rate over the age of 75 in NH
  - 24.8% over the age of 85

Nutrition

- Meals on Wheels
- Supplemental Nutrition Assistance Program (SNAP)
- Commodity Supplemental Food Program (CSFP)

Safety

- Office of the Long-Term Care Ombudsman
- Elder Abuse Advisory Council
- NH Legal Assistance: Senior Law Project (SLP)
Fundamental Needs are Met

NH Landscape

- Access to Information about Services
  - Aging and Disability Resource Centers (SLRCs)
  - NH 211

- Shelter/Warmth
  - Low Income Home Energy Assistance Program (LIHEAP)
  - Homeless shelters

- Transportation
  - NH Transit Association
Fundamental Needs are Met

Examples of best practices nationally

- **Nutrition:** Meals on Wheels
- **Safety:** Community Liaison Program
- **Access to Information about Services:** Aging and Disability Resource Centers
- **Shelter/Warmth:** Elders Living at Home
- **Transportation:**
  - Michigan Program
  - Retired Senior Volunteer Program
Recommendations

- Coordinate services at the local level in a way that ensures that each individual’s needs are met.

- Maintain funding for basic community safety net services.

- NH DHHS and DOT collaborate to find innovative and cost effective ways to address NH’s transportation issues.
QUESTIONS

- Does this information resonate with you?
- Have we missed an important aspect of this domain?
- Are there other NH initiatives that we should highlight?
- Are there other important recommendations to consider?
A Broad Range of Living Arrangements are Available

Research tells us:

- Safe and affordable housing is an important social determinant of health
- Aging in Place vs. Aging in Community
- Community Planning and Zoning
- Affordability and Accessibility
  - 59% of older renters and 33% of older homeowners spend more than 30% of their income on housing costs
  - Home Modification
- Universal Design in building new homes
A Broad Range of Living Arrangements are Available

Research tells us:

- Resources to Support Living at Home: New and innovative models being developed

- Examples:
  - accessory apartments
  - shared housing arrangements
  - co-housing arrangements
  - multi-family apartments
  - village models
  - assisted living
  - continuing care retirement communities
  - naturally occurring retirement communities (NORCs)
  - Green House Model for nursing homes
A Broad Range of Living Arrangements are Available

NH Landscape
- Affordable housing projects: Echo Valley Village
- NH Community Loan Fund
- Moore Options for Seniors based in Manchester
- Co-Housing Developments: Nubanusit Neighborhood Farm (Peterborough) and Pinnacle (Lyme)
- Assisted Living Residences
- CCRC (4 in NH)
- Nursing Facilities
- Village to Village Networks in Monadnock, New London and Nashua
A Broad Range of Living Arrangements are Available

Examples of Best Practices Nationally:

- HomeShare VT
- Support and Services at Home (SASH)
- Rural Senior Housing Initiative (Housing Assistance Council)
A Broad Range of Living Arrangements are Available

Recommendations

- Strategize how technology and housing design can support aging in place
- Educate general public and policy makers about housing needs of older residents
- Collaborate with planning officials to change zoning laws
QUESTIONS

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Support is Provided to Caregivers and Families

Research tells us:

- Caregivers, for purposes of this section, are defined as unpaid relatives or friends
- Baby boomers at nexus of caring for aging parents, preparing for own aging, and caring for children at home
- Older adults who need assistance generally have at least one family member proving support (Johnson and Catalano 1983)
- About 78-80% of all care provided at home is by family and friends (Thompson 2004)
- 36% of family caregivers care for a parent (FCA 2009)
- 7 out of 10 caregivers are caring for loved ones 50+
Support is Provided to Caregivers and Families

Research tells us:

- Almost 20% of the adults in NH report providing care to a friend or family member (BRFSS 2010)
  - 64% are women
  - 57% between ages of 40-64
- Economic costs to caregivers (especially women): $324,044 in lost wages, social security and pension benefits over a lifetime (MetLife 2011)
- Value of family caregiving: $375 billion/year nationally (Evercare 2009; Feindberg et al. 2011)
Support is Provided to Caregivers and Families

Brief overview of NH:

- NH Family Caregiver Support Program
- Powerful Tools for Caregivers
- Local Support Groups
- Alzheimer’s Cafes
- Annual Caregiver Conference
- Lifespan Respite Coalition
Support is Provided to Caregivers and Families

Examples of Best Practices Nationally:

- Programs should include core services
  - Assessment
  - Individual counseling
  - Caregiver education
  - Caregiver support programs
  - Respite care

- Numerous programs across the country: One example is Resources for Enhancing Alzheimer’s Caregiver Health (REACH) program (Burgio, et al. 2009)
Support is Provided to Caregivers and Families

Recommendations

- Improve caregiver access to information about the care needs of loved ones
- Improve communication with medical system (CARE Act)
- Coaching for caregivers to develop advocacy skills for the care receiver
- Expand workplace benefits – caregiver friendly policies
QUESTIONS

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Social and Civic Engagement
Options are Plentiful

Research tells us:

- Health risks related to lack of social connectedness (Cornwell and Waite 2009)
- Elders as significant contributors to society and providing opportunities for meaningful engagement are core characteristics of aging friendly communities (Austin, McClelland, Perrault, & Sieppert, 2009)
- Types of social and civic engagement
- Individual and collective civic engagement
- Productive Aging through volunteering
- Intergenerational Communities promote interdependence
Social and Civic Engagement Options are Plentiful

NH Landscape

- 28.9% of NH residents age 65 - 74 volunteer and 23.2% of NH residents over age 75 volunteer (higher than national average)
- 65 – 74 year olds volunteer an average of 64 hours per year (lower than national average)
- United Valley Interfaith Project
  - Aging in Community Campaign
Social and Civic Engagement
Options are Plentiful

Examples of Best Practices Nationally:

- Senior Corps
  - Foster Grandparents
  - RSVP
  - Senior Companions
Social and Civic Engagement Options are Plentiful

Recommendations

- Provide social activities for diverse interests and talents of older adults
- Create opportunities for multigenerational activities
- Create opportunities for older adults to be engaged in paid and volunteer employment
- Provide opportunities for older adults to become and/or remain active in political process
QUESTIONS

 Does this information resonate with you?
 Have we missed an important aspect of this domain?
 Are there other NH initiatives that we should highlight?
 Are there other important recommendations to consider?
Quality Physical and Mental Wellbeing Supports are in Place

Research tells us:

- “Health is a state of complete physical, mental, and social well-being, and not merely the absence of disease or injury” (WHO)

- Good health and wellness is considered a critical factor for older adults to remain independent, remain in the community, and participate in activities that give meaning and pleasure to life (Felderman & Oberlink, 2003)
Research tells us

- High health care costs in the final years of life (Lynn & Adamson)
- Current system slow to adapt to challenges of older population (Lynn & Adamson)
- % of adults who are up-to-date on core preventative services is low (CDC, 2012)
- Lack of coordination between medical system (treating illness) and community based organizations (providing preventive services)
Research tells us

- 80% of older adults require care for at least one chronic condition; 50% have multiple chronic conditions; 60% managing three or more prescription medications (Thorpe, Thorpe, Kennelty, & Pandhi, 2011)

- Access to medical care prevents new illness & reduces acute care costs (Thorpe, et al., 2011)

- Focus on weaknesses instead of strengths (Beck, 1999)
Quality Physical and Mental Wellbeing Supports are in Place

Research tells us

- 60+ large part of population but use of mental health services is below expected levels
- Inquiry at primary care physician's office who have limited training and symptoms attributed to aging process (by older adults and physicians)
- Older adults do not self refer to CMH (Persky, 2015)
Quality Physical and Mental Wellbeing Supports are in Place

Research tells us

- Palliative care - decreased emergency room visits and less likely to suffer from depression (Home Care Assistance, 2012)
- Self-Determination Act (1991) - document end-of-life wishes through advance directives
- Only 28% of home health care patients have AD (Jones, Moss, & Harris-Kojentin, 2011)
- NH recognizes only an AD per state statute (Malley, 2012)
Quality Physical and Mental Wellbeing Supports are in Place

Research tells us

- Workforce
- Technology
Quality Physical and Mental Wellbeing Supports are in Place

Current Landscape in NH

- SeniorsCount Frail Elder Community Liaison program
- NH Citizens Health Initiative
- NH Falls Reduction Task Force
- Chronic Disease Self-Management
- Senior Centers (programming in general and Concord Regional VNA)
- SLRC care transitions programs
Current Landscape in NH

- Parish Nurse Center for Wellness (St. Josephs Hospital)
- United Valley Interfaith Project- Aging with Dignity
- Provider Orders for Life Sustaining Treatment (POLST)
- Project ENABLE (Educate, Nurture, Advise Before Life Ends)
- NH Hospice and Palliative Care Organization
Quality Physical and Mental Wellbeing Supports are in Place

Best Practices Nationally

- Community Care Organization (Expanded Chronic Care Model)
- Sickness Prevention Achieved through Regional Collaboration (SPARC)
- Osteopathic Medicine’s Balancing Act Program
- Aging and the National Prevention Strategy
- Support and Services at Home (SASH)
- Community Health Worker Pilot Project
Quality Physical and Mental Wellbeing Supports are in Place

Best Practices Nationally

- Alliance of Community Health Plans
  - Fallon Health
  - Geisinger Health Plan
  - Kaiser Permanent
  - Presbyterian Health Plan
- Illinois Integrated Health Care Clinics
- West Side Court
Quality Physical and Mental Wellbeing Supports are in Place

Best Practices Nationally

- Program of All-Inclusive Care for the Elderly (PACE)
- End of Life Care for Persons with Serious Mental Illness
- Palliative Care Services: Solutions for Better Patient Care and Today’s Health Care Delivery Challenges
Quality Physical and Mental Wellbeing Supports are in Place

Recommendations

- Preventative
- Medical
- Mental health
- Palliative care
- Planning for end of life care
QUESTIONS

- Does this information resonate with you?
- Have we missed an important aspect of this domain?
- Are there other NH initiatives that we should highlight?
- Are there other important recommendations to consider?
Advocates for Elder Issues are Effective

Research tells us:

- Accomplishing effective advocacy
- Greatest social changes in American history
- Lack of collective action for older adults
  - Increased diversity of older adult population
  - Difficulty in unifying interest groups
  - Lack of leadership to build grassroots advocacy
  - Underutilization of think tanks, technology, and other tools
  - Lack of cross-generational solidarity
  - Build support across the political landscape
Advocates for Elder Issues are Effective

Research tells us:

- Cultural Assumptions about Aging
  - Public vision of aging
  - Stereotypes
  - Discrimination
- Recognizing aging concerns as civil rights issues
Advocates for Elder Issues are Effective

NH Landscape

- NH Senior Leadership Series
- State Committee on Aging (SCOA)
- NH AARP
- Elder Rights Coalition (ERC)
- EngAGING NH

Other organizations that support/advocate for aging issues:

- Granite State Organizing Project; NH Citizens Alliance for Action; NH Public Health Association; Healthy Eating Active Living
Advocates for Elder Issues are Effective

Examples of Best Practices Nationally:

- Joint Public Affairs Committee for Older Adults
  - Institute for Senior Action
- California Senior Leaders Program
  - California Senior Leaders Alliance
- Collective Impact
Advocates for Elder Issues are Effective

Recommendations

- Promote positive cultural image of aging through marketing campaign
- Support grassroots advocacy movement
- Utilize civil rights perspective to support the development and passage of elder friendly laws
- Support education and training to establish network of passionate advocates
QUESTIONS

- Does this information resonate with you?
- Have we missed an important aspect of this domain?
- Are there other NH initiatives that we should highlight?
- Are there other important recommendations to consider?
Thank You!

Small Group Discussions

- Introductions
- Confirm dates of next meeting(s)
- Review task and work plan template
- Any comments on current status of research in your domain?
Workgroup Session Agenda

- Introductions
- Review workgroup process, roles and schedule
- Share initial thoughts on the CACL presentation relative to this section